



Deposited via The University of Sheffield.

White Rose Research Online URL for this paper:

<https://eprints.whiterose.ac.uk/id/eprint/109781/>

Version: Accepted Version

Article:

Fileborn, B., Hinchliff, S., Lyons, A. et al. (2017) The Importance of Sex and the Meaning of Sex and Sexual Pleasure for Men Aged 60 and Older Who Engage in Heterosexual Relationships: Findings from a Qualitative Interview Study. *Archives of Sexual Behavior*, 46 (7). pp. 2097-2110. ISSN: 0004-0002

<https://doi.org/10.1007/s10508-016-0918-9>

© Springer Verlag, 2016. This is an author produced version of a paper subsequently published in *Archives of Sexual Behavior*. Uploaded in accordance with the publisher's self-archiving policy.

Reuse

Items deposited in White Rose Research Online are protected by copyright, with all rights reserved unless indicated otherwise. They may be downloaded and/or printed for private study, or other acts as permitted by national copyright laws. The publisher or other rights holders may allow further reproduction and re-use of the full text version. This is indicated by the licence information on the White Rose Research Online record for the item.

Takedown

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.

The importance of sex, and the meaning of sex and sexual pleasure for men aged 60 and older who engage in heterosexual relationships: Findings from a qualitative interview study

Fileborn, B., Hinchliff, S., Lyons, A., Heywood, W., Minichiello, V., Brown, G., Malta, S., Barrett, C. & Cramer, C. (In press). The importance of sex, and the meaning of sex and sexual pleasure for men aged 60 and older: Findings from a qualitative interview study. *Archives of Sexual Behavior*

ABSTRACT

That many older individuals continue to engage in various forms of sexual expression well into later life is now well established in the literature. To date, however, only a small body of qualitative research has examined older men's experiences and understandings of sex in later life. Likewise, the ways in which older men's discussions on sex may be used as an avenue for "doing" masculinity remains underexplored. Older men are particularly interesting in this regard, as they inhabit an increasingly subordinated position in relation to hegemonic masculine ideals because of their age. To what extent might this limit or, alternatively, open up the possibilities for sexual expression and subjectivity in later life? Drawing on a subset of findings from *Sex, Age & Me: a national study with Australian women and men aged 60 and older*, data from qualitative interviews with 27 Australian men are explored in this article. The first Australian study of its kind, we argue that older men who engage in heterosexual relationships draw on a diverse and complex array of discursive positions regarding sex, relationships and masculinity in making sense of their experiences of sex in later life. Older men are a heterogeneous group, and their experiences and understandings of sex do not simplistically follow "decline" or "success" narratives of ageing. The findings of this research build upon and extend emerging research illustrating the centrality of intimacy to

older men's sexual lives, while simultaneously highlighting the ways in which the body and discursive constructions of sex intersect to shape older men's sexual subjectivities.

Key words: masculinity; older men; sex; sexual pleasure; aging.

INTRODUCTION

Despite the popular perception that older people are asexual, an increasing body of evidence illustrates this is far from being the case. Recent research documents that many individuals aged in their 60s, 70s and beyond continue to engage in sexual activity of various kinds well into later life, and that sexual identity remains important to many people across their life course (Fileborn et al, 2015a, 2015b; Gott & Hinchliff, 2003; Gott, Hinchliff & Galena, 2004; Jagus & Benbow, 2002; Kleinplatz et al, 2013; Minichello, Plummer & Loxton, 2004). Rather than following a simplistic, linear “decline” model of reduced sexual functioning, the sexual lives of older people are rich and complex. While there may indeed be some shift in sexual “function” or the types of sexual behaviours engaged in, this does not necessarily equate to reduced sexual pleasure or desire.

An emerging body of critical sexualities work has begun to challenge and disrupt models of sexual decline in later life, which privilege heteronormative, penetrative sex and youthful ideals of sexual practice. To date, however, the bulk of this work has been concerned with exploring and deconstructing the experiences of older women (Fileborn et al, 2015a, 2015b; Hinchliff & Gott, 2008), or with critiquing biomedical models of sexual functioning. With some notable exceptions, there has been little qualitative research undertaken with older men on their experiences and understandings of sex and sexual practices in later life, and the discursive positions they draw on in making sense of these. By “discursive”, we refer to the dominant constructions of sex and sexual practices through our

written and verbal communications. In order to address this gap, we draw on a subset of data from *Sex, Age & Me*: a national study with Australian women and men aged 60 and older. This study is the first of its kind in Australia, and internationally one of the only large, mixed methods studies of sexuality in later life. The findings are from in-depth qualitative interviews with men who have heterosexual relationships and are focused on their experiences and understandings of sex and sexual pleasure in older age. Specifically, in this article we consider how older men define the concepts of sex and sexual pleasure, the importance they place on sex and sexual pleasure as they age, and the ways in which they adjust their sexual practices to accommodate their ageing bodies or illness. Particular attention is paid to the discursive positions these men draw on in their discussions, which were underpinned by complex, and at times contradictory, discourses on gender, sex and relationships.

Men and Sex in Later Life

A great deal of research and discussion on sex in later life – most of which has been focused on the United States, Europe, and the United Kingdom – has been concerned with documenting that older people continue to have sex, and establishing the links between good health, quality of life and sexual activity (e.g., Camacho & Reyes-Ortiz, 2005; Corona et al, 2010; DeLamater, 2012; DeLamater & Koepsel, 2015; Gott & Hinchliff, 2003; Karraker & DeLamater, 2013; Menard et al, 2015; Schick et al, 2010; Smith et al, 2012; Waite et al, 2015; Wang et al, 2008). This body of research suggests that a majority of older men (and women) remain sexually active through either penetrative or non-penetrative sexual activity, although this tends to decline for those in “deeper” old age (75-80 years old – Bergstrom & Nielsen, 1990; Corona et al, 2010; Karraker & DeLamater, 2013; Schick et al, 2010). Older men consistently express more interest and engagement in sexual activity than women

(though this is often linked to a lack of available sexual partners for older women), and place higher levels of importance on sex, although this too can decline with age (Bergstrom & Nielsen, 1990; DeLamater & Koepsel, 2015; Karraker & DeLamater, 2013; Trudel et al, 2014; Waite et al, 2015; Wang et al, 2008). Older men also report higher levels of subjective sexual well-being in comparison to their female counterparts (Laumann et al, 2006).

Beckman and colleagues' (2014) Swedish research with four birth cohorts of 70 year old men found that sexual activity increased from 47% to 66% from the 1971-1972 to 2000-2001 cohorts. This suggests not only that many older men remain sexually active and that sex remains important as they age, but also that the proportion of older men who are sexually active is increasing over time.

Studies conducted to date across the U.S., U.K., and Europe have tended to take a narrow view of what constitutes "sexual activity", often limiting this definition to penetrative and penis-in-vagina intercourse, or acts that otherwise require an erect and hard penis (e.g., Beckman et al, 2014; Camacho & Reyes-Ortiz, 2005; Lee et al, 2015; Messaoudi et al, 2011; Smith et al, 2012. See Gilbert et al, 2013; Sandberg, 2015; Ussher et al, 2013 in support of this claim). It is not clear that such narrow definitions reflect the ways in which older men themselves understand sex – a matter that we investigate further in this article. While qualitative research conducted in the United States by Lodge and colleagues (2012) found that older heterosexual couples defined sex as constituting penetrative vaginal intercourse, others have found that older individuals decenter the importance of penetrative sex in later life (see below). Likewise, there has been a preoccupation with a bio-medical perspective of sexual "functioning" in later life at the expense of considering the quality and pleasure of sexual encounters, and the role of social and cultural norms in governing sexual expression (Arrington, 2000; DeLamater, 2012; DeLamater & Koepsel, 2015; DeLamater & Still, 2005;

Gilbert et al, 2013; Hughes, 2011; Mamo & Fishman, 2001; Marshall, 2012; Menard et al, 2015; Potts, 2000; Sandberg, 2015).

It has been argued that existing research has tended to position sex in later life within two seemingly contradictory discourses. The first of these views (heterosexual) sex as part of the “healthy” or “successful” ageing agenda – where remaining “youthful” (or middle-aged) becomes a signifier of having aged “well” (Calasanti & King, 2005; Hinchliff & Gott, 2008; Marshall, 2012; Menard et al, 2015; Sandberg, 2013a, 2015). The other half of this binary depicts sex in later life as part of a “decline” model of ageing, where older people’s sexuality is positioned as “less than” that of their younger counterparts. Here, sexual desire is described as gradually tapering off as we grow older and slide into “asexuality” (Jagus & Benbow, 2002; Menard et al, 2015). For instance, changes in sexual function as we age are constructed as *dysfunctional* (see, for example, Camacho & Reyes-Ortiz, 2005; Corona et al, 2010; Lee et al, 2015), implying a departure from an optimally functional, youthful norm (Loe, 2001; Potts, 2000; Trudel et al, 2014). Although these discursive positions may initially seem contradictory, they in fact both work to valorise youth at the expense of the experiences and material realities of older people (Calasanti & King, 2005; Sandberg, 2013b; Thorpe, Fileborn & Hurd-Clarke, in press).

