

MEANINGS ABOUT SEXUALITY IN WOMEN WITH FIBROMYALGIA: RESONANCES OF RELIGIOSITY AND MORALITY¹

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ABSTRACT. Fibromyalgia is a predominantly female rheumatologic syndrome that may lead to losses in different spheres of life. Therefore, researches on the sexuality of this population has been developed, focusing, above all, on its objective aspects. However, sexuality is also affected by more subjective factors, of psychological and sociocultural origin. Thus, this study aimed to understand the resonances of religiosity and morality in meanings about sexuality in a group of women with fibromyalgia. This paper is part of a broader research and was determined by the occurrence of results that were not sought directly. This study was based on the clinical-qualitative method propositions, and had the participation of six women with a diagnosis of fibromyalgia. Data were collected in a psychoanalytic discussion group. Audio recordings of the group meetings were transcribed and constituted the *corpus*. They were examined according to the methodological procedures established by content analysis. Results demonstrate that meanings about sexuality from most participants are sharply influenced by restrictions established by the Christian doctrine and the so-called 'civilized sexual morality'. Those restrictions are not related to the syndrome itself, and this may explain why they have been rarely explored in specialized literature. Therefore, it is recommended, for the sake of comprehensive care, that health professionals and researchers, when working with women with fibromyalgia, pay greater attention to the possible resonances of religiosity and morality in meanings about sexuality.

Keywords: Fibromyalgia; female sexuality; women's health.

SIGNIFICADOS SOBRE SEXUALIDADE EM MULHERES COM FIBROMIALGIA: RESSONÂNCIAS DA RELIGIOSIDADE E DA MORALIDADE

RESUMO. A fibromialgia é uma síndrome reumatológica predominantemente feminina e que pode acarretar prejuízos em diferentes esferas da vida. Desse modo, pesquisas sobre a sexualidade desta população têm sido desenvolvidas, com foco, sobretudo, em seus aspectos objetivos. Porém, a sexualidade é atravessada também por fatores mais subjetivos, de ordem psicológica e sociocultural. Assim, este estudo teve como objetivo compreender as ressonâncias da religiosidade e da moralidade nos significados sobre sexualidade de um conjunto de mulheres com fibromialgia. Trata-se

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do recorte de uma pesquisa mais ampla, determinado pela ocorrência de resultados que não foram visados diretamente. O presente estudo foi norteado pelas propostas do método clínico-qualitativo e contou com a participação de seis mulheres com fibromialgia. A coleta de dados teve como *locus* um grupo psicanalítico de discussão. As gravações em áudio dos encontros do grupo foram transcritas e constituíram o *corpus*, tendo sido examinadas segundo os procedimentos metodológicos estabelecidos pela análise de conteúdo. Os resultados revelam que os significados sobre sexualidade, entre a maioria das participantes, são acentuadamente influenciados por restrições estabelecidas pela doutrina cristã e pela denominada 'moral sexual civilizada'. Tais restrições não dizem respeito à síndrome propriamente dita e, talvez por essa razão, têm sido pouco exploradas na literatura especializada. Logo, recomenda-se, em prol da integralidade do cuidado, que profissionais de saúde e pesquisadores, no trabalho que desenvolvem junto a mulheres com fibromialgia, dediquem maior atenção às possíveis ressonâncias da religiosidade e da moralidade nos significados sobre sexualidade.

Palavras-chave: Fibromialgia; sexualidade feminina; saúde da mulher.

