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Ageing and bisexuality

Case studies from the 'Looking Both Ways' project

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Ageing and bisexuality: Case Studies from the 'Looking Both Ways' research project

This report presents case studies from a research study about ageing and bisexuality. The case studies are freely available for use by others. They could be used:

- To generate discussion when training health and social care staff working with older people
- To illustrate and personalise issues in report-writing and policy development
- To create awareness about the needs of older people in relation to sexuality and care
- As a resource for teachers and other educators
- To prompt discussions about the impact of people's earlier life course experiences in later life
- To increase the visibility of bisexual people in later life
- To increase the representation of older people in bisexuality visibility work
- To increase the representation of bisexual people in general LGBT training

Case studies describing lesbian, gay, bisexual and transgender (LGBT) people's experiences as they grow older are often used in training, educational and policy work. They can help bring issues to life by providing real life examples, and can also help people understand experiences that may be very different from their own. However, existing resources focus on the experiences of lesbians and gay men as they grow older. When bisexual people are included, it is often only in relation to their same-sex experiences, not their experiences of being bisexual as they grow older.¹

Looking Both Ways was a research project exploring the experiences of people with bisexual identities or bisexual relationship histories as they grow older. Twelve people (aged 51 to 83) living in England took part in interviews between 2013 and 2015.² Half of them identified as bisexual and half did not but had bisexual relationship histories. From these interviews we developed case studies which set out life stories, concerns and support needs in later life. This report provides the case studies and explains the context in which they were created. Details of other, more academic, outputs from the project can be obtained from the authors. For more information about bisexuality or about LGBT ageing in general, see the resources list at the end of this report.

Case studies about sexual and gender identities over the life course

Each case study is in two parts. The first part summarises each person's life story so far, focusing particularly on their sexual and relationship history, and also their gender history where this was significant to them. The second part describes their experiences of growing older and their thoughts about future ageing as a person with a history of relationships with more than one gender.

People who currently identify as bisexual

Janet

life story

Janet was born in 1956 in a suburban part of London. From the age of 10 she recognised that she was attracted to boys and girls, and this awareness grew stronger as she was in her teens. She encountered the idea of bisexuality largely through the singer David Bowie and recognised that as her own identity from that point onwards. She only had boyfriends before she left home but imagined she would be able to act on her attractions to women once she had left home, as part of the glamorous bohemian lifestyle to which she aspired. She left home, went to secretarial college and had two boyfriends who turned out to be bisexual. At the same time she experienced a very strong attraction to a woman. At 21, she went to university and had her first girlfriend, getting very involved in feminist politics. She experienced feminism at that point as a very uncomfortable place to be bisexual and felt pressured to declare that she had stopped having relationships with men. In her twenties she had open relationships with men and women. In her mid-twenties she had a relationship with the man who became her son's father. After a traumatic breakup she mainly dated women until she was in her late 30s. Then she met a man she is with today, having only what she describes as 'dalliances' with women since then. She has identified as bisexual almost the whole of her life.

ageing

Janet has identified as bisexual from a young age. But when she was at university in the late 1970s, she was involved in feminist politics and it became increasingly unacceptable in her social circle to continue to have relationships with men. Janet remembers saying that she had stopped having relationships with men, but knew at the time that this wasn't really true to her own desires. Feeling she had to say this was 'awful' and 'really painful'. She also felt guilty when she didn't identify as a lesbian and felt that she had failed as a lesbian. A few years later she worked in a feminist organization and recalled a colleague saying 'yuck' when she saw the word 'bisexual' on a survey that asked about people's identities. This has left Janet feeling anxious about how lesbians, particularly, will respond to her. She says that she always worries that a group of older lesbians will be hostile towards her if she says that she is bisexual. She can't imagine attending a group for older LGBT people as a normal attendee or if she was in need of support – she feels she'd have to attend 'with her bi hat on' to make a point about bi visibility. She would worry that people attending an older LGBT group would try to imply that people only have bisexual histories because they were not able to acknowledge earlier in life that they were really lesbian or gay. If Janet needs home care when she gets older, she thinks it would be very important to be out as bi to any carer with whom she had a significant relationship – such as someone who was regularly helping her to wash or dress. Just as she would want them to know other significant facts about who she is, she would want them to know about her sexual identity. She's been out as bi nearly all her adult life and she wouldn't want that to change as she grows older.

