

Basic Counseling Skills

Whether working with couples or individuals, the following skills help counselors to establish a positive environment, clarify what the client is saying, gather information, and offer support and encouragement: *(Source: Gladding 2000)*

Attending

Attending is the use of physical behaviors such as smiling, leaning forward, making eye contact, gesturing, and nodding to convey to clients that the counselor is interested in and open to them.

Open-ended and probing questions

Open-ended and probing questions invite more than one or two word responses. These can be used to gather information, increase clarity, stimulate thinking, or create discussion.

Empathizing

Empathy means placing yourself in the client's situation while remaining objective. Empathizing requires the counselor to not be judgmental and to be sensitive and understanding.

Paraphrasing

Paraphrasing means the counselor uses different words to restate in a nonjudgmental way what the client has said. This is intended to help the client to know that the counselor is aware of the client's perspective and has heard what he or she has said. Paraphrasing and restating also allows the client to correct any misunderstanding on the part of the counselor.

Reflective listening

Reflective listening involves repeating what a client has said, paraphrasing, displaying empathy, and reflecting back verbal and nonverbal feelings. For example, saying, "So you feel..." or "It sounds like you..." ensures the counselor understands what the client has said.

Essential Skills and Attributes of the Couples Counselor

Couples counseling is different from working with individuals in the approach that the counselor takes and in the techniques the counselor uses. The following are five skills or attributes that couples counselors need to keep in mind in order to work successfully with couples: *(Source: Hardy 2002)*

1. Counselor self-awareness

Counselors should be aware of their own beliefs, biases, feelings, perceptions, and reactions and how their perspectives may affect the counseling session.

The counselor who is in tune with personal attitudes, biases, and emotions has the ability to gauge his or her responses to the couple. Self-awareness also allows the counselor to provide unbiased empathy, understanding, and support to the couple. This is important, and we will be discussing the issue of self-awareness in detail.

2. Capacity to tolerate intensity

Couple relationships are dynamic and complex, and HIV-related issues may be emotionally intense. The counselor must be able to tolerate this intensity while maintaining a consistent and supportive stance with the couple. The counselor will need to facilitate conversation and encourage the couple to deal with challenging issues. The couple's confidence in the counselor's ability to manage the session enhances their ability to relate to and deal with important issues.

In both individual and couples counseling, the counselor must be able to tolerate strong emotions and feelings. However, in CHCT, the situation is more dynamic and complex because the counselor is dealing with two individuals who have a relationship with each other.

A counselor's capacity to tolerate intensity is a skill often acquired over time and with experience and maturity.

3. Ability to both validate and challenge

The counselor must have the ability to validate the couple's feelings and perceptions. At the same time, the counselor must challenge the couple to address the realities of HIV in their lives and their community. The counselor must also encourage the couple to take action to reduce the transmission of HIV.

4. Recognition that relationships are full of contradictions

The couples counselor must understand the couple's strengths and weaknesses. For example, the counselor should acknowledge the wish of the couple to preserve the relationship even while they struggle to accept the behavior changes required to protect one another. Engaging in behaviors that increase the risk of HIV transmission may be both pleasurable and painful.

5. Understanding relationships in the context of cultural values and norms

Culture, gender dynamics, religious background, and economic status shape a couple's relationships. The counselor must understand and recognize that these dynamics exist while respectfully engaging both partners in the session and valuing equality and human dignity.

Please review the briefing paper on gender issues for more information on understanding relationships in the context of cultural values and norms.

6. Understanding perceptions and concerns about the difficulties and challenges of working with CHCT

Counselors may imagine consequences for couples that are far worse than the reality of how couples handle HIV results and disclosure.

