The Importance of Romantic Love to People with Learning Disabilities

**Accessible Summary**

* Lots of research has taken place to understand love and what it means
* People with learning disabilities can have difficulties finding love for many reasons
* People with learning disabilities were interviewed and they said that having a partner who loved them and who provided company and support was very important to them
* People enjoyed a physical relationship, this could be kissing, cuddling or having sex
* People who had been abused in some way said it felt good to have a partner who loves and supports them
* Good support from staff was important to help people to find love. A **drawing** was made to explain to staff how they can support people with relationships.

**Summary**

A hermeneutic phenomenological study, guided by the theory of Van Manen (1990), was conducted using interviews with eleven people with learning disabilities examining the importance of romantic love. The analysis revealed that love was very important to them, specifically the companionship and support a loving partner provided. The physical expression of love by a partner was also valued highly, especially kissing and cuddling. Most participants had experienced some form of abuse but it appeared that the love of a partner was reparative and they were able to form satisfying relationships. Participants’ narratives highlighted the central role staff play in supporting them to fulfil their romantic needs. The romantic relationship needs of people with learning disabilities were examined in relation to Maslow’s Hierarchy of Needs. The hierarchy was revised to reflect the value of having a loving relationship to people with learning disabilities and to identify the support they required to facilitate and maintain this.

**Keywords:** Learning Disability; Relationships; Love; Maslow, Hierarchy of Needs

**Introduction**

Love can be expressed in varying forms within numerous contexts with different individuals. This article focuses on the romantic love felt between partners rather than the platonic love felt for family/ friends. Graham’s (2011) meta-analysis revealed the numerous measures that have been applied to love. The most accepted conceptualisation of love is that of ‘passionate and companionate love’ (Berscheid and Walster 1978), Passionate love is defined as having a sexual component, an intense desire to merge with another, subject to strong emotions and is short-lived. Companionate love is less emotionally intense, associated with positive emotions such as affection. Passionate love occurs early in relationships and, if the relationship progresses, it may develop into companionate love.

Both Rubin (1970) and Sternberg (1996) proposed triangular theories of love. Rubin’s (1970) consisted of: attachment, the desire to care by putting another’s needs first, and exclusive intimacy. Sternberg’s (1996) model included: intimacy, passion and decision/commitment. This appears similar to Rubin’s (1970) theory with the exception of passion. Despite their differences the common components among theories of love include: an innate desire for an exclusive union with another and a level of reciprocity and some degree of sexual attraction/passion (Rubin 1970; Berscheid and Walster 1978; Sternberg 1996; Graham 2011). Intimacy is a component of love but its definition has been debated (Holt *et al*. 2009). However, definitions share commonalities with theories of love, such as affection and physical closeness. Moss and Schwebel (1993) defined intimacy in romantic relationships as ‘the level of commitment and positive affective, cognitive, and physical closeness one experiences with a partner in a reciprocal (although not necessarily symmetrical) relationship’ (p. 33).

Having a romantic partner appears equally valued by people with learning disabilities both historically (Craft and Craft 1979) and more recently (Kelly *et al*. 2009; Rushbrook *et al*. 2014). Participants value the companionship, support and social status associated with a partner. Relationships are considered mechanisms to meet certain needs including feeling loved, company, support, intimacy and enabling individuals to marry and have children (Rushbrook *et al*. 2014). UK Government policy supports the relationships evidenced by the Care Act (2015) citing the reduction of isolation as an eligible need.Government initiatives such as *Valuing People* (Department of Health 2001) aspire to develop opportunities for people with learning disabilities in Britain ‘to form relationships, including ones of a physical and sexual nature’ (p.81). However, *Valuing People Now* (DoH 2009) indicated a lack of progress. People with learning disabilities continue to lack friendships and experience isolation (Stacey and Edwards 2013). Ignagni *et al.* (2016) argue that people with learning disabilities are often ‘not allowed to love’ (p.133) and lack equal opportunities to attain the role of partner.