life story

Rosemary was born in 1951 and assigned male at birth. She suspects that she was always bisexual – she certainly remembers attractions beyond girls when she was a teenager and also felt conflicted about her gender identity at that stage. When she was 18, she went to university and met her partner, Megan, with whom she has been in a relationship ever since. They married while at university and issues around Rosemary's gender identity did surface soon afterwards but doing something about it in the early 1970s seemed (to them) impossible and she suppressed them. Rosemary and Megan went on to have two children together, one of whom has a disability. In the mid-1990s, Rosemary realised that she needed to transition socially and medically to female, although at that time it was not possible to legally change gender. At around the same time, Rosemary and Megan discovered the polyamorous (consensual non-monogamy) and bisexual communities and that gave them a helpful framework for reconfiguring their relationship. In 1999 they went to BiCon (an annual gathering for bisexual people and their allies) together for the first time and met Paul who became a partner of both of them. Paul moved in with them and subsequently they bought a house together as tenants in common and have lived together ever since. All three have secondary partners as well. Rosemary identifies as bisexual and expects to do so for the rest of her life. After the passage of the Gender Recognition Act and the Civil Partnership Act, Rosemary was able to get her gender legally recognised and she and Megan became civil partners, then after the passage of the Marriage (Same Sex Couples) Act they later converted their civil partnership to a marriage.

ageing

Rosemary currently lives in London in a house co-owned with her civil partner (Megan) and their mutual partner, Paul. Rosemary and Megan's adult son, who has disabilities, also lives with them. Rosemary recently retired at the age of 63 and this means that the household no longer needs to live in London, where houses are very expensive. They want to sell their house in London so that they can move somewhere cheaper and buy their son a place of his own, so that he is provided for as they grow older and when they die. However, as a fairly unusual type of family, they also need to move somewhere where there will be 'people like us' and ideally people they already know, which limits their options considerably. They feel that London is much more accepting of unusual families like theirs than many other parts of the UK. Rosemary does not feel that specialist accommodation for older people, such as sheltered housing, would be suitable for them as they grow older as it would be too small for three people living together. Pensions and financial provision are also a worry. She and Megan have survivor benefits from each other's pensions, but Paul does not. She imagines that if she or Megan dies, Paul will marry the survivor, as a way of making financial provision for him.

life story

Megan is 60 and has recently retired. She recalls attractions to other women as a young woman and met her then-male partner (Rosemary) at university. They married and had two children. Her partner cross-dressed but Megan says neither of them had the language to frame this as about gender, as it was. A little later she remembers reading a book by Jan Morris called *Conundrum* and pondering the fact that if her partner transitioned, then they would be lesbians. It wasn't a big deal at the time. Much later in life after a couple of extramarital affairs Megan started discovering her submissive side through BDSM. Confessing her infidelity to her partner their reaction was relief to hear about the affair, "I don't have to be a man for you anymore, you clever girl." Megan feels that this was when her partner seriously considered transitioning, and eventually went ahead with surgery. This was also the time when they started investigating polyamorous relationships. They did briefly separate around the time of Rosemary's surgery and started divorce proceedings but then became close again. She knew she was not a lesbian however and didn't want to be seen as one. After Rosemary completed transition, they both began to identify as bisexual and started to attend BiCon. They are now in a polyamorous relationship with a bisexual man with whom they live and also have secondary relationships with other people. As the law changed they dissolved their marriage to become civil partners.

ageing

Coming out as a bi person in an LGBT staff network Megan felt she was treated as a curiosity and asked intense questions. However, no one has ever told her to make her mind up, which she thinks is due to being older. Megan cannot imagine herself stopping being "bi, poly or submissive." It is sex which might become less important as she gets older, but "it is still there." She would really like for the three of them to move forward into their retirement as a polyamorous (poly) relationship. One of her fears is if they come to a point where one of them needs more care than the other. However she thinks that being poly may have big benefits in later life. She gives the example that in 2009 she was diagnosed with cancer - being poly meant that she had more support and her partners also had more support in caring for her. When reflecting on the possibility of being in a care home Megan feels relatively positive because she sees herself as a vocal person, and is assertive enough to demand what she needs if she is being discriminated against. However, she is aware that there might be a point.

