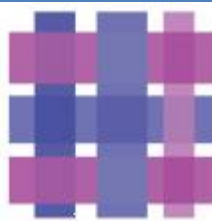


CREATING SAFE AND INCLUSIVE SERVICES FOR LGBT OLDER ADULTS

Presentation Handouts

**National
Resource
Center**



ON LGBT AGING



With funding from the U.S. Department of Health and Human Services

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HANDOUT 1. National Resource Center on LGBT Aging: Partners and Missions

The National Resource Center on LGBT Aging is a federally funded project of SAGE (Services & Advocacy for GLBT Elders), in partnership with:

- American Society on Aging
- CenterLink
- FORGE Transgender Aging Network
- GRIOT Circle
- Hunter College
- The LGBT Aging Project
- National Asian Pacific Center on Aging
- National Association of Area Agencies on Aging
- National Caucus & Center on Black Aged, Inc.
- National Council on Aging's National Institute of Senior Centers
- National Hispanic Council on Aging
- Openhouse
- PHI
- Southeast Asia Resource Action Center

CORE MISSIONS:

- Educate mainstream aging services organizations about the existence and special needs of LGBT elders
- Sensitize LGBT organizations about the existence and special needs of older adults
- Bring information to LGBT older adults and their caregivers about a variety of topics of importance to health aging

HANDOUT 2. Distrust of Health Care and Social Services by LGBT Older Adults

- LGBT older adults have been found to be five times *less* likely to seek health and human services than their heterosexual peers because of fear of harassment and discrimination.
- In a study by the American Association of Physicians for Human Rights, 67% of doctors and medical students report that LGBT patients are denied care or receive substandard care.
- About a quarter 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.

HANDOUT 3. Terminology

Lesbian: A woman whose primary physical, romantic, and or/emotional attraction is to other women. Some lesbians may prefer to identify as gay (adj.) or as gay women. Many lesbians view “homosexual” as a derogatory term. While younger women may use the terms “dyke” or “queer,” these terms are generally considered offensive to older people.

Gay: A word used to describe anyone, mainly men, who have primary physical, romantic, and/or emotional attraction to someone of the same sex, e.g., gay man, gay people. Many gay people prefer this term over “homosexual” which retains negative connotations. Lesbian can be a preferred term for a gay woman. While younger men may use the term “queer,” this term is generally considered offensive to older people.

Bisexual, Bi: An individual who is physically, romantically, and/or emotionally attracted to both men and women. “Bisexual” does not suggest having equal sexual experience with both men and women. In fact, some people who call themselves “bisexual” have not had any sexual experience at all.

Transgender: An umbrella term for people whose gender identity and/or gender expression differs from the sex they were assigned at birth. The term may include but is not limited to transsexuals and cross-dressers. Transgender people may identify as female-to-male (FTM) or male-to-female (MTF). It is important to use the descriptive term (transgender, transsexual, cross-dresser, FTM or MTF) preferred by the individual. Transgender people may or may not decide to alter their bodies hormonally and/or surgically.

Two-spirit: The term refers to LGBT people and reflects traditions among many Native American nations that accept and celebrate the diversity of human gender, spirituality and sexuality.

Family of Choice: Diverse family structures usually created by LGBT people, immigrants, and racial or ethnic minorities, that include but are not limited to life partners, close friends and other loved ones not biologically related or legally recognized by who are the source of social and caregiving support.

Handout 4. Statistics about LGBT Older Adults

“We don’t have any LGBT older adults here.”

Or, do you...?

- By best estimates, in 2014 there about 3 million gay and lesbian elders in the United States.¹
- By 2030 this number is projected to double.²
- Every state has self-identified LGBT citizens, ranging from 1.7% of the population in North Dakota, to 10% of the District of Columbia.
- According to “Outing Age,” by 2030, there will be as many as 7 million LGBT older adults in the United States.³

¹ SAGE (Services and Advocacy for GLBT Elders) *Out and Visible: The Experiences and Attitudes of Lesbian, Gay, Bisexual and Transgender Older Adults, Ages 45-75.*

<http://www.sageusa.org/resources/outandvisible.cfm>

² Ibid.

³ Grant, J. (2010). *Outing Age: Public policy issues affecting lesbian, gay, bisexual, and transgender elders.* Services & Advocacy for Gay, Lesbian, Bisexual, & Transgender Elders (SAGE) and National Gay and Lesbian Task Force Policy Institute.

