

## SEXUAL HEALTH AND AGING: LITERATURE REVIEW AND NOTES FOR SEX EDUCATION

### *SAÚDE SEXUAL E ENVELHECIMENTO: REVISÃO DA LITERATURA E APONTAMENTOS PARA A EDUCAÇÃO SEXUAL*

### *SALUD SEXUAL Y ENVEJECIMIENTO: REVISIÓN DE LA LITERATURA Y APUNTES PARA LA EDUCACIÓN SEXUAL*

Ana Cláudia BORTOLOZZI<sup>1</sup>  
Tatiana de Cássia Ramos NETTO<sup>2</sup>

**ABSTRACT:** Life expectancy has increased in Brazil and ageing, as a biological and psychosocial phenomenon, is a phase of attention of professionals and researchers. Although there are prejudices about sexuality in aging, many elderly people have an active sexual life and are vulnerable to sexually transmitted infections. This documentary research conducted a literature review on sexual health and aging, selecting 68 articles for content analysis. The articles were found between 2001 and 2018, most of them in 2015 and in the areas of Nursing, Collective Health and Gerontology. The results were described in the categories: (A) Violence against elderly; (B) Diseases and physical problems in aging; (C) Sexual health and sexuality; (D) Experiences of elderly with HIV/AIDS. (E) HIV/AIDS and elderly: vulnerability and prevention. The need for sex education to decrease the level of vulnerability of older people to sexual health is concluded.

**KEYWORDS:** Aging. Sexual Health. Sexual Education.

**RESUMO:** *A expectativa de vida aumentou no Brasil e o envelhecimento, como um fenômeno biológico e psicossocial, é uma fase de atenção de profissionais e pesquisadores. Embora haja preconceitos sobre a sexualidade no envelhecimento, muitos idosos têm vida sexual ativa e são vulneráveis às infecções sexualmente transmissíveis. Esta pesquisa documental realizou uma revisão da literatura sobre saúde sexual e envelhecimento, selecionando 68 artigos para análise de conteúdo. Os artigos foram encontrados entre 2001 e 2018, sendo a maior parte em 2015 e nas áreas da Enfermagem, Saúde Coletiva e Gerontologia. Os resultados foram descritos nas categorias: (A) Violência contra idosos (as); (B) Doenças e problemas físicos no envelhecimento; (C) Saúde sexual e sexualidade; (D) Vivências de idosos com HIV/Aids. (E) HIV/Aids e idosos: vulnerabilidade e prevenção. Conclui-se a necessidade da educação sexual para diminuir o nível de vulnerabilidade de pessoas idosas sobre a saúde sexual.*

**PALAVRAS-CHAVE:** *Envelhecimento. Saúde Sexual. Educação Sexual.*

<sup>1</sup> São Paulo State University (UNESP), Bauru – SP - Brazil. Professor at Department of Psychology. Post-doctor in Education (UMINHO) - Portugal. Associated Partner in Inclusion, Sexual Education and Human Development. ORCID: <https://orcid.org/0000-0003-4796-5451>. E-mail: [claudia.bortolozzi@unesp.br](mailto:claudia.bortolozzi@unesp.br)

<sup>2</sup> São Paulo State University (UNESP), Bauru – SP, Brazil. PhD student in the Post-Graduate Program in Development and Learning Psychology. ORCID: <https://orcid.org/0000-0002-9907-790X>. E-mail: [taty\\_psy@yahoo.com.br](mailto:taty_psy@yahoo.com.br)

**RESUMÉN:** *La expectativa de vida aumentó en Brasil y el envejecimiento, como un fenómeno biológico y psicosocial, es una fase que necesita de atención de profesionales e investigadores. Aunque hay preconceptos sobre la sexualidad en el envejecimiento, muchos ancianos tienen vida sexual activa y son vulnerables a las infecciones de transmisión sexual. Esta investigación documental realizó una revisión de la literatura sobre salud sexual y envejecimiento, seleccionando 68 artículos para análisis de contenido. Los artículos fueron encontrados entre 2001 y 2018, siendo la mayor parte en 2015 y en las áreas de la Enfermería, Salud Colectiva y Gerontología. Los resultados se describen en las categorías: (A) Violencia contra los ancianos (as); (B) Enfermedades y problemas físicos en el envejecimiento; (C) Salud sexual y sexualidad; (D) Vivencias de ancianos con VIH / SIDA. (E) VIH / SIDA y ancianos: vulnerabilidad y prevención.*

