Tutorial letter 202/2/2016

HIV/Aids care and counselling

PYC2605

Semester 2

Department of Psychology

Feedback on Assignment 02.

BAR CODE



1 INTRODUCTION

Dear Student,

We hope that you are enjoying your module in *HIV/Aids care and counselling*. If you find the course helpful, please tell your friends and colleagues about it. Remember, it is possible for students to enrol only for this one module for non-degree purposes, if they wish to do so. The only prerequisite for the course is matric (Standard 10/Grade 12). It may also interest you to know that almost 6 000 students enrol for the *HIV/Aids care and counselling* course (PYC2605) per year!

The main purpose of this tutorial letter is to give feedback on Assignment 02. However, before we do so, let's address some other issues first.

Assignment issues

In the previous semester, many students did not get examination admission because (a) their assignments were never received by Unisa; (b) the assignments reached Unisa after the closing date; and (c) the assignments were submitted in the wrong semester. Please note that it is your own responsibility to make sure that Unisa has received and marked your assignments. Please check *my*Unisa regularly to see if your assignment has been received and marked. If you check the system regularly and it seems that your assignment was not received or marked, **please direct your enquiries to the Students Assessment and Assignment Department**. Please do not contact your lecturers to find out what happened to your assignments. Your multiple choice assignments go directly to the Assignment section to be marked by computer. Unfortunately, lecturers do not see your multiple choice assignments at all.

Please note that you have to submit Assignment 01 to gain examination admission. Together Assignments 01 and 02 contribute 20% to your final year mark.

Please take careful note of your assignment closing dates. In each semester there are two multiple choice assignments each with a specific closing date and unique number.

Make sure that you know exactly if you are registered for the **first** or for the **second** semester. Use the **assignment closing date** and **unique number** of that specific semester ONLY on your mark reading sheet. If you are registered for the 2nd semester, please do not use the 1st semester unique numbers. Your assignment will NOT be registered on the system and it will get lost.

Electronic Learning Units and Open Electronic Resources

Do you enjoy the online module? We surely had a lot of fun compiling it! Some students find the online approach a bit daunting but keep in mind that the purpose of the online module is only to *guide you through the prescribed book* and to challenge you to think differently about HIV and Aids and to motivate you to do things in your communities. There will be <u>neither</u> examination questions directly on the content of the electronic learning units, <u>nor</u> on the open educational resources (e.g. videos and webpages). The **examination questions are based on your prescribed book only**, and Tutorial Letter 101/2016 (Section 7.1 Syllabus: What to study for the exam) indicates what to study in your prescribed book.

Declaration Letters

As discussed in Tutorial Letter 101/2016, you will *automatically* receive a Declaration Letter after successful completion of this module. Please note that we cannot re-issue this Letter of Declaration if you do not receive it the first time or lose it. Please make sure that you receive your Declaration

Letter by following three simple steps:

- (a) Make sure that Unisa has your most recent postal address. We will send your Declaration Letter to the address that you registered with Unisa. If your address changed, please notify Unisa (not the Psychology Department) to change your address on the student system (fill in the form at the back of *my* Studies @ Unisa and send it to The Registrar (Academic), PO Box 392, UNISA 0003). You can also change your details by logging into *my*Unisa.
- (b) Please make sure that all outstanding fees are paid. If your study fees are in arrears, Unisa will unfortunately not release your exam results, and we will not be able to issue the Declaration Letter either.
- (c) Return all your library books that are outstanding. Unisa will not release your exam results if you still have library books in your possession.

Note: We do **NOT** <u>print or issue</u> the letters of declaration in our offices in the Department of Psychology. Please do not visit us on campus to issue the letters because we are not able to do so.

The examination paper

Tutorial Letter 102 contains a practice examination paper to familiarise you with what to expect in the examinations. Please make use of the opportunity to see if you can complete it (without your prescribed book) within the two hours allowed for the paper. DO NOT send your answers to Unisa to be marked. You will find the answers at the back of the tutorial letter for you to mark your own paper. Old examination papers for this module are available on *my*Unisa.

