Towards a Happy Ending?
Positive Ageing, Heteronormativity and Un/happy Intimacies

Among the theoretical contributions in queer theory, there has been some significant work on temporalities and queer challenges to heteronormative temporality. When links have been made between temporality and age/ageing, however, the discussions have mainly focused on those between queerness and youth, immaturity and the Child, such as work drawing on Judith Jack Halberstam’s (2005) theorising of “queer epistemology of youth” and Lee Edelman’s (2004) discussions of heteronormative futurity as reproduced through the trope of the Child. In queer studies, an active interest in old age, ageing and later life has been notably scarce, however (Sandberg 2008; Port 2012). Current discussions of ageing have primarily concerned the conditions for ageing lesbian, gay, bisexual, and transgender (LGBT) communities, in particular in relation to care needs (see, for example, Bromseth and Sivertskog 2013). But as queer studies is ageing, it is timely to develop queer approaches to ageing and old age that go beyond examining the lives of old gay men and lesbians, namely to explore the production and maintenance of normativity in relationships, embodiment, and intimacy with regard to ageing/old age and what constitutes the good (later) life.

Old age and queer sexualities share some obvious affective alignments with (public) feelings, such as disgust and shame (Sandberg 2008). These affects are very much linked to embodiment and the abjection of old people and queers in relation to issues such as lack of bodily control,
for example urine and bowel incontinence in old age, or HIV/AIDS and the queer body (Bersani 1987; Twigg 2000; Gilleard and Higgs 2011). Moreover, there are similarities between old age and queer sexualities in how neither figure as “promises of the future,” as discussed by Cynthia Port:

No longer employed, not reproducing, perhaps technologically illiterate, and frequently without disposable income, the old are often, like queers, figured by the cultural imagination as being outside mainstream temporalities and standing in the way of, rather than contributing to, the promise of the future. (Port 2012, 3)

The associations with backwardness, decay and ultimately the inevitability of death thus produce a straightforward non-futurity of old people; a non-futurity that clearly parallels the foreclosed lifespan of gay males during the AIDS epidemic, the context from which the anti-social strands of queer theory have emerged (Halberstam 2008).

However, the enduring dullness and negativity associated with old age have relatively recently been supplemented with a new, more cheerful approach to ageing, what I here refer to as the positive-ageing assemblage. Older people are increasingly represented and understood as healthy, active, and engaged in society, and later life is generally conceptualised in more positive terms as a time for self-fulfilment and the pursuit of one’s interests after retirement (Gilleard and Higgs 2000). This new positive-ageing assemblage may seem palatable, after all is it not positive to be positive? Yet as critical and feminist gerontologists have pointed out, this new positive turn tends to disguise ageism and other intersecting inequalities (Calasanti 2003; Holstein and Minkler 2003; Sandberg 2011; Katz and Calasanti 2014). This article develops and extends this critique to discuss further how this turn to positive ageing could be understood as a heteronormative mode of belonging that essentially postulates what is a desirable and good (later) life altogether. My understanding of heteronormativity entails not only the assumption that everyone is heterosexual and that this is normal, but that hetero-
sexual culture emerges as a vision of the good life “produced in almost every aspect of the forms and arrangements of social life” (Berlant and Warner 1998, 554). To follow designated heteronormative directions in the life course thus involves “belonging to society in deep and normal ways” (Berlant and Warner 1998, 554).

The discussion in this paper is primarily theoretical, combining insights from critical feminist and cultural gerontology with queer, feminist, and crip scholarship. However, to illustrate some of my arguments, I will, in the tradition of cultural studies, draw on cultural texts in, for example, the mass media and popular culture. To follow designated heteronormative directions in the life course thus involves “belonging to society in deep and normal ways” (Berlant and Warner 1998, 554).

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An Assemblage of Positive, Active, and Sexy Seniors
In 2014, the annual Swedish Seniors’ Fair, hosted in three cities, boasted the slogan “Seniors: The Good Life.” Rather than a coincidence, this is very much a sign of the times. Instead of representing later life as a time of loss (of hair, spouses, erections and links with working life), it is increasingly described as a highlight: “the good life.” So how and when did these positive and optimistic associations with ageing and old age come about? Answering this is no straightforward task and the assertion of a turn towards more positive discourses on ageing and later life is not undisputable. What I here refer to as positive ageing has also been described in terms such as “active ageing,” “successful ageing,” and “ageing well,” concepts that may differ in some respects but generally share the same optimistic ontology. Using the term positive-ageing assemblage, I am loosely inspired by the Deleuzoguattarian concept assemblage, where disparate entities come together to form a temporary
unity (Deleuze and Guattari 1988). The term assemblage is useful to my aim because positive ageing is not a discourse but rather a combination of different discourses, bodies, cultural imaginaries of ageing, produced in/out of, for example, the West’s postmodern consumer culture, neoliberalism and scientific gerontological accounts and policy. The assemblage is not unitary but comes together in messy ways and the positive-ageing assemblage cannot be understood as either inherently progressive or non-progressive, as in ageist or anti-ageist, for example.

