Sexual Health Education and Counseling

ISSWSH 2014 Fall Course Sharon J. Parish, MD, IF, NCMP

Disclosures

 Advisory Board: Sprout, Pfizer, SST, Emotional Brain, Apricus

Objectives

 Learning objective: Implement the patientcentered, collaborative motivational interviewing technique Ask-Tell-Ask in sexual problem counseling for female sexual dysfunctions.

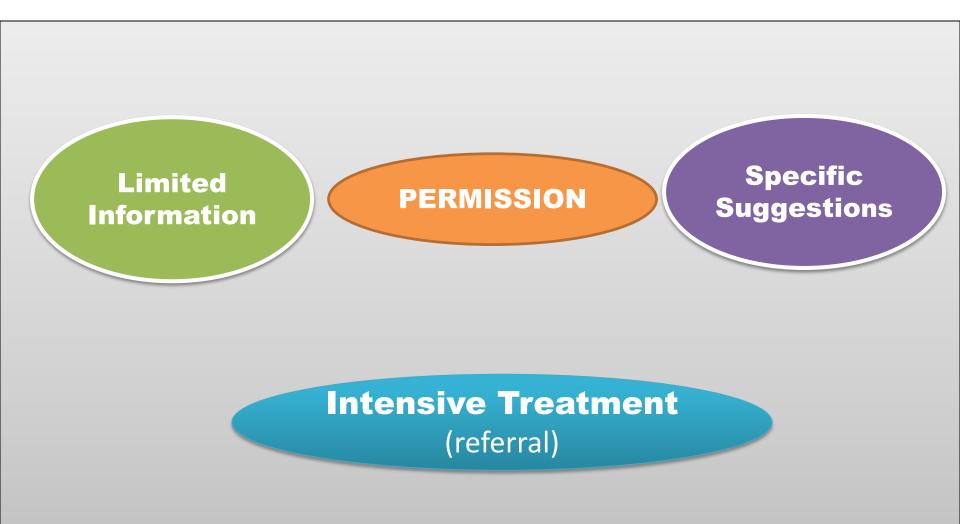
Patient Centered Sexual Health Encounter

- Step 1: Obtain the Narrative
- Step 2: Normalize and Universalize the Inquiry and the Concern
- Step 3: Empathically witness/delineate the patient's situation and "pain" in the room
- Step 4: Restate/reframe sexual legitimate concerns as problems which can be addressed
 - Manage/reschedule
 - Refer

Sexual Medicine Communication Tasks

- Screen and identify sexual concerns
- Diagnose sexual problems, assess causes & factors
- Delineate impact and distress, empathically witness, offer support & partnership
- Reframe attention to sexual problem
- Explain impact of medical problem and/or treatment on sexual health
- Obtain informed consent for procedure or therapy
- Explain treatment and/or behavioral advice
- Recommend referral

EX: PLISSIT COMMUNICATION TOOL FOR SEXUAL HISTORY



Therapy: Empathic Delineation

- Normalize and universalize the problem/ emotional response, side effect
- Reframe attention to sexual problem as legitimate priority
- Part of the therapy is discussing the problem: empathically delineating the problem begins the process of helping the woman solve it.

Emotionally Supportive Communication: "NURSE"

- Name
- Understand
- Respecting
- Support
- Explore

- Confirm understanding & alignment of patient's feelings
- Validate: normalize & universalize
- Empathically witness patient's efforts
- Offer partnership and actions (treatment)

Smith RC. Patient-centered interviewing: an evidence-based method. Philadelphia: 2002 Smith et al. Patient Educ Couns. 2000;39:27-36.

Using the NURSE process

- Name: I can see you are very upset about your last sexual experience with George.
- Understand: I can understand why it would be physically painful and emotionally upsetting to try to initiate sex without any preparation for dealing with your symptoms.
- Respect: It is great that you took the step to come in and speak to me about it.
- Support: I am here to help.
- Explore: We can explore possible solutions, such as discussing how you feel about agreeing to sexual activity or how you might be more physically comfortable.

Core MI Communication Skills

- Three Core Communication Skills
 - Asking
 - Open ended questions
 - Listening
 - Silence, reflection, summarizing
 - Informing
- Strategies for Informing
 - Ask permission; Offer options
 - Chunk-Check-Chunk
 - Elicit-Provide-Elicit
 - Ask-Tell-Ask

Ask-Tell-Ask: First Ask

- Ask an open-ended question "Tell me what you know about lubricants ..."
- Learn what the patient thinks that is
 - Correct
 - Mistaken
 - Next piece of information to explain
- Assess resistance to change

Ask-Tell-Ask: Tell

- Tell focused information in response to answer to first ask
- Reinforce correct information
- Correct mistaken beliefs
- Add the next piece of information
- Recommend treatment/change

Ask-Tell-Ask: Second Ask

- Assess patient comprehension:
 - "Tell me in your own words what you understand about..."
- Assess reaction:
 - "How do you feel...What do you think about what I have told you about your sexual concern?"
- Assess intention/change:
 - "Now that we have had a chance to discuss this, what are your thoughts about...using lubrication, introducing a vibrator into foreplay?"

Decision for Treatment is a Balance Between Perceived Need & Concerns

Perceived need for treatment

Concerns about treatment



Female Sexual Dysfunction Treatment Platform

- Educate couple on female and male sexual response and dysfunction, specifically addressing lack of comparison
- Educate couple on communication skills and identification of sexual expectations
- Educate couple on how diet, exercise, and stress reduction affect sexual health
- Educate couple on use of fantasy to prime sexual pump
- Educate couple on benefits of self stimulation
- Educate couple on types and techniques for orgasm
- Educate couple on female anatomy

NAMS: Sexual Counseling

- Educate couples about normal, age-related sexual response changes in women (e.g. diminished lubrication, increased time for stimulation)
- Educate couples about normal, age-related sexual response changes in men (e.g. decreased rigidity, increased time for stimulation)
- Warm baths before genital activity
- Extended foreplay, lubricants

NAMS: Sexual Counseling, contd.

- Sexual fantasies, erotica
- Experiment with non-coital activities: massage, oral stimulation
- Use masturbation as alternative to intercourse
- Change routine: location, time of day
- Change positions, other than "missionary"



Menopause Practice: A Clinician's Guide, NAMS