LET'S TALK ABOUT SEX: Taking a Sex History and Talking about Sex with Patients



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SPEAKER INTRODUCTION

- Education & Experience
- Influence & Inspiration
- Profession & Purpose

OBJECTIVES

- Describe 2 benefits to discussing sexuality with patients / clients
- Identify how personal values can impact how you talk about sex and sexuality
- Answer sex education questions in a factual, objective and developmentally-appropriate manner

GROUP RULES

- Confidentiality
- Respect
- Judgement-free zone
- Have fun
- Any others?



Disclaimer – Stories & questions...

Quick questions are A OK; please keep stories and longer questions for break, one-on-one

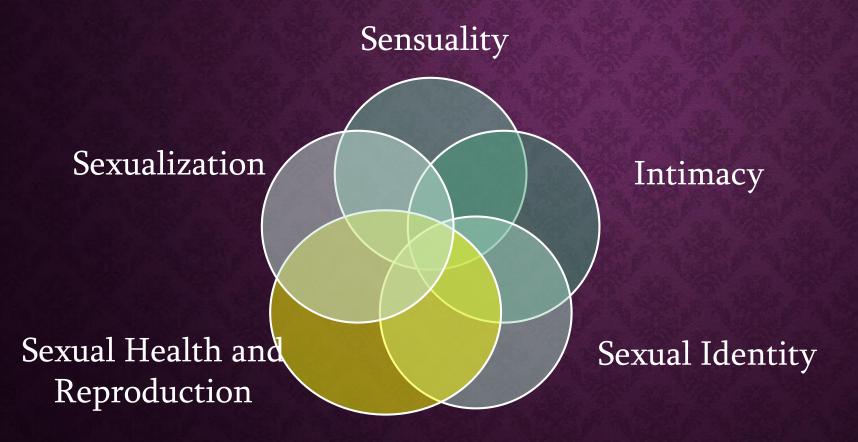
What is SEX?

- Sexual intercourse → Oral, Anal, Vaginal
- Biological sex as identifier

What is SEXUALITY?

- One's ability to be sexual
- Sexual identity
 - Straight, gay, lesbian, bisexual, etc.
- Relationships, body image, flirtation, reproductive health
- Infinite other possibilities...

THE CIRCLES OF SEXUALITY



Sensuality

Awareness, acceptance of and comfort with one's own body; physiological and psychological enjoyment of one's body and the bodies of others

Intimacy

The ability and need to experience emotional closeness to another human being and have it returned

Sexual Identity

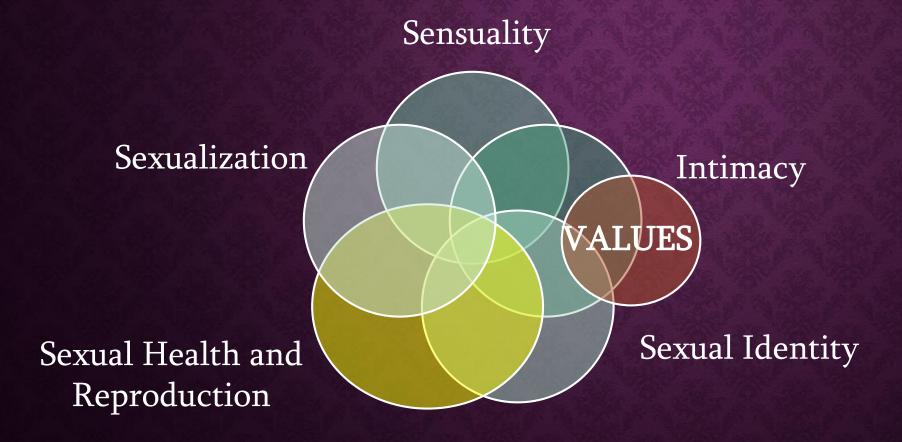
The development of a sense of who one is sexually, including a sense of maleness and femaleness

Sexual Health and Reproduction
Attitudes and behaviors related to producing children, care and maintenance of the sex and reproductive organ, and health consequences of sexual behavior

Sexualization

The use of sexuality to influence, control or manipulate others

THE CIRCLES OF SEXUALITY



VALUES CLARIFICATION DISCLAIMER

Disclaimer: This is <u>not</u> a debate. This is a conversation.

