





Reaching Impact, Saturation, and Epidemic Control (RISE)

Strengthening Counseling for Adolescents at Voluntary Medical Male Circumcision Services

Counseling Cue Cards

Group Counseling Session
Individual Counseling Session
Post-HIV Test Counseling
Immediate Postoperative Counseling
Follow-Up Visit Day Two
Follow-Up Visit Day Seven
VMMC Mentoring

RISE is a 5-year global project funded by the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) and the U.S. Agency for International Development (USAID). RISE works with countries to achieve a shared vision of attaining and maintaining epidemic control, with stronger local partners capable of managing and achieving results through sustainable, self-reliant, and resilient health systems by 2024. RISE's contributions to this work will lead to fewer new HIV infections, decreased HIV-related morbidity and mortality, and increased quality of life for people living with HIV. The final publication of this training package was made possible with support from the U.S. President's Emergency Plan for AIDS Relief, through the United States Agency for International Development-funded RISE program, under the terms of the cooperative agreement 7200AA19CA00003. The contents are the responsibility of the authors and do not necessarily reflect

the views of USAID or the United States Government.

Strengthening Counseling for Adolescents at VMMC Services: Group Counseling Session Cue Card

Background

- During the group counseling session, adolescent clients will learn how voluntary medical male circumcision (VMMC) promotes a healthy life by reducing female-to-male sexual transmission of HIV. They will also learn about VMMC services, HIV/AIDS, and other ways they can take care of their health.
- Taking care of one's health is important because good health allows people to achieve their dreams, satisfy their needs, and live a "long, productive, and fruitful life." ¹

Counseling/Communication Objectives

As a result of this counseling session, adolescent clients will:

- Increase their knowledge about VMMC and related topics, including:
 - Facts and benefits of VMMC
 - The VMMC service package
 - Wound care, healing, possible side effects, and prevention of tetanus
 - HIV/AIDS transmission and risk reduction
 - HIV testing services (HTS)
 - Correct, consistent condom use
- Be motivated and ready for more detailed discussion during individual counseling and HTS.
- Have received or been offered a condom demonstration.

Content to Be Delivered During the Session

Basic Facts about VMMC

What Is VMMC?

- VMMC is the removal of the foreskin of the penis by a trained doctor or nurse. The inner layer of the foreskin contains cells near the surface through which HIV can enter the body. The remaining skin is less likely to tear and more difficult for HIV to penetrate
- "Voluntary" means the client may accept or decline to undergo circumcision. It is their decision!
- VMMC is different from traditional circumcision.
 Traditional circumcision does NOT provide the same protection against HIV as VMMC. In some countries, traditional circumcision means removal of part of the foreskin. VMMC removes all of the foreskin.

Use a model or graphic to show what the foreskin is.

You may wish to define the term "cell."

Be respectful of traditional practices. Confirm that it is acceptable locally to talk about what happens during traditional circumcision. Discuss further details only if it is respectful and permissible.

¹ Centers for Disease Control and Prevention (2018) Health-Related Quality of Life: Well-Being Concepts. https://www.cdc.gov/hrqol/wellbeing.htm

Key Terms and Concepts Related to VMMC

- **Sexual intercourse** is when a man inserts his penis into his partner's vagina or anus. It can also refer to oral intercourse.² Oral intercourse is when one partner puts their mouth or tongue on their partner's penis or vagina.
- Sexually transmitted infections (STIs), such as gonorrhea, syphilis, chlamydia, and herpes, are spread from person to person during sex (vaginal, oral, or anal) or close intimate contact. Common symptoms of STIs include discharge from the penis or vagina, a burning sensation in the penis, sores on or around the genitals, and abdominal pain.³
- **Masturbation** is when people touch their own bodies for sexual pleasure. For boys and men, this may involve stroking or rubbing the penis when it is erect. Masturbation may result in ejaculation/orgasm, but not always.

Benefits of VMMC

- Circumcised men are at lower risk of acquiring HIV and other STIs.
- Circumcised men are at lower risk of urinary tract infections and cancer of the penis.
- Circumcised men may find it easier to maintain cleanliness of the penis and improve hygiene.

You may wish to explain/define the urinary tract, urinary tract infections, and cancer of the penis.

VMMC Cautions and Risks

- VMMC only partially reduces the risk of acquiring HIV through sexual intercourse, so condoms must be used correctly and consistently to avoid HIV transmission after VMMC.
- Complications from VMMC are rare, but can be serious if ignored or improperly treated.
- Risks (also called "adverse events") include infections such as tetanus, a serious bacterial
 infection that can affect the brain and nervous system and can lead to severe muscle spasms,
 serious breathing difficulties, and death.

² Sex etc. (n.d.) Sex Terms. Answer and Rutgers University. <a href="https://sexetc.org/sex-ed/sex-terms/?pageNum=10&topic%5B%5D=sex-terms-sex&alphabet="https://sexetc.org/sex-ed/sex-terms-sex&alphabet="https://sexetc.org/sex-ed/sex-terms-sex&alphabet="https://sexetc.org/sex-ed/sex-terms-sex&alphabet="https://sexetc.org/sex-ed/sex-terms-sex&alphabet="https://sexetc.org/sex-ed/sex-terms-sex-t

³ World Health Organization (WHO) (2019) Sexually transmitted infections (STIs). WHO fact sheet (June 14). http://www.who.int/news-room/fact-sheets/detail/sexually-transmitted-infections-(stis)

The VMMC Process: Eight Steps

- 1. **Registration and waiting:** Clinic staff collect the client's information and a consent form, signed by the client (if over the age of majority) or his parents or guardians.
- Group general education: This counseling session, where clients receive general information about VMMC and HIV/AIDS.
- Individual counseling and HIV testing: A private session where the client can ask questions and is offered voluntary HIV testing.

Remind participants that they should feel free to ask questions at any time about VMMC or other topics important for maintaining good health. Tell them not to be shy. You are there to answer their questions.

- 4. **Post-HIV test counseling:** If the client chooses to be tested for HIV, the counselor meets with him (and his parents or guardians if he is under the age of majority) to discuss the results.
- 5. Clinical screening: Clinic staff make sure the client is in good health for VMMC.
- 6. **VMMC procedure:** A doctor or nurse performs the procedure.
- 7. **Immediate postoperative care:** Clinic staff check that the circumcision went well and give the client information on how to take care of the wound and painkillers to manage any pain.
- 8. Postoperative follow-up care and counseling: The wound is checked to ensure proper healing.

Follow-Up Care and the Healing Period

After circumcision, the doctor or nurse will provide:

- Pain medication to take home
- Instructions on wound care and when to come back for the two follow-up appointments (two and seven days following the procedure)
 - Follow-up visits are critical to ensure proper wound care and healing!

Important care and healing tips include:

- Abstain from masturbation and sexual intercourse for six weeks after the VMMC procedure.
- Do NOT put any herbs, cow dung, or any other substances on the wound. It should be kept dry!
- Following these instructions for wound care will help avoid infections such as tetanus, a serious bacterial infection that affects the brain and nervous system and can lead to severe muscle spasms, serious breathing difficulties, and death.

Basic Facts about HIV/AIDS

Overview of HIV and AIDS

- HIV is the human immunodeficiency virus. It can enter the body in various ways, and is the virus that causes AIDS (acquired immune deficiency syndrome).
- Both HIV and AIDS affect the immune system. The immune system helps the body fight germs that cause diseases.
- When a person is living with HIV, the immune system becomes weaker over time, making it harder for the body to fight off certain types of diseases.
- AIDS develops after someone has lived with the HIV virus in their body, usually for many years. AIDS severely weakens the immune system, leading to serious infections and health problems.
- Medicines called "anti-retroviral" drugs or "ARVs" can help prevent HIV from developing into AIDS.
- People living with HIV can live long, healthy lives by taking ARVs and getting regular checkups with a doctor, nurse, or other health care provider.
- People living with HIV should start on ARVs as soon as possible to prevent the virus from spreading through the body and weakening the immune system.
- A person living with HIV can be and look healthy but still transmit HIV to others.

