Gay and Lesbian Aging

Research and Future Directions

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The year 2003 marks the 30th anniversary of the landmark “de-classification” of homosexuality as a disease by the American Psychiatric Association in 1973—a watershed in the lives of gays and lesbians in the United States. It seems fitting at this time to examine how the generation of lesbian, gay, bisexual, and transgender (LGBT) people who led this social movement are themselves now moving into midlife and beyond. Moreover, this occasion provides a unique opportunity to examine how the baby boomers and their peers are confronting the prospects and problems of aging in the United States and other countries. We believe that these critical issues in research and policy have only begun to be addressed by gerontology and the social sciences, and we welcome this opportunity to raise a new agenda in research and policy for the 21st century. The authors in this book have considered major theoretical and methodological questions bearing upon the emergence of well-being at midlife and beyond for gay and lesbian seniors, a much ignored population, as Ray Berger (1982) suggested long ago. The book is purposely interdisciplinary; it brings together psychologists, anthropologists, sociologists, gerontologists, and health providers who have sought to enter a dialogue with the reader in framing a broad and inclusive gerontology in this new century.

This book follows upon a major research conference in 2001 that was dedicated to gay and lesbian midlife and aging and its inclusion in social gerontology. The reader should know the background of this emphasis. Because of the resources available and the lack of identifiable authorities on bisexuals and transgender people, the editors decided to focus specifically on gay men and lesbians; however, it is vital
that subsequent efforts be directed to the broader social and health concerns of LGBT people more broadly.

The meaning of adult development and aging of sexual minorities is little understood in the United States. For the first time in history, a generation of self-identified lesbians, gay men, bisexuals, and transgender individuals are approaching retirement, and yet we know little of the health, mental health, and concomitant special social service needs of this population (as Barker addresses in her chapter). Even less do we understand what well-being and successful development in later life mean in these communities. Moreover, the aging processes among lesbians and gay men who are already in their retirement years, many of whom are still “closeted,” remain invisible.

A recent and modest line of research suggests that some aging gay men and lesbians are facing several unique challenges, including limited access to gay-friendly health care, feelings of invisibility and confrontations with ageism within gay and lesbian community contexts, denial of hospital and nursing home visitation rights for their partners, loneliness and social isolation, internalized homophobia, and accelerated aging. A parallel and equally modest line of research suggests, however, that gay men and lesbians age with the advantage of crisis competence and mastery of stigma, having weathered the trials of coming out and having developed positive self-identities within a homophobic society; the chapters by Kertzner et al. and by Rawls address some of these issues.

The complex web formed by these perspectives and the social policy related to such changes is unknown, as in other areas of LGBT life course development. Unprecedented demographic changes in the United States associated with the “elder boom,” are placing enormous demands on private and governmental social service agencies and health care providers. These demands are particularly acute for those attempting to address the special needs of sexual minorities, and additional research to guide their efforts is sorely needed. Agencies and policymakers are currently scrambling to meet these special needs. The time is ripe for the development of an agenda of research to address the needs of this population in the 21st century.

The HIV epidemic (addressed by Gorman and Nelson in their chapter) has dominated the attention of researchers in the area of sexual minorities and the gay and lesbian public in general over the past two decades. Most recent issues relate to risk and prevention in gay and lesbian communities (Levine, Gagnon, & Nardi, 1997; Paul et al.,
A youth focus (Boxer & Cohler, 1989; Cohler & Galatzer-Levy, 2000; Herdt & Boxer, 1993) has obscured from view lesbian and gay seniors, many of whom remain in the shadows of the lesbian and gay community (Herdt, Beeler, & Rawls, 1997).

Moreover, the attitudes and beliefs of the surrounding culture and the peers of these generations—youth and seniors—make clear the urgent need to study how midlife and senior gay men and lesbians are aging in America. As a recent report (2002) of the Henry J. Kaiser Foundation on the experiences of lesbians, gay men, and bisexuals suggests, a huge difference in positive attitudes exists between the peers of younger lesbians and gay men and their senior counterparts. As the study shows, a high number of younger people are more open and accepting of LGBT people in their schools, churches, and workplaces than ever before. However, individuals age 65 and older are least likely to have accepting attitudes toward LGBT people. Moreover, young people and seniors, according to the report, hold very different views about policy. The great majority of young people aged 18 to 29 support lesbian and gay unions, marriage, and adoptions for LGBT people, while for people over 65 only about 25% support these policies—a huge gulf that defines the problems of each cohort as it adapts to society and finds a foothold in this new century.

**MILESTONES OF GAY AND LESBIAN COMMUNITY EMPOWERMENT**

Social scientists and historians over the past two decades have documented the roots of the gay and lesbian social movement in the United States (D’Emilio, 1983; Herdt, 1997; Kimmel & Sang, 1995; Levine et al., 1997). Institutional forces of discrimination, homophobia, and anti-gay/lesbian violence in the 1960s provided the context for police brutality and harassment, blackmail, hate crimes, and religious persecution directed against homosexuals (Herek, 1995; Herrell, 1992) and ultimately the rise of social movements as a consequence.

San Francisco was the scene in the mid-1960s of the first resistance to this prejudice, as activists were supported by heterosexual allies in fighting back against police harassment (Stryker & van Buskirk, 1996). The Stonewall Tavern riots in New York City in 1969, and the emergence of the AIDS epidemic in the early to mid-1980s approximately 15 years later, frame the most critical social history of midlife and
senior gays and lesbians. Gay and lesbian organizing across North American cities was boosted in the 1970s through the momentous APA “declassification” of homosexuality as a disease, which led to the mobilization of bars, clubs, and social venues to become more openly gay-friendly. Soon thereafter, the mobilization of the women’s health movement was to provide a necessary model for subsequent HIV care and a bridge between the lesbian and gay communities (Rubin, 1997).

Of course, it will not go unnoticed that the cohort of those who experienced these dramatic events is now in midlife or beyond. As so-called baby boomers, many of these people have been engaged in the gay and lesbian social movement which has led the way to significant social changes over the past 30 years: first in their late teens and young adult years during the sexual revolution of the 1960s, when new norms and sexual values were advanced following upon the black power and feminist movements; and then in the 1970s in the formation of a public and politically visible gay and lesbian community in such cities as New York, Chicago, San Francisco, Los Angeles, and others. These communities in turn provided the critical historical and cultural context for the creation of a new developmental cohort of adolescents in the 1980s who, as teens, would self-identify as gay, lesbian, and bisexual youth, some of whom went on to be involved in the gay culture (Herdt & Boxer, 1993).

The HIV epidemic further mobilized and fed this movement: by way of the controversies in the early 1980s and decisions over whether gay bathhouses should be closed (a topic further discussed by Cohler in this volume) and how this would impact the community; through responses to the evolving epidemic and the lack of government and medical support for persons with AIDS; and through more radical movements, such as AIDS ACT UP, in the late 1980s and early 1990s, when the morbidity rate was accelerating in the gay community and as people living with AIDS became distinctly visible (Levine, 1992). The subsequent emphasis upon youth and risk in the late 1980s and 1990s and the increased awareness of people living with HIV gave way to a recognition of the lack of attention to seniors. For example, New York City witnessed the creation of a gay and lesbian seniors group (Senior Action in a Gay Environment: SAGE), as did San Francisco (Gay and Lesbian Outreach to Elders: GLOE, which has since become New Leaf Outreach to Elders), to address issues of aging and care for older members of the gay and lesbian community.
On January 1, 1996, the first boomers turned 50, signaling a dramatic demographic change that will extend not only the longevity of Americans (Morgan, 1998) but also the influence of this cohort beyond smaller, more traditional generations that came before (e.g., Valliant, 2002). In education, career choices, political beliefs, and consumer behavior, the boomers dominated American culture for a half century. As we know from studies of social movements and sexual change and as intimated above, boomers led the second sexual revolution of this century in the 1960s, following the invention of the Pill and the influence of second-wave feminism and related activities driven by the then college-age boomers (D’Emilio & Freedman, 1988). For example, college boomers began to openly resist the taboo on premarital sexual intercourse in the early 1960s, challenging traditional sex segregation in college dorms, and delaying marriage (Moran, 2000). Only recently has the sexuality of the boomers been studied, and it is our hope that this collection will give a significant new impetus to studies of sexuality and romantic relations in the second half of life, as suggested by de Vries and Blando in chapter.

