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Age and Embodied Masculinities: Mid-Life Gay and Heterosexual Men Talk about their Bodies

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Abstract

This article integrates critical gerontology and masculinities theories to examine how midlife gay and heterosexual men experience their bodies in relation to cultural discourses of aging. Analyses of in-depth interviews with 15 gay and 15 heterosexual men ages 40–60 reveal that while both groups of men describe their bodies as deteriorating or declining in terms of functionality and are often distressed by these changes, midlife gay men also articulate a concern with a perceived decline in bodily appearance. Both gay and heterosexual midlife men frame their bodies as fundamentally different from women's, possibly in an attempt to protect a masculine identity in response to the threat that aging bodies pose to that identity. We argue that midlife men's embodied experiences are shaped by a discourse of midlife decline as well as inequalities between gay and heterosexual men. We also discuss the implications of embodiment for midlife men's well-being.

Keywords

Aging; Bodies; Gender; Masculinities; Midlife; Sexuality; Sexual Orientation

Bodily functioning and appearance have become increasingly important for individual identity and social and moral worth in Western societies (Calasanti & Slevin, 2001; Giddens, 1991; Shilling, 2012; Turner, 1996). At the same time, ageism has emerged as an embodied form of oppression (Calasanti & Slevin, 2006; Laws, 1995): Western culture worships youthfulness and youthful bodies (Calasanti & Slevin, 2006), frames both mid and later life bodies as characterized by decline in terms of youthful energy, vitality, virility and physical attractiveness (Gullette, 1998; Marshall & Katz, 2002), and emphasizes that individuals have a personal, moral responsibility to prevent physical decline (in terms of health, functionality, and appearance) (Gott, 2005; Hurd Clarke, Griffin, & The PACC Research Team, 2008; Katz & Marshall, 2003). In this context, midlife individuals' experiences of their bodies have important implications for mental and physical well-being. For example, midlife adults may experience psychological distress if they believe that their bodies do not meet cultural ideals (McLaren & Kuh, 2004) or they may physically push their bodies beyond reasonable limits in order to avoid feeling "middle-aged," as Slevin (2010) found in a study of later life men (men age 60 and older). Embodied experiences may also affect intimate relationships. Recent research suggests that heterosexual, married midlife

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individuals experience distress over bodily changes that can undermine their sexual relationships and that this sometimes causes marital conflict and misunderstanding (Lodge & Umberson, 2012). In turn, numerous studies demonstrate that marital strain contributes to both psychological distress and poorer physical health (Proulx, Helms, & Buehler, 2007; Umberson, Williams, Powers, Liu, & Needham, 2006). Taken together, these findings point to the importance of increasing our understanding of how diverse social groups experience their bodies at midlife.

Few empirical studies, however, have examined how individuals experience their aging bodies (Calasanti & Slevin, 2001; 2006; Twigg, 2000). It is not clear how cultural discourses, such as an “ideology of midlife decline,” (Gullette, 1998) actually shape midlife individuals’ lived experiences of their bodies, nor is it clear if or how this may differ across social groups. The concept of “age relations” (Calasanti, 2003) highlights the fact that age intersects with other social statuses, such as gender, sexual orientation, and race/ethnicity to shape not only individuals and groups’ access to power and resources but also their experiences of embodiment (Calasanti & Slevin, 2001; Gill, Henwood, & McLean, 2005; Lodge & Umberson, 2012; Slevin, 2010). Embodiment refers to “conscious lived experiences of the body” (i.e., how individuals feel, think, and talk about their bodies) (Komesaroff, 1995, p. 235). Thus, in this article we draw on theoretical insights from critical gerontology and masculinities theory to examine how cultural discourses of aging (specifically, an ideology of midlife decline) shape midlife men’s experiences of embodiment in ways that are similar and/or different for heterosexual and gay midlife men. Embodiment experiences may be particularly distressing for aging men (Twigg, 2004), given that cultural ideals of masculinity emphasize the importance of bodily control, independence, and mastery (Loe, 2004; Messner, 2002). Gerontologists, however, have rarely grappled with how cultural ideals of masculinity or inequalities between men shape men’s experiences of aging (Calasanti, 2004b; Calasanti & King, 2005; van den Hoonaard, 2007). At the same time, the masculinities literature has largely ignored the issue of age (Calasanti, 2004a; Slevin & Linneman, 2010), due in part from a failure to theorize masculinity across the life span or across time (Spector-Mersel, 2006).

