

Tutorial letter 202/1/2018

HIV/Aids care and counselling PYC2605

Semester 1

Department of Psychology

Feedback on Assignment 02

INTRODUCTION

Dear Student,

Well done! You have now completed your two assignments for this course and you have almost reached your destination. The main purpose of this tutorial letter is to give feedback on Assignment 02. We hope that you really enjoy your studies and that you experience this course as one that really makes a difference in your own lives as well as in the lives of your loved ones and your community.

Before we discuss your assignment let us talk about a few points of importance. Please remember that it is your own responsibility to make sure that Unisa has received and marked your assignments. Please check *myUnisa* regularly to see if your assignments have been received and marked. If you check the system regularly and it seems that an assignment was not received or marked, please direct your enquiries to Students Assessment and Assignment Department (Assignment and Examination section). Please do not contact your lecturers to find out what happened to your assignments. Your multiple-choice assignments go directly to the Assignment section to be marked by computer. Lecturers do not see your multiple-choice assignments at all.

Please direct your administrative enquiries (like examination admission, dates or venues) to the examination department.

We trust that you have received your Practice Examination Paper in Tutorial Letter 102. It is available on *myUnisa* under 'Official study material'. Please try to do this paper without the book in the two hours allowed for the paper, and mark it yourself. How did you do? Could you identify and rectify any problem areas?

Feedback on Assignment 02

Table 1 gives a summary of the correct answers to Assignment 02.

We hope that you have learned more than theory in this assignment and that you are stimulated to read more about new developments in the HIV and Aids field. Best wishes with all the work ahead, and make the best of it!

Table 1. Correct answers to Assignment 02.

Question	Assignment 02 correct answer	Question	Assignment 02 correct answer
1	3	11	3
2	1	12	3
3	2	13	1
4	2	14	3
5	3	15	3
6	3	16	4
7	2	17	3
8	1	18	3
9	3	19	1
10	2	20	4

We will now discuss each one of the questions in more detail. All page number included in the feedback refers to pages in the 6th edition of your prescribed book.

QUESTION 1

Rinse your mouth with (a)_____ if it has come into contact with semen and (b)_____ immediately afterwards.

- (1) (a) warm water; (b) brush your teeth
- (2) (a) a strong mouthwash; (b) do not brush your teeth
- (3) (a) cold water; (b) do not brush your teeth
- (4) (a) hot water; (b) use a strong mouthwash

Feedback on Question 1

The correct answer is 3. Cold water is the safest as hot water could damage your mouth, especially if it is already affected in some way. Brushing your teeth and using a strong mouthwash could also damage the skin in your mouth and increase your risk for exposure to the HI virus. Read "General safer sex rules" (p. 241) in your prescribed book for more information.

QUESTION 2

According to Mbiti, traditional African beliefs are based on principles such as

- (1) the survival of the community
- (2) the interest of the individual
- (3) union with one's own rational being
- (4) independence

Feedback on Question 2

The correct answer is 1. Both Mbiti and Sow highlights principle focussing on collective interest, the community, and union with nature. The other options are incorrect as they focuss on individuality which is in line with Western thinking. Read "The importance of community life in Africa" (p. 325) for more information.

QUESTION 3

Cultural beliefs and customs should be respected by Aids educators who work in Africa. The following cultural practices practised by some traditional Africans are, however, dangerous and should be changed:

- (a) dry sex;
- (b) prostitution;
- (c) widow cleansing;
- (d) offerings to ancestors;
- (e) swallowing semen.

The correct answer is

- (1) (b) and (e)
- (2) (a) and (c)
- (3) (c) and (e)
- (4) (a) and (d)

Feedback on Question 3

The correct answer is 2. The Aids educators are not encouraged to interfere in cultural beliefs of other people. However, some of the traditional behaviours are indeed harmful to people's health and should be changed. Prostitution and swallowing of semen are not cultural specific practices, (option 1 and 3 incorrect), while offering to the ancestors is not a dangerous practice. Read "Changing negative cultural behaviour" (p. 332) for more information.

