Taking a Sexual History & Behavioral STD Risk Assessment

MARCH 27, 2019
Lunch and Learns

The HIV/STD/TB/Hepatitis Program and the Dakotas AIDS Education and Training Center (DAETC) conduct monthly Lunch and Learn Webinars for health care professionals in North and South Dakota.

Each month a new topic will be held from 12:00 p.m. to 1:00 p.m. CST on the fourth Wednesday of the month.
Continuing Education Credits

Please complete the post-test to receive CEUs for this presentation. You must score at least 70% to receive credit.

You may take the post-test up to two weeks after the presentation. Post-test, along with the slides and the recording of this presentation can be found at:

https://www.ndhealth.gov/hiv/Provider/

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DAETC
Diabetes AIDS Education & Training Center
Taking a Sexual History & Behavioral STD Risk Assessment

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March 27, 2019
Objectives

• Identify barriers to obtaining sexual history

• Explain the importance of sexual history taking in the medical interview

• Identify behaviors that put patients at higher risk of HIV/STD

• List 5 key components of a routine sexual history

• Discuss “safer sex” interventions
Have you ever been asked to provide a detailed sexual history during your visits to the doctor?

1. Yes
2. No
3. Can’t recall
Have you ever been asked to provide a detailed sexual history during your visits to the doctor?

A) Yes

B) No

C) Cannot recall
Are We Doing Sexual Histories?

- Fewer than half of physicians report taking a sexual history from their patients
  - 40% of MDs screened adolescents for sexual activity
  - 15-40% asked questions of adult patients about # and gender of partners and condom use

- Kaiser Family Foundation patient survey
  - 12% were asked about STDs
  - 83% patients felt STDs should be discussed at a first-time Ob/Gyn visit
Do Providers Ask About Risk?

- **Primary Care Providers**: Bull 1999, N=208 providers
- **Private Physicians**: Tao 2003, N=317 physicians
- **Non-ID trained Physicians**: Duffus 2003, N=317 physicians
- **ID trained Physicians**: Duffus 2003
- **HIV Care Providers ongoing care**: Metsch 2004, N=417 providers

- **Visits**: N=12.7 million visits
- **Physicians**: N=317 providers
How do you rate your sexual history taking skills?

A) Exemplary
B) Excellent
C) Good
D) Poor
Barriers to Sexual History Taking

• Structural barriers
  • (time/reimbursement concerns)

• Patient barriers
  • (privacy/confidentiality concerns)

• Provider barriers
"Whoa—way too much information."
Provider Barriers

• Provider discomfort discussing sexual issues/health
• Personal bias/judgment
• Inadequate training
• Unfamiliar with content or language
• Perceived complexity of the sexual history
• Low priority given to STD prevention
  • Acute vs. preventive role perception
  • Low priority given to sexual health issues
  • Devaluation of behavioral interventions
What is your comfort level?

- Realize that your patients are vulnerable
- Understand that you are asking intimate questions
- Assess your own biases, misconceptions

What is your tone?
- Neutral – “Tell me about...”
- Professional – “I ask this of all patients”
- Calm
- Judgmental – “You had HOW many partners?”
- Shaming – “Stop misbehaving”
Sexual Health Models for STD/HIV Prevention

**Disease Model**
- Disease – To be avoided
- STD/HIV
  - Consequence of socially unacceptable behavior
    - Embarrassment
    - Stigmatizing
- Control Requires:
  - Testing
  - Treatment
  - Partner notification

**Sexual Health Model**
- Health = basic human right
- Sexual Health – Component of health
- STDs – threats to sexual health acquired in the course of sexual activity
- Health Preservation Through
  - Education
  - Vaccination
  - Testing (Screening)
  - Treatment
  - Communication between partners
When to obtain a sexual history?

- During initial visit
- During routine preventive exams
- When signs of STI are present
When NOT to obtain a sexual history

• When others are in the room
  • Obtain permission from patient or ask others to leave

• During the physical exam

• When discussing recommendations that do not depend on sexual risk (vaccines)
General Considerations for Taking a Sexual History

• Make no assumptions
  • Ask all patient about gender and number of partners
  • Ask about specific sexual practices
    • Vaginal, anal and oral sex

• Be clear
  • Avoid medical jargon
  • Restate and expand
General Considerations for Taking a Sexual History

• Be tactful and respectful
  • Use accepting, permission-giving language and cues

• Be non-judgmental
  • Recognize patient anxiety
  • Recognize our own biases
  • Avoid value-laden language
    • (“You should..”, “Why didn't you..”, “I think you..”)
How to start

• Make your patient comfortable
  • Establish rapport
  • Let them know that the sexual history is a routine part of the history
  • Explain how the sexual history will improve their medical care
  • Let them know their responses are confidential
  • Provide a non-judgmental environment
    • Don’t assume
Sexual Health and Your Patients: A Provider’s Guide

Resources for taking a sexual history: National Coalition for Sexual Health

Essential Sexual Health Questions to Ask Adults
Ask all of your adult patients the sexual health questions on this card. They will help you assess your patient’s level of sexual risk and determine which additional questions to ask and which preventive services are needed (other side of card).