A physical relationship is a core component of a loving relationship (Sternberg 1996; Berscheid and Walster 1978). The Framework for Sexual Health Improvement in England (DoH 2013) states that people with learning disabilities should have equal access to sex and relationship education or advice, but this is not always achieved. People with learning disabilities are denied support to pursue sexual relationships (Family Planning Association 2008), policies can be implemented which limit sexual expression (Bernert 2011) and sexual relationships can be highly supervised (Winges-Yanez 2014). Rushbrook *et al*. (2014) highlighted staff fear regarding the risks of abuse associated with relationships. Adults and young people with learning disabilities experience higher levels of abuse (Horner-Johnson and Drum 2006, Smeaton *et al.* 2016). Domestic abuse occurs more frequently within relationships for women with learning disabilities (McCarthy *et al.* 2016). Some individuals may have a limited ability to evaluate risk and require support from staff in this area (White and Barnitt 2000). Thus, a dilemma exists in wanting people to have relationships but fearing for their safety (Lafferty *et al*. 2012).

**Method**

The research took place as part of a PhD thesis which explored:

* What do people with learning disabilities look for in a potential partner?
* How do their prior experiences affect their choices and influence the relationships they experience?

This article examines the importance of love to people with learning disabilities in relationships, as this emerged as an important finding from the analysis. The research sought to understand participants’ experiences therefore interviews and a hermeneutic approach were deemed appropriate.

The research utilised the hermeneutic phenomenological approach of Van Manen (1990) as outlined in *Researching Lived Experience*. As with other hermeneutic phenomenological approaches, Van Manen sought to understand what a phenomenon meant to individuals in their ‘lifeworld, the lived world as experienced in everyday situations and relations’ (Van Manen, 1990, p.101). For this article, it was the importance of a partner’s love to participants. Heidegger (1978) viewed humans as striving to make sense of phenomena based on our own experiences and their historical meanings. This resonated with Van Manen, who valued the human element in research, ensuring that an individual was reflected in context. A key difference between Van Manen’s approach and other phenomenological approaches such as Heidegger’s, was his use of ‘everyday’ language, rejecting the use of many phenomenological terms in his writing such as ‘being-in-the-world’ (dasein) and focusing on the practical application of his method. Phenomenological concepts such as the ‘hermeneutic circle’ (Heidegger, 1978) were evident but were presented in a more pragmatic style such as ‘systematic questioning’ (a process of ongoing questioning, focusing and reflecting). This felt congruent with the design of the research, which aimed to be as accessible as possible.

**Participants**

Eleven participants were recruited from two UK social care charities (see Table 1). The inclusion criteria was:

* Over 18 years old
* User of a service specifically for people with learning disabilities
* Able to verbally communicate in sentences and be able to discuss abstract concepts such as love**. Individuals who were unable to verbally produce a narrative account were not recruited by the gatekeeper for the study. This was deemed necessary when the research design was formulated as the use of a narrative approach such as Van Manen’s requires participants to engage in conversation with the interviewer**.
* Had experience of a relationship which lasted over six months. The relationship did not have to include sexual intercourse but had to include a degree of physical closeness such as cuddling. This differentiated the relationship from a loving platonic friendship; relationships that did not meet this criteria were excluded. This reflected Moss and Schwebel’s (1993) definition of intimate relationships which included a degree of physical closeness broad enough to include acts such as cuddling and did not have to include sex.
* **People within homosexual relationships were not recruited for the study. It was felt that the potentially unique barriers and challenges faced by this group of individuals deserved more attention than was possible within the limits of this research. Future research is planned to explore this in detail.**

