

CENTERING THE MARGINS: WHAT CAN BE LEARNED FROM LISTENING
TO THE VOICES OF LESBIANS OVER 55?

by

KAREN A. GALLAGHER

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School
Department of Social Work

The University of British Columbia
Vancouver, Canada

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ABSTRACT

Centering The Margins: What Can Be Learned From Listening To The Voices Of Lesbians Over 55?

The purpose of this study was to centre the voices of older lesbians about their lived experience. Within the discourse of gerontology, the existence of older lesbians is invisible. Older lesbian existence is also marginalized within the lesbian community. Institutionalized heterosexism, homophobia, sexism and ageism, counter to the Social Work Code of Ethics, serve to enforce that invisibility and marginalization in the dominant Canadian culture. In order to provide some information on this marginalized group, four lesbians over the age of 55 were interviewed individually by a lesbian researcher. An exploratory, emancipatory, feminist qualitative research methodology elicited an information-rich discourse. The four women's stories were organized into their individual stories, and were translated into eleven themes, as follows: (1) heterosexism and homophobia, (2) ageism, (3) financial concerns, (4) housing and senior-serving institutions, (5) health problems, (6) vulnerability to crime and abuse, (7) isolation, (8) sexuality, (9) grief and loss, (10) organized religion, and (11) feelings about the lesbian community. The women in this study spoke eloquently about the issues that affect them and other older lesbians. The lived experience of the participants challenges social work's policies, practices, education and research to become inclusive of older lesbians.

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CHAPTER ONE

INTRODUCTION

The margin is the context in which those who suffer injustice, inequality and exploitation live their lives. People find themselves on the margins not only in terms of the inequality in the distribution of material resources, but also knowledge production is organized so that the views of a small group of people are presented as objective, as "The Truth." The majority of people are excluded from participating as either producers or subjects of knowledge.... Focussing on the world from the perspective of the margins allows us to see the world differently, and, in many ways, more authentically (Kirby & McKenna, 1989, p. 33).

Doing research from the margins challenges the status quo...[It] allows us to begin to rename our experience, and thus participate in creating knowledge we can use (p. 170).

These quotes encapsulate for me why I wanted to do this particular research with older lesbians, whom I define as lesbians over 55. I am a lesbian and a social worker who views the world through the lens of a feminist, and as a woman who has a personal analysis of heterosexism and homophobia. Much of my adult life has been shaped by my location as a lesbian and as a feminist. I cannot stand aside from my personal experiences of heterosexism and homophobia; to do so would be to stand in denial of how my life and the lives of other lesbians are marginalized within the dominant culture in which we struggle to exist and claim and celebrate our lesbian identities.

The purpose of my thesis is to identify the unique experiences, issues, concerns and challenges that older lesbians experience. When speaking of the subject of my thesis to other students, faculty, friends and colleagues outside of

the academy, including lesbians, gay men and heterosexuals, I have been met with a broad range of reactions. Their reactions have included responses such as, "Oh, that's great. I can hardly wait to read it," to "Why?" to "Aren't you taking an awful risk? Maybe you should choose a safer topic." Not all lesbians and gay men were supportive, nor were all heterosexuals disinterested, cautionary or dismissive. While the supportive comments were personally encouraging and affirmed my decision to do lesbian research, I was also interested in the responses from those who were less sympathetic. It would appear that heterosexism, homophobia and ageism were components of some people's responses. Their responses included also well-meaning concerns for my safety in taking on such a topic given the heterosexist and homophobic climate of our society.

I have been a lesbian activist since I came out publicly fifteen years ago. My coming out process was informed and supported by my feminist identity and analysis. I came to feminism out of my experience as a woman in our patriarchal North American culture. My experience was a struggle in coming to terms with how women and girls are victimized, silenced, and "disappeared," and how men generally are privileged and sanctioned as compared to women in our society.

When I came out as a lesbian I began to grapple with my experience of being silenced and marginalized because of my sexual identity. Heterosexism and homophobia became my daily companions and shaped my life as a lesbian. As I began to see the world through the additional lens of heterosexism and homophobia, coupled with my feminist lens, I became committed to working

within my lesbian community in order to achieve social equality and social justice.

This thesis is a piece of my activist work and is my contribution in helping to break the silence that surrounds lesbian existence in general and older lesbians specifically. I have learned from older lesbians that they are invisible in both the lesbian and social work communities. Many social workers are unaware that older lesbians (or lesbians of any age) are consumers of social services. Younger lesbians are often unaware or dismissive of the realities of the older lesbians in their midst. It is clear to me that there is still much work to be done to create an awareness and an understanding of what older lesbians need. The social work profession needs to continue to learn ways of recognizing its own heterosexism and homophobia and to unlearn these destructive practices. Older lesbians need both communities to examine their ageist beliefs and practices in order to welcome and embrace them.

I want to highlight the lives of some older lesbians in an effort to centre the margins and privilege their lived experience in the dominant culture and within the lesbian community. It is my hope that you, the reader, will listen to their voices and learn from their experiences of oppression and marginalization and work to dismantle the heterosexism, homophobia and ageism that disadvantages and "disappears" older lesbians.

Older people in North American society are seen as having a condition or malady categorized as aging or old age. In such an ageist society, older people are isolated, pathologized and medicalized (Healey, 1994). Women in the

patriarchal, Eurocentric, sexist society of North America still do not enjoy parity with men (Browne, 1994), and our cultural norms and values make active discrimination against, and trivialization of, the elderly commonplace. Older women bear the additional burden of being women and being old in a sexist and ageist society. Furthermore, institutionalized heterosexism and homophobia have created a climate of shame, stigma and fear for lesbians.

Institutionalized discrimination against lesbians (and gay men) has only recently been challenged by the lesbian and gay liberation movement. Older people have also recently begun to challenge the ageist attitudes and assumptions which negatively affect them. To be a woman, a lesbian, and older, is to be triply oppressed in North American culture. If older lesbians are also women of colour, poor or have a disability, they are even more in a place of jeopardy (Greene, 1994; Morales, 1989). I have chosen to focus on the experiences of older lesbians, as separate from those of gay men, because lesbian existence is marginalized within the homosexual population. There is still much work to be done to ensure that the existence of older lesbians is made visible and their special needs recognized. By presenting the "situated knowledge" (Harraway, 1986), or "voice" of a group marginalized from the dominant culture, I will make it possible for the social work profession to hear from some older lesbians. I need to state that while I recognize that many people are marginalized by class, disability, race, ethnicity, religion, to name a few, for the purposes of this study I am focussing on an intersection of gender, age and sexual orientation.

In social work, heterosexism and homophobia are counter to the philosophy of the Canadian Association of Social Workers (CASW) Social Work Code of Ethics (1994) which states,

Social workers believe in the intrinsic worth and dignity of every human being and are committed to the values of acceptance, self-determination and respect of individuality and collectivity, to provide resources, services and opportunities for the overall benefit of humanity. The culture of individuals, families, groups [and] communities...has to be respected without prejudice.... Social workers are dedicated to the welfare and self-realization of [all] human beings; ...to the development of resources to meet individual [and] group...needs and inspirations; and to the achievement of social justice for all (p. 7).

Social workers, by the nature of the Canadian Social Work Code of Ethics, are mandated to "not discriminate against any person on the basis of race, ethnic background, language, religion, marital status, sex, sexual orientation..." (p. 10). Regardless of how services for older lesbians are provided, it is clear from the literature and from my own professional and personal experience that heterosexism, homophobia and ageism exist in Canada and have negative effects for older lesbians.

Lesbians (and gay men) are clients of a myriad of social services. Potentially up to 10% of social work clients may be lesbians or gay men (Biery, 1990; Blumenfeld, 1992; Marmor, 1980, cited in O'Neill & Naidoo, 1990; Woodman, 1992). In the older population, and in the general population, women are over-represented as consumers of social services. Thus, I think, older lesbians could account for 10% of the population of women who are clients of senior-serving agencies. I hope that the results of this study will contribute to the social work profession moving towards an inclusive and welcoming provision of services.

The building of knowledge about older lesbians will assist in the creation of new social work theory, social work programs, policies, research, and education curricula which has shed its androcentric, heterosexist and homophobic biases.

The existence and lived experience of older lesbians have been traditionally ignored in gerontological discourse (Cruikshank, 1991; Lee, 1987), theories of aging (Lee, 1987), and social work theory (McMackon, 1994). Traditional social work is imbued with the hegemony of heterosexuality (Logan & Kershaw, in press), which marginalizes older lesbians in the dominant North American culture.

Feminist research and research from the margins seeks to make known and visible the experiences of women and other oppressed and marginalized groups (Kirby & McKenna, 1989; Swigonski, 1993) and in so doing, to empower them. This body of research also endeavours to create individual and social change by challenging the status quo and the relations of "ruling" (Smith, 1987). New knowledge will build new theory, educate policy-makers and clinicians, and make social policies and social work practices more inclusive of the oppressed and marginalized--in this case older lesbians. What I propose is transformative social work theory (structural social work theory) that would provide a framework in which to understand how oppression occurs and would be inclusive of older lesbians and other marginalized groups.

Since there appears to be little empirical information on older lesbians, I chose an exploratory, qualitative method. I interviewed four lesbians over 55 years of age employing an unstructured interview format to elicit rich information

about their lived experiences as older lesbians, and also to receive suggestions for improved social work practice and policy-making that seeks to become more inclusionary. My study is important for social work as it will aid in explicating information about a marginalized group's issues, concerns, needs and challenges. This, then, will help social work to understand better what is needed to effect a more inclusionary social work profession.

Chapter Two of my thesis begins with an exploration of the literature available on older lesbians. It includes an examination of heterosexism, homophobia and ageism and how they affect older lesbians, and an explication of a potentially transformative theory of social work which would be inclusive of older lesbians. Chapter Three outlines the methodology I used for proceeding with this study. Chapter Four is a presentation of the results and Chapter Five discusses the implications of the study for the social work profession and the lesbian community.

CHAPTER TWO

LITERATURE REVIEW

Burns and Grove (1987) note that the purpose of a literature review is to gain "a broad background or understanding of the information that is available related to the research problem of interest" (p. 127). While there is a general paucity of information concerning older lesbians, the literature review gave me an opportunity to look at what other researchers have had to say about older lesbians and helped me to formulate my research question. While there are some wonderful contributions about Canadian lesbians (Rooney, 1991; Ross, 1995; Stone, 1990; Weissman & Fernie, 1992), I was able to find only two articles pertaining specifically to older Canadian lesbians (Ashfield & Shamai, 1987; Auger, 1990). The vast majority of the literature available about older lesbians is non-Canadian and this discovery further reinforced for me that my exploratory research on older lesbians in Canada is both timely and meaningful.

In my literature review, I will explore how older lesbians fare in this North American society, and in Canada specifically. In brief, I will (1) look at the effects of ageism, heterosexism and homophobia on older lesbians; (2) discuss the invisibility of older lesbians in gerontological discourse; (3) examine whether general theories of aging are useful in studying older lesbians; (4) examine a potentially transformative theory of social work that would be inclusive of older lesbians, and finally, (5) present some particular concerns raised by older lesbians.

As I will show, much of the scarce information about older homosexuals is about gay men. I believe that the existence and experience of older lesbians must be understood as distinct and separate from the existence and experience of gay men because lesbian existence is marginalized within the homosexual population (Lee, 1989). As a social work professional, I also feel that in a population where women are marginalized and yet are the majority consumers of social services, the realities and lived experiences of older lesbians need to be explored. As Dunker (1987) argues,

Old lesbians, out or closeted, have had to develop certain skills and character traits in order to survive, as do other oppressed minorities.... For lesbians, prejudice and harassment are common...we've had to develop a degree of solid, stubborn self-confidence and courage. These qualities depend on a clear and pervasive sense of self-worth. We have had to be autonomous and in charge of our own lives. These skills are even more necessary for minority women...who have...always had to support themselves, and they have had to deal with the double oppression of race and [gender] (p. 76).

Heterosexism, Homophobia and Ageism

The experiences of older lesbians are very much affected by the institutions of heterosexism, homophobia and ageism. Heterosexism is the belief that heterosexuality is the normal and only proper expression of sexuality in society--the laws, traditions and institutions of society reflect and reinforce this belief. People who are non-heterosexual, that is, lesbian and gay, are therefore categorized as being deviant, suspect, and dangerous (Glamuzina & Laurie, 1991).

Spaulding (1993) calls heterosexism "unconsciousness raising": "Heterosexism can be viewed as a form of social control in which values,

expectations, roles, and institutions normalize heterosexuality which, in turn, is promoted and enforced formally and informally by structures in which men are dominant, i.e., the patriarchy" (p. 231). Predicated on the belief that everyone is heterosexual, societal institutions advantage people who are heterosexual, and thereby deny lesbians (and gay men) their right of access to social equality and social justice. As Healey (1994) comments, the older lesbian in societal institutions is often silenced, diminished and rendered invisible: "The forms, the interviews, the various organizational hurdles we must go through in our contact with the social service systems [and other societal institutions] all make presumptions which simply do not apply to me or to any other lesbian" (p. 114).

Based on the belief that homosexuality is deviant and developmentally inferior, homophobia is an irrational fear and hatred of homosexuals which often leads to negative attitudes and behaviours towards lesbians and gay men (Pharr, 1988). Culturally, homophobia serves to justify society's discriminatory treatment of lesbians based solely on their lesbian identity. Lesbians are seen to be in defiance of the patriarchal state's prescribed roles for women and as an embodiment of anti-nuclear family sentiment. For example, the current backlash of the political Right, wherein progressive legislation protecting lesbians and gay men is under attack, is underpinned by the Right's belief that non-heterosexuals recruit heterosexuals to become lesbian or gay, and are organizing to destroy the nuclear family (Ross, 1995). The Right's ideology hasn't changed much in the last several years: "The central focus of the right wing attack against women's liberation is that women's equality, women's self-determination, women's control

of our own bodies and lives will damage what they see as the crucial societal institution, the nuclear family" (Pharr, 1988, p. 17).

Homophobia is very damaging to all lesbians, but especially to older lesbians who, in spite of the victories of the Stonewall Rebellion in 1969¹, spent most of their adult lives in an atmosphere of police raids, beatings, and political witch hunts, and fear of losing their employment, their children, and their housing, to name a few (Marcus, 1992). Lesbians have also been lobotomized, incarcerated in mental hospitals, subjected to hysterectomies and imprisoned because of their lesbianism (Glamuzina & Laurie, 1991; Healey, 1994). In Canada, repression and harassment of lesbians and gay men by the State was also commonplace. Becki L. Ross (1995) in her book The House That Jill Built: A Lesbian Nation In Formation, discusses how the Toronto bathhouse raids in February 1981, where over 300 men were charged, led to increased police intimidation of lesbians.

Another institution which affects older lesbians, as it does all older people, is the Eurocentric cultural belief that the old are not as important and valued as

¹The Stonewall Rebellion began early in the morning of June 27, 1969 when the New York City police and the Alcoholic Beverage Control Board agents made a routine raid on a gay bar, the Stonewall Inn, on Christopher Street in Greenwich Village. Allegedly there to look for violations of the alcohol control laws, they made the usual homophobic comments and then, after checking identification, threw the customers out of the bar, one by one. Instead of slipping away into the night as gay men and lesbians had done for years, they resisted. The commotion drew more people to the area. Drag queens and drag kings, many of whom were African-American and Latino/a, held their ground against the police. A parking meter was used to barricade the door of the Stonewall, trapping the police and agents inside. They called for reinforcements as the crowd continued to grow and the resistance increased. The Rebellion lasted three days and three nights, and, for the first time, the chant, "Gay Power" rang out.... [The riot] is generally credited with beginning the modern-day gay and lesbians rights movement.

the young. Many other cultures however, such as First Nations and Asian cultures for example, are more respectful of their aging family members. In Lee (1987), Fischer argues that "A general social decline in respect for the old is a phenomenon of industrialized [Eurocentric] society, and is certainly not limited to homosexual men [and women]. There was a time (prior to about 1820 in America) when age was highly valued and people typically overstated their age" (p. 64). Ageism is thus a fairly new patriarchal Eurocentric construct which devalues, trivializes, and denigrates all older people and especially older women, including older lesbians, and makes them invisible. As a "set of oppressive social relations" (Laws, 1995, p. 112) ageism marginalizes older lesbians from the dominant culture and inhibits their full engagement in society. According to Macdonald and Rich (1983), the lesbian community, like the dominant heterosexual community, is not immune from the effects of ageism and the cult of youth worship:

Today, the evidence is all around us that youth is bonded with the patriarchy in the enslavement of the older woman. There would, in fact, be no youth culture without the powerless older woman. There can be no leisure elite consuming class unless it is off the back of someone. The older woman is who the younger women are better than -who they are more powerful than and who is compelled to serve them (p. 39).

It is therefore not surprising that many young lesbians see older lesbians as "over the hill." When Copper (1987) deconstructed that phrase, she discovered that being "over the hill" means invisibility, being beyond the hill; older lesbians are "metaphorically out of sight" (p. 1).

In North American society, women are socialized to define their worth according to terms established by and upheld by the patriarchy, and women are valued only when performing prescribed role functions and behaving in what are considered gender-appropriate ways. Garnets and Kimmel (1993) argue that in assuming lesbian identity, lesbians declare themselves to be in opposition to, and outside of, mainstream societal expectations as defined by the dominant culture.

Gerontological Discourse

There have been relatively few studies of the experiences of older lesbians within an increasing body of knowledge regarding older people. As Margaret Cruikshank (1991) states, gerontological discourse has absented itself from the lived experience of older lesbians and gay men:

Pifer's 413-page 1986 anthology, funded by the Carnegie Corporation, Our Aging Society, includes not one reference to homosexuals. The same is true of a 1985 standard text, the Handbook of Aging and the Social Sciences (Binstock). Georgia Barrow's Aging, the Individual and Society (1986) devotes one paragraph to old gay men and one sentence to lesbians (p. 77).

In another demonstration of heterosexist bias, Lee (1987) found that "most aging studies assumed their respondents were heterosexual and married" (p. 50). William S. Hubbard (1993), in Lambda Gray: A Practical, Emotional, And Spiritual Guide For Gays And Lesbians Who Are Growing Older, commented that "knowledge concerning men's and women's journeys across gay and lesbian life courses has been marginalized within gerontology" (p. 134).

The voices of older lesbians are notably absent both in mainstream gerontology, and within the context of women writing about aging women's

experiences. In Rosenthal's book, Women, Aging and Ageism (1990), the one chapter about lesbians confines itself to lesbians in middle age. Garner and Mercer's book on women as they age (1989) includes not one chapter on older lesbians, yet this book is written by professionals, including social workers, psychologists and nurses, and is otherwise an excellent resource for service providers to older women. But where are the older lesbians?

While some gerontological research is examining the experiences of older lesbians and gay men, the focus is targeted more towards gay men and less towards lesbians (Ashfield & Shamai, 1987; Berger, 1982a; Friend, 1987; Johnson & Kelly, 1977, Kehoe, 1989). In those studies that do exist about older lesbians, researchers have experienced considerable difficulty in obtaining a representative sample of their target group. Given the nature of homophobia in North American culture, many older lesbians are closeted; that is, they are not public about the fact that they are lesbian, if they acknowledge their lesbianism at all. In describing these closeted lesbians, Del Martin and Phyllis Lyon (1992) quote researcher Chris Almvig:

They don't call themselves lesbians. They hate the word gay. They think they're in some special category and they think it's just really unusual that they found a very special woman in their life. They're in love with each other and it has nothing to do with being gay. There are a lot of older lesbians in this category--that's how much oppression has affected them (p. 114).

These women live their lesbian lives in secret. As Monica Kehoe (1989) discovered in her research on 100 lesbians over 60, many are not involved in the lesbian community, nor do they frequent women's bookstores, subscribe to

lesbian/feminist periodicals or newsletters, or take part in lesbian or women's community events.

The challenge to find older lesbians who are not economically advantaged, who are poor, less educated, non-white and who are not involved in the lesbian community has proven to be impossible for most researchers. Older lesbians who are ethnic minorities find it difficult to belong to the lesbian community, some responding to racism (Morales, 1990), and some "remain [ing] silent for reasons of family or religion" (Kehoe, 1989, p. 6). Researchers have access to older lesbians vis-a-vis women's conferences, journals and newsletters, lesbian bars, and women's and lesbian centres; namely, places where lesbians who are comfortable being "out" as lesbians are likely to convene. Consequently, participants in studies researching the lived experience of older lesbians are almost always white, well-educated, financially secure, literate, and active in the lesbian community.

Theories of Aging

Within the body of emerging knowledge about aging lesbians (and gay men), the lesbian experience is absent for the most part from theories of aging. Lee (1987) appears to be the only researcher who has addressed theories of aging within a gay/lesbian context. Even then, Lee cautions the reader to contextualize the gay/lesbian experience within the era in which current older gays and lesbians grew up, that is, pre-Stonewall: "Thus, any theory of homosexual aging must be modestly proposed, for it may become obsolete when post-Stonewall homosexuals reach old age" (p. 44). While Lee's research focuses on gay men,

the work makes a useful contribution to theories of aging, where there is so little theory addressing lesbians or gay men. Following is a brief summary of the key concepts of major sociological theories of aging identified in Lee's article, including (1) disengagement theory, (2) activity theory, (3) continuity theory, (4) social exchange, (5) subcultural theory, (6) symbolic interactionism, (7) stratification theory and (8) conflict theory.

Disengagement theory argues that men and women are socialized to disengage and withdraw from certain roles and relationships as they age. It presumes that disengagement is a normative function and one's success is dependent upon the individual's readiness to disengage and the availability of rewards to replace those lost in the process of disengagement. Extrapolating from Lee's research on gay men, it could be predicted that older lesbians may have little trouble in letting go of old roles because they have already been living outside of mainstream role expectations for heterosexual women and men (Lee, 1987).

On the other hand, activity theory argues that older people are happiest when they remain engaged in their social roles. Lee's work suggests that for older lesbians, their membership and sexual or non-sexual activity in the lesbian community can compensate for a lack of more traditional (that is, biological) family activities.

