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**Linking the past and the present:  
Constructing meaning from childhood emotional and sexual experiences  
towards present sexual well-being in older adults**

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**Abstract**

How do older adults make sense of early sexual experiences with regard to their present sexual well-being? In 2016, a qualitative study on sexual well-being was undertaken among 65- to 85-year-olds of different genders, sexual orientations, and from different social layers. Thirty-two individuals were interviewed. In a thematic analysis, five main subjects were constructed, each showing variability in experience and understanding, while at the same time showing examples of meanings given to the relationship between early emotional and sexual experiences and present sexual well-being. The study indicates that the lack of understanding of one's own sexual history may be a consequence of lacking knowledge about sexuality and the psychological aspects of one's well-being, both emotional and sexual, which are reciprocally dependent. The findings should increase awareness among health personnel of factors other than present sexual function for understanding sexual well-being in older adults.

**Key words:** sexual health, sexual well-being, older adults, constructing meaning, attachment, early experiences, sexual learning, Norway

## Introduction

### Background

Sexuality in older adults has been surrounded by a ‘mythology fed by misinformation’ (Butler & Lewis, 1993; 3). From a research perspective, the previous lack of interest in studying the meaning of sexuality in older adults is changing. The definition of ‘being older’ has also changed (Schwartz, Diefendorf, & McGlynn-Wright, 2014), and contemporary western 65-year-olds do not perceive themselves as ‘being old’ (Schmidt & Mattiesen, 2003). Their health is generally better, they work longer and life expectancy is higher. Therefore they also live longer with possible chronic conditions. They are economically better off as compared to previous generations and are more active, both physically and socially. This could be ascribed at least to the younger age groups of older adults belonging to the ‘baby boomers’ generation, which grew up in post-war western societies with economic growth, greater social mobility, and increased personal autonomy for women, caused by the availability of oral contraception. Due to these factors, people over 65 years of age may show stronger personal agency in relation to self-realization in all areas of their lives, including sexuality.

Creating personal meanings in relation to oneself and others has been recognized as a major factor in general health and successful aging ((Butler, 1974; Rowe & Kahn, 1997/ 2015; Wong, 1989). Successful aging is a concept still under development but was initially defined as having ‘a relatively high level of physical, psychological and social functioning, life satisfaction’ (Wong, 1989; 516), and ‘a high level of adaptation and inner resources’ (Wong, 1989; 516). One of the ways we create meaning is through reminiscence, connecting early experiences with later outcomes. It is well established that childhood experiences influence how we perceive ourselves, our abilities to influence the world, and how we feel in relation to others (Ainsworth, xxxx; Bowlby, 1970; Wennerberg, 2011), and in terms of sexuality (Everheard, 1989; Gagnon & Simon, 2005; Magai & Consedine, 2004). In fact, how people handle and adjust to the changing conditions of aging is likely dependent on emotional coping resources developed in early childhood and throughout life (Frydenberg, Deans, & O’Brian, 2012; Mikulincer, Shaver & Pereg, 2003).

The impact of early emotional and sexual experiences on later sexual well-being in older adults has not been studied extensively. Studies on younger adults may not provide adequate information, as sexual well-being in younger adults is related to different age-related preconditions than is the case in older adults. Sexual well-being is understood as containing both hedonistic and eudemonic dimensions with emphasis on the person’s subjective experience of personal pleasure, but also an evaluation of one’s degree of functioning (Ryan & Deci, 2001), rather than as an objective measure of the combination of sexual function, activity, and satisfaction. Subjective sexual well-being is defined as the cognitive and emotional evaluation of an individual’s sexuality (Oberg, Fugl-Meyer, & Fugl-Meyer, 2002). Laypersons often conceptualize well-being in both hedonistic and eudemonic terms (King, Napa & Diener 1989), and to different degrees (McMahan & Estes, 2012). On this background, this paper contributes to the literature by shedding light on how people aged 65 to 85 years perceive their present sexual well-being considering their childhood experiences, and the meaning they give to early experiences in relation to their present well-being.

### The problem

Family dynamics and early experiences affect adult psychological and social functioning (Hovens et al., 2012). Neglect and abuse in childhood is shown to have a strong negative effect on health and social conditions later in life (Cicchetti & Moffitt, 2013).

