

# INCLUSIVE SEXUAL HEALTH ASSESSMENT: A GUIDE FOR HEALTHCARE PROVIDERS

## THE IMPORTANCE OF INCLUSIVE SEXUAL HEALTH ASSESSMENT



**Despite advances in preventative and treatment services, sexually transmitted infections (STIs) still pose a significant public health concern.** Common STIs include chlamydia, gonorrhea, genital herpes (HSV), syphilis, human papillomavirus (HPV, genital warts), hepatitis B, hepatitis C and HIV/AIDS. Access to routine sexual health assessment and testing is an essential component of health care and can contribute to interventions tailored to the needs of people at greatest risk for infection.<sup>1</sup>



**Sexual health assessment is an important part of a routine medical exam for all patients, regardless of gender identity, sexual orientation or culture.** While healthcare providers (HCPs) serve a diverse range of populations, sexual and gender minorities (lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual, plus – LGBTQIA+), ethnic minorities, and patients with low socioeconomic status often face discrimination and health disparities, including reduced access to healthcare services resulting in suboptimal sexual health care.<sup>2,3,4</sup> It is increasingly recognized that to effectively promote sexual health, health care services must be inclusive, culturally competent and accessible to all patient populations.<sup>5,6</sup>



**HCPs are well-positioned to provide sexual healthcare that helps to address health disparities and discrimination** based on racism, sexism, homophobia, biphobia, transphobia, ageism, ableism and other forms of oppression. A key step in providing inclusive sexual health assessment is to adopt a person-centred approach to address each patient's sexual healthcare needs.

## TIPS FOR INCLUSIVE SEXUAL HEALTH ASSESSMENT WITH PATIENTS

Sexual health is an essential component of overall health and well-being, yet providers often feel uncomfortable and avoid taking sexual histories due to the sensitivity of such questions.<sup>7,1</sup> Normalizing discussions about sexual health with patients can help promote awareness, increase personally relevant knowledge, reduce stigma and correct myths or misconceptions. All sexually active individuals are at risk for STIs to some extent. It is important to ensure awareness of STI risks and discuss steps to reduce them.

## CREATE A CULTURALLY SAFE & WELCOMING ENVIRONMENT

To create a health-supportive environment for all patients, providers can offer an inclusive, culturally safe, welcoming, and responsive space.<sup>8,1</sup>

### The following strategies can facilitate inclusive sexual health assessment:

- Assess your own comfort level discussing sexuality with different patient groups and identify any implicit biases that you may have.
- Practice having sexual health assessment conversations, using inclusive and accurate language.
- Attempt to make your patient feel comfortable and establish a rapport before asking sensitive questions about sexual health.
- Welcome and normalize disclosures of sexuality, sexual orientation, gender identity and sexual practices. Avoid making assumptions and ask what your patient's gender identity is and what gender pronouns they use.
- Use neutral and inclusive terms such as "partner", and pose questions (including open-ended questions) in a nonjudgmental manner. Respect the values and beliefs of patients to foster trust and safety.
- Address myths and misconceptions regarding gender identity, sexuality, and sexual orientation by challenging misogynistic and homo/transphobic biases.
- Rephrase questions or briefly explain reasons for asking a question to ensure understanding or avoid confusion.

## ASSESSING PATIENT SEXUAL HEALTH: AN 8 P APPROACH

The 8 P's approach of this guide is built on the U.S. Centers for Disease Control 5 P's approach to taking a sexual history.<sup>9</sup> The 8 P's approach comprises of these categories: Permission (consent), Practices, Partners, Past history of STIs, Protection from STIs, Pregnancy intentions, Pleasure, and Partner Violence and Past Trauma. By obtaining a comprehensive sexual history, HCPs can accurately assess patient's sexual health and tailor personalized health plans.

**Effective practices:** Follow-up by asking additional questions to better understand your patient's sexual health, determine whether you need to recommend screenings or vaccinations, referral, and offer appropriate counseling.

**Sample phrase:** *After talking to you about your sexual practices, I would like to propose some ways to help minimize your risk for STIs. Based on the assessment, I recommend that we do some STIs screening and subsequently discuss other prevention measures.*

### Prevention

- Educate and counsel patients on STI modes of transmission, symptoms, and prevention/safer practices.
- Advise on the use of PrEP and PEP for patients at risk of HIV.
- Recommend condom or dental dams use to all sexually active patients. In cases of latex-allergy, recommend polyurethane or polyisoprene condoms.
  - Refer to *Condoms are a good choice to protect sexual health* infographic.
- Discuss and address contraceptive options.
- Recommend annual STI testing every 3 months if patient/partner has multiple sexual partners.
- Recommend and provide relevant up-to-date vaccination for STIs (e.g., HPV, hepatitis A and B) when indicated.

### Screening & treatment of STIs

Offer STI screening and treatment, as appropriate. Screening is an important component of sexual health care, and this should be tailored to the client's specific sexual practices and behaviours.

