



THE UNIVERSITY OF ARIZONA

Mel & Enid Zuckerman
College of Public Health



Towards Wellbeing for LGBTQ+ Older Adults: Challenge and Opportunity



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Road Map



Source: Flipboard

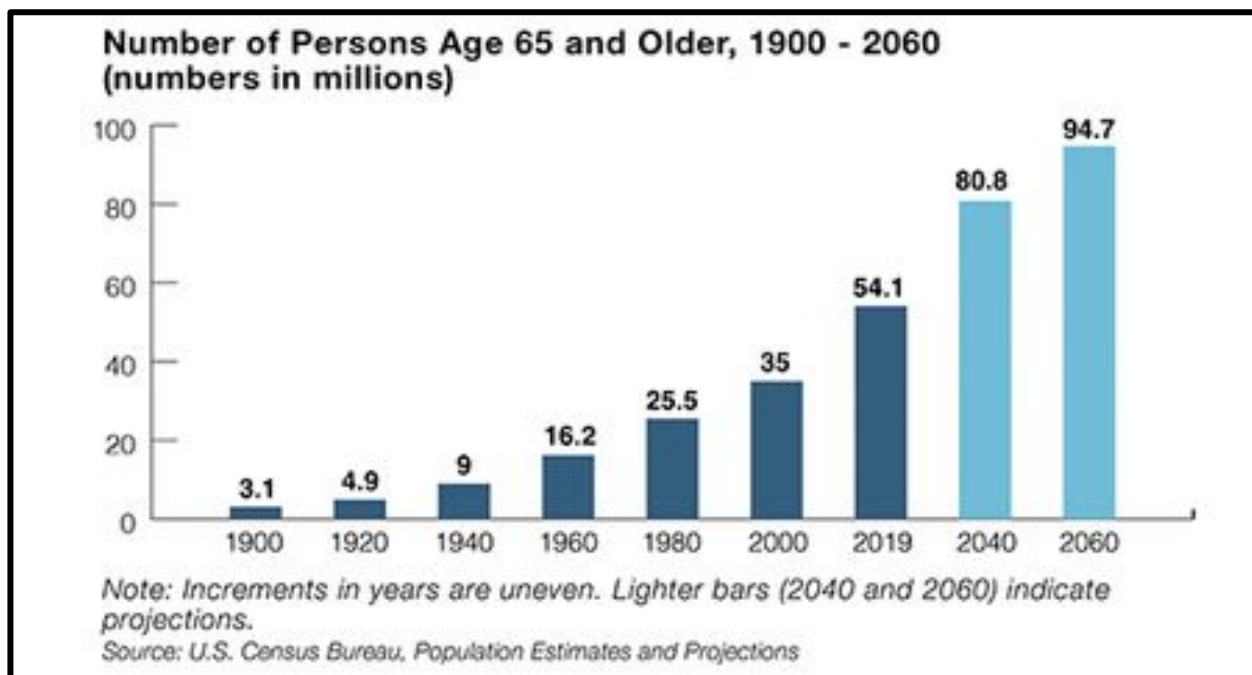
- Intro: LGBTQ+ Older adults
 - A unique experience and reality?
- Challenges versus Opportunities
 - Challenges: The issues
 - Opportunities: The solutions
- Call to action
- Take home message



Introduction

First, some context...

- Older adults are increasing in number:



ACL: 2020 Profile of Older Americans

- Projections:
 - 2040 ~81 million older adults
 - 2060 ~95 million older adults



Increased Numbers = Increased Diversity

Sexual orientation and gender identity

- Self-identify as LGBT older adults
 - 50⁺ LGBT = 3%, ~3million;
 - LGBTQ – 6%
 - By 2060 = 20 million (*Fredriksen-Golden & Kim, 2017*)
- Among 65⁺ - 1.1 million
- **Caveat?**
 - *Likely under-reported*
- **Arizona?**



Adult LGBT Population, US & AZ July 2020

	LGBT %	LGBT (Total)	LGB (Total)	LGB (Cisgender)	LGB (Trans)	TRANS (Total)	TRANS (Straight/ Other)	TRANS (LGB)
US	4.5%	11,343,000	10,338,000	9,946,000	392,000	1,397,150	1,005,000	392,000
AZ	4.5%	242,000	220,000	212,000	9,000	30,550	22,000	9,000

LGB = Lesbian, Gay, Bisexual
 Trans = Transgender

UCLA’s The Williams Institute on sexual orientation- [helpful interactive map](https://williamsinstitute.law.ucla.edu/publications/adult-lgbt-pop-us/) of LGBTQ data and demographics