Further, there seems to be agreement that early negative family experiences, such as a conflictual parental relationship, may put the individual at risk of later impairment in his or her current relationship (Slominski, Sameroff, Rosenblum, & Kasser, 2011).

Early interaction with caretakers forms the basis for the development of attachment styles (Howe, 2011). Attachment styles are working models of others and our 'self' (Bowlby, 1980), which become 'integrated into the personality structure and thereby provide the prototype for later social interaction' (Bartholomew, 1997; 250).

Several researchers have found a link between early attachment experiences, attachment styles, and adult sexuality (Allen & Baucom, 2004; Birnbaum et al. 2006; Dewitte, 2012; Gentzler & Kerns, 2004; Goldsmith, Dunkley, Dang, & Gorzalka, 2016; Stefanou & McCabe, 2012). Attachment styles are relatively stable from early childhood, although continuously subject to influence, change, adjustment, and development throughout the lifespan (Bowlby, 1980; Sameroff, 2010). The concept of attachment therefore also has relevance for the understanding of older adults' intimate relationships (Bradley & Cafferty, 2001; Milukiner & Shaver, 2016), and by extension, their sexual well-being.

Most existing research on attachment in relation to sexuality has come from studies on the effect of attachment and family functioning in relation to experiencing sexual abuse (Seehuus, Clifton, & Rellini, 2015), which points to a negative influence from an unloving, unsupportive family environment on later sexual, emotional, and relational functioning (Ducharme, Koverola & Battle., 1997; Reid & Sullivan, 2009). The findings indicate similar outcomes independent of having experienced sexual abuse on later psychological distress, sexual adjustment, self-esteem, body image, and sexual attitudes (Bhandari, Winter, Messer, & Metcalf, 2011).

On this background, the purpose of the present paper is to analyse the ways in which older adults make sense of their sexual experiences in childhood and adolescence in relation to their present sexual well-being. The paper also examines how older adults perceive experiences that have been important for their sexuality throughout the lifespan, and at present, which experiences they interpret as particularly meaningful or important and how reduced present sexual well-being may be connected to negative childhood experiences or other factors in life.

### **The Study**

A qualitative design was used to address the research questions in this study. Semi-structured interviews, with a narrative approach, were carried out with 32 individuals aged 65 years or older (15 women and 17 men). Men and women of all sexual orientations, with or without partners, were invited to participate in the study. No limit was set on the upper age, health, or living conditions, as long as the person was able to give informed consent. Some participants were recruited directly from senior activity centres, patients' support organizations, via newspaper articles, social media, and social networks. However, most participants were recruited indirectly, and the networks of the researcher were activated to recruit participants who were formerly unknown to the researcher. To ensure relative variability among participants, we also used targeted recruitment. The interviews lasted between 2 and 4 hours. Approximately one third of the participants were recruited directly, while the rest were recruited via the above-mentioned networks.

Prior to being interviewed, participants were given an information letter about the research project, and after reading this, they signed a letter of informed consent. The interviews, based on a narrative approach (Patton, 1990), were constructed around the following themes: 1) social background and present life situation, 2) present and previous

health issues, 3) emotional climate and love in childhood, 4) sexual experiences in life, 5) sexuality and body today, and lastly, 6) expectations of future sex life and healthcare services. These themes were developed based on a literature review and the recognition of areas where knowledge was lacking. Interviews were conducted either at the university or at the participants' homes. The quotes in this paper have been translated from Norwegian to English. To increase readability, the quotes have been revised to reach full and coherent sentences. Nevertheless, the quotes remain close to the original statements.

Analysis methods were developed within the framework of thematic analysis, as described by Braun and Clarke (2013). Initially, statements concerning sexual learning and experiences in early life and reflections on the meaning of these experiences in relation to sexuality today were coded. The coded statements were then categorized into coherent clusters, which were ordered into overarching themes that reflected the categories. The process was characterized by a back and forth between coding, categorizing, and deciding on overarching themes while reading through the material several times.