Continuity theory finds activity in old age similar to that in middle age. This approach is based on personality type, is not free of value judgements, and contains a hierarchical ordering of adjustment patterns, where the individual

passes from one to the next. According to Lee's (1987) findings, this theory does not fit many older lesbians because experiences of "coming out" are acts of discontinuity and many lesbians "come out" in middle age. For closeted lesbians, too, the need to balance and separate their secret private lives with their public traditional roles makes it unlikely that any transition from one life stage to another will feel to them smooth and continuous.

Social exchange theory suggests that older people have societal bargaining power, that is, home ownership, financial resources and good health. Lee (1987) states that "being homosexual [that is, gay male] is essentially a sexual master status...and social exchange theory suggests questions about the continued ability to bargain for sexual activity" (p. 47). Older lesbians' bargaining power may be slight because of women's traditional lack of financial resources and diminished status in an ageist culture.

Older lesbians may have more of a "home" in subcultural theory, which perceives the aged as a subculture, with a group consciousness. Lee's work (1987) suggests that older women who claim membership in the lesbian community, ally with a group consciousness which makes it possible for them to assert their claims not only for inclusion in the lesbian community itself, but also for services in the larger culture.

Older lesbians may also fit into symbolic interactionism theory, where the individual is able to negotiate their fate, rather than merely act out their prescribed roles in society. According to Lee (1987), "Aging becomes a series of status passages...and the study of homosexual aging permits numerous

applications and tests of the status passage approach" (p. 48). Role rehearsal and role models are important, which may advantage lesbians who are experiencing their adulthood in the post-Stonewall era. Older lesbians who grew up before Stonewall, who have no role models of their own, are able to act as role models for the younger lesbian generation. While this may not particularly benefit current older lesbians, younger lesbians' experience of aging will likely be richer because of role modelling by "out" older lesbians.

Lee's work suggests strongly that heterosexist prescribed norms--such as appropriate times to enter relationships-- do not have any application for older lesbians because lesbians (and gay men) tend to cross more generational boundaries in sexual and non-sexual attachments than do heterosexuals. Heterosexual men, however, cross more generational boundaries than heterosexual women. Stratification theory which is founded on a hierarchical ordering of age-graded norms does not therefore accommodate older lesbians well.

Conflict theory which postulates that conflict is inevitable and natural, and views generations as units of conflict, laying the basis for inter-generational conflict may, accommodate older lesbians better than stratification theory. This conflict can produce a "generational consciousness" whereby a group can argue a claim in its own interests. According to Lee, "conflict theory raises such questions as the extent to which older homosexuals see gay liberation activity (parades, protests...pro-gay legislation) as contrary to their interest" (p. 49). Many older lesbians, who are generally more closeted than older gay men, may

feel quite threatened by younger, more political, post-Stonewall lesbians, and may reach deeper into the closet, rather than seek the benefits of "community". Or, generations of lesbians may simply have different interests.

In the theories of aging outlined above, I have made an attempt to locate the lived experience of older lesbians within a body of knowledge which can facilitate a more successful aging experience. Since virtually all mainstream theories are androcentric, regardless of category, and exclude women's voices, I think that it is essential to further examine all theories of aging as they relate to women in general, and lesbians specifically. As Carol Gilligan (1993) argued,

[It is] important to expand the understanding of human development by using the group left out in the construction of theory to call attention to what is missing in its account. Seen in this light, the discrepant data on women's experience provide a basis upon which to generate new theory, potentially yielding a more encompassing view of the lives of both of the sexes (p. 4).

In the next section, I present an overview of structural social work theory and its potential for guiding social work practice with older lesbians.

Overview of Structural Social Work Theory

Hooyman and Kiyak (1993) argue that structural social work theory is a potentially transformative theory of social work that would embrace older lesbians and other marginalized groups' lived experience. Structural social work theory broadens the theoretical perspective by providing a framework in which to understand how social structures oppress people along the lines of race, class, gender, ability, age, and sexual orientation (Maclean, Houlahan & Barskey, 1994; Moreau, 1990).

As Browne (1994) argues, structural social work theory has been heavily influenced by feminist theory in the analysis of the inter-relatedness of gender relations, race and ethnicity, class, and sexual orientation, and these categories cannot be examined separately. Feminist theory informs structural social work theory by seeking to understand women's location and experiences in relation to oppressive patriarchal social institutions and practices. Lorraine Code (1988) states that feminist theory wants to understand the power and privilege differential between men and women and how women's oppression by men is "related to other forms of social oppression such as race and class, and how women's oppression can be overcome" (p. 18). As such, feminist theory makes a powerful contribution to structural social work theory.

Goals of Structural Social Work Theory

According to Mullaly (1993), structural social work views social problems as "arising from a specific societal context--liberal/neo-conservative capitalism--rather than from failings of the individuals" (p. 124). Structural social work has two primary goals: (a) to reduce the destructive effects of capitalism on individuals and alienating social order; and (b) to transform the social arrangements and conditions that cause these destructive effects (Mullaly, 1993), by means of immediate relief to the individual and by institutional and societal change over time.

Levels of Social Structure

Structural social work theory seeks social change at all three levels of social structure: the individual, the institutional or organizational, and the societal

(Mullaly, 1993). Such change, I suggest, would make a profound difference to older lesbians. At the individual level of social relations, Mullaly asserts, the goal is to educate people by personal consciousness-raising that will enable them to understand how capitalist hegemony has shaped, limited and dominated their experience, and therefore, has alienated them from society, from others, and from their true selves: "Only by becoming aware of how others define us to suit their own interests and by understanding how ideological hegemony makes our own subjugation appear acceptable can we become free to regain control over our lives and our destiny" (p. 154). For instance, a support group for older lesbians could give older lesbians an opportunity to speak about their lived experience as lesbians and contextualize that experience within the hegemony of heterosexism, homophobia and ageism. Capitalist hegemony has also privileged some people, and it is important also to educate people about the points in their lives where they are privileged and advantaged compared to others' points of oppression.

At the organizational level, the goal of structural social work is to work towards the transformation of social institutions and organizations so that oppressive social control functions are minimized or eliminated, and emancipatory features are enhanced and maximized. As Mullaly (1993) states: "Part of the struggle...is to democratize the workplace...and to confront all agency policies and practices that oppress or negatively affect service users" (p. 178). For example, a structural social worker would ask older lesbians how policies and practices [at a senior centre perhaps] affect them and together the social worker

and the older lesbians would reformulate these policies and practices and present them to agency management.

At the societal level, Mullaly maintains, one of the goals of structural social work is:

[to] transform our present patriarchal, liberal-capitalist society to one based on a different set of values and social arrangements...by forming coalitions and alliances with other groups and organizations also committed to changing the destructive social relationships and operating principles of our society (pp. 184-185).

In a society undergoing transformation, a structural social worker and older lesbians, for example, would form a coalition with other marginalized groups to lobby for legislative changes which would ensure equal access to social justice and equality.

Dialectical Analysis

An aspect of structural social work theory significant to understanding older lesbian experience is its dialectical analysis. Mullaly (1993) states that dialectical analysis is "based on a view of society and social processes as containing contradictory opposites that must be unravelled and understood" (p. 143). A dialectical analysis would assist in revealing the complexities that co-exist between older lesbians and their environment and would dictate that practice incorporate both the subjective (personal) and the societal (political). Older lesbians, for example, may experience social care by way of social programs and services yet also encounter the oppressive forces of heterosexism and homophobia in the delivery of those programs and services. Thus, the system contains contradictory elements. For instance, older lesbians may access services

but not feel that they can claim their lesbian identity within those services and thus, they would remain silent. Their silence reinforces their marginalization. Structural social work would therefore work to maximize the emancipatory elements of social services provided to older lesbians and neutralize elements that are oppressive. This work could increase older lesbians' feelings of acceptance and inclusiveness and encourage them to use the services offered.

A dialectical perspective also addresses the question of whether individuals can act as agents of their experiences or are objects controlled solely by social structures. Leonard and Nichols (1994) suggest a two-way relationship between agency and structure:

This perspective on the subjectivity of older people suggests that agency and structure are not antagonistic but are closely linked: structures are both determining and enabling. This is...a necessary dialectic; subjects could not exist without the structures that provide possibilities and constraints, and structures could not exist without subjects who reproduce and transform them (p. 8).

The structural social worker with an understanding of how oppression affects marginalized groups would enter into, and maintain dialogical relationships with, social service consumers. These relationships would be predicated on mutuality, respect and the sharing of critical information. Dialogical relationships mean that the social worker is not the expert, but has some skills and insider knowledge of the system which she or he can share with the consumer.

Goals of Structural Social Work Practice

This type of social work practice would not re-create oppressive social relations, instead, the goals would be empowerment, consciousness-raising,

normalization, collectivization and re-defining of the consumer's personal situation. The goal of empowerment work with consumers would be to enable them to reduce their feelings of powerlessness and isolation and gain a sense of control or mastery over their lives. Consciousness-raising would encourage people to reach an understanding of their personal circumstances and how they are juxtaposed with oppressive societal structures. Older lesbians, for example, could explore how the institutions with which they deal make them feel marginalized and excluded.

Imparting information that normalizes the individual's experience--that it is not unique and that it is not their fault could help combat internalized oppression and self blame experienced by social service consumers. Such normalization contextualizes and depathologizes the experience of the individual and locates it socially, politically and economically--in this case, older lesbians. Furthermore, the collectivization and redefining of individual problems would encourage social service consumers to examine their experience of oppression as it relates to group membership. Marginalized people would learn that their problem is no longer an individual experience. By examining their problems collectively, they would be able to understand and redefine their oppression in a holistic manner and locate it in a political, societal context. This can lead to mutual support and organizing for change at the agency level so that consumers' needs are better served, also perhaps to a linking with significant social movements pushing for larger societal and political change. For older lesbians and their allies (in this case, structural social workers), this would mean

organizing for change at both the organizational and societal level to push for transformative changes in attitudes, research, practices, policies and procedures. For example, structural social workers and older lesbians could lobby for explicit inclusion of older lesbians in policy which outlines eligibility criteria for senior's housing.

Structural social work theory could inform individual theories of aging, and other theories, to include oppressed and marginalized groups, and could therefore have positive consequences for older lesbians and other marginalized groups in North American society. To implement structural theory, however, would require considerable education of social workers, researchers, educators, policy-makers and consumers. Promoting and conducting workshops on anti-racism, anti-heterosexism and homophobia would be one way to carry out this education. Society in general, would have to rethink its political ideology and our personal values so that they became congruent. Scholar and writer bell hooks (1991) eloquently describes the benefits of such structural transformation:

The oppressed also create an oppositional worldview, a consciousness, an identity, a standpoint that exists not only as that struggle which also opposes dehumanization, but as that movement which enables creative, expansive self-actualization.... In that vacant space after one has resisted there is still the necessity to become--to make oneself anew (p. 15).

Voices Of Older Lesbians From The Literature

When the voices of older lesbians have been consulted within gerontological discourse, they are well able to speak eloquently about lived lesbian experience (Adelman, 1986; Ashfield & Shamai, 1987; Kehoe, 1989; Macdonald & Rich, 1983; Waite, 1995). In examining the literature, I was able

to discover two different types of information regarding lesbians and aging. The first type included various studies conducted by researchers, many of which have already been cited in this literature review and represent mostly quantitative data. The second type represents qualitative data and embodies the subjective voices of older lesbians themselves, adding a richness and a deeper understanding of their lived experience.

Several issues emerge from both types of information about lesbians and aging. These issues, which affect and are important to older lesbians, include stereotypes of older lesbians, discrimination, health problems, finances, bereavement, loneliness, mental health and attitudes towards aging, and senior-serving institutions. The above list, which is discussed in the next section, is not inclusive of all the concerns of older lesbians but reflects some of the more important topics brought forward by the research studies and personal accounts themselves.

Stereotypes

The dominant culture has perceived the older lesbian as being lonely, bitter, socially embarrassing and hating men and children (Berger & Kelly, 1986; Quam & Whitford, 1992). She is portrayed as someone uninterested in lesbians her own age for sexual partners, and who therefore acts as a predator on and seducer of young lesbians. This myth reinforces the extremely damaging and untrue societal belief that lesbians (and gay men) are paedophiles (Berger & Kelly, 1986). In fact, older lesbians are most often interested in women close to their own age, as Jeanne Adleman (1986) testifies:

This is a stunning sexuality such as I haven't experienced since my early twenties or thirties. And now begins a time when not only do we arouse and satisfy passion in each other...with this intensity, intimacy is building...we: two mature women, she fifty and me almost sixty-five...that love is what we are in (p. 38).

Discrimination

The level of homophobia experienced by older lesbians in North American society is a critical factor in their psychological well-being (Adelman, 1986). Sharon Deevey (1990), reported that 80% of the 78 women in her study had experienced discrimination including arrest, physical and verbal abuse, blackmail, family disapproval and fear of discovery. While not all lesbians are feminists, Shevy Healey (1994) who identifies herself as being a "70 year old radical Jewish lesbian," offers another reason why older lesbians are discriminated against: "[we are] not docile...do not accept the orthodoxies that women are here to serve and rely upon men. We are specifically non-conformist..."(p. 110).

On the other hand, Monica Kehoe (1989) suggests that becoming invisible as an old lesbian/woman may in fact lessen discrimination in old age:

I have no regrets about my long life designation as a lesbian, but did experience years of unhappiness when I had to live in the closet because of it...when within me, emotionally and physically, none [heterosexuality] existed. That is one of the cruelties of the homosexual's lot in our society, and it represents to me all those miserable years which now in my old age can no longer hurt me (p. 22).

Health Problems

Older lesbians report that health problems are one of their most pressing concerns in the years ahead (Deevey, 1990; Quam & Whitford, 1992), yet in

Kehoe's study of 100 lesbians over 60 (1989), 72% of her respondents reported they were either in good or excellent health. According to Deevey's research (1990), some health issues that are of concern to older lesbians include "infrequent breast self-examination, high alcohol consumption, extra weight, and scepticism toward both traditional health care and health promotion" (p. 36).

Lesbians in their old age want the health care system to treat them with respect (Healey, 1994; Stevens, 1996). Many older lesbians remain closeted about their sexual orientation in many situations because of their well-founded fears of discrimination by health care providers.

When I come out to the system I place myself in jeopardy. My anxiety is always that I will become the focus of someone's homophobic projections and stereotypes, and who I actually am and what I need will be lost. When I do not come out I feel diminished and fraudulent...I want, instead, that the health care system drop its heterosexist...assumptions about me so that we can more easily proceed with the work at hand (Healey, 1994, p. 114).

Finances

Women are traditionally financially disadvantaged as compared to men (Browne, 1994, p.6). The feminization of poverty affects women of all ages, but older women are often forgotten when this phenomenon is discussed (Kehoe, 1989). For lesbians, many of whom have not had access to secure and well-paying employment, economic concerns are heightened as they grow older. Many lesbians have remained in lower paying and seasonal jobs, or have not had the financial advantage of a husband's earnings, pensions and major purchases such as a house, land, cars, etc.. Older lesbians, especially those who do not have pension plans or own their own homes, may find they have to work more

years than they had planned (or until they can't) in order to survive financially.

Adleman (1995) describes one old lesbian who may be very typical of many:

Rusty [born in 1923] lives alone in a one-bedroom apartment in the Tenderloin district of San Francisco, an area she describes as being...a sewer.... I can live on my pension and Social Security by being very, very careful.... For the past few years, I worked in a laundromat near my apartment: fifteen hours a day, seven days a week, at minimum wage (pp. 83-84).

Bereavement

Older lesbians are particularly vulnerable to loss and bereavement, due, in part, to their disadvantaged position in society and the lack of recognition of their same-sex relationships. Because of their well-founded fears of rejection and homophobic response, they are often unable or unwilling to discuss their losses with helping professionals. If the older lesbians' families are unaware of the lesbian status, or are outwardly hostile, the families are likely to be unsympathetic or uncomprehending of the significance of the loss experienced by the older lesbian (Brown, 1992).

Older lesbians, who may socialize only within their own lesbian communities, may be left with virtually no social or emotional supports as their chosen family members pass away (Dunker, 1987). The AIDS crisis also compounds the loss and bereavement experienced by older lesbians, many of whom have worked as supportive "buddies" in the gay male community.

Loneliness

Loneliness and isolation are problems for older people regardless of their sexual orientation. For the older lesbian this can be compounded if she is not

involved in the lesbian community, either by choice, being closeted, or by living in a rural area where she has no contact with any other lesbians or a lesbian community. Loneliness and isolation are considered critical causes of despair, and are integrally linked to the older lesbian committing suicide (Kehoe, 1989).

Quam & Whitford's study of 39 older lesbians and 41 gay men (1992) found that for over half of the respondents, "loneliness was a very or somewhat serious problem" (p. 372). According to the study, younger respondents were more likely to utilize helping professionals, and older lesbians were less likely to be lonely if they had a confidante. This data suggests that the older the elderly lesbian is, the more at risk she is for being lonely and isolated.

Mental Health and Attitudes Towards Aging

In her study of older lesbians, Sharon Deevey (1990) found that most of the respondents reported excellent mental health. One of the older lesbians reported: "My parents insisted on my speaking to a psychiatrist when I was 17. I told him to, in essence, shove it" (p. 36). Deevey also found that 80% of lesbian respondents reported positive attitudes towards aging. Berger and Kelly, who studied older gays and lesbians (1986), suggested that older lesbians and gay men, who, in their younger years, have had to master the stigma of being lesbian or gay, have an advantage--their very survival actually facilitates their adaptation to the aging process.

Senior-serving Institutions

While perhaps needing social institutions that support the elderly, older lesbians do not necessarily avail themselves of those services. As discussed

earlier, their reasons might be based on alienation, homophobia and discrimination. According to Kehoe (1989), the older lesbian, even if she lives in an urban area, is not apt to utilize mainstream senior centres or to take advantage of the programs offered. Of the 100 older lesbian participants in her study, only five used the senior centre programs regularly.

Kehoe also found that older lesbians in her study "do not relish the thought of ending their lives in any institution for the aged, but would consider a gay/lesbian intergenerational retirement community acceptable. On the other hand, Shevy Healey (1994) is against age segregation in social services, and in discussing the idea of gay/lesbian-or women-only seniors housing, suggests that "...adopting mainstream patterns of how to deal with old lesbians and gays is simply a duplication of mainstream ageism" (p. 113).

In British Columbia, however, there are two examples of older lesbians who are quite convinced that lesbian-only seniors housing and other levels of care are the options they wish to pursue. Their decision to take control of their own housing needs and other services reflects many older lesbians' desire to have autonomy and freedom from heterosexual state-controlled services.

One example is in Victoria, where the Lesbian Seniors Care Society has formed for the purposes of establishing a support network for lesbian seniors; empowering older lesbians to make their own decisions and contributions in all areas of their lives; buying, building, or otherwise obtaining a building in which to provide residential care for lesbian seniors; and providing care for senior lesbians at varying levels, from personal care to extended care, including

palliative care (Lesbian Seniors Care Society Constitution and Bylaws, 1995, p. 1).

The second example is in Vancouver, where the Menopausal Old Bitches (MOB) group formed to give older lesbians who are in menopause and dealing with aging issues an opportunity to meet regularly and discuss areas of interest and concern. Out of MOB, a group called Lesbians on the Edge of Time (LET) is currently drawing up a constitution and bylaws to form a housing society with goals similar to the Lesbian Seniors Care Society in Victoria.

My personal involvement in the Victoria group, as a founding board member, has given me an opportunity to discuss issues of concern with other members. These older lesbians expressed concerns about homophobic treatment by mainstream agencies and ageist attitudes within the younger lesbian community as central reasons for wanting age-specific services. They felt that they would be excluded or targeted because they were lesbians, or that their lesbian relationships would not be accorded the same status as heterosexual couples. Several of these older lesbians spoke of how they would not utilize mainstream services because they or someone they knew had experienced homophobia. Regarding the lesbian community, many of the older lesbians felt that they were unwelcome at events and dances that were sponsored by members of the younger lesbian community. Instead, they preferred to socialize with other older lesbians, and had organized dances specifically targeting older lesbians. They were very clear about wanting to take control of their lives and create their

own solutions, even if it meant that they did not use mainstream seniors' services or mingle in the younger lesbian community.

It is important to note that many of the concerns discussed above, such as loneliness, health, and financial security, are applicable to most older people, including gay men, and heterosexual women and men (Quam & Whitford, 1992). However, older women generally are disadvantaged more than older men and this is a reflection of women's status in North American society at all life stages (Calasanti & Zajicek, 1993; Gibson & Allen, 1989). Jane Aronson (1988), in her study of women's experience in giving and receiving care, found that "many women feel concern as they age about possible frailty in old age and about how their needs for support or care can be met" (p. 2). According to Aronson (1988),

The particularly subordinate status of older women...threaded through [their] accounts of their situations, as they either implicitly or explicitly recognized the precariousness of their social situations. Further, the ideological underpinnings of social policies for families and old people...were clearly incorporated into women's individual experiences. Closely tied to the ideology of the nuclear family...the high value placed on individualism loomed large in many respondents accounts. On the other hand, many...saw that the existence of a range of public services for the elderly would increase their spheres of freedom and choice.... While women are, typically, in subordinate social positions, older women are relegated to an especially marginal social status...[and are] concerned with issues of security (115-116).

Collete Brown (1994) states that as long as women are kept in traditional female roles, which preclude their equal participation in the paid workforce, they will be exploited and economically disadvantaged as compared to men (p. 14). She further argues that,

...the well-being of older women depends not only on the quality of jobs available to them in their earlier years and whether they are given credit

for staying home, but an end to the division of labour and discriminatory practices based not only on gender and age, but race, class, and sexual identity (p. 14)

Summary

The subject of my thesis is to address what the social work profession can learn from listening to the voices of older Canadian lesbians through an exploration of their experiences. The literature review has encompassed a broad range of subject areas and has helped me understand how older lesbians live in the midst of heterosexism, homophobia and ageism. I also included an overview of general theories of aging in order to create an understanding of the relative invisibility of older lesbians in gerontological discourse. To demonstrate a potentially transformative and inclusive theory of social work, I concluded my look at theories of aging with an overview of structural social work theory.

