

Social Tract

Module on

HIV and AIDS Basic counselling skills

LEARNING OUTCOMES FOR ALL PARTICIPANTS

After the completion of this module the learner should:

1. Have an understanding of counselling skills and theory.
2. Have an understanding counsellor ethics and values.

1. INTRODUCTION TO BASIC COUNSELLING SKILLS AND THEORY

Because of the, by now, well known psychosocial impact of HIV/AIDS, there has been an acceptance, certainly in the developed world of counselling as ethically necessary, especially before and after HIV testing. As such, counselling is an important part of prevention to help people to negotiate sexual behaviour. But its support function for the infected is probably seen as more crucial. Counselling, therefore, has functions that make it a logical but separate partner to health education and medical management.

What service users (the clients) expect from counselling has been defined by David Miller as confidentiality, accessibility, a non-judgmental perspective from the counsellor, time, consistency in approach to the individual's needs, accurate information and a supportive attitude. Meeting these requirements requires heavy investment in personnel and training. For many countries, the cost of counselling added to already overburdened health care systems virtually ensures that little will be done, despite the recognition of the need and its potential benefits.

Jacob-John, based on his experiences in India, has described counselling as a communication that requires person-to-person conversation, with one of the key roles of the counsellor being to listen to the patient uninterrupted during the appointed time. Counselling enables the client to open up and share his or her emotions, fears, guilt and anxiety, as well as more practical issues of life, including planning for his or her children.

2. COUNSELLING

What is it?

- Helping someone to recognise, face, accept and resolve problems.

Why is it needed?

- No known cure for HIV
- Death and dying become very real
- To correct misinformation
- To give advice on prevention and transmission
- HIV affects young people and has many implications

Who does it?

- Physiotherapists, nurses, occupational therapists, doctors,
- Chaplains, social workers, psychologists, psychiatrists, trained lay people

When is it done?

- When someone asks for information or says they are worried or concerned
- When the "counsellor" spots a problem
- Pre/post test
- Disease progression

- Drug treatments
- HIV related dementia
- Crises
- Terminal stages
- Death
- Bereavement

Counselling may cover the following areas

- 1. Medical**
Symptoms
Treatments, antiretrovirals
Pregnancy
Resuscitation/life support machines
AIDS/HIV knowledge
Transmission and prevention of HIV
- 2. Personal**
Isolation and rejection
Anxiety and stress
Religions/beliefs
Suicidal thoughts
Body image
- 3. Relationships**
Sexual
Within family
Friends
Employer and colleagues
School
- 4. Practical**
Referral procedures
Finances
Accommodation
Legal
Funeral, wills

3. SKILLS OF A COUNSELLOR

LISTENING

- verbal communication

LOOKING

- non-verbal communication

ANALYSING

- why is the person asking for help?
- what does the person feel the problem is?
- open- ended questions

REFLECTING

- allow time and silence to think
- repetition of key words
- shows empathy, encourages interaction

CONFRONTING

- keeping to main points when appropriate
- handling conflict positively

SUMMARISING

- summing up points discussed at intervals

SHARING

- "emotions" not necessarily experience

4. COUNSELLING DEFINITIONS

1. The term counselling includes work with individuals and with relationships that may be developmental, crisis support, psychotherapeutic, guiding or problem solving. It may be practised within a counselling or other professional work setting, or in private practice on a paid or voluntary basis. People working as 'carers', 'counsellors', or 'befrienders' will also find much of this code relevant to their work.
2. People become engaged in counselling when a person occupying regularly or temporarily the role of counsellor offers a service explicitly to provide time, attention and respect to another person or persons temporarily in need of guidance.
3. The counselling relationship by nature is confidential.
4. The task of counselling is to give the 'client' an opportunity to explore, discover and clarify ways of living more satisfyingly and resourcefully. Maintaining good standards of counselling involves continuous self-monitoring and self-development on the part of the counsellor.

5. COUNSELLING ETHICS AND VALUES

In counselling one is dealing with the most intimate part of a client's being. This means some ethical principles and code of conduct is essential. Biestek gives us 7 important principles that are a pre-requisite for any counselling relationship. These are as follows:

1. **INDIVIDUALISATION**
The recognition and understanding of each person's unique qualities. Individualisation requires freedom from bias and prejudice; the ability to listen and observe; to enter the feelings of people; and to keep perspective.
2. **PURPOSEFUL EXPRESSION OF FEELING**

The recognition of the client's need to express his/her feelings freely, especially negative feelings. This serves to relieve pressure and tension; clarify understanding of the problem.

3. CONTROLLED EMOTIONAL INVOLVEMENT

This involves sensitivity to the client's feelings, understanding of their meaning and a purposeful, appropriate response.

