

## **WOMEN WHO HAVE SEX WITH WOMEN**

Healthcare for women who have sex with women (WSW) should embrace general physical and mental health, and women's health issues as well as those specific to their sexuality.

At all times use open questions with all clients. Do not make assumptions about sexuality. Remember to ask about sex with male partners in the past or currently .

Offer a choice of staff - many prefer to be treated by women only.

**WSW are welcome to attend all generic Sandyford services**

**Specialist sexual and reproductive health clinic**

General internal referral to SRH complex service

**Sexual Problems Clinic**

Appointments via Sexual Problems Secretary on 0141 211 8608

**Counselling Service**

Appointments are available via SCASS on 0141 211 6700

### **Sexual Health Issues**

#### **Sexual Behaviour**

Data from NATSAL 2013 suggested that 11.5% of women aged 16-74 years have had a sexual experience or contact with another woman. Sexual behaviour needs to be asked about to assess STI risks.

Please remember that up to 82% of lesbian women have had past or present sexual activity with men, 5% in the past year and 26% report a history of pregnancy.

#### **Investigations**

There is the potential for woman-to-woman transmission of trichomoniasis, genital herpes, vulval and cervical HPV, hepatitis A, syphilis and HIV. Woman to woman transmission of chlamydia or gonorrhoea has not been documented. Bacterial vaginosis is the commonest sexually related condition in lesbian women.

When discussing sexual health screening, involve the woman in choosing the most appropriate investigations

Several studies report a high prevalence of HIV risk behaviour in lesbians who report sex with men. These include sex with bisexual men, injecting drug use and exchange of sex for drugs or money. HIV testing should be offered.

### Management

As per individual conditions.

Dental dams may reduce exchange of body fluids and are available in a variety of flavours, thickness and colours. Femidoms are available through the GG&C free condom scheme.

Safe sex practices should be discussed in the context of the client's sexual history.

LGBT Scotland has produced a document "*Good Sex Is...for women who have sex with women*", in collaboration with [Healthy Respect](#) (NHS Lothian) and [NHS Greater Glasgow & Clyde](#). It has a focus on pleasure and consent throughout, reinforced with advice about safer sex practises and how to access relevant resources. The guide uses medically accurate information written in plain language to help young people make informed choices.

<https://www.lgbtyouth.org.uk/media/1633/good-sex-is-women.pdf>

(accessed 19/6/23)

### Mental Health Issues

Studies reveal a high incidence of stress in WSW of all ages related to homophobia in their families, institutions and society, and financial insecurity.

### **Stonewall Scotland LGBT Report 2018**

- Experience anxiety in last year; 72% bi women, 51% lesbians
- Deliberate self-harm; 29% bi women, 13% lesbians; compared to 0.4% of the general population
- Suicidal ideation; 48% bi women, 23% lesbians

## **Gender based violence**

- Lesbian women are more likely to have experienced abuse over their lifetime compared with heterosexual women, including childhood and adult sexual assault.
- One in four lesbian and bisexual women have experienced domestic violence, the same as women in general.  
In two thirds of cases the perpetrator was another woman.  
Physical violence between lesbian partners is closely associated with stress and substance abuse.  
Four in five have not reported incidents of domestic violence to the police and those that did, only half were happy with their response.
- NATSAL 2013 revealed that significantly more women who have had a same-sex experience have experienced attempted and completed non-volitional sex.
- Therefore identify / facilitate disclosure.
- Refer or identify sources for appropriate support.

## **Sexual problems**

WSW like anyone else can suffer from sexual dysfunctions such as co-dependency, hypoactive sexual desire disorder (HSDD), mechanical difficulties of intercourse and sex addiction

- Refer for further support to counsellors in SCASS, listening ear in hub setting or Sexual Problems Service in Sandyford Central.

## **Women's Health Issues**

Cervical cytological screening is recommended for **all** women, whatever their sexual orientation.

Frequency of screening is:

From age 25 years every 5 years until 65 years  
(or older depending on any abnormal tests).

## **Cancer**

WSW may be:

- 2-3 times more likely to develop breast cancer than heterosexual women
- more prone to ovarian and endometrial cancers which occur more frequently in nullipara and those who have not used oral contraceptives.
- HPV infection can be transmitted from women to women, and CIN has been found in women who have never had sex with men.

## Reproduction

Approximately 30% of lesbians have children: this is often through relationships with men, but many others wish for and attempt motherhood through artificial insemination (assisted conception setting).

Aspiring or actual mothers who have sex with women can experience hostility from family and society including some healthcare professionals. They may suffer concern about custody in the event of illness or predicted untimely death.

Lesbians with children and those intending to have children should be supported sensitively and knowledgeably. SCASS offers specific support to women seeking donor insemination.

Referral can be made to the local Assisted Conception Unit. The Human Fertilisation and Embryology Act (2008) states that a woman cannot be refused NHS fertility treatment on the grounds of sexual orientation.

Access criteria recommendations for infertility treatment for all couples is that eligible couples may be offered up to 2 cycles of IVF/ICSI where there is a reasonable expectation of a live birth.

### Menopause / Ageing

WSW who have had a natural or surgical menopause may experience physiological and psychological reactions including vaginal dryness, decreased pelvic floor resilience and poorer arousal. It is important to recognise the emotional impact of the menopause for lesbian women.

Twice as many lesbians aged over 40 live alone compared with heterosexual women. They may be at increased risk of social isolation, particularly during illness or times of crisis.

Consider these factors and discuss appropriate support with women.

### General Health Issues

The general female population is seeing an increasing number of smokers, drinkers and drug users, and an increase in obesity. Lesbians are more likely than the general population to suffer from at least one of these problems, often because lesbian venues tend to be pubs and night-clubs, and smoking, drinking and comfort eating are often ways of coping with externalised and internalised stress and homophobia.

### **References**

**[https://www.lgbthealth.org.uk/wp-content/uploads/2022/10/Health-Needs-Assessment-of-LGBT-People-Scotland\\_Infographic-Summary-Final3-13-June-2022.pdf](https://www.lgbthealth.org.uk/wp-content/uploads/2022/10/Health-Needs-Assessment-of-LGBT-People-Scotland_Infographic-Summary-Final3-13-June-2022.pdf)**

### **Demographics**

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### **STIs**

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Fethers K, Marks C, Mindel A, Estcourt CS. Sexually transmitted infections and risk behaviours in women who have sex with women. *Sex Trans Infect* 2000;76(5) 345-9.

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Marrazzo JM, Koutsky LA, Stine KL, Kuypers JM et al. Genital human papillomavirus infection in women who have sex with women *Infect Dis* 1998;178:1604-9

## **Pregnancy**

[Referral Acceptance Criteria - NHSGGC](#)

Stonewall. A prescription for change. Lesbian and bisexual women's health check. 2008. Available from:

<https://www.stonewall.org.uk/resources/prescription-change-2008> [accessed June 2021]