SIGNIFICADOS SOBRE SEXUALIDAD EN MUJERES CON FIBROMIALGIA: RESONANCIAS DE LA RELIGIOSIDAD Y LA MORALIDAD

RESUMEN. La fibromialgia es un síndrome reumatológico predominantemente femenino y que puede acarrear perjuicios en diferentes esferas de la vida. De esa manera, investigaciones sobre la sexualidad de esta población han sido desarrolladas, con enfoque, sobre todo, en sus aspectos objetivos. Sin embargo, la sexualidad también es afectada por factores más subjetivos, de naturaleza psicológica y sociocultural. Así, en este estudio se tuvo como objetivo comprender las resonancias de la religiosidad y de la moralidad en significados sobre sexualidad en un grupo de mujeres con fibromialgia. Se trata del recorte de una investigación más amplia, determinado por la ocurrencia de resultados que no se buscaron directamente. El presente estudio fue norteado por las propuestas del método clínico-cualitativo y tuvo la participación de seis mujeres con fibromialgia. La recolección de datos tuvo como *locus* un grupo psicoanalítico de discusión. Las grabaciones en audio de los encuentros del grupo fueron transcritas, constituyeron el *corpus* y fueron examinadas según los procedimientos metodológicos establecidos por el análisis de contenido. Los resultados revelan que los significados sobre sexualidad, entre la mayoría de las participantes, son fuertemente influenciados por las restricciones establecidas por la doctrina cristiana y la llamada 'moral sexual civilizada'. Tales restricciones no se refieren al síndrome propiamente dicho y, tal vez por esa razón, han sido poco exploradas en la literatura especializada. Por lo tanto, se recomienda, por el cuidado integral, que los profesionales de salud y los investigadores, al trabajar con mujeres con fibromialgia, dediquen más atención a las posibles resonancias de la religiosidad y de la moralidad en los significados sobre sexualidad.

Palabras clave: Fibromialgia; sexualidad femenina; salud de la mujer.

Introduction

The clinical presentation of fibromyalgia basically combines chronic pain - musculoskeletal, generalized and of non-inflammatory - and disturbances in memory, attention, mood and sleep (Häuser & Fitzcharles, 2018). It is a rheumatic syndrome prevalent in women, especially middle-aged, since it affects 2.4-6.8% of the female population and 0.2-6.6% of the general population, according to Marques, Santo, Berssaneti, Matsutani and Yuan (2017). In most cases, complete remission is rare, so symptoms tend to cause severe and persistent damage in different spheres of life (Martinez et al., 2017). For this reason, the scientific community has devoted increasing attention to the impact of fibromyalgia.

As a consequence, it is sufficiently established that many patients affected by the syndrome show changes in sexual frequency and satisfaction, so it is admitted that fibromyalgia commonly has a negative influence on female sexuality (López-Rodríguez et al., 2019; Collado-Mateo, Olivares, Adsuar, & Gusi, 2020; Blazquez, Ruiz, Aliste, García-Quintana, & Alegre, 2015; Burri, Lachance, & Williams, 2014). However, a literature review undertaken by Centurion and Peres (2016) points out that, in researches focused on the subject, there has been predominant: (1) the use of quantitative approaches, (2) the use of self-report instruments and (3) the emphasis in sexual dysfunction. And the authors warn that this fact can be considered problematic, since the mere measurement of difficulties related to the sexual intercourse does not allow the exploration of the multiple facets of sexuality, thus reducing it to its most objective aspects, especially concerning to the organic plan.

In addition to this, it seems reasonable to propose that the aforementioned biological reductionism may lead to the establishment of a cause-effect relationship between fibromyalgia and the 'sexual problems' presented by many patients, which would be, at least, controversial. After all, sexuality is also affected by more subjective factors, of psychological and socio-cultural origin. Knowledge from the field of history, for example, demonstrates that, in Western culture, sexuality has been influenced by Christianity⁵ throughout the ages. For Vainfas (1992), the equivalence established by the Christian doctrine, namely from the 16th century, between femininity and maternity, which, to some extent, still limits to reproduction the main purpose of the sexual intercourse, particularly for women.

Since its origins, Psychoanalysis has criticized the sexual regime imposed on women based on Christianity. Such criticism, as Santos and Ceccarelli (2010) observed, rests on the premise that, in contrast to what many religions defended and still defend, sexual deprivation represents a remarkable source of psychological suffering, even for men. The text "*Civilized' sexual morality and modern nervous illness*", is emblematic in this sense. In it, Freud (1996a) asserted that people in general would suffer a 'harmful suppression' determined by the demands of civilization, which would only allow sexual activity practiced in favor of reproduction in the context of a marriage. However, the author warned that there would be, in reality, a 'double morality', since male transgressions would be more tolerable than female ones. And this fact, for Freud, attested that society itself often does not consider the restrictions that it proclaims regarding sexuality to be feasible.

