

Sex, Romance, and Relationships

AARP Survey of Midlife and Older Adults

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AARP Knowledge Management

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Dr. Xenia Montenegro of AARP's Knowledge Management Division collaborated in the launch, analysis, and reporting of the survey, and will be reporting on the Hispanic results. G. Oscar Anderson, Dr. Matrika Chapagain, Amishi Takalkar, and James Smoot of AARP's Knowledge Management Division contributed heavily to data analysis, reporting, and quality control on this report.

PREFACE

Knowledge Networks, under contract to AARP, administered a survey about sexual attitudes and practices to 1,670 adults ages 45 and older in August of 2009. The survey was administered in both English and Spanish, and included an over-sample of 500 Hispanics, for a total of 630 Hispanic respondents. The Knowledge Networks online panel is the first online research panel that is representative of the entire U.S. population. Panel members are randomly recruited by probability-based sampling, and households are provided with access to the Internet and hardware if needed. Detailed information about survey methodology can be found in the Appendix to this report.

This report documents the basic findings from the survey and provides analysis, where appropriate, by gender, age, and partner status. It also includes self-reported and analytical data on some of the factors that affect both sexual performance and satisfaction. AARP will produce at least two additional reports on these data: one will report on Hispanic findings in greater depth than does this report, and another will provide greater depth of analysis on the correlates of sexual performance and satisfaction as well as other aspects of the survey data.

This is the third survey that AARP has completed on this topic over the past 10 years, with earlier surveys in 1999 and 2004. Some comparisons will be made to the prior surveys where appropriate. However, the 2009 survey was completed using a different methodology than the two prior surveys, so we make those comparisons with that caveat. Each survey was conducted using pre-tested questions, self-administered by trusted panels, to ensure confidentiality and candor among respondents as well as validity of responses. The move from a large mail panel to a telephone recruited online panel (full description in Appendix A) is cause for caution in trend interpretation. However, stability in items such as specific medical diagnoses adds to confidence that the two types of samples can be trended.

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TABLE OF CONTENTS

EXECUTIVE SUMMARY.....	1
DETAILED FINDINGS.....	7
I. Quality of Life.....	7
II. Overall Health Assessment.....	10
III. Sex Attitudes.....	19
IV. Sex Behaviors and Orientation.....	21
V. Relationships and Sexual Partners.....	28
VI. Satisfaction With Sex and Relationship.....	36
VII. Differences by Ethnicity: Hispanic Americans vs. General Age-45+ Population.....	44
A. Quality of Life.....	44
B. Health Assessment and Medical Conditions.....	45
C. Sex Attitudes.....	47
D. Partners and Relationships.....	48
E. Sex Behaviors.....	49
F. Satisfaction with Sex Life and Relationship.....	50
Appendix A: Additional Project Information.....	53
Appendix B: Frequency of Six Sexual Activities by Gender and Age.....	65
Appendix C: Questionnaire.....	69

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LIST OF TABLES

Table 1. Quality of Life Five Years Ago, Now, and Five Years Into the Future by Age and Gender	7
Table 2. Quality of Life Five Years Ago, Now, and Five Years Into the Future by Gender and Partner Status	8
Table 3. Factors Important to Overall Quality of Life.....	9
Table 4. Overall Health Self-Assessment By Age and Gender	10
Table 5. Stress Levels by Gender and Age.....	11
Table 6. Frequency of Moderate or Vigorous Exercise by Gender and Age	12
Table 7. Erectile Dysfunction by Age for Men	13
Table 8. Medical Conditions Diagnosed 2004 and 2009 Comparison	14
Table 9. Medical Conditions Diagnosed and Treated By Gender	15
Table 10. Prescription-Drug Use	16
Table 11. Sexually Transmitted Diseases	17
Table 12. Use of Protection by Relationship Status and Age	18
Table 13. Attitudes Toward Sex by Age and Gender	20
Table 14. Frequency of Sexual Thoughts, Fantasies, Erotic Dreams by Gender and Age.....	21
Table 15. Types of Sexual Fantasies by Gender	22
Table 16. Discussions of Sexual Fantasies	22
Table 17. Sexual Activities Engaged In Once a Week or More Often in Past Six Months: 1999-2009.....	23
Table 18. Frequency of Intercourse by Gender and Age.....	24
Table 19. Frequency of Intercourse by Gender and Presence of a Sexual Partner.....	24
Table 20. Frequency of Intercourse by Relationship Status	25
Table 21. Frequency of Intercourse by Health Status.....	25

LIST OF TABLES

Table 22. Frequency of Intercourse by Stress Levels	26
Table 23. Frequency of Intercourse by Frequency of Exercise	26
Table 24. Frequency of Orgasm by Gender and Age.....	27
Table 25. Partner Status by Gender and Age	29
Table 26. Gender of Partner by Respondent Gender and Marital Status.....	30
Table 27. Partner Attributes by Age and by Gender	31
Table 28. Romantic Practices by Age and Gender.....	32
Table 29. Relationship Satisfaction by Age and Gender	33
Table 30. Had Sexual Relationship With Another Partner During Current Relationship	34
Table 31. Partner Had Sexual Relationship With Another During Current Relationship	35
Table 32. Sexual Satisfaction by Gender and Age	37
Table 33. Sexual Satisfaction by Gender and Presence of a Sexual Partner	38
Table 34. Sexual Satisfaction by Gender and Marital Status	38
Table 35. Sexual Satisfaction by Type of Relationship Status	39
Table 36. Sexual Satisfaction by Frequency of Sexual Intercourse.....	39
Table 37. Sexual Satisfaction by Health Status.....	40
Table 38. Sexual Satisfaction by Stress Levels.....	40
Table 39. Sexual Satisfaction by Frequency of Exercise	41
Table 40. Change in Sexual Satisfaction by Gender.....	42
Table 41. Changes That Affected Sexual Satisfaction During the Last 10 Years	42
Table 42. Changes That Would Increase Current Sexual Satisfaction	43
Table 43. Top Three Steps of the Ladder of Life by Ethnicity.....	44
Table 44. Overall Health Self-Assessment by Ethnicity	45

LIST OF TABLES

Table 45. Medical Conditions Diagnosed by Ethnicity	45
Table 46. Selected Prescription Medications Taken in Past Six Months by Ethnicity	46
Table 47. Sexual Attitudes by Ethnicity	47
Table 48. Partner Attributes by Ethnicity	48
Table 49. Satisfaction With Sex Life by Ethnicity.....	50
Table 50. Changes That Would Increase Satisfaction With Sex Life by Ethnicity.....	51
Table 51. Perception of Partner’s Satisfaction With Sexual Relationship by Ethnicity	52
Table 52. Sexual Frequency by Age by Gender	66

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EXECUTIVE SUMMARY

Key Findings

The sexual revolution continues in the older population as boomers continue to age. Opposition to sex among those who are not married is down by half over the past 10 years, and belief that there is too much emphasis on sex in our culture today is down since 2004.¹

On the other hand, this push to a social environment that is more favorable to widespread sexual activity has run head on into an economic environment that is adding to stress and financial anxiety, factors which previous research has shown to be strongly related to sexual satisfaction. Whether due to this environment or not, both the frequency of sexual intercourse and overall sexual satisfaction are down close to ten points since 2004, while the frequency of self-stimulation and sexual thoughts and fantasies have not changed.

Men continue to think about sex more often than women, see it as more important to their quality of life, engage in sexual activities more often, are less satisfied if without a partner, and are twice as likely as women (21 percent vs. 11 percent) to admit to sexual activity outside their relationship.

What does a happy sexual relationship look like? Those who are the most satisfied tend to have the following:

- A sexual partner (but not necessarily a spouse—dating singles are more satisfied)
- Frequent sexual intercourse (more than once a week, but not necessarily daily)
- Good health (self and partner)
- Low levels of stress
- Absence of financial worries

Marriage does not necessarily increase sexual frequency or satisfaction. In fact, both sexual frequency and satisfaction are higher among unmarried and dating (or engaged) individuals than among those who are married. For example, 48 percent of those who are single and dating say they have intercourse at least once a week, compared to 36 percent of those who are married; and 60 percent of dating singles are satisfied with their sex lives, compared to 52 percent of those who are married.

¹ It is important to note that the methodology is different for this survey than earlier (1999 and 2004) AARP sexuality surveys. However, our analysis leads to some confidence in the ability to see trends over the years. In some areas, the results from year to year are virtually indistinguishable, while in others, the apparent trends hold up in the context of how related factors have changed.

Sex Attitudes

Sexuality remains an essential element of the lives of many U.S. adults ages 45 and older. Although two in three believe that too much emphasis is placed on sex in today's culture, nearly six in 10 continue to agree that sexual activity is critical to a good relationship, and fewer than one in 20 believe that sex is only for younger people.

Moreover, the percent who agree with the statement that "People should not have a sexual relationship if they are not married" has dropped precipitously, from 41 percent 10 years ago to 34 percent five years ago to 22 percent today.

Sex Behaviors and Relationships

Just under three in 10 of those surveyed (28%) report they had sexual intercourse once a week or more often on average in the last six months, and 40 percent report having intercourse at least once a month. These numbers rise to 41 percent and 60 percent if one focuses only on those with a current or recent sexual partner, but in all cases are about 10 points lower than in 2004.

Nearly six in 10 (58%) say they engage in kissing and hugging at least once a week (78 percent of those with sexual partners), and 44 percent report sexual touching and caressing at least once a week (64 percent if they have a partner). These numbers are also lower than in 2004.

More than one in five (22%) say they engage in self-stimulation at least once a week, virtually identical to 2004. The presence of a sexual partner does not really matter, as 25% of those with sexual partners say they engage in self-stimulation at least once a week.

Two-thirds of the adults surveyed say they have either a current or recent sexual partner (identical to 2004), though only 59 percent say they are married or living with a partner. Most (73 percent of those with partners) say they have been with their partner for more than 10 years. Five percent report having same-sex partners, including 8 percent of males and 2 percent of females. When asked about sexual orientation, 3 percent reported being gay, under half of 1 percent lesbian, and 1 percent bisexual.

In addition to 54 percent who said they were married (when asked about relationship status), 15 percent said they are dating or engaged—including singles, divorcees, widows and widowers, and those who are separated and dating. Those groups who are partnered but unmarried showed higher rates of both sexual intercourse and satisfaction than those who are married.

Satisfaction with Sex Life

Just over four in 10 (43 percent) say they are satisfied with their sex lives, down from 51 percent in 2004. Younger respondents are more likely than their older counterparts to report satisfaction with their sex lives, while men are more satisfied, overall, than women.

For most people, the presence of a sexual partner appears to be a prerequisite to sexual satisfaction, though not a guarantee. Among all those with a sexual partner, 57 percent are satisfied with their sex lives.

Sexual Frequency. The number one factor predicting satisfaction with one's sex life is the frequency of sexual intercourse. Among those who have sexual intercourse at least once a week, 84 percent are satisfied, compared to 59 percent of those who have sex once or twice a month and 16 percent of those who have not had sex in the past six months.

Other key factors affecting sexual satisfaction include health (including medications), stress, financial situation, and such lifestyle practices as exercise.

Health Effects. Healthy and physically active respondents are generally more satisfied with their sex lives than those who are not. Among those who say they are in "excellent" health, 42 percent say they have sex at least once a week, and 54 percent are satisfied. Among those with just fair health, in contrast, only 19 percent report having sex at least once a week and just 23 percent say they are satisfied with their sex lives.

Moreover, among those who say their sex lives are worse than they were 10 years ago, the top reasons cited are worse personal health, more stress, and worse health of one's partner—each cited by about one in three of those with worse satisfaction. Among those with higher satisfaction, the top reason is less stress (42 percent).

What would improve current satisfaction? Nearly four in 10 men (37 percent, up from 31 percent in 2004) and one in five women (20 percent, vs. 19 percent in 2004) say better health for themselves would help. Less stress follows, for 27 percent (up from 22 percent) of men and 22 percent of women. Better health for one's partner is cited by 23 percent of men and 22 percent of women, similar to 2004.

Finances. When asked what would improve their current satisfaction, 26 percent of men and 14 percent of women say better finances would help—up from 17 percent of men and 9 percent of women in 2004.

Health and Quality of Life

Overall, midlife and older adults have a positive outlook on life, on average—less so than in 2004, but nevertheless, still optimistic that life will be better five years from now. Four in 10 consider themselves in excellent or very good health, and another 38 percent say their health is “good.” One in five (21 percent), however, assess their own health condition as either poor or fair.

A number of medical conditions affect health and quality of life. These conditions include high blood pressure, high cholesterol, arthritis or rheumatism, back problems, diabetes, depression, and among men, erectile dysfunction. Three in 10 male respondents (30 percent) report they have some degree of erectile dysfunction (are never or only sometimes able to get and keep an erection sufficient for sexual intercourse), and 23 percent say they have actually been diagnosed with erectile dysfunction or impotence (up from 17 percent in 2004).

The use of prescription medications is of course widespread in this population, more so with age. Moreover, use of prescription medications for some medical conditions had increased from 1999 to 2004, and remains at 2004 levels for most in 2009. The use of cholesterol medications rose from 18 percent of this population in 1999 to 32 percent in 2004 and remains at a similar level—around 36 percent—in 2009. Blood pressure medications are now used by 43 percent, similar to 42 percent in 2004 but still up from 36 percent in 1999.

Differences in Sex Attitudes and Behaviors by Subgroups

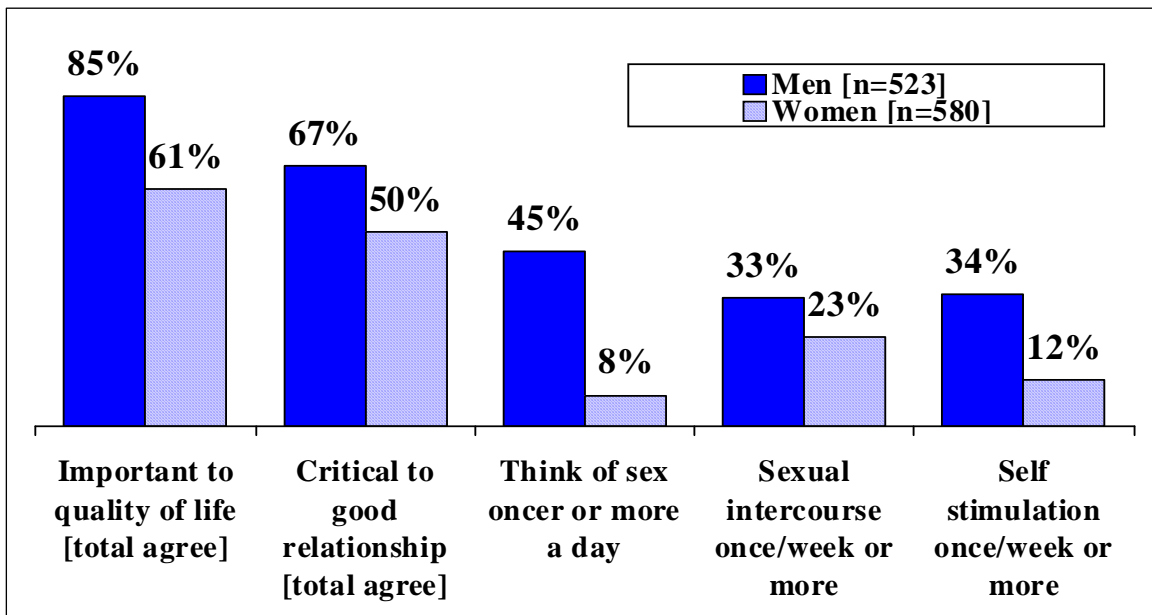
Sexual attitudes and behaviors are extremely varied among different segments of the population – especially those based on gender, age, and the presence or absence of a regular sex partner.

Gender

Men and women, regardless of age, have different sex attitudes. For instance, sex is far more important to the overall quality of life of men than women (see figure below), and also more critical to a good relationship.

Men and women also differ greatly in their sex behaviors. Men are more than five times as likely as women (45% vs. 8%) to say they think of sex *once or more* every day. They are nearly three times as likely as women to say they engage in self-stimulation at least once a week or more (34% vs. 12%), and nearly twice as likely to acknowledge engaging in oral sex that often (20% vs. 12% – see Table 17). In addition, nearly twice as many men as women (21% vs. 11%) admit to having had a sexual relationship outside their long term relationship. (See Table 30.)

**Gender Gap in Sexual Attitudes,
Thoughts, and Behaviors**



Age

Respondents ages 45-59 are generally more sexual than those 60 and older, and this applies to both men and women. For these younger respondents, sexual activity plays an important role in their relationship and impacts their quality of life. They have sexual thoughts more often, and engage in sexual activities much more frequently than their older counterparts.

Partner Status

Respondents who have a regular sexual partner have vastly different attitudes than those who do not have one—not only about sex but also toward their outlook on life. Partnered respondents report dramatically higher overall quality of life at the current time as well as both in the past and in their expected future. Sex plays a more critical role in their relationships and quality of life, and they are also more satisfied sexually – not surprising since they also report engaging in sexual activities more frequently than their non-partnered counterparts.

Hispanics

Hispanics in this age group demonstrate a decidedly more positive outlook on life as compared with the general 45+ population – both currently, and in terms of expectations for the future. This optimistic outlook persists in the face of lower overall health ratings (self-reported), and the fact that they are more likely than others to report diagnoses of diabetes and depression.

Sexuality is a higher priority for 45+ Hispanics than for the 45+ population at large: they are more likely than others to say that sexual activity is a critical part of a good relationship, and is important to their overall quality of life. At the same time, they are also more likely to say sex is a duty to one's spouse or partner, and is primarily for procreation.

Hispanics are more sexually active and satisfied than the general population, although they report lower overall health ratings, and are just as likely as the rest of the population to say their sexual satisfaction is worse now than it was 10 years ago. Indeed, they are even more likely than average in this age population to cite better health, less stress, and better finances as factors that could improve their current sexual satisfaction.

More details on the Hispanic findings are found in Section VII of this report.

DETAILED FINDINGS

I. Quality of Life

Midlife and older adults in general anticipate that their lives will be better five years from now than they are now. Just 46 percent say that they are on the top three steps of a 10-step “ladder of life” at this time – compared to 50 percent who say they were at that level five years ago, but 57 percent who think they will be there five years into the future.

Women are more optimistic about their future quality of life than men. The most optimistic group consists of women ages 45-59, among whom 67% say they expect a high quality of life five years from now. In contrast, barely half (51%) of men in their late forties and 62% of those in their fifties have such high hopes for the future.

Table 1. Quality of Life Five Years Ago, Now, and Five Years Into the Future by Age and Gender

Q1. Steps on the Ladder of Life (See below) Base = those answering			Quality of Life Ratings			
			Five Years Ago	Now	Five Years Into Future	
			High 8 - 10	High 8 - 10	High 8 - 10	Unweighted Count
Overall Total			50%	46%	57%	1016
Male	Age	Age 45-49	45%	46%	51%	76
		Age 50-59	49%	47%	62%	189
		Age 60-69	58%	53%	57%	142
		Age 70 +	58%	40%	30%	83
	Male Total			52%	47%	53%
Female	Age	Age 45-49	24%	39%	67%	73
		Age 50-59	41%	46%	67%	192
		Age 60-69	56%	48%	62%	166
		Age 70 +	63%	48%	39%	95
	Female Total			48%	46%	60%

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Q1. Ladder of life: below is a step ladder with 10 steps representing the "ladder of life." The top step of the ladder, or "10", represents the best possible life for you. The bottom step of the ladder, or "1", represents the worst possible life for you. On which of these 10 steps of the ladder do you feel you personally stand at the present time? What about five years ago? Where do you think you will stand five years from now?

