

Comparison of Sexual Attitudes of Young and Older Adults

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ABSTRACT

Sexual attitudes refer to views and opinions pertaining to sex and sexuality and are influenced by many factors. As such, like any other opinion and perception, they are susceptible to change as a result of people's lived experiences. Previous studies conducted have explored gender differences, parental influences, cross-cultural differences, etc. The present study aims to compare the sexual attitudes of young adults and older adults and observe the differences that arise. A total 213 participants from Chennai took part in the study among which 112 young adults and 101 older adults. There were 108 males, 101 females and 4 non-binary participants. Among the participants, majority of the young adults were female and majority of older adults were male. The tools used were the socio-demographic sheet and the Brief Sexual Attitudes Scale. The study revealed that young adults endorsed permissiveness more, indicating that they have a more casual and open attitude towards sex, and older adults endorsed communion more, showing they viewed sex as an ideal and emotional bond. Both young and older adults endorsed birth control and had a neutral stand regarding instrumentality which implied sex was primarily physical and self-centred. Findings of the current study posit that there exist differences and similarities in sexual attitudes of young and older adults showing that while age may play an important role in the formation of these sexual attitudes, it is not the only factor that influences them. Future studies can extrapolate further on these findings by scaling up or exploring other factors alongside age.

Keywords: *Young Adults, Older Adults, Sexual Attitudes, Permissiveness, Communion, Birth Control, Instrumentality*

Sexual attitudes refer to the attitudes one has toward sexuality or sexual behaviours. These attitudes, which are reflected in each individual's sexual conduct, are impacted by sexual education, past sexual experiences, and familial and cultural views on sexuality. (Silva et al., 2021). Several factors are involved in the formation of sexual attitudes. High testosterone levels in men have been linked to permissive sexual attitudes (Halpern et al., 1994) and higher oestradiol levels in women have been associated with an increase in positive attitudes towards sex (Jones et al., 2018). Further, analyses have showed that varying sexual orientations are partly due to genetics showing that there is a genetic predisposition towards sexual attitudes (Alanko et al., 2009). Brain structures play a significant role in sexual attitudes and behaviours.

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Lesions in the hypothalamus can lead to notable variations in sexual behaviours as the brain region modulates components of sexual desire that are neuroendocrine and autonomic. Similarly other regions of the brain such as the temporal lobes, frontal lobes and the amygdala influence the sex drive, sexual behaviours and sexual attitudes. (Baird et al., 2007). Emotions play a key role in one's views towards sex and their resulting behaviours. Emotional regulation difficulties have also been associated with hypersexual activities. (Miner et al., 2019) while body image issues seem to have negative attitudes towards sex such that it affects how they express their sexuality. (Potki et al., 2017). History of sexual abuse and the trauma derived from it influences one's sexual attitudes whether it be the person has extremely negative views towards sex or have very permissive sexual attitudes. Gender differences can be observed in that men with a history of sexual abuse were more likely to exhibit compulsive sexual behaviours while more women tended to have more negative attitudes towards sex and engaged in avoidance. (Aaron, 2012). Social influences ranging from media to the neighbourhood characteristics influence permissive attitudes towards sex, risky sexual behaviour. (Inanc H et al, 2020). Cultural norms and expectations have shown to play a role in permissive sexual attitudes depending upon the stigma and approval surrounding them which includes the prevalence of double standards with regards to sexual activity and gender bias where men seem to be offered more sexual freedom than women (Khumalo et al., 2020). These biological, psychological, social and cultural factors can differ on the basis of the changing times and the changes in the body.

Young adulthood is a period that concentrates on getting into intimate relationships, according to Erikson's 6th stage of psychosocial development. Young adults tend to engage in casual sexual relationships for a variety of reasons which include sexual satisfaction, emotional fulfilment, etc. males tend to have greater permissive sexual attitudes. Young adulthood is when people are in their physiological peak where all of the bodily system in able-bodied people are in their best state of functioning (Goerling & Wolfe, 2022). Young adults mostly veer towards condoms as their preferred method of contraception even if the usage can be inconsistent. Alcohol consumption has also been associated with the prevalence of casual sex and sexual assault on women. Double standards exist as a result of which men are able to explore their sexuality more than women (Lefkowitz & Gillen, 2006). Individuals may engage in sexual activity solely for sexual gratification and avoid emotional entanglement (Garcia & Reiber, 2008). Opinions of peers may also influence the sexual attitudes of young adults. Some individuals may engage in casual sex in order to gain popularity among peers (Regan & Dreyer, 1999) while others might not even take peer opinions and attitudes into account while expressing their sexuality (Garcia & Reiber, 2008). Religiosity plays a significant role in sexual attitudes with those adhering more to religious prohibitions tending to abstain from sexual activity (Lefkowitz et al., 2004). Permissive sexual attitudes were more pervasive during young adulthood where those young adults who had more sexual knowledge had more liberal attitudes towards sexuality (Majula & Dutt, 2017)