To understand the shaping of the positive-ageing assemblage, I first turn to the role of gerontology and the emergence of the concept of successful ageing, now an influential concept within studies of ageing. Thereafter, I discuss how successful ageing has seeped into, and is co-constructed with, discourses on positive ageing in politics, policy as well as consumerist culture.

Although the ideas inherent in successful ageing can be found in earlier gerontological literature from the 1960s onwards, the concept’s breakthrough came with its introduction by gerontologists John Rowe and Robert Kahn (1987; 1997) and the work within the MacArthur Foundation Study on Successful Aging led by Rowe. The aim of the concept was to introduce a new theoretical paradigm within gerontology that went beyond the focus on disease and disability, but instead emphasised differences within non-pathological ageing and made a distinction between usual and successful ageing. Rowe and Kahn (1997, 433) defined successful ageing as including three main components: “low probability of disease and disease-related disability, high cognitive and physical functional capacity, and active engagement with life.” The concept has been a huge success story, not only within gerontology and ageing studies, and has resulted in thousands of articles and offspring concepts, such as “active ageing,” “productive ageing,” “positive ageing,” “optimal ageing,” “effective ageing,” “independent ageing,” and “healthy ageing” (Bülow and Söderqvist 2014; Katz and Calasanti 2014). All in all, successful ageing has involved a significant shift in research on ageing, challenging previous negative understandings of old age as ultimately linked to disease and loss. The new mainstream gerontology
could today be characterised, in the words of Silke van Dyk (2014, 93), as a “happy gerontology” with optimistic views on ageing and that prai­ses older people as a resource, rather than a burden. Successful ageing is, however, also a significant turn away from social and structural ex­planations to differences and inequalities among older people, as happy gerontology underscores individual responsibility and lifestyle choices to ward off the ailing effects of ageing (Katz and Calasanti 2014).

The optimistic approaches to ageing are clearly not limited to scien­tific discourses but exist in a myriad of permutations, in politics and policy as well as popular and consumerist culture. The positive-ageing assemblage thus involves the promotion of active and productive ageing by global actors, such as the World Health Organisation, the Euro­pean Union and the United Nations, and national actors (van Dyk 2014). In Sweden, the collaborative NGO project “Leva Livet – Länge” [“Live Life – Long,” my translation] is an example of a national initia­tive promoting discourses on positive ageing among older people with chronic illnesses “by showing positive and brave role models to identify with, and showing that positive relationships, intimacy, sexuality and a generally good life are possible” (Leva Livet – Länge n. d.). Critical scholars have linked the political emphasis on active, productive ageing to the decline of Western welfare states and the rise of neo­liberalism, where greater responsibility is put on individuals to participate in the market economy as either active in the workforce or as consumers (Rud­man 2006; van Dyk 2014). From this perspective, it is noteworthy how a project such as “Leva Livet – Länge” seeks to present “role models” rather than challenging the political and economic context for living with chronic illnesses.

Given the intertwinements of neo­liberalism and the positive-ageing assemblage, maybe it is no surprise that it is in popular media portray­als and consumer and marketing discourse that positive ageing perhaps finds its greatest momentum. As Stephen Katz (2002, 29) noted, for over a decade ago now, “positive aging is aligned to new frameworks for growing older based on consumerism,” and market strategists have readily picked up on “the gold in grey.” An illustrative example of how
consumerism saturates the positive-ageing assemblage is the role of pharmaceutical companies in the production of new, positive discourses on, and images of, later-life sexuality. Where ageing has historically been associated with a decline also in sexuality, the emphasis on positive ageing has meant an increased focus on sexuality as lifelong and part of a positive and active later life, and this shift can partly be attributed to the marketing strategies of Pfizer and other pharmaceutical companies in the introduction of Viagra and similar drugs (Marshall and Katz 2002; 2003; Marshall 2010; Sandberg 2011; 2013). Where a decline in erectile function was previously understood as a natural consequence of ageing, men are today increasingly urged to keep their sexual function by maintaining health and lifestyle choices and if necessary taking Viagra (Marshall and Katz 2002).

Given the amalgam of cultural, social, and political discourses that operate to shape the positive-ageing assemblage, it is undoubtedly very forceful in creating contemporary imaginaries of old age and later life. However, the positive-ageing assemblage has not been uncritically appraised; in a discussion of Susan Jacoby’s book Never Say Die: The Myth and Marketing of the New Old Age, the author Merete Mazzarella, for example, mockingly comments on the myth of positive ageing:

The incessantly spoilt generation born in the 1940s believes that health in later life is a matter of lifestyle, and by exercising, eating wholesome food and supplementing with some vitamins and one or two cultural events, they can live healthy until they’re 95 and then die of a heart attack in the middle of intercourse. (Mazzarella 2011, my translation)

