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**An Interpretive Phenomenological Investigation into The Identity and
Experiences of Older Lesbians**

Emma Victoria Shiel

Master of Research

University of Huddersfield

05/2022

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ABSTRACT

This research uses an Interpretive Phenomenological Analysis (IPA: Smith et al., 1999; Smith & Osborn, 2003), and photo elicitation, to investigate 10 older lesbian's (aged 55 years and above) identity and experiences of aging. IPA was conducted using semi-structured interviews alongside five self-selected images, which generated three super-ordinate themes. The themes are as follows; "Identity and Belonging", "Homophobia with a Side Order of Sexism" and "Leaving the Golden Years".

The first theme 'Identity and Belonging', investigates participants sense of belonging in both their internal and external world, i.e., exploring self-acceptance and the impact on personal relationships. The majority of participants communicated that due to the conservative social climate in their youth, they had to live 'falsely' as heterosexual, causing particular ramifications for them – all of which will be explored in this theme.

The second theme 'Homophobia with a Side Order of Sexism' follows the integration of additional minority elements focusing primarily on the topic of sexism; investigating how being a woman impacts participants experiences of homophobia. Furthermore, this theme leans into feminist topics such as the sexualisation of women and same-sex female sexualities (i.e., lesbianism, bisexuality, pansexuality, etc.), the impact of the patriarchy and gender roles/constructs within society.

Finally, the theme 'Leaving the Golden Years' focuses on the experience of aging as a lesbian, exploring participants attitudes towards healthcare, self-expression in older age, retirement plans, and vulnerability. Participants shared their grievances regarding the unpredictable nature of their future, with many contemplating masking their sexual identity once more to achieve a sense of safety as they approach older age.

This study contributes to the literature by producing new, contemporary research, filling gaps in the knowledge, and contributes to an underrepresented sample within lesbian studies (Ristock, 1991). This research utilises a feminist perspective to understand participants in their correct socio-political context, understanding how

social and political elements such as, being a woman in a male-oriented society, impacts their experiences.

This research found that discrimination against one's biological sex, age, and sexuality were definitive factors in shaping participants identity and experience of aging; often being the reason behind the acceptance or rejection of the self, and one's ability to retire safely and use healthcare services. Whilst aging is a universal issue, participants experienced unique concerns due to misogyny, lesbian phobia and agism, creating great stress and worry when visiting health services, a need that only grows stronger as one ages.

This study concluded that older lesbians tend to have a more negative aging experience than both their heterosexual and male counterparts, due to experiencing frequent prejudice across several domains. Participants felt torn when choosing between a safe retirement or their authentic identity, believing that in order to be safe one must conceal one's identity however, in doing so, made one's life a misery.

To conclude older lesbians' identity and aging is greatly impacted by their minority characteristics, for that reason, older lesbians tend to endure an 'unsuccessful' aging process, often lacking the confidence to live authentically, feeling regret, and being ostracised. Finally, participants called for LGBT+ friendly facilities to alleviate the stress of aging as a sexual minority; believing that if one is secured a safer future, one could live more freely in their identity and therefore age successfully.

LIST OF TERMS:

This section will define numerous terms that are used throughout this study, in order to avoid conflating various components and disciplines.

Sex: This term refers to the biological make-up of an individual that determines if they are female or male, i.e., if they have XX or XY chromosomes, and what reproductive organs and hormones they have/produce, i.e., the biological characteristics of someone's body.

Gender: This term refers to the cultural differences in society of what is expected of men and women in terms of expression; described by Rubin (1975) as the "*socially imposed division of the sexes*", a set of oppressive ideologies of how women and men should behave. Gender is commonly described using terms such as 'masculine' and 'feminine' to describe how one fits into the expected norms of sex roles. In this paper, gender is understood as a social construct that can change over one's life time and is not fixed. This term does not relate to one's sex assigned at birth or dictate their sexual orientation; however gendered expression can be used in the portrayal of one's sexual identity i.e., in sexual subtypes such as 'butch lesbian'.

Femininity: In this study, femininity is used to describe a set of societal beliefs and appearance mandates that are expected of a woman e.g., being sensitive or emotional.

Masculinity: In this study, masculinity is used to describe a set of societal beliefs and appearance mandates that are expected of a man e.g., being muscular and aggressive.

Woman: This study acknowledges the presence of gender variance; however, in this study this term is used to describe women whose gender identity/expression pairs the biological sex they were assigned at birth.

Man: This study acknowledges the presence of gender variance; however, in this study this term is used to describe men whose gender identity/expression pairs the biological sex they were assigned at birth.

LGBT+: An acronym used for different sexualities; “lesbian, gay, bisexual, and transgender.” The plus sign integrates other genders and sexualities that are not as mainstream, such as intersex, asexual, aromantic and agender.

Lesbian: A woman who is exclusively romantically and sexually attracted to people of their own sex.

Homosexual: A male who is exclusively romantically and sexually attracted to people of their own sex. However, this word can be argued to be outdated and therefore may be referred to as Gay instead.

Older Lesbian: Women who are exclusively romantically and sexually attracted to people of their own sex and aged 55 years old and above; and is a term commonly used throughout lesbian studies e.g., Fullmer, Shenk, and Eastland, (1999).

Homophobia: This term relates to prejudicial behaviour towards members of LGBT+ communities, homophobia can be physical, verbal, or internal.

Lesbian Phobia: This term is similar to homophobia however focuses solely on lesbians. As lesbians are considered “invisible” women in society (Eliason & Randall, 1991), this study uses this term where possible to keep women at the forefront of this study.

Heteronormativity: Favours heterosexuality as the preferred or normal sexual orientation.

Heterosexist: This term is often linked with Heteronormativity as it also demonstrates heterosexuality as the preferred sexual orientation, however, is defined as the discrimination that takes place on behalf of this belief.

Misogyny: Discrimination or distain against women based on biological sex.

(Un)Successful Aging: Refers to the three components of well-being that affect one’s aging process: probability of disease, and disability, cognitive and physical capacity, and engagement with life (*Rowe and Kahn, 1998*).

INTRODUCTION:

This section will; provide a synopsis of the research area background, define the scope and relevance of the area, state the research questions, and identify gaps in the knowledge.

Background Knowledge

Hilary Mantel (2009) famously categorised women of over fifty years old, as the 'invisible generation'. Whilst the phenomenon of aging is universal across humanity, King (2013) believed that women incurred further hardship than their male counterparts, targeted for their 'declining' appearance, being labelled as 'mature', and robbed of one's sexual attractiveness (King, 2013).

Kehoe (1986) went on to research how sexuality contributed to this area, stating that older lesbians have never been seen or understood due to the relationship between living in a male centric society and their minority characteristics. Kehoe (1986) claimed that older lesbians fall victim to the triple invisible minority status¹, experiencing an amalgamation of homophobia, agism and misogyny/sexism, greatly impacting their identity and aging. However, this research has since become outdated with the changes in social climate *e.g., legislation and LGBT+ acceptance rates*, and requires modernizing and renewal – hence the focus of this research.

Sexuality has been historically described using a binary dyad (Callis, 2014), conceptualised on a continuum with one end being heterosexual, and the other, homosexual – in effect, reflecting one's biological sex and the sex choice of partner. However past definitions such as these are outdated and male centric, ignoring the prevalence of lesbianism or other non-binary² orientations.

Whilst one acknowledges aging could be interpreted as a universal worry for both heterosexual and non-heterosexual individuals, the components of being an older lesbian (i.e., one's age, sexuality, and biological sex) create unique

¹ The three main characteristics of older lesbians that attract prejudice: age, sexuality, and biological sex (Kehoe, 1986).

² Non-Binary is an umbrella term for individuals whose gender identity does not sit within the typical binaries of male and female, e.g., genderqueer, neutrois, agender, gender-fluid, bigender and third gender.

experiences unavailable to their heterosexual counterparts that are beneficial in exploring further (Calasanti, 2010; Kimmel, 2014). Like non-heterosexual people, older lesbians also experience the likes of health conditions, loss of independence, post-retirement financial challenges, social isolation, and ageism (Hash & Rogers, 2013), however additionally have to deal with the impact of social bias and stigma towards their sexual identity (Hash, & Morrow, 2020); issues followed in this research.

Study Relevance

In light of the information above this study will investigate UK-born lesbian's (aged 55 and over), investigating identity and experience of aging.

This thesis will aid to solve a practical problem in the literature, using a qualitative method to provide a comprehensive in-depth analysis of the identity and aging experiences of older lesbians. Whilst researchers like Tuohy and Cooney (2019), have covered the process of aging as a non-heterosexual individual, older lesbians have been neglected in the field of gerontology (Ristock, 1991), and when researched mainly studied using quantitative, less personal methods. Whilst strong qualitative analyses of older lesbians exist i.e., Stein, Beckerman, and Sherman (2010), many have methodological pitfalls, and their scope has been limited. Moreover, female sexual identity is rarely identified/disclosed in generic female literature, amounting to a substantial lack of lesbian representation and education; with lesser focus on older age categories (Wolfe, 1992).

This study was inspired by Kehoe (1986) who explored the influence of age, sexuality, and biological sex on older lesbians, finding these factors to significantly impact older lesbian lives, attracting hardships, and increasing one's resilience; leading Kehoe (1986) to label them as strong-willed survivors. Additionally, Kehoe (1986) claimed that older lesbians coped with aging well, and were described as having a healthy, balanced personality. Whilst this study was integral to the field of gerontological and lesbian studies, using a limiting method such as a questionnaire resulted in a lack of depth concerning participants experiences of agism, sexism and homophobia.

To conclude the introduction to this thesis, the current study will build on previous research by using a more detailed method of data capture and aims to provide a more comprehensive perspective on lesbian aging and identity, using a scoping review to become aware of the gaps in knowledge and rationale.

SECTION ONE: LITERATURE REVIEW METHODOLOGY

This section will detail the methodology of the literature review, providing background information, inclusion criteria, key words/search terms, objectives/aims of the review, source selection and search strategies.

Methodology

When synthesising research evidence, scoping reviews have become very influential within social sciences (Davis et al., 2009; Levac et al., 2010; Daudt et al., 2013). Scoping reviews tend to be most effective in sectors that are diverse, and intricate or further, have yet to be comprehensively reviewed (*Mays et al., 2001*). This type of review enables the researcher to understand the potential scope of undertaking the research and understand the value and cost of the study.

The following section uses the Joanna Briggs Institute systematic scoping review (Peters, Godfrey, McInerney, Baldini Soares, Khalil, & Parker, 2017). This method was influenced by Arksey and O'Malley (2005) and Levac, Colquhoun, and O'Brien (2010), enhancing their methods to ensure higher clarity and rigor in the review process. The objectives of this review are to comprehensively map the key concepts in existing literature on older lesbian's experience and identity, synthesise the evidence and identify the existent gaps across social science disciplines. There are nine steps to this framework; defining and aligning the objective/s and question/s, developing and aligning the inclusion criteria with the objective/s and question/s, describing the planned approach to evidence searching and selection, searching for the evidence, selecting the evidence, extracting the evidence, charting the evidence, summarizing the evidence in relation to the objective/s and question/s and consultation of information scientists, librarians, and/or experts (Peters, Godfrey, McInerney, Baldini Soares, Khalil, & Parker, 2017).

Executive Summary / Background

Ultimately, this review identified that aging is catalyst factor for loneliness, and isolation; often involving the breakdown of the body/organs to the point where individuals begin to be cut off from maintaining their friendships. Whilst aging is a universal experience, this review found that older lesbian's experience further

hardships due to their sexuality impacting various domains of their life, for example, their healthcare, social lives, and support, making aging a very worrying experience for this demographic.

Due to the hardships older lesbians have experienced, (e.g., being born into a generation that criminalised their sexuality) this demographic tends to have a disconnect within the self, often having a poorer outlook on life. It was found that older lesbians also receive backlash for their biological sex, being victim to misogyny and sexism.

This review goes onto reveal how women are often over critiqued when aging in comparison to their male counterparts; being described in derogatory, vulgar ways - a contrasting difference to the complimentary descriptions of older men. From the data collated in this scoping review, it is clear that there are complex factors to older lesbians' identity and attitudes to the self, highlighting how personal factors like age, sex and sexual orientation can impact one's self-concept. This review also revealed a gap in time with the majority of existing studies being aged from 1963-2012, highlighting the scarcity of literature and the need for new, modernised, contemporary research. Whilst this review presented a small scope of literature on these topics, it was successful in calling attention to the need for the current study to take place.

Aims and Objectives

This scoping review mirrors the aims of the current study, exploring how older lesbians experience aging, and how identifying as an older lesbian impacts or influence one's sense of self or identity. Having said that, this review will also provide background knowledge into the subject matter, exploring relevant branches of literature in order to provide the full scope on the topic.

Inclusion Criteria

Inclusion criteria consisted of: LGBT+ individuals, with a preference for older lesbians (over 55 years old). Due to the invalidation of female-based sexualities, combined with the heightened guardedness of aging communities, studies on older lesbian's experience of aging are scarce (Ristock, 1991; Musingarimi, 2008). Due to

these circumstances this review had to use a collaboration of LGB³ papers and held little restrictions on participant criteria.

Keywords/Search Terms

Female Aging, Older Lesbians, Lesbian Gerontology, Lesbian Phobia, Sexual Fantasies of Women and Men, Lesbian Aging Health (See Figure 1 below for more details).

Sources

Sources included both quantitative and qualitative methods such as, meta-analyses, multivariable linear/logistic regressions, interviews, and primary research studies.

Search Strategy

Listed below are the seven scientific literature databases used to identify relevant journals that were critical to this evidence synthesis:

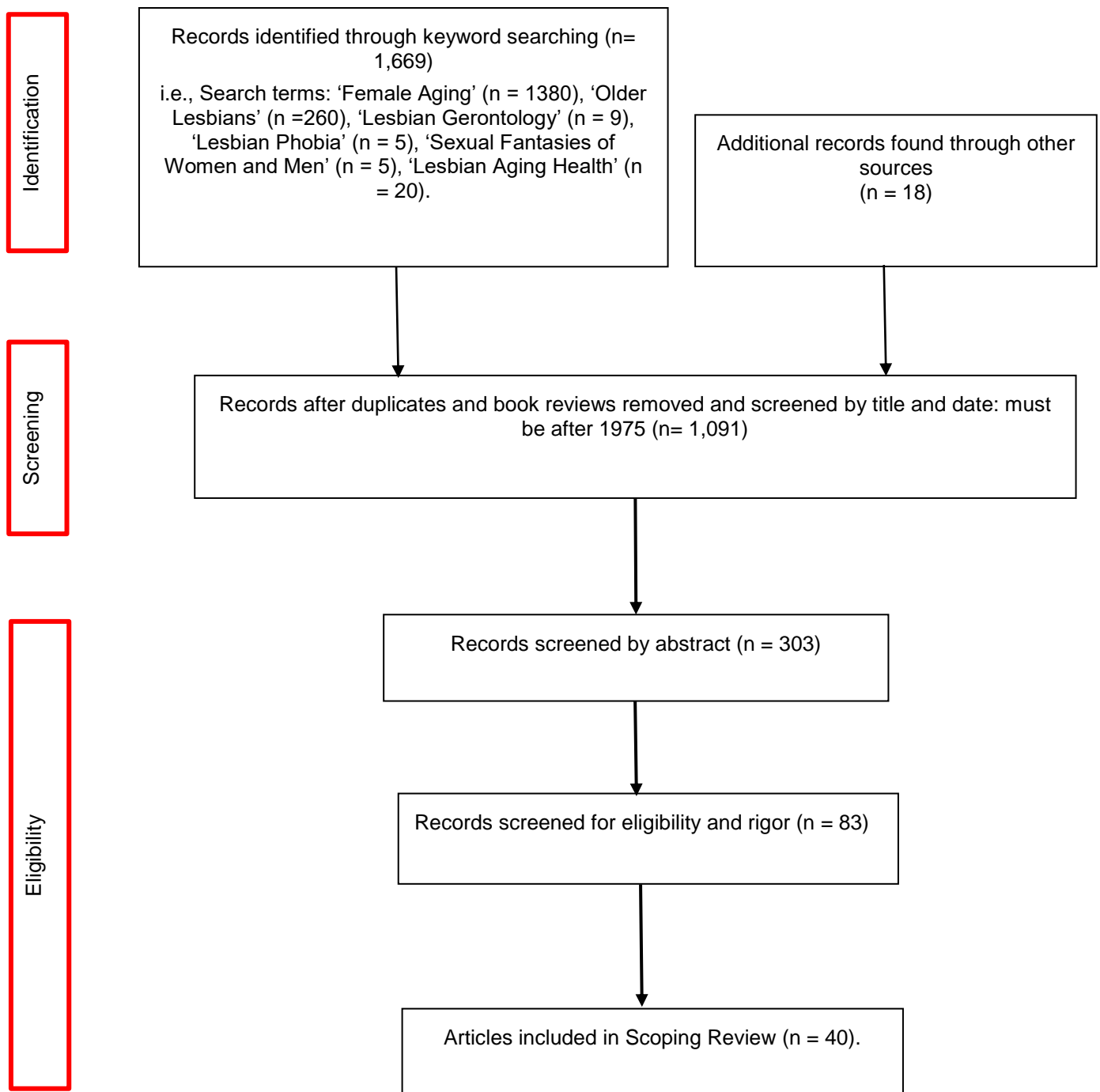
- Science direct: Elsevier's platform of peer-reviewed scholarly literature, has over 1.2 million articles varying on Physical sciences and engineering, life sciences, health sciences and social sciences and humanities.
- Summon: University of Huddersfield Library Services, consisting of books, journals, and articles over multiple disciplines.
- Routledge: Taylor and Francis Group: Includes scholarly articles on Humanities, Social Sciences, Behavioural Sciences, Science, Technology and Medicine sectors. Currently one of the world's leading publishers of scholarly journals, books, eBooks, textbooks, and reference works.
- SAGE Journals: Releases more than 1,000 peer reviewed journals across all disciplines.
- JSTOR: Expansively covers nine different disciplines with a large focus on social sciences, including gender studies and psychology.
- APA PsycNet®: Psychology based advanced search engine covering 5,330,343 peer reviewed journal articles and book chapters.

³ LGB: Lesbian, Gay, Bisexual.

- ResearchGate: A science based collaborative professional search engine, founded and endorsed by Dr. Ijad Madisch and Dr. Sören Hofmayer, and computer scientist Horst Fickenscher.

Search methods included the filtering of language (searching for English language, or translated copies only), dates (must be published after 1975) and must be full-text documents. Studies were then reduced down based on their contribution and application to the field, effectiveness of analysis, and rigor – papers that had little theoretical backing were dismissed. Out of 1,686 search results only 40 were used in the construction of this scoping review (*See Figure 1 below for detailed breakdown*). Additionally, seventeen sources were found from alternate strategies, using expert opinion/advice, and in-text citations, often defying the date filter of 1975 and beyond e.g., Kehoe (1968).

Figure 1: Flow Diagram of Source Selection



SECTION TWO: LITERATURE REVIEW

This section will evaluate the literature surrounding older lesbian's identity and aging, identifying themes and popular debates to understand and highlight the gaps in the current knowledge, and present how the current research will contribute to the area. Finally, this review will be used to develop a theoretical framework and methodology for the current research, through evaluating other strategies and theories in order to build a strong, comprehensive piece of research.

Figure 2: Table of Literature Included in Scoping Review

	1	2	3	4	5	6	7
AUTHORS	Hunter Alessi, Bonnie Ahn, Heidi Kulkin, and Mary Ballard	Chris Alrnvig	Kim Bartholomew and Leonard M. Horowitz	Stephen Brady and Wilma J. Busse	Vivienne C. Cass	Vivienne C. Cass	Laura Hurd Clarke and Meridith Griffin
YEAR	2011	1982	1991	1994	1979	1984	2008
COUNTRY	USA	USA	Canada	USA	Australia	Australia	UK
RIGOR	Medium	Medium	Medium	Medium	Medium	Medium	Medium
DESIGN	The use of the Lesbian Identity Questionnaire (LIQ; Swann & Spivey, 2004) and the Self-Report Attachment Scale: The Four Category Model (Bartholomew & Horowitz, 1991)	Book: Review of literature	4-Stage Model of Attachment Styles	Questionnaire and the use of the Homosexual Identity Formation (HIF) model proposed by Cass in 1979.	6-Stage Model of Homosexual Identity Formation	Assesses the Validity of 6-Stage Model Of Homosexual Identity Formation	In-depth interviews, 3 hours in duration, open ended questions
PARTICIPANTS	114 Lesbian Women.	N/A	40 Females, 37 Males, aged 18-22 years old.	N/A	N/A	N/A	44 women aged 50 to 70 years
CITATION	Alessi, H., Ahn, B., Kulkin, H., & Ballard, M. (2011). An exploratory study: Lesbian identity development and attachment and attachment style. <i>Retrieved on August, 12, 2011.</i>	Alrnvig, C. (1982). <i>The invisible minority: Aging and lesbianism.</i> Utica College of Syracuse University.	Bartholomew, K., & Horowitz, L. (1991). Attachment styles among young adults: A test of the 4-stage model. <i>Journal of Personality and Social Psychology, 61</i> (2), 226-244.	Brady, S., & Busse, W. (1994). <i>The Gay Identity Questionnaire: A brief measure of homosexual identity formation.</i> <i>Journal of Homosexuality, 26</i> (4), 1-22.	Cass, V. C. (1979). Homosexual identity formation: A theoretical model. <i>Journal of Homosexuality, 4</i> (3), 219-235.	Cass, V. C. (1984). Homosexual identity formation: Testing a theoretical model. <i>Journal of sex research, 20</i> (2), 143-167.	Clarke, L. H., & Griffin, M. (2008). Visible and invisible ageing: Beauty response to ageism. <i>Ageing and Society, 28</i> (5), 653.

	8	9	10	11	12	13	14
AUTHORS	Christian Lalive d'Epinay, in collaboration with Jean-Francois Bickel	Erik H. Erikson	Erik H. Erikson	Sarah G. Gabbay & James J. Wahler MS	Ning Hsieh & Hui Liu	Jennifer M Jabson Tree, PhD, MPH, Joanne G Patterson, PhD, MSW, MPH, Daniel P Beavers, PhD, Deborah J Bowen, PhD	Monika Kehoe
YEAR	1995	1968	1963	2002	2021	2020	1986
COUNTRY	Switzerland	USA	USA	USA	USA	USA	USA
RIGOR	Medium	High	High	Medium	Medium	Medium	Medium
DESIGN	Report	Essays in ego psychology, based on papers written from 1951 to 1967	Essays and theories in ego psychology, based on past theories and papers	Literature Review	Quantitative analysis on the 2015–2016 National Social Life, Health, and Aging Project Survey	Multivariable linear and logistic regression tested associations between sexual orientation and indicators of successful, effective, and optimal aging-well.	Questionnaire
PARTICIPANTS	N/A	N/A	N/A	N/A	3,567 survey sample	Data were from the Women's Health Initiative (N = 15,691; heterosexual n = 15,002, lesbian n = 440, bisexual n = 249) extension study (split into two age groups: 60–74 years old and 75+).	50 lesbians, 65 to 85 years of age
CITATION	d'Epinay, C. L., & Bickel, J. F. (1995). Retirement: In Preparation for aging (pp. 39-54). Springer, Boston, MA	Erikson, E. H. (1968). <i>Identity: Youth and crisis</i> (No. 7). WW Norton & company.	Erikson, E. H. (Ed.). (1963). <i>Youth: Change and challenge</i> . Basic books.	Gabbay, S. G., & Wahler, J. J. (2002). Lesbian aging: Review of literature. <i>Journal of Gay & Lesbian Social Services</i> , 14(3), 1-21.	Hsieh, N., & Liu, H. (2021). Social relationships and loneliness in late adulthood: Disparities by sexual orientation. <i>Journal of Marriage and Family</i> , 83(1), 57-74.	Jabson Tree, J. M., Patterson, J. G., Beavers, D. P., & Bowen, D. J. (2020). What is successful aging in lesbian and bisexual women? Application of the aging-well model. <i>The Journals of Gerontology: Series B</i> .	Kehoe, M. (1986). Lesbians over 65: A triply invisible minority. <i>Journal of Homosexuality</i> , 12(3-4), 139-152.

	15	16	17	18	19	20	21
AUTHORS	John Alan Lee	Elizabeth W. Markson	Simone Pennec	Pasqualina Perrig-Chiello	Kenneth Plummer	Anne Quéniart and Michèle Charpentier	Carla E Randall
YEAR	1977	2003	2004	2001	1975	2012	1989
COUNTRY	USA	USA	France	Switzerland	UK	Canada	USA
RIGOR	Medium	Medium	Medium	Medium	Medium	Medium	Medium
DESIGN	3- Stage Model of Homosexual Identity Formation	Book: Report	Literature Review	Literature Review	Theory/Literature Review	Qualitative analysis of 25 in-depth interviews conducted with three generations of older women	Quantitative analysis on a questionnaire with a modified Likert scale
PARTICIPANTS	N/A	N/A	N/A	N/A	N/A	25 Québec Older women between 65-85+	100 BSN Educators
CITATION	Lee, J. A. (1977). Going public: A study in the sociology of homosexual liberation. <i>Journal of Homosexuality</i> , 3, 49-79.	Markson, E. W. (2003). CHAPTER THREE THE FEMALE AGING BODY FILM: Aging bodies: Images and everyday experience, 77.	Pennec, S. (2004), Les tensions entre engagements privés et engagements collectifs, des variations au cours du temps selon le genre et les groupessoci aux. <i>Lien social et Politiques</i> , (51), 97-107.	Perrig-Chiello, P. (2001). Images sexuées de la vieillesse: entre stéréotypessocial et auto-définition. <i>Retraite et société</i> , (3), 69-87.	Plummer, K. (1975). <i>Sexual stigma: An interactionist account</i> . London, England: Routledge & Kegan Paul	Quéniart, A., & Charpentier, M. (2012). Older women and their representations of old age: a qualitative analysis. <i>Ageing and society</i> , 32(6), 983.	Randall, C. E. (1989). Lesbian phobia among BSN educators: A survey. <i>Journal of Nursing Education</i> , 28(7), 302-306.

	22	23	24	25	26	27	28
AUTHORS	Raphael, & Robinson (Meyer)	Micheal R. Rose	Parsley Power Smith	Gary L. Stein, Nancy L. Beckerman & Patricia A. Sherman	Stephanie K. Swann and Christina A. Spivey	Andrea Waling PhD, Anthony Lyons PhD, Beatrice Alba PhD, Victor Minichiello PhD, Catherine Barrett PhD, Mark Hughes PhD, Karen Fredriksen-Goldsen PhD, Samantha Edmonds MIR, MPPP, MSoc Admin	Jacalyn A. Claes & Wayne Moore
YEAR	1988	1991	1992	2010	2004	2019	2000
COUNTRY	USA	UK	UK	USA	USA	Australia	USA
RIGOR	Medium	Medium	Medium	Medium	Medium	Medium	Medium
DESIGN	Observations, Interviews	Book: Report	Observation/ Interpretation of Case Material	Qualitative methods, Focus groups, Thematic analysis	McCarn and Fassinger's (1996) model to examine self-esteem at the different phases of participants sexual identity development	A thematic analysis on interviews	Literature Review
PARTICIPANTS	20 lesbian women, ages 50 to 73	N/A	N/A	16 participants (4 women, 12 men) aged from 60 to 84.	205 lesbian or 'questioning' females, 16-24 years old	33 Participants, 14 cisgender gay men and 19 cisgender lesbian women.	N/A
CITATION	Raphael, & Meyer, M. (1988). The old lesbian: Some observations ten years later. <i>The sourcebook on lesbian/gay health care</i> . Washington DC. National Lesbian and Gay Health Foundation pp68-72.	Rose, M. R. (1991). <i>Evolutionary biology of aging</i> . New York.	Smith, P. P. (1992). Encounters with older lesbians in psychiatric practice. <i>Sexual and marital therapy</i> , 7(1), 79-86.	Stein, G. L., Beckerman, N. L., & Sherman, P. A. (2010). Lesbian and gay elders and long-term care: Identifying the unique psychosocial perspectives and challenges. <i>Journal of Gerontological Social Work</i> , 53(5), 421-435.	Swann, S. K., & Spivey, C. A. (2004). The relationship between self-esteem and lesbian identity during adolescence. <i>Child & Adolescent Social Work Journal</i> , 21(6), 629- 646.	Waling, A., Lyons, A., Alba, B., Minichiello, V., Barrett, C., Hughes, M., ... & Edmonds, S. (2019). Experiences and perceptions of residential and home care services among older lesbian women and gay men in Australia. <i>Health & social care in the community</i> , 27(6), 1251-1259.	Claes, J. A., & Moore, W. (2000). Issues confronting lesbian and gay elders: The challenge for health and human services providers. <i>Journal of health and human services administration</i> , 181-202.

