

Series editors' introduction

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This *Sex and Intimacy in Later Life* book series will explore, interrogate and enlighten upon the sensual, sexual and intimate lives of older people. The motivation for launching this series was a concern with the relative lack of attention in public, professional and academic/intellectual spheres to sex and intimacy in later life (indicatively, [Hafford-Letchfield, 2008](#); [Simpson et al, 2018a, 2018b](#)). The series is intended to contribute to and enrich the development of the field of studies in the intersections of age, sex, sexuality and intimacy as a critical and important area of scholarship. It is only beginning to be recognised as an important social, cultural and political issue within and beyond the 'Western' academy, from which it has emerged. Its earliest contributions, of which this volume are a part, are motivated by a desire to recognise and reject the pathologies and prejudices that have infused this intersection – what Simpson has termed 'ageist erotophobia' ([Simpson et al, 2018b](#), p 1479) – and fuels the failure to acknowledge older people as sexual agents. This is both an intellectual and a political agenda, to question and evaluate the impact of real rather than assumed losses of cognitive, physical, social and sexual capacity, and to recuperate older people as sexual agents from dismissal, ridicule and trivialisation.

If the latter half of the twentieth century was characterised by challenges to the pathologies of social identities – particularly gender, ethnicity and race, disability, sexuality – and struggles for recognition, rights and liberties, more intersectional struggles and recognitions characterise the twenty-first century (on intersectionality, see indicatively [Hancock, 2016](#); [Hill Collins and Bilge, 2016](#)). Significant among these has been the re-evaluation of what it is to age and to be an older agent in contemporary societies. Older people have historically experienced both veneration and respect and neglect and pathology, largely based on differing cultural stereotypes of the value of age ([Ylanne, 2012](#)). The most common characterisation is that older people are not sexual, past being sexual or represent a problematic sexuality – or their sexuality is a superficial concern and secondary to concerns of health, care, life course and support by public services and engagement and pensions/resources. Such concerns are those mainly of 'Western' cultures and reflected in the western influence across the globe in respect of state intervention and provision, but elsewhere they have been subsumed and often rendered invisible into family and kinship structures.

Older people's intimate and sexual lives and experiences have transformed in the last 40 years, as a consequence of a number of significant social

changes: new technologies – digital, mechanical and pharmaceutical – and their interventions; the recognition of older people as exploitable markets for consumption; healthier lifestyles, changes and extensions to life course and life expectancy; the erosion of social and sexual pathologies around age and recognitions of different intersections and their importance (LGBTQI older people, older people of different ethnicities, older disabled/ neurodiverse and ‘able- bodied/ minded’ people; older men and women).¹ These transformations demonstrate evidence of increase in the sexual relations and intimacies of older people and their impacts, such as increased rates of STD transmission, or implications for healthy sex lives for older people in care institutions (indicatively, [Drench and Losee, 1996](#); [Lindau, 2007](#); [Bodley-Tickell et al, 2008](#); [Chao et al, 2011](#); [Simpson, 2015](#); [Age UK, 2019](#)). The scholarship exploring these developments has only recently begun to catch up. A small but growing literature has focused on age and sexuality (represented in the sources authors draw from in this series), with a principal focus on the erosion of easy pathologies and stereotypes of older people’s heteronormativity and heterosexuality. Particularly as the ‘baby boomers’ of the 1950s and 1960s move into old age, changed sexual attitudes, wants and needs require changed political, cultural and institutional responses. The older generation of baby boomers in the late 1940s and 1950s may have remembered Vera Lynn (an iconic British wartime singer singing patriotic songs during World War 2) and post- war society – retaining traditional stereotypes of older people. However, their horizons will have been formed and broadened more by influences from the 1960s’ pop and rock culture (notably with such artists as the Beatles, Rolling Stones and Janis Joplin), women’s and LGBT liberation struggles, the proliferation of accessible public representations of sex and the ‘pornification’ of society in the digital age.