Birman (1999) emphasized that Psychoanalysis, already at its emergence, distanced itself from sexology in the second half of the 19th century, which addressed sexuality

⁵ It should be noted that Christianity has several branches. A detail about it goes beyond the scope of the present study. However, it should be clarified that the unanimity for different Christian groups is faith in Jesus Christ. In this way, both catholics and evangelicals are adepts of Christianity.

exclusively in the register of behavior and considered the biological maturation of genital organs as a precondition. According to the author, Freud, despite having met a great resistance in the medical environment, maintained that sexuality has autonomy regarding reproduction, as it would have the essential objective of obtaining pleasure, and emphasized that there are multiple possibilities regarding its manifestation. Therefore, femininity and masculinity could not be qualified as conditions restricted to women and men, respectively, as indicated, based on different arguments, works such as 'Three essays on the theory of sexuality' (Freud, 1996b), 'The dissolution of the Oedipus complex' (Freud, 1996c) and 'Some psychological consequences of the anatomical distinction between the sexes' (Freud, 1996d).

On the other hand, it is necessary to point out that, in the text 'Female sexuality', Freud (1996e) postulated - perhaps as a reflection of the patriarchalism in force at the time - that the sexual development of women and men would gravitate towards the presence/absence of the phallus. This position has been questioned, including in the context of Psychoanalysis. Birman (1999), for example, did so by establishing approximations between the women of today and the title character of the opera *Carmen*, by Georges Bizet, although it premiered in 1875. For the author, *Carmen*, in a transgressive way, signaled that female sexuality, more than negatively due to the lack of the phallus, would be shaped positively by the desire of women, as well as illustrated that, through the exchange of affection in equal conditions between men and women, both the sexual intercourse itself and the loving relationship could be more ludic. And these would be indicators of the new version of the feminine built by the reinterpretation, beginning in the 1980s, of the theses developed by the feminist movement in the previous two decades.

Valença (2003), in turn, explored certain intersections of Psychoanalysis with other disciplines, seeking, with this, to elucidate some nuances of sexuality in contemporary times. The author distinguished herself by discussing the narcissistic culture and its consequences for women, and from this perspective, she argued that the female body would be excessively eroticized today, as it would have the *status* of object of consumption. Consequently, the 'body-sex woman' would emerge as a new reference of the feminine, according to which sexuality should be enjoyed without limits. However, it would be a reference that, being inaccessible to many women, would imply psychological suffering, or, being experienced, would lead to a feeling of emptiness.

Also starting from Psychoanalysis, but without being restricted to it, Costa (2004) added original contributions to the debate on sexuality by underlining that, nowadays, images have a value *per se*, so that the contemporary subject has become "[...] a passive spectator of a world of appearances" (p. 227). As a result, the body - namely the female body, according to our understanding - is considered worthy of the interest of others only as a young and healthy person, in addition to presenting itself with a 'façade' compatible with current trends, offering itself as a product. The author also defended that this would happen because from the filters established by the mass media, it would be learned the most appropriate way to love, relate emotionally or live sexually.

In short, different knowledge highlights the fact that sexuality is permeated by subjective factors. In order for them to be more fully contemplated in researches on the sexuality of women with fibromyalgia, Centurion and Peres (2016) recommend the use of qualitative approaches. Furthermore, they suggest that the use of data collection strategies capable of offering broad freedom of expression to participants is capable of contributing to the advancement of scientific knowledge currently available by fostering more nuanced

investigations. Nevertheless, the literature review carried out for the purposes of this study reveals that researches with such characteristics is scarce.

In one of these researches, Mazo and Estrada (2019) found, through interviews, that women with fibromyalgia often bear a grudge from their partners' skepticism about the symptoms they suffer from, and that this generates negative sexual impact. Jiménez et al. (2017) found, based on data collected in focus groups and interviews, that the sexuality of patients affected by the syndrome, in addition to chronic pain, tends to be affected by determinants that are difficult to objectify, such as feelings of fear and fault. And García-Campayo and Alda (2004), also using focus groups and interviews, also found that fear - in this case, specifically fear of pain - was pointed out as the main responsible for the decrease in sexual frequency experienced by women with fibromyalgia.

