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Chapter 5

Sexual Identity Labels and their Implications in Later Life: The Case of Bisexuality

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Narratives about sexuality, including those which involve sexual identity labels, are always historically, socially, politically and culturally located (Foucault, 1976; Giddens, 1992; Plummer, 1995; Weeks, 2007). In later life, any older person is likely to have lived through several changes in which sexual identity labels are widely known, which are favoured and which considered insulting. Sexual identity labels may also mean different things at different life stages and to different people signifying, for example, desire, performance, political affiliation or partner choice. The labels someone uses to describe their own sexuality may have changed over the course of their life. Indeed, labelling one's sexual identity at all may be a change – one consequence of the rise in the visibility of non-heterosexual sexualities has been an increased awareness of heterosexuality itself as a sexual identity (Katz, 2007). Over a long lifetime, someone's sexual preferences may also have changed, with or without change to any labels they use to describe their identity. This makes later life a particularly fruitful site for the consideration of sexual identity labels.

Debates as to the benefits and disadvantages of using sexual identity labels are well established in sociology, psychology and related disciplines (Fuss, 1991; Young and Meyer, 2005) especially around Queer Theory and other deconstructive approaches which argue for a radical destabilising of all identity categories (Butler, 1990, 1991; Seidman, 1997; Warner, 1991). This chapter does not aim to add to these arguments. Rather, it builds on Weeks' (1995) concept of 'necessary fictions' to argue that different approaches to sexual identity labels are appropriate for different contexts. Sexual identity labels are understood to be

always oversimplifications but also often powerful and useful. This chapter uses the example of one relatively familiar sexual identity label, 'bisexual', to add to the growing debate about the use, limitations and implications of sexual identity labels in later life (Cronin and King, 2010; Cronin et al., 2011; Heaphy, 2005, 2007; King, in press; MacKian and Goldring, 2010) and also in order to add to the very limited literature on bisexual ageing.

Definitions of bisexuality vary and have different implications. For example, one common definition 'attraction to both men and women' is argued to be problematic because it assumes binary gender (Barker, Yockney, et al., 2012; Bowes-Catton, 2007). This chapter defines bisexual as 'attraction to more than one gender or attraction regardless of gender'. This allows for more than two genders and also includes people for whom gender has very little relevance to their attractions. 'Attraction regardless of gender' also carries the possibility of decentring gender as the organising system through which sexuality is understood, a project that may have particular relevance to bisexuality (Barker et al,, 2008; Gurevich et al., 2007).

Studies of sexuality which privilege sexual identities over sexual behaviours or sexual attractions can be problematic for all sexualities, due to the often imperfect match between identities, behaviours and attractions (Jones and Ward, 2010) and the danger that those who claim particular sexual identities are seen as more central to a category or more authentic than those who do not. Privileging sexual identity is especially problematic for studies of bisexuality because there appear to be many more people who have sexual and romantic relationships with more than one gender than people who claim the identity of bisexual (Barker, Richards et al., 2012; Rodriguez-Rust, 2000).

While the numbers of people in their 50s and older who might tick a box marked 'bisexual' on a survey are thought to be very small, the numbers of those who, over the course of a relatively long life, may have had relationships with more than one gender are likely to be much higher. Life review in the context of an awareness of finitude, perhaps after the death of a long-term partner or around retirement, may cause people to reconfigure their past history (Ruth, Birren, and Polkinghorne, 1996). This reconfiguring might have a variety of results in terms of sexual identities, one of which might be to make the label of bisexuality seem personally applicable in a new way, although the common stigmatisation of bisexuality as an invalid and inauthentic sexuality (Gurevich et al., 2007; San Francisco Human Rights Commission, 2010) makes this relatively unlikely. However, this chapter argues that,

notwithstanding the necessity to respect individuals' own choice of identity labels, there may be analytic scope to note bisexual behaviours over a life course in a way that makes bisexuality more visible as an act and a desire, particularly in an ageing context.

This chapter uses a vignette about an older woman whose sexual identity has changed several times over the course of her life to explore issues around the nature and functions of sexual identities across the life course. Vignettes have a long history of use in social science research (Finch, 1987) and have been used both to facilitate the collection of data and as a representation of already-collected data (Spalding and Phillips, 2007). Ely et al. (1997) taxonomise vignettes in qualitative research as 'snapshots', 'portraits' or 'composites'. The vignette presented here is a composite in that it does not represent a single event or individual, but instead represents the findings of a variety of research studies (e.g. Barker et al., 2008; Diamond, 2008; Klein, 1993; Rodriguez-Rust, 2000; Weinberg, Williams and Pryor, 2001) and also the shared understanding of members of a UK-based bisexual community. This vignette, alongside others which do not focus on ageing (see Jones, 2010), was composed initially by the author and then reviewed and refined by approximately 25 people who were active in a UK-wide bisexual community and by UK academics doing research into bisexuality. This review process took place partly online and partly during a workshop at a conference attended by academics, practitioners and members of a bisexual community (BiReCon 2008[1]). These reviewers helped refine the vignettes and agreed that the final versions were plausible, authentic and realistic.

The vignette enables the discussion of some issues around the use of sexual identity labels across the life course and the distinctions between identities, behaviours and attractions. This adds to the scant literature on bisexuality and ageing (Dworkin, 2006; Firestein, 2007; Jones, 2011, 2012; Weinberg, Williams and Pryor, 2001). However, examining bisexuality from a late-life life course perspective is also useful to the study of sexuality more generally. There are practical implications for this, for older people's everyday lives and especially when they are using health and social care services, as well as more theoretical ones suggesting lines of future enquiry.

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[1] https://bisexualresearch.wordpress.com/birecon/birecon-2008/

A vignette: Muriel

In order to exemplify and make more concrete these theoretical issues, this paper draws throughout on the following vignette about an older woman living in the UK.

Muriel is 78. When she was a girl she had a series of intense 'crushes' on older girls but she met her husband-to-be when she was 18 and quickly fell in love with him. They got married and had three children. When Muriel was in her early-30s, her husband divorced her.

When she was in her late-30s Muriel joined a women's consciousness-raising group. In the group she came across the idea of lesbianism, which she had never heard discussed before and she met a woman, Pat, who already identified as a lesbian. Muriel was strongly attracted to her and before long they had started a relationship. After Muriel's children had left home, they lived together for several years, and became a familiar couple on the local lesbian scene. Pat developed breast cancer and, after many difficult months, she died. Muriel got a lot of support from her circle of lesbian friends and from a local voluntary organisation which supported lesbians and gay men who had been bereaved.

Some months later, to her astonishment, she fell in love with a man, Colin. Her friends were very disapproving of her new relationship and gradually cut contact with her. The new relationship flourished, although Muriel recognised that she was still attracted to women too and missed her old circle of friends, especially as she was still grieving for Pat. She didn't feel able to keep using the bereavement service because she no longer seemed to count as a lesbian.

In the mid 1980s, Muriel came across the idea of 'bisexuality' and started calling herself bisexual. After some years, the relationship with Colin ended amicably and Muriel met another woman, Joan, and went back to thinking of herself as lesbian because that was Joan's identity and she expected this to be the final relationship of her life.

