Taking A Sexual History

Anissa Lynch, BSN,RN

OKLAHOMA
State Department
of Health

Learning Objectives

- Define Sexual Health
- Describe the importance of taking a comprehensive sexual history
- Outline the components of a comprehensive sexual history (5 Ps)
- Demonstrate the use of inclusive sexual history questions

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What is Sexual Health?

The World Health Organization defines sexual health as "…a state of physical, emotional, mental and social well-being in relation to sexuality…"

- It is not merely the absence of disease, dysfunction or infirmity.
- It requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence.
- For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled." (WHO, 2006a)

World Health Organization

Why is sexual health important?

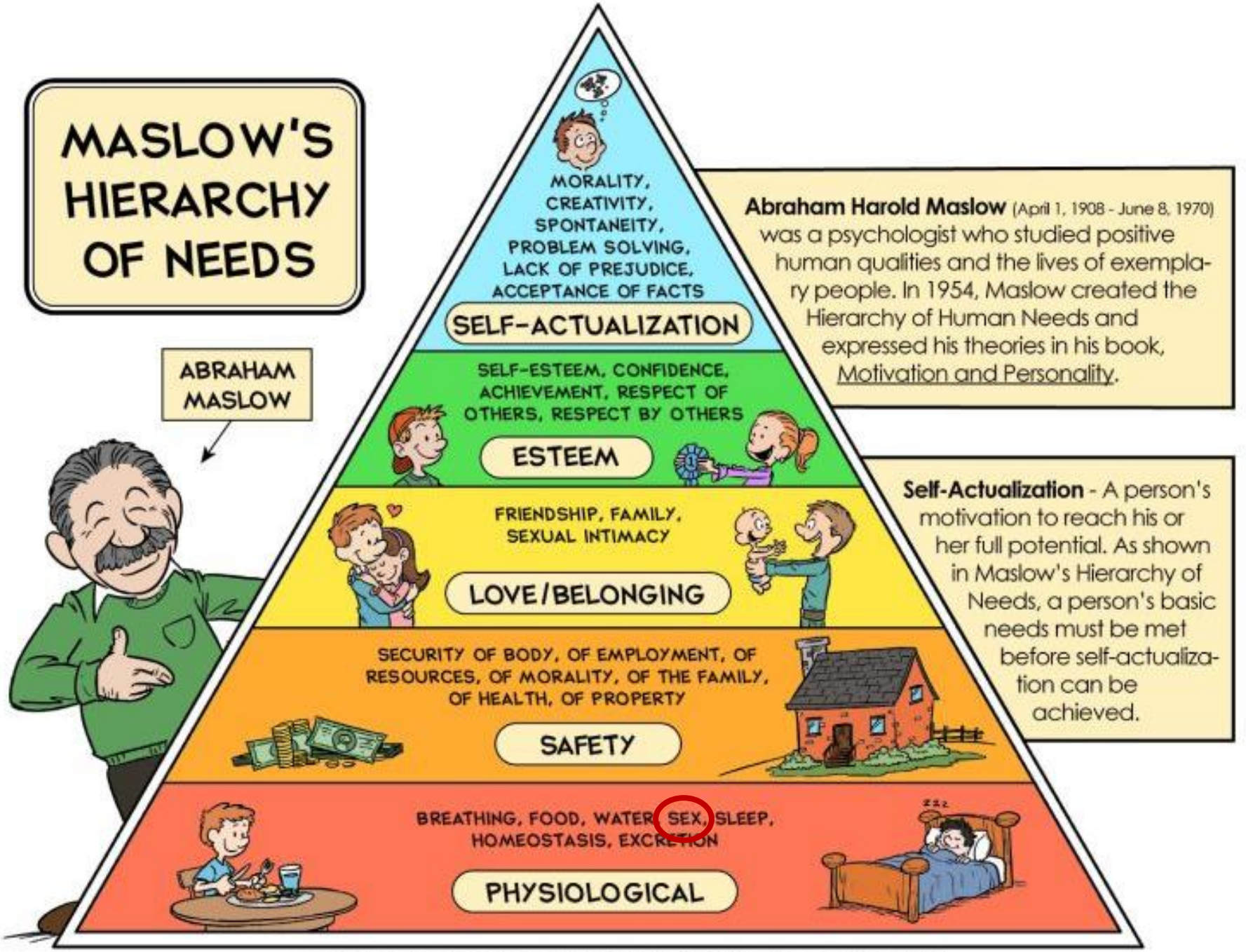
- Essential for assessing risk of sexually transmitted infections (STIs).
- Supports reproductive health planning (pregnancy intention, contraception).
- Helps guide screening, prevention, and treatment decisions.
- Builds trust and normalizes conversations about sexual health.
- Identifies concerns related to sexual function, safety, and consent.