*Insert Table 1*

**Procedure**

Purposeful sampling (Teddlie and Yu 2007) was undertaken to ensure participants met the inclusion criteria. Recruitment for the research was challenging due to its sensitive nature, however the small sample size was congruent with hermeneutic methodology. Senior staff with direct knowledge of the participants assumed the role of gatekeepers and recruited appropriate participants. Information about the study was provided in “easy read” format. Gatekeepers arranged pre-meetings for potential participants which enabled the researcher to explain the nature of the study and what it entailed to the participants and check that they understood. It also allowed them the opportunity to meet the principal researcher and to ask any questions. This meeting helped to establish if potential participants met the inclusion criteria, if they were able to give informed consent to take part in the research and to determine the level of complexity of communication that would be appropriate in subsequent interviews. Subsequent interviews were either arranged directly with participants or through the gatekeepers. Interviews lasted approximately one hour and, to limit anxiety, participants could choose if they wanted to be interviewed alone or with their partner. Participants who had a partner included in the research chose to be interviewed together. Those that attended the interviews gave informed consent and were included as two participants in the research, no partner attended solely for moral support.

Eleven participants were recruited and all were interviewed; most were interviewed twice. Two participants were interviewed three times as their interviews were shorter due to their concentration spans and two participants only attended one interview. In-depth semi structured interviews were used to allow for the exploration of participants’ experiences. An initial interview guide was developed based on the literature review, and centred on information regarding participants’ previous and current experiences within relationships. Typically, interview questions were specific to individuals/couples’ experiences. However some re-occurring questions included: ‘what does love in a relationship mean to you?’, ‘How do you know X loves you?’ and ‘how do you show you love X?’ Subsequent interviews enabled the researcher to explore topics raised in previous interviews. A researcher diary was kept which described the experience of the interview, including participants’ interactions, non-verbal communication and general observations.

Ethical approval was granted from London South Bank University Research Ethics Committee and all participants were able to provide informed consent. To ensure this, in the pre-meetings participants were asked “why shouldn’t they take part?” / “why do you want to take part in the research?”  The questions enabled the researcher to judge how much participants understood regarding the potential risks. All participants provided an answer which reflected their own wishes. People were reminded of their right to withdraw at any point without any consequences for doing so, no participant chose to withdraw. Prior to second interviews taking place, participants' capacity and continued consent was rechecked. Two participants could not be re-contacted and there was no reply to an email and telephone call to the staff gatekeeper so a second interview did not take place. Since there had been clear informed consent, the first interview was included as part of the dataset. Confidentiality was maintained via the use of pseudonyms, however if any allegations of abuse were disclosed it would not have been possible to keep this confidential. This was raised with participants and an accessible document about confidentiality and consent was discussed. There were no disclosures of unreported or current abuse.

Participants were made aware prior to the interviews that there was a possibility that they could become upset and were asked to think about what they could do if this happened. Information was available regarding support agencies they could contact if they required further support. The principal researcher is a qualified psychotherapist, and although no therapeutic work took place, she remained attentive to participants’ emotions and needs throughout the interviews. This was achieved through phrasing questions sensitively, being aware of their body language, allowing space for reflection and not pursuing topics when participants did not want to share further details. No person appeared to be adversely affected by the content discussed. When two participants discussed abuse they had experienced, their partners provided reassurance.

**Analysis**

All interviews were recorded and transcribed and analysed using Van Manen’s (1990) hermeneutic phenomenology.. Only themes from the analysis relating to the importance of love are discussed in this article. **Other themes that emerged from the analysis included the influence of familial relationships and support service provision on romantic relationships for people with learning disabilities.**

In line with Van Manen’s methodology, there was a period of immersion within the data. Using his approach to theme identification, transcripts and the researcher’s diary were reflected on, both as a whole and in a detailed line by line approach, to identify the essential aspects of the experience. Appropriate phrases or single statements which represented themes were identified. As analysis progressed, themes began to re-occur within the descriptions. Themes were then transformed into a written textual description to crystalize its essence. The principal researcher undertook the analysis however the transcripts and thematic textual descriptions were also examined by the co-authors, both experienced researchers. Themes were cross checked among whole the research team to promote rigor. Three themes emerged: the importance of a love, its physical expression and reparative nature.

**Results**

The following section explores the importance of love to participants. The essence of a romantic relationship for participants was someone who loved them and demonstrated this via physical affection, support and companionship. The love they felt for a partner appeared reparative in regards to abuse some participants had previously experienced.