QUESTION 4

When you counsel someone who has a different view of the world from yours, it is important to

- (1) make sure that the client understood your values.
- (2) show respect for your client's ideas.
- (3) ensure that you and your client share the same views or ideas.
- (4) allow the client to 'see the world through your eyes'.

Feedback on Question 4

The correct answer is 2. The counsellor should respect the views and ideas of the client. This does not mean that the client has to understand your views and ideas nor that you have to share the same views and ideas (options 1 and 3 incorrect). The counsellor should rather try to see the world through the client's eyes; not implying that your views and ideas should change, but rather to better understand your client. Read "Respect" (p. 344) for more information.

QUESTION 5

The aim of the first phase of counselling (relationship building) is to establish an open relationship in which the client will feel safe enough to address personal issues and to disclose information to the counsellor. In which of the following statements is the counsellor seen to achieve this goal?

- (a) Hello, do have a seat, can I offer you a cup of tea? I'm sure you will find tea welcome on a day as cold as this. Hasn't the weather been terrible lately?
- (b) Hi, my name is Jill and I am the counsellor at this clinic. The aim of our counselling sessions is to provide a safe space in which to discuss any issues or concerns that you may have.
- (c) I would like to reassure you that anything you say to me during these meetings will be treated with complete confidentiality, and will not leave this room.
- (d) I can understand that your partner's rejection must have hurt very much, and I don't think he/she was being fair or gentle in making that response.

The correct answer is

- (1) (a) & (b)
- (2) (b) & (d)
- (3) (b) & (c)
- (4) (c) & (d)

Feedback on Question 5

The correct answer is 3. Options b and c promotes an open and safe relationship. Option a steers the conversation away from the counselling session and option d conveys a judgemental attitude. Read "Phase 1: Relationship building" (p. 353) for more information.

QUESTION 6

Language barriers between counsellors and clients often pose problems, especially in South Africa with its 11 official languages. The following points should be kept in mind when using the services of an interpreter or translator:

- (a) Be sensitive to age and class differences between the client and the translator.
- (b) Make sure rapport does not develop between the client and the translator, as it may jeopardise your relationship with the client.
- (c) Communicate directly with the client to reinforce interest in the client, even if the client does not understand you and has to listen to the translator asking the question.
- (d) Interrupt the translator if you get the feeling that the discussion is not going the way that you intended.

The correct answer is:

- (1) (a) and (b)
- (2) (b) and (c)
- (3) (a) and (c)
- (4) (b) and (d)

Feedback on Question 6

The correct answer is 3. Rapport should be established between the client and the interpreter as the client has to feel comfortable with and trust a third party involved in the session (alternative b incorrect). The client and translator should never be interrupted as it could lead to important information being withheld by the client. It is also rude and may hamper your relationship with both the client and the translator (alternative d incorrect). Read "Language barriers" (p. 389) for more information.

QUESTION 7

If an illiterate person wishes to give signed consent to HIV testing

- (1) the person should be advised to rather give verbal consent.
- (2) the right hand thumbprint can be used in place of a signature.
- (3) a cross can be made instead of a signature.
- (4) the person should be informed that the law does not make provision for illiterate people to sign consent forms.

Feedback on Question 7

The correct answer is 2. The law makes provision for illiterate people to provide informed consent using their right hand thumbprint. The other options are therefore incorrect because it does not adhere to the law. In addition, as you need concrete evidence that consent was given by your client neither verbal consent nor a cross will be sufficient as it cannot be linked to a specific individual. Read "Legal and ethical aspects" (p. 396) for more information. You could also look at the "National HIV testing services: Policy" that is accessible through the webpage of the Department of Health.

QUESTION 8

To tell a client that he or she is HIV positive is one of the most difficult things that a counsellor can do. Although there are no hard and fast rules when sharing the news, which of the following issues below is/are important?

- (1) Tell the client openly, directly and without beating around the bush that he or she is HIV positive.
- (2) Tell the client as soon as he or she enters your office that you have very bad news and that he or she had better sit down. Give the bad news as soon as the client is seated comfortably.
- (3) It helps people to cope and take their mind off things if they are inundated with new information. Give the client as much information as possible after giving the results.
- (4) Take control over the situation and do not allow the client's needs to lead your counselling as this may have devastating effects that you might not be able to contain.