- When left untreated, STIs can lead to long term health problems such as chronic pelvic pain, infertility, and poor birth outcomes including death of newborns.
- STIs can also increase the risk of getting HIV and giving HIV to others.
- Human papillomavirus (HPV) infection causes about 35,000 cases of cancer each year**, even though there is a safe and highly effective vaccine that prevents the cancer-causing strains of HPV.**
- STIs affect the quality of life for millions of Americans and cost the health care system billions of dollars annually.

How to Take a Sexual Health History

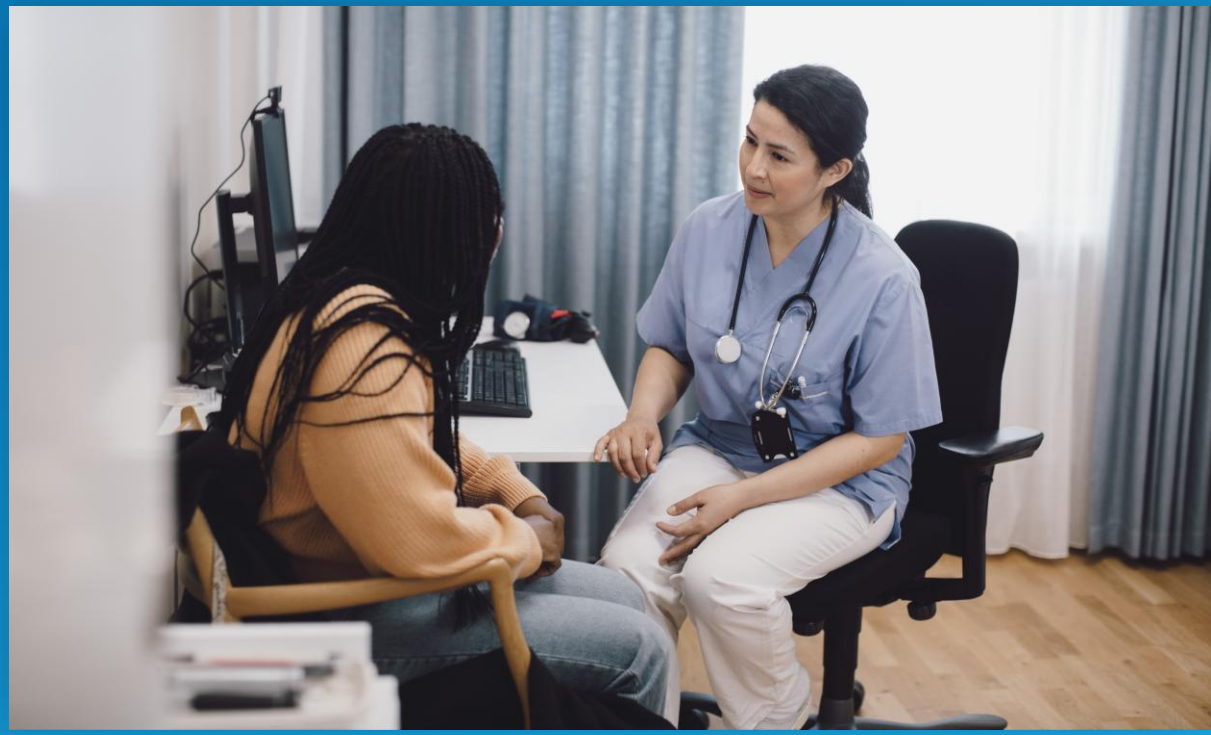

Open Ended Questions
Confidential
State Reporting Laws
Language Matters
Taking a Sexual History

Creating A Safe Space



Creating a Safe, Non-Judgmental Environment

- ✓ Use neutral, inclusive language. Be aware of body language.
- ✓ Avoid assumptions about sexual orientation, gender identity, or relationship structure.
- ✓ Explain why you are asking these questions (“I ask all patients these questions because sexual health is an important part of overall health.”).
- ✓ Use open-ended questions, then clarify
- ✓ Normalize (“Many people experience…”) to reduce embarrassment**. This reduces stigma and signals safety.**



Recognizing Types of Bias

Implicit Bias

Automatic attitudes or stereotypes that influence behavior without conscious awareness.

Examples:

- Assuming heterosexuality
- Assuming monogamy
- Assuming gender identity based on appearance

Explicit Bias

Conscious beliefs or judgments that affect interactions.

Examples:

- Discomfort discussing certain sexual practices
- Moral judgments about number of partners

Cultural Bias

Assuming your own cultural norms apply universally.

