9 Tips for Taking Better Sexual Health Histories

1. We are sexual.
The great philosopher George Michael once said, “Sex is natural, sex is fun.” He was right: 96% of Americans are having sex. Sex is nothing to be ashamed of, to be weirded out by, or to judge others for. Leave your judgments, preferences, personal beliefs, and biases at the exam room door.

2. There is no normal.
And when it comes to sex, there is no such thing as normal. If your patient enjoys it, it’s normal. Our job is not to judge, but to educate, test, and hopefully prevent the spread of disease.

3. There is no right answer.
Many patients believe that there is a “right answer” to the questions you ask them about sex. As a result, they may hold back information, or tell an outright lie to give you the answer they think you’re looking for. Reassure them that there is no right or wrong answer to your questions, and that if a question makes them uncomfortable, you can come back to it later when they feel more comfortable.

4. If you are uncomfortable, admit it.
It’s not only patients who get uncomfortable in the exam room. If a patient discusses an activity that makes you feel uncomfortable, or you’re just generally uncomfortable with the topic of sex, it’s okay to admit it. Patients will respect and trust you even more if you show them you are human, too.

5. Have compassion.
In any patient-provider interaction, the patient is vulnerable, and patients often feel fear or shame. Understand that talking to you isn’t easy for them, and show them kindness and empathy.

6. Discuss, don’t lecture.
Patients fear being judged and being lectured by an authority figure. Be conscious of the messages and tone you communicate through your words and your body language.
7. Take your time.
Your time may be limited, but if the patient senses you’re in a rush, they won’t feel comfortable or be fully forthcoming. Warm them up with small talk, or questions about family or work. Note personal information in their file, so the next time you meet, you can ask follow-up questions and help them feel they were important enough to remember. Earning a patient’s trust is an investment, and it may take longer than cutting to the chase. But a patient who feels they can trust you is more likely to tell you the truth. A quick consultation has no value if you don’t find out what’s really going on with the patient.

8. See the patient as a partner.
It may seem that the patient has come to you to solve their specific problem, but really, you are problem-solving collaborators: you are helping them get healthy, and they are helping you solve a community problem—the spread of disease. Work together.

9. Listen for stories, not just symptoms.
Everyone enters the exam room with a story to tell about how they got there and why. By listening and not lecturing, by withholding judgment and being open and curious, we earn trust, show empathy, and build long-lasting relationships that benefit both the patient and the community at large.