**PALABRAS CLAVE:** *Envejecimiento. Salud Sexual. Educación sexual.*

## Introduction

Over time societies have been attributing different meanings to old age, so it is not possible to understand it merely in its biological dimension, but rather as a historical, social and cultural phenomenon (AZEVEDO, 2005). Life expectancy in Brazil is approximately 75 years, as in the Americas, that is, the elderly population has increased rapidly in recent decades, encouraging researchers and professionals to plan actions that promote quality of life during this phase of human development.

Although aging is not a phenomenon restricted to the Brazilian population, Brazil presents an important change in its demographic design. From 2004 to 2014, the age group that most pointed growth was of people over 60 years of age: a process known as "transition of age structure" evidencing the experience of longevity, which made it necessary to implement a national policy aimed at the elderly, following the guidelines of international organizations on social and care programs for this population (FERNANDES; SOARES, 2012).

In Brazil, in 1994, it was the establishment of a national policy for the elderly to ensure the fundamental principle that "the elderly are a subject of rights and must be treated differently in each of their physical, social, economic and political needs" (CAMARANO; PASINATO, 2004, p. 269). For the coordination and management of this policy was designated the Secretariat of Social Assistance of the Ministry of Social Security and Social Assistance (MPAS). Another important milestone was the approval of the National Social Assistance Policy (PNAS) in 2004, with its subsequent regulation in 2005 by the Unified Social Assistance System (SUAS), which establishes a federative pact for the operationalization of the PNAS.

The Elderly Statute published in Law No. 10,741 (BRASIL, 2013) regulates the rights granted to all citizens from 60 years of age. In this statute there is mention of the support of the

right to comprehensive health care, through the Unified Health System (SUS). It guarantees universal and equal access for prevention, promotion and protection, as well as health recovery, establishing preferential care for the old, among other actions. The National Health Policy of the Healthy Person (PNSPI) (BRASIL, 2006) has as its primary purpose the recovery, maintenance and promotion of autonomy and independence of the old person, directing collective and individual health measures to this end, in line with the principles and guidelines of the Unified Health System.

In addition to public policies in 2005, there is a theoretical framework that integrates the multidimensional approach to aging and has the seal of the World Health Organization (WHO), which adopted the document "Active aging: a framework for policy making". This document presents the main challenges to be faced in the world, related to the aging of the population, and highlights the fact that health can only be created and maintained with the participation of several sectors (VERAS, 2009). Active aging is "the process of optimizing health, participation and safety opportunities, with the aim of improving quality of life as people get older" (WHO, 2005, p. 14).

One of the aspects of life, important in quality of life, is sexuality. As a still controversial topic, sexuality becomes even more complex when it is based on various prejudices related to sexual life at older ages, despite the scientific recognition that sexuality can be experienced by all, regardless of chronology (PASCUAL, 2002; VERAS, 2009).

To understand the sexual behavior of the elderly, one must look at the sexual customs built on society. The sexual difficulties experienced by some elderly today may be related not only to an isolated factor, but to the consequences and results of an entire history, regulated by socio-normative codes and standards within society (PASCUAL, 2002). Studies have shown that the elderly are sexual people (ALENCAR; MARQUES, THE MARQUES; LOYAL; VIEIRA, 2016; NETTO-MARTINS, 2012) and despite possible difficulties arising from aging in sexual response sexual practice in old age is not only possible, but it is desirable. Some authors argue that desexualization in aging is not chronological is a social issue (GRANDIM *et al.*, 2007; LINHARES *et al.*, 2008).

It is not sexual activity that makes people vulnerable to STIs and HIV/AIDS, but sexual practices that are carried out in an unprotected manner and this is a valid assumption for all ages. However, it should be emphasized that the health professional should be attentive to the specific complaints of the old people, considering that they are sexual beings and vulnerable to sexually transmitted infections and other difficulties in the loving and sexual field (SANTOS; ASSIS, 2011; RODRIGUES; PRAÇA, 2010).

