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Sexuality Assessment for Older Adults

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WHY: Although it is commonly believed that sexual desires diminish with age, several researchers have identified that sexual patterns persist throughout the life span. The landmark study by Masters and Johnson (1986) indicates that older adults continue to enjoy sexual relationships throughout each decade of their lives. More recently, Lindau et al (2007) revealed that in a study of 3005 U.S. older adults, current sexual activity was reported in 73% of adults aged 57 to 64, 53% of adults aged 65 to 74 and 26% of adults aged 75 to 84. The expression of sexuality among older adults results in a higher quality of life achieved by fulfilling a natural desire. Although the need to express sexuality continues among older adults, they are more susceptible to many disabling medical conditions such as cardiac problems and arthritis, as well as normal aging changes that may make the expression of sexuality difficult. In addition, the treatments used for medical conditions may also hinder the older adult's sexual response. Nurses are in an ideal position to assess these normal aging changes, as well as disabling medical conditions and medications, and to intervene at an early point to prevent or to correct sexual problems.

BEST TOOL: The *PLISSIT* model has been used to assess and manage the sexuality of adults (Annon, 1976). The model includes several suggestions for initiating and maintaining the discussion of sexuality with older adults. Suggested questions to guide the discussion of sexuality are also provided.

TARGET POPULATION: The *PLISSIT* model and the questions suggested on the reverse page may be used with older adults in a variety of clinical settings. The goal of the assessment is to gather information that allows the client to express his or her sexuality safely and to feel uninhibited by normal or pathologic problems. It is common for healthcare professionals to feel uncomfortable with assessing the sexual desires and functions of all clients. Regardless, a sexual assessment should be performed as a routine part of the nursing assessment. Knowledge, skill, and a sense of one's own feelings and sexuality will provide the comfort necessary for the nurse to assess the sexuality of older adults.

VALIDITY AND RELIABILITY: Despite the findings that sexuality continues throughout all phases of life, little material, scientific or otherwise, exists in the literature to guide nurses toward assessing the sexuality of older adults. Consequently, validity and reliability to support the *PLISSIT* model or the suggested questions are not available. Further research in the area of sexuality among older adults is imperative.

STRENGTHS AND LIMITATIONS: The *PLISSIT* model and suggested discussion questions are not diagnostic in any manner but rather provide guidance for further work-up or referral. As sexuality is discussed, the model and questions provided help initiate and maintain discussions of sexuality.

MORE ON THE TOPIC:

Best practice information on care of older adults: www.ConsultGerRN.org.

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PLISSIT MODEL

P	Obtaining P ermission from the client to initiate sexual discussion
LI	Providing the L imited I nformation needed to function sexually
SS	Giving S pecific S uggestions for the individual to proceed with sexual relations
IT	Providing I ntensive T herapy surrounding the issues of sexuality for that client

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QUESTIONS TO GUIDE SEXUALITY ASSESSMENT AMONG OLDER ADULTS

- Can you tell me how you express your sexuality?
- What concerns or questions do you have about fulfilling your continuing sexual needs?
- In what ways has your sexual relationship with your partner changed as you have aged?
- What interventions or information can I provide to help you to fulfill your sexuality?

Adapted from Wallace, M. (2000). Intimacy and sexuality. In A. Lueckenotte (Ed.). *Gerontological nursing* (Revised ed.). St. Louis: Mosby Year Book, Inc.