We address these gaps in our understanding of embodied experiences of aging and masculinity with an analysis of in-depth interviews with a primarily white, middle-class sample of 30 gay and heterosexual men ages 40–60 to ask: 1) How do relatively privileged men experience embodiment at midlife? Particularly, how do they experience their bodies in relation to cultural discourses of aging? 2) (How) Do midlife men’s embodied experiences differ by sexual orientation? Examining these questions with a group of relatively privileged respondents can reveal how discourses of aging shape the embodied experiences of individuals who are more likely to have social and economic resources with which to mitigate the most distressing effects of these experiences. At the same time, comparing the experiences of gay and heterosexual men can provide insight into the factors that contribute to sexual orientation-based disparities in health and well-being, a critical and understudied area of research (Institute of Medicine, 2011).

THEORETICAL FRAMEWORK

The Midlife Body

By 21st century Western standards, midlife is typically defined as the period of the life course that lasts from the late 30s to late 50s (Wray, 2007). While a great deal of empirical social science has examined middle-aged adults’ experiences, midlife, *as a distinct and socially constructed period of life*, has largely been ignored within both sociology and gerontology (Wray, 2007). Midlife, however, like all life cycle stages, is socially constructed and carries culturally specific meanings (Andrews, 1999; Shweder, 1998). Midlife emerged

as a distinct period of life in the early 20th century as advancements in medicine lengthened average life expectancy and practices of age-grading emerged in compulsory education, the workplace, and in sexological and psychoanalytic theories (Gullette, 1998). Gullette argues that midlife, since its emergence in the early 20th century in England and the United States, has been defined in relation to an ideology of decline: In Euro-American culture, midlife is largely anticipated and experienced as a time of loss — particularly a loss of youthful beauty, energy, and sexual prowess (1998). For example, in the early 20th century the notion of a male climacteric (now more commonly known as andropause) emerged, which emphasizes that men lose their sexual desire, sensation, and strength around the age of 45 and leaves many midlife men with feelings of profound loss, anxiety, and self-doubt (Gullette, 1998; Spector-Mersel, 2006). As a result of these cultural changes in the early 20th century, a gerontocracy was replaced by an “ideology of midlife decline,” whereby young men became more culturally valued and esteemed than middle-aged and old¹ men (Gullette, 1998). Thus, we are “aged by culture” (Gullette, 1998), in that individuals’ experiences of aging and their aging bodies are culturally mediated (Twigg, 2004). Cultural meanings surrounding age and aging bodies are key to understanding how midlife individuals perceive and experience their bodies (Lodge & Umberson, 2012; Winterich 2003; Wray, 2007), but because the majority of previous work on embodiment in midlife is theoretical, it is not clear how cultural discourses of aging may shape midlife men’s lived experiences of their bodies or how it may do so in different ways for different groups of men.

The concept of age relations (Calasanti, 2003) highlights, and previous research suggests, that the ways in which individuals experience their aging bodies are also shaped by other social statuses (Calasanti & Slevin 2001; Carpenter, Nathanson, & Kim, 2006; Lodge & Umberson, 2012; Slevin, 2010; Wray 2007). For example, Lodge & Umberson (2012) found that while women are distressed by appearance-related changes in midlife, men are more likely to be distressed by perceived declines in the functionality of their bodies — particularly declines related to erectile functionality. This suggests that midlife men’s embodied experiences are likely shaped not only by cultural discourses of aging but also by the fact that they are *men*. For example, as we discuss below, because Western ideals of masculinity rely on notions of independence, control and functionality — including bodily independence, control and functionality — it may be that midlife men’s embodied experiences are distressing not only because they run counter to a culturally idealized and defined notion of youthfulness, but also to notions of masculinity.

Multiple Masculinities

Theoretical work on masculinities emphasizes that all men position and understand themselves in relation to a hegemonic masculinity, which stands as the “currently most honored way of being a man” (Connell & Messerschmidt, 2005, p. 832). In contemporary Western societies, hegemonic masculinity consists of several key characteristics, including heterosexual virility, economic success, control, independence, assertiveness, and rationality (Wood, 2000). Bodily control, independence, and functionality (i.e., the ability to engage in athletic, physical, and/or sexual tasks) may be especially important to the cultural ideal of masculinity and can be expressed in a variety of ways, for example, through sexual virility (Loe, 2004), sports (Messner, 2002), health practices (Courtenay, 2000), and violence and aggression. Indeed, bodily control, independence, and functionality may be regarded as a form “gender capital” which affords men access to a masculine identity (Bridges, 2008). However, because midlife is culturally defined as a time when bodies begin to decline in functionality beyond individuals’ control — at least without consumerist interventions —

¹We use the term “old” not in a derogatory sense, but rather in keeping in line with current literature that argues that the usage of “older” is itself ageist, reflecting a culture that denigrates and finds no value in the “old.” See for example Slevin (2010).