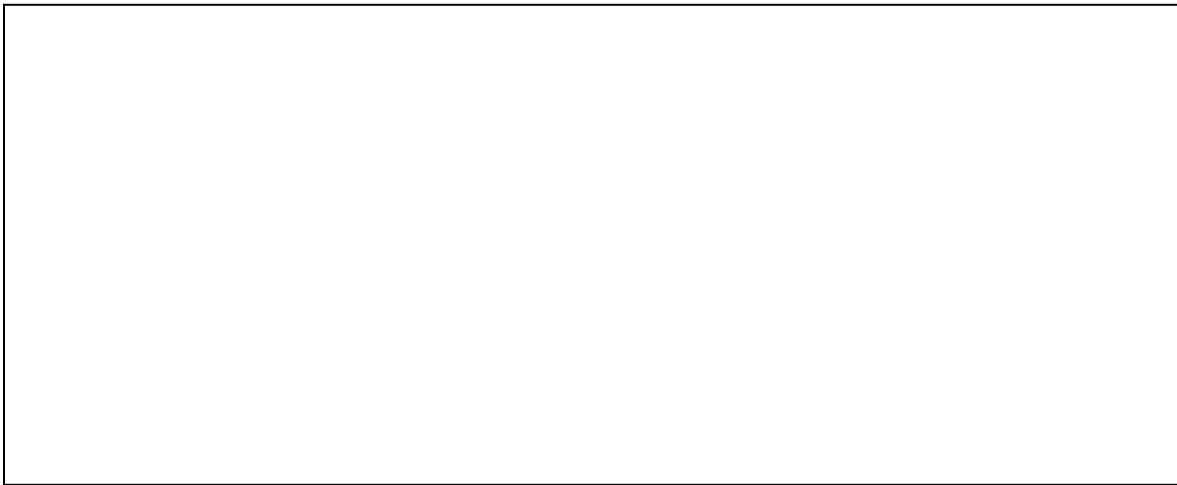
For example; research suggests:

- In general, disclosure has not been associated with the break-up of marriages. *(Sources: Maman 2003, Kamenga 1991, Nebie 2001)*
- Less than 15% of discordant couples initially experience psychological distress. *(Source: Kamenga 1991)*
- Less than 5% of stable couples separate or divorce after disclosure of an HIV positive test result. Among these couples, in most instances, follow-up counseling services can ease tension, diffuse blame, and promote reconciliation. *(Sources: Maman 2003, Kamenga 1991, Nebie 2001)*
- Less than 5% of stable couples experience violence as a result of receiving CHCT services together.

Self-Awareness Exercise

Counselor self-awareness is a general term that refers to being able to understand how personal beliefs and experiences affect how a counselor reacts and responds in a counseling session. Personal biases can influence a counselor's ability to provide high-quality services to couples. Counselors regularly need to examine their own issues and hone their counseling skills to prevent their personal biases from interfering with their counseling sessions. This understanding is crucial for providing the highest quality of services to couples.

1. What are some examples of personal issues that may influence how you interact with your clients?



2. How can you prevent these issues from negatively influencing counseling sessions?



Forming an Alliance between the Counselor and Couple

The counselor's first task is to build an alliance, or a partnership, with the couple. This alliance serves as the foundation that permits the couple to engage in the session and to be willing to discuss HIV-related issues. The first step in forming an alliance is offering a genuine attitude that conveys warmth and compassion. (Source: Keim 2002)

The acronym A.C.E. explains three important elements of an alliance.

Acknowledgment—

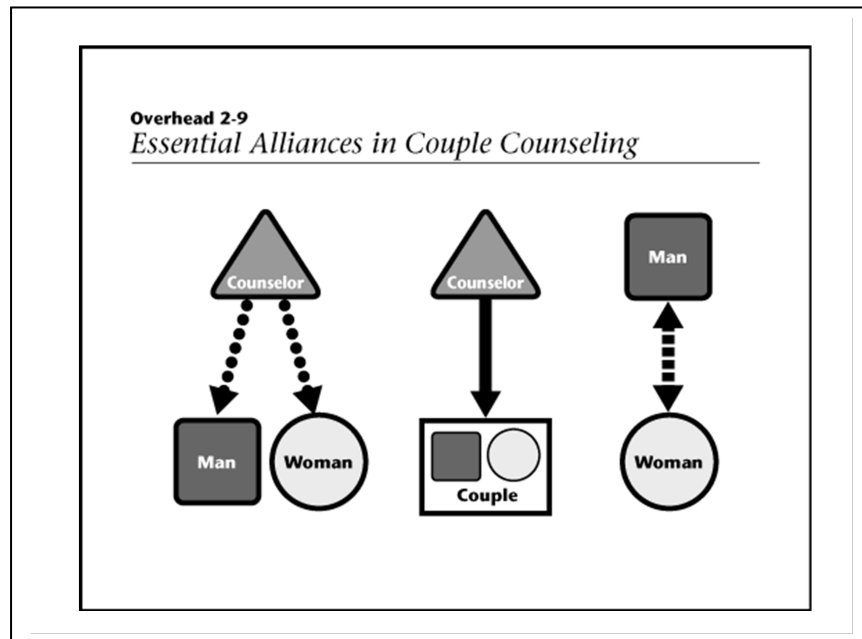
Describes the couple's awareness that the counselor acknowledges their strengths, courage, and experience.

Competence—

The couple senses that the counselor has the skills and experience to guide and support them through the CHCT process.

Empathy—

The counselor genuinely understands and appreciates the couple's experience and feelings.



