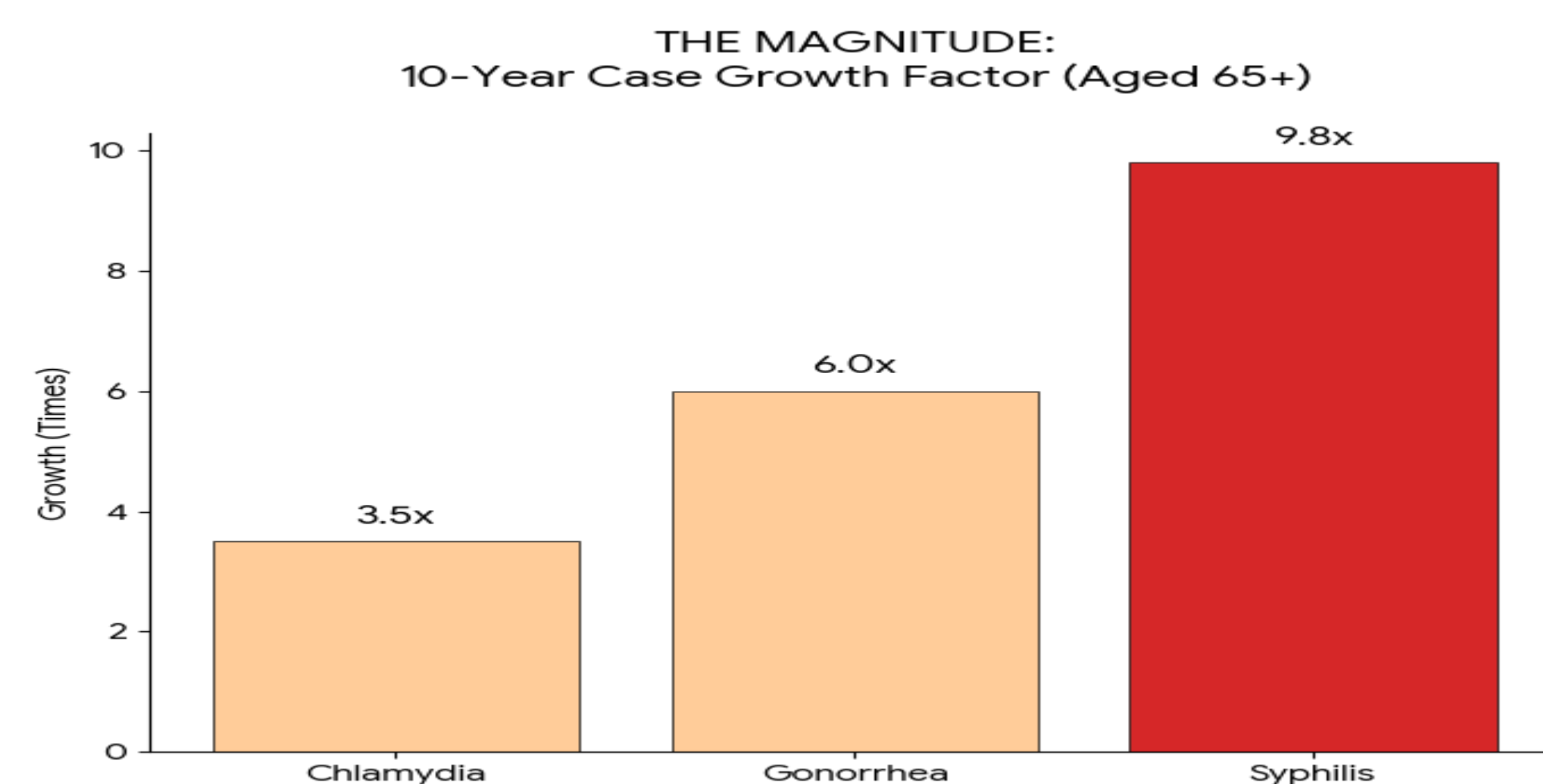
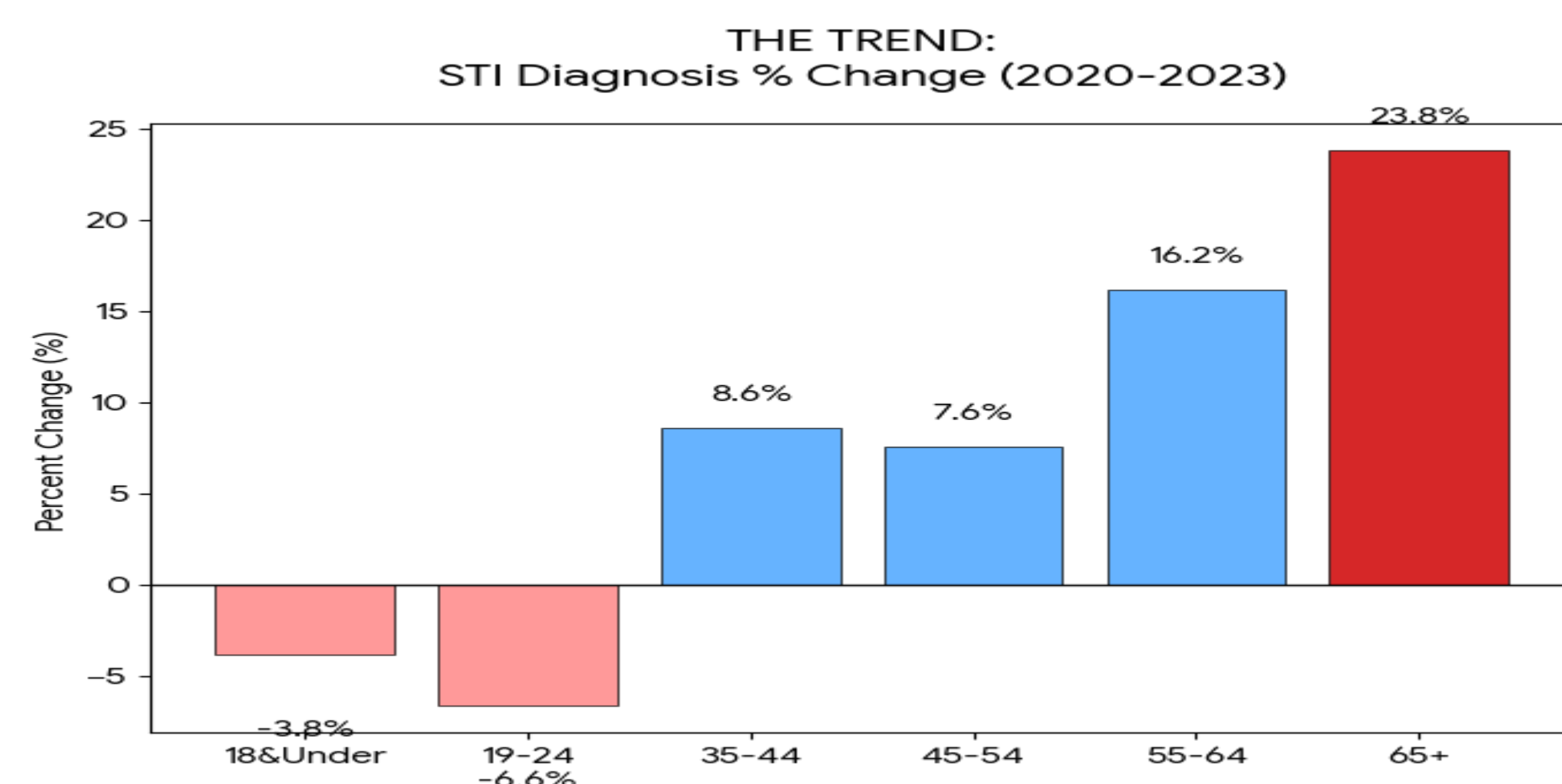


