

School of Continuous Professional Development

18TH ANNUAL WOMEN'S HEALTH UPDATE 2022

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School of Continuous Professional Development

SEX THERAPY: WHO & WHEN TO REFER

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DISCLOSURE OF RELEVANT FINANCIAL RELATIONSHIP(S) WITH INDUSTRY

Nothing to disclose

REFERENCES TO OFF-LABEL USAGE(S) OF PHARMACEUTICALS OR INSTRUMENTS

• Nothing to disclose

LEARNING OBJECTIVES

(1) Describe the nature of sexual & relationship therapy (aka "sex therapy") & the role it can play in addressing sexual concerns

(2) Identify myths about sex therapy

(3) Review indications & contraindications for sex therapy referral

BACKGROUND AND CONTEXT SEXUAL FUNCTIONING AND HEALTH



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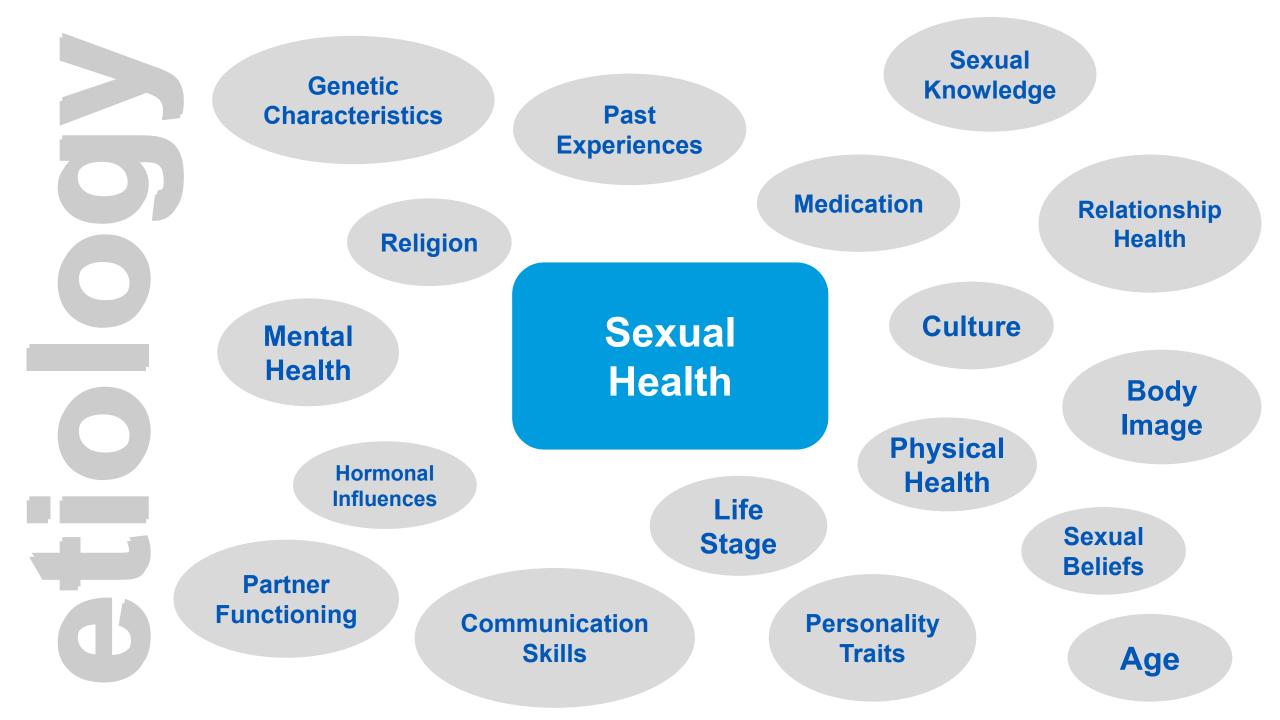
Sexual health concerns are highly prevalent across demographics

Help-seeking can take months - even years - due to embarrassment & shame

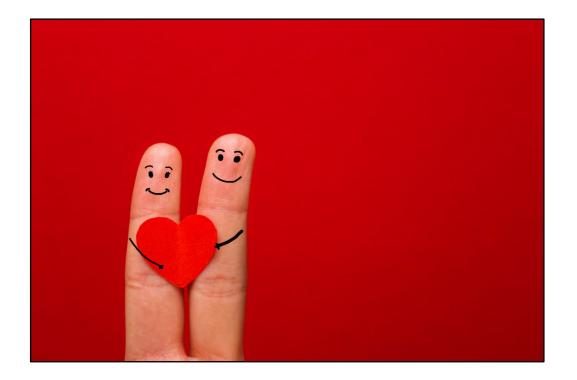


Misdiagnoses & medical trauma are common along the way

Psychological well-being predicts sexual satisfaction & physical functioning



WHAT EVEN IS SEX THERAPY?! KEY ASPECTS



- Specialty psychotherapy
- Often involves multidisciplinary care
- May be in the context of medical concerns
 - Cancer, menopause, diabetes, chronic fatigue/pain, fertility treatment, various surgeries

WHAT EVEN IS SEX THERAPY?! GENERAL THEMES

 Problems w/ any aspect of the sexual response cycle

- Desire, arousal, orgasm, pain
- Relationship/dating concerns
- General sexual education
- Sexual and gender exploration
- •Shame, guilt, trauma

THEORETICAL

COGNITIVE BEHAVIORAL

Addressing maladaptive thoughts/emotions that impact sexual & relational dynamics

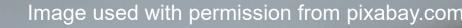
SEX POSITIVITY

Sexuality is diverse. Don't "yuck" other people's "yum."

