



LGBT Aging and Rhetorical Silence

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Abstract: The exclusion of lesbian, gay, bisexual, and transgender (LGBT) elders from queer and gerontological theories has resulted in the silencing of LGBT older adults and their experiences. Historically, this silencing has left LGBT elders without adequate social or material supports and has isolated them from both the LGBT and the older-adult communities, as well as the agencies serving those communities. The author defines this silencing as a rhetorical move rendering elders invisible in queer theory and queerness invisible in gerontological theory and argues that the producers of queer and gerontological theory, from a position of power within these discourses, silence and ignore LGBT elders' rhetorical activities. The author further argues that although many LGBT elders have worked to arrange material and social supports for themselves and their peers, their activities have become audible only relatively recently, due to the activism of middle-aged and older LGBT members of human service and academic networks.

Key words: LGBT elders; queer theory; gerontology; feminist gerontology; human services

As a student of gerontology¹ and a lesbian, I have been aware for some time of the dearth of research and theory about the lives of older lesbians, gay men, bisexuals, and transgender (LGBT) individuals.² In spring 2007, I took a course titled Queer Rhetoric³ that included some literature about queer activism and queer theory. While studying these materials, I realized that LGBT elders have been excluded from queer theory in much the same way as they are excluded from the LGBT community and from gerontology.

In many ways, I felt that even I was being excluded from queer theory and from queer identity, because I saw

myself as not queer enough to be part of the queer community I was reading about in the context of that class. Perhaps I felt this way because I do not consider myself truly postmodern⁴ or radical, as queer theorists claim to be. Although being young is not a prerequisite for being postmodern or radical in one's thinking or politics, I did feel that my age played some role in this self-perception. I was just 41 years old; I can only imagine that other LGBT adults, even older than I, might also feel excluded from a community that identifies as queer, radical, or postmodern. For older LGBT adults, the term *queer* may have such negative connotations that it automatically makes them feel shut out of both queer theory and the larger queer community. Queer has not always been a positive point of identity for people in the LGBT community; for older individuals, the term *queer* may have been used to

1 Gerontology is the study of aging and the effects of aging.

2 Although I refer to LGBT older adults throughout this article, I am aware that I focus on lesbians and gay men for the most part, contributing to the silencing of transgender and bisexual older adults. I acknowledge this shortcoming in my discussion of muted groups.

3 In this context, *queer* refers to the politics of alternative sexuality or gender identity and rhetoric refers to "the study of methods employed to write or speak effectively and persuasively" (Encarta, 2009, definition 5).

4 *Postmodern* in this context refers to scholarship that challenges social constructions involving categorical thinking and that examines nontraditional or nonheteronormative social structures or identities. Postmodernism "assumes and celebrates the irreducibly pluralistic character of humanity and culture" (Seidman, 2004, p. 196).

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humiliate and shame them, and the violence behind that word may have made it difficult or impossible for them to be open about their sexual orientation.

In effect, the exclusion of LGBT elders from queer theory and gerontological theory has resulted in the silencing of LGBT older adults and their lived experiences. This silencing has historically left LGBT elders without adequate social (Cahill, South, & Spade, 2000; Cantor, Brennan, & Shippy, 2004; Dill, 2004; Gabbay & Wahler, 2002) or material supports (Cahill et al.; Cahill & South, 2002; Woolf, 2001), and has physically and socially isolated them from both the LGBT and older-adult communities, as well as the human service agencies serving those communities (Cantor et al.; Cook-Daniels, 1997).

I propose to define this silencing as a rhetorical⁵ move, whether intentional or as a by-product of discourse, that renders elders invisible in queer theory and queerness invisible in aging or gerontological theory. I will argue that the producers of queer and gerontological theory, from a position of power within these discourses, both silence and ignore the rhetorical activities of LGBT older adults. I do not claim that queer theorists or gerontological theorists silence queer aging in an intentional attempt to exert some new form of social control over this population. Rather, I argue that this silencing is an extension of homophobia and heterosexism in gerontology and ageism in queer theory. The logic informing these claims will become clearer as I analyze the silencing of queer elders in these two disciplines. I will further argue that although many LGBT elders have worked for some time to arrange material and social supports for themselves and their peers, their activities have become audible only relatively recently, due to the activism of middle-aged and older LGBT members of human service and academic networks. This increase in LGBT aging activism has allowed LGBT elders to make themselves and their rhetorical activities more visible or audible to the larger LGBT and aging communities.

I will begin by discussing Cheryl Glenn's (2004) analysis of silence as a rhetorical act, the effects of this rhetorical act on social and academic practices, and the creation of LGBT elders as a muted group, and by offering an interpretation of Foucault (1978) on rhetorical silence in relationship to human sexuality. I will then explore the silencing of age in the works of queer theorists and the silencing of sexuality in gerontology and feminist gerontology theories. I will conclude my analyses by making recommendations for the integration of these

two theoretical perspectives, with the goal of better understanding the experiences of LGBT individuals over the life course and the experience of aging for LGBT adults.

Silence as a Rhetorical Move

Cheryl Glenn (2004) has provided language and support for an argument about the existence of a rhetoric of silence, through which many groups and individuals are excluded from the dominant discourse and, thereby, from the creation of culture. In asserting that "silence is an absence with a function, and a rhetorical one at that" (p. 4), Glenn has posited that dominant groups use the rhetorical move of silence to erase marginalized groups by rendering their experiences invisible; she has concluded that the individual members of these silenced groups are rendered powerless. She also allows for human agency by acknowledging that individuals of these marginalized groups also engage in the rhetorical act of remaining silent, whether by choice or by necessity.⁶

Glenn (2004) has explored the role of silence and silencing in shaping gendered power structures through the exclusion of women and their own rhetorical activities, as well as the construction of silence as a gendered trait—feminine, passive, obedient, stupid, empty, and oppressed. This rhetorical use of silence is the one of most interest to me in my argument about LGBT elders—that gerontological and queer theorists silence this group in their relevant discourses, thus rendering them invisible and powerless. At the same time, LGBT elders in the real world (as opposed to the theoretical world) may choose to remain silent about their sexual orientation or gender identity for a variety of reasons. Glenn has claimed that silence has not previously been considered a rhetorical act, even as society has emphasized the belief that speech is a human ability or a gift from the gods. Instead, she has argued, "silence is too often read as simple 'passivity' rather than an act performed in relation to power" (Glenn, p. xi). Moreover, she has disagreed with the idea that "silence is nothing" (Glenn, p. 3) and has argued that silence functions both to reveal speech and to perform its own rhetoric, which makes silence equally important as a communication.

Glenn (2004) has described silence as the absence of sound, something individuals or groups perform either because they are silenced by power, because groups or individuals in power do not listen to them, or because

⁵ Encarta (2009) defines *rhetorical* as "relating to the skill of using language effectively and persuasively" (definition 1).

