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Is old age always already heterosexual (and cisgender)?

The LGBT Gerontology and the formation of the “LGBT elders”

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Abstract

This article seeks to present an anthropological and critical view of the development of a thriving field of knowledge production (especially present in North America) which for some decades has investigated the aging processes among lesbians, gay men and bisexual and transgender people. This field, still relatively unknown in Brazil and in South America as a whole, has been named “LGBT Gerontology “. Thus my interest lies in critically and systematically presenting and contextualizing the main trends, controversies and theoretical debates in this field, as well as their recent implications on the complex constitution, legitimation and creation of public policies concerning the new social actors, who rise concomitantly - the “LGBT seniors.”

Key Words: Old age, Gender, Sexuality, LGBT Gerontology, LGBT Elders

Resumo

Este artigo procura apresentar um olhar antropológico e crítico para as principais dinâmicas do desenvolvimento de um pujante campo de produção de conhecimento (em especial norte-americano) o qual tem investigado por algumas décadas os processos de envelhecimento de lésbicas, gays, bissexuais e transgêneros. Este campo, ainda relativamente pouco conhecido no Brasil e na América do Sul como um todo, tem sido chamado de “Gerontologia LGBT”. Meu interesse, dessa maneira, reside em apresentar e contextualizar crítica e sistematicamente as principais tendências, polêmicas e embates teóricos desse campo, assim como os seus desdobramentos recentes em prol da complexa constituição, legitimação e criação de políticas públicas concernentes a novos atores sociais (cuja assunção se dá em concomitância), no caso: os “idosos LGBT”.

Palavras-Chave: Velhice, Gênero, Sexualidade, Gerontologia LGBT, Idosos LGBT

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“Nobody loves you when you’re old and gay – not even yourself.” - line in a conversation between the main characters from the movie *The Staircase* (1969)

“In the popular imagination, to be an older gay or lesbian person has long been synonymous with being alone.” – Hostetler (2004: 143)

In general, by taking mainstream gerontology and its dialogs and approaches to current sexological studies as a comprehensive field, one could state that there still seems to be some kind of *heteronormative panorama* on aging and old age. This panorama tends to deliberately erase from the horizon of analytical and political concerns the erotic-sexual practices, as well as the sexual and gender identities of elderly men and women who dissent from certain normative references regarding gender and sexuality (Henning 2014).

Therefore, this article seeks to present an anthropological and critical view of the development of a thriving field of knowledge production (especially present in North America) which for some decades has investigated the aging processes among lesbians, gay men and bisexual and transgender people. This field, still relatively unknown in Brazil and in South America as a whole, has been named “LGBT Gerontology”. Thus my interest lies in critically and systematically presenting and contextualizing the main trends in this field, as well as their recent implications on the complex constitution, legitimation and creation of public policies concerning the new social actors - the “LGBT seniors.”¹

However, it is relevant to first contextualize this critical review within my ethnography, whose general purpose was to investigate certain significant aspects of the aging, old age and sexuality experiences

¹ Although the general objectives of this work, as mentioned before, are focused on a survey of and dialog with a significant part of the North American LGBT gerontological production, I must point out that my broader research (Henning 2014) developed fruitful dialogs with the Brazilian research works which examine in different manners the formation processes of aged subjects nowadays. Such works, especially those which focused on the analysis of the interaction of aging and gender relations, were essential to the analyses that I hereby present and include the production by Debert (1999a), Peixoto (1998), Lins de Barros (1998), Britto da Motta (1998), Simões (2000), Lopes (2000), Rifiotis (1998), Eckert (1998), Motta (1998) and Brigeiro (2002), among others. In addition, other important national references which support my thoughts - and which unfortunately I will not be able to explicitly review throughout this article - are those that address scenarios of aging and male homosexuality in disparate ways, for example, Simões (2011) Paiva (2009), Mota (2009), Neman do Nascimento (2013), Pocahy (2011), Passamani (2013), Saggese (2013), Duarte (2013) and Kerry dos Santos (2012). Relevant investigations concerning the female homosexuality and aging such as in Lima (2006), Moraes (2010) Lacombe (2010), and finally those regarding aging among transgenders, such as in Siqueira (2004, 2009), Antunes (2010), and other authors are also included.

narrated by a group of men who participated in homoerotic² sexual activities and/or who identify themselves as homosexuals. Most of these men considered themselves middle class, white and cisgender³, were relatively well educated, and very often used the internet to interact (they especially made use of *cruising*⁴ websites and smartphone apps), were between 45 and 70 years old and lived in the metropolitan area of São Paulo, Brazil. Thus, in my ethnography I tried to examine different facets of the intertwining interaction of social markers such as *aging, middle age, old age, sexuality, homoeroticism and intergenerational relationships* among men who were part of my research. Consequently, the survey presented here was originally developed as a way to critically consider the main theorizations of LGBT gerontology using my field analyses - it is important to point out, though, that in this text the analysis of my ethnographic material will mostly not be a priority⁵.

Having these elements in mind, it is significant to consider that the field of social gerontology has historically tended to study family groups, especially middle-class, relatively well educated, Caucasian heterosexual subjects (De Vries & Blando 2004: 04)⁶. On this matter and while addressing the constitution of the field of gerontological knowledge in India, the American anthropologist Lawrence Cohen (1998), in turn, states that it is the male retired individual (and, we might add, heterosexual and cisgender to this reference) which actually tends to inform the “universal senior figure” as subject in/of gerontology.

2 I choose to work with the category homoeroticism rather than homosexuality or homosexualism (which has been highly criticized), because I consider it to be broad enough to encompass the multiple manifestations and aspects of relationships and erotic, emotional and sexual practices between people of the same sex and because it helps to avoid essentialisms. Throughout the text I will also avail myself of the term “homoerotic sexual practices” to refer to sexual practices between people of the same sex. However, especially as I dialog with several authors from the field, I will at times use “homosexuality” when referring to homosexual identity issues among my interlocutors.

3 In general, “cisgender” can be understood as a term that relates to the heteronormative adequation and coherence between a particular gender identity and the sex assigned at birth. An example of this is being born with what is socially understood as a male genitalia and seeing oneself as having a male gender identity. The term has been used as a normative and relational opposition to the “trans” identities (transgender, transsexual, etc.), which are those gender identities that in different ways challenge the ruling conventions of gender intelligibility in a “heterosexual matrix” which Butler (2003) explores. Furthermore, it is important to highlight that both “cisgender” and “transgender” do not necessarily imply an association with sexual identities, such as the heterosexual or homosexual ones.

4 “Cyber cruising” basically is homoerotic interactions afforded by websites, social networks and smartphone apps .

5 As this article aims to be a critical survey and review, much of my properly ethnographic analyses - due to the stipulated writing space and text purposes - will not be prioritized, but they can still be accessed in my thesis (Henning 2014) and future publications. Considering what my survey granted me access to, by the time I started writing this text, there had been no systematic review, not even in English, with this scope or which included the recent production in the field of “LGBT gerontology”, like the one hereby presented by me.

