

University of St Augustine for Health Sciences SOAR @ USA

Spring 2022 Virtual OTD Capstone Symposium

OTD Capstone Symposia

4-14-2022

How Occupational Therapists Address Chronic Pain and Sex/ Intimacy

Millie Szeto University of St. Augustine for Health Sciences

Susan MacDermott University of St. Augustine for Health Sciences

Follow this and additional works at: https://soar.usa.edu/otdcapstones-spring2022



Part of the Occupational Therapy Commons

Recommended Citation

Szeto, M., & MacDermott, S. (2022, April 14). How Occupational Therapists Address Chronic Pain and Sex/Intimacy. Poster presented at the Virtual OTD Capstone Symposium, University of St Augustine for Health Sciences. Retrieved from https://soar.usa.edu/otdcapstones-spring2022/34

This Poster/presentation is brought to you for free and open access by the OTD Capstone Symposia at SOAR @ USA. It has been accepted for inclusion in Spring 2022 Virtual OTD Capstone Symposium by an authorized $administrator\ of\ SOAR\ @\ USA.\ For\ more\ information,\ please\ contact\ soar@usa.edu,\ erobinson@usa.edu.$



How OT's Address Chronic Pain and Sex/Intimacy

Millie Szeto, OTS; Susan MacDermott, OTD, OTR/L

BACKGROUND

Sexual activity is 1 out of the 9 activities of daily living (ADLs) and is considered to be fundamental for a person's life, yet it is one of the least discussed topics that occupational therapists address in patient care settings, academia, and/ or professional development (Mc Grath & Sakellariou, 2015).

PURPOSE

Explore how occupational therapists addressed sex/intimacy with the chronic pain population in order to provide more insight and encouragement for other occupational therapists to incorporate discussion of sex/intimacy in their practice.

METHODS

An online survey was conducted to explore how occupational therapists in chronic pain settings address sex and intimacy.

Design

Mixed-methods (Likert scale and free response questions)

Recruitment

- Posting on Facebook groups that were for occupational therapists who work with chronic pain
- Emailing occupational therapists who fit the inclusion criteria

Survey

 Demographics, comfort levels, how they have addressed sex/intimacy with clients that have chronic pain

Participants

• 21 occupational therapists who have worked with the chronic pain population

RESULTS

Research Question: How are occupational therapists in chronic pain settings addressing sex and intimacy?

Theme

Just part of the OT process

- Integrating into initial evaluation, goal setting, and or discharge plans
- Common OT frameworks + adaptive equipment/tools

Laying down the groundwork

- Continuing education
- Repeat, repeat, repeat
- Know when to refer

Know when to refer

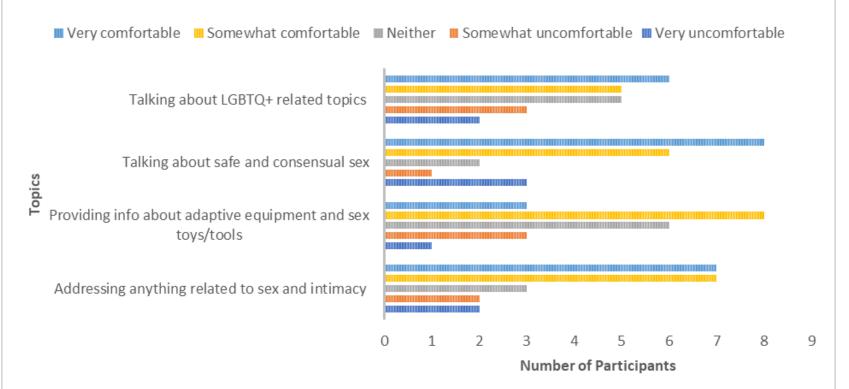
When in doubt, communicate with:

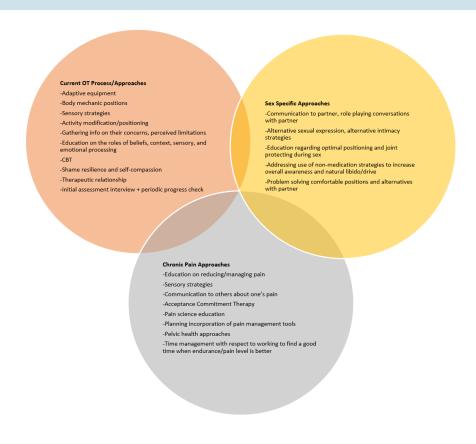
- Therapist
- Oneself
- Partner(s)

Excerpts

- "I tend to practice from a MOHO + biomechanical frames of reference, but we also include elements of other models as appropriate"
- "During the occupational profile and goal setting discussion,
 I ask about what things the client has either given up or not
 doing [sic] to their satisfaction due to their pain problem. If
 they don't bring up sexual expression, I will gently ask
 about it"
- "I wasn't terribly comfortable with [sic] until I started doing it over and over and over again so it's like anything is going to feel really weird and awkward at first times. You learn like any like anything else."
- "I feel like at least initially I don't think I consciously do that anymore but when I first learned about the PLISSIT model it help [sic] me kind of organize my thinking and how to bring up so I think I kind of subconsciously still do that"
- "We also did a session with her husband sharing about pain science, the things she was working on, and allowed time for him to talk about his feelings and how he could support her, as well as how she could support him"
- "Talked about improving relationships with communication strategies"

COMFORT LEVELS





DISCUSSION

A limitation to this study is due to the taboo aspects of this topic, the probability of occupational therapists who have discussed this topic with their clients are lower. Therefore may have results in fewer participants for this study. A strength of this study was the virtual survey, it allowed participants to have input from other states and countries. Some notable improvements would be some changes in phrasing of survey and interview questions in order to gather more qualitative content.