HIV is transmitted through:

- Unprotected sex or sex without a condom with an HIVpositive person
- Blood (contaminated injection equipment, open sores/wounds on or around the penis/genitals, infected blood transfusions)
- From a pregnant woman living with HIV to her baby in her womb, during delivery, or through her breast milk

HIV cannot be transmitted through:4

- Shaking hands or hugging
- Air or water
- Saliva, tears, or closed-mouth kissing
- Insects (including mosquitoes) or pets
- Sharing toilets, food, or drinks

You may wish to show adolescent clients a condom to confirm they know what one is.

You may wish to discuss the four bodily fluids through which HIV is transmitted: blood, semen, breastmilk, vaginal fluids.

⁴ Centers for Disease Control and Prevention (2019) HIV: HIV Basics: HIV Transmission. https://www.cdc.gov/hiv/basics/transmission.html

Known Risk Factors for HIV

- Having sex without a condom with a person living with HIV (whether or not the person's HIV status is known)
- Having more than one sexual partner
- Sharing syringes, needles, or other sharp objects; or injecting drugs with used/unclean needles contaminated with HIV
- Presence of other STIs, which makes it easier to become infected with HIV
- NOT being circumcised (for men). Remember: VMMC provides partial protection against HIV

How to Prevent HIV

- Use condoms correctly and consistently when having sex. Condom use can also help prevent unplanned pregnancies.
- Avoid having many sexual partners at the same time.
- Avoid sharing syringes, needles, or other sharp objects that could be contaminated with HIV.

Voluntary HIV Testing

- HIV testing is important because a person could be HIV-positive and not know it if they have not been tested for HIV recently and have been exposed to the HIV virus.
- After the group counseling session, participants will be offered a voluntary HIV test. Voluntary means they are free to choose to get tested or not.
- The test is also **confidential**. Everything you discuss with the counselor will be kept private between you and the counselor.

Condom Demonstration

Before ending the session, discuss relevant information about sex and offer to give a condom demonstration:

- The condom demonstration is NOT meant to encourage adolescents to start having sex at an early age. Rather, it is intended to build participants' awareness and skills so that when they are ready to have sex they know how to use a condom and understand why it is important.
- The demonstration is **optional**. Anyone that does not want to see the demonstration can step outside to the waiting area.
- Confirm: Can I proceed with the discussion and condom demonstration?

Before the condom demonstration, discuss what it means to "have sex":

 Sex, sexual activity, and physical affection include many behaviors, from hugging, kissing, and touching the genitals (your private parts), to sexual intercourse. As discussed earlier, examples of sexual activity include vaginal, anal, and oral sex.

- Reasons people have sex include:
 - To feel closer to or express love for their partner
 - To have children
 - Because they like how it feels
 - To feel more grown up
 - For things they need to survive—money, food, etc.
 - For gifts
 - Because someone is forcing/pressuring them to have sex (this is a violation of their human rights)
- Sex is a normal part of life. Yet, if sex is a normal part of life, why do adults warn young people NOT to have sex until they are ready?
- Conduct a condom demonstration for interested participants.

Allow participants to brainstorm answers. If they do not mention the following reasons for waiting to have sex, bring them up to the group:

- You can get someone pregnant
- You can get HIV and other STIs (participants might merely say diseases—that's OK)
- To help them avoid emotional heartache
- Because waiting until marriage is part of my personal/community's/family's beliefs
- Because they do not think we are ready

Strengthening Counseling for Adolescents at VMMC Services: Individual Counseling Session Cue Card

Counseling/Communication Objectives

As a result of this counseling session, adolescent clients will:

- Understand that both voluntary medical male circumcision (VMMC) and HIV testing services (HTS) are voluntary and confidential
- Have the opportunity to discuss whether they are sexually experienced or not (if they want to)
- Provide written, informed consent for VMMC and HTS
- Feel free to ask detailed questions about HIV transmission, risk reduction, VMMC, and HTS
- Understand basic post-VMMC care, importance of abstinence from masturbation/sexual intercourse, and strategies to comply with abstinence
- Understand the consequences of not abstaining
- Know some risk-reduction strategies if the client feels abstinence is not possible
- Receive a condom demonstration
- Be referred to other services as needed
- Feel welcome to return to the clinic if they decline VMMC and/or HTS or for any other reason

Note: When parents/caregivers are present, ask them to wait outside and allow you (the counselor) to have an individual discussion with the adolescent client. Invite parents in the room after asking permission from the adolescent and following country requirements for the legal age of majority for HIV testing.

Content to Be Delivered During the Session Brief Screening for Consent/Assent and Sexual Activity

Explain:

- VMMC is voluntary and requires written consent (of parents/guardians for clients who are under the legal age of majority) AND your indication that you want to go through with the VMMC procedure.
- Everything we discuss is confidential. I will not tell anyone
 what we discuss today without your permission. It is my
 professional duty to keep our conversation confidential.

Ask participant for assent and ensure the consent form is appropriately signed, if one is needed per local regulations.

• I am a professional counselor and the information we will discuss is to help you take care of your health. Please do not feel embarrassed or shy. Feel free to ask questions. I am here to help. Also, if there is a question you do not want to answer please say so and we will move on.

Review the information given during the group counseling session about sex and masturbation:

- Sexual intercourse can be defined as:
 - When a man puts his penis into a woman's vagina.
 - When a man puts his penis into his partner's mouth or tongue into a woman's vagina (oral intercourse).

Ask:

- Do you have any questions about what you learned?
- Now I am going to ask you a personal question to guide our conversation. Have you ever had sex? Are you having sex now?

Information on VMMC

For ALL adolescent males, explain:

- VMMC involves removal of the foreskin to reduce males' risk of acquiring HIV. The foreskin is the fold of skin that covers the head (the glans) of the penis.¹
- VMMC only partially reduces the risk of female-to-male HIV transmission.
- After the procedure, be sure to use clean water when cleaning/caring for the wound.
- Do NOT use home remedies (herbs, ash, animal dung), which can increase the risk of infection including tetanus.
- It is important to abstain from sexual intercourse and/or masturbation for six weeks after VMMC to ensure full healing.
 - **Masturbation** is when people touch their own bodies for sexual pleasure. This may involve stroking or caressing the penis when it is erect. Masturbation may result in orgasm/ejaculation, but not necessarily.
- Clients who have not had sexual intercourse before VMMC should not start during the six weeks
 after VMMC because it will interfere with proper healing and put them at higher risk of acquiring
 HIV.

For those who are sexually experienced/active, add:

- It is important to abstain from sexual intercourse for six weeks after VMMC as it interferes with healing. In addition, resuming sex before healing from VMMC is complete can increase the risk of acquiring HIV from a partner who is HIV-positive.
 - Because VMMC provides only partial protection against HIV, when resuming sex, be sure to
 use condoms correctly and consistently to avoid HIV and sexually transmitted infections
 (STIs)!
- In the group session, you learned strategies for abstaining. Do you have any questions? Will you be able to abstain?

For those who indicate they will NOT be able to abstain, add:

- Masturbation poses less risk than sexual intercourse, but it may increase healing time.
- There are other ways to express physical intimacy that do not involve intercourse.

Provide condoms to the client before discharge.