Uncovering the complexities of these effects and experiences is itself a complex enterprise. Over the past two decades social scientists discovered that individual interviews were insufficient in studying the effects of major events or life-changing experiences, such as the AIDS epidemic (Elder, 1980; Farmer, 1999; Gagnon, 1992). For example, in studying HIV, individuals who self-identified as heterosexual were initially passed by in tracking the epidemic and in prevention efforts; only when ethnographic study was used did researchers discover the critical disconnect between sexual identity and sexual behavior. Then too, the puzzling dissonance between knowledge and sexual action that contributed to risk and infection (Diaz, 1998; Parker, Carballo, & Herdt, 1991) became the focus of intense analysis.

During the years of this transformation, gay men and lesbians have moved from a status of individual pathology to group identity (Kimmel & Sang, 1995). Legal and political barriers have prevented formal recognition of partnership, marriage, family formation, adoption, inheritance, caretaking, and a variety of other forms of normative development and support in society. Religions have often stigmatized or excluded homosexuals from their congregations, and some churches
continue to bar their ministers from being homosexual or performing religious ceremonies or functions such as weddings for their lesbian and gay parishioners (Lewin, 1996). Ethnographic studies have shown strong correlations between marginalization, lack of social support, and negative outcomes such as enhanced alcohol abuse (Newton, 1993), increased sexual risk taking (Rubin, 1997), and loss of self-esteem with aging (Herdt et al., 1997). Being without a partner seems to enhance the feeling of loneliness and the use of alcohol as a coping device (Grossman et al., 2000), and further addressed by Hostetler in this volume; Weinstock also addresses the complex issue of social support and network composition in the lives of midlife lesbians). In such respects, a lifetime legacy of sexual prejudice (Herdt, 1995) has plagued the social development of sexual minority people, much as racial prejudice has affected African Americans. The cohort effects upon morale and adjustment have clearly changed with time (Berger, 1982; Kooden & Flowers, 2000; Sang, Warshaw, & Smith, 1991). As this cohort ages and experiences increasing marginalization due to ageism, with concomitant increase in chronic disease, the need for informal care becomes of critical importance.

Sexual citizenship—a construct that describes how citizenship is shaped by and/or denied to those who do not engage in normative and socially accepted sexual behavior and social practices within modern society—has emerged as a significant means of understanding these challenges across societies (Weeks, 1985; Plummer, 1995). This emphasis on sexual citizenship almost always dovetails with a profound emphasis on heterosexuality and reproductive heterosexual marriage with the aim of producing children and grandchildren. As Herdt (1997) has characterized the issue, virtually all cultures known to anthropology have emphasized reproductive heterosexuality in marriage for the production of children and grandchildren as the necessary and desirable aim of social life. Thus the pressure on lesbians and gay men to conform to this norm has profoundly impacted their lives, creating what sociologist/psychoanalyst Nancy Chodorow (1992) has called the “heterosexual compromises” of adapting to our society, even against their own desires and wishes.

More generally this process is known as heteronormativity or “social heterosexuality,” whereby regardless of someone’s actual sexual orientation and sexual practice, one lives by the code of being and acting heterosexual. Thus social heterosexuality is a policy and moral standard that is enforced within the society and that all of society assumes
to be operative. It follows that those who do not marry and have children pay a steep price, and those lesbians and gay men who did not marry heterosexually and bear children were the most obvious and the most vulnerable; Kristiansen addresses some of these issues in his chapter. Of course, women in the prior generation who chose to follow professional careers faced this dilemma from the start. However, we would like to speculate that lesbians who resisted the code of social heterosexuality in the last generation were often punished and denied citizenship in fundamental ways that should be investigated in their aftermath.

A template of self-fulfilling prophecies is thus created—what will go wrong, and what will be lost, through becoming gay or lesbian? Indeed, those expected rights and duties that are incumbent on all persons to achieve full personhood might be completely out of the reach of someone who is openly gay or lesbian. Someone who fails to achieve all of these rights and to carry out these duties and responsibilities is thus denied sexual citizenship as well as full personhood. In the vast majority of all contemporary Western societies, and in the United States in particular, full personhood means being socialized in the direction of erotic and emotional attachments to members of the other sex, with the expectation that one will marry heterosexually, rear a family, and eventually become a grandparent (Herdt & Koff, 2000). Here, once more, the impact of living as a gay or lesbian person under the sign of social heterosexuality is profound and oppressive.

Gay men and lesbians in the past accommodated themselves to, and even were invisible within, the general heterosexual population. We observe that those who came out in the 1960s or 1970s as adults did so often for political or personal reasons that inspired their ability to fight against oppression. Conversely, those who were unable or unwilling to disclose their feelings or relationships in public were saddled with the burdens of discrimination and isolation, while never being able to fight back in public. This difference has important implications for the formation of community building, citizenship, and resilience across the life course.

As the baby boomers move into the second half of life, many of them seem to move into and out of gay and lesbian communities; this movement may derive from health and/or relationship status, or from identification with gay and lesbian communities. Those who live on the margins or who are hidden from communities may suffer as a result. Among LGBT seniors, such transformation is compounded by
the impact of the AIDS epidemic, the loss of cohort support, the cumulative effect of homophobia and discrimination across a lifetime, and fear of aging and ultimately dying in the absence of social support. A small number of studies have shown that these communities, while resilient, are increasingly shunned or excluded from the mainstream of gay and lesbian social life, perhaps because this mainstream is youth-oriented and centers on bars. The double impact of racism and homophobia in LGBT people of color is particularly worrisome and little known. The social policy related to such changes is unknown, as in other areas of LGBT life course development. The demands are particularly acute for those attempting to address the special needs of sexual minorities, and additional research to guide their efforts is sorely needed.

THE ORGANIZATION OF THIS BOOK

This book marks an interesting coming of age of an area of research; at the same time, it necessarily suffers from some of the same limitations of the general literature on gay and lesbian aging, namely, the modest presentation of issues and research on aging lesbians, bisexuals, and transgender individuals. The absence of research in these areas, both in the literature in general and in this book in particular, makes an important empirical point itself. It also makes an important political statement of voices still unheard. Both should be seen as a call to action.

This book is organized into three areas. The first is intended to set the stage by addressing, broadly and somewhat selectively, issues of aging for lesbians and gay men. In the service of this intention, three chapters are included.

