



**Institute of Public Health of Montenegro
United Nations Development Programme (UNDP)**

JOINT PRESS RELEASE

Well known persons in Montenegro public life promote counselling and testing on HIV

Within the Programme of Support to the Implementation of Montenegrin HIV/AIDS Strategy developed by the Montenegrin AIDS Commission and supported by the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) and the UNDP, the **Institute of Public Health of Montenegro and the UNDP Montenegro organized confidential counselling and HIV testing**, as a part of public campaign to raise awareness on personal responsibility and to motivate the local population to overcome their prejudices related to HIV testing. Thankfully HIV has not reached the critical proportions here, but it has in the wider region which have gone through similar changes in the past decade and only by changing people's behaviour can we avoid the same fate.

One of the proven ways to help people accept changes is for leaders and role models to justify this by setting the example themselves. **Through participation in this campaign six persons well-known and trusted by the Montenegrin public induced the wider public to overcome their prejudices related to HIV.**

HIV testing is obligatorily followed by voluntary counselling, with an aim to change the client's behaviour so as to maintain HIV negative status by practicing safe sex and by applying other protective measures; or, if HIV status proved to be positive, to help the HIV patient live the best life possible.

After the visit to the HIV Counselling Centre the participants in the campaign sent a public message.

H. E. Mr. Kevin Lyne, Ambassador of the Great Britain in Montenegro emphasized that everyone is responsible for their own behaviour and health. **Ms. Eleonora Albijanić, Corporate Communications Manager of Promonte Montenegro** pointed that **privacy, confidentiality and anonymity** of counselling and testing is guaranteed, and only the client personally can obtain the results. «Testing and counselling are free of charge, and neither doctor's recommendation nor any kind of documentation are needed. The result of the test can be communicated to the client only and face to face only - not by phone or via e-mail», Ms. Albijanić stated.

Darko Ivanović, Journalist and Editor at TV IN underlined that it is not possible to know whether a person is an HIV carrier based on that person's **appearance**. «The only way to establish whether someone is a HIV carrier is testing», underlined Mr. Ivanović. «According to some estimates **there is around 550 people living with HIV in Montenegro**. Eighty five percent of those people aren't aware of it», warned **Ms. Mirjana Đurović Mimi, Fashion Designer**, while **top athlete Ms. Snežana Damjanac** reminded that **nowadays people live with HIV!** «The earlier the infection determined, the sooner the effective therapy can be started, and it is free and available in Montenegro, and also the chances are increased for living a better life in the future», she said.

Garret Tankosic Kelly, UNDP Resident Representative a.i./UN Interagency Focal Point in Montenegro stated that the **HIV testing result** refers exclusively to the serostatus of a person tested and it says nothing about their partners. «As

for information received by the counsellor, they help client to get educated and to resolve their own dilemmas and wrong beliefs in relation to HIV. Also, the person counselled can help by sharing received information with the others», said Mr. Tankosić Kelly. He also emphasized: «**Testing is important. But changing behaviour is more important!**».

* * *

Whilst in the world we are witnessing the unfolding of an HIV/AIDS epidemic of large proportions, Montenegro has had 75 registered persons infected with HIV since 1989, when the first case was registered. However, according to some estimations, there are in fact cca 550 persons living with HIV. Within the Program of Support to Montenegrin HIV/AIDS Strategy Implementation our goal is to **keep the prevalence below 0.1% (1 infected person per 1000 citizens)**.

The important aim of this Programme is also to **create an atmosphere for greater support to the activities related to response to HIV/AIDS in Montenegro and to the fight against stigma and discrimination** through public campaigns and contacts with media.

Out of total number of persons living with HIV (the cause of AIDS) in the world even 80% do not know that they are carriers of the virus. Similar situation is in Montenegro, i.e. the number of those who get tested on HIV and know their serostatus is still very low. There is still no cure for HIV/AIDS or therapy that could lead to healing HIV infection, but eliminating stigma will go a long way to creating an environment in which individuals at-risk or living with HIV but do not know their status are highly motivated to get tested and know their serostatus. If they find out that they are infected with HIV, a stigma-free environment will also have fewer barriers and disincentives to accessing treatment, which will improve life outcomes and lead to reduced HIV transmission.

* * *

Voluntary and confidential HIV counselling is a confidential conversation between the client and the counsellor, which aim is to help the client to cope with stress and make personal decisions related to HIV. With prior client's assent, the process of counselling can include marital partners, sexual partners and other people important to the client. In this way a quality counselling helps to a person (client) to be **autonomous**, i.e. capable to choose, make decisions, be responsible for their behaviour, i.e. health.

The first Centre for voluntary, confidential HIV counselling and testing was opened in 2005 at the Institute of Public Health in Podgorica. In the meantime, four more counselling centres were opened, in Bar, Herceg Novi, Berane and Kotor, within the implementation of the National HIV/AIDS Strategy in cooperation with the UNDP Montenegro, and financially supported by the Global Fund to fight AIDS, Tuberculosis and Malaria (GFATM). It is planned that during 2008 more counselling centres will be opened in Bijelo Polje, Pljevlja and Nikšić. In this way a network of counselling centres will be formed in Montenegro, which will increase accessibility and improve the quality of services related to HIV at the national level, in accordance with aims defined in the National HIV Strategy.