⁶ Although Glenn (2004) has explored many reasons for choosing silence, including the choice of silence as a rhetoric of privilege among members of the dominant culture, these other aspects of silence are not salient to the topics I discuss in this article.

they choose silence as an expression of anger, resistance, unconscious response to trauma (paraphrasia), or mere forgetfulness. Glenn has asserted that silence is not always a matter of conscious or unconscious choice; sometimes it is imposed on the person remaining silent. However, assuming that people are always communicating, silence itself is also a form of communication. Silence can be seen as many different forms of communication, depending on culture or circumstance: as “absence of the spoken word, as presence of nonverbal communication, as strategic choice, or as imposition” (Glenn, p. 15).

Glenn (2004) has provided historical accountings of the systematic exclusion or silencing of parties lacking social or political power, such as in the forming of the Athenian state (in which citizenship and voting rights were offered only to very specific groups). Even as Glenn lists the groups excluded in this example, she excludes other groups from that list, rendering them invisible to history. Although it is impossible to mention every group in an argument, it is not always clear why certain groups are excluded. Perhaps the groups Glenn excluded in her example are those that are not traditionally summoned to arguments about political power, such as children, and so she did not see them as being silenced in this context. If these groups have always been excluded, is continuing to silence them a consequence of their historical exclusion? Or is the rhetorical move as simple as silencing groups that distract from the power of a specific argument?

I see this move being made by many of the authors I chose to analyze in this project. By pursuing their own agenda of identifying the ways in which marginalized groups of interest have been silenced, each of these authors, whether intentionally or as a by-product of their rhetorical argument, have silenced other groups within the very population they are attempting to empower. As Glenn (2004) has stated it, “We all unname even as we rename” (p. xxi).

Glenn (2004) also has analyzed the rendering of God as masculine in Western religion. By specifically not mentioning woman, religion renders women inconsequential and unworthy of scholarly or cultural inclusion. Likewise, using masculinity as the unmarked gender in Western society, or using man as the normative and central figure in the social construction of reality (Halberstam, 2005), works to silence and erase women by referencing the normative male or masculine figure through such generalized terms as *person* or *people* (Glenn).

Glenn (2004) also has explored the concept of muted groups, meaning the “systematic estrangement of some groups from the production of cultural forms” (p. 25), and has proposed a methodological framework

for the analysis of “any set of asymmetrical power relations” (p. 25). This argument forms the basis for my questioning the assumption that LGBT older adults are included in the category *elders* in gerontological studies, or that older adults are included in the category *queer* in queer studies. By failing to specify them in either context, LGBT elders and their lives are indicated as unworthy of consideration in both disciplines.

Glenn (2004) has postulated that the dominant group in any social hierarchy renders subordinate or muted groups inarticulate by excluding them from “the formulation, validation, and circulation of meaning” (p. 25). These muted groups are the same groups that would be anecdotally recognized as “the traditionally disenfranchised” (Glenn, p. 25)—such as women, racial and ethnic minorities, sexual minorities, and so forth. Muted groups are rendered silent and denied access to the creation of cultural forms. I argue that theory, as a cultural form, serves to influence perceptions of specific populations and experiences. In other words, theory makes individuals visible to others, as well as to themselves.

Furthermore, I argue that silencing LGBT elders in both queer theory and gerontological theory excludes them from the creation of this cultural form, as well as from the possibility of accumulating cultural capital for themselves and for the generations of LGBT people that follow them. Cultural capital, as defined by Bourdieu, is transferred and accumulated via the dominant discourse:

The embodied cultural capital of the previous generations function as a sort of advance (both a head start and a credit) which...enables the newcomer [and his or her future generations] to start acquiring the basic elements of the legitimate culture from the beginning, that is, in the most unconscious and impalpable way....Legitimate manners owe their value to the fact that they manifest the rarest conditions of acquisition, that is, a social power over time which is tacitly recognized as supreme excellence. (Bourdieu, as cited in Glenn, 2004, pp. 27–28)

If one has no cultural capital (i.e., academic authority) in a field of study or discipline, one cannot influence the discourse on that topic. In the academic disciplines discussed here, LGBT elders have no cultural capital. Gerontology, for example, is a conservative⁷ field of

⁷ Gerontology is known anecdotally as politically conservative by some LGBT members of the Gerontological Society of America, and is also conservative in terms of the disciplines dominating the field (i.e., research, psychology, nursing) and the manner of dress at annual meetings (i.e., suit and tie for men, business suits for women).

study in which nontraditional academics (i.e., feminists, lesbians, gays, or transgender individuals) have historically had to remain silent or subservient to accumulate credentials. Even those feminist gerontologists who have published in the field (Ray, 2004; Twigg, 2004) are silent regarding the sexuality of elders, and prescribe to heteronormative theories of aging. Queer theory, on the other hand, is perceived as radical and postmodern. I believe this perception particularly holds true for the ways in which queer theorists challenge dichotomous thinking in terms of gender identity and expression, as well as in how they persistently push the boundaries of both heteronormativity and homonormativity.

Perhaps this need for radical thinking is why the field of queer theory is perceived as being dominated by younger LGBT academics who are more visible in terms of their sexual and gender identities than previous generations. Older LGBT academics may have been habitually silenced in the academy or in mainstream society, or may lack the academic background to engage in theoretical discourse on sexual and gender identity or practices using queer theory. Because of this history of silence and silencing surrounding alternative sexualities or gender expression in the academy, LGBT elders may lack cultural capital to pass on to other academics, who may then silence the elder perspective because they do not see themselves as related to or benefiting from it.

The Effect of Rhetorical Silence on Practice

The theoretical silencing of the LGBT elder perspective both influences and is echoed in academic and human service practices. LGBT elders historically have had to deny their sexual and gender identities to gain access to the social and material supports available to older adults through traditional human service networks. Alternatively, rather than lie about who they are or risk being ostracized if their secrets are discovered, they may choose not to ask for the social and material supports available to heterosexual or nontransgender older adults. In response to this history, LGBT elders have worked for some time to arrange material and social supports for themselves and their peers. These activities have become increasingly rhetorically audible in professional circles, but have only recently become audible in academe. To illustrate the differences in the rhetorical recognition of LGBT aging between academics and practitioners, I will compare the visibility and activism of LGBT members of two national associations in the field of aging: the Gerontological Society

of America (GSA) and the American Society on Aging (ASA).⁸

GSA, a well-established (founded in 1945), research-focused multidisciplinary professional society, defines its principal missions as promoting gerontological education and research and encouraging the dissemination of that research among scientists, practitioners, and decision makers (Gerontological Society of America, 2008). GSA provides a venue where researchers can network on topics of special interest and regulates the formulation and activities of these groups through a three-tiered protocol: proposed, informal, and formal interest groups. Groups must be visibly active (in well-attended gatherings during the annual meeting) at each tier for a number of years before they are allowed to advance their agenda with symposiums or panels targeting their research interests. The Rainbow Research Group, a proposed GSA interest group for LGBT aging issues that was formed several years ago, has recently (in 2008) advanced to the informal interest group stage.