The experience of sexuality, as in any phase of life, needs to be guaranteed in sexual health. Research, prevention campaigns, public policies and specialized services tend to disregard this portion of the population when it comes to sexuality and, only recently, in the face of advances in medicine that have helped the sexual life of elderly women and men (use of hormones, medicines for penile reaction, etc.) is that health services have received more often this population. Along with the most frequent sex life, there was a significant increase in elderly people infected with sexually transmitted infections, such as AIDS, arousing the interest of scholars in the area of sexual health and aging.

The phenomenon of sexual health risks in aging is not yet so well known by the general population or even by health professionals who should welcome this demand. In this sense, it would be important to have a general survey on the literature and what is characterized in the interest of researchers on this theme, considering sexually active, vulnerable or with HIV/AIDS and other sexually transmitted infections. In view of the above, we propose this study to investigate what the literature on sexual health and aging says.

## Method

This research has a qualitative-exploratory approach, documentary study type (SPATA, 2005), characterized as a systematic literature review study that is a research modality that seeks to identify, analyze and present previous studies on a particular research problem.

Common steps were performed, such as: locating the documents (articles), selecting them before inclusion and exclusion criteria, analyzing from previous purposes and interpreting them in the light of theory. In our case, we chose to select the articles in an accessible and general database: [scielo.org](http://scielo.org)<sup>3</sup> that prioritized Brazilian studies, because our subsequent interest was to think about public policies. The variables studied were "sexual health and aging" and the descriptors used were the crossing of: "sexual health" and "HIV" with "elderly", "aging" and "old age". All 114 articles that appeared were selected and then repeated ones were excluded. The final sample, based on the objective of the axis, resulted in 68 articles.

For data analysis, the procedures we adopted were to perform a careful reading of each of the articles with thematic and conceptual extraction, for the subsequent organization of the emerging thematic categories, based on the content analysis technique proposed by Bardin (2011).

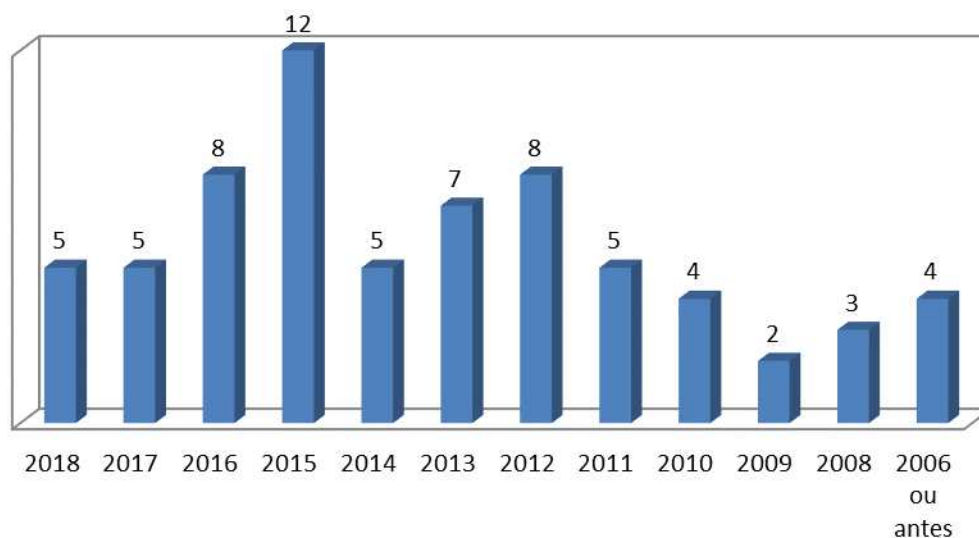
<sup>3</sup> Available: <http://www.scielo.org/php/index.php>. Access: 10 Sept. 2020.

## Findings

### General characterization of articles

The articles were found between 2001 and 2018, being the highest concentration of them in 2015. Figure 1 shows the distribution of the articles in the final sample over the period in years.

