“A Wrinkle in Time”: Growing Old, Or, A Queer Unbecoming

by

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If only out of vanity
I have wondered what kind of woman I will be
when I am well past the summer of my raging youth
Will I still be raising revolutionary flags
and making impassioned speeches
that stir up anger in the hearts of pseudo-liberals
dressed in navy-blue conservative wear

In those years when I am grateful
I still have a good sturdy bladder
that does not leak undigested prune juice
onto diapers—no longer adorable
will I be more grateful for that
than for any forward movement in any current political cause
and will it have been worth it then
....
Will I tell my young attendant
how slender I was then
and paint for her pictures
of the young me more beautiful than I ever was
if only to make her forget the shriveled paper skin
the stained but even dental plates
and the faint smell of urine that tends to linger
in places built especially for revolutionaries
whose causes have been won
or forgotten

Will I still be lesbian then
or will the church or family finally convince me
to marry some man with a smaller dick
than the one my woman uses to afford me
violent and multiple orgasms

Will the staff smile at me
humor my eccentricities to my face
but laugh at me in their private resting rooms
saying she must have been something in her day
....

“If Only Out of Vanity,” Staceyann Chin
Introduction:

Imagining Queerness Past the Summer of Our “Raging Youth”

“Queer” does not want to grow old. It is a long journey and queer fears it might get lost. After all, growing old presupposes that one has already grown up, right? And growing up is nothing if not a straightening procedure, during which people learn how to inhabit and deploy their bodies “properly” and are punished for “incorrect” or “immature” usage. Growing up is swollen with prescriptive expectations that exceed any simple notion of chronological progress through time. In her poem, Staceyann Chin draws an adversarial relationship between queerness and aging that is indicative of widely expressed queer sentiments towards time. She fears that growing up threatens to deplete queerness and growing old is simply the senescent telos of this diminishment. Chin wonders if she will “still be a lesbian then” after the season of her “raging youth” has passed, implying that queerness is both perishable and elusive, something that ruptures and alters a young life just long enough to exert sexual and political influence, but is necessarily terminal, never built to last.\(^1\) If queerness does not keep, then nursing homes are exactly as Chin describes: repositories for expired revolutionaries who still wax poetic about the queer old days but cannot seem to reconcile lesbianism with their “shriveled paper skin.”\(^2\) The elderly are imagined as little more than the ghosts of queerness past, casualties of an aging process during which heterosexual mores and capitalist value systems are concretized and enacted through the body as a sign of maturity and obedience.

\(^1\)Staceyann Chin, “If Only Out of Vanity,” Womanist Musings, http://www.womanist-

However, the notion that “growing up” and “growing old” operate continuously on a single temporal plane, as two parts of one unbroken teleology that de-queers without deviation, is an erroneous assumption that forecloses any possibility of queer emergence in later life. My project concerns growing old as a time that is not coextensive with growing up, but is rather a departure from it. I argue that growing old is an unbecoming process that wrinkles temporalities of desirable heterosexual growth to the point of unrecognizability. In short, growing old is a queer time.

This is a peculiar and provocative claim given that the AIDS epidemic, an illness event that transformed old age into an unattainable life stage for a large segment of the queer population, is frequently cited as the impetus of queer time. At the height of the epidemic, illness and death made funerals alarmingly quotidian in gay communities; abruptly attenuated lifespans were no longer exceptional, but commonplace. The eponymous protagonist of John Weir’s 1989 novel, The Irreversible Decline of Eddie Socket, perfectly characterizes the shifting material conditions and contexts of queer life that arose during the AIDS epidemic: “Everyone does not get asked to a viewing thrice a week, unless they’re eighty-seven or living in London in the plague of 1592…or a New York homosexual at 6:00 am this Friday at the end of March.”\(^3\) This altered proximity to illness and death generated novel expressions of queer time. After the possibility of growing old was foreclosed for many, this non-consensual shortening of life was intentionally revalued in queer theory as a source of temporal reorientation with a robust legacy. Queer theorists including Jack Halberstam, Leo Bersani, Lee Edelman, and Tim Dean each articulate

contemporary variations on HIV-inspired queer times, characterizing queer time as that which defies narratives of desirable maturation by relishing livelihoods that stray from the perfunctory compulsion towards “reproductive futurity” and flout cursory expectations of longevity.⁴

Theoretical tendencies to position queerness as that which does not grow up, and by extension does not grow old, were initially inspired by the impossibility of biological growth and chronological progression for many queer people during the AIDS epidemic. This was a pragmatic theoretical move that beautifully demonstrated a generative intimacy and inseparable loyalty between queer academics and queer activists (many were both) at the time. However, moralizing political associations between respectable assimilation and “growing up” likely exacerbates the virulent antipathy towards or even simple neglect of the aging process in queer theory today.

In If Memory Serves: Gay Men, AIDS, and the Promise of the Queer Past, Christopher Castiglia and Christopher Reed detail the attempts of gay neoconservatives in the 1990s to publically denounce and “relentlessly reconfigure” the sexual revolution that “caused” AIDS as a “site of infectious irresponsibility” from which maturation and growth was necessary.⁵ This display of strategically selective recall and doctored remembrance allowed some gay people to cast themselves as more grown up than others, and thus, more amenable to straight

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⁵ Christopher Castiglia and Christopher Reed, If Memory Serves: Gay Men, AIDS, and the Promise of the Queer Past (Minneapolis: U of Minnesota Press, 2012), 4.
acculturation and “state recognition in the form of “rights.”” Subsequent shifts in LGBT political agendas, from sexual liberation and AIDS activism to marriage equality and the right to join the military, instigated the divisive beginnings of a two-tiered system between what Michael Warner calls “good gays” and “bad queers.”

While “good gays” wish to progress through a life course that uncomplicatedly reifies heterosexual respectability, replete with marriage, reproduction, and other rites of proper maturation, “bad queers” do not wish to grow up if growth is only assessed and redeemed according to heterosexual metrics of development and value.

Queer theory is unequivocally the province of the “bad queers” and their queerness is frequently contoured by the abject refusal of respectability that heterosexually mandated growth affords. The vast majority of queer theorists produce a critique of a particular compulsory life course in their scholarship from which a particular person or population must necessarily deviate to enroll as “queer.” Lisa Duggan’s criticisms of neoliberal “homonormativity,” Jasbir Puar’s discussion of pink washing and “homonationalism,” and José Muñoz’s dismissal of “gay pragmatism” and other symptoms of compliant ordinariness as “anti-utopian,” and thus, unqueer, are all concerned with an LGBT life course that gradually inspires conservatism and dilutes the disruptive quality of queerness as one grows older. I am not arguing that these concerns are unfounded; homonormative scripts for “growing up” inculcate and pardon both conceptual and material violence against queer people.

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6 Ibid., 40
by approaching queerness with the intent to soften, sterilize, or eliminate it altogether. However, wholesale disavowals of “growing up” as a process that is antithetical to queer emergence consequently casts its teleological predecessor, “growing old,” as a life stage in which queer possibility is unfathomable.

The logic follows that if one has grown up and been complicit in, or even exposed to, the compulsory choreography of reproduction and marriage, that queerness cannot possibly withstand this methodical repression and it will invariably dwindle and die. If “growing up” is an ascent/descent into heterosexual social sedimentation, then “growing old” is tacitly imperiled as a site of social stagnation in which heterosexual habits calcify and harden as old folks become irreparably set in their ways. When “growing up” and “growing old” are imagined as one continuous de-queering narrative, queerness is fashioned as fragile and puritanically rendered as something that cannot withstand contamination and contestation. This reductive rendering counters popular and empowering notions of queerness as resilient and capable of enclosing contradictions without negation. Further, tendencies to conflate growing up and growing old harmfully collapse compulsory “straight” time with what Alison Kafer terms “temporalities of inevitability,” a concept largely discussed in disability studies which asserts that disability is only a matter of time, an inexorable result of “illness, aging, or accident.”

While growing old is far from promised, particularly amongst populations that incur a higher incidence of social death (i.e. racialized minorities, low-income populations, trans* folks), it is largely considered a temporality of inevitability.

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because more people are statistically capable of reaching later life in the United States than are not. The frequency with which people grow old in the U.S. makes it an increasingly common experience, and I would argue, less immediately queer as a result.

What is “queer” is characteristically associated with what is uncommon, and more importantly, what is disruptive in its novelty. While the aging process unfolds unpredictably in every person, aging is still more broadly considered a biologically predictable phenomenon that is far from novel, and thus of little interest to queer theory. Queer theorist Carla Freccero contends, “concepts like growing, then growing up, then aging, getting old, and dying sketch a predictable, inevitable, irrevocable time line,” before advocating for queer times that depart from such a stiflingly foreseeable future.

Freccero’s assessment of growing old maintains that it is both a simple extension of compulsory imperatives to grow up, and thus a threat to queerness, and also a benign, biologically predicated experience that is not exciting enough to warrant queer consideration. Elizabeth Freeman similarly conflates compulsory “straight” time and biologically inevitable time when she describes

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10 Sociologist Orlando Patterson was one of the first scholars to use the term social death. He defines the term in relation to U.S. American histories of enslavement in *Slavery and Social Death*. Patterson refers to the slave as a “socially dead person” who did not exist outside of their relationship to their master while also experiencing dehumanization within the context of this relationship [(Cambridge: Harvard University Press, 1982), 38.] Since then, scholars have adopted the term and applied it to marginalized populations in the twenty-first century who live below the threshold of intelligible humanity. Lisa Maria Cacho argues that “to be ineligible for personhood” is a sign of social death often incurred by low-income, criminalized populations of color [*Social Death: Racialized Rightlessness and the Criminalization of the Unprotected* (New York: New York University Press, 2012), 6.] My deployment of the term social death most closely aligns with Cacho’s.

“chrononormativity” as an embodied process in which “institutional forces come to seem like somatic facts.”

Queer theorists frequently reference straight time’s ability to somatically implant itself to the point that its exteriority, as an imposed time, is undetectable, and thus, practically synonymous with the body’s own “natural” time. Subsequently, temporalities of biological inevitability are frequently dismissed as that which is already coeval and complicit with straight time or simply too banal to be queer. As a result, growing old remains unthought and unconsidered.

This project challenges exclusions and erasures in queer theory concerning aging in later life. I elucidate tendencies to overlook older populations while asking why their unique spatiotemporal orientation, at the far end of the human life course, and the embodied temporalities this orientation engenders, are often ignored and unaddressed in queer theories of time. I contend that growing old is not a process of ontological stagnation, but a queer unbecoming and rebecoming of the self that deviates from narratives of desirable maturation and challenges us to rethink not only what constitutes queer time but what makes a valuable and viable human life.

While perhaps not immediately apparent, notions of what does or does not constitute “straight time” in queer theory are of central importance when attempting...

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13 José Muñoz references straight time as an “autonaturalizing temporality,” which corresponds with Freeman’s characterization of straight time as somatically implanted. An “autonaturalized” straight time is adopted and integrated into the self in ways that are largely unnoticed and undetectable, and thus naturalized as self-made rather than externally imposed. [Cruising Utopia: The Then and There of Queer Futurity* (New York: New York University Press, 2009), 22.] Although Adrienne Rich did not address time specifically, and is also not explicitly canonized as a queer theorist, her characterization of heterosexuality as “compulsory” supports the notion that “straight” orientations in time and space would also be compulsory and naturalized [Compulsory Heterosexuality and Lesbian Existence* (London: Onlywomen Press, 1981).]
to revalue growing old as a queer time. Queer theories of time often fashion themselves as a reaction to and negation of straight timelines and proceed to define themselves in opposition to what constitutes a “straight” orientation in time. The problem with this is that most iterations of queer time craft themselves in relation to a “straw man,” a version of straight time that does not exist beyond the confines of queer theoretical literature.\(^\text{14}\) A central assertion that is woven throughout every chapter of this thesis is that straight time is not always “straight,” as in linear, or common, as in biologically inevitable. If it were, growing old would certainly be a straight time.

I argue that straight timelines are not linear, but rather recursive, eternally striving to loop backwards towards the earlier life stages in a society that unequivocally values youth above all else. While a romanticized, disembodied version of longevity is desirable in straight time, its embodied reality, growing old, is not. This, in turn, means that straight time does not unequivocally value or tend towards “common” temporalities of inevitability, which include aging and growing old.\(^\text{15}\) Straight time is the fairy tale of desirable of maturation, of growing up, that conveniently concludes there; straight time explicitly does not want to touch the

\text{\(^\text{14}\) The only moment that I have located in queer theoretical literature thus far, in which the contours and characteristics of straight time are debated rather than declared is in } GLQ \text{’s “Queer Temporalities” roundtable. Annamarie Jagose riffs on this idea of a “straw man” straight time by critiquing uncritical tendencies in queer theory to “invoke as our straight guy a version of time that is always linear, teleological, reproductive, future oriented” and goes on to acknowledge that time has been imagined in other intellectual histories and fields as “cyclical, interrupted, multilayered, reversible, stalled—and not always in contexts easily recuperated as queer.” While the implication here is that straight time is not always linear, teleological, etc., Jagose does not explicitly make this argument, she only hints at it. Her primary respondent (Carla Freccero) immediately gravitates towards discussing what makes time characteristically queer rather than engaging with the suggested but unasked question posed by Jagose: What is straight time if it is not as “straight and narrow” as we might initially imagine? How might that change our notions of what constitutes queer time? These are the questions that I am attending to in this project. [13, no. 2-3 (2007):186-187)]

\text{\(^\text{15}\) Alison Kafer, } Feminist, Queer, Crip, 26.
embodied reality of growing old. Unfortunately, when queer theories of time do not see the insidious complexities of a straight time that disowns the later life stages, queer time reinstates the same exclusions and erasures, enacting epistemic violence that goes largely unnamed and unnoticed. This thesis sees these exclusions and erasures and seeks to compassionately, even radically, rectify them.

Temporalities of inevitability, those that draw people to their bodies as they undergo somatic changes, are common, but contrary to many queer theoretical implications, their quotidian frequency does not make them “straight.” The tendency to disregard embodied, biologically inevitable temporalities, times that emerge most spectacularly through illness, disability, and aging, perpetuates the unmarked presence of an “ideology of ability” in queer theory. Tobin Siebers defines the ideology of ability, at its simplest, as a preference for able-bodiedness; at its most severe, ideologies of ability devise the “baseline by which humanness is determined.” While my project does not directly and explicitly contend with disability studies in every chapter, the aging process is almost always seen through an optic of disability and illness. I argue that the ageism in popular iterations of queer time is fortified by ableism and that any expression of ageism more broadly is supported by the ideology of ability. As a result, I rely heavily on crip theory when revaluing growing old, particularly its embodiment, as a time of somatic alteration that can facilitate a reintroduction to the self. While my work explicitly addresses growing old as a queer time, the epistemological reorientation that I advocate for can turn queer theory towards the feminine, the crip, people of color, and the aging--

16 Ibid.
18 Ibid.
anyone who experiences “excessive,” maligned, or otherwise compromised embodiment that dramatically alters their orientation in time and space.

While my argument is further nuanced in each chapter, the larger stakes of this project remain the same throughout. Queer time that incorporates growing old and acknowledges, or even makes an effort to look for emergent queerness in later life combats homophobic claims that queerness is perishable. When queer time, queer theory, and queer culture uniformly envision “queer” as the province of the young or defiantly youthful, “queer” has an expiration date and a limited shelf life. While not the focus of my work, the pity and contempt that often emanates from the queer community when people come out in later life is a testament to the notion that queer emergence is time sensitive and demeaned or discredited if it occurs belatedly.19

By only recognizing the earlier life stages as the “right time” for queerness to emerge and become, we legitimate the expectation that queerness is easily outgrown and discarded. When queerness is temporary, only a matter of time, we confirm that, Yes, one day soon all queer folks will start loving the “right” people and having sex the “right” way. We need a queer time that acknowledges the durability and persistence of queerness and its ability to grow in the most unlikely of places.

Refocusing queer scholarly attention on those who are aging later in life expands vistas of queer possibility throughout the life course. A dilated queer time that is more

19 Nguyen Tan Hoang briefly discusses a “homonormative timeline” in the GLQ “Queer Temporalities” roundtable, which directly addresses ageism in queer culture and community. He asserts that “We pity those who come out late in life, do not find a long-term partner before they lose their looks, or continue to hit the bars when they are the bartender’s fathers’ age.” Curiously, he relegates ageist sentiment to expressions of queerness that exist squarely outside of academia by explicitly designating this timeline as “homonormative,” a term that is mostly used by queer intellectuals and activists to denote assimilative gay populations. I argue that queer theory is not immune from the ageism that he denounces as “homonormative,” and that rather, ageism is often embedded in some of the most rigorously radical and academic iterations of queerness [13, no. 2-3 (2007):184.].
accessible to and creatively imagined through the elderly and the aging might begin to rectify the endemic erasure, medical neglect, and social isolation of gay elders in queer communities, by locating queerness as something that can and should continue to surface regardless, or of even *because* of old age. Given that orientation in time intimately influences subjectivity, wrinkling queer temporality necessitates a new queer ontology, a form of queerness that survives well past the summers of our “raging youth.”

I. Methods: Distinct and Scalable Approaches to Wrinkling Queer Time

My project incorporates two methodological approaches that take my central assertion, that growing old is a queer time, and demonstrate distinct but scalable means of furthering this claim. I analyze two embodied temporalities, including aging in later life with HIV and menopause, as exemplary instances of growing old as a queer time. I assume a phenomenological approach and a psychoanalytic approach, respectively. When writing about aging with HIV as a queer time, I take a phenomenological approach, which means that I study the way a particular embodied experience is structured, felt, and conveyed through a first-person lens. More specifically, I analyze first-person illness narratives produced by long-term HIV survivors who are chronically living and aging with the virus. This chapter offers a micro-level, everyday demonstration of growing old, particularly growing old with a chronic condition, as a queer time. I refer to this methodological approach as “micro” not only because I am centering narratives of the everyday, but also because I focus
on how queer theories of time respond to and fashion themselves in reaction to micro-level expressions of straight time, as a time of immediate, daily discipline and control.

My following chapter concerns queer disruptions of what I call macro-level teleologies in straight time, namely Lee Edelman’s characterization of reproductive futurity.20 Because this chapter concerns macro-level expressions of straight time and similarly macro-level articulations of queer futurity and world-making, I adopt a macro-level methodological approach that operationalizes a more fantastic register of storytelling. I implement a psychoanalytic framework, in keeping with Edelman, to discuss menopause as a queer time that disrupts reproductive futurity and manifests an abject figure, the postmenopausal Crone. I argue that the Crone ruptures the symbolic and can function as a metaphorical device through which to reimagine queer futures as a site of gerontocratic reworlding.

Each chapter adopts either a micro- or macro-level method of thinking about growing old as a queer time that is distinct, and can be read as such, but they are also fruitfully interrelated. My psychoanalytic chapter and the revisioning of queer futurity that it provides, doubles as a call for an epistemological shift in queer theories on time that would embrace and value the phenomenological work that I do in the preceding chapter. In other words, my phenomenological chapter models one example of the theoretical reorientation I advocate for at the close of my psychoanalytic chapter. As a result, my chapters are discrete extrapolations on the same assertion and a scalable contribution that functions productively in tandem.

II. A Word On Race

The question of race and its space, or lack thereof, in my project has been a vexing one for me since its inception. If anything has become abundantly clear to me throughout the course of this project, it is the unbearable whiteness of growing old in a U.S. American context. The very notion of longevity is a classed and racialized privilege that is disproportionately accessible to white, upper-middle class Americans, while the conditions that secure a long life are far more elusive for low-income people of color. Consequently, there is a dearth of gerontological scholarship, or literary and filmic representations, specifically addressing the experiences of people of color who are growing old. This scarcity necessarily limits the scope and range of my work. While I use *To Be Left with the Body*, a publication of prose, poetry, and essays written by and for black gay and bisexual men with HIV as an illness narrative source in my second chapter, I could not access enough stories to explicitly provide a more racially differentiated analysis of aging with HIV. 21 There is much ethnographic work to be done on the particularities of growing old as a person of color in the United States and the queerness that can and does emerge from these traversals of the life course. However, this kind of research deserves forethought and resources that exceed the bounds of what I could possibly accomplish in a project of this length, produced under such limited time constraints.

While the implications of race on the aging process are not centrally featured and discussed in my thesis, they are ever-present and certainly necessary to grasp. Any discussion of queer time and what it is or is not is shaped by a conversation about straight time and the heterosexual life course. This is an implicitly racialized conversation, given that the straight timeline from which most iterations of queer time stage their departure is also a white timeline, although it is infrequently acknowledged as such.\(^\text{22}\) Prescriptive progression through the life course, from childhood through later life, assumes an undisturbed chronology with codified notions of age appropriateness. In this highly selective life course masquerading as the universal, a 5 year-old child is always innocent and every adolescent has not only the responsibility but also the capacity to become a productive adult. However, children of color are rarely considered innocent and are frequently associated with “adult” criminality and sexuality that disturbs the notion of chronological development and suggests that people of color are prematurely aged by their race.\(^\text{23}\) Despite this, people of color are also regarded as perpetual children who are incapable of becoming productive adults.

\(^{22}\) This discussion of people of color and their limited access to the straight, white life course, which is defined as the universal life course, is influenced by Sharon Patricia Holland’s analysis of the ordinary and quotidian dimensions of racism in *The Erotic Life of Racism*. She writes, “Those who order the world, who are world-making, master time—those animals and humans who are perceived as having no world-making effects—merely occupy space.” People of color are measured according to temporal standards that are made by and for white bodies, and as such, are always earlier or later, figuratively younger or older, than white people who share their chronological age [(Durham: Duke University Press, 2012), 10.]

\(^{23}\) My “A Word on Race” section is the product of an incredibly memorable conversation I had with Vincente Perez, a friend of mine who is an undergraduate and fellow Mellon fellow at University of Chicago. Last summer (2014), we discussed instances of non-chronological aging, more specifically age that fell prematurely on black populations in the United States. After this conversation, he wrote a blog entry on “Colored People Time (CPT)” and its humorous and sinister implications. He argues “the experience of time and maturity in America is significantly different for people of color, especially black people.” [“Living Perpetually in the Future: Low Income/Minority Time,” *SubVersive*, posted on August 31, 2014, https://subversive913.wordpress.com (accessed April 9, 2015).] I felt lucky to have such an honest and vulnerable conversation about time and race that summer and wanted to
Racialized minorities are variously construed as too old and too young for their age, effectively displacing them from the straight timelines from which queer time consistently fashions itself. As a result, the tension between “queer” and “straight” time often produces a hermetically sealed dialogue that preserves the unmarked whiteness of the life course and rarely considers deviations from it that illuminate how people of color are already alienated.

What’s more, certain figures and models of aging in later life are made only for aging white bodies. This is a reality that I was forced to contend with when writing my third chapter about the figure of the Crone as an emblem of wizened, or wrinkled queer futurity. The Crone, at least in her most monstrously queer iteration as the body that maliciously marks the end of reproductive femininity, and thus, reproductive futurity, is explicitly raced white. Her descent into sinister sterility indexes the possibility of becoming unmaternal, a privilege that is culturally relegated only to the white female body as it ages. For black women in particular, the persistent resonance of the Mammy figure imagines them as eternally maternal and frequently not in service of or for the benefit of their own children. The cessation of reproductive and maternal expectation that is so fervently placed on the black female body, all the while condemning her for inadequate or “bad” mothering, is largely ubiquitous and unrelenting. As a result, the figure of the Crone as a radical or revolutionary character cannot be easily or simply reclaimed for people of color.

While acknowledging this fact wholeheartedly, I argue that my use of the Crone as a metaphorical device for inspiring new trajectories of thought in queer time acknowledge Vincente for helping me think about the racialized dimensions of the life course more readily.
does imagine an epistemological turn in queer theory that is inclusive of and sensitive to the ways that people of color are positioned, in space and in time, in the United States. My conclusion gestures towards a revaluation of queer time and futurity that is more critically embodied, and thus potentially more attentive to racialized ruptures of straight time and their queer resonance.

III. Chapter Outlines:

In Chapter One, I explore the coextensive relationship between ageism and youthism in queer time. I analyze the reasons why queer time remains beholden to iterations of what I term *youthful anachronism*, in which queerness is consistently depicted as a departure from the institutionalized life course that also prolongs childhood or adolescence. Kathryn Bond Stockton’s “queer child,” Jack Halberstam’s “extended adolescence,” and Lee Edelman’s “refused futurity” provide exemplary case studies of youthful anachronism. I go on to demonstrate how queer temporal identifications with youth may unwittingly collide with desires for eternal youth that pervade straight time. Subsequently, I call for a theoretical reorientation in which queer theory critically rethinks the parameters of queer time by considering the aging process as one that might inspire queer emergence and possibility.

Chapter Two provides a phenomenological analysis of HIV-inspired chronicity as an externally imposed, somatically implanted, and embodied temporality with queer consequences for long-term survivors who are growing old with the virus. I argue that it is impossible to imagine a wrinkled queer time, one that
finds value in growing old, if we do not crip queer time as well, by emphasizing the inseparability of aging and disability, ageism and ableism. I contend that growing old with HIV as a chronic condition is a *queer-crip time* that necessitates dependence on a prescribed life course that is pharmaceutically ordained and clinically embedded. When queer time avoids imbrication with the clinic and the chronic, queer time mirrors the most exclusionary aspects of “straight-masculinist” time as radically disembodied, and thus, inaccessible to those who experience compromised, and subsequently, amplified forms of embodiment. Ultimately, I argue that those who are aging with HIV as a chronic condition experience *ontological distillation*, an amplified feeling of embodied wakefulness that emerges in illness when provisional health is chronically managed. Ontological distillation manifests a more accessible queer time that does not evacuate the body but is actually imagined through and inspired by somatic changes, including illness and aging.

