

Patient-Perceived Value of Sex Concordance when Communicating with Physicians about Sexual Health

Lance Rintamaki, PhD, David M. Peek, MD, Deya Roy, MA, Amanda Hamilton, MA, Kristin Maki, MA, Andrew Gasper, Daniel Hamilton, Priya Sasankan

Department of Communication, University at Buffalo (SUNY)

BACKGROUND

Sexual Health

Sexual health is not a lifestyle issue, it is a quality-of-life issue

In a study of 26,000 people in 28 countries, 83% of men and 63% of women describe sex as "extremely," "very," or "moderately" important



Prevalence & Significance of Sexual Health Issues

A vast range of issues can impair sexual health, with both physiological and emotional consequences

Sexually Transmitted Infections

- The CDC (2013) estimates that there are roughly 19 million new sexually transmitted infections each year
- This costs the U.S. healthcare system \$16.4 billion annually
- This costs individuals even more in terms of acute and long-term health consequences



At least one-fifth of sexually active adults participate in risky sexual behaviors

Reproductive Health

- 34% of U.S. teenagers have at least one pregnancy before they turn 20
- 80% of teenage pregnancies are unintended
- The main rise in the teen pregnancy rate is among girls younger than 15
- The U.S. spends \$7 billion each year due to the costs of teen pregnancy
- Only one-third of teenage mothers complete high school and receive their diplomas
- By age 30, only 1.5 percent of women who had pregnancies as a teenager have a college degree
- Within the first year of becoming teen mothers, one-half of unmarried teen mothers go on welfare



Sexual Dysfunction

- The prevalence of sexual dysfunction roughly matches the age at each decade
- For example, the prevalence of ED is 40% among persons aged 40 years and 70% among those aged 70 years



Physician's Role



Physicians can provide clinical information and education on safer and riskier sexual practices, reproductive health and sexual dysfunction

Communicating with physicians about sexual health is linked to:

- Later sexual debut
- Greater condom use self-efficacy
- More sexual communication with partners
- More consistent condom use

Demographic Concordance

Concordance:

When physicians and their patients share a specific demographic feature.

Examples of Concordance:

- White physician, white patient
- Gay physician, gay patient
- Female physician, female patient

Discordance:

When physicians and their patients do not share a specific demographic feature.

Examples of Discordance:

- White physician, white patient
- Gay physician, gay patient
- Female physician, female patient

Consequences of Concordance & Discordance

This issue has received considerable attention in the context of patient preferences and experiences.

- Several studies show that many patients have a preference for racial and ethnic concordance (e.g., having a physician that is their race and ethnic background)
- Some studies suggest that some patients believe they will receive better quality of care if they have racial concordance with their physician.
- Some studies show that patients think the odds of being mistreated or disrespected by a physician go up if there is racial discordance.



CURRENT PROJECT

Currently, there is little research examining the communication implications of Sex concordance (i.e., whether or not patients and their physicians are of the Same sex). To explore this potential link, we asked 2,400 participants in the United States and Singapore (1,200 and 1,200, respectively) if they had a preference for the sex of their physician if the physician needed to talk with Them about sexual health related issues. For those who said they did have a preference, we asked them two questions:

- Which sex do you prefer the physician to be under these circumstances?
- What are your reasons for this preference?

Through this study, we shall answer the following research questions:

- RQ1: What percentage of people report having a preference for the sex of their physician if the physician must discuss sexual health issues?
- RQ2: What percentage of people prefer sex concordance in this context?
- RQ3: What percentage of people prefer sex discordance in this context?
- RQ4: What are the reasons given for these preferences?
- RQ5: Does having a preference correspond with specific demographics (e.g., sex, age, or race of person asked)?
- RQ5: Do reasons given for a preference correspond with specific demographics (e.g., sex, age, or race of person asked)?
- RQ6: Does preference vary based on country or are these preferences universal?

Analysis is currently underway.