Feedback on Question 8

The correct answer is 1. Receiving a HIV test result is a stressful event and the counsellor should ensure that the client receives the correct information. Therefore, do not distort the message with emotional words (use neutral words) and beating around the bush (be direct). A counsellor should however be sensitive at all times. Allow space for the client's reactions and needs, and do not try to take his/her mind off things. Read "Sharing the results with the client" (p. 407) for more information.

QUESTION 9

Which of the following statements about stress research is true?

- (a) Chronic stress was found to create greater susceptibility to many diseases such as flu, dermatitis and the recurrence of herpes symptoms.
- (b) Self-efficacy was associated with a slower deterioration of the immune system in HIV-infected individuals.
- (c) Research has found that psychological factors such as emotional inhibition, a negative self-concept and a lack of social support, did not contribute to a more rapid disease progression.
- (d) Looking after a partner with dementia, especially without social support, as well as the loss of a partner, significantly weakened the immune system of the affected other.

The correct answer is:

- (1) (a), (b) and (c)
- (2) (b), (c) and (d)
- (3) (a), (b) and (d)
- (4) (a), (c) and (d)

Feedback on Question 9

The correct answer is 3 as these alternatives were supported by research. Research also supported assumptions that psychological factors, including those mentioned under alternative c, contribute towards more rapid progression from HIV infection to Aids. Read "Stress and the immune system" (p. 433) for more information.

QUESTION 10

Which of the following statements about ethical concerns in counselling research is true?

- (1) A counsellor should take the side of his/her client when dealing with family issues.
- (2) A counsellor should avoid stereotyping as it may hamper the counselling process.
- (3) Note keeping is essential to the counselling process and should be done at all times.
- (4) Confidentiality is non-negotiable and may never be broken by the counsellor under any circumstances.

Feedback on Question 10

The correct answer is 2. Stereotyping could communicate a negative attitude, offend others, hurt their feelings, and as such hamper the counselling process. A counsellor should neither be drawn into alliances with individuals nor with groups as this is crossing of professional boundaries. Attentive listening is essential to the counselling process. Note keeping is not essential to the counselling process as it could hamper attentive listening. In addition, notes may not be kept should the client refuse consent. Finally, when a client poses a danger to himself/herself confidentiality may be broken. Read "Ethical concerns in counselling" (p. 465) for more information.

QUESTION 11

The process of bereavement

- (1) is triggered only after the actual loss of something dear to you.
- (2) is defined as a process that is triggered by the actual loss of another human being.
- (3) can also be triggered by the anticipated loss of something dear to you.
- (4) can be understood in terms of stages, which follow each other in a fixed sequence.

Feedback on Question 11

The correct answer is 3. Bereavement can be triggered by the anticipated loss of something dear to you and not only after the actual loss. Bereavement is not only linked to the loss of humans; it is also linked to the loss of other animate objects (such as a pet), inanimate objects (such as a valuable item), and abstract possessions (such as the loss of your status or dignity). The idea that bereavement follows a strict sequence of stages has been refuted by more recent theories of bereavement. Read "Bereavement and attachment theory" (p. 470) for more information.

QUESTION 12

Terry, whose partner died from an Aids related illness, shows signs of withdrawing her emotional energy when she

- (1) accepts that her partner was the love of her life and that she will never love anyone else in the same way again.
- (2) is able to accept her 'death-in-life', in that, while she may not be physically dead, the loss has resulted in her own emotional and spiritual death.
- (3) lets go of the hope that her partner will miraculously re-appear.
- (4) is able to reckon with the devastating reality that her life has prematurely stopped.

Feedback on Question 12

The correct answer is 3. Reinvestment in life is an aim of bereavement counselling. This includes withdrawing emotional energy from the deceased and 'investing' it elsewhere. Alternative 3 is correct, because the other three alternatives do not suggest any reinvestment in life, which is only possible when some emotional energy is withdrawn from the deceased person. Read the introduction to this chapter as well as "Reconstructing meaning" (p. 478) for more information.