**Figure 1** – Distribution of 68 articles annually

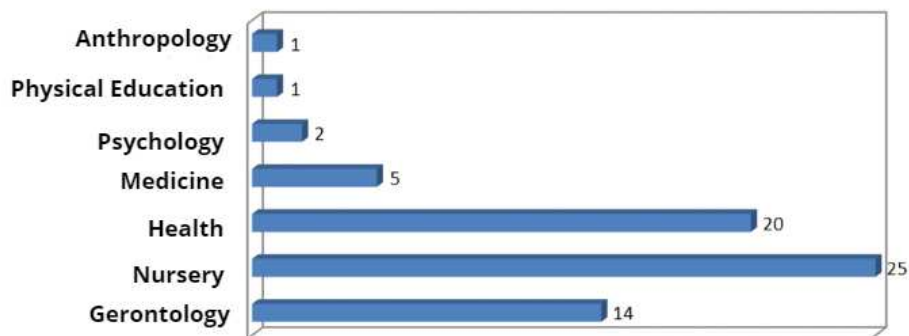


Source: Prepared by the authors

In the last decade the number of articles is increasing, and the amount was significant in 2015 (=12). Before 2006, we recorded only one article each year, one in 2006, one in 2004, one in 2003 and another in 2001. Most of the articles were published in the following journals: "Revista Brasileira de Geriatria e Gerontologia" (n=14), "Revista Brasileira de Enfermagem" (n=7) and "Cadernos de Saúde Pública" (n=6).

The areas of the sciences of the journals were located from the journal's consultation which is associated with a department, university or association. (Figure 2).

**Figure 2** – Distribution of articles in the different areas of Science



Source: Prepared by the authors

Thus, regarding the area of science, considering the published scientific journal, we have that most articles focus on nursing, followed by Health and Gerontology. Related areas were few, such as "Physical Education", "Anthropology" and "Psychology" with only two publications, which is quite limited.

### Thematic analysis of articles

The 68 articles were distributed in five categories involving the specific themes within the great theme that is sexual health in aging, as shown in Chart 1.

**Table 1** – Distribution and description of emerging thematic categories

Thematic Categories	Description	In the articles (n=68)
<b>(A) Violence against the elderly</b>	It brings together articles that address questions about physical, sexual, psychological, financial violence, etc. involving the person in aging or the relationship with health and gender issues.	6
<b>(B) Diseases and physical problems in aging</b>	It involves articles that point out specific themes about health problems in old age, relating to individual and social factors.	8
<b>(C) Sexual health and sexuality</b>	Articles dealing with broad issues of sexuality, such as relationships, beauty patterns, gender relations and those specific to sexual response and hormonal changes specific to aging.	14
<b>(D) Experiences of elderly people with HIV/AIDS: incidence, epidemiological data, diagnosis and treatment</b>	Studies that present data on the incidence of HIV/AIDS in the old, as well as the profile and other characteristics in different contexts. In addition, the articles present information obtained from the old people who already have HIV/AIDS about the diagnosis received, treatment and treatment modes, habits, difficulties and coping with the needs of care after the disease and implications for the guarantee of quality of life.	20
<b>(E) HIV/AIDS and the elderly:</b>	Studies that present data obtained from health professionals and/or caregivers of elderly people who have HIV/AIDS or discuss levels of information, knowledge about sexuality, factors in life that lead to the	20

<b>Vulnerability and prevention</b>	vulnerability of the elderly in the face of HIV/AIDS infection. In addition, the articles cite prevention strategies in sexual health aimed at the elderly population.	
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Source: Prepared by the authors

In Category A- "Violence against the elderly", we observed that the studies were conducted based on data recorded in health centers and in information systems and not directly interviewing the elderly themselves. The articles denounce the high rates of violence against the elderly, being the most common physical, affected against elderly men and by aggressors outside the family, followed by sexual and psychological violence that occur more with elderly women, by people known.

Category B- "Diseases and physical problems in aging" presented articles that described physiological aspects related to aging, pointing out important factors that can be related to health and quality of life in old age. Diseases such as tuberculosis, hypothermia, as well as symptoms of mood disorders (depression), were researched considering individual protective factors, such as physical activity, sexual relations, as well as social factors, such as favorable economic conditions and effective public policies.

In the field of sexuality (Category C- "Sexual health and sexuality"), the themes addressed about sexual response were about the use of hormones and medicalization and the market interests of its uses. Organic factors such as chronic pain or healthy habits were highlighted as possible variables that interfere in satisfactory or non-satisfactory sex life. But, above all, psychosocial factors are presented in several studies - myths and prejudices, lack of partner, lack of information, patterns of beauty, femininity and masculinity, as important social and cultural influences in the exercise of sexuality in aging.