Additionally, as Menard and colleagues (2015) argue, this bifurcation of bodies as either “functional” or “dysfunctional” serves to limit the possibilities of sexual expression, meaning and pleasure in later life (see also Potts, 2000; Sandberg, 2013a, 2013b, 2015). Such a stance also fails to reflect the experiences of at least some people in later life. For example, participants in Menard et al.’s qualitative Canadian study on optimal sexual experiences reported that “their sexual experiences had steadily improved in quality over their lifetimes”, with “great” sex requiring the development of skills through experience, knowledge of one’s partner’s body and desires, and maturation (2015: 83). Optimal sexual experiences continued

to be experienced even in the face of so-called sexual “difficulties” or “dysfunction”. Likewise, based on the findings of their quantitative Canadian research, Trudel et al., (2014: e45) observe that “the concept of sexuality, sexual desire and sexual satisfaction changes as we age,” with a shift away from an emphasis on genital-based sexual activities (see also Helmes & Chapman, 2012; McCarthy, Farr & McDonald, 2013; Yee, 2010). Lodge et al (2012) also report that the sexual experiences of mid- to-later life couples are characterised by change, though the ways in which this change is understood varied depending on the couples’ stage in the life course. For instance, all couples in Lodge et al’s (2012) U.S.-based qualitative study reported a decline in sexual frequency, but an increase in the quality of their sexual encounters. Some participants indicated that they found changes in their sexual lives distressing when they failed to adhere to gender-based norms of (hetero)sexuality within marriage. Older couples in their sample tended to emphasise emotional intimacy, rather than sex, within their relationships particularly if they were no longer able to have penetrative intercourse. Sandberg’s (2013a) research with older Swedish men also found that older men renegotiated the significance of an erection and penetrative intercourse to sex, instead emphasising the importance of intimacy. For Sandberg’s participants, this in some respects *opened up* the space to take up different sexual subjectivities.

Sandberg (2013a, 2015) contends that it is more productive to conceptualise older sexuality as *different* rather than “other” to a youthful sexuality; a concept she refers to as “affirmative old age.” This approach seeks to affirm the diversity of sexual practices in later life, while acknowledging the material realities of ageing bodies. This is achieved through the construction of older sex as the continual production of difference, and in seeking to value equally all forms of sexual expression/non-expression rather than reinforcing the “sexy oldie”/ “asexual” binary. Affirmative old age enables us to “affirm the differences that ageing bodies produce without understanding them as involving decline or loss” (Sandberg, 2013b:

26). However, it is important to note that seeking to value this continual production of difference does not equate to treating the sexual practices and talk of older people uncritically, or as existing within a social and cultural vacuum (Thorpe, Fileborn, & Hurd-Clarke, in-press).

Hegemonic Masculinities and Sex/Sexuality

The way we talk about sex, and sexual identity, is inextricably linked to gender performance (Bertone & Camoletto, 2009; Sandberg, 2015). Our discussions about sex and our sexual practices are shaped by, and used as a means of performing, our gender – and, more specifically in the context of this article, masculinity(s). There is a pressing need to consider the ways in which dominant norms of masculinity, or hegemonic masculinity, shape the experiences and beliefs of older men about sex. How do older men position their own experiences in relation to hegemonic masculine norms about sex and sexuality, and in what ways might they challenge and resist these, particularly as they are increasingly unable to adhere to a hegemonic masculinity that is based upon youthful bodies and youthful sexualities (Calasanti, 2004; Calasanti & King, 2005; Fleming, 1999; Lodge & Umberson, 2013; Spector-Mersel, 2006)?

Following Butler (1990) and West and Zimmerman (1989), we view gender as fluid and situated. Rather than having some underlying, essential, and stable basis, gender is constantly in the process of being “accomplished” or “performed” through our speech, clothing and corporeal presentation, bodily movements, and other practices, including sexual ones (Johnson Jr, 2010). Yet, while gender may be fluid and mutable this does not mean that it is experienced or performed in an unrestrained way. Our gendered performances continue to be shaped and constrained by structural forces and social and cultural norms, and in conversation with the materiality of the body (Connell, 2005; Doull et al, 2013; Drummond,

2011; Fleming, 1999; Hilario, 2015; Johnson Jr, 2010). Not all gendered performances or accomplishments are created equal. When it comes to masculinity, certain expressions and ways of “being” a man are valued more than others. Connell terms this “hegemonic masculinity”: the version of masculinity that is valorised within a particular setting at the expense of other, subordinated masculinities (Connell & Messerschmidt, 2005). While very few men in reality meet the ideals of hegemonic masculinity, it is the standard against which all masculinities are judged, and even those men who do not adhere to this standard may be complicit in maintaining hegemonic norms.

In relation to sexuality and sexual behaviour, hegemonic (and heteronormative) masculinity can be performed by younger men through “avoiding emotional relationships, pursuing sexual pleasure selfishly, and participating in a culture of sexual triumphs” (Barrios & Lundquist, 2012). Hegemonic masculinity positions young men as sexually aggressive, dominant, and experienced, particularly in relation to a passive, chaste female sexuality (Doull et al, 2013; Philaretou & Allen, 2001) – although this can vary across relationship contexts (Elmerstig et al, 2014). Flood (2008) argues that heterosexual sexual activity is central to being seen as suitably “masculine.” The penis (and particularly the erect, ejaculating penis), Broom (2004: 84) suggests, can be considered the “classic “source” of heterosexual masculinity...and male-female intercourse” (see also Calasanti, 2004; Calasanti & King, 2005; Elmerstig et al, 2014; Gilbert et al, 2013; Hughes, 2011; Johnson, 2010; Loe, 2001; Philaretou & Allen, 2001; Potts, 2000). This hegemonic masculine sexual performance is typically constructed as a “natural,” overpowering biological drive within dominant discourses, which results in men being the relentless pursuers of sex, with women as their passive targets (Bertone & Camoletto, 2009; Camoletto & Bertone, 2010; Potts, 2000).

To date, however, the majority of work carried out on masculinities and sexuality has focused on younger men. We know comparatively little about the ways in which older men

construct and perform their masculinity, whether in sexual or other contexts (Alex et al, 2008; Bertone & Camoletto, 2009; Calasanti, 2004; Calasanti & King, 2005; Fleming, 1999; Hughes, 2011; Lodge & Umberson, 2013; Spector-Mersel, 2006). Research conducted to date illustrates the ways in which hegemonic norms regarding male bodies and heterosexuality shape men's embodied experiences of their ageing bodies. Lodge and Umberson's (2013) qualitative research with middle-aged men in the United States illustrates that men can experience corporeal changes (such as difficulties achieving an erection) as distressing as they signal a failure to adhere to the hegemonic masculine norms discussed previously, thus challenging their status as "masculine" (see also Lodge et al, 2012). These men largely continued to adhere to essentialist, hegemonic norms regarding male sexuality, which Lodge and Umberson (2013, p.230) argue may be operating as an attempt "to protect and defend a masculine identity in response to the threat that aging bodies...pose to that identity." In contrast, participants in Sandberg's (2013a, p.272) Swedish research were able to reinterpret changes in erectile dysfunction through the lens of "becoming a better man, [and] a reshaping of desirable masculinity" enabling them to avoid experiencing such changes as a distressing loss. The seemingly stark differences in these findings point to the potential for cultural and social context as playing a mediating role in how men experience their ageing, sexual bodies, and the specific experiences of older Australian men remain under-examined in the current literature.

The type of hegemonic masculinity that is valorised, and the qualities this entails, is contextually, culturally, and temporally specific (Lodge et al, 2012; Spector-Mersel, 2006). Thus, we cannot assume that the same hegemonic masculine performances will be valued across different countries, cultural groups, socio-economic groups, age groups and so on – or that men within and across these groups will have the resources necessary to perform hegemonic masculine ideals (Calasanti, 2004; Calasanti & King, 2005; Drummond, 2011;

Johnson Jr, 2010; Philaretou & Allen, 2001). For this reason it is important to consider the specific experiences of older Australian men as *older* men, and to examine the ways in which “old age intersects with other systems of privilege and oppression” (Calasanti, 2004: s306; see also Arrington, 2000, 2003; Fleming, 1999; Lodge & Umberson, 2013). That is, we must take into account the ways in which age and gender co-constitute one another. The findings contained herein therefore provide a valuable addition to this field of research.

The men who participated in our study largely came of age¹ in the “sexual revolution” of the 1960s and 70s in Australia and other Western countries. Significant shifts in sexual practices, attitudes and scripts occurred during and after this time – although the true extent of this change has been contested and debated. Nonetheless, the men in this study have likely lived through significant change regarding gender and sexual roles and norms, and their sexual practices and attitudes are situated within these varied, competing, and often-contradictory discourses. As Bertone and Camoletto (2009: 370) observe, these shifts “have implications for the way in which they [older men] “do” their masculinities,” with many of the men in their qualitative study of middle-age Italian men drawing on a complex “patchwork” of traditional and contemporary sexual scripts and masculinities. Alternatively, Spector-Mersel (2006: 68) contends that there is an “absence of cultural guidelines for being both a “true” man and an aging person.” While Spector-Mersel suggests that this contributes towards something of an identity crisis or “struggle” for older men, we should also question the extent to which this supposed lack of age-specific norms might in fact *open up* possibilities for older men in terms of the subject positions they assume.