6 The survey presented here is one of the results of my doctoral internship as a visiting scholar in the *Latin American and Latino Studies Department* at the *University of California Santa Cruz* between 2011 and 2012. Therefore, I would like to give my sincere thanks to Marcia Ochoa for decisively helping me be part of various academic areas of the institution and thus carry out such a review. In addition, the theoretical survey of “LGBT gerontology”, which I intend to present, seeks to detail and further some of the issues previously outlined in the seminal work by Julio Simões, “Homossexualidade Masculina e o Curso da Vida: pensando idades e identidades sexuais” (2004) [“Male Homosexuality and the Life Course: considering ages and sexual identities”]. His work has opened doors for and been of great value to the fundamental bases of reference in my work. Moreover, my article also seeks to expand on and critically discuss some issues, debates and important dynamics in this field which have developed especially over the past fifteen years. I would also like to thank the reviewers of this article and also the editor of *Vibrant*. All of them made generous and apt criticisms and suggestions, even if it wasn't possible to do justice to all of them.

Considering such characteristics, over the past few decades researchers in the fields of social gerontology, social sciences and other areas interested in the more advanced stages of life also began to peer into - and challenge what they saw as a “vacuum” on the issue - the possible configurations and characteristic challenges in the aging process of individuals who identify themselves as gay or lesbians (Berger 1996; Herdt & De Vries 2004; Barker, de Vries & Herdt 2006). Meanwhile, several researchers have suggested that available models and data on what they refer to as “heterosexual aging” would be insufficient to understand the complex aging and old age experiences among gay men and lesbians, as well as among other subjects who differ from normative prerogatives in terms of gender and sexuality, such as bisexual, transgender and transsexual people.

Similarly, recent academic publications have claimed that today for the first time these subjects reach middle and old age and do not undergo extreme persecution, control and stigmatization, as they did in the first half of the twentieth century. Bearing this in mind, researchers say this is the first generation which will enter old age being able to openly express gay and lesbian sexual identities (Berger 1996: 12; Herdt, Beeler & Rawls 1997: 233-234; Barker, De Vries & Herdt 2006). Therefore, such issues should have important implications for various analysis fronts, particularly for direct management of old age, which justifies the need to discuss and reconsider, among other things, in what ways public policies and institutions devoted to the care of the elderly have been dealing (or not dealing) with factors such as gender identity, eroticism, desire and sexual practices among old people.

Therefore, in contrast to the *heteronormative panorama on old age* that still tends to be dominant in mainstream gerontology, it is currently possible to say that there is a broad body of consolidated investigative literature addressing the intersection of old age, male and female homosexuality, bisexuality and transgenders, particularly if we are referring to some English-speaking countries (Pugh 2002: 161). In addition, this literature can be seen as relatively diverse, coming from multidisciplinary fields and, as we shall see, crisscrossed by controversy and divisions.

Despite these features - and closely related to the general trends in vogue in gerontology in its broader sense - we can say that the LGBT Gerontology is a growing field of studies that has been mobilized for over forty years towards the creation and development of knowledge and discourses on the multiplicity of aging experiences, particularly when considering issues such as desires, sexual practices, sexual and gender identities of individuals seen as elderly⁷. Thus, the article will now turn to present a mapping of the development of this literature, which is not supposed to exhaust its explanatory possibilities. The aim is hence to present a critical and systematized review of the main debates, features, controversies and moments in the Anglophonic literature which has been referred to as *LGBT gerontology* and whose foundational landmarks date back to the late 1960s.

Before proceeding, however, it is necessary to ponder for a moment on the very notion of “LGBT gerontology”. In the field of the analysis of “non-heterosexual” old age and aging processes, various denominations have been proposed which reflect analytical, theoretical and political projects, as well as diversified empirical approaches. In relation to this literature, one can find denominations such as Gay

⁷ These considerations especially relate to, as previously stated, the literature in English language. However, I do not assume that each and every question from this field of discursive production is representative or similarly occurs in other cultural contexts different from, for example, the US, the UK, Australia and Canada. Nevertheless, the intention is to shed light on some issues that may or may not influence or peculiarly concern other research contexts.

Gerontology (Genke 2004), Lesbian and Gay Gerontology (De Vries & Blando 2004), GLB Gerontology (the “B” standing for “bisexual”), LGBT Gerontology (Kimmel et al 2006), GLBTI Gerontology (Harrison 2002, 2005) and more recently some authors have suggested the establishment of a Queer Gerontology (Pugh 2002; Hughes 2006).⁸

On the other hand, not all authors addressed in this critical review would be included by other experts in a properly gerontological disciplinary field. However, it is common in the field review for research aimed at aging and old age among lesbians, gay men, bisexual people and transgender people, as well as other subjects, to be included in a common literature of “gerontological sensitivity”. Taking these considerations into account, I therefore propose to address the constitution of this contentious, plural, relatively disparate set of researches by its currently most widespread name - “LGBT gerontology”. It must be highlighted, however, that this term is not necessarily used by all researchers to be hereby discussed. This can be explained by the fact that they work in different fields and have different concerns and various backgrounds. LGBT gerontology will be used here as a kind of contingent umbrella term concerning the set of the analyzed investigations.

Accordingly, one of the early milestones in the interrelationship between aging and male homosexuality is the research by American sociologist Martin S. Weinberg (1969), coincidentally published in the same year as the *Stonewall riots*⁹. Therefore, one of the foundational turning points in what is now called *LGBT Gerontology* occurred concurrently with the birth of the symbol of the Gay Liberation Movements themselves. Since then such researches have increased considerably and crossed the US national borders to places, such as the UK, Canada, Australia and New Zealand. Considering what has been said, it seems opportune to look at how the investigations regarding these old age and aging experiences have developed over the last decades. As one does this exercise, one can find some general trends in the analyses that have been linked to certain pendularly positive or negative social representations; this pendular tension, moreover, has remained lively and active in different ways up to the present day.

Historically, in this literature, there was - and there still is- a disproportionate attention to some specific “letters” in the LGBT acronym. Male homosexuality was certainly over-represented, especially between the late 1960s and the 1970s, while female homosexuality has been more present in research and accounts of old age and aging experiences particularly since the 1980s (Adelman 1986; Kehoe 1994, 1986; Cruikshank 1990; Weinstock 2004; Barker 2004; etc.). More recently there have arisen, albeit timidly, publications dealing, at different levels of detail, with aging processes of bisexuals, transgenders¹⁰, transsexuals, intersex people,

8 This latter name arises from the proposition of distinct critical dialogs between gerontology and queer studies and requests approaches promoting a process of “queering of aging” (Hughes 2006) and “queering gerontology” (Pugh 2002). These proposals become clear particularly when facing the criticism of what I will later refer to as the “identitarian imperative,” which affects the literature.

9 The *Stonewall Riots* were a series of conflicts that happened on different occasions in June 1969 in response to the everyday police persecution and violence at gay bars in New York City. Although *Stonewall* has become a clear and powerful symbol of transnational fight and struggle for liberationist gay movements, there were similar American movements and organizations prior to the *Stonewall riots* which should not be obliterated, like the homophile movements in the 1950s and early 1960s.

