

SEX AGE & ME

Sex, Age & Me

A National Study of Sex, Sexual Health, and Relationships among Older Australians

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- Rates of sexually transmitted infections (STIs) are rising among those aged 60+
- Sex, Age & Me was the first Australian study of its kind to comprehensively explore the sexual health of older Australians (aged 60+)
- Findings from Sex, Age & Me show that many older Australians are sexually active. Some are also dating and forming new relationships in later life
- Findings suggest that a greater focus on the sexual health needs of older Australians is needed. This includes the need for education and support for those at greater risk of STIs, as well as inclusion of older people in sexual health policies and better training for health and aged care providers

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A FOCUS ON OLDER AUSTRALIANS

Older Australians comprise a diverse population, including different sexual orientations and ethnic backgrounds. They are also living longer and healthier lives (1). Despite common stereotypes of the 'asexual' older person, international studies have consistently shown many, but not all, people continue to have sex well into older age (2-5). The current older generation are also more likely than previous generations to form new sexual relationships in later life, following the end of long-term monogamous relationships (6), and many are using online dating sites to meet new partners (7, 8). In this context, there has been a sharp increase in the rates of sexually transmitted infections (STIs) in those aged 60+. Although this population still only accounts for a small proportion of all STIs, rates rose by ~46% between 2009 and 2013 (9). Despite this, sexual health policy and research relating to older Australians is currently lacking (10).

NATIONAL SURVEY AND INTERVIEWS

In 2015, we conducted a study of the sexual health and relationships of Australians aged 60+. This study was the most comprehensive of its kind in Australia, involving both a national survey and in-depth one-on-one interviews. Participants were recruited from across Australia with all residents aged 60 years and older eligible to participate. Study advertisements were promoted using a variety of sources including Facebook, radio, and news articles in mainstream publications and those targeting older Australians.

Key objectives were to explore:

- Sexual behaviours, relationships and dating patterns
- Knowledge of STIs and STI prevention
- Use of safer-sex practices
- Gaps in knowledge and safer-sex practices
- Sexual health help-seeking behaviours and experiences talking about sex with healthcare professionals
- Ways of giving meaning to and understanding sex and safer sex in later life

In total, 2,137 participants completed the survey and 53 men and women participated in the in-depth interviews. For further information about the study methods and data collection, see:

Lyons A, Heywood W, Fileborn B, Minichiello V, Barrett C, Brown G, Hinchliff S, Malta S, Crameri P. [The Sex, Age, and Me Study: Recruitment and sampling for a large mixed-methods study of sexual health and relationships in an older Australian population](#). Culture, Health & Sexuality. Advance online publication.

Sex, Age & Me Sample Profile

CHARACTERISTIC	SURVEY (n=2,137)	INTERVIEWS (n=53)
Gender		
Male	1,439	30
Female	680	23
Other	8	-
Age (years)		
60-69	1,602	39
70-79	458	13
80+	76	1
Sexual orientation		
Heterosexual	1,934	47
Gay/Lesbian	86	2
Bisexual	83	4
Other	22	-
Country of birth		
Australia	1,397	-
Other	689	-
Marital Status		
Married	1,066	18
De Facto/Cohabiting	215	13
Not married/other	833	22

KEY FINDINGS

Sexual behaviours, relationships and dating patterns

Seventy-two per cent of survey participants reported having sex in the previous year (76% of men and 61% of women). A slightly higher proportion (88% of men and 72% of women) reported that they hoped or planned to have sex in the future, and a further 8% of men and 19% of women were unsure.

Those who had sex in the previous year had engaged in a variety of sexual practices including vaginal or anal intercourse (91%), giving (66%) and/or receiving (63%) oral sex and mutual masturbation (50%). Just over half of sexually active survey participants had sex one to five times in the previous four weeks.

In-depth analyses of the study's findings have been published in a series of peer-reviewed journal articles. Key findings and links to articles are presented below. Additional articles will be available in the future.