¹ Shiel, W.C. (n.d.) Medical Definition of Foreskin. MedicineNet, https://www.medicinenet.com/script/main/art.asp?articlekey=3508

• If you do go against the recommendation and have sexual intercourse in the six-week healing period, you must use a condom. This is important because during those six weeks you will have a wound on your penis that will make it easier to acquire HIV through sexual intercourse.

HIV Testing

For ALL adolescent males, explain:

- HTS is optional. It is not required for VMMC, but it is highly advisable to know your HIV status.
- Would you like to proceed with an HIV test?

For those who are sexually experienced/active, explain:

- Benefits to knowing one's status include:
 - If **negative**, one can put in place strategies to stay negative.
 - If **positive**, one can start treatment immediately to stay healthy.

For clients who test positive for HIV, explain:

- It is important to be linked to HIV treatment to stop the virus from spreading in the body. When people living with HIV have little virus in their bodies, they are less likely to transmit HIV to others and they can live healthy lives.
- It is important to use condoms with sexual partners and/or to support partners to access preexposure prophylaxis (PrEP), a medicine to prevent HIV.²
- Clients who test positive can move forward with VMMC if the clinician agrees.
- Resuming sex before healing from VMMC is complete can result in much higher risk of infecting one's partner(s).

HIV/Sexually Transmitted Infection Pre-Test Counseling

Follow national HTS guidelines for pre-HIV test counseling and for obtaining consent for VMMC:

- Clients who choose to test for HIV and are under the age of consent have obtained written parental/guardian consent as per government policy.
- A parent or guardian can be invited to join the session if the adolescent agrees and following country rules on the legal age of majority for HIV testing.

For ALL adolescent males, explain:

- HIV test results are confidential. This means the test results will not be shared with others, following country policies.
- It is up to the client to share his results. Clinic staff can assist if the client would like.
- The HIV test will be done by _____ (type of test).

Indicate type of test to be administered (ELISA, Rapid, etc.) and explain how the test will be administered.

To ensure that you receive the

appropriate consent for those

guidelines. If the client declines to test, refer to "If the Client

under the age of testing consent, follow national

Declines to Get Tested."

Using age-appropriate language and building on information provided in the group counseling session cue card, check to ensure the client understands:

Modes of HIV infection

² World Health Organization. HIV/AIDS: Pre-Exposure Prophylaxis, https://www.who.int/hiv/topics/prep/en/

- Individual risk factors (tailored to each adolescent)
- HIV risk reduction strategies (VMMC, condoms, etc.)

For clients who are sexually experienced/active, add:

- Clients are encouraged to share their test results with their sexual partner(s).
- Clients' sexual partner(s) should also get tested for HIV. Clients are encouraged to talk to their partner(s) about getting tested.
- If the client chooses to test again in the future, it is recommended that he tests **together with his partner**.

While Waiting for Test Results (in the case of a rapid test)

- Make sure the adolescent client is comfortable while waiting for his HIV test result. Talk to him to try to allay any fears related to the HIV test.
- Tell him that you (or another provider) will counsel him about his test result as soon as it is ready. This should take approximately 15 minutes.
- Reassure him that the result will be discussed confidentially and will take place in a private setting where no one else can hear or see.
- If the client is under the age of majority, tell him he may be required to bring his parent/guardian to the clinic to discuss his HIV test result (if the parent/guardian is not there already).
- Ask him if there is any topic he would like to discuss while waiting for his test result. Indicate
 that you can discuss family planning, masculinity/gender-based violence, and alcohol/substance
 use/abuse. If he expresses an interest, refer to the day two and day seven cue cards for
 additional information on these topics.
- Tell the client that you will refer him to appropriate services for further help and support after you discuss the test result. Tell him that there are several options for referrals to other services or providers.

Local services may include STI diagnosis and treatment; contraception/family planning; self-testing; treatment, care, and support for those who have tested HIV-positive; HIV prevention; gender-based violence prevention and reduction; entrepreneurship; legal services; HIV testing and counseling; sexual and reproductive health counseling; prevention of school drop-out; and disability rehabilitation.

- Refer the client to services (using the local referral directory) as available and appropriate, following local referral procedures.
- Provide the client with any available written material to review while he is waiting for his test result.

If the Client Declines to Get Tested

- Tell the client you respect his decision to not get tested.
 Encourage him to seek HIV testing in the future. Remind him of the benefits of getting tested for HIV:
 - If the result is **negative**, he can put strategies in place to stay negative.

Consider requesting an HIV test when the client comes for his follow-up visits. Tell him the decision is his.

- If the result is **positive**, he can start treatment immediately to stay healthy and avoid transmitting HIV to his partner(s).
- Suggest other locations that offer HIV testing (refer to the local services directory).
- Explain that one option to ensure confidentiality is self-testing. Self-testing entails conducting the test on one's own, following directions from a testing counselor. Ask if he is interested in self-testing. If yes, provide a referral.
- Provide the same information that is given to clients who are waiting for their test results (see above), including written information and referrals to relevant or requested services.

Clients with an STI

- Explain that having an STI puts him at high risk of transmitting and acquiring HIV.
- Reassure him that STIs are common and all STIs are treatable. Often STIs have no symptoms, so people do not even know they have them.
- Tell him he will greatly benefit from the protection that VMMC provides.
- Explain that he is not eligible for VMMC today but should return on (*date*) for review after STI treatment and can then reschedule VMMC.
- Tell him that someone will follow up with him to schedule him for another appointment.
- Encourage him to bring his partner(s) for HIV testing and/or STI diagnosis and treatment services or refer him to STI services using the local referral directory.

If peer referrals are a part of the VMMC program, encourage the adolescent male clients to invite their friends along when they return.

See the relevant cue card for guidance on post-HIV test counseling at VMMC services.

Strengthening Counseling for Adolescents at VMMC Services: Post-HIV Test Counseling Cue Card

Counseling/Communication Objectives

As a result of this counseling session, adolescent clients will:

- Understand their HIV test results
- Feel supported emotionally as they process their test results
- If the result is negative, understand the next steps they can take to protect themselves from HIV infection
- If the result is positive, understand where they can go for care, support, and treatment¹

Note: Follow national HIV testing services (HTS) guidelines.

Content to Be Delivered During the Session

Adolescent Clients Who Test Negative for HIV

For adolescents who disclose not being sexually active, explain:

- An HIV-negative result means that you are not living with HIV.
- It is important to take steps to avoid being exposed to HIV:
 - Can you tell me one way to avoid getting HIV?
 - Do you have any questions about this?
- Remember: Abstaining or using condoms correctly and consistently are two effective ways to avoid getting HIV.
- Remember: Voluntary medical male circumcision (VMMC) is only partially protective against HIV. To be fully protected when you decide to become sexually active, you must use condoms during penetrative sex. Condoms also reduce the chances of contracting or transmitting other sexually transmitted infections (STIs) and can help prevent unintended pregnancies.

Encourage the adolescent to invite his parent(s)/guardian or friend to be present during counseling for support, if he would like.

For adolescents who disclose being sexually active, add:

 Do you think you have been exposed to HIV recently? If so, can you tell me how you think you could have been exposed to HIV?

¹ World Health Organization (WHO) (2014) Adolescent HIV Testing, Counseling and Care: Implementation Guidance for health providers and planners. http://apps.who.int/adolescent/hiv-testing-treatment/page/Linkage to prevention treatment and care

For adolescents who disclose being sexually active and engaging in high-risk behaviors (such as transactional sex, sex with many partners, sex with partners who are living with HIV, or other high-risk sex), add:

Remember to use condoms correctly and consistently.

 Consider accessing pre-exposure prophylaxis (PrEP), if it is available locally. PrEP is a pill that, if taken every day, can significantly reduce the chances of acquiring HIV, even if a person engages in risk behaviors. PrEP is not a substitute for condoms, as it does not protect against STIs. Counselors should NOT pass judgement on any client, regardless of risk behaviors or any other factors.