Many articles conclude the need for health professionals to care about sexuality in aging, especially regarding the vulnerability of this population to the risks of diseases. Two review studies and a theoretical text complement the information obtained by the analysis of the articles in this category, emphasizing the importance of social, economic, psychological factors, gender issues, quality of health, conditions of education and clarification when analyzing the sexuality of the old people, in different contexts and conditions.

In Category D- "Experiences of elderly with HIV/AIDS: incidence, epidemiological data, diagnosis and treatment" articles converge, in general, for some characteristics. The mean age of diagnosis is between 60 and 69 years, although contamination may occur before. Older studies show a higher proportion of elderly men than women, which in the early years was significantly decreasing, currently reaching many women. The majority of elderly people with

HIV/AIDS have low schooling, have been infected by heterosexual sexual relations. Brazilian studies show this information from different states of the country: Distrito Federal, Ceará, Rio Grande do Sul, Rio de Janeiro, Minas Gerais and Rondônia and the data obtained show a reality from 1998 to the day of today.

Living with HIV/AIDS and being elderly (a) implies adding the conditions of seropositivity and its treatment to the common physiological changes in aging, which increase the chances of developing associated diseases and psychosocial difficulties. Given the diagnosis, it is common for the elderly to do not even know how the transmission occurred and evidence negative representations about AIDS that made it difficult for them and their families to accept the new condition. Generally, the diagnosis for this population ends up occurring late, because the professionals themselves do not investigate this possibility and end up dialoguing with them about sex and prevention, only after they have already become infected.

The relationship between variables that represent risk factors, such as educational level or other diseases, or that represent protective factors, such as high educational level, knowledge and mastery of information about contagion and the prevention or maintenance of a healthy body (physical activities, eating, etc.) were focuses of some studies to assess the quality of life of elderly people with HIV/AIDS. This quality of life, affected by concerns about confidentiality, sexual life or financial difficulties, as well as difficulties in accepting the diagnosis or the use of medication. Difficulties in treatment adhering were highlighted due to delay or non-use of the medication, side effects of medications or the use of alcoholic beverages; there have also been studies on the influences of antiretroviral therapy and the assessment of the functional capacity of these people. Studies have also highlighted the psychosocial impacts that were reported by the elderly and that lead to a need for reorganization in their social attitudes and coping with prejudices.

Finally, in Category E- "HIV/AIDS and the elderly: Vulnerability and prevention", the studies showed the vulnerability of the elderly population in the face of STIs contagion in general, especially regarding HIV/AIDS. On the one hand, the old people do not have or have little information on the subject and do not include preventive practices and, on the other hand, there is an invisibility of active sexual life on the part of health professionals and lack of public policies that invest in intervention programs for prevention.

In many cases, the old people know about HIV/AIDS, but do not recognize themselves as vulnerable and do not use condoms, maintaining the imaginary that AIDS does not reach them. Even when there are elderly who recognize themselves susceptible to infection, it is



common not to adopt protective measures, such as using condoms, often because they have difficulties to negotiate their use with partners, especially when it comes to elderly women.

Also in this category, the conceptions and opinions of the professionals involved in the care of the old clientele were recorded in the studies. There is recognition of the vulnerability of this population to HIV/AIDS infection, but because they are elderly, when there is contagion, they associate the need for greater care and identify the impacts of this diagnosis on their lives: isolation, loneliness, fear and shame in the face of prejudice.

The discussion of the terms included in the International Classification for Nursing Practice draws attention to the concern of these professionals in naming more precisely the diagnoses and treatments that should be directed to the elderly when it comes to the contamination of these sexual infections. However, there are studies that show that these professionals emphasize the individualized and clinical care of elderly with HIV/AIDS and do not expand to a discussion about the social aspects involved in vulnerability and should be considered in the treatment.

Only two articles referred to proposals for intervention in sex education and raised a fundamental issue in the scenario of vulnerability and increased rates of HIV/AIDS in the elderly: prevention. There is a proposal for intervention with a group work that favors the dissemination of information and reflections on the importance of preventive attitudes and there is the description of a booklet as a pedagogical material that would also help in this same purpose.