In the literature review, I found that concerns raised by older lesbians included stereotypes of older lesbians, discrimination, health problems, finances, bereavement, loneliness, mental health and attitudes towards aging, and senior-serving institutions.

A frustration for me in examining the literature on older lesbians cited in this chapter was that none have privileged extensively their participants' voices, except for Marcy Adelman's (1986) splendid book, Long Time Passing: Lives of Older Lesbians. This gap inspired me to centre the voices of older Canadian lesbians. In Chapter Four I present the findings from my study, utilizing extensive use of the participants' own words. Another limitation I found in the literature was the fact that the studies on older lesbians are mostly centred on

older American lesbians. I believe that we, as Canadian researchers in the social work and gerontology fields, need to investigate our own older lesbians and learn more about their Canadian experience. My study is an effort to begin to accomplish this goal. Finally, most of the studies cited in this chapter were based on survey research methodology, which limits seriously participants' ability to discuss issues that are important to them as opposed to issues controlled by the research instrument. While quantitative methodology has contributed important findings about older lesbians, I wanted to free the older lesbian participants in my study to discuss what was significant to them and their lives.

The next chapter examines how I formulated a qualitative methodology that allowed for an exploratory, feminist, emancipatory process carried out by a lesbian researcher with lesbian participants.

CHAPTER THREE

METHODOLOGY

The research question posed to the participants in my study was, "What do you want the social work profession in general, and gerontology specifically, to know about your life as a lesbian over 55?"

This study is my contribution as a lesbian researcher and social worker to collecting testimony from older lesbians in Canada about their lived experience. The explication of these women's lived experience of how heterosexism, homophobia and ageism affects their lives will contribute to the emerging discourse on older lesbians and other voices from the margins. More significantly, this study gives older lesbians as a specific group an opportunity to have their existence privileged and their experience of marginalization centred.

Women and their experiences are not usually "in the centre" of the dominant culture. The experiences of lesbians, and the experiences of older lesbians specifically, are even more marginalized. In my qualitative case study research design I attempted to create a methodology that was feminist and emancipatory. I wanted to welcome the participants into my research as vital women whose marginalized voices deserve to be heard. I wanted the experience of being the creators of knowledge to be a meaningful one for the older lesbian participants. While, as the researcher, I had no foreknowledge of what the results of the research would be, I anticipated that there would be connections made between the experience of being older and lesbian and the institutions of heterosexism, homophobia and ageism. I did not, however, know what the

participants' individual experience would look like. As well, I hoped the experience of engaging in research as a lesbian with other lesbians would be a significant one for me as well.

Emancipatory and Feminist Methodology

Lather (1991) notes that an emancipatory method seeks to "empower the oppressed to come to understand and change their own oppressive realities (p. 53). According to Lather (1991) an emancipatory research method offers "a powerful opportunity for praxis to the extent that it enables people to change by encouraging self-reflection and a deeper understanding of their situations" (p. 58). In this way the act of engaging in a process of making sense of and giving voice to marginalized and disenfranchised people's lived experience can become "a mechanism for solidarity towards eliminating oppression" (Isaac, 1994, p. 35). This research had the potential for being an emancipatory experience for both the researcher (me) and the researched (the older lesbian participants). Both the researcher and the researched are lesbians and we possess "insider" knowledge and the experience of being marginalized from the dominant culture by institutionalized heterosexism, homophobia and ageism. I hoped that engaging in this research would give the participants an opportunity to experience the personal as political.

There are many diverse feminisms just as there are different types of feminist methodology. Shulamit Reinharz (1992) states that the underlying elements of feminist research and methodology, regardless of its type, are:

Making the invisible visible, bringing the margin to the centre, rendering the trivial important, putting the spotlight on women as competent actors, understanding women as subjects in their own right rather than objects for men--all continue to be elements of feminist research. Looking at the world through women's eyes and seeing how the lack of knowledge is constructed are themes running through feminist research. They reflect the fact that feminist research is grounded both in the disciplines and in a critique of them (p. 248-249).

My use of a feminist and emancipatory methodology recognizes the oppressive contexts of lives of the older lesbian participants, privileges their experiences and places their stories at the centre of my study in a process of uncovering and setting the older participants free (at least temporarily) from the margins.

Qualitative Case Study Research

Qualitative case study research is "an empirical inquiry that investigates a contemporary phenomenon within its real-life context" (Yin, 1994, p. 13) and it contains four essential properties:

1. a particularistic element focuses on a particular situation or phenomenon.
2. a descriptive element results in a rich "thick" description of the phenomenon. It also means "interpreting the meaning of."
3. an heuristic element illuminates understanding of the phenomenon.
4. an inductive element means that case studies often rely on inductive reasoning (Merriam, 1988, p. 11).

Case study research can be used to test theory, or build new theory using an inductive mode of thinking about a problem and analyzing data. In generating or expanding theory, inductive case studies do not have

foreknowledge about outcomes although according to Merriam (1988), every researcher holds "assumptions, concepts, or theory" (p. 59).

According to Reinharz (1992) in her book Feminist Methods in Social Research,

The case study is a tool of feminist research that is used to document history and generate theory. It defies the social science convention of seeking generalizations by looking instead for specificity, exceptions, and completeness. Some feminist researchers have found that social science's emphasis on generalizations has obscured phenomena important to particular groups, including women. Thus case studies are essential for putting women on the map of social life (p. 174).

Reinharz quotes a warning by Berenice Carroll that feminist theory is impoverished without case studies:

Theory must remain at best hypothetical, at worst unreal and barren [unless we have detailed] case studies and surveys dealing with the experience of selected groups of women in diverse cultures and time periods (p. 164).

In discussing feminist case study research, Reinharz (1992) states that feminist case studies are needed "to rectify research tainted by gynopia, misogyny, and male-dominant theorizing" (p. 168). She goes on to define gynopia as "the inability to perceive the very existence of women or to perceive women in undistorted ways" (p. 168). Feminist case study research, then, helps to make visible the invisible (women), and centres and privileges women and their experiences. In my study, older lesbians and their stories are made visible and central. While contemporary traditional social science does not value the use of case study (Reinharz, 1992), I believe my use of this feminist and emancipatory method will distinctly centre the margins of older lesbian existence and "give

voice" to their lived experience through the use of their stories. Ng (1990) illustrates the importance of the articulation of personal experiences: "I am advocating for their use in explicating the taken-for-granted features of everyday life...rather than dismissing them as anecdotal, they are treated as essential features of a larger social organization" (p. 11).

Participants

The participants in my study were selected from what I understand to be the lesbian community in Vancouver and Victoria. Lesbian communities are comprised of women who self-identify as lesbians, and who desire various levels of involvement in a community comprised of other lesbians. There are many smaller communities of lesbians within a larger lesbian community and they usually contain lesbians who share an affinity or a common interest. Lesbian communities are becoming more visible as more women claim a lesbian identity and affirm their existence in a more public way.

Older lesbians, because of their invisibility, are difficult to locate in the social work field, and their invisibility keeps them isolated. B e c a u s e lesbians tend to be "invisible" within the dominant culture, their visibility to me, a lesbian researcher, an "insider", facilitated the selection of participants. I therefore used a purposive "snowball" sampling strategy in order to reach potential participants. As a lesbian, I have an authenticity and credibility which allowed me access into the community. I know some older lesbians and I asked them if they might be interested in participating in my study. I also asked them

to identify other older lesbians, who in turn, were asked to identify others. My telephone number was given out as a part of the snowball recruitment process.

I had planned to place advertisements in lesbian media, and at social events and lesbian gathering places in the Greater Vancouver Regional District and the Capital Regional District (Victoria). The advertisements contained an outline of the study conforming to the University of British Columbia Ethics Guidelines, as well as my telephone number. The use of the advertisements ultimately proved to be unnecessary because the snowball recruitment method brought forward the four older lesbian participants. Once I had contact with the potential participants, I spoke with them in person or by telephone and outlined the purpose of the research and the criteria for participation. I answered any questions they had, and stressed that their confidentiality would be assured. During the conversation, I also positioned myself as a lesbian researcher doing lesbian research.

For the purposes of my study, I define an older lesbian as being 55 years of age and over. Here, in British Columbia, an individual can qualify for some senior's benefits such as subsidized senior's housing and senior centre programs at the age of 55. The research participants were recruited and selected based on the following criteria:

1. women who self-identified as lesbians.
2. lesbians who were over 55 years of age.
3. older lesbians who wanted to speak about their lived experience of being over 55 years of age.

The four participants in this study were interested in helping to generate new knowledge about older lesbians and assisting in the expansion of lesbian discourse. They were also willing to break the silence about their lesbian existence and their personal lived experience within the field of gerontology. All the participants were known to me in varying degrees and I had previous interactions with them in different settings ranging from two to twelve years. Our interactions included those in social settings as well as being involved in community groups.

Demographics

The four older lesbian participants in this study--Sally, Donna, Angela and Sarah--range in age from 56 to 82 years of age. Three women had been married previously in heterosexual relationships and the fourth woman had never married. Of the three previously married women, two had two children each and the third woman had one child. The never-married woman had no children. All four of the women are of European heritage and have either lived in Canada for several decades or were born here. English is the first language for all four women.

One of the women is still working, while the other three women are retired. The educational levels achieved by the participants included post-secondary or professional training. Two of the participants were teachers, one was a nurse and one was an office manager. The three retired women are living on the income from various pensions and the fourth woman receives employment income. All of the women are currently in relationships with other women and two of the women are in relationship with each other. One of the women has been a lesbian

since her twenties, one from her thirties, one from her fifties, and the fourth woman came out as a lesbian when she was seventy-five. Two of the participants chose to use pseudonyms rather than use their own first names, in order to maintain their confidentiality and protect their identities. The other two participants chose to use their own first names because they did not have the same concerns about their identities becoming known. All the names of other people mentioned in all the narratives have been changed to protect their identities.

All four older lesbian participants are very comfortable in their lesbian identities and are or have been involved in the lesbian community in varying degrees. They are, or have been, involved in lesbian social events, community organizing, and political activities.

Interview Process

Since there appears to be little empirical information on older lesbians and since I wanted to honour a feminist and emancipatory process, I employed an unstructured interview format (Bernard, 1994; Burgess, 1982) to elicit information from the participants. I hoped that this interview format would also enable participants to provide suggestions for improved social work practice and policy-making that seeks to unlearn heterosexism, homophobia and ageism.

The primary question my research addressed is what the social work profession, generally, and gerontology, specifically, can learn from listening to the voices of lesbians over the age of 55. I was curious about whether the participants would say anything about the following topics: Does the climate of

institutional heterosexism, homophobia and ageism of the dominant culture determine access to social work services for older lesbians? Are existing services to seniors explicitly inclusive of older lesbians? Are there existing relevant services that are specifically targeted towards older lesbians? Are they experiencing discrimination in senior housing complexes and care facilities? If so, what changes need to be made to accommodate the needs of older lesbians? Do they perceive that heterosexism and homophobia pre-determine the quality of care and/or services received by older lesbians? What improvements can be made to increase the level of awareness of service providers regarding the reality of the existence of older lesbians? Does the lesbian community provide any services to older lesbians? If so, what are they? If not, what is needed? Is the lesbian community inclusive and embracing of the older lesbians in their midst? What improvements are necessary in the Canadian social work profession to make it more sensitive towards and inclusive of older lesbians?

Based on the findings in my literature review, and on my own experience as a lesbian, and as a social work professional, I expected that many of these questions or concerns would be raised during the interviews with the participants. I also expected that the participants might identify other questions or areas that need to be explored.

Since lesbians tend to be "invisible" within the dominant culture, their visibility to me as a lesbian researcher and "insider" produced an exchange of information that fostered an awareness of our shared commonality of experiences as well as indicating the diversity of our experiences. I believed that my

accessibility as a lesbian researcher helped to diminish the inherent power imbalance between the researcher and the researched, and encouraged a higher degree of collaboration.

Once the older lesbians stated their interest in being participants in my study, an interview time was set up. The interviews were conducted in Vancouver and Victoria, the two major cities in British Columbia. In order to ensure privacy and confidentiality, and at the participants' request, I conducted primary interviews in the participants' homes at a time of their choosing. It was essential that the women felt safe, since it was possible that they were not publicly "out" as lesbians in the dominant culture. The need to respect their need for confidentiality was of the utmost importance.

To address ethical issues and confidentiality, I used an interview consent form which was signed by the participants and myself. I spent time discussing with each participant the purpose of the research and our hopes for its relevance in gerontological discourse. We discussed the statement of confidentiality and their rights as research participants, including their right to refuse to answer any questions and their right to discontinue participation at any time. We discussed their right to interrupt the interview at any time to ask questions or take a break. I discussed with them how, if painful or upsetting feelings came up, we would debrief them at the time or at the end of the interview, and that I would give them appropriate referral information to qualified counselling resources if they wanted them. The participants were also advised that throughout the study, they

could contact me to give feedback, to ask questions and to raise possible concerns.

We discussed how the primary interview audiotapes would be transcribed verbatim by myself or a professional transcriber, and would be given to the participants in a second interview for their evaluation of the interview's accuracy (Opie, 1992). At that time, they would also receive a copy of my retelling of their narratives. The participants would have an opportunity to advise me whether or not their stories had been adequately understood, and would be able to clarify what they meant to say, and change or delete any information that they did not agree with. Any changes would be noted, and incorporated into the transcribed notes. Since the changes might be in themselves an important source of information, the corrections would be incorporated so that the original information was not lost. (The only deletions requested by the participants pertained to potentially identifying information.)

I began the interviews by describing how I wanted to engage in a conversation rather than engage in a traditional interview process where I asked structured questions and received answers. Like Oakley (1981), I wanted to hear their "subjective experiences as women and as people" (p. 30) and their "own accounts of their lives" (p. 48). I told them what the research question was (What do you want the social work profession in general, and gerontology specifically, to know about your life as a lesbian over 55?) and I asked them to discuss anything they wanted to about their lived experience as older lesbians. During the interview I would sometimes ask questions to probe for more specific

information that related to the research question. For example, if the woman did not talk about what she thought the social work profession needed to do to be more inclusive of older lesbians, I would ask her. The women started their narratives at whatever point they wished. As well, I would sometimes ask questions during the interview to clarify some information or to encourage a deeper dialogue about various issues they were discussing. (The four probes I used in addition to the central research question are listed in Appendix A.) The primary interviews lasted from approximately one hour to one and one-half hours in length.

All the women began their stories by talking about their coming-out process as lesbians. They then went on to discuss various issues that they felt were important for them as older lesbians. One woman experienced painful feelings during her interview when she was telling me about her daughter's death from AIDS. At that time I asked her if she wanted me to stop the tape so she could take a break. After she had paused briefly and felt ready, we were able to continue the conversation. When the interviews were over I ensured that the women were feeling okay with the ending of our time together. After our interview was over, I gave one woman some referral information about a group for lesbians over 40 that I had told her about during the interview.

Prior to the second interviews I gave the participants copies of their transcripts, my written retelling and interpretation of their stories and my working definitions of heterosexism, homophobia and ageism. The secondary interviews were conducted in the participants' homes, with the exception of one woman

whose interview was conducted by telephone. While I had been prepared to travel to her residence, the alterations she requested involved minor grammatical changes and she felt there was no need to meet in person. The secondary interviews, which lasted approximately from one-half to three-quarters of an hour, also provided an opportunity for both the participants and me to discuss information not raised and discussed in the first interviews.

Data Analysis

Research from the margins requires that when analyzing the data, intersubjectivity and critical reflection on the social context be important components and that voices from the margins will be given priority. By this I mean that the words of the older lesbian participants will be privileged within this document, and will be contextualized by referring to the social location in which they live as separate from the dominant culture, and to the societal institutions of heterosexism, homophobia and ageism which influence their lived experience (Kirby & McKenna, 1989). I analyzed the data by immersing myself in the interview transcripts, staying close to them, and by listening to the audiotapes while reading and rereading the transcripts, so that I could achieve a holistic sense of what the data was relating. To me, the process of data analysis was not static, and required vigilance so that these voices from the margins were not decontextualized.

Employing a feminist case study format, I then rewrote the women's stories in order to "tell the story of" (Reinharz, 1992, p. 171). My use of a non-traditional case study reporting methodology in this document is intended to create a format

that suits my own purposes--in Reinharz's words, "feminist interest in case studies stems from desire to document aspects of women's lives and achievements for future secondary analysis and future action on behalf of women" (1992, p. 171). My interpretation of the data was reviewed by the women and some of the data was changed to reflect their feedback. I also identified themes that emerged from the data and these will be discussed in the next chapter.

Credibility and Relevance

Patti Lather (1991) states that "currently paradigmatic uncertainty in the human sciences is leading to the re-conceptualizing of validity" (p. 66). Lather (1991) quotes Reason and Rowan, who argue that in order to assess validity, emancipatory research needs to borrow concepts of validity from traditional research in ways that are appropriate to "an interactive, dialogic logic" (p. 240). In this way credibility and relevance of the data is accounted for and new knowledge is enhanced, is believable to others, and is seen as trustworthy (Merriam, 1988).

As has been discussed earlier in this chapter, these member checks would help ascertain validity, or credibility and relevance. Research findings must be recognized by the participants themselves and such checks are themselves a determination of validity (Kirby and McKenna, 1989). According to Morse (1994), a member check:

reaffirms [for participants] their active participation and their desire to make the findings meaningful, accurate, and credible.... The informants are the primary gatekeepers and the researcher is the secondary gatekeeper for information and to substantiate findings...they know their worlds (p. 108).

A feminist perspective also values women being the experts in their own lives. The voices of older lesbians are privileged and centred in this research and this is consistent with a feminist viewpoint.

I made a concerted effort to establish credibility and relevance by being aware of what might influence the participants and their ability to be authentic in their telling of their stories. To ensure the most authentic participation possible, I advised the women that I was interested in hearing their understanding of their lived experience as older lesbians. I encouraged them to not censor their stories, to know that there was no one way of telling me about their lives, and that I was interested in whatever they felt they wanted to share with me. I also stressed the confidentiality of the interviews and that they would have the opportunity to change their transcripts and my retelling of their stories to delete information or to capture more accurately what they had wanted to say and how they wanted to say it.

Reflexivity

My research included an explicit examination of my own reflexivity, my own position and experience with respect to the issues, or situated knowledge (Harraway, 1986)--that is, how I am situated in terms of my class, my ethnicity, my gender, my age, my education, my functionality, and my sexual orientation, especially in light of social workers' commitment to professional self-awareness (Swigonski, 1993). I looked at my own reactions, feelings, and beliefs regarding the issues and experiences in the data. I am situated as female, raised working

class, feminist, white, Irish, Scottish, English and German extraction, middle-aged, able-bodied, university educated and lesbian.

I undertook lesbian research because of my own location as a lesbian, my interest in the lesbian community, and my own professional, personal and political commitment to that community. I approached this study from the perspective of an "insider" looking through an "insider's" lens (Scott, 1989, p. 46). I positioned myself as a member of the marginalized group I was researching, "researching from the margins" in an effort to centre the margins of lesbian existence and lived experience. As Kirby and McKenna state, "'Being honourable' in the research process means openly recognizing our experiences of marginalization and using it as our touchstone" (1989, p. 131).

Strengths and Limitations

As a member of the lesbian community, I hold a level of authenticity and credibility which may not normally be available to a heterosexual researcher attempting to access the lesbian community for the purposes of research. In addition, I have a reputation in Vancouver and Victoria as an activist in the lesbian community. I have been integrally involved in community development and social action, including being a founding member of the Lesbians Seniors Care Society in Victoria, organizing lesbian mothers in Vancouver and Victoria, and the MOB (Menopausal Old Bitches), a group for lesbians over 40 in Vancouver. I believe that my lesbian status has been a positive influence on my research, and I was granted access to potential participants not normally granted to non-lesbians. I, too, have experienced the effects of heterosexism and

homophobia, and my experience has, I hope, demonstrated to the participants that we have shared experiences in common. However, I might have gotten a different response from participants who did not know me.

I did not know if a possible limitation to the research would be my feminist identity and analysis. While that could have been seen by some of the participants as a positive influence, I could not assume that all of the lesbian participants would be feminists themselves. As Katherine Borland (1991) asserts,

For feminists, the issue of interpretative authority is particularly problematic, for our work often involves a contradiction. On the one hand, we seek to empower the women we work with by revaluing their perspectives, their lives,...in a world that has systematically ignored or trivialized women's culture. On the other, we hold an explicitly political vision of the structural conditions that lead to particular social behaviours, a vision that our [participants], many of whom do not consider themselves feminists, may not recognize as valid (p. 64).

Another possible limitation was the intermingling and multi-layered nature of relationships in the lesbian community. At times, this has meant that individuals have had their confidentiality breached. By this, I mean that some participants could have had their confidentiality transgressed because some members of the lesbian community knew I was doing research on the topic of older lesbians. If they happened to discover that a particular individual was meeting with me, a conclusion could have been reached that the individual older lesbian was taking part in my study. I am known in several different contexts within the lesbian community, and I strongly emphasized my commitment to maintaining absolute confidentiality regarding the identities of the participants.

Another limitation is that my sample did not include visible minority lesbians, First Nations lesbians, lesbians with visible disabilities, who are poor, who live in rural areas, and so on--in short, the same limitations that have been experienced by other researchers doing lesbian research.

Reciprocity

I believed that it was important to honour the participants' time and commitment to my research study by giving back to them in some meaningful way. "Giving back" included giving each participant a copy of her transcript and my "retelling" of her narrative. I also gave each participant copies of a newsletter for older lesbians. I plan to organize an event for the lesbian communities as a whole in Vancouver and Victoria and present the study and its findings. To assist in creating social change and further "centre the margins", I will present my study and its findings at the B.C. Association of Social Work's Annual General Meeting in June 1996. I also intend to make the study and the findings available to various journals, gerontologists, social service agencies, and policy-makers.

The next chapter contains my "retelling" of the four participants' stories and a discussion of the themes that I feel emerged from those stories.