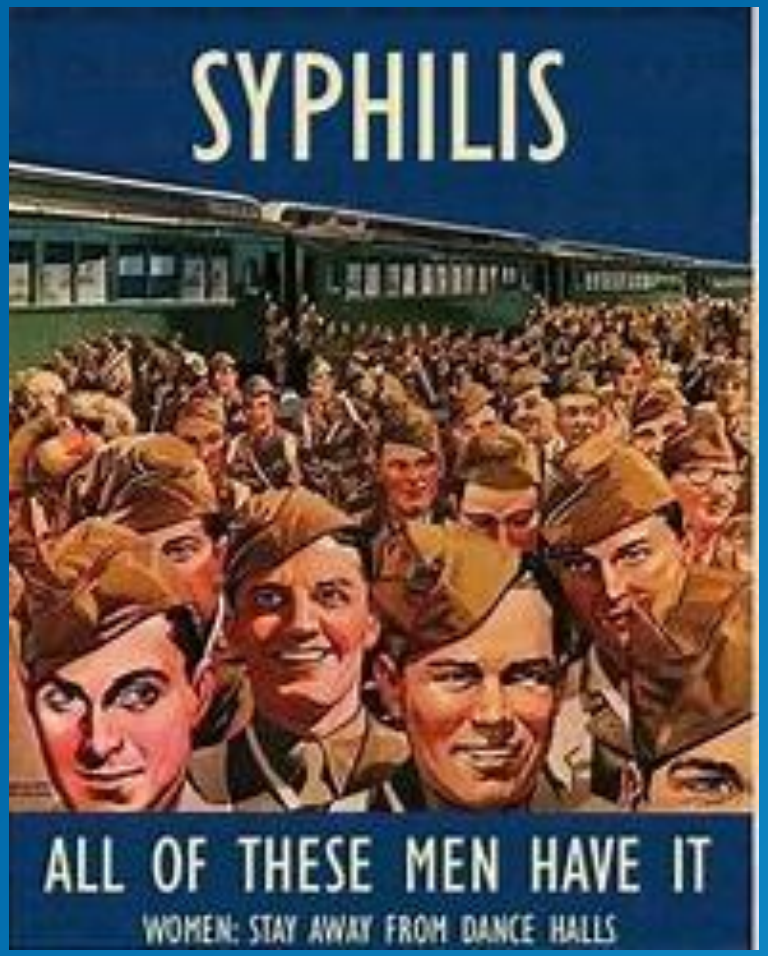
Examples:

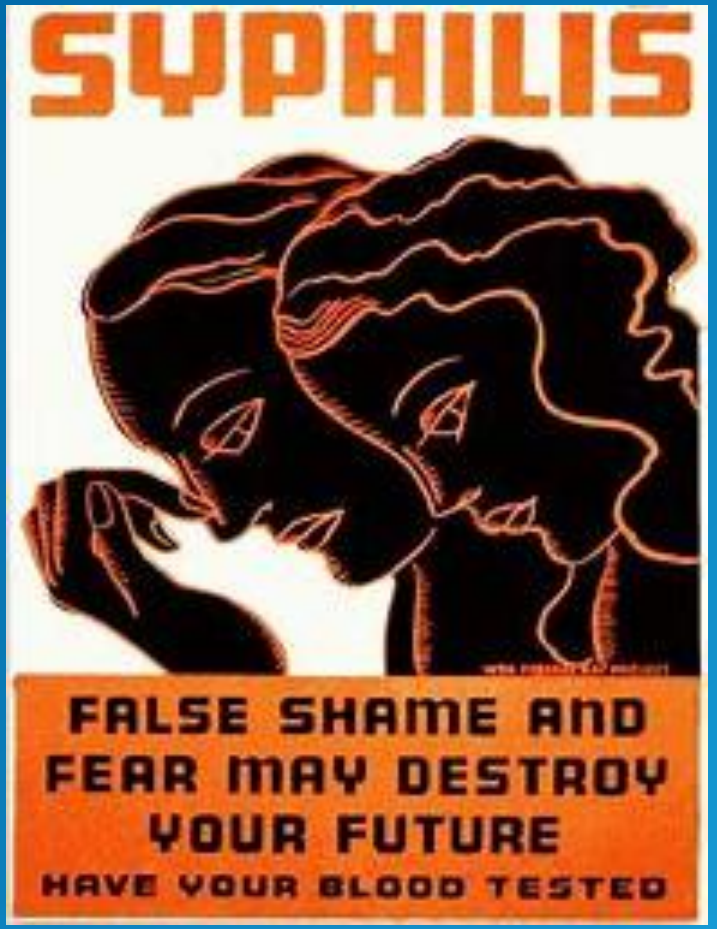
- Expectations about marriage, modesty, or gender roles

