

GENERAL TIPS ON ANSWERING QUESTIONS

Validate your clients' concerns about asking questions.

Give affirmation to the client who asked the question.

- "Thanks for asking..."
- "That's a good question. Tell me more about what you'd like to know."

Consider every question to be a valid question.

Don't assume you know what's being asked. Questions indicate the clients thoughts, not necessarily actions. To clarify without causing embarrassment, try these cues:

- "Sounds like you've got a real concern - can you tell me more about what's on your mind?"

Normalise' the question.

- "Many clients probably wonder about this..."

Answer every question as best you can.

Assess whether the question is related to information, feelings, values, or a combination:

a) **Answer the factual information** part of the question first. Consider the following:

- The knowledge/ background of your client
- Age appropriateness
- The most simple and straightforward way to answer the question

b) **Address feelings** that may arise from a question.

- "I'm a bit uncomfortable with this"
- "We all are embarrassed sometimes, but it is important to discuss..."

c) **Identify the value component** of the question and if necessary refer your client for help with decision-making.

- "This question relates to personal decisions and may vary from individual to individual; so I can not give you a definite answer. It's best for you to get all the information you can discuss this with your _____."

Be honest about your information or your lack of information. All care workers may have difficulty with a question. Don't be afraid to say, "I don't know - I'll have to check." Ensure that you follow through. If you say you'll get information or a booklet, do it.

Other sources of information:

- Fact Sheets
- Glossary
- Related Websites
- Community Resources

Types of questions and possible answers

Questions about sexuality can usually be grouped into four broad overlapping categories:

- 1. Requests for information
- 2. "Am I normal?" questions
- 3. Permission Seeking questions
- 4. Shock questions

REQUESTS FOR INFORMATION

If you know the answer, provide information within your guidelines.

If you do not know the answer, it is okay to say, "I don't know". You can either refer them to an appropriate source or find out the answer through other sources of information.

Is the question inappropriate?

When establishing ground rules, establish parameters such as "If a question is asked which I choose not to answer, it is not because it is a bad question. I may feel that I need advice.

"AM I NORMAL?" QUESTIONS

These questions generally focus on concerns about their bodies and the emotional and physical changes they are experiencing.

Validate their concern, e.g.: "Many people worry that ... " and provide information about what they can expect to happen now things are different.

Refer them to someone you know at work that can help, their GP, nurse, counsellor or psychosexual therapist for further discussion, if appropriate.

PERMISSION SEEKING QUESTIONS

These questions come in two common forms, both seeking permission to participate in a particular behaviour, e.g.:

- * Is it normal to ...? or
- * Did you.. when you were feeling like this?

Avoid the use of the word "normal" when answering questions. Normal for some is morally "improper" for others. Present the facts such as what is known medically, the legal issues, and risk factors and consequences. Always give positive reinforcement that seeking information and discussing issues is an important way for them make a decision to suit their needs.

SHOCK QUESTIONS

These questions may be raised due to embarrassment about the topic, an underlying concern, or simply to divert attention from the topic.

- o Assume positive intent - seemingly "silly" questions are a means by which more sophisticated questions can be formulated.
- o Reword the vocabulary or slang to diffuse the question, especially if you have previously established ground rules related to vocabulary. For example, a question such as, "Should your balls hurt for days after being hit?" could be addressed by saying, "First, the correct term for balls is testicles. Testicles are very sensitive, and do hurt when hit. Pain which lasts for more than a day is cause for concern. If your testicles are sore for more than a day, you should see your doctor to rule out any problems."
- o Try to address the underlying concern or use a segment of the question for discussion. "It sounds like you are asking a question about respect in relationship"
- o If you are uncomfortable with the question, defer it until you have time to think about how to address or reword it.

Reference:

<http://www.teachingsexualhealth.ca/teacher/lessonplans/differingabilities.html>