Gender is a contested area. There is no single or simple definition. When ‘gender’ is considered in cultural gerontology, it is common to focus on ‘women,’ ‘men and women’ or ‘relations between them.’ Much research uses this two-gender model to examine gender differences. However, gender is just as relevant in relations between women, and between men, with hierarchies within genders, relations of gender, sex and sexuality, and intersections of genders and other social divisions. To state the obvious, older men are just as gendered as older women. As gender relations have become more recognized within cultural gerontology and its engagements with feminist theory, the very notion of gender itself has become more problematized. In reviewing what has now become a rather large field within cultural gerontology, we outline five broad formulations of theorizing around gender: gender based on sex; masculinity/femininity and sex roles; gender categoricalism, gender structures, and structurally contextualized practices; poststructuralist, discursive and deconstructive approaches; and the material-discursive. Though contrasting, these positions overlap and intersect, as do their implications for cultural gerontology.

Gender based on sex

Sex and sex differences are often naturalized as fixed in biology. The sexed body can be understood as determinate: the biological formulation of what is female or male. Biological approaches to the female/male body have been founded on instinct, territoriality, physical size, chromosomal difference and hormonal difference. Primary sex characteristics generally refer to chromosomal structure; secondary sex characteristics include: gonadal structure; genital development; hormonal structure; presence/absence of breasts and certain body hair. Yet, up to 6–7 weeks' gestation, female and male embryos have externally identical genitalia; after that, at every stage the basic pattern for the human is female, away from which development may proceed to produce the male. There are major chromosomal variations beyond the most common XX and XY types, with fifteen types of intersexuality. Critical feminist biologists, such as Fausto-Sterling (2000), have developed sophisticated, grounded accounts of how biology does not neatly conform to a two-sex female/male model but is much more variegated in many possible sexes.

The idea of ‘the natural body’ is persistent in everyday, professional, medical and academic discourses. Ageing is widely seen as natural decline, with its complementary medicalization.
Women’s bodies are often (and more likely than men’s to be) positioned as closer to the biological and the realm of the inferior ‘natural’ (Balsamo 1996). Feminists have demonstrated how biological and medical accounts of female and male are based on gendered, socially constructed definitions and stereotypes (Martin 1991, Grosz 1994). In relation to ageing, older bodies are often socially constructed as oppositional to young bodies, similar to how female and male bodies are positioned as binary opposites. What is deemed as ‘natural’ for older women and men is gendered, with discourses of masculinity/femininity and successful ageing entwined (Calasanti and King 2007, Smith et al. 2007).

**Masculinity/femininity and sex/gender roles**

The concept of gender has spawned kindred terms, such as gendering or gendered, referring to how people, situations, objects and schemas can be given meaning, empirically and analytically, through gender and gender relations. The distinction of sex, as biological sex differences, from gender, as socio-cultural constructions of sex differences (Oakley 1972), has led to much empirical research on sex/gender differences and their social assumptions and perceptions (Maccoby and Jacklin 1974). These have often focused on psychological scales measuring ‘masculinity-femininity,’ sex/gender roles and gender socialization. There are, however, problems with this approach (Eichler 1980), including cultural specificity, relative lack of analysis of power, change and social structures, methodological difficulties in constructing measurement scales and reification of masculinity/femininity as singular qualities. Even so, the sex/gender model has prompted path-breaking work on gender relations, especially at psychological, interpersonal and cultural levels.

Feminist theorization and research on ageing is relatively new (pace de Beauvoir 1972). Early in the 1980s, Macdonald and Rich wrote about ageism and berated the ‘silence of the old’ in the women’s movement (1984, 111). Until relatively recently there had been neglect of the interrelationship between sexism and ageism. In cultural gerontology this absence of research on gender issues and gender roles has been highlighted by feminist writers who have explored the relations between ageism and gender power relations (Arber and Ginn 1991, Arber and Evandrou 1993, Bernard and Meade 1993, Maynard 1999, Arber et al. 2003). Estes (2005, 552) points out ‘gender is a crucial organising principle in the economic and power relations of the social institutions of the family, the state, and the market,’ and this shapes women’s and men’s experiences of ageing and access to resources in old age.

One of the topics explored by feminist writers in relation to economic and power relations is the gendering of work roles across the life course and into old age. Gender divisions of labor influence the type of work women have access to, and their opportunities to accrue lifetime earnings and adequate pensions (Ginn and Arber 1999, Ginn 2003). Women are often involved in care work, which is itself ‘quintessentially gendered’ (Twigg 2004, 68), with the identity of careworker constructed around hegemonic feminine traits associated with emotion, body and nature. Pensions are strongly linked to work histories, and women are more likely to be involved in lower paid work and domestic and childcare responsibilities, which impact on their state and non-state pension (Foster and Smitherham 2013). This means that older women are often relatively poor due to ‘their active participation in social reproduction, as mothers, grandmothers, daughters and wives, that restricts their employment and pension-building’ (Foster and Smitherham 2013, 99).