Theoretical and clinically based assumptions of the interviewer, and assumptions on behalf of the participants, influenced how the understanding of the subjects in the interviews was constructed. As such, the subjects, content, and understandings must be understood as an ongoing negotiation of language and meaning, and a co-construction of knowledge between the interviewer, the participant, and the situation. These processes influenced the decisions made on all levels of data collection and analysis. Consequently, themes did not 'emerge' from the data, but were constructed on grounds of reading and categorizing of the material through the subsequent interpretative filters of the interviewer.

### **Ethical considerations**

The project was approved by the Norwegian Centre for Research Data (NSD). To ensure confidentiality, the interviews were anonymized after being transcribed so that the participant could not be recognized. Audio files of the interviews were deleted after transcribing was completed. Due to sexuality being a sensitive subject, participants had the option to withdraw at any point in the process. The interviewer's clinical experiences in relation to sexual problems and psychological issues could accommodate possible reactions during the interview. Participants were also offered further counselling by an independent specialist in psychiatry and clinical sexology, in case of reactions after the interview. Data material was kept on an encrypted memory stick under lock at the University of Oslo. The signed informed consent forms and identifying information were kept locked separately from the data.

### **Results**

In narrating one's lived life, people have the tendency to try and make sense of past experiences. According to Baumeister and Newman (1994), any experience is interpreted relative to purpose. Second, there is a tendency to describe one's actions as bad or good, which indicates a need to seek value and justification for lived experiences. Third, people seek to show efficacy and control, and lastly, people tend to portray themselves as attractive and competent to preserve their self-esteem and sense of self-worth. Bearing these meaning constructions in mind, we shall now take a closer look at how participants described their present well-being in relation to their early experiences.

### **Present sexual and emotional well-being**

We will start our presentation by introducing a participant who deviates from what is commonly perceived as 'normal' and 'natural' in a hetero-normative society. At the time of

the interview, Geir (male) was 75 years old. He defined himself as gay. He was living alone, had no children, and had no contact with his family. He described himself as being in relatively good health. His present social life consisted of weekly contact with acquaintances in the neighbourhood, in addition to a few persons from the gay community. He had no one he would call a close friend, and he had never experienced a committed romantic relationship.

*I have never had a relationship, just casual encounters. It's sad, even though I'm not suffering. It has never been a part of me. I have been in love, but nothing that has become stable. I have not had any sexual encounters in 20 years. [...] It's a kind of fear for people, I don't know, people have been negative and painful to me, so I don't want to seek out people. There is something like that in me, which has been inside me from the beginning. [...] It stems from my father, who beat me. I miss security and love, but physiologically, my sexuality works. Fantasies and infatuations have always been stronger than the physical contact. [...] The kindness that can be between two people is important to me, extremely important. It (sex) isn't the world to me. It has always been like that. [...] It isn't reluctance towards sexuality or the physical, but rather that the big interest isn't there any longer.*

Geir had no sexual partner but gave indications that he had an active and satisfying autoerotic sex life without any sexual dysfunction. The reason for him not having had a close relationship could be found in his fear of others. His narrative illustrated how he attributed the fear of intimacy to early experiences of emotional trauma in his family. In his interpretation, it was the violence and lack of emotional closeness, acceptance, and understanding from his parents that largely explained why he had not had a close intimate relationship despite positive sexual experiences and encounters he described. He described the situation as 'sad', but accepted that his sexual desire seemed to have subsided. Where Geir did not find ways to transcend his early experiences, others told other stories.

Bjorg (83 years, female) had met Kaare (80 years, male) on the Internet months before the interview took place. She had been in therapy after her husband had passed away to sort out how her lack of orgasm and sexual desire from early in life had influenced her sexuality and self-confidence, and her unhappy marriage. Kaare had been divorced for many years and had lost interest in sex. Due cardiovascular health problems, he had some circulatory challenges in his legs, making it difficult to move. His main attitude toward sexuality had always been that it was supposed to be fun, and one should take one's time with a clear focus on pleasure. Putting words to their present sexual well-being, Bjorg said:

