
Learning Unit 14:

Ongoing counselling

**BOTH
TRACKS**



[NEXT](#)

Table of Contents

Learning Unit 19 – Ongoing counselling

- [Introduction](#)
- [The emotional impact of being HIV positive](#)
- [Ongoing counselling in conditions prevalent in HIV and Aids](#)
- [Counselling special groups](#)
- [Tips for positive living](#)
- [Assessment](#)

Introduction

[\[TABLE OF CONTENTS\]](#)

Counselling is an ongoing process and does not end with post-HIV test counselling. There are many issues to deal with after a positive HIV test result. In this learning unit, we will explore some of these issues, but keep in mind that **people are unique** and the way they perceive and experience their diagnosis is also unique. Therefore, there might be many other issues that a client may want to discuss with you. It sounds like a daunting task, but if you keep the basic principles of counselling in mind (attending to your clients, listening deeply, exploring their story to really come to an understanding of the problem, and assisting them to make a plan to resolve the problem), you cannot go wrong.

Key questions

Use the following questions as pointers to ensure that you retain your focus on the important issues in this learning unit:

- What is the emotional impact of being HIV positive on a person and their loved ones?
- Which psychological problems are associated with HIV and Aids?
- Should a person disclose their HIV-positive status?
- How can an HIV-positive person live positively? What are the ethical concerns in counselling?

Key concepts

Look out for the following key concepts. Make sure that, after you have completed this learning unit, you know what they refer to and how they are used.

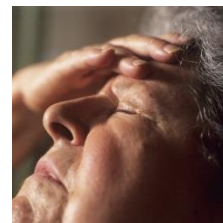
Adjustment disorder	Acute stress disorder
Progressive muscle relaxation technique	Post-traumatic stress disorder
Systematic desensitisation	Secondary trauma
Disclosure	Positive living
Crisis intervention	

[\[NEXT\]](#)

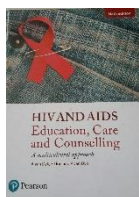
The emotional impact of being HIV positive

[\[TABLE OF CONTENTS\]](#)

In the previous two learning units, we concentrated mainly on counsellors and what they need to be able to help a client. In this section we will concentrate on what the HIV-positive person and their loved ones go through while they struggle to come to terms with a life with HIV infection. Go to your prescribed book to read more about this.



Study



Prescribed book: pp. 420-431

Section 14.1: Ongoing counselling process approaches. Familiarise yourself with counselling process approaches that can be used in ongoing counselling. Do you understand the difference between counselling and psychotherapy? Can you describe the overlaps and boundaries between the different approaches to the counselling process?

Crisis intervention. One of the greatest fears of any counsellor is not knowing what to do in a crisis. For example, you have just given an HIV- positive test result to a client and the client suddenly turns violent or threatens to jump out of your window. Well, the first thing you have to do is to stay calm. The second thing is to realise that you will have to take control of the situation and to remember that crisis counselling is directive. This means that the client needs your advice and direction immediately. Now that I have increased your adrenalin levels, read this section in your prescribed book and make notes on how you could handle a crisis situation. Make sure that you mention the following:

- the main goal of crisis intervention
- the importance of networking and a proper referral system
- the nature of crisis counselling (it is OK to give advice)
- the role of hospitalisation
- the supporting role of family or friends

Section 14.2: Emotional impact of HIV infection. (Not for exam purposes). This section contains a case study where Mr Palermino shares his emotional turmoil of being HIV positive with us. Reflect on the case study by doing the activity in your prescribed book (the first activity after the case study). Now read more about the psychological, spiritual, socioeconomic and other needs and experiences of a person living with HIV. Watch this YouTube video about living with HIV. <http://goo.gl/XAVuTI>

The impact of HIV infection on affected significant others. As counsellors we usually work with the client and we often tend to forget the significant others behind the client. The loved ones of an infected person play a very important role in that person's physical as well as psychological care, and it is important for us to remember them too. This section will make you more aware of the impact of an HIV-positive diagnosis on the lives of the infected person's significant others.



The following activity is for those of you who have a loved one with HIV infection or Aids.

ACTIVITY 14.1: THINK ABOUT A LOVED ONE WITH HIV INFECTION

Reflect on your own feelings about a loved one with HIV infection. Go to [Activity 14.1](#).

