

# **What's Happening in the World of Older Western Women?**

**by**

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## **Abstract**

Little is known about how the generations of World War Two and baby boomer women respond to the contemporary North American assumptions that negate their sexuality, denigrate their physical appearance, and question their physical and cognitive abilities. This thesis explores how the older women represented in my research respond to the norms, expectations and prohibitions constructed by the discourses of ageism, heterosexuality, gender and beauty in documentary films, published research, books and media reports. I argue that their responses are diverse and that older women should not be stereotyped as a homogenous group. Many describe themselves as sexual beings and others, living non-sexual lives, express their contentment. Influenced by the social repercussions of ageing, the majority of the older women represented in my research are not resisting the demands of the ideology of youth; they are attempting to conceal their age, and exposing a cultural preoccupation with weight.

**Keywords:** Ageism, beauty; bodies, faces, weight; grey hair, menopause; gender, heterosexuality, female sexual dysfunction; cosmetic surgery

*For My Daughters*

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## Prologue

*Carrying a heavy back pack, I climbed on a city bus at the corner of W. Hastings and Seymour Streets in Vancouver and held out both my student bus pass and Simon Fraser University (SFU) student card for the driver's inspection. The driver looked at them and said in a loud and accusatory voice, "[w]here did you get that"? I responded, "[f]rom SFU, I'm a student". His retort was, "[y]ou're too old to be a student; you have to pay". I refused. Encouraged by an older man saying in a loud voice, "[g]ood for you, don't pay!", I moved toward the seating area. As I did, the driver called out, "[h]ey" and without turning toward him I said, "[i]f you think I'm cheating, call your supervisor". The other passengers were staring, and my face was hot with embarrassment, as I sat down.*

*The driver did not call his supervisor, but I did when I reached home. I believe Translink's Representative intended to apologize for the driver's remarks but, when she learned I was over 60 she said, "[w]ell, it was an easy mistake to make". Regrettably, rather than explaining that my age is obvious and that the driver's words exemplified both ageist and gendered discrimination, I was so angry, I hung up. I believe that the driver's ageist beliefs and stereotyped assumptions about older women excluded me from the category of student and that on hearing my age, Translink's representative understood, and possibly agreed with the driver's assessment of my non-student status. I was surprised, shamed, and angered by my experience.*

*(Fieldnotes, Faulds, 2011, November 20)*

*Shopping in a neighbourhood store, I found lapel buttons featuring unflattering pictures of older women and the messages: "I'm still hot, it just comes in flashes," and "My sex life isn't dead yet, but the buzzards are circling." The greeting "Happy Birthday Old Woman" in bold red print appeared on two cards; inside I read, "at your age getting lucky means finding your car in the parking lot" and "at your age getting a little action means the prunes are working". One particularly unpleasant card, featuring a picture of a, deeply wrinkled, overweight and grey haired woman, asked the question: "Do you know what the best form of birth control is at your age?" Inside the answer was: "NUDITY!" I do not believe the messages on the lapel buttons and the cards are funny; do other older women?*

*(Fieldnotes, Faulds, 2011 July 4)*

Cruikshank (2009) writes that older heterosexual women's sexuality is a "subject of mirth" in popular culture today (p. 106). Defining the mirth response as smiling and laughter, Kozbelt and Nishioka (2010) explain that it is elicited when the meaning of jokes that exaggerate, reverse, ridicule and compare the culturally moral, familiar and natural with the unfamiliar, unnatural, and immoral is understood and appreciated (p. 376). Within cultural groups sharing a common history and embedded references, humour

strengthens relationships, sets social boundaries, and endows high status individuals with the right to laugh at those deemed lower status.. Although humour can be employed to challenge the status quo, humour generally upholds the moral order (Fine & De Soucey, 2005).

Older women's sexuality and sexual desirability are objects of mirth in contemporary media as well. An excellent example is a televised advertisement for Snickers chocolate bars. As a young man eats one of the bars, he flirts with an older woman and the words "Snickers Impairs Judgment" slash diagonally across the screen in bold script (Media Watch, 2011). The implied meaning of the advertisement is not difficult to grasp—the chocolate bar has an aphrodisiacal effect and, as a result, the young man engages in behaviour that has both romantic and sexual overtones with an older woman. The humour, if it is humour, results from the reversal and transgression of the culturally familiar, moral, and natural pairing of youth with youth and ridicules the older woman's sexual desirability.

I argue that messages such as these are not intended to question or contest society's familiar and moral beliefs about older women's sexuality and their physical attractiveness. The words, "Snickers Impairs Judgment," I argue, reveal social values. They are manifestations of ageist and gendered beliefs, and they invoke the myths, stereotypes, norms, and assumptions, circulated by the discourses of heteronormative sexuality. Furthermore, the slogan, slashing across the screen, represents and defines the social boundary that divides the high status young from the lower status old.

Fine and De Soucey (2005) ask if "disrespect for others [disguised as humour] can be written off without accusation or apology" (p. 3)? I answer "no." I argue we should question what relationships are being strengthened, what societal boundaries are being reinforced, what societal norms are referenced, and what societal values permit the young to laugh at and humiliate older women in contemporary North America. My emotional and physical responses to the lapel buttons, greeting cards, and the Snickers' advertisement, confirm Cuddy, Norton, and Fiske's (2005) belief that "noticing age is not inherently offensive, but acting on aged-based stereotypes clearly is" (p. 280).

As an older woman, I have become wary in social interactions and I have begun to analyze the “compliments” I receive: “my grandmother is not like you;” “I wish my grandmother would get a purple streak;” “you are not old” or “I never think of you as old;” “I don’t believe you are 70, you *seem* so much younger;” and, what I think is the most disagreeable one to hear, “you think like a man.” I want to ask the speaker(s), compared to what or to whom, what is your image of me? Why do strangers frequently, and seemingly automatically, categorize me as a grandmother? What stereotype of the older woman is the speaker invoking while simultaneously denying that it is applicable to me? And why is “thinking like a man” a compliment? Do such “compliments” expose the speaker’s discomfort with my being, my age, my face, or my body? Is the speaker attempting to reassure me that I am not like other older women?

*I wonder how other older women living in the North American context of an ideology of youth respond to ageist incidents and the greeting cards and media messages that ridicule their sexuality, their bodies, and their cognitive abilities. When their age inspires insensitive and humiliating comments and actions, do they experience emotional and physical reactions similar to mine? How do they respond to compliments that do not “feel” like compliments?*

(Fieldnotes, Faulds, 2012, July 13)

# **Chapter 1.**

## **Introduction**

As an older North American woman, the deeply entwined and politically inflected discourses of ageism, heterosexuality, gender, and beauty encircle, and attempt to control my life. Composed of systems of representation, stereotypes, and sets of unwritten rules and boundaries, the discourses present me with a multitude of societal prohibitions, expectations, and challenges in my daily life. Mills (2004) argues that as discursive statements representing, categorizing and homogenizing individuals and groups are reiterated over time, they gain an “accrued truth value” and an increased influence on social practices and beliefs (p. 67). I believe that North America’s dominant discourses have achieved an accrued truth value which has endowed them with the societal power to define older women, normalize societal beliefs, regulate older women’s behaviours, and constrain our lives. A more detailed discussion of my use of the analytic framework of discourse analysis follows.

## **Age Categories**

The British Household Panel Survey classifies individuals into three age categories -- individuals between the ages of 16 and 29 are youthful; middle age begins at 30 and extends to age 59; and those over 60 are deemed to have entered “later life” or “the third age” (Scott & Nolan, 2005, p. 15). To me, the terms “third age” and “later life” seem pejorative; they imply physical and cognitive decline and possibly, imminent death. Rather than use those descriptors, I prefer (what I believe to be) the less pejorative term “older.” For the purposes of my research, then, the term “older” refers to women over the age of 55.

## Who are today's older North American Women?

Sylvia Porter, a *New York Post* columnist, was the first to use the term “baby boom” in 1951 to describe the sudden increase in the number of births between the end of the Second World War in 1945 and 1951. Born in 1943, I am a member of the World War Two cohort when a slight increase in births was noted in Canada (the greatest increase in births occurred between 1945 and 1949) (Statistics Canada, 2011). The first of the “white and middle class” (Allyn, 2001, p. 5) North American women of the World War Two and baby boomer generations were raised in the 1950s, an era which McHugh (2002) terms “conservative and sexually repressive” (p. 32), and Allyn (2001) describes as “highly politicized” (p. 6).

By the 1960s, North America's cultural climate was changing. Defining revolution as “a sudden and unexpected period of social transformation,” Allyn (2001, p. 10) argues that a combination of Helen Gurley Brown's best seller *Sex and the Single Girl* published in 1962, the advent of the birth control pill, and, I would add, a youthful and lusty rebellion against a repressive double standard of sexual morality and the pursuit of sexual liberation, motivated some young World War Two and baby boomer women to join the sexual revolution of the 1960s and 1970s. Known as the “free love generation” (Allyn, 2001, p. 4), the experiences and new and liberated outlook of these women challenged North America's societal beliefs about sex, heterosexuality, and bodies (Carpenter, Nathanson, & Young, 2006, p. 96). Furthermore, in the 1960s, the second wave feminist movement began to challenge the gendered beliefs, regulations and prohibitions that dominated women's lives at the governmental, institutional and social levels. Wine and Ristock (1999) write that the “most impressive impact” of that early feminist movement is the “massive shift” in the Canadian consciousness. As a result, “women's right to higher education, reproductive freedom, equal treatment in the work place and freedom from violence” has been affirmed (p. 1).

In part because of women's longevity (women live an average of 82.1 years and men average 77.2 years), Statistics Canada (2009) projected that by the year 2012 the World War Two and baby boomer women would comprise 63% of Canada's population over the age of 65. Born in 1945, the first of the baby boomer women reached their 60<sup>th</sup> year in 2005 and observed their 65<sup>th</sup> in 2010. World War Two women born in 1943

celebrated their 60<sup>th</sup> birthdays in 2003 and commemorated their 65<sup>th</sup> in 2008; I was 70 in 2013. According to Rice (2001), as these women aged, Kinsey, Pomeroy and Martin's 1949 and Masters and Johnson's 1966 research confirmed that sexuality is an essential part of being human. We no longer think of sex only in procreative terms, and in the years since the sexual revolution, self-determination for teens, adults, and alternative sexualities became increasingly acceptable in North American society. Reflecting the socio-cultural changes brought about by the sexual revolution, the feminist movement, and improvements in health care and longevity, I believe that many of today's older woman will provide descriptions of their sexuality, desires, fantasies, and bodies that differ from those of her mother's and grandmother's generations.

This thesis explores the norms and standards central to the ideology of youth, and illustrates the ways in which some older women are actively critiquing and resisting those socially powerful influences. Analyzing the words and thoughts of older Western women in published research reports, books, the media, and documentary films, as well as my field journal (covering the period July 2011 to November 2012) that includes my experiences, my responses to those experiences and, conversations with friends, I unpack the interconnections between the ideology of youth and the normative standards that are so prominent in the Western world today. I argue that these dominant discourses have a negative impact on older North American women's lives in the present. Moreover, I contend that the prohibitions and constraints placed on women's lives in the 18<sup>th</sup> and 19<sup>th</sup> century (Rye & Meaney, 2007), continue to shape the entrenched "myths, misconceptions and half-truths" (Thornton, 2002, p. 303) disseminated in the discourses, the media and some research reports. Together they sustain the societal assumptions and stereotypes that "narrow and restrict an older woman's sexuality" (Lai & Hynie, 2010, p. 360), denigrate her persona and body, deem her a societally useless, economic drain (Cruikshank, 2009), exclude her participation in many research projects (Gott & Hinchliff, 2003), and adversely affect her acceptance in many social situations (Old Women's Project, 2011).

## Discourse and Ideology

The Collins English Dictionary (2003) defines discourse as: “(1) verbal communication, talk, conversation; (2) a formal treatment of a subject in speech or writing; and (3) a unit of text used by linguists for the analysis of linguistic phenomenon that range over more than one sentence” (p. 473). The meaning of “discourse” as employed by social analysts, however, is much broader. Demonstrating that discourse “has perhaps the widest range of possible significations in literary and cultural theory,” Mills (2004) cites Foucault (1972):

Instead of gradually reducing the rather fluctuating meaning of the word discourse, I believe I have in fact added to its meanings: treating it sometimes as the general domain of all statements, sometimes as an individualizable group of statements, and sometimes as a regulated practice that accounts for a number of statements. (p. 6)

Basing her definition on Foucault’s (1972) belief that discourses are “practices that systematically form the objects of which they speak,” Mills (2004) defines discourse as “sets of sanctioned statements with some institutionalized force” which “have a profound influence on the way that individuals think and act” (p. 15). Incorporating Foucault’s (1972) words and Mills’ (2004) work, for the purposes of the thesis, my definition of discourse is:

*Implicitly understood by the speaker and their audience, discourse is words and statements that represent, legitimize, normalize, and reflect the power dynamics, cultural conventions, societal expectations, categories and normative beliefs that shape North America’s dominant societal beliefs, and proscribe the practices of everyday life.*

## Hegemonic Discourses

Said (1979) describes politicized, hegemonic discourses as a Western form of dominating, disciplining, and structuring power. Generating statements that define and authorize views of individuals and groups, he argues that hegemonic discourses create “a body of theory and practices” (p. 7) which sanctions the dominance of some cultural forms, ideas, images, and institutions, and generates the value laden vocabularies supporting the “othering” of groups and individuals. Othering is defined by Krumer-Nevo



and Sidi (2012) as a process by which the dominant group translates an identified difference into social, intellectual and physical inferiority. As a means of social devaluation, discipline and control, that difference is characterized by stereotypes, distorted representations, and misconceptions.

I argue that the discourses of ageism, heterosexuality, gender, and beauty fulfill the requirements of pluralized, political and institutionally supported hegemonic discourses in contemporary North America. They structure difference and distort representations, create negative images, stereotypes and categories, normalize and legitimize vocabularies, and discipline lives. I agree with Scott (1991) that the discourses reveal the “repressive mechanisms” of difference that position subjects in society and produce their experience (p. 779), and I argue, that the hegemonic discourses have positioned older women as the “other”.

## **Ideology**

Discourses and ideologies are almost indistinguishable; hegemonic discourses sustain ideologies and ideologies create and sustain hegemonic discourses. Citing Louis Althusser’s (1989) definition of ideology as “a representation of the way things are which does not accord with reality but which does work in the interests of the dominant classes, groups or institutions in society”, Mills (2004) describes ideology as “political statements” understood as “scientific critique” (p. 146). Ideologies “force” individuals to recognize themselves as particular types of subjects, to understand that they occupy a position within hierarchized systems of differentiation, and to accept the status quo (Mills, 2004, p. 31). I argue that ideology of youth serves a similar function in North America today. Furthermore, its hierarchy of social power and value is maintained and enforced by the categories, vocabularies, stereotypes, misrepresentations, and negative images disseminated in hegemonic discourses. For clarity, I will refer to the North American discursive statements that shape societal views and assumptions about older women, ageing, heterosexuality, and physical appearance as discourses which are interwoven within the ideology of youth; references to the discourses signifies the ideology of youth and the ideology of youth represents the discourses.

## **Discourse Analysis**

Bacchi (2005) describes “two central analytic traditions in discourse theory” (p. 199). She labels the first “discourse analysis”. Focusing on data gleaned from interviews theorists analyze the speakers’ use of language, speech patterns, metaphors, and rhetorical conventions with the goal of uncovering how speakers negotiate conflicting discursive structures and meanings. In this tradition, Bacchi argues, discourse means “something very close to language” (p. 199). The second analytic tradition is the “critical analysis of discourse” (p. 199), which examines pluralized hegemonic discourses and identifies the political nature of words and statements that constrain some while empowering others. Critical analysis theorists identify the institutionally supported and culturally influenced vocabularies that produce the interpretations, images, and concepts which create “particular understandings of issues and events” and individuals in our North American society (p. 200). Bacchi goes on to explain that the two traditions overlap; both categories of theorists examine the relationship between individual interactions, discursive statements, and social structures of power. Discourse analyses theorists are aware of the historical, political, and cultural contexts that shape the interactions they study, while theorists identified with the critical analysis of discourse are attuned to speech patterns, rhetoric, and metaphors.

## **Agency and Discourse Analysis**

Tensions do arise between the traditions of discourse analysis and the analysis of discourse. Agency, and the question of whether subjects should be viewed “primarily *as users of discourse* or *as constituted in discourse*” is frequently debated (Bacchi, 2005, p. 200 *italics in original*). Ahern (2001) offers the “culturally mediated capacity to act in one’s own interests” or the interests of others as a “provisional definition” of agency (p. 112). As an example, she (2001) points out that, acting on behalf of all North American women and contesting the patriarchy, gendered relationships, and systems of societal power, feminist theorists have “inspired [individual] women’s activism” (p. 112). Bowden and Mummery (2009) write that the struggle for women’s agency and their desire for control over their own bodies and lives is the focus of many feminist projects in North America today. However, within feminist theory the concept of the “autonomous agent” and women’s desire to choose and act freely is contested. Historically women’s choices

and actions have been restricted, and many feminist analysts suggest that because of their social conditioning, women may “lack” the ability to take control of their lives and resist oppression (Bowden and Mummery, 2009 p. 124).

Women’s occupations were taken to be rooted in and a necessary consequence of their reproductive function . . . Women’s destiny to bear and suckle children was taken to define their whole body and mind, and therefore their psychological capacities and social tasks.

(Jordanova as cited in Reischer & Koo, 2004, p. 311)

## **Agency and the Body**

Reischer and Koo (2004) argue that the “prominence of the body in popular culture” has generated “intense academic interest” over the last few decades (p. 298). As theorists contested the “naturalistic” approach to the body as a “biological given”, and redefined the body as a “sociocultural and historical phenomenon” (p. 298), two “primary theoretical themes”— “the symbolic body and the agentic body” (p. 299) have emerged. Describing the symbolic female body, Dumas and Turner (2006) contend that it reproduces and represents societal beliefs and power structures, while Reischer and Koo (2004) describe it as a “billboard” which can be read as a “text” by those with the cultural knowledge to decode the correct social attitudes, moralities, and the cultural meaning of attractiveness the body expresses (p. 300). Reischer and Koo (2004) further state that the symbolic body signals its acceptance of “culturally meaningful systems of values” by subjecting itself to diet and exercise regimes, cosmetic surgery, and other forms of physical self-improvement (p. 301).

In contrast to the symbolic reading of the body, other theorists view the physical body as agentic. “Endowed with the capacity to participate in the creation of social meaning” (Reischer & Koo, 2004, p: 307), the agentic body is “central to experience” (Howson, 2004: p. 14). This perspective asserts that, as we interact in the world, the body mediates our relationships and, as it responds to the material effects of our experiences shaped by society’s hegemonic discourses, traditions, and values, the body structures our actions and perceptions (Howson, 2004). Theoretically, as agentic bodies, women have the ability to resist the demands of the normative standards and social assumptions that police our lives. Reischer and Koo (2004) assert, and I agree, that regardless of whether the body is described as a “template” inscribed with cultural

values, or as a “tool” with the ability to resist and transform those values, the female body is politicized (p. 308).

I propose that women’s bodies are *both* symbolic, expected to reproduce and represent societal morality, power structures, and standards of attractiveness, *and* agentic, with the ability to respond to, and resist those powers. Recognizing the influence of North America’s dominant discourses and Ahern’s (2001) provisional definition of agency as the “culturally mediated ability to act”, I explore the discursive tensions that discipline and frame subjectivity within the North American cultural context, as well as address older women’s acts and words that resist and contest those influences.

Taking many forms, resistance is evident in social situations when a woman spontaneously identifies, responds to, exposes, and contests the cultural beliefs underlying her social experience. She may refuse to use some or all of the age-defying products and procedures that include hair colouring, make up, and cosmetic surgery and she may refuse to participate in the current diet craze and extreme exercise regimes. Resistance to the discourses and the ideology of youth can be expressed through a woman’s actions, storytelling, writing, participating in documentaries, and contributing to research studies. In this mode of both acknowledgment of, and resistance to the discourses, I concur with Mills’ (2004) statement that we can think about “hegemony [as] people’s compliance in their *own* oppression—*without assuming that individuals are necessarily passive victims of systems of thought*” (p. 27, *italics in original*).

## Literature Review

Supporting biased attitudes such as labeling older adults the “grey peril” and creating an irrational fear of both ageing and an ageing population, Cruickshank (2009) argues that negative messages about ageing are “deeply-seated” in North American

culture (p: 139). The Old Woman's Project<sup>1</sup> (2011) reports that ageist beliefs are implemented when, based almost solely on her physical appearance, an older woman is viewed as a stereotypical type rather than an individual, and usually classified into one of two broad and oppositional categories: "the grandmother" and "the crone." The first refers to an image of a physically and mentally frail but loving older woman, devoted to the wellbeing and happiness of others (Old Women's Project, 2011). The "grandmother" is frequently treated condescendingly and addressed in short, simple sentences articulated in the tone of voice employed when talking to "babies, pets and inanimate objects" (Nelson, 2005, p. 209). When assigned to the second category, however, older women are often termed "crones," (Cruickshank, 2009, p. 140) and, because they are described as ugly, selfish, sexless, neurotic, dependent, and decrepit, they are frequently, socially excluded (Old Women's Project, 2011).

Little research is available that examines how the generations of World War Two and baby boomer women describe their sexuality, desires, and fantasies. The supposition appears to be "that sex is irrelevant or certainly unimportant to the lives of older people" (Gott & Hinchliff, 2003, p. 1617). Gott and Hinchliff (2003) report that sexuality's sensitivity as a topic, fear of causing offense, methodological difficulties, and the belief that face-to-face interviews are "threatening," combine to exclude older women from participating in research projects examining sexuality (p. 1618). The question of "who may feel threatened or offended" is inadvertently answered by Norma McCoy (2000), author of the *McCoy Female Sexuality Questionnaire*—"[s]exuality is inherently a sensitive area . . . typically, researchers eliminate questions with which *they* were not comfortable" (p. 739, *italics mine*). I suggest that if ethical standards are maintained, and a fully informed older woman gives her consent, she is self-selecting, and she may fear being viewed through a lens coloured by the discourses, but, she has something to say and, she wishes to be heard. Unfortunately, researchers "largely ignore women over 40" (Winterich, 2007, p. 59) and the result is the silencing of older North American women.

<sup>1</sup> Inspired by the work of the late Barbara MacDonald, Mannie Garza, Janice Keaffaber and Cynthia Rich formed the Old Woman's Project in 2001 to combat the attitudes and practices that ignore, insult and trivialize older women (2011). As a "political support group", their organization welcomes women of all ages and encourages them to work together to combat the disempowering of all women. Drawing attention to the presence of older women, they participate in, and are often invited to speak at "social justice" demonstrations.

Few researchers are exploring how older women respond to North America's "social fixation" on youth and beauty (Clarke & Griffin, 2008, p. 654). Sontag (1997) argues that a woman's self-esteem and thoughts about her body are affected by any or all of the multiple messages that celebrate the norms of the youthful, slender, hairless, and taut body with smooth skin and perky breasts that fits into a certain clothing size. However, despite feminists' expressed concern about women's bodies, Hillyer (1998) writes that feminist literature about the embodiment of older women is a "series of significant silences" (p. 48). There is a notable lack of research that examines older women's thoughts about their ageing bodies, their body image, and how they respond to the influence of the dominant discourses (Clarke & Griffin, 2008), largely because, Liechty and Yarnal (2010) write, discussions of body image centre on adolescent and middle aged, reproductive women .

Moreover, due to this seemingly exclusive attention to young, reproductive women, a pathologized discourse of decline and disability features in discussions of older women's bodies (Hillyer, 1998). Hillyer (1998) states that older women are not talking to gerontologists about their embodiment, and that, in turn, gerontologists "are not interested in physical experiences that are not symptoms or diseases or social problems or treatment issues" (p. 56). Although their concerns and life experiences differ, Chrisler (2010) reports that "convenience samplings of older women" often consist of women "between the ages of 30 and 84" (p. 8). Only a handful of studies actually cite women's words; some papers paraphrase and edit women's words and several reports draw their conclusions based on the perceptions of younger individuals (Minichiello, Brown, & Kendig, 2000). Still others report older women's responses to survey questions measured on a Likert scale that effectively limits their responses (McCoy, 2000). Studies that focus on younger, reproductive women, limit older women's responses, edits their words and, at times, excludes their voices, contributes to the continuing lack of knowledge about North America's older women.