CHAPTER FOUR

FINDINGS AND DISCUSSION

So you lived a lie. I feel I lived a lie a lot of my life because of that ... because of the fact that I was just not brave enough probably to come out Angela

I can remember not even really knowing what a lesbian was.... I don't know how it started making sense to me. I just realized I was in the wrong pew Sally

I'm what we call a "Late Onset Lesbian." When I was 55 I fell in love with a woman and here I am Donna

I wasn't being acknowledged as I would have been had I been her husband Sarah

These quotes capture for me some salient points that were identified by the participants in their stories of their lived experiences as older lesbians. Many themes appeared in the women's stories as follows: heterosexism, homophobia, ageism, financial concerns, housing concerns, health problems, vulnerability, senior-serving institutions, isolation, sexuality, grief and loss, organized religion, and feelings about the lesbian community. This chapter begins with my "retelling" of the four women's stories, followed by presentation of the themes that emerged from their stories, and ending with my discussion of the themes.

Angela's Story

Angela claimed a lesbian identity once she moved to Vancouver from England. For her it would have been difficult to live as a lesbian in her country of origin, because of her concerns about her family's homophobia. While that knowledge of her family's homophobia was unconscious at the time, Angela

believes that she had to leave her country to find a safe place to be a lesbian. Emigrating to Canada and "severing that umbilical cord" gave her permission to be who she was:

Frankly, I think that's why I left. I knew I was gay and knew I'd never, never be able to live my life properly in England. I came from England at 24 knowing that I was a lesbian, but never having experienced it because I didn't think anybody else was. However, on getting here I'd met up with a woman who was bisexual and we had a year or two long affair.

She describes how difficult that process was for her and how heterosexism and homophobia impacted her life and how she felt she had to hide her lesbian identity:

I was very much in the closet. I was feeling very paranoid about it, because at the time I was living with three English women that I'd come to Canada with. They were all straight, and were not aware of how I was. They thought I was straight too, so it was very difficult when I eventually did meet this woman. Because I lived with these three women, it was difficult to have any private time with this woman.

The need to hide her sexual orientation, because of heterosexism and homophobia, affected Angela's relationships with the women friends with whom she came to Canada from England. At the same time, she needed her ties with these women and did not want to risk losing them as friends, in spite of the difficulties this caused:

The friends that I had come with from England to here were straight and I was the gay one. It was very difficult there too, because they were like my family, and it's only recently that I've told them. One of them, my best friend, she's known for a long time, but the other two hadn't. Only recently I've told them. So that was a difficulty. They were always trying to partner me up with boyfriends...and I had to make excuses, which is annoying.

Angela's first relationship with a woman ended because of Angela's need to be closeted. Angela then began to enter the lesbian community of the late 1960s and early '70s in Vancouver:

I met another woman who was also bi but had lots of gay friends. I started to go to the clubs and I met Mary, who is a good lesbian friend to this day.

Just as with her three English friends, being a lesbian in a heterosexist and homophobic society created dilemmas at work, where Angela felt it necessary to hide her lesbian identity. She found ways to pretend that she was heterosexual, and she believes that some people are still pretending:

It was difficult in those days because when you have social do's at work, everybody was invited to bring their husband, but no one thought to invite you to bring a partner along that was a gay partner. It wasn't heard of in those days. Luckily I had a gay friend, who's still my friend, who used to come and partner me at things, which was good. It worked out for the hospital things. He'd come and play "straight" for the night, which was hard for him. I don't think it fooled too many people but at least it was acceptable.

Because of the societally imposed need to appear heterosexual, much of Angela's life remained hidden:

So you lived a lie. I feel I lived a lie a lot of my life because of that...because of the fact that I was just not brave enough probably to come out.

When I asked Angela if anybody else at that time was brave enough to come out, she didn't know of anyone. This only began to change for her in the mid-1980s, when she began to come out of the closet:

I felt that all along through my career, probably up to the mid-1980s, when I started to come out of the closet and I came out in a more public way. I never actually announced myself at work, although I think most people knew. I certainly knew a lot of gay people around work and people started to declare themselves, and bring their partners to work do's,

particularly in the Renal Unit. Many people in the Renal Unit seemed to be gay, and they all brought their partners and had wonderful parties.

In discussing homophobia in the health care system, Angela spoke at length about her experiences working in a big Vancouver hospital. She was able to share a story about nursing a patient whom she thought was in a lesbian relationship:

I looked after somebody who I was quite sure was a lesbian and she had a partner that came in. I did talk to them always as partners, although it was not disclosed by the patient. Unfortunately, the woman died, but her partner I later came across at a Gazebo event. We had this moment of "oh so and so always said you were [laughter], she was ever so comfortable with you." If I suspected, I would sort of dangle little hints that I was lesbian and hope that they'd take it up. But really, nobody wants to in a hospital because a lot of the staff really view lesbians...they need education a lot of them, about lesbians and partnerships, or anything that's different. I think a lot of the younger nurses do try hard, but there's always the odd sort of pang, little sniggers that go on.

When I asked Angela if she thought there was systemic homophobia in the medical system, she stated emphatically:

Not so much from the nurses but more from the doctors. Yeah, I think that some of the doctors are incredibly homophobic. I've experienced some of their remarks and know it to be true, and that's what really held me back a lot from coming out because that's where I got my support from [for her nursing skills]. I know it would have gone over like a lead balloon if I suddenly said, "Oh, well, I'm a lesbian". Yeah, the ones making the remarks would be on me. It would affect everything.

My job involved working very closely with them, so if I was to upset the apple cart then I would lose my job.

When asked what she thought needed to happen within the different systems who have contact with older people, to make them more inclusive of older lesbians, Angela stated:

Well, acceptance of the differences to start with. Acceptance, real acceptance, not just lip service. How you do that I don't know; that is changing total opinions and that comes from education. Politically it needs to be looked at. I can see the N.D.P. maybe looking at it as an issue but I can't see the Liberals or Reform considering it worth their while. So I suppose it's something that we've got to politicize for, and put in the right party to work on it.

In discussing the need for various government ministries to develop and rewrite policy to make it inclusive, Angela utilized a wonderful metaphor:

Well, that's it, I mean, it's everything, isn't it? You've got to remake the whole sweater because this thread is not there, it's only partly there.

Further to the need for systemic changes in our heterosexist society, Angela talked about the need for same-sex benefits, and other changes that are needed so that lesbians and gay men are included:

I think straight people get more breaks than do partnered gay and lesbian people do as far as price reductions, the inclusion of partners thinking of travels, and things like that. The facilities that should be created for gays and lesbians to be housed together when they get older, changing the rules regarding benefits, and health benefits. They still haven't allowed for same sex benefits for pensions.... I'm sure there are hundreds I just can't think of, because it's everything really, it's everything.

A major concern for Angela is that of financial stability. She believes closeted lesbian relationships tend to not last very long, and then when the relationship dissolves, financial losses can occur:

I think our relationships, because of being in the closet, and being paranoid, tend not to last as long. You build up financial things together, and then you break up and you lose it. Rare are the ones that stay together for forty years, and have something at the end of it. So I was concerned about financial things. That's been one of my major worries...because having worked in the system and seen what happens to old, poor women, where they're sick, and there's nowhere for them. They sit in these huge, open wards and they have no privacy, no life. I just thought, I can't bear that.

While Angela was able to buy a house when the real estate prices were lower than they are in the 1990s, she worries about finances:

I've been lucky in that I've bought a house when houses were buyable. That's the power behind being able to retire. I'm not wealthy, and one of the worries is, of course, that as time goes on and inflation cuts in, that whatever I have may not be enough.

Angela went on to discuss how two lesbians' increased financial concerns as they age may keep them together after their relationship has lost its viability:

They seem to stick it out because they own so much property, or they don't want to lose their financial interests.... I personally have had the experience of doing that and I think it's not the right way to go. I think lesbians in general tend to do that, tend to stick together just because of finances. Having been caught once very badly, financially, I don't want to be caught again.

Even though finances were a concern for her, Angela has recently taken early retirement from her job at the hospital, due to concerns about her health:

It wasn't so much looking after myself financially as looking after myself physically, because the job had gotten so that I was getting sick from it.... I couldn't stand the politics around there anymore. One of my missions in life was to get the retirement age lowered for nurses, the same as for police and fire people, because I felt that nursing was just as heavy a job, and just as dangerous in many respects, particularly with the kind of infections you're seeing now. I was offered early retirement and it was a buyout kind of thing, so I thought it's now or never, I'm going to do it for my health's sake.

Taking early retirement was a major decision for Angela, because it meant struggling to find a balance between concerns for her health and financial stability. Owning her own home helped her to make the decision to care for her health:

Luckily having the house that was almost paid for, I felt I could manage, and maybe pick up extra work somewhere else. It was a big step because like I say, one of my biggest fears is being in the poor house when I'm

seventy or eighty. I've seen it so many times with people, women being warehoused...having no friends, having no family to care for them, just living in a pitiful state. Many of them have said they'd rather be dead. They don't have any life, and just, "Oh god, I'd hate that."

Another concern for lesbians as they age, according to Angela, is sexuality. Ageism can dictate that an older woman has no right to claim her sexuality, and to continue to be sexual:

I think the older you get, the less chance there is, perhaps, for sexual experience simply because the way our society is, that if you're older and you have wrinkles and you're all saggy [Angela laughs as she says this].

When I asked Angela if she thought that having wrinkles and being saggy meant that older women weren't allowed to be sexual, she agreed, and then went on to describe her new relationship:

I never thought that I would be again in a romantic, sexual experience, but surprise, surprise, it all happened, you know. I did meet someone, and she loves me, wrinkles and all. It's wonderful. I felt that sexual desire would go and I wouldn't have an opportunity to be sexual again with anybody.

At the same time, Angela expressed some concerns about being in a relationship again:

It is not as easy as it used to be. One gets tired...I think your desires get less [as you get older], that you get more humdrum. I'm quite happy sitting at home reading a book, or doing something quiet, whereas sometimes your partner wants to go out and have fun or party it up a bit, or maybe wants more sex than you feel you do. Although it's been quite good so far but I can see as the years roll on this could be a problem, particularly if you're not the same age [Angela's partner is eleven years younger.].

Angela went on to discuss how older lesbians can have difficulties in meeting other older lesbians. She had lived in Vancouver for over thirty years and recently moved to a suburb of Vancouver. She described how living in a

major city helped to facilitate those opportunities, as well as providing anonymity. The suburbs offer fewer chances for older lesbians to meet each other, and there is less privacy:

Another concern for an aging lesbian is where to meet other aging lesbians. We're lucky, living here in Vancouver, that there are so many social things to meet older lesbians. I think living in the suburbs is a little more difficult. In Vancouver, people didn't seem to mind who came to call. Here [in a suburb of Vancouver], it's a little bit more suburban, and people I think notice who calls.... I had a New's Year Eve party and I had about twenty-five or so lesbians that came. I just got the feeling that it was a little bit, like the neighbours were looking but nobody said anything, and next door were quite charming about it all so that was fine. But I don't feel quite as comfortable in suburbia as I did in the city, because [of] just knowing the way that people look out the windows and stuff.

Angela talked about the difficulties of going back to work as an older lesbian. Being out as a lesbian in the workplace is a problem for her because she feels that her sexual preference is something personal:

If you want to pick up work again it's difficult when you're a lesbian because then, if you go back into the workforce, it's the same need to be closeted, unless you go in prepared to be really out. Then you're faced with those same conundrums that I had at the hospital all those years, walking a fine line. I don't know why it bothers me to announce myself but I just feel it's very difficult. I feel it's something that's very personal, very mine, and I don't want to share it with just anybody.

Angela spoke of how she comes from a different generation, and agreed that younger lesbians today may find more acceptance of their lesbianism when they are in their forties, fifties, and older:

Yeah, I think that's it. We've come, I've come, from a generation where being a lesbian was very hidden, and very not talked about, and not recognized.

Similar to many other groups of older lesbians, Angela and her friends have been talking about housing concerns. They want to create a way for older

lesbians to make a community for themselves, and live together, as a protection from, and an alternative to, heterosexual housing models for older people:

Some of my friends and I have been talking, and I think this is quite common in lesbian things, we start talking about communal property, maybe buying somewhere, some acreage. We had meetings, we were really keen to do this, buying some land and building. That's what I would like to see, some sort of community, or some way of buying into either an apartment block where everybody could have their own apartment, or a co-op or something.

I think that's what we need to do because one of the worries too, with warehousing, is that it's straight warehousing, it's not even lesbian warehousing. I wouldn't mind if I could rock with twenty other lesbians you know, in our independent rocking chairs. Yeah, chatting about old times, but when you're stuck with a bunch of straight women that want to talk about their husbands. And you're forced to sit silent or be the odd one out. It's difficult and the older you get the worse it is, I think, so that's a concern. Yeah, I want to grow old with other lesbians, and the older I get the less tolerant I am to be in the straight world. I really prefer the company of lesbians.

As we discussed further her preference to be in the company of other lesbians, rather than heterosexual people, Angela was able to identify some of the reasons for her strong feelings:

Probably it's about friendships and feeling validated, having common interests, and I find lesbians always have interesting things to talk about. Like they're more interested in themselves, where they're going, how they're feeling. Conversations with them are much more meaningful. With lesbians, with my friends, we have fun. There's lots of joking, lots of laughing, lots of growth, you find things out together.

Angela went on to describe how she experiences her heterosexual friends as not being as able or willing to have meaningful personal contact with her, in the way that her lesbian friends do, and how that doesn't echo her interests:

It's very superficial I find with a lot of my straight friends. They're just not into discussing feelings or thoughts or directions. They are sort of the suburban housewife type. They're into P.T.A. and doing good turns and

volunteering at the hospital and that's good, it's good, but that's as far as it goes. They're not really concerned about how you're feeling particularly, or they don't want to think how they're feeling.

As women get older, feeling isolated from the larger community can become problematic. For Angela, this is becoming a concern:

It worries me when I don't go to the MOB group [a group for lesbians over 40], or follow through on some of these things. Another thing I used to do was the Women's Day March every year. I didn't go to that this year, and I don't want to let that go because I feel that's very vital, to be part of that.

Angela and I discussed how important it is to be involved, and that it is important for lesbians to prevent their own isolation. For Angela, it is also important to recognize that there is a larger political need to fight for lesbian acceptance and visibility:

I think if we stop protesting, marching and all that, we'll just be rolled back again. I think what's happening now, it's starting, the wheel's starting to go backwards again a little bit. You hear that Buchanan is winning in the States, you know, stuff like this that looks like everything is starting to roll back the seventies way. I think we all have to watch for that, and we have to be more political and that's difficult too, because if you're in a partnership where or if your friends are not political...certainly as we get older we tend to retreat a bit more, not because we don't want to be out there, but we're more comfortable just playing golf, or minding our own business.

Angela is more outwardly political than her friends and her partner, and maintaining her political activities takes effort on her part. She doesn't get a lot of support from her friends. Her partner is supportive of what Angela chooses to do, but doesn't wish to join public demonstrations herself.

You can get a bit of "gear" from your friends if you start getting political and they're not into it. Certainly with the partner I'm now with, she's very political at work, but she's not really into marching or doing any of those

kinds of things, that kind of politics. So for me to run off and wave the banner in my own way, is what I would have to do.

Angela acknowledged that women coming out as she did, in their mid-life years and older, can be problematic, but community supports make it easier to get involved today than in years past:

I think that it is easier these days, because there's so much going on that they can join and it's more open. If you just decide to act upon being a lesbian when you're forty-five or fifty, I think it's probably more difficult to get into a group for sure. But the groups are there, and I think most lesbians are quite accepting of new people. Contrary to what people say about the Gazebo Connection [a social group for lesbians], that's got a reputation for not being friendly, but I've always found it to be. That's where I've met most of my friends...through Gazebo and Gazebo activities like the women's chorus; I met quite a few people there that I'm friends with now. And the political branch. So it works, but I think you have to go out and market yourself. People aren't going to march to your door and bang it down and say, "Do come out and play".

At one point in the interview Angela wanted to have the tape recorder turned off, so that she could think further about more concerns she has as an older lesbian. After the recorder was turned back on, she went on to discuss health concerns:

I think it's worse for lesbians because you don't have the family support to help you if you're sick. If you live on your own and you're a somewhat isolated lesbian, you're probably not as comfortable having a next-door neighbour come in and help you because probably your pictures, your books on your bookshelf, all these kind of things indicate your lifestyle. You might not want people from outside to look after you.

On the other hand, if you're like me and couldn't care less, then you worry about abusing your friends if they had to come in and help you, particularly if it's long term where you have something like MS. I know a couple of friends of mine have got MS, and luckily have partners that are very good but if they didn't have those partners their lifestyle would be very much different, very, very much jeopardized, I think. They'd have to depend on public health or the help of friends who may be sporadic,

because you're looking at something that is chronic. It's going to go on and on and that can burn out friends, I think, if you're not careful.

Although, just looking at some of the wonderful endings for some of my friends that have died, the wonderful support that their group of [lesbian] friends gave them is just phenomenal. I remember one where she was in the palliative care at VGH [Vancouver General Hospital], and she had her own little team of lesbians that came in and sang to her, and looked after her. The ward staff there at palliative care is very, very gay- and lesbian-friendly, and they allowed all sorts of visits. But at some smaller hospitals I know, they still have difficulty allowing the gay partner in and that would bother me. If your partner was not allowed in or not allowed to make decisions for you. That's why I've got a committeeship. I've put Mary [a good lesbian friend] in charge of it, and I've given a copy to my doctor to tell him how I want to be treated if I can't make the decisions myself.

Another support system Angela didn't feel was in place in the same way for lesbians and gay men as it is for heterosexual people was the religious community. According to Angela, churches are all too often homophobic and ostracize lesbians and gay men:

The other support system that lots of the straight world have is the religious one...and our [lesbian and gay] community is considerably smaller, and often the church despises us. So I think again we have that difficulty, and the older you get generally, is when you want those support systems. And in our community we just don't have that same support from church and state. When you're talking about burial and your end, it would be nice to think that someone would come and give you your religious guidance who was a lesbian or gay person, right? If you lived in Moosejaw or somewhere, you may not get that.

At the end of our interview, another illustration of homophobia and ageism that Angela identified as a concern for older lesbians was crime and abuse. For Angela, older lesbians were both more vulnerable to crime and abuse and felt more unprotected:

The other thing too, is crime and abuse for the elderly, women particularly but lesbians in particular. The older you get the more susceptible you are to intimidation and brutality. If you're living near yobs [bullies] and they

find out that you're a lesbian old woman they are more likely to intimidate you, and I think that's difficult for older lesbians. The older you get, I think, the more you become afraid of that kind of stuff because you know that you're not as able to defend yourself.

Throughout the interview Angela was able to identify and discuss many concerns she had for herself and other older lesbians. At the younger end of the age spread for this study of lesbians over 55, her comments generally were similar to the other participants and also contained elements that were specific to her own lived experience which will be discussed later in this chapter. Her story contains the concerns of many older lesbians: namely, how heterosexism, homophobia, ageism, health problems, financial concerns, housing concerns, isolation, vulnerability, and lack of support from organized religion affect her now and possibly in the future.

Sally's Story

Sally, at 82, is at an age where she feels comfortable with her lesbian identity. For her, growing old can give older people permission to be more of who they are as individuals. There can be more of a sense of letting go of the cultural imposition of societal roles and expectations, and with it, a freedom to live one's life more fully. Sally feels comfortable with her lesbian identity, and feels freer to live a lesbian lifestyle than might some younger lesbians who have jobs to be concerned with, and may feel that they need to be closeted:

It hasn't affected my life in any noticeable way, particularly. I don't, I have no fears of it, if you know what I mean. Not working, of course, and I don't have any problems that way, like other people do. I'm not worried that somebody is going to fire me because I'm a lesbian. And if they don't like it, "bugger them" is all I can say.

Although she was aware that she was a lesbian when she was in her early 50's, Sally came out and claimed a lesbian identity and a lesbian lifestyle only many years later. She was married, as are many women who discover and claim their lesbianism later in life. She was committed to staying with her husband, who had Alzheimer's disease:

I'm a late, a very late bloomer. I discovered I was a lesbian in my early 50's I think. I know I was married. I was fond of my husband. He was a nice man and unfortunately, eventually died of Alzheimer's...he was in the hospital for five years. I never walked out on him or anything. I felt honour bound to look after him, to stay, you know, and I did.

Sally grew up in an age where lesbian existence was invisible in the dominant culture. Eventually Sally came out in her mid-seventies. She commented that when she was a much younger woman, she barely knew what being lesbian meant:

I probably always have been but I didn't really realize it, you know and I mean, lots of people don't. I can remember not even really knowing what a lesbian was, you know. I don't know how it started making sense to me. I just realized I was in the wrong pew [laughter].

Sally has experienced acceptance and support from her heterosexual friends for her new lesbian identity. While many lesbians experience discrimination from people involved in organized religion, that has not been Sally's experience. She is not, however, out as a lesbian to her daughter, her grandchildren or great-grandchildren, who live in central Canada:

I don't think my family know at all. I don't think so, no. If she [her daughter] does, she's keeping it to herself. Though she must know that I have, she knows Mildred, and everything like that. But I mean Mildred and I don't live together.

I have some friends that know [that Sally is a lesbian], that are heterosexual friends. I've never had to tell people. It just came up in the conversation. I was saying to them today...I didn't say I was at a lesbian dance.... I just said some lesbian friends of mine, and of course, these people were not going to raise any eyebrows. It's one thing about Unitarians. They're not at all surprised. Yeah, a very accepting group.

I can remember once having lunch with some friends of mine who were staunch Anglicans. I said something about having to do some bookkeeping. I keep books for an organization and she said, "what organization?" so I said, "A lesbian organization" and nobody even blinked so I thought, there.

I asked Sally if she thought she was being particularly brave in speaking about her involvement in a lesbian organization. She disagreed, and in fact felt that she was beyond caring about others' expectations of her:

No, I didn't feel I was brave. I'm past caring about that kind of thing. Yeah, I'm pretty much of a "don't care" person, you know. I've done pretty much, done pretty much what I like.

