



TRAINING COURSE FACT SHEET

SEXUAL RISK ASSESSMENT AND INTERVENTION IN THE PRIMARY CARE SETTING

Objective: Demonstrate the need for and the skills used in conducting a brief sexual behavior risk assessment and intervention during the routine out-patient encounter.

Lecture Overview: 60 minute lecture. This lecture introduces and demonstrates a model for prevention counseling based on the CDC's STD Treatment Guidelines and Project RESPECT, a research-based model which has been shown to increase safer behavior and reduce STD re-infection rates. It introduces data about HIV, STD, and unplanned pregnancy incidence, and introduces data which indicate that providers often miss opportunities to discuss sexual health with their clients. Role plays are used to demonstrate "typical" and "model" brief interventions with a patient.

Target Audience: physicians, nurse practitioners, physician assistants, clinical nurses, health educators, Independent Duty Corpsmen.

Continuing Education Credit:

NMCPHC is a designated provider of continuing education contact hours (CECH) in health education by the National Commission for Health Education Credentialing, Inc. This program is designated for Certified Health Education Specialists (CHES) to receive up to 1 total Category 1 continuing education contact hour.

Requests for Training: Requests by your base or Command to host an iteration of this course may be coordinated with SHARP.

Materials/funding to be provided by host command: Classroom for any size audience. Computer with compact disk drive and speakers, PowerPoint projection capability.

"Do health care providers assess the sexual health of their patients during routine encounters as recommended by the CDC and the U.S. Preventive Services Task Force?"

A number of recent studies suggest they often do not. For example, a study reported in the American Journal of Preventive Medicine ((2000;18(2):109-114)) revealed that **only 28%** of adults who had a routine check-up in the past year reported being asked about STDs during that visit.

These and other data demonstrate that providers are **missing opportunities** to identify, diagnose and treat STDs, and to identify and intervene in risky sexual behavior.

Health care providers can and should speak with all their sexually active adolescent patients and adult patients with risk about their sexual health.

But how does the provider go about this task? Who should bring it up? What are the "right" questions to ask? What advice should be given? How much time will this take?