

Common issues with physical disabilities and sexuality

The term "disability" refers to any condition that impedes the completion of daily tasks using traditional methods. Physical disabilities are mostly associated with physiological disorders, disfigurement or anatomical loss. Some of the affected body function categories include: neurological, cardiovascular, respiratory, reproductive, digestive and urinary systems. There are many types of disability and levels of ability. With any type of disability, sexual relationships and pleasure are possible. However, the disability needs to be taken into consideration when two people consider how to be sexually active and the mechanics of it all. Certain positions might not be possible, so creativity and flexibility are essential. Open communication is key in any relationship involving a physically disabled partner. Some topics include: planning for sexual activity, likes and dislikes, sexual fantasies and ways of enhancing arousal. Anger, fear, frustration and a sense of loss (if there has been a loss of sensation) should also be discussed.

Physical disabilities often result in altered sexual function, which can negatively affect self image and self-esteem. Certain things may come into question, such as mobility, if you use a wheelchair or have a cast, there will be some sexual positions that may not be possible. Lack of muscle strength may limit a person in similar ways.

There are many challenges for people with physical disabilities. Typical arousal methods might not work if a person has a loss of sensation due to spinal cord injury. Muscles spasms can increase pleasure, but they can also decrease pleasure. An inability to sustain an erection can cause obvious problems and frustrations. Urinary or bowel incontinence can also result in unpleasant surprises. Fatigue may as well factor in to one's sex life, as some actions may be too strenuous. A respirator or catheter can inhibit spontaneity. Chronic pain can greatly decrease sexual pleasure. Deformity or amputations might lead to a lack of confidence and initiative in sexual relations.

Common issues with physical disabilities and sexuality - Some suggestions:

Loss of sensation

- Emphasize stimulation of unaffected body parts
- Discover new erogenous zones (areas sensitive to touch) if the genitals have been affected
- Explore the pleasure in watching your partner caress your genitals or performing oral sex

Lack of muscle strength

- If arms or hands are affected, use aids (vibrators) for stimulation. May need assistance
- May need help with masturbation (rocking in a waterbed can help with movement)
- Hand held or remote controlled toys may be useful

Muscle spasms

- Spasms can increase or decrease pleasure. Try to find positions that promote or inhibit spasms accordingly

Inability to achieve or sustain an erection

- Explore alternatives to intercourse
- Penis rings can help an erection by preventing the blood supply from leaving the penis
- Can use toys for various sensations

Urinary/bowel incontinence

- Talk to your partner about the possibility of an accident to avoid surprises and to ease anxiety
- Limit your fluid intake prior to sex and try urinating beforehand
- Keep towels nearby and protect the mattress with an underpad if possible

Catheter use

- Ask your healthcare provider if you can remove the catheter during sexual activities, make sure your bladder is empty first

Fatigue/endurance

- Find positions that require less physical exertion and take a less active role in sex
- Use sex aids or toys
- Activities other than intercourse can be less strenuous

Shortness of breath

- Use a well-ventilated or air-conditioned room
- Ask a doctor about using bronchial spray prior to sex
- Find positions that don't put pressure on the chest or diaphragm and don't require high energy

Pain in joints

- Find positions that don't put pressure on the joints. There are pillows designed to give you more comfort during sex. Incorporate heat treatment into love making

Pain in back/neck

- Keep the back & neck aligned as much as possible
- Keep back supported with a firm mattress
- Find a way to support your neck during oral sex

Medications

- Some medications may cause fatigue, lower sex drive or inhibit sexual pleasure. Talk to your doctor about the side effects of your medication.
- Try different times of the day to see when you have the most energy.

Premature ejaculation

- Talk to your partner about the condition to avoid surprises or misunderstandings
- There are alternatives to some medications that may cause less disruptions. Talk to your doctor.
- Discuss this issue with a sex therapist if the condition persists and disrupts your sex life.

Deformity

- A healthy body image is important
- Find different positions that are comfortable
- Talk about your feelings, concerns, and expectations with your partner

Lack of vaginal lubrication

- Use lubricants
- Go slow, prolong foreplay to allow lubrication to develop
- Incorporate relaxation techniques such as massage and heat therapy

Blindness or Visual impairment

- Emphasize body exploration through touch, smell, sound and imagination

Paraplegic or Quadriplegic

- Sexual function may be impaired but sometimes sensitivity in some areas can be increased
- The usual sensation of orgasm can be lost, but an orgasm sensation elsewhere in the body may be experienced

Wheelchair or Casts

- Experiment with positions that allow for the most comfort
- The use of pillows can help with different positions

