

The Queer Subject of ‘Getting On’

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Introduction

This chapter hopes to speak to the theme of *Intersections of Ageing, Gender, Sexualities* as matched to – or far from – the particular research projects which I have undertaken, often involving ‘intersections’ of class, gender and sexuality. In considering what to present at the related conference, and write-up in this chapter, I wanted to question (myself), and had to resist (my own), urges to pull data from particular aged research participants, as older or, indeed, younger; certainly I could have done this as my research has usually involved participants across diverse age ranges. In my current project on *Making Space for Queer Identifying Religious Youth*, I am seeing how *young* people inhabit particular times, places, bodies as age-d subjects, with certain rememberings of the past and projections for the future (Taylor 2015). To think of these intersections, involves a consideration of the ‘queer subject of ‘getting on’’, as a beneficiary of international Equalities Legislation, and new ‘sexual citizen’.

In this chapter I want to explore three cases, that of ‘queer families’, ‘queer cares’, and the queer spaces of academia, to inflect ideas of ‘moving on’ and becoming as interrupted and interrupting of linear trajectories of, for example, becoming sexual citizenship, becoming adult, and becoming academic. I interweave these examples to explore interruptions to normative career-caring trajectories, highlighting the work-life balances and the effort of ‘getting on’, as applied in research-researched-researcher

exchanges, experiences and biographies.

To think of 'age' is perhaps often to think of the embodied subject who has aged, and, on a more collective level, sexualities research is replete with metaphors of 'coming of age', of maturing into disciplines, of appearing in social policies and claiming full-citizenship rights and entitlements, arguably grappling with a new *World We've Won* as sexual citizens (Weeks 2007). This becoming 'someone' as a self-actualised and entitled subject is apparent within celebrations of the 'world we've won' as lesbian, gay, bisexual, transgender (LGBT) groups and individuals realise sexual citizenship in the realms of family and working lives (Weeks 2007, McDermott 2011). In 'arriving' in places of sexual citizenship, young people are often seen as the beneficiaries of previous generations' struggles but often are simultaneously invisibilised as 'not yet' fully in the worlds of family and employment (Taylor, 2017).

And on an everyday level, particular gendered and sexual subjects are constructed as *on time*, say for reproduction and maternity, planned alongside work-life balanced, situated against anticipated life-course trajectories, as endorsed in social policies, institutional practice and normative imaginings. The recent and highly publicized warning by the NHS chief for womenⁱ not to wait until the age of 30yrs to have baby (or face a 'fertility timebomb') would be an obvious example saliency of normative gendered trajectories.

I want to pause on the idea of a 'timebomb' as that which disrupts normative time, which explodes ideas of what is done 'at the right time', and question who, if anyone, can dwell in, or with, what seems like a rather dangerous construction (not to push the metaphor too far). In considering 'intersections' of age, sexuality and gender, as

bringing forward certain subjects, while rendering others as out of time, backwards, behind and redundant, I want to draw upon different projects, in order to empirically situate the ‘queer subject of ‘getting-on’’. In this chapter, I am going to first quickly introduce some concepts from Bourdieu, and ideas of ‘queer temporalities’, to explore how normative and non-normative personhood is produced (and ruptured) and I will then consider these research themes, while locating myself in and through research, as inevitably intersecting my own cares, biography, personal and professional identity (as also a queer subject getting on).

I will present some examples of what happens when normative time is disrupted; when ‘family time’ encroaches on ‘work time’ and makes non-sense of ‘work-life’ balance; when this is reversed so that the person being cared for is not a child but a grandmother, when the queer feminist academic arrives ‘too soon’ in academia; when the ‘child-as-future-citizen’ is placed as needing ‘active planner’ (and pre-birth), but when this collides with institutional timelines for maternity recognition and care entitlements.

Theoretical Overview

In order to situate the intersecting subjects of ‘queer families’, ‘queer cares’ and the ‘queer spaces of academia’, it is important to think about the place of contemporary neoliberal capitalism in shaping subjectivity, where what is ‘normal’ is arguably driven by a very particular and narrow mode of being, relating and valuing: driven by competition, inequality, and rational self-interest. We’ll recognize this in – as well as from – academia.