	29	30	31	32	33	34	35
AUTHORS	Eli Coleman	Gilbert Herdt	Linda La Salle and Robert Rhoads	Aaron T Gardner, Brian de Vries, Danyte S Mockus	Darrell C. Greene & Paula J. Britton	Alexander McKay	Lori E. Ross, Travis Salway, Lesley A. Tarasoff, Jenna M. Mackay, Blake W. Hawkins & Charles P. Fehr
YEAR	1981-1982	1993	1992, April	2014	2015	2006	2018
COUNTRY	USA	USA	USA	USA	USA	Canada	Canada
RIGOR	Medium	Medium	Medium	Medium	Medium	Medium	Medium
DESIGN	5 Stage model for individuals with a predominantly same-sex orientation	Book	Survey on lesbian, gay, and bisexual issues	Questionnaire	Warmth and safeness were measured on a 21-point scale: Early Memories of Warmth and Safeness Scale (EMWSS; Richter et al., 2009).	Literature Review	A Systematic Review and Meta-Analysis
PARTICIPANTS	N/A	N/A	1,952 faculty and staff	575 Gay males, Lesbians, Bisexual, Transgender male-to-female, Straight males, Straight females.	523, 34% lesbian/gay women, 24% gay men, 17% bisexual, 12% transgender, and 13% queer.	N/A	N/A
CITATION	Coleman, E. (1982). Developmental stages of the coming out process. <i>Journal of Homosexuality</i> , 7(2-3), 31-43.	Herdt, G. (Ed.). (1993). <i>Gay culture in America: Essays from the field</i> . Beacon Press.	La Salle, L. A., & Rhoads, R. A. (1992, April). Exploring campus intolerance: A textual analysis of comments concerning lesbian, gay, and bisexual people. Paper presented at the Annual Meeting of the American Educational Research Association, San Francisco, CA	Gardner, A. T., de Vries, B., & Mockus, D. S. (2014). Aging out in the desert: Disclosure, acceptance, and service use among midlife and older lesbians and gay men. <i>Journal of Homosexuality</i> , 61(1), 129-144.	Greene, D. C., & Britton, P. J. (2015). Predicting adult LGBTQ happiness: Impact of childhood affirmation, self-compassion, and personal mastery. <i>Journal of LGBT Issues in Counseling</i> , 9(3), 158-179.	McKay, A. (2006). Gays, lesbians, and bisexuals are coming out earlier in life. <i>The Canadian Journal of Human Sexuality</i> , 15(1), 50-52.	Ross, L. E., Salway, T., Tarasoff, L. A., Mackay, J. M., Hawkins, B. W., & Fehr, C. P. (2018). Prevalence of depression and anxiety among bisexual people compared to gay, lesbian, and heterosexual individuals: A systematic review and meta-analysis. <i>The Journal of Sex Research</i> , 55(4-5), 435-456.

	36	37	38	39	40
AUTHORS	Beth Montemurro and Jenna Marie Siefken	Hillary Mantel	Rosemary-Claire Collard	Betty Kaklamanidou	E. J. R. David
YEAR	2014	2009	2012	2012	2013
COUNTRY	USA	UK	Canada	Greece	USA
RIGOR	Medium	Low	Medium	Medium	Medium
DESIGN	Undisclosed Qualitative Analysis	Newspaper Article	Qualitative Research	Literature Review	Book
PARTICIPANTS	84 women in their 20's to 60's.	N/A.	Two Women	N/A.	N/A
CITATION	Montemurro, B., & Siefken, J. M. (2014). Cougars on the prowl? New perceptions of older women's sexuality. <i>Journal of Aging Studies</i> , 28, 35-43.	Mantel, H. (2009). Women over 50 – the invisible generation I. Hilary Mantel. Retrieved 16 July 2021, from https://www.theguardian.com/commentisfree/2009/aug/04/hilary-mantel-older-women	Collard, R. C. (2012). Cougar figures, gender, and the performances of predation. <i>Gender, Place & Culture</i> , 19(4), 518-540.	Kaklamanidou, B. (2012). Pride and prejudice: Celebrity versus fictional cougars. <i>Celebrity Studies</i> , 3(1), 78-89.	David, E. J. R. (Ed.). (2013). <i>Internalized oppression: The psychology of marginalized groups</i> . Springer Publishing Company.

This review follows three key topics: lesbian identity and formation, aging processes, and the impact of minority elements on aging i.e., age, biological sex, and sexual orientation. Figure 2 above displays the literature that was utilised to establish key theories and aided the development of current understandings of these subjects, introducing the titles and logistical background of each study before described in further depth below.

In contemporary Western society, living without concealment or deception of one's sexuality is considered much more common than previous years, with the Office for National Statistics (2018) seeing an increase of 1.4% identifying as non-heterosexual in the UK, up from 1.1% in 2014. However, the demographic of older lesbians has been greatly ignored regarding the field of gerontology and the observation of LGBT+ studies (Ristock, 1991). This statement was further supported by Claes and Moore (2000) who claimed older lesbians lack public and literary representation in comparison to gay males, and when finally acknowledged are often based on stereotypical, discriminatory claims.

Considering the aforementioned point, one could argue that older lesbians have never been visible within both literature and the external world, with gay men being validated by the legal recognition of Karl-Maria Kertbeny (1824 - 1882) versus the ignorance towards labelling or even recognising the existence of same-sex love between women.

Gay men were first referred to as 'homosexual' by Karl-Maria Kertbeny (1824 - 1882) in the 19th century, combining the Greek word 'homo' (translates to same) with the Latin 'sexus' (translates to sex), used in opposition to Germany's anti-sodomy laws⁴. Due to the male centric focus at the time, lesbians (known as invert⁵) were not included in anti-sodomy laws and written off as a performance or simply just myth (Smith, 1992). Instead, the term 'lesbian' was adopted, derived from Greek poet Sappho of Lesbos, who openly expressed her affection for women and female

⁴ Legislations that outlawed the penetration of one man by another, e.g., The Sexual Offences Act (1967) in the UK that outlawed anal sex between men, often referred to by LGBT+ rhetoric such as, 'buggery'.

⁵ An outdated term used for lesbian enforced by doctors who believed same-sex attraction was "sexual inversion", suggesting that identifying as non-heterosexual contradicted one's anatomical sex (Norton, 2016).

empowerment within her lyric poetry. Whilst Sappho has become a staple in lesbian culture, her sexuality and link to lesbianism has been contested due to there being no solid proof of her sexuality, only suggestions from her limited 650 lines of 'long lyric' poetry (Lardinois, 1989). Sadly, little of her work remains as Sappho's work was ordered to be burned in Rome and Constantinople in 1073 by the orders of Pope Gregory VII to suppress lesbian love poetry (Ovenden, 2020). Despite contemporary Western society having progressed to be more open and accepting since the abolition of anti-LGBT laws such as Gross Indecency, this suppression and stigmatised view on female-on-female sex still remains; with Smith (1992) stating current mainstream conceptualizations of women who are attracted to other women to be taboo, deviant, performative and hypersexual, or as a pornographic performative act for men.

Whilst 1.4% of the UK population are estimated to be gay or lesbian (*The Office for National Statistics, 2018*), it has been suggested that older lesbians tend to conceal their identity more due to growing up in heightened homophobic social climates, often being subject to legal, medical, and religious discrimination, and/or family estrangement (Deevey, 1990). Despite lesbians not being the centre of attention in legislative attacks on same-sex relations, this ignorance towards the existence of lesbians has had lasting impact on the older community, causing them to feel invalidated and invisible (Kehoe, 1986).

Lesbian Identity and Formation

'Coming out' is the social process of revealing one's sexuality (Coleman, 1982), marking the beginning of one's LGBT+ identity (Herdt, 1992) and promotes a positive sense of self (Cass, 1979). However due to the vulnerability that is involved with 'coming out' (La Salle & Rhoads, 1992) many individuals have concealed or waited long periods of time to disclose their identity. The literature consistently shows that age is associated with low levels of disclosure, therefore combined with the effects of a conservative political environment, many older lesbians decide against revealing their true sexuality until reaching the stages of middle to late adulthood, with some individuals never 'coming out' (Gardner, de Vries & Mockus, 2014). Regardless of 'coming out', Raphael and Meyer (1988) noted that lesbian's sexuality takes a very directive role in their life and relationships irrespective of

whether they have revealed their orientation or not, for example, acting in a particular way that is unusual, avoiding certain locations and/or conversational topics.

Studies show that those who experience an earlier, positive, and loving 'coming out' process tend to live happier as they have access to nurturing and protective environments, better sense of self and therefore experience less hardships (Cass, 1979, Greene & Britton, 2015). 'Late bloomers' are defined as those who adopt their lesbian identity in older age often after the termination of a heterosexual marriage and/or having mothered children (Gabbay, 2002). There is no particular age for the criteria of a 'late bloomer' lesbian however, media and pop culture suggest it to be around the age of 30 and beyond. Additionally, in the lesbian community authenticity and pride is highly valued, therefore concealing one's identity may be perceived as deceptive or not being proud, perhaps explaining why "late bloomers" can often struggle to find their place in the community (Raphael & Meyer, 1988). However, with the increased social acceptance of LGBT+ identities in western society, the "late-bloomer" phenomenon is slowly decreasing, as individuals now tend to disclose their sexuality earlier in their lives (McKay, 2006).

The investigation into the identity formation of homosexual and lesbian individuals was late to begin in comparison with heterosexual individuals, with the first major theories being released in the 1970's. Whilst the first two major theories in non-heterosexual identity formation by Plummer (1975) and Lee (1977) do not relate to lesbian identity, they paved the way for researchers like Cass (1979) who formulated the first, comprehensive theory of lesbian identity; and therefore will be outlined below.

The first theory in non-heterosexual identity formation by Plummer (1975), used a social interactionist perspective, following a four-stage model resulting in the stability of one's identity. Plummer (1975) believed that issues pertaining to the stabilisation of one's homosexual identity was due to sociological and psychological issues of secrecy, and poor self-esteem from the impact of isolation. Lee (1977) on the other hand observed the process through three stages, signification, coming out, and going public. Lee (1977) found that many individuals never reached the final stage of this process, going public, due to shame and other self-deprecating

feelings. This theory stood as the key formulation of identity until Cass (1979) shared her cognitive, affective, and behavioural model.

Using a psychosocial perspective (the combination of social factors and individual thoughts/behaviour) Cass (1979) generated six developmental stages: Identity Confusion, Identity Comparison, Identity Tolerance, Identity Acceptance, Identity Pride, and Identity Synthesis⁶. In developing this theory, Cass (1984) used 103 men and 69 women who identified as either gay or lesbian and were in one of the six stages listed above. Cass (1979) developed and disseminated a questionnaire named 'the Stage Allocation Measure' in which the six stages were defined in paragraph formats for the participants to self-allocate themselves. Additionally, the 'Homosexual Identity Questionnaire' was used to provide more information into the six stages; focusing on the cognitive, behavioural, and affective dimensions involved. The results of this research were positive for Cass's (1979) model for gay and lesbian identity formation; however, it was critiqued for its convoluted and strung-out steps; and instead, it was suggested that identity formation may be in four stages, rather than the proposed six (Cass, 1984).

Following this, future research then began to refocus on males with Brady and Busse (1994) validating Cass's (1979) model and adapting it to solely gay men. Because of this shift of focus in identity studies, lesbians have acquired little attention amongst the literature, causing a significant impact on their identity and representation. This lack of representation has caused role confusion, and the onset of poor mental health such as low self-esteem, anxiety, depression, decreased understanding of self, disconnection between peers and community, and denial of one's sexuality (Ross, Salway, Tarasoff, MacKay, Hawkins, & Fehr, 2018).

However, 32 years after Cass (1979), one of the major theories in lesbian identity was formulated by Alessi, Ahn, Kulkin, and Ballard (2011). Alessi et al., (2011) recruited 114 lesbians aged from 18-55, and were given a questionnaire based on their identity components, using the following self-report measures: the Self-Report Attachment Style Scale (Bartholomew & Horowitz, 1991) and the Lesbian Identity Questionnaire (LIQ; Swann & Spivey, 2004). The main takeaway

⁶ A stage in an individual's life where identity disclosure is no longer an issue.

from this experiment was the realisation of the impact of attachment. Those who had established secure attachments with their caregivers had gone onto successfully accept their lesbian identity, being able to healthily balance their relationships and become romantically involved without feeling vulnerable and openly express their identity in all areas of their life. However, those who were not securely attached showed symptoms of fearing intimacy, socially avoidant behaviour, a preoccupation with relationships, counter-dependency, and self-shame (Alessi et al., 2011). Alessi et al., (2011) went on to state that future studies involving lesbian identity should aim to be qualitative in their methodology to balance out the overhaul of quantitative studies on this subject, hence the qualitative methodology of the current research.

Whilst the current study is not entirely an identity-based research, it incorporates components of the self and aims to understand how participants feelings towards their identity are affected by various personal, and environmental variables. In line with the focus of the current study, this review will now detail relevant literature involved within both heterosexual and lesbian aging, defining the parameters of this phenomenon, providing a background into this area, and identifying gaps within the literature.

Aging Processes

Aging is defined as *“a persistent decline in the age-specific fitness components of an organism due to internal physiological deterioration”* (Rose, 1991); for instance, the impact of molecular and cellular damage over one’s lifespan. Despite the biological focus in this definition, aging can occur over two further states: psychological and social. Generally, most evolutionary biologists state that aging is a physiological function which increases the rate of age-specific complications which inevitably increase the likelihood of mortality. In psychology the experience of aging is usually described as successful or unsuccessful; ‘successful aging’ has been defined by Rowe and Kahn (1987, 1997) as “high physical, psychological, and social functioning in old age without major diseases”, therefore ‘unsuccessful’ is usually associated with negative attitudes, and the onset of disease.

One of the most popular theories on aging process was by Erikson (1963, 1968), who proposed a lifespan model of development, explaining the psychosocial

factors that are encompassed within aging; trust vs. mistrust (0-1.5 years), autonomy vs. shame (1.5-3 years), initiative vs. guilt (3-5 years), industry vs. inferiority (5-12 years), ego identity vs. role confusion (12-18 years), intimacy vs. isolation (18-40 years), generativity vs. stagnation (40-65 years) and ego integrity vs. despair (65+ years). As one successfully passes each stage, Erikson (1963, 1968) stated they achieve a virtue that aids the completion of their personality e.g., hope, will, purpose, competency, fidelity, love, care, and wisdom. Passing through these stages impacts individuals view of themselves and their attitude towards their life/death, which in turn determines the outcome of their aging i.e., success or failure.

As this study focuses on an older demographic, only stage seven and eight will be described in further detail. In stage seven (generativity vs. stagnation), one typically establishes their career and usually has started their own family (Erikson, 1963, 1968). Erikson (1963, 1968) believed that individuals in this stage usually achieve life objectives such as raising their children, and/or being independent and productive. Following this, Erikson (1963, 1968), went on to state that if one does not achieve any of these goals it can result in stagnation, however if one is successful, they achieve the virtue of care and move onto the next stage. The final stage (integrity vs. despair) occurs as one enters senior age; in this stage the body and mind slows down, and one begins to reflect on their life. Erikson (1963, 1968) believed if one is successful in this stage, they will achieve wisdom, increasing the likelihood for successful aging, and happiness - which in turn impacts one's attitude towards the transition of death, increasing comfort and closure of one's life, without fear. However, according to Erikson's (1963, 1968) theory, if one reflected negatively on their life, feeling that they had failed, had regret, or did not achieve life goals, it would heavily affect their health as one reaches retirement age. Therefore, one begins to question the impact of sexuality, and whether this would affect one's ability to 'age successfully'.

Almvig (1982) expressed that older lesbians tend to follow the lifestyle of 'coping', as a consequence of repeated prejudice and oppression; however, Almvig (1982) also went on to state that this could increase resilience to personal issues, durability (i.e., the ability to better withstand prejudice), and independence regarding life stressors like aging or coming to terms with death/illness. Almvig (1982) believed

this increased independence encouraged a better sense of self and higher life satisfaction rates, suggesting that older lesbians are more likely to be in a position whereby they create their own strong family/friend circles, a successful social life (i.e., stronger social ties), and a freer, more responsible, self-reliant attitude to life, due to having less desire to fit particular society standards. Kehoe (1986) also supported these claims, stating that older lesbians are survivors, and because of their hardships, are better equipped to handle themselves in later life than heterosexual women, having a stronger sense of self, and a more 'successful' aging experience than their heterosexual counterparts.

Jabson Tree, Patterson, Beavers and Bowen (2020) demonstrated the correlation between age, life satisfaction, the self and 'successful' aging, a critical paper in understanding older lesbians aging experience in more depth and what factors may be encompassed in their health outcomes. Participants of this study consisted of lesbian and bisexual women drawn from The Women's Health Initiative (N = 15691; heterosexual, N = 15002, lesbian N = 440, bisexual N = 249) and were split into two stratified groups; one group aged 60-74 years old and the other 75 years and above - heterosexual female data was not used. A multivariable linear and logistic regression analysis was used in conjunction with the aging-well model to determine a link between sexuality and successful aging.

The results showed that lesbians aged 60-74 shared positive experiences, higher rates of life enjoyment, social support, and self-mastery than what was expected of their heterosexual counterparts; meanwhile, lesbians over the age of 75 shared more negative experiences; lower rates of happiness and a higher chance of relying on a nursing home. This difference between older and younger participants suggests there is a lack of support as one ages, perhaps because as they are older, they are dealing with more health issues which can often equate to less mobility. However due to the quantitative nature of this study these results lack depth, leaving one to speculate the reasoning behind older lesbians incurring unsuccessful aging. Additionally, this study noted a lack of internal and external healthcare resources for female sexual minorities perhaps why older participants showed to have a more negative sense of self. From this study, Jabson Tree et al., (2020) concluded that aging-well is not an identical experience for all women and acknowledged that health

promotion programmes may be effective for lesbian/bisexual individuals and called for an increase of social support and self-mastery to promote personal growth and wellness in older ages. Whilst this study achieved interesting results, it does not provide enough depth to comprehensively explain why the older group reported much lower rates relying on speculation rather than fact, a dilemma that is too complex to be quantified numerically and must be explored through a qualitative approach.

The Effect of Minority

In line with the research aims, this sub-section will explore the literature surrounding the minority characteristics of older lesbians. Kehoe (1986) is the major theorist in this area describing older lesbians as being subject to a 'triple invisibility minority status', consisting of age, biological sex and sexuality.

Kehoe (1986) gathered questionnaire responses from 50 participants aged 65 to 85 years old, who identified as lesbian recording: educational backgrounds, occupation, financial position, and self-perceptions of their mental and physical health including any psychological/social concerns. Kehoe (1986) claimed that due to these minority factors, older lesbians have become invisible, impacting one's sense of self and social support; however, claimed that older lesbians became both emotionally and socially stronger from this. Kehoe (1986) went on to label older lesbians as survivors, having an increased resilience to hardships and stress, being able to tackle life issues better than their heterosexual counterparts. Despite this, Kehoe (1986) stated that older lesbians coped with aging in a typical manner, no different than their heterosexual counterparts having a balanced personality, with their emotions correctly proportioned/regulated to effectively deal with issues. However, this statement has since been revised by newer researchers such as Smith (1992), Gabbay (2002), Stein, Beckerman, and Sherman (2010), Waling et al., (2019), and Hsieh and Liu (2021), who stated older lesbians to be disadvantaged by their sexuality, having a much more negative aging experience, all of which will be discussed later in this section.

Due to the age of Kehoe's (1986) study, it is possible that participants may have withheld data from the researcher due to the conservative social climate of the

time period; perhaps explaining why newer research illustrates lesbian aging as negative, with participants speaking in rawer detail about their hardships. Finally, Kehoe's (1986) study lacked depth in fully exploring minority elements, leaving the reader to speculate the extent of these issues, and question which variable is the most influential in a person's life. The next sub-sections will endeavour to explore the issues of sexuality, age, and biological sex further, first focusing on biological sex then leading into sexuality.

Women and Aging

Hilary Mantel (2009) labelled women over fifty, the 'invisible generation' suggesting that the only way to be visible was through youthfulness. Whilst aging is universal, women are targeted for their 'declining' appearance, being labelled the 'mature' woman, and inevitably stripped of their sexual identity and desirability (King, 2013). According to the literature, as women surpass the typical age of reproduction (around 51 years) they 'lose' their femininity and are instead perceived as sexless and therefore, invisible (Claes & Moore, 2000). Because of this, women are now attempting to look much younger, having several anti-aging cosmetic surgeries and using ambiguous euphemisms such as 'feeling fantastic at fifty' to protect them of being branded 'old' (King, 2013). As women's visibility in society is so strongly linked with impermanent features such as youth, it has caused a surplus in beauty products and surgeries to maintain a younger façade, and become valued once again in the public eye, creating great strain on female's perception of the self and identity (Perrig-Chiello, 2001, trans, Clarke & Griffin, 2008).

Furthermore, King (2013) stated that unless women maintain a youthful appearance, they are less desirable and therefore less relevant. Having said that, King (2013) also stated that if women try too hard to mirror their youth, they are also critiqued for dressing inappropriately or desperately longing for the male gaze⁷. This harsh dichotomy creates a stressful atmosphere surrounding female aging, suggesting it to be largely negative and observed through a highly critical lens, and serving the male gaze. Furthermore, the effect of a male dominated society has

⁷ The male gaze refers to the depiction of women through a masculine, heterosexual perspective, framing women as sexual objects for the gratification of cisgender, heterosexual, males (Eaton, 2008).

caused distinct differences between males and females in regard to their experiences of aging as presented in popular phrases like 'Men age like wine. Women age like milk'; or how in media older males are the lover, labelled as gentlemen/silver foxes meanwhile, it is rare, even 'vulgar' for the lover to be an elderly woman (Markson, 2003). This emphasis on women's age and youthfulness, suggests that being visible is only achieved by being young, and therefore has a time limit, meaning women must fit into rigid conventions of femininity in order to be visible.

Quéniart and Charpentier (2012) analysed the representations of aging amongst three different generations of older females, aged 65–74, 75–84 and 85 and older; single, married, with child and without. Twenty-five in-depth interviews were conducted across participants, the main results showed negativity against aging, with participants unanimously refusing to be categorised into the label of 'older/elderly women'. Additionally, participants expressed denial about their age when associated with this label, due to the stigma of being perceived as fragile, unattractive, burdened, isolated and/or dependant on others; issues that have arisen from persistent stereotypes. Because of these social prejudices linked with older age, participants tended to reject elements of their identity, instead having a greater focus on maintaining a social life, taking care of their appearance, and staying healthy and active. Participants tended to not speak about their age as they felt a burden to society, with some participants referring to themselves as 'society's dead wood' (Quéniart & Charpentier, 2012, p.994).

Despite participants eagerness to hide their age, they could not ignore the body transformations that inevitably occurred with old age, e.g., the presence of wrinkles, or menopause, causing internal incongruence and disconnect between the self and one's identity. Alternatively, old age can offer respite, as stated by Pennec (2004, translated), who claimed retirement allowed women (especially from the baby-boomer period) to distance themselves from the structured, 'housewife' lifestyle they grew up in and to focus on themselves, taking opportunities they were once barred from. However, d'Epinay (1995) added that due to the rigid, sexist structure these women grew up in, where their role was that of pleasing the man (whether that be cooking or sexual aspects), when these women could no longer fulfil that role

(perhaps from complications associated with old age), they lost their life purpose, and therefore lost a fundamental element of their sex/gender identity. Whilst this does not represent contemporary societal standards, it is still relevant to the older generations that are still active members of today's society.

Contrastingly, it seems that older women's sexual identity could be returning in contemporary society. The pop culture term 'cougar' has recently been embraced by the media and younger individuals; describing an older woman who is actively pursuing younger sexual partners (Montemurro & Siefken, 2014). Whilst this term somewhat validates and recognises older women's sexual desire raising awareness on older women's sexual health; one must also recognise this pejorative's damage to older women, actively reinforcing age and gender stereotypes females hoped to escape (Montemurro & Siefken, 2014). Additionally, cultural representations of cougars tend to be very similar to lesbian stereotypes, often deemed hypersexual or dangerous, and often ridiculed by media (Barrett & Levin, 2014; Collard, 2012; Kaklamanidou, 2012).

Montemurro and Siefken (2014) carried out interviews on 84 women in their 20's to 60's, on their view of 'cougar'. Participants felt that this word branded older women as predators and aggressive, or in other words an attack of women's sexual desire - similar to that of lesbian stereotypes. Whilst some found this word a term of endearment or recognition of their sexual desire, given its negative links, it is culturally loaded further damaging perceptions of older female sexuality (Montemurro & Siefken, 2014). When reviewing female literature, it is clear that women encounter several sexist issues when aging. The next section will explore how sexuality affects this experience, exploring the differences between heterosexual and non-heterosexual accounts.

Lesbian's and Aging

Aging has been suggested to be a very feared experience for lesbians (Gabbay, 2002). Gabbay (2002) described older female loneliness as a function of aging, stating that the components of aging such as loss of mobility/energy act as a catalyst for loneliness i.e., no longer being able to attend social gatherings or being too fatigued to organise plans. Additionally, Gabbay (2002) stated that the effects of

homophobia accentuate the effects of loneliness in older lesbians, having little access to support to alleviate or prevent the breakdown of social activity, alongside other overlooked factors that induce isolation, e.g., public perceptions, financial and social constraints. Because of this, Gabbay (2002) claims that older lesbians incur more hardships than their heterosexual counterparts due to the extreme loneliness that can be involved, framing lesbian aging as negative and sequestered. This subsection aims to review the experience of aging as a lesbian, however as stated in 'Section One: Inclusion Criteria', due to the lack of lesbian specific research on aging, this review had to use a collaboration of LGB papers.

Hsieh and Liu (2021) analysed data from a sample of older adults from the 2015–2016 National Social Life, Health, and Aging Project (N = 3,567) exploring the links between loneliness and sexuality. Hsieh and Liu (2021) found that older LGB adults suffered significantly in terms of loneliness in comparison to their heterosexual counterparts - disadvantaged by a lack of identity acceptance amongst similar age groups, lack of friends/higher strain on friendships, a lower chance of having a significant other, and decreased family support. Furthermore, due to many LGBT+ individuals not conceiving children or becoming estranged from their kinships, they lacked meaningful family bonds that are usually present in heterosexual relationships. Additionally, the impact of poorer family support system was far greater than poorer peer relationships such as friends and community; leaving LGB adults to suffer more in terms of loneliness and mental well-being compared to heterosexual adults. In conclusion, because of the increased chance of family grievances in LGB lives, ensuring stronger friendships is essential in reducing loneliness and achieving a more successful aging experience within sexual minorities (Hsieh & Liu, 2021).