Source: <https://williamsinstitute.law.ucla.edu/publications/adult-lgbt-pop-us/>

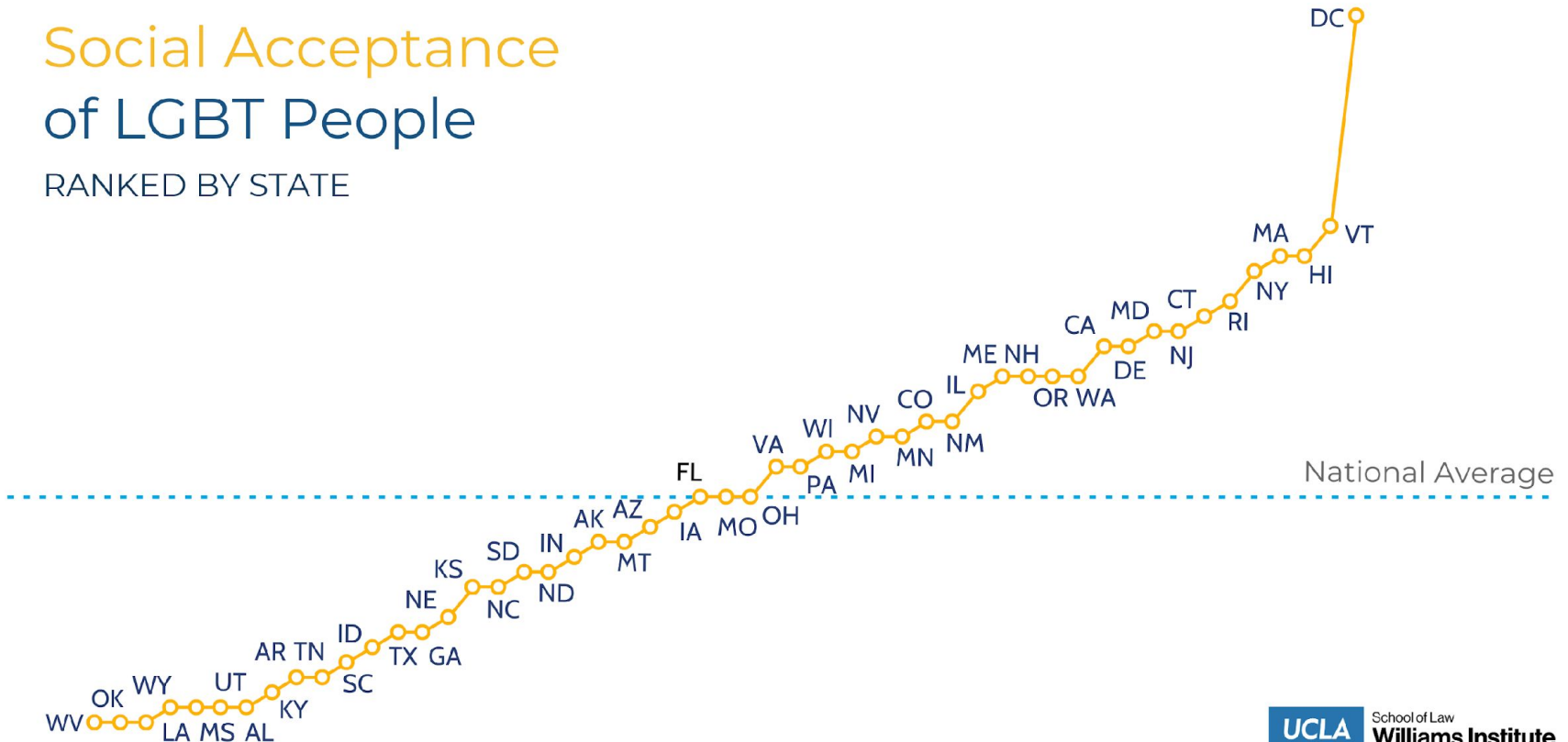


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Social Acceptance of LGBT People

RANKED BY STATE





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AGING AS LGBT: TWO STORIES





LGBTQ+ Older Adults

Recognize -

- Unique lived experience
- Invisibility
- Under-served
 - E.g., Policies, Healthcare, Social care, Access to services

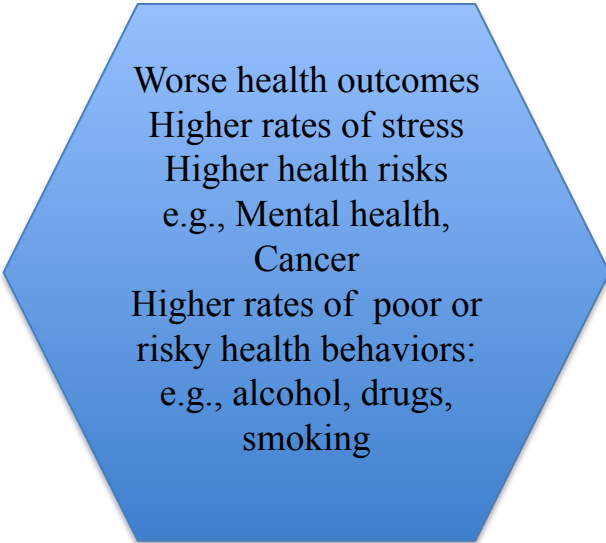
Consequences -

- Manifold
 - Quality of life, and wellbeing
 - Health, social, economic, LTSS, etc.



