Note that the order of adherence assessment and counseling activities for the follow-up visits is as follows:

1. ACASI
2. Ring Adherence Assessment (CRF)
3. Adherence Counseling

In order to encourage participants to feel comfortable reporting non use of product in the ACASI, that is instances when the ring is out of the vagina, when participants are instructed about use of ACASI, staff should provide neutral assessment messages (described more fully below). Specifically, they should inform the participant that we are interested in learning about her experiences with and views about the ring in order to assess whether a ring is a viable delivery mechanism for women like her. Thus we would like to know when the participant removed the ring and the reasons for removal.

RING ADHERENCE ASSESSMENT

- Occurs after the ACASI
- Uses principles of Neutral Approach/Neutral Assessment
- Involves asking the items and not intervening on ring use based on responses
- Should manage and minimize positive or negative consequences to ring use or non-use and time to re-insertion

COUNSELING

- Occurs after the ACASI and Ring Adherence Assessment (CRF).
- If the same person doing the assessment (ring diary review) is doing the support conversation-provide a clear transition (that was about use, now I would like to talk about your feelings about ring use regardless of how much or how little you actually used it).
- Not barriers based- the idea is not to identify reasons for non-use or extended times with the ring out and strategize on those. Next Step Counseling (NSC) discussions are based on experiences and identification of factors facilitating the ease/comfort of use.
- Participant-centered- participant is the expert and should be the main person talking in these conversations, which can be achieved with open-ended questions that guide the discussion.
- These discussion are not scripted but all NSC based discussions are dominated by exploration of experiences. Only towards the end of the discussion is action (what can you do, what can be done) introduced. It is important that counselors refrain from suggesting strategies or actions during the “exploration, summary, and indentify” stages of the discussion.
• Goals are to engage the participant in an open discussion about experiences with and feelings towards the ring — not to make participants adhere — and empower participants to feel that ring use is a choice and decision that they are free to make.

FULL TEAM

• Avoid “messaging” [“you need to…”, “don’t forget to…”, “be sure to…” on need for adherence (allow assessor to collect ring use rates and counselor to work with participants on facilitators and challenges)
**SHORT SHEET ON NEUTRAL ASSESSMENT**

**Neutral Approach:** The basic premise for neutral assessment is the recognition that reporting on product use or returning of product is a behavior that goes beyond the simple reporting of events, even when you can fully recall or provide the “data”. Against a backdrop of a “standard of care” in many clinical trials where perfect product use is framed as largely expected and intensively messaged on, the realization was made that some participants felt that reporting non-adherence or returning of product that suggested they had not been perfectly adherent was too uncomfortable to be worthwhile. Further, with multiple people messaging on adherence, some participants felt that they were valuable to the study only to the extent that product was used perfectly. “Neutral Approach” was coined to reflect that when a trial is interested in assessing and monitoring a behavior, the best approach is to be as neutral as possible about the behavior.

Applied to studies where product use is part of the primary aims or contribute to secondary aims, it is suggested that we can help to promote an atmosphere where participants would feel comfortable reporting on the target behavior regardless of adoption of it by minimizing both positive reinforcement for reporting high rates of product use and negative consequences for reporting low rates of product use. This is a team-wide approach, where adherence is assessed on ACASI, product count, or interview with no immediate or delayed consequence to rates reported (e.g., no additional procedures when adherence is low, excessive probing, negative feedback from staff or clinician, so on). That means that assessment is completely separate from counseling. If someone reports non-adherence we thank them and move to the next question. Messaging on product use is also recommended to be restricted; rates of use are gathered by either collecting the product and asking a minimal set of questions for product accountability issues (e.g. Did you forget any at home?) and/or implementing the procedures for collecting data on interview or CRF forms.

On interview, the participant is informed that this part of the visit is all about collecting detailed information about product use. A permission statement is typically provided to assure participants that the interviewer is not judging them and wants to know what really happened rather than focusing on high or low rates of adherence. Participants are informed of the exact procedures (I will ask you X and write down Y) and the limitations of the conversation. (Because this is a data collection interview, I will stick with the questions for this- we can talk about things in more detail later if you want, but for the next few minutes, I am going to focus on collecting data about the ring, when it may have come out, and when it was reinserted). Incorporating some Motivational Interviewing strategies, some sites also seek permission- Is that OK with you?- before proceeding.

