Rapid Test Counseling Protocol	
Protocol Component: Initial Session	Time-Minutes
Introductions and Orientation to the Session	2-4
Enhancement of Client's Perception of Risk	2-3
Explore the Specifics of Most Recent Risk Incident	2-3
Review Risk Behavior and Risk-Reduction Experiences	2-4
Synthesis of Risk Incident and Risk Pattern	2-4
Total Time	10-18
Protocol Component: Follow-up Session	Time-Minutes
Protocol Component: Follow-up Session Provide Rapid Test Results – Negative	Time-Minutes 1-2
Provide Rapid Test Results – Negative	1-2
Provide Rapid Test Results – Negative Provide Rapid Test Initial Result – Positive	1-2 5-10
Provide Rapid Test Results – Negative Provide Rapid Test Initial Result – Positive Negotiate Risk-Reduction Plan	1-2 5-10 4-5
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# Introductions and Orientation to the Session 2-4 minutes Introduce yourself to client Hello, my name is . I'll be talking with you today about what brought you to the clinic and your STD/HIV concerns. Explain role of counselor My role as your counselor is to work with you to identify your STD and HIV risks and to explore issues related to those risks. Review the rapid-test process Today you'll be receiving a test that may be new to you; it's called a rapid or same-day test. You will receive your results today. Indicate the duration of the session (15-20 minutes before the exam/10-20 minutes after the exam for results and follow-up) We'll talk together twice. First—now—we'll talk for 15 to 20 minutes. Then, after you see the clinician, we'll talk for another 10 to 20 minutes. During the second session, you'll receive your results. Prepare the client for feeling of distraction during counseling while awaiting same-day HIV test results Information will clarify meaning of results It may be distracting to know that your HIV test result will be provided to you in about 30 minutes, but the information we cover, as well as the exam and the clinician's assessment, will help you understand the meaning of the results. Importance of client's focus during counseling sessions It's important that you stay focused during this session. **Outline content of session Exploration of STD and HIV risks** As I indicated, we'll address your risk for STDs and HIV. Identification of challenges to risk reduction We'll talk about how you have tried to reduce risk. Discuss strategies to reduce risk We'll talk about changes you could make to reduce your risk and develop a plan for doing this. Provide referrals If we identify issues we cannot address here, I may make referrals to other services for help—especially with reducing your risks for STDs and HIV.

# Introductions and Orientation to the Session

(continued)

# Review "map" of client stops and activities during this clinic visit

You'll get your blood drawn, talk with me for about 15 minutes, and then you will go either to the waiting room or directly to the clinician for your exam. After the exam, you'll come back here to see me and get your HIV test results. Is that clear?

# Address immediate questions and concerns

Before we go any further, do you have any concerns or questions you need to talk about right now?

# Enhancement of Client's Perception of Risk

2-3 minutes

#### Discuss reason for STD visit

What have you done that may have put you at risk for an STD or HIV?

Tell me why you feel you may be at risk for an STD or HIV.

#### Listen for and identify behaviors that are putting the client at risk for HIV

What have you done that may have put you at risk for STDs or HIV? Have you ever come to the clinic before because you believed you had an STD? Do you practice safer sex?

[If yes] Tell me what safer sex means to you.

# Assess client's level of concern about having or acquiring HIV

When you've had unprotected sex, have you thought you may be exposing yourself to HIV?

Which behaviors and which partners concern you most?

# Discuss client's HIV test history and behavioral changes in response to results

Have you been tested for HIV before?

[If yes] What was that experience like for you?

Did the counseling or test results affect how you feel about HIV?

What did you and your counselor agree was placing you at risk for HIV?

# Assess whether client is engaging in risky behavior because of previous HIV-negative test results

When you were tested before, how did getting the negative result influence your behavior? What have you done since the test to stay negative?

#### Direct client's attention toward risk behavior

From what you have said about your behavior, you have some real risk of acquiring HIV.

It sounds like you have some STD and HIV concerns that we should talk about today.

#### Identify and discuss examples of conflicts between client's beliefs and behaviors or examples of mixed feelings about risk reduction

There are better treatments now for HIV, but there is no cure for it. Once people have it, they have it for the rest of their lives.

How would having HIV change your life?

## Explore the Specifics of Most Recent Risk Incident

2-3 minutes

#### Explore the who, what, where, when, how of most recent risk exposure

Tell me about the exposure that brought you to the clinic today. Tell me about the last time you put yourself at risk [sex or needle sharing].

Was this exposure with someone you knew? Tell me a little about your partner. How did you meet this person?

Where did you go to have sex? Was this an unusual situation, or has this happened before?

