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INVISIBLE FUTURES: TRANS MEN AND REPRESENTATIONS OF AGEING

Michael Toze

Lincoln Medical School

ABSTRACT

Trans studies has often emphasised the importance of trans people reclaiming their own narrative.¹ Lifecourse approaches to ageing studies similarly seek to recognise the ongoing and cumulative effects of interactions between sociocultural context, lifestage, interactions with others and agency.² It has elsewhere been suggested that integrating these perspectives offers opportunities to conceptualise trans ageing.³ Concepts of narrative and of lifecourse are rooted in time, and the movement between past, present and future. However, there is currently little popular or academic visibility of mature trans men beyond transition. As a consequence, both trans men and society as a whole may have relatively little opportunity to 'see' trans men's experiences as a complete lifecourse. This paper explores the implications of this absence of visibility for community and sense of identity, highlights potential areas of intersections between masculinity, trans status and ageing and points to the importance of nuanced recognition of diverse trans lifecourses.

KEYWORDS: Trans man, transgender, lifecourse, ageing.

¹ Sandy Stone, 'The Empire Strikes Back: A Posttranssexual Manifesto', in *Body Guards: The Cultural Politics of Gender Ambiguity*, ed. by Julia Epstein and Kristina Straub (New York: Routledge, 1991).

² Glen H Elder, 'Time, Human Agency, and Social Change: Perspectives on the Life Course', *Social Psychology Quarterly*, (1994).

³ Michael Toze, 'Developing a Critical Trans Gerontology', *The British Journal of Sociology*, 70.4 (2019) 1490-1509.

In 2002, Channel 4 screened a documentary called *Make Me a Man*.⁴ It featured four trans masculine people, all at a key medical point of commencing hormone therapy or surgery. I was seventeen, and the only prior representations of trans men I had encountered were short paragraphs within medical textbooks and occasional segments on the *Jerry Springer Show*. These were othering accounts that portrayed trans men as mentally ill women. *Make Me a Man* was the first time I saw trans men portrayed as men, and moreover as men with relationships and careers and lives. For me, it was an important moment of self-realisation: that a future as a trans man was available, and that a future as a trans man could be integrated with other aspects of my plans for a positive, fulfilling future.

Such moments of self-realisation through the stories of others are a common feature of trans narratives.⁵ Of course, there are also narratives of trans pioneers such as Michael Dillon, thought to be the first trans man to undergo phalloplasty.⁶ However, I suspect most of us are not, at heart, cut out for a leap entirely into the unknown. For many trans people, it is important to be able to socially locate ourselves and our experiences. As Christine Burns puts it, we want to know: 'Is there anyone else like me?'.⁷ However, to me the value of *Make Me a Man* did not derive from a documentary representation of someone exactly like me. I already knew what it was like to be a closeted teenager struggling with a gender identity I could not fully articulate. Rather, what I gained from *Make Me a Man* was the representation of possible futures.

Now, at the age of thirty-four, I feel like I've lived beyond that moment of future self-representation. There are far more trans documentaries and films, but the narrative does not seem to have developed much since *Make Me a Man*. There is still an overwhelming focus upon transition, and in particular the medicalised moments of surgery and hormones. This is noticeably out of step with academic and community discourses that have critiqued the limitations of narratives framed by medical diagnostic terminology such as 'transsexual', and instead moved toward more open-ended concepts of 'trans' as offering diverse and pluralist gendered possibilities.⁸ For me, medical transition is no longer a possible future, but a past that I am at times frankly rather bored by. There do not yet seem to be any mainstream portrayals of trans men equivalent to what we are starting to see for trans women in *Boy Meets Girl*, *Orange is the New Black*, or *Banana*: mature adults with a life after transition, negotiating relationship and family

⁴ Katie Buchanan, *Make Me a Man*, (London: RDF for Channel Four, 2002).

⁵ See for example: Christine Burns, 'Is There Anyone Else Like Me?', in *Trans Britain: Our Journey from the Shadows*, ed. by Christine Burns (London: Unbound, 2018), pp. 23-38. Jay Prosser, *Second Skins: The Body Narratives of Transsexuality*, (New York: Columbia University Press, 1998), pp. 99-134

⁶ Dillon's life is biographed in Pagan Kennedy, *The First Man-Made Man: The Story of Two Sex Changes, One Love Affair, and a Twentieth-Century Medical Revolution*, (Bloomsbury Publishing USA, 2008).

⁷ Burns, p. 23

⁸ Ruth Pearce, *Understanding Trans Health: Discourse, Power and Possibility*, (Bristol: Policy Press, 2018), p. 4; Stone.

issues in the long term.⁹ Within LGBTQ+ (Lesbian, Gay, Bisexual, Trans and Queer) communities, too, there seems to be lack of visibility of mature trans men. This can perhaps in part be located within broader youth-centric norms within LGBTQ+ communities, as well as the nature of trans community as geographically dispersed and often structured around transition.¹⁰ However, it may also derive from specific issues related to trajectory and visibility of trans masculine lifecourses.

In this paper, I draw upon lifecourse approaches to ageing and trans challenges to the traditional 'transsexual narrative', to explore the lack of mature trans men and its potential impact for community and a sense of future. I argue that while these approaches complement each other in emphasising the importance of understanding identity and experience in the context of time, the lack of visibility of older trans men potentially truncates this process.¹¹ As a consequence, younger trans men may have reduced opportunity to visualise their futures; older trans men may feel excluded or unrecognised; and services may not appropriately address the needs of trans men throughout their lives.

Trans masculinity is a broad spectrum, including trans people who explicitly identify as men, and wish to be socially and legally recognised as such ('trans men') and others who consider masculinity or a movement towards masculinity to be a component of their identity but do not identify solely as men. Terminology in this field is fluid, evolving and frequently contested, and indeed there is not necessarily always a clear and absolute distinction between trans masculinity and other identities such as 'butch'.¹² Rather than attempting to cover a very diverse range of trans identities, experiences and relationships with masculinity in a relatively short piece, I here focus specifically upon those trans people who seek to be recognised and visible to others as men. In doing so, I at times consciously acknowledge my experiences as a trans man born in the UK in the mid-1980s, who transitioned in the early 2000s. I do so because this paper primarily seeks to highlight a gap in the existing literature, and my views on what is absent or invisible in other accounts are inevitably rooted in my phenomenological experience of what is present in my own life. This is intended as an acknowledgement of my starting point of enquiry, and not as a claim that my own experiences should be seen as typical of trans men, nor that the experiences of trans men should be given priority over other trans groups.

Narratives and (In)Visible Lifecourses

⁹ Jenji Kohan, *Orange is the New Black*, (Santa Monica, California: Lionsgate Television, 2014); Russell T. Davies, *Banana*, (Manchester: Red Production Company, 2015); Elliot Kerrigan, *Boy Meets Girl*, (London: Endemol UK, 2015). The lack of media representation of trans masculine experience is discussed in Matthew Heinz, *Entering Transmasculinity: The Inevitability of Discourse*, (Bristol, UK: Intellect, 2016), p. 13.

