



Review Article

## Invisible desires: Addressing sexuality, intimacy, and ageism in older adults

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### Abstract

In modern society, fulfilling personal life and goals related to personal and professional depends on society, sexuality, intimacy, and sexual identities-all of which are crucially acknowledged as fundamental human rights and needs. Older people have not always been acknowledged in literature or discussions of these issues, and sexuality has generally been taboo. These silences are further rooted in many areas of social policy and practice related to ageing support, reflecting the broader invisibility of older people in various aspects of society. The present article focuses on sexuality and ageism, exploring how ageing affects sexual health and the factors that play a significant role in this process. This article also aims to integrate different theoretical perspectives on sexual health and ageing and contribute to breaking the stigma surrounding these issues. Search databases, such as Elsevier, PMC Database, Wiley and Sons, Springer, Google Scholar, etc., were used to extract a total of 13 studies which were included in the final review. People reported fewer sexual problems and valued sex more when they had fewer ageist sexual preconceptions in their minds. This study reviews studies from various cultures with a particular emphasis on South Asian culture. It explores dominant discourses surrounding sexuality, intimacy, and sexual identities in later life. Drawing on a range of secondary literature, it examines the various positions and contexts that shape the “practice” of sexuality in older adulthood.

### Keywords:

Ageing, Sexual health, Ageism, Intimacy

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Despite increased public exposure, society remains deeply preoccupied with beliefs about what constitutes “normal” or “appropriate” sexual behaviour for older individuals. Sexuality in later life is primarily addressed from a biomedical perspective, which assumes a natural decline in sexual functioning that requires medical treatment. Other key issues and persistent myths surrounding older people’s sexuality include the belief that

sexual desire diminishes with age and the perception that older people are physically unattractive or undesirable, particularly in relation to gender. The popular notion is that it is shameful or inappropriate for older adults to engage in sexual activity and that there is no older Lesbian, Gay, Bisexual, Transgender, Queer, and Inter sex (LGBTQ&I) community. This article investigates how ageism is shaped by attitudes promoted by the media, perceptions held by younger people about sexuality in later life, older adults' views of their sexuality, and the attitudes of those who provide care services. The results suggested that ageist stereotypes significantly impact older adults' sexual well-being. It has been concluded that when individuals have a positive perception of ageism, and they do not entertain ageist sexual misconceptions, they value 'sex' in their lives. The training programs for healthcare providers and policies for the ageing population should include education on the impacts of ageism and their needs and sexual health education.

## **Introduction**

Sexuality is how we engage in and communicate sexuality, encompassing emotions, goals, deeds, and identity, and may involve different forms of physical relationship or stimulation. The ability to have sexual sensations is referred to as "sexuality", which encompasses a person's gender identity, eroticism, intimacy, sexual orientation and social elements of sex.<sup>[1]</sup> Aspects of biology, such as hormones and other bodily changes or problems and dysfunctions, have been the focus of certain research on sexuality. With an emphasis on doctors and residential care, the attitudes and understanding of healthcare workers on sexuality in later life have also been investigated in various research studies.<sup>[2]</sup>

Intimacy, on the other hand, is a sense of closeness and connection within a relationship that can exist with or without a physical aspect. As people age, life's changes can provide chances for senior citizens to reinterpret what intimacy and sexuality mean to them. Some people might look for a close, sexual relationship as well. Some may be satisfied with just one, while others might choose to avoid these connections altogether. One's emotional and physical well-being influences sexuality. Physical conditions may impact what one is able to do, while

emotional states can influence one's desires. Compared to their younger years, many older couples say they are happier with their sexual lives. They frequently have more time and privacy, fewer distractions, and no pregnancy worries.

Additionally, they may be better at communicating their wants and needs, leading to deeper intimacy and connection. However, the physical changes that come with ageing can occasionally make it difficult to enjoy or engage in sexual activity. Ageing bodies change weight, skin, and muscle tone, which can lead to discomfort and concerns about attractiveness. Health issues may also introduce physical challenges and emotional stress, creating obstacles to intimacy and sexual satisfaction.

