Physical disability and sexuality

Summary

- Having a physical or intellectual disability doesn’t change your sexuality and your desire to express it.
- Your disability may affect your ability to have a regular sex life – you may have to approach sexual activity differently, and you may have questions and concerns relating to your physical or emotional health.
- You have the right to make your own informed choices about the method of contraception you use, but your disability may narrow the range of contraception options available to you.
- Talk to your doctor or a counsellor about your concerns about your disability and sexuality.

Every person is a sexual being, and has sexual thoughts, attitudes, feelings, desires, and fantasies. Having a physical or intellectual disability doesn’t change your sexuality and your desire to express it – or the emotions that can go with it. In fact, the World Health Organization says sexuality is a basic need and aspect of being human that cannot be separated from other aspects of life.

If your disability impairs your physical ability to engage in a regular sex life, or makes you lack confidence, you may feel worried about having sex. Lots of people – with or without a disability – have anxiety about sex and sexual performance, and these feelings are completely natural.

If you’re a carer of a person with an intellectual disability, you may find Family Planning NSW’s ‘All About Sex’ fact sheet series helpful.

Support and information are available if you feel you need help in developing relationships, exploring and expressing your sexuality, or accessing sexual health information and services. This also applies if your disability comes from a chronic illness.

If you’re over the age of 16, in Victoria you’re legally entitled to privacy and choice about your sexuality and sexual activity.

Concerns you may have about sex

Your disability may affect your ability to have a regular sex life – you may have to approach sexual activity differently, and you may have questions and concerns relating to your physical or emotional health. For example, you may feel:

- concerned about finding a partner
- concerned about whether your partner will find you attractive
- a lack of confidence about your sexual abilities or performance
- concerned about how your body moves or works
- anxiety over your partner’s feelings about you
- concern over pain during sexual activity
- less energy and desire for sex
- concerned about whether you can have children
- worried about what others will think, and about discrimination.

It’s natural to feel frustrated about the effects of your disability on your sex life. It may help to try to accept that you and your partner may have to approach sex differently and find new or different ways to satisfy each other. But if your feelings about your disability and its effects on your sex life feel overwhelming, you may like to talk to your doctor or another healthcare professional.

If talking to your doctor about sex makes you embarrassed or afraid, remember, sex is a completely natural subject and your doctor will be used to being asked questions about it. Read more about how to talk to your...
Your doctor can advise you on your unique situation – like whether you need relationship counselling or a medical aid for sex, or ways to support your body during sex. If your doctor can’t help, they may be able to refer you to a specialist who can answer your questions and allay your fears.

It may also help to learn as much as you can about your disability and about sex. Masturbation or sex aids may be useful for you, for example.

**Social myths and discrimination about disability and sexuality**

Society has many myths, and the ones around disability and sexuality are frustrating, offensive and incorrect. Some of these myths include that a person with a disability doesn’t need sex or can’t have ‘real sex’. Some other misguided notions include that a person with a disability has more important needs than sex, or should not have children.

On top of this, many able-bodied people tend to regard sex for people with a disability as a taboo subject and rarely discuss it openly. Society tends to have an idealised image of ‘sexually attractive’ and anyone – whether with a disability or not – who doesn’t meet the standard can feel diminished or dismissed.

Information about disability and sex tends to focus only on function or fertility, and not on perfectly natural feelings and emotions, like attraction, desire and love. To be seen as a non-sexual being can be devastating.

If myths and misinformation are affecting your life, you may feel tempted to avoid sex or limit your opportunities to have sex (such as avoiding meeting a partner). When a lack of privacy from carers or living arrangements is involved too, you may find sex to be particularly challenging or concerning.

**Disability Online Australia** may be a useful resource for finding opportunities to meet people in Victoria and other states.

**The importance of emotions**

Just as sexuality is an integral part of a human life, so is love. At our very core, every human wants to be loved and accepted.

Whether you have a disability or not, you know how important love is to you. If you’re a carer or friend or partner of a person with a disability, be aware of how important it is to express your love or regard.

If you’re not in a relationship, the most important thing to remember is you are not defined by your disability or your illness. You are a person who desires and loves like anyone else, and you have a right to it.

If you’re in a relationship and dealing with issues around your disability and sexuality, these tips may help:

- **Communicate** – openly discussing your feelings and concerns is the best way to solve problems together. State your needs clearly, not only around intimacy but everyday life too.
- **Read up** – learn all you can about your condition and what it means for your life. Having plenty of knowledge may make you more comfortable talking to your doctor about sex too.
- **Seek help** – if the problems seem bigger than you and your partner, consider counselling. Sometimes it helps to get an outside perspective.
- **Keep an eye on each other** – if your partner is your carer, watch for depression in them. It’s natural to feel sad, but depression is more than sadness and will need to be addressed. And watch general health as well. Carers need support and respite.
- **Acknowledge your new normal** – if you acquired your disability, from an accident or chronic illness, for example – try to accept that your relationship may be forever changed by your disability, and see whether you can come up with a new ‘normal’ for you both.
- **See friends** – staying socially connected may help you to feel more positive about life.
- **Address stress** – money issues, new divisions of labour and family responsibilities can cause a lot of stress. Try to address these issues so they don’t affect your life, including your desire to be physically intimate.
- **Consider kindness** – doing something nice for your partner every day can help to build intimacy and loving feelings.