In comparison, ASA is a slightly younger organization (founded in 1954) that targets researchers, academics, students, and policymakers plus a wider population of human service practitioners and administrators, as well as the general public of older adults (American Society on Aging, 2007). ASA offers complimentary membership in constituency groups, which provide opportunities for networking with other members, regardless of discipline. ASA's LGBT constituency group, the LGBT Aging Issues Network (LAIN), has been active for 13 years, provides a quarterly newsletter to members, and boasts a much larger membership list (approximately 350 members) than the GSA Rainbow Research Group. LAIN hosts a wide variety of symposia and panels at ASA's annual meeting and is actively pursuing networking opportunities in the national community of LGBT service providers by establishing a clearinghouse of information on LGBT aging issues, services, and publications—a database recently made available online to the general public. In this way, LAIN seeks to make the needs of older LGBT individuals more visible and to empower them and the agencies that serve them.

I believe that these two examples support the assertion that the rhetorical activity of LGBT elders and their advocates has been made audible in the wider community (ASA and LAIN) through the networking and

⁸ I have selected these examples primarily because I am a member of both associations and can, therefore, offer a member's understanding of how each institution relates to the question of LGBT aging.

activism of individuals and agencies providing services to this population, whereas academic institutions (GSA) tend to control the dominant discourse and silence the rhetorical activities of these groups. Academic institutions exert this control by requiring proof of sustained membership interest prior to formal inclusion in the association's research or publication agendas, as well as through stringent controls on qualifications for presentation at research meetings or for publication in peer-reviewed journals.

For example, papers on LGBT aging research may be rejected from GSA publications based on the absence of random, representative samples of LGBT individuals—samples that arguably are difficult to procure because of the relatively small numbers of LGBT-identified people and the invisibility of these individuals in a homophobic and heteronormative society. In contrast, criteria for inclusion in ASA presentations or publications not only allow for a wider focus inclusive of research, practice, and policy in the field of aging but also offer a forum for the discussion of controversies and developments in aging.

Although ASA's LAIN and GSA's Rainbow Research Group do have certain members in common who publish research based on practical experiences serving LGBT elders in the community, LGBT elders continue to be relegated to the status of a muted group and remain nonexistent or unworthy of attention in the academy (as represented by GSA). As Glenn (2004) put it:

Social power, language power, access to the dominant discourse [such as that obtained through academe] can make many people appear supremely excellent and others appear profoundly inferior [or not to exist at all]. (p. 28)

These muted groups, then—elders who are LGBT and LGBT individuals who are old—either remain silent or, if they choose to speak, are not heard by the dominant groups: gerontologists and queer theorists. Audrey Lorde has maintained that “the essential thing is to hear our own words” (Lorde, as cited in Glenn, p. 29). These words must also be sought out and heard by those who dominate the discourse, in order to put an end to the practice of exclusion through silence.

LGBT Elders as a Muted Group

According to Glenn's (2004) theory on muted groups, muted groups are present in all levels of the social hierarchy, and membership in such groups is not limited to any specific gender, race, sexual orientation, or age. Glenn has referred to alpha, beta, gamma, and lower groups, implying many layers in the hierarchy. I propose that in any layer of the social hierarchy, not

only age but also race, class, gender and gender identity, sexual orientation, and other characteristics, additionally stratify group members. Group members of one type often will dominate the group and engage in rhetorical acts of silence that minimize or render invisible other, less powerful groups. For example, in the LGBT and queer communities, working-age individuals construct cultural representations of what it means to be queer or gay or transgender and, by excluding issues of aging and older adults from these representations, they render the elders among that community invisible.

This exclusionary behavior may be intensified in LGBT communities compared with other groups because these communities have traditionally been less intergenerational in structure. In heterosexual culture, families are composed of multiple generations, and younger people frequently have significant relationships with much older adults within their extended families. Members of LGBT communities, however, often have been rejected by their extended families because of their sexual or gender identities. This isolation from extended family networks limits opportunities for intergenerational relationships. In recent years, LGBT individuals and couples have begun establishing or making visible their own nuclear families, creating opportunities for intergenerational relationships that had not previously been possible and thus offering LGBT older adults greater visibility in the community. Perhaps this shift, combined with the aging of LGBT individuals who are accustomed to being visible, is what will enable these communities to finally hear the rhetorical activities of LGBT elders and their advocates.

Silence can be used by a dominant group to exert control over less powerful individuals or groups in order to protect the hierarchy within society or a segment of society. Glenn (2004) has supported this theory of silence as control by linking her discussion of the silent treatment as a form of torture to Foucault's (1978) explorations of discipline and punishment. Silence can be used rhetorically to communicate an attitude of censure or reprimand, an interaction not necessarily limited to people who occupy different locations in a social hierarchy. Submissive and nonsubmissive subordinates can use silence to communicate obedience in a classroom, for example, or express displeasure through sulking or stylized silence. Glenn has described sulking and stylized silence as adolescent rhetorical moves intended to save face or maintain dignity, or as a reaction to experiencing shame.

According to Glenn (2004), silence can be used to keep secrets, such as when one is trying to protect

one's family from public humiliation or embarrassment by hiding instances of physical or mental incapacity. LGBT individuals who remain in the closet also employ silence—the nondisclosure of sexual identity is intended as a protection from negative repercussions. This observation gives rise to questions about the reasons why LGBT elders might intentionally remain silent.

Today's generation of LGBT elders, especially, may be practiced at protecting themselves from homophobia in mainstream society through silence, because people who identify as LGBT may be denied social and material supports in the larger community of older adults, and people who remain silent about their sexual identity in other areas of their lives may not be able to demand inclusion in the LGBT community. LGBT academics in gerontology may remain silent as a means of protecting themselves in a conservative discipline. Individuals may silence themselves as a way of avoiding the risk of embarrassment; conversely, individuals may be silenced in order to embarrass, belittle, or make them unsure of themselves and their abilities. Glenn has posited—and researchers may also be anecdotally aware—that the experience of being silenced can undermine a person's self-esteem. In this way, long-term silence and silencing can negatively affect elders' ability to resist homophobia and ageism, which in turn could prevent them from breaking their silence about their sexual or gender identity.

Glenn (2004) has likened the use of silence as control or punishment—that is, the silent treatment—to Foucault's (1978) definition of discipline, claiming that the silent treatment meets the definition of torture through the production of pain, the inclusion in ritual, and the creation of spectacle as evidence of triumph over the individual or group being subjected to torture. Glenn also has drawn a parallel between the role of rhetorical silence in controlling muted groups and Foucault's description of what he called the making of individuals through discipline. In other words, silence can be used to punish or torture members of muted groups who insist on being heard, or to discipline and train members of muted groups to identify themselves or behave in ways desirable to those controlling the dominant discourse.

Although Glenn (2004) may not consider Foucault's (1978) discussion of silence to be an analysis of silence as a rhetorical move, Foucault does analyze the imposition of silence on the issue of sexuality as the development of "a new regime of discourses" (p. 27). Foucault has framed silence as the other side of discourse—something that operates alongside, within, and in relationship to the dominant discourse even as the dominant discourse attempts to assert social control through the selective

imposition of that silence. From this perspective, institutions are developed explicitly to discipline the discourse on sexuality, defining which aspects of human sexuality are supposedly natural or normal even as they attempt to silence other aspects of sexuality by ignoring them in the formal discourse. This idea of institutions as disciplinary of human sexuality is also present in Jakobsen's (2005) discussion of the role of family in modern capitalist societies; in this way, both Foucault and Jakobsen are linked to the heteronormative nature of the institutionalized life course (Fry, 2002).