Last year Joan died and Muriel experienced some major health problems. She started receiving home care. She gets on well with one of her regular carers who asked her about the photos she had up around the house of her former partners. Muriel answers honestly but is horrified to discover later that her carer has spread malicious gossip among her colleagues about her past, saying that Muriel had been sexually predatory and promiscuous.

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The vignette represented here is a fictional representation of many people's experiences, not genuinely 'Muriel's story'. However, as O'Dell et al. (2012) argue, the use of vignettes need not imply positivist epistemologies where the vignettes truthfulness or not is the key issue. Rather, as they argue, vignettes can be understood as inherently poly-vocal, allowing those

who respond to them to make their own meanings. It is for this purpose that this vignette is included in this chapter, as a tool to help make visible the different implications of different theorisations of later life sexuality, and of bisexuality in particular.

Stories about sexuality, such as 'Muriel's', have often been used as a tool to explore the ways in which sexuality is socially constructed, and are argued to be a particularly persuasive and powerful form of culturally-recognisable sense-making (Crawley and Broad, 2004; Plummer, 1995; Saxey, 2008). Vignettes are also argued to be an effective means of exploring potentially unfamiliar and complex social issues, by making them more concrete and comprehensible (Northedge, 2002). They help what might otherwise appear abstract and rarefied become more relevant and applicable.

Sexual identity labels across the life course

Which sexual identities are claimable and claimed is both historically and socially contingent. Historical studies have shown that the meanings and experiences of non-heterosexual sexual activity have varied hugely in different time periods (Bullough, 1997; Foucault, 1976; Norton, 2006). The language people use to describe and to think about their sexual desires is strongly affected, although not completely determined, by the time and place in which they live. Someone who, like Muriel, is now in their 80s in 2015 and lives in the UK, has lived through huge changes in the visibility of LGBTQ sexualities and also in the terminology that is used to discuss them. For example, the reclaimed term 'queer', which is favoured by some LGB&T people as an inclusive umbrella term, may not be acceptable to many older people because of their personal experiences of hearing it used as a pejorative term. Some of these changes in which sexual identities were claimable in the UK in the 20th and early 21st centuries can be seen in Muriel's story and can be represented in the following timeline:
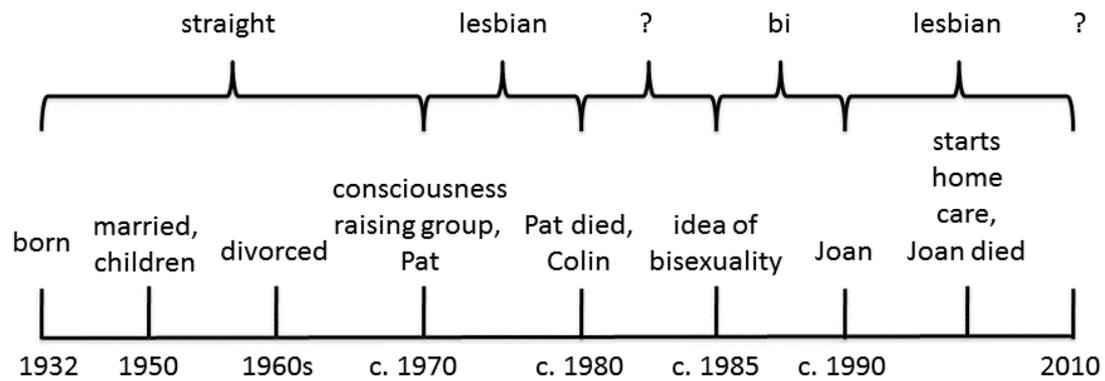
Figure 5.1: Timeline of Muriel's story

While there were women identifying as lesbians and even a few lesbian clubs in the UK in the 1940s and 50s (Gardiner, 2003), as well as a thriving publishing genre of lesbian pulp fiction (Foote, 2005), it was possible for someone like Muriel, following a conventional life course of marriage and children, not to have really encountered the possibility of lesbianism until she joined a consciousness-raising group. Consciousness-raising groups are of course also very much of their time and were a common route into identifying as a lesbian for many women who went on to claim that identity for the rest of their lives (Scicluna, 2013). However, for Muriel, that identity was challenged when she fell in love with Colin. The vignette states that she had a period of uncertainty about what sexual identity to claim until she encountered the notion of bisexuality. As this suggests, sexual identities and sexual practices may not be neatly aligned. However, this too did not prove to be a lasting identity for Muriel because she went back to identifying as a lesbian when she met Joan. The vignette does not reveal what, if any, sexual identity Muriel draws on in her current stage of life after Joan's death but it is clear that the fact that her past has been non-normative creates stigma.

Labelling oneself with a particular (non-heterosexual) sexual identity can carry psychological and material benefits for individuals. As the now-large genre of coming out stories attest (Herman, 2005; Saxey, 2008), finding a name to apply to your desires and experiences, and thereby a sense of community, can be hugely personally valuable. Muriel had identified as a lesbian for many years by the time Pat died and the vignette states that she and Pat were part of a local lesbian community. This good match between the sexual identity label that Muriel claimed and the gender of her partner (female), meant that Muriel was able to draw straightforwardly on the support of her friends in coping with Pat's death. It also meant that

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she was able to access a specialist bereavement service targeted at lesbians and gay men, an important benefit in a heteronormative world where the loss of a same-sex partner may be misunderstood or treated less seriously than that of a different-sex partner (Dworkin and Kaufer, 1995).

Claiming a non-heterosexual sexual identity can also carry great benefits at a political and societal level. Work by LGB&T activists from the 1960s onwards has used shared identities to assert common experiences of discrimination and exclusion, and to press for, and achieve, significant legislative change (Eaglesham, 2010), which has materially and psychologically improved the lives of many LGBTQ people. Claiming non-heterosexual sexual identities has led to new possibilities for forms of sexual citizenships (Weeks, 2007).

However, claiming sexual identities can also be problematic. Individuals may dislike the connotations of particular identity labels, may feel that they misrepresent their own sexuality or may experience any attempt to categorise their sexuality as unwelcome (Barker, Richards, and Bowes-Catton, 2009; Ochs, 2007). Queer Theory (e.g. Butler, 1990, 1991; Seidman, 1997; Warner, 1991) argues that all identities, including those of sexual minorities, are performances of everyday life. It draws our attention to the differences that exist between people who claim a particular identity, such as 'woman', 'lesbian' or 'transsexual' and aims to destabilise apparently natural identity categories. A queer reading of the vignette about Muriel might focus on the mismatches between Muriel's sexual practices and attractions and the categories available to her. It might focus on the fluidity of her identities and experiences, in order to draw attention to the ways in which all sexual identities have regulatory effects. Muriel's story is certainly conducive to such a reading.

Importantly though, such an approach, emphasising difference and the instability of identity labels, can make it much more difficult to organise politically and to recognise common problems and needs (Jones and Ward, 2010). Analysing the vignette about Muriel in this way is not conducive to more practice or policy-focused tasks, such as increasing understanding of bisexuality in order to challenge the view of bisexuality as predatory and promiscuous that her home carer invokes. If the vignette about Muriel were being used in a workshop for home carers that aimed to deepen their knowledge of LGBTQ clients, an approach that treated her unproblematically as a bisexual person might be judged to be more useful than one that problematized all identity labels.

