RESUMO

Objetivo: compreender como a idosa realiza o seu autocuidado a fim de manter a sexualidade durante a velhice. Método: estudo descritivo exploratório com abordagem qualitativa realizado na Unidade Básica de Saúde (UBS) de Candelária / RN com 20 idosas, no período de agosto e setembro de 2012, a partir de entrevista semiestruturada que, após leitura, foram analisadas por Análise Temática. O parecer favorável ao estudo foi com o Protocolo nº 347/11 do Comitê de Ética em Pesquisa, CAAE nº 0375.0.051.000-11. Resultados: a sexualidade no âmbito da feminilidade perpassa várias questões culturais e sociais, as quais estão diretamente relacionadas com o autocuidado da mesma. Conclusão: considera-se que o autocuidado é fundamental em todas as etapas do ciclo vital, porém, durante o envelhecimento, geralmente, acaba sendo esquecido. Vale ressaltar que ações que promovam o autocuidado nos idosos são imprescindíveis para manter sua sexualidade ativa, contribuindo para o seu bem-estar biopsicosocial. Descriptores: Autocuidado; Enfermagem Geriátrica; Idoso; Sexualidade.

RESUMEN

Objetivo: entender cómo las señoras mayores realizan su auto cuidado para mantener la sexualidad en la vejez. Método: un estudio descriptivo exploratorio con enfoque cualitativo realizado en la Unidad Básica de Salud (UBS) de la Candelaria / RN con 20 mujeres de edad avanzada, entre agosto y septiembre de 2012, de una entrevista semi-estructurada que después de leer, fueron analizadas por Análisis Temático. El asentimiento al estudio fue con el Protocolo 347/11 de la Comisión de Ética en la Investigación, CAAE 0375.0.051.000-11. Resultados: la sexualidad en el contexto de la feminidad impregna diversas cuestiones culturales y sociales que están directamente relacionadas con el auto cuidado de la misma. Conclusión: se considera que el auto cuidado es fundamental en todas las etapas del ciclo de vida, pero, durante el envejecimiento, menudo acaba siendo olvidado. Es de destacar que las acciones que promueven el auto cuidado en los ancianos son esenciales para mantener su sexualidad activa, lo que contribuye a su bienestar biopsicosocial. Descriptores: Cuidados Personales; Enfermería Geriátrica; Ancianos; Sexualidad.

ABSTRACT

Objective: understanding how the elderly women perform self-care to keep sexuality in old age. Method: a descriptive exploratory study of a qualitative approach conducted at the Basic Health Unit (BHU) of Candelaria / RN with 20 elderly women, between August and September 2012, from semi-structured interview that, after reading, were analyzed by Thematic Analysis. The assent to the study was with Protocol 347/11 of the Research Ethics Committee, CAAE 0375.0.051.000-11. Results: sexuality in the context of femininity permeates various cultural and social issues, which are directly related to self-care of it. Conclusion: it is considered that self-care is basic at all stages of the life cycle, but during aging, often ends up being forgotten. It is noteworthy that actions that promote self-care in the elderly are essential to keep her sexuality active, contributing to their biopsychosocial welfare. Descriptors: Self-care; Geriatric Nursing; Elderly; Sexuality.
INTRODUCTION

The human aging process is a challenge in this global society, being inherent in all living beings, occurring differently in each individual over its life.

With the advancement of medicine and technology, thus improving the quality of life and curing diseases, increased life expectancy begins to be effective at the global reality, confirming for the change of the population profile. This process was observed in developed countries, it shall be seen in developing countries, like Brazil. In the last century the Brazilian average lifetime was of 33 years old and in 2012 rose to 74,6.6

Old age is not a decline, but a continuation of life with its characteristics and peculiarities. Thus, the elderly goes through some changes of anatomical and physiological aspect, psychological, physical and social, that may influence sexual interest in the exercise of femininity and body image may be related, for example, the appearance of gray hair and wrinkles.5

Sexuality is still associated with youth, despite changes in the profile of the world’s population. Many consider the elderly as asexual because of myths, taboos and prejudices in society about this subject.5,6 Thus, this type of design obstructs health promotion work of the multidisciplinary team, as well as inhibit self-care.