The first chapter of Section 1 is written by Brian de Vries and John A. Blando, a gerontologist and clinical psychologist, respectively. De Vries and Blando broadly, yet selectively, review what is known about the social context of gay and lesbian aging and the way in which it is studied. This chapter is useful as an assemblage of empirical research of older lesbians and gay men, and its embedded goal is the elucidation of the particular questions posed in the study of gay and lesbian elders that may have relevance for the study of heterosexual elders as well. That is to say, in studying gay and lesbian lives, researchers have quite naturally adopted stances that may be broadly characterized as more
attuned to the person-environment fit, more sensitive to the cohort effects in which the experiences of older individuals must be placed, and more mindful of the (related) social conditions marking their development. These stances are not (and should not be) restricted to a gay and lesbian gerontology.

The second chapter is by Judith Barker, an anthropologist, who focuses her writing on the situation of older women, aged 65 and above. Barker points out that, given that 75% of all older persons in society are women, older LGBT persons are likely to be lesbians rather than gay men. Notwithstanding these dramatic differences in number, there exist very few published reports about the experiences of older lesbians. Barker summarizes this literature and offers implications for future work on several dimensions: social support, family relations, health, economics and occupation, housing, and access to services.

The final chapter in this section, by E. Michael Gorman and Keith Nelson, both of whom are social workers and public health scientists, addresses the particular issue of HIV/AIDS for older gay and bisexual men. The lesbian and especially the gay communities have suffered greatly under the impact of AIDS and have shouldered a great deal of the burden of care and the work of advocacy. Gorman and Nelson reflect on some of the current HIV/AIDS challenges facing gay and bisexual men in the middle and later years and offer insight into the strengths and resilience by which this cohort of men may be characterized.

Section 2, the largest of the three sections of this book, presents accounts of empirical research into the myriad issues of aging for lesbians and gay men. There are six chapters in this section, representing ethnographic qualitative research as well as more scalar quantitative research.

The first chapter in this section, authored by Robert Kertzner, Ilan Meyer, and Curtis Dolezal, psychiatrists, adopts the latter of these research approaches in its analysis of the psychological well-being in middle and later life of gay, heterosexual, and bisexual men over the age of 40. The authors draw their data from the National Survey of Midlife Development in the United States and test a multidimensional model of psychological well-being. They find many similarities and some interesting differences considered in the context of sociohistorical developmental differences.

The second chapter of this section is written by Todd Rawls, a sociologist, who similarly adopts a quantitative approach. Rawls uses
data from the Urban Men’s Health Study, a probabilistic sample of men who have sex with men in the metropolitan communities of San Francisco, Los Angeles, Chicago, and New York City. Those over the age of 50 are the focus of these analyses, which concentrate on degrees of sexual identity disclosure and the relationship of disclosure to indicators of mental health and well-being.

Andrew Hostetler, a developmental psychologist, authors the section’s third chapter, on the well-being of middle-aged and older single gay men. Hostetler offers an ecologically grounded analysis of well-being using both quantitative and qualitative research methods. In his analysis, Hostetler considers some of the barriers single men encounter and the resources at their disposal in their efforts to “age successfully.” He further examines the meaning and experience of community, particularly in the context of “chosen families,” a frequently used term in gay and lesbian studies, and the manifestation of such chosen families in the lives of gay men who may be single by circumstance or by choice.

The fourth chapter of this section is by Jacqueline S. Weinstock, a developmental psychologist. Weinstock elaborates further on a construct entertained by Hostetler, “friends as family,” with a sample of midlife lesbians. In her qualitative study, Weinstock draws upon the historical and developmental experiences of lesbians and identifies three patterns of friends as family, each of which reflects a unique valuation of friendship and each of which holds implications for the organization and prioritization of lesbians’ other relationships and life choices.

The fifth chapter of this section is written by Bertram Cohler, a life-course psychologist and practicing psychoanalyst, on the topic of sexual desire of middle-aged and older men who seek sex with other men. This ethnographic report, based on several years of participant observation, contrasts both setting and patterns of social interaction of two cohorts of men (older men and younger adults) patronizing bathhouses. Cohler’s analyses reveal the culture of the gay bath and the social and sexual spaces of older and younger gay men and their selfDefinitions and relationship to the “gay community.”

Hans Kristiansen, a social anthropologist, contributes the final chapter in this section, exploring the links between relationship history and moral concerns in the lives of older gay men in Norway. Kristiansen situates his research within the broader cultural and historical framework of Norway in the postwar period. Based on participant
observation, Kristiansen identifies three patterns of relationship histories and considers within these patterns the differences and similarities of discretion, sexual dignity, and familial ties.

Section 3 of this book comprises a single chapter, the intent of which is to reconsider some of the issues of aging among gay men and lesbians and to suggest future directions in the study of midlife and older sexual minorities.

Douglas Kimmel, a leading psychologist of aging, elaborates on the many reasons it is important to study the processes of aging for midlife and older sexual minorities. Kimmel further reviews central theories and models appropriate for such research, as well as some of the important issues to consider in its conduct—an important series of points on which to conclude the book.

REFERENCES


SECTION 1

Setting the Stage
CHAPTER 1

The Study of Gay and Lesbian Aging: Lessons for Social Gerontology

Brian de Vries and John A. Blando

This book stands as evidence of the emerging interest in gay and lesbian aging. An impressive array of research studies and descriptive reports has emerged since the early work on this topic by Marcy Adelman (1986), Raymond Berger (1982), Monika Kehoe (1988), and Douglas Kimmel (1977). This nascent literature has afforded a glimpse into the lives of older lesbians and gay men, with frequent references to how these individuals differ from the larger, nongay (heterosexual) culture in which they are embedded. Such efforts have been valuable and have provided platforms for the articulation of the special and particular needs of these individuals; however, they also risk creating separate “species” of individuals and minimizing or obscuring those dimensions on which groups are similar.

This chapter is intended to broadly, yet selectively, highlight what is known about the social context of gay and lesbian aging and the way in which it is studied. The goals for doing so are twofold: The first and most obvious content goal is to assemble, in a single source, empirical findings characterizing the social worlds of these older individuals. The second and more programmatic structural goal is to elucidate the particular questions posed in the study of gay and lesbian elders that may have relevance for the study of heterosexual elders as
well. In studying gay and lesbian lives, researchers have quite naturally adopted stances that may be broadly characterized as more attuned to the person-environment fit, more sensitive to the cohort effects in which the experiences of older individuals must be placed, and more mindful of the (related) social conditions marking their development. These stances are not (and should not be) restricted to a gay and lesbian gerontology. Notwithstanding those issues separating older gay men and lesbians from comparably aged heterosexuals, these two populations also have much in common, and both can benefit from their mutual consideration.

There are myriad areas in which a gay and lesbian gerontology will increase our appreciation for the social issues characterizing and facing older persons in general. The study of any stigmatized or marginalized group speaks largely to the fact that we tend to study single and personally familiar groups (i.e., people much like ourselves), and we tend to study Caucasian, relatively well-educated, and affluent heterosexual older adults.

In the review that follows, we examine the social context of gay and lesbian aging from the standpoint of what is known and how it is known, the latter implicating studies of aging more generally. We selectively define social issues in terms of “family” ties, intimate relationships, friendship, community, generativity, and aging well. These issues were chosen not only to represent the social domain of aging in general, but also to represent the critical gaps and issues for the 21st century in research and policy. We conclude by attempting to make explicit the lessons for social gerontology embedded in our discussions.

