

Creating Safe and Inclusive Services for LGBT Older-Adults

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Introductions And Welcome

 This presentation has been developed by the National Resource Center on LGBT Aging.

www.lgbtagingcenter.org

Please Refer to Handout 1



Presentation Goals

- Brief Overview (1 hour)
- More comprehensive workshop is available for organizations that want to develop more inclusive services for LGBT older-adults.
- Kudos to Aldercrest



Presentation Goals

To increase awareness and empathy amongst health care and social service providers about the issues and needs of LGBT older-adults.



Presentation Goals

Designed to help you continue to do the things you do very well already, while enhancing your ability to extend this same great care and service to LGBT older-adults.

Thank you for the role you all play as advocates for the aging.



Why would it be important for health, human, and social service providers to be aware of, and have empathy for, the needs of LGBT older-adults?



Awareness and Empathy

Many aging services providers see no need to discuss LGBT aging issues because:

1. "What someone does in the bedroom is none of their business."



Awareness and Empathy

Many aging services providers see no need to discuss LGBT aging issues because:

- 2. "They don't want to discriminate."
- 3. "They don't want to make people feel uncomfortable."



Awareness and Empathy

While well-intentioned, it leaves many LGBT older-adults feeling that they must hide who they are, in order to take advantage of health, housing, and social service programs.



Distrust of Health Care and Social Services by LGBT Older-Adults

LGBT older-adults have been found to be 5 times less likely to seek health and social services than their heterosexual peers because of fear of harassment and discrimination.



Distrust of Health Care and Social Services by LGBT Older-Adults

In a study by the American Association of Physicians for Human Rights (AAPHR), 67% of doctors and medical students report that LGBT patients are denied care or receive substandard care.



Distrust of Health Care and Social Services by LGBT Older-Adults

About 25% of transgender people report being denied equal health care, or being refused treatment outright, with Latino Transgender people reporting the highest rate of unequal treatment.

Please Refer to Handout 2



- To begin this presentation, we need to be clear about the terms we're using.
- Terms are crucial because finding out how the person describes him or herself and then using their language are primary ways of conveying respect and openness.



- There has been an evolution over the years with terminology and the way it is used to describe LGBT people and aging adults.
- It is important to be aware that terms may have different meanings based on the person's age, life experience, and cultural heritage. (example: Queer)



- It is important to know which words carry positive or negative undertones.
- For example, the term "homosexual" should be avoided because it has taken on negative connotations because of its previous use to denote mental illness.

(APA, 1973 and DSM II, 1987)



- LGBT
- Lesbian
- Gay
- Bisexual Please Refer to Handout 3
- Transgender



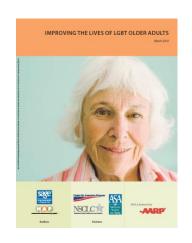
Statistics on LGBT Older-Adults

- In 2010, there were between 1.6 and 2.4 million gay and lesbian elders in the U.S.
- Every state has self-identified LGBT citizens, ranging from 1.7% of the population of North Dakota to 10% of the District of Columbia.

Please Refer to Handout 4



Statistics on LGBT Older-Adults







By 2030, estimated 2-7 million Americans aged 65 and older will identify as LGBT.

(Outing Age)





Statistics on LGBT Older-Adults

LGBT older-adults live in most, if not all, communities throughout the country, therefore it is important to develop empathy and learn about best practices to make it safe for LGBT older-adults to seek health and social services, and to receive quality care. (2010 U.S. Census, 99% of counties)



LGBGT Aging Demographics

- 4.1% of adults in U.S. identifies as LGB, currently around 1.6 million, expected to double to 3 million by 2030.
- Ethnically and economically diverse.
- Isolated, invisible or marginalized, even within their own communities.



A key issue affecting organizations that work with older-adults is NOT that they don't want to work with LGBT older adults, but they often don't think they have any clients or patients who are LGBT.

Let's explore this a bit...



Thinking that you have no LGBT clients is an assumption.



Do not assume that all older-adults are Heterosexual.





If you believe that you are not currently working with any LGBT older-adults, you may be working with LBGT older-adults who are not comfortable sharing that aspect of their identity. (Silent Generation)



- If you aren't currently working with LGBT older adults, you probably will be soon.
- Baby Boomers will refuse to go back into the closet.



We Want to Prevent LGBT Older-Adults from Going Back into the Closet



Often, individual staff members and organizations make additional assumptions in their practices and policies that unintentionally exclude or have a negative impact on LGBT older-adults who are trying to access services.

Let's explore this a bit...



- Service providers assume they can identify any LGBT adult who is accessing their services. (gaydar)
- Please Refer to Handout 5



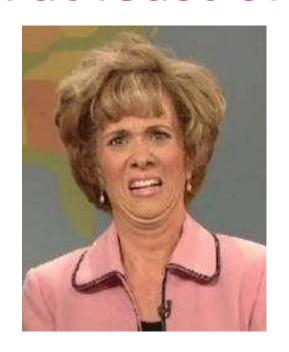
By not asking about sexual orientation or gender identity, healthcare and social service providers believe they are ensuring that the organization does not discriminate against LGBT people.



Because our culture often desexualizes all older-adults, healthcare and social service providers may think it does not matter if an older-adult is LGBT.



More than 60% of individuals over 60 have sex at least once a month



Hopefully this is not your first reaction!