*I have become very brave and dare to take chances. I have dared to speak with my daughter and daughter-in-law about difficult subjects. They have been so supportive, and they have said thank you for sharing with us. 'We can learn from this', my daughter-in-law said. All this I won from going to therapy. And I dare to meet...I have met many men through that site, who have wanted me but who I have not wanted (laughs). I have gained far more self-confidence. I say I am worth something (laughs). It has come through therapy.*

Kaare, in his separate interview, added:

*It is completely unbelievable to have experienced what I have...it's like coming to heaven! She surprised me enormously. She said: 'I didn't think it was going to feel so good when you get this old!' She came, you know. That was really great..*

Geir's story was one of a man who had fought his way through many obstacles in life, and survived. He survived his violent father in childhood, and he survived deviating from

hetero-normativity and being gay. However, this survival came with a cost. Can these early negative experiences impact a man's sexuality to such a degree that he steps down from adult experiences that might do him good? Was his reaction to being mistreated and neglected by his parents to avoid intimate contacts out of fear of being mistreated again? Bjorg's narrative, on the other hand, illustrated how she interpreted her therapy sessions during her adult life, where she finally was able to talk about her lack of orgasm and the conflicts she experienced with her husband as central to her choice to be sexually intimate with a new man at age 83.

These narratives indicate links between emotional and sexual self-confidence acquired in childhood and adolescence and present sexual well-being. The experiences of the participants indicated that the emotional climate in the family may be important for how later sexual and erotic experiences are processed and coped with. What an individual learns about sexuality and sexual feelings in childhood may therefore have an impact on his or her understanding of present sexual well-being. However, this relationship is not linear or causal, as different factors encountered at different stages in life may moderate the experienced outcome. The two narratives point to circumstances beyond purely sexual matters as factors that explain the lack or presence of intimacy. They also illustrate different approaches from the parties, where Geir chose to protect himself due to fear of rejection and violence, whereas Bjorg actively took control by going into therapy to root out the reasons for her early feelings of sexual shame, before she went online and found her present lover. Does this mean that early learning about sexuality does not have any impact on later sexual well-being? Alternatively, is it that people generally do not understand the connection between early experiences and later outcomes concerning sex and intimacy? Is it because sexuality generally is being talked about in terms of sexual function and drive, which are outside the psycho-emotional realm?

### **Learning how to be sexual**

From early childhood, sexuality is learned and internalized in a culture- and group-specific sexual socialization process. In the sexual socialization process, the individual learns to attach meanings and values to sexual behaviour, and thereby comes to perceive some sexual expressions as for instance 'natural' and 'unnatural', 'good' and 'bad', and 'right' and 'wrong'. In other words, the individual learns what to appreciate and what to condemn in terms of sexuality.

Considering the narratives of the interviewed subjects, early sexual experiences serve to shape the individual as a sexual being. The analysis revealed two important learning contexts. The primary learning context is the family, where the child learns about the attitudes, emotional schemas, and scripts in relation to sexual feelings. In addition, the family serves as an important arena for transfer of knowledge about sexuality. In many ways, one could say that this context deals with the preconditions for learning society's valid sexual scripts. The secondary learning context is life outside the family, and deals with internalizing society's norms about sexuality and personal sexual experiences with others, which then, in combination with the individual's acquired self-image, contributes to the development of the sexual self.

### **Expressing love within the family**

The emotional climate in the family expressed through the display of affection and the sense of emotional security was earlier mentioned as influential on adults' later emotional well-being. Siv (68 years, female) recalled her parents' way of showing affection towards each other:

They were madly in love with each other. They were so sweet towards each other, very kind. I

never saw them kiss because that was way out of line, but you could see it in the way they were holding hands, sitting together on the sofa, going for walks together. There was no doubt. I *knew they were in love; no one needed telling me that. They were sweethearts. [...] There was never any doubt that he (father) was very fond of me. It wasn't visible; he was a very shy man, so there were never 'big words'. But there was never any doubt.*

Siv's story paints a picture of a warm and loving upbringing in a family with humorous and permissive attitudes towards sexuality and both having and showing emotions. And, although not everything was perfect all the time, she said that these experiences imbued a sense of trust in love, trust in the men she encountered, trust in her appearance and body, and a sexual self-confidence from her sexual debut. In contrast to Siv's experience, Geir (75 years) describes more negative experience of his parents' way of dealing with sexuality:

*I think they (his parents) very seldom had any sex. They didn't have a loving warm relationship, there was no cordiality there, no signs of love. They had a hard life.*

It may be that Geir did not find any positive role modelling from his parents how to express love and intimacy. This may have had a bearing on his own lack of intimate relationships as an adult.