Spinal cord injury

- For a man, spinal cord injuries can affect orgasm, erections, and ejaculation
- Desire, pleasure and sensations to erogenous zones can usually still be experienced
- Even if they have lost all genital sensation, they may still be capable of orgasms through stimulation of other body parts
- A penis ring can help a weak erection
- When an erection is not possible, check with your out patients for the best options for you.
- Placing a powerful vibrator on the glans of the penis, or on the testicles, can sometimes help with ejaculation

Guidelines for Teaching Sexual Health

There are many things to consider when delivering sex education to students with physical disabilities:

1. Lack of privacy & independence in daily living (ex: constant personal aid, may need help with intimate care like bathing)
2. They may have missed out on formal & informal sex ed (schools don't typically adapt programs to their needs and friends and family may not include them in discussions)
3. Lack of social opportunities and obstacles to forming friendships (ex: don't have many opportunities to meet people and special schools can be far from home limiting the access to leisure events)
4. Disabled youth may be at greater risk of exploitations & abuse due to their vulnerability
5. Make sure that there is access to the facility where the education takes place (ie: ramps and elevators for mobility impaired people)
6. Make sure there are resources available to aid the visually impaired students (brail markings and resource people around facility for assistance)
7. Make sure there are resources to aid the hard of hearing students (available staff to communicate)
8. Have referrals on hand (other useful resources: associations, internet sites, peer groups, etc.)

Questions for a teacher preparing a sexuality education lesson:

1. Do I have a disabled student in my class?
2. What is the nature of their disability and what issues may arise for them from the content?
3. Has the pupil had the chance to speak to a staff member about concerns before the lesson?
4. Would the student find it helpful for me to talk to their parents to follow up on issues that arose for them?
5. How will I deal with any questions they may have?
6. Do I know anyone I can refer them to, if I can't answer their question(s)?

Are there any support groups for their condition that I may refer them to? Resources for teaching sexual health to students with physical disabilities

Books

Annette Owens & Mitchell Tepper (2005), *Chronic Illnesses and Disabilities Affecting Women's Sexuality*

Eduardo Chapunoff (2005), *Answering Your Questions about Heart Disease and Sex*

Ralph Alterowitz (2004), *Intimacy with Impotence: The Couple's Guide to Better Sex After Prostate Disease*

Greg McGreer (2004), *Possible Effects Of Multiple Sclerosis on A Person's Sexuality*

Annette Owens (2004), *Cardiovascular Disease: Sexual Problems and Their Management*

Cory Silverberg (2003), *The Ultimate Guide to Sex and Disability*

Maddie Blackburn (2002), *Sexuality & Disability*

Mitchell Tepper (2002), *What does your partner find sexy about your disability?*

Miriam Kaufman (2002), *Easy For You to Say: Q&A For Teens Living With Chronic Illness Or Disability*

Andrew Stanway (2001), *Sexuality and Cancer*

Ken Kroll (2001), *Enabling Romance: A Guide to Love, Sex and Relationships for People with Disabilities*

Tanya Radford (2000), *MS and Intimacy: Managing Specific Issues*

Robert Kramer (1999), *Putting Impotence to Bed: What Every Woman & Man Needs to Know*

American Cancer Society (1999), *Sexuality & Cancer*

Cecily Shapland (1999), *Sexuality Issues for Youth With Disabilities and Chronic Health Conditions*

Marlene Lutkenhoff (1997), *Spinabilities: A Young Person's Guide to Spina Bifida*

Mitchell Tepper (1997), Providing Comprehensive Sexual Health Care in Spinal Cord Injury Rehabilitation

Marca Sipski (1997), Sexual Function in People With Disability and Chronic Illness

Lauren Hebert (1997), Sex and Back Pain: Advice on Restoring Comfortable Sex Lost To Back Pain

Stanley DuCharme (1996), Sexuality After Spinal Cord Injury

Lucille Carlton (1996), In Sickness and in Health

Rick Enright (1995), Caution: Do Not Open Until Puberty! An Introduction to Sexuality for Young Adults with Disabilities

Sylvia Eichner (1993), Sexuality and Spinal Cord Injury

Robert Rothrock (1992), The Illustrated Guide to Better Sex for People with

Eduardo Chapunoff (1991), Sex and the Cardiac Patient

Carol Sandowski (1990), Sexual Concerns When Illness or Disability Strikes

Susanne Cambre (1990), The Sensuous Heart: Guidelines for Sex After a Heart Attack or Heart Surgery

Thomas Mooney, Sexual Options for Paraplegics and Quadriplegics

Info tailored from <http://sexualityandu.ca>