Waling et al., (2019) carried out a study in Australia on older lesbians and gay men over 60 (14 cisgender gay men and 19 cisgender lesbian women) based on their attitudes to aging, and their worries surrounding healthcare and residential services with respect to their sexual identity. Results found that elder abuse⁸ was the most prominent worry in this research, inducing anxiety around physical/mental

⁸ Elder Abuse is defined in this study as discrimination towards elderly individuals, i.e., 60 years old and above.

decline, and leaving participants overwhelmed with concerns of lesbian phobia from both staff and residents. Furthermore, participants shared several identity concerns such as, a lack of access to LGBT+ spaces, resulting in a breakdown of social support, a lack of potential partners, and lack of relatability. Due to these circumstances, almost all participants hoped to never need residential care, with several participants using alternative methods to avoid the possibility of needing a residential home. Strategies consisted of, the use of home care services, home renovations, moving to locations with higher numbers of seniors and accessible places, and the even the option of euthanasia. Because of these sexuality specific worries, all participants stated that an LGBT+ friendly facility would be a safer and happier option for their future and would reduce the stress that is associated with sexuality and aging. Waling et al., (2019) further suggested that additional support and education is still needed for care staff and residents, believing that extended education and support would minimise the anxieties surrounding long-term care, and maximise the knowledge and support of care workers.

Similarly, Smith (1992) investigated the first person lived accounts of older lesbians in healthcare, exploring their experience and perceived quality of care. In summary, Smith (1992) discovered that older lesbians felt ostracised when communicating about sex issues in healthcare settings, due to the stigma against lesbian sexual acts combined with the fact they were engaging in sex after the reproductive age (around 51 years). This discrimination towards participants caused many to experience internalised homophobia⁹, with some participants describing public perceptions of themselves as 'abnormal' or 'psychogeriatric'. Additionally, due to fears of being labelled as 'sick' by society, participants stated that they had to reveal their sexuality to healthcare practitioners using unorthodox methods (Smith,1992) creating distance between themselves and healthcare services, resulting in both poor physical and mental health.

Smith (1992) concluded that healthcare is an excessive worry amongst lesbians, often causing disconnect amongst in one's identity. However, Smith (1992)

⁹ Internalised homophobia, or more academically known 'internalised oppression' was defined by E. J. R. David (2014) as "*a set of self-defeating cognitions, attitudes, and behaviors that were developed as one consistently experiences an oppressive environment*"; in simpler terms, it is a cause-and-effect relationship beginning with repeated prejudice and resulting in "a distorted view of oneself and others".

stated that if the practitioner does not present the patient's sexuality as an issue, healthcare concerns could be resolved and positively influence attitudes towards one's identity and attitudes towards aging. Smith (1992) advised for healthcare settings to be retrained to care for older lesbians, concentrating on building inclusive practice in which sexuality is not made the focus. Whilst Smith (1992) was profound in identifying older lesbian specific issues in psychiatric care, this study unfortunately lacked sufficient depth to fully explain older lesbian experiences within generalised healthcare. Additionally, this study failed to report on the overall effect on participants experience of aging and identity, leaving one to question the outcome.

Exploring deeper into the concerns of sexuality and aging, Randall (1989) investigated the prevalence of lesbian phobia in nursing homes, investigating the attitudes of bachelor's degree of Science in Nursing (BSN) Educators. Randall (1989) used a modified Likert Scale, exploring the responses to 48 statements on general demographic data, lesbianism, and lesbian specific issues - including morality and ethical issues, social contact with lesbians, knowledge statements, sexuality/sex related statements and attitudes/normalness of lesbians and lesbian behaviour.

Results showed a mixed response towards lesbians, showing that BSN Educators were not fearful of sexual advances from lesbians and felt comfortable giving treatment. However, results reported high rates of lesbian phobia, with several participants sharing deep-seated homophobic concerns of possible child molestation, and paedophilic allegations. Whilst BSN Educators did not fear for their own welfare, this homophobic rhetoric was popular amongst participants, showing that despite having no threat to themselves, staff were still encouraged to spread false rumours and damage the reputation of lesbians. Additionally, over half of the participants expressed that they felt lesbianism was an 'unnatural expression of human sexuality', and a further 50% revealed they would 'have difficulty communicating with a woman they knew to be lesbian'; questioning whether lesbians can be promised safe, ethical healthcare whilst under the care of a heterosexist staffing. However, in spite of this, one must recognise the age of Randall's (1989) study and whether it is generalisable to present day healthcare staff and attitudes.

Exploring a more contemporary study, Stein, Beckerman, and Sherman (2010) conducted a phenomenological analysis seeking to identify the psychosocial challenges gay and lesbian individuals experience during long-term care. This paper explored the experiences of 16 individuals, 14 of which were White and two of which were African American. In terms of sexuality, four participants were lesbian and 12 were gay males. Participants were allocated into two focus groups, the New York group, consisting of eight older gay men and four older lesbians aged 60-84, and the New Jersey group, consisting of just four older gay men, aged 65-75.

The findings of this study were controversial suggesting a lack of care and support for gay and lesbian elders, expressing great concern surrounding medical aid with respect to their sexual identity. Participants showed similar, consistent issues across all groups, the most popular being neglect/rejection of personal care aid, resulting in ill or threatened health. Unfortunately, this worry was not solitary to healthcare and extended into participants social lives, with many individuals being scared to speak about their sexuality in front of other older individuals due to their 'old fashioned' views and discriminatory habits. Due to these fears, several participants believed it was safer to live falsely as heterosexual to ensure safe, reliable healthcare, avoid discrimination and enter older age with less worry; admitting they would rather live a lie and be treated with dignity by staff/residents, than threaten their health and forced into social isolation. Additionally, participants who were living openly lesbian or gay admitted to having several unassessed needs such as spiritual, cultural, emotional, and social needs; experiencing poor staff treatment, being cut off from social bubbles, refused access to rooms with other same-sex residents, lack of personal care aid and having personal issues or needs not being taken seriously. Alongside these issues, participants complained about the lack of access to partners, expressing that they felt romantically isolated and unable to express one's sexual identity.

To conclude this study, participants confirmed the beliefs of Kehoe (1986), claiming to be discriminated against for numerous reasons aside from their sexuality e.g., biological sex, race, or age; highlighting how minority issues can become intertwined and create unique circumstances. Following these issues, participants called for new, effective staff training, a preference for lesbian and gay friendly living

arrangements and improvements for all residents, suggesting that sexuality is just one issue amongst a complex classification of problems – as focused on in the current study.

Stein, Beckerman, and Sherman (2010) were unmatched at the time of publishing to release such raw, sensitive issues into the field of gerontology. However, one must highlight the poor choice in methodology and how this may impede its outcome. Whilst focus groups offer comfort and create a safe, understanding atmosphere, it would be ignorant to accept this paper as an accurate depiction of each participants experience and feelings. Focus groups tend to create a group dynamic that can easily derail participants conversation, causing difficulty in interpretation and deciphering group opinion from individual opinion. The group dynamic can often lead participants to agree with the popular consensus rather than voice their own thoughts which can portray a false narrative for the group. Furthermore, due to the sensitive nature of this study, disagreeing with opinions in a group atmosphere can cause animosity; causing hostility which can lead to participants withholding their true opinions. Because of the looseness of this approach, researchers could often miss novel areas that could be explored due to lack of control or group pressure; resulting in poor representation of lesbian and gay specific issues and lack of depth. Additionally, one must also recognise the poor representation of lesbians in this study, where women only amount to 25% of the participants in comparison to a staggering 75% of gay males – perhaps showing how women's needs and experiences are viewed as insignificant, indifferent, or less important. Finally, gay, and lesbian experiences are grouped together in this study, a somewhat ignorant decision to assume men and women have identical experiences that can be spoken of in such a convoluted, group manner. Despite these pitfalls, this study was effective in demonstrating various key aspects surrounding lesbian aging and identity and must be acknowledged for this.

Closing Points

The main points to emerge from this literature review are that lesbians endure a plethora of hardships that greatly impact their lifestyle and aging experience, with issues stemming from other factors like their sexuality and biological sex. In closing, this review identified several gaps in the literature including, a deficit of knowledge

into the complexities of older lesbians (i.e., how the factors of biological sex, age, and sexuality impact one's lifestyle and aging process), a lack of contemporary research (as seen in Figure 2), and an overall lack of older lesbian accounts (Wolfe, 1992). With regard to the aforementioned points, older lesbians are illustrated to be difficult to access, having little representation in the literature, proving this study to be a valuable asset to the field (Ristock, 1991). There are numerous explored accounts of lesbian issues within psychology e.g., sex, adoption and relationships, however very little account for the experience of aging and identity. In light of the literature presented above, the current study explores the topic of older lesbians' identity and experience of aging; amplifying the voices of older lesbians to provide a more contemporary account of their lifestyle and experiences, whilst simultaneously filling the gap that exists in the knowledge.

SECTION THREE: METHODOLOGY

This section will provide the methods and procedures used in this research, presenting the design/procedure, participant information, relevant materials/equipment, variables, and analysis process. The purpose of this section is to provide key information to allow this study to be replicated, and its validity reviewed.

Epistemology

This research uses a Feminist Epistemological viewpoint developed from both Intersectional Feminism and Standpoint Theory.

Feminism as a whole is referred to as a Conflict Theory, concerned with the patriarchal oppression of females. This viewpoint has been referred to by Harding (2004) in plural – using the word Feminisms, to infer different schools of thought and focuses. Feminism has evolved over time ranging from First Wave (political equality, Suffragettes, Martineau) to Second Wave (Social and Economic Equality), to Third Wave (Intersectionality) and finally Fourth Wave (Empowering Women, and Digital Feminism).

Intersectional Feminism stands as a broader, more inclusionary wave of feminism than its previous Second Wave, considering marginalised identities among women, i.e., race, class, ethnicity, religion, and sexuality (Crenshaw, & Bonis, 2005). This research utilises this strand of feminism due to its focus on how sexuality can impact all women's lives, understanding subtle complexities that create different dialogues for women of different groups.

Intersectionality has majorly shaped this research, greatly influencing the method, construction and aims of the study. As described in the literature review, Kehoe (1986) was the first to introduce the intersectional nature of the 'triple invisible minority status' consisting of biological sex, sexual orientation, and age, in terms of older lesbian and bisexual women. This focus on intersectionality became a key point in the current study due to its lack of empirical backing and investigation but also in efforts to bring to light the impact that intersectional factors like; race,

education, sexuality, ability, age, gender, ethnicity, culture, language, and class; can have on particular demographics.

Feminist epistemology was first established from the politics of women's movement and liberation (Anderson, 1995). This viewpoint cannot be simply adopted and is not acquired from just being a woman; instead, it is achieved from being active in critical discussions surrounding social contexts and justice. Feminist epistemology observes the influence of biological sex amongst subjects, exploring how being a woman influences what we take to be knowledge, and affects one's place in society. Feminist theory mainly concerns itself with the notion that women are biologically inferior to men due to the differences attributed to their sex; i.e. men being perceived as stronger and women being more sensitive and fragile (Shields, 1975).

When comparing the recording of human experiences, women have been ignored/forgotten, or when explored, their issues voiced from male centric understanding (Brooks, 2007), described by McCarl Nielsen (1990) as existing within the 'underside' of men's culture, history, and lives. Feminist epistemology adopts an 'outsider' status with respect to being outside the typical, dominant, elite, white, male societal group, instead focusing on minority groups of people; like women, disabled individuals, the LGBT+ community and ethnic minorities. Standpoint Theory relates to this as it amplifies the voices of marginalised societies and enables them to challenge the status quo, a term relating to the elite class of white males. Additionally, this viewpoint follows the Hegelian concept of Master/Slave dialectic, representing women a 'subordinate existence to life' yet being superior in knowledge (De Beauvoir, 1949; Nancy Hartsock, 1983).

The most influential Standpoint Theorists are Harding (1935) and Smith (1926). As stated by Harding (2004), Standpoint Theory discusses how we should conceptualise women, looking at who can provide valuable knowledge, how that person can be justified to do so, and what are the most appropriate methodological practices to provide the best resources to the subjects in question. Standpoint Theory uses organic logic, extending sense through the use of different perspectives. This theory accepts that knowing's are not universal, no two exact

thoughts are shared, and that one's position in society influences uniqueness in thought.

This theory is similar to Social Constructionism (Burr, 2015) claiming individuals to learn understanding from constructing and synthesising evidence between different perspectives. Social interaction and understanding one another are key elements to both ontological viewpoints, however Standpoint Theory differs slightly as it argues how we interact with one another to enable and limit what we know, rather than determine the outcome.

In justification of the current research methodology, using a school of thought that encourages the use of other perspectives has proven beneficial for the analytical approach, a method that relies on interpretivism, subjectivity and a double hermeneutic perspective (IPA: Smith et al., 1999; Smith & Osborn, 2003). Ultimately this epistemology was adopted due to the research's female focus and importance surrounding the intricacies of older lesbians lives i.e., investigating the complexities of minority factors such as, biological sex, sexuality, and age.

Researcher Perspective and Bias

When examining one's own epistemology, it is also important to acknowledge one's own bias. Particularly in studies of sexuality, research can be stereotyped if the writer has not examined their personal heterosexual biases (Morin, 1977).

This research has been undertaken from an 'outsider perspective' (Hayfield & Huxley, 2015); meaning the researcher may not understand or accurately represent the true experiences of their participants, due to not identifying as lesbian. Because of this, the current study risks heterosexual bias, an issue where the researcher may unconsciously conceptualise participants experiences exclusively in heterosexual terms, increasing the possibility of disrespecting and/or misunderstanding other lifestyles (Morin, 1977). Herek, Kimmel, Amaro and Melton (1991) wrote that to remove heterosexual bias, one must not dismiss sexuality specifics as frivolous and must treat the investigation of sexuality with legitimacy, evaluating areas using the same criteria as other topics. Furthermore, one must understand the limits of confidentiality and privacy of participants, using the same investigation protocols as

they would heterosexual individuals; and finally, one must be cautious of reinforcing stereotypes and further stigmatising LGBT+ individuals.

Despite these pitfalls there are several advantages to using an outsider perspective in research. Outsiders tend to make assumptions or ask questions insiders cannot, for instance, an outsider may feel specific questions are unnecessary, or obvious to the reader therefore losing important perspectives and experiences. Furthermore, insider researchers may feel pressure to have knowledge in specific areas and may feel judged for asking questions on various topics. Being considered an outsider, it becomes more acceptable to ask naïve questions, therefore exploring in more depth and gaining a more valuable insight to important novel areas that may be otherwise overlooked (Hayfield & Huxley, 2015). Additionally, it is important to note that the researcher is not only an outsider by sexuality but also by age; two complex topics that require the researcher to be culturally sensitive.

Aims and Objectives

The focus of this study was to gain an in depth understanding into the identity and aging experiences of older lesbians. This study asks two questions: 1) How do older lesbians experience aging, and 2) How does identifying as an older lesbian impact or influence one's sense of self or identity. These questions were formulated using the style advised for IPA, encouraging broad and detailed exploration of topics (Smith & Osborn 2003).

Although Kehoe (1986) has researched the relationship between biological sex, age, and sexuality amongst older lesbians this research has become outdated and uses a methodology ample with limitations; difficulty conveying emotions/experiences, limited responses, dishonest answers, demand characteristics, unanswered questions, subjectivity (i.e., misunderstanding/interpreting questions in a different way), and respondent fatigue. The current research aims to avoid these errors by using semi-structured interviews to allow participants to be more involved within the study, have the ability to ask for clarification, and amplify participants voices and lived experiences.

Theoretical Underpinnings and Analysis

Interpretive Phenomenological Analysis (IPA: Smith et al., 1999; Smith & Osborn, 2003) was selected for this research; an approach intellectually linked with hermeneutics, phenomenology, and theories of interpretation (Packer & Addison, 1989; Palmer, 1969).

Phenomenology is considered one of the more radical approaches of psychology, exploring the phenomena of consciousness as it is experienced or told by the individual. Phenomenology consists of three primary elements: meaning, evidence, and truth. These elements are often critiqued as rudimentary due to its lack of scientific, systematic structure, however, the relationship between this trio has proven effective and reliable, when applied properly. Phenomenology is often split into two approaches, Pure and Hermeneutic. [Pure] Phenomenology was originally founded by Husserl (1931,1970) and further established by Heidegger (1962), who used the phenomenon of Hermeneutics to further understand lived experiences [Hermeneutic]. Phenomenology is described as the study of lived experience and how the phenomenon appears to the consciousness of the person (Lavery, 2003), meanwhile, Hermeneutics also determines the intention and meaning of experience (Moustakas, 1994).

Husserlian Phenomenology is rooted in philosophical aspects, emphasising the importance of lived experience. Husserl (1931,1970) believed in pure phenomenology, the process of being solely descriptive, simply noting information and allowing it to be what it is, a process known as ontology. Furthermore, Husserl (1931,1970) believed that understanding consciousness did not require guidance by an experimental technique, linguistics, or science, but simply fundamental open questions, and anecdotes of one's experiences. However, Heidegger (1962) criticised this method for lacking depth and instead began to focus on interpretive aspects, looking at what it means to exist in the world. Hermeneutic Phenomenology is the combination of philosophy and research tool, essentially it is the product of both Husserl's (1931,1970) and Heidegger's (1962) thought processes, looking at what it means to be and how we know (Hawes, 1977).

IPA is rooted within phenomenology, using Philosophical origin, Empathic Hermeneutics and Questioning Hermeneutics to understand participants experience (Smith & Osborn, 2015). The prescriptions of symbolic interactionism (Denzin, 2016)

are a notable element to understanding the complexities of IPA. Symbolic interactionism is rooted in phenomenology, describing the way in which humans understand their surroundings. Symbolic interactionism states that individuals understand their own consciousness by devising their own meanings into biographical stories that make sense and contain meaning to the self. As anticipated, each individual has their own unique meanings and perceptions of the world, hence why one cannot see the world exactly the same as another.

IPA uses two key principles; lived experience and the use of simple, open questions (Smith & Osborn, 2015); often exploring individual's motivation, underlying meanings, and sub-conscious elements the participant may not be aware of. In this method, the researcher takes an active role, becoming as close to the participants inner world as possible, however the researcher's access is limited by their own conceptions and bias.

This approach utilises a double hermeneutic process, composed of the participants conceptualisation of their experiences and the researcher's conceptualisation and interpretation of said experience. In doing this, IPA uses a chain of connections between participants emotional state, thinking, and responses, holding cognition as a central analytic concern, aligning with contemporary psychology's cognitive paradigm. Combining researcher understanding with participant experience creates a deep, nuanced analysis often highlighting areas of further exploration and hidden meaning, becoming as close as an 'outsider' can to an individual's own existential experience (Packer and Addison, 1989; Palmer, 1969).

Sampling and Recruitment

Ten UK-born, Caucasian, female, self-identified lesbians were recruited for this study, aged between 55 to 65 years old (M=59.9). In order to take part in this research, participants had to meet the following criteria: be over the age of 54 and self-identify as lesbian.

Participants were initially recruited via opportunity sampling using an online flyer (See Appendix A1). The flyer was posted onto multiple Facebook lesbian support groups, those of which will not be disclosed due to ethical considerations.

Permission to these pages was sought through the gatekeepers¹⁰ of the study, i.e., the page administrator(s). Administrators were messaged privately with all details of the study including what was expected of participants, what the experimental procedure was and ethical concerns (See Appendix A2 for evidence), alongside this, administrators were given a copy of the participant information sheets (See Appendix A3), consent forms (See Appendix A4), and debrief practices (See Appendix A5) to present full transparency regarding the research. After negotiating the plan to recruit participants, administrators who agreed granted the researcher full access to the page; member status was revoked post research as agreed with the gatekeeper(s).

Participants were chosen on an unreserved basis, i.e., the first ten to respond were given the slot, and drop-out/withdrawals were replaced with the easiest accessible and free participants. Participants who took part in the study were asked to disseminate recruitment information, in order for snowball sampling to take place, of which three participants were recruited by.

Whilst Turpin et al. (1997) stated that six to eight participants was appropriate for IPA research, ten participants were recruited in case of the event of participant withdrawal, or unusable data. Whilst this exceeded the amount advised, Guest, Bunce, and Johnson (2006) stated that ten was satisfactory regarding data saturation issues. Furthermore, having used ten participants, it offered the opportunity to have several emergent themes validated and supported across the participant pool, further increasing the focus and aims for each interview.

¹⁰ A 'gatekeeper' is someone that blocks the access to a potential respondent in a study, they have responsibility of who accesses their community and negotiates the terms of their approval (Lavrakas, 2008).

Figure 3: Table of Participant Characteristics

Participant Name and Number	Age	Age Of 'Coming Out'	Relationship Status	Country of Residence	Ethnicity
1# Jo	64	32	Widowed	England/Canada	Caucasian
2# Lesley	58	Never	In a Polyamorous Relationship	UK	Caucasian
3# Jane	61	40	Single	UK	Caucasian
4# Lynn	65	17	In a Relationship	UK	Caucasian
5# Pat	57	Never to mother, outed to father at 51, told friends at 17 years.	Single	UK	Caucasian
6# Liz	62	31	In a Relationship	UK	Caucasian
7# Denise	58	39	In a Relationship	UK	Caucasian
8# Ruth	62	30	Single	UK	Caucasian
9# Anita	55	35	In a Relationship	UK	Caucasian
10# Ruby	57	45	Single	Scotland/Spain	Caucasian

Procedure

This sub-section will present the Data Collection Method/Design of the study including the interview approach, philosophical justifications for the chosen methods, and describe the interviewing procedure.

Interview Approach:

Semi structured interviews have been endorsed by Smith et al., (1999/2003) as the most effective interviewing method for IPA. Using a semi-structured technique allowed the opportunity for a looser approach, enabling the researcher to ask impulsive questions, clarifications, relatability and encourages two-way communication mimicking more of a conversational nature (Segal, Coolidge, O'Riley, & Heinz, 2006). This approach encourages a richer, nuanced data collection, and a more comfortable atmosphere which aids the participant in feeling comfortable to

share sensitive subjects and encourages the exploration of novel areas that were not previously determined (Harvey-Jordan & Long, 2001).

Semi-structured interviews have been criticised for being labour intensive, and being reliant on the interviewer's character, meaning that the researcher must be poised and confident in navigating unexpected areas (Adams, 2015). Furthermore, the uncertainty linked with semi-structured interviews can create large volumes of data, often resulting in many hours of transcribing – vastly extending the analytical process. However, these issues are also this approach's strongest points, being an 'outsider' to the subject area, the semi-structured nature of this method allows the researcher to spot and pursue useful leads, better exploring unknown areas (Adams, 2015).

Following the COVID-19 Pandemic, it was decided that interviews would remain virtual. Online interviews were effective for this topic making it easier to access what was a difficult to reach population, and enabled a wider geographical access, increasing what potentially could have been a very small participant pool (Opdenakker, 2006). Furthermore, as sensitive topics were discussed it tends to be easier for participants to be in their own space, feel/be in control, and feel separated from the researcher's environment, enabling individuals to feel more comfortable to open up and share their experience (Opdenakker, 2006).

This method of interviewing was carried out over ten females (See Sampling and Recruitment sub-section above for demographic details). Interviews were carried out online using Zoom™ and Teams™, with Facebook™ being used as a secondary platform. Participants were interviewed once for roughly an hour each, ranging in duration from 47.30 – 78.30 (measured in minutes and seconds), with the overall duration being 624.07 (measured in minutes and seconds).

Prior to the interview, participants were asked to provide up to five images that represented meaning to themselves regarding their sexual identity and age. Participants were given creative freedom on their choice of images; with many using personal pictures they had taken themselves, or images found online in the public domain. Images were used for interviewing purposes only, allowing the researcher to understand their perspective and influence conversation. Images are not disclosed in

this study; however, descriptions are available for contextual reasons (See Appendix A6).

Interview questions focused on the identity and experience of aging as an older lesbian, using predominantly open-ended questions to allow participants to take the lead of the discourse and tell their own stories. Twenty-five questions (based off the study aims) were prepared before the interview, (See Appendix A7 for Interview Guide) however, due to the semi-structured nature, questions were freely adapted where appropriate, and not all questions were used for each participant. Interviews were audio recorded and later transcribed verbatim, in preparation for analysis.

Analysis

Following advice written by Nizza, Farr, and Smith (2021), after transcriptions were typed up, they were re-read several times, to immerse the researcher as far into the data as possible. Despite the process of IPA being repetitive and time consuming, it was found to be consistent and fitted well for the research, consisting of three stages: Coding, Clustering and Analysis.

The Coding stage (Stage One) consisted of initial noting which was established from descriptive, linguistic and conceptual comments (Smith et al., 2009). Descriptive noting was first level of coding to take place, being written along the left side of the margin. This level of coding is a first cycle strategy that consists of re-reading data and organising/labelling findings via topic; identifying key phrases, explanations, descriptions, and emotional responses (Cooper, Fleischer, & Cotton, 2012). The purpose of this type of coding was to list the initial ideas of the data, looking at single words or nouns and encapsulating their meaning with a single topic e.g., 'Aging', or 'Shame'. Whilst this method of coding lacks deep inference, its use is justified for its ability to quickly capture the content of data; enabling the researcher to quickly understand the basis of large pieces of text and cluster topics efficiently. An example of this coding strategy can be found in the Appendix, (See Appendix A8).

The next level of coding took place down the right margin of the transcripts, exploring how participants understanding of their experiences was presented

linguistically. Linguistic coding consists of questioning the data, exploring the “how” and “what” of participants choice of vocabulary (Cooper, Fleischer, & Cotton, 2012). When coding linguistically, the researcher must pay attention to the use and effects of language, the pace and brevity of sentences, the use of informal or slang terms, metaphors, ambiguity, pauses, laughter, vocal disfluencies, repetition and function. This method of analysis was justified by Smith, Flowers and Larkin (2021) as it can offer meaningful insights that can often exceed the limits of participants; offering a richer data capture and a deeper connection to the experience of participants. An example of this coding strategy can be found in the Appendix, (See Appendix A8).

From this level of coding, the researcher is left with a solid basis to begin a more interpretive analysis of the data. Conceptual coding was used to further broaden the meaning of data, using interpreting to identify hidden or double meanings. This strategy establishes links between the participants experiences and wider concepts, and connects meaning to any tentative language that may be present in the text. This strategy incorporated both repeated and close analytic reading of the participants words (Nizza, Farr, and Smith, 2021), highlighting emerging concepts in the data, and allowing the researcher to begin to develop core themes from the data. High quality was ensured in this stage, by focusing on the quote whilst also keeping the wider context of the research topic at the forefront. An example of this coding strategy can be found in the Appendix, (See Appendix A8).

Following the coding stage, the researcher then re-read the transcripts whilst simultaneously learning from their notes in the margins. Emerging themes were then derived from the data and inputted into a Table of Themes made individual for each participant (See Appendix A9 for Example of a Table of Themes). Overall, 10 tables were created.

All theme tables were then compared with one another, deciphering differences and similarities between participants experiences, recording both individual and consensus thoughts, and all recurring sub-themes were listed into a separate document (See Appendix A10 for List of Initial Sub-Themes Across All Transcripts).

Following this step, all initial sub-themes were then reduced to a smaller, succinct list according to the relevance of the research aims (See Appendix A11 for Reduction and Clustering of Themes). Having established a reduced cluster of themes, the researcher then began stage Two of analysis.

The initial sub-themes were then clustered into new groups based on their similarity and relevance to the study, and were formulated into five key themes. Finally, these themes were then reduced once more from five themes to three, respective of their relevance to the study. The three themes were then inputted into a Master Table of Themes (See Figure 4 below) and a thematic map was created to understand the links between the themes (See Figure 5 below).

In the final stage, relevant quotes were identified to support particular points made from the data, and a full in-depth analysis of the themes and interpretations was conducted (See Section 4).