Ageing and becoming ‘older’, intimacy, sexual identity, relations and practices, and sexual pleasure are all contested concepts and subject categories. They are understood as being constituted by different demarcations, distinctions and understandings arising from different intellectual disciplines, conceptual approaches, cultures, geographical credible to preclude critical and constructive debate on the meanings and demarcations of these intersections, it is necessary to draw some broad conceptual boundaries rather than hard- and- fast definitions. ‘Ageing’ and ‘older’ are broad categories that are attached to people considered in their ‘third age’ or ‘later life’ – in more

¹ One long, full version of what has been called the ‘alphabet soup’ of sexual identities is LGBTIQCAPNGFNBA (‘Lesbian’, ‘Gay’, ‘Bisexual’, ‘Transgender’, ‘Intersex’, ‘Questioning’, ‘Curious’, ‘Asexual’, ‘Pansexual’, ‘Gender Nonconforming’, ‘Gender-Fluid’, ‘Non-Binary’ and ‘Androgynous’). This list is extended in countries with cultural expressions of sexualities.

affluent countries/regions of the mainly Global North, the threshold is often seen as the age of 50+. This reflects common practice in the literatures of social gerontology, psychology and the sociology of ageing (see [Zaninotto et al, 2009](#); [Cronin and King, 2010](#); [Stenner et al, 2011](#)). It is after that, and into their sixth decade, that older people experience a process of de-eroticisation that could be called 'compulsory non- sexuality' (taking our cue from feminist theorist Adrienne [Rich \[1981\]](#), who articulated pressures on women's sexuality towards 'compulsory heterosexuality').

Ageing and being older can be understood mainly in two ways. First, the terms describe ageing as a chronological and physiological process involving key changes, which become particularly marked (and can be stigmatised) in the later stages of the life course. This raises questions around the differential impact of life course experience and physiological change – which may include loss and/ or reduction of physical and mental capacities for some people at different stages in the life course. It is structured both by physiological change and by the (often imperceptible) internalisation and normalisation of orthodoxies describing ageing and being older in cultural and social discourse, and everyday practice and experience of how older people are perceived and how older people see themselves – often as lacking – and in relation to younger people ([Foucault, 1977, 1978](#)). Such is the means by which older people (as much as younger people or social and cultural institutions) both produce and accept the discursive limits to ageing. Second, ageing and being older could be described as an attribution constituted by ideology and discourse, structural- hierarchical and cultural- discursive influences and material contexts, such as the structure of organisations, public spaces, cultural representations and spaces of connection (for example, labour markets). Ageing is usefully regarded as a product of intersections between the symbolic/ discursive and structural/ material dimensions of existence. The attribution of a particular age – young, mature or older – is an ideological construct suffused by power relations and composed of cultural attributions, instantiated in material processes and practices. These structural factors impose all manner of constraints on older people's sexual agency (though these can be questioned, challenged and resisted). Put simply, age is a social, cultural and political construct and how older people are perceived and valued – whether prejudicially or with respect – is constituted in the wider character of social values and dominant discourses. While age is an experienced and embodied phenomenon, its meaning is socially, culturally and politically mediated.

'Sex' and 'sexuality' are often distinguished by the former being focused on practices and behaviour, and the latter being focused on identities, relations and orientations. The terms are nevertheless porous and intertwined ([Weeks, 2010](#)). Sexuality describes the processes of being sexual (or not) in the world and through self- recognition, expressing (or not) sexual choices and preferences and enjoying (or not) sexual pleasures. It involves the expression

of emotions, desires, beliefs, self- presentation and how we relate to others. It most commonly relates to sexual identity – for example hetero, lesbian, gay, bisexual, queer, asexual (Rahman and Jackson, 2010). Sexuality is multidimensional, being co- constituted by the biological (for example bodily sensations interpreted as ‘sexual’), the psychological (for example emotions and reasoning) and cultural and socio- economic influences such as dressing up and flirting and so on (Doll, 2012). It is often understood narrowly as genitocentric, itself tied to the heteronormative relationship between genital sex and reproduction. Yet it encapsulates a range of practices that bring sensual pleasure and fulfil wants and desires, such as the agglomeration of practices that are subsumed under the umbrella term BDSM (indicatively Weiss, 2011; Ortmann and Sprott, 2013). ‘Intimacy’ refers to involvement in close and interpersonal relations. It can be a feature of diverse relationships, from those that are sexual, or with strong close personal friendship bonds, or characterised by physical and emotional closeness, to those where a particular relation or facet of life is shared closely, such as close work relationships. It encompasses a spectrum of emotions, needs and activities ranging from feelings of caring, closeness and affection (that can go with long- term companionship) through to ‘romance’, where an individual ‘idealizes’ a person(s) (Ehrenreich et al, 1997). Intimacy is to a degree conceived in gendered terms: if men tend to define it more in physical terms, women usually emphasise more its emotional content (O’Brien et al, 2012). It is often conceived as two people sharing intimacy rather than a larger number and is constituted subjectively as a value that is owned or shared with others, although equally it is sometimes seen as an arena that reinforces oppressive conventions of private– public divides and ‘compulsory monogamy’ (Bersani and Phillips, 2008; Heckert, 2010; Musial, 2013).

