

## **Managing Sexual Healthcare: Quantitative Literature Review**

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Sexual health and well-being are part of holistic, person-centered care. Individuals cannot be separated from this distinct part of themselves. Conversations regarding sexual interests, practices, and beliefs between the client and the nurse/provider are not always comfortable for either party. Still, they are necessary for the overall assessment and care of the client. Sexual health is a very personal topic, and if healthcare team members have a difficult time discussing these matters with clients, clients likely will not be forthcoming with the information, and it can lead to reproductive health problems, mental health struggles, and other issues. Due to the complex and uncomfortable nature of discussing sexual health and well-being, this aspect of the client's care is often avoided and neglected, which further supports the thinking that sex and sexuality are things to be ashamed of. This attitude towards these topics will continue to live on, and this could mean that clients suffer unnecessarily unless we can get to the root cause of the discomfort. We must dissect the hesitation in addressing this aspect of a client's life and design a plan to overcome that hurdle to manage this crucial part of a client's well-being. This literature review aims to explore the current practices and attitudes regarding sexual healthcare, and recommendations for improving this aspect of client care.

### **Attitudes and beliefs of nurses and physicians about managing sexual health in primary care: A multi-site cross-sectional comparative study**

This study chose to investigate the attitudes and beliefs of physicians and nurses regarding assessing client's sexual health in primary care settings in Spain (Leyva-Moral et al., 2020). The goal is to identify where the deficit lies with managing sexual health in a primary care setting and to address this deficit. Symptoms of health conditions such as anxiety,

depression, and even blood pressure can have an impact on sexual health (Leyva-Moral et al., 2020). Managing sexual health and health-related concerns can aid in distinguishing and treating symptoms based on their root cause. Identifying the attitudes and beliefs of health professionals regarding providing this aspect of primary care will enable the creation and implementation of interventions to address the deficit of this important detail of a client's well-being. This article investigates why the deficit exists and is the first step toward bridging the gap regarding sexual health in the primary care setting.

### **Key Points**

The data revealed that clients do not frequently bring up sexual health at their primary visits with the healthcare members that participated. The participants (healthcare professionals) believe they require more education to provide sexual-related care, and the participants were not sure that the primary care setting was the appropriate place to manage sexual health (Leyva-Moral et al., 2020). The study used a survey-type questionnaire of 35 statements using a Likert scale. Participants ranked their attitude toward each statement on a scale from strongly agree to neutral to strongly disagree (Leyva-Moral et al., 2020). The survey was completed via a secure link, and upon conclusion, the data was translated to an Excel spreadsheet for statistical analysis (Leyva-Moral et al., 2020). Surveys that did not complete the minimum number of questions were eliminated from the data before analysis occurred. Similar responses were grouped into percentages and subgrouped by job title, gender, and the measure of significance of those findings (Leyva-Moral et al., 2020). Of the reported data, the statistically significant findings are nurses are more frequently asked sexual health questions, healthcare providers had greater comfort discussing sexual-related issues with males, and nurses tend to feel more adequately

trained and informed to answer sexual health questions than providers (Leyva-Moral et al., 2020). The statistical significance of this data was determined by having p-values less than the predetermined value of 0.05 at 0.025, 0.008, and 0.02 (Leyva-Moral et al., 2020). The overall conclusion is that in primary care settings in Spain, there is a general discomfort regarding the discussion of sexual health despite nurses feeling more appropriately able to manage these questions than physicians (Leyva-Moral et al., 2020). This is important because sexual health and wellness are part of a client's well-being, and healthcare professionals should be adequately educated and prepared to manage this aspect of client care to provide the highest quality services. Neglecting this aspect of a client's health can negatively impact other aspects of their health and well-being. The authors conclude that overall, increasing education and training of doctors and nurses regarding caring for their client's sexual health concerns is crucial to improving the overall health and well-being of clients (Leyva-Moral et al., 2020). Included in this, the authors recommend improving and encouraging open communication with clients and exploring strategies to engage them in opening up and addressing their sexual healthcare (Leyva-Moral et al., 2020).