¹⁰ Kathleen F. Slevin and Thomas J. Linneman, 'Old Gay Men's Bodies and Masculinities', *Men and Masculinities*, 12 (2009), pp. 483-507; Sally Hines, 'Transgendering Care: Practices of Care within Transgender Communities', *Critical Social Policy*, 27 (2007).

¹¹ Toze.

¹² C Jacob Hale, 'Consuming the Living, Dis (Re) Membering the Dead in the Butch/Ftm Borderlands', *GLQ-NEW YORK*, 4 (1998); Judith Butler, *Undoing Gender*, (New York: Routledge, 2004); Heinz, pp. 20-21

Both within critical gerontology and within modern trans studies there has been a conscious shift away from standardised life narratives and fixed chronologies towards recognising more holistic and diverse life experiences. In trans studies, Sandy Stone's *Post-Transsexual Manifesto* marks an explicit rejection of traditional transsexual narratives, typically marked by a focus upon medical processes and a clear sense of 'before' and 'after', and instead presents an analysis that establishes trans people as holistic subjects, with an ongoing continuity of experience.¹³ Stone, along with other prominent figures in trans studies such as Jay Prosser and Patrick Califia analyses—and to differing degrees, problematises—the social and medicalised constraints placed upon the genre of trans narratives.¹⁴ More recently, there has also been discussion of temporality within trans studies, critically assessing subjective accounts of past, present and future within narratives of what it is to be trans.¹⁵ Trans studies has therefore been established in part in opposition to assumptions that being trans is defined solely as a short-term process of movement from one binary gender category to another.

Within ageing studies there has similarly been a challenge to older, rather homogenising narratives of fixed 'life stages', which tended to uncritically accept normative notions of life events such as marriage, retirement and the gendered division of labour, and hence present 'old age' as a separate, clearly delineated stage of life, defined by the cessation of work and child-rearing.¹⁶ Instead, lifecourse models of ageing such as that presented by Elder, focus upon the cumulative experiences occurring throughout someone's life, explicitly recognising socio-cultural factors such as historic context, normative social timings of life events, the connections between individuals and the role human agency.¹⁷ Hence, the lifecourse approach offers a model for recognising the role of experiences of ageing outside gender-normative expectations. Authors such as Witten and Bailey have applied the concept of the lifecourse to trans populations and identified several ways in which a trans lifecourse can affect experiences of ageing, including the potentially cumulative impacts of experiences of discrimination over time; and the significance of experiencing a 'second puberty' in mid-life.¹⁸ This also provides a framework for recognising differences between trans experiences of ageing.

Despite the emergence of critical perspectives, trans masculinity often remains framed by a stereotypical narrative that is largely similar to the one Stone sought to disrupt nearly thirty years ago. Heinz summarises this narrative concisely: trans men are typically presented as having

¹³ Stone.

¹⁴ Ibid.; Prosser; Pat Califia, *Sex Changes: The Politics of Transgenderism*, (San Francisco: Cleis Press, 1997).

¹⁵ Ruth Campbell, 'Trans Temporalities', ed. by Edinburgh University Press (Edinburgh: Edinburgh University Press, 2017); Kadji Amin, 'Temporality', *TSQ: Transgender Studies Quarterly*, 1 (2014).

¹⁶ Stephen Katz, *Disciplining Old Age: The Formation of Gerontological Knowledge*, (Charlottesville: University Press of Virginia, 1996).

¹⁷ Elder.

¹⁸ Louis Bailey, 'Trans Ageing', in *Lesbian, Gay, Bisexual and Transgender Ageing: Biographical Approaches for Inclusive Care and Support*, ed. by Richard Ward, Ian Rivers, and Mike Sutherland (2012), pp. 51-66; Tarynn M. Witten, 'Life Course Analysis—the Courage to Search for Something More', *Journal of Human Behavior in the Social Environment*, 8 (2004).

been gender non-conforming in childhood, experiencing distress related to gender dysphoria, and then undergoing medical treatment that allows them to integrate into society in line with heteronormative perceptions of masculinity.¹⁹ As such, the trans man's narrative ends with him becoming invisible. Community-produced media often does acknowledge diversity within trans men's experiences, and increasingly discusses the paradoxes entailed in seeking recognition as a man and challenging unitary constructions of what it is to be a man, but such debates are rarely represented outside trans communities.²⁰ The ongoing salience of disappearance is perhaps emphasised by the plethora of community terms such as 'woodworking', 'blending', 'passing' and 'stealth', which draw upon concepts of camouflage to refer to others assigning the correct gender without recognising the individual as trans ('woodworking' for instance, derives from the phrase 'disappear into the woodwork').²¹

There are both physiological and social factors affecting processes of visibility. Testosterone therapy can have substantial somatic effects such as a deeper voice, growth of facial and body hair, and change of body and face shape. As a consequence, many trans men who take testosterone do find that over time they become increasingly consistently perceived as cis men (i.e. men who are not trans: 'cis' and 'trans' are oppositional prefixes in Latin). However, this is not a universal experience. Some trans men do not (or cannot) access testosterone, and not everyone who takes testosterone is consistently recognised by others as male.²² On a sociological level, Serano highlights that the denigration and trivialisation of femininity results in trans femininity being perceived as socially taboo, and subject to a high level of public scrutiny.²³ In contrast, as Califia puts it, society tends to assume that: 'of course women want to be men'.²⁴ This assumption means that the adoption of masculine clothing and social cues by people assigned female at birth is less likely to be recognised as an explicit assertion of male or masculine identity. As a consequence, it can be difficult for individuals to specifically signal trans masculinity, and trans masculinity is often not recognisable to others as a distinct category. A trans man who has short hair, wears masculine clothing, and introduces himself with a masculine name, may still be perceived by others to be a cis woman. Alternatively, if he is recognised as a man, he is likely to be assumed to be a cis man. Recognition specifically as a trans man often requires explicit verbal articulation.

¹⁹ Heinz, p. 104; Jamison Green, 'Look! No, Don't! The Visibility Dilemma for Transsexual Men.', in *The Transgender Studies Reader*, ed. by Susan Stryker and Stephen Whittle (New York: Routledge., 2006).

²⁰ Heinz, pp. 13-17, p. 105.

²¹ Ibid. p. 57.

²² Sonja J Ellis, Jay McNeil, and Louis Bailey, 'Gender, Stage of Transition and Situational Avoidance: A UK Study of Trans People's Experiences', *Sexual and Relationship Therapy*, (2014); Em Rundall and Vincent Vecchiotti, 'Visibility in the Workplace', in *Transgender Identities: Towards a Social Analysis of Gender Diversity*, ed. by Sally Hines and Tam Sanger (2010), pp. 127-52.

²³ Julia Serano, *Whipping Girl: A Transsexual Woman on Sexism and the Scapegoating of Femininity*, (California: Seal Press, 2007).

²⁴ Califia, p. 178.