In **Chapter Three**, I advocate for the revaluation of menopause as a queer time because it marks the cessation of reproductive femininity, and thus, reproductive futurity. By focusing on menopause as a queer time, I further nuance arguments from previous chapters about queer time’s reluctance to recognize embodied, inevitable temporalities as queer, and challenge this disinclination by introducing its uniquely gendered components. More specifically, I trouble a masculine bias in queer theories of time, and queer theory more generally, that routinely constructs explicitly “feminine” biological time as un-queer. I advocate for a turn towards Kristeva’s abjection as a psychoanalytic framework for reading menopause and the Crone into Edelman’s conversation about reproductive futurity and the Child, a conversation that
otherwise perpetuates the notion that queer departures from reproductive futurity are necessarily masculine and disembodied. I argue that the Crone, when loosed into the Lacanian symbolic imagination that Edelman draws upon in his discussion of the Child’s eternally sanctified reproductive future, consumes and dethrones the Child. Ultimately, I assert that the Crone is emblematic of a new queer futurity that prioritizes the excessively embodied, the corporeally compromised, the “wrinkled” in time.
Chapter One:
Whose Time is it Anyway? The Inseparable Ageism of “Queer” and “Straight” Time

*If queer theorists have agreed on anything, it is that, for queer thought to have any specificity at all, it must be characterized by becoming, the constant breaking of habits.*

- E.L. McCallum and Mikko Tuhkanen, *Queer Times, Queer Becomings*

*Personhood requires the individual to have acquired physical, cognitive, and emotional maturity. Thus children become persons when they grow up. By the same token, the loss of any of these attributes means that old people can un-become persons (hence become un-persons) as they grow old.*

- Andrew Blaikie, *Ageing and Popular Culture*

In 2014, Esurance introduced the general public to Shirlee. Shirlee is an older woman who appears in a series of car insurance commercials featuring elderly people who are portrayed as adorably outdated. In this commercial, Shirlee is hailed as a “Candy Crush Enthusiast” and “Record Smasher,” suturing her to signifiers of a Smartphone toting youth culture. Of course, we quickly discover that Shirlee is not crushing candy with the light tap of a dexterous thumb on a touch screen, but crushing hard candy on a wooden table with gleeful swings of her hammer. Shirlee displays childlike exuberance with each satisfying blow and exclaims, “When you

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2 Blaikie’s definition of “personhood” is not without problems and should be thoroughly challenged with an attention to the narrow definitions of maturation and growth upon which his version of personhood is reliant. How might the parameters of personhood get redrawn if we were to trouble the neurotypical and able-bodied vision of proper maturation that is evoked here? [Andrew Blaikie, *Ageing and Popular Culture* (Cambridge, UK: Cambridge University Press, 1999), 193.]
3 Candy Crush is a match-three video game with a puzzle format that is made for mobile devices. The game board is filled with multi-colored candies; players try to vertically or horizontally swap adjacent candies to make sets of three candies that are all the same color. When matches of three are made, the candy is crushed or “smashed,” and the player collects points.
told me about this Candy Crush game, at first I thought, ‘So what!’ But now I can’t stop playing.” This commercial delivers a formula that is recited in every Esurance commercial included in the series: An elderly person endearingly fails at approximating a youthful behavior or participating in a trendy pastime. They remark on how easy it is to do whatever it is that they are so clearly failing to do, claiming that, “It’s so simple! It’s like my car insurance. I can save fifteen percent in fifteen minutes.” A younger person either gently corrects them or exasperatedly chastises them for their ignorance. The commercial ends with this slogan: “You could save money on car insurance in half the time. Welcome to the modern world.”

Shirlee is perceived and represented as irreparably old-fashioned. Her body and behaviors are construed as atavistically incongruous with “the modern world” of rapid car insurance quotes and viral video games. We laugh at her cluelessness because we expect it. We can recognize and chuckle at demonstrations of discordance between an elderly woman and a mobile app because we regard elderly people as animate fossils or living (but not lively or enlivening) relics. She does not know how to properly play Candy Crush because she is set in the ways of yesterday; Shirlee embodies anachronism.

Shirlee is a compelling character to consider because her age and the asynchronously “off” behavior it inspires estranges her from a society that privileges youth. Shirlee’s anachronism queers her in the context of an environment that assesses her lack of youthful (on)timeliness and in-the-know savvy as amusingly tragic. There is a mounting fascination with anachronism as a uniquely queer orientation in time within queer theory. For example, in the GLQ roundtable on
“Queer Temporalities,” Carolyn Dinshaw asks, “How does it feel to be an anachronism?” In the same issue of GLQ, Elizabeth Freeman asserts that the “sensation of asynchrony can be viewed as a queer phenomenon.” In her contribution to the historicist turn in queer theory, Valerie Traub discusses “strategic anachronism” as a methodological approach that willfully challenges the authority of chronological and linear “straight” time by encouraging retrospective engagement with the past in the present. Jack Halberstam, Lee Edelman, Kathryn Bond Stockton, and José Muñoz have produced work, all of which I will explore in this chapter, that enunciates anachronism as characteristically queer. Despite queer theory’s eager engagement with anachronism in various iterations of queer time, people like Shirlee, people who age into anachronism by virtue of becoming old in a society that values youth, remain largely unseen and unaddressed.

If queer scholars are curious about the affective impact of feeling anachronistic, why are we hesitant to or completely uninterested in the affective impact of feeling, looking, or growing old? Perhaps we view the elderly and the aging process as unbecoming. In fact, to grow old, as indicated in the Andrew Blaikie epigraph, is viewed not as a becoming, but as (an) un-becoming. In this imagining of the elderly, the process of growing old is a disassembly of personage in which previously accrued maturation is lost, often incrementally and occasionally all at once. Perceptions of growing old as a tragically unbecoming un-becoming have

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plotted the elderly beyond the pale of queer theory, and subsequently, queer time. Narratives of aging that are faithful only to notions of rising and falling action, in which growing old uniformly entails irrevocable diminishment and decline, support blinkered assessments of the elderly as “un-persons.”

As signaled by the title of their edited volume *Queer Times, Queer Becomings*, E.L. McCallum and Mikko Tuhkanen assert that persistent “becoming” is central to contemporary understandings of queerness. Queer theory consistently fashions itself as a field that refuses stasis by breaking with habitual ways of being and thinking while opening up new ways of imagining perverse, contrapuntal, and contradictory becomings. When aging past adulthood is regarded as an un-becoming, partially because the elderly are associated with immutable habits that signal the end of discernible growth, it is not difficult to see how aging and the elderly might exceed the purview of queer theories on time, at least upon first consideration. But it is essential then to consider what sorts of “becoming” queer theory aligns itself with when it fails to consider growing old and the elderly as matters of queer concern.

The elderly’s “un-becoming” is depicted as an unraveling of desirable maturation, or the dissolution of a staged and life-long progression towards and advancement of (re)productive adulthood. Curiously, many if not most scholars writing on queer time are invested in temporalities and livelihoods that depart from this sort of linear teleology and growth. They critique what I am terming *ritseful/rightful time*, a prescriptive temporal regime that schedules human lives around the completion of a series of heterosexual rites, including marriage and child

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8 E.L. McCallum and Mikko Tuhkanen, *Queer Times, Queer Becomings*, 10.
rearing, in which one must participate to become a valuable human being. Essentially, queer time is consistently articulated as an abject refusal of desirable maturation, of growing up. Queer refusals to grow up “normally” make queer people and the elderly - who are purportedly “un-becoming” mature adults - curiously underexplored analogues. In this thesis, I argue that the “un-becoming” of growing old is inherently a queer becoming, a queer time.

I. Chapter Outline and Methods

In this chapter, I analyze the reasons why queer theory, particularly queer theories of time, has remained beholden to iterations of youthful anachronism. I define youthful anachronism as asynchrony that develops when 1) a figure or subject departs from the institutionalized staged life course, in which marriage and reproduction are expected, and 2) this departure manifests in a refusal to grow up that prolongs childhood or adolescence. When quintessential queer time is consistently envisioned as youthful anachronism, aging or elderly anachronism remains concealed; the embodied temporality of growing old is dismissed as insufficiently queer and thus incapable of inspiring theoretical interest, care, or concern. In this chapter, my goal is not simply to diagnose and condemn youthism and ageism in contemporary writings on queer time, but to examine why queerness is predisposed towards youthful affiliations in the first place. While youthism, a preference for youth that manifests as an obsessive quest to eternally maintain it, and ageism, a fear of

9 While many queer theorists might argue that calling anything “quintessentially queer” negates the unboundedness and lack of fixity typically attributed to queerness, there are undeniable patterns in the way that queer time is expressed that indicate a prioritization of youth, either explicitly or implicitly.
growing old that manifests in feelings of disinterest, contempt, or disgust for the elderly, are not synonymous, for the purposes of this project they are coextensive and inseparably expressed. I use both terms interchangeably throughout.

In the first section of this chapter, I provide a brief history of pathological renderings of homosexuality as both arrested development and childish perversion in sexology and early psychoanalysis. I then provide a comprehensive analysis of the most prominent theoretical articulations of youthful anachronism in queer time and contextualize these articulations as a reclamation and repurposing of homophobic stereotypes. In doing so, I argue that queer theory values the extension and elaboration of adolescence as a way to inhabit the obstinate alterity that threatens to vitiate heterosexual “development.” I focus on Kathryn Bond Stockton’s “queer child,” Jack Halberstam’s “extended adolescence,” and Lee Edelman’s “refused futurity” as exemplary case studies of youthful anachronism’s privileged position in queer theory. I will then illustrate how queer temporal identifications with youth may unintentionally collide and collude with “straight” desires to age “gracefully” (i.e. never at all) meaning never at all. I focus specifically on the growing prominence of positive aging models, the “grey market,” and anti-aging advances in biomedicine and cosmetics, to expose similarities between “straight” and “queer” time. I argue that both provide coercive temporal frameworks that embrace youthful longevity and seek divergence and differentiation from undesirable growth (i.e. growing old).

While my argument criticizes the youthful myopia that persists in queer theories of time, the problem lies squarely with the ageist parameters of queer time as they are currently construed and not with queer desires for another time and place in and of themselves. I am not advocating for a wholesale disavowal of the desire for writing about, recognizing, or imagining queer times that are less hostile towards unorthodox ways of becoming. Rather, I wish to illuminate the current limitations of queer time and broaden what McCallum and Tuhkanen call the “queer temporal vernacular” with considerations of aging and growing old.\textsuperscript{11} Expanding the queer temporal vernacular is necessary because queer people age and queer people grow old. Further, anyone who ages in later life without attempting to stave off or conceal this fact, regardless of their sexual orientation, is aging queerly out of a straight time that privileges the preservation of youth. Aging is a temporalized, biomedical fact, and yet, we do not have the language in queer theories of time to account for embodied temporalities across the life course.\textsuperscript{12} To rectify this erasure, I will not eviscerate and discard current iterations of queer time, but rather recuperate and rework the admirable and necessary desires that fuel them.

\textsuperscript{11} E.L. McCallum and Mikko Tuhkanen, \textit{Queer Times, Queer Becomings}, 1.
\textsuperscript{12} It is important to note that aging, while a biomedical fact, is also socioculturally mediated. In \textit{Queer Temporalities in Gay Male Representation: Tragedy, Normativity, Futurity}, Dustin Bradley Goltz defines aging as, “a collection of meanings assigned to bodies as they exist for longer periods of time within specific cultural contexts” [Dustin Bradley Goltz, \textit{Queer Temporalities in Gay Male Representation: Tragedy, Normativity, and Futurity} (New York: Routledge, 2010), 5.] In \textit{Reeling in the Years: Gay Men’s Perspectives on Age and Aging}, Tim Bergling provocatively asserts the peculiarities and specificities of gay male aging and the cultural context in which it occurs, claiming that “over forty in gay culture is old, and below thirty is young, and the thirties are a liminal space between the two” [Tim Bergling, \textit{Reeling in the Years: Gay Men’s Perspective on Age and Aging} (New York: Harrington Park Press, 2004), 198.]
In the last section of my chapter, I adapt Jennifer Wenzel’s call to “remember the past’s future” as a reparative reading strategy. In her article on anti-imperialist nostalgia, which she defines as a “desire not for a past moment in and for itself but rather for the past’s promise of an alternative present; the past’s future,” she details an approach for reinvigorating unrequited impulses from previous moments and imaginatively restoring them in a different context, possibly with new imperatives. While imperialism is beyond the purview of my project, I am interested in adopting and adapting Wenzel’s desire to remember moments past/passed to alter the present and imagine a different future. I want to locate previously articulated impulses in queer theories of time, which might be useful for thinking about growing old as a queer time. Wenzel’s remembering of the past’s future works productively alongside Eve Sedgwick’s reparative reading, which is an “additive and accretive” method of engaging with a text with the intent to “assemble and confer plenitude” rather than skin and gut it as a demonstration of intellectual prowess.

To clarify, I am interpreting the past near-sightedly, as anything that has previously occurred and I am also acknowledging the necessary porosity between the past and the present. Every time a text is encountered it presents itself in the present, troubling tidy divisions between the “now” and the “then.” I am analyzing texts that have come before my own and the thoughts they enclose as comparatively older than my own writing and thinking, but of course, that does not detract from their continued

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15 Eve Sedgwick, “Paranoid Reading and Reparative Reading, or, You’re so Paranoid, You Probably Think This Essay is About You,” in *Touching Feeling: Affect, Pedagogy, Performativity* (Durham: Duke University Press, 2003), 149.
relevance and saliency. In my work, I hope to repair and restore the recent “past’s future” as an anti-ageist hermeneutic. I wish to build on previously voiced yearnings and desires in scholarship on queer temporalities, while unfastening them from the youthism of their execution, and turning them to different, anti-ageist ends. I am not staging my contribution as a generational power grab that calls for abdication and renunciation, recasting older thinkers and their ideas as comparatively senile and obsolete. I recognize the urgent validity of previously articulated desires for and expressions of queer time and dream them a little bit differently.

In this final section, I reimagine queer desires for sideways or lateral alternatives to vertical growth and linear maturation in Kathryn Bond Stockton’s, Jack Halberstam’s, and Lee Edelman’s work. I also rework José Muñoz’s notion of queer futurity, scaling down my focus from his far-sighted, not-yet here queer futurity to a near-sighted, contemporaneous queer future of growing old that is already becoming in the present. My aim is to reimagine narratives of elderly “un-becoming” as sites of lateral queer becoming that trouble the rising and falling action of maturation and senescence and dilate the queer temporal imaginary. This dilation expands queer theory’s capacity to account for embodied temporalities across the life course.

II. Histories of Homosexuality as Arrested Development

Queer theories of time are pre-disposed towards the earlier life stages, childhood and adolescence for many reasons that I will elaborate, elucidate, and
challenge throughout my thesis. One of these reasons concerns prevailing notions of homosexuality as a sign of sexual immaturity and arrested development. Leading sexologists and psychoanalysts from the late nineteenth to the mid-twentieth centuries conjured pathologizing discourses about homosexuality’s “child-likeness.” In 1869, Karl von Westphal, a prominent sexologist, nurtured a relationship of condemnatory equivalence between “lower” races and those of deviant sexualities. As Jennifer Terry describes, “many of the same characteristics that distinguished ‘primitive’ races from their ‘advanced European heterosexual counterparts, namely degeneracy, atavism, regression, and hypersexuality’” were remarked on by Westphal.16 The homosexual’s atavism was also associated with the degenerate hypersexuality of undisciplined and uncivilized youth.

In Westphal’s analysis, the homosexual is an animate fossil, a figure whose ontogeny recapitulates the past in the present in ways that are not dissimilar from the elderly today. Similarly, Carl Jung’s description of homosexuality in the early 1900s as “a relic of past cultural periods,” evokes the homosexual body as paradoxically young and outdated all at once.17 To attribute arcane characteristics to a population simultaneously crafts them as “old souls,” much older than those around them, but also debilitatingly youthful and immature in their unwillingness to grow up. Yet, it is only the childlike immaturity of the homosexual that is explicitly emphasized in sexology and psychoanalysis; it is the purportedly stunted growth of homosexuality, its child-likeness, which ultimately prevails. There is a salient reason for this.

When Sigmund Freud asserted that homosexuality represents a stage of “inhibited development” and Richard von Krafft-Ebbing claimed comparable levels of development between homosexuals and “the first months of foetal existence of man,” the homosexual’s anachronism is decidedly that of the child because the child is construed as a dependent, beholden to the paternalistic dominion of the more advanced heterosexual “race.”\(^{18}\) To associate the homosexual with elderly anachronism would imply instead that they had traversed stages of development in advance of the heterosexual adults who were taxonomizing them. It was not enough for homosexuals to be anachronisms; they also had to be developmentally challenged to ensure that heterosexuals were unequivocally advanced in comparison.

As a result of these pre-existing associations between homosexuality and the earlier life stages, queer theory was already predisposed and orientated towards youth when imagining queer time. That these pre-existing associations were unambiguously homophobic provided queer theorists with the challenge of reclaiming and reworking youth as a site of unconventional queer growth.

III. The Queer Child, Extended Adolescence, and No Future: Claiming Youth in Queer Theory

In their introduction to \textit{Queer Times, Queer Becomings}, McCallum and Tuhkanen playfully reference historical alignments between queerness and youth when they ask, “And who, developmentally speaking, are younger at heart than

queers, who in the homophobic imagination are retarded at the irresponsible age of youthful dalliances, refusing to grow up, settle down, and start a family?“¹⁹ Of course, in this lighthearted evocation of homophobic history, queer refusals to grow up are staged as agential choices to dwell in youthful dalliances rather than succumb to the eternal and predictable tug of riteful/rightful straight time. McCallum, Tuhkanen, and many other queer scholars have reclaimed models of arrested development as deliciously deviant departures from the scheduled life course. Rather than unilaterally evacuating contemporary forms of queerness from this homophobic history, queer theorists claim backwardness and immaturity to distinguish queer livelihoods from the ritualized choreography of normative maturation.

Kathryn Bond Stockton, Jack Halberstam, and Lee Edelman each produce figures, temporalities, or polemical stances that embrace the concept of youthful anachronism as exuberantly and uniquely queer. As I consider Stockton’s, Halberstam’s, and Edelman’s accounts of youthful anachronism, I examine how each theorist makes connections between lagging, dragging, or belatedness in youth and an expansion of opportunities for eccentric and irregular queer becomings. They all associate queer time and queer becoming with non-vertical growth, the kind of growth that occurs when people grow anywhere but up. Previous imaginings of queer time as lateral or horizontal growth that defies the expectation of vertical maturation are helpful for imagining growing old, also a departure from growing up, as a queer time.

¹⁹ E.L. McCallum and Mikko Tuhkanen, Queer Times, Queer Becomings, 6.
In *The Queer Child, or Growing Sideways in the Twentieth Century*, Kathryn Bond Stockton provocatively inverts figurations of the queer as childlike and argues that *all* children, whether “straight” or “gay,” are immensely queer.\(^{20}\) Wasting no time on pleasantries, she immediately claims, “If you scratch a child, you will find a queer, in the sense of someone “gay” or just plain strange” (1).\(^{21}\) Stockton is one of quite a few queer theorists to classify the imposed and provisional asexuality and nascent heterosexuality of childhood as a queer life stage to inhabit.\(^{22}\) However, she is the first to assert the retroactive importance of the child for articulations of the queer adult self alongside a comprehensive reflection on the inherent queerness of childhood as a phase of simultaneously unruly and anxiously monitored becoming. Both approaches are integral to my own analysis of youthful anachronism as an embodied temporality or untimely sensation and disposition that is celebrated in most formulations of queer time because of its uncomplicated association with becoming.

Stockton foregrounds the “backwards birthed” gay child as a figure whose memorial and verbal summoning allows the queer adult to become full circle.\(^{23}\) The gay child materializes retroactively as a beguiling specter from the queer adult’s memory. Stockton associates the backwards birth of the gay child with the

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\(^{20}\) In this thesis, I will ultimately make a similar argument about the inherent queerness of all elderly people, regardless of sexual orientation. Growing old is a departure from growing up, which is the only socially valued kind of growth in straight time because it promises the emergence of (re)productive bodies. Those who grow old all deviate or are estranged from straight timelines of desirable maturation and are queered by their deviation and estrangement.

\(^{21}\) Kathryn Bond Stockton, *The Queer Child*, 1.


simultaneous death of the straight adult and the resolute emergence of a narratively coherent gay person who was always a little bit “off.” When the queer adult recalls a childhood of uncomfortably wayward growing pains, in which the muscle memory of “growing toward a question mark…even wishing time would stop…so that one wouldn’t have to advance to new or further scenes of trouble,” they achieve coherence and catharsis; they can finally put this child to bed, and sing themselves lullabies across time of a better place in the future, where queerness is no longer a question, but an answer.²⁴

If retroactively conjuring the gay child does not inspire coherence, catharsis, and calm, it can craft a fantastical space with robust possibilities. The gay child can be “precisely who we are not and, in fact, never were,” allowing us to imagine strange origins that soothe or stimulate us with the potential of a queer bildungsroman that spans decades.²⁵ Either way, the queer child is exciting to the queer adult because of the fecund potentiality of their precocious queerness. The queer child is perched on the precipice of heterosexuality, but amazingly, does not fall in. Their suspension, always on the verge of heterosexuality but never in it, freezes them at their fullest potential, making them attractive, uncontaminated vessels through which to imagine queer becoming.

Stockton goes on to analyze the queer suspension of every child, “gay” or “straight,” that is commonly associated with embryonic heterosexuality, but still swaddled in the uncertain becoming of the gestation process. She asserts that, “The child who “will be” straight is merely approaching while crucially delaying (in its

²⁴ Kathryn Bond Stockton, The Queer Child, 3.
²⁵ Ibid., 5.
own asynchronous fix) the official destination of straight sexuality, and therefore “outing” itself as estranged from what it would approach.”

For Stockton, the child’s chronic postponement, its inability to grow up just yet, exposes it to a myriad of other ways to grow and become in the meantime. Childhood is defined as “meantime,” that interval before the accumulative event of growing up that harbors foreboding power, charged with potential and expectation that might sour or rot in the interim, while the child waits for permission to grow up.

The delayed child, an embodiment of youthful anachronism, is queer because it is temporarily excluded from the upward growth of straight time; the child’s deferral, as a pre-person who cannot yet become adult, generates “childhood” as a time when “growing up” is forbidden and the child might grow, or become, unpredictably. The child helps us think about “notions of the horizontal—what spreads sideways—or sideways and backwards,” and promises mobilities that do not vertically grow up, but grow into a queer elsewhere. Queer children, whether they are “gay” and retroactively inspiring narrative coherence and catharsis for queer adults or they are simply children, growing laterally in the thick of their pre-maturation postponement, are exciting because they are border creatures. They exist on the edge of proper, heterosexual becoming, but always might not become what is expected of them.

Judith Halberstam’s “extended adolescence” similarly privileges a lateral expansion of the earlier life stages as an opportunity for queer becoming.

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26 Kathryn Bond Stockton, The Queer Child, 7.
27 Ibid., 4.
Stockton, he associates queer time with youthful anachronism, and more specifically a refusal to graduate to the next stage of the life course. For Halberstam, queer time is a perverse exit from reproductively determined “narratives of coherence.” Unlike Stockton, Halberstam associates queer time’s orientation towards youthful anachronism with a viral origin story: the AIDS epidemic. In Halberstam’s *In a Queer Time and Place*, he writes of the AIDS epidemic as a massive illness event that radically changed queer orientations in time. The AIDS epidemic abruptly rewound queer clocks, setting the hands for queer people ahead of those that measure HST (Heterosexual Standard Time). Halberstam refers to the decimation of an entire generation of gay men as a catalyst that encouraged community formation in relation to danger, disease, and death, privileging “the here, the present, the now.” This seizure of the present’s urgency resulted in “extended adolescence” that, according to Halberstam, still persists today as the most dominant mode of queer time.

Correlations between the material reality of attenuated lifespans for gay men during the AIDS epidemic and queer disinclination towards longevity and sequential maturation (i.e. childhood, adolescence, adulthood) is well supported. Halberstam elucidates continuity between truncated queer lives during the AIDS epidemic and lasting proclivities towards extended adolescence in queer communities today. AIDS

30 Judith Halberstam, *In a Queer Time and Place: Transgender Bodies, Subcultural Lives*, 35.
31 While I do not fully engage with the implications of Halberstam’s choice to ground the genesis of contemporary queer time in the AIDS epidemic in this chapter, I will accept and extrapolate from this origin story in Chapter 2 and contest it in Chapter 3 as a means of fleshing out complications and nuances that propel and fortify the youthism in queer time.
did not only shorten and compress queer lives, but necessitated ways of existing in
time that privileged the possibility of livelihoods that were not predictably over-
determined by the fixtures and expectations of growing up.

Halberstam proclaims, “queer time is…the embrace of late childhood in place
of early adulthood or immaturity in place of responsibility.” This iteration of queer
time unambiguously looses itself from the same vertical expectations of upward
growth and progressive maturation that Stockton’s queer child laterally loosens with
sideways growth. If straight (i.e. marital, (re)productive) time inflexibly binds most
subjects, and I am using Elizabeth Freeman’s concept of “time binds” here to
indicate, “naked flesh…bound into socially meaningful embodiment through
temporal regulation,” queer time signals unbinding while stimulating novel forms of
temporal bondage, or lack thereof. In effect, queer time troubles what Freeman
terms “chrononormativity,” which is a “mode of implantation” and mastery “by
which institutional forces come to seem like somatic facts.” This means that, when
one departs from straight, chrononormative timelines, they undergo somatic
alterations and embody a different temporality, essentially coming to become
differently.