For older men, the interplay between masculinities, sexuality and health are particularly important to consider, as illness or shifts in bodily functions can pose “a serious threat to men’s gendered sense of self” (Calasanti, 2004: s311; see also Broom, 2004; Gilbert

¹ “Came of age” refers to when these men became socially and legally recognised adults.

et al, 2013; Ussher et al, 2013). While we do not wish to perpetuate “decline” narratives of ageing, it nonetheless remains important to acknowledge the material realities of ageing bodies (Calasanti & King, 2005; DeLamater & Koepsel, 2015; Fleming, 1999; Gilbert et al, 2013; Sandberg, 2013a, 2013b). Part of these material realities can involve the increasing likelihood of facing ill-health and disease, with subsequent implications for men’s sense of masculinity for example due to changes in erectile functioning (Arrington, 2000; Broom, 2004; Messaoudi et al, 2011; Philaretou & Allen, 2001; Potts, 2000; Sandberg, 2013b). Retaining (or medically generating) the ability to engage in penetrative intercourse in later life can represent a means of successfully performing one’s masculinity (Gilbert et al, 2013; Johnson Jr, 2010; Potts, 2000), as well as a means of doing “successful” ageing. Such discourses perpetuate bio-medical models of sex and sexual functioning, where “sex” requires an erect penis, occluding other forms of sexual expression and pleasure (Gilbert et al, 2013; Potts, 2000; Sandberg, 2015). Although older men and women also renegotiate the importance of and meanings assigned to sex, or take steps to adjust their sexual practices to accommodate for illness or ageing bodies (Arrington, 2003; Fileborn et al, 2015a; Gott & Hinchliff, 2003; Hughes, 2011; Sandberg, 2013a, 2013b, 2015; Ussher et al, 2013). Thus, older men are also able to challenge these dominant norms of sex and masculinity, as much as they may be constrained by them.

Together, the discussion here illustrates that a range of competing discourses on masculinity, sex, relationships and older age may intersect to shape older men’s experiences of sex in later life. Our research seeks to extend current theoretical and empirical work by examining the ways in which a diverse sample of older Australian men who engage in heterosexual relationships negotiate this complex, contradictory, and fluid discursive web relating to masculinity, ageing bodies, and sex in later life.

METHOD

This paper draws on the findings from 27 one-on-one, semi-structured interviews with Australian men who engage in heterosexual relationships aged 60 years and older conducted from August 2015 to January 2016. These interviews form a subset of data from a larger study that sought to explore older Australians' (including women's) sexual practices, and knowledge of sexually transmitted infections and safer-sex. Ethics approval was received from the [Institution] Human Research Ethics Committee prior to the commencement of the research. Participants for the interviews were recruited through a survey conducted in the first phase of the study. Although the survey was available online and in hard copy, all interview participants were recruited through the online survey as only a very small number of hard copy surveys were returned. Survey participants who were interested in taking part in an interview were asked to provide their name and contact email. A total of 517 individuals expressed interest in taking part in an interview. A random sample of 175 men and women were contacted via email with further information, and were asked to contact the interviewer (Author 1) if they would like to participate. The total number of interviews conducted was dependent on data saturation. Twenty-nine interviews with older men were conducted in total.

The men were in a diverse range of relationship types at the time of interview: 13 were married; 6 were in a relationship; 5 were single; 4 were in open-relationships or had multiple partners; and 1 was a widower. One participant was currently studying in higher education, 8 were employed, 6 were semi-retired (still engaged in a small amount of paid employment each week), and 14 were retired. While we did not routinely ask participants about their educational background, many participants mentioned having undertaken higher education, and described being employed (currently or previously) in skilled or professional employment. Given the previous lack of research on this topic, particularly within Australia,

we purposefully sought to recruit a diverse sample of men rather than honing in on any particular sub-group.

The interviews were conducted by the first-named author, a young woman, either by phone (n=23), Skype (n=5), or face-to-face (n=1) depending on the participant's preference and geographical location. While conducting interviews by phone has been associated with lower quality data (Holt, 2010), given the sensitive nature of aspects of this project it was important for participants to be afforded a level of control over their mode of participation (see also, Hanna, 2012; Holt, 2010; Trier-Bieniek, 2012). Additionally, there is some evidence to suggest that telephone interviews can contribute towards increased participant comfort in discussing potentially sensitive topics, for example because they afford a greater sense of anonymity (Novick, 2011; Sturges & Hanrahan, 2004; Trier-Bieniek, 2012). Novick also contends that there is little evidence to support the notion that telephone interviews result in lower quality data, and this is further supported by Holt's (2010) experiences in conducting qualitative phone interviews. Similarly, Hanna (2012, p.241) argues that conducting interviews over Skype can also provide a practical alternative to face-to-face interviews by providing "not only synchronous interaction between the research and their participant" while also overcoming criticisms of phone interviews "associated with losing visual and interpersonal aspects of the interaction". While both Hanna (2012) and Holt (2010) note that Skype and phone interviews come with their own particular challenges and benefits, there appears to be little evidence to suggest that they generate lower quality data.

The interview schedule focused on participants' understandings of sex and sexual satisfaction, how important sex and sexual satisfaction were to them, their understandings of safer sex and the safer sex practices they use, their help seeking practices, and background demographic information. As the interviews took a semi-structured approach, additional lines of questioning were taken based upon the unique issues raised in each interview. On average,

the interviews took 30-60 minutes to complete. Each interview was digitally-recorded and transcribed by a professional service. The transcripts were de-identified, and participants were assigned pseudonyms.

The qualitative data were analysed using the software package NVivo. A thematic analysis was undertaken following Ezzy (2002) and Braun and Clarke (2006). The first-named author conducted the primary analysis. This process involved an initial close reading and initial coding of the transcripts. Notes were made identifying emerging themes, using the interview questions and core study aims (e.g., discourses on sex and relationships, understandings of safer sex) as initial code categories. In vivo codes were also identified throughout this process based on emergent themes and patterns within the data. This process was then repeated in NVivo, with the data sorted into code and sub-code categories. Particular attention was paid to the recurrent themes and patterns in the data, but also to cases that contradicted, complicated or otherwise sat outside of the dominant thematic categories. This enabled us to account for the complexity and nuance in older people's experiences. A random sample of interview transcripts (n=10) was independently coded by X-named author to ensure the validity of the coding. Both coders agreed on the themes, with no coding differences identified. A total of 26 themes were identified, 4 of which we discuss in this paper. Namely, these interlinking themes are: "What is sex" (6 codes, 2 sub-codes); "Importance of sex" (7 codes); "Sexual satisfaction" (11 codes); and, "Discourses on sex" (4 codes).

RESULTS

What is Sex?

Physical Behaviour – Broad or Hierarchical Definitions

Participants were asked to reflect on what the term “sex” meant to them. In terms of the physical acts that constitute sex, participants’ responses fell into the overarching categories of “broad” or “hierarchical” definitions of sex. “Broad” definitions of sex were typically inclusive in terms of the scope of behaviours that participants counted as being sex. These participants generally rejected discourses that privileged penetrative intercourse as being “real” sex. Herman (65yr, heterosexual, married 40years), for example, commented that it was challenging to define sex because “it’s wide ranging, and I suppose in society when people talk about sex it’s sexual intercourse, but I think it’s... a lot more than that.”

For participants who drew on broad discursive positions, it was often the intention and meaning assigned to a behaviour that rendered it sexual. For Herman, sex was about having an “intimate” connection with someone. Kane (63yr, heterosexual, in a relationship 3 months) described partnered sex as involving exploration of “each other’s bodies and arousing each other’s passions and... fulfilling each other’s needs and desires,” rather than relying on a particular set of behaviours or practices.

Several participants defined sex as involving multiple components, of which physical behaviour was only one part. Shane (72yr, heterosexual, married 50 years), for example, viewed sex as “a bodily biological drive... something to be enjoyed... something that can be very much used in a relationship to affirm both yourself and... the other person.” For Shane, sex included “everything that is beyond society’s generally accepted physical contact.” Shane’s own sexual practices consisted of a rich fantasy life, which included both heterosexual and homosexual elements, and masturbation. He also engaged in fondling and cuddling with his wife, who had been unable to engage in penetrative sex for approximately 30 years due to a health condition. Another participant, Ryan (65yr, heterosexual, single), saw sex as involving emotional, intellectual, and physical intimacy.

Relatedly, for participants who drew on broader understandings, what “counted” as sex was often highly context-dependent. That is, the same behaviours could be either sexual or not (or occupy some space between sexual/not-sexual) depending upon the context in which they occurred, the individuals involved, and the intent, meaning, and qualities of the behaviour. This distinction was most apparent in participants’ responses to a question on whether acts such as kissing or cuddling could be considered sexual. For instance, Vaughn (71yr, heterosexual, in a relationship 8 years) differentiated between platonic and sexual kissing based on the corporeal locations (or “body map”) of the kiss and its temporal qualities (e.g., a brief “peck” as compared to a lingering “nuzzle”).