Feedback on Assignment 02

The purpose of this assignment was to help you to assess where you are in terms of your HIV and Aids reading and comprehension skills, knowledge and attitudes at this early stage of your studies. Use your assignment mark and our feedback to sensitise you to possible problems in your learning. Table 1 gives a summary of the correct answers to Assignment 02.

Table 1: Correct answers to Assignment 02.

Question	Assignment 2 correct answer	Question	Assignment 2 correct answer
1	3	11	2
2	1	12	2
3	1	13	4
4	4	14	1
5	1	15	2
6	2	16	4
7	2	17	3
8	1	18	2
9	3	19	1
10	3	20	4

Students generally did very well in Assignment 02. I will now discuss each one of the questions in more detail.

QUESTION 1

It is very important for Aids counsellors to know the terminology of sex practices practised by their clients. If your client has oral-penile contact or oral sex performed on a male partner, it is called

- (1) anilingus
- (2) cunnilingus
- (3) fellatio
- (4) femilingus

Feedback on Question 1

The correct answer is 3. The performance of oral sex on a man is called fellatio. Anilingus is oral-anal sex (option 1 incorrect), cunnilingus is oral sex on a woman (option 2 incorrect), and femilingus is oral sex on a woman by a woman (option 4 incorrect). Read p. 177 in your prescribed book for more information.

QUESTION 2

Dancing, singing, rituals and ceremonies are often used in traditional African communities for healing or educational purposes. Should these forms of dramatisation be encouraged by Aids educators?

- (1) Yes, it should be encouraged, because dramatisation helps people to overcome their anxiety and to express their emotions.
- (2) No, it should be discouraged, because dramatisation distracts people's attention from the real, serious issues of Aids.
- (3) Yes, it should be encouraged, because dramatisation helps people to relax and to forget the serious realities of Aids.
- (4) No, it should be discouraged, because dramatisation discourages people from accepting and integrating threatening issues into their own personal reality.

Feedback on Question 2

The correct answer is 1. In addition it helps them to accept and integrate threatening parts of themselves into their personal realities (options 2, 3 and 4 incorrect). Read p. 153 and p. 227 in your prescribed book for more information.

QUESTION 3

During the counselling session, your client discloses to you that he/she is HIV positive and explains that the reason for not telling you before was because he/she was afraid of your response. According to Egan, in which one of the following responses listed below would you, as the counsellor, demonstrate basic empathy?

- (1) You felt afraid to tell me that you are HIV positive, because you feared that I would reject you.
- (2) I know how you feel!
- (3) Do I understand you correctly if I say that you are HIV positive and that you did not want to tell me because you were afraid of my response?
- (4) When did you find out that you were HIV positive?

Feedback on Question 3

The correct answer is 1. Basic empathy is to listen, understand and communicate in such a way that the client understands himself/herself better and be able to act on it. Therefore, you will demonstrate empathy by restating or rephrasing what the client tried to say to you as a counsellor. Option 2 is incorrect as the counsellor demonstrates experiencing the same emotions (sympathy). Option 3 is incorrect as it is a form of clarification. Option 4 is incorrect as it does not focus on the message the client tried to convey. Read pp. 250-254 in your prescribed book for more information.

QUESTION 4

When and how should referral of clients take place within the Aids context?

- (a) Referral should be arranged in such a way that the client does not feel rejected.
- (b) In cases of psychopathology or severe depression, it may be necessary to refer the client to a clinical psychologist.
- (c) Referral should be arranged if a counsellor no longer wants to be responsible for the client.
- (d) Referral should be arranged if the client needs additional helpers (e.g. spiritual or financial).