## **Discussion**

The articles were located in the period of two decades ago, suggesting that the phenomenon of sexual health in aging, mainly on HIV/AIDS infection and prevention gained prominence among researchers, as contamination rates were more notified (BRASIL, 2017). In 2015 there is a significant increase in the number of articles and our hypothesis is that epidemiological data that between 2006 and 2014 showed a significant increase in HIV/AIDS contamination in the elderly and a decrease among adults.

Most of the articles were published in journals whose areas of knowledge were specific to aging (Geriatrics and Gerontology) or the field of health (Nursing and Public Health), emphasizing that sex education is still a restricted field of human sciences, at least with regard to the prevention of sexual health in the elderly. Maia and Ribeiro (2011) recall that intervention

projects in sex education should consider all stages of human development and not only adolescence and adulthood.

The search in this literature review focused on the theme of sexual health in aging and it is important to highlight that in this axis of investigation other themes were unveiled: diseases, situations of violence and sexuality. Diseases are common in aging, but few studies relate illness to sexual health or lack thereof (possible difficulties in affective and sexual life). About sexuality and aging, we know that literature has an expressive contribution, because there are books and articles discussing, increasingly, the sexuality inherent to the human being that exists throughout life (ALENCAR *et. al.*, 2016; GRANDIM *et. al.*, 2007; LINHARES *et. al.*, 2008; NETTO-MARTINS, 2012).

In the case of relating sexuality to sexual health, the articles found were more restricted and considered beyond biological factors (alterations in sexual response), also psychological and social factors, in view of defined models of normality, such as aesthetics, sensuality, sexual vigor, etc. (MAIA, 2008). In addition, a current discussion was to question the use of hormones and medications that, on the one hand, contribute to the exercise of sexual practice, but on the other hand, medicalize the subject in order to manage his subjectivity (CARVALHO; RODRIGUES; COAST; ANDRADE, 2015).

The theme of HIV among the elderly was predominant in the relationship between health and aging (n=40 articles). A research group describes the profile of these people, incidence of contamination and reactions to diagnosis and treatment. In the context of secondary care, health professionals, such as physicians and nurses, had access to this population to obtain these data and, in some articles, recognized the importance of feelings, fears, difficulties of this population to deal with this situation in their lives, without mentioning any study with a psychologist. Bezerra *et al.* (2015) and Santos and Assis (2011) argue that it is necessary to consider subjective and social difficulties related to the experience of sexuality in aging, since the process of HIV/AIDS illness in the elderly is related to prejudices, stigmas and discrimination.

Another study group highlights the vulnerability of the sick to HIV/AIDS, either because of the little knowledge of the information needed to protect themselves, or by the invisibility of their sexual lives and risk situations, reflected in the prejudices of professionals, family members and themselves (LAROQUE *et al.*, 2011).

Silva *et al.* (2015, p. 821) recall that the increase in the number of elderly infected with HIV/AIDS brings a challenge "to public policies and the general population regarding the need to discuss sexuality, sexual practices in the aging process and the impact of these issues on the

health promotion of the elderly". Of the 68 articles, only two mentioned intervention proposals aimed at prevention, also suggesting the spread of the myth of asexuality of this population and little concern with campaigns and projects aimed exclusively at the elderly public (ALENCAR *et al.*, 2016; NETTO-MARTINS, 2012; PASCUAL, 2002; VERAS, 2009).

In addition, they also point to the little experience and training of health professionals involved in the primary care of the old, as well as the precarious public policies for the prevention of sexual health in this phase of human life (FERNANDES; SOARES, 2012; SILVA *et al.*, 2015). That is, the analysis of the literature indicates the need for proposals for sexual and preventive education in sexual health directly for people in aging, as advocated by Lazzarotto *et al.* (2013).

The literature converges to the need for health professionals to recognize that the elderly are sexually active, are vulnerable to STIs contagion, paying attention to their particularities both in care and in the planning and implementation of interventions (SANTOS; ASSIS, 2011; SILVA *et al.*, 2015).

