

OUTCOME AND SKILLS

Outcome: Client will decrease personal risky sexual and/or drug use behaviors

Skill 1: Client will identify at least one trigger that may lead him/her to engage in risky behaviors

Skill 2: Client will develop a plan to reduce risk for one identified personal behavior

AGENDA / TIMELINE	MATERIALS / ACTIVITY
<p>Module 2, Session 1.....90 minutes</p> <ul style="list-style-type: none"> • Check-In/Life Context20 minutes <ul style="list-style-type: none"> • Review last three months life events • Discuss progress of goals and Life Project • Preview Module 2 and Session 1 content • Discuss session content as it relates to the Client's life context • Skills-Building.....20 minutes <ul style="list-style-type: none"> • Discuss Client's personal risky behavior • Do Continuum of Risk activity • Problem-Solving.....35 minutes <ul style="list-style-type: none"> • Client identifies and problem-solves trigger(s) related to personal risky behavior • Wrap-Up15 minutes <ul style="list-style-type: none"> • Client sets goal related to personal risky behavior • Review Client's Life Project 	<ul style="list-style-type: none"> • Client File <ul style="list-style-type: none"> • Continuum of Risk • Goal Card • Goal Recording Sheet • Quality Assurance Check Sheet/Notes • Session Notes • Pens, pencils

check-in/life context **20 MINUTES**

- Review significant events in Client's life over the past three months, including the Life Project
- Discuss goal set at last session including successes, accomplishments, and challenges
- Preview Module 2 and Session 1 content
- Identify how sexual risk behavior influences the Client's sexual life. Suggested topic areas for discussion:
 - Relationship(s)
 - Role of sexual activity, or lack of sexual activity, in his or her life
 - Sexual risk taking
 - Cultural influences on sexual activity
 - Gender expectations for sexual activity
- Identify how drug-related risk behavior influences the Client's life
 - Drug sharing networks (environment, social)
 - Drug of choice (injecting/non-injecting, heroin/cocaine) and decisions for choice
 - Drug sharing relationships (cultural and/or gender issues)
 - Physical (being "sick") and/or emotional impact of drug use
 - Influence on risk-taking decisions (treatment issues, structural issues [i.e., societal norms, imprisonment, dope-dating])

Skill s-Building

20 MINUTES

- Discuss Client's attitudes and beliefs regarding transmission routes and risky behaviors

- **Activity: Continuum of Risk**

- Engage Client in identifying personal risky behaviors. This discussion may include:

- General risk behavior list (see activity instructions)
- Issues identified through life context conversation
- Personal sexual/drug activities (may include fantasies)
- Impact of drug use/networks on sexual behavior

- **Instructions**

1. **Assist Client to complete the Continuum of Risk arrow (page 42 of this session).** The facilitator may start by asking the Client to identify where on the arrow he/she might rate the generic examples listed below.
 - Anal sex without a condom (even with withdrawal)
 - Vaginal sex without a condom
 - Oral sex, stopping before ejaculation (cum or pre-cum)
 - Mutual masturbation ("outercourse")
2. After the facilitator has an idea of the Client's knowledge level, ask if he/she can think of other activities to place on the risk scale. (An alternative would be to ask the Client to describe sexual or drug use fantasies and rate the components of the fantasy on the continuum.) After all ideas are generated, discuss how activities rated as riskier could be made less risky and rate the adjusted activities as well. When the Risk Continuum has been completed, the facilitator asks the Client to draw a vertical line indicating his/her personal risk limit goal.
 - One of the more risky personal activities can be used for the Trigger Identification process.

ACTIVITY: "CONTINUUM OF RISK"

**LITTLE
OR NO RISK**

**SLIGHTLY
RISKY**

**SOMEWHAT
RISKY**

RISKY

**VERY
RISKY**

**LITTLE
OR NO RISK**

**SLIGHTLY
RISKY**

**SOMEWHAT
RISKY**

RISKY

**VERY
RISKY**

problem-solving

35 MINUTES

- Assist Client in identifying at least one trigger which may lead him or her to risky behavior(s)
 - People
 - Places
 - Substance
 - Moods/Feelings

- Assist Client in problem-solving reducing risk for at least one identified trigger. Problem-solving steps include:
 1. Identify the trigger
 2. Determine the goal
 3. Brainstorm alternative solutions
 4. Evaluate those solutions
 5. Choose the most appropriate and best solution
 6. Develop an action plan
 7. Act

wrap-up

15 MINUTES

Fill out Goal Card, which Client takes with him/her, and copy goal onto Goal Recording Sheet in Client File.

Facilitator completes Session Notes in Client File. Complete Quality Assurance Check Sheet/ Notes (page 45 of this session).

