

HIV/AIDS Management and Prevention

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Day one of the ART startup training

A 22 participants with 6 member facilitator met in Hotel de Hilda, Tarkwa on the 20th day of July, 2021 to discuss and train healthcare providers on HIV/AIDs, managements and preventions. The Day started with registration of participants at 8:00 am. Later individuals said their own prayers for the start of the training. This was followed by introduction of facilitators and participants at 9:30 am.

The key objectives for the ART startup:

1. To train healthcare providers basics of HIV/AIDS.
2. To enable healthcare providers know HIV/AIDs preventive strategies.
3. To train healthcare providers counselling skills, element and technique.
4. To alleviate ignorance and bring behavior change in client
5. To train healthcare HIV/AIDS testing and management.

The first section for the day was led by Dr Aidoo, the overview of HIV/AIDs was that HIV is the virus while AIDs is the disease. The HIV/AIDs was first discovered in 1980's. Ghana however recorded it's first case in 1986. The establishment of Ghana AIDS commission was in September 2000. Some of questions asked was can one get HIV/AID through the saliva of an ineffective person. The answer was No, HIV/AIDS is transmitted through microscopic tear of the skin especially using unsterilized Shaving machine during haircut. The Window period was defined as the period between infection and the production of antibodies. It was said the virus grows rapidly at the windows period but enough to be detected on the test kits. Dr Aidoo added that surgeon should not demand laboratory result before carrying out surgical procedure but they must take the universal precaution. The four stages of HIV/AIDs

includes stage 1 (asymptomatic), stage 2 which affect dermis (herpes zoster), stage 3 which affect the Body organs (tuberculosis) and stage 4 which affect the Head (toxoplasmosis). The preventive Strategies for HIV/AIDs were similar primary, second and tertiary; abstaining from unprotected sexual intercourse. Also be faithful to an infective partner. Correct consistent use of condom with uninfected partner. Advice client not abuse drug intake such as cocaine and get screened for early detections. Education on the causes and effects and it preventions of HIV/AIDs should be done in schools, churches, radios and community announcement.

The second facilitator, DDNS Effe took participants through basic Counselling skills, element and technique. Counselling was defined as a Confidential dialogue between a person and a healthcare provider aimed at enabling the client cope with stress and make a personal decision. Qualities of a good counsellor includes being resourceful and Confidential. There are internal and external factors for example of internal factors was to respect client without prejudice. The external factors example was ensuring Privacy. A questions was asked should you reveal to client false result: she is positive and later on say She is negative. D.D.NS. Effe said No, You reveal the correct result to client in warm tone. Counselling skills includes paraphrasing and probing skills includes interjection and self disclosure. She highlighted you probe well client give an in-depth information which helps in assisted partner notification services. Questions like what do you about HIV/AIDs? could be asked. This revealed the knowledge of client on the condition.

During the afternoon Dr Aidoo took participants through the Antiretroviral therapy (A.R.T) as a third section. The goals of the A.R.T was to reduce viral load, increased CD4 count of client and for continuing usage of drugs even if symptoms disappear. The Policy

of combinations of three drugs is employed in Ghana. The reverse transcriptase that Nucleotides, then followed Nucleotides Tenofovir. The main drug of choice was Tenofovir, Lamivudine and Dolutegravir for the adult client. In Client renal issue we replaced Tenofovir with zidovir. In the first trimester of pregnancy drug used was Tenofovir, Lamivudine and Efavirenz. HIV client with TB will take 100 mg of the adult children below 30 kg can take 50 mg adult dose. The take home message was that 95% of all people living with HIV/AIDS should know their HIV status. Also 95% of all people with diagnosed HIV infection will receive sustained Antiretroviral drugs. Again 95% of all people receiving antiretroviral therapy will have viral suppression. At 1;30 pm there was break for lunch.

After lunch time, D.D.N.S Effeh took us fourth section of training. Pre test information given. It is the information given before HIV antibodies test is done. The meaning of test and result is explained for proper understanding. Client been made aware of the result been positive, negative or inconclusive. There could be a concordant (positive, positive, and negative, negative result or discordant couple meaning (positive, negative result). No result is better than bad result. Three test kit are to be used to confirm the result of HIV result in Ghana.

Post test counselling is after HIV anti test is done. Result of test is given as soon as possible and Client is congratulated for patience to wait for his or her result.

Finally there was a role play on counselling. Two participants both female gender performed between a counselee and counselor which lasted for 30minutes. The first respondent, a counselee disclosed her HIV status and received the necessary Counselling from second respondent who acted as the counselor. After the role play questions were asked and answers given. The facilitators commented on the role and certain adjustment were made to it. There was a wrap to the day work. The participants enjoyed the startup and the meeting was adjourned to the next by the recipe of the class. Sister Sheila Kangah said closing prayer [1-3].

Reportage

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