During late adulthood, older adults may find greater sexual gratification owing to the time they have on hand to be intimate. Sexual activities tend to depend on the health of the individual and their partner. Older adults tend to focus on the quality of sexual encounters and not the quantity which is attributable to young adults (Goerling & Wolfe, 2022). During older adulthood, sex tends to be different than how it was during the younger years. There are difficulties in getting and maintaining an erection and they may require more physical stimulation to get erect. They may also have a longer refractory period than before, that is, it takes them more time to get another erection after ejaculation. Women also show diminishing sexual arousal and an inability to climax (Lindau et al., 2007). Older adults with a positive

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disposition towards outcomes tended to report greater sexual functioning, arousal and orgasm. Sexual contentment was associated with higher self-esteem in late life women (Mernone et al., 2019). Having a good relationship with a spouse in late life also was more likely to lead to increased interest in sex and a higher occurrence of sexual activities while sex with casual partners was less likely to occur. Apart from good partner relationships, the cultural upbringing of the older adults influenced their views with regards to sex (Guan, 2004) with older adults who remained in relationships viewing sexuality as a vital aspect, participating in different sexual acts despite a high incidence of sexual issues (Lindau et al. 2007). Older adults who had higher levels of sexual desire and function earlier in life were more likely to engage in sexual activities and have a more positive attitude towards sex during late adulthood (De Sousa et al., 2006). Older men and older folk with spouses tend to have a more positive attitude towards sex with the presence of a spousing leading to the retention of sexual interest and a health sex life (Park et al, 2006). Sexual attitudes also seem to differ across cultures some cultures having more traditional sexual attitudes than the rest (Ahrold & Meston, 2008) and between genders where there exist double standards that are cause by societal pressures to conform to gender norms, social power disparities and biological differences between men and women (Petersen & Hyde, 2011). While currently there exists information that compare sexual attitudes across ethnicities, genders, cultures and, geography and that explore the sexual attitudes of young adults and older adults separately, there is a lack of studies that examine and explore the variations in sexual attitudes between young adults and older adults, especially Indian studies. The present study sheds light on the differences in sexual attitudes among young adults and older adults and explores the dimensions of sexual permissiveness, communion, instrumentality and birth control between the two age groups and provides insight into the way young adults and older adults perceive sex and sexuality. Existence of cross-cultural literature further posits the need for the study as culture and ethnicity are important influencing factors in the formation and expression of sexual attitudes. This necessitates the present study that explores the same within an Indian context.

METHODOLOGY

Objective

To determine the differences in attitudes towards sex between young adults and older adults

Hypothesis

H₀: There will be no difference in attitudes towards sex between young adults and older adults

Sampling Procedure

Based on the past literature study (Tabatabaeichehr et al., 2018) [Sexual Desire and Related Factors in Middle-Ages and Elderly Married Women] with similar variables, the estimated risk is 0.199%, Power is 80% and alpha error is 5%. Hence 213 participants were chosen to be a part of the study using purposive sampling in Chennai. The sample population consisted of 112 young adults and 101 older adults where 108 were male, 101 were female and 4 were non-binary.

Inclusion Criteria

- Individuals in the age range of 20-40 years
- Individuals aged 60 and above
- Both males and females
- Married and unmarried adults were included
- Individuals residing in Chennai

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- Individuals with 10 years of formal school education, and able to read and write in English language.

Exclusion Criteria

- Individuals with chronic neurological and psychiatric illness were not included
- Individuals unwilling to participate

Tools

1. **Socio-demographic Sheet** is a semi-structured socio-demographic data sheet developed by the Principal Investigator which includes information regarding name/initials, age/date of birth, gender, birth order, number of siblings, education, occupation, marital status, family Type (Nuclear/Joint/Extended/Alone), area of residence.
2. **Brief Sexual Attitudes Scale** which was developed by Hendrick, Hendrick and Reich in 2006 is a 23-item scale measuring permissiveness, birth control, communion and instrumentality. The items are rated on a 5 Likert type scale and a lower score indicates a greater influence of that subscale. Scores for a given subscale are represented by subscale mean scores and there is no total score. Test-retest correlations were .92 for Permissiveness, .57 for Birth Control, .86 for Communion, and .75 for Instrumentality. The BSAS subscales correlated as expected for the most part with love attitudes and with other relationship-oriented measures. The scale is in the public domain and is free for research and clinical use.

Procedure

Individuals of age range 20-40 years and individuals aged above 60 years were approached and were informed about the nature of the study. After obtaining consent to participate, their basic details were recorded using a socio-demographic sheet prepared by the investigator and their attitudes towards sex were assessed using the Brief Sexual Attitudes Scale online.