**The importance of having a loving relationship**

The central finding was the significance of love to participants. All participants desired a partner to love and who loved them. Participants frequently shared how much they loved and valued their partner.

Caroline: We just held hands and that’s how it started. We were really, really in love.

Joe: She’s [wife] a great person in my life, friendly, kind, funny. Fun to be with, I love you so much. So happy about the person I am married to, and also, she is my soul mate.

Researcher: Peter what do you think life would be like without Kate?

Peter: I would actually miss her. I would actually cry…She is actually nice.

All participants, regardless of age, began their relationships in the past ten years. This possibly indicted a change in attitude regarding relationships for people with learning disabilities. This was important considering some participants required support from staff to develop and maintain relationship. Mary and Peter claimed that staff were responsible for organising and supervising dates (outside the home). It appeared that without staff support, participants with higher support needs would have not been able to develop a relationship. Alan stated how staff assisted in the development of his relationship. It was uncertain whether Alan would have found love without this initial encouragement.

Researcher: So you came back to the house. Did you sort of decide between you that you were going to be a couple?

Alan: No, not for some time. They wanted us to try it out, the staff did.

Researcher: Oh right. What the staff wanted you to try it out. What did they say?

Alan: They said how did you get on in X [date location]? And they said do you want to do it again?

A loving partner was important to participants in regards to the companionship they provided. All the participants shared a need to be with someone and to feel special to someone. Some participants expressed loneliness which did not appear to be influenced by the number of people participants came into contact with as their living situations typically included numerous staff and housemates. This suggested the significance of their relationship with their partner who provided more than just a ‘presence’.

Emma: Well, the thing that makes me happy being with someone is I would rather live with someone, a partner, than being on my own because I don’t like being on my own.

Sometimes a partner replaced the possible need for staff support and possibly enriched and strengthened couples’ relationships through encouraging trust in their partner’s ability to care for them.

Liam: Yeah she [Emma] cares about me and about me getting ill. Don’t want to get ill get headache. Yeah keep me well look after me.

Emma: We look after each other, don’t we?

Almost all of the participants stated that they enjoyed telling people they had a partner. There was great pride in this.

Emma: Because it is nice telling your friends that you have a partner, especially, like, if they have one and now you have got one. Because you are letting them know that you have got one now [boyfriend]. So you are not left out.

Being part of a relationship appeared to suggest a sense of normality and increased social status for some. However, having a special someone to love and share experiences with appeared to be the primary motivating factor in having a partner.

**Physical expression of love**

Four of the eleven participants stated that they had sexual intercourse but all reported enjoying physical contact with a partner and saw this as central to a loving romantic relationship. Relationships consisted of a significant amount of affection such as cuddling and kissing which participants valued. Some participants’ expressed how physical contact was an instrument for developing intimacy.

Emma: I wanted to get closer to Liam [through sexual intercourse].

Liam: Share everything with each other, sleep with each other

Carrie and Joe had unsuccessfully attempted to engage in intercourse.

Carrie: No, I find it [sex] difficult.

Researcher: What painful?

Carrie: No, not painful, connecting.

Carrie: Hard to push.

It was disappointing that this young couple were unable to enjoy this aspect of a loving relationship and it was unclear what support they had received to overcome what appeared to be physiological issues. Emma and Liam also wished to live alone as a couple so they were free to express this love physically where they choose.

Both: We are not allowed to [cuddle] downstairs.

Emma: We just wanna cuddle and we can’t.

Despite this reported restriction, the couple (along with two others) received support from staff to access family planning services and all but two couples shared a bed. Participants claimed that physical affection was a way of demonstrating that you loved someone. For some, displays of exclusive physical affection may have been a way of feeling secure about their partner’s feelings towards them, reassuring them physically that they were wanted and that their relationship was ‘special’ compared to other relationships.

Researcher: So how do you know when someone loves you?

Carrie: Cuddles

Joe: Or kiss

It was clear that affection was important to participants as an indicator of love, but this did not have to be sexual or passionate in nature.

