



Supporting & Affirming Sexual Health: Addressing Risk Behaviors and Promoting Harm Reduction

Southeast AIDS Education and Training Center

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Objectives

- Learn the practitioner roles in addressing sexual health in behavioral health care
- Review the evidence on the impact of the providers' and the youth's cultural context, life experiences, and health literacy on assessment and dialog.
- Practice tools for assessing sexual health and health risk behaviors for use in peer support models and wrap around services.
- Learn available evidence-based risk and harm reduction strategies that improve health outcomes.



Defining Sexual Health

Sexuality is a natural part of life, and is more than sexual behavior.

Sexual health includes:

- » Recognizing and respecting the sexual rights of all
- » Access to sexual health information, education and care
- » Prevention, care, and treatment options and access
- » Having opportunity to experience sexual satisfaction, intimacy
- » Being able to communicate about sexual health

American Sexual Health Association, n.d.; WHO, n.d.

Importance of Practitioner Sexual Knowledge

- On average, a well-trained mental health professional has had limited access to formal education pertaining to human sexuality.
- Practitioners often avoid sexual health topics to manage their own anxiety.
- Practitioners need to be aware of the cultural context of sexuality as understood by the client and themselves.
- Practitioners need specific training in sexual health counseling skills to help clients.

Why Is Being Comfortable and Skilled Important?

- When a sexual history is included as a part of a routine assessment, clients may be more comfortable raising questions or concerns in the future.
- When clinical and nonclinical service practitioners are viewed as sensitive and comfortable asking these questions, they would more likely to be seen as a resource for sexual health information and discussion.

Scaccabarozzi, 2005/2006



What Works

- Address social contexts in addition to risk-reduction interventions
- Be sensitive to individual factors, such as age, internalized homophobia, and sexual identity
- Include client's emotional state in conversations of sexual health
- Affirm resilience, honor individual client needs, and convey compassionate messages

Jeffries, 2014;

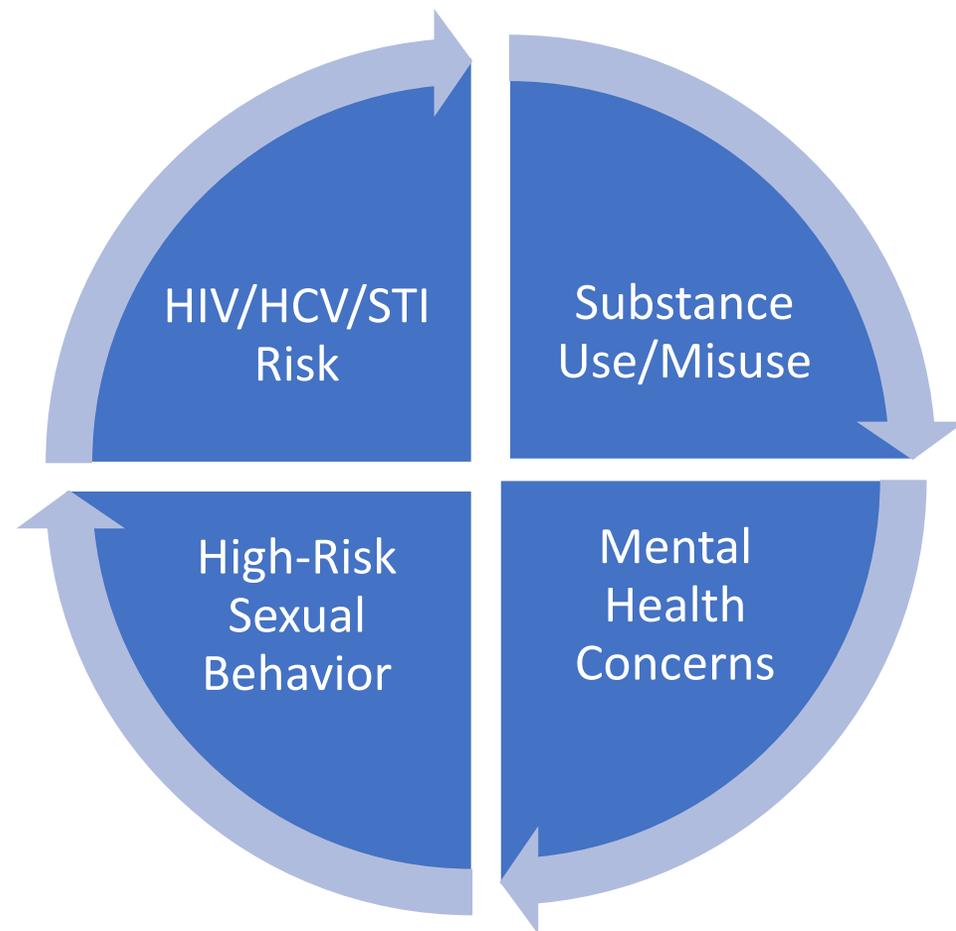
Martos, Valera, et al., 2016; Taylor & Munoz-Plaza, 2017