Statistical Analysis

Mean, standard deviation, frequency and independent samples t-test were used.

RESULTS AND DISCUSSION

The current study aims to analyse the differences in sexual attitudes among young adults and older adults. 213 participants, among which 112 were young adults and 101 were older adults, were administered the Brief Sexual Attitudes Scale. Majority of the young adults were female while majority of the older adults were male.

Table 1: Difference in sexual attitudes of young adults and older adults

Subscale	Age Group	N	Mean	Std Deviation	t	p value
Permissiveness	20-40 yrs	112	3.11	1.00	-3.821	<.001**
	60+ yrs	101	3.62	0.97		
Birth Control	20-40 yrs	112	1.63	0.82	-1.867	.064
	60+ yrs	101	1.88	1.08		
Communion	20-40 yrs	112	2.34	0.96	4.614	<.001**
	60+ yrs	101	1.75	0.90		
Instrumentality	20-40 yrs	112	2.95	0.85	1.272	.205
	60+ yrs	101	2.77	1.17		

* $p < .05$ is statistically significant

** $p < .001$ is statistically highly significant

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Table 1 describes the differences among young adults and older adults with regards to different dimensions of sexual attitudes. An independent samples t test was used to analyse the difference between young adults and older adults. The mean score for permissiveness in younger adults is 3.11 with a standard deviation of ± 1.00 and the mean score for older adults is 3.62 with a standard deviation of ± 0.97 . There is a significant difference between young adults and older adults in the permissiveness subscale ($p < .001$ $p < .05$ $p < .01$). Younger adults have a lower score in this subscale which shows they have more permissive sexual attitudes than older adults. The data is more dispersed among young adults than older adults when it comes to this subscale which measures attitudes towards casual sex. From this, it can be interpreted that young adults have more casual and open attitude towards sex than their older counterparts. This is in line with previous studies (Byno et al., 2009) whose findings have shown that age is an influential factor on permissive sexual attitudes and that college women tended to have permissive sexual attitudes that would reduce as they grew older. This can be because young adulthood is a period of exploration and experimentation and sexual exploration is a critical part of understanding sexuality for young adults (Lefkowitz & Gillen, 2006).

The mean score in the birth control subscale is 1.63 for young adults and 1.88 in older adults with a standard deviation of ± 0.82 and ± 1.08 respectively. There is no significant difference between young adults and older adults in this subscale ($p > 0.05$). The data is more dispersed among older adults than young adults. Both young and older adults had low mean scores in this subscale showing that they favour responsible sexual practices such as using protection. This is in accordance with the findings from a previous study (Thao et al., 2020) that posited that women have a more positive attitude towards contraception. This study's young adult participants were mostly female (74%), similar to the current study. Conversely, when it comes to older adults, the findings from the current study contradicts earlier studies (Ama & Olaomi, 2018) whose findings show that contraception prevalence among older adults (aged 50 years and above) is very low.

The mean score of the communion subscale is 2.34 for young adults with a standard deviation of ± 0.96 and for the mean score for older adults is 1.75 with a standard deviation of ± 0.90 . There is a significant difference between young adults and older adults in this subscale ($p < .001$ $p < .05$ $p < .01$). When it comes to communion which views sex as a peak experience, or an ideal, older adults more with items under this subscale than younger adults. This shows that older adults are more likely of the opinion that sex is something sacred, between two souls and incredibly meaningful. This finding is aligned with earlier studies (Wang et al., 2008) whose findings showed that one of the major reasons older adults did not engage in sexual activities was the death of a partner and that having a partner is a predictor of sex. This could be because older adults grew up with stigma surrounding not only sex but also premarital sex and view sex as something that builds up an emotional bond between two people than just an expression of physical desire (Chakraborty & Thakurata, 2013).

The final subscale of instrumentality which endorses sex to be purely for biological and self-centred reasons, has a mean score of 2.95 with a standard deviation of ± 0.85 in young adults and a mean score of 2.77 with a standard deviation of ± 1.17 in older adults. The data is more dispersed along older adults than young adults. There is no significant difference between young adults and older adults in this subscale. Both age groups seemed to settle at a neutral point in this subscale, neither agreeing nor disagreeing that sex is something purely physical and biological.

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Implications

- This study throws light on to the differing attitudes between different age groups and implies the existence of other factors that influence sexual attitudes between generations which can be explored
- There is an observable common ground that unites the two populations implying age alone does not influence sexual attitudes
- This study can be of use in settings such as family therapy for a joint family composed of multiple generations
- The findings of the study also give insight into the current attitudes towards sex of young adults and older adults

The study concludes that it can be observed that young adults and older adults do have differing attitudes towards sex in certain aspects and are united in other aspects and that age does play a role in attitudes towards sex.

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Conflict of Interest

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