INTEGRATED HEALTH

Approach physical functioning concerns *and* more subjective components of sexual health, in addition to contributing biomedical factors

GROUNDINGS



THEORETICAL

MINDFULNESS & ACT acceptance and awareness



GROUNDINGS, cont.

INTERPERSONAL PROCESS relationship dynamics



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WHAT DO SEX THERAPISTS OFFER? COMMON TOOLS & APPROACHES

- Mindfulness skills to improve sexual wellness:
 - Grounding exercises (e.g., PMR, diaphragmatic breathing)
 - Body mapping
 - Directed masturbation
 - Sensate focus exercises
- Cognitive behavioral techniques to address:
 - Rigid sexual scripts
 - Automatic negative thoughts (e.g., related to body image, sexual shame)
- Interpersonal/communication skills training
- Couples/relationship therapy
- Normalizing, validating, & inclusive sex education

MYTHS ABOUT SEX THERAPY COMMON PATIENT CONCERNS



- There will be nudity and/or sexual touching.
- You must be in a relationship to go to sex therapy.
- My sexual concern is so rare, unique, or embarrassing, the therapist will be horrified!
- Sex therapy is only for folks with "really serious" problems.

WHO CAN SEX THERAPY HELP? WELL...MANY PEOPLE!

- Problems w/ any aspect of the sexual response cycle
 - Desire, arousal, orgasm, pain
- Relationship and/or dating concerns
- General sexual education
- Sexual and/or gender exploration
- Sexual shame, guilt, trauma

"I have absolutely no libido. I don't care if I never have sex again. My partner is understanding but frustrated."

"I want to explore new things sexually, but I'm not sure my partner will understand or be interested."

"It hurts too much to have sex. It feels like I'm being torn and I don't even want him to touch me."

"The doctor says my vagina has closed up since radiation. I can't have sex with my husband. I feel like a horrible wife."

"I don't think I've ever had an orgasm."

"Since my prostatectomy, I can't even get an erection. What am I supposed to do now?"

ONCOLOGY PATIENTS & SURVIVORS AN UNDERSERVED MEDICAL POPULATION

Sexual Health Concerns

- Decreased sexual desire/libido
- Vaginal dryness and/or atrophy
- Erectile difficulties
- Loss of sensation and/or orgasmic functioning
- Sexual or genital pain
- Surgical or medical menopause
- Structural changes to genitals and/or chest
- Body image concerns

Interpersonal Dynamics

- Just trying to survive!
- Fatigue & stress
- Caretaking
- Fear or anxiety around sexual touch due to pain
 - Avoidance
- Difficulty talking about sex
- Limited sexual health education

WHO CAN SEX THERAPY HELP? CONTRAINDICATIONS TO CARE

- Active & ongoing *non-consensual* non-monogamy
- Recent or active threat of interpersonal violence
 Physical, emotional, verbal, &/or sexual
- Active substance abuse
- Untreated severe and persistent mental illness (SPMI)
 e.g., psychosis, bipolar disorder, OCD, depression

WHEN & HOW TO REFER TO SEX THERAPY FINDING QUALIFIED PROVIDERS

Routinely ask about sexual health concerns ROS or even social/relationship history Let patients know help is available

AASECT & the benefits of certification

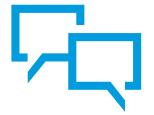
www.AASECT.org

- Get to know the providers in your community
- Consider getting certified yourself!

STAYING INFORMED NEXT STEPS...



Professional organizations & journals (e.g., ISSWSH, SSTAR)



Attend sexual health focused trainings & conferences

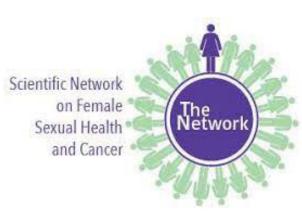
Read! Medical/scientific journals, popular press books, websites

STAYING INFORMED, CONT. PROFESSIONAL ORGANIZATIONS















STAYING INFORMED, CONT. WHAT TO READ

Popular Press Books

- "Come as You Are" by Dr. Emily Nagoski
- "Better Sex Through Mindfulness" by Dr. Lori Brotto
- "When Sex Hurts" by Drs. Goldstein, Pukall, & Goldstein
- "Becoming Cliterate" by Dr. Laurie Mintz
- "Enduring Desire" by Drs. Metz & McCarthy

Scientific Journals

- Journal of Sexual Medicine
- Journal of Sex Research
- Sexual & Relationship Therapy
- International Journal of Sexual Health
- Sexual Medicine Reviews
- Journal of Sex & Marital Therapy
- Psychology of Sexual Orientation & Gender Diversity

FINAL NOTES CLINICIAN COMFORT WITH SEXUALITY & GENDER

- Healthcare providers are often uncomfortable & feel inadequately trained to address sexual health concerns (regardless of gender!)
- Honestly assess your comfort. Identify potential biases.
 - What beliefs or stereotypes might you hold about sex, gender, and sexual identity?
 - How do these intersect with other stereotypes & biases (e.g., regarding race, age, ability status, size)?
 - What particular areas of gender & sexuality are you most comfortable exploring with patients? <u>Least comfortable</u>?

If you are uncomfortable or lack knowledge, seek additional training, supervision, &/or consultation.

THANK YOU!

QUESTIONS & DISCUSSION

