In the year 2000, 54 million women reached the age of 50 and most of them are now in menopause. With a life expectancy of 78 years and rising, one third of their lives will be post-menopausal. As these baby boomers mature, post-menopausal women will make up the largest demographic group by 2008.

The advent of hormone treatment for menopause symptoms has given women new options in the last two decades, including testosterone treatment. But it has also raised questions about the efficacy and wisdom of such protocols that have become the standard as in the case of synthetic estrogen/progesterone treatments. The assumption of menopause as a hormone deficiency has led many of us as practitioners to believe that low desire is just another part of the physiological package and can be treated with hormone replacement. However, since we’ve heard about the desire dousing potential of oral contraceptives, we can certainly question whether the same effect could be true of HRT.

The narrow medical interpretation of menopause as an ovarian failure often leads to narrow assumptions about women’s sexuality beyond midlife. So far, we’ve heard mostly the bad news; that their vaginas will become less elastic and dry, their energy will wane and their libido’s will disappear. However, the medical paradigm both reflects and perpetuates a misunderstanding about post-menopausal sexuality: that sexual desire and pleasure inevitably decline as a result of a deficiency.

Physicians routinely assume that menopause is the cause of problems relating to older women’s sexuality. Few seem to want to address the poor relationships, loss, and self esteem issues that are significant contributors to low desire in older women. Often, menopausal women are being given the message that they are helpless victims of aging unless they take a pill. This “decay mentality” is fueled by the pharmaceutical industry, which has profited from the association of HRT with symptom relief. There is a halo effect that causes women to flock to HRT in hopes it will cure a host of ills when, in truth it will not resolve the combination of relationship/intimacy/sexual issues that may have nothing to do with the so-called ovarian failure. Estrogen is not the magic bullet that will bring back desire. In fact, the medical terminology is inaccurate because the ovaries only change function. Dr Christiane Northrup states, “that this great initiation experience of menopause is reduced to a hormone deficiency is allopathic medicine at it’s worst.”

Before I give you some wonderful examples of the good news from testimonies as well as examples from my own practice, I’d like to examine the confounding factors that make the depressing statistics about sexual loss at midlife so negatively skewed.

**Medical**

Here are some interesting facts from Dr. Northrup’s book, *The Wisdom of Menopause*, (1) Body fat cells convert cholesterol to Estrone, one of the estrogens. The ovaries continue to produce androgens all of our lives. What this can mean is that women shift into a new and different experience of their sexuality based on a different “cocktail” mix of hormones. (2) The gonadotrophin releasing hormones, FSH and LSH, which are actually brain stimulants, elevate at menopause and remain elevated for the rest of a
woman’s life. Thus, the post-menopausal brain chemistry promotes older women becoming more intuitive. This is the Crone Stage as it was called for thousands of years, the stage of the wise woman. The elevated releasing hormones offer a physiological explanation of the increase of “psychic” abilities that arise in many older women. And here is a critical point. (3) Approximately 70 to eighty percent of older women do not experience menopause as a problem. Dr Northrup states that the medical profession has never studied a group of women who didn’t get all the diseases of menopause that are supposedly secondary to hormone deficiency. And so, we do not have an unbiased view of what today’s menopausal women look like, especially what their sexuality is like because we do not have studies of women with positive experiences during and after menopause.

Cultural Bias

Older women are among the most underrepresented populations in sexuality research. Kinsey’s research had only 26 men and 10 women over 70. Much of the research previous to the last decade is dated because the women studied were born before mid 20th century and had enormous cultural conditioning factors that were not controlled as a variable in the studies. This is called the cohort effect. A study in 1993 of older women showed that age had much less effect on sexual interest than had been suggested by earlier surveys. In addition, the fact that women still have a tendency to marry men older than themselves and that the life expectancy of men is lower creates a demographic isolation for many older women.

Relationship Factors

A recent study pointed that the partner’s functioning problems are a significant yet unidentified factor in older women’s lack of sexual interest. Another study of menopausal women over a six-year period found that loss of desire was much more related to relationship problems and conversely, an increase in desire was related to the resolution of a problem. In the Swedish study, women who had much younger partners were more sexually active than those who had partners their age or older.