10 Here we must mention an important national exception: research in of Monica Siqueira’s (2004, 2009) Brazilian context, who has produced important and pioneering ethnographies on aging and old age among *travestis* in Rio de Janeiro (Siqueira 2004), as well as addressed their manners of appropriation of urban space (Siqueira 2009) these works have resulted respectively in her dissertation and thesis. Apart from this exception, there is also Pedro Paulo Sanmarco Antunes’s (2010) work.

people who identify themselves as “queer”, among other subjects. However, such researches are clearly minority in the general framework in question (Harrison 2002, 2005; Hunter 2005; Dworkin 2006; Garnets & Peplau 2006; Cook-Daniels 2006).

Another trend in the literature has been the portrayal of men and women who identify themselves as white, middle class, well-educated cisgender homosexuals living in big cities, being relatively open about their sexuality and strongly engaged in the “LGBT communities.”¹¹ Moreover, such research works usually focus on middle-aged individuals or the so-called “young old people”, those who are considered to be in the early years of old age¹². This trend, in turn, has generated important analytical vacuums regarding ‘non-white’, transgender, low-educated and poor individuals, living in remote and rural areas, with little or no permeability through the “LGBT community” and who do not embrace their sexual identities in the manners laid down in the post-*Stonewall* period, as well as “old old” individuals between 75 and 84 years of age, and the older ones, at ages 85 and above (Barker 2004; Cohler & Galatzer-Levy 2000).

Perhaps as a reflection of the aforementioned features, a prominent point in much of the literature is the existence of a propensity to subproblematize the possible bases that guarantee “fundamental differences” between “homosexual aging” and “heterosexual aging.” In other words, homosexual aging is considered “different” *a priori*. Thus, according to the literature one of the main topics that seem to justify a differentiation between “heterosexual aging” and “homosexual aging” or (in gender identities) between “cisgender aging” and “transgender aging” is the articulated experience of the old age stigma and of the stigmas over homosexual and transgender people. Such combination of stigmas, according to the field in question, creates more challenging and problematic scenarios for LGBT people.

Beforehand, I emphasize that this is an emic interpretation of the literature in question which I do not take for granted and do not uncritically subscribe throughout the text. It is central to state that this article does not intend to exhaustively define what are the “specificities” among such “modalities” of aging, but rather to present the ways in which such literature tends to interact with such need for categorical definition as an almost inescapable part of the project of constitution of the object of knowledge of the LGBT gerontology. Thus, “heterosexual aging,” “homosexual aging,” “cisgender aging” or “transgender aging” are interpreted here as a set of emic notions and not as neutral, non-questioned, taken-for-granted categories of analysis.

¹¹ It is necessary to consider the very concept of “community” that historically crosses the gerontological literature (as well as part of the field of gender studies, sexuality and homoeroticism itself), which often tends to be taken without questioning, not having its meanings analyzed. Sometimes the authors of this literature see “homosexual community” or “LGBT community” as referring only the public and most notorious realms, such as bars and nightclubs. Other times this definition is expanded with the addition of political activist groups, non-governmental organizations and institutions dedicated to the “LGBT populations”, and, in other cases, personal networks of social support, friends, family members, spouses, neighbors, etc., are also included. It is relatively common for authors to refer to only one or to all of these possibilities simultaneously although the most common practice is to use the term as if it were self-explanatory, without further questioning of it.

¹² Accordingly, as stated by Simões (2004), these studies are far from providing a “generalized portrait” of the homosexual elderly individual in the USA.”

Reflecting on a related issue, the Brazilian anthropologist Julio Assis Simões (2004) states that “investigations have not shown that sexual orientation *per se* entails significant differences in aging experience.” Corroborating what the author posits, some researchers argue that the issue, in fact, is not determined by “sexual orientation” or gender identity itself, but rather by experiences of prejudice, discrimination and cumulatively experienced violence throughout life due to sexual and gender identities regarded as deviant¹³.

Taking these considerations into account, it is clear that for the literature in question the choice of focus is more related to *differences* between aging processes among “homosexuals” and “heterosexuals”, at the expense of possible commonalities. Thus, in general terms, the field that could be seen as LGBT gerontology tends to spread an analytical focus with a more *differentialist* tone. Another notable point in the literature is the relative absence of criticism and of the deconstruction of gender and sexuality binaries, especially with regard to the *homosexual versus heterosexual*¹⁴ opposition.

In other words, when reflecting on how the subjects of this literature are constituted by it, we need to consider the fact that the identity categories assigned to them - such as “old age” and “homosexuality” - are often little problematized, or even, in extreme cases, essentialized or reifying associations. Sometimes, as a subtext present in part of the field in question, it feels as if there were, for example, a semantic slippage that tends to conceive that homoerotic sexual practices in old age (or in other life moments) presuppose homosexual identities. Such an element, as I analyze in my ethnography (Henning 2014), acquires a problematic visibility, particularly when considering the “closet” metaphor among old people.

Consequently, one of the dearest projects to the literature - if not the dearest one - is the endeavor to make (hence to constitute or to invent) a “LGBT old age”. In addition, such a process occurs through the repeated assertion of a sense of wholeness and factuality, i.e., of a type of generated and shared existence of this adjectived “old age.” This old age, *ipso facto*, gains a substance, a singularity or an “essence” from the establishment and election of certain allegedly generalizable elements concerning a certain set of subjects.

Thus, if the emphasis of the literature tends to be based on the assumption that the subjects in question are invariably conceived - albeit in a secret, latent and intimate way - as marked by sexual identity (or gender identity, as they would be in terms of “old age” when taken as an identity), then it is productive to ask ourselves: how does this literature deal with older individuals whose experiences, concepts, practices and identities do not “fit,” for example, certain identities which gain singular contours after the gay liberation movements?

13 Referring to these postulations, the British sociologist Jeffrey Weeks (1983), in turn, suggests that the basic problem is not so much the nature of homosexuality or gay subculture, which, after all, have historically been formed; the difficulties of older gay people stem from the hostile climate in which they have likely become aware of their sexuality. Aging, as a result, tends to bring a new modulation of the stigma intensity, and not a fundamental change of circumstances (Weeks 1983: 241).

14 Although some authors, for example, tend to emphasize the differences in aging experiences among individuals that associate themselves with the categories included in the LGBT acronym (lesbian, gay, bisexual and transgender), many authors use the term “LGBT populations” without further consideration of the socially agglutinating issues, characteristics or facets which ensure the homogenizing aspect of an “aging LGBT population.”

Considering these issues, what I refer to as a *differentialist and identitarian emphasis* on the literature (or, in its most acute features, as an *identitarian imperative*), could also be interpreted as part of a broader discursive movement in favor of the creation of discernible social communities. In other words, a movement that, linked to broader and more complex biopolitical mechanisms of population constitution, would ultimately help to lead to the rise of new aged subjects and populations nowadays¹⁵. Such subjects and populations whose alleged constitutive idiosyncrasies and possible peculiar needs in old age should be respectively investigated by rigorous researchers and catered to by competent professionals from multiple fields.

Having such ruminations in mind, it is valid to consider that, in addition to the identitarian approaches or the over-attention to gay men and lesbian women, there have also been some general trends within this field which should be stressed at this moment. Mapping the other trends and schisms in the literature will help to more broadly understand the reflections of such debates and foundational controversies on contemporary research. With this update in the literature review, I formulate and propose at least four singular moments in the LGBT gerontology. Moreover, when I refer to different “moments”, despite the analysis and proposal of a chronological development for such debates, I do not mean to assume that the first moments were left behind, were overcome or have no relevance at present, since, as we shall see, they remain active and influential in different ways.