Halberstam isolates queer subcultures as sites of extended adolescence that
allow queers to embody temporality differently than their heterosexual counterparts,
who are beholden to scripts of progressive development. Queer subcultures,
specifically queer club and sex cultures, facilitate youthful anachronism indefinitely,

33 Judith Halberstam, “Queer Temporalities,” 182.
34 Elizabeth Freeman, Time Binds: Queer Temporalities, Queer Histories (Durham: Duke University
Press, 2010), 3.
35 Ibid.
with no recourse to normative expectations of vertical growth from adolescence to adulthood. \(^{36}\) I argue that despite Halberstam’s call for queer departures from staged maturation, his focus on extended adolescence still privileges those poised on the edge of adulthood or those who recursively express youthful behaviors after chronologically departing from “youth.” This departure from straight time’s progression does not attempt to challenge the life stage that straight time most commonly values as the time of significant growth spurts and malleability: childhood. Halberstam, like Stockton, enforces the notion that countercultural queer growth is most prolific when queers are on the verge of productive adulthood, even if this adulthood is delayed or denied.

Given his polemical stance on the figure of the Child, Lee Edelman might seem a peculiar inclusion for my third proponent of youthful anachronism as the quintessential queer time. However, the queerly negated future he speculatively summons as an alternative to reproductive futurity, associates riotously disruptive queer becomings with the earlier life stages. Edelman encourages us to refuse the Child and yet, paradoxically prioritizes queer affiliations and affinities with youth when imagining this refusal.

Edelman explicitly structures his argument in opposition to the most politically salient emblem of reproductive futurity: the Child. Edelman defines the Child as “the perpetual horizon of every acknowledged politics, the fantasmatic beneficiary of every political intervention.”\(^ {37}\) To call the Child “fantasmatic” is to assert its fundamentally illusory nature as a speculative figure that is always before us.

\(^{36}\) Judith Halberstam, *In a Queer Time and Place*, 174.

but never quite here. This child has unusual anachronistic properties in that, as “perpetual horizon,” it is presently desired in this time while eternally deferred to another, future time. Fighting for the safety and protection of the Child is the impulse that circumscribes the political imaginary for both conservative and liberal Americans, rendering a politics beyond or outside of the Child unthinkable. Edelman also argues that reproductive futurity is the teleological propulsion that fuels the heterosexual, developmental life course and should be challenged as such. He encourages queers to evacuate the staged life course governed by reproductive futurity and advocates for a gloriously unholy embrace of the non-reproductive dead-endedness for which queers are already condemned.

While Edelman does not explicitly advocate for extended adolescence as an alternative to compulsory reproductive futurity, he entertains speculations of a childless no future that is undeniably adolescent. He imagines hypothetical futurelessness as a combative retort to the hopeless future in Children of Men (2006), a dystopian film about global infertility which advertised this slogan: If there is a baby, there is a future, there is redemption. Edelman imagines the adverse, musing “If, however, there is no baby and, in consequence, no future, then the blame must fall on the fatal lure of sterile, narcissist enjoyments understood as inherently destructive of meaning and therefore as responsible for the undoing of…life itself.” It is abundantly clear from the development of his argument that these non-reproductive and nihilistic narcissists are configured as queer. Immediately, Edelman conceives the absence of reproductive futurity as recourse to ludic livelihoods in

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38 Children of Men, directed by Alfonso Cuarón (2007; UK: Universal Pictures, 2007), DVD.
39 Ibid.
which sex is divorced from baby making. Pleasure is leached of procreative purpose and devolves into unapologetic hedonism that is simply not condoned by contemporary chrono-norms, the implanted laws of temporal regulation that naturalize reproductive maturation as the only way to grow.

Edelman does not overtly associate his “no future” with adolescence, but his description implicates a population associated with risk, rebellion, hypersexuality, and self-involvement. Curiously, these are all descriptors that have been or still are associated with queers and teenagers. It is bizarre that, in Edelman’s babyless future, the aging process as it would unfold, unabated by the revitalizing cries of infants promising hope after death, is not mentioned as a consequence of ceased reproduction. To imagine a future without the Child halts the chain of deferrals that make this “perpetual horizon” possible. As a result, we cannot catapult ourselves out of our inevitably aging bodies and into the receptacle of the everlastingly young Child; we cannot creatively maintain eternal youth.

In Edelman’s negated future, queer adolescence is implicated and the possibility of post-adolescent aging remains preferably unseen. Like Kathryn Bond Stockton and Jack Halberstam, Edelman produces a vision of queer time that validates youth as a time ripe for queer becoming. In all of their accounts of queer time, prolonged youth is powerful not because it signals a departure from the staged life course, but because it inspires anachronism that is prior to and poised on the edge of reproductive futurity. I argue that the anterior positionality of queer time as that which comes before heterosexual adulthood is of vital importance for understanding why later life stages are not easily recuperated as properly queer.
Jack Halberstam asserts that, “In Western cultures, we chart the emergence of the adult from the dangerous and unruly period of adolescence as a desired process of maturation.”④⁰ We regard the period before adulthood, before the straightening process of growing up, as a time before chrononormative circadian rhythms can fully take up residence in the body. Without even taking queerness into consideration, childhood and adolescence are regarded as the most dangerously vulnerable life stages because youth is associated with the malleability of unfinished bodies, marked and forever altered by the slightest touch. During the stages of childhood and adolescence, there is a common fear that some kids will not become correctly. Kathryn Bond Stockton plays with the pliable softness of children, exacerbating heterosexual fears of growth that can extend anywhere but up. Jack Halberstam and Lee Edelman latch onto the rebelliousness of adolescence, a prominent anxiety in capitalist societies that require insolent and lazy teenagers to become productive adults.④¹ They revalue and reanimate concerns about adolescent malaise, aggression, and sexual experimentation through the lenses of queer becoming and disruption, reimagining adolescence as a queer time.

What is so troubling about queer theory’s unrelenting focus on radically queering childhood and extending adolescence is that this focus colludes with the ageism and youthism that structures straight time. In the following section, I explore

④⁰ Judith Halberstam, *In a Queer Time and Place*, 152.
④¹ In *Chronic Youth: Disability, Sexuality, and U.S. Media Cultures of Rehabilitation*, Julie Passanante Elman writes about the co-articulation of adolescence with queerness and disability in U.S. American culture beginning in the 1970s. She frames the figure of the adolescent as a “site of pop cultural, medical, and governmental intervention, a volatile “problem to be managed,” and a “paradigmatic crisis to be overcome” along the way to (re)productive adulthood [(New York: New York University Press, 2014), 2-3.] These characterizations of the adolescent as erratic and rebellious, at risk for not becoming proper adults, fashion them as fecund figures for imagining queerness as that which threatens heterosexual becoming in the earlier life stages.
how current formulations of queer time function as recapitulations of straight time. I hope to clarify how reproductive futurity, youthism, and ageism collectively constitute a timeline of desirable maturation that is neither linear nor progressive, but actually recursive. I critique queer theory’s hasty move to define heterosexual time as unequivocally “straight” and thus somehow inimical to or set apart from queer times of extended adolescence or sideways growth. I ask, what are the differences between heterosexual maturation and queer becoming? How are the values and yearnings that structure heterosexual maturation and queer becoming different and how are they similar? If both heterosexual maturation and queer becoming are associated with growth that can really only occur in the earlier life stages, queer and straight time both view growing old as an irredeemable time of unbecoming. Ultimately, I would like to contest this.

IV. Heterosexual Maturation/Queer Becoming: Grow, But Never Grow Old

The scholarship on temporality in queer theory is robust and remarkably varied, which makes it resistant to broad characterizations or summaries. However, there are striking patterns in the content and articulation of the subfield that continue to proliferate. Most, if not all, iterations of queer time express an interest in challenging temporalities and mobilities that are envisaged only as a linear, progressive sequence. Whether scholars are contesting the primacy of reproductive futurity, familial time, and vertical growth, or they are challenging the chronological laws of linear historicism, queer time consistently establishes itself as that which is
not “straight.” Kathryn Bond Stockton, Jack Halberstam, Lee Edelman, and countless others craft, endorse, and defend queer times that explicitly turn away from what Annamarie Jagose calls, “a straight guy version of time that is always linear, teleological, reproductive, and future-oriented.” This “straight guy” is a straw man. If we take a long, close look, straight time abruptly swerves and crashes into itself, rather than extending eternally forward into the future. This rerouting unstraightens “straight” time into a recursive loop in which prolonged or regained youthfulness is paramount and bears a striking resemblance to the queer time that supposedly contradicts it. I now turn to prominent texts in cultural gerontology, most of which assume heterosexuality in their construction of the life course, to provide examples of the recursive nuances that are embedded in “straight” time. While riteful/rightful straight time is certainly present and verified by this literature, it is abundantly clear that reaching later life is not always a rite of passage that is considered “rightful” or desirable.

In *Ageing and Popular Culture*, cultural gerontologist Andrew Blaikie addresses a heterosexualized staged life course that corroborates notions of the

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riteful/rightful straight time from which queer theorists wish to secede.⁴⁴ He writes
that, “We regard the progress of individuals through time as a linear process guided
by a series of ‘markers’ (stages marked by particular conventions and
expectations).”⁴⁵ He then emphasizes that these “markers” are associated with
cultural mores and standards for the aging process, including the expectation of
eternal progress and development. This includes the development of a strong work
ethic and maturation, which Blaikie associates with “physical advancement…visible
signs of growth and puberty” and fully activated reproductive potential.⁴⁶ If we were
to focus exclusively on straight time’s staged life course as a progressive and
developmental narrative, then it is easy to conceive of queer time’s willful failure to
grow up as a contestation of straight time. However, Blaikie is quick to qualify that
the progressive, developmental impulses that drive the staged life course forward are
also inspired by an “orientation toward youthfulness.”⁴⁷

This youthful orientation in the staged life course results in very limited
notions of what it means to desirably mature. Desirable maturation includes
progression through all the ritualized benchmarks of growing up that still signal the
continued development and maintenance of youth in appearance, health, vitality, and
productivity. When one matures in a desirable and socially valued way, this growth is
dissociated from senescent decline, in which one’s body, mind, or behavior betrays
youthful verisimilitude. While desirable maturation was previously delimited to the
first two life stages, including childhood/adolescence and (re)productive adulthood,

⁴⁴ Cultural gerontology is the study of older adults and aging as a socioculturally mediated process.
⁴⁵ Andrew Blaikie, Ageing and Popular Culture, 26.
⁴⁶ Ibid., 6.
⁴⁷ Ibid., 9.
older people who are capable of maintaining some semblance of youth are now recuperated and incorporated. The selective folding of some into a model of desirable maturation depends on growing divisions and differentiation between what Peter Laslett call the Third and Fourth Age.48

In A Fresh Map of Life, Laslett argues that the established category of “old age” is actually bisected, partitioned, and hierarchized into the Third Age and the Fourth Age. This bisection accentuates prudent divisions between the “independent and active” recently retired and those who are dependent, disabled, or approaching death.49 The Third Age consists of those who can “age gracefully, maintain mid-life postures” and trouble “the inevitable via an array of distancing techniques.”50 The ascendance of the Third Age occurs as a result of preeminent “successful” aging models in gerontology that are stimulated by and reflected in cultural desires to stay forever young. While Laslett concedes that aging, as biological fact, is inevitable, he asserts that Third Agers simply do it better by concealing the process and nurturing continuity with their (re)productive adult selves. This freshly retired population of Third Agers, replete with monikers like “Woopies (well-off older persons)” and “Glams (grey, leisured, and moneyed),” maintain health and fitness levels that parallel those who are much younger than them.51

48 Jasbir Puar’s work on the “bio-necro collaboration” that leaves some bodies debilitated while restoring or enhancing the capacity of others, folding some bodies into life while evacuating others from it, is useful for envisioning the impetuses and mechanisms for bisecting and hierarchizing the Third and Fourth Age. See: “Prognosis time: Towards a geopolitics of affect, debility and capacity,” Women & Performance: a Journal of Feminist Theory 19 (2) (2009); Terrorist Assemblages: Homonationalism in Queer Time. (Durham: Duke University Press, 2007).


50 Ibid., 75.

51 Financially secure, healthy, and active retired populations that might cohere with the image of a “Woopie” or a “Glam” are overwhelming white, heterosexual, and class privileged. While Laslett is
While some might argue that the creation of the Third Age is simply another sequential installment in straight time, and thus a stage of life that queer time already signals prompt departure from, there are distinctly recursive and looped elements embedded in social desires for a Third Age that trouble hermetic distinctions between straight and queer time. Successful aging models and the evolution of the Third Age are just a fractional piece of a much larger anti-aging industry in which there is a growing demand for medical treatments, therapeutic practices, and enhancement technologies that prevent aging and restore and elongate youth.52

When straight time is extrapolated to its farthest ends rather than pre-emptively abbreviated immediately at (re)productive adulthood, casting middle-age as the rightful telos of the life course, queer time can easily distinguish itself from straight time as that which is utterly disinterested in progressive linear development.53 However, when straight time is encountered in its convoluted entirety, as a recursive trajectory that boomerangs back towards youth in the later life stages, similarities between queer and straight time become more apparent. Both queer and straight time are aggressively flirting with the possibility of loosening the

53 In his iteration of queer time as a diabolical rupturing of straight time, Judith Halberstam consistently abbreviates the heterosexual staged life course as ending abruptly at productive (re)productive adulthood. Many other queer scholars similarly position their queer time as antithetical to an abbreviated straight timeline in which life development stops after (re)productive adulthood. This is indicative of unchecked ageism in contemporary renderings of queer time that I am seeking to contest.
“‘chronological bonds’ that once bound people to age-appropriate behaviors.”

Straight timers are faced with what Andrew Blaikie calls a “tyrannical imperative” to be “‘liberated’ from chronological destiny.” When examined closely and without truncation, Third Agers in “straight” time and queers who grow sideways, extend adolescence, and refuse reproductive futurity in “queer” time all desire some version of temporal flexibility that manifests as prolonged youth.

Before moving forward, it is important to clarify that queer time is not a faithful replication of straight time, despite the unmistakable similarities that I explore here. Straight time privileges the extension of a life stage ((re)productive adulthood) that queer time largely disavows. Also, desires for prolonged youthfulness in straight time privilege aspects of youth that are deprioritized in queer time. In straight time, securing extended access to youth in later life is about aesthetics, health, and productivity. Third Agers want to appear young, retain youthful levels of health and vitality, and remain within the purview of capitalist models of productivity and active engagement.

Queer time’s prolonged youthfulness is not discussed as a matter of aesthetic preservation and is frequently associated with risky and rebellious behaviors that are unconcerned with health and capitalist productivity. Many queer theorists might argue that their embrace of adolescent behaviors performed belatedly or asynchronously, particularly in the context of queer subcultures, has nothing to do with aesthetic projects to stay forever young that consume age-conscious heterosexual adults. However, there is a more insidious similarity between them that is of great

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55 Ibid., 209.
concern to me. When straight time continues to associate desirable maturation with youth and queer time consistently locates childhood and adolescence as the most fecund sites for queer becoming, all valuable human growth is relegated to the earliest life stages.

Both straight and queer time reinforce the systematic social distancing of the earlier life stages, from “the Fourth Age of decrepitude of senility,” in which growing old must imply “failed intersubjectivity” and “the unbecoming self.” Growing old is associated with a narrative of irrevocable decline that threatens the loss of the self; aged people are regarded as “vegetables” in that they are no longer considered as animate and wakeful as other human beings. While sideways growth away from the developmental life course constitutes the embodiment of a queer temporality, growing old constitutes a non-volitional falling out of and possible forgetting of one’s place in straight and queer time. Queer time, like straight time, comes to regard the elderly as “obsolete children,” to use a Dr. Seussian term. They are patronizingly rendered as dependents on (re)productive adults, just like their youthful compatriots, but they hold none of the promise or potential of children, who are defined as pre-persons. Rather, the elderly are regarded as post-persons, obsolete and incapable of inspiring revelatory or compelling queer theoretical impulses.

Perhaps it is this lack of agency and the predictability of this chronological unbecoming that nullifies desires to evaluate growing old as a queer time. Carla Freccero corroborates some of the reasons why I think queer theory has failed to

56 Andrew Blaikie, Ageing and Popular Culture, 23.
57 Ibid., 196.
acknowledge growing old as a queer time and the elderly as queer subjects. Freccero claims, “Certainly its no accident that teleology is so crucial to our imaginings of time: we’re born and then at the end, yup, we die. In between we seem to go from “prematuration” to maturation to aging and decay; concepts like growing, then growing up, then aging, getting old, and dying sketch a predictable, inevitable, irrevocable timeline.”59 There is biomedical truth to the statement that we are all governed by the irrepressible teleology of death, but the aging process is far from “predictable, inevitable, and irrevocable,” and it is imperative that we stop regarding it as such. Tendencies to disavow the timeline that Freccero outlines, one that coheres with what Alison Kafer calls “temporalities of inevitability,” simply because somatic changes over time are common, is a frequent and harmful pattern in queer time.60 Queer theory’s anti-biologism, its frequent disengagement from times of the body let alone times of compromised embodiment, is central to the argumentative arc of my thesis. Challenging this bias towards disembodied time in queer theory is integral to revaluing growing old as a queer time.

In a culture that values youth under any circumstances, growing old queers the life course. Desires to stay young fuel an anti-aging industry replete with technological and medicinal advancements and daily living regimes to reroute and reverse aging or radically change how the aged body looks, thinks, and acts. As a result, those who age out of the youthfulness, those who fall out of straight time and break their hips, those who are frail, those who are chronically forgetful, exceed our measures of human growth and becoming. I argue that these people are experiencing

aging as a time queered by youth and the pervasive social imperative to preserve it. In many respects, aging is a time unaccounted for, or perhaps more appropriately, a time we all have to confront eventually that we do not want to count. Aging is consistently framed as a time we do not want to come or a time that simply cannot be desired unless we ensure that what we are becoming resembles the youthfulness that has already become us. I argue that growing old without the choice of or a commitment to retaining youthfulness is immensely queer. To think otherwise narrows the way we imagine queer time and who can rightly inhabit it.

In the concluding section, I look to iterations of queer time that I have previously analyzed, including those voiced by Kathryn Bond Stockton, Jack Halberstam, and Lee Edelman, and reparatively encounter them. Each of their queer times articulates a desire or a conceptual approach that I want to carry with me as I start to imagine growing old queerly. My project requires us to reconceptualize the parameters of queer time, which is ultimately a call to reinvigorate and reorient the queer imagination. Because José Muñoz expresses a similar desire to expand the queer imagination in his writings on queer futurity and utopia, I would like to begin this section by thinking with him.

V. Queer Unbecomings, Or, How to Imagine a Contemporaneous Queer Future

In José Muñoz’s *Cruising Utopia*, he writes about the failure of the queer political imagination to set its sights on a world beyond the “anemic” and “hollow”
Muñoz argues that the present moment is hostile towards queers because it is largely governed by “short-sighted” and “retrograde” gay pragmatism. Gay pragmatism circumscribes the queer political imagination by limiting its field of vision to include only homonormative routes for becoming that mimic the “reproductive majoritarian heterosexuality” that already exists. Muñoz advocates for a temporal expansion of the queer imagination that requires an intentional turning towards the past, what Ernst Bloch refers to as the “no-longer conscious,” to facilitate an opening up of the “not-yet here” of queer futurity. The call for cross-temporal maneuvering in hopes of reframing or reorienting present temporalities is a popular impulse in queer time’s historical turn, as exemplified in the works of Carla Freccero, Carolyn Dinshaw, and Heather Love. However, Muñoz’s work is unique in that he is interested in locating and harnessing the unrequited “performative force of the past” to craft a future from materials that are unavailable and possibly prohibited in a gay pragmatist present. Muñoz strongly asserts that queerness is not-yet here, but that it ruptures the present with potentiality and is revealed in clandestine moments and unearthed impulses from past times.

If I approach Muñoz’s argument from a reparative standpoint, he has much to offer concerning my own desires to dilate the queer imagination and reorient it towards aging processes in the later life stages. His foregrounding of an

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62 Ibid.
63 Ibid., 22.
64 Ibid., 19.
“ontologically humble” queerness that cannot possibly know every nook and cranny of its expansive selves yet is particularly helpful. While iterations of queer time have largely limited themselves to the delay or expansion of earlier life stages and youthful behaviors, I ask that our understanding of queerness as an embodied temporality remain “ontologically humble” and open to further, perhaps unpredictably geriatric, expansions. Like Muñoz, I recognize the necessity of developing a “queer visuality” that must include squinting and straining to see possibilities beyond homonormative templates for becoming. However, I would like to adopt his desires for an ontologically humble queerness and queer visuality and use them not to imagine a queer future on the horizon, but to locate queer futures that are already becoming in the present.

Muñoz’s queer futurity is a speculative horizon that is far-sighted and largely detached from that which is lived continuously, every moment of every day. Muñoz does not dismiss the possibility of glimpsing queer futurity in everyday relationships and communities, but he still refers to the present’s future as ephemera that bubbles and bursts, but is not persistently or consistently present (22-23). I am calling for a queer imagination that strains to see a future that is already becoming to us and already is for others; the contemporaneous, near-sighted future of growing old. I refer to aging in later life as a contemporaneous queer future because people of different ages live alongside each other and have the capacity to show others what they might become if and when they grow old. While Muñoz’s not-yet here queer future is conveyed as a spectacularly propulsive horizon that people actually want to see, the

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68 Ibid., 22.
69 Ibid., 22-23.
contemporaneous future of growing old requires a different kind of queer visuality that acknowledges reluctance, fear, and anxiety about this inevitable future-present.

People tend to approach the aging process with trepidation or even terror. Both of these approaches foster an unwillingness to see the elderly, for fear that one is glimpsing their own undesirable future. There is a scene in Peter Smith’s film *No Surrender* (1985), a British black comedy, which perfectly demonstrates the difficulties of seeing and acknowledging the contemporaneous future of aging that surrounds us. In this scene, a group of frail and ill elderly patients is taken to a nightclub in Liverpool for New Year’s Eve. Cultural gerontologists Andrew Wernick and Mike Featherstone describe the scene as follows:

The impact of this visit is such that several of the younger (though not much younger) visitors are provoked to aggressive or tearful resentment of the slovenly and repulsive behavior of the patients: ‘Is this the future?’ asks one active and still physically combative man in late middle life; whilst an elderly woman in a state of near collapse moans ‘I don’t want to end up like that’, demanding that the patients be taken away and hidden from sight.70

In this example, the spectators demand that the older elderly be “hidden from sight” and returned to their hospital beds so as not to spook the mid-lifers in the nightclub with the “ghost of the future.”71 These middle-aged partygoers communicate pervasive social anxieties about prolonged exposure to the elderly. We train ourselves not to see them so that we might unsee the inevitable dimensions of our own future unbecoming. The immediate revulsion expressed by the middle-aged

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man and woman reveals the elderly’s ability to inspire irrationally visceral panic, as if contact between the elderly and the adult threatens premature, accelerated aging on sight. When this contact between the young and old, that intimacy in the present that reveals the embodied, biological future, is frequently avoided in queer theory, queerness confirms its own perishability, as something finite and fragile, easily overwhelmed and outgrown.

I argue that we must nourish a queer imagination that is attentive and committed to seeing the contemporaneous future of growing old as a temporal fact that touches queer lives, and queers lives in the process. Muñoz defines queer time as “a stepping out of the linearity of straight time,” but I argue that we must be cognizant of less self-assured, controlled, and volitional exits from straight timetables. 72 Those who fall, forget themselves, or wander out of straight time as they grow old are stepping into queer territory and we should take notice.

While I critiqued Stockton’s, Halberstam’s, and Edelman’s work for their unyielding focus on youthful anachronism, particularly prolonged youthfulness, all three voice desire or further concepts that I will recuperate and reorient in my own work. I am adopting Stockton’s queer sideways growth and refitting it for exploring unpredictable experiences of growth and emergence in later life that depart from successful models of aging. Like Stockton, I challenge the primacy of growing up as a “limited rendering of human growth, one that oddly would imply an end to growth when full stature is achieved.”73 Growing old is associated with growth that occurs after “full stature” is reached and desirable maturation has ended. I argue that it also

72 José Muñoz, Cruising Utopia, 25.
73 Kathryn Bond Stockton, The Queer Child, 11.
exemplifies a kind of sideways growth that is brimming with queer potentiality that most, to date, have failed to notice as such.

I am drawn to Halberstam’s iteration of HIV-inspired queer times that emerged during the AIDS epidemic and radically reconfigured queer orientations in time and space. Rather than lingering in acute and terminal expressions of HIV-inspired queer times that romanticize exposure to finitude and relationships to risk, speed, and spontaneity, all of which harvest queer potential in the reckless use or abandonment of the body, I am interested in HIV-inspired times of chronicity, biomedical dependence, and contingent longevity. In my next chapter, I argue that growing old with HIV is a queer-crip time that facilitates a more robust involvement with disability, health, and illness throughout the life course in queer theories of time. Like Edelman, I am interested in a queer time that resists “the compulsion to embrace our own futurity in the privileged form of the Child, to imagine each moment as pregnant with the child.”74 I, too, am invested in crafting a queer time that is not in service of the Child, that imagines temporal possibility beyond the telos of reproductive futurity, but I intend to dream these queer departures as that which occurs post-(re)productive adulthood. In my final chapter, I discuss menopause as a feminized, biologically inevitable queer time that signals a threat to reproductive futurity and the eternal preservation of the Child in which heterosexual time is held in perpetual trust.

