

**PYC2605** ( 496155) October/November 2017  
**RPY2605** ( 473742)

**HIV/AIDS CARE AND COUNSELLING**  
**Psychology**

Duration 2 Hours

70 Marks

**EXAMINERS**

FIRST

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Closed book examination

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This paper consists of 19 pages plus instructions for completion of a mark reading sheet.

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This paper consists of 70 multiple-choice questions which must be answered on the mark reading sheet

Your mark for this examination will be converted to a mark out of 80. Note that your mark for Assignment 01 and 02 will be converted to your year mark (a mark out of 20) which will be added to the mark you obtain for this examination paper.

After completing your answers, you must hand in the following:

- (i) The mark reading sheet.
- (ii) This examination paper. (All the pages must be handed in.)

**ENSURE THAT YOU HAVE WRITTEN YOUR STUDENT NUMBER, MODULE CODE AND UNIQUE NUMBER ON THE MARK READING SHEET.**

- ANSWER THE FOLLOWING SEVENTY MULTIPLE CHOICE QUESTIONS ON THE MARK READING SHEET
- FOLLOW THE ATTACHED INSTRUCTIONS CAREFULLY.
- SUBMIT YOUR COMPLETED MARK READING SHEET TOGETHER WITH THIS EXAMINATION PAPER.

**NO STAPLES PLEASE!**

**Note: Section A (Question 1 to 60) is compulsory for all students. Students may then choose between Section B (Guidance track) and Section C (Care track).**

## SECTION A

### QUESTION 1

Which HI virus type is predominant in Southern Africa?

- (1) HIV 1 Subtype B
- (2) HIV 1 Subtype C
- (3) HIV 2 Subtype B and C in combination
- (4) HIV 2 Subtype C

### QUESTION 2

Choose the MOST CORRECT and most COMPLETE answer to complete the following sentence Aids is called an 'acquired' disease because it is \_\_\_\_

- (1) caused by an organism that enters the body from outside
- (2) caused by an organism that enters the body from outside, and acquired by malnourished people
- (3) acquired and not genetically inherited, and therefore a person can do nothing to prevent it
- (4) acquired and not genetically inherited, and is caused by an organism that enters the body from outside

### QUESTION 3

The defences of the immune system can be divided into two main groups the non-specific defences, for example (a) \_\_\_\_, and the specific defences, for example (b) \_\_\_\_

- (1) (a) the skin and mucous membranes, (b) plasma proteins
- (2) (a) phagocytes (e.g. macrophages), (b) lymphocytes (e.g. T cells and B cells)
- (3) (a) plasma proteins, (b) phagocytes (e.g. macrophages)
- (4) (a) T lymphocytes (e.g. CD4+T cells), (b) B lymphocytes (e.g. B memory cells)

### QUESTION 4

When a person is newly infected with HIV, the immune system responds in the following way The macrophages

- (1) manufacture antibodies, which attach to the viral proteins in an attempt to protect the immune system against the virus
- (2) fulfil an antigen-presenting role by engulfing and processing the HI virus
- (3) are the central regulatory cells of the immune system which stimulate the immune response
- (4) are helper cells specially adapted and designed for to deal with specific invaders such as HIV

### QUESTION 5

What role does antibodies play in the immune response to foreign pathogens?

- (1) In collaboration with the killer T cells, they directly attack and kill pathogens
- (2) They generate antigens to present to the CD4+T cells so that the CD4+T cells can organise a proper immune response against the pathogens
- (3) They attach themselves to the outermost antigens of the pathogens and slow the pathogens down, which makes them easy victims for the phagocytes to ingest
- (4) They only function as a type of memory, so that if we are infected by the same pathogen in future, we will be immune against that pathogen

[TURN OVER]

**QUESTION 6**

Statistically, more women than men are infected with HIV in Africa. Which one of the following is an indication of a woman's social vulnerability, making her more prone to HIV infection than a man?

- (1) A woman is often forced to comply with the cultural practice of living with her in-laws after her husband has died
- (2) During sex, a woman is exposed to semen for a longer time than a man is to vaginal fluids, and semen contains higher concentrations of HIV than vaginal fluids
- (3) Women with poor and deprived living conditions are often forced to become sex workers in order to survive
- (4) Women become more vulnerable to HIV infection after menopause, and harsh living conditions often brings on an early menopause

**QUESTION 7**

The World Health Organization (WHO) provides the following recommendations on universal access to safe blood and blood products

- (a) No blood should be accepted from homosexual donors
- (b) All donated blood should be screened for HIV, hepatitis B and syphilis
- (c) Donors should not be paid for donating blood
- (d) Collection of blood from low risk, regular donors

