Job satisfaction of counsellors at integrated counselling and testing centres (ICTCs) of Delhi, India

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ABSTRACT

Background: Counselling services play a crucial role in catering clients of integrated counseling and testing centers (ICTCs). The counsellors provide information, education regarding HIV testing and treatment, guidance and support to the clients in taking informed decisions. The counsellors pose challenges due to the burden of client’s number and decreased self-satisfaction in the job. The objective was to assess the job satisfaction of counsellors providing HIV counseling services at ICTCs of Delhi.

Methods: The study was cross sectional, conducted in Integrated Counseling and Testing Centers. The study was conducted in 20 selected ICTCs of Delhi. Selection of ICTCs was on the basis of population proportion to size of clients catered. All the counsellors in the selected ICTCs were invited to take part in the study. The interview of the counsellors was completed by maximum of 3 visits. A pretested, structured questionnaire with five point likert scale for satisfaction was used. Chi square test was applied. P value of <0.05 was significant.

Results: In 20 ICTCs, a total of 32 counsellors participated in the study. Among 32 counsellors, 14 (43.8%) were males and 18 (56.2%) were females. Majority (93.7%) of counsellors said that refresher counselling training was very useful. Most of the counsellors, 22 (68.7%) suggested that strengthening the collaboration with non-government organizations would increase the number of direct walk-in clients. Majority of the counsellors, 26 (81.2%) said that they were satisfied with the job. However, 19 (59.3) counsellors said that they would change the profession if given a choice.

Conclusions: Periodical salary revisions and further career growth in counselling domain, could improve the job satisfaction and would help the counsellors retain the job. This would cut down the additional expenses of the programme for imparting induction training often-times.

Keywords: Counsellor, ICTC, Job satisfaction

INTRODUCTION

HIV counselling and testing services are key entry point in prevention of HIV infection, treatment and care of people infected with HIV. Through counselling and testing services, people can access accurate information about HIV prevention and undergo HIV test in a supportive and confidential environment.1 Counselling enables an individual to take personal decisions to undergo an HIV test or preparing clients for lifelong anti retroviral therapy (ART).2 Counsellors play an important role in providing the required information about HIV and act as bridge between clients and health care system.
Considerable emotional demands and stress has been associated with the counsellors providing the HIV/AIDS care. The stress associated with the HIV/AIDS counsellors might be due to lack of available resources, support and training and heavy client load.

Working with a stigmatized disease, frequent encounter with HIV positive clients in the job leads to stress and emotional exhaustion among counsellors and this in turn hampers the HIV/AIDS care services provided to the clients. Studying the roles of counsellor, barriers and experiences in providing HIV counselling would help in improving the quality of counselling services especially in India. The present study was an effort to assess job satisfaction as HIV counsellors and its determinants.

**METHODS**

**Study setting**

The study was a cross sectional, health facility based study.

**Study population and sampling**

The study was done among the HIV counsellors working in ICTCs of Delhi. There were both public and private ICTCs in Delhi and the present study was conducted among public ICTCs. Among the 75 public sector ICTCs at the time of study, 20 were selected on the basis of population proportion to size i.e. as per total number of clients who availed the services in previous year. There were totally 32 counselors in these 20 ICTCs and all were invited to participate in the study.

**Study duration**

The data collection was done from January-December 2012.

**Study tool**

A pretested, structured questionnaire developed after modification of tools for evaluating HIV voluntary counselling and testing published by UNAIDS was used. The study questionnaire had three sections:

- profile of the counsellors
- perception about counsellors’ training
- job satisfaction.

A five point Likert scale was used to assess the satisfaction in the job using five statements. Self-reported job satisfaction was documented.

**Data collection procedure**

The study participants were explained about the purpose of the study. After obtaining written informed consent, enrolled participants were interviewed. The interview was completed in maximum of 3 visits.