## Considerations

The literature review is an important methodological procedure for an initial survey and mapping of a phenomenon that, in Brazil, is still little accessed in the areas of human and social sciences, but already widely reported in the field of health.

In view of the discussions, it is necessary not to lose sight of the importance of interdisciplinary teamwork: psychologists, educators, doctors, nurses, etc. in the entire integral process of care for the elderly. The data found contribute to sexual education professionals having knowledge of important elements for the elaboration and implementation of intervention proposals that allow to reduce the level of vulnerability of older people regarding sexual health.

It is concluded that efforts are still needed to guarantee the right to exercise sexuality in aging, meeting the needs of older people in preventive proposals, at the time of diagnosis, offering and maintaining treatment and welcoming possible psychosocial consequences of the experience of being infected by HIV/AIDS, for themselves, for their peers and family members and for society.

## REFERENCES

- ALENCAR, D.; MARQUES, A. P. O.; LEAL, M. C. C.; VIEIRA, J. C. M. Exercício da sexualidade em pessoas idosas e os fatores relacionados. **Rev. bras. geriatr. Gerontol**, Rio de Janeiro, v. 19, n. 5, p. 861-869, 2016.
- AZEVEDO, A. L. **A velhice e seus processos sócio-históricos**. Lisboa: Argumento, 2001.
- BARDIN, L. **Análise de conteúdo**. 5. ed. Trad. Luis Antero Reto e Augusto Pinheiro. Lisboa: Edições 70, 2011.
- BEZERRA, V. P.; SERRA, M. A. P.; CABRAL, I. P. P.; MOREIRA, M. A. S. P.; ALMEIDA, S. A.; PATRÍCIO, A. C. F. A. Preventive practices in the elderly and vulnerability to HIV. **Rev Gaúcha Enferm**, Porto Alegre, v. 36, n. 4, p. 70-76, 2015.
- BRASIL. Ministério da Saúde. **Boletim Epidemiológico HIV Aids 2017**. Brasília, DF: Ministério da Saúde, 2017. Available: <https://central3.to.gov.br/arquivo/387532/>. Access: 20 jan. 2019.
- BRASIL. Ministério da Saúde. **Estatuto do idoso**. 3. ed. Brasília, DF: Ministério da Saúde, 2013. Available: [http://bvsms.saude.gov.br/bvs/publicacoes/estatuto\\_idoso\\_3edicao.pdf](http://bvsms.saude.gov.br/bvs/publicacoes/estatuto_idoso_3edicao.pdf). Access: 20 jan. 2019.
- BRASIL. Ministério da Saúde. **Portaria n. 2. 528 de 19 de outubro de 2006**. Aprova a Política Nacional da saúde da pessoa idosa. Brasília, DF, 2006. Available: [http://bvsms.saude.gov.br/bvs/saudelegis/gm/2006/prt2528\\_19\\_10\\_2006.html](http://bvsms.saude.gov.br/bvs/saudelegis/gm/2006/prt2528_19_10_2006.html). Access: 20 jan. 2019.
- CAMARANO, A. A.; PASINATO, M. T. O Envelhecimento Populacional na Agenda das Políticas Públicas. In: CAMARANO, A. A. (Org.) **Os novos idosos brasileiros: muito além dos 60?** Rio de Janeiro: Instituto de Pesquisa Econômica e Aplicada (Ipea), 2004. p. 253-292. Available: [http://www.ipea.gov.br/portal/images/stories/PDFs/livros/Arq\\_29\\_Livro\\_Completo.pdf](http://www.ipea.gov.br/portal/images/stories/PDFs/livros/Arq_29_Livro_Completo.pdf). Access: 20 jan. 2019.
- CARVALHO, S. R.; RODRIGUES, C. O.; COSTA, F. D.; ANDRADE, M. S. Medicalização: uma crítica (im) pertinente? **Physis Revista de Saúde Coletiva**, Rio de Janeiro, v. 25, n. 4, p. 1251-1269, 2015.
- FERNANDES, M. T. O.; SOARES, S. M. O desenvolvimento de políticas públicas de atenção ao idoso no Brasil. **Rev. esc. enferm. USP**, São Paulo, v. 46, n. 6, p. 1494-1502, 2012.
- GRADIM, C. V. C.; SOUSA, A. M.; LOBO, J. M. A prática sexual e o envelhecimento. **Cogitare Enfermagem**, Curitiba, v. 12, n. 2, nov. 2007. Available: <https://revistas.ufpr.br/cogitare/article/view/9826/6737>. Access: 20 jan. 2019.
- LAROQUE, M. F.; AFFELDT, A. B.; CARDOSO, D. H.; SOUZA, G. L.; SANTANA, M. G.; LANGE, C. Sexualidade do idoso: comportamento para a prevenção de DST/AIDS. **Rev. Gaúcha de Enfermagem**, Porto Alegre, v. 32, n. 4, p. 774-780, 2011.