#### Assess level of risk acceptable to the client

Did you have any concerns about having sex with this person? Could this person have had an STD or HIV?

How comfortable are you with this behavior?

#### Assess communication about STDs and HIV with partners

How did you decide to have sex?

Did you talk about STD and HIV risk or whether either of you had been tested?

Would you have engaged in the same behavior had you known this person had HIV?

What did you and your partner talk about in terms of STD or HIV risk, or about being safe?

#### Identify circumstances that contribute(d) to risk behavior

What do you think kept you from protecting yourself at that time?

When was the last time, before this situation, that you had a risky exposure? Was there anything similar about that situation?

What was it about where you were or who you were with that allowed you to take this risk?

#### Identify vulnerabilities and triggers to the risks behavior incident or pattern

Was there or is there anything going on in your life that could be increasing your risk behavior?

How does drinking alcohol influence your decision to have sex, unsafe sex?

#### Identify and discuss examples of conflicts between client's beliefs and behaviors or examples of mixed feelings about risk reduction

Would you have engaged in the same behavior had you known this person had HIV? Would knowing have made a difference?

## Review Risk Behavior and Risk-Reduction Experiences

2-4 minutes

Assess client's patterns of risk behavior (e.g., happening regularly, occasionally, due to an unusual incident), establish number of partners, number of new or different partners

How often do you have a new partner? How many different sex partners have you had in the last [3, 6, 9, or 12] months?

How often did you practice safer sex?

Where do you meet partners? How well do you know your partners before you have sex? Have you ever had a steady partner?

#### Identify successful attempts at practicing safer sex

Do you remember a specific time when you practiced safer sex? Can you tell me about that time? How was it? What made it work for you?

## Identify obstacles to risk reduction

What gets in the way of your protecting yourself?

What has been the most difficult part of reducing your HIV risk?

With which partners do you find it most difficult to use a condom?

## Explore triggers and situations that increase the likelihood of high-risk behavior

Are there times or situations when you are more likely to take risks (not use a condom)?

[If yes] What is the difference between times you are safe and the times you are unsafe?

Do drugs and alcohol affect your having high-risk sex? [If yes] Tell me about that.

Are there particular people you find it difficult to negotiate with and to ask for safer sex?

With which partners do you find it most difficult to use a condom?

Are there times in your life [when you've felt depressed/been unemployed/recently broken up with someone] when you feel it has been more difficult to practice safer sex, to protect yourself?

Tell me what may be going on in your life that could be increasing your risk behavior.

# Explore client's communication with friends/partners about risk

When STD or HIV risk reduction has come up with a sex partner, how did the discussion go? Who brought it up? How did you feel about it?

What do you and your friends talk about concerning STD and HIV risks?

Continued →

# Review Risk Behavior and Risk-Reduction Experiences

(continued)

# Discuss client's level of acceptable risk

Are you comfortable with the risks you've taken?

[If no] What would you be comfortable with? [If yes] This involves the risk of getting HIV, and you say you feel comfortable with that? What behaviors would you draw the line at? What do you consider too risky?

# Identify and discuss examples of conflicts between client's beliefs and behaviors or examples of mixed feelings about risk reduction

The activities you say you feel comfortable with involve some risk of becoming infected with HIV, but you've said that you're concerned about HIV. We need to understand this.

Synthesis of Risk Incident and Risk Pattern 2-4 minutes
Provide feedback about client's risk for STDs and HIV
From what you've told me, there have been [quite a few/some/a couple of] risk situations that may have exposed you to an STD and/or HIV. It's really important that we work together to address this. You have taken the first step today to protect yourself, talking about and trying to figure out your risk situation.
Summarize the information the client has provided
Here's how I understand your risks for STDs and HIV
[Retell the client's story as clearly as possible, making connections between issues and situations and summarizing the key issues identified by the client].
Note pattern of risk behavior
Let's look at how often these risk situations happen. First, you've been able to protect yourself when [list circumstances that help the client reduce risk]. However, when you [describe situation] you lapse and find yourself engaging in risky behaviors. It is important to understand this.
Identify triggers and vulnerabilities
There seem to have been several things going on in your life lately that affect your risk: [list].
In terms of relationships, there seem to be a few important issues: [list]. In the future, you would like your relationships/life to be [describe].
There are several issues that affect your risk behavior: [list specific behavioral/communication/substance-use issues].
You seem particularly vulnerable to engaging in risky behavior when you [drink/go to bars/travel/fall in love/meet someone new].
Is this how you see your risk behavior? Are there other issues that we need to talk about? Does this make sense to you?
Discuss examples of conflicts between client's beliefs and behaviors or of mixed feelings about changing behavior
You really want to; however, you can't imagine how to change your current situation. How can you work through this?
It seems there's a level of risk you're comfortable with. At the same time, you say you're concerned about STDs and HIV. Help me understand this?
Convey concern and urgency about client's risks (as appropriate)
It seems that unless these issues are addressed, you'll continue to engage in high-risk behavior and may become infected with HIV.
Your STD and HIV risk concerns me.
Continued –

# Synthesis of Risk Incident and Risk Pattern

(continued)

Encourage and support the client in addressing risk issues

Coming to the STD clinic, getting an HIV test and participating in this project are the first steps in addressing your risky behavior.