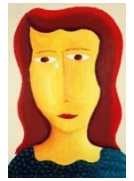
Feedback: I hope that you feel a bit better after doing this activity. You might also consider talking to a professional counsellor about these feelings if you find it hard to deal with them on your own. We can only really care for our loved ones if we also care for ourselves. But more about this in Learning Unit 21.

[\[NEXT\]](#)

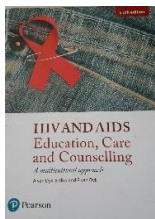
Ongoing counselling in conditions prevalent in HIV and Aids

[\[TABLE OF CONTENTS\]](#)

There are many psychological problems that can be experienced by people with HIV and Aids and it was very difficult to decide what to include in this module. In the end I decided on a few aspects that you will probably get to deal with most. These are stress, anxiety, depression and suicidal thoughts. We will also discuss how each one of these problems is best managed. The section will conclude with a few notes on ethics.



Study



Prescribed book: pp. 432-450

Section 14.3: Ongoing counselling in conditions prevalent in HIV and Aids.

Stress: Answer the following questions as you read through the prescribed material:

- What is the effect of stress on our immune systems? Look at this short YouTube animation video <http://goo.gl/5QVv1w> about the effect of stress on the immune system.
- How should we manage stress in our everyday lives?
- What are (a) an acute stress disorder and (b) a post-traumatic stress disorder? What are the differences between these two stress-related conditions?
- How do we counsel clients who have been through trauma?
- What is the effect of stress on caregivers?

Adjustment disorder: What is an adjustment disorder, and what does intervention in adjustment disorder entail?

Anxiety: Explain what anxiety entails and discuss intervention methods to alleviate anxiety.

Depression. Answer the following questions as you read through the prescribed material:

- What are the symptoms of depression?
- Arrange the symptoms in a table with four columns with the following headings: affective symptoms, cognitive symptoms, behavioural symptoms, and physiological symptoms.
- When can depression be diagnosed as a major depressive disorder?
- Counselling depressed clients often focuses on cognitive-behavioural therapy or interpersonal counselling. What are the differences between these two approaches?
- Now think of someone you know who suffers from depression. Describe the person's symptoms and note if they are affective, cognitive, behavioural or physiological. For how long has this person been depressed, and what triggered the depression (if anything)?

Suicide. Counsellors should always be aware of the risk of suicide in their clients. Please make sure that you are able to answer the following questions about suicide



	<p>– you might need to do so in the future to save a person’s life:</p> <ul style="list-style-type: none"> • What are the mood indicators of suicide? • What is the link (according to research) between HIV infection and suicide? • What are the signs of depression and suicide risk that we should be aware of? • What are the warning signs of depression and suicidal thinking in children and adolescents? • According to Sue and colleagues, the successful prevention of suicide is a three- phase process. Name the three phases in suicide prevention. • Discuss the various aspects of suicide prevention that a counsellor should take into account. <p>Neurocognitive Disorders: Explain what neurocognitive disorders (NCDs) are. Also discuss interventions in NCDs.</p> <p>Substance use and addiction: Discuss substance use and addiction. How should counsellors dealt with substance use and addition?</p> <p>Living with a chronic disease: Discuss the impact of being diagnosed with HIV on a person and his/her loved ones. How can the counsellor intervene?</p>	
--	---	--

We will now focus on one of the above problems that all of us experience from time to time, namely stress. The following activity will help you to keep a stress diary and to practise one technique of stress release. Not only will you personally benefit by doing this relaxation exercise, but you will also learn a new skill to help your clients to relax.

ACTIVITY 14.2: A STRESS DIARY AND A RELAXATION EXERCISE

Use this opportunity to take a “stress awareness week” and to keep a stress diary. You will also learn a relaxation exercise. Go to [Activity 14.2](#).

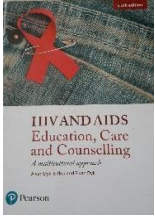


Feedback: Look at your stress diary at the end of the week. If you feel that you have a lot of stress, ask a friend who has a calm and soothing voice to assist you with the relaxation exercise in Activity 14.2.

[\[NEXT\]](#)

Counselling special groups

Study



Prescribed book: pp. 450-465

Section 14.4: Counselling special groups.

