Introduction

Is old age a developmental phase of degenitalization of the body when the two ideal bodily forms, two ideal morphologies—the male and the female—should be dismissed? This question, inspired by the work of Judith Butler (1990, 2004), has guided my reading of the interplay of gender, aging, and sexuality in texts produced by Brazilian gerontologists. These Brazilian gerontologists argue that decreases in sexual activity in old age are, in fact, replaced by a unique and intense sexual pleasure, based not so much on genitals, but rather on a more holistic bodily experience. The aim of this article is to show how women in senior citizen clubs and men in retiree associations react to the discourses of these specialists.

Prescriptions by gerontologists and geriatricians for ‘successful’ aging in Brazil tend to eroticize old age, simultaneously reproducing a gender-based sexuality (Foucault 1990). One of the ideas they specifically promote is the degenitalization of male sexuality. That is, these experts insist on the importance for older men to explore new areas of their bodies to increase sexual pleasure, similar to the more diffuse notion of female sexuality. In the case of older women, sexual activity is often linked to the questioning of a restrictive moral code interconnected with male domination (Bourdieu 2001), which supposedly forms the basis of their sexual learning. Older women are stimulated by these professionals to delink the practice of sex from their partner’s desires, and instead to focus on

Aging, Gender and Sexuality in Brazilian Society

Guita Grin Debert, PhD
Full Professor, Department of Anthropology
Institute of Philosophy and Human Sciences, Universidade Estadual de Campinas

Abstract

Drawing on the interplay between gender, aging, and sexuality, the aim of this article is twofold: (1) to show how Brazilian gerontologists treat gender differences and sexual activity in old age; (2) to analyze the ways discourses regarding the aging body and sexuality are perceived and evaluated by older women and men. I argue that attempts of gerontologists to eroticize old age have to contend with the widespread notion that the desire for sex is inevitably lost with age. Thus, in the retiree associations that were studied, men had a tendency to assume they are not ‘old’ because their erectile function was still in good condition, and divorced or widowed women, in senior citizen associations, tend to regard themselves as happy due to having freed themselves from the sexual obligations imposed by marriage. In both cases, the dominant belief that there is a loss of sexual desire in old age was reproduced.

Keywords: sexuality, gender, aging, Brazilian gerontology, sexology

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their own. This suggests that old age also brings with it the possible freedom from concerns over children, as well as from judgments of society. Thus, aging can create a space for women to actively engage in their sexual interests, openly assuming their interest in sex.

The pervasive dogma that guided studies in gerontology starting at the beginning of the 20th century considered aging to be a homogeneous experience, as the problems faced by the elderly were so similar, and prominent in the public sphere; consequently, differences of ethnicity, class, gender and religion were minimized. Some analysts assumed that the later stages of life would be characterized by androgyny. Gender roles would become less sharply defined: older men would begin to show increasingly more affective, nurturing tendencies, while older women became more independent and assertive than their younger counterparts (Gutmann 1987). Some researchers report that the traditional domestic division of labor into female and male tasks tends to diminish with age (Sinnott 1977; Arber and Ginn 1995); this convergence of gender roles is explained, by some researchers, as a product of hormonal changes (Gutmann 1987). Social roles, values and attitudes considered typically masculine or feminine tend to mix in old age. Or, aging involves a masculinization of women and feminization of men, so that gender differences would dissolve in the “unisex normality of old age” (McGee and Wells 1982; Marshall and Katz 2006).

A central part of my argument is that the efforts of gerontologists to eroticize old age contend with a double reaction: 1) sexual function promotion campaigns, particularly marketing by the pharmaceutical industry which have been widely disseminated through the Brazilian media in the last decade and which directly link sexuality to the erectile function; 2) the common Brazilian assumption that the decline in desire, loss of physical attractiveness and the virtual erasure of sexual identity are among the leading marks of old age. This view leads to a widespread disgust and fear of bodily degradation, along with the well-known positive evaluation of youth in Brazilian society. Interestingly, both of these tendencies reinforce each other, as the marketing campaigns coincide with these much older conceptions that characterize Brazilian culture along the axis of race, gender, and social class.

Methodologically, I juxtapose content analysis of texts produced by gerontologists with an ethnographic account that was undertaken in senior citizen clubs or third age programs which are primarily enrolling a female audience, and in retiree associations which are attended mostly by males. I show how the elderly participating in these various contexts react to the Brazilian gerontological assumption that in old age the decrease in sexual activity is compensated by sexual pleasure of an amplified intensity. This article thus seeks to demonstrate the difficulties faced by gerontologists in promoting a gratifying sense of sexuality in old age, while operating within a complex culture that is dominated by a cult of youthfulness and corporal beauty in which old age is inextricably linked to a loss of libido.