Such a mode of being is also governed by a temporality that values reproductive

maturity, and wealth accumulation. Adkins (2009, 2012) has argued that capitalism is governed by ‘clock time’ where certain time scales, cycles and life stages are naturalised and internalized. Conditions of contemporary neo-liberalism demand, and thus shape, a future-oriented, enterprising, capital accruing subject (Skeggs 2004, Allen et al. 2012), operating in an exchange value economy where capital is accrued in the person, and generative of future value. Bourdieu (1984) argues that as people move through social space they encounter possibilities for increasing their overall value through the acquisition and formation of capitals, where relationships can be quantified, measured, and are exchangeable.

In this model, individual worth is tied to economic and reproductive worth, and relationships are based on exchange value; from a classed perspective, questions can be asked about social inequality, while from a queer perspective we might be concerned with alternative values with queer theorisations of ‘strange’ temporalities and futurities: ways of relating to people that are not orientated around exchange and accumulation or oriented around reproduction or productivity (Halberstam 2005). We might be concerned with both of these reproductions, and ruptures, as I am. In the ‘clock time’ of capitalism (Adkins 2009) certain time cycles (leisure, recreation, work, family, domesticity), and life stages (birth, growing up, partnering, parenting, careers, retirement, death) are naturalised and internalized (Halberstam 2005) reproducing not only heteronormative ideals but a ‘chrononormativity’ (Freeman 2010 Martinon 2013).

Empirically, research on the middle-classes tends to substantiate Bourdieu’s capital accruing model. The middle-classes are seen converting their time and energy into activities to generate cultural and social capital, protecting and projecting certain

futures. However, Skeggs (2011) argues that Bourdieu's theories do not explain working-class personhood, or any other personhood without (legitimised) social value. Like others, Skeggs asks if people live different material conditions, why would they not have different forms of association and value practices, different ideas about the future? Qualitative studies of working-class groups demonstrate that this is the case. Working-class personhood is found to be defensive, not acquisitive, protectionist rather than proprietorial (Skeggs and Loveday 2012), involving living with precarity and 'getting by', rather than orientated towards futurity and 'getting on' (Skeggs 2011, Taylor 2012, McKenzie 2015).

Caring is often seen an essential way to live with others, as making the best of limited circumstances. These conditions have been identified as 'supportive connectivities' not sources for 'self-accumulation' (Skeggs 2011), involving non-utilitarian affects of care, loyalty and affection, rather than competition, strategy or accumulation (Hollingworth 2014). Valorising relationships made from local and familial sociality, can involve, for example, valuing the gift of attention of over time, and we may think of this as 'alternative circuits of value' (Skeggs 2011, Skeggs and Loveday 2012).

Alongside research on class, queer theory provides useful tools to consider alternative ways of relating, challenging the equation of a 'successful' or 'happy' life in heteronormative capitalist society, often reducible to forms of reproductive maturity, combined with wealth accumulation (Halberstam 2005). Queer theory – which troubles the reification of innate gender categories, and the imperative of reproduction – aims to 'articulate an alternative vision of life, love and labour' (Halberstam 2005, 6). 'Queer' is about ways of being that stand outside conventional understandings of success and

the ways these successes – or ‘failures’ – are politicized, inhabited, felt and embodied, such as ‘embodied moment[s] of becoming Otherwise’ (Renold, 2008).

Queer uses of time and space thus question linear and homogenous time, highlighting instead the transient, fleeting, and the contingent. In alternative temporalities, chance, or the untimeliness of the event are often seen as key elements in any political effort to ‘bring into existence futures that dislocate themselves from the dominant tendencies and forces of the present’ (Grosz, 2004, 14). This represents a useful shattering of chrono-normative and ‘clock time’ logic (Adkins, 2009), but it is also necessary to take account of the material contexts of such stretches and subversions.

