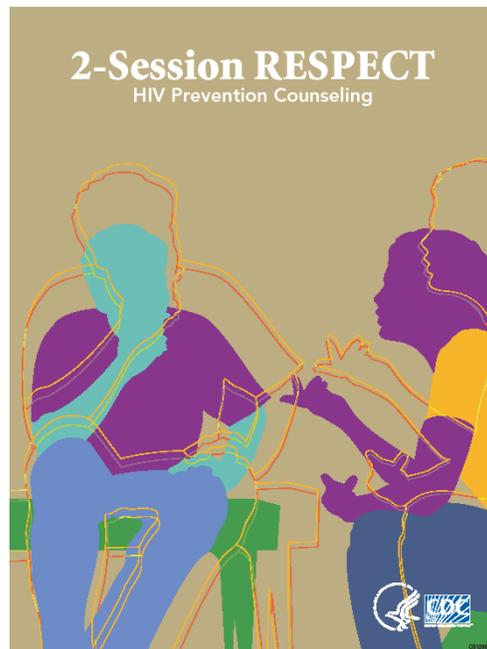


2-Session

RESPECT

HIV Prevention Counseling
Counseling Protocol



**Provider
Cards**

SESSION 1

Protocol Stages	Page	Time (in minutes)
1. Introduce and Orient Client to the Session	2	1–2
2. Enhance the Client’s Sense of Self-Risk	3	2–3
3. Explore the Specifics of the Most Recent Risk Incident	6	2–3
4. Review Previous Risk-Reduction Experiences	8	2–4
5. Summarize the Risk Incident and Risk Patterns	12	3–4
6. Negotiate a Risk-Reduction Step	15	4–5
7. Identify Sources of Support and Provide Referrals	18	1–2
8. Close the Session	20	3–5
Total Time		18–28

Stage 1. Introduce and Orient Client to the Session

1–2 mins.

Protocol Steps

Example Dialogue

<p>1. Introduce yourself and explain your role as a counselor</p>	<ul style="list-style-type: none">• Hello, my name is [name]. I'm going to be talking with you about your risk for [acquiring/transmitting] HIV or contracting an STD and some of the concerns that you might have about that.• My role as a counselor is to help you explore those risks and look at ways that you might be able to do things differently to protect yourself and others.
<p>2. Describe the session</p> <p>a. Indicate duration of the session</p> <p>b. Explore HIV (and STD) risks</p> <p>c. Identify challenges to risk reduction</p> <p>d. Discuss strategies to reduce risk</p>	<ul style="list-style-type: none">• As I said, we'll be talking about your risks and concerns.• We'll have about ___ minutes to talk together. Everything we say here will be completely confidential.• Let me tell you what we'll be talking about.• We'll talk about your risk(s) for [acquiring/transmitting] HIV (and/or contracting STDs).<ul style="list-style-type: none">○ We'll look at how you have tried to reduce your risk in the past.○ We'll talk about changes you could make to further reduce your risk and develop a plan for doing this.• I also wanted to let you know that I'll be using these cards (Provider Cards) to help me remember to address all the important issues.
<p>3. Address immediate questions</p>	<ul style="list-style-type: none">• Before we go any further, what concerns or questions do you have?• If we identify issues we can't address today, I'll make referrals that might help you.

Stage 2: Enhance the Client's Sense of Self-Risk

2–3 mins.

Protocol Steps

Example Dialogue

1. Assess client's presenting issues

- What brought you in today (for your test)?
- We have not talked about your risk for **[acquiring/transmitting]** HIV or STDs before. How do you feel about your level of risk?
- What concerns do you have about your recent risk?
- We've been working together for awhile. We've never talked specifically about risk-related behaviors and I wanted to do that today. How would that be for you?