Before opening of the counselling centers there was already a possibility of HIV testing in health centres in Montenegro, but without counseling services. Today, the aim is that every counselling centre not only reach its full capacities, but also become an integral part of each HIV testing and moreover, be recognized as one of the key strategies in prevention of HIV infection and is recommended, in adapted form, to all departments in relation to HIV or fields that are closely related to HIV (e.g. reproductive health, addiction diseases, etc.).

The main goal of the counselling is **promoting of change in behaviour and support to people living with HIV/AIDS**.

Voluntary and confidential counselling and testing on HIV (VCT) represents one of basic links in the HIV prevention services for general population, and especially for groups which behavior implies increased risk of getting HIV (groups which are usually hardly reachable). However, counselling is also recommended to those who are not clearly under risk of getting HIV, since in this way they are provided with a possibility to get acquainted with real risks, their concern becoming decreased and fears alleviated in terms of infection, all mainly caused by wrong beliefs and ignorance.

Counselling helps people to get informed about HIV: ways of transmission, how to recognize behavioural risks regarding HIV infection, how to practice safe sex, where to get tested on HIV and, depending on the results, which steps to undertake to avoid infection or unintentional infecting of others. It enables people to recognize risk and to take over

responsibility. The counselling process needs to include counselling before and after testing and continuous counselling, as long as there is a need for it. The counselling process involves the estimate of individual risk of HIV infection and discussion on change in behaviour that would lead to prevention from HIV infection. A broader approach to the confidential counselling may lead to an increased awareness and knowledge of HIV/AIDS including elimination or reduction of stigma and discrimination of persons living with HIV and those affected by HIV in some other way.

Good quality counselling on HIV is based on four basic principles:

- ✓ Voluntary approach and consent: client comes to the counselling centre voluntarily and agrees to testing in accordance with the explained procedure.
- ✓ Confidentiality: this means that the information given by the client during counselling will never be used, abused, told publicly or to any other person. The trust between the counsellor and the client increases the client's readiness to address other levels of health and social system too.
- ✓ Anonymity: means that the counselling and testing can be done without recording any information related to the client's identity. Doctor's recommendation is not needed, too.
- ✓ Counselling and testing are services free of charge.

Counsellors are persons especially trained for the work with clients. One of basic preconditions is a friendly, non-judgmental attitude towards all the clients. The rapport between the client and the counsellor is not the relation between a patient and a doctor where patients passively give themselves in to the doctors' treatment. This particular relation needs to be based on trust, and the counsellor attempts to be a careful and compassionate listener, ready to help the client to bring decisions independently and in their best interest.

The process of counselling and testing consists of three phases: **counselling before testing, testing on HIV and post-counselling.**

During counselling before testing the counsellor informs the client about:

- ✓ The ways of how counselling and testing can be done (anonymously – the client is not obliged to give any information on their identity and the entire documentation is treated under a certain numeric code known by the client and lab staff only, filing documentation under a code established in advance, or it may include all personal data)
- ✓ The reasons for testing (concerns due to risky behaviour, concerns due to exposure to infectious materials, non/realistic fear and anxiety related to infection)
- ✓ The procedure and informed consent approach
- ✓ Assessment of risk for HIV transmission

Counsellor needs to avoid mechanical conversation on HIV transmission and prevention. It is important that the client feels sufficiently comfortable while talking about very private and intimate life issues.

Elements of counselling before testing:

- ✓ Presenting themselves and introduction
- ✓ Familiarizing client with the procedure and reduction of client's concerns and anxiety
- ✓ Risk assessment
- ✓ Help to the client to understand their own risky behaviour and factors contributing to their risky behaviour
- ✓ Research of options for reduction of risk
- ✓ Preparation for testing
- ✓ Basic information on the process itself and the testing procedure

Why is the testing done? HIV test is the only way to establish if someone is a HIV carrier. The test discovers HIV antibodies. Antibodies are substances produced by the body as response to the present cause of some infection. HIV test cannot indicate if a person has AIDS, how long the infection is present in the body and for how long a person will live. Also, it cannot indicate if any of the person - virus carrier's partners is infected with HIV. This test discovers only the presence of the virus in the blood of the person tested. The first test is preliminary. If it is positive, client is informed that it is necessary to do another, confirmation test, in order to confirm the presence of the virus. The test is done with a sample of blood taken from the vein, a code is written on the test-tube and a sample sent for analyses to the virology lab at the Institute of Public Health. Test results are ready within two days up to one week (upon agreement), and only the counsellor and lab technicians who conduct the analysis know them.

Post-testing counselling is a conversation between the counsellor and the client, during which the counsellor informs the client about the test results. The counsellor should provide enough time for the conversation about test results. **If the result is negative,** the counsellor should remind the client of the «window period» and make sure that the client gets provided with the possibility to talk on how to avoid HIV infection. **If the result is positive,** the counsellor should provide the client with a place and time appropriate for accepting the result and reaction to it. It is very important to check if there is somebody that the client would like to share their result with. Then, the counsellor directs the client, who has now become a patient to an appropriate institution for further treatment and diagnostics.

All information about voluntary and confidential counselling and testing on HIV can be obtained on tel. 020 412 850 and 020 412 855, and via e-mail savjetovalisteHIV@ijz.mn.yu.