life story

Ian is 51 and can't recall ever identifying as straight. From an early age he knew he was attracted to both men and women. By the age of 12, he came across the concept of bisexuality and identified with that. His first sexual experiences were with other boys at his single-sex school. Bisexuality has been a consistent identity throughout his life. The main change has been moving from being more or less equally attracted to men and women to being more attracted to women. At university in the early 1980s, he found an advertisement in *Time Out* magazine for the London Bisexual Group which turned out to be its first meeting in London. He has been involved in bisexual communities and groups ever since. He met his current partner at a bisexual event in the mid-1990s. They had a commitment ceremony after being in a relationship for about 3 years, have lived together ever since in a non-monogamous relationship and have one daughter. Living with a female partner and child, Ian describes being seen by other people as utterly heterosexual. To some extent he feels a disconnect between his connections in the bi community and the rest of his life. Politically he has been active in championing bi-awareness and gets incredibly frustrated and annoyed at the ongoing invisibility of bisexuality in so much 'LGBT' work.

ageing

Ian says he cannot imagine his sexual identity changing as he grows older – he will always be bisexual. He finds it difficult to imagine being older and feels he should make some plans for later life, especially if he loses capacity to make his own decisions. However he has what he knows is an irrational fear that making concrete plans for future care will somehow make the need for this care arise. He would like a space to talk and think about ageing, ideally with other older bisexual people but, if that is not possible, at least with lesbian and gay older people. The recent death of his father and his partner's father being very ill has made Ian more aware of his own ageing. He also noticed the lack of internet access or even mobile signal in their care homes. If he went into a care home or had carers coming to his house, he is not sure how important it would be to him to be out to them as bisexual, especially if they were only coming in briefly and he was not forming a personal relationship with them. It would be much more important to him to have access to his many books on sexuality and to have uncensored access to the internet. Ian realised recently that he had been attending BiCon (a major annual event in the UK for bisexual people and their allies) for longer than some other delegates had been alive – this felt weird but also made him realise that he wanted to be visible as an older person at BiCon.

life story

Ola was born in 1957 and was assigned male but says that she became aware of her female gender when she was about three. She thought that there was something wrong with her, until a trip to Amsterdam when she was 15 showed her that there were other people like her. She decided she wanted to transition to female in 2009 after a mental breakdown, and now wishes she had done so many years earlier. She is still on a waiting-list for surgery and is worried about how long she will have to wait – she does not have enough money to pay for private treatment. Her bisexuality has always been much more straightforward for her. She wonders whether this was partly because of the historical period of the early 1970s when she was exploring these issues – homosexuality had recently been decriminalised and bisexuality was relatively accepted, whereas transgender issues were much less talked about. She was aware that she was attracted to specific people, not to specific genders but did not label her sexual identity until more recently, when she started to work for an LGBT organisation. Over the course of her life, Ola has had relationships and sexual encounters with men and women but her longer term relationships have been with women, with one of whom she had a child. One ex-partner is by far the most important person in Ola's life (to the extent that she chose her name as her own female name) and she describes her as 'the love of my life'.

ageing

Ola was bullied quite badly as a child for being different. One beating left her with tinnitus which is becoming much worse as she grows older, to the extent that she can't use a mobile phone out on the street. She has lived on her own for the last three years, having previously always lived with partners. She imagines that she will live alone for the rest of her life and is reasonably accustomed to it now. However, she worries about her ex dying as she would really miss their regular contact. She also worries about other friends dying. She is concerned about her own future as a transwoman if she had to go into a care home, and also about health issues in later life for older transpeople, about which very little is known. Due to several changes of job as well as some years out of the workforce because of mental health issues, Ola has very little pension provision. Before she transitioned, Ola was often suicidal but now she is not and intends to cling on to life as long as she can. However, if she were to get some sort of degenerative long-term health problem she thinks she would choose to commit suicide.

life story

Ruth was born in 1933 and assigned as male but from the age of nine, she wanted to be a woman. She went to a boys' boarding school and studied to become an engineer. Hoping that her desire to be female would go away, she married and had three children. Ruth's wife was aware of this desire. Throughout the marriage, and before transitioning, she mainly identified as heterosexual, except when she dressed and acted as female, when she identified as bisexual. The main turning point in her life happened in her forties. Ruth decided to become self-employed and work in the finance industry. In her late forties, she found a group of friends in London who were extremely supportive towards her transition. With their support, Ruth ventured out dressed as a woman in the evenings and built a good social life as her new self. After her retirement, Ruth and her wife were divorced after 42 years. Ruth relocated to a 3-bedroomed house in South England. At this point, she needed a hip and knee operation and discovered that her new neighbours were very supportive. This was another turning point for Ruth, as she started doing voluntary work with older people, which she now does on a full-time basis. Ruth is now an advocate for older people, including the older trans community. After she moved, Ruth lived as a woman for a period of six years. Eventually, her doctor advised her to transition. Initially, she thought they wouldn't consider her case due to her old age. However, to her surprise, she found out that she was in a good position to undergo the operation. In fact, as her doctor put it, she didn't need to be 'psychoanalysed' due to her older age. Ruth transitioned fully at eighty-one years old and is now happily living the life she always desired. Ruth sees herself as happily open to bisexuality, providing she finds the person attractive, but she is still mainly oriented towards female partners sexually.