In academia, critical and feminist scholars have lambasted positive ageing. This included attacking successful ageing as a neo-liberal, individualised project in which older people are responsible for their own ageing, and castigating people who cannot live up to the standards of successful ageing as failures (Sandberg 2008; Katz and Calasanti 2014; van Dyk 2014). Moreover, “happy gerontologists” as well as mass media portrayals of “active,” “responsible,” and “autonomous” retirees are criti-
cised for downplaying or overlooking disabilities and social inequalities intersecting with old age (Rudman 2006; Rozanova 2010). Even though the positive-ageing assemblage is often presented as a challenge to negative and ageist discourses, critical gerontologists have pointed out that this assemblage, translated into positive, active, successful ageing essentially promotes an anti-ageing culture in which one should avoid ageing at all costs (Katz 2000; 2002; Calasanti 2003; Calasanti and King 2005). As such, the positive-ageing assemblage is a palatable disguise for a “new ageism” that aims “to liberate healthy and capable retirees from negative age-stereotypes” (Holstein and Minkler 2003, 793). A more general fear of ageing thus turns into a more specific fear of ageing with disabilities, and old people living with chronic illnesses or disabilities, such as dementia, are continuously othered and affected in negative ways by ageism.

Feminist scholars, including myself, also point to how the various articulations of positive and successful ageing have clearly gendered connotations. If, on the one hand, the dull decline discourses on ageing are often linked to femininity through an emphasis on (embodied) frailty, dependency, and passivity, positive-ageing discourses are notably masculinist through stressing productivity, autonomy, activity, and control (Sandberg 2013a). The masculinist bias of the positive-ageing assemblage is not least visible in relation to sexuality, where the use of sexual pharmaceuticals to retain sexual function clearly prioritises older men’s sexualities and downplays the ageing bodies of older women (Loe 2004). But not only are discourses on sexuality in the positive-ageing assemblage notably masculinist, sexuality and sex are also framed in narrowly heteronormative ways, where sex equals penile-vaginal intercourse (Marshall and Katz 2002; 2003; Potts et al. 2006). “Sex for life” as the new sexual imperative within the positive-ageing assemblage is hence essentially heterosex for life.

However, discussions and critiques of the positive-ageing assemblage’s heteronormative and gendered biases are still rather few and further attention needs to be paid to heteronormativity and a queer unpacking of intimacies and interpersonal relationships. As Vanessa Fabbre
(2015, 151) points out, the successful ageing paradigm fails to account for “heteronormative forces and the salient effects this has on LGBTQ older adults.” In addition to this, I would argue that the positive-ageing assemblage in fact produces heteronormativity not just in relation to sex. One should age positively by staying healthy and active, but one should also, in the words of the fathers of successful ageing, Rowe and Kahn, “actively engage with life” through interpersonal relationships:

Successful aging is more than absence of disease, important though that is, and more than the maintenance of functional capacities, important as it is. Both are important components of successful aging, but it is their combination with active engagement with life that represents the concept of successful aging most fully. (Rowe and Kahn 1997, 433)

In the following, I will thus discuss how active engagement with life through interpersonal relationships means a prioritising of heteronormative intimacies, primarily represented by heterosexual couples and grandchild-grandparent relationships.

**Heteronormative Intimacies and Promises of Happiness**

In previous works, I and others have argued that sexuality has increasingly been associated with positive and active ageing, and to be continuously sexually active is understood as a way of resisting growing old while ageing (Marshall and Katz 2002; Sandberg 2011; 2013b). However, to qualify these arguments, it is not primarily sex as such that is celebrated as part of the good later life, but rather heterosexual intimacy (Sandberg 2013b).11 By intimacy, I mean something both sexual and non-sexual, a cluster of touch, sensuality, disclosure, and feelings of love and commitment that hold particular significance to the heterosexual culture. As Lauren Berlant and Michael Warner (1998, 553) argue, “heterosexual culture achieves much of its metacultural intelligibility through the ideologies and institutions of intimacy,” and intimacy is in turn understood as the “vision of the good life,” and this is increasingly salient also to later life.
The associations between intimacy and the good life of seniors are, for example, distinctly displayed on the home page of the Swedish Seniors’ Fair 2014, where the slogan “Senior: The Good Life” is accompanied by a photo of an older heterosexual couple standing side by side; they are old(-ish), suntanned and smiling. Although they have grey hair, their bodies are seemingly fit and their postures are straight, and beneath the photo there is the caption: “The fair for active seniors.” The heterosexuality of the picture is only implied by the proximity of their bodies and how she lightly touches his arm. This kind of portrayal of heterosexual intimacy and its associations with the happy, good later life are also to be found in numerous forms in the sponsored magazine, På ålderns höst, and the accompanying home page livetsomsenior.se. Smiling older couples are featured holding hands or embracing in settings that convey leisure, freedom, and relaxation: on sailing boats, on the beach or when walking down a narrow country road. The buzzwords of positive ageing, namely freedom, activity, health, and independence – repeatedly found in endless headlines – are thus continuously framed by heterosexual intimacy.