Throughout this thesis, I discern and develop queer times that are attentive to the strange, unfamiliar, and largely undocumented embodied temporalities of those

74 Lee Edelman, No Future, 15.
who are not aging gracefully, “successfully,” or youthfully. Queer theory has already recognized the queerness of childhood and adolescence as life stages that exist outside of and threaten not to become (re)productive adulthood. It is time for queer theory to approach growing old, specifically the unbecoming of one’s “matured” self, as a queer time. We must critically examine the aging process and re-think the parameters of what queer time is and what it should be.
Chapter Two:
Chronically Unbecoming (Re)becomings: The Queer-Crip Time of Growing Old with HIV

Who is the HIV/AIDS virus pushing us to become?
–Conrad Pegue, To Be Left with the Body

The AIDS epidemic and the prolific virus responsible for its animation are frequently credited with the rapid onset of queer time. Judith Halberstam’s oft-cited iteration of queer time attributes its inception to the AIDS epidemic. The epidemic is largely evaluated as an illness event of enormous temporal consequence that disoriented queer people from HST (Heterosexual Standard Time) and plotted them squarely outside its chrono-judicial limits. Halberstam argues that this sudden proximity to death inspired some gay men to rethink the primacy of longevity, and form community, however short-lived, with an attention to “the here, the present, the now.”

Tim Dean similarly attributes a queer time of urgency and refused longevity to the HIV virus and barebacking practices that thrive on the virus’ intentional transmission. Dean asserts that some barebackers reimagine consanguinity in viral terms, crafting viral families from a communicable disease that is intergenerationally

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transmitted amongst gay men.\textsuperscript{3} HIV-inspired queer temporalities are robustly represented in queer theory; their telltale symptomatology, as times that characteristically privilege urgency, emergency, risk, and death rather than compulsorily endorsing naturalized desires for placid growth, prolonged stability, and longevity, is rampantly expressed, even in articulations of queer time without an explicit epidemiological basis. Even queerness itself, as the “theatricalization of political rage” or an “emotive, expression of self and collectivity,” to reference Judith Butler and Deborah Gould respectively, frequently cites AIDS activism as its inaugural impetus, and thus, owes its inception to the HIV virus.\textsuperscript{4}

Given the viral origins of queer time and queerness more broadly, why is HIV’s “(con)temporality” as a chronic condition in the twenty-first century largely overlooked in queer theories of time?\textsuperscript{5} This chapter addresses the occlusion of HIV’s


\textsuperscript{5} AIDS activists and scholar Che Gossett uses the term “(con)temporality” when advocating for a scholarly turn in queer theory towards HIV/AIDS in the current moment rather than solely engaging with the virus retrospectively at its epidemiological height in the 1980s and 1990s. Gossett writes about the AIDS epidemic as an ongoing, accumulative illness event, with a specific emphasis on how HIV/AIDS continues to disproportionately affect incarcerated black men. He advocates for methods of HIV prevention that are coextensive with PIC (prison industrial complex) abolitionism. While Gossett and I are not writing about the same population, we are both invested in illuminating the “(con)temporality” of HIV in attempts to grapple with the ongoing legacy of this virus’ introduction into and influence on U.S. American queer communities in the twenty-first century. [“We will not rest in peace: AIDS Activism, Black Radicalism, Queer and/or Trans Resistance,” in \textit{Queer Necropolitics}, ed. Jin Haritaworn, Adi Kuntsman, and Silvia Posocco (Abingdon, Oxon: Routledge, Taylor & Francis Group, a GlassHouse Book, 2014), (32).] It is also important to note, before furthering my discussion of HIV’s chronic (con)temporality, that HIV’s chronicity is by no means universally accessible. While the time of HIV has certainly “mutated” or “dilated” into chronicity for some, to reference Tim Dean’s discussion of temporalities of HIV in his article “Bareback Time,” acute and terminal HIV-inspired temporalities are ever-present, both in the United States and amongst other populations and communities in the Global North and the Global South [in \textit{Queer Times, Queer Becomings}, ed. E.L. McCallum and Mikko Tuhkanen. (Albany: State University of New York Press, 2011), 78.] HIV is only chronic for those who have access to healthcare and can afford antiretroviral treatment. For more information on persistently acute and terminal temporalities of HIV in the twenty-first century, I would recommend the following: Jaakko Ailio, “Liberal Thanatopolitics and the HIV/AIDS Pandemic,”
chronicity, particularly growing old with HIV’s chronicity, in scholarship on queer time and illuminates the harmful erasures and theoretical silences this occlusion promotes. Ultimately, I argue that growing old with HIV’s chronicity is a queer-crip time that effectively revalues those with amplified, compromised, devalued, and excessive forms of embodiment, in essence “wrinkling” queer time.

Before I discuss growing old with HIV’s chronicity as a “queer-crip time,” a freighted neologism that I will define and justify as I proceed, it is necessary to understand why HIV-inspired queer times only apprehend HIV in its acute and terminal iterations nearly two decades after the introduction of antiretroviral combination therapy. For Halberstam and Dean, queer time stems from the flirtation with or eventual fruition of the virus’ fatal proclivities, the exposure to what Dean calls “temporal contingency and finitude.”6 They isolate queer potential either in HIV’s unmitigated disease progression or in rituals of communing with or cultivating the virus. For them, HIV/AIDS indisputably inspires queer time, but only when death is promised or imminently possible. The possibility of finitude is much sexier to think with when fatalities are immediate, and the messy, embodied materiality of prolonged exposure to and intimacy with the HIV virus is circumvented. I contend that queer scholarship on HIV-inspired queer times remains purposefully anachronistic, fixed on terminality, and retrospective, intent on commemorating an era that claimed young queer life, because growing old with HIV’s chronicity is associated with “straight”

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times of disciplined and mature growth that tend to sterilize and “clean up” queerness past the point of recognition.

First, the concept of chronicity itself signals an “aged” or seasoned and subdued relationship between the HIV virus and its human interlocutors that mirrors narratives of “growing up,” which I previously characterized as “straight” in Chapter One. After the introduction of highly active antiretroviral treatment (HAART) in 1996, the HIV virus underwent a process of chemically-induced maturation, transitioning from an adolescent pathogen, unruly and unpredictable, to a more measured, controlled, “grown up” version of itself that analogously allowed for its hosts to grow, both up and old, as well. It is possible to imagine HIV’s chronicity as somehow “straighter” than its acute and terminal predecessors because it demarcates a presumably desirable shift from a disease progression that limited life to one that promises prolonged access to life, longevity, and growth. Not to mention, the HIV virus literally got “straighter” in time as medical and scientific communities proved that it was not strictly a “gay” disease.

The transition between HIV’s pubescent terminality and its adult chronicity signals maturation that extends beyond the realm of the microbial and medical and into the political. HIV’s development, from a risky and fatalistic adolescent illness to a restrained and reasonable chronic condition, indexes corresponding narratives of “maturation” from queer oppositional politics to gay assimilationist pragmatism in the late 1990s.

In Moving Politics, Deborah Gould writes that “queer” as an “anti-assimilationist and oppositional sensibility” that arose from AIDS activism, was a
product of the “political exigencies of the moment.”7 Old guard models of “establishment-oriented gay leadership” that privileged assimilation and respectability over transgression and transformation were deemed obsolete and outdated given the urgent immediacy of queer needs for healthcare reform and FDA accountability.8 This was a queerness that could not wait, that was disinterested in moderate reformism because, to quote a 1990 article in The OptiMSit on the birth of Queer Nation, “People are dying, and something has to be done NOW.”9 As a result, queer politics were dominated by youthful insurgency in lieu of staid practices of political conservatism, and HIV-inspired queer times emerging from this era were contoured by a strain of youthful radicalism that dwindled when drug treatments were secured and HIV’s status as “crisis” was not nearly as palpable.

The righteous anger towards and contestation of a homophobic medical and pharmaceutical industry fueled queer demands for drugs that ushered in a more placid political plane characterized by chronicity’s conservatism, the “straight” calm after a “queer” storm. HIV’s chronicity signals a time after the summer, or era, of queer’s “raging youth.” Given queerness’s youthful affinities, as discussed in Chapter One, HIV’s chronicity, as that which divests itself of adolescent terminality, constructs it as post-queer, as “straight.” Further, the contemporaneous emergence of HIV’s chronicity alongside gay neoconservative attempts to grow out of the “infectious irresponsibility” of the AIDS epidemic and grow up into state recognized systems of heteronormative legitimation further implicates chronicity as a symptom of straight

8 Deborah Gould, Moving Politics, 256.
9 Helen Fallding, “Queer Nation” “We’re Here, We’re Queer, Get Used to It,” The OptiMSit 16,(4) (1990): 20.
assimilationism, of folding back into “health” while concealing a “queer” illness.\textsuperscript{10} When HIV is no longer inevitably terminal, the collectives and communities it inspires necessarily becomes less “queer,” if “queer” as we know it is exemplified by the urgency and emergency of ACT UP’s die-ins and anarchic interludes like “Zaps” and “Outings.”\textsuperscript{11} HIV’s terminality inspired biosociality that manifested as an extension of an incensed and insurrectionary youth culture.\textsuperscript{12} Comparatively, HIV’s chronicity inspires a more “grown up” biosocial climate that can afford more politically conservative avenues of fundraising and campaigning rather than direct-action tactics because people just are not dying the way they used to.

Understanding tacit associations between the advent of HIV’s chronicity and the emergence of gay political conservatism and more “adult” forms of assimilative biosociality is pivotal for grasping why growing old with HIV in the twenty-first century is regarded as less “queer” than dying of AIDS in 1985. While HIV’s chronicity functions as a symbol of biomedical progress, it also signals the securitization of growth, the possibility of growing up and growing old, both of which are inseparably apprehended as tenets of “straight” rather than “queer” time. Further, and most importantly for the argumentative unfolding of this chapter, I argue that HIV’S chronicity as \textit{biomedical progress}, as a medically endorsed and mediated temporality, is interpreted as un-queer because it involves protracted dependence on

\textsuperscript{10} Christopher Castiglia and Christopher Reed, \textit{If Memory Serves: Gay Men, AIDS, and the Promise of the Queer Past} (Minneapolis: U of Minnesota Press, 2012), 40.

\textsuperscript{11} Helen Fallding, “Queer Nation” “We’re Here, We’re Queer, Get Used to It,” 20.

\textsuperscript{12} Anthropologist Paul Rabinow coined the term “biosociality” to describe collectives of people who formed community around a shared genetic diagnosis. The term is now used more expansively to apply to communities that are forged on some shared basis of biological citizenship, usually but not always, related to illness. I use the term here to refer to communities of queer or gay people who are connected to each other because of the shared experience of sero-positivity [Paul Rabinow, “Artificiality and Enlightenment: From Sociobiology to Biosociality,” in \textit{Essays on the Anthropology of Reason} (Princeton: Princeton University Press, 1996).]
the clinic. The clinic is often spatialized as a heterosexual and homophobic site that is responsible for generating “straight” times of discipline, control, and obedience in exchange for health and life.

A tenuous relationship between the queer and the clinic exceeds and pre-dates the gross medical negligence and pharmaceutical laxity that sustained the AIDS epidemic and still persists today. The “homosexual” as a perverse and pathological character owes its origins to clinical spaces during the rise of sexology and psychoanalysis in the late nineteenth-century. These social scientific and psychotherapeutic disciplines and techniques exercised a curative logic when apprehending homosexuality; they derived pleasure from identifying, treating, and attempting to convert those who suffered from “perverse” sexual inclinations into rehabilitated heterosexuals. Today, the relationship between queer people and the clinic is still fraught, not only because of residual and still rampant homophobia that influences and restricts medical treatment, but because of the presumed heterosexuality foisted upon many patients. It is not surprising, then, that queer theorists who write about the time of HIV do so using an anti-relational framework that privileges lost futurity, abandoned longevity, and an embrace of terminal finitude; for them, queer time is all rapid onset and a short course with a terminal finish. To imagine the time of HIV as a chronic condition requires a chronic

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15 Leo Bersani’s “Is the Rectum a Grave?” and Lee Edelman’s No Future, are most commonly associated with the anti-relational or anti-social turn in queer theory. Although not as frequently canonized alongside Bersani and Edelman, Tim Dean and Jack Halberstam both demonstrate anti-relational tendencies in their work. Like Bersani and Edelman, both Dean and Halberstam reject the primacy of majoritarian heterosexual kinship structures, reproductive futurity, and longevity. However, unlike Bersani and Edelman, Dean and Halberstam do not adopt the anti-communitarianism that
embrace of the clinic, a relationship that is “marked by long duration or frequent recurrence; not acute.”

By embracing HIV in its acute and terminal iterations, queer theorists can circumvent the clinic, a site of homophobic haunting and imposed timetables, through a continued refusal of the chronic. If queer theory were to think critically about growing old with HIV, to consider the possibility of aging alongside HIV’s chronicity as a queer time, the space and time of the clinic would be unavoidable. Aging is already perceived “through the prism of illness,” and thus, is associated with clinical spaces already, regardless of an aging person’s HIV status. Old age is conveyed diagnostically as a cluster of symptoms that, in their summation, all result in a pathological weakening and forgetting of the self that is catalyzed by the diminishment of the body and mind. Within this social imaginary of aging, as a process that construes the elderly as orphaned shadows, unsewn from their people and only recognizable as residually human, growing old is a deleterious condition that requires vigilant monitoring and management within clinical spaces. If growing old is compounded by HIV’s chronicity, dependence on clinical spaces and clinical times, meaning pharmaceutical and treatment schedules, are necessary for survival. Despite highly justified queer opposition to the clinic, does dependence on the clinic or

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biomedical imbrication actually “straighten” those who are aging with HIV? More importantly, do we desire a queer time that systematically dismisses the lives of those who are aging with the virus, many of whom lived through and survived the epidemic from which queer time sprung? What about staying alive is characteristically un-queer here and how might our tacit denouncement of HIV’s chronicity reinforce ableism, ageism, and exclusion in queer time?

In the following chapter, I begin to answer these questions. I argue that queer times that dismiss the pursuit of life and longevity with HIV as a clinical matter, and thus, a “straight” and “straightening” endeavor, reinforce an ideology of ability in queer time. This means that those who experience somatic instability or compromised embodiment, including the aging and the ill, cannot access queer time and are not considered possible, let alone valuable, temporal inhabitants. Further, if HIV-inspired queer times are only expressed as acute or terminal, queer orientations in time and queer subjectivity itself are both imagined as perishable, fragile, fleeting, and never meant to last. I advocate for a revaluation of growing old with HIV’s chronicity as a queer-crip time, that locates queer emergence and potential in the corporeal experiences of those who are living and aging with the virus’ unpredictable animation.

I. Chapter Outline and Methods:

In my first section, I articulate the interdisciplinary stakes of working with the neologism, “queer-crip time,” and detail which disciplinary silences and strongholds I
am challenging and changing by using this term. I argue that it is impossible to imagine a wrinkled queer time, one that finds value in growing old, if we do not crip queer time as well, by emphasizing the inseparability of aging and disability, ageism and ableism. In the preceding section, I argue that growing old with HIV as a chronic condition crip queer time by necessitating dependence on a prescribed life course that is pharmacologically ordained and clinically embedded. While HIV’s chronicity exhibits elements of “straight time” by necessitating disciplined adherence to a prescribed life schedule, measured out in doses and doctor visits, I contend that the clinical obedience and pharmaceutical compliance that makes HIV’s chronicity possible does not “straighten,” but rather, queers and crips those who are aging with HIV. I also argue that when queer time avoids imbrication with the clinic and the chronic, queer time mirrors the most exclusionary aspects of “straight-masculinist” time as radically disembodied, and thus, inaccessible to those who experience compromised, and subsequently, amplified forms of embodiment.

Finally, in the last section I consider the queer-crip ontological implications of growing old with HIV. I counter common fears about growing old as a senescent process that only inspires ontological torpor and stagnancy by arguing that aging with HIV inspires ontological distillation, a (di)stilling of the self in which the normally “silent” or “hidden” time of he body is amplified, inspiring an embodied wakefulness that is often inaccessible in states of health and youth. I argue that ontological distillation is chronicity embodied. Throughout the chapter, I analyze public health campaigns, advertisements, doctor’s recommendations, self-help books, and first-person illness narratives geared towards and produced by gay men who are aging
with HIV. In doing so, I hope to craft a holistic, phenomenological analysis of growing old with HIV’s chronicity as an externally imposed, somatically implanted, and embodied temporality that simultaneously reinvigorates notions of queer time and ontology.\textsuperscript{18} I elaborate on Conrad Pegue’s provocative question from \textit{To Be Left With the Body}: “Who is the HIV/AIDS virus pushing us to become?”\textsuperscript{19} I ask, Who is the HIV/AIDS virus pushing us to become \textit{and unbecome}?

II. “Queer-Crip” Chrono-Neologism:
Why Growing Old with HIV is a Queer-Crip Time

Thinking about growing old with HIV as a queer and crip time might appear self-evident. To characterize growing old with HIV as an embodied temporality that queer and crip seems like an incontrovertible truth to me. Put most simply, growing old with HIV is a queer time because it signals a departure from narratives of desirable maturation that define growing up as an ascent into “healthy” and (re)productively viable adulthood. It is specifically a queer-\textit{crip} time because this departure is precipitated by illness, and aging, which is frequently read through the “prism of illness.”\textsuperscript{20} If the queer-crip qualifications of growing old with HIV as a

\textsuperscript{18} I focus on “illness,” which refers to the lived experience of disease as it is felt, rather than “disease” proper, which is a biomedical condition that is symptomatically determined by an external medical observer.\textsuperscript{18} In this way, my work engages with the lived experience of medicalization without reifying a medical model that might define a person only in terms of their disease’s symptomology rather than validating illness as an experiential, varied, and never fully documented phenomenon. I am modeling my distinction between “illness” and “disease” off of medical philosopher David Morris [“Diabetes, Chronic Illness and the Bodily Roots of Ecstatic Temporality,” \textit{Human Studies: A Journal for Philosophy and the Social Sciences} 31 (4) (2008).]


\textsuperscript{20} Haim Hazan, \textit{Old Age: Constructions and Deconstructions}, 20.
chronic condition are so clearly and readily deduced, why are the aging and the ill frequently construed as ill-fitting objects of study or vehicles of thought in queer theory and disability studies?

This section explicitly addresses the mutual and mirrored erasure of the chronically ill and the elderly, both in queer theory and disability studies more broadly and in queer and crip considerations of time. I argue that queer theory and disability studies both disavow subjects and timelines that are embedded in biomedical spaces or beholden to pharmaceutical treatment schedules because of disciplinary and identity-based tendencies to resist medicalization in both fields. When defending the relevancy and urgency of expanding queer theory and disability studies to address the lived experiences of those who are growing old and the chronically ill, I use the term “crip” for its effectiveness as a dilative device that challenges disciplinary silences. Disability studies scholars Carrie Sandahl and Robert McRuer embrace “crip theory,” not as disability studies’ successor, but as a complementary project that contests some of the discipline’s limitations without dismissing the discipline’s potential to reassess and rework.21 Within a similar vein, I gravitate towards the term “crip” in my own work to elucidate and rectify erasures in queer theories of time that are fortified by what Tobin Siebers calls an “ideology of ability,” which, at its simplest, is a preference for able-bodiedness.22 This directly manifests in queer theory’s disinclination to consider livelihoods at least partially governed by clinical times of discipline and obedience as properly “queer.” While my

theoretical contribution is primarily geared towards nuancing notions of queer time, my work is explicitly concerned with issues of access, health, and illness, positioning this chapter as a valuable contribution to disability studies, crip theory, and crip theories of time more specifically.

An ideology of ability pervades popular articulations of queer time as eternally youthful and divorced from the clinic and biomedical timetables. When queer time only associates queer possibility and potential with the earlier life stages, growing old is uncritically associated with senescence and ontological stagnancy; aging in later life is read as a site of debilitation from which queerness cannot spring. When queer theory dissociates from HIV-inspired temporalities that are defined by chronicity and a dependence on the clinic, this enacts the systematic exclusion of the ill and the aging from considerations of queer time. Thus, ageism and ableism are co-articulated in queer theories of time.

Despite the recent interdisciplinary turn towards a queer theory that co-articulates itself alongside disability studies and crip theory, there remains a tendency to focus exclusively on the “healthy” disabled, allowing for a continued disavowal of the clinic and the chronic. Susan Wendell defines the “healthy disabled” as “people whose physical and functional limitations are relatively stable.” They do not require more medical attention or clock in more clinical time than able-bodied healthy folks.23 Robert McRuer’s focus on compulsory heterosexuality and compulsory able-bodiedness as mutually constitutive powers of prescription is a good example of a larger trend in queer theory, which involves likening the policed and politicized queer

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body to the disabled body. The focus here is on a shared vulnerability between queer and disabled people because of social barriers; medical dimensions of disability or illness, anything that suggests dependence on biomedical timeframes or enmeshment in clinical space, is elided in interdisciplinary discussions about queerness and disability.

One could argue, as disability studies scholar Alison Kafer does, that HIV-inspired queer times, which are catalyzed by illness and sex in equal measure, are also explicitly crip. However, these queer temporal affinities with crip livelihoods are fleeting and terminal, only maintained when illness ensures an imminent death. Queer time’s acute loyalty to crip orientations in time is most evidently signaled by a troubling parenthetical in Halberstam’s treatise on queer time, in which he implores us to consider why we “applaud the pursuit of a long life (under any circumstances).” He then fashions the “queer” as that which does not compulsorily pursue longevity “(under any circumstances).” This parenthetical insinuates apprehension and even a glint of disgust about the dignified limits of compromised vitality and judges pitiable, perhaps even cruel, attempts to prolong life past a point of respectable “aliveness.”

While Halberstam primarily frames his argument from the outset as a simple critique of longevity as a bucolic desire for a long life that propels straight times of “growing up,” his parenthetical implicitly indexes a latent fear about unwholesome, medically assisted duration. The anxiety betrayed in Halberstam’s aside positions

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queerness, and queer time, as that which opposes medically assisted,
pharmaceutically measured, and clinically dependent life. When the parameters of
quaer time are drawn to exclude lives that are bound to biomedicine for survival,
imagining growing old with HIV as a queer time is virtually impossible.

A presumably simple solution for dilating queer time in such a way that might
challenge its ageist and ableist implications would be to holistically and
longitudinally “crip” queer time so that crip livelihoods are not merely imagined as an
acute rupture that incites queerness, but as a form of embodiment in which queerness
can persist over time. While this is certainly what I am calling for, it is important to
address the inherent challenges of associating “growing old,” or HIV, with disability
studies given the current disciplinary climate. While illness and aging are frequently
cited as harbingers of disability’s incipience, they are rarely centralized in disability
studies scholarship or disability justice spaces. Like queer theory, and for many of the
same reasons, disability studies is weary of including chronically ill and aging
populations in its purview because this would necessitate protracted engagement with
persistently “medicalized” bodies. Insistent divisions between medical and social
models of disability most succinctly communicate why disability is so often
differentiated from illness and growing old in disability studies.

The medical model frames disability as a problem residing purely in the body
of the individual, without the influence of sociopolitical or cultural factors. Disability
is simplistically viewed as an ailment that causes undue suffering and should be

26 Alison Kafer, Feminist, Queer, Crip (Bloomington: Indiana University Press, 2013), 41.
adequately treated and ultimately cured. Eli Clare critiques curative imperatives in the medical model and clarifies the model’s limitations: “To frame disability in terms of a cure is to accept the medical model of disability, to think of disabled people as sick, diseased, ill people….My CP [cerebral palsy] simply is not a medical condition. I need no specific medical care, medication, or treatment for my CP; the adaptive equipment I use can be found in a computer catalogue, not a hospital.”

Critiques like Clare’s, about the unfounded medicalization of “healthy” disabilities, inspired a social model in which disability is not imagined as an objective fact that resides in an individual body, but as a socially produced impediment that is the result of a disabling environment.

Certainly an uncritical allegiance to medical models of disability harmfully decontextualizes individuals from disabling environments and the policies that immobilize and neglect them. However, a devout disavowal of the medically dependent fails to recognize crip subjectivity in experiences of disease progression, compromised vitality, and health management, none of which exist even remotely within the province of able-bodiedness. Most troublingly, unilateral adoptions of the social model of disability that divorce themselves from the medical model generate hierarchical divisions between what Susan Wendell terms the “healthy” and “unhealthy” disabled.

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28 Eli Clare, Exile and Pride: Disability, Queerness, and Liberation (Cambridge: SouthEnd Press, 1999), 105-106.

29 Alison Kafer, Feminist, Queer, Crip, 6.
“Healthy” disabled people fashion themselves as comparatively more “able” than those who are ill, based on varying degrees of medicalization. Measures of one’s medicalization might include the number of times they visit a doctor per month, prescription pills taken daily, and even, as Clare mentioned, whether one procures adaptive equipment and other instruments for sustaining life and wellness from a doctor or an online catalogue. Manifold distinctions between the “disabled” and the “ill” in disability studies and disability justice communities reinforce a subset of the ideology of ability: an ideology of health. This ideology of health tirelessly works to maintain distinctions between the disabled and the ill, despite the fact that neat divisions between illness and disability are more frequently compromised than not.  

It is the ideology of health in disability studies and disability justice spaces, in addition to the freighted stigma attached to AIDS during the epidemic, that caused disability rights activists to distance themselves from AIDS activists who played a vital role in the passage of the Americans with Disabilities Act in 1990.  