1 STATEMENT. 2 CARDS. YOUR CHOICE.

POINTER
FINGER IN
THE AIR

CLOSED FIST IN THE AIR

TEENS CAN MAKE GREAT PARENTS.

SEX FOR MEN IS BIOLOGICALLY DRIVEN.

SEX FOR WOMEN IS BIOLOGICALLY DRIVEN.

IT IS ACCEPTABLE TO HAVE SEXUAL GRATIFICATION WITHOUT LOVE.

MASTURBATION FOR PLEASURE IS A WONDERFUL PRACTICE.

AN OPEN RELATIONSHIP CAN BE A HEALTHY ARRANGEMENT IF BOTH PEOPLE AGREE TO IT

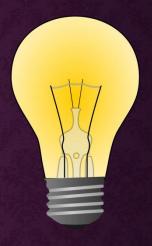
PEOPLE WHO CURRENTLY HAVE MULTIPLE SEXUAL PARTNERS ARE PROMISCUOUS.

PEOPLE WHO ARE INTO KINK PROBABLY HAVE SOME KIND OF MENTAL HEALTH ISSUE

ORAL SEX IS A WONDERFUL PART OF LOVEMAKING

PROCESSING

- 1. How was this for you / what did you notice about our group?
- 2. Do you feel you were able to be as honest as you would have liked to be? If not, what hindered your response?



KNOWING YOUR VALUES

- 1. How do your personal <u>sexual</u> values affect someone's work with patients?
- 2. What are the potential <u>consequences</u> of communicating your values to your patients?

WHAT MEDICAL STAFF NEED TO ASK

LET'S TALK ABOUT

TAKING A SEXUAL HISTORY

- Ask about sexual orientation, who they have sex with and what is their gender
- Most people want and/or appreciate being asked
- BENEFITS
 - More trust
 - Greater honesty
 - More accurate diagnosis
 - Higher quality health care

TAKING A SEXUAL HISTORY

- Respect & Honor
 - Gender-affirming pronouns & Names
 - Definitions of family and partners
- Use
 - Gender neutral language wherever possible
 - Partner neutral language whenever possible
 - The terms and identifies your patients share with you

WORKING DEFINITIONS THANKS DR. NEIL CANNON

- Sexual Minority Anyone whose sexual identity, orientation or practices differ from the majority
- Kink Umbrella term for unconventional sexual fantasy or behavior
- LGBTQQI+ Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex, etc.
- MSM Men who have sex with Men (not nec. Gay)
- Gender Identity A person's objective experience of their own gender
- Sexual Orientation The gender a person is attracted to
- Vanilla Within the range of majority sexual practices

MICRO-AGGRESSIONS IN HEALTHCARE THANKS DR. NEIL CANNON

- Only 2 gender boxes on forms: Male or Female
- Binary Bathrooms in medical offices / buildings
- Binary pronouns instead of gender neutral terms
- Judgmental words such as promiscuous, deviant
- "Sex Addiction" which is not a clinical diagnosis in the DSM-V. This concept has been rejected by the American Association of Sex Educators, Counselors & Therapists

WORDS MATTER

REASONS & RATIONALE TO DISCUSS SEXUALITY WITH PATIENTS / CLIENTS

I'd like to talk about a personal problem – it's to do with sex.

TAKING A SEX HISTORY

- USE THIS (or similar) SCRIPT:
- "I am going to ask you a few questions about your sexual health and sexual practices. I understand that these are very personal but they are important to your overall health. Just so you know, I ask these questions of all of my patients, regardless of age, gender, or marital status"
- (continued next slide)

TAKING A SEX HISTORY

• "These questions are as important as the questions about other areas of your physical and mental health. Like the rest of our visits, this information is kept in strict confidence. Do you have any questions before we get started?"