Make sure that you understand counselling in the following contexts:

- Counselling women/couples on pregnancy
- Counselling families
- Counselling couples
- Counselling children
- Parents who need to disclose HIV status to children

Section 14.5: Ethical concerns in counselling. Read the ethical concerns and ask yourself if you honour them when you counsel clients. Remember that ethics is always a primary focus in whatever we do.

[\[NEXT\]](#)



Please appreciate that this is only the ears of the hippo regarding counselling couples, families or children. Specialised training is necessary to counsel groups.

[\[NEXT\]](#)

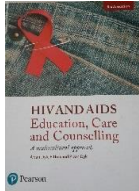
Tips for positive living

[\[TABLE OF CONTENTS\]](#)

The tips for positive living are not for HIV-positive people only. They will benefit all of us who want to keep our immune systems healthy. Note that your prescribed book will take you to chapter 20 to learn more about keeping the immune system healthy.



Study



Prescribed book: pp. 578-585

Go to chapter 20 and read the introduction.

Section 20.1: The promotion of health and positive living. This section shows how a healthy lifestyle not only improves the quality of life, but also strengthens the immune system's capacity to combat infections. After reading each one of the health promotion aspects, make a list of all the things that you do to care for your immune system. If your list is very short, adopt a few of the recommendations in this section and make time to care for yourself and your immune system. Click on <http://goo.gl/oU86bQ> to watch a video about "Living positively with HIV."

Section 20.2: Nutrition. The link between malnutrition and a depressed immune system is so strong that every counsellor should know what constitutes a healthy diet. Make sure that you will be able to assist a client who needs the following information:

- Name the three main food groups.
- Give examples of generally available foods that fit into each of the three main food groups.
- Draw a picture of a plate and divide it into five sections. Now fill each one of the sections with a food group. Explain to a client what foods they should eat at each meal of the day. (Figure 20.1 in your prescribed book will give you a good idea.)
- What advice will you give a client about supplements and vitamins?
- What does it mean to eat defensively?
- Give examples of defensive eating.



You are now finished with this learning unit. Click on [Assessment](#) to do some self-assessment questions.

Study Reflection

After completing Learning Unit 14 (Ongoing counselling), you should have acquired the following knowledge and understanding and be able to:

- name the feelings that HIV-positive people may experience after diagnosis.
- recognise the symptoms of depression.
- recognise the warning signs of suicide.
- know how to intervene to prevent suicide.
- assist a client in the decision to disclose their HIV-positive status.
- give an HIV-positive friend tips on healthy and positive living.
- do crisis counselling with a client.
- explain to a client what a healthy meal entails by
 - explaining the three food groups;
 - giving examples of the types of food under each food group; and
 - showing the client what should typically be on a plate each meal by dividing the plate into five sections, keeping the client's background, culture, taste and financial situation in mind.

Self-Assessment 14



Now is the time to pause briefly and to assess whether you have acquired the necessary knowledge and skills. Click on the link [Self-Assessment 14](#) to do a few questions on this learning unit.

You are now finished with the assessment. Go to Learning Unit 15.

APPENDICES

- Activities
- Self-Assessments
- Glossary

ACTIVITY 14.1 - THINK ABOUT A LOVED ONE WITH HIV INFECTION

We are often overwhelmed by the HIV diagnoses of a loved one, and we are so busy providing support for that person that we often forget to stand still and think of our own feelings. We can only come to terms with a loved one's diagnosis if we allow ourselves the time to explore our own hurt, guilt, anger and sadness. If you have a loved one, a family member or a close friend who is HIV positive, reflect on your feelings by using the following questions as guidelines:

- How does this person's being HIV positive affect you?
- How did you feel when you first heard the diagnosis?
- How long ago was it?
- How are you coping with it now?

[\[BACK\]](#)

ACTIVITY 14.2 - A STRESS DIARY AND A RELAXATION EXERCISE

Decide on a Monday of a typical week in your life that you are taking a stress awareness week and start a stress diary. Be acutely aware of all the factors that stress you this week, as well as your reactions to them. Reflect on these stressors at the end of every day. The following pointers may help to increase your awareness of stress in your life:

Stressor: What happened that caused the stress?

Stress instigator: Who or what caused the stress?

