

# Webinar Series on Older LGBTQ2 People

## Housing and Home Care: An Older LGBTQ2 Person's Perspective



# Webinar Outline

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- Introductions
- Review of the importance of developing older LGBTQ2 housing initiatives
- Panelist 1: Dr. John Ecker
- Panelist 2: Dr. Andrea Daley
- Question and answer period

# Introductions

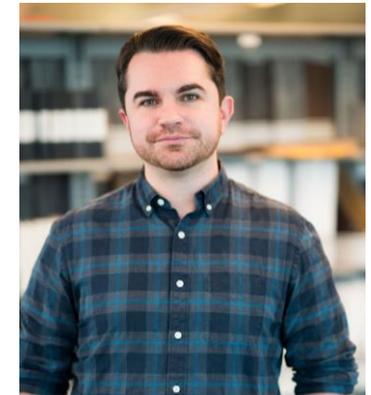
Moderator: Mr. Kelly Kent

- Director of National Housing Initiative, SAGE



Panelist: Dr. John Ecker

- Affiliate Researcher, Centre for Community and Educational Services, University of Ottawa
- Director of Research and Evaluation, Canadian Observatory on Homelessness



Panelist: Dr. Andrea Daley

- Director and Associate Professor, School of Social Work, York University



**SAGE's National LGBT Elder  
Housing Initiative  
March 14, 2018**

**Presented by  
Kelly W. Kent  
Director**

**Services & Advocacy for GLBT Elders** (SAGE) is the United State's largest and oldest organization dedicated to improving the lives of lesbian, gay, bisexual and transgender (LGBT) older adults. Our mission is to lead in addressing issues related to lesbian, gay, bisexual and transgender (LGBT) aging.

*Homes should be our havens – shelters safe enough to be ourselves as LGBT people. Especially as we age.*

# Challenges

Economic  
Insecurity

Housing  
Discrimination

Lack of Legal  
Protections

Racial &  
Gender  
Disparities

## LGBT Older Adults are....

- Twice as likely to be single
- 3-4 times less likely to have children
- Frequently estranged from families of origin
- Many lack traditional caregiver support
- Greater numbers of health disparities and overall have higher economic needs.



# LGBT Specific Implications

2014 report by the Equal Rights Center found that 48% of older same sex couples applying for senior housing were subjected to discrimination.

<http://www.lgbtagingcenter.org/resources/pdfs/lgbtSeniorHousingreportFINAL.pdf>

In August 2016, The Williams Institute released a report that found, **“Same-sex couples also have a higher rate of poverty compared to heterosexual married couples. Lesbian older couples in particular, are 10-20% less likely than different-sex couples to have retirement income or interest and dividend income,”**

<http://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-Aging-A-Review.pdf>