These three conceptualisations – age/ older, sex/ sexuality and intimacies – intersect in complex ways. For example, the prevailing recognise ‘fuck buddies’ or so- called casual relationships for mutual sexual gratification (though intimacy is sometimes used to describe a particular event without relationship – ‘they were intimate’ (Wentland and Reissing, 2014). Likewise, sex and age often enmesh in complex ways, though these linkages too often involve mutually reinforcing negative representations. Decline in sexual capacity – often reduced to coital/ genital function – is associated with ageing and later life as a standard correlation as opposed to a graduated contingency. Drawing in other intersections, the relationship between sexual capacity and potency is a significant feature of masculinity and therefore sexual capacity is considered more challenging for men, given fears of loss of status and greater reluctance than women to seek help concerning sexual and relationship problems (O’Brien et al, 2012). This reflects gendered assumptions that male sexuality is more active and women’s more passive that is rooted in classical sexology (indicatively Davidson and Layder,

1994; Bland and Doan, 1998). Nevertheless, the sexuality of older women could be constrained by biological changes, understood through cultural pathology as decline and loss of attractiveness. As female sexuality tends to be more associated with youth-coded beauty, older women become excluded from the sexual imaginary (Doll, 2012). In addition, women face the moral constraints of being a good wife/ mother/ grandmother, where being non- sexual is seen as a virtue and not a deficiency, whereby older women face moral censure for transgressing an approved ageing femininity when not acting their age (Lai and Hynie, 2011). As such the narrative of decline is perpetuated. Since the 1970s, however, women now over 50 will have encountered the countervailing influences of feminism and challenge such culturally constituted assumptions (Bassnett, 2012; Westwood, 2016).

Even where the idea of older sexual agents meets with approval because of its contribution to well- being and self- esteem, their sexuality has been subject to a medicalised, book- keeping approach that disregards emotions and pleasures and focuses on who is still 'doing it' (Gott, 2004), in the context of declining physical capacity for genitocentric penetrative sex (see Trudel, Turgeon and Piché, 2000, as an example). However, more encouragingly, we perceive the beginnings of challenge to these negative discourses in European, Australian and US contexts and writing, which attempt to recuperate older people, including the oldest citizens (commonly care home residents) and across the spectrum of genders and sexualities, as legitimate sexual/ intimate citizens (see Gott, 2004; Hafford-Letchfield, 2008; Bauer et al, 2012; Doll, 2012; Simpson et al, 2016, 2017; Villar et al, 2014). The purpose of elaborating these brief examples is to underline that a focus on sex and intimacy in later life involves the recognition of intersections both within and beyond the conceptual constituents of the series focus. Lives are not lived in sexual, intimate or aged based singularities, but in complex differentiated yet overlapping and intertwined experiences with myriad intersections, such as class, race/ ethnicity, gender, disability, embodiment and affect (Simpson, 2015).

