

SEXUALITY AND AGING: PERCEPTIONS ABOUT ABILITIES AND POSSIBILITIES**SEXUALIDADE E ENVELHECIMENTO: PERCEPÇÕES SOBRE HABILIDADES E POSSIBILIDADES****SEXUALIDAD Y ENVEJECIMIENTO: PERCEPCIONES ACERCA DE LAS CAPACIDADES Y POSIBILIDADES****Received: 17/06/2014****Approved: 08/01/2015****Thaís Cristina Silva Sousa¹****Marina Leandrini de Oliveira²**

Aging and physiological changes in the body can produce direct and indirect effects on sexual desire and performance of the elderly. The present study aimed to analyze the perceptions of sexuality in aging and to identify factors that influence the scope of performance skills. This is a qualitative and exploratory study, using focus group for data collection. The study was conducted in a Residents Association. Discussions that took place in the group discussions were recorded digitally, transcribed and evaluated through thematic content analysis. The study results show that performance skills are related to sexuality during aging. From this study, it can be inferred that older people understand and experience discussions about sexuality in aging in different ways and often this issue is not addressed naturally, however the elderly participants showed interest in the discussion.

Descriptors: Sexuality; Aging; Occupational therapy.

O envelhecimento e as alterações fisiológicas do corpo podem produzir efeitos diretos e indiretos sobre o desejo e o desempenho sexual dos idosos. O presente estudo teve como objetivo analisar as percepções da sexualidade no envelhecimento e identificar os fatores que a influenciam no âmbito das habilidades de desempenho. Trata-se de um estudo qualitativo, com a utilização de grupo focal como instrumento para coleta de dados. O estudo foi realizado com idosos em uma Associação de Moradores. As discussões suscitadas no grupo foram gravadas em meio digital, transcritas e avaliadas por meio da análise de conteúdo temática. Os resultados evidenciam que as habilidades de desempenho estão relacionadas à sexualidade. A partir deste estudo, infere-se que os idosos entendem e vivenciam discussões acerca da sexualidade no envelhecimento de diferentes formas e que frequentemente este tema não é tratado com naturalidade, entretanto os idosos participantes mostraram interesse sobre a discussão.

Descritores: Sexualidade; Envelhecimento; Terapia ocupacional.

El envejecimiento y los cambios fisiológicos en el cuerpo pueden producir efectos directos e indirectos sobre el deseo y el rendimiento sexual de los ancianos. El presente estudio tuvo como objetivo analizar las percepciones de la sexualidad en el envejecimiento y identificar los factores que influyen en el alcance de las habilidades de desempeño. Se trata de un estudio cualitativo, con la utilización de grupo de enfoque como herramienta para la recolección de datos. El estudio fue realizado con personas mayores en una Asociación de Vecinos. Las discusiones planteadas en el grupo fueron grabadas en medio digital, transcritas y evaluadas mediante análisis de contenido temático. Los resultados del estudio muestran que las habilidades de rendimiento están relacionadas con la sexualidad. Se puede inferir que las personas mayores entienden y vivencian debates a cerca de la sexualidad en el envejecimiento de manera diferente y, a menudo esta cuestión no se aborda de forma natural, sin embargo, los participantes de mayor edad mostraron un gran interés en la discusión.

Descritores: Sexualidad; Envejecimiento; Terapia Ocupacional.

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INTRODUCTION

Aging is a natural and gradual process and can bring large changes¹. Both men and women, during the aging process, undergo functional, physical and psychological changes. The body physical changes become visible through processes such as bleaching or loss of hair, appearance of wrinkles, changes in height, among others². Aging results in physiological changes that can influence directly and indirectly desire and sexual performance³.

Sexuality and aging, when discussed together can reveal not only *myths and stereotypes* but also acceptance and understanding about sexuality as something natural in the life of individuals in different age groups, which can be a source of pleasure².