Figure 4: Master Table of Themes for the Group:

THEME	SYNOPSIS	SUB THEMES
IDENTITY AND BELONGING	Explores participants attitudes towards the older generation regarding their sexuality, further highlighting the differences between the mentalities of the older generation and current youth. Additionally, this theme focuses on participants sense of belonging as a lesbian, investigating how one’s identity impacts their social circles and self-confidence.	<ul style="list-style-type: none"> • Coming Out and Self-Preservation • Community and Belonging • Older generational views
HOMOPHOBIA WITH A SIDE OF SEXISM	Delves into the notion that the world is set up to suit a man over a woman, questioning if lesbians are treated unequally due to their sexuality or their biological sex. This theme discusses feminist topics including, the sexualisation and oppression of women, the impact of the patriarchy and participants ideographic experience of living through eras directly controlled by males e.g., the 60’s.	<ul style="list-style-type: none"> • Sexualisation/Misogyny/Inequality • The impact of being a lesbian versus being a woman • Questioning the existence of lesbian-phobia
LEAVING THE GOLDEN YEARS	The theme title refers to the act of leaving the life participants had worked hard to ensure, to be later challenged with the experience of growing more vulnerable and the possibility of being placed under healthcare services. This theme interprets participants experiences of aging, and their attitude towards healthcare and identity, exploring how these elements affect the self as one ages.	<ul style="list-style-type: none"> • Growing older • Fear and Vulnerability • Successful Aging and Decline

Figure 5: Thematic Map of Themes

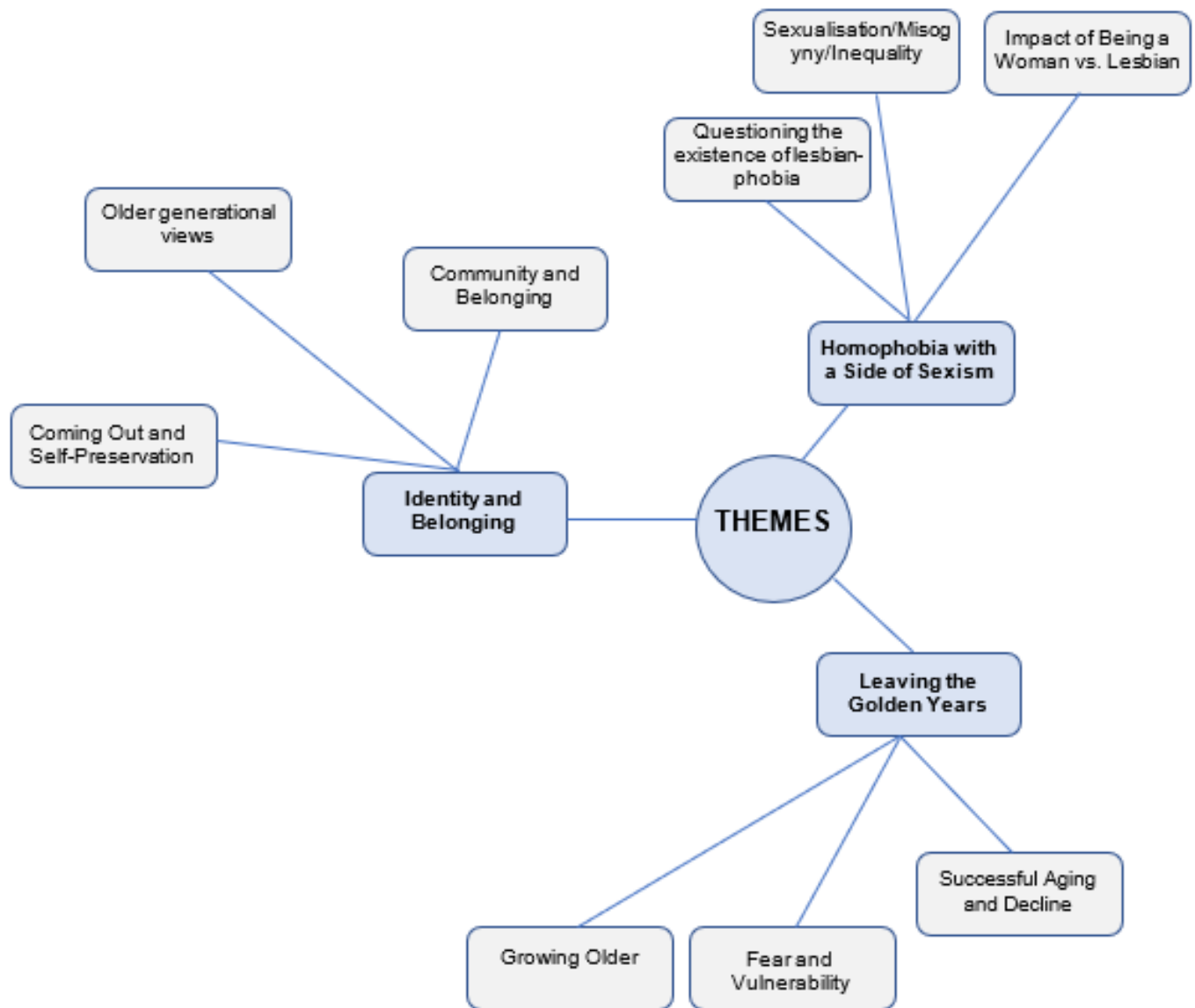
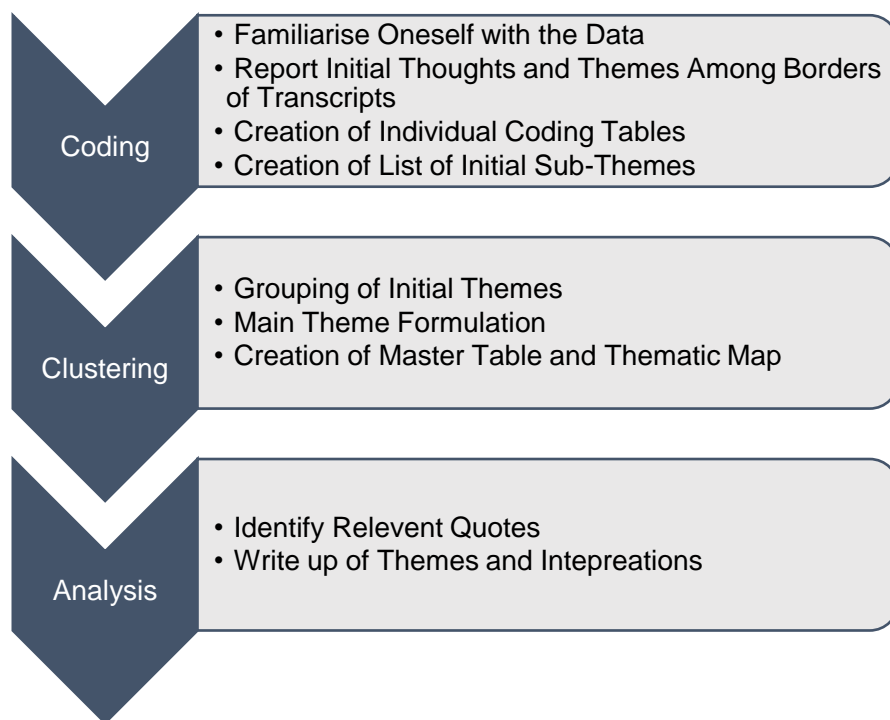


Figure 6: Flowchart of Analysis Steps:



Justification for Visual Methods:

This research differs to previous studies not only due to its demographic, but the use of creative, visual methods. Visual methods were used in this research for their ability to capture the materiality of individuals unique experiences, and has been endorsed by many scholars across several fields for its ability to identify profound, emotional emic, accounts (Harper, 2002; Lorenz, 2011; Pink, 2001). Photo Elicitation was used in particular as using photos can reveal embodied and spatial dimensions of sexuality that are seldom seen in heterosexually dominant settings (Allen, 2011). Additionally, as an ‘outsider’ to the research subject, it was important to perceive the participants world correctly and not through heterosexist ruling.

Whilst some may argue visual methods are too loose for allowing such freedom to participants, obstructing communication, and failing to facilitate a particular narrative, this type of approach not only encourages better rapport

between participant and researcher but creates a more authentic experience and provides a better insight into the participants life (Collier & Collier, 1990; Harper, 2002). This looseness further allows participants the creative freedom to articulate themselves beyond words, a methodology useful for those who struggle to tell stories or project their feelings, eliciting deep insights and clarification of thoughts (Bischof, Comi, & Eppler, 2011). Furthermore, this method provides the opportunity to discover novel areas and creates a sense of uniqueness to each interview, prompting meaningful experiences and accounts from participants (Bates, McCann, Kaye & Taylor, 2017).

To further justify this approach, photo elicitation allows the researcher to visualise the participants feelings/experiences, observing a snapshot of the participants life through their own perspective and enabling participants to have control on how the researcher perceives their life. Understanding marginalised communities can prove difficult, therefore, photo elicitation can be beneficial in bringing the researcher as close to the participants world as possible. Additionally, through using this method, it places the participant in control, removing the potential power dynamic between researcher and participant, creating a fairer, respectful partnership, “instead, their role can be one of expert guides leading the fieldworker through the content of the pictures” (Collier & Collier, 1986, p. 106).

Ethical Considerations

Ethical approval was sought from The University of Huddersfield. The ethical considerations of this study were based closely on the guidelines of the General Data Protection Regulation (GDPR), issuing the following rights for participants: the right to be informed, the right of access, the right to rectification, the right to erasure, the right to restrict processing, the right to data portability, the right to object, and rights in relation to automated decision making and profiling. In addition to this, the Code of Human Research Ethics (British Psychological Society, 2014), and the Guidelines for Conducting Internet Mediated Research (British Psychological Society, 2017), was utilised, following the principles of: respect for the autonomy, privacy and dignity of individuals and communities, scientific integrity, social responsibility, maximising benefits, and minimising harm.

In doing this research, several ethical considerations had to be established, the highest priority being consent. Consent was signed and dated digitally by all participants after the information sheet (See Appendix A3), informing them of relevant information regarding their data i.e., storage, disposal, withdrawal – and the principle of ‘Continued Informed Consent’ was also followed throughout. Confidentiality was maintained by ensuring all advertisement posts were disabled from allowing public domain replies/comment threads, meaning all communication with participants was held via private, one-to-one emails or alternate encrypted messaging services. Furthermore, to maintain anonymity and protect participants identity, participants surnames, and other identifiable characteristics were removed from transcription. In terms of data storage, the interview audio files, and participant contact information were stored on a password protected secure personal vault only accessible to the researcher and classed as ‘special category’ i.e., data concerning sexuality and individual’s sex life. Images that participants shared were securely deleted using the McAfee Shredding service, making files unrecoverable and emails/chats with participants were deleted.

Participation in this research was voluntary, with all participants being notified of their rights to withdraw upon consent. The right to withdraw was firmly stated in the participant information sheet (See Appendix A3) and consent form (See Appendix 4), which was then repeated at the beginning and end of the interview. As this study had the potential to raise personal and sensitive content, all participants were given a debrief form (See Appendix A5), post interview, which briefed them on relevant support agencies if needed: Rainbow Mind Mental Health Support, Lesbian Support Helpline, Stonewall LGBT Support and Samaritans.

Closing Points

The next section will present a summary of the key topics found and present a comprehensive analysis of the research themes.

SECTION FOUR: ANALYSIS

This section will include a short justification into the choice of analysis, a synopsis of each theme, and a comprehensive analysis formed from the three main themes extracted from the data set. The main analysis will guide the reader through the lived experiences of older lesbians, using a double hermeneutic approach to provide an extensive insight into older lesbian's experience of aging and identity.

Analysis Details

The analysis and interpretation of the data in this study was conducted using Interpretive Phenomenological Analysis (IPA; Smith et al., 1999; Smith & Osborn, 2003). IPA takes a central role, offering flexibility and creative interpretations of data, understanding how participants make sense of their experiences and environment. In doing this the researcher identifies deeper meaning from subtleties in conversation (Smith & Shinebourne, 2012; Finlay, 2011).

Three main themes (See Figure 4 above in Section 4) will be analysed to shed light on the identity and experiences of aging as a lesbian, exploring the intersectionality between particular components i.e., biological sex, age, and sexual orientation. Construction of theme titles were formulated around the data. Whilst other sub-themes were initially created such as 'Get the L Out' it was later found that they were not representative of all participants and had little quotation to support the entire theme, lacking brevity and seeming misplaced.

The first theme 'Identity and Belonging' explores participants identity as an older lesbian, investigating how living in a heteronormative society has impacted their lifestyle, self-expression, and acceptance; including participants attitudes towards themselves, experiences of 'coming out', and the impact on their social environments. In investigation of this area, this theme explores how society has changed throughout participants lifetime, initially framing them as criminals to later be labelled as a functioning member of society; analysing relevant quotations to present real world experiences.

The second theme 'Homophobia with a Side of Sexism' discusses the impact of being a woman in a world that was built for men, exploring the impact of lesbian

phobia and what this type of prejudice entails. All participants expressed having been involved in discrimination whether that be subject to their age, sexuality, or biological sex. Lesbian phobia was identified as a point of contention amongst participants, debating whether this type of discrimination is solely prejudice towards same-sex love between women or a combination of sexism also. Ultimately lesbian phobia was defined by a participant as “Homophobia with a Side of Sexism”, hence the title, a definition well suited after analysing all perspectives. This theme primarily investigates participants experience of sexism and lesbian phobia, exploring each issue individually, to understand how these components impact participants identity and experiences of aging.

The final theme is labelled as ‘Leaving the Golden Years’, exploring how participants view their aging experience, attitudes towards the future, and the worries linked to healthcare as an older lesbian. Almost all participants expressed anxiety surrounding medical care because of their sexuality and age, fearing the possibility of being put in a residential home where they may be subject to lesbian phobia, discrimination, or neglect. Participants had little optimism about aging with many participants commenting on the experience of their older friends, sharing how they had to make the decision to hide their identity to be safe, or live openly, risking danger from the health staff and residents. However, whilst participants admitted worry for their future, they felt positive for the future of younger lesbians and other LGBT+ folk; explaining how once their generation has passed on, societal perspectives will improve and ensure better care and safety for future LGBT+ individuals (See Figure 4 and 5 above in Section 4 for more information).

Analysis of Themes

Identity and Belonging

The theme Identity and Belonging relates to participants sense of belonging regarding their sexual identity and self-acceptance, exploring participants experiences of ‘coming out’, and the effect it has on their social environment, from romantic partners to the general public. This theme primarily follows participants experience of belonging throughout their life in regard to their sexual orientation and

their sense of belonging amongst others, exploring the intersectionality of one's identity regarding factors such as sexuality, and age.

In doing this, this theme explores participants experience of 'coming out', and self-confidence, looking at participants attitudes towards themselves and how others judgement plays into this narrative i.e., exploring older generational views. Furthermore, this theme investigates the impact of participants community around them i.e., exploring their sense of belonging in both the LGBT+ and heterosexual community.

Most participants communicated having lived a 'heterosexual life' for some time; a term defined by participants as the time where they had not disclosed their sexual identity, and instead engaged in romantic heterosexual relationships with men, and/or had children. Having already resigned themselves to what they defined as heterosexual life, participants felt that 'coming out' had particular ramifications for them, such as being perceived as a liar and/or estrangement, all of which will be explored in this theme.

Participants of the current study felt that their sexuality was a defining factor of their identity, affecting key elements of their personal lives, such as relationships, residence, appearance, and self-confidence. Due to conservative upbringings, the majority of the participants delayed revealing their sexuality; with five being over 30 years old, two being over 40 and one never officially disclosing their sexuality. Only two participants were publicly open about their sexuality before their 18th birthday, however one had never told their parents, suggesting lesbians of this age to have hidden their sexuality for a long time.

With the study demographic enduring significant social changes in their lives; it was agreed that revealing one's sexual identity was made more difficult than modern youths, due to lasting stigma amongst older communities. Whilst one acknowledges the older community should not be generalised nor homogenised as conservative or prejudicial; the events and social change that this community experienced have caused divergence; leaving some accepting and understanding of different lifestyles and others maintaining conservative ideologies; often being the primary reason for participants hesitance to 'come out'. With this demographic being

raised in a social climate that normalised inequality i.e., racism, ableism, classism, and sexism, being open to new lifestyles has proven tricky for particular individuals.

When comparing the social climate of the older community's youth with modern day it is evident that social attitudes and the morals in which present day children are raised with, have majorly shifted; therefore, it is important to acknowledge how this differs with the study demographic. Examples of social change that this demographic have experienced are as follows; the emergence and acceptance of the LGBT+ community, equality amongst ethnic minorities, Feminism, female justice, and higher female work forces, declination of religion, increased diversity and freedom of self-expression, less traditional gender roles and values, less judgement on pre-marital sex and much more (Park, Bryson, & Curtis, 2014).

Due to the uncertainty of individuals stance on LGBT+ lifestyles, participants felt they had to wait for the appropriate timing to disclose their sexuality, to ensure their own safety and prepare for the possibility of collateral damage i.e., being removed from the family complex, hurting their children, disappointing their parents, and losing friends/trust; due to already having masked themselves as heterosexual for a long duration of their lives. Due to this, participants felt that one must have a reason to 'come out' (e.g., if their romantic relationship had broken down) due to the disruption it can bring to families, such as the breakdown of relationship(s), estrangement, or perhaps the custody, and welfare of children. This worry symbolises the burden of disclosing one's sexual identity and the permanent impact it can have across individuals' relationships.

Denise goes on to explain the destruction that revealing her sexuality and leaving her husband had caused, explaining how four months into her first lesbian relationship, her ex-partner had committed suicide:

“When we got together, four months in, my ex-husband committed suicide. How we weathered that, I will never know. She was not prepared for the fallout of my marriage at all, and neither was I. It happened, and it was massive”.

This outcome highlights how abandoning the perception of living a 'heterosexual life' can have significant ramifications on one's identity and relationships. In Denise's case 'coming out' is not only the act of revealing of one's

sexual attraction with women, but the ending of a relationship, further displaying the extended impact that disclosing one's identity can involve. Furthermore, the permanence related to the act of committing suicide highlights the real and everlasting implications that can be linked with disclosing one's sexuality; and highlights how once damage is caused, cannot be undone. Additionally, this outcome enables one to understand why individuals delay 'coming out', and why it is portrayed as such an overwhelming burden (Yoshino, 2001). Denise's experience demonstrates the domino effect¹¹ that is associated with disclosing one's sexuality, displaying how it is not only a personal barrier, but affects other relationships and lifestyles also. Therefore, one must consider if the impact of 'coming out' is worth the outcome, demonstrating a key reason why many lesbians remain in their 'heterosexual' lives – for others.

'Coming out' is commonly referred to in a 'trade off' manner throughout the data sets, suggesting that one must lose or destroy something e.g., their marriage, in order to live as lesbian. This is further supported by Anita who stated:

"Those people who I did have issues with are no longer in my life really, you come out and you lose people, everything changes".

This uncertainty of what will proceed after disclosing one's identity frames 'coming out' as a negative experience, solidifying this running theme of loss and isolation, again highlighting this notion of collateral damage, and group hurt. This was further iterated by Liz who commented on the judgment she felt when disrupting her marriage:

"Lots of judgement. I was thirty-one, we'd been married twelve years, we had a happy marriage, we had a son, I felt awful".

Liz's account portrays how in order for participants to live openly as lesbian, they must put everything they know at risk, including romantic relationships, and even kinships. Through raising the importance of her son and marriage, it allows the reader to understand why disclosing one's sexual identity is more than an individual

¹¹ The cumulative effect of one event that triggers a sequence of similar events (Abdolhamidzadeh, Abbasi, Rashtchian, & Abbasi, 2010).

experience, often burdening other relationships in their social circles. Additionally, this underlying theme of guilt presents how one may feel responsible for the disruption of the family complex, framing sexuality as a definitive component of one's life. Furthermore, participants grew up in a political climate fuelled with discrimination, considered a criminal in the eyes of the law (Schraer, & D'Urso, 2017), another reason for hiding one's identity – survival – often using heterosexual relationships as a cover up to protect themselves, as demonstrated by Denise:

“I never once revealed my identity, I stuck with the boys and blended in”.

Moving on, participants felt that their age/generation (the mean age of participants being 59.9 years old) was a point of contention regarding their identity; with all participants agreeing that their generation had not progressed socially (*i.e., being accepting of LGBT+ identities*), and remained discriminatory and ‘old fashioned’. Participants expressed that the majority of lesbian phobia they experience is usually from their generation and beyond, described by participants as a combination of ingrained ignorance and discrimination. Participants felt that in order to be ‘out’ from a young age took great resilience and strength, elements that many did not gain until later life. On account of this, participants communicated how they became trapped within falsehoods, feeling depressed and unable to express themselves, relying on the numbing of depressants to ease the emotional turmoil, as presented in Jo's dialogue:

“I spent most of my twenties drunk, just trying to escape from this weird world that I didn't fit into”.

Participants listed several reasons that accounted for the concealment of their identity however as suggested above, the older community seemed to be the most definitive cause. This statement is supported by Jo as she admitted her exasperation towards older, heterosexual people due to their narrowminded views and lack of respect for LGBT+ lives:

“They think that inclusive language is some sort of bizarre politically correct way to oppress them I just enjoy the fact that they're old and they will die soon so we don't have to deal with it again. I'm not putting my energy into educating a lot of people.”.

Jo expresses her lack of patience towards the older heterosexual community, suggesting they are habituated to outdated views and unlike herself, are too ignorant to understand the complexities of sexuality. Jo compares older heterosexual opinions with new, modern western perspectives, presenting how the older heterosexual community seem to be stuck in older fashioned mindsets, unable to adapt to social change and new, updated political ideologies. Through observing participants attitudes toward the older heterosexual community, it seems they are becoming further estranged due to their disinterest with equality. Jo reveals her anticipation towards the end of her generation, believing it to be an improvement to lesbian lives, thereby insinuating older individuals to be the source of homophobia. Whilst LGBT+ individuals have welcomed new legislations and inclusive thinking, the older heterosexual generation are perceived by participants as stagnant, and inadequate of social change.

Over the past 50 years the older community have experienced several legislative changes regarding LGBT+ rights, as followed: sex between two men over 21 and "in private" was decriminalised (1967), decriminalisation occurred in Scotland (1980), followed by decriminalisation in Northern Ireland (1982), the age of consent for two male partners was lowered to 18 years old (1994), the ban on gay and bisexual people serving in the armed forces was lifted; alongside the age of consent being equalised for same and opposite-sex partners to 16 years old (2000), same-sex couples were given equal rights regarding adoption (2002), gross indecency was removed as a homosexual offence (2003), a law allowing civil partnerships was passed (2004), discrimination on the basis of sexuality was banned and became an illegal offence (2007), gender reassignment was added as a protected characteristic in equality legislation (2010), and finally gay marriage became legal in England, Wales and Scotland (2014) (Schraer, & D'Urso, 2017); presenting the fast change that older individuals have experienced.

As seen in Jo's quote above, following inclusivity is often considered a method of oppression in the eyes of the older heterosexual generation, presenting the turmoil that older lesbians encounter when trying to accept one's identity and feel safe. Whilst the definition of 'inclusive' is that of a positive nature, synonymous with diversity and equality, it seems to evoke negativity and fear amongst the older

generations - perhaps perceived as banning their free speech and encouraging a unity that has been resisted for decades. Jo continues to share her experience with the older heterosexual community, expressing how she is treated differently for both her sexuality and biological sex, having her identity invalidated, and labelled a new, modern trend, that had not existed prior:

“My generation are absolutely heteronormative. They just don’t think. Back in our day we didn’t exist. The men did, but women? How dare they”.

Despite strong evidence showing gender variance and same-sex desire amongst women to have existed over more than 2,500 years ago (Parkinson, 2013), Jo expresses how her age bracket denies her lesbian existence. Jo uses harsh phrasing when projecting her point, acknowledging how same-sex love was recognised amongst men, but not women. Whilst gay men clearly were not accepted within society portrayed as the villains of the AIDS epidemic in the 1980’s (Osmond, 2003), they were at least validated as existing, a privilege lesbians do not seem to have. This disbelief in lesbians’ existence shelters misogynistic undertones, perhaps due to the dominance assigned to men in relationships, often labelled as the head of the household or the one to ‘wear the trousers’ in a relationship i.e., ‘to be the person in a relationship who is in control and who makes decisions for both people’ (Cambridge Dictionary, 2021).

Continuing on, throughout participants youth, gay and bisexual males lived in hiding as engaging in same-sex relations was illegal, and considered an issue of unstable, ill mind (American Psychiatric Association, 1952). Whilst the existence of anti-sodomy laws threatened gay and bisexual men’s existence, lesbian and bisexual women were even further removed from society, believed to be myth, as suggested by Jo’s above quote. Whilst gay and bisexual men suffered under this anti-gay ruling, they had an advantage over lesbians as they were more visible and by being ruled as illegal, they were somewhat validated as a sexuality (or sexual phenomenon), whereas lesbian and bisexual women were erased and undiscussed.

In order to counter this invisible nature of lesbians, several participants had taken to wearing particular fashion mandates to express their sexuality.

This denial of existence from participants peers caused distinct effects regarding personality and identity expression, with some participants being more radical, outspoken, and antagonistic; whilst others tend to be quieter and more subdued. It is clear to see a duality between lesbians who are proactive and fought to be visible versus those who settled for a legal safety net such as the Equality Act 2010. However, individuals who disclosed their sexuality at a younger age like Pat seem to be more pugnacious, framing their lesbian identity as an ongoing rebellion, using what is viewed as 'controversial' fashion mandates like shaving one's head to express freedom and celebrate autonomy:

"I think when I first shaved my head, part of that was me saying to the world, fuck you this is me and I'm in your face. There's no need to have doubt anymore, I'm your stereotype dyke".

From this quote we can understand that identity and gendered expression is a vital component in expressing one's sexuality. Short hair on a woman is a political statement, as it is generally assumed to be more abrasive, butch, and masculine – a direct contradiction of the expected social norms of women's gender expression i.e., femininity.

In society, long hair is the desired style of a woman, often used as part of the 'uniform' in being subordinate to men. Whilst women have met successes in their strive to be equal, the hairstyle of a woman is still very political and controls how she is viewed by the world. For Pat to shave her hair, regardless of her reasoning, it is controversial and makes a bold statement to the patriarchy. Pat goes onto play into this stereotypical concept of female short hair, labelling herself a "stereotype dyke". Through trivialising this bias, she reclaims the power held behind these ruthless word, using her identity to rebel against societal norms. By taking on this "stereotype dyke" role, she plays into the very sentiment society hates, mocking and belittling those who discriminate and opposes what she believes is a cookie-cutter way of living.

In the quote Pat speaks "to the world" implying she is angry at the entire complex of humanity, labelling homophobia as a collected, world issue rather than that of an individual nature. This mass-hatred against the world, highlights her

misguided anger, showing how a life of discrimination can impact one's entire perspective of the world around them. Additionally, the focus on first person terms like 'I' insinuates that she is on her own and having to take on the whole universe solo. This emphasis of Pat being on her own, highlights how she feels singular in battle, a lone wolf straying from the pack to fight for what is right, echoing the continuous underlying tones of isolation and loneliness throughout the data set. Furthermore, this image of speaking to the world yet being on her own, presents how she is surrounded by humanity yet, still perceived to be alone, standing as a singular minority, having to take on the world independently to be free and visible as a lesbian. Additionally, the ratio of one individual versus the world creates a negative outlook, framing her 'battle' as already lost, and therefore, something that cannot be won without further allies. This singular outlook frames her as being lonely, having to carry this issue individually on behalf of her community - perhaps showing how older individuals often feel obliged to carry on the fight, as if the future of humanity is dictated by their actions – an issue echoed by Lynn who stated:

“We did all the groundwork to have what we have today, and we did it on our own. But we can't keep it up forever”.