Weeks' (1995) concept of 'necessary fictions' can be a helpful way of reconciling these different approaches to identity. He argues that non-heterosexual sexual identities are necessary because the sense of belonging that they help create may be crucial to the lives and interests of LGBTQ people. But Weeks argues that these identities are also fictions because they are always an oversimplification - they are never able to fully convey the lived experience of sexuality. They are also products of their particular historical time and social context. Thus sexual identities matter immensely but are also always provisional and an imperfect reflection of people's lives. In some contexts it may be appropriate to use identity categories as if they were relatively fixed and stable, in others it may not. King (in press) advocates a similarly provisional approach to the use of sexual identity labels when he paraphrases Butler (1991, p.14): 'one can appear under the sign 'older LGB adult', but it should be permanently unclear what precisely that sign signifies'.

It is this approach that this chapter uses – sometimes identity labels such as 'lesbian', 'gay' and 'bisexual' are used as if they map fairly straightforwardly on to groups of people, in order to explore what might be distinctive about the experiences in later life of people who are attracted to more than one gender or experience attraction regardless of gender. However, at other points the terminology is problematized and a more complex understanding of sexuality is drawn on.

Vignettes themselves can be conceptualised as 'necessary fictions', just like sexual identities. They oversimplify the detail and complexity of real lives and appear to fix and solidify them into, for example, 400 carefully-chosen words. This is a further reason for the use of a vignette in this chapter.

Identities, behaviours or attractions?

Much sociological and psychological work on sexuality has focused on the formation and negotiation of identities (Crawley and Broad, 2004; Diamond, 1998, 2008; Fruhauf, Orel, and Jenkins, 2009; Herman, 2005; Plummer, 1995; Rivers and Gordon, 2010). Furthermore, much of the empirical literature is based on studies of people who self-identify as bisexual, lesbian or gay, partly because it is hard to access people who behave non-heterosexually but do not so identify (Jones and Ward, 2010). However, as has already been indicated, identity

is not the only aspect of sexuality that can usefully be considered. Research that focuses only on identity, or recruits respondents only through these identity markers, risks missing whole groups of people. For example, researchers might be interested in how women who have lost a same-sex partner recover from their bereavement. If their recruitment literature called for lesbians to contact them, Muriel might not have felt that she fitted the criteria after she had met Colin, even though the researchers might have wanted to talk to her.

An alternative approach, most often found in sexual health work and with its roots in the HIV/AIDS crisis in the West in the 1980s, is to focus on sexual behaviours, setting aside questions of identity (Boellstorff, 2011). The terms 'MSM' (men who have sex with men) and the less commonly-used 'WSW' (women who have sex with women) represent attempts to do this (although there is also evidence that MSM is used by growing numbers of men as an identity label, see Boellstorff , 2011). The hope in relation to sexual health work is that using terminology that describes behaviours rather than identities will enable people who are in need of information or services around same-gender sexual practices but do not identify as gay, lesbian or bisexual to still access them (Young and Meyer, 2005). To return to the example about Muriel and the research study about loss of a same-sex partner, recruitment materials that asked for 'women who have lost a female partner', without naming such women as lesbians might have successfully recruited her to their study. The disadvantage of behaviour-based approaches is that they may obscure the complexity of sexual behaviours, which may be intertwined with sexual identities, and may mask and depoliticise chosen sexual identities (Young and Meyer, 2005). They may also be less successful in recruiting to research studies people who do straightforwardly identify with a commonly used sexual identity label. Before Pat died, Muriel might have responded more readily to a call for participants in a study about lesbians' domestic practices than to one about women who lived together. The very terminology of common sexual identities speaks to potential research respondents and may increase feelings of ownership and the desire to participate for those who feel included in the terms.

A further alternative might be to focus on sexual attractions or desires, setting aside questions of whether and how people act on those feelings. In the vignette about Muriel, this might suggest focusing on her girlhood, perhaps reformulating 'crushes' as something more meaningful and significant. Such an approach might privilege desires over practices or identities. It is, however, seldom used in work around sexuality, perhaps because of the

historic focus on sexual health issues. The rationale seems to be that if people are not acting on their same-sex attractions then there is no need to think about services for them. However, this is not necessarily the case, both because attractions may become practices and also because desires and attractions may have material effects on people's wellbeing (Barker, 2012; Firestein, 2007). A further benefit of focusing on attractions rather than practices or identities might be to reduce the apparent dominance of heterosexuality, by drawing attention to the prevalence of same-sex desires e.g. a large-scale US study found that 13% of women and 6% of men in the US reported attraction to more than one gender (Mosher, Chandra and Jones, 2005).

Bisexuality

One notable attempt to take attractions seriously alongside behaviours and identities is the grid developed by Klein (1993) which uses a Kinsey-like number (Kinsey, Pomeroy and Martin, 1948; Kinsey et al., 1953) to plot seven different aspects of sexual orientation in the past, present and future. 'Sexual attraction' and 'sexual fantasies' are two variables which are clearly to do with attraction and 'emotional preference' could also be argued to relate to attractions. It is not coincidental that Klein's work centred on bisexuality, since recognising the significance and differences between behaviour and attraction has particular salience to bisexuality, as is now discussed.

The proportion of people who identify, behave and are attracted bisexually could be represented as follows:
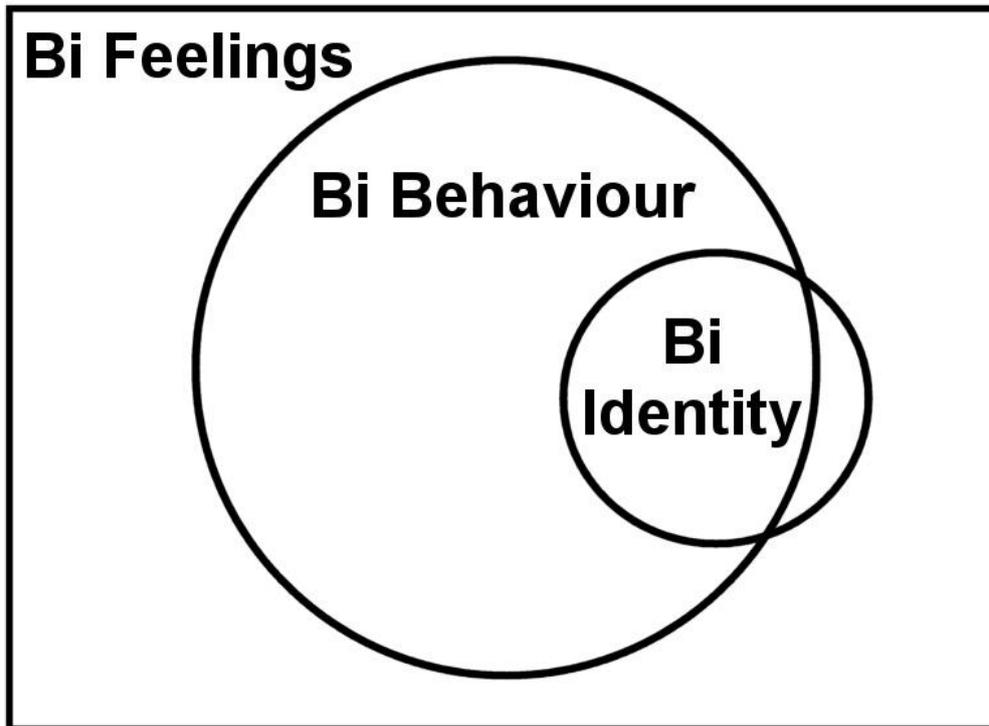
Figure 5.2: Bisexual identities, behaviours and attractions

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It is thought that many more people are attracted to people of different genders than behave bisexually, and that more people behave bisexually than identify as bisexual (Rodriguez-Rust, 2000). As the diagram suggests, there is also a small group of people who experience bisexual attractions and identify as bisexual but do not act on those attractions. This might be because they are in a long-term monogamous relationship but want to give significance to their attractions as well as their practices, or because they do not want to be sexually active.

