

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.
 - 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 use 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

Make sure that the adolescent understands what sexual intercourse is.

- 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.

Adjust to match whatever communication materials are available.

Follow-Up Visits

- Explain to the client that he should return to this site (or another one recommended) for follow-up 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.