THE UNITED REPUBLIC OF TANZANIA

MINISTRY OF HEALTH AND SOCIAL WELFARE

HIV and AIDS Voluntary Counselling and Testing

Module8: Counselling Skills, Ethical Codes and Supervision of Counselling Practice

National AIDS Control Programme
February 2008
Module 8: Counselling Skills, Ethical Codes and Supervision of Counselling Practice

Session 1 ~ Session 4: Micro Counselling

- Session 1: Micro Counselling: Relationship Building (M8-1)
- Session 2: Micro Counselling: Exploration (M8-2)
- Session 3: Micro Counselling: Understanding (M8-3)
- Session 4: Micro Counselling: Action Planning (M8-4)
Session 5: Ethics in Voluntary Counselling and Testing
Objectives:

1. Discuss ethical issues that arise in the delivery of VCT.
2. Develop effective responses to ethical dilemmas
Ethical issues/dilemmas that arise in the delivery of VCT

- Refusal of partner notification by a positive client
- Mandatory testing to clients
- Clients not showing up for their results
- Clients denying test results
- Counsellor imposing his or her attitudes to the clients
- Counsellor judging his/her client’s behaviour and decision making in line with the counsellor’s own thinking
- Lack of understanding human attitudes playing part in counselling
Effective responses to ethical dilemmas

Important issues to consider are:

• The counsellor should never discuss client's cases with anyone except where permission has been granted by the client to discuss for professional purpose.

• When cases are used for professional purposes the identify of the client should be hidden.
Effective responses to ethical dilemmas

Privileged communication:
• This is any communication, which the counsellor gets from the client during counselling sessions.

• It involves personal things revealed to the counsellor by the client.

• Counselor should take them as secret.
Effective responses to ethical dilemmas

Absolute privileged communication:
• This involves communication, which is not to be divulged to any person under any circumstances.

Qualified privileged communication:
• This implies that the communication is divulged under certain conditions.
• Conditions that a client has intention of causing harm to himself/herself or to other, or in cases where national security is threatened.
Effective responses to ethical dilemmas

Dual relationship:

• Dual relationship signifies the existence of more than one relationship. For example employer-employee relationship and counsellor – client relationship.

• Dual relationship may hinder development of appropriate counsellor – client relationship.

• To avoid such a situation a counsellor should not engage in erotic touching or sexual relationship with a client.

• A counsellor should make the limits known to any client who seems to be working towards such a relationship.
Major types of values to be observed by counsellors

- Social values
- Moral values
- Religious values
Standards to be reviewed in practicing counseling

- Maintainace of confidentiality
- Seek consultation for difficult issues.
- Be aware of individual and cultural differences
- Client’s uniqueness and self-concept can guide a counsellor.
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Session 6: Introduction to Ethics in VCT
Objectives:

1. Define ethics

2. Explain counsellor code of ethics

3. Discuss the reasons for obtaining informed consent and maintaining confidentiality in the continuum of care.

4. Discuss shared confidentiality in the continuum of care

5. Discuss the importance of shared confidentiality in continuum of care
Introduction

• An effective counselling session depends on counsellor observing professional ethics.

• Counsellor’s professional ethics are systematic body of moral principles that guide or determine the counsellor’s behaviour in his/her relation.
Need for counsellor ethics

• The professional ethics guide and protect the professionals in their practice.
Counsellor Ethical code of Conduct

Counsellor should adhere to ethical code of conduct:
• Ensure privacy of clients during counselling
• No HIV test shall be performed without informed consent from the client
• Laboratory test results shall be kept safety under lock and key and released only to authorized persons
• Test results shall not be released to a third party without a client’s written consent
• Counsellors shall promote shared confidentiality to clients encourage them to share their sero-status with their significant others and health personnel for referrals
• Counsellors must avoid stigma
Professional ethics and their implication in counselling process

- Acceptance
- Consistency
- Trust and Confidentiality
- Informed consent
- Protection against discrimination
- Purposeful expression of feelings
- Self-determination
Four principles that builds standards for VCT counsellors

Standards are defined as a framework within which to work in accordance to code of professional ethics.

Standards are built of 4 principles.