Can a parallel process in the generation of theory be considered? Are queer theorists making a place for that which is ignored in other theoretical disciplines, even as they create their own groups of topics and embodiments that must remain unspoken or risk threatening their conceptualization of queerness—or, in this case, queerness as youthfulness? Could gerontological theorists be similarly invested in shaping conceptualizations of so-called normal aging and, therefore, excluding social- or biomedical-based embodiments that threaten heteronormative definitions of aging? Are theorists intentionally working toward the goal of gaining a stronger footing in the creation of culture capital, or is this tendency a sin of omission from which they can be persuaded?

It is clear to me that awareness of the use of silence as a rhetorical move to marginalize disenfranchised or muted groups, and a breaking of that silence as a result of awareness, is a positive step toward the recognition of the importance of those groups and their experiences in society. I believe that this positive step is occurring even as queer theorists debate the benefits and risks of visibility and hypervisibility and recognize the homonormative and heteronormative social controls that arise in reaction to these changes in LGBT culture.

Ultimately, it may not be possible or even desirable to be completely inclusive in creating either queer or gerontological theory, and there may be reasons to exclude certain groups in a particular context. However, the continued silencing of the even further disenfranchised members of these muted groups indicates a need for theorists to have a deeper understanding of their own use of rhetorical silence in the generation of theory. For example, as I mentioned at the beginning of this article, I am aware that by focusing on older LGBT individuals as a group, I am silencing minorities within that group, such as transgender elders, who face unique medical and financial challenges, or bisexual elders, who face marginalization for exercising choice in terms of selecting sexual partners and who risk exclusion from community depending on the gender of the partners they choose.

The Silencing of Age in Queer Theory

To illustrate the silencing of elders in queer theory, I have focused on publications theorizing about the concept of queer time and place, the interdependency between generations of queer individuals, and the role HIV/AIDS has played in shaping modern gay identity.⁹

Queer Time and Silencing Age

Halberstam's (2005) project sought to position queer time as an alternative to what the author has posited is an artificially naturalized "schedule of normativity" (p. 7) dominated by "the temporal frames of bourgeois reproduction and family, longevity, risk/safety, and inheritance" (p. 6). In terms of gerontological theory, Halberstam is stating that queer time falls outside of and rejects the institutionalized life course. This definition of queer time strives to depathologize those individuals who "show little or no concern for longevity" and "who live in rapid bursts" (Halberstam, p. 4). Halberstam's move to defend the right to live in queer time may be a necessary move in her project. However, this move is predicated on the assumption that all queer subjects living in queer time are young or are choosing an extended psychological or literal adolescence and, as such, that they do not experience, value, or strive for longevity.

Although it is possible that older members of the LGBT community may, like the young, also live in rapid bursts and function outside the temporalities of the traditional labor force or bourgeois life course, Halberstam's (2005) language does not leave rhetorical room for this type of queer subject to exist in queer time (as she has defined it). In effect, she has excluded all old or even middle-aged gay men, lesbians, bisexuals, and transgender individuals from the queer community. Halberstam introduced the concept of queer time by describing how the AIDS epidemic, as a phenomenon, eliminated the second half of life for gay men:

The constantly diminishing future creates a new emphasis on the here, the present, the now, and while the threat of no future hovers overhead like a storm cloud, the urgency of being also expands the potential of the moment and, as Doty explores, squeezes new possibilities out of the time at hand. (p. 2)

⁹ I am aware that in choosing to include the work of certain gerontological or queer theorists in my argument, I am excluding the works of others. Because it is not possible to include all theories in a single analysis, I have limited my choices to those theories that I felt were currently influential in shaping these disciplines and in perpetuating the rhetorical silencing of LGBT elders.

From this perspective, AIDS not only shortened the expected life span for gay men in the United States but also encouraged them to live more fully in the moment—to embrace queer time, or time outside of the normalized and scripted life dominated by family time and other traditional temporalities—due to the loss of that projected future. This conceptualization of time as "the transient, the fleeting, the contingent" (Halberstam, 2005, p. 2) encourages the queer community, whether intentionally or not, to look away from aging as a potential for a given individual's future and to look away from individuals in the LGBT community who are aging or who are old. Halberstam also ignores the increased longevity of people living with HIV/AIDS, a trend resulting from advances in antiretroviral therapies and the use of protease inhibitors (Crystal, Sambamoorthi, Moynihan, & McSpirtt, 2005).

Halberstam's (2005) claim that "queer subcultures produce alternative temporalities" (p. 2) insists that members of these cultures are allowed to believe that they can imagine their lives outside of "the paradigmatic markers of life experience—namely, birth, marriage, reproduction, and death" (p. 2), also known as the institutionalized life course. This conceptualization of queer temporalities, or queer time, ignores the physical, social, and material realities of aging and, in so doing, renders age silent and invisible. By silencing age among queer subjects, Halberstam effectively has marginalized LGBT elders in much the same way as certain populations (Black queers, low-income drug users), she argues, have been marginalized—made expendable because of the manner in which the AIDS epidemic has shortened their life spans.

Halberstam (2005) further has silenced the lives of LGBT elders by ignoring the role that age plays in Reid-Pharr's (2001) argument about the "elevation of white male experience (gay or straight) to the level of generality" (Halberstam, p. 4). Halberstam correctly identifies this generalization as functioning to reduce the experience of Black gays or, as Glenn (2004) would claim, rendering all non-White, nonmale subjects silent and invisible. By identifying this dominant experience as simply White male, however, Halberstam has ignored the other assumptions that accompany the White male figure in the social construction of normality—specifically, that this normative figure is also frequently constructed as middle-class and working age. By ignoring these features of the normative White male figure, Halberstam reproduces normative conceptualizations of age and class. This process occurs in much the same fashion as what Halberstam has identified in the work of Soja

(1989), Jameson (1997), Harvey (1990), and others, who she claims have “actively excluded sexuality as a category for analysis” (p. 5) as a foundational exclusion, ignoring the role or place of sexuality in the very systems these authors set out to critique. I argue that Halberstam, even as she highlights this rhetorical silence surrounding sexuality in other works, makes a similar rhetorical move to silence age in her own critique.

I find Freeman’s (2005) comments on time to be related to Halberstam’s (2005) conceptualization of queer time. Like Halberstam, Freeman has discussed what gerontology defines as the institutionalization of the life course when she refers to life as being shaped by Western modernity. Her identification of the nation-state’s role in creating so-called natural social structures that shape an individual life or determine “what can be lived as a social formation” (Freeman, p. 57) and her discussion of the proscription of “an official timeline” (p. 57) read very similarly to Halberstam’s identification of the normalized and scripted life. In both cases, the authors stress the importance of conceiving of lives that fall outside of these social formations, but in doing so, they ignore the reality that with the passage of time, individuals also age.