ageing

Ruth lives alone and has no long-term sexual relationships, although she gets pleasure from close physical touch. At eight-three years old, Ruth is in relatively good mental and physical health. She can foresee that her physical ability may deteriorate as she grows older and that this might eventually stop her active lifestyle. She imagines that reduced physical agility would lead her to work more from home, and hopes that her thriving friendships will keep her busy, happy and supported. Ideally, she would continue living solo until she dies. Imagining herself moving into sheltered accommodation, Ruth expects some carers and people to feel aversion towards her transgenderedness, although she imagines that she would overcome such hostility through her 'reasonable sort of personal charm'. However, she describes the prospect of being in a care home as 'semi-imprisonment'.

People who do not currently identify as bisexual

Imogen

life story

Imogen is 67. She finds identity 'labels' to explain her sexual orientation quite cumbersome. She views identity as very fluid. If pushed to put a label on her identity, she would currently use the label 'queer'. She puts it like that because most of her life she has been a lesbian, but occasionally has had a relationship with a man. For Imogen, to identify only as bisexual would feel like abandoning her lesbian experience, hence she prefers to use the label 'queer', which she feels fits her better. She tends to get on with more women than men and be more attracted to women. She has only occasionally felt sexually attracted to men, and says that that tends to be because there's been an emotional connection which then creates the sexual attraction. As a teenager she had boyfriends and some sexual experimentation with boys, and thought her romantic crushes on girls were probably a phase until she realised she had sexual feelings for a girl. She would now call that 'queer' but didn't have that language to use as a teenager. In her late teens, Imogen felt conflicted about her identity and how that fitted with her religious beliefs. She decided she would have to be heterosexual. However, deep down she knew she wasn't and she describes having a difficult time in the late 60s and early 70s when there was little information and few visible support networks to be found. She describes becoming part of a radical community of lesbians, a couple of whom occasionally had sex with men. No-one suggested bisexuality as a concept. Imogen's relationships have subsequently been primarily with women, some of whom remain good friends, including one she nominates as her next of kin.

ageing

Imogen is 67 and lives alone. She likes living alone and describes herself as a very social person who also has an intense need for solitude. Her health is not good, she has 'quite a lot of things wrong with her'. She has mild heart failure and has experienced incidences of ill health when living alone, which were 'frightening and horrible'. However she has a 'fantastic' supportive network of people around her, mainly queer people, but also including family of origin. As we talked, Imogen picked up her cat and cuddled her; she commented that she was aware she was cuddling her because of our conversation about her thoughts on future care if she couldn't live independently. She said she would have to live somewhere that she could have a cat. She has visited lots of care homes through her previous work. Ideally, if she had to move she would want to find somewhere that was an LGBT friendly place to live – for example, a sheltered housing scheme that has a good reputation for catering for LGBT people. She feels LGBT-specific settings are not necessarily the only answer. In part there could be gender issues and issues about LGBT inclusion. She wouldn't want to live in a women-only or lesbian-only care setting because she doesn't want to find herself living with separatists who might choose this option. She would not want to live with any people who are anti-trans or anti-bi or anti-men (including gay men) any more than people who are anti-lesbian. She's sure that all older people would have concerns about having to live in a care home but there are specific concerns for LGBT people. One thing that worries her is the isolation of not being able to talk about your life to people, and a possible lack of understanding from other residents or staff. Imogen is a queer pagan vegan, and feels that it is going to be difficult in mainstream settings: it can make her feel like people resent accommodating her needs, and that she is burdensome and a nuisance. She would want to maintain access to LGBT culture, and also access to pagan spirituality.