The correct answer is

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

**QUESTION 8**

Healthcare workers should evaluate the feasibility of replacement feeding by assessing if replacement feeding is \_\_\_\_\_

- (1) acceptable, feasible, affordable, sustainable and safe
- (2) acceptable, feasible, freely available, sustainable and safe
- (3) acceptable, followed, affordable, sustainable and supported
- (4) applicable, feasible, affordable, supplied and safe

**QUESTION 9**

Jacob is a teenage boy who has heard a lot about HIV transmission from his friends. However, because there are so many myths about how HIV is transmitted, it is difficult for him to distinguish between fact and myth. As a health-care worker, you ask him to compile examples of facts and myths about transmission. Jacob gave a correct answer by stating that transmission of HIV through (a) \_\_\_\_\_ is a fact, while transmission of HIV through (b) \_\_\_\_\_ is a myth.

- (1) (a) coughing or sneezing, (b) handshaking or hugging
- (2) (a) unprotected sex, (b) breastmilk
- (3) (a) contact with infected blood, (b) mosquito bites
- (4) (a) swimming pools, (b) blood transfusions

**QUESTION 10**

Researchers work very hard to develop a microbicide. If they are successful, microbicides will hopefully have the following advantages

- (a) They will kill the HI virus in the blood of infected people
- (b) They will kill the HI virus in the vagina and therefore prevent transmission of the virus
- (c) They will be a non-barrier method which women can apply without the knowledge of their partners
- (d) They will block infection by creating a barrier between the virus and the mucous membranes

The correct answer is

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

**QUESTION 11**

What does it mean when a doctor says to her HIV positive patient 'The viral load in your blood is undetectable at this stage'?

- (1) There are no more HI viruses in the blood, and the person is no longer infected with HIV
- (2) The patient is in the window period and the viral load test could not detect any HI viruses in the blood
- (3) There are still HI viruses in the blood, the person is still infected with HIV, but the viral levels are too low for the viral load test to detect them
- (4) The person is still infected with HIV, but the viral load test is not sensitive enough to detect counts below 350 cells

**QUESTION 12**

Opportunistic infections and diseases, such as tuberculosis, often attack people with Aids. An opportunistic infection \_\_\_\_\_

- (a) is caused by pathogens which usually do not attack a healthy immune system
- (b) is always characterised by fever, weight loss and diarrhoea
- (c) is characterised by both a high viral count and a high CD4+T cell count
- (d) takes the 'opportunity' to attack a deteriorated immune system

The correct answer is

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

**QUESTION 13**

Clinical stage 3 of HIV is characterised by \_\_\_\_\_

- (1) persistent generalised lymphadenopathy and mild fever
- (2) unexplained chronic diarrhoea, oral hairy leukoplakia and pulmonary TB
- (3) a CD4+T count between 350 and 499 cells / mm<sup>3</sup>
- (4) moderate unexplained weight loss, and recurrent respiratory tract infections

**QUESTION 14**

As part of the prevention of opportunistic diseases (e.g. TB and PCP) in HIV infected people chemoprophylaxis is generally based on \_\_\_\_\_

- (1) the onset of the first symptoms of the disease
- (2) the results of blood tests, confirming the diagnosis of a specific opportunistic disease
- (3) CD4+T cell counts of which a low level is usually a sign of immune deficiency
- (4) the person's previous health history - whether he or she has experienced other opportunistic infections in the past

**QUESTION 15**

Health workers in Africa often find the syndromic management approach for STI (sexually transmitted infection) treatment in Africa more practical than the diagnostic management approach. The following are some of the disadvantages of syndromic case management

- (1) Laboratories with sophisticated techniques and facilities are required to diagnose the STI
- (2) Patients may be over-treated, that is, they may receive more drugs than are actually necessary
- (3) Patients with symptomatic STI infections often do not get treated
- (4) STIs often go untreated because it is often impossible for patients who reside far from clinics to return for test results and treatment at a later stage

**QUESTION 16**

The two factors that determine the accuracy of a blood test are sensitivity and specificity. The sensitivity of a test is its ability to pick up very low levels of antibodies. The specificity of an HIV antibody test refers to its ability to \_\_\_\_\_

- (1) ignore the presence of antibodies that are not specific to HIV
- (2) detect HIV positivity and not give false negative results
- (3) recognise cross-reacting non-specific antibodies
- (4) pick up very high levels of antibodies not to give false positive results

**QUESTION 17**

Mary is worried about her HIV status because she has two sex partners. The result of her ELISA antibody test is negative. This result can mean any of the following