It is clear to see that participants identities have been heavily influenced by their experience of discrimination and activism, feeling pressure to rebel and change the prejudicial thoughts of their generation. Following on, the majority of participants felt that it was important to maintain the fight into their older age, through flaunting 'controversial' appearance mandates to provide visibility for lesbians and actively oppose the patriarchy. However, it is important to acknowledge that not all participants reacted this way with Liz, surrendering to the social hierarchy of society, and succumbing to being 'less than' due to her minority characteristics:

“I think there's enough representation, I don't think we need to take over the world we're just a small part of it. There are other sections of society that are underrepresented. I'm under the opinion that you sort of find your natural slot in society”.

This notion of finding one's natural slot in society suggests that Liz has become familiar with being treated a certain way, and feels it is unnecessary to strive

for change. This familiarity and contentedness with being treated as 'less than' demonstrates again how participants have been shaped by society, with Liz becoming comfortable in this cycle, and unwilling to create change.

This lack of devotion to achieve visibility and tackle prejudice, presents how she has become wrapped up in how things 'should be' versus what could be achieved. Liz suggests that lesbians should be content in their 'natural slot', further implying that lesbians have an easier lifestyle than other minorities, brushing off damaging experiences as little issues or 'the way of life'. Furthermore, the use of the term natural slot suggests that she does not value herself or other lesbians as equal to their heterosexual counterparts, implying that she does not deserve the same opportunities or treatment as someone with a higher privilege status e.g., a cisgender, heterosexual male. This acquiescent attitude implies that because she is lesbian, she has resigned herself to nothing better than pleasing others and following rules; perhaps living the life she feels she deserves or is expected of her. Additionally, Liz's attitude towards other marginalised communities suggests that she perceives society as rigid and unadaptable, and therefore individuals should instead remain strong and not become hung up on bettering one's treatment. This echoes back to a previous quote by Jo who commented on how educating others can be a waste of time, indicating that society is perceived as a lost cause, and instead one should focus on following the rules and avoiding trouble.

To summarise this theme, it is apparent that the identity of older lesbians is complex, often moulded by the society around them and their experiences with homophobia. Living in a heteronormative society has impacted participants in two significant ways: whether that be encouraging radical, activist ideologies or encouraging a more subdued, submissive mentality. Regardless, the impact of society is irrefutable, controlling participants identity, appearance, and social decisions; however, whilst sexuality has proven to be a central factor of older lesbians' identity, one could also argue being a woman is just as meaningful or perhaps even more so. The succeeding theme will explore the reality of this statement, following how participants biological sex has impacted their identity and aging experiences, utilising a feminist perspective to highlight inequalities that create unique circumstances for this demographic.

Homophobia with a Side Order of Sexism

Whilst participants stressed their concerns surrounding homophobia in the previous theme, this theme 'Homophobia with a Side Order of Sexism' explores the impact of one's biological sex, investigating how living as an older lesbian in a male-centric world impacts participants aging experience and identity. Furthermore, this theme explores the cumulative manner in which misogyny/sexism and lesbian phobia intersect; investigating both the distinctions and overlaps between the two topics.

This theme is constructed from three sub-themes: sexism/inequality, the existence of lesbian-phobia, and the impact of being a lesbian versus being a woman. Whilst lesbians fall under the category of 'women', to avoid possible confusion, this theme will separate these two elements, using the term 'woman' as exclusively concerned with biological sex and 'lesbian' being exclusive to sexuality.

The majority of participants in this study felt that their biological sex had disadvantaged them more than their sexuality, often feeling that men held the power and were regarded in a more respectable way, Lynn goes onto say:

"...not really because they were lesbians but because they were women they've suffered. It's not about who you're sleeping with. It's who you are".

Lynn removes the focus from sexuality, reducing her and other lesbians' poor treatment down to their most basic element – biological sex. In doing this she erases the links to sexuality unifying women as a category of victims who live in a man's world. Feminist concept, Standpoint Theory utilises the Hegelian concept of Master/Slave dialectic, suggesting women to be biologically disadvantaged due to being born the lesser sex; a notion that is mimicked in the above quote. Whilst one acknowledges lesbians can experience homophobia, this complex woman-phobic narrative Lynn vocalises, questions the existence of lesbian-phobia, rooting discrimination in solely biological sex, away from participants sexuality.

Lynn states "*not really because they were lesbians...*" (page 64) suggesting sexuality does play a role in discrimination but ultimately the issue is being a woman, living in a male orientated world. In support of this, as female sex acts are typically

perceived to be enjoyed by men (with the term 'lesbian' being the third most popular search term on Porn Hub, Pornhub Insights, 2021), it solidifies this notion that discrimination towards lesbians is strictly women orientated, framing sexism as the issue rather than lesbian phobia. When describing her thoughts, Lynn uses emotional terms like 'suffering', framing women as weaker and frail, suggesting prolonged pain and agony, perhaps paying homage to the abusive history of women, (i.e., abuse, rape, bride burnings, honour killings, female genital mutilation, sex trafficking - Mahishale & Mahishale, 2015), reinforcing this narrative of women being punished for being female.

Continuing on, due to the societal constraints attached with being a woman, i.e., being perceived as 'the weaker sex' (Emslie & Hunt, 2008), participants felt that they often had to prove themselves, often being undermined by their peers. Liz goes on to explain how this repeated sexist behaviour has caused her to lose her confidence in being a woman:

"I'm confident in being a lesbian but not as my identity as a woman".

Liz shares her disconnect with her female identity, explaining how because of the sexism she has experienced, she struggles to identify with being a woman. She later states:

"I'm quite happy in who I am as a lesbian it's no longer an issue for me in any way shape or form. But my identity as a sixty-two-year-old woman is quite daunting. I don't feel old, or weak but people will still see me as that".

Liz explains the disconnect between how she feels, versus the societal expectations of older women e.g., physical decline, weakness, vulnerability. She highlights her age as a definitive factor of her identity, highlighting the importance behind this characteristic. Whilst participants felt that they had never been respected as women, collectively they agreed that sexism becomes more noticeable as one ages. Lynn goes on to further explain how living within male values affects her life, presenting how sexism transforms as one ages:

"Older women are viewed differently. Our sex organs are viewed as gross".

In her account, Lynn acknowledges how older females are viewed derogatively in comparison with their male counterparts, negatively affecting one's identity and reception in society. She expresses how women's aging experience is often linked with vulgarity, bringing light to the fact how female bodies are heavily critiqued and controlled under the male gaze, in comparison to their male counterparts. Lynn uses crude colloquialisms such as 'gross' to exhibit how older women are viewed through a derogatory lens in society. The term 'gross' is intense, suggesting an intolerable, repellent attitude towards older women, presenting how she is at the bottom of the hierarchy, significantly below males.

When describing her experiences of agism, Lynn sets an uncomfortable, unsure atmosphere, perhaps displaying her worry and uncertainty as she ages. Lynn acknowledges how older women are viewed 'differently' suggesting that the respect level and desirability towards older women dissipates as they age. This declination suggests that when women meet a certain age, they become unwanted, and irrelevant; linking a woman's worth to her perceived attractiveness and youth, variables that appears to decrease with age. This focus on age demonstrates how women become trapped in this cyclical nature of discrimination, awaiting the inevitable process of aging, losing their already questionable position in society. Additionally, in her quote, Lynn does not define the category of older women by any particular age, perhaps portraying how this 'expiration date' is unknown, or perhaps continually adjusting with male's attitudes towards aging women.

Jo continues to speak about this conceived 'expiration date' expressing how menopause impacts the societal perceptions of females, essentially using the date of menopause as an indication for a woman's behaviour or sexual performance:

"... there's this idea that past menopause women are no longer a sexual being which is a crock".

Jo expresses her frustration surrounding the perceptions of an aging woman, demonstrating how once they have stopped having their period and are no longer able to become pregnant naturally, they are perceived differently, unable to be considered 'sexy' or desirable. Jo comments how she feels invalidated by these harmful public perceptions, highlighting how her identity and confidence is impacted

by casual sexism. It appears that the date of a woman's menopause marks the day she is considered irrelevant to males, marked as undesirable and unwanted, again reiterating the prior topic of expiry. The term 'past menopause women' rather than the simple label of 'women' further enforces this narrative of women's perceptions altering as one ages, retiring them from the category of 'woman', displaying the constant attack on womanhood that ensues through a female's life, and the weight that menopause carries in terms of being valued as a woman in society. Essentially the first day of menopause equates to the end of life as a 'woman', where she then takes on the role of a sexless being (Claes & Moore, 2000), with zero interest of gratification. Whereas men on the other hand, appear to have no societal cut off point due to having lesser constraints on reproductive resources (Buss & Barnes, 1986).

In conjunction with this, Buss (1989) implied that the most preferred age for women by men was 25 years old, meaning that as one passes this age, statistically the more worthless and depreciated in value a woman becomes, entering what is popularly known as The Plankton Generation¹². Plankton is often perceived as meaningless, unnecessary, and most importantly as a last option, again highlighting the disparity around engaging with older women sexually. Jo further comments on this phenomenon, describing how her age often causes her to become invisible in the dating scene, becoming unwanted and embarrassing to engage with sexually:

"...older women's sex organs are scary, or suspect or maybe a bit horrible, people will laugh at jokes about having intimate relations with older women, oh you don't want to go there they will say".

At this point in the analysis, it is clear to see that participants i.e., older lesbians, are treated significantly different to their older male counterparts, made to feel invisible, brushed aside and deemed worthless. Jo highlights how older women tend to be trivialized in the dating scene, suggesting that desiring an older woman is unimaginable, perhaps a comical experience. This casual dismissal and

¹² Women who are no longer visible, considered last in the food chain for romance, because of their age, usually over 45 years old

contemptuous attitudes towards older women construe a hostile environment, framing aging as a daunting event to experience.

Jo uses the words 'scary' and 'horrible' demonstrating how her demographic are stereotyped to be feared, or aggressive, usually being the face of evil in fairy tales, portraying unpleasant characters like witches, or evil stepmothers. Furthermore, the word 'suspect' adds another layer of fear, suggesting that an older woman's sexual organs are to be distrustful or dubious, framing them to be dangerous, and abnormal. Additionally, she uses the term 'there' interchangeably in place of 'older women', suggesting that it is taboo/too vulgar to admit or consider the act of being intimate with an older lady. This ignorant, dehumanising choice of wording again frames participants as embarrassing, shameful, and unattractive; further perpetuating this notion that this demographic is irrelevant, expired, and undesirable.

Jo continues to share this train of thought, expressing how as an older woman she is perceived as deviant for wanting to be involved with another individual sexually:

"I think it's all women, we are all deviant whores if we are older and dating. Of course, older men who want a woman they want a young sweet one".

Jo groups older women together, regardless of their sexuality, explaining how if one is older and dating, it is perceived as wrong, and repulsive, framing them in a somewhat predatorial light. Jo uses the word 'deviant' to portray how older women are departed from acceptable society standards, suggesting that older women are wrong to gratify their sexual needs, considered controversial or ill-minded. Furthermore, the use of insulting colloquialisms like 'whore', suggests that these women are acting overtly sexual, in a way that defies society's accepted standards, again, portraying women in a negative light, and prompting the narrative that women who enjoy sex are over promiscuous, to be feared or viewed as dangerous or needing restrained.

This exaggerated view of older women's sexual needs directly contrasts previous quotes and highlights how a women's sexuality is both minimised and maximised for patriarchal agenda, i.e., claiming older women to be sexless versus,

labelling them 'deviant whores' when dating. This contrasting juxtaposition creates an odd dichotomy, bouncing between extremities, of either being a sexless being, or a rampant, sexual predator, led by deviance and social disorder; leading to women once more being labelled as unstable, playing into the very prescriptions of benevolent sexism. Whilst this quote differs to the prior in terms of how it frames older women sexually, each quote thus far reinforces this conception of the 'broken woman' illustrating them as helpless and weak; a common rhetoric echoed by the patriarchy. Additionally, in her account, Jo refers to a younger woman using the words 'a young sweet one', suggesting older women to contrast this label, perhaps being perceived as old, and sour. This focus on youthfulness highlights this overarching theme of pressure in a woman's life, having to continuously conform to unreachable beauty standards or be cast off and forgotten.

In continuation of this, Jo collectively speaks for all women, disregarding sexuality and frames being a woman as the toughest element in her life. This inclusion of 'all' women unifies all variants of women (regardless of sexuality, gender, appearance...), demonstrating how it is that of womanhood that is targeted, casting sexuality as more of a 'background' element or an additional tier to their discrimination. Additionally, several participants believed lesbian-phobia to be sexism, a dislike towards women rather than same-sex relations.

In support of this narrative Lynn expresses how her sexuality has caused an element of damage to her reputation, however, believes that at the core of lesbian-phobia, it is a sex issue:

"...as much as being a lesbian affects my position in society, at its base level it's a sex issue".

Lynn acknowledges her position in society as an older lesbian, showing awareness of how her minority characteristics may influence her lifestyle and treatment from others, believing her biological sex to be the primary reason for attracting prejudice. Lynn refers to sexism as the 'base level' of the prejudice she has experienced as an older lesbian, a word typically describing the lowest supporting component, or centre of functioning, perhaps mimicking how women are able to be controlled down to their very foundations. Through describing sexism in

this central way, it is framed as a fundamental element in women's lives, a primary component to womanhood, and an integral element of experiencing life as a woman. Whilst Lynn acknowledges the impact of her sexuality, she frames her biological sex as the primary issue, an instance mirrored by Liz who states:

"It's not that I'm not out, I am, just people would rather joke about me being in the kitchen or being incapable rather than lesbian slurs".

In agreement with Lynn, Liz communicates how her biological sex became a larger issue than her sexuality. Liz presents misogynistic rhetoric, explaining how she is often ridiculed for belonging in the kitchen or being incapable of carrying out chores, due to being perceived as the weaker sex. Whilst Liz explains how she is open about her identity, it seems a little issue in comparison with her biological sex, again suggesting homophobia to be an added layer to the life of a lesbian. Furthermore, Liz states that people would *rather* joke about her sex, suggesting it to be an easy jab, and perhaps more comedic. Additionally, Liz communicates this in a very nonchalant manner, suggesting she has become used to this type of benevolent sexism, seemingly a running theme across participants.

Ruth also shares her experience and understanding of sexism and homophobia suggesting the two to be a coalition, with one fuelling the other:

"People's negative attitudes towards lesbians is sexism and homophobia combined, what I normally receive as a woman is bad but once you are outed it's even worse. It's homophobia with a side of sexism".

Ruth shortly summarises her treatment as a woman as 'bad' highlighting how she is treated differently due to her biological sex. In stating this she brings up her sexuality emphasising how its presence enhances the effects of sexism, as well as adding the grief of homophobia. Ruth equates being lesbian to *"homophobia with a side order of sexism"* (page 71) demonstrating how the two bigotries are intertwined, illustrating how one is linked to the other, punishing both her sexuality and biological sex simultaneously. Ruth speaks about these issues collectively, suggesting that homophobia is dependent on sexism to exist; demonstrating the increased hardships lesbians have to cope with in comparison to their heterosexual counterparts, as stated by Kehoe (1986).

Jo goes on to support this narrative, explaining in further depth the impact of sexism and homophobia combined, explaining how lesbian relationships incur the most abuse due to there being two women present, and therefore having more of a critical hit on the household:

“...anything that impacts women badly is going to impact a lesbian couple at least twice as badly”.

Jo states how lesbian relationships are overrun with sexism, implying that where there are more women, e.g., in lesbian relationships, there is further suffering, for example, with the gender pay gap. This pessimistic account synonymises being a woman as dangerous and fearful, whilst males appear to be safe, and protected by society. Szymanski, Moffitt, and Carr (2011) believed that whilst the world that exists is built primarily for men, women will always struggle to establish their place in society, facilitating their control and creating difficulty in reacting without negative ‘backlash’.

Furthermore, this notion of ‘backlash’ suggests that women are fighting a losing battle, being subject to discrimination for their biological sex and further being tormented for how they react, plus any other minority characteristics they may have e.g., being lesbian. Szymanski, Moffitt, and Carr’s (2011) statement is relevant to Jo’s above quote as it highlights how women are naturally disadvantaged, underlining how they are trapped in this cyclical territory, unable to free themselves due to the permanent constraints of the biological sex they were assigned at birth, plus other distinct separating characteristics such as sexuality, age disability, and ethnicity.

Whilst this study focuses on older lesbian’s experiences, researching without acknowledging the foundations of living as a ‘woman’, disables one to fully understand what it means to live and experience lesbian life. In light of the content shared thus far, it is evident that lesbians are still very much challenged by society, with the impact of male-centric ruling being a central component to their oppression, shaping their identity and aging process. The succeeding theme will follow the impact of age, regarding identity and aging experiences, understanding in more detail how these factors affect the demographic of older lesbians.

Leaving the Golden Years

As stated in the Analysis Details section, this theme 'Leaving the Golden Years' relates to the act of leaving behind the life participants had worked hard to ensure, to be challenged with the experience of becoming more vulnerable, and the increased possibility of being placed under discriminatory healthcare services. This theme follows the subject of age closely and consists of three sub-themes: growing older, fear and vulnerability and 'successful' aging and decline; exploring the intersectionality of age, sexuality, and biological sex and how they intersect to create impact in participants lives.

Generally, participants expressed that aging is a feared experience due to the increased reliance on healthcare services; being afraid of anti-LGBT+ rhetoric regarding medicine and religion. Because of this, participants felt aging was a means of abandoning their current life, and entering a life of homophobia, agism and sexism, often the life they had already chose to leave behind. Whilst it is not considered uncommon to worry about aging, participants felt that their sexuality had a greater influence on one's life choices and trust, resulting in hesitance to visit the doctor or attend health checks.

Since participants grew up in a much greater homophobic period than today, participants had to fight harder to be seen, as what they identified as was refused to exist, and at times considered a criminal offence (Schraer, & D'Urso, 2017). With most participants having only disclosed their sexuality after their 30th birthday (See Figure 3), they felt there was much greater risk as they approach older age, having only recently achieved their desired, authentic lifestyle, to be threatened with losing what they had worked to achieve. Pat goes on to explain how herself and others battled to be seen, creating a sense of uneasiness when being faced with the uncertainty of her future:

"... for us because we fought so hard to become visible, the thought of going back is so terrifying".

Pat describes how the pain and suffering she experienced when she and others were younger, creates a much more worried attitude as one ages. Pat conveys an anxious point of view expressing notes of post-traumatic stress, linking

her future lifestyle with the relentless, childhood she fought to escape. This cyclical nature seems to be a prevalent sub-theme throughout the transcripts, with participants typically beginning their lives surrounded by discrimination, managing to break free from social constraints in adulthood, to once again be hindered by prejudice as they reach senior years, equating each year into older age as a step backwards.

Pat frames aging as a very negative experience, associating it with prolonged pain, battle, and suffering, illustrating her life as a ticking time-bomb, a fight against time to her inescapable future. Moreover, her vague vocabulary suggests this issue is very raw, almost as if she cannot admit aloud to herself that 'going back' is the replacement of her lesbian identity. Furthermore, Pat does not question the possibility for alternative options suggesting 'going back' to be the only route for lesbians as they transition into older age. Pat acknowledges the fear linked with returning to a 'heterosexual' façade, however frames this as the safer choice, disengaging with her lesbian identity to guarantee protection in the future. This need to revert back to a heterosexual identity illustrates how sexuality is still a great point of contention amongst older communities, metaphorically throwing her back into the closet with a lock and key, and a new identity. Finally, this transience of participants identity frames them as lacking control and stability, perhaps causing considerable identity issues as one ages.

Pat shares how the discrimination in her present causes worry as she ages, describing how as she becomes older, she will become more vulnerable and not treated sincerely:

"...well, if they won't listen to me now, are they going to listen when I'm seventy-five and gone a bit do-lally?"

Pat acknowledges how she is not currently listened to in healthcare, believing that aging will only impede her care further. Pat suggests that as she ages, she will become more of a target for discrimination, recognising how her intellect could lessen, and her mind slow. Pat frames her response as a question, suggesting uncertainty and worry, tipping the scales questioning if her sexuality will impede her healthcare or allow her to live equally.

Pat speaks negatively about her aging processes using derogatory colloquialisms like “do-lally” when describing the state of her mental health. The term ‘do-lally’ is described as ‘temporarily deranged or feeble-minded’ presenting how she perceives a dark future for herself, rife with decline, again enforcing this pessimistic outlook on aging. Whilst participants acknowledge their age, they still perceive themselves as somewhat youthful, perceiving their future as a slow, inevitable depreciation of their body and mind, presenting her future as an impending downfall in which she must prepare herself for. The use of the term ‘do-lally’ infers that she is preparing herself to ‘lose her mind’, demonstrating the negativity she feels surrounding her future. Additionally, this trivial choice of wording in comparison to more appropriate vocabulary like ‘mental decline’; demonstrates how she is uncomfortable with this notion and feels the need to provide a sense of comic relief when thinking about her future.

Additionally, Pat was not the only participant to view aging in this regressive, downwards slope, with almost all participants admitting their panic towards not being taken seriously, and having their needs ignored by care staff or residential homing services. Collectively, participants felt that their sexuality impeded their lifestyle as they aged, feeling worried about who will look after them when they are most vulnerable; as shown in Denise’s quote:

“...who the hell, is going to look after us when we are older?”

Denise presents her frustration surrounding her identity, suggesting how the intersectional factors of her identity i.e., being a woman, being older and lesbian are going to hinder her safety and wellbeing as she ages. Whilst this question is rhetorical in nature, it seems she is perhaps genuinely seeking an answer to this query, demonstrating how aging becomes a path to the unknown, waiting for one’s fate to be revealed; especially in regard to someone with multiple minority factors e.g., biological sex, age, sexual orientation. Denise’s account portrays a sense of urgency, depicting her as panicked and rushing to prepare a back-up plan. Furthermore, the questionable nature of this sentence suggests that she has no one else to turn to, unlike most heterosexual individuals who rely on children for support in their older age (Hsieh and Liu, 2021). Finally, Denise refers to herself and other lesbians using the term ‘us’, highlighting this group as different, illustrating how no

one would want to look after a lesbian, portrayed as something that must not be touched or found to be vulgar.

Similarly, Ruby goes on to talk about how as a lesbian she feels she has to abandon her identity or find an alternative method of care to live freely and safely. She states:

“When you’re old you either abandon your identity, and live miserably, or find some other way to tie you over, like with friends”.

Ruby communicates how as she reaches old age, she must either abandon her lesbian identity in efforts to fit in and be protected or organise alternate options to provide a safe environment to live authentically. Ruby frames this decision as inevitable, suggesting it is not a matter of if, but when. Despite safety being granted when denying one’s sexual identity, Ruby admits how it encourages a miserable lifestyle, mimicking her previous life of hiding her identity and living in shame. Regardless of recent legislations providing rights and equality for lesbians e.g., same-sex marriage in England, Wales, and Scotland (2014), the act of being openly lesbian in healthcare is still perceived by participants as dangerous. Ruby is not alone with her opinion, with several other participants also sharing their grievances with healthcare as they age. Denise goes on to share her decided retirement plans, explaining how she will group up with other older lesbians to ensure each other’s safety and wellbeing:

“We thought of buying a big place altogether to have this co-habiting place where everybody has their own room then we know that everyone’s OK, when we have nurses in, we are aware of what is going on”.

Denise explains her plans for retirement, presenting how she has formed a group of lesbians to participate in a co-habiting agreement in order to maintain everyone’s safety into old age. Whilst it is natural to have plans for retirement, the extent of this idea emphasises how differently lesbians are treated in comparison to heterosexual individuals, having to prepare their care from the foundations and beyond. Furthermore, the fact that care homes and other methods such as domiciliary care are not mentioned, further presents the fear linked with this line of

work; demonstrating how participants even feel unsafe in their own home and need other allies around them to ensure they are appropriately and ethically cared for.

However, Pat goes onto speak about how she has managed to maintain her identity safely, in a way that is recognisable only to herself or perhaps other LGBT+ members allowing her to live somewhat freely in her older age. Pat expresses how she has purchased a pair of rainbow print boots to ensure she is always representing her sexuality no matter what awaits in her future. Pat goes onto say:

“I want to die with my boots on”.

This phrase uses a play on words, stating that she would like to die with these boots however, reading between the lines, one could interpret that she would truly like to die in her authentic identity – that of a lesbian. These boots stand as a disclaimer of her sexuality, tethering it to her so it cannot be taken away. Through Pat grounding and ingraining her sexuality in a physical form like this, she is able to grasp a sense of permanence which has been refused to her and other participants throughout life and offer her some control over her identity. Furthermore, participants, worried of the onset of mental decline such as Dementia or Alzheimer’s, where they may forget their own identity; therefore, by Pat wearing these boots as visible markers she is able to firmly root herself to her sexuality, providing a sense of comfort as she reaches older age. Additionally, this need to cement one’s identity into a pair of boots, emphasises the lack of freedom participants have to openly express their identity, being confined to an item of clothing with a hidden message. This lack of transparency presents the turmoil that older lesbians experience when aging, battling between their safety and identity, whilst simultaneously undergoing major life changes that are encompassed within older age e.g., changing residence or dealing with one’s mortality. These factors depict lesbian aging as somewhat negative, being loaded with stress and worry in comparison to their heterosexual counterparts who do not have to worry over such minor issues.

Continuing down this worry of healthcare, Jo goes on to talk about how she refuses to visit a doctor, feeling that medicine has an ‘old-fashioned’ perspective in terms of LGBT+ lifestyles:

“I never went and got a doctor because no! No, no, no. They are still very much informed by their history in terms of people and medicine. It has a really retro mood to medicine there and I wasn’t willing to engage with it. I’ve only been here two years; I haven’t had need of a doctor, so I haven’t looked for one”.

From Jo’s account it is clear to see her negative view of healthcare, as she expresses how the medical profession is built on derogatory stereotypes and myths. Whilst healthcare settings offer the opportunity to better one’s health, and provide positive life-changing experiences, Jo holds an antithetical view against this service instead attributing it to sadness, pain, and detriment. Jo claims that healthcare services are “informed by their history” suggesting they have evolved from ‘old fashioned beliefs’ that do not align with her lesbian lifestyle; insinuating that medicine was built on prejudice and will always remain unsafe for lesbians.

Whilst the term ‘old fashioned’ does not inherently make something bad, she uses this word to convey a sense of ignorance, insinuating a lack of knowledge in caring for lesbians appropriately. Jo uses the past to insult healthcare services, using the word ‘retro’ suggesting a sense of backwardness, and bovinity, implying medicine to lack intelligence and in need of updating. This focus on archaic methods in healthcare perhaps nods to previous outdated practices that are no longer considered ethical such as LGBT+ aversion therapy. Whilst anti-gay ruling has since been abolished in the western world participants clearly still harbour a sense of guardedness towards healthcare and medicine, with several sharing somewhat extreme homophobic experiences.

Jo uses the third person term ‘they’ when describing health staff suggesting a divide, or animosity between the two, perhaps displaying the emotional distance between them. Through using these pronouns, Jo presents an impersonal attitude, ridding doctors of their personability and humility. Jo repeats the adverb ‘No’ four times insinuating urgency and panic. This repetitive, fast brevity frames healthcare as an unthinkable, feared outcome, a stark comparison to the normally positive aspects that are linked with healthcare, such as recovery or healing.

Jo reveals she has not looked for a doctor, suggesting she feels interacting with the healthcare system is only necessary where there is no other alternative;

deemed a last resort in the event her mortality is threatened. Finally, this lack of care towards her own health accentuates how participants are willing to sacrifice their own welfare to avoid prejudice. Lynn goes on to present how her sexuality affected her treatment in healthcare as she describes her experience with a possible case of breast cancer:

“I was thirty-eight and I got a lump on my breast, and I went to the hospital to have it checked, it was fine, but the consultant, I told him I was a lesbian and he said to me “Oh well we can take these off if you want?” meaning my breasts, and I was raging. I was a lesbian, so he thought I didn’t want my breasts”.