HANDOUT 5. Common Assumptions Made in Health and Social Services

- Service providers assume they can identify any LGBT adult who is accessing their services.

Many providers assume that every person who comes into their organization is heterosexual because they don't "look gay." LGBT people cannot be identified based on their appearance. Even staff members who are themselves LGBT may assume that everyone else they work with is not LGBT.

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

Healthcare and social service providers do not realize that many LGBT older adults do not use their services because there is no LGBT-targeted outreach or programs.

When they do come in, they may not talk about their lives voluntarily for fear of being treated badly.

- 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.

Being LGBT is about much more than sex. Not being able to identify themselves as LGBT compromises the quality of care and service these older adults receive.

HANDOUT 6. LGBT Aging Case Studies

Paula is in her late 60's. She identifies as a white, openly bisexual woman. She was married (to a man), is now divorced, and has legally married her female partner, Sun. Paula is now showing signs of dementia and cannot be left at home unsupervised.

Marge is in her early 70's. She identifies as a Native American, two-spirit lesbian woman, but she has struggled with internalized homophobia all of her life. She was married and divorced, and constantly feared losing her three children (and her job as a teacher!) if her sexual orientation became known. Her children are now grown and have moved away. Since retirement and the death of life-long friends who knew about her orientation, Marge is becoming increasingly isolated and depressed.

Adela is in her late 70's. She identifies as a transgender, Cuban-American woman. She never underwent sex reassignment surgery, has been on hormone therapy for over 20 years, and is accepted as female without question by others. Her arthritis is making it harder to live independently. Her family of choice tries to help, but they are aging, too. She's terrified of what will happen when she needs medical attention or if she has to move into a supportive living facility.

Jordan is in his 80's. He identifies as a closeted, black, same-gender loving man. Jordan was an active member of the civil rights movement and saw openly gay black men being pushed out of leadership roles due to their sexual orientation. Jordan has kept his sexual orientation a secret from everyone—even his deceased wife and grown children. He is still active in his church and his church friends have helped him a lot since his wife died. But, since having a stroke, he needs professional in-home support. He is currently in a secret relationship with another man.

Handout 7 – Historical Timeline

(adapted from Forge-Transgender Aging Network www.forge-forward.org/tan) page 1 of 2

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1920's

*Police raid the many gay bars and restaurants in New York and other large cities. This marks the beginning of decades of police violence and harassment against LGBT people.

*The African American organized Hamilton Lodge Ball of Harlem attracts thousands of cross-dressing men and woman from all over the nation, marking the emergence of the social category “homosexual.”

1930's

*LGBT people become targets of violence and fear after new U.S. sex crime laws include homosexuality among a list of broader violent crimes, such as rape and child molestation.

*Gay men are forced to wear a pink triangle in Nazi concentration camps. This is the first use of the pink triangle as a symbol for LGBT.

1940's

*It is revealed that 10,000-15,000 LGBT people were killed in Nazi concentration camps.

*U.S. military bars gays and lesbians from serving. LGBT people currently serving are committed to military hospitals, examined by psychiatrists, and discharged.

*First known female-to-male sex change surgery is performed in Britain

1950's

* President Eisenhower calls for the dismissal of homosexuals from government service.

*American Psychiatric Association includes homosexuality in its first official list of mental disorders.

*Christine Jorgensen becomes the first widely-publicized person to undergo sex reassignment surgery.

*Immigrants are banned from U.S. if they have “psychopathic personality,” including homosexuality.

1960's

*Three days of rioting between patrons and police at the Stonewall Inn in Greenwich Village, NYC marks the unofficial beginning of the gay civil rights movement.

*National Organization for Women's president refers to the growing lesbian visibility within the organization as a "lavender menace" and seeks to exclude lesbians.

*Castro, Cuba's new leader, starts a campaign to rid Cuba of LGBT people. They are frequently imprisoned without charge or trial, and confined in forced labor camps.

Handout 7 – Historical Timeline

(adapted from Forge-Transgender Aging Network www.forge-forward.org/tan) page 2 of 2

1970's

- *The first Gay Pride marches take place in honor of Stonewall.
- *U.S. Supreme Court refuses to hear the case of a teacher fired for lesbianism, making it legal to fire teachers for being LGBT.
- *The American Psychiatric Association declares that homosexuality is not a psychiatric disorder.
- *80% of surveyed Oregon doctors say they would refuse to treat a known homosexual.