Table 2. Quality of Life Five Years Ago, Now, and Five Years Into the Future by Gender and Partner Status

Q1. Steps on the ladder of Life Base = those answering			Quality of Life Ratings			
			Five Years Ago	Now	Five Years Into Future	
			High 8 - 10	High 8 - 10	High 8 - 10	Unweighted Count
Overall Total			50%	46%	57%	1016
Male	Current or recent sexual partner	no	43%	30%	42%	112
		Yes	55%	52%	56%	378
	Male Total		52%	47%	53%	490
Female	Current or recent sexual partner	no	44%	43%	55%	211
		Yes	51%	48%	64%	315
	Female Total		48%	46%	60%	526

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Regardless of gender, respondents with a regular sexual partner have a more positive outlook on life, both present and future, than do those who do not have a regular sex partner.

However, the partner gap in rated life quality is larger for men than for women – especially where current quality of life is concerned.

Among men with sexual partners, about half (52%) say their current quality of life is high – 22 points higher than the 30 percent rating among those without partners.

Among women, in contrast, the partner gap in current quality of life ratings is only 5 points – 48 percent among those with partners and 43 percent among those without partners.

What makes for a high quality of life? Being healthy and active tops the list as “very or somewhat” important. Large majorities say that all eight factors listed in the survey are important to their quality of life. Spiritual well-being is more important to women than to men, while a satisfying sexual relationship is substantially more important to men than to women, even after they pass age 70.

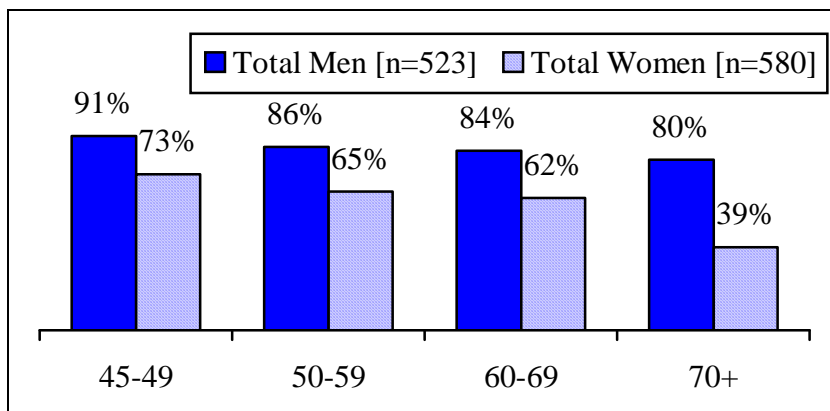
The importance of a satisfying sexual relationship to quality of life diminishes for both men and women with age—but at very different rates. For men, the drop is from 91 percent at ages 45-49 to 80 percent at ages 70 and over. For women, in contrast, just 73 percent cite this level of importance for their sexual relationship at ages 45-49, and that statistic drops to 39 percent by ages 70 and over.

Table 3. Factors Important to Overall Quality of Life
Percent Important (Very or Somewhat)

Q2. Listed below are some things that affect some people’s quality of life. For each item below, please indicate how important it is to you personally with regard to your own quality of life.											
	Factors Important to Quality of Life										
	Total	Male	Female	Male				Female			
				45-49	50-59	60-69	70+	45-49	50-59	60-69	70+
Unweighted count	1102	523	580	75	192	144	88	76	193	177	101
Being healthy, vigorous, and phys. active	98%	99%	97%	96%	99%	100%	99%	98%	98%	96%	97%
Financial security	98%	98%	98%	98%	97%	99%	100%	99%	99%	98%	99%
Close ties to friends and family	96%	96%	97%	90%	96%	96%	100%	98%	95%	97%	99%
Personal independence	96%	97%	95%	94%	96%	99%	99%	95%	95%	98%	93%
Spiritual well-being	88%	84%	91%	81%	85%	84%	86%	91%	87%	94%	94%
A good relationship with spouse/partner*	87%	93%	81%*	89%	93%	94%	94%	87%	86%	83%	81%
Being productive, contributing	87%	85%	89%	86%	85%	87%	82%	89%	94%	89%	82%
A satisfying sexual relationship	72%	85%	61%	91%	86%	84%	80%	73%	65%	62%	39%

*Women are more likely to be without a spouse or partner than men.
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Importance of Sexual Relationship to Quality of Life by Age and Gender



II. Overall Health Assessment

Nearly eight in 10 (78 percent) say their current health is at least “good,” similar to 81% in 2004. Four in 10 (40 percent) say it is either “excellent” or “very good,” and another 38 percent say it is “good.” One in five (21 percent) say it is fair or poor. In general, men rate their personal health higher than do women, and regardless of age. For example, 44 percent of men say their current health is “excellent” or “very good,” compared to 38 percent of women. Even across the ages, from 39 to 46 percent of men give this response (46 percent of men in their 60s and 39 percent at age 70 and older). Among women also, those in their 60s are most positive about their current health, with 44 percent saying it is “excellent” or “very good,” while 32 - 36 percent of those over and under this age rate their health this positively.

Table 4. Overall Health Self-Assessment By Age and Gender

Q3. How would you rate your overall health at the present time?		Overall Health Self-Assessment					
		Excellent	Very good	Good	Fair	Poor	Total
		Row N %	Row N %	Row N %	Row N %	Row N %	Unweighted Count
Total		7%	33%	38%	18%	3%	1106
Male	Age 45-49	7%	37%	34%	20%	2%	83
	Age 50-59	7%	38%	40%	12%	3%	197
	Age 60-69	6%	40%	26%	24%	4%	151
	Age 70 +	5%	34%	38%	21%	2%	93
	Total	6%	38%	35%	18%	3%	524
Female	Age 45-49	6%	26%	49%	18%	1%	78
	Age 50-59	9%	27%	39%	21%	4%	205
	Age 60-69	8%	36%	42%	12%	3%	188
	Age 70 +	7%	29%	38%	21%	6%	111
	Total	8%	30%	41%	18%	4%	582

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On the other hand, one in five men and women (22%) say their health is just fair or poor – identical to the 22 percent who say they are currently experiencing a relatively high level of stress.

Tables 21 and 37 show the relationships between overall health ratings and the frequency of intercourse (Table 21) and sexual satisfaction (Table 37).

Stress is highest among the age groups under 60, and especially so for women, among whom nearly three in 10 of those under age 60 report high stress levels. This could go a long way to explaining why the younger men and women rate their overall health lower than those in their 60s.

Table 5. Stress Levels by Gender and Age

Q 12. On a scale from 1 to 10, where 1 is "extremely low" and 10 is "extremely high," please rate the overall stress level in your life today.		Level of Stress			
		High (8-10)	Moderate (5-7)	Low (1-4)	Total
		Row N %	Row N %	Row N %	Unweighted Count
Total		22%	43%	35%	1107
Male	Age 45-49	21%	56%	23%	82
	Age 50-59	28%	46%	27%	198
	Age 60-69	21%	32%	47%	150
	Age 70 +	6%	33%	61%	93
	Total	21%	41%	38%	523
Female	Age 45-49	29%	48%	23%	78
	Age 50-59	30%	47%	23%	205
	Age 60-69	20%	44%	36%	188
	Age 70 +	9%	39%	52%	113
	Total	22%	45%	33%	584

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Many of the survey findings point to stress as a major factor in sexual satisfaction. The higher levels of stress among the younger population may be holding down what might otherwise be higher levels of frequency and satisfaction in that age group. Just 33 percent of those reporting high levels of stress are very or somewhat satisfied with their sex lives, compared to 47 percent of those reporting moderate stress levels and 44 percent of those reporting low stress.

Tables 22 and 38 show the relationships between stress and the frequency of intercourse (Table 22) and sexual satisfaction (Table 38).

One in four (24 percent) say they exercise six or more times a week, and an additional 37 percent say they exercise three to five time a week. Nearly four in 10 say they either do not exercise (28 percent), or do so only once or twice a week (12 percent).

The statistics are very close for men and women overall. However, exercise frequency declines markedly for women, but not for men, with age. For example, at ages 70 and older, 44% of women say they do no exercise at all, compared to 26% of men that age.

Table 6. Frequency of Moderate or Vigorous Exercise by Gender and Age

Q4. How many days a week do you engage in: Moderate exercise (such as brisk walking, moderate biking or moderate swimming)?		Frequency of Moderate or Vigorous Exercise				
		6 or more times a week	3 to 5 times a week	1 to 2 times a week	None	Total
Q5. Vigorous exercise (such as running, jogging, aerobics, swimming or biking)?		Row N %	Row N %	Row N %	Row N %	Unweighted Count
Total		24%	37%	12%	28%	1100
Male	Age 45-49	31%	29%	10%	31%	80
	Age 50-59	28%	33%	13%	26%	198
	Age 60-69	19%	45%	9%	27%	151
	Age 70 +	30%	36%	11%	23%	93
	Total	26%	36%	11%	26%	522
Female	Age 45-49	18%	47%	14%	21%	78
	Age 50-59	26%	36%	15%	24%	204
	Age 60-69	23%	38%	11%	28%	185
	Age 70 +	16%	33%	8%	44%	111
	Total	22%	37%	12%	29%	578

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The significance of exercise is that, likely due to its relation to health and stress, we can see an effect on both sexual frequency and satisfaction. This relationship will be examined further under sexual satisfaction. (See Tables 23 and 39.)

Sexual Dysfunction

Close to one in four men (23%) say they have been diagnosed with erectile dysfunction or impotence – up from 17% in 2004. Moreover, 30 percent say later in the survey that they either never or just “sometimes” are able to have an erection sufficient for intercourse (compared to 26% in 2004).

Seven in 10 (71%) of the men surveyed say they are always (49%) or usually (22%) able to get an erection sufficient for sexual intercourse. This leaves three in 10 who either say they are never able to get an erection (14%) or are only “sometimes” able to do so (16%). Erectile dysfunction increases with age. Only 13 percent of those ages 45-49, and 18 percent of those in their 50s acknowledge any problems getting an erection (“sometimes” or “never”), compared to 38 percent of those in their 60s and more than half (56%) of those ages 70 and older.

Table 7. Erectile Dysfunction by Age for Men

		Erectile Dysfunction					Total
		Age					
		Age 45-49	Age 50-59	Age 60-69	Age 70 +		
Q 8a. Diagnosed with Erectile Dysfunction or Impotence	Yes	Col %	6%	16%	29%	48%	23%
	No	Col %	94%	85%	71%	52%	77%
Q. 58. Erectile dysfunction (sometimes referred to as impotence) refers to being unable to get and keep an erection that is rigid enough for satisfactory sexual activity. How would you describe yourself?	Always able to get and keep an erection good enough for sexual intercourse	Col %	61%	59%	45%	20%	49%
	Usually	Col %	26%	23%	17%	25%	22%
	Sometimes	Col %	9%	7%	25%	27%	16%
	Never	Col %	4%	11%	13%	29%	14%
Total	Count		85	202	126	90	504

2009 AARP Sexuality Survey

When all those surveyed were asked if they had ever had any problems with sexual functioning, 29 percent of men and 13 percent of women said “yes.” The percent increases with age for men (from 23 percent to 38 percent) but not for women.

Of those who acknowledged experiencing problems, four in 10 (40 percent) said they had sought treatment from their personal physician, 19 percent from a specialist physician, 8 percent from a mental health professional, and 2 percent from a sex therapist. Those who did not seek treatment said they were not comfortable discussing sexual problems (49 percent) or could not afford it (20 percent). More than half (53 percent) of those who sought help said the treatment made their sexual function better, while 45 percent said it made no difference.

High blood pressure and high cholesterol are the most common medical conditions the respondents have been diagnosed with, followed by arthritis/rheumatism, back problems, diabetes, and depression.

The 2009 statistics are very similar to those from 2004, except that the incidence of high cholesterol is up among women, and back problems are more prevalent now among both men and women. In addition, acknowledged diagnoses of erectile dysfunction are up a little among men.

Men and women are equally likely to have diagnoses of high blood pressure and high cholesterol. However, women are more likely to have been diagnosed with arthritis/rheumatism and depression.

**Table 8. Medical Conditions Diagnosed
2004 and 2009 Comparison**

Q8a. Please indicate which of these medical conditions you have been diagnosed with.	Medical Conditions					
	Total		Male		Female	
	2004	2009	2004	2009	2004	2009
<i>Total respondents:</i>	1,683	1112	777	535	906	589
High blood pressure	42%	44%	40%	46%	44%	43%
High cholesterol	35%	42%	39%	41%	32%	42%
Arthritis or rheumatism	28%	32%	21%	25%	35%	38%
Back problems	22%	36%	21%	34%	23%	38%
ED/Impotence			17%	23%		
Erectile dysfunction	-	-	15%	22%	-	-
Impotence	-	-	8%	11%	-	-
Diabetes	16%	16%	16	14%	16%	17%
Enlarged or swollen prostate	-	-	15%	18%	-	-
Depression	10%	16%	8%	13%	13%	20%
Breast cancer	-	-	-	-	4%	5%
Cervical cancer	-	-	-	-	1%	2%
Ovarian cancer	-	-	-	-	1%	1%
Prostate cancer	-	-	5%	5%	-	-
Genital pain	0%	2%	1%	3%	1%	2%
Drug/alcohol abuse	1%	3%	1%	4%	0%	2%

2009 AARP Sexuality Survey

Irrespective of gender, there is a greater likelihood for older respondents to have been diagnosed with a medical condition.

For both genders, gaps exist between the proportion diagnosed and the proportion receiving treatment for a number of medical conditions, including high cholesterol (42% diagnosed and 32% receiving treatment), arthritis/rheumatism (32% diagnosed and 15% being treated), and back problems (36% diagnosed and just 14% receiving treatment).

There is a 16 percentage point gap between men who have been diagnosed with erectile dysfunction and those receiving treatment for it; there is also a 10 percentage point gap between men who have been diagnosed with enlarged/swollen prostate and those currently receiving treatment

Table 9. Medical Conditions Diagnosed and Treated By Gender

Q8a. and Q8b.	Diagnosed			Treated		
	Gender		Total	Gender		Total
	Male	Female		Male	Female	
Unweighted N	535	589	1112	535	589	1112
Medical Conditions						
High blood pressure	46%	43%	44%	42%	40%	41%
High Cholesterol	41%	42%	42%	34%	30%	32%
Back Problems	34%	38%	36%	9%	19%	14%
Arthritis or Rheumatism	25%	38%	32%	11%	19%	15%
Diabetes (high blood sugar)	14%	17%	16%	11%	14%	13%
Depression	13%	20%	16%	8%	13%	11%
Drug/Alcohol Abuse	4%	2%	3%	<0.5%	<0.5%	<0.5%
Genital Pain	3%	2%	2%	1%	1%	1%
Erectile Dysfunction/Impotence	23%			7%		
Enlarged or Swollen Prostate	18%			8%		
Prostate Cancer	5%			2%		
Breast Cancer		5%			1%	
Cervical Cancer		2%			<0.5%	
Ovarian Cancer		1%			<0.5%	

2009 AARP Sexuality Survey

Consistent with their diagnosed medical conditions, medications for blood pressure, cholesterol, and pain are the most common prescription medications respondents are currently taking. Very few respondents (fewer than 5 percent) report at this point in the survey that they are taking prescription medications to improve sexual functioning.

Men are more likely than women to be taking prescription drugs for cholesterol, pills to thin blood, medications for the heart, and medications to improve sexual functioning, while women are more likely than men to be taking thyroid pills, antidepressants, sleeping pills, and medications for a nervous condition.

Regardless of gender, there is a greater likelihood for older than for younger respondents to be on a prescription medication.

Table 10. Prescription-Drug Use

Q 64. In the past six months have you taken any of the following prescription drugs?	Prescription Drug Use										
	Total	Males					Females				
		Age 45-49	Age 50-59	Age 60-69	Age 70 +	Total	Age 45-49	Age 50-59	Age 60-69	Age 70 +	Total
		Col %	Col %	Col %	Col %	Col %	Col %	Col %	Col %	Col %	Col %
	1112	82	198	151	92	523	77	205	188	113	583
Blood pressure pills	43%	30%	36%	48%	69%	44%	16%	40%	50%	54%	42%
Medications for cholesterol	36%	23%	28%	53%	56%	39%	16%	23%	40%	51%	33%
Pain killers	39%	29%	32%	47%	43%	38%	26%	39%	47%	46%	41%
Pills or other medicines to thin your blood?	17%	11%	11%	37%	39%	23%	5%	9%	11%	18%	11%
Anything for your heart including pills or paste patches?	12%	4%	7%	25%	27%	15%	5%	7%	8%	19%	10%
Insulin or pills for sugar in blood	12%	4%	8%	12%	16%	10%	11%	12%	16%	17%	14%
Thyroid pills	12%	3%	3%	4%	9%	4%	9%	13%	16%	33%	18%
Medications for depression?	13%	12%	8%	14%	7%	10%	16%	18%	18%	10%	16%
Sleeping pills or other medications to help you sleep	16%	13%	13%	18%	11%	14%	16%	20%	14%	22%	18%
Medications for a nervous condition, such as tranquilizers	7%	3%	5%	11%	2%	5%	8%	11%	7%	9%	9%
Medications to improve sexual functioning	5%	6%	10%	13%	9%	10%	1%	1%	0%	0%	0%
Any androgens, testoderm, or bromocriptine	1%	1%	2%	1%	4%	2%	0%	0%	0%	0%	0%
Hormone creams/suppositories for vaginal dryness	4%	0%	0%	0%	0%	0%	1%	5%	5%	3%	4%
Hormone pills, such as estrogen or progesterone; for example, Premarin, Provera?	9%	0%	0%	0%	0%	0%	7%	10%	9%	10%	9%

2009 AARP Sexuality Survey

Sexually Transmitted Diseases

The most common sexually transmitted disease is vaginitis, such as yeast infections, among 35% of women. Five percent of both men and women reported a diagnosis of HPV (human papillomavirus or genital warts), and three percent of both men and women reported a diagnosis of genital herpes. Two percent of women also reported a diagnosis of pelvic inflammatory disease.

About 5% of those surveyed reported they have been diagnosed with Gonorrhea, including 7% of men and 2% of women. Five percent of men and 2% of women reported having been diagnosed with hepatitis.

Table 11. Sexually Transmitted Diseases

Q9. There are several diseases or infections that can be transmitted during sex. These are sometimes called venereal diseases. We will be using the medical term sexually transmitted diseases or STDs. At any point in time, have you ever been told by a doctor that you had any of the following STDs?			
	Total	Male	Female
Unweighted N	1,110	525	585
Vaginitis/yeast infections		0%	35%
HPV/Genital Warts	5%	5%	5%
Gonorrhea (clap-drip)	5%	7%	2%
Hepatitis	3%	5%	2%
Herpes/genital herpes	3%	3%	3%
PID (Pelvic Inflammatory disease)		0%	2%
Syphilis	1%	1%	1%
HIV/AIDS	1%	1%	<0.5%
NGU ((nongonococcal urethritis)	1%	1%	0

2009 AARP Sexuality Survey

With the exception of HIV/AIDS, far fewer report that they are currently receiving treatment for any of these diseases, with the exception of those diagnosed with HIV/AIDS, all of whom are currently receiving treatment.

The sources cited for sexually transmitted diseases include casual sex, anal sex, intercourse, love, one night stand, previous husband, partner, girlfriend, sex partner, saloon woman, Vietnam hooker, and others. Two people said they had been erroneously diagnosed with hepatitis.

Use of Protection

An item about the use of protection during sex revealed that protecting oneself is far from universal, especially among men. Indeed, just one in five sexually active dating singles reported using protection regularly, including just 12% of men and 32% of women. (Note that a total of 91 respondents are in this category.)

The table below is based only on those who reported having had sexual intercourse at least once a month during the past six months, although the question asked about any kind of sexual activity.

Among married people who have engaged in sexual intercourse with some regularity, just 5% of men and 3% of women reported that they use protection all the time, while another 2 percent of men reported using protection “usually, but not all the time.”