The tempo of the interview-based data collection discussion sticks to the items and responses- not in a cold or detached manner but in a manner that does not convey “good” when ring use or re-insertion in a timely fashion is reported and does not convey that the ring coming out was or long delays in getting it back in were “bad”. Where participants can be strongly reinforced is for coming in today, sticking with the project, and openly discussion things. Reinforcement on ring use is not targeted or provided.

Once the interview is completed, the participant is thanked and the staff then transitions to a risk use support discussion (section I below) or the interview is closed if the participant is moving on to receive adherence support from someone else (section II below).
SHORT SHEET ON RING USE SUPPORT DISCUSSIONS (STREAMLINED STEPS)

I TRANSITIONING FROM ASSESSMENT TO RING USE SUPPORT SAME STAFF

If the participant is remaining with the same person for the adherence support discussion, the staff member should transition- Thank you for all that information. I would like to switch gears now. That was all about data. I was wondering if I could take just a few more minutes of your time to check in with you about what it has been like for you more generally with the ring. I know we just talked about when it was in and when it was not and why, but what I really want to know if what it was like for you over the last month. OK?- {move to step 1}

II TRANSITIONING FROM ASSESSMENT TO RING USE SUPPORT DIFFERENT STAFF

If the participant is coming to you for counseling already having completed the assessment with another team member, transition into discussion of ring use/experiences- I know you have already talked quite a bit today about the ring, but I was hoping you might take just a couple of more minutes to share your experiences with the ring in terms of how it fits or does fit into your life right now. You have done plenty of reporting on when it was in and when it was out. I would like to discuss something completely different- Your feelings about having the ring, no matter if or how long it was in- just your feelings about it. Does that sound OK?- {move to step 1}

BASIC PIECES IN THE PARTICIPANT CENTERED DISCUSSION (based on Next Step Counseling)
[alternatively, the full VASP approach applied to MTN 005 that follows on page 4 could be used]. The spirit of this conversation is open, non-interrogative, and casual but also requires that paper and checklists be put aside and the counselor actively attend to the participant.

STEP 1: Explore First ask: What made it feel like this ring would fit well into your life, if anything? {Listen}. Second ask: What kinds of things or situations came up where the ring was not such a good match to you and your life? {Listen}

STEP 2: Summarize- If the participant has alluded to these factors in the assessment interview, provide a summary and ask if there are other factors? Summarize what seems to make the ring a good fit (easy to keep in) and a not so good fit (challenging to have it in or re-insert it).

STEP 3: Identify- if something could help to make it easier to use/re-insert-- For participants noting any level of difficulty or challenge, ask if there is anything she could imagine or think of that might make it easier or more comfortable for her to use the ring (keep it in or re-insert it).

STEP 4: Strategize- If something is identified, discuss first how SHE could see that happening and if she cannot offer something that would help, offer solutions framed as strategies other participants have found helpful (avoid saying this is your idea or suggestion as that can creating problems in future interactions).

STEP 5: Close the conversation by thanking the participant and reminding her of any product use instructions that appear important and letting her know you will check in again next visit.

Be sure to document in your chart notes the basics of the conversation (facilitators, challenges, things that would make it easier/more comfortable, and strategies) so that next visit you can appropriately follow-up.

EXAMPLES:

Thank you for coming in today. Sorry that this visit is taking so long. I know you have been asked a lot about the ring today, but I was hoping we could spend just a few more minutes talking about your experiences with it-not whether or not you had it in for however long, but more your feelings about how this ring fits or doesn’t fit with your life- does that sound OK?...Thank you. Can you tell me what it has been like for you over the last
month- specifically, the kinds of things that have made the ring feel easy to use or fit well into your life? {Listen} What are the things or situations that made the ring feel like a poor fit with your life- times when it felt different to have or use? {Listen} So it sounds like there are times when you don’t notice it at all and that makes it pretty easy to incorporate into your life and there are also times when it feels awkward, like something not natural is inserted inside you and that made it kind of uncomfortable. And there were some times when re-inserting it felt like you just couldn’t get it right. Does that sound right to you? ….Is there anything that could make the ring feel easy to use- something that could comfortably fit into your daily life? …So if you felt better able to re-insert it would make it easier for you. Do you have some ideas for how that could happen?…Yes, I can definitely cover that with you again. Let’s talk about that for a minute…. Thank you for taking the time to share your experiences with me. I’ll check in with you again next time you are in.