2. Listen for and identify behaviors that put client at risk

- What do you think may have put you at risk for **[acquiring/transmitting]** HIV or an STD?
 - What do you do to reduce risk when you have sex? Tell me what safer sex means to you.
 - How do you define being careful? Safe?
- If client reports injection drug use, you may ask:**
- Do you inject safely?
 - What does injecting safely mean to you?
 - Can you tell me step-by-step what you do?
 - **[If necessary, ask the following:]**
 - Do you share needles, syringes, cookers or spoons, cottons, and water for rinsing?
 - Do you reuse a needle or syringe after someone else has used it?
 - Do you ever add water or divide drugs with someone else's used syringe?

(continued)

Stage 2: Enhance the Client's Sense of Self-Risk**2–3 mins.**

Protocol Steps	Example Dialogue
3. Assess the client's level of concern about having or acquiring HIV (or STDs)	<ul style="list-style-type: none">• So, do you know that the same things that put you at risk for [HIV/STD] can also put [you/others] at risk for HIV?• When you've had unprotected sex (or shared needles or other equipment), have you thought you might be putting [yourself/others] at risk for HIV or STDs?• Which behaviors concern you the most?
4. Discuss the client's HIV/STD test history and behavior changes in response to results	<ul style="list-style-type: none">• Have you been tested for [HIV/STD] before? [if yes] What was that experience like for you?• How did the counseling or test results affect how you feel about the possibility of [acquiring/transmitting] HIV or an STD?• What did you and your counselor agree was placing you at risk for either of those?
5. Assess whether the client is engaging in risk behavior because of previous results	<ul style="list-style-type: none">• When you were tested for _____, how did the counseling change your behavior?• What have you done to keep from [acquiring/transmitting] an [HIV/STD] since the test?
6. Direct the client's attention toward risk behavior	<ul style="list-style-type: none">• From what you've said about your behavior, you could be at some real risk for [acquiring/transmitting] HIV [if appropriate].• It sounds like you have some concerns that we should talk about today.

(continued)

Stage 2: Enhance the Client's Sense of Self-Risk

2–3 mins.

Protocol Steps

Example Dialogue

7. Discuss examples of conflicts between the client's beliefs and behavior or examples of mixed feelings about risk reduction

- We know that there is no cure for HIV so far and people respond differently to HIV treatment. I am wondering how **[would/has]** having HIV **[change/changed]** your life?
- You said earlier that you are concerned about **[acquiring/transmitting]** HIV yet you had sex and didn't use condoms **[shared needles or injecting equipment]**. Can you help me understand that?
- You said you know your partner is **[negative/positive]** yet you use condoms (clean needles) only some of the time. What makes you decide to not use them? (said in a non judgmental manner)
- You have said how bad **[acquiring/transmitting]** HIV would be, yet you continue to put yourself at risk with people whose status you don't know. Can you help me understand that?

Stage 3. Explore the Specifics of the Most Recent Risk Incident

2–3 mins.

Protocol Steps

Example Dialogue

1. Identify context that contributed to the incident

a. Who, what, where, when, and how

b. Vulnerabilities and triggers

- You said earlier that you came in for testing because you thought you had [specify STD]. Tell me a little bit about the last time you put yourself at risk for [acquiring/transmitting] HIV or getting STDs.
 - Was that with someone you knew well?
- Where did you go to have sex (or inject)?
- Was that something that happened before or was it out of the ordinary?
- Is there a partner(s) that concerns you particularly?
- Tell me a little about your partner (or the person you shared needles with). How did you meet this person?
- What kept you from protecting yourself and your partner?
- When was the last time, before this situation, that you had a risky incident?
- Was anything similar about that situation?
- What was it about where you were or who you were with that allowed you to take this risk?
- How does drinking alcohol or using other drugs influence your decision to have sex or to have sex without a condom (or share needles)?
- What do you think is the relationship between partying and having sex?
- What else is going on in your life that might be leading you to take risks?
- When you think of all the times you had unprotected sex (shared needles) recently, what do the times have in common? What was going on that was the same in all those times?

(continued)

Stage 3. Explore the Specifics of the Most Recent Risk Incident

2–3 mins.