If the client is interested, refer him to services where he can obtain PrEP.

- Note that your sexual partner(s) may also be eligible for PrEP. Please tell your partner about PrEP and where to get it.
- As we discussed in earlier sessions, it is critical to abstain from sex for six weeks after VMMC. If this is not possible, you must use condoms correctly and consistently when having sex.

Adolescent Clients Who Test Positive for HIV

Be sure to convey results in a compassionate, respectful way. Acknowledge the client's emotions, show empathy, and encourage the client to take positive action where possible. **If country HIV testing guidelines require it**, ensure a parent or caregiver is present to discuss the results for clients under the legal age of majority (see below).

All Adolescents Who Test Positive for HIV

Explain:

- The HIV test shows that you tested positive for HIV.
- The test results must be confirmed with another HIV test to check that they are correct. (Explain the steps for the second test and when the results will be available.)
- HIV cannot be cured but it can be successfully treated. Treatment stops the spread of HIV in the body so a person living with HIV does not get very sick. Also, when people living with HIV have little virus in their bodies, they are less likely to transmit HIV to others.
- People living with HIV who take their treatment as instructed can live long, healthy, normal lives.
 It is very important to access HIV care and treatment services as soon as possible. At the end of our conversation, I will help you to access treatment. (*Provide active linkage to care*.)
- It is very important to start treatment immediately after testing positive. The sooner you start taking your medicines, the better your health in the long-term.
- I am here to support you and answer any questions. (Pause to let the client process the results.)
- How do you feel? (Acknowledge the client's feelings as a normal reaction to receiving news of a
 positive test result. Remind the client that HIV is a treatable condition like others, such as high
 sugar level in the blood (diabetes).)

• Do you have any questions for me? (Some questions the client may ask and answers are listed in the table below.)

Question	Answer
Q: Will I die? Is there a cure for my illness?	A: As I mentioned before, there is medication you can take that can help you live a long and healthy life.
Q: Is it possible the test is wrong?	A: Yes, sometimes an HIV test result is a "false positive." That is why we conduct a confirmatory test. I can help you arrange for this. We will need written permission from your parents/caregivers to allow you to test again (if under the age of consent).
Q: How could I be HIV-positive if I have never had sex? What could be the source of my infection?	A: You may have been infected at or around birth. Or, if you recently had a blood transfusion, you may have been infected by the blood transfusion.
Q: Should I tell my parents?	A: Yes, it is important to have a discussion about this with your parent(s)/guardian(s). They can support to you to take your medication and stay healthy.
Q: How long will I have to take medication?	A: You will need to take the medication every day to stay well and to keep HIV from affecting your health. Nowadays, the medication is contained in just one pill (if this is the case).
Q: Can I infect other people?	A: You can infect others, primarily through sex. If you abstain, you will have nothing to worry about. If you are sexually active, you can protect your partner(s) by using a condom correctly every time you have sex. Also, there is the possibility of transmitting HIV by blood, through sharp objects (for example, razors, piercing tools, tools for scarification, etc.). However, you will not transmit HIV to others if you do not share these.
Q: Will I be able to continue/finish school? What about work?	A: Yes, as long as you take your medications correctly and consistently, you can remain healthy, attend school or work, lead a successful life, and fulfill your dreams.
Q: Could I hope to have a family some day?	A: You certainly can. If your partner is HIV-negative, you can help her stay that way by using condoms correctly and consistently. If she is HIV-positive, there is effective medication that can help her give birth to a healthy, HIV-negative baby.
Q: Will I have to keep my status to myself?	A: No, you do not need to be alone with your HIV status. There are support groups of other young people living with HIV where you can get important support (if this is true locally). Talking to the right people can help you find peace of mind, stop worrying, and learn to keep yourself physically healthy, including by adhering to your medication.
Q: Where can I go now? Are there services that will help me live with this disease?	A: We will provide you an active referral to treatment services to help you access treatment immediately.

- I want to make sure what we have discussed is clear, including the importance of accessing treatment. Do you have any questions about this?
- Is there anything that you have heard about HIV or living with HIV that is not clear?

- Common misconceptions include:
 - **Misconception:** An HIV-positive person can pass HIV to others by touching them, being around them, or playing sports with them.
 - **Correction:** HIV CANNOT be transmitted through sweat, tears, or feces; by touching (such as by shaking hands, contact during sports, etc.); by sharing food or drinking water; or through cooking utensils, toilet seats, bath towels, or bath water. HIV is transmitted through blood, semen, breast milk, or in the womb and through delivery. You can put others at ease by explaining these basic facts to them and referring them to printed materials and other sources of good information.
 - Misconception: People can tell that a person is HIV-positive just by looking at him/her.
 - **Correction:** No, you CANNOT tell that a person is HIV-positive just by looking at him/her. The only way to tell is to take an HIV test.
 - Misconception: People living with HIV will probably die soon.
 - **Correction:** Many people living with HIV are living long, healthy, and productive lives by taking their medication consistently and getting other emotional and physical support.
- Benefits of telling your HIV status to a person you trust include:
 - Talking to the right people can help you find peace of mind so you can stop worrying and reduce stress. Reducing stress can help you stay healthier.
 - Others can give you support and help you stay physically healthy, including by helping to ensure you take your medication correctly and consistently.
 - Support from others can help you stay emotionally healthy so you can deal with the emotional challenges you may face living with HIV.
- Although there are more benefits than risks to disclosing one's HIV status, there are also some
 risks worth considering when thinking about telling somebody else your status. Risks include:
 - Stigma and discrimination: Some people hold stigmatizing attitudes and may choose to discriminate or treat people living with HIV unfairly. This is often due to ignorance of how HIV is and is not transmitted. Consider whether the person you are thinking of disclosing to is open to discussing these points, or are their attitudes so fixed that it would be better to wait or not disclose to them at all?
 - **Exclusion:** Some people may refuse to associate with people living with HIV or exclude them from certain activities. This could be due to fear and ignorance about how HIV is/is not transmitted. Consider whether the person you are considering would be open to discussing how HIV is/is not transmitted.
 - **Violence or physical abuse:** Trust is the key issue when considering to whom to disclose your HIV status. Some people could become so emotional or irrational that they could physically hurt or abuse a person living with HIV. Carefully consider how much you trust a person to whom you might disclose to not violate or abuse you physically.
- Is there anybody close to you to whom you would consider telling your HIV status?
 - If so, are you comfortable telling that person your status?
 - Do you have any questions about how to do it?
 - Do you want us to help with telling this person your HIV status?

You may provide different types of HTS referrals depending on client preferences:

- Passive referral: Index client is encouraged to disclose to their sexual partner(s) that they have been exposed to HIV and refer them to HTS.
- **Contact referral:** Index patient is allowed a period of time to notify and refer sexual partners to HTS. If a partner does not report within a certain time, a health care provider contacts the partner.
- **Provider referral:** A health care provider contacts the clients' sexual partners concerning their exposure and directs them to HTS.
- **Dual referral:** A health care provider accompanies and provides support to the index client when they disclose their status and the potential exposure to partners.
- In addition to telling another person(s) your HIV status, consider encouraging your partner and/or family members (as appropriate) to take an HIV test.
- You may still undergo VMMC, but the procedure will not reduce HIV transmission risk to partners.
- HIV-positive men are at higher risk of transmitting HIV during the VMMC healing period. So, it is
 critical to abstain from sex for six weeks. If this is not possible, you must use condoms correctly
 and consistently when having sex.

