

Sex and desire are not just the domain of the young and able bodied.

Sexuality encompasses the biological, psychological, social, cultural, emotional, and spiritual aspects of self.

Sexuality is an integral part of our identities and our concepts of self. It is a vehicle to express loyalty, passion, affection, admiration, and esteem to others. It's also an affirmation of one's own body and its functioning.

We are all sexual beings from birth until death.

We may express our sexuality by our:

- Dress, appearance and behaviour
- Feelings, love and friendships
- Moral and social decisions
- Sense of attractiveness, and attraction to others
- Sexual feelings, enjoyment of our bodies and sexual activity.

There is no upper age limit on sexual activity, or wanting touch, companionship, comfort and love.

Sexuality and Ageing

As with other areas of our lives, our interest in sex and relationships may change as we grow and mature. It is common to become interested, stay interested, or lose interest in aspects of sexuality such as:

- Touch, affection and sensuality
- Sexual activity with or without penetration
- Celibacy
- Attraction to the same or opposite sex
- Casual sex
- Romantic or erotic literature or movies, sex toys.

Changes as we grow older

There are aspects of becoming older that many people find provide positive opportunities to explore and enhance their sexuality:

- No need for contraception, post menopause
- More uninterrupted time available to know oneself, for relationships, time together, intimacy and sexual contact
- Potentially fewer expectations about sex, more relaxed about it
- New interests and friends
- Enough time to pleasure each other, look after each other
- Less societal pressure about body image, feelings of acceptance about body.

As people age they become more vulnerable to medical diseases and disorders which can affect sexual functioning. While decreased sexual activity is common it need not be accepted as a normal or expected consequence of ageing.

Some of the physical changes that are usual as we grow older may affect sexual expression:

- Sexual arousal may seem slower or not as strong, and occur less often
- Men may find erections softer than before and less frequent- especially those with heart disease, high blood pressure, and diabetes
- Women may find vaginal dryness causes discomfort
- Orgasms may take longer to occur and are weaker in sensation
- Illness, medicine or medical procedures may change sexual feelings, desire or functioning.

Emotional and social changes in later life may also affect aspects of sexuality:

- Loss and grief e.g. from the loss of a long time partner, loss of desire
- Disappointment in life's experiences
- Sadness about loss of fertility
- Retirement, different sense of self
- Loneliness, new home and community
- Feeling less attractive as looks change.

Life-long Sexuality

Sexual health in the later years

A positive attitude is important in all areas of life as we get older and sexuality is no exception. Maintaining general health and keeping active, busy and sociable will help maintain and build self-esteem.

There are ways to help ourselves sexually with some of the physical impacts of ageing.

For Vaginal Dryness:

- Use a water-based lubricant, available from supermarkets and chemists
- Spend more time becoming aroused, fantasising, masturbating or on non-penetrative activities (e.g. massaging, rubbing, kissing, oral sex).

For Erectile Problems:

- Adjust expectations, take advantage of erections when they happen but reduce pressure on self to 'perform'
- Spend time on arousal, focus on other sexual activity, massage, oral sex, pleasuring your partner, masturbation.

Asking your doctor

It may seem difficult at first but doctors are concerned with our whole health and are able to confidentially discuss sexual health too. Your doctor is a good

person to start with to talk about sexual issues and understanding the side effects of any medications and conditions. You may want to ask for a counselling referral. Family Planning doctors are experienced with aspects of sexual health for all people of all ages. Older people are welcome at all Family Planning clinics.

New Relationships

Many people seek new partners later in life, or find a friendship developing into a physical relationship. While this can be exciting and affirming some friends and family, and wider society, may be negative. Remember it is healthy and natural to express yourself sexually, if that is your choice, whether you be heterosexual, homosexual or bisexual. Even when contraception is no longer a concern (one year after the last menstrual period, or two years if menopause was early), where there is sexual contact there is the risk of Sexually Transmissible Infections (STIs). After all, bacteria and viruses do not know how old we are or that we are in a new relationship!

Safer sex means using condoms, with lube, and talking openly with partners. If you have unprotected sex (penetrative

sex without a condom) with a new partner see your local sexual health service for a free check up.

Information, condoms, STI tests and treatments are all available at Family Planning or from your GP.

Sexuality in a residential setting

You have the right to maintain an interest in sexual expression with a consenting partner in a residential care setting. Ask to see policies relating to sexual health, relationships and privacy. You may need to ask for a 'do not disturb' sign for your door. You may wish to inform your family members of your choices to prevent any misunderstandings.

Family Planning staff are available to run workshops with residential care home staff and management on developing supportive environments.

Further information:

www.everybody.co.nz (seniors' health)
www.embarrassingproblems.co.uk (Sex & genital)
familyplanning.org.nz

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