It is noteworthy that older persons participate in intimate and sexual behaviours in a variety of living situations, including those involving dependent care. Nonetheless, the nature of intimate and sexual behaviours frequently changes as people age (such as kissing, fondling, external stimulation and sex), as factors like partner health, older adult health and other issues may alter the form of sexual expression but not its purpose.<sup>[3]</sup>

This review article aims to explore the attitudes propagated by the media, the attitudes of younger people, later-life sexuality, attitudes of older people towards their sexuality, attitudes of caregivers and how these aspects contribute to the construction of ageism.

The integration of "somatic, emotional, intellectual, and social aspects of sexual being in ways that are positive, enriching, and that enhance personality, community, and love" is the definition of sexuality given by the World Health Organisation (2006).<sup>[4]</sup> According to this comprehensive definition, sexuality is a state of being that transcends sexual relations and activity.

Intimacy is defined as a degree of closeness, acquaintanceship and mutual personal knowledge between individuals that suggests empathy, sympathy, or emotional understanding. The concept of sexual identity or sexual orientation introduces more intricate aspects, such as social, political, and interpersonal relationships. Researchers are beginning to notice increased

fluidity in sexuality over the life span, which further complicates our definitions of sexual identities, including gender identities that may not coincide with sexual orientation.<sup>[5]</sup>

### Attitude and perception of media

The media plays a significant role in shaping the public's perception of later life and sexuality.<sup>[6]</sup> "Sexity" and "ageing" are presented and perceived in the media as two unrelated ideas. There is often conflict between the voices that the media presents. The claim that sexuality remains significant as one age is made frequently.<sup>[7]</sup> Some stereotypes, like "dried up old woman", "nasty/dirty old man", or "asexual oldies", are being replaced by ideas like "sexy senior" or "sexy oldie".<sup>[8]</sup> However, stereotypes about older adults who continue to engage in sexual activity are also present in the media. The popular media introduces heterosexist ideas like "cougar" and "MILF", which stand for "Mother, I'd like to fuck", and they symbolise ageist, stereotyped views of older people's sexuality and towards their age group.<sup>[9]</sup> Therefore, even though these labels recognise older people's desire for sexual activity, they also present negative aspects and support the idea that older people are asexual.<sup>[10]</sup>

### Attitudes and perceptions of the young towards older people's sexuality

Research has shown that younger adults have optimistic views about becoming sexually active later in life and are accepting, tolerant, and open-minded.<sup>[11]</sup> According to a survey of college students about their sexual attitudes and behaviours, both now and in the future, younger adults believed many of the modern myths about ageing even though they were hopeful about continuing to enjoy sexual activity in later life. They anticipated significantly less sexual activity as well as more sexually related issues. Compared to their current attitudes, they had more traditional expectations for their later-life sexual behaviour.<sup>[12]</sup>

However, it may be challenging to identify overtly ageist views regarding sexuality.<sup>[13]</sup> There may also be differences between the stated explicit and implicit views.<sup>[14]</sup> Positive attitudes are presented as "old-fashioned" and backward, while negative

attitudes are seen as more "politically correct" when they involve the acceptance of older people's sexuality by younger people. This was demonstrated by a study that employed an implicit attitudes test, which functions outside of conscious awareness.<sup>[15]</sup> 305 young adult university students participated in the study, rating the likelihood that men and women would be interested in different types of sexual activities. Their answers about people who were younger (their own age) and older (65 years of age or older) were contrasted. Although older men and women were rated as varying from "somewhat" to "very interested" in both traditional and experimental forms of sexual activity, the participants thought that younger generations showed a greater interest in sexual activities than older generations.

### Attitudes of older people towards their own sexuality

According to previous research looking at older adults' attitudes and sexual behaviour, the majority of them see sexuality as an essential aspect of life and participate in partners or other intimate relationships.<sup>[16]</sup> According to the results of a study done in Nigeria, older people view sexuality as a significant part of later life, with heterosexual relationships being seen as having negative effects on one's body and soul.<sup>[17]</sup> However, studies have repeatedly shown that older adults are frequently reluctant to express their sexuality because they internalise myths and stereotypes about later-life sex and sexuality.