The correct answer is:

- (1) (b) and (c)
- (2) (b) and (d)
- (3) (a) and (c)
- (4) (a), (b) and (d)

Feedback on Question 4

The correct answer is 4. The referral should be done when specialised or additional help is required (option b and d correct) and with great sensitivity to prevent feelings of rejection (option a correct). Referral should not be seen as the counsellor getting rid of the client (option c incorrect). Read p. 258 in your prescribed book for more information.

A counsellor who works at a health clinic for sex workers shows her clients unconditional positive regard when she

- (1) respects and accepts her clients as they are, irrespective of their values, work and sexual preferences.
- (2) accepts her clients' uniqueness as human beings but judges them for the work they do in order to help them to change their ways.
- (3) respects and accepts her clients as they are by putting aside her own Christian values and beliefs.
- (4) is 'there for her clients' by always taking their side and acting as their advocate.

Feedback on Question 5

The correct answer is 1. The counsellor demonstrates unconditional positive regard when she accepts the client irrespective of his/her values or behaviour. If she judges her client she does not show unconditional positive regard (option 2 incorrect). However, this does not mean that she may not have her own values (option 3 incorrect). Unconditional positive regard is about acceptance on not about side taking or acting as an advocate (option 4 incorrect). Read p. 236 in your prescribed book for more information.

QUESTION 6

One of the differences between a Western counsellor and a traditional African healer is that the traditional healer (a) _____, while the Western counsellor (b) _____.

- (1) (a) bases his help on common sense, scientific evidence and logic; (b) uses intuition and symbols in her counselling
- (2) (a) is mainly directive in his approach and gives his clients advice on what to do; (b) is non-directive and expects her clients to take responsibility for their own decisions
- (3) (a) makes his clients feel good about themselves by placing emphasis on individuality and self concept; (b) emphasises the unity between her, her parents and her community
- (4) (a) gives attention to his clients' feelings and thoughts through introspection; (b) follows a more holistic approach and emphasises the unity of the body and mind

Feedback on Question 6

The correct answer is 2. Option 1 is not correct because Western counselling is based on scientific and logical principles, while traditional African healing uses symbols and intuition. Options 3 and 4 are incorrect as Western counselling emphasises individuality and the self, and concentrates on feelings, insight and reality while traditional African healing values unity of the person and the community. Read p. 260 in your prescribed book for more information.

Maria's HIV test results turned out to be positive. She felt a sense of relief when the counsellor shared the news with her during a post-test counselling session. Which one of the following statements best explains Maria's reaction?

- (1) Maria's reaction is abnormal and she is definitely in denial and not ready to accept her HIV positive status.
- (2) Maria is displaying quite a normal reaction to her test results perhaps this puts into perspective some of the unexplained symptoms that she often gets; also, now she does not have to live with the uncertainty any longer.
- (3) Maria's reaction is very abnormal no one has ever reacted this way to an HIV positive test result.
- (4) Maria's reaction is not unusual for a person suffering from post-traumatic stress syndrome.

Feedback on Question 7

The correct answer is 2. Maria is now aware of her HIV status which could have reduced the stress associated with uncertainty. Responses to positive test results vary from person to person (options 1 and 3 incorrect) and being relieved does not portray denial of the results (option 1 incorrect). There is no indication that Maria is suffering from post-traumatic stress syndrome (PTSD) and it is too soon after the results for PTSD to develop. Neither is her reaction indicative of PTSD. Read pp.272 and 276 in your prescribed book for more information.

QUESTION 8

If a parent has to tell a child that the child is HIV positive, which of the following principles apply?

- (1) Disclosure is an ongoing process that may last for years, and the parent does not have to tell the child everything at once.
- (2) To withhold information from the child will later be experienced by the child as lying. It is therefore better to give the child all the information about the condition at once.
- (3) If a child is still very young (e.g. pre-school) and asks difficult questions, it is better to lie to the child about certain issues than to confuse the child with complex answers.
- (4) Parents experience so much fear and guilt about their child's HIV positive status, that a parent is not the ideal person to disclose the child's status to the child.