Concerns for LGBTQ⁺ Older Adults...

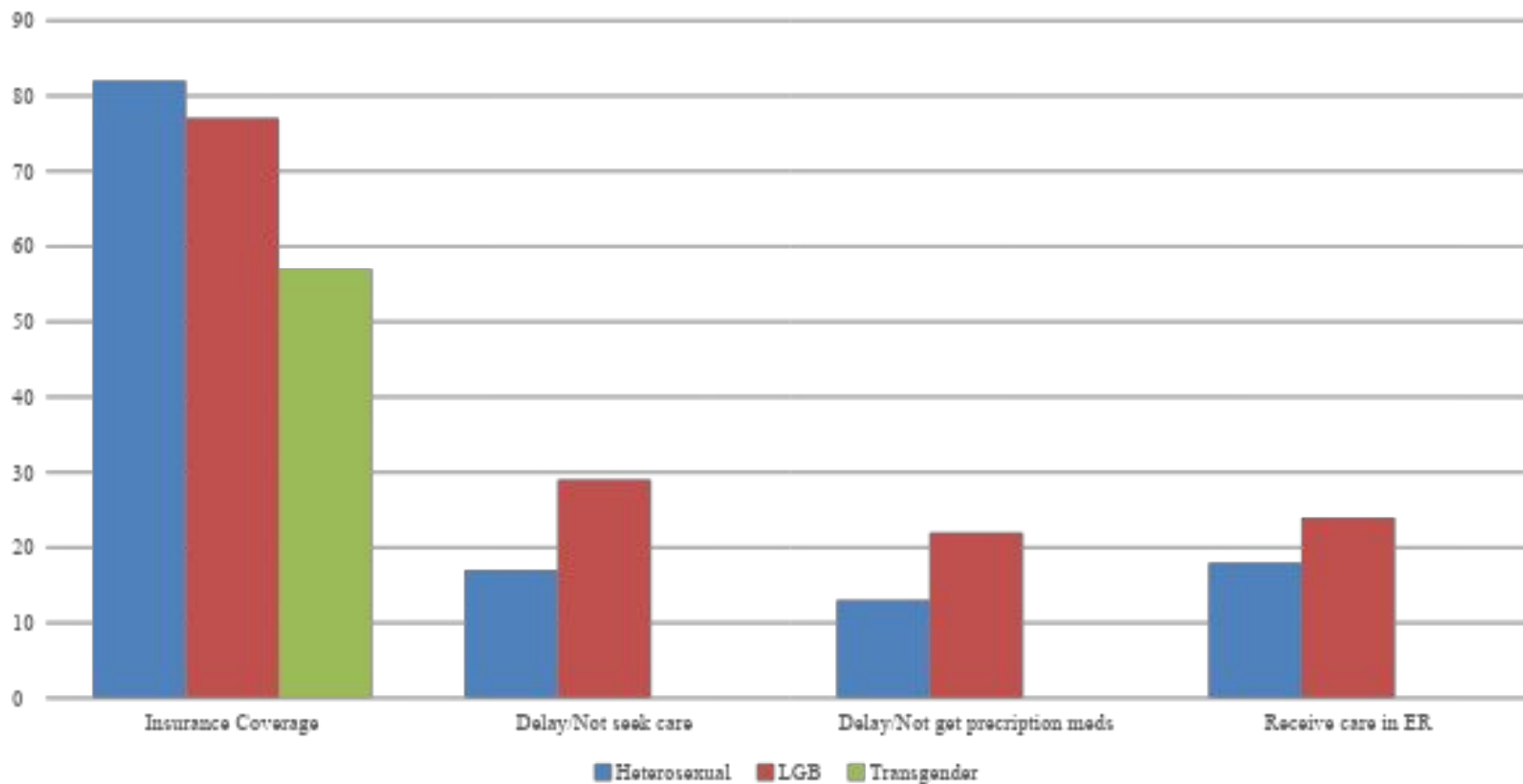
- **Exclusion:**
 - services, policies and research
 - Health limiting behaviors (drinking, smoking)
- **Greater risk of physical health concerns:**
 - Chronic conditions, disability, multimorbidity, premature mortality
 - Living and aging with HIV
- **Greater risk of mental distress**
 - Depression
 - Loneliness and isolation
- **Family and Kinship (belonging)**
 - Loneliness and isolation*
 - Social support
- **Financial security**
 - Economic challenges
- **Lack of access**
 - to services, supports
 - E.g., Housing, LTSS
- **Variations exist**
 - LGBTQ not homogenous