“FAMILY” TIES

The study of gay men and lesbians in a family context frequently has adopted a political stance, with the more conservative comments focusing on the apparent mutual exclusivity of homosexuality and family and the more liberal comments on the legal and social right to form legal (e.g., marital) unions (e.g., Dean, 1994). Among the social-psychological analyses have been the charting of family responses, and particularly of parents, to the homosexuality of their (typically late-adolescent) child (e.g., Herdt & Koff, 2000) and the consequences and dynamics of gay men, and especially lesbians, as parents (e.g., Bozett, 1987).
This latter area of research, still in its infancy, has revealed that children reared by lesbian parents develop appropriate psychosocial identities and typically heterosexual orientations with no evidence of increased psychiatric, emotional, or relationship difficulties (see Dundas & Kaufman, 2000, for a review). Centering on the relationship itself, the focus has tended to be on issues such as the transience of the relationship (again, with no noted significant differences) and, more recently, on social supports and motives for pregnancy (Gartrell, Hamilton, Banks, Mosbacher, & Bishop, 1996).

Interestingly, motives for decisions to have children (or not to have children) were of interest to family scientists some time ago. Hoffman and Hoffman (1973), for example, wrote about the values and function of children for adults and included in their analyses the following: realizing adult status and achieving a social identity, expansion of self and the continuation of the family name, morality (e.g., religious beliefs), primary group ties (i.e., creating a family), stimulation (e.g., adventure), creativity and a sense of accomplishment, power and influence, social comparison and competition, and economic utility.

There has been little attention directed to such motives in the more recent family science literature and in public discourse. Herein lies an interesting difference between the prospective and new parental experiences of heterosexual adults and lesbians/gay men: In the case of the former, upon hearing of the pregnancy, congratulations are typically expressed by both family and friends; in the case of the latter, upon hearing of the pregnancy (or adoption), queries about the reasons for such actions are typically posed by both family and friends. Although the congratulatory comments are more socially acceptable, the queries about the decision and the responses generated by the prospective parents are important and informative because they reveal social and personal decision-making issues, independent of sexual orientation.

The dynamics of those families that include a gay or lesbian member are infrequently studied, although they are particularly and poignantly implicated in coming-out stories such as those compiled by Vacha (1985). The disclosure by late-adolescent children to their parents has been met with a wide range of emotions and behaviors, from denial and disbelief, to anger and guilt, to grief and shame, to protection and acceptance (e.g., Herdt & Koff, 2000). In later periods of the life course, the management of this “sensitive” information becomes more salient. Murphy (1989), for example, studied the effect of disclosure
by lesbian couples to parents. She commented that a common source of complaint by the couples was maintaining secrecy and the concomitant distance and anxiety that ensued, ultimately associated with awkward communications with family members, decreased family contact, and even conflict within the couple relationship. (Barker, in Chapter 2 of this section, addresses the related issue of estrangement.) The ways in which families negotiate this information and their related roles is part of and informs the conceptually rich literature on family secrets, family scripts, and family folklore.

Connidis (in press) has very recently written about the life course family ties of gay men and lesbians. She notes that not only must the gay or lesbian adult deal with his or her sexual orientation, but that one’s sexual orientation influences relationships among other family members as well. This may include a gay or lesbian child and his or her parents, for example, although it may also include the parent’s parents (and their attempts to prevent disclosure) or the siblings and their knowledge and attitudes about homosexuality. Furthermore, this may be subdivided along gender lines (e.g., mother/father, sister/brother). This broader image of influence facilitates a more holistic focus on family relationships (e.g., allows a perspective other than that attributable to family role such as child, sibling, or parent and beyond that of the dyad) and points to the continual negotiation that goes on within families—again, independent of sexual orientation.

INTIMATE RELATIONSHIPS

In conjunction with the mounting evidence describing the psychological, social, and physical health benefits of romantic heterosexual partnerships (e.g., Gove, Style, & Hughes, 1990), researchers have attempted to study the parallel associations with gay men and lesbians (Bell & Weinberg, 1978; Kurdek, 1995; Lee, 1987; Peplau, Veniegas, & Campbell, 1996). This research has focused on a wide range of issues (Cohler & Galatzer-Levy, 2000), ranging from partner selection (e.g., Kurdek & Schmitt, 1987) to issues of power and conflict (e.g., Reilly & Lynch, 1990), and from division of household chores (e.g., Kurdek, 1994) to relationship satisfaction (Kurdek, 1994) and sexuality (e.g., Lee, 1995). Cohler and Galatzer-Levy (2000) report many similarities between older gay and lesbian couples and heterosexual couples; they report that the few differences to emerge include a relatively more
egalitarian division of labor among gay male couples and lesbian couples, a higher valuation of affection among lesbian couples, and a relatively higher incidence of sexual nonmonogamy among gay male couples.

Issues of sexuality in general offer an interesting juxtaposition of heterosexuals and gay men and lesbians. Schlesinger (1995) writes that perspectives on sexuality and the elderly have been framed by myths declaring that older persons are sexually undesirable, are not desirous of sexual expression, and are not capable of sexual expression. This view that sex is not for the old has prevented the study of sexuality and aging from attaining a mature status in the gerontological literature. In contrast, the very notion of a gay and lesbian gerontology raises the issue of sexuality directly.

Two apparently mutually inconsistent stereotypes operate in the area of (primarily) gay sexuality. On the one hand, following from the above, older persons are perceived as asexual; on the other hand, older gay men are perceived as sexual perverts and predators (e.g., Kelly, 1977). As Friend (1991) suggests, such contradictions may free individuals from role constraints; such stereotypes, however, continue to operate in how these individuals are perceived, thereby restricting access to prospective sex partners and, by extension, influencing personal beliefs and self-concept. Cohler, in Section 2, Chapter 5, addresses the issue of sexuality and aging among gay men, specifically commenting on the dynamics at play in the expression of sexuality and age.

One strikingly consistent structural or demographic difference between the samples of heterosexuals and homosexuals, however, has been the higher frequency of singlehood among the latter in contrast to the former (see, also, Hostetler, Section 1, Chapter 3). For example, from (nonrepresentative) surveys, estimates are that anywhere from 40% to 60% of gay men and 45% to 80% of lesbians are involved in committed relationships (Cohler & Galatzer-Levy, 2000).

Such findings not only point to differences between heterosexuals and homosexuals, but they also identify the different social realities within which lesbians and gay men live. A point masked in such a statement, however, is one of definition: the lack of an acceptable definition of *same-sex couple* (Berger, 1990). As Nardi (1999) has commented, defining *single* is similarly complicated. A wide array of definitions has been offered, leading authors to call for self-definitions of couplehood. That is, just because two people live together does not
mean that they are a “couple”; similarly, just because a person lives alone does not mean that he or she is “single.” These are terms that are clearly not restricted to gay men and lesbians.

Huyck (2001) describes nine types of romantic relationships in later adulthood. She includes in her typology traditional marriage, remarriage, partnership, cohabitation, living apart together (LAT), affairs, abandoned relationships, absent relationships, and unrequited romantic relationships. The first two types, traditional marriage and remarriage, comprise legal, heterosexual relationships, the latter implying a second or later marriage subsequent to a legal divorce (Moss & Moss, 1996). By partnership, Huyck means same-gender relationships that are the functional equivalents of marriage, often recognized socially but not legally (Cabaj & Purcell, 1998, cited in Huyck, 2001). Cohabitation suggests two heterosexual adults living together in a sexual-affectional relationship (Brines & Joyner, 1999, cited in Huyck, 2001). Living apart together (LAT) relationships would be marked by heterosexual or same-gender relationships in which the individuals, though not living in the same home, share a committed sexual-affectional relationship (Levin & Trost, 1999). Affairs suggest not-legally recognized sexual-affectional relationships that coexist within a subset of marriages, remarriages, partnerships, or other more socially or legally sanctioned romantic relationships (Treas & Gieson, 2000, cited in Huyck, 2001). Huyck suggests that abandoned relationships are those in which the individuals choose to discard their previous way(s) of relating even if they retain some remnants of the former relationship, while absent relationships are those in which one of the partners is deceased, infirm, or unavailable, even though there is no legal or social separation (Gladstone, 1995). Unrequited romantic relationships exist where at least one partner desires a romantic relationship that remains unfulfilled. Huyck (2001) notes that each of these possibilities is evident in later life, and individuals may come to later life with experience in several of these options. If researchers are concerned about the variety and quality (rather than the quantity) of intimacy in later life, they must pay attention to all these options. A (partial) model for their consideration exists in the writings on gay and lesbian romantic ties.