Four moments in the LGBT Gerontology

The first moment in LGBT gerontology is made up by the *verification and confirmation of the negative stereotypes regarding “gay aging”*, and took place from the late 1960s to the second half of the 1970s. This period’s literature fairly focused on the negative social representations then available for the aging process and old age of homosexual men in the United States and the United Kingdom.

Such social representations were markedly gloomy and imbued by loneliness, social, physical and aesthetic losses, depreciation in the *erotic market*, invisibility, prejudice due to advancing age within and beyond the “LGBT community”, depression, reduction in or lack of social support networks, among other factors. That is, in general terms, an alarming scenario of aging and old age and, to many people, a terrifying glimpse of the future.

This bleak scenario from the literature’s first moment can be exemplified by the ambiguous, albeit centrally negative, representations of aging among homosexual men present in the few films of this period that addressed the question, for example: “*The Staircase*” and “*The Boys in The Band*”¹⁶. Moreover, I avail

¹⁵ I here refer to the foucauldian sense of biopolitics - a social form arising in the eighteenth century which sought to rationalize the problems faced by government practices concerning specific phenomena of the group of human beings considered as a population, encompassing health issues, hygiene, birth rates, longevity, race, etc. As Foucault (1988: 131) states, the biopolitics of the population focused on the body-species, the body imbued with the mechanics of life and serving as the basis of the biological processes: births and mortality, the health levels, life expectancy and longevity, with all the conditions that can cause these to vary. Their supervision was effected through an entire series of interventions and *regulatory controls*. One of the main occupations of this new form of power turns to the *management of old age* and diseases that incapacitate individuals for the labor market and hence pave the way for the later experiences of social security and pensions, which arose from social struggles and political demands. See Simões’s (2000) thesis for retirees’ movement in Brazil.

¹⁶ I read about the movies *The Staircase* and *The Boys in the Band* in quotes present in the book “*Queer Temporalities in gay male representation. Tragedy, normativity, and futurity*” by Dustin Goltz (2010). There probably are other films from the period or even earlier ones which can also bring interesting elements to considering the interrelationship between male homosexuality, aging and construction of future horizons.

myself of an unpretentious analysis of some of the narrative facets of these films as a way to present certain sensitivities wrapped in the associative ideas of “old age” and “homosexuality” which help to clarify and illustrate this first moment’s character.

The Staircase is a 1969 film directed by Stanley Donen and based on a play written by Charles Dyer. It is set in London and depicts a couple of middle-aged gay men played by the actors Richard Burton and Rex Harrison. The couple has lived together for two decades, owns a barbershop and experiences an advancing age crisis, depreciation in the homoerotic market, bodily changes such as baldness and bulging guts, not to mention the London police repression from the 1960’s. In addition, both of them need to manage the relationship with the ex-wife and daughter of one of them, apart from having to deal with their mothers at advanced old ages. One of the mothers, incidentally, is cared for by her son at the couple’s home, which brings complications to the characters’¹⁷ relationship.

Despite the fact the film openly portrays the erotic and affective relationship between two men, which can be seen as most certainly unusual, courageous and even innovative for the time¹⁸, the relationship between the two, however, is presented as turbulent, hurtful, unsatisfactory and aggressive both in the dialogues and, at times, in moments of physical violence; i.e., the film can be seen as a kind of gay version of the classic drama *Who’s Afraid of Virginia Woolf* with the addition of the negative stereotypes about homosexual aging¹⁹. At one point in the film, for example, one of the characters even states, “nobody loves you when you’re old and gay – not even yourself!”

Thus, the movie *The Staircase* - whose name, incidentally, is a reference to aging using the metaphor of the “irreversible” ascent on the staircase of life - portrays both characters, though in different ways, as markedly insecure about aging and relatively discrete about and fearful of the revelation of homosexuality to the families, customers and neighborhood, increasingly ignored by other potential sexual partners, eager to date younger men, and terribly haunted by the real possibility of solitude, since one of the protagonists is at risk of going to jail for having flirted with a police officer. This terror of loneliness as an inexorable part of the future or as something inevitable among aging gay men is explicit in the scene where one of the characters faints and the other repeatedly begs over the partner’s body: “*Not alone, Harry! Do not leave me! Not alone! Not alone! Not alone.*”

On the other hand, the film “*The Boys in The Band*,” released a year later, in 1970, was directed by William Friedkin. Also based on a play, though this one was written by Mart Crowley, the script portrays the course of one night in the lives of a group of eight gay friends in New York City, some of which at or approaching middle age. The film presents a rich set of elements and addresses numerous issues from a gay men’s perspective on urban life shortly after the *Stonewall* events, such as the process of coming out, the management of being in the closet, married life, monogamy and polygamy issues, the importance of friendship and “gay communities” as sources of social support, the suffering of prejudice, the

¹⁷ See chapter 7 in my thesis (Henning 2014) for more on gay men being considered informal caregivers of their parents or older relatives.

¹⁸ I address these two films with regard to the first moment in the literature, in spite of the fact there are others that could be quoted here, even some released earlier which referred to issues related to homosexuality and considered a “taboo” at the time. As an example, there is the British film “*Victim*” (1961) with Dirk Bogarde which shows a situation of blackmail in the UK involving the secret of a prominent lawyer’s homoerotic practices, who should remain “above suspicion.” Although Bogarde, who played the blackmailed lead, at the time was 40, the topic of aging related to homoerotic practices was not centrally addressed by the film.

¹⁹ The movie “*Who’s Afraid of Virginia Woolf*” was based on the homonymous play by Edward Albee, directed by Mike Nichols and starred (as well) Richard Burton and Elizabeth Taylor in 1966. The film was a huge critical success and won five Academy Awards, including Best Actress for Elizabeth Taylor.

relationship with the families of origin, intergenerational relationships, heterogeneous masculinity styles, former and current lovers, the ambiguous relationships with hometowns, self-acceptance issues, guilt and sin at religious level, ethnic and racial issues, among other factors.

However, the issues that seem to be central and stand out in the film's narrative involve the concerns about, fears of and bitterness towards aging, as well as the projections of futurity while experiencing panic about predicting or not predicting the future. The film, in spite of portraying a plurality of aspects that does not allow one to place it among extremely stereotyped or homogenizing Hollywoodian narratives about male homosexuality, remains in a scope which produces negative associative images between homosexuality and aging, distress towards the future and even intense non-futurity. To illustrate this negative scenario, Michael, the film protagonist, who is in a deep crisis about the aging process, at one point ponders, "*show me a happy homosexual and I'll show you a gay corpse.*"

Films like *The Staircase* and *The Boys in the Band*, as expressed by the homonymous book and documentary *The Celluloid Closet*, mark the movement of directly addressing homosexuality in Hollywoodian cinema in the late 1960s and early 1970s, after decades of enforcement of moral conduct codes dictated by religious institutions and US government censorship agencies. Despite the fact there was then the possibility of direct and non-subliminal or allusive representation of homosexuals in movies, such representations were still marked in these narratives by negative or relatively discouraging elements. There only recently has been a change to this trend.