One important sign of internalising ageism is older people's reluctance to talk to their primary care physician about sexual issues. This is because they fear that discussing sexual issues with their doctor will be met with disapproval from healthcare providers if their later-life sex does not meet societal expectations.<sup>[18]</sup> The idea that older people are not or should not be sexual beings was implied in many stories. Vares claimed that older women internalise ageism and beauty standards, think poorly of their bodies, and describe themselves as "wilting", "rolling", "sagging", and "flabby".<sup>[8]</sup>

### Methodology

#### Search strategy

Systematic literature review has been performed on sexuality, intimacy and ageism among older adults.

This method is extensively used in the literature to thoroughly review a research topic with high number of publications over a relatively long period.<sup>[19-25]</sup> Studies were identified using keywords such as Sexual health, Ageism, Sexual desires, Intimacy, Sexuality & Attitude. After conducting a thorough evaluation of the literature, relevant researches conducted globally in this area since 2010 were selected for inclusion in the review. Researchers carried out the data extraction using Scopus. As recommended, we used only one dataset to mitigate data homogenization issues faced when working with multiple databases.<sup>[26]</sup> Article retrieval performed from Scopus till Oct 8, 2024.

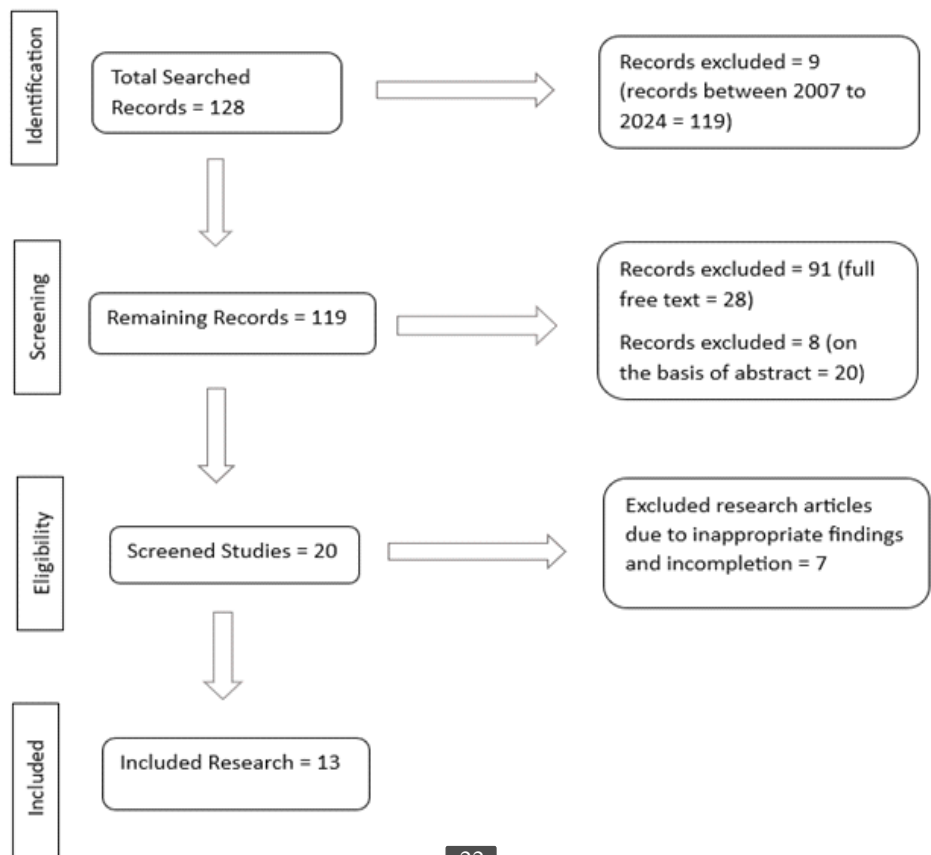
**Inclusion criteria**

The review focuses on research regarding attitudes

and sexual health, encompassing studies conducted on both adult and adolescent participants with the age above forty-five years. After an extensive literature search, 119 studies on ageism and sexuality were identified for review. Only studies meeting the inclusion criteria were considered which included those discussing both sexuality and ageism variables. The inclusion criteria specified that studies must be publicly accessible and open access, published in reputed national and international journals. This review comprises thirteen<sup>[13]</sup> studies that met these criteria and were sourced from the Scopus database.