Invisibility undoubtedly has substantial advantages within a cissexist society. Being recognised as trans is often actively unsafe. Jamison Green points out that identifying oneself as trans carries the risk of undermining one's status as a man.²⁵ But at the same time, invisibility is both contingent and precarious. Green highlights that invisibility in the street cannot necessarily be maintained in other settings such as medical appointments or sexual encounters, and many trans men have experienced being accidentally or deliberately 'outed'. Goffman, in his account of social stigma, distinguishes between the 'discredited'—people who are immediately visible as belonging to a stigmatised category—and the 'discreditable'—people who belong to a stigmatised category but are not visible as such.²⁶ The less visible position typically requires a high degree of monitoring of self and others: awareness of who knows and who does not know and of how information might be transmitted. It also tends to require self-censorship: avoiding anecdotes that might lead onto awkward questions; keeping social groups separate. From a lifecourse perspective, invisibility may require not acknowledging past life experiences that continue to be significant. Moreover, invisibility creates dilemmas as to when and if a disclosure should be made. Not announcing a stigmatised quality is often perceived as deceptive, and the discovery of what others perceive to be deception can be a cue for transphobic violence.²⁷

Invisibility also has political consequences. Queer politics is subject to an on-going tension between assimilationism and radicalism. The overall tendency has been for society to accept of LGBTQ+ people if they align themselves with heterosexual norms and avoid public visibility, for example through seeking monogamous, state-recognised marriage and disavowing transgressive sexual behaviour.²⁸ The positioning of trans masculinity as less publicly visible and less challenging to gender hierarchies implicitly tends to render trans men as more available to assimilation, whether they wish to assimilate or not. Green highlights that being perceived to be a cis man both grants him entry into spaces that would not have been available if he had been visibly trans, but also results in his activism being overlooked.²⁹

Talking about trans men's lifecourses therefore entails elements of paradox. Social recognition as a man is often contingent upon the erasure, or at least the invisibility, of an incongruent past. The popular account often assumes that gender transition represents a clear and static break from the pre-transition self. Yet at the same time, academic and community perspectives point out that past experiences are an important component of self, and can have a cumulative impact throughout an individual's life.³⁰ As individuals age, their relationship with

²⁵ Green, p. 503.

²⁶ Erving Goffman, *Stigma: Notes on the Management of Spoiled Identity*, (London: Penguin Books, 1963).

²⁷ Talia Mae Bettcher, 'Trapped in the Wrong Theory: Rethinking Trans Oppression and Resistance', *Signs*, 39 (2014), p. 392.

²⁸ Ana Cristina Santos, 'Are We There Yet? Queer Sexual Encounters, Legal Recognition and Homonormativity', *Journal of Gender Studies*, 22 (2013), pp. 58-59; Paul Johnson, 'Ordinary Folk and Cottaging: Law, Morality, and Public Sex', *Journal of Law & Society*, 34 (2007), pp. 527-528.

²⁹ Green, pp. 502-503.

³⁰ Stone; Elder.

their past experiences may change, not least because ageing is itself located within social gender norms.

Gendered Trajectories of Trans Ageing

Ageing is a gendered process. Or, more precisely, ageing is often understood to be a process of degendering and desexualising, and hence the assertion of sex and gender is often positioned as resistance to ageing. Gott contrasts two social myths: that of asexual old age, and that of the 'sexy oldie', who resists age through retaining sexual citizenship, and argues that both myths are rooted in the assumption that sexual expression is both desirable, and a property of youth.³¹ Calasanti highlights the gendered and heterosexualised dimensions of anti-ageing adverts, including the assertion that testosterone restores both youth and masculinity.³² Indeed, the testosterone gel that I and many other trans men use daily is also marketed as a solution for the (cis) 'male menopause'.³³ Slevin and Linneman highlight that gay men face particular dilemmas around masculinity as they age, associated both with the broader status of hegemonic masculinity as youthful and heterosexual, and with the youth-centric focus of gay culture.³⁴ If ageing, masculinity and sexuality create intersecting pressures and tensions for cis men, it seems plausible that ageing would also create gendered pressures for trans men, who have often faced substantial barriers to asserting their masculinity.

Witten suggests that older trans people may have experienced one of three broad life trajectories.³⁵ The first, ageing within a culture that acknowledges gender diversity, is unlikely to be the experience of most UK trans people. In the UK, the main distinction with regard to trans ageing is between trans people who came out in early life and then aged, and those who transitioned in later life. However, it appears that transitioning later in life is uncommon among trans men. Bouman et al. report that of seventy-four patients over fifty referred to the Nottingham Centre for Gender Dysphoria in a thirty-month period, just three were trans men.³⁶ This disparity is substantially higher than previously reported prevalence disparities between trans women and trans men (which are themselves disputed).³⁷ One possibility is that the lower number of trans men transitioning later in life may in part relate to the visibility issues I have highlighted thus far. There are a number of prominent trans women who have transitioned in later life (perhaps most

³¹ Merryn Gott, *Sexuality, Sexual Health and Ageing*, (Buckingham: Open University Press, 2005), pp. 5-42.

³² Toni Calasanti, 'Bodacious Berry, Potency Wood and the Aging Monster: Gender and Age Relations in Anti-Aging Ads', *Social Forces*, 86 (2007), pp. 348-350.

³³ Elizabeth Siegel Watkins, 'Testosterone and the Pharmaceuticalization of Male Aging', in *Ageing Men, Masculinities and Modern Medicine*, ed. by Antje Kampf, Barbara L. Marshall, and Alan Petersen (London, UK: Routledge, 2012), pp. 42-46.

³⁴ Slevin and Linneman, pp. 486-488.

³⁵ Tarynn M Witten, 'Graceful Exits: Intersection of Aging, Transgender Identities, and the Family/Community', *Journal of GLBT Family Studies*, 5 (2009), p. 38.

³⁶ Walter Pierre Bouman and others, 'Sociodemographic Variables, Clinical Features, and the Role of Preassessment Cross-Sex Hormones in Older Trans People', *The Journal of Sexual Medicine*, 13 (2016), p. 711.

³⁷ Lindsay Collin, Michael Goodman, and Vin Tangpricha, 'Worldwide Prevalence of Transgender and Gender Non-Conformity', in *Principles of Transgender Medicine and Surgery*, ed. by Randi Ettner, Stan Monstrey, and Eli Coleman (New York: Routledge, 2016), pp. 30-49.

obviously, Caitlyn Jenner), but fewer equivalent trans men. Another factor may be differing social pressures. Fabbre reports that trans women who transition later in life describe reaching a point where they feel unable to keep failing to live up to society's gendered expectations.³⁸ Different interactions between age and gender expectations for people assigned female at birth may mean that this point of 'failure' is less likely to occur in later life. I have highlighted that there are social associations between ageing and degendering, and that femininity is socially positioned as trivial.³⁹ For an older person perceived by others as female, reducing feminine signifiers (e.g. adopting a short haircut or androgynous clothing) can potentially be accepted within cisnormative expectations as practical adaptations to ageing, rather than explicit markers of gender nonconformity. A further factor may be that older people perceived to be women are often expected to take on a more family-centred role and tend to have more caring responsibilities. Plausibly, such family roles may create additional barriers to coming out.

