

EXECUTIVE SUMMARY

Aging Service Experiences, Concerns & Needs: A Comparison of Heterosexual and Sexual Minority Older Adults

*A Study of The Massachusetts LGBT Aging Needs Assessment (M'LANA) Coalitionⁱ
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Research suggests that sexual minorities, including those who identify as lesbian, gay, and bisexual, face unique challenges in achieving a happy, healthy older age. For example, sexual minorities may have reduced access to informal care resources and may encounter barriers in accessing formal aging service care. While the research base is growing, very few studies have compared the experiences of sexual minority older adults and heterosexuals. The goal of this project is to contribute to closing this gap by providing information about the unique care and service needs of sexual minority older adults. We hope the information is useful for prioritizing resources, developing services, and evaluating programs that serve diverse older adults.

LGBT and mainstream meal sites

Almost 300 older adults from the greater Boston area participated in the project by completing surveys at 12 congregate meal sites. Forty-four percent of respondents completed surveys at meal sites formally designated for lesbian, gay, bisexual, and transgender (LGBT) older adults and allies, and 56% completed surveys at sites that served a general population of elders (“mainstream sites”). While most attendees of LGBT sites identified as lesbian, gay, or bisexual,ⁱⁱ 5% identified as straight or heterosexual. The opposite was true of mainstream sites, where 96% identified as heterosexual. LGBT meal sites were younger than mainstream sites, and drew a greater proportion of men (50%) than did mainstream sites (19%). Both types of sites were predominantly white and non-Hispanic.

Key Findings from The Meal Site Study

- Compared to heterosexuals, more sexual minority older adults were able to rely on friends and non-familial social networks for support and fewer were able to rely on children and family.
- Sexual minority older adults were more likely than heterosexuals to experience feelings of loneliness, such as feeling left out and lacking companionship, despite having a similar number of people to talk to during the week and greater access to social connection via the internet.
- Large proportions of the sexual minority older adults surveyed reported that they were open about their sexual orientation with family, friends, and health and service providers.
- Sexual minority older adults were less likely than heterosexuals to use formal aging services such as volunteer helpers, even when controlling for demographic differences.ⁱⁱⁱ
- Meal sites are an important tool for combating social isolation for people of all sexual orientations; at meal sites, older adults say they feel welcome, can be who they are, and connect with community.

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Demographic differences between sexual minority and heterosexual older adults

A majority of meals site attendees did not engage in either full or part-time work. Lesbian and bisexual women were the group most likely to be working, with 46% engaged in either full or part time employment. Sexual minorities had high levels of educational attainment; 90% attended at least some college and 45% attended graduate or professional school. In comparison, just over 50% of heterosexuals had at least some college education. Sexual minorities also earned more, with 46% reporting an annual household income of \$35,000 or higher, compared to 15% of heterosexuals. However, 36% of LGBs had household incomes of \$25,000 or less; 15% earned less than \$11,000 and thus met federal guidelines for poverty.

Social support: friends and children

Sexual minority older adults were significantly less likely to have children who were living (31%), compared to heterosexuals (70%). By and large, heterosexuals received support from their children to a much greater degree than sexual

minority older adults: 11% of heterosexuals lived with their children, 47% spent Thanksgiving with their children, and 52% indicated that they could call their children for help. While some sexual minority older adults also received social support from their children, many more relied on friendships and non-familial networks: 33% spent Thanksgiving with friends, 7% lived with friends, and 71% said they could call friends if they needed help. In fact, sexual minorities had over 4 times the odds of naming friends as people who could be called upon for help.ⁱⁱⁱ

Q: What do you like most about the experience of getting older as an LGBT person?