The selection of research from the database has been presented in the flow chart given below.

**Figure 1: Identification of Studies via PubMed Database**



A study investigated the relevance of age-related sexual stereotypes to the value of sex for those over the age of 50 and the association between sexual and relationship contentment with health and sexual complications considering the age-related sexual stereotypes. The results showed that ageist sexual stereotypes had a significant impact on the sexuality of men and women over the age of 50 years. People reported fewer sexual problems and valued sex more when they had fewer ageist sexual preconceptions in their minds. However, the detrimental relationship between sexual issues and the value of sex for both men and women were lessened by the incorporation of preconceptions. These results indicated that age-related sexual stereotypes probably have a multifaceted impact on the sexual lives of those over 50 years of age.<sup>[27]</sup>

Singh et al. (unpublished work) emphasized various psychological facets of sexual health and the manner in which attitudes towards sex literacy and sexual health vary between cultures, from the viewpoint of the Western culture to those of South Asian nations like Pakistan, India and others. This systematic review study incorporated 25 research papers on both approaches, qualitative and quantitative. The findings of the study reported that the importance of close company, enjoyment, intentional sexual activity, and proper functioning of sexuality is essential for the physical and sexual health of humans. Sexual health was not found to be consistently associated with concerns pertaining to reproduction, sexual health disorders, sexual assault and sexually transmitted infections.<sup>[28]</sup>

Another study was conducted with the aim to compare how heterosexual and Lesbian, Gay, and Bi-sexual (LGB) older individuals experienced ageism along with associated dysfunctional beliefs and how these variations affected their contentment and sexual health. The finding revealed that the rate of sexual intercourse, masturbation and quality of sexual activity was reported to be higher in LGB participants when compared with heterosexual individuals. There were no differences found between the groups for ageism and dysfunctional beliefs.<sup>[29]</sup>

Researchers also inspected the association between physiological fitness, resilient nature and healthy sexual life in older people along with the mediating effect of self-driven ageism. The findings indicated

that while reporting for more illnesses, heightened self-driven ageism was inversely proportional to sexual wellness, and higher resilience levels were directly proportional to facets of sexual health. The association between a resilient nature, several illnesses and sexual wellness was mediated by self-directed ageism.<sup>[30]</sup>

Lyons et al. investigated ageism and stigma related to sexuality in association with well-being and mental health in older gay and lesbian people. The study incorporated a representative sample of 432 gay males and 181 lesbian females between the age group of 60-85 years. Findings reported that more distress related to mental health was predicted by being encountered with ageism as well and the concerns about sexual instinct acceptability predicted poor effects on measures of well-being in lesbian women. It has also been found that gay men experiencing ageism and acceptance of sexuality predicted poor effects on all measures of well-being. Furthermore, psychological distress and resilience were higher among gay males who scored higher on sexuality acceptance but only in conjunction with heightened experiences of ageism.<sup>[31]</sup>

Banerjee and Rao aimed to investigate the perspective of people of older age regarding their sexuality and experiences related to sexual orientation. A sample of 20 Indian participants aged more than 60 years was selected for the qualitative approach. The findings suggested that sexual well-being is associated with healthy ageism. Finding depicted that older individuals may be able to maintain their sexual dreams and desires by adopting changed practices and aspirations.<sup>[32]</sup>

Soares and Meneghel conducted a qualitative study on 26 dependent older adults by collecting the data through interview methods in order to analyze their experiences related to sexual life. It was identified that older women believe that it is normal for one to stop having sexual relations as one gets older, whereas older males place value on sexual abilities. The older females cherish companionship, tenderness, and fondness, but older males define sexuality as biological gratification and sexual action.<sup>[33]</sup>

Heywood et al. conducted a study in which they examined the attributes of those who experienced