**Reparative nature of love**

Nine of the eleven participants had experienced some form of abuse or rejection, from their families, ex-partners and members of the public. Both Caroline and John had experienced being sent away from the family into care or a residential school. As an adult, Caroline reported a poor relationship with her family. The relationship between Caroline and John appeared built on companionship, both considered each other to be their best friend as well as partner. It was touching that they were able to find this with each other following their previous experiences of rejection.

Caroline: I love my family in some ways but I wouldn’t say I know they are my family but as I don’t see them all that much I don’t feel as part of their family because they are always too busy and they don’t have hardly any time to pick up the phone to say hello or have a little chat. And I never know when to ring them or whatever and I just feel out of it, I don’t feel that I am part of my family’s family anymore, so yeah.

Caroline: That’s the thing we both have lots of time for each other as we do a lot of talking and everything.

John: Caroline’s my friend, my best friend.

Kerry had experienced sexual and physical abuse from her father and step-father and valued Dean’s support and friendship. Based on her account, Kerry’s relationship with Dean may have restored some of her trust in men.

Kerry: Oh, he looks after me, he knows. Because he looks after me and because I have eye problems at the moment he looks after me when we go to mum’s. He looks after me when I am on the train and stuff.

The love of a partner may have been reparative in terms of enabling participants to overcome sexual abuse and enabling engagement in positive sexual relationships. Emma suffered a sexual assault by an ex-partner. Despite this, she was able to overcome her fears, trust Liam and engage in a sexual relationship. She described how this was possible due to Liam’s sensitivity and patience.

Emma: He [Liam] doesn’t force me like the other ones used to. He [Liam] is nothing like my other two boyfriends.

Participants shared how staff supported their relationships and protecting people from further abuse. Staff appeared open when providing advice around personal safety, empowering choices and eliminating the risk of pregnancy.

Emma: Yeah, they told me that to be careful with him [when asked if staff gave advice]

Researcher: What do you mean ‘careful’?

Emma: Like only do things [of a sexual nature] that you want to do.

Having a partner appeared to be reparative in nature, considering the abuse and rejection some participants had experienced.

**Discussion**

Love was important to participants and being in a romantic relationship, appeared a basic need within their lives. However, prior research has highlighted how love can elude some people with learning disabilities due to reasons such as social exclusion (Stacey and Edwards 2013) or abuse (McCarthy *et al*. 2016). Rushbrook *et al*. (2014) claimed that relationships were viewed as a mechanism to allow individuals to meet certain needs such as feeling loved, company, support, intimacy and enabling people to marry. Maslow’s Hierarchy of Needs (1943) proposes that humans are motivated to reach their potential (self-actualisation) by meeting various needs in ascending order. While Maslow’s hierarchical model could be considered as outdated, it resonated with this present study as the needs of people with learning disabilities often remain unmet due to issues such as abuse (Smeaton *et al*. 2016) or poverty (Emerson *et al*. 2005). Such issues reflect the lowest levels within Maslow’s hierarchy; basic needs (food, water, shelter, sleep and sex) and safety needs (freedom from fear, protection, physical security and financial security). Love and belonging needs (which centre on personal relationships) are considered ‘higher needs’ (Maslow, 1943). In terms of finding and maintaining love, participants shared how staff played a central role in supporting love, maintaining safety in relationships/ preventing abuse and supporting sexual relationships. If organisations that support people with learning disabilities do not support individuals to attain the higher levels of Maslow hierarchy, by being too constrained by austerity to take people on dates**, or are limited by poor staff attitude with regards to supporting people to find love or an organisational culture of not encouraging positive risk taking (such as starting a new relationship),** then it will be unlikely that they will find love.