In *Queer Phenomenology: Orientations, Objects, Others*, Sara Ahmed (2006) discusses how bodies acquire shape and materiality through particular orientations; heterosexual bodies thus emerge as a result of being continuously directed towards the opposite sex. Therefore, the bodies in the photos in På ålderns höst and on livetsomsenior.se emerge and become intelligible as heterosexual bodies from how they are positioned towards each other, closely touching. Drawing on Judith Butler, Ahmed argues that what may seem a natural fact, that male and female bodies are made for and suited to each other, is the result of repeated orientations that happen over time. Hence, although there is no explicit linkage of heterosexuality and the life course in Ahmed’s work, her discussions of bodies as being “in line” when following pre-designated heterosexual directions can also be understood as following a life course into which heterosexuality is interwoven and expected (Sandberg 2015; see also Ambjörnsson and Jönsson 2010). The recurring photos of happily smiling older male and female couples could thus be viewed as giving
a direction to and shaping ageing bodies as always being heterosexual.

The concept of successful ageing could in itself be seen as guiding bodies in heterosexual directions as it is quite clear that Rowe and Kahn’s criterion “active engagement with life” through interpersonal relationships prioritises engagement with life through heterosexual interpersonal relationships. In discussing the significance of interpersonal relationships, Rowe and Kahn refer to the MacArthur Study’s tests that examined how neuroendocrine levels correlated with emotional support productivity and they state:

> Over a three-year period, marital status (being married), presumably a source of emotional support, protected against reduction in productive activity. (Rowe and Kahn 1997, 437)

Given the pervasiveness of heteronormativity, it may come as no great surprise that heterosexuality, through phrases such as “being married,” is assumed and taken for granted also in discussions of ageing and later life. What is interesting, however, is how implicitly heterosexuality/heteronormative relationships come to be equated with happiness and hence success in Rowe and Kahn’s successful ageing, as well as in the positive-ageing assemblage more generally. If being married is a predictor of continued productivity, which is understood as a sign of successful ageing, then marriage becomes a recommendation as a “promise” of the good later life (cf. Ahmed 2010, 6). Another example of the heterosexual couple as a promise of positive ageing and happiness is found in pharmaceutical discourses where erectile dysfunction is presented as a couple’s problem rather than the male’s. In these discourses, communication and in particular the care and concern of a considerate female partner are constructed as a potential cure for impotence (Johnson 2008; Åsberg and Johnson 2009).13

Importantly then, the heteronormativity of positive ageing, as visualised in the smiling couples featured in *På ålderns höst*, is not only about the alignment of male and female bodies towards each other but also about attributing particular positive, happy feelings to a heterosexual
coupled later life. In *The Promise of Happiness*, Ahmed (2010) extends the arguments in her previous work to discuss happiness as a “sociable feeling” that does not simply reside in individuals but *does* things, a feeling that sticks to some things rather than others. Family, marriage, and heterosexual love and romance are what Ahmed (2010) refers to as “happy objects,” promising happiness and a good life. By following a heterosexual line, one is expected to end up with happiness, but the promise of happiness is also what makes one stay in line.

Happiness scripts could be understood as straightening devices, ways of aligning bodies with what is already lined up. (Ahmed 2010, 91)

An opinion column in an issue of *På ålderns höst* with the headline “Time for a More Positive Attitude!” (Skoog 2014), illustrates the intertwinment and mutual saturation of happiness and heterosexuality in the positive-ageing assemblage. In this column, the gerontologist Ingmar Skoog discusses how ageing is currently changing and that the negative attitudes to ageing need to be reversed. Skoog (2014) points to the fact that older Swedes are less dependent on day-to-day care, have improved health, and travel more as reasons for more positive attitudes towards ageing. The call for a more positive attitude is also linked to better intimacy, as Skoog (2014) contends that older people living in “happier marriages are more sexually active and at the same time have fewer sexual problems.” The links between positive ageing and heteronormative intimacy are further reinforced by a photo at the bottom of the column, namely that of an older man with a slightly younger woman standing behind him and embracing him. In this case, happy marriages are understood as something from which positive ageing emanates, similar to the argument of Rowe and Kahn (1987). But the column’s call for a more positive attitude to ageing also functions as a promise of happiness in old age, not everything has to be dull and negative. This promise is underscored by the photo of the couple, conveying a fantasy of heterosexual intimacy – a happy relationship – of what a positive later life could be like. If, as Ahmed (2010, 10) states, happiness is both “a
means to an end, as well as an end,” then heterosexual happiness is what makes positive ageing positive and through which positive ageing can be achieved.

