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SPECIAL  
PROGRAMME  
ON AIDS

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COUNSELLING IN  
HIV INFECTION AND DISEASE



WORLD  
HEALTH  
ORGANIZATION

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## Counselling in HIV infection and disease

The world is facing an epidemic of a disease for which there is presently no cure and no early prospect of a vaccine. It thrives on human ignorance, fear and resistance to change. The disease is acquired immunodeficiency syndrome (AIDS). AIDS can be prevented, however.

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### **AIDS can be prevented — A worldwide effort will stop it.**

On the basis of available information, The World Health Organization estimates that between five and ten million people are infected with the virus that causes AIDS — the human immunodeficiency virus (HIV). Most of them do not know they are infected. Between 500,000 and three million of them are expected to develop AIDS by the early 1990s. This means that during the next five years there may be 5 to 20 times more AIDS cases than there have been over the last five years.

Several features of HIV infection and AIDS should be noted:

- Infection with the virus is life-long. Once a person is infected, the virus remains in the body and the risk of developing AIDS or other conditions related to HIV increases with time.
- A person who is infected with the virus may have no symptoms for years and may be quite unaware of the infection. However, such a person can pass the virus on to others — the main route of spread is through sexual contact.
- People infected with HIV can continue to be fully functioning members of society. They should be helped to do so and to behave responsibly so as to prevent further spread of HIV.
- HIV infection can be prevented even without a vaccine. It is spread by well recognized and specific behaviours, mainly involving sexual relations and the sharing of contaminated needles. These behaviours are amenable to the exercise of individual responsibility and control. Avoidance of risk behaviour can stop the spread of the infection.
- The AIDS epidemic has provoked fear and misunderstanding about what HIV infection and AIDS mean for social relationships and society. Policy-makers, health workers, the public, and those most directly affected have all been influenced by this fear and misunderstanding.

Programmes for preventing the spread of HIV focus on changing attitudes and behaviour; counselling is a critical part of such programmes. Counselling not only provides information and education in a personal manner, but it helps HIV-infected persons and those associated with them come to terms with their situation and accept and carry through their responsibilities.

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### **The role of counselling**

Counselling is a process that can help people understand better and deal with their problems, and communicate better with those with whom they are emotionally involved. It can improve and reinforce motivation to change behaviour. Counselling helps people learn and deal with fear and anxiety. It can provide support at times of crisis. It helps them face up to their problems and reduce or solve them.

Counselling may help people solve problems arising out of HIV infection in themselves, their families, or others to whom they are close. It is a means of ensuring that information on AIDS is correct and consistent, and of assessing life-styles, personal expectations, and willingness and capacity to change behaviour.

Counselling can be used to make sure that individuals considering being tested for HIV infection are well informed and appreciate the technical, social, ethical and legal implications of testing.

Counselling as a service should ensure continuing access to the counsellor and consistent support from the health and social system. It must ensure adequate time for discussion and problem-solving. Ensuring time for discussion has an important symbolic value: it signifies society's willingness to provide support and care.

Counselling as a process respects the individual regardless of sexual preference, socio-economic background, state of health or national, religious or ethnic origin.

Counselling is a means of helping people avoid discrimination against HIV-infected persons and of ensuring their continued integration in society.

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## Counselling for whom?

The need for counselling arises in many circumstances related to HIV and AIDS.

- Individuals considering being tested or screened for HIV infection need to be carefully prepared and supported. They need to know the facts about testing and its implications. Their decisions should be founded on correct information.
- Counselling is vital when a test shows HIV infection. It helps deal with the resultant fear and anxiety and often hostile attitudes on the part of both the patient and the patient's family, friends and other loved ones.
- HIV-infected but otherwise healthy persons may experience more stress than those who already have AIDS. They will often need special care and support. Counselling is needed as an integral part of the management of stress and as a means of motivating them towards positive behaviour change.
- As HIV-related diseases develop, medical needs must be met quickly and efficiently. A function of a counselling service will be to mobilize support and refer patients to medical care and other services that can help maintain hope, dignity and quality of life.
- AIDS and other HIV-related diseases can result in unemployment, loss of educational possibilities, and other social handicaps. Counselling can help to reduce such effects. It can help to mobilize the continuing medical and psychosocial support that patients and those who are caring for them need.
- Sometimes a person may be infected but cannot or will not be tested. People with risk behaviour, such as intravenous drug users and prostitutes, need to be counselled and helped to behave in ways that will reduce their risk of contracting HIV infection or passing it on to others.
- Counselling is also useful for those who are tested and found not to be infected. They too need to be advised about what they should do to avoid HIV infection.
- Health workers, family, friends, all who come into regular social or professional contact with HIV-infected persons and AIDS patients, can benefit from counselling and the support it provides.

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## Who provides counselling?

In different circumstances different people can undertake counselling. A counsellor should be able:

- to communicate information about HIV infection and AIDS in an accurate, consistent and objective manner;
- to gain the trust of people who need help with their psychological and social difficulties;
- to listen sympathetically to people who are afraid, anxious, distressed, and possibly hostile;
- to understand other persons' feelings, to accept these feelings and their expression without criticism or censure, and to respond to them in such a way that the other persons can feel free to express their feelings;
- to help HIV-infected people understand their problems and those of the other people in their lives who are affected;
- to help people reduce or resolve their problems.

Many people already have some experience as counsellors. With additional training in the skills needed to work with people affected by AIDS and related problems they can provide valuable care and support.

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## Risk reduction

In all countries there are people whose behaviour increases their risk of becoming infected with HIV. Homosexual and bisexual men, male and female prostitutes, men and women with many sexual partners, intravenous drug users and their sexual partners, for example, are at such increased risk.

Education and counselling services should be targeted to these persons. They need to learn accurately the nature of the disease, how it is transmitted and how infection with HIV can be prevented.

Risk reduction needs to emphasize that:

- the main route of HIV transmission is sexual contact; HIV is spread through vaginal, anal or oral sex; the sexual spread of HIV can be prevented

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- intravenous drug users are at particularly high risk because they often share needles and syringes; support for stopping the use of intravenous drugs must be provided; methods to reduce the risk of infection and transmission of infection need to be made clear; sexual partners of drug users should be told of the risks they run even though they themselves may not be using drugs
  - any skin-piercing (including injections, ear-piercing, tattooing, acupuncture or scarification) can transmit the virus if the instruments used have not been sterilized and have previously been used on an infected person; people who provide any skin-piercing service should know of this danger and learn how to sterilize their instruments; the public should understand the risk of infection, keep skin-piercing to a minimum, and insist it is done with sterile instruments
  - women who are pregnant and infected with the AIDS virus can transmit HIV infection to their unborn children; women who run the risk of becoming pregnant and contracting HIV infection need counselling.

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### **What needs to be done now**

1. Counselling is a vital part of all strategies for preventing and controlling AIDS. It not only helps those who are already infected adapt to their problem but also helps prevent the further spread of HIV infection.
2. Counselling needs to be integrated with all HIV testing, screening, and medical care programmes. Counselling has to be recognized as an integral part of all health care programmes and activities for HIV control and prevention.
3. Large numbers of people need to be trained in the skills of counselling. New training programmes should be instituted. Existing programmes in counselling will need to include training on HIV infection and AIDS.
4. Counselling services should be readily available and accessible.
5. For further information on establishing a counselling service for HIV infection and AIDS, please contact the Special Programme on AIDS, World Health Organization, 1211 Geneva 27, Switzerland.

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