Therefore, sexuality can be described as a form of expression of the person on its gender, being a woman or man, through each specific through the floor, gestures, ornaments, speech, etc.7 Not being restricted only the sexual act.6

In addition, the elderly have the right to exercise their sexuality, which is not restricted to sexual interaction, when self-care is a healthy and safe way that encourages the rescue of self-esteem of the elderly.8 Moreover, the preservation of the old self-esteem is still an obstacle, since in contemporary society, cultural values oriented youth tend to depreciate the same in terms of their fitness and sexual attraction.5

It is believed that health education through multidisciplinary teams for the elderly is one of the ways that can contribute to the understanding that there promoting their health, favoring autonomy over their body. It is thought that aging may prove to be a positive experience, but it is necessary to invest in care, prevention and control of diseases typical of this age.5

So, caring is effected in the daily lives of every individual from self-care, contributing to the maintenance of dignity, and fostering its development. Moreover, the concept, activities, therapeutic requirements and requirements are intrinsic to human beings.10 The presence of self-care during old age favors the increase in life expectancy, and will even beyond, promotion of biopsychosocial well-being of that individual, improving its quality of life by encouraging the maintenance of its sexuality, as well as guidance and aid from workers and family members to ensure the achievement of these in order to promote mental capacity, cognitive and functional to the elderly.

In this context, the question is: “The elderly’s experience enables them to exert their sexuality effectively?”. To answer this question, it was elaborated the general objective of the study: to understand how the elderly performs self-care in order to keep their sexuality in old age.

This study is a guiding principle of the need to deepen this theme, because of the importance to the scientific community and society. The contribution to the emergence of new research will facilitate improving the perception of health professionals in relation to health promotion and disease prevention, focusing on the elderly population, highlighting the aspects related to self-care associated with their sexuality, thus providing a significant improvement in the quality of life of individuals as they age.

METHOD

Article compiled from the research project entitled « Elderly Sexuality: A nurse reflection »., Federal University of Rio Grande do Norte/UFRN, Natal (RN), Brazil, 2012.

It is a descriptive exploratory study of a qualitative nature, conducted with 20 elderly participants of relaxation groups and physical activity in the Basic Health Unit (BHU) of Candelaria, located in the southern region of the city of Natal / RN, between August and September 2012. We chose this unit due to the same hold regular activities with the elderly population of the catchment area and the locality of BHU, by conducting therapeutic groups with focus on physical activities and prose.

Inclusion criteria were persons over 60 years of age; members of groups: yoga, gymnastics, dance or prose, the latter being only for women, BHU of Candelaria; and to sign the Informed Consent (IC). Since the exclusion criteria were based on males.

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The proposed study was initiated after approval from the Research Ethics Committee (CEP) of the Federal University of Rio Grande do Norte (UFRN) under CAAE 0375.0.051.000-11, receiving assent to the Protocol 347/11, as recommended by Resolution 466/2012 of the National Health Council, and the health service authorization, in compliance with ethical principles. In order to preserve the identity of study participants, they were identified with names of gems, because of its beauty and strength.

It was used a script to generate individual interview with questions related to the maintenance of sexuality through self-care. In the first contact the authors of the study explained the purpose of this and their goals. After the old affirmative response to participate in the study, they signed the informed consent. At another time interviews were conducted.

To analyzing the data collected, there was the reading of the interviews, the testimonies of the elderly were considered based on the Thematic Analysis through this it was possible to discover the units of meaning that make up the communication, associating the meanings expressed by the study subjects.

Thus, the Thematic Analysis passed the following stages: the first stage, there was the understanding of the data collected through the reading; in the second, through the speeches of the interviewees, when began emerging themes; in the third, the analysis is compared with other studies that address the issue; and the last step involved the discovery of the cores of felt which have been interpreted and discussed.

### RESULTS

#### Socio-demographic profile

The dominant presence of women in the groups set up by the basic health units for health promotion is a constant in all age groups, due to this fact it was determined that 100% of respondents in the survey would be women. It is worth noting that sometimes female sexuality is denied, and may be associated with the loss and / or desire repression due to grief, guilt, separation or widowhood.

As shown in Table 1, the age of the respondents older had as prevalent among 60-65 and 71-75 years old, each one with 30%. Regarding marital status, most of the respondents are married, 45%. And with regard to the profession, the highlight was the retired, with 55%.