Putting aside bias leads to:

- ✓ More accurate sexual histories
- ✓ Better STI screening and prevention
- ✓ Improved patient trust
- ✓ Reduced health disparities
- ✓ Safer, more respectful clinical environments


JUKE JOINT SNIPER
SHORTY'S
PLACE
DANCING
SYPHILIS
and GONORRHEA


SYPHILIS
ALL OF THESE MEN HAVE IT
WOMEN: STAY AWAY FROM DANCE HALLS


SYPHILIS
FALSE SHAME AND
FEAR MAY DESTROY
YOUR FUTURE
HAVE YOUR BLOOD TESTED

Ensure Privacy and Confidentiality

- Confirm who is in the room.
- For adolescents, explain confidentiality laws in your state.
- Maintain a calm, professional tone.

Confidentiality

Helps to establish trust between patient and the nurse

Increases patients willingness to communicate information

Ease fear or concerns clients may have

Prepares client for what to expect during the visit

* "I will need to take a few minutes to ask you a number of personal questions about the kind of sex you have and behaviors that might put you at risk for an STI. *These questions are important for me to ask so we can provide the right care for you today.* I ask these same questions to all my clients and everything we discuss is **confidential**. I will also do a physical exam and lab work to help us determine if treatment is needed today. What questions do you have before we begin?"

Use Trauma-Informed Communication

A trauma-informed approach is essential.

- Ask permission before discussing sensitive topics.
- Allow the patient to decline answering.
- Be aware of body language and emotional cues.

The Five “P”s

CDC, Guide to Talking a Sexual History
National LGBT Health Education Center (2021)

The 5 “P”s - Partners

Dialogue with patient

“In the past 12 months, how many sex partners have you had?”

“What is/are the gender(s) of your sex partner(s)?”

“Do you or your partner(s) currently have other sex partners?”

The 5 “P”s - Practices

Dialogue with patient

“What kind of sexual contact do you have, or have you had? What parts of your body are involved when you have sex?” Toys?

The 5 “P”s - Prevention

Dialogue with patient

“Do you and your partner(s) discuss STI prevention?”

“What are your goals for your sexual health?”

“If you use prevention tools, what methods do you use? (external or internal condoms, dental dams, etc.)”

“Are you aware of PrEP, a medicine that can prevent HIV? Have you ever used it or considered using it?”

Point out and commend patients for what they might already be doing to reduce risk!

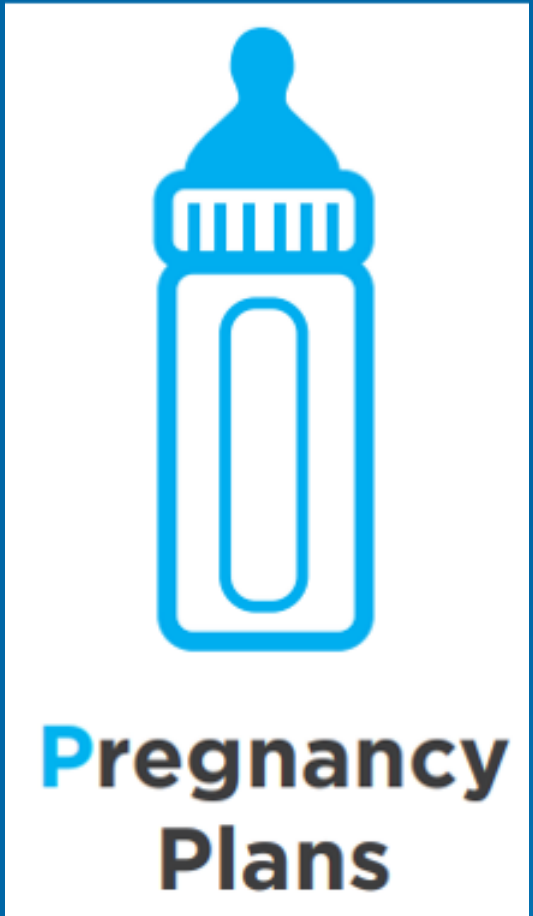
The 5 “P”s – Past History

Dialogue with patient

“Have you ever been tested for STIs and HIV?”

“Have you been diagnosed with an STI in the past? When? Did you/your partner get treatment?”

The 5 “P”s – Pregnancy Intention



Dialogue with patient

“Are you (or your partner) trying to get pregnant?”

“Are you or your partner using contraception or practicing any form of birth control?”