Ask at Least Annually

Have you been sexually active in the last year?

NO

Have you ever been sexually active?

YES

Do you have sex with men, women, or both?

NO

Continue with medical history

YES

In the past 12 months, how many sexual partners have you had?*

Ask Older Adults

Has sex changed for you? If so, how?

Ask at least once, and update as needed. Gender identity and sexual orientation can be fluid.

1. What do you consider yourself to be?
   A. Lesbian, gay, or homosexual
   B. Straight or heterosexual
   C. Bisexual
   D. Other (please specify)
   E. Don’t know

2. What is your current gender identity?
   A. Male
   B. Female
   C. Transgender man
   D. Transgender woman
   E. Neither exclusively male nor female (e.g., non-binary or nonconforming)
   F. Other (please specify)
   G. Decline to answer

3. What sex were you assigned at birth?
   A. Male
   B. Female
   C. Decline to answer

*If patient answered “both” to previous question, ask this question for each gender.
Resources for taking a sexual history: National Coalition for Sexual Health

Essential Sexual Health Questions to Ask Adults

Ask all of your adult patients the sexual health questions on this card. They will help you assess your patient’s level of sexual risk and determine which additional questions to ask and which preventive services are needed (other side of card).

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**Ask at Least Annually**

- Have you been sexually active in the last year?
  - **YES**
  - Do you have sex with men, women, or both?
  - In the past 12 months, how many sexual partners have you had?*
  - How many sexual partners have you had?*

  *If patient answered “both” to previous question, ask this question for each gender.

- **NO**
  - Have you ever been sexually active?
  - Do you have sex with men, women, or both?
  - Continue with medical history

- **Ask Older Adults**
  - Has sex changed for you? If so, how?

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Example: CDC guide to taking a sexual history

“I am going to ask you a few questions about your sexual health and sexual practices. I understand that these questions are very personal, but they are important for your overall health.”

“Now I’m going to ask you some questions about your sex life.”
What to ask...The 5 “Ps”

• Partners
• Practices
• Protection for STI
• Past history of STI
• Prevention of pregnancy

Source: CDC guide to taking a sexual history
Partners

Who and how many?

• Ask about gender of partners
  • Example:
    • Do you have sex with men, women, transgender persons?
    • Do your partners have penises or vaginas?
Problematic ways to ask about sex partner gender

• How long have you been sexually active with your girlfriend?
  • Don’t make assumptions

• Are you gay, straight, or bi?
  • Sexual orientation ≠ sexual partners

• Are you attracted to men, women, or both
  • Doesn’t provide the information you need
Partners

Goal: Assess risk for STI/HIV

• “Are you currently sexually active? (Are you having sex?)” – or-
  • When is the last time you had sex (of any kind)

• “Have you ever been sexually active?”

• “In the past 2 months, how many sex partners have you had?”
  • Most relevant timing for STI risk

• “In the past 12 months, how many sex partners have you had?”
  • May provide insight into risk for HIV, HSV-2
Partners

“Do you think any of your partners were having sex with someone else while they were in a sexual relationship with you?”
Practices

GOAL: Determine at risk areas for STI which should be tested

• Extragenital testing recommended for MSM
  • Test based on exposure
  • Oral, anal, genital

• Women reporting increased anal sex, although no current recommendations to screen for women
Practices - other

GOAL: Determine risk behavior for HIV acquisition

• Concurrent drugs/alcohol

• Transactional sex
  • “Have you ever paid or gotten paid for sex?”
  • “Have you ever traded drugs or money from sex?”
Practices

• “What kind of sexual contact do you have or have you had?”
  • Genital (penis in the vagina)?
  • Anal (penis in the anus)?
  • Oral (mouth on penis, vagina, or anus)?
  • Sex toys – do you share?

• Answers will guide what extragenital testing is required
Protection

GOAL: Assess patient’s perception of risk and educate about risk reduction

“Do you and your partner(s) use any protection against STDs?”

• If not, could you tell me the reason?

• If so, what kind of protection do you use?