While most of Sally's friends have been accepting and supportive of her lesbianism, she did lose a good friend when her lesbianism became known:

I had a friend for a long time before [coming out]...who was unaware, let's say, of me. And then when she found out she got positively hysterical, and that was the end of that association. She really freaked out [her voice becomes very quiet], to use the modern expression. Yes, I was quite surprised because I thought she probably knew anyway, you know, but anyway that's the way it went. [It] freaked her out. Pretty strange.

When Sally was in her mid-seventies, she decided to embrace her lesbian identity, and become involved in the lesbian community. She took advantage of resources in the lesbian community and in fact, met her partner at a lesbian function:

There was an ad in one of the early issues of Lesbian News [a lesbian newsletter] from somebody wanting to meet older lesbians, you know. So

I phoned up and it turned out to be a preacher in the Metropolitan Church [a gay and lesbian church].... I think I said come and have tea. She and her friend came, and had tea.

I went to the Christmas party and, fortunately, sitting beside me was the only intelligent woman in the room. We immediately, mutually, decided that of each other, I think. And, we have been friends ever since. We see each other about four or five times a week. I make dinner, and she makes dinner, and we go out.

In talking further about her own coming out process and claiming a new identity, Sally described how that was made easier because of her attitude to life:

Well, you can be bold, you know. I realize now that I was quite bold. I've forgotten how, but I came across Jane Rule's books, and I liked them and read them. And I discovered that she lived on Galiano Island, and so I wrote to her and asked her if she would, if I brought my books over, would she autograph them for me. And she said, "yes she would." So I went over and visited her and she autographed all my books, and we have been friends ever since.

Sally is involved with the Gerontology Centre at the University of Victoria, as a participant in various research projects. When I asked her if the issue of seniors perhaps being lesbian or gay was ever discussed, Sally stated: "No, no. It hasn't, no."

Another one of Sally's involvements in the lesbian community is specific to the reality of older lesbians. She is one of the founding board members of the Lesbian Seniors Care Society, which is a group of older lesbians and their allies who are interested in providing different levels of care and housing for older lesbians. One of the reasons Sally became involved in the Lesbian Seniors Care Society was her concern about older lesbians for whom finances are problematic:

That's one of the reasons why I got interested in this Lesbian Care Society 'cause I thought we could do something for some people that are not as lucky as I am.

While Sally believes in the necessity of trying to provide housing for older lesbians, she worries that it may be difficult to accomplish because of the heterosexism and homophobia that exists in the dominant culture:

It's a slow go, yes, and nobody's going to be handing out any grants to us, particularly not to something as out on the edge as lesbians, for one thing.

Sally knows others in the lesbian and gay community, who recognize the difficulty in securing services from mainstream institutions and want to provide services for their own community:

There are two men, two gay men who live in the Brentwood area who are interested in...they are interested in creating some kind of place for older gay men and older lesbians.

In general, though, after years of involvement in volunteer activities, Sally now shuns being involved with traditional senior-serving organizations:

I'm one of those awful people, well I've given up public works. I used to do Meals on Wheels and talking books. Before I retired I was on the library board for seven years, and then I worked for Saanich on the design panel, and all that sort of stuff. I've decided "To hell with it," I'm not going to do anymore of that stuff. The smell of Meals on Wheels put me off...my god, I hope I never have to eat this food.

Sally is very forthright about not choosing to be involved in mainstream senior-serving organizations. In part, she is well able to find her own entertainments:

I have never felt it necessary to go to any senior centre yet. Sometimes I feel lonely but I haven't felt desperate enough to go to one of those places and I have, I'm afraid, a nasty snobby feeling that you'd have to be desperate to go there but I think that's absolutely wrong ...but I just have never wanted to do that...when I join anything or do anything I go up to UVIC and take a, listen to lectures or something. I spend a lot of time at concerts as a matter of fact. I'm fond of chamber music and things like that. Mildred and I are great concert goers.

While many women experience a serious reduction in their financial circumstances when they are older, Sally is fortunate to enjoy economic stability. While Sally acknowledges that many older lesbians lack financial stability, she also believes that younger lesbians today may not have such financial concerns when they are older:

Yes, I am actually financially comfortable. As you can see, I have lots of stuff here. I've been lucky. I've made some good investments in my day. I feel very lucky actually. I have a pension from my work and everything else. As I say, I've been very lucky. In fact, my pension still includes dental coverage. As I have to have my gums scraped every three or four months, it comes in handy.

I think it's going to be a real problem for a lot of people, a lot of lesbians, as to how they are going to finance their declining years. Mind you, it's not going to be such a problem for some of the ones that are now in their forties, that have steady work, like working for the government, or something like that. Because they are going to get a pension, and they'll be able to live on it, probably. Quite a lot of them will even have a house. I was lucky I had a house. I was going to sell the house and buy this, and have money left over.

I was poor when I was young so I've determined, you know, the way of the old saying: "I've been poor and I've been rich, and believe me folks, rich is better." I'm not rich but I'm comfortably off.

In discussing ageism in the lesbian community, and how that community relates to her as an older lesbian, Sally recounted how her relationships are mostly with people younger than herself. Her decision to have relationships with younger people is strategic on her part. In some ways, though, she realizes that she is treated differently because of her age:

It's hard to find any old lesbians. Most of my friends that are lesbians are in their late forties and fifties, you know. With the exception of Mildred who is seventy, most of them are young enough to be my own children.... I don't think [I'm experiencing ageism], but I think people are very polite

to me, which I decided [is] because they were looking at my grey hair. But then I look around and there are quite a lot of grey-haired ones around.

Well, I don't like to be considered an elder, either, but I think that they are probably more polite to me than they might be to some, a contemporary, let's put it that way. But I don't know. Maybe they're always charming. I try to be charming to them.

I work on the theory that my mother always said to me, she said, "Sally, pick your doctors and anybody who does anything for you, and your friends if possible that are younger than you. Because they're going to be around and the others are going to be dead," because her doctors kept dropping off on her.

In talking about what older lesbians might want, or if they need something different from heterosexual older women, in terms of services to seniors, Sally thought perhaps they would "like to perhaps, deal with other lesbians. They might feel happier that way."

Sally is very involved in the lesbian community. She found that involvement useful in her coming out process, and in establishing a sense of community with other lesbians. Some lesbians, according to Sally, are quite isolated and may find it even more difficult to reach out to other lesbians than when they were younger. Sally said that she felt it was necessary to try and do some community outreach in the older lesbian community, and acknowledged how difficult that might be:

It's going to be very hard to get in touch with them. I'm sure there must be some lesbians my age who have been firmly closeted all their lives, and haven't any intention of coming out of the cupboard at this point who might like to have somebody come, and might be at the stage where they even enjoy having somebody read to them. Now I would be happy to do that sort of thing. I like reading aloud, you know. Or have people visiting them if they could bear the thought of it. I don't want anybody to visit me but...I'd probably be quite charmed if they did. But there must be something you can do, in that sort of way. I think we should be, the

Lesbian Care Society, should be looking into that aspect of what we can do for people.

That's the real problem, I don't know how it can be done [reaching closeted older lesbians]. If they read Lesbian News or the Pink Umbrella [a lesbian and gay resource booklet] or whatever, any of those things. They won't go to Everywomen's Bookstore, no.

It could be very threatening for an older lesbian, who has kept her lesbianism a secret, to try to access material or resources that are explicitly lesbian in content or appearance. To that end, Sally thought advertising in the mainstream print media which contains a wide variety of information, rather than an explicitly lesbian newsletter, may be a more useful means of reaching closeted older lesbians in a safe and non-threatening manner:

Something like Monday Magazine might be a possibility, a little display ad in the advertising section.... Focus on Women is not very lesbian. It has a few articles about them occasionally, that's a freebie. Yes, Lesbian News is going to scare people, but we mail it to everybody in a plain brown envelope.

Sally described how two of her lesbian friends were concerned about not being able to stay together as a lesbian couple in a seniors care facility, because they are lesbians:

That's what [they] were so upset about. They thought that they might get put in some old folks home and told, "You go there and you go there".

At the end of the interview Sally discussed how she believes that there is more hope today, that lesbian existence is being acknowledged by the dominant culture. As well, she feels that there is a more of a consciousness about sexuality amongst older people:

Well, I think there's hope on our side because it [being lesbian] is coming out now in ordinary magazines. And things about the fact that just

because you're over 65 doesn't mean you don't, never, never want to touch anybody again. I mean that's been exploded. So it's a step in the door so somebody is going to say, "Well, you know there are women that like women, and there are men that like men, so we shouldn't be having to divide them up.

Sally was able to identify and discuss many concerns she felt were important for older lesbians throughout the interview. At the older end of the age range for this study of lesbians over 55, Sally's comments resembled those of the other participants and also included components that were specific to her own lived experience. It is important to note that Sally feels that, at this time in her life, her life is relatively free of concerns for herself. Her story mostly contains concerns for many older lesbians: namely, how ageism, heterosexism, homophobia, health problems, housing concerns, financial concerns, lack of lesbian-specific services, and isolation affect their lives.

Donna's Story

Donna describes herself as a "Late Onset Lesbian". In describing herself in that way, she locates herself as a woman who has discovered her lesbianism late in life:

I raised a family and I was in a traditional marriage, and I was divorced when I was 54. When I was 55 I fell in love with a woman and here I am. That was quite a surprise.

In talking about women's choices about marriage and motherhood, or claiming a lesbian identity, Donna laughingly states:

To me it's a very sensible, even logical, certainly satisfying way for women to go. Well, what do you need a man for? Do the motherhood thing if you really want to do it, and then who needs them? Right?

Two people were significant in raising Donna's consciousness about lesbians and gay men. One was a gay man, who grew up in her neighbourhood with her children, and the other was her daughter, Elsie, who was then in her early 20's:

Well, I was very fortunate, in that I had two people who had a good influence on me.... Jess was one of the neighbour kids and when I moved in here after my divorce, I reconnected with him. I didn't have any negative feelings about being gay at all. I didn't have very many positive feelings either. I just sort of didn't know anything about it. Jess raised my consciousness level and that was good. And then my daughter was going through her lesbian period at that time, and was busy raising my consciousness so I would be ready and able to accept that. I had a bit of surgery when I was 54, and while I recovered she loaned me her tape deck and all of her feminist records, including Meg Christian [a lesbian singer]. She took me to a Meg Christian concert and stuff like this. Those were my experiences of how I came to be in a comfortable space for finding my lesbian self.

Donna very much appreciated Elsie's efforts on her behalf in her coming out process, and finds it upsetting when mothers are not supported by their daughters:

She did a really good job and it upsets me terribly when I hear young women writing off their mothers, because I think it's not always necessary. Some of them need to be avoided, but some of them could have their consciousness raised.

Donna had known her partner Sarah through the many years when they were both involved in heterosexual relationships. She and Sarah became lovers after both of them had ended those relationships:

I've known Sarah for forty years. She's been part of my life as a friend, forever. We met while we were teaching and then she moved to the States, and moved around a bit but every time that she or her family came back to Vancouver, they would stay with us. We knew we were very good friends but there was nothing else. When I first was divorced, Sarah came to Vancouver. She had left her family in the east and was launching out

on her own. She was a teacher but there were no jobs. Through my daughter, who begins to feel like a "guardian angel", she found a job as a housekeeper for a lesbian couple who had two kids.

She moved in with them as a housekeeper and that was good for my consciousness too, seeing that household in operation. It was really good. And then one day my divorce papers dropped through the mail slot, and all of a sudden I got horny. It was very interesting. I think I had dropped all of the promises I had made to "cleave only unto him". I was suddenly freed from all those promises, free to seek a new life.

Donna realized that being a lesbian, and entering into an intimate relationship with another woman, was an option she had previously not considered for herself. She discovered that her friendship with Sarah could contain another dimension:

So I thought, well I've gotta do something about this. I can have sex with somebody and "Oh hey, it doesn't have to be a man." That was my first "what do you know." So Sarah and I became lovers, and that immediately uncovered a whole layer of love that we had felt all those years and had never acknowledged and looked at. It is a strong love, backed by our years of friendship and trust.

Living in a heterosexist culture in the 1940s, '50s and '60s, prevented Donna from understanding that intimate relationships could be other than heterosexual. She says she would make different choices in her life if she were a young woman today:

Certainly when I look back over my life, if I had lived in a different era, if I lived now, if I were seventeen now, I probably would become a lesbian. I probably wouldn't have bothered with all the traditional stuff, but when I was growing up that choice didn't exist. I didn't know the word lesbian until I was in my forties.

According to Donna, in the conservative era in which she grew up, women who knew they were lesbians were often isolated from a lesbian community, and seldom had an opportunity to know or connect with other lesbians:

I've talked to women in my age group or slightly older who lived in small towns. Once in a while somebody would come through who was also a lesbian, and they would just be so excited to see somebody else and to meet somebody. It's a whole different bag than what I lived through.

Donna embraced her new identity as a lesbian, and the lesbian community, with great enthusiasm and joy with her partner Sarah:

I was really excited about it, we were both excited about being lesbians and we went to dances and we went to Gazebo [a social group for lesbians] all the time, and we had a circle of lesbian friends there. We sort of developed our own community. We had a group of women, a small group who became our personal support group, then we had a larger group who did some Wicca stuff, and then an even larger group that we would see at Gazebo and places like that.

In talking about her experience of other lesbians over forty, and being welcomed into the lesbian scene in Vancouver, Donna shared how the lesbian community was also enthusiastic about these two new older lesbians:

There was a lot of excitement about two new women on the scene, and where did they come from and you know, that sort of thing. When we were first becoming social lesbians there were lots of things happening; there was an over-40's group that met regularly.

Most of the lesbians over 40 that Donna and her partner began to socialize with also came out as lesbians later in life. They weren't anxious to continue to play out traditionally female role expectations at this stage of their lives:

That was funny. We went to an over-40's potluck once. It was through Gazebo. Most of the women were "Late Onset Lesbians" and there were about 40 of us there. The food from the potluck consisted of one casserole that the hostess had made and one salad and everybody else brought wine or chips cause they'd had enough cooking and, like us, they weren't cooking anymore. That was it. We took bagels and cream cheese. That was a big deal. We'd had it with the cooking!

While Donna experienced a great deal of acceptance and welcoming from older lesbians within the lesbian community, she had a different experience with younger lesbians:

But there was some ageism on the part of younger lesbians.... From young lesbians, many of them didn't feel impelled to pay any attention to anybody who was over 35.

At the same time that Donna acknowledged ageism within the lesbian community, she questioned whether the ageism she experienced is similar to ageism experienced by heterosexual women from the younger heterosexual generation:

Now whether that is any different than the ageism you'd face among that generation if you were heterosexual, I don't know, 'cause I never moved in a social circle as a heterosexual, as an older heterosexual.

In discussing concerns she may have as an older lesbian, Donna questioned, with a big sigh, whether she would be accepted as a lesbian, in a lesbian relationship, if she and her partner needed seniors housing:

Funny, but as we look forward now into our advancing years, we look at this building across the way, which is B. C. Housing. It would be really nice to be secure in the knowledge that B. C. Housing would consider us a couple.... It would be a nice piece of security. At the moment, we are economically okay and we don't need that. We're not looking forward to needing that, but if prices keep advancing and interests rates keep dropping, it very well might be that we will need it. It would be nice to know that we would be considered a couple. It would be an interesting question to ask when they say that "we are able to provide care for couples."

Donna acknowledged that financial concerns are also a problem for many older lesbians. While the majority of lesbians' and gay men's pensions don't

include same-sex benefits, Donna feels she is fortunate to be receiving a pension from her former employer, and the pension includes her partner as next of kin:

One of the perks we get which is really nice is that I have a B. C. Superannuation pension. And Sarah is my sole survivor on that pension, which means that when I die she gets the pension for the rest of her life. As well as the perks that go with it, like having our medicare paid for, and also extended medical and stuff like that.

Like many people as they grow older, health problems are of increasing concern to Donna. For her, poor health is a reality that has serious implications for how she is able to live her life:

I have serious health problems and the realities are that I probably, very possibly, could become seriously disabled, and probably will die before Sarah. So those things do pose great problems. I have diabetes, I have high blood pressure, I have some heart problems. I have had two TIA's which are transient ischaemic attacks, like strokes. At the moment, I'm having crazy bowel problems as a reaction to drugs, which doesn't really make it possible for me to go very far from a toilet. That is a drag.

We're having, at the moment, to again readjust our thinking about the use of our summer. If I can't get this bowel thing under control, we can't travel in our van. Sarah and I talked seriously again last night, and decided once again that the reason for staying alive is because you want to enjoy life. If this particular medication affects me like this, maybe we should consider getting rid of it [the medication]. It may be giving me greater quantity of life and the greater quality of not having a serious stroke. On the other hand, you know, what's the trade off?

Donna spends considerable periods of time every week looking after her health, and she has discovered that these activities have also given her additional social opportunities:

Right now, the emphasis in my life is to keep myself as physically capable as possible, and also emotionally and psychologically healthy. So I go to three fitness classes a week, and I also swim for about 40 minutes three days a week. Those two activities make a tremendous difference in my psychological state as well as my physiological state.

The class has become a social thing as well as a physical thing. You get to know the people. I have gotten to know people, and have some good friendships there.

Like many older lesbians, Donna at one time wanted lesbian-only seniors housing. That is no longer so important to Donna, but being accepted as a lesbian, and having her relationship validated is essential:

We used to think that when we got old we would want to live in a place solely lesbian, but I don't feel like that anymore. The ideal care situation for me would include men and women who would be totally accepting of our relationship, so that we could sit and watch T.V. and hold hands. The main thing for us, for me and for us, our "us-ness", would be to have a place where we would be totally accepted. Where we would share a bedroom where we could have privacy...where we could have a lock on the door. Where, if you came in from shopping alone you could kiss the other person "hi" in the T.V. room. And that wouldn't freak anybody out, it would be accepted just the way it would be if you were a male/female couple.

When we discussed this change of mind further, and how that had evolved for her, Donna was able to speak of her disillusionment with the lesbian community:

One of the things that occurred...we discovered that because you're a lesbian doesn't make you a perfect human being. That was a shock. I went through a period where I thought because somebody was a lesbian that they were totally acceptable, fully understanding, a fine human being. Then we discovered that wasn't true. All lesbians are not perfect [laughter]. Right, they're people just like everybody else.

A further disillusionment with the lesbian community came when Donna's daughter, Elsie, was dying of AIDS. The loss of her daughter had a serious impact on Donna's life. Their lesbian friends were not actively supportive of Donna and her partner, and because of that, Donna now feels isolated from the lesbian community:

I had been very depressed. I began to be really depressed about eight months before Elsie died. After her death, it became worse. I've done two grief groups, art therapy, PWA support groups. Those really make a difference, talking to other people, finding out what you can expect, and to realize that you're not going crazy.

Our major support came from people who were friends of Elsie's. The support we got from the lesbian community boils down to Anne [a good lesbian friend] and that's it! That may be our own fault, because we had begun to contract socially, and we hadn't seen anybody for a long time. But we have people we used to see once every two weeks, and they maybe phoned once and that was it. In retrospect, that was really upsetting.

In probing further with Donna about when she and her partner began to pull away socially from the lesbian community, and whether it began to occur before Elsie became ill, Donna explained:

We just gradually pulled back over those years of Elsie's illness because it became such a heavy thing in our life. We spent a lot of our energies concentrated on Elsie, and Sarah was going through a career change, and that took a lot of energy, too.

When I asked Donna what the lesbian community could have done to be more supportive of them and other lesbians who are experiencing difficulties in their lives, she paused for a long time and finally, was at a loss for an answer: "I don't know, I'm really struck dumb, I don't know."

In discussing her poor health and its impact on her life, Donna spoke of her concern about what would happen if she became incapacitated, and if her partner predeceased her. She talked very emphatically about not wanting to live without Sarah. Donna's need to have her lesbian identity validated by potential health care providers is also a primary concern:

These kinds of concerns, future health problems, lead to concerns about what is going to happen when I [pause]... what kind of care will Sarah be able to give me? We'd prefer not to go trotting off to extended care or long term care, if we can possibly manage it, but will there be supportive

care to assist us in our home so that I can stay home? The other possibility is that Sarah would suddenly die for some reason, and my reaction to that has always been, well, I won't, I won't do it. I won't be here without her, that's all. I think I would probably commit suicide, but I won't be here without Sarah, that's all. I just won't do it. I just won't do it, that's all. I may do it indirectly, you know, forget to eat properly or something crazy but that's my reaction to that one.

We were talking about medical complications. We're already trying to face them, but we would hope that if I begin to need care that we can get it at home. That we really don't want to do long term care in a facility. But if I have to, I will, and I would certainly hope that I would be in a place where the fact that I am a lesbian is respected. That's a very hard thing to consider, the closet.

Donna has an open relationship with her doctor, who was surprised to learn about Sarah and Donna's new lesbian relationship. Donna and her partner have taken care to advise her of their medical wishes:

I think she was quite shocked. I suppose I'm probably her only lesbian patient. Sarah and I have committees, where each of us is responsible for the other if something serious happens. My physician has my letter [that] Sarah is my partner, and she does respect Sarah and her role in my life. Sarah comes to serious medical conferences and is consulted.

Donna believes that the dominant culture appears today to be more accepting of women being lesbians and being in a lesbian relationship than in years past. As an example, Donna spoke of her partner's workplace. While they made known the fact that they live together, Donna and Sarah hadn't explicitly named their relationship as being lesbian. They did receive support in the workplace regarding Elsie's impending death, although heterosexism appears to have dictated some of Donna's and Sarah's behaviour:

We sense it at work, at Sarah's work. We don't make an allusion to ourselves as a couple there. It used to be that I was very background, and very, very careful. But when it became necessary to announce that Sarah would be taking time off because Elsie was expected to die at any time,

she referred to us as, "Donna and I" and that's the first time she's ever done that. There was no panic about that, that we were aware of.... We used to be very careful. Sarah worked in [another workplace], and I didn't even go inside to pick her up after work. I waited in the car and she came out, because we didn't want to get the identification of "that woman always picks that woman up. What's going on?" You know? Stupid, eh?