Despite the relevance of these qualitative researches, as well as the quantitative researches cited and problematized previously, new studies on the sexuality of patients affected by the syndrome are necessary, even to support - as recommended by specialized institutions, such as the European League Against Rheumatism (Macfarlane et al., 2017) - the development of multidisciplinary interventions guided by the perspective of comprehensive care. However, issues related to sexuality have generally been neglected in the context of the treatments offered to this population, although they cannot be separated from other components of anyone's life (Bazzichi et al., 2012).

In view of the above, we undertook a qualitative research focused on the sexuality of women with fibromyalgia. The present study is part of this broader research and aimed, more specifically, to understand the resonances of religiosity and morality in meanings about sexuality in that population. This focus is justified considering that the results related to this particular topic derive, in our understanding, from the phenomenon known as serendipity, since they can be qualified as accidental scientific discoveries. This is because, as will be detailed below, they were not directly targeted, but, having arisen, they turned out to be interesting and original.

Beforehand, however, it is worth clarifying that the participants, until a certain point in the data collection, had not expressed themselves regarding religious or moral issues, and when they did, they were properly embraced by the responsible researcher in order to avoid any constraint to their freedom of expression. Additionally, we consider pertinent to explain that the terms 'religiosity' and 'morality' are used in this study in line with definitions offered by general dictionaries, to allude to the adherence to the principles and values recommended by religions or established by current collective consciousness modalities in a given society, respectively.

Method

Methodological design

The present study was developed based on the proposals of the clinical-qualitative method. According to Turato (2013), it is a refinement, aimed at settings of health experiences, of qualitative methods from the Human Sciences. And it should be noted that, according to the author, clinical-qualitative researches typically are benefited from psychoanalytic contributions both as a parameter to enable a clinical posture in data collection and as tools for data analysis. However, the dialogue of knowledge - even taking Psychoanalysis as a starting point - from different fields is valued in clinical-qualitative researches.

Participants

Six women participated in the present study, who met the following inclusion criteria: (1) they had been diagnosed with fibromyalgia for at least six months, (2) they were 40 to 60 years old and (3) they were literate. There were, therefore, no restrictions in relation to other variables in the selection of participants. According to Table 1, most of them were in their 50s and dedicated to household activities, with some diversification in terms of educational level and time of diagnosis. Table 1 also reveals that the majority were married, that all had children and that three of them identified themselves as evangelicals, two as catholics and one as a spiritist.

Table 1. Characterization of participants, according to age, education, occupation, time since diagnosis, marital status, number of children and religion

Participants	Characteristics
Antônia	54 years old, complete elementary school, store clerk (retired), diagnosed 2 years ago, married, 2 children, evangelical.
Ione	56 years old, complete higher education, professor (retired), diagnosed 6 years ago, divorced, 2 children, evangelical.
Márcia	52 years old, complete high school, housewife, diagnosed 20 years ago, married, 2 children, spiritist.
Norma	45 years old, complete elementary school, confectioner/housewife, diagnosed 5 years ago, married, 3 children, catholic.
Rosana	51 years old, incomplete high school, businesswoman/housewife, diagnosed 21 years ago, married, 2 children, evangelical.
Solange	52 years old, incomplete elementary school, vegetable seller/housewife, diagnosed 11 years ago, married, 3 children, catholic.

Note. Fictitious names.

It is necessary to clarify that the information related to religion was given by the participants from the moment when they spontaneously began to discuss religious or moral issues, while information about age, occupation, diagnosis, marital status and children were requested at the beginning of data collection by the responsible researcher. And it should be added that the participants had not been previously asked about their respective religions considering that, as already mentioned, it was not the initial purpose of the research from which the present study derives to specifically explore this topic.

The number of participants was determined by the specificities of the *locus* established for data collection, as it was considered that it would be essential to make eye contact possible and encourage interaction among women. The participants were selected by convenience, that is, due to the ease of access by the researchers, having been recruited from Associação dos Reumáticos de Uberlândia e Região (ARUR). It is a non-governmental organization, recognized as an entity of municipal, state and federal public utility. Its purpose is to offer specialized support to rheumatic patients through cultural activities and health actions. Health actions are carried out at the institution headquarters by a multidisciplinary team composed of physical therapists, nutritionists and psychologists, and aim to promote the quality of life of patients. Psychologists, specifically, are responsible for individual and group assistance, which has taken on different formats over time and are offered according to spontaneous demand or referrals.