Protocol Steps

Example Dialogue

2. Assess the level of risk acceptable to the client

- How comfortable were you with what happened?
- Did you have any concerns about having sex (or sharing needles) with this person?

3. Assess communication about HIV with partner(s)

- Can you tell me what led up to having sex (or shooting drugs)?
- How did you decide to have sex (or shoot drugs)?
- Did you or your partner talk about using condoms (or new or clean needles or equipment or not sharing needles and equipment)?
- What did you and your partner talk about in terms of HIV risk or about being safe?
- How do you deal with **[your/their]** HIV status with partners?

4. Be aware of contra-dictions that can be addressed to create dissonance

- If you knew beforehand that your partner **[did/did not]** have an STD or HIV, would you have had sex (shared needles) with him or her?
- Would you have engaged in the same behavior had you known this person had an STD? Was HIV **[positive/negative]**? Tell me more.
- Would knowing have made a difference?
- It sounds like not **[getting/giving]** HIV is really important to you and something you have a lot of concern about, and yet you are putting yourself in situations where you are at risk of doing that. Can you help me understand that a little more?
- It sounds like it's really important to you to take care of yourself and yet you don't feel very good about what you are doing to protect yourself. Can you help me understand that?

Stage 4. Review Previous Risk-Reduction Experiences

2–4 mins.

Protocol Steps

Example Dialogue

1. Assess the patterns of risk behavior (e.g., happening regularly, occasionally, due to an unusual incident)

- How often do you have sex (share needles) with a new partner?
- Do you have sex (or share needles) more than once with any of those partners, like with a boyfriend or regular partner?
- How many different sex partners have you had in the past 3 months? How about the past 6 months?
- How many different people have you shared needles or equipment with in the past 3 months? How about the past 6 months?
- How often did you practice safer sex (or inject safely)?
- Where do you meet partners?
- How well do you know your partners before you have sex (or inject drugs)?

2. Identify successful attempts at safer sex

- About how often do you use condoms (or clean needles)?
- What have you done to reduce your risk in the past?
- How was **[risk-reduction activity]** for you?
- Do you remember a time when you chose to protect yourself and your partner by asking someone to use a condom or else not have sex (clean or not share needles)? Can you tell me about it?
- What made it work for you?
- It is great to hear you say that you have... **[describe risk-reduction effort]**.
- That reduces your chance of getting an STD or **[acquiring/transmitting]** HIV.

(continued)

Stage 4. Review Previous Risk-Reduction Experiences

2–4 mins.

Protocol Steps

Example Dialogue

3. Identify obstacles to risk reduction

- What do you think is the hardest thing about asking someone to use a condom (use a clean needle)?
- What is the difference between the times you have used condoms (clean needle) and the times you have not used condoms (clean needle)?
- What gets in the way of protecting yourself and your partner?
- What has been the most difficult part of reducing your risk?
- With which type of partners do you find it most difficult to negotiate alternatives to sex or use of a condom (or using clean works or not sharing anything)?

4. Explore triggers and situations that increase the likelihood of high-risk behavior (if appropriate)

- Are there times or situations when you are more likely to take risks, e.g., not use a condom (or share needles and other equipment)? **[If yes]** What is the difference between the times you are safe and the times you are unsafe?
- How do alcohol and other drugs affect your decision to have high-risk sex?
- Are there particular people you find it difficult to negotiate with, to ask for safer sex (or to not share needles or other equipment)? Tell me about that. What about them makes it more difficult?
- Are there times in your life (e.g., when you've felt depressed, been unemployed, or recently broken up with someone) when you felt it was more difficult to practice safer sex (or inject safely) to protect yourself?
- Tell me about what may be going on in your life that could be increasing your risk behavior.

(continued)

Stage 4. Review Previous Risk-Reduction Experiences

2–4 mins.