Estimates of the percentage of the population who are bisexual crucially depend on whether attraction, behaviour or identity are taken as constituting 'bisexuality', with answers ranging from 'a majority' for attraction to as low as 0.5% in some surveys of identity (Barker, Richards et al., 2012). Since the significance of studying LGBT issues is often asserted via claims as to the number of people involved, paying attention to whether what is being counted is behaviours, attractions or identities is particularly significant for bisexuality. Making claims for the significance of bisexuality on the basis of the numbers of people attracted to more than one gender is much easier than making claims on the basis of the use of identity labels.

While there are undoubtedly many commonalities between lesbians, gay men and bisexual people across the life course, grounded in their shared experiences of living in a heteronormative and heterosexist society (Hicks, 2008), it is also clear that bisexual people have some distinctive experiences. Evidence is building that bisexual people are more likely to experience mental health difficulties than lesbian, gay or heterosexual people (Jorm et al., 2002; King et al., 2003) including higher rates of depression, anxiety, self-harm and suicidality. Some researchers argue that 'biphobia' (negative attitudes and behaviours directed towards people who are attracted to more than one gender) contributes to these higher rates of mental distress (Barker, Richards et al., 2012)

One US report argues that the invisibility and erasure of bisexuality as a legitimate and authentic sexual identity is a particular problem, and a form of biphobia (San Francisco Human Rights Commission, 2010). There is a common assumption that people are fundamentally attracted to only one gender (are 'monosexual'). That attraction might be to the same gender or to a different one, but the presumption remains that authentic attraction is gender-determined (Barker and Langdridge, 2008). Observers generally assume people's sexual identities on the basis of their current partner, if they have one. Thus, they see a woman with a female partner as a lesbian, and see a woman with a male partner as heterosexual, as seems to have been the case among Muriel's friends when she met Colin. However assuming sexuality on the basis of a known current partner's gender does harm to bisexual people. It erases bisexuality as a potential sexual identity, unless someone is publically known to have more than one partner at a time and those partners are different genders. While some bisexual people do have two concurrent partners of different genders, many do not. Those who do may not be known publically to have two partners, due to the stigma which surrounds multiple partners (Weitzman, 2007).

Assuming someone's sexuality on the basis of a known partner has some similarities with the situation in which a lesbian or gay person without a known partner is assumed to be heterosexual. However the difference is that, in many parts of the West today at least, lesbians and gay men are widely socially agreed to exist, even when they are subject to disapproval. Bisexuality is still subject to research which aims to discover whether it really exists (e.g. Rieger, Chivers and Bailey, 2005) and there are regular features in the media questioning whether bisexual attractions or behaviours are authentic (e.g. Burchill, 2012).

Assuming someone's sexuality on the basis of their current partner also implies that people who have had relationships with more than one gender were, at best, searching for their authentic (monosexual) identity or, at worst, greedy and promiscuous.

Bisexual people report experiencing discrimination and prejudice from within ostensibly LGBT communities (Gurevich et al., 2007) and also report still-present tensions between bisexual women and lesbians in the light of lesbian separatism (Hartman, 2005). In our vignette, Muriel's group of lesbian friends, who may have been influenced by lesbian separatist ideas given that it was the early 1980s, did not continue to support her with her bereavement once her sexual behaviour had changed after meeting Colin. Similarly, she did not feel able to continue to use the specialist bereavement service, even though she was still struggling with the particular consequences of losing a same-sex partner. Services which explicitly support bisexual people are rare (Barker, Richards et al., 2012).

Understandings of bisexuality, including use or not of the self-description 'bisexual', vary across cultures, between parts of the world, across social and economic classes, between genders, and according to age cohorts. Some activists and authors reject all parts of the term 'LGBT' as inherently middle-class, metropolitan, white and western (Gosine, 2006). Empirical research focusing on bisexuality and non-white ethnicity is rare but what there is reports recurrent difficulties for non-white bisexuals in accessing organised bisexual communities, which are predominantly white and may be unwelcoming (Yuen Thompson, 2012). Some people use alternative terms, such as 'pansexual' and 'omnisexual', often in an attempt to avoid some of the difficulties they see in the term 'bisexual' (Ochs, 2007). Debates about the benefits and pitfalls of claiming bisexual identities are found among community members as well as in academic texts (Barker et al., 2008; Barker, Richards and Bowes-Catton, 2009). Thus, the terminology researchers and practitioners use to discuss the experiences of people who are attracted to more than one gender is necessarily loaded and culturally specific. This chapter uses 'bisexuality' and 'bisexual' because these are most commonly used in the academic and practitioner literatures but this is not itself a neutral act – it is another 'necessary fiction'.

Bisexual ageing

There has recently been a significant growth in the literature on sexuality in later life and in LGBT ageing in particular, as other chapters in this collection attest (for other recent collections, see Rowan and Giunta, 2014, and Ward, Rivers and Sutherland, 2012). However, there remain significant knowledge gaps and there is barely any empirical research into the specific experiences of bisexual people as they age. Research studies tend to focus on lesbian and/or gay ageing but their findings cannot be applied straightforwardly to bisexual ageing (or indeed to trans ageing) since we know that bisexual people's experiences differ from those of lesbians and gay men in earlier life (Barker et al., 2012).

Although some studies may seem to promise information about bisexual (and trans) people's experiences of ageing, through their use of terms such as 'LGBT' or 'LGBTQ' in titles, introductory sections or conclusions, reading further often reveals little substantive bisexual content. Numbers of bisexual participants recruited to studies have often been very low (perhaps partly due to recruitment materials which use sexual identity labels, as already discussed), making generalised conclusions about the distinctiveness of bisexual ageing impossible to draw. Other studies analyse and present their findings by gender, obscuring any differences that might exist between gay and bisexual men or lesbians and bisexual women (e.g. Stonewall, 2011). For more discussion of the limitations of general LGBT surveys in identifying bisexual experiences and some good practice guidelines, see Barker et al. (2012).

There may be many reasons for these practices (for further discussion, see also Jones, 2010 and Jorm et al., 2002) but one effect is to obscure the fact that much more is known about older lesbians and gay men than is known about older bisexual and trans people. For example, rates of living alone, which is a key predictor of the need to access formal care services in later life, have long been known to be high among older lesbians and gay men (Cross and Brookdale Center on Aging of Hunter College, 1999) but there is no data on this for bisexual older people. Bereavement can be an important issue for older lesbians and gay men, who may lack social recognition of their loss as well as experiencing exclusion from formal processes surrounding a death such as the funeral (Dworkin and Kaufer, 1995). There are no empirical studies characterising older bisexual people's experiences of bereavement.