Data collection

Data were collected in a psychoanalytic discussion group. According to Emilio (2010), two basic aspects distinguish this group modality from others in which group discussion is used as the main strategy to operationalize the exchange of experiences: (1) because it is developed over a limited and predefined number of meetings and (2) because, precisely due to the previous characteristic, the coordinator must necessarily start the meetings with some activity selected to stimulate associations and, at the same time, to define the theme to be addressed. Activities that can be employed for this purpose range from the presentation of a song or the excerpt from a film to the reading of a text, among several other possible ones, as the author explains.

It is necessary to underline that the literature on psychoanalytic discussion groups is still quite limited, so that the specific theoretical and methodological bases of such group modality have not been described in detail. Doing it here would be unfeasible. However, considering our experience with the development of psychoanalytic discussion groups for research purposes⁶, it has been decisive for the management of the meetings - in order to preserve the coordinator's container function- the use of non-interpretive interventions. Such interventions are notoriously more common in psychoanalytic oriented psychotherapies than in 'standard psychoanalysis' and are anchored in contemporary conceptual developments. In addition, we have been guided by psychoanalytic epistemological premises, according to which the communication of deeper emotional contents depends on granting ample freedom of expression to the interlocutor. And this, in our view, is possible even when not working with the 'traditional' free association, but prioritizing embracement and understanding listening.

A total of four group meetings were held, with approximately one hour and thirty minutes each, on dates and times compatible with the availability of the participants. This number of meetings was defined according to our previous experience with the development of psychoanalytic discussion groups for research purposes. All meetings were coordinated by one of the researchers (the first author of the present study), held at the headquarters of ARUR, and audio-recorded with the prior authorization of the participants. Due to the goal established for this opportunity, the results related to the fourth and last meeting⁷ are

⁶ One of the researches already published, in which we employ psychoanalytic discussion groups as *locus* for data collection is that authored by Silva and Peres (2016).

⁷All six women who participated in this study were present at this fourth meeting. But it is interesting to mention that, just at the first meeting, another woman was present.

specifically considered here, in which it was sought to resume and conclude the discussion on the topic 'being a woman with fibromyalgia and sexuality', which had been initiated in the previous meeting. For this purpose, the song *Amor e sexo* (*Love and sex*), written by Rita Lee and Roberto Carvalho, was used as a trigger.

Data analysis

The audio recordings of the group's meetings were transcribed fully and verbatim, thus constituting the *corpus* of this study. Subsequently, the transcripts were examined - as is common in clinical-qualitative researches - following the methodological procedures established by the content analysis, according to Bardin (2016). They are: (1) floating reading of the data and formulation of initial hypotheses (pre-analysis), (2) aggregation of the data into preliminary categories (exploration of the material) and (3) definition of the categories, demarcation of latent and manifest contents and drawing inferences (treatment of results). The categories, it should be noted, correspond to groupings of reports that are organized by the researchers by frequency deduction, based on the finding of numerical repetitions, or by categorical analysis, from the identification of equivalences and similarities, and the second option was adopted in present study.

Ethical considerations

This study was approved by the Research Ethics Committee of the researchers' affiliation institution (Opinion 1.240.462). All participants formalized their consent by signing a Free and Informed Consent Term, a document that registered the commitment to preserving confidentiality regarding the identity of the participants and offering free brief psychological assistance to provide the ventilation of feelings aroused if the data collection caused any kind of emotional discomfort. Participants were also guaranteed the right to decline participation at any time. However, none of them requested psychological assistance or declined to participate in.