- Patients and their partners should also be tested and treated for suspected STIs. Ensure follow-up for re-testing and counselling using up-to-date protocols to minimize the risk of STIs.
- Consider referral to trauma-informed counselling services or local crisis in cases of sexual violence or assault.

## THE 8 P'S APPROACH

### 1 PERMISSION (CONSENT)

Ensure you gain informed consent from the patient before proceeding. Inform the patient that confidentiality will be maintained.

#### SAMPLE QUESTIONS

*I'm going to ask you a few questions about your sexual health. Since sexual health is very important to overall health, I ask all my patients these questions. If you're uncomfortable answering any of these, just let me know, and we'll move on. To begin, are there any sexual health concerns you would like to discuss today?*

### 2 PRACTICES

Identifying sexual activities can facilitate appropriate screening procedures for STIs and determine the need for pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP) to prevent HIV.

- Are you currently sexually active with one or more partners? (If no: "Have you ever been sexually active?")
- What kinds of sex do you engage in? (e.g., oral sex, vaginal sex, anal sex, sharing sex toys)
- How do you feel about having sex? Is it a good thing or bad thing for you?

Screen for other risks, such as alcohol and substance use.

### 3 PARTNERS

Do not assume a person's sexual orientation based on their sexual practices or the gender identity or physiology of their sexual partners.

- How many partners have you had sex with in the past 12 months?
- Tell me about your partners and their gender identity and sexual orientation.
- Are you having any difficulties with your sexual relationships?

### 4 PAST HISTORY OF STIs

Ask about previous STIs and STI testing.

- Have you ever had an STI (sexually transmitted infection)?
- Have you been tested for STIs such as HIV? If yes, when and what were the test results?

### 5 PROTECTION FROM STIs

Screening for HIV and STIs is an essential component of sexual health, learn about protective behaviours to identify sites of exposure and other risk factors.

- When was the last time you had unprotected sex (i.e., sex without a condom)?
- What do you do to protect yourself from STIs?
- Do you use condoms/dental dams whenever you have sex? How often?
- Do you regularly get screened for STIs?
- Have you been vaccinated against Hepatitis A, Hepatitis B or HPV? (When was your last Pap smear test for cervical cancer screening?)

### 6 PREGNANCY INTENTIONS

Avoid assumptions about pregnancy risk or need for prevention but educate on contraceptive methods.

- Do you have any plans for pregnancy or desires to have (more) children?
- If not, what are you doing to prevent pregnancy?
- Do you or your partner(s) currently use any contraception or practice any form of birth control?

### 7 PLEASURE

Identify practical ways to improve access to sexual pleasure (e.g., enhanced communication, lubrication, sex toys).

- Do you have questions or concerns about sexual functioning during partnered sex and self-pleasure (masturbation)?
- Do you have pain during sex?
- Do you experience difficulties with vaginal dryness, erection, ejaculation, orgasm, or another part of your sexual activities?

### 8 PARTNER VIOLENCE AND PAST TRAUMA

Assess relationship safety and approach trauma experiences from the patient's identity.

- Have you ever had non-consensual sex?
- Have you experienced or are you now experiencing physical, sexual, or emotional violence or abuse or assault from your partner or someone close to you?
- Do you feel safe in your relationships?
- Do you need trauma-informed support services? (Provide referral)

# INCLUSIVE SEXUAL HEALTH ASSESSMENT CHECKLIST

This checklist provides basic information to ensure inclusive sexual assessment. There is a need to access sexual health information and services that is accurate, evidence-based, inclusive, culturally sensitive and trauma-informed.

## Create a culturally safe and welcoming environment

- Discuss sexual health history as part of the overall health assessment.
- Gain permission and ensure confidentiality.

## Adopt the 8 P's approach

- **Practices:** Have you been sexually active in the past year?
- **Partners:** How many sexual partners have you had in the past year?

### Sexually active in the past year (single partner or multiple partners)

#### Ask about:

- Partners
- Past history of STIs
- Protection from STIs
- Pregnancy intention/protection
- Partner violence/past trauma
- Pleasure
- Any questions or concerns

### Not sexually active in the past year

#### Ask about:

- Past partners (if new patient)
- Past history of STIs
- Past history of partner violence/trauma
- Any questions or concerns

## Follow-up as appropriate

Counselling for prevention, STI screening and treatment, and referrals

## FOR ADDITIONAL INFORMATION, PLEASE CONSULT:

- **Public Health Agency of Canada (PHAC):** [Sexually Transmitted and Blood Borne Infections \(STBBI\) prevention guide](#)
- **Canadian Paediatric Society (CPS):** [Comprehensive sexual health assessments for adolescents](#)
- **The Canadian Public Health Association (CPHA):** [Trauma-informed physical examinations and STBBI testing: A guide for service providers](#)

## References

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