The Third Age Programs and the Retiree Associations in Brazil

Third age programs can be understood as leading a fight for cultural change in the sense that they struggle against prejudices and stereotypes and celebrate the elderly and the aging process. Within this context, older adulthood is considered a privileged moment in life and one where one’s personal fulfillment, satisfaction and pleasure are in full swing and are experienced in a more mature and fruitful way.

Participation in programs for the third age is quite insignificant when we take into account the Brazilian population of elderly women as a whole, just as male participation in the associations is modest when compared to the total number of retired people in the country. In 2013, Brazil had 201,032,714 inhabitants. The population over sixty was 24.85 million (12.6% of the total), the great majority of whom live in urban areas (20.94 million). Of these, 13.45 million are women (The Brazilian Institute of Geography and Statistics IBGE 2013). However, the proliferation of general ideas from these third age programs cannot be underestimated, and they continue to reach a wider population through dissemination in the media.

The women I interviewed showed enthusiasm about the recent changes in the experience of aging in Brazilian society. They stress that, unlike their mothers
and grandmothers, they no longer have to wear black or stay at home waiting for the children and grandchildren to visit. They believe they are enjoying unprecedented liberty when compared to the elderly of the past, and furthermore, that they have more freedom than younger women. Their participation in third age programs is an expression of this and an opportunity for these women to engage in motivational activities, expand their group of friends and their repertoire of skills, and explore new identities and lifestyles.

When asked what they understood by the expression “third age,” the women enrolled in the University of the Third Age in Campinas, São Paulo State replied:

I find the third age to be an innovation, the best thing possible for the elderly, because it leaves us in total freedom. You know, it’s a great pleasure.

I felt that, despite my age, I could still be someone, still a soldier in battle.

For me, the third age is a beginning, there must be some better things there for me that I don’t know and need to know. Life is an experience that is renewed every day.

Dona Lázara, a 62-year-old seamstress who participated in a recreational group for the third age engaging in dance, singing, and yoga, can be considered an embodiment of the way these new images of aging are promoted. She made the following comment:

My big transformation began when my daughter gave me an unexpected gift: she signed me up for a workshop on dance and corporal expression. I was 49 years old and had never worn shorts. In the first classes, I felt ridiculous, old, and awkward. I continued and my mind opened – it opened to the world. I lost weight and began to feel alive.

These feelings were very common among participants in third age programs. They clearly show that well-being, as defined by these women, is not dependent on references to an active sexual life.

The women had difficulty in explaining the lack of male participation in the program. The men themselves, who comprised a small part of these third age programs, were the ones more concerned with pointing out the role of women and in explaining the lack of male participation. As some of the men said:

Men are more proud. They don’t want to give in to those who know more. It seems that the world is now turning to the side of women. We have to give way to those who have it by right.

Women are getting much more involved in everything. After women’s liberation, things have changed and I think it’s better.

I don’t know whether men are more inhibited, or they think that they’re better. (They are) Machos who think they know it all, but they don’t know what they’re missing.

In the retiree associations, men were less optimistic about social change. They claimed that young people no longer respected the elderly, which consequently undermined their status. They challenged stereotypes related to aging by criticizing governments, politicians and the media, demonstrating their mental agility and lucidity. Many were critical of the third age programs, denigrated by some as the “playground of the old,” which diverted retirees and pensioners from their real interests and their true consciousness. These men considered the exploration of new identities and the intense experience of leisure activities offered by third age programs as a form of infantilization of citizens, a kind of denial of masculinity. These views help to explain the lack of men in these programs. As a colleague of mine studying masculinity noted: “men suppress their emotions so they can play the role expected of them in our society: provider, protector, and creator.” To the elderly in third age programs this masculine ethos is denied, and instead, they are encouraged to view old age as a time to rethink life, remake projects, and develop new relationships.

Women are excited about the changes associated with aging experiences and men are vividly concerned to protect and improve retiree’s rights. However, they both react to gerontologists’ attempts to eroticize old age, as shown below.