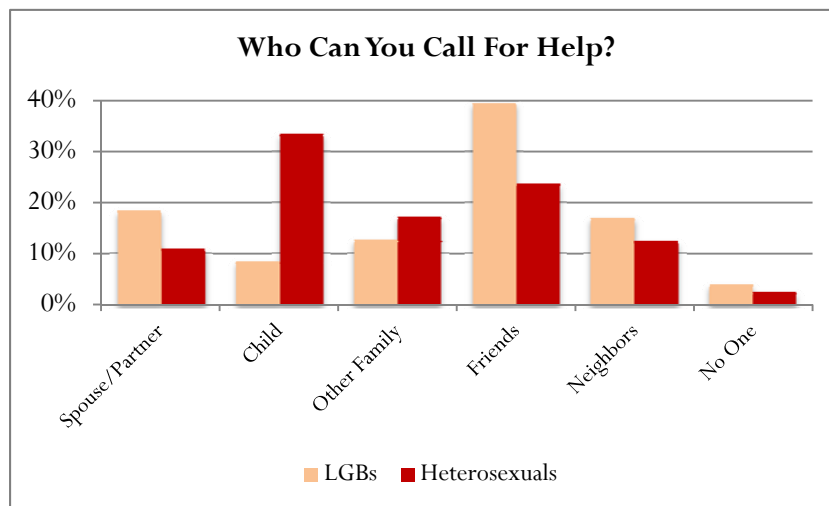
A: My marvelously supportive lesbians friends in my age cohort! My lesbian friends live the meaning of friendship!

Sexual minority and heterosexual older adults had social support networks of roughly the same size; older adults from both groups reported about 7 people that they spoke with at least once per week.

Internet usage was significantly more common amongst LGB older adults, with 76% using the internet at least several times per week compared with 27% of heterosexuals.

Despite this, sexual minorities

were at increased risk for social isolation. More gay and bisexual men lived alone and 80% of gay and bisexual men were single, widowed, or divorced.



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Sexual minority older adults were more likely than heterosexuals to experience feelings of loneliness. LGBs had more than twice the odds of feeling that they lacked companionship at least some of the time and more than 3 times the odds of feeling left out.ⁱⁱⁱ

High levels of “outness”

The vast majority of sexual minorities who participated in the survey reported being open or “out” about their sexual orientation with their family, friends and care providers. More than 80% of LGBs reported being out to most or all of their friends, siblings, and children. 85% were out to most or all of their aging service providers and 88% were out to most or all of their healthcare providers.

Aging services utilization

Most sexual minority older adults indicated that they were not concerned about being out to medical or aging service providers. A small percentage of sexual minorities had ever decided against getting the help they needed due to concerns about being LGBT (16%), or had decided against receiving services from a place that serves older adults because of concern about being LGBT (13%).

Despite saying that they were unconcerned about being out to aging service providers, sexual minorities seemed to encounter barriers in

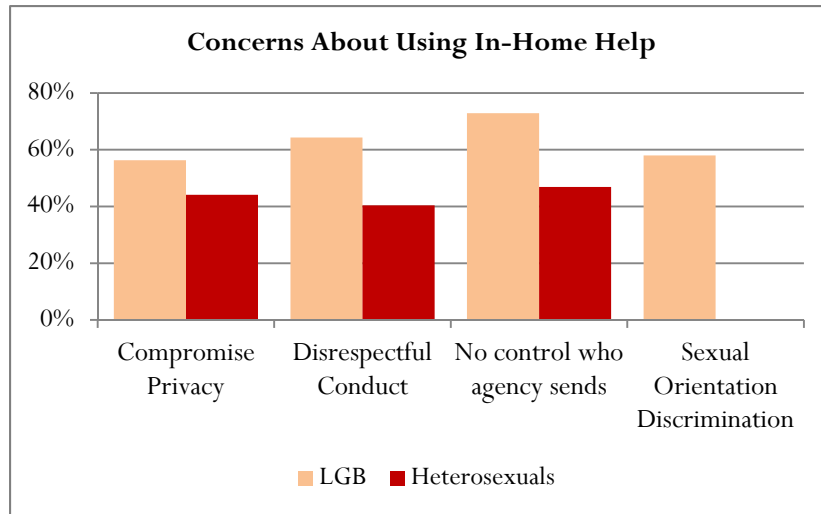
accessing aging services for older adults. Only 61% of LGBs 70 and older had any experience using a senior center. When controlling for demographics (including age),ⁱⁱ heterosexuals had nearly 5 times the odds of using a

volunteer helper and more than 5.5 times the odds of using protective services.

