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What is Voluntary Counselling and Testing?



60 mins.

OBJECTIVE(S)

- Knowledge: To understand the process of Voluntary Counselling and Testing to determine HIV status.
- Attitudes: To believe that high-quality Voluntary Counselling and Testing will be a positive and supportive experience.

TEACHING METHOD

- Group discussion, Flow chart, Q&A with a resource person, Matching quiz

MATERIALS

- 1 worksheet per participant
- 1 quiz sheet per participant
- 1 handout per participant
- pencils / writing utensils

NOTE: Invite a resource person into the classroom to answer questions about Voluntary Counselling and Testing.

LESSON PLAN

PART I – What is Voluntary Counselling and Testing (VCT)?

1. Introduce the lesson:
“Many people who have HIV do not actually know their status because they have never been tested. Getting a test for HIV is the only way to really know if someone is infected. The kind of HIV testing we will learn about is called Voluntary Counselling and Testing, or ‘VCT’ for HIV. Let’s explore what that means.”
2. Pass out a flow chart Worksheet to each participant. Ask them to follow the steps of VCT as you explain the process, writing their own notes directly onto their worksheet.
3. As you define each component of Voluntary Counselling and Testing for HIV/AIDS, ask if any students can explain the meanings of ‘V’, ‘C’ and ‘T’ to the class. The explanations below can help you clarify the students’ understanding.

“**Voluntary**” – This means that getting tested for HIV/AIDS is your choice. You decide if and when you get an HIV test. This is the opposite of *compulsory* testing, in which someone is forced to undergo testing. Compulsory testing is an invasion of privacy and a violation of human rights. So, the first step to Voluntary Counselling and Testing is your decision to seek testing.

“Counselling” – Voluntary Counselling and Testing includes counselling before and after the test for HIV. *Pre-test counselling* includes a private session with a counsellor, who explains the testing procedure and how the results will be given. You will have the chance to ask questions about the test, and share any fears or worries. You can then decide if you are ready for the test.

Interesting to note for students:

In a research study in Uganda and Kenya, many young people thought the counselling was the best part of the VCT experience. They appreciated the information and advice they received from counsellors. One young Kenyan woman said: “[The counsellors who] gave me courage to go for the test were so friendly. They encouraged me that whatever the results I should not give up. I liked the fact that they told me to go back to them after the test.”

In *post-test counselling*, the counsellor will support you as they tell you the result of your test. The counsellor will make sure you understand the result and allow you to express how you feel. They will help you make immediate plans and provide referrals for medical care, ongoing counselling and opportunities to talk to people who can help you understand more about HIV and AIDS, as needed.

“Testing” - The most common way of testing for HIV uses a blood sample, but there are oral-swab and urine tests available in some places. Your sample will be tested in a laboratory to see whether there are *antibodies* in your blood. Antibodies are chemicals produced by our white blood cells to fight specifically against HIV.

Possible results

Positive: If the test detects antibodies for HIV, we know that HIV has entered the body. When antibodies are found, we say the blood is HIV-positive, or seropositive. Blood tests are 99% accurate in most places. This means there is a 1% chance the test will not be accurate, and may show a “false positive.” For this reason, most positive or indeterminate results are confirmed with a second test.

Negative: A “negative” result means that antibodies were not found, indicating either that the person has not been infected with HIV, or, it may be too early to tell. In the 2-3 month period after infection, it is too early for antibodies to have formed. This period is called the *window period*. To be absolutely accurate, the test should be taken twice in three months giving HIV antibodies time to appear in the bloodstream after the time of infection.

4. Pass out copies of the Handout to each participant, and use the illustration to explain the window period further.
5. Open the floor for participants to ask any questions that they might have about VCT during a Question and Answer session with the Resource person. Make sure the following points are covered:

Q: Are the results private?

A: Yes, in Voluntary Counselling and Testing, your result will be kept “**confidential.**” It is your decision if you want to tell others the result. (Medical staff at the testing facility may have access to your result)

Q. How long will I need to wait for my result?

A. You may need to come back a few days or a week later for your results. During this time, you should avoid behaviours that may put you or others at risk. For example, if possible, abstain from sex while you are waiting, or use condoms correctly every time you have sex. Also avoid donating blood. Some places use “rapid tests” where you can get results within hours or even minutes (but if a test is positive, it still needs to be confirmed by a second test which may take up to two weeks).