FRIENDSHIP

Grossman, D’Augelli, and Hershberger (2000) believe that the positive contributions of friends to individual well-being noted throughout the
gerontological literature should be even more powerfully noted in the lives of older gay men and lesbians, given that friends and the support they provide “can serve a unique function in mitigating the impact of stigmatization” (p. 171). Surprisingly little is known, however, about the role and meaning of friends in the lives of older gay men and lesbians. Much of the literature in this nascent area is colloquial and inferential and is presented in compilations of personal narratives of older gay men and lesbians (e.g., Adelman, 1986; Farnham & Marshall, 1989; Vacha, 1985). The few empirical attempts at examining friendship among gay men and lesbians, particularly in later life, include Nardi’s (1999) study of gay men representing a broad age range; Dorfman et al.’s (1995) exploration of lesbians and gay men over 60; Quam and Whitford’s (1992) study on gay men and lesbians over 50; and Beeler, Rawls, Herdt, and Cohler’s (1999) study of mid- and later-life gay men and lesbians. In all of these varied efforts, the importance of friendship for the health and psychological well-being of older gay men and lesbians is dramatically underscored.

Many popular and some scholarly (e.g., Weston, 1991) accounts chronicle the “chosen families” of older gays and lesbians. Manasse and Swallow (1995), for example, in photographs and essays characterizing 24 gay families, report that friendships exist at the core, as reported in the following (p. 153):

The way a lot of gay men and lesbians come out in the world is very alienating. For many of us, building families of linkage and connection is very healing. It’s important for us to feel that love and connection because it’s the antithesis of the alienation of homophobia. It’s important for us to say, “This is the innermost circle.”

Dorrell (1991) also comments on the family “of comradery and caring” she helped to create around caregiving for an 84-year-old, terminally ill lesbian. The presence of such families has been noted in empirical accounts as well; Beeler et al. (1999), for example, report that two-thirds of their sample of middle-aged and older gay men and lesbians held that they had a family of choice. Weinstock (2000) addresses the complexity in the pattern of friends as family by proposing three categories: friends as substitute family members; friends as a challenge to the core structure of the family; and friends as in-laws.

de Vries and Hoctel (in press) report in their in-depth qualitative study of 20 gay men and lesbians over the age of 65 that all but one considered their friends to be their family in some manner. Several
categories of description were adopted. Six respondents simply reported, “Our friends are like a family to us,” or “This inner circle I call family.” Other responses were somewhat more qualified. Three participants felt that their friends were like family, yet different: “I consider them like an alternative family,” or “I do consider my friends as family but not in the same way as my blood family; it’s like my second family.” Five people viewed their friends as family by default. Representative statements of this category include: “They’re all I have left” to “I see my friends as my family, because I don’t have any connections with my birth family.” Finally, five respondents saw their friends as greater than, or superior to, their family. They expressed such sentiments as “I feel closer to them than to my own family,” or “To my family of choice, I am a whole person,” or “They [friends] provide the sustenance that you ordinarily would want a family to provide.”

Relatedly, over half of the respondents believed that friendships were more important to gays and lesbians than they were to heterosexuals. For most of these individuals, consistent with the family-friend discussion above, friendships were important because these friends became family for one or more of the reasons offered above. Implicit in many of the responses was a sense of mutual dependence. For example, one man said that “Gay people have to make their friends their family. If my brother and sister-in-law’s friends fell away, they’d still have their family. If my friends fell away, I would have nothing.” One woman mentioned that “we need each other in a way that heterosexuals don’t. We’ve led a life of nobody being there.”

For those for whom friendships were not seen as more important, several patterns of responses were evident. Some participants, for example, expressed the belief that “although friendships were probably more important to gays and lesbians in the past, when you had to have that certain thing with people to be protected, this was no longer the case because it was so easy to be out.” Other responses included sentiments such as “We’re all social beings regardless of our sexual orientation,” or “Friendships are important to everyone.” One respondent thought that friendships were equally crucial to “straight people” because many of them were also estranged from their families: “The gayness has nothing to do with it as far as I can see.”

The extent to which such evaluations of friends are restricted to gay men and lesbians remains an open matter given that questions about the relative valuing of family and friends tend not to be asked
of heterosexual samples. In fact, these are the sorts of questions that tend not to be asked in social and family gerontological studies. The heteronormative and family-of-origin-centric bias of North American social gerontology precludes the asking of these questions and thereby restricts the range of discovery. Restating the central thesis of this chapter, the study of gay and lesbian aging issues contributes to the understanding not only of the lives of older gays and lesbians but also to aging concepts more generally: It leads to the asking of different questions, to the conceptualization of constructs in different ways, and ultimately to creativity and inclusivity in research.

COMMUNITY

Weston (1991, p. 122) has explored the complexity of the term community in the context of gay and lesbian lives, claiming that it is “as multifaceted in meaning as it is ubiquitous”; the psychological experience of this term is reviewed above in the framework of friendship, and its more sociological presentation is considered herein. The use of the term community evolved from earlier references to “the gay world” (e.g., Hoffman, 1968), implicating a homogeneous group and providing a political identity comparable to an ethnic subculture (e.g., Epstein, 1987). It defies territorial bounds, although “gay districts” are typically well known in larger metropolitan centers and “community” has been associated with bars, taverns, and some clubs. Weston (1991) proposes that gay community can better be understood as “a category implicated in the ways lesbians and gay men have developed collective identities, organized urban space, and conceptualized their significant relationships” (p. 124).

Evidence of community along these definitional lines appears in several forms, a poignant and dramatic example of which are the rituals around loss, including grief. Several authors have proposed that grief—end-of-life rituals in general—are among the most culturally dense experiences (Kastenbaum, 2001; Matsunami, 1998) and reveal the workings and values of a community. The study of grief in this context provides a unique opportunity to explore the meaning of relationships and the importance of community for gay men and lesbians; after all, grief “is the study of people and their most intimate relationships” (Deck & Folta, 1989, p. 80).

However, all grief is not equal. Society endorses various “classes” of grievers: Doka (1989), for example, discusses disenfranchised griev-
ers and disenfranchised deaths, two constructs within which gay men and lesbians figure prominently—those whose grief occurs in relationships with no recognizable kin ties and whose loss is not socially defined as significant. Disenfranchised deaths are those that are socially un-sanctioned and perhaps shameful (e.g., AIDS, suicide); the person who died is thought to be complicit in his or her own death and therefore unworthy of being mourned. Those who are disenfranchised from the grief and death systems of North America are left without the support and tools through which their grief might be addressed; they also are left without the scripts to recite and roles to enact at the time of death.