**Statistical Analysis**

Data was entered in Micro Soft Excel Spread Sheet. The study questionnaire was checked for completeness and correctness before entering into the worksheet. Data validation checks were performed at a regular interval for data entered into the worksheet of MS Excel. Data was analysed with Statistical Package for Social Sciences (SPSS IBM) version 21.0. The qualitative variables are described in the form of proportions and quantitative variables are described in the terms of mean, median, range and standard deviation. Data was checked for normality before applying appropriate tests of significance. Significance of difference in proportions (qualitative variables) was calculated using Chi square test P value of <0.05 is considered to be significant.

**Ethical consideration and confidentiality**

Prior conducting the study approval was obtained from Project Director, Delhi State AIDS Control Society (DSACS), Delhi and the ethical clearance was obtained from Institutional Ethical Committee, Safdarjung Hospital, New Delhi, India. Confidentiality of study participants was maintained in all the phases of the study.

**RESULTS**

**Profile of the counsellors**

In 20 ICTCs, there were 32 counsellors of which 14 (43.8%) were males and 18 (56.2%) were females. The minimum and maximum age of the male and female counsellors was 24, 42 years and 21, 40 years respectively. Majority, 17 (53.1%) of the counsellors belong to the age group 31 to 40 years. The working experience as a counsellor for the male counsellors varied from 1 to 11 years and for female counsellors from 1 to 7 years. The median years of experience of male and female counsellors were 3.5 and 2.5 years respectively. The appointment for all counsellors was for full time (8am to 5pm). The counsellors were providing counselling more than 5 hours per day. The working days were full days from Monday to Friday and half a day on Saturdays. The centres were not working on Sundays and Government declared holidays. Fourteen (43.7%) out of 32 counsellors said it was their self-decision to become a counsellor.

Eleven (34.3%) reported that they applied for counsellor job as they were in need of a job. Seven (21.8%) reported that they chose counsellor job as per the guidance of their friends/colleagues. All 32 (100%) counsellors had undergone induction training provided by Delhi State AIDS Control Society (DSACS). Thirty (93.7%) counsellors had undergone refresher training every year.
Among the 32 counsellors, 2 (6.3%) were fresher, had undergone only induction training. Among the 30 counsellors who underwent refresher training, 28 (93.7%) reported that the refresher training was useful.

**Table 1: Perception of counsellors regarding training and clients attending ICTC.**

| S.No. | Counsellors’ perception | N   | %    |
|-------|--------------------------|-----|------|
| 1     | About training Refresher training (n =30) |     |      |
|       | Useful                   | 28  | 93.7 |
|       | Not useful               | 2   | 6.3  |
| 2     | Usefulness of refresher training* (n= 30) |     |      |
|       | Opportunity to learn new concepts /updates | 27  | 84.3 |
|       | Recapitulate and revision relief from routine work | 16  | 50.0 |
|       | Gives motivation and support | 11  | 34.3 |
|       | About clients            | 8   | 25.0 |
| 3     | Reasons for decreased ICTC services utilization by clients* (n=32) |     |      |
|       | Worried regarding confidentiality | 20  | 62.5 |
|       | Worried regarding stigma/discrimination | 16  | 50.0 |
|       | Unaware of the test      | 10  | 31.0 |
|       | Inconvenient timings     | 2   | 6.2  |
| 4     | Strategies to increase direct walk-in clients* (n =32) |     |      |
|       | Strengthen the collaboration with NGOs | 22  | 68.7 |
|       | Increase outreach activity Increase the awareness | 20  | 62.5 |
|       | Clients to refer people suspected with high risk behaviour for HIV | 9   | 28.1 |
|       |                            | 2   | 6.2  |

