

# Anthropology & Aging

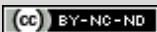
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## Book Review

Wentzell, Emily A. *Maturing Masculinities: Aging, Chronic Illness, and Viagra in Mexico*. Durham, NC: Duke University Press. 2013. ISBN 978-0-8223-5491-8 (cloth), ISBN 978-0-8223-5506-9 (paper) 224 pp. Price \$84.95 (hardback), \$23.95 (paperback)

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*Maturing Masculinities* explores the ways men in Mexico faced with aging, chronic illness, and decreased erectile function incorporate these experiences into their conceptions of themselves as men. The proliferation of medical technologies for enhancing penile erection has spurred a worldwide medicalization of impotence, offering men new ways to understand changes in their sexual function over time. Viagra has found in Mexico the developing world's largest market for the drug (p. 7), and the ubiquity of public discussion about erectile dysfunction or ED, along with the high level of debate within Mexico about who Mexican men are and should be, made researching male sexuality in Mexico a compelling project. Strikingly, anthropologist Emily Wentzell found that the majority of men in her study rejected ED treatment for their own decreasing erectile function. Rather than taking drugs to prolong youthful sex lives, male patients—together with their physicians and wives—tended to frame decreasing erectile function as a signal that they should make the shift to an appropriately mature style of masculinity.

This eye-opening ethnography is based on an analysis of engrossing and intimate interviews with more than 250 patients in a urology clinic of a government-run regional hospital in the city of Cuernavaca. One might wonder how a female anthropologist could manage to talk openly with men about their erections, but several factors came together to facilitate the research. The crowded conditions of the government clinic meant that physicians found little time to discuss anything other than the most pressing medical issues with their patients. Urologists tended to ask any man they suspected of experiencing erectile difficulty if he wanted to participate in a study on sexuality. To Wentzell's initial surprise, most did. Patients who had long waits for short visits said they appreciated the chance to talk in more depth about their problems and concerns. Wentzell's position as a white, American woman also seemed to help establish the trust (*confianza*) participants felt. They appreciated that she was a woman, noting that they did not feel they had to compete with her to seem manly; and being American helped, too, as stereotypes about *gringas'* comfort with sexuality made the participants feel, some reported, that they could discuss sex without shocking or offending her. The result is a rich, vivid ethnography centered on the intimate narratives of men as they incorporate age-related changes into their gendered selfhoods.

Rather than casting masculinities as static or uniform, Wentzell proposes a model of "composite" masculinities to show how men weave together a range of elements from their life worlds—including cultural ideals of *machismo*, new biomedical ways of understanding, and physical and social changes—into their evolving ways of being men. Most men in the study once regarded an active (hetero)sexuality—the ability to have sex with (often multiple) women—as central to their successful masculinity. However, helped by their wives' responses—many of whom were reportedly no longer interested in sex and relieved that lack of erectile function

might put an end to their husbands' philandering—older men worked to regard decreasing erectile function as a timely prompt encouraging a masculinity more appropriate to their mature age. This mature masculinity emphasizes not sexual virility but familial togetherness, settling down in the household, and accepting the "natural" bodily changes of age. Yet not all narratives were the same. The nuanced ethnography presents as well the painful struggles of some men who deeply missed being able to have sex, felt stingingly embarrassed by what they perceived as the loss of their manhood, and worried that their wives would look elsewhere if they could no longer "provide" for them sexually.

Wentzell in turn uses the "composite" approach to analyze erectile dysfunction treatment in medical context. Few men or doctors attributed their ED to biology alone (even those 11 percent of men in the study using medical ED treatment) but rather were likely to understand erectile difficulty holistically, drawing on composite understandings of health and sexuality that incorporated biomedical, humoral, and emotion-based perspectives.

One question that arose for this reader concerns Wentzell's foregrounding of the notion of "penetrative" sex in her analyses. As Wentzell conveys: "In Mexican and many other cultures, both having a penis and using it to penetrate others are important ways of asserting manhood" (pp. 3-4). Yet when Wentzell reports that certain interviewees were disappointed no longer to be able to have "penetrative sex," one wonders whether the men themselves intended to focus on penetration alone in their narratives, or whether they felt more broadly that they were being compelled to give up "sex" altogether? Much of the data suggests the latter. In this sense, in some places, the author's foregrounding of the notion of sexual penetration seems perhaps to be unduly narrowing.

Overall, though, this is a fantastic, highly successful, and illuminating ethnography. It is one of the best studies on Mexico or anywhere on masculinity and aging. The accessible, smart book will be welcomed by students, scholars and the public alike interested in cross-cultural understandings of aging, gender, masculinities, health, medical anthropology, ethnographic fieldwork and writing, and Mexico.