The onset of menopause is truly a psychological fork in the road, one path leading to relinquishing feminine sexuality altogether, and the other leading to a rebirth of sexual possibilities. I am convinced that which path one takes is more a product of conditioning, relationship problems, and self-fulfilling prophecy (often fueled by media) than an inevitable result of physiology. Menopause is the crucible experience that brings about a new phase of adulthood but it does challenge women’s sense of self. Often menopause symptoms set off a panic in most women, until they directly confront fears of aging and the assumption they will soon lose sexual attractiveness.

Menopause is not a disease, but our collective culture has a problem with aging women. Sex therapist Susan Hodgkiss, a sexy woman in her seventies, stages a monologue drama, called “Elements of the Flesh,” relating stories about her and her friends’ sexual experiences. Many who go to listen to her are shocked. “But she’s too old,” they say. Such is the dilemma of the older woman. They are taught to believe that they have much to lose at menopause because Crone women have less value to men and to the culture. The good news is that it is possible to find new strengths from the transformation experience of menopause. For many women a free and fiercely assertive sexuality can emerge from the confrontation with their health issues.
Today, post-menopausal women are rewriting the cultural view of what it means to age. Such women no longer fit the standard view as dried up, but the party line about aging women has not kept up with the reality of the lives of the bulk of women reaching 50 and beyond. It is time we hear more of the good news. I would like to present some positive images that belie the caricatures of sexless old biddies or sexually aggressive harpies with disgusting bodies. (Remember the movie, “There’s Something About Mary”?)

One of the less known facts about menopause is that some women experience an increase in desire.

Here’s a quote from a woman in Joani Blank’s Still Doing It: Women and Men Overt 60. This woman started a new relationship in her 60’s: “I’m getting hornier as I age, not less so. I am feeling more like a sex goddess and completely guilt-free regarding sex. It has been written that youth is wasted on the young; and now I think I know what that means.”

Mona, age 62: “I never could ask for what I wanted in bed and I divorced two husbands without ever getting the fulfillment I wanted. Now, I’m willing to risk myself and I know that I don’t have to give up on having the hot sex I’ve always fantasized about. I’m dating and testing the waters with my newfound sexual confidence.”

And Helen: “Having sex after 60 has made me realize that age has very little to do with sex. I may view it a little bit differently, but my desires and need are still there. Since retirement my partner Michael and I have had time to get to know each other again in a new way. We are relaxed with each other and able to have sex exactly how we want it, with no inhibitions or distractions. We now enjoy sex the way it was meant to be, exploring and discovering the things we enjoy.”

So let’s look at treatment options that may include but do not rely on chemicals to address the complex issues of older women’s sexuality. In my book, Reclaiming Goddess Sexuality, I present an alternate model of sexuality: The Feminine Paradigm.

- Pleasure rather than orgasm is central to an erotic encounter
- Sensual touch is the vehicle rather than genital performance
- Orgasm is perceived as multidimensional

I wonder if the questions used in past surveys even reflect the totality of women’s sexual behavior. Often the participants responded questions about intercourse. And this was the measure of their drive. Dr Richard Cross, himself age 84, states that it is the obsession with male erection and intercourse that gets in the way of couples as they age. “What older men and women want is closeness, exciting touch, recognition that sexual interest, desire and activity last throughout life and need to be adapted in new ways as biology slows them down.”

The Feminine Paradigm is well suited to the experience of older women (and their partners). I see in my practice many older women whose desire has become repressed, buried under layers of old cultural conditioning and past negative experiences. I explain to them that when sexuality becomes dormant we are cut off from an important source of nourishment. The treatment model that I am suggesting motivates mature women and has the potential to reframe all aspects of older women’s sexuality. The message I give to post
menopausal women is: Abundant sexual desire is not something you have lost. It is always within your power to reawaken. Rather than giving discouraging messages about hormone deficiency, I encourage women to develop the intuitive body wisdom to reawaken sexuality, in whatever form they choose. The treatment model is one of collaboration between the therapist as guide and the woman on her journey to reclaim her sexuality.

**Sexual Mastery and Healing**

Crone sexual interest often goes beyond simply experiencing pleasure and physical release. The healing potential of sexual energy can motivate Crone women to reclaim their sexuality because it is rejuvenating. Sexuality as a force for healing is still rarely discussed in sex therapy, yet was once considered a sacred healing art in cultures that honored the divine feminine. Unfortunately there is no scientific research describing the curative effects of sexual energy on diseases of the mind and body but women can intuitively understand it.