- Assist Client in identifying a clear, realistic, and measurable goal related to the identified trigger(s). A goal should be:
 - Realistic—can reasonably expect to be completed between sessions
 - Clear—Client understands exactly what steps must be taken to complete the goal
 - Not too easy and not too hard—goals should be challenging, but not impossible or too global
 - Have a clear end point—Client should know when a goal has been completed
- Review Life Project, celebrating any progress

QUALITY ASSURANCE CHECK SHEET / NOTES

Client _____ Facilitator _____

- Completed check-in with Client, discussing last three months' life events and progress on goals and Life Project
- Discussed Client's personal risky behavior(s)
- Completed Continuum of Risk activity
- Identified and problem-solved trigger(s) to Client's personal risky behavior(s)
- Set goal related to personal risky behavior(s); recorded it on Goal Card for Client and on Goal Recording Sheet for File
- Reviewed Life Project/progress
- Completed Session Notes for File

Notes (include observations of Client's affect, engagement, and reaction to session elements)

OUTCOME AND SKILLS

Outcome 1A: Client will successfully demonstrate proper placement of the male condom using a wooden penis model

Outcome 1B: Client will successfully demonstrate proper placement of the female condom using a vaginal model

Skill: Client will identify at least one challenge related to the male and/or the female condom use

Outcome 2 (IDUs and partners of IDUs): Client will successfully demonstrate adequate knowledge of a local needle exchange program

Skill: Client will identify at least one challenge related to use of a needle exchange program

AGENDA / TIMELINE	MATERIALS / ACTIVITIES
<p>Module 2, Session 2.....90 minutes</p> <ul style="list-style-type: none"> • Check-In/Life Context20 minutes <ul style="list-style-type: none"> • Review last week’s life events • Discuss progress of goal and Life Project. • Preview Session 2 content • Discuss Session content as it relates to the Client’s life context • Skills-Building.....30 minutes <ul style="list-style-type: none"> • Brief discussion of male anatomy • Male condom demonstration and Client practice • Brief discussion of female anatomy • Female condom demonstration and Client practice • Brief discussion of STDs • Discussion of needle exchange program • Problem-Solving.....20 minutes <ul style="list-style-type: none"> • Client identifies and problem solves triggers related to barriers to condom use and/or use of needle exchange program • Wrap-Up20 minutes <ul style="list-style-type: none"> • Client sets goal related to condom use and/or use of the needle exchange program • Review Client’s Life Project 	<ul style="list-style-type: none"> • Client File <ul style="list-style-type: none"> • Male Anatomy Chart • Instructions for Male Condom Demonstration Activity • Female Anatomy Chart • Instructions for Female Condom Demonstration Activity • Common STDs and Treatment • Area Needle Exchange Information • Goal Cards • Goal Recording Sheet • Quality Assurance Check Sheet/Notes • Session Notes • Pens, pencils • Wooden penis model • Male condoms (practice and distribution) • Vaginal model • Female condoms (practice and distribution) • Reality® female condom brochures • Lubricants (practice and distribution) • Waterless soap • Paper towels

check-in/life context 20 MINUTES

- Review significant events in Client's life in past week, including the Life Project
- Discuss goal set at last session including successes, accomplishments, and challenges
- Preview Session 2 content
- Identify how condom use influences the Client's sexual life. Suggested topic areas for discussion:
 - Relationship(s)
 - Risk-taking behavior and barriers to condom use
 - Cultural influences regarding condom use
 - Gender expectations regarding responsibility for condom use
- **(IDUs and partners of IDUs)** Identify how safer needle practices impact Client's life
 - Access to needle exchange program
 - Alternatives to needle exchange program (purchase, cleaning, etc.)
 - Influence of drug sharing network