It's a long way from that to saying, "Our daughter is finishing her struggle with AIDS and it will be necessary for me to be away to pay attention to her." Because we knew that she would die in the next three or four weeks. There was a holiday scheduled, so the Board altered the time and said, at Sarah's request, "Sure! Take it any time you need it." When Elsie died, classes were cancelled for that week. A most accommodating Board! But that, could you have seen that happening 15 years ago? I don't know. So, there's hope. I think we're progressing.

Knowing that many lesbians are distanced from their families because of heterosexism and homophobia evidenced by both family members, and by lesbians themselves, Donna felt fortunate that she was supported by her own family, especially by her daughter Elsie. As well, Donna was welcomed and supported by her partner's children when she and Donna came out about their new lesbian relationship with one another:

Nadine [her partner's daughter] was in the North at the time, and we couldn't take her out for dinner, so we wrote her a letter and she said "I read the letter and I thought, oh my god, I'm homophobic." She phoned the local Women's Centre and they were having the weekend conference on homophobia. She signed up and trotted down, and by the end of the weekend she was fine. Isn't that amazing? Nobody, nobody, just wrote us off. They just did their thing. Kora, her other daughter, said, "I'd put you both in boxes. My mother doesn't glow like a teenager, her old friend doesn't dance. You both escaped my boxes, and I congratulate you."

Donna then related a homophobic experience she had with her mother's health care provider. The nurse denied Donna and her partner access to her mother because Donna and Sarah were lesbians:

We had one horrible experience of my mother being "ill unto death" and being refused admittance to see her. She was in her home. The nurse who was running things was a real autocrat, had been raised in Nazi Germany, and was going to be one of the mayors who took over and ran American cities when they conquered North America. She was a dandy, a storm trooper and she would not let us in to see my mother. No phone calls, either. That was horrible, just horrible.

Donna was able to elicit the assistance of her mother's minister, who was allowed in to see her mother. She had him deliver a letter to her mother as a way of circumventing the nurse's obstructive and homophobic actions. Donna feels that her mother implicitly allowed the nurse's behaviour:

Then my mother phoned and the shit hit the fan. She was just furious that I had involved her minister in a private thing. Yeah, we were very angry with my mother. I sort of had the feeling that she'd set up the atmosphere that permitted Erica just to do this thing.

At the end of the interview, I asked Donna if she felt her mother was ever reconciled to Donna's lesbianism. Despite that one incident of homophobia with her mother, Donna feels that overall, her mother was supportive of her lesbian relationship with Sarah:

But my mother was really very understanding all the way through I think, outside of that one horrible thing.

Throughout the interview, Donna identified and discussed many concerns she had for herself, her partner and other older lesbians. Donna, at 67, is in the middle of the age spread for this study of lesbians over 55. Her comments generally echoed those of the other participants and also contained elements that were particular to her own lived experience. Donna's story contains the issues of many older lesbians: namely, how heterosexism, homophobia, health problems,

ageism, housing concerns, financial concerns, isolation, and feelings about the lesbian community affect her now and possibly in the future.

Sarah's Story

Sarah's journey towards claiming a lesbian identity began 26 years ago when she became involved with a woman while still married to her husband:

I'm trying to think of the actual age when I came out. Mid-30's I think. I fell in love with a woman who we had given sanctuary to in our home, while she was looking for a permanent place to live. We three, my husband and this other woman, whose name was Denise, and I continued to live together after that. There was a three-way love relationship there. We were all involved with each other. So that relationship went on for 13 years.

Sarah did not have a community context in which to locate the three-way relationship that she and her husband had with Denise:

It was such an unusual relationship that I didn't really find any category to put it in. Nowadays we'd call it bisexual, and I think I may have considered myself to be bisexual. I didn't have any community to relate to. I didn't relate to the gay and lesbian community or anything. We were what we were, but we were the only ones we knew. When I left the marriage, then I identified myself as a lesbian.

Sarah speaks poignantly about the loss of her relationship with Denise when the marriage broke down:

When I left that marriage it was really a need to leave my husband. It was not a need to leave Denise, so I had a lot of grief over leaving Denise. I mean, I couldn't leave him without leaving, also leaving her.

Sarah and Donna became partners about one year after Sarah left her marriage. She and Donna had been friends since 1956, and now they claimed a lesbian identity together. They have been together for 13 years:

I had already left my marriage. We were seeing each other as friends for about a year after I actually made the decision not to go back, and live in

that household, and in that marriage. Donna and I became lovers at the end of that year.

When Sarah moved back to Vancouver she became involved with the lesbian community, and she began, also, to explore many other interests. It was a time of endless discovery for her after years of isolation:

I had felt so isolated for a number of years. Four years in Prince Edward Island, and PEI is not the west coast. PEI might be more like the rest of Canada, but I felt like I was in a foreign country. I longed to get back.... When I came back here it was just sort of "I'm back home, this is where I belong."

When I left the marriage and began living on my own, I just found myself attracted to the lesbian community. I found myself hanging out with lesbians in Vancouver. I was just exploring a lot of things that I hadn't had a chance to explore in the marriage. Over the years, I was busy raising children and so on. I had a real feeling of liberation. Leaving the marriage was sort of like I was being liberated, and I had a chance to be myself, and find out who I was, and follow my own path. That just took me into more relationships with women, and particularly with lesbians.

I was really excited by the potential for change in my life. I was going to all the holistic health talks that were happening. I was going to everything spiritual that you could think of, and exploring all kinds of avenues. It was just a very, very exciting time of change for me, and opportunity. It seemed like endless opportunity.

Sarah found that her emerging identity as a lesbian, and her entry into the lesbian community, was facilitated by living in a lesbian household:

In returning to Vancouver from Prince Edward Island, where we had been for four years, there were no teaching jobs I was looking for something to do to stay alive, so I did homemaking, and I got a job with a lesbian couple as their live-in housekeeper. The fact that I was in a lesbian household meant that I was meeting lots of lesbians and hanging out. And so I became hooked into the community.

All of that really paved the way for a new lifestyle, the fact that I'd had an experience with a woman, and now was living with lesbians and hanging out with lesbians, and thinking about what I wanted for my life.

When she returned to Vancouver, Donna, her long-time friend, was the first person she contacted:

I came back from PEI about March of 1982, and she was about the first person that I got in touch with, because we'd been friends over the years and never lost touch. No matter where we lived, we never lost touch. So I came and stayed with her for a little while while I was looking for a place. She had just moved into this apartment.

Sarah came back to Vancouver when she was 49. Sarah didn't think much about her age in relation to the ages of the lesbians with whom she was spending time. When I questioned her, she did not think she experienced ageism from lesbian women who were younger than she was. It would appear from her detailed answer, however, that ageism was a subtle component to some of her experiences:

I was really surprised every time anybody said anything that indicated that I was old enough to be their mother. I felt like I was part of a peer group that I was not a part of. I was always surprised when somebody turned out to be 33. I was relating to them as if they were a peer. And then there'd be some chance comment. They'd maybe be talking about their mother who was the same age as I was, or just a couple of years older, and it was always a surprise to me. In Prince Edward Island, the same thing happened there. I was older than most of them. It was always a surprise to me to find out that here was someone that could be my daughter.

I didn't feel that I was treated differently [but] it always came as a surprise, because we were just relating like peers, and suddenly something would come up. That would make me realize that hey, I'm a lot older than these people.

When I asked Sarah about her experience of the lesbian community now, she sighed deeply, and began to talk about her isolation from the community, and about feeling more comfortable with lesbians in her own age group:

Well I'm really feeling on the fringes of the community now and that's my own doing, you know. We stopped going to Gazebo [a social group for lesbians] a number of years ago for economic reasons. We have a few friends who are more in our age group than in a younger age group. Anne [a good lesbian friend], we see regularly. She's close to our age group. I don't think I would find myself really comfortable with a group of young lesbians now.

Sarah then went on to discuss how she feels more comfortable with women who are closer to her age, regardless of their sexual orientation. It would appear that the commonality of age supersedes sexual orientation in her choice of friends and social contacts:

When we were a bit more out there in the community, I was discovering that I was really bored with political correctness. I just didn't want to be at lesbian functions because most of the people ... had different life experiences than I had. I would just as soon hang out with women of my own age who are straight.

Sarah went on to explain how she didn't like being pressured to be a certain kind of lesbian by what she perceives as the forces of political correctness, and how that experience has distanced her from the lesbian community. She felt this expectation to be politically correct more from younger lesbians, rather than from lesbians over 40:

I don't like the political correctness...a kind of rigidity in putting people into categories, like there's only one way of doing things, and one way of being, and one way of thinking, of being in the world. If you're not a part of that then you're less than, or you're considered other, in some way. I think it was more the case with younger lesbians. That was what I began to find really boring about being in lesbian groups.

Since Sarah and her partner have been isolated from the lesbian community for some years, she doesn't know if things are different in the lesbian community now:

In the last couple of years, Donna and I have been much more isolated from the community by our own choice, and lots of things might be happening. Things might be changing in ways that we don't know because we haven't been around to find out.

The nature of Sarah's work helps to facilitate her wish to be with women who are closer to her own age, and with whom she feels more commonality. Sarah works for a senior's organization:

In my work I get an opportunity to do that. I'm working with people a little bit younger than me, and a little bit older, and a lot older. The people are in their mid-fifties to their mid-eighties. There's a nice little community there of older people, and all kinds of older people, single women, married women. I just find it more comfortable with those people than I do with lesbians at this stage in my life. It wasn't always the case but it is now.

When I asked Sarah if the people involved at her workplace knew she was a lesbian, she answered that they had been supportive when Donna's daughter, Elsie, was dying of AIDS:

It hasn't been said in so many words, but it's no secret that Donna and I live together. The people I work with were very supportive of Donna and me when her daughter was dying.

While on one hand, Sarah experienced support from the people at work during the process of Elsie's dying, she also experienced heterosexism from them. They did not acknowledge that she, as Elsie's acquired mother, as a step-mother, was also suffering as a parent when Elsie was dying:

The only thing that bothered me at all, was a lot of people were coming up to me and saying, "Oh, this must be terrible for Donna, what she's going through right now. I just feel so sorry for Donna, and let her know that I'm thinking about her," and so on, and I'm thinking, "What about me?" Not very many people were coming up and saying "Gee, Sarah, this must be really rough on you." I wasn't being acknowledged as I would have been had I been her husband.

When I asked further about Sarah's choice to not be involved in the lesbian community now, she was able to identify her disappointment upon discovering there was not a "lesbian utopia." That discovery for many lesbians is disappointing, but for Sarah, it meant she no longer wanted a lesbian-only retirement facility:

A few years ago we sat around and talked about our old age, what we would like, and about how we needed a retirement place for lesbians, and a long term care facility run by, and for, lesbians. I thought that that was what I really wanted, but I don't now. I think I had a fantasy about lesbians being nicer people than heterosexuals that I don't have anymore. I mean there are all kinds of heterosexual women, and lots of lesbians, I just don't like. I don't like the boozers, the ones that are heavy into alcohol and drugs.

Sarah is struggling to deal with her sense of isolation, and with the grief and loss she is experiencing after the death of her acquired daughter, Elsie. She feels quite depressed and is finding it difficult to cope:

I feel worse now than I did a year ago when Elsie died. I'm feeling really isolated and find myself isolating myself even more. I mean...I'm not reaching out. Right after Elsie died, I kind of came up for air and began to do things again that I had put off. I started a project at work that I'd put on the back burner. She died in March and I started getting into life by about May or June, or so, and I think "too much too fast." So now I'm reacting more like I would have expected to right after she died. I think I'm doing a delayed response.

What Sarah went on to describe appeared to be a clinical depression. While she knew many ways in which to look after herself, Sarah found none of them really helped. She eloquently describes how this concerns her:

There are so many things that I know are helpful to me, and I'm really having a hard time doing them. Meditation is one, and I'm making an attempt at following a meditation program, and trying to do it whether I feel like doing it or not. Exercise has always helped and I do that. It has always helped but it's not enough at the moment. There is a program that has singing happening for seniors, so I'm going to start that. Music has

always been helpful to me and art is helpful to me. I'm not doing any right now, but those things I know all work. I'm on antidepressants, which is something I never thought I'd do. I just started about four days ago. But I really feel like I have to. I have to do something to shift this mental state, because it's just getting, it's just down, down, down, down, down. I'm getting more and more depressed. All the time Donna and I have been together, I've had bouts of the blues but nothing that really would stay around for any length of time. I usually get out of it.

Sarah thought the cause of her depression may also involve reasons other than the grief and loss she was experiencing. She began to explore some of the financial concerns she has, as well as the serious state of her partner's health. The economic reality of financial cutbacks in Canada's social services has impacted Sarah's job:

The financial thing is one of the things that's really hard. Part of my job of coordinator is to raise funds for the project, and I've always been able to get the money coming in, and the grants coming, and I can't do it anymore. I don't mean that I can't do it. I'm doing everything that I've always done, but the money's dried up. So that means there's still as much work to do to keep the project running, but no money to pay me to do it. Either my job will be cut back, or I'll end up volunteering for part of it.

Donna's health is a real concern. There are a lot of things that aren't going well, and I think maybe her health is more of a concern than I'm letting it be, you know. It's more of a worry than I'm admitting to myself. Because there's been so much going on that I've just got to put that one on the back burner. Just after Elsie died, Donna's diabetic specialist told her there was a lot of protein in her urine, and that means kidney failure down the road. He's talking like four or five years down the road, and none of that is happy making.

The changes in her partner's health status will mean a serious curtailment of their lifestyle, as will the possible downturn in their financial situation. It will mean that they will have to stay closer to home, rather than exploring the wilderness, a recreational activity that they both love:

One of the things that we both do for ourselves is take time off, and go camping in the van, sometimes canoeing and such...going into the "toolies" [the wilderness] which is something that we really like.

I just seem to get on top of the problem of finances and I think my way through it, and think I know how to solve this, and survive financially. This is no big deal, but the depressed feelings don't go away.... There really is no big problem. The problems that are keeping me depressed lie somewhere else. We're okay economically, but we can see some of the luxuries are going to slip away, things like vacations and travel. We'll have to do less of that as we move into the next part of our life.

Sarah does not know if the lesbian community has any systems in place for grief and loss support, but she and her partner did attend a grief group at a local hospital:

We went to St. Paul's Hospital for a grief group when Elsie first died, and then Donna went to a second group this year. I didn't. It was a big mistake, but I didn't. I didn't really feel that I was actively grieving, and I also thought I'd come to terms with things that I hadn't. I needed it. I needed it and I didn't avail myself of it. Those groups are good, but I don't know that the lesbian community is offering anything like that.

I told Sarah about the existence of a group in Vancouver for lesbians over 40 who are discussing issues around menopause and aging. I am a member of that group and Sarah expressed an interest in it when I told her that two members had recently received support from other group members, because their own mothers were very ill:

Yeah, I would be happy to be put in touch with that. Had I known that that existed I might be looking for support for what I'm going through right now.

Sarah did not think to attempt to access support from the lesbian community for other issues she and her partner have been dealing with in the last few years:

Donna and I went through the experience of needing to find long term care facilities for our mothers, and I don't think we really would have thought of looking to the lesbian community then for support. It would have been good for us to have some support, but we didn't think of it.

Sarah and her partner had been part of an informal support group, but the group did not prove to be as supportive of them as they needed, when Elsie was dying of AIDS:

We had a really good support group and it fell apart at a really crucial time, at a time when we needed it the most. And we never were able to find that kind of support again. We made it up ourselves. It was with two other lesbians of our age group, and it was wonderful for about five years. It was just great, but it fell apart and we were never able to find another group to take its place. I think when you get deeply into something like your daughter's HIV positive, and into all of the changes that that makes for your lives, then you can just get so into whatever it is that you're going through, that you can't see "out there." I don't know that the other two in the support group could necessarily have handled the two of us around all of that, over the years. I think it would have been just too heavy and we probably needed another group for parents of children with HIV, life-threatening illness or something.

Sarah and her partner did have some supports during the progression of Elsie's illness, but none of them were sustained over time:

We went to a group that was for parents, friends and lovers of people with HIV/AIDS. Very good. That one fell apart too, the funding went, and the worker went, and then the group went. Yeah, we've had some good support along the way from time to time. I guess I'm just thinking now, right now, I don't have it and I need something.... In a way it's a lot like war, you know, especially with AIDS, we're seeing a lot of young people dying.

When I queried Sarah about what kind of care she would like to see available for her partner and herself, as a lesbian family, if Donna has to go into some type of care because of her significant health problems, Sarah seemed

shocked by my question. After a considerable pause she was unable to envision what she might want, but was able to identify what she didn't want:

What a question! You know, I've never considered anything for Donna except her getting sick and dying. That's as far as it's ever gone in my thinking ahead [long pause]. Isn't that interesting, 'cause I've never thought of anything for my mother either, except getting sick and dying, and it turned out that my father died, and she lived and had to be taken care of. Yeah, there's a brand new thought. What would I want? Maybe I should start with the negative. I wouldn't want her to be in the kind of situation that my mother ended up in, which was a very, very boring kind of life, and nothing much going on for the people in the long term care facility. Just people sitting around staring at walls a lot. There were some things happening, activities, but she didn't take part in them. I draw a blank on what I would like to see for myself, or for Donna. I would like to give more thought to what I would like in my old age, or what I would like for Donna, in terms of care.

Sarah has found the medical establishment supportive of her and Donna being in a lesbian family relationship. That support only occurred after they insisted that they were to be treated as a family:

Yes, I go to any serious medical appointment. If they're not routine, I go and the doctors address both of us. They don't just talk to her, and just leave me sitting in a corner. They address both of us. We insisted, we did insist. It has helped just being clear with them that we are a couple. I'm put down on Donna's medical records as her spouse. We also have committeeships on each other, so that we can make decisions for each other, that sort of thing.

Sarah does not find that the senior-serving community, in general, ever addresses the issue of lesbian and gay relationships. At her workplace, however, she found that lesbian and gay couples could be included for couples' rates for services, when she brought it to their attention:

One day we were putting together a new flyer, and it said: "Special rates for couples." The advisory committee said, "What do you mean by couples?" and I said, "By couples I mean two people who live together, I

mean two men, two women, a man and a woman." They said, "Oh, alright."

Sarah and her partner take every opportunity to secure family rates for themselves, although they don't always succeed. In that case, they accept that they can't change those particular heterosexist restrictions:

Yeah, so whenever we have an opportunity to let anybody know that we're a family, therefore we ought to get a family rate or whatever, we do. Admissions to an aquarium or something that would have family rates. We do make it explicit that we're a family. On occasion, there are some documents that specify that a couple means a man and a woman.... Donna is much more likely to make an issue of it than I am. She would be likely to fill out a form where we're not included, and she would include us. She'd change the form to include us.

At her workplace, Sarah is not out as a lesbian, in an explicit way. She does take the opportunity to let people know that she and Donna are together, but if they don't think that she and her partner are a lesbian family, it doesn't particularly concern her:

We're open about the fact that we live together. If somebody new is talking to Donna, at the project where I work, and Donna says something that indicates that she has some inside knowledge about me, then one of us will say, "Do you realize that we live together?" And that kind of clears it up, but you know we don't use the "l" [lesbian] word. We just take every opportunity to let people know that we come as a pair, you know.... People know we're not sisters. If people think we're sisters rather than lesbians, I don't think it's a big issue.

There are lots of people who we're very direct with. I mean we're closer to them, and we're very direct with them. They know that we are a lesbian couple. Then there's the vast majority who know that we live together, and that we have been through the experience of a daughter dying. They know about us, they assume whatever they assume. If they are homophobic, and they've figured it out, or they've been talking to somebody and somebody has said to them, "Well, did you know that Donna and Sarah were lesbians?", they're not around anymore. You know, they're gone. They wouldn't be there, I think, because I get no negative vibes.

Sarah's family is very supportive of her lesbian identity and lesbian lifestyle, although initially her partner's son found it difficult:

Family is just great. Elsie called us "the mothers" and my two daughters have begun to call us "the mothers". I've been "Sarah" ever since the kids were little, you know. I've never been "mom" so it's kind of interesting to have them calling us "the mothers", and they picked that up from Elsie. Nadine is my oldest. She came up to Donna after Elsie died, and she said, "I would like to apply for the position of oldest daughter."

Donna's son, Ken, had big, big problems with us for a few years, and he won't admit it now. He won't admit that he had problems. Family has come to be very important to him especially since Elsie died. But even before that he was fine with us, but he had really serious problems at the beginning. He didn't want to talk about it, he didn't want to hear us talk about it...he just did this sort of thing: don't hear, don't see, don't speak. He says he was just upset, that he would have been just as upset if his mother had married another man, but he was plenty old enough to accept a marriage at the point we got together. He was really upset about it being lesbian. So anyway, they're all fine now.

And my ex-husband and my "ex-wife" [laughter] are really close, close to both of us. They're close friends to both of us. Their son is twenty-three now. He lives in Japan, and he phones us from Japan. I really like it, I really like the relationship that we've developed over the years. So they're really accepting. As for friends, anybody that's of any importance to me, yeah, is fine with our relationship.

At the end of our interview, Sarah talked about her experience of being adopted and how she reconnected with her birth family four years ago. She has discovered she has a cousin who is gay. Sarah has been accepted by her whole extended birth family, but would like to be able to discuss the fact that she is a lesbian. Her birth family knows she is with Donna, and Sarah talks eloquently about how, for her, being out as a lesbian with her family is more important to her than with people at work:

I kind of drop hints, but I don't know if they pick them up or not. One of these cousins is gay, but you know he and his family don't talk about it.

I mean everybody knows, everybody in his family knows who he is, but they don't talk about it so I don't. Since they've got a gay member of their family and they don't talk about I don't think I can expect them to acknowledge me, but they haven't rejected me either. I still get invited to family reunions...I'm still included; whether they understand or not, I don't know. I would like it if I could just be who I am, and talk about my life. It matters more there than it does with the people at work. It doesn't matter as much to me there, whether they know or don't know.