At the "risk of trivializing victims of colonial domination", Cruikshank (2009) asserts, many older North American women develop a "colonized personality" (p. 4). Colonized people and older women share the following characteristic: they are believed to be less intelligent than the dominant group, judged by their appearance, manipulated and encouraged to imitate the dominant, made figures of fun, and their acceptance and

movement in society may be controlled (p. 4). I argue that a “colonized personality” develops over a lifetime as a woman internalizes the norms and standards communicated by the hierarchical relationships constructed by the young/old binary and sustained by the ideology of youth. Societal messages of inferiority and societal control can silence an older woman as Keaffaber (Old women’s Project, 2011) explains:

We don’t talk about the true emotional challenges involved, even with each other. We’re all too busy pretending we don’t notice the indignities that are heaped upon us as old women. Or worse yet, it seems so natural even to us, that it doesn’t really register that we’ve become outsiders. (p. 1)

Policed by society and internalized beliefs, a “colonized personality” may prevent older North American women from speaking out and contesting the discourses. Given such a repressive environment, Gullette (1997) goes so far as to bluntly instruct older women not to speak publically about “anything alleged to be a symptom [of age] except in unrecorded conversations with another woman or a man who loves you reciprocally [because] your words may be used against you” (p. 58). This may be good advice. Speaking out and contesting the dictates of the discourses, a barbed comment, a joke, or responding to comments such as “you’d look so much younger if you coloured your hair” is difficult and, at times, both embarrassing and unsatisfying. My emotional responses, fluctuating between uncertainty, shame, and anger, are obvious, and hearing the words, “you are too sensitive; you are over reacting” spoken by someone I trusted, has silenced me in the past.

I concur with Barreca’s (2012) view that older women “waste a lot of precious time trying to judge ourselves and evaluate our worth” and the worth and value of other older and younger women (p. A28). As women gaze at the world through a lens distorted by the myths and stereotypes disseminated by North America’s hegemonic discourses, and reinforced in the media, we are dividing ourselves along the lines of chronological age, and into camps labeled “them” and “us.” Midgley (2008) writes that older women are becoming their own worst “enemies” (p. 7). I argue, other women, old or young, are not the enemy; the enemy is the power of societal discourses to establish, maintain, and enforce norms and standards.

My literature review illustrates that there is a broadly based lack of knowledge about how older women respond to ageing, their sexuality, their ageing faces, their

ageing bodies, and the ideology of youth. I believe the discourses and the ideology of youth are interconnected and possibly inseparable, but, the older woman's response to these discourses is not clearly defined. Older women's voices should not be silenced when *their* sexuality, *their* faces, *their* bodies, *their* body images, and *their* responses to the discourses are the subject of the research.

## Methodology

Mindful of the societal power of the hegemonic discourses, that agency is socially mediated (Ahern, 2001) and articulating Bacchi's (2005) formulation of the interrelationship between discourse analysis and critical analysis of discourse, these questions were raised from the literature search:

- Who is speaking and with what authority?
- What can be said and what must remain unsaid?

These questions lead me to identify how, within a particular social context, societal norms, exclusions, conventions, expectations, and categories are represented and legitimized in societal beliefs. Scott (1991) argues that: "[o]ne must take all categories of representation and analysis as contextual, contested and contingent" (p. 796). The historical and political context of my work is 21<sup>st</sup> century North America and I am contesting the negative and restrictive representations of older women generated by discourses of ageism, heterosexuality, gender and beauty. I will begin by examining the history of the discourses and, asking how the knowledge sustaining these discursive statements was produced, how it is circulated and how it is enforced. Continuing I will identify the power(s) the discourses exercise in society. I will then question the legitimacy of the normative standards the discourses impose and describe the impact they have on older women's lives in North America today. Finally, I explore older North American women's critical practices in relation to these dominant discourses.

Although I had originally intended to do so, I did not conduct interviews with older women living in Vancouver, British Columbia. Shortly before I began my research, a series of Transient Ischemic Attacks (TIAs) resulted in a loss of my ability to quickly comprehend and respond when conversing with others, and my ability to read and my



memory were impaired. Months of speech therapy has, to a great degree, improved my vocabulary and ability to speak but, I still experience difficulty when required to think, and respond quickly. My difficulty with reading has not been resolved. In March of 2011, Simon Fraser University's Centre for Students with Disabilities introduced me to *Kurzweil Educational Systems Text to Speech Reading Technology* allowing me to listen to women's words and thoughts from any source that can be digitized or prepared as a scanned PDF (Portable Document Format). Since then, suspected, but as yet unconfirmed, TIAs have continued to limit my abilities.

My thesis is derived from existing research, documentary films, published books, and media accounts of older women's lives and experiences, my own experiences, and the stories recounted by friends in casual conversations and emails. Observant participation has been an ongoing aspect of my research. I am an older woman and I live in Vancouver's West End, an area the City of Vancouver (2012) describes as "diverse, walkable and densely populated" (p.2). Situated between West Georgia Street, Burrard Street, Stanley Park and English Bay, the West End is home to 44, 543; 17% of those residents are over the age of 65 (City of Vancouver, 2012, p. 6). The West End is pedestrian friendly, and I walk to shops, to and from personal appointments, for exercise and to enjoy the many amenities my neighbourhood offers. In the neighbourhood stores, on the beaches, in Stanley Park, and on the streets, I participate in and overhear casual conversations; I observe the social interactions of others and interact with friends and strangers. I have kept a field diary from July 2011 to November 2012 that includes my experiences, my emotional reactions to those experiences, my reflections on what I have seen and heard, and the questions that arose in response.

Simon Fraser University's electronic library proved to be an excellent resource for disciplinary research exploring the dominant discourses of ageing, gender, and beauty and how North American mainstream heterosexual beliefs are communicated and maintained. This research provides the academic and social context for the women's experiences and their responses to the discourses. The Vancouver Public Library's collections, private book stores, and my own book shelves augmented Simon Fraser's library as a source of popular media and books recounting older women lives and experiences.

## **Women's Biographies and Other Writings**

Cortazzi (2001) argues that “personal narratives” are a distinct form of discourse that shape and order past experiences (p. 377). Chase (2005) adds that as “storied ways of knowing”, narratives are the fundamental way humans perceive, organize, find meaning in, and share their experiences with others (p. 650). A woman's stories express her point of view, and her words and actions, which contest, or confirm the status quo, “contribute to an analysis” of how “historical, social, interactional and discursive circumstances” affect her life (p. 656). Interested in women as “social actors”, in the 1960s and 1970s, second wave feminists began to critique “androcentric assumptions” and the belief that men's lives, and activities are more important, and constitute the norm from which women's lives and activities deviate. Treating women's narratives “as essential documents”, feminist analysts have revealed new understandings of history and North America's cultural and social processes (Chase, 2005, p. 654).

A few of today's older North American women are writing about their lives, and Hart, Weathermon, and Armitage (2006) believe that when writing about their lifetime of experience, women are producing more than “just interesting stories” (p. 3). Storytelling, a woman's first person account of her experiences, opens conversations that “bridge the gap” between academia and the community and, by illustrating the thought-provoking and complex nature of women's life experiences, they encourage others to share, perhaps recognize a connection with their own life and experience, possibly sympathize, and to consider the context and meaning of the narrative.

Providing the context, family, friends, colleagues, and even strangers frequently populate women's narratives. Importantly, those individuals influence what experiences are recounted, how they are narrated, and what remains unexpressed (Shuman, 2006, p. 153). Shuman (2006) asserts that when interpreting personal narratives one must be conscious of the “web of interpersonal relationships” (p. 151) and question: whose story is it; who is interpreting; who is giving the story meaning, and what are the consequences? I believe that as a woman shares her stories, her words, although both constrained and enabled by cultural circumstance, focus the reader's attention on aspects of her life she considers significant, highlights her choices, and gives meaning to her experiences. Moreover, Hart et al. (2006) write, woman's stories reflect her social

relationships, cultural conventions, her community's normative assumptions, and her personal history.

I did not find many contemporary older women's descriptions of their lifetime of experiences and embodiment in published literature and I wondered why. Hillyer (1998) suggests that some older women may write and not find a publisher and that others may avoid publication in an attempt to sidestep ageist stereotyping and/or conceal their age. MacDonald and Rich (2001) assert that younger women are inscribed with North America's societal message that "getting old is bad" (p. 88). Rather than questioning that cultural belief, younger women frequently adopt ageist attitudes and blame older women for exhibiting the visible signs of age and their experiences of ageism. Hillyer, (1998) writes, younger women often do not want to know, or they are not interested in the lives, bodies, and sexuality of older women. Furthermore, distancing herself from older women's stories, permits a younger woman to deny that she too will age, experience the physical changes associated with age, and be subjected to ageist stereotyping and practices. However, Hillyer (1998) asserts, and I agree, that if a woman does not write (because of ageism and the narrative of decline), she is indirectly acknowledging the power of those who define her, and her own fear of losing societal power and value (p. 53).

After listening to varied books that included the autobiographies of celebrities and less famous women, of stories recounting the struggle a mother encounters if her child is "special," of a woman's steadfastness in the face of family difficulty, and stories of loss and grief, two books stood out to me. The first was the anthology *I Feel Great about My Hands* edited by Shari Graydon (2011). In that collection, writers Diana Majury, Lillian Zimmerman, Judy Rebick, and other older women discuss ageing and describe their ageing bodies, their sexuality, their lives and, at times, they contest the status quo. The second book is Maya Angelou's *Even the Stars Look Lonesome* (1998); Angelou discusses life, love, sexuality, her body, and her mother. The experiences of ageing these authors recount are similar to mine, and to the experiences recounted by my friends and acquaintances. Offering examples of women's agency, these writers analyze the discourses that dominate their lives through a cultural lens. I privilege the standpoints of these feminist writers in the analysis I present in this thesis.

## Documentary Films

As a second body of materials in which older women describe their lives and discuss the discourses of ageism, heterosexuality, gender and beauty I chose feminist documentary films. Hollinger (2012) reports that as an academic discipline, feminist film theory evolved within the women's movement of the 1960s as a critique of Hollywood cinema's distorted representation of women's lives and the promotion of patriarchal ideology. Paralleling the growth and development of the discipline of film theory in the 1970s, feminist film theory developed two main themes. The first is a critique of mainstream films termed "cinefeminism" inspired by De Beauvoir's concept of women as "other" and Friedan's critique of the social mythology that "works to bind women to a natural female role" (Hollinger, 2012, p. 3). The second stream, the "alternative" or "counter-cinema" approach, arose when many feminists turned from critiquing mainstream films to producing and directing documentaries to "combat women's objectification," and introduce women's perspectives, and alternative visions of the world (Hollinger, 2012, p. 8). Critics of feminist documentaries argue that the films "blur the distinction between fact and fiction" because documentary scenes are often staged for the camera, participants are chosen, the presence of the film crew and director affect the participants' behaviour and the perspective is shaped in the editing process (Hollinger, 2012, p. 74). Weitz (2010) argues—and I agree—that most members of the audience, are aware of those considerations and they "neither blindly nor passively" (p. 18) accept the message presented especially if their life experience, cultural values, beliefs and expectations differ from those depicted on the screen.

Searching Simon Fraser's library, the Vancouver Public library, the internet, and friends' libraries for documentaries focusing on older North American women (in terms of their sexuality, desires, fantasies, lives, faces, bodies, and their experiences of ageing) and the dominant discourses, I found very few. Many of the documentaries I viewed that featured an older woman or women as the narrator(s) focused on family situations, experiences of poverty, violence, and other community issues rather than directly addressing the women's life experience, ageing bodies, and their sexuality. In the end, I have chosen four documentaries that, focusing on the thoughts, lives and experiences recounted by the older women participating in the films are, I believe, daring attempts to construct and present a counter-narrative to the myths and prohibitions integral to the

discourses — Fishel’s (2004) *Still Doing It: The Intimate Lives of Women Over 65*; Blazer’s (2004) six minute animated video *Backseat Bingo*; a CBC Television Man Alive’s (1995) production *Tonight’s the Night*; and Osler, Levinson, and Spenser’s (2003) *Let’s Face It: Older Women Explore Their Aging Faces*. Watching the documentaries, although I am a silent participant, I am face to face with the women on the screen. I can hear when emphasis is placed on certain words or phrases, and I can see if a smile, a laugh, a frown, a gesture, or a shift in position accompanies their words.

## Structure of the Thesis

I concur with Andrews’ (2009) assertion that “[e]xperiences of ageing are individual and integrally bound to cultural systems of meaning . . . rather than one true story of ageing there are multiple stories and experiences of ageing” (p. 73). I believe that the varying stories of life and ageing recounted by Angelou (1998) and the contributors to Graydon’s (2011) anthology, by the older women participating in the documentaries, and by those women speaking in research studies and cited in media reports express aspects of the myriad experiences of ageing. These women’s stories can be interpreted as personal narratives in the context of 21<sup>st</sup> century North America’s ideology of youth, and I will use them to answer a second set of questions:

- How do the older women represented in my research materials describe and experience their sexuality, their sexual desires and their fantasies?
- How do the older women represented in my research materials describe their bodies and respond to the physical changes that occur with age?
- How do the older women represented in my research materials respond to the discourses and the ideology of youth?

## Listening

Madison (2005) argues that, filtered “through the sensations of the body”, the “*impressions and interpretive meaning*” (p. 195, *italics in original*) of the older women’s words have “material effects” and that they reiterate “meanings, intent and customs” (p. 162). As Madison (2005) stated, as I watch the women speaking in the documentaries, listen to older women’s published narratives, the words of older women reported in research studies and the media, and chat with friends, my body recognizes and

responds to the emotions I sense in the women's words, facial expressions and body language. As an older woman, my body's emotional and physical responses are often accentuated by the many issues central to the "double standard of ageing" (Sontag, 1997, p. 17) which Rice (2001) believes destroy an older woman's self-image, demoralize, and isolate her in today's North American society (p. 151). Interpreting the women's words, I further asked:

- What does the woman want me, as the reader/viewer, to know?
- How does the author interpret her experience? What meaning has she assigned?
- Are there common themes? Are conflicts and contradictions evident?
- Are the discourses named or inferred?
- Are differing approaches to the discourses evident?

(Fraser, 2004)

I believe it is important to present diverging viewpoints respectfully and throughout my analysis I have focused on Rice's (2001) advice that "one of the most valuable gifts a woman can be presented with is the chance to express her feelings about her life without any preconceived notions of what her feelings ought to be" (p. 51). Interpreting the women's words I have been cognizant of their facial expressions, their body language, vocabularies, metaphors, rhetorical conventions, the images their words produce, my perception of the women's emotional responses and my physical reactions. Believing that we are both users of, and constituted by societal discourses I have been attentive to women's agency.

In chapter two I analyze North America's hegemonic discourses of ageism, heterosexuality, gender and beauty, their power to influence societal beliefs, the norms and standards they create and maintain, and their negative impact on older women's lives. I examine ageism's roots, and address how ageist premises and practices magnify and meld with the other discourses. I explore the discourses of heterosexuality from a historical perspective, highlight its politicization, heterosexuality's taken for granted normalcy and how it intersects with gendered and ageist beliefs. Gender's ideological and hierarchical representations of the ideal woman and man are examined through a feminist lens and the intersection of age, beauty, power and privilege. I explore the

history of the idealized North American standards of youthful beauty and how they are influenced by age and gender. And, finally, I examine norms, binaries and stereotypes.

In chapter three, I cite the words of the older women represented in my research as they respond to North America's hegemonic discourses. Regarding the women's stories as "storied ways of knowing" (Chase, 2005, p. 652), I privilege the women's situated knowledge, their emotional responses, their interpretations of their experiences in contemporary North American society, and the meaning the women assign as they discuss their lives in books, published research and media reports, and filmed narratives. Several of the women present a counter narrative that contests the influence of the hegemonic discourses, while others confirm and accept the dictates of the ideology of youth. Concluding this chapter, I investigate the ways in which the hegemonic discourses influence older women's lives and interpret their critical practices through the lens of culturally mediated agency.

In the fourth and final chapter, I discuss societal stigmatization in the context of a culture of youth and beauty. The societal pressures to undergo cosmetic surgery and other non-surgical interventions older women confront is exposed, and I discuss the debate surrounding cosmetic surgery -- is cosmetic surgery an essential resource for older women, or is it a mechanism of oppression? I then illustrate some of the ways the older women represented in my research have responded. Concluding the thesis, I discuss the limitations of my research and methodology, and offer avenues of future research.

## **Chapter 2.**

### **Hegemonic Discourses and Power**

In this chapter, I offer a critical analysis of the discourses of ageing in contemporary North America. I argue that the myths, superstitions, norms, and standards inherent in the discourses of heterosexuality are interconnected within the discourses of gendered beauty and that their societal effect is intensified by ageist beliefs and practices. Defining and disciplining older women, and influencing societal beliefs, these interwoven discourses are instrumental in creating and sustaining the societal beliefs and assumptions that permit and maintain the oppression of older women in today's society. Much of the existing research suggests that older women are subjected to sexual and bodily norms and standards which are based on stereotypical beliefs and discriminatory attitudes about the "nature of age, sexuality and gender" (Lai & Hynie, 2010, p. 361). Those societal norms and standards, as Reischer and Koo (2004) contend, reflect a centuries old gendered and, I would add, an ageist and heterosexualist, double standard that defines differing rules for men and women and the prevailing cultural vision of the size, appearance, and desirability of the ideal "beautiful and youthful, female body" (p. 312).

#### **Ageism**

As a hierarchical system dividing the young from the old, ageism permeates contemporary North American culture. Ageing is a social process Minichiello et al (2000) argue; "[p]eople "observe and monitor individuals for [the] signs of incipient oldness" that go beyond wrinkles (p. 269). As evidence of an older individual's decreasing physical activity and participation in life, and/or declining health and coping abilities accumulates, societal expectations are "lowered" (p. 269). Caring, and protecting the older individual from harm are positive aspects of the monitoring, but "for the most part it [the monitoring]



determines whether they can be categorized and treated as ageing or old” (Minichiello et al, 2000, p. 269). Defined as ageing, an older individual’s social value, their social power, and their dignity are largely erased, and ageist practices exclude them from full societal participation. As a participant in Minichiello et al.’s (2000) research explains:

A label is put on a group and suddenly everybody in that group is supposed to be like that . . . to behave in a certain way and you treat them in a certain way . . . they are labeled . . . defined . . . denigrated . . . seen as less than. (p. 258)

## **A Brief History of Ageism**

Nelson (2005) argues that two major technological advances are partially responsible for the “shift in attitudes” toward older individuals and the “increasingly negative way” they are viewed in contemporary North America (p. 208). The first is the development of the assembly line printing press in the 15<sup>th</sup> century. The role of elders, once revered as the repository for the culture, traditions, and history of a society or family, was reduced or eliminated when the genealogies, stories, myths, and legends the elders passed down through generations could be printed and distributed in books. The second major development Nelson (2005) writes was the 19<sup>th</sup> century’s Industrial Revolution. Changing technology required young, mobile workers able to adapt to long and demanding hours of challenging manual labour; as a result, physical strength and the ability to relocate were prized rather than experience. Nelson (2005) argues that these “cultural shifts” combined with medical advances, increasing longevity and a growing population of older, unemployed, and thereby dependent adults, led to the “institutionalization of ageism” in the Western world (p. 208).

## **Ageism in the Present**

In a 1969 interview published in the *Washington Post*, Robert Butler named and defined ageism as follows:

Ageism can be seen as the systematic stereotyping of and discrimination against people because they are old, just as racism, and sexism accomplish this for skin color and gender. Old people are categorized as senile, rigid in thought and manner, and old fashioned in morality and skills. Ageism allows the younger generations to see older people as different from themselves, thus, they subtly cease to identify with their elders as human beings. (as cited in Butler, 1989, p. 139)

Two decades later, Butler (1989) argued that, despite efforts to dispel them, North American ageist beliefs, and practices are still manifested on the institutional and individual level as “stereotypes and myths, outright disdain and dislike, simple subtle, avoidance of contact and discriminatory practices” (p. 139).

I suggest that little has changed. After repeated in depth interviews with 18 individuals between the ages of 65 and 89, Minichiello et al. (2000) concluded that the devaluing and stereotyping of individuals just because they are old is still socially “pervasive, experienced and reproduced” (p. 262). Focusing societal attention on the impact of ageism, Butler (1989) linked it to racism and sexism, but the analogy “fails”, it compares “lifelong identities” to an identity we have for only part of our lives (Cruikshank, 2009, p. 140). Ageism, therefore, is a unique form of prejudice—anyone who lives long enough will experience it. One could argue that the power of ageism, or perhaps the power of all the discourses combined is the cause of older women’s social inequality; however, after examining the unequal power that shapes and legitimizes the norms and standards of a youth worshipping society, Brickell (2009) asserts that “age is a key axis of power” (p. 65).

Ageism is a central issue for all older women in North America today; ageist attitudes and practices patronize, insult, trivialize, and exclude older women (The Old Women’s Project, 2011). As I noted earlier, based almost solely on their aged appearance, older women are viewed as stereotypical types rather than individuals and classified into two broad and oppositional categories, the grandmother and the crone. Considered “cute,” the grandmother is often patronized (Nelson, 2005 p. 209). My own experiences reflect this response:

*“Oh, isn’t your purple streak cute, don’t you look just SOOOO cute.” Comment made by a server in an upscale Vancouver restaurant.*  
(Fieldnotes, Faulds, June 16, 2012)

*My hand is taken and held as, in a soft voice, the cashier says, “[t]here you are dear”, as she folds my fingers closed over my change.*  
(Fieldnotes, Faulds, August, 26, 2012)

The soft voice, slow cadence, elongated words and the action are representative of what Minichiello et al. (2000) term “subtle and obscure” incidents of ageism (p. 257). Such incidents are not just demeaning and exasperating, they are difficult to refute. Although

well intentioned, the compliment is not flattering and the gesture is not helpful; both are embarrassing. Comments and practices such as those noted above, I argue, reproduce embedded ageist beliefs.

Minichiello et al. (2000) argue that ageist practices can be “overt and brutal” (p. 257). When perceived as less than “cute,” older women are often assigned to the second category and termed crones evoking images of the ugly, sexless, “bitter, mean and complaining” old woman (Cruickshank, 2009, p. 141). These epithets conjure thoughts of loss, dependency, neediness, and physical and mental impairment (The Old Women’s Project, 2011). Overt and brutal incidents of ageism are frightening:

*As I followed an older woman walking slowly along Davie Street, I observed a young, poorly dressed man approach her and ask for money. She refused. He shouted out, “fucking, ugly old woman, go away and die . . . take your money with you.” As the woman scurried away I caught up to her asking, “[c]an I help?” She leaned on my arm as I walked her home.*

*(Fieldnotes, Faulds, 2012, July 7)*

As we walked, we talked about the weather. We did not discuss her experience. She was frightened and I believe that the power of her emotional and physical responses to the brutal words compelled her silence. When we reached her home, I had a cup of tea and admired pictures of her children and grandchildren.

## **Resisting Ageist Practices**

When faced with being perceived and treated as “the crone,” some women, like Miriam O’Reilly have fought back. O’Reilly, age 53, and a self-identified middle-aged woman, was “abruptly dismissed” from one of BBC Television’s flag ship programs and replaced by a woman 20 years her junior (Plunkett, 2011, p. 1). O’Reilly charged the BBC with ageism and sexism stating, “I deserve to be judged on my ability and not on my appearance”, and she declared, “grey hair and wrinkles are not offensive” (Plunkett, 2011, p.1). Defending O’Reilly’s suit, the BBC’s lawyers claimed their action was motivated by “a wish to appeal to younger viewers” (Plunkett, 2011, p. 1). Given that O’Reilly’s male cohost is 72, and testimony included a BBC executive’s comment that O’Reilly’s face is “fit for radio,” the panel awarded O’Reilly damages based on her claim of ageist discrimination (Plunkett, 2012, p.1), but the tribunal denied her claim of sexism.