Table 12. Use of Protection by Relationship Status and Age

Q. 57. Do you usually use any protection, such as condoms or other methods, when you have sex? Base = Those who have had sexual intercourse at least once a month in the last six months		Use of Protection During Sex					
		Yes, all the time	Usually, but not all the time	Sometimes	Rarely or not at all	Not applicable*	Total
		Row N %	Row N %	Row N %	Row N %	Row N %	Unweighted count
Male	Single and Dating	12%	13%	4%	50%	20%	48
	Married	5%	2%	1%	49%	44%	174
	Single and Not Dating	12%	13%	13%	37%	25%	16
	Total	7%	5%	2%	48%	37%	238
Female	Single and Dating	32%	0%	5%	29%	35%	43
	Married	3%	0%	2%	33%	62%	138
	Single and Not Dating	5%	19%	.0%	49%	26%	8
	Total	9%	1%	2%	33%	55%	189
Total	Single and Dating	19%	8%	5%	42%	26%	91
	Married	4%	1%	1%	42%	52%	312
	Single and Not Dating	10%	15%	9%	41%	25%	24
	Total	8%	4%	2%	42%	44%	427
*Clearly “not applicable” does not mean the respondent has not had sex, since those who have not had intercourse are excluded from this analysis.							

2009 AARP Sexuality Survey

III. Sex Attitudes

Attitudes Toward Sexuality. Despite the fact that a majority of midlife and older adults believe there is too much emphasis on sex in our culture today, nearly as many say that sexual activity is critical to a good relationship. Moreover, the data over ten years show clear trends toward more open attitudes toward sex.

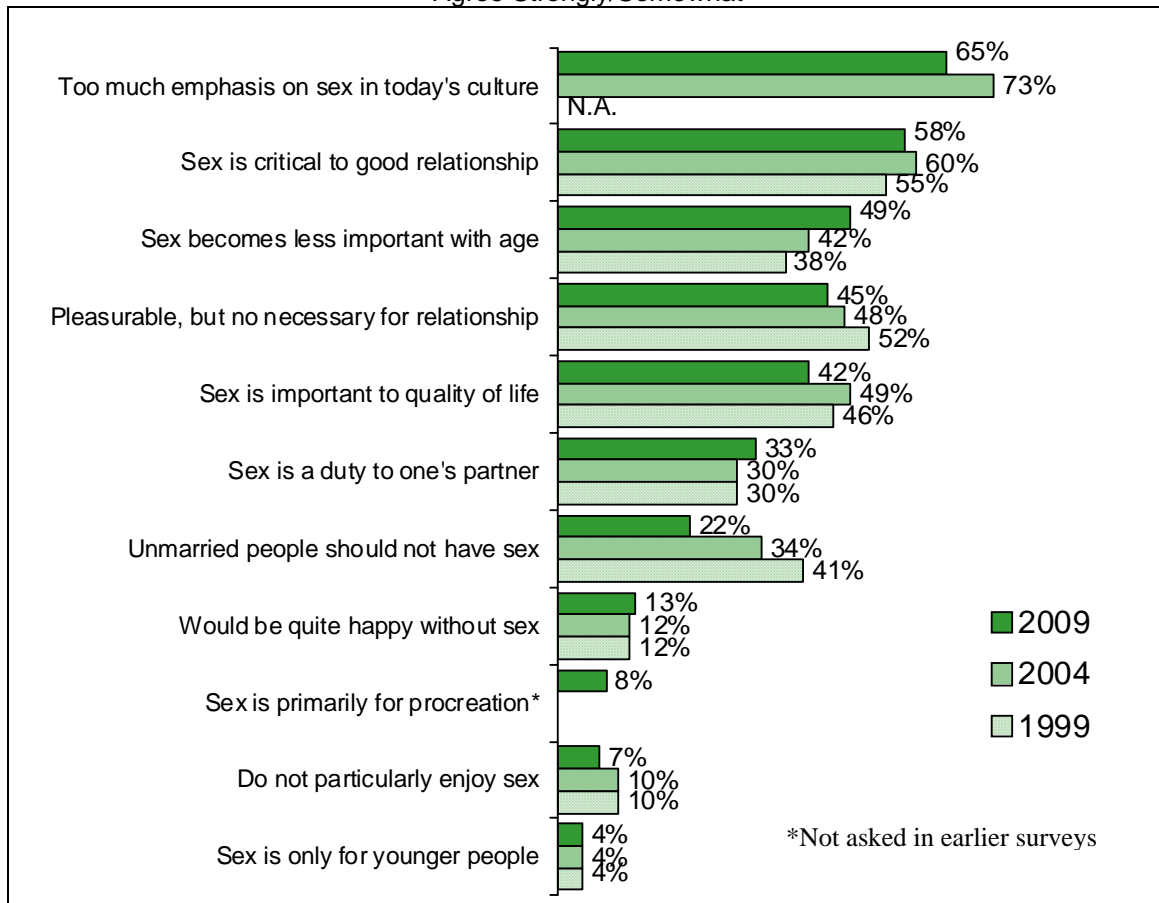
Most notably, the percentage of 45+ adults who believe that “people should not have a sexual relationship if they are not married” has dropped nearly in half since 1999 – from 41% in 1999 to 34% in 2004 to just 22% today.

Nearly two in three agree there is too much emphasis on sex in our culture today, down from 73% five years ago.

Sex is pleasurable, but not necessary? Down from 52% ten years ago to 45% today.

On the other hand, we have also seen a steady increase in the proportion saying sex becomes less important with age, from 38% in 1999 to 49% today.

**Attitudes Toward Sexuality
1999–2009**
Agree Strongly/Somewhat



Men and women have different attitudes on a number of these issues – and age is a big factor as well. For example, just 58% of men believe there is too much emphasis on sex today, compared to 71% of women. On the other hand, reversing the gender bias, of the 58 percent who agree that sex is a critical part of a good relationship, this view is held by 67 percent of men (76 percent of those under age 50) and 50 percent of women (53 percent of those under age 50).

Very few people believe that sex is only for younger people. Even among women over age 70, only 8 percent hold this view. Yet half those surveyed (49%) agreed that “sex becomes less important to people as they age.” Men and women are in agreement on this at about half each – but by age 70 and older more than six in 10 men and women hold this view.

The belief that people should not have a sexual relationship if they are not married (held by 22% overall) is still quite varied based on both age and gender. Under age 50, only 12 percent of men and 14 percent for women hold this view. At age 70 and older, however, 32 percent of men and 39 percent of women agree with this sentiment. It is of note, however, that even the numbers for the 70+ population are currently lower than what they were for the entire 45+ population in 1999 (41%).

Table 13. Attitudes Toward Sex by Age and Gender

Q 13: For each of the following statements, please indicate how much you agree or disagree.

Percent Agree or Agree Strongly	Attitudes toward Sex										
	Overall Total	Males by Age				Total Male	Females by Age				Total Female
		Age 45-49	Age 50-59	Age 60-69	Age 70 +		Age 45-49	Age 50-59	Age 60-69	Age 70 +	
Unweighted count	1112	82	198	151	92	523	77	205	188	113	583
There is too much emphasis on sex in our culture today	65%	60%	48%	64%	67%	58%	64%	69%	72%	75%	71%
Sexual activity is a critical part of a good relationship	58%	76%	68%	63%	40%	67%	53%	49%	55%	46%	50%
Sex becomes less important to people as they age	49%	44%	45%	45%	63%	48%	45%	46%	44%	63%	49%
Sexual activity is a pleasurable, but not necessary, part of a good relationship	45%	30%	34%	41%	59%	40%	52%	47%	49%	50%	49%
Sexual activity is important to my overall quality of life	42%	69%	65%	55%	46%	60%	33%	28%	33%	12%	26%
Sexual activity is a duty to one's spouse/partner	33%	41%	35%	40%	61%	42%	14%	22%	29%	31%	25%
People should not have a sexual relationship if they are not married	22%	12%	9%	20%	32%	17%	14%	25%	29%	39%	28%
I would be quite happy never having sex again	13%	4%	2%	5%	15%	5%	6%	19%	18%	38%	21%
Sex is primarily for procreation	8%	4%	7%	8%	12%	8%	7%	8%	7%	14%	9%
I do not particularly enjoy sex	7%	1%	3%	3%	2%	3%	10%	12%	10%	16%	12%
Sex is only for younger people	4%	2%	4%	0%	5%	3%	8%	6%	3%	8%	6%

2009 AARP Sexuality Survey

IV. Sex Behaviors and Orientation

Sexual Thoughts/Fantasies. One in four (25 percent) say they have sexual thoughts, fantasies, or erotic dreams at least once a day, including 16 percent who say it is more than once a day. This is consistent with the 23% who reported this frequency of sexual thoughts in 2004. Nearly half (49 percent) say they have such thoughts at least once a week. Two in three (66 percent) say they have them at least once a month.

Men are more than five times as likely to say they have such thoughts frequently as are women. For example, among all men and women, 45 percent of men and just 8 percent of women say they have these thoughts once or more each day.

The frequency of thinking and fantasizing about sex declines by age for both men and women. More than half of the men in their fifties (55 percent) say they have such thoughts once or more a day, compared to 12 percent of women the same age. This daily frequency of sexual thoughts drops to 42 percent of men ages 60-69 and 27 percent of those ages 70 and older. For women, it does not have far to drop – from 12 percent to 1 percent.

Table 14. Frequency of Sexual Thoughts, Fantasies, Erotic Dreams by Gender and Age

Q 19: How frequently have you had sexual thoughts, fantasies or erotic dreams?		Frequency of Sexual Thoughts, Fantasies, or Erotic Dreams								
		Not at all	Less than once per month	Once a month	2 or 3 times per month	Once a week	2 or 3 times per week	Once a day	More than once a day	Unweighted Count
Total		20%	15%	7%	10%	8%	16%	9%	16%	1077
Males	Age 45-49	9%	6%	6%	5%	8%	26%	15%	25%	80
	Age 50-59	6%	4%	2%	5%	6%	21%	15%	40%	197
	Age 60-69	4%	9%	5%	12%	12%	16%	24%	18%	147
	Age 70 +	12%	17%	5%	9%	9%	21%	6%	21%	92
	Total	7%	8%	4%	8%	8%	20%	16%	29%	516
Females	Age 45-49	11%	25%	13%	24%	5%	13%	4%	5%	76
	Age 50-59	19%	22%	10%	10%	11%	16%	7%	5%	196
	Age 60-69	36%	16%	9%	10%	7%	16%	2%	5%	180
	Age 70 +	55%	20%	5%	12%	5%	2%	1%	0%	109
	Total	31%	20%	9%	13%	7%	12%	4%	4%	561

2009 AARP Sexuality Survey

What are those fantasies are these midlife and older adults indulging? The most common was having sex with a stranger.

- Having sex with a stranger (38 percent of all those having sexual thoughts or fantasies)
- Having sex with more than one person at the same time (21 percent)
- Having sex with a celebrity (19 percent)
- Having sex in public (11 percent)
- Having sex with someone of the same sex (9 percent)

Men are significantly more likely to report fantasies of having sex with a stranger (44% vs. 28% for women) and having sex with more than one person at a time (30% vs. 10%).

Table 15. Types of Sexual Fantasies by Gender
(as a percentage of those who have had such fantasies)

Q 20. What kinds of sexual fantasies have you had?	Gender		Total
	Male	Female	
	Col %	Col %	Col %
<i>Unweighted N</i>	476	417	893
Having sex with a stranger	45%	28%	38%
Having sex with more than one person at the same time	30%	10%	21%
Having sex with a celebrity, such as a famous movie star	20%	17%	19%
Having sex in public	13%	9%	11%
Having sex with someone of the same sex	9%	8%	9%

2009 AARP Sexuality Survey

About one in three of those who acknowledged having sexual thoughts and fantasies said they had discussed them with someone – the most common someone being their spouse or partner, followed by a friend. Women are a little less likely to discuss their fantasies with anyone than are men.

Table 16. Discussions of Sexual Fantasies
(as a percentage of those who said they have had such fantasies)

Response	Discussed Fantasies		
	Total	Male	Female
Unweighted count	893	476	417
Never discussed	64%	60%	68%
Spouse/partner	21%	23%	18%
Friend	15%	18%	11%
Med. professional	3%	2%	4%
Stranger	1%	1%	1%
Q 21 Have you ever discussed these fantasies, and if so, with whom?			

2009 AARP Sexuality Survey

Sexual Desire

The majority (56 percent) of those surveyed believe their level of sexual desire is about average, while 31 percent believe it is below average and 11 percent think it is above average.

Men are more likely than women to believe their level of sexual of desire is higher than average. Seventeen percent of men and just 6 percent of women say they have a higher than average level of desire. On the other hand, 21 percent of men and 40 percent of women believe they have a lower than average level of sexual desire.

Sexual Activities

The table below shows frequency of sexual behaviors over the past 10 years. It is immediately apparent that the data show a decline in the frequency of three activities—kissing and hugging, sexual touching or caressing, and sexual intercourse—in 2009 compared to 2004. While it is important to keep in mind the change in data collection methodologies in the two surveys, it is also of interest that the frequency of oral sex and self-stimulation remain quite constant. A follow-up question asked about the use of vibrators for self-stimulation, with the result that one in four of those engaging in self-stimulation said they had used one, including 15 percent of men and 34 percent of women.

Table 17. Sexual Activities Engaged In Once a Week or More Often in Past Six Months: 1999-2009

Q 52. During the past 6 months, how often, on average, have you engaged in the following sexual activities?	Sexual Activities								
	Total			Male			Female		
	1999	2004	2009	1999	2004	2009	1999	2004	2009
	1252	1554	1112	594	743	524	652	809	588
Kissing and Hugging	65%	69%	58%	74%	76%	67%	58%	62%	49%
Sexual Touching or Caressing	55%	53%	44%	63%	61%	54%	47%	46%	35%
Sexual Intercourse	38%	36%	28%	42%	41%	33%	35%	31%	23%
Oral Sex	13%	14%	16%	14%	19%	20%	11%	10%	12%
Anal Sex	--	--	3%	--	--	4%	--	--	2%
Self Stimulation	12%	20%	22%	23%	34%	34%	3%	8%	12%

2009 AARP Sexuality Survey

Although it is clear that sexual thought is not as often on women's minds as it is on men's, the big differentiator between the sexes where sexual behavior is concerned is that women, especially as they age, are less and less likely to have a partner. So, for example, among all those surveyed, 33 percent of men and just 23 percent of women say they have sexual intercourse at least once a week. (See Table 17.)

The frequency of intercourse definitely declines with age. (See Table 18.) While half of the men ages 45-49 (and nearly as many in their 50s) report having intercourse at least once a week, that frequency drops to 15 percent of men in their 70s and older. If you reduce the frequency to at least once a month, then six in ten of those in their late 40s and 50s (59-63%) report sexual intercourse at that frequency. Even at once a month though, intercourse drops to 42 percent of those in their 60s and 22 percent of those 70 and older.

Among women, 26 percent of those in their late 40s, 32 percent of those in their 50s, and 24 percent of those in their 60s report intercourse at least once a week—numbers that rise on a monthly basis to 38 percent, 42 percent, and 32 percent. At age 70 and older, though, the frequency of intercourse for women drops to 5 percent reporting intercourse at least once a week and 11 percent reporting intercourse at least once a month.

It is important to note, however, that women lose their partners at a much higher rate than do men as they age, and if you look only at those with sexual partners, the numbers reporting intercourse on at

least a weekly basis are virtually identical at 42 percent for men and 41 percent for women. (See Tables 18 and 19.)

Table 18. Frequency of Intercourse by Gender and Age

Q 52. During the past six months, how often, on average, have you engaged in the following sexual activities? Sexual Intercourse		Frequency of Sexual Intercourse				
		At least once a week	Once or twice a month	Less than once a month	Never in last six months	Total
		Row N %	Row N %	Row N %	Row N %	Unweighted Count
	Total	28%	12%	12%	48%	1053
Male	Age 45-49	50%	9%	10%	31%	78
	Age 50-59	41%	22%	9%	28%	190
	Age 60-69	24%	18%	18%	40%	148
	Age 70 +	15%	7%	18%	60%	90
	Total	33%	16%	13%	37%	506
Female	Age 45-49	26%	12%	20%	42%	73
	Age 50-59	32%	10%	9%	49%	195
	Age 60-69	24%	8%	13%	55%	174
	Age 70 +	5%	6%	3%	87%	105
	Total	23%	9%	10%	58%	547

2009 AARP Sexuality Survey

Table 19. Frequency of Intercourse by Gender and Presence of a Sexual Partner

Q 52. During the past six months, how often, on average, have you engaged in the following sexual activities? Sexual Intercourse			Frequency of Sexual Intercourse				
			At least once a week	Once or twice a month	Less than once a month	Never in last six months	Total
			Row N %	Row N %	Row N %	Row N %	Unweighted Count
Male	Current or recent sexual partner	Yes	42%	21%	16%	22%	390
		No	2%	0%	5%	93%	116
		Total	33%	16%	13%	37%	506
Female	Current or recent sexual partner	Yes	41%	16%	18%	25%	323
		No	0%	0%	1%	99%	224
		Total	23%	9%	10%	58%	547
Total	Current or recent sexual partner	Yes	41%	19%	17%	23%	713
		No	1%	0%	2%	97%	340
		Total	28%	12%	12%	48%	1053

2009 AARP Sexuality Survey

Marriage is not necessarily the key to sexual frequency, as the table below suggests. It seems that those who are single and dating are more sexually active than those who are married. Nearly half of the dating singles report sexual intercourse at least once a week, compared to 36% of those who are married.

Table 20. Frequency of Intercourse by Relationship Status

Q 52. During the past six months, how often, on average, have you engaged in the following sexual activities? Sexual Intercourse		Frequency of Sexual Intercourse				
		At least once a week	Once or twice a month	Less than once a month	Never in last six months	Total
		Row N %	Row N %	Row N %	Row N %	Unweighted Count
Married, Dating, or Single	Single and Not Dating	3%	4%	5%	88%	317
	Married	36%	17%	16%	31%	585
	Single and Dating	48%	15%	11%	26%	143
	Total	28%	12%	12%	48%	1045

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Health, stress, and exercise are all predictors of the frequency of intercourse (and of satisfaction, as we shall see later). The frequency of intercourse drops dramatically by self-reported health status. More than four in 10 of those reporting their health as “excellent” report weekly sexual intercourse, compared to 23 percent of those whose health is only “good,” and 14 percent for those who say they are in poor health.

Table 21. Frequency of Intercourse by Health Status

Q 52. During the past six months, how often, on average, have you engaged in the following sexual activities? Sexual Intercourse		Frequency of Sexual Intercourse				
		At least once a week	Once or twice a month	Less than once a month	Never in last six months	Total
		Row N %	Row N %	Row N %	Row N %	Unweighted Count
Q. 3 How would you rate your overall health at the present time?	Excellent	42%	12%	7%	39%	82
	Very good	36%	11%	11%	42%	366
	Good	23%	16%	13%	48%	378
	Fair	19%	8%	11%	63%	189
	Poor	14%	14%	19%	53%	35
	Total	28%	12%	12%	48%	1050

2009 AARP Sexuality Survey

Stress is also a factor in the frequency of sexual intercourse, although the drop in frequency is not as dramatic as the drop in satisfaction, which will be documented later in this report. (See Table 38.)

Table 22. Frequency of Intercourse by Stress Levels

Q 52. During the past six months, how often, on average, have you engaged in the following sexual activities? Sexual Intercourse		Frequency of Intercourse				
		At least once a week	Once or twice a month	Less than once a month	Never in last six months	Total
		Row N %	Row N %	Row N %	Row N %	Unweighted Count
	Total	28%	12%	12%	48%	1051
Q 12 Level of Stress	High	25%	11%	14%	50%	237
	Moderate	30%	16%	11%	43%	441
	Low	27%	9%	11%	53%	373

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Finally, there is a clear drop-off in frequency of intercourse among those who do not exercise regularly. Nearly four in 10 of the most frequent exercisers report weekly intercourse, dropping to 31 percent of those who exercise three to five times a week, 25 percent of those who exercise one to two times a week, and finally just 16 percent of those who do not exercise at all.