(Gullette, 1998; Katz & Marshall, 2003), midlife men may experience their bodies in negative ways and their masculine identity may suffer as a result. For example, the emergence of Viagra and other prescription drugs for “erectile dysfunction” may be regarded as a technological “fix” for men who fear, or who have experienced, a loss of sexual functionality or virility — and by extension their masculinity (Loe, 2004). Alternatively, midlife men may turn to non-bodily ways of demonstrating their masculinity. For example, some previous research suggests that old men engage in discursive strategies to emphasize their sexual prowess and superiority over women (Meadows & Davidson, 2006; van den Hoonaard, 2009). For example, the widowers that van den Hoonaard (2009) interviewed made frequent references to the sexual attention they received from women, referred to themselves as “bachelors,” and emphasized that old women are unattractive.

A critical insight in masculinities theory is that men practice masculinity in multiple ways, and that these masculinity performances reflect inequalities between men based on key social statuses (e.g., sexual orientation, race) (Connell & Messerschmidt, 2005) — which have been termed “internal hegemonies” (Demetriou, 2001). It is therefore likely that embodied experiences differ for midlife gay and heterosexual men. Previous research on late life men lends support for this supposition. For example, Slevin (2010) found that gay and heterosexual men experienced old age in different ways: While old gay men shared with women the fear of looking old, old heterosexual men feared the loss of bodily functionality. Given that the culturally ideal form of masculinity is predicated on heterosexuality (Connell, 1995) and that gay masculinity stands as the “repository of whatever is symbolically expelled from hegemonic masculinity,” (Connell, 1995, p.78) it is not surprising that old gay men share with old women the fear of loss of physical attractiveness. Aging may be more problematic for women and gay men given that both groups share a form of oppression where their appearance is of particular importance for their social and cultural value (Jones & Pugh, 2005). Moreover, some scholars have argued that gay men experience “accelerated aging,” in that they are deemed older at younger ages than heterosexual men (Jones & Pugh, 2005; Slevin & Linneman, 2010), which may stem from a “local” hegemonic ideal (Connell & Messerschmidt, 2005) within the gay community that places particular importance on a youthful and physically fit appearance (Slevin & Linneman, 2010). In summary, previous empirical and theoretical work provide reasons to expect that midlife men will experience their bodies in relation to cultural discourses of aging (i.e., a discourse of decline) and that their embodied experiences will be further shaped by 1) the fact that they are men and 2) inequalities between men based on sexual orientation.

DATA AND METHOD

For the current study, we analyzed 30 in-depth interviews with gay and heterosexual men ages 40–60. These men are from a larger sample of men and women in long-term relationships who participated in a study designed to examine how multiple dimensions of intimate relationships change over the course of those unions and if (and how) these processes differ for heterosexual, gay, and lesbian couples. We conducted interviews for this study between 2003 and 2006 and the interviews included questions related to aging, physical and mental health, and relationship dynamics. Although we designed these interviews to address relationship dynamics over the life course, these life course narratives also included discussions of aging and effects on relationships. These discussions of aging yielded detailed information on how respondents perceived and experienced their aging bodies, and how these experiences influenced their relationships. Data for the current project most often emerged in the context of discussions around changes in emotional and sexual intimacy over the course of respondents’ intimate relationships — and, in particular, changes stemming from aging and fluctuations in physical health. We recruited respondents through participation in local gay pride events, snowball sampling methods, flyers, email

Listserve, a newspaper advertisement, and a newspaper article that featured the second author's previous research. We conducted interviews—which lasted between one and two hours—either in respondents' homes or in campus offices. Interviews were recorded, and then later transcribed and analyzed. We have assigned pseudonyms to all respondents to maintain confidentiality.

A team of female researchers, trained in qualitative methods, conducted all of the interviews. Gender incongruence between the interviewers and interviewees may be considered both advantageous and disadvantageous. Some research suggests that within the in-depth interview context, male respondents are more direct with male interviewers (particularly in relation to issues related to gender) than they are with female interviewers (Williams & Heikes, 1993), although other research suggests that men reveal more about their emotions and feelings about sensitive topics with female interviewers (Arendell, 1997). Other studies suggest that men who are interviewed by women often engage in demonstrations of masculinity in an attempt to gain control of the interview and that these demonstrations of masculinity are themselves interesting and worthy of analysis (Schwalbe & Wolkomir, 2001; van den Hoonaard, 2009). As we discuss in more depth in the discussion section, some of our results may be, in part, a function of respondents engaging in displays or demonstrations of masculinity.