To date, there have been extraordinarily few empirical studies on any aspect of bisexual ageing. A literature review found only two such studies – both are overviewed below. Both are small-scale qualitative studies which included substantial numbers of participants aged

under 50 and neither included respondents in their 70s or older. Both focus on ageing as a lifelong process rather than the final decades of life. Neither paper extensively explores issues of difference between bisexuals, such as those of ethnicity, social class and economic situation.

Weinberg, Williams and Pryor's (2001) paper, which is part of a wider longitudinal study, examined the ways in which their 56 participants' experiences of their bisexuality had changed as they grew older (aged 35-67, mean age 50). Respondents were all white and middle-class and relatively highly educated. Their sexual practices had changed as they grew older but their identities as bisexual had remained constant. They were having less sex with fewer partners, which may partly have been to do with historical periods (before and after the AIDS crisis) but participants also attributed this to the effects of ageing, including life-stage effects such as being very busy with work and children. Participants were more likely to be having sex with only one gender and to be monogamous. They were less involved in organised bisexual communities and politics. However, many reported that their identity as bisexual was more stable and the researchers argue that they had 'obtained closure' on their identity. They based their identity as bisexual on their attractions rather than on their behaviours. The stability of their identity as bisexual as they grew older came from recognizing the long-standing nature of those attractions - this issue of later life perspectives on bisexuality is considered in more detail in the next section.

Jones' study focused on how bisexual-identified adults (aged 20–66, average age 37.5) imagined their own ageing and later life (Jones, 2011, 2012). Participants came from a range of countries and ethnic backgrounds although the majority were from the UK and identified as white. Nearly all of them were highly educated - 82% had undergraduate degrees. A previous study of lesbians and gay men had found that the extent to which they could imagine positive ageing depended on the extent to which they imagined a traditional life course of settling down with one partner (albeit a same sex partner) and having children (Goltz, 2008). Many of the participants in Jones' study imagined very untraditional futures, such as having multiple partners, not having children, living in communes and so on but the futures they imagined were overwhelmingly positive and happy. Where participants specified which sexual identity labels they would use in later life, nearly all imagined that they would continue to identify as bisexual, whatever sexual practices they had in the future. This study

is perhaps of most interest for suggesting ways in which people can be helped to envisage and plan for happy but non-traditional later lives.

In addition to these two empirical papers, there is a small literature making suggestions for issues that may arise in later life, written predominantly by practitioners and academics with expertise in bisexuality (Dworkin, 2006; Firestein, 2007; Keppel, 2006). So far, this work is mostly located within disciplines such as psychology and psychotherapy. This literature does not discuss issues of intersectionality extensively but does suggest that common issues for bisexual older people may include: isolation and lack of supportive networks; personal and family effects if someone is coming out in later life; and biphobia and bisexual invisibility combining with ageism. This literature also includes good practice suggestions for ways to better support bisexually-identified and bisexually-behaving older people, for example, not assuming someone's sexuality on the basis of their current partner, identifying resources and information about community groups, and respecting individuals' use of pronouns and terminology (Keppel, 2006).

Bisexuality and life course perspectives

There is a long tradition of life course perspectives within gerontology (Birren et al., 1996; Gubrium, 1997; Ruth, Birren and Polkinghorne, 1996; Ward, Richards and Sutherland, 2012). While there are sometimes hotly contested differences between different approaches (Bornat, 2001), all share a concern with seeing an older person's present situation and needs in the light of their past experiences. They suggest a focus on the whole life course, rather than just the current stage of life (Bengtson, Elder and Putney, 2005) and emphasise that this enables truly appropriate and personalised services and interventions to be offered to older people when they are needed.

This tradition of work is highly significant to the study of bisexuality and sexuality more widely. Taking a life course perspective makes the possibility of bisexuality much more obvious than a focus on a particular moment in time. Reading the account of Muriel's whole life, the descriptor 'bisexual' looks much more possible and appropriate than if a single point in time is considered. Since Muriel was always monogamous, a moment-in-time external perspective on her sexuality, based on the gender of her partner, would never have suggested

bisexuality as a possible identity label. Indeed, moment-in-time perspectives make bisexuality seem almost impossible for monogamous people unless, perhaps, one person in the couple is currently transitioning between genders. A life course perspective, asking about someone's history in relation to sexuality, makes monogamous bisexuality visible. This is not to say that 'bisexual' is the correct identity descriptor for Muriel or for any other person with a history of attraction to more than one gender. Merely, it is to note that it is a candidate descriptor which is made visible by a life course perspective.

If Muriel herself had been asked to describe her sexual identity, Figure 5.1 suggests that there was only a period of about five years in which she would be likely to have given the answer 'bisexual'. The vignette does not reveal what label, if any, Muriel currently uses or what sense she makes of her experiences over the course of her life so far. Asking her directly and then using whatever term she chooses has much to recommend it in terms of individuals' rights to name and narrate their own experiences. However the difficulty with this approach is that, as already discussed, the labels people use depend to some extent on the context and manner in which they are asked and on the rhetorical purpose of the speaker (Jones and Ward, 2010; King, in press; King, this volume). In the context of a social group for older lesbians, Muriel might happily tick a box on a monitoring form identifying herself as a lesbian but if giving an account of her relationship history, she might be more likely to label herself as bisexual. Furthermore, given the difficulties of claiming a bisexual identity when bisexuality is often seen as illegitimate, inauthentic or unviable (Gurevich et al., 2007; San Francisco Human Rights Commission, 2010), relying entirely on individual's own use of identity labels may do little to challenge conceptions of bisexuality or its erasure as a valid sexual identity.

This raises some interesting issues about the relative statuses of past and present identities. The proper concern to respect individual's right to name their own sexual identity has the effect of privileging present identities over past ones. Past identities that have now been discarded seem to be 'trumped' by currently claimed identities. This means that if someone has followed the relatively common identity trajectory heterosexual-bisexual-gay, those heterosexual and bisexual identities are often seen as invalid and inauthentic. Taking a life course perspective relatively late in a life course makes visible the fact that which moment-in-a-life a sexual identity is invoked may be significant. It raises the Queerer possibility that past selves might also have rights to stake a claim to label someone's sexual identity and that present selves might not always have the last word. This is tricky terrain but worthy of further

consideration. It has particular relevance to the study of ageing and bisexuality but also for identities of all sorts that have changed over the course of someone's life, for example, other sexual identities, race or ethnic identities, class identities or gender identities.

Implications for health and social care services

This final substantive section of this chapter draws out some of the wider implications of these theoretical questions for the everyday lives of older people when they are using health and social care services. While some older people make no greater use of health and social care services than most younger people, increasing age does increase the likelihood that someone will use these services more extensively. It is for this reason that this section discusses the implications for health and social care services, not because being older and being an extensive user of health and social care services are considered synonymous.