Although women predominate in care work, older men are often involved in caring for their spouse in later life (Davidson et al. 2000, Ribeiro et al. 2007). One key finding is that men engaged in care work negotiate and maintain their masculine identity by deriving ‘some sense of
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worth, and almost paradoxically, reaffirming their sense of masculinity’ (Ribeiro et al. 2007, 311). This can be seen in the ways men approach grandfatherhood, often influenced by gendered discourse. Grandfathers may find themselves caught between a more traditional masculinity that characterised their experiences as fathers and current expectations about gender roles that challenge the earlier gender order (Scraton and Holland 2006).

More generally, constructions and images of men and masculinity are dominated by those of younger and ‘middle years.’ Indeed, the younger male body is often used as the ideal standard for manliness, linked in turn to expectations for ‘men to be independent, tough, assertive, emotionally restrictive, competitive’ (Smith et al. 2007, 326). The natural aged body, which does not conform to youthful masculine or feminine ideals, may be perceived to have aged unsuccessfully in contrast with ‘successful,’ positive, consumer-oriented ageing (Calasanti and King 2005). Anti-ageing medicines such as Viagra and testosterone supplements are advertised as ways to turn back the biological clock and (re)affirm heterosexual masculine identities (Marshall and Katz 2006, Potts et al. 2006, Calasanti and King 2007). Equally, women are expected to preserve their femininity as they grow older. However, as Sontag (1972, 31) famously said, ‘Men are “allowed” to age without penalty, in several ways, that women are not.’ A double standard of ageing persists, with women more pressured to maintain a ‘natural’ youthful body and appearance than men.

Gender categoricalism, gender structures and structurally contextualized practices

Some socio-cultural perspectives on gender have articulated categoricalist or structuralist concepts of gender relations, such as patriarchy, gender orders, gender contracts and systems of male dominance. Sometimes such structural approaches have been developed through standpoint theory, in which knowledge is linked directly to social positioning, and sometimes to sexual difference theories, in which the social and bodily foundation of sex/gender is emphasized as being a source of knowledge. In the late 1970s, critiques of the concept of patriarchy and relatively fixed categorical approaches to gender (Rowbotham 1979) appeared, resulting in differentiated, pluralized approaches to gender. This reformulation fitted closely with revisions of patriarchy as historical, multiple structures (Walby 1986, 1990, Hearn 1987, 1992). Gender can now be seen as being about both plural femininities and masculinities, including hegemonic masculinity, as structurally contextualized power-laden gender practices (Carrigan et al. 1985). In this view, when men do ‘women’s work’ or are ‘coming to terms’ with disability (Gerschick and Miller 1995) or are in old age ‘striving to maintain the male façade’ (Alex et al. 2008), they may still conform to hegemonic masculinity (cf. Hearn and Sandberg 2009).

Categoricalist and structuralist concepts of gender relations are evident in gerontological accounts where a ‘double’ and/or ‘triple’ jeopardy approach has been used to explain gender inequality in later life (Sontag 1972, Arber and Ginn 1991, Estes 2001). Here the focus is on women’s experiences of ageing and how they differ from those of men. It is argued that older women have been ignored in social gerontology and feminism, and that this has exacerbated their existing invisibility and disadvantage in society (Arber and Ginn 1991). In this view, patriarchal relations shape women’s experiences of ageing, and the combination of sexism and ageism means they are more likely than men to be stigmatized and marginalized in later life (Arber and Ginn 1991). A problem with this approach is its underlying assumption that ageing is more problematic for women. Yet evidence suggests women use different strategies to resist negative stereotypes and remain in control of their lives as they age (Wray 2003, 2004). This is evident in the way older women maintain a sense of self through resisting definitions of ‘frail’
or ‘homebound’ (Grenier and Hanley 2007, 218). Nevertheless, a focus on the difficulties older women face may inadvertently reproduce and reinforce categorical approaches that assume gender to be only about women (Krekula 2007). Yet research on men’s experiences has shown that they also find ageing a difficult experience (Canham 2009). The male ageing body, often associated with weakness, invisibility and dependency, runs counter to hegemonic masculinity: contradictorily, older men may benefit through sexism, are often, but not always, culturally disadvantaged through ageism (Hearn 1995).