1980's

- *The first reported cases of the disease now known as AIDS are announced.
- *The National Latino/a Lesbian, Gay, Bisexual & Transgender Organization (LLEGÓ) is founded.
- *Tennis pro Martina Navratilova's female lover publicly sits in her "box" at Wimbledon and the French Open.

1990's

- *Drug therapies shown to be effective in treating HIV..
- *Congress passes Defense of Marriage Act (DOMA), forbidding federal recognition of state-approved same-sex marriages.
- * U.S. military's "Don't Ask, Don't Tell" policy becomes law. It states that intent to engage in homosexual acts is an unacceptable risk and grounds for discharge.
- *Brandon Teena, a transgender man, is raped and killed when his birth gender was revealed by police to male friends. The events are depicted in the movie *Boys Don't Cry*.

2000's

- *The National Black Justice Coalition (NBJC), a civil rights organization dedicated to empowering Black (LGBT) people, is formed.
- *Vermont is first state to offer civil unions to same-sex couples, granting them the same state rights as heterosexual couples.
- *United Kingdom allows transgender people to change their gender on their birth certificates.
- *Gene Robinson becomes the first openly gay Bishop in the Episcopal Church.
- *Two gay male teenagers are executed by the government in Iran.

2010's

- *National Resource Center on LGBT Aging launched.
- *The Repeal of "Don't Ask, Don't Tell" allows LGB members to serve in the U.S. military while being open about their sexual orientation. Transgender people are still barred from serving.
- *??? – The future is up to you!

Inclusive Services for LGBT Older Adults

Top 10 Ways to Begin Creating LGBT Safety & Inclusivity for Aging Services



National Resource Center ON LGBT AGING

At the National Resource Center on LGBT Aging, we are frequently contacted by aging service providers who are interested in working with lesbian, gay, bisexual and/or transgender (LGBT) older adults but are unsure of how to best serve and support them. Here are some suggestions for how to begin:

1. **DO** presume your agency has LGBT clients.

Aging service providers should always work from the premise that they have LGBT clients, even if no one has openly identified as LGBT.

2. **DO** ask your clients about their sexual orientations and gender identities in a safe & confidential manner.

Remember that while it is important to ask about sexual orientation and gender identity along with all of the other key components of care, LGBT people have significant histories of discrimination and stigma, which makes them far less willing to disclose these parts of their identities. **Ask the questions as you would any other factual question, but do not force anyone to answer. If a client looks uncomfortable, anxious, or refuses to answer, move on to the next question.**

3. **DO** create an opening for LGBT clients to talk about any family members of choice.

Ask open-ended questions such as, "Who do you consider family?" or "Who in your life is especially important?"

4. **DO** examine current programming to see if it can be modified for LGBT clients.

For example, when bringing in volunteer attorneys or financial advisors to help clients, be sure that they are using inclusive language and presenting information about particular issues that arise out of legal inequalities, such as different tax implications for same-sex couples, or the latest information on the tax deductibility of transgender-related surgery.

5. **DO** train staff in correct pronoun usage for transgender inclusion.

Staff should always know and use the pronoun that their clients prefer, even when the client is not within earshot.

These tips are excerpted from the SAGE/National Resource Center on LGBT Aging's publication: Inclusive Services for LGBT Older Adults: A Practical Guide to Creating Welcoming Agencies, available for download at lgbtagingcenter.org

Inclusive Services for LGBT Older Adults

Top 10 Ways to Begin Creating LGBT Safety & Inclusivity for Aging Services



National Resource Center ON LGBT AGING

6. **DO** respect gender identity when providing sex-segregated services.

Where services (including shared rooms) are segregated by sex, assignments should be made based on the client's gender identity, not his/her sex assigned at birth.

7. **DO** review your policies and definitions of "family."

Make sure that they include a client's "family of choice"—friends, partners, and other people close to the individual—as well as "family of origin"—biological family members or those related by marriage or kinship.

8. **DO** promote diversity and inclusion.

Ensure that your agency or organization's board and leadership reflect diversity and inclusion of LGBT older people by race, ethnicity, gender and socio-economic status, among other characteristics.