30 In my work, I hope to destabilize notions of health and illness in disability studies that construct either as stable or impermeable. My exploration of HIV’s chronicity is concerned with the curious, queer-crip embodiments that materialize in what Lisa Diedrich refers to as a “remission society” and Julie Passanante Elman calls “cultures of rehabilitation.” Both terms emphasize contemporary cultures in which divisions between health and illness are eternally compromised to the point of negating the saliency of their distinction. The promise of rehabilitation, or in this case, undetectable viral loads and a longer life, produces the body as a project that is an eternally incomplete and always in need of monitoring to achieve provisional health. This provisional health is defined by the possibility of illness that it harbors, making ‘health’ and ‘illness’ analogously precarious [Lisa Deidrich, 2007. Treatments: Language, Politics, and the Culture of Illness (Minneapolis: University of Minnesota Press, 2007).; Julia Passanante Elman, Chronic Youth: Disability, Sexuality, and U.S. Media Cultures of Rehabilitation (New York: New York University Press, 2014)].  


32 Although growing old is not a uniform experience, it is most popularly imagined in terms of frailty. In “Frailty, abjection, and the ‘other’ of the fourth age,” Paul Higgs and Chris Gilleard claim that
explicit gestures of affinity between disability and growing old, including what Alison Kafer calls the “well-rehearsed mantra” of disability studies (i.e. “whether by age, illness, or accident,” we all become disabled), attempts to manage difference between the “adult” disabled and the elderly vehemently persists. This is likely because of the looming specter of institutionalized medicalization, of “going into care” never to return. Reluctance to affiliate themselves with the medically dependent aging has roots in the disability rights movement of the 1960s.

Due to the rights-oriented tenor of the disability movement that was all about securing the right to find employment and the right to live independently, there were pragmatic reasons why an alliance with the old was discouraged. The elderly were associated with indices of risk, need, and dependency; the nursing home, that clinically spatialized site of social death with which the elderly were commonly associated, was regarded as the epicenter of perpetual dependence and degenerative recursion, a place that facilitated becoming-infant again. Association with a population defined by institutionalized dependence was undesirable to young adult disabled people who wished to lessen their dependence on long-term care institutions and demonstrate self-determination and vitality. For these reasons, the disability rights movement became a movement run by and for young disabled people. The frailty is “shaped by the totalizing influence of high risk—not just of physical harm, but of becoming ‘lost’ from citizenship.” [Health Sociology Review: The Journal of the Health Section of the Australian Sociological Association 23, (1) (2014)]. Fears of intractable frailty are ultimately about the risk of social death, of incurring a dwindling selfhood that fails to meet the standards of full, rightful humanity.

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distance enacted between the “young” disabled and the elderly at this time still precipitates and maintains the absence of the aging question in disability studies. My work directly addresses the mutual and mirrored exclusion of the aging and the chronically ill in queer theory and disability studies. I am explicitly challenging the disavowal of clinical spaces and times in both disciplines by acknowledging and contesting the ideologies of ability and health that undergird this disavowal. I argue that queer and crip orientations of time should necessarily include deviations from narratives of desirable maturation, of growing up “healthfully,” that are precipitated by bodily instability, compromised vitality, and clinical dependence. I contend that when we think about growing old with HIV as a queer time, HIV’s chronicity and the contingent longevity it affords has the capacity to crip queer time, making it a more embodied, interdependent, and accessible temporality throughout the life course.

In the sections to come, I insist that while clinical time, times of pharmaceutical schedules and doctor’s appointments, involve elements of “straight” time as discipline, obedience, and compulsion, that dependence on the “straight” time of the clinic does not straighten subjects, but rather queers and crips them. Drawing on Tom Boellstorff’s work on a queer time of coincidence in which queer time can “fall” into straight time, experiencing contamination without co-optation, I assert that HIV’s chronicity is a queer-crip time of dependence, in which imbrication with “straight” clinical time actually manifests queer and crip temporal orientations.35 This relationship of temporal dependency does not compromise the queerness of its

subjects but rather crips and creates it.36 By challenging queer time to consider and revalue growing old with HIV, I hope to craft a queer time that honors heightened embodiment, rather than inadvertently mirroring the disembodied and exclusionary parameters of what Joshua St. Pierre calls “straight-masculine time.”37

Queer time must learn to wait it out with HIV positive gay men who grew up and are growing old with HIV. We need a queer-crip time of waiting rooms and daily doses that reimagines queer time not only as a source of imaginative eccentricity or insurrectionary failure, but as ambivalent obligation. A queer time of medically dependent aging does not manifest “straight” subjects or ontological stagnancy, but amplified relationships with the human body that reinvigorate notions of queer time and queer ontology.

III. Staving Off Sick Futures with an Obedient Present: Chronicity and “Straight” Clinical Time

Chronicity demarcates duration and preservation, both of which are ensured by dependence on biomedicine and a protracted intimacy with the clinic. Chronicity is this question, asked repeatedly and answered with calculated and recalibrated responses: How long can life stay still like this? While every chronic illness has

36 I am drawing upon the saliency of inter/dependency for disability justice activists like Mia Mingus, who centralize the transformative power of dependency, on people, institutions, and medicine, for securing a less ableist world. She writes, “Because most accessibility is done through relationships, many disabled people must learn the keen art of maintaining a relationship in order to maintain their level of accessibility.” [Mia Mingus, post on “Interdependency (excerpts from several talks),” Leaving Evidence, posted January 22, 2010, https://leavingevidence.wordpress.com/2010/01/22/interdependency-exerpts-from-several-talks/ (accessed April 9, 2015).

specificities that differentiate one from the next, I argue, like phenomenologist David Morris before me, that chronicity has a telltale symptomatology that interpellates sick subjects in similar ways regardless of the illness in question; HIV’s chronicity is an exemplary case of this. For those who are aging with HIV, their chronic operates cyclically, acting upon and residing within them as treatments are prescribed, measured in doses, and adjusted when and if comorbidities occur. The telos of chronicity, as a biomedically managed and somatically implanted time, is to unceasingly secure the body in a state of dormant or placated illness and provisional health that remains predictable; that stays still. Staying alive with HIV demands discipline and adherence to a life schedule that is clinically and pharmaceutically endorsed. This only occurs when those with HIV submit themselves to the “straight” time of the clinic.

HIV’s chronicity demands excessive concessions to certain elements of “straight” time, but it is never subsumed or wholly defined by them. Before detailing these concessions and their complexities, it is necessary to reiterate the contours and characteristics of straight time as it is conveyed and condemned in queer theory. Straight time is imagined in queer theoretical literature as a totalizing logic that forcibly organizes populations and allows little opportunity for contestation without risking social ostracism, at best, or social death, at worst. While it is frequently defined by its teleological thrust as a time that services majoritarian reproductive futurity and capital accumulation, I am primarily concerned with straight time as it is

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39 According to the Encyclopedia of Depression, “Comorbidity refers to the presence of two or more illnesses in the same person at the same time. The coexisting conditions are apt to influence each other…” [The International Encyclopedia of Depression, s.v. “comorbidity,” 2009.]
colloquially enacted in the clinic and embodied by the patient, as a time of discipline and obligation.40

Both Elizabeth Freeman and José Muñoz conceptualize straight time as something that is installed in the self and dictates how one grows and desires growth. It is a time that is insidiously embedded and embodied to the point where its exteriority becomes nearly untraceable. Freeman characterizes straight time as “chrononormative,” which she defines as a kind of temporal regulation that is implanted so seamlessly that “institutional forces come to seem like somatic facts.”41 Straight time’s concealment, masquerading as the body’s own “natural” time, is its currency. This is why queer time so frequently positions itself as “beyond somatic changes like puberty, aging, or illness,” to further reference Freeman; thus, embodied time is often uncritically dismissed as “straight.”

Within a similar vein as Freeman, José Muñoz characterizes straight time as an “autonaturalizing temporality” that limits our capacity to imagine any future that deviates from the “here and now of everyday life.”42 For Muñoz, like Freeman, straight time is regulatory, disciplinary, and strategically embedded in the self. Importantly, straight time also insists on the present’s unimpeded preservation in the future, hence anxious social imperatives to eternally protect and preserve reproductive futurity. Essentially, straight time’s relentless somatic implantation is

40 Lee Edelman, Jack Halberstam, and José Muñoz all critique the broader teleological thrust of ‘straight time,’ as a time that is reifies majoritarian heterosexuality, enforced reproductive futurity, and encourages capital accumulation. See: Judith Halberstam, In a Queer Time and Place: Transgender Bodies, Subcultural Lives (New York: NYU Press, 2005); Lee Edelman, No Future: Queer Theory and the Death Drive (Durham: Duke University Press, 2004); José Muñoz, Cruising Utopia: The Then and There of Queer Futurity (New York: NYU Press, 2009).
42 José Muñoz, Cruising Utopia, 22.
propelled by paranoia and intended to discipline and secure a future that is always already known.43

To maintain HIV’s chronicity, obligatory concessions to “straight” times of discipline and adherence are necessary and undertaken to ensure the indefatigable future of one’s present “health” for as long as possible. When an HIV positive person reaches an undetectable viral load, subsequent treatment is undertaken to maintain this particular present in longevity. In the case of HIV, health maintenance is about staving off the possibility of a future in which a palpably recalcitrant illness is awoken and devours the fragile present of provisional health. At least initially, it is possible to dismiss HIV, in its chronic iteration, as a virus that straightens its hosts by demanding the adoption of chrononormative clinical schedules for survival. However, I argue that HIV’s chronicity is born from exaggerated adherence to “straight” clinical time that crips and queers, rather than straightens its subjects. HIV’s chronicity is a queer-crip time not despite, but because of its dependence on the “straight” clinical time of treatment regimens and doctors appointments.

Poz.com, a lifestyle website for people with HIV/AIDS, is perpetually bursting with web content that encourages viewers to adhere to their treatment regimens, digitally hailing HIV positive people to comply with strict clinical and

pharmaceutical timelines. If you were to navigate through the AIDSMEDES section of Poz.com, the banner to come follows you wherever you go:

Fig. 1 “Are You on Schedule?,” Poz.com, Web banner.⁴⁴

This banner interpellates HIV positive people with an omnipresent watchfulness that installs immediacy, obligation, and guilt that will not be ignored. The old-fashioned alarm clock modifies the question, “Are you on schedule?” from a gentle reminder into a shrill and unforgiving command: “You must be on schedule NOW.” This is not the time of the docile wall clock that refuses to draw attention to itself, ticking with an unobtrusive murmur and a stoic face. This time is so loud that its sonic alarm is translated visually. The delicate shading around the clock intimates a vibrating body, trembling with impatient punctuality.

A banner like this is intended to routinely corral HIV positive people to ensure chrononormative compliance with clinical schedules. While “straight” clinical times of discipline are externally imposed they are also somatically implanted, installing Foucaultian self-surveillance via biomedical panopticism. Foucault argues that discipline is self-induced by a externalized gaze turned inward that enlists the self as its own overseer.⁴⁵ Or at least adoption and integration in the human body is the goal.

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when adherence to treatments schedules is externally prompted. The Institute for Healthcare Improvement emphasizes the importance of internalizing biomedically imposed time for people with HIV, asserting, “Chronic conditions require not just medical intervention, but behavioral intervention as well.”

People with HIV are encouraged to flank themselves with time-keeping devices, from the standard, organized pillbox to mobile health managing apps like Care4 Today, both of which are intended to prompt and routinize remembrance. In a short-form essay taken from the collection Still Here: A Post-Cocktail Anthology, a long-term survivor called M.L. writes about the ever-growing assortment of pills he takes:

Pills, pills, and more pills. More vitamins, more supplements, more naturopathic pills…Pills to prevent pneumonia, pills to prevent blindness. Insulin to counter the effects of insulin diabetes, resulting in neuropathy of my toes. Pills to reduce the diarrhea caused by the pills….There were even pills to stop the acid reflux caused by all the pills.

M.L., like many others aging with HIV, is popping pills for pills to mitigate the side effects of enduring exposure and dependence on very strong and often toxic drugs. Long-term survivors are aging with chronically inflamed and exhausted immune systems that can also increase the chance of comorbidities. A higher incidence of comorbidities often means more pills and more doctors; multiple

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treatment regimens must be synchronized and new medications scrutinized to ensure that nothing interferes with the efficacy of the antiretroviral treatment.\(^{49}\) Treatments are frequently amended to accommodate both viral and human growth, often making “straight” clinical time more omnipresent as people age.

I have detailed chronicity’s dependence on clinical straight time as a time of controlled self-management. I have yet to emphasize how this diligently controlled timetable attempts to secure the present’s preservation in the future, another characteristic of “straight” time, at least after an undetectable viral load is acquired. An undetectable viral load is the most desirable present for people aging with HIV and it is the present that treatments aim to tirelessly preserve when acquired. Viral suppression only occurs when adherence is devout and medications are taken as prescribed at least 95 percent of the time.\(^{50}\) The demand for devout adherence does not lessen after an undetectable viral load is acquired because it is never permanently secure. While an undetectable viral load is often endorsed as treatment’s teleology, a chronic condition is inherently non-teleological. An undetectable viral load signals an anxious absence that is maintained by the threat of its own impermanence. Viral suppression is only an indication of provisional health, a self-conscious iteration that cannot help but recognize its own fallibility and contingency. After achieving an undetectable viral load, the new status of provisional health often provides no tangible relief because the body is eternally haunted by the specter of future illness.\(^{51}\)

\(^{51}\)Lisa Diedrich, *Treatments*, 3.
In this advertisement for the “HIV Stops With Me” campaign, devout adherence, even after he becomes undetectable, is necessary for Cory to subdue his eager and prolific virus.

Fig. 2 “Cory: Detectable/Undetectable,” HIV Stops with Me Campaign, Advertisement.\(^{52}\)

Cory’s health and liveliness is demarcated by color gradation in this image. When he goes from “undetectable” to “detectable,” the virus ostensibly leeches him of his vitality, demonstrating a vampiric deadening of animation that is conveyed by his muted pigmentation. Cory and his virus are drawn as competing life forces; if he stops taking his meds and “lets the virus take over,” he compromises his access to provisional health and forfeits his title as the dominant life force of his own body, seceding supremacy to his viral occupant. Cory’s undetectable present must be assiduously maintained to stave off the virus’ voracious desire to animate him in its own fatalistic image. This advertisement also incorporates a competitive sense of temporality, drawing a division between viral and human timelines. If Cory stops taking his meds and “lets the virus take over,” the virus’ desired speed and tempo eclipses and overcomes his body’s own time. If the virus has its way, his bodily time becomes coextensive with that of viral replication and disease progression. However, if Cory does take his medication, the virus “stops with him.” He immobilizes the virus, and in so doing, temporally delimits its spread and restores temporal primacy to himself.

In his short-essay titled “Monday,” long-term survivor Bernard Cocchiola also implicates his HIV virus as a voracious entity that “feeds and feeds the livelong day. It eats my future. It chews my past…It eats my time. It grows fat.”53 His gluttonous depiction of HIV as a temporal feeder suggests that the presence of the virus in the body, and the disciplined effort it takes to control its voracious hunger, strips the present and the past of their saliency and amplifies the immediacy of the now. For

Cory and Cocchiola, HIV and its treatments expose and indebt them to a “straight” clinical time in which the present’s disciplined renewal is paramount.

For people aging with HIV as a chronic condition, adherence to “straight” clinical time, time driven by discipline and obedience, time that is prescribed as chrononormative compulsion, time that is implanted in the body to ensure the present’s permanency, is necessary for survival. However, adherence to “straight” clinical time does not produce hyperbolically straightened subjects, but actually queer and crips those it inhabits. To better understand why this iteration of “straight” clinical time does not straighten and how it queers and crips, it is important to clarify how “straight-masculinist time,” that which actually produces subjectivity that is most privileged and endorsed, desires entirely different, able-bodied, and healthy subjects. The time of the clinic, despite its endorsement of certain facets of straight time as it is frequently characterized in queer theory, is not representative of the holistic straight time that produces “straight” subjects.

In the section to follow, I clarify what I mean by “straight-masculinist” time and how it deviates from the “straight” time of the clinic. I also define the “straight” subject desired within dominant strains of “straight-masculinist” time and elucidate how this subject is critically differentiated from those who are aging with HIV. By doing so, I will explain how clinical time, despite its emphasis on aspects of discipline and chrononormative control, is more aptly considered a crip time because it inspires deviation from straight subjectivity while facilitating dependent and amplified embodiment. I advocate for a queer time that aligns itself with these
dependent and excessively “bodied” subjects, rather than demonstrating complicity with disembodied “straight masculinist” time.

IV. The “Healthy” Disembodied: Contouring and Contesting “Straight-Masculinist” Time

Phenomenologist and crip theorist Joshua St. Pierre defines the “straight-masculine time order” as a “future-directed linearity abstracted from the flux of bodily time”; those who inhabit this timeline desire mastery over time by “disavowing…embodiment and material conditions.” This is a privileged time of willful disembodiment, experienced by those who are unencumbered by the heft of the compromised and condemned forms of embodiment often associated with women. While St. Pierre only focuses on gender in his definition of “straight-masculinist” time and those that it embraces and excludes, people of color, gender non-conforming folks, the disabled, the ill, and the aging, are also policed and punished for excessive fleshiness and are similarly excluded from a “straight-masculinist” time order. While I am tempted to include queer people in the lineup of those who are excluded from straight-masculinist time, many iterations of queer time mirror and mimic a disembodied abandonment of materiality that eerily resembles, if not reiterates, disembodied elements of straight-masculinist time. Further explication of these similarities will follow a detailed analysis of straight-masculinist time, the subject it craves and creates, and how this subject critically deviates from those fashioned by “straight” clinical time.

Straight-masculinist time desires a dependent and disciplined subject who is also flexible and free. Unlike “straight” clinical time, which is all discipline without reprieve, those who inhabit straight-masculinist time, those who are considered “healthy” (read: normative) citizens, are also capable of measured and epistemic release. These subjects can spontaneously improvise with and exert mastery over time without immediately compromising their own bodily stability. I argue that straight-masculinist time, as it is desired and (dis)embodied, is about maintaining a balanced resolution between control and release that depends upon relatively stable notions of “health” that clearly differentiate it from “straight” clinical time and its subjects. I am using an expansive definition of “health” here to encapsulate bodily wellness as it is assessed by more traditional biomedical standards and to demarcate the ineffable glow of privilege that permits carelessness and recklessness without censure. I associate this sort of health with those who are wealthy, white, able-bodied, and typically male.

Straight-masculinist time is driven by a holistic vision of health that does involve discipline and self-control, but it is always balanced with what sociologist Robert Crawford calls “the ‘health’ of pleasurable escapes.” Crawford teases out the complexities of “health” as a well-balanced possession of the self that consists of bodily discipline and self-restraint as well as corporeal whimsy and transgression. While straight-masculinist time still demands adherence to certain disciplinary and compulsory benchmarks in time, including marriage and reproduction, the ability to electively un-discipline the body and “play” with time is also encouraged. I argue that

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these often-paradoxical impressions of what constitutes health play a large role in imagining straight-masculinist time and those who can fully occupy it.

Straight-masculinist time works to simultaneously cultivate and attract a particular “healthy” subject, namely someone who can do reckless, improvisational, and playful things with time that deviate from and are not beholden to the body. These people are not tethered to the present or the present’s preservation in the future, because they are “healthy” enough to toy with unpredictability. They view the future with future-oriented anticipation rather than present-biased expectation. David Morris’s distinction between anticipatory and expectant time is helpful here. Straight-masculinist time, which desires occasional deviation from discipline and is thus inclusive of variability and change, approaches the future with anticipation as “a yet to come.”

Straight-masculinist time creates and attracts “straight” subjects (where ‘straight’ quite broadly encompasses any subject who receives social and institutional privileges because of the randomized accident of the way their body looks, how it moves, and how it is perceived by others). In many ways, the subject of straight-masculinist time is a descendant of the humanist Enlightenment subject. They are able to claim an authoritative “I” and exert mastery over the story of their lives; they are unencumbered by their own fleshiness because they inhabit a body (white, heterosexual, able-bodied, youthful) that has the privilege of forgetting itself. They are not marred or marked by condemnationary embodiment that draws the eyes of

others, nor do they experience the sort of compromised vitality that forces them to sit still with their bodies in need and dependence.

Straight time, with its incorporation of health as regimentation and health as release or even recklessness, is only accessible to those with hidden bodies. Kevin Aho and James Aho, both phenomenologists of health and illness, claim that a truly “healthy” body hides itself; the labor of our organs and cellular networks are silent and unnoticeable to us when they are running smoothly.⁵⁸ Those who are “healthy” feel the minute fluctuations of their own cellular time much less than those who are ill and drawn to their body more frequently in times of crisis and routine management. Similarly, when we conceptualize “health” more broadly as privileged embodiment, those who are “healthy” are more hidden in public spaces, less likely to experience state violence, police brutality, medical negligence, or sexual assault.

For those who are aging with HIV, they are bound to a clinical time that demonstrates characteristics of straight time, but only those of discipline and control, not release. Demanding treatment schedules and frequent doctor’s visits occasion less lenient and more persistent experiences of embodiment that crips and queers rather than straightens those who are aging with HIV. They are cribbed in their dependence on the space of the clinic and the pharmaceutical industry, along with their devout adherence to biomedical time schedules. They are queered because the provisional health that is incurred while living in a state of chronicity translates into a departure from narratives of desirable maturation.

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While I have already detailed why it is that growing old with HIV is not immediately apparent as a queer-crip time, mostly due to disciplinary disavowals of medicalization in both queer theory and disability studies, there are unexpected similarities between straight-masculinist time and queer time that also influences this erasure. I argue that most contemporary iterations of queer time are insidiously coeval with straight-masculinist time and often reproduce, rather than contest, the primacy of those who the able-bodied, “healthy,” and youthful.

Both straight-masculinist and queer time value subjects who can improvise and play with unmanaged time. They privilege those who can access “ecstatic temporality,” a Heideggarian concept, that celebrates the unfolding of time and its pupils as a “radical yet-to-be” in which subjects are provisionally defined not by who they are but by who they are becoming.59 By this, I mean one’s capacity to behave in ways that disrupt rituals of self-management that perpetuate an expected or fixed future. Queer time, as it is currently conceived, is associated with all that is unscheduled, unpredictable, and predicated on a failure to adhere to systems of discipline and control that might limit one’s unpredictable capacity to become.60

It is important to note that despite their similarities, I am not arguing that straight-masculinist time and queer time are indistinguishable. While they both value improvisational deviation from disciplinary strictures, queer time is staged as a permanent departure from times of discipline, not merely as a momentary deviation. In straight-masculinist time, a desirable deviation from self-management is more of a

calculated demonstration of episodic hedonism that does not disturb the compulsion to or necessity of routing subjects into larger teleologies of reproductive futurity and capital accumulation. Queer time, however, is invested in loosing bodies from what José Muñoz refers to as the “present’s stultifying hold” more permanently. Muñoz’s vision of queer futurity as “forward-dawning, anticipatory illuminations of the not-yet conscious” directly aligns queer time with ecstatic, improvisational temporality and privileges subjects who do not depend on the present’s chronic preservation for their survival.

When Muñoz urges queers to “Take ecstasy with me,” this is a call that is simultaneously temporal, carnal and recreationally pharmaceutical. He is not interpellating long-term HIV survivors who are advised to abstain from drugs and alcohol and devoutly adhere to their treatment regimens. If anything, this invocation of ecstatic temporality as queer time excludes anyone who cannot stand outside of time in an act of rebellious world-making without immediately compromising their health. When Muñoz critiques the present as a “stultifying temporality and a time that is not ours, that is saturated with violence, a time that is not queerness,” he is disallowing for the possibility of a queer-crip time in which subjects are chronically dependent on hyperbolic straight time, but not ‘straight.’

For Muñoz, those who are bound to a present that chronically delimits the possibility of a different world and another future are “ontologically static.” I argue that those who are aging with HIV are not ontologically static but ontologically

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62 Ibid.
distilled. Remaining provisionally healthy precipitates *ontological distillation*, a (di)stilling of the self in which a foreign, hyper-familiarity with the body is acquired and it’s normally silent bodily processes are irrevocably amplified. Ontological distillation is the embodied time of chronicity. It is the unrelenting attentiveness towards the body that inevitably materializes when provisional health is chronically managed. To be sure, this is certainly an unbecoming of a privileged self who unknowingly benefits from the hidden health of their body. Rather than lamenting the loss of the body’s silence, which participates in what Alison Kafer calls “compulsory nostalgia for the lost able mind/body,” I argue that there is unexplored potential for queer-crip growth that emerges in the stayed health and stilled presence of the body amongst people who are aging with HIV.65

HIV’s chronicity is an embodied temporality that crips notions of queer time as a time of somatic unbecoming and rebecoming, a time which is not inimical to the body, but wholly constituted by its transformations. I am advocating for a more accessible queer-crip time that does not evacuate the body or move “beyond somatic changes,” but is actually imagined through illness, disease, and aging.66 This is the queer time that finds us in the thick of our bodies, when we are left with the body only and life begins to touch itself differently.67

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65 Alison Kafer, *Feminist, Queer, Crip*, 42.
66 Ibid., 34.
V. Ontological Distillation:

Queer-Crip Emergence When We Are “Left with the Body”

In James Masten’s ethnographic self-help book, *Aging with HIV: A Gay Man’s Guide*, he writes, “Adjusting to chronicity shapes one’s sense of self, time, and body.”68 This is an ontological adjustment that concerns how the self is embodied and temporalized in illness, while aging. *To Be Left with the Body*, a publication for and by HIV positive gay and black men, similarly addresses the ontological fluctuations that accompany chronic illness. In their introduction to the volume, Cheryl Clark and Steven G. Fullwood write, “Illness reminds us of our fragile living, pries open the battered eye to see the unseen and that which we do not want to see. Frequent bathroom trips. Night sweats. Pills. Hospital visits.”69 Growing old with HIV interrupts that hidden, silent time of the body so revered in straight-masculinist time and various iterations of queer time today. Illness amplifies an otherwise inaudible time that resides at the heart of every human body and demands rapt attention.70

The prolonged experience of “holding illness,” as detailed by Clark and Fullwood, particularly in an aging body, results in what they call “life touching itself,” or what I further develop as ontological distillation.71 This distilled kind of touching is an obligatory check-up or an intentional check-in that demands stillness, in which the body is felt as matter, in all its fragility, dependence, need, and strength. For many, chronic illness, much like aging (as it is conceived in the social

69 Cheryl Clark and Steven G. Fullwood, *To Be Left with the Body*, xvi.
71 Cheryl Clark and Steven G Fulwood, *To Be Left with the Body*, xvi.
imaginary), is a body snatcher that steals the body from the self and distorts it past the
point of recognition and return. However, aging with HIV can occasion a queer
homecoming, a chronic return to the fleshiness of the self and to the body’s own time
that simply does not occur in health.