Centering their critique on the tribunal's statement in article 298 that the "testimony reflects that there is a general concern as to the disadvantages that are suffered by older women in the media as a result of combined discrimination" and the statement in article 300 reading:

While we conclude that age was a factor in the final choice of presenters, we do not accept that this particular decision involved combined age and sex discrimination, or sex discrimination in addition to age discrimination,

The *Institute for Feminist Legal Studies at Osgoode Hall (IFLS)* (2011, p. 1) questioned the tribunal's rejection of O'Reilly's claim of sexism. The tribunal's statements recognize that gendered, heterosexual beliefs and the standards of youthful beauty combine with ageist beliefs to stereotype and stigmatize older women and yet they rejected O'Reilly's claim of sexism. I am not surprised; as Cruikshank (2009) argues, and I agree, in Western societies, "an older woman bears the brunt of ageism because she is already devalued as female" (p. 142).

## **Sexuality**

Henry and McNabb (2003) explain that the "extremely limited" literature on aged sexuality "seems to imply that sexuality does not have a place in the lives of older people" (p. 57) and as a result, sexuality is one of the "least understood aspects" of ageing. Little is known about what the baby boomer generations "know about sexuality and their attitudes about sexual expression" (p. 58). Growing up in the "free love" generations, baby boomers have not been known for "passively accepting" models of living passed down from previous generations; their attitudes and mores about sexuality "likely differ" from those of previous generations (p. 58). Waltz (2002) agrees; baby boomer's lifestyles and beliefs differ from those of previous generations -- theirs may be "an extremely rich and passionate sexuality" (p.111). However, he states, in the absence of knowledge, "stereotypes fill the void" (p. 111).

I argue that the societal "message that sex is not for older people" (Henry & McNabb, 2003, p. 61) combined with the effect of the myths of older women's sexuality prevents many older women from enjoying their sexuality to its fullest extent. In this section I will begin with brief outlines of the main currents in the history of sexuality

studies, and 20<sup>th</sup> and 21<sup>st</sup> century research into male and female sexuality and desire noting its impact on older North American women's lives. Drawing from the work of varied theorists, I conclude with the working definitions of sexuality, heteronormativity and hegemonic heterosexuality that shape my thesis.

## **A Brief History of Heterosexuality**

Tolerance for the “direct gestures, shameless discourse and open transgressions” of the Classical period ended in the 18<sup>th</sup> century Foucault (1978, p. 3) writes when, “modern puritanism” (p. 4) began to regulate social mores and a “proliferation of discourses concerned with sex” (18) reshaped societal beliefs. Religious sanctions and prohibitions supported the medical community's classifications of varying pathologies arising from “incomplete sexual practices” and labeled those sexual pleasures deviant. Psychiatry, focused on “excess” and “frauds against procreation” while criminal justice broadened its authority to include “minor indecencies and insignificant perversions” on its list of punishable offenses (p. 30). Intensifying societal awareness of the dangers posed by uncontrolled sexuality, these multiple and hierarchized discourses constantly scrutinized and evaluated the “the sexuality of couples, parents and children, and dangerous and endangered adolescents” (Foucault, 1978, p. 30).

### ***19<sup>th</sup> Century Research***

In the 19<sup>th</sup> century, Kimmel and Plante (2007) report that heterosexual sex and marriage were considered “related institutions” and much of the research coded sexual activity as “marital, premarital or extramarital” (p. 64). Marital sex was beset by rules, recommendations and constraints that normalized the marital obligation's form, its frequency and enforced religious and medical injunctions (Foucault, 1978). Studies of sexuality, made “little mention of sex as a pleasurable experience”; sex was “officially defined” in terms of procreation, a wife's duty, and “the social and interpersonal functions it fulfilled” (Rye and Meany, 2007, p. 45).

## **20<sup>th</sup> Century Research**

Victorian morality and the connection between sex, marriage, and reproduction persisted into the 20<sup>th</sup> century. Freud drew European society's attention to women's sexual pleasure in 1909 and, Rye and Meaney (2007) declare, social mores immediately confined that pleasure to the marriage bed. Groneman (2000) explains that, the sexual responses of "very young girls and older women" were viewed as "unnatural" (p. 21). Uncontrolled youthful female sexuality required "watching, restricting and taming," while post-menopausal women's sexual desires were "problematic" and "upset notions of appropriate sexuality" (p. 21). Confining sexuality to marriage and seeking to control the sexuality of women of all ages; younger, reproductive, and older women were cautioned that excessive desire could "repel her husband" (Groneman, 2000, p. 22).

In North America, a woman's "sexual choices and expectations were largely governed by traditional religion, purity campaigns, "moralistic" public discourse, and a gendered, heterosexual double standard Tiefer (2006, p. 436) explains. Those beliefs and values gave men more flexibility to be sexual agents and lauded their sexual escapades. On the other hand, Wood, Mansfield and Koch (2007) write, women acting on their sexual urges were stigmatized and viewed as "sluts" (p. 193). Tiefer (2006) points out that a "dramatic liberalization" occurred in North America, when, after the Second World War, new oral contraceptives and effective treatments for venereal diseases "removed sexual inhibitions and fears of pregnancy and disease" (p. 436).

Reviewing Kinsey, Pomeroy and Martin's research published in 1949 and the surveys published by Master and Johnson in 1966, Sharpe (2004) writes that Kinsey et al.'s work shattered the "myths surrounding the sexual practices of older men and women" and that Masters and Johnson's "pioneering research" formed the basis of the normal physiology of ageing's assertion that sexual interest begins in adolescence, peaks at the height of fertility and attractiveness in mid-adulthood, and declines rapidly with age (p. 200). Sharpe (2004) argues that although Kinsey et al and Masters and Johnson's research opened discussions of sexuality, "the research was flawed in its widespread application to the elderly" (p. 200). Kinsey et al. (1949) did not administer the full survey instrument to older individuals and excluded them as their research neared completion and, Masters and Johnson's work was "hindered by its small survey

size” (p. 200). Only 31 individuals over the age of 60 participated in Masters and Jonson’s research and, Ludeman (1981) states, only 11 of those 31 participants were women.

When those born during World War Two and the first baby boomer generations came of age, in what Tiefer (2006) terms a “culture of charged eroticism” (p. 436), some of those young people initiated the sexual revolution of the 1960s and 1970s. Groneman (2000) argues that by the 1970s, “how to guides” had replaced “old fashioned marriage manuals” and, “for the first time, large numbers of women were demanding their *right* to sexual satisfaction” (p. 125, *italics in original*). In North America today, sexuality and pleasure are linked for both women and men and contemporary attitudes toward sex range from “only for procreation” to “okay when in love or dating” to “anything goes” (Rye & Meaney, 2007, p. 29). I argue that as foundational premises, Kinsey et al.’s and Masters and Johnson’s research and the NPA’s assertion may not be relevant in discussions of older women’s sexuality today. The limited data was collected from individuals born between the late 1800s and the early 1900s and decades before the sexual revolution. Kinsey et al.’s and Masters and Johnson’s research and the NPA do not reflect the cultural changes that have occurred over the last 50 years including improved health care and increased longevity. Nor do they reflect the fact that today’s older women’s life experiences and expectations are very different from those of their mothers and grandmothers.

### **21<sup>st</sup> Century Research**

The societal force of heterosexuality was (and still is) exemplified by marriage, reproduction and the dominant male. Vares, Potts, Gavey, & Grace (2006) state that in current North American research men’s sexuality is still privileged and men’s heterosexual urges are understood as “natural and normal” (p. 160). An important measure of older men’s health is “lifelong sexual function” defined as the ability to maintain an erection and achieve orgasm through vaginal penetration (2006, p. 154). In the Viagra era, new agendas have emerged that place the relationship between sexuality and ageing at the centre of scientific research and promote a sexualized, youthful masculinity. Demonstrating that the male discourse of sexuality is privileged, The McCoy Female Sexuality Questionnaire (2000) contains 19 questions that limit

definitions of sexuality to intercourse and, measures the participants' responses on a 7-point scale. The questions include the participants' enjoyment of sexual intercourse, satisfaction with its regularity, the frequency of fantasies and sexual thoughts, excitement, arousal, vaginal lubrication, and the attractiveness of their partner.

Questioning women's enjoyment of sexual intercourse the survey does not consider the many other methods of achieving sexual pleasure. Henry and McNabb (2003) argue that defining sexuality only as "penetrative" limits the definition (p. 59). In discussions of sexuality "the ability to feel and give love," masturbation, fantasies, caresses, fondling, cuddling and kissing (p. 155) are "extremely important". To this list, I would add manual and oral stimulation. As one older woman (age 67) reflected:

Sex is not just having penetrative sex, it's the whole thing, and I think the whole thing includes all the bits that go with it like touching, stroking, feeling close to somebody which I think is perhaps, from a woman's point of view, more important, than a man's, that's really important, the whole thing.

(Hinchliff & Gott, 2008, p. 72)

The average woman lives to age 82 and, Sharpe (2004) writes, one third of a woman's sexual life occurs after menopause" (p. 200). I argue that the focus on older men's sexuality has had unfortunate results for older women. Lagana & Maciel (2010) write that older women's sexual health is seldom addressed; many "general practitioners" deem it an "illegitimate topic" partially due to "stereotypical views of women, ageing and sexuality" (p. 706) and McHugh (2002) adds that the notion that women's' sexuality declines as a result of menopause is "widely held by the general public and many professions" (p. 26). Older women's response to their sexuality varies she argues. Reviewing data from a research study conducted by Klinger and Nedelman (2005) that included survey responses and 55 in depth interviews with women between the ages of 50 and 95, McHugh (2002) notes that 40% of the respondents reported that their sexual desire was unchanged or greater during and after menopause (p. 31). At 69, a woman participating in Loe's (2004) research states she enjoyed her menopause:

With men they say the peak is 19 and after than they go downhill. I think menopause was my sexual prime. Some women say that menopause is terrible, but I think it was great —not having to worry about pregnancy. (p. 308)



## Disease

Societal belief in older women's loss of sexual desire has been compounded by the new "disease" of Female Sexual Dysfunction (FSD) (Tiefer, 2006). Citing Payer's (1992) definition of "disease-mongering" as "trying to convince essentially well people that they are sick, or slightly sick people that they are very ill," Tiefer (2006) argues that the proponents of FSD are using "classic disease-mongering tactics" (p. 436). Supporting her argument, Tiefer (2006) cites the introduction to the discussion papers published after the *Sexual Function Assessment in Clinical Trials Conference* held in 1997 to discuss FSD: "[I]n the area there is a widespread lack of agreement about the definition of sexual dysfunction, its pathophysiology or clinical manifestations and the optimal approach for research or clinical assessment" (p. 438). Who sets the criteria defining female sexual dysfunction, and when is it appropriate to label a pattern of sexual behaviour dysfunctional?

Citing many studies, McHugh (2002) states that the biomedical approach is "based on the disease concept" and labels dissatisfaction and deviation from the [male] norm dysfunctional (p. 34). Conceptions of sexual function and dysfunction do not reflect "women's unique sociocultural position" and they fail to consider how women's sexuality is repressed and criticized. Moreover, she argues, the norms of women's sexuality have varied throughout history and have "generally not corresponded to women's actual experiences" (p. 34). Tiefer (1995) argues that labels of sexual dysfunction should rely on the woman's interpretation of her sexuality. Rather than evaluating an older woman's sexuality based on standardized male criteria, researchers should give older women the opportunity to speak in research projects, listen to their voices and develop measures that focus on a woman's pleasure.

However, despite the facts that FSD is not clearly defined, a research design is unproven, and placebo-controlled studies including 3000 women achieved inconclusive results, FSD's authenticity is confirmed by the medical community, in the media, and by the pharmaceutical companies producing the drugs promoted as the cure (Tiefer, 2006). John Bancroft, Director of the Kinsey Institute, wrote:

The recent history of the study of female sexual dysfunction is a classic example of starting with some preconceived and non-evidence based diagnostic

categorization for women's sexual dysfunctions based on the male model and then requiring further research to be based on that structure. Increasingly it is becoming evident that women's sexual problems are not usefully conceptualized that way. (as cited in Tiefer, 2006, p. 438)

## **Sexual Desire**

Connecting us to our bodies and the bodies of others, desire may be the key to women's sexuality (McHugh, 2002). In studies measuring female desire, Wood, Koch, & Mansfield (2006) assert, researchers use the traditional linear model of sexuality developed by Masters and Johnson in 1966 that is predicated on the male sexual response –“arousal, plateau, orgasm and resolution”, and the male definition of sexual desire as “drive, appetite, interest, cravings, motivation and libido” (p. 237). However, Wood et al (2006) argue, when asked, women distinguish between sexual desire and arousal. Women define desire as emotionally based, and a willingness to take part in sexual activity and arousal as the physical changes that indicate a readiness for sex: McHugh (2002) argues that women's desire is more cognitively complex and less genitally focused than a man's.

It is important, sex is. . . . My doctor told me to see my gynecologist about Viagra but . . . I don't need it. It's chemistry that turns me on, and maybe it takes me longer than when I was younger, but then again, it's all between the ears, isn't it [Age 69]? (Loe, 2004, p. 308)

When male arousal and female desire are conflated, the standards for measuring female desire are then erroneously “based on youthful, heterosexual men's expression of a good sexual response” (McHugh, 2002, p. 33). Measuring women's desire on a male scale creates a “false notion of sexual equivalency” with the result that “[m]any professionals and the even lay public” believe that men have more sexual desire than women (Wood et al., 2006, p. 237). Tiefer (2000) argues, and I agree, that “[w]e should not assume women's sexual experience, would be better, more normal or more fulfilling if it more closely paralleled men's” (p. 84).

Victorians attempted to control women's sexuality, by confining their pleasure to marriage and reducing their sexuality to its reproductive function. In the 21<sup>st</sup> century Victorian morality and beliefs have not been erased. They survive in contemporary North

America's societal and medical views. Love, sex and reproduction remain securely connected and promote the belief that sexual activity is still more acceptable when it occurs within a committed heterosexual relationship (Rye & Meaney, 2007). Male heterosexual definitions of sexuality are still privileged and women's sexual pleasure is "invisible, dysfunctional and devalued" (McHugh, 2002, p. 36) The stereotypical beliefs embedded in the medicalized discourses of menopause and FSD continue to maintain the notion of older women's "sexual passivity" (Tiefer, 2006, p. 483), an older woman's sexuality still challenges societal mores, and the idea of an older woman engaging in sex is shameful and perverse (Henry & McNabb, 2003). The most commonly repeated myths of older women's sexuality are:

- Older women do not have sexual desires.
  - Older women are too physically frail to make love even if they want to.
  - Older women are physically unattractive and therefore undesirable.
  - Older women are no longer useful as sexual or reproductive partners.
- (Allen & Roberto, 2009)

The result, Hinchliff and Gott (2008) assert of the myths, misassumptions, restrictions and, prohibitions is that "the body of knowledge regarding women, ageing and sexual activity remains underdeveloped" (p. 66). Sontag (1997), states that all of these factors have combined to "negate an older woman's sexual candidacy" (p. 19) and Hodson and Skeen (1994) argue that they sustain the belief that older women are "among the most conservative and sexually inhibited of all adults" (p. 223).

## **Defining Sexuality**

On a cultural level, Rye and Meaney (2007) define sexuality as "collection of behaviours directly or indirectly related to stimulation of the genitals that results in a pleasurable response – orgasm" (p. 28). Lagana and Maciel (2010) and Sharpe (2004) agree that on an individual level, sexuality is an erotic response, a desire for sexual pleasure that may be achieved alone or with others. And O'Brien, (1990) adds, individual sexuality is subjective, it represents how we experience and express ourselves as sexual beings. All of these definitions describe the physical aspects and pleasure of sexuality, but there are other considerations. Bucholtz and Hall's (2004) definition of sexuality touches on the political and social ramifications of theories of the sexualized

body; they define sexuality as: “systems of mutually constituted ideologies, practices and identities that give sociopolitical meaning to the body as an eroticized and/or reproductive site” (p. 470).

## **Heteronormativity and Hegemonic Heterosexuality**

Heteronormativity and heterosexuality are not “synonymous, Schilt and Westbrook (2009) argue; heteronormativity is:

The suite of cultural, legal and institutional practices that maintain normative assumptions that there are two and only two genders, that gender reflects biological sex and that and that only sexual attraction between these ‘opposite’ genders is natural or acceptable. (p. 441)

I argue that hegemonic heteronormativity is the societal mechanism that identifies difference and defines it as deviance. As an institutionalized power, heteronormativity shapes, supports and naturalizes heterosexual bodies, and the norms and expectations sustaining the hierarchies central to aged and gendered relationships, sexuality, and beauty. Schilt and Westbrook (2009) note that “heterosexuality plays a central role in maintaining the gender hierarchy that subordinates women to men” (p. 443), due, in part, to the belief that “[b]iologically, men have only one innate orientation—a sexual one that draws them to women, while women have two innate orientations, sexual toward men and reproductive toward their young” (Rich as cited in Schilt and Westbrook, 2009 p. 442).

These heteronormative “essentialist assumptions”, Rubin (1993) argues, are institutionalized in North America today (p. 159); “socially, medically and legally”, the heterosexual norm is the standard by which all other forms of sexuality are judged (p. 160). She continues asserting, “[s]ex is political”; sex is “imbued with conflicts, inequities and modes of oppression” (p. 143). Guaranteeing that some will have more power, status, and privilege than others, heteronormativity resolutely draws the line that divides normality and deviance and defines “good sex and bad sex” (p. 151). In both the past and the present, when evaluated against the accepted societal norm of heterosexuality, some sexual practices are declared deviant and are, therefore, tabooed or considered

dangerous. For the purposes of the thesis my definition of individual expressions of sexuality is:

*Politicized, regulated, and constrained by the social norms and assumptions integral to heteronormativity, individual sexuality is suite of subjective, erotic responses and behaviours that result in a pleasurable, physical response.*

## **Gender**

Systemic gendered beliefs had, and still have, concrete implications in the life of both older men and women, but I would argue, the rules and boundaries of gender are more focused on, and restrictive of women's lives. Groneman (2000) points out that in the 19<sup>th</sup> century Evangelical ministers encouraged women to "claim the moral high ground" and provide a "model of purity for both men and women." Based on "rigid distinctions between feminine and masculine activities" society believed that women's delicate "nervous systems, smaller brains, monthly *illness* and reproductive organs" made it "unhealthy" for them to receive higher educations, vote, work outside the home, or participate in the public arena (xix, *italics in original*). Gendered roles, beliefs and expectations began to change significantly in the 1940s, when, during World War Two, "millions of women" entered the work force and filled jobs "supposedly only a man could do" (Groneman, 2000, p. 80). When the war ended, however, the women in the work force were replaced by returning veterans and "traditional femininity" was reasserted (p. 8). Once again, a woman's role as wife, homemaker, and mother was emphasized, and for the most part, Groneman writes, the reinstatement of traditional gendered roles was not challenged.

## **Gender in the 20<sup>th</sup> Century**

Hawkesworth (1997) explains that, beginning in the 1960s, feminist analysts used the term gender to identify and reject theories of "biological difference" implicit in the word "sex" (p. 652). As research on gender escalated, feminist researchers employed the word "gender" as an attribute of individuals, a product of socialization, to reify human difference, and to account for individual identity and aspirations. As research progressed into the 1980s, Scott (1986) defined gender as "a constitutive

element of social relationships” and “a primary way of signifying relationships of power” (p. 1057). Expanding Scott’s (1986) definition of gender, de Lauretis (1987) connected gender and hegemonic heterosexuality, stating that gender is predicated on the “*conceptual* and rigid and mutually exclusive, opposition of two biological sexes” that are “systematically linked to social inequality” (p. 5, *italics in original*). In the 1990’s, the definition continued to undergo further clarification, as O’ Brien (1990) argued that gender’s “meaningful, fixed and collective categories” of male and female (p. 72) are equipped with, and enforce, “cultural, cognitive and embodied scripts” (p. 85). Those scripts, she argues legitimize the socially approved models of the ideal woman and man, allocate social roles, power and privilege, and define the standards of normal and appropriate sexual behaviour, desires and fantasies on the individual, interpersonal and cultural levels.

Gender was, and still is a system of power relations. In 1994 Marshall argued that gender is “infinitely variable and continually in flux” but the “salience of gender categories is persistent” (p. 115). In North America, even as gender’s definitions are culturally modified, its scripts “turn barely differentiated babies into either men or women” and attempt to confine individuals within those stated roles (p. 116). Although in the 21<sup>st</sup> century, alternative gender categories and sexualities are recognized, and at times accepted in North America, those who step beyond the heteronormative “sex/gender/sexuality system” (Schlit and Westbrook, 2009, p. 441) disrupt cultural expectations, and are often misrepresented, marginalized and socially punished. For this study, my definition of gender draws on de Lauretis (1987), O’Brien (1990), and Scott (1986):

*Gender is a hierarchal and oppressive system of representation that, based on a conceptual difference between the sexes, defines individuals into one of two mutually exclusive, normative categories with defined and regulated societal roles, and expectations. Gender assigns identities, sexual preferences, unequal statuses, and constitutes social relationships.*

Today’s older women lead very different lives from those of their mothers and grandmothers but traditional gendered distinctions continue to define individuals, assign sexuality, and allocate social roles and status. Gendered beliefs combined with ageism and the normative standards of the discourses of heterosexuality and beauty still control an older woman’s sexual behaviour, her mode of dress, her social acceptance, her

societal role, and her physical appearance. To an alien observer, based on the social position and treatment of older women in 21<sup>st</sup> century North America, it would appear that we are still living in the 19<sup>th</sup> century.

## Youth and Beauty

The ideology of youth defines the ideal shape and size of women's breasts and bodies, and what social values should be represented. Throughout their lives women are besieged by societal messages specifying that their faces should be unblemished, their hair should not be grey and their bodies should be smooth, hairless, and slim (Sontag, 1997). I argue that many older North American women internalize these messages and attempt to maintain or achieve the required youthful standards because, as Dillaway (2005) argues, a woman's social value and her "womanliness" are defined visually and represented by her "body, her skin, and her breasts" (p. 10). In the following section I define youth and beauty and explore the standards dictated by the discourses of beauty in contemporary North America. I then describe how those standards are implemented, and illustrate the societal impact they have on older women's lives.

### Defining Youth and Beauty

In discussions of feminine beauty, "youth" and "youthful" are common descriptors but they are not well defined in the research literature. The Collins English Dictionary (2003) defines *youth* as "the quality or condition of being young; immature or inexperienced; the period between childhood and maturity," and *youthful* as "relating to, or possessing, the characteristics of youth" (p. 1864). Beauty, in this context, is defined as "the combination of all the qualities of a person or thing that delight the senses and please the mind" (p. 145). Youth, youthful, and beauty, I argue, are therefore subjective categories and open to individual and cultural interpretation. In North America, the culturally constructed standards of feminine beauty that "delight the senses and please the mind" are perceived by the culturally attuned eye but, the standards are neither universal nor changeless. In the mythological Golden Age of Greece, for example, large eyes, full lips, and light unblemished skin were included in descriptions of beauty (Drury, 2000, p. 90). In the ancient world of 800 BC, in *The Iliad*, Homer (2012) declared Helen

of Troy “a goddess among women” and, perhaps because Helen’s mythological beauty remains shrouded in the mists of the past, the search for the “perfect face” has been the “holy grail” of artists since the Renaissance (Drury, 2000, p. 90).

## **The Standards of Beauty**

Winterich (2007) writes that contemporary North American society perpetuates an “idealized standard of feminine beauty” and a “common sense assumption that an older woman should strive to maintain a youthful appearance” (p. 51). Moreover, Mazur (1986) reports that societal assumptions and the normative standards of the “body beautiful” are changeable, and follow the dictates of fashion (p. 288). In the 1940’s, women measured themselves against Betty Grable’s “much admired and smoothly muscled legs”. The leg slowly lost its “sexy” status in the 1950s and the “eroticized symbols” (breasts shaped and supported by the “cone bra”) displayed by the 1960s’ “sweater girl” were favoured (p. 289). Since then, he states, emphasized by popular media, the preferred size of women’s breasts has continued to grow. Forbes, Collinsworth, Jobe, Braun, & Wise (2007) state that the “buttocks” gained popularity in the 1970s, only to give way to the “emaciated supermodel” ideal of the 1980s that, in turn, was displaced by the “curvaceously thin beauty icons” of the 1990s (p. 265). Although large breasts are still the focus of media attention, the contemporary body beautiful is “young, slender and toned, with trim hips and small breasts” (p. 266). Fashion is cyclical and legs regained their importance in 2012. The most desirable legs have long straight bones, with “nips and curves” at the knee and calf (Hull, 2012).