9. **DO** create a welcoming environment.

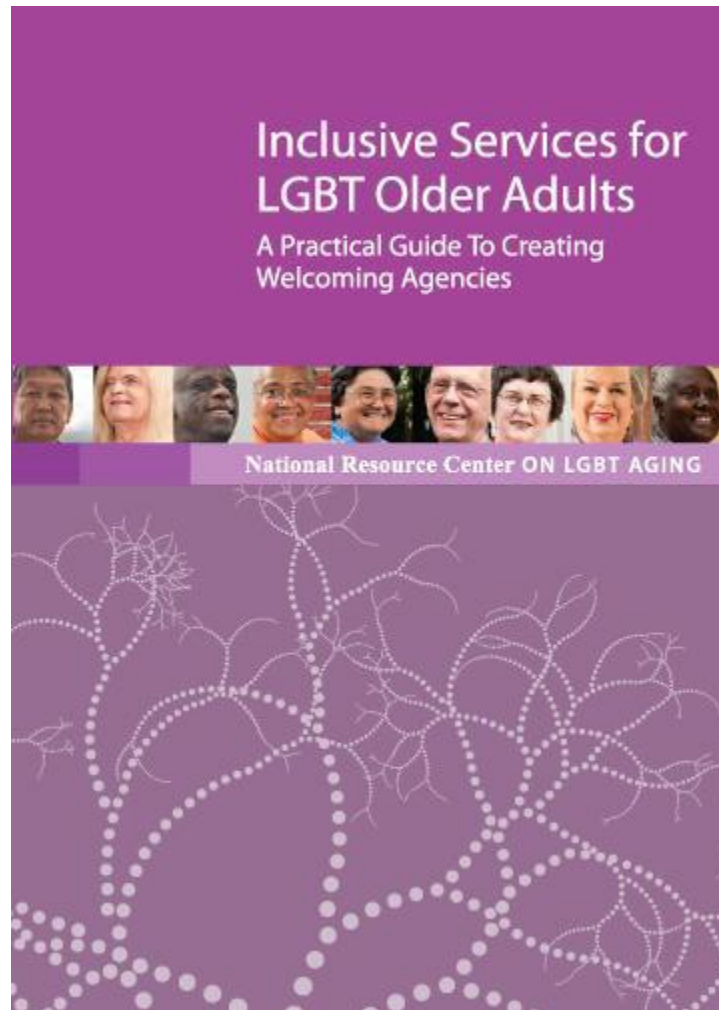
Hang rainbow flags, rainbow-colored items, or Safe Zone signs around the agency to signify LGBT solidarity & acceptance.

10. **DO** promote cultural competency training.

Training all staff on how to identify and address the needs of LGBT older adults is key to making an agency inclusive. Staff members need to participate in training programs with trusted and credible trainers who will enhance knowledge and skills about LGBT older adults and their intersecting identities of race, ethnicity, and culture. To request a training, offered free-of-charge, visit lgbtagingcenter.org.

*These tips are excerpted from the SAGE/National Resource Center on LGBT Aging's publication:
Inclusive Services for LGBT Older Adults: A Practical Guide to Creating Welcoming Agencies,
available for download at lgbtagingcenter.org*

HANDOUT 9. Learn More



Learn more by:

- Contacting Tim R. Johnston (tjohnston@sageusa.org)
- Downloading more resources at www.lgbtagingcenter.org/
- Reading more about the NRC training at www.lgbtagingcenter.org/about/training.cfm

HANDOUT 10. Evaluation

Please take a few moments to fill out this evaluation. Feel free to use the back of this page for comments.

Part I. Satisfaction ratings

For each question, please indicate your satisfaction with the presentation by circling a number from 1-4, where:

1= very dissatisfied 2= somewhat dissatisfied 3= somewhat satisfied 4= very satisfied

1. Overall, how satisfied are you with the presentation?

1 2 3 4

2. How satisfied are you with the trainers' ability to explain and help you explore topics?

1 2 3 4

3. How satisfied are you with the amount of time spent on this presentation?

1 2 3 4

Part II. Open-ended questions

4. What is one thing that you have learned from this presentation?

5. What is one thing you could do to apply what you've learned?

6. What is one thing you would suggest to improve this presentation?

THANK YOU!