Protocol Steps

Example Dialogue

5. Explore the client's communication about risk with friends and partners

- What do you and your friends talk about concerning **[HIV/STD]** risks?
- When you talked about HIV risk reduction with a sex partner (or someone you inject with), how did the discussion go?
- Who brought up the topic?
- How did you feel about it?
- What happened? What was the outcome?

6. Discuss the 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/STD]** or giving someone HIV, and you say you feel comfortable with that? Can you help me understand that?
- What do you consider too risky?

(continued)

Stage 4. Review Previous Risk-Reduction Experiences

2–4 mins.

Protocol Steps

Example Dialogue

7. Be aware of contradictions that can be addressed to create dissonance

- The activities you say you feel comfortable with put you at some risk of **[acquiring/transmitting]** HIV, yet you've said that you're concerned about that happening. How do you explain this?
- You said you are always safe, yet you have had two STDs in the past six months. How did you get them?
- You said getting HIV would be the worst thing that could happen to you, and yet you are not always protecting yourself. How would it change your life if you did get HIV?
- You told me infecting someone would be unbearable yet you haven't always been taking action to avoid it. How would you feel if you found you had infected one of your partners?
- Picking other people with HIV for partners is a good way to avoid infecting someone. You said you only do that and also said you "just know" when some is positive. How can you be certain when you don't ask them about their status?
- You say you assume someone is also **[positive/negative]** if they don't ask to use a **[condom/clean needle]**. I hear clients say they would assume the opposite. How does that feel to hear?

Stage 5. Summarize the Risk Incident and Risk Patterns

3–4 mins.

Protocol Steps

Example Dialogue

1. Provide feedback about the client's risk for [acquiring/transmitting] HIV

- It's great that you are thinking about what is risky and what is not risky, and are taking some steps toward reducing your risk.
- From what you have told me, there have been **[quite a few, some, a couple of]** risk situations that may have exposed **[you/others]** to HIV. It's really important that we work together to address this.

2. Summarize the information

- Here's how I understand your risks for **[acquiring/transmitting]** HIV and getting STDs. First of all, you came in because **[name reason for coming in. Retell the client's story as clearly as possible, making connections between issues and situations, and summarizing the key issues identified by the client]**.
- Does that sound right?

3. Note the pattern of risk behavior

- Let's talk about how often these risks happen. First, you've been able to protect yourself when **[list circumstances that help the client reduce risk]**. Is that right?
- However, when you **[describe circumstance]**, you find yourself engaging in risky behaviors. It is important that we understand this.

(continued)

Stage 5. Summarize the Risk Incident and Risk Patterns

3–4 mins.

Protocol Steps

Example Dialogue

4. Identify triggers

- Several things seem to have been going on in your life lately that affect your risk: **[list issues you have learned from the client]**.
- In terms of relationships, there seem to be a few important issues: **[list issues you have learned from the client]**. In the future, you would like your relationships or life to be **[describe]**.
- Several issues affect your risk behavior: **[list specific behavior, communication, or substance-use issues]**.
- You seem more likely to engage in risky behavior when you **[drink, go to bars, travel, fall in love, meet someone new, lack needles, suffer withdrawal, other]**.
- Is this how you see your risk behavior?
- Does this make sense to you?
- Are there other issues we need to talk about?

5. Be aware of contradictions

- You said that you would be less worried today if you had used condoms (or clean needles) more often in the past. How do you think you can work through that?
- How do you think you could make it happen?

6. Convey concern and urgency about the client's risks (as appropriate)

- You don't want to **[give/get]** HIV, and if you don't make some changes, you could be putting **[yourself/others]** at risk continually, and that really concerns me.

(continued)

Stage 5. Summarize the Risk Incident and Risk Patterns

3–4 mins.

Protocol Steps

Example Dialogue

7. Encourage and support the client in addressing risk issues

- Getting an **[HIV/STD]** test and talking with me is a really great place to start because it shows you are taking care of yourself and doing something positive.
- Being willing to talk about this shows you care about yourself and others.

Stage 6. Negotiate a Risk-Reduction Step

4–5 mins.