• Competence
• Responsibility
• Confidentiality
• Accountability
Informed consent

Informed consent is deliberate permission given by the client to a health care provider to proceed with the proposed HIV test procures

- Carer takers will have opportunity to have knowledge on HIV and how PLHA care
- PLHA shall have access to have support from HIV related organization
- Home based care providers will have access to give care at home
Shared confidentiality in the continuum of care is process of a client releasing his or her sero-status information to other health care providers’ legal representatives and relative.
Importance of Shared confidentiality continuum of care

• To provide needed care and infection control

• Assist the couple to understand and focus on their ability to enhance the health and well-being of the infected partner

• Parents who have shared their HIV status with their children tend to experience less depression than those who do not
Major responsibilities of counsellor

☑ To provide counselling services to client/patients in need while in hospital setting.
☑ To develop a net working and referral system in collaboration with the management of the hospital.
☑ To develop a recording system this always has to be updated and to report to hospital management.
☑ To make a time table for counselling and follow up of clients/patients.
☑ To sensitize hospital, community on counselling and to promote counselling in the hospital.
☑ To set time for supervision for both peer group and vertical supervision.
To provide on the job training on counselling to other professionals working in the hospital.
To be a resource person for the entire hospital and community.
To collaborate with other counsellors and professionals in the hospital and work as a team.
To adhere to professional ethics when providing counselling services to clients/participants.
To keep all information on clients/patients confidential.
To carry out any other job related to counselling as will be given by the hospital.
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Session 7: Counsellor Support

M8-7
Objectives:

1. Identify the main features counsellor support

2. Recognise the importance of stress management and preventing burnout.

3. Develop strategies for addressing stress and preventing burnout
Introduction

Counselling in HIV infection and the AIDS disease is stressful. Counsellor meets with people who have difficult situations. Each day the counsellor is confronted with the reality of HIV, illness, death, grief and loss. Therefore counselors needs assured support.
Definitions

• **Burnout** is a condition which progresses overtime until the sufferer reaches a point of complete physical, emotional and mental exhaustion (complete burn-out).

• Burnout is the result of stress overload, when demands and pressures placed on a counsellor exceeds their resources. It is a normal neuropsychological response to excessive stress, and not an indication of deficiency or weakness in those who experience it.
• **Stress** can be defined as anything that stimulates an individual and increases their level of alertness.

• Too much stress becomes unpleasant, tiring and may ultimately damage health and well-being. Too much stress interferes with work performance.

• Too much stress interferes with work performance.

• Stress often originates from an external event or circumstance that places a demand on an individual’s inner or external resources.
Reasons for counsellor support

To empower counselors on
• How to inform client the HIV test results, especially the HIV positive or discordant couples.
• Deal with Couples refusing to be separated, in counseling situations.
• Disclosing results to partners.
• Deal with Conflict between counselling and giving advice.
• To deal with Conflict between counseling and giving false hope.
• Deal with one’s own emotions.
• Counselor not having enough knowledge of issues being dealt issues
  Like fear of HIV infection, fear of stigma.
• Un resolvable uncertainties, e.g. natural history of HIV
• Procedures used on the:
  - Reliability of test kits
  - Availability of retroviral medicines
• Family/loved ones' involvements
• Over-work
• Role expansion
• Advocacy whereby the counselor has to advocate for the vulnerable.
• Media that may be biased or uncaring for the affected and counselors.
• Policy formation that does not involve the major players – the clients.
• Clinical responsibilities emanating from diminishing resources, and political pressure.
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Session 8: Counsellor Supervision

M8-8
Objectives:

1. Identify the basic concepts and technical and administrative counselling supervision

2. Recognise the roles and responsibilities of supervisors and supervisees
Introduction

• Supervision is virtually for education/training purposes, supervisors should announce their supervisory visits in advance. Supervisor is advised to include indication of what MODE of supervision he/she would use.

• Prepare and send checklist to the counsellor / supervise of things to be dealt with during the forthcoming supervision.
Basic concepts in counselling supervision

Technical supervision:
• In VCT Supervision the exercise is to concentrate on supporting and providing skills to the counsellors

Administrative supervision looks at, work schedules, Peer supervision meetings, and administrative procedures.