Throughout the interview, Sarah was able to name and speak about many concerns she had for herself and other older lesbians. Sarah, at 62, is in the lower end of the age range for this study of lesbians over 55. Her observations generally resembled those of the other lesbians in the study and also contained elements that were specific to her own lived experience. Her story contains the concerns of many older lesbians: namely, how ageism, homophobia, heterosexism, health problems, grief and loss, financial concerns, isolation, housing problems and isolation from the lesbian community affect her now and possibly in the future.

Discussion of Themes

In this section, I will discuss the themes that I identified in the women's stories as well as integrate these themes with the findings of the literature review. These themes reveal important information about four older lesbians and their experiences, issues, concerns and challenges. Table 1 illustrates the themes; they are not prioritized in any order of importance.

Heterosexism and Homophobia

As an institutional force that dictates normative gender functions (Spaulding, 1993), heterosexism has acted as a prescriptor that has denied

TABLE 1 - EMERGING THEMES

- ♀♀ Heterosexism and Homophobia
- ♀♀ Ageism
- ♀♀ Financial Concerns
- ♀♀ Housing and Senior-serving Institutions
- ♀♀ Health Problems
- ♀♀ Vulnerability to Crime and Abuse
- ♀♀ Isolation
- ♀♀ Sexuality
- ♀♀ Grief And Loss
- ♀♀ Organized Religion
- ♀♀ Feelings About The Lesbian Community

lesbians the right to claim their identity. Homophobia acts to reinforce the dominant culture's expectations of women and punishes those who, in acting to claim their own personal agency, live as lesbians. Whether lesbians publicly claim their lesbian identity or spend their lives in secrecy, homophobia forces them to create a lifestyle that exists outside of the dominant culture. Because of the lack of information about lesbianism and the invisibility of the lesbian community, many lesbians are denied any knowledge that their lives could embrace their lesbian identity. If a woman did choose to live as a lesbian, she was often forced to make difficult choices, such as giving up custody of her children, or losing her housing or employment (Garnets and Kimmel, 1993; Healey, 1994; Marcus, 1992).

Heterosexism and homophobia have greatly impacted the lives of the four participants in this study. Because of her family's homophobia, Angela had to leave her country of origin to find a safe place to be a lesbian. Emigrating to Canada and "severing that umbilical cord," as she says, gave her permission to be who she was: "I knew I was gay and knew I'd never, never be able to live my life properly in England."

Living in a heterosexist and homophobic culture in the 1940s, '50s and '60s, Donna did not discover until later in life that intimate relationships could be other than heterosexual. She says that she would make different choices in her life if she were a young woman today. In the conservative era in which Donna grew up, women who knew they were lesbians were often isolated from a lesbian community and seldom had an opportunity to know other lesbians: "I probably

wouldn't have bothered with all the traditional stuff but when I was growing up a lesbian community didn't exist."

Heterosexism and homophobia has also impacted the daily experience of all four women in this study in a more personal, intimate manner. As Ashfield and Shamai (1987) found in their study, being a lesbian in a heterosexist and homophobic society created dilemmas at these women's places of employment. Angela found it necessary to conceal her lesbian identity and pretend that she was heterosexual and she believes that some people are still pretending:

Luckily I had a gay friend who used to come and partner me at things which was good.... So you lived a lie. I feel I lived a lie a lot of my life because of that, because of the fact that I was just not brave enough probably to come out.

At the senior's centre where Sarah works, people knew that she and Donna lived together. Sarah didn't however, explicitly state that she and Donna were lesbians because she was worried about keeping her job. Many lesbians do not "come out" at work because of their fears that they might be harassed, or not promoted, or fired. While on one hand Sarah experienced support from the people at work while Donna's daughter Elsie was dying from AIDS, heterosexism prescribed their response to her, and she was not acknowledged as Donna's partner.

Sally, on the other hand, retired before she came out as a lesbian and at age 82, feels less of the heterosexist imposition of societal roles and expectations, and feels freer to live a lesbian lifestyle than might some younger lesbians who

still have jobs to consider and may need to be closeted. As she says, "I'm not worried that somebody is going to fire me because I'm a lesbian."

Homophobia often leads to negative attitudes and behaviour towards lesbians (Pharr, 1988) and many families of lesbians find themselves struggling to accept their daughter's choices. The participants in this study are like many lesbians who have become distanced by the heterosexism and homophobia exhibited by family members. While Sally is not out as a lesbian to her family, in part because of the geographical distance that separates them, the other three women all are, and have experienced homophobia from their families at different times in the past. For Angela, being a lesbian is still not something she can talk about easily with her mother. When Sarah came out to her children, one of her daughters initially was uncomfortable with her mother's lesbianism and lesbian relationship but grappled with her homophobia, took a homophobia workshop and "by the end of the weekend she was fine." Overall, Sarah felt that she was supported by her two daughters and by her ex-husband and his family with whom she is still close.

Donna's mother, her mother's private nurse, and her son evidenced more flagrant reactions when she identified herself to them. She had one horrible experience of her mother's nurse refusing her and Sarah in to see her mother. Her son was initially very upset about his mother being a lesbian but is now accepting of her relationship with Sarah. Donna's daughter, Elsie, on the other hand, was explicitly supportive and celebratory of Donna and Sarah's relationship and this support helped sustain them through some hard times.

While all four women spoke of how they believe being a lesbian and living a lesbian lifestyle is easier in today's more accepting climate, they all would agree that heterosexism and homophobia remain societal forces that can have negative consequences for lesbians. That lesbians wish for acceptance and inclusion by the dominant culture is exemplified by Sarah, who eloquently stated: "I would like it if I could just be who I am and talk about my life."

Heterosexism was a major theme which ran through all of the women's stories. It permeated their lives as lesbians in the heterosexist, dominant culture in which they exist. While other themes ran through their stories which are also themes in the lives of older women generally, such as housing, health and financial concerns to name a few, lesbians cannot escape their location of marginalization in a heterosexist and homophobic culture.

Ageism

Ageism exists in the dominant culture as well as in the lesbian community. Older women, whether they are heterosexual or lesbian, are discriminated against and rendered invisible while youth are glorified (Macdonald & Rich, 1983). Ageism, according to Laws (1995), is a "set of oppressive social relations" (p. 112); the social context in which older lesbians live is permeated with ageist messages that denigrate all older women. Ageism marginalizes older lesbians ever further from the dominant culture and inhibits their full engagement in society. The women in this study said that they experienced varying degrees of ageism within the lesbian community. In all cases, their discussion centred on the lesbian community and did not include their interactions with heterosexuals.

To me this suggests that they found ageism within the lesbian community upsetting because it seemed more of a betrayal than ageism in the non-lesbian community. Their experiences did seem to parallel what older heterosexual women may encounter from their younger cohorts. For example, while Donna experienced a great deal of acceptance and welcoming from older lesbians within the lesbian community, she also encountered ageism from younger lesbians: "There was some ageism on the part of younger lesbians. From young lesbians, many of them didn't feel impelled to pay any attention to anybody who was over 35."

Sarah's experience of ageism from younger women was a more implied component of their social exchanges and her comments reveal her astonishment at discovering that her age made a difference:

I was really surprised every time anybody said anything that indicated that I was old enough to be their mother.... It always came as a surprise because we were just relating like peers and suddenly this would come up. That would make me realize that hey, I'm a lot older than these people.

Sally's experience of ageism was also of a subtle variety. In discussing ageism in the lesbian community and how the community relates to her as an older lesbian, Sally recounted how her relationships are mostly with younger people and how she has purposely constructed her life that way. In some ways she is treated differently because of her age, and as Adelman (1995) discusses, Sally admits that she doesn't want to be considered an "elder" or a role model by younger lesbians:

I don't think I'm experiencing ageism but I think people are very polite to me which I decided is because...[of] my grey hair. I don't like to be

considered an 'elder' either but I think that they are probably more polite to me than they might be to a contemporary, let's put it that way. But I don't know, maybe they're always charming.

I think Sally does experience a subtle form of ageism by the younger lesbians in her community. Although, she has chosen generally to relate to younger lesbians rather than lesbians closer to her own age, it would appear that she has internalized the dominant message that you can't be both a peer and from a different age group yourself. That is, being a peer is defined by age.

For Angela, her experience of ageism related to older women and whether or not they believe they are entitled to be sexual beings. Older women, both heterosexual and lesbian, are socialized by the ageist norms in our society to believe that they are not entitled to their sexuality beyond a certain age (Adleman, 1986). This theme will be discussed later in the section about the theme of sexuality.

While ageism was a reality for the four participants, it appeared to operate at a covert, rather than at an overt level. Because all women, heterosexual and lesbian alike, are socialized within our ageist culture, it is not surprising to find that older lesbians experience ageism from younger lesbians like their older heterosexual counterparts (Macdonald & Rich, 1983). Their experiences of ageism are similar to mine in the lesbian community, even though I am middle-aged and not yet in the "older" category. While the women in this study did not discuss ageism within the context of their interactions with the heterosexual community, I would speculate that they would have had examples to relate if our

discussion had led them in that direction. I would surmise that my experiences would also parallel theirs of ageism with heterosexual people.

Financial Concerns

As discussed in the review of the literature, women are traditionally financially disadvantaged as compared to men (Browne, 1994). Kehoe (1989) states that the feminization of poverty affects women of all ages, and all sexual orientations, but older women are often not considered generally when this is discussed. Research on older women has found that poverty is a real concern for older women generally. For the older lesbians in this study, financial concerns for themselves or other older lesbians, were uppermost. Adleman (1995) discusses how older lesbians may have to work longer than they wished because they do not have pension plans or own their own homes. Contrary to Adleman's comments, three of the women in this study, Angela, Sally and Donna, had pension plans and the fourth woman, Sarah, had access to her partner's pension plan. Angela and Sally own their own homes, and Sarah and Donna pay a reasonable rent for their apartment. However, financial stability was still a major concern for the four women, even though their present financial circumstances were relatively stable. This indicates to me that older lesbians are worried about poverty as a possibility, whether or not that concern is realistic for themselves. Women, especially in these financially insecure times, know that they are vulnerable to poverty--they see poverty and its affect on women around them wherever they turn.

Angela's concern for financial stability comes partly out of her work with women in a hospital setting, where she witnessed poor women having nowhere to go. These women are placed in large, open wards with no privacy. Angela said: "I can't bear that. I'm not wealthy.... One of my biggest fears is being in the poor house...I've seen it so many times...women...just living in a pitiful state.... Oh god, I'd hate that."

Sarah, also, has some financial concerns. The economic reality of cutbacks in Canada's social safety net is impacting her job. While her financial situation is currently stable, she can't help being concerned about how it may be in the future. Sarah and Donna manage on a combination of pensions, a small investment income and Sarah's employment earnings. Donna was able to get Sarah named as next of kin on her pension plan. As well, she and Sarah have extended medical benefits. Without Donna's pension plan, Donna and Sarah would be significantly financially disadvantaged.

While Sally is the most economically advantaged of the four participants, she is concerned about other older lesbians who are financially insecure: "I think it's going to be a real problem for...a lot of lesbians as to how they are going to finance their declining years." Her concern led her to become involved with a lesbian seniors group in hopes of addressing the concerns of older lesbians who are less advantaged.

The four women in this study all have financial concerns for themselves and other older lesbians. They were all able to articulate their feelings of apprehension and this is reflective of their understanding of women's relationship

to poverty generally, and older women's relative economic instability, specifically. Two of the women were also concerned for other older lesbians, and one of them was actively involved in a group addressing the concerns of older lesbians.

Housing and Senior-Serving Institutions

As discussed in Chapter Two, older lesbians do not necessarily avail themselves of senior-serving institutions. Kehoe (1989) found that older lesbians, even if they lived in an urban area, are not likely to avail themselves of services for seniors, for reasons including alienation, homophobia and discrimination. Similar to the women in Kehoe's study, Sally did not choose to take part in any mainstream senior-serving organizations. Sally is very capable of taking care of herself and admits to feeling snobby about seniors services: "You'd have to be desperate to go there but I think that's absolutely wrong...but I just have never wanted to do that." I speculate that Sally might take part in some mainstream senior-serving activities if they were explicitly welcoming of older lesbians and respecting of diversity.

Adequate, appropriate and affordable housing is a major concern for many people as they age. For women, housing becomes a serious concern especially since secure housing is so important to quality of life. For various reasons such as poverty, ill health or disability, as people age they can become more dependent on housing options such as seniors housing and care facilities (Brown, 1992).

Lesbians can feel isolated if they are forced to live in housing that does not accept and support their sexual identity and lesbian lifestyle. Sally, like many

lesbians, would like to see lesbian-only care facilities (Lesbian Seniors Care Society, 1995), and she actively works to ensure that this happens. The reality of providing lesbian-only housing is going to be a challenge for groups like the Lesbian Seniors Care Society and Lesbians On The Edge Of Time, because of government reallocation of funds and severe cutbacks to Canada's social safety net. Lesbian-only housing is a critical issue for many lesbians, however, and no doubt these groups and others like them will continue their efforts.

Like many other groups of older lesbians (Kehoe, 1989), Angela and her friends have been talking about housing concerns and how they want to create a way for older lesbians to make a community for themselves and live together as an alternative to heterosexual housing models for older people. In this way, Angela says, older lesbians can be protected from feeling isolated from other lesbians and maintain a sense of lesbian community.

On the other hand, Healey (1994) is against age segregation in social services, and does not believe that we should be adopting mainstream service-delivery models. Like many older lesbians, Donna at one time wanted lesbian-only seniors housing. Even though that is no longer so important to her, being accepted as a lesbian and having her lesbian relationship with Sarah validated is essential regardless of the kind of housing she and Sarah might need in the future.

Donna's concerns about having her relationship accepted by a housing or care facility are the same as those experienced by heterosexual and gay male couples who want to remain together in supported housing. In this way, the

concerns of couples, regardless of their sexual orientation are similar and need to be acknowledged by senior-serving organizations.

It is true that some older lesbians who are relatively economically advantaged may have the will and the opportunity to create alternate housing options for themselves, such as buying an apartment building with friends or buying land and building lesbian-only housing but it is also apparent that mainstream senior-serving institutions need to be openly inclusive and welcoming of older lesbians. If this were to occur, I believe that many older lesbians would avail themselves of services that would enrich their lives as older women.

Health Problems

As people age, health problems are a concern for many and in this way concerns of older lesbians for their health are no different than for other people. State of health can dictate how older people, including older lesbians, can live their lives. Like some of the older lesbians described in the literature (Deevey, 1990; Quam & Whitford, 1992), three of the older lesbians in my study, Angela, Donna, and Sarah, were concerned at varying levels about their health. Their concerns will be discussed later in this section. On the other hand, according to Kehoe (1989), most (72%) of the older lesbians in her study reported good or excellent health and this is concurrent with Sally's experience of her own health status.

Like the older lesbians in the literature (Healey, 1994; Stevens 1996), the participants in my study wanted the health care system to treat them with respect. Many older lesbians remain closeted about their sexual orientation

because of their fears of discrimination by health care providers. Angela, in her work as a hospital nurse, found that the health care system was incredibly homophobic.

But really, nobody wants to [come out] in a hospital because a lot of the staff view lesbians [as deviant]; they need education a lot of them.... Yeah, I think that some of the doctors are incredibly homophobic.

Angela took early retirement due to concerns for her own health, in part because of the homophobic atmosphere in her workplace and in part because of the highly political nature of the changes in the health care system: "...the job had gotten so that I was getting sick from it."

For Donna, the status of her health has serious implications. She has diabetes, high blood pressure, and heart problems, to name the most serious. Her critical health status has curtailed her lifestyle in that she has to spend a considerable amount of time looking after her health. Donna's need to swim and take exercise classes has had a positive spinoff in that it has increased her opportunities to socialize with others. This in turn helps to alleviate her isolation, a topic which will be discussed later in the chapter. Like other older lesbians in the literature, Donna talks about possible discrimination and her need to have her lesbian identity validated by potential health care providers. At first, her doctor was surprised to learn of her lesbian relationship: "I think she was quite shocked. I suppose I'm probably her only lesbian patient." Because of the severity of her health problems, and even though she wants to remain at home as do many other older people, Donna may have to enter a health care facility: "But if I have to, I

will, and I would certainly hope that I would be in a place where the fact that I am a lesbian is respected. That's a very hard thing to consider, the closet."

Sarah is in good physical health, but similar to many other women in our North American culture, a major health problem for her is depression. Sarah thought her depression was brought on, in part, by the death of Donna's daughter from AIDS, as well as by Sarah's concerns for her job and her partner's health. Sarah is greatly concerned about her depression and has recently begun to take antidepressants. (Several weeks after she had begun to take them, Sarah shared with me that she thought the antidepressants had begun to have a positive effect.)

Vulnerability to Crime and Abuse

Women in our patriarchal culture are especially vulnerable to crime and abuse, primarily at the hands of men. Older women, because of their diminished ability to defend themselves from physical attack and because of the devaluing effects of ageism, are more vulnerable than younger women. This is not to say that older men are not also victims of crime and abuse at the hands of younger people, but it is important to recognize that heterosexism and homophobia play a significant additional role when older lesbians are the targets of violence. The theme of vulnerability did not emerge as a concern in the review of the literature and indeed, three of the participants in my study did not discuss this theme in their stories. Angela was the only woman who discussed vulnerability to crime and abuse as a concern for older lesbians. While one participant bringing forward a concern might not be considered a theme in a traditional sense, it is

important to me to include it in my study because of women's vulnerability, generally, in society.

I believe that the other participants would have discussed this theme as a concern if they had been questioned about it directly. In fact, I believe that most women in our society, regardless of their age, experience fears of abuse at the hands of men. Because of the prevalence of heterosexual male violence directed towards women in our culture, I also believe that many of us, including older lesbians, do not discuss our fears unless we are asked directly, because to name them aloud might make us feel even more unsafe.

Isolation

As discussed in the review of the literature, isolation and loneliness are problems for older people regardless of their sexual orientation (Kehoe, 1989). For an older lesbian, a sense of isolation can be compounded if she is not involved in the lesbian community, by choice, by being closeted, or by living in a rural area where she has no contact with a lesbian community or other lesbians.

Quam & Whitford (1992) found that over half of the older lesbians and gay men in their study experienced isolation as a serious problem. This was true for the participants in my study as well. Angela and Sally both discussed the theme of isolation in relation to how it affects other older lesbians, as well as themselves. Donna and Sarah both indicated that they felt very isolated, especially from the lesbian community.

Angela felt that even though she has a longstanding social circle of lesbians she and older lesbians generally needed also to be involved in the larger

lesbian community both to prevent isolation and to fight for lesbian visibility in the dominant culture. Angela states, "It worries me when I don't go to the MOB group [a group for lesbians over 40], or follow through on some of these things." She also felt that it was important for older lesbians, especially if they were newly "out", to be involved in the lesbian community as a means of meeting other lesbians.

Sally is very involved in the lesbian community in her city. One of her struggles in her work with the Lesbian Seniors Care Society is strategizing on how to reach isolated older lesbians, whose isolation might be alleviated by contact with other lesbians:

It's going to be very hard to get in touch with them. I'm sure there must be some lesbians my age who have been firmly closeted all their lives, and haven't any intention of coming out of the cupboard at this point...

Sally's concern speaks as well to the difficulties for researchers in reaching the isolated and closeted older lesbians in order to ascertain from them what their needs are.

Donna spoke of feeling isolated in relation to the lesbian community as a direct result of her daughter's long illness and eventual death from AIDS, as well as her partner's career change. Donna was very involved in her daughter Elsie's life throughout Elsie's illness. Donna felt that coping with a such critical illness in her family for several years caused her gradual pulling back from the lesbian community: "it became such a heavy thing in our life. We spent a lot of our energies concentrated on Elsie, and Sarah was going through a career change, and that took a lot of energy, too."

While Donna never linked her isolation to her serious health problems, I conjecture that diminished health for her could be an important factor in the theme of her isolation.

For Sarah, her feelings of isolation are related as well to economic reasons. She and Donna stopped attending social functions for lesbians because of their need to conserve their financial resources. As well, they began to see less of their circle of lesbian friends due to Elsie's lengthy illness as discussed above. Sarah said she did not feel comfortable with younger lesbians any longer, and that she would rather socialize with women closer to her own age, regardless of their sexual orientation. Sarah works in a seniors centre and that gives her an opportunity to have contact with many older women. (Her feelings about the lesbian community will be discussed in a later section.) Sarah did not discuss her feelings of isolation in relation to her depression, but I wonder if now that she is beginning to feel a positive effect from her antidepressant medication, she might begin to socialize more, and thus alleviate her feelings of isolation. During our discussion I mentioned a support group for lesbians over 40. Sarah expressed an interest in knowing more about this group and I gave her the information. I believe that if she and Donna had known about it during the long process of Elsie's dying, they could have received support from other older lesbians for the difficulties they were experiencing.

Sexuality

As a result of the ageist norms and values prevalent in our society, older people generally are thought not to have sexual lives and indeed, not to have a

right to sexuality at all. In the literature, when sexuality is discussed, older lesbians are sometimes portrayed as being uninterested in sexual partners their own age (Berger & Kelly, 1986). In fact, as Adleman (1995) testifies, older lesbians are most often interested in sexual partners close to their own age, "This is a stunning sexuality such as I haven't experienced since my early twenties or thirties...we two mature women..." The older lesbians in my study, as well, are all involved in sexual relationships with lesbians close to their own age. Donna and Sarah, who have been in a committed relationship for 13 years but said they were lovers, did not discuss the theme of sexuality. Sally, 82, became involved with her partner, Mildred, who is 75, when Sally came out as a lesbian seven years ago: "...just because you're over 65 doesn't mean you don't, never, never want to touch anybody again."

Angela, 56, is in a relationship with a woman who is eleven years younger than herself. Prior to beginning this relationship, Angela thought that she would never "be again in a romantic, sexual experience" because of the ageist norms that dictate that an older woman has no right to claim her sexuality. Angela believes that, "the older you get, the less chance there is, perhaps, for sexual experience simply because of the way society is, that if you're older and you have wrinkles and you're all saggy [you have no right to be sexual]." Angela's thoughts about older women and sexuality concur with the societal belief that women have to conform to a standardized conceptualization of beauty, in order to be a sexual being. While most women, regardless of their age, do not conform

to this standard, it is even less possible for older women, whose bodies are naturally changing through the aging process.

