



BANGLADESH  
CAMBODIA  
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NEPAL

PAKISTAN

SRI LANKA

Viet NAM

# Focus on

## Confidential Counselling in Sexual and Reproductive Health

### A Service in its own Right

Counselling can be defined as the process of helping a client to explore the nature of a problem, so that they can determine what to do without direction from the counsellor. Confidential counselling is an essential part of sexual and reproductive health (SRH), as it is the basis for many SRH rights such as informed choice, informed consent, voluntary consent, service quality, empowerment, self determination and education.

At the ICPD in 1994 policy makers and providers agreed that simply providing contraceptives was not enough to effectively allow couples to family plan. It was in response to the ICPD "Plan of Action" that the EC/UNFPA Initiative for Reproductive Health in Asia (RHI) was created. The concept of confidential counselling is an integral part of many of the RHI projects (see boxes below).

#### Trust and Respect

■ Confidentiality means that the information gained about the client – either via a discussion or testing, is not disclosed to another party. This is essential for two reasons. Firstly, it establishes trust and respect as the basis of the relationship between client and counsellor. Secondly, it means that the client need not be concerned as to the implications resulting from others knowing certain information about them. Many areas of SRH are extremely personal and sensitive, and others knowing about these could cause embarrassment and shame to the client, and open them to ridicule, harassment, and conflict with spouses and relatives and the community. This is easy to imagine in areas such as premarital sex, abortion, HIV, etc.

In order to achieve confidentiality, non-disclosure of information must be ensured ; the place should be private, so that others cannot overhear the discussion or interrupt, and clients are not exposed, while waiting for the service. Moreover, test results and notes should be kept in a secure place, and codes can be used instead of personal details, and the counsellor must not disclose information about the clients to others.

Two clinics in Viet Nam, set up within the RHI by Marie Stopes International (MSI) Viet Nam together

with the Midwives Association of Thua Thien Hue and the Viet Nam Youth Union in Hanoi, have adopted a number of methods to ensure confidentiality. There is no signboard indicating clinical areas; after seeing the receptionist, young people are requested to go to the Mushroom or the Flower room. This helps avoiding embarrassment, when they need to go to gynaecological examinations or treatment rooms. Further, an anonymous client information system is in place to ensure the confidentiality and privacy for young people: if adolescents do not want to leave their real names, they may choose a fruit as their name instead. Additionally,

a hotline is available for counselling – although not face to face, the fact that the identity does not have to be known reassures the clients of the confidentiality of the counselling.

There are instances, where certain diseases are notifiable to the respective government. This can sometimes jeopardise the confidentiality of the client. Hence, this should be made clear to the client at the outset. In Bangladesh, for example, HIV/AIDS is a notifiable disease and information of infection must be given to the government irrespective of the client's consent. For this reason, advocacy campaigns may be necessary to make potential clients aware, that such information can be collected in a way that the individual cannot be identified.

#### Encouraging Self-determination

■ The medical counselling model, developed by Colagiuri and Craig (view references), demonstrates the role of the counsellor as a provider of information, as well as a facilitator. By asking well-directed questions, it is hoped that the client finds the solution to his/her problem, thus encouraging self-determination and empowerment of the individual, rather than allowing others to make decisions about personal affairs. However, the counsellor

need not be passive in the various solutions produced by the patient.

The counsellor must be flexible and have the confidence to move between being a “provider of information” to a “facilitator” – as each situation dictates. The actual scope of counselling relates to a large spectrum of situations, which vary with regards to time and content. Hence, confidential counselling relates equally to those situations that require only a relatively short amount of time and information about a specific method of FP, as well as to other situations, which involve dedicated counselling sessions over a long period of time.

Areas of counselling in SRH include contraceptive choice, with information on the side effects, possible complications, the advantages and disadvantages and effectiveness of different methods, as well as the correct use of the chosen method, and what to do in case of failure. Other topics addressed in SRH counselling are STD's and RTI's including HIV, pregnancy, including unwanted pregnancy, as well as sexuality and attitudinal changes. All these forms of counselling represent treatment options in their own right and constitute a goal directed process towards solving a problem.