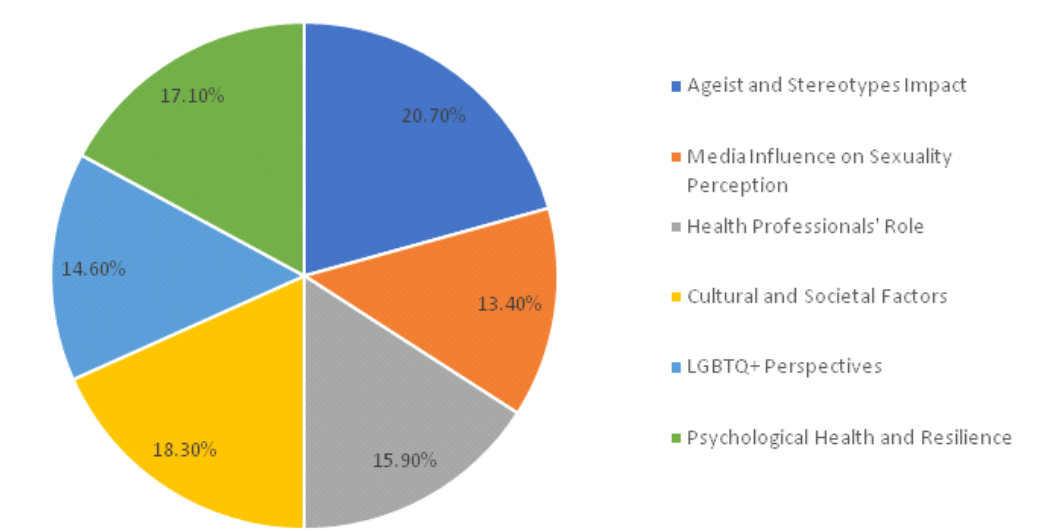
ageism and the association between experiences of ageism and interest in sexual activities. It has been seen that the experiences related to ageism were more in the people who didn't have a companion, who were not employed, who had lower income and who reported poor health. Even after accounting for these variations, those who had not indulged in sexual activity in the last two years and were unsure about their future intentions for sexual activities were more likely to report experiencing ageism. Those who stated that they had experienced more ageism and those who stated that they wished to have sex more frequently in the future had reported having either higher or lower sexual desire since the age of 60.<sup>[34]</sup>

Syme and Cohn executed a study to investigate cross-sectional patterns of ageism and attitudes related to sexual stigma by age group, gender and generational classification. It has been demonstrated that the permissive attitudes about ageing sexuality were moderate, which displayed a low level of stigma related to it. No significant differences were found between age categories and generations concerning ageing sexual stigma belief. It also emerged that men, irrespective of age and generation, had far more stigmatizing ideas than women and other genders.<sup>[35]</sup>

Dominguez and Barbagallo studied sexuality as a domain that considered human health with profound implications not only in the physical and mental outlook but also in the cultural and societal aspects, impacting all age groups. Sexuality influences vital physiological, psychological, societal and cultural facets of human health across all age groups. Everyone desires love, companionship and intimacy regardless of age. Even beyond the reproductive years, sexuality remains a natural component of self-worth and contentment. Findings from this study suggested that people of older age still have sexual urges and sentiments, whether they are capable of doing so or not. When there are changes in one's physical health, desire does not always disappear. Many people continue to be active during their older years, refuting the erroneous assumption and false belief that dysfunction related to sexuality is generally a consequence of ageing.<sup>[36]</sup>

Lochlainn and Kenny reviewed the prevalence rate of engagement in sexual behaviour by older people, the issues they have while encountering sexual activity and the contribution of the health care experts in resolving these concerns. This overview covers the physical changes associated with sexuality that naturally take place in both males and females with the increase in their age and also

Figure 2: Distribution of Emphasis on Key Themes in Sexuality, Intimacy and Ageism Research





impact physiological and mental ailments related to sexual functioning. It may be possible for general physicians and other medical professionals to provide more insightful and helpful guidance on sexuality and disprove the myth that growing older means becoming celibate if they have a better grasp of the sexual changes that come with ageing.<sup>[37]</sup>

Yee did a review study in which factors surrounding ageing and sexuality have been explored. An attempt was also made to consider and explore the unique circumstances that come with becoming older, structured caring and the potential mistreatment of older people. It was found that the sexual desires and performances of both males and females were impacted by typical bodily changes that occur with an increase in age. As people age, they may develop more medical issues and, together with their treatments, will affect their sexuality and the way it gets expressed. The medical practitioners need to understand and identify the solutions to maximize sexual functioning in old age people.<sup>[38]</sup>