As a consequence, new languages and systems may be created to attend to this unmet need. The NAMES Project AIDS Memorial Quilt is one such example, in which representations of those individuals who have died of HIV disease are stitched together into a larger whole. The quilt allows for the expression of grief, both individually and as part of a larger community of loss (Corless, 1995). Thus, the exclusion from traditional norms and rituals ultimately is a double-edged sword, as suggested above. On the one hand, disenfranchised grievers are hidden and their losses are minimized or trivialized. The opportunities provided by such exclusion, on the other hand, may lead to the unencumbered expression of grief (i.e., in ways not scripted by norms that may or may not fit) and may lead to the development of rituals and remembrances constructed by grievers themselves to best address their needs. Gay men and lesbians are not the only disenfranchised grievers in North American society; friends, colleagues, and others also fall outside of heteronormative family roles and are lost in the restricted system of grief and bereavement.

Further forms of operating within these restrictions may be seen in the obituaries posted by bereft gay men and lesbians. In a research project surveying partners of gay men who died due to complications associated with AIDS, Richards, Wrubel, and Folkman (2000) found that 38% of the study participants made the death of their partner public through obituary announcements, and these were typically written and published for two audiences. The first was written (often with the aid of friends) for a homosexual audience and was submitted to a San Francisco gay community newspaper. Another, tailored obituary was written for the hometown paper of the kin of the deceased.

The content of the former of these obituaries was examined by Uhlenkott, Blando, and de Vries (in preparation), who found that the
obituaries submitted to the gay-identified weekly newspaper (the Bay Area Reporter [BAR]) went beyond the demographic description of jobs held, cities lived, and family members survived. Many were written displaying a wide range of emotion. One writer quoted the deceased’s last words, “love, love, love” (BAR, 1995). Another wrote of his partner’s favorite quote, “Like you always used to say, ‘The true test of character is the grace with which we accept plan B’ ” (BAR, 1994). And in an obituary dated March 12, 1987, the partner of the deceased warmly and clearly reveals his feelings of loss and sadness: “You never liked to speculate about an afterlife, but there had better be a place where we can be united again some day. This life feels lonely without you. I love you.”

Similarly, the obituaries in the Bay Area Reporter were not without their humor. One man, who foresaw his approaching death, set aside the necessary money and preparations for a big party to be held in his honor and absence; the get-together was to be called, “Ding, Dong, the Bitch Is Dead” (BAR, 1999). Another obituary was written by an acquaintance of the deceased, describing not only his friend’s fondness for the great outdoors, but also the often unpleasant logistics behind such an enterprise. “He’s now looking for that perfect campsite and someone to set up his tent” (BAR, 1987).

The stories told in these obituaries not only reveal information about the deceased; they suggest the voice and developing script of a community in grief and the effect of AIDS on the community. The developing script differs markedly from more traditional obituaries frequently listing occupation, professional accomplishments, community leadership roles, and education (e.g., Maybury, 1995; Moremen & Cradduck, 1998). The collective impact of the death was also frequently noted as in one obituary, dated August of 1987, in which a bereft individual ended the obituary of a friend with the sentence “Our men and women must stop dying!” Embedded in this latter quote is evidence of the magnitude of the loss and the multiple bereavement experience of gay men and lesbians.

Along such lines, Schwartzberg (1992) writes:

“The enormity of loss in the gay community has a secondary, cumulative effect that is greater than the sum total of the various deaths: It creates an unavoidable climate of loss to the community as a whole . . . survivors [grieve] not only for their most personal losses, but also for all the victims, for strangers and for the loss of community and culture” (p. 424).
Martin and Dean (1993) report that almost one-third of their sample of 200 bereaved gay men had experienced 2 or more deaths within the 12 months preceding the interview upon which their study was based. They compare the AIDS experience to “previously studied stressors, such as the experiences of concentration camp survivors and soldiers in combat” (p. 323). Several studies have sought to examine the impact of cumulative grief from multiple losses in gays and lesbians throughout communities in the United States, Great Britain, and Australia (e.g., Biller & Rice, 1990; Carmack, 1992; Martin, 1988; Viney, Henry, Walker, & Crooks, 1992). In general, the research concludes:

“For gay men, old beliefs about how the world functions, are no longer valid; reality is no longer what it was. A sense of personal vulnerability, a belief that one has control over one’s actions, a conception of the world as a place where young men don’t regularly die in the prime of their life—these beliefs are no longer viable for gay men to hold” (Schwartzberg, 1992, p. 427).

The vantage point offered by such work further provides a new perspective within which to consider grief and points to the fact that grief is so much more than an emotional, intrapersonal phenomenon; grief is more encompassing, including cognitive and behavioral components, and further may be interpreted as an interpersonal and cultural and sociopolitical phenomenon. Such interpretation is rarely offered. Moreover, grief is not a singular experience; Martin and Dean (1993, p. 323), elaborating on the above comparisons, claim that like “the AIDS epidemic, concentration camps and war combat are lethal enough to kill many individuals in a brief time and are extended in time so that survivors experience unremitting death of fellow companions.” With each subsequent loss, each previous loss is reviewed and relived and the world changes as a consequence. These are perspectives not restricted to gay men and lesbians and loss; these perspectives speak to a more inclusive and developmental study of loss in general.

In fairness, some research has addressed these issues with older adults, although it is uncommon. For example, in 1969, Kastenbaum suggested that it is likely that an older individual will experience multiple losses and further that the older adult will show some cumulative effect and be “particularly vulnerable to the psychological effects of loss” (p. 47). He referred to this as “bereavement overload.” Along similar lines, Moss and Moss (1989) suggested that the experiences of death over a lifetime form a “personal pool of grief” that persists and intensifies with subsequent losses.
Such statements highlight the odd and unusual pairing between the experiences of gay men and lesbians (of all ages) and the experiences of older individuals in general. For example, entire communities (of friends) of gay men and lesbians have been lost to AIDS. Such numbers are comparable to those reported by researchers studying older adults; de Vries and Johnson (2002) report that an estimated one-third of those over the age of 65 and almost half over the age of 85 (Johnson & Troll, 1994) lose a close friend through death each year.

Further, gay men and lesbians and older adults in general evidence many similar themes in their accounting of these losses. Both groups (homosexuals and heterosexuals) remark on the circumstances of the death with a sort of “there but for the grace of whom or whatever go I”; both groups speak of how they now feel disconnected to previous times and places (de Vries & Johnson, 2002). These are comments not unlike those noted in the reports of and memorials written by those bereft of a loved one who has died with AIDS. Moreover, both groups make explicit reference to the numbers of friends they have lost and place their recent losses in this context. The older adults in the de Vries and Johnson study referred to themselves as survivors—of long lives, of many deaths, of life’s hardships. For many, this is represented as an untethered existence, similar to Schwartzberg’s quote above.

The consideration of community, from the perspective of gay men and lesbians, shines a fresh light on the broader view of self in relationships, on entitlements to grief, and on the role of rituals. Some efforts in gerontology have adopted similar strategies, but there remains much to be done to fully follow through on the parallels uncovered above.