Building Practitioners' Skills

- Create a safe space for clinical supervision, learning, and support
- Be aware of worker shyness or hostility
- Be alert to suppression of sexual health discussion
- Be alert to assumptions
- Suspend clinical judgments and use client- centered models of care
- Be aware of nonverbal cues (both self and client)

Braun-Harvey, 2010; Grob, 2009

Syndemic – Connecting Sexual Health Behaviors, HIV/AIDS, Substance Use, and Mental Health





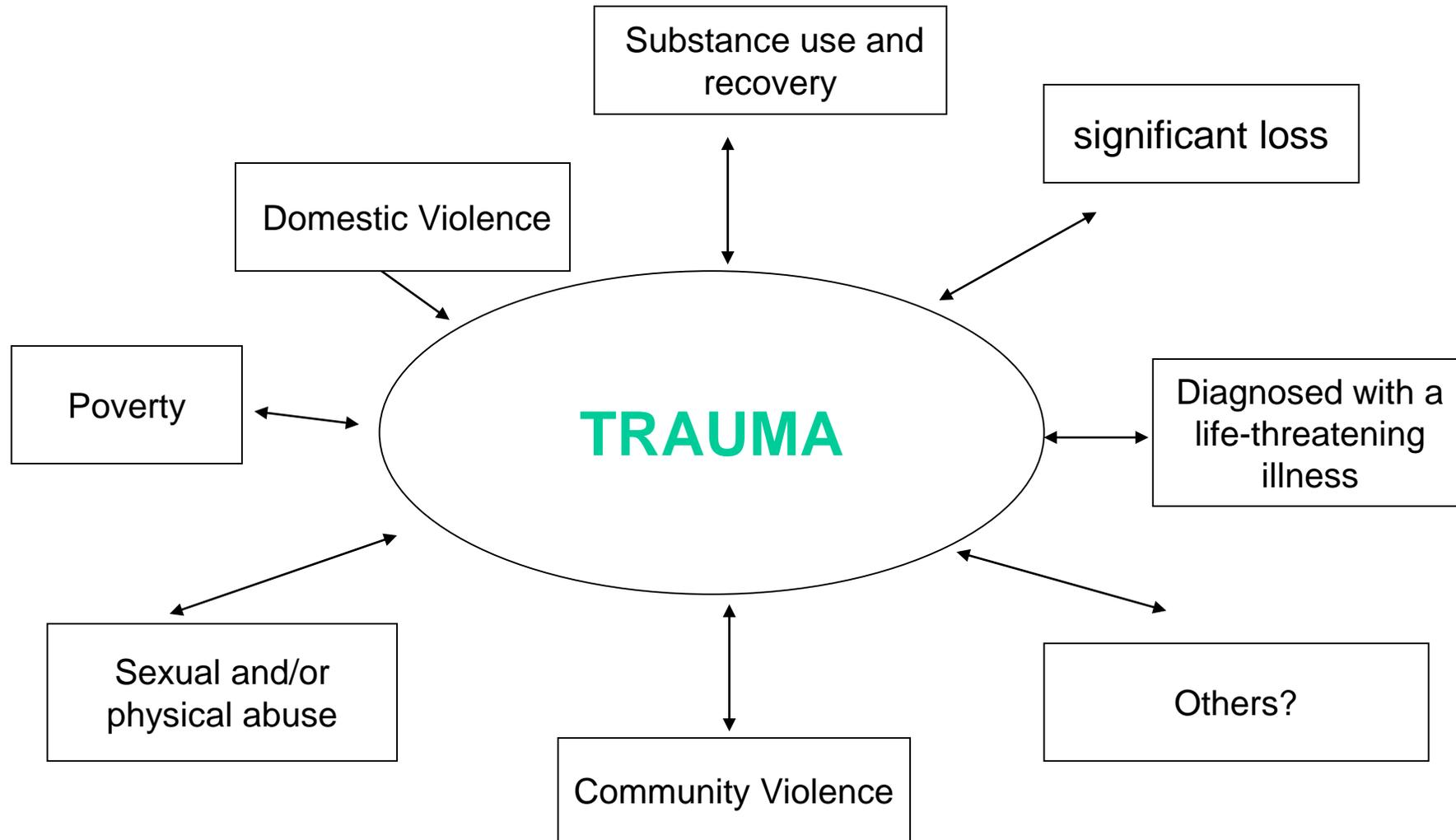
Connecting HIV/AIDS and Risk Prevention Education