Accounts that specifically discuss older trans people often pay curiously little attention to gender. In accounts of trans ageing, 'trans people' are often discussed as a group, with limited discussion of differences between trans masculine and trans feminine people beyond clinical considerations. For example, texts by Witten and Eyler, Witten and by Bailey do all acknowledge the importance of social factors such as relationships and discrimination for ageing trans people.⁴⁰ However, these texts largely do not explore differences between trans men and trans women except with regard to hormone regimes and medical risk factors. There is very little discussion of social gender role or of how concepts such as masculinity and femininity affect older trans people. In part, this may derive from the clinical focus of much trans research. For example, one of longest and largest follow up of trans people post transition uses a sample of patients from a gender clinic, and the analysis was conducted by an endocrinology team.⁴¹ As a consequence, while the study clearly identifies that the primary causes of premature death within the study cohort were HIV, substance misuse and suicide, the social factors that might contribute to such deaths were largely dismissed as being outside the scope of a paper interested in the pharmacological effects of hormones.⁴² This paper also contains very few older trans men: out of 1331 trans people, followed for a median of eighteen years after transition, only sixteen were trans men over forty.⁴³ Unsurprisingly, the paper was unable to reach any strong conclusions on ageing trans men's health.

³⁸ Vanessa D Fabbre, 'Gender Transitions in Later Life: A Queer Perspective on Successful Aging', *The Gerontologist*, 55 (2014), pp. 148-150.

³⁹ Serano, p.18; Calasanti, p. 348.

⁴⁰ Tarynn M. Witten and A.E Eyler, 'Care of Aging Transgender and Gender Non-Conforming Patients', in *Principles of Transgender Medicine and Surgery*, ed. by Randi Ettner, Stan Monstrey, and Eli Coleman (New York: Routledge, 2016); Witten; Bailey.

⁴¹ Henk Asscheman and others, 'A Long-Term Follow-up Study of Mortality in Transsexuals Receiving Treatment with Cross-Sex Hormones', *Eur J Endocrinol*, 164 (2011).

⁴² *Ibid*, p. 640.

⁴³ *Ibid*, p. 636.

Some texts about trans ageing explicitly draw upon the notion of degendering in old age. For example, Witten and Eyler suggest transition is easier in later life because “women and men share more physical similarities during the elder years”.⁴⁴ However, this focuses on a claimed physical similarity being observed by an external observer, rather than exploring the meaning of gendered appearance for older trans people. In interviews with trans women, Siverskog reports that while some saw the association of androgyny with age as positive, others felt that age prevented them from expressing their femininity as they would wish, either because their physical body was changing in a way that limited self-expression, or because their desired self-expression was felt to be inappropriate for their age.⁴⁵ This suggests that an association between age and androgyny is not necessarily beneficial for those trans people with a strong gender identity as male or female. Siverskog does also discuss some elements of trans masculine embodiment in later trans life: e.g. one participant’s avoidance of some masculine spaces due to being unable to urinate standing.⁴⁶ However, there remains little detailed discussion of how trans men navigate masculinity in later life.

Stone’s *Post-Transsexual Manifesto* critiques the assumption, still apparent in much of the popular coverage of trans issues, that transition concludes with trans people achieving the ‘right’ body for the gendered self.⁴⁷ Recognising ageing as a component of trans experience requires recognising that there fundamentally can never be a static ‘right’ body. Bodies inevitably change, and often in a way that the individual is unhappy with. Like other men, trans men taking testosterone experience on-going and potentially unwelcome changes to their physicality—male pattern balding, increasing body hair, a tendency to gain weight around the stomach.⁴⁸ The pump devices used to achieve erection after phalloplasty typically fail after a certain number of years, requiring either replacement or acceptance of erectile dysfunction.⁴⁹ Trans men may also experience bodily changes that are associated with aspects of their birth physiology. For example, it seems plausible that conditions such as rheumatoid arthritis and urinary incontinence might affect trans men differently to cis men. The lack of data on ageing trans men’s health means there is little concrete information about quantitative prevalence or qualitative experience of later-life gendered bodily changes.

Social aspects of ageing are also gendered. Crises of identity at midlife and at retirement are sometimes suggested to particularly affect men, due in part to the association between the

⁴⁴ Witten and Eyler, pp. 349-350.

⁴⁵ Anna Siverskog, 'Ageing Bodies That Matter: Age, Gender and Embodiment in Older Transgender People's Life Stories', *NORA-Nordic Journal of Feminist and Gender Research*, (2015), p. 12.

⁴⁶ *Ibid*, pp. 9-10.

⁴⁷ Stone, pp. 300-301.

⁴⁸ Eli Coleman and others, 'Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People, Version 7', *International Journal of Transgenderism*, 13 (2012), pp. 202-203.

⁴⁹ Britt Colebunders and others, 'Female-to-Male Gender Reassignment Surgery', in *Principles of Transgender Medicine and Surgery*, ed. by Randi Ettner, Stan Monstrey, and Eli Coleman (2016), pp. 279-317.

workplace and male gender roles.⁵⁰ Men's social networks are typically smaller, and for heterosexual men, often facilitated by their wives, meaning widowers and divorced men may be particularly at risk of isolation in later life.⁵¹ Little is known about the gendered implications of retirement and masculine identity for trans men, or about their social networks in later life. Caring responsibilities may also create gendered pressures for some trans men in later life. Price highlights that older lesbians sometimes feel a particular pressure be primary carer for their parents due to the gender dynamics of being an (often) childless daughter within a heterosexual family network, and that taking on caring can reopen previous issues of intolerance with the family network.⁵² These dynamics may potentially be relevant to a trans man who has previously been viewed as female within his kin network, and possibly may still be viewed by some within the family in those terms. Decisions over whether to take on or reject the role of carer may invoke complex dynamics around gender, obligation and family role.

Trans people also frequently need personal medical and social care themselves as they age. Witten and Whittle highlight very real problems and dilemmas for men with gender atypical bodies accessing health and social care, such as insensitive approaches to the provision of personal care or inappropriate placement within gendered healthcare services.⁵³ Few care providers have received training on the needs of older trans people, and when such training does occur, it is invariably reactive, occurring once a trans person has already moved into a setting.⁵⁴

Older Trans Men in LGBTQ+ Communities and The Optics of Desire

The invisibility of mature and ageing trans men carries over to LGBTQ+ settings too. I have more than once had rueful conversations with other trans men about the fact that even when wearing a T-shirt with a trans slogan or carrying a trans banner in a Pride march, we are frequently assumed to be someone's partner, parent or ally, or else to be wearing a T-shirt with a slogan we do not comprehend. Recognition of identity by others is a necessary precursor in order to be able to signify pride in our own identities.

LGBTQ+ communities are often—formally or informally—age- and gender-segregated. Older gay men report an emphasis on youthfulness within gay male spaces, while lesbians sometimes perceive 'gay' spaces to be overly male dominated, and hence seek to carve out their

⁵⁰ John L. Oliffe and others, 'Masculinities, Work, and Retirement among Older Men Who Experience Depression', *Qualitative Health Research*, 23 (2013).

⁵¹ Kate Davidson, "'Why Can't a Man Be More Like a Woman?': Marital Status and Social Networking of Older Men', *Journal of Men's Studies*, 13 (2004); Deirdre McLaughlin and others, 'Gender Differences in Social Network Size and Satisfaction in Adults in Their 70s', *Journal of Health Psychology*, 15 (2010).