The participants' childhood environment was seen as an important prerequisite for learning about sexuality. Meanings and values connected to sexuality were transferred to the child in different ways. As narrated by Siv above, meanings of sexuality could be communicated indirectly through jokes and humoristic remarks from adults:

*There was a lot of humour in my family, in the shape of jokes, kind of slightly 'on the edge' joking, nothing sleazy or anything. The men mostly expressed it; but the women were laughing heartedly.*

Sexual talk in the family here portrays the norm that men were allowed to initiate sexual topics, but that it might have been less appropriate for women to do so, although within the context of joking, female participation was accepted. Siv recalled that when the women surrounding her were alone, they could joke and talk about more serious sexual topics among themselves. This represented an attractive environment for learning about sexuality.

Restrictions on sexual behaviour, and particularly on female sexuality, were communicated in terms of how girls should behave to avoid becoming pregnant. Menstruation was often talked about in a practical way when it became a reality, abortions at best in relation to threats of pregnancy, rather than an option or a solution. The meaning of contraception was hardly mentioned. When Bjorg accidentally found her mother's diaphragm while playing in her parents' room at an early age, her mother started explaining how babies were made, an explanation she did not quite believe at that age.

However, in some families there seemed to be a more emotional focus and willingness to inform children about sexual matters. This was narrated, for example, by Tor (67 years, male):

*I learned a bit from my mother about girls and sexuality, how they thought and felt, how one was to behave. She was quite direct about it, that there could be babies, that one should love each other, and that is within the frame of marriage, or at least one should be engaged, in a committed relationship, and that you could get very horny and all that.*



In other families, sex was not explicitly talked about, but at the same time, it was not presented as shameful or taboo. Attitudes and norms connected to sexuality were communicated indirectly, often non-verbally or pragmatically. Some participants, like Olav (78 years, male), had parents who were more accepting than others, although they were not described as explicitly showing their affection for one another:

(They) showed affection for each other, but I remember I had a friend whose parents showed each other more affection, and I told my mother. We are all different, mom said and laughed.

Although tolerance for the most part was in relation to heterosexuals, Gro (69 years, female) grew up under less common conditions:

*My parents were artists...the artist community was very small where we lived, there was the theatre, the orchestras, and the painters; it was such a small society and everybody knew everybody. And they had parties, at times a lot, taking turns. At our house, there were kids, so you didn't have to find a babysitter, so (they) could have parties at our house, and it was like...two men sitting in the sofa making out...and that was just fine...so when people started talking, like 'Oh, my God, gays!'; I didn't understand what they were talking about, because it was quite all right, completely natural.*

In Gro's home, she learned that different kinds of sexual expressions were accepted. She came to understand that homosexuality was no problem, to a degree that she was surprised that it had been illegal when she heard on the radio in 1973 that the ban was lifted. As expected, not all participants had experienced this kind of accepting attitude in their home environment. Although in Geir's case, the negative attitude, not only to homosexuality, but to emotions in general, represents an extreme. He explained his present feelings like this:

*It's this loneliness. It is rooted in my childhood, and the discrimination of homosexuality [...] in my teenage years, my twenties and thirties. You carry the inheritance from childhood on, it stems from my dad who hit me, because of my softness. I cross-dressed when I was a child, a short period of 2–3 years before the interest disappeared when I was about 8–9 years old. I think he (the father) couldn't stand it and I think he hit me because he saw something he himself had in him. [...] He wasn't very masculine; he gave a cold, chilling impression. It would not surprise me if it had to do with sexual orientation.*

In some families, like Kaare's (80 years), adult reactions revealed that sex was seen as taboo: '*One wasn't to talk about it. It was very secret. The stork came with the babies*'.