Edelman (2004), and Halberstam (2012) argue that queer subjects should embrace non-productivity, and resist narratives of futurity bound into capitalist accumulation. However, this side-lines the practical and pragmatic (im)possibilities for certain subjects, with Renold (2008) noting that ‘queer subversions’ are also sustained from places of power. For the purpose of this chapter, how might ‘getting on’ queerly, intersect with varied social divisions, involving more than an age-count of who we ‘get’ as researchers, acting instead to pull us away from the temptation to count older and younger research subjects, and situate ourselves more fully in research-researched-researcher exchanges.

Queer Families

I want to turn to some examples from *Lesbian and Gay Parenting: Securing Social and Educational Capital* (2009), which explored changing welfare regimes and

recognitions in the UK context, as impacting on ‘queer families’, and interviewed 60 self-identified lesbian and gay parents from self-defined middle-class and working-class backgrounds. Weeks (2007) explores the ‘coming forward’ of certain subjects in moments of sexual citizenship, a ‘winning of worlds’ in which LGBT citizens are now capacitated and filled with life (as parents, citizens, recognized subjects) as opposed to death (as criminals, deviants, sick-subjects). To some extent these new rights represent a success and a securing of (feminist) futures in so far as claims can be made on the State and new existences can be secured and materialised: further, individual and family futures are also protected and legitimised in these socio-cultural transformations. But even seemingly subversive ‘winning’ practices often project specific futures aligned to – rather than challenging of – societal and educational inequalities.

In the broader project, I argued that middle-class parental practices seek to bring forth a future capacitated citizen, as a measure of queer parents’ *sameness to* and even *success against* their heterosexual counterparts: (re)producing a certain future involves a turn from social difference, disgust and abjection to one of sameness, inclusion and a desirable diversity (Taylor 2009). Within this process of resourcing the good, succeeding child, others are positioned as failing, excessive and culpable. This has an embodied and spatial dimension where (social, parental) ‘disgust’ is re-located onto working-class bodies and practices. The shaping of children’s bodies/spaces as a (middle-class) caring act involves ‘choice’, ‘balance’ and ‘discernment’ as indicators of diversity and difference, and as claims upon a new improved version of good parenting. By positioning working-class families as failing children, the implication is that they are also failing to bring forth a certain future, capacitated citizen; working-class families’ choices and realities remain fixed through notions of risk and blame.

While queer parents were once positioned rather homogeneously as gambling with social futures, I found that within my sample, this judgment firmly attached itself to working-class parents, re-embedding current injustices.

Middle-class interviewees spoke of the importance of ‘active planning’, to reinforce the fact that parental and care decisions had not been taken lightly, and that their sexuality actually *compelled*, rather than negated, the following of proper, well-thought through routes. This parallels arguments regarding the relationship between the ‘social’ and the ‘biological’ in terms of how family is made and who counts as a parent – at once gays and lesbians are seen as too sexual (embodying the ‘wrong kind’ of sexuality), or too restricted by the biological to ‘do parenting’. This leaves many contradictions, where parenting may be perceived as an entirely social, asexual project, which interviewees themselves negotiate, resist and repeat. Many middle-class interviewees spoke of being active choosers in planning their routes to parenthood, foregrounding their own sense of responsibility, as against that which ‘just happened’ all too easily. Having become pregnant through assisted insemination, Gemma claims an ‘active choice’ where family doesn’t easily ‘just come packaged’, positioning herself against that which ‘just happens’ to ‘het people’:

You make an active choice ... and the vast majority of het people, it just sort of happens to them. You know, very rarely do they actively make the choice. It’s interesting talking to women who go for fertility treatment because they are having to make the active choice.

(Gemma, 50, middle-class)

Jacqui also foregrounds her own responsibility, contrasted with drunkenness and a profound lack of planning, recognisable in more conservative discourses. In both Jacqui's and Gemma's accounts it is difficult to reconcile notions of 'good planning' alongside other interviewees' experiences, where they would not be recognised via this 'redemption':

I think that if you're going to that much trouble to have a child, it must be really wanted. I think that if it's a question of you going down the pub, you're getting pissed and you get laid and you come home pregnant, that child hasn't really been thought about or chosen, or decided on, or anything. I think that when gay people decide they want to have children they put a lot of thought and a lot of effort into it, so it's not just happening to them, they are making choices and I think that's a good thing.

