INTERPERSONAL COMMUNICATION AND COUNSELING FOR CLIENTS ON TUBERCULOSIS AND HIV AND AIDS

Training Curriculum for TB Health Workers

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Acknowledgments

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For further information regarding this curriculum, please contact Dr. Kateryna Gamazina, PATH Ukraine Country Program Director, at kgamazina@path.org.
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About this curriculum

This curriculum is designed to introduce the principles of interpersonal communication and counseling to tuberculosis (TB) medical workers and to provide practical experience in TB and HIV and AIDS counseling skills in a three-day workshop.

The epidemics of TB and HIV in Ukraine require medical providers to understand the importance of counseling that is oriented to client needs and to possess the practical skills to conduct such counseling. Effective interaction between medical providers and clients will enhance the ability of clients to successfully complete TB treatment. It also will enable successful diagnostic counseling and testing (DCT) of TB patients for HIV according to international norms and Ukrainian legal requirements.

This curriculum also consists of a chapter dedicated to the prevention of burnout and stress management, which are very important issues for TB medical providers given the psychological and social conditions of their clients and the need for long-term treatment.

Training objectives:

1. To review the basic concepts and skills of interpersonal communication and counseling.
2. To recognize the effects of personal attitudes and values in counseling.
3. To discuss factors that influence effective communication.
4. To understand the importance of focusing on the client as an individual and helping him or her to make decisions for himself or herself.
5. To promote positive changes in medical providers’ attitudes towards their communication with the clients.
6. To learn the main steps of effective counseling and to be able to apply them in counseling patients on TB and HIV and AIDS.
7. To practice active listening skills (reflecting, paraphrasing, summarizing, etc.)
8. To discuss ways to identify where clients are on the behavior change continuum and to help clients make decisions.
9. To gain and practice the skills of effective counseling on TB.
10. To gain and practice the skills of effective DCT of TB patients for HIV.

The curriculum is divided into four parts:

I. Interpersonal communication.
II. Main steps of effective counseling.
III. Counseling on TB.
IV. Diagnostic counseling and testing of TB patients for HIV.

Each part of the curriculum includes:

- An introductory page summarizing the objectives, time, sessions, materials required, and handouts.
- A trainer’s guide providing suggested training steps and instructions for group work, exercises, and role-plays.
• Training resources with slides and trainers' notes.
• Handouts (HOs), which are listed on the introductory page of each part of the curriculum and attached as appendices.

This training curriculum has been designed using a participatory approach, which means that the exercises require the active involvement of all participants. The role of the trainers is to guide the participants through learning activities rather than to lecture the audience. Participatory methods, such as brainstorming, group work, and role-play exercises, have been shown to be a critical feature of successful learning. It is desirable to have as much interaction as possible, to reduce the amount of lecture time, and to engage the participants fully. The curriculum includes a set of slides and a narrative.

As long as the main points are covered, trainers are encouraged to modify training steps and substitute exercises according to their time constraints and specific needs.
Training agenda

Day 1

9:30 – 10:45  
**Opening**
1. Opening session. Introduction of trainers and participants.
2. Review of workshop objectives and agenda. Introduction to the workshop.
3. Participants work in groups to discuss communication problems with their patients and list training expectations and suggestions for possible inclusion in training agenda. Report to the whole group on the three most common problems and expectations. Discussion.
4. Establishing ground rules.
5. Pre-training questionnaire.

10:45 – 11:00  
**Coffee break**

11:00 – 13:00  
**Interpersonal communication (IPC)**
1. Definition of counseling. Goals and objectives.
   • Group exercise “What am I doing?”
2. Overview of communication process and the basic elements of effective communication.
   • Group exercise “Main message.”
3. Skills for effective interpersonal communication.
4. The effects of personal attitudes and values in communication and counseling. Perceptions and values.
   • Exercise “Cat.”
   • Exercise “Old/young woman.”
   • Exercise “Agree/disagree.”
5. Rumors and misinformation.
   • Group exercise.
6. Verbal and nonverbal communication. Forms of verbal and nonverbal behavior used in counseling.
   • Body language exercise.
7. Barriers to effective communication and common mistakes.

13:00 – 14:00  
**Lunch**
Main steps of effective counseling

1. Creating a pleasant and comfortable atmosphere for the patient:
   • Privacy and confidentiality.

2. Collecting information/asking questions:
   • Types of questions.
   • Group exercise on types of questions.

3. Listening actively:
   • Listening habits exercise.
   • Active listening skills.
   • Paraphrasing exercise.
   • Participants work in groups to practice active listening skills.

