

## BACKGROUND

According to the American Occupational Therapy Association's (AOTA) *Occupational Therapy Practice Framework* (2014), sexual activity is considered an activity of daily living (ADL) and engaging in intimate relationships is an instrumental activity of daily living (IADL). Difficulty engaging in sexuality can have an impact on clients' roles and their quality of life (AOTA, 2014). While occupational therapists recognize the importance of sexuality to many clients, most clinicians do not address sexual activity in clinical practice due to lack of knowledge, lack of training, and decreased comfort (Hyland & McGrath, 2013; McGrath & Lynch, 2014; Young et al., 2020). Continuing to exclude sexuality from occupational therapy practice can lead to serious consequences for our clients' well-being.

Sexuality education is variably addressed within occupational therapy programs, with 92% of programs including sexuality education within occupational therapy curriculum (Eglseder & Webb, 2018; Lohman et al., 2017; Payne et al., 1988). Sexuality education content was most often taught through lecture, and most programs averaged 3.5 to 7.2 hours spent on sexuality education (Eglseder & Webb, 2018; Lohman et al., 2017). Although research has shown an increase in occupational therapy programs addressing sexuality content, the content between educational programs are greatly varied and may not be sufficient for students (Eglseder & Webb, 2018; Lohman et al., 2017).

Within Creighton University's Occupational Therapy Program, sexuality is minimally discussed within the curriculum. Occupational therapy students graduating in 2020 received a lecture about sexuality and older adults in OTD 423 Occupational Therapy with Older Adults, a short supplemental lecture in OTD 403 Neuro-Occupation, and a case study during a lab in OTD 457 Physical Rehabilitation III. Adaptive equipment was briefly mentioned on a slide in OTD 316 Professional Practice and Ethical Formation Seminar, and a professor briefly mentioned sexuality when interviewing clients with burn injuries and spinal cord injuries in OTD 306 Health Conditions. The supplemental lecture in OTD 403 Neuro-Occupation and the interview questions were student-interest driven rather than formally integrated within the curriculum. Overall, across 31 didactic courses within the three-year curriculum, sexual health education was addressed in 16% of courses.

## AIM OF THE PROJECT

To address the gap between occupational therapy education and clinical practice, the aim of the capstone project was to increase sexuality education within the occupational therapy curriculum. By increasing sexual health information, occupational therapy students will feel more comfortable addressing sexuality concerns within future practice.

## METHODS

### Phase One: Building Foundational Knowledge

- Student expanded foundational knowledge by completing:
  - Comprehensive literature search
  - Continuing Education Courses from the Institute for Sex, Intimacy, and Occupational Therapy, LLC
  - Sexuality and Intimacy Throughout the Lifespan, Assistive Devices for Sexual Activity, and The Typical Treatment Session: How To's and Expert Advice (Ellis, n.d.a; Ellis, n.d.b; Ellis, n.d.c.)
  - Reviewing Sexuality and Occupational Therapy: Strategies for Persons with Disabilities (Hattjar, 2012)
  - Listening to the podcast OT After Dark.

### Phase Two: Needs Assessment

- Student reviewed Creighton's current occupational therapy curriculum in relation to sexuality education.
- Student created an outline of potential areas to include sexuality within the current curriculum design.