Lynn opens up about the judgement and lesbian phobia she experienced when being screened for breast cancer, expressing her rage against a possible double mastectomy because of her sexuality. The doctor’s proposal to conduct such an extreme procedure based off of her sexuality, highlights how she is viewed differently in comparison to heterosexual women. By associating her sexuality with the lack of desire to have women’s organs suggests that because she is a lesbian, she is unworthy of breasts. Additionally, through interpreting breasts in this way, frames them as sexual objects, deemed only necessary for those women who will be with males romantically. This observation plays into the deep-seated misogynistic agenda that breasts were created for males and are only of worth to those women who will be able to offer their body to men. Whilst breasts are that of a woman’s own possession they are framed as an accessory for men, often described in a tool like manner rather than the skin and tissue of a woman’s body, becoming viewed as objects rather than that of a woman (Bartky, 1990).

Furthermore, through suggesting that female body parts do not belong to lesbians, gatekeeps the components of being a woman, deeming breasts only necessary for heterosexual relationships, seducing men, or childbearing. Additionally, this focus of lesbians not needing breasts suggests that if one is to be a lesbian, they should not be desirable to men, and manufactured into an acceptable, masculine alternative – i.e., being made to have flatter chests mirroring more of a masculine physique. Whilst breasts do not make a woman, the removal of them because of one’s sexual identity, demonstrates how society tries to strip lesbians of

their femininity and pigeon holes them to the box of masculinity, in efforts to remove their womanhood.

In light of the theme above, it is clear that aging is a feared experience for participants due to their sexuality increasing their vulnerability as they reach older ages. Participants felt concerned about aging, having previously fought and protested to be visible throughout their youth, to yet again be confronted with the possibility of having to conform and hide their sexual identity, or face severe abuse. Participants felt that to secure protection, one has to either erase their lesbian identity or provide an alternate approach to retirement such as living in a shared house with trusted companions. Ultimately participants reported that aging was a negative experience, perceived as leaving behind their desired life they had worked hard to achieve, to live once again behind shadows and facades; causing distinct disconnects in participants sense of self.

SECTION FIVE: DISCUSSION

This section will discuss the findings of the research, presenting the main findings and how the outcome relates back to the existing literature. Having said that, this section will include the significance behind the results, limitations of the research and recommendations for future practitioners and scientific studies.

This study aimed to investigate the experience and attitudes towards aging as an older lesbian and explore how the complexities of being an older lesbian influenced one's identity and sense of self.

In line with the research aims, participants were questioned about their identity, exploring self-image/commitment to one's identity, and experiences/perceptions of aging. In agreement with Kehoe (1986) it was found that the combination of sexuality, aging, and biological sex played a distinctive role in participants' lives, influencing one's social, emotional, spiritual and health needs; often directing their self-image and aging experience. However, the current study framed the impact of sexuality to be rather negative, as opposed to Kehoe (1986) and Almvig's (1982) predominantly positive findings of strength, confidence, and resilience. Whilst participants of the current study showed resistance when faced with challenges, overall, the consensus was pessimistic, showing negative attitudes towards older age and a lack of confidence in one's identity.

In terms of the initial scoping review, it can be agreed that being lesbian adds additional challenges to women's aging experiences, identity, and self-acceptance. However, the existing literature on this subject appears convoluted with researchers like Kehoe (1986) and Almvig (1992) listing positive outcomes, whilst the current study and other contemporary researchers such as, Waling et al., (2019) and Hsieh and Liu (2021) reported more negative experiences; leading one to question the relevance of older literature regarding modern society and whether it is still relatable to individuals today.

Investigating this further, very little studies in the literature review were conducted since 2012 with the remainder studies being aged from 1963 onwards, again highlighting the urgency for more contemporary research. Additionally, there is a clear oversaturation of American research, with 23 of the 40 reviewed studies

being from Central America (See Evidence in Figure 2). Ultimately this dominance of American research has caused a skew in the literature, being unrepresentative of a global demographic, which provided further rationale for the current study to take place. Due to this skew in the existing literature, participants of the current study were UK born, in efforts to balance the current bias in the field. Having said that, two of the ten participants currently reside in other countries such as Scotland and Canada, however this did not seem to impact the results or group consensus.

In response to the first aim, participants expressed that their sexuality impacted their lifestyle greatly, causing significant worry as they approach older age. Participants felt that being lesbian caused a strain on their aging experience, acknowledging the privilege of heterosexual individuals and how they do not have to worry about establishing false identities/alibi's or concealing one's past. Whilst sexuality did not entirely dictate their lives as an older woman, participants felt it increased the possibility of homophobia, as they reach older age and have a higher demand for healthcare. Additionally, most participants were estranged from their family or did not mother children, causing a lack of familial support, increasing worry around their healthcare, enforcing feelings of isolation and abandonment.

Overall participants viewed aging as a negative, feared experience, viewing themselves on a downward spiral, declining into a more vulnerable state, and leaving them at risk of abuse; as supported by (Gabbay, 2002). Homophobia was the most prevalent theme when discussing one's aging process, highlighting it as a pivotal stage in a lesbian's lifespan, described as a given rather than a possibility. By describing homophobic abuse as an expected outcome rather than probability, it suggests discrimination to be a crucial element to the identity of older lesbians, proposing it to be a distinctive, shaping characteristic of this demographic. Perhaps demonstrating the key difference between older heterosexual women and lesbians aging experience – homophobia.

This study went on to validate Raphael and Meyer (1988) as participants admitted the grandiosity that sexuality had in regard to their aging experiences, directing important life choices such as relationships, residence, healthcare, and retirement. Additionally, several participants expressed they had plans to team up with other older lesbians, purchasing a shared accommodation together, in order to

ensure one another was safe and receiving the correct treatment. Participants communicated that an LGBT+ care home and/or health service would greatly alleviate their stress associated with aging, allowing them to reach out to potential partners, be surrounded by their culture, and be promised the safety needed to live authentically, age successfully, and encourage a positive sense of self. Furthermore, participants felt that access to LGBT+ spaces were poor with access becoming more difficult as one approaches older age; therefore, many had begun establishing accommodations decades in advance.

Ultimately, having sexuality be such a defining factor in one's life, framed participants aging experience as pessimistic and hopeless, with all participants expressing anxiety and/or shame as they age. Participants suggested that they would have to conceal their sexual identity in order to receive appropriate care, framing sexuality as a barrier to their healthcare; viewing care staff as anti-lesbian, dictated by slanderous myths and stereotypes as found in Randall's (1989) study.

Furthermore, participants communicated that if they had to enrol within a care home, they would fake their identity or search for euthanasia; mirroring responses of Waling et al's., (2019) study, who described dying as a better solution than being in care. Additionally, the heightened worry of abuse suggests there to have been little/no social change since participants youth, again linking back to social attitudes as old as Randall (1989), who recorded high volumes of lesbian phobia amongst care staff. Additionally, Erikson (1963,1968) stated that if one was to reflect on their life and show regret or unhappiness, perhaps from living unauthentically or not being accepted by peers, they would age unsuccessfully, resulting in dissatisfaction with life, depression, hopelessness, and a shorter lifespan. In summary, aging has clearly shown to be a negative experience for older lesbians, being a substantial barrier to accessing appropriate care, support, and acceptance of the self.

Due to older lesbians clearly having a lack of resources and support when heading into retirement and older ages; it should not be considered inappropriate to push for better practice in the future, and new updated policy changes that improve lesbian experiences and care when entering older age.

Alongside the current study, there are other papers that have also highlighted the lack of support for lesbians regarding healthcare, explaining how they are often alienated, feeling overwhelmed and excluded by heterosexist and heteronormative policies and communities (Westwood, 2016). A leading paper in this topic, Westwood (2016), found that more than 43% of older lesbian, gay and bisexual individuals lacked confidence in healthcare professionals making the right decisions regarding their care in the event that they are unable to make their own wishes, reaching up to 50% when including those without partners. Distress was higher in lesbians who did not have partners, as they are commonly assumed to be heterosexual and/or widowed; a damaging assumption to their identity and self-esteem and resulted in a lack of support in terms of their culture and self-expression. Furthermore, having this assumption made about lesbians means they then have the added distress of revealing their identity again, and having to deal with the possible ramifications that may carry. In terms of heterosexual single women, there was no increase in distress, highlighting the worrying, isolating impact that identifying as lesbian can involve within healthcare and retirement services (Guasp, 2011, p. 22).

When comparing the statistics on distress with heterosexual and lesbian individuals, (38%), it is clear that there is a universal perception of healthcare not being efficient or reliable, however, there is a much greater figure in LGBT+ populations due to homophobic stigmas in medicine (Guasp, 2011, p. 22); therefore, it is important to understand how this research can better practices and aid suggestions in improving the lives of older lesbians.

Continuing on, following these statistics, it would not be inappropriate to infer that practices have under supported and excluded LGBT+ communities from healthcare; an approach referred to by Cronin, Ward, Pugh, King, and Price (2011), as “sexuality blind”. “Sexuality blind” refers to ignoring the impact of sexual orientation in regard to health and has been proven to be further exacerbated by biological sex, i.e., being a woman (Westwood, 2016). This sentiment was also echoed in the current study as participants described the combined effect of both their biological sex and sexual orientation on their identity and aging experiences; presenting being an older lesbian as “homophobia with a side order of sexism”. Following this, it is imperative that new, emerging practices begin to involve

intersectionality in their methods of care; understanding how different factors of the identity i.e., biological sex, age, sexual orientation, social class, race, disability, intertwine to create complex support needs; and how they can be supported by practice and care staff.

Following this, it is apparent that LGBT+ specific services need to be issued into society, as participants in the current study still mirrored the distress found in older studies such as Stein, Beckerman, and Sherman (2010), often debating whether to hide their sexuality in order to receive better treatment or organise alternative methods to receive healthcare in a safer, supervised way i.e., through the help of living in groups and having home nursing. As of October 2021, The UK's first LGBT+ extra-care housing scheme is coming to Manchester, however, as it stands, this is the only LGBT+ specific care service that has been established. In order to better the outcome for older lesbians in terms of successful aging and identity acceptance, it is imperative that future research pushes for LGBT+ care services to provide the correct support for those who feel unsafe, unsupported, and isolated when planning for their retirement and/or older age. Furthermore, it is important that other areas than just retirement are not dismissed; there is also a great need for other services such as, psychological services, sexual health, general practitioners and more, as evident in Lynn's quote on p.74.

Moving on, in response to the second aim, the topic of identity was influential in this study, with participants having fought years to be authentic to be faced with the possibility of losing their identity to homophobic staff/environments or age-related diseases like Dementia. Fashion mandates have always been a staple of lesbian culture due to their poor visibility in the public eye (Webbink, 1981, Faderman, 1991), therefore several participants felt that the maintenance of their visual identity was very important. In preparation for older age, participants began to develop their own methods to symbolise their identity, such as wearing rainbow shoes, or shaving one's hair; linking to Kehoe (1986) who stated that being a minority enforced the need for overt appearance mandates that could be universally interpreted as lesbian.

Interestingly, participants felt that being a woman brought them the most grief in their day-to-day life, being the core of their discriminatory experiences; described by a participant as 'Homophobia with a Side of Sexism'. Participants felt that sexism

was a much greater issue than homophobia, as it affects more people and was perceived to be more extreme by the entire sample. Numerous participants felt that sexism was the core of 'lesbian phobia', fuelled not by anti LGBT+ ideologies, but simply a hatred against women. The analysis presented how being an older lesbian not only included the struggles of being 'homosexual', but the impact of being a woman, and the effect of being older and less desirable.

Participants affirmed this notion mimicked by Szymanski, Moffitt, and Carr (2011) expressing that being a woman made them subject to suffering, often being labelled as being weaker and inferior, a belief that also seemed to be perpetuated by age. Participants felt that being an older woman caused them to be viewed objectively as repulsive, undesirable, and predatory; branded with derogatory and aggressive stereotypes. Participants described the concept of an 'expiry date' explaining how the older one becomes, the less likeable they become, and the worse they are treated; symbolising how women are critiqued much harsher in comparison to their male counterparts, supporting the findings of Furnham and Radley (1989), who found that men tend to rate females in a more abrasive, severe way than men.

Overall, the findings presented a contrasting dichotomy of women: some who leaned into their identity, being proud of both their biological sex and sexuality, versus those who felt content within the framework of discrimination, suggesting it to be 'the way of life'. Whilst the experience of discrimination towards women is well-researched, the complexities of being an older lesbian i.e., the combined effect of biological sex, aging and sexuality, have little coverage, making this study a key paper in the field of gerontology.

Evaluation of Research

As of yet, there are no primary studies based solely on older lesbian experiences of sexism nor aging, therefore this study created an exciting discourse in need of further research. Furthermore, past studies in this sector such as Stein, Beckerman, and Sherman (2010), tend to conflate lesbian and gay issues, causing a lack of focus and comprehension. Through analysing participants issues singularly, using the relevant social context and perspective, enabled a much more detailed, clear interpretation, exploring subjects individually and avoiding the mistakes made

in previous studies. Additionally, whilst the intersectional nature of agism, sexism and homophobia have been researched previously (e.g., Kehoe, 1986) major studies have become outdated, or have been focused on other subtopics like sport or the younger age bracket making this study a fundamental piece of literature (Griffin, 1992). However, in order to fully examine the practicality of this study one must also acknowledge the limitations, including the researcher's position, bias, and impact on the study (Finlay 1998). The following section will examine the researcher's personal issues, beliefs, and judgements, and recognise how they may have affected the data and interpretations of the analysis.

The most notable quandary of this research is the sexuality of the researcher and how that could have defined interactions with the participants, and initial understanding of the data and themes. Due to being an 'outsider' it is possible that discourse could have been interpreted in a way that differed from how the participants wished. Being heterosexual means that a biased lens could have been inserted over the data, and therefore, systematically limiting participants experience in strictly heterosexual terms. For example, participants position as a minority could be emphasised due to researcher's personal disconnect with lesbianism, framing participants as weak or helpless. However, despite this criticism, the researcher had taken time to examine one's heterosexual bias before the interviewing process, following Herek, Kimmel, Amaro and Melton's (1991) advise on research design and produce; a task that hopefully aided to minimise the effects heterosexual bias occurring and having a detrimental impact on the data (Morin, 1977; Herek, et al., 1991). Furthermore, this issue was additionally combatted through the decision to use images in interviews, allowing participants to share their story through their own lens to avoid misinterpretations by the researcher.

This study vastly differs from other gerontological studies due to its use of creative methods, an approach seldom seen in the research of personal identity. Considering the researchers etic position, photo elicitation was a great strength to this study in enabling participants to feel more comfortable and encouraging rapport (Hayfield & Huxley, 2015). By using personal, handpicked images, the participants were able to control what and how the researcher perceived their experiences to be

and offered a more thorough insight into their inner environment, minimising heterosexual bias as much as possible.

Heterosexual bias was also considered when formulating the research question, taking care to not stigmatize participants or devalue them into scientific descriptions. Additionally, this research aimed to not perpetuate harmful stereotypes, only shedding light on prejudice, and allowing participants to share their own views, using their own voice. In continuation of this, participants were described in their own ways, being careful to not group them as the same due to sharing the commonality of sexuality; being their own person rather than that of a group. The methodology was highly effective at divulging data from participants, using a combination of open and closed ended questions to mimic a comfortable, conversational nature. Furthermore, the analysis was beneficial in interpreting further meaning from participants responses, enabling the researcher to gain important nuanced realisations, and running themes.

Using IPA has had many advantages; being able to analyse large amounts of discourse, analyse in great depth, not taking surface level data as truth, and uses organised categories and themes to achieve a solid understanding of one's inner world. IPA is driven by researcher understanding, relying on the researcher to guide and interpret the data in a way that makes sense for the study aims. However, for IPA to be effective, it relies on the researcher's ability to carry it out effectively, being conscious to interpret rather than narrate or describe, a common misconception when carrying out IPA (Giorgi, 2011). Furthermore, there is no definitive way to carry out this method; essentially the same study could be carried out by numerous researchers with each researcher having a different focus or interpretations, deeming this approach somewhat inconsistent and lacking empirical structure. Therefore, one's own beliefs and epistemology must align with this method for this approach to be effective. However, this critique perhaps ignores the foundations of Phenomenology, a philosophy that famously encourages uniqueness. Other critiques of IPA include a lack of clear, theoretical, and methodological foundation as voiced by both Sousa (2008) and Giorgi (2011), labelling it as a non-scientific method and a process of "anything goes" (Sousa, 2008, p.148). However, IPA has recently grown popular in the psychology community since its release due to its ease, looseness,

and freedom, with 294 IPA based papers published between 1996 and 2008 (Smith, 2011).

Despite IPA having many pitfalls it remains a strong, well-rounded approach within psychology, and was critical to understanding this marginalised area of research. However, had the data been analysed through an explicit Intersectional analysis, involving the intersections of sex, aging, and sexual orientation (King, Almack, & Jones, 2019), this research could have better summarised how these elements may intersect or be mutually constitutive; and offered a more in-depth understanding more in line with the epistemological viewpoint of this study i.e., Intersectional Feminism and Standpoint Theory, and not homogenising the demographic (Denis, 2008).

Furthermore, other intersectional factors were absent in this study such as socio-economic status as a protective factor and the impact of racism on individuals' identity and experience of aging. This study was conducted in westernised culture and therefore cannot be generalised to other areas of the world like the Indosphere, Sinosphere, Islamic and Arabic culture. Should future researchers wish to replicate this study, this research could be improved by using individuals from varied social classes and ethnic minorities in the sample to investigate how the factor of race and socioeconomic status intertwines with sexuality, age, and biological sex; using an explicit Intersectional Analysis to ensure better exploration of these topics, as stated prior in this section. Additionally, participants of the current study felt that they were invisible to society, therefore researching amongst other societies and cultures that still outlaw lesbianism, would reap great benefits, and provide ground-breaking data. However, with regard to the above mentioned, investigators should bear in mind the issue of data saturation (Guest, Bunce, and Johnson, 2006), as this study yielded a somewhat overwhelming amount of data, and perhaps would benefit from fewer participants and a more singular, narrative approach, justifying the smaller scope of intersectionality in the current research.

Despite overcoming most pitfalls, directing this study through an 'outsider' lens still had a substantial effect on this study (Hayfield & Huxley, 2015), the largest issue being access and recruitment of participants. This study incurred complication due to the high guardedness of the demographic, experiencing great difficulty when

trying to gain access into relevant groups, often being disallowed entry and deemed untrustworthy. Due to the vulnerable nature of participants, groups were very guarded and disallowed access to those who did not fit particular requirements i.e., Female, over 50 years of age, and identify as lesbian. Therefore, due to these strict regiments surrounding these groups, the researcher failed to meet the criteria to join (sexuality and age), and was assumed to be ignorant, lack knowledge and/or be viewed as a threat therefore being blocked from accessing eligible participants. However, to the researchers benefit, through taking time to understand cultural and linguistic jargon that could have created distance between the researcher and participant; the first participant was able to trust and confide within the researcher which then launched the snowball sampling technique. After gaining the trust of one participant, the researcher was able to project a positive reputation, and the sampling target of ten participants was achieved due to the building of trust and rapport within the community.

The process of 'self-disclosure' showed to be very effective in this study, as supported by Zur, (2009) and Esere, Omotosho, and Idowu, (2012) in minimising the distance between participant and researcher. As the researcher disclosed about being involved in LGBT+ social circles, participants communicated that they felt at ease, being in the presence of a known ally rather than questioning the opinions or motives of the researcher. In addition to this, prior to interviewing, participants had a short conversation with the researcher surrounding the researcher's interest in the subject, full name, educational history, and involvement within LGBT+ spaces. This self-disclosure aided participants to feel more comfortable with the researcher and enable them to feel a sense of safety, and familiarity to minimise the anxiety of speaking to a stranger.

Furthermore, deliberate self-disclosure was often used mid interview, disclosing the researcher's medical status of 'Type 1 Diabetes' in order to provide a sense of relatability to participants who felt 'different', judged or had shared denial or unhappiness towards their identity. In justification of this decision, many studies have shown deliberate self-disclosure to be very effective in LGBT+ populations, increasing trust and a sense of alliance (Esere, Omotosho, & Idowu, 2012). Whilst the researcher was still considered an 'outsider' in terms of sexuality, one received a

sense of affiliation amongst participants because of one's ability to relate to feelings of abnormality and prejudice. Furthermore, combined with the researchers counselling background, almost all participants were able to overlook the distance between themselves and researcher, and provided great detail into their experiences, anecdotes, and personal beliefs.

Having discussed the possible disadvantages of the research position, being an 'outsider' also could have created advantages in interview scenarios. As 'outsiders' are naturally assumed to be inexperienced, community specific elements were often explained in greater detail. For example, through being an 'outsider', one is not expected to be aware of lesbian community specific information e.g., The Gold Star Lesbian phenomenon, and therefore can attain a detailed breakdown of elements that may be overlooked by an 'insider' researcher (Hayfield & Huxley, 2015). This experience offers a more in-depth analysis, as the researcher is able to understand more comprehensively and can then offer more complex and accurate interpretations of participants experiences. Furthermore, this detailed breakdown of community specific issues also allows laymen readers to understand in clearer detail. Additionally, being an 'outsider' allows one to ask somewhat naïve questions and therefore reach data that an 'insider' may feel is uncomfortable to ask, however the possibility of withholding information or providing expected responses rather than the true attitude of the participant is still possible. Therefore, if this study were to be repeated, it would be interesting to observe any differences that having an 'insider' perspective could reveal.

SECTION SIX: CONCLUSION

This study offers new insights into the lived experiences of older lesbians, demonstrating the significance that identifying as an older, lesbian, woman has regarding aging and identity; a qualitative approach to show how older lesbians are differently impacted in comparison with heterosexual-identifying women.

Based on this research it can be concluded that the factors of lesbian phobia, sexism and agism have had a distinct impact on older lesbians' identity and aging experiences. To recap, through identifying as an older lesbian, participants have endured detrimental effects to one's sense of self and wellbeing; being fearful of healthcare settings due to the prejudice and medicalisation of LGBT+ individuals in their youth. Participants showed strength, being resilient in trialling times, however lacked confidence in their identity as they approached older ages, feeling unable to live authentically, or reach out for support. Furthermore, the effect of biological sex was exponential, highlighting pivotal sexist ruling that still exists amongst society and the prolonged effect of the patriarchy.

In conclusion, this thesis fulfilled the research objectives, providing an extensive insight into how older lesbians experience aging, and how identifying as an older lesbian, impacts or influence one's sense of self or identity. In doing so, this thesis accomplished its aim of adding empirical literature to the gaps in the field, providing much needed accounts from older lesbians and delving into topics seldom researched i.e., sexism, ageism, and lesbian phobia. Whilst this research was fundamental in understanding the impact of minority characteristics on the identity and aging experiences of older lesbians, due to the extended literature being so scarce (Ristock, 1991), further research is needed to support this thesis in completely filling the gap that exists in knowledge.

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APPENDIX:

A1: Online Flyer



Participants

Are you a self-identified Lesbian?

Are you 55 years old or above?

I am a post-graduate student looking for participants to take part in research related to the identity needs of older self-identified lesbians.

If you are interested in taking part or would like more details, please email the researcher Emma Shiel: *emma.shiel@hud.ac.uk*

A2: Message to Gatekeepers:

“Hi there! I noticed you were the main moderator on [INSERT GROUP NAME HERE].

I am a Master student at the University of Huddersfield, and I am carrying out interviews on lesbians aged 55 years and older, to understand their experience of aging and how their sexuality may impact their life.

Is it possible to either gain access to the group to post my advert, or if preferred, I share the advert with yourself to be posted on my behalf?

All research will be confidential and participants will be sent a copy when it has been completed.

I have attached both the advert and participant information form for transparency.

Thanks so much,

Emma Shiel”

A3: Participant Information Sheet:

Participant Information Sheet

If you have any questions about this study, please contact Emma Shiel via emma.shiel@hud.ac.uk, or their supervisor Dr Sarah Jane Daly on s.daly@hud.ac.uk or Kagari Shibazaki on k.shibazaki@hud.ac.uk.

What is the Purpose of This Study?

The purpose of this research is to:

- a) Understand the experience of aging as a lesbian.
- b) Examine the identity needs of older lesbians.

Am I eligible to take part?

If you identify as a lesbian and are over the age of 55 you are eligible to take part in this research.

Do I have to take part?

It is not a personal requirement to take part in this study, however, should you feel happy to participate you will be provided a consent form and any information desired. If you do not feel happy to take part, you may ignore this document, and your contact details will be discarded using McAfee Live Safe Antiviral Shredder and will be considered unrecoverable.

What will I need to do if I take part?

You will need to supply a maximum of 5 images in which you feel are significant to you with respect to how you feel about aging and the impact it has on your sexuality. You may capture images yourself or use images that are in the public domain *i.e.*, *google* – it is completely up to you. You might wish to capture photos of items of clothing, objects, books, houses, people, scenarios, places etc. You will then take part in an interview where the aim is to discuss each image. The interview will last approximately 1 hour.

Are there any risks if I take part?

It is anticipated that there are no risks associated with this taking part in this research. However, should you feel affected by anything discussed in this study, you have the right to withdraw any day before 1st April 2021, furthermore, you will be given contact details of relevant agencies that may appeal to your circumstances.

How can I withdraw?

You can withdraw from this study any day before 1st April 2021, without giving reason by emailing the researcher Emma Shiel on emma.shiel@hud.ac.uk.

Will my identity be discussed?

All participant information will be kept confidential and identification factors will be anonymised. A pseudonym will be given to you in transcription. All information that could lead to participants being identified will be removed or changed (*e.g., towns or places of work*). Confidentiality will only be breached if there is suspected harm to the participant or another individual. In the event of danger being imposed on the participant or others, it will be reported to the supervision team.

What will happen to the information I provide?

The information you provide will be analysed and included in a master's research psychology thesis. It may later be published under the research of the University of Huddersfield. Interviews will be recorded via iPhone and extracted to secure storage. Interview transcriptions will be analysed one by one and will be published in the study appendix. Images will not be shown in the write up and will be discarded after the interview has taken place. Images will be described vaguely in the write up for the purpose of context.

The General Data Protection Regulation (GDPR) and Data Protection Act 2018

You are legally obligated to be aware of the following:

- The University of Huddersfield is responsible for the secure management of the data i.e., the 'data controller'.
- The legal basis for the collection of the data is 'a task in the public interest'.
- The researcher Emma Shiel is the recipient of the data i.e., 'the data processor'.
- If you wish to complain about the management of your data, you can contact the University Solicitor (as the Data Protection Officer). If they are not satisfied, you may take the complaint to the Information Commissioner's Office (ICO).
- Your data will be stored in a two-factor authentication secure vault, in accordance with the requirements of the General Data Protection Regulation (GDPR) and Data Protection Act 2018. All information will be anonymized and untraceable to your identity.

Who will have access to the data?

Only the researcher will have access to the study data, however some information may be shared with the supervision team Dr Sarah Jane Daly and Dr Kagari Shibazaki.

Ethical Approval

This study has gained ethical approval from the Research Ethics Committee at the University of Huddersfield.

How can I find out about the research findings / Who can I contact for further information?

You can contact me directly on emma.shiel@hud.ac.uk or my supervisors:

Dr Sarah Jane Daly on s.daly@hud.ac.uk

Dr Kagari Shibazaki on k.shibazaki@hud.ac.uk.

Participant Wellbeing

Participants have the right to skip and/or avoid topics and questions, furthermore they will also be given the opportunity to ask their own.

There are very low risks to taking part in this study, if you are affected by anything that was discussed in this study and need to seek help, there are a list of emergency contacts below.