**SEXOLOGY AND GERONTOLOGY**

Sexology is the scientific study of sexual interests, behavior, and function. As a clinical discipline, its therapeutic strategy includes the use of medicines and other interventions, such as educational techniques of behavior modeling, and use of the body in order to promote a better functioning sex life. For the elderly the goal, in most cases, is to “maximize” or “optimize” their sexual activity.
The new generation of Brazilian gerontologists are eager to emphasize the advantages brought by the aging process. Inspired by international gerontology (Katz and Marshall 2003), this new generation opposes the more traditional Brazilian gerontology that characterized old age as a state of physical decline and loss of social roles. When addressing aging and sexuality this generation enthusiastically adheres to the assumptions and empirical tradition of sexology, and further, they promote active sexuality (narrowly defined in terms of heterosexual intercourse) as a signal indicator of positive and successful aging (Brigeiro 2000).

Additionally, a statement on the nature of sexuality in old age commonly accompanies this generation’s new commitment to reconceptualizing old age. Despite the decrease in its frequency, which is acknowledged empirically, these gerontologists emphasize that sexuality can be expressed in a myriad of ways other than sexual intercourse. A book, published by the University of the Third Age at the Catholic University of Campinas, written by Sá (1991: 20), concisely summarizes this new vision of the advantages of old age:

Passions and lust are replaced by more refined pleasures. The sexual issue is resized in the sense of love, warmth, sharing, touch of intimacy between people.

Gerontologists challenge assumptions of older people as asexual beings by proposing a reversal in the conventional depictions of female versus male sexuality in old age, or by uncoupling genitalia from sexuality. Old age seems to give rise to a new phase in the course of one’s sex life; this assumption can be verified not only in the discursive reiteration of the prolongation of sexuality, but also in the description of the sexual problems faced by men and women in old age – as well as in the specific technologies produced as part of the solution. The advice regarding therapy and sex education, for example, suggests a shift of sexuality from the genital area to diverse “erogenous zones” of the body. This amplification is of such an order that there is no part of the elderly person’s body that is not a potential source of pleasure. Consequently, there is a transcendence of the very notion of ‘zone’ from that of the specialists’ understanding, to one where there are no limits or demarcations. This shift is very well illustrated by the words of psychoanalyst Sueli Souza dos Santos, whose book about sexuality and love in old age has inspired a reflection amongst professors and coordinators of third age programs.

Recovery of an elderly person’s right to a sex life implies being able to think of love in its forms of libidinal transformation, that is, other forms of love, including tenderness, physical contact that eroticize the body, such as looks, touch, the voice, rediscovering the human being’s first forms of love. (...) With aging, when the organic functions suffer loss of sexual performance, the libido(...) returns on its investment in other areas of the body, marked in the first experiences, returning to the pleasure found in other erogenous forms, such as touch, looks, the delicateness of all the sensibility. (...) It is the prejudices that make one think that the so-called andropause in men and the menopause in women are responsible for sexual difficulties. Hormone loss modifies the mechanism and frequency of erection, and also alters vaginal lubrication, thus hindering coitus. This seems to decree that penetration is the only pleasure-producing source and that the absence or difficulties in these functions incapacitate the elderly person as a sexual being (...), what interferes in his/her sex life is of a psychological and social order (Santos 2003:22-30).

In the literature analyzed, this amplification of the erogenous or pleasure zones often appears through the accounts given by the elderly themselves. However, it is above all the specialists who advise or prescribe a new sexuality. In words loaded with humor, the social psychologist, José Carlos Ferrigno – who for more than a decade, coordinated the programs conducted for the third age in SESC (Serviço Social do Comércio) in São Paulo – observes that degenitilization seems to be especially associated with men.

[ Elderly men and women] They report a different experience with their own bodies, the partner’s body, and in the relationship itself. No longer is there preeminence of the ‘big bang’ of the orgasm, no longer principally among men, erotic sensations concentrated only in the genitals, but rather full eroticization of the entire epidermis, sex throughout the entire body and permeating the whole spirit. Sex without haste. No longer is it the ‘hamburger with chips’ greedily devoured during youth, but rather a dish carefully prepared and delicately savored. (Ferrigno 1988: 16).

Women are generally encouraged by gerontologists to assume their interest in sex; in the process, all associations that limit their experimentation are disrupted – be it subordination to the will of the male partner, or concerns regarding children or other family members and society
in general. For men, Ferrigno proposes that they discover different parts of their bodies to experiment with sexually, thus making their corporal sexuality more diffuse, an aspect normally attributed to women.