Our analytic sample consists of 15 gay men and 15 heterosexual men ages 40–60. All men in this sample were in committed, long-term relationships, defined as lasting seven years or longer. All heterosexual men were married at the time of the interviews while all gay men were in long-term, cohabiting relationships. Our analytic sample reflects the larger sample of respondents in that most respondents were White and middle- to upper, middle-class. This is typical of in-depth interview studies given that privilege affords more affluent individuals greater autonomy and freedom over their schedules (Cannon, Higginbotham, & Leung, 1988). In the discussion section, we discuss how having an almost exclusively White and middle-class sample may have impacted our findings.

In analyzing respondents' experiences of their bodies, we adopted a view of “narrative constructionism,” (Sparkes & Smith, 2008) in that we conceive of respondents' narratives of their bodies as a means not only to construct their identities, but also as arising out of the broader social context and thus, as socially constructed (Sparkes & Smith, 2008; Phoenix & Sparkes, 2008). Therefore, we analyzed respondents' narratives of their bodies and identified themes in relation to larger cultural systems of meaning surrounding aging, midlife and masculinity.

RESULTS

Several themes related to aging, bodies, and masculinity recurred throughout the interviews. First, both gay and heterosexual men commonly described their bodies as deteriorating or declining in terms of *functionality*—or the ability to engage in physical, bodily tasks, particularly in relation to the accomplishment of athletic and sexual pursuits—and some respondents experienced distress over these changes. Second, gay men often described their bodies as declining in terms of *appearance* and often found these changes to be distressing, whereas heterosexual men rarely referred to appearance. This suggests that sexual orientation shapes midlife men's experiences of embodied aging. Finally, both midlife gay and heterosexual men, despite their focus on bodily decline, often described their own and/or other men's bodies as fundamentally different from women's bodies, particularly in terms of sexual desire and behavior.

(Dys)Functional Bodies

Several gay and heterosexual respondents described a reduction in their body's ability to "do" or achieve certain physical feats, particularly in terms of the ability to achieve the same level of athleticism or to achieve and maintain an erection — and this often resulted in distress. For example, Robert (age 51, heterosexual) described his declining athleticism in response to a question about the importance of marital sex:

I was always very athletic and always playing on teams... and when you get older, you just can't...you just don't have the time and physically you can't do it as well... And now that I am almost 52 and I don't play on any teams and all I do is work, and [my wife] and I don't get much time together, sex has become a bigger deal than it ever was... I don't know ... psychologically if it is because if I have more sex then I will feel better about myself ... because it is physical, as well as emotional. But since I am not doing all these other physical things, it is almost like it [sex] has become more of a focus than it used to be.

Similarly, Joe (age 55, heterosexual) framed his aging body as less functional or responsive than when he was younger: "Until you are 45 you just think your body is going to be as receptive as it always is, but when that starts happening [aging], you just go, 'Oh.' You have got to start working harder at just staying even and not go backwards." The year previous to the interview Joe underwent foot surgery, which he described as:

Very humbling for me in that I had to use ...well I used a walker for about a week and then I used crutches for about a week and a cane for several weeks, because I had both feet operated on at the same time. I am real active, so that's very humbling to me.

Midlife men also described bodily decline in terms of their ability to achieve and sustain erections and these changes were often distressing. In fact, for gay and heterosexual men, sex was the primary domain in which bodily-based decline and distress over these changes were experienced. Edwin (age 49, gay), for example, described experiencing a reduction in sexual desire and performance:

I found out I had high blood pressure. So [I] started treating it... At first, it was going okay until we added the second medication. I thought, well, my sexual performance and my desire, my libido, seem to be changing. I found out that the medication ... was a major, major culprit for sexual performance. So ... finally, talking with my doctor...I told him... "We've got to change this...I'm having a hard time now."

For Hal (age 50, heterosexual), illness led to a turning point in embodiment. Hal described the distress he experienced as a result of declining physical and sexual functioning — distress that went beyond the distress stemming from an illness experience:

When I was hit with the cancer it brought into question a lot of things about my sense of worthiness in a relationship, and how I was going to be as a partner, sexual and otherwise, after all these surgeries and treatments. So that is a big part of the dip [in mental health. It] was not just my physical functioning and my sexual functioning and my bowel functioning for that matter, because to some extent, I still had functioning, good enough, as it were. But I think my own self-image was challenged by all of that.

Spencer (50, gay) also worried about a decline in sexual functioning with age.