# National LGBT Elder Housing Initiative

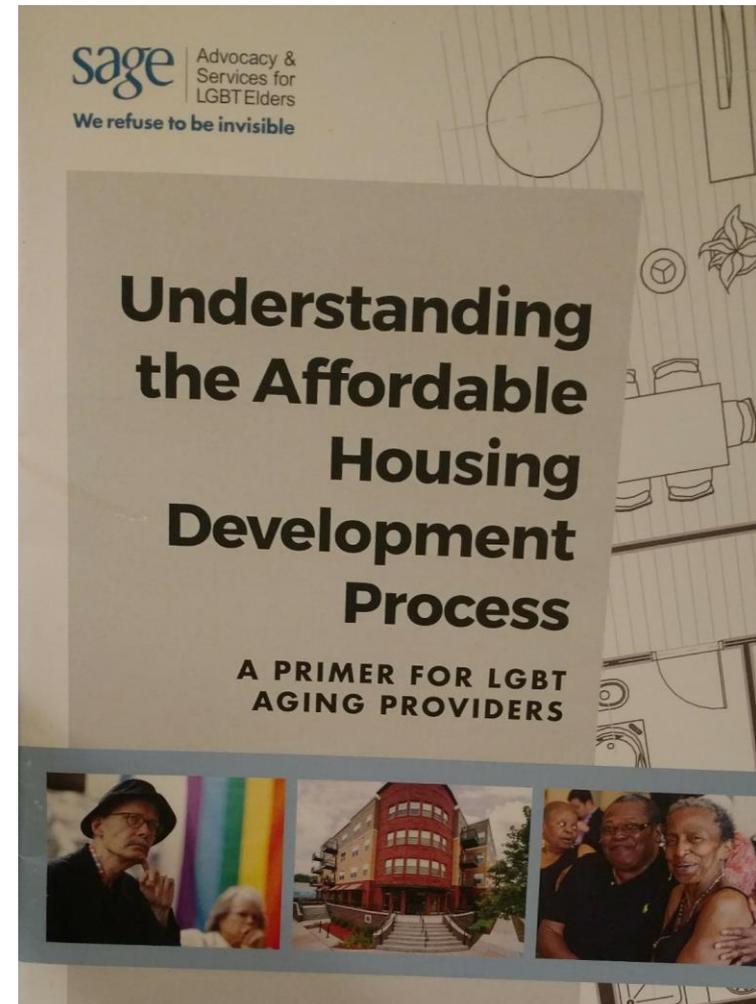


- Building Housing
- Training Providers
- Changing Policy
- Educating Consumers
- Expanding Services

[www.sageusa.org/lgbthousing.org](http://www.sageusa.org/lgbthousing.org)

# Key Deliverables in Year 1

- Capacity building narrative from experienced developers/project sponsors
- Capacity building resources for providers and consumers
- Recorded webinars on Development, Aging in Place and Home Modification
- Developer Resource Directory
- Further information:  
<http://www.sageusa.org/lgbthousing/>

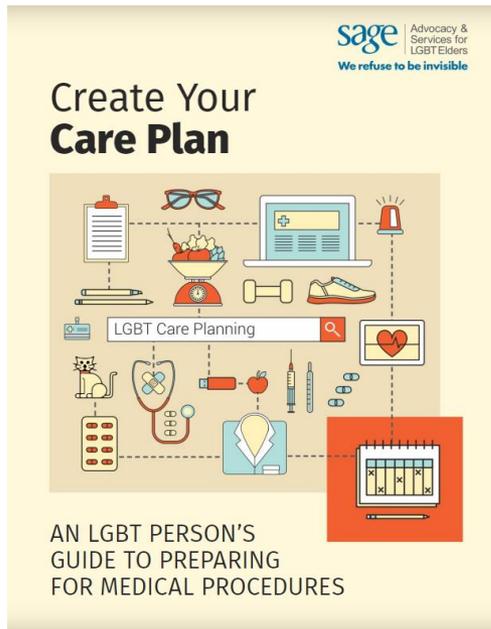


# Training of Mainstream Housing Providers

- SAGECare provides LGBT cultural competency training to service providers nationwide
- SAGECare provides the added benefit that participating organizations may receive a national credential highlighting the number of staff trained.
- “Creating Inclusive Communities for LGBT Older Adults”
- “Welcome Home: LGBT Older Adults & Housing”
- “LGBT Older Adults: Compliance with HUD Equal Access Rule”

**More information available at: <http://sageusa.care/>**

# Availability



- Downloadable at [www.lgbtagingcenter.org/careplanning](http://www.lgbtagingcenter.org/careplanning)
- English Workbook
- Spanish Workbook
- Worksheets

# Questions & Follow Up

**Kelly Kent**  
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sage

Advocacy &  
Services for  
LGBT Elders

**We refuse to be invisible**

## Webinar Series on Older LGBTQ2 People

### Housing and Home Care: An Older LGBTQ2 Person's Perspective

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Wednesday, March 14th, 2018  
12:00pm - 1:00pm EDT



Presentations By:



**Dr. Andrea Daley**  
Director and Associate Professor,  
School of Social Work, York University



**Dr. John Ecker**  
Affiliate Researcher, Centre for Community and Educational  
Services, University of Ottawa  
Director of Research and Evaluation, Canadian Observatory  
on Homelessness



Moderated by **Mr. Kelly Kent**  
Director of National Housing Initiative, SAGE

**Register Here:**

<https://register.gotowebinar.com/register/7776960481373813763>



# Panelist 1: Dr. John Ecker

# LGBTQ2S Older Adult Homelessness

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DR. JOHN ECKER

MARCH 14, 2018

# Background on the Topic

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**What do we know about LGBTQ2S adults who experience homelessness?**

## Prevalence Rates

- Youth – 20 to 40% of youth who experience homelessness identify as LGBTQ2S
- Adults – too early to tell
- Toronto – 5 to 14%
- Winnipeg – 8%
- San Francisco – 30%

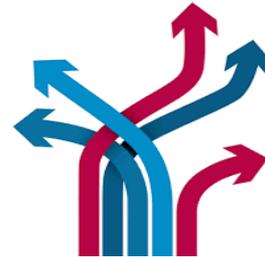


# Background on the Topic

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## Entries into Homelessness

- Potential links
  - Family rejection
  - Mental health and substance use challenges
  - Income disparities due to homophobia, transphobia, biphobia, racism
  - Housing discrimination due to homophobia, transphobia, biphobia, racism
  - Social isolation
  - Ottawa Senior Pride Network Housing Survey (2015)
    - LGBTQ2S seniors more likely to be in a lower income bracket (35% earning less than \$40k a year)