4. ACCEPTANCE

Perceiving and dealing with the client as she/he really is, including their strengths and weaknesses, maintaining all the while a sense of their innate dignity and personal worth.

5. NON-JUDGMENTAL ATTITUDE

This excludes assigning guilt or innocence or a degree of client responsibility for causation of the problem, but it includes making evaluative judgments about the attitudes, standards or actions of the client.

6. CLIENT/PATIENT SELF-DETERMINATION

The practical recognition of the right and need of clients to freedom in making their own choices and decisions. Professionals have a corresponding duty to respect the right; recognise the need; stimulate and help to activate that potential for self-direction by helping the client to see and use the available, appropriate resources in the community and their own personality.

7. CONFIDENTIALITY

The preservation of secret information concerning the client that is disclosed in the professional relationship; based upon a basic right of the client and an ethical obligation of the practitioner. The client's right, however, is not absolute.

6. LISTENING

Active listening involves

LISTENING

With your ears to the words being said, and hearing what they are saying.

LISTENING

With your eyes to the way people look when they are talking, noting and responding to their body language, gestures, etc.

LISTENING

With your mind for the real meaning behind their words. What are they really trying to tell me?

LISTENING

To yourself and your reactions to what you hear so you can make sense of what people are saying and respond in a helpful, non-judgemental and empathic way.

KEYS TO GOOD LISTENING

1. Limit your own talking
You can't talk and listen.
2. Listen and look for feelings as well as facts
You want to get the whole picture.
3. Don't jump to conclusions
Avoid making unnecessary assumptions or mentally (or verbally) trying to complete sentences for the person.
4. Ask for clarification
If you don't understand something, or feel you may have missed a point, ask relevant questions but don't interrogate.
5. Don't interrupt
A pause may mean:
 - taking a breath
 - taking stock of things so far
 - looking for the right words
 - coming to an embarrassing part of the story
 - summing up courage
 - waiting for the listener to reply
 - anxiety caused by the listener
 - lack of understanding
6. Concentrate on the person and what she or he is saying
Shut out outside distractions.
7. Use occasional interjections
An occasional "mmm", "yes" or "I see" shows the person you're still with him or her. Beware of overdoing it or using a meaningless comment.
8. Use empathy
Imagine how you might feel in a described situation.

YOU ARE NOT LISTENING TO ME WHEN...

- You do not care about me
- You say you understand before you know me well enough
- You have an answer for my problem before I've finished telling you what my problem is
- You cut me off before I've finished speaking
- You finish my sentence for me
- You find me boring and don't tell me
- You feel critical of my vocabulary, grammar or accent
- You are dying to tell me about something
- You tell me about your experience, making mine seem unimportant
- You are communicating to someone else in the room
- You refuse my thanks by saying you haven't really done anything

YOU ARE LISTENING TO ME WHEN...

- You come quietly into my private world and let me be
- You really try to understand me even if I'm not making much sense
- You grasp my point of view even when it's against your own sincere convictions
- You realize that the hour I took from you has left you a bit tired and drained
- You allow me the dignity of making my own decisions even though you think they might be wrong
- You do not take my problem from me, but allow me to deal with it in my own way
- You hold back your desire to give me good advice
- You do not offer me religious solace when you sense I am not ready for it
- You give me enough room to discover for myself what is really going on
- You accept my gift of gratitude by telling me how good it makes you feel to know you have been helpful

SOME ASPECTS OF LISTENING

Objectives of listening in any helping relationship

The objectives when we listen to people are both basic and simple.

1. We want people to talk freely and frankly.
2. We want them to cover matters and problems that are important to them.
3. We want them to furnish as much information as they can.
4. We want them to get greater insight and understanding of their problem as they talk it out.
5. We want them to try to see the causes and reasons for their problems and to figure out what can be done about them.

Some Do's and Don'ts of listening

In listening we should try to do the following:

- Show interest.
- Be understanding of the other person.
- Express empathy.
- Single out the problem if there is one.
- Listen for causes of the problem.
- Help the speaker associate the problem with the cause.
- Encourage the speaker to develop competence and motivation to solve his or her own problems.
- Cultivate the ability to be silent when silence is needed.

In listening, do not do the following:

- Argue.
- Interrupt.
- Pass judgment too quickly or in advance.
- Give advice unless it is requested by the other.
- Jump to conclusions.
- Let the speaker's emotions impact too directly on your own.