“Would you like to talk about ways to prevent pregnancy? What information, if any, do you need on birth control?”

“What types of birth control have you tried? How did that work for you?”

Plus

🧠 Sexual Function

- Libido, arousal, pain, erectile function, orgasm concerns.

🛡️ Safety and Consent

- “Do you feel safe in your relationships?”
- “Has anyone ever pressured you into sexual activity?”

🌈 Gender Identity and Sexual Orientation

- Ask respectfully:
- “How do you describe your gender identity?”
- “How do you describe your sexual orientation?”
- Use the patient’s chosen name and pronouns.

💊 Substance Use

- Alcohol or drug use associated with sexual activity.

Do you have any concerns or questions about your sexual functioning?

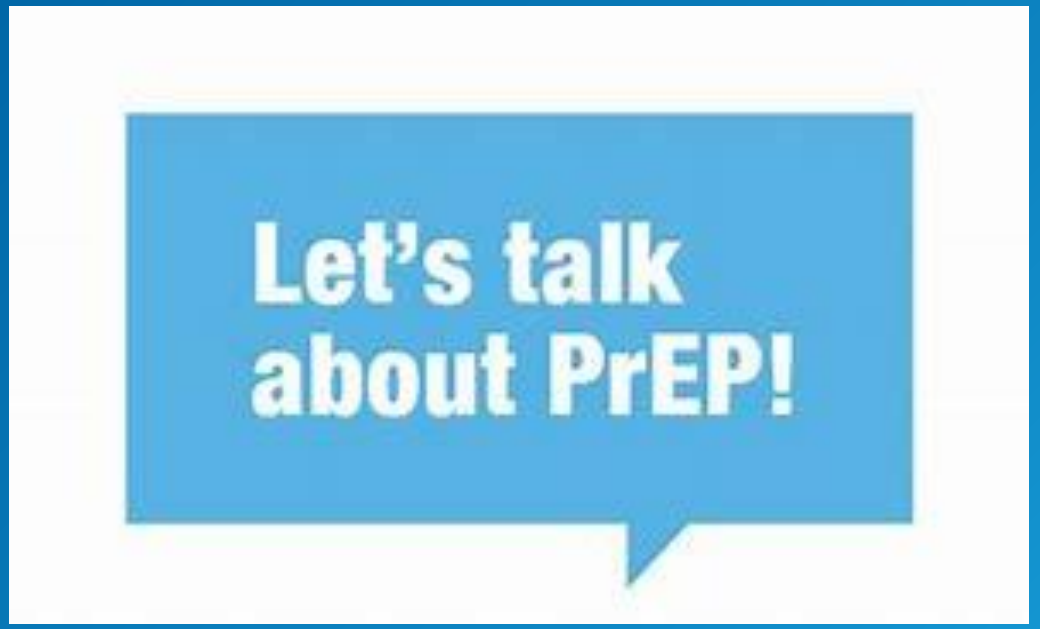
Closing the session

Dialogue with patient

“What other things about your sexual health and sexual practices should we discuss to help ensure your good health?”

“What other concerns or questions regarding your sexual health or sexual practices would you like to discuss?”

Ask about sexual functioning, including pleasure and performance, and referring for care, as indicated.



Common Barriers and How to Address Them

- ✓ Patient discomfort: Normalize and reassure.
- ✓ Clinician discomfort: Use structured tools and practice.
- ✓ Time constraints: Use brief validated questionnaires when appropriate.
- ✓ Cultural differences: Ask the patient how they prefer to discuss sensitive topics.

Putting aside bias leads to:

- More accurate sexual histories
- Better STI screening and prevention
- Improved patient trust
- Reduced health disparities
- Safer, more respectful clinical environments

Key Points to Ensuring a Productive Sexual Health Conversation

- Avoid moral or religious judgment/assumptions of the patient's behavior (be aware of your biases)- ALL Staff
- Practice cultural humility—sexual norms vary widely.
- Ensure shared understanding around terminology and pronunciation for patient concerns to avoid confusion. Avoid medical jargon unless explaining clearly.
- Establish rapport and consent before addressing sensitive topics.
- Respect the patient's right to decline answering questions or sharing information.
- Use a sensitive tone that normalizes the topics you are discussing – how can we reframe a statement to be sex-positive vs. punitive.
- **And remember, it's a conversation…not a lecture or an interrogation!**

References

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Questions?

Anissa Lynch, BSN, RN
STI Nurse Consultant/
Rapid Start Program Manager
Anissa.Lynch@health.ok.gov

Provider Resources

your sexual health matters

OKLAHOMA State Department of Health

SEXUAL HEALTH & HARM REDUCTION SERVICE