*Multiple response

**Table 2: Statements for job satisfaction of counsellors providing counselling services at ICTC (n=32).**

| Statements                          | Always* | Often* | Occasionally* | Very rarely* | Never* |
|-------------------------------------|---------|--------|---------------|--------------|--------|
| My work is very stressful           | -       | 3 (9.4)| 20 (62.5)     | -            | 9 (28.01) |
| My work is rewarding                | 5 (15.6)| 18 (56.2)| 7 (22)       | 1 (3.2)     | 1 (8.5) |
| I Can help my clients               | 24 (75) | (56.2) | 3 (9.3)       | -           | 0      |
| I feel emotionally drained by work  | -       | 5 (15.6)| 11 (34.4)     | 12 (37.5)   | 5 (15.6) |
| My work environment is stressful    | 4(12.5) | 16(50) | 6 (18.8)      | 4 (12.5)    | 2 (6.3) |

*N (%)

Twenty counsellors (62.5%) reported that the reason for decreased utilization of ICTC services by clients was due to worry regarding confidentiality reasons (Table 1).

**Job Satisfaction of the counsellors**

Twenty-six (81.2%) counsellors reported that they were satisfied with their job. Nineteen (59.3) counsellors said that they would change the profession if given a choice. 62.5% reported that their work was stressful occasionally (Table 2). Statistically significant association was found between the job satisfaction and years of experience as counsellors (p=0.042). However, job satisfaction was not significantly associated with age, gender, educational background and (Table 3).

**DISCUSSION**

The present study was part of a ICTC evaluation study. 43.7% (14) counsellors preferred the job because it was their self-decision to become a counsellor. Less than half of the counsellors who self-decided to become a counsellor. The counsellors reported that counsellors quit their job because of low pay, stressful job profile and job was contractual.

Majority of (93.7%) 30 counsellors reported that refresher counselling training has been useful to them. The refresher counselling training builds the capacity of a very important human resource and fine-tune their skills to address various needs of their clients in comprehensive and sustainable manner.

In counsellors' perception, 62.5% (20) said that the reason for decreased utilization of ICTC services by the clients was due to confidentiality reasons. This is comparable to the study done by Ginwalla et al, 70% (21) counsellors suggested ensuring confidentiality would increase the utilization of counselling and testing services. In another study (Buwalda P et al) it was reported that fear of stigmatization and confidentiality posed a major problem for the clients. Confidentiality of the clients shall be assured by strict adherence to written policy for confidentiality and provision of complete privacy during counselling sessions.
Among the total 32 counsellors, 81.2% (26) counsellors said that they were satisfied with the job. Around 62.5% (20) counsellors said that their work was occasionally very stressful. This is similar to a study done by Kanshana S et al which reported that 63% of counsellors said that their work was occasionally stressful.9

75% of the counsellors reported that they could address the issues of all their clients. Few counsellors reported that there was difficulty in addressing issues as few clients feel insecure and do not engage in conversation during counselling sessions despite efforts. In a study done in South Africa by Ginwala et al in which all (100%) of counsellors said that they could help the clients.7 However in another study by Kanshana et al found that only 34% of the counsellors felt that they could help the clients in the counselling.9

In the present study, it was found that more the experience less counsellors were satisfied with the job. This could be attributed to many factors such as adding up of routine stress in addressing to client’s issues, non-permanency of job inspite of many years of experience, and lack of pay revisions and high client numbers. In a study done by Bennett L et al results were found it was reported that the older age was associated with lower levels of emotional exhaustion.10 There was no significant gender difference in job satisfaction found in present study and this finding was comparable to another study by Manhas C et al.11 The emotional strength of the counsellors has to be ensured. Necessary steps like formation of support groups and organizing interactive meetings with the counsellors could help in improving the competency of the counsellors. This would help in reducing the emotional exhaustion and stress of the counsellors due to working conditions.

CONCLUSION

Majority (93.7%) counsellors reported that the refresher counselling training was very useful for them. Eighty one percent counsellors were satisfied with the job. However, 19 (59.3) counsellors said that they would change the profession if given a choice. Better career prospects, especially further career growth in counselling domain, pay revisions, and permanency in job could help them to retain the job. This would cut down additional expenses incurred towards imparting induction training very frequently.

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