Results and discussion

The categorical analysis resulted in the formation of three categories. In view of the objective established for the present study, one will be considered. This category, in contrast to the others, brings together reports presented exclusively at the fourth and last meeting of the group, during which the song *Amor e sexo* was used as a trigger to enable the resumption and conclusion of the discussion on the theme 'being a woman with fibromyalgia and sexuality', as already mentioned. Nevertheless, this purpose was only partially achieved, as the participants privileged a debate about the reverberations of religiosity and morality in meanings about sexuality. And this occurred from the moment that the verses of the aforementioned song that are seen below were considered in its literality by the participants: "Amor é cristão / Sexo é pagão [...], Amor é divino / Sexo é animal" ("Love is Christian / Sex is pagan [...], Love is divine / Sex is animal").

Report 1 illustrates this fact: "It [sex] is pagan for people who do not know God" (Rosana). And the same applies to Report 2: "I think that love is really divine, it is a feeling that comes from Jesus Christ himself, who had enormous love" (Ione). Such reports obviously refer to the song used as a trigger, however, as well as several others of equivalent content presented in the sequence of the meeting by the other participants, they reveal the

influence of religious and moral precepts that guide the way love and sex are understood by them. Recalling that three participants identified themselves as evangelical and two as catholic, it is concluded that Christianity proved to be predominant among them. It is worth emphasizing that Christian doctrine establishes a rigid stance on sexuality, according to which sexual practice restricted to the 'matrimonial alliance' is framed as a kind of precondition for salvation, as highlighted by Santos and Ceccarelli (2010). Therefore, outside of marriage, chastity - especially on the part of women - is still identified by Christianity as the only possible path towards God, a position that dates back to the 3rd century (Vainfas, 1992).

Report 3 is emblematic of the participants' alignment with the restrictions established by Christianity regarding sexuality: "We want to have sex because we are carnal, but you expect the love of God to make the marriage, and then the sex will come" (Rosana). And Report 4 can be considered the paroxysm of this alignment, insofar as, through it, a participant, who presented herself as divorced, reported that she had resumed the romantic relationship with her ex-husband - who was living in a shed in the back of her house when data collection was performed - but, on her part, the sexual intercourse would depend on the reofficialization of the marriage: "I'm not married to him [the ex-husband]. My religion, from what I learn from the word of God, is that I cannot have sex with someone I am not married to" (Ione).

Therefore, the aforementioned reports are distant from the new figurations of the feminine described by contemporary Psychoanalysis due the work of authors such as Birman (1999). The positive response presented by Rosana to a question from the researcher responsible for data collection ("So, after marriage, does it [sex] stop being a pagan?") even clearly demonstrates that, for her, marriage is capable of transforming the nature of sexual intercourse, mitigating its supposedly sinful aura. Such questioning, it is worth mentioning, was presented by the researcher after Report 5: "[...] people, so, within the word of God, when they are going to relate, get married, sex has to come after marriage, right? Not before" (Rosana). And Report 6 shows that Antonia shares this conception: "It [sex] is not a sin if ... If you do it with your husband, with the person who will have respect for your body, because my husband's body is mine, and mine is my husband's" (Antônia).

The devaluation of women who give in to 'sin' and start their sexual lives before marriage can be pointed out as another aspect of the participants' alignment with the Christian sexual regime. This aspect was highlighted in Report 7: "I think that [when a woman does not marry a virgin] it worsens [marriage], because the woman is no longer valuable. The woman does not have the deserved value that she should have, the man will never value her" (Rosana). We understand that such phenomenon is directly associated with the fact that the satisfaction of the husband's 'sexual needs', for some participants, is part of the wife's obligation list, as can be seen in Report 8: "Poor him [of the husband] [...] We [the wife] have to understand that he has [sexual] needs" (Solange).

Mazo and Estrada (2019), by the way, reported similar results in this regard, as they found that, for many women with fibromyalgia, having sex with their partners is seen as a duty associated with gender. Among the participants in the present study, such position is justified insofar as, according to Report 6, already mentioned, marriage would imply, for both men and women, in the possession of another's body. Thus, the participants seem to agree with the sacramentalization of marriage strategically promoted by Christian doctrine in the 12th century, according to Vainfas (1992), in order to extend the power of the Church to the intimate life of the couple. Norma, however, hinted that sex, perhaps more than an

obligation, would be a differential in marriage compared to relationships of another nature, according to Report 9: "If you don't have sex, [marriage] becomes friendship" (Norma).