⁵² Elizabeth Price, 'Caring for Mum and Dad: Lesbian Women Negotiating Family and Navigating Care', *British Journal of Social Work*, 41 (2011), p. 1289.

⁵³ Tarynn M. Witten and Stephen Whittle, 'Transpanthers: The Greying of Transgender and the Law', *Deakin Law Review*, 9 (2004), pp. 512-516.

⁵⁴ Commission for Social Care Inspectorate, 'Putting People First: Equality and Diversity Matters 1. Providing Appropriate Services for Lesbian, Gay, Bisexual and Transgender People', (2008).

own spaces.⁵⁵ There are other gendered and age-related distinctions within LGBTQ+ communities, for example the different dimensions of gay masculinity and maturity implied by the terms “bear” or “twink”, which may translate into distinct spaces and communities.⁵⁶ Earlier in this paper, I referred to ‘passing’ in the sense of the gender attributed to the individual by others. Passing can also refer to movement from one space to another. Through ‘passing’ as male, a trans man may also pass between spaces in LGBTQ+ communities and pass into and out of such spaces. A trans man who previously presented himself as a lesbian, but now recognises himself to be a man in a relationship with a woman, may still identify as ‘queer’, but may no longer be welcome or comfortable in all the community spaces he previously accessed. Conversely a trans man who is primarily interested in relationships with men may need to learn to navigate gay and bisexual male spaces for the first time, and as someone with an atypical body for such spaces.

In sexual interactions, perceptions and attributions of gender can potentially become a matter of law. Sharpe highlights a series of ‘sex by deception’ prosecutions of trans men and gender non-conforming individuals who do not disclose their birth assignment as female to their sexual partners, and the extent to which such prosecutions draw upon normative expectations of embodiment and desire.⁵⁷ Most such cases have involved adolescents and young adults. However, a more recently reported case involved a trans man in his thirties.⁵⁸ It may be that more cases involving older trans men come to court in future years, perhaps when individuals find themselves single in their middle or later years and seek to form new relationships. At present, although the Crown Prosecution Service offers some guidance regarding factors affecting prosecution decisions, there is no clear guidance for trans men as to what is and is not legally acceptable about disclosure.⁵⁹ Cases that come to court are unlikely to be representative of most experiences of discussing and disclosing gender history when entering sexual and romantic spaces as an older trans man. Nonetheless, they highlight the extent to which issues of visibility and gender attribution are socially—and literally - policed.

I have already indicated that acknowledging ageing requires acknowledging that bodily change does not stop at transition. Trans men may experience a series of changes with regard to how they and others perceive their body. The initial transition may involve change from a body

⁵⁵ Slevin and Linneman; Annette Pritchard, Nigel Morgan, and Diane Sedgley, 'In Search of Lesbian Space? The Experience of Manchester's Gay Village', *Leisure Studies*, 21 (2002).

⁵⁶ In brief, a “twink” is typically a term for someone who fulfils the hegemonic norm of gay masculinity as young, clean-cut and gym-toned; “bear” subculture tends to focus upon larger, hairier and often more mature expressions of masculinity. See: Eric Manley, Heidi Levitt, and Chad Mosher, 'Understanding the Bear Movement in Gay Male Culture: Redefining Masculinity', *Journal of Homosexuality*, 53 (2007), pp. 90-91; Peter Hennen, 'Bear Bodies, Bear Masculinity: Recuperation, Resistance, or Retreat?', *Gender & Society*, 19 (2005), p. 33.

⁵⁷ Alex Sharpe, 'Expanding Liability for Sexual Fraud through the Concept of ‘Active Deception’ a Flawed Approach', *The Journal of Criminal Law*, 80 (2016), pp. 37-41.

⁵⁸ 'HMA v Carlos Delacruz', (Judiciary of Scotland: Edinburgh Sheriff Court, 2018); Richard Hartley-Parkinson, 'Trans Man with No Penis Is Jailed for Tricking Women with Unknown Object During Sex', *The Metro*, (2018).

⁵⁹ Crown Prosecution Service, 'Rape and Sexual Offences - Chapter 3: Consent', (London: Crown Prosecution Service, 2017).

with characteristics that are perceived as female towards a body that is perceived as youthfully male. Ageing may then lead to more gradual changes towards mature masculinity, perhaps with middle-aged features such as a receding hair line, paunch and body hair, and ultimately to being seen as an 'old' man. All of these changes have implications for embodied sexuality and the gendered dynamics of desire. Slevin highlights the significance of the male gaze on gendered experiences of ageing: ageing heterosexual women are concerned about losing desirability, while ageing gay men often feel a pressure to remain youthful within a youth-centric scene.⁶⁰ Further study of trans masculinities would potentially have implications for considering more broadly the trajectory of masculinity within a lifecourse, the context of sexuality and the implications both for personal identity and interpersonal relationships.

Older Trans Men in Trans Communities

Directories of trans support groups suggest that there are few formal support organisations specifically for older trans men within the UK.⁶¹ Hines highlights that trans men may tend to drift away from trans groups over time, in part because groups are often structured around providing advice and support regarding transition, and individuals typically have less need for such support once they have completed the interventions they wish to access.⁶² The trans population is geographically dispersed, meaning that attending a trans group often requires travel and expense. Trans groups are also typically small, volunteer-run, and not in receipt of statutory funding. As a consequence, they may lack resilience and be subject to closure if a key volunteer leaves, there is a disagreement within the group, or the meeting space increases its rent. While those who urgently require support may be willing to travel long distances, or seek out a new group if an existing one closes, those who were already in the process of disengaging from the community are perhaps more likely to simply lose touch.

Technological changes have an impact on trans communities. Accounts of trans communities prior to the internet emphasise the role of photocopied newsletters.⁶³ One such newsletter was 'Boy's Own', produced by the UK FTM Network and signposted within NHS publications until the mid-2000s.⁶⁴ The internet radically increased access to information and community for young trans people, initially through search engines, but now through more interactive social media platforms such as Facebook and YouTube.⁶⁵ However, wider market research suggests that previously popular social media platforms such as Facebook may themselves be losing appeal among young adults, suggesting that over time, there may be further

⁶⁰ Kathleen F. Slevin, "'If I Had Lots of Money...I'd Have a Body Makeover:' Managing the Aging Body', *Social Forces*, 88 (2010), pp. 1015-1017.

⁶¹ GIRES, 'Tranzwiki', (Surrey: GIRES, n.d.).

⁶² Hines.

⁶³ Burns, p. 29.

⁶⁴ GIRES, 'Guidance for GPs, Other Clinicians and Health Professionals on the Care of Gender Variant People', ed. by Department of Health (London: Department of Health, 2008).

⁶⁵ Pearce, p. 39, pp. 209-212; Heinz, pp. 15-17.

migration to newer technology.⁶⁶ Each community shift—from newsletters, to the early internet, to social media, and beyond - potentially leaves some users behind. Older populations may be less digitally literate and lack confidence adapting to new technology, especially if they also experience marginalisation related to education or socioeconomic status.⁶⁷ There may therefore be a cohort of older trans men who feel unable to access online trans communities.