Studies^{4,5} have shown great interest by health professionals in the sexuality of the elderly based on the finding that "regular sexual activity ensures the physical and psychological well-being, and contributes to the reduction of physical problems and mental health associated with aging".

For professionals, such as Occupational Therapists, sexuality is subject to intervention, since this professional understands the individual as an integrated being, therefore, "occupational therapists in their interventions consider sexuality its and sexual expression" not apart from the individual and their context⁶.

Sexual activity is understood by occupational therapy as one of the daily activities that include, in addition to that, bathing, eating, dressing up, food, functional mobility, personal hygiene and self-care. For these daily activities can be successfully performed, it is necessary that performance skills are well structured with the intention that these functions are carried out without restrictions⁷.

Based on studies on human skills, sexuality is considered in this work as an innate skill that develops throughout life from the acquisition of new skills and experiences. The acquisition of skills deals with several factors that may or may not influence the performance of each of them,

and these factors are described as follows: social trajectories, purposes, values, routines and everyday life⁸.

Given the above, this study aimed to analyze the perceptions of sexuality in aging and to identify the factors that influence sexuality of the elderly in the context of performance skills.

METHOD

It is used qualitative methodological approach using the focus group technique as a tool for data collection.

This data collection instrument addressed the perceptions and experiences of sexuality in aging and the identification of factors that influence sexuality of the elderly in the context of performance skills. A dynamic was proposed as trigger to favor expression of the contents in Focus Group, with images that would be associated or not with perceptions of each member on the discussed theme.

The study was conducted through weekly meetings from April to May 2013, with 11 elders in a Residents' Association Facility in Uberaba, a medium-sized city of the South region of Minas Gerais state, Brazil. It is noteworthy that prior to data collection a total of four meetings were performed seeking to create bonds, increasing the possibility of exchange with elderly participants. Thus, the data analyzed in this study refer to the last meeting, which lasted approximately two hours. Individuals aged sixty years old or older who agreed to be part of the research and who had bond and/or participation in residents' association groups were invited to participate in the study.

The discussions that took place in the group were recorded in digital media (audio), transcribed and then evaluated through thematic content analysis, which "consists in discovering the meanings that make up a communication whose presence means something to the analytical objective targeted"⁹.

The transcribed material was organized and was subsequently performed a thorough reading of the set of lines (initial reading), which was the initial stage of *pre-*

analysis. Then the *exploration of material* step was performed, through the systematic analysis of the transcribed material, and then the *treatment, inference and interpretation of results*, in which occurred the category analysis, inferences and discussion using theoretical frameworks^{9,10}.

It is noteworthy that the participation of older people in the study was subject to the signature of the Informed Consent Form, being previously approved by the Research Ethics Committee of the Federal University of Triangulo Mineiro, under protocol number 2446.

RESULTS

The study included 11 subjects, 02 men and 09 women, with a mean age of 70 years old. The majority of the sample (73%) is married, and 45% of elderly participants reside only with the spouse, the rest of the sample also lives with their children. So 64% of the total sample have a family constitution consisted of only one more person.

The content analysis of data deriving from the focus group allowed producing two categories with the study results. These two units were entitled: "*Perceptions about sexuality in aging*" and "*Sexuality in aging from the perspective of performance skills*".

Perceptions about sexuality in aging

To understand the perceptions of the elderly towards sexuality two thematic subcategories have been prepared: *Conceptions about sexuality: transcending sex in old age* and *Sexuality in old age: a phase that reveals contradictions*.

Conceptions of sexuality: transcending sex in old age

This subcategory presents the perceptions of elderly participants about sexuality. The data analyzed portray that elderly study participants associated concepts such as sex and affection to sexuality. These contents can be illustrated by the following statements:

"(...) for me it is not over no, I want do it until I die (laughs)" Subject 4.

"(...) and sex is not so important, with aging that thing about sex runs out, but love can continue (...) love, friendship, respect, that does not end, it only ends if the person left this to happen" Subject 3.