**Practical matters – enjoyment, contraception and sex education**

betterhealth.vic.gov.au
Enjoyment

It takes energy to participate in and enjoy sex, so your disability may get in the way of your sex life to some extent. Factors that may limit your ability to be sexual include:

- pain – pain, especially chronic pain, can certainly make you feel less like sex, but if you can distract yourself with sexual pleasure, you may find it helps ease the pain
- fatigue – sex can feel like just another burden when you’re fatigued or chronically fatigued. If there are times in your day when your energy levels are better than others, consider engaging in sex then. Or take it slow and easy: sex doesn’t have to be physically active
- mental state – if you’re not feeling positive, or you’re suffering from anxiety or depression, you are unlikely to feel like sex. Talk to your doctor or a counsellor about your feelings, and seek help for your depression
- medication – medication can affect your sexual interest, thoughts and moods. Talk to your doctor about your concerns. Read more about how to talk to your doctor.

Contraception

You have the right to make your own informed choices about the method of contraception you use, but your disability may narrow the range of contraception options available to you.

Discuss your circumstances with your doctor or read more from Family Planning Victoria.

Sex education

A child with a disability needs sex education as much as a child without a disability. In addition to a general sex education approach, sex education for a child with a disability should also cover:

- the fact that people with a disability can have fulfilling sex lives
- sexual issues that may be associated with their disability
- social rules such as public and private behaviours, and personal boundaries.

Sex education for a child with an intellectual disability should be delivered in a way that the child can understand. If you’re a parent of a child with a disability, it may be helpful to have appropriate information about puberty, menstruation (a disability doesn’t affect when a girl starts menstruating) and sexual relationships on hand for your child.

Children and teenagers with an intellectual disability, such as that associated with autism, may need longer to get used to the idea of the changes that come with puberty. You can help them by preparing before puberty starts (from age eight to 13 in girls, and nine to 14 in boys).

Sexual abuse and people with a disability

Rates of abuse, especially sexual abuse, are shockingly high for people with a disability. According to research by Women with Disabilities Australia, 90 per cent of Australian women with an intellectual disability have been sexually abused. And a 2007 study of 850 reported rapes in Victoria found that more than a quarter were perpetrated against a person with a disability.

This sexual and other abuse often goes unreported, and often occurs before the person being abused reaches the age of 18.

If you’re a friend, family member or carer of a person with an intellectual disability, and you are concerned about their wellbeing, call the National Disability Abuse and Neglect Hotline on 1800 880 052. They can help you find the best way to deal with an issue and will usually refer you to an appropriate service.

Other support services in Victoria are listed at the bottom of this page. The Office of the Public Advocate safeguards the rights and interests of people with a disability in Victoria. Its advice service (tel. 1300 309 337) can help with a range of queries about abuse and other legal matters.

Read more on Better Health Channel.

Remember…

betterhealth.vic.gov.au
Having a physical or intellectual disability doesn’t change your sexuality and your desire to express it.

Your disability may affect your ability to have a regular sex life – you may have to approach sexual activity differently, and you may have questions and concerns relating to your physical or emotional health.

You have the right to make your own informed choices about the method of contraception you use, but your disability may narrow the range of contraception options available to you.

Talk to your doctor or a counsellor about your concerns about your disability and sexuality.

Where to get help

- Your doctor
- Disability support networks and groups
- Sexuality Education Counselling and Consultancy Agency for sex education and courses for people with a disability
- Family Planning Victoria Disability Services – counselling service Tel. (03) 9257 0100 or 1800 013 952
- Yooralla Tel. (03) 9666 4500, TTY (03) 9916 5899
- Centre Against Sexual Assault (CASA) crisis line Tel. 1800 806 292
- National Sexual Assault, Domestic and Family Violence Counselling Service (Australia) Tel. 1800 RESPECT (1800 737 732, telephone counselling service operating 24 hours, 7 days)
- Office of the Public Advocate Advice Service Tel. 1300 309 337, TTY 1300 305 612
- Cervical cancer screening, Cancer Council Tel.13 11 20
- Sexuality and Disability (a site for women)

This page has been produced in consultation with and approved by:

Family Planning Victoria

Content on this website is provided for information purposes only. Information about a therapy, service, product or treatment does not in any way endorse or support such therapy, service, product or treatment and is not intended to replace advice from your doctor or other registered health professional. The information and materials contained on this website are not intended to constitute a comprehensive guide concerning all aspects of the therapy, product or treatment described on the website. All users are urged to always seek advice from a registered health care professional for diagnosis and answers to their medical questions and to ascertain whether the particular therapy, service, product or treatment described on the website is suitable in their circumstances. The State of Victoria and the Department of Health & Human Services shall not bear any liability for reliance by any user on the materials contained on this website.

For the latest updates and more information, visit www.betterhealth.vic.gov.au