In contrast, a minority of participants discussed sex in more hierarchical terms, where certain acts were classified and ordered according to their perceived level of sexual intensity. Such constructions typically drew on the notion that penetrative intercourse constituted “real” sex. This was encapsulated in Finn’s (60yr, heterosexual, widower 1 year) assertion that sex is when “a man gets an erection of his penis and he inserts it into a female’s vagina.” These sexual hierarchies at times also reflected Rubin’s (1992) concept of the “charmed circle” of sexual acts. That is, certain sexual practices appeared to be constructed as “acceptable”, respectable or “normal” in comparison to others. For instance, Brendan (71yr, heterosexual, married 43 years) said in discussing his sexual practices, “there’s nothing unusual in other words there’s no anal sex or anything like that, it’s just pure straight standard intercourse.” Brendan appears to be constructing a hierarchy here between “normal” and “unusual” sexual practices, with anal sex positioned as different to a heterosexual norm.

Hierarchical definitions tended to focus more strongly on classifying sexual behaviours. As a result, sex was often defined by these participants in a binary way, with certain behaviours either counting or not as sex. Again, this was often clearly reflected in these participants’ responses to whether kissing and cuddling “count” as sex:

Well as a sex act it's physical intercourse, which probably includes...oral and genital sex, but I wouldn't count kissing,...cuddling...as sex acts. They can be other sort of social gestures. (Norman, 69yr, heterosexual, married 14 years)

While participants such as Shane embraced masturbation as a core component of his sexual practices, and did not construct this as being "less than" penetrative sex, for other participants this was not the case. Xavier (65yr, heterosexual, married 42 years), for example, described masturbation as "not as satisfying" as partnered sex, though it was still a regular part of his sexual repertoire.

Sex as Intimacy and Bonding

A common theme in our participants' responses, hinted at earlier in our discussion, was the centrality of intimacy and bonding in understandings of what sex "is". In these discussions, sex was defined in relation to its emotional rather than physical qualities – though these were often seen as being intertwined and as co-informing one another. For Aiden (63yr, heterosexual, in a relationship 6 years), sexual intimacy (broadly defined) was an essential component of his romantic relationships with women "because I think it's just such a bonding experience." Several participants defined sex as a physical manifestation or expression of love, although one participant, George (69yr, heterosexual, in an open relationship 10 years), contested the linking of sex with romantic love stating that there is "a huge difference between loving somebody and having sex with somebody." Jack (64yr, heterosexual, married 7years) constructed sex as an exclusive form of communication between partners in that it is "something that's private and understood between the two of you."

Another participant, Leroy (73yr, heterosexual, in a relationship, 12 years), understood sex as:

Just a part of a relationship in the sense that...it is about trust and it's about sharing something very intimate with each other, and being able to share one's feelings, thoughts, fears, anxieties, being able to talk about doing things, exploring really.

Sex is arguably constructed here as a "natural extension" of trusting relationships. Participants commonly drew on discourses that position sex as a component of romantic love, where sex was a form of vulnerability and exposure, and this sits in stark contrast to hegemonic ideals of invulnerability and emotional "strength" or stoicism. However, as Sandberg (2013b) argues, this linking of sex with intimacy also works to construct a norm of respectable heterosexuality (and, by extension, respectable masculinity) for older men.

Aaron (65yr, heterosexual, single) used his discussions on sex as an avenue of performing and establishing his masculinity in opposition to what he saw as an unrefined and out-dated masculinity centred on male pleasure:

The male dinosaurs as I call them that think sex is the rumpy pumpy that lasts 20 seconds...let's face it, you can go to a prostitute and get that, or you can get your right hand and go for it. Not interested. It's more than that, it's the intimacy, it's the knowing that your partner is both caring and loving and you feel completely at ease.

Aaron appears to reject traditional masculine ideals of sex centred on male pleasure, in favour of an ideal based on intimacy. He also discussed having erectile dysfunction, so it is possible that this shift away from penetrative sex to intimacy and care provided a framework for Aaron to make sense of these physiological changes, and to maintain his masculine identity by displacing hegemonic norms with intimacy-based norms. This shift may also enable Aaron to obtain sexual pleasure outside the confines of phallogentric models of sex. However, Aaron's comments could be read as constructing another hierarchical model of sex, which works to privilege intimacy at the expense of the "lesser" acts of masturbation or engaging sex workers.

Change Over Time

Participants were asked to reflect on whether their understandings of sex had changed over time, with a minority reporting that their understandings had shifted as they aged. While the reasons for these shifts varied, they typically centred on the diversification and refining of their sexual practices that came with age and experience, the influence of learning opportunities throughout adulthood (which also enabled this diversification and refinement of sexual practice), and physical changes and ill-health.

The vast majority of participants reflected on the limited education they received about sex and sexual pleasure when they were younger. As noted earlier, participants came of age in an era where sex was largely considered taboo, with sexual norms centring on procreation and male pleasure. Participants variably reported receiving messages that sex was "dirty" or "shameful," that it belonged in the confines of monogamous heterosexual marriage, or they were simply not told anything at all. For several participants, this subsequently involved a process of "unlearning" and re-educating themselves about sex across their adult lives. Shane (72yr, heterosexual, married 50 years), for example, discussed how his

university education and ongoing engagement with theory and research on sex and sexuality enabled him to begin to question and challenge the “Catholic dogma that we’d been...indoctrinated with” as a child. For Shane, this enabled him to critique Catholic sexual mores on homosexuality, and opened up the space for him to begin to explore his own homosexual desires through fantasy, though he still identified as heterosexual. Shane’s experience illustrates that the ways in which sex is defined and understood, and the discursive positions drawn on, can shift and evolve over time. There is not necessarily one subject position that men take up in relation to masculinity and sex, and coming into older age can create the opportunity to step away from more normative scripts.

Aiden (63yr, heterosexual, in a relationship 6 years) reflected on how, for him, sex had become more pleasurable as he got older. Similarly to participants in Menard et al’s (2015) study, Aiden thought that his sexual skills had improved immensely with time and practice, in comparison to his youth when he was “bloody hopeless.” Additionally, no longer having to worry about issues such as pregnancy meant that sex was now “more relaxed and just easy and nice.”

Another participant linked shifts in his sexual practices to the corporeal changes that can accompany ageing. For Wesley (69yr, heterosexual, single), older age was viewed less as an opportunity to open up sexual possibilities. Instead, Wesley framed changes to his sexual practices as being about “expectations, and as you get older your expectation obviously becomes a lot more realistic in line with your age, and your condition.” As Wesley said “I suppose sex to me now means...being physically intimate but not necessarily you know the sex act itself.” Rather than representing an opportunity to engage in more diverse (and, potentially pleasurable) sexual activities, for Wesley this shift from penetrative sex to “physical intimacy” was met with a sense of implied resignation or loss: it reflects the limitations or “realities” of his ageing body, rather than a space for exploration.

For other participants, their sexual practices and definitions of sex shifted after significant illness. Marty (77yr, heterosexual, in a relationship 22 years) discussed how having a radical prostatectomy had left him unable to achieve an erection. As a result, he and his wife adjusted their sexual practices away from penetration to a focus on oral sex and frottage². While Marty expressed a sense of loss and regret, saying “I’d like it better if I could have erections,” he also renegotiated the importance of penetrative sex as “probably a small price to pay for not dying of prostate cancer.” Another participant, Ben (77yr, heterosexual, married 50 years), who had also had a radical prostatectomy expressed frustration at having to “fiddle around to be able to get an erection,” and that he was “a bit sick of doing all that.” As a result, his sexual practices now centred on digital stimulation (Ben did not further elaborate on what this entailed). Both Marty and Ben de-centred the importance of being able to achieve an erection in their sexual lives – though Marty is clearly ambivalent here.

How Important is Sex?

Participants were asked to reflect on the importance of sex to them. There was considerable variation with regards to the importance men assigned to sex, and the reasons they provided for this. Responses were complex and highly context-dependent, and the importance varied on a continuum from highly important to less essential than it had been in the past.

For the majority of participants, sex was described as an essential or highly important aspect of their lives. For Aaron (65yr, heterosexual, single), sex was an essential component of “being a man”:

So what’s important about it to you, why is it important?

² “Frottage” refers to the practice of rubbing bodies (usually clothed) against each other as a form of sexual pleasure and satisfaction.

Why is it important, what sort of question is that? It defines what a man is, doesn't it?

There is some tension here with Aaron's earlier comments where he appeared to distance himself from certain aspects of hegemonic masculinity. Here, he draws on the stereotypical notion that heterosexual sex is a key pathway through which masculinity is "done." Aaron also discussed having erectile dysfunction. It may be that Aaron sought to reject or place less importance upon aspects of masculinity that do not accord with his embodied experiences of sex (e.g., the notion that "real" sex requires an erect penis and penetration), while simultaneously making claims to centre himself within hegemonic masculinity (e.g., that sex is integral to "being a man"). Similarly to Bertone and Camello's (2009) participants, Aaron draws on a complex array of discursive positions on sex and masculinity in making sense of his experiences.

The importance of sex was also context and relationship dependent. For example, Carl (62yr, heterosexual, multiple relationships) was in long-term relationships with two different partners (with both of these relationships spanning approximately 13 years), and also had one casual sexual partner. Carl lived with one of his long-term partners on a regular basis. Carl commented that sex was more important for him with the two partners that he did not live with. Carl described how he managed "the level of sexuality in the relationship with the woman I live with downwards" (that is, he had less frequent sexual interaction with this partner) so that he was able to continue to manage having sex regularly with his other two partners, one of whom he viewed as frequently "needing" sex. Relatedly, while Jack (64, heterosexual, married 7 years) saw sex as very important, he commented that "it's important as a long term thing not a short term thing," in recognition that sexual desire and activity can ebb and flow during different times in people's lives. Such comments could be read as

drawing on non-hegemonic norms in comparison to dominant constructions of male sexual desire as enduring, consistent and strong.