The findings of the study suggest that, unlike Maslow’s theory, it is love, not sex, which is a basic need for people with learning disabilities, however a loving physical, though not necessarily sexual, relationship is important. The findings supported Rushbrooke *et al*. (2014) in that love and intimacy were expressed by participants, who shared positive aspects of their physical relationships, including cuddling. The current research and Rushbrooke *et al*.’s (2014) findings contradict some previous research which focused on sexual relationships for people with learning disabilities (e.g. McCarthy **1999**) in the way that participants experienced loving physical relationships. Based on the principal researcher’s experience, both participating organisations were considered to have sound values such as a focus on empowerment for the people they support. It is probable that these values were responsible for the positive findings within the research. It is possible that if more organisations had been recruited less positive examples of sexual relationships may have been disclosed. Participants saw affection, not necessarily sex, as being fundamental to their relationship, which conforms to theories of love and intimacy for adults without learning disabilities (Berscheid and Walster 1978; Rubin 1970; Sternberg 1996). It could be interpreted that participants utilised physical affection as a form of security, physical affirmation that their partner loved them. Almost all of the participants said they felt loved by their partner and referenced physical affection as an indicator of this. There was evidence from what some participants said in the interviews, that they were supported to access sexual health services outlined in the Framework for Sexual Health Improvement in England (DoH, 2013). Physical affection within a romantic relationship seems to assist individuals to ‘heal’ by enabling them to feel loved and safe with a partner. This highlighted the need for good support surrounding physical relationships, including all aspects not just sex such as sufficient privacy, autonomy to engage in a relationship, and appropriate relationship/ sexual advice.

Social inclusion was an objective of *Valuing People* (DoH 2001), yet Emerson and Hatton (2008) maintained that people with learning disabilities experienced higher levels of loneliness than the wider population. Unlike Ignagni *et al.’s* (2016) study, participants in this research were ‘allowed to love’ (p.133) and held socially valued roles including partner/spouse. However, five of the eleven participants expressed loneliness but were able to form a relationship. An interpretation could be that the relationship they experienced with their partner was different, perhaps higher in elements such as affection or trust, which possibly assisted participants to overcome loneliness (to some extent), but this was not always extended to developing ordinary friendships. Possibly participants remained cautious due to their previous experiences of rejection or abuse. This suggests that the love experienced by couples was able to transcend any possible internal barriers formed due to poor previous experiences. **However better support needs to be provided to reduce isolation, this support will increase individuals’ ability to meet their ‘love and belonging needs’ through developing relationships with a diverse range of people**. Having a loving partner suggested a sense of normality for participants which could be reparative considering the social stigma typically experienced by people with learning disabilities (McVilly *et al*. 2006). Good support from support providers and social workers would enable participants to take positive risks where possible such as marriage or living together. Attaining the role of spouse/ ‘living together’ could possibly increase individuals’ ‘self-esteem needs’, the penultimate level of Maslow’s hierarchy.

Participant’s narratives highlighted the important role of support staff and how people remain dependent on good support from staff in regards to finding and maintaining love. Research literature highlighted issues surrounding a lack of staff support and restrictions regarding relationships for people with learning disabilities (Winges-Yanez, 2014). Overall participants’ reported minimal restrictions from staff (such as no cuddling in communal areas). Lafferty *et al*. (2012) cited the dilemma that exists between staff wanting people to have relationships but fearing for their safety. Some participants shared how staff provided support which maintained their ‘safety and security needs’ by minimising risks such as safeguarding individuals from abusive partners. Participants were not stopped from engaging in relationships, staff supported them to date, access contraception and to marry; which mirrored the findings of White and Barnitt (2000). Based on participants’ accounts, staff supported participants in meeting their ‘love and belonging needs’ by providing emotional and practical support surrounding relationships. Without this support, some relationships would probably not have developed or endured.

**Limitations**

The main challenge encountered was the recruitment of participants. It would have been beneficial to have recruited more participants from a diverse range of organisations to explore if loving relationships were experienced across different organisations in the same way. **A limitation of the research was the exclusion of individuals who did not use speech to communicate. Excluding their views could be regarded as being discriminatory in nature, however this was deemed necessary because of the use of a narrative approach which required a level of narrative skill. However, alternative communication methods such as sign language to produce a narrative account could have been explored. No researcher within the team can sign but an assistant could have possibly been recruited. A further piece of research could be focused on the relationships of adults with communication difficulties.** The research was limited in that it only included heterosexual couples. Therefore it was not possible to understand what possible barriers exist for those who identify as homosexual, bi-sexual or **individuals who identify as transgender** in terms of finding a loving romantic relationship.