It is this rich patina of experience and knowledge creation that this series seeks to elucidate, working outward from a critical focus on the core concerns of sex/sexuality, intimacy and ageing, and providing the space for innovative and high- quality scholarship that can inform institutions, policy, professional practice, current and future research and older people experiencing this focus as lived experience and not simply subject of inquiry. The vision behind the series is that it will:

- put the sex back in sexuality (and into ageing). This arises from the observation that while sexuality studies has progressed considerably over the last 40 years (Fischer and Seidman, 2016), its development as an intellectual field of enquiry has to some extent damped the subversive character of a focus on the 'messy physicality' of sexual pleasure. Put

simply, there is lots of scholarship about sexuality, but less focus on the pleasures of sex. There is an aspiration that this series might be one avenue by which that can in a small way be corrected. Putting the ‘sex’ back into ‘sexuality’ is part of an agenda to recuperate older people to continue to be recognised as sexual citizens (or more specifically to have the choice to be sexual agents or not). As such, this series can support the vanguard of an intellectual project that will establish sex in later life as a serious yet neglected political issue and thus stimulate and advance debate. If what is at stake in understanding current experience is the impediments and constraints to choice and pleasure, embodied sensual practice and agency must constitute part of the site of scholarship;

- promote and offer an avenue for critically engaged work on the subject matter, whether it is empirical and theoretical- philosophical, from across the social sciences, humanities and cultural studies, incorporating scientific and aesthetic insights. An essential part of the project is that assumptions, claims and received knowledge about sex and intimacy in later life are always questioned, challenged and subject to critical review. This is the means by which both extant knowledge is tested, refined and strengthened or rejected, and new knowledge is produced. A critical frame also offers the opportunity to move beyond traditional academic frames – insofar as a book series allows – in presenting new ideas, evidence and conjectures;
- emphasise the value of multidisciplinary and interdisciplinary approaches to sex and intimacy in late life. Though the series is open to critical research studies from specific disciplinary positions, such as sociology, psychology or gerontology, it recognises the value of multi- disciplinary studies that draw on more than one discipline or field, and interdisciplinary studies that cut across and suture together different disciplines, perspectives and approaches in understanding the complexity of older people and their sexual and intimate lives. This extends to recognising the value of the interweaving of science, aesthetic and critical approaches across paradigm and disciplinary boundaries;
- recognise the value of different approaches that foreground the experiential and/ or empirical and/ or theoretical landscapes of sex and intimacy in later life, whether they form layered responses to a question or are presented as discrete levels of analysis;
- have an international focus, recognising global differences, inequalities; there is value in both the specificity and depth afforded regional, national and locally based studies but there should be acknowledgement of supranational, international and global contexts to phenomena, trends and developments and political, cultural and social responses. It should be acknowledged that the emergent knowledge on sex, intimacy and later life has been generated mostly within academies of the Global North, but it does not follow that this necessarily implies progress in comparison to

other parts of the globe. It also recognises that there are inherent difficulties of resourcing and organisational and common conceptualisation in the development of international projects with a global reach, and these difficulties are unevenly distributed across the globe. In some parts of the globe researching this focus is not simply difficult but inherently risky to those who might be researched or researched with through intolerance, hostility and lack of recognition. Genuine attempts at a global research agenda require properly distributed and balanced strategies for collaboration to meet relevant constraints and challenges. There should be both attention to the seeds of emergent scholarship in the Global South, and sensitivity to the tendency of western scholarship to reflect a bias towards a 'colonial' approach to knowledge production. Notwithstanding the tendency for scholarship to focus on the Global North and particularly North America, Europe and Australasia, the series seeks – in a small way – to promote international understandings. This is achieved through the conviction that cross-cultural and spatial perspectives, drawing from insight and evidence across the globe, can contribute to better understandings of experience and avenues for research, policy and practice and reflection;

- allow for language, labels and categories that emerge from partial geographical and cultural contexts in the development of scholarship to be questioned, adapted, resisted and brought into relief with alternatives and oppositions in how age, sex, sexuality and intimacy are conceived;
- recognise and explore the constraints on and complications involved in expression of sexual/ intimate citizenship as an older person and across a spectrum of sexual and gender identities, interrogating and challenging stereotypes of older people as prudish or sex-negative and post-sexual. Equally, the series seeks to explore, examine and advocate sex-positive approaches to sex and intimacy in later life that can help empower, enable and support older people's sexual and intimate relations;
- be accessible to readers in order to inform public understanding, academic study, intellectual debate, professional practice and policy development. This is an ambitious agenda to set for any enterprise, and the series hopes only to make modest contributions to it. Nevertheless, the series has been born of a conviction that unless this sort of agenda is adopted, the experience everyone shares of growing old will always be unnecessarily impoverishing and incapacitating. At the core of this series, and what it should exemplify, is the flourishing that arises from older sexual agents making choices, giving and enjoying pleasure and recognising options and experiences that are open to them as they age.