Skill s-Building

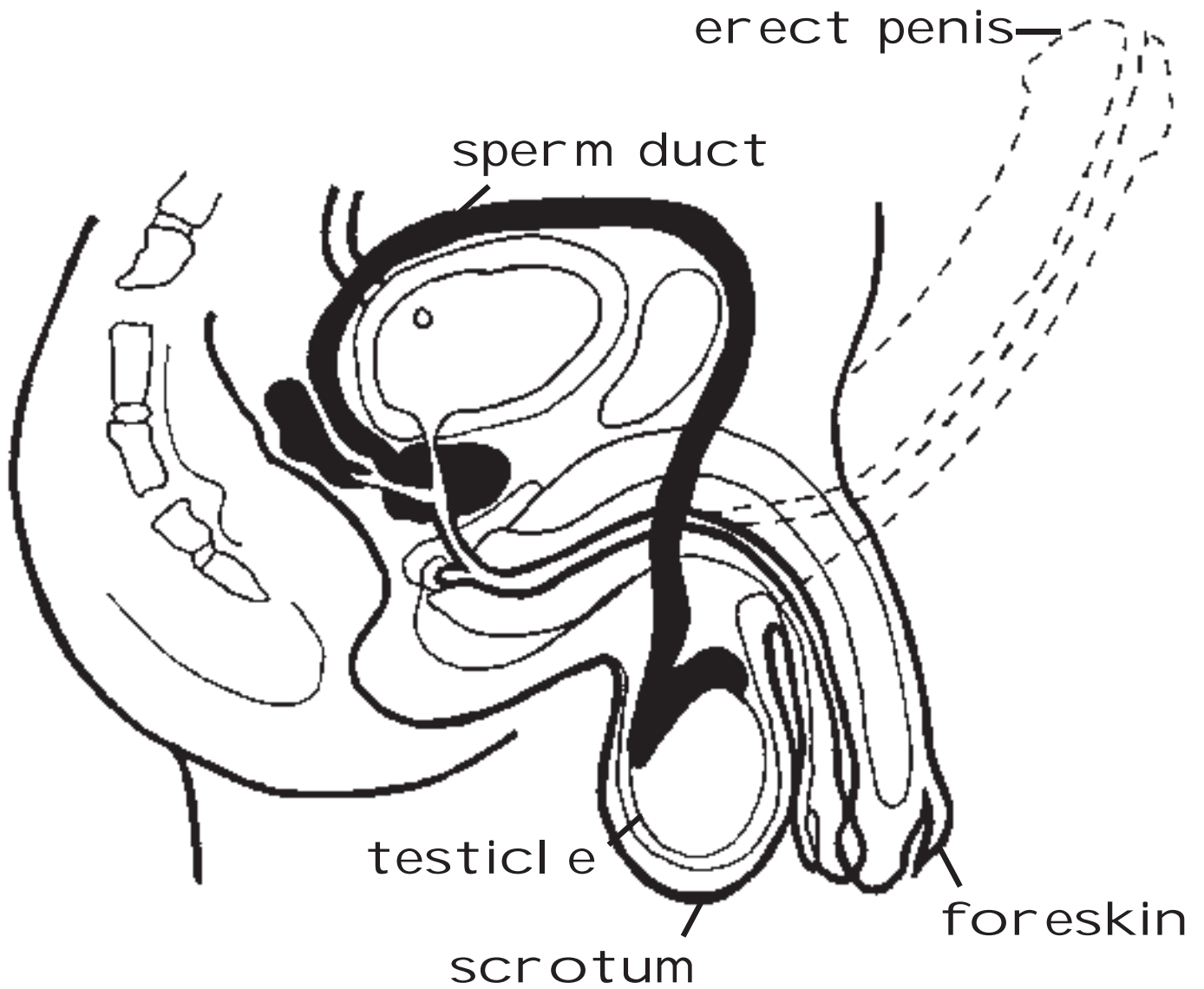
30 MINUTES

•Activity: "Condom Demonstration" (facilitator and Client)

- Assess Client's knowledge of the male reproductive anatomy (see male anatomy chart on page 49 of this session)
- Facilitator demonstrates the proper placement of a male condom using the wooden penis model. Steps:
 1. Always choose a latex condom.
 2. Check the expiration date on the package (or on the box).
 3. Test to make sure there is still an air bubble in the package.
 4. Open package, being careful not to tear the condom. Do not open the package with your teeth and use extra caution with long fingernails.
 5. Place the condom on the head of the penis, making sure that the reservoir tip sticks out. (Putting a drop of lubricant inside the condom tip may give extra feeling.)
 6. Pinch the reservoir tip to get any air out.
 7. Slowly unroll the condom all the way down to the base of the penis.
 8. If lubrication is desired, choose water-based (i.e., K-Y® Jelly) rather than oil-based (i.e., Vaseline®) lubricant.
 9. Immediately after ejaculation, hold the condom at the base of the penis and carefully withdraw (pull out before the penis becomes flaccid [soft]).
 10. Roll the condom down and remove it from the penis making sure the contents of the reservoir tip do not spill.
 11. Dispose of the condom in a trash can. Do not flush condoms down the toilet
- Client practices proper placement of a male condom using the wooden penis model.

ACTIVITY: "CONDOM DEMONSTRATION"