Freeman (2005) has referred to rhetorical moves made by the nation-state in silencing certain events in certain kinds of lives by forefronting other lives and events (e.g., births, marriages, deaths). Both Freeman and Halberstam (2005) have rejected the social construction of the institutionalized life course in favor of making visible the many alternative kinds of lives and temporal orders of possible life events. Interestingly, they also both silence, and make invisible, the experience of aging in these conceptions of queer time. In other words, by choosing to silence elder LGBT individuals’ experiences even as they rightfully rebel against the silencing of LGBT lives in general, both authors reinforce that, “most intimately, some human experiences officially count as a life or one of its parts, and some don’t” (Freeman, p. 57).

The difference between Freeman (2005) and Halberstam (2005) lies in Freeman’s exploration of queering what gerontologists have defined as the interdependency between generations in society (the social contract), in her discussion of how Dr. Frankenstein’s monster “join[s] the human scheme of obligations and dependencies” while transcending “the cyclical time of reproduction” (Freeman, p. 60).¹⁰ Here, Freeman has made room for interdependency between generations who are not

10 The monster splits his stitches, dies, and decays into the ground where a little girl grows tomatoes, thus disseminating himself and becoming part of the cycle of life, indirectly nurturing her through the fruit.

biologically connected, such as the different generations in the LGBT community or, as she has worded it, a binding “to queer successors whom we might not recognize” (Freeman, p. 61). This queering of the social contract, then, leaves room for people of all ages in queer time and place—something I do not see in Halberstam’s theories.

Aging and LGBT Identity

The question remains: Why would queer theorists silence aging in queer theory? One possible explanation for this rhetorical move could be the loss of a generation of U.S. gay men through the AIDS epidemic in the 1980s. AIDS certainly changed public perception about homosexuality when the disease appeared in the United States, first by providing a scapegoat on which to blame the advent of the disease and eventually by making the gay and lesbian community visible and audible in unprecedented ways. AIDS also altered the definition of community for most gays and lesbians during that time, creating a form of social contract between the two groups, which once had existed politically and socially independent of each other. But has AIDS rendered old age invisible in queer culture?

Gay men. Dean (2000) has offered an excellent example of the ways in which LGBT society has abandoned the concept of normative aging, through his exploration of the pursuit of HIV seropositivity in today’s young gay male culture:

Thus from the perspective of a young gay man aged, say, twenty-five today, the prospect of chronic or even terminal illness at, say, age forty-five can appear so remote as to offer no deterrent to unsafe sex at all, especially given his individual odds against infection....And in view of American culture’s emphasis on youthfulness, which gay subculture reinforces, the prospect of not having to endure middle age thanks to AIDS may positively encourage sexual recklessness. (p. 140)

This quote raises several questions: Is this perspective one of the manifestations of the denial that psychoanalysis posits that people need for living in so-called reality? Is it possible that today’s young gay men perceive the social death of middle age as equal to the social death that used to accompany HIV-positive status at the beginning of the epidemic? Do they also believe that material death is preferable to that social death?

Dean (2000) has painted AIDS as intrinsic to modern gay identity, as glamorous, and as serving to fetishize latex and to create “positive identification with—even idealization of—seropositivity” (p. 146). This glamorization of AIDS—such as can be seen in the use of buff, sexy

young men in AIDS medication ads in national LGBT news magazine *The Advocate*—feeds into the lookism and ageism so prevalent in gay male society, as does the creation of subcultural HIV-positive heroes, such as Pedro Aamora (Dean), who serve as ego ideals and sources of gay identity.

Dean (2000) has posited that AIDS has become a key ingredient in gay cultural identity, and that “although ‘coming out’ as a person with AIDS entails considerable costs, it nonetheless earns you a quite prominent place in the symbolic order....HIV-positive men tend to be considered gayer than their seronegative counterparts” (p. 147). This reality, in addition to the conceptualization among some gay men that AIDS was “a disease that gave death time to live and its victims time to die, time to discover time, and in the end to discover life” (Dean, p. 152), concurs with Halberstam’s (2005) identification of AIDS as functionally eliminating the second half of life for gay men. This conceptualization underpins Halberstam’s argument for the existence of queer time and ignores the increasing longevity of people living with HIV/AIDS and the rising rates of new HIV-positive diagnoses in older populations (Crystal et al., 2001).

Of course, bringing Dean (2000) into the discussion of silencing age in queer theory opens up several additional questions that I will not attempt to answer here: Is buying into the idea that middle age is undesirable for gay men just denial? Is this ageism merely an extension of the larger U.S. culture’s obsession with youth? Is it an attempt to turn a death sentence into a desirable state, to be in sync with the glamorized AIDS identity, or is it a way to avoid taking responsibility for the decisions that lead to infection? How is this behavior an example of why queer time is not always a desirable relationship to time? Is there a danger in Halberstam’s glamorization of living in queer time? Are people theorizing themselves out of putting an end to the spread of HIV/AIDS in modern gay culture by encouraging each other to step outside the bounds of Halberstam’s schedule of normativity?

Lesbians. Like old gay men in gay male culture, old lesbians also are often ignored or invisible in the larger lesbian community—although this exclusion may result more from ageist assumptions about asexuality or social death among elders than from any identifiable link between this phenomenon and the AIDS crisis. Esterberg (1997) has referred to old lesbians as being beyond “the visible edge of the lesbian community” (p. 121) and has stated that although younger lesbians (age 50 or below) are aware that social networks of older lesbians must exist, there appears to be no connections between those older networks and the larger lesbian community.

In addition, today’s generation of old lesbians (e.g., those born before 1940), may never have felt safe enough to be open about their sexual orientation or relationships, and therefore may never have embraced a lesbian identity or felt themselves to be members of a lesbian community (Kehoe, 1986). In addition to being silenced by current queer and gerontological theory, they may also voluntarily be practicing their own rhetorical move of silence as a form of self-protection from perceived or actual ageism in the LGBT community and homophobia in the older-adult community.

The Silencing of Sexuality in Aging Theory

I will now turn to an exploration of the silencing of sexuality in gerontology and feminist gerontology, first by examining the dominant theoretical perspective in this field (the life course perspective), then by looking at some recent publications in feminist gerontology theory, a critical theoretical perspective that I feel should address the absence of sexual and gender identities in its critiques of gerontology as a discipline. Although gerontology is frequently referred to as “data-rich but theory-poor” (Birren & Bengtson, as cited in Bengtson, Burgess, & Parrott, 1997), general theories of aging—such as activity, continuity, and successful aging theories (Chapman, 2005; Utz, Carr, Nesse, & Wortman, 2002)—historically have offered some insight into how social processes of aging can shape the lives of older adults.

These and other general or grand theories of aging have been criticized for being exclusionary meta-narratives rather than offering true understanding of the diversity of aging experiences, as well as for ignoring the heterogeneity among older adults (Bengtson, Rice, & Johnson, 1999). These criticisms tend to focus on issues of heterogeneity in terms of class, race and ethnicity, or gender, but these theories also could be criticized for ignoring heterogeneity among older adults in terms of sexual identity, gender identity, and gender expression. These general theories have recently been supplanted in social gerontology by a theoretical paradigm known as the *life course perspective* (Bengtson et al., 1997).