Q. Where can I get a test and counselling?

A. Voluntary Counselling and Testing services can be offered within clinics, hospitals, health centres, sexually transmitted infections (STI) clinics, or special VCT centres. Sometimes they are offered by youth clubs or mobile vans. We will have a guest speaker tell us about the VCT services available locally. (See Lesson 3)

PART II – Testing what we have learned

Pass out a copy of the Quiz to each participant, or pairs of participants.

Answers to the Voluntary Counselling and Testing Quiz

Answers: 1 – G ; 2 - J ; 3 – A ; 4 – F ; 5 – C ; 6 – B ; 7 - A ; 8 – G ; 9 - H

**Voluntary
Counselling and
Testing QUIZ**

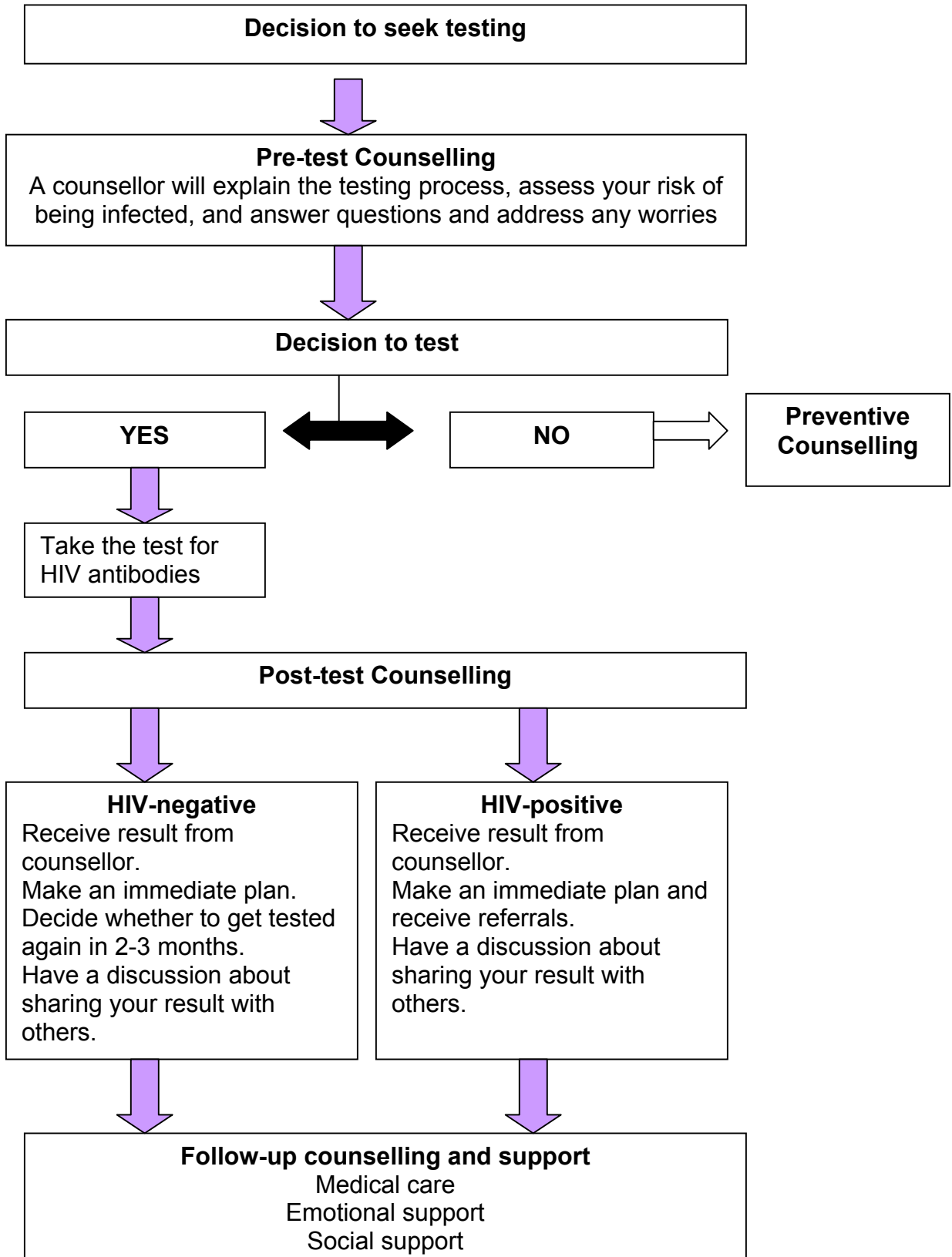
Instructions

Check what you have learned in Part I with this matching quiz. Read the statements in Column A and try to find the words from Column B to match the statement. Some answers in Column B may be used more than once, and some may not be used at all.

