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INTEGRATIVE REVIEW OF THE LITERATURE

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APPROACHING SEXUALITY IN AGING: AN INTEGRATIVE REVIEW

Abordagem da sexualidade no envelhecimento: uma revisão integrativa

Enfoque de la sexualidad en el envejecimiento: una revisión integrativa

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ABSTRACT

Objective: Identify scientific evidence in the literature that influences health professionals' approach to sexuality in the elderly. **Method:** integrative review research, through search for scientific articles in the databases MEDLINE and CINAHAL and in Virtual Libraries/Bibliographic Repositories LILACS, Scielo and Science Direct, focusing on health professionals and sexuality in elders. **Results:** fourteen articles were selected, showing that most health professionals have limited knowledge, varied attitudes and do not approach the subject proactively. The lack of knowledge and training on the subject, lack of time in appointments and the discomfort generated by the theme were reported difficulties. **Conclusion:** most health professionals neglect to talk about sexuality with older patients. The minimum attention to the subject provides an embarrassing environment for both elders as health professionals.

Descriptors: Aged, Aging, Sexuality, Health personnel.

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RESUMO

Objetivo: Identificar na literatura evidências científicas que influenciam a abordagem da sexualidade na pessoa idosa pelos profissionais de saúde. **Método:** pesquisa de revisão integrativa, por meio da busca de artigos científicos nas bases MEDLINE e CINAHAL e nas Bibliotecas Virtuais/Repositórios Bibliográficos LILACS, Scielo e Science Direct com enfoque sobre profissionais de saúde e sexualidade em idosos. **Resultados:** foram selecionados 14 artigos que evidenciaram que a maioria dos profissionais de saúde possuem conhecimento limitado, atitudes variadas e não abordam o assunto proativamente. A ausência de conhecimento e treinamento no assunto, a falta de tempo nas consultas e o desconforto gerado pelo tema foram dificuldades relatadas. **Conclusão:** a maioria dos profissionais de saúde negligencia a conversa sobre sexualidade com os pacientes mais velhos. A mínima atenção ao assunto proporciona um ambiente embaraçoso tanto para os idosos quanto para os profissionais de saúde.

Descritores: Idoso, Envelhecimento, Sexualidade, Pessoal de saúde.

RESUMEN

Objetivo: Identificar evidencia científica em la literatura que influye em el enfoque de los profesionales de la salud sobre la sexualidad em los ancianos. **Método:** investigación de revision integral a través de la búsqueda de artículos científicos en las bases de datos MEDLINE y CINAHAL y en las Bibliotecas/Repositorios Virtuales LILACS, Scielo y Science Direct que se centran en los profesionales de la salud y la sexualidad en los ancianos. **Resultados:** seleccionaron 14 artículos que mostraban que la mayoría de los profesionales de la salud tienen un conocimiento limitado, actitudes variadas y no aborda de manera proactiva. La falta de conocimiento y capacitación, la falta de tiempo en las consultas y la incomodidad generada fueron dificultades reportadas. **Conclusión:** la mayoría de los profesionales de la salud descuidan hablar sobre sexualidad con pacientes mayores. La más mínima atención al tema proporciona un ambiente vergonzoso tanto para los ancianos como para los profesionales de la salud.

Descriptores: Ancianos, Envejecimiento, Sexualidad, Personal de salud.

INTRODUCTION

Sexuality is a fundamental constituent in the human life cycle, a health-related dimension, and an important component of life. Recognized as a basic need, it can be significant in maintaining relationships among individuals and cannot be fragmented from other aspects of life.¹⁻² Sexuality, sexual health, and the expression of sexual identity are recognized as central components of quality of life and well-being.³

The aging population provides the need for health systems worldwide to learn the growing demands of this age group. The new reality includes elderly people in various physical, cognitive and psychological conditions, and it is essential to understand this process in all its aspects, and sexuality is one of the essential components of this approach.⁴

The World Health Organization defines sexuality as an energy that stimulates love, contact, tenderness and intimacy, integrating people in the way they feel and touch themselves, motivating thoughts, actions, interactions, physical and mental health.³

The expression of sexuality is not limited to sexual

intercourse and can be reflected through physical intimacy such as kisses, hugs, touches and the emotional sharing of joy, affection and values, being a basic need of the human being and cannot be fragmented from other aspects of life.⁵ Studies show that the elderly continue to experience sexual interest and wish to maintain their sexuality.⁵⁻⁷

The subject of sexuality in aging, however, is still surrounded by prejudice from the youngest, the elderly and many health professionals, being an area of gerontology little addressed. There are many cultural myths that can result from the portrayal of the media and many common beliefs such as asexual old age and the sexually undesirable and frail elderly, by physical changes and funny connotations.⁸