# Background on the Topic

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## Service Use Experiences

- LGBTQ2 adults who have experienced homelessness tend to be higher utilizers of health and social services than non-LGBTQ2S adults who have experienced homelessness
- Positive service use experience were characterized by staff who identified as LGBTQ2S and/or who were knowledgeable on issues relevant to the LGBTQ2S community
  - Particularly important for transgender and gender nonconforming individuals
- Negative service use experiences include feelings of stigma
  - Resulted in some individuals avoiding services
- LGBTQ2S youth experience in homeless serving sector
  - Homophobia, transphobia, and biphobia from other residents and some staff members



# Background on the Topic

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## Exiting out of Homelessness

- No research
- Landlord experiences
  - LGB couples have greater trouble setting up apartment viewings than non-LGB couples



# LGBTQ2S Adult Homelessness

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- Clearly a need for this research!
- Independent research project in 2015, Ottawa
- LGBTQ2S Adult Housing Needs Assessment in 2017
  - Project co-initiated by Alice Kubicek, Executive Director, Daybreak Non Profit Housing, Ottawa
- Project funded through the Ontario Trillium Foundation



# LGBTQ2S Adult Housing Needs Assessment

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Three separate sources of data were collected:

1 – **Individual interviews with 22 adults** (18 years of age and older) in Ottawa who identified as LGBTQ2S and who had experienced at least one episode of homelessness as an adult

2 – **Four focus groups** with staff members from agencies in Ottawa. The agencies represented different types of service models (emergency shelter, drop-in, supportive housing, scattered-site housing)

3 – **Online survey with 47 staff members** from a wide range of agencies in Ottawa (emergency shelters, drop-in agencies, supportive housing agencies, scattered-site supported housing agencies, and community health centres)

# LGBTQ2S Adult Housing Needs Assessment

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## Individual Interviews



## Who were the participants?

- 11 identified as **cisgender male**, 5 identified as **cisgender female**, 3 identified as **transgender female**, 1 identified as **transgender male**, 1 participant identified as **Two-Spirit**, and 1 identified as **agender or bi-gender**
- 11 identified as **bisexual**, 6 identified as **gay**, 2 identified as **lesbian**, 1 identified as **Two-Spirit**, 1 identified as **heterosexual**, and 1 identified on the spectrum between **pansexual and asexual**

# LGBTQ2S Adult Housing Needs Assessment

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## Individual Interviews



### Who were the participants?

- 9 currently living in an **emergency shelter**, 6 living in **private market apartment**, 2 **couch surfing**, 2 **living on the street**, 1 **staying with family**, 1 in **detox**, and 1 in a **motel**
- Ranged in age from **19** to **68**. Average age was **39**
- 13 identified as **white**, 5 identified as **Indigenous**, 2 identified as **mixed race**, 2 identified as **Black**
- 8 had **worked** either **part-time** or **full-time** within past 12 months

# LGBTQ2S Adult Housing Needs Assessment

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## Individual Interviews

### Youth Homelessness

- **Half** of participants had an experience of homelessness **prior to the age of 21**



### Homeless entries

- **Financial insecurity, substance use, mental health challenges, and relationship breakdowns**
- **13** participants discussed the impact of their **LGBTQ2S identity on their entry into homelessness**
  - **Landlord discrimination**
  - **Harassment from other tenants**
  - **Struggles with gender identity and/or sexual orientation**

# LGBTQ2S Adult Housing Needs Assessment

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*I was living with homophobia and AIDS phobia from my neighbours. And for about a year I was trying to get that taken care of through the landlord and with the police, and at the end of it all nothing was happening, nothing was changing and I was going absolutely bananas, and I was in a huge depression.*

- Gay cisgender male participant

*Some landlords don't like the gay renters. They think, oh because you're gay, they think they can do whatever they want and get away with it...Some of them are not so open [towards] gays. Some of them call me names, think they're big shots.*

- Gay cisgender male participant

# LGBTQ2S Adult Housing Needs Assessment

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## Service Use & Housing Experiences

### Staff

- Participants generally felt **supported** by staff members
- Some did recount interactions with staff that were **homophobic, biphobic, and/or transphobic**
- Some participants **did not feel comfortable disclosing** their gender identity and/or sexual orientation with staff
  - Appeared that older adults were more likely to be open with their sexuality