Table 23. Frequency of Intercourse by Frequency of Exercise

Q 52. During the past six months, how often, on average, have you engaged in the following sexual activities? Sexual Intercourse		Frequency of Sexual Intercourse				
		At least once a week	Once or twice a month	Less than once a month	Never in last six months	Total
		Row N %	Row N %	Row N %	Row N %	Unweighted Count
Q 4 and 5 Frequency of Moderate or Vigorous Exercise	6 or more times a week	38%	10%	8%	44%	253
	3 to 5 times a week	31%	11%	13%	45%	376
	1 to 2 times a week	25%	7%	15%	53%	143
	None	16%	18%	13%	54%	273
	Total	27%	12%	12%	48%	1045

2009 AARP Sexuality Survey

Frequency of Orgasm

If one wants to look for an explanation of the differences in sexual focus by men and women, the difference in the frequency of orgasm might just offer a clue.

Roughly eight out of every 10 respondents (78 percent) report they always/usually have an orgasm when engaging in sexual intercourse, Two in three male respondents say they always had an orgasm when they engaged in sexual intercourse in the prior six months, compared to less than one in three females.

More than seven in 10 men ages 45-49 (73%) report that they always experience orgasm when they engage in sexual activity, compared with fewer than three in ten women in the same age group—28 percent. In fact, while men’s frequency of orgasm drops off with age, women’s is fairly flat across the age ranges.

Table 24. Frequency of Orgasm by Gender and Age

Q 56. When you engaged in sexual activity in the last six months, how often did you have an orgasm (come to climax)? (Based on all with partners)		Always	Usually	Some-times	Rarely	Never	Did not attempt orgasm	Total
		Row N %	Row N %	Row N %	Row N %	Row N %	Row N %	Unweighted Count
	Total	51%	27%	9%	6%	5%	2%	752
Males by Age	Age 45-49	73%	22%	1%	3%	1%	0%	74
	Age 50-59	67%	21%	5%	4%	3%	0%	172
	Age 60-69	74%	17%	3%	1%	5%	1%	114
	Age 70 +	40%	42%	14%	2%	0%	1%	55
	Total	66%	23%	5%	3%	3%	1%	415
Females by Age	Age 45-49	28%	42%	17%	9%	4%	0%	55
	Age 50-59	33%	31%	12%	6%	13%	5%	140
	Age 60-69	31%	28%	17%	13%	5%	7%	109
	Age 70 +	30%	31%	22%	11%	7%	0%	33
	Total	31%	32%	15%	9%	8%	4%	337

2009 AARP Sexuality Survey

V. Relationships and Sexual Partners

Relationships

Current relationship status is as follows:

- Married (54 percent)
- Single and not dating (12 percent)
- Divorced and not dating (9 percent)
- Widowed and not dating (8 percent)
- Single and dating (6 percent)
- Divorced and dating (4 percent)
- Widowed and dating (1 percent)
- Separated and not dating (2 percent)
- Separated and dating (1 percent)
- Engaged (3 percent)

Six in ten (59%) say they have a long-term marriage or other formal commitment of a year or more (63 percent of men and 54 percent of women), while 10 percent say they have a long-term dating relationship of a year or more (11 percent of men and 8 percent of women). Eighteen percent say they are looking for someone to date. About 3 percent say they are in a long-term relationship at a distance.

Four percent say they have dated more than one person at a time, and 4 percent say they have been sexually active with more than one person at the same time (6 percent of men and 1 percent of women).

Nine in 10 (92 percent) say they are straight, while 3 percent are gay, under half of 1 percent lesbian, 1 percent bisexual, and 1 percent “other” (including “bicurious,” “pansexual,” “gay currently married and choosing not to act on my interest in men”).

Approximately two-thirds of respondents report having a regular sexual partner. However, women are much less likely than men to have one (78 percent vs. 55 percent).

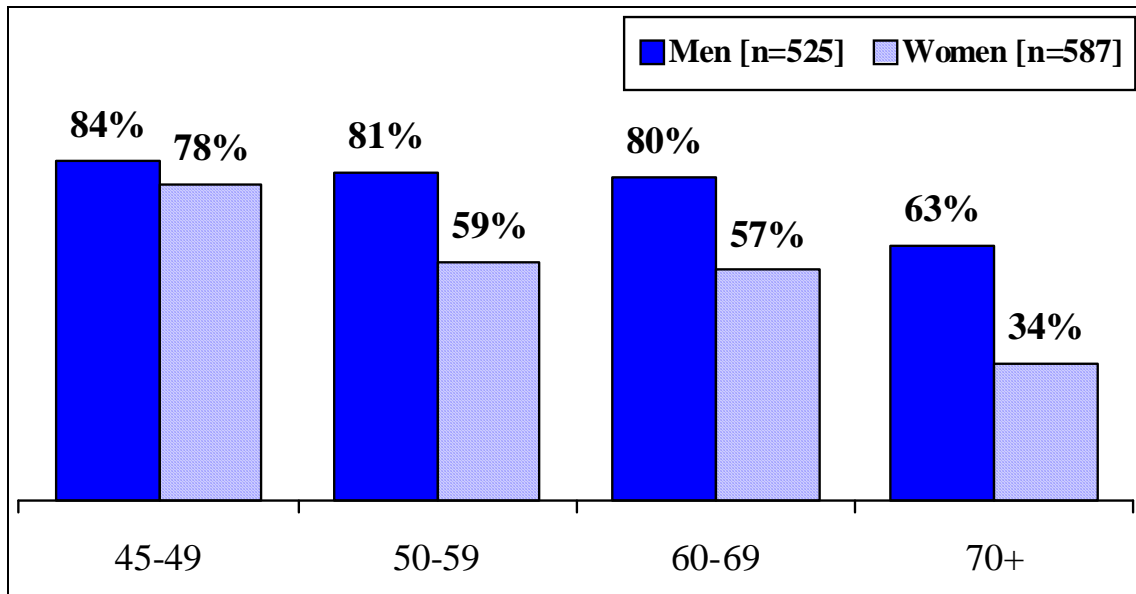
Table 25. Partner Status by Gender and Age

		Current or recent sexual partner		
		Q 28: Do you currently have a regular sexual partner?		
		Q 29: Have you had at least one sexual partner within the last six months?		
		Yes	No	Total
		Row N %	Row N %	Unweighted Count
	Total	66%	34%	1112
Male	Age 45-49	84%	16%	83
	Age 50-59	81%	19%	198
	Age 60-69	80%	20%	151
	Age 70 +	63%	37%	93
	Total	78%	22%	525
Female	Age 45-49	78%	22%	78
	Age 50-59	59%	41%	206
	Age 60-69	57%	43%	188
	Age 70 +	34%	66%	115
	Total	55%	45%	587

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Men in every age group over age 50 are significantly more likely than women of the same age to have a regular sexual partner. Moreover, women lose their partners more rapidly with age than do men, so that the gap becomes greater with age. By age 70 and older, men are nearly twice as likely as women to report having a current or recent sexual partner (63% vs. 34%).

**Partner Gap
By Gender and Age**



More than seven in ten say they have been in their current relationships for more than 10 years, including 54 percent who have been in the relationship for more than 20 years.

Those with recent (but not current) sexual partnerships characterized those relationships as one-encounter partnerships (31 percent), casual relationships (28 percent), and relationships that have ended (21 percent). Women are more likely to have had a relationship that ended than men, who are more likely to have had casual or one-encounter “relationships.”

Among those who currently have sexual partners, the vast majority (86%) live with that partner, while 10 percent say they live in the same area, but just not together, and 2 percent say they live far away from their sexual partner.

Among those with partners, 97 percent say they have just one partner, while 3 percent say they have two or more partners now (4 percent of men and 1 percent of women).

Eight percent of men said they had a male partner, and 1.5 percent of women said they had a female partner, consistent with the 5 percent overall who said earlier that they were gay, lesbian, or bisexual.

The proportion having a same sex partner has increased since 2004—in fact, it has doubled among men, from 4 percent in 2004 to 8 percent in 2009. Just 2 percent of women say they have a partner of the same sex.

Table 26. Gender of Partner by Respondent Gender and Marital Status

Q 32. What is the sex of your current primary/most recent partner?			Gender					
			Male			Female		
			Married or not married		Total	Married or not married		Total
			Married	Not Married		Married	Not Married	
	Male	Col %	1%	22%	8%	100%	95%	99%
	Female	Col %	99	78%	92%		5%	2%
Total	Unweighted Count		292	110	402	249	94	343

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Those with current or recent sexual partners were presented with a list of characteristics that might describe their partner, and asked whether each one applied to their primary sexual partner. Large majorities gave their partners high marks for having good personal hygiene (82% “applies strongly”), followed by “loves me deeply,” “is my best friend,” and “is kind and gentle” (each between 62% and 64%).

Relatively fewer said that such characteristics as “sensitive to my moods and needs,” “a skillful lover,” “romantic,” “exciting,” or “imaginative about sex” strongly applied to their partners.

Men and women gave their partners similar ratings on most of these characteristics. The major exceptions to this rule are that women were less likely than men to concede that their spouse or partner is romantic (32 percent vs. 41 percent), but more likely to say their partner finds them attractive (59 percent vs. 51 percent) and is imaginative about sex (34 percent vs. 25 percent).

**Table 27. Partner Attributes by Age and by Gender
(Percent “Applies Strongly”)**

Base = those with a current or recent sexual partner

Q 34: Please indicate how well each of the following describes your current/most recent sexual partner. (Total percent applies strongly)		Partner Attributes										
		Male					Female					
		Age					Male Total	Age				Female Total
		Total	Age 45-49	Age 50-59	Age 60-69	Age 70 +		Age 45-49	Age 50-59	Age 60-69	Age 70 +	
Unweighted Count	752	66	152	119	60	397	56	128	112	39	335	
Has good personal hygiene/cleanliness	82%	74%	85%	89%	86%	84%	83%	83%	76%	76%	80%	
Loves me deeply	64%	62%	59%	68%	67%	63%	52%	66%	72%	65%	65%	
Is my best friend	63%	59%	60%	71%	58%	63%	52%	67%	67%	69%	64%	
Is kind and gentle	62%	53%	60%	63%	67%	60%	55%	67%	70%	62%	65%	
Makes me feel important	57%	52%	55%	58%	61%	56%	47%	61%	60%	57%	57%	
Finds me physically attractive	55%	60%	51%	44%	50%	51%	50%	61%	65%	57%	59%	
Is physically attractive	53%	50%	53%	58%	51%	54%	60%	48%	58%	48%	53%	
Is sensitive to my moods and needs	39%	41%	39%	42%	40%	40%	30%	35%	51%	31%	38%	
Is a skillful lover	38%	46%	37%	35%	36%	38%	36%	39%	48%	25%	39%	
Is romantic	37%	39%	44%	40%	34%	41%	22%	35%	37%	26%	32%	
Is exciting	33%	42%	32%	40%	35%	36%	36%	32%	32%	10%	30%	
Is imaginative about sex	29%	30%	25%	24%	16%	25%	26%	42%	34%	23%	34%	

2009 AARP Sexuality Survey

Keeping Romance in the Relationship

What do people do to keep romance in their relationships? The most common practice, cited by nearly two in three, is to tell each other “I love you.” Men and women at all ages say they do this.

Second, and very close, is recognizing special occasions like birthdays and anniversaries. Fewer – from 26 percent to 29 percent - say they make time for special romantic vacations once a year, bring each other surprises, or set aside one day a week just to be together. On the other hand, only one in five (19%) said “Romance? What’s that?”

Table 28. Romantic Practices by Age and Gender

Q35. How do you keep the romance in your relationship?		Romantic Practices									
		Males by Age					Females by Age				
		Total	Age 45-49	Age 50-59	Age 60-69	Age 70 +	Total	Age 45-49	Age 50-59	Age 60-69	Age 70 +
Make a point of telling each other “I love you.	64%	57%	68%	62%	55%	63%	62%	62%	69%	68%	65%
Recognize birthdays, anniversaries	58%	57%	65%	58%	60%	61%	46%	49%	62%	59%	53%
Take a vacation/romantic weekend together at least once a year	29%	35%	33%	38%	24%	33%	24%	30%	21%	11%	24%
Set aside at least one day or evening a week just to enjoy each other’s company	26%	21%	34%	18%	33%	27%	25%	25%	26%	23%	25%
Bring each other surprises/presents/flowers	26%	21%	29%	19%	25%	24%	28%	25%	36%	19%	28%
Romance? What’s That?	19%	20%	13%	18%	18%	16%	24%	23%	20%	22%	23%
Total Unweighted Count	752	67	154	120	62	403	61	129	116	43	349

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How recently have those with partners done these things? Among those who say they do these things regularly:

- Nearly nine in 10 (87 percent) said they had recognized a birthday or anniversary in the past year.
- Half (53 percent) said they had taken a vacation or romantic weekend in the last year
- One in three (33 percent) said they had surprised their spouse or partner with a present or flowers in the past month
- Three in four (76 percent) said they had told their spouse/partner they loved them in the past week
- Six in 10 (63 percent) said they had spent a day or evening together in the last week

Relationship Satisfaction

Just about half those with partners say their relationships are either physically pleasurable or emotionally satisfying. Yet more than six in ten believe their relationship is satisfying to their partners.

- About half (51 percent) of those with partners say their relationship is extremely (22 percent) or very pleasurable physically.
- More than half (53 percent) also say their relationship is extremely (22 percent) or very satisfying emotionally.
- And more than six in 10 (64 percent) believe their relationship is satisfying to their partners.

Women are somewhat less satisfied both physically and emotionally—but also a little less likely to judge that their partner is satisfied. Satisfaction declines with age—but not as sharply as sexual frequency declines.

Table 29. Relationship Satisfaction by Age and Gender

Base = those with sexual partners			Relationship Satisfaction									
			Males by Age					Females by Age				
			Total	Age 45-49	Age 50-59	Age 60-69	Age 70 +	Age 45-49	Age 50-59	Age 60-69	Age 70 +	
Unweighted Count	752	65	151	118	60	394	57	124	114	40	335	
Q41. In the past 6 months, how physically pleasurable was your relationship with your partner?	Extremely pleasurable	22%	35%	25%	18%	16%	23%	18%	23%	20%	8%	19%
	Very pleasurable	29%	30%	34%	31%	31%	32%	16%	27%	33%	20%	25%
	Moderately pleasurable	24%	20%	25%	30%	16%	24%	25%	20%	19%	45%	24%
	Slightly pleasurable	12%	10%	7%	10%	21%	11%	21%	11%	19%	4%	14%
	Not at all pleasurable	13%	4%	9%	12%	15%	10%	21%	19%	10%	24%	17%
Q42. In the past 6 months, how emotionally satisfying was your relationship with your partner?	Extremely satisfying	22%	32%	25%	23%	19%	25%	15%	21%	23%	10%	19%
	Very satisfying	31%	25%	29%	34%	32%	30%	24%	32%	34%	45%	33%
	Moderately satisfying	28%	26%	32%	28%	20%	28%	37%	23%	29%	24%	28%
	Slightly satisfying	9%	9%	8%	14%	14%	11%	6%	10%	8%	4%	8%
	Not at all satisfying	10%	7%	6%	1%	15%	6%	19%	15%	6%	17%	14%
Q43. How satisfied do you think your partner is with your sexual relationship?	Extremely satisfied	31%	42%	36%	22%	21%	31%	18%	34%	35%	27%	30%
	Somewhat satisfied	33%	38%	33%	38%	32%	35%	29%	30%	33%	26%	30%
	Neither satisfied nor dissatisfied	21%	12%	20%	20%	33%	21%	23%	15%	18%	34%	20%
	Somewhat dissatisfied	10%	5%	9%	9%	7%	8%	14%	14%	11%	9%	13%
	Extremely dissatisfied	6%	3%	3%	11%	7%	6%	15%	7%	4%	4%	7%

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Fidelity

Men are nearly twice as likely as women to acknowledge having had a sexual liaison outside their regular relationship (21% vs. 11%). Yet both they are equally likely to say their partner has had such a liaison (12% for men and 13% for women).

About one in eight (17 percent) of those in a current relationship say they have had a sexual relationship with another partner, and 13 percent say are aware that their partner has had a sexual relationship with someone else.

Interestingly, half (49 percent) of those who say they have personally been unfaithful sexually say it had no effect on their relationship with their partner, while only one in three (33 percent) of those whose partner has been unfaithful say the same.

In the case of personal infidelity:

- 26 percent say the infidelity caused tension, but the relationship survived intact.
- 13 percent say the relationship is stronger than ever.
- 4 percent say it caused lasting tension and lack of trust.
- And just 1 percent say it ended the relationship/marriage.

One said, “We lived 300 miles apart at the time and agreed to a “don’t ask don’t tell’ policy.”

A majority also say the infidelity had no effect on their sexual satisfaction—and one in four say it made it better! While there are differences between men and women, they are not large—unlike the case when the partner has had an “outside” sexual relationship.

Table 30. Had Sexual Relationship With Another Partner During Current Relationship

(Percent of All Those With a Current or Recent Sexual Partner)

Response	Gender		
	Total	Male	Female
N of cases	752	403	349
Had outside relationship	17%	21%	11%
Effect on relationship*	N=133*	N=92*	N=41*
No effect	49%	45%	58%
Tension but relationship OK	26%	27%	23%
Relationship stronger than ever	13%	14%	13%
Lasting tension/ lack of trust	4%	5%	0%
Ended relationship/ marriage	1%	1%	0%
Effect on sexual satisfaction*			
No effect	57%	58%	54%
Made it better	25%	27%	21%
Made it worse	6%	4%	9%
Q45, 47, 48 (See questionnaire in Appendix C)			

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* Caution: small sample sizes for effect on relationship among those who had a sexual encounter outside the relationship.

In the case of infidelity of spouse or partner of the survey respondent, both men and women have a very different view—and the views of men and women are dramatically different on the impact of infidelity on the part of their partner.

- Women are substantially less likely than men to say the affair had no effect on their relationship (24 percent vs. 40 percent) or on their sexual satisfaction (36 percent vs. 57 percent).
- Women are nearly three times as likely as men to say the affair caused lasting lack of trust (22 percent vs. 8 percent).
- Women are more than six times as likely as men to say the affair of their partner made their sexual satisfaction worse (39 percent vs. 6 percent).