## **The Consequences**

Over the past decades, women’s bodies have been compared to the ever changing, but socially entrenched, standards of the body beautiful mandated by fashion and the ideology of youth. However, Saucier (2004) contends that “mythic contours” of the contemporary, youthful, perfect body’s slender and toned trim hips and small breasts are exemplified by only the “thinnest 5% of the population” and represented in the West by celebrities including actresses, models and beauty contestants (p. 420).



The standards of beauty and ideology of the youth are powerful—they can enhance a woman's status and, suddenly, in response to a deemed physical flaw, abruptly debase her. Referring to Kate Moss' fall from grace when cellulite was observed on her thighs and buttocks, Walia (2012) remarked, “[s]pot cellulite on the supermodel and she'll lose her star power instantly” (p. 1). In a second appalling example, a *Daily Mail* headline in bold type reads, “Oh, do give it a rest Madonna, at 53 all you're exposing is your desperation” (Jones, 2012). Liz Jones, author of the article, admits to being over 50 and states -- “[b]luntly nudity at age 53 is not just gratuitous, it's gruesome” (p. 22). Reprimanding Madonna's older female fans, Jones concludes it is dangerous “to idolize women of our own age” (p. 22).

Bielski (2012, p. 2) states that in a culture that idealizes youth, the “female gaze” is often cruel and Stangor (2009) argues that the female gaze, based on “illusionary correlations, norms and stereotypical classifications”, poisons many older women's lives and social interactions (p. 9). I believe that degrading women of our own age is much more dangerous than idolizing them. When we criticize the physical appearance of other older women, we reinforce the power of the ideology of youth and the discourses of aged and gendered beauty to devalue *all* older women. The ideology of youth and its associated discourses are hegemonic in the contemporary Western world; each has a history and a vocabulary that influences societal thought and invokes negative stereotypes and images of older women. In the following section, I will discuss and examine four powers that produce and maintain the discourses operating within the ideology of youth.

## **Power and Knowledge**

Power, Foucault (1978) writes, does not reside only in the institutions and mechanisms that ensure subservience; it is not just repression or a system of dominance of one group over another that encompasses the entire social body (p. 93). Power is produced from “one moment to the next”. (p. 94) and must be understood as the “multiplicity of force relations”, the homogenization of groups and the unequal relationships that act within the social body (p. 94). Within particular contexts, power is not exercised “without a series of [connected and comprehensive] aims or objectives”

and its existence depends on the resistance of many oppositional relationships. Together they form a “complex chain or system” of powers (p. 93) which, disseminated in discourse, proliferate and support one another and permeate all social stratifications and groups.

In a society such as ours . . . there are manifold relations of power which permeate, characterize and constitute the social body and these relations of power cannot themselves be established, consolidated, nor implemented without the production, accumulation, circulation and functioning of a discourse.  
(Foucault, 1982, p. 93)

Power and knowledge directly imply one another; power does not exist without the “correlative constitution of a field of knowledge” (Foucault, 1982, p. 27). Danaher, Schirato and Webb (2000) define knowledge as “made up by perspectives, ideas, commentaries, rules, categories, laws, terms, explanations and definitions” disseminated in discourse. Discourse, Hall (1996) writes, “is about the construction of knowledge through language” (p. 201). I envision it as a loop; as knowledge, in the form of representations, classifications, rules, and vocabularies, is widely disseminated, and it is, understood, and implemented, power evolves and that power creates new knowledge. Hall (1996) states, that as discourses mix and merge, they create and connect systems of representation, meaning, and social inequalities (p. 200); not only is power implicated in discourse, those who “produce and circulate the discourse have the power to enforce it” (p. 201).

## **Contesting Knowledge and Power**

Although there is no “outside to power” (Foucault, 1982, p. 94), within particular contexts, knowledge, discursive statements, language, and the power they produce can be challenged. New knowledges emerge as groups and individuals, struggling for equality, challenge the images, assumptions, expectations and meanings shaped by discursive language. Over the past few decades, Foucault (1982) writes “subjugated” knowledge, those “blocs of historical knowledge which were present but disguised” by prevailing societal beliefs have re-appeared (p. 81). These subjugated knowledges shape the critical discourses of dissent and resistance that challenge the “claims of a

unitary body of theory which would filter, hierarchize, and order in the name of some true knowledge” (p. 82).

## **Power, Knowledge and Sexuality**

Foucault (1978) asserts that we must examine sexuality through the lens of the multiplicity of knowledges and discourses centered on sex. Sexuality cannot be thought of as a “natural given”; it is the “name that can be given to an historical construct”, and linked to both knowledge and power (p. 105). One must consider the four figures that arose in the 18<sup>th</sup> century and shaped the knowledges encompassing sexuality. Those four figures, the hysterical woman, the masturbating child, the reproductive couple and the perverse adult became “dense transfer point[s] for relations of power” between men and women, young and old, parents and children and administration and the population (p. 103). The sexuality of children and the perverse adult are beyond the scope of this thesis. Of particular concern are the relations of power that evolve from the medicalized construction of the deviant and pathologized older woman and the attempt to “reduce sex to its reproductive function, and its matrimonial legitimacy” (p.103).

Hegemonic heterosexuality has been examined in the contexts of societal restraints and prohibitions, domination, violence, as the power constituting sexual subjects and moralism (Brickell, 2009, p. 20). Institutionalized heteronormative morality is the “key organizing principle of the matrix of domination” say Ward and Schneider (2009, p. 434). “Morality matters”; in contemporary Western societies, Pigg & Adams (2005) state; sexuality has been located “in a dense web of socially meaningful moralities (p. 5). In this social context, “sexual practices are viewed as sites for expressing, confirming or transgressing” moral codes (p. 6). Given this social context, I argue that heterosexuality is one of the most powerful moral values in contemporary North America. Moreover, I argue that the power and knowledge shaping and supporting North American society’s discursive statements about older women, their role in society, their characters, their physical appearance, and their physical and cognitive abilities are multidimensional and interconnect within and through the discourses of heterosexuality.

## **Four Powers**

Brickell (2009) identifies four dimensions of power which he argues are central to the relationship between sexuality, individual experience and social dynamics in contemporary North America. They are definitional, regulatory, productive and unequal power and, Brickell (2009) asserts, these powers exist in both academic literature and society at large. Definitional power defines, and as it manipulates societal beliefs and values, it has a strong normalizing aspect. Regulatory power often works with definitional power to enforce the definitions and norms as it regulates and supervises lives. Productive power generates knowledges including sexual knowledges and, unequal power maintains the societal inequalities produced by that knowledge (p. 57). As “pure powers” they seldom act alone; definitional, regulatory, productive and unequal power “interweave, interlock and come together in various ways” (p. 58). Continuing I will describe the powers, connect them within the discourses and illustrate their impact on older North American women’s lives.

### **Definitional Power**

North American society’s belief in the normality and naturalness of heterosexuality is driven by definitional power’s definitions, norms and system of evaluative rules and boundaries. Describing and normalizing some sexual practices and declaring others abnormal and deviant, definitional power is reinforced in popular discourse, the media and on the streets (Brickell, 2009). Moreover, definitional power endows society with the power to manipulate societal beliefs, and attempt to control individual sexuality. Rubin (1993) argues that definitional power influences North America’s “system of moral evaluation” and sustains heterosexuality’s “pervasive distinction” between normal and deviant sexuality in a “hierarchical system sexual value” she describes as a pyramid (p. 150). Expressed in “stereotypes, categorizes, erotic taboos and condemnations,” which invoke the inflexible and enforced societal boundary between the good/natural /normal and the bad/unnatural/deviant, the hierarchy of sexual value commands the sociopolitical power and moral superiority to “reward and encourage some individuals and activities, while stigmatizing, punishing, and suppressing others” (Rubin, 1993, p. 151).

Defining and labeling unacceptable forms of sexuality has become a method of social control (Brickell, 2009), and I believe that, based only on her age and no matter what her sexual preference is, a sexually active older woman would be positioned close to, or on the bottom of, heterosexuality's pyramid of sexual value. She is transgressing gender's scripts of sexual behaviour, she can only approximate the discourse of beauty's youthful standards, her social autonomy is erased by ageism and her sexuality is negated, possibly tabooed, by the myths of heterosexuality. Her sexuality is, therefore, defined as unnatural, deviant and, punished.

## **Regulatory Power**

Regulatory power has the "institutional force" (Brickell, 2009, p. 58) to enforce heterosexual morality and the good/natural/normal standards imposed by the ideology of youth. Operating through multiple agents, regulatory power is widely circulated. Three "primary agents" of regulation are the "government, religion and medicine" (Brickell, 2009, p. 60). Governments pass laws stipulating what forms of sexuality are acceptable, what transgressions can be ignored, and how the deviant are punished. The regulation of sexual relationships varies between cultures and sometimes even within them. Age is important. Brickell (2009) points out that in some American states the age of consent differs between heterosexual and same-sex and relationships, and, I argue, youthful, reproductive sexuality is the only female sexuality normalized and legitimized in North America today.

## **Regulatory Power, Sexuality, and Religion**

Some "Christian and other religions demand" that their "interpretation of the scriptures" and their definitions of normal and aberrant sexuality be reflected in the legislation regulating sexuality, while others seek to restrict their practitioner's "carnal desire" by replacing it with "self-control and notions of procreative duty" (Brickell, 2009, p. 61). Lagana and Maciel (2010) interviewed 25 Mexican- American women between the ages of 55 and 82 about their sexuality, desires, and sexual activity. Eighty-six percent of the women identified as "Christian" (p. 710). Asked if they would like to be sexually active, an 82-year-old widow responded, "I would but I can't because my religion forbids it . . . in my culture it is not acceptable" and a 66-year-old replied, "yes,

but only if I was married” (p. 711). Responding to the question “to whom can you turn if you feel sexually deprived,” many of the participants “referred to God [and prayer] as their source of strength” (p. 714). The women’s statements, Lagana and Maciel (2010) declare, call attention to the “repressing effect of religion on sexual activity” as “most religions” disapprove of sexual relationships outside of marriage, and “frown on non-procreative sex” (p. 714). I want to add that the women’s statements also implicate the discourses of heterosexuality’s strong association of sex with marriage and reproduction.

### ***Regulatory Power, Sexuality and Medicine***

Medicine also plays an important role in regulating heterosexuality. In the recent past, some sexual practices and sexualities deemed deviant were pathologized and stigmatized. Supporting heterosexual morality and “women’s sexual passivity,” Groneman (2000) notes that “over sexed” women have been institutionalized (p. 23), and Brickell (2009) reports that homosexuality has been deemed a “sickness in need of a cure” (p. 61). Interventions in “abnormal” female sexuality included: sterilization, the removal of ovaries, clitoridectomies, and electric shock therapy (Brickell, 2009, p. 61). The sexual revolution of the 1960s and 1970s began to change the old double standard of sexuality, but “a deep ambivalence still exists” toward female sexuality Groneman (2000, p. 181) writes. Moreover, in an effort to re-establish “family values” the Victorian belief that women’s sexuality was “both dangerous and out of control” has been reasserted (p. 176).

### ***Regulatory Power and the Body***

Regulatory power is evident in the government and medicine’s attempts to control the size of older women’s bodies. Statistics Canada (2010) has proclaimed that, based on Body Mass Index (BMI) surveys, 23% of Canadian women over the age of 55 are obese and more than 20% percent of all older women are overweight. Largely based on those statistics, The Public Health Agency of Canada (2012) announced that obesity is “an independent cause of disease and death with a cost in excess of \$4.3 billion dollars annually” and, declared a “war on obesity” (O’Hara, 2005). However, the Centers for Disease Control and Prevention (2010) point out that BMI is a comparative population measure only; as a measure of the individual, BMI is merely “a *fairly reliable* indicator of body fatness” (*italics in original*). Furthermore, when “all-cause mortality

data” was correlated with the patients’ BMI in 444 reported studies, Heiat, Vaccarino, and Krumholz (2001) concluded there was “a negative, or no association” between BMI and mortality rates (p. 1197). What seems clear from this evidence is that for “\$4.3 billion reasons a population measure has been co-opted, redefined, and legitimized as a normative measure of individual health and a disciplinary mechanism.

The statistics and the war on obesity sanction what Murray (2008) terms the “discursive constructions of the ‘fat’ female in Western society as negative” (p. 213). Prejudice against “heavyweight people is prevalent, powerful and potent in North America today” (Crandall, Nierman, & Hebl, 2009, p. 469). In a culture that maligns fat, based on my personal experience and my research, I argue that the control over women’s bodies doesn’t end there: slim women are occasionally embarrassed in social situations. A 61-year-old slim woman participating in Liechty and Yarnal’s (2010) research attests to such discrimination:

Sometimes I have . . . older women, women my age or even some younger might be struggling with a lot of weight, and they look at me like they’re angry, like this (narrows eyes and mouth) . . . it makes me very uncomfortable. (p. 1210)

I too have encountered similar social repercussions:

*On my walks I frequently encounter an overweight acquaintance who asks in a voice inflected with concern, “how are you Ann”? No matter what my response, she continues on the theme of “you are so thin” with various endings that include “I’m concerned about your weight”; “you look unwell”; “you’re looking older” and “I think you should eat more”. (Fieldnotes, Faulds, January 15, 2012)*

Unfortunately, the retribution an older woman will suffer if she is one of the 23% of older Canadian women Statistics Canada (2010) has declared obese will be more severe than angry looks and supposed concern. Murray (2008) argues that “normative thinness constitutes the feminine”; the normative slender body occupies a space of power and constructs social perceptions of bodies as normal or aberrant (p. 364). Murray (2008) believes “*tacit bodily knowledges*” (a term I interpret in this context as embedded knowledge that is believed, understood and acted upon) connect seeing a body, *reading* the visible bodily markers and *knowing* the body” (p. 362, *italics in original*). In short, Murray (2008) asserts we have internalized statements about certain bodily types, and we “*know* that a fat woman is lazy, greedy and of inferior intelligence”

(p. 363, *italics in original*). These characterizations are connected to powerful discursive statements, stereotypes and social values, many of which oppress older women. Obese older men may not suffer similar societal discrimination. Hurd (2000) asserts that men are “much less affected by the discourses of beauty and idealized standards than women” (p. 81). But, just in case she is wrong, someone should warn Brad Pitt and George Clooney—based on their BMIs, Pitt is overweight and Clooney is obese (O’Hara, 2005) — both could be subjected to the regulatory power of medicine and the government.

To the detriment of older North American women, the regulatory powers of the government, and medicine, working within the aged and gendered standards of the discourses of beauty have a wide-ranging effect. Saucier (2004) states that “survey data suggests” that one half of adult women in the United States are on a diet (p. 420). In a culture that links a woman’s social status, sexuality, and beauty to youth and thinness, those statistics expose a “cultural obsession” with weight Saucier observes. Statements such as “*I hate my flabby arms and inner thighs*” and “*I wish my stomach would just magically disappear*” (*Fieldnotes, Faulds, September 15, 2011*) are more commonly heard during women’s conversations than the triumphant inflection I sense in the words of one of Liechty and Yarnal’s (2010) 62-year-old participants: “I lost about 26 pounds two years ago and felt really much better about myself, about the way I looked and felt . . . especially about the way I looked” (p. 1205). We do not know how her friends responded to her weight loss but Latner, Ebnetter, and O’Brien (2012) report that a prejudice against obesity “persists against successful female dieters” (p. 2037) and a “residual stigma” clings (p. 2035). Rather than viewing the woman’s weight loss as positive, her friends are likely to feel resentful, perceive her as less attractive, older, and still obese.

## **Productive Power**

The role of productive power is to structure the infinite number of categories and sub-categories represented in, and constituted by new knowledge. Working in concert, with productive power, definitional and regulatory powers generate the new discourse. Definitional power naturalizes productive power’s categories and sub-categories and adds an increasing number of norms, standards, binaries, stereotypes, and



assumptions. Regulatory power then legitimizes the knowledge, and ensures that it is widely disseminated in discourse and enforced (Brickell, 2009). “Discourses can be understood as language in action” Danaher, et al. (2000, p. 31) assert. When individuals sharing language and culture interact, Liddicoat (2009, p. 116) writes, they speak in “a culturally shaped code in a culturally shaped context to create and interpret culturally shaped meanings”. An example is, as the “codes” representing North America’s standards of youthful beauty, gender’s scripts, ageist beliefs, and categorizations of the body (young/old; male/female; desirable/undesirable) act within the discourses of heterosexuality, they produce culturally shaped meanings that are interpreted as the stereotypes that marginalize and exclude aberrant sexual practices and bodies.

## **Unequal Power**

In discussions of older women, unequal and productive powers are securely woven together and difficult, if not impossible, to separate. Rather than attempting to definitively unwind the threads that bind them together, I have chosen to address the resultant inequalities as a unit. Bowden & Mummery (2009) write that feminist analysts realize that contesting the oppression of women is, “at its most fundamental level,” a matter of the origin of knowledge and how it is authorized (p. 24). They continue stating that knowledge “bears the mark of its human creators and its social context” (p. 25). However, as Foucault (1978) asserts, “established regimes of thought” (p. 81), and their power; can be contested.

In 1963, white, college educated, suburban housewife and mother Betty Friedan drew North American society’s attention to a problem she diagnosed as being the result of the difference between women’s own sense of their needs and potential in life and the life society consigns them to -- “one of dependence and servitude in the family” (Bowden and Mummery, 2009, p. 21). Friedan’s “problem” resonated with other white, middle class, North American women. Her analysis of the “biased views and alleged facts” entrenched in society’s views of male and female difference became the heart of white, middleclass, and liberal second wave feminism (p. 22). It was not long before working class women, lesbians, women of colour, and other interest groups vehemently contested the “sameness” of women, and the effect of what feminist analysts have

variously termed societal misogyny, chauvinism, the patriarchy and phallism, had on their lives (p. 4).

Unequal power is visible as it acts to normalize and legitimize the limitations placed on North American women's lives. Acknowledging the differences among women, I propose, in agreement with Brickell (2009), that when examining women's inequalities, analysts work from two differing premises: (1) gender is inextricably bound to sexual inequality; and (2) that "structural inequalities" flow from heterosexual practices (p. 64). Given that the terms (misogyny, chauvinism, the patriarchy and phallism) which early second wave feminists employed to define the origins of gendered inequality are also used to describe the societal beliefs that drive heteronormativity and the discourses of heterosexuality, I argue that the four powers acting within heteronormativity are one of the principal mechanisms that oppress women and restrict their lives in contemporary North America.

Analyzing gender, Scott (1986) states that gender structures, naturalizes, and legitimizes "the so called natural relationship between men and women" (p. 1067). I contend that Scott's "so called natural relationship" is shaped by the knowledge produced and disseminated about women, their bodies, their abilities, and their lives. Over the past three decades, an ever growing number of studies examining the discourses of gender have recognized "the "diverse domains" in which the perceived sex differences inherent in gender appear as a "model, analogy and metaphor for hierarchical relationships" (Meyerowitz, 2008, p. 1351). Pigg and Adams (2005) write that "a rich body of ethnographic and historical research" illustrates that gender is "knit into kinship and procreation, and productive and reproductive relations" (p. 5). They continue to assert that, in the present, by questioning gendered relations of power (and the knowledge supporting it), feminist researchers have "exposed [North America's] naturalizing assumptions" (p. 5).

Moreover, Pigg and Adams (2005) assert, that feminist research "complicates our notions of maleness and femaleness" and permits us to "conceptualize sexuality and erotic desire" as independent of gender" (Pigg & Adams, 2005, p. 5). Sexuality is located in different "regimes of power" (Bucholtz & Hall, 2004, p. 487), and a focus on asymmetrical sexual equality has emerged from both feminist and lesbian and gay

analysts (Brickell, 2009, p. 64). Both groups address the “politics of heterosexual practice” (Brickell, 2009, p. 64) perpetuated in North America through law, religion, and medicine, and both expose the resultant social inequalities. While lesbian and gay politics are important to consider in further detail, they are beyond the scope of this thesis.

I have explained how, when acting individually and in concert, definitional, regulatory, productive, and unequal power create and sustain the knowledges that “power up” (Brickell, 2009, p. 62) the discourses integral to the ideology of youth. Furthermore, I have asserted that these powers are responsible for the maintenance and enforcement of the norms, standards, and societal assumptions disseminated by the hegemonic discourses and the values and meanings connected to concepts such as “age,” “woman,” “heterosexuality,” and “beauty,” which create and maintain older women’s social inequality in contemporary North America. Concluding this chapter, I will define the discursive notions of norms, facts, stereotypes and binaries, explore how they operate, and briefly address their impact.

## **Normative**

The *Collins English Dictionary* (2003) defines a *normative* as (1) “implying, creating or prescribing a norm or standard” and (2) “expressing value judgments as contrasted with stating fact.” Clarifying the definition, *normal* means “conforming to the conventions of one’s group” (p. 1112); *convention*, in the “normative sense” is, “the most widely accepted or established view of what is thought to be proper behaviour, good taste, etc.” (p. 367), and *standard* is defined as, “an accepted or approved example against which others are judged” (p. 1573). Combining all the dictionary’s definitions my definition of a normative is:

*A societal belief that encourages, if not demands, conformity to widely accepted, implied or prescribed standards, conventions, and behaviours that, reinforced by the power of societal discourses, are believed to be proper/correct.*

Significantly, rather than a fact, a normative is a “value judgment”. Disseminated in the discourses the norms have achieved an “accrued truth value” (Mills 2004, p. 67) and, as

a result, societal norms have the power to enforce cultural beliefs and practices. If not for the implicit threat of societal judgment and the resultant penalties, one could state that societal norms are nothing more than contemporary myths.

## **Facts of an Older Woman's Life**

A *fact* is defined by the Collins English Dictionary (2003) as: "as truth verifiable by experience or observation" (p. 584). Living in a culture that idealizes youth and beauty, older women know through observation and experience that "[t]he cultural belief that age diminishes sexual attractiveness applies earlier and with greater force to women" is a fact (Carpenter et al, 2006, p. 102). Additionally, they are acutely aware that "[w]omen are at a disadvantage [to men] because their sexual candidacy depends on meeting certain much stricter conditions related to looks and age" (Sontag, 1997, p. 22). I attest that these statements are facts of an older woman's life and that they reveal the power of the discourses to normalize, legitimize and regulate what people believe and social practices. Moreover, I argue that the constant repetition of these "facts" based on limited knowledge, misassumptions and myths, sustain older women's inequality in North America today.

## **Stereotypes**

Constructed by descriptive combinations of pejorative adjectives that condense complex differences into distorted representations of a group, stereotypes are one-sided and simplified systems of representation (Hall, 1996). Split into "good sides and bad sides" reflecting the societal beliefs and values, stereotypical representations are the basis of binary oppositions (for example young/old) (Hall, 1996, p. 216). While Hall (1996) offers "warlike", "cannibals" and "hostile" as early examples of stereotypes associated with people of colour (p. 216), I suggest "old" "ugly", "and "cranky" as pejorative adjectives that represent derogatory associations and images when they accompany the word "woman". Stereotypes and their vocabularies produce knowledges that shape societal beliefs and practices. In the context of older women, stereotypes

affect how older woman are perceived, their reception in contemporary society, and their lives.

## **Binaries of Social Value**

Binaries are created when two opposing stereotypes are separated by an oblique slash (for example, grandmother/crone). The stereotype on the left of the slash exemplifies the approved, societal norm and on the right is the deviant, pathologized and unnatural type that does not. Citing Woodward's (1999) statement that "a cleaver sharp binary between beauty and the ravages of time is encoded" in societal beliefs, Cruikshank (2009) notes that the "young/old binary is fixed" in North American society (p. 141). The binary normalizes and legitimizes the good, young, natural, and normal, while simultaneously differentiating them from the stigmatized bad, old, unnatural, and abnormal. Examining heterosexuality's binary of sexual value, on the left of the slash (as natural and normal) one would find societies' assumptive view of the normative feminine and healthy, young, beautiful and reproductive bodies. Guided by the discourses of aged and gendered beauty, on the right, (as unnatural and abnormal), we would find older women's, pathologized, and non-reproductive bodies. The knowledge that powers the norms, stereotypes inherent in the binaries creates and supports a hierarchy of oppression, morally condemns the sexually active and/or eroticized older woman's body, and punishes those who transgress aged and gendered beliefs. Moreover, the societal beliefs evolving from the binary legitimizes the social power of the young and permits them to define, stigmatize, speak for, laugh at, and attempt to control the old.