TAKING A SEX HISTORY

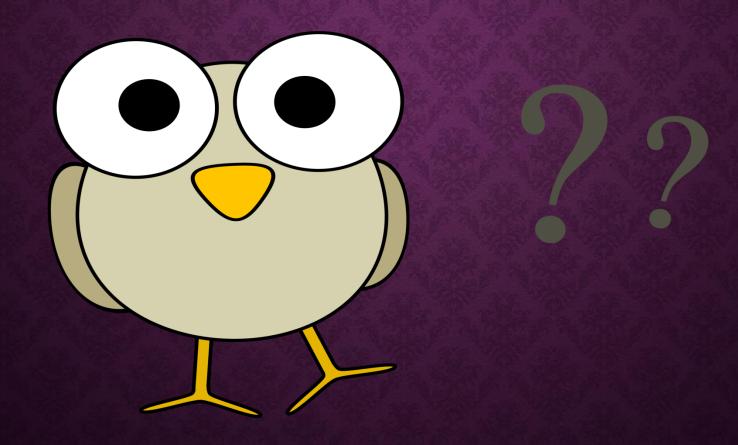
- Ask about 5 "P"s of Sexual Health
- Partners
- Practices
- Protection from STIs
- Past History of STIs
- Prevention of Pregnancy
- And the "6th P" of Pleasure....

EASY-PEASY!

FIND THE RESOURCE: TAKING A SEX HISTORY

- Google.com
- Search: Taking a Sex History
- First hit: CDC PDF "Taking a Sex History"
- https://www.cdc.gov/std/treatment/sexualhistory.pdf

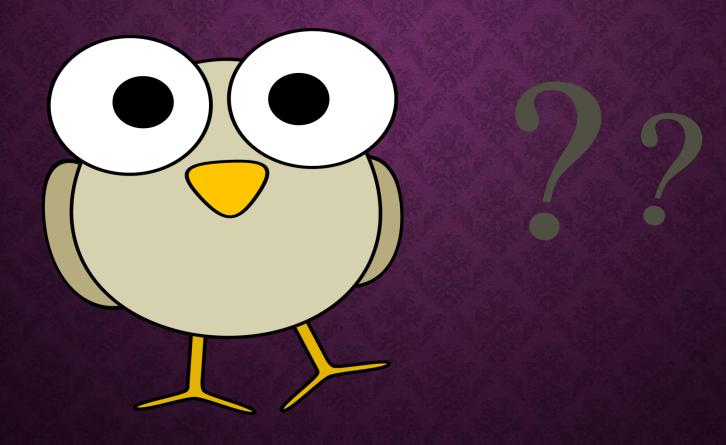
ANSWERING SEX QUESTIONS PROTOCAL···READY FOR THE STEPS?

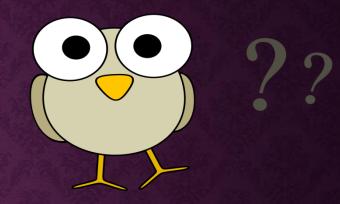


ANSWERING SEX QUESTIONS

- Why do people/ esp teens ask sex questions?
 - Facts/Info
 - "Am I Normal?"
 - Values / Personal Beliefs
 - Permission / Consent
 - Shock

ANSWERING SEX QUESTIONS YOUR TURN!





OPTIONS:

A. ANSWER THE QUESTION IF 100% CERTAIN

B. I DON'T KNOW...BUT I CAN FIND OUT.

C. FOR SOME ... FOR OTHERS ... FOR YOU ...

CLOSURE:

WHAT IS ONE THING YOU'LL TELL YOUR BFF? WHAT IS ONE THING YOU'LL DO TOMORROW? OR

WHAT IS ONE THING THAT MADE YOU GO HMMMMMM?

THANK YOU!

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