### Other clients

- Many of the participants **did not feel safe disclosing** their gender identity and/or sexual orientation with other clients
  - Discomfort arose from **fear of verbal and physical harassment** from other clients.
- Some participants who were **open** with their gender identity and/or sexual orientation experienced **verbal harassment**
  - Older adults in particular
- Some participants felt **safe** in their housing, while others experienced **verbal harassment** from other tenants
- Older adults acted as **advocates** for the LGBTQ2S community

# LGBTQ2S Adult Housing Needs Assessment

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*It's an automatic safety measure when you walk into a shelter because it's just like you don't know how people are going to react because some people are okay with it and some people aren't and some people are dead pressed against it. So it's just like okay, do I want to get my ass kicked and be open and honest with myself or do I be open and honest with some, keep my mouth shut with others.*

- Gay cisgender male

*I think that I was singled out a lot of the times as a gay woman. And you know what? I've been living with homophobia my entire life. Okay?*

- Cisgender female lesbian

# LGBTQ2S Adult Housing Needs Assessment

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*No I don't go to shelters, I don't like them because I feel really unsafe at most of them and when I go to the women's shelter a lot of the girls are like, 'Oh well you like girls too,' blah, blah, blah, blah, like, 'Don't stare at me like that, how do not know that you do not have a crush on me,' I've had a lot of that.*

- Bisexual cisgender female

# LGBTQ2S Adult Housing Needs Assessment

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## Housing Needs

### Housing Type

- **Diverse!**
- **Half** of participants stated they would **access housing specific to the LGBTQ2S community**
  - **Fill a void in Ottawa**
  - **Provide a safe alternative to mainstream housing**
- **No consensus** on the type of housing participants wanted, although majority stated that they preferred to **live independently**
  - **Option for intergenerational living environments?**
- **Emergency shelter?** Some participants noted that LGBTQ2S individuals are avoiding the current system

# LGBTQ2S Adult Housing Needs Assessment

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## Housing Needs

### Housing Considerations

- Some participants expressed that housing options **specific to certain identities and orientations** within the LGBTQ2S spectrum are warranted
- **Supports** should be attached to housing and allow for LGBTQ2S individuals to support one another
- **Neighbourhoods** important
  - Safety
- **Social opportunities** important, particularly for older LGBTQ2S adults
- **Staff** of any housing should identify as **LGBTQ2S**

# LGBTQ2S Adult Housing Needs Assessment

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## **Focus Groups**

### ◦ **Intake**

- Some agencies had specific policies in place when working with LGBTQ2S clients, particularly around intake procedures

### ◦ **Gender identity and sexual orientation**

- Consensus that addressing a client's gender identity is imperative, as transgender clients need to have access to housing that they felt safe and comfortable in
- Same consensus not found for sexual orientation, as some participants did not see link between sexual orientation and housing needs

### ◦ **Service use experiences**

- Shared living arrangements, such as emergency shelters and supportive housing, sometimes described as hostile for LGBTQ2S clients as a result of homophobia, biphobia, and transphobia

# LGBTQ2S Adult Housing Needs Assessment

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## Focus Groups

### Housing



- No specific housing intervention was endorsed by all participants
- Some thought there should be a mix of housing, such as transitional housing and scattered-site permanent housing
- Supported living for older LGBTQ2S adults
- Supports should be attached to any housing that is developed
- LGBTQ2S clients should choose the housing that they want to live in

# LGBTQ2S Adult Housing Needs Assessment

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## Online Survey

- Staff had **varying** experiences working with LGBTQ2S clients
- **40%** thought that an individual's **LGBTQ2S identity** contributed to their homelessness
- **15%** thought that LGBTQ2S clients were treated **well by other clients** in the system
- Several participants stated that there are **LGBTQ2S allies** in the system
- **66%** thought that LGBTQ2S clients were treated **well by staff at their agency**

# LGBTQ2S Adult Housing Needs Assessment

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## Online Survey

- **75%** thought that LGBTQ2S adults would benefit from **having housing options directly targeted to the LGBTQ2S community**
- **No specific housing** intervention was endorsed by participants
- Some participants thought that **housing should be inclusive** and allow heterosexual allies, while others thought that housing **should be for LGBTQ2S individuals** only
- All agreed that **LGBTQ2S adults should have choice** in housing that best fits their needs



# LGBTQ2S Adult Housing Needs Assessment

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## Recommendations

### Housing

1. Develop housing that meets the needs of LGBTQ2S individuals
2. In developing LGBTQ2S housing, ensure that:
  - a) LGBTQ2S individuals are at the forefront of its development
  - b) Staff members identify as LGBTQ2S
  - c) Supports focused on substance use, mental health, and identity development are included and framed in a trauma-informed care approach
  - d) Social supports and community development opportunities are included
  - e) Older adults are supported