When asked about how aging might affect his sexual relationship with his partner, Spencer said:

I think getting older, from what I know now, and I just turned 50 last week... it's like...it gets better to this point. But there's an inverse curve... with functionality... over time... even though some things are getting more experienced, other things, don't necessarily cooperate.

Although Spencer's personal experience of sexual functioning did not yet align with a discourse of decline, he drew on this discourse in anticipating, and worrying over, the near future.

(Un)Attractive Bodies

A second recurring theme in the analysis was that gay men in this sample often perceived their bodies as declining in appearance and were often distressed by these changes. This was not a predominant theme in interviews with straight men. Terry (age 48, gay), for example, discussed how aging has led to an increase in both his own as well as his partner's appearance-based insecurities:

We are getting older. And you always think about...oh I am not as attractive to him anymore...we will always tell each other, "Oh, you look great. You are beautiful." I always say stuff like that to him, because he is down on himself a lot more than I am, about what he looks like. About what his body image is...to me, he has always been beautiful. We both have aged. I am not 30 and he is not 26 anymore. But I think the fact that we are both...relatively...for our age, athletic has helped with that. Especially since we are gay, you have this real body image problem because you are bombarded with these images.

While both gay and heterosexual men in the sample described concerns about their bodies' functionality in the context of sex, gay men also voiced concerns over their bodies' *appearance* in the context of sex. These concerns were frequently experienced as distressing and often affected respondents' relationships. For example, Stokes (age 42, gay) discussed how both he and his partner, Noah (age 46, gay), experience sexual insecurities around their appearance:

I assume that getting older probably has... affected it [our sexual relationship]. I think Noah doesn't see himself as being very attractive because of gaining some weight. So I think that's partly tied up to some extent in the lack of his sexual interest now. I asked him if, when we've had sex, if he thought it was okay, and he said it was good, that he enjoyed it. Because I thought maybe he wasn't interested in having sex with me... because I've aged too... and I look a little different from when I did earlier, but he says that's not the case... I assume it's more having to do with sort of physical things and his own body image...that he's just...not really interested.

While Stokes noted that Noah's decreased interest in sex is tied to insecurity about his weight, Stokes also worried that Noah's lack of interest in sex is due to *his* appearance at midlife. And according to Stokes, this distress over bodily appearance has contributed to a decline in sexual frequency.

Spencer (age 50, gay) also experienced distress over changes in his appearance and described how this affects his sexual self-esteem, which in turn affects his sexual relationship:

You go through times of high [sexual] interest and times of low interest and almost non-existence. And I think some of those have been especially hard for me, because...I've had a roller coaster of weight issues. And when my weight's been really high, I feel particularly unattractive and my [sexual] interest is lower.

While Spencer attributed his bodily insecurity around sex to his weight, not age per se, Stokes made an implicit connection between age and weight by bringing up his partner's weight-based insecurities in the context of a discussion about how aging shaped his sex life with his partner, implicitly relying on a widespread cultural understanding that associates midlife with weight gain, captured by the term "middle-aged spread."

While several midlife gay men in this sample experienced bodily-based insecurities and distress over their physical appearance, not all midlife gay men viewed their bodies as unattractive — at least not yet. Stanley, (age 42, gay), discussed how while he believes that he and his partner are still attractive to other men, aging will eventually make them unattractive:

We can attract men very easily. We have often talked about and will joke about it a lot, "When are you not the pretty one anymore?" Because you know what? The day is coming. I keep saying, "Someday this is all heading south real fast." No one wants to get older. No one wants to no longer be the object of people's affections or anything like that, but it happens, and we know it's going to happen. What are you going to do?... Go to the surgeon a few times. You stall it as long as you can, and then you accept it.

Stanley is unique from many of the other gay men in this sample who viewed their midlife bodies as unattractive in that he positions both his own and his partner's body as (currently) physically attractive. However, he drew on a widespread cultural understanding that aging will eventually make them both unattractive.

Men Don't Quit

At the same time that many midlife men expressed distress over bodily changes, and despite the above-mentioned differences between gay and heterosexual men, both groups of men also defined their own and/or other men's bodily sexual needs and desires as fundamentally different from women's. For example, Spencer, (age 50, gay), who earlier noted that his sex drive is wrapped up with his self-esteem and also voiced concerns over the relationship between age and sexual functioning, relied on a discourse of hegemonic masculine sexuality as intense, lifelong, and fundamentally different from women's, when asked about how getting older will affect his sex life: "We're men...men don't quit [laughter]."