Coffee break

4. Providing information:
   • Group exercise.
   • Discuss the most important issues for the visit.
   • Prioritize information to be given.
   • Use simple language.
   • Group exercise on using simple language.
   • Repeat important information.


6. Getting feedback, checking understanding, and encouraging client to ask questions:
   • Importance of feedback exercise.

7. Helping clients make decisions:
   • Stages of awareness/behavior change adoption.

8. Making “contracts” with clients – who will do what and by when.

9. Scheduling next visit or making a referral.

10. Meeting counseling challenges.

Summary for the day.

Daily evaluation.
Day 2

9:00 – 9:15 Recap of DAY 1
Objectives for DAY 2

9:15 – 10:45 Counseling on TB
1. Importance of effective interpersonal communication for successful treatment and care of clients with active TB. Applying principles of effective counseling.
2. Types of counseling on TB.

10:45 – 11:00 Coffee break

11:00 – 12:00 3. Demonstration of effective and poor counseling. Discussion.

12:00 – 13:00 4. Role plays:
   • Participants get case studies and work in groups of three to practice asking questions, using active listening skills, providing information to client, and helping client to make a decision.

13:00 – 14:00 Lunch

14:00 – 15:40 5. Participants are divided in three groups to discuss objectives, develop counseling plan, and prepare a role play for the following situations:
   • Preliminary counseling.
   • Initial counseling.
   • Ongoing counseling.
6. Presentation of group work and discussion.

15:40 – 16:00 Coffee break

16:00 – 17:40 Presentation of group work and discussion (continued).

17:40 – 18:00 Summary for the day. Daily evaluation.
Day 3

9:00 – 9:10 Recap of DAY 2 and objectives for DAY 3

9:10 – 10:40 Overview of HIV infection
1. History of the epidemic and characteristics of the HIV pathogen.
2. Transmission of HIV.
3. Diagnostic tests.
4. Disease progression.
5. TB/HIV co-infection and other opportunistic infections.
6. Treatment and monitoring of client health.
7. Stigma and discrimination.
8. Privacy and confidentiality.

10:40 – 10:55 Coffee break

10:55 – 13:00 Diagnostic counseling and testing of TB patients for HIV
2. Types of counseling. Pre-test counseling. Role-plays.

13:00 – 14:00 Lunch

14:00 – 16:30 3. Posttest counseling: negative, indeterminate, and positive results. Role-plays.

Coffee break

16:30 – 17:00 4. Ukrainian legislation on HIV and AIDS.

17:00 – 17:30 5. Burnout and stress management.

17:30 – 18:00 Summary and wrap-up
- Review and summary of key issues.
- Post-training questionnaire and workshop evaluation.
INTRODUCTION

Objectives:
1. To officially welcome and introduce the participants, any guests, and trainers.
2. To describe the purpose and agenda for this training.
3. To create a set of “ground rules” by which the group and trainers agree to work throughout the training.
4. To determine the participants’ problems in communicating with tuberculosis (TB) clients and their expectations for the training.
5. To carry out the pre-training questionnaire.

Time: 1 hour 15 minutes

Materials:
- Copies of registration form
- Name tags
- Copies of the training agenda (HO #1)
- A flipchart and markers (for group work)
- Pre-training questionnaire (Appendix 1)

Welcome and introduction

1. Ask a representative of the local host organization to formally open the training by welcoming the participants and explaining the purpose of the training.

2. Welcome participants to the training. Introduce trainers briefly.

3. Ask each participant to briefly state his or her name (what they want to be called during the training), clinic, job title, and the number of years each has been working in this field. Depending on the number of participants, they may make a somewhat longer statement (e.g., all the above, plus what do they like to do in their free time; what do they like most in their work; why they believe they were selected for the training; etc.)

4. If time allows, you may conduct ice-breaking exercises (games that help people to get to know each other and to relax). Below are some examples of these exercises¹:

   • Names and adjectives
     Participants think of an adjective to describe how they are feeling or how they think of

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¹ International HIV/AIDS Alliance. 100 Ways to Energize Groups: Games to Use in Workshops, Meetings, and the Community. 2003.
themselves. The adjective must start with the same letter as their name, for instance, “I am Carol, and I am creative” or “I am Allison, and I am accurate.” As they say this, they can also mime an action that describes the adjective.

- Names in the air
  Ask participants to write their name in the air first with their right hand, then with their left hand. Finally, ask them to write their name in the air with both hands at the same time.

- I like you because...
  Ask participants to say what they like about the person on their right. Give them time to think about it first.

