## Sexuality in our 55 year old and older patient population

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Narrative abstract: My thesis sought to explore finding a way of supporting sexual desire in the fifty-five and older population by offering a different perspective to what might constitute romantic sexual intimacy. when our patients hint that their sexual romantic life is not the greatest, how can we integrate some possible solutions into the conversation and support the whole person which includes their sexual health?

Pleasure is how we make connections with ourselves and with the other. The implications of renewed connections may reach beyond the bedroom and become part of fostering wellbeing for a population who even pre-pandemic suffered from an epidemic of loneliness.

Indexing terms: Sexuality; Chiropractic; holism

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## **Narrative**

**I** would like to share my insights from my doctoral dissertation 'Sexual Desire and Good Enough Sex in the Fifty-Five and Over Population'. On extensive review I found a paucity of information on sexual health for this population subgroup. Therefore, I thought it would be very interesting to see the results if this population was encouraged to have healthy sexual desire. It is clear that as we transition through the aging process that our bodies change and with that change our understanding of sexuality also needs to modify.



For heterosexual men and women, as they enter into their later decades of their life, it is often crucial to expand the concept of sexuality and sensuality beyond a penis and vagina. Sometimes men might need to look beyond the penis since their function might not be the same as when they were in their twenties and women might not have the same comfort levels with their vaginal functioning.

Thus my thesis sought to explore finding a way of supporting sexual desire in the fifty-five and older population by offering a different perspective to what might constitute romantic sexual intimacy. Therefore, when our patients hint that their sexual romantic life is not the greatest, how can we integrate some possible solutions into the conversation and support the whole person which includes their sexual health?

My study was a sample size of 200 male and female heterosexual adults addressing desire in this population. My intervention was a video explaining a basic psychological principle called

'*Good Enough Sex*'. After surveying these individuals, I found the '*Good Enough Sex*' (1, 2, 3) or as I call it the '*Seduction of the Slow Dance*' intervention had an overall positive impact on desire levels among all study participants, particularly for those 55 to 65. Solitary (self-stimulation) desire levels increased significantly for participants overall, those 55 to 65, those over 65, and men overall.

Based on these findings, I suggested that practitioners should infuse knowledge of 'Seduction of the Slow Dance' into their clinical practice, informing older patients about the potential benefits of embracing their transition into a different way of interpreting sexuality and sensuality. My study found that there is a need to educate men about specific aspects of 'Seduction of the Slow Dance' aimed at meeting the needs of their female partners as well as educating women about how to meet the needs of their male partners. Furthermore, I posit that, as a psychotherapist specialising in sexology, we need to help normalise the sexual conversation for men and women in the older population.

When we apply the concept of transitioning to 'Seduction of the Slow Dance' this takes the anxiety out of performance and focuses on sharing mutual pleasure. Pleasure requires mistakes. Pleasure requires understanding as we age that our sexual experience likewise needs to mature. Pleasure is how we make connections with ourselves and with the other. Sexuality with one's self or within a couple is about making connections with our whole body and spirit. It is about keeping the sexual organs of the body vital and stimulated. Science tells us that with masturbation or sexual play individual anxiety is reduced and healthy hormones are produced. (4, 5) Therefore, an age congruent sexuality can lead to a healthier mind and body and, ultimately, the quality of life is improved.

The implications of renewed connections may reach beyond the bedroom and become part of fostering well-being for a population who even pre-pandemic suffered from an epidemic of loneliness. While more research is needed, it is not too much to claim that '*Seduction of the Slow Dance*' can and should be shared with people in the aging population in order to help foster their sexual and even overall wellbeing.

To learn about the '*Seduction of the Slow Dance*' instructional video that was used in my study please go to the following link. You may find this video of value personally or when indicated by sharing it with your fifty-five and older patient population.

To view the video go to: mirellpsychotherapy.com/videos or click on the next page.



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