The interest in healing that is prevalent in the Crone Stage of life becomes intensified for many women because of the initiation process of menopause. In the Crone years, women have the potential to become sexually self-responsible as never before because of courage gained from facing menopause and finding solutions that challenge conventional notions.

**Empowering**

Being empowered implies a state of awareness of internal strengths of emotional capacity, strong will, and an acknowledgement of the wisdom gained from life. To feel sexually empowerment women can begin view the physical challenges of menopause as a necessary process. It is truly a psychological transformation. The purpose of this transformation is to strengthen and add insight that facilitates the emergence of their “wise woman.”

**Setting: Honoring**

I help women develop the relationship with their own Body Wisdom, which is intuitive knowing, grounded in the internal awareness. Guided imagery work is extremely powerful for this—especially a process I call Womb Wisdom. I also use methods that strengthen women’s Guardian self.

One of the most important aspects of the work is self-image including the woman’s image of aging that is imbedded in old conditioning. I tell women “sexy is not synonymous with young. You have the possibility of finding an inner confidence in your sexuality that belies the cultural stereotypes of older women.”

**OVERHEAD: OLDER WOMEN’S SEXUALITY**

As we age, women have the potential to combine their wisdom with our sensuality to achieve what I call MATURE EROTIC BEAUTY.

Beauty in older women stems from their experience with the richness of relationships and their sense of personal authority from a life well lived. The mature erotic woman finds a balance between compassion and her consciously developed independence. Such women possess the quality of harmony with self, valued by women-honoring
cultures. Beautiful older women continue to grow with their creativity and enthusiastically pursue their path of power.

**Intentional Desire**

Another concept that I find useful to women at the mature stage of their lives is utilizing intentional desire. With intentional desire, Crone women may learn to focus on sexual response that is different from earlier times. Sexual desire in the Crone Stage is affected by lower levels of estrogen in relative proportion to the levels of testosterone. And so women do have an assertive mix of hormones, but it does not feel like the sexual “horniness” of their youth. Some women are more familiar with feeling the estrogen-dependent, receptive sexual response. When their bodies stop producing abundant estrogen, they report that they do not feel any sexual desire, because they have not learned to attend to a different source of cues. What I call intentional desire is derived from the focused will.

Crone sexuality extends beyond what society deems appropriate and proper behavior for a woman “of a certain age.” Intentional sexual desire comes from an inner resource that accesses a deeper sexuality, transcending instinctual, hormone-driven responses. It can be understood as a purposeful action: to heal, to commune with a partner, to seek mutual pleasure, and to play. Intentional sexual desire may also be used for the practice of spiritual sexuality, and the potential for deeper experiences with the great mysteries of life.

**Some alternative choices**

Often when I speak to groups of older women about the healing and spiritual aspects of their sexuality, they will respond with a question “Where are the men who are interested in exploring other dimensions of sexuality? We’d love to have the kind of integration of sex and spirit that you talk about but how can we find it?”

At first I felt I really didn’t have a good answer because many of the women in the post-menopausal years may be divorced or widowed and without partners. These women express a great deal of enthusiasm for finding quality sex but are not interested in the singles game where sex can be unfulfilling and problematic in many ways. Now I offer a cornucopia of options some of which are quite “out of the box” from our conservative cultural mores.

**Self Loving**

Betty Dotson is in her 70’s and still at the forefront of promoting self-loving. In fact, she has just come out with a new product she calls the vaginal barbell. Carol Ellison’s study *Women’s Sexualities* offers examples of women who began masturbating later in life. Here is Ellen, born in 1910. She started after her husband got prostate cancer and stopped having intercourse with her.

“I think the idea of doing it came to me through reading about it in books. I grew up with the idea that masturbation was evil. . . . But then [I] read about what a release it is and so on, so I just decided, Well, I might as well try it. So I did. I was like saying: Well if John can’t give me what I need, maybe I can give myself what I need. It’s kind of a
conscious decision. I think that some of the best orgasms I’ve ever had were the ones that I gave myself in the last few years.”

**New Romance**

We have many examples of women who have chosen to regenerate their sexuality rather than “go quietly into the night.” One such woman is Margaret Mead, one of the most famous social anthropologists of the 20th century. According to an account by her daughter, Mead went through a sexual transformation in her Crone years. She stated that her mother looked prettier and dressed more dramatically in designer clothes after starting a new romantic involvement.