It is also evident that the use of categories as a conceptual tool may exacerbate the essentialist view of identity as fixed and unchanging. To avoid this, Heaphy (2007) argues that sexuality should not simply be ‘added’ into existing conceptualizations of age and gender. Rather, it should be placed at the center to illuminate how sexuality intersects with gender to influence ‘the material, social and cultural resources that individuals have access to in their negotiations of ageing and later life’ (Heaphy 2007, 207). Explorations of alternative sexual practices and experiences, and how sexualities intersect with age, class, ethnicity and other categories, provide insights into the multiple forms ageing identities take. Indeed, ‘gerontological approaches [more generally] have often made ethnic and cultural experiences of later life invisible’ (Wray 2003, 511).

Poststructuralist, discursive and deconstructive approaches

Since the mid-1980s increasing attention has been paid to gendered practices and processes, multiple/composite masculinities and femininities, life stories and subjectivities, and the social construction of sexualities. Such insights are often developed within poststructuralist approaches. Gender may be (per)formed as ‘subjectivities’ and ‘subject positions’ in and as discourse(s). A pervasive constraint in conceptualizing gender is the persistence of dichotomies: woman/man; feminine/masculine; femininity/masculinity; female/male. While these are clearly important differentiations, they speak to only part of the possibilities of what gender might be or become. The very distinction between sex and gender also brings difficulties: it may imply that biology is pre-social, though biology is constituted in the social (Bondi 1998). Challenges to dichotomous views of gender come from sexuality studies, queer studies (that problematize gender and sexuality categories), transgender studies (focusing on transgender people and the wider implications of transgender) and crip theory (that brings these studies together with disability studies). Gender, or gendering, may be an unfinished, performed process, in which gender is made by doing in immediate practice, not by being a certain gender, or from any essence or fixed categories. This returns us to sociological debates around social and linguistic constructions of sex and sexual difference (Garfinkel 1967, Kessler and McKenna 1978). Somewhat similarly, so-called post-positions ‘take apart the gendered social order by multiplying genders or doing away with them entirely’ (Lorber 2005, 12). Connections with other social divisions and differences are central here, as are deconstructions of sex, sexuality and gender, and even abolition of taken-for-granted social-sexual-gender categories.

Femininity and masculinity are not static categories but change across the life course, taking on different meanings over generation and time. As Spector-Mersel (2006, 70) has argued, ‘masculinities are bound to social clocks that ascribe different models of manhood to different periods in men’s lives.’ The same could be said about femininities, temporally situated in life stories and histories. Yet within gender studies and social gerontology there has been a lack of work on the interrelationship of historical (generational) and lifespan time, and how these intersect with age and gender to produce diverse life stories (Spector-Mersel 2006). In this respect, Jackson’s (2003) autoethnographic work on ageing, combining grounded description, reflexivity and non-heroic autobiographical ‘fragmentary body-selves’ is welcome.
It has been argued there is a dearth of research on and theorization of the experiences of older lesbian, gay, bisexual and transgender people, which are often represented as fixed, largely stable, categories (Cronin 2004, Heaphy 2007, Brown 2009). This has resulted in a silencing of the experiences of LGBT elders in gerontological theories that often prescribe heteronormative perspectives on ageing and the life course characterized by marriage, reproduction, family and eventually grandchildren (Brown 2009). Heteronormativity refers to the organization of society around heterosexuality as the norm, resulting in the ‘belief that heterosexuality is superior to homosexuality’ (Cronin and King 2009, 70). Cultural gerontology has now seen the beginning of analysis of non-normative constructions of gender and sexuality, with attempts to move from fixed categoricalism towards research that emphasizes complex formations of unstable identities across the life course (Cronin and King 2010).

This ‘troubling’ of what are perceived as stable fixed identities (Butler 1990) is the main analytical theme of queer theorists (Seidman 1997). Age, alongside other identities of gender and sexuality, is theorized as a social construct that is unstable, fluid and subject to regulation through power/knowledge discourse. The disciplinary power of heteronormativity is destabilized when older lesbian, gay, bisexual, transgender, transsexual, queer and intersexual (LGBTQI) experiences are made visible as political ‘identities that because of heteronormativity both reproduce and transgress existing norms’ (King and Cronin 2010, 7). Identities of age, gender and sexuality intersect, creating new possibilities for ageing gendered bodies that contest hierarchical binaries of young/old, heterosexual/homosexual, woman/man. This may offer new ways of thinking about how heteronormative attitudes and behaviors influence what it means to ‘age successfully.’ A recent qualitative study exploring the experiences of ‘successful ageing’ amongst LGBT older adults found that they face unique challenges as they age. Many had ‘accumulated experiences of social exclusion and marginalization across the life course’ (Van Wagenen et al. 2013, 11). Heteronormative assumptions may underpin health and social care policy and practice, with fixed gender/sexual identity categories inadvertently affecting the type of care seen as appropriate in later life (King and Cronin 2010).