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References

Age UK (2019) 'As STIs in older people continue to rise, Age UK calls to end the stigma about sex and intimacy in later life' [online], Available from: <https://www.ageuk.org.uk/latest-press/articles/2019/october/as-stis-in-older-people-continue-to-rise-age-uk-calls-to-end-the-stigma-about-sex-and-intimacy-in-later-life/>

Arber, S. and Ginn, J. (1995) "Only connect": gender relations and ageing', in S. Arber and J. Ginn (eds) *Connecting Gender and Ageing*, Buckingham: Open University Press, pp 1–14.

Bassnett, S. (2012) *Feminist Experiences: The Women's Movement in Four Cultures*, London: Routledge.

Bauer, M., Fetherstonhaugh, D., Tarzia, L., Nay, R., Wellman, D. and Beattie, E. (2012) "I always look under the bed for a man". Needs and barriers to the expression of sexuality in residential aged care: the views of residents with and without dementia', *Psychology and Sexuality*, 4(3): 296–309.

Bersani, L. and Phillips, A. (2008) *Intimacies*, Chicago, IL: Chicago University Press.

Bland, L. and Doan, L. (1998) *Sexology in Culture: Labelling Bodies and Desires*, Cambridge: Polity Press.

Bodley-Tickell, A.T., Olowokure, B., Bhaduri, S., White, D.J., Ward, D., Ross, J.D.C., Smith, G., Duggal, H.V., and Gould, P. (2008) 'Trends in sexually transmitted infections (other than HIV) in older people: analysis of data from an enhanced surveillance system', *Sexually Transmitted Infections*, 84(4): 312–17.

Chao, J.-K., Lin, Y.-C., Ma, M.-C., Lai, C.-J., Ku, Y.-C., Kuo, W.-H. and Chao, I.-C. (2011) 'Relationship among sexual desire, sexual satisfaction and quality of life in middle-aged and older adults', *Journal of Sex and Marital Therapy*, 37(5): 386–403.

Cronin, A. and King, A. (2010) 'Power, inequality and identification: exploring diversity and intersectionality amongst older LGB adults', *Sociology*, 44(5): 876–92.

Davidson, J.O. and Layder, D. (1994) *Methods, Sex, Madness*, London: Routledge.

Doll, G.A. (2012) *Sexuality and Long-Term Care: Understanding and Supporting the Needs of Older Adults*, Baltimore, MD: Health Professions Press.

Drench, M.E. and Losee, R.H. (1996) 'Sexuality and the sexual capabilities of elderly people', *Rehabilitation Nursing*, 21(3): 118–23.

Ehrenfeld, M., Tabak, N., Bronner, G. and Bergman, R. (1997) 'Ethical dilemmas concerning the sexuality of elderly patients suffering from dementia', *International Journal of Nursing Practice*, 3(4): 255–9.

Fischer, N.L. and Seidman, S. (eds) (2016) *Introducing the New Sexuality Studies* (3rd edn), London: Routledge.

Foucault, M. (1977) *Discipline and Punish: The Birth of the Prison*, London: Penguin.

Foucault, M. (1978) *The History of Sexuality. Volume 1: An Introduction*, trans R. Hurley, Harmondsworth: Penguin.

Gott, M. (2004) *Sexuality, Sexual Health and Ageing*, London: McGraw-Hill Education.

Hafford-Letchfield, P. (2008) “What’s love got to do with it?” Developing supportive practices for the expression of sexuality, sexual identity and the intimacy needs of older people’, *Journal of Care Services Management*, 2(4): 389–405.

Hancock, A.-M. (2016) *Intersectionality: An Intellectual History*, Oxford: Oxford University Press.

Heckert, J. (2010) ‘Love without borders? Intimacy, identity and the state of compulsory monogamy’, *The Anarchist Library* [online], Available from: <https://theanarchistlibrary.org/library/jamie-heckert-love-with-out-borders-intimacy-identity-and-the-state-of-compulsory-monogamy>

Hill Collins, P. and Bilge, S. (2016) *Intersectionality*, Cambridge: Polity Press.