Reaction: How/what did you feel when you experienced the stress? Concentrate on physical (which muscles in your body became tight?) as well as psychological or emotional reactions (e.g. crying, aggression).

Coping: What did you do to cope with the stress (if anything)?

Look at your stress diary at the end of the week. Do you have a lot of stress in your life? Try the following relaxation exercise.

Relaxation exercise

Ask a friend who has a calm and soothing voice to assist you with a relaxation exercise. The instructions for the exercise (called the progressive muscle relaxation technique) are in an Enrichment box in your prescribed book.

- Get completely comfortable by sitting in a chair or lying down on a mattress.
- Close your eyes and imagine a place where you feel absolutely safe, secure and relaxed. (The place I go to in my mind is a secluded beach with only the voice of the mild wind and the sea in my ears.)
- Now ask the friend to follow the instructions of the relaxation technique in your prescribed book.

How did you feel after the exercise?

Do this exercise regularly until you have learned which muscles to relax in a stressful situation.

[\[BACK\]](#)

SELF-ASSESSMENT 14

Question 1

The symptoms of acute stress disorder and post traumatic disorder are similar. Is this statement true or false?

Question 2

Name the four categories that describe the symptoms of depression.

Question 3

Complete the following sentence:

Bereavement often causes a/an disorder in which a person's response to a life stressor is maladaptive, such as when a person is unable to function as usual in his/her social, occupational or academic life.

Question 4

Define the term "crisis intervention"

Question 5

There are many creative ways to communicate with children in counselling. Which of the following work well when communicating with children?

1. Writing memos and reading.
2. Storytelling and dreams.
3. Training and workshops.
4. Teaching and guiding.

Question 6

One of the benefits of disclosure is that the HIV infected person can access support from health services and family members. Is this statement true or false?

[\[FEEDBACK\]](#)

FEEDBACK 14

Feedback Question 1

The statement is true. The symptoms of acute stress disorder and post traumatic disorder are similar.

Feedback Question 2

The four categories that describe the symptoms of depression are:

- Affective symptoms
- Cognitive symptoms
- Behavioural symptoms
- Psychological symptoms

Feedback Question 3

The sentence should read: Bereavement often causes a/an **acute stress** disorder in which a person's response to a life stressor is maladaptive, such as when a person is unable to function as usual in his /her social, occupational or academic life.

Feedback Question 4

Crisis intervention is a form of emotional first aid or a short-term helping process designed to provide immediate relief in an emergency situation.

Feedback Question 5

Storytelling and dreams will work best (alternative 2).

Feedback Question 6

The statement is true. One of the benefits of disclosure is that the HIV infected person can access support from health services and family members.

[\[BACK\]](#)

Adjustment disorder

A person's maladaptive response to a life stressor, such as when a person experiences excessive distress and is unable to function as usual in his or her social, occupational or academic life.

[\[BACK\]](#)

Progressive muscle relaxation technique

A technique for learning to relax your mind and body by progressively tensing and relaxing muscle groups throughout your entire body. (See pp.289-290 in prescribed book.)

[\[BACK\]](#)

Acute stress disorder

An anxiety disorder that develops in response to an extreme psychological or physical trauma.

[\[BACK\]](#)

Post-traumatic stress disorder

A stress disorder that develops in response to an extreme psychological or physical trauma. A diagnosis of post-traumatic stress disorder is made if symptoms of acute stress disorder persist for more than a month.

[\[BACK\]](#)

Systematic desensitisation

A relaxation technique that relies on the principle that it is impossible to be both anxious and relaxed at the same time.

[\[BACK\]](#)

Secondary trauma

Post-traumatic stress disorder experienced by the family members of trauma survivors as well as by people who witnessed the trauma or were involved in the care of the trauma survivor.

[\[BACK\]](#)

Disclosure

A decision by a person to reveal his/her HIV-positive status to others, whether publicly or by telling only certain people such as a partner, spouse, relative or friend.

[\[BACK\]](#)

Positive living

To do everything in one's power to stay as healthy as possible – not only physically, but also emotionally, psychologically and spiritually.

[\[BACK\]](#)

Crisis intervention

A form of emotional first aid or a short-term helping process designed to provide immediate relief in an emergency situation.

[\[BACK\]](#)