

## Client Satisfaction with HIV/AIDS Counseling

### **General Summary:**

This symposium reports on the qualitative aspects of a country-wide study of HIV/AIDS clients in Botswana, Africa. It is part of a programmatic effort to shed light on the HIV/AIDS epidemic, which has been so devastating world-wide, but especially in Africa. Historically, Botswana had the largest problem with HIV/AIDS infected citizens. That has changed, but it is still a major problem in Africa, and throughout the world. The research effort reported on is a country-wide study of HIV/AIDS clients who are receiving counseling and the following themes were examined by members of the research team: Demographic information regarding the clients/country, Intervention Strategies, The Negative Impact of being HIV-Positive in Botswana, Positive attitudes/outcomes of a positive status, and How counseling has been most valuable/What additional help was asked for?

### **Demographic information:**

Over the last decade, the prevention of HIV/AIDS has become an increasing concern for Southern African countries, particularly Botswana. It is estimated that approximately 68 % of individuals living with HIV/AIDS reside in Sub-Saharan African countries (WHO, 2010). The current study sought to further examine the process and implementation of HIV/AIDS counseling in Botswana. Surveys were completed by 300 clients who received HIV/AIDS counseling from agencies and hospitals in 10 districts. Participants were given a 82- item questionnaire, and were asked to respond to five open ended questions. This presentation will include a description of the study, including materials used, methods involved, as well as present information on the overall demographics of the participants.

### **Intervention Strategies**

While the number of HIV/Positive individuals is exceptionally high, rates of HIV/AIDS have decreased in recent years with the implementation of prevention efforts. Such efforts have included education on the virus and how it may spread, along with ways it can be prevented. Additionally, medication management of HIV/AIDS has increased in Botswana as people become more aware of the serious consequences of the virus, and outreach efforts have been more and more successful in treating those currently affected by HIV/AIDS. Free voluntary counseling and testing is now offered in Botswana, and is typically provided by counselors who have received specialized training on the prevention of HIV/AIDS (Freeman, 2003). However, limitations remain on the number of individuals with HIV/AIDS who can be reached, as well as the manner in which such counseling is provided.

### **The Negative Impact of being HIV-Positive in Botswana**

This presentation seeks to inform the audience of the negative impact that an HIV-positive status has on an individual in order to demonstrate the need for counseling with this population. In our study, a question was asked among the survey participants to elicit the ways in which being HIV/AIDS positive has affected their lives. This question was qualitative in nature and reads as: What impact has being HIV positive had on you? The answers consisted of an amalgam of negative and positive outcomes, as well as some participants who responded by declaring their HIV/AIDS status had made no impact on their lives. By far, the majority of respondents had

some type of negative impact from their positive status. This team has identified a number of themes related to the negative impacts of being HIV-positive within the survey responses and feels they are critical to consider in training counselors to work with HIV-positive individuals. Outside of the numerous physical effects of contracting HIV, the themes include: fear, hiding one's HIV/AIDS status, facing discrimination, and problems related to one's job or career. Each of these themes has far-reaching effects on the individuals with whom they reside. The effects include psychological stress, conflicts in interpersonal relationships, and behavioral disturbances to name a few. Furthermore, many of these negative impacts are compounded because individuals may experience more than one of these adverse effects.

### **Positive attitudes/outcomes of a positive status**

1. While being HIV positive has negative consequences, clients also have positive and supportive experiences.
  - a. Many HIV positive clients reported that their families and partners are generally supportive, after initial surprise. They accepted the client's HIV status and encouraged them to take medication, and follow doctors' advice. This acceptance and support encouraged the client to reach out for medical services and counseling.
  - b. Though not all clients disclosed their HIV status to friends due to fear of discrimination and isolation, many selectively shared their status, and experienced positive outcomes. In those cases, friends accepted clients as HIV positive and frequently encourage them to follow doctors' orders and take medication regularly.
2. Many of the clients reported that being identified as HIV positive has no impact because they have accepted their status. Some reported that there is no difference in their lives before and after being identified as HIV positive. Due to brief answers in this category, it is unclear how clients accepted their status and overcame the initial shock. It is fair to question whether clients' acceptance could be the result of denial of status and/or negative impacts and overwhelming emotions. Future in-depth qualitative study on the change mechanism is necessary.
3. Some of the clients reported that they now tend to not think about the future and only live in the present. This seems to be a "here and now" acceptance. It is difficult to conclude how clients developed this coping strategy, through hopefulness or hopelessness. Further investigation on the meaning of this coping strategy is necessary.

### **How counseling has been most valuable/What additional help was asked for?**

This presentation will inform the audience members what clients in this study found to be most valuable as well as what additional help clients asked for. This information is helpful in identifying what was most effective about the counseling clients received and what can be improved in order to better serve this population. Clients surveyed in our study were asked a two-part qualitative question in order to obtain this information. The question read as, "In what ways has counseling been most valuable to you, and what additional help are you most

in need from your counselor?” Participants responded with a plethora of answers that were collapsed into five themes for both parts of the question.

In regards to how counseling was most valuable for clients, the five themes that were identified were: accepting status, education (i.e., safe sex, avoid secondary infection, promote general health), medication adherence, alcohol issues, and instillation of hope (i.e., belief to live positively, belief to live a long life). These themes are encouraging because they demonstrate the positive impact counseling can have on the mental and physical health of clients with HIV/AIDS.

When looking at the additional help that clients asked for, the five themes that were developed were: introducing programs (i.e., for unemployed, provide food baskets, transportation), more counseling sessions, more information about programs, more house visits, and more counseling training. While this information shows that there is room for improvement in the services provided to this population, it is encouraging in that clients are asking for more counseling and more training for their counselors.