Previous work on older LGB&T people's experiences of health and social care services has highlighted significant issues around heteronormative and heterosexist care and accommodation provision, and the consequence that many people choose to conceal their sexual identity (Cronin et al., 2011, Knocker, 2006). The case of bisexuality adds to this body of work by drawing attention to the complexity of all sexual identities - the distinctions between sexual attraction, sexual behaviour and sexual identity are also important in working with lesbian, gay and heterosexual people. For example, people who do not identify as lesbian or gay but have same-sex attractions and behaviour are unlikely to pick up a leaflet offering services targeted at lesbian and gay elders, even if they might benefit from them. The case of bisexuality also helps to draw care workers' attention to the importance of using people's own identity labels, rather than ascribing them on the basis of either heterosexist assumptions or a current partner. There is a wide variation in older people's use of sexual and gender identity terms and using the wrong term can make services inappropriate and inaccessible (Alleyn and Jones, 2010).

Where older users of health and social care services have bisexual pasts, it is particularly important that care workers do not ascribe identity categories that clients do not use and do not assume that services for older lesbians and gay men will be acceptable or welcoming. Care workers also need to be alert to the possibility of biphobia, such as Muriel experienced when her home carer associated her bisexual past with being sexually predatory and

promiscuous (for further examples of this, see Dobinson et al., 2005). Rigid thinking about sexual identity categories can have deleterious effects on care practices. If Muriel developed dementia and went to live in a progressive care home that identified her as a lesbian and aimed to support her lesbian identity, how might they respond to Colin coming to visit her and Muriel behaving sexually towards him? There is a danger that they might see her behaviour as evidence of cognitive decline and disinhibition, when in fact it was not. As Hicks (2008) also argues, a more nuanced and sophisticated understanding of sexuality would benefit care across the life course.

Gerontologists have long argued that researchers and care workers need to remain alert to the effects of historical periods on individual's lives (Bengtson, Elder and Putney, 2005). Stories such as Muriel's can contribute to this project. The services Muriel feels able to access in later life are fundamentally shaped by the times through which she lived and the ideas about sexuality to which she had access. A well-meaning care worker who was aware of Muriel's relationship with Joan might assume that she would welcome information about a local group for older lesbians. It is possible that she might feel able to attend such a group, because she had been thinking of herself as a lesbian in recent years, but it also possible that she would not feel able to attend because of her bisexual past and her previous experiences of rejection. Just as living through the Great Depression fundamentally marked the way people age (Elder, 1974) , the history of sexual identity politics has effects on individuals as they age (see also Rosenfeld, 2003).

The UK charity 'Age UK' has produced a good practice guide for working with older lesbian, gay and bisexual people (Knocker, 2006). While this does not discuss bisexuality extensively, the general principles it suggests provide a practitioner-friendly introduction to the topic. In bi-specific form, these principles suggest that health and social care workers should: recognise their responsibilities to make explicit their bi-friendliness since silence is likely to be read as hostility or ignorance; realise that sexuality is not just about sex but about someone's social, cultural and relationship needs and thus an important part of any care plan and any claim to provide person-centred care; recognise the increased salience of feelings of safety and security when people may have experienced discrimination and stigma throughout their lives (including from within LGBT communities), and especially when they are already vulnerable when using health and social care services.

Conclusions

This chapter has used the example of bisexuality to argue that research and practice around non-heterosexual ageing should pay closer attention to how sexual identity labels are used. The significance of the distinctions between identity, behaviour and attraction may be particularly clear in relation to bisexuality, but they are also important in work with lesbians, gay men and heterosexual people. Likewise, the significance of taking a life course perspective from relatively late in a life may have particular relevance to bisexuality, because this perspective may make visible otherwise invisible bisexuality, but it also has implications for lesbian and gay identities. As discussed, it may be politically necessary and personally supportive to accept someone's present-day claim to have 'always been gay really' but it is at least worth noting that this privileges present selves over past ones and that this is not inevitable.

The idea of vignettes as a form of necessary fiction helps to draw attention to what is achieved and what is obscured by the choice of a particular vignette. Muriel's story is, not coincidentally, well-suited to discussion of the distinctions between identity, behaviour and attraction, and the value of taking a later-life life course perspective. It says nothing of her sexual practices beyond her choice of partner and little of her attractions – a further attempt to decentre sexual identities could perhaps use a vignette which dealt with behaviours and attractions over a long life course much more fully. Muriel's life was relatively conventional and mainstream apart from her changes of sexual identity. A vignette about an older bisexual person who had multiple partners or a large number of partners, or one which talked about sexual practices such as BDSM might have lent itself better to discussion of couple-privilege or the stigmatisation and erasure of older people's sexual activity. A vignette about a long-married man, who briefly identified as bisexual before leaving his wife and coming out as gay would have been much more conducive to understandings of bisexuality as transitional and inauthentic. A story about someone who had identified as bisexual all their adult life but felt they had to go back into the closet when they entered a care home would have enabled a much more practice-centred discussion of sexual identities in residential settings for older people. To have used any of these putative vignettes to discuss the issues in this chapter might have been possible but they would have increased complexity in a way that reduced intelligibility and political utility.

It is clear that empirical data on the living situations, experiences and needs of older people with some relationship to the identity 'bisexual' is needed. Given the distinctiveness of bisexual experiences earlier in life, we should anticipate that older bisexual people's experiences are likely to be significantly different from those of older lesbian and gay people. We need to be extremely cautious about applying findings from studies of generic LGBT ageing experience to bisexual (and trans) people, since these studies may have included very few, or no, bisexual (or trans) participants and may not have analysed their responses separately. Furthermore, given that most research into bisexuality has been conducted among white, middle-class, well-educated people, we need to be aware that older bisexual people from non-white, low-income, less educated or immigrant communities may experience ageing very differently.

The case of bisexuality highlights the importance of distinguishing between sexual identity, behaviour and attraction both in the design of research studies and in health and social care practice. If research studies elide identity and behaviour then findings may not be valid or generalizable. If care workers elide identity and behaviour then people who might benefit from services may not take them up. This is as true for lesbian, gay and trans people as for bisexual people. Thinking about bisexuality helps care services for older people with their wider project of conveying and responding to the heterogeneity of older people, whether LGBT or not. Taking a life course approach – looking at the whole of a person's life, not just their current situation – creates some interesting issues for the study of bisexuality and sexuality more widely, which seem worthy of further study.

References

Alleyn, C. and Jones, R. L., 2010. Queerying care: Dissident trans identities in health and social care settings. In R. L. Jones and R. Ward, eds. *LGBT issues: Looking beyond categories* (pp. 56-68). Edinburgh: Dunedin Academic Press.

Barker, M., 2012. *Rewriting the rules: An integrative guide to love, sex and relationships* London: Routledge.

Barker, M., Bowes-Catton, H., Iantaffi, A., Cassidy, A. and Brewer, L., 2008. British bisexuality: A snapshot of bisexual identities in the UK. *Journal of Bisexuality,* 8(1-2), 141-162.

Barker, M. and Langdridge, D., 2008. Bisexuality: Working with a silenced sexuality. *Feminism and Psychology,* 18(3), 389-394.