However, the heteronormative mode of belonging in positive ageing is not only produced by the happy heterosexual coupled intimacy discussed so far, but also by an orientation to family in particular ways. In an early article, “Age Norms, Age Constraints, and Adult Socialization,” Bernice Neugarten, Joan Moore and John Lowe argue that there exists a,

prescriptive timetable for the ordering of major life events: a time in the life span when men and women are expected to marry, a time to raise children, a time to retire. (Neugarten, Moore and Lowe 1965, 711)

While not observed by Neugarten and colleagues, this “prescriptive timetable” is also notably heteronormative. The heteronormativity of the prescribed life course is, however, picked up and examined in Halberstam’s work (2005), where the structuring of the life course is discussed in terms of heteronormative temporality. Halberstam’s discussion of temporality can plausibly be linked to Ahmed’s (2006) of how heterosexuality as an orientation is like a path, a line that directs and shapes us, but in parallel is also an effect of our work. Thinking with Ahmed, getting married, having a family and raising children emerge as natural parts of the life course, but are in effect also functioning as milestones, orientating the life course in specific directions. The family as a “happy object” then becomes points of alignment with a particular orientation, a heteronormative life course, and the family becomes points of alignment in the life course because it is presented as what makes you happy.

In På ålderns höst, there are several examples of photos depicting family happiness, namely older persons with their presumed grandchildren. The intimacy with a grandchild, through joyful play, talk and cuddling, thus visualises positive ageing as it suggests a successfully pursued life course. Beside the couple, the grandchild, sometimes described as “the dessert of life,” therefore signifies a fantasy of the good life in later life.
Importantly too, the grandchild’s proximity to the older person also actualises the heteronormative temporality that Halberstam (2005, 5) refers to as a “time of inheritance,” in which “values, wealth, goods and morals are passed through family ties from one generation to the next.” As such, the grandchild also comes to signify futurity in later life. If the negativity associated with old age is largely linked to a disabled future that eventually turns into a non-future through death, the grandchild becomes a trope of futurity, where one’s life course continues beyond one’s own life through the grandchild.

So far I have discussed how the positive-ageing assemblage is a project of heteronormative belonging by exploring how particular intimacies, the proximity of some bodies to others, come to represent the good, happy later life. Central to how positive ageing becomes positive is “its” affective alignments with heteronormative intimacies. In other words, what makes positive ageing positive is not only activity, health, and independence in later life but also happy relationships. Such relationships, as I have contended, largely seem to translate into heteronormative forms, such as romantic coupledom and family. But if positive ageing intermingles with happy heteronormative intimacies, we should also ask where happiness does not reach: what becomes the object of unhappy intimacies in later life? As critical scholars, including myself, have pointed to, if there is a way to age positively and successfully, some subjects and lives are thus deemed to be understood as failures, in particular as positive ageing is largely viewed as an individual responsibility (Calasanti and King 2005; Rudman 2006; Sandberg 2008; Rozanova 2010). How then does positive ageing as a heteronormative mode of belonging also castigate some lives as problematic, failed, and unhappy with regard to intimacy, sexuality, and interpersonal relationships?

**Dementia and the Unhappy Intimacies**

As noted earlier, the positive-ageing assemblage is not necessarily a break with ageism altogether, but rather positive ageing emerges as a form of new ageism, which, in the words of Martha Holstein and Meredith Minkler (2003, 793), “replaces an earlier generalized dread of age-
ing with a more specific fear of ageing with a disability.” The abjection of old age thus continues and is epitomised in the abjection of old people with disabilities. As Chris Gilleard and Paul Higgs (2011, 141) argue, it is not signs of ageing, such as grey hair, wrinkles, and sagging muscles, that are causing the abjection of old age, but rather “the perceived loss of agency and bodily self control and the failure to achieve any restoration of that loss – in short, the impotence to mount a transgression of agedness.” There is one case of ageing with a disability and illness that has come to symbolise this abject state of being out of control, “to have become ‘sans everything’” (Gilleard and Higgs 2011, 141), and which consequently evokes a widespread cultural anxiety about ageing: ageing with dementia (Stirling 1995). In this final part of the paper, I will suggest that ageing with dementia is positioned outside the positive-ageing assemblage and as something that threatens to disrupt the heteronormative mode of belonging.

In stark contrast to the happy intimacies discussed earlier in this article, where intimate relationships continue to be constructed as meaningful and positive, the intimacies and sexualities of people with dementia are almost exclusively deemed problematic and subject to constant policing and regulation in scientific discourse as well as care practice (Kontos and Martin 2013). That the sexualities and intimacies of people with dementia are constructed as something problematic is particularly evident in medical research discourses. Through the repeated use of words such as “inappropriate” or “improper” sexual behaviours or “hypersexuality” in the research literature, the sexualities and intimacies of people with dementia become something threatening, an effect of pathology that needs to be solved or managed by medication (Benbow and Beeston 2012). Studies also suggest that care staff perceive sexual expressions, including touch, as problematic, and that in particular sexual expressions among men with dementia were understood as threatening to a largely female workforce (Archibald 1998; Ward et al. 2005). The person with dementia, conceptualised as a person “out of his or her mind” and thus out of control, is hence commonly positioned as someone whose sexuality and intimacy are also out of control.
Although there is no clear consensus on the definitions of sexually inappropriate behaviour in people with dementia (Benbow and Beeston 2012), aspects that often come up commonly echo characterisations of queer sexualities. In a review of the literature on sexuality and dementia, Carmita Abdo, for example, states:

