

Sexual Health Promotion

Practical things to consider for sexual health promotion in a primary care setting

1. Publicise the practice's sexual health services

Consider a leaflet or poster on what sexual health services are available; in order to stimulate up-take of services. It is often useful to pilot it with service-users, to check that it is clear, intelligible and does not omit any important points.

2. Provide visual, user friendly, and up to date information

- Consider a "Sex Talk" board as a way of offering extra sexual health information on how to access sexual health services and support. These are boards that provide information about local sexual health and drugs education services. They can be placed in Primary Care Practices, schools, colleges and youth centres and are easily updated as information changes

- Some practices have developed "Sex Talk Kits": easily portable bags containing demonstration samples of a range of contraception methods including Femidoms, condoms and condom demonstrators. Other "sexual health discussion-starter" could include items such as Red Ribbons, leaflets about STIs and sachets of lubricant, with accompanying information on how to use them.

3. Offer a range of contraception methods- and publicise this on the leaflet or poster?

It will be helpful to consider the range of contraception methods that are available within the Practice. Are people aware of the choice they can make - including contraception implants, Depo Provera, an IUD fitted, or using condoms or a diaphragm - and the benefits of each of these?

4. Provide free condoms and lubricant

Promote condom use alongside other forms of contraception in order to reduce rates of Sexually Transmitted Infections, including HIV. Funding may need to be sought (perhaps via Teenage Pregnancy monies or HIV prevention budgets?). As well as being offered as a result of consultations, consider distribution by leaving bowls of condoms and lubricants in the toilets or in the Waiting Room. It is important to consider a range of condoms. Lubricant should always be offered with condoms, leaflets on effective condom-use should be displayed and given out.

5. Use the 'Birthday card' or teen talk appointment system

Some Practices already have a system in place under which young people receive a birthday card on their 16th birthday and an invitation to a "health check" session with a Practice Nurse. Sexual health services and support can be an important part of such an activity. In some practices you may wish to consider this at an earlier age (the approach can be made via parents to ensure they support the initiative). Evaluation of such schemes shows them to be very popular among both young men and women.

Other schemes include a "fast-track" credit card: a young person can be guaranteed a rapid and confidential appointment with a member of the Practice staff, without the fear of "interrogation" about their reason for being there! Particularly useful for publicising rapid access to emergency contraception, such schemes may well offer a positive way to increase young people's uptake of mainstream Practice services.

6. Consider the impact of other treatment and medical conditions on sexual health

It is important to be aware of how a range of medical conditions can have a negative impact on sexual health and relationships. Diabetes and high blood pressure may result in erectile dysfunction for men. Similarly, radical surgery can have a profound effect on body image and self-esteem. These matters may need to be addressed and support offered for dealing with the potential impact on their relationships. It is also vital to be clear about side effects of drug treatments - on libido or sexual performance. This offers the opportunity to discuss with patients how they might manage such occurrences.

7. Publicise out-of-hours and holiday services

There is frequently a "blip" in unintended pregnancies and women accessing termination services shortly after Christmas and New Year. This is no doubt testimony to the fact that people have more unplanned sex at this time and that they may not know how to access services such as emergency contraception over the holiday period.

Publicise practice opening times, out-of-hours Co-op availability, family planning clinics, GU clinics and Walk-in Centres, many of which provide emergency contraception. Additionally, information should also be available about the fact that an IUD can be fitted to prevent a pregnancy up to 5 days after unprotected sex - and where to get this done.

8. Ensure staff have relevant training in sexual health

All staff groups have a role to play in the delivery of an effective sexual health service within a practice. Training may be needed in order for staff to feel skilled and confident in this field. For clinical and medical staff training might, for example, be on taking a sexual history, for receptionists it might be on providing a non-judgmental and welcoming service.

9. Develop a 'whole practice' approach to promoting sexual health

Characteristics of a Sexual Health-Promoting Practice:

- Staff have all been trained in issues of sexual health, communication skills and confidentiality
- Confidentiality is assured
- Sexual health services are offered to all young people, including those under 16
- A wide range of services is offered e.g. free condoms, access to vasectomy, menopause, and termination services alongside contraception, STI screening and sexual health support
- The practice works collaboratively with other sexual health services e.g. GU Medicine, Family Planning and School Nurses
- The practice leaflet has an explicit and positive statement about sexual health for all
- Leaflets and information are available on a wide range of sexual health issues and in a range of community languages

10. Be able to refer on to other services

Clear referral pathways need to be in place, and information on services not provided within the practice should be easily available. This should include the range of voluntary, statutory and non-statutory services. For example: self-help groups, support for lesbians, gay men and bisexuals, for people who have been raped or sexually assaulted, for survivors of sexual abuse. It will mean having up-to-date information about other sexual health services, their opening hours, waiting times and referrals procedures. These services will include STI screening, HIV counselling and testing, Psychosexual Clinics, fertility services, vasectomy and sterilisation, termination services etc. It will also involve knowing when it is best to refer on to one of these specialist services. It may be helpful to put together a folder, directory or dossier of all the possible services and their details - or to suggest that one is produced for your District, perhaps by the local Sexual Health Strategy Group.

11. Specific sexual health promotion aimed at young people

Adolescents can be a time of perceived conflict between what one's religion and culture expects, what the media and your peers are telling you, and what are ones own needs and desires.

International and national research shows that if young people are offered early and comprehensive education on sex, relationships, and sexuality they are more likely to:

- Delay their first sexual experience
- To use contraception and condoms once they are sexually active, thereby reducing their risk of unwanted pregnancy and acquiring STI.

As well as helping to lay down patterns of behaviour that will help the individual to build positive and healthy relationships, such education may also provide opportunities to identify and address other health issues. It may also act as a lifeline for those who are in abusive situations. Most young people rank doctors above parents, teachers, youth workers and friends as the person from whom they wished to receive information about sexual health. Research has also emphasised the importance of non-judgemental, respectful and sensitive services that are accessible and appropriate to their needs.

When working with young people consider not only the information they need but also the skills and positive attitudes they need to develop.

How to:

- say no to pressure to have sex they don't want
- negotiate safer sex, contraception and condom use
- be assertive in asking for what they want and refusing what they do not want
- To get the best information upon which to base choices
- To be aware of what may jeopardise health and to make positive health choices for their sexual and emotional health.

Teaching stations