Tell the client that he or she will next see the clinician or laboratory technician. Prepare the client to return to the counselor for test results and the development of the risk-reduction plan.

Now you will go see the [clinician, lab tech] to have an [exam, test]. When you are finished, you'll return, and we'll talk about your HIV result and develop a plan.

# The counselor should:

- Indicate to the client that this concludes the initial counseling session and ask the client to consider the issues you discussed while he or she is with the clinician.
- Reiterate that when the client returns, he or she will receive the HIV test result and then, with the counselor, develop a risk-reduction plan.
- Give the client clear directions to the clinician or laboratory or to the waiting area.
- Tell the client where to wait if the test result or the counselor is not available immediately after the STD clinical evaluation.

# Provide Rapid Test Results-Negative

1-2 minutes

#### Welcome client back

Welcome back. Come on in and have a seat.

#### State results clearly and simply

Now, let's look at your test result, and then we'll talk about how best to understand it.

The test result is negative, which means you have not been infected with HIV.

#### Review meaning of the results

This means that as of less than 3 months ago, which would be before [month], you were not infected with HIV.

However, this result does not tell us about the exposure that gave you the STD you were treated for today.

#### Assess client's reaction to results

How does it feel to hear that it's very likely that you are not infected with HIV?

What does this result mean to you?

#### Note the need to consider the test result in terms of the most recent risk exposure

Given that you've had an exposure last week that resulted in an STD diagnosis, you may want to consider taking another HIV test on [specify date].

Given your most recent risk, do you feel you need to get tested again? Where would you go for this?

# Refer to client's clinical exam experience and diagnosis in context of HIV risk assessment and test result

How was it for you seeing the STD nurse, being examined for an STD and waiting for these results?

Does getting an STD affect your feelings about HIV or your feelings about your risk of getting HIV?

**Note:** Be aware that upon returning from the clinician, the client may be very anxious to receive the test results. Greet the client warmly and then proceed with the session. Assess the client's experience of and reactions to the clinical exam or diagnosis and, as appropriate, incorporate this information into the counseling session.

# Provide Rapid Test Initial Result-Positive 5-10 minutes Welcome client back Welcome back. Come on in and have a seat. Provide preliminary results clearly and simply The initial test result is positive, indicating that [you are probably infected/you are highly likely to be infected]. Review the meaning of preliminary result Remember that when the initial result is positive, the specimen must be retested before we can know whether or not you have HIV infection. Incorporate the client's risk assessment into the understanding of the initial result Given what we've discussed about your potential exposures to HIV, this result may or may not accurately reflect whether you are infected with HIV. Allow the client time to absorb the meaning of the result Take your time. We have plenty of time to talk about the results. Explore client's understanding of the preliminary result How do you understand this result? What does this result mean to you? Assess how client is coping with the preliminary result How are you feeling about this initial result? Acknowledge the challenges of dealing with an initial positive result and provide appropriate support It can be difficult dealing with the possibility that you're infected with HIV. How are you doing? Who can be supportive of you in dealing with this? Emphasize the importance of supplemental (additional) testing It's important, regardless of your previous risk exposures, to come back for the supplemental test result. Contract with the client to return for additional test results Can you commit to returning on [date] for the result? If you have any trouble returning, will you call me? Let me make sure that I know how to reach you so we can be sure you receive the supplemental test result [review address/phone number].

## Negotiate Risk-Reduction Plan

4-5 minutes

#### **Prioritize Risk-Reduction Behavior**

Now let's talk about how you plan to stay HIV negative.

It is important that we prioritize. What are the most important issues and circumstances we need to address to reduce your risk?

Given what we've talked about, what do you think makes it most likely that you'll put yourself at risk for an STD or HIV?

#### Explore behavior(s) that the client will be most motivated about or capable of changing

How would you most like to reduce your risk for STDs and HIV? How can you remain uninfected?

What do you believe you could reasonably do to reduce your risk?