- (a) Mary has not been infected with HIV
- (b) No antibodies against HIV have been found in Mary's blood
- (c) Mary may be infected with HIV, but antibodies against the virus have not yet formed
- (d) Mary is in the 'window period'

The correct answer is

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

**QUESTION 18**

The HIV PCR technique can be used for diagnostic and post-diagnostic purposes. A quantitative PCR (or RNA-PCR) test is used \_\_\_\_\_

- (1) for general diagnostic purposes
- (2) to detect proviral DNA in babies
- (3) to measure the response to antiretroviral therapy
- (4) to establish the health of the immune system

[TURN OVER]

**QUESTION 19**

There is a baby of 4 months old at your clinic. Her deceased mother's HIV status is unknown, but HIV is suspected. What should you do?

- (1) Start the baby on co-trimoxazole prophylaxis and do a rapid HIV anti-body test
- (2) Do an age appropriate test on the baby, such as a saliva test
- (3) Start her on co-trimoxazole prophylaxis and do an ELISA antibody test
- (4) Do an age appropriate test on the baby, such as an HIV DNA PCR technique

**QUESTION 20**

In order to manage HIV infection, it is important for the clinician to monitor the individual's CD4+T cell count and the viral load in his or her blood on an ongoing basis. CD4+T cell counts are important to

- (a) evaluate the status of the immune system
- (b) measure the client's response to medication
- (c) indicate when to start to prevent or treat opportunistic infections

The correct answer is

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

**QUESTION 21**

The anti-retroviral class, Protease Inhibitors, disturb the life cycle of the HI virus by interfering with the (a)\_\_\_ enzyme. Interference with this enzyme (b)\_\_\_

- (1) (a) protease, (b) prevents the virus from changing its RNA into proviral DNA
- (2) (a) reverse transcriptase, (b) prevents the virus from changing its RNA into proviral DNA
- (3) (a) protease, (b) prevents the formation and release of new HI viruses from the infected cells
- (4) (a) integrase, (b) prevents the formation and release of new HI viruses from the infected cells

**QUESTION 22**

Current guidelines suggest that antiretroviral therapy (ART) should be initiated as follows

- (1) Start antiretroviral therapy as soon as possible after diagnosis to give the medication a chance to eradicate the virus completely from the body
- (2) Concentrate on the treatment of opportunistic infections, and start antiretroviral therapy as soon as opportunistic infections stop reacting to any treatment
- (3) Start antiretroviral therapy as soon as the CD4+T cell count drops below 350 cells/mm<sup>3</sup>, irrespective of clinical stage
- (4) All patients diagnosed with HIV infection should be initiated on lifelong ART. CD4+T count and clinical stage is not considered in the decision to start ART

**QUESTION 23**

What is immune reconstitution inflammatory syndrome (or IRIS)?

- (1) It occurs when the immune system begins to recover due to ARVs, but instead of getting better, the patient initially gets sicker
- (2) It occurs when a patient on ARVs gets tuberculosis which further depletes the immune system
- (3) It occurs when the patient gets sicker instead of better due to ARVs and it usually is an indication of ARV drug failure
- (4) It occurs when a patient gets serious side-effects of ARVs instead of improved immunity

[TURN OVER]

**QUESTION 24**

Why do we not give PEP to a rape survivor who tests positive on a baseline HIV test?

- (1) The ARVs will not help the rape survivor
- (2) PEP might contribute to the development of drug-resistance
- (3) The ARVs might compromise the future treatment of the rape survivor
- (4) All of the above

**QUESTION 25**

Drug resistance \_\_\_\_\_

- (a) refers to the virus becoming resistant to the drug
- (b) refers to the patient becoming resistant to the drug
- (c) only affects the patient
- (d) could affect any person infected with a specific virus

The correct answer is

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

**QUESTION 26**

One of the main reasons why people do not change their behaviour is because they believe that there are obstacles in the way of the behaviour change. Which one of the following factors has been identified by researchers as obstacles that often hinder change in people's sexual behaviour?

- (1) Flooding the market with free condoms. This leads to 'over-sensitisation' and gets in the way of behaviour change.
- (2) High self-efficacy. A person with high self-efficacy usually believe that condoms are effective in preventing the spread of HIV, but the opinion of their partners may prevent the use of condoms.
- (3) The use of certain medications. These drugs diminishes the power of individuals to make responsible decisions.
- (4) The lack of communication skills. People find it hard to change their sexual behaviour if they do not know how to discuss sex with their partners.