This insistence by gerontologists and sexologists that sexuality among the elderly encompass far more than genital-based pleasure as it includes multiple “erogenous zones” of the body is contradicted by the messages put forth by powerful actors in the marketplace, such as the pharmaceutical industry, which persists in overstating the importance of genital based pleasure, subsequently reducing male sexuality to erectile function. In this way, the drug Viagra, which has been popularized worldwide, transforms impotence into the medical condition of “erectile dysfunction”, thereby challenging the social and psychological factors related to aging (Brigeiro and Maksud 2009; Bozon 2004).

One of the difficulties in the study of sexuality, as shown by Luiz Fernando Dias Duarte (2004), is the tension between, on the one hand, “an incitement to talk about sex” (Foucault 1990), and on the other, a movement that renounces this talk or even reflection on the theme, given the correlation between sexuality, intimacy and privacy. This tension leads to a separation between two levels of experience: a sensorial pleasure of sex (termed sensual) and a sentimental affective pleasure (corresponding in our culture to the ideology of love). It is appropriate to establish a correlation between the sensual and the male, and between the affective and the female. This correlation tends to be redesigned and inverted when one thinks of sexuality and old age. Psychoanalyst Otto F. Kernberg, professor of psychiatry at Weill Cornell Medical College, draws upon his clinical experience to demonstrate the inversion of supposedly male and female sexual traits that occurs in old age:

In the light of the observations of love relations of older couples, I suggest that this development continues into old age, with surprising role reversal. Men falling in love and establishing a passionate love relationship at late stages of their lives frequently have the exhilarating experience that their intense love for a woman transcends their erotic desire in new ways, so that love becomes the bridge to sexual intimacy. In their fusion with the woman they desire, they experience a sense of total security and certainty about their love and an overwhelming gratification at having found the love object of their lives. Love, it would seem, becomes a means for the achievement of erotic desire, replicating, we might say, the early maturational characteristics of younger women. Women who fall in love in later stages of their lives, on the contrary, experience a freedom of sexual desire that becomes the bridge to love for the men they have found. One male patient in his sixties said jokingly to his new girlfriend: “I fear, at times, that you are only treating me as a sexual object and that my feelings and personality are of no relevance to you (Kernberg 2001: 183-184).

Kernberg was president of the International Psychoanalytical Association from 1997 to 2001. He was in Brazil on numerous occasions and is widely respected among Brazilian psychoanalysts. However, his enthusiasm with the potentialities of sexual life in old age does not seem to have reached the representations that most elderly men and women have about sexuality.

**The Obligation of Having Sex**

A survey carried out by Datafolha, one of the most important Brazilian survey agencies, in November 2008, interviewed 1,238 respondents aged 60 or over in different Brazilian cities. Seventy eight percent of the male respondents declared having a normal sex life, and one quarter said they had sex once a week. Twenty four percent of the female respondents aged 60 or over declared they were still having sex.

The claim made by gerontologists that sex life does not cease with old age was manifested in the views of the married women, but this was contradicted in the views of the unmarried women in the third age program I researched. Among the elderly, topics of sex generated jokes and much laughter. Expressions like: “Heaven forbid! Get a boyfriend now at 65!” caused enthusiastic agreement among them. Among married women, sex and love were indissolubly linked; personal statements by the women reflected notions of the advantages of sexuality in old age, as it is espoused by program conferences and lectures given by the coordinators of the group. In the words of a married woman whom I interviewed after a conference on aging and sexuality at the Catholic University of Campinas in 2011: “I find it much better now without all the overexcitement-- less quantity and more quality”; “true love between two persons at our age is much more beautiful, it’s fantastic...” and “at
this stage, there are no worries, it’s much better, more tranquil”. These considerations – which are quite in line with the gerontological discourse – were rejected by most unmarried, separated or widowed women whom I interviewed in the same third age program. These women mocked the supposed advantages of sexuality in old age which were affirmed by both the coordinators and the married participants in the program.

Unmarried women didn’t miss an opportunity to show how husbands imposed work on their wives, citing duties such as, “providing meals,” “dealing with the laundry,” and being “always willing and in a good mood”. In their view, sex was just one more marital obligation from which widowed and divorced women are relieved. In this sense, they vehemently expressed how male dominance has had a specific configuration on their lives, including their sexuality. It should be noted that being free from marital obligations did not lead to a negligence of their physical appearance. On the contrary, the women interviewed show great concern for their physical appearance, but these beauty concerns were not necessarily linked to sexual activity or sexual seduction:

I want to be beautiful, but we know that our bodies are no longer the same. So, what to do about it?” asked one of the women after the conference regarding old age and sexuality; lowering her hands in front of her breasts as if she wanted to show that these parts of the body inevitably droop, she continued, “men are only interested in older women when they need someone to do their housework.