### **Assumptions**

The primary assumption made is that sexual health is not being addressed in the primary care setting due to the lack of education, timing, and clarity on this aspect of client care (Leyva-Moral et al., 2020). The authors argue that many of the common reasons clients seek primary care appointments, for things such as diabetes, depression, and others, have an impact on sexual health, and can be impacted by sexual health, but the sexual impact is not addressed during these

visits, leading to a lack of holistic client care (Leyva-Moral et al., 2020). Another assumption made in this article is that the uncomfortable nature of sexual health-related conversations leads to an avoidance of this topic by both client and healthcare team members (Leyva-Moral et al., 2020). Overall, the idea is that zeroing in on the experiences and beliefs regarding providing sexual healthcare in the primary care setting will provide a pathway to promoting these conversations and more thorough client care and well-being (Leyva-Moral et al., 2020).

### **Deficit/Conclusion**

The authors make a decent argument that there are some deficits in addressing the sexual aspect of clients' overall health and that additional training and education for healthcare providers is a necessary step in addressing that deficit (Leyva-Moral et al., 2020). It is reasonable to accept the authors' line of reasoning for this conclusion for this general area in Spain, and possibly Spain as a whole, but not universally. The conclusion of this study cannot be universally accepted and applied because the study only occurred within an area in Spain, and the attitudes, training, and beliefs in other areas, countries, and continents are not universal. For example, in some countries like the United States, sexual content is present in day-to-day media, and conversations regarding sex and sexuality are more widely socially acceptable than in other countries, such as India (Kanth et al., 2022). An area's culture and social climate influence the widely observed attitudes and beliefs, and these change from place to place, and over the course of time. With that in mind, the deficit of sexual healthcare in a primary care setting can vary, and the interventions and needs for addressing these deficits will also vary based on a variety of factors. Suppose nursing chooses to disregard the authors' line of reasoning. In that case, the deficit in addressing sexual health concerns in the primary care setting will likely continue and potentially grow, allowing for a continued lack of holistic client care. While the findings should

not be universally accepted and applied, the work of this study can serve as a jumping-off point for other countries to conduct their research regarding the sexual health care deficit in primary settings. Further, additional education and training on the topic will not hurt any nursing practice, so this finding and suggestion can universally be applied with minimal consequence.

### **A multi-centric pilot study of student nurse attitudes and beliefs toward sexual healthcare**

This study sets out to explore the mindset and beliefs that student nurses hold regarding providing clients with sexual healthcare. Sexual healthcare is an essential component of a client's life. Still, discomfort in discussing the topic and the lack of time to address these concerns contribute to neglecting this aspect of client care (Aaberg et al., 2023). Nursing students will eventually become the nurses who are providing patient care, so this study aims to explore the students' thoughts and opinions on providing this care so that interventions can be analyzed and implemented earlier on in the nurse's career to bridge this gap in client care (Aaberg et al., 2023). The data from this research should identify if and where deficits in nursing education lie so that changes can be made to improve holistic client care and the nurse's comfort and competency in providing sexual healthcare. Suppose additional support and education are needed to provide sexual health care confidently. In that case, the data should indicate that and help determine if those interventions might be helpful early in nursing education (Aaberg et al., 2023).

### **Key Points**

This research study utilized convenience sampling to obtain about 130 students in their 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> year of nursing school across five campuses in several countries to participate in a

Sexual Attitudes and Beliefs Survey (SABS), which uses a Likert scale to measure the opinions and beliefs of 12 components (Aaberg et al., 2023). Possible scores ranged from 12 to 72, with higher scores indicating more negative attitudes toward providing sexual healthcare and more obstacles to doing so. In contrast, lower scores indicate greater comfort and ease in delivering this type of client care (Aaberg et al., 2023). The data underwent statistical analysis with distributions, t-tests, ANOVA, and data with a p-value of less than 0.05 was deemed significant (Aaberg et al., 2023). The average score across the study was about 40, indicating more barriers to providing sexual health care than ease of this care. The statistically relevant findings indicate that Portuguese student nurses report more barriers to providing sexual healthcare, and those in Italy report the slightest obstacles to the provision of this care (Aaberg et al., 2023). The data indicates that students believe they do not possess adequate knowledge regarding the impact that health diagnoses can have on sexual health and the belief that discussing sexual health is not essential for optimal client outcomes (Aaberg et al., 2023). The authors conclude that nursing students hold specific values and beliefs that will impede their ability to provide sexual healthcare to clients in the future and that educators in nursing should aim to bridge this gap by engaging these students in more sexual education and experience practicing asking sexual-related questions (Aaberg et al., 2023).