Clients Who Are Sexually Active

Explain:

- Since you have tested positive, it is very important that your partner gets tested. (*Follow steps for index testing.*)
- Since you have tested positive, your partner may be eligible for PrEP. (*Provide information on where the partner can access PrEP*.)
- After the healing period and always, it is important to use condoms correctly and consistently to
 prevent onward transmission. Also note that if your viral load is very low, transmission risk is
 minimal. You can still have safe sexual relationships. More information on onward transmission
 of HIV will be provided at the center where you go for treatment. Wound care will be especially
 important to protecting against onward transmission of HIV.

Clients Who Are Not Sexually Active

Explain:

- Although you are not sexually active now, you should keep in mind that if/when you begin to
 have sex, you must always use condoms correctly and consistently to prevent onward
 transmission of HIV. Keeping your viral load low by taking your medicine consistently will also
 help you to keep HIV transmission risk to a minimum. You can always get more information
 about these topics at the center where you will get your medicines/treatment.
- Steps for active linkage to care. (Ensure that these steps are clear to the client.)
- Do you have any further questions about HIV and VMMC?

Adolescent Clients Under the Legal Age of Majority Whose Parents/Guardians Are Present

- Confirm against national guidelines if a parent or legal guardian must be present when disclosing HIV test results to an adolescent under the legal age of majority.
- Decisions should be guided by the principle of what is in the best interest of the adolescent.
- You may need to make certain ethical decisions on a case-by-case basis. These should be
 made in consultation with the adolescent AND the parent/guardian, and could include the
 right of the adolescent to know his HIV status versus the parent's right to decide (principle of
 autonomy).
- In discussion, acknowledge the parent's/guardian's right to decide and state that you believe they will act in the best interest of the adolescent.
- Ask if the parent/guardian would agree to disclosure of the adolescent's HIV test results to the adolescent at this time.
- If the parent/guardian agrees, follow the points under "All Adolescent Clients Who Test Positive for HIV" to explain to the adolescent and his parents/guardians that he has tested positive for HIV.
 - Say that if a confirmatory test also returns an HIV-positive result, it may imply that his
 parent(s)/guardian(s) are also be HIV-positive, but this needs to be confirmed through a
 reputable test.
 - If this is the case, open and honest discussions about the client's and his parents'/guardians'
 HIV status can have many benefits, including peace of mind and better emotional health
 gained through mutual support and communication among family members, and better
 physical health through mutual support to take treatment medications correctly and
 consistently.
- If the parent/guardian does not agree to disclose to the adolescent, consider the following:
 - Ask the parent/guardian to consider whether there would be benefits to the adolescent from disclosure of his HIV status (principle of beneficence).² These could include medical, psychological, or material benefits.
 - Ask the parent/guardian if they believe that disclosure to the adolescent might cause some financial, social, or psychological/emotional harm or burden to the adolescent or his family that he should be protected from (principle of protection from malfeasance). Could the adolescent cause harm to the family later by disclosing his status?
 - Discuss any of these issues with the parent/guardian to see if they can be resolved to allow disclosure to the adolescent.
- Offer an HIV test to parent(s) and their biological children.

If parents are not present and a minor tests positive for HIV, follow national HTS guidelines on disclosure to minors.

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² Klitzman, R. et. al. (2009), Ethical Issues Concerning Disclosures of HIV Diagnoses to Perinatally Infected Children and Adolescents. *Journal of Clinical Ethics* 19(1):31–42. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2770331/

Adolescents Under the Legal Age of Majority Whose Parents/Guardians Are Not Present

- Tell the client that, according to national guidelines, the parent(s)/guardian(s) of an adolescent under age 18 must come to discuss his HIV test results together.
- Ask the adolescent to bring his parents.
- Speak to the adolescent's parents/guardians. Counsel the adolescent referring to the points guiding disclosure.
- Offer an HIV test to the client's parent(s) and their biological children.

Strengthening Counseling for Adolescents at VMMC Services: Immediate Postoperative Counseling Cue Card

Counseling/Communication Objectives

As a result of this counseling session, adolescent clients will understand:

- How to care for the wound
- That applying home remedies (ash, dung, etc.) or remedies NOT prescribed by voluntary medical male circumcision (VMMC) providers can cause infections
- Symptoms of adverse events
- The importance of contacting and knowing how to contact VMMC staff in case of emergency
- Their ability to comply with the prescribed follow-up schedule (i.e., transport to the VMMC clinic or other clinic near their residence and that next steps align with their school and work schedules as well as family commitments)
- The importance of abstaining from masturbation
- If sexually active, the importance of abstaining from sexual intercourse during the healing period and ways to improve compliance with abstinence recommendations to reduce the risk of HIV transmission and facilitate proper healing

Content to Be Delivered During the Session

Wound Care

Explain:

- Keep the wound clean, using clean water and mild soap to wash the penis at least two times each day.
- Keep the penis bandaged and pointing upward for 24–48 hours.
- Do NOT pull or scratch the wound during healing.
- Return to school after two days and may resume sports and/or other school-related activities after five days.
- Avoid hard, physical work for the first five days after surgery (e.g., lifting heavy objects, riding/pushing a bicycle, digging, or working at a construction site).
- Heavy, physical work can disrupt healing and lead to bleeding.
- Do NOT apply home remedies (herbs, ash, dung) not prescribed by a doctor. These can cause tetanus, which may be life threatening.
- Clients may have spontaneous erections. These may be uncomfortable but should not be cause for concern. Urinating at the first urge may reduce frequency of erections.
- Take pain medications as prescribed!
- Come back for follow-up visits two and seven days following the procedure (in accordance with national standards/guidelines).
- The provider will remove the dressing at the clinic on day two.

Adverse Events

Explain:

- Complications from VMMC are rare, but they can be serious if ignored or improperly treated.
- If the client experiences any warning signs, he should contact clinic staff immediately at (emergency #______).
- Warning signs of adverse events include:
 - Continued bleeding that does not stop or gets worse
 - Swelling or tenderness around the wound (worse than you have now)
 - Increased pain that does not improve with medication
 - Fever (Do you have a thermometer or can your parent/guardian determine if you have a fever?)
 - Swelling or tenderness in the groin
 - · Pus coming from the wound
 - Difficulty passing urine/peeing
 - Hardness or stiffness in the lower abdomen (show them where this is)
 - Stiffness of the jaw, chest, and/or back, fits and/or convulsions

Abstinence/Risk Reduction During the Healing Period

Consider whether any of the following (e.g., masturbation) should be discussed with sexually inactive adolescent males.

- All adolescents should abstain from masturbation and sexual intercourse for six weeks after VMMC.
 - For adolescents who are HIV-negative, penetrative sex (vaginal, anal, oral) during the six-week healing period greatly increases their risk of acquiring HIV.

Make sure that the adolescent understands what sexual intercourse is.

- For adolescents who are HIV-positive, penetrative sex (vaginal, anal, oral) during the six-week healing period greatly increases their risk of transmitting HIV to their sexual partner(s).
- For adolescents who indicate they will not be able to abstain, explain:
 - Masturbation poses less risk than sexual intercourse, although it may result in wounds taking longer to heal.
 - There are other ways to express physical intimacy that do not involve intercourse.
 - If you do go against the recommendation and have sexual intercourse during the six-week healing period, you must us a condom. This is very important because in the six weeks after VMMC you will have a wound on your penis, making it easier to acquire HIV or transmit HIV to your partner(s) during sex.
- The client should talk to their partner(s) before or after VMMC about the six-week abstinence period and clarify:
 - How his partner(s) can help him abstain while he heals for the next six weeks
 - How the client and partner(s) can agree on alternatives to sexual intercourse for the next six weeks

- Although some boys/men heal faster or slower than six weeks, the safest option is to abstain from masturbation and sexual intercourse for the full six-week healing period.
- If the client believes that he has healed completely before the six-week healing period, he should return to be assessed for healing status and to discuss a possible return to masturbation or sexual intercourse.