Inappropriate sexual behaviors are characterized by: excessive sexual comments, hugging/kissing/preoccupation with sex, increased libido, grabbing at the breasts and genitals, or either of them, of residents or staff, masturbation in public, sexual hallucinations, delusions of spousal infidelity, attempting to seduce/chasing residents or staff for sexual purposes, exposing one’s genitals/disrobing in public, and changes in sexual preference (paraphilic-related disorder). Some behaviors may be inappropriate only because they are performed publicly. (Abdo 2013, 594)

What is notable in the above definition is, for one thing, the range of disparate behaviours termed inappropriate, from the direct harassment and abuse of others to “excessive” interest in sex and changes in sexual preferences. Clearly, what is deemed “excessive” interest in sex is defined within a highly normative medical and care discourse, which seems to take little account of the experiences and feelings of sexuality and intimacy among people with dementia. Moreover, the statement that “some behaviours may be inappropriate just because they are performed publicly” evokes Gayle Rubin’s (1993, 13) sexual hierarchies, widely used within queer theory, which sets forth that public sex is devalourised as part of “bad, abnormal, unnatural, damned sexuality.” From this, it is possible to discuss how sexuality in people with dementia becomes problematic, queer, and a “matter out of place” because it does not sufficiently balance the desirable heteronormative intimacy. As pointed to earlier in this article, what is celebrated as part of the positive-ageing assemblage is not sex as such but the performing of heterosexual intimacy, something both sexual and non-sexual (cf. Sandberg 2011). The sexualities of people with dementia, as presented, for example, in the medical
research literature, thus are a disruption to heteronormative intimacy for being too sexual (for one’s age and place).

If heteronormative intimacies are part of what makes the positive-ageing assemblage positive, the failed intimacies of people with dementia are in turn commonly presented as a cause of unhappiness. However, the unhappiness of failed intimacies is not primarily discussed in relation to people with dementia but rather the unhappiness dementia causes partners and relatives. A lecture on early onset dementia I attended in 2014 may serve as an example of this. The lecturer, studying spouses’ experiences of early onset dementia, talked about sexual disinhibition in people with frontal lobe dementia and gave two cases in point: one, a woman with dementia who starts to pick up guys all the time, and two, a man who goes about molesting schoolchildren. These two examples are both used to show the difficulties faced by spouses and other relatives of people with dementia. Yet it is telling how the example of female sexual assertion and the other of child molestation are collapsed into equally problematic sexuality in dementia and consequently become a cause of unhappiness for spouses and relatives.15

The unhappy intimacies of dementia are also evident in the comments I receive when presenting my research project on sexuality, intimacy and Alzheimer’s disease. People then often remark on the unhappiness spouses experience when their partners with dementia enter into a new relationship because they have forgotten the spouses. This theme of dementia intimacies and unhappiness has also been portrayed in the Canadian film *Away from Her* (2006, dir. Sarah Polley), where a man reconsiders his own infidelities throughout his life as his wife with dementia becomes affectionate with another man at the nursing home where she lives. While I do not wish to overlook or downplay the hardships and grief that families of people with dementia may experience, I still find it noteworthy how people with dementia are associated with problematic or unhappy intimacies. If heteronormative intimacies are happy because of their connotations with social belonging (Berlant and Warner 1998), the unhappiness of dementia intimacies is to be understood from the “unbelonging” of people with dementia. The mass media
typically portray dementia as “a living death” and people with dementia are described as “lost” and increasingly strangers to themselves and others (Kontos 2012; Peel 2014). From this, it is interesting to trace the genealogy of unhappy back to “wretch”, which refers to a stranger, an exile or a banished person (Ahmed 2010, 17); the demented person as a stranger is thus a cause of unhappiness. In studies of dementia, there has been little discussion of how this purported loss of self, the stranger position of the person with dementia, also impacts on how gender in people with dementia is perceived. Perceptions of a loss of self are likely to also involve perceptions of degendering in dementia. Accordingly, if gender is perceived as “broken,” “failed” or “lost,” this, as Butler argued (1993), also renders the subject unintelligible and abject within a heterosexual matrix. The unhappy intimacies caused by dementia can thus be understood as resulting from a challenge to a heterosexual matrix and to heteronormativity generally, as this depends on binary and intelligible genders that are unperformed in dementia.

In this final part of the article, I have argued that the sexualities and intimacies of people with dementia are not incorporated into the positive-ageing assemblage, but cast out as unwanted and problematic and ultimately a cause of unhappiness. This argument, which merits further discussion, suggests that heteronormativity intermingles with compulsory able-bodiedness in the positive-ageing assemblage. The following and concluding section summarises some of the paper’s arguments and points to the need for a queer, feminist, and crip engagements in the futures of old age.