### **Assumptions**

The authors of the study assume that the students are uncomfortable discussing sexual health with clients and that they do not see it as within their roles and responsibilities (Aaberg et al., 2023). This assumption also links to the idea that due to the students' present hesitation and discomfort regarding sexual health discussions, they will continue to neglect this aspect of client

care in their careers as nurses (Aaberg et al., 2023). Another assumption is that although the data was gathered in several countries, the widespread need for enhanced education and experience in this area will be universally beneficial throughout all nursing programs (Aaberg et al., 2023). Finally, the authors suggest that the attitudes and beliefs of faculty at nursing programs will impact the nursing students' beliefs and their practice (Aaberg et al., 2023). These assumptions are critical because they guide suggested interventions such as enhanced learning opportunities and clinical experience in discussing this topic.

### **Deficit/Conclusion**

The primary conclusion of this article is that more training and education regarding sexual health is necessary for students to become more comfortable and proficient in providing sexual healthcare (Aaberg et al., 2023). I accept the authors' line of reasoning because they conducted research yielding similar results in various regions and programs and acknowledge the limitations of their sample. The article recommends role-playing, simulations, and clinical practice with feedback to enhance the student's attitudes and strength in discussing sexual health matters (Aaberg et al., 2023). Suppose nursing programs adopt these interventions into practice. In that case, the result is likely to be students who become nurses and feel better prepared to address their clients' sexual health concerns and therefore, more holistic care for clients for years to come. Consequently, if nursing rejects this reasoning, nurses will continue to disregard and neglect this aspect of client care, leading to potential complications and a lack of holistic client care. Also, neglecting this line of reasoning allows nurses to continue to disregard this as one of their responsibilities, and clients could suffer by continuing to live with sexual dysfunction, STIs, and other potential sexual health issues.

## **Nursing students' perceived attitudes toward addressing sexual health in their future profession: A longitudinal quantitative study**

This study, like the previous one, recognizes the importance of a client's sexual health and well-being and identifies person-centered care as a pillar of nursing but argues that there exists a deficit in addressing this aspect of a client's life (Russell et al., 2023). The article analyzes the gap in the research between nurses' knowledge and ability regarding providing sexual healthcare and the implementable interventions to bridge this gap in client care (Russell et al., 2023). Healthy People 2030 aims to improve sexual health education nationwide to enhance holistic well-being for all, and this cannot be done adequately without sexual healthcare being readily accessible in healthcare settings, starting with the nurse (Russell et al., 2023). This article addresses student nurses' knowledge and abilities about providing sexual healthcare to clients in their future careers to formulate interventions in nursing education to enhance this type of care in a clinical setting (Russell et al., 2023).

### **Key Points**

For this study, the authors used convenience sampling from an Associate of Nursing program at a college to have 159 nursing students complete a Likert scale survey called Students' Attitudes Towards Addressing Sexual Health (SA-SH) (Russell et al., 2023). The survey was repeated over a year and a half, and each overall score corresponds to a reference range that indicates the level of comfort and preparedness to address the client's sexual health concerns (Russell et al., 2023). The data was generated and then analyzed using the Pearson r correlation with a p-value of less than 0.05 and alpha=0.05, and the following data giving a p-value <0.01 (Russell et al., 2023). The significant findings are that students feel comfortable discussing this topic with future clients, there is some hesitation with addressing sexual issues for fear of it harming the nurses' relationship with the client, there is a necessary level of education needed,

and that future employment environment/coworkers will impact the nurse's ability to adequately provide this type of client care (Russell et al., 2023). Students also indicated they would be on a time constraint and sexual health might not fit into their allotted time with the client (M=4.44, agree to strongly agree) although recognizing the importance of this care (Russell et al., 2023). These findings indicate that student nurses are primarily comfortable with addressing sexual health concerns with clients. However, the education they receive on the topic, their working environment, and their timing also impacts the degree to which this concept is addressed (Russell et al., 2023). The findings from this study confirm that sexual education is essential for nurses, but interventions to improve this aspect of client care need to expand within the healthcare field to providers and other professionals and be routinely included in assessments. The reasoning behind this is that nurses take pertinent assessment data to the provider, and if the provider routinely does not address it, or disregards the sexual aspects of the assessment, nurses are less likely to continue to address these types of concerns.