Lindau, with his other associates, aimed to report the prevalence of sexual behaviour and activity of aged people and also outlined the factors that relate to age and health conditions. It was found that most of the older male individuals were active in sexual activities as compared to the older female participants. It was also revealed that problems related to sexuality were prevalent among older adults and rarely discussed with healthcare experts.<sup>[27]</sup>

Findings from this literature review indicate a complex interplay of factors affecting sexuality and intimacy among older adults, particularly in the presence of ageism. To provide a clearer summary of these findings, we present a pie chart that visualizes the proportion of emphasis on each key theme identified across the reviewed studies.

Figure 2 highlights six primary themes that emerged from the literature:

**Ageist stereotypes:** Representing the largest portion, this theme highlights the pervasive influence of ageist beliefs on the perception and expression of sexuality among older adults. Studies show that age-related stereotypes often limit the

acceptance and visibility of older adults' sexual needs, shaping negative social attitudes that hinder their sexual well-being.

**Psychological health and resilience:** Psychological factors, including mental health and resilience, were frequently discussed as critical to sexual satisfaction and intimacy. Self-directed ageism, where individuals internalize stereotypes and resilience against such beliefs, both play pivotal roles in shaping the sexual experiences of older adults.

**LGBTQ+ perspectives:** Studies focusing on LGBTQ+ older adults indicate unique challenges, as these individuals often encounter both ageism and stigma related to sexual identity. However, resilience among LGBTQ+ individuals is generally high, suggesting the need for more inclusive policies and supportive practices.

**Societal and cultural views:** Cultural contexts significantly impact older adults' sexuality, with some cultures upholding inclusive views while others impose restrictive norms. The emphasis on this theme reflects the importance of understanding cultural variation in addressing sexuality and intimacy in ageing populations.

**Healthcare involvement:** The role of healthcare providers in addressing sexual health is critical. The studies reflect upon how healthcare professionals' support-or lack thereof-affects older adults' comfort and ability to discuss sexual health concerns openly.

**Media influence:** While media often reinforce stereotypes about ageing and sexuality, recent portrayals are gradually challenging these views, promoting a more positive and inclusive narrative.

## Discussion

The findings of this review reveal a complex interplay of ageism, cultural perceptions, and personal attitudes that shape the experiences of sexuality and intimacy among older adults. The existing literature suggests that ageist stereotypes significantly impact older adults' sexual well-being. For example, research indicates that age-related stereotypes discourage open discussions about sexual health with healthcare providers, leading to

untreated issues and dissatisfaction in intimate relationships.<sup>[28]</sup> In a study focusing on individuals over 50, it was observed that lower endorsement of ageist stereotypes correlated with fewer sexual issues and higher satisfaction, highlighting the multifaceted impact of these biases.<sup>[27]</sup>

It is clear from the above-stated literature reviews that the subject of sexual orientation in later life is still largely unexamined and stigmatised. It is typified by social constructivism and has a dual nature. The present review article identifies perceptions related to ageism while taking into account sexuality in older life among the media, young individuals, healthcare experts and older individuals, despite the fact that it is acknowledged that sexual orientation is necessary for older people's standard of living. Any conversation must dispel the myths and prejudices that rob elderly individuals of their own distinct sexual identity and the freedom to express it.<sup>[39]</sup> Irrational fears, stereotypes, and ignorance, which are rooted in and exacerbate ageism, lead to attitudes and behaviours that significantly obstruct the expression of sexuality, the pleasure of sexuality, and the developing of an awareness of oneself in older years of life.<sup>[40]</sup>

Studies carried out across various nations have consistently revealed that older adults view maintaining their sexual activity as a critical aspect of their overall health and well-being.<sup>[41]</sup> According to research, even in their ageing years of 80s and 90s, older adults still participate in a variety of sexual activities, including penetrative sex, masturbation and oral sex.<sup>[27]</sup> Therefore, there are often behaviours that go along with the expressed desire to continue having sex. In a similar vein, by keeping older adults out of national and population-based research on sexual instincts and sexual health concerns, researchers have failed to challenge age-related stereotyping and have instead strengthened the perception that these surveys are irrelevant to this segment of the population.

