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Page 1

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Sexuality and intimacy— what's aging got to do with it?

By Anita P. Hoffer

Despite what the popular media might indicate, sexuality and intimacy play an active role in our lives as we age.

There is an abundance of research, from the *Journal of the American Medical Association* to the *Journal of Gerontological Nursing* to the *Wall Street Journal*, showing sexual activity (whether partnered or solo) is good for your health, even in later years. Engaging in sex can relieve stress, improve sleep, burn calories, reduce certain forms of pain, ease depression, strengthen blood vessels and boost the immune system.

Defining the Indefinable

Sexuality is often linked directly to sexual acts or sexual orientation, but it is multi-faceted and has many definitions. Regardless of age, it is a core part of our identity, of how we live in our bodies, are attuned to our senses, revel in the pleasure of beautiful music, a stunning sunset, a loving touch or the smell of an exquisite flower. Sexuality includes body, mind and soul; it is omnipresent in everything we do.

Intimacy is how we share ourselves with others. This sharing may be sexual, or not. It may involve genital contact, or not. But at its most essential, it is about connecting with an “other,” and as such is an expression of the universal human wish for connection.

Deeply satisfying, rewarding friendships can be forged in middle and late life without necessarily involving conventionally defined “sexual behaviors and activities.” An encounter may be sexual but devoid of intimacy, or highly intimate but not at all sexual.

Does Age Affect Urge?

Age has little to do with urge. What we want sexually may change as we age (e.g., erogenous zones, patterns of desire and arousal), but for most healthy adults, interest in sexual pleasure doesn't disappear with age. Our capacity for pleasure does not die until we do.

However, by age 50 or so, most of us begin to notice changes in sexual drive and response. Typically, in men this may involve erectile concerns (75 percent of men older than 75 are affected), prolonged refractory periods or problems with ejaculation. In women, common difficulties are changes in orgasm, decreased tactile sensation or reduced lubrication that may result in painful intercourse and decreased libido.

These changes are not signs that we are losing our sexuality. Rather they are natural consequences of aging and need to be adjusted to, shared with our partner(s) and discussed with a

healthcare provider to overcome these difficulties when and if possible. Furthermore, these changes are not necessarily diseases; rather they may be side effects of medications or therapies for illnesses that commonly affect older adults.

Ageism and Societal Prejudice

Yet sex between older adults is often viewed with discomfort or even disgust. We live in an ageist society that assumes that adults are sexually “dead” after age 50—or should be. This perception persists, at least in part, because physicians and other healthcare providers receive little training in dealing with the sexual concerns, needs and rights of elders, so they are reluctant to raise the topic with their patients and educate them, according to a 2011 article by Salinas et al., published in the *International Journal of Person Centered Medicine* (1:2; doi: <http://dx.doi.org/10.5750%2Fijpcm.v1i2.73>).

Similarly, patients (especially older individuals) often feel constrained by the conservative or sex-negative messages absorbed in their youth which, in turn, makes them ashamed to raise the topic with their caretakers, as noted in *Love Stories of Later Life: A Narrative Approach to Understanding Romance* by Amanda Smith Barusch (New York: Oxford University Press, 2008). No wonder many women and men forego the opportunity to enjoy a rich and satisfying sex life as they age.

But the tide may be shifting—at least in some regions of America. While stereotypes about waning sexuality and aging have been widely reinforced by the media, TV ads, advertising by pharmaceutical companies and the adult entertainment industry, a few mainstream indicators, in the form of movies, are emerging suggesting that older couples can and do desire sex and are willing to seek help to get it (*Hope Springs*); are ready and willing to embark on new sexual liaisons and romantic interludes (*The Best Exotic Marigold Hotel* and *It's Complicated*); and are even capable of passionate (explicitly photographed) sex within and outside the context of marriage (*Cloud 9*).

We cannot change the truth that our bodies change as we age. It is the consequences we can change. We need to reconsider our definition of sex and reframe the way we think about aging. In America today, the hype is that the Holy Grail of sex is penetrative vaginal intercourse energetically performed by hot, fit young men and women culminating in explosive, simultaneous orgasms. And when we internalize this narrow view, it can discourage us from exploring, expanding and enjoying sexuality in our later years. We need a more nuanced model of sexuality that embraces all of our humanity. ■

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