Table 31. Partner Had Sexual Relationship With Another During Current Relationship

(Percent of All Those With a Current or Recent Sexual Partner)

Response	Total	Male	Female
N of cases	752	403	349
Had outside relationship	13%	12%	13%
Effect on relationship*	N=86*	N=44*	N=42*
Tension but relationship ok	35%	30%	40%
No effect	33%	40%	24%
Lasting tension/ lack of trust	14%	8%	22%
Relationship stronger than ever	7%	5%	10%
Ended relationship/ marriage	6%	7%	4%
Effect on sexual satisfaction*			
No effect	48%	57%	36%
Made it better	11%	11%	12%
Made it worse	21%	6%	39%
Q50, 51, 52 (See questionnaire in Appendix C)			

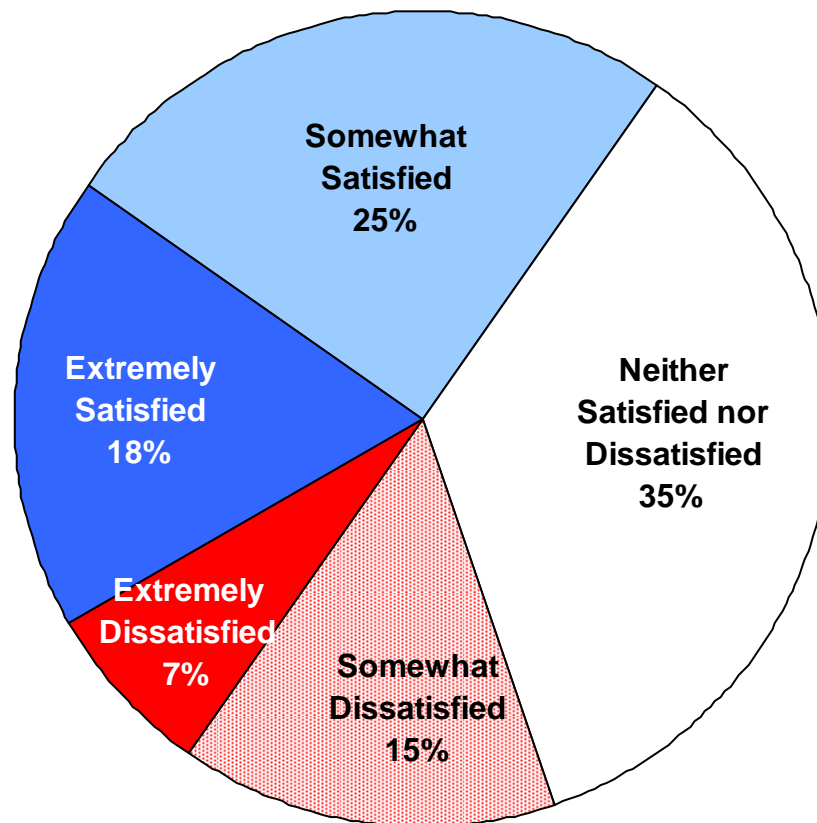
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* Caution: small sample sizes for effect on relationship among those whose partner had a sexual encounter outside the relationship.

VI. Satisfaction With Sex and Relationships

Overall Sexual Satisfaction. Just over four in 10 (43 percent) say they are at least somewhat satisfied with their sex lives, including 18 percent who are “extremely satisfied.” Along with the decline in frequency of sexual intercourse, sexual satisfaction is also down from 51 percent in 2004.

How satisfied are you with your sex life?
(Q. 14)



Men are both somewhat more satisfied (48 percent vs. 39 percent) and more dissatisfied (27 percent vs. 19 percent) than women, who more often find themselves saying they are “neither satisfied nor dissatisfied” (43 percent for women vs. 26 percent for men).

Sexual satisfaction declines dramatically with age for both men and women. For men, the percent at least somewhat satisfied drops from 60 percent at ages 45-49 to 26 percent at age 70 and older. For women, satisfaction drops from 48 percent at ages 45-49 to 27 percent at age 70 and older.

Table 32. Sexual Satisfaction by Gender and Age

Q 14: How satisfied are you with your sex life?		Sexual Satisfaction					
		Extremely satisfied	Somewhat satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Extremely dissatisfied	Total
		Row N %	Row N %	Row N %	Row N %	Row N %	Unweighted Count
	Total	18%	25%	35%	15%	7%	1092
Males	Age 45-49	32%	28%	19%	13%	8%	80
	Age 50-59	19%	31%	28%	14%	8%	197
	Age 60-69	13%	39%	21%	17%	10%	148
	Age 70 +	5%	21%	32%	33%	9%	92
	Total	17%	31%	26%	18%	9%	517
Females	Age 45-49	19%	29%	24%	21%	6%	77
	Age 50-59	18%	22%	36%	16%	8%	201
	Age 60-69	18%	23%	42%	11%	5%	187
	Age 70 +	17%	10%	66%	4%	3%	110
	Total	18%	21%	43%	13%	6%	575

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If we look only at those who currently have a regular sex partner, satisfaction levels are significantly higher, with 57 percent overall saying they are at least somewhat satisfied, compared to 15 percent of those without a current sexual partner. Among those who are married or live with a partner, 52 percent are satisfied.

Table 33. Sexual Satisfaction by Gender and Presence of a Sexual Partner

Q 14: How satisfied are you with your sex life?			Sexual Satisfaction					
			Extremely satisfied	Somewhat satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Extremely dissatisfied	Total
			Row N %	Row N %	Row N %	Row N %	Row N %	Unweighted Count
Male	Current or recent sexual partner	Yes	21%	38%	21%	18%	3%	399
		No	5%	4%	44%	29%	27%	118
		Total	17%	31%	26%	18%	9%	517
Female	Current or recent sexual partner	Yes	22%	34%	27%	13%	4%	348
		No	13%	3%	64%	11%	8%	227
		Total	18%	21%	43%	13%	6%	575
Total	Current or recent sexual partner	Yes	21%	36%	23%	16%	4%	747
		No	11%	4%	58%	14%	14%	345
		Total	18%	25%	35%	15%	7%	1092

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Table 34. Sexual Satisfaction by Gender and Marital Status

Q 14: How satisfied are you with your sex life?			Sexual Satisfaction					
			Extremely satisfied	Somewhat satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Extremely dissatisfied	Total
			Row N %	Row N %	Row N %	Row N %	Row N %	Unweighted Count
Male	Married or Live with a Partner	Yes	21%	34%	22%	18%	5%	313
		No	13%	26%	30%	18%	13%	204
		Total	17%	31%	26%	18%	9%	517
Female	Married or Live with a Partner	Yes	21%	28%	37%	10%	4%	286
		No	15%	14%	48%	15%	8%	289
		Total	18%	21%	43%	13%	6%	575
Total	Married or Live with a Partner	Yes	21%	31%	29%	14%	5%	599
		No	14%	19%	40%	16%	10%	493
		Total	18%	25%	35%	15%	7%	1092

2009 AARP Sexuality Survey

But marital status is not as important as partner status – and in fact, it would seem that those who are dating are actually a little more satisfied than those who are married by a margin of 60 percent to 52 percent.

Table 35. Sexual Satisfaction by Type of Relationship Status

Q 14. How satisfied are you with your sex life?		Sexual Satisfaction					
		Extremely satisfied	Somewhat satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Extremely dissatisfied	Total
		Row N %	Row N %	Row N %	Row N %	Row N %	Unweighted Count
Married, Dating, or Single	Single and Not Dating	10%	9%	55%	14%	11%	318
	Married	21%	31%	28%	15%	5%	618
	Single and Dating	20%	40%	15%	18%	7%	145
	Total	17%	25%	35%	15%	7%	1081

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The biggest single predictor of sexual satisfaction is the frequency of intercourse. Among those who report that they have sexual intercourse at least once a week, 84 percent are satisfied, compared with 59 percent of those who engage in intercourse just once or twice a month, 37 percent of those having intercourse less than once a month, and 16 percent of those who have not had intercourse in the past six months.

Table 36. Sexual Satisfaction by Frequency of Sexual Intercourse

Q 14. How satisfied are you with your sex life?		Sexual Satisfaction					
		Extremely satisfied	Somewhat satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Extremely dissatisfied	Total
		Row N %	Row N %	Row N %	Row N %	Row N %	Unweighted Count
Frequency of Sexual Intercourse	At least once a week	39%	45%	9%	6%	2%	298
	once or twice a month	13%	46%	25%	14%	2%	131
	Less than once a month	6%	31%	27%	32%	5%	132
	Never in last six months	8%	8%	54%	18%	13%	483
	Total	17%	25%	35%	16%	7%	1044

2009 AARP Sexuality Survey

The importance of self-reported health status is clear – and manifests for all who do not say their health is at least “very good.” Among those whose health is either “excellent” or “very good,” more than half say they are satisfied with their sex lives – though the level of satisfaction drops even for those whose health is “very good.” More than one in three (36 percent) of those with “excellent” health are extremely satisfied, compared to 24 percent of those whose health is “very good.”

Table 37. Sexual Satisfaction by Health Status

Q 14. How satisfied are you with your sex life?		Sexual Satisfaction					
		Extremely satisfied	Somewhat satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Extremely dissatisfied	Total
		Row N %	Row N %	Row N %	Row N %	Row N %	Unweighted Count
Q3. How would you rate your overall health at the present time?	Excellent	36%	18%	28%	8%	9%	91
	Very good	24%	30%	28%	14%	4%	379
	Good	14%	28%	36%	16%	6%	388
	Fair	8%	15%	42%	19%	15%	195
	Poor	2%	21%	56%	13%	8%	36
	Total	18%	25%	35%	15%	7%	1089

2009 AARP Sexuality Survey

Those with high stress levels also clearly suffer in terms of satisfaction, as only 33 percent are satisfied, including 13 percent “extremely satisfied.”

Table 38. Sexual Satisfaction by Stress Levels

Q 14. How satisfied are you with your sex life?		Sexual Satisfaction					
		Extremely satisfied	Somewhat satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Extremely dissatisfied	Total
		Row N %	Row N %	Row N %	Row N %	Row N %	Unweighted Count
Q 12. Level of Stress	High	13%	20%	31%	21%	15%	240
	Moderate	17%	30%	34%	14%	6%	462
	Low	22%	22%	38%	14%	5%	388
	Total	18%	25%	35%	15%	7%	1090

2009 AARP Sexuality Survey

We reported earlier in this report that sexual frequency is related to exercise frequency, so it should not be surprising that sexual satisfaction is also lower among those who exercise less or not at all.

Table 39. Sexual Satisfaction by Frequency of Exercise

Q 14. How satisfied are you with your sex life?		Sexual Satisfaction					
		Extremely satisfied	Somewhat satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Extremely dissatisfied	Total
		Row N %	Row N %	Row N %	Row N %	Row N %	Unweighted Count
Q 4. Frequency of Moderate or Vigorous Exercise	6 or more times a week	26%	22%	33%	13%	6%	267
	3 to 5 times a week	17%	34%	28%	15%	6%	389
	1 to 2 times a week	13%	26%	36%	16%	10%	143
	None	13%	16%	45%	17%	9%	285
	Total	17%	25%	35%	15%	7%	1084

2009 AARP Sexuality Survey

Changes in Sexual Satisfaction

In AARP's 2009 survey, just 12 percent said they are now more satisfied with their sex lives than they were 10 years ago, while 46 percent said they are now less satisfied. Men are more often than women less satisfied (52% vs. 41%).

Table 40. Change in Sexual Satisfaction by Gender

Changes in Satisfaction					
Q15. Are you more satisfied, or less satisfied, with your sex life than you were 10 years ago?			Gender		Total
			Male	Female	
Change in Satisfaction	More	Col %	15%	10%	12%
	Less	Col %	52%	41%	46%
	No difference	Col %	34%	49%	42%
Unweighted Count			519	568	1087

2009 AARP Sexuality Survey

For both groups, health and stress were key changes experienced over that time. Among the plurality who say they are less satisfied than they were 10 years ago, more than three in 10 cited more stress (33 percent), worse personal health (32 percent), and worse health of partner (31 percent). Just over one in five (22 percent) cited both weight gain and a worse financial situation.

Among those who are now more satisfied than they were 10 years ago, more than four in 10 (42 percent) said they now have less stress, while 29 percent say a change in partners occurred and 27 percent said they now have more free time. One in four (24 percent) said they personally have better health. It may be of interest that divorce or separation occurred among 13 percent of those who are now less satisfied but also among 16 percent of those who are now more satisfied.

Table 41. Changes That Affected Sexual Satisfaction During the Last 10 Years

* Caution: small sample size for those "more satisfied"

Q 16 What changes have affected your sexual life over the past 10 years?			
Those less satisfied (N=504)		Those more satisfied (N=141)*	
Change	Percent	Change	Percent
More stress	33%	Less stress	42%
Worse health for self	32%	Change in partners	29%
Worse health for partner	31%	More free time	27%
Weight gain	22%	Better health for self	24%
Worse financial situation	22%	Divorce/separation	16%
Retired or spouse/partner retired	13%	Weight loss	16%
Divorce/separation	13%	More stress	14%
Death of partner	12%	Better financial situation	15%
Change in partners	11%	Retired or spouse/partner retired	14%
More free time	9%	Children moved out	13%
Less stress	7%	Worse health for self	13%
Children moved out	6%	Weight gain	11%
Children moved back in	6%	Worse financial situation	11%
Better health for self	5%	Death of spouse/partner	10%
Better financial situation	4%	Better health for partner	10%
Age/got older	4%	Sexual drugs	7%
Weight loss	3%	Worse health for partner	6%
Change in sexual orientation	3%	Children moved back in	5%
No partner	2%	Change in sexual orientation	4%
Better health for partner	2%	Sex therapy	2%
Lost interest	2%	No partner	2%
More medications	2%	Got older	2%

What would improve current sexual satisfaction? Better health and less stress top the list of changes that would improve current sexual satisfaction, and this is true for both men and women. Men are, however, more likely to cite a number of changes that would be helpful—and are nearly twice as likely as women to say better personal health would improve sexual satisfaction. Men are also more likely to cite a better financial situation as a helpful improvement, along with having their partner initiate sex more often, a more adventurous partner, and a younger partner. Women, on the other hand, are nearly twice as likely as men to say that no change is needed (30 percent vs. 17 percent).

Table 42. Changes That Would Increase Current Sexual Satisfaction

Q. 17. What changes, if any, would increase your satisfaction with your sex life now?	Changes Needed		
	Total N=1112	Male N=525	Female N=587
	Percent	Percent	Percent
Better health for myself	28%	37%	20%
Less stress	24%	27%	22%
Better health for partner	22%	23%	22%
Better financial situation	20%	26%	14%
Finding a partner	20%	20%	20%
Partner initiates sex more often	20%	29%	12%
Better relationship with my partner	15%	14%	15%
More free time	14%	17%	11%
A more adventurous partner	10%	15%	5%
More favorable social attitudes	9%	11%	7%
Younger partner	8%	12%	4%
More privacy	7%	7%	7%
Different partner	6%	7%	6%
More partners	4%	7%	1%
Older partner	1%	1%	1%
No change needed	24%	17%	30%

2009 AARP Sexuality Survey

A few verbatims on the above:

- Hubby thinks old people do not have sex.
- Husband getting libido back.
- I do not have sex because I am a Catholic widow!
- Be able to go back to work and better self esteem.
- Better body.
- Less pain during intercourse, no back pain.

VII. Differences by Ethnicity: Hispanic Americans vs. General Age-45+ Population

Hispanics in this age group demonstrate a decidedly more positive outlook on life as compared with the general 45+ population – both currently, and in terms of expectations for the future. This optimistic outlook persists in the face of lower overall health ratings (self-reported), and the fact that they are more likely than others to report diagnoses of diabetes and depression.

Sexuality is a higher priority for 45+ Hispanics than for the 45+ population at large, and they report higher levels of sexual activity and satisfaction. This is all despite the fact that they report lower overall health, and are just as likely as the rest of the population to say their sexual satisfaction is worse now than it was 10 years ago.

A. Quality of Life

Table 43. Top Three Steps of the Ladder of Life by Ethnicity

	General Population	Hispanics
<i>Total Respondents Answering:</i>	1,016	596
Present time	46%	59%
Five years ago	50%	53%
Five years into future	57%	68%

2009 AARP Sexuality Survey

Hispanics have a more positive view of their current quality of life than the general 45+ population, both now and looking into the future.

The factors important to a high quality of life are very similar among Hispanics and the general population, with the following exceptions.

- ◆ A satisfying sexual relationship is significantly more important for Hispanics (83%) than for the general population (72%).
- ◆ Spiritual wellbeing is also slightly more important for Hispanics (95%) as compared to the general population (88%).

B. Health Assessment and Medical Conditions

Table 44. Overall Health Self-Assessment by Ethnicity

	General Population	Hispanic
<i>Total Respondents Answering:</i>	1,106	626
Excellent/Very Good	40%	32%
Excellent	7%	6%
Very good	33%	26%
Good	38%	43%
Poor/Fair	22%	24%
Fair	18%	14%
Poor	3%	10%

2009 AARP Sexuality Survey

Hispanics are less likely to rate their personal health as very good than is the general 45+ population.

The incidence of high cholesterol, back problems, arthritis/rheumatism, and erectile dysfunction are very similar among Hispanics and the general 45+ population.

Hispanics currently report lower incidences of high blood pressure than does the rest of the population, but higher incidences of diabetes and depression.

Table 45. Medical Conditions Diagnosed by Ethnicity

	General Population	Hispanics
<i>Total respondents:</i>	1,112	624
High blood pressure	44%	32%
High cholesterol	42%	40%
Back problems	36%	30%
Arthritis or rheumatism	32%	24%
Diabetes	16%	22%
Depression	16%	21%
Drug/alcohol abuse	4%	1%
Genital pain	3%	2%
Men		
Erectile dysfunction Impotence	23%	21%
Enlarged/swollen prostate	18%	13%
Prostate cancer	5%	1%
Women		
Breast cancer	5%	3%
Cervical cancer	2%	4%
Ovarian cancer	1%	1%

2009 AARP Sexuality Survey

Table 46. Selected Prescription Medications Taken in Past Six Months by Ethnicity

	General Population	Hispanics
Total respondents:	1,112	624
Blood pressure pills	43%	33%
Medication for cholesterol	36%	27%
Pain killers	39%	36%
Pills or other medication to thin blood	17%	12%
Anything for heart incl. pills, paste patches	12%	8%
Insulin or pills for sugar in blood	12%	18%
Thyroid pills	12%	8%
Medications for depression	13%	17%
Sleeping pills or other medications for sleep	16%	19%
Medications for a nervous condition	7%	11%
Medications to improve sexual functioning	5%	5%
Any androgens, testoderm, or bromocriptine	1%	2%
Hormone creams, suppositories	4%	9%
Hormone pills - estrogen, progesterone	9%	5%
Estrogen patch	1%	1%

2009 AARP Sexuality Survey

Hispanics are less likely to report using blood pressure medication and cholesterol medication than is the general population—though they are just as likely as the rest of the population to report being diagnosed with high cholesterol. In fact, there is a 13 point gap between diagnosis and medication for cholesterol among Hispanics.

C. Sex Attitudes

Table 47. Sexual Attitudes by Ethnicity

	General Population	Hispanics
Total Respondents Answering:	1,112	630
Percent Agree/strongly agree		
Sexual activity is a critical part of a good relationship	58%	68%
There is too much emphasis on sex in our culture today	65%	59%
Sexual activity is important to my overall quality of life	42%	44%
Sexual activity is a pleasurable, but not necessary, part of a good relationship	45%	45%
Sexual activity is a duty to one's spouse/partner	33%	43%
Sex becomes less important to people as they age	49%	42%
People should not have a sexual relationship if they are not married	22%	22%
Sex is primarily for procreation	8%	15%
I do not particularly enjoy sex	7%	13%
I would be quite happy never having sex again	13%	11%
Sex is only for younger people	4%	3%

2009 AARP Sexuality Survey

Hispanics are more likely to see sex as a critical part of a good relationship, and as important to quality of life, than the general 45+ population – and correspondingly, less likely to think there is too much emphasis on sex in our culture today.

Hispanics are also more likely than the general 45+ population to see sexual activity as a duty to ones spouse or partner, and as primarily for procreation.

Hispanics are similar to the rest of the 45+ population when it comes to acceptance of sex among those who are not married – just 22 percent of each group holds that people should not do that.

D. Partners and Relationships

Hispanics are only slightly more likely than the general 45+ population to say they have (or have had recently) a sexual partner - 71 percent vs. 66 percent. They report similar levels of same sex partners as the general population, and their descriptions of their partners are very similar to those of the general population.

Two percent say they are gay, under a half a percent lesbian, and 1 percent bisexual. Yet when asked about their primary sexual partners, six percent of males report having a male partner (compared to 8 percent in the general population), and a little over 2 percent of females report having a female partner (similar to 2 percent of females in the general population). Five percent report having more than one partner, compared to 3 percent of the general population.