Worse health outcomes
Higher rates of stress
Higher health risks
e.g., Mental health,
Cancer
Higher rates of poor or
risky health behaviors:
e.g., alcohol, drugs,
smoking



Comparison - Health Disparities (2009)



Source: 2009 <https://www.americanprogress.org/issues/lgbtq-rights/reports/2009/12/21/7048/how-to-close-the-lgbt-health-disparities-gap/>



Challenges versus Opportunities



Challenges

- Bias
- Personal beliefs/attitudes
- Ignorance/lack of awareness
- Poor/lack of training
- Lack of Process

Opportunities

- Bias
- Personal beliefs/attitudes
- Ignorance/lack of awareness
- Poor/lack of training
- Lack of Process



Opportunity: Solutions Require...

- Awareness
- Acceptance
 - meaning to the person/individual
- Avoidance of ignorance
 - about their experiences; needs
- Acknowledgement
 - of identity, and rights that accompany same
- Proactivity
 - Welcoming
 - Active engagement in bridging cultural differences
- More than tolerance
 - Creating sense of belonging
 - Shared understanding of lived experience



Inclusive Environment - Hallmarks



Best practices

- **Signals, signs, symbols**
 - Affirm, inclusive, non-judgmental
 - Forms/documents, info collecting mechanisms
- **Respect for persons/relationship building**
 - Build trust
 - Prioritize comfort, confidentiality
 - Note: visual cues/body language
 - Follow their lead (preferred pronouns)/or ask respectfully
- **Communication**
 - Language mastery
 - Gender neutral pronouns
- **Culture of accountability**
 - Training
 - Community-based resources
 - Quality services/care
- *It is okay to say “sorry”!*



LGBTQ+ Older Adults: Quality Approach to Wellbeing

Hallmarks

Partnership between individual and providers of care and services
(e.g., health, social, housing, LTC/SS, etc.)

Goal – Holistic Approach: Work to know and accept the full person

Collaborative, coordinated, and accessible

Enhanced decision-making through shared information

Mutual respect and trust

(e.g., Values, preferences, cultural traditions, SES/conditions)

Information and data driven

(e.g., include questions re sexual orientation & gender identity)

Reflected in mission, vision, values, leadership, QI

(aligned to person-affirming goals for LGBTQ+)



Call to Action

Address or explore following issues:

- **Social connections**
 - Recognize challenges (paucity of familial ties? Same –age caregivers?)
 - Social isolation and impact
- **Social supports for older LGBTQ adults**
 - Affirming programs; housing options, activities,
 - Awareness and personnel training
 - Access to support networks
- **Living arrangements**
 - Aging in place? (address reluctance to seek services)
 - LTC facilities? (address harassment etc.)
- **Access to health care**
 - Quality, appropriate, affordable
- **Access economic security**
 - Employment discrimination, affordable housing,
 - Pre – 2015: Retirement funds, SS survivor benefits, pensions of partners deceased before 2015.
- **Double or multiple jeopardy**



What we can (should) do?

Recommendations:

Address discrimination,
stigma!

Comprehensive protections

- safeguard rights of LGBTQ+
- older adults

Employment, housing,
at local and state levels;
recognize partnerships and marriages transacted
before 2015 (marriage equality law)

LGBTQ+ friendly LTC
facilities

- Affordable, affirming

Cultural –sensitivity

- Awareness training and personnel
- Embed in systems (system approach)

Social isolation

- Innovative interventions and programs
- Information and connection

Engage LGBTQ+ older
adults

- Resource, partners,

Review policies,
strategies, and practices

- Inclusive?



QoL and Wellbeing for LGBTQ+ Older Adults?

Ultimate Goal: *Optimize lived experience of all older adults*

- Includes LGBTQ+ older adults
- Focus on QoL, and well-being
 - Improve: health, social welfare, LTSS
 - Affirming lived experience
- Systems approach
 - Data driven; QI
- Service delivery/care encounters
 - Important arenas for action and change
 - Increasing satisfaction in service encounters
 - Personnel as critical change agents





Take Away - Summary Points



Source: <https://www.diversitycenter.org/news/2015/9/2/lgbtq-older-adults-face-a-unique-challenge>

- LGBTQ+ older adults
 - under-served and invisible group
 - unique health, social, economic, etc. needs
- Improving wellbeing requires
 - person-centered and
 - person-affirming
- Best/evidence-based practices
 - systems based
 - tailored for LGBTQ+ older adults enhance encounters and optimize health, economic, & social wellbeing



Sources

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- SAGE (Advocacy and Services for LGBT Elders). National Resource Center on LGBT Aging <https://www.lgbtagingcenter.org/resources/resources.cfm?st=AZ>



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