Survey results provided patients
97% of respondents stating
Having a set of standard questions that are simple and
25% of respondents providing examples to
giving the

Statistics:

- HIV cases are growing the fastest in Americans over the age of 50
- In 2016, the CDC surveillance reports showed a 20% increase in sexually transmitted infection (STI) rates from 2015 in those over the age of 45 (82,938 cases of Gonorrhea, Chlamydia and Syphilis)
- 62% of men and 30% of women (ages 80-102 year old) are sexually active and at risk for a sexually transmitted infection

Reasoning:

- High divorce rates could mean increased chances for dating again
- Older persons may be widowed
- Women are postmenopausal, therefore:
  - It is possible that they forego using protection since they cannot become pregnant
  - The lining of the vaginal walls become dryer and thinner, which allow STIs to transmit more easily
- Drugs for erectile dysfunction such as Viagra and Cialis make it possible for males to have sex later in life
- Sexual education may not have been comprehensive enough or existed for these populations when growing up
- Many health care providers (HCPs) do not perceive their patients to be at risk for STIs or expect that they are sexually active

Background

A training for HCPs is needed to ensure that they understand the importance and timeliness of speaking to their older patients and clients about the importance of sexual health and STI prevention. The training will also provide strategies and methods to follow to make the experience comfortable for both the patients and HCPs.

Objectives

At the conclusion of the training, the health care providers will be able to:

- Understand why it is necessary to review sexual health topics with their older patients
- Utilize openers, effective wording and other strategies learned to start a conversation when in the exam room
- Effectively speak with their older patients about their sexual health
- Be mindful of their own biases and judgments as they relate to this topic

Methods and materials

Survey: A survey was sent to current practicing HCPs to assess existing barriers and practices in place when targeting older adults to speak about STI prevention and sexual health. Survey results provided insight as well as direction for making the training presentation and materials.

Training Presentation: A 90 minute training presentation was made and includes the following parts:

- Welcome and Introductions
- The Agenda
- Training Goals and Objectives
- Statistics and Overview of the Problem
- What’s been done
- Interactive Self-Assessment via Poll Everywhere
- Information on being inclusive, opening the conversation and strategies
- Activity/Demonstration
- Materials: Exam room questions and pre-office visit questionnaire

Results

Survey: There were fifty five respondents. Fourteen were excluded from the final data since they indicated that they do not work with older adults.

- 25% of respondents never speak to their older clients about STI prevention and sexual health
- 97% of respondents do not follow a certain model or strategy when opening a dialogue on sexual health related topics with their older patients

Which method is the best for relaying information on sexual health issues or concerns to your older adult patients?

- 56.9% Direct communication
- 23.4% Pamphlet, informational materials
- 16.7% Referral to a specialist, testing center, etc.
- 3.6% Other, please specify

Discussion and conclusion

The survey concluded that most HCPs believe that direct communication is the best method for relaying information to their older patients about sexual health and STI prevention. From research, many HCPs do not talk to their patients about this subject or follow a method to do so. Educating HCPs on the importance of these topics and training them on strategies and methods to speak to their older patients about these subjects is necessary.

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Summary of the survey’s findings:

What works:

- Strong relationships and rapport with patients
- Stating that the topics are confidential, normal, judgment-free, etc.
- Having a set of standard questions that are simple and straightforward
- Opening up the topic for discussion and ask for questions/concerns
- Giving the patients time
- Providing examples to patients of problems their peers may have had

Barriers:

- Age gap between patients and HCPs
- Patients may be uncomfortable or shy
- Time constraints

Other suggestions:

- Impersonal questionnaires
- Let the patients share rather than have them feel interrogated
- Be objective and inclusive