Thank you for providing all that information. I know we just went over in great detail your use of the ring, but I would like to switch gears completely for a few minutes. We touched on reasons why the ring came out, but we did not spend much time talking about your feelings about the ring and its match to your life, or mismatch. Can we take just a couple more minutes to touch on that? How you are experiencing the ring is so important. you have been asked a lot about the ring today, but I was hoping we could spend just a few more minutes talking about your experiences with it- not whether or not you had it in for however long, but more your feelings about how this ring fits or doesn’t fit with your life- does that sound OK?...Thank you. Can you tell me what it has been like for you over the last month- specifically, the kinds of things that have made the ring feel easy to use or fit well into your life? {Listen} What are the things or situations that made the ring feel like a poor fit with your life- times when it felt different to have or use? {Listen} So it sounds like there are times when you don’t notice it at all and that makes it pretty easy to incorporate into your life and there are also times when it feels awkward, like something not natural is inserted inside you and that made it kind of uncomfortable. And there were some times when re-inserting it felt like you just couldn’t get it right. Does that sound right to you? ….Is there anything that could make the ring feel easy to use- something that could comfortably fit into your daily life? …So if you felt better able to re-insert it would make it easier for you. Do you have some ideas for how that could happen?…Yes, I can definitely cover that with you again. Let’s talk about that for a minute…. Thank you for taking the time to share your experiences with me. I’ll check in with you again next time you are in.

Again, thank you for all you are doing today. I wanted to take just a few more minutes to talk with you about you experiences with the ring- how it has been for you using or trying to use it. OK? Are there times when the ring felt or feels like a good match for you and your life- like it is really easy to use? {Listen} Are there times when it felt like a not-so-good match for you or things going on in your life- when it was or is hard to use? {Listen} …So, it sounds like using the ring feels pretty easy to do for you- you mentioned you don’t even notice it really, and there are not really times when it feels difficult to use. Is there anything we can talk about today that might be helpful in continuing to make the ring feel easy or manageable to use over the next month?...OK. Well, thank you for sharing so openly with me. I’ll check in with you again at your next visit.
EXAMPLES BY STEP

STEP 1: Explore

- What have your experiences been with the ring over the last month? What are things that seem to have made the ring easy to use? What are some things that made it difficult for you to use? {or re-insert}
- Could you please share with me…what is it about the ring or its fit with your daily life that made it feel like a good match? What are some things that made it feel like it was not such a great match?
- I am wondering if you could share with me your feelings about the ring, and using or not using it. When you think about the last month, were there times or situations when having the ring or re-inserting it felt pretty easy? What were the times or situations that made it more difficult to use or re-insert?
- I know you said earlier that you had the ring in the whole time, but I was hoping we could talk a few minutes about what that experience was like for you. Can you tell me what made it easy to use or keep in? Can you tell me, what made it more challenging- even though you kept it in, were there times when that was uncomfortable or more difficult to do?

STEP 2: Summarize

- If I am hearing you right, you are saying ….. makes it feel easy and ….is challenging. Is that right?
- So, some things that make it easy to use are …. And things that make it harder to use or re-insert are…. Does that sound right to you?
- So you feel that using the ring is really easy and there is really nothing you can think of that would make it easier to use. Is that about right?

STEP 3: Identify

- What would help to make it easier to manage using the ring?
- What would need to be different for using the ring to feel more manageable?
- What would need to happen for re-inserting the ring to feel like something that was just a little easier to do?

STEP 4: Strategize

- How could you see that happening?
- Do you have some ideas about how that could happen?
- Can I share some strategies I have heard from other participants that might help with that?

STEP 5: Close

- So it sounds like trying XXX may help to make using the ring as easy as possible for you. I’ll check in with you next time you come in about that. Thank you for talking so openly with me.
- Right now you are feeling like the ring is really easy and manageable to use, and that you feel pretty well set on continuing with the ring over the next month. I’ll check in with you again next time you come in. Thank you for taking this time to share with me what your experiences have been.
ALL 8 STEPS

Adherence Counseling Manual: Proposal for MTN 005

This proposed adherence counseling manual for MTN 005 was adapted from the VOICE Adherence Strengthening Program, recently developed for the VOICE trial and based on Next Step Counseling and other participant centered approaches for behavior change. The spirit in which the counseling is conducted and the manner in which adherence is understood may represent a different approach for some counselors. The goal of this counseling approach is to create a supportive environment where participants can share their experience with the ring while recognizing that product use is ultimately a choice. There are 8 steps involved in the discussion about experiences with the study ring, which are described in this guide. The method encourages a client-centered approach, the use of open-ended questions, and the importance of building rapport with the participant. Adequate documentation and the review of action plans from previous sessions are also important aspects, to ensure continuity throughout the duration of a participant’s time in the study. This method eliminates or modifies several aspects of the traditional counseling approach, which we believe may undermine the likelihood of participants’ reporting honestly about adherence. The differences between traditional counseling and the proposed counseling strategy are outlined in the table below.