## **Summation**

I have argued that in contemporary North America, definitional, regulatory, unequal, and productive power sustain the discourses of ageism, heterosexuality, gender, and beauty, and their normative standards, stereotypes, and binaries. These powers are, I argue, the instruments responsible for recycling and reorganizing the myths and values of the past and insuring that societal beliefs, values and the status quo are maintained at the expense of older women. Whether it is due to a combination of

some or all of the powers, everyone is subjected to societal systems of influence and control. However, when definitional, regulatory, unequal, and productive power speak in the voice of the discourses to normalize cultural roles and social status, define and regulate sexuality, physical appearance, and social interactions, we know that they are speaking, almost, exclusively, to older women.

## Chapter 3.

### Older Women Speak

There is something “very real” about definitional, regulatory, productive, and unequal power in contemporary North America Brickell (2009, p. 62) writes, and I argue the power of stereotypes, norms, and standards to proscribe an older woman’s sexuality, belittle her body, and to demean her character and her physical and cognitive abilities, while erasing her social status is also “very real”. Little is known about how contemporary older North American women inhabit and experience the aged-based norms and stereotypes sustained by the discourses, because, for varying reasons, older women are frequently excluded from research studies (Gott and Hinchliff, 2003). Too often, older women’s voices are silenced. However, not all older women are remaining silent. Subjugated knowledges, those knowledges that have been silenced, can and do, resist and contest, the norms and standards the discourses impose.

In this chapter, I present the words, and actions of the older women participating in Fishel’s (2004) *Still Doing It: The Intimate Lives of Women Over 65*; Blazer’s (2004) *Backseat Bingo*; Man Alive’s (1995) production *Tonight’s the Night*; and Osler, Levinson, and Spenser’s (2003) *Let’s Face It: Older Women Explore Their Aging Faces* with Angelou’s (1998) narratives and the words of the women writing in Graydon’s (2011) anthology and with those cited in published research and media reports. I explore and interpret their responses to these controlling influences through the lens of culturally mediated agency and compare those responses with the knowledge about older women circulated in the discourses, and how older women are represented in published research studies. All of the women represented in my research acknowledge the influence of the discourses on their lives, but their responses vary. Many of the older women’s words are vehement as they contest one or more of the discourses. In contrast, a few older women passionately support societal stereotypes and norms, and others, for a variety of reasons, simply comply with societal demands.

## Story Telling

Shuman (2006) explains that people tell stories to “reflect upon events”, to communicate with others, to negotiate positions of power, and in response to existing ideas (p.153). She emphasizes that the way an experience is recounted assists in shaping the listeners’ understanding of the story and its meaning. Stating that she plans to be like her mother when she “reaches her seventies and beyond” (p. 83), Angelou (1998) relates a story about her mother that connects to age, to an older woman’s sexual desire, agency and societal beliefs. Speaking in what Angelou (1998:84) describes as an “upset voice”, her 74- year- old mother telephoned, and requested that Angelou speak to “poppa”:

Mother: Baby, I’ve waited as long as I could before bothering you. But things have gone on too long. Much too long. If you don’t talk to him, I’m going to put his butt out of this house.

Angelou: What did poppa do, Mom? What’s he doing?

Mother: Nothing. Nothing. That’s it. He’s not doing a damn thing.

Angelou: But, Mom, his stroke.

Mother: I know but I’m not a damn rock. He thinks that if he has sex he will bring on another stroke. The doctor already told him that isn’t true. And I got so mad when he said he might die having sex that I told him there’s no better way to go. Talk to him, he’ll listen to you

(p. 84)

Angelou (1998) complied. Telephoning her stepfather, she gently explained that her mother’s “love appetite is strong,” saying, “Poppa, please excuse me, but if you don’t take care of her in that department, she will starve to death, Poppa” (p. 84). Her stepfather “coughed, sputtered and cleared his throat” and as Angelou (1998) said, “I love you Poppa”; his “bye baby”, was barely audible. Completing the call, Angelou (1998), states she poured herself a drink (p. 85). The next day her mother called, “Hi, darling, Mother’s baby,” she cooed. You are the sweetest girl in the world,” and, Angelou recalls, “I laughed for her pleasure” (p. 85).

Wood et al. (2007: 189) define sexual agency as a woman’s ability to act on and negotiate her rights and needs as a sexual being in three areas of their lives – their own sexual needs, their partner’s sexual needs and the medical system (p. 189). I want to



reword the definition to read -- a woman's "culturally mediated" ability to act on (Ahern, 2001, p. 112). As Carpenter et al (2006) argue, negotiating their rights and needs as a sexual being is a life long and complex process for all women; the prohibitions and restrictions on our gendered and sexual selves begin in childhood and accumulate over a life time.

My interpretation of Angelou's (1998) story is that her mother acted on her sexual agency. Telephoning her daughter, she voiced her protest and persuaded Angelou (1998) to mediate. As the narrator, Angelou (1998) renders the dialogue lovingly; she does not mock her mother's sexual desires or her stepfather's fear. Following Schuman, (2006) I argue that Angelou's intent in relating to story is to contest the myth that older women do not have sexual desires and are too physically frail to be sexually active. Moreover, challenging the societal belief that recognizes only youthful and procreative sex, I believe, she is attempting to create a social context in which her own aged sexuality is accepted. What stories of life, sexuality, and ageing do the other older women represented in my research and participating in documentary films relate?

## **Documentary Films**

Hollinger, (2012, p. 74) states that feminist theorists have defined three broad documentary categories, interventionist, noninterventionist and feminist committed. Citing Nichols' (2001) work, Hollinger lists five categories of interventionist films: (1) *Expository* films that feature an authoritative narration "often termed the voice of God" describing, commenting on, and interpreting events. (2) *Interactive*: in these documentaries, the filmmaker interviews participants or "otherwise intervenes" in the events filmed. (3) *Reflexive* films question the film's objectivity, the filmmakers' construction of, and the effect of the events depicted. (4) *Poetic* films reveal the filmmaker's emotions and/or intellectual response to their topic through the documentary's images. (5) *Performative* films use an experimental approach. The documentary emphasizes the subjective or expressive aspect of the filmmakers' engagement with the documentary's subject and the audience (p. 75).

Alternatively, *non-interventionist* documentaries, are “commonly labeled observational or direct cinema”, because, Hollinger (2012,) states, the films are an attempt to capture the “reality of everyday life”; both the film maker and the camera are unobtrusive (p. 75). However, critics argue, their goal is “unrealizable”; subject choice, shooting location, preconceptions, and the presence of the director, camera, and crew, all “act to manipulate” the reality they attempt to depict (p. 76). *Committed and avant garde* feminist films straddle the line between interventionist and non-interventionist approaches. The filmmaker’s goal is to encourage conversations by illustrating the “systemic causes” of the problems they examine through alternating observational sequences, scenes of the women speaking directly to the camera, media, and printed messages. Many feminists believe that the films are more effective if the filmmakers directly intervene to shape how the women and their stories are presented (p. 77)

## **Still Doing It: The Intimate Lives of Women Over 65**

Fishel’s (2004) documentary *Still Doing It: The Intimate Lives of Women over 65* (*Still Doing It*) fulfills the requirements of a “committed” feminist documentary (Hollinger, 2012, p. 75). Contesting societal myths and misassumptions, *Still Doing It* (2004) focuses the viewers’ attention on the impact those beliefs have on the participants’ lives. Throughout the documentary, the viewer sees the older women in their homes, at their work places, in their communities, and interacting with their families and lovers as they relate their stories and explain their thoughts about, and emotional responses to societal restraints and myths of heterosexuality. Fishel’s (2004) participants may dread the social and political consequences of their actions and words but, ignoring Gullette’s (1997) advice to remain silent, they chose to speak and they challenge viewers to question their entrenched beliefs.

*Still Doing It* (Fishel, 2004) opens with a sign post displaying a quote from sex therapist Dr. Ruth Westheimer advising viewers to “Use it or Lose It” and then the nine older women participating in the documentary appear and are introduced. Elaine (age 75) and Juanita (age 74) are black. Juanita enjoys a long term, intimate relationship, and Elaine, recently widowed, would “cherish a relationship”. The other seven women are white: Ellen (age 64), and Delores (age 70), are partners in a committed lesbian

relationship; Ruth (age 65) is happily married, and Betty (aged 72) enjoys an intimate relationship with a much younger man. Francis and Harriet, (both over 80), and Freddie (aged 69), have all been sexually active in the recent past and fantasize about being sexually active beings in the future.

Opening the conversation, a smiling Harriet says, “[e]ven bad sex is better than no sex”.

*I immediately notice that even though her hair is almost completely grey, Harriet has thick, black eyebrows. I am envious; my eyebrows are thinning and becoming grey. As an esthetician colours them, she tells me that it is “an effect of ageing”.*  
(Fieldnotes, Faulds, August 29, 2011)

A laughing Ellen enthusiastically states, “[p]eople who get up to give us a seat on the bus have no idea what hot numbers we are in bed”. In a somber voice Elaine states, “[s]ociety has a hard time dealing with a 75- year-old great grandmother being sexual and I am still very sexual”. Juanita, also a great grandmother, looks straight into the camera (and into the viewers’ eyes) to say that as a widow, her religion forbids her involvement in a sexual relationship. Then her voice softens, and, with a big smile, she says, “God will forgive us for it!” A photograph of Betty appears. Sporting spikey blonde hair and wearing only a smile, she is kneeling and embracing the lower body of a nude man as she comments in a voice over, “I’m 72 and he’s 26 . . . I’ve never been more sexually compatible with a man in my life . . . most people are disgusted” (Fishel, 2004).

*Simultaneously, the thought “go for it” competes with feelings of discomfort as I embody the social prejudice against sexual relationships between an older woman and a younger man, and I question the power in their relationship.*  
(Fieldnotes, Faulds, 2011, August, 30, 2011)

## **Older Women and Younger Men**

In *Still Doing It*, Betty is enthusiastic about her relationship with a man almost 50 years her junior. Her posture, face and her voice project pride, defiance and, I think, sexual satisfaction. Wood et al. (2007) define a sexual subject as a woman in control of her body and her desire; in other words, she has, and acts on, her sexual agency. In contrast, a sexual object’s sexuality is controlled by any or all of the influence of her family, religion, and prevailing cultural beliefs; if a woman recognizes her sexuality, she

seldom acts to achieve her desires. Betty's demeanor and words lead me to believe she is a sexual subject -- Betty is enacting her sexual agency despite societal efforts to regulate where, when, and with whom she can be sexually involved. Resisting the myths of heterosexuality and ignoring the societal dictum that sex is the prerogative of the young, Betty flaunts her relationship. However, even a sexual subject's agency can be constrained by societal dictates and embedded beliefs as Rebick (2011) attests:

Approaching 65 . . . to my total astonishment I find that an amazing number of young men want nothing more than to have an affair with an older woman. Unfortunately, the feminist principle that led to disapproval of older men seeking younger women has caused me to restrict my own sexual practices after an initial enjoyable tryout. (p. 119)

In the documentary, Harriet comments, "older men do not have any sex appeal, its youth, sex and youth go together," However, her recent experiences of younger men's attitudes toward her sexual desirability differ from Rebick's (2011). Harriet has had only two much younger lovers in the last 20 years and, she is near tears as she says, "I'm not getting what I need". In North America today, reflecting the influence of the discourses, Gullette (1997) declares that, society connects sexuality, fun, energy, appetites, intensity, hope, and prestige to youth; I believe Harriet does as well.

## **Victims of Our Hormones**

As an excerpt from a 1963 television advertisement for estrogen therapy unfolds on the screen, *Still Doing It*, (Fishel, 2004) shifts its focus and draws the viewers' attention to societal attitudes and beliefs about menopause and menopausal women. Dressed in a suit and a tie and perched on the corner of a desk, a grey haired man gazes somberly into the camera to ask in a ponderous voice, "[w]hat about the future of the menopausal woman . . . is her creative life over because she has reached the age of 45 or 50"? As I watch an enactment of a middle-aged woman struggling to get out of a bed, he continues in a voice over, "the problems of menopausal women are constantly under evaluation by clinicians all over the country."

In fact, menopausal women were "evaluated" in the best-selling book *Feminine Forever* published in 1966. Dr. R. A. Wilson proclaimed menopausal women suffer a

“precipitous decline in sexuality” and descend into a “vapid cow like state.” Menopause, he declared, is a “serious, painful and often crippling disease”. The “disease”, termed “estrogen deficiency” is easily rectified; estrogen therapy, (the forerunner of Hormone Replacement Therapy [HRT]) would prevent further deterioration (as cited in *Our Bodies Ourselves*, 2011). A second best-seller written by D. R. Reuben, *Everything You Ever Wanted to Know about Sex*, followed in 1970. Reuben’s message was:

Without estrogen the quality of being female gradually disappears . . . a woman becomes as close as she can to being a man . . . decline of breasts and female genitalia all contribute to a masculine appearance . . . having outlived their ovaries, they may have outlived their usefulness as human beings”.  
(as cited in Hinchliff & Gott, 2008, p. 68)

As Wilson’s (1966) and Reuben’s (1970) appalling words inundated North American society; menopause became a “crucial bodily event”, (Hillyer (1998, p. 48) argues, rather than a process that “happens only to our reproductive organs” (Hite, 2011, p. 481). The messages disseminated by these “health” books, I argue, increased young women’s fears of ageing, damaged older women’s self-image, and reinforced society’s negative view of menopausal and postmenopausal women’s sexuality, their bodies, and their physical and cognitive abilities. Contesting the message communicated in Wilson’s and Reuben’s books, in *Still Doing It* (Fishel, 2004), Harriet asserts, “[i]t’s supposed to be over but it’s not, women are much more sexual after menopause,” and Elaine asks, “[w]hy do I still have yearnings if I am too old”?

In North America, Whittaker (1998, p. 80) argues, advertisements for HRT continue to present menopausal women as “bewildered or passive-persons”. Moreover, she continues they support stereotypic assumptions that menopausal women are “passive victims of their changing hormones” and “diseased, irritable, sexless and depressed” (1998, p. 81). In the 21<sup>st</sup> century, criticizing the message that physicians, the media, and pharmaceutical advertisers continue to disseminate declaring that HRT will preserve a woman’s youthfulness, attractiveness, and physical and mental abilities, Chrisler (2010) argues that many research studies indicate that HRT is less beneficial than advertised and is actually harmful to some women (p. 16).

## **Widowhood and Desire**

In 1999, the American Association of Retired People (AARP) completed a survey on the sex lives of individuals over the age 45. Their report states that women over the age of 65 completed more than 20% of the surveys and that over one half of those women were widows (American Association of Retired People, 1999). Loe (2004) reports that AARP's analysts "equated the end of their [the widows] sexual lives with the loss of their husbands" (p. 306). In a second AARP survey completed in 2009, however, the category of widow was not one of the variables reported.

In *Still Doing It* (Fishel, 2004), Freddie (age 69) and Frances (age 80+) contradict AARP's 1999 conclusion. Freddie asserts "[s]ex was extremely important" throughout her married life and she states, "[n]ow sex seems like a dream . . . strong feelings sneak up on me". Maybe, someone who says "I want to do what *you* want me to do", will appear Freddie says, and she is smiling broadly as she adds, "[m]aybe even one or two times a week". Frances is blind, requires a wheelchair, and lives in a care home. She tells viewers that she was widowed at 60, but she found a man she was "delighted to have sex with for more than ten years". And then she met David. David lives in his own home and visits her daily. Frances, declares, "he is the love of my life . . . there's not much privacy [in the care home], but when we have sex we are in our own world". Confirming Henry and McNabb's (2003) assertion that sexuality is much more than penetrative intercourse, Frances continues, "caressing and holding each other can be more important than the act itself". David died shortly before the documentary was completed (Fishel, 2004). Clearly, these narratives (Freddie's hopes for her future, and Frances' life experience) contest AARP'S Magazine's (1999) conclusion that a woman's sexual life and desires must end with the death of a partner.

## **Describing their Sexuality and Desires**

Demonstrating that sexual desire is not erased by age, in *Still Doing It*, (Fishel, 2004) Delores is giggling as she describes meeting Ellen, "there was tremendous desire on my part," and Ruth explains that, to her, "sexual desire is an integral part of being human; it has nothing to do with age". Harriet laughs heartily and asks, "I've told you the slogan of the little pocket rocket? We've put more women in orbit in a day than a man

has in a year,” and Elaine somberly comments, “I know how to pleasure myself . . . some of my friends don’t . . . thank God for it . . . but I don’t prefer it”. Speaking in Loe’s (2004) research, a 69 year old woman agrees -- “[v]ibrators are not the same as men. Right? When a woman needs a man a vibrator just won’t do” (p. 309).

All of the women participating in *Still Doing It* (Fishel, 2004) are sexual beings; five lead sexually active lives and four are looking forward to a future where they will once again be sexually involved. As they describe their sexuality, the women seem to glow. They laugh, their smiles are infectious, and their hands are expressive as they say: “it’s funny we didn’t laugh when we were younger, now it’s funny”; “it’s freer, more inventive; when you are young you have to be the best lover; now it’s relaxed”; “sex is an expression of love, being touched, held, kissed”; “sex gives me a feeling of being loved and being wanted”, and “sex is like the little bunny, sex is the energizer, it’s central, it’s key”.

Betty’s posture and words are defiant as she states “what we think about sex in North America is a joke . . . a joke . . . we live in a world where you can only have sex if you are young and beautiful”. I interpret her statement as an open challenge to societal mores and the normative standards of aged and gendered heterosexuality, and beauty. I believe that Betty is attempting to negotiate a position in society that permits, or at the very least, tolerates, her sexual being and her relationship.

## **Ageism**

Discussing the power of the discourses of ageism to influence societal beliefs in *Still Doing It* (Fishel, 2004), the women’s displeasure, frustration, and a willingness to resist can be sensed in their facial expressions and their stiffened postures. The women’s voices become harsher and seem to come from a lower register as they state their thoughts: “; “we are the forgotten population”, and “we are told if we eat right, go to the gym and use the right cosmetics, no one will know how old we are”. Ruth’s words, in particular, express my thoughts and I would argue the thoughts of many other older North American women:

Age is political . . . I don’t know what 65 feels like, it feels like me. Others have ideas about what 65 is . . . I don’t fit that image . . . generally I don’t want to

comply with cultural ideas that I'm not supposed to do something, to be something, to say something because I am 65.

Resisting the impact of ageist beliefs and practices, Harriet comments, "never see yourself in terms of age, nothing is impossible", and Juanita offers what I think is sage advice -- "walk with your head up, your shoulders back . . . be proud that you are here" (Fishel, 2004).

## Summation

As an audience member I am aware that Fishel (2004) chose the participants, edited the footage and possibly the women's responses to construct an argument that contests the myths of sexuality and the ageist beliefs prevalent in North America today. As a collaborative effort, Fishel's (2004) editing and the participants' words guide the viewer through their message that older women's sexuality is not abnormal, should not be disconcerting, or considered deviant and in need of societal control. Fishel's (2004) framing of Harriet's fears -- that the power of North America's normative standards and prohibitions will, or already have, denied her sexual existence-- focuses the viewer's attention on the destructive effect the myths and discourses have on an older woman's life, and the chasm that exists between the young and sexually desirable and the old and sexually undesirable. Before appearing in *Still Doing It*, (Fishel, 2004) Juanita had adapted her public persona to accommodate her religious community's beliefs. On camera, however, by revealing her intimate relationship, Juanita exposes her life to her community's, and possibly her family's censure. Fishel's (2004) participants are, I argue, resisting the dictates of the discourses of heterosexuality and dismissing gendered and ageist beliefs and restrictions. These women are reclaiming their sexuality and demonstrating that, for some older women, sexuality, sexual desire, and fantasizing do not carry a "best before" or "expiry date".



## Backseat Bingo

Liz Blazer's (2004) six minute documentary, *Backseat Bingo* is, I believe, an example of a performative, feminist documentary. *Backseat Bingo* is an animated film that addresses the serious topic of aged sexuality humourously. Its animated characters, brightly coloured images and, up-beat music engage the audience and assist in breaking down any resistance to a discussion of aged sexuality. The similarity between the animated characters and the living individuals informing the narrative is remarkable. Photographs of five of the six participants appear at the end of the documentary and it is apparent that the animated characters are not simple caricatures.

As the video opens, an older man seated on a couch, chuckles and nudges the older woman sitting beside him saying, "I asked her, do you want to go to bed with me." She turns to him and responds, "[t]he first time I said, NO!" Turning to her, he continues, "so, a few days later I ask again, wasn't it the most romantic thing?" She smiles and nods her head. The man lifts his arms and opening them wide says, "[s]he accepts". His smile is infectious. Then the animated characters introduce themselves; a smiling David, (age 85), is the man on the couch, sitting beside him, is David's partner Evelyn; she does not give her age. Ruth (age 75), is seated in an armchair and a man, slouching in a wing chair, does not give his name but states he is 92; (I'll refer to him as Peter). Sunga proudly announces, "I'm 84" and raising a finger, says "going on 85" and then Lou appears; he chortles, scratches his chin and asks, "[h]ow old am I?"

It is easy to imagine the characters seated in your home as a conversation begins. Sunga states, "I firmly believe you stay young because of sex". Ruth responds, "[a]t 75 you still want sex; you are not sure you are going to get it, but you are looking for it". A smiling Sunga, reminding me of the need for a multifaceted definition of sexuality, adds, "I've always wanted romance in my life, and I think you need it all your life, you need to be touched, you need to be hugged, you need to be kissed" and Ruth asserts "[o]f course I have desires . . . I don't think we ever get past our sexual desires, we cover it up with the thought we don't need men in our lives" (Blazer, 2004). Although their voices are light and they smile as they speak, I sense both yearning and sadness as Ruth expresses her belief that older women conceal their sexual desires and Sunga states her need for romance in her life. Asked, what qualities they look for in a partner, Ruth

responds firmly, “NO Republican’s please!”; Peter believes “companionship is very important” and a grinning Lou is looking for kindness, consideration, and a woman with “a sparkle in her eye” (Blazer, 2004).

And then David speaks. Raising his arms, palms forward, in what I interpret as a “don’t blame me” gesture, David says, “I adore it, I admit it; the pleasure is unbelievable; I am not ashamed of it”. Pointing at David, Evelyn laughingly responds, “[h]e doesn’t look it, but he’s a very sexual man”. David’s delight is obvious as he continues, “[a]t my age, for a man to have the possibility of doing sex is the highest thing in the world, the greatest achievement in the world and it’s unbelievable”. Lou and Peter smile but do not comment. With a big smile Sunga, has the last word, “this business about a man using a woman for a one-nighter, well what’s wrong with a woman using a man; is that so terrible” (Blazer, 2004)?

Blazer’s (2004) animated video, produced as part of her Masters of Fine Arts degree, is similar to Angelou’s (1998: 83) story about her mother’s “love appetite”. Both present their subjects respectfully and both contest the myths of older women’s sexuality with dialogue that is not barbed or mocking. Drawing attention to Ruth and Sunga’s continuing sexuality and desire and the need for romance in a woman’s life, Blazer (2004) is attempting to persuade viewers to explore their beliefs and possibly question the prevalent knowledge surrounding older women’s and men’s aged sexuality and desire.

## **Tonight’s the Night**

In 1995, the CBC’s documentary *Tonight’s the Night* (Man Alive, 1995) presented what may have been a startling demonstration of the diversity of aged sexuality. Communicating its message through alternating sequences of observation, staged events and segments when the participants and others speak directly to the camera, *Tonight’s the Night* (Man Alive, 1995) straddles the interventionist/non-interventionist divide. As host, Roy Bonisteel introduces the documentary, remarking: “elder sex is coming out of the closet. Things change, but not as much as you might expect”, the titles roll and the documentary’s intent is clear as Sue Johanson, *Sunday Night Sex Show*

host, welcomes listeners and viewers to a segment on sex and ageing . She states, “[w]e are sexual human beings and we are sexual right through until death” and stressing each of the words, she says, “[s]exuality is not the prerogative of the young”.