Feedback on Question 8

The correct answer is 1. Disclosure to a child is an ongoing process (and not an event) and may last for years. Therefore the parent does not have to tell the child everything at ones (option 2 incorrect). Always tell the truth to keep the child's trust and give enough information to facilitate understanding (option 3 incorrect). A parent, who is ready to do so, is the best person to tell the child about his/her infection (option 4 incorrect). Read p. 302 in your prescribed book for more information.

The symptoms of depression can be categorised as affective, physiological, cognitive and behavioural. Physiological symptoms of depression include (a)____, while behavioural symptoms of depression include (b)____.

- (1) (a) pessimistic beliefs about the future, suicidal thoughts, negative thinking and concentration problems; (b) sadness, unhappiness, worthlessness, anxiety and apathy
- (2) (a) neglect of personal appearance, crying, social withdrawal and slow or reduced speech; (b) pessimistic beliefs about the future, suicidal thoughts, negative thinking and concentration problems
- (3) (a) loss of appetite and weight, sleep disturbance, loss of libido, disrupted menstrual cycle in women and constipation; (b) neglect of personal appearance, crying, social withdrawal and slow or reduced speech
- (4) (a) sadness, unhappiness, worthlessness, anxiety and apathy; (b) pessimistic beliefs about the future, suicidal thoughts, negative thinking and concentration problems

Feedback on Question 9

The correct answer is 3. Option 1 is incorrect as it refers to cognitive and affective symptoms. Option 2 is incorrect as it refers to behavioural and cognitive symptoms. Option 4 is incorrect as it refers to affective and cognitive symptoms. Read p. 293 in your prescribed book for more information.

QUESTION 10

Which one of the following recommendations would most effectively help the bereaved person to cope with his/her loss?

- (1) Counsellors should be more direct with their bereaved clients and provide them with solutions to their problems, so that they do not get stuck in the grief process.
- (2) Clients should be encouraged to make a major-life change during the grief process, like moving to another town or changing their jobs, since this will help them to reinvest their emotional energy.
- (3) While cautioning clients against the 'rebound' effect, counsellors should encourage their clients to relocate emotionally by making new friends and even finding new partners with time.
- (4) Clients should not be encouraged to mark the anniversaries of their loved ones' deaths, because this will slow the rate at which they are successfully able to work through the mourning process.

Feedback on Question 10

The correct answer is 3. Withdrawing emotional energy and reinvesting it is an important bereavement task. Option 1 is incorrect as the counsellor should encourage the client to work out his/her own solutions to problems. Option 2 is incorrect as the client's judgement may be affected and he/she should postpone important decisions. Option 4 is incorrect as anniversaries form part of the bereavement process and both the counsellor and the client should ensure that the client has sufficient support during those times. Read p. 321-324 in your prescribed book for more information.

Juan recently found out that he is HIV positive. He also realised that he has done a lot of wrong things in his life. He promised God that he will never have sex again and go to church and charity events if God will cure him from HIV. In which of the Kübler-Ross stages of bereavement is Juan?

- (1) Denial
- (2) Bargaining and guilt
- (3) Sadness and depression
- (4) Resolution and acceptance

Feedback on Question 11

The correct answer is 2. Juan is feeling guilty about the wrong things he did and is bargaining with God. This gives Juan the sense that he is still in control of what is happening to him. Denial refers to disbelief (option 1 incorrect), sadness and depression refer to symptoms such a withdrawal, depressed mood and tearfulness (option 3 incorrect) while resolution and acceptance refer to coming to terms with loss (option 4 incorrect). Read p. 315-316 in your prescribed book for more information.

QUESTION 12

An example of a body fluid that requires universal precautions, is (a)___, while (b)___ do/does not require any special precautions.