LISTENING TECHNIQUES

Type	Purpose	Possible response
1. Clarifying	<ol style="list-style-type: none"> To get additional facts. To help the person explore all sides of the problem. 	<ol style="list-style-type: none"> Can you clarify this? Do you mean this? Is this the problem as you see it now?
2. Restatement	<ol style="list-style-type: none"> To check our meaning and interpretation with the other. To show you are listening and that you understand what the other has said. 	<ol style="list-style-type: none"> As I understand it, your plan is.... Is this what you have decided to do? And the reasons are? You said.... You're saying...
3. Neutral	<ol style="list-style-type: none"> To convey that you are interested and listening. To encourage the person to continue talking. 	<ol style="list-style-type: none"> I see. I understand. That is a good point.
4. Reflective	<ol style="list-style-type: none"> To show that you understand how the other feels about what she or he is saying. To help the person to evaluate and temper his or her own feelings as expressed by someone else. 	<ol style="list-style-type: none"> You feel that.... It was shocking as you saw it. You felt you didn't get a fair hearing.
5. Summarising	<ol style="list-style-type: none"> To bring all the discussion into focus in terms of a summary. To serve as a springboard to discussion of new aspects of the problem. 	<ol style="list-style-type: none"> These are the key ideas you have expressed If I understand how you feel about the situation

7. BASIC COUNSELLING SKILLS: THE CAR KHUFF MODEL

The model by Dr Robert Car khuff, is specifically the source of all current systematic approaches to interpersonal relating. The most profound step of counselling is relating interpersonally. The following provides an important basis for all effective counselling efforts.

Step 1: ATTENDING

Purpose:

- Promotes the client's own attentiveness
- Allows the helper to receive verbal and non-verbal cues Involves:
 - Listening Actively: suspend your judgment; resist distractions; recall the expression; look for themes; wait to respond
 - Concentrating
 - Showing interest
 - SOLER (positioning)
 - Observing (part of attending): body language; facial expressions; congruency of behaviour; dress; energy level; health; appearance

Step 2: RESPONDING

Skill: can respond to feelings, to content, or to meaning. Feeling + Content = Meaning.

Purpose:

- i) To facilitate client's exploration
- ii) Gives the helper a chance to check his/her level of understanding
- iii) Clarifies the context within which those feelings occur
- iv) Lays a base

...TO FEELING

Steps:

- Attending to the client
- Listening to the client
- Observing the client
- Merging with the client
- Suspending our own frame of reference
- Presenting no mask
- Developing feeling words and interchangeable responses
- Checking out the feeling expression
- Responding to feelings "You feel..."

...TO MEANING

Steps:

- Reflect upon the content
- Supply the content
- Provide a reason
- Rephrase the content "You feel... because..."
- Respond to content "You're saying that..."
- Respond to meaning "You feel.... because..."

Step 3: PERSONALISING

Purpose: attempts to enable the client to understand where he/she is in relation to where he wants to be.

Involves:

- i. Personalising the meaning "You feel ... because you..."
- ii. Personalising the problem "You feel ... because you cannot..."
- iii. Personalising the feeling "You feel ... because you can't..."
- iv. Personalising the goal "You feel... because you can't.... and you want to..."
- v. Personalising understanding

Example Scenario:

The client is attracted to the amount of money that he is making, but at the same time he finds it unchallenging and monotonous.

Formula response:

"You are feeling confused and ambivalent towards your work **because** it is satisfying you economically, but you are not stimulated."

Non-formula response:

“It is really boring to do the same thing everyday even though you are making good money.”

ADVICE-GIVING

Advice giving is inappropriate for a counsellor as it is not his/her role to solve problems. Advice takes the problem away from the client. A sense of dependency, helplessness and low self-esteem is created. Let the client know that they can deal with the problem; they are capable; give them self-confidence. Counsellors make clients aware of their options (all of them). Information giving is very important. The client should not be able to blame the social worker for telling him/her what they should do. Consequences should be openly explored. Try to remain unbiased at all times and do not prompt the client in a particular direction.

8. CHECKLIST OF COUNSELLOR SKILLS, QUALITIES AND ETHICS

SKILLS

1. Non-verbal
 - Facing squarely
 - Open posture
 - Leaning forward
 - Eye contact
 - Reasonably relaxed
 - Appropriate hand and facial movements
2. Verbal
 - Minimal encouragers
 - Appropriate tone of voice
 - Simple, precise language
 - Accurate reflection of feelings
 - Linking feelings to experience

QUALITIES

- Genuine
- Respectful
- Warm
- Appropriately serious
- Empathic
- Moves at client's pace
- Shows interest

ETHICS

- Acceptance
- Non-judgemental attitude
- Controlled emotional involvement
- Purposeful expression of feeling
- Individuality
- Confidentiality
- Client self-determination