(Jacqui, 43, middle-class)

Immediate, excessive, gratification is set alongside long-term planning and efforts. Similarly, Kevin (36, middle-class) spoke of 'project planning' his parenting, in conjunction with Ruby's mother, aiming to create the 'right environment' which had been well 'thought through' and, crucially, resourced. Again, Carol (53, middle-class) affirms her 'active choice' of parenting almost against that which just happened, in youthful times, by 'traditional means' and in doing so re-positions in terms of rightful, respectable routes. The trope of 'the family' is one of the longest standing within sociological discussion, and it is ever (re)circulated, in terms of rights and wrongs. Conceptualisations of family 'choices', particularly prevalent in the literature on lesbian and gay parented families, have frequently foregrounded a reflexive, agentic

subject politically mobilised against expected attacks on their incapacity to parent – and we might want to extend this into ‘caring’ in general (as with the ideas of ‘families of choice’). Nonetheless, the articulation of (queer) ‘choice’ may serve to re-circulate very similar notions of who is and is not capable of caring; even queer subjects might reproduce static and normative, rather than subversive, futures.

I think the danger of it is that I think it’s fantastic for people that want to do it, I’ve been to lots. But I think the danger of it is that it’s creating a sort of two-tiered world where you are kind of jolly and out and no problems and equal to straight people and then the kind of slightly grotty ones who decide not to. You know, like an underclass, and I’m in that! (laughter). I’m in that underclass again! Back in the margins. And I think, I mean, that’s one way of looking at it and also, because I’ve done that, I’ve been married and I spent most of my adult life married ... you’re not really going to start wandering back into that world and, you know, I don’t care about the legal and the financial links really.

(Katerina, 52, working-class)

Queer Cares

I now want to turn to quite another case of ‘queer cares’: having deconstructed the cares of others, I should dwell on my own, and here I return to the idea of the embodied subject who has aged (in this case myself and my grandmother). In doing so, I want to again think about the politics of storytelling – for in researching, writing and presenting we are telling stories – alongside the complexity of care, as often required at certain points of the life course (the above examples of course situated this in terms of parental

cares but caring for a parent or grandparent can interrupt and reverse these normative stories).

Despite being convinced about the necessity of reflecting on the personal as political, I do have a certain authorial ambivalence about the reach and significance in doing so, about whether this does justice to a particular methodological approach and to a specific set of sociological—and personal—concerns. The positions of researcher and granddaughter are navigated in relating an account of my grandmother's (mis)positioning as Alzheimer's 'patient,' as 'senile,' and 'unknowing', and her subsequent status as recipient of a National Health Service 'care' package. My grandmother is unable to tell her story, on the academic page and in medicalized (read 'authoritative', 'reasoned', 'capable') knowledge constructions.

'... The relation between memory and caring ... is, I maintain, an internal relation – a relation that could not fail to obtain between those two concepts since memory is partly constitutive of the notion of care. If I care for someone or for something, and then I forget that person or that thing, this means that I have stopped caring for him or it' (Margalit, 2002 in Taylor, J., 2008: 318).

In contrast to the above linkage between remembering, recognising and caring, between seeing and being seen, Taylor (2008) relates how these connections result in a misrecognition of the 'cares' of those who no longer remember – where memory, history and knowledge is reduced to simplified recall, a question of 'Does she recognise you?' Does the patient recognise the daughter, the granddaughter, the significant others? In seeking to understand the repeated question of whether her mother, who is

living with progressive dementia, still recognises her, Taylor interrogates how claims to social and political recognition are founded on the demonstrable capacity to ‘recognise’ people and things, where those who ‘don’t remember’ can be discarded as lost, as inhabiting permanent patient hood, rather than as mothers, sisters, grandmothers, and ones with ‘cares’, histories and futures.