- Rainbow Mind Mental Health Support: *0161 212 4880*
- Lesbian Support Helpline: *0300 330 0630*
- Stonewall LGBT Support: *08000 50 20 20*
- Samaritans: *116 123 (24 hours) or jo@samaritans.org*

A4: Consent Form:

Participant Consent Form

Please tick the appropriate boxes.

	Yes	No
I have read and understood the information.		
I have been given the opportunity to ask questions about the study.		
If I asked questions they have been answered satisfactorily.		
I understand that I can withdraw myself from the study at any time before 1 st April 2021 without explanation.		
I agree to the following interview being digitally recorded and the contents being used for the purposes of research.		
I understand that the images will be described but not included in the study.		
I understand that the research will be anonymous, and my identity protected.		
I agree to disclose to others that may be included in images the purpose of the research and contact details of the researcher.		
I agree to the data (<i>in line with conditions outlined above</i>) being archived and used by other bona fide researchers.		
I would like to see a summary of the data in which I feature. (<i>a small synopsis of your analysis</i>)		
I would like my name acknowledged in the report (<i>without linking it to consent or quotation</i>).		

Name

Date

Signature

A5: Debrief Form:

Debrief Form:

Thank you for taking part in our research study.

If you have any questions or concerns, please contact the researcher *Emma Shiel* on emma.shiel@hud.ac.uk, or their supervisor *Dr Sarah Jane Daly* on s.daly@hud.ac.uk or *Dr Kagari Shibazaki* on k.shibazaki@hud.ac.uk.

What Was the Purpose of This Study?

The purpose of this study was to:

- a) To understand the experience of aging as a lesbian.
- b) To examine the identity needs of older lesbians.

What Next?

This research will be used to form my master's thesis and it is hoped that this research can add to the body of literature related to older lesbians' experiences. There are very few studies primarily on older lesbians therefore, this study will provide empirical research that will 'fill the gap' and provide representation for aging lesbians.

Data protection

Participants can be confident in the knowledge that all their details will be completely anonymous. All information that could lead to participants being identified will be removed or changed (*e.g., towns or places of work*). Participants can withdraw their data without reason any day before *1st April 2021*.

Participant Wellbeing

If you feel you have been affected by anything that was discussed in this study and need to seek help, there are a list of emergency contacts below.

- Rainbow Mind Mental Health Support: *0161 212 4880*
- Lesbian Support Helpline: *0300 330 0630*
- Stonewall LGBT Support: *08000 50 20 20*
- Samaritans: *116 123 (24 hours) or jo@samaritans.org*

A6: Participant Image Descriptions

Participant One: Jo

- Image 1: Jo smiling surrounded by her two grandchildren at a Gay Pride Festival.
- Image 2: A T-shirt with a rainbow heart stating 'It's about the people, people'.
- Image 3: Jo and her wife, son, and son in law.
- Image 4: Jo at a polling station with her sons.
- Image 5: Jo in a witch hat.

Participant Two: Lesley

- Image 1: Lesley in a pub, drinking a pint of beer in a tweed suit and brogues.
- Image 2: Lesley in a suit with another suited woman leaning on a brick wall.
- Image 3: Lesley suited up in a hotel room.
- Image 4: Lesley having a photo shoot in a flowery suit leaning on a cabinet.
- Image 5: Lesley having a photo shoot in a flowery suit sat on a chair.

Participant Three: Jane

- Image 1: A rock with the word 'Hope'.
- Image 2: Jane's daughter.
- Image 3: Jane's son on a boat.
- Image 4: A field of flowers.
- Image 5: A homemade grey, cloth wreath.

Participant Four: Lynn

- Image 1: A young picture of Lynn and a family member at a wedding being flower girls.
- Image 2: A labrys pride flag.
- Image 3: A war picture of Lynn showing a piece of equipment to the General.
- Image 4: Lynn's daughters.
- Image 5: Lynn and her wife on holiday in Lesbos.

Participant Five: Pat

- Image 1: Pat on the beach with her dog.
- Image 2: A pair of rainbow boots.
- Image 3: Pat in the army playing a drum.
- Image 4: A still image of Pat on the news.
- Image 5: Pat's family at a Gay Pride festival.

Participant Six: Liz

- Image 1: Liz with a shaved head.

- Image 2: Liz's grandson
- Image 3: Liz gardening with her family in America.
- Image 4: Liz in a fancy-dress wedding outfit.
- Image 5: Liz and her wife at a photo shoot.

Participant Seven: Denise

- Image 1: Denise at a heavier weight with her wife at a wedding.
- Image 2: Denise after a weight loss in a swimming pool.
- Image 3: Denise and her wife at a restaurant.
- Image 4: Denise with a halo on with the words 'no angel!' written across the screen.

Participant Eight: Ruth

- Image 1: A collage of patterned art.
- Image 2: Ruth with a hat on in the cotton fields in Asia.
- Image 3: Landscape of Norfolk beach.
- Image 4: Ruth and her daughter having a glass of wine after the COVID-19 restrictions eased.

Participant Nine: Anita

- Image 1: A picture of the song, 'It's different for Girls' by Joe Jackson.
- Image 2: The number 35.
- Image 3: A warning reading 'handle with care'.
- Image 4: Anita and her family at a Christmas party.
- Image 5: Anita's girlfriend and her dog.

Participant Ten: Ruby

- Image 1: Ruby signing a Gay Pride flag.
- Image 2: A motorhome.
- Image 3: Ruby and a group of older women at a Gay Pride Festival.
- Image 4: Ruby and her ex-partner on holiday together.
- Image 5: One feminine woman and a masculine appearing woman.

A7: Interview Guide

Opening Script of Interview:

Hi there, my name is Emma Shiel, and I will be interviewing you today. Are you happy with the content of all the documentation you have had access to so far including the participant information sheet and consent form?

Thank you again for taking part, feel free at any point to ask questions, skip topics, or stop all together. This interview will be around an hour long and it will later be transcribed to be used in my master's research. This research is focused on your own unique experiences of being an older lesbian, so please answer as truthfully as possible. Are you happy to begin?

Closing Script of Interview:

I do not seem to have any further questions unless you would like to add anything yourself at the end here?

-PARTICIPANT ANSWER-

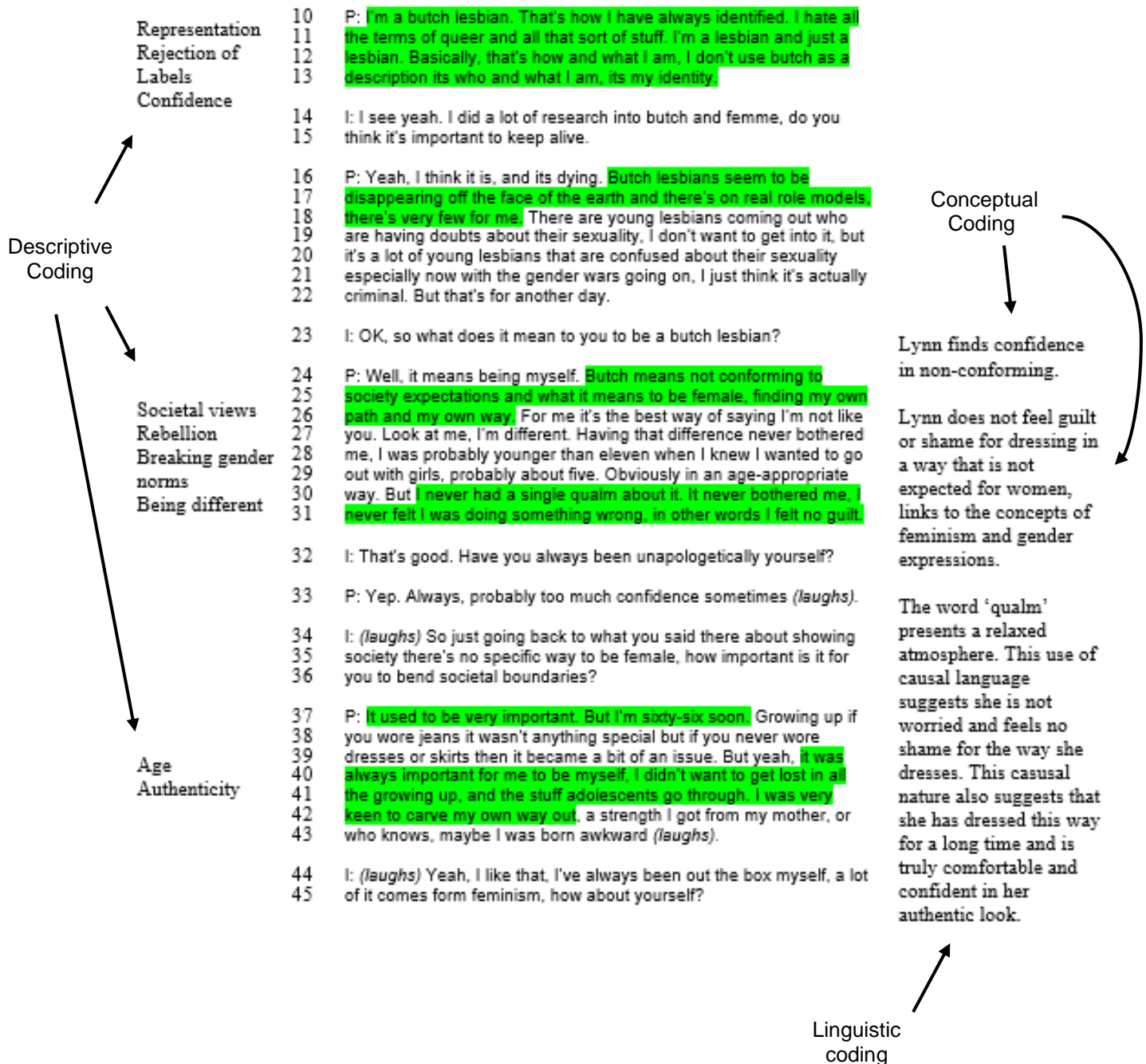
OK, thank you for taking part today, I'll send you through a debrief sheet to refresh you of any relevant information, let me know if you have any questions or further enquiries about this study. Thank you again.

Possible Questions:

1. How would you describe yourself and your identity?
2. How was it like picking these images?
3. How important is it for people to know your sexuality?
4. Do you feel confident in your identity?
5. Can you describe the experience of being an older lesbian in current culture?
6. What is it like to be a part of older lesbian culture?
7. Do you feel there is good representation?
8. Can you explain any struggles of being an older lesbian? **FOLLOW UP QUESTION:** Can you name some positive experiences?
9. Can you give an example of a time that your sexuality changed the way you were treated?
10. Can you tell me about any support you are aware of that is specifically for older lesbians?
IF NONE: Do you feel this is something that you would improve your lifestyle?
11. Can you tell me about a time you felt discriminated against by the public or a professional body?
IF NO: Do you feel as though you felt supported?
12. Have you ever been worried that your sexuality will impact your future i.e., retirement, healthcare etc?

13. How and when did you tell others about your sexuality? **FOLLOW UP QUESTION:** Can you describe any changes you experienced after coming out?
14. How do you feel society has changed their attitude towards the lesbian community as you have aged?
15. Can you describe to me why this image is meaningful to you?
16. Can you give an example of how your sexuality has changed the way you think, act, or behave over time?
17. How has your sexuality impacted your friendships? **FOLLOW UP QUESTION:** How many members of your family keep in close touch with you?
18. Tell me of any changes in your life in the last 30 years regarding your sexuality?
19. Can you tell me about a time you have felt compelled to tell someone about your sexuality?
IF YES: Can you give more detail?
IF NO: Can you tell me about a time you have felt compelled to hide your sexuality?
20. Do you recall a time where you were disadvantaged because of your sexuality?
IF YES: Can you give more detail?
IF NO: Do you recall a time where you at an advantage because of your sexuality?
21. Can you tell me about a time you felt discriminated against by a friend or family member?
22. Can you tell me about a time you have been manipulated or threatened because of your sexuality?
23. How has your sexuality determined your career or lifetime goals?
24. Describe how your healthcare has been affected by your sexuality.
25. How would you describe the quality of healthcare you receive?

A8: Examples of Coding Strategies



A9: Example of a Table of Themes

THEME	SUB	LINE NUMBER	QUOTE
AGE	Being an older woman	30-31	I identify as their nanna.
	Being an older woman Attitudes towards younger people Self-expression Expressing of gratitude for her current rights	37-39	Pride is important to me, and in a way that different to younger people, when this was our one day to express ourselves in a city, it was so important.
	Generational attitudes Heteronormativity Waiting for older generation to die out Views younger generation as a beacon of hope	141-145	My generation are absolutely heteronormative. They just don't think. Back in our day we didn't exist. They think that inclusive language is some sort of bizarre politically correct way to oppress them, and I just enjoy the fact that they're old and they will die soon.
	Generational attitudes Lack of education in older generation	149	young people can be educated but old people ... oh my god, no.
	Religion	418-422	I was at a meeting with them maybe a year and a half ago where the topic of conversation was <i>'what were your religious upbringings and did that impact on your coming out?'</i> , and there were maybe twenty-five over fifties there, and everybody there had some kind of a religious upbringing,
	Age of coming out	425-428	all around the room people are saying <i>"I didn't come out till my husband died and he was sixty-seven"</i> , or saying they came out when they were fifty-three or forty-nine,
	Generational differences Acknowledging change	432-434	Wow, people who are even almost seventy before they came out, but then there's these teenagers and its just – life!
	Generational attitudes Waiting for older generation to die out Lack of education Invisibility Distrusting of older individuals	461-466	the sooner the old people die the better and that's a shame because I'm one of them. But the need for education, there's a fear of the unknown. Especially in my age category. They think they didn't know anybody that's non-heterosexual, yeah you don't know because you're being hateful and they're not telling you, there's that.
	Ageism Invisibility Double tier minority status	507	We were invisible because we were old
	Ageism Invisibility	527-530	they just walk past me they don't see me at all, because older women don't matter. I think also that's not just a gay problem, but an age problem.
SEXUALITY	Acknowledging their sexuality	33-35	The photo represents me as an older woman, with children, it represents me as a participant in the greater gay community.
	Representation Escapism	52-55	I didn't have any context for gay women I didn't know they existed; it was just a complete invisible thing. So, I spent most of my twenties drunk, just trying to escape form this weird world that I didn't if fit into.
	Emphasis on historical aspects	60-61	that continuity and importance of what it means to be part of a pride celebration
	Representation Invisibility	90-94	If I would've known and if we would've honoured that silver anniversary, it would have shifted my whole world view, it would have opened up the possibility of the possibility and I wouldn't have needed to be

		drunk for ten years right. They were completely invisible
Representation Invisibility	100-101	I had no idea that women could be together sexually until I was about twenty-five.
Invisibility Representation	119	nobody had ever heard of a lesbian widow
Pride / confidence in identity	125-126	I will then tell them actually I was with a woman.
Representation Invisibility Heteronormativity	155-157	they were widows, and all married with men. There was an atmosphere, a heteronormative atmosphere.
Withholding Insecurity Fear	160	I said I had a partner at home, I never gendered her
Lack of lesbian specific support groups	164-167	who am I going to talk to? I've got this wonderful group who does bereavement and has been there working through diagnosis and in death. But my story will only make sense to them if come out.
Religion Worry of not being accepted	168-171	A lot of them were just so involved with the Baptist church that runs the area, I was really concerned that it would cut them off or it would cut me off from their support.
The use of a facilitator	177-179	I will never know if that was a personal paranoia that cut them off or if the facilitator worked them through particular issues,
The use of a facilitator Acceptance seems easier when the person is already known	190-193	I think I may have had the advantage that I already had four years with them, it wasn't just here we have a lesbian with a dead wife who wants to join. This was more like our friend Jo, and this is her reality.
Self confidence Self-acceptance Proud of sexuality	348-353	whereas now, hello, it's all on the surface if you want to know I will tell you. There is nothing shameful about me, I'm not responsible for others reactions or behaviours. So yeah, like me or don't like me not my problem, I'll wake up with me tomorrow and you won't be there.
Worry Homophobia Societal views / prejudice	379-381	She was very concerned when I came out to her that the first thing she said was <i>"but you'll get beaten up, if you're gay you will get beaten up"</i>
Presenting their sexuality Proud of sexuality	395-397	I have a rainbow bumper sticker on the car and have done for years and years so everyone who saw me just knew. Plain and simple.
Societal attitudes Stereotypes	489-490	she said to me how surprised she was that I was normal.
Stereotypes	492-497	she went on this sermon about how she had realised that we were just really normal and just made dinner and paid the bills, went to work, and walked the dog. That wasn't what she thought lesbians were. I think for her there was still that swinging form the chandelier everyday kind of idea that did us all a disservice.
Predatory	503-505	The word predatory gets added not lesbian a lot. A predatory dyke, she looked at me, she wants me, she's dangerous.
Invalidation Perhaps not seen as a lesbian if they are not in a relationship	577-578	we don't have to be in couple to be queer.
Representation	579-585	I've never heard a news story that says lesbian says tax rate is wrong. Just to be writing those letters and to say I am a lesbian, and this is why I think this is a problem and

			then that goes into the MP's library and in their files and archives and one day a student or researcher like you is going to find that and read it, and it matters. It matters. It matters to me that those bodies of work exist, from my place.
	Representation Visibility Age Media Background	605-612	I would love to see more women couples and single gay women, it is needed. But they are out there, women like me, they just don't necessary seek the spotlight anymore. We've done a lot of work. All the pictures on the news are all women under forty, because they still have the energy to be involved, I know there will be a lot of older women involved but they are just not medias choice but also, they don't push their way to the front, they do it in the background, always.
	Representation	619-620	I love that I feel like someone will read this and see my name but that's not about look at me, it's for change.
SOCIAL CHANGE	Being thankful for change Recognising change	79-80	It's just such a different mentality it really is.
	Recognising change	108	Well today there's just no comparison.
	Being thankful for change Recognising change	452-458	as I got older, to aspire to a world where people can be who they are and be free from judgement and prejudice or any of that, yeah so wonderful. There was a story I saw about a man in his late eighties who now is shifting to an identity that feels more authentic, how awesome is that? To live long enough to live as yourself.
	Changing people's minds with people rather than resources	472-476	It's going to require people physically being with them, there's no " <i>here read this book and it'll change your mind</i> ". It needs to be meeting people and see people and keep people safe in that circumstance too, but we have to do it for sure.
	Changing people's minds with people rather than resources	478-481	when it's a personal relationship, someone you love and care about like your son, it's very different than some strange bogeyman who's going to attack the children. We have to bridge the gap.
MISOGYNY	Misogyny	94-96	in the UK it was never illegal for women because Queen Victoria didn't believe in it, the ladies would never do that,
	Overlooked Men Misogyny	525-526	It's so easy to be at pride and be overlooked when the men come along.
	Misogyny Taboo Age Sex Deviance	540-551	I think it's all women, we are all deviant if we are older and dating. Of course, older men who want a woman they want a young sweet one. In popular culture as well there's this idea that past menopause women are no longer sexual being which is a crock. There's also this entrenched sexual misogyny, that older women's sex organs are scary, or suspect or maybe a bit horrible, people will laugh at jokes about having intimate relations with older women, oh you don't want to go there they will say, but why? Charlie Chaplin fathered a child at eighty-eight with somebody very young, but then if an older woman engages in sex nobody wants to talk about it and its disgusting.
INTERNET	Connecting Socialization	98-99	we didn't have that communication, and access to information that we do now

HEALTH	Lack of representation in healthcare Lack of education on LGBT healthcare/lifestyle	119	nobody had ever heard of a lesbian widow
	Focus on being treated for illness rather than the sexuality	185-186	my bereavement was treated as a bereavement, and I was a widow and the lesbian label just kind of evaporated.
	Homophobia Healthcare issue Fear of healthcare attitudes	217-221	I went to the GP, and I asked for a referral, and I said to somebody I would prefer them to be a woman and I would prefer them to be gay positive and she looked at me and she said <i>“our doctors are professionals, if they are against the gays they will not say so”</i> .
	Lack of faith in the healthcare system Fear of healthcare attitudes Avoiding healthcare	230-233	It doesn't make you feel comfortable and or happy to go and look for a doctor or visit a doctor, I haven't seen a doctor in twelve years. I just avoid the medical system as much as I can.
	Healthcare issue Unfair care Homophobia → Link to Misogyny	240-246	Lesbians were turned away from having PAP tests because we were told we didn't need them if we weren't having sex with men. We had a psychiatric nurse who had come up with the concept of the temporary lesbian, who said after you've had a divorce or left an abusive relationship, they turn lesbian but they're not really, it's just temporary because apparently, they haven't found the right man yet
	Fear of healthcare attitudes	249-250	I don't know if their masking some sort of homophobia, so I don't want to put myself there.
	Homophobia Healthcare issue Misogyny → link to Location of residence	253-256	I don't know how much news you hear from the states, but pharmacists can choose not to serve gay people because it's against the pharmacist's religion. There's bizarre stuff around medication, medicine and healthcare and women there really is.
	Positive experience	260-262	I must say when Brenda was dying, I was really well treated by the hospital where we were. Gosh that's interesting, the most embracing, accepting place was the funeral home.
	Not being taken seriously Having their relationship ignored Invalidation → Link to misogyny	271-277	She had been divorced for more than twenty years and we had been together for seventeen years, but they wanted the name of the ex-husband, and I was like excuse me? My name didn't matter, we had joint income tax, we had been living together we were common law out and about in the community, but my name was just down as the informant of the death. But her twenty odd year ago ex-husband got his name on there.
	Fear of healthcare attitudes	297-302	I never went and got a doctor because no! No, no, no. They are still very much informed by their history in terms of people and medicine. It has a really retro mood to medicine there and I wasn't willing to engage with it. I've only been here two years; I haven't had need of a doctor, so I haven't looked for one.
Friends in danger / bad experiences	287-289	I've heard many couples where DNA family steps in and stops the partner but thankfully I dint have any of those problems.	
RESOURCES	Outdated resources / research → Link to Generational attitudes	197-204	There is a text about lesbian widows I read, the only one with that in the title, it was hugely expensive, but when I got it, it was written in the late nineties. So, her vocabulary that she

			used, to divide gay and not gay were women who were married as compared to gay women. Well as you know, we've had marriage legislation for a while now so reading it, it always stops me because being married does not always mean 'with a man' in my head.
LOCATION OF RESIDENCE	Acceptance and representation of LGBT people across the country Creates pockets of isolation	214-216	When I lived in ____ it was very French 12% English there, very roman catholic, very unfriendly sort of a place for gay people.
LANGUAGE	Language	325-326	I work very hard at being inclusive and using inclusive language
	Language	331-33	I always find language that takes gender completely out of it because it doesn't matter.
POLITICS	Politics Stick-it-to-the-man Power	560-564	I identify as a political creature, voting, educating, writing to my representatives, local or federal it's a very big part of who I am, it's how I attempt to make a difference in the world. Engaging with those who have authority and power in the system
	Feminism	570-571	I identified very much as feminist before I came out. I think lesbian feminism then just kind of doubles it up.
	Feminism Politics	573-575	anything that impacts women badly is going to impact a lesbian couple at least twice as badly,

A10: List of Initial Sub-Themes Across All Transcripts

<p>Acceptance Access to partners Acknowledging change Age Anger Assumptions Attitudes towards younger people Authenticity Background Being different Being forced to go back into the closet Being older adds another tier to isolation Being thankful for change Breaking gender norms Building their own support circles Butch / femme Call for personal outreach Camaraderie Care home residents are small minded Cause for action Changing people's minds with people rather than resources Children Community Connecting Dating difficulty Denial Detached from lesbian culture Deviance Difficulty finding things in common with aging population. Discrimination from council/Gov Dismissal of sexuality Distrusting Does not follow lesbian norms Double tier minority status Due to their age, they have seen more violence Education Equality Escapism Exclusivity Expressing of gratitude for her current rights Family Fear Feeling like an outsider Feels more comfortable in a male environment Feminism Financial burdens Friends in danger / bad experiences Frustration</p>	<p>Gay-friendly environment for older lesbians Generational attitudes Guardedness Guilt Hard to distinguish intentions Harder to break out of heterosexual life Healthcare Heteronormativity Heterosexual Women Homophobia Hypocrisy Identity Impressions Insecurity Internal change Internalized homophobia Internalized oppression Internet Invalidation Invisibility Isolation Judgement Lack of access into the community Lack of areas to drink/party together Lack of awareness Lack of community support for women who have had het relationships Lack of confidence Lack of contacts Lack of diversity in care homes Lack of family support Lack of financial support Lack of future commitment Lack of gay support for single lesbians in the pandemic Lack of in-person face-to-face outreach – further perpetuated by the pandemic. Lack of job security Lack of knowledge how to create an open environment/atmosphere Lack of knowledge in younger generation Lack of lesbian identity Lack of lesbian spaces Lack of older lesbian support and friendships Lack of resources/activities for older women. Lack of respect in care home residents Lack of staff involvement Lack of training Lack of variety and diversity in older lesbian groups Language Lesbian erasure Less night life for women Letting things go Living in a man's world Location</p>	<p>Losing identity Losing sense of self Losing what they fought for Loss Male orientated homophobia Masculinity Maturity Media Medicalization of gay people Men Misogyny Negativity Not being able to have children Not taken seriously Novelty Old fashioned views in residential homes Online based support Online support is not sufficient Openness Outdated resources / research Overlooked Pandemic Patriarchy Politics Positive experiences Power Predatory Prejudice Presentation Radical feminism Rebellion Rejecting gender norms Rejection of modern labels Rejection of society Relatability and like-minded people Relationships Relaxed atmosphere around other lesbians Religion Representation Self confidence Self-acceptance Self-expression Setting an example Sex Taboo Sexualisation Sexuality Shame Socialization Societal attitudes Stereotypes Stick-it-to-the-man Strength Struggle</p>	<p>Taboo TERF – Radical views perhaps from growing up in marches The use of a facilitator Tiring Tokenism Too old to make change Tradition Transition Used to being an outsider Uses derogatory terminology to empower lesbians Views younger generation as a beacon of hope Visuality Vulnerability Waiting for older generation to die out Womanhood feels threatened by transgender individuals Worry</p>
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A11: Reduction and Clustering of Themes

Acknowledgement of current homophobia
Age
Community's (LGBT and Het)
Difficult in accessing partners
Difficult to access
Difficulty in understanding intentions
Discrimination
Education
Estrangement
Family
Fear of coming across predatory
Feminism
Generational differences
Geography concerns
Healthcare
Homophobia
Identity and Sexuality
Inclusivity
Internet
Invalidation
Isolation
Job security
Lack of children = Lack of support of healthcare security
Lack of resources: education, government support, staff training, financial support, security for the future
Language
Living in a man's world
Location of Residence
Minority factor
Misogyny
Need for change
Old fashioned views
Pandemic
Politics
Radical Feminism
Relationships
Representation
Safety concerns
Six degrees of separation
Small dating pool
Social Change
Societal attitudes
Support
Taboo on lesbian sex and older women
TERF

A12: Participant 1 Transcript

Jo:

I: Hi there, my name is Emma Shiel, and I will be interviewing you today. Are you happy with the content of all the documentation you have had access to so far including the participant information sheet and consent form?

P: Yes.

I: OK, thank you again for taking part, feel free at any point to ask questions, skip topics, or stop all together. This interview will be around an hour long and it will later be transcribed to be used in my master's research. This research is focused on your own unique experiences of being an older lesbian, so please answer as truthfully as possible. Are you happy to begin?

P: Yes.

I: OK, so first of all, how was it like to pick these images?

P: It was really interesting. Because with that lens of how I identify, like does this represent me. This image. And what about me does this image represent because I obviously rejected a lot of images. So, it was very insightful, what was most insightful was that I identify very much as a solitary individual, I've got lots of friends in community and all of that, but I am a loner. But then when I looked at it and there's me with the grandchildren and me with the kids and I thought, well I know I might think that but actually I'm very much part of the family. So that was an interesting insight.