The men attributed a range of reasons to the importance of sex, and these often aligned closely with their definitions of what sex is. For example, participants commonly stated that sex was important to them because of its role in bonding and developing or maintaining intimacy in a romantic relationship, and this further highlights the way in which the concepts of intimacy and bonding weaved through virtually all aspects of participants' sexual lives. Ben (77yr, heterosexual, married 50 years) reflected that for him sex was important "because you're connecting at a very intimate way, I think that spreads into other parts of your relationship, and makes you both much closer." This type of intimacy was often seen as being different to other types of relationships. That is, sex was important because it offered a "higher" level of intimacy and closeness that could not be (or was not) provided through platonic relationships.

For other participants, the importance of sex was apparent in their discussion on the absence of partnered sex in their relationships. Leroy (73yr, heterosexual, in a relationship 12 years) expressed a sense of loss and sadness over what he described as a lacklustre sexual relationship with his long-term partner. The importance of sex came through in Leroy's comment that "we're missing out on something is how I feel about it, and we're missing out on something that could be really good fun, and could enjoy ourselves with." Leroy viewed sex as important as it was an extension of trust, respect and understanding within a relationship.

The perceived physical and psychological benefits of sex were also commonly mentioned as contributing to the importance that sex held in participants' lives. Caleb (78yr, heterosexual, married 30 years), for example, said that sex was "pacifying...calming, non-stressful," while for Elijah (63yr, heterosexual, single/long-term client of sex worker) sex was

important because “it’s fun, it’s enjoyable...gets rid of the stress.” Physical pleasure and release were commonly mentioned. For instance, Jack (64yr, heterosexual, married 7 years) reported that sex was important to him because “it’s part of those pleasurable things that make life worth living.” Biological discourses were often drawn on in explaining why sex was important. For instance, Marty (77yr, heterosexual, in a relationship 22 years) said that sex influenced his mood, which he attributed to “the release of chemicals and oxytocin and hormones.” Edwin (66yr, heterosexual, married 40 years) reported that sex was important as “you’re not angry...you know, grumpy old men disease...sexual frustration makes you angry or something...so it’s very important I think.” Brendan (71yr, heterosexual, married 43 years) saw sex as being “fundamental in the instinctive behaviour of people...it needs to be expressed in some way.”

In contrast to the view that sex was a highly important, if not fundamental part of life, a minority of participants indicated that sex had become less important to them as they grew older, or otherwise expressed some ambivalence about the importance of sex. For some participants this meant situating their reduced interest in or desire for sex within the “decline” discourse of sex in later life. Brian (62yr, heterosexual, married 41 years) said that for him sex is “not the be all and end all like it was when I was 23 or 24.” For Vaughn (71yr, heterosexual, in a relationship 8 years), his female partner was now “the driving force” in their sexual relationship, as “she has a very great sexual need, whereas I just don’t have that anymore.” Vaughn’s comments work to perform a more subordinated masculinity, in contrast to hegemonic ideals where men are typically the active pursuers of sex, and women the passive recipients or gatekeepers. Vaughn’s current relationship subverts this traditional gendered script. By positioning sex as a biological or physiological “need”, Vaughn implies that his desire for sex is something that is out of his control. He is able to draw on decline narratives, where sexual drive “naturally” wanes. At the same time, Vaughn also positions

himself as having once adhered to hegemonic norms: he does not have a sexual need *anymore*, suggesting that at one time he did have a suitably masculine sexual drive.

While participants such as Vaughn appeared to be at peace with the lesser importance of sex in their lives, for Igor (78yr, heterosexual, married 15years) the decreasing importance of sex was a process of resignation, rather than acceptance. Igor said that until recently he considered sex to be a very important aspect of his life. His wife lived with a long-term chronic illness, and they had not had any form of sexual encounter for many years. When asked why sex was no longer important, he replied: “I’ve worn down and accepted nothing’s going to change.” Igor described himself as “getting around to accepting that this is what life is, along with the other things that are...dropping off as you get older.”

What is Sexual Pleasure?

In seeking to examine how participants’ understood sexual pleasure, it was apparent that most held complex and multifaceted understandings of what constitutes pleasure. While we have separated out the common elements of sexual pleasure in the ensuing discussion, it was often their co-occurrence that made sex pleasurable. Again, the components of pleasurable sex were closely aligned with the ways in which participants’ understood and defined sex.

Orgasm and Physical Pleasure

Unsurprisingly, orgasm was a common feature of participants’ discussions of what makes sex pleasurable. As Paul (67yr, heterosexual, married 43 years) put it “I think ultimately [for] satisfaction, you’ve got to achieve your orgasm.” However, it is important to note that it was rare for participants to focus solely on their own sexual pleasure, with the vast majority (including Paul) emphasising the importance of their partner’s sexual pleasure, and

we return to this momentarily. For another participant, Wesley (69yr, heterosexual, single), orgasm was closely linked to ideas of what constitutes “real” sex. Wesley had experienced erectile “dysfunction” since his wife’s death a decade ago. While Wesley had adjusted his views of sexual satisfaction somewhat, this was positioned as “lesser” in comparison to penetrative intercourse and ejaculation:

If it didn’t sort of happen [getting an erection] and you just had a nice intimate sort of encounter, then it was okay. But...sexual satisfaction really to me is intercourse and of course...for reaching your climax.

In conjunction with orgasm, participants also identified a general sense of physical satisfaction, relaxation and release as part of what makes sex pleasurable. As Xavier (65yr, heterosexual, married 42 years) said, "if I’ve had really good sex I just lay back and just, it's the most relaxed I’ve ever felt...I can just lay there for half an hour afterwards and hardly move.” However, some participants challenged the centrality of the orgasm to sexual pleasure. George (69yr, heterosexual, in an open relationship 10 years), for example, argued that orgasm alone was not sufficient for generating a sexually satisfying experience:

If I have intercourse with somebody and it's extraordinarily unexciting, even though my penis might’ve had an orgasm, my brain has not had an orgasm and therefore I can go away feeling disappointed.

George’s definition of sex was broad and involved multiple components, and these subsequently informed the ways in which he understood sexual pleasure.

Mutual Pleasure

In contrast to the traditional (Western) sexual scripts that defined male sexual pleasure when they were growing up, most of the men placed a firm importance on mutual sexual pleasure within their partnered sexual relationships. Indeed, it was often giving someone else pleasure that made sex satisfying. As Vaughn (71yrs, heterosexual, in a relationship 8 years) said "the fact that someone else is enjoying it a lot and needs it as well is satisfying in itself of course." Likewise, for George (69yrs, heterosexual, in an open relationship 10 years), sex was satisfying "when I can get my partner well and truly pleased before I come, then I certainly feel much happier than otherwise."

The relationship between mutual pleasure, sexual scripts and masculinity is a somewhat ambiguous one. On the one hand, this focus on their partner's pleasure could be read as these men embracing a more egalitarian sexual script, and adopting forms of masculinity based on sexual equality and mutual enjoyment rather than male domination. On the other hand, this can be read as a means of demonstrating sexual mastery and skill (Bertone & Camoletto, 2009) – a core component of hegemonic masculinity – and this is implied in George's comments above. However, many of the men explicitly specified that it was mutual enjoyment and equality that made sex pleasurable for them. For example, Kane (63yr, heterosexual, in a relationship 3months) said when it came to fellatio "I don't love it that much, but it is important to me that you know that it's something that my partner wants to do. You know that we're giving stuff to each other." There is a clear focus here on sex as a mutually enjoyed, negotiated encounter.

Bonding and Intimacy as Sexual Pleasure

As noted earlier, the concepts of bonding and intimacy were central to many participants' understandings of what sex is, and why it is important. These also carried

through to inform participants' understandings of what makes sex pleasurable, and were a strong focus of participants' responses. For Xavier (65yr, heterosexual, married 42 years), sex in a long-term monogamous relationship was key to sexual satisfaction. Xavier said "I think it brings you closer, having sex with a life term partner is different than having sex with a one night stand. I think it's far more fulfilling."

Consistent with the literature to date (Helves & Chapman, 2012; McCarthy, Farr & McDonald, 2013; Trudel et al, 2014; Umberson et al, 2015; Yee, 2010), some participants in this study shifted their focus from orgasm to intimacy as a form of sexual satisfaction in later life. Brendan (71yr, heterosexual, married 43 years), for example, commented that for him sexual pleasure "turns into more like stroking or a comfort thing, asserting that your partner is still a valuable person" rather than being driven by a strong sexual drive. Likewise, Wesley (69yr, heterosexual, single) remarked that his emphasis had shifted away from orgasm as "if you can't get to that point [orgasm]...then the emphasis is on the rest of it...so it becomes...very important, the romantic side of it, and the touching". However, as we saw earlier, Wesley also placed a very strong focus on the importance of orgasm and penetration as constituting "real" sex, suggesting a degree of contradiction and complexity in his account of sex and sexual pleasure in later life.