life story

Mark was born in 1950 and was aware from the age of about 12 of having a strong interest in boys and young men. He left school determined to do something about himself and went to see a GP and 'confessed' to being gay. The GP referred him for aversion therapy, however at the preliminary interview he was repulsed by the way they talked about the treatment. He remembers going out and bursting into tears and realising that was not the way forward for him. Through his late teens and 20s, he mainly had relationships with men but also some fairly brief relationships with women. He describes his most 'bisexual phase' being a time in his early 20s when he was going out with a woman at university and also involved with a man as well at the same time. Towards the end of his 20s his attractions to men and women shifted and he dated more women. He then met a woman who became his wife and they had a loving monogamous relationship for 30 years, and three children together. His wife died suddenly about 5 years ago which was a devastating shock. Mark found his attraction to men coming back very strongly, something that made him happy and he has continued to be very positive about it. He has 'come out' to his children. He feels the door on relationships with women has closed and he currently identifies 100% as gay. At this point in time he has casual encounters and emotionally involved friendships, but does not feel ready for a deep relationship. Looking back across his life so far, he can see plenty of evidence of relationships with men and women but he doesn't think he ever felt bisexual. He finds limitations in the notion of bisexuality, which he sees as having attractions to men and women at the same time. He appreciates it doesn't necessarily have to be that, but it is not a label he finds useful, while he finds it very easy to say he's gay and it makes a lot of sense to him. Looking forward, from where he is now, he believes that if he did start a relationship with a woman he wouldn't stop being gay. He might identify with a queer identity, a queer heterosexuality: "Queer would actually cover somebody like me who sort of at different times has done very different things with their lives".

ageing

Mark feels more confident in his identity as he ages. He feels in a more privileged position and less tied in to family responsibilities. He is a widower after a long marriage and he has three children now in their twenties. He had told his wife he was gay when they met but because they then started a deeply absorbing and rich relationship, being gay didn't stay a visible part of his identity, more a 'path not chosen'. Looking back now, he wonders if it should have and honesty would have strengthened his relationship with his wife, but he didn't want to rock the boat and risk jeopardising his family life. He finds it easier to be braver now than he did through his 30s and 40s. He thinks this is a combination of increased confidence and having less to lose – although not a completely open field as he wouldn't do anything that would impact negatively on his relationship with his children. The death of his wife brought Mark face to face with his own mortality. He describes part of that as something almost physical in saying 'I'm alive and I'm going to do stuff to prove that I'm alive'. He tends to be attracted to younger men and thinks there is something in that about wanting to hold onto youth. He lives alone and feels there is as big a difference between being single or partnered as there between being gay or straight. He is contemplating old age on his own and has some concerns about that. For instance, he worries about ill-health and is being more proactive about keeping healthy. Sometimes he has thoughts such as, 'What if I fall down the stairs and nobody comes for two days?' Retirement is also on the horizon and Mark feels that might be a scary transition, a less structured life. Overall, however, he can't really imagine the future. In part, the sudden death of his wife disrupted life plans. In growing older, he looks to active and emotionally open older people as his role models for his future ageing.

life story

Alex is 65 and currently identifies as pangender and uses the pronoun 'he'. Growing up in the 1960s and 70s, he experienced attractions to boys as well as girls. He got married in his early 20s and had two children. In his early 30s he started to train as an Anglican priest. He was attracted to some of the priests who openly identified as gay but did not act on these attractions. He finished college and worked within the church where he says he repressed his feelings. In the early 1990s he became an Army Chaplain, and then a Roman Catholic married priest. In the late 1990s, his marriage fell apart when he had an affair with a woman. He lost his job too. His sexual attraction to men became stronger and he had relationships with men and women. He discovered a Roman Catholic LGBT organisation which enabled him to talk openly about his sexuality in a Christian context. He also became more aware of his feminine side, partly through having relationships with other men. He joined a transgender group and experimented with dressing as a woman, but concluded that he did not want to transition to being a woman. He sees the label 'bisexual' as a form of unhelpful dualistic thinking, so does not use the label. He considers himself to be equally male and female and uses the paradox of the Eucharist, which is simultaneously bread and the body of Christ, in order to explain his pansexual and pangendered identity. Alex cannot separate his sexuality from his genderedness and spirituality. He sees them as inseparable, as each identity informs the other. Currently, Alex does not have a partner and is not actively looking for one. He is content with where he is in his life but expects his identity and attractions to continue to change.

ageing

Alex lives in a sheltered housing complex run by a not-for-profit organisation. One day another resident knocked on Alex's door and asked to come in. Once inside, the other resident stared at Alex and then told Alex he was disgusting and said he wanted to 'punch his lights out' and threatened to push him out of the window. Eventually Alex managed get him out of his flat. It happened to be a women's bingo night and the other resident went down to the group and told them what he had done, and said he had done it on their behalf. However, the women said that they didn't agree with his stance and that it was 'not in their name'. Alex went down to the bingo group and the other resident threatened him further. The police were called and Alex reported it to the housing complex management. The management took the other resident to court and he was sentenced with an ASBI (anti-social behaviour injunction). He moved on to another home within a matter of weeks. Alex felt extremely well-supported by the housing complex management.