Some of the participants grew up in families where talking about and displays of sexuality and sexual feelings were prohibited, repressed, or even negatively sanctioned. In Kaare's case, this did not seem to have had a negative influence on his later attitude toward sexuality and his present sexual well-being. At the age of 80, he had started a new romantic relationship with satisfying sexual activity. Nevertheless, he said that he did not understand anything about sex until he had intercourse for the first time and learned how to sexually please a girl at the age of 15 years. However, he remembered having sexual feelings before that age. These narratives illustrate that being exposed to parents' attitudes towards and displays of sexuality shapes how people understand their own sexual feelings.

## **Understanding sexual feelings and the meaning of nakedness**

Olav's (78 years) earliest memory of sexual feelings dated back to when he was 5 years old and saw naked women:

Mom and her friends were lying on their stomachs, sun tanning in all their glory. I was so young they thought it was OK that I could stay there. It made a big impression. I think I perceived it as sexual because they were naked. And they made themselves sexy. *That's what I thought. But they didn't think so. It wasn't their intention. They just wanted to tan.*

In retrospect, Olav interpreted the situation as sexual with reference to the women's nakedness. He also assumed that the women had an intention of showing off in a sexual way. This latter assumption may have been a consequence of later interpretation while reflecting on the memory, as at this stage of his life, he only had limited knowledge of valid culture-specific codes and actions connected to sexuality.

Geir (75 years) said that nakedness was something unnatural when he grew up, and he felt that his parents' attitude towards nakedness may have had a negative influence on his own self-confidence as an adult.

I have never seen my father completely naked. My mother was hiding herself from us children. There was nothing natural about it. My brother teased me for being scantily built, as my mother once had said. *I became shameful of myself. I didn't like my body. [...] It has probably held me back from seeking contact, being shameful for not being good enough for others. So, I haven't liked to look for a boyfriend or to get to know someone. I have been very reticent because of my body and my background, and the lack of good relationships with people. I think that if I hadn't carried with me this insecurity from my childhood, and had liked my body, this would probably not have inhibited me as much.*

In other families, nakedness in everyday situations seemed to be perceived as more natural. This may have signalled more positive and accepting attitudes toward the body and sexuality. Tor (67 years) recalled the following:

We wandered around (naked) all the time. I had this idea of laying naked in bed and when I had to go to the bathroom, I could encounter my mother. *Totally no problem. I don't think we thought much of it. It was never a topic.*

Many of the participants, both men and women, recalled a body culture in the family that portrayed a relaxed, pragmatic, or humoristic attitude to bodily functions, although not explicitly sexual bodily functions. As such, Tor's account illustrated a common situation. His mother's relaxed way of handling her son's nakedness communicated a permissive attitude to nakedness, which may have created a climate to learn that nakedness was something 'normal' and 'natural' and not only related to sex.

## **Sexual play as a way of learning sexual scripts**

Through sexual play, children explore how sex is done, relevant emotions, generally about relations, regulating one self and the other, practicing adjustment, learning rules, personal autonomy, what one likes or not, what is right and wrong, and what is good or bad (Gagnon & Simon, 2005). According to Gagnon and Simon (2005), human experiences become organized in emotional-cognitive sexual scripts through interaction with others. Bjorg's (83 years) earliest memory of something, which resembled sexual play did not wake sexual feelings in her, but may have given her a sense of how something sexual is done in the adult world.

I remember we played something that was called 'thrusting'. We were very young then. None of us knew what it was. We just knew we were supposed to lay on top of each other. I sensed that it was something secret, something about grown-ups.

On learning how to be sexual, Siv (68 years) explained:

I think it (sex) came naturally. (We) saw animals do it. And then there was more direct talk from other kids. Some were more precocious than others. [...] *My cousin and I were allowed to engage in sexual play when we were small without intervention from our parents – they were just grinning. I remember one time they said, giggling: 'You guys are going to bed soon, aren't you?'. There was a lot of trust.*

In many of the interviews, explicit references to early childhood experiences were found. Often, these settings were less of an explicitly sexual kind, and more connected to emotional experiences which reflected on one's self-image, on one's general outlook on life, how one had learned to handle emotions, conflict or rejection, and which problem-solving strategy one tended to use. Gro seemed less concerned about what the boys she played with wanted sexually. Seeing herself as afraid of 'everything' as a child, the sexual play situation seemed to increase her self-confidence.