LAZZAROTTO, A. R. *et al.* Oficinas educativas sobre HIV/Aids: uma proposta de intervenção para idosos. **Rev. bras. de geriatr e gerontol**, Rio de Janeiro, v. 14, n. 4, p. 833-843, 2013.

LINHARES, F. M. P. *et al.* Percepção de idosos sobre o exercício da sexualidade atendidos no Núcleo de Atenção ao idoso em Recife. **Rev. enferm. Herediana**, Recife, v. 1, n. 2, p. 93-103, 2008.

MAIA, A. C. B. A Educação Sexual Repressiva: padrões definidores de normalidade. *In*: SOUZA, C. B. G.; RIBEIRO, P. R. M. (Org.). **Sexualidade, Diversidade e Culturas Escolares**: contribuições ibero-americanas para estudos de educação, gênero e valores. Araraquara: Laboratório Editorial da FCLar-UNESP; Alcalá de Henares: Universidad de Alcalá, 2008. p. 67-83. (Série Temas em Educação Escolar, n. 9)

MAIA, A. C. B.; RIBEIRO, P. R. M. Educação Sexual: princípios para a ação. **Doxa Revista Paulista de Psicologia e Educação**, Araraquara, v. 15, n. 1, p. 41-51, 2011.

NETTO-MARTINS, T. C. R. **Sexualidade e Envelhecimento na Percepção de Pessoas Idosas**. Orientadora: Ana Cláudia Bortolozzi Maia. 2012. 140 f. Dissertação (Mestrado em Psicologia) – Universidade Estadual Paulista Júlio de Mesquita Filho, Bauru, 2012.

ORGANIZAÇÃO MUNDIAL DA SAÚDE (OMS). **Envelhecimento ativo**: uma política de saúde. Brasília: Organização Pan-Americana de Saúde, 2005. 61 p. Available: [http://bvsmms.saude.gov.br/bvs/publicacoes/envelhecimento\\_ativo.pdf](http://bvsmms.saude.gov.br/bvs/publicacoes/envelhecimento_ativo.pdf). Access: 20 jan. 2019.

PASCUAL, C. P. **A sexualidade do idoso vista com novo olhar**. São Paulo: Loyola, 2002.

RODRIGUES, D. A. L.; PRACA, N. S. Mulheres com idade igual ou superior a 50 anos: ações preventivas da infecção pelo HIV. **Rev. Gaúcha Enferm**, Porto Alegre, v. 31, n. 2, p. 321-327, 2010.

SANTOS, A. F. M.; ASSIS, M. Vulnerabilidade das idosas ao HIV/AIDS: despertar das políticas públicas e profissionais de saúde no contexto da atenção integral: revisão de literatura. **Rev. bras. geriatr. gerontol.**, Rio de Janeiro, v. 14, n. 1, p. 147-157, 2011.

SILVA, L. C.; FELICIO, E. E. A. A.; CASSÉTE, J. B.; SOARES, L. A.; MORAIS, R. A.; PRADO, T. S.; GUIMARÃES, D. A. Psychosocial impact of HIV/aids diagnosis on elderly persons receiving care from a public healthcare service. **Rev. bras. geriatr. gerontol.**, Rio de Janeiro, v. 18, n. 4, p. 821-833, 2015.

SPATA, A. **Métodos de pesquisa**: ciências do comportamento e diversidade humana. Rio de Janeiro: LTC, 2005.

VERAS, R. P. Envelhecimento Populacional Contemporâneo: demandas, desafios e inovações. **Rev. Saúde Pública**, Rio de Janeiro, v. 43, p. 548-554, 2009.

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