life story

Chryssy is 52 and currently identifies as pansexual, with previous sexual identities at different points in time being gay, bisexual, and lesbian. Chryssy uses the pronoun 'they' although they do not find this entirely satisfactory. Their current gender identity is Queer Femme. Identifying their gender difference in the past was complicated by not having a trans*³ vocabulary that fit their experience. As a teenager, Chryssy describes having lots of gender issues going on, which they just assumed was about sexuality. They came out as gay which seemed to be a way of explaining those felt differences. But gender issues were ongoing; they dressed either androgynously or femininely, still identifying as gay. Their involvement in the gay scene made it clear to Chryssy that they were different from gay male friends. For a period in their 20s they identified as bisexual quite strongly. Chryssy married in their mid-20s and had two children. Chryssy also has a daughter from another relationship. Their gender identity at this point was expressed through occasional crossdressing, and their sexual orientation shifted between straight and bisexual. Life became what they describe as horrible. They got divorced and moved abroad for a while. Chryssy describes the late 1990s/ early 2000s as a pivotal point when there was an emergence of a genderqueer scene. They describe this as seemingly serendipitous yet not – “searching for something that you don't know what it is, but you're searching in areas where you're likely to find these kind of things”. Chryssy invested in a genderqueer identity; that made bisexuality seem less applicable because it seemed too binary. Although Chryssy fully transitioned from male to female in their 40s, they challenge binaries. Chryssy doesn't want to feel bound to any particular sense of self but likes the idea of the possibility of future change.

ageing

Chryssy lives in a shared rented flat. One consequence of the life they have led is that they have moved around a lot and spent significant periods of time abroad – in part figuring out their identity/running away/finding new places to be oneself. They would describe themselves as 'materially poor'. Having not had any job for longer than five years has consequences for the future and Chryssy does wonder what that will look like and thinks about 'future proofing'. They have talked to others about it and would like to envisage different ways of doing older age, possibly social or housing association options or communal living with mutual support on hand, living with like-minded people. Chryssy has three children now in their 20s. They have maintained and continue to have a strong relationship with their two sons but currently have no contact with their daughter, although they intend to be more proactive soon in reaching out to their daughter and hope all three children will be in their life as they age.

life story

Roger is a 71 year old Londoner who identifies as panromantic. He described his family background as messy and grew up with a 'misogynist' father. Growing up, Roger didn't feel that he was either gay or straight. At around 15 years of age, Roger tried to come out to his parents. He eventually succeeded and they sent him to a psychiatrist who practiced aversion therapy on him. He carried a huge sense of guilt because he did not fit into his parents' expectations. Roger found that he could only form platonic relationships with girls but he was equally not interested in sex with boys. He has always mainly been interested in affection rather than sex. He was terrified of being labelled gay until the law changed, by which time he was in his late teens. When the Gay Liberation Front was founded he decided to leave London in order to lead a more bohemian and alternative lifestyle. At this point, Roger formed a relationship with a man which lasted 28 years. This turned out to be a relationship of convenience and from Roger's perspective it lasted only because they didn't have sex. After the break up, Roger felt that he had emotionally regressed as he went back to the same feelings of inadequacy and guilt. He tried to look for a partner in newspaper and online adverts. This did not work out as he found relationships with women too demanding and he was not interested in one night stands with men.

ageing

When Roger semi-retired he found he had more time on his hands so he threw himself into chosen work, activism and volunteering. His health improved after he went through heart surgery and a cancer scare. He explained that after heart surgery 'suddenly one becomes older'. At an LGBT charity where he volunteers, Roger observed that most of the younger volunteers have partners. This makes him wish he was in a relationship too. Roger does find being older and living solo to be scary, mainly because he has no one to rely on if he gets ill. Loneliness is a fear that Roger dreads especially during the Christmas festive period. In fact, his future plan is to sell his current one bedroom flat and buy a two bedroom one. The second bedroom would be a guest room for friends but also for a carer when the need arises. Ideally, Roger would like to live independently as he does not want to go into a care home. This partly ties in with the fear of being in a homophobic care home or sheltered accommodation, where the cleaner or a carer would ask about the absence of pictures of grandchildren and this would be painful. What is important for Roger is to get the sensitive personal care that he needs and not the sexual orientation of the carer.