Despite this, the elderly have sexual activity as evidenced by a Swedish and American survey that 46 % of men aged 70-80 reported having at least one orgasm in the previous month and that 75 % of men and 50 % of women aged 65 and over reported sexual interest, respectively.⁶ Aging, however, can affect sexuality negatively, with changes appearing related to desire, arousal, sexual confidence, and satisfaction.⁹

Evidence suggests a link between quality of sex life in the elderly and better physical health in the United States, as well as greater satisfaction with life in Israel.⁶ This life judgment may also be related to better cardiovascular health, mood, and longevity in this age group.⁸

Considering the health benefits secondary to maintaining sexuality and its strong connection with quality of life, health professionals should identify the peculiarities of the elderly to help them preserve a satisfactory sexual life.¹⁰

Thus, the following guiding question arose: Do health professionals address the sexuality of older people? This review study is justified by the need to find articles in the literature that address our object of study on the influences on the recognition of sexuality by health professionals as a component of health care for the elderly.

To answer this question, this study aims to identify in the literature scientific evidence that influences the approach of sexuality in the elderly by health professionals.

METHODS

It is an integrative review search, built through the search of scientific publications indexed in the following databases: Medical Literature Analysis and Retrieval System Online (MEDLINE), conducted by the search engine Pubmed and Cumulative Index to Nursing and Allied Health Literature (CINAHAL), in addition to the virtual libraries / bibliographic repositories Literatura Latino-Americana e do Caribe em Ciências da Saúde (LILACS), Scientific Electronic Library Online (SciELO) and Science Direct.

The six phases of the integrative review process were outlined. The first phase consisted in the elaboration of

the guiding question, which consists in a questioning that directs the study within the theme: How is the approach to sexuality in the elderly made by health professionals?

The second phase comprised the search of articles in the database and virtual libraries / bibliographic repositories having been carried out in February and March 2018. For the advanced search, using Descriptors in Health Sciences (DECS), namely descriptor in Portuguese: Aged, Aging, Sexuality, Health Personnel (health professional) and descriptor in English: Aged, Aging, Sexuality, Health Personnel, being considered the Boolean term AND.

The following criteria were established for the selection of articles: publications in the last 10 years (2008-2017) that focused on health and sexuality professionals in the elderly or health and sexuality professionals in aging. Initially the inclusion criteria were applied from the titles, later to the abstracts and ultimately to the full texts. Articles addressing sexuality by health professionals in all age groups were excluded, as well as publications such as editorial, case reports, letters to the editor and manuscripts.

Then, in the third phase for the characterization of the articles, after research and exclusion process, a form was prepared with the following information: article identification (title, year, authors, journal, location of the study, language) and collection of information regarding the sample, type of study, collection instrument, difficulties encountered by health professionals in approaching sexuality in the elderly, type of professionals approached and the variables most frequently addressed in the studies.

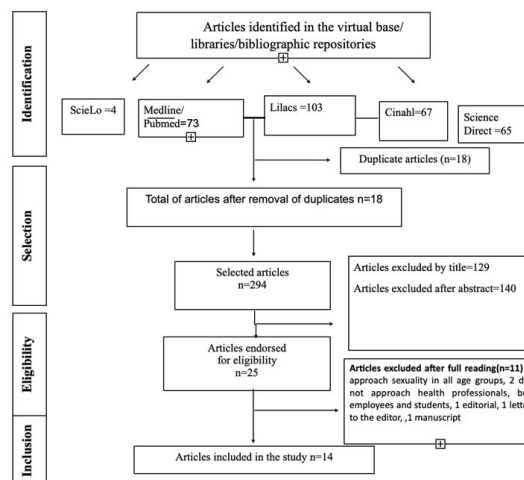
The fourth phase was characterized by organizing the information collected in an instrument in Excel® spreadsheet format. The fifth phase was followed by a discussion of the results, which were interpreted and summarized, comparing the data found in each selected article with the literature on the subject.

The sixth phase consisted in the presentation of structured results based on the variables established in the collection instrument, making it possible to better understand and compare the selected articles.