Hispanics seem to be more romantic than the population at large, though, and to find their relationships more satisfying both emotionally and physically – so perhaps that helps to explain their higher sexual satisfaction. To keep romance in their relationships, Hispanics with partners are significantly more likely than their counterparts in the general 45+ population to say they bring each other presents regularly (35 percent vs. 26 percent) and set aside at least one day or evening a week to just enjoy each other's company (36 percent vs. 26 percent). Like the rest of the population, the most common way Hispanics keep romance in a relationship is making it a point to say "I love you" (60 percent vs. 58 percent in the general population).

When asked if they have done any of the things mentioned above recently (based on those saying they do them regularly), 60 percent of Hispanics said they had taken a vacation or romantic weekend in the last one year (vs. 53 percent for the general population). Hispanics were less likely to say that they spent a day or evening together in the last week (55 percent vs. 63 percent) or surprised their spouse or partner with a present or flowers in the past month (21 percent vs. 33 percent) as compared to the general population.

Hispanics are more likely to say that their relationship is extremely/very pleasurable (58%), extremely/very emotionally satisfying (63%), and emotionally satisfying for their partners (71%) as compared to the general population (51%, 53% and 64%, respectively).

There are few significant differences in reported partner attributes between Hispanics and the general 45+ population. The biggest exception is that Hispanics are 10 points more likely than the general 45+ population to say their partner "is sensitive to my moods and needs."

Table 48. Partner Attributes by Ethnicity

	General Population	Hispanics
Those With a Regular Sex Partner Answering	752	449
<i>Percent Strongly Applies</i>		
Loves me deeply	64%	64%
Is my best friend	63%	60%
Is kind and gentle	62%	58%
Makes me feel important	57%	57%
Is physically attractive	53%	45%
Finds me physically attractive	55%	55%
Is sensitive to my moods and needs	39%	49%
Is romantic	37%	43%
Is exciting	33%	38%
Is a skillful lover	38%	41%
Is imaginative about sex	29%	33%

2009 AARP Sexuality Survey

E. Sex Behaviors

One in five Hispanics (20 percent) report having sexual fantasies, thoughts, or erotic dreams once or more a day, close to the 25 percent of the general 45+ population who report a like frequency of such thoughts. Like the general population, Hispanic men are much more likely to have frequent sexual thoughts than women – though the gap (30 percent for men to 11 percent for women) is not as wide as in the general population (45 percent for men vs. 8 percent for women).

Hispanics are substantially more likely than their general population counterparts to report engaging in sexual intercourse at least once a week. Four in 10 Hispanics surveyed (39 percent) say they have sexual intercourse at least once a week or more, including 54 percent of those who have sexual partners. Among the general 45+ population, just 28 percent reported weekly sexual intercourse, including 41 percent of those with sexual partners.

Hispanics are equally likely as the general population to report sexual liaisons outside their regular relationships. Seventeen percent said they have had a sexual relationship with another partner while in a current relationship and 15 percent said that their current partner has had a sexual relationship with someone else.

However, they are more likely than the general population to say that a sexual relationship with another partner had no effect on their current relationship (60% vs. 49%) and that their current relationship is stronger than ever (26% vs. 13%). They are less likely to say that infidelity caused tension, but the relationship survived intact (9%) than the general population (26%).

In the case of infidelity of a spouse or partner of the survey respondent, Hispanics are again more likely to say that the affair had no effect on their relationship (39% vs. 33%) and less likely to say that the infidelity caused tension, but the relationship survived intact (24% vs. 35%) than the general population.

F. Satisfaction with Sex Life and Relationship

Table 49. Satisfaction With Sex Life by Ethnicity

	General Population	Hispanic
<i>Those Respondents Answering:</i>	1,092	623
Extremely/somewhat satisfied	43%	57%
Extremely satisfied	18%	26%
Somewhat satisfied	25%	31%
Neither satisfied nor dissatisfied	35%	28%
Extremely/somewhat dissatisfied	22%	16%
Somewhat dissatisfied	15%	10%
Extremely dissatisfied	7%	6%

2009 AARP Sexuality Survey

Hispanics are significantly more satisfied with their sexual lives than the population as a whole, and do not show the decline in satisfaction that is shown by the general 45+ population.

Nevertheless, more than four in 10 (43 percent) of Hispanics said their satisfaction is lower now than 10 years ago, similar to the 46 percent of the general sample who gave that report. And very similar reasons were cited: increased stress (41 percent), a worse financial situation (33 percent), worse personal health (29 percent), worse partner health (22 percent), weight gain (27 percent), and divorce or separation (23 percent).

When it comes to improving their current sexual satisfaction, the same factors come to the top of the list for Hispanics as for everyone else – health, stress, and finances. However, Hispanics are even more likely than the general 45+ population to cite better personal health, less stress, a better financial situation, and more favorable social attitudes as the keys to improving their current sexual satisfaction.

Table 50. Changes That Would Increase Satisfaction With Sex Life by Ethnicity

	General population	Hispanic
<i>Total Respondents:</i>	1,112	630
Better health for myself	28%	38%
Less stress	24%	34%
Better financial situation	20%	31%
Better health for partner	22%	25%
Partner initiates sex more often	20%	22%
Finding a partner	20%	20%
Better relationship with partner	15%	21%
More adventurous partner	10%	10%
Younger partner	8%	10%
Different partner	6%	6%
More partners	4%	2%
Older partner	1%	1%
More free time	14%	19%
More favorable social attitudes toward aging and sexuality	9%	18%
More privacy	7%	13%
No change needed	24%	19%

2009 AARP Sexuality Survey

Table 51. Perception of Partner's Satisfaction With Sexual Relationship by Ethnicity

	General Population	Hispanic
<i>Those With a Regular Sex Partner Answering:</i>	752	449
Extremely/very satisfied	64%	73%
Extremely satisfied	31%	33%
Somewhat satisfied	33%	39%
Neither satisfied nor dissatisfied	21%	13%
Extremely/somewhat dissatisfied	16%	14%
Somewhat dissatisfied	10%	10%
Extremely dissatisfied	6%	4%

2009 AARP Sexuality Survey

Hispanics are more likely than the general population to say their partner is extremely satisfied with their relationship.

Appendix A: Additional Project Information

ADDITIONAL PROJECT INFORMATION

Objective

AARP is using the results of this research to broaden public knowledge on the topic of midlife and older adult sexuality.

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Project Statement

On behalf of AARP, Knowledge Networks conducted a survey about human sexuality. The survey covered topics such as quality of life, overall health, sexual history, sexual behavior, and attitude toward sexuality. People who are at least 45 years old were invited to participate in the survey. The survey was administered in both English and Spanish.

The survey underwent two stages:

- **Pretest:** A total of 50 Knowledge Networks panelists aged 45 and older were invited to participate in the English pretest between August 17, 2009 and August 19, 2009. An additional 50 Knowledge Networks panelists aged 45 and older were invited to participate in the Spanish pretest between September 1, 2009 and September 4, 2009. The primary goals of the pretest were to ensure the correct survey functionality and estimate the questionnaire length.
- **Main:** A total of 2,072 Knowledge Networks panelists aged 45 and older were invited to participate in the English main survey on August 21, 2009. The Spanish main survey was launched on September 4, 2009 to 377 panelists aged 45 and older. By September 14, 2009, 1,487 panelists (71.8 percent) had completed the survey in English and 183 panelists (48.5 percent) had completed the survey in Spanish. The following table displays the number of completes for the English and Spanish versions of the survey.

Table 1. Survey Completion Rates

	Invited	Completed	Completion Rates
English	2072	1487	72%
Spanish	377	183	49%
Total	2449	1670	68%

Knowledge Networks Methodology

Introduction

Knowledge Networks has recruited the first online research panel that is representative of the entire U.S. population. Panel members are randomly recruited by probability-based sampling, and households are provided with access to the Internet and hardware if needed.

Knowledge Networks selects households using random-digit dial (RDD) and address-based sampling methods. Once a person is recruited to the panel, they can be contacted by e-mail (instead of by phone or mail). This permits surveys to be fielded very quickly and economically. In addition, this approach reduces the burden placed on respondents, since e-mail notification is less obtrusive than telephone calls, and most respondents find answering Web questionnaires to be more interesting and engaging than being questioned by a telephone interviewer.

Panel Recruitment Methodology

Beginning recruitment in 1999, Knowledge Networks (KN) established the first online research panel (now called KnowledgePanel[®]) based on probability sampling that covers both the online and offline populations in the U.S. The panel members are randomly recruited by telephone and by self-administered mail and web surveys. Households are provided with access to the Internet and hardware if needed. Unlike other Internet research that covers only individuals with Internet access who volunteer for research, Knowledge Networks surveys are based on a dual sampling frame that includes both listed and unlisted phone numbers, telephone and non-telephone households, and cell-phone-only households. The panel is not limited to current Web users or computer owners. All potential panelists are randomly selected to join the KnowledgePanel; unselected volunteers are not able to join.

RDD and ABS Sample Frames

Knowledge Networks initially selects households using random digit dialing (RDD) sampling and address-based sampling (ABS) methodology. In this section, we will describe the RDD-based methodology, while the ABS methodology is described in a separate section below.

KnowledgePanel recruitment methodology uses the quality standards established by selected RDD surveys conducted for the Federal Government (such as the CDC-sponsored National Immunization Survey).

Knowledge Networks utilizes list-assisted RDD sampling techniques based on a sample frame of the U.S. residential landline telephone universe. For efficiency purposes, Knowledge Networks excludes only those banks of telephone numbers (a bank consists of 100 numbers) that have less than 2 directory listings. Additionally, an "over sample" is conducted among a stratum telephone exchanges that have high concentrations of African-American and Hispanic households based on Census data. Note that recruitment sampling is done without replacement, thus, numbers already fielded are not fielded again.

A telephone number for which a valid postal address can be matched occurs in about 70 percent of the sample. These address-matched cases are all mailed an advance letter informing them that they have been selected to participate in KnowledgePanel. For efficiency purposes, the unmatched numbers are under-sampled at a current rate of 0.75 relative to the matched numbers. Both the over sampling mentioned above and this under-sampling of non-address households are adjusted appropriately in the panel's weighting procedures.

Following the mailings, the telephone recruitment begins for all sampled phone numbers using trained interviewer/recruiters. Cases sent to telephone interviewers are dialed for up to 90 days, with at least 14 dial attempts on cases where no one answers the phone, and on numbers known to be associated with households. Extensive refusal conversion is also performed. The recruitment interview, about 10 minutes long, begins with informing the household member that they have been selected to join

KnowledgePanel. If the household does not have a computer and access to the Internet, they are told that in return for completing a short survey weekly, they will be provided with a laptop computer (previously a WebTV device was provided) and free monthly Internet access. All members in a household are then enumerated, and some initial demographic and background information on prior computer and Internet use are collected.

Households that inform interviewers that they have a home computer and Internet access are asked to take their surveys using their own equipment and Internet connection. Incentive points per survey, redeemable for cash, are given to these “PC” respondents for completing their surveys. Panel members who were provided with either a WebTV earlier or currently a laptop computer (both with free Internet access) do not participate in this per survey points incentive program. However, all panel members do receive special incentive points for select surveys to improve response rates and for all longer surveys as a modest compensation for burden.

For those panel members receiving a laptop computer (as with the former WebTV), prior to shipment, each unit is custom configured with individual e-mail accounts, so that it is ready for immediate use by the household. Most households are able to install the hardware without additional assistance, though Knowledge Networks maintains a telephone technical support line. The Knowledge Networks Call Center contacts household members who do not respond to e-mail and attempts to restore both contact and cooperation. PC panel members provide their own e-mail addresses and we send their weekly surveys to that e-mail account.

All new panel members are sent an initial survey to both welcome them as new panel members but also to familiarize them with how online survey questionnaires work. They also complete a separate profile survey that collects essential demographic information such as gender, age, race, income, and education to create a personal member profile. This information can be used to determine eligibility for specific studies, is used for weighting purposes, and operationally need not be gathered with each and every survey. This information is updated annually with each panel member. Once completed new member is “profiled,” they are designated as “active” and ready to be sampled for client studies. [Note: Parental or legal guardian consent is also collected for conducting surveys with teenage panel members, ages 13-17.]

Once a household is contacted by phone—and additional household members recruited via their e-mail addresses—panel members are sent surveys linked through a personalized e-mail invitation (instead of by phone or mail). This permits surveys to be fielded quickly and economically and also facilitates longitudinal research. In addition, this approach reduces the burden placed on respondents, since e-mail notification is less obtrusive than telephone calls and allows research subjects to participate in research when it is convenient for them.

Address-Based Sampling (ABS) Methodology

When KN started KnowledgePanel panel recruitment in 1999, the state of the art in the industry was that probability-based sampling could be cost effectively carried out using a national random-digit dial (RDD) sample frame. The RDD landline frame at the time allowed access to 96 percent of the U.S. population. This is no longer the case. We introduced the ABS sample frame to rise to the well-chronicled changes in society and telephony in recent years. The following changes have reduced the long-term scientific viability of the landline RDD sampling methodology: declining respondent cooperation to telephone surveys; do not call lists; call screening, caller-ID devices and answering machines; dilution of the RDD sample frame as measured by the working telephone number rate; and finally, the emergence and exclusion of cell-phone-only households (CPOHH) because they have no landline phone.

According to the Center for Disease Control, approximately 25 percent of U.S. households cannot be contacted through RDD sampling: 22 percent as a result of CPOHH status and 3 percent because they have no phone service whatsoever. Among some segments of society, the sample non-coverage is substantial: more than one-third of young adults, ages 18-24, reside in CPOHHs.

After conducting an extensive pilot project in 2008, we made the decision to add an address-based sample (ABS) frame in response to the growing number of cell-phone-only households that are

outside of the RDD frame. Before conducting the ABS pilot, we also experimented with supplementing our RDD samples with cell-phone samples. However, this approach was not cost effective for you our clients and raised a number of other operational, data quality, and liability issues (e.g., calling people's cell phones while they were driving).

The key advantage of the ABS sample frame is that it allows sampling of almost all U.S. households. An estimated 98 percent of households are "covered" in sampling nomenclature. Regardless of household telephone status, they can be reached and contacted via the mail. Second, our ABS pilot project revealed some other advantages beyond the expected improvement in recruiting adult from CPOHHs:

- Improved sample representation of minority racial and ethnic groups [IS THIS CHANGE O.K.??]
- Improved inclusion of lower educated and low-income households
- Exclusive inclusion of CPOHHs that have neither a landline telephone nor Internet access (approximately 4 percent to 6 percent of U.S. households).

ABS involves probability-based sampling of addresses from the U.S. Postal Service's Delivery Sequence File. Randomly sampled addresses are invited to join KnowledgePanel through a series of mailings and in some cases telephone follow-up calls to non-responders when a telephone number can be matched to the sampled address. Invited households can join the panel by one of several means:

- By completing and mailing back a paper form in a postage-paid envelope
- By calling a toll-free hotline maintained by Knowledge Networks
- By going to a designated KN web-site and completing an online recruitment form

After initially accepting the invitation to join the panel, respondents are then "profiled" online answering key demographic questions about themselves. This profile is maintained using the same procedures established for the RDD-recruited research subjects. Respondents not having an Internet connection are provided a laptop computer and free Internet service. Respondents sampled from ABS frame, like those from the RDD frame are provided the same privacy terms and confidentiality protections that we have developed over the years and have been reviewed by dozens of Institutional Review Boards.

Large-scale ABS sampling for our KnowledgePanel recruitment began in April, 2009. As a result, KnowledgePanel will be improving its sample coverage of CPOHHs and young adults.

Because we will have recruited panelists from two different sample frames – RDD and ABS – we are taking several technical steps to merge samples sourced from these frames. Our approach preserves the representative structure of the overall panel for the selection of individual client study samples. An advantage of mixing ABS frame panel members in any KnowledgePanel sample is a reduction in the variance of the weights. ABS-sourced sample tends to align more true to the overall population demographic distributions and thus the associated adjustment weights are somewhat more uniform and less varied. This variance reduction efficaciously attenuates the sample's design effect and confirms a real advantage for study samples drawn from KnowledgePanel with its dual frame construction.

Sampling and Recruitment Procedures for KnowledgePanel LatinoSM

In addition to the above-documented English-based panel recruitment, in 2008 we constructed KnowledgePanel LatinoSM to provide researchers a capability to conduct representative online surveys with U.S. Hispanic community. Prior to the advent of KnowledgePanel Latino, there did not exist in the U.S. an online panel that represents both the Internet and non-Internet Hispanics, and that was representative of that part of the U.S. population able to participate in Spanish-only surveys. The sample for the KnowledgePanel Latino is recruited by a hybrid telephone recruitment design, based on a random-digit dialing sample of U.S. Latinos and Hispanic-surname sample. It is a geographically

balanced sample that covers areas that, when aggregated, encompasses approximately 93 percent of the nation's 45.5 million Latinos.

In addition to the national sample of Latinos that are recruited by RDD, we over sample Latinos residing in 70 U.S. DMAs that have relatively large Latino populations. We take this step to increase the sample size of Latinos that are less assimilated or so-called "unassimilated." The DMA-over-sampling approach is dedicated to the recruitment of Spanish-Language-Dominant adults that are categorized as "unassimilated" on the basis of Hispanic self-identification, Spanish-language TV viewing frequency, and primary spoken language. The 70 DMAs are grouped into 5 regions (Northeast, West, Midwest, Southeast, and Southwest). Each region is further divided into two groupings of census tracts, those that have a "high-density" Latino population and the balance made up of all the "low-density" census tracts. The threshold percent for "high density" varies by region. The 5 regions each divided into 2 density groups constitute 10 unique sample frames (5 x 2).

Using a geographic targeting approach, an RDD landline sample is generated to cover the high-density census tracts within each region. Due to the inaccuracy of telephone exchange coverage, there is some spillage outside these tracts and some smaller degree of non-coverage within these tracts. About 32 percent of the Latino population across these five regions is theoretically covered with this targeted RDD landline sample. All the numbers generated are screened to locate a Latino household.

The remaining 68 percent of the Latinos in these five regions are addressed with a listed-surname sample. Listed surnames only include households where the telephone subscriber has a surname that has been pre-identified to likely be a Latino name. It is important to note that excluded from this low-density listed sample frame are: a) the mixed Latino/non-Latino households where the subscriber does not have a Latino surname, and b) all the unlisted landline Latino households. The percent of listed vs. unlisted varies at the DMA level. The use of the listed surname is intended to utilize cost effective screening to locate a Latino household in these low-density areas since the rate of finding a Latino household from this list although not 100 percent is still very high. KN's current composition of KnowledgePanel Latino members is 57 percent from the National RDD frame, 11 percent from the high-density Latino RDD frame and 32 percent from the low-density Latino Listed Surname frame.

Survey Administration

For client surveys, samples are drawn at random from among active panel members. Depending on the study, eligibility criteria will be applied or in-field screening of the sample will be carried out. Sample sizes can range widely depending on the objectives and design of the study.

Once assigned to a survey, members receive a notification e-mail letting them know there is a new survey available for them to take. This e-mail notification contains a link that sends them to the survey questionnaire. No login name or password is required. The field period depends on the client's needs, and can range anywhere from a few hours to several weeks.

After three days, automatic e-mail reminders are sent to all non-responding panel members in the sample. If e-mail reminders do not generate a sufficient response, an automated telephone reminder call may be initiated. The usual protocol is to wait at least three or four days after the e-mail reminder before calling. To assist panel members with their survey taking, each individual has a personalized "home page" that lists all the surveys that were assigned to that member and have yet to be completed.

Knowledge Networks also operates an ongoing, modest, incentive program to encourage participation and create member loyalty. Members can enter special raffles or can be entered into special sweepstakes with both cash and other prizes to be won.

The typical survey commitment for panel members is one survey per week or four per month with a duration of 10-15 minutes per survey. Some client surveys exceed this time and in the case of longer surveys an additional incentive may be provided.