Key Revisions to Adherence Counseling Approach

<table>
<thead>
<tr>
<th>Traditional Approach</th>
<th>Proposed Approach</th>
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</thead>
<tbody>
<tr>
<td>Asks the participant how often the ring was out and how long it was out and then bases counseling on reported level of adherence.</td>
<td>Counseling will focus on participant’s experiences using the ring, and what makes keeping the ring inserted easier or harder, regardless of how often the ring came out/how long the ring was out.</td>
</tr>
<tr>
<td>Adherence plan/strategies based on overcoming barriers to product use.</td>
<td>Adherence plan/strategies based on addressing adherence-related needs.</td>
</tr>
<tr>
<td>Uses reported adherence to determine the focus of the session</td>
<td>All sessions will follow the same 8 steps, regardless of how adherent the participant has been.</td>
</tr>
<tr>
<td>Positive reinforcement of good adherence.</td>
<td>Maintain a neutral counseling approach.</td>
</tr>
<tr>
<td>Goals focused on perfect adherence.</td>
<td>Goals focused on making product use manageable.</td>
</tr>
</tbody>
</table>

**GOAL:** Create a comfortable environment to talk about experiences with using the ring.

**CLIMATE:** Supportive, nonjudgmental, neutral.

**METHOD:** Exploration of context (experiences, thoughts, beliefs, feelings) to identify needs and promote movement towards building a context that supports ring use.

**IMPLICIT ASSUMPTION:** Participants choose whether, or how much, they keep the ring inserted. We cannot make them keep the ring inserted all of the time, but can support open frank discussions about it.

**Steps of Proposed Counseling Strategy**

1. **WELCOME:** Greet/Rapport; Thank participant and establish rapport; Check-in
   a. **Goal:** Welcome and thank the participant for their contributions to the study (empower). Note that if you’ve already had interactions with this participant during this visit, the goal of Step 1 is to recognize her contributions to today’s visit and in the study more generally.
   b. **Critical Components:**
i. Specifically recognize and appreciate the contributions the participant has made (for example, today’s visit in terms of length, completing measures, procedures or more generally in terms of months on study or other ways this individual contributes her time and efforts to this study).

ii. Emphasize genuine observations about personal contributions the participant has made/is making, and thus empower the participant to see the study as her study, something not possible without her specific efforts. These efforts are regardless of her actual product use; that she is there, has spent time in the waiting room, is speaking with you now, has undergone study procedures; these are all visible contributions that should be recognized.

iii. Balance the interaction between the counselor and participant through conversations that engage the participant in her contributions to this study (contributions that are not linked specifically to ring use).

c. Examples:
   i. Before we talk about how you have been doing with the ring I just want to stop and thank you for coming in today and waiting all this time. You do so much for this study and it would not be at all possible without your contribution. No matter what is going on with the ring the contribution you make deserves recognition- so, thank you. Thank you for this.
   ii. You have been here several hours and I want to stop a moment to tell you that without your being here ....we would not be able to do this study at all. You make many contributions to this study, and showing up here today and talking with me is a really important one. Thank you.
   iii. We’ve talked about this before, but I think it is worth recognizing every time you come in…you being here today is a great contribution you make to this study. I want to thank you for this- I see how hard it is to be here so long and the sacrifices you make to do this. Your efforts are very much recognized and appreciated by all of us.