I had some sexual experience in like some bushes with some boys. I remember I took off my pants, *but I knew I shouldn't do that*, so I never told anyone, I never told my mother. I think it was in 3rd or 4th grade. The boys were bothersome, terrible bullies...but in the dark, in the bushes, I think I was passive. *I let it happen. I didn't do it because I wanted out of desire, I remember that clearly. It just was very exciting...because it was dark and because it was a boy. I used to be one of the children who was anxious, and then I was one of those who dared a bit...felt a kind of inner satisfaction that I wasn't a complete sissy.*

The adult Gro showed a pragmatic attitude to the sexual part of the situation she experienced as a child. Protected by the dark and secrecy, she learned that she could master sexuality by daring to participate in letting 'it' happen. In this way, she both learned and showed that she could have quite relaxed attitudes towards sexuality and sexual feelings.

Sexual play could also take place between children of the same sex. Tor (67 years) said:

Well, me and my cousin were jerking off kind of, when we were at that age, like 13–14 years old, he wanted me to do it, I remember, he wanted me to tag along. I thought it was a bit odd, but I went with him. It was kind of OK and it didn't become embarrassing afterwards.

Although Tor's experience is not uncommon among children and adolescents, it seemed as if this activity subsided as dating in accordance to one's sexual identity started, unless one had a homo- or bisexual identity, like Geir (75 years):

The boys used to play around in the classroom, showing themselves naked to other boys and stuff. It was common play, and if you looked too much, I remember, like 'Are you jealous?', kind of a humorous way of talking about sexuality.

As we have seen, in many of the interviews, explicit references to early childhood sexual experiences were often connected to emotional experiences which reflected on one's self-image, one's general outlook on life, how one had learned to handle emotions, conflict, or

rejection, and which problem-solving strategy one tended to use. This suggests that sexual scripting influences much broader consequences than strictly sexual ones, and can have a great influence beyond the sexual realm, linking early sexual experiences to factors associated with mental health and well-being. Further contextualizing these personal experiences came from different sources of sexual knowledge.

### **Sources of knowledge outside the family**

In addition to what parents told their children about sex, and the imposed attitudes and norms that were conveyed at home, many of the participants mentioned other sources of information about sexuality. As children were enrolled in the school system, sex education of varying quality was presented to some of them.

*[...] hopelessly ridiculous at school of course, with these posters, right, and the penis and the vagina, right...I remember it was mostly very embarrassing. (Tor, 67 years)*

The awkwardness of the school's sex education, with its medical-technical approach, could at best provide some information about the reproductive system. Less often did the teaching contain information, which seemed relevant for the children, which they had not learned about at home or through other sources of knowledge. Most of the participants did not receive any formal education about sexuality at school. On the contrary, peers represented a more important and informal source of sex education, by transmitting valid attitudes and norms connected to sexuality, presented in both language and in practice.

Another common channel for learning about sexuality, particularly for boys, was erotic magazines and pornography.

*Between the age of 13 and 14, it (sexual feelings) was related to dreams, fantasies, and imaginations. Because we looked in Cocktail and Playboy (erotic magazines). [...] Dad bought Playboy. I don't think she (mom) objected it. It was kind of accepted in a way. (Tor, 67 years)*

Although sex was not talked about explicitly at home, some children found anatomy books in the bookshelf:

*They were like medical with pictures and stuff, it wasn't that we had to hide, but my friends who came home thought it was strange, that we could just sit down on the sofa and look at these books whenever we wanted to. (Gro, 68 years)*

Classical novels which were popular at the time the informants grew up, like 'Lady Chatterley's lovers', or novels by Henry Miller, also served as sources of knowledge about how sexual feelings and practices were carried out and understood. Bjorg (83 years), on the other hand, did not grow up with much access to knowledge from school or books at home, except for popular romantic kiosk literature using dramatic metaphors like 'the earth bursting' when talking about sexual feelings. Bjorg said she could not recognize these feelings when she started to be sexual. She said, '*I didn't experience anything at all!*' The kiosk literature available to her did not give any instructions on how to achieve orgasms. When she started having sex, she blamed herself for not feeling what she thought was expected, and kept it a secret from her partner. Reflecting on the burden of shame she carried, and the sources of information for young girls at that time, she saw the stories communicating '...expectations that were completely out (unrealistic), utterly idiotic.'