There is a wonderful book entitled *Seasons of the Heart*, that offers many examples of couples that are over 60 and have found new loves and sexual adventures late in life. One couple in their early nineties talked frankly about their sexuality. Sarah married Alex in her fifties after a sexually unfulfilling long marriage that ended with her partner’s death. For the first time in her life, she blossomed sexually. They are now 90 and 92 and even with Alex’s health problems, she pursues an active sex life with him.

Popular opinion used to hold that once a woman “dried up,” she had no right to a sex life unless she managed to keep her husband. Even then it was assumed that she would tolerate her husband’s infidelities because he had the right to an active sex life for as long as possible. If her desire was low, doctors assumed it was a result of hormonal deficiency rather than inadequate stimulation by an inattentive partner.

**Part Time Lovers**

One of the things I tell women is that the pattern of falling in love and riding off into the sunset together is old programming. It is unnecessary to burden a fine sexual relationship with all the trimmings of a traditional marriage, especially since there are no young children to raise and finances can be complicated. Many people chose not to remarry and make various types of creative arrangements with lovers. Clearly they are setting new models for intimate relationships because many older lovers are choosing to live separately and lead multifaceted lives.

*Catherine*

Such a choice was made by Catherine, who was suddenly widowed by her husband’s heart attack when she was fifty-six. She was struggling with the idea of starting to date after an intense period of mourning. She had worked through her grief in therapy and now wanted to resume a sex life. “I have needs,” she said quietly, as if it wasn’t quite respectable for a female of her age to desire a sex partner. As she began to date widowers, she was dismayed at how emotionally needy these men seemed to be.

It became clear to Catherine that she did not want to remarry, at least for the foreseeable future but the men she dated always wanted move in with her after a short time. As Catherine strengthened her resolve to maintain her independence while choosing to seek male companionship on a part-time basis, she was able to develop a satisfying sexuality. Later, she told me that she was able to enjoy some of the best sex of her life without any strings and without having to deal with all the difficulties of living with a man. She was wined and dined and courted in ways that allowed her to blossom into a mature, erotic beauty.
**Older Women, Younger Men**

Among sexual options available to the current Crone pathfinders is the choice of considerably younger men as part-time lovers or even mates.

By choosing a younger sexual partner, women are asserting their sexuality in ways they could not imagine years before. The trend reflects that current Crone women have internalized the sense of permission to have active sex lives with men who appreciate their assertiveness and sexual self-knowledge. Society may still frown on older women with younger men, but the women who have empowered themselves to act on their sexual desires find this avenue highly gratifying. As long such women feel honored, the elevated self-esteem and healing sexual pleasure is deeply rewarding.

**Teresa**

After being in therapy for some time Teresa stated, “I used to hate being single, but now that he left me, I am enjoying my freedom to choose a much younger sexual partner.” Her husband had felt threatened by her high desire for sex. For years he had attempted to make her feel abnormal if she approached him for sex when he was not “in the mood.” I had been helping her with issues of being seen as a “slut” as a result of not conforming to societal standards. Teresa was a successful professional woman with her own business, yet judged by some of her peers as if her free sexuality negatively defined her worth. She was working towards internalizing permission to be sexually empowered to enjoy her younger partner.

She finds that she can be more aggressive in her sexuality with her new partner who appreciates her strong sexual self-esteem. The fact that she is a woman who loves sex is valued rather than denigrated.

**Polyamory**

The emerging movement espousing “loving more” has enormous potential for older women whether they are in long-term marriages, single and/or in non live in relationships when there is a desire for more fulfilling sex. This suggestion is so “out of the box” that I don’t mention it unless I have a receptive audience. The following is a woman who struggled with her options for over two years before making this choice.

**Nancy**, age 59: “I never imagined that I’d be feeling so full of sexual feelings, so interested in sex and so alive to pursuing possibilities. Two years ago, I just quit trying to make sex happen for my (much older) husband. It just didn’t work for me to be trying so hard to help him get erect, only to have him penetrate immediately, grind away and maybe not even come. There wasn’t anything pleasurable about it. But now that I’ve found a younger lover, the sexual energy I feel is incredible. I won’t leave my husband and will nurse him through his decline, but I will not allow myself to die inside.”

And so we have a myriad of possibilities with older women and I think there is a tremendous potential for giving them some really good news about their sexuality beyond midlife.