Aotearoa New Zealand STI Management Guidelines for Use in Primary Care

How to take a sexual history

- Sexually transmitted infection (STI) risk
- The appropriate tests
- Who else is at risk
- Whether treatment is needed
- Intimate partner violence and sexual harm – past and recent

How do I start the discussion?

- The presence of partners, support people or children may prevent a patient from disclosing personal information – ideally see patients alone
- Asking about sex is not intimidating if it is normalised, and supported by confidentiality and professionalism
- An initial framing statement will explain why you need to ask the questions
- It is useful to mention that the offer of testing is routine, and that they may not need to have a full examination. This increases testing uptake

Examples:

- *As part of a general health check, I ask my patients about their sexual health and offer testing. Do you have any sexual health concerns you would like to discuss?*
- *Since you're here to talk about contraception, could we also talk about other aspects of sexual health?*
- *I offer all my patients aged 30 and under the opportunity to have a test for chlamydia, which is a very common sexually transmitted infection. Tests can be self-collected if you'd prefer not to be examined. Would you be*

interested?
- (If patient hesitates) *Can I give you some information, so you can think about it?*

Sexual history – example questions

- *I'd like to ask you some questions about sex so we can decide what tests to do. Is that ok?*
- *When did you last have sex?*
- *Was that with a regular or a casual sexual contact?*
- *What gender are your partners? (Some people may prefer to be asked 'was that someone with a penis, or someone with a vagina?')*
- *Was that vaginal, anal or oral sex?*
- *Did you use a condom?*
- *How many sexual contacts have you had in the past 3 months? 12 months?*
- *Could you be pregnant?*

Detailed risk assessment – example questions

- *...I'd like to ask you about some other activities that could increase someone's risk of some sexually transmitted infections and bloodborne viruses. Is that ok?*

Suggested list of characteristics or factors that will help identify risk:

- (If the patient has sex with women) *Have you ever had any sexual contact with a man?*
- *Have you ever been paid to have sex? When?*
- *Have you ever had any tattoos? If yes, was that here or overseas?*
- *Have you ever injected drugs? Have you ever shared needles or any of the equipment used for injecting?*
- *Have you ever been in prison?*
- *How would you describe your ethnicity?*

Consent

- *I suggest we should test for chlamydia and gonorrhoea. This will involve... You should also have a blood test for HIV and syphilis to complete your STI screen. Are you happy to have a test while you're here?*

Routine enquiry for intimate partner violence and sexual harm

- *Because we know that sexual harm and partner violence affect a lot of people, and can have a big impact on health and well-being, we ask ALL of our patients/clients about it.*
- *Before I ask you these questions, I'd like you to know that this conversation is confidential – that means I won't share the information with others, unless I am concerned about your safety, or the safety of someone else. If what you tell me does raise concerns about safety, I will talk with you before talking to anyone else.*
- *Have you ever been physically hurt by your partner or an ex-partner, either recently or in the past? By that I mean hit, punched, shoved, kicked, slapped or choked?*
- *Does your partner or ex make you feel no good or worthless, or stop you seeing your family or friends?*
- *Have you ever been made to have sex at a time or in a way that you didn't want to?*
- *Are you afraid of your partner or ex-partner?*

If no:

- *I'm really glad about that because relationships like that can really affect your health and happiness / wellbeing. If it ever happens to you or someone you know, you can always talk about it here.*

If yes:

- *I'm sorry that has happened to you. No one should be treated like that. Is it something that is happening now, or something that has happened in the past?*
- *Would you like to tell me a bit more so I can see what things might be helpful for you?*

It is important to be familiar with local resources if a positive disclosure is made

For further information:

- HealthPathways - search for 'sexual assault' or 'family violence'

- medsac.org.nz - useful patient resource
- safetotalk.nz - useful patient resource

Endorsement: These guidelines have been endorsed by the Blood Borne Viruses and Sexually Transmitted Infections Standing Committee (BBVSS).

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