Legal and medical discourses have also moved rapidly. In 2004, the Gender Recognition Act granted many trans men the right to be legally recognised as men for the first time. Today, many trans people are—rightly—pointing out that the process is pathologising, bureaucratic and excludes young people and non-binary people.⁶⁸ However, there is a danger that justified critiques of the status quo may fail to recognise the historic context and symbolic importance of past achievements. Medical approaches have also changed. I have already noted the extent to which modern trans accounts, such as Sandy Stone's *Post-Transsexual Manifesto* push back against an account of 'transsexualism' that was largely defined by clinics, and that gave clinicians substantial oversight of trans people's personal lives. Perhaps partly in response to such critiques, the clinical requirements have tended to loosen over time. For example, version six of the WPATH Standards of Care, governing trans healthcare in the UK and many other jurisdictions, explicitly required that trans people present themselves in line with their gender identity in work, education or volunteering for a year prior to undergoing surgery, thus potentially barring surgery to trans people who were unemployed, carers, retired or disabled.⁶⁹ In contrast, the current version seven also requires a year of 'living in an identity-congruent gender role', but does not explicitly require that this entails work, education or volunteering where those were not already part of an individual's day-to-day life, instead emphasising a range of personal and community interactions that may take place within a calendar year.⁷⁰ This reform may be a particularly important one for some older trans people, who may have been less able to meet the prior requirements for work, education or volunteering. Similarly, trans male pregnancy was previously considered by some clinics to indicate that the individual was not committed to transition.⁷¹ Today, the Standards of Care recommend advising trans men on egg freezing, and state that access to reproductive care should be facilitated.⁷² These changes in medical and legal requirements have direct, very personal implications for lived experiences. The hoops one generation had to jump through and that they were explicitly told were signifiers of authenticity, are now increasingly rejected as

⁶⁶ Monica Anderson and Jingjing Jiang, 'Teens, Social Media & Technology 2018', (Washington, DC: Pew Internet & American Life Project., 2018), p. 2018.

⁶⁷ Thomas N Friemel, 'The Digital Divide Has Grown Old: Determinants of a Digital Divide among Seniors', *New media & society*, 18 (2016).

⁶⁸ Women and Equality Committee, 'Transgender Equality', (London: House of Commons, 2016).

⁶⁹ Walter Meyer III and others, 'The Harry Benjamin International Gender Dysphoria Association's Standards of Care for Gender Identity Disorders, Sixth Version', (2002), p. 17.

⁷⁰ Coleman and others.

⁷¹ Sam Dylan More, 'The Pregnant Man—an Oxymoron?', *Journal of Gender Studies*, 7 (1998), p. 325.

⁷² Coleman et al., p. 197.

irrelevant. While in many cases older trans men have campaigned for such reforms, there may also be elements of identity challenge and disenfranchised grief for those who were told that they had to accept particular medical interventions, express their identity in particular ways, and forego having their own children, only to see those options opening up for younger trans people.

Community changes in language, identity, technology and experience may also make it harder for older trans men to re-enter trans communities if they do at some point need support, perhaps related to issues around ageing and health. Former sources of support may have disappeared. Terminology that was commonplace ten years ago—‘transsexual’, ‘FTM’ (short for ‘female to male’), references to ‘biological’ or ‘genetic’ sex—may today be perceived as at best dated, at worst offensive.⁷³ Such changes can tend to limit intergenerational conversation, result in different cohorts organising around different terms and concepts, and genuine misunderstandings over language can potentially escalate to an extent where individuals may feel unwelcome in a space. Experiences that were definitive for older trans men may not resonate with younger or more recently transitioned populations. From young people’s perspectives, the absence of older trans men may mean a lack of intergenerational connection and little sense of futurity. Despite growing media representation of trans people, it is likely to remain difficult for a trans boy or young man to get a sense of what their life might be like at fifty, sixty, seventy and beyond.

Conclusion

This is a paper that points more to absence and challenges rather than offering concrete solutions. It has focused upon intersections between gender and age for trans men, and in doing so has not addressed other trans identities, nor addressed in depth other important points of intersectional experience such as social class, ethnicity, disability and faith. Dynamics of identity, visibility and community are complex, and addressing ageing requires recognition of change over time. Trans communities are continuing to evolve, and it is unclear what the end point of such evolution might be. Perhaps in the future younger trans men will decide to remain more visible, and perhaps society will see them better.

At present, however, it remains the case that older trans men are often not visible, either within society more broadly, or within community spaces. This has implications, both for directly practical issues such as planning later-life services, but also for more conceptual questions of intergenerational community and a sense of the future within trans masculine spaces. It is not my intention here to insist upon either visibility or invisibility as a moral imperative. There are a wide range of individual and contextual factors involved in experiences and decisions around being visible, not least of which is safety. Nonetheless, there is a benefit to creating spaces, communities and representation where trans men can be seen, and where we can see our futures across full and diverse lifecourses. New technologies and community-led content provide exciting

⁷³ Serano, pp. 23-30; GLAAD, ‘Glaad Media Reference Guide’, (New York: GLAAD, 2015).

opportunities for trans people to create their own, more diverse forms of representation, but there is a need to critically consider the extent to which the pace of change may simultaneously tend to destabilise intergenerational links. Within public services and academia, there is a need to engage with ageing trans communities to gain a sense of identity and experience throughout the lifecourse, and how this may affect social participation, service access and experiences of ageing. Doing so also potentially offers the opportunity to develop new theoretical models that provide a deeper understanding of the dynamic and contextual links between age and gender within society as a whole.