CONCLUSIONS

This capstone aims to encourage other occupational therapists by showcasing that:

- Addressing sex and intimacy does not deviate from standard OT process
- Having clear communication between therapist and client is key.
- Repetition of doing so will ultimately increase comfort level, knowledge, and experience

Next steps of this project will be to disseminate an infographic of this study to OT and sex/intimacy specific social media groups and to a website.

REFERENCES

Mc Grath, M., & Sakellariou, D. (2015). Why Has So Little Progress

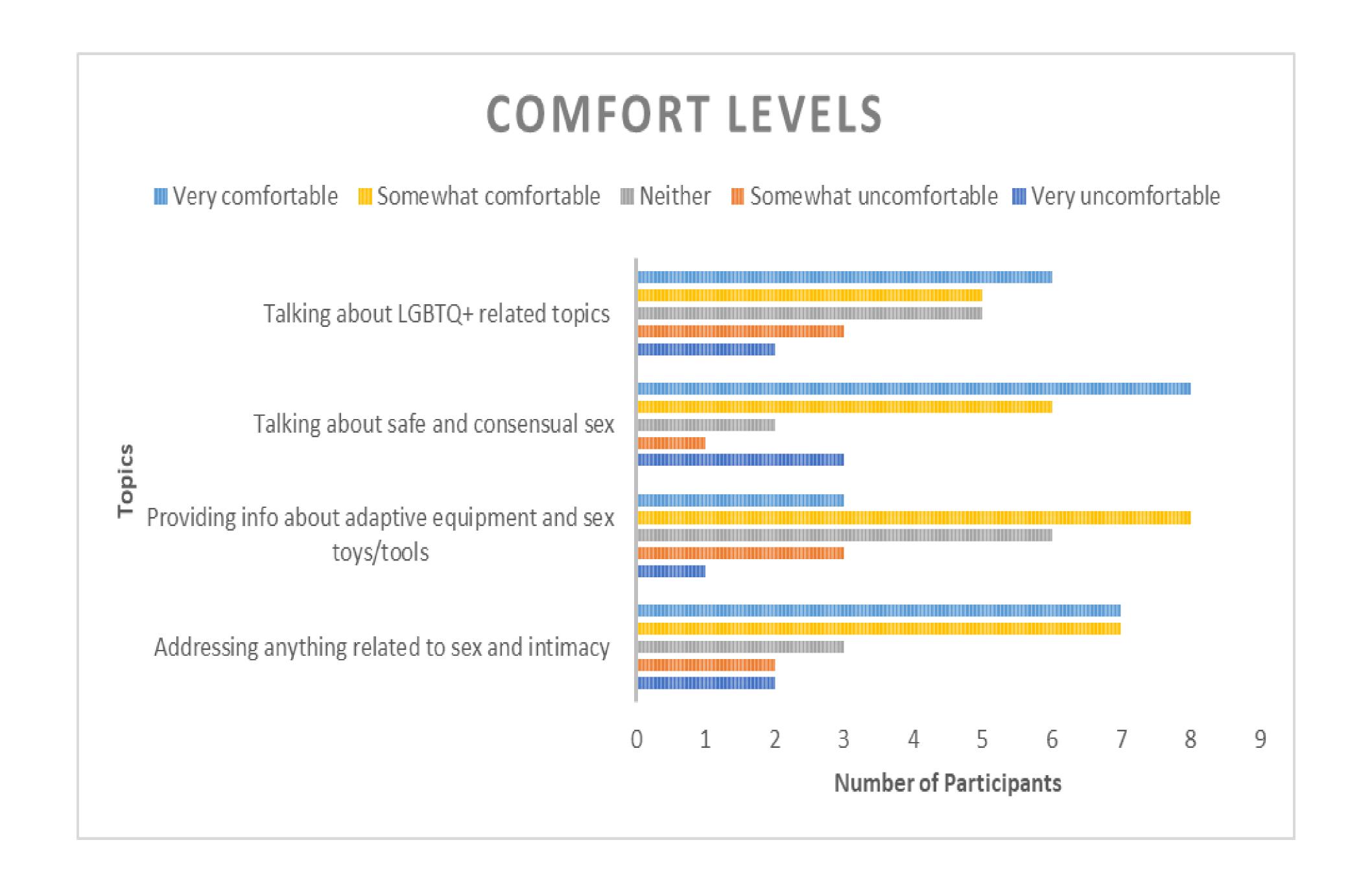
Been Made in the Practice of Occupational Therapy in Relation

to Sexuality? American Journal of Occupational Therapy, 70(1),

7001360010p1. https://doi.org/10.5014/ajot.2016.017707

Acknowledgement: Special thanks to Dr. Kathryn Ellis, OTD, OTR/L, AASECT-, SC







Current OT Process/Approaches

- -Adaptive equipment
- -Body mechanic positions
- -Sensory strategies
- -Activity modification/positioning
- -Gathering info on their concerns, perceived limitations
- -Education on the roles of beliefs, context, sensory, and emotional processing
- -CBT
- -Shame resilience and self-compassion
- -Therapeutic relationship
- -Initial assessment interview + periodic progress check

Sex Specific Approaches

- -Communication to partner, role playing conversations with partner
- -Alternative sexual expression, alternative intimacy strategies
- -Education regarding optimal positioning and joint protecting during sex
- -Addressing use of non-medication strategies to increase overall awareness and natural libido/drive
- -Problem solving comfortable positions and alternatives with partner

Chronic Pain Approaches

- -Education on reducing/managing pain
- -Sensory strategies
- -Communication to others about one's pain
- -Acceptance Commitment Therapy
- -Pain science education
- -Planning incorporation of pain management tools
- -Pelvic health approaches
- -Time management with respect to working to find a good time when endurance/pain level is better