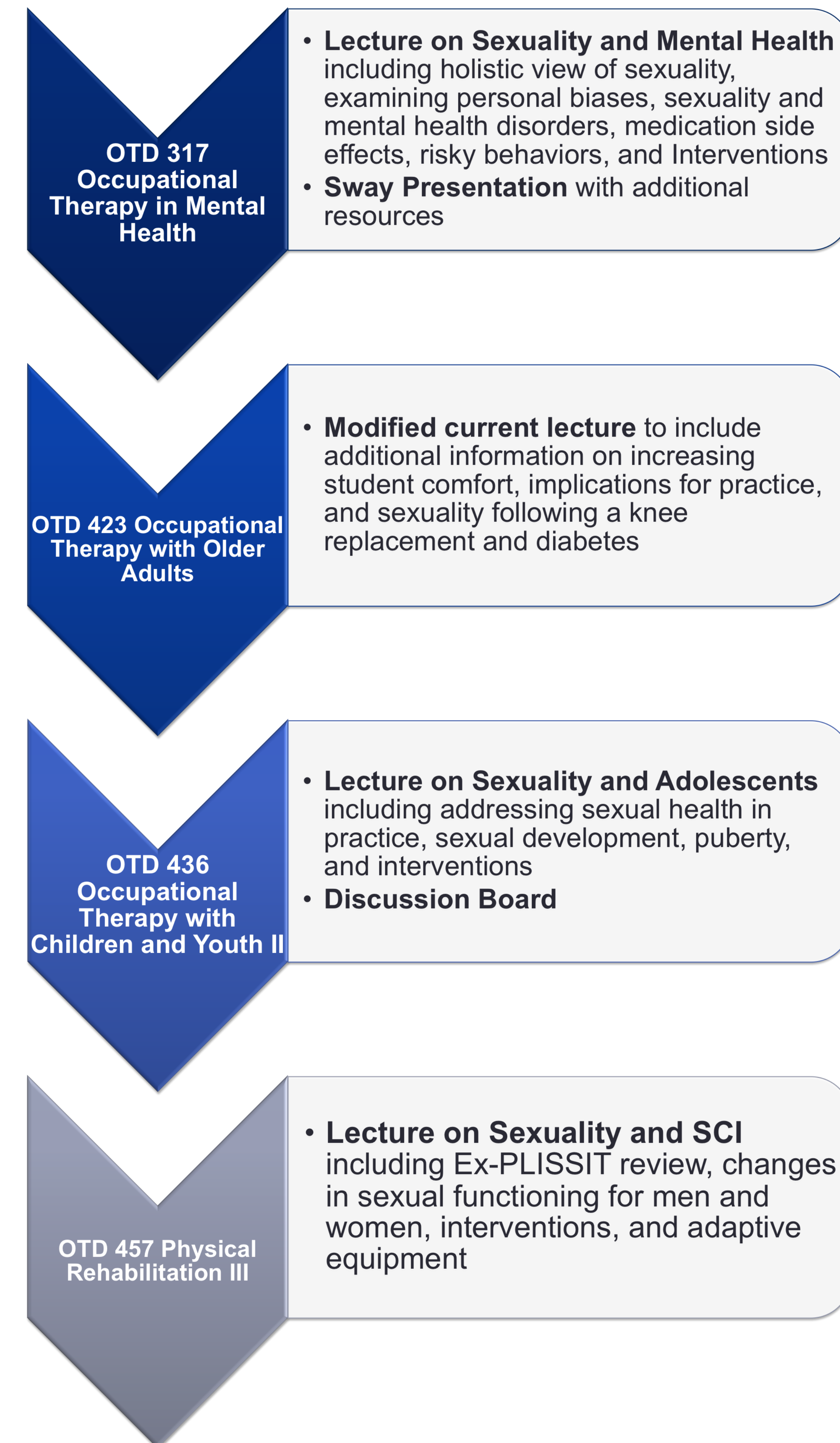
### Phase Three: Curriculum Development

- Student collaborated with Dr. Greiner, Dr. Thinner, Dr. Lohman, Dr. Spellman, and Dr. Blanchard to expand sexuality education within OTD 317 Occupational Therapy in Mental Health, OTD 436 Occupational Therapy with Children and Youth II, and OTD 457 Physical Rehabilitation III: Interventions and Outcomes.
- Student disseminated sexuality content through lectures and additional slides within the courses.