**Conclusion: Imagining Other Futures of Old Age**

Given the long-standing negativity associated with old age, the new optimistic approaches to ageing may indeed seem very appealing. However, to paraphrase the Queer Nation manifesto:

So “positive ageing” is great and has its place. But when a lot of old people wake up in the morning, they feel tired, grumpy, grieving, pain-ridden and confused, not positive.¹⁶
Thus, as enticing as it may seem to buy into promises of the happiness and optimism rather than the dullness and negativity of old age, the positive-ageing assemblage warrants critical examination. This article supports the work of critical and feminist gerontologists to explicate how positive ageing is a new form of ageism that overlooks and obscures intersecting inequalities and normativities. While there are many criticisms of the permutations of the positive-ageing assemblage, its heteronormativity has hitherto been scarcely discussed. Similarly, while queer studies has seen a wide array of complex and sophisticated discussions of heteronormativity, these critiques have rarely examined old age and later life and the forms of heteronormativity in discourses on old age and later life.

By discussing positive ageing as a heteronormative mode of belonging, I have sought to point out not only how heterosexuality is implicitly assumed in discourses on ageing and later life but also how positive ageing as the good later life becomes positive through associations with heteronormative intimacies, together with associations with productivity, activity, and health. The happy couple pictured in many places becomes...
a sign of success and happiness; the heterosexual path trodden throughout life reaches a happy conclusion. As noted in the introduction, old age like queerness shares associations with non-futurity. However, the heteronormative mode that underpins positive ageing seemingly creates a link to futures. In the advertisement above for PRO, the Swedish National Pensioners’ Organisation, the headline “What are you looking forward to?” is accompanied by a photo of an old couple walking hand in hand on a beach. This is a perfect illustration of how heterosexual romantic coupledom functions as a sign of a happy future for the positive agers. The grandchild is another significant trope for the future of the positive ager as the grandchild signifies extending the lives of older persons into the future.

There is, however, an underbelly where those lives that cannot be part of the positive-ageing assemblage linger; those subjects and lives cast out as unsuccessfully ageing because they are too poor, too disabled, too queer to be active and engage with life in prescribed ways. Where historically old age in general was presented as a time of misery, today old age with disabilities increasingly epitomises old-age negativity. In this article, I have discussed people with dementia as an example of unbecoming and unbelonging old subjects whose sexualities and intimacies are rendered problematic and unhappy in the bright lights of positive ageing. The sexualities of people with dementia are positioned as problematic because they emerge as queer and “matter out of place,” too sexual and in the wrong ways and places.

If the positive agers’ non-disabled heteronormative intimacies form a link to (happy) futures, ageing with dementia in contrast comes to epitomise the loss and/or absence of future. As feminist, queer, and disability scholar Alison Kafer (2013, 3) has noted, “disability is seen as a sign of no future or at least no good future,” and visions of futures are thus based on the disavowal of disability. This argument resonates interestingly with how positive ageing emerges as the future of old age through alignments with heteronormative and able-bodied intimacies. Although the future of old age is in many respects a future of dementia, with the proportion of the world’s population who will live with dif-
Different forms of dementia expected to rise rapidly, the positive-ageing assemblage allows no future visions of ageing with dementia.\textsuperscript{17} Therefore, future queer, crip, and feminist theorising should engage in further critiques of what emerges as visions of good, and, in effect, liveable later lives. But the critiques will also provide ways of thinking of old age differently from the lives and intimacies of tired, grumpy, grieving, pain-ridden, confused old people.

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NOTES

1. See, for example, *lambda nordica’s* special issue (2011) with the theme “Child.”

2. For current discussions of links between queer theory and old age, see Sandberg (2008), Ambjörnsson and Jönsson (2010), Port (2012), and Fabbre (2015).

3. Paraphrasing Sara Ahmed (2010, 8): “Surely feeling better is better, and we all want to feel better?”

4. Moreover, as I have argued elsewhere, this development towards positive ageing parallels the liberal gay assimilationist rhetoric on tolerance and new openness towards gay men and lesbians, which suggests an increasing progressivism in sexualities (Sandberg 2008), yet depends on the abjection of the queer/abject/pervert in a similar vein to how the frail/passive and elderly are rejected and rendered abject (cf. Sandberg 2008).

5. Among the many examples in this article, my discussion draws in particular on examples from the home page livetsomsenior.se [life-as-a-senior, my translation] and the sponsored magazine *På ålderns höst* [In the autumn of our lives, my translation] as instances of the cultural imaginary of positive ageing. They were chosen as sites because I understand them to be very illustrative of knowledge production on ageing and later life at the interface of scientific geriatric and gerontological policy and commercial discourse. Both the magazine and the home page are the creations of the Swedish office of the global marketing house Mediaplanet, which produces content marketing, and are thus commercial products; yet they combine advertisement with lifestyle articles and with interviews with researchers and experts.