QUESTION 13

Occupational stress can have a negative impact on our lives, our work and our relationships and it can lead to burnout if not addressed appropriately. Burnout can be defined as

- (1) a syndrome of physical and emotional exhaustion, involving the development of a negative self-concept, negative job attitudes and loss of concern or feelings for clients.
- (2) the perception of being unable to cope with an internal or external expectation or demand in the workplace.
- (3) feelings of sadness and unhappiness due to an unbearable demanding workload resulting in excessive stress.
- (4) a syndrome of behavioural and physiological symptoms such as lack of energy, neglect of personal appearance and a loss of appetite.

Feedback on Question 13

The correct answer is 1. This definition is in line with the definition provided for occupational stress (see “Stress, compassion fatigue and burnout” on p. 628). Option 2 could be correct but as this is a broad definition, option 1 is the more correct alternative. Strong feelings of sadness is included in the stress and burnout checklist (p. 630) but not in the definition of occupational stress. In addition, you will find that feelings of sadness and unhappiness forms part of the affective symptoms, that lack of energy forms part of the behavioural symptoms and loss of appetite forms part of the physiological symptoms of depression (p. 440).

QUESTION 14

Prison A refuses to provide medical treatment for inmates who are HIV positive, while Prison B refuses to provide information on HIV. Which basic human rights applying to all citizens are infringed upon by Prison A and Prison B?

- (1) Prison A: the right not to be unfairly discriminated against; Prison B: the right to bodily, psychological and educational integrity
- (2) Prison A: the right to bodily and psychological integrity; Prison B: the right not to be unfairly discriminated against
- (3) Prison A: the right of access to healthcare services; Prison B: the right to information and basic education
- (4) Prison A: the right to healthcare and support services; Prison B: the right to bodily and psychological integrity

Feedback on Question 14

The correct answer is 3. Medical treatment contributes to bodily integrity which includes control over the body while the refusal of information on HIV and to distribute condoms are unfair discrimination. Option 1 is incorrect due to the reference to educational integrity, Option 2 is incorrect as safer sex is not a basic human right, and Option 4 is incorrect as support services is not a basic human right. Read “The constitution and the legal framework” (p. 648) for more information.

QUESTION 15

According to The Choice on Termination of Pregnancy Act, can a seventeen year old girl consent to termination of pregnancy?

- (1) Yes, but the doctor or midwife must advise her to speak to her parents or other family members before having the abortion. As soon as the girl has spoken to someone in her family about the abortion, it can be done.
- (2) No, a woman may not request an abortion without the knowledge and consent of the baby's father – even if she is unmarried and only seventeen years old.
- (3) Yes, but the doctor or midwife must advise her to speak to her parents or other family members before having the abortion. However, the girl does not have to follow this advice.
- (4) No, a girl should be at least eighteen years old before she can consent to the termination of her pregnancy without her parents' approval.

Feedback on Question 15

The correct answer is 3 (therefore alternative 1 is incorrect). The father neither has to consent to the procedure nor be aware thereof and a woman of any age may consent to an abortion. Read "Termination of pregnancy" (p. 425) for more information.

SECTION B: GUIDANCE TRACK**QUESTION 16**

Thandiwe's eldest daughter is 10 years old and attending a school where Aids education is offered to them. Which of the following meet the basic requirements for successful Aids education?

- (a) Her school has appointed a special teacher who is very knowledgeable about HIV and Aids and gives Aids education only to all the senior children in the school. (b)
- (b) Aids education in her school starts in Grade 1, because the school principle argued that children at this age are very receptive towards accepting a healthy life style.
- (c) The Aids education forms part of a larger lifeskills education programme that is presented to the whole school once a week in the school hall.
- (d) The programme was devised in cooperation with the community and includes the input from parents, the community- and spiritual leaders.