Column A	Column B
1 If you do not have HIV, your test will show...	A Antibodies
2 You can get tested at...	B Compulsory testing
3 The test for HIV looks for...	C Wait or come back
4 The test is accurate to...	D A positive result
5 To get the test result you may have to...	E Window period
6 "Voluntary" testing is the opposite of...	F 99%
7 What is not present in the blood during the window period?	G A negative result
8 What would be the result if you got tested during the window period?	H Infectious
9 During the window period, people may be able to pass HIV on to others, meaning they are...	I Negative
	J Health centre, hospital, STI clinic, or a special VCT centre
	K White blood cells
	L 89%

WORKSHEET

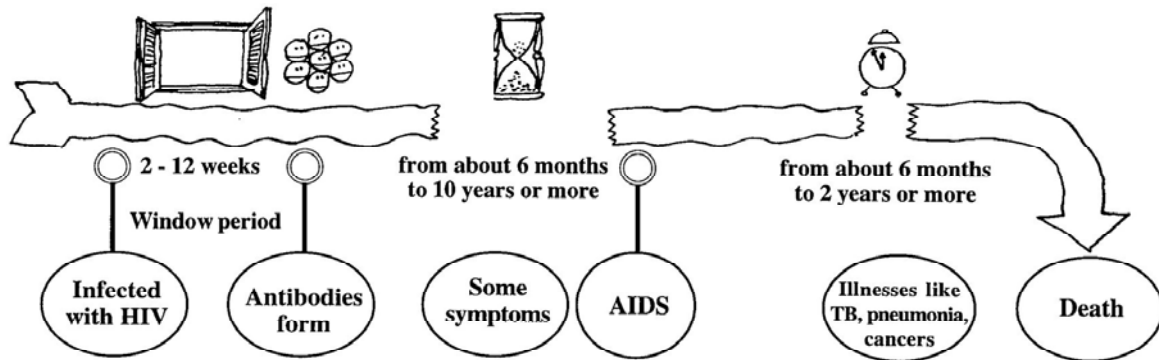
What are the steps in voluntary counselling and testing for HIV?



HANDOUT

This diagram shows the different stages of HIV and AIDS (the timing of stages may vary from individual to individual), including the *window period* immediately after infection, when antibodies for HIV have not yet formed.

During the window period, a test for HIV will show a negative result even if the person has been infected. For this reason, the test should be taken twice in three months to be certain of the result.



SOURCES

- School Health Education to Prevent AIDS and STD. A resource package for Curriculum Planners. Teachers' Guide and Students' Activities. UNESCO & WHO, 1994. <http://www.unesco.org/education/educprog/pead/CadAIDGB.html>
- EI / WHO Training and Resource Manual on School Health and HIV/AIDS Prevention. Prepared for Education International and the World Health Organization by Education Development Center, Inc. With the collaboration of CDC, UNAIDS, UNESCO, UNICEF, FNV. March 2001. <http://www.ei-ie.org/educ/aids/eepublication.htm>
- "HIV: Voluntary Counselling and Testing" in *YouthLens on Reproductive Health and HIV/AIDS*, No 3, YouthNet
- Action with Youth. HIV/AIDS and STD: A training manual for young people. Second Edition. International Federation of Red Cross and Red Crescent Societies, 2000. <http://www.ifrc.org>

Teacher/Facilitator reflection

- How effective do you think the lesson was in terms of:
 - Participation of all students?
 - The pitch or level of the lesson matching the students' abilities/interests?
 - Achieving the learning objectives?
- How comfortable were you with the content and methods?
- How did you adapt the lesson for your students & local situation?
- Other reflections: