**Module 7: Advanced Counseling Training**

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| https://d30y9cdsu7xlg0.cloudfront.net/png/1303-200.png **Time: 1 hour, 20 minutes****Session Objectives**By the end of this session, participants will be able to:* Provide psychoeducation in ways to promote behavior change
* https://d30y9cdsu7xlg0.cloudfront.net/png/16392-200.pngUnderstand models of behavior change
* Understand common behavioral and emotional issues contributing to ART adherence difficulties
* Learn adolescent brain development factors contributing to adherence difficulties
* Learn specific parenting and child skills relevant to adherence counseling for parents and children

**Session Overview*** PART 1: Advanced Behavior Change
	+ Model of Change
	+ Encouraging Change Talk
	+ Pros and Cons
* PART 2: Developmental Considerations
	+ Adolescent Development and Adherence
	+ Child Adherence: Working with Caregivers

**Materials Needed*** Slides
* Adolescent Flipchart
* Child Flipchart
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| 30 minute Lecturehttps://d30y9cdsu7xlg0.cloudfront.net/png/128330-200.png | PART 1: Advanced Behavior ChangeTrainer will:* Review each stage of the model of change and the provider’s role in supporting each stage:
	+ Pre-contemplation
	+ Contemplation
	+ Preparation
	+ Action
	+ Maintenance
	+ Relapse
* Describe the steps of change talk
* Brainstorm the potential pros and cons of changing a behavior

Break for questions. |
| 20 minute lecturehttps://d30y9cdsu7xlg0.cloudfront.net/png/128330-200.png | * Discuss considerations of adolescent development and adherence
	+ What characteristics and abilities are necessary to achieve “good” adherence
	+ Adolescent brain development
	+ Teaching adolescents to take charge of their ARVs
		- Responsibility shifting
		- Support
		- Life changes
		- Variable schedules
	+ Disclosure
		- Ways to protect privacy
		- Discuss ways to decide who share their diagnosis with, and when
	+ What to do if the adolescent is in a relationship
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| 15 minute Lecturehttps://d30y9cdsu7xlg0.cloudfront.net/png/128330-200.png | Trainer will:* Discuss issues specific to caregiving for an HIV+ child:
	+ Parent responsibility
	+ Talking to children about ARVs
	+ Child refusal and reinforcement
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| 5 minute Wrap-up | Key points to emphasize in summary:* It is important to understand both behavioral and emotional reasons for adherence problems
* General counseling techniques include therapeutic alliance, collaborative health education, and motivational interviewing
* Adolescents are going through a unique period of development that requires providers to simultaneously support them and build the skills they need to take care of themselves
* Providers must work with parents to think of solutions that will make it better to give their child ARVs every day
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| 20 minute Activityhttps://d30y9cdsu7xlg0.cloudfront.net/png/33918-200.png | **Role Play****Part 1 – Enhanced Adherence Counseling with an Adolescent**Facilitator and a volunteer will role play enhanced adherence counseling with an adolescent.Ask the group if there are any questions before resuming lecture.**Part 2 – Enhanced Adherence Counseling with the Parent of an HIV+ Child**Facilitator and a volunteer will role play enhanced adherence counseling with a parent whose child is HIV+.Ask the group if there are any questions before resuming lecture. |

**Methodologies**



* Lecture
* Activity: Role Play

**Advance Preparation for Trainers**

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* Prepare to facilitate role plays with volunteers

**Activity: Role Play**

**Enhanced Adherence Counseling**

Instructions:

* The facilitator will select two volunteers to role play in front of the group.
* In Part 1, the facilitator will play the role of the adolescent and the volunteer will conduct enhanced adherence counseling.
* In Part 2, the facilitator will play the role of parent with an HIV+ child and the volunteer will conduct enhanced adherence counseling.
* In the role play, the volunteer should use OARS skills to discuss the character’s problems with adherence. Be sure that providers go through every step during their role play conversation (Open-ended questions, Affirmation, Reflective listening, and Summary statements).

**Part 1 - Adolescent**

**Volunteer: Provider**

**Facilitator: Joseph**

* 16 years old
* Perinatally infected with HIV
* His mother is deceased and his father is often away for work, so he lives with his grandmother, aunt, and two young cousins
* Feels frustrated that he has to take ARVs and often forgets to take them in the morning, so he will skip the day
* Has not told any of his friends that he is HIV+ and wants to start dating
* Encourage the volunteer to think about a new plan to improve adherence using the model of change.
* Remember that adolescents will need support problem solving and planning while being encouraged to think up solutions that will allow them to manage their medications independently.
* The facilitator should provide specific and positive feedback about the OARS approaches used at the completion of the role play.

**Part 2 – Parent of an HIV+ Child**

**Volunteer: Provider**

**Facilitator: Sarah**

* 25 years old, mother of Elizabeth, who is 7 years old
* Elizabeth often has trouble swallowing pills and will get upset when she has to take them
* Sarah feels overwhelmed and often gets angry with Elizabeth for having to struggle every day to take her ARVs
* Remind the volunteer that it is important both for the adults to be heard while reminding them it is their responsibility as caregiver to care for the child.
* Coach the volunteer to work with the parent to discuss a plan that reinforces the child’s positive behaviors.