Protocol Steps

Example Dialogue

1. Prioritize risk-reduction behavior	<ul style="list-style-type: none">• What do you think are the most important things to look at, the most important circumstances 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 or others at risk?
2. Explore behavior(s) that the client will be most motivated to change	<ul style="list-style-type: none">• Realistically, what could you do to reduce your risk?• How would you most like to reduce your risk for [acquiring/transmitting] HIV? Getting an STD?• What do you believe you could reasonably do to reduce your risk?• [If the client selects a radical "always" or "never" approach] 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?• [If the client is at a loss regarding how to reduce risk] You have some options for reducing your risk: [suggest some options].
3. Identify a reasonable step toward changing the identified behavior	<ul style="list-style-type: none">• What small step could you complete in the next week that would move you closer to reducing your risk?
4. Divide the step into specific actions	<ul style="list-style-type: none">• You've identified something that you feel you can do. How are you going to make this happen?• What do you need to do first, second, third?• When do you think you could do this?

(continued)

Stage 6. Negotiate a Risk-Reduction Step

4–5 mins.

Protocol Steps

Example Dialogue

5. Ask the client to be aware of strengths and challenges in implementing the step

- What might make this step more difficult?
- What would help make it easier for you?
- How will you handle it if something [specify] gets in the way of your trying this step?
- What would be a good back-up step?
- Let's practice how you'll handle this. Imagine that I am your partner. What would you say?
- How did that feel to say? How do you think your partners would respond?
- What would help make this step easier for you?
- Who would be supportive of you trying this?
- How would you feel if you could complete this step?
- How realistic does this sound?
- How comfortable are you with this step?
- How does it feel? If we need to, we can rework the step.
- You will really have done something good for yourself by trying out this step. How committed are you to trying this?
- It seems like you are committed to doing this. You really want to protect yourself and others and this is a great way.
- Changing behavior takes time and practice. This is challenging—take it in small steps. A small change is the beginning of a larger one.
- We'll review this step when you come back for your next visit. You might encounter some problems, or something might come up that you didn't anticipate. Just pay attention to those things.
- Try to notice what works and what doesn't work for you. Think about what might work for you more easily, and we will review it next time.

(continued)

Stage 6. Negotiate a Risk-Reduction Step

4–5 mins.

Protocol Steps

Example Dialogue

6. Document the risk-reduction step

- Let's write it down on this piece of paper so you will have a reference for the coming week. Just a quick review, what is your step?

Stage 7. Identify Sources of Support and Provide Referrals

1–2 mins.

Protocol Steps

Example Dialogue

<p>1. Assess the client's support system</p>	<ul style="list-style-type: none">• Is there anybody in your life that you talk about these things with or get support from?<ul style="list-style-type: none">◦ Is he or she a good person to talk to?• Is there someone who 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?• Who knows about your HIV status already? How could they support you?
<p>2. Address the long-standing issues that contribute to risk</p>	<ul style="list-style-type: none">• Your step sounds really good. We've identified some important bigger issues that lead to your taking risks, specifically [name issue].• Have you considered getting professional help with this to help reduce your HIV risk?
<p>3. Assess the client's willingness to access referrals</p>	<ul style="list-style-type: none">• Have you ever sought assistance for [name issue], such as counseling, a support group, or substance abuse treatment?• How interested would you be in getting a referral for professional help to deal with this issue?• What would be hardest about seeking support for [name of issue]?
<p>4. Evaluate the types of referral the client would accept</p>	<ul style="list-style-type: none">• Would you be more comfortable in one-on-one counseling or in a support group?• Is there a particular type of support or service you would consider using?

(continued)

Stage 7. Identify Sources of Support and Provide Referrals

1–2 mins.

Protocol Steps

Example Dialogue

5. Provide appropriate referrals

- Here is the name and phone number of the service you could call to get assistance.
- When do you think you could call or go there?
- You can ask for _____ and tell him or her that I suggested you see _____.