"(...) there is no understanding when the man is over here and the woman is over there, if I walk out the door, Maria's already there on the street, waiting for us to walk to another place, every party, we drink coffee, eat lunch together" Subject 10.

The subject 3 (female) and the subject 10 (males) are married and living with their spouse and the subject 4 (female) is a widow and lives with children and grandchildren. It is noteworthy that although the subjects have different characteristics in these aspects, they present a homogeneous perception, as well as other members of the group. There is, however, in the speech of the subject 4 the lack of clarity about the permanence of sex or sexuality throughout life.

The elderly reported that dealing with the theme "sexuality" brought satisfaction, learning and experience exchange although the content of some lines showed resistance to the concepts related to the discussion, such as "sex" and "condom". In the speech below the subject 10, male and married, uses terms like "*the thing*", "*that thing*" and "*I won't take this thing, no*" referring to condoms.

"(...) one day a woman working on the health unit formed a group of people there to discuss this, there were some ladies by my side, they were kind of beautiful and she came with that thing there, then she started to give a demonstration of how to use the thing, she came to me and I said: Hey, I won't take this thing, no" Subject 10.

"(...) look, it was great to me, I learned a lot too, sex was gone but affection and respect remained" Subject 4.

Although no particularities had been observed for the sexual interest of men and women, it was found in this study that the participants identified some differences related to gender.

"(...) some of them think that it is only at that time and this is not love, it is only about taking advantage, humiliation, especially for women" Subject 3

"(...) men think that when there is no sex, then it's over, it's over for both of them" Subject 4.

The speech of the subject 3 refers to a non-positive perspective about sexuality experience, which addresses particularly to sex.

Sexuality in aging: a phase of contradictions

This subcategory shows the relationship of aging process and sexuality, as one of the speeches raised more recurrently.

Through the speeches of participants it is emphasized changes in relationships and sexuality in old age that are developed procedurally throughout life and that differ from previous phases, such as adolescence and adulthood.

"(...) it changes a little. Because it seems that we turn into siblings, husband's sister, there is sex, it is good but it's not like it was before" **Subject 1.**

"(...) of course it will stay forever, and yet we devalue it" **Subject 10.**

In contrast to this perspective, two of the elderly participants reported stopping the experience of sexuality in aging.

"(...) after sixty, it was over, my sexuality was over many years ago, and it was once upon a time, but it was over many years ago, thanks God, it should have gone earlier" **Subject 9.**

"(...) I myself at my age, I do not even think more, I don't have time anymore, you know?! I am married, but my husband...it's like I'm not married anymore, and we are not that old, I stay alone all the time, and he doesn't care. So things remain like this, this way" **Subject 3.**

The subject 9 is a woman of 81 years old, a widow who lives with her sister, and refers to a married life with a history of abandonment, so her speech also reflects her experience in relation to sexuality. In this sense the speech of the subject 9 refers to a line of "liberation", as if sexuality had not been experienced satisfactorily, understood as a "heavy burden", and we can still notice that the connotation of sexuality is understood as the sexual act itself. On the other hand, the subject 3, also female, 60 years old, reports that her marriage is very troubled and the first term used when the sexuality theme was approached was "*too much trouble*", also showing the experience of her sexuality as something negative.

The experience of the elderly regarding sexuality can be understood through their perceptions reports that were presented as negative experiences in some cases, as previously noticed, and positive in others, as we can see in the following speech.

"(...) sex is not as important as love, if two people love each other, sex is not as important, it is a complement (...) affection, attraction, happiness, companionship and respect" **Subject 4.**

The experience of sexuality in this speech reveals the possibilities found throughout the couple relationship, in which companionship and affection have been prioritized. In addition to these aspects it was noticed the importance of self-care along with the experience of sexuality.