The material-discursive

The intersection of poststructuralist and materialist approaches to gender is such that human-nature relations, even matter itself, can be reconceptualized as contingent processes. Humans thence appear as combinations of systems of production and reproduction, however fragmentary, of ideology and discourse, and relations to non-human nature and things. An important influence in moves towards incorporating the discursive in the material was Dorothy Smith’s (1990) work connecting political economy, texts and relations of ruling, and inspiring the material-discursive (Hearn 1992). Science and Technology Studies scholars have coined such terms as material-semiotic actors (Haraway 1992) and human–non-human assemblies to address human–non-human and human-machine relations. In recent studies of gender and science, there is a (re)turn to materialism, but beyond a strict separation of the material and the discursive/semiotic (Alamo and Hekman 2008). Butler (1993, 9) expounded on how discourse comes to (become) matter as ‘a process of materialisation that stabilises over time to produce the effect of boundary, fixity, and surface.’ Barad (1998) shifted focus onto how matter comes to matter, extending discussion to non-human matter. Gender and sex are not separable from bodily matter, and ‘matter’ is constructed, partly through human/non-human species interactions (Haraway 1989, 2008).

Although ageing bodies are socially and culturally constructed, they also have a material physiological dimension that cannot be denied. Ageing has a corporeal reality that includes
perceptions and experiences of illness and death, yet this is often denied in cultural constructions focusing on the denial and avoidance of ageing. Hence, there is a need to recognize the physical realities of growing older in a way that is able to conceptualize ‘nature as a social text’ (Twigg 2004, 60). Furthermore, the boundaries between nature/culture and male/female are artificial; there is nothing essentially female or natural about women’s bodies. As Grosz argued, ‘human biology must be always already cultural in order for culture to have any effect on it’ (1987, 7 italics in original). This means that the ageing body is not ‘natural,’ but is given meaning through cultural discourses: the ‘natural’ sexed body cannot be outside culture (Hurd Clarke and Griffin 2007, 188).

The appearance of ageing bodies may be altered through technological and cosmetic interventions and practices that may be used to resist the bodily changes associated with ageing. Research in this area has highlighted the way that women and men seek out anti-ageing cosmetics, surgical procedures, and pills, in order to avoid being stereotyped as old in an ageist culture (Davis 1995, Calasanti and King 2007). Hurd Clarke and Griffin (2007) explored how older women, aged 50 to 70, distinguished between natural and unnatural ageing. Women in their fifties were more likely than those older to ‘reject the unmodified body’ and use technological beauty interventions to resist the physical realities of ageing in order to pass for ‘a normal, unmodified, and youthful body’ rather than one that has undergone technological intervention (2007, 198). According to the women, a defining feature of a good intervention was the extent to which it looked ‘natural.’ Hurd Clarke and Griffin (2007, 199) conclude that the current obsession with youthfulness and female beauty that normalizes beauty work technologies is ‘an inherently ageist extension of the cyborg in contemporary society.’ In ageist western societies, where ageing bodies are often regarded as non-sexual and in decline, it is not surprising that older men and women embrace cosmetic products in order to maintain a youthful body and appearance that complies with normative expectations of heterosexual femininity and masculinity (Twigg 2004).

In contrast, the idea that cosmetic surgery is an ageist practice enabling people to deny that they are growing older has been challenged. Garnham argues that when older people use cosmetic surgery, they engage in a form of self-care that allows them to restyle the older body and subvert ageist stereotypes. Accordingly, cosmetic surgery can be a creative self-reflexive act that makes it possible for older people to ‘design’ older (Garnham 2013, 40), that is, to use their agency to make their own ageing and old age in novel and very different ways. Criticizing those who refashion their bodies privileges an essentialist notion of a ‘naturally’ ageing body, and may reinforce oppressive judgments of how an ageing body should look. Both women and men choose to use various interventions to alter the appearance of their bodies to ‘look better’ rather than younger (Garnham 2013).

**Conclusion**

Whichever way gender, and the variations of difference around gender, are understood, individual and collective differences in relation to age, class and ethnicity may be formed intersectionally, resulting in views that solidify, contest or deconstruct difference. The question of gender and intersectionality, or more precisely gendered intersectionalities and intersectional gender(s), is a challenge for theorizing gender and age(ing). It is not enough to simply add gender to existing frameworks: women are not only women, men are not only men. Instead, the challenge is to theorize the interconnections of age, gender(s), sexualities, ethnicities, and other social divisions, and their location in time, place and culture. Cultural gerontology offers major opportunities to
explore the fascinating multiplicity of ways identities intersect, and importantly how dimensions of time, culture, life history and location overlay these.

References

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