

TREATING FEMALE SEXUAL DYSFUNCTION

Sexual health concerns are often best treated with an interdisciplinary approach, given the array of medical, psychological, sociocultural and interpersonal contributors. Coordinate care with other providers as needed.

There may be a provider in Women's Primary Care, Primary Care Mental Health Integration, Specialty Mental Health, Behavioral Medicine or Urology with expertise in sexual dysfunction who could collaborate with you.

You may need to refer the Veteran out for specialized sex health assessment and/or treatment if there is no expert in-house.

If it seems that the sexual health concerns are a consequence of, or exacerbated by, MST, contact the local MST Coordinator to discuss availability of local resources.

The MST Consultation Program (MSTConsult@va.gov or 866.948.7880) is available to answer questions and provide support regarding any issues that arise in working with MST survivors, including those related to sexual health.



TREATMENT RESOURCES

- *Sex & the Military* training for providers, http://cir.usc.edu/wp-content/uploads/2015/07/SexMilitaryToolkitInteractiveVersion-Jul2015_002.pdf
- Association of Reproductive Health Professionals www.arhp.org/index.php/sex-and-sexuality
- Internat. Society for Sexual Medicine Q&A <https://www.issm.info/sexual-health-qa/>
- *The Sexual Healing Journey: A Guide for Survivors of Sexual Abuse, 3rd Ed.* by Maltz
- *Principles and Practice of Sex Therapy, 5th Ed.* by Binik & Hall
- *When Sex Hurts: A Woman's Guide To Banishing Sexual Pain* by Goldstein, Pukall & Goldstein



TO FIND SPECIALTY PROVIDERS:

- The American Association of Sexuality Educators, Counselors and Therapists (AASECT) www.aasect.org/referral-directory
- Society for Sex Therapy and Research (SSTAR) <https://sstarnet.org/find-a-therapist/>
- International Society for the Study of Women's Sexual Health (ISSWSH) <https://www1.statusplus.net/sp/isswsh/find-a-provider/>

TREATING SEXUAL DYSFUNCTION IN WOMEN VETERANS

A Guide for
VA Health Care Providers

This work was supported by the VA South Central Mental Illness Research, Education and Clinical Center (MIRECC) and the VISN 17 Center of Excellence, and the clinical expertise of Drs. Amy Silberbogen and Melissa Ming Foynes.



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MILITARY SEXUAL TRAUMA (MST) & FEMALE SEXUAL DYSFUNCTION

Unwanted sexual experiences, including MST, are an important risk factor for female sexual dysfunction, including difficulties with desire, arousal, orgasm, pain, and sexual satisfaction.

Approximately 25% of women Veterans report MST. Although not all sexual health difficulties are a consequence of MST, sexual dysfunction is more common among women Veterans who have experienced MST.

Trauma-related sexual dysfunction may serve as perceived protection from future traumas, e.g., avoiding sex.

Healing from trauma-related sexual dysfunction is a process that takes time, and Veterans may experience both progress and set-backs.

FEMALE SEXUAL DYSFUNCTION

The female sexual dysfunction disorders are classified by the DSM-5 and ICD-10.

- **Female Sexual Interest/Arousal Disorder 302.72 (F52.22):** Low sexual desire, difficulty with physiological sexual arousal and lubrication, and mental sexual arousal
- **Female Orgasmic Disorder 302.73 (F52.31):** Difficulty attaining orgasm, or reduced sensitivity of orgasm
- **Genito-Pelvic Pain/Penetration Disorder 302.76 (F52.6):** Vulvar or vaginal pain when attempting to engage in sexual activity
- **Other Specified Sexual Dysfunction 302.79 (F52.8) and Unspecified Sexual Dysfunction 302.70 (F52.9):** Sexual symptoms that cause distress but do not meet the full criteria for any of the other disorders



TIPS FROM WOMEN VETERANS ON ASKING ABOUT SEXUAL HEALTH

“It’s nice if they bring it up because it’s almost like someone giving you permission to share, and we need that.”

“It’s important for the doctors to say, there is no judgment here. We fear they will think it is our fault.”

“They (providers) have no idea how difficult it is to share and how many times we’ve had to share that. You can’t come into it like, now you’re our provider and we should trust you, and now we have to tell you all these things. Trust takes time.”

“I think there’s a stigma with women and sex drive. Like, we’re not supposed to want it.”

“Once my doctor asked me, ‘Are you having fulfilling sex; emotionally and physically?’”

ASKING PATIENTS ABOUT SEXUAL HEALTH

Although some clinicians may feel awkward asking Veterans about their sexual health, research suggests people want their doctors to ask about it.

WAYS TO ASK ABOUT SEXUAL HEALTH AFTER SEXUAL TRAUMA:

- “Many women have learned ways of coping with unwanted sexual experiences that are helpful sometimes and cause problems other times. For example, distracting or going somewhere else during sex can help you get through it but affect your enjoyment of sex and cause problems in your relationship. Is anything like this happening for you?”
- “With your permission, I’m going to ask you some questions about your sexual health. I ask all of my Veterans these questions, and there is no judgment here. Would that be Ok with you?”
- “It is common to experience difficulties with sex or intimacy after unwanted sexual experiences. Do you have any concerns about your sexual health?”
- “This may feel strange or uncomfortable, but sex is a part of most people’s lives. We will spend a few minutes talking about your sexual health, whether you have noticed any difficulties, and if you are satisfied with this area of your life.”
- “Are you having any problems with sexual health or intimacy, for example, recalling memories or images of past unwanted experiences during sexual activity? Are you having a hard time saying ‘no’ or expressing what you want sexually?”