Survey Sampling from KnowledgePanel

Once Panel Members are recruited and profiled, they become eligible for selection for specific client surveys. In most cases, the specific survey sample represents a simple random sample from the panel, for example, a general population survey. Customized stratified random sampling based on profile data may also be conducted as required by the study design.

The general sampling rule is to assign no more than one survey per week to members. Allowing for rare weekly exceptions, this limits a member's total assignments per month to 4 or 6 surveys. In certain cases, a survey sample calls for pre-screening, that is, members are drawn from a sub-sample of the panel (such as, females, Republicans, grocery shoppers, etc.). In such cases, care is taken to ensure that all subsequent survey samples drawn that week are selected in such a way as to result in a sample that remains representative of the panel distributions.

For this survey, a total of 2,449 panelists aged 45 and older were selected. In the end, 1,670 respondents completed the full survey.

Sample Weighting

The design for a KnowledgePanel® sample begins as an equal probability sample that is self-weighting with several enhancements incorporated to improve efficiency. Since any alteration in the selection process is a deviation from a pure equal probability sample design, statistical weighting adjustments are made to the data to offset known selection deviations. These adjustments are incorporated in the sample's **base weight**.

There are also several sources of survey error that are an inherent part of any survey process, such as non-coverage and non-response due to panel recruitment methods and to inevitable panel attrition. We address these sources of sampling and non-sampling error using a **panel demographic post-stratification weight** as an additional adjustment.

However, prior to this adjustment, a separate sample of Spanish-speaking Latino panel members are weighted so as to be merged into the overall panel. This language-specific group is recruited through a geographically targeted dual frame sample that is screened for Spanish-language dominant households. The weighting of this unique sample involves a **Spanish language base weight** that incorporates several adjustments including ones that address geographic frame and home language usage. The panel demographic post-stratification weight is then calculated for all panel members and proportionally adjusts for the merged Spanish-speakers.

Lastly, a set of **study-specific post-stratification weights** are constructed for the study data to adjust for the study's sample design and survey non-response.

A description of these types of weights follows.

The Base Weight

In a KnowledgePanel sample there are seven known sources of deviation from an equal probability of selection design. These are corrected in the Base Weight and are described below.

1. Under-sampling of telephone numbers unmatched to a valid mailing address

An address match is attempted on all the Random Digit Dial (RDD) generated telephone numbers in the sample after the sample has been purged of business and institutional numbers and screened for non-working numbers. The success rate for address matching is in the 60-70 percent range. The telephone numbers with valid addresses are sent an advance letter, notifying the household that they will be contacted by phone to join KnowledgePanel. The remaining, unmatched numbers are under-sampled as a recruitment efficiency strategy. Advance letters improve recruitment success rates. Under-sampling

stopped between July 2005 and April 2007. It was resumed in May 2007 with a sampling rate of 0.75.

2. RDD selection proportional to the number of telephone landlines reaching the household

As part of the field data collection operation, information is collected on the number of separate telephone landlines in each selected household. A multiple line household's selection probability is down weighted by the inverse of its number of landlines.

3. Some minor over sampling of Chicago and Los Angeles due to early pilot surveys

Two pilot surveys carried out in Chicago and Los Angeles when the panel was first being built increased the relative size of the sample from these two cities. With natural attrition and growth in size, the impact is disappearing over time. It remains part of our base adjustment weighting because of a small number of extant panel members from that nascent panel cohort.

4. Early over sampling the four largest states and central region states

At the time when the panel was first being built, survey demand in the four largest states (California, New York, Florida, and Texas) required over-sampling during January-October 2000. Similarly, the central region states were over-sampled for a brief period. These now diminishing effects still remain in the panel membership and thus require weighting adjustments for these geographic areas.

5. Under-sampling of households not covered by the MSN[®] TV service network

Certain small areas of the U.S. are not serviced by MSN[®]; therefore, our MSN[®]TV units cannot be used for recruited non-Internet households. In some of these cases, we use other Internet Service Providers for Internet access via the member's personal computer. Overall, the result is a small under-sample of these geographic areas thus requiring a minor weighting adjustment.

6. Over sampling of African- American and Hispanic telephone exchanges

As of October 2001, we began over-sampling telephone exchanges with a higher density of minority households (specifically African American and Hispanic) to increase panel membership for those groups. These exchanges are over sampled at approximately twice the rate of other exchanges. This over-sampling is corrected in the base weight.

7. Address-based sample phone match adjustment

Towards the end of 2008, Knowledge Networks began recruiting panel members using an address-based sample (ABS) frame in addition to RDD recruitment. Once recruitment through the mail, including follow-up mailings to ABS non-respondents was completed, a telephone recruitment was added. Non-responding ABS households where a landline telephone number could be matched to an address were subsequently called and a telephone recruitment initiated. This effort resulted in a slight overall disproportionate number of landline households being recruited in a given ABS sample. A base weight adjustment is applied to return the ABS recruitment panel members to the sample's correct national proportion of phone-match and no phone match households.

The Spanish Language Base Weight

In 2008, as an augmentation to KnowledgePanel, Spanish language-specific panel members had been recruited through a geographically targeted dual frame sample that is screened for Spanish-language dominant households. Generally these are households that speak Spanish and also who did the recruitment interview in Spanish. Eleven geographic regions covering approximately 95

percent of the national Latino population was screened. Each region had both high and low density Hispanic population areas. High density areas were screened using RDD methods and low density areas screened using Hispanic surname listed samples. Three adjustments are incorporated in the Spanish language base weight.

1. Household selection proportional to the number of telephone landlines reaching the household

As part of the field data collection operation, information is collected on the number of separate telephone landlines in each eligible (Spanish-speaking) household. A multiple line household's selection probability is down weighted by the inverse of its number of landlines.

2. Geographic frame balancing for RDD and listed surname samples

The recruitment sample frame has a given proportional distribution across 11 regions each consisting of both a high and low Hispanic population density area (ranging from 0.3 percent density to 13.9 percent; average = 4.6 percent). This adjustment factor returns the recruited households by area to their correct relative proportion across the 22 geographic density areas.

3. Distribution of degree of Spanish language spoken at home by Census Regions

Eligible households to be recruited are screened to qualify for one of three levels of Spanish language usage at home: All Spanish, Mostly Spanish, and Spanish and English Equally. Using data from the 2006 Pew Hispanic Center surveys as a benchmark, the recruited members are proportioned across these three levels within U.S. Census Region based on their reported language usage at the time of recruitment.

The Panel Demographic Post-Stratification Weight

To reduce the effects of any non-response and non-coverage bias in the overall panel membership, a post-stratification adjustment is applied using demographic distributions from the most recent data from the Current Population Survey (CPS) and for Hispanic language usage from the 2006 Pew Hispanic Center Survey. Language usage adjustments allow for the correct proportional fitting of Spanish-speaking members relative to other English-speaking Hispanic and non-Hispanic panel members. Benchmark distributions for Internet Access among the U.S. population of adults are obtained from KnowledgePanel recruitment data since this measurement is not collected as part of the CPS.

The post-stratification variables include:

- Gender (Male/Female)
- Age (18-29, 30-44, 45-59, and 60+)
- Race/Hispanic ethnicity (White/Non-Hispanic, Black/Non-Hispanic, Other/Non-Hispanic, 2+ Races/Non-Hispanic, Hispanic)
- Education (Less than High School, High School, Some College, Bachelor and beyond)
- Census Region (Northeast, Midwest, South, West)
- Metropolitan Area (Yes, No)
- Internet Access (Yes, No)

This weighting adjustment is applied prior to the selection of any client sample from KnowledgePanel. These weights constitute the starting weights for any client survey selected from the panel.

Study-Specific Post-Stratification Weights

Once all the study data are returned from the field, we proceeded with a post-stratification process to adjust for any survey non-response and also any non-coverage due to the study-specific sample design. Demographic and geographic distributions from the latest Current Population Survey (CPS) for the study population of people aged at least 45 years old as benchmarks in this adjustment. The Internet Access distributions are obtained from KnowledgePanel recruitment data.

Two sets of weights were computed for the study:

1. Weight for the general population sample. The latest CPS benchmarks for all U.S. population aged 45 or older were used as benchmarks. The raking variables include:
 - Age: 45-54, 55-64, 65-74, 75+
 - Gender: male, female
 - Race/ethnicity: white (non-Hispanic), black (non-Hispanic), other/2+races (non-Hispanic), Hispanic
 - Education: Less than high school, high school graduates, some college, college graduates
 - Region: Midwest, South
 - Metro, Non-metro
 - Household Internet access: yes, no
 - Language spoken at home: Non-Hispanic; Hispanic, Speak Spanish Only/Mostly Spanish; Hispanic, Speak Spanish Equally with English at home; Hispanic, Speak English Only/Mostly at home

2. Weight for all Hispanics. The latest CPS benchmarks for the Hispanic population aged 45 and older were used as the benchmarks. The raking variables include:
 - Age: 45-54, 55-64, 65-74, 75+
 - Gender: male, female
 - Education: Less than high school, high school graduates, some college, college graduates
 - Region: Midwest, South
 - Metro, Non-metro
 - Household Internet access: yes, no
 - Language spoken at home: Only Spanish, More Spanish than English, Both Spanish and English equally, More English than Spanish, Only English

Comparable distributions are calculated using all completed cases from the field data. Since study sample sizes are typically too small to accommodate a complete cross-tabulation of all the survey variables with the benchmark variables, an iterative proportional fitting is used for the post-stratification weighting adjustment. This procedure adjusts the sample data back to the selected benchmark proportions. Through an iterative convergence process, the weighted sample data are optimally fitted to the marginal distributions.

After this final post-stratification adjustment, the distribution of the calculated weights are examined to identify and, if necessary, trim outliers at the extreme upper and lower tails of the weight distribution. The post-stratified and trimmed weights are then scaled to the sum of the sample size of all respondents in the general population sample as well as all Hispanics.

Appendix B: Frequency of Six Sexual Activities by Gender and Age

Table 52. Sexual Frequency by Age by Gender

Q 52. During the past six months, how often, on average, have you engaged in the following sexual activities?			Gender									
			Male					Female				
			Age in decades				Total	Age in decades				Total
			Age 45-49	Age 50-59	Age 60-69	Age 70 +		Age 45-49	Age 50-59	Age 60-69	Age 70 +	
[Sexual intercourse]	Not at all	Col %	30.8%	27.6%	40.3%	59.8%	37.5%	42.3%	48.6%	54.8%	86.7%	58.2%
	Less than once a month	Col %	10.1%	9.5%	17.7%	18.5%	13.4%	19.8%	9.4%	12.9%	2.8%	10.3%
	Once or twice a month	Col %	9.1%	22.3%	17.6%	7.1%	16.1%	11.7%	10.3%	8.4%	5.7%	8.9%
	About once a week	Col %	20.8%	21.7%	13.6%	9.6%	17.2%	13.1%	15.3%	10.1%	3.5%	10.8%
	More than once a week	Col %	25.3%	17.9%	10.5%	5.0%	14.7%	11.1%	14.1%	10.3%	1.3%	9.7%
	Daily	Col %	3.9%	1.1%	.3%		1.1%	1.9%	2.3%	3.5%		2.1%
[Kissing or hugging]	Not at all	Col %	13.6%	15.1%	15.8%	27.0%	17.2%	25.7%	30.6%	38.6%	59.5%	38.8%
	Less than once a month	Col %	14.2%	5.6%	5.8%	6.8%	7.3%	4.3%	6.3%	4.9%	4.4%	5.2%
	Once or twice a month	Col %	4.8%	7.2%	9.7%	14.8%	8.8%	14.3%	7.0%	5.4%	3.6%	6.8%
	About once a week	Col %	4.3%	11.3%	8.1%	12.3%	9.5%	6.4%	6.8%	5.2%	7.8%	6.5%
	More than once a week	Col %	19.1%	27.6%	15.5%	11.3%	20.0%	16.0%	10.5%	10.6%	10.7%	11.4%
	Daily	Col %	44.0%	33.2%	45.2%	27.8%	37.1%	33.4%	38.9%	35.2%	13.9%	31.3%
[Sexual touching or caressing]	Not at all	Col %	18.4%	19.6%	21.4%	40.9%	23.8%	29.1%	41.8%	47.2%	75.9%	49.3%
	Less than once a month	Col %	12.9%	3.9%	13.3%	8.7%	8.7%	23.0%	9.0%	6.0%	6.8%	9.7%
	Once or twice a month	Col %	6.2%	13.6%	15.7%	18.1%	13.8%	7.8%	6.2%	5.8%	5.4%	6.2%
	About once a week	Col %	17.3%	14.6%	19.7%	6.3%	14.8%	6.7%	13.6%	10.7%	4.1%	9.6%
	More than once a week	Col %	24.3%	32.7%	16.6%	16.1%	24.1%	21.6%	18.0%	12.1%	3.7%	13.6%
	Daily	Col %	20.8%	15.5%	13.3%	10.0%	14.8%	11.8%	11.3%	18.1%	4.1%	11.6%
[Self stimulation]	Not at all	Col %	34.6%	28.8%	49.5%	53.5%	39.8%	49.5%	52.1%	63.3%	81.8%	61.7%
	Less than once a month	Col %	14.4%	10.1%	15.4%	17.7%	13.6%	14.1%	16.3%	18.0%	11.2%	15.3%
	Once or twice a month	Col %	9.5%	14.4%	10.9%	15.4%	12.9%	11.7%	14.9%	10.5%	6.0%	11.2%
	About once a week	Col %	9.9%	19.7%	11.7%	7.8%	13.8%	18.3%	7.0%	5.0%	1.0%	6.7%
	More than once a week	Col %	20.4%	22.1%	11.1%	4.0%	15.6%	4.9%	8.1%	1.4%		3.9%
	Daily	Col %	11.1%	4.9%	1.4%	1.6%	4.4%	1.6%	1.5%	1.8%		1.2%
[Oral sex]	Not at all	Col %	37.0%	44.0%	69.8%	83.2%	56.9%	51.4%	62.6%	75.4%	91.0%	71.0%
	Less than once a month	Col %	16.3%	4.3%	12.7%	8.4%	9.3%	23.5%	11.5%	7.4%	4.5%	10.5%
	Once or twice a month	Col %	12.8%	23.2%	6.4%	5.6%	13.8%	10.6%	9.4%	5.4%	1.3%	6.6%
	About once a week	Col %	17.0%	17.1%	5.1%	.9%	10.9%	7.8%	9.4%	6.9%	3.2%	7.0%
	More than once a week	Col %	13.8%	10.6%	6.0%	1.8%	8.3%	5.2%	6.3%	2.3%		3.6%
	Daily	Col %	3.1%	.8%			.8%	1.5%	.9%	2.6%		1.2%
[Anal sex]	Not at all	Col %	87.5%	77.1%	96.6%	98.6%	87.9%	92.0%	96.0%	94.9%	98.6%	95.7%
	Less than once a month	Col %	8.6%	10.2%	2.7%	.8%	6.2%	1.8%	1.8%	1.5%	1.4%	1.6%
	Once or twice a	Col %		3.9%		.6%	1.6%	4.5%	.6%	.3%		.9%

Q 52. During the past six months, how often, on average, have you engaged in the following sexual activities?		Gender									
		Male					Female				
		Age in decades				Total	Age in decades				Total
		Age 45-49	Age 50-59	Age 60-69	Age 70 +		Age 45-49	Age 50-59	Age 60-69	Age 70 +	
month											
About once a week	Col %	.9%	4.5%	.7%		2.1%	1.0%	.9%	.3%		.5%
More than once a week	Col %	3.0%	4.4%			2.2%	.8%	.6%	.5%		.5%
Daily	Col %							.2%	2.5%		.8%
Total	Unweighted Count	79	188	148	88	503	73	193	176	105	547

2009 AARP Sexuality Survey

Appendix C: Questionnaire

August, 2009

**[DISPLAY]
INTRO.**

You are part of a select group of people receiving this survey and your participation is very important. Again, let me reassure you that your responses will remain confidential.

Because of the intimate nature of this survey, please answer the questions in complete privacy.

Please don't share this information with anyone else in your household.

**[DISPLAY]
INTRO_A.**

In this survey, we will ask you questions about your sexuality. Some of the questions contain very explicit technical and medical terms that may make you feel uncomfortable. Please know that if you are uncomfortable answering any question, you may of course skip it, and you may stop participating at any time. Your participation is completely voluntary and anonymous. We do not ask for any identifying information, and NO personally identifiable information will be attached to any response.

We recognize that this is a very sensitive subject and we recommend that you please take the survey in a private setting. If you are interrupted during the survey, please press the "View" button on your WebTV keyboard to hide the survey. Pressing the "View" button again will return you to the survey screen. (If you are viewing this survey on your computer, you can quickly minimize your browser by clicking on the box with the one lower line in it that appears in the upper right hand corner of the program.)

Please give us your honest answers to the questions. Your responses will help doctors and researchers better understand people who have troubles in this area. Please know that this research can only be successful with your help. Again we appreciate your time and efforts.

[GRID, SP DOWN]

Q1.

LADDER OF LIFE: Below is a step ladder with 10 steps representing the "Ladder of Life." The top step of the ladder, or "10", represents the best possible life for you. The bottom step of the ladder, or "1", represents the worst possible life for you. On which of these 10 steps of the ladder do you feel you personally stand at the present time? What about five years ago? Where do you think you will stand five years from now?

	<u>Now</u>	<u>5 Years Ago</u>	<u>5 Years Into The Future</u>
Best possible life			
10			
9			
8			
7			
6			
5			
4			
3			
2			
1			
Worst possible life			

[GRIDS, SP]

Q2.

Listed below are some things that affect some people's quality of life. For each item below, please indicate how important it is to you personally with regard to your own quality of life.

How important to you is . . .

Not important at all Quite important Important Very important

- Being healthy, vigorous and physically active
- A good relationship with a spouse or partner
- Close ties with friends and family
- Financial security
- A satisfying sexual relationship
- Spiritual well-being
- Personal independence, not depending on others
- Being productive, contributing to your community and society

[SP]

Q3.

How would you rate your overall health at the present time?

- Excellent 1
- Very good. 2
- Good 3
- Fair..... 4
- Poor 5

[NUMBER BOX; RANGE 0-7]

Q4.

How many days in a typical week do you engage in vigorous exercise (such as running, jogging, aerobics, swimming or biking)?

___ # of days

[NUMBER BOX; RANGE 0-7]

Q5.

How many days in a typical week do you engage in moderate exercise (such as brisk walking, moderate biking or moderate swimming)?

___ # of days

[SP]

Q6.

Do you smoke cigarettes, cigarillos, a pipe or cigars or chew tobacco, and if so, how often per day?

- Do Not Smoke. 1
- 1-4 Day 2
- 5-9..... 3
- 10-14..... 4
- 15 +..... 5

[SP]

Q7.

Do you drink alcoholic beverages, and if so, how often do you do so?

- Do Not Drink Alcoholic Beverages. 1
- Less than 1 day/month. 2
- Less than 1 day/week. 3
- 1 - 2 days/week..... 4
- 3 - 4 days/week..... 5
- 5+ days/week..... 6

[GRIDS, SP]

Q8A.

Please indicate which of these medical conditions you have been diagnosed with.

Yes

No

Diabetes (high blood sugar)

High blood pressure

Arthritis or Rheumatism

Depression

[show if ppgender=1] Enlarged or Swollen Prostate

[show if ppgender=1] Prostate Cancer

[show if ppgender=1] Erectile Dysfunction

Back Problems

[show if ppgender=1] Impotence

High Cholesterol

Genital Pain

Drug/Alcohol Abuse

[show if ppgender=2] Breast Cancer

[show if ppgender=2] Cervical Cancer

[show if ppgender=2] Ovarian Cancer

[GRIDS, SP]

Q8B.

Please indicate for which of these medical conditions you are currently receiving treatment.