Sexual minority older adults did express concerns about sexual orientation discrimination when they thought about using in-home aging services (such as help with housekeeping or personal care). Almost 60% were at least somewhat concerned about

discrimination based on sexual orientation by such providers. Further, compared to heterosexuals, LGBs had 2.5 times the odds of being concerned about disrespectful conduct from in-home aids and more than 3.5 times the odds of being concerned about

having no control over who the agency would send.ⁱⁱⁱ



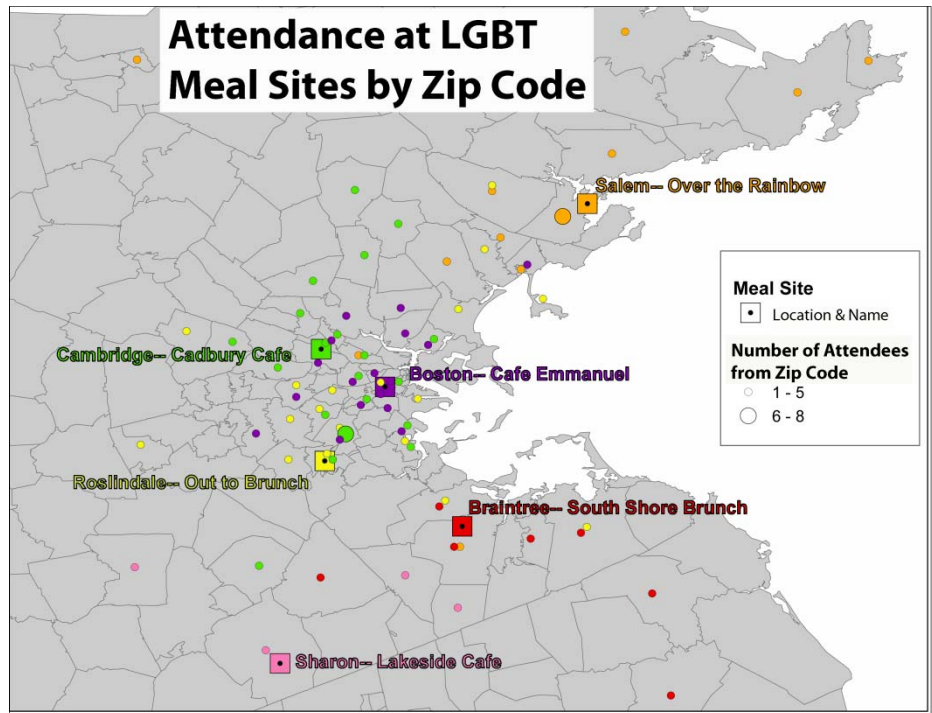
Q: What are your greatest concerns about getting older as an LGBT person?

A: That there will be someone to take care of me.

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Importance of meal sites

Community meal sites play an important role in combating isolation amongst older adults of all sexual orientations. All respondents agreed that meal sites were places they came to be with friends, connect with their community, and feel welcome. Remarkably, over half of the sexual minority respondents indicated that the cafés were one of the few places where they socialized with others. This finding is particularly striking given that all but one of the LGBT cafés meets only once per month. Likely due to the enormous social value of the LGBT cafés and their relative scarcity compared to mainstream cafés, attendees of LGBT meal sites traveled considerably longer distances to get to the



cafés. While mainstream sites generally drew attendees from within the same zip code or an adjacent zip code, LGBT meal sites drew attendees from across the greater Boston metropolitan area.

Resiliency and camaraderie

Many respondents also noted resiliency in their communities, and many were aging with pride. Sexual minority participants reported feeling more comfortable and confident with themselves as they aged. Some aptly noted feeling pride in being able to set an example for younger generations. Many celebrated the camaraderie of their friendships and the support of their peers.

ⁱ Contact Aimee Van Wagenen at avanwagenen@fenwayhealth.org or 617-927-6348 for more information or to request a PDF of the full report. The study was funded in part by the Lesbian Health Fund of the Gay and Lesbian Medical Association and the National Institute of Child Health and Human Development of the National Institutes of Health.

ⁱⁱ Three individuals (2% of respondents) at LGBT sites reported that they were transgender. The sample size of transgender individuals was too small to analyze and thus study findings refer to sexual minorities or LGBs rather than LGBTs.

ⁱⁱⁱ For this analysis, we controlled for the demographic differences of age, gender, income, and education.