**QUESTION 27**

According to the Transtheoretical Model of Prochaska and DiClemente (1992), behaviour change involves movement through the following stages

- (1) Behaviour labelling, Cost assessment, Commitment, and Action
- (2) Pre-contemplation, Contemplation, Preparation, Action, Maintenance, and Termination
- (3) Preparation, Contemplation, Behaviour labelling, Action, Maintenance, and Termination
- (4) Behaviour labelling, Commitment to change, and Taking action

**QUESTION 28**

Behaviour change interventions based on the Social Network Theory usually ask the following questions

- (1) Does the individual have positive attitudes towards safer sex?
- (2) What is the composition of important social networks in a community?
- (3) What is being done in terms of advocacy, policy development and economic change?
- (4) Does the individual share with social networks his/her intentions to change?

[TURN OVER]

**QUESTION 29**

Structural and environmental theories of behaviour change see human behaviour as a function of \_\_\_\_

- (1) political campaigns and mass communication
- (2) advocacy, organisational change, policy development, economic change and support, environmental change, and multi-method programmes
- (3) communication of an innovation through certain channels over a period of time to members of a social system
- (4) the individual, his/her social networks and the wider communal, political and economic environment

**QUESTION 30**

There are many teaching methods or strategies that can be used by Aids educators to promote learning. One of the advantages of group discussions is

- (1) Group discussions expose members of the group to the beliefs, values and practices of others
- (2) Learners find it beneficial to practise new behaviour through simulated exercises
- (3) It is empowering for learners if the facilitator builds on their expertise
- (4) Group discussions force silent members to take the lead in the discussions

**QUESTION 31**

You were asked by the Department of Health to facilitate a workshop for sex workers. To be a successful facilitator, which one or more of the following points will you have to bear in mind?

- (1) The sex workers are adults and not children, and therefore it is not necessary to establish a set of agreed-upon ground rules for the group before you start with the workshop
- (2) The equal participation of all the sex workers is important for learning to occur, and silent participants should be encouraged to participate by 'putting them on the spot' and asking them to answer all the questions until they participate freely
- (3) Do not force your beliefs and ideas on the group. Allow the sex workers to express their views and allow them to empower themselves in a safe environment
- (4) Sex workers have their own 'language' and they often use slang words, but it is not necessary for you to descend to their level by speaking the 'language' of the group. They have to adjust to your standards

**QUESTION 32**

By using latex condoms people can protect themselves from HIV infection. Which of the following practices, however, make the usage of the male condom more risky?

- (a) The usage of oil-based lubricants such as Vaseline with the condom
- (b) The usage of water-based lubricants with latex condoms
- (c) Not squeezing out the air in the nipple of the condom when putting on the condom
- (d) Unrolling the condom only halfway down the penis

The correct answer is

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



**QUESTION 33**

The female condom empowers women by giving them control over their sex lives. Other advantages of the FC2 female condom is/are

- (a) It is made of latex and does not require special storage
- (b) It can be used with water- as well as oil-based lubricants such as Vaseline, KY-Gel and baby oil
- (c) It can be inserted a few hours before intercourse
- (d) It can be used by a woman without her male partner knowing about it

The correct answer is

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

**QUESTION 34**

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

**QUESTION 35**

Witchcraft is believed to be the causal agent of Aids in some African countries. What are the negative implications of witchcraft beliefs for Aids counselling and education in Africa?

- (1) People who believe in witchcraft are not very supportive of Aids patients or their family members because they believe that these people brought the illness on themselves by enraging their communities
- (2) Feelings of guilt and anxiety are alleviated if external factors such as witches can be blamed, and a sense of guilt and anxiety is necessary for people to change their sexual behaviour
- (3) It is difficult to change harmful sexual practices if people believe that they cannot be held responsible for their own behaviour
- (4) The personal cost for witches is very high, since many women who are perceived to be witches are still hunted down and killed in Africa

**QUESTION 36**

Sponk (2014) indicated that sex, within the African context, is regarded as an important aspect of \_\_\_\_

- (1) sexuality and manhood
- (2) reproduction
- (3) self-expression
- (4) cultural practices

**QUESTION 37**

What is the MOST correct answer regarding dry sex within the context of Aids education in Africa? Dry sex \_\_\_\_

- (1) is a traditional behaviour that is harmful to people's health
- (2) heightens the sexual sensation for men
- (3) 'cleans the temple for creation' from undesirable vaginal secretions
- (4) is prepared for by putting leaves inside the vagina

[TURN OVER]

**QUESTION 38**

Which fundamental questions should be asked during Phase 3 of the counselling process?

- (1) What is going on in my life? What do I want?
- (2) What do I want? How do I get what I want?
- (3) How do I get what I want? How do I get it done?
- (4) What is going on in my life? How do I get what I want?