Stage 8. Close the Session

3–5 mins.

Protocol Steps

Example Dialogue

1. Review the follow-up schedule

- It's important that you come back for your follow-up appointment.

2. Help client to remember follow-up appointment

- What would help you remember to keep this appointment?
- Do you keep a date book or calendar you can write the appointment in?

3. Write down appointment

- Is **[day, date, time]** okay?
- I am going to write your appointment down on the back of the piece of paper you wrote your step on so you will have it for easy reference.
- Let me make sure that you know how to contact me should you need to change the appointment.
- **[If you track clients and the [HIV/STD] testing is confidential]** Let me be sure I know how to reach you **[review phone number, address]**
- **[For anonymous testing]** Remember, since there is no way we can contact you or know which result is yours, it is very important for you to come in for your next appointment for your test result. Also, please bring your ID number for the test result.
- Before we end this session, I need to take a moment to fill out a form and, if necessary, ask you a few additional questions. **[Quickly fill out state-specific surveillance forms silently and ask any questions you don't have answers for.]**
- Thank you for coming in to talk with me today. You have done a lot of hard work. And I think you have made a step that will really work for you. At our next meeting, I will give you your **[HIV/STD]** test result, and we will go over how your risk-reduction behavior change went. It will take about 20 minutes.

SESSION 2: Common Stages

Protocol Stages	Page	Time (in minutes)
1. Frame the Session and Orient the Client 1a. Deliver Test Result [if testing setting]	22	2–10
2. Review the Risk-Reduction Step	23	4–5
3. Revise the Risk-Reduction Step	24	4–5
4. Identify Sources of Support for Risk-Reduction Step	25	1–2
5. Provide Referral	26	1–2
6. Close the Session	28	1–2
Total Time		13-26

Stage 1. Frame the Session and Orient the Client

2–10 mins.

Protocol Steps

Example Dialogue

1. Welcome the client back

- Welcome back. It’s great to see you. How was your week?

a. Follow clinic protocols for giving test result

- (If in a CTR, or STD screening setting)

2. Explain what to expect in the session

- Today I’d like to spend some time talking about how it’s been going for you since we met the last time. I also wanted to specifically check in about how it went for you with your risk-reduction step.

3. Check in about feelings

- How does that sound to you?
- How has it been going since we last met?
- How does it feel to be back here today?
- (If you are ready, I will give you your result now.)

[Follow clinic protocols for giving results]

Stage 2. Review the Risk-Reduction Step

4–5 mins.

Protocol Steps

Example Dialogue

1. Assess the client's efforts to try out the risk-reduction step

- In the last session, we discussed some of your risks for **[HIV/STD]** **[list risks]**.
- We came up with a risk-reduction step for you to try before today's visit. How did that go for you?
- Were you comfortable with how it went?

2. Provide encouragement and support for client's risk-reduction efforts (as appropriate)

- Sounds like you did a great job.
- It's great you were able to do that.
- I'm impressed with how you handled that.
- You've really accomplished something for yourself.
- **[If not completed]** Sounds like you had a hard time with it. I am glad that you came back today so we can talk about it and hopefully find some ways for you to achieve your step in the future.

3. Identify strengths and barriers to the risk-reduction step

- How did you feel when you took the step to reduce your risk?
- What parts of the step worked best?
- Which parts of the step were challenging?
- What stopped you? What made it difficult?
- What were you feeling or thinking?
- What would make it easier for you?

4. Problem-solve issues concerning the step (if relevant)

- How can we address the problems you had with reducing your risk? What would help you get this done?

Stage 3. Revise the Risk-Reduction Step

4–5 mins.

Protocol Steps

Example Dialogue

1. Develop a new or more challenging step with the client

- **[If step was completed]** You did an excellent job with the first risk-reduction step. What else could you try to further reduce your risk of **[acquiring/transmitting]** HIV? What more do you think you could do? How do you feel about trying your step again?
- **[If step was not completed]** What else could you try that will reduce your risk of **[acquiring/transmitting]** HIV?
- Remember that risk reduction and behavior change are best done in small, achievable steps. What do you need to do next to reduce your risk?