In order to offer quality confidential counselling, the provider must possess the three following attributes: the right knowledge, the right attitude and the right skills. The provider should have accurate knowledge about the issue, and may also need specific understanding of the needs of special groups, such as adolescents, post partum women, men, sex workers, and male and female homosexuals. Awareness as to how the provider's values may influence his or her interaction with clients, as well as empathy and respect for the client, combined with a non-judgemental approach and confidentiality

are essential components of the right attitude. Finally, a counsellor requires good interpersonal communication (verbal and non-verbal) and interviewing skills, as well as an ability to listen and help the client make decisions.

Providers wishing to become an effective counsellor, can gain the necessary knowledge and skills by reading, attending workshops and discussing areas of concern with colleagues, who are skilled in counselling. It is unreasonable to assume that people have the skills to become effective counsellors without proper training. A system evaluating the competence of the counsellor, as well as refresher training should also be provided.

## Conclusion

■ Confidential counselling is an essential part of quality SRH services, and not only is it a prerequisite for many of the services within the realm of SRH, but it is a service in its own right. Carried out effectively, counselling can lead to informed choices and consent, empowerment of the clients and STD/HIV-Aids prevention, but moreover, to positive behaviour change, which will eventually result in risk reduction. This ultimately increases the satisfaction of the client, as well as the provider, and can promote the reputation of the programme as a whole. Confidential counselling is the key to making the information, supplies and equipment for family planning available to the individual, in a way that such resources can be used by people to control their own SRH.

Dr. Kate Worsley, MBBS, Marie Stopes International Australia,  
May 2001, [www.mariestopes.org.au/](http://www.mariestopes.org.au/)

References, Sources and Recommended further Reading:  
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GATHER Guide to Counselling, the John Hopkins School of Public Health,  
[www.jhuccp.org/pr/j48edsum.stm](http://www.jhuccp.org/pr/j48edsum.stm);  
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## How Confidential Counselling is addressed by two RHI Projects

### Ensuring Confidentiality in Sri Lanka

In a society, where, contrary to the reality, talking or discussing sexual matters is considered unacceptable, and pre-marital sex is a strictest taboo, providing counselling to unmarried youth on SRH within a close community, crucially requires confidentiality.

Over 200 part-time counsellors engaged under the RHI project in Sri Lanka are performing remarkably well in providing SRH counselling to youth and adolescents, and confidentiality is considered to be the key element of the success.

Confidentiality is also essential in the counselling imparted by volunteer peer educators and community based contraceptive distributors (CBDs), whose primary target is adolescents and youth. An important role they play is to identify and refer clients to counsellors, which demands a high level of confidentiality.

A.M.A. Abeysinghe

Project Title: "RH Information, Counselling and Services to Adolescents and Youth",  
Implementing Agency: Family Planning Association of Sri Lanka (FPASL),  
Executing Agency: International Planned Parenthood Federation (IPPF),  
[http://www.asia-initiative.org/projects\\_sri\\_lanka\\_1.html](http://www.asia-initiative.org/projects_sri_lanka_1.html)

### Reducing Barriers to Counselling Services in Cambodia

Counselling is an integral part of the activities carried out in the Naga Youth Center. The Center is located in a huge squatter area in Phnom Penh, where around 30,000 children and adolescents live. Street children and youth drop in for RH education, basic health care, life skill training and fun activities.

A significant part of the target group has experienced problems in or has lost contact with their families. For these children and youth the establishment of mutual trust between the counsellor and themselves is a prerequisite for seeking a counselling service. The Center provides a forum, where they can get to know the counsellors and other staff members well. They feel accepted and lose shyness. In addition, team members visit the communities on a daily basis. These established relations successfully reduce access barriers to counselling services.

Regine Seer

Project Title: "RH for Vulnerable Children and Youth", Implementing Agency: Mith Samlanh/  
Friends and Operation Enfants Battambang (OEB), Executing Agency: Pharmaciens Sans  
Frontières (PSF), [http://www.asia-initiative.org/projects\\_cambodia\\_5.html](http://www.asia-initiative.org/projects_cambodia_5.html)