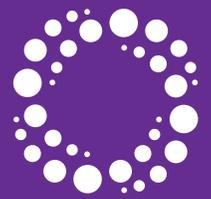


# Counseling Adolescent Clients to Resist Sexual Coercion



<b>How to Use This Guide</b>	This guide is designed to support facilitation of an interactive discussion about <b>Counseling Adolescent Clients to Resist Sexual Coercion</b> . Facilitators should feel free to adapt and revise this guide. Facilitators may choose to convene a one-time meeting with clinic staff about this topic or include this as part of larger training efforts.
<b>Learning Objectives</b>	By the end of the discussion, participants should be able to: <ul style="list-style-type: none"> <li>» <b>Describe the Title X requirement for counseling adolescents to resist sexual coercion.</b></li> <li>» <b>Define sexual coercion for adolescent clients.</b></li> <li>» <b>Start a conversation with adolescents on how to recognize and resist sexual coercion.</b></li> <li>» <b>Explain what a healthy relationship is and is not to adolescent clients and discuss the characteristics of a healthy relationship.</b></li> <li>» <b>Show adolescent clients how to use refusal skills techniques to resist sexual coercion.</b></li> </ul>
<b>Length</b>	At least <b>60 minutes</b> , with more time for discussion as schedules allow.
<b>Materials</b>	<ul style="list-style-type: none"> <li>» <b>PowerPoint Slides with Notes:</b> Slides with speaker notes, activities, and discussion questions</li> <li>» <b>Counseling Adolescent Clients to Resist Sexual Coercion Video:</b> This video demonstrates how to start a conversation with an adolescent client about sexual coercion.</li> <li>» <b>Speakers:</b> To play videos during the session</li> </ul>
<b>Format</b>	This discussion is designed to be conducted <b>virtually</b> or <b>in person</b> .
<b>Suggested Participants</b>	<b>Administrative, clinical, and all project personnel</b>
<b>Before You Start...</b>	Facilitators should review the <b>PowerPoint Slides</b> and the <b>Counseling Adolescent Clients to Resist Sexual Coercion Video</b> .



# Counseling Adolescent Clients to Resist Sexual Coercion



Introducing the Title X requirement for Counseling Adolescent Clients to Resist Sexual Coercion



10 minutes



Slides 1-4



Present Slide

Facilitate

**1** Counseling Adolescents Clients to Resist Sexual Coercion–Updated December 2019

**2** Learning objectives

**3** Legislative mandate

**4** Annual training on sexual coercion

Define sexual coercion for adolescent clients



10 minutes



Slides 5-6



Present Slide

Facilitate

**5** What is sexual coercion?

**6** Examples of sexual coercion

Start a conversation with adolescents on how to recognize and resist sexual coercion



20 minutes



Slides 7-14



Present Slide

Facilitate

**7** Best practices for provider-adolescent communication

**8** Safety tip: key recommendation

**9** Discussing confidentiality: sample language

# Counseling Adolescent Clients to Resist Sexual Coercion



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- 10** Mandatory reporting

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  - 11** Five principles of quality counseling

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  - 12** Best practices for provider-adolescent communication (cont.)

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  - 13** Raising the issue: sample language

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  - 14** Responding to difficult emotions

Strategies for working with adolescent clients on resisting sexual coercion



20 minutes



Slides 15-20



Present Slide

Facilitate

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- 15** Healthy relationship wheel & questions

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  - 16** Relationship spectrum

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  - 17** Refusal skills for delaying sexual activity

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  - 18** Refusal skills (cont.)

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  - 19** Counseling adolescent clients to resist sexual coercion video

**Activity:**

- » Watch the video (approximately 7 minutes).

**Discussion:**

- » How does the scenario in the video relate to experiences you have had with clients?
- » What are some approaches you have found helpful for starting a conversation with adolescents about sexual coercion?
- » What do you find most difficult when talking with adolescents about possible sexual coercion?
- » What would you document in the client's record?

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- 20** Contact us

*This discussion guide was supported by Award No. FPTPA006028-04-00 from the Office of Population Affairs (OPA). Its contents are solely the responsibility of the authors and do not necessarily represent the official views of OPA or HHS.*