The Life Course Perspective

The life course perspective provides a macro-level and micro-level framework for understanding the impact of social structures that create and enforce inequality between individuals and groups, as well as the effects that those inequalities can have on individuals throughout the course of their lives—particularly in later life or old age. Even as critical gerontologists challenge the concept of the institutionalized life course that drives this

theoretical perspective (Settersten, 2002), they often fail to recognize or challenge the heteronormative assumptions on which the paradigm is based.

Fry (2002), in her critique of the life course perspective, has described the life course as a scientific construct that must address issues of temporal, individual, sociocultural, and complex phenomena and that encourages the consideration of the life course as a cultural model requiring the examination of the “deep structure” (p. 271) cultural premises on which it is based. One problem Fry sees with the cultural premises underlying life-course theory is the concept of time. She has examined “time as a set of phenomena and explores how these phenomena are appropriate for the study of aging and lives” (Fry, p. 272), and has studied the use of time and aging in the creation of age norms and life stages. Fry has queried how to disentangle temporal and cultural complexities in order to ask more theoretically productive questions, and has raised questions about other phenomena that should be considered in attempting to understand aging and the life course during contemporary times (e.g., How are these concepts changing in postmodern society?).

As inclusive as her discussion is of the cultural assumptions underlying life-course scholarship, Fry (2002) has failed to explore the cultural assumptions of heterosexuality and reproduction as underlying traditional conceptualizations of time and the life course. This failure is also evident in the work of such leading life-course theorists as Dannefer (2003) and O’Rand (1996)—all discussions disregard the idea that some individuals might live so far outside the traditional life course (i.e., they might live in queer time, as Halberstam would suggest) that they are automatically excluded from current models of life-course impacts on later-life experiences.

In her exploration of the life course as a theoretical construct, Fry (2002) has considered several kinds of life courses identified in cross-cultural research: staged life courses, generational life courses, and age-classed life courses. She has asserted that modern (Western) society tends to use staged life courses (i.e., institutionalized life courses) as a method for moving individuals in society through three distinct life segments: childhood and adolescence, adulthood, and old age. These life courses primarily are focused on the work sphere (preparation and education, work, and retirement) as it is understood in modern societies. Fry has discussed the life course as being guided by cultural scripts that still allow for individual flexibility and influenced by norms for organizing and interpreting life trajectories; she has proposed an exploration

of the institutional time structures¹¹ in which individual lives are organized: schedule time, generational time, habitual time, and historical time. Fry also has proposed using the concept of age-time to incorporate the kinds of time that are relevant to lives, including biological time, habitual time, schedule time, generational time, legislative time, historical time, and other kinds of time not yet defined.

Fry’s (2002) conceptualization of the staged life course could be applied in relation to Halberstam’s (2005) conceptualization of queer time, even as Halberstam’s conceptualization of queer time could be applied to complicate Fry’s understanding of the staged life course. For example, Fry’s attempt at inclusivity in terms of identifying institutional time structures that shape individual lives notably excludes the structure of reproductive time and how it is assumed in her conceptualization of the other time structures—an assumption that is a key feature in Halberstam’s critique of heteronormative time. Similarly, although Fry has failed to consider the possibility of living in modern society outside of the staged life course, she has accounted for the experience of aging over time, whereas Halberstam has accounted for nonheteronormative ways of experiencing the life course but has excluded the reality of aging over time.

Halberstam’s (2005) conceptualization of queer time could be expanded to incorporate aging by exploring time structures that do not involve the traditional life course but that do include later-life experiences. For example, queer time could be applied to define a life course that allows for less distinct life segments, to validate a life course that does not follow the traditional chronologies of education and work, or to acknowledge the blurring of boundaries between such life segments as education, work, and retirement. Alternatively, queer time could be expanded to incorporate the experience of aging in the context of nontraditional or nonheteronormative family structures, such as childlessness or adoptive families, or the chosen families constructed by individuals in the LGBT community who lack support from their families of origin.

Heteronormativity in Feminist Gerontology

Although it critiques mainstream gerontology for ignoring racial, cultural, class, or gender heterogeneity in theories of aging, recent feminist gerontological

¹¹ Although it may be relevant to explore the modern histories of sexual regulation and the formation of nuclear families as tools of capitalism in Western society (Jakobsen, 2005), as well as the role that the institutionalized life course plays in manifesting those controls and disciplining modern life, that discussion is beyond the scope of this article.

literature does not seem to concern itself with questions of sexuality or gender identity in relation to age or aging. Theorists in this field reinforce the heteronormativity and gender normativity found in gerontological theory at large because even as they highlight the need for breaking silence about the experiences of aging women, they tacitly ignore transgender older women's bodies, thus silencing the experiences of sexual-minority and gender-minority elders.

Twigg (2004) has been concerned with the absence of the physical body in gerontology in general—and in feminist gerontology in particular. She has used feminist writings to “explore the intersection of body, gender, and age” (Twigg, p. 59) by examining three areas: aging as a subjective experience involving the body, the experiences of frail elders who are receiving intimate personal care, and carework as a gendered form of bodywork. Twigg has set up her arguments by first discussing the physical body, or its absence, in aging studies. Here is the only reference to queerness that I have seen in recent readings on feminist gerontology: Twigg reinforces the idea that queerness and aging do not go together by stating that work on the body is limited to queer studies, which do not include aging. She fails to mention the flipside: that work on aging does not include queer bodies.

Twigg (2004) has explored cultural constructions of the body through processes of identity, resistance, and third-age theories of aging. She has cited postmodernism as the force behind exposing essentializing discourses of the body and has identified a need to examine how social gerontology has avoided the subject of the social construction of the aging body, thus abandoning that body to medicine—an institution that itself is inattentive to questions of sexuality in later life. Twigg has referred to “destabilizing earlier conceptual distinctions between sex and gender” (p. 61), although these concepts are actually becoming more distinct in postmodern feminism and queer theory. She has discussed the reading of negative meanings in the aged body as an implication that the body is the source of problems in old age. This assumption may also hold true in the queer subculture, as evidenced in Dean's (2000) description of young gay men's preference for early death from AIDS over the experience of middle age.

Twigg's (2004) references to the selling of youth and youthfulness in consumer culture, as well as her reading of signs of aging as failure, are echoed in the ageism perpetuated in the LGBT community—which is fast becoming a highly commodified community that emphasizes the importance of youth and beauty, especially for gay males. The gay male experience can be read as very

similar to what Twigg has called the *beauty shop culture*, the perpetual struggle to remain youthful in appearance and the inevitable failure to do so. Gay men may be falling subject to what Twigg has identified as Sontag's (1979) double standard of aging, because their version of male power does not reside (as heterosexual men's does) only in money, status, or social dominance—factors to which some may have lost access by not fitting the masculine stereotype.