Research on the most problematic factor of sexuality, such as dis-functioning in sexual activity or challenging behaviour linked to changes in cognition, psychology, or biology (e.g., disinhibition linked to conditions like dementia), was typically the focus of these studies. These all

support a medical understanding of sexuality in the elderly.<sup>[8]</sup> Last but not least, the majority of studies have disregarded the opinions of older adults, who are crucial for expressing the range of sexual experiences and for subverting prevailing ideologies. This necessitates a review of the ways in which the experiences of older people are discussed by those who interact and work with them.

The foundation of social structure is sexuality, which also serves as a key source of strength and fortitude. By centering it within an investigation of the increase in age and older life, one can gain insight into the potential for re-designing social practices and conventional stereotypes that influence beliefs and behaviour when delivering services and assistance. Lastly, up until recently, there has been a tendency in the research literature to downplay ethnic and cultural diversity. There seems to be a requirement for further cross-cultural research because many explorations were written from the perspective of white, middle-class, heterosexual men. Fewer studies examined the sexuality in the previous life of older LGBTQ+ individuals using representative samples, and none gathered data on gender identity. Due to the dearth of population-based representative samples, older age LGBTQ+ individuals and those with a history of homosexual identification and behaviour remain disguised.<sup>[42]</sup> Also, the experiences of LGBTQ+ older adults were found to be uniquely challenging, as they often face dual stigma related to both age and sexual identity. Studies have shown that LGBTQ+ individuals frequently report higher resilience, yet they also experience more ageism and mental health distress compared to their heterosexual counterparts.<sup>[28]</sup> This group's increased resilience underscores their strength in navigating compounded social barriers, though more inclusive policies and support systems are needed to foster well-being.

Furthermore, cultural attitudes deeply influence the perception of sexuality in later life. For instance, research from South Asia indicates that older adults face additional stigma surrounding sexuality due to cultural expectations, which often discourage open expression of intimacy in older age.<sup>[39]</sup> Such findings underscore the need for cross-cultural research to understand how cultural



context shapes age-related sexual norms and affect older adults' ability to express intimacy.

### **Limitations and implications**

Several limitations of this review should be acknowledged. Firstly, the studies included were predominantly from Western contexts, which may limit the generalizability of findings to non-Western populations. Additionally, the sample sizes in many of the studies were relatively small, with limited representation of certain groups, such as rural older adults and diverse cultural backgrounds. There is also a lack of longitudinal studies that track shifts in attitudes and behaviours over time, which would provide insights into the long-term effects of ageism on sexual health in older adults.

The findings of this review highlight the need for both clinical and social interventions. Healthcare professionals play a critical role in supporting sexual health among older adults, yet ageist biases may prevent them from addressing these issues adequately. Training programs for healthcare providers should include education on the impacts of ageism and the unique needs of LGBTQ+ and other under represented groups within the ageing population. In terms of policy, there is a strong need for initiatives that promote sexual health education tailored to older adults, focusing on inclusive practices that recognize the diversity of this population. Future research should also aim to fill existing gaps by conducting cross-cultural studies and exploring the intersections of ageism, mental health, and sexuality. Such research would contribute to a more comprehensive understanding of how various social and cultural factors influence sexual well-being in later life.

### **Conclusion**

With increasing age comes an opportunity to explore intimacy in an undiscovered manner. To have an exploration into this world, this narrative review was conducted. After carefully researching and reviewing papers, 13 studies were included in this review article. The conclusion arrived from acknowledging studies is that when individuals have a positive perception of ageism, and they do not entertain ageist sexual misconceptions, they value 'sex' in their lives.

The exploration and acceptance of sexual desires in old age were more common in LGBTQ+ individuals as compared to heterosexual individuals. It can also be concluded that males are more open to being sexually active when compared to females. This further can open gates for future research endeavours. This review signifies how older individuals internally accept the importance and necessity of sexual desires and activity in their lives. They are not able to externalize their expression independently without including the effect of ageism. Our society needs to work on this, adopt new practices, and change the notion of dissociating sexual practices from older individuals.

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