My grandmother, as a person living with Alzheimer’s, was ‘lost’ to her family as she was ‘cared’ for, made a resident of a hospital and returned, not to her family home, but to a residential care home, against her families wishes – and against her own expressed wishes, communicated when she could, officially, consent. The removal of memory, history, knowledge and cares occurred through years of institutional care, marked by conflict, error and mis-understanding, by the mis-recognition of her as only a patient and not a person, not a grandmother. If social and political recognition are founded on the provable capacity to ‘recognise’ people and things, might the narration of the complexity of care, enforce a new kind of recognition for those deemed lost and gone, who can no longer ‘get on’? There are structuring contexts beyond individual tales; research cares also force a consideration of the complexity of care as differently told, practiced and authorised.

My gran became a patient, or a ‘client’, depending on what carers – social workers or nurses and doctors – were ‘intervening’ to provide the most efficient, least costly ‘care package’: she was a number added to National Health Service lists, she was ‘pending’ care. I was often annoyed by the infantilisation of her, as a manifestation of such care. Many, mostly female, carers were affectionate and tactile. This was, probably, good for her, in an otherwise clinical and sterile environment. I have myself worked as a carer

in a nursing home and have cared efficiently, professionally and often with affection. But she was not theirs – just as this story is mine and not completely my granny’s. If she was telling this story I’m sure it would be different, she’d tell the present differently and remember the past differently; I try to be mindful of this, and of silences, slippages (Gill and Flood, 2009), as I attempt to recall her wishes and desires, as well as my own.

The failure of a ‘care plan’, as a legalised, consensual document signed by my grandmother pre-Alzheimer’s, denied rather than guaranteed her choice. This care package enveloped and even eclipsed her own concerns, her own choices and cares; as an expert of ‘good enough’ care, a fine balancer of stretched resources and seemingly infinite demands, my granny was relegated to the bottom rung of ‘care’, wheeled into a demarcated ward, labelled ‘gerontology’. Her body and mind was diagnosed as ‘elderly’, an open and shut case, nothing more to say, no more decisions. Is care release or relief, if so, for whom? If reflexivity is generationally bound, to be awarded and deployed by the younger, female academic, should one fear its removal post-retirement, when what one knew and who one is cannot be commanded? From esteemed and knowing (‘grandmother’, ‘academic’) to out-of-date and strangely ‘junior’. The relevance of social positioning and inequality are relevant in the rendering, and securing of, self and subject-hood and we reach vulnerable positions, with the weight of past dispositions; if an aging self embodies a potential vulnerability, it does so via other materialities and subjectivities (Skeggs, 2002; Byrne, 2006). My gran’s story speaks to the intersection of class, gender and generation in the complexity of caring across and at the end of the lifecourse.

As I saved multiple letters in negotiating the care system via NHS complaints, applying relatively care-free processes to a personal, rather than academic concern, I often paused to think what I should save correspondences as, where should I place these, what folder does it belong in? This disjuncture speaks of the connections and disconnections in embodying academic and personal concerns, identities and speaking positions: I consciously aim to mobilise and ‘perform’ an authoritative, knowing self, to be drafted, considered and re-drafted in written communications to medical institutions. I demanded recognition for family connections and knowingness, for memories materialised across generations, and known without being diagnosed; I liaised with medical professionals, care organisations, social workers, nurses, community providers, residential nursing homes, and I asked them to hear my story too. I also speak their language, I understand budgetary constraints, the complexity of care provisioning, competing ‘best interests’, and I asked where does my gran fit in these tales?

That I am called upon to intervene, to question and cajole in this respect may well say something about broader familial patterns of, for example class and gender; where my ultimate failure, or lack of success, can be seen to confirm rather than escape social ‘fixity’ and structured hierarchies, as against a mobility and agency. Over the years I added a whole new ‘Granny’ folder in my files. It’s still filled with facts, complaint and pleads; with indignation, anger and despair. These letters were sent to care authorities, organisations, providers and campaigning groups for the elderly. They’ve been sent to newsletters, support groups, friends and family and they leave a trace in connecting the cares. My everyday academic spaces and tools (A4 lever arch file, now filled; photocopies of replies and forwarding; search engines now exhausted of the words