Lai, Y. and Hynie, M. (2011) ‘A tale of two standards: an examination of young adults’ endorsement of gendered and ageist sexual double standards’, *Sex Roles*, 64(5–6): 360–71.

Lindau, S.T., Schumm, P., Laumann, E.O., Levinson, W., O’Muircheartaigh, C.A. and Waite, L.J. (2007) ‘A study of sexuality and health among older adults in the United States’, *New England Journal of Medicine*, 357(8): 762–74.

Musiał, M. (2013) ‘Richard Sennett and Eva Illouz on the tyranny of intimacy: intimacy tyrannised and intimacy as a tyrant’, *Lingua ac Communitas*, 23: 119–33.

O’Brien, K., Roe, B., Low, C., Deyn, L. and Rogers, S. (2012) ‘An exploration of the perceived changes in intimacy of patients’ relationships following head and neck cancer’, *Journal of Clinical Nursing*, 21(17–18): 2499–508.

Ortmann, D. and Sprott, R. (2013) *Sexual Outsiders: Understanding BDSM Sexualities and Communities*, London: Rowman and Littlefield.

Rahman, M. and Jackson, S. (2010) *Gender and Sexuality: Sociological Approaches*, Cambridge: Polity Press.

Rich, A. (1981) *Compulsory Heterosexuality and Lesbian Experience*, London: Onlywomen Press.

Simpson, P. (2015) *Middle-Aged Gay Men, Ageing and Ageism: Over the Rainbow?* Basingstoke, UK: Palgrave Macmillan.

Simpson, P., Brown Wilson, C., Brown, L., Dickinson, T. and Horne, M. (2016) ‘The challenges of and opportunities involved in researching intimacy and sexuality in care homes accommodating older people: a feasibility study’, *Journal of Advanced Nursing*, 73(1): 127–37.

Simpson, P., Horne, M., Brown, L.J.E., Dickinson, T. and Torkington, K. (2017) 'Older care home residents, intimacy and sexuality', *Ageing and Society*, 37(2): 243–65.

Simpson, P., Almack, K. and Walthery, P. (2018a) "We treat them all the same": the attitudes, knowledge and practices of staff concerning old/er lesbian, gay, bisexual and trans residents in care homes', *Ageing & Society*, 38(5): 869–99.

Simpson, P., Wilson, C.B., Brown, L.J., Dickinson, T. and Horne, M. (2018b) "We've had our sex life way back": older care home residents, sexuality and intimacy', *Ageing & Society*, 38(7): 1478–501.

Stenner, P., McFarquhar, T. and Bowling, A. (2011) 'Older people and "active ageing": subjective aspects of ageing actively', *Journal of Health Psychology*, 16(3): 467–77.

Trudel, G., Turgeon, L. and Piché, L. (2000) 'Marital and sexual aspects of old age', *Sexual and Relationship Therapy*, 15(4): 381–406.

Villar, F., Celdrán, M., Fabà, J. and Serrat, R. (2014) 'Barriers to sexual expression in residential aged care facilities (RACFs): comparison of staff and residents' views', *Journal of Advanced Nursing*, 70(11): 2518–27.

Weeks, J. (2010) *Sexuality* (3rd edn), London: Routledge.

Weiss, M. (2011) *Techniques of Pleasure: BDSM and the Circuits of Sexuality*, Durham, NC: Duke University Press.

Wentland, J.J. and Reissing, E. (2014) 'Casual sexual relationships: identifying definitions for one-night stands, booty calls, fuck buddies and friends with benefits', *The Canadian Journal of Human Sexuality*, 23(3): 167–77.

Westwood, S. (2016) *Ageing, Gender and Sexuality: Equality in Later Life*, London: Routledge.

Ylanne, V. (ed) (2012) *Representing Aging: Images and Identities*, Hounds mills, UK: Palgrave Macmillan.

Zaninotto, P., Falaschetti, E. and Sacker, A. (2009) 'Age trajectories of quality of life among older adults: results from the English Longitudinal Study of Ageing', *Quality of Life Research*, 18(10): 1301–9.