



Teen Pregnancy
Prevention Initiative

SEXUAL HEALTH COUNSELING TOOL

INSTRUCTIONS: These cut outs are designed to be printed out on 3x5 index cards (or cut to size) and used as easy access pocket reference card for providers dealing with teens in different situations.



Sexual Health Counseling Tool



The following is an outline of a sexual history interview. Consider these statements, questions, and tips as a guide to counseling youth. Adapt your counseling techniques based on patient readiness to make changes (stage of change) in their sexual behaviors – see “Motivational Interviewing Techniques” document.

Sexual Health Counseling *(Parent in Room)*

- It is good that you are both here. It can be very helpful to have an adult to talk with about your health and decisions you need to make to stay healthy.
- You are at an age now that you are able to start taking care of your own health and I want to support you in doing that.
- Do you want your mom in the room while we talk or would you prefer to have her go to the waiting room until the end of your visit?

Sexual Health Counseling *(Confidentiality/Documentation)*

- I am going to ask you some personal questions and want to let you know that everything is going to stay between you and me. I'm not going to share your business with your mom or anyone else without your permission unless you tell me that you are hurting someone, someone is hurting you or you want to hurt yourself. Then we would talk about who else needs to know in order to help you.
- I will need to write a few things down, but I will not be writing everything we talk about. Is this OK with you?

Sexual Health Counseling *(Initial Questioning)*

- Some of the youth I talk to are starting to have sexual feelings. What do you know about sex?
- Have you ever had any type of sex (vaginal, anal or oral) or are you thinking about it?
- How do you feel about having sex? Is having sex a positive or negative thing for you? Tell me about this...

Sexual Health Counseling *(Initial Questioning cont'd)*

- How many partners have you had? Were they guys, girls or both? Have you ever been forced to have sex or be involved in sexual activities when you didn't want to?
- Who are you having sex with now? Does your partner have sex with other people? Do you?
- Have you thought about choosing not to have sex? How do you/will you let your partner know this is your decision?
(May role play this with youth).

Sexual Health Counseling *(Condom Use)*

- Tell me about using condoms? How do you feel about using condoms?
- What % of the time you have sex do you use condoms? What makes you decide to use condoms or not? What would help you use condoms more often?
- If youth is willing to use condoms and/or use them more consistently, make plan here that overcomes barriers identified by youth. Give menu of options (i.e., get them from health department, store, sibling, etc; keep them in purse/backpack, car glove box, in bedroom drawer, etc; talk to your partner about using them, no sex without). *(May role play this).*
- What do you know about using a condom? *(Provide education as needed, validating what youth already knows).*

Sexual Health Counseling *(Sex Under Influence)*

- Have you ever had sex when you were drunk or high?
- When this happened did you choose to have sex or were you forced to do things you didn't want to? *(Many youth do not include forced activities or partners in their sexual history).*
- How are you feeling about it? Have you talked with anyone?
- What are some things you could do to keep yourself safer in these situations? Give menu of options (i.e., don't drink/get high, decrease amount consumed, have friend watch out for you). *(May role play refusal with youth).*

Sexual Health Counseling *(STI History)*

- What do you know about Chlamydia and Gonorrhea?
- They are some of the most common sexually transmitted infections, but there are lots of others. *(Show brochure with information about STIs).*
- What questions do you have about STIs?
- This pamphlet has information about all sexually transmitted infections, have you ever had one of these? How many times? Were you treated with medications?
- How has this changed your having sex (or use of condoms)?

Sexual Health Counseling *(Pregnancy History)*

- How do you feel about becoming a mom/dad?
- Have you ever been pregnant or gotten someone pregnant? When do you see this happening for you?
- Where do you see yourself in 5 years? How would having a baby change that?
- Do you feel you are at risk of getting pregnant? How much risk, on a scale of 1-10? What are you doing to keep yourself from getting pregnant?

Sexual Health Counseling *(Pregnancy History cont'd)*

- What do you think about using birth control? Tell me about your experiences? What are some reasons you wouldn't use birth control?
- Do you know what kinds of birth control are available? Would you like some more information? *(Use hand-out to discuss available options. If teen is willing to use a form of birth control, make a plan with teen for educating and obtaining the birth control including discussing how to overcome barriers).*

Sexual Health Counseling *(Summary)*

- Do you have a parent or other trusted adult in your life that you can openly and in comfort talk with? If none, offer community resources or your clinic when appropriate.
- We talked about a lot of things today, I heard you say you were going to.....*(Review plans that were made during your counseling session for abstinence, condom use, substance use, etc.).*

Sexual Health Counseling *(Summary cont'd)*

- Have you shared any of the information we talked about today with your parent? Do you want us to share some things together when he/she comes back into the room? *(Determine what, if anything, the youth would like to share and how it is going to be shared).*
- Remember, the only sure way to prevent pregnancy and STIs is to not have sex. The next safest way is to use a condom every time you have sex. Your plan for reducing your risk is Thank you for trusting me with your business, is there anything else you would like to talk about?