For those who are aging with HIV, the body’s own time is not singular or
even entirely its own, but fraught with internal paradoxes borne from its long-term,
chronic relationship with the virus. Although antiretroviral treatment suppresses HIV
replication, a protracted rapport with the virus results in persistent inflammation of
the adaptive immune system. Persistent inflammation can cause accelerated
immunological aging, or “immunosenescence.” The “natural” aging process, which
is also characterized by immunosenescence, is amplified and hastened by the
presence of HIV in the body. On a cellular level, HIV’s chronicity accelerates the
body’s time, but this cellular acceleration is paradoxically experienced as somatic
deceleration, a slowing of the body and the self.

In Aging with HIV: A Gay Man’s Guide, Tim shares, “I have difficulty
accepting that I have to slow down. I still try to multitask but it doesn’t work
anymore. I have a much shorter fuse. I get spent quicker than I normally do.” Tim
simultaneously experiences two embodied temporalities that are causally related; his
own cellular quickening generates a somatic slowing that draws Tim to his body and
ontologically (di)stills him there. Ronald similarly comments on the amplified
awareness of bodily need that emerges as he ages with HIV, insisting, “So the need

72 “Aging & HIV: An Introduction,” AIDSMEDS.com,
73 Ibid.
for eyeglasses or...or...or...or seeing aids becomes necessary. And there are other little tell-tale signs like that. You begin to slow down.” It is important here that Masten, when transcribing his interview with Ronald, remains faithful to his labored delivery. Ronald’s “or...or...or...or” might actually be indicative of his slowing down, intimating difficulty in finding, retrieving, and delivering thoughts and the conversational pause and wait that this engenders. The “or...or...or...or” reveals a moment of ontological distillation in which Ronald retreats into his body and stays there, rummaging for words that do not immediately present themselves.

It would be too easy to dismiss ontological distillation, the process of being drawn into and left with the body, as wholly undesirable. Certainly, many long-term survivors speak about the exhaustion and tedium of aging with HIV. However, heightened awareness of one’s own embodiment in its minutiae provides an opportunity for queer-crip growth that challenges socio-cultural imperatives to not only grow faithfully “up” but also to grow gregariously “outward.” Growth, as it is imagined in both straight and queer time, frequently privileges outward mobility (whether vertical, lateral, or backwards) with a demonstrable show of sociability (whether one demonstrates their social graces and propensities through marriage or enrollment in queer subcultures). Growth is often conflated with growth into the world and with other people, which perpetuates a definition of desirable maturation in which the self must adopt an extroverted, excessively mobile orientation that privileges those who are able-bodied, healthy, and neurotypical. To imagine queer-crip growth as a spreading into the embodied self under chronic conditions of

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ontological distillation, in which the body is louder, messier, and needier than ever before, is to imagine a queer-crip time that does not abandon unbecoming bodies and selves but recognizes the possibility in growth that amplifies embodiment rather than celebrating its negation or refusal.

James Masten, who is also HIV positive, wrote very sparingly about an encounter with what I would term ontological distillation that resulted in the unbecoming of a hidden, youthful and “healthy” body, and the rebecoming of an heightened and attentively bodied self. Masten writes:

One day while researching, I went for a jog and sprained my ankle. Full of the cocky, self-assuredness of young adulthood I didn’t see a doctor, pushed through the pain, and it healed. But I find that it’s not quite the same as the other ankle. A couple years later… I injured my shoulder while working out. This time, I learned from my mistake. I went to the doctor, who prescribed physical therapy, and my shoulder healed properly. It was a process for me to accept that my body was aging and that I could not longer ignore my aches and pains until they went away. Appreciating the changes in my aging body allows me to learn how to care for it better.  

Masten details two incidents in which he is drawn into his body. The first, in which he assumes the “self-assuredness of young adulthood” and elects to disregard his pain and forgo a doctors visit, demonstrates the negation of the body’s pull, which is frequently a disposition that is only reliably maintained by those in the throes of youthful, able-bodied vitality. His story indicates a shift in wakefulness, moving from the somnambulistic privilege of health to the enlivening process of discovering the

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body in moments of compromised vitality, actually respecting its need, and caring for it.

Tyrone similarly intimates a shift in wakefulness as he ages with HIV, that certainly queer and crips notions of liveliness. Tyrone shares, “I took more control of putting things in order, getting things more focused, working hard on my personal needs; putting me first instead of everything I was doing. I credit HIV with still being alive…I believe it [being diagnosed with HIV] probably saved my life.” In this passage, Tyrone speaks about growing ill and growing old as an enlivening process. HIV’s chronicity can inspire unparalleled wakefulness and animate and inspire growth in longevity. Too frequently, the experience of illness is aligned with a deadening of the body and the self that is ontologically stultifying, as if growth and wakefulness are impossible if stable health is lost.

This often unexamined tendency to associate growth and wakefulness with unimpeded health is challenged further in William Stewart’s short-form essay, “Parting Breath.” Stewart describes caring for a friend who is dying of AIDS and comments that he is “So large in life. Larger still in sickness.” This thoughtful musing on the “largeness” of his sick friend both illustrates and complicates the tyranny of “lifely wellness,” to reference Mel Chen’s discussion of animacy and illness, which normally supports the notion that health is what most vibrantly animates us. Stewart maintains polarity between “life” and “sickness,” as if sickness is somehow as antithetical to life as death is. At the same time, Stewart does not

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relinquish “largeness,” an indication of robust animation, squarely to the domain of “life,” but rather relegates largeness to sickness. This is an exciting instance in which liveliness is disentangled from ‘life,’ as a quality that is grown in sickness, while in chronicity, while growing old.

The heightened wakefulness, or acquired “largeness,” that often blooms in the bodies of those aging with HIV is a product of increased attunement to one’s own bodily time as it hastens and slows. This amplified awareness of the self is accentuated by a greater awareness of the body’s needs and dependencies. The embodied self is made larger through relationships of interdependence that often involve non-human aids and animators, including antiretroviral medications, vitamins, and even the HIV virus itself. Part of connecting with the embodied self as one is aging with HIV, involves the acknowledgment that the “self” does not wholly belong to oneself. There is no pristine and autonomous body to sink into, but a body that is radically relational and interdependent. In this instance, the ontologically distilled body is not entirely responsible for its own animation; it is held in place by a network of human and non-human dependencies that retroactively craft chronicity as an excessively queer-crip time to embody.

In “White Teeth,” Eve Sedgwick writes about how we might embody and perform sickness. She does not advocate for or idealize attempts to distance oneself from sickness, but rather, she identities queer, and I would argue crip, strength in one’s willingness “to be identified with in the very grain of one’s illness (which is to say, the grain of one’s own intellectual, emotional, bodily self as refracted through
illness and as resistant to it).”80 I do not interpret Sedgwick’s mention of “resistance” to illness as a rejection or refusal of its embodied reality, but rather as a call to sick and/or aging queers to resist socially mandated “sick roles.” It is necessary to resist reductive renderings of illness and aging as stultifying sites of loss that any desirable imagining of queer time and queer subjectivity would bend around to avoid or willfully unsee rather than confront. A queer time that recognizes growing old with HIV’s chronicity and the ontological distillation it installs is a queer time that values the care and keeping of bodies and selves that are consistently devalued and demeaned: the old body, the sick body, the queer body.

This is not a queer time of desire, but rather, a queer time of deviance and dependence. Queer time is not simply the times that we want, but also the times that we get, sometimes accidentally, that plot us outside of the oft-recited narrative arc of growing up. The queer time of the chronic is an accessible queer time that settles in the body and stays with us for a while. It is not forward-dawning, but gloriously unbecoming right now. This is the contemporaneous queer future that I first introduced at the close of Chapter One; a queer time that is materializing in the present, that we must retrain and strain our eyes to see and value. It requires stillness and an attentive listener, but it is here.

In the following chapter, I continue to explore my primary assertion that growing old is a queer time, but I use a more imaginative and fanciful register to do so. I move from a micro-level phenomenological discussion of queer-crip ontological

emergence while growing old with HIV, to a macro-level psychoanalytic discussion of menopause as a queer time that triggers a Lacanian symbolic disturbance by birthing the figure of the Crone. I argue that the postmenopausal Crone, when loosed in the symbolic, poses a threat to the “eternal”/maternal feminine and Lee Edelman’s figure of the Child, both of which are central components of reproductive futurity’s eternal perpetuation. I crown the Crone as an emblem of queer futurity that departs from reproductive straight time while precipitating gerontocratic reworlding that challenges queer theories of time to recognize the insurrectionary power of the excessively embodied, the “wrinkled” in time.
Chapter Three:
What’s for Dinner? The Child:
Killing the Kid, and Crowning the Crone for Queer Futurity

*Are you sure you’re not scared to be alone with Gramma?*

– “Gramma” by Stephen King

Adriana Iliescu did not get pregnant at the “right time.” At 66, the postmenopausal Romanian woman gave birth to Eliza Maria in 2005, after nine-years of IVF and longer still since her presumed “use-by-date.” Iliescu’s aged pregnant body roused intemperate moral panic about the discursive limits of ethical maternal embodiment, the parameters of which are always partially temporal. Popular tabloids approached Iliescu with reprobation, condemning her for the “grotesque” and “macabre experiment” of an untimely “geriatric” pregnancy that defiled the orthodox formula for a proper and pristine maternal body. “Good” pregnancies, those that do not inspire social vitriol or ostracism, involve a mother who is white, feminine, and heterosexual, but perhaps most importantly, she must be young and healthy.

There is a bioethical assumption that undergirds prescriptive expectations of youthful fertility, namely that a young woman will produce non-disabled children. Conversely, a woman “past her prime” must be in possession of a withered, debilitated and debilitating womb that can only tamper with fetal possibility.

However, moral objections to postmenopausal pregnancy exceed the biomedical

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4 Vivienne Muller, “‘Age Shall Not Weary Them,’” 6.
language so frequently deployed to sterilize, sequester, or shrink the discursive arena in which “rightful” maternal embodiment is debated. Adriana Iliescu’s pregnant body is reviled because she is a queer and prescient danger to the symbolic order and its disciple: the Child. The postmenopausal woman’s prescience resides in her presumed proximity to death, an intimacy foretold in the senescent shawl of wrinkles and varicose veins knit tightly across her skin. She prematurely swaddles the Child in death’s own promotional materials, giving it a wrinkled time in which growing old is more immediately present than growing up. Her posthumous presence, as the woman who emerges after the death of the supposedly eternal/maternal feminine and her Child, exposes reproductive futurity to its own mortality. This cadaverous Crone is queer time incarnate.

While this chapter does not specifically concern Adriana Iliescu or the ethical and biomedical debates surrounding postmenopausal pregnancy, this particular case demonstrates larger social anxieties about close contact between elderly women and small children that resides at the heart of my argument. In conversation with Lee Edelman’s Lacanian fantasy of the Child and the eternally reproductive future it services, I argue that the postmenopausal Crone is uniquely positioned as a symbolic threat to the Child and the eternal/maternal feminine from which it springs, because she provides embodied proof of reproduction’s end. I use the terms “Crone” and “Child” here, and throughout this chapter, to reference symbolic figures rather than literal human beings, whose dynamic relationship helps us think more critically about the boundaries between the very young and the very old and why they are incredibly porous, and policed as a result.
I specify the Crone’s post-menopausal status because menopause, the biological cessation of reproductive femininity manages to queerly turn her away from the irresistible magnetism of reproductive futurity’s narrative arc. I contend that menopause endows the Crone with queer political clout that an old man could never possess because andropause, unlike menopause, does not refashion the old man as a reproductive dead end. The postmenopausal body is replete with queer potential because it is no longer enlisted in reproductive teleologies. For these reasons, in the sections to come I argue that menopause is a queer time that manifests the rancorously non-reproductive Crone; this Crone is a suggestive figure, emblematic of an otherwise unimagined queer future, a gerontocratic reworlding. But I am getting ahead of myself.

First, I want to consider public perceptions of Adriana Iliescu’s maternal embodiment and motherhood as an exemplary case study that familiarizes us with the postmenopausal Crone as a figure with the capacity to destabilize what Lee Edelman calls “sentimental” (i.e. reproductive) futurism. Adriana Iliescu, and the moral panic she inspires, demonstrates commonly expressed but largely mystified anxieties about the Child at risk of contamination after an extended stay or a protracted relationship with the Crone.

Iliescu’s “deathly” body is imagined as a contaminant that might compromise the embryonic integrity and innocence of her unborn child. In an article entitled “Bag Lady with a Baby,” the author scoffs, “This birth will no doubt create a whole spate

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of new book titles, including: Wrinkles or Stretch Marks—you be the Judge.”

Iliescu’s paradoxical embodiment, namely that she is both post-menopausal and pregnant, is a veritable site of body horror. The confusion between wrinkles and stretch marks constructs Iliescu’s body as a zone of indeterminacy, in which it is unclear whether her body is selflessly stretching to accommodate the growth of another or selfishly exposing the inevitabilities of its own aging process. The assumption here is that Iliescu’s advanced age inhibits her bodily capacity to develop the effusively maternal nurturance that is required of a “good” mother. Her status as a viable vessel, capable of gestating a healthy baby to term, is called into question here, and the aged materiality of her body is at fault.

Pregnant women in Western culture, regardless of age, are viewed as untrustworthy containers for the fetal life they carry. Female fecundity, while expected, is also condemned as a sign of disorder, vulnerability, and impurity that contrasts the unapologetically open and penetrable body of the woman to the hermetically sealed, orderly, and rational body of the man. In the age of fetal personhood, where the fetus is a “two-dimensional icon” and “the-thing-in-itself,” to quote feminist science studies scholars Karyn Valerius and Donna Haraway, respectively, the fetus comes to represent what Marilyn Maness Mehaffy calls a “postmodern version of the Enlightenment-humanist individual,” a universal man-to-be in need of saving from the dangerous obstruction of an erratic and contaminating

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7 Jane M. Ussher, Managing the Monstrous Feminine: Regulating the Reproductive Body (London: Routledge, 2006), 17.
female body. While most pregnant women are always already condemned for their embodiment, Iliescu’s is a special case.

Iliescu’s paradoxical status as postmenopausal and pregnant makes her fecundity particularly frightening. Like her contemporary Thomas Beatie, a trans man who was sensationnally titled the “pregnant man” after undergoing artificial insemination to get pregnant and was sensationalized for his pregnant paternal embodiment, Iliescu’s pregnancy scares because it is fraught with gender ambiguity. While Iliescu is not male, she is not fully “woman” either, at least not when “woman” is socially valued as both young and reproductive. Her body, past its reproductive prime, is seen as post-woman, or even post-mortem woman, as she is reduced to a morbid materiality that consists only of a cadaverous womb/tomb. Her inability to reproduce “naturally” makes her an un-woman who defies strictures of normative femininity and threatens the Child in the process.

Iliescu is the abject as it is most powerfully imagined in Julia Kristeva’s *Powers of Horror* as that which “disturbs identity, system, order” (4). She simultaneously embodies Kristeva’s primary figurations of abjection; her gender alludes to the eternal tug of the pre-symbolic maternal, while her age summons the

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corpse. What’s worse, Kristeva specifies that the most violent scene and sign of abjection is the corpse of a familiar, a loved one or someone who looks just likes them, because this welcomes a more intimate destabilization of the self.\textsuperscript{12} Iliescu is the mother and the corpse; the familiar dead. She represents the cadaverous Crone; she is “death infecting life,” but also life gestated, birthed, and nursed \textit{by} death.\textsuperscript{13} Iliescu’s pregnant body, like the Kerch figurines of pregnant “hags” that Mikhail Bakhtin famously cites as models of the grotesque, “combines a senile, decaying and deformed flesh with the flesh of new life, conceived but as yet unformed.”\textsuperscript{14} Iliescu’s body is imagined as grotesque because it threatens to encase embryonic ripening in a rotting woman, instilling fears of proximity and pollution in which fetal life is prematurely aged, made frighteningly older than embryonic life should ever be. Every site of fleshly contact between the old and the fetal that is repeatedly imagined through conduits of connection, including amniotic fluid, the umbilical chord, the womb, the breast, is a source of contaminating closeness between the almost alive and the almost dead.

The postmenopausal pregnant woman is condemned for allowing “the specter of death” to “stalk” the Child, and its embryonic predecessor.\textsuperscript{15} Ultimately, Iliescu is charged with short-circuiting the life course by suturing childhood to later life with no roadmap for adhering to narratives of desirable maturation, of growing up. Anxieties about the truncated life course Iliescu provides primarily concern the loss of her daughter’s childhood and the lack of young parents to model “healthy” growth

\textsuperscript{13} Ibid.
\textsuperscript{15} Coco Gillepsie, “I know what your life will be like, Eliza,” \textit{The Guardian}, January 19, 2005.
patterns for her. When cultural critics criticize Iliescu for giving her daughter an “old woman in a nursing home” for a mother, this reveals anxieties about an unbecoming adult who is not young, feminine, and able-bodied enough to shepherd her daughter into (re)productive adulthood. Similarly, when Iliescu is chastised for dooming “little Eliza Maria to a largely unsupervised toddler stage, a childhood of drudgery as her mother’s caregiver,” a presumably unorthodox life course is on trial, in which the fantasy of the Child is extinguished and replaced with a child who thinks to grow old, but not up, who knows death “prematurely,” and experiences the contingency of futurity.16 This is what makes the relationship between the Crone and the Child dangerously queer.

To be clear, I am not making an ethical argument for or against postmenopausal pregnancy, nor am I uncritically celebrating childhoods lived with very ill, dead, or absent parents. Rather, I am curious about the implications of loosing an interloping figure, the post-menopausal woman, or Crone, into the triangulated network of symbolic relationships that produces the Child as the postponed, yet promissory fantasy of a hermetically consolidated subject.17 What does she do to the Child, and subsequently, what might she do to us? Transitioning from Iliescu, I would like to briefly turn to two other Crones, both of whom suggest very preliminary answers to these questions, which will continue to structure and drive the argumentative arc of this chapter. Each Crone is introduced to the Child, who is intimately susceptible to their influence.

We glimpse the figures of the post-menopausal Crone and the Child in 2014 possession flick, *The Taking of Deborah Logan*, when Deborah, an elderly Alzheimer’s patient who is possessed by a spiritual parasite, kidnaps a little girl with leukemia from the pediatric ward. While the girl’s parents frantically search for her, Deborah’s jaw unhinges and her mouth engulfs the Child’s head as the parasite passes between them in a moment of shared vulnerability (see Fig.1).

Figure 1: “Swallow,” *The Taking of Deborah Logan*, 2014.

A similar iteration of the post-menopausal Crone manifests in a 2001 horror film called *The Others*. Grace, the mistress and mother of the house, discovers a ghostly old woman inhabiting her daughter’s body, with her milky blind eyes and a

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18 *The Taking of Deborah Logan*, directed by Adam Robitel (2014; United States: Millenium Entertainment, 2014), DVD.
19 *The Others*, directed by Alejandro Amenábar (2001; Spain, United States: Miramax Films (US), Warner Bros. (Spain), 2001), DVD.
gummy smile protruding from beneath the veil of Ann’s first communion ensemble (see Fig. 2). In both instances, the figure of the Child is alienated from the family and her birth mother when in close contact with the Crone. Subsequently, if only for a moment, the Child and the Crone are indistinguishable. The seams that distinguish their bodies from each other are sewn together and their subjectivities are inseparable, a symbiosis that produces a Child who is neither eternally young nor capable of growing up. In this moment of polluting proximity, the Child can only become Crone, can only grow old.

Figure 2: “But I am your daughter,” The Others, 2001.
I. Chapter Outline

In this chapter, I argue that close contact between the Crone and the Child radically threatens the integrity and makeshift stability of the subject, whether “queer” or “straight,” while also compromising the primacy and longevity of reproductive futurity. I advocate for the revaluation of menopause as a queer time because it marks the cessation of reproductive femininity, and thus, reproductive futurity. I recognize this rancorous interlude in the life course as a wrinkle in time with exuberantly queer ramifications.

I build upon my arguments from previous chapters about queer time’s reluctance to recognize embodied, inevitable temporalities as queer, further nuancing and challenging this disinclination by introducing its uniquely gendered components. More specifically, I trouble a masculine bias in queer theories of time, and queer theory more generally, that routinely constructs explicitly “feminine” biological time as un-queer, and thus refuses to recognize menopause as a queer threat to reproductive futures.

I advocate for a turn towards Kristeva’s abjection as a psychoanalytic framework for reading menopause and the Crone into Edelman’s conversation about reproductive futurity and the Child and reimagining queer departure and disruption through the lens of a rancorously feminine and embodied aging process. If menopause is revalued as a queer time of abjection that aborts reproductive futurity, I argue that its postmenopausal product, the Crone, is emblematic of a new queer futurity.
In my last section, I turn to cultural texts, including the Grimm’s Brothers “Hansel and Gretel,” a supernatural horror film called *Dead Silence*, and a Stephen King novella called “Gramma,” all of which feature relationships of contaminating closeness between older women and young children. I argue that each of these texts suggests a cessation of reproductive futurity that envisions the dethroning of the Child and the crowning of the Crone.

II. “She’s in a queer time, psychically”: Menopausal Queerness and the Death of Womanhood

The Crone is a dead woman walking. She is the posthumous menace who stalks the limp and lifeless body of the reproductive, maternal woman and cackles at her misfortune. Cause of death? Menopause. Hormonal exsanguination, that prolonged draining of the feminine life force, was of course inevitable, but tragic nonetheless. If we perform a symbolic postmortem, it becomes quite clear; menopause kills the “eternal feminine,” the maternal body, the ageless womb, from which every subject springs and replaces her with the Crone. Or, at least this is the monstrous transmogrification for which menopause is feared in the Western cultural imaginary. Before explicating the symbolic relationship between the Crone and the Child and imagining the implications of their meeting for queer futurity, it is necessary to think about menopause as a queer time.

We must think about menopause first, because it is from menopause that the Crone emerges. Menopause is an embodied temporality that somaticizes queer time’s design. It is an unbecoming process that exposes reproductive futurity to its own
fragile constitution. I analyze representations of menopause and menopausal women throughout the twentieth and twenty-first century for representational breadth rather than historical specificity. In this section, I aim to provide a brief but cohesive picture of continuity in Western representations of menopause as a time that has always been associated with the queering, or estranging, of women from themselves and the straight reproductive life course.

Menopause is faulted for a litany of aberrant or strange behaviors and temperaments, in both historical and literary representations, which certainly warrants its association with the adjective “queer.” In *The Little Stranger*, Sarah Waters’ 2009 gothic novel and ghost story set in 1940s England, Mrs. Ayres, the menopausal mistress of the manor, is blamed for unleashing poltergeist activity upon an unsuspecting household. Mrs. Ayres is isolated as the potential culprit because of her “change of life,” which was and still is associated with emotional volatility and physical turbulence, both of which might manifest in psychokinetic phenomena. A doctor visits the manor and assesses her condition. He confirms that she might be the unwitting perpetrator, because after all, she is in a “queer time, psychically.”

*Ethan Frome*, a 1911 novel by Edith Wharton, also features a menopausal woman who is feared for her queer peculiarities. Zeena, Ethan’s wife, is described as a wan and reticent figure with a “flat-chest” and a “shut face” who is hardly the picture of supple and fecund femininity. Ethan fears his wife’s ominous withdrawal, recalling, “his mother’s growing taciturnity and wondered if Zeena were also turning

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‘queer’.”22 Ethan, mirroring medical opinions of menopause at the time, dreaded the “queerness” of middle-age as a life stage in which women retreat into themselves and become glacial entities, carved by their “sullen, self-absorption.”23

Mrs. Ayres, Zeena, and their menopausal states, are called “queer” because they disturb order and upset balance. In both novels, menopause poses a malevolent threat that upsets the harmony of the home and once holy matrimony. More contemporary biomedical depictions of menopause similarly depict the cessation of menstruation as a deleterious event that threatens familial and marital cohesion. In a 1967 article, doctor Bill Davidson argues, “nearly all gynecologists recognize today that a difficult menopause can cause broken homes, broken families, lawsuits, bitter quarrels.”24 The Davidson article, and others like it, was at least partially a response to the mutinous feminist rhetoric that began to emerge in the 1960s. Gynecologists advocated for hormone replacement therapy (HRT) to protect families that were at risk of calamitous exposure to menopausal wrath, a domestic terror that was only amplified by the sociopolitical ferment of burgeoning feminist sexual politics. Menopausal women were increasingly framed as irresponsible and heartless if they did not treat their hormone deficiency, and in doing so, prioritize the care and keeping of their families.