6. *Seniormässan* [the Seniors’ Fair] is a fair for companies and organisations exhibiting products and services aimed at an older population. The fair also includes seminars and events (Seniormässan 2014).

7. I do not regard positive ageing as either a power to oppose or support, and for this reason assemblage is a useful concept. As Jasbir Puar (Darkmatter 2008) notes: “A main component of assemblage is that it resists the call to announce a complicity-versus-resistance binary, recognizing that complicities are multifarious and just
as unstable as resistances.” In other words, positive ageing may be understood as useful to resist earlier negative misery discourses on old age while reinforcing new forms of ageing, as I will discuss later in the article.

8. For a background on the emergence of the concept of successful ageing and its development in research, see Bülow and Söderqvist (2014).

9. The project title has a dual meaning, which does not easily translate. To “live life” [leva livet] could in Swedish also refer to having a good time and enjoying oneself. The term live life long then not only means living a long life but also enjoying oneself for a long time (in later life).

10. For an extensive discussion of the criticisms of the active-ageing paradigm (which I refer to as the positive-ageing assemblage) by critical gerontologists, see van Dyk (2014).

11. Although there are a few attempts to discuss the successful ageing of LGBT people (see, for example, Van Wagenen, Driskell, and Bradford, 2013), the positive-ageing advocacy for lifelong sex simply assumes heterosexuality. It is hardly surprising that the continued sexual cavorting of old femmes, leather bears or queens rarely makes it into these discourses.

12. With old-ish, I wish here to underline that the people in the photos are what is sometimes referred to as young-old (in their mid-fifties to seventies) or “third agers” who are still able-bodied and independent.

13. According to this example, it is worth considering how the heterosexual couple, as a potential for happiness and positive ageing, in effect relies on the care and love of women.


15. It is clear from this example how inappropriate sexual behaviours are gendered too so that a woman’s sexual advances are positioned next to a man’s sexual assaults. For a discussion of this, see also Stirling (1995).

16. The original phrasing appeared in the Queer Nation manifesto, distributed at the 1990 New York Gay Pride parade: “Yes ‘gay’ is great, it has its place. But when a lot of lesbians and gay men wake up in the morning they feel angry and disgusted, not gay.” (History Is A Weapon 2014)

17. Today approximately 44.4 million people are living with dementia worldwide, and statistics presented by Alzheimer’s Disease International (2014) predict that 135.5 million people will be living with dementia by 2050.
SAMMANFATTNING
Trots ett ökat teoretiserande av queer tid och queera temporaliteter är queerforskningens intresse för åldrande och äldre påfallande ljumt. Att tänka samman queerteori och åldrandeforskning är dock ett angeläget och löftesrikt projekt som inte enbart handlar om att studera livsvillkoren för äldre L/H/B/T/Q-personer utan även om att utforska hur normativitet kan förstås i relation till äldre och det goda livet (i ålderdomen) i en vidare bemärkelse. Åldrandet och äldre har ofta, liksom queera liv, kommit att förknippas med skam, äckel och det bakåtsträvande: själva framtidens motsats. På senare tid har de negativa diskurserna om åldrande dock kommit att samsas med mer positiva, enligt vilka livet på ”äldre dar” innebär en möjlighet till fortsatt aktivitet och delaktighet och betraktas som en tid för självförverkligande efter pensioneringen. Kritiska forskare har problematiserat det goda/positiva/framgångsrika åldrandet som det formulerats inom såväl forskning som populärkultur och massmedia, och menar att nya, positiva diskurser riskerar att osynliggöra intersektionella ojämlikheter mellan äldre. Denna artikel utvecklar existerande kritisk forskning om positivt åldrande genom att diskutera heteronormativitet och hur positivt åldrande konstrueras som just positivt genom att associeras till tvåsamma heterosexuella relationer och barnbarn. Artikeln diskuterar uttryck för positivt åldrande inom massmedia och forskning och kopplar samman dessa med Sara Ahmeds teoretiserande av heterosexualitet, familj och lycka. Frammanandet av det positiva åldrandet och den sammanhängande heteronormativa ”lyckliga” intimitetten sker dock genom en kontrastering mot ett ”misslyckat” och ”olyckligt” åldrande, som knyts till åldrande med funktionsnedsättningar i allmänhet och demenssjukdom i synnerhet. Genom medicinska diskurser om ”sexuellt opassande beteenden” hos demenssjuka äldre positioneras dessa som problematiska, abjekta, och queera (icke)subjekt, vilkas intima relationer framställs som olyckliga relationer. Avslutningsvis diskuteras artikeln hur heteronormativa relationer och intimitet fyller en viktig funktion i konstruktionen av det positiva åldrandet, som en länk till eller association med framtid och en disassociation med negativitet, förlust och död i åldrandet.

**Keywords:** heteronormativity, ageing, later life, successful ageing, dementia, queer ageing