• How often do you use this protection?
  • If “sometimes,” in what situations or with whom do you use protection?
Protection

• “Do you talk to your partners about their STD status?”
• “Do you talk to your partners about their HIV status?”
• May be an opportunity to talk about strategies for disclosure
Motivating Condom Use

• Clinically determine how much risk reduction counseling is needed

• Tell me what steps you plan to take to make it easier to use condoms?

• Tell me about the times you have been successful using condoms?

• What situations made it easier to use condoms?
Motivating Condom Use

• What situations have made it difficult for you to use condoms?

• How can you change these situations so you will succeed most of the time?
Past history of STI

• “Have you ever been diagnosed with an STD? When? How were you treated?”

• “Have you had any recurring symptoms or diagnoses?”

• “Have you ever been tested for HIV, or other STDs? Would you like to be tested?”

• “Has your current partner or any former partners ever been diagnosed or treated for an STD?”

• “Were you tested for the same STD(s)? If yes, when were you tested? What was the diagnosis? How was it treated?”
Pregnancy: sample questions

- “Are you currently trying to conceive or father a child?”
- “Are you concerned about getting pregnant or getting your partner pregnant?”
- “Are you using contraception or practicing any form of birth control? Do you need any information on birth control?”
Don’t close the door!

- You may have provided a safe space for patients to bring up issues they were not comfortable with before
  - “What other things about your sexual health and sexual practices should we discuss to help ensure your good health?”
  - “What other questions would you like to discuss?”
The 6th “P”: Prevention

• Have you been vaccinated for Hep A and Hep B?
• Have you been vaccinated for HPV?
• Are you interested in learning more about PrEP?
Populations

- Adolescents
- Transgender
- Cultural competency
- Know your population
Do you have someone who can help you practice taking a sexual history with you during this webinar?

1. Yes
2. No
Practice Interviews

• Find a partner

• Assume you have established rapport

• Start with basics:
  • Partners
  • Practices
  • Protection
  • Past STI
  • Pregnancy
Practice interview #1
Patient:  Man or Woman

• Sex with men

• 6 partners in past 2 months

• Occasional condom use with 5 partners, none with regular partner

• Oral, anal sex

• Past history of chlamydia
Practice interview #2:
Patient: Man or Woman

- Sex with men and women
- 3 partners in last 2 months (1 man, 1 transgender woman, 1 woman)
  - Male partner has other male partners
- 6 partners past year
- Oral, insertive/receptive anal, vaginal sex
- No condom use
- Past history of syphilis
- Does not desire pregnancy
How do you rate your sexual history taking skills?

A) Exemplary
B) Excellent
C) Good
D) Poor
Resources

• National Coalition for Sexual Health: A Provider’s Guide
  • www.ncshguide.org/providers

• CDC
  • “A guide to taking a sexual history”
    • http://www.cdc.gov/std/treatment/SexualHistory.pdf
STD Clinical Consultation Network (STDCCN)

- Provides STD clinical consultation services within 1-3 business days, depending on urgency, to healthcare providers nationally
- Your consultation request is linked to your regional PTC’s expert faculty
- We are just a click away! www.STDCCN.org
National STD Curriculum
http://std.uw.edu
Want to know more about STDs? There’s an app for that.

- CDC Treatment Guidelines App for Apple and Android
- (Search for “STD Tx”)
Want to know more about STDs? There's an app for that.

- Free App
- Download from Apple App Store
- Features current STD Treatment Guidelines

News Section
STD Resources

- University of WA STD Prevention Training Center
  - www.uwptc.org

- National Network of STD/HIV Prevention Training Centers
  - www.nnptc.org

- CDC Treatment Guidelines
  - www.cdc.gov/std/treatment

- American Social Health Association (ASHA) booklets, books, handouts, the Helper
  - www.ashastd.org
  - (800) 230-6039
Vaginal Self-Testing Visual Guides

- Available in English and Spanish
  - 16” x 20” wall posters
  - 8.5” x 11” patient reference charts
- Contact aradford@uw.edu for free copies for your clinic
**STI Self-Testing Program: GC/CT**

Available in English and Spanish

Email aradford@uw.edu for free posters for your clinic
Thanks to:

Julie Dombrowski
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Hillary Liss
Ned Hook
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- Dr. Christine Johnston

CEU: [www.ndhealth.gov/HIV/Provider](http://www.ndhealth.gov/HIV/Provider)

Next Lunch and Learn: April 24th, 2019 at 12pm CT
- [North and South Dakota 2018 Epi Data](http://www.ndhealth.gov/HIV/Provider)