The correct answer is:

- (1) (b), (c) and (d)
- (2) (a) and (d)
- (3) (a), (b) and (d)
- (4) (b) and (d)

Feedback on Question 16

The correct answer is 4. Aids should not be taught in isolation and should start as early as the foundation phase. Aids education for the primary grades should rather be presented to the children by their class teachers. Read "Basic requirements for integrated Aids education" (p. 253) for more information.

QUESTION 17

The reason why children in the intermediate school phase (Grades 4 to 6) are prone to acquire myths is because

- (1) group pressure will never be more important than at this stage, causing children to believe what their peers believe without questioning the validity of these beliefs.
- (2) their awakening sexual feelings are confusing to them and cause them to entertain many irrational fears, making it easy to believe myths about the things they fear.
- (3) children at this age are not yet fully capable of hierarchical classification and are therefore not able to classify things into 'cause' and 'non-cause' (i.e. to distinguish between fact and fantasy).
- (4) children at this age like storytelling, and this lends itself to the acquisition of myths.

Feedback on Question 17

The correct answer is 3. For this reason (see option 3) they get confused between fantasy and fact. Furthermore, as the entertainment of myths are linked to cognitive development it is neither caused by group pressure, the awakening of sexual feelings, nor by the liking of storytelling. Read "Acquisition of myths" (p. 276) for more information.

QUESTION 18

Jacob is eighteen years old and in Grade 12. He received limited Aids education at school, and the teacher made crucial mistakes in his approach. Which of the following are MISTAKES?

- (a) Assuming that all children abstain from sexual intercourse.
- (b) Telling the learners that they have the right to postpone sexual activity.
- (c) Focusing on healthy behaviours and the ability to plan ahead.
- (d) Frightening the children by explaining the horror of HIV and Aids.

Which combination correctly identifies the mistakes?

- (1) (b) and (c)
- (2) (b) and (d)
- (3) (a) and (d)
- (4) (a)

Feedback on Question 18

The correct answer is 3. Integrated Aids education in this phase should focus on healthy behaviours rather than on the medical aspects of the disease. Children have the right to postpone sexual activity, and it is even advisable. Furthermore may the ability to plan ahead prevent these children from getting involved in unsafe behaviour.

On the other hand should one not assume that all students abstain from sexual intercourse and issues related to HIV and Aids should be explained as real and vivid as possible but not with the aim to frighten the learners. Read "Aids education and life orientation in the further education phase" (p. 298) for more information.

QUESTION 19

According to Pargament's research, religious factors can

- (1) provide a framework of meaning to a patient, which can facilitate the understanding and integration of problematic life experiences.
- (2) be more of a hindrance than a help when dealing with life-threatening diseases.
- (3) complicate the health of patients, because they mostly encourage feelings of guilt.
- (4) have a positive effect on the health of patients, not only as coping mechanisms, but also by opening up the possibility of a miracle.

Feedback on Question 19

The correct answer is 1. This is especially relevant when circumstances seem unanswerable or events seem negative. Pargament emphasised the potentially positive effect of religion on health which is opposite views from options 2 and 3. Option 4 – the possibility of a miracle – was not reflected in Pargament’s research. Read “Religious coping mechanisms” (p. 501) for more information.

QUESTION 20

One of the fundamental needs of every child is the need to believe that they are part of something bigger than themselves and that the world is more than a physical reality. This is the need for

- (1) protection.
- (2) participation.
- (3) identity.
- (4) transcendence.

Feedback on Question 20

The correct answer is 4. Protection, participation and identity are also fundamental needs and you could read “The needs of the child” (p. 532) for more information on these fundamental need.

SECTION C: CARE TRACK**QUESTION 16**

Patients with Aids often suffer from respiratory problems such as difficulty in breathing, shortness of breath and infections. Advise home-based caregivers to seek professional help if the patient in their care develops any of the following symptoms:

- (a) high fever
- (b) discoloured sputum
- (c) severe pain in the chest
- (d) a cough that lasts for more than 3 weeks

The correct answer is:

- (1) (c)
- (2) (b) and (d)
- (3) (a), (c) and (d)
- (4) (a), (b), (c) and (d)

Feedback on Question 16

The correct answer is 4. Home-based caregivers should seek professional help if the patient has a high fever, discoloured sputum or blood in the sputum, chest pain and a persisting cough. Read “Respiratory problems” (p. 601) for more information.