"(...) because when you're okay, you can give affection to the other, you feel happy to be with a person who respects you, who gives you warmth, so, this is important" **Subject 4.**

"(...) this means the care that we should have and if it's okay this way it's because she took care of herself" **Subject 6.**

Sexuality in aging from the perspective of performance skills

This category discusses the performance skills revealing those that are most frequent in the speeches of elderly participants regarding sexuality satisfaction.

In this study the cognitive abilities were also addressed as the ability to store, to sequence, to remember and to organize information and the ability to multi-task, namely, to carry out more than one activity at a time. Elderly participants do not attribute directly to cognitive abilities or to the factors that interrelate sexuality in aging, however, they state that there was a substantial reduction in daily concerns with the changes of some occupational roles in aging and with the departure of children from home, which allowed them to devote more time to their spouse and to sexual satisfaction. It is understood that stress and excessive worry can relate to cognitive performance.

"(...) with time it sometimes actually gets better because the concerns have run out" **Subject 1.**

Elderly participants point out that there is interference of emotional regulation skills in sexuality.

"(...) we must always feel good, to make the other feel good, you know, to give love and affection, because when we are well we make the other person feel good and when we are not well, we do not even want to look in the face of other person." **Subject 5.**

According to the participants of this study, there are social skills that also relate to the experience of sexuality in old age.

(...) "because when I was younger, you know, I used to talk more, to flirt more and now I don't (...) loneliness is very sad, a life together is much easier, having friends is always good, because we share problems" **Subject 4.**

(...) "it's always good to have someone to talk to, to share things, to speak from the heart, I have always had it and I always want to have it (...)" **Subject 1.**

Subjects' statements reflect the importance given to having social support, pointing out that subjects 1 and 4 are women and widows. When they mentioned that social support, they referred both to the partner and to a friend.

In this study, most participants pointed out that the elderly praxic and motor skills change significantly in aging and that they interfere with sexual experiences.

(...) "with aging the body gets heavier, we cannot do the same things, we have to be more careful, because if we fall it takes a long to get better." **Subject 4.**

(...) "with aging we gets weaker, right? Then she cannot handle it, health runs out, right ?!" **Subject 1.**

(...) "for instance, I can't do anymore what I used to do, our body feels faster"(...). **Subject 2.**

In this sense, the subjects of the research report that sensory perceptual skills are those that most influence the experience of sexuality and that with aging they feel considerable decline of these functions.

(...) "this influences, because with old age it runs out" **Subject 9.**

(...) "the ear because you have to listen; the mouth, because if you are talking and the person does not understand, you run out of talk, the eye is to see and the mouth is to kiss and taste, and all that decreases" **Subject 3.**

(...) "it changes, yes, we begin to have difficulties to move the body, everything gets more sensitive, it's not that good anymore, but with love and patience things go right" **Subject 4.**

DISCUSSION

Perceptions about sexuality in aging

Conceptions of sexuality: transcending sex in old age.

This thematic category can be initially illustrated from the excerpt from Almeida and Lawrence¹²:

(...) society often categorizes this period of life as asexuality and even as androgyny." "Thus, during this period the individual should only take the role of grandfather, or grandmother, to be delegated to them by their children the care for their grandchildren, being expected to monitor them while elders concurrently perform activities like knitting and watching TV, enjoying their retirement (...)

It is observed that the addressed issue may involve myths, prejudices and different perspectives. According to Moraes¹³ sexuality is considered a need of the human being present throughout life involving a dynamic that includes love and pleasure, and thus do not end with aging.

Moraes¹³ complements the discussion when talking about sexuality in old age related more to sensuality than to the sexual act itself. So for the elderly participants, it was observed that looks or caresses are significant elements in the experience of sexuality. Partnership is named as an element that is a manifestation of sexuality. It is evident, therefore, that although the elderly study participants presented such a perspective on sexuality, moments that combined the concepts also referring to sex were also common in their accounts.