Postoperative Follow-Up

During Discharge

- Thank the client for accessing VMMC services and congratulate him on taking care of his health.
- Provide the client with:
 - An appointment card that includes an emergency number and follow-up visit information
 - Written wound care instructions to take home
 - Condoms for safer sex and prevention of unintended pregnancy (if requested)
 - Referrals from the local referral directory or a referral sheet identifying other local adolescent-friendly services
- Remind the client to come for follow-up in two and seven days.
- Encourage him to bring his friends for VMMC.
- Ask the client if he has any questions or concerns and again, encourage him to call the emergency number if any questions or concerns arise.

Follow-Up Visits

- Explain to the client that he should return to this site (or another one recommended) for followup checks on days two and seven after VMMC (according to national protocol).
 - Follow-up visits allow providers to help with wound care, check progress, and address any lingering questions.
 - These visits are typically much shorter than the first visit.
- Ask the client if he thinks he can comply with these two recommended visits. Specifically:
 - Does he have affordable/accessible transport to return to the clinic twice?
 - Can he arrange school commitments to allow him to return for the two follow-up visits?
 - If he works, will his work schedule allow him to take the time off to return?
 - Will family commitments allow him to return for both follow-up visits?
- If complications prevent him from returning, help him devise a plan to overcome such challenges.

Adjust to match whatever communication materials are available.

Strengthening Counseling for Adolescents at VMMC Services: Follow-Up Visit Day Two Cue Card

Counseling/Communication Objectives

As a result of this counseling session, adolescent clients will understand:

- Effective wound care and pain management instructions (refer to the Immediate Postoperative Counseling Cue Card)
- Warning signs of adverse events/recommendations for contacting clinic staff if client suspects an adverse event (refer to the Immediate Postoperative Counseling Cue Card)
- The necessity of abstinence or risk reduction strategies during the healing period and ways to improve compliance with abstinence or mitigate elevated risk of transmission of sexually transmitted infections (STIs), including HIV
- Voluntary medical male circumcision (VMMC) provides only partial protection from HIV transmission
- The need for continued practice of other prevention methods, especially condom use, once the healing process is complete
- The follow-up visit schedule for day seven and importance of addressing challenges to making the day seven return visit
- Additional topics that the counselor deems relevant to the client, such as family planning, gender, including gender-based violence, and perceptions of masculinity
- The locations of facilities the adolescent may visit for support related to these additional topics

Content to Be Delivered During the Session

Physical Exam

Conduct a physical exam, including:

- Assess the status of wound healing and remove or replace dressing as indicated.
- Check and record client's temperature, blood pressure, pulse, and respiration rate.

Wound Care

Reinforce or restate key messages:

- Review wound care instructions provided during immediate postoperative counseling:
 - Keep the wound clean, using clean water and mild soap to wash the penis at least two times each day.
 - Do NOT pull or scratch the wound during healing.
 - Return to school after two days; resume sports when comfortable but not sooner than after five days.
 - Heavy, physical work can disrupt healing and lead to bleeding. Avoid hard, physical work for the first five days after surgery (lifting heavy objects, riding or pushing a bicycle, digging, working at a construction site, etc.).

- Do NOT apply home remedies (herbs, ash, dung) not prescribed by a doctor as they can
 cause tetanus. Tetanus is a serious bacterial infection that affects the brain and nervous
 system and can lead to severe muscle spasms, serious breathing difficulties, and death.¹
- Erections for no clear reason, although they may be uncomfortable, are not cause for concern. Urinating at the first urge may reduce frequency of erections.
- Take pain medications as prescribed.
- Come back for second follow-up visit on day seven.
- Provide additional wound care/pain management instructions as needed or requested.

Adverse Event Warning Signs

- Explain that complications from male circumcision are rare, but can be serious if ignored or improperly treated.
- Remind adolescent client of the warning signs of adverse events:
 - Continued bleeding that does not stop or gets worse
 - Swelling or tenderness around the wound (worse than you have now)
 - Increased pain that does not improve with medication
 - Fever (Do you have a thermometer or can your parent/guardian determine if you have a fever?)
 - Swelling or tenderness in the groin
 - Pus coming from the wound
 - Difficulty passing urine/peeing
 - Hardness or stiffness in the lower abdomen (show them where this is)
 - Stiffness of the jaw, chest, and/or back, fits and/or convulsions

•	If the client experiences any warning signs,	he should contact clinic staff immediately at
	(emergency phone #)

Abstinence and Risk Reduction During the Healing Period

- Remind the client of the importance of abstinence (from masturbation/sexual intercourse) during the healing period.
 - Masturbation is when people touch their own bodies for sexual pleasure, such as stroking or rubbing the penis when it is erect. Masturbation may result in orgasm/ejaculation, but not always.
 - Sexual intercourse typically means when a man inserts his penis into a woman's vagina. It can also refer to oral or anal intercourse.

See the *Group Counseling*Session Cue Card if needed to provide a more thorough explanation.

Ask the adolescent if he believes he can go along with abstinence recommendations.

¹ Felman, A. (2017) Everything You Need to Know about Tetanus. *Medical News Today*. https://www.medicalnewstoday.com/articles/163063.php

- If NOT, come up with a plan to improve his ability to abstain from masturbation and/or sexual intercourse to reduce the increased HIV risk. Plans may include:
 - Consistent and correct use of condoms
 - Other forms of sexual intimacy that do not involve penetrative sex.

Importance of Continued Use of Other Prevention Methods When Resuming Sex

- Emphasize the importance for sexually experienced/active adolescent clients to:
 - Remember that VMMC does not provide total protection from HIV.
 - Use condoms correctly and consistently to reduce risk of HIV, other sexually transmitted infections (STIs), and unintended pregnancy.
 - Reduce the number of sexual partners.
 - Know their HIV status. If they have not tested for HIV, consider doing so with their partner(s).
- Offer a condom demonstration, if you have not done so already.
- Provide written information about any of the topics discussed (if available).
- Provide referrals to additional services (as appropriate/available).
- Encourage the client to bring friends to VMMC if they are interested.

Additional Important Topics

• Assess and introduce as relevant the following topics: family planning,² understanding masculinity and other gender issues, and avoiding violence, including gender-based violence.

Family Planning

Explain:

- Unprotected sex (sex without a condom and/or other contraceptive method) can result in unintended pregnancy.
- Various contraceptive methods in addition to condoms are available. Each method has its particular benefits and challenges. I can refer you to a family planning specialist.
- Talk to your partner about choosing a family planning method that you both agree on. Family planning should be the responsibility of both partners.
- Some contraceptive methods, such as condoms, also protect against STIs. This is called "dual protection."
- Emergency contraception may be an option if the condom breaks or if another form of contraception was not used and there is the possibility of an unintended pregnancy. Emergency contraception is a pill taken orally by the female partner.

² American College of Obstetricians and Gynecologists (2017) Counseling adolescents on contraception. Committee Opinion 710, Committee on Adolescent Health Care. https://www.acog.org/Clinical-Guidance-and-Publications/Committee-Opinions/Committee-on-Adolescent-Health-Care/Counseling-Adolescents-About-Contraception

Gender/Gender-Based Violence

Explain:

- In all relationships, people may sometimes feel frustrated or angry, or disagree with each other. Using violence to try to solve problems is never acceptable. Such behavior can cause physical and mental harm to the victim.³ Violence is a violation of the victim's human rights.
- Gender-based violence, harassment, and abuse are behaviors that are offensive, threatening, and/or physically harmful to another person, especially women and girls.
- Sexual harassment can involve comments, gestures, actions, or attention intended to hurt, offend, or intimidate another person. This can include unwanted sexual advances and requests for sexual favors.
- Forcing or coercing a person to have sex is called rape. Rape is a serious crime. Victims of rape are legally entitled to the protection of the criminal justice system.⁴
- Sexual relations should always be consensual—that is, both partners should agree to having sex.
 It is important to respect your partner's wishes. In other words, either partner may say "no" at any time.
- Mutual respect means never using violence or power to dominate another person or make them do something they do not want to do.
- A "good man" never uses power or violence against another person.