While all four of the women in this study were in sexual relationships, it cannot be assumed that this is the norm for all older lesbians, especially when access to a lesbian community is unavailable to many lesbians for reasons of isolation and lack of connection to the lesbian community.

Grief and Loss

As people age they often experience the loss of friends and partners from various illnesses. The accompanying grief and loss can take its toll on individual physical and psychological resources. As discussed in the literature, older lesbians are particularly vulnerable to grief and loss, because of heterosexism and the accompanying lack of recognition of same-sex relationships and alternative family configurations. As Brown (1992) discussed, if older lesbians' families are unaware of the lesbian nature of the relationship, or are homophobic, lesbians are unlikely to experience a sympathetic response to their loss.

While neither Angela or Sally identified grief and loss as being a theme in their lives personally, for Donna and Sarah it had been a significant factor in their lives. Donna and Sarah were supported generally by the people in Sarah's workplace when Donna's daughter died from AIDS. Sarah did not experience the same level of understanding or support as did Donna, because of heterosexism and the lack of comprehension about Sarah's position as a step-parent: "I wasn't being acknowledged as I would have been had I been her husband."

It would also appear that the grief and loss experienced by Sarah after Elsie died and a lack of support generally from other lesbians also compounded the depression Sarah was experiencing. It is clear to me that her grief and loss and her depression were linked and without adequate intervention would exacerbate each other.

It is important to note that people have their own methods for dealing with loss. Donna was able to take advantage of support groups available through the AIDS community and this helped her to cope with her depression about her daughter's illness and death. Sarah did go to a PWA group with Donna but didn't find it especially helpful, which makes me wonder if what appeared to be a clinical depression hindered her ability to find solace for her grief.

The literature addresses how the AIDS crisis affects older lesbians and compounds the grief and loss experienced by older lesbians who may have worked as "buddies" to their peers in the gay male community, but Donna and Sarah's experience of an AIDS loss was Donna's daughter. As more young people are infected by HIV, their deaths from AIDS will affect more older lesbians as time goes on.

Dunker (1987) addresses how older lesbians may be left with little emotional or social supports as their chosen family members begin to die. This will have a special impact on lesbians who socialize only within the lesbian community. Angela discussed how lesbians she knew have rallied around lesbian friends who were dying from cancer in palliative care wards. Angela also discussed how lesbians who are isolated from the lesbian community may not

have anyone from their community to assist them when they are ill, and how this could further increase their sense of grief and loss.

The lesbian community and how it could support its members through difficult times will be discussed in a later section.

Organized Religion

Traditionally, organized religion has not been welcoming of lesbians and gay men. Rather, churches have all too often acted out their homophobia by ostracizing homosexual people and denying them a rightful place in the religious community. Religion was not a theme in the literature and I would speculate that many lesbians (and gay men) have had to discard their wish to be involved in traditional religious practice because of churches' longstanding practice of homophobia.

Organized mainstream religion was not a theme discussed by Donna and Sarah, although Donna did mention that they had been involved in Wicca, a non-traditional spiritual practice.

Sally is involved with the Unitarian church, which she describes as being accepting of lesbians: "I just said some lesbian friends of mine, and of course, these people are not going to raise any eyebrows. It's one thing about Unitarians. They're not at all surprised. Yeah, a very accepting group." Sally has also experienced acceptance from Anglican friends of hers, which she attributes as much to her own feeling of being beyond caring about others' expectations of her as their acceptance of her lesbianism.

Angela believed that older lesbians might want some support and religious instruction about issues related to death and dying. She felt it would be especially nice to have a gay or lesbian minister to assist with those issues. Angela felt lesbians in smaller centres would find it more difficult to find a lesbian or gay minister than in a major city.

Many mainstream churches are struggling with the issue of ordination of lesbians and gay men. There are now a few openly lesbian and gay ministers, but they are still extremely rare. As organized religion becomes more explicitly welcoming I would speculate that more lesbians and gay men might become involved in the church, both as a source of support and as a location for spiritual practice.

Feelings About The Lesbian Community

It was interesting for me that all four participants began their stories by telling about their experience of coming out as lesbians. Coming out was significant to all of them, and they needed to give voice to their coming out stories as another way of claiming their lesbian identities. When a woman makes the decision to claim her lesbian identity she is locating herself as being opposite to the status quo and its traditional role expectations of women. It is a very brave and empowering act.

The quest for community when a woman comes out as a lesbian is usually strong, and lesbians often create their own smaller communities within the larger lesbian community. Many women, in their excitement to claim their new lesbian identity, assume that there is a lesbian utopia, wherein other lesbians are

accorded an almost mythic sense of perfection. New lesbians can mistakenly believe that loving another woman means that there will be no discord, that everything will be loving and gentle, and that women will automatically support other women. When lesbians discover this is not the case, that in fact lesbians are multifaceted, like other people, a sense of disillusionment can occur.

For Sarah, coming out into the lesbian community was an exciting and liberating experience. Her entry into the community was facilitated by living with other lesbians: "All of that really paved the way for a new lifestyle...living with lesbians and hanging out with lesbians, and thinking about what I wanted for my life." However, Sarah now feels isolated from the lesbian community and this was precipitated when Sarah began to feel bored with what she terms as other lesbians' "political correctness" and the ageist behaviour she experienced from younger lesbians.

The lack of support from the lesbian community when Sarah's step-daughter was dying from AIDS was also a factor in her disillusionment with the community. Sarah was disappointed to discover there was not a "lesbian utopia." Rather than stay in the community and accommodate to its norms, or work to change it to provide her with what she felt was missing as many other lesbians do, Sarah chose to distance herself from the community. Her disillusionment and isolation from the lesbian community means that she no longer wants lesbian-only seniors housing, for example. It is important to note here that Sarah has been seriously depressed, and is recovering from her step-daughter's death. I believe these are also factors that have had a serious impact with her satisfaction with

many areas of her life, not just the lesbian community. The themes of isolation, depression, and grief and loss are all inter-related in Sarah's life at this time. She may feel differently about the lesbian community when she is more recovered from her depression.

When Donna first came out as a lesbian she was very enthusiastic and involved in the lesbian community. Now she also, like her partner Sarah, is disillusioned with the lesbian community because of its lack of support around her daughter's illness and death. She too felt disillusioned when she discovered that a "lesbian utopia" did not exist:

We discovered that because you're a lesbian doesn't make you a perfect human being. That was a shock. I went through a period where I thought because somebody was a lesbian...they were totally acceptable, fully understanding, a fine human being...that wasn't true. All lesbians are not perfect.

I wonder whether Donna will get re-involved with the lesbian community when her grief and loss precipitated by her daughter's death is not so present in her life.

Sally, on the other hand, was very involved in the lesbian community and was not experiencing any feelings of disillusionment. Rather, for her, the community was a rich source of stimulation and social engagement and provided her with opportunities for helping other older lesbians to better manage their aging process. It is important to note that at this time in her life, Sally enjoys excellent health, is financially secure, and is not currently experiencing grief and loss. These themes could possibly affect Sally's life satisfaction if they were to

become present in her life, but I speculate that her spirited approach to life could help to alleviate any negative effects.

Angela was also very involved in her own community of lesbians within the larger lesbian community. Her social group provided Angela with ample opportunity for social engagement and stimulation. She and her friends were actively involved in discussing alternate housing models for older lesbians. Angela preferred to socialize with other older lesbians, rather than her heterosexual women friends, because that contact was more meaningful: "Probably it's about friendships and feeling validated, having common interests...lesbians always have interesting things to talk about.... Conversations with them are much more meaningful."

The literature indicated that lesbians involved in a lesbian community found a higher degree of life satisfaction (Kehoe, 1989; Quam & Whitford, 1992). It is clear that involvement with the lesbian community has very different levels of satisfaction for the four participants in my study, dependent on their current level of involvement. It is also clear that the lesbian community needs to address its ageist behaviours and lack of inclusivity of older lesbians. While the community currently provides some social opportunities to its members, it needs to provide other services. These services could include support groups for lesbians experiencing grief and loss and depression, and continued efforts to provide lesbian-specific housing and other care services for older lesbians. Perhaps if some existing support services such as MOB had been more widely

publicized to lesbians, Donna and Sarah would have found an avenue of support from their lesbian community.

Summary

Writing the "retelling" of the women's stories was the hardest and the most exciting part of the study to complete. For me, as a lesbian researcher, it was critical that the voices of the four women: namely, Angela, Sally, Donna and Sarah, speak out loud and clear. I wanted to privilege their stories by presenting them in a way that honoured the women's courage and determination in claiming their lesbian identities and speaking out and centering their own margins.

There is so much that can be said about older lesbians and their lived experiences and it cannot all be said within the confines of my study. My intention, however, is to begin an information-rich discourse about older lesbians and contribute to an understanding of the issues, concerns, needs and challenges that affect them. Being able to privilege the voices of these older lesbians, to centre the margins of their experience, has been one of the rewarding and exciting aspects of undertaking this research.

Angela, Sally, Donna and Sarah spoke eloquently about the issues that affect them and other older lesbians: namely, heterosexism and homophobia, ageism, vulnerability, grief and loss, housing concerns and senior-serving institutions, health problems, financial concerns, vulnerability, and lack of support from organized religion. Many of these issues have been discussed by older lesbians in other studies which were examined in the literature review in Chapter Two. Most of the themes discussed by the older lesbians in my study parallel the

themes that are apparent in the lives of older women generally. However, the themes of heterosexism and homophobia permeate the lives of these older lesbians and have a significant impact on them. This, then, means that the lives of older lesbians contain an additional overarching factor that heterosexual older women do not experience.

In Chapter Five I will discuss implications for the social work profession.

CHAPTER FIVE

IMPLICATIONS FOR SOCIAL WORK AND REFLECTIONS

The purpose of my thesis was to examine the lived experience of older lesbians and their issues, concerns, challenges, and needs. This lesbian discourse centred the existence and lived experience of four lesbians over 55 who had experienced heterosexism, homophobia and ageism in the dominant culture. It focused on their comprehension and interpretation of their experiences as framed and informed by the institutions of heterosexism, homophobia and ageism.

This thesis gave a few relatively privileged older lesbians an opportunity to speak out about their lived experience. The larger North American society does not see older lesbians and by claiming their right to be heard, these women have "talked back" (bell hooks, 1989, p. 5). hooks states that "finding a voice is an essential part of liberation struggle--for the oppressed, the exploited a necessary starting place" (p. 17) and that in overcoming our fear and finding our voice as oppressed people we become connected to others who live in silence. The older lesbians in this study acted out of courage and their commitment to ending the silence about lesbian existence and lived experience. In speaking out, in talking back and claiming their voices, they helped to centre and privilege the voices and lived experience of other older lesbians.

Older lesbians are survivors in a world that has acted to deny them their rightful place within the dominant culture. The findings of this exploratory study represent a beginning to understanding the experience of older white lesbians in

Canada. While the findings are not generalizable to other older lesbians' lives, the information clearly demonstrates how these participants' lived experience is contextualized within and harmed by the institutions of heterosexism, homophobia and ageism.

I hope that this study will act as a catalyst for further research from the margins. The findings of this research challenges the social work profession to be more sensitive towards, and inclusive of, older lesbians. Regardless of how services for older lesbians are provided, it is clear that heterosexism, homophobia and ageism have negative effects for lesbians. It is also clear that some lesbians are at least potentially clients of social services, whether or not service providers realize this. Mainstream agencies and health care providers need to shed themselves of their heterosexist and homophobic values and norms in order to provide quality, professional service delivery to lesbians (and gay men). As Brown (1992) comments, "Social services need to build up a wide range of options within their resources for older people so they can offer the most appropriate placements [and services] to meet every individual's needs" (p. 213).

As discussed earlier in my thesis, North American culture alienates and stigmatizes older lesbians. Its structures, values and norms are defined in ageist, heterosexist and homophobic terms which silence the voices of older lesbians in the dominant culture as well as in social work and gerontology discourse. The lesbian and gay community, as a new social movement which is beginning to demand a voice, is struggling to have its identity recognized by the dominant culture, to make a claim and name its needs both for individuals and as a

collective voice. As Drover and Keranis (1993) argue, there are many groups with goals similar to the lesbian and gay community:

Groups are not simply appealing to the state for a paternalistic redistribution of resources. Their claims imply--and often explicitly demand--a reformulation of their relationship to the state as well as to other key institutions, so that their well-being is enhanced (p. 22).

Social work, in general, and gerontology specifically, need to look beyond their traditional theories and forms of practice and concretely address the issues of older lesbians and other disenfranchised groups. It is clear to me that societal structures and forces, and institutional policies and practices marginalize older lesbians and render them invisible. It is important that these structures and institutions be examined and transformed.

Primarily, the social work profession, including its practices, policies, research, and curricula, needs to be examined in order to determine whether or not it is operating within the framework of the Canadian Association of Social Workers Social Work Code of Ethics. Social workers have a professional obligation to work to end discrimination on any grounds of "race, ethnicity, language, religion, marital status, gender, sexual orientation, age, [emphasis mine], abilities, economic status, political affiliation or national ancestry" (British Columbia Association of Social Workers Code of Ethics, 1984).

The social work profession also needs to examine its policies and practices in relation to how social workers actually interact with people. Oppressed and disenfranchised groups, of which older lesbians are but one, are alienated from the systems which have a great deal of control over well-being and quality of life.

Social services in both the public and private sectors are generally bureaucratic and hierarchical; these attributes serve to deny the social service consumer any control or influence over how the system treats them as people, accepts their claims for entitlement, and meets their needs for enfranchisement.

The obligation of the social work profession, then, is to examine its policies and procedures with a view to creating change at the organizational level that is transformational and in the best interests of the consumer (in this case, older lesbians). Social service organizations need to understand their dialectical functions as both social control agents, agents of social care and agents of social change, as well as operate within the Canadian Association of Social Workers Code of Ethics (1994). The Code of Ethics outlines that social workers' primary obligation is to the people and not to the agency.

Specific Implications From The Data

In this section I will address the specific issues to which the data spoke. While none of the four participants in my study discussed their experiences with social workers, I believe this speaks to the hegemony of heterosexism as much as other reasons. While the participants may not have stated any need for social work services, I think it is likely that they have learned not to need or depend on mainstream services because of the heterosexism that still permeates social work and other helping professions such as health care. In light of this, the data clearly did delineate many services which could benefit older lesbians.

Housing Concerns

Housing concerns are important for older lesbians. To accommodate the need for secure housing, government-funded housing programs, such as those delivered by the B. C. Housing Management Commission (BCHMC), could examine their policies in order to determine if single older lesbians and older lesbian couples are mentioned explicitly as qualifying for housing, and make changes to policies as needed to accommodate older lesbians. BCHMC could also examine its criteria for funding allocations for seniors housing and designate funds for the construction of seniors housing for older lesbians as a special needs group, such as that contemplated by the Lesbians Seniors Care Society and Lesbians On The Edge Of Time, as discussed in the literature review and in the data.

Existing seniors housing communities, including Long Term Care facilities, need to change existing policies and practices to utilize inclusive language that recognizes and welcomes older lesbians. Sensitivity training which addresses heterosexism and diversity issues could take place for staff and residents, to enable the housing community to be more accepting of older lesbians (and other marginalized groups).

Bereavement Support Services

Various bereavement and other support services such as hospice are needed by older lesbians. As people age, they often experience the loss of friends and partners from various illnesses. The accompanying grief and loss can take its toll on individual physical and psychological resources. For older lesbians, whether or not they are "out" about being lesbian, it is critical that

bereavement support services explicitly state that lesbians are welcome. Similar to the work that has been done by the bereavement community in light of the AIDS crisis, work needs to be done so that older lesbians, regardless of the kind of bereavement they are experiencing, feel that their needs will be met. Sensitivity training would enable bereavement workers to have an understanding and acceptance of lesbian existence and lesbian relationships.

The lesbian community also needs to examine how it can provide bereavement services (and other social services) to its community members, including older lesbians.

Religious Organizations

As some people age, they may want to turn towards the church for religious guidance around issues concerning death and burial. As discussed in the data, organized religion is often homophobic and ostracizing of lesbians and gay men. While the United Church, for example, has taken a stand to accept lesbian and gay people, most churches have yet to acknowledge and accept the existence of lesbians and gay men, and provide inclusive religious services to them.

Curricula Changes in Social Work and Other Helping Professions

The social work profession, other helping professions in general, and the health care profession specifically, in order to acknowledge the existence of lesbian and gay male clients, students, staff and faculty, need to develop curricula that address diversity in sexual orientation and work to eliminate heterosexism and ageism. Courses specific to the lesbian, gay male and bisexual

experience, including lesbian and gay aging, would not only welcome students from those sexual orientations, but would also address the "nature of same-sex orientation, the social service [and health care] needs of gay, lesbian, and bisexual clients, and methods of intervention at different levels related to same-sex orientation" (O'Neill, 1994). In this way, lesbian and gay male clientele of all ages would be better served in the delivery of social work and health care services. This would serve the needs of older lesbians and gay men, specifically, and older women and men generally, as people are more dependent on those services as they age. Ageism also needs to be addressed in various curricula, which would benefit all older women and men, including older lesbians.

Legislative Changes

As I was writing this thesis, the federal government included sexual orientation in the Canadian Human Rights Act after years of lobbying, primarily by the lesbian and gay male community and their allies. I hope that this legislation, together with the protection offered by most provincial Human Rights Acts, will help lend credence and sanction to the need for social change that embraces and welcomes all lesbians and gay men, including older lesbians. For example, universal same-sex pension benefits and the legal recognition of same-sex relationships would go far to redress the inequities that lesbians and gay men have experienced. In my view, any benefits that accrue to heterosexual people should also be available to lesbians and gay men. An equal distribution of benefits and rights would also help to educate the heterosexual population about lesbians and gay men, and their right to equal entitlement. Older women,

including older lesbians, are generally more economically disadvantaged than men as they age, and same-sex benefits would certainly help to advantage many older lesbians, who currently are not legally entitled to these benefits. This could help alleviate some of the health, housing and financial concerns that emerged from the findings of my study.

Lesbian Community Services

As discussed in the literature review and in the findings, many lesbians want services provided by lesbians for lesbians. Some lesbians, regardless of the type of social service needed, would prefer to have those needs met by their lesbian community if possible, in part because of the aforementioned heterosexism prevalent in mainstream services, and also because of the desire to be with other lesbians. As a community, we need to address our own ageist beliefs and practices and work to unlearn them. Lesbian-specific services, including housing and bereavement support, have been discussed in earlier sections of this chapter. Other services to older lesbians, which have been presented in the literature review and the findings, could include (1) support groups; (2) advocacy; (3) homemaker support services to enable older lesbians to remain in their own homes; and, (4) lesbian-specific long term care services from personal care to extended care, including palliative care.

Future Research

The older lesbian discourse in this study brought forward several elements that could be examined further. More research is needed to address the paucity

of information concerning older lesbians and the discriminatory aspects of social work. Some suggestions for future research include the following:

- (1) how, in subsequent studies, a broader representation of the older lesbian population can be achieved. Special attention needs to be paid to accessing and giving voice to older lesbians who are working class, from rural areas, have disabilities, and are from ethnic and racial minorities.
- (2) to explore feminism and how it may intersect older lesbians' lived experience.
- (3) to initiate participatory-action research with older lesbians who could contribute further information about their lived experience, including their needs, concerns, issues and survival strategies.
- (4) to examine how the social work profession can identify and unlearn its own heterosexism, homophobia and ageism.
- (5) to look at how aging may affect older heterosexual and lesbian women differently.
- (6) to address ageism within the lesbian community.
- (7) to examine how the lesbian community can provide lesbian-specific services to older lesbians, including older lesbians who are isolated from the lesbian community.
- (8) to examine policies that directly affect older lesbians and reformulate them to be explicitly inclusive of older lesbians (and other marginalized groups).

These are only some of the possibilities for future research that could continue to explore some of the issues that were identified in my study.

Summary

In conclusion, this exploratory study set out to give voice to the lived experience of older lesbians. Older lesbians are survivors in a world that has acted to deny them their rightful place within the dominant culture.

Heterosexism and homophobia act as organizing agents to suppress lesbian visibility in North American society and disallow access to social equality and social justice. Ageism, within both the larger culture and the lesbian community, works insidiously to trivialize, pathologize and devalue older lesbians.

Heterosexism and homophobia must be fought against and eradicated in order that older lesbians (and indeed, all citizens) are embraced and their diversity welcomed. Theories of aging must be deconstructed to demonstrate their heterosexist bias, and new theory formulated that is inclusive of the reality of older lesbians and gay men. The pioneering work of both lesbian and gay seniors and lesbian and gay gerontologists challenges them to become more inclusive of lesbians (and gay men). In order to respond to their challenge, older lesbians need the social work profession to embrace transformative theory that is based on the feminist and structural principles of social equality and social justice for all citizens. These women's stories would be different if the social work profession were different.

Older lesbians are like many older people in that they simply want a greater voice in affecting service delivery, and in living their lives in a healthy way. At the same time, older lesbians encompass a diverse population and the voices of the more marginalized among lesbians need to be sought. For a growing number of lesbian seniors and gerontologists, it is past time for the professional care community to unlearn its heterosexism and homophobia. Policies and practices which exclude are not acceptable and serve to deny citizens their right of equal access to service provision. For the lesbian

community it is also time to examine ageist and other exclusionary practices that negatively affect older lesbians.

I hope that my study gives the social work and the gerontology community an opportunity to learn from older lesbian voices. For my own lesbian community, I hope my study has helped to centre the margins of lesbian existence.

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APPENDIX A: INTERVIEW GUIDEResearch Question:

What do you want the social work profession in general, and gerontology specifically, to know about your life as a lesbian over 55?

Probes:

- * Could you tell me more about that?
- * What other issues or concerns do you have?
- * Is there anything more you want to say about that?
- * In closing, can you think of anything we haven't covered in this interview?