The sources of knowledge were, as we have seen, quite varied and of different quality. This implies that the knowledge about sexuality among this age group, despite relatively little shame in the culture, varies considerably. Even if several participants said they had acquired more knowledge about sexuality during their lifetime, it may not always play a role in how they understand their current sexual well-being. What seems to matter more is whether they have a partner they feel good with, and whether they tend to be active in their strategies to solve problems.

## Discussion

### Linking the past and present

We have seen examples of how early experiences – cognitive, emotional, and sexual – can influence sexual well-being later in life. However, these possible outcomes do not seem exclusively determined by experiences in early years. Several participants told stories where experiences in adulthood may have influenced their present sexual well-being. Adult life presents opportunities to acquire new experiences, which can modulate earlier experiences. At the same time, people have varying degrees of ability to change their life situation, depending on learned coping strategies. However, this also depends on their partner, as well as increased knowledge and insight into sexuality. Aging seems to bring up older emotional patterns in the face of stressful life changes and reduced capacity to handle challenges, like attachment styles (Howe, 2011), which also influence sexuality and intimate relationships. Hence, it is relevant to consider early experiences in understanding older adults' sexual and emotional well-being.

### The past as socially constructed

The reality of the past as experienced is not objectively given, but rather, is socially constructed. The idea that the present understanding is shaped by the understanding of the past has been challenged by Gagnon and Simon (2005, p. 9), who claimed that '*...the present significantly reshapes the past, as we reconstruct our biographies in an effort to bring them into a greater congruence with our current identities, roles, situations and available vocabulary*'. This suggests that the findings from this study must be understood as a product of a process of negotiating the language and wording, which could be used during the interview and the degree of detail, which could be conveyed. This may have imbued a continuous rewriting of the meaning of what was discussed, as the conversation progressed. It is then likely that these recollections are coloured by the factors defining the situation and their lived lives.

Many participants had not reflected much on how the past may have influenced the present in terms of sexuality, although some had very clear thoughts on this connection. Most participants said they had never talked to anyone about these matters and that during the interview, they remembered things they had forgotten from childhood. This may be a consequence of these age groups growing up in a society which to a lesser degree emphasized personal psychological explanations for the link between past experiences with the present, but rather circumstantial explanations, as compared to the perspective of current generations. Moreover, the arbitrary access to adequate knowledge of sexuality in the participants' formative years could explain a lack of understanding of the connection between sexual and emotional development. How we understand and interpret our life stories depends on the cultural and historical circumstances (Berger & Luckman, 1967). The participants in this study were born between 1933 and 1950, which means that they had their childhood and teenage years under very different conditions and value systems with regard to love and sexuality.

Accumulated lifetime experiences in adulthood after one's sexual debut also influenced self-image and perceptions of social reality. With increasing personal autonomy and competence, as well as social changes and accessible knowledge and contraception in the second half of the 20th century, the possibility to be an agent in one's own sexual health and well-being emerged. This also may have contributed to childhood increasingly being acknowledged as the period in life when meaning is attributed to sexual actions, as well as group- and culture-specific sexual attitudes and norms expressed at home, school, and among peers.

### **Conclusion**

This study has illustrated that sexual well-being in older adults in Norway is important beyond sexual functioning. Sexuality seems to play a more important role in the lives of older adults than what is often assumed. However, individuals differ in knowledge and how they adapt to age-related physical and social changes in relation to their sexuality. Further, the study indicates that the lack of understanding of one's own sexual history may be a consequence of lacking knowledge about sexuality and of psychological aspects of one's well-being, both emotional and sexual, which are reciprocally dependent. This has consequences for health practitioners. There is a need for information about sexuality and psychological well-being, which could be met with specialized sex education programs for older adults. It also shows the necessity or relevance of creating forums where older adults can gain knowledge, but also exchange thoughts on personal experiences, to improve personal competency in one's own sexuality and relational abilities in general.

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