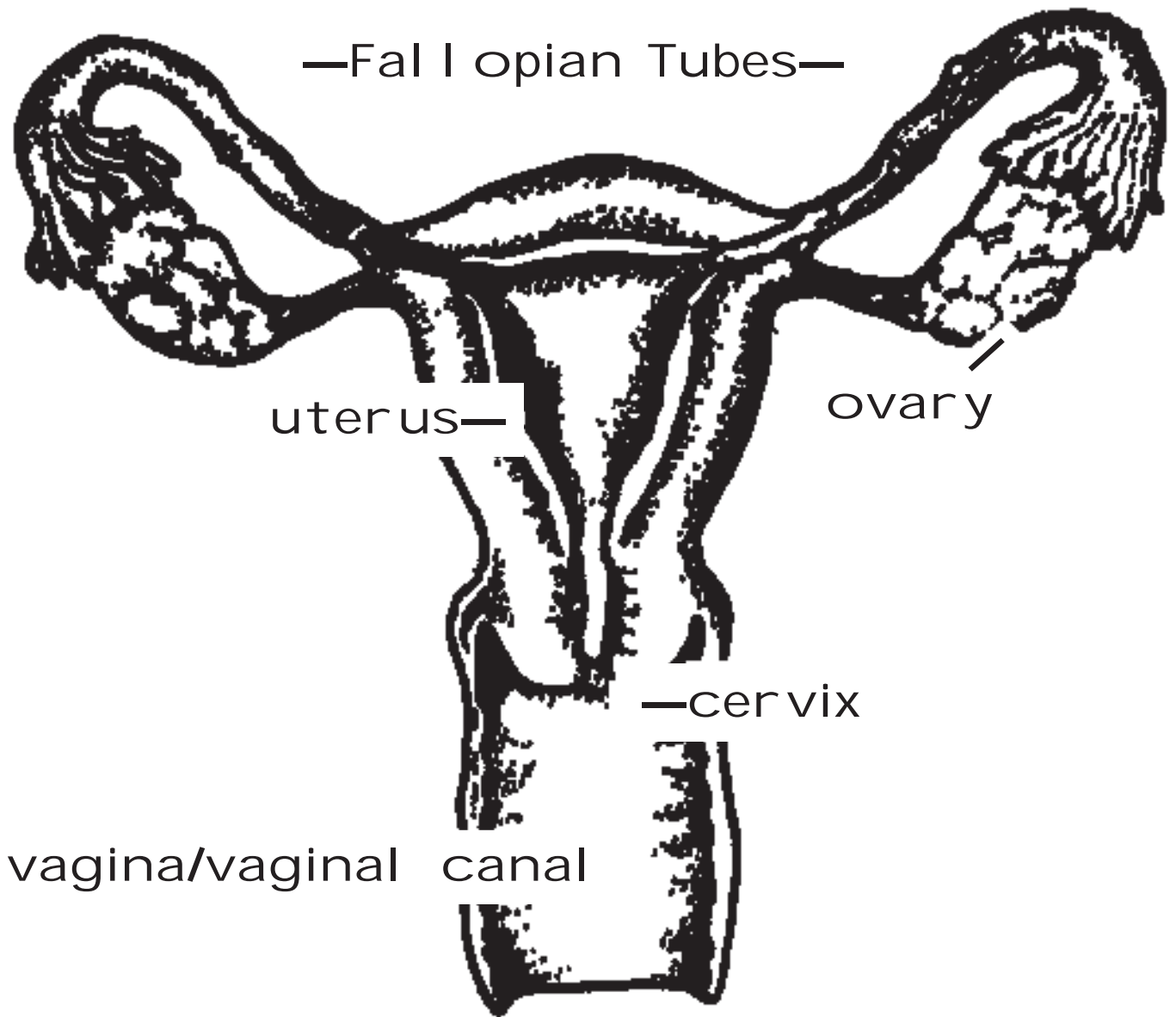
MALE ANATOMY



- Assess Client's knowledge of the female reproductive anatomy (**see female anatomy chart on page 51 of this session**)
- Facilitator demonstrates the proper placement of a female condom using the vaginal model. Steps:
 1. Check the expiration date of the condom package. The manufacturer says the female condom can be used up to one year beyond the expiration date, but always check the date.
 2. Carefully open the package without tearing the condom. Do not open the package with your teeth and use extra caution with long fingernails.
 3. Unroll the condom and separate the two rings. The loose ring inside the pouch is called the "inner ring," and the ring connected to the opening of the pouch is called the "outside ring."
 4. Gently rub the condom to evenly spread the lubricant.
 5. Grab the inside ring between the thumb and middle finger and pinch the edges together like a diaphragm.
 6. Place the index finger between the thumb and middle finger to prevent the condom from slipping.
 7. Still squeezing the condom, use the index finger to guide the condom into the vagina, being careful not to twist the condom. (The other hand may be used to spread the vagina during insertion).
 8. Push the ring in until the cervix is completely covered. The ring will then fall into place (like a diaphragm).
 9. The outside ring remains outside the vagina protecting the labia or lips around the vagina.
 10. Insert the index finger through the inside of the condom to make sure the condom is not twisted or loose.
 11. Until both partners are comfortable using the female condom, guide the penis into the condom.
 12. Immediately after ejaculation, squeeze and twist the end of the condom that is protecting the labia.
 13. Remove the condom by pulling, being careful not to spill the semen inside the condom.
 14. Dispose of the condom in a trash can. Do not flush down the toilet.
- Client practices the proper placement of a female condom using the vaginal model.

ACTIVITY: "CONDOM DEMONSTRATION"

FEMALE ANATOMY



- **Activity: Common STDs and Treatment (see page 53 of this session)**

- Assess Client's knowledge of STDs
 - Common types (e.g., chlamydia, gonorrhea, genital warts, etc.)
 - Difference in cause (bacterial, viral, parasitic) and treatment
 - Prevention

ACTIVITY: "COMMON SEXUALLY TRANSMITTED DISEASES AND TREATMENT"

BACTERIAL

CHLAMYDIA:

Symptoms: Known as the "silent epidemic;" discharge from the penis or vagina; burning sensations while urinating. Women—lower abdominal pain, pain during intercourse, bleeding between menstrual cycles. Men—burning and itching around the opening of the penis and swelling in the testicles

Treatment: Antibiotics

GONORRHEA (a.k.a. "the clap," "dose," or "drip")

Symptoms: Men—pain at the tip of the penis, pain and burning during urination, thick, yellow, cloudy discharge. Women—mild vaginal itching and burning, thick yellow-green discharge, burning on urination, severe lower abdominal pain

Treatment: Antibiotics

SYPHILIS

Symptoms: Painless sore(s) around the genital area that and go unnoticed. If untreated, the disease will progress, causing many complications and in some instances, death.

Treatment: Antibiotics

CHANCROID

Symptoms: Pus-filled bump around the genital area (painful for men, not always painful for women). Painful lymph glands in the groin

Treatment: Antibiotics

VIRAL

GENITAL WARTS

Symptoms: Small lumps on the genital area

Treatment: Removed by using cream, freezing, or burning

GENITAL/ORAL HERPES

Symptoms: Blister like sores on the penis, vulva, near the anus, on the thigh or buttocks, and around the genital area

Treatment: No cure; medication to help keep virus in check

HEPATITIS B

Symptoms: Flu-like symptoms (aches, pains, nausea, vomiting). Whites of the eyes turn yellow. Pain in the abdomen

Treatment: Preventive vaccine available, no cure or treatment once infected

HIV

Symptoms: Cold or flu-like symptoms (aches, fever, weight loss, sleeplessness, nausea, thrush, fatigue, swollen glands, diarrhea, pneumonia)

Treatment: No cure, medication available to enhance the immune system

PARASITIC

CRABS (a.k.a. lice, "the cooties")

Symptoms: Parasite that lives on and bites the skin causing itching and sometimes a rash or bluish spots

Treatment: A chemical solution

SCABIES

Symptoms: A tiny mite that burrows beneath the skin, causing a rash around the thighs, armpits, or waist

Treatment: Medicated cream

TRICHOMONIASIS

Symptoms: There are often no symptoms. Women—bubbly, pale green or gray vaginal discharge with unpleasant odor. Vaginal itching, burning, or redness.