The group referred to body changes during aging and to maintenance of displays of affection. "The anatomy and sexual physiology are modified, but the capacity to love, to kiss, to embrace remains intact until the end of life." Studies show that in older men had more sexual interest than women^{3,14}.

These differences related to gender are associated with generation, because an older generation experienced rigid power relations and notions of male and female dominance roles¹⁵:

Thus, the elderly today have experienced male-female power relations that in the

course of their lives, have been changing from a clear relational asymmetry, particularly with regard to sexuality and work to closer and symmetrical relations, they have been watching them more than participating on them, properly.

Some seniors reported negative views on sexuality. Cultural historical aspects can be attributed to gender and femininity pointing to a very rigid perspective of exchanges on sexuality, leaving very fine limits in the context of sexuality, that is, "what is proper or improper; what is natural, nice, normal, or the opposite: harmful, excessive, insulting; what is likely to be admired, accepted or, conversely, to be repulsive, deniable¹⁵".

Sexuality in aging: phase of contradictions

Sexuality in old age has some peculiarities, for in this stage of life the values promoted are different from those supported in adulthood. Aging is characterized by maturity and accumulation of experience, consequently the desires change, being more pure and accommodated¹³.

Increasing age is a relevant factor in changes in sexual desire for both men and women. Sexual behavior of both sexes suffer a decline throughout life, particularly due to physiological factors^{16,17}.

Each person expresses their sexuality in particular and unique way, and every elderly manifests or understands sexuality according to their experience^{18,19}.

Self-care was also quoted by the elderly who reported to be an important aspect of the experience of sexuality. Self-care can be related to the care of the body, characterized by the actions of the individual that are directed to themselves and to their context, in order to regulate the proper functioning in accordance with their interests in life, constituting the practice of activities for their own benefit and in order to maintain life, health and well-being, so that they can be ready to care for the other¹⁶.

In summary, the conceptions of sexuality and aging expressed aspects that go beyond acts or specific behaviors and covered a range of relationships that occurred according to the experience and social, cultural and religious aspects of the

participants. Sexuality appears as a dynamic aspect in the lives of individuals in which the aging process has direct relationships with the experience thereof.

Sexuality in aging from the perspective of performance skills

It was adopted the framework of the American Occupational Therapy Practice⁷ to underlie the structure on the performance skills. Thus, skills are subdivided in: motor and praxis skills; sensory-perceptual skills; emotional regulation skills; cognitive skills and communication and social skills; each being carried out with their particularities.

Emotional regulation skills can be considered actions that the elderly use to express their feelings during the performance of activities and how much they get involved in social interactions⁷.

Communication and social skills are behaviors that the elderly use in order to communicate and interact with others⁷.

Motor and praxis skills are actions that seniors use to move, to plan, to sequence and to perform movements⁷.

Cognitive skills are understood as the actions that the elderly can use to plan and to control performance in an activity such as sexuality⁷.

Sensory-perceptual skills are the "actions or behaviors used to identify and respond to sensations and to select, interpret, associate, organize and remember events through sensations that include visual, auditory, proprioceptive, tactile, olfactory, gustatory and vestibular"⁷.

Through the reports we can discuss on the role of performance skills in sexuality. Among the factors that can influence this experience are: contexts, values, routines, beliefs, which are strongly linked to performance skills. It is understood that the skills can be improved throughout life or acquired in accordance with the time, individuality and the context in which they live.

Regarding *cognitive skills*, the elderly relate them to concerns about children, home, work and grandchildren. In general, the amount of tasks performed by the elderly decreases over the years, with the departure

of children from home and retirement, which reduces the concerns and allows them to spend most of the time in the presence of the partner, offering more attention to the other and themselves.

It is noteworthy at this moment the interrelationship between all the skills that in the practical experience of the elderly cannot be separated. Cognitive skills influence emotional regulation, since participants consider worry and stress as feelings that interfere with taking good care of themselves and taking care of each other.