Works Cited

- Amin, Kadji 'Temporality', *TSQ: Transgender Studies Quarterly*, 1 (2014), 219-22
<https://doi.org/10.1215/23289252-2400073>
- Asscheman, Henk, Erik J. Giltay, Jos A. Megens, W. Pim de Ronde, Mick A. van Trotsenburg, and Louis J. Gooren, 'A Long-Term Follow-up Study of Mortality in Transsexuals Receiving Treatment with Cross-Sex Hormones', *European Journal of Endocrinology*, 164 (2011), 635-42
<https://doi.org/10.1530/eje-10-1038> PMID:21266549
- Anderson, Monica, and Jingjing Jiang, *Teens, Social Media & Technology 2018*, (Washington, DC: Pew Internet & American Life Project., 2018)
- Bailey, Louis, 'Trans Ageing', in *Lesbian, Gay, Bisexual and Transgender Ageing: Biographical Approaches for Inclusive Care and Support*, ed. by Richard Ward, Ian Rivers and Mike Sutherland (2012), pp. 51-66
- Bettche, Talia Mae, 'Trapped in the Wrong Theory: Rethinking Trans Oppression and Resistance', *Signs*, 39 (2014), 383-406 <https://doi.org/10.1086/673088>
- Bouman, Walter Pierre, Laurence Claes, Ellen Marshall, Gill T Pinner, Julia Longworth, Victoria Maddox, Gemma Witcomb, Susana Jimenez-Murcia, Fernando Fernandez-Aranda, and Jon Arcelus, 'Sociodemographic Variables, Clinical Features, and the Role of Preassessment Cross-Sex Hormones in Older Trans People', *The Journal of Sexual Medicine*, 13 (2016), 711-19 <https://doi.org/10.1016/j.jsxm.2016.01.009> PMID:26897462
- Buchanan, Katie, *Make Me a Man*, (London: RDF for Channel Four, 2002)
- Burns, Christine, 'Is There Anyone Else Like Me?', in *Trans Britain: Our Journey from the Shadows*, ed. by Christine Burns (London: Unbound, 2018), pp. 23-38.
- Butler, Judith, *Undoing Gender* (New York: Routledge, 2004)
<https://doi.org/10.4324/9780203499627>
- Calasanti, Toni, 'Bodacious Berry, Potency Wood and the Aging Monster: Gender and Age Relations in Anti-Aging Ads', *Social Forces*, 86 (2007), 335-55 <https://doi.org/10.1353/sof.2007.0091>
- Califia, Patrick, *Sex Changes: The Politics of Transgenderism* (San Francisco: Cleis Press, 1997)
- Campbell, Ruth, *Trans Temporalities* (Edinburgh: Edinburgh University Press, 2017)
<https://eupublishingblog.com/2017/04/27/trans-temporalities/> [Accessed 20 August 2018]
- Colebunders, Britt, Salvatore D'Arpa, Steven Weijers, Nicolaas Lumen, Piet Hoebeke, and Stan Monstrey, 'Female-to-Male Gender Reassignment Surgery', in *Principles of Transgender Medicine and Surgery*, ed. by Randi Ettner, Stan Monstrey and Eli Coleman (2016), pp. 279-317
- Coleman, Eli, Walter Bockting, Marsha Botzer, Peggy Cohen-Kettenis, Griet DeCuypere, Jamie Feldman, Lin Fraser, Jamison Green, Gail Knudson, Walter J. Meyer, Stan Monstrey, Richard K. Adler, George R. Brown, Aaron H. Devor, Randall Ehrbar, Randi Ettner, Evan Eyler, Robert

- Garofalo, Dan H. Karasic, Arlene I. Lev, Gal Mayer, Heino Meyer-Bahlburg, Blaine P. Hall, Friedmann Pfaefflin, Katherine Rachlin, Beatrice Robinson, Loren S. Schechter, Vin Tangpricha, Mick van Trotsenburg, Anne Vitale, Sam Winter, Stephen Whittle, Kevin R. Wylie, and Kenneth Zucker, 'Standards of Care for the Health of Transsexual, Transgender, and Gender-Nonconforming People, Version 7', *International Journal of Transgenderism*, 13 (2012), 165-232 <https://doi-org.abc.cardiff.ac.uk/10.1080/15532739.2011.700873>
<https://doi.org/10.1080/15532739.2011.700873>
- Collin, Lindsay, Michael Goodman, and Vin Tangpricha, 'Worldwide Prevalence of Transgender and Gender Non-Conformity', in *Principles of Transgender Medicine and Surgery*, ed. by Randi Ettner, Stan Monstrey and Eli Coleman (New York: Routledge, 2016), pp. 30-49
<https://doi.org/10.4324/9781315718972-11>
- Commission for Social Care Inspectorate, *Putting People First: Equality and Diversity Matters 1. Providing Appropriate Services for Lesbian, Gay, Bisexual and Transgender People* (London: Commission for Social Care Inspectorate, 2008)
- Crown Prosecution Service, *Rape and Sexual Offences - Chapter 3: Consent*, (London: Crown Prosecution Service, 2017)
- Davidson, Kate, "‘Why Can't a Man Be More Like a Woman?’: Marital Status and Social Networking of Older Men", *Journal of Men's Studies*, 13 (2004), 25-43 <https://doi.org/10.3149jms.1301.25>
- Davies, Russell, T., *Banana*, (Manchester: Red Production Company, 2015)
- Elder, Glen H., 'Time, Human Agency, and Social Change: Perspectives on the Life Course', *Social Psychology Quarterly* (1994), 4-15 <https://psycnet.apa.org/doi/10.2307/2786971>
<https://doi.org/10.2307/2786971>
- Ellis, Sonja J., Jay McNeil, and Louis Bailey, 'Gender, Stage of Transition and Situational Avoidance: A Uk Study of Trans People's Experiences', *Sexual and Relationship Therapy* (2014), 1-14 <https://doi.org/10.1080/14681994.2014.902925>
- Fabbre, Vanessa D, 'Gender Transitions in Later Life: A Queer Perspective on Successful Aging', *The Gerontologist*, 55 (2014), 144-53 <https://doi.org/10.1093/geront/gnu079>
 PMid:25161264 PMCID:PMC4542896
- Friemel, Thomas N., 'The Digital Divide Has Grown Old: Determinants of a Digital Divide among Seniors', *New Media & Society*, 18 (2016), 313-31 <https://doi.org/10.1177/1461444814538648>
- GIRES, *Guidance for GPs, Other Clinicians and Health Professionals on the Care of Gender Variant People* (London: Department of Health, 2008)
- , 'Tranzwiki', (Ashtead, Surrey: GIRES, n.d.) <<https://www.tranzwiki.net/>> [Accessed 18/01/2019.]
- GLAAD, *Glaad Media Reference Guide*, (New York: GLAAD, 2015)
 <<https://www.glaad.org/reference/transgender>> [Accessed 3 October 2018.]
- Goffman, Erving, *Stigma: Notes on the Management of Spoiled Identity* (London: Penguin Books, 1963)

