

## CONDUCTING A PSYCHOSOCIAL RISK ASSESSMENT

### The HEADSS Assessment

- The **HEADSS** assessment is a screening tool for conducting a comprehensive psychosocial history and health risk assessment with a young person
- **HEADSS** also provides an ideal format for a preventive health check.
- It provides information about the young person's functioning in key areas of their life:
  - H – Home
  - E – Education / Employment / Eating and Exercise
  - A – Activities and Peer Relationships
  - D – Drug Use / Cigarettes / Alcohol
  - S – Sexuality
  - S – Suicide / Depression / Mood

### The HEADSS assessment provides a systematic framework for:

- developing rapport with the young person
- performing a risk assessment and screening for specific risk behaviours
- identifying the young person's strengths and protective factors
- identifying areas for intervention and prevention

### Conducting a HEADSS Assessment

- Introduce the assessment and explain what you are doing:

**Example:**

*“There are many health risks for young people today. In order for me to get a better understanding of each patient, I like to ask them about different areas of their life and how these might affect their health. If it's okay with you, I'd like to ask you a few questions about how things are going in different areas of your life.”*

- Reassure the young person about confidentiality
- **HEADSS** is designed to start with less sensitive areas of a young person's life and move towards more sensitive

### **Asking sensitive questions**

Request permission to ask sensitive questions, for example:

*'If it's all right with you, I'd like to ask you some personal questions. The reason that I want to ask you these is because I'm trying to get a picture of your overall health and who you are. Remember that anything we discuss will be confidential with the exception of those things I mentioned before. Is it OK if I ask you some more questions?'*

- Use a 'third-person' approach:

*Example:*

*"Some young people your age are starting to experiment with drugs or alcohol (or sex). Have any of your friends tried these? How about yourself?"*

Progress from neutral to more sensitive topics, for example:

- If the adolescent mentions that they have a boyfriend or girlfriend, a further question might be:

*"Can I ask his/her name? How long have you been going out with him/her? Has the relationship become more sexual? How do you feel about that?"*

### **Wrapping Up the Assessment**

- At the end of the **HEADSS** assessment, the GP should have a profile of:
  - the young person's psychosocial health
  - the overall level of risk of the young person
  - specific risk factors in their lives, as well as protective factors and strengths
  - areas for intervention
- Compliment the young person on their strengths and areas in their life where they are doing well
- Identify and discuss any issues of concern
- Help the young person to identify risks associated with their behavior and to identify strategies for reducing risks
- Identify problems for early intervention and follow-up
- Provide health education about particular health issues or risk behaviors