*Tonight's the Night* (Man Alive, 1995) then takes viewers to a round-table discussion of ageing at a seniors' residence in Kitchener, Ontario. An unidentified woman is speaking. She is not wagging her finger, but to me, her manner and her voice suggest that she is lecturing. Illustrating that women's desire is cognitive and often depends on “all the bits that go with it” (Hinchliff & Gott, 2008, p. 72) she states that men should realize women need intimacy, companionship and romance. But, she asks, “[d]o men think about it? He never thinks to give her a rose; he wants to give her an erection”. The men laugh, but they do not look at the speaker, the camera or each other; their discomfort is obvious. After a few, long seconds one man responds, “[w]ell, that's one opinion”. When the conversation resumes, no one challenges the woman's comment, and the men begin a discussion of the economics of ageing.

### **Meeting the Couples in *Tonight's the Night***

*Tonight's the Night* (Man Alive, 1995) then focuses on the three couples participating in the documentary. As they are introduced to the viewers in voice overs, we see the couples moving through their daily lives. Henry and Miata are driving together and visiting family; Joseph and Cecile are shown in their home as she bustles about and he drives his electric trains, and we see Tom and Rebecca dancing together.

#### ***Henry and Miata***

Henry and Miata are dating. Miata has been a widow for 23 years and, she lives with her brothers. Henry's wife died four years before they met at a seniors' centre. Smiling, Henry admits he was attracted to Miata immediately; as he speaks, a smile flits across Miata's face. They are not intimate. “She gives me a big kiss . . . it doesn't go much beyond that”. Henry shrugs his shoulders; he does not push for intimacy but he calls her “Miss Prim”, a diminutive I interpret as somewhat mocking. Miata asks, “[w]ho's to say if we were married we'd be any happier”? She calls Henry every morning about nine, “[t]hat's part of love, when you care for somebody that to me is more important than going to bed together”. Henry's hand is caressing Miata's shoulder, but he is not

smiling as he says, “I’m willing to go along, I’ve learned to accept what we have”, and Miata responds, “[i]t’s a good feeling to know someone cares about you” (Man Alive, 1995).

### ***Joseph and Cecile***

When they met Cecile thought Joseph was “too helpful”, he insisted on doing everything, even her shopping. Now they are newlyweds. Joseph proudly proclaims “our sex life is great” and then, frowning, he continues, “we had a little trouble, men, you know, can’t get an erection but the doctor gives me a monthly shot . . . it works, it really works”. Laughing and nodding her head in agreement, Cecile adds “we have sex once a week”. *Tonight’s the Night* (Man Alive, 1995) rejoins Sue Johanson in the studio as she says:

Sex changes. In youth it’s mad passionate lust, touching each other, climbing all over each other, you just can’t get enough, and it’s glorious, but as you get older that settles down . . . fortunately. And then you get into companionate love, you really adore your partner. You can tell by the gleam in somebody’s eye, it’s what we call the copulatory gaze, you know--okay, tonight’s the night [snaps her fingers], gonna get lucky.

### ***Rebecca and Tom***

Tom, a widower, and Rebecca, a widow, were introduced by a mutual friend. Tom was about to return to the “old country”, but then he “met this lady”. They are “co-habiting” in apartments across the hall from each other; financially “it’s better than marriage”. Rebecca’s face is serious as she gazes into the camera and says, “I love Tom”. “He did tell me he wasn’t just a full man anymore, but that doesn’t make any difference”. Rebecca’s words seem to echo the comment of a 67-year-old woman participating in Loe’s (2004, p. 318) research.

He told me, “you can’t understand how it makes a man feel”. When he can’t perform it makes him feel like not a whole man. Once he started using the Viagra . . . he feels like a whole man again.

As Rebecca speaks, Tom lowers his head and appears to focus on his hands clasped in his lap. As an off screen voice asks Tom how he feels about that, Tom glances at, and then away from the camera as, in a low voice he responds, “[w]e’re compatible”. Tom’s

demeanour reminds me that masculine sexuality is defined as the ability to maintain an erection and achieve orgasm through vaginal penetration (Vares et al., 2006) and Elaine's comment in *Still Doing It* (Fishel, 2004) that, "some men think if they can't perform there is no other choice" (Fishel, 2004).

*In my notes, I ask I wonder if Tom has considered the 'shot' Joseph mentioned or Viagra, and if he did, what Rebecca's response would be.*  
(Fieldnotes, Faulds, 2011, August 16)

As *Tonight's the Night* (Man Alive, 1995) ends, in a scene staged for the camera, Cecile is curled up on their bed knitting with Joseph snuggled in beside her. Taking turns speaking, Cecile and Joseph say, "sex gets better with age" . . . "it's better because you are not so nervous" . . . "it's good fun too", and, chuckling together, "it's good exercise". Kissing Joseph on the forehead Cecile announces, "tonight's the night" and they are laughing as a door, displaying a "Do Not Disturb" sign, closes.

## **Sexuality's Diversity**

The diversity of both older men's and older women's response to their sexuality is evident in Blazer's (2004) *Backseat Bingo* and Man Alive's (1995) *Tonight's the Night*. Contrary to the myths that older women do not have sexual desires, are not desirable as sexual partners, and are too frail to be sexual, all of Fishel's (2004) participants (Ellen, Delores, Ruth, Harriet, Francis Freddie, Elaine, Juanita and Betty), Blazer's (2004) animated characters (Ruth and Sunga) and Cecile in *Tonight's the Night* (Man Alive, 1995) succinctly delivered the message that they are sexual beings. Their pleasure and contentment is evident on their faces, in their postures, and in their voices. Appearing in *Still Doing It* (Fishel, 2004), Frances, Harriet, Freddie and Elaine, and *Backseat Bingo's* (Blazer, 2004) Sunga and Ruth do not have sexual partners now, but they clearly communicate their desire to once again become sexually active beings. In the meantime they cope with their desires through self-pleasuring and in their dreams of sexual fulfillment in the future.

McHugh (2002) explains that a woman's "sense of herself as a sexual being, her thoughts about the meaning of sex and her awareness of her own sexual desire are constructed in a particular socio-historical context" (p. 38). In *Tonight's the Night* (Man

*Alive*, 1995), Rebecca and Miata appear to be in their late sixties or early seventies. They have stated they love their partners. Rebecca is “content, happy and healthy” in her relationship with Tom, and Miata questions their happiness if she and Henry married or began a sexual relationship. I argue that Rebecca and Miata’s thoughts and beliefs about sex and their awareness of their sexual desires have been shaped by the repressive double standards of heterosexual morality in the 1940s and 1950s, in combination with the contemporary discourses and their past life experience, their communities, and importantly, their family’s response.

Citing the words of a friend’s 38- year- old daughter, Angelou (1998) reveals the “horror” that can be expressed when a widowed mother “dares” to become intimate with a new man:

What could they possibly be doing together? She’s 60 and he’s got to be 65. Can you imagine them naked together? All that wrinkled skin rubbing against the other . . . old people just shouldn’t have sex . . . just thinking about that turns my stomach”.  
(p. 81)

The daughter’s statement, I contend, reveals her inscription with the dictates of aged and gendered heterosexuality and society’s beliefs and prohibitions. I agree with Angelou’s (1998), I believe angry assertion, that “teaching children that sex is only for procreation, does everyone a serious disservice” (p. 85).

In terms of male sexuality, I interpret Tom’s bowed posture and Henry’s shoulder shrug and facial expression as disappointment and, given the context, possibly embarrassment in front of the cameras. In contrast, David’s (*Backseat Bingo*) and Joseph’s (*Tonight’s the Night*) expressions of delight in their ability to perform sexually are almost tangible. Researchers report over 40% of older men experience erectile problems, but as McHugh (2002, p. 28) notes, the myths of the asexual, undesirable, and frail older woman combine with the discourses of menopause and FSD and the belief that men have more sexual desire than women, to link sexual problems, almost wholly to women.

Lagana and Maciel (2010): 706) report the most common reason women cite for their sexual abstinence is their longevity (p. 706). Women out live men and some research reports state that four out of every five women over 60 do not have a sexual

partner (Loe, 2004). The second most common reason for a woman's abstinence is a partner's erectile problems, followed by cultural misconceptions, social prejudice and, religious prohibitions (Lagana and Maciel, 2010). Given this data, and comparing Delores' comment in *Still Doing It* (Fishel, 2004), that after menopause, "orgasms are longer, stronger" with Health Canada's (2012) statement that as men age "their orgasms maybe less intense," I would contend that the link is faulty and that for many older women, their sexual abstinence is involuntary.

## Summation

Many of today's older women took part in the sexual revolution but, the sexual pleasure of young, reproductive, heterosexual women is the only female sexuality normalized and legitimized in North America today. However, the older women speaking in *Still Doing It* (Fishel, 2004), *Backseat Bingo* (Blazer, 2004), and *Tonight's the Night* (Man Alive, 1995) clarify that the "single most identifiable aspect of sexuality is its diversity" (McHugh, 2002, p. 46). All older women are neither all sexual nor all non-sexual beings. Research that includes older women's voices would be instrumental in the development of models of older women's sexuality, desires and pleasure that incorporates their similarities and differences. Those models would demonstrate that older women's sexuality cannot be categorized as passive, pathologized and/or dysfunctional. Societal belief in the myths of sexuality may finally fade, and the sexually active older woman will no longer be humiliated, ridiculed as a figure of fun, and the object of her family and community's censure. I argue that older women's sexuality and desires should not be homogenized and tailored to fit a category created by definitional, regulatory, productive, and unequal power and enforced by the ideology of youth. It is important to acknowledge that:

All women are not the same, and their sexual needs and satisfactions and problems do not fit neatly into categories of desire, arousal and orgasm . . . . Women differ in their values, approaches to sexuality, social and cultural backgrounds, and current situations and these differences cannot be smoothed over into an identical one-size fits all category.

(Kaschak & Tiefer, as cited in Wood et al., 2006, p. 241).

## Beauty

The power of the discourses of aged and gendered beauty and the inflexible binary constituted by the attractive young and the unattractive old emphasize the importance of a youthful image. As Baker-Sperry and Grauerholz (2003) comment, a woman's face is "one of her most important assets" (p. 711) and Cruikshank (2009) observes that a "woman's physical appearance encompasses her whole being" (p. 160). Although North American media regularly applauds the age-defeating surgical improvements made to celebrity faces and extols the age-defying properties of anti-ageing products and non-surgical procedures, older women's perceptions of beauty are largely unexplored" (Clarke & Griffin (2008, p. 655).

## Ageing Faces

In contemporary North America, the appearance of a woman's face is evaluated against standards that are "identified with youth" Sontag (1997, p. 19) argues. However, youthful beauty does not stand up well to age, as the Harvard Health Review (2010) attests: "[a]ge affects every nook and cranny of the body, but nowhere are the consequences of ageing on such open display as on our faces" (p. 6). The Review's explanation of the how ageing alters the face is accompanied by a line drawing of a heavily wrinkled, sagging, and, unsmiling female face.

Odd things occur . . . foreheads expand as hairlines retreat . . . ears lobes often get a little longer . . . tips of noses droop . . . and there are structural changes . . . fat that plumped cheeks and smoothed the skin around the mouth, eyes and forehead, clumps up and shifts downward. . . we get baggy around the chin and jowly in the neck. The bones in the face also change with age . . . the upper jaw, lower jaw and cheek bones shrink making the face look wider and more angular. And of course there are the wrinkles. . . . deep in the forehead and between the eyebrows . . . around the eyes and mouth . . . folds get deeper and pores get larger.  
(Harvard Health Review, 2010, p. 6)

This evidence of ageing's effect on the face explains how and why an older woman's face deviates from the idealized normative standards. Not only does her aged appearance position her at the lower levels of the hierarchy of beauty, it also effects how she responds to her aged appearance, and provokes her struggle for youthfulness.



## Let's Face It: Older Women Explore Their Aging Faces

*Let's Face It: Older Women Explore Their Aging Faces* (Osler, Levinson, and Spenser, 2003) is an interactive and committed feminist documentary. In an attempt to depict the reality of older women's lives, scenes of the women examining and responding to their faces are interspersed with segments filmed as they socialize together, the filmmakers appear on screen, and one of the producers, Wendy Osler, provides a voice over explaining who the women are, why they decided to produce the documentary, and how the events depicted unfolded. The documentary opens on a cheerful note; we see the women talking and laughing together in a restaurant and then the scene shifts. The six women are seated in what appears to be a living room. They seem nervous and subdued as (in a voice over), Wendy (age 62) states, "even talking about ageing is difficult and this conspiracy around it, not really addressing what it means, we wanted to go deeper and come out of the closet about our ageing faces".

### Responding to Their Ageing Faces

The older women participating in *Let's Face It* (Osler et al, 2003) spent a day "just looking and looking" as they tried on hats and wigs, manipulated their faces, and simply gazed at their bare faces reflected in the mirror. Viewing the film, Hope, age 57, looks grim and she glances at the other women before speaking:

When I saw myself on film I was really surprised . . . at just how much of me showed . . . my vulnerability, my testiness and my guardedness . . . it made me very sad . . . I want to tell this woman that everything will be all right. . .

Hope takes a deep breath and I can hear distress in her voice as she continues, "I think of my face as rather plain, sometimes I pretend it doesn't matter, but it really . . . I want to be beautiful". In a soft voice and looking at neither the camera nor the other women, Jen (aged 59) comments, "[m]y aunt told me I had a face like a horse". Aspia (age 63) frowns as she gazes at her face on the screen saying, "to see an image . . . shocked me quite a bit . . . it showed things that I probably wouldn't want to show about myself on the surface" and Beverly, (aged 57), looks directly into the camera to say:

There's definitely something in our culture about looking young that I've obviously integrated into my own psyche. I don't much like hearing women get wrinkles and men get character. Getting older is part of the challenge for me in terms of accepting it; there are aspects of my face that I would . . . that I regret.

I interpret Beverly's unidentified "something in our culture" as an implicit acknowledgement of her inscription with the dictates of aged and gendered beauty, the double standards and the choices and challenges they present as we age. Beverly pauses after saying "aspect of my face that I would" . . . before saying, "that I regret" I sensed that she was thinking "change", perhaps she has been considering some type of restorative work.

Odile (age 63) gazes at her bare face and begins on an upbeat note. She is smiling as she asserts the changes she is going through are "an adventure I will never have again", but her face and her voice change as she continues:

I look at my face and I look at my eyes and I see they are puffy, and that I have bags under my eyes and I start worrying, like when are they going to get back to normal again . . . then sometimes I feel devastated, sometimes I feel just curious or sometimes I just think well so be it, that's what it looks like, but I tell you, that's not what it feels like. Even if I have old baggy eyes, I don't feel like an old bag.

Clarke (2001) argues that considering the inner identify and how they feel more important than the outer shell allows some women to negotiate their loss of youthful, physical attractiveness. Although she wonders if her eyes will ever get back to "normal", Odile does not "feel like an old bag". I interpret her "so be it", and her posture, as indicating that she is not losing confidence in being and feeling like the Odile she is inside. I believe she is resisting the influence of the standards of youthful beauty and, that she is accepting her aged appearance.

In contrast, at age 57, the distraught voice, bowed posture and lowered eyes that accompany Carole's words suggest that she is mourning the loss of her youthful attractiveness:

What you feel like inside and how you identify and then that image out there that says older woman, I still feel like I did in my 30s; it seems so increasingly distressing. I'm reminded of just how vulnerable we are you know, I do try to keep looking much younger so I can keep the currency of being young. This is a

very painful passage that women go through particularly in this culture that values youth and beauty.

Clarke (2001) writes that feelings of “angst, bewilderment and even despair” can be generated as older women confront their ageing appearance and their “sense of self-worth” and inner, youthful identity are challenged (p. 459) Carole is distressed, and I sense similar emotions in her remarks. I argue these negative responses, centre our attention on the power of the combined discourses, to create women’s fear of being perceived and treated as old.

*Let’s Face It* (Osler, et al., 2003), continues, and as I watch the women examine and manipulate their faces in a mirror someone wails, “OH GOD, these wrinkles are going to get even deeper,” and I hear “just a little lift here”; “I have less wrinkles when I look up”; “I’ve considered an eye tuck”; “if it was pulled from each side”, and, reflecting the discourses of ageism and decline, “it’s not ageing I mind, it’s the decay”. And then, pacing, her back to the camera and her hands clenched by her sides, Carole tells the group that after breast cancer surgery, when chemotherapy and radiation “ruined” her face and “destroyed” her marriage”, she had a face lift at age 41. She thought she had an “inner integrity and inner character; that it would stop it mattering, but it mattered terribly”.

Two years later, the women reconvene and Wendy (Osler et al, 2003) asks, “[w]here did all this attention to our faces bring us”? Carole speaks immediately. “I’m sorry I mentioned cancer”, but she asserts, “I still feel vulnerable in this culture”. With a weak smile Aspia explains that she “tries to think about the good parts of myself . . . my generosity . . . rather than my appearance”, and Beverly, now fighting a weight gain, has the sense something is “still not right” and, she wonders if she will “ever walk in a world where everything is okay”. Odile has the last word – “the older I get, the more interesting I am and beautiful too”. Comparing herself to an ageing carpet she continues, “[w]ith age the fluff disappears and the beauty shines through”. She is still confident and resisting the influence of the discourses of youthful beauty. Despite Odile’s cheerful words, the other participants do not smile as they gaze into the camera, and I can feel their apprehension as they contemplate the future.

## Summation

The older women Osler, Levinson and Spencer (2003) chose to participate with them in the documentary *Let's Face It Older Women Explore their Ageing Faces* were aware that strangers would be scrutinizing their faces and commenting on their appearance, their words, and their emotional responses, but in spite of those considerations, they chose to contribute. Chrisler (2010: 19) contends that messages that encourage women to age naturally, successfully, and gracefully compete with messages that “encourage older women to pass as young for as long as they can” (p. 19). Osler et al.’s (2003) *Let's Face It* draws societal attention to the impact of the discourses of gendered and ageing beauty on older women’s lives. In the documentary, the women reveal their fear of the consequences of ageing and, doing so they encourage other older women to identify, and question the beliefs that create those fears. Only Carole has chosen to have a face lift, but as I listened to the women’s comments, it was evident that they too were concerned about the appearance of their ageing faces and had thought about non-surgical and/or surgical intervention. All of the women appearing in *Let's Face It* (Osler et al, 2003) acknowledged the influence of the standards of aged and gendered beauty on their lives and each of them displayed varying degrees of fear that their ageing appearance would affect their societal acceptance in the future.

## Grey Hair

Interviewing 44 women between the ages of 40 and 70, about their perceptions of beauty Clarke and Griffin (2008) write that most of the women equated beauty with youth, and as an example they cite a 51 year old woman’s remark: “[y]outh is more attractive . . . young people is where there’s fashion . . . young people are where there is fun . . . if you put it into a sentence – be young or you are not counted” (p. 660). Grey hair is a visible signifier of age and generally, it is not associated youth or beauty.

*Why then am I noticing that a few young women and men strolling through the West End are sporting what appears to artificially greyed hair? Questioning the man who maintains my hair cut and purple streak I learned that for some young people grey hair is the “new in thing”, and that it is expensive and time consuming to maintain; the hair must be “bleached, blued and then greyed”. Is*

*deliberately greyed hair surrounding a young man's or woman's face "fun", is it "fashion", is it "sexy", does grey hair make a youthful face appear more attractive?*

*(Fieldnotes, Faulds, 2011, July 6)*

For thirty women, eight of whom were over 60, Winterich (2007) reports, grey hair was a "major concern" (p. 64). Expressing their belief that their greying hair resulted in a loss of social respect and opportunity, the majority of Winterich's participants did not question the cultural assumption that grey hair should be hidden and, most had already acted to do so. After resisting dyeing her because it looked "so fake", a 63 year old participant remarked, "I'm glad I did it. I actually like the way I look better with blondish hair than I did with grey . . . I probably feel I look younger" and a 54 year old said: "[i]t was really getting grey . . . I didn't want people to think that my husband was my son because he had no grey hair" (p. 66) Illustrating the cultural devaluation of older women, the comment made by a 60 year old participant would echo the sentiment expressed by many of my friends if the word 'students' was replaced with 'family', 'friends', 'colleagues' and 'strangers':

I started to go really, really grey . . . um, and the students started to treat me differently and that annoyed the hell out of me . . . they started to talk to me like I was an old woman . . . And I said, "No way am I putting up with this . . . I started dyeing my hair and that was that. (p. 65)

## **Grey Hair and Image**

Older women's individual perceptions of beauty, interpretations of the discourses of beauty and their reasons for acting differ (Clarke and Griffin, 2008). Watching *Let's Face It*, (Fishel, 2004) I noted that Wendy's hair is almost completely grey and grey is visible on all the women's heads but Carole's; her hair is uniformly blonde. In the documentary, Wendy tells viewers that when her hair began to grey and she chose not to hide it, her mother asked, "[w]hy would you want to be ugly"? Possibly defending her mother's remark and justifying her own decision, Wendy adds her mother lives in Southern California and she lives in Berkley: "we're different cultures in terms of what we think is beautiful and ugly". Rather than a cultural or geographically based difference in perceptions of beauty, Wendy's mother's reaction could be the result of the change in Wendy's image. As Wendy's hair greyed, in her mother's eyes, the image she projected was no longer one of a youthful daughter, it was an image her mother perceived it as

“ugly” and I contend reflected the influence of aged and gendered beauty. The remark of a 62 year old participant in Liechty’s (2012) research illustrates that grey hair does affect a woman’s image and how she is perceived.

I stopped colouring my hair and the immediate reaction of my close friends about my age was ‘you look older’. And I thought well it’s still the same me, still the same face. It’s really your image of me that’s changed. (p. 77)

## **Grey Hair and Invisibility**

Commenting in Clarke and Griffin (2008) research, a 60 year-old woman said, “these days with such an emphasis on youth and beauty, it’s somewhat of a detriment to be older, you hear older women talk about the fact they feel they are invisible” (p. 661). Feelings of invisibility are not uncommon. *One of my friends reports that when she leaves her home, a “cone of invisibility” with the strength to conceal “even a bright orange raincoat”, surrounds her. (Fieldnotes, Faulds, 2011, December 10).* A 68 year-old woman’s emotional response to her experience of social invisibility is clear as she speaks in Clarke and Griffins (2008) research.

I noticed when I had grey hair that when I’d be walking down the street, I became invisible. Just kind of automatically when someone was coming in the opposite direction, I’d move to the side. But I noticed other people didn’t move. They would walk right over me. I would stop and stand there and they would just about walk into me, and they’d say, ‘Oh!’, like what are you doing here. So I kind of thought . . . I’ve got to make myself more visible in some way so people don’t think it’s just another little old lady. . . I’ve got to do some things . I started feeling no confidence; feeling invisible is not a nice feeling, I felt put down and demeaned. (p. 662)

Clarke and Griffin (2008) write that paradoxically, the women’s perception of invisibility is directly related to their visibility as older women. Older women’s grey hair highlights their age and their failure to maintain the normative standards of youthful beauty and thus, as objects of gendered and ageist discrimination, they become socially invisible. In contrast, social invisibility is a positive aspect of ageing for some older women. Doris Anderson explains why she “loves ageing” -- older women are invisible, I can look at as many young men’s asses as much as I want and no one even notices” (Anderson as cited in Rebick, 2011, p.119). A similar sentiment is less frankly expressed by a 64 year old woman participating in Clark and Griffins (2008) research:

I don't mind being invisible; I quite enjoy that. Like when I go to the gym with all these gorgeous young things around me, I can just look anyway I want, just be pedalling away and do whatever I want. No one is paying any attention to me and it's really nice; I really enjoy that.

(p. 667).

