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### Sex; the elephant in the room?

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Sex; the elephant in the room? (systematic review)

Sahra Abdullahi

Type of Presentation: Oral Research

Theme: Building viable, Healthy and Safe Communities

Key search words: cancer; cancer patients; patients; oncology; cancer survivors; sexuality; intimacy

Abstract:

It is estimated that about 1 in 2 Canadians will develop cancer in their lifetime. The diagnosis and treatment of cancer can affect all aspects of the person, with sexuality often being neglected. Sexuality is an integral part of personhood, permeating all aspects of being. Sexual health and function are frequently overlooked by healthcare professionals despite being identified as an essential aspect of holistic patient care. Cancer patients have expressed concerns discussing issues about sexuality with their healthcare providers. They find that they should just be grateful that they are alive. However, many of the sexual disturbances that patients experience are not the result of the diagnosis itself but our medical interventions. Cancer patients who experience sexual morbidity are at an increased risk of distress and poor quality of life. Impaired emotional well-being and quality of life, in turn, contribute to higher rates of morbidity and mortality among affected cancer patients. I've conducted an extensive literature review investigating patient-provider communication about sexual concerns by quantifying the prevalence of and factors associated with such communication. Findings from this systematic review suggest that discussions of sexual concerns continue to be uncommon for cancer patients, particularly women. My academic appraisal of this alarming issue revealed that healthcare professionals have no clear goals with regard to addressing concerns about sexuality and how it relates to patients' wellbeing. I will present recommendations for future research and actionable steps for health care professionals, ensuring that patient-provider communication revolving sexuality is appropriately studied and interventions are implemented to build viable, healthy and safe communities for us all.

Amendment:

The literature search represented diverse disciplines because sexuality transcends merely a biological presentation. Therefore nursing, psychology, sociology, and medical domains were utilized in order to obtain an all-encompassing conceptualization. The search engines utilized were as follows; CINAHL, Pubmed, Psycinfo, Sociological Abstracts, and Google Scholar. The key search terms used were 'sexuality' and 'cancer', interspersed with 'intimacy' and 'cancer.' Intimacy generated greater results than sexuality when matched with cancer which indicated that there is a gap in knowledge as it pertains to sexuality. Lastly, 'sexuality' and 'concept

analysis' were combined to gain insight on if this concept has even been broached. The single concept analysis discovered on sexuality as it relates to nursing yielded several different articles that I used from their reference list. Inclusion criteria were (1) peer-reviewed research articles written or translated into English; (2) titles indicating that shift length and patient safety were the main topic; (3) articles were published within the past 20 years (up to late 2019). Exclusion criteria were (1) articles that were in another language other than English; (2) works that did not contact clear empirical basis, like qualitative and concept analyses. Quantitative and mixed-methods were included for review. Evaluation of the data began with the completion of an evidence table which organized the literature for synthesis using JARS. There was a distinct decision to focus on cancer patients as oppose to cancer survivors who might be experiencing a completely separate, unique experience. There are recommendations for future studies focusing on cancer survivors, but it would have been wrong to conflate the two demographics. There is inherent bias because of my years of experience with the Hematology/oncology population therefore the content will be peer-reviewed prior to publishing.