### **Assumptions**

The authors primarily assume that educational interventions must be developed and implemented to improve nurses' provision of sexual healthcare (Russell et al., 2023). Their data supports this as the average response amongst the surveys administered from the nursing students rated the need for additional sexual education as "agree" (Russell et al., 2023). This is the students' way of acknowledging the need for additional education to discuss sexual health topics with future clients competently. These findings support the need for further education and opportunities to practice sexual health questions in preparing nurses to address the sexual health concerns of clients. The authors also assume that student nurses have a positive attitude toward

addressing client sexual-related concerns (Russell et al., 2023). The average responses to the survey was 83.49, which is within the range of 80 to 110, indicating the students are comfortable and prepared to provide sexual health care in practice (Russell et al., 2023). This survey mean is on the lower end of the provided reference range, and there are scores that are higher and lower than this average, but overall, the students indicate an openness to discussing sexual health with clients, and there is room for improvement in this respect as well (Russell et al., 2023). This data suggests the need for additional support and education to prepare and equip nurses to provide this type of care and guides research toward interventions that may achieve this.

### **Deficit/Conclusion**

As with the other research on this topic, the author's line of reasoning should be accepted. Additional clinical experience and practice in discussing sexual health matters, as well as sexual education early on and throughout the nursing curriculum, will enhance the student nurse's confidence and competence going forward. Accepting the authors' line of reasoning steers other research to explore educational interventions that may improve the students' preparedness to provide sexual healthcare thereby improving the consistency of holistic client care by addressing this area that is often a deficit. This study was only completed at one college with participants who had similar demographic information, so it is safe to assume that the culture and social climate of this age and area impacted the study results (Russell et al., 2023). There are no considerable negative implications if nursing fails to accept the authors' line of reasoning as the level of comfort and preparedness to discuss sexual health with clients will vary based on the area, environment, and other associated factors, so the data cannot be generalized to the country or the world.

## Conclusion

These studies aimed to shed light on the deficit in the provision of sexual healthcare and assessments with nurses. The consistent findings suggest that additional sexual education and clinical experience are needed for nurses to confidently provide this aspect of care for clients. The goal is that by implementing more practice and sufficient education on the topic, nurses will feel more comfortable addressing this with clients and sex as a whole will become less taboo and more widely discussed in a clinical setting so that clients receive the most complete and appropriate care. The data acquired in these studies will enhance client outcomes by paving the way for improvements in nursing education to be made, and sexual health to become more routinely addressed. The goal is that more frequently addressing sexual health concerns with clients will make sex and sexuality less taboo, and clients will become more comfortable bringing questions and concerns to their nurses. The information acquired in these studies will improve nursing practice by raising awareness of nurses' attitudes and beliefs regarding the provision of sexual health care and, hopefully, increase confidence in asking these types of questions. The information obtained from these studies improves evidence-based practice and quality improvement efforts by including nursing students in the research and recognizing that they are also part of the healthcare system (QSEN, 2020). This tailors research and interventions toward the student level of education and care, as well as throughout the healthcare system, but starts interventions early in professional development. The data that was obtained from these research studies can improve healthcare by enhancing the skills of healthcare professionals, and shedding light on a deficit in the aspect of sexual healthcare so that it is prioritized more in the healthcare system. This will not only improve the level of care that team members can provide but enhance client outcomes and contribute to a more client-centered level of care. The

information obtained in these studies will enhance nurses' competence and confidence in sexual healthcare, while also making the nursing care provided to clients more holistic. Healthcare as a whole will be more well-rounded as many of the obstacles to holistic client care and sexual healthcare specifically have been addressed in this research.

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