## Agency

Only two of Winterich's (2007) participants had not acted to conceal their grey hair. Reminding me of Betty's attitude in *Still Doing It* (Fishel, 2004) as she dismissed societal disapproval of her relationship with a much younger man, a 64 year old commented "[w]hat you see is me, take it or leave it. If you like the grey hair fine, if you don't, that's fine", and a 53 year old enthusiastically stated: "I think this is just who I am . . . besides I think it looks pretty cool . . . and you know I just think, so what? What other people think is their business!" (p. 63). The women, I believe, are fully aware of the influence and societal effect of the discourses. They may be "old and proud of it" (Harvard Health Review, 2010, p.7) and I sense self-confidence and rebelliousness in their words. The women are resisting societal dictates; their hair and their attitude make their statement.

If women have complied with gendered expectations of femininity in their youth, they may "feel compelled" to comply with normative standards of youthful beauty as they age Winterich (2007, p: 63) argues. However, she (2007) would not "overstate" the agency of women who choose to colour their hair – they "have money for regular hair appointments at salons" and can "improve their own circumstance" (p. 63). Economics is not always a factor. In the past many of my friends and I have chosen to colour our hair at home using any of the numbers of easily obtained and inexpensive products available in the drug store because it is "quick and easy"; "I can do it whenever I want" and "[i]t's fun to experiment".

Clarke and Griffin (2008) report that for some analysts the women's action (concealing their grey hair) is seen as the culmination of "powerful and ubiquitous gender norms of an inescapable and oppressively patriarchal and ageist society", while other theorists, emphasizing the importance of agency, consider them "competent actors" with an "intimate knowledge of society and the dominant discourses" (p. 656). The majority of the participants in Clarke and Griffin's (2008) and Winterich's (2007)

research chose to conceal their grey hair in an attempt to heighten their social visibility and regain or possibly maintain their social status and youthful appearance. I do not consider concealing grey hair an act of resistance to the demands of the discourse of beauty. I argue that, when older women choose (or feel pressured) to conceal their grey hair, their actions reveal the power of the ideology of youth to create a fear of the consequences of being perceived as old, and influence their behaviour.

## **The Ageing Body**

A woman's self-esteem and thoughts about her body are affected by any or all of the multiple messages that celebrate the norm of the youthful, slender, and toned beautiful body's trim hips, and small breasts, and yet, older women's "embodied experiences of ageing are largely unexplored" (Clarke & Griffin, 2008, p. 654). The existing literature, Hurd (2000) explains, reflects an underlying ageism and offers little information, largely because as Winterich (2007) writes, older women's bodies are positioned "outside the bounds of normative femininity" (p. 57). Only a few researchers focus on how increased body weight affects a woman's sense of self, and most discussions of body image are centered on adolescent, middle aged and reproductive women (Clarke & Griffin, 2008).

## **Body Image**

Older women are conscious of their physical appearance and most, "generally dissatisfied" with their weight and body shape, are "preoccupied with diet and weight loss (Liechty, 2012, p. 71). Hurd (2000) defines a woman's body image as "the product of the interaction of her perception of her body, including her body's size, shape and weight and her existing cultural ideals of beauty and attractiveness" (p. 77). Liechty and Yarnal (2010) state that a woman's body image is "complex and multidimensional" (p. 1198), and stating that a woman's thoughts about her body image are emotionally charged, Chrisler (2010) explains that "[body image] acts as a standard that influences how we think about ourselves" (p. 8). As Betty states in *Still Doing It* (Fishel, 2004), "body image is always there, it never goes away, and it is always a struggle."



## The Shame of Ageing

Many, if not all, older women are deeply inscribed with, and attempt to achieve, the normative standard of the slim, attractive, and desirable body. Evaluating our own bodies and the bodies of others, our comments mirror the negative and stereotypical descriptions circulated by the discourses and in the media. In *Still Doing It* (Fishel, 2004), a naked Ruth states, “I know I have a 65-year-old body . . . the attractive, sexy woman is young”, and Angelou (1998) describes her almost 70-year-old body as “lumpy”, with a “thickened waist, creaky bones” and breasts that are “in a race to see which one will reach my knees first” (p. 22).

In a culture that idealizes youth, it can be challenging to be comfortable in one’s ageing body, or when viewing the ageing body of another (Vares, 2009). Presented with images of older women’s bodies, both older women and men described them as unattractive. Although the older men admitted that they had been “brainwashed” in their youth to believe that only young women’s bodies are attractive and desirable, they did not use pejorative adjectives when describing the images (p. 512). The older women, on the other hand, described the images of ageing female bodies as having “rolls” (p. 512), and being “saggy, flabby, disgusting” and embarrassing” (p. 513).

Bodily responses to the “material consequences” or “affect” of our own thoughts are feelings of guilt, anger, failure, dread, self-criticism, disgust and embarrassment Werry and O’Gorman (2007, p. 215) assert. These “dynamic and powerful” emotions, are “associated with shame” and feelings of “failure, guilt and self-condemnation” (p. 216). I argue that the older women participating in Vares’ (2009) research were comparing the images of older women’s bodies to their individual, internalized vision of the ideal, beautiful, and youthful female body. Moreover, revealing the “shame of ageing” (Cruikshank, 2009, p. 22), I believe the pejorative adjectives and feelings of disgust and embarrassment the older women expressed mirrored their thoughts about, and emotional responses to their own bodies. At least some, and possibly all, of the women participating in Vares (2009) research were shamed by images of bodies that resembled their own.

## **Fatphobia**

Winterich (2007) defines “fatphobia” as “an internalized hatred of fat” that is typified in older women’s comments such as “I’m fat”; “I wish I wasn’t fat”; “I’m overweight”, “I need to lose weight” and “I don’t want to get fat” (p. 56). Excess weight “is one of the most significant body issues” confronting an older North American woman Hurd (2000: 92) states (p. 92), and Chrisler (2010) observes that although “most older women have the wisdom” to realize that the idealized feminine body “represents fantasy rather than reality”, many attempt to attain those standards (p. 7). As a result, citing Lewis and Cachlin’s report of a “positive correlation between [older women’s] fears of ageing, and their attitudes and behaviours associated with disordered eating” (as cited in Chrisler, 2010, p. 10), and reports stating that a “direct connection” exists between age-related concerns and older women’s “drive for thinness”, Chrisler argues, dieting and malnutrition are becoming serious problems for older women.

The National Eating Disorder Information System [NEDIS] (2012) cites socio-cultural pressure to be thin, weight prejudice, beauty myths, and distorted body image as the most common causes of eating disorders, but “curiously”, Hillyer (1998) argues, “anorexia, bulimia, compulsive overeating and chronic dieting are discussed as if only young women had such experiences”. One would think that at 50 or 60 or 70 “a lifetime of cultural indoctrination” with the discourses of aged and gendered beauty magically disappears (Hillyer, 1998, p. 50). Canada’s NEDIS (2012), cites only one survey examining disordered eating in women over 50. That study states that 70% of the older women reported they were attempting to lose weight, and that 13% of those women displayed the symptoms of disordered eating (NEDIS, 2012). However, reflecting ageist beliefs and the entrenched illusion that age equals a woman’s physical and cognitive decline, NEDIS (2012) connects an older woman’s severe weight loss to lower muscle mass, poverty, drug interactions, and confusion rather than eating disorders, chronic dieting, and the myths of beauty.

## **The Consequences**

The desire to achieve what are almost unattainable standards drives many older women. Winterich (2007) notes that some studies report that, many older women are

disciplining their bodies through dieting and other bodily practices that are “simultaneously empowering” (if a goal is reached) and “oppressive” because the women are attempting to reproduce the interconnected standards of heterosexual, aged and gendered beauty (p. 54). The result can be a continuing cycle of failed attempts to reach their goal and fatphobia. Demonstrating the emotional effect of fatphobia, Winterich (2007) cites the words of a 55 year-old woman:

Get down to a size 12, that would make me very happy . . . I wear loose clothes so you don't see it –I have a big stomach and abdomen and it bothers me a lot . . . I don't like the way I look. . . . Yea, I don't like the way I look at all. (p. 57)

Listening to her words I sense that she is shamed by her appearance. She has implicitly characterised her excess weight as “unattractive” and her repetition of, “I don't like the way I look at all”, suggests to me that internalized ideal standards are influencing how she responds to the shape and size of her ageing body. She may not be content until she exemplifies her inner vision of a beautiful body.

Providing (what she terms) an “extreme” example of fatphobia, Winterich (2007) argues that women who have “closely embodied the ideal for femininity” in their youth “reject their ageing bodies”.

I had a perfect figure . . . I had no puffies, no tummy, nothing . . . now I know how the movie stars feel. Can you imagine how they feel when they have this perfect look and they are so popular and everything? Then all of a sudden, boom, they're old . . . nobody wants them anymore because they don't have that perfect body and everything . . . I think it's the way people treat you . . . just at work, even if you can do everything, you know, because everybody always gravitates toward the young and you just feel so totally useless. [age 54] (p. 57)

The woman's, misery, and I believe shame, are obvious in her words as she expresses her belief that because she has lost her perfect body and look; she is treated differently and no one wants her. I believe her self-worth has been challenged, possibly shattered.

I argue that the North American ideology of youth and the resultant societal beliefs and assumptions condition older women to resist the natural processes of ageing and comply with the discourses of (unattainable) beauty as a 61-year-old woman participating in Liechty's (2012) research attests:

I still really want to not give in to getting old or gaining weight . . . I wish I could just be accepting and age gracefully, but something inside me just will not go away . . . I want to fight to stay fit and to stay young. (p. 1208)

Moreover, older women are internalizing the message “that weight gain and fatness are indicators of moral failure or laxity”; many view weight as “mutable” and the individual as responsible for their condition Crandall et al. (2009) report. Two examples from Hurd’s (2000) study illustrate, this internalization of shame surrounding weight gain:

I am impatient with my weight gain. That probably bothers me more than my loss of sight because . . . I had nothing to do with my eyes. I couldn’t have prevented that. My weight gain, I have everything to do with it. I think hormonal change certainly is a factor but the rest of it is lack of suitable exercise and probably indulgence. [age 67]

If we older women fail to care for our bodies so that we can meet normative expectations to ‘age successfully’, we may be viewed askance – at the simplest level for ‘letting ourselves go’ when control is putatively within our grasp – and more problematically, as moral failures for being complicit in our own ageing. [age 62] (p. 91)

The war against obesity, body awareness, fatphobia, and the pressure to maintain a youthful and slim body are pervasive, and powerful. Speaking in Hurd’s (1999) research, a 70 year-old woman’s description of older women’s bodies that connects the beliefs central to the discourses of heterosexuality and aged and gendered beauty distressed me.

Women’s bodies are ugly. I think most people think their bodies are ugly. Even women before 60. Once they start to sag and stuff, there’s no beauty in it. If you are looking for beauty . . . as the bodies we see on TV, all those lovely, gorgeous girls. If that’s beauty then women over 50 or 60 whose bodies are sagging, their busts are sagging, their bellies are all over . . . and the ass is sagging – they’re ugly. No man is going to find beauty in that. (p. 87)

Intuitively, I can hear shame, frustration, and fear in her words. I argue that she is, as many older women do, translating her emotional responses to her own aging body into a critique of other older women’s bodies and that the criteria are the societal norms and standards of youthful, beautiful body. I believe, the ideology of youth and popular media

have distorted her perception and she sees only “ugly” when she looks in a mirror or, at the bodies of other older women.

Midgley writes that women “celebrate if signs of ageing, cellulite, overweight, flabby thighs and wrinkly knees” are visible on the body of another (p. 7). At the gym, I overhear many negative and, at times, vicious comments about older women’s bodies that echo a 69 year-old woman’s remark reported in Hurd’s (1999) research: “[y]ou would not believe some of them [older women] . . . walking around naked. Egad . . . it’s awful” (p. 432). When we criticize the size, shape and appearance of other older women’s bodies, rather than questioning our beliefs and the legitimacy of the norms and standards that rule our lives, I argue, we are reinforcing those powers and maintaining the status quo. As a result, *all* older women suffer.

## Summation

In North America today few, if any, older women are unaware of the influence of the discourses of aged and gendered beauty. I agree with the sentiment expressed by a 57 year-old woman in Clark and Griffins, (2008) research:

I wish I could say that I feel at peace about ageing and I will let things play out the way they do, but if I gave you an honest answer today, I think I’m scared because I know that essentially the world thinks old things and old women are kind of like garbage. I’m just holding my own and when I look like a piece of garbage, that’s how I will be treated. (p. 663)

As an older woman living in a culture that idealizes youth, I argue, that many older women have endured any or all of the emotions of shame, humiliation, guilt, self-doubt, anger, frustration and more when we have been subjected to pejorative comments and discriminatory practices based only on our aged appearance.

I have argued that the older women represented in my research have been conditioned to comply with the demands of the deeply inscribed normative standards of the idealized youthful face and the slim and desirable body by the discourses, media messages, the words of their peers, the young/old binary, their societal experiences, and above all, a fear of the consequences of ageing. As a result, very few of the older

women represented in my research are resisting. The majority of the women are attempting, perhaps futilely, to comply with the ideology of youth's demand that they reverse and/or conceal the visible the effects of ageing. However, older women are not a homogenous group, and as individuals with differing life experiences, cultures, values and beliefs, our responses to the societal influences that attempt to regulate our lives vary.

## **Chapter 4.**

### **Stigma, Ageing and Influences**

In the context of a culture of youth and beauty, this chapter explores societal stigmatization and how the older North American women, represented in my research respond to the effect of the discourses of ageism, heterosexuality, gender and beauty on their lives. A brief history of cosmetic surgery follows, and I discuss the societal influences that persuade, possibly coerce, older women to comply with societal expectations. I conclude with the limitations of my research and I offer new avenues of research.

#### **Socially Tainted**

Goffman's (1963) analysis of visible stigma as "deeply discrediting attributes" (p. 2) that result in social disgrace and marginalization is, I believe, applicable to an analysis of older North American women's marginalized and devalued social position. Examining how societal norms, standards, stereotypes, and assumptions effect what people think and believe, and how they act, Goffman (1963) writes that when we attempt to determine a stranger's social identity, we scan them searching for the "ordinary and natural" characteristics attributed to members of established social categories (p. 2). Nelson (2005, p. 207) states that age, gender and race are "three of society's primary categories", and Laz (1998) writes that these classifications are usually visually established based on the appearance of our faces, hair, and bodies. Racial stigmatization is an important social issue but it is beyond the scope of this thesis.

As I have argued previously, definitional, regulatory, productive, and unequal power produce, define, normalize, legitimize and regulate North American society's categories of representation while reinforcing them with a series of norms, standards,

stereotypes and societal expectations. It is this socially entrenched knowledge that permits us to scan a stranger and, almost immediately, position them in the hierarchy of social power, value, and privilege. What Goffman (1963) does not mention in his analysis is that as we peruse a stranger, they are examining us, and simultaneously, classifying, and positioning us in the social hierarchy. In our culture of youth and beauty, I argue, the visible signifiers of age including wrinkles, grey hair and, for women excess weight, are examples of “deeply discrediting attributes” (Goffman, 1963, p. 2). Applying Goffman’s (1963) analysis, if an older woman’s physical appearance does not reproduce the “ordinary and natural”, (p. 2) and expected standards of youthful, feminine beauty she will be classified as socially “undesirable or tainted”, devalued, stereotyped, marginalized, and subjected to patronizing comments, and demeaning social practices (p. 3). In short, and reminding us of Butler’s (1989) definition of ageism, she will be “identified as not quite human” (Goffman, 1963, p. 4).

## **Responding to the Discourses**

Statistics Canada (2011) reports, that constituted by the World War Two cohorts and generations of baby boomers, the almost five million women over the age of 60 are the fastest growing segment of Canada’s population. I have established that little is known about how these generations of older women respond to the societal norms, standards, expectations and prohibitions that limit their lives largely because older women’s voices are, for varying reasons, often excluded from research studies exploring all aspects of their lives. Adding to that limited knowledge, this thesis has explored how the older North American women represented in my research describe their sexuality, desires and fantasies, their ageing faces and bodies and how they experience the discourses. In the following sections I will discuss their responses, together with research and media reports.

## **Ageism**

As a system of hierarchical beliefs, ageism permeates North American society. Ageist beliefs are common place and they are articulated by both older and younger individuals. Several of Minichiello et al.’s (2000) participants’, between the ages of 65



and 90, reiterated the stereotypes as they described “oldness” and old people as “not trying, withdrawn, isolated, irritating, self-oriented, senile and silly” (p. 259). I argue that ageist stereotypes such as these, and ageist categories, norms and standards are central to the dominant discourses and augment the power of the discursive statements to other and exclude older women.

Minichiello et al.’s (2000) “subtle and obscure” incidents of ageism may pass unnoticed, I have argued, because ageist practices are normalized and legitimized in contemporary North America (p. 257). On the other hand, “overt and brutal” incidents of ageism are obvious, and they can be emotionally devastating and frightening (p. 257). Ageism, is a “complex phenomenon” (p. 275), all forms are damaging but ageism in interpersonal relationships has the greatest impact. However, they argue if ageism is accepted as “inevitable” and constantly reiterated, older individuals have little power to change the situation and “may heighten the likelihood of abuse and oppression” (p. 273).

The older women represented in my research seldom named ageism. In *Still Doing It*, Ruth’s remark that she was “not supposed to do something, to be something, to say something because [she is] 65”, and Frances’ comment “others think of me only as an old woman”, (Fishel, 2004) clearly demonstrate the influence of ageism on societal beliefs and older women’s lives. I sensed that many of the older women were dismissing ageism with remarks such as “let it go” or a laughing “hey, that’s ageist” (Fishel, 2004). For the most part, the older women participating in *Still Doing It* (Fishel, 2004), *Backseat Bingo* (Blazer, 2004), *Tonight’s the Night* (Man Alive, 1995) and *Let’s Face It* (Osler et al., 2003), those writing about their lives and the older women participating in research projects implicitly recognized ageism in their lives but, they did not permit it to prevent them from expressing their thoughts about their sexuality, bodies, lives, and experiences,

## **Heterosexuality**

I have argued that as a combination of “cultural, legal and institutional practices” (Schilt & Westbrook, 2009, p. 441), institutionalized heteronormativity has naturalized and legitimized hegemonic heterosexuality’s position as a dominant moral value in North America today. Moreover, the discourses of heterosexuality impose a heterosexual,

male discourse of sexuality, attempt to restrict and regulate older women's lives, and, by sustaining the societal practice of "othering" (based on age, appearance, and sexual practices), the discourses maintain the status quo. Groneman (2000) reminds us that historically menopausal women's sexuality was pathologized, and Vares et al. (2007) declare, that in the present, the possibility of being socially stigmatized and labeled a nymphomaniac, or its recent counterpart, a sex addict, "hangs over sexually desiring women" regardless of their age (p. 160).

The majority of the older women represented in my research are rejecting their position as sexual "others". They are resisting the myths and discourses, and reclaiming their sexuality in their daily lives, in their desires, their fantasies, and in their hopes for the future. However, older women's responses to their sexuality are diverse, and not all the older women speaking in my research are sexual beings. My limited research illustrates that individually or combined the myths and discourses, cultural and religious prohibitions, life experience, and her family and community all influence how a woman responds to her sexuality. Illustrating the connection between the multiple discourses of heterosexuality and the discourses of youthful and gendered beauty, as the women represented in my analysis discussed their sexuality, they frequently, sometimes irately, commented on the beliefs prohibiting non-procreative sex, the privileging of youth in contemporary North America and the belief that a woman must be both young and beautiful to be sexual. Older North American women's sexuality, I have argued, cannot be stereotyped, homogenized and categorized.

## **Gender**

"Traditional femininity" was reinstated, and the rules and boundaries of gender were, once again, normalized and naturalized in North American society (Groneman, 2000, p. 8) when, shortly after World Two, men rejoined to the work force and women returned to their previous roles as wives, homemakers and mothers. I have argued that gender signifies power, and that in contemporary North American society, the discourses of gender and gender's scripts continue to maintain unequal relationships, and regulate cultural conceptions of the ideal woman, her societal role, and value, confirm the

opposition of two socially fixed and oppositional categories, and define the norms and standards of socially approved sexual behaviour, desires and fantasies.

Although gendered beliefs and their transgression, I believe, underpin Ruth's remark in *Still Doing It* (Fishel, 2004) -- "women are the moral repository of the family and society", in the documentary films, the books and research reports, the older women did not name gender or directly implicate gendered beliefs in women's social devaluation. As the 'opposite' sex, men were seldom mentioned. In terms of sexuality, in *Still Doing It* (Fishel, 2004), Harriett enthusiastically expressed a preference for youth, and Elaine expressed her sympathy for those men unable to perform. Men's lack of recognition of the need for romance in a woman's life, and their fear of older women's (possibly uncontrolled) sexuality was acknowledged with both humour and indignation.

## **Beauty**

The pursuit of youthful beauty occupies a central role in many older women's lives. They invest "substantial amounts of money, time and emotional resources" attempting to conform to an unobtainable ideal because the ideology of the body beautiful and the media enforce the belief that the more a body "diverges from youthful standards, the less normal and desirable it becomes" (Bayer, 2005, p. 13). Wolfe (1997) writes that "the beauty myth is insidious" (p. 19) in contemporary North America; it assigns status to women in a "vertical hierarchy according to culturally imposed standards" of beauty (p. 12). I have argued that the power of the norms and standards of youthful beauty, which are continually reinforced in all forms of media, compels many older women to "defend themselves against ageing at all costs" (Saucier, 2004, p. 420).

All of the older women cited in my research acknowledge the impact the discourses of beauty and the ideology of youth have on their lives. The power of the myths of beauty to influence the ways in which the older women represented in my research responded to their ageing faces, bodies, and grey hair is tangible in their words and actions. In Osler et al.'s *Let's Face It* (2003), the older women participating acknowledged that they were, to varying degrees, distressed by the appearance of their ageing faces. Only Odile seemed to be accepting her aged appearance; Wendy, Jen,

Beverly, Aspia and Carole feared that, in the future, their aged appearance would have a damaging impact on their emotional lives and social interactions.

Many older women reject their grey hair because they associate it with ageing and, connecting ageist beliefs, they comment that grey hair diminishes their social visibility, prospects and their acceptance in society. Most of the women represented in my research chose, for the variety of reasons I have discussed, to conceal their grey hair and attempt to regain a youthful appearance. Excess weight is a significant problem for older women. Although weight gain is common at each of the “major reproductive milestones” (menarche, pregnancy and menopause, and it is “normal” for a woman’s breasts and waists to enlarge and, for fat to deposit on the upper back during menopause, (Chrisler, 2010, 9), Saucier (2004) contends that more than three quarters of North America’s older women “feel fat” and “betrayed by their bodies” (p. 420). As a result, many older women are subjecting their bodies to diet and exercise regimes in their attempts to reach, what may be, an unobtainable goal.

The women represented in my research have experienced an undesirable emotional response to ageing, and each has been subjected to societal stigmatization and marginalization because they have failed to satisfy societal expectations. Very few of the older women represented in my research are resisting the dictates of the ideology of youth. Not only do the norms and standards generate a fear of the consequences of being perceived and treated as old, they create a tension between the physical actuality of a woman’s life, her internalized beliefs, and societal assumptions that are difficult to ignore.

I’m okay with myself but it seems like other people aren’t okay with myself (sic). . . I think I am trying to be what they want me to be rather than me just being myself. . . If you can get to where you accept yourself as you are without comment from anybody else, it’s true happiness for a woman . . . But I think it’s hard to be who you want to be because of all the influences around you”.

[age 61](Liechty, 2012, p. 77)

## **Cosmetic Surgery**

Parker (2012) reports that plastic surgery, initially known in the 19<sup>th</sup> century for its ability to conceal the syphilitic nose, became an important surgical tool during the First

World War as doctors attempted to reconstruct the function and the appearance of soldier's injured faces. After World War Two, the demand for reconstructive surgery lessened, and by the 1960s *cosmetic* surgeons were focusing on the aesthetic modification of women's faces and bodies. The American Board of Cosmetic Surgeons (2012) states that cosmetic surgeons, focus on "enhancing appearance of the head, face, neck and body through surgical and medical techniques", while plastic surgeons are dedicated to the reconstruction of facial and bodily irregularities that occur due to "birth defects, trauma, burns and disease". In 21<sup>st</sup> century North America, both cosmetic and plastic surgeons' practices are, almost entirely, dedicated to surgically enhancing older women's faces, necks, and bodies (Parker, 2012).