There are four alliances in couples counseling:

1. and 2. Between the counselor and each of the individuals

In the first two alliances, each partner should feel acknowledged, valued, respected, engaged, and empathetically understood. The counselor should convey genuine interest and investment in each of the individuals.

3. Between counselor and couple

In the alliance between the counselor and the couple as a unit, the counselor should convey respect for the couple's relationship. The counselor should recognize the bond between the members of the couple and validate their mutual commitment. The couple should feel that the counselor values their relationship.

4. Between individuals in the couple

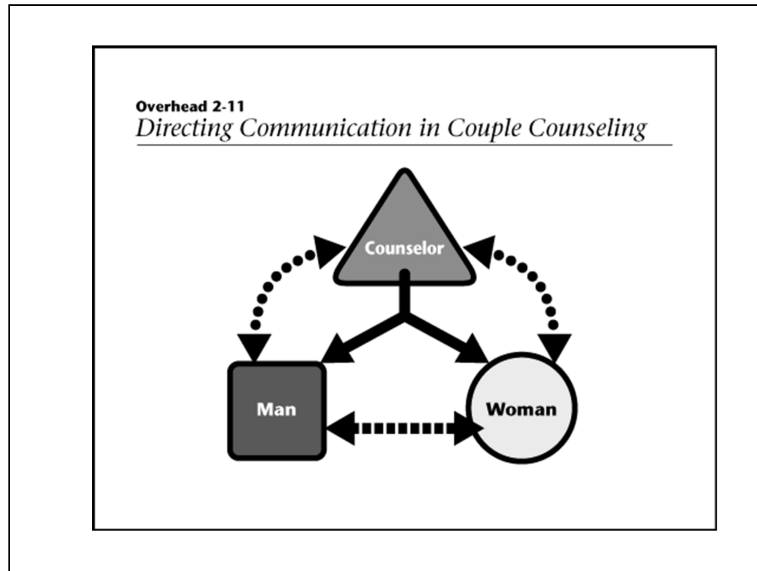
In the alliance between the couple as partners, the counselor should encourage the members of the couple to speak to and engage each other. The counselor should help the couple recognize their shared values, mutual history, and future aspirations. The counselor should acknowledge that the strength and resiliency of the couple's alliance greatly influences how they will get through challenges and build their future together.

The more the couple can be supported in addressing their issues and concerns as partners—in terms of “we” rather than as individuals—the more likely they will be able to cope with the realities of HIV in their shared life.

An important thing for counselors to remember is that forming an alliance with a couple is as much of an attitude as it is a technique.

Directing Communication in Couples Counseling

The counselor should pay a great deal of attention to the communication going on during the session. This includes communication from the counselor to the couple, from the counselor to each individual, and from each partner to the other.



Solid Arrow—between the counselor and the couple as a unit

By directing conversation to the couple, the counselor recognizes the couple as a unit. The couple has a shared history and shared dreams for the future. The counselor invites the couple to share their perspectives on issues and to think about their life together. This builds the counselor's working alliance with the couple. It emphasizes and affirms the couple relationship.

- An example of communicating with the couple as a unit is, “How did the two of you decide to come here today?”

Dashed Arrow—between the man and the woman

By directing the couple to speak to each other, the counselor facilitates conversations between the partners. The counselor encourages the couple to work as a team and to bring their expertise about their shared life and their strengths into the process. This strengthens the couple's alliance; builds communication skills; and facilitates dialogue, cooperation, and mutual decision-making.

- An example of this would be asking the question, “How do you think the two of you would want to tell your families if either or both of you were HIV-positive?”

Dotted Arrow—between the counselor and the partners as individuals

It's important for the counselor to engage in conversation with each member of the couple. This allows each person to share his or her perspective on issues. This also enhances the ability of the silent partner to listen to his or her partner. This process models respectful consideration of each individual's feelings, concerns, and issues.

- Questions that may help both partners open up during the counseling session revolve around topics that are easy to answer but are important to the relationship. *An example of this is, "Tell me about your family and how many children you have."*

Remember that communication takes place on many levels besides dialogue, including eye contact, body language, and nonverbal reinforcement. The counselor serves as a **communication role model** at all times.

Mediation Skills for Easing Tension and Diffusing Blame

Another important skill of a CHCT counselor is the ability to ease tension and diffuse blame between the couple. The following skills can help.

Normalize feelings, reactions, and experiences.

Help the couple recognize that what they are feeling is not uncommon and many others have had similar experiences.

Effectively use silence while conveying a supportive and calm demeanor.

Allow the couple a moment of silence so that they can collect their thoughts and respond or comment accordingly.

