PSYCHOTHERAPEUTIC CHALLENGES FOR TESTING AND COUNSELING OF PERSONS WITH HIV / AIDS TESTING AT VOLUNTARY COUNSELING CENTER DURRES

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Abstract
Design a program on maintaining low prevalence of HIV / AIDS. Identification, localization, testing guidance for the recognition of health status and reintegration with HIV, with advisory support of Psychotherapeutic Counseling reducing the risk of clinical situation of the client. Statistical confrontation versus the percentage of therapeutic consultations for a healthy, non-judgmental reintegration with equal rights. Implementation of therapeutic analysis: Cognition - emotion - behavior, the awareness to be recognized and adapted with the test result, to reduce the prevalence of HIV infection. Identify the age groups in risk, transmission routes, analytical study based on monthly annual statistics in Counseling Center, Testing and Volunteer Durres, for the years 2008 – 2015. Following consultation seeks confrontation with trauma therapy and finding the way of adaptation to the consequences through retroviral treatment - psychotherapy. HIV / AIDS continues to be identified as TABOO disease. Expansion of partnership. Statistical analysis for the identification of vulnerable group, screening intervention on the ground and demographic characteristics of endangered persons. The media contributes role on the current situation, Information, Awareness and Consciousness. The benefit of intervention measure results achieved promising.

Keywords: HIV / AIDS, Counseling Center, Durres

AIDS
AIDS is a clinical syndrome characterized by a progressive deterioration of the immune system caused by HIV virus. The virus, after having penetrated into the human body, defines a state of so-called "HIV positive". The term "Sieroposiv" usually means a person who has the blood of anti-HIV antibodies. Who is seropositiv can transmit the virus to other people. Phase status of HIV-positive it is a hidden stage and usually without symptoms that precede Fases that called (AIDS). Seropositiv can remain for some time a little too long, which can take many years. But if passed inpharmacological therapy, will finally go to the stage that is called (AIDS)¹.

How it is transmitted:
- With unprotected sexual intercourse: they are in risk ALL types of reports (oral, anal, vaginal).
- A single sexual contact can cause infection.
- By sharing needles, razors, toothbrushes or other items that may have contact with blood.
- The infected blood transfusions.
- Blood transition from mother which is infected by HIV to baby during breast milk and begotten.

How is NOT transmitted:

¹ STI~ sexually transmitted infection  
Ascd ~ development of professional capacities  
Cvct~ volunteer counseling and testing center

Mdp~ capacity development plan  
DFS- department of public health,. IPH institute of public health, MH- ministry of health
Through skin to skin contact, cuddles and kisses.
Through the bite of insects.
Through sneezing or coughing.
In toilet.
Use common culinary vessels.
Through vehicles.
Through towel.

Risk group:
- Men who have sex with men.
- People in prisons and other closed settings.
- People who inject drugs.
- Sex workers.
- Transgender people.

How to prevent:
- Always using a condom correctly during any sexual intercourse (oral, anal, vaginal).
- Avoid unprotected sex with infected persons.
- To have sexual relationships with “responsible”, low number of partners, to make the partner's knowledge of health.
- Conducting the test regularly (every 6 months) if you are having frequent and random or more people.

Services of voluntary counseling and testing:
- To give socioemotional support before / after testing for HIV.
- To help for the prevention of the spread of HIV infection.
- To help to improve the quality of life for those who are infected.
- To help in the assessment of risk for clients who are exposed or engage in risky behaviors.
- To prevent the spread of HIV infection and its transfer.

VCT Targets
Objective 1: Identification of vulnerable groups in the region of Durres.
Objective 2: Sensitization and awareness.
Objective 3: The expanding of partnerships.
Advisement testing scheme for HIV/AIDS:
The client asks/is interested in making HIV test

Counseling before testing:
- The testing process
- Possible outcomes
- The evaluation of customer risk behaviors
- The assessment of client knowledge and skills to cope (test or result)

Client decides to carry out HIV testing

NO

Customer is recommended for healthy behaviors (safe sex, no drug using, etc.)

Final result

YES

Post-test counseling

HIV – NEGATIVE
The result is given in a confidential way. Counseling on a healthy behaviors. Discussing with clients of partner notify. The recommendation to remake the test after a period of 3-6 (window period).