Michael (age 48, gay) also relied on essentialist discourses of gendered sexuality. When asked about affairs in his current relationship he noted that:

I think the dynamics of gay relationships can be quite different sexually than for straight relationships and...in my mind a lot of that has to do with the make-up of gender differences. I think that...pardon my French...men tend to go around pissing on trees, whereas women tend to be more of the nester types. I think men tend to get around more.

And have multiple sexual partners more than women do. And so, I think in gay relationships, especially among gay men, you run into that a lot more.

Interestingly, while Michael defined men and women as very different sexually, he did not see himself or his partner in this way:

I am not controlled by that sort of thing [sex] anymore. I don't know if that is called getting old, or what. But...I mean I still see people and find them attractive, but I don't pursue them like I might have at a much younger age.

For Michael, age provided an explanation for why his own sex life no longer matches a hegemonic understanding of male sexuality as strong and overpowering, which at least in

some ways he experienced as a relief: “If you are not doing it [sex], you are not going to catch anything. You don’t have to worry about the potential drama that can result from it.”

Similarly, when asked if he talks about sex with his partner, Terry (age 48, gay) also relied on a hegemonic understanding of male sexuality as strong, implicitly lifelong and not feminine: “We talk about it. I think being two men, I think men are pretty much horn dogs most of the time. So we talk about it a lot. Not a lot, but we talk about it.” Perhaps Terry relied on a hegemonic understanding of masculine sexuality to justify why he talks (although “not a lot”) about his sexual relationship with his partner — something that could potentially fall under the culturally defined feminine domain of communication.

Frank (age 53, heterosexual), had this to say when asked about the quality of his sex life with his wife: “I guess men, it is all...if you could satisfy yourself, you don’t care about the girl. I mean isn’t that men? I mean that is the way we are. We are two meals away from being an animal.” Although Frank acknowledged that he has learned that it is important to sexually satisfy his wife, he continues to draw on a hegemonic discourse of masculine sexuality as naturally strong, selfish, and needs-based.

DISCUSSION

Although previous theoretical work emphasizes that cultural discourses conceptualize midlife as a time of bodily decline (Gullette, 1998; Katz & Marshall, 2003), previous empirical research has not investigated how cultural understandings of aging may shape midlife men’s lived experiences of their bodies, or if and how the embodied experiences of midlife gay and heterosexual men differ. Results from in-depth interview data with 15 gay and 15 heterosexual midlife men reveal that men largely experience their bodies in relation to an “ideology of midlife decline,” (Gullette, 1998) whereby men conceptualize their midlife bodies as in a process of deterioration or decline. Our qualitative analysis suggests that the focus of this bodily decline differs at times, however, by sexual orientation. Whereas both heterosexual and gay men are concerned with physical changes related to functionality, gay men also frequently have concerns that they are less physically attractive at midlife than when they were younger. From a masculinities perspective, these differences between gay and heterosexual men may reflect internal hegemonies of masculinities. A concern over appearance is indicative of oppression (Jones & Pugh, 2005), whereby men are objects of the male gaze, rather than subjects exhibiting mastery and agency over their environment. Some scholars also argue that within the gay community a “local” hegemonic ideal (Connell & Messerschmidt, 2005) exists which places particular importance on a *youthful* and physically fit appearance (Slevin & Linneman, 2010). Taken together these findings suggest that another nexus of privilege for white, middle-class heterosexual men is that appearance-related concerns stemming from aging are not a central concern in midlife and that, unlike gay men who experience distress over changes in bodily appearance *and* in functionality, heterosexual men’s embodiment-related distress is largely related to changes in bodily functionality. Moreover, the finding that midlife gay men experience embodiment-related distress in multiple domains may help to explain, in part, sexual orientation-based disparities in well-being — a critical area of research (Institute of Medicine, 2011).

Midlife men’s embodied experiences may also reflect internal hegemonies of masculinities between young and not-young men. Hegemonic masculine ideals are predicated on youthful bodies that are able to obtain mastery and control over their environment (as entrenched in sexual intercourse, sports, and independence) (Loe, 2004; Messner, 2002; Wood, 2000). This ideal of bodily control, however, is at odds with midlife men’s lived experiences of their bodies as in a process of decline — which may contribute to distress. Although bodily decline in functionality may be distressing for both men and women, such a decline may be

uniquely distressing for men given masculine ideals of bodily control and mastery. As Twigg (2004) writes: “It may be that, although men suffer less from the cultural erosions of aging, the construction of masculinity, its emphasis on competitiveness and on public invulnerability, makes the exploration of decline and loss more problematic” (p. 62). Bodily changes that result from age, illness, or injury, may have the potential to upset men’s understanding of themselves as men. Although the data used in the current analysis do not allow us to assess the degree to which men’s distress over declines in bodily functionality is related to cultural ideals of masculinity per se, in separate analyses (see author citation, blinded for review) we compared the embodied experiences of midlife men and women and found that women were rarely distressed by changes in bodily *functioning* and focused primarily on changes in bodily *appearance*. Future research should examine the extent to which distress related to perceived decline in bodily functioning in midlife is a gendered phenomenon.