Men—discharge from the penis and burning with urination

Treatment: Antibiotics

- **Activity (IDUs and partners of IDUs): Area Needle Exchange Information (see page 55 of this manual)**

- Assess Client's knowledge of local needle exchange program
 - Location, hours of operation, procedures
 - Provide printed materials including phone number

AREA NEEDLE EXCHANGE INFORMATION

LIFEPOINT: A clean needle exchange program of the AIDS Resource Center of Wisconsin—Milwaukee Office

EXCHANGE SITES • 225-1511

All contacts are anonymous and legal.

Bleach, safer sex kits, and health information is available.

Ora-Sure HIV test now available!

MONDAY Noon—1:00 p.m. • N. Holton and W. Wright
2:00—4:00 p.m. • E. Brady and N. Farwell

TUESDAY 10:30—11:30 a.m. • 27th and Burleigh
Noon—1:00 p.m. • 11th and Burleigh
2:00—3:00 p.m. • S. 12th and W. Greenfield
3:00—4:00 p.m. • S. 16th and W. Scott

WEDNESDAY 11:00 a.m.—Noon • N. 16th and W. North
12:30—1:30 p.m. • Lifepoint staff available at Cross
Lutheran Church, 1821 N. 16th
2:00—3:00 p.m. • S. 12th and W. Greenfield
3:00—4:00 p.m. • S. 16th and W. Scott
1:00—8:00 p.m. • Rick Ceasar, Cross Lutheran
Church, 1821 N. 16th

THURSDAY 11:00 a.m.—Noon • N. 1st and Keefe
Noon—1:00 p.m. • N. 11th and Burleigh
2:00—4:00 p.m. • N. 42nd and W. Capitol

FRIDAY Roving Day • 10:00 a.m.—4:00 p.m.

SATURDAY 2:00—3:00 p.m. • E. Brady and N. Farwell

As of 12-9-99

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As of 12-9-99

problem-solving

20 MINUTES

- Trigger identification:
 - Assist Client in identifying at least one trigger related to barriers to condom use
 - People
 - Places
 - Substances
 - Moods/Feelings
- IDUs or partners of IDUs:
 - Assist Client in identifying at least one trigger related to barriers to safer needle practices
 - People
 - Places
 - Substances
 - Moods/Feelings
- Problem-Solving:
 - Assist Client in problem solving for at least one identified trigger. Problem-solving steps include:
 1. Identify the trigger
 2. Determine the goal
 3. Brainstorm alternative solutions
 4. Evaluate those solutions
 5. Choose the most appropriate and best solution
 6. Develop an action plan
 7. Act

wrap-up

20 MINUTES

Fill out Goal Card, which Client takes with him/her, and copy goal onto Goal Recording Sheet in Client File.

Facilitator completes Session Notes in Client File. Complete Quality Assurance Check Sheet/ Notes (see page 58 of this session)

- Facilitator may choose further condom practice or additional problem-solving based on perceived Client need
- Assist Client in setting a clear, realistic, and measurable goal related to the identified trigger(s). A goal should be:
 - Realistic—can reasonably expect to be completed between sessions
 - Clear—Client understands exactly what steps must be taken to complete this goal
 - Not too easy and not too hard—goals should be challenging, but not impossible or too global
 - Have a clear end point—Client should know when a goal has been completed
- Review the Life Project, celebrating any progress.

QUALITY ASSURANCE CHECK SHEET / NOTES

Client _____ Facilitator _____

- Completed check-in with Client
- Discussed male anatomy, using diagram on page 49
- Demonstrated and had Client practice proper placement of male condom, using the wooden penis model
- Discussed female anatomy, using diagram on page 51
- Demonstrated and had Client practice proper placement of Female Condom, using the vaginal model
- Discussed local needle exchange programs
- Identified and problem-solved trigger-related barriers to condom use and/or use of needle exchange programs
- Set goal related to condom use and/or use of needle exchange programs; recorded it on Goal Card for Client and on Goal Recording Sheet for File
- Reviewed Life Project/progress
- Completed Session Notes for File

Notes (include observations of Client's affect, engagement, and reaction to session elements)

OUTCOME AND SKILLS

Outcome 1A: Client will successfully demonstrate (through in-session role-plays) increased skill in negotiating safer sex practices with all sexual partners

Outcome 1B: Client will successfully demonstrate (through in-session role-plays) increased skill in negotiating safer needle practices

Skill : Client will successfully identify and incorporate three key components of assertive communication in negotiating safer behaviors