How people receive HIV health education messages can impact:

- Their sexual practices, as well as their partners
- Raise or lower perceptions about HIV risk
- Acceptability of risk reduction strategies
- Ability to negotiate safer sex practices
- Health-seeking behavior

History of violence, abuse, and/or trauma are factor(s)

The link to trauma





Connecting HIV/AIDS and Substance Misuse

For people at risk, or living with HIV/AIDS:

- 8% of new HIV infections are from injection drug use (IDU)
- Decrease in judgment increases high-risk sexual and other behaviors
- Includes, increased risk for infection with hepatitis B virus (HBV) and hepatitis C virus (HCV)
- Compulsive sexual disorder is often found to co-occur with substance misuse

CDC, 2016; Hoenigl & Chaillon, 2016



Connecting HIV/AIDS and Mental Health

A bio-psycho-social approach to HIV treatment stabilizes symptoms and improves health outcomes.

Prevalence of depression among people living with HIV/AIDS (PLWHA) is as high as 57%

- Often undiagnosed
- Can impact severity of overall health symptoms
- Increased substance misuse and high-risk sexual behaviors

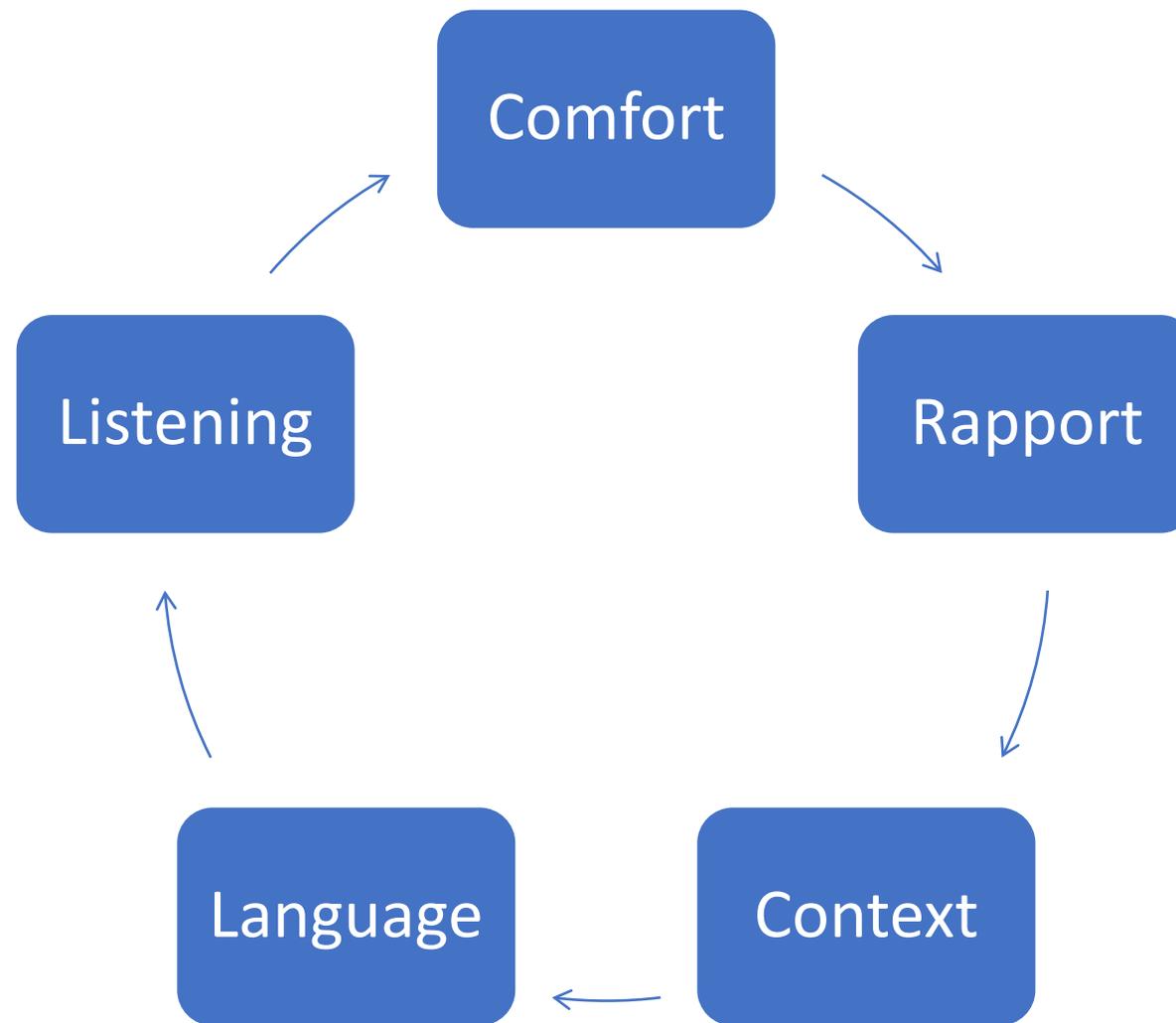
Van Leunen, et al., 2017; Bhatia & Munjal, 2014; Safran et al., 2013

