

HEADS ASSESSMENT

Information that can be obtained from a HEADS Assessment

Home	<p>Where they live</p> <p>With whom they live</p> <p>Whether there have been recent changes in their home situation</p> <p>How they perceive their home situation</p>
Education/ Employment	<p>Whether they study/work</p> <p>How they perceive how they are doing</p> <p>How they perceive their relation with their teachers and fellow students/employers and colleagues</p> <p>Whether there have been any recent changes in their situation</p> <p>What they do during their breaks</p>
Eating	<p>How many meals they have on a normal day</p> <p>What they eat at each meal</p> <p>What they think and feel about their bodies</p>
Activity	<p>What activities they are involved in outside study/work</p> <p>What they do in their free time – during week days and on holidays</p> <p>Whether they spend some time with family members and friends</p>
Drugs	<p>Whether they use tobacco, alcohol, or other substances</p> <p>Whether they inject any substances</p> <p>If they use any substances, how much do they use; when, where and with whom do they use them</p>
Sexuality	<p>Their knowledge about sexual and reproductive health</p> <p>Their knowledge about their menstrual periods</p> <p>Any questions and concerns they have about their menstrual periods</p> <p>Their thoughts and feelings about sexuality</p>

	<p>Whether they are sexually active; if so, the nature and context of their sexual activity</p> <p>Whether they are taking steps to avoid sexual and reproductive health problems</p> <p>Whether they have in fact encountered such problems (unwanted pregnancy, infection, sexual coercion)</p> <p>If so, whether they have received any treatment for this</p> <p>Their sexual orientation</p>
Safety	<p>Whether they feel safe at home, in the community, in their place of study or work; on the road, etc.</p> <p>If they feel unsafe, what makes them feel so</p>
Suicide/ Depression	<p>Whether their sleep is adequate</p> <p>Whether they feel unduly tired</p> <p>Whether they eat well</p> <p>How they feel emotionally</p> <p>Whether they have had any mental health problems (especially depression)</p> <p>If so, whether they have received any treatment for this</p> <p>Whether they have had suicidal thoughts</p> <p>Whether they have attempted suicide</p>