**QUESTION 39**

As a counsellor, you find the seven-stage problem solving model very helpful in assisting your clients to solve their problems. In the (a)\_\_\_\_ stage, you encourage your clients to generate and to list as many solutions as possible, as quickly as possible. Then, in the (b)\_\_\_\_ stage, you ask your client to draw up a 'balance sheet' and to write down the advantages and disadvantages of each solution.

- (1) (a) reviewing options, (b) selecting solutions
- (2) (a) defining the problem, (b) brainstorming
- (3) (a) reviewing options, (b) taking action
- (4) (a) brainstorming, (b) weighing-up-each-solution

**QUESTION 40**

Nomsa discusses her marital problems with a counsellor who responds as follows: 'Nomsa, I understand exactly how you feel. Your husband is a very selfish person for sleeping around and infecting you.' The counsellor is showing \_\_\_\_\_.

- (1) empathy
- (2) immediacy
- (3) self-disclosure
- (4) sympathy

**QUESTION 41**

In which one of the following would you have conveyed advanced empathy in response to Pete telling you that he does not want to disclose his HIV positive status to his wife?

- (1) Maybe you feel guilty about what happened and fear your wife's response?
- (2) You feel that your wife was the unfaithful one.
- (3) Do I understand you correctly if I say that you do not want to tell your wife at this stage that you are HIV positive?
- (4) I know that your wife will forgive you.

**QUESTION 42**

When and how should referral of clients take place within the Aids context?

- (a) Referral should be arranged in such a way that the client does not feel rejected.
- (b) In cases of psychopathology or severe depression, it may be necessary to refer the client to a clinical psychologist.
- (c) Referral should be arranged if a counsellor no longer wants to be responsible for the client.
- (d) Referral should be arranged if the client needs additional helpers (e.g. spiritual or financial).

The correct answer is

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

**QUESTION 43**

What are some of the disadvantages of provider-initiated counselling and testing (PICT)?

- (1) Clients may not refuse to be tested when providers request testing
- (2) Vulnerable communities may not come to the attention of healthcare workers
- (3) Clients do not necessarily understand the concept of 'opting-out' of testing
- (4) Worldwide this approach has yielded disappointing results

**QUESTION 44**

Why is it important for a counsellor to explore the reasons why a client wants to be tested for HIV?

- (1) Counsellors have a natural interest in their clients' lives and they have to satisfy this interest by asking personal questions
- (2) If the client's reasons for wanting to be tested do not sound serious enough, the counsellor can discourage the client from going for testing
- (3) It gives the counsellor the opportunity to assess the client's risk of infection as well as his or her knowledge and beliefs about HIV infection and safer sex
- (4) It gives the counsellor the opportunity to impress the correct values on the client

**QUESTION 45**

If a client decides that she needs more time to decide whether or not she wants to be tested for HIV, what should your reaction be?

- (1) Try your best to convince the client to go for testing without delay because this is the best thing to do
- (2) Accept that some clients may wish to think further about the matter, but emphasise the importance of safer sex practices
- (3) Accept that your pre-test counselling has failed and refer her to another clinic or counsellor who might be able to convince her
- (4) Give her time to think it over, but follow-up by phoning her every day to find out if she is ready to come back for the test

**QUESTION 46**

Sarah does not show emotional problems after she has worked through the initial shock of being HIV positive. She does though require help to resolve social problems that prevent her from coping effectively. Which approach to counselling will be most effective for her?

- (1) A psycho-educational approach
- (2) A casework approach
- (3) A counselling approach
- (4) A minor intervention approach

**QUESTION 47**

Lizelle heard that she was HIV positive a few weeks ago. She felt fine for the first week, but in the second and third weeks began to feel anxious, helpless, socially withdrawn and could not get a proper night's sleep because of nightmares (relating to her diagnosis). She felt better in the fourth week. Lizelle's symptoms can be diagnosed as \_\_\_\_\_

- (1) acute stress disorder, because the symptoms occurred within 4 weeks of the event and lasted for less than 28 days
- (2) acute stress disorder, because the symptoms differ from those needed for a diagnosis of post-traumatic stress disorder
- (3) post-traumatic stress disorder, because the symptoms occurred within 4 weeks of the event and lasted for less than 28 days
- (4) post-traumatic stress disorder, because no HIV related traumatic event is diagnosed as an acute stress disorder

[TURN OVER]

**QUESTION 48**

When counselling children it is \_\_\_\_\_

- (1) important not to discredit or blame any of the adults in the child's world
- (2) not always necessary to get the consent of the parents before counselling starts
- (3) necessary to disclose what was discussed during the counselling sessions to the parents
- (4) important to ensure that a child pays proper attention by insisting that the child stops all other activities

**QUESTION 49**

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

**QUESTION 50**

Thabita is HIV positive and struggle with oral thrush. During your ongoing counselling session, you talk about her diet. Which food should she avoid?