AGENDA / TIMELINE	MATERIALS / ACTIVITY
<p>Module 2, Session 3.....90 minutes</p> <ul style="list-style-type: none"> • Check-In/Life Context20 minutes <ul style="list-style-type: none"> • Review last week’s life events. • Discuss progress of goal and Life Project • Preview Session 3 content • Discuss session content as it relates to the Client’s life context • Skills-Building.....20 minutes <ul style="list-style-type: none"> • Assess Client’s ability to communicate assertively • Engage Client in a role-play to enhance their assertive communication skills • Assist Client to apply assertive communication skills to negotiation of condom use/safer sex practices • (IDUs and partners of IDUs) Assist Client to apply assertive communication skills to negotiation of safer needle practices • Problem-Solving.....35 minutes <ul style="list-style-type: none"> • Client identifies and problem-solves trigger(s) related to barriers to negotiating safer sex and/or needle practices • Wrap-Up15 minutes <ul style="list-style-type: none"> • Skill practice • Client sets goal related to negotiating safer sex and/or needle practices • Review Client’s Life Project 	<ul style="list-style-type: none"> • Client File <ul style="list-style-type: none"> • Role Play Vignettes • Three Components of Assertive Communication • Goal Card • Goal Recording Sheet • Quality Assurance Check Sheet/Notes • Session Notes • Pens, pencils

check-in/life context **20 MINUTES**

- Review significant events in Client's life over the past three weeks, including the Life Project
- Discuss goal set at last session including successes, accomplishments, and challenges
- Preview Session 3 content
- Identify how increased assertive negotiation of safer sex and/or needle practices may impact Client's life. Suggested topic areas for discussion:
 - Relationship(s)
 - Assertive communication and sexual/needle risk-taking
 - Sexual risk-taking
 - Cultural influences on assertive negotiation
 - Gender expectations for assertive negotiation

Skill s-building

20 MINUTES

- **Discuss three key components of assertive communication worksheet (see page 62 of this session):**
 - Use "I" statements
 - Say what you want respectfully
 - Say why it's important
- Assess Client's current ability to communicate assertively through role plays
 - Engage Client in a role-play to practice assertive communication skills. Begin with non-sexual examples (i.e., partner taking out garbage, sharing household chores, deciding on television shows, sending food back in a restaurant, asking for service at a store, etc.)
 - Continue role-play exercise with sexual and/or drug related role-plays appropriate to Client's life context. **(If needed, see suggested example Role-Play Vignettes, pages 63–64 of this session.)**

Use "I" statements

Say what you want
RESPECTFULLY

Say **WHY**
it's important

ROLE PLAY VIGNETTES

SEXUAL CONTENT—CURRENTLY SEXUALLY ACTIVE

- You have continuously fought with your partner about his/her stand against using condoms. He feels that because you are both HIV-positive it's okay to have unprotected sex. The last time you tried to negotiate with him, he became very angry. He has shown some violent tendencies in the past. How do you assertively convince him/her to try safer sex?
- Both you and your partner tested HIV-positive three years ago, and have been on combination medication therapy for six months. When you received your test results, you made a commitment to each other to always practice safer sex. Recent lab work shows both viral load levels to be undetectable. Your partner suggests having unprotected sex as a celebration. How do you convince him/her to maintain your commitment to safer sex?
- You have a casual partner who knows your HIV status. It's the end of the month, and this partner often helps you out with a few dollars until you get your check. When you go to talk with that person, he/she is high and will give you money only if you have unprotected sex. How would you handle this situation? What would you say?

CURRENTLY NOT SEXUALLY ACTIVE

- Your boyfriend of three months is pressuring you to have sex. Since being on combination therapy you are feeling much better about your health and body image. You find yourself thinking about how nice intimacy would be again. How do you suggest using condoms or another safer sex practice?
- Your mother is dating again. How would you discuss safer sex practices with her?
- You are very close to your 16-year-old niece/nephew, although you have not told him/her your HIV status. You have a feeling that your sister will never sit down with him/her to talk about sex. Your sister has given you permission to talk with him/her. What would you say to him/her?
- You find a condom in your son's jeans while doing the wash. How would you talk with him about your discovery?
- You have just met someone wonderful. The relationship has been non-sexual up to this point, but you would like it to progress into something more. He/She is aware of your HIV status, but you have never discussed the possibility of a sexual relationship. What do you say?

DRUG-RELATED SCENARIOS

- You have been out and having a good time at the bar. You've had a lot to drink. It is getting close to closing and someone invites you to his or her place to keep the party going. They bring out some "coke" at their apartment, and keep saying you should "just kick back and relax." How would you stay safer?
- You've been trying to find a job all day. You haven't been very successful and decide to stop at one of your favorite hangouts to cheer yourself up. You run into a person that you haven't seen for awhile. This person used to be a part of your trusted circle of friends that shared needles and works. (S)he tells you about some good drugs at a sharing party. You don't have clean works with you. How would you bring up the subject of safer needle practices?
- Your partner is an IDU who is embarrassed about using the needle exchange program. His drug use is very secretive, and he is afraid his reputation will be ruined if someone recognizes him. You're concerned that he has gone back to sharing needles or getting needles wherever he can. How would you convince him to use safer needle practices?

problem-solving

35 MINUTES

- Assist Client in identifying at least one trigger related to barriers to negotiating safer sex and/or needle practices
 - People
 - Places
 - Substances
 - Moods/Feelings

- Assist Client in problem-solving risk reduction for at least one identified trigger. Problem-solving steps include:
 1. Identify the trigger
 2. Determine the goal
 3. Brainstorm alternative solutions
 4. Evaluate those solutions
 5. Choose the most appropriate and best solution
 6. Develop an action plan
 7. Act

wrap-up

15 MINUTES

Fill out Goal Card, which Client takes with him/her, and copy goal onto Goal Recording Sheet in Client File.