Therefore, the first moment in the LGBT gerontological literature, whose incidental general pictures could be exemplified by the aforementioned films, was marked by the tendency towards taking for granted such negative representations of gay men's aging - there representations were present in the "gay communities", in popular culture and movies. Moreover, this moment also tended to depict these older men as lonely, psychologically-tortured-by-their-"social-condition" people and they were considered to have "no future".²⁰

Consequently, in the first publications focusing on homosexual aging processes, little were these representations challenged, disproved or deconstructed on the whole. They tended to be legitimated (Berger 1996). These investigations, usually conducted by sociologists, were some of the first to eminently regard homosexuality as a social phenomenon and to not pathologize it. And in this first wave of investigations, the sociologists Weinberg (1969), Weinberg & Williams (1974),²¹ Gagnon & Simon (1973) and Laner (1978) may be included. One can say in passing that such research generally showed varying degrees of sympathy for the gay liberation movement, although its authors did not ostensibly used a militant tone.

Thus, until the end of the 1970s, the gerontological literature on gay men was remarkably based on ideas of isolation and depression, marked by an emphasis on the deficits, losses and negativity that aging and old age could bring. Such a scenario would be aggravated, on the one hand, by the stigma of and discrimination

²⁰ In chapter 6 of my thesis (Henning 2014), I try to more closely explore "futurity," especially in dialogue with some queer theory authors who in recent years have been interested in debating the concepts of "queer temporality," "queer time" and "future". Therefore, in that chapter, I develop an analysis of the future horizons that were triggered according to my interlocutors' accounts.

²¹ However, in the analysis of possible reasons why homosexual men were constantly portrayed as unhappy, lonely, depressed, having low self-esteem and isolated from the most exciting aspects of gay life, Weinberg & Williams (1974: 311-312) have suggested other perspectives, by highlighting a study that points out among older gay men higher levels of well-being and satisfaction with life and work than those among heterosexual men at the same age. These authors say that the issues of adaptation to the passage of time in relation to psychological well-being are not experiences unique to homosexuals; they're part of the overall aging process.

against homosexual identities and practices in society in general, and on the other, by the fact that the “male gay communities”, according to the literature, were especially targeted at youth (Hostetler 2004: 146).

While expanding on the centrality of youth in “gay communities”, Weeks (1983) states that such a feature is not only incident to such social contexts and that, although changes were under way, we still live:

“in a general culture that focuses on youth and makes its achievements fascinating. At the same time, we are slowly chipping away at the hostility that homosexuality has generated. These two factors inevitably had an impact on how gay people led their lives and it is no surprise that (...) problems specific to older homosexuals emerge”(Weeks 1983: 244-245).

One of the main hypotheses that have arisen in this first moment of LGBT gerontology was that of *accelerated aging*, according to which homosexual men perceive themselves older at an earlier time than heterosexual ones do and feel like entering middle age at earlier ages than their heterosexual counterparts. This hypothesis, despite gaining the support of researchers in the following decades, has been criticized and disproved by, for instance, the idea that gay men and lesbian women, being relatively freer of certain heteronormative expectations for the life course - like marriage or child rearing - can feel and be perceived as younger for longer. An interesting example is that of 72-year-old man presented by English sociologist Brian Heaphy (2007: 204). The former claimed to feel younger than heterosexual men of the same age, since he was not married or hadn't had children and hence had experienced the potentially positive and creative possibilities of aging outside the heterosexual norm.

The second moment in LGBT gerontology is marked by *criticism and deconstruction of the negative stereotypes* and by the appearance of a “gay positive” moment in the literature. In other words, it turns to the positive potential in the aging experiences of gay men. Closely influenced by broader trends in mainstream gerontology, which equally sought to turn to the positives aspects of aging, the second moment in LGBT gerontology developed between the late 1970s and early 1980s. This period coincides with, among other events, the expansion of debates, achievements and visibility of the gay liberation movements, resulting in the fact that gerontologists - some openly gay and lesbian, - writing from the USA, tried to challenge and deconstruct the image of the old, bitter, lonely queer (Hughes 2006: 3-4).

It is important to remember that the LGBT gerontology in its second moment was in a close dialogue with wider debates within social gerontology. In this case, as an encompassing field, social gerontology also started to challenge the older representations of old age, which tended to emphasize the physical and social losses in the aging process. So, the aim was to change the focus from negativity to the potential gains offered by aging (Debert 1999a). In the meantime, this group of “gay positive” researchers sought to move the focus from the deficits of male gay aging to a view considering the ways in which markers such as homosexuality and old age could, when combined, promote additional social resources that created advantages in the “homosexual aging” when compared, for example, to the “heterosexual aging”.

These researchers, whose exponents - with reasonable variations in approaches - are sociologists Kimmel (1977, 1978), Berger (1996 [1982]), Friend (1980, 1987, 1991) among others, were called gay positive gerontologists. Many of these researchers' studies were strongly influenced by the post-*Stonewall* movements of gay liberation and tended to contradict previous research, sometimes through completely opposing views, refuting the anti-gay stereotypes especially with regard to negative images of aging and old age (Hostetler 2004: 146).

However, gay positive gerontologists, as they provided counterexamples and defended more encouraging social representations and analyses, in some cases incurred in the ignorance of social experiences that approached negative stereotypes or in the obliteration of the pervasive and sometimes

devastating effects of the daily experience of the stigma and discrimination accumulated throughout the years in the lives of gay men and lesbians. Thus, these researchers were at risk of - and often accused of - presenting forcefully happy interpretations of the analyzed realities (Hostetler 2004: 151). Among the main contributions from this second phase in the literature, one can find the hypotheses of crisis competence presented by Douglas Kimmel (1978) and mastery of stigma (Berger 1996 [1982]). Mainly propagated by sociologists, these hypotheses are intertwined, though distinct.²²

Also, by extension, this LGBT gerontology branch was also accused of blurring the “not-so-successful old age” among such individuals, since it tends to assume that there are no “problems” or issues that required contributions or solutions, inasmuch as these individuals are thought to be over-equipped to deal with potential challenges of aging and old age²³. In the various investigative works between the 1980s and 2000s, however, the conclusions from empirical disproval of and testing such hypotheses had conflicting and contradictory results, with some researchers claiming to have found evidence which confirmed and others, which denied these conjectures. However, although the current state of discussion still considers both hypotheses, it overall regards them with reservations and skepticism.

