

# All healthcare professionals need training to deal with the sexual needs of patients

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Providing healthcare staff with a one-day training course on dealing with the sexual needs of people with an acquired physical disability gave them greater understanding of the issues patients faced and enabled them to address intimate questions more comfortably and proactively.

The findings were so encouraging that the authors of the study, published in the November issue of the *Journal of Advanced Nursing*, are calling for all healthcare practitioners to receive sexuality training, regardless of their role or the area of healthcare they work in.

Researchers surveyed 29 nurses, allied health professionals and care staff, before and after the course, on their ability and confidence to address [sexual issues](#) with patients. They also held in-depth interviews with 12 of them. All age ranges were represented (20 to 55 plus), the majority were female (79 per cent) and most had been working at their current hospital for one to five years (41 per cent).

"Changes associated with an acquired [physical disability](#) can diminish a person's self-esteem, sense of attractiveness, relationships and sexual functioning" explains lead author Agnes Higgins, Professor of Mental Health at the School of Nursing and Midwifery, Trinity College Dublin, Ireland.

"Previous research suggests that people with physical disability are dissatisfied with the quality of information and support around sexuality during their rehabilitation."

Subjects addressed during the course included the impact of disability on sexual expression, how to deal with patients' [sexual behaviour](#) in the hospital setting and responding to questions such as whether they will be able to have sex in the future.

Key findings included:

- Participants rated their knowledge of 13 key areas related to patients' sexuality, including rights, ageing, communication and help with specific medical conditions. The mean score was 1.9 out of four before the course and 2.5 after the course – the equivalent of a 31.5 per cent increase in knowledge.
- The biggest rises in knowledge were in sexual rights and disability and brain injury and sexuality (both up 0.8 out of four). Other top increases included the impact of a stroke on sexuality and managing 'inappropriate' sexual behaviour (both up 0.7).
- Participants also rated their ability to deal with 15 situations, ranging from seeing a patient engaging in sexual behaviour to seeking advice on their future sexual ability. The mean score was 2.1 out of four before the course and 2.6 after the course – the equivalent of a 23.5 per cent increase in ability.
- The biggest rises in ability were how to deal with walking in on a patient who was masturbating or engaged in sexual foreplay with their partner (both up 0.8). Other top increases included how to respond to a patient who asked if it was OK for them to have sex and advising young and old patients who wonder if they will ever have an erection or orgasm again (all up 0.7).

Staff reported finding the course very helpful.

One participant said it made them more able to respond to difficult issues in a sensitive manner. "I'm less uncomfortable and if they

[patients] raise an issue, even in a joking manner, I'm kind of happy to say 'Well is that an issue for you... would you like to talk about that a little bit more?' rather than just kind of laughing and then moving onto the next subject, which is easy to do."

Another said it made them think of more than a patient's medical needs, citing the example of a woman who was incontinent and keen to return home and to work. Normally they would have suggested a urinary catheter, without further exploring the impact of this on the person's life, but the staff member said: "Because I'd done the sexuality course it made me think well actually one of the person's goals is she's got a fiancé, and relationships are important, and that [catheter] would be a huge barrier."

This was reinforced by other staff members. "I like to think I see the patient as a person, but you don't always, you honestly don't" said one. "That [course] made me very, very aware that there is a person here."

It also made it easier for them to deal with sexual comments from patients as one participant illustrated with a pre-course experience. "We are in a room and a young nurse is passing by and she is good looking but he [patient] expresses that in a way that is not exactly inappropriate. He's a young guy... I feel a little bit embarrassed and do not know how to react."

"Patient sexuality is an area that many healthcare practitioners may be reluctant to address or discuss because of embarrassment, particularly when patients have a disability" says Professor Higgins.

"Our study suggests that systematic education and training in sexuality leads to statistically significant changes in health care practitioners' knowledge, skills and comfort. Participants also reported numerous incidents where they were more willing to raise issues for discussion and

create a supportive listening space for [patients](#).

"This course provided an effective learning experience for the healthcare practitioners and could easily be replicated elsewhere. We believe that practitioners require education in patient sexuality, regardless of their discipline."

**More information:** Mixed methods evaluation of an interdisciplinary sexuality education programme for staff working with people who have an acquired physical disability. Higgins et al. *Journal of Advanced Nursing*. 68.11, pp 2559– 2569. (November 2012). [doi: 10.1111/j.1365-2648.2012.05959.x](#)

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