Holistic Approach – The 5 Ps of Sexual Health

- Partners
- Practices
- Protection
- Past history
- Prevention of pregnancy

AETC, 2014

Skill-Building – Sexual Health Assessment



Taking a Sexual and Drug Use History

- Have you had a sexual experience with another person in the past year? If yes:
 - With how many different people in this year?
 - In this year, have you had sex with men? Women? Both men and women?
- Can you tell me about your sexual life before this past year?
- Have you ever had an STI of any kind?
- Have you ever shared a needle or injection equipment with another person for any reason?
- Have you ever felt that a sex partner put you at risk for any reason?
- What do you do to protect yourself from STIs? From HIV ?
- What do you do to protect yourself from an unplanned pregnancy?
- Is there anything else that I need to know?

Practitioner Skill Training – Clinical Skills That Help Support Client's Sexual Health

- Problem solving
- Motivational approaches
- Harm reduction strategies



Practitioner Skills – Harm Reduction Strategies

- Syringe service programs (SSP)
- Barrier methods to reduce HIV transmission
- 12-step/SMART Recovery
- Buprenorphine
- Naltrexone
- HIV Treatment as Prevention (TasP)
- PrEP (pre-exposure prophylaxis)
- PeP (post-exposure prophylaxis)

CDC, 2017; NIDA, 2012

PrEP (Pre-Exposure Prophylaxis) – Part of Comprehensive Sexual Health

PrEP should be considered for people **who are HIV negative and at risk for HIV infection**

Discordant / mixed-status couples:

- Conceive with reduced risk of HIV transmission
- Pre-conception care and reproductive health
- When taken consistently, PrEP has been shown to reduce the risk of HIV infection in people who are at high risk by up to 92%
- PrEP is a powerful HIV prevention tool and can be combined with condoms and other prevention methods to provide even greater protection than when used alone.

CDC, 2017



Best Practices – Program Components that Enhance Outcomes

- Provide rapid onsite HIV testing in substance use disorder treatment facilities:
 - Increases the likelihood of clients being tested and of receiving their test results, and engagement in care
- Provide ongoing training to improve capacity of staff to address sexual health in context of substance misuse, HIV, and mental health care
- Provide supportive opportunities for clinical supervision:
 - Create safe spaces for staff discussions/training on aspects of sexual health counseling and skills

Group Discussions - Notes

Resources

Guide for HIV Clinical Care

hab.hrsa.gov/deliverhivaidscares/clinicalguidelines.html

- Mental Health Assessment Tools

www.integration.samhsa.gov/clinical-practice/screening-tools

- Substance Use Assessment Tools

www.drugabuse.gov/nidamed-medical-health-professionals/tool-resources-your-practice/additional-screening-resources

- Evidence-Based Practice and Programs www.nrepp.samhsa.gov/

- Trauma-Informed Care and Approaches

www.samhsa.gov/nctic/trauma-interventions

- National HIV and Mental Health Training Resource Center

<https://knowledge.samhsa.gov/ta-centers/hiv-aids-mental-health-resources>

- HIV/AIDS www.HIV.gov