2. FRAME: Explain purpose of discussion; Seek permission to continue discussion.
   a. Goal: Invite the participant to join the discussion by explaining what you want to talk about, framing it as important, presenting yourself as open, and seeking her permission to continue
   b. Critical Components:
      i. Explain what you’re going to talk about and why.
      ii. Get permission to proceed.
   c. Examples
      i. I would like to take just a few minutes to talk with you about your experiences with the study ring. Would that be OK with you?
      ii. At each visit a counselor will talk with you about your experiences with the study ring. This is because we recognize that keeping the study ring inserted all of the time can be difficult. Part of this study is to better understand this process. May we spend a few minutes talking about what your experiences have been?
      iii. I know we have spoken together in the past about your experiences with the study ring. I will check in with you about this at every visit, because sometimes things change or new situations come up when it may feel easier or harder to keep the study ring inserted. These are all important for the study researchers to learn about- what it is really like to try to use the study products. Even if things have not changed for you, I am hoping we could just spend a few minutes discussing your experiences with the study ring? Is that OK with you?

3. EXPLORE: Explore ring experiences (facilitators/challenges); Discuss efforts on strategies from last session; Discuss the context (experiences) in which the participant feels it is easiest and hardest to keep the ring inserted (check-in on previous agreement).
   a. Goal: Establish a shared understanding of the specific context in which this participant experiences study ring use. Elicit factors that facilitate ease of keeping the ring inserted first; then factors that present challenges to keeping the ring inserted. (Note: For month 2 visits and beyond, first check in on how things went with the goal she set at the last visit. Reinforce effort(s) and move conversation to exploration of how things are going now.)
   b. Critical Components:
i. Elicit (ask about) the **context** in which she negotiates, manages, or experiences keeping the ring inserted.

ii. This discussion is independent of the participant’s level of product adherence.

iii. Elicit (ask about) **facilitators** of keeping the ring inserted (times, situations, factors that make it feel easy to keep the ring inserted, in a given situation, generally, or over time)

iv. Elicit (ask about) **challenges** to keeping the ring inserted (times, situations, factors that make it feel difficult to keep the ring inserted, in a given situation, generally, or over time).

v. Establish a conversation about facilitators and challenges regardless of how often the ring was in/out. Regardless of whether the ring was kept in, one can still reflect on ease and difficulty.

vi. Counselors may need to help participants move away from focusing exclusively on whether the ring was in or out; (e.g., *Thank you for sharing that with me, but I am hoping we can talk about what your experiences with the study ring have been like, whether you kept it in consistently or not. Things in your life that make it easy and not so easy to keep the ring inserted*).

vii. The critical aspect of this conversation is to position adherence as

1. a choice;
2. a behavior that is influenced by many things; and
3. as needing to fit **into** the participant’s life (versus needing to work one’s life around adherence).

The context of one’s life is first and foremost, and adherence to study product is seen as a behavior that exists in relation to other things going on in life. Adherence is “situated” within the larger social, cultural, emotional, and situational/circumstantial factors that create the participant’s daily life.

c. **Examples**

i. In thinking about the study ring, *what have your experiences with keeping the ring inserted been*? *What are the times, situations, or things that have made keeping the ring inserted feel easy, made it fit in your life? What are the times, situations, or things that have made using the ring feel more difficult, less easy to manage?*

ii. Think a moment about your experiences with the study ring. *Not about whether or not you kept the ring in, but just about what it has been like for you. Can you share with me what kinds of things, situations, or feelings make using the ring feel like something that is easy to do...that just works well or fits in your life? What about things or times when it feels like keeping the ring in is harder to do?*

d. **IS intended to** …

i. Explore/elicit context

ii. Move away from how often the ring was out/in

iii. Move towards experiences with using the ring

e. **IS NOT intended to** …

i. Identify times when the participant took the ring out/did not reinsert the ring

ii. Push beyond what the participant is comfortable sharing

4. **SUMMARIZE:** Summarize the context (experiences) in which it is easiest /hardest to keep the ring inserted for this participant.

a. **Goal:** Validate and confirm participant’s experiences by checking in with them about your understanding of facilitating and challenging factors.

b. **Critical Components:**

i. Demonstrate active listening and reflection.

ii. Promote the feeling of being “heard” on the part of the participant.

iii. Provide a summary and elicit participant’s reactions to your summary.

c. **Examples**

i. *What I hear you saying is that these things {explain} make it easier while these {list} make it harder for you. Does that sound right to you?*

ii. *It sounds like you feel that your motivation to use the ring comes from wanting to contribute to the study and find new ways for women to protect themselves from HIV. You don’t know about times when it feels difficult right now. Does that feel like an accurate summary?*
iii. If I am hearing you correctly, you feel that not a lot has changed since we last explored your experiences with the study ring and that you continue to feel it is easy for you because .... The only time it feels more difficult is when ... Is that right?