## **Statistics**

In contemporary North America Cosmetic surgery is not only accepted and encouraged by many of our social role models, it is "enthusiastically shown off" (Blaikie, 1999, p. 209). Wealthy, famous, and a role model for many older women, Jane Fonda (2010) announced that she recently had plastic surgery to improve the appearance of her "turkey neck," the "wattles" on her chin, and remove the bags under her eyes that made her look "tired" (p. 71). Believing it is "about control," she is "proud" of the face and body she has maintained through exercise, diet, and cosmetic surgery (p. 72).

Zoomer Magazine (May, 2012) reports that only 19% of respondents to a survey completed in Canada believe that "people should age without cosmetic enhancement" (Znaimer, 2012, p. 10). Those statistics are supported by the American Society of Plastic Surgeons' [ASPS].(2012) report indicating that since 2000: breast augmentation surgeries have increased 45%; buttock lifts are up 235%; thigh lifts have increased by 84%; and tummy tucks are up by 85%. The varying surgeries are costly, ranging from \$2500 to \$11000 for simple and uncomplicated procedures. Moreover, since 2006, the number of women over 55 undergoing facelifts, priced between \$9000 and \$30,000, has increased 14%. At a cost of between \$450 and \$900 per treatment, 12.2 million "minimally invasive treatments," such as Botox injections and laser treatments were performed in the U. S. in 2011. The cost of those treatments, as the Harvard Review

(2010) points out, increases exponentially because they require repeated and ongoing management.

## Choosing Cosmetic Surgery

Clarke and Griffin (2008) argue that “perils of looking older” pressure many older women to “mask if not alter” the physical signs of ageing (p. 666). Citing a variety of reasons including social invisibility, enhancing their self-esteem, and “a lifelong investment in appearance” (p. 662), some of their participants choose “intrusive beauty work interventions” while others choose non-surgical interventions (including skin resurfacing and microdermabrasion, injections and peels) in their attempt to retain a youthful appearance.

Thorpe, Ahmed, and Steer (2004) suggest three reasons why many older North American women are choosing “costly and painful” cosmetic surgical procedures: the first is “age appropriateness,” which is a woman’s belief that a body part, usually the face, makes her appear older -- “I was beginning to age, I’d always looked after myself and I sort of felt everything was sagging . . . and I didn’t look quite as youthful as before” -- (p. 81); the second is “body integrity”, defined as a lack “of fit” between body parts -- “I had a 65-year-old face on a 55-year-old body”--(p. 82); and the third reason is a woman’s wish to conform to her conception of “looking normal”. After breast augmentation surgery a woman commented, “I thought it would re-shape my body . . . I’m just a normal person now with a normal body” (p. 82).

There may be an additional impetus to choose surgical or non-invasive procedures. Two participants in Brooks (2010) research mentioned the common social mantra that “60 is the new 50 (or even 40)” (p. 245). A 59 year-old woman stated, “I love the idea that you know, ‘60 is the new 50’. It’s really a great way of thinking. And people do live longer and, you know, there’s so much more you can do” (p. 245). Illustrating changing societal beliefs and the increasing influence of the discourses of aged and gender beauty in contemporary North America, another 58-year-old explained:

My mother would never, I mean she *would never*, she wouldn’t have done that. She would have thought it was unnecessary. She was more accepting of ‘that’s *just the way I am*’. I mean there is just something about this that I’m sure has to

do with, you know, you're almost 60 years *old*. And my mother's generation thought 60 was *old*. And my generation is primarily trying to make 60 young.  
(p. 246, *italics in original*)

Commenting “[w]hat a load of crap that is,” Rebick’s (2011, p. 124), attitude toward the new mantra is clear and as Zimmerman (2011) argues, it represents ageist thinking (p. 206). I suggest that all of these reasons reflect the deeply entrenched norms, standards and stereotypes which sustain the young/old binary and drive older North American women’s efforts to remain youthful.

As women grow older they are confronted by the double standard of ageing (Sontag, 1997), the “culture of beauty” (Liechty, 2012, p. 72), and the multitude of advertisements for the varied age defying products and services that reinforce societal assumptions that a woman’s value depends on her physical appearance.

Sitcoms and dramas alike sport slim, young actors, often wearing sexy outfits . . . Commercials promise that youth is affordable through special cosmetics or workout machines and encourage women to fight ageing. Other ads offer medicines to help older people with aches and pains feel young and alive again.  
(Kjaersgaard, as cited in Liechty, 2012 p. 72)

And, a 57-year- old woman commenting that, “some women get these procedures done because they want someone to love them . . . the women I know are afraid that their partners won’t want them if they’re saggy or full of wrinkles” (p. 253), exemplifies the “real or imaginary fear” that Saucier (2004) writes is connected to “the rejection or abandonment of their romantic partners or mates”. Fear is a powerful emotion; fear can drive an older woman to comply with the gendered expectations of embodied femininity and her pursuit of youthful beauty.

The pressure to remain youthful is evident in *Let’s Face It* (Osler et al., 2003). As the women examined and manipulated their faces, Carole says, “[I]ook at my lips, it’s tattooed on permanent make-up. I learned I will put up with pain, she did my eyes . . . it wasn’t worth it.” As she speaks, Carole’s voice is light but she is blushing; her embarrassment is visible. Procedures similar to Carole’s permanent make-up have become popular in the past few decades (de Cuyper, 2008). On the net, sites such as *Permanent Make-up* (2012) prominently display before and after photographs. In the

before pictures, the woman's usually pulled back hair, unsmiling face, and bright lights emphasize every wrinkle and blemish. In the after pictures, though, smiling faces are carefully made-up, surrounded by soft curls, and the lighting provides a luminous glow. On Permanent Make-Up's site, the caption under the after picture reads: "Imagine being able to look in the mirror every day and see perfect eyebrows, striking eyes and full lips." Without mentioning the words youth or beauty, the advertisement, nevertheless, exploits an older woman's fear of ageing and losing the plump lips and perfect full eyebrows of an unlined, youthful face.

I think it [anti-ageing advertising] does make one aware of what the possibilities are. And I think that now one has to make a conscious choice not to use them . . . I think it does make one feel worse about getting older because these products are designed to make one look younger . . . It does not help one's self esteem.  
[Age 59](Brooks, 2010, p. 248)

## **Coping with Age**

Chrisler (2010) writes that "aging "is a shock" for some older women when they realize that they no longer attract attention." Some women "panic" and turn to cosmetic surgeons, life coaches, personal trainers, and others who derive their incomes largely "from older women's fear of ageing" (p. 6). Brooks (2010) remarks that many older women "experience shame" when "they no longer represent sexual attractiveness, youth and slenderness" and, for those women, looking more youthful after surgery can be an "empowering and self-esteem building experience" (p. 250). Feelings of shame are very powerful. A woman's thoughts and emotions can encourage, if not coerce, her to seek the assistance of cosmetic surgeons and other health professionals, but I argue, that the shame of ageing is a consequence of North America's discourses of aged and gendered beauty.

In contrast, some older women reject the "time, work, money and pain" required to regain or maintain a youthful face and body (Brooks, 2010, p. 250). The realization that they no longer attract societal attention "is a relief", Chrisler (2010) asserts; they can "relax and be themselves" (p. 6). Reviewing the limited research on older women's thoughts about life and ageing, Chrisler (2010) reports that some describe ageing as "a "breakout time" and a time to "live my own life at last;" they were "taking risks, "redefining relationships," "ignoring shoulds," and "letting go of expectations" (p. 17). Their



comments lead Chrisler (2010) to conclude that those older women spend “less and less time thinking about and pursuing an illusive beauty ideal” (p. 18). Chrisler (2010) then argues, and I agree that they are “becoming more self-assured” and “making their own choices” (p. 18) as they resist societal expectations, and the demands of the ideology of youth.

## **The Debate**

“In the last quarter of the 20<sup>th</sup> century” a clear distinction between those who have aged and those who, through a range of youth persevering techniques, have evaded the appearance of decline, has emerged” (Blaikie, 1999, p. 208) “Unsurprisingly”, Blaikie (1999) writes, “given the emphasis on appearance, self-presentation has become ever more prominent” and a “plausible argument” can be made that “enhancing one’s bodily appearance, social acceptability or personal esteem is simply availing one’s self of contemporary resources” (p. 210). Contesting that argument, the other side of the debate responds that “what appears at first glance to be instances of choice, turn out to be instances of conformity” to the demands of “fashion, beauty and the patriarchy” (Morgan, 1991, p. 36). And, Brooks (2010) argues that the “opportunity to reclaim or maintain feminine beauty and sexual desirability” through surgical and nonsurgical interventions can “translate into a kind of moral feminine imperative” to remain youthful (p. 250). What or who is in control when older women surgically reshape their faces and bodies? What cultural circumstance is the ideal standard of the beautiful female face and body constructed, shaped and adapted to satisfy? A 58-year-old woman participating in Clark & Griffins’ (2008) study seems to be asking similar questions:

I’m as vain as the next person. . . I’m concerned about how I look which to me is a bad thing . . . I’m very critical of the cosmetic industry . . . but I like to look so-called young . . . I like it when people say “Oh, you don’t look 58!” I’m conflicted . . . I’ve been fighting it from an intellectual perspective for so long. . . I question am I being true to myself? (p. 668)

I argue that Blaikie’s (1999) “plausible argument”—that women are simply making use of available resources implicitly gives older women permission to comply with societal demands. Moreover, his statement reinforces the youthful standards of heterosexual

beauty, largely negates older women's agency, and supports the status quo. I argue, in agreement with Morgan (1991) and Brooks (2010), that representing cosmetic surgery as an essential resource in older women's lives is oppressive. It reflects the power of the discourses of aged and gendered beauty to influence societal beliefs, and it intensifies older women's fear of ageing.

## **Summation**

My limited research leads me to believe that many older women are choosing surgical and non-surgical interventions to retain their sexual desirability, social visibility, and their societal position and power. I argue the norms and standards central to the discourses of aged and gender beauty influence how older women perceive their ageing faces and bodies and that, if economically feasible, many older North American women will comply, and act in an attempt to regain a youthful appearance. In a culture that defines a woman based, almost exclusively, on her physical appearance, older women are aware that the cause of their loss of their self-esteem, social discrimination, social marginalization and invisibility is their inscription with the discourses and the ideology of youth. Far too many older women are "caught in a painful and vicious cycle" Clark & Griffin (2008, p. 657) write and they argue, the women's acceptance of, and compliance with accepted societal expectations reinforces their loss of self-esteem and their feelings of social invisibility, rather than preserving their social value and position.

## **Agency**

Agency is important when interpreting older women's responses to the societal influence of the norms and standards of the discourses. Mahmood (2005) argues that in Western feminist terms, agency is defined only as resistance (p. 7). Reflecting agency as resistance, and a desire for "freedom from discrimination and domination", Western feminist definitions include a woman's capacity to choose and act "without undue coercion or influence" (Bowden and Mummery, 2009, p.125) and, "the culturally mediated ability to act in one's own interests" (Ahern, 2001, p. 112). As the opposite of resistance, compliance is interpreted by some analysts as the result the inescapable power of gendered norms, and an oppressive patriarchal, and ageist society, while

others believe that woman's compliance demonstrates that she is a competent social actor with a clear understanding of her culture, and the discourses (Clarke and Griffin, 2008, p. 656).

Mahmood (2005) contends that definitions of agency should be broader, and include women's words and actions that accommodate, protest compliantly, cajole, and accept the forces that attempt to limit and control their lives (p. 15). Rather than classifying women's acts and words as either resisting or complicit in their own oppression, she argues, we should explore *how* women experience and inhabit the discourses. My research demonstrates that, for many and varied reasons, older women's responses to the discourses differ, but my interpretations of the older women's words and actions reflect a resistance/compliance binary. A question arises –if, understanding her culture and the influence of the discourses, a woman believes it is in her best interests to conceal her gray hair, correct the visible signs ageing, and/or lose weight to regain her social power, respect, and her sexual attractiveness, should we be evaluating her actions based on a binary of social value that normalizes and legitimizes resistance and stigmatizes those who comply? Thinking beyond resistance could allow older North American women's words and actions to be acknowledged as alternative forms of agency, which, because of my focus on resistance to pre-identified hegemonic values, I did not identify. Moreover, the Western definition of agency would be expanded and allow a greater understanding of how older North American women inhabit, experience, and respond to the ideology of youth and any or all of the associated discourses.

## **Conclusion**

I have argued that the deeply entwined and politically inflected categories, rhetorical conventions, metaphors, norms, standards and stereotypes that support discourses, of ageism, heterosexuality, gender, and beauty “other” older women in contemporary North America. Focused almost entirely on older women's sexuality, physical appearance, character, abilities, and social worth, the discourses have the power to structure social interactions, preserve social values, sustain the young/old binary and maintain the status quo. An Older woman's sexuality, desires and fantasies

are denied, her body is pathologized and trivialized” in “popular culture and professional literature” (Thornton, 2002, p. 303); she is socially stigmatized and, her cognitive abilities are questioned. Moreover, the power of the contemporary discourses permits the young to disrespect, laugh at, and attempt to restrict older North American women’s lives.

Older women should not be stereotyped and categorized as a homogenous group; they are individuals. Older North American women’s responses to their sexuality and desire are diverse; my limited research has revealed that they cannot be neatly classified as either all sexual or all nonsexual. Their responses are influenced by the norms and standards enforced by the myths of heterosexuality as well as by their religion, family circumstances, culture, and life experience. Similarly, as individuals, older women’s responses to the discourses of aged and gendered beauty differ. I have argued that their responses reflect the depth of their inscription with the ideal standards, their past relationship with femininity, their internalized conception of the ideal feminine, and the culture of youth and beauty.

The words and actions of the older North American women represented in my research lead me to conclude that many older North American women are resisting discourses and myths of heterosexuality and living their lives as sexual beings. In discussions of ageing and their faces and bodies, the thoughts expressed by many of the women cited in my research illustrate their fear of the social consequences of being perceived and treated as old. Many or most of North America’s older women are not resisting the demands of aged and gendered beauty; they are succumbing to the myriad of messages that urge them to reverse the signs of ageing, and complying with the demands of the ideology of youth. I have established that many older North American women choose cosmetic surgery and other age concealing practices (for the varied reasons I have discussed) to regain their youthful feminine beauty and I believe that very few of North America’s older North American women are ageing naturally. Unfortunately, in my limited research many of the comments criticizing older women’s physical appearance were made by other older women suggesting to me that we are judging each other against what I believe are unattainable criteria rather than contesting and critiquing the norms and standards that do untold damage to our lives.

## Limitations of the Research

As discussed in chapter one's methodology section, I did not conduct in-depth interviews or focus groups with older women living in Vancouver, British Columbia. I did not have the opportunity to listen, observe their body language, and ask questions as older women related their experiences of ageing in contemporary North America. My thesis is derived from published research, documentary films, books, and media accounts of older women's lives and experiences, my own experiences and observations, email, and the comments and stories recounted by friends in casual conversations I have recorded in my field journal. I have not explored all the words written by older women about their sexuality, bodies, and their lives, nor have I viewed all the documentaries available—it would be an insurmountable task. As a statement of resistance to the norms, standards, stereotypes, and binaries central to the ideology of youth, my thesis has evolved from a position of social privilege and focuses on the experiences of largely white, heterosexual and middle class women; it does not consider class, race, sexual preference, and gay and lesbian politics.

## Future Research

Reflecting new knowledge and changing social assumptions, definitional, regulatory, productive and unequal power continuously generate new discursive statements, norms, binaries and "others." A comparatively new discourse that I believe will have a negative effect on older women's lives is becoming increasingly widespread in 21<sup>st</sup> century North America. The central components of successful ageing are:

1. The biomedical and psychosocial models recommend that if an individual maintains close family ties, resumes their education and/or volunteers within their community they will retain a sense of purpose and usefulness in life.

(Dionigi, Horton, & Bellamy, 2011)

2. Biographical ageing asserts that if age is viewed as a part of the life story and individuals create "alternate meanings of the ageing process" and resist "cultural values tied to youthfulness" they will "successfully adapt to the changes they experience in their health, socio-cultural and economic status".

(Dionigi et al., 2011, pp. 405)

3. “Stay young techniques” incorporates some or all of the tenets of the biomedical and psychosocial models and biographical ageing but it assumes a “feminine aspect”. The successfully ageing older woman is “healthy, slim, discreetly sexy and independent”.  
(Calasanti, Selvin, & King, 2006, p. 15)

On the surface, the first two tenets of successful ageing seem benign, but I argue that the biomedical and psychosocial models and the principles of biographical ageing are shaped by stereotypical beliefs that devalue the lives of older individuals, question their physical and cognitive competence and their life experiences. The two models and biographical ageing assume the absence of disease related disability, a “high functioning” intellectual ability (Rowe & Kahn, 1997, p. 433) and, they reflect cultural values that are “embedded in middle class standards” which can be expensive to maintain (Calasanti et al., 2006, p. 15). Moreover, the researchers have not considered that many older women choose differing lifestyles, activities, and interests.

The feminine aspect of successful ageing’s third tenet— “stay young techniques” declaration that a successfully ageing, older woman is “healthy, slim, discreetly sexy and independent” Calasanti et al., 2006, p. 15) is oppressive to older women and a cause for concern. I argue that the statement is linked to the discourses of heterosexuality, and aged and gendered beauty. “Healthy” resonates with the discourses of menopause and FSD’s pathologizing of older women’s sexuality and bodies, and with the biomedical definition of women’s youthful, normal, and natural ability to reproduce. “Slim” mirrors the standards of the discourses of gendered beauty’s young and desirable body, and “discreetly sexual” reflects the normative values of gender’s and heteronormativity’s dominant male and passive female.

In terms of heterosexuality, examining a sub-sample of 1235 older women’s responses to a Women’s Health Initiative’s survey of women between the ages of 60 and 80 conducted in 2005, Thompson, Charo, Vahia, Depp, Allison, and Jeste (2011) concluded that: “[s]exual activity, satisfaction and functioning are positively associated with higher self-rated successful ageing and quality of life across age groups *by married women and women living in an intimate relationship with a partner*” (p. 157, *italics mine*). Although the participants’ responses do contest the myths and discourses of aged heterosexuality, I argue, that Thompson et al.’s (2011) conclusion reflects the prevalent

North American belief that heterosexual activity is more acceptable when it occurs within a committed relationship (Rye & Meaney, 2007).

Advocates of the three components of the discourses of successful ageing do not theorize aged relations; they do not acknowledge the variability of older women's response to their sexuality, their ageing faces and bodies, the social, economic and physical circumstances of a woman's life, and the impact of the overarching societal powers that attempt to regulate and control an older woman's life. I believe that the discourses of successful ageing will reinforce the discourse of ageism and support the power of the ideology of youth. It will generate new norms and standards, new stereotypes, new strategies to preserve youthfulness, new societal expectations new societal assumptions and new "others". The new "others" will include older women lacking the economic resources to maintain a middle class lifestyle, those who are ill, those who suffer cognitive difficulties, and the older women who have made differing lifestyle choices. Little data is available on successful aging's influence; only time and future research will reveal its impact on older women.

## **A Contrary Opinion**

The effects of ageing on the body and our reception in society are common topics of sometimes jovial, sometimes somber and sometimes argumentative conversations within my circle of friends. My research, thesis and goals involved me in an email conversation with a 64-year-old female friend:

*Subject: How to Recognize Any Ism*

*In the last few days I've looked at some of these sites - do you have this one? [Ageism] does not come into my reality. I wondered if I was tuning it out. I asked my aunt some questions concerning the things you've experienced. She told me she had been called 'dear' but at the same time someone called a teen 'dear' also, so wasn't sure about that one . . . she's twenty years older than you. Could it be that you are concentrating on it or imagining it? If I'm not experiencing it at my age, then why, it's not because I look young. Could it be that you've got it wrong and you're barking up the wrong tree?*

Fieldnotes Faulds, 2012, February 10)

The email's author is committed to exercising, frequently on a diet, praises cosmetic surgery, conceals her grey hair, and is usually heavily made up because "it makes me

look better.” Attempting to persuade me that my experiences are nothing more than figments of my imagination, she diligently searches the net and questions family and friends about their experiences of ageing, and my belief that older North American women are devalued, stereotyped and maligned. Stating her “opinion is important” and that she “completely disagrees” with my position, the email’s author gave me permission to publish her words but she would not expand on her statement that makeup and hair colour “make me look better.” Did she mean more youthful, healthier, sexier, restored, enhanced? Does denying the discourses lessen their impact on her life?

Questions for future research are: do many older Western women deny the existence, and the influence of North America’s dominant discourses on their lives? If they attempt to conform to the (unrecognized) norms and standards, how do they explain their actions? Many important answers that connect these women’s beliefs and practices to the discourses, agency, societal assumptions and power could be revealed.

## **Feminism**

Feminist input is vital to older women in the 21<sup>st</sup> century. Campaigning for women’s equality in the 1960’s, second wave feminists were often “ignored or treated with hostility” (Calasanti et al., 2006, p. 24). That hostility generated societal and academic attention, and gradually North American society began to change. However, age and ageing studies were not included in the early feminists’ purview. In 1983, MacDonald wrote “the evidence is all around us that youth is bonded with the patriarchy . . . there would be no youth culture without the powerless older woman” (as cited in Marshall, 2006, p. vi). More than ten years later, as she addressed a feminist conference in 1995, an angry MacDonald asked, “[has it never occurred to those of you in Women’s Studies, as you ignore the meaning and the politics of the lives women beyond our reproductive years, that this is male thinking? (as cited in Marshall, 2006, p. vii)

Feminist researchers have realized that the “power relations specific to race, class and nation as well as gender and sexuality” cannot exist independently (Bucholtz & Hall, 2004, p. 487). In the 21<sup>st</sup> century, feminist theorists are beginning to connect the discourse of ageism with power relationships and the discourses of gender, heterosexuality, and beauty (Marshall, 2006). Feminists remind us “that “beauty should



not be defined in terms of youth or body type, faces or noses, legs or breasts” and feminist beliefs encourage us to accept ourselves as we are and reject societal expectations Majury (2011, p. 56) writes. But, she points out, [t]he image of the older woman in our culture is not one of beauty”, and even within feminism, “[t]here is an ‘undercurrent’ that censures women who fail to take care of themselves” and “let themselves go as they age” (p. 56).

In 1983, MacDonald stated that younger women’s power is dependent upon maintaining the distance between younger and older women. In 2013, at age 70, I would not refute her position. Today’s older North American women were not always old and some of us were (and may still be) active, outspoken feminists. Are we tired of struggling? Do we, as some ageing feminists and other older women do, share “society’s revulsion for ageing flesh”? (Rich, as cited in Lipscomb, 2006, p. 4) Has the sociopolitical power of youth to define and speak for the old silenced us? Rather than question societal beliefs, do we blame the victim of ageist words and practices? In our youth, crusading second wave feminists demonstrated that if we persist, the quality of women’s lives can be greatly improved. Second wave feminists gave us more access to higher education and we have equal rights, if not equal pay, and we have gained control of our bodies (Wine & Ristock, 1999).

Older women are seldom portrayed as attractive, vibrant individuals retaining their sexual interest and capacity (Waltz, 2002, p. 100). As Mary Walsh (2011) states:

it’s not a great time to be an old dame living here in the West, in the centre of our youth oriented culture where its considered a moral failure to look old . . . With men it’s status, career, money, power and a sense of humour. With women the only thing that matters is how you look. (p. 45)

That could change. Future feminist research into how the norms and standards central to North America’s ideology of youth and its accompanying discourses impact older women’s lives and influence societal beliefs is essential. New feminist theorizing would, no doubt, once again generate hostility but, I argue, it would also generate societal and academic attention. Their work might even erase the tacit knowledge supporting the homogenous and stereotypical categories of the loving, but dependent and deteriorating grandmother and the ugly, useless, and cranky crone. I argue in agreement with Hillyer

(1998, p. 55) that researchers and society at large “must abandon their expectations” and older women must break their silence if we are to hear the “full range of older women’s stories”. If older women speak and feminist researchers listen, we could regain the sexual and social equality feminists fought for in our youth and today’s older North American women could enjoy lives of full societal participation.

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