

# Sex and Senior Living: Ethical Questions for Catholic Housing and Long-Term Care – Some Second Thoughts

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In the winter 2019 edition of *Health Care Ethics USA*, Fr. Bouchard, O.P. addressed a number of questions pertaining to sexual morality that arise on a regular basis in Catholic long-term care facilities. The purpose of the essay, he informs his readers, is “to open a discussion about responding to basic human needs in a rapidly changing society.”<sup>1</sup>

This essay intends to further the discussion initiated by Fr. Bouchard and, perhaps, to broaden the context in which issues of human sexuality and intimacy among residents of long-term care facilities might be appropriately construed.

A number of years ago, I attended a meeting of an ethics committee in a long-term care facility. The topic of discussion on that day, as it had been for several prior meetings, was how to encourage residents to complete advance directives so that their family members and the facility would know their preferences for end-of-life care. As the meeting proceeded, a member of the committee and a resident of the facility, claimed the floor and made a bold statement that galvanized the attention of

everyone around the table. And here I paraphrase, but the substance of his comment was that residents come into long-term care to live, to enjoy and relish the years of active life that remain for them. They do not come to focus on death and end-of-life issues. Residents want to continue to live the ordinary human lives that they have lived for the past sixty or seventy years. They want the warmth and comfort of a safe place to sleep, they want nutritious and tasty food, and, in many instances, would like a drink before dinner. But they also want friendship, intimacy and appropriate levels of sexual expression. All of these things are integral components of the ordinary lives of contemporary women and men. They are not extraordinary elements of human life and well-being, but ordinary, regularly recurring aspects of the lives of contemporary Americans. They are essential elements of the common good, of integral and authentic human well-being.

I doubt that Fr. Bouchard would disagree with any of these comments regarding ordinary life and their relevance to the well-being of long-term care residents. Towards the end of his article he writes: “Providing a safe, welcoming

place for them (the elderly) enables them to flourish and to experience God's grace in old age."<sup>2</sup> Where we may differ is in the use of ethical categories such as "cooperation" and "scandal" in appraising sexual behavior within Catholic long-term care facilities..

Let me begin with a comparison. The focus of Fr. Bouchard's essay is with the moral obligations of a Catholic facility regarding sexual acts that may occur within space rented to residents. His essay accepts the traditional teaching of the church regarding fornication and adultery, divorced Catholics remarried outside the church, and couples who are not married according to the requirements of canon law. Thus, the focus of the essay is whether a Catholic residential facility illicitly cooperates in these moral evils and whether its toleration of them constitutes a risk of scandal.

But why this exclusive focus on Catholic long-term care organizations? Could not questions of cooperation and scandal be raised regarding dormitory space rented by Catholic colleges and universities to their students? Is it impossible to conjure up the possibility that at least some of these dorm rooms are used on occasion for sexually illicit acts contrary to church teaching? Why this difference? Are Catholic colleges less Catholic than Catholic health care? Does the principle of cooperation have less applicability to Catholic colleges than Catholic health care? Are Catholic colleges immune from accusations of condoning scandal?

The difference lies, I suspect, not in the relevancy of the church's moral teaching nor in the applicability of the principle of cooperation or the significance of scandal. College students are deemed competent, they are adults with the psychological and moral capacity to think and

act on their own. The college no longer functions in *loco parentis*. Residents in long-term care, be they situated in independent living or dependent living are culturally perceived to possess questionable levels of cognitive capacity. Among the elderly, cognitive status covers a broad spectrum. Patients in independent living are competent to make their own decisions, decisions regarding their finances, their health care needs and expressions of sexuality and intimacy. Residents who experience dementia are clearly individuals with diminished capacity. And there are many elderly who fall somewhere in between these two groups. Only professional evaluations that can document diminished competency can justify restricting the decision-making of individual residents. Any lesser standard would violate the human dignity and privacy rights of residents.

The point I am trying to get at is that the primary issues for Catholic long-term care are neither cooperation nor scandal. Catholic residents of long-term care have lived for years with divorced and remarried Catholics, with couples living together who are not married as well as members of the LGBTQ communities. These various constituencies are part of the adult world. It would be a rare and unusual resident who would raise issues of scandal or cooperation because these are terms of "church speech" not public discourse.

But posing issues of cooperation and scandal can provide a cloak to cover the complex issue of assessing the cognitive status of residents. Because certain sexual acts and intimacy relationships are deemed intrinsically evil, therefore they ought to be prohibited in a Catholic facility. The problems associated with sex and senior living are not appropriately

resolved by applying the notions of cooperation and scandal, but rather the resolution of these problems ought to focus on issues such as the cognitive status of individual residents and the roles of sexuality and intimacy within the ordinary lives of the elderly.

The central question should be: How do Catholic long-term care facilities nourish the human dignity of residents and their capacity to enjoy the elements of ordinary life? To engage questions such as these would bring theological reflection within Catholic long-term care into alignment with the contemporary mission of the church to the modern world - prophetic evangelization.



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## ENDNOTES

<sup>1</sup> Fr. Charles Bouchard, O.P., STD, "Sex and Senior Living: Ethical Questions for Catholic Housing and Long -Term Care," *Health Care Ethics USA*, Winter 2019, 18.

<sup>2</sup> Ibid.