I: Oh right, would you say you learnt a lot about yourself during this?

P: Absolutely.

I: Lovely. So, in the first photo, can you tell me about this picture, what's going on there and why you chose it?

P: It was pride, I think 2014, to those little children I identify as their 'nanna'. I chose it in part because I'm wearing a shirt with the pansexual symbol on it which I think is important in terms of the hearts not parts mentality. The photo represents me as an older woman, with children, it represents me as a participant in the greater gay community, even before COVID-19 I wasn't active in the pride committee or anything, but I did always attend the events. Pride is important to me, and in a way that different to younger people, when this was our one day to express ourselves in a city, it was so important. It's very different now but it's still so important to me that I go back every year as part of that pride event. It's a very happy day, and because I go back every year to pride wherever I am, it expresses the continuity of my involvement in the community if that makes sense.

I: I see. So, would agree that the climate that we live in now is more acceptable than when you were a child?

P: Oh yes absolutely. Oh my god yes, yes, yes, yes.

I: So how is it like now to go to a pride event in a big city and celebrate who you are?

P: Well, I didn't come out until I was thirty, because, it was not, it just wasn't. I didn't have any context, as women in my twenties, in my teenage years, I didn't have any context for gay women I didn't know they existed, it was just a complete invisible thing. So, I spent most of my twenties drunk, just trying to escape from this weird world that I didn't fit into. So, the first pride event I went to was in Toronto in the late 80's it was one lane of the street that got blocked off. It was a few thousand people because it was a big deal, we were celebrating twenty years since stonewall, so that twenty-twenty, looking back whilst looking forward. Again, that continuity and importance of what it means to be part of a pride celebration, I do honour those historical things. There were handmade banners, there were no computers in those days to be making big graphic things, so we made our own placards and created our signage and stuff. It was very much informal and casual in a lot of ways, and it was very much the people who marched were openly gay in most of their life, there was a lot of people in heavy makeup or in clown outfits so that they couldn't be identified. So, there was still secrecy, and of course back then we had people with AIDS, riding on the backs of trucks and honouring lives lost. We were right in the middle of the pandemic at that point too. There was this bittersweetness, but there was an insistence on being physical and being in the city. The royal bank was there, with its big thing, covered in gay things, they're celebrating getting gay people getting to put money in their bank, the school bus now, our local one, their slogan is *'everybody welcome here'*. So, teachers, pupils, gay straight, bi, are all part of that and they invite students to ride on the bus and walk on the bus. It's just such a different mentality it really is.

I: It's lovely to hear you have such an open lovely place to live in because, obviously it's not the same story for everyone else. I heard you say in the middle of all that about the invisibility, do you feel that when you were younger, gay people like yourself, were invisible?

P: Absolutely. I know now that my dad's cousin who is considered older than me, her, and her friend who they met in nursing school, who lived together their whole life. I figured out they had been together twenty-five years when I turned fourteen. If I would've known and if we would've honoured that silver anniversary, it would have shifted my whole world view, it would have opened up the possibility of the possibility and I wouldn't have needed to be drunk for ten years right. They were completely invisible, and of course you know, in the UK it was never illegal for women because Queen Victoria didn't believe in it, the ladies would never do that, so and my family, my mother was raised under Queen Victoria, that mindset was still there, we didn't have that communication, and access to information that we do now, so yeah totally invisible. I had no idea that women could be together sexually until I was about twenty-five.

I: Wow. So, would you agree if you had that representation when you were younger it would've cut out a lot of tumultuous time for you?

P: Totally. Totally changed my life yeah.

I: OK. So, in comparison how would you compare the representation you had then to today?

P: Well today there's just no comparison. The people who are open and in public on TV in media, in cartoons, characters who are out ... Yeah ... It has become a part of life as it is, and an image of life that we will pass to our children. Does that make sense?

I: Yeah, thank you. I'm just interested, it seems your sexuality affected you a lot growing up because of the lack of representation etcetera, how does it impact you now and as you grow older?

P: It matters. I was widowed, I was in a long-term relationship for seventeen years, she died of pancreatic cancer, that was in 2007 and back then nobody had ever heard of a lesbian widow either. It sounds so recent to me. But things do change, like on Facebook™ you can pick your choice of lesbian widow groups to be a part of. Back then, nothing. I find now in casual encounters, if it matters what my marital status is, I would say I'm widowed. But if someone then follows up with well "*what did your husband do or die from?*", I will then tell them actually I was with a woman. That either silences them or opens them up too. But I don't lead with that, I'm a lesbian widow, it's a lot of the time is a none issue at the moment. Especially now being inside for eight months (*laughs*) I'm not meeting a lot of new people.

I: (*laughs*) aren't we all.

P: Buy yes, my sexuality is ultimately a none issue right now, but it matters to me, very much.

I: So just one thing that kind of struck my attention there, you said about being a lesbian widow, it's a first for many, and you're right you don't really hear about it, it's something that I must admit I myself have not heard much about. You said people assume a lot, do you feel that it's insensitive or do you feel under-testing considering we live in quite a heteronormative world... what are your thoughts?

P: I feel it's generational a lot of the time. My generation are absolutely heteronormative. They just don't think. Back in our day we didn't exist. The men did, but women? How dare they. They think that inclusive language is some sort of bizarre politically correct way to oppress them, and I just enjoy the fact that they're old and they will die soon so we don't have to deal with it again. I'm not putting my energy into educating a lot of people. It's not my job and I don't have the energy. To younger people, I will just say I was with a woman, my partner was a woman and to not assume, because young people can be educated but old people ... oh my god, no.

I: So, a similar question, do you feel like you were taken seriously being a lesbian widow?

P: ... I lost my dad in 2003 and I joined a bereavement group at that time, pretty much everyone was widowed, there were a couple of others that had lost a parent and they were working through stuff, but mostly they were widows, and all married with men. There was an atmosphere, a heteronormative atmosphere. Mostly fairly elderly, a lot older than me at that point. I never identified to them as lesbian, I talked about my dad, I talked about the issues I had with my mum and my sister, I said I had a partner at home, I never gendered her. Because I didn't feel any need for it, it didn't impact grieving my dad. It was a rural, a very bible belt, conservative kind of a place. Anyway, fast forward to when my partner got her diagnosis, who am I going to talk to? I've got this wonderful group who does bereavement and has been there working through diagnosis and in death. But my story will only make sense to them if come out. I spent a lot of time going back and forth and being concerned that they would not be supportive. A lot of them were just so involved with the Baptist church that runs the area, I was really concerned that it would cut them off or it would cut me off from their support. It ended up that the facility, I'd been out to her for a while, she outed me to the group, and I had no idea I wasn't present, and she came back with, I've told them what's going on with Brenda, I've told them about where you're at and their wondering if you can come to the next meeting. So that was really nice they were profoundly supportive, so yeah, I will never know if that was a personal paranoia that cut them off or if the facilitator worked them through particular issues, I don't know, I just don't know. Why am I telling you this? Because ... we talked about the loss of a spouse, the loss of a partner and of course

there was so much I had learnt so much from them already so when I was feeling things, I was like of course this is what Isabelle felt when she lost her partner, it was a real blessing. But more importantly, my bereavement was treated as a bereavement, and I was a widow and the lesbian label just kind of evaporated.

I: I must admit I was a little surprised when you said that I was really sort of expecting the worst because you don't always quite know what to expect with religion.

P: I think I may have had the advantage that I already had four years with them, it wasn't just here we have a lesbian with a dead wife who wants to join. This was more like our friend Jo, and this is her reality. So, I possibly had a great advantage there. But moving forward from that, there's a wonderful sociology text called *'Under the Rainbow'* about aging, but I wrote a section about end of life and the bereavement process that helped me to process enormously. There is a text about lesbian widows I read, the only one with that in the title, it was hugely expensive, but when I got it, it was written in the late nineties. So, her vocabulary that she used, to divide gay and not gay were women who were married as compared to gay women. Well as you know, we've had marriage legislation for a while now so reading it, it always stops me because being married does not always mean 'with a man' in my head.

I: Oh yes of course. That's one of the main reasons I chose this area because of how old the literature is. Something that stuck out to me there was that you mentioned about the bereavement group knowing you for four years so the lesbian label evaporated, I read some literature this week that stated lesbians can achieve better healthcare when the label of lesbian is taken away and they are treated just as a person, and sexuality is ignored, what do you say to that?

P: ... I've moved around a lot and lived in a lot of places. When I lived in _____ it was very French 12% English there, very roman catholic, very unfriendly sort of a place for gay people. I had been living there a little while and I was really struggling with my mental health. So, I went to the GP, and I asked for a referral, and I said to somebody I would prefer them to be a woman and I would prefer them to be gay positive and she looked at me and she said, *"our doctors are professionals, if they are against the gays they will not say so"*.

I: No way.

P: Way.

I: Was this recent?

P: No this would have been 1996. So yeah, I don't live there anymore, obviously I made it through I didn't get institutionalised or anything, we moved away. My mind was saying this is not a healthy place to live for you. So, we did. But soon as you said healthcare that's what bubbled right up *"if we are against gays will we not say so"*. It doesn't make you feel comfortable and or happy to go and look for a doctor or visit a doctor, I haven't seen a doctor in twelve years. I just avoid the medical system as much as I can.

I: I can tell that comment really stuck with you. Would you agree it really affected your attitude towards healthcare?

P: Yes. I think it did. I helped organise a couple of community events around access to healthcare ad needs assessments. I heard a lot of other horror stories, but then again it was the nineties and I'm old and have a long memory, and yeah. Lesbians were turned away from having PAP tests because we were told we didn't need them if we weren't having sex with men. We had a psychiatric nurse who had come up with the concept of the temporary lesbian, who said after you've had a divorce or left an abusive relationship, they turn lesbian but they're not really, it's just temporary because apparently, they haven't found the right man yet...

I just, get away from me. I think that comment about they are professional so they will not say so, echoes down into the unknown. Because whatever they do present to me, I don't know if their masking some sort of homophobia, so I don't want to put myself there.

I: That's terrible. It's caring role so you wouldn't think people like that would be there.

P: I don't know how much news you hear from the states, but pharmacists can choose not to serve gay people because it's against the pharmacist's religion. There's bizarre stuff around medication, medicine and healthcare and women there really is.

I: That's terrible. OK, so to flip it around for a moment. Was there ever a time you felt your sexuality was embraced by a healthcare or professional body?

P: I must say when Brenda was dying, I was really well treated by the hospital where we were. Gosh that's interesting, the most embracing, accepting place was the funeral home. They were wonderful. They were profoundly at the time. It was 2007 and not all of our legislation had changed, and it was in these days after the death where you're numb and insane, when you have lost somebody, I had to fill out forms for the vital statistics department. Her date of birth, who her parents were and all of those kinds of things that go into the record. Her marital status, which was regarded as being divorced, we

had never got married legally so she was divorced from her sons' father. She had been divorced for more than twenty years and we had been together for seventeen years, but they wanted the name of the ex-husband, and I was like excuse me? My name didn't matter, we had joint income tax, we had been living together we were common law out and about in the community, but my name was just down as the informant of the death. But her twenty odd year ago ex-husband got his name on there. The funeral home the people, were so apologetic and so gentle and totally understood why I was horrified, not that he's a bad man, we are friends now, but you now, it just was so jarring. From the very beginning everything I had to do with the funeral preparation because I had started making plans whilst she was still sick because it was inevitable, but that funeral home honoured our relationship completely, and I was always surprised by that. But the hospital was good they didn't argue they agreed I was next of kin, and she was able to die at home. But they never ever tried to block me, but I've heard many couples where DNA family steps in and stops the partner but thankfully I didn't have any of those problems.

I: OK, so a bit more on that topic, obviously it was a very sad experience but positive in terms of being accepted and having your relationship validated, as you grow older the need for medical care may increase, how comfortable do you feel with healthcare for the future?

P: ... I don't know. I really don't know. I guess it would depend on the community in which I'm living. For six years I lived in _____ before I moved here and no, I never went and got a doctor because no! No, no, no. They are still very much informed by their history in terms of people and medicine. It has a really retro mood to medicine there and I wasn't willing to engage with it. I've only been here two years; I haven't had need of a doctor, so I haven't looked for one.

I: OK, so onto the next photo, a T-shirt that reads "*it's about people, people*". Can you tell me about why you chose that image?

P: I chose that image, that's a T-shirt I had designed and had made for a pride one year I think, although I have two or three that I wear with different kinds of rainbow hearts that I wear though the summertime it doesn't have to be pride. That message "*it's about people, people*". It's about loving a soul. It's important for me to separate physical sexuality, and about desire and the physical act and the expression of love in a physical way as compared to loving a person as I love my in-laws. It doesn't matter what clothes people have or what they look like it's about who they are at their core, and that is what they bring to being a person, it's about the people, people.

I: I like that. So, what I understood from that was the whole notion of looks fading, but the person remains.

P: Yeah, or they change. I can put on a pink dress and look very different than I do in overalls but is still me. That's a very important part of what I bring, I think more so as I grow older, I've come to understand that in more of a different way.

I: Do you feel that showing your acceptance is a big part of your identity?

P: I think it probably is yes, I work very hard at being inclusive and using inclusive language. I work a lot with strangers, I do a lot on Facebook™ and on Facebook™ live where people come for advice and things. But when we talk about relationships, sometimes all I have about them is a name and I have no idea what gender they are, so I always say romantic relationship rather than when you find a boyfriend or girlfriend, I always find language that takes gender completely out of it because it doesn't matter. If you love someone you love them and the rest of it is irrelevant.

I: Yeah, I agree. I've always held the standpoint in life that, we made everything we know up, so why do we have stick to it (*laughs*). So, our identity is everchanging, can you tell me about a time as you got older or even becoming a widow if your identity changed at any point?

P: I can look at baby pictures of me and see me there. How I have been able to extend and expand my expression of myself. I'm not a different person than I was at ten, but my ability to navigate and be myself and be open, of course at ten, fourteen and twenty, I had a lot of shame that had been heaped on me, I was sexually abused as a little girl, it was a long time before I figured that out, there was a lot of trying to get away from myself, that was the only way I knew about of coping and trying to get away from the pain. So, whereas now, hello, it's all on the surface if you want to know I will tell you. There is nothing shameful about me, I'm not responsible for other's reactions or behaviours. So yeah, like me or don't like me not my problem, I'll wake up with me tomorrow and you won't be there.

I: I love that. So, going onto the next photo is that your family on that one? Can you tell me about it?

P: Yes, when our kids got married. So, the two women are Brenda and me, the two men, the shorter one is Brenda's birth son, her womb child from when she was married to the ex-husband. The taller of the two men, when I lived in _____ I met him, we met in a writer's group and we clicked we made a friendship that was really nice and has lasted, and through the years its long and complicated but he and Brenda's son got together and that's how I met her. Then we got together.

I: Wow that's quite a story!

P: Yeah! It's a strange and wonderful thing. The boys had a service of holy union as that was their only option back in 1991 but when the laws changed, in 2006 I think it was, they were able to get married in the church. I identify very much as Brenda's partner even though she's gone and very much as a mum figure to these kids.

I: So, I can see that your sexuality has impacted you in a positive way, you've had a wonderful partner and the ability to have two sons as well. Can you tell me about how your sexuality has impacted any friendships?

P: Since I came out in my early thirties, thirty-one thirty-two. I've also been really transient; I move around so any new friendships that have been made were made with open identity. People from before, I had one friend from before she's passed now too. She was very concerned when I came out to her that the first thing she said was "*but you'll get beaten up, if you're gay you will get beaten up*" which just shows the violence to the community, so her comment was not misplaced. It was the eighties, in a big city, absolutely there was that chance, but she remained a good friend, she met Brenda and we were all friends together. I think she actually died not long after Brenda did. I didn't maintain friendships with people from my high school college years, I moved away, and I just let that all go. Which was during the drinking stage, so I don't know if it was linked, I don't know. I don't think I've lost any friends because I came out to them, but then again, I come out so soon to people that we didn't become friends, so I wasn't aware of it. Also, because I have been so transient and so mobile, having a new community every few years. But I've never once thought like, oh Susan would still be in my life if only I hadn't told them that. I have a rainbow bumper sticker on the car and have done for years and years so everyone who saw me just knew. Plain and simple.

I: OK, so sort of on the flipside of that, can you tell me about a time you decided to hide your identity or withhold that information?

P: After I moved here, I was working in a store, I didn't make a conscious decision to not talk about it but because I have immersed myself in gender free expression, it was months into being there with co-workers and colleagues and two of us had gone for coffee together, I don't even know what the conversation was but, she asked something about being a widow and about my husband and I said I was with a woman surely you knew that? And she was like "*no! I didn't know that I have a woman partner too!*". But yes, I guess there's still some guardedness, certainly within the community. These are people I had to work with. But I'm not even coming home to a partner so they're not going to show up at the Christmas party, you know. It wasn't deliberate self-protection.

I: I see. So just in relation to when you mentioned guardedness in the community, do you feel people around your age are guarded or is it generally open?

P: No, I think there is still a lot of guardedness. There's a group in the city, I was at a meeting with them maybe a year and a half ago where the topic of conversation was '*what were your religious upbringings and did that impact on your coming out?*', and there were maybe twenty-five over fifties there, and everybody there had some kind of a religious upbringing, which you don't see so much in your generation, I don't think you were dragged to church the same way we were every Sunday, and that's alright, but all around the room people are saying "*I didn't come out till my husband died and he was sixty-seven*", or saying they came out when they were fifty-three or forty-nine, but that same week I was teaching in a high school walking down the hallway and there's gay couples, straight couples, everything and it's a total none issue and it made me wonder how in the world are we all in the same city at the same time. Wow, people who are even almost seventy before they came out, but then there's these teenagers and it's just – life!

I: Yes totally, I've always had more gay friends.

P: I belong to a group on Facebook™ and what I see with the younger mums, they've got kids who've come out as gay or as trans in their early teens who then in their twenties are coming out as *enby*. One of the children on the first photo is thirteen now and a couple of weeks ago had their first oestrogen blockers, they are transitioning and feel as they are a boy.

I: OK, so comparing that to your childhood it's a totally different life as to what you knew. How would your younger self feel knowing how the western world is like today?

P: I don't know if I would've believed it. That would've been something to aspire to. A world where a thirteen-year-old can say I know I'm assigned female at birth (AFAB) but I'm not. If we go back far, far, when I was ten or twelve I would have been thoroughly shocked, there was still that secure British structure way of life, so anything outside the box was scary and to be worried about so I think then I would've copied my parents and been like "*ew that's freaky and disgusting*" but as I got older, to aspire to a world where people can be who they are and be free from judgement and prejudice or any of that, yeah so wonderful. There was a story I saw about a man in his late eighties who now is shifting to an identity that feels more authentic, how awesome is that? To live long enough to live as yourself.

I: Its incredible. Obviously, it's great that society has progressed so much, but do you feel there's still room for improvement?

P: Oh, there is absolutely, it's what I said before the sooner the old people die the better and that's a shame because I'm one of them. But the need for education, there's a fear of the unknown. Especially in my age category. They think they didn't know anybody that's non-heterosexual, yeah you don't know because you're being hateful and they're not telling you, there's that. I have a COVID-19 coping community who are mainly American, so we have been active this week because of the election and the people that we see who have been supporters of the Republican party, are very comfortable expressing their hatred for groups of people that are different from them, so there is so much work to be done. It's going to require people physically being with them, there's no "*here read this book and it'll change your mind*". It needs to be meeting people and see people and keep people safe in that circumstance too, but we have to do it for sure.

I: Yes, I agree, I think people can change if shown the way.

P: Yes, when it's a personal relationship, someone you love and care about like your son, it's very different than some strange bogeyman who's going to attack the children. We have to bridge the gap.

I: Yes, yes. Can you tell me about any experience in that topic?

P: When we moved to _____ so 1990-ish. We lived near Brenda's mum and family, we started an organisation for LGB, but we were also not shouting from the rooftops as it was important to preserve the reputation of the family. So, there was stuff there but that's their stuff. I once made friends with a woman she had a dog and we used to go walking and there came a day when she said to me how surprised she was that I was normal. She must have not made the connection that we were a couple and thought we were roommates, or she just believed what she felt comfortable with, and she went on this sermon about how she had realised that we were just really normal and just made dinner and paid the bills, went to work, and walked the dog. That wasn't what she thought lesbians were. I think for her there was still that swinging form the chandelier everyday kind of idea that did us all a disservice. But yeah, a personal contact, someone who you know. That's what shifted her view.

I: So, a bit more on that subject, you said lesbians still have this stigma, I'm not sure if gay men are totally treated the same way, how do you feel?

P: Yeah. The word predatory gets added not lesbian a lot. A predatory dyke, she looked at me, she wants me, she's dangerous. Get over yourself, I'm sorry (*laughs*).

I: (*Laughs*). Was it harder to be accepted being older as well?

P: We were invisible because we were old. It becomes a function of our generation. We were established and together a long time when the Ellen episode happened, which shifted everyone awareness in this country and places like America too. If you talk to lesbians now in my generation its exciting and everyone says we had our friends over, we did this, or we went there, it's almost like the JFK shooting or something, you remember exactly where you were. The Ellen episode is one of those moments for queers of an age. There's a real difference I see for those who were children when that happened and for those of us who were already adults. It was he. She lost her sponsors, she lost her show, she lost her career and had to claw her way back, thank goodness she did. What did you ask me again? Oh, being older, yes. There was this huge invisibility, at Pride with older women. At least in this city, a lot of the pride committee and the money is in the male community. We have such a big gender difference; the women are buying things for their grandchildren and the men are buying balloons for pride. It's so easy to be at pride and be overlooked when the men come along. Whether it's because they're more exciting, handing out gifts or asking for donations, whatever it is, they just walk past me they don't see me at all, because older women don't matter. I also think that's not just a gay problem, but an age problem.

I: Yeah totally, I read about a lot of older lesbians having this minimum of a triple minority status, being lesbian, woman and older ...

P: Yes, yes, but it's us who gives the emotional labour. They might be putting up balloons, but we are taking the phone calls and doing the work.

I: Something quite interesting to me in the literature was the taboo around older lesbians being labelled deviant or sexless, what do you say to that?

P: Yeah, that certainly is true. But I think it's all women, we are all deviant whores if we are older and dating. Of course, older men who want a woman they want a young sweet one. In popular culture as well there's this idea that past menopause women are no longer sexual being which is a crock. There's also this entrenched sexual misogyny, that older women's sex organs are scary, or suspect or maybe a bit horrible, people will laugh at jokes about having intimate relations with older women, oh you don't want to go there they will day, but why? Charlie Chaplin fathered a child at eighty-eight with somebody very young, but then if an older woman engages in sex nobody wants to talk about it and its disgusting.

I: Yes, I couldn't agree more, I think it definitely boils down to misogyny.

P: Its absolutely a societal thing, I think.

I: Yes totally. So, I'll move onto the next photo, it's you and the two sons.

P: At the voting station?

I: Oh yes.

P: We had just voted there. I had to ask them for that photo because I knew that I identify as a political creature, voting, educating, writing to my representatives, local or federal it's a very big part of who I am, it's how I attempt to make a difference in the world. Engaging with those who have authority and power in the system, so yeah, I picked that picture very deliberately. I knew I wanted that picture.

I: So that sort of comes back around again to your identity and what you want people to see and who you feel you are?

P: Yes absolutely. So yes, politics matter to me.

I: How has your sexuality impacted your political stance?

P: I identified very much as feminist before I came out. I think lesbian feminism then just kind of doubles it up. You said earlier about the triple threat, and there is a doubling down of that energy. Because its intense, anything that impacts women badly is going to impact a lesbian couple at least twice as badly, so you have things like the age gap, now you've got two people trying to run a household on crap wages. That needs to be addressed even more for and by queer women, and we don't have to be in couple to be queer. That political activity and invisibility, I've never heard a news story that says lesbian says tax rate is wrong. Just to be writing those letters and to say I am a lesbian, and this is why I think this is a problem and then that goes into the MP's library and in their files and archives and one day a student or researcher like you is going to find that and read it, and it matters. It matters. It matters to me that those bodies of work exist, from my place.

I: Yeah, that's interesting what you said about not seeing lesbian in headlines and things. I was only thinking the other day about LGBT representation and the lack of lesbians, older lesbians in particular. For example, I can name lots of gay men, Elton John, Freddie Mercury, but I quite struggle and have to think for a moment when I think of lesbians. How do you feel on that subject?

P: Yeah, I agree. Again, we come back to media and press and who they choose, your Ellen and Porsha, power couple like that, they get some press, but I think they get more gay press than straight press, maybe you because of your studies have heard about them but the guy next door may never hear about them. I don't know how we change that. At the same time, I knew someone, friends with my boys, who was shocked when he saw the film Bohemian Rhapsody who was shocked because he didn't know Freddie Mercury was gay.

I: *(laughs)* You're joking.

P: I just laughed and was like hello the group is called Queen *(laughs)*. So, there's an ability to be unconscious about stuff even yet. I would love to see more women couples and single gay women, it is needed. But they are out there, women like me, they just don't necessary seek the spotlight anymore. We've done a lot of work. All the pictures on the news are all women under forty, because they still have the energy to be involved, I know there will be a lot of older women involved but they are just not medias choice but also, they don't push their way to the front, they do it in the background, always.

I: Do you think that background activity, and lack of pushing to the front stems from the society you grew up in?

P: I think it may well yes, the residual effect of just getting on with it, I certainly don't seek the spotlight myself. I've always been a backstage worker and never a performer, and that has carried through my life. I will be like yes put my name on your paper, I love that I feel like someone will read this and see my name but that's not about look at me, it's for change.

I: OK, yeah, just looking at the final photo now, its yourself in a witch's hat. Would you like to talk me through this?

P: *(laughs)* Yes, my witch hat! It was Halloween, I was in a store doing readings, meetings and greetings, a party all day long. But also, my spirituality kind of falls towards the Pagan end of the spectrum, and I have always been a solitary practitioner. The idea of being by myself and being a loner, it's how I am, I like the idea of being by myself with spirit and with nature, the mayflowers, and the hawthorns right. It also I hope suggests I have a sense of humour, for the most part I am a happy person but there's lots of things to complain about but then you write a letter. But yeah, I enjoy that hat because it has spiders and webs on there, I don't like spiders very much, but I do love spider webs. I like them, everything is connected and it's all one.

I: I like the thought of that, I've never liked spiders, but I do enjoy that ideology of connectedness. Is that symbolic of your identity?

P: Yes. I would say so. Also, we call technology, and we are talking now, over the web, it's connecting with one another, I meet with my COVID-19 coping community at least twice a week online and we wouldn't have met in person otherwise. Last night we stayed up together watching Bidens speech, why does this matter why am I telling you? It's not only that we are all one, but the ability to connect is amazing and a big part of me. I love being at the centre of my web and it goes out in loads of different directions, to family, friends, the letters I send, my blog, I'm forever putting stuff out there. Whenever there is a chance to do something like this I'm here with bells on.

I: Yes, and thank you so much for coming forward, you have been a huge help. I know we've just slightly run over, but I think I've asked you about everything I planned. Unless you have any questions yourself or anything you would like to add on?

P: No, I don't think so, it's been quite comprehensive you really worked your way through it. The pictures really helped it as well was really interesting. A really good idea I liked that. I can't think of anything to ask yourself.

I: Well, you have my email if you have any questions for the future. Thanks so much again for participating and please if you can pass my information onto anyone else who can take part that would be great. I hope you enjoyed today, really enjoyed this interview, it was super interesting so thank you.

P: Yeah, me too, it was lovely to meet you Emma, I wish you good things and I will spread your information around.

I: Thanks very much and have a lovely day!

P: Thanks, and same to you, bye now.

I: Cheers, bye

END.