Remind the couple that many people are living with HIV infection and that one may have been infected at any time in the past.

Reinforce that the couple HIV counseling and testing session focuses on the couple's present and future. The past is the past and cannot be changed.

Focus on the couple's present and future. The past is the past and cannot be changed.

Your CHCT session is not marriage counseling. Your goal is to keep the couple from dwelling too much on the source of the infection and how it came about. Instead, you should try to focus them on their present and future together and ways to support one another and their dreams.

Avoid and deflect questions aimed at identifying the potential source of infection.

Discussing the source of the infection is neither helpful nor relevant to the couple's present situation. Again, encourage the couple to focus on their present situation and how they plan on dealing with it.

Express confidence in the couple's ability to deal with HIV-related issues constructively.

Reflect on their strengths and history together and how they have effectively addressed challenges in their shared lives.

Admire the couple’s willingness to contend with the challenges of HIV in their lives.

Make sure the couple knows that their willingness to come into counseling together and to discuss the issues will help them enormously.

Acknowledge the feelings expressed and observed. Predict that in time their intense emotions will likely change or shift.

Recognize the feelings expressed during the session. Let the couple know that the intensity of these emotions will lessen over time and they will begin to be able to adapt and cope.

Redirect and reframe questions and discussions that are blaming or potentially hostile. Identify underlying non-hostile feelings.

Fear, anxiety, and uncertainty may be expressed as anger, aggression, or hostility. Help the partners to identify their underlying emotions.

Calmly and gently name and acknowledge the behavior being observed.

Remind both members of the couple of their roles and responsibilities.
This will be discussed in Module Three.

Solution- Focused Model of Couples Counseling

This training emphasizes a *solution-focused model* of couples HIV counseling. (Source: Brown 2001)

- **Effectively delivered, brief couples interventions make a difference.**

- **Couples who volunteer for CHCT are invested in the process.**

Most couples constructively engage in the CHCT session. Generally, couples who request CHCT have identified HIV as an issue of concern and have decided to deal with it together. The couple has entrusted the counselor to skillfully guide and support them throughout the process.

- **It is the couple's present and future that is the most important.**

The CHCT process is not about blame. It is not about identifying the behavior or the individual that is the source of the infection. It is about helping the couple address the reality of HIV in their shared life. It is about the present and helping them deal with and prepare for their future.

One analogy that may help is to think about HIV as a snake in the house. It does not matter how the snake got into the house—front door, back door, basement, or roof—what matters is that the snake is in the house and needs to be dealt with. By focusing on solutions, couples HIV counseling and testing helps couples move on with their lives and make positive changes in their attitudes and behaviors.

- **It is most effective to build on strengths rather than weaknesses.**

The couple's strengths, such as their ability to adapt, their flexibility, and their resilience, are the resources that will help the couple deal effectively with HIV.

- **Focus on solutions, not problems.**

Attention and energy is best directed toward generating solutions. The couple should be helped to identify possibilities, options, and alternatives. The couple's skills, strengths, and resources are maximized when they are directed toward creating solutions together.

- **The couple understands how to use their strengths to address HIV-related issues in their relationship.**

In CHCT sessions, the counselor brings in expertise about HIV, behavior change, and counseling skills. The couple brings expertise about their relationship, their life together, and their strengths and resources. The couple uses their strengths and resources to address issues; the counselor skillfully supports them through the process.

- **The counselor validates feelings, but the focus is on positive actions.**

Attending to emotions is important, but action generates hope, optimism, and confidence. The counselor should help the couple to imagine and believe in possibilities and empower them to take action.

- **Small behavior changes lead to bigger ones.**

Life is about changes. From the moment the couple decided to receive CHCT services, they realized on some level that some form of change in their lives became inevitable. The goal of CHCT is to help the couple to build on this momentum and to initiate changes that will reduce their risk of acquiring or transmitting HIV.

References

Brown JH, Brown CH. Marital Therapy: Concepts and Skills for Effective Practice. 1st ed. Stamford, Connecticut: Thompson Learning, 2001.

Gladding ST. The Counseling Dictionary: Concise Definitions of Frequently Used Terms. Upper Saddle River, New Jersey: Merrill Prentice Hall, Inc., 2000.

Hardy KV, Laszloffy TA. Couple therapy using a multicultural perspective. In: Gurman AS, Jacobson NS, eds. Clinical Handbook of Couple Therapy, 3rd ed. New York, New York: Guilford Press, 2002.

Keim J, Lappin J. Structural-strategic marital therapy. In: Gurman AS, Jacobson NS, eds. Clinical Handbook of Couple Therapy, 3rd ed. New York, New York: Guilford Press, 2002.