- (1) Energy-giving foods
- (2) Body-building foods
- (3) Refined starches and sugar
- (4) Vitamins and minerals

**QUESTION 51**

According to attachment theory, bereavement follows naturally when a loss to an attached person or object is suffered. Significant losses \_\_\_\_\_

- (1) include objects such as humans and pets, but not possessions
- (2) include only humans, animals and material possessions
- (3) can include animate and inanimate objects as well as abstract 'possessions'
- (4) in current times refer to the loss of wealth and status

**QUESTION 52**

The term 'stages' of bereavement should be avoided in favour of the term 'tasks' of bereavement. The reason(s) for this is/are to \_\_\_\_\_

- (a) avoid the idea of strict consecutive stages
- (b) emphasise the discrete nature of bereavement tasks
- (c) emphasise the active nature of bereavement rather than imply that bereavement is a passive process 'flowing over' the grieved person

The correct answer is

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

**QUESTION 53**

What is meant by the restoration-oriented task described as reinvestment of emotional energy?

- (1) Forgetting the deceased person as far as you possibly can
- (2) Opening yourself up to emotional involvement in new friendships and relationships
- (3) Denying yourself the opportunity of experiencing the pain of loss
- (4) To be as busy as possible so that you do not have time to think about your loss

**QUESTION 54**

Danny's father died in an armed robbery. Danny, who usually is an active, friendly, outgoing child, suddenly experience bereavement. Children \_\_\_\_\_

- (1) from three to five years might grasp the finality of death
- (2) display their own stages of bereavement
- (3) do not understand death and do not go through the tasks of bereavement
- (4) experience the same stages of bereavement as adults

**QUESTION 55**

Which one of the following steps may help Andrew to take care of his physical and mental health?

- (1) He should re-evaluate his belief in his own abilities, strive to achieve his performance goals even if they are very high, and he must lower his standards
- (2) He should learn to trust and accept the knowledge he already has, rather than further pressurise himself to attend the additional refresher and training courses
- (3) He must learn how to draw firm boundaries between himself and his clients so that he can remain unaffected should one of them die
- (4) He should be encouraged to nurture himself as much as possible by ensuring that he gets enough exercise and rest and takes time to do things that he really enjoys

**QUESTION 56**

Which one of the following statements about coping mechanisms is true?

- (1) The aim of problem-focussed coping is to reduce the emotional discomfort that the caregiver is experiencing when his or her workload becomes overwhelming
- (2) When caregivers are faced with situations that they cannot control or change, problem-focussed coping may be more appropriate to use than emotion-focused coping
- (3) The best form of coping is passive attempts to deal with a situation that is perceived as stressful
- (4) Caregivers who use problem-focused coping strategies have a greater sense of control over work-related stressors and will suffer less burnout than caregivers who use emotion-focused coping mechanisms

**QUESTION 57**

One of the principles in the HIV and Aids Charter refers to "a duty to respect the rights, health and physical integrity of others, and to take appropriate steps to ensure this where necessary"

This is the duty of \_\_\_\_\_

- (1) all medical, nursing and careworker staff
- (2) persons living with HIV and Aids
- (3) HIV and Aids counsellors at hospitals and clinics
- (4) wardens who are holistically responsible for prisoners

[TURN OVER]

**QUESTION 58**

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.

**QUESTION 59**

The AIDS epidemic has had a profound impact on employees' and employers' organisational and economic lives. Which option reflects these effects?

- (1) burnout, organisational stress, increased sick leave
- (2) discrimination, and time loss to counselling and testing during work hours
- (3) termination of employment, occupational confidentiality and health and safety issues
- (4) low staff morale, and increased absenteeism and labour turnover

**QUESTION 60**

An HIV and Aids management team should consist of \_\_\_\_\_

- (1) a union member, the HIV and Aids coordinator and a member from management
- (2) peer facilitators, a workplace volunteer and a steering committee
- (3) a steering committee, the HIV and Aids coordinator and peer facilitators
- (4) an OHS representative, the HIV and Aids coordinator and peer facilitators

**NOTE: If you have chosen the GUIDANCE TRACK, do Section B, Questions 61 to 70. If you have chosen the CARE TRACK, go to Section C on page 17 and answer Questions 61 to 70.**

**Please note: You do not have to indicate your choice between Section B or Section C because the correct alternatives are the same for equivalent questions.**