**Conclusion**

A loving partner was essential in the lives of participants. **Through this study,** a loving partner is defined as someone who is supportive, providing companionship and demonstrating love with physical affection. **The study also showed how important staff support is important in finding and maintaining romantic love.** There was evidence that the ‘basic and higher psychological needs’ as defined by Maslow (1943) has applicability to people with learning disabilities and their relationships. Maslow’s hierarchy model was revised incorporating the findings of the study ([Figure 1](https://mc.manuscriptcentral.com/LongRequest/bld?DOWNLOAD=TRUE&PARAMS=xik_5apqpY7vPd7gCZEYAAUYxr9e53fTDng5VkxCPnsSUjuWjzdXBKogsh6aPKkKzbCGdedtjG7vgznrUciXrYnVfUhFDKuEd5KAa2NSYtHTvFNeG1TsFomEi7kZmW2NKnitAYFYxXvdKE9kTeZCua6UPJq4vv4mHsJtfqEd6XF6yKLDQh1hRwZbkqAtoGYsUzKZcE2p2" \t "_imageProof)) with its goal being having a loving relationship and identifying the support needed to ascend the hierarchy and find love. **Policy makers and providers need to ensure the provision of good quality support, the encouragement of positive risk taking which is essential for love to flourish and back this with sufficient funds for engagement in social activities. It is suggested that the model can be used to assess the quality of support being provided and, if necessary, further training or funding identified.**

[Insert [Figure 1](https://mc.manuscriptcentral.com/LongRequest/bld?DOWNLOAD=TRUE&PARAMS=xik_5apqpY7vPd7gCZEYAAUYxr9e53fTDng5VkxCPnsSUjuWjzdXBKogsh6aPKkKzbCGdedtjG7vgznrUciXrYnVfUhFDKuEd5KAa2NSYtHTvFNeG1TsFomEi7kZmW2NKnitAYFYxXvdKE9kTeZCua6UPJq4vv4mHsJtfqEd6XF6yKLDQh1hRwZbkqAtoGYsUzKZcE2p2" \t "_imageProof)]

This model can be utilised by policy makers and service providers to ensure that policies are designed to facilitate the provision of support surrounding relationships, as outlined, for individuals with learning disabilities. **It could also be utilised to inform training for support provider organisations, social workers and other professionals who work directly with people with learning disabilities to ensure that the importance of loving relationships is paramount and that they understand the support required to facilitate them.**

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**Table 1. Demographic information of the participants**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** | **Age** | **Status** | **Living Arrangement** | **Interviewed** | **Informed Consent** |
| Alan | 60 + | Married | With Wife shared Supported Living House | Once alone | Yes |
| Kerry | Under 35 | Engaged | Alone with some support | Once with Dean, once alone | Yes |
| Dean | Under 35 | Engaged | Alone with some support | Once with Kerry | Yes |
| Caroline | 35-60 | Partner | With Partner in Registered Care Home | Twice with John | Yes |
| John | 35-60 | Partner | With Partner in Registered Care Home | Twice with Caroline | Yes |
| Emma | Under 35 | Engaged | With Fiancé in Registered Care Home | Twice with Liam | Yes |
| Liam | Under 35 | Engaged | With Fiancée in Registered Care Home | Twice with Emma | Yes |
| Mary | 35-60 | Partner | Alone in Supported Living Flat | Three times alone | Yes |
| Peter | 35-60 | Married | With Wife in Supported Living Flat | Three times alone | Yes |
| Carrie | Under 35 | Married | With Husband in shared Supported Living House | Twice with Joe | Yes |
| Joe | Under 35 | Married | With Wife in shared Supported Living House | Twice with Carrie | Yes |