Emotional Support, Psychosocial Support, Medical care

HIV – POSITIVE
The result is given in a confidential way. To estimate if the client is able to afford emotionally the results. Psychological support to help the client to confront the situation. To discuss plans for the future. Discussing with client of partner notify. To refer the client (according to necessity) health social care services.

Reporting period 2008 – 2015

<table>
<thead>
<tr>
<th>Year</th>
<th>Total No.</th>
<th>No. F</th>
<th>No. M</th>
<th>Counseling</th>
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<td>2014</td>
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As is noted from the table given above and the chart shown below, the number of dominant males versus the number of women who are submitted for testing and counseling at the center. Report reflected in the graphic.

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In counseling women and men, observed that men are those who have the desire to have more information relating to this disease and what is the best way to protect yourself and how to protect when they have committed risky behavior. Ways of transmitting: 2008-2015
The most frequent way with a high differential number for the transmission of HIV / AIDS as shown in the illustration is the way Heterosexual. Which is followed in Heterosexual way which comes and it poses a higher risk, due to sexual orientation.

"Stigma, persecution and social exclusion"
This means that those infected or do not know they got the virus, or are afraid to diagnosed. In both cases this fear takes life and makes a big potential risk for infecting others. But their fear is based on the dominant mentality Albanian society, which stigmatizes those who are infected with the notorious virus as adverse in the community. "HIV/AIDS is no longer a health problem, because science has advanced too much, it managed to stop and to improve the apparent way of lives for those who are affected with antiretroviral drugs, used even in Albania. HIV/AIDS is a social problem. We have facts, when people face the abandonment, with oblivion and the family parting, or the relatives. Comes a moment that they see themselves totally abandoned"

Problems and difficulties of living with HIV/AIDS:

- Economic problems-Not only in our society, but in all countries living with HIV is not easy. One of the main problems of people living with HIV/AIDS in Albania is the economy.
- The stigmatization-In Albania is the economy. The stigmatization. It is bringing contempt, disrespect to a person, because of knowledge or suspicion that it is infected with HIV or has close personal relationship with infected or suspected of being infected by HIV.
- Discrimination - Is the act of staying away, opposition, isolation, abuse abasement, prejudice or restriction of the rights of another person for the doubt that is infected with HIV, or has an relationship close to an infected person or suspect for infected by HIV.
- The psychological aspect of people who live with HIV / AIDS in Albania – Psychological support that this contingent needs to face the shocking effect of taking a positive result for HIV testing.
- Media - there is no article in which is treated the psychological side, what is really experiencing these people when they get test results, economic and psychological aid , facing the health problems , facing the life , facing the reactions of society and difficulties to live in a normal way their life.

Conclusion
AIDS is incurable disease, but avoidable. HIV (virus)/AIDS, is transmitted through sexual intercourse, transfusion of infected blood, needles or syringes contaminated (used in most cases for injecting drugs) and from infected mother to a childbirth, during pregnancy, during childbirth or breastfeeding. Everyone, including children, are risked of becoming infected by HI /AIDS. It is needed for everyone to take information about this disease. All the persons that thinks that are infected by HIV should contact the medical staff or a center of prevention of HIV/AIDS, to take advice and to make the confidential and anonymous test. The persons who are confirmed HIV (+) or patients with AIDS should be informed as soon as possible for their status. It is good to make this consulting the same person that has made the first consult. The discussion should be done in a quiet place without the presence of others and to be confidential. Client should give time to absorb the news. Advising zero positive patients with AIDS is necessary in all phases/stages, in which the person is, who suspects that may be infected by HIV, sick from AIDS or suffering fear that the risk behavior it had, would lead him/her to HI /AIDS. Counseling after testing is a process that begins with session giving the result and can continue longer, to enable the client HIV (+) to achieve and to realize diagnose and to plan how it will live next.

The Message
The message varies depending on the method chosen IEC (TV, newspaper general public, leaflets, brochures separate groups).

What should be emphasized is:
IT SHOULD NOT BE UNDERESTIMATED THE REPETITION OF INFORMATION.
Information and prevention for all are the only weapons we possess to limit the spread of HIV
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