- Gott, Merryn, *Sexuality, Sexual Health and Ageing* (Buckingham: Open University Press, 2005)
- Green, Jamison, 'Look! No, Don't! The Visibility Dilemma for Transsexual Men.', in *The Transgender Studies Reader*, ed. by Susan Stryker and Stephen Whittle (New York: Routledge., 2006)
- Hale, C. Jacob, 'Consuming the Living, Dis (Re) Membering the Dead in the Butch/Ftm Borderlands', *GLQ-NEW YORK*, 4 (1998), 311-48 <https://doi.org/10.1215/10642684-4-2-311>
- Hartley-Parkinson, Richard, 'Trans Man with No Penis Is Jailed for Tricking Women with Unknown Object During Sex', *Metro*, 5 September 2018
- Heinz, Matthew, *Entering Transmasculinity: The Inevitability of Discourse* (Bristol, UK: Intellect, 2016)
- Hennen, Peter, 'Bear Bodies, Bear Masculinity: Recuperation, Resistance, or Retreat?', *Gender & Society*, 19 (2005), 25-43 <https://doi.org/10.11770891243204269408>
- Hines, Sally, 'Transgendering Care: Practices of Care within Transgender Communities', *Critical Social Policy*, 27 (2007), 462-86 <https://doi.org/10.11770261018307081808>
- 'HMA v Carlos Delacruz' (Judiciary of Scotland: Edinburgh Sheriff Court, 2018).
<<http://www.scotland-judiciary.org.uk/8/2047/HMA-v-Carlos-Delacruz>> [Accessed 22 January 2018]
- Johnson, Paul, 'Ordinary Folk and Cottaging: Law, Morality, and Public Sex', *Journal of Law & Society*, 34 (2007), 520-43 <https://doi.org/10.1111/j.1467-6478.2007.00403.x>
- Katz, Stephen, *Disciplining Old Age: The Formation of Gerontological Knowledge* (Charlottesville: University Press of Virginia, 1996)
- Kennedy, Pagan, *The First Man-Made Man: The Story of Two Sex Changes, One Love Affair, and a Twentieth-Century Medical Revolution* (Bloomsbury Publishing USA, 2008)
- Kerrigan, Elliot, *Boy Meets Girl* (London: Endemol UK, 2015)
- Kohan, Jenji, *Orange is the New Black* (Santa Monica, California: Lionsgate Television, 2014)
- Manley, Eric, Heidi Levitt, and Chad Mosher, 'Understanding the Bear Movement in Gay Male Culture: Redefining Masculinity', *Journal of Homosexuality*, 53 (2007), 89-112
<https://doi.org/10.1080/00918360802103365> PMID:18689193
- McLaughlin, Deirdre, Dimitrios Vagenas, Nancy A. Pachana, Nelufa Begum, and Annette Dobson, 'Gender Differences in Social Network Size and Satisfaction in Adults in Their 70s', *Journal of Health Psychology*, 15 (2010), 671-9 <https://doi.org/10.11771359105310368177>
PMid:20603290
- Meyer III, Walter, Walter O. Bockting, Peggy Cohen-Kettenis, Eli Coleman, Domenico DiCeglie, Holly Devor, Louis Gooren, J. Joris Hage, Sheila Kirk, Bram Kuiper, Donald Laub, Anne Lawrence, Yvon Menard, Stan Monstrey, Jude Patton, Leah Schaefer, Alice Webb, and Connie Christine Wheeler, 'The Harry Benjamin International Gender Dysphoria Association's Standards of Care for Gender Identity Disorders, Sixth Version', *Journal of Psychology and Human Sexuality*, 13 (2002) https://doi.org/10.1300/J056v13n01_01

- More, Sam Dylan, 'The Pregnant Man—an Oxymoron?', *Journal of Gender Studies*, 7 (1998), 319-28 <https://doi.org/10.1080/09589236.1998.9960725>
- Oliffe, John L., Brian Rasmussen, Joan L. Bottorff, Mary T. Kelly, Paul M. Galdas, Alison Phinney, and John S. Ogrodniczuk, 'Masculinities, Work, and Retirement among Older Men Who Experience Depression', *Qualitative Health Research*, 23 (2013), 1626-37 <https://doi.org/10.1177/1049732313509408> PMID:24177678
- Pearce, Ruth, *Understanding Trans Health: Discourse, Power and Possibility* (Bristol: Policy Press, 2018) <https://doi.org/10.1332/policypress/9781447342335.001.0001>
- Peirce, Kimberly, *Boys Don't Cry*, (Los Angeles: Twentieth Century Fox Home Entertainment, 1999)
- Price, Elizabeth, 'Caring for Mum and Dad: Lesbian Women Negotiating Family and Navigating Care', *British Journal of Social Work*, 41 (2011), 1288-303 <https://doi.org/10.1093/bjsw/bcr015>
- Pritchard, Annette, Nigel Morgan, and Diane Sedgley, 'In Search of Lesbian Space? The Experience of Manchester's Gay Village', *Leisure Studies*, 21 (2002), 105-23 <https://doi.org/10.1080/02614360110121551>
- Prosser, Jay, *Second Skins: The Body Narratives of Transsexuality* (New York: Columbia University Press, 1998)
- 'R. V McNally', (England and Wales Court of Appeal (Criminal Division), 2013)
- Santos, Ana Cristina, 'Are We There Yet? Queer Sexual Encounters, Legal Recognition and Homonormativity', *Journal of Gender Studies*, 22 (2013), 54-64 <https://doi.org/10.1080/09589236.2012.745682>
- Rundall, Em, and Vincent Vecchietti, 'Visibility in the Workplace', in *Transgender Identities: Towards a Social Analysis of Gender Diversity*, ed. by Sally Hines and Tam Sanger (2010), pp. 127-52
- Serano, Julia, *Whipping Girl: A Transsexual Woman on Sexism and the Scapegoating of Femininity* (California: Seal Press, 2007)
- Sharpe, Alex, 'Expanding Liability for Sexual Fraud through the Concept of 'Active Deception' a Flawed Approach', *The Journal of Criminal Law*, 80 (2016), 28-44 <https://doi.org/10.1177/0022018315623674>
- Siverskog, Anna, 'Ageing Bodies That Matter: Age, Gender and Embodiment in Older Transgender People's Life Stories', *NORA-Nordic Journal of Feminist and Gender Research* (2015), 1-16 <https://doi.org/10.1080/08038740.2014.979869>
- Slevin, Kathleen F., '"If I Had Lots of Money...I'd Have a Body Makeover:" Managing the Aging Body', *Social Forces*, 88 (2010), 1003-20 <https://doi.org/10.1353/sof.0.0302>
- Slevin, Kathleen F., and Thomas J. Linneman, 'Old Gay Men's Bodies and Masculinities', *Men and Masculinities*. 12 (2009), 483-507 <https://doi.org/10.1177/1097184X08325225>

- Stone, Sandy, 'The Empire Strikes Back: A Posttranssexual Manifesto', in *Body Guards: The Cultural Politics of Gender Ambiguity*, ed. by Julia Epstein and Kristina Straub (New York: Routledge, 1991)
- Toze, Michael, 'Developing a Critical Trans Gerontology', *The British Journal of Sociology*, 70.4 (2019), 1490-1509 <https://doi.org/10.1111/1468-4446.12491> PMID:30298610
- Watkins, Elizabeth Siegel, 'Testosterone and the Pharmaceuticalization of Male Aging', in *Aging Men, Masculinities and Modern Medicine*, ed. by Antje Kampf, Barbara L. Marshall and Alan Petersen (London, UK: Routledge, 2012)
- Witten, Tarynn M., 'Graceful Exits: Intersection of Aging, Transgender Identities, and the Family/Community', *Journal of GLBT Family Studies*, 5 (2009), 35-61 <https://doi.org/10.1080/15504280802595378>
- 'Life Course Analysis—the Courage to Search for Something More', *Journal of Human Behavior in the Social Environment*, 8 (2004), 189-224 https://doi.org/10.1300/J137v08n02_12
- Witten, Tarynn M., and A. Evan Eyler, 'Care of Aging Transgender and Gender Non-Conforming Patients', in *Principles of Transgender Medicine and Surgery*, ed. by Randi Ettner, Stan Monstrey and Eli Coleman (New York: Routledge, 2016)
- Witten, Tarynn M. and Stephen Whittle, 'Transpanthers: The Greying of Transgender and the Law', *Deakin Law Review*, 9 (2004), 503-22 <https://doi.org/10.21153/dlr2004vol9no2art253>
- Women and Equality Committee, *Transgender Equality*, (London: House of Commons, 2016)