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Providing for Women's Well-Being: A Sexual Health Conversation Guide for Clinicians

Submitted on Jul 23, 2024



Posed by models

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The ability to have pleasurable, safe sexual experiences if one chooses to has been identified as a central aspect of health and wellbeing by the World Health Organization and other institutions worldwide. To make this assertion a reality, healthcare providers must be equipped to discuss pleasure and HIV prevention with women as part of their sexual and reproductive healthcare, and their overall wellness.

Through meaningful dialogue rooted in shared decision-making and respect, providers can normalize HIV and integrate prevention into efforts to support women's overall health – including their sexual health, pleasure, and bodily autonomy. Below is a series of considerations, talking points, and shareable infographics to help inspire and guide these crucial conversations.

This resource is part of SHE/HER/THEY (Sexual Health Education/HIV Empowerment Resources/Treating HIV Equally), The Well Project's educational outreach initiative focused on

improving engagement in care, health outcomes, and well-being for women living with and vulnerable to HIV while promoting language justice and holistic wellness through a non-stigmatizing lens.

Discussing Sex and Sexuality

When discussing sex and sexuality with patients:

- Be mindful of personal bias: How comfortable do you feel talking about sex in general or discussing sexual health outside of STI testing?
 - Recognize that bias may appear in judgments about a woman's sexual expression, sexual identity, and her choices about sexual or reproductive health
- Think outside the "five P's" (Partners, Practices, Past History of STIs, Protection from STIs, and Pregnancy Intention) to include Pleasure
 - Taking a detailed sexual history in a thoughtful, <u>trauma-informed</u> manner can be a crucial component of trust-building
 - Trauma-informed care should support self-advocacy
- Meet women where they are, while leaving room to expand the conversation
- Recognize that women may have sex related to survival, housing, or money, and it may involve drug use. These conversations should focus on harm reduction and not on judgement.

It is important to use an approach that:

- Leverages open-ended questions without assigning guilt and shame and without making assumptions about the ways people have sex ?or with whom they have sex??
- Encourages dialogue, neutrality, and mutuality
 - Mutuality is characterized by empathy, collaboration, and equality (i.e., acceptance of differences)
- Uses people-first language

Starting the Conversation

Below is a list of sample questions to help guide conversations with your patients about sexual health, wellness, and HIV prevention, including PrEP (pre-exposure prophylaxis). These questions are designed to normalize HIV within women's healthcare.

- Are you currently? ?having sex?
 - (Have you had sex since the last time we talked? Have you had sex since the last time you had a checkup?)
- There are numerous reasons people engage in sex including pleasure, intimacy, stress release, or for survival or housing?;? what are some of the reasons you have sex?
- What does sex look like in your life right now? What would your ideal sex life look like? What are
 the gaps between what sex looks like and your ideal sex life?
 - How can these gaps be addressed?
- To best support your sexual health, we should conduct screenings that take place at the body parts people use to have sex. Would talking about body parts be OK?
- What parts of your body are involved when you have sex?
- What affects or interferes with your ability to enjoy sex? (Examples can include stress, tension with partner?(s)?, family, pain, etc.)

- Routine HIV testing is recommended for all individuals aged 13-64 years (and many suggest younger and older). Unless you tell me not to, I plan to include an HIV test in your screenings today.
- Do you know the last time your partner(s) were tested for HIV?
- Do you have fears or concerns about HIV testing?
- What types of HIV prevention methods do you use? Are you familiar with PrEP? What have you heard? ??
- Are you aware of the ways PrEP may benefit you?
- PrEP is available via a daily oral pill or a bi-monthly injection. Is there an option you think would fit your life and schedule better? What might excite you about either of these methods? What ??hes??itations or questions would you have for either method??
- If PrEP is not right for you at this time, would you like to discuss it again in the future?
- Do you have a current or recent history of injection drug use?
 - Did you know that PrEP may help to reduce HIV acquisition via intravenous drug use by as much as 74 percent?

Download a PDF of the talking points

Infographics: Integrating HIV Prevention into Women's Wellness

Save and share the individual images below in jpeg or pdf format, or <u>download a pdf featuring the entire</u> <u>series</u> of infographics.

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It is important for healthcare providers to support the safety and bodily autonomy (control of decision-making about what does and does not happen to one's body) of women in relation to their sexual health. HIV prevention, including PrEP (pre-exposure prophylaxis), is a critical component of women's sexual and reproductive healthcare. Ultimately, integrating sexual pleasure and choice into women's overall wellness improves health outcomes.