‘health’, ‘old age’ ‘NHS complaints’) used to provide assurance that something would be done. Yet actively mobilising academic credentials, technologies and knowledges uneasily aligned me with other professionals, everyone in pursuit of and conflict over the ‘right thing to do’. But this ‘right thing to do’ doesn’t work as a rule book or policy document (prefaced with a ‘that’s what happens’ section) in a safely guarded, hierarchical bureaucracy, where consultants fear losing their professionalism and prestige (but perhaps not their gran). My claims to knowledge hope to pay heed to the complexity of positioning, but this is not always a safe – or useful – stance: (medical) doctors often do not care in this respect (utilising ‘Dr.’ as a signature I have been called to account as having no real, that is medical, knowledge).

I present a brief consideration of the complexities of my grandmother’s story, of the movement and misplacement from ‘grandmother’ to ‘patient’; a movement in time punctured and effaced by medical diagnosis and ‘expert’ erasure (Taylor, 2008). These punctures also exist in the spaces of academia, affecting who can ‘get on’.

Queer Spaces of Academia

In a recent academic forum, I was happily engaged in collegial conversations. In these settings, exchange can become ‘conversions’, allowing us to display, convey and circulate career capitals – or not. Such conversions, moving from conversations to careers, are perhaps more subtle than bringing out the CV. But recent experiences have left me wondering if reaching for the paper version of the academic self would cut-out, condense or confirm ratings of worth, measures of success, feelings of (im)perfection and (in)secure academic arrivals. Everyday judgements and distinctions are always

manifesting in social interactions, and academic settings are no exception. Many have written passionately and provocatively about the awkward encounters in academia where some seem to be versed and conversant, while others occupy marginal positions – and others aren't even in the room (Taylor 2013). We know this is a matter of structural inequality rather than simply not being able to appear and perform. If feminism is itself caring, as a generative commitment to families, interviewees, audiences and publics, embodied in labours and cares, what happens when that is interrupted and challenged? I was made to think about this possible – and rather deathly – *descent* recently when a colleague asked me if I thought I had ‘peaked too soon’? Consider this fictionalised auto-ethnographic account...

‘Institutional benefits accrue to the young academic in the form of promotion, career and geographical mobility: she moves from there to here and seems to fit-in and take up her space. Even this requires an explanation; surely this is too soon? Surely she must be too ambitious, too individualist, too removed from The Family or any emotional cares, able instead to just invest in herself? Does she have children? A partner? Does she have work-life balance or just work too hard? Even (feminist) successes may be recast as failures in normative measures of fitting-in, moving, achieving and (not) caring and as she considers this, the question of what it means to live out, activate and be present in and through academia become pressing issues...’

At a time of continued and profound social division in academia, effecting who climbs and gets ahead, I find the snapshot of individual career acceleration (and deceleration – as the summit slips) rather disturbing – and as another kind of timebomb. As with gendered material inequality, many feminists have highlighted gendered cultural climates within academia where ‘[T]here is a cultural climate that favours men ... Women are not recognised for their talents or abilities and are often forced to do low-

level, high-volume administrative work, while many more men assume external-facing roles that have immediate... career gains...' (Morley 2013). In the same article, Morley asks 'why are so many women missing from leading institutions, particularly at senior management levels?' When this absence becomes a potential presence it is still rendered culturally peculiar and questionable, both reduced and inflated, as a 'peak' too soon.

We see supposed measures of productive labour all around us, ever-rehearsing what comes to count (as academic, activist, feminist). The neo-liberal university is increasingly a site which demands a mobility of practice and an entrepreneurial orientation to local-global markets; the academic is encouraged to extend her reach, to outreach to 'diverse communities', and to do so as the responsive-responsible 'engaged', to stay on top, ahead, ascending, active. These processes efface the material and affective labour and vulnerability in 'coming up against' blockages (or 'coming out') which means the queer researcher-teacher gets 'stuck' (Ahmed, 2004).