Barker, M., Richards, C. and Bowes-Catton, H., (2009). "All the world is queer save thee and ME…": Defining queer and bi at a Critical Sexology seminar. *Journal of Bisexuality,* 9(3-4), 363-379.

Barker, M., Richards, C., Jones, R. L., Bowes-Catton, H., Plowman, T., Yockney, J. and Morgan, M., 2012. The bisexuality report: Bisexual inclusion in LGBT equality and diversity. Milton Keynes: The Open University.

Barker, M., Yockney, J., Richards, C., Jones, R. L., Bowes-Catton, H. and Plowman, T., 2012. Guidelines for researching and writing about bisexuality. *Journal of Bisexuality,* 12(3), 376-392.

Bengtson, V. L., Elder, G. H. J. and Putney, N. M., 2005. The lifecourse perspective on ageing: Linked lives, timing and history. In M. L. Johnson, ed., *The Cambridge Handbook of Age and Ageing* (pp. 493-501). Cambridge: Cambridge University Press.

Birren, J. E., Kenyon, G. M., Ruth, J.-E., Schroots, J. J. F. and Svensson, T., eds., T. S., 1996. *Aging and biography: Explorations in adult development*. New York: Springer Publishing Company.

Boellstorff, T., 2011. But do not identify as gay: A proleptic genealogy of the MSM category. *Cultural Anthropology,* 26(2), 287-312.

Bornat, J., 2001. Reminiscence and oral history: parallel universes or shared endeavour? *Ageing and Society,* 21(2), 219-241.

Bowes-Catton, H., 2007. Resisting the binary: Discourses of identity and diversity in bisexual politics 1988-1996. *Lesbian and Gay Psychology Review,* 8(1), 58-70.

Bullough, V. L., 1997. American physicians and sex research and expertise, 1900-1990. *Journal of the History of Medicine and Allied Sciences,* 52(2), 236-253.

Burchill, J., 2012. Let's get this straight, guys. We're not exploring sapphism for your benefit. *The Observer,* 2 September. Available at: <http://www.theguardian.com/commentisfree/2012/sep/02/sapphism-pop-stars-julie-burchill>
[Accessed 24 April 2015]

Butler, J., 1990. *Gender Trouble: Feminism and the Subversion of Identity*. London: Routledge.

Butler, J., 1991. Imitation and gender insubordination. In D. Fuss, ed. *Inside/out: Lesbian theory/gay theories* (pp. 13-31). London: Routledge.

Crawley, S. L. and Broad, K. L., 2004. "Be your (real lesbian) self": Mobilizing sexual formula stories through personal (and political) storytelling. *Journal of Contemporary Ethnography,* 33(1), 39-71.

Cronin, A. and King, A., 2010. A queer kind of care: Some preliminary notes and observations. In R. L. Jones and R. Ward, eds. *LGBT issues: Looking beyond categories* (pp. 69-81). Edinburgh: Dunedin Academic Press.

Cronin, A., Ward, R., Pugh, S., King, A. and Price, E., 2011. Categories and their consequences: Understanding and supporting the caring relationships of older lesbian, gay and bisexual people. *International Social Work,* 54(3), 421-435.

Cross, P., and Brookdale Center on Aging of Hunter College, 1999. Housing for elderly gays and lesbians in New York city. New York: SAGE.

Diamond, L. M., 1998. Development of sexual orientation among adolescent and young adult women. *Developmental Psychology,* 3(5), 1085-1095.

Diamond, L. M., 2008. *Sexual Fluidity: Understanding Women's Love and Desire*. Cambridge, Massachusetts: Harvard University Press.

Dobinson, C., MacDonnell, J., Hampson, E., Clipsham, J. and Chow, K., 2005. Improving the access and quality of public health services for bisexuals. *Journal of Bisexuality,* 5(1), 41-78.

Dworkin , J. and Kaufer, D., 1995. Chapter 3: Social Services and bereavement in the lesbian and gay community. *Journal of Gay and Lesbian Social Services,* 2(3-4), 41-60.

Dworkin, S. H., 2006. Aging bisexual: The invisible of the invisble minority. In D. Kimmel, T. Rose and S. David, eds. *Lesbian, gay, bisexual and transgender aging: Research and clinical perspectives* (pp. 36-52). New York: Columbia University Press.

Eaglesham, P., 2010. The policy maze and LGBT issues: Does one size fit all? In R. L. Jones and R. Ward, eds. *LGBT Issues: Looking beyond categories* (pp. 1-15). Edinburgh: Dunedin Academic Press.

Elder, G. H., 1974. *Children of the great depression: Social change in life experiences*. Chicago: University of Chicago Press.

Ely, M., Vinz, R., Anzul, M. and Downing, M., 1997. *On writing qualitative research*. London and Washington, D. C.: The Falmer Press.

Finch, J., 1987. The vignette technique in survey research. *Sociology,* 21(1), 105-114.

Firestein, B. ed., 2007. *Becoming visible: Counseling bisexuals across the lifespan*. New York: Columbia University Press.

Foote, S., 2005. Deviant classics: Pulps and the making of lesbian print culture. *Signs,* 31(1).

Foucault, M., 1976. *The history of sexuality: Volume 1: An introduction* (R. Hurley, Trans.). London: Allen Lane.

Fruhauf, C. A., Orel, N. A. and Jenkins, D. A., 2009. The coming-out process of gay grandfathers: Perceptions of their adult children's influence. *Journal of GLBT Family Studies,* 5(1-2), 99-118.

Fuss, D. ed., 1991. *Inside/out: Lesbian theories, gay theories*. London: Routledge.

Gardiner, J., 2003. *From the closet to the screen: Women at the Gateways Club, 1945-1985*. London: Pandora Press.

Giddens, A., 1992. *The transformation of intimacy: Sexuality, love and eroticism in modern societies*. Cambridge: Polity Press.

Goltz, D., 2008. Investigating queer future meanings: Destructive perceptions of 'the harder path'. *Qualitative Inquiry,* 15(3), 561-586.

Gosine, A., 2006. 'Race', culture, power, sex, desire, love: Writing in 'men who have sex with men'. *IDS Bulletin,* 37(5), 27-33.

Gubrium, J. F., 1997. *Living and dying at Murray Manor*. Charlotteville, VA: University Press of Virginia.

Gurevich, M., Bower, J., Mathieson, C. M. and Dhayanandhan, B., 2007. 'What do they look like and are they among us?': Bisexuality, (dis)closure and (un)viability. In V. Clarke and E. Peel, eds. *Out in Psychology: Lesbian, gay, bisexual, trans and queer perspectives* (pp. 217-241). London: Wiley-Blackwell.

Hartman, J. E., 2005. Another kind of 'chilly climate': The effects of lesbian separatism on bisexual women's identity and community. *Journal of Bisexuality,* 5(4), 63-76.

Heaphy, B., 2005. The changing of the guard: Lesbian and gay elders, identity and social change. *Ageing and Society, 25*, 132-134.

Heaphy, B., 2007. Sexualities, gender and ageing - Resources and social change. *Current Sociology,* 55(2), 193-210.

Herman, D., 2005. 'I'm gay': Declarations, desire, and coming out on prime-time television. *Sexualities,* 8(1), 7-29.

Hicks, S., 2008. Thinking through sexuality. *Journal of Social Work,* 8(1), 65-82.