The senior men in the associations of retirees seemed to wholeheartedly agree with the discourse of pharmaceutical marketers: they valued sexual expertise and their performance was strongly determined by expectations for intercourse, depending on their erectile capacity. They all reported an interest in maintaining an active sex life, but did not seem overly influenced by the gerontological discourse that sexuality is broader than genital-based pleasure. Most of them stated that their sex lives were currently limited to the marital context.

Arthur, who at the time of the interview was 72 years old and who had been the director of a retiree association, made the following statement, very common among those interviewed:

It is not the same as when I was 30. The liveliness and the rhythm are not the same (...) but I am always up for it, I never lost interest. I have been married for 40 years now. That initial enthusiasm softens a bit, there is a tiredness that is natural, but the love never ends (...). We need sex to live (...) it does us a lot of good.

It is difficult for a female researcher to talk about sex with older men. They prefer to talk about national and international politics and make criticisms of those retirees who have a hard time supporting their families and maintaining decent living standards. It is mainly through jokes, never told in the presence of a woman, that these men express the importance of sexuality in their lives. These jokes, which discuss the erectile difficulties of elderly men, were told under one’s breath, and were heard by my male research assistant:

After 30 years of marriage, a couple was having sexual difficulties. They decide to consult with a specialist, who says: “Many couples like you have solved their issues with a prosthetic penis.”

The husband asks: “Really? And how much does it cost?”

“I charge 30,000 Reals for a small size prosthesis, 40,000 for a mid-size, and 50,000 for a large-size new penis.”

The husband turns to his wife: “What do you think, honey?”

The wife thinks for a minute, then says: “Well, if I’m going to spend 50,000, I’d prefer to redecorate my kitchen.”

Another joke similarly makes fun of the assumed inactive sexual life of the elderly:

**Two elderly men are speaking:**

- “Do you prefer sex or Christmas?”

- “Sex, of course! Christmas happens every year, I get bored of it.

Through playful performances, jokes, and funny stories, men express the importance of sexuality in their lives, which is divergent from the notion of a reconceptualized sex life proposed by gerontologists. For men in this study, the importance of sexuality is linked to traditional values of masculinity and to a resistance towards old age, which is assumed to be a phase of life with diminished lucidity, less self-control and the loss of a rewarding sexual life. In short, they validated the negative stereotyping of the elderly in Brazil. Most of the women I interviewed, on the
other hand, assumed that a rewarding aging experience was independent of a gratifying sex life. For them, the aging body cannot be seen as an object of sexual desire, and they consider that only elderly women who have lost their lucidity can imagine having an active sex life. Thus, the elderly respondents in my research did not reproduce the arguments put forth by gerontologists and sexologists pertaining to the broader, more corporal nature of human sexuality. On the contrary, they articulated a proliferation of divisions, thus creating greater differences among themselves.

This article discussed how transnational discourses take on specific articulations in local contexts and how specific groups react to these discourses. In Brazil, a country where the cult of beauty, youth and sexuality is seen as one of its most prominent cultural characteristics, sexual function has become central to contemporary gerontological conceptions of well-being, the good life and happiness in old age. Our interest in the subjective accounts of older adults pointed to ways in which old age can be negated by older men, alleging that their erectile function is in good form, or that old age can be conceived by some women as one of the best moments in their lives because they have been exempted from the obligations of sex.

Notes

1. Research funded by the Fundação de Amparo a Pesquisa do Estado de São Paulo (FAPESP) and by the Conselho Nacional do Desenvolvimento Científico e Tecnológico (CNPQ).

2. About the emergence of the category “third age” see Laslett (1987); on new images of old age see Featherstone and Hepworth (1989) and Featherstone (1992).


4. It is possible to identify four types of retired peoples’ associations: (1) associations connected to state companies that have their own welfare funds, offering their workers supplementary retirement benefits and a series of other advantages; (2) labor union associations that bring together the retired of the professional category they represent; (3) eclectic associations that gather people of different professional categories; (4) associations born of political interests. These are ineffective and short-lived associations, generally organized at election time through candidates’ initiatives or campaigners seeking votes. On the different types of associations of retirees, see Simões (1996).

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