**GENERATIVITY**

For Erikson (e.g., 1982), achieving a sense of fidelity (balancing identity with role confusion) and love (balancing intimacy with isolation) prepares an individual for committing to society by way of future generations. This notion of commitment and survivorship in Erikson’s thinking on the concept of generativity frequently has been interpreted by researchers, clinicians, and the popular press in terms of child-bearing and child-rearing. However, Erikson never restricted his concept of generativity to parenthood, and he never believed that parenthood and generativity are inseparable. For example, Erikson, Erikson, and Kivnick (1986, p. 50) write:
"In terms of the whole life cycle, however, it is clear that adult libido is destined to reach some maturity in a number of generative ways: from a sexual procreativity to the day's technological productivity and whatever patterns of creativity have developed in the individual in his or her times. Some such combination must assure the vitality of an order of care to those wide areas of adult involvements which, according to Hindu expression, guarantee the 'maintenance of the world.' All this, in short, leads to a participation in areas of involvement in which one can learn to take care of what one truly cares for."

Generativity may be found in a vast variety of life choices, beliefs, and commitments, ranging from child-bearing and child-rearing, certainly, to vocation/occupation, professional activities, volunteer activities, social group memberships, friendships, and even leisure pursuits. These latter areas remain relatively unexplored in the lives of midlife and older heterosexual adults, with the notable exception of some of the work of McAdams and his colleagues (e.g., McAdams, 1993; McAdams & de St. Aubin, 1992; McAdams, Ruetzel, & Foley, 1986). The multiple manifestations of generativity in the lives of midlife and older gays and lesbians have been entertained by a few authors (e.g., Cohler, Hostetler, & Boxer, 1998; Cornett & Hudson, 1987; de Vries & Herdt, 2000; Isay, 1996). Importantly, child-bearing and child-rearing are activities not restricted to heterosexuals. With increasing frequency, there is evidence of lesbian parents, gay parents, and lesbian coparenting with gay men. These parents are expressing their generativity through their "immortality projects" (Yalom, 1989)—an expression facilitated by changing social norms. Perhaps this tendency to "take care of what one truly cares for" may also be noted in the extensive involvement of humans with animal companions. Recently, for example, it was estimated that 52.9 million dogs and 59.1 million cats are kept as pets in American households (Brooks & Martinez, 1999). Further, over half of all households have at least one companion animal, and many are perceived as family members (Sable, 1995). The bonds between gay men and lesbians and their companion animals have not been explored, to our knowledge, and represent an interesting avenue for research, particularly as informed by a notion of generativity as a motivation for involvement.

Career choices also may be interpreted in terms of generativity. Teaching serves as a notable example in this instance. Mentoring more generally may be similarly understood, which may include group or recreational leadership (e.g., youth groups). A provocative hypothesis
to emerge from such observations might be that gays and lesbians might be disproportionately represented among professionals in these categories.

It is a frequently repeated belief that gay men, especially, are overrepresented in artistic pursuits such as dance and theater. These pursuits are works and acts of creativity and generativity. Some of these may be more explicit than others. For example, a dancer performed the story of his life as it was affected by AIDS; these performances were simultaneously videotaped. As the disease progressed, he was unable to endure the entire performance and the videotape was played as he watched. Over time, he watched more and performed less until ultimately he became a member of the audience. This poignant performance was intended to present and serve as a legacy of his life and art (Singing Myself a Lullaby, Henry, 2000). Other works of art may include paintings and sculptures and song. They are gifts intended to nurture, engage, and/or provide for others in myriad ways and persist long after the existence of the gift-giver.

Perhaps in companion ways, the same may be said of the restoration and preservation efforts of gays and lesbians. It might be offered that the aptly named “painted ladies” of San Francisco, the hallmark Victorian structures that have won the hearts of residents and visitors alike, have been preserved in large measure by the efforts of gay men and lesbians. Preservation efforts have not been restricted to physical structures, however. In many urban centers across North America, there now exist oral history projects and gay archives to ensure a legacy of developmental markers. The famous lesbian, gay, bisexual, and transgender yearly parades marking the anniversary of the Stonewall riots may be similarly interpreted.

In fact, perhaps political activism in many forms may also been seen as generative; these forms are creating social change to benefit others, including those whose experiences are not yet known to those agents of change. In such ways, the efforts of Oscar Wilde to the Stonewall drag queens to ACT-UP may all be interpreted as change-making agents in the service of creating for the self and others a better place to be. These are some of the many ways in which generativity may be noted in the lives of gay men and lesbians. These ways are not restricted to gay men and lesbians; these avenues of generativity are equally open to heterosexuals and may have particular applications in the lives of never-married and/or childless (or child-free) couples (e.g., Connidis & McMullin, 1999). The consideration of generativity,
however, in this context prompts the broader and fuller consideration of the concept. In fact, the analysis of generativity in the context of gay and lesbian lives prompts the questioning of the heteronormative language used for measuring development and aging and encourages the reconceptualization, or at least the revisiting, of some of the issues currently popular in gerontological scholarship.

AGING WELL

Early gerontological research tended to focus on aging in terms of decline and loss—not an unreasonable focus given that so much research originated in institutional settings with patients as subjects. As the study of aging expanded to include community settings as well, however, so too did the focus expand to include the well elderly. This augmented focus led to comparisons between these two groups (i.e., comparisons of individuals with disease or disability in contrast to those with neither) and further to distinctions among the well elderly, the most notable being the distinction between usual and successful aging (e.g., Rowe & Kahn, 1987, 1997, 1998). This distinction was intended to identify two groups of “nondiseased” older persons—those without pathology but at risk (the usual agers), and those without pathology and not at risk (the successful agers).

The term successful aging has enjoyed wide and popular appeal in recent gerontological literature, with applications to physical (e.g., Garfein & Herzog, 1995), cognitive (e.g., Baltes & Baltes, 1990), and psychological and social functioning (e.g., Wong & Watt, 1991). This broader use of the term and its application to a variety of outcome measures have led to deservedly greater scrutiny. Some critics have charged that the adoption of terms like successful aging represents the capitalist takeover of aging (Cole, 1984). Certainly, any definition framed in terms of (objective) outcomes may be criticized as bound in a particular historical and cultural period and in a particular gender and class context, without proper recognition of the social construction of old age (e.g., Erikson, Erikson, & Kivnick, 1986; McAdams, 1993).

In contrast, it may be argued that purely subjective definitions of success render the concept ineffectual, echoing the discussion surrounding the measurement of life satisfaction. That is, researchers have questioned the meaning of the life satisfaction concept given that respondents tend to report that they are satisfied with their lives
independent of objective life indicators (e.g., Ryff, 1989). Still others have charged that successful aging is an oxymoron in that it implies not aging at all (Baltes & Carstensen, 1996). A variation on this theme is that all aging is successful, given the alternative!

These issues necessarily raise questions concerning the criteria of successful aging. If all criteria from all disciplines are accepted as equally valid, the number of successful agers would be extremely small (Baltes & Carstensen, 1996). In a ranking of possible criteria, Rowe and Kahn (1997, 1998) include three components in their definition: the avoidance of disease, maintenance of high cognitive and physical functioning, and engagement with life. Rowe and Kahn emphasize activity in their definition—more than potential. These criteria are fairly well endorsed, although predictably modified by researchers from differing perspectives. For example, social psychologists in particular have noted the importance of personal meaning in successful aging (e.g., Baltes & Carstensen, 1996; Wong & Watt, 1991), perhaps as a defining characteristic of engagement with life.

Several authors have commented that gay men and lesbians may be more likely than comparably aged heterosexuals to be prepared overall for aging, given their socialization and early experiences with stress (e.g., Brown et al., 2001). Friend (1991) has offered a theory of successful aging as applied to older lesbian and gay men that is primarily based on what has been termed “crisis competence” and that confronts rigid gender roles and ageist assumptions—perhaps specific forms of meaning-making.

