ABSTRACT
The landscape of HIV has changed from an incurable disease to be more like a chronic disease as the result of advances in medications; the lifespan of People Living with HIV (PLHIV) has also lengthened, HIV defining diseases are delayed, and many of the complications of HIV prevented with adherence to medications. The stigma and discrimination of HIV remain however. PLHIV need to cope with emotional issues of guilt, shame, and self-blame; social issues of rejection, termination of employment, fear and bad social experiences. The paradigm shift from negative regard of PLHIV to that of empathy, which is a deliberate and conscious attitude to relate to PLHIV as fellow travellers in life, to be able to feel with them rather than against them, has therapeutic effects. Empathy has its processes of active listening, responding with appropriately chosen words to describe feelings of the patients, and reflecting the desire to understand more about the patient’s emotions and social turmoil. The benefit of empathy in counseling are the ability to connect with the patient, to build trust from the patient being counseled, and a more objective perspective of being able to see the patient from his/her perspective rather than from the therapist’s perspective. More importantly empathy is a positive response to emotional and social issues experienced by the patient compared to platitudes like “You will be alright; or “don’t worry”, which negate and minimise the opportunity to have a catharsis.

Keywords:
Landscape, emotional issues, sympathy, reflection, alliance, building trust

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INTRODUCTION
There have been further advancements in HIV medicine in the last few years and this has changed the landscape of HIV. HIV is now much like diabetes, heart diseases and other chronic illnesses. The expected lifespan of those with HIV has also increased and AIDS is preventable if HIV is well-controlled with medications.

There has also been a change in the epidemiology of the illness. For the first time since the first years after HIV was discovered in Singapore, we have more homosexuals and bisexuals who are tested positive as compared to heterosexuals. People Living with HIV (PLHIV) now tend to be in the younger age group.

However, one thing which has not changed is the lifetime of stigma and discrimination which a person with HIV has to cope. They face a multitude of emotions through the different phases of their illness. As healthcare professionals, attending to PLHIV with empathy helps to mitigate the impact of the illness.

ISSUES WHICH PEOPLE LIVING WITH HIV (PLHIV) FACE

Emotional issues
PLHIV face a complex amalgam of emotions especially when they are initially diagnosed. Many of them also feel the guilt and shame of getting infected as they blame themselves. It is not uncommon for someone to contemplate suicide when they are first diagnosed. However, most do subsequently adjust to their illness and they tend to cope better when there is support.

Social Issues
Some of our patients who revealed their diagnosis to families and friends have faced rejection and judgement. Some have lost their jobs when their employers came to know that they have HIV. Most choose not to disclose their diagnosis, even to healthcare workers due to fear and bad experiences.

DEFINITION OF EMPATHY

“You never really understand a person until you consider things from his point of view . . . until you climb into his skin and walk around in it.” - Harper Lee (1960)

According to Carl Rogers, a psychologist and the founder of the humanistic or client-centred approach to psychotherapy, empathy “is an accurate, empathic understanding of the client’s world as seen from the inside. To sense the client’s private world as if it were your own, but without losing the “as if” quality.”

Sympathy vs Empathy
Sympathy is where one “feels-for” someone, empathy is “feeling-with” someone. It is the “process of accurately understanding the emotional perspective of another person and the communication of this understanding” (Shebib, 1997:177). In some ways, it is where the heart meets the mind.

THE POSTURE OF EMPATHY

“Instead I prefer to think of my patients and myself as fellow travellers, a term that abolishes distinctions between ‘them’ (the afflicted) and ‘us’ (the healers) . . . We are all in this together and there is no therapist and no person immune to the inherent tragedies of existence.” - Irvin Yalom (2002)
Being empathic takes deliberate and conscious effort. It is an attitude and a belief which will affect the way we act. In empathy, we put aside our personal views and values so that we can enter objectively into another person’s world without prejudice. Empathy is basic yet so fundamental and central in a helping relationship and we are all in this business of helping.

HOW DO WE EMPATHISE?
Empathy, at the most basic level, is a reflection of what your patient has said.
• Listen for feelings and/or observe non-verbal communication of feelings
• Identify feeling and its intensity
• Choose an appropriate word to describe the feeling
  Think about the many words you know that express emotions. As the person is speaking, think about what emotion they are expressing. Your goal is to accept the person totally, not to judge them, but to try your best to understand them.
  E.g.: I don’t know what is happening - You seem to feel confused.
  I’m so tired of trying - You sound discouraged.
  Why can’t he change? - You sound frustrated.
• Formulate an empathic response
  “Would you (or could you) tell me a little more about that?”
  “What has this been like for you?”
  “Let me see if I have this right.”
  “I want to make sure I really understand what you’re telling me.
   I am hearing that . . .”
  “I want to make sure I really understand what you’re telling me.
   I am hearing that . . .”
• Identify feeling and its intensity
• Choose an appropriate word to describe the feeling

THE BENEFITS OF EMPATHY
“...deep understanding is, I believe, the most precious gift one can give to another.” - Carl Rogers (1975)

Connecting with your patients
People often want to be heard and understood. If you are able to empathise accurately with your patient by attending to their feelings, you will have a better chance of getting them to collaborate with you in the treatment process. An effective alliance with your patient is created through understanding, acceptance and respect.

Building trust
Attending to your patients’ feelings shows them that you care. A product of this is that your patients feel that they can trust you.

Helping the helper to be more objective
In the course of our work, we do see “difficult” or “resistant” patients. We also have our personal values which, at times, may subconsciously be communicated to the patients through judgemental words. By entering into their world, we learn to see things from their perspective and understand where they are coming from instead of seeing them as resistant.

Providing an alternative response to platitudes
Sometimes, we may respond with platitudes – “you will be alright”, “don’t worry”, “don’t think so much” - when we do not know how to attend to patients’ feelings. Platitudes negate and minimise our patients’ emotional experiences and do not allow them to express themselves. Empathy helps us to formulate a different response.

REFERENCES

LEARNING POINTS
• The landscape of HIV has changed to be more like a chronic disease but the stigma and discrimination of HIV remain.
• PLHIV need to cope with emotional issues of guilt, shame, and self-blame; social issues of rejection, termination of employment, fear and bad social experiences.
• Empathy is a deliberate and conscious attitude to relate, to be able to feel with the sufferer, and has therapeutic effects.
• Empathy has its processes of active listening, responding with appropriately chosen words to describe feelings of the patients, and reflecting the desire to understand more about the patient’s emotions and social turmoil.
• The benefit of empathy in counseling are the ability to connect with the patient, to build trust from the patient being counseled, and a more objective perspective of being able to see the patient from his/her perspective rather than from the therapist’s perspective.
• More importantly empathy is a positive response to emotional and social issues experienced by the patient compared to platitudes which negate and minimise the opportunity to have a catharsis.