Masculinity

Explain:

- One issue related to violence is what it means to "be a man" or what some people call "masculinity" or "manhood."
- Some people incorrectly associate "being a man" with being violent or engaging in violent behaviors such as yelling, hitting, and kicking others, including women.
 - This is NOT correct. Many men and leaders in the community, such as (*list names*), are not violent and are looked up to with respect.
- By understanding and challenging the idea of masculinity, men can expand their views, take better care of their health, and become better partners, fathers, and citizens.
- Is there a man you admire and look up to? Why do you admire him?
- What does it mean to you to be a "good man"?
 - Being a good man means seeking health care rather than not asking for help with health issues. Coming for VMMC is one way of being a good man.
 - Being a good man means not using violence to solve problems, especially against girls and women.
 - Being a good man means taking responsibility for practicing safer sex, discussing and adopting family planning with one's partner, and protecting oneself and one's partner from HIV/STIs.

³ International Planned Parenthood Federation (IPPF) (2017) *Deliver+Enable Toolkit: Scaling up Comprehensive Sexuality Education*. IPPF. https://www.ippf.org/resource/deliverenable-toolkit-scaling-comprehensive-sexuality-education-cse

⁴ Maternal and Newborn Survival Program (MCSP) (2016) Adolescent Age & Life-Stage Assessment and Counseling Tools. Washington, DC: MCSP. https://www.mcsprogram.org/resource/adolescent-age-life-stage-assessment-tools-counseling-cards-2/

- Being a good man means treating girls and women as equals and thus contributing to the full potential of one's relationship, family, and society.
- Being a good man means using condoms correctly and consistently, reducing the number of partners, and not equating sex with dominance and risk-taking, and thus reducing HIV/STI infection and transmission.

Strengthening Counseling for Adolescents at VMMC Services: Follow-Up Visit Day Seven Cue Card

Counseling/Communication Objectives

As a result of this counseling session, adolescent clients will understand:

- Effective continued wound care and pain management instructions (refer to the Immediate Postoperative Counseling Cue Card)
- Warning signs of adverse events/recommendations for contacting clinic staff if client suspects an adverse event (refer to the Immediate Postoperative Counseling Cue Card)
- The necessity of abstinence or risk reduction strategies during the healing period and ways to improve compliance with abstinence or mitigate elevated risk of transmission of HIV and other sexually transmitted infections (STIs)
- Voluntary medical male circumcision (VMMC) provides only partial protection from HIV transmission
- The need for continued practice of other prevention methods, especially condom use, once the healing process is complete
- The importance of returning to the clinic if there are any signs of adverse events, infection, or complications
- Additional topics that the counselor deems relevant to the client, including masculinity, gender-based violence, and alcohol and/or drug abuse/use
- The location of facilities the adolescent may visit for support related to these additional topics

Content to Be Delivered During the Session

Physical Exam

Conduct a physical exam, including:

- Assess the status of wound healing and remove (or replace) dressing as indicated.
- Check and record client's temperature, blood pressure, pulse, and respiration rate.

Wound Care

Reinforce or restate key messages:

- Review wound care instructions provided during counseling and at the day two visit as necessary.
- Keep the wound clean, using clean water and mild soap to wash the penis at least two times each day.
- Do NOT pull or scratch the wound during healing.
- Client should have returned to school and may have resumed sports and other activities. Make sure these activities have not delayed or interfered with healing and wound care.
- If the client works, ensure that any heavy, physical work has not disrupted healing and/or led to bleeding. If so, he must be advised to refrain from such activity.

- Do not apply home remedies (herbs, ash, dung) not prescribed by a doctor as these can cause tetanus. Tetanus is a serious bacterial infection that affects the brain and nervous system and can lead to severe muscle spasms, serious breathing difficulties, and death.¹ If the client does use alcohol or other substances that can impair their judgment, he should avoid driving a car, motorcycle, or bicycle while under their influence.²
- Erections for no clear reason, although possibly uncomfortable, are no cause for concern. Urinating at the first urge may reduce frequency of erections.
- Client should continue taking pain medications as prescribed.
- Provide additional wound care/pain management instructions as needed or requested.

Adverse Event Warning Signs

- Explain that complications from VMMC are rare, but can be serious if ignored or improperly treated.
- Remind the adolescent client of the warning signs of adverse events:
 - Continued bleeding that does not stop or gets worse
 - Swelling or tenderness around the wound (worse than you have now)
 - Increased pain that does not improve with medication
 - Fever (Do you have a thermometer or can your parent/guardian determine if you have a fever?)
 - Swelling or tenderness in the groin
 - · Pus coming from the wound
 - Difficulty passing urine/peeing
 - Hardness or stiffness in the lower abdomen (show them where this is)
 - Stiffness of the jaw, chest, and/or back, fits and/or convulsions
- If the client experiences any warning signs, he should contact clinic staff immediately at (emergency phone #______)

Abstinence and Risk Reduction During the Healing Period

- Remind the client of the importance of abstinence (from masturbation and sexual intercourse) during the healing period. Repeat definitions discussed during previous sessions, as needed:
 - Masturbation is when people touch their own bodies for sexual pleasure. For boys, this may involve stroking or rubbing the penis when it is erect. Masturbation may result in ejaculation/orgasm.
 - Sexual intercourse typically means when a man inserts his penis into a woman's vagina. It can also refer to oral or anal intercourse.

See the *Group Counseling*Session Cue Card if needed to provide a more thorough explanation.

 $\underline{\text{https://apps.who.int/iris/bitstream/handle/10665/44387/9789241599962_eng.pdf;} \underline{\text{jsessionid=B77D841906EC046270924C48}} \underline{\text{2513735D?sequence=1}}$

¹ Felman, A. (2017) Everything You Need to Know about Tetanus. *Medical News Today*. https://www.medicalnewstoday.com/articles/163063.php

² World Health Organization (WHO) (2010) *Adolescent Job Aid, A Handy Desk Reference Tool for Primary Level Health Workers*. Department of Child and Adolescent Health and Development, WHO.

- Ask the adolescent if he believes he can adhere to the abstinence recommendations.
- If NOT, come up with a plan to improve his ability to abstain from masturbation and/or sexual intercourse to reduce the increased HIV risk. Plans may include:
 - Consistent and correct use of condoms
 - Other forms of sexual intimacy that do not involve sexual intercourse/penetrative sex

Importance of Continued Use of Other Prevention Methods When Resuming Sex

- Emphasize the importance for sexually active adolescent clients to:
 - Remember that VMMC does not provide total protection from HIV.
 - Use condoms correctly and consistently to reduce the risk of HIV, other STIs, and unintended pregnancy.
 - Reduce the number of sexual partners (if they have multiple partners).
 - Know their HIV status. If they have not tested for HIV, consider doing so with their partner(s).
- Offer a condom demonstration, if you have not already given one.
- Provide written information about any of the topics discussed (if available).
- Provide referrals to additional services (as appropriate/available).
- Encourage the client to bring friends to VMMC if they are interested.

Additional Important Topics

• Assess/introduce as relevant the following topics: masculinity and gender-related issues and alcohol and drug use and abuse.

