

## Sexual bereavement: a forgotten concept

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hile death and dying are certain, they remain taboos in health and community care. However, this month, I take a look at death, dying, sex and intimacy, and how they are connected to the neglected concept of sexual bereavement. Dying and death put an end to most of the things we enjoy in life, including sexual activities and intimacy. According to Radosh and Simkin (2016), there is ample evidence that sexual activity is highly valued among the older population. Older adults need care during their end-of-life phase, so it is important to discuss how sex and intimacy can be facilitated in communities at this critical stage. It can be argued that if a person used to engage in sexual activity and intimacy before their illness, they should continue to do so during the endof-life phase, provided that their symptoms are taken into account. The opposite can also be true. Those who did not engage in or enjoy sexual activity may want to start as a way of saying their goodbyes to each other. The first step should be to ascertain their needs during the regular assessment for progressing symptoms.

Unless the illness presents with painful and unbearable symptoms, sexual activity and/or intimacy should be encouraged among the dying. Research in the US found that 54% of men and 31% of women aged 70 years or over were still sexually active and considered sex as an essential aspect of their lives (Radosh and Simkin, 2016). Both men and women reported sexuality as a central pivot of their relationships. Instead of focusing on age as a factor, DeLamater (2012) concluded that sexual decline in men and women aged 80 years and over can be explained by, or was symptomatic of, deterioration in physical health as opposed to ageing. Adults aged 80 years and over reported that sexual expressions were still an important part of their lives. Therefore, it follows that in their later years, adults who experience the death of a long-term partner may also face the loss of sexual and intimate activities.

## Sexual bereavement

The death of a partner can lead to sexual loss, grief and bereavement. Adults aged over 65 years make up between 34–48% of widowed adults across the globe (Radosh and Simkin, 2016); these individuals may require time and space for sexual bereavement. It is important to allow the sexually bereaved to express their grief (as in other bereavements) without fear of judgement or making others

uncomfortable. While there has been research conducted into how to negotiate grief after death, no research has explored how to manage sexual grief. The reality of 'total grief and bereavement' needs to be addressed. Radosh and Simkin (2016) report that some widowed adults felt completely unsupported and had to turn to blogging to share their stories and grief. Some blogs included the following quotes, cited by Radosh and Simkin (2016):

'I wish there were more open forums to discuss this because I think it's a huge hurdle.'

'Sex is one of the things that I miss the most... but it is not something that you can share with the everyday person.'

'I have not felt at ease to talk about this to any of my family or friends... I think they don't know how to listen to this without it becoming uncomfortable for them.'

It can be argued that not everyone may be able to talk openly about their sexual grief and bereavement, and an openminded audience is needed to facilitate such expressions without judgement or prejudice. Therefore, it is not surprising that after their partner's death, some older adults can fail to express their sexual grief or invest in love again. Others find it hard to trust another person enough to share intimate moments. Society has its own dictates on what is to be expected of a bereaved person, including the length of the grieving period, dealing with emotions, making sense of life without the deceased and so on. Some may even find it inappropriate that I am writing about this—all part of the taboo surrounding death, dying, sex and intimacy.

While talking about sex and intimacy might be embarrassing for some, these pleasures can enhance and enrich older adults' quality of life and make the dying process easier. By extension, the bereaved are left with memories to make their own bereavement bearable. BJCN

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