**SECTION B: GUIDANCE TRACK****QUESTION 61**

The Department of Health recommends sexuality education to be introduced to children at around the age of 12 years. Kara is 13 years old and her parents do not want her to attend any AIDS education sessions based on cultural preferences. Which one of her fundamental human rights are directly violated? The right \_\_\_\_\_

- (1) not to be unfairly discriminated against
- (2) of access to healthcare services
- (3) information and a basic education
- (4) to bodily and psychological integrity

**QUESTION 62**

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) AIDS education in her school starts in Grade 1, because the school principal argued that children at this age are very receptive towards accepting a healthy life style
- (c) The AIDS education forms part of a larger life skills 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) (a) and (d)
- (2) (a), (b) and (d)
- (3) (b), (c) and (d)
- (4) (b) and (d)

**QUESTION 63**

Which one or more of the following statements is/are true in terms of the sexuality development of children age 5 to 7 years in the middle childhood years?

- (a) The sex role identities of children in this phase are usually formed and they know that their gender is fixed
- (b) They are aware of their sexual feelings and desires
- (c) They are able to identify with their own bodies

The correct answer is

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

**QUESTION 64**

Teachers who work with children in the intermediate phase should take their cognitive developmental skills into account when they devise AIDS education programmes. The main purpose of AIDS education in this school phase should be to \_\_\_\_\_

- (a) develop their ability to think scientifically about HIV and AIDS prevention
- (b) rectify misconceptions about HIV and AIDS
- (c) prevent the formation of prejudice
- (d) help the children to identify concrete causes of HIV infection

[TURN OVER]

The correct answer is

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

#### QUESTION 65

When can Aids education start to focus on prevention strategies, because children can understand how HIV is transmitted and how not?

- (1) Foundation school phase (grades 1 to 3)
- (2) Intermediate school phase (grades 4 to 6)
- (3) Further Education and Training phase (grades 10 to 12)
- (4) Senior school phase (grades 7 to 9)

#### QUESTION 66

How would a spiritual counsellor answer secularised clients' questions about why they were infected by HIV?

- (1) We do not always understand why things happen to us, but 'bad things sometimes happen to good people' and being HIV positive does not mean one is a bad person
- (2) God wanted to punish them for their sins. They should therefore confess their sins (e.g. an immoral lifestyle) and ask God's forgiveness
- (3) God often brings illness and pain into life's way to make us better people and to teach us important truths about life
- (4) The devil is constantly trying to attack us and we should therefore expect that illness and pain will sometimes come our way

#### QUESTION 67

Why is it often difficult to do spiritual counselling with HIV positive people?

- (1) Because HIV and Aids is primarily a sexually transmitted disease and therefore clouded by sexual taboos, denial and stigmatisation
- (2) Because most HIV positive people are not very religious
- (3) Because any kind of religious counselling is difficult in the gay community
- (4) Because it involves the exposure of the previous sins of the HIV positive person

#### QUESTION 68

Orphanages are not generally seen as the most appropriate interventions for orphans or other vulnerable children. Orphanages often function as a (a) \_\_\_ satisfier by providing food, shelter and clothes to satisfy a child's (b) \_\_\_ needs. Care for orphans should rather be based on the fulfilment of all the needs of the child by using a care model that use (c) \_\_\_ satisfiers

- (1) (a) inhibiting, (b) basic, (c) transcendence
- (2) (a) pseudo, (b) protection, (c) true
- (3) (a) singular, (b) subsistence, (c) synergistic
- (4) (a) synergistic, (b) affection, (c) singular

#### QUESTION 69

Children often have to face challenges due to their parents being ill or dead due to Aids. To become the head of a household is an example of which challenge?

- (1) Loss of parental guidance
- (2) Role change
- (3) Changing human rights
- (4) Physical deprivation

[TURN OVER]



**QUESTION 70**

The model of choice in South Africa to care for children orphaned by Aids and other vulnerable children is the Isibindi model. This model uses normal interaction between youth workers and children to \_\_\_\_

- (1) assess their suitability for adoption
- (2) teach them how to meet other's emotional needs
- (3) assist the children with their school work
- (4) teach them how to take care of themselves

**NOTE: If you have chosen the CARE TRACK, do Section C, Questions 61 to 70.**

**Please note: You do not have to indicate your choice between Section B or Section C because the correct alternatives are the same for equivalent questions.**

**SECTION C: CARE TRACK****QUESTION 61**

The community and home based care (CHBC) can be described as comprehensive health and social services offered by primary and community caregivers. The primary caregivers are \_\_\_\_

- (1) primary care nurses
- (2) trained counsellors
- (3) family and friends
- (4) trained community caregivers

**QUESTION 62**

Which of the following statements illustrate an advantage of home-based care?