Consequently, for some participants, there would be a polarization between genders supported on old representations about the masculine and the feminine. Report 10 is an example of this, as it shows a patriarchal view according to which, in the scope of marriage, it would be up to the husband to take care of his wife, mainly due to the supposed weakness that would characterize her: "He [my husband] takes care of me, I am the wife, so it is right for the man to take care of the woman [...] the woman takes care of the man with the housework, washing, ironing, tidying, giving [sexual] pleasure" (Rosana). However, such care would apparently intertwine with control and dominance, or with possession, according to Report 6, discussed earlier. The wife, in turn, should take care of the household chores and - as suggested by Report 8 and explained by Report 10, both of which already mentioned - sexually satisfy her husband, assuming a submissive posture totally opposite to that which, according to Birman (1999), it is one of the indicators of the feminine in contemporary times.

Report 11 shows that the participants even came to think that love, on the part of men, would have some specificities, as it would be intrinsically linked to sex: "Man's love is lower" (Solange). Or, in other words, eroticism would be the prerogative of the masculine. Nevertheless, the naturalization of man's power has been questioned by some participants, suggesting a certain consonance with the movement to weave new roles and social places for women that has been observed since the 1980s. This is seen in Report 12: "That was what we were all about: marrying as a virgin [...] I grew up with that in my head, and we were submissive, yes. [...] But we want to show our true colors. And everyone says: 'she has shown her true colors. And I am loving it'" (Norma).

This movement, by the way, is anchored in the recognition that the positivization of women's desire does not incur phallic virilization, according to Birman (1999). Report 12, therefore, contrasts with Reports 8 and 10, among others, by emphasizing that the break with sexual ties determined by a rigid 'education', which instituted the submission of women as a basic precept, is something not only possible, but also rewarding for them. The expression 'showing true colors', thus, does not seem to be due to chance, since, having been used by Norma with a positive connotation, it alludes to a movement of empowerment and emancipation that would be able to take her to 'flight high'.

Given the above, it is possible to see how the participants, without being directly asked to do so, engaged in a debate about the unfolding of religiosity and morality in meanings about sexuality. And it is worth clarifying that the reports of most of them refer to what Freud (1996a) called 'civilized sexual morality'. For the author, sexuality, in the first moment of civilization, could manifest itself freely, but in the sake of living in society, an intense repression was made operational through which sexual activity outside marriage and/or whose basic objective was not procreation became unauthorized. Civilized sexual morality would be the result of this process, and, for Freud, it would be in full force at the beginning of the 20th century, generating psychological suffering for men and women.

In our understanding, although more than 100 years have passed since the description of civilized sexual morality, it seems to affect the sexuality of most participants, more or less sharply. Freud (1996a) even pointed out that unjustly civilized sexual morality would be applied more rigorously to women than to men, which gives theoretical support to such reasoning. And it is interesting to underline that, for the author, sexual relations in the context of marriage would not compensate for the restrictions that, before marriage, would be justified in terms of civilized sexual morality, which would lead to marital disillusionment.

Such thesis highlights another possible aspect of the dissatisfaction reported by most of the participants regarding their partners at different times.

Finally, it is necessary to mention that some participants, perhaps mirroring civilized sexual morality, were critical of the existence of a supposed dissociation between love and sex on the part of young people - especially among women - today. Report 13 exemplifies it: "It [sex] [...] is taken too much for these things [prostitution and betrayal]. I'm not talking about religion, but nowadays, young people are very much like that: sex, sex" (Solange). In a sense, such critical attitude can be understood as a radical refusal of the 'body-sex woman' described by Valença (2003) as a new reference for the feminine, as it is anchored in the belief that sexuality should be used by women in a very restricted way to obtain pleasure.

And this belief apparently has as a corollary, at least for Antônia, the valorization of a Platonic love, in terms of which physical approximation would be dispensable, according to Report 14: "We fell in love, right? But I didn't do anything, just looked [...]. You, just looking, your heart was racing, you weren't even close, you didn't have the courage [...] That was love, we just hand in hand and the whole body was already shaking. I think that was love" (Antônia). Such Platonic love is equivalent to that which, according to Costa (2004), was advocated by 19th century bourgeois sentimental education. Therefore, it differs from the corporality that, for the author, prevails today.