Knowledge of STIs and safer-sex practices

From the survey

- Older Australians had good general knowledge of the causes and symptoms of STIs but poorer knowledge in areas such as the protection offered by condoms and the potential transmission modes for specific STIs
- Overall, women had better knowledge than men
- Knowledge was better among men in their 60s and those who felt at risk of an STI. Knowledge was also better among men and women who had undergone STI testing
- After taking other factors into account, there were no differences in overall knowledge of STIs between heterosexual and non-heterosexual (gay/lesbian/bisexual/other) men and women or according to country of birth

For further data on this topic, see:

Lyons A, Heywood W, Fileborn B, Minichiello V, Barrett C, Brown G, Hinchliff S, Malta S, Crameri P. 2017. [Sexually active older people's knowledge of sexually transmitted infections and safer sexual practices](#). Australian and New Zealand Journal of Public Health. Advance online publication.

STI testing

From the survey

- Less than one in three (30%) participants who may be at risk of a current or future STI reported STI testing in the previous five years
- Non-heterosexual men were more likely to get tested than heterosexual men. Testing rates were no different according to country of birth
- Of those who were diagnosed with an STI, the majority received treatment from a GP
- Men were more likely to have been tested than women
- Higher rates of testing were found among those who had two or more sexual partners in the past 12 months. Lower rates of testing were reported by women who did not use a condom for intercourse at their most recent sexual encounter

For further data on this topic, see:

Heywood W, Lyons A, Fileborn B, Minichiello V, Barrett C, Brown G, Hinchliff S, Malta S, Crameri P. 2016. [Self-reported testing and treatment histories among older Australian men and women who may be at risk of a sexually transmitted infection](#). Sexual Health. Advance online publication.

Use of safer-sex practices

From the interviews

- Older Australians commonly defined safer sex as using condoms. Fewer defined it more generally as preventing STI transmission, discussing STI history, STI testing, monogamy, avoiding certain sexual practices, or self-care
- The importance of safer-sex was closely connected with relationship context and trust, perceived risk levels and concern for personal and public health
- Barriers to the use of safer-sex practices included embarrassment, erectile difficulties, lack of a safer-sex culture, stigma, and reduced pleasure

For further data on this topic, see:

Fileborn B, Brown G, Lyons A, Hinchliff S, Heywood W, Minichiello V, Malta S, Barrett C, Crameri P. 2017. [Safer sex in later life: Qualitative interviews with older Australians on their understanding and practices of safer sex](#). Journal of Sex Research. Advance online publication.

Learning about sex in later life

From the interviews

- Many older Australians had limited experiences with sexuality education when growing up
- Older Australian's key sources of learning about sex in later life were predominately the Internet and healthcare providers. To a lesser extent, older Australians reported they used or would use media outlets, books, workshops and discussion groups to learn about sex
- Many older Australians did not actively seek information on sex in later life

For further data on this topic, see:

Fileborn B, Lyons A, Hinchliff S, Brown G, Heywood W, Minichiello V. 2017. [Learning about sex in later life: sources of education and older Australian adults](#). *Sex Education*, 17(2); 165-179

Importance of sex, meaning of sex and sexual pleasure for older men

From the interviews

- Older heterosexual Australian men defined sex in a variety of ways ranging from physical behaviour (some of the men privileged intercourse while others were more inclusive of a range of behaviours) as well as intimacy and bonding. For some men the meaning of sex changed as they aged
- For older heterosexual men the importance of sex was highly context dependent, ranging from highly important to less essential than it had been in the past
- Understandings of sexual pleasure included orgasm and physical pleasure, mutual pleasure, bonding and intimacy
- For a similar study of older Australian women, see Fileborn B, Thorpe R, Hawkes G, Minichiello V, Pitts M, Dune T. 2015. *Sex, desire and pleasure: Considering the experiences of older Australian women*. *Sexual and Relationship Therapy*, 30(1); 117-130

For further data on this topic, see:

Fileborn B, Hinchliff S, Lyons A, Heywood W, Minichiello V, Brown G, Malta S, Barrett C, Crameri P. 2017. [The importance of sex and the meaning of sex and sexual pleasure for men aged 60 and older who engaged in heterosexual relationships: Findings from a qualitative interview study](#). *Archives of Sexual Behavior*. Advance online publication.