DISCUSSION AND CONCLUSION

This article set out to explore the ways in which Australian men aged 60 or older understand and experience sex and sexual pleasure in later life. In line with our earlier discussion of previous work on older men's sexuality, men in our study engaged in a range of competing discourse on masculinity, sex, relationships and older age. While there were certainly a number of dominant themes in our findings, there was not necessarily one way in which older men were "doing" sex and sexuality. That participants drew on diverse and,

occasionally, competing discursive positions was perhaps most clearly illustrated through the discussion on understandings of sex. Participants often held complex – and at times contradictory – understandings of what sex “is”, with a majority viewing sex as broad and context-dependent. For others, sex was viewed in a more hierarchical manner, often drawing on stereotypical notions of “real” sex involving penetrative intercourse. This tended to be mirrored in participants’ understandings of sexual pleasure. For some, sexual pleasure was about bonding, intimacy and closeness, while for others, the corporeal, embodied pleasures of orgasm were most central. Sex remained important to a majority of participants, however for others the importance of sex declined, or was less central than it was when they were younger. These findings add to a growing body of work that seeks to challenge and disrupt simplistic notions of sex in later life as a linear decline or, conversely, as youthfully sexual. Instead, our research further illustrates the richness and complexity of men’s experiences of sex in later life.

What do these findings tell us about masculinity and sexuality in later life? The men drew on a complex array of discursive positions that could both hinder or open up the opportunities for sexual pleasure. Importantly, the ways in which older men make sense of and approach sex in later life can be iterative (as demonstrated clearly in the example of Shane). Experiences of sex and sexual identity in later life have performative aspects to them: they are not always stable, essential or fixed in place. This opens up the potential for embodied experiences and understandings to be done differently – though the ability to do so may be restrained by a range of structural forces and access to capital.

The findings presented here illustrate the complex and nuanced ways in which discourses on sex, ageing, and masculinity inform and intertwine with embodied experiences of sex and material realities of the ageing body. The particular sets of discourses that participants drew on could, at times, play a fundamental role in shaping the ways in which

they made sense of and negotiated sex in later life. Participants' sexual subjectivities were performed with reference to both hegemonic and non-hegemonic (or subordinated) masculinities. For some, occupying a place of subordinated masculinity opened up the space for new encounters, pleasures, and experiences. For others, shifts in their sexual relationships and "function" could be experienced in a different way – and the experiences of participants with erectile "dysfunction" provide a useful example here. Some men were able to accept this corporeal change through an emphasis on sexual scripts that prioritised intimacy, bonding and mutual pleasure, while decentering the perceived importance of the erect penis to sex, similar to participants in Hughes' (2011) qualitative Australian work on older men with prostate cancer. For other men, ED or other forms of sexual "decline" were indeed experienced as distressing or as a loss, particularly if they adhered to the notion that penetration constituted "real" sex. In this respect, our findings add to and expand previous research (e.g., Lodge et al, 2012), where men almost universally experienced ED as distressing, and illustrate the importance of examining intersecting understandings of sexuality, masculinity and the ageing body.

Others drew on or rejected different aspects of hegemonic masculinity based on their own embodied experiences and material realities. That is, some older men simultaneously performed their masculinity in hegemonic and non-hegemonic ways. While discourses around sexual decline in later life can be damaging to or limit sexual expression, men in our study also used this discourse to make sense of and come to accept changes in their bodies as they aged. Similar to participants in Bertone and Camoletto's (2009) Italian research, our participants drew on a complex "patchwork" of discursive positions and scripts, with "traditional" and "contemporary" sexual norms, and hegemonic/non-hegemonic masculine ideals all variably drawn upon in participants' responses. Older men are thus "bricoleurs" in their approach to doing masculinity and sex in later life. That is, they piece together disparate

subject positions in order to establish or perform an ageing masculinity, perhaps as a result of the absence of clear norms for being an older man, as suggested by Spector-Mersel (2006).

In line with Sandberg's (2013a, 2015) research, intimacy and bonding were central to men's understandings and experiences of sex in later life. Our research builds upon Sandberg's by demonstrating the ways in which these concepts underpinned men's understandings of what sex "is", why sex is important, and what makes sex pleasurable. Intimacy and bonding were often drawn on to account for why older men continued to engage in or desire sexual expression even in the absence of a biological "drive" or "functional" penis. They allow men to simultaneously adhere to the notion that their bodies are in "decline," while also accounting for the fact that they remain sexual beings.

Research with younger men suggests that intimacy and bonding are important within established relationships, while hegemonic norms around the objectification of women, sexual prowess, and homosociality are drawn on when discussing casual sex (Elmerstig et al, 2014). Lodge et al (2012) found that American couples in "deep" old age emphasised the centrality of emotional intimacy, rather than sex, in their relationships. Likewise, participants in Umberson et al's (2015, p. 552) American qualitative study on emotional intimacy in couples reported "declining sexual frequency and increased emotional intimacy with time" and drew on a set of emotive practices to "redefine the symbolic importance of sex in relation to intimacy" by constructing sex as less central to emotional intimacy. In contrast, our participants drew on notions of intimacy and bonding seemingly regardless of the relationship context, age, or physical sexual "function." While the focus on bonding and intimacy can certainly be read as a way in which older men sought to negotiate material changes to their ageing bodies (such as ED or decreased desire for sex), and some men did reposition that importance of sex (particularly penetrative sex) in their lives, men in this study almost universally identified intimacy and bonding as a fundamental component of sex in a number

of distinct ways. Indeed, sex (broadly defined) was seen as central to developing and maintaining intimacy within a relationship. Yet, the corporeal, physical pleasure of sex (such as orgasm) remained central to men's understandings of what makes sex pleasurable. "Pleasurable" sex occurred for many of our participants at the nexus of intimacy, bonding and physical pleasure.

There was also no evidence that older men engage in sex with women as a form of homosocial bonding, and many participants commented that they did not talk to their male peers about sex. However, talk about sex was still an avenue for older men to "do" masculinity, albeit in occasionally different ways to their younger counterparts. Our findings regarding the importance of intimacy in later life support those of Sandberg (2013a, 2015) and Bertone and Camoletto (2009), where intimacy opens up the potential for new ways of being sexual in later life, enabling older men to take up a more diverse range of masculine performances and more diverse sexual practices. At the same time, there was also some evidence (as with Sandberg's participants) that the norm of intimacy was replacing, rather than disrupting, hierarchical sexual norms and subject positions.

As with all research, there were a number of limitations with the current study. The participants who took part in this project were typically highly educated, and comfortable talking at length about sex. They often openly questioned the extent to which they were "like" their peers based on their willingness to discuss sex. Thus, the interview findings must be understood as the product of a particular context. Further, given that the researcher who conducted the interviews was a young woman, it is important to consider how this may have shaped participants' discussions on sex. We come from the position that talk about sex is performative, so it is thus important to consider who the intended audience of this performance was. For instance, we should question how the interview context might have shaped participants' focus on mutual sexual pleasure, and intimacy and bonding, and how or

whether this would be different if the interviewer was male and/or older (see also, Lodge & Umberson, 2013). We sought to recruit a diverse sample of older Australians. While we do not consider this a limitation per se given the exploratory nature of this study, future research would benefit from undertaking a more focused analysis of particular groups of older men, for example married men or single men. In other respects, our sample was quite homogeneous. For example, the majority of participants were university educated and/or professionally employed (or were, prior to retirement). Socio-economic and cultural background shapes the ways in which masculinity is, or can be, performed (Connell & Messerschmidt, 2005). For instance, Lodge and Umberson (2013, p. 226) argue that men from relatively privileged social and cultural groups are “more likely to have social and economic resources with which to mitigate the most distressing effects” of experiences of the ageing body. This suggests that the transferability of the results presented here to other contexts is likely to be limited. As such, future research should examine the experiences of men from more diverse backgrounds (e.g., working class, non-university educated, gay men and so forth). Finally, as this research was concerned with exploring a breadth of topics related to sex in later life, key themes relating to understandings of sex and sexuality were not always interrogated in as much depth as they would have been if they were the sole focus of the study. This has posed some limitations in terms of the depth of the data generated, and future studies may benefit from exploring these topics in a more focused way than we were able to.

This study is the first Australian research to interview a qualitative sample of older men about sex and sexual pleasure. The findings add to the growing body of evidence that sex remains an important component of life for many older men. At the same time, the experiences of our participants were diverse and complex, and it is important to remain cognisant of this. This highlights the importance of health care practitioners not to assume

that older individuals are “asexual,” and to engage in discussions on sexual wellbeing with older clients where relevant to them. One of the most important implications from this study is that many older men challenge the phallogocentric model of sex, and therefore social stereotypes of male sexuality reproduced through marketing for “erectile enhancement” medications such as Viagra. Future studies that focus on sexual pleasure and “function” in later life should take such findings into consideration. Likewise, health care professionals should seek to explore alternative sexual practices that encourage a sense of intimacy and bonding with men experiencing erectile “dysfunction,” rather than relying solely on the use of medications. Finally, there is a need to continue to challenge discourses that limit the opportunities for pleasure and sexual expression in later life, without creating the pressure or expectation that older men *must* be sexual. It is important for researchers and health care providers alike to remain mindful of the diversity of men’s experiences of, and the importance assigned to, sex in later life. We do a disservice to older men if we unquestioningly pigeonhole them as either asexual or, conversely, as “youthfully” sexual, rather than recognising and embracing the full diversity of men’s sexual expression.