Masculinity and Gender-Related Issues

Explain:

- One issue related to violence is what it means to "be a man," or what some people call "masculinity" or "manhood."
- Some people incorrectly associate "being a man" with engaging in violent behaviors such as yelling, hitting, kicking, and other such behaviors, against men, women, or children.
 - This is NOT correct. There are many men and leaders in the community such as (*list names*) who are not violent and to whom others look up and respect.
- By understanding and challenging the idea of masculinity, men can expand their views, take better care of their health, and become better partners, fathers, and citizens
- Is there a man whom you admire and look up to? Why do you admire him?
- What does it mean to you to be a "good man"?
 - Being a good man means seeking health care rather than not asking for help with health issues. Coming for VMMC is one way of being a good man.
 - Being a good man does not mean using violence to solve problems, especially against girls and women.
 - Being a good man means taking responsibility for practicing safer sex, discussing and adopting family planning with one's partner, and protecting oneself and one's partner from HIV/STIs.

- Being a good man means treating girls and women as equals and thus contributing to the full potential of one's relationship, family, and society.
- Being a good man means using condoms correctly and consistently, reducing the number of partners, and not equating sex with dominance and risk-taking, thus reducing HIV/STI infection and transmission.

Alcohol and Drug Use and Abuse

Explain:

- Tobacco use is bad for your health. Tobacco use results in stained fingers, lips, and teeth. It also causes bad breath. Smokers tend to be less fit and get short of breath more easily. Tobacco use also causes problems later in life, notably heart disease, cancer, emphysema, and early death.
- The consumption of alcohol, even in small amounts, can impair judgment. While under the influence of alcohol or other substances, people do things they would not normally do, such as driving dangerously, being verbally or physically violent, or having unprotected sexual activity.
- Many adolescents die from accidents, such as motor vehicle crashes, under the influence of alcohol and other substances.
- The consumption of large quantities of alcohol in a short period of time can cause neurological and liver damage.
- Substances such as tobacco, khat, heroin, amphetamines, and cocaine can induce dependence.
 Being dependent on these substances impairs one's ability to carry out everyday activities and can lead to tensions with family members, friends, and others. Most people who develop dependence on substances do so during their adolescence
- Using cannabis, khat, heroin, amphetamines, or cocaine can cause damage to the brain, liver, kidneys, and lungs in both the short and long terms. Injecting substances with shared needles and syringes greatly increases the likelihood of getting HIV.
- If you do use alcohol or other substances that can impair your judgment, avoid driving a car, motorcycle, or bicycle while under their influence.³
- If you have started using alcohol or other substances, I can refer you to (name service for counseling and support around substance abuse). Counselors at this service can help you stop.

³ World Health Organization (WHO) (2010) *Adolescent Job Aid, A Handy Desk Reference Tool for Primary Level Health Workers*. Department of Child and Adolescent Health and Development, WHO.

Strengthening Counseling for Adolescents at VMMC Services: VMMC Mentoring Cue Card

Background

For use by mentors observing health care providers counseling adolescents about voluntary medical male circumcision (VMMC) services using the VMMC cue cards. Providers should be assessed on both counseling skills and content from the cue cards or flip charts.

Evaluation of Provider Counseling Skills

Check the box to indicate condition met or skill demonstrated by the counselor.

	Provider Counseling Skills
	The counseling space was private and ensured confidentiality.
	There were no barriers (chairs, tables, computers, etc.) between the provider and client during counseling.
	The provider demonstrated open and attentive body language.
	The provider praised, affirmed, or otherwise encouraged the client.
To dem	onstrate active listening, the provider:
	Paraphrased or reflected back what the client said.
	Summarized what the client said.
	Asked open-ended questions.
	Did not interrupt the client.
	Remained neutral and did not make judgmental statements about the client.
	Prioritized topics in a logical and meaningful way.
	Showed empathy and compassion for the client.
	Asked if the client wanted advice before offering it.

Evaluation of Content Provided

Check the box to indicate content covered by the counselor.

	Group Counseling Session Cue Card
The pro	ovider explained:
	Definition of VMMC
	Steps in the VMMC process
	VMMC benefits and risks
	Wound care, including recommending that clients avoid sexual intercourse and masturbating for six weeks following the procedure
	Basic information about HIV/AIDS (transmission, risks, and prevention)
	Importance of HIV testing and counseling (HTC)
	How to use a condom (including offering to provide a demonstration)

	Individual Counseling Session Cue Card
At som	e point in the session, the provider asked for:
	Written, informed consent for VMMC
	Written, informed consent for HIV testing
	Oral assent for VMMC
	Oral assent for HIV testing
During	the session, the provider explained:
	That VMMC and HTC are voluntary and confidential
	Post-VMMC care (including to avoid masturbating and sexual intercourse for six weeks following the procedure and strategies to comply with this recommendation)
	Consequences of not abstaining during the healing period
	Risk-reduction strategies if the client indicated abstinence is not possible during the healing period
In addi	tion, the provider:
	Asked the client if he is sexually experienced
	Asked the client if he has any questions
	Encouraged the client to return to the clinic or another location to seek services at a future date if he declines HTS
	Provided a condom demonstration if requested
	Offered referral(s) to other services as requested/needed
	Post-HIV Test Counseling Cue Card
For Clie	ents Who Test NEGATIVE for HIV
The pro	ovider discussed:
	The client's negative HIV test results and offered emotional support, allowing the client to reflect on his results
	The window period
	Prevention of HIV, including pre-exposure prophylaxis (PrEP)
	Importance of condom use
For Clie	ents Who Test POSITIVE for HIV
The pro	ovider discussed:
	The client's positive HIV test results and offered emotional support, allowing the client to reflect on his results
	Benefits/risks of disclosure
In addi	tion, the provider:
	Asked the client, if under age 18, to return to the clinic with a parent or guardian
	Offered active referral and linkage to care, support, and treatment

	Immediate Postoperative Counseling Cue Card
The provi	der covered:
	Wound care instructions
	Advice to not use home remedies (ash, dung, etc.) or remedies not prescribed by VMMC providers
	Symptoms of adverse events
	Importance of contacting VMMC staff in case of emergency
	Importance of abstaining from masturbation and/or sexual intercourse during the healing period
	Strategies to improve compliance with abstinence
	Recommendations to reduce the risk of HIV transmission and facilitate proper healing
	Possible barriers to clinical follow-up, including:
	 Access to transport to VMMC clinic or other clinic near residence
	School schedule
	Work schedule
	Family commitments

	Day Two Follow-Up Visit Cue Card
The pro	vider covered:
	Wound care and pain management
	Warning signs/how to contact clinic in case of adverse events
	Abstinence or risk-reduction strategies during the healing period
	Strategies to improve compliance with abstinence or improve risk mitigation during the healing period
	That VMMC provides only partial protection from HIV transmission
	Need for continued practice of other prevention methods, especially condom use, after healing
	Importance of and possible barriers to day seven follow-up visit
	Additional topics, including:
	Family planning
	Gender/gender-based violence
	Masculinity
	Referrals to services to address these additional topics

	Day Seven Follow-Up Visit Cue Card
The p	rovider covered:
	Continued wound care and pain management
	Warning signs/how to contact clinic in case of adverse events
	Abstinence or risk-reduction strategies during the healing period
	Strategies to improve compliance with abstinence or improve risk mitigation during the healing period
	That VMMC provides only partial protection from HIV transmission
	Need to practice other prevention methods, especially condom use, after healing
	Importance of and possible barriers to return visit in case of adverse events or other complications
	Additional topics, including:
	Masculinity and gender-related issues
	Alcohol and/or drug abuse/use
	Referrals to services to address these additional topics
Additio	onal Observations or Comments