Opening Doors: Frank Talk About Body Image, Intimacy & Sexuality

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Problem Statement:
- Sexual health for cancer patients & survivors is poorly understood and rarely addressed

Statistics:
- Prevalence of sexual side effects with cancer care: breast (50%), gynecological (50%), prostate (70%)

Source: Sexual Assessment in Cancer Care, Krebs
Addressing The Problem

- Oncology Social Workers can open the door to improved sexual health and satisfaction

Message to Oncology Social Workers #1

- You are not expected to have all the answers. But you must be willing to ask the questions.

Message to Oncology Social Workers #2

- Our role is to help patients & survivors own their desire
Message to Oncology Social Workers #3

• Fundamental Social Work Principle: Start where the client is...

Message to Oncology Social Workers #4

• Create an opening by providing safety. Being informed is the key.

Role Play

• How to open the door to healthy conversation about body image, intimacy & sexuality
Assessment Review #1

- The Female Sexual Function Index (FSFI)

Assessment Review #2

- Permission, Limited Information, Specific Suggestion, Intensive Therapy (PLISSIT)

Preferred Sexual Assessment Tools

- BETTER and PLEASURE models
Specific Issues #1

- Young Adult Survivors

Specific Issues #2

- Lesbian, Gay, Transgender & Queer Survivors (LGBTQ)

The Message

#1

- Sexual satisfaction is a byproduct of physical and emotional comfort
The Message #2

• Intercourse is only one portal through which this is achieved

The Message #3

• Body alteration does not equal sexual foreclosure

Understanding Body Changes

• Gender Identification & Physiology
Anticipating Barriers
- Sexual history is amplified by cancer ordeal

Empowering patients & survivors
- Facing & Embracing A Body Altered By Cancer

Staying Connecting
- Stimulating Arousal
Contact Us

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