life story

Dan is 51, currently lives alone and is a homeowner. He has three children who do not live with him fulltime. Being gay wasn't at all visible in the working class culture in which Dan grew up. He had a series of heterosexual relationships. He then moved in to a shared house with a man, and a relationship started up between them which lasted for a number of years. Dan never told his parents or siblings. One of his siblings referred to a gay man as 'bent as a two bob bit', a 'shirt lifter' which made Dan think 'Oh I'm one of those now'. This led to mixed feelings of shame and defiance. He later went to University and subsequently all his relationships have been with women. He reflects on this occasionally and feels that what you do is as much shaped by availability of opportunity as anything. Now Dan doesn't really move in what he describes as 'gay circles'. He's been doing some online dating and is looking for women not men – because he thinks he is more likely to see a woman as an object of desire. He worries that if he met a man, they might be someone who has been out and proud as a gay man, while Dan has not. He doesn't feel there are spaces for men in their 50s to experiment sexually with other identities. He feels he is known at work as a family man who messed up because he had an 'affair' with a woman at work. He is concerned to maintain an appearance of being a stable normal person. If he now started a relationship with a man, he wonders if this might mean he would be a laughing stock. 'They'd say "he was gay all along wasn't he?"' Dan feels it would be too challenging and too disruptive to make such changes to his life now.

ageing

Looking back over his life to date, Dan feels he has led his life in a very messy way which has had a huge toll on his mental and physical health. He hasn't achieved what his parents have had, a long term monogamous heterosexual relationship. He said he 'really, really, really thinks that sex and socks don't mix' – he knows people who have long term heterosexual relationships but they don't have sex. He doesn't want that kind of relationship i.e. a primary relationship with no sex. He can't imagine a gay relationship in his future – though it is an idea he neither embraces nor rejects. In older age his ideal vision is living in a community of middle aged and ageing people. He would want sex to be in the picture somewhere, in or outside that space, but he also wants friendships to play a big or bigger role and sees solidarity and caring in having a network of friends who would look out for each other. He wants to find a different way of living – in part to deal with the 'horrors' of old age. His children might be around to help care for him but primarily he sees the investment in friendships as 'future proofing'; the alternative would be to have sufficient money to buy in care.

Background to the case studies

How were the case studies developed?

We carried out one in-depth interview with each person. Interviews varied in length between 45 minutes and three hours. The first part of the interview focused on each person's sexual and gender identity over the course of their life so far. The second part of the interview explored their current experiences of ageing and any implications they thought their history might have for their future. The interviews were transcribed and the case studies drafted by the interviewer. We sent the case studies back to each participant to give them an opportunity to modify and agree them before we finalised them.

Were all the participants bisexual?

Not all the participants identify currently as bisexual. Our recruitment materials stated that we wanted to talk to people who do identify as bisexual, and to people who use alternative labels such as 'pansexual' or 'biromantic'. We also said that we wanted to talk to people who do not identify as bisexual, but who do acknowledge bisexual pasts. This was because we know that greater numbers of people behave bisexually than identify as bisexual⁴ and also because we were interested in the question of why people with similar experiences might choose different identity labels.

People we talked to use different identity labels to describe their sexual identity, and most have changed the identity label they use over the course of their lives.

bisexual
straight assumed
currently not sexually active
male
queer
gay
bi bisexual with preference towards females
biromantic
lesbian
pansexual
polyamorous
heterosexual
always bi
straight
submissive

Half of the participants currently identify as bisexual and half do not. However, they all have a history of sexual relationships with more than one gender and felt that they had something to contribute to a project focusing on bisexuality and ageing.

How old were the people who took part?

At the time of interview, the youngest participant was 51 and the oldest 83. The majority were in their 50s and 60s – the mean age was 64.

What were the participants' other background characteristics?

All participants have white ethnicities. They are predominantly middle class and well-educated. Income levels vary: some are materially poor, partly due to life course events related to their sexual and gender identities. Six describe themselves as female, of whom three have trans histories. Four describe themselves as male, none of whom have trans histories. One identifies as pangender and one as queer femme and trans. Several participants have disabilities and long-term health conditions. All live independently in homes they own or rent, one of which is part of a sheltered housing complex. None currently use home-care services. Seven live in London, the rest live in different urban and rural areas across England.

Are the case studies typical of older bisexual people?

