

Stages of Counselling -GATHER

- G = Greet client in a friendly, helpful, and respectful manner.
- A = Ask client about needs, concerns, and previous use.
- T = Tell client about different options and methods.
- H = Help client to make decision about choice of method s/he prefers.
- E = Explain to client how to use the method.
- R = Return: Schedule and carry out return visit and follow-up of client

- **Greet**
- Welcome and register client.
- Prepare chart/record.
- Determine purpose of visit.
- Give clients full attention.
- Assure the client that all information discussed will be confidential.
- Talk in a private place if possible.

Ask

- Ask client about her/his needs.
- Write down the client's: age, marital status, number of previous pregnancies and births, number of living children, basic medical history, previous use of family planning methods, history and risk for STDs.
- Assess what the client knows about family planning methods.
- Ask the client if there is a particular method s/he is interested in.
- Discuss any client concerns about risks vs. benefits of modern methods (dispel rumors and misconceptions).

Tell

- Tell the client about the available methods.
- Focus on methods that most interest the client, but briefly mention other available methods.
- Describe how each method works, the advantages, benefits, possible side effects, and disadvantages.
- Answer client concerns and questions

Help

- Help the client to choose a method.
- Repeat information if necessary.
- Explain any procedures or lab tests to be performed.

Explain

- Explain how to use the method (how, when, where).
- Explain to the client how and when s/he can/should get resupplies of the method, if necessary.

Return

- At the follow-up or return visit ask the client if s/he is still using the method.
- If the answer is yes, ask her/him if s/he is experiencing any problems or side effects and answer her/his questions, solve any problems, if possible.
- If the answer is no, ask why s/he stopped using the method and counsel her/him to see if s/he would like to try another method or re-try the same method again.
- Make sure s/he is using the method correctly (ask her/him how s/he is using it).

Approaches in doing counselling

1. Directive or Counsellor –centred or authoritarian style:-

- Simplest to do
- Counsellor give advices, make decision based on what she thinks is in the the best interest of client.
- Expects the client to follow her advices
- Completely directed by counsellor.

2. Non-directive counselling or client-centred :-

- Counsellor is passive mainly listener.
- Client is active ,expresses herself freely and tells the counsellor what he/she wants.
- After careful reflection and clarification , makes her own decision.
- The main function of the counsellor is to create an atmosphere in which the client can work out his problem.

3. Non-authoritarian style:-

- Neither counsellor nor client controlled.
- Methods of counselling may change from client to client or even with the same client from time to time.
- It is highly flexible.
- Freedom of choice and expression is open to both the counsellor and the counselee.

Peer counselling

- Peer counselling are HIV positive men and women specially trained to hear the concern of clients and offer support and referral services.
- In this, counsellor is open about his/her HIV positive status and shares experiences with client.
- It is the process that is carried out as one to one interaction followed by group approach.
- It addresses the client issue through following process:-
 - Sharing feeling about similar experiences.
 - Share information about availability of HIV/AIDS prevention, treatment and care services.
 - Narrate their success stories to the peers and convey messages of positive thinking.
 - Supports client in becoming more involved in community activities.

Counselling and health education

	Counselling	Health education
1.	Confidential	Not confidential
2.	One to one process or a small group.	For a group of people
3.	Focused, specific and goal directed	Generalized
4.	Facilitates change in attitude and motivates behavior change	Information is provided to increase the knowledge
5.	Problem oriented	Content oriented
6.	Based on needs of client	Based on public health needs.

Conclusion

- Counselling is a process and not merely a technique through which clients are helped to modify their behaviour and cope with their status effectively.

❖ **Counselling is not**

- Telling or directing
- Giving advice
- A casual concern
- A confession
- Praying

Thank you