RESULTS

The search in the databases and Virtual Libraries / Bibliographic Repositories made it possible to find, initially, 312 articles: 73 obtained in MEDLINE by the search engine PubMed, 4 in SciELO 103 in LILACS, 67 in CINAHL and 65 in Science Direct. Of these, the titles were read first, then the abstracts and, ultimately, the full texts, selecting the articles for the study. Thus, 14 articles were left. **Figure 1.**

Figure 1- Selection and inclusion flowchart of the articles about the aspects that influence the approach of sexuality in elderly by health professionals. João Pessoa, PB, 2008-2017



Source: Authors The selected articles were listed with the following information: article identification (title, year, authors, journal, place of study, language). **Table 1**

Box 1 - Selected articles on aspects that influence health professionals' approach to sexuality in the elderly. João Pessoa, PB, 2008-2017

N°	Title	Autores	Year	Journal	Language/Location
1	Sexuality, sexual health and older people: A systematic review of research on the knowledge and attitudes of health professionals	Haesler E., Bauer M., Fetherstonhaugh D.	2016	Nurse Education Today	English/Australia
2	Exploratory study of Australian aged care staff knowledge and attitudes of later life sexuality	Chen YH ¹ , Jones C ^{1,2} , Osborne D.	2017	Australasian Journal on Ageing	English/Australia
3	Talking to healthcare providers about sex in later life: Findings from a qualitative study with older Australian men and women	Fileborn B e et al	2017	Australasian Journal on Ageing	English/Australia
4	Are sociodemographic characteristics, education and training, and attitudes toward older adults sexuality predictive of willingness to assess sexual health in a sample of US psychologists	Greener MF., Gonzalez CA, Sprankle E.	2015	Sexual and Relationship Therapy	English/USA
5	Sexuality and dementia: An E-Learning resource to improve knowledge and attitudes of aged care staff	Jones C. et al	2016	Educational Gerontology	English/Australia
6	Education of residential aged care staff regarding sexuality and sexual health in later life	McAuliffe L. et al	2015	Journal of Clinical Nursing	English/Australia
7	Sexuality in older adults: Effect of an education intervention on attitudes and beliefs of residential aged care staff	Bauer M. et al	2012	Educational Gerontology	English/Australia

8	Sexuality in older age:essential considerations for healthcare professionals	Gosney ATM	2011	Age and ageing	English/UK
9	Sexual Activity and Aging	Lochlainn NM. et al	2013	JAMDA(Journal of the American Medical Directions-Elsevier)	English/Ireland
10	Assessment of physicians addressing sexuality in elderly patients with chronic pain	Cherpak GL, Santos FC	2016	Einstein	English/Brazil
11	Aging sexuality :knowledge and perceptions of preparation among primary care providers	Hughers AK, Wittmann D.	2014	Journal of Sex and Marital Therapy	English/US
12	Nurses knowledge and attitudes towards aged sexuality :validity and internal consistency of the Dutchversion of the aging sexual knowledge and attitudes scale	Mathieu L. et al	2013	Journal of Advanced Nursing	English/Belgium
13	Sex, women and the menopause :Are specialist trainee doctors up to it? A survey of views and attitudes of specialist trainee doctors in Community Sexual e Reproductive health and obstetrics gynaecology around sexuality and sexual healthcare in the (peri) menopause	Gieser H.	2015	Post Reproductive Health	English/UK
14	Nurses perceptions of sexuality in institutionalized elderly:a literature review	Mathieu L. Elssen VK,Gastmans C.	2010	International Journal of Nursing Studies	English/Belgium

Source: Prepared by the authors (2018).

All selected articles are available in English. The largest number of publications occurred in the years 2016 (n=three) and 2015 (n=three), followed by the years 2017 (n=two) and 2013 (n=two). Regarding the nationality of the articles, most were Australian (n=six), followed by American (n=two) and English (n=two) and only one article of Brazilian nationality, prepared in the city of São Paulo. The sample sizes of the studies ranged from 52 to 112 health professionals. The review studies presented between 18 and 23 articles as selected, being a study involving 1094 analyzed surveys. The only study that obtained in the sample the elderly had as sample size 53 participants.

The types of studies were mostly transversal (n=seven), followed by review articles (n=four), longitudinal (n=two) and methodological (n=one). The samples were predominantly composed of health professionals, being mostly nurses, followed by doctors, in a larger number of general practitioners, but with three studies exploring specialties such as geriatrics and gynecology. Other professionals included were professional caregivers of the elderly, nursing auxiliaries and psychologists. Only one article had as sample the elderly because it evidenced their experiences and perceptions of talking about sexuality with health professionals. In four studies, doctors and nurses were approached together.¹⁰⁻¹³

The place of approach of health professionals was largely

unspecified. Among those that presented some specificity, six were performed in long-term institutions^{05,14-18} for elderly and one in primary health care.¹³

The most used collection instrument was the Aging Sexual Attitudes and Knowledge Scale (ASKAS). This scale was developed at the University of Trinity, Texas (in 1972) and evaluates the knowledge and attitude towards the sexuality of the elderly in an indirect way that can be used with the elderly, with professionals who work directly or indirectly with aging and with any group of people who have contact with the elderly (for example, families and volunteers). The ASKAS consists of 61 items, divided into two parts. The first evaluates the knowledge about sexuality of the elderly and the second evaluates the attitude towards this sexuality. Other instruments used were questionnaires, semi-structured interviews, and the Staff Attitudes about Intimacy and Dementia (SAID) scale of twenty items, which evaluates attitudes about intimacy and sexuality among people with dementia in residential care facilities.^{05,18}