Access discussion guide and resources: bit.ly/HCPSexHealthTalk

SHE/HER/THEY





Click the image above to save as a jpeg or share online; or download a printable pdf of "Overview: Integrating HIV Prevention into Women's Wellness"

HIV Testing



HIV Testing

- HIV testing and prevention must be recognized as a vital element of women's overall wellness and incorporated into sexual and reproductive healthcare efforts throughout a person's lifespan
 - These efforts need to be holistic, valuing all elements of women's well-being (e.g., physical, emotional, lifestyle preferences and choices)
- Women should be offered HIV testing as a part of their regular wellness routine as recommended in US federal HIV treatment and prevention guidelines, not just during pregnancy

Access discussion guide and resources: bit.ly/HCPSexHealthTalk

SHE/HER/THEY





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Reframing HIV Risk



Reframing HIV Risk

- Racism, geography, trauma experiences, and other non-behavioral factors are drivers of HIV vulnerability; it is important for providers to account for these factors by being more inclusive in who is offered HIV testing and prevention tools, including PrEP
- The language and framing of "risk" often proves not to be relevant to how women view their lives. There is an urgent need for providers to engage in dialogue that prioritizes overall wellness, especially in the context of HIV prevention

Access discussion guide and resources: bit.ly/HCPSexHealthTalk

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Normalizing HIV Testing and Prevention



Normalizing HIV Testing and Prevention

- Offering HIV testing and prevention options like PrEP to all sexually active women can normalize HIV prevention efforts
 - CDC recommendations instruct providers to talk about PrEP and its benefits
 with all their patients who are having sex, and to prescribe PrEP to anyone
 who wants it because some patients may feel uncomfortable reporting
 behaviors due to anticipated stigma
 - While Black women and other women of color are disproportionately impacted by HIV, they may not consider themselves affected by HIV or recognize the need for PrEP
 - Providing women with tools to understand the benefits of PrEP is a critical component of HIV prevention in the context of sexual health and harm reduction for injection drug use
 - Questions about sexuality and drug use should be presented in a factual, non-judgmental way

Access discussion guide and resources: bit.ly/HCPSexHealthTalk

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Sexual Pleasure and HIV Prevention



Sexual Pleasure and HIV Prevention

- Efforts to promote sexual pleasure have been demonstrated to improve the
 effectiveness of sexual and reproductive health interventions, including HIV
 prevention strategies
 - Providers need to engage women in discussions about sexual health that center women's sexual pleasure. While talking about sex may be challenging, discussions around sexual health may increase a sense of well-being and open the door to discussion around effective prevention and autonomy
 - Sexual and reproductive health mean different things to different women - providers need to meet them where they are
 - Prevention tools like PrEP can increase women's bodily autonomy (control of and decision-making about what does and does not happen to one's body) and sense of agency around sex

Access discussion guide and resources: bit.ly/HCPSexHealthTalk

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Share These Resources



Scan the QR code below

to access a discussion guide for healthcare providers on these topics, download our infographics, and find additional resources.



bit.ly/HCPSexHealthTalk







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The development of the above tools was supported by <u>NASTAD</u> through funding from the US Centers for Disease Control and Prevention (CDC) and a grant from Merck for SHE/HER/THEY.

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Additional Resources from The Well Project

Program Materials

SHE/HER/THEY (Sexual Health Education/HIV Empowerment Resources/Treating HIV Equally

Black Women Living with and Vulnerable to HIV in the US: Leadership Exchange LIVE

<u>Fall WRI Virtual 2021 Issue Brief: Interrogating the Intersection of HIV and Women's Sexual and Reproductive Health</u>

<u>Let's Talk About Sex: Facilitating Engagement About Sex and Pleasure Between Providers and Women Living with HIV</u>

Sex, Pleasure, and PrEP: Leadership Exchange LIVE

Fact Sheets

PrEP for Women

Safer Sex

Older Women, Sex, and HIV

Sexual and Reproductive Health, Rights, Justice, Pleasure, and HIV

Gynecologic Care and HIV: What to Expect and Preparing for Appointments

References

HIV Prevention Guidelines (US Centers for Disease Control and Prevention)

Opening a Portal to Pleasure Based Sexual and Reproductive Health Around the Globe; A Qualitative Analysis and Best Practice Development Study (Sexual and Reproductive Health Matters)

<u>GOALS Framework for Sexual History Taking in Primary Care</u> (New York State Dept of Health AIDS Institute)

No Longer the Exception, but the Standard: Integrating Trauma-Informed Policy and Pre-exposure Prophylaxis Implementation for Women (Women's Health Issues)

<u>Providing Primary Care for HIV in the Context of Trauma: Experiences of the Health Care Team</u> (Women's Health Issues)



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