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<td>Artisan</td>
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<td>Cosmetics retailer</td>
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<td>Public servant</td>
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After analyzing the speeches of older interviews emerged two units of meaning: sexuality and self-care: female conceptions and family: reflections on elderly sexuality. It is possible to observe how self-care is directly connected with the family, and the way in which the elderly can experience their sexuality.

#### Sexuality and self-care: female concepts

The exercise of self-care can be linked to the pleasure of women dressing themselves,
being derived from the feeling of being beautiful and good about. So it is directly related to self-esteem, which will result in the daily execution of their sexuality, as shown in the following lines:

[...] I think beautiful, I'm happy to get me in making nail, and walk with clothing suitable for my age [...] (Alexandrite)
[...] I think sensual and I'm happy to just get me, take care of me very well [...] (Agate)
I'm beautiful in spirit, say I'll die pretty. If I do not think I'm beautiful, who will? [...] (Spinel)
I feel pretty, love me [...] (Emerald)

In contrast, self-care can sometimes be motivated by a commitment whatsoever or even incentive or to please their families, as the following subject:

I'm happy to get me when I go to the doctor and to parties. (Jasper)
I delight in dressing up. At home they demand it of me. (Onyx)
I take care of myself to introduce myself better, to please my husband. (Pyrite)

Consequently, the low self-esteem can have a negative influence on sexual activity, and on the exercise of sexuality by the elderly, resulting from changes associated with the aging process, so that they do not feel attractive. This can be seen below:

I do not think I'm beautiful, but I tidy [...] I'm not sexually active. (Ambar)
[...] My body has changed a lot. I love to get me to improve it. (Pearl)

The self-care related to sexual practice is evident in the speeches of the elderly, where the reduction or absence of this influences the desire to exercise and maintain self-care, often in favor of the fellow.

I'm not sexually active, but if it was I wanted to know how my partner would be in this aspect. (Quartz)
[...] I do not have me care. (Emerald)
I'm not sexually active, but if I was, would take care of me better, would use condoms. (Opal)

Over the years, body changes are experienced by all humans, causing some changes occur. In the case of sexual intercourse may be an adaptation when compared to the period in which the individual was young, reported decreased sexual vigor, libid, as well as dyspareunia, among others. Often the act restricting, reducing and prevention through condom use, and it is still possible to notice the lack of understanding about what actually would be sexually active as in speech below:

I am sexually active, do not use condoms, but it has not penetration, because it hurts a lot. (Axinite)

There are several ways to perform self-care, since today there is an increasing access to education, which facilitates the understanding of society to the need for actions to promote self care in order to improve their quality of life, either through physical activities, inclusion of healthy living habits and regular consultations with health professionals.

I go to the gynecologist, despite having no relationship since 10 years. (Granada)
[...] I do hydrogymnastics, and my rates are very good. (Jasper)
[...] Do routine checkups and preventive annually. (Onyx)
I take care of my health; I walk [...] (Spinel)
[...] I do gynecological examination every year and my husband also, and use lubricating pills. (Pearl)

The daily practice of self-care can be stimulated or private depending on the placement of the elderly family members, so it is up to each family to have the sensitivity to understand the aging process and its relationship with the sexuality of the elderly.

♦ Family: reflections about the sexuality of the elderly women

The family plays a key role in the aging of life. However, for some members of the Elder family is considered as asexual, often, it ends up being internalized by many, resulting in the feeling of invasion, interfering with their relationships, stopping until they can get them.

I feel invaded yes, I do not date, but if I wanted to date, my daughters would say I'm old. (Jasper)
I feel invaded, as my daughter said if I become a widow I do not get married anymore, but I run away and hid me if meet someone special. So, alive one more story. (Granada)

In contrast, there are families who support the elderly, who sometimes are widows with no future prospect of finding someone to take over their life, not interfering with their privacy and individuality. Thus, the positive influence of the family in relation to the elderly dating allows for harmony in family dynamics, as in the following quote:

I don't feel invaded, on the contrary, my nephews encourage dating [...] (Pearl)

### DISCUSSION

The aging process is inherent in all society, by that each person experiences it differently, seeking to adapt to this process, whether through the care of the physical appearance, as the search for strategies to retard aging.
In the lifecycle there are the presence of several changes related or not to Diseases and Noncommunicable Diseases (NCD) on aging, which can affect the elderly the ability to perform self-care.⁸

Thus, the elderly seek to maintain their self-care, which can be grounded by the framework of Orem’s theory, being conceptualized as performance or engaging in activities that people perform to maintain life, health and well-being.¹² In this study it is evident the search of the elderly in maintaining their biopsychosocial well-being through simple actions such as grooming, not only in moments that have marked some compromise, but in their daily lives as a way to preserve their self-esteem.