The third moment in LGBT gerontological literature is in turn marked by a *diversification of issues and empirical analyses* in addition to the ones mentioned so far, with increased attention, above all, to the aging and old age processes of lesbians (Cruikshank 1990, Kehoe 1994; Adelman 1986; Weinstock 2004; Barker 2004) and a still shy beginning of approaches addressing the aging processes of bisexuals and transgenders (Harrison 2002, 2005; Hunter 2005; Dworkin 2006; Garnets & Peplau 2006; Cook-Daniels 2006). Thus, starting in the 1980s, unlike earlier when the attention was basically focused on male homosexuality, there was a proliferation of studies and publications dedicated to the lesbian aging experiences, giving rise to

22 In general, the *mastery of stigma* suggests that homosexuals have to deal with managing social deviance and discrimination from an early age, and learn to competently handle complex economies of the stigma on a daily basis, often maneuvering the identity interchangeably in every social sphere (family, work, friends, neighbors, etc.). Such experiences, knowledge and skills practiced and developed early in life, according to this hypothesis, would cause homosexual individuals to deal with other forms of discrimination, such as the aging and old age stigma (Berger 1996 [1982]). *Crisis competence* is related to the peculiarities in the lives of homosexuals, which primarily originate from the latent tension due to the possibility of disclosure of the homosexual identity to members from immediate social networks. Besides, according to American sociologist Raymond Berger (1996: 04) gay men have a harder time going through transitional moments in life. They do not get the support that heterosexual men do when, for instance, leaving home and starting their own family, - the latter count on their wives' help and support. In many cases, gay men need to centrally rely on themselves and on their immediate network of friends to solve problems through life, which can work as a “trial by fire” preparing them to resolve conflicts and further problems, especially at old age. Thus, homosexuals' “crisis competence” could prepare these individuals to deal with other crises that may arise further ahead in life, such as midlife crisis, crises at work, crises due to the “loss of social roles” at old age, among others. These experiences would supposedly make them more flexible, adaptable and better prepared than heterosexuals to act and overcome such hardships. Consequently, according to the idea of *crisis competence*, coming out may have been so difficult, traumatic and painful that overcoming it would help to overcome other critical moments (Pugh 2002: 168). Both hypotheses were thoroughly debated, defended, criticized and refuted in the following decades, especially with regard to the risk of denying or erasing homosexuals' social experiences approaching certain negative stereotypes of “gay old age”. However, the analytical, theoretical and hypothetical gay positive gerontology propositions were mostly accused of obstructing and derailing the creation of public policies specific for the possible challenges faced by “LGBT seniors”.

23 One of the main and most acute critics of the gay positive gerontology was Canadian gerontologist and sociologist John Alan Lee (1987, 1989, 1991).

an increase of comparative perspectives between gay and lesbian aging processes and to an increase in the plurality of this documentation.²⁴

Therefore, especially since the 1980s, there has been a prolific growth of themes, different analyses and approaches that go beyond the previously circumscribed scopes and complicate the views on aging experiences, making these views more openly plural and perhaps less reductionist. Since then the literature has recognized some differences between male gay aging and lesbian aging, though occasionally some important commonalities have also been postulated.

Nevertheless, aging among bisexuals is often addressed loosely and, when it receives attention, it tends to be stated that the possibility of affective relationships with people of either sex would increase the chances of bisexuals' having heterosexual relationships, getting married or having children in heterosexual relationships. That would increase the likelihood of maintaining social support networks at old age similar to the heterosexual ones, with the presence and support of spouse or former spouse and children and reduce the possible risks of old age with fragile social support networks (Barker, De Vries & Herdt 2006; Kristiansen 2004). In turn, the processes of "transgender and transsexual aging" are said in the literature to require extra attention, concerns and challenges, since the levels of stigma, persecution and "*transphobia*" through life are seen as more expressive. In addition, the possible outcomes of the relatively common use of hormones could lead to specific and aggravating consequences requiring a greater attention and special care at old age.

Finally, the fourth and last moment is between the late 1990s up to the present, when what I call a *pragmatic turn* happens. I so named it because there seems to be a recent transformation in the literature which defocuses the remarkable theoretical discussions of the past, such as the controversies about the "accelerated aging", "crisis competence" and "mastery of stigma" (although their reflections and proposals are often still based on them) and turns its attention and concerns to proposals of practical gerontological action.

These proposals turn to the creation of public policies, thematic education programs, clarification and defense of civil rights, furtherance of the establishment of specific institutions and organizations devoted to the direct administration of problems faced the "LGBT elderly." Some of these problems are, for example, affordable housing, training of caregivers for the elderly with "cultural competence" to deal with sexual diversity and gender identity, creating an agenda of fights against prejudice towards intra- and extra-LGBT-community older people, the defense of anti-homophobic gerontological demands in the context of health and state institutions, among others.

In order to deepen the characteristics of this *pragmatic turn* in LGBT gerontology, the points listed by Brotman et al. (2007: 12) seem illustrative of a kind of "rights-reclaiming agenda" promoted by researchers, organizations and "LGBT aging" activists in North America (especially in relation to public health and social services). These social actors argue, for example, for better training and education of health and social service professionals in order to further greater acceptance and understanding of the *LGBT elders* "specific needs." In addition, for example, another point defended by this agenda is for all professionals who deal with the elderly to use neutral vocabulary in terms of gender pronouns especially when referring to relationships and life histories, in order to respect the plurality of biographical experiences.

24 Such pluralities are based on the growing, though rarely carried out, recommendation in the literature to have in mind differences such as gender, 'race', ethnicity, distinct cohorts, social class, nationality, residential location (urban, rural, outskirts residents...), education, marital status, history of heterosexual relationships, existence of children from these relationships, public or non-public coming out and its moment, existence or absence of starting a traditional and/or innovative family (*families of origin, families of choice, etc.*).

Other defended points are the guarantee of confidentiality between such workers and their clients, the support of the elderly's wishes for the planning of their own care, ensuring that such planning be understood and complied with whenever possible. Finally, an increase in the dialogue between health authorities, social services and LGBT organizations as means to provide greater integration and transfer of knowledge, attitudes and know-how between them is also defended. Basically, the general objective is to create social programs and environments more welcoming to, respectful of and receptive to "LGBT elders".

Thus, the *pragmatic turn* in LGBT gerontology is especially significant in the intersection of gerontology and the fields of public health, psychology and social service, becoming more vigorous with the expansion of entities and organizations whose work is specifically geared toward the "LGBT elderly" such as SAGE in New York City and *Openhouse* in San Francisco. In recent years, the work of entities and organizations catering to LGBT seniors has also expanded, though to a lesser extent, in countries such as Canada (Brotman, Ryan & Cormier 2003; Brotman, Ryan, Collins et al 2007)²⁵, United Kingdom (Clover 2006; Pugh 2002)²⁶ and more recently New Zealand and Australia (Harrison 2002, 2005; Hughes 2006).²⁷

Some considerations are needed when contextualizing the work of the two aforementioned US organizations, which have become an international reference for services for "LGBT seniors." According to information on its website, SAGE (formerly *Senior Action in a Gay Environment* changing in 2004 to *Services and Advocacy for LGBT Elders*) is headquartered in New York and was founded in 1977.²⁸ Its action caters to the needs of "LGBT seniors" on the US East Coast and its programs and pioneering spirit have become examples for other institutions throughout the US over the past decades.

According to gerontologists Elizabeth Kling & Douglas Kimmel (2006: 266), SAGE provides, among other things, individual, group and family counseling and assistance for "unique needs" among LGBT elders, such as *coming out late in life*, coping with grief when losing one's partner, the formation of support groups for caregivers of Alzheimer patients, war veterans and Parkinson patients, among others. According to the organization, such programs are conducted in a "LGBT-centric environment" and address the "particular challenges" faced by LGBT seniors.

In turn, *Openhouse* is a non-profit organization headquartered in San Francisco, on the west coast of the US, focused on LGBT seniors from the area. One of its flagship policies is the political activism for affordable housing and adequate and inclusive services for *LGBT seniors*. It originated through homosexual

25 In Canada, according Brotman et al (2007), there are at least two organizations that also deal with "LGBT aging and old age" issues: the 519 *Community Centre* in Toronto, and *The Centre* in Vancouver.