5. IDENTIFY NEEDS: Explore needs for adherence given experiences; What would make it easier?
Help the participant to identify her specific adherence needs given the context explored. What does this participant feel she needs in order for adherence to be as manageable as possible? (Keep the focus on making use easier, rather than on making use perfect.)

a. Goal: Work with participants to identify (or name) what would need to happen so that keeping the ring inserted would be manageable. WHAT are this participant’s underlying, core adherence-related requirements or needs? In order for this to feel like it fits well in her life, WHAT would need to happen?

b. Critical Components:
   i. Help the participant to identify relevant needs for facilitating or developing the motivation and skills towards keeping the ring inserted by focusing on what would make keeping the ring inserted as easy/manageable as possible for this participant.
   ii. Empower problem solving: Emphasize that having personal needs or requirements are normal and understandable (e.g., in response to a participant’s report of what would need to be in place for things to feel easier, the counselor may say, “That is completely understandable,” or, “That sounds very reasonable to me,” or, “Other participants have shared the same concerns”). If one can identify what they need for adherence to feel manageable and believe that this is a reasonable need, adherence can feel more like a behavior one owns and can accomplish.

c. Examples
   i. What do you think would need to happen to keep the study ring inserted? What would need to change or be different in that picture?
   ii. What would need to be different for it to feel easier to keep the study ring inserted in that situation you described as being difficult?
   iii. What would need to happen for you to continue with keeping the ring inserted as you have been doing? What would really keep that going?

6. STRATEGIZE: Explore how participant could increase ease/comfort/efficacy. Explore new strategies or continued use of established ones to address needs identified.

a. Goal: Work with participants to have them identify possible new strategies to address their adherence-related needs, or to continue to use established strategies that have been effective in increasing keeping the ring inserted in the past. HOW will the participant work towards satisfying their adherence-related needs?

b. Critical Components:
   i. Identify several strategies that the participant may use or currently does use to address her adherence-related needs
   ii. Empower problem solving: First ask the participants to identify strategies, then offer suggestions that are participant-specific (reflecting this participant’s context and needs) only after the participant has been provided the opportunity to explore their own suggestions.

7. NEGOTIATE: Agree on a goal identified by the participant.

a. Goal: Create a “goal” by working with the participant to help her identify a strategy or strategies that she is willing to try or continue to use that feels achievable and realistic to her.

b. Critical Components:
   i. Help the participants identify a strategy that becomes a goal to accomplish between visits. This may be something the participant already does or is something new.
   ii. Support the selection of a goal that is achievable. It’s critical that the participant feels progress and success, which may involve the selection of a “small” step.
   iii. The goal is not necessarily trying something new or committing to trying a study product use strategy at all. A participant may simply set a goal to come back in to talk with you or to remain open to discussing experiences. It’s better to respect and work with their uncertainty
then to suggest strategies for keeping the ring inserted that may not make sense for the participant.

8. **CLOSE: Summarize what was discussed; thank the participant for engaging in the discussion and contributing to the study; document the session.**

   a. **Goal:** Provide a summary of what was discussed (context, needs, strategies, goals). Express appreciation for the participant’s engagement in this conversation/exploration as an important contribution to the study. After participant leaves, document or finalize documentation of the session.

   b. **Critical Components:**

      i. Model, empower, and celebrate problem-solving around ring use by providing a summary of the discussion and thank the participant.

      ii. A thorough summary will include brief comments on:

          1. the **context** that “situates” one’s **needs** for fitting product use most easily into her life,

          2. new or current **strategies** focused on increasing or sustaining keeping the ring inserted that were discussed, that then led to a

          3. **goal** to do, try, or continue to use a strategy (strategies) between now and the next visit.

      iii. Document the session on a worksheet so that the next counseling visit can reflect on the strategy (strategies) the participant said she would consider. This will provide continuity for the participant, even if she meets with another counselor at the next visit. Subsequent sessions may be shorter, if participants mention that the context has not really changed, or that previous strategies continue to “work” well. Each step of the counseling process is still briefly touched upon, but by having documentation of previous sessions and reviewing these before the participant visit, a sense of history can ease the discussion. Participants should always have some goal from the previous visit and this must be well documented in order for the next visit to appropriately reflect on potential progress towards that goal.