**Overview of training objectives and agenda**

1. Provide an overview of the training. Emphasize that the overall goal of this training is to encourage participants to support positive attitudes towards communication with clients and to prepare them to provide counseling on TB and HIV in an effective, comfortable, and CLIENT-CENTERED fashion. By focusing on the client as an individual and by considering factors both inside and outside of TB clinic settings that influence a client’s behaviors and decision-making, providers will be better able to assess and meet a client’s informational, decision-making, and emotional needs. This will help the patient make decisions that will be more likely to be carried out, including completion of their TB treatment regimen.

2. Review objectives for the training.

3. Distribute the agenda (HO #1) and summarize the training framework. Tell participants that while you intend to provide and review some information and skills, these three days will be an interactive process during which they will learn from each other, not just from the trainers. They will do this through a combination of information sharing, role-playing, and small group work to create an interactive learning environment. The content covered each day will build on the work of the previous days, so it is important that everybody actively participates and stays all three days.

4. Tell participants about the importance of creating a positive learning environment (see Trainer’s Resources on page 10). Everyone in this training comes with experience that is valuable to the process. During three days of training, they will be asked to express their opinions on a variety of issues related to their work and will participate in interactive activities. In order for people to participate fully, they need to feel safe and comfortable. Ask the group to brainstorm ground rules and expectations of how the group will work together during the training.

**Suggested ground rules include:**

- Show respect, especially for differences of opinion.
- Speak one at a time, so that we can all hear what everyone else is saying.
- Avoid side conversations because they distract people around you from hearing what someone else is saying.
- Start and end on time.
- Use “I” statements when expressing your opinion. For example, “I believe that…” instead of, “We all believe that…”
• If possible, participate fully and equally. If people feel uncomfortable with something, they can choose to “pass” from participating in the discussion.
• Keep all personal information of other participants confidential.
• Turn off all cell phones or put them on quiet mode.

5. Post the rules on the wall where they are visible and ask participants to abide by these rules throughout the training.

Expectations

Explain that to better understand the participants and to address the most important physician-patient communication problems during the training, it is important to hear about participants’ experience and what the participants’ expectations are for this training.

Group work

1. Divide the audience in groups of five people in each group and ask them to choose a color for the group.
2. Give each group a flip chart and a marker that corresponds with the color of each group.
3. Ask participants to discuss communication problems (barriers or challenges) that they experience with their TB patients and to choose three most common problems. Also, ask participants to discuss the skills that they expect to gain at the training to be better equipped to address these problems.
4. After 15 minutes, invite a representative of each group to present its list to the audience and discuss it with the whole group. Ask participants questions like:
   • When you see a client for the first time, how does he or she feel when asking questions?
   • Did you ever notice that your client may feel uncomfortable? Why or why not?
   • What can happen when clients are afraid to ask questions?
   • What can you do to make your clients feel more at ease during the visit?
5. Using scotch tape, stick each flip chart with the list of expectations to the wall and leave them until the end of the training.
6. Explain that trainers will refer to this list during the training and will check whether the groups’ expectations were met at the end of Day III.

Pre-training questionnaire

Ask the participants to fill out the pre-training questionnaire. (See page 125.) Explain that they should not put their names on the forms. They are not expected to know all the correct answers to these questions. Their answers will provide the trainers with a baseline understanding of what participants know coming into the training. This questionnaire, conducted at the beginning and at the end of training, will help to evaluate the effectiveness of the training and to collect ideas on how the training curriculum could be improved.
Creating a positive learning environment

Many factors contribute to the success of the training course. One key factor is the learning environment. Trainers can create a positive learning environment by:

- **Respecting each participant.** Trainers should recognize the knowledge and skills that the participants bring to the course, and can show respect for them by remembering and using the participants’ names, encouraging them to contribute to discussions, and requesting their feedback on the course agenda.

- **Giving frequent positive feedback.** Positive feedback increases people’s motivation and learning ability. Whenever possible, trainers should recognize the participant’s correct responses and actions by acknowledging them publicly and making such comments as “Excellent answer!” “Great questions!” or “Good work!” Trainers can also validate the participants’ responses by making such comments as, “I can understand why you would feel that way.”

- **Never criticizing participants’ answers.** If somebody’s response is not correct, ask other participants whether they agree and ask them to comment. Only after that, offer to the group your comments in a respectful way. While discussing ground rules with participants, suggest that they show respect to everybody’s opinion despite whether they agree or disagree. To change participant attitudes, it is important that during discussion, participants themselves come to the correct conclusion. The trainer should facilitate discussions, leading them in the right direction, by using open-ended questions.

- **Making sure that the participants are comfortable.** The training room should be well-lit, well-ventilated, and quiet, and should be kept at a comfortable temperature. Breaks for rest and refreshments should be scheduled.

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