

Scenarios for HIV Test Counselling Role Plays

The following scenarios could be encountered by HIV test counsellors; in many cases are drawn from the experiences of other testers. Use the ones most relevant to your site, or add your own.

Role-playing is an opportunity for trainees to practice putting their learning together and to get more comfortable with the counsellor's role. Tell the role players the basic scenario (or cut out these cards and let them draw). When they are ready, provide the testing outcome, so they can practice post-testing counselling as well. The points given are specific to each scenario, but don't reflect everything that needs to be said (e.g. every appointment should ensure that the person understands and consents to the testing.)

Scenario 1

You are seeing an Indigenous woman, Janet, for an HIV test. She has decided to test because she and her boyfriend of six months have decided to be in a monogamous relationship. They plan to stop using condoms.

The client has had two previous partners where unprotected sex was practiced. Her last risk was six weeks ago when a condom broke with her boyfriend.

She is nervous as it is her first test.

Scenario 2

You are seeing a man for an HIV test. Darnell tells you that his male partner of three years tested positive for HIV six months ago. He seems "depressed" and resigned to the fact that he is likely HIV positive too. He has been too nervous to test until now.

They usually use condoms, but there has been some unprotected anal sex as both top and bottom.

Both he and his partner tested negative nearly three years ago at the onset of their relationship. He has requested standard testing because he's not ready to deal with an "instant" result.

Scenario 1: POC Test Outcome = non-reactive

What needs to be asked:

- Has her current boyfriend tested? If so, when and what were his results?
- When was the last unprotected with the 2 other partners?
- Has she tested for STI's/pregnancy risk?

What needs to be discussed:

- The window period. Janet is still within the window period for an exposure with her boyfriend, but discussion is needed about exposure before/beyond their relationship. If neither Janet nor her boyfriend have had outside exposures within the three-month window period and both test negative, then they are at no-risk of HIV (unless one/both have new partners).
- Her fears and concerns. Since this is her first test is there more she needs/wants to know? Does her anxiety seem disproportionate to her risk?

Scenario 2: Standard Test Outcome = non-reactive

What needs to be discussed:

- Discuss client's feeling of "depression." Does he need help and support dealing with his partner's diagnosis/his own risk.
- Does he know how his partner acquired HIV and need to talk about it? Does he have concerns about his relationship?
- Is today the right time to do the test?
- Is his partner on medication? Does he know about U=U? After six months of being undetectable they may be able to negotiate condomless sexual practices, if desired, assuming appropriate protections with any outside partners.

What needs to be asked:

- When was the last time he had unprotected sex as a bottom and as a top? Is he still in the window period for an exposure? (with the standard test he will also get a p24 result, and more reassurance even if he has had a recent exposure)
- Is your client interested in PrEP?

Scenario 3

You are seeing a man for an HIV test. Max tells you that he has had condomless sex with casual female and male partners.

He tells you that the unprotected sex happens when he uses drugs. His last risk was 2 weeks ago.

He's very laid back and casual about the risks that he's been taking.

Scenario 4

You are seeing Jordon, an ACB woman, for an HIV test. She tells you that she moving to Ottawa to be with her boyfriend.

She tells you that her boyfriend has recently told her that he had an affair with another woman and that affair was 8 months ago. She tells you that he is also going for testing.

Her last risk with her BF was 4 months ago. She is testing for peace of mind.

Scenario 5

You are seeing a Trans woman, Sage, for an HIV test. She tells you that her last test was 6 months ago and it was negative.

She also tells you that she's a sex worker. She tells you that on average she sees 200 clients per month and has had some risk since her last test.

Scenario 3: POC Test Outcome = reactive

What needs to be discussed:

- Does he use condoms when he is not high? Why does the drug impact his behaviour?
- What drugs is he using? Is his drug use a problem for him? Does he need support around managing his drug use?
- The window period; testing on the 3-6-3 schedule

What needs to be asked:

- Discuss his recent risk. What kind of sex was it? With who?
- What support people does he have in his life if he did test positive today?

After a positive test:

- With reactive test, offer supportive counselling and a confirmatory test, explain the need to return for results.
- Start the conversation about where/how he can access HIV care. If he previously showed an interest in addictions support this is still important!
- Protecting casual partners; he now has an obligation to disclose.
- Can he notify his past partners? Does he need help doing so?

Scenario 4: POC Test Outcome = reactive

What needs to be asked:

- Has she ever tested before? If so, when? What was the result?
- Has her boyfriend tested? What were his results?

What needs to be discussed:

- Pre-test counselling should still include questions about the supports available to her in the event of a positive test.

After a positive test:

- With reactive test, offer supportive counselling for this surprising result – meeting the client where she is at.
- Offer confirmatory test, and explain the need to return.
- Talk about informing her boyfriend; encouraging him to test
- Talk about the move to Ottawa, and how she can access HIV care in Ottawa, if that proceeds

Scenario 5: POC Test Outcome = non-reactive

What needs to be asked:

- When was her last HIV/STI tests?
- Does she have regular partner? If so, have they tested for HIV/STI's? When?
- What and when was her last risk? (Is she in a window period)
- What kinds of sex is she having with her clients and partner? Does she use condoms for penetrative sex (with men)?