26 In the UK, for example, there was Polari, an organization defending the interests and needs of older gay men and lesbians. This organization, which was founded in 1993 and ended its activities in 2009, included bisexual and transgender elderly later in its history. By the way, the term "polari" refers to a form of slang common at least until the 1970s and associated with "gay subcultures" in the UK. For more information on organizations or groups in the UK focused on the "LGBT elderly," see: <http://www.ageofdiversity.org.uk/older-lgbt-groups>

27 According to lawyer Nancy Knauer (2009: 303), who wrote a book on LGBT seniors' rights in the US, among the unique risks and challenges faced by the LGBT elderly at present - and from which systematic action of this geriatric field would arise to remedy inequalities - are: isolation, poverty, prejudice due to advancing age, in some cases greater exposure to racism and gender discrimination, lack of traditional family support at old age, no recognition of families formed by same sex people (including "families of choice"), limited or inadequate access to health services, difficulties in access to or [permanence in] affordable housing and lack of services and institutions aware of and empathetic towards LGBT elderly care.

28 Information found on the organization's website: <http://www.sageusa.org> on 12/12/2012 at 11:15 pm.

activism from the 1970s and 1980s, particularly that concerning housing at fair prices for the older members of the LGBT community in the city and region; however, the institution proper dates back to the second half of the 1990s.

Currently, one of its most ambitious projects is the creation of a gerontological complex with apartments in the Castro (the classic gay neighborhood in San Francisco)²⁹. The aim of the project - which argues for rent and other services required by the elderly at fair prices - is to build an urban, active and multicultural community of retirees with affordable housing for LGBT seniors. In addition, according to the organizers, the idea is for the complex to also “provide a specific list of cares for residents of all income levels,” although 110 apartments are to be reserved for low-income seniors (Adelman, Gurevich, de Vries & Blando 2006: 249).³⁰

Institutions such as SAGE and Openhouse with their policies and concerns regarding the solution of the “LGBT elderly’s” “problems” and “challenges” seem to be a sort of epitome of the *pragmatic turn* in LGBT gerontology. This recent moment in the literature has developed from two concurrent approaches that deserve attention, one stemming from a “*separate-but-equal*” model and the other, from a “*together-but-different model*” regarding the services provided to elderly gay men and elderly lesbians (Hunter 2005).

The “*separate-but-equal*” model, in general, assumes that in order to guarantee proper services for lesbian and male gay elderly, they preferentially or exclusively have to be provided *by and for* members of the lesbian and gay community. This is, at least partially, the model used by organizations such as SAGE and Openhouse. This model tentatively emerged in the 1970s and still is a prominent way to provide services to “LGBT seniors” nowadays (Tully apud Hunter 2005: 187-188). On the other hand, among the disadvantages to this model, there is, for example, the requirement for the elders to be open about their gender and sexual identities so as to be entitled to the services.

Therefore, one of the risks and implications inherent to this model (and rarely mentioned by the authors in the field) is the production of what I call a “generational imperialism” aimed at older cohorts. This is due to the imposition of a framework - mobilized, for example, by the notion of “gay pride” - based on a set of political, identitarian and subjective references particularly used by the baby-boomer generation. Baby boomers overall tended to be socialized, when young, in a significantly less strict environment than that of generations older than those from the post-World War II period³¹. Thus, in this model, if the elderly are not open about sexual orientation or do not deal with sexual practices and identities along the lines of the gay liberation movement, it becomes difficult or even impossible for them to be targeted by the services, attention and care provided by the theorists and professionals of the “*separate-but-equal*” model (Hunter 2005).

29 For more information about the “55 Laguna St.” project, go to the organization’s website: <http://openhouse-sf.org/8-16-12-press-release/>

30 I volunteered for a program at this organization for seven months during my doctoral internship. The program was called “*Friendly Visitors*,” and that experience was very positive and influential for some of my reflections presented here.

31 The term “baby boomers” refers to the generation of people born in the birth boom in the post-war period, more specifically between 1946 and 1964, especially in the US. Thus, this generation’s amplitude is 18 years and presents several intrinsic heterogeneities among its inner cohorts, though it is repeatedly portrayed as homogeneous (Rosenfeld, Bartlam & Smith 2012). Demographically, Diane Macunovich (2002: 103) contextualizes the emergence of baby boomers saying that in the US in 1936 the average number of children for every 1000 women was 75.8, reaching the peak of 122.7 in 1957, and then returning to more modest levels - 65.0 - in 1976. Baby boomers are generally idealized as “intended” to leave their generational marks on every life stage, ie as if they had already idiosyncratically impacted childhood, adolescence, youth and adulthood, and it is thought that they will impact, or already are impacting, middle-age and old age experiences, shaping them innovatively.

The second approach in question, which can be called “*together-but-different*” model, defends the provision of adequate and quality services to lesbian and male gay seniors in more traditional institutions such as nursing homes or resting homes. Consequently, staff training and awareness programs focusing on sexual diversity and gender identities at old age should be provide to all professionals involved in the care of the elderly. In this model, the availability of organizations providing services specifically for or exclusively to “LGBT elders” is not necessary, as traditional institutions of elderly care would be made aware of and trained to work with this population. A positive aspect of this model is that at least in theory there is no need for the elderly to be open about their homosexual identity or practices to be entitled to care (ibid.).

In the US, both models are concurrently used. This becomes clear when one considers that organizations like SAGE and *Openhouse*, in addition to being the pillars of the first model, also act in relation to the second one. Both also provide training, education and guidance to more traditional organizations with regard to “specificities” and “unique needs” of “LGBT old age.” On the other hand, one possible drawback of the second model is the fact that more traditional institutions such as nursing homes and rest homes would generally not seek LGBT training or would demonstrate resistance to dealing with sexual diversity and gender identity among the elderly. As a result, many authors that could be included in the *pragmatic turn* state that the employees of traditional institutions will continue to assume that all the elderly are heterosexual and will treat them as such, and in most cases will not be prepared to deal with “LGBT seniors’ (op. cit.).

Finally, taking into account both models, it is noteworthy that social services provided by organizations which adhere to the first model - the *separate-but-equal* one - i.e., the ones defending the creation of institutions exclusive or preferential to *LGBT seniors*, are experiencing greater growth and visibility both in the US and Canada, and they appear to be dominant trend at present (Hunter 2005: 191).

Thus, provided that the development of the reviewed literature has contributed to the progressive rise of “LGBT old age” (though, of course, has not determined it³²), it is precisely in the more recent period of the *pragmatic turn* in literature - and in narrow association with the *first moment*, the one that emphasizes the losses, deficits and negativity in aging experiences - that a kind of constituting emphasis of “LGBT seniors” takes place in the US and UK and with similar proto-movements in other countries. As a result of the successful combination of the *first and fourth moments* in the literature - which has resulted in an outstanding setting in the analyzed field - the current influence of gay positive branch of LGBT gerontology, due to its emphasis of the potential positive side of the lesbian and male gay aging experiences, seems to be less in vogue in some respects. In fact, its contributions are largely sidelined when considering most discourses and practices on which, for example, the aforementioned LGBT organizations are based. From this perspective, the researchers focusing on the *gay aging deficits* combined with the need for *practical intervention* in “LGBT old age” seem to be “winning” the dispute when compared to gerontologists from the *gay positive aging*³³.