In addition, self-care was also caused according to the speech of older participants through regular visits to the doctor, carrying out routine tests and physical activity, regardless of sexual practice. This makes it essential for health promotion and disease prevention.⁸

The responsibility of each human being with itself is necessary in its daily life, in order to keep the body in homeostasis, is relating to the biological, physical, psychological, spiritual, and sexuality, which once is seen by society as something nonexistent to those who have reached old age.³

Thus, some elderly of the study have left to worry about self-care due to lack of sexual practices in their daily lives, being compounded by lack of a partner. In turn, the elderly who have sexually active have difficulty to implement in their practice the use of preventive methods, such as in another study which showed that 79.4% of elderly never use any kind of prevention, to have a stable partner.¹³ Condom use is not adhered to by the vast majority of the elderly.¹⁴ Although a study reports that 92% of participants agreed that the use of condoms prevent STD / AIDS.¹⁵ And in the case of women, this fact is more visible due to cultural issues, as these methods were not envisioned as preventive, but as contraceptives.

This fact worries because mainly the elderly do not use this method does not involve the risk of disease resulting from the sex, such as sexually transmitted infections (STIs) and the Acquired Immune Deficiency Syndrome (AIDS). This led to an increase in the quantity of women with AIDS in Brazil. In 1989 the ratio was of 6 cases of AIDS in males to every 1 female. In 2011, it rose from 1.7 cases in men to 1 in women. Though, to have been a reduction in cases in 2003 aged, with 935 to 592 cases in 2013. Still, we need to devise strategies and campaigns for prevention in this age group.¹⁶

Thus, sexuality is fundamental to healthy life process of human beings at any stage of the life cycle and is directly related to human feelings and emotions, which cannot grow old with the body, as the company calls the elderly because mind can remain young.³

It is observed that the elderly have sought a change of perception of society with respect to the aging process, in order to change the prevailing ideological social model associated with a preconceived and stigmatized vision, resulting in an elderly you are (re) building a new social identity for yourselves.

This is directly related to different feelings and experiences, such as self-esteem, which is made up of feelings of competence and self-esteem, self-respect and self-confidence plus, reflecting the implicit judgment of the ability to cope with life’s challenges.

The pursuit of self-esteem through self-care should be encouraged as it is an essential quality for anyone and especially the elderly and may contribute to the feeling of independence, and promote its health.⁸

Happiness is the result of self-esteem, which is characterized as like yourself genuine and selfless way, if it is not excessive appreciation of himself, or of arrogance and self-centeredness. So really like what is, accepting their own skills and limitations.¹⁷⁻⁸

Thus is related to health, and the emotions and positive feelings are transformed into chemicals that can prevent and cure illnesses.¹⁸ Moreover, even it can be understood as the feeling, appreciation and consideration that a person feels for itself, that is, how much you like him, you see and what you think about it.

Sexuality is expressed by the subjectivity of each individual, which can be demonstrated by the individual characteristics such as perfume, speech, gestures, among others. Moreover, in a new relationship, both men and women can become insecure and anxious; some people may not feel ready for intimate relationships or marriage. Therefore, it is necessary understanding between the couple until they obtain the conviction of the existence of reciprocal and loving knowledge. It is essential that, in addition to physical attraction, there is respect, understanding, caring, trust, dialogue and a partner can take care of each other; thus, the ratio will become permanent.
The elderly need to be seen in its entirety, where their sexuality should be assisted, for this relearns / relearned how to cope better with their body, in order to overcome the barriers resulting from the aging process changes, not being unable to demonstrate their emotions and feelings, causing it to exert their sexuality in a healthy and confident manner.

The sexuality of the elderly should not be observed without relating it to self-care, which will involve both self-esteem as happiness which are experienced daily as a result of positive contributions in their body.

The recognition of self-care during old age, often ends up getting influence from family members who experience the everyday life of this elderly and can contribute to the realization of their sexuality through self-care, or even create barriers that prevent them to sight and enjoy their sexuality, making it difficult for the same relearn and adapt to the new context in which it operates.

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