Facilitator completes Session Notes in Client File. Complete Quality Assurance Check Sheet/ Notes (see page 67 of this session)

- Assist Client in identifying a clear, realistic, and measurable goal related to the identified trigger(s). A goal should be:
 - Realistic—can reasonably expect to be completed between sessions
 - Clear—Client understands exactly what steps must be taken to complete the goal
 - Not too easy and not too hard—goals should be challenging, but not impossible or too global
 - Have a clear end point—Client should know when a goal has been completed
- Review Life Project, celebrating any progress

QUALITY ASSURANCE CHECK SHEET / NOTES

Client _____ Facilitator _____

- Completed check-in with Client
- Assessed Client's current ability to communicate assertively
- Engaged Client in role play to enhance his/her assertive communication skills
- Applied assertive communication skills to negotiation of condom use, safer sex practices, and/or safer needle practices
- Set goal related to negotiating safer sex and/or safer needle practices; recorded it on Goal Card for Client and on Goal Recording Sheet for File
- Reviewed Life Project/progress
- Completed Session Notes for File

Notes (include observations of Client's affect, engagement, and reaction to session elements)

OUTCOME AND SKILLS

Outcome: Client will increase decision-making skills surrounding disclosure decisions

Skill: Client will identify personal and environmental factors related to disclosure decisions

AGENDA / TIMELINE	MATERIALS / ACTIVITY
<p>Module 2, Session 4.....90 minutes</p> <ul style="list-style-type: none">• Check-In/Life Context20 minutes<ul style="list-style-type: none">• Review past week’s life events• Discuss progress of goal and Life Project.• Preview Session 4 content• Discuss session content as it relates to the Client’s life context• Skills-Building.....20 minutes<ul style="list-style-type: none">• Discuss Client’s attitudes and beliefs surrounding disclosure• Engage Client in a dialogue about past disclosure decisions and experiences (if any)• Assess Client’s decision-making skills and self-efficacy surrounding disclosure• Problem-Solving.....35 minutes<ul style="list-style-type: none">• Client identifies and problem-solves trigger(s) that impact his/her decision-making process• Wrap-Up15 minutes<ul style="list-style-type: none">• Client sets goal related to disclosure or the decision-making process• Review Client’s Life Project	<ul style="list-style-type: none">• Client File<ul style="list-style-type: none">• Goal Card• Goal Recording Sheet• Quality Assurance Check Sheet/Notes• Session Notes• Pens, pencils

check-in/life context **20 MINUTES**

- Review significant events in Client's life over the past week, including Life Project
- Discuss goal set at last session including successes, accomplishments, and challenges
- Preview Session 4 content
- Discuss Client's attitudes and beliefs surrounding self-disclosure. Suggested topic areas for discussion:
 - Stigma
 - Self-esteem
 - Social support
 - Cultural influences on sexual activity
 - Relationship(s)—personal and professional
- Engage Client in a dialogue about past disclosure decisions and experiences (if any):
 - Positive experiences (when, disclosure to whom, results)
 - Negative experiences (when, disclosure to whom, results)
 - If Client has never disclosed to anyone, what are their expectations of cost to them (personal and professional) and benefit to them (personal and professional)

skill s-building

20 MINUTES

- Assist Client in identifying factors that influence his or her decision whether to self-disclose
 - **Activity: My Decision-Making Process**
 - This discussion may include the following issues:
 - Personal safety
 - Stigma
 - Positive social support
 - Health status and health care
 - Employment
 - Legal issues
 - Housing
- Facilitator may use the My Decision-Making Process scale to guide Client's reflection on how much thought preceded decisions regarding disclosure (**See page 71 of this session.**) Topics of discussion may include:
 - Impulsive disclosure vs. thoughtful planning of disclosure discussion (i.e., situational, person-specific, etc.)
 - Pressure to disclose by environmental factors (i.e., health clinic, employment situations, etc.)
 - Thoughtful planning when choosing not to disclose

ACTIVITY: "MY DECISION-MAKING PROCESS"



problem-solving

35 MINUTES

- Assist Client in identifying at least one trigger that may lead him or her to make disclosure decisions, leading to risky behavior
 - People
 - Places
 - Substances
 - Moods/Feelings
- Assist Client in problem solving a positive decision-making process for at least one identified trigger
 1. Identify the trigger
 2. Determine the goal
 3. Brainstorm alternative solutions
 4. Evaluate those solutions
 5. Choose the most appropriate and best solution
 6. Develop an action plan
 7. Act

wrap-up

15 MINUTES

- Facilitator may assist Client in role-playing his/her disclosure decisions or problem-solve barriers to good decision-making
- Assist Client in identifying a clear, realistic, and measurable goal related to the identified trigger(s). A goal should be:
 - Realistic—can reasonably expect to be completed between sessions
 - Clear—Client understands exactly what steps must be taken to complete the goal
 - Not too easy and not too hard—goals should be challenging, but not impossible or too global
 - Have a clear end point—Client should know when a goal has been completed
- Review Life Project, celebrating any progress

Fill out Goal Card, which Client takes with him/her, and copy goal onto Goal Recording Sheet in Client File.