- (1) (a) blood; (b) cerebrospinal fluid (CSF)
- (2) (a) vomit containing visible blood; (b) faeces and urine
- (3) (a) nasal secretions; (b) saliva and tears
- (4) (a) wound secretions; (b) amniotic fluid

Feedback on Question

The correct answer is 2. Blood and body fluids *requiring* universal precautions include blood, CSF, vomiting containing visible blood, wound secretions, and amniotic fluid. Body fluids *not requiring* universal precautions include faeces, urine, nasal secretions, saliva, and tears. Read p. 368 in your prescribed book for more information.

QUESTION 13

Which one of the following steps may help Andrew to manage his stress and burnout?

- (1) He should re-evaluate his belief in his own abilities, strive to achieve his performance goals even if they are unrealistically high, and he must lower his standards.
- (2) He should learn to trust and accept the knowledge he already has, rather than further pressurise himself to attend the additional refresher and training courses.
- (3) He must learn how to draw firm boundaries between himself and his clients so that he can remain unaffected should one of them die.
- (4) He should be encouraged to nurture himself as much as possible by ensuring that he gets enough exercise and rest and takes time to do things that he really enjoys.

Feedback on Question 13

The correct answer is 4. Self-care is an important part of managing stress and burnout. Option 1 is incorrect as he should think about what he can realistically expect from himself, and re-evaluate his performance goals. Option 2 is incorrect as his employer should offer refresher courses as it assists in managing stress and burnout. Option 3 is incorrect as self-care involves allowing himself to mourn the deaths of his clients. Read pp. 429-432, as well as p. 436, in your prescribed book for more information.

QUESTION 14

Dudu felt sick, and visited her local clinic. On the clinic's wall was a written notice stating that all patients coming for treatment were expected to give their consent for an HIV test. This practice is

- (1) illegal, because not all people can read.
- (2) legal, because it is the patients' responsibility to ensure that they take notice of all written notices in hospitals and clinics.
- (3) illegal, because although the hospital ensured Nomsa's informed consent through the notice, they did not ask her to sign a consent form.
- (4) legal, because the patients are formally informed about the tests by the notice.

Feedback on Question 14

The correct answer is 1. Used on its own this notice is illegal as not all people can read (options 2 and 4 incorrect). This notice cannot be regarded as an informed consent as it does not provide any more information than the hospitals expectations, and pre-test counselling should form part of the informed consent (option 3 incorrect). One can also argue that the word 'expect' could create the impression that the person does not have the right to decline. Patients should rather be encouraged to test. Read p. 442-445 in your prescribed book for more information.

QUESTION 15

According to the Sterilisation Act of 1998, a woman of (a)_____ years or older can consent to sterilisation and the husband's consent is (b)_____.

- (1) (a) 18 (b) required
- (2) (a) 18 (b) not required
- (3) (a) 21 (b) required
- (4) (a) 21 (b) not required

Feedback on Question 15

The correct answer is 2. According to sterilisation Act of 1998, a woman of 18 years or older can give consent to sterilisation. A woman under 18 years of age must have the consent of a parent or her legal guardian as this is a medical operation. The consent of the husband is not a requirement. Read p. 459 in your prescribed book for more information.

SECTION B: GUIDANCE TRACK

QUESTION 16

Young children (grades 1 to 3) have an overwhelming fear of Aids, because

- (1) they can already grasp the consequences of HIV infection and what the virus can do to their bodies.
- (2) although they can already comprehend that Aids is not a punishment for sin, they find it difficult to understand how one can prevent infection.
- (3) they have a good understanding of how sex and drug usage can cause Aids, but find it difficult to deal with it emotionally.
- (4) they see disease in rather vague, supernatural and imaginative terms due to the level of their emotional development.

Feedback on Question 16

The correct answer is 4. Children in the foundation phase do not really understand what illness is as they are unable to think operationally at this stage. Causes, symptoms and consequences of illness do not make sense to them (options 1 and 3 incorrect). Option 2 is relevant to children in the intermediate phase. Read p. 190-191 in your prescribed book for more information.

