

# The invisible diversity in our community



By Charles Hoy-Ellis

I have heard well-meaning people say something to the effect of, “Well, I don’t know anyone who is lesbian, gay, bisexual, and/or transgender (LGBT).” I smile just a bit and say in my head, “More likely you don’t know any LGBT people who trust you enough to share that aspect of their lives with you.”

So what? Who cares?

In an attempt to make themselves a less visible target for discrimination and victimization, LGBT people may attempt to conceal their sexual orientation and/or gender identity.

Studies have shown that this strategy may be effective in the short-term, but if continued over long periods can become a source of chronic stress, linked to higher rates of depression and chronic physical health conditions.

A study conducted in 2015 concluded that hiding an important part of who one is may also contribute to social isolation, loneliness, and depression – important risk factors for the early onset of age-related diseases and shorter life expectancy.

An 88-year-old gay man, one of the 2,560 participants in the first of its kind, federally-funded Caring and Aging with Pride (CAP) national research study of LGBT adults aged 50 and older described how his son had indirectly inquired about his sexual orientation once, long ago. He went on to describe how no one, not even those closest to him knew that he was gay – but would likely figure it out after he died.

As a member of the CAP research team, I was saddened but not entirely surprised to read those words.

I wrote my first research paper on homosexuality nearly 20 years ago. I thought that as a gay man I already knew all about the topic and would get an easy “A.” I did get the A but it was not easy, as the scope of my ignorance related to what I thought I knew was breathtaking.

I have continued studying the health and mental health of LGBT midlife and older adults since then.

In my graduate social work program I learned that compared to straight people, LGBT adolescents and adults are at significantly greater risk for depression, suicidality, and substance abuse issues. These poor mental health outcomes are the result of living in a culture that highly stigmatizes LGBT people.

In broad terms, stigma is the collective, typically negative stereotypes, attitudes, and beliefs associated with particular social identity groups. When internalized, we apply those stereotypes to others and ourselves to our own detriment.

Internalized stigma among older LGBT adults has been with increased risk for depression, and disability and poor general health.

As a mental health provider in my advanced practicum, and subsequent five years of employment at Seattle Counseling Service for Sexual Minorities, I began to see firsthand that the LGBT community stigmatizes other minority groups in many of the same ways – racism, sexism, ableism to name a few.

Ageism – treating people differently based on negative stereotypes about older adults – is a stigma that is rampant in the LGBT community.

Decades of research have shown that community involvement is an important protective factor in mental health. Imagine that the community you finally found as an adolescent or younger adult, the one that finally gave

you a deep sense of belonging, now rejects you just because of your age.

On a positive note, a study conducted in 2011 found that LGBT older adults are incredibly resilient; most are not depressed and the majority report fairly good physical health.

Transgender Americans have among the highest proportional rates of military service of all groups. Surprisingly we found that older transgender adults who had previously served in the U.S. military were less likely to be depressed than those who had not. While the reasons for this remain unclear, we do know that social engagement and a sense of belonging are incredibly important to our health and wellbeing.

The good news is that there is a program located here in Salt Lake City that provides programming and opportunities that supports the social, emotional, physical, mental, and spiritual needs of LGBT Utahns aged 50 and older: SAGE Utah (Services & Advocacy for LGBT Elders), a program of the Utah Pride Center.

We can work to promote equity by learning about, recognizing, and addressing the barriers that prevent LGBT older adults from fully and visibly participating in our otherwise vibrant and diverse community.

I’d like to leave you with the thoughts of another CAP participant, an 81-year old lesbian. She wrote about feeling more joyful than she ever had living in an LGBT affirming retirement community, finally coming out of the closet at her age. While she expressed some sorrow about not having “a cuddly friend,” she also disclosed that she was in love with an 85-year-old pianist.

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