Despite internal hegemonies between men, our findings also illustrate how both midlife gay and heterosexual men draw upon an essentialist understanding of men’s bodily, sexual needs as strong, life-long, and selfish, although their personal experiences of sex often didn’t align with this understanding. There are several ways to interpret this finding. On the one hand, men may be drawing on a hegemonic understanding of (youthful) masculine sexuality in an attempt to flatten hierarchies between young and non-young and heterosexual and gay men to derive some of the benefits that accrue to men in a male-dominated society. Demetriou (2001) argues that internal hegemonies between men ultimately function to reproduce men’s dominance over women and that in relying on a hegemonic understanding of masculine sexuality, men ultimately work to reproduce ideologies that sustain male dominance. These midlife men may also be engaged in “distancing strategies” (Slevin & Linneman, 2010) from femininity, perhaps in response to a culturally mediated fear that aging leads to the de-masculinization of men (Spector-Mersel, 2006). Said otherwise, they may be engaged in attempts to protect and defend a masculine identity in response to the threat that aging bodies (and discussing those bodies) pose to that identity. This is similar to the strategies of some late life men in other studies, who attempt to approximate hegemonic masculine ideals by emphasizing their heterosexual prowess and superiority over women (Meadows & Davidson, 2006; van den Hoonaard, 2009). Furthermore, given that gay men are less privileged than heterosexual men and often share the appearance-related concerns of women, distancing themselves from femininity may be particularly important for gay men as they also experience age-related assaults to their masculine identities.

Our findings also call into question Gullette’s (1998) claim that all midlife adults experience their bodies in relation to a cultural emphasis on midlife decline. A few respondents did not believe that their bodies had yet been wrought by midlife decline, although did view bodily decline as imminent or inevitable. Thus, although this study provides some empirical support for the claim that midlife individuals experience their bodies in relation to an ideology of decline, it also suggests that individuals’ lived experiences of their bodies are complex and nuanced. Similarly, this research also illustrates the importance of an age relations framework (Calasanti, 2003), as midlife individuals experience their bodies in ways that are shaped by other factors in addition to age. For example, results suggest that men are often able to draw on masculine privilege to assert their superiority over women, despite experiencing their bodies in relation to a cultural discourse of decline. Further, from an age relations perspective (Calasanti, 2003) and in light of research which suggests that bodily-based performances of masculinity are particularly important for men who lack social, economic, and political power (Courtenay, 2000), men who have race and class privilege (as do those in the current sample) may be able to draw on social and economic resources (e.g., high status occupations, promotions) to partially offset the psychic costs to their masculinity that may accrue as a result of perceived bodily decline. Thus, the relatively

privileged nature of this sample suggests that although men may perceive their bodies as declining, the impact of this decline may be even more distressing to men with fewer social and economic resources, as white middle-class men may be able to draw on their privilege to moderate the social and psychological effects of this distress.

Additionally, midlife men's social positions of race and class may affect how they discuss their bodies. Calasanti and Slevin (2001) suggest that, in general, Black men are more concerned with their physical appearance and body image than White men due to the fact that a majority of Black male role models are athletes or entertainment figures, while White men have a wider variety of role models to draw upon. Furthermore, Black men, while demonstrating a greater concern over their bodily appearance, also demonstrate greater bodily satisfaction (Calasanti & Slevin, 2001). Thus, it is likely that the whiteness of our sample influenced our findings: Had our sample been more racially and ethnically diverse, more heterosexual men may have discussed their body's appearance at midlife or, alternatively, more gay men may have expressed satisfaction with their appearance.