In view of the above, it is concluded that, for most participants, meanings about sexuality are notably influenced by restrictions established by the Christian doctrine and the civilized sexual morality. Some, therefore, still seem to consent to a rather conservative distinction between masculine and feminine, while others - a minority - stated that they have sought to experience more freedom, including sexuality. These results reveal, in an unprecedented way, that religious and moral issues, in addition to fibromyalgia, can negatively impact the sexuality of patients affected by the syndrome. Therefore, they add in relation to the findings of previous researches, quantitative or qualitative, such as those developed by Mazo and Estrada (2019), Jiménez et al. (2017), Blazquez et al. (2015), Burri et al. (2014) and García-Campayo and Alda (2004). And the reports presented by the participants in this regard, it is worth reinforcing, resulted from a spontaneous redirection, on the part of them, of the theme of the fourth and last meeting of the psychoanalytic discussion group that was the *locus* for data collection.

It seems reasonable to consider that the results reported here, possibly, would not have been verified as they were had if the song *Amor e sexo* had not been used as a trigger. Despite this, these results were not directly targeted, as already reported. After all, the participants' reports on the topic, it is worth reinforcing, came to light from the moment when four verses of that song were considered in their literality by the participants. And it should be considered that: (1) the verses in question are repeated only once and (2) the song adds up to a total of 50 verses. Furthermore, we understand that the allusion to the notion of serendipity is also justified taking into account that, as previously exposed, the participants presented themselves as adepts of their respective religions only when they started to discuss religious or moral issues.

Furthermore, even if we previously had information about the participants' religion, it would be hasty, in our understanding, to assume that their meanings about sexuality would be influenced by religiosity and morality with such intensity. It is necessary to consider the fact that religiosity and morality determine 'rules of conduct' that can be followed more or less strictly, depending on the level of openness of the individual to the values and principles that give them support, despite self-declared religion. See the case of the so-called 'non-practicing catholics'. Precisely for this reason, the Brazilian religious scenario, in which

Christianity has notoriously prevailed over time, provides a background for the results on this occasion, but it is not enough to fully explain them. In short: we understand that the participants' reports reflect the complexity of the arrangements between psychological determinants and socio-cultural factors around which each person's sexuality can be built.

Final considerations

The present study demonstrates that meanings about sexuality of women with fibromyalgia can be markedly affected by religious and moral issues, which are not related to the syndrome itself and, perhaps for this reason, have been poorly explored in the specialized literature. Therefore, it seems reasonable to propose that the results reported here contribute to the advancement of currently available knowledge on the topic, as well as providing elements to be considered in multidisciplinary care for such population. And we emphasize that the option for a group modality as *locus* for data collection, in our understanding, was decisive for this, as it made it possible to obtain a very fruitful *corpus*, which is why it is recommended in future researches as a way of stimulating the expression of participants.

However, it is necessary to underline that the present study was developed based on reports presented exclusively at one meeting of a psychoanalytic discussion group by a specific group of women with fibromyalgia. Therefore, they are not subjected to statistical generalizations established *a priori* by the researchers. But, as in any qualitative research, possibilities of extrapolating the results to other contexts can be defined *a posteriori* by the scientific community. And this is due to the fact that, if quantitative researches typically privileges external validity, especially related to results, in qualitative researches, on the other hand, there is greater concern with internal validity, related to the adequacy of methodological procedures as a whole in the face of the challenge of enabling an in-depth understanding of the phenomenon in question.

As a conclusion, from the present study it can be extracted the finding that, in the context of the assistance to women with fibromyalgia, it is essential that health professionals value sexuality as an important component of life. In this process, even so that they do not incur a biological reductionism that preclude comprehensive care, they should be attentive to the possible resonances of religiosity and morality in meanings about sexuality. It turns out that such meanings can help each person to organize a series of dimensions of their existence. New researches with this focus can also be considered welcome, particularly if they include the participation of followers of other religions, in addition to those undertaken by the participants of the present study. Such indications are even more pertinent regarding that there is a marked conservative movement in Brazil, driven by the increasing presence of certain religious groups in Brazilian political and media circles.

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