What needs to be discussed:

- Possibility of PrEP use, especially if she had challenges negotiating condom use every time
- Routine testing

Scenario 6

Chan, a 26-year-old gay man comes to the clinic on a Monday. He is extremely nervous and anxious.

He was partying on Saturday night. Used ecstasy, GHB, coke and pot. He remembers going to the washroom and performing oral sex on a few guys, and then landing at a stranger’s house where they had sex (mostly with condoms). His memory of the incident is fuzzy...

His last HIV test was negative 4 months ago. He is not on PrEP.

Scenario 7

A 35-year old-man named Owen comes to the clinic a bit disoriented and rambling. He has visible physical signs coming down from a high of crystal meth or a combination of party drugs. These includes twitching, dry mouth, and repeating himself. He tells you he inject drugs more than once with strangers over the past few days.

He is requesting an HIV test. How would the counsellor deal with the situation?

Scenario 8

You see a young man named Chris, who tells you he was couch surfing at a friend’s house, when two friends overdosed. One friend is still in hospital.

The client feels he had a close call. He says he regularly shoots drugs, and that Percocet is his drug of choice.

He and his friends regularly get clean disposable needles from a local needle exchange program. He says they almost never share needles.

Scenario 6: POC Test Outcome = non-reactive

What needs to be asked:

- Was he a top/bottom for the anal sex? What does he remember about the portion without condoms?
- Is he being tested for other STBBI? Can you set that up?
- Is his drug use a problem for him? Does he need support around managing his drug use?

What needs to be discussed?

- Reassure about oral sex; talk about relative risk if needed
- Discuss the possibility of PEP (it’s been less than 72 hours)
- Encourage consideration of PrEP for the future.
- Do baseline and recommend a 3 week follow up. Explain window period and 3-6-3 testing.
- Does he need additional supports (anxiety, etc) or drug use

Scenario 7: POC Test Outcome = reactive

What needs to be done: Assess disorientation:

- Is he able to give consent? Is the counsellor able to get relevant information need to test?
- Is he OK to be alone with a counsellor?

If no, encourage him to book a follow-up appointment.

If yes, simplify the counselling and continually assess competency; try and book a follow up appointment

- Either now (or at follow-up), ask if his drug use is a problem for him and try and refer appropriately.

Only do the test if you are confident about consent, risk and his ability to receive his result

After a positive test:

- With reactive test, offer supportive counselling and a confirmatory test, explain the need to return for results.
- Start the conversation about where/how he can access HIV care. If he previously showed an interest in addictions support this is still important!
- Protecting casual partners; he now has an obligation to disclose.
- Can he notify his past partners? Does he need help doing so?

Scenario 10: POC Test Outcome = non-reactive

What needs to be discussed:

- Chris may be at a point in his life when he is reassessing his drug use behaviour. Does he want/need support around managing his drug use? Could you refer him somewhere?
- Does he need support around housing? Could you help him find a referral for that?
- Since he is regularly accessing harm reductions supplies, is there someone he’d like to work with at that service to get support?

What needs to be asked:

- Who are his sexual partners? What protections is he using in his sexual life?

Scenario 9

George, a 30-year-old gay man hooked up with someone he met at a bathhouse. The man he hooked up with told him he was on PrEP. They decided not to use condoms.

Both had condomless anal, receptive sex. Three weeks later, George develops a body rash, a sore throat and a high fever. He rushes into your clinic for an HIV test.

Both the counsellor and the client recognizes that this has been high risk exposure.

Scenario 10

You see a gay man named Roy. He is in a long-term relationship with another man who has been HIV positive for eight years, with an undetectable viral load for the past seven. For the past five years, they have been monogamous and having condomless anal sex. Roy tests for HIV routinely.

In the past year, Roy and his partner decided to open up their relationship. Five months ago, Roy met a partner on a social media site, who told him he was HIV negative. They decided to have condomless anal sex. Roy has now come in for his routine test.

Scenario 8: POC Test = non-reactive; Standard test = reactive

What needs to be discussed:

- POC testing (if desired) as well as standard testing to include p24 testing; the stronger possibility of this standard test being positive. Stress the need to return for these results.
- Negotiating condom use, and taking precautions, particularly in this early phase when his status is unclear
- Reassurance that you will help him get HIV care if needed.

What needs to be asked:

- Is he also being tested for other STIs?
- [This is a high risk client, be sure to ask] What support people does he have in his life if he did test positive today?

After a positive test:

- offer supportive counselling and have information about ongoing HIV care options prepared for his return visit.
- Prompt treatment will protect his health and others.
- Protecting casual partners; he now has an obligation to disclose.
- Can he notify partners? Does he need help doing so?

Scenario 3: POC Test Outcome = reactive

What needs to be discussed:

- Negotiating protections outside his relationship (condoms), or perhaps consider PrEP
- Other STI testing

After a positive test:

- With reactive test, offer supportive counselling and a confirmatory test, explain the need to return for results.
- His relationship with his primary partner. Disclosure and the concerns he may have about that. His emotions about his change of status.
- Negotiating condom use to protect his partners (including his primary partner).
- HIV care. Does he need your support to arrange?
- Protecting his partners; he now has an obligation to disclose.
- Can he notify partners? Does he need help doing so?