QUESTION 17

Spiritual counsellors should consider a child's development stage when talking to the child about death. For example, when a young school child's parent dies (early primary school), the counsellor should

- (1) explain to the child that it was God's will to take the parent away and that the child should accept this.
- (2) explain religion to the child in terms of abstract forms to help the child not to feel guilty about the parent's death.
- (3) explain to the child that the illness and death of the parent was not punishment for a wrongdoing.
- (4) use symbols to explain the death of the parent to the child because children of this age respond better to concrete examples.

Feedback on Question 17

The correct answer is 3. Young school-age children see illness, and therefore also death, as punishment. Therefore, the counsellor should explain to the child in concrete terms that the illness and death of the parent was not punishment for wrongdoing. Option 1 is incorrect as one should be careful to encourage acceptance without allowing for mourning. Option 2 is incorrect as it is applicable to the adolescent years. Option 4 is incorrect as their understanding of symbols is limited. Read p. 337 in your prescribed book for more information.

If you are a Christian counsellor, how would you counsel HIV positive clients from other religions, such as Muslims or Buddhists?

- (a) Stress the importance of and reverence for life.
- (b) Encourage people to partake in purification rituals, to meditate and/or restructure their lives.
- (c) Urge them to convert to Christianity or be doomed.
- (d) Explain to them that religion is not important and that they should rather concentrate on medical and psychological aspects of the disease.

The correct answer is:

- (1) (a) and (c)
- (2) (a) and (b)
- (3) (c)
- (4) (b) and (d)

Feedback on Question 18

The correct answer is 2. Religious counsellors in the Aids field must be sensitive to the fact that their clients will not necessarily all belong to the same religious framework, and the spiritual and/or religious framework of the client will direct the session. All religions should be treated with equal respect within the professional counselling environment (options a and b correct). Denying the importance of religion or trying to convert your client to Christianity may not help the client at all and you may end up never seeing your client again. Read p.331-333 in your prescribed book for more information.

QUESTION 19

A child's fundamental need for transcendence is deprived due to HIV and Aids when the child

- (1) has no understanding of its place in the larger context of spirituality or religion.
- (2) loses autonomy and control over its destiny and when he or she has no choice regarding home, family structure or marital status.
- (3) is deprived from school and when there is a loss of inquisitiveness and connection with the wider world outside of the immediate culture.
- (4) loses its family home and when there is a general decline into a state of physical poverty.

Feedback on Question 19

The correct answer is 1. Transcendence is the belief that we are part of something bigger than ourselves, and that the world is more than physical reality which links with spirituality and religion. Option 2 refers to freedom, option 3 refers to participation and understanding, and option 4 refers to subsistence. Read p. 358 in your prescribed book for more information.

The fundamental need for transcendence will be fulfilled by

- (1) allowing children to experience and express their independence and to honour the rights of children.
- (2) providing the child unconditionally with a family home, adequate nutritious food, clothing and primary health care.
- (3) adults who provide life skills, insight and guidance to build a child's knowledge of his or her family and community.
- (4) adults who inculcate in children a sense of wonder at the larger world and who encourage cultural and religious practices.

Feedback on Question 20

The correct answer is 4. Please see the previous feedback. Read p.358 in your prescribed book for more information.

SECTION C: CARE TRACK

QUESTION 16

It is very difficult to decide when to stop active treatment and to begin to prepare a patient and his or her family for dying. When does palliative care usually begin?

- (a) When medical treatment is no longer effective.
- (b) When the patient with Aids does not want to continue with treatment.
- (c) When the side-effects of treatment outweigh the benefits.
- (d) When there is no reasonable chance of improvement.

The correct answer is:

- (1) (b) and (d)
- (2) (a) and (c)
- (3) (b), (c) and (d)
- (4) (a), (b), (c) and (d)

Feedback on Question 16

The correct answer is 4. Read p. 416b in your prescribed book for more information.