Concerning the *emotional regulation skills* it is observed that the elderly compare these skills with feeling good about them to feel good with each other. The elderly have shown that this ability may be relevant to the performance of sexuality.

It was also mentioned that *communication and social skills* change with aging and when not properly performed, interfere with sexual experiences.

We emphasize the importance of considering the characteristics of this group of elderly component of the sample (participative in community activities), since they may not attribute much importance to those skills that are preserved, turning their attention to the more apparent changes due to aging.

From the analysis of the speeches, it can be inferred that this group considers the *motor and praxic skills* as the most affected during aging and performance of sexuality. During aging several changes occur, and among the main ones are the physical changes, related to the "decrease in elasticity, joints that are less able to absorb pressures, becoming rigid, decrease in muscle power, leading to slowing of movements and loss of coordination, bones can become osteoporotic, difficulties with balance appear and changes in the body posture occur"^{20,21}.

Motor activity is essential for the development of self-awareness and relationship with the outside world; through this ability the elderly guarantee an important aspect of their independence, participation in activities of daily living and social adaptation^{22,23}. In the context of

sexuality, as well as in other aspects of the individual, motor activity is essential for the development of human beings, since "*a good motor control will enable them to explore the outside world and experience concrete experiences*"^{22,24}.

From the speeches it can be inferred that for the elderly, praxic and motor skills were observed with respect to demands for sexual intercourse in itself, with these skills much required for this activity, in their own point of view. As for the other skills (emotional regulation, sensory-perceptual, communication and social) the elderly seem to have associated them faced to sexuality in the amplitude of concept referring to companionship, affection, love.

Seniors assert in their speech that *sensory-perceptual skills* can relate to sexual performance when not performed satisfactorily and further argue that these skills are adversely modified with aging. "Aging is not only the passage of time; more than that, it is the accumulation of biological events that occur over time. Aging can therefore be defined as the loss of skills to adapt in environment"²¹.

With aging changes may appear gradually damaging the physical and intellectual functions^{25,26}. Thus, impairment of vision and hearing is what brings more problems, because these two senses are of great importance in adapting to day-to-day and also to social life.

CONCLUSION

From this study, it can be inferred that older people are interested and participate in discussions about sexuality in aging. However, it was observed that this issue causes embarrassment for some elderly people, and can still be seen and treated with prejudice. Furthermore, it was found that for the majority of the elderly, sexuality is not ended with aging, but is experienced in different ways. Touching, looking, loving, hugging and holding hands are gestures that become more significant during aging, to the detriment of the sexual act.

Sexuality is an intervention area for occupational therapy, as it is configured as an

activity of daily living, and therefore is related to performance skills. These skills suffer changes throughout life, but proper structuring of performance skills becomes important in the context of sexuality in aging, to ensure that some functions can be performed without restrictions. In this context, the skills that have more influence on the performance of sexuality, according to this study, are the sensory-perceptual skills, motor and praxic skills and emotional regulation skills.

Occupational therapy in this context is evidenced from the numerous possibilities of individual and/or group interventions, that from the main thread of sensitive perceptions and experiences presented by the elderly enable raising discussions, reflections, information, exchange and strategies that can represent subsidies for assessments and interventions.

From the results we identified the importance of professionals in the health and training fields who wish to work with the elderly population to direct their attention to aspects related to sexuality.

This study consists of an initiative to provide contributions related to reflections on skills that may be relevant in the involvement of older people in satisfactory practice of this activity. It was also observed the scarcity of Brazilian production in the area of sexuality in the scope of occupational therapy. For this reason, we suggest the strengthening of discussions in the professional field.

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CONTRIBUTIONS

Thaisa Cristina Silva Sousa contributed to the construction of the research project, in data collection, analysis of data and writing of the article. **Marina Leandrini de Oliveira** guided the construction of the research project, in data collection, analysis of data and writing and critical of the article.