Gay men, especially those who do not fit the masculine stereotype, may be aligned with traditional sources of power for heterosexual women, such as sexual attractiveness. If they are thus aligned, aging gay men may risk invisibility similar to that experienced by older women, who are no longer the focus of male attention but who are at the same time hypervisible because they are seen only in terms of their age. If this scenario holds true, it may be one reason for the exclusion of elderly gay men from gerontological and queer theoretical discourses. Similarly, cultural representations of lesbian community, such as *The L Word* (Chaiken, 2008), also emphasize beauty and youthfulness as signs of desirable lesbianism, in addition to the traditional preference for Whiteness as part of that definition of beauty. As the transgender community continues to grow and become more visible, it may come to light that the ageism found in the heterosexual, gay male, and lesbian communities also exists in that community.

Twigg (2004) briefly mentions sexuality in her analysis of gender relations between careworkers and care recipients, but only in terms of the sexuality of the workers—more specifically, the male workers. In this discussion, she attempts to negate the homophobic thinking regarding men who choose so-called women's work but, at the same time, fails to identify the homophobia observed in older men who do not want to be cared for by male workers. Twigg offers no discussion here of the sexuality of the older adults themselves, nor any acknowledgment of the assumed heterosexuality in her discussion of masculinity or femininity. Even though Twigg has written of Foucault's (1978) work on sexuality and has recognized that older adults do still inhabit physical bodies, she appears to recognize them as gendered in keeping with a dichotomous model of gender (never as transgender) but not as sexual, at least not in old age.¹² Because Twigg's main concern is with bodies, it is interesting that she has silenced the sexuality of those bodies.

12 The question of sexuality in elders may be linked to questions about disability and sexuality: If Western society holds to an ideal that only the able-bodied are capable of sexuality, then elders are desexualized because they are no longer perceived as able-bodied.

Ray (2004) has introduced three goddess archetypes of womanhood—virgin, mother, and crone—and has proposed that feminist gerontology must internalize the archetype of crone in its attitudes, research, and methods in order to move into the future of feminist gerontology. Rather than seeking approval from the academy, feminist gerontologists should engage in work that speaks to them and serves their own purpose, as well as the purpose of greater society, in understanding aging. Ray bases her argument on two feminist texts (i.e., Walker, 1995; Woodward, 1995), which she has identified as “crone-like in style and content” (p. 109) even though the authors are of very different ages.

As a humanist, Ray (2004) believes that her role is to turn the eye of feminist gerontology inward, to examine feminist energies in the field of gerontology, and to “generate new energy and direction for future work” (p. 110). Ray first introduces the virgin, mother, and crone archetypes, then argues for preference of the crone stage of development. Even though Ray paints these archetypes as potentially nonlinearly related, or not necessarily correlated with physical development, I am not convinced that she really perceives the archetypes in this way. Her definition of mother and crone imply linear aging and a progression through stages of family and individual development—a very heteronormative model of aging that excludes a range of lesbian experiences.

Ray (2004) believes that the future of feminist gerontology will involve what she has termed *crone consciousness* among female gerontologists and anticipates that the role of crone will inform and direct research and scholarship. Ray has predicted that feminist gerontologists would expect a furthering of the feminist movement through their work, as well as a transformation of the perception of aging women throughout the world: They will “expose the roots of ageism in patriarchal fears and limitations” (p. 119) and, presumably, also in feminist gerontology itself, and these criteria would determine which work feminist gerontologists chose to do in the world. This idealistic future ignores the academic pressures feminist gerontologists face and seems to assume that patriarchy and its hold on the academy will simply give way in the face of crone consciousness. Ray also does not address the heteronormativity in feminism, gerontology, or feminist gerontology—or in her own article.

Conclusion

Recent years have seen increasing awareness of the social and material needs of LGBT elders (Cahill & South, 2002; Gabbay & Wahler, 2002; Grossman, D’Augelli, &

Hershberger, 2000; Woolf, 2001), as well as increasing research into the role of social support and well-being in the lives of LGBT elders (Barker, Herdt, & de Vries, 2006; Herdt & de Vries, 2004). Previous recommendations for theoretical approaches to studying LGBT elders primarily have focused on social-psychological, minority-stress, and life-span development using strength and resilience models, rather than on social gerontology models (Herdt & de Vries). One exception to these theoretical recommendations involves the application of the successful aging model to understanding the lives of LGBT elders (Herdt & de Vries).

The successful aging model focuses on aging from a strengths perspective—on how individuals who age successfully avoid disability and disease, maintain physical and cognitive function, sustain social engagement, and continue to participate in productive activities (Riley, 1998). This model has been critiqued both for its omission of considering the interdependency of institutional environments or social contexts and individual aging processes (Riley) and for its tendency to marginalize minority populations, such as women, people of color, or low-income individuals (Holstein & Minkler, 2003). Herdt and de Vries (2004) have proposed using this theoretical model as a mechanism for identifying and focusing on the risk factors and benefits that affect the ability of sexual- and gender-minority adults to age successfully, inclusive of social context and institutional environments that shape LGBT lives. This application of the successful aging model could begin to explore some of the structural issues that affect an individual’s ability to age successfully, a core issue raised in Riley’s critique of Rowe and Kahn’s (1997) theoretical model.

Perhaps discourses of critical gerontology and queer theory could be used in other ways to enhance understanding of the aging experiences of LGBT individuals. For example, queer theory could be broadened to examine how social location and context affect identity as an LGBT individual ages through the life course, or applied to complicate existing social gerontology theories of aging to highlight their exclusion of sexual-minority experience. Critical gerontology can account for the experiences of LGBT older adults in a variety of ways, including the expansion of the life course perspective to acknowledge a wider variety of potential life paths, which would not necessarily be limited to or inclusive of the tripartitioned life spheres of family, education, and work (Settersten, 2002).

Those in the field of gerontology could broaden their understanding of the social forces shaping the life course to include nonheteronormative models of families, social

networks, and intimate relationships. Furthermore, they could make room for a wider variety of potential turning points across the life course, including events specific to the lives of sexual minorities, such as coming out as gay or lesbian or undergoing sex-reassignment surgery; the social and institutional implications of those events, such as discrimination in terms of employment or housing or exposure to hate-based violence; and the impact of those events on an individual's physical, mental, and financial health. Researchers might consider the role that sexual or gender identity can play in creating heterogeneous aging-related experiences, rather than limiting that understanding to issues of cohort, gender, race or ethnicity, class, generation, or culture. Intersectionality theory could be broadened to account for the ways in which sexual and gender identities intersect with age, race, class, and gender. Finally, rather than perpetuating the misconception of elders as physically and emotionally asexual, the role of sexuality in the experience of aging could be explored.

I have seen firsthand the dedication to meeting the social and material needs of LGBT elders among academics and practitioners in GSA and ASA, as well as in my local community. However, these efforts rarely involve theorizing from either the gerontological or queer theoretical perspective about the social structures that shape the aging experiences of this population. I propose that the needs of this population should be acknowledged on both the theoretical and the practical level, and that theoretical acknowledgment of this population can further the inclusion of these individuals in aging and queer communities.

