



Lesbian, Gay, Bisexual, and Transgender Older Persons

Experts estimate that between 1.75 and 3.50 million Americans ages 60 and over are lesbian, gay, bisexual or transgender. Their numbers should increase as the older population grows in the next 30 years. A major challenge in meeting their needs is the limited research on older persons who are gay or lesbian. Even fewer studies have examined the experiences of bisexual and transgender elders. Existing research suggests that older lesbian, gay, bisexual, and transgender adults are satisfied with their lives. The concerns they express about aging are often the same that other older people typically report. Research highlights several issues that are particularly important for LGBT elders.

Stigma

Older LGBT persons may face discrimination based on their age and sexual orientation. Consequently, they may not feel comfortable either in organizations serving older people or in LGBT community organizations, and thus may not receive useful services from these groups. The good news is that decades of experience dealing with discrimination based on sexual orientation appear to help older LGBT persons cope with age discrimination.

Research also suggests that this resilience may depend on the older person's integration into the LGBT community, which varies widely. For example, older LGBT people differ in the extent to which they have revealed their sexual orientation to family, friends, and health care and social service providers. Moreover, generational differences occur among older LGBT individuals, based largely on society's changing attitudes toward homosexuality. Older LGBT persons may be less likely to identify as gay or lesbian or to participate in LGBT community organizations.

Family and Social Support

Most studies indicate that older LGBT people report high levels of satisfaction with their social support networks. While many LGBT older adults are close to their families, some have less support from families than other older people. This may be the result of the tensions families experience when a LGBT person reveals his sexual orientation. Instead, many older LGBT people rely primarily on partners and close friends for social support. Unfortunately, society has not always acknowledged the importance of these "chosen families."

For example, an older lesbian whose partner dies may be unable to find a bereavement support group where she can openly grieve and discuss her loss. A seriously ill gay man may find that his close friends are excluded from participating in decisions about his care. Non-family caregivers may not receive the support and assistance that family caregivers sometimes do. AoA's National Family Caregiver Support Program, signed into law in November 2000, provides assistance to anyone caring for a frail elder, including unrelated individuals.

Older persons who are gay or lesbian are more likely to live alone than are older people overall. They may need special attention because older adults who live alone are more likely to live in poverty, have poor nutrition, feel depressed, and eventually move into an institution.

Health

AoA is working with its sister agencies in the Department of Health and Human Services to expand knowledge about health risks that may disproportionately affect LGBT Americans. Older LGBT persons express concerns about access to high-quality health care. Some are reluctant to reveal their sexual orientation to health care providers because of fears they will face discrimination or concerns about confidentiality. In addition, some health care providers make assumptions about the health risks LGBT people face and may provide inadequate care. It should also be noted that most public and private health insurance programs do not recognize same-sex partners for receiving family coverage.



LGBT persons may also be at higher risk for some health problems. Some research indicates lesbians are more likely than heterosexual women to smoke, be overweight, or abuse alcohol. Lower lifetime rates of pregnancy may also affect lesbians' long-term health. The major health concern associated with gay men continues to be HIV/AIDS. The number of older people of all sexual orientations with HIV/AIDS may increase in the future, in part because people with the disease are living longer as a result of improved treatment.

Educating older LGBT people about advance health care directives is essential if they wish their partners, friends, or other non-family members to participate in health care decisions on their behalf.

Housing

Like other older adults, older LGBT persons are interested in housing options, such as continuing-care retirement communities and assisted-living facilities. However, they sometimes encounter homophobic attitudes among fellow residents and some facilities may exclude them entirely. Many older LGBT people express interest in gay-oriented senior housing, but few such facilities exist.

LGBT older persons who live in nursing homes may be especially vulnerable if the healthcare staff is not sensitive to their needs. For example, nursing homes may not allow LGBT residents to share a room with their partner, or some LGBT persons may receive substandard care if they are open about their sexual orientation.

Income and Employment

Unmarried partners are currently ineligible for spousal or survivor's benefits through federal programs like Social Security and most private pension plans. Property inheritance by an unmarried partner requires careful estate planning. Thus, the disability or death of a partner may adversely affect the surviving partner's economic security. In addition, though some localities have laws prohibiting employment discrimination based on sexual orientation, many older LGBT workers lack this legal protection.

In many ways, the aging experience for older lesbian, gay, bisexual and transgender people is much the same as it is for their heterosexual peers. Continuing efforts to improve the quality of life for older generations should enhance the well being of older LGBT people. Extraordinary effort may be needed to ensure this population is cognizant that benefits exist. Therefore, it is vitally important to learn more about the unique challenges of LGBT older people and develop specific policy and program solutions to support them.

Working in close partnership with its sister agencies in the U.S. Department of Health and Human Services, the AoA is the official Federal agency dedicated to policy development, planning and the delivery of supportive home and community-based services to older persons and their caregivers. The AoA works through the national aging network of 57 State Units on Aging, 655 Area Agencies on Aging, 225 Tribal and Native organizations representing 300 American Indian and Alaska Native Tribal organizations, and two organizations serving Native Hawaiians, plus thousands of service providers, adult care centers, caregivers, and volunteers. For more information about the AoA, please contact:

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