Our findings are also likely influenced by the fact that our sample is largely middle-class. Scholars have long argued that class background shapes the ways in which individuals view their bodies (Bourdieu, 1984). Calasanti and Slevin (2001), for example, argue that class and occupation may affect how men view their aging bodies, such that blue-collar men are more likely to deem themselves old at younger ages than white-collar men, since they depend on their bodies for material survival in a way that white-collar men do not. Thus, had our sample been more diverse in terms of social class, more men may have discussed their aging bodies in terms of what it means for employment, rather than the implications of embodiment for athletic and sexual leisure. Moreover, given that current consumerist discourses emphasize the possibility of maintaining a youthful body via (often) expensive and time-consuming health and lifestyle products and behaviors (Katz & Marshall, 2003), the issue of who can afford to take control over their midlife bodies may also be at play. Working-class or poor adults who lack the economic means to engage in "youth-enhancing" lifestyles, may be more fatalistic about the aging body and more likely to frame these changes as natural and inevitable. They may also be more fatalistic about the inevitability of bodily decline than their higher SES peers due to the fact that chronic conditions and disability also have earlier onset in lower socioeconomic populations (Miech & Shanahan, 2000), and working class individuals may witness more bodily decline among their peers.

Additionally, while we have focused on the ways in which aging shapes how midlife men experience their bodies, it is important to note that men's embodied experiences are also shaped by the particular historical and social context into which they were born and live. For example, research suggests that recent cohorts of young men are more concerned with body image and appearance (Grogan & Richards, 2002), due to cultural shifts in attitudes toward the male body (Pope, Olivardia, Gruber, & Borowiecki, 1999) and the increasing use of men's bodies to sell products (Gill et al., 2005). Thus, younger cohorts of men may be more concerned with appearance, regardless of age or sexual orientation.

This exploratory research suffers from some limitations. First, our in-depth interviews were originally designed to focus on long-term relationships and how they change over the life course. While these interviews included specific attention to aging and sexuality, they were not originally designed to assess midlife men's embodied experiences. Further, while we explored diversity among men in terms of sexual orientation, our sample was highly homogenous in terms of race and class. Future research should assess how non-White and non-middle class men experience their bodies at midlife. Moreover, while there has been a recent proliferation in work that examines old women's experiences of their aging bodies (Hurd Clarke, 2011), less work has examined how midlife women experience their bodies

outside of the context of particular life course changes (e.g., menopause). Midlife women's everyday experiences of their bodies are, therefore, an important topic for future research to examine.

Finally, men's performances of masculinity within the interview context itself are both a potential barrier to understanding men's "real" experiences as well as a potential source of data about how masculinity operates (Schwalbe & Wolkomir, 2001). Of note, although heterosexual men rarely described appearance-related concerns, this does not necessarily mean that they do not have such concerns. Given heterosexual men's greater stake in male dominance, they may be less likely to claim for themselves what has traditionally been a feminine concern. Further, it is possible that men were reticent to discuss issues of manhood and masculinity in the context of discussing their bodies, as men, in general, may perceive discussions about gender as threatening, particularly when the interviewer is a woman (Schwalbe & Wolkomir, 2001; Williams & Heikes, 1993). However, our third theme "Men Don't Quit" can be interpreted as a form of masculine "identity work," whereby men attempt to assert a masculine self in the face of threats to that self that the interview itself may have posed — particularly discussions related to bodily decline (Schwalbe & Wolkomir, 2001).

The present study contributes to a greater theoretical and empirical understanding of midlife men's embodied experiences. Theoretically, our findings advance an understanding of men's embodied experiences at midlife as simultaneously shaped by cultural understandings of midlife decline and masculinity as well as inequalities between men based on sexual orientation and age. This research also suggests that men's experiences of their bodies at midlife may affect their psychological well-being and their intimate relationships. An understanding of the ways in which oppression on the bases of age and sexual orientation function to shape midlife men's sense of their bodies provides critical insight for researchers and mental health practitioners. Although men are often distressed over changes in bodily functionality, regardless of sexual orientation, gay men also frequently express distress over changes in their appearance and these different embodied experiences in midlife may contribute to disparities in well-being that operate on the basis of sexual orientation. Additionally, men's embodied experiences likely have important implications for their intimate relationships. For example, our findings suggest that some midlife gay men may avoid sex with their partner due to insecurities stemming from bodily appearance; yet, sexual satisfaction is an important predictor of both relationship satisfaction and psychological well-being (Rosen & Bachman, 2008), which further suggests that inequalities between men based on sexual orientation have implications for disparities in relationship quality and mental health. Future research should continue to empirically examine midlife men's embodied experiences as well as examine how these experiences may affect men's mental health and intimate relationships in ways that differ for different social groups.

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Highlights

- We examine midlife men's embodied experiences of aging
- We analyze 30 in-depth interviews with gay and heterosexual midlife men
- Both groups of men focus on functionality-related facets of bodily decline
- Gay midlife men also focus on appearance-related facets of bodily decline
- Both groups define men's bodies as fundamentally different from women's