

Sexuality, Disability, and Aging: Queer Temporalities of the Phallus, by Jane Gallop. Durham, N.C.: Duke University Press, 2019. Pp. 152. \$89.95 (hardcover); \$22.95 (paperback); \$17.89 (electronic).

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What might a radical sexuality in later life look like? How might disability or advancing age transform sexuality? Jane Gallop's monograph *Sexuality, Disability, and Aging: Queer Temporalities of the Phallus* explores how aging and disability do not denote the end of sexual possibility but open the door for understanding and creating new forms of pleasure. Gallop directly challenges a major cultural assumption about age, disability, and sexuality: that late-onset disability beginning in the "middle years and beyond" (5) and growing older are threats to sexuality.

Sexuality, Disability, and Aging is deftly situated at the intersection of queer and disability studies, theorizing the older and less abled body as crip and thus as a site of both transgression and possibility. Specifically, Gallop's theoretical framing combines crip theorists and disability scholars working in a queer framework. She draws on Margaret Morganroth Gullette's theory of decline, which identifies a societal master narrative that inexorably associates aging with decline, as well as psychoanalytic concepts of phallus and castration. For Gallop, queerness and sexuality later in life are both temporal and linked through challenging paradigmatic life experiences in a manner recalling Jack Halberstam's queer temporalities: "contesting the temporal order that dictates which segments of life are properly sexual and which are not" (8). Gallop shares Linn Sandberg's insight that a "radically temporal view of sexuality... should be part of (and perhaps central to) a queer perspective" (108), curiously acknowledging Sandberg only in the final pages and as the first scholar to link queer theory and aging. Despite Gallop's acknowledgement of the centrality of this "queer perspective," her exclusive focus on heterosexual experience overlooks scholars who examine new possibilities in queerness, sexuality, and age, such as Linda M. Hess and Dustin Goltz. Gallop's argument would also have been greatly enhanced by references to body-based research by Leni

Marshall, Sally Chivers, and Erin Lamb, who also call for theorizing cultural attitudes towards disability, age, and Gullette's decline narrative.

The connection of decline theory with phallus and castration is less straightforward. Gallop, who has heavily critiqued the dominance of the phallus in psychoanalytic theory, is acutely aware that returning to the phallus can be "most embarrassing" (13) and is clear that her use of the phallus is a type of queering – a "misnomer for something we don't (yet) have a correct name for" (25) – and not a return to androcentrism. Gallop theorizes castration anxiety as temporal rather than a permanent state of being which is clearly tied to ageism and middle age – "the scenario of a future losing it once-and-for-all" (19) – while also situated as queer temporality: moving "*from* castration *to* phallus as well in the other direction, where the lost phallus is surprisingly regained, or where the phallus might appear not only in the past but as a promising future" (17). As Gallop draws extensively from Freud, Lacan, Butler's lesbian phallus essay, de Lauretis, Woodward, and other theorists in her framing, previous knowledge of these psychoanalytic perspectives may aid the reader in working through Gallop's analysis of phallus and castration.

The two chapters which compose the body of *Sexuality, Disability, and Aging* consider alternative temporalities of sexuality through Gallop's method of "anecdotal theory" (27), which begins with personal narrative in order to theorize. The chapter titled "High Heels and Wheelchairs" opens with Gallop's story of sudden late-onset physical disability as a lens to think through relationships between disability, sex, and gender. Her experiences as a "'70s feminist" (51) faced with confronting chronic pain and lack of mobility add a decline narrative to the conversation: "My story could likewise be read as either the beginning of disability or the end of youth" (61). Gallop considers how the loss of her ability to wear the "positive phallic identity" (51) of high heels, moving to flat sneakers, and finally to using a wheelchair is a "descent... to something like castration" (51), a "loss-that-threatens-gender-identity" (55). Intriguingly, Gallop also considers relationships between disability, gender, and the built environment through a crip perspective, intertwining her story with the work of other disability theorists, including Mary Francis Platt and Sharon

Wachsler, to consider how disability is entangled with gender via the sexualization of sidewalks and public spaces. A discussion of the castration narrative in *Lady Chatterley's Lover* seems slightly misplaced in a chapter mostly devoted to personal narratives. However, the wheelchair-bound sexual fantasy on the streets of Manhattan which closes Gallop's story serves as an extremely effective "phallic surprise" (64) and a clear counter-narrative to decline theory. Sexuality triumphs, and pleasure is not lost.

Not all narratives of later-life sexuality conclude as distinctly. In the chapter titled "Post-Prostate Sex," Gallop discusses the uncertainty of alternative temporalities of the phallus, writing of a period of time when she and her longtime partner were unsure if he could retain potency after prostate removal surgery. This "post-prostate" narrative is candid and startlingly intimate, drawing the reader into an intensely personal experience in a period between possible temporalities: anxiety over sudden castration, or optimistic belief in a progress narrative – the return of potency. This physiological narrative of adult sex life is placed alongside an extended discussion of Philip Roth's 2007 novel *Exit Ghost*, which Gallop intertwines with critiques of models of aging and sexuality proposed by Barbara Marshall and Stephen Katz, and a qualitative study of cancer patients renegotiating sexual pleasure. Gallop argues that post-prostate sex resists the coital imperative and "queer[s] the narrative order of sexual physiology" (81) that privileges heterosexuality and youthful bodies over "the no longer so young, the no longer so able" (13). Together, these chapters effectively demonstrate variations of queer temporalities of sexuality.

Sexuality, Disability, and Aging is a concise read which is highly successful in its project of linking age with queer theory. The book is particularly useful for scholars as an exploration of the sexual dimensions of crip theory: "for those of us who glory in the threateningly antinormative, 'crip' can look like a wildly sexy identity" (2). Gallop's use of anecdotal theory is another strength. Although some familiarity with psychoanalysis and literary criticism is recommended, Gallop's combination of personal writing with theoretical tools broadens the appeal of this "specifically sexual" (27) memoir to include readers

with interest or methodological backgrounds in narrative, autobiography, and lived experience.

In sum, *Sexuality, Disability, and Aging* is an effective call for re-theorizing the sexual longitudinally. Rather than simply broadening the scholarly conversation on sexuality to include older adults, Gallop is adamant that advancing age and changing bodily potential are transformative. By identifying and challenging normative perceptions of sexuality in later life and for differently abled people, Gallop shows how life continues to be lived sexually throughout the lifespan.