Ethical approval: All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards. Informed consent was obtained from all individual participants included in the study.

REFERENCES

- Alex, L., Hammarstrom, A., Norberg, A., Lundman, B. (2008). Construction of masculinities among men aged 85 and older in the north of Sweden. *Journal of Clinical Nursing*, 17, 451-459. doi: 10.1111/j.1365-2702.2007.01961.x.
- Arrington, M. (2000). Sexuality, society and senior citizens: an analysis of sex talk among prostate cancer support group members. *Sexuality and Culture*, 4, 445-474. doi: 10.1007/s12119-000-1004-x
- Arrington, M. (2003). "I don't want to be an Artificial Man": narrative reconstruction of sexuality among prostate cancer survivors. *Sexuality and Culture*, 7, 30-58. doi: 10.1007/s12119-003-1011-9
- Barrios, R.J., & Lundquist, J.H., (2012). "Boys just want to have fun? Masculinity, sexual behaviors, and romantic intentions of gay and straight males in college. *Journal of LGBT Youth*, 9, 271-296. doi: [10.1080/19361653.2012.716749](https://doi.org/10.1080/19361653.2012.716749)
- Beckman, N., Waern, M., Ostling, S., Sundh, V., & Skoog, I. (2014). Determinants of sexual activity in four birth cohorts of Swedish 70-year-olds examined 1971-2001. *Journal of Sexual Medicine*, 11, 401-410. doi: 10.1111/jsm.12381
- Bergstrom-Walan, M.B., & Nielsen, H.H. (1990). Sexual expression among 60-80 year old men and women: a sample from Stockholm, Sweden. *The Journal of Sex Research*, 27(2), 289-295.
- Bertone, C., & Camoletto, R.F. (2009). Beyond the sex machine? Sexual practices and masculinity in adult men's heterosexual accounts. *Journal of Gender Studies*, 18, 369-386. doi: [10.1080/09589230903260035](https://doi.org/10.1080/09589230903260035)
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101. doi: 10.1191/1478088706qp063oa
- Broom, A. (2008). Prostate cancer and masculinity in Australian society: a case of stolen identity? *International Journal of Men's Health*, 3(2), 73-91.

- Butler, J. (1990). *Gender trouble: feminism and the subversion of identity*. New York & London: Routledge.
- Calasanti, T. (2004). Feminist gerontology and old men. *Journal of Gerontology*, *59B*, s305-s314. doi: 10.1093/geronb/59.6.S305
- Calasanti, T., & King, N. (2005). Firming the floppy penis: age, class, and gender relations in the lives of older men. *Men and Masculinities*, *8*, 3-23. doi: 10.1177/1097184X04268799
- Camacho, M., & Reyes-Ortiz, C. (2005). Sexual dysfunction in the elderly: age or disease? *International Journal of Impotence Research*, *17*, s52-s56. doi: [10.1038/sj.ijir.3901429](https://doi.org/10.1038/sj.ijir.3901429)
- Camoletto, R.F., & Bertone, C. (2010). Coming to be a man: pleasure in the construction of Italian men's (hetero)sexuality. *Italian Studies*, *65*, 235-250. doi: [10.1179/016146210X12593180182775](https://doi.org/10.1179/016146210X12593180182775)
- Connell, R.W. (2005). *Masculinities*. Cambridge: Polity Press.
- Connell, R.W., & Messerschmidt, J.W. (2005). Hegemonic masculinity: rethinking the concept. *Gender and Society*, *19*, 829-859. doi: 10.1177/0891243205278639
- Corona, G., Lee, D., Forti, G., O'Connor, D., Maggi, M., O'Neill, T.,...EMAS Study Group., (2010). Age-related changes in general and sexual health in middle-aged and older men: results from the European male ageing study. *Journal of Sexual Medicine*. *7*, 1362-1380. doi: 10.1111/j.1743-6109.2009.01601.x
- DeLamater, J. (2012). Sexual expression in later life: a review and synthesis. *Journal of Sex Research*, *49*, 125-141. doi: 10.1080/00224499.2011.603168
- DeLamater, J., & Koepsel, E. (2015). Relationships and sexual expression in later life: a biopsychological perspective. *Sexual and Relationship Therapy*, *30*, 37-59. doi: 10.1080/14681994.2014.939506.
- DeLamater, J., & Still, M. (2005). Sexual desire in later life. *The Journal of Sex Research*, *42*, 138-149. doi: [10.1080/00224490509552267](https://doi.org/10.1080/00224490509552267)

- Doull, M., Oliffe, J., Knight, R., & Shoveller, J.A. (2013). Sex and straight young men: challenging and endorsing hegemonic masculinities and gender regimes. *Men and Masculinities, 16*, 329-346. doi: 10.1177/1097184X13494837
- Drummond, M. (2011). Reflections on the archetypal heterosexual male body. *Australian Feminist Studies, 26*, 103-117. doi: [10.1080/08164649.2011.546331](https://doi.org/10.1080/08164649.2011.546331)
- Elmerstig, E., Wijma, B., Sandell, K., & Bertero, C. (2014). Sexual interaction or a solitary action: young Swedish men's ideal images of sexual situations in relationships and in one-night stands. *Sexual and Reproductive Healthcare, 5*, 149-155. doi: 10.1016/j.srhc.2014.06.001.
- Ezzy, D. (2002). *Qualitative analysis: practice and innovation*. London: Routledge.
- Fileborn, B., Thorpe, R., Hawkes, G., Minichiello, V., Pitts, M., & Dune, T. (2015a). Sex, desire and pleasure: considering the experiences of older Australian women. *Sexual and Relationship Therapy, 30*, 117-130. doi: [10.1080/14681994.2014.936722](https://doi.org/10.1080/14681994.2014.936722)
- Fileborn, B., Thorpe, R., Hawkes, G., Minichiello, V., & Pitts, M. (2015b). Sex and the (older) single girl: experiences of sex and dating in later life. *Journal of Aging Studies, 33*, 67-75. doi: [10.1016/j.jaging.2015.02.002](https://doi.org/10.1016/j.jaging.2015.02.002)
- Fleming, A.A. (1999). Older men in contemporary discourses on ageing: absent bodies and invisible lives. *Nursing Inquiry, 6*, 3-8. doi: 10.1046/j.1440-1800.1999.00002.x
- Flood, M. (2008). Men, sex, and homosociality: how bonds between men shape their sexual relations with women. *Men and Masculinities, 10*, 339-359. doi: 10.1177/1097184X06287761
- Gilbert, E., Ussher, J.M., Perz, J., Wong, T.W.K., Hobbs, K., & Mason, C. (2013). Men's experiences of sexuality after cancer: a material discursive intra-psychic approach. *Culture, Health & Sexuality, 15*, 881-895. doi: [10.1080/13691058.2013.789129](https://doi.org/10.1080/13691058.2013.789129)
- Gott, M., & Hinchliff, S. (2003). How important is sex in later life? The views of older people. *Social Science and Medicine, 56*, 1617-1628. doi: [10.1016/s0277-9536\(02\)00180-6](https://doi.org/10.1016/s0277-9536(02)00180-6)

- Gott, M., Hinchliff, S., & Galena, E. (2004). General practitioner attitudes to discussing sexual health issues with older people. *Social Science & Medicine*, *58*, 2093-2103. doi: [10.1016/j.socscimed.2003.08.025](https://doi.org/10.1016/j.socscimed.2003.08.025)
- Hanna, P. (2012). Using internet technologies (such as Skype) as a research medium: a research note. *Qualitative Research*, *12*, 239-242. doi: 10.1177/1468794111426607
- Helmes, E., & Chapman, J. (2012). Education about sexuality in the elderly by healthcare professionals: a survey from the Southern Hemisphere. *Sex Education*, *12*, 95-107. doi: [10.1080/14681811.2011.601172](https://doi.org/10.1080/14681811.2011.601172)
- Hilario, A.P. (2015). Making sense of a changed physical body: why gender matters at end of life. *Journal of Aging Studies*, *33*, 58-66. doi: 10.1016/j.jaging.2015.03.001
- Hinchliff, S., & Gott, M. (2008). Challenging social myths and stereotypes of women and aging: heterosexual women talk about sex. *Journal of Women and Aging*, *20*, 65-81. doi: [10.1300/J074v20n01_06](https://doi.org/10.1300/J074v20n01_06)
- Holt, A. (2010). Using the telephone for narrative interviewing: a research note. *Qualitative Research*, *10*, 113-121. doi: 10.1177/1468794109348686
- Hughes, J. (2011). Are older men taking sexuality as prescribed? The implications of the competing influences on ageing male heterosexuality. *Australian Feminist Studies*, *26*, 89-102. doi: [10.1080/08164649.2010.546330](https://doi.org/10.1080/08164649.2010.546330)
- Jagus, C.E., & Benbow, S.M. (2002). Sexuality in older men with mental health problems. *Sexual and Relationship Therapy*, *17*, 271-279. doi: 10.1080/14681990220149077
- Johnson Jr, M. (2010). "Just getting off": the inseparability of ejaculation and hegemonic masculinity. *The Journal of Men's Studies*, *18*, 238-248. doi: 10.3149/jms.1803.238
- Karraker, A., & DeLamater, J. (2013). Past-year sexual inactivity among older married persons and their partners. *Journal of Marriage and Family*, *75*, 142-163. doi: 10.1111/j.1741-3737.2012.01034.x