Jones, R. L., 2010. Troubles with bisexuality in health and social care. In R. L. Jones and R. Ward, eds. *LGBT issues: Looking beyond categories* (pp. 42-55). Edinburgh: Dunedin Academic Press.

Jones, R. L., 2011. Imagining bisexual futures: Positive, non-normative later life *Journal of Bisexuality,* 11(2-3), 245-270.

Jones, R. L., 2012. Imagining the unimaginable: Bisexual roadmaps for ageing. In R. Ward, I. Rivers and M. Sutherland, eds. *Lesbian, gay, bisexual and transgender ageing: Biographical approaches for inclusive care and support* (pp. 21-38). London: Jessica Kingsley.

Jones, R. L. and Ward, R. eds. 2010. *LGBT issues: Looking beyond categories* (Vol. 10). Edinburgh: Dunedin Academic Press.

Jorm, A. F., Korten, A. E., Rodgers, B., Jacomb, P. A. and Christensen, H., 2002. Sexual orientation and mental health: Results from a community survey of young and middle-aged adults. *British Journal of Psychiatry,* 180(5), 423-427.

Katz, J. N., 2007. *The invention of heterosexuality* (2nd ed.). Chicago: University of Chicago Press.

Keppel, B., 2006. Affirmative psychotherapy with older bisexual women and men. *Journal of Bisexuality,* 6(1/2), 85-104.

King, A., in press. Queer Categories: Queer(y)ing the identification 'older lesbian, gay and/or bisexual (LGB) adults' and its implications for organisational research, policy and practice *Gender Work and Organisation.* DOI: 10.1111/gwao.12065

King, M., McKeown, E., Warner, J., Ramsay, A., Johnson, K., Cort, C. and Wright, L., 2003. Mental health and quality of life of gay men and lesbians in England and Wales: Controlled, cross-sectional study. *British Journal of Psychiatry,* 183(6), 552-558.

Kinsey, A. C., Pomeroy, W. B. and Martin, C. E., 1948. *Sexual behavior in the human male.* London: W. B. Saunders and Co.

Kinsey, A. C., Pomeroy, W. B., Martin, C. E. and Gebhard, P. H., 1953. *Sexual behavior in the human female.* London: W. B. Saunders and Co.

Klein, F., 1993. *The bisexual option* (2nd ed.). New York: Haworth Press.Knocker, S., 2006. *The Whole of Me: meeting the needs of older lesbians, gay men and bisexuals living in care homes and extra care housing.* London: Age Concern England.

MacKian, S. and Goldring, J. E., 2010. 'What's he looking at me for?': Age, generation and categorisation for gay men's health promotion. In R. L. Jones and R. Ward, eds. *LGBT issues: Looking beyond categories* (pp. 16-29). Edinburgh: Dunedin Academic Press.

Mosher, W. D., Chandra, A. and Jones, J., 2005. Sexual behaviour and selected health measures: Men and women 15-44 year of age, United States, 2002. *Advance data from vital and health statistics,* 362(1), 1-55.

Northedge, A., 2002. Organising excursions into specialist discourse communities: A sociocultural account of university teaching. In G. Wells and G. Claxton, eds. *Learning for life in the 21st century: Sociocultural perspectives on the future of education* (pp. 252-264). Oxford: Blackwell.

Norton, R., 2006. *Mother Clap's molly house: The gay subculture in England, 1700-1830.* London: Chalfont Press.

O'Dell, L., Crafter, S., de Abreu, G. and Cline, T., 2012. The problem of interpretation in vignette methodology in research with young people. *Qualitative Research,* 12(6), 702-714.

Ochs, R., 2007. What's in a name? Why women embrace or resist bisexual identity. In B. A. Firestein, ed. *Becoming visible: Counseling bisexuals across the lifespan* (pp. 72-86). New York: Columbia University Press.

Plummer, K., 1995. *Telling sexual stories: Power, change and social worlds*. London: Routledge.

Rieger, G., Chivers, M. L. and Bailey, J. M., 2005. Sexual arousal patterns of bisexual men. *Psychological Science,* 16(8), 579-584.

Rivers, I. and Gordon, K., 2010. 'Coming out', context and reason: first disclosure of sexual orientation and its consequences. *Psychology and Sexuality,* 1(1), 21-33.

Rodriguez-Rust, P. C., 2000. Preface. In P. C. Rodriguez-Rust, ed. *Bisexuality in the United States: A social science reader* (pp. xiii - xviii). New York: Columbia University Press.

Rosenfeld, D., 2003. *The changing of the guard: Lesbian and gay elders, identity and social change*. Philadelphia: Temple University Press.

Rowan, N. L. and Giunta, N. eds., 2014. Special Issue: Lesbian, gay, bisexual, and transgender (LGBT) aging: The role of gerontological social work. *Journal of Gerontological Social Work,* 57(2-4), 75-406.

Ruth, J. E., Birren, J. E. and Polkinghorne, D. E., 1996. The projects of life reflected in autobiographies of old age. *Ageing and Society,* 16(6), 677-699.

San Francisco Human Rights Commission, 2010. Bisexual invisibility: Impacts and recommendations. San Francisco: San Francisco Human Rights Commission LGBT Advisory Committee.

Saxey, E., 2008. *Homoplot: The coming-out story and gay, lesbian and bisexual identity*. New York: Peter Lang.

Scicluna, R., 2013. *The 'other' side of the kitchen : an anthropological approach to the domestic kitchen and older lesbians.* Ph. D. The Open University.

Seidman, S., 1997. *Difference troubles: Queering social theory and sexual politics*. Cambridge: Cambridge University Press.

Spalding, N. J. and Phillips, T., 2007. Exploring the use of vignettes: From validity to trustworthiness. *Qualitative Health Research,* 17(7), 954-962.

Stonewall, 2011. *Lesbian, gay and bisexual people in later life.* London, Stonewall.

Ward, R., Rivers, I. and Sutherland, M. eds., 2012. *Lesbian, gay, bisexual and transgender ageing: Biographical approaches for inclusive care and support*. London and Philadelphia: Jessica Kingsley.

Warner, M., 1991. Introduction: Fear of a queer planet. *Social Text,* 29(4), 3-17.

Weeks, J., 1995. *Invented moralities: Sexual values in an age of uncertainty*. Bristol: Polity Press.

Weeks, J., 2007. *The world we have won: The remaking of erotic and intimate life*. London: Routledge.

Weinberg, M. S., Williams, C. J. and Pryor, D. W., 2001. Bisexuals at midlife: Commitment, salience and identity. *Journal of Contemporary Ethnography,* 30(2), 180-208.

Weitzman, G., 2007. Counseling bisexuals in polyamorous relationships. In B. A. Firestein, ed. *Becoming visible: Counseling bisexuals across the lifespan* (pp. 312-335). New York: Columbia University Press.

Young, R. M. and Meyer, I. H., 2005. The trouble with "MSM" and "WSW": Erasure of the sexual-minority person in public health discourse. *American Journal of Public Health,* 95(7), 1144–1149.

Yuen Thompson, B., 2012. The Price of 'community' from bisexual/biracial women's perspectives. *Journal of Bisexuality,* 12(3), 417-428.