

# *The Positive HIV Test Result Disclosure Session*

CA STD/HIV Prevention Training Center

## *How to use this document*

This guide provides basic steps for delivery of HIV test results to patients who test positive. The *Positive Conventional HIV Test Results Disclosure Session* is presented first, followed by a description of the *Reactive Rapid HIV Test Results Disclosure Session*. Certain common concerns are often reported by patients testing positive, including issues of emotional support, stigma, notification and protection of partners, and accurate information about HIV and its medical management. Suggested scripts are provided to facilitate learning how to conduct the session. However, each session must be individualized. Flexibility is important so that each patient's needs and concerns can be addressed.

## *Essential goals of the Positive Conventional HIV Test Disclosure Session*

- Help patient process test result in a meaningful and productive manner
- Refer the patient for medical care and other appropriate services

A patient who is able to process their results will be better able to take appropriate steps to obtain medical care and social support, and to avoid transmission of HIV to others. Patient's responses to a positive HIV test result vary greatly. It is essential NOT to assume what a patient's response to the result will be. Because each patient will have a different response and way of processing the information, you will be able to accomplish different things with different patients.

Your patient may be returning for the confirmatory result of a *reactive rapid HIV test*, or for the result of a *routine HIV test*. Following a reactive rapid test, patients have had a week or two to think about being HIV positive. They may be emotionally prepared to talk about issues such as disclosure concerns or risk reduction steps. If the test was run routinely, your patient will be hearing the news about HIV infection for the first time at this session. Exploring emotional issues, disclosure concerns or risk reduction steps may be more than he or she is able to do. Arriving at one immediate next step may be a big accomplishment.

## *Positive Conventional HIV Test Session Checklist*

1. State the result in a direct neutral tone
2. Address individual needs and concerns
  - A. Sources of emotional support
  - B. Information about HIV infection and transmission
  - C. Risk Reduction
  - D. Partner Notification
  - E. Medical Care
3. Make a short-term plan
  - A. Ask what the patient will do after leaving your office
  - B. Provide specific, appropriate, written referrals
  - C. Close the session, but not the door

## *Delivering a Positive Conventional HIV Test Result*

*Ensure a private environment to protect patient confidentiality. Be attentive, genuine and neutral.*

### *1. State the result in a direct, neutral tone.*

**For example:**

"Your HIV test result is positive."

Wait for patient's response before proceeding. You may need to wait for 15 to 30 seconds before speaking. Let the patient respond in his or her own way, and at his or her own pace.

Many patients report that once they know the test is positive, they do not remember the rest of the session. The primary goal here is to be supportive when responding, validating your patient's emotional reaction.

Address the patient's first reaction and emotional state.

**For example:**

"What's first on your mind right now?"

"I can see that this is very upsetting to you. Take your time. We have plenty of time to talk about the result."

"You seem to have been expecting this result. I'm wondering what is going on for you?"

Normalize feelings.

**For example:**

"Many people I've talked with have expressed similar feelings when they learn they have a positive result."

"You may need to take time to adjust to this. Many people say that it gets easier once they get over the initial shock. With proper medical and social support, people with HIV can expect to lead very productive lives."

For some patients, it will be appropriate to talk about the accuracy of the test.

**For example:**

"This result is extremely accurate. Both the OraQuick and the second, confirmatory test were positive."

## **2. Address Individual Needs and Concerns**

### **A. Sources of emotional support**

Help your patient think about how they will receive emotional support now that they know they have HIV.

**For example:**

"It's important to take care of yourself emotionally now. Have you thought about who you will discuss your result with?"

"What kinds of support do you currently have in your life? Can they be there for you about this?"

"Who can be supportive of you in dealing with this?"

"You may want to tell someone you trust, someone who will keep your confidence."

"How have you handled stressful situations like this in the past? How can that work for you now?"

Some patients may turn to a group they are involved with, such as a religious group or community support group. Others may want a professional counselor.

### **B. Information about HIV infection and transmission**

Ask your patient about his or her understanding of HIV and clarify misconceptions as necessary.

**For example:**

"What questions do you have about HIV infection?"

Provide basic information about disease progression and treatment. Inform patient about advances in treatments, including increased ease of use, decreased side-effects, and increased longevity. Keep descriptions brief and provide written materials for later reference by patient.

### **C. Risk Reduction**

If the patient seems ready, explore the current risks for transmission and possible risk reduction steps.

**For example:**

"Knowing that you have HIV, what are your concerns about giving HIV to someone else?"

"Is there something that you need to change or do differently now that you have HIV?"

Be prepared to give advice and material on risk reduction. Prevention of HIV transmission as well as prevention of co-infection (e.g. with Hepatitis C, syphilis, etc.) may be discussed.

#### **D. Partner notification**

Encourage the patient to think about sexual and/or needle-sharing partner(s) who should be informed. Assess the patient's personal situation and assist in determining their timing(s) of disclosure. Some patients will be concerned with disclosure issues immediately while others will not want to think about it. Explore specifics (i.e., who to tell, whether to tell, when to tell, how to tell). Discuss potential consequences of disclosures.