## RESULTS

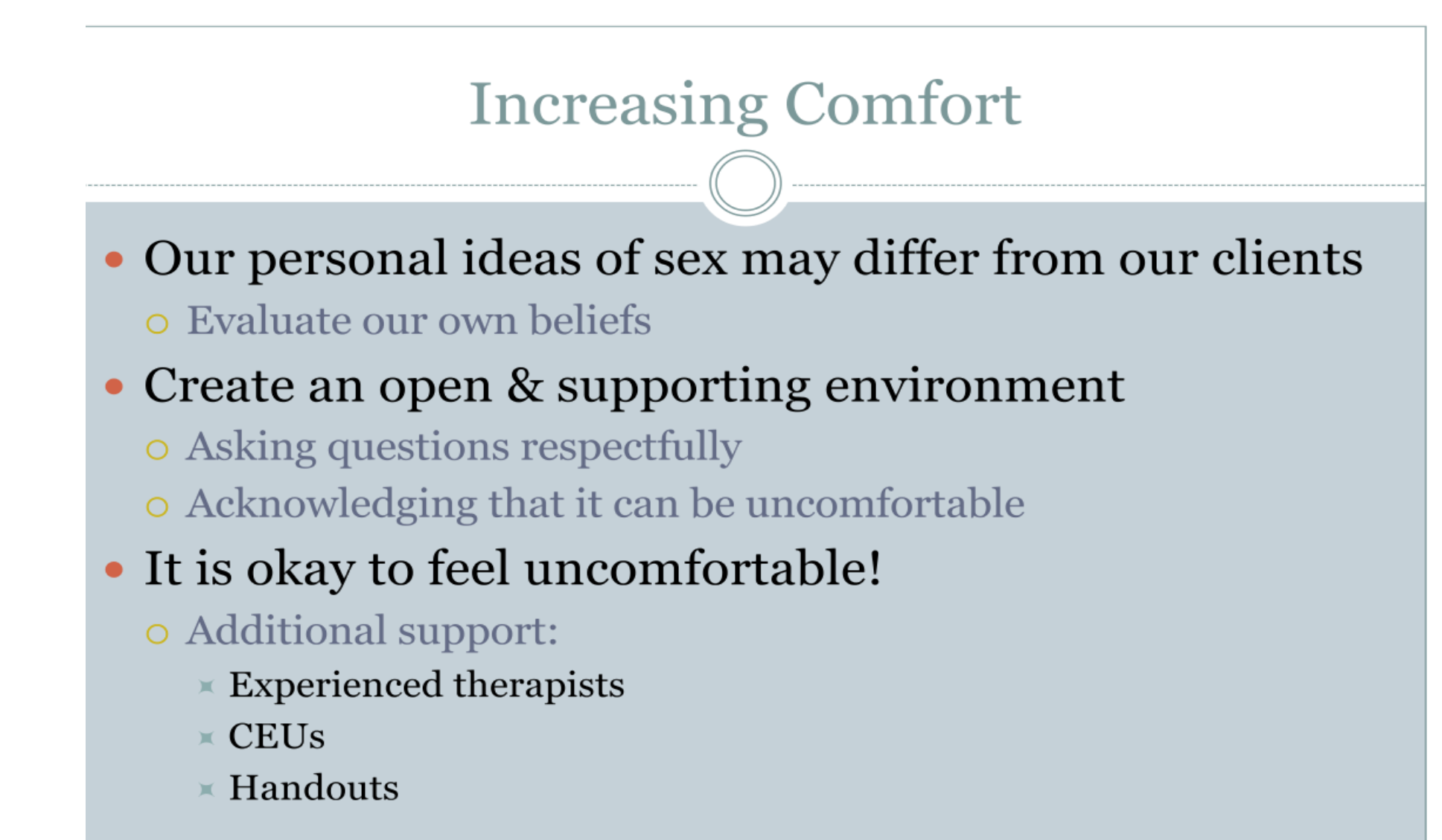
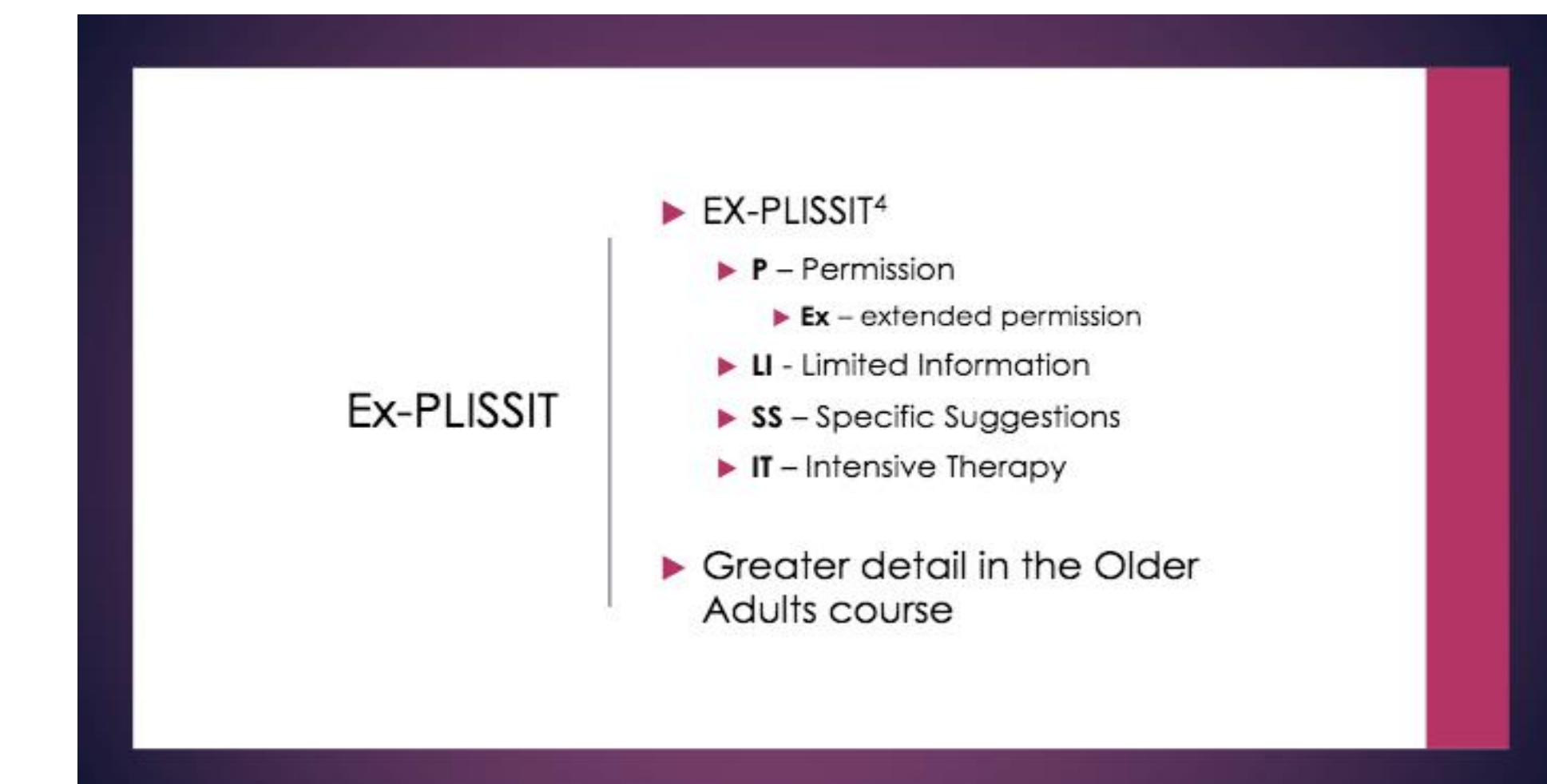
Prior to the DCE project, occupational therapy students received sexual health education in 5 courses with 75 minutes of lecture content. Following the curriculum development, there was a 10% increase in the number of opportunities for students' exposure to sexual health education and 93% increase in minutes of lecture content. Sexual health education was included in three additional courses with 70 minutes of lecture content.

## CURRICULUM DETAILS



## BOTTOM LINE FOR OT

Occupational therapists believe that sexuality is an important ADL to address within practice. However, most educators and students do not feel there is enough education regarding sexual activity leading to increased discomfort in students addressing sexuality in future professional practice. Expanding sexuality education within Creighton's Occupational Therapy curriculum will help to increase student comfort and, hopefully, bridge the gap between didactic education and clinical practice.



Age	Typical Behaviors or Concepts to Learn
Birth - 2	<ul style="list-style-type: none"> <li>• Touch genitals for sensory pleasure</li> <li>• Experiences affection and touch</li> </ul>
3 - 5	<ul style="list-style-type: none"> <li>• Shows interest in genitals of the opposite sex</li> <li>• Plays "show me" games with other children</li> <li>• Understands that others should not touch his or her genitals</li> <li>• Understands that others should not touch genitals</li> <li>• Public vs. private behaviors</li> <li>• Privacy rights</li> </ul>

Sexuality Development  
Table 15-10



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