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References

- American Society on Aging. (2007). About ASA.... Retrieved April 24, 2007, from <http://www.asaging.org/about.cfm>
- Barker, J. C., Herdt, G., & de Vries, B. (2006). Social support in the lives of lesbians and gay men at midlife and later. *Sexuality Research & Social Policy: Journal of NSRC*, 3(2), 1–23.
- Bengtson, V. L., Burgess, E. O., & Parrott, T. M. (1997). Theory, explanation, and a third generation of theoretical development in social gerontology. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 52B, S72–S88.
- Bengtson, V. L., Rice, C., & Johnson, M. L. (1999). Are theories of aging important? Models and explanations in gerontology at the turn of the century. In K. Schaie & V. L. Bengtson (Eds.), *Handbook of theories of aging* (pp. 1–20). New York: Springer.
- Cahill, S., & South, K. (2002). Policy issues affecting lesbian, gay, bisexual, and transgender people in retirement. *Generations*, 26(2), 49–54.
- Cahill, S., South, K., & Spade, J. (2000, November 9). *Outing Age: Public policy issues affecting gay, lesbian, bisexual and transgender elders*. Retrieved March 25, 2009, from <http://www.lgbthealth.net/downloads/research/NGLTFoutingage.pdf>
- Cantor, M. H., Brennan, M., & Shippy, R. A. (2004, June 18). *Caregiving among older lesbian, gay, bisexual and transgender New Yorkers* [Report]. New York: National Gay and Lesbian Task Force Policy Institute.
- Chaiken, E. (Producer). (2008). *The L word* [Television series]. Los Angeles: Showtime Networks.
- Chapman, S. A. (2005). Theorizing about aging well: Constructing a narrative. *Canadian Journal on Aging*, 24, 9–18.
- Cook-Daniels, L. (1997). Lesbian, gay male, bisexual and transgendered elders: Elder abuse and neglect issues. *Journal of Elder Abuse & Neglect*, 9, 35–49.
- Crystal, S., Sambamoorthi, U., Moynihan, P. J., & McSpirt, E. (2001). Initiation and continuation of newer anti-retroviral treatments among Medicaid recipients with AIDS. *Journal of General Internal Medicine*, 16, 850–859.
- Dannefer, D. (2003). Cumulative advantage/disadvantage and the life course: Cross-fertilizing age and social science theory. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 58B, S327–S337.
- Dean, T. (2000). *Safe-sex education and the death drive in Beyond Sexuality*. Chicago: University of Chicago Press.
- Dill, K. (2004). *Lesbian, gay, bisexual, and transgender seniors in central New York: Needs, concerns, demographics* [Survey]. Syracuse, NY: Sage Upstate.
- Encarta World English Dictionary. (2009). Rhetoric. Retrieved June 30, 2009, from http://encarta.msn.com/dictionary/_rhetoric.html
- Encarta World English Dictionary. (2009). Rhetorical. Retrieved June 30, 2009, from http://encarta.msn.com/dictionary/_rhetorical.html

- Esterberg, K. G. (1997). *Lesbian and bisexual identities: Constructing communities, constructing selves*. Philadelphia: Temple University Press.
- Freeman, E. (2005). Time binds, or, erotohistoriography. *Social Text*, 84/85, 57–68.
- Foucault, M. (1978). *The history of sexuality: An introduction*. New York: Random House.
- Fry, C. (2002). The life course as a cultural construct. In R. A. Settersten (Ed.), *Invitation to the life course: Toward new understandings of later life* (pp. 269–294). Amityville, NY: Baywood.
- Gabbay, S. G., & Wahler, J. J. (2002). Lesbian aging: Review of a growing literature. *Journal of Gay & Lesbian Social Services*, 14(3), 1–17.
- Gerontological Society of America. (2008). *Fact sheet*. Retrieved March 25, 2009, from <http://www.geron.org/About Us/Fact Sheet>
- Glenn, C. (2004). *Unspoken: A rhetoric of silence*. Carbondale: Southern Illinois University Press.
- Grossman, A. H., D'Augelli, A. R., & Hershberger, S. L. (2000). Social support networks of lesbian, gay, and bisexual adults 60 years of age and older. *The Journals of Gerontology Series B: Psychological Sciences and Social Sciences*, 55B, P171–P179.
- Halberstam, J. (2005). *In a queer time and place: Transgender bodies, subcultural lives*. New York: New York University Press.
- Harvey, D. (1990). *The condition of postmodernity*. Oxford, England: Blackwell.
- Herd, G., & de Vries, B. (2004). *Gay and lesbian aging: Research and future directions*. New York: Springer.
- Holstein, M. G., & Minkler, M. (2003). Self, society, and the “new gerontology.” *The Gerontologist*, 43, 787–796.
- Jakobsen, J. R. (2005). Sex + freedom = regulation: Why? *Social Text*, 84/85, 285–308.
- Jameson, F. (1997). *Postmodernism, or the cultural logic of late capitalism*. Durham, NC: Duke University Press.
- Kehoe, M. (1986). Lesbians over 65: A triple invisible minority. *Journal of Homosexuality*, 12(3/4), 139–152.
- O’Rand, A. (1996). The precious and the precocious: Understanding cumulative disadvantage and cumulative advantage over the life course. *The Gerontologist*, 36, 230–238.
- Ray, R. E. (2004). Toward the crowning of feminist gerontology. *Journal of Aging Studies*, 18, 109–121.
- Reid-Pharr, R. F. (2001). *Black gay man: Essays*. New York: New York University Press.
- Riley, M. (1998). Successful aging. *The Gerontologist*, 38, 151.
- Rowe, J. W., & Kahn, R. L. (1997). Successful aging. *The Gerontologist*, 37, 433–440.
- Seidman, S. (2004). *Contested knowledge: Social theory today*. Oxford, United Kingdom: Blackwell.
- Settersten, R. (2002). Propositions and controversies in life-course scholarship. In R. Settersten (Ed.), *Invitation to the life course: Toward new understandings of later life* (pp. 15–45). Amityville, NY: Baywood.
- Soja, E. (1989). *Postmodern geographies: The reassertion of space in critical social theory*. New York: Verso.
- Sontag, S. (1972, September 23). The double standard of aging. *The Saturday Review of Literature*, pp. 29–38.
- Twigg, J. (2004). Body, gender, and aging: Feminist insights in social gerontology. *Journal of Aging Studies*, 18, 59–73.
- Utz, R. L., Carr, D., Nesse, R., & Wortman, C. B. (2002). The effect of widowhood on older adults’ social participation: An evaluation of activity, disengagement, and continuity theories. *The Gerontologist*, 42, 522–533.
- Walker, B. G. (1995). *The crone: Woman of age, wisdom and power*. San Francisco: Harper & Row.
- Woodward, K. (1995). Tribute to the older woman: Psychoanalysis, feminism and ageism. In M. Featherstone & A. Wemick (Eds.), *Images of aging: Cultural representations of later life* (pp. 79–96). London: Routledge.
- Wolf, L. M. (2001, December 1). Gay and lesbian aging. *SIECUS Report: Sexuality and Aging Revisited*, 30(2), 16–21.