Talking to healthcare providers

From the interviews

- Many older Australians did not talk to their healthcare providers about sex
- Embarrassment or difficulty talking to healthcare providers tended to be influenced by the relationship between the participant and their healthcare provider
- Some older Australians were comfortable talking to healthcare providers about sex. Again, this appeared to be related to the quality of the relationship with the healthcare provider and their approach to sex
- When sex was raised with healthcare providers, older Australians received mixed responses, ranging from positive to dismissive or uncomfortable. Healthcare providers' responses appeared to influence participants' willingness to discuss sex with them in the future

Ageism and sexual activity

From the survey

- Experiences of ageism (age-related prejudice and discrimination) were common among participants.
- Similar levels of ageism were reported by heterosexual and non-heterosexual participants. There were also no differences in levels of ageism according to country of birth
- However, participants without a partner, who were unemployed, with lower incomes and those with poorer self-rated health reported more experiences of ageism
- Experiences of ageism for both heterosexual and non-heterosexual groups were associated with participant's sexual activity and interest in sex in a variety of ways
- Experiences of ageism were associated with reduced sexual interest and activity in some participants
- For other participants, more experiences of ageism were reported by those whose interest in sex had increased since the age of 60 and those who wanted sex more often in the future



Improving the sex lives of older Australians

From the interviews

- When asked how their sexual lives could be supported or improved, many older Australians discussed the need to normalise the diversity of sexual expression and desire in later life
- Older Australians felt that aged care facilities did not support consensual sexual expression. This caused concern and anxiety for many. Participants expressed a strong desire for aged care facilities to develop policy and practices that were accommodating and accepting of consensual sexual expression among residents
- Others discussed the need to increase and improve the quality of cultural representations of older adults
- Education and public health campaigns were suggested as a way to raise awareness about sex, sexuality, and sexual health in later life. This included efforts targeted towards the general public, health care providers and aged care service providers, as well as towards older people themselves

SOME RECOMMENDATIONS FOR IMPROVING THE SEXUAL LIVES OF OLDER AUSTRALIANS

- Sexual health and STI prevention and treatment policy and practice protocols should be made more inclusive of people aged 60+
- Policies and education campaigns aimed at improving STI and sexual health knowledge levels are needed, particularly among those at greater risk of becoming infected with an STI
- Education and support for older people ought to be available across a range of settings and modes of delivery, including Internet-based resources and in health and aged care settings in order to have wide reach
- Testing rates need to be increased among older Australians who are at risk of being infected with an STI. GPs and other healthcare providers can play a role here by talking to their patients about sex to determine their testing needs
- The older population is heterogeneous, with a diversity of sexual expressions. Some do not wish to have sex, and having sex may not matter to all older people. It is important for health and aged care service providers to provide an environment in which older people feel comfortable talking about sex if they wish to, including the feeling that they are not being judged with regard to whether or not they are sexually active. It is also important that sexual interactions that older people experience are wanted and consensual
- Training and education should be provided to health and aged care providers so they can confidently discuss sex with their older clients, and to deal with diversity and differences in sexuality among this population
- Stigma and embarrassment associated with sex in later life should be challenged and overcome. Public health initiatives could encourage older people to talk to their health and aged care providers about sex. Campaigns are needed to de-stigmatise sex in later life
- Ongoing research, including research involving non-heterosexual groups and different cultural backgrounds, is required to further develop and refine sexual health policy and practice relating to the sexual health of older Australians

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