How might these assumptions affect the LGBT older-adult who needs to access your services, or is using your services?





Stigma

- Came of age in a very different time.
- Many led secret lives or married and had children to fit in.
- Homosexuality considered psychiatric disorder until 1973.
- Homosexuality considered criminal until 2003.





Stigma

- Less than 50% of LGBT Baby Boomers expect healthcare professionals will treat them with dignity and respect.
- 12% of lesbians have absolutely no confidence they will be treated respectfully.







Social Isolation

- Twice as likely to live alone, twice as likely to be single, and 3 to 4 times less likely to have children and many are estranged from their biological families.
- Become isolated over time from their broader communities: places of worship, work settings, as well as, from friends and family.







Social Isolation

- Smaller support networks, debilitating feelings of loneliness and depression, deterioration of physical and mental health.
- Higher disability rates, higher poverty rates, struggles with economic security.
- MH concerns as a result of a lifetime of discrimination that has had psychological costs.







Social Isolation

- Experience ageism within the LGBT community itself, increases their risk of social isolation.
- Many who fought for the right to be openly gay in mainstream America, now face a new challenge: remaining openly gay in old age.





Lack of recognition and fear of Discrimination by:

- Society
- Aging Service Providers (health, housing, social services, etc.)
- Families of Origin







- Among the most invisible of all Americans.
- Grew up in the 1930s, 40s, and 50's were forced to accommodate and stay in the closet.







Aging services have historically been hostile to the aging LGBT community, resulting in fear and avoidance of aging services. LGBT seniors face more barriers due to the lack of provider knowledge and training, inequitable policies, and lack of resources.







Fears of Harassment and Discrimination

- Few aging service providers plan for, or conduct, outreach to the LGBT community and few are prepared to address acts of discrimination aimed at LGBT older-adults by staff or other older people.
- Often face harassment or hostility when frequenting senior centers, volunteer centers, foodbanks, or places of worship.





Negative Consequences

LGBT older-adults delay seeking necessary health care, sometimes indefinitely, and can lead to premature institutionalization in nursing homes and long-term care facilities, or premature death.







- Face anti-gay discrimination in housing, public accommodations and medical treatment.
- Discrimination based on ageism, transphobia, and homophobia.







Many LGBT Baby Boomers do not want to jeopardize their safety by being out to care providers who may not understand them, so they make the choice to go back in the closet as they get older.







LGBT older-adults who are still in the closet have a great fear of people finding out. When they think of a nursing home, which will now be their home, it can be scary. It means people will see their personal things: their books, pictures, and photographs that may represent them as gay. For many home has always been the one place they didn't really have to hide.







- For many doing without seems preferable to opening up their home to strangers who may not agree or understand their life.
- Increased risk for unaddressed healthcare needs, social isolation, depression, alcohol and substance abuse, low self-esteem, low self-worth, and suicide.







- Many do not have the same family support systems as their heterosexual counterparts.
- While many are close to their families of origin, some have been rejected and have less support.







Many rely primarily on partners and close friends for social support.

Family of Choice vs. Family of Origin.





Sexuality Among Older-Adults

- STD rates among 45- to 65-year-olds have nearly tripled over the past decade. (CDC)
- Number of new HIV infections is growing faster in individuals over 50 than in people 40 years and under., (CDC)
- As of 2015, 50% of men living with HIV in the U.S. are 50 years of age or older.



Historical Events – Self-Reflection

- ✓ Take a few moments to think about the historical events in this country or in other parts of the world that have shaped your life.
- ✓ Note how old you were when those happened.



The Impact of LGBT History on LGBT Older-Adults

- Came of age at a time when there was great prejudice and violence against LGBT.
- Medical and religious labels of "mental disorder" and "moral aberration" validated this prejudice.
- LGBT people of color had to deal with both racism and prejudice about being LGBT.



LGBT Older-Adults Case Studies

Next we will look at some case studies of LGBT older adults, to consider the possible impact of these assumptions on their health and social service needs.

Please Refer to Handout 6



Short Brainstorm

- Read your assigned case study together
- Discuss the following question:
 What kind of health or social services would this person benefit from?
- Jot down your answers
- 5 minutes



Historical Events

Moon landing

- Challenger Disaster
- Assassinations
 MLK/JFK/Malcolm X,
 RPK/Harvey Milk
- AIDS Crisis
- 911

- Civil RightsMovement/Selma
- Obama's Election
- School Shootings







LGBT Historical Timeline

What kinds of impact might these events have had on the person in your case study?

Brief reporting out (5 minutes)

Please Refer to Handout 7



Creating Safe and Inclusive Services for LGBT Older-Adults

Inclusive Services for LGBT Older-Adults
10 Ways to Begin

Please Refer to Handout Page 10-11





Additional Training Offered

Part 1 (4-hours) and Part 2 (8-hours) modules

 Learn about the culture, needs, and concerns of LGBT older adults

 Consider why LGBT older adults are less likely to access needed services



Additional Training Offered

Part 1 (4-hours) and Part 2 (8-hours) modules

- Develop best practices for safety and inclusivity for your organization
- Develop tools and education to better serve the LGBT older adults who currently access or need services



You can learn more by

- Contacting Ruben Rivera-Jackman
 (206) 701-5435
 www.ruben.Jackman@shaq.org
- Downloading additional resources at www.lgbtagingcenter.org
- Reading more about NRC trainings at www.lgbtagingcenter.org/about/training.cfm