QUESTION 17

The prevention of constipation in an HIV positive person should involve the following measures:

- (a) The intake of fluids, such as water and fruit juices, as well as an increase in fresh fruits and vegetables.
- (b) The intake of a low-fibre diet, rich in nutrients, should be increased if tolerated well by the patient.
- (c) Certain medications that can cause constipation (e.g. codeine) should be avoided.
- (d) The patient should get involved in exercise at frequent intervals.

The correct answer is:

- (1) (a) and (c)
- (2) (a) and (b)
- (3) (a), (c) and (d)
- (4) (b) and (d)

Feedback on Question 17

The correct answer is 3. The management of constipation focusses on the softening of faeces in the intestines. The formation of bulk assists with the softening of faeces which is dependent on fluid and fibre intake. Certain medications as well as low activity levels could contribute towards constipation. The only wrong option is (b) as the intake of a HIGH-fibre diet is important to prevent constipation and as the nutritional content of the food will not impact on the formation of bulk and the softening of faeces in the intestines. Read "Constipation" (p. 595) in your prescribed book for more information.

QUESTION 18

The purpose of palliative care is to

- (1) alleviate a patient's suffering by terminating all medical treatment to bring death and thus relief to the patient as soon as possible.
- (2) take care of the physical needs of the patient, because the patient is too sick to care about psychological or spiritual needs.
- (3) provide relief from pain and other distressing symptoms, without hastening or postponing death.
- (4) do anything in one's power to preserve life and therefore to try new anti-retroviral medications and other therapies to try and save the patient's life.

Feedback on Question 18

The correct answer is 3. The purpose of palliative care is to affirm life but also to see dying as a natural process. Therefore, while pain and other distressing symptoms are relieved, death is neither hastened, nor postponed. The patient should still be cared for both psychologically and spiritually. Read "Palliative care of aids patients" (p. 623) for more information.

QUESTION 19

HIV can enter the bloodstream through broken skin. How can a health care worker protect her or his skin?

- (a) Use hand lotion to prevent skin cracking.
- (b) Apply lotion right after washing your hands with an antimicrobial solution.
- (c) Cover skin lesions on your hands with waterproof dressings.
- (d) Refrain from direct patient care if you have an oozing skin lesion.

The correct answer is:

- (1) (a), (c) and (d)
- (2) (a) and (d)
- (3) (b) and (c)
- (4) (a), (b), (c) and (d)

Feedback on Question 19

The correct answer is 1 as these alternatives will contribute towards healthy hands and prevent HIV to enter the bloodstream through broken skin. Although lotion protects the skin it should not be applied directly after washing one's hands with an antimicrobial soap because the lotion might interfere with the action of the antimicrobial soap, rendering it ineffective to kill microbes. Read "Covering skin lesions" (p. 553) in your prescribed book for more information.

QUESTION 20

Home-based care is often the best way to look after someone with Aids. Which one or more of the following, however, highlight(s) the potential problems associated with home-based care?

- (1) Many home-based caregivers do not care for their patients and do it only for the money.
- (2) Owing to all the unknown home-based caregivers in the home, the patient has no privacy.
- (3) Patients often do not take their medication correctly, because they become used to the home-based caregivers and do not listen to them.
- (4) Families often do not want home-based caregivers in their homes because of stigma, ignorance and superstition.

Feedback on Question 20

The correct answer is 4. Unfortunately stigma, ignorance and superstition impact on our day to day living, and could prevent people from making use of positive interventions. Option 1 is incorrect as it is an assumption without evidence to support it. In reality caregivers often end up with exhaustion and burnout because of their passion for their patients. Patients often feel isolated and addressing this issue is of more importance than privacy (option 2 incorrect). Non-compliance often result because of a lack of knowledge or medication being too expensive (alternative 3 incorrect). Read "Potential problems with CHBC" (p. 515) in your prescribed book for more information.

The End