The variables most frequently addressed in studies were attitudes and knowledge. Attitudes, which were assessed by the ASKAS scale, varied from less permissive to relatively permissive, while attitudes assessed by questionnaires constructed, in general, were considered positive. However, knowledge was limited and of the studies that specified the approach to sexuality, most did not address the presence of proactivity.^{4,7-8,11}

An article¹⁰ showed that 96.7% of geriatrics consider it important to manage sexual problems, but 43% did not address sexual history, and the same article showed that U.S. gynecologists had less permissive attitudes than Turkish doctors and Australian nurses.

The main difficulties encountered by health professionals in addressing sexuality in the elderly were the lack of knowledge and training on the subject, lack of time in consultations and the discomfort generated by the subject, and for the study that analyzed the group of elderly, they reported as barriers the discomfort and little opportunity to talk about the subject. Four articles approached the accomplishment of educational intervention in the area with better results, in relation to knowledge and attitudes, after intervention.^{10, 14,16,18}

The diversity of objectives and methodology of the studies included prevented statistical analysis of the results. However, although they make a meta-analysis impossible, the included articles bring relevant information for the understanding of assistance to the sexuality of the elderly.

DISCUSSION

The evidence that sexuality remains important for men and women as they age is unquestionable,¹³ however, the results of this study show that when the subject encompasses the approach by health professionals, research is scarce in Brazil, which was demonstrated by the meeting of a single

article involving the subject in São Paulo. Worldwide, there was also a concentration of research in Australia.

In this review, most of the studies that evaluated the attitudes of health professionals towards sexuality in the elderly indicated that they varied between less permissive and relatively permissive, but it should be considered that the ASKAS scale has its limitations, since there is an emphasis on addressing attitudes towards expressions of sexuality in specific groups of elderly residents in long-term institutions¹⁹ which may have contrasted with the finding of positive attitudes in studies that did not use the scale. Nevertheless, this finding was corroborated by a study²⁰ that highlighted the meeting, by several researchers, of negative attitudes of health professionals in general to approach the issue of sexuality with older adults.

The results of this review showed that most health care professionals do not proactively address the issue, which was certified by article²¹ stating that only 15, 5% of primary care physicians actively ask about the sexual problems of patients in all age groups. Also, research²² showed that there was no opportunity for most elderly people to discuss or receive guidance on sexuality and the prevention of sexually transmitted diseases (STDs) from the primary care team. The absence of discussion may be a contributing factor in the increase of HIV / AIDS diagnosis rates in the elderly, as highlighted by several authors.^{12,21,23}

The difficulties mentioned in the approach were pointed out in this review, showing that most professionals felt unprepared to address the issue, due to lack of knowledge and training, which occurred similarly to an article²⁴ in which 69.4% of Turkish doctors reported having inadequate knowledge about sexuality in old age and reported in a study at Yeshiva University in New York in 2010, in which many doctors and nurses, as well as medical and nursing students, have poor knowledge about sexuality in aging, in addition to poor ability to perform sexual history and adequate provision of sexual counseling.

Similarly, there is reference²³ to the unpreparedness and discomfort of professionals in dealing with these issues during their daily clinical work in all age groups. Possibly, this occurs because the subject receives little attention in the education and training of these professionals and they are influenced by the stereotypes of asexual aging.²⁵

Furthermore, this review found studies showing an improvement in knowledge and attitudes after an educational intervention and also study²³ indicates progress in the ability of professionals to deal with issues of sexuality of patients after participating in training on this topic, regardless of the workload of the course.

The reflection of the difficulty in approaching sexuality in the elderly also extends to the field of research, as can be observed, as a limitation, the small sample size of the selected articles in which they showed to be a limiting factor in each study of this review.

The future perspectives reported in the articles found

were the creation of strategies to improve education and knowledge in this area to sensitize health professionals in order to provide adequate training.

CONCLUSIONS

Most health professionals neglect to talk about sexuality with older patients. The reasons found were the lack of knowledge and adequate training, the lack of time in consultations and the discomfort generated by the subject. Thus, this minimal attention given by professionals to the subject provides an embarrassing environment for both the elderly and these professionals. The lack of information not only confuses the problem, but also perpetuates it.

There is a need for actions in this area, with the sensitization of the professionals to wake up on the subject in order that an adequate transmission of knowledge about sexuality occurs in the elderly, occurring the construction of necessary skills for this approach.

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The authors declare that there is no conflict of interest