Robert A. Wilson, the Manhattan gynecologist who wrote Feminine Forever, the groundbreaking ode to HRT that inspired a record-level spike in prescription rates, contended, “Every woman has the right---indeed the duty---to counteract the

22 Edith Wharton, Ethan Frome (New York: Scribner, 1939), 54.
23 Ibid., 85.; Also, please see the following text for a more detailed analysis of menopausal “queerness in Ethan Frome: Ruth Formaneck, The Meanings of Menopause: Historical, Medical, and Cultural Perspectives (Hillsdale, NJ: Analytic Press, 1990), 266-267.
chemical castration that befalls her during her middle years.”\textsuperscript{25} Wilson is primarily concerned with the tragic repercussions of menopause for husbands, who are subsequently doomed to “stiff and unyielding” vaginas that are incapable of satiating their sexual desires.\textsuperscript{26} His stance corroborates the misogynist truism that women are and should remain eternally selfless.\textsuperscript{27} Self-abnegation is not only a woman’s duty and her crowning virtue; it should be her utmost desire and remain unaltered throughout the life course.

Menopause, then, is imagined as a queer and present danger to the social and symbolic order. It is associated with the death of the selfless, “eternal”/maternal woman, and subsequently, her family’s dissolution. If, as Jane Ussher argues, “the reproductive body is central to the process by which women take up the subject position ‘woman’; central to the performance of normative femininity,” menopause kills the “woman.”\textsuperscript{28} Menopause exorcises and expunges her of social worth; she is no longer familiar to or possessed by the value system that rendered her desirable. She is unhaunted, and thus, unwanted. The self-enclosed fantasy of everlastingly giving, fertile womanhood that circulates widely, amasses tremendous gravity, and collects legions of loyal followers, does not know her, does not recognize her, does not know how to want her. Her body, frighteningly unsewn from the maternal, selfless pattern from which she was stitched, poses a problem that threatens to unravel the social, which is to say, to fuck with reproductive futurity.

\textsuperscript{26} Ibid, 70.
\textsuperscript{28} Jane M. Ussher, \textit{Managing the Monstrous Feminine: Regulating the Reproductive Body} (London: Routledge, 2006), 4.
Proponents of HRT have lost medical clout in recent years after this “treatment” method was conclusively linked to high incidences of endometrial cancer, but sociocultural perceptions of menopause as womanhood’s fatal finish persist. Feminist critiques of menopause’s symbolic morbidity abound, many of which contest menopause’s medicalization and advocate for homeopathic remedies and self-help solutions. Proponents of HRT have lost medical clout in recent years after this “treatment” method was conclusively linked to high incidences of endometrial cancer, but sociocultural perceptions of menopause as womanhood’s fatal finish persist. Feminist critiques of menopause’s symbolic morbidity abound, many of which contest menopause’s medicalization and advocate for homeopathic remedies and self-help solutions. Proponents of HRT have lost medical clout in recent years after this “treatment” method was conclusively linked to high incidences of endometrial cancer, but sociocultural perceptions of menopause as womanhood’s fatal finish persist. Feminist critiques of menopause’s symbolic morbidity abound, many of which contest menopause’s medicalization and advocate for homeopathic remedies and self-help solutions. Proponents of HRT have lost medical clout in recent years after this “treatment” method was conclusively linked to high incidences of endometrial cancer, but sociocultural perceptions of menopause as womanhood’s fatal finish persist. Feminist critiques of menopause’s symbolic morbidity abound, many of which contest menopause’s medicalization and advocate for homeopathic remedies and self-help solutions. Proponents of HRT have lost medical clout in recent years after this “treatment” method was conclusively linked to high incidences of endometrial cancer, but sociocultural perceptions of menopause as womanhood’s fatal finish persist. Feminist critiques of menopause’s symbolic morbidity abound, many of which contest menopause’s medicalization and advocate for homeopathic remedies and self-help solutions.

Others adopt a more spiritual approach to menopause as an exalted rite of passage that reawakens the Goddess, or the archaic Earth Mother within. While these revaluations of menopause might provide some women with tremendous solace and a reinvigorated sense of direction and purpose, their scope is either purely pragmatic with a tendency to leech menopause of its imaginative insurrectionism, or apolitically symbolic. When menopause manifests the wholesome, telluric Goddess, it provides seamless continuity to the munificent maternal rather than contesting her stifling preeminence. Menopausal rancor is diminished and selfishness is pacified when the monstrously disturbing symbolic potential of “the change” is divinely dressed as a benevolent Goddess who gives, and gives, and gives.

I am advocating for a queer “politics of menopause,” to cite Mia Campioni’s ode to menopause’s “revolting women,” that hails the malevolent Crone who takes, and takes, and takes. She comes in fits and starts, emerging in hot flashes, night sweats, and frequent urination; she signals her intent to surface years before she snatches “woman” from herself and makes her monstrously more than she had ever

30 Ibid., 83.
31 Ibid., 84.
imagined. The Crone’s arrival startles the menopausal mother, whose access to the “eternal”/maternal feminine is already dwindling.

In her 2011 article, “The Bitch is Back: Are Menopausal Women Mad, Bad, and Dangerous?,” Sandra Tsing Loh vividly depicts the dwindling of her own effusive maternalism. At the dinner table, Loh dreads face-to-face contact with her family, overwhelmed by the fear that her “dull eyes” give it all away: that she “doesn’t love them, never will again.”32 The menopausal woman continues to flicker, falling away from herself and returning far less frequently. Her unbecoming and rebecoming is made manifest in her suddenly crude gardening techniques (see Fig.3).

Figure 3: Ellen Weinstein, accompanying image for “The Bitch is Back” by Sandra Tsing Loh, 2011.33

She arranges her tulips methodically, watering each bulb with tears collected from the bewildered family she is leaving behind. They are stranded in the

background, anchored by the ever-receding house, as their mother inhabits the foreground on her own. Her floral arrangement sends a well-manicured, if crude message that sinisterly mocks her previous Better Homes and Gardens titles, still crowding the family mantelpiece, collecting dust.

Menopause, and the sardonic flowerbeds it sprouts, is the queerness that Lee Edelman proposes. It is that which “delights in...the negation of everything that would define itself, morally,” and “pro-life.” 34 “Pro-life” here is an embryonic synecdoche, the fetal figure nuzzled at the heart of a Matryoshka nest of interrelated signifiers and symbolic fantasies, including the Child and reproductive futurity. When menopause is imagined as an evacuation from what Mia Campioni terms a “reproductively organized” and selflessly choreographed femininity, menopause negates all that is pro-life because of its threat to the family. 35 The menopausal woman, perhaps once enraptured by what Loh calls the “the sweet smell” of her baby’s head, can now “feel the clanging chime of her 10 year-old’s voice, note by note, draining [her] will to live.” 36 She is no longer “being-for-others,” but rather, “being-for-herself,” a radical displacement of focus and energy that insidiously unravels the fantasy of reproductive futurity by exposing it to its own materiality and contingency. 37

Menopause reveals the gossamer strength of the eternal/maternal feminine and the fault lines in our tenuous dependence on her perpetuation. Menopause halts the reproduction of this symbolic reality, a destructive impulse that coincides with

35 Mia Campioni, “Revolting Women,” 79.
37 Mia Campioni, “Revolting Women,” 83.
Edelman’s understanding of queerness as “an intervention that may well take the form of figuring that reality’s abortion.”

III. Disembodied Queer Masculinism: Challenging Masculinist Biases in Queer Theories of Time

Menopause is a queer time because it marks the cessation of reproductive femininity, and thus, reproductive futurity. Despite this, menopausal queerness has not yet garnered attention or interest in queer theoretical scholarship. In this section, I clarify the primary reasons why menopause has not previously warranted queer consideration, including its status as a biological “temporality of inevitability,” and a feminized biological inevitability at that. Building from my argument in Chapter Two about queer time’s complicity with disembodied “straight-masculine” time, I emphasize the masculinist bias that persists and goes largely unnoticed and unremarked upon in queer theories of time, and queer theory more broadly. When queer time is envisioned with these biases left largely unexamined and intact, its accessibility and applicability to subjects throughout the life course and with varied embodiments and relationships to “health” is compromised.

By further clarifying the disembodied, masculinist bias in current conceptualization of queer time, I will foreground the urgency of challenging these biases and the willful erasures they promote. I focus specifically on the masculinist

bias that is articulated in Lee Edelman’s No Future, in which the death drive as the queer departure from reproductive futurity is explicitly personified and gendered as male or masculine, limiting our ability to imagine queer departures from straight time as a mobilization that is accessible to queers regardless of their gender expression and identification. I advocate for the revaluation of menopause as a time of queer departure and call for a recognition of menopause as a queer time of explicitly monstrous becoming, from which the Crone can rise.

Menopause is an embodied and biological time that has been and still is pathologized as a hormone deficiency in demand of a treatment and cure. As a result, menopause proves an unlikely candidate for queer times that are largely disembodied, improvisational, and abstracted from the mutability of corporeal time. Menopause is also a time that signals the unfettered progression of the aging process, making it what Alison Kafer terms a “temporality of inevitability.”

Many iterations of queer time occupy positions that refuse coincidence with or contamination by times of biological predictability. While I explored the harmful exclusions promoted by queer times of disembodiment that refused imbrication with the biological and the medical, it is important to further contextualize this trend within a menopausal context, which illuminates the gendered dimensions of refusing embodiment in queer time.

Queer times to date have been dismissive of biological, or bodily, time because of its associations with a fated existence that is already implicated and imbricated in compulsory straight timelines. Carla Freccero admits that, “Certainly its no accident that teleology is so crucial to our imaginings of time; we’re born and then

40 Alison Kafer, Feminist, Queer, Crip, 26.
at the end, yup, we die. In between we seem to go from “prematuration” to maturation to aging and decay; concepts like growing, then growing up, then aging, getting old, and dying sketch a predictable, inevitable, irrevocable time line." Freccero goes on to position queer time as that which thinks outside the inexorable biological teleologies we are promised, tacitly relegating bodily inevitabilities to straight time. Similarly, Elizabeth Freeman uses biologically inevitable times, including puberty, aging, and illness, as an organic temporal baseline. She encourages us to think of queer times “beyond somatic changes,” casting queer time as doggedly unpredictable and non-biological. Jack Halberstam even directly addresses and absorbs menopause into a succession of obligatorily traversed “straight” rites of passage, arguing that allegiance to a time of marriage and reproduction leads “inexorably to other temporal markers like “midlife crisis,” menopause, “preretirement,” and “retirement years.” Halberstam dismisses menopause as a simple extension of the temporal logics that fortify reproductive futurity, failing to recognize that menopause is not reproductive time’s accomplice but its adversary.

When queer theorists unilaterally denounce the life course and its biological markers, they unwittingly conflate narratives of desirable maturation, or growing up, with growing old, neglecting to consider the teleological break between growing up and growing old that, while not biologically evident, is socially apparent. While longevity might be eagerly anticipated or striven for more abstractly, the biological

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and physical reality of growing old is not immediately appraised as desirable in queer or straight time. Just because menopause, and other temporal signifiers of the aging process, is common and inevitable for many women past a certain age, does not make menopause “straight.” By uncritically dismissing menopause, and other embodied inevitabilities, as hallmarks of straight time, expressions of queer time are narrowly articulated and exclusionary practiced. While I have already enumerated how certain queer theoretical biases have measured queer times in ways that disregard those who are aging, disabled, or ill, I have yet to explore how these same iterations of queer time often simultaneously express a masculine bias that routinely constructs explicitly “feminine” biological time as un-queer.

Although it is biologically essentialist and cis-sexist to characterize “feminine” time as embodied in any one particular way, it is undeniable that a notion of embodied feminine time does exist. Feminine time is, as Joshua St. Pierre argues, “culturally sedimented around bodies, rhythms, and imposed material structures,” as opposed to “straight-masculine” time that is consistently imagined as universal and disembodied (56). While there is no one “feminine” time, cultural perceptions of time are frequently gendered. As I demonstrated in Chapter Two and will further explore here, when queer theory fails to consider embodied time as potentially queer, it conspires with straight-masculine time to devalue populations that are most commonly punished for the tremendous weight and troubling signification of their...

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own bodies. These people, including women, the elderly, the disabled, and people of color, consistently fall through the cracks of our “queer temporal vernacular.”

Unfortunately, trends towards a masculinist bias in queer theory abound and certainly inform tendencies to implicitly value male (dis)embodied orientations in time and space when crafting queer temporalities. Various lesbian feminists spoke and wrote quite openly about the masculinist bias in queer theory at its inception in the 1990s, as they started to experience generational tension between established lesbian feminist theory and newly emerging queer theory. Elizabeth Freeman argues that at this time, lesbian feminism became largely associated with “temporal drag” and both intellectual and political retrogression in comparison to a younger and hotter queer theory, which often positioned itself as post-gender specificity and implicitly cast lesbian feminism as outdated and essentialist as a result.

While very few queer theorists have explicitly equated queerness with masculinity, lesbian feminist Sheila Jeffreys implies that the masculinist bias is implicitly enacted when queer theory fails to address “real, persistent structural differences in style, ideology, and access to resources among men and women.”

Jacquelyn Zita makes a compelling argument that, from a disciplinary perspective, queer theory boasts a bibliography that mirrors that of Eurocentric postmodernists far more than lesbian feminist theory ever did, priming queer theory for a “rapid ascent into the esoteric echelons of academic discourse.” She argues that this expedient

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ascension involves a “quick resolution of male Oedipal tension” between queer theory, the “disgraced gay sons,” and characteristically white and masculine postmodernism, “the forgiving straight fathers.” This sort of resolution, made possible by queer theory’s demonstrations of affinity with and loyalty to pre-existing academic canons of power and privilege, was and remains impossible for lesbian feminist theory, or feminist theory of any kind.

I argue that Lee Edelman’s No Future, perhaps unwittingly, corroborates a larger masculinist bias in queer theory, in which “queer” only hails white gay men. While menopause perfectly aligns with many of Lee Edelman’s descriptors of the queer as a “structural position” that ruptures and contests social realities, Edelman specifically actualizes queer symbolic inhabitation and corruption as the death drive, which for him, is explicitly gendered “male.” The death drive’s gender is made most explicit when Edelman provides examples of famous literary couplings that portray corruptible closeness between the Child and the Queer. He lists Tiny Tim, Peter Pan, and Harry Potter and their hazardously homosocial nemeses, Scrooge, Captain Hook, and Voldemort as prime exemplars of this unholy union. The latter, all suspiciously unmarried older men with irrepressible and curiously non-familial ties to young boys, are imagined as the death drive incarnate. For Edelman, queerness does not kill the Child; only queer masculinity is imagined as lethal. Edelman’s masculinization of the death drive coupled with the unexplored associations between reproductive time and “feminine” time, unwittingly situates women, even queer

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50 Ibid., 21.
women, as wordlessly inimical to acts of queer refusal and demonstrations of queer time.

In addition to the naturalized masculinist bias in queer theory that likely influenced Edelman’s implicit disavowal of the feminine and the female in his imagining of queer departures from straight time, the strictly Lacanian parameters of his argument also predisposed him towards a masculinist bias. Edelman’s wholesale championing of the death drive as that which queerly disassembles the symbolic from within is a cogent extrapolation of Lacan’s model of psychosexual development and structure of the psyche. However, there are intrinsic limitations embedded in the Lacanian symbolic, namely its failure to thoroughly contend with the maternal influence on subject formation, that subsequently structures and limits Edelman’s argument to only reflect queer masculinity.

In the following section, I suffuse Edelman’s Lacanian argument with Julia Kristeva’s abjection to inspire a recentering of the non-reproductive feminine as a source and site of queer symbolic rupture. While Kristeva’s model of psychosexual development adheres to the general form and progression of Lacan’s, she positions the embodied maternal as central to subject formation and its dissolution in ways that Lacan fails to address. I contend that the abject and the death drive harbor similar characteristics of symbolic disruption; both threaten to interrupt the cyclical perpetuation of reproductive futurity, and thus, transform the Child and its preservation into an obsolete fantasy. However, when the death drive is heralded as the only exemplar of queer departure from straight, reproductive time, queerness remains disembodied and masculinized. As a result, who can depart and inspire
departure from straight reproductive futures remains severely limited and implicitly imagined as a white, young, gay man. I advocate for a turn towards Kristeva’s abjection as a psychoanalytic framework for reading menopause and the Crone into Edelman’s conversation about reproductive futurity and the Child and reimagining queer departure and disruption through the lens of the aging process, a rancorously feminine and embodied aging process at that. Ultimately, I argue that menopause is a queer time that functions as a process of abjection and that its withered manifestation, the Crone, is the abject. I contend that the figure of the Crone occupies the abject position of the morbidly maternal that kills the eternal/maternal feminine and threatens the Child in the process.

IV. Lacanian Dreams, Kristevian Nightmares:
Abjection, the Crone, and Queer Departures from Reproductive Futures

The Crone is the formidable figure that transforms Lacan’s Symbolic dream into a grizzly Kristevian nightmare, for she is the abject wholly personified. Her expired, curdled womanhood makes her an all too familiar corpse who leaves the subject literally beside themselves with fright. But before I complicate Edelman’s masculinist fantasy of the death drive as the only imaginable threat to the Child, with the Crone’s abject interruption and macabre affections for the Child, it is necessary to understand the Lacanian symbolic on its own halcyon terms, as a nostalgic fairy tale with an anxious need for eternal retellings.

Edelman refers to the Lacanian symbolic as a “governing fantasy” that utilizes a sentimental and nostalgic cultural icon, the Child, to provide subjects with the
illusion of order and security.\textsuperscript{51} The Child is easily deployed and desired as the salve that sutures an inherently unstable subject to themselves because the figure of the Child is associated with “Imaginary wholeness.”\textsuperscript{52} When Edelman characterizes the Child as a galvanizing figure, capable of lassoing an Imaginary past that secures the subject in the present, he is citing the Child’s emergence during the mirror stage. For Lacan, the mirror stage is the subject’s first moment of self-recognition and individuation. While it is pre-verbal, the mirror stage is a precursor to the subject’s impending entrance into the Symbolic Order.

The Imaginary, and the mirror stage with which it is associated, provides an elusive vision of whole subjectivity. The story goes, Once upon a time, a toddler saw itself in a mirror and recognized itself as a singular self. Of course, this reflection of static, stable, and fully determined subjectivity was an illusion that could not coincide with the perpetual insecurity inherent in being and becoming a subject.\textsuperscript{53} The subject spends its life trying to catch up with this image of a stable self, perpetually enacting desires for what Edelman calls “impossible consolidation.”\textsuperscript{54} The subject identifies with the Child, “something outside” ourselves that still feels of ourselves, because the Child reminds us of that first mirrored instance of Imaginary wholeness, of a time when the self felt less contradictory and more unified.\textsuperscript{55} The Child promises the subject the illusion of self-possession and “Symbolic closure,” and this is why

\textsuperscript{52} Ibid., 10.
\textsuperscript{54} Lee Edelman, \textit{No Future}, 8.
\textsuperscript{55} Lee Edelman, \textit{No Future}, 8.
reproductive futurity, the social reality that protects and preserves the Child, is so
loyally maintained.\textsuperscript{56}

When imagining queerness, not as an identity but as a structural position that
impedes the reproducibility of the symbolic, Edelman associates queerness with the
death drive. He evaluates the death drive as the “inarticulable surplus” that
simultaneously maintains the symbolic’s structural dominion over the subject’s life
while threatening to expose and manipulate the symbolic’s delusions of solidity.\textsuperscript{57}

Edelman references Lacan’s own musings on the interdependent relationship between
the “name,” meaning the symbolic order, and the unnameable co-presence that
inspires its anxious repetition, when defining the death drive. Lacan writes, “Behind
what is named, there is the unnameable…It is in fact because it is unnameable, with
all the resonances you can give to this name, that it is akin to the quintessential
unnameable, that is to say death.”\textsuperscript{58} For Lacan, the death drive is the awesome
unnameable force that can inspire the subject’s anxious pursuit of “named” symbolic
closure, mediated through the figure of the Child, while also installing in the subject a
desire to stop striving for signification and allow for their own demise. If the subject
were to succumb to the morbid impulses of the death drive, they would return to
inactive state of dormancy that existed before birth which is to say, an inanimate state
in which the self is gloriously undone and thus absolved of the rigors embedded in
eternal self-actualization.\textsuperscript{59}

\textsuperscript{56} Ibid., 14.
\textsuperscript{57} Ibid., 9.
\textsuperscript{58} Jacques Lacan, \textit{The Ego in Freud’s Theory and in the Technique of Psychoanalysis, 1954-1955}
(New York: W.W. Norton, 1988), 211
\textsuperscript{59} Sigmund Freud, James Strachey, and Gregory Zilboorg, \textit{Beyond the Pleasure Principle} (New York:
Structurally, Lacan’s death drive and Kristeva’s abject do not inhabit altogether dissimilar positions in the symbolic arena. They are disruptive forces that leave the subject undone and the particular reproductive future that subject is enlisted to promote, compromised. Both are variously imagined as “the remainder of the Real internal to the Symbolic order” that haunts the subject with the knowledge of its own vulnerability.\textsuperscript{60} However, the death drive promises a return to inanimacy that precedes birth, thus spiriting away the subject’s relationship to the pre-symbolic maternal and the lure of its highly embodied material enclosure. The death drive disassembles the subject by restoring a disembodied freedom that circumvents the materiality of birth and the body, and in so doing, privileges queers who are least encumbered by their embodiment (i.e. white gay men) when imagining who can depart from reproductive time and what this departure can look like.

It is for these reasons that I would like to reread queer times of departure from reproductive teleologies and queer futures that challenge the Child’s reign a little bit differently. Rather than foregrounding the death drive, I foreground the abject as the queer disruption that aborts reproductive futurity and threatens the sanctity of the Child. More specifically, I argue that menopause is a queer time of abjection, which

\textsuperscript{60} Lee Edelman, \textit{No Future: Queer Theory and the Death Drive} (Durham: Duke University Press, 2004), 10.; Also, Lacan defines the Real as a state of pre-objectival naturalness that we are all connected to before our entrance into the Symbolic. The Real, for Lacan, corresponds with the semiotic chora for Kristeva. Both of these states predate the mirror stage and are characterized by the subject-to-be’s lack of differentiation from their surrounding environment. While Lacan refers to this pre-objectival environment as “nature,” with no reference to gender, Kristeva explicitly marks this pre-symbolic stage as one that is heavily influenced, or even wholly constituted, by the subject-to-be’s relationship to the maternal body. [Jacques Lacan, Jacques-Alain Miller, and John Forrester, \textit{The Seminar of Jacques Lacan Book I} (New York: W.W. Norton, 1991); Julia Kristeva, \textit{Powers of Horror: an Essay on Abjection} (New York: Columbia University Press, 1982).]
produces the Crone as the abject figure that poses the most harm to reproductive futurity.

Earlier, I argued that menopause is a queer time because it marks the cessation of reproductive femininity, and thus, reproductive futurity. For these reasons, menopause is necessarily a process of abjection. Kristeva describes abjection as that which “draws me toward the place where meaning collapses,” and “disturbs identity, system, order.” Menopause, in its ability to disrupt reproductive teleologies, is a biological event that causes meaning to collapse and certainly disturbs fundamental notions of identity, systems of heterosexual dominion, and reproductive order. While the abject, as Wendy Rogers writes, is “aligned with the feminine, the procreative, the maternal,” and as such, might seem antithetical to a biological event that signals the demise of all three, it is through menopause that the abject pre-symbolic maternal most riotously ruptures the symbolic.

When confronted with the mother’s “death” by menopause, the illusion of an eternal/maternal mother, the materiality that swaddled the subject before Symbolic interpellation unwrapped and named them, is exposed as a psychoanalytic fairy tale, a fraud. The material and shamelessly mortal woman that menopause reveals, fundamentally destabilizes the phantasmatic bond between what Mia Campioni calls the “young mother/child couple,” a bond that is irreparably severed when the maternal body expires. The pre-symbolic intimacy and post-symbolic alienation that

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63 Mia Campioni, “Revolting Women: Women in Revolt.”
64 Mia Campioni, “Revolting Women,” 86.
characterizes this bond and centers it as the foundation of human development is diminished, compromising the integrity of the subject with a mercurial, even vanishing origin story that causes them to flicker and dim in the present. In this way, menopause is that queerness that Edelman covets, that which “undoes the identities through which we experience ourselves as subjects,” by exposing us to the delicate machinations that constitute and calibrate our existence.65

Menopause is a queer time of abjection that also results in an abject, withered manifestation: the Crone. This postmenopausal figure awakens gradually during the eternal/maternal feminine’s protracted menopausal death. The Crone threatens to envelope and absorb the Child, and the reproductive futures it emblematizes, by embodying Kristeva’s primary figurations of abjection, which flank the life course: the mother and the corpse.

The Crone, the cadaverous (M)Other, inhabits a body that indexes the maternal by signaling its demise.66 She is what is left when the eternal/maternal feminine has perished, but she still deceptively, uncannily resembles her with a fleshly, post-maternal materiality that is close enough to Mom to lure the Child in. While not yet dead, The Crone is the mother’s corpse. She embodies what Kristeva refers to as the most violent scene and sign of abjection; she is the corpse of a familiar, the familiar dead.67 Her familial countenance makes her all the more alluring

65 Lee Edelman, No Future, 25.
66 Mia Campioni uses the term “(M)Other” in “Revolting Women” to demarcate the alienating, and, yes, revolting nature of the postmenopausal woman for the subject. I am applying the term here to modify or qualify the figure of the Crone by specifically indexing her fraught relationship to the maternal. The Crone resembles the grandmother, but is not her. She bares an uncanny resemblance to the eternal/maternal feminine, but she is not her.
67 Julia Kristeva, Powers of Horror, 4.
and capable of intimately destabilizing the subject and their fantasy of symbolic closure, the Child.