We might ask what happens to the feminist herself (post 'peak')? In academic presentations across the career-stage, we are endlessly displaying and building our own value, with presentations apparently announcing an arrival (even as we ask ourselves 'what next?', moving from 'early' to 'mid' to 'established' career). As we appear on the page (in the magazine, journal, book) and in the lecture theatre we create certain presences and we have to be careful to ask 'what and who else is carried with us?' In times when some are rendered excessive (in need of 'cutting-back'), including individual academics, whole disciplines and entire institutions, our presence must be

re-situated as mutual and collective, rather than singular and embodied in moments of individual success (or failure):

Our same academic – with a still frequent emphasis on the young – receives an email from her PhD student: its several pages long and a potential chapter in itself. She realises this could be serious and jumps down the paragraphs trying to find the urgency in her inbox (and there are many urgencies in her inbox). The message is this: the student is going to have a baby, she knows this is a shock, she hopes it won't affect opinions of her or her commitment to work, she questions if this will be recognised, if her funding will continue, her deadline extended, her employability ended... She wonders if her potential is already being recast as a failure and the sense of being in the wrong time (too young to mother, too young to be a successful academic) is transmitted in these exchanges... Work is done in reading between the lines of emails, policies and funding guidance which speak of equal opportunities, a commitment to diversity, an 'investors in people' status: forms are completed, procedures are followed and pregnancy is declared at the appropriate time – being 'pregnant enough' (for recognition, extension, advice) is stated as 22 weeks, the official time when institutional recognition can begin. 'You're not the first person to have a baby' is the relayed response to the student's concerns and questions. The phone rings – ESRC funding has been received and a research associate vacancy advertised. The potential candidate is ringing to ask if she is still eligible to apply? She's just found out that she is pregnant. The lecturer is thinking equal opps, she's thinking HR. And she's thinking ESRC deadlines. What would you be thinking? Her research associate gives birth, takes time out. She's not entitled to institutional benefits having not served enough time. But she's extending her maternity leave nonetheless...

Conclusion

Certain time scales, cycles and life stages are naturalised and internalized, as 'clock time' governs our movements in 'getting on' or 'getting by' (as, for example career mobility, citizenship recognitions, institutional rights). In this chapter, I've presented some examples of what happens when normative time is disrupted; when 'family time'

encroaches on ‘work time’ and makes non-sense of ‘work-life’ balance; when this is reversed so that the person being cared for is not a child but a grandmother, when the queer feminist academic arrives ‘too soon’ in academia; when the ‘child-as-future-citizen’ is placed as needing ‘active planner’ (and pre-birth), but when this collides with the timeline of ‘22 weeks’ for maternity announcements and entitlement. When these things, feelings, bodies, dislocations circulate in and as queerer spaces of academia, they can appear as ‘timbombs’, exploding commentaries on what should-be-done-when, often as an instantaneous solution demanding that we act on time (‘have a baby before you’re 30yr’). What could happen if, instead, we took our time? Readers may well suspect me of a degree of fraudulence, or hypocrisy at this point, but I seriously do still intend to take, and repeatedly fail, my own advice. While acknowledging complexity and complicity in the processes which govern us as researchers, carers, citizens (and sometimes the material impossibility of slowing down). Bringing these three positions together, while locating myself in and through research, as inevitably intersecting my own cares, biography, personal and professional identity (as also a queer subject getting on), involves for me at least ongoing ‘intersections’ of age, sexuality and gender as themselves moving rather than static material and subjective positions.

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¹ A top NHS doctor has said that women hoping to conceive should try for a baby before reaching 30 to stop a 'fertility time bomb'. Prof Nargund warned that fertility issues were placing a "costly and largely unnecessary burden on the NHS" as increasing numbers of women in their 30s and 40s sought IVF treatment. She wrote: "I have witnessed all too often the shock and agony on the faces of women who realise they have left it too late to start a family ... For so many, this news comes as a genuine surprise and the sense of devastation and regret can be overwhelming... Information is power and the best way to empower people to take control of their fertility is through education. Ideally, if a woman is ready for a child, she should start trying by the time she is 30. She should consider having a child early because as a woman gets older, her fertility declines sharply."