QUESTION 17

Garth started to abuse alcohol and to smoke heavily when his doctor told him that he is HIV positive. Is it necessary for him to stop the habit?

- (1) Yes, it is necessary, because alcohol abuse and smoking mask the signs of opportunistic infections, and might lead to a situation where his infections are not diagnosed and treated in time.
- (2) No, it is not necessary, because he is infected anyway and to stop his habits will cause him too much stress, which is not good for his health.
- (3) Yes, it is necessary, because alcohol and cigarettes have been linked to the suppression of the immune system by lowering of the CD4+T cell count, as well as to an increase in secondary infections and illnesses such as pneumonia.
- (4) No, it is not necessary, because alcohol interacts very well with some of the medications that the doctor will prescribe for him to decrease the spread of infection in the body.

Feedback on Question 17

The correct answer is 3. The HIV positive person is encouraged to avoid drugs and alcohol abuse as well as smoking because it can suppress the immune system; lower CD 4 + T cell counts and increase secondary infections and illnesses (options 3 and 4 incorrect). Alternative 1 is not correct as these habits do not mask opportunistic infections. Read p. 388 in your prescribed book for more information.

QUESTION 18

Anne's daughter, who is three years old, has a severe chronic illness and is bedridden as a result. The health care professional who visits Anne and her daughter at home gives Anne the following advice: 'A bedridden child should be held in someone's lap as often as possible.' Do you agree with this advice?

- (1) Yes. It will help with the digestion of the child's food and it will prevent constipation.
- (2) Yes. It will improve the child's circulation and give her the love and attention she needs.
- (3) No. It will spoil her rotten and the last thing a mother needs is a spoiled, sick child.
- (4) No. To be picked up all the time by other people will result in chronic pain.

Feedback on Question 18

The correct answer is 2. One of the factors which can cause circulatory impairment is pressure on the body parts. Therefore, being held in someone's lap will increase the child's blood circulation and avoid bedsores (option 1 incorrect). Being held also provides much needed love and attention (option 3 incorrect). Bedsore and a lack of circulation may results in pain (option 4 incorrect). (Read p. 404 in your prescribed book for more information.

QUESTION 19

Some degree of mental confusion or dementia is common among people with Aids because of the effect of the HI virus on the brain. How would you care for a patient who has problems with memory loss, concentration, confusion and disorientation?

- (1) Keep the patient's room or home structured, avoid unnecessary changes, place familiar things like photographs around the patient and keep a light on at night.
- (2) Talk about the distant past, and when the patient is confused, or has the facts wrong, argue with the patient until he or she has all the facts straight.
- (3) Challenge the patient's delusions with reality because if you play along or ignore the delusions, the patient will become more confused and disorientated.
- (4) Be very patient and talk to the person as though he or she is a child that is the only way that a confused person will feel cared for.

Feedback on Question 19

The correct answer is 1. The other options will be of no benefit to the patient and may rather confuse him/her even more. It is also disrespectful. Read pp. 411-413 in your prescribed book for more information.

Diarrhoea is one of the most common problems in patients with HIV infection and Aids. The difference between acute and chronic diarrhoea is that acute diarrhoea (a) ____, while chronic diarrhoea (b) ____.

- (1) (a) is when a person has three or more loose or watery stools per day; (b) is when a person has six or more loose or watery stools per day
- (2) (a) can be treated by prescribing a proper diet and a rehydration fluid; (b) has to be treated with an appropriate antibiotic, loperamide or codeine
- (3) (a) is seldom associated with nausea and vomiting; (b) is almost always associated with nausea and vomiting
- (4) (a) lasts for less than two weeks; (b) usually lasts for more than two weeks

Feedback on Question 20

The correct answer is 4. Read p. 395 in your prescribed book for more information.

We hope that you have learned more than theory in this assignment and that you are stimulated to read more about new developments in the HIV and Aids field. Best wishes with all the work ahead, and make the best of it!

Your lecturers in HIV/Aids care and counselling.