The Graying of the Sexual Revolution

By Randall R. Fearnow*

Presented by: Randall R. Fearnow, Partner
Quarles & Brady LLP

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* With special thanks to Laura Backstrom, Ph.D.
Randall R. Fearnow  
Quarles & Brady LLP  
135 N. Pennsylvania Street  
Indianapolis, IN 46204  
randall.fearnow@quarles.com  
317-399-2818

Laura Backstrom, Ph.D.  
Visiting Assistant Professor, Macalester College,  
St. Paul, Minnesota
Outline of Presentation

I. Sexuality in Later Life
II. The Problem of Consent in Long Term Care
III. Legal and Cultural Implications for Long Term Care
Sexual Expression in Later Life: A Review and Synthesis

- Men and women remain sexually active into their 70’s and 80’s.

- Aging-related physical changes do not necessarily lead to decline in sexual functioning.

- Good physical and mental health, positive attitudes toward sex in later life, and access to a healthy partner are associated with continued sexual activity. *

* DeLamater (2012), p. 125
Neglect of the 70+ demographic has contributed to stereotyping and paternalistic models in long term care.

- By 2050 20% of all Americans 88.5 million, will be 65 or older, which is more than double the 37.8 million 65+ in 2009.*

*Delamater, 126
## Sex in Later Life

<table>
<thead>
<tr>
<th></th>
<th>45-59</th>
<th>60-74</th>
<th>75 and over</th>
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<tbody>
<tr>
<td><strong>Women</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have a sexual partner</td>
<td>78%</td>
<td>53%</td>
<td>22%</td>
</tr>
<tr>
<td>Have sexual intercourse</td>
<td>50</td>
<td>24</td>
<td>6</td>
</tr>
<tr>
<td>at least once a week</td>
<td></td>
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<tr>
<td>Always experience an</td>
<td>32</td>
<td>26</td>
<td>25</td>
</tr>
<tr>
<td>orgasm from sex activity</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Men</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Have a sexual partner</td>
<td>84%</td>
<td>79%</td>
<td>58%</td>
</tr>
<tr>
<td>Have sexual intercourse</td>
<td>55</td>
<td>31</td>
<td>19</td>
</tr>
<tr>
<td>at least once a week</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Always experience an</td>
<td>77</td>
<td>57</td>
<td>48</td>
</tr>
<tr>
<td>orgasm from sex activity</td>
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</tbody>
</table>

* Laura Backstrom, Ph.D.*
- Minority research almost non-existent.
- Although LGBT couples have made great leaps forward in civil rights, social scientists know little about patterns of sexual expression later in life.
- LGBT focused LTC is rare but some communities have sprung up.
- Acceptance and integration into the broader community will be the next development.
Sexual Behavior

- Sexual function – Sexual Expression
- Gradual declines and then no partner
- Society undermines sexual desire among the elderly
Selling Viagra

- Drug companies spent $350 million in one 10 month period during 2004 on ED drug ads
- From Bob Dole to twin bath tabs
- Levitra predicted $1.3 billion in 2001 but by 2004 its sales were under $2 million for the first nine months
- Pfizer required to add vision loss warning*

*Selling Viagra, Janice M. Irvine; Sage Publication, Inc. on behalf of American Psychological Association, Vol. 5, No. 2 (Spring 2006), pp. 39-44
- No effect on about 1/3 of men
- Nearly one-third abandon the drug with about a quarter of those citing lack of interest by partner
- Many women think Viagra introduces coercion and conflict into a relationship
- “[O]ur enhancement culture depends on the noxious brew of dissatisfaction and failure that advertising promises to solve but instead perpetuates.”
Sexual Expression Cohort Differences

- 1945 – 1955 cohort first to be affected by the sexual revolution in the late 1960’s.
- Earlier generation defined by the Depression and more traditional notions of sexual expression.
- Partners

* Delamater, p. 137
II. The Problem of Consent in Long Term Care
Sex, Dementia and a Husband on Trial at 78 (New York Times, April 13, 2015)
Former Iowa Legislator Henry Rayhons, 78, found not guilty of sexually abusing wife with Alzheimer’s (The Washington Post, April 23, 2015)

- “There’s nothing about being cognitively impaired that means that you wouldn’t necessarily appreciate being connected with other people through both nonsexual means and sexual means.”
“[Most nursing facilities] have just sort of turned a blind eye until there is some kind of a crisis, and then they scurry around figuring out what to do, hoping it all goes away. Except in this case it didn’t go away – it blew up.”*

*Licensed clinical social worker Daniel Kahn.*
III. Legal and Cultural Implications for Long Term Care
Dementia, sexuality and consent in residential aged care facilities

*Laura Tarzia, Deirdre Fetherstonhaugh, Michael Bauer,” Australian Centre for Evidence – Based Aged Care (June 25, 2012); JME Online First, 10.1136/medethics – 2011 - 100453
“For most people living in Western societies, the right to be able to make decisions about one’s life is taken for granted. These decisions include whether or not to engage in sexual behavior whenever and with whomever one chooses, providing of course it is mutually consensual and within the boundaries of the law.”*

* Tarzia, Laura
“In theory, RACF’s are bound to uphold residents’ rights to privacy and autonomy; however, in practice, this commitment is abandoned as soon as risk is perceived or if there is opposition from family members.”*

*Tarzia, Laura*
“‘How can we make sex safe and possible for this resident?’ Rather than seeking to control and limit sexual behavior, or becoming bogged down in complex ethical dilemmas surrounding the definition of capacity.”*

- One justification: the problem of mistaken identity.

*Tarzia, Laura
Why Nursing Homes Need to Have Sex Policies

“We’ll ask them about their religion, the music they like, what kind of food they want to eat. We don’t dream of asking them about their preferences about sexuality and intimacy.”*

* Leading Age Indiana, May 28, 2015, quoting Dr. Cheryl Phillips
The Problem of “abuse” Reporting

“All known incidents of resident sexual activity in a non-married or non-committed relationship are to be reported to management to evaluate sexual abuse.”
The Problem of So Called “Religious Freedom”

The right of LGBT couples to marry in any state was confirmed by the U.S. Supreme Court just this summer, but LGBT adults residing in nursing homes have had protections in place since the FNHRA of 1987.

- expression will become more common place
Management of Sexual Expression in Long Term Care

“It has been easier to believe that older adults are asexual than to handle the complexity of the issues.”

- Privacy v. Values

* Laci J. Cornelison, MS, LSW; Gayle M. Doll, PhD, Gerontologist. 2013; 53 (5): 780-789
Whose Privacy?
Whose Values?