If menopause is revalued as a queer time of abjection that aborts reproductive futurity, I argue that its postmenopausal product, the Crone, is emblematic of a new queer futurity. In the following section, I turn to cultural texts, including the Grimm’s Brother’s “Hansel and Gretel,” a supernatural horror film called Dead Silence, and a Stephen King novella called “Gramma,” all of which feature relationships of contaminating closeness between older women and young children. I argue that each of these texts suggests a cessation of reproductive futurity envisioned as the dethroning of the Child and the crowning of the Crone. I explicitly focus on fairy tales and horror stories because both genres serve as robust repositories for the most proliferative cultural anxieties. These are also particularly fitting texts, given my psychoanalytic content, because Lacanian and Kristevian models of psychosexual development and subject formation are stories told and retold in such a fantastic register; the story of psychoanalysis is often simultaneously framed as a fairy tale and a horror story, depending on one’s subject position.

I position “Hansel and Gretel,” the oldest, most widely circulated, and influential of all my cultural texts, as an exemplary narrative of contaminating closeness between the Crone and the Child that establishes certain tropes that are reiterated and revised in Dead Silence and “Gramma.” The most prominent among the patterns at play in these narratives includes the absence of the mother and the Child’s eventual absorption into the body of the Crone. Moving from “Hansel and Gretel,” a German fairy tale published in 1812, to a horror film released in 2007 and a
novella published in 1984, I demonstrate the ongoing relevance and sustained durability of cultural anxieties concerning contact between the Crone and the Child.

Ultimately, I argue that each of these texts can function as parables that detail the possibilities of gerontocratic reworlding. If Edelman contends that the queer is that which can “fuck the whole network of Symbolic relations and the future that serves as its prop,” I argue that the Crone is a queer figure who intimately alters symbolic relations and rescripts the future in the process.68

V. Contaminating Closeness:
Incorporative Intimacies Between The Child and The Crone

The cannibalistic witch in the Brothers Grimm’s “Hansel and Gretel” is the abject Crone who wants to nosh on braised, baby soft limbs, removing the Child from the symbolic by literally ingesting it.69 The Child, or in this case the Children, Hansel and Gretel, are positioned as vulnerable subjects before they even happen upon the witch’s toothsome cottage. Like countless other fairy tale children, they are profoundly motherless. The narrative absence of the young mother, what Mia Campioni calls the “fictive origin of the speaking/signifying subject,” constitutes Hansel and Gretel as figuratively homeless and fundamentally hungry.70

Maternal loss, particularly at a young age, indicates the abrupt severance of the young child/pre-symbolic mother bond that must be established before the subject can volitionally extract themselves and successfully enter the symbolic. An absent

68 Lee Edelman, No Future, 29.
70 Mia Campioni, “Revolting Women,” 85.
mother is laden with symbolic implications because this absence suggests the premature disruption of the semiotic chora, which for Kristeva, which was a site of non-differentiation for the subject-to-be to luxuriate in an unfettered closeness with the maternal. At this time, the child exists undifferentiated from the mother in a symbiotic bind in which every need, hunger, and desire is met. If this bond is hastily cut, the Child is abandoned with the aftertaste of insatiable need and unrequited hunger. Unsurprisingly, the Children are starving. Their father is poor and is incapable of feeding his family, perhaps a symbolic concession to the maternal’s centrality to the subject’s sustenance and self-preservation.

When the children happen upon the witch’s delicious domicile, they are contending with two counts of literal and figurative craving. Their unmitigated appetites result in a gluttonous show that is particularly foreboding given the sanctimonious literary genre in which they are written. In true fairy tale form, when the children ravenously consume the marzipan roof and sugar-plated windows, literally eating the witch out of house and home, they are met with punitive measures befitting their act. A “woman as old as the hills, who supported herself on crutches came creeping out,” feigning maternal benevolence.71 She offers Hansel and Gretel stacks of feathery pancakes and soft beds that night, barely concealing her lust for their flesh. Her beguiling charade is our first taste of her abjection.

For Kristeva, the abject concerns “what disturbs identity, system, order. What does not respect borders, positions, or rules.”72 The witch builds a house that is an exaggerated display of effusive maternalism that demonstrates a capacity or desire to

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71 Jacob Grimm and Wilhelm Grimm, “Hansel and Gretel,” 90.
72 Julia Kristeva, Powers of Horror, 4.
give. However, such an extravagant show suggests an anxious or falsely constituted maternal figure that relies upon grand gestures to gain the love and trust of children. Her fraudulence is only further cemented by the food she serves. The witch cares little for a well-balanced meal, as a “good” mother should. She appeals to a child’s sweet-tooth sensibilities in such a way that inspires and amplifies their vices, including gluttony and greed, while casting herself as the only person who can satisfy their magnificent hunger. The witch adopts passingly maternal attributes. When she encounters little lost children, she takes them in and offers to care for them. However, every act of benevolence is cracked or mottled with a penchant for excess that betrays her inexperience as a “good” parent or nurturer. She is a deceptively hollow and only feigns a robust maternal disposition. She is abject because she disturbs neat, sturdy, and immediately recognizable divisions between “good” and “bad” mothers. Most importantly, though, she is the abject because she wants to roast, slice, and devour the Child.

The witch uses her house as a lure to ensure frequent access to hungry little bodies to, in turn, satiate her own bottomless hunger. She confirms symbolic fears of the female body as a ravenous body, with absolute disinterest in the subject’s consolidation and the symbolic’s closure. It is important to note that the witch, and the figure of the Crone more broadly, is not the abjected pre-symbolic maternal, but something entirely more sinister.

The abject most commonly refers to moments in which the subject’s attachment to the semiotic maternal continues to haunt them, as a cramped muscle memory or an aching phantom limb, a reminder that the wordless intimacy of the
maternal still haunts the symbolic and shapes the subject no matter how insistently
the symbolic silences its constitutive, semiotic shadow. The abject’s threat is its
eruptive power in the symbolic as a primordial disturbance that threatens the subject
and the social with dissolution while hinting at the pleasures of such an unbecoming,
in which the self can let go of its form and come home to Mama. The figure of the
Crone, while sharing the abject semiotic’s disruptive potential, is the cadaverous, not
the semiotic mother. She, like the corpse, “shows you your own death” by introducing
the subject to the biological inevitability of aging. The Crone is a familiar corpse,
the corpse of the mother, who mimics and maintains enough elements of the maternal
to transfix and trick a homesick subject, causing them to slip and fall into her waiting
jaws.

While Gretel tricks the witch and traps her in the hot oven that was intended
for her and Hansel, the symbolic threat of the Crone still powerfully structures this
narrative. The Crone, in her desire to eat the Child, wishes to impregnate herself with
the fantasy of Symbolic closure, in turn, ingesting reproductive futurity. The Child is
not reabsorbed into the semiotic maternal, but rather, enveloped by the cadaverous
(M)Other, signaling the death of the subject. Her gaping mouth and roomy belly are
symbolic tombs, masquerading, if only briefly, as a womb.

73 Julia Kristeva, Powers of Horror, 4.

74 Ibid.

75 In “The Theme of the Three Caskets,” Freud refers to the “mother’s body as womb and tomb,” but
he is using this metaphor very differently than I do. Freud argues that in his lifetime, the male subject
will have three relationships to the figure of the mother: “the mother herself, the beloved one who is
chosen after her pattern, and lastly the Mother Earth who receives him once more.” For Freud, Mother
Earth is a disembodied terrestrial figure. The possibility of returning to or confronting the embodied
reality of the older woman is occluded entirely. I argue that the Crone functions as a womb/tomb in
that she resembles the mother and has all the magnetism of the pre-symbolic maternal, but is not her.
Dead Silence, a supernatural horror film released in 2007, also boasts a cadaverous Crone, but she prefers to carve, polish and ventriloquize the Child rather consume it. Mary Shaw, the Crone in question, is an elderly ventriloquist who is extrajudicially killed after she is suspected of kidnapping and murdering a little boy who mocks her craft during a variety show. Her ghost returns to kill and morosely reanimate happy families and expectant mothers, maintaining a tradition of macabre doll-making and murderous puppetry for subsequent generations. Mary Shaw’s intimacy with the Child and incursion into the symbolic order is doubly articulated as she animates wooden children and enlists them as demonic coconspirators while inanimating human children and their families and playing with them in private.

Mary Shaw is first introduced to us in the form of a cautionary tale rehearsed as a nursery rhyme: “Beware the stare of Mary Shaw, she had no children, only dolls. And if you see her, do not scream, or she’ll rip your tongue out at the seam.” Her malevolence is immediately foregrounded in her non-reproductive femininity. She is an unmarried “spinster” who sands, carves, and paints puppets for pleasure, keeping only wooden children for company. Townsfolk refer to her family-making practices as tragic, but their pity barely masks their anxious aversion to her perversions. Mary Shaw’s domestic distortion is not feared for its utter alterity, but for its undeniable similarities, its contaminating closeness to the “real” deal. Her caricature threatens to expose reproductive futurity as parodic repetition, in service of a Child who was never alive to begin with.

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Also, the Crone inhabits a proximity to death that fashions her as corpse-like, or laced with death. [Sigmund Freud, “The Theme of the Three Caskets,” in Penguin Freud (13): 53-159.]


Ibid.
While people pay to watch Mary Shaw “give life to the boy made of wood,” most audience members keep their distance, laugh cautiously, and require extensive coaxing when asked to volunteer. Her maternity is an act that mesmerizes and repulses; when her wrinkled hand lovingly wipes her “son’s” whittled, bloodless nose after a sneeze she herself orchestrated, the audience smiles and cringes simultaneously. In her motherly ministrations, both familiar and gruesomely estranged, they see themselves as “dummies,” ventriloquized props that parrot and perform the symbolic’s tireless work. The threatening lack of differentiation between symbolically ordained subjects, flesh and blood humans striving for signification, and Mary Shaw and her “babies,” is an unsettling indication of the abject’s power to breakdown order and to allow death to contour life.

In the film, a little boy attempts to secure differentiation by asserting his own authenticity and Mary Shaw’s trickery. Michael exclaims, “I can see your lips moving,” a declarative that establishes distance between himself, the “real” boy, and Billy, the doll. This is a declarative that is intended to restore order. It is a symbolic act of resignification, an attempt to secure the subject’s breached borders by exorcising the abject. Of course, Michael’s reconsolidated self is immediately threatened with dissolution, when Billy retorts, “We should show this boy how real I am. I am just as real as him!” Shaw settles her eyes on Michael’s defiant face, her gaze causing him to blush. The blush--what Charles Darwin called “the most peculiar and most human of all expressions”--is appropriately the last expression Michael will

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79 Ibid.
make of his own accord as a human boy.81 When Shaw spits at Michael, “Now who is the dummy,” the unequivocal collapse between “alive” and “dead” children is ominously foretold.

Fig. 4 “Michael, the New Doll,” Dead Silence, 2007.

Mary Shaw and her child-like collaborators proceed to kidnap Michael and leech him of his precious “realness” (see Fig. 4) Shaw exsanguinates him until his skin is cold and hard as polished wood. She fashions and installs glass eyes for him that only she can blink and carves a cavity in his chest, fit only for her hand. Most importantly, she rips out his tongue so his mouth is only made for her words. His voice is hers, thrown and echoed. Shaw embarks on a homicidal doll-making spree that continues beyond the grave. She in-animates and re-animates “real” children and their parents and arranges them for postmortem family portraits (see Fig. 5).

Shaw’s murderous puppetry is a particularly rich representation of the Crone’s ability to wreck the symbolic home. Before making a kill, Mary’s presence slows all of the family clocks to a labored, raspy tick, foretelling a temporal shift in which the family’s time, reproductive futurity, ceases to measure or govern their lives. Then, she takes their tongues, literally eliminating their access to speech. Tongue removal is a cessation of speech that indicates a fall from the symbolic, the order of language and law. This fall, out of agential language into ventriloquized voice, signals the abject Crone’s triumph over and implosion of the symbolic. Further, when her hand fills the cavernous hollows of her human dolls and she throws her voice into their ready mouths, she exposes the family’s utility as a prop, a utility that was there all along, even before she claimed them.

The film concludes with Mary Shaw’s hand closing a “family” photo album of dolls she has killed and collected over the years. Her possession of the family at the end of the film is a manifestation of earlier anxieties, on the part of Michael and other townsfolk, about a lack of concrete differentiation between themselves and Mary’s wooden brood. The fact that Mary succeeds in exposing the “dummy” in the human
subject can be read as an act of symbolic exposure in which the self, to reference Edelman, is revealed as “mere prosthesis maintaining the future of the figural Child.”

In this instance, the Crone’s most disruptive challenge to the Child’s fame and future resides in her ability to expose the subject to their prosthetic value as parroting pawns, built to regurgitate the Child as the telos of the symbolic. This reveal poses a threat to the uncontested and compulsory support of the Child that reproductive futurity requires to function. The Crone’s capacity to instill a fear of puppetry and prosthetics in the subject makes her a powerful and distinctly queer adversary to the symbolic.

Stephen King provides further scenes of Crone-inspired symbolic disturbance in his 1984 horror novella “Gramma.” The eponymous Gramma in question is a witch who is also portrayed as a corruptible force that does not have the Child’s best interests at heart. However, she neither makes a macabre meal of the Child nor delights in its ventriloquism, but rather aims to possess and supersede the Child entirely when they are home alone together, no mother in sight. Unlike her predecessors, whose abjection manifests most appallingly in their actions, which are unambiguously vile, Gramma’s abjection is sinister but subdued, a passive fact of her morbid fleshiness. Gramma, variously described as a “tottering pile of flesh” and a “fat slug wearing rubber pants and diapers,” embodies the abject collapse between subject and object, animal and human. Her excessively cadaverous materiality, and

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the threat of being touched and somehow changed by it, inspires the sense of dread and foreboding that pervades the entire story.

The plot dramatizes a fairly simple and even innocent desire for contact and affection between the young and the old: Gramma wants to hug her grandson George. George’s vehement refusal and mounting terror at the very prospect of hugging his grandmother reveals insecurities about his own vulnerable embodiment and its susceptibility to change if provoked. Gramma’s body is a site of radical indeterminacy, of overgrown, metastasized maternity that threatens the bodily integrity of her grandson with its excess. While she only wants to hug him, to love him, or so she claims, these displays of effusive care are made somehow monstrous by her old age and the inescapable largeness of her body. George recoils when Gramma holds out her “white-elephant arms, wanting him to come to her and be hugged by that huge and heavy old white-elephant body.” 86 Later, he likens her to “a big fat worm in a dress”; the moment she holds out her arms for him to come, he “shrinks back against his Mom, bawling.” 87 In both instances of possible contact, George describes his grandmother as an animal, an animal he wouldn’t want to touch for fear—well, for fear of what? Perhaps a fear of unbecoming the self, the subject, the Child, through contact with the cadaverous Crone; the woman who did not quite make you, but is more than willing to unmake you without remorse.

Gramma’s body alone, before she even lays a finger on the Child, represents a massive symbolic disturbance. Her embrace symbolizes the “return” to the mother’s body, once removed. Recourse to the maternal is already a symbolic breach, a

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86 Ibid.
87 Ibid.
betrayal of the initial division between the child and the semiotic maternal that
produces the Child, the figural king and heir of the symbolic. However, Gramma is
not Mom, a distinction made abundantly clear when George shrinks away from his
grandmother and retreats into his mother’s arms. Gramma is an abject figure that is
related to but not enclosed by the semiotic maternal. She possesses a domineering
materiality, an authoritative and governing embodiment that causes both the Child
and its mother to cower, to literally shrink.

Symbolically, both the Child and its mother are imagined as disembodied
 unrealities; the mother, as the eternally ageless, semiotic feminine, and the Child, as
the subject’s fantasy of “Symbolic closure” and “Imaginary wholeness.”  The
grandmother is willfully excluded from the symbolic because her presence absences
the eternal maternal and the Child and threatens to age them both with her
unapologetic materiality. Mia Campioni describes the “older/postmenopausal
woman” as a “terror” to the adult subject because of her “unwelcome concreteness
and mortality.” Gramma’s body is described as both animal, object, and corpse,
embodying every form of abjection that indexes but exceeds the maternal; an
“infectile buzz” emanates from her fleshiness, which hangs in “doughlike goblets”
and jiggles “as if it was filled with hot water.” These descriptors heighten the abject
unfamiliarity of the elderly body, as a body so un-human that human terminology
cannot approach it. However, no matter how insistently George works to establish
and maintain a distinction between his body and Gramma, he is already of her flesh
and blood. The anxiety that they will become old, and thus, un-human together is not

88 Lee Edelman, No Future.
89 Mia Campioni, “Revolting Women,” 93.
outlandish, but rather grounded in myths of consanguinity and kinship; these tales are
told with apocalyptic fervor, lamenting a younger generation that is fated to become
old, no matter how vehemently they protest this becoming, or unbecoming, of self.

While the first half of the novella depicts George’s largely unsubstantiated
fears of close contact with his grandmother, Gramma promptly transitions from a
passively Symbolic threat to an active menace after he discovers that she is a witch.
This reveal occurs gradually as George recalls eavesdropped memories, stories about
Gramma that her own children used to share in hushed tones behind half-cracked
doors. Shortly thereafter, George hears what he describes as a “death rattle” and
believes that Gramma died.91 Filled with momentary relief, he tiptoes into her room
to check her breathing. He finds her body still and limp, her chest no longer heaving,
and draws closer to her bedside. As he reaches out a trembling hand to check her
pulse, she grabs him and rasps, “Come in here—Gramma wants to hug you.”92

Gramma rises, undead, with eyes that “drooped in her face, lackluster and
dead” and a chest that did not move, barreling towards her grandson in a nightie that
exposed “elephantine thighs.”93 The embrace she threatens George with is literally
cadaverous, as she comes to embody the abject as woman, as (Grand)mother, and as
corpse. Gramma is the abject personified on multiple counts. She not only embodies
the threat of irrevocable recursion with her distant ties to the maternal, or what
Kristeva calls, “falling back under the sway of a power as securing as it is stifling.”94
Gramma amends characterizations of the abject as a “falling back” to a time before

91 Ibid.
92 Ibid.
93 Ibid.
the symbolic and inspires a “falling forward,” a time after the symbolic’s death. Her ability to pull a body forward, out of childhood and past adulthood, is demonstrated as she proceeds to “hug” George.

George begins to recognize this “hug” as an act of contaminating closeness, an act of possession. He laments, “…when his mother came back she would find Gramma dead and George alive, oh yes…but George would have developed a sudden taste for herbal tea.” The hug between Gramma and George is rapidly actualized as both displacement and inhabitation as Gramma moves into a body George is forced to vacate. Symbolically, the Crone is stealing the body of the Child for her own purposes. Her encroaching presence, even before implantation, seizes George from the symbolic by severing his access to speech. The phone rings and George picks up and screams “Help me!” but all that escapes him is a “tiny, hissing whistle, as if he had blown into a harmonica full of dead reeds,” signaling George’s descent into wordlessness. Gramma’s hands close around his throat and she climbs inside of him with just one touch, entering the symbolic only to contaminate and evacuate its most valuable player: The Child.

“George” retires to his room “gets undressed and lays down naked on his bed. He put his hands behind his head and looked up into the darkness. Slowly, a sunken and rather horrible grin surfaced on his face.” Gramma stretches out languidly in her new skin and revels in her nubile possession. This scene renders the Child a hollow vessel, a receptacle for other people’s dreams of untouched innocence, consolidated subjectivity, and predictable reproductive futures. This Child is unzipped, emptied,

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96 Ibid.
and filled with someone new, or more appropriately, someone old. The Crone ages the Child from the inside out, infusing a young body with an old soul that can only grow older. This is not Edelman’s Child, the One who holds us in terrorist thrall, the “Child who must never grow up.”98 The Child’s figurative career as the innocent telos of any imaginable future stops here. In its place, the Crone rises.

I am advocating for the Crone’s rising, because I do not believe that the future should stop with the death of the Child. While I agree with Edelman that queerness should adopt a structural position in the symbolic that comprises the side not fighting for the Child, I do not think that queerness should “insist that the future stop here”.99 Killing the symbolic Child is not enough, particularly if this metaphoric murder is singularly anticipated as a departure from reproductive futurity that can only achieve signification through avenues of unmitigated bodily pleasure, those “sterile, narcissistic enjoyments” that Edelman references, or the disembodied return to the inanimate state that predates birth.100 Similarly, queer infractions against the law of the Child mean very little if queer theory and queer culture turns around and unequivocally values the elongation of youth as the only way to be and become queerly. Queer time, or queer cessations of straight timeliness, cannot be limited to temporalities of desire, to times that we know how to want. Rather than casting queerness as the death drive, an anti-relational gesture that negates futurity, I encourage an embrace of the abject for a future that values aging life and the corporeal entanglements and instabilities that aging engenders.

99 Ibid., 30.
100 Lee Edelman, No Future, 13.
VI. Conclusion:
Crone Rising: Wrinkling Queer Futures, Embodying Queer Time

The Crone is a portentous promise, signaling a queer future that not only denies the Child primacy but also challenges straight and queer tendencies to attribute social dynamism and promise to youth alone while relegating social stagnancy to the old and the aging. The Crone’s consumption, ventriloquism, and possession of the Child is symbolically disruptive because each of these interactions deprives the insecure subject of the fantasy of wholeness and self-containment. When the Child is absorbed or inhabited by the Crone, its figural status as a disembodied promise of a stable, reproductive, able-bodied, “healthy” future is diminished; the Child becomes the child, a vulnerable, fleshly being who, in this encounter, is reduced to their spare parts as a meal, a puppet, or a spiritual host.

In interaction with the Crone, the Child confronts an abstracted representation of “temporalities of inevitability” personified in the body of the aging woman who is presumably close to death. She installs an ineluctable awareness of amplified embodiment; the Crone facilitates ontological distillation. Ultimately, this thesis argues that an encounter with the Crone is necessarily a confrontation with the contemporaneous, near-sighted future of aging; she shows us the potential future of our bodies and does not permit us to avert our gaze.

I consider the Crone’s interaction with the Child as a metaphorical device that inspires new trajectories of thought, and ask, What might we learn from getting eaten,

ventriloquized, and possessed by the Crone? After reading about her, it is not unexpected that we might shy away from her voracious and often vicious materiality. If reading about her repulses us and inspires the stomach to recoil and the mouth to wince, she is doing her job. The Crone, both in symbolic relation to the Child, and in metaphorical relation to us, inspires the dissolution of a disembodied self, a staid and stoic reader who can read untouched and unscathed. She brings us into our bodies and holds us in a moment of amplified embodiment, where we are “left with the body” only.

It is not easy to reclaim or “crown” the Crone as a positive, desirable, or attractive figure. This is not the point of our encounter with her. She is not a figure of beauty, nor does she inspire beauty or altogether “good” feelings inside of us, but she is a figure of magnificence. Disability justice activist Mia Mingus gave a speech a few years ago at the Femmes of Color Symposium that is curiously perfect for revaluing the Crone as magnificent, and in turn, cultivating queer theories of time that are attendant to those who are magnificently embodied rather than desirably disembodied.

In Mingus’ talk, titled, “Moving Toward the Ugly: A Politic Beyond Desirability,” she calls on us to claim the “magnificence of a body that shakes, spills out, takes up space, needs help, moseys, slinks, limps, drools, rocks, curls over on itself…the magnificence of bodies that have been coded, not just undesirable and ugly, but un-human.”¹⁰² We fear the Crone’s excessive materiality, at least at first, because she inspires exuberant fleshiness in us. Her magnificence, as a body that

“spills out,” “takes up space,” and envelops us, forces us to address our bodies as needy, as hungry, as ugly, as magnificent.\footnote{Ibid.} Her power, unlike that of the Child, resides not in how much we want to know her, but in how much we would rather not know her yet. To see the Crone is to see ourselves most vulnerably, as human subjects, fully exposed to the passage of time and tied irrevocably to our bodies while we travel.

I am advocating for the Crone’s ascension as an emblem of the queer future and the queer present, because she is a figure borne from the biologically inevitable that which has been cast aside in queer theory as senescent, uninspired, common, and “straight.” When queer time comes into contact with the Crone and permits contaminating closeness, allows itself to be affected and infected, she can help us imagine disruptive queer time that erupts from the body, that exists because of our bodies, not in spite of them. By locating queer emergence in her wrinkles and folds, we might wrinkle queer time towards the epistemological reorientation that I have advocated for throughout this thesis.

In each chapter I have foregrounded the importance of a queer time that does not turn away from the embodied, chronological reality of growing old simply because access to the later life stages is no longer a rarified, exclusive, or novel experience. Rather than dismissing later life as the logical telos of a life spent growing up, and thus, becoming “straight,” I argued for a queer time that could grasp the complexities of straight time well enough to not repeat its mistakes, namely a prioritization of the young, the healthy, and the disembodied. My work calls for a
queer time that recognizes those with “excessive,” “defective”, or “obsolete” forms of embodiment (i.e. the feminine, people of color, the crip, and the aging)—anyone who experiences maligned or otherwise compromised embodiment and asks, how might they embody time queerly? How might their embodied temporalities reroute and rewrite queer time, as we understand it? This thesis calls for an embodied unbecoming; a wrinkled queer time. Perhaps not the times we want, but the times we get. And what we do with them.
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