Facing statistical realities: what is the health status of LGBT elders?

By Karen Fredriksen-Goldsen

The first national project funded by the National Institutes of Health and the National Institute on Aging to address the health and well-being of LGBT older adults and caregivers is “Caring and Aging with Pride.” Across the nation, 2,560 LGBT adults ranging in age from 50 to 95 years old participated in the study.

Many think LGBT elders will not participate in this type of research, but the fact is they want to take part and create a lasting legacy.

Among transgender older adults, 22% need to see a doctor but can’t because it’s cost prohibitive. More than three-quarters of LGBT older adults report their general health as good, however nearly one-half have a disability and nearly one-third report depression. As important risk factors impacting health, two-thirds experience verbal harassment and 40% report physical violence. But LGBT elders are resilient, displaying protective factors that support good health. The majority engage in wellness activities (91%) and feel positive about belonging to LGBT communities (88%).

Language and LGBT housing: making models that fit all communities

By Joy Silver

What language will baby boomers use to describe aging, and how will they accept its challenges? RainbowVision Santa Fe, a community offering active adult, independent, assisted, transitional and respite living services, has been engaged in re-examining and exploring language that adequately describes stages of aging, and the experience of their member residents, since 2004.

RainbowVision Santa Fe opened in June 2006. It was built to offer LGBTQI (Lesbian, Gay, Bisexual, Transgender, Queer and Intersexed) people an opportunity to live in a community, along with straight allies, in what is now called a Community of Living Diversity. This title was identified and developed by former resident John Rowley, a retired Los Alamos, N.M., scientist, one of the A’s (straight allies) in LGBTQI&A. It emerged in a resident member’s promotional and marketing workshop luncheon. What was surprising was how many residents experienced and defined the word diversity.

Definitions of Diversity

Members defined diversity to include professions, former professions, walks of life, age, place-of-origin, culture, family group identification, religion and philosophy.

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A timetable round up of recent LGBT research

By Robert Espinoza

In February 2010, when the U.S. Department of Health and Human Services (HHS) announced the country’s first federal grant to establish the National Resource Center on LGBT Aging, it signaled an interest in better understanding LGBT older adults, as well as the policies, programs and services meant to support them.

The center’s researchers and policy thinkers have led efforts to deepen the literature on LGBT older adults through the following policy reports, and national and regional studies:

• March 2010. SAGE (Services and Advocacy for LGBT Elders) and the Movement Advancement Project released Improving the Lives of LGBT Older Adults, a policy report focused on the effects of social stigma; a reliance on “families of choice” (kin) that is often excluded in aging policies and programs; and widespread, unequal treatment under the law. The report offers policy recommendations and represents the first policy report written in collaboration with organizations working in both the LGBT and aging fields.

• December 2010. Researchers from the University of Minnesota focused on aging providers in its nationwide survey of Area Agencies on Aging, Ready to Serve? The Aging Network and Older LGBT and T People. Among other findings it showed that while four in five agencies were willing to offer LGBT aging training, very few offered LGBT-specific programs or outreach. The study was conducted in partnership with the Metropolitan Area Agency on Aging, the National Association of Area Agencies on Aging (n4a), the National Gay and Lesbian Task Force, SAGE and PFLAG Foundation.

• February 2011. The National Gay and Lesbian Task Force and the National Center for Transgender Equality (NCTE) released the first national study of nearly 6,500 transgender and gender non-conforming people, Injustice at Every Turn: A Report of the National Transgender Discrimination Survey. The study found pervasive discrimination against transgender people in housing, healthcare, employment and housing—the worst outcomes were among transgender people of color. Because discrimination can have a cumulative effect on people as they age, this report lays the groundwork for further research on transgender older adults.

• March 2011. Researchers at the UCLA Center for Health Policy Research published a policy brief on the health issues facing lesbian, gay and bisexual adults, The Health of Aging Lesbian, Gay and Bisexual Adults in California, which showed that in comparison to their heterosexual counterparts, LGBT older men and women experience higher rates of chronic physical and mental health conditions, including heart disease, hypertension, diabetes, physical disability and psychological distress symptoms.

In the same month, the Institute of Medicine issued The Health of Lesbian, Gay, Bisexual and Transgender People: Building a Foundation for Better Understanding.
Residents were terrified that if they were "outed" as LGBTQ, they would be shunned or even asked to leave.

Especially, some said—in direct contradiction to their stated belief that elders were not sexual—a gay elder might try to seduce a straight elder if placed in a shared room. This notion of gay elders as predatory was an oft-stated concern. They seemed to believe that LGBTQ elders were sexually volatile and promiscuous, and might try to seduce a straight elder if placed in a shared room—"whether they were men or women, and between married heterosexuals residing a room. This notion of same-sex sex did not often take place, I was told. If one elder's desires and diverse identities. •

The promise is that the erotic world of LGBTQ elders, elders living and surviving with HIV and AIDS, and sexual orientation and gender identity, forbid taking sexual orientation and gender identity discrimination can now file complaints directly with HUD. A note of caution: these protections do not prevent discrimination in housing facilities that do not receive Medicaid or Medicare. •

The Hud guidelines—using laws already in place—clarify a number of protections. HUD staff members must "treat gender identity discrimination can now fill complaints directly with HUD. A note of caution: these protections do not prevent discrimination in housing facilities that do not receive Medicaid or Medicare. •

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