Administrative procedures looks on:
• Observance of laid down procedures and guidelines
• Record keeping, e.g., Monthly, Quarterly and Annual.
• Client Intake Record Forms
• Record of preventive materials (condoms) issued upon requests
The roles and responsibilities of supervisors and supervisee

Roles of a supervisor:
• Announce supervisory visits in advance
• Prepare a checklist of things to be dealt with during forthcoming supervision visit.
• Maintain good supervisor/supervisee relationship
• Give supervision feedback to supervisee
• Plan for subsequent supervisory visit
• Observes laid down procedures and guidelines
• Check records of preventive materials like condoms issued upon requests
• Observes record keepings
• To write a supervision report
Roles of supervisee

• Ask client’s permission for supervisor to sit in the counselling interview

• Write out the good or problematic discussion

• Present case study during supervisory visit.

• Feedback and discussion of the session.
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Session 9: National VCT Guideline
Objectives:

1. Discuss the National VCT guideline

2. Relate the guideline to HIV counselling

3. Describe the values and attitudes of an effective counsellor
National VCT Guideline 2005 (11 section)

Section 1: Introduction
Background information of VCT in Tanzania.

Section 2: Definitions, Fundamentals, Key Principles and Benefits of VCT
Gives the Definitions, Fundamentals, Key Principles and Benefits of Voluntary Counselling and Testing

Section 3: Management of VCT services: Roles and Responsibilities of different levels
Discusses the Management of VCT Services including Roles and Responsibilities of different levels
Section 4: Voluntary Counselling and Testing
Explains the requirements for Voluntary Counselling and Testing Sites

Section 5: HIV and AIDS Counselling
Discusses requirements and conditions for HIV / AIDS Counselling in details

Section 6: HIV Testing
Discusses the requirements and features of HIV Testing

Section 7: Infrastructure, Human Resources and Basic Organization of VCT sites
Gives the Infrastructure, Human Resources and Basic Organization of Voluntary Counselling and Testing sites
Section 8: Training, Supervision and Certification
Explains the rationale and modes of Training, Supervision and Certification of human resources in VCT

Section 9: Quality assurance
Discusses the rationale of Quality Assurance and how to do it in VCT

Section 10: Monitoring and Evaluation of VCT services
Shows the need for Monitoring & Evaluation of Voluntary Counseling & Testing Services & how they should be carried out

Section 11: Accreditation of VCT sites
Provides the procedure for Accreditation of VCT Sites
Conclusion

• The national VCT guidelines have been developed to provide VCT services providers and managers with a framework within which to operate and for clients to be informed of their rights. It provides standard operation procedures (SOPs) in the delivery of VCT services.

• They provide the roles of managers at different levels of health care system.

  • provide standards and protocols for VCT implementation.
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Session 10 & 11: Field Experiences

Session 10: Field Practice (M8-9)
Session 11: Sharing Field Experiences (M8-10)
Purpose of Field Practice at VCT sites:

- To put theory into practice and apply skills on a real client.
- To practice post training counselling in real situation
- To gain more assistance from counsellor supervisor so as to strengthen basic and specific skills of counselling
Practicum procedures, objectives /requirements

Practicum procedures:

- Report to the allocated VCT sites
- Introduce self at the centre.
- Familiarize with staff and get orientation of the site
- If possible observe one counselling session from the supervisor.
- Conduct counselling under supervision and that one will not be assessed the next counselling session will be assessed.
- Make self assessment starting with strong point and ending with weak points.
- Able to indicate areas which need more input or emphasis.
Requirements

• Trainee should select and write an interesting case and present for 20 minutes.

• 5 minutes will be used for discussion both trainees and facilitators will participate.

• Trainees can use the available format but any addition is recommended.
HIV/AIDS Counselling and testing under selected supervisor

- A counsellor supervisor will use a guide to assess a trainee at practicum site during counselling.
- A trainee will receive instruction and help from the supervisor.
- A trainee needs to co-operate with the supervisor as much as possible.

Plenary discussions is very important this include
- Monitoring tools
- Protocol in HIV testing
- How may counsellors and their roles. Etc.