



AGED CARE AND DISABILITY WORKSHOP

Due to the increasing number of enquiries from carers of people with disabilities and/or aged care clients seeking sexual service providers' details, RhED organised a workshop last September for the industry. The aims of the workshops were:

- To improve sexual service providers' knowledge of working with people who have disabilities
- To provide education and information regarding the different types of disability – intellectual, physical and mental
- To develop interpersonal skills around working with people with disabilities
- To develop a register of sexual service providers who can work with people with disabilities

Although the workshop primarily focused on working with people with disabilities, it addressed the issue of aged care clients. People who are older and less able-bodied are not disabled per se but some of the tips around lifting and bending, physical movement and working with carers gave service providers further information.

Originally the workshop was going to be presented to sexual service providers only. However, after further discussion with sexual service providers and within the RhED team, it was agreed to open the forum to interested parties including carers of people with disabilities.

Issues for sexual service providers and carers included:

- Comfortableness around disability
- Picking up on body language
- Negotiating money – with carer
- Checking with carer the specifics of the disabled person
- Sexual service – intimacy vs penetration
- Deformed genitals
- Sexual positions
- Mental health issues
- Use of open end communication and humour
- Carer gives info on client's needs/wants
- OH&S practices in workplace – client's home, residential unit, brothel room
- Looking after self

The workshop presenters were: Sally Carr (RhED team), Jenny Galea (Centre for Developmental Disability Health Victoria),

Mike Letch (advocate for people with disabilities), Jazzy O (service provider) and Gabby Skelsey (RhED team).

There was some concern expressed from sexual service participants about being identified and they were assured they would not be. Sally Carr who opened the workshop presentation created a warm informal environment whereby all the participants ended up talking about many of their individual and differing work experiences. As Sally commented, "working together sharing experiences and learning from each other is beneficial and has good results for everybody".

Jennifer Galea from the Centre for Developmental Disability Health Victoria, gave an excellent presentation discussing intellectual disability, the myths around intellectual disability and behavioural features of this disability. Acquired brain injury trauma was discussed and some of the difficulties that this can bring about including

- lack of insight – self centeredness
- poor memory and concentration
- slower responses
- inflexibility and impulsiveness
- inappropriate social and/or sexual behaviour
- mental health issues such as depression

Additionally spinal cord injury and the common health problems that may arise from this injury including: urinary tract infections, muscle spasms and pressure sores were discussed.

Jenny provided information on working with carers, lifting and bending techniques and reminded us about remembering that we are all sexual beings with varying sexual needs.

Mike Letch provided the historical context of people with disabilities over the ages. He spoke about the early days when people with disabilities were locked up and kept away from the public eye and the myths around people with disabilities. This sometimes resulted in families being isolated by their local community. Furthermore the various institutions and treatments that were available to people with disabilities was discussed. Mike then spoke about two points of interest in the 1960s and 70s: firstly, in the Vietnam war, the increased use of medical evacuation and secondly in the 1970s, the

introduction of seat belts and helmets on Victorian roads. This meant that many more people now survived, albeit with a disability. He then spoke about the growth of the "disability services" field and the perceived ideas by governments, families and friends, that if people are disabled they do not require sexual services nor do they or should they have intimacy needs met.

Jazzy O spoke of her work and various styles and techniques she uses depending on the client's restrictions, needs and their requests. She also spoke about the importance of smiles and laughter and to have fun. Jazzy told of some examples of clients that she sees and of the fun and intimacy she creates. Jazzy had the audience in delighted smiles at her engaging manner and way with clients.

Gabby Skelsey spoke of the importance of looking after oneself in the workplace – this applied both to service providers and carers. Thinking about why we do this work, acknowledging the skills that we bring and the positives and negatives of the work created some lively discussion.

Both sexual service providers and carers talked together about the positive outcomes for people with disabilities and how best to work together to make that happen. All sexual service providers wanted their names on the in-house register and this means that RhED now has a current resource to be able to pass on to carers of people with disabilities and older people seeking services. The workshop presentation was audio recorded and this is available as a resource from the RhED program.

Sally Carr/Gabby Skelsey

AGED CARE & DISABILITY – MEDIA UPDATE

Following the disability and aged care workshop, the following articles have appeared in the media around aged care and disability services.

The Mercury, Hobart on 28 September, it was reported that intellectually disabled men are being taken on organised trips to Hobart brothels by health workers. Under official guidelines, Department of Health and Human Services workers have official permission to arrange visits to sex workers for their clients.

The Department's Disability Services state manager Michael Plaister said government staff were on hand to support clients when they accessed sex workers' services. Disability Services' personal relationships and sexuality guidelines, developed in 2001 include a section titled "Access to a Sex Worker". It states sex workers "should be seen as one of a number of options to consider when supporting people with disabilities to make decisions about their sexual needs." According to the guidelines, staff members who provide physical assistance to enable people with disabilities to access the services of a sex worker would not, by doing so, breach any law in Tasmania. According to Disability Services guidelines, if a client wants to access a sex worker, measures to ensure adequate funds are

available need to be put into place. "our policy and guidelines ensure clients make informed decisions about their sexuality," Mr Plaister said.

Men in Australia, Telephone Survey (MATEs) has found that more than a third of Australian men aged 70 and over are still having sex, including a few who continue to pay for sex workers. Of the 1393 men aged 70 and over, 37 per cent reported still being sexually active in the previous 12 months, including half a dozen who paid for sex workers. More than a quarter of the men in their 70 and older said they wanted more sex than they were actually getting. Endocrinologist David de Kretser, director of Andrology Australia said continuing sexual activity among seniors needed to be taken into account, particularly as the population aged. "Even things like designing retirement villages and things like that need to take into account that people's sexual activity continues," he said.

Sharon Gray (The Age 15/11/05) writes "there is nothing odd in elderly people wanting sexual intimacy". A lifestyle coordinator who works in nursing homes makes the comment: "Every behaviour merely illustrates an unmet need". An elderly person exhibiting sexual behaviour is simply crying out for touch or maybe just needs to be listened to.

As they age, many people lose interest in sex but not everyone. If male patients are fit enough, some homes send them to brothels. "It happens all the time," said a spokesperson for the Daily Planet. "Several of our girls have nursing backgrounds and often still work in aged care. They make servicing the elderly a speciality but we do need forewarning so we can make sure the right girls are available. The actual sex part of the visit can be pretty quick, but they stay for the full time allotted and get a massage and spa. If people are treated with dignity, they feel dignified."

AND FURTHER AFIELD ...

Disabled Danes are being encouraged to visit sex workers once a month at the taxpayers' expense. Under Danish law, the disabled are guaranteed financial help from the state so that they can lead full lives. They can, for instance, reclaim the cost of converting a car for disabled use. Recently an unnamed disabled Danish man argued successfully in court that his local council should subsidise his visits to sex workers – leaving other councils no choice but to follow suit. The Danish government has now launched an information campaign advising the disabled on their erotic entitlements. "Sexual frustration can be a major problem for the disabled, and in some cases the last solution is to visit a sex worker," said Stig Langvad of the Danish Association for the Disabled. (The Week 8/10/05)

Again, in Holland a special "bounce room" for sexually frustrated pensioners opened in 2005. The "bounce room" offers couples a double bed, a fireplace and a bottle of wine. Pensioners do not have to be married to use the room and are also allowed to invite sex workers. (MX News 28/4/05).