2. Identify actions to achieve the step

- Let's look at the issues that need to be addressed to reduce your risk and complete your new plan. **[List issues]**
- What do you need to do first, second, third?
- Try to think about how to improve or modify the step so it works better for you.

3 Identify strengths and barriers

- What do you think will allow you to make this step work for you?
- What might make it hard to do this step?
- When you try this step, think about what feels good and works for you, and which parts are hard or uncomfortable.

4. Document the revised risk-reduction step

- Just as before, we'll write your step on this card, and we'll include all the actions needed to complete it. **[Write out actions.]**
- Sometimes just looking at the card can help you remember the step and help you see yourself completing the step.

Stage 4. Identify Sources of Support

4–5 mins.

Protocol Steps

Example Dialogue

1. Does the client have a support system?

- As we discussed last time, it may be useful to share your step with someone who can support you in your efforts to reduce your risk. Who could you trust to tell about your visit here and talk with about this step?

2. *[If client didn't talk to the trusted friend] Problem-solve*

- How did it go talking to **[name]**?
- What do you think was the main reason you weren't able to talk to this person?
- What could you do next time to make sure you have a chance to talk to him or her about it?
- How do you feel about talking to **[name]** about your plan now?
- What will you say to **[name]**?

3. *[If client didn't identify someone last time] Identify a person to whom the client could comfortably disclose the step*

- Who in your life is supportive of you?
- Could you talk with him or her about the step?
- Who do you usually talk with about challenges you're facing?
- Do you and your friends ever talk about concerns about HIV? Could you talk with any of them about this step?

4. Establish a concrete, specific approach for the client to use in sharing the step with a friend or relative

- So, you believe you could tell **[name]** about this step?
- It's important to tell **[name]** about your intentions concerning the step and then to report on how it went.
- When and how will you tell **[name]**?
- What will you say? Would you like to practice?

Stage 5 Provide Referral**1–2 mins.****Protocol Steps****Example Dialogue****1. If a referral was provided in the previous session, follow up on the client's completion of the referral**

- **[If a referral was provided in the previous session]** When we talked last week, I gave you a referral to **[name]**. Were you able to call and make an appointment?
- How did it go?
- **[If client did not complete the referral]** What made it difficult to follow through?
- What got in the way?
- What can we do that will help you get the assistance you need?

2. Address the long-standing or hard-to-manage issues that contribute to risk (optional)

- Your step seems really good, yet some important issues contribute to your risk that may best be handled with the help or assistance of professionals.
- Since we've talked about how **[drug use and/or alcohol]** affects your risk, since last time, have you considered getting help in dealing with this?

3. Assess the client's willingness to seek professional help and use a referral (optional; repeat from Session 1)

- What about seeking assistance (e.g., counseling or a support group, methadone treatment, Narcotics Anonymous)? Have you (re)considered this?
- How interested would you be in getting a referral for services to deal with the issue?
- What would be the hardest thing about seeking support for **[name the issue]**?

(continued)

Stage 5 Provide Referral

1–2 mins.

Protocol Steps

Example Dialogue

4. Evaluate the types of referral the client would be most receptive to (optional)

- Would you be more comfortable talking to an individual provider or going to a support group?
- Is there a particular type of support or service you would be willing to consider using?

5. Provide appropriate referral (optional)

- Here is the name and phone number of the agency you should call to get assistance with the issue we discussed.
 - Do you feel comfortable doing this?
 - Do you have any questions?

Stage 6 Close the Session

1–2 mins.

Protocol Steps

Example Dialogue

1. Provide closure

- Thank you for coming in for **[this/these]** session/s. If you have any concerns in the future, please don't hesitate to come by or call.
- You've done a great job. Keep up the good work and let me know if I can be of any future help.