We do not know how typical these case studies are because so little research has been done into bisexuality and ageing. This study itself added significantly to the existing research in this area.

Not all the case studies we provide in this report come from people who identify as bisexual although they do all acknowledge bisexual relationship histories – there may be differences between those who do identify as bisexual in later life and those who do not.

Our case studies do show some of the diversity of experience among older people with bisexual histories. However, there is greater diversity among older bisexual people than our cases studies show. For example, older bisexual people who live in a care home or who regularly encounter racism may have very different experiences of ageing from the *Looking Both Ways* participants.

Conclusions and Recommendations

Twelve people took part in *Looking Both Ways* so this represents a small study. It would therefore be inappropriate to generalise from their experiences to those of older bisexual people more widely – these people may not be typical of older people with bisexual relationship histories. However, within such an under-researched field, this is a significant addition to what we know and it is possible to draw out key themes and to make some recommendations on the basis of the diversity found within these twelve accounts. These recommendations are also based on the authors' wider expertise in bisexuality and ageing.

Do not assume that the sexual identity label someone uses now tells you about their relationship history

People may identify as lesbian, gay, straight or something else but still have a history of relationships with more than one gender. This means that you cannot assume who the significant people are in their life.

Bisexual identity may be important to people regardless of their current relationship status

Older people may identify as bisexual when they are single or in monogamous same-sex or different-sex couple relationships, as well as when they are in non-monogamous relationships. Being bisexual is not just a question of sexual behaviour but of attractions, desires and identity.

Bisexual relationship histories can be both a source of strength and a source of difficulty in later life

People with bisexual relationship histories may encounter misunderstanding and hostility throughout their life course (within mainstream heterosexual but also lesbian and gay settings) and they may themselves have struggled to make sense of their experiences. However bisexual relationship histories may also have enabled people to develop strong support networks, resilience and a sense of having lived authentically, which may be very beneficial in later life.

Further resources

Bisexuality

BiUK <http://www.biuk.org/>

Conducts research on bisexuality in the UK and disseminates this to policy makers and practitioners

The Bisexuality Report <https://bisexualresearch.files.wordpress.com/2011/08/the-bisexualityreport.pdf>

Overview of research evidence about bisexuality and recommendations for practice

The Bisexual Index <http://www.bisexualindex.org.uk/>

Resources for bisexual people and their allies and links to bisexual communities and groups

Bisexual.org <https://bisexual.org/>

Resources and information from the American Institute of Bisexuality

LGBT ageing

Opening Doors London <http://openingdoorslondon.org.uk/>

Works with older LGBT people across the UK. Website includes links to resources and guidance for practitioners, including:

The whole of me: meeting the needs of older lesbians, gay men and bisexuals living in care homes and extra care housing – a resource pack for professionals

<http://www.openingdoorslondon.org.uk/resources/The%20Whole%20of%20Me.pdf>

Hiding Who I am: The reality of end of life care for LGBT people.

<https://www.mariecurie.org.uk/globalassets/media/documents/policy/policy-publications/june-2016/reality-end-of-life-care-lgbt-people.pdf>

Perspectives on ageing: lesbians, gay men and bisexuals.

<https://www.jrf.org.uk/report/perspectives-ageing-lesbians-gay-men-and-bisexuals>

Lesbian, gay and bisexual people in later life

https://www.stonewall.org.uk/sites/default/files/LGB_people_in_Later_Life__2011_.pdf

Moving Forward: working with older LGBT people: A training and resource pack

<http://docs.scie-socialcareonline.org.uk/fulltext/116875.pdf>

Notes

- 1 Transgender people are also often missing from work about LGBT ageing. This report focuses on bisexual ageing but four transgender people took part.
- 2 The research project was granted ethical approval by The Open University's Human Research Ethics Committee and was conducted in accordance with ethical guidelines issued by the British Society of Gerontology.
- 3 Trans* is Chryssy's preferred alternative to the umbrella term 'transgender'. In the rest of the report we have used 'transgender' because it is likely to be more familiar to readers but in Chryssy's case study we use their preferred term.
- 4 Monroe, S. (2015) *Bisexuality: Identities, Politics and Theories*, London, Palgrave MacMillan UK.

The authors would like to thank all the participants for taking part in this research and so generously sharing their experiences.

bisexual

straight assumed

currently not sexually active

queer male

gay

bi

bisexual with preference towards females

bisexual, with queer as a secondary one

lesbian
biromantic

pansexual

always bi

polyamorous

straight

submissive

heterosexual

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