Facilitator completes Session Notes in Client File. Complete Quality Assurance Check Sheet/ Notes (see page 74 of this session)

OUTCOME AND SKILLS

Outcome: Client will develop a plan to increase safer behaviors, assertive negotiation/ communication, or self-efficacy surrounding disclosure issues over the next three months

Skill 1: Client will identify at least one trigger that may lead them to engage in risky behaviors, impede assertive negotiation or impede self-disclosure

Skill 2: Client will identify at least one situation, person, or place that supports safer behavior

AGENDA / TIMELINE	MATERIALS / ACTIVITY
<p>Module 2, Session 590 minutes</p> <ul style="list-style-type: none"> • Check-In/Life Context15 minutes <ul style="list-style-type: none"> • Review past week’s life events • Discuss progress of goal and Life Project • Preview Session 5 content • Discuss session content as it relates to the Client’s life context • Skills-Building.....15 minutes <ul style="list-style-type: none"> • Discuss Client’s successes and challenges with goals set in previous sessions • Problem-Solving.....20 minutes <ul style="list-style-type: none"> • Assist Client to develop a plan for maintenance and continued enhancement of session skills • Wrap-Up.....40 minutes <ul style="list-style-type: none"> • Client demonstrates proper male and female condom placement • (IDUs and partners of IDUs) Client demonstrates knowledge of needle exchange program/proper cleaning techniques • Client sets goal related to maintaining safer behavior over the next three months • Review Client’s Life Project 	<ul style="list-style-type: none"> • Client File <ul style="list-style-type: none"> • Continuum of Risk (Session 1, page 42) • Three Components of Assertive Communication (Session 3, page 62) • Goal Card • Goal Recording Sheet • Quality Assurance Check Sheet/Notes • Session Notes • Pens, pencils

check-in/life context 15 MINUTES

- Review significant events in Client's life over the past week, including the Life Project
- Discuss goal set at last session including successes, accomplishments, and challenges
- Preview Session 5 content
- Review previous four sessions' content and Client's life context. Topics for discussion may include:
 - Role of sexual activity in Client's life
 - Drug-related behavior and risk taking decisions
 - Condom use and impact on Client's sexual life
 - Safer drug behaviors impact on Client's life
 - The role and impact of effective, assertive negotiation/communication on Client's life
 - How decisions about self-disclosure affect Client's life

Skills-Building

15 MINUTES

- Review Client's successes and challenges with goals set in previous sessions. Suggested topic areas for discussion:
 - Continuum of Risk worksheet (Session 1, page 42)
 - Confidence using male and female condom
 - Assertive communication/negotiation (Three Components of Assertive Communication worksheet, Session 3, page 62)
 - Decision-making and self-disclosure

problem-solving

20 MINUTES

- Assist Client in developing a plan for maintenance and continued enhancement of previous four sessions' skills
 - Identify the most challenging trigger(s)
 - People
 - Places
 - Substances
 - Moods/Feelings
 - Identify strategies that were most successful
 - Identify strategies that were not as successful

- Assist Client in problem-solving the most challenging trigger. Problem-solving steps include:
 1. Identify the trigger
 2. Determine the goal
 3. Brainstorm alternative solutions
 4. Evaluate those solutions
 5. Choose the most appropriate and best solution
 6. Develop an action plan
 7. Act

wrap-up

40 MINUTES

- Assist Client in developing a plan/goal to maintain safer behavior(s) over the next three months. A plan/goal should be:
 - Realistic—can reasonably expect to be completed between sessions
 - Clear—Client understands exactly what steps must be taken to complete the goal
 - Not too easy and not too hard—goals should be challenging, but not impossible or too global
 - Have a clear end point—Client should know when a goal has been completed
- Facilitator may choose to have Client review or practice his or her skill level in the following areas:
 - Male and female condom placement
 - Knowledge of needle exchange programs/proper needle cleaning technique
 - Role play assertive communication/negotiation
 - Role play disclosure scenario
- Assist Client to identify at least one situation, person, or place that supports his or her goals regarding safer behavior
- Review Life Project, celebrating any progress
- Prepare the Client for the three-month break and assessment

Fill out Goal Card, which Client takes with him/her, and copy goal onto Goal Recording Sheet in Client File

Facilitator completes Session Notes in Client File. Complete Quality Assurance Check Sheet/Notes (see page 80 of this session)

QUALITY ASSURANCE CHECK SHEET / NOTES

Client _____ Facilitator _____

- Completed check-in with Client
- Discussed Client's successes and challenges with goals set in previous sessions
- Developed a plan for maintenance and continued enhancement of session skills
- Client demonstrated proper male and female condom placement, using the wooden penis model and the vaginal model
- Client demonstrated knowledge of local needle exchange programs
- Discussed three-month break and assessment
- Set goal related to maintaining safer behavior(s) over the next three months; recorded it on Goal Card for Client and on Goal Recording Sheet for File
- Reviewed Life Project/progress
- Completed Session Notes for File

Notes (include observations of Client's affect, engagement, and reaction to session elements)