Yes

No

[SHOW RESPONSES FROM Q8A=YES]

[GRIDS, SP]

Q9.

There are several diseases or infections that can be transmitted during sex. These are sometimes called venereal diseases. We will be using the medical term *sexually transmitted diseases* or STDs

At any point in time, have you ever been told by a doctor that you had any of the following STDs?

Yes

No

Gonorrhea (clap drip)

Syphilis (bad blood)

Herpes (genital herpes)

Genital warts (venereal warts, human papilloma virus or HPV)

Hepatitis

AIDS, HIV

[show if ppgender=1] NGU (nongonococcal urethritis)

[show if ppgender=2] Vaginitis such as yeast infection or candidiasis, trich or trichomonias

[show if ppgender=2] Pelvis inflammatory disease (PID)

Other (please specify) _____

[NUMBER BOX GRIDS; RANGE 0 - PPAGE]

IF RESPONDENT SELECTED OTHER=YES IN Q9, BUT DID NOT TYPE THE ANSWER, INSERT "Other STD".

Q10.

At what age did you contract:

If you contracted the STD more than once, please report the most recent instance.

Age

Q9=YES RESPONSES

[SMALL TEXTBOX GRIDS]

IF RESPONDENT SELECTED OTHER=YES IN Q9, BUT DID NOT TYPE THE ANSWER, INSERT "Other STD".

Q11.

Please report (if you know) how you contracted:

If you contracted the STD more than once, please report the most recent instance.

Q9=YES RESPONSES

[SP]

Q12.

On a scale from 1 to 10, where 1 is “extremely low” and 10 is “extremely high,” please rate the overall stress level in your life today.

10 - Extremely high.....	10
9	9
8	8
7	7
6	6
5	5
4	4
3	3
2	2
1 – Extremely low	1

[GRIDS, SP; BREAK INTO 2 SCREENS:5/5]

Q13.

For each of the following statements, please indicate how much you agree or disagree.

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
-------------------	-------	-------------------------------------	----------	----------------------

Sexual activity is important to my overall quality of life
Sexual activity is a critical part of a good relationship
Sexual activity is a duty to one’s spouse/partner
Sexual activity is a pleasurable, but not necessary, part of a good relationship

Sex becomes less important to people as they age
I do not particularly enjoy sex
I would be quite happy never having sex again
Sex is only for younger people
People should not have a sexual relationship if they are not married

There is too much emphasis on sex in our culture today
Sex is primarily for procreation

[SP]

Q14.

How satisfied are you with your sex life?

Extremely satisfied.....	1
Somewhat satisfied.....	2
Neither satisfied nor dissatisfied	3
Somewhat dissatisfied	4
Extremely dissatisfied	5

[SP]
Q15.

Are you more satisfied, or less satisfied, with your sex life than you were 10 years ago?

- More.....1
- Less2
- No difference3

[ASK IF Q15=1 OR 2]

[MP]
Q16.

What changes have affected your sexual life over the past 10 years?

- Change in sexual orientation 1
- Death of partner2
- Divorce/separation.....3
- Change in partners4
- Better health for self.....5
- Better health for partner.....6
- Worse health for self.....7
- Worse health for partner8
- Improved financial situation9
- Worse financial situation.....10
- More free/leisure time11
- Less stress.....12
- More stress13
- Weight loss14
- Weight gain.....15
- Sexual therapy.....16
- Sexual drugs.....17
- Children moved out.....18
- Children moved back in19
- Retired/spouse or partner retired.....20
- Other (please specify).....21

[MP]

Q17.

What changes, if any, would increase satisfaction with your sex life now?

Better financial situation	1
Better health for myself	2
Better health for partner.....	3
Partner initiates sex more often	4
More free time	5
Better relationship with my partner	6
Different partner	7
Finding a partner	8
More privacy	9
More favorable social attitudes toward aging and sexuality	10
Less stress	11
A more adventurous partner	12
Younger partner	13
Older partner.....	14
More partners	15
Other (please specify)	16
No change needed [sp].....	17

[SP]

Q18.

How would you rate your level of sexual desire?

Lower than average	1
About average	2
Higher than average	3

[SP]

Q19.

How frequently do you have sexual thoughts, fantasies, or erotic dreams?

More than once a day	1
Once a day	2
2 or 3 times per week	3
Once a week.....	4
2 or 3 times per month.....	5
Once a month	6
Less than once per month	7
Not at all.....	8

[ASK IF Q19=1-7]

[MP]

Q20.

What kinds of sexual fantasies have you had?

- Having sex with a stranger 1
- Having sex with someone of the
same sex 2
- Having sex with more than one
person at the same time 3
- Having sex with a celebrity, such
as a famous movie star 4
- Having sex in public 5
- Other (please specify) _____ 6

[ASK IF Q19=1-7]

[MP]

Q21.

Have you ever discussed these fantasies, and if so, with whom?

- Spouse/partner 1
- Friend 2
- Medical professional 3
- Stranger 4
- Never discussed [sp] 5

[MP]

Q22.

What sources have you used in the past year for information **about relationships**?

- Books 1
- Friends and family 2
- Health magazines 3
- Health professional 4
- Internet ads 5
- Internet searches 6
- Men's magazine 7
- Women's magazine 8
- TV or radio 9
- Videos 10
- Other (please specify) _____ 11
- Do not seek information [sp] 12

[ASK IF Q22=5 OR 6]

[3 SMALL TEXT BOXES]

Q23.

Can you please list the top three Web sites you visited most often as sources of information about relationships:

1. [small text box]
2. [small text box]
3. [small text box]

[MP]

Q24.

What sources have you used in the past year for information **about sex**?

Books.....	1
Friends and family	2
Health magazines	3
Health professional	4
Internet ads.....	5
Internet searches	6
Men's magazine.....	7
Women's magazine	8
TV or radio	9
Videos.....	10
Other (please specify)	11
Do not seek information [sp]	12

[ASK IF Q24=5 OR 6]

[3 SMALL TEXT BOXES]

Q25.

Can you please list the top three Web sites you visited most often as sources of information about sex:

1. [small text box]
2. [small text box]
3. [small text box]

[SP]

STATUS.

Which of the following best describes your current relationship status?

Single and not dating	1
Single and dating	2
Engaged	3
Married.....	4
Divorced and not dating.....	5
Divorced and dating.....	6
Separated and not dating	7
Separated and dating	8
Widowed and not dating	9
Widowed and dating	10

[SP]

Q26.

Do you consider yourself to be . . .

Heterosexual or straight.....	1
Gay	2
Lesbian	3
Bisexual	4
Other (please specify)	5

**[GRIDS, SP]
Q27A.**

Are you now engaged in the following types of encounters/relationships?

Yes No

- Long-term formal commitment (marriage, living together for year+, etc)
- Long-term dating/relationship (dating for year+)
- Looking for someone to date
- Long-term dating/relationship long distance (dating for year+ with at least 3 months separated – include military)
- Dating more than one person during the same time period
- Sexually active with more than one person during the same time period
- Sex with someone only once

**[GRIDS, SP]
Q27B.**

In the past 6 months, have you been engaged in the following types of encounters/relationships?

Yes No

- Long-term formal commitment (marriage, living together for year+, etc)
- Long-term dating/relationship (dating for year+)
- Looking for someone to date
- Long-term dating/relationship long distance (dating for year+ with at least 3 months separated – include military)
- Dating more than one person during the same time period
- Sexually active with more than one person during the same time period
- Sex with someone only once

**[SP]
Q28.**

Do you currently have a regular sexual partner?

Yes..... 1
No 2

[ASK IF Q28=YES]

**[SP]
Q28A.**

Which of the following best describes your living arrangement with your partner?

We live together 1
We live in the same area, but
don't live together 2
We live far away from each other
(long distance)..... 3

[ASK IF Q28=NO OR REFUSED]

[SP]

Q29.

Have you had at least one sexual partner within the past 6 months?

Yes..... 1
No 2

[ASK IF Q29=YES]

[SP]

Q29A.

Was this:

A relationship that has ended 1
A casual relationship..... 2
A one-time encounter 3

[ASK IF Q28=YES]

[NUMBER BOX; RANGE 1-99]

Q30.

How many sexual partners do you currently have?

[DISPLAY]

INTRO_PARTNER.

Please answer the following by thinking about your [if q28=yes, insert "current primary"; if q29=yes, insert "most recent"] sexual partner.

[ASK IF Q28=YES OR Q29=YES]

[NUMBER BOX; RANGE 0-120]

Q31.

What is the age of your [if q28=yes, insert "**CURRENT PRIMARY**"; if q29=yes, insert "*most recent*"] partner?

[ASK IF Q28=YES OR Q29=YES]

[SP]

Q32.

What is the sex of your [if q28=yes, insert "**CURRENT PRIMARY**"; if q29=yes, insert "*most recent*"] partner?

Male 1
Female 2

[ASK IF Q28=YES OR Q29=YES]

[SP]

Q33.

How long [if q28=yes, insert “have you been”; if q29=yes, insert “WERE YOU”] in this relationship?

Not a relationship.....	1
Less than 6 months	2
6 to 1 months	3
1 to 2 years	4
3 to 5 years	5
6 to 10 years	6
11 to 20 years	7
20 or more years.....	8

[ASK IF Q28=YES OR Q29=YES]

[GRIDS, SP]

Q34.

Please indicate how well each of the following describes your [if q28=yes, insert “current primary”; if q29=yes, insert “most recent”] sexual partner.

Applies strongly	Applies somewhat	Does not apply
---------------------	---------------------	-------------------

- Is exciting
- Is my best friend
- Is physically attractive
- Makes me feel important
- Is kind and gentle
- Has good personal hygiene/cleanliness
- Is romantic
- Loves me deeply
- Finds me physically attractive
- Is imaginative about sex
- Is a skillful lover
- Is sensitive to my moods and needs

[ASK IF Q28=YES OR Q29=YES]

[MP]

Q35.

How do you keep romance in your relationship?

- Romance? What's that? 1
- Take a vacation/romantic weekend together at least once a year..... 2
- Set aside at least one day or evening a week just to enjoy each other's company 3
- Bring each other surprises/presents/flowers..... 4
- Recognize birthdays, anniversaries 5
- Make a point of telling each other "I love you." 6

[ASK IF Q28=YES OR Q29=YES]

[SP]

Q36.

When was the last time you took a vacation/romantic weekend together?

- Last week..... 1
- Last month 2
- Last six months 3
- Last year 4
- Did not have a chance to do it 5

[ASK IF Q28=YES OR Q29=YES]

[SP]

Q37.

When was the last time you spent a day or evening together just to enjoy each other's company?

- Last week..... 1
- Last month 2
- Last six months 3
- Last year 4
- Did not have a chance to do it 5

[ASK IF Q28=YES OR Q29=YES]

[SP]

Q38.

When was the last time you surprised your spouse/partner with presents or flowers?

- Last week..... 1
- Last month..... 2
- Last six months..... 3
- Last year..... 4
- Did not have a chance to do it..... 5

[ASK IF Q28=YES OR Q29=YES]

[SP]

Q39.

When was the last time you recognized a birthday or anniversary?

- Last week..... 1
- Last month..... 2
- Last six months..... 3
- Last year..... 4
- Did not have a chance to do it..... 5

[ASK IF Q28=YES OR Q29=YES]

[SP]

Q40.

When was the last time you told your spouse/partner you loved him/her?

- Last week..... 1
- Last month..... 2
- Last six months..... 3
- Last year..... 4
- Did not have a chance to do it..... 5

[ASK IF Q28=YES OR Q29=YES]

[SP]

Q41.

In the past **6 months**, how **physically** pleasurable was your relationship with your partner?

- Extremely pleasurable..... 1
- Very pleasurable..... 2
- Moderately pleasurable..... 3
- Slightly pleasurable..... 4
- Not at all pleasurable..... 5

[ASK IF Q28=YES OR Q29=YES]

[SP]

Q42.

In the past **6 months**, how **emotionally** satisfying was your relationship with your partner?

- Extremely satisfying.....1
- Very satisfying2
- Moderately satisfying.....3
- Slightly satisfying4
- Not at all satisfying.....5

[ASK IF Q28=YES OR Q29=YES]

[SP]

Q43.

How satisfied do you think your partner is with your sexual relationship?

- Extremely satisfied.....1
- Somewhat satisfied.....2
- Neither satisfied nor dissatisfied.....3
- Somewhat dissatisfied.....4
- Extremely dissatisfied.....5

[ASK IF Q28=YES OR Q29=YES]

[MEDIUM TEXT BOX]

Q44.

What have you and/or your partner done/tried to improve your sexual satisfaction?

[ASK IF Q28=YES OR Q29=YES]

[SP]

Q45.

During your relationship with your [if q28=yes, insert "CURRENT PRIMARY"; if q29=yes, insert "most recent"] partner, did you ever have a sexual relationship with another partner?

- Yes.....1
- No2

[ASK IF Q45=YES]

[MEDIUM TEXT BOX]

Q46.

What were the reasons of having sex with another partner while still in relationship with your [if q28=yes, insert "CURRENT PRIMARY"; if q29=yes, insert "most recent"] one?

[ASK IF Q45=YES]

[SP]

Q47.

How, if at all, has your having sex with another partner affected your relationship with your partner?

- Ended relationship/marriage 1
- It has caused lasting tension and lack of trust 2
- It caused tension but relationship survived intact 3
- Relationship is stronger than ever 4
- No effect 5

[ASK IF Q45=YES]

[SP]

Q48.

How, if at all, has your having sex with another partner affected your sexual satisfaction with your partner?

- It made it better 1
- It made it worse 2
- It had no effect 3
- Not applicable 4

[ASK IF Q28=YES OR Q29=YES]

[SP]

Q49.

To the best of your knowledge, during your relationship with your [if q28=yes, insert "CURRENT PRIMARY"; if q29=yes, insert "most recent"] **PARTNER** did your partner have a sexual relationship with someone else other than you?

- Yes 1
- No 2

[ASK IF Q49=YES]

[SP]

Q50.

How, if at all, has your partner having sex with someone else other than you affected your relationship with your partner?

- Ended marriage/relationship 1
- It has caused lasting tension and lack of trust 2
- It caused tension but relationship survived intact 3
- Relationship is stronger than ever 4
- No effect 5

[ASK IF Q49=YES]

[SP]

Q51.

How, if at all, has your partner having sex with someone else other than you affected your sexual satisfaction with your partner?

- It made it better 1
- It made it worse 2
- It had no effect 3
- Not applicable 4

[GRIDS, SP]

Q52.

During the past **6 months**, how often, on average, have you engaged in the following sexual activities?

	Not at all	Less than once a month	Once or twice a month	About once a week	More than once a week	Daily
	1	2	3	4	5	6
Kissing or hugging						
Sexual touching or caressing						
Sexual intercourse						
Oral sex						
Anal sex						
Self stimulation						

[GRIDS, SP]

Q53.

Did you do this last week?

Yes No

ONLY SHOW Q52>1 ITEMS

[SP]

Q54.

Have you ever used a vibrator for self-stimulation?

- Yes..... 1
- No 2

[SP]
Q55.

How do you feel about how often you have sexual intercourse?

- It's not often enough 1
- It's just right for me 2
- It's more often than I'd like 3

[SP]
Q56.

When you engaged in sexual activity in the last **6 months**, how often did you have an orgasm (come to climax)?

- Always 1
- Usually 2
- Sometimes 3
- Rarely 4
- Never 5
- Did not attempt orgasm 6
- Not applicable 7

[SP]
Q57.

Do you usually use any protection, such as condoms or other methods, when you have sex?

- Yes, all the time 1
- Usually, but not all the time 2
- Sometimes 3
- Rarely or not at all 4
- Not applicable 5

[ASK IF PPGENDER=1]

[SP]

Q58.

Erectile dysfunction (sometimes referred to as “impotence”) refers to being unable to get and keep an erection that is rigid enough for satisfactory sexual activity.

How would you describe yourself?

- Always able to get and keep an erection good enough for sexual intercourse 1
- Usually able to get and keep an erection good enough for sexual intercourse 2
- Sometimes able to get and keep an erection good enough for sexual intercourse 3
- Never able to get and keep an erection good enough for sexual intercourse 4

[SP]

Q59.

Have you ever had any problems related to sexual functioning?

- Yes..... 1
- No 2

[ASK IF Q59=YES]

[GRIDS, SP]

Q60.

Have you ever sought **treatment** for any problems related to sexual functioning with any of the following?

	Yes	No
--	-----	----

- Your personal physician (including internist or family doctor)
- Specialist physician (including urologist or other specialist)
- Mental health professional
- Sex therapist
- Other (Specify)_____

[ASK IF ALL Q60 ANSWERS ARE NO OR REFUSED]

[MP]

Q61.

Why did you not seek treatment for problems related to sexual functioning?

- Not comfortable discussing..... 1
- Can't afford it 2
- Other (please specify) _____..... 3

[ASK IF ANY Q60 ANSWERS ARE YES]

[SP]

Q62.

What effect did this treatment have on your sexual functioning?

- It made it better 1
- It made it worse 2
- It had no effect 3

[SP]

Q63.

Have you ever paid for sex?

- Yes..... 1
- No 2

[GRIDS, SP]

Q64.

In the past 6 months have you taken any of the following prescription drugs?

	Yes	No
--	-----	----

- Pills or other medicines to thin your blood?
- Anything for your heart or heart beat including pills or paste patches?
- Any medications for cholesterol or fats in your blood?
- Blood pressure pills?
- Thyroid pills?
- Insulin or pills for sugar in your blood?
- Medications for a nervous condition, such as tranquilizers
- Medications for anti-depression?
- Sleeping pills or other medications to help you sleep?
- Any androgens, testoderm, or bromocriptine?
- [ask if ppgender=2] Hormone creams or suppositories for vaginal dryness?
- Medications to improve sexual functioning?
- Pain killers?
- [ask if ppgender=2] Hormone pills such as estrogen or progesterone, for example Premarin, Provera?

[SP]

Q65.

Are you currently using any sort of medicines, hormones, or other treatments to improve sexual function and activity?

- Yes..... 1
- No 2

[ASK IF Q65=YES]

[5 SMALL TEXT BOXES]

Q66.

Which medicines, hormones, or other treatments are you currently using? (please be as specific as possible, up to 5 items can be entered)

[ASK IF Q65=YES]

[SP]

Q67.

How did these medicines, hormones, or treatments affect your satisfaction or enjoyment with sex?

- Greatly increased..... 1
- Somewhat increased 2
- No change 3
- Somewhat decreased 4
- Greatly decreased 5

[ASK IF Q65=YES]

[SP]

Q68.

What effect did these medicines, hormones, or treatments have on your relationship with your partner?

- Very positive 1
- Somewhat positive..... 2
- Neither positive nor negative 3
- Somewhat negative 4
- Very negative 5

[ASK IF XREL1=14 (MISSING)]

[SP]

Q69.

What is your religion?

Baptist—any denomination.....	1
Protestant (e.g., Methodist, Lutheran, Presbyterian, Episcopal).....	2
Catholic.....	3
Mormon	4
Jewish.....	5
Muslim	6
Hindu	7
Buddhist.....	8
Pentecostal	9
Eastern Orthodox.....	10
Other Christian.....	11
Other non-Christian, please specify: _____	12
None	13

**[ASK Q69A IF Q69 = "BAPTIST" OR "PROTESTANT" OR "CATHOLIC" OR "MORMON" OR
"PENTECOSTAL" OR "EASTERN ORTHODOX" OR "OTHER CHRISTIAN"]**

[SP]

Q69A.

Would you describe yourself as a born-again or evangelical Christian?

Yes.....	1
No	2

[ASK Q70 IF Q69 NE "NONE"]

[SP]

Q70.

How often do you attend religious services?

More than once a week	1
Once a week.....	2
Once or twice a month.....	3
A few times a year	4
Once a year or less.....	5
Never	6

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