

# PERCEPTIONS AND ATTITUDES OF HEALTHCARE PROVIDERS TOWARDS DISCUSSING SEXUALITY AND SEXUAL PROBLEMS IN CANCER PATIENTS (FROM LGBTQ+ BACKGROUNDS).

## Background

Sexual dysfunction is a consequence of cancer treatment. Due to better survival rates and better cancer treatments there are more cancer survivors so there are more patients who are confronted with late effects such as sexual dysfunctions. Few oncology patients, however, have spoken with a healthcare professional (HCP) about sexual health during or after treatment although this was a need [1].

## Aim(s)

This study aimed to explore the perceptions and attitudes of HCPs towards discussing sexuality with cancer patients, as well as LGBTQ+ patients.

## Methods

A mixed-method study was conducted. An online questionnaire about attitudes and knowledge towards talking about sexuality with cancer patients was distributed. The answers were statistically analyzed in SPSS using descriptive statistics and Chi2. Three monocentric focus group interviews with HCPs were conducted about their perceptions and attitudes towards discussing sexuality and sexual problems with cancer patients, as well as towards LGBTQ+ patients. Interprofessional HCPs working in oncology were purposefully recruited in one University hospital. Data were thematically analyzed and investigators triangulation was used during analysis.

## Results

The questionnaire was completed by 259 HCPs. Participants who had been educated on sexual health were positively correlated to knowledge ( $p \leq 0.001$ ). HCPs in more specialized functions had significantly more knowledge and felt more comfortable discussing sexuality (both  $p < 0.001$ ). Six themes, for which data saturation was reached, emerged from the focus group interviews: (1) preconditions for discussing sexuality, (2) perceived barriers and (3) facilitators, (4) LGBTQ+ patients, (5) focus points, and (6) recommendations provided by HCPs.

## Discussion

Most HCPs reported not feeling uncomfortable when discussing the topic of sexuality with cancer patients. However, when further explored, they mentioned finding it easier when patients took the initiative. Some HCPs even indicated only broaching the topic when patients asked more specific questions about sexual issues. Nevertheless, studies found that cancer patients wanted their HCPs to address the topic [2]. Sexual orientation was often presumed or perceived as something patients would bring up themselves. A study had the same findings and indicated that by treating each patient the same, invalidation of LGBTQ+ patients could arise [3].

## Implications and future perspectives

HCPs have presumptions about patients' needs, while these might differ from their actual needs. This is especially true for minority groups. There is a need for more education and training among HCPs to facilitate the conversation about sexuality, as well as research focusing to improve care regarding sexual issues in cancer patients.

## References

[1] Neefs H. et al., onderzoeksrapport KOTK, 2022, [2] Sporn et al. 24(9), 1167-1173, 2015, [3] Sutter et al., 104(4), 871-876, 2021.