**For example:**

"Who do you believe may need to know about your result? Are there particular partners you are worried about?"

"Who do you feel you need to tell because they may have been exposed to HIV?"

"How might you bring up your result with your partner?"

Explore whether the patient is able to talk about the implications of their positive result with their sexual or injection-sharing partners.

**For example:**

"Have you discussed with your partner what it would mean if you were infected with HIV? How do you think they would react?"

"It's essential that you understand that your test result does not necessarily indicate what your partner's result will be. Your partner may not be infected."

#### **Screen for Domestic Violence.**

**For example:**

"What happens when you and your partner fight?"

"Have you ever been in a relationship where your partner hurt you, threatened you, forced sexual contact, or tried to control your life?"

The local health department can assist HIV-positive persons in notifying their partner(s) through Partner Counseling and Referral Services (PCRS). Reassure that this notification service is free and voluntary, is always confidential and patient names are never disclosed.

### **E. Medical care**

Explain the importance of a medical care by a knowledgeable health care provider, even for people who feel quite healthy or who feel overwhelmed by learning they have HIV.

**For example:**

"Now that you have HIV it is important that you receive regular medical follow-up."

"It's important that you discuss this test result with your doctor so that he or she can give you the best care possible."

"There are a lot of options for people living with HIV. It's important to connect with a medical provider so that he or she can see how you're doing and what the best ways are to keep you healthy."

Briefly describe standard interventions for people with HIV including: immune system monitoring; screening for TB, STDs and Hep C; preventive (prophylactic) treatments; prenatal care for pregnant women, etc.

Encourage patient's active participation in addressing health needs and concerns.

**For example:**

"Who do you plan to see for medical care? When do you expect to make your first appointment?"

### **3. Make a Short-Term Plan**

#### **A. Work with your patient to make a plan for the next few hours or days.**

**For example:**

"What will you do after you leave here? What will you do tonight? Who will you talk to about this news?"

#### **B. Ask about referrals for other services.**

**For example:**

"How interested would you be in getting a referral for services to help you live with HIV?"

Provide specific, appropriate, written referrals. These may include referrals to counseling, a case manager or other prevention staff, social services, hotlines or other services available in the county in which the patient resides. Be sure to include a medical referral if needed.

Keep the number of referrals limited--one or two is enough. Select referrals which your patient feels are conveniently located and culturally appropriate.

Call to facilitate the referral or to make the first appointment while you are with your patient. Otherwise, give a specific contact person with relevant contact information if possible.

**C. Close the session, but not the door.**

**For example:**

"We've talked about a lot. What is most important for you to deal with first?"

"It's important to take this one step at a time. I'll call you tomorrow to see how it's going."

"You may well think of other questions after you leave today. Feel free to call me, or to come back."

**Document the disclosure session in the medical record.**

Documentation should include, but not be limited to:

- 1) Results of the test,
- 2) Brief summary of the content covered in the counseling,
- 3) Assessment of patient's emotional/mental status, and
- 4) Referrals made and plans for future services.

**Finally, complete the Adult HIV/AIDS Confidential Case Report and submit to your local health jurisdiction.**

### *Delivering a Reactive Rapid HIV test result*

Delivering a reactive rapid HIV test result has some similarities to delivering positive conventional HIV test results. However, some important differences arise from the need for confirmatory HIV testing. These differences are highlighted in the steps listed below.

### *Essential goals of the Reactive Rapid HIV Test Session*

- Help the patient process test result in a meaningful and productive manner.
- Explain the need for confirmatory testing.

### *Steps of the session*

*Ensure a private environment to protect patient confidentiality. Be attentive, genuine and neutral.*

#### *1. State the result in a direct, neutral tone.*

**For example:**

"Your rapid HIV test result is reactive."

Wait for patient's response before proceeding. You may need to wait for 15 to 30 seconds before speaking.

Explain the meaning of the reactive rapid HIV test result. Discuss with the patient the likelihood of whether the rapid HIV test result means they have HIV infection. This discussion should be based on an assessment of the patient's risk behaviors.

Several phrases may be used when the risk assessment indicates the patient is truly infected.

**For example:**

"...highly likely to be infected."

"...a very good chance of being infected."

**2. Address Individual Needs and Concerns**

- A. Sources of emotional support (as above)
- B. Information about HIV infection and transmission (as above)
- C. Risk reduction (as above)

Do not initiate partner notification or provide medical referrals, but advise the patient to adopt behaviors to prevent HIV transmission until the reactive result has been confirmed.

**3. Collect a specimen for confirmatory testing**

Explain that the confirmatory result is important but cannot be done in one day.

**4. Make a short term plan**

- A. Work with your patient to make a plan for the next few hours or days (as above)
- B. Schedule a return visit for confirmatory test results.

Verify the patient's locating information so they can be contacted if they do not return for the confirmatory result.

- C. Close the session, but not the door (as above)