In this sense, it is interesting to compare certain characterizations of LGBT gerontology with those of social gerontology as an encompassing field. Contrary to what seems to be happening in the LGBT gerontology (denunciatory and negative focus on a sort of “helpless LGBT old age”) in social gerontology, in general, the winning trend seems to be the appreciation of “active and positive old age.” In this sense, it is

32 If it were considered that it had, then the “creative” powers of the reviewed literature would be overestimated and the complexity of the wider social context which affects these processes of subjectification and “population conformation” would be underestimated.

33 However, the fact that the “gay positive gerontology” seems to be losing ground does not mean that there does not exist anymore within the analyzed literature the construction of specific imageries on “successful LGBT aging.”

clear that only at advanced old age (that is, in the most dramatic aspects of aging) do problems concerning, for example, nursing homes and rest homes arise (Debert 1999a).

Therefore, in a way, while in LGBT gerontology the combination of the first and the fourth moments in literature seems to be prominent, in the encompassing social gerontology the more positive model based on the encouragement to active old age seems to be, at least in some aspects, triumphant. However, one must consider that the second moment in LGBT gerontology, the one which was named “gay positive gerontology,” is not necessarily “defeated” and it has not vanished, since it continues to play an important role, for example, in the constitution of images of “successful LGBT aging” and in the establishment of a kind of “good LGBT old age,” - an analysis of this will be presented at another time.

Considering the issues of aged individuals who identify themselves as lesbians, gays, bisexuals and transgender (these issues are more legitimated and considered relevant now), a set of knowledges, techniques and management practices over these elders is created (and these old ages have been developed through different models, such as the “*together-but-different*” and the “*separate-but-equal*” ones). And it should not be forgotten that for such a framework of knowledge and management practices to be put into action and gain legitimacy the constitution of LGBT old age must have previously occurred in a gradual and continual manner - this topic has been analyzed up to now.

It is noteworthy that the period of the *pragmatic turn* has been lavish with attracting a lot of interest from researchers, generating a large number of investigations, publications and debates in various parts of the world, and with increasing political attention in North America. One of the ways this can be measured is through the observation of federal, state and municipal funds being granted to important projects directed to this “population” in the United States.³⁴

Moreover, lately it has also been possible to see this expansion and legitimation through the launch of several documentary films on “LGBT old age,” for instance. These films overall show the urgent need to mobilize civil society for the establishment of public policies and they are closely in tune with the *pragmatic gerontological view*. Among these documentaries, some acclaimed at festivals around the world can be listed: *Gen Silent* (2011), *Edie and Thea* (2009), *Old Age is No Place for Sissies* (2009) and *Ten More Good Years* (2007). In addition to documentaries, there have also been some interesting popular mainstream films that address the issue of homosexual old age in different contexts - much more encouraging, though still problematic, ones - than those from the first moment in the literature. Examples of recent movies are *Beginners* (2010), *The Best Exotic Marigold Hotel* (2011), and *Love Is Strange* (2014).

Taking into account these general questions that contextualize the pragmatic turn, one could postulate that the process of gradual rise of *LGBT aging* has reached a much higher level and reverberated as an issue which can be progressively legitimated also in an international political and social panorama. One must keep in mind, however, that the process of rise, constitution and invention of this old age is not exhausted or over and one would assume that it will go through new transformations both in the context of dynamics intrinsic to the literature in question, and in the broader social environment. In addition, the process of generational succession of the cohorts currently at middle age may also leave peculiar marks on this conformation as these cohorts enter old age.

34 An example of governmental financial support for projects aimed at *LGBT elders* - which itself could be used as an index for the spread of the issue - is the case of the *National Resource Center on LGBT Aging*. It was created by SAGE in New York in February, 2010 through funds granted by the *US Department of Health and Human Services*. This institution, according to SAGE website, is the first and only reference center dedicated to improving the quality of services and support offered to lesbian, gay, bisexual and / or transgender elderly in the United States. [Source: www.sage.usa.org/programs/nrc.cfm. Visited on 01/06/2013 at 04:17 am].

However, it must finally be highlighted that with the development of a complex set of factors such as knowledges, discourses, changes to the imagery of representations and mainly movements for the institutionalization of models of practical management of these *LGBT old ages*, one might venture to assert (perhaps risking some ambiguity) that at present and especially in the United States the “LGBT elders” seem to be created. Even if, as stated earlier, this constitution is in progress and seems susceptible to resignifications in the short term. When emphasizing this “creation”, I refer to the gradual process of discernment of a population segment in the social whole. Due to its characteristics and needs viewed as idiosyncratic, this segment hence requires specific public policies. Consequently, in order that these policies be implemented, it is necessary, above all, to show that the social segment in question lacks them. The creation of these policies, let us face it, seems to be happening fairly effectively in North America.

Final Considerations

Considering the progress of the text up to this point, if it is feasible to consider that in North America the “LGBT elders” are already created, then it be equally convenient and productive to ask ourselves some questions. After all, what kind of “LGBT old age” has recently been produced or supported by the LGBT gerontology since the pragmatic turn? In what ways has this gerontological field stipulated standards and references to “good old age” and “successful aging” (as well as to its opposites)? Alternatively, how have the prescriptive bases for “good LGBT old age” been managed? The analyses of these questions, however, - due to what was originally proposed to be teased out and because of the limitations on space an article has - should be presented and published at a later time.

Finally, it is very important to point out that the recent Brazilian field of research in aging, sexual practices, gender and sexual identities has developed very expressively. This field includes important works which in disparate ways focus on scenarios of aging and male homosexuality, such as Simões (2011), Paiva (2009, Henning (2010, 2013, 2014) Mota (2009), Neman do Nascimento (2013), Pocahy (2011), Passamani (2013), Saggese (2013), Duarte (2013), Kerry dos Santos (2012).

Furthermore, one may include relevant investigations concerning female homosexuality and aging in Brazil, such as Lima (2006), Moraes (2010) Lacombe (2010), and finally those concerning transgender aging, such as in Siqueira (2004 , 2009), Antunes (2010), among other authors. It is noteworthy that this field has shown the potential to grow exponentially in the coming years, given the great interest that it has raised at conferences and academic events in Brazil and in the rest of South America. However, due to feasibility criteria, I have tried to restrict myself to a review of the Anglophone gerontological field, which, by the way, up to the moment when I wrote the first version of this text (and as far as I was able to access), had not yet been attempted - not even in North America.

Therefore, the aim of this article was to present and critically analyze the different moments in the development of LGBT gerontology, its main controversies and trends, as well as to bring to light the concomitant production of the idea of “*homosexual old age*” (and more recently of “*LGBT old age*”) and of the new aged subjects: the “LGBT elders”. Therefore, the broader objective of the text, together with presenting an extensive, systematic and critical review of the covered literature, was also to turn it into a basic map of the main theories, developments and clashes that have crossed the field in recent decades. Thus, I hope this article can clarify key characteristics and issues of the field in order to contribute to the renewed continuity of new researchers’ interests in the interplay between aging, old age, sexuality, gender identities and the creation of public policies.

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