[If the client selects an "always" or "never" behavior change]

It's great that you really want to eliminate your risk. We know that change usually occurs in small steps. What would be the first step in reaching this goal? This is challenging. Take it on in small steps—small change is the beginning of larger change.

[If a client is at a loss about how to reduce risk]

You have some options for reducing your risk [list a broad menu of choices].

#### Identify a reasonable, yet challenging, step toward changing the identified behavior

Can you think of some small step you could complete in the next week that would move you closer to reducing your STD and HIV risk?

#### Break down the risk-reduction action into specific, concrete steps

Now that you've identified something you would like to do, tell me how you feel you could go about making this happen?

What do you need to do first, second, third? When do you think you could do this?

#### Problem-solve issues concerning the plan

What would make it more difficult for you to complete this step?

How will you handle it if something [specify] gets in the way of trying your plan? What would be a good backup plan?

#### Role-play the plan

Let's practice how you'll handle this.

Imagine that I am your partner. What would you say? Let's switch roles.

Continued →

# Negotiate Risk-Reduction Plan Identify supports for the risk-reduction step What could help make this easier for you? Who would be supportive of you in trying this? If you're able to complete this step, how do you think it would make you feel? Confirm with the client that the plan is reasonable and acceptable How comfortable are you with this plan? Does it seem realistic to you? If we need to, we can rework the plan. You will really have done something good for yourself by trying out this plan. How committed are you to trying the plan? Ask the client to try to be aware of strengths and weaknesses in the plan while trying it out Try to notice what works and what doesn't work for you about the plan. Document the risk-reduction plan, keeping a copy for yourself Let's write down your plan on this appointment card so you will have a copy of the specific details.

# Identify Sources of Support for Risk-Reduction Plan

1-2 minutes

# Emphasize the importance of the client's discussing with a trusted friend or relative the intention and content of the plan

It's important to share your behavior-change plan with someone. Who could you trust to tell about your STD visit and talk with about this plan?

### Identify a person to whom the client could comfortably disclose the plan

Does anyone know you're at the clinic today? Could you talk with him or her about the plan?

Who in your life is supportive of you?

Who do you usually talk with about challenges you're facing?

Do you and your friends ever talk about STDs or concerns about HIV?

# Establish a concrete, specific approach for the client to use in sharing the plan with a friend or relative

So, you believe you could tell [name] about this plan.

It's important to tell [name] about your intentions concerning the plan and then to report on how it went. When and how will you tell [name]?

# Ask the client to be aware of strengths and weaknesses in the plan while trying it out

When you try this plan, think about what feels good and works for you and which parts are hard or uncomfortable. Try to think about how to improve or modify the plan so it works better for you.

# Convey confidence in the client's ability to complete the plan

Remember that doing something differently is sometimes awkward, but it gets easier with practice.

Changing behavior takes time and practice, Be patient with yourself.

This is a plan you've come up with. It's a good plan, and I believe it's something you can do. Revise the plan if you need to in order to succeed. You've really challenged yourself.

Identify Sources of Support and Provide Additional Referrals 1-2 minutes
Assess client's support system
Who in your life do you feel is supportive of you?
Is there someone that you feel you can talk with about your feelings and concerns?
Do you have people you spend time with? Are these people you feel close to?
Address the longstanding or tough-to-manage issues that contribute to risk
Your plan seems really good. But there are some important issues that contribute to your risk and may best be addressed with professional help or assistance.
Since we've talked about how [drug use/alcohol] affects your risk, have you considered getting help in dealing with this?
Assess the client's willingness to seek professional help or use a referral
Have you ever sought counseling or gone to a support group?
How interested would you be in getting a referral for services to deal with this issue?
What would be the hardest thing about seeking support for [name the issue]?
Evaluate the types of referral the client would be most receptive to
Would you be more comfortable talking to an individual counselor or going to a support group?
Is there a particular type of support or service you would be willing to consider using?
Provide appropriate referrals
Here is the name and phone number of the service you should call to get assistance with the issue we discussed. When do you think you could call or go there?

# Provide Appointment Card and Reminder for Follow-up (HIV Negative Client)

1-2 minutes

# Review the follow-up schedule with client

There are [number] more appointments needed for you to complete this study. What would help you to remember to keep these appointments?

# Identify ways for the client to remember follow-up events

Do you keep a datebook or calendar?

Your next appointment is [date].

# Review contact information for client and counselor

Let me make sure that you know how to contact me should you need to change your appointment.

Let me be sure I know how to reach you [review phone number/address] so we can be sure you receive the supplemental test results and/or get the follow-up reminders.

Is this a good way to contact you?