Kimmel (1978) proposed “crisis competence” as a consequence of coming out and the potent intrapersonal and interpersonal stresses that are a part of this process. He suggested that dealing with the crises of “family disruption, intensive feelings and sometimes alienation from family . . . will provide a perspective on major life crises . . . that buffers the person against later crises” (p. 117). Crisis competence embodies the development or enhancement of life skills as a result of having to deal with being gay and all that entails in a heterosexual society. These skills have been interpreted as placing older gay men and lesbians at an advantage, relative to heterosexuals, in confronting the issues and crises of aging. Such predisposing conditions are rarely considered in the gerontological literature on successful aging.

Friend (1991) points to a related process as assisting in the promotion of successful aging. He suggests that the lived experience of having confronted rigid gender roles ultimately serves older lesbians and gay
men well. That is, being freed (or forced) from the relative bounds of traditional gender role definitions has afforded gay men and lesbians the opportunity to engage in behaviors throughout their lives that heterosexuals rarely confront until the death of a spouse (e.g., Lund, Caserta, Dimond, & Shaffer, 1989). A similar process is posited to exist about aging stereotypes and myths (Friend, 1991); just as gender is reconstructed, so too is age.

The relationship between gay men and lesbians and aging, however, is probably more complex than is suggested by this process, although nonetheless relevant in the context of judging success. For example, ageism, frequently noted by gerontologists, is perhaps even more dramatically seen in the context of gay and lesbian experiences, as other authors in this volume discuss (e.g., Barker; Hostetler). Weinberg and Williams (1974) have suggested that gay men are particularly youth-oriented. Several authors have proposed that such extreme ageism has led to “accelerated aging” among lesbians and, most prominently, gay men (e.g., Bennett & Thompson, 1991). Accelerated aging was noted among middle-aged gay men in Neugarten, Moore, and Lowe’s (1965) classic research study on age norms among gay men; gay men believed they entered midlife earlier than did heterosexual men. Friend (1980) also reported that gay men described themselves as “old” at younger ages than did heterosexual men.

A final comment on the complexity of age merits attention: the pivotal role of cohort. The important role of cohort is not mentioned as frequently in the gerontological literature as it once was, although its impact is no less pronounced. In contrast, the study of gay and lesbian older adults almost uniformly comments on the marked cohort effects in communities of homosexuals and how the lives of gay men and lesbians have been shaped “in important ways by the historical period in which they have grown and developed, lived, and worked” (D’Augelli & Patterson, 1995, p. 217).

On the evening of June 27, 1969, a contingent from the New York City Police Department raided the Stonewall Inn, a gay dance bar in Greenwich Village, New York City. This wasn’t the first time it had happened; in fact, it was part of a routine pattern of harassment endured by the occupants of the bar. What stood out on this June evening, however, was that, shockingly, the police raid soon escalated into several nights of street fights and clashes between outraged gay men and a bewildered NYPD that was not accustomed to homosexuals fighting back. The events of these evenings were widely reported in
and sensationalized by the media and became known as the Stonewall Rebellion—what many identify as the turning point in the struggle for gay rights in the United States.

Since the time of the Stonewall riots, so much has happened to transform the social and psychological understanding of same-sex relations and lives. AIDS has certainly shaped the experiences of the gay men whose “coming out” and “coming of age” have taken place since Stonewall. AIDS has destroyed communities while simultaneously increasing the visibility of gays and lesbians and facilitating the creation of communities by gays and lesbians themselves. The issue to be underscored here is that large numbers of gay men and lesbians have come out and have come of age and are now facing their third age with little historical experience or cultural expectations to guide them. There exists little literature from which to draw to render comparisons with previous cohorts of older gays and lesbians, and even if such literature existed, the accounts and interpretations of such times are historically broken from the present along the Stonewall lines previously described. The study of gay and lesbian aging is ultimately an attempt to explore these “uncharted lives” (Siegel & Lowe, 1994)—an attempt to examine this unique juncture of history and biography.

These same issues of aging and aging well exist in varying forms in communities of heterosexual older adults. Aging well probably doesn’t magically appear at some later life juncture; aging well is at least partially predicated upon the resources individuals bring with them into later life (such as crisis competence or some related sense of resilience and hardiness). Further, aging well is a response to the approaches individuals take in the roles they play in life, gender, and otherwise; aging well is a subjective experience, including how one fits one’s own age and the social conditions that have marked its development. These issues of prominence in gay and lesbian gerontology also have a place at the table of gerontology more generally.

CONCLUSION

As revealed in the pages of this chapter—and indeed this book—the lives of older lesbians and gay men are marked, defined, and supported in ways that distinguish them from heterosexual older adults. Their sexual orientation has led to struggles with their families and with
society to justify their "family" connections; their romantic partnerships have similarly been discounted or maligned, ultimately promoting diverse forms of romantic ties. In the context of these struggles and this disdain, gay men and lesbians have turned to each other to form friendships and create family and to develop and maintain communities to honor their lives and contributions. Gay men and lesbians have sought out ways to express themselves and their creativity and to leave their mark on the world; they have constructed new ways of, and given new meaning to, aging and aging well.

These social processes of aging are highlighted in the study of gay and lesbian lives; in many ways, however, these processes are not restricted to gay men and lesbians. Furthermore, the vantage point offered by the social constructionist perspective implicit in gay and lesbian studies has great potential. For example, families of all types engage in decision-making strategies that could appropriately be the focus of research; similarly, families of all types operate with various forms and levels of information and may engage in masking some aspects of past or present behaviors from other family members, selectively chosen. How do families decide on (choose) caregivers, and how are caregiving responsibilities allocated, for example? What sorts of information are disclosed in families (i.e., how do people “out” themselves and/or others in various ways), and what areas form the “demilitarized zones” of which Hagestad (1984) spoke?

Gerontology (e.g., Huyck, 2001) is beginning to recognize the diversity of forms romantic relationships take, in line with the vast diversity evidenced in gay and lesbian relationships. However, the lives of single, never-married elders mandate attention, as do the lives of childless (or child-free) elders. How does generativity manifest itself in such circumstances? How are families constructed outside of traditional norms and legal means? Who is included in the definitions of families offered by older adults? Even more generally, what role do friends play in the lives of older women and men? What are the relative contributions to well-being made by friends and family, and how are both groups differentially evaluated? Barker and Mitteness (1990) have begun to explore the particular role of friends as caregivers to the elderly—a significantly overlooked area in gerontology in general, although frequently identified, at least in theory, in the context of gay and lesbian research.

Contributions to the study of grief are offered by analyses of loss in gay and lesbian lives. Certainly, the experience of multiple loss and
bereavement overload applies to lives of older adults. More generally, the context within which the loss takes place merits attention. The ways in which communities, broadly defined, come together in grief is similarly relevant. How do individuals, of all ages, find their voice in grief and share their loss? Several concepts from analyses of successful aging (or aging well) among older lesbians and gay men have significant potential in gerontological research, as previously identified.

The study of gay men and lesbians in later life and across the life course offers much to our understanding of aging in minority communities and under stigmatized conditions. It also offers much to an analysis of aging more generally. It does so in ways that refresh our concepts, stretch our theories, and reshape our ideas. It fosters a more holistic gerontology and a more inclusive view of the human social life course. Gay and lesbian research may be seen to infuse gerontology with the vital concerns of sexuality and aging more broadly, opening hitherto ignored areas of further scholarship and policy for the 21st century.

REFERENCES


The Study of Gay and Lesbian Aging