- Kleinplatz, P., Menard, D., Paradis, N., Campbell, M., & Dalglish, T. (2013). Beyond sexual stereotypes: revealing group similarities and differences in optimal sexuality. *Canadian Journal of Behavioural Science, 45*, 250-258. doi: [10.1037/a0031776](https://doi.org/10.1037/a0031776)
- Laumann, E.O., Paik, A., Glasser, D.B., Kang, J.H., Wang, T., Levinson, B.,...Gingell, C. (2006). A cross-national study of subjective sexual well-being among older women and men: findings from the global study of sexual attitudes and behaviours. *Archives of Sexual Behavior, 35*, 145-161. doi: [10.1007/s10508-005-9005-3](https://doi.org/10.1007/s10508-005-9005-3)
- Lee, D.M., Nazroo, J., & Pendleton, N. (2015). Erectile dysfunction and phosphodiesterase type 5 inhibitor use: associations with sexual activities, function and satisfaction in a population sample of older men. *International Journal of Impotence Research, 27*, 146-151. doi: [10.1038/ijir.2015.4](https://doi.org/10.1038/ijir.2015.4).
- Loe, M. (2001). Fixing broken masculinity Viagra as a technology for the production of gender and sexuality. *Sexuality and Culture, 5*, 97-125. doi:10.1007/s12119-001-1032-1
- Lodge, A.C., & Umberson, D. (2012). All shook up: sexuality of mid- to later life married couples. *Journal of Marriage and Family, 74*, 428-443. doi: [10.1111/j.1741-3737.2012.00969.x](https://doi.org/10.1111/j.1741-3737.2012.00969.x)
- Lodge, A.C., & Umberson, D. (2013). Age and embodied masculinities: midlife gay and heterosexual men talk about their bodies. *Journal of Aging Studies, 27*, 225-232. doi: [10.1016/j.jaging.2013.03.004](https://doi.org/10.1016/j.jaging.2013.03.004)
- Mamo, L., & Fishman, J. (2001). Potency in all the right places: Viagra as a technology of the gendered body. *Body and Society, 7*, 13-35. doi: [10.1177/1357034X01007004002](https://doi.org/10.1177/1357034X01007004002)
- Marshall, B. (2012). Medicalisation and the refashioning of age-related limits on sexuality. *Journal of Sex Research, 49*, 337-343. doi: [10.1080/00224499.2011.644597](https://doi.org/10.1080/00224499.2011.644597)
- McCarthy, B., Farr, E., & McDonald, D. (2013). Couple sexuality after 60. *Journal of Family Psychotherapy, 24*, 38-47. doi: [10.1080/08975353.2013.762867](https://doi.org/10.1080/08975353.2013.762867)

- Menard, D.A., Kleinplatz, P.J., Rosen, L., Lawless, S., Paradis, N., Campbell, M., & Huber, J.D. (2015). Individual and relational contributors to optimal sexual experiences in older men and women. *Sexual and Relationship Therapy, 30*, 78-93. doi: [10.1080/14681994.2014.931689](https://doi.org/10.1080/14681994.2014.931689)
- Messaoudi, R., Menard, J., Ripert, T., Parquet, H., & Staerman, F. (2011). Erectile dysfunction and sexual health after radical prostatectomy: impact of sexual motivation. *International Journal of Impotence Research, 23*, 81-86. doi: 10.1038/ijir.2011.8
- Minichiello, V., Plummer, D., & Loxton, D. (2004). Factors predicting sexual relationships in older people: An Australian study. *Australasian Journal on Ageing, 23*, 125-130. doi: 10.1111/j.1741-6612.2004.00018.x
- Novick, G. (2011). Is there a bias against telephone interviews in qualitative research? *Research in Nursing & Health, 31*, 391-398. doi: [10.1002/nur.20259](https://doi.org/10.1002/nur.20259)
- Philaretou, A.G., & Allen, K.R. (2001). Reconstructing masculinity and sexuality. *The Journal of Men's Studies, 9*, 301-321. doi: 10.3149/jms.0903.301
- Potts, A. (2000). "The essence of the hard on". Hegemonic masculinity and the cultural construction of "erectile dysfunction". *Men and Masculinities, 3*, 85-103. doi: 10.1177/1097184X00003001004
- Prestage, G., Jin, F., Bavinton, B., Grulich, A., Brown, G., Pitts, M., & Hurley, M. (2014). Australian Gay and Bisexual Men's Use of Erectile Dysfunction Medications During Recent Sexual Encounters. *The Journal of Sexual Medicine, 11*, 809-819. doi: 10.1111/jsm
- Prestage, G., McCann, P., Hurley, M., Bradley, J., Down, I., & Brown, G. (2010). *Pleasure and Sexual Health: The PASH Study 2009*. Sydney: National Centre in HIV Epidemiology and Clinical Research.
- Rubin, G. (1992). Thinking sex: notes for a radical theory of the politics of sexuality. In Vance, C.S. (ed) *Pleasure and danger: exploring female sexuality*. London: Pandora, pp, 267-319.

- Sandberg, L. (2013a). Just feeling a naked body close to you: men, sexuality and intimacy in later life. *Sexualities*, *16*, 261-282. doi: 10.1177/1363460713481726
- Sandberg, L. (2013b). Affirmative old age – the ageing body and feminist theories on difference. *International Journal of Ageing and Later Life*, *8*, 11-40. doi: 10.3384/ijal.1652-8670.12197
- Sandberg, L. (2015). In lust we trust? Masculinity and sexual desire in later life. *Men and Masculinities*, online first, 1-17. doi: 10.1177/1097184X15606948
- Schick, V., Herbenick, D., Reece, M., Sanders, S.A., Dodge, B., Middlestadt, S.E., & Fortenberry, D.J. (2010). Sexual behaviours, condom use, and sexual health of Americans over 50: implications for sexual health promotion for older adults. *Journal of Sexual Medicine*, *7*, 315-329. doi: 10.1111/j.1743-6109.2010.02013.x
- Smith, M.L., Goltz, H.H., Ahn, S.N., Dickerson, J.B., & Ory, M.G. (2012). Correlates of chronic disease and patient-provider discussions among middle-aged and older males: implications for successful aging and sexuality. *The Aging Male*, *15*, 115-123. doi: 10.3109/13685538.2011.641184
- Spector-Mersel, G. (2006). Never-aging stories: Western hegemonic masculinity scripts. *Journal of Gender Studies*, *15*, 67-82. doi: [10.1080/09589230500486934](https://doi.org/10.1080/09589230500486934)
- Sturges, J.E., & Hanrahan, K.J. (2004). Comparing telephone and face-to-face qualitative interviewing: a research note. *Qualitative Research*, *4*, 107-118. doi: 10.1177/1468794104041110
- Thorpe, R., Fileborn, B., & Hurde Clarke, L. (in press). Framing the sexual rights of older heterosexual women: acknowledging diversity and change. In: Barrett, C., & Hinchliff, S. (eds). *Addressing the sexual rights of older people*. Routledge.
- Trier-Bieniek, A. (2012). Framing the telephone interview as a participant-centred tool for qualitative research: a methodological discussion. *Qualitative Research*, *12*, 630-644. doi: 10.1177/1468794112439005

- Trudel, G., Dargis, L., Villeneuve, L., Cadieux, J., Boyer, R., & Preville, M. (2014). Marital, sexual and psychological functioning of older couples living at home: the results of a national survey using longitudinal methodology (Part II). *Sexologies*, 23, e35-e48. Doi: [10.1016/j.sexol.2013.03.007](https://doi.org/10.1016/j.sexol.2013.03.007)
- Umberson, D., Thomeer, M.B., & Lodge, A.C. (2015). Intimacy and emotion work in lesbian, gay, and heterosexual relationships. *Journal of Marriage and Family*, 77, 542-556. doi: 10.1111/jomf.12178
- Ussher, J.M., Perz, J., Gilbert, E., Wong, T.W.K., & Hobbs, K. (2013). Renegotiating sex and intimacy after cancer: resisting the coital imperative. *Cancer Nursing*, 36, 454-462. doi: 10.1097/NCC.0b013e3182759e21
- Waite, L.J., Iveniuk, J., Laumann, E.O., & McClintock, M.K. (2015). Sexuality in older couples: individual and dyadic characteristics. *Archives of Sexual Behavior*, online first. doi: [10.1007/s10508-015-0651-9](https://doi.org/10.1007/s10508-015-0651-9)
- Wang, T.F., Lu, C.H., Chen, I.J., & Yu, S. (2008). Sexual knowledge, attitudes and activity of older people in Taipei, Taiwan. *Journal of Clinical Nursing*, 17, 443-450. doi: 10.1111/j.1365-2702.2007.02003.x.
- West, C., & Zimmerman, D.H. (1987). *Doing Gender*. *Gender & Society*, 1, 125-151. doi: 10.1177/0891243287001002002
- Yee, L. (2010). Aging and sexuality. *Australian Family Physician*, 39(10), 718-721.