Older Adults' Sexual Health Experiences and Barriers: A Review of Ageism in Healthcare Settings

Shuo Cao, MSN, RN, PhD Candidate, University of Cincinnati
Supervised by Kimberly Johnson, PhD



Background



- Ageism contributes to the limited focus on older adults' sexual health (Syme et al., 2019)
- Ageist assumptions:
 - Older adults are asexual or not interested in sex (Goldsen, 2022).
- These assumptions shape clinical decision making (Meydan., 2022).

Objective: Review how ageism influences older adults' sexual health experiences, barriers to care, and clinical decisions.

Clinical Takeaways:

Ask all adult patients about sexual health, regardless of age.

Treat sexual concerns in older adults as clinically important, not “just aging.”

Train providers on aging and sexuality to support inclusive, age-affirming care.



Methods

- Systematic search of PubMed, Scopus, Web of Science, EBSCOhost.
- Keywords: ageism, sexual health, older adults.
- Included empirical studies in healthcare/care settings (n=6).
- Data extracted into spreadsheets; themes identified using constant comparison.

Key Findings & Interpretation

- **Neglect:** Health providers rarely ask older adults about sexual activity or concerns
- **Internalized ageism:** Older adults feel “too old” to discuss sex and avoid help-seeking regarding sexual health concerns.
- **Age-based treatment:** Older adults get more biomedical labels/meds; younger adults get more psychosocial care/referrals.
- Older adults remain sexually active, but their sexual health is often overlooked in healthcare.
- Ageist sexual beliefs silence both providers and patients and lead to more medicalized, less psychosocial care for older adults.
- Addressing ageism and routinely asking about sexuality may improve diagnosis, prevention, and overall sexual health in later life.