- (a) It is easier for the patient to comply with a complicated treatment or medication regime in the home than in the hospital
- (b) The family understands the patient's sickness much better than a health care professional
- (c) The patient feels more at ease to be comforted and cared for by his or her family, than staying in a hospital and being cared for by strangers
- (d) The patient's HIV positive diagnosis can be kept a secret from the family if a home-based-caregiver takes care of him or her in the privacy of the home

The correct answer is

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

**QUESTION 63**

Which CHBC model is defined by the statement "All the service providers are linked with patients and their families in a continuum of care"?

- (1) Informal CHBC setting
- (2) The integrated CHBC model
- (3) Single-service CHBC model
- (4) The continuum CHBC model

[TURN OVER]

**QUESTION 64**

What advice would you give health care workers in a rural clinic on how to clean up blood spills with the minimum resources available?

- (1) Pour clean water onto the spilled blood and leave for at least one hour before cleaning it up with a dry cloth. Burn the cloth immediately.
- (2) Mix a quarter cup of Jik with two cups of water and pour it onto the spilled blood. Clean with disposable paper cloths.
- (3) Do not pour any fluids on the blood spills to prevent further spreading of the blood. Clean the blood with disposable paper cloths.
- (4) Leave the blood uncovered for a couple of hours until it is dry before you clean it up with a dry cloth. The HI virus lives only in 'fresh' blood and will be dead by the time the blood is dry.

**QUESTION 65**

You are the team-leader of a couple of nurses. One day after duty a team member disclosed her HIV positive status to you. The right thing for you to do is to \_\_\_\_.

- (1) provide counselling and arrange for her to be transferred to an administrative position
- (2) schedule a disciplinary hearing as she posed a danger to the patients
- (3) disclose her status to the patients as part of the informed consent to treatment
- (4) adapt her work and practice to avoid cross-infection

**QUESTION 66**

The prevention of constipation in an HIV positive person should involve the following measures \_\_\_\_.

- (a) The intake of fluids, such as water, fresh fruits and vegetables
- (b) The intake of a low-fibre diet, rich in nutrients, should be increased
- (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 (d)
- (2) (a) and (b)
- (3) (c) and (d)
- (4) (b) and (d)

**QUESTION 67**

Some people in the final phase of Aids may experience constant pain. What does it mean to use the 'ladder approach' in managing a patient's pain?

- (1) Do not give the patient the strongest pain medication to start with. Start by administering a mild pain medication, and if that does not help, give moderate medication. If that still doesn't help, give a strong medication such as morphine.
- (2) Start with the strongest medication the patient can take. If it helps for the pain, give a more moderate pain medication the next time, and if that relieves the pain as well, you know that the patient will react well to mild medications at the bottom of the ladder.
- (3) Pain medication should be taken on a regular basis (e.g. every 4, 6 or 8 hours) to help people to feel that they have control over their pain.
- (4) Encourage mental imagery, relaxation and breathing exercises for pain management, and if that doesn't help use the ladder approach and give a moderate medication such as codeine.

[TURN OVER]

**QUESTION 68**

You have an HIV positive patient whose body-fat is abnormally distributed. Abnormalities of body-fat distribution are \_\_\_\_\_

- (1) caused by circulatory impairment
- (2) general health problems associated with HIV
- (3) a complication of HIV infection and ART
- (4) associated with a diet high in sugars

**QUESTION 69**

Some degree of mental confusion or dementia is common among people with Aids because of the effect of the HI virus on the brain. How would you care for a patient who has problems with memory loss, concentration, confusion and disorientation?

- (1) Talk about the distant past, and when the patient is confused, or has the facts wrong, argue with the patient until he or she has all the facts straight
- (2) Keep the patient's room or home structured, avoid unnecessary changes, and place familiar things like photographs around the patient
- (3) Challenge the patient's delusions with reality because if you play along or ignore the delusions, the patient will become more confused and disoriented
- (4) Be very patient and talk to the person as though he or she is a child - that is the only way that a confused person will feel cared for

**QUESTION 70**

Palliative care offers support and care for the patient and his or her family from the moment when \_\_\_\_\_

- (1) medical treatment is no longer effective
- (2) the patient with Aids does not want to continue with treatment
- (3) the side-effects of treatment outweigh the benefits
- (4) a life-threatening illness is diagnosed

[70]

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
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- ② The paper number pertains only to first-level courses consisting of two papers

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 for the second. If only one paper, then leave blank

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