

Freedom of Sexual Expression

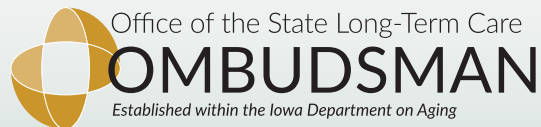
The Office of the State Long-Term Care Ombudsman (OSLTCO) plays an integral role in advocating for the rights of over 53,000 long-term care residents and assisted living program tenants. The right to freedom of sexual expression among these populations has proven a sensitive and sometimes controversial topic, particularly when cognitive capacity is in question.

By federal law, individuals residing in long-term care are afforded multiple rights, many of which are relevant to sexuality. These rights include but are not limited to: the rights to privacy, confidentiality, dignity and respect; the right to make independent choices; and the right to choose visitors and meet in a private location. The OSLTCO strives to preserve these rights by promoting attitudes of awareness, acceptance, and respect of sexual diversity.

Through guidance and sexuality education to residents, family members, administrators, directors and staff, the OSLTCO supports residents and tenants in developing maximum self-reliance and independence regarding their sexual choices without restricting or regulating their behaviors.

**Your State and Local Long-Term Care
Ombudsmen can be reached at:**

866.236.1430

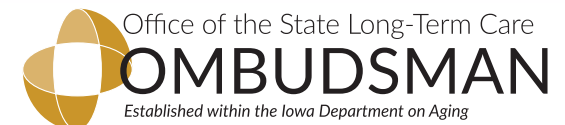


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SEXUALITY & AGING: Debunking the Myths





Aging and Sexuality

As the American population continues to grow older, aging and sexuality has become a frequent topic of discussion. Specifically, questions have been raised about if and how older adults experience sexual desire; how dementia and other age-related health issues impact an individual's ability to express desire for and consent to sexual acts; and whether older adults forfeit their right to intimacy once they move into a long-term care facility.

Because sexuality is a basic human need and the choice to participate in sexual acts is one that belongs to the individual, the Office of the State Long-Term Care Ombudsman (OSLTCO) is working to help debunk some of the myths that surround sexuality and aging. While every individual's situation and capacity to consent varies, the following facts may help guide meaningful dialogue about older adults and sexuality.

Facts vs. Myths

MYTH: Sex is for the young and attractive.

FACT: Sex does not belong solely to the youthful and beautiful. People don't "age out" of being sexual. It is inherent throughout the aging process and even associated with good health! Sexual expression fulfills a natural desire and can connect people, provide opportunities for affection and passion and build or enhance relationships.

MYTH: Older adults are unable to have sex because their bodies are too old or sick.

FACT: Some changes within the aging body can alter or complicate sexual expression, but while a decline in sexual functioning may occur, desire and interest remain. The use of medications to treat sexual dysfunction in both men and women has made it possible for people to remain sexually active late into life. One study revealed 61 percent of people over

60 said their sex life was the same or better as when they were in their 40s, and 26 percent of those over 75 remain sexually active.

MYTH: Residents of nursing facilities can't have sex.

FACT: Relocation to a nursing facility doesn't result in the end of a sex life. Residents are guaranteed certain rights under the federal 1987 Nursing Home Reform Law, including the rights to privacy, confidentiality, respect and expression. Facilities must promote these rights in a manner that enhances residents' quality of life and ensures dignity, choice and self-determination, while affording them privacy and opportunity to engage in safe and consensual sexual expression.

MYTH: Nursing facility residents with dementia or Alzheimer's shouldn't have sex.

FACT: Residents with cognitive impairments, such as dementia and Alzheimer's, have the same rights as other nursing facility residents. When a cognitively impaired resident indicates the desire to be sexually expressive, it becomes necessary for the resident's interdisciplinary care team to assess the level of capacity to determine the benefits or potential harm associated with the expression. Each sexually related occurrence is unique and should be looked at individually.

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