# LGBTQ2S Adult Housing Needs Assessment

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## Recommendations

2. In developing LGBTQ2S housing, ensure that (con't):

- a) **The multiple layers of oppression that individuals may face are addressed using an intersectional approach**
- b) **The principles of Housing First are applied**
- c) **The location of the housing is in a safe and welcoming neighbourhood**
- d) **Research and evaluation plans are included**



3. Work with landlord associations to provide LGBTQ2S training and develop a LGBTQ2S-friendly rental list

# LGBTQ2S Adult Housing Needs Assessment

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## Recommendations

### **Sector**

1. Protect the rights of transgender, gender non-conforming, and Two-Spirit individuals
2. Enhance the training and support needs of staff in the sector in regards to LGBTQ2S
3. Formalize policies that entrench LGBTQ2S rights within the sector, both at municipal and agency levels. Ensure that LGBTQ2S adults with lived experience are part of this policy development.
4. Develop a weekly drop-in for LGBTQ2S adults in the community.



# LGBTQ2S Adult Housing Needs Assessment

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## **Sector**

5. Collaborate with the youth sector.
6. Develop allyship training opportunities for non-LGBTQ2S adults in the sector.
7. Collect formalized data on gender identity and sexual orientation within intake procedures.
8. Ensure that LGBTQ2S staff members are supported within the sector.

## **Community**

1. Collaborate with the broader LGBTQ2S community in Ottawa.



# LGBTQ2S Adult Housing Needs Assessment

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Thank you:

- All participants, particularly the LGBTQ2S adults with lived experience of homelessness
- Daybreak Non-profit Housing
- Ontario Trillium Foundation

# LGBTQ2S Adult Housing Needs Assessment

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Twitter - @John\_T\_Ecker

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# Panelist 2: Dr. Andrea Daley

# The Case of Older LGBTQ2 Homecare in Ontario

**Andrea Daley, MSW PhD**



**Housing and Home Care: An Older LGBTQ2 Person's Perspective**  
**Webinar Series on Older LGBTQ2 People - March 14, 2018**

**Funded by the Canadian Institutes of Health Research – Institute of Gender and Health**

# LGBTQ HOME CARE ACCESS PROJECT



- ❖ Judy MacDonnell, RN PHD
- ❖ Melissa St. Pierre, PhD
- ❖ Shari Brotman, MSW PhD
- ❖ Jane Aronson, PhD
- ❖ Loralee Gillis



# Enhancing LGBTQ2 Home Care Access

- Examines the landscape for understanding issues of access and equity specific to the home care context.
- Synthesis of the ‘key indicators’ literature on access and equity in health care organizations informed by a gender-based diversity analysis (Daley & MacDonnell, 2011).
- KI interviews with LGBTQ2-positive health service organizations in the Greater Toronto Area of Ontario to understand what it takes to create positive space (MacDonnell & Daley, 2015).
- Pilot research on the learning and training needs of diverse home care providers which identified the gap in LGBTQ2-related education and training for home-care providers (Daley & MacDonnell, 2015).
- [LGBTQ Home Care Access Project](#)

# Inequitable Healthcare Access for Older LGBTQ2

- Well-documented gap in accessible care for older LGBTQ2 people.
- A time when disability and chronic illness may require increased use of health services.
- Health issues exacerbated by lifelong exposure to homophobic, biphobic, and transphobic discrimination and stigma.
- Anticipate and face multiple forms of discrimination from service agencies, leading to their avoidance of service access.
- Lack awareness of the holistic health issues of older LGBTQ2 people.

(Brotman et al., 2015; Fredriksen-Goldsen et al., 2014 ; Finkenauer et al., 2012; Hardacker, et al., 2014; IOM, 2011; Leyva et al., 2014)

# Inequitable Healthcare Access for Older LGBTQ2

- Overt experiences of discrimination, stigma and violence to invisibility and erasure to fears of disclosing their LGBTQ2 identities result in complete avoidance of care.
- Mental health; long-term care; residential/assisted living; palliative and end of life care; HIV; and caregiver support .
- LGBTQ2 older adults' conscious decisions not to disclose their identities or identify people in their lives can be understood as a discerningly **self-protective strategy**.



(Bradford, 2013; Brennan-Ing et al., 2014; Boggs et al., 2014; Brotman et al., 2015; Cartwright et al., 2012; Coon & Burelson, 2013; Gutman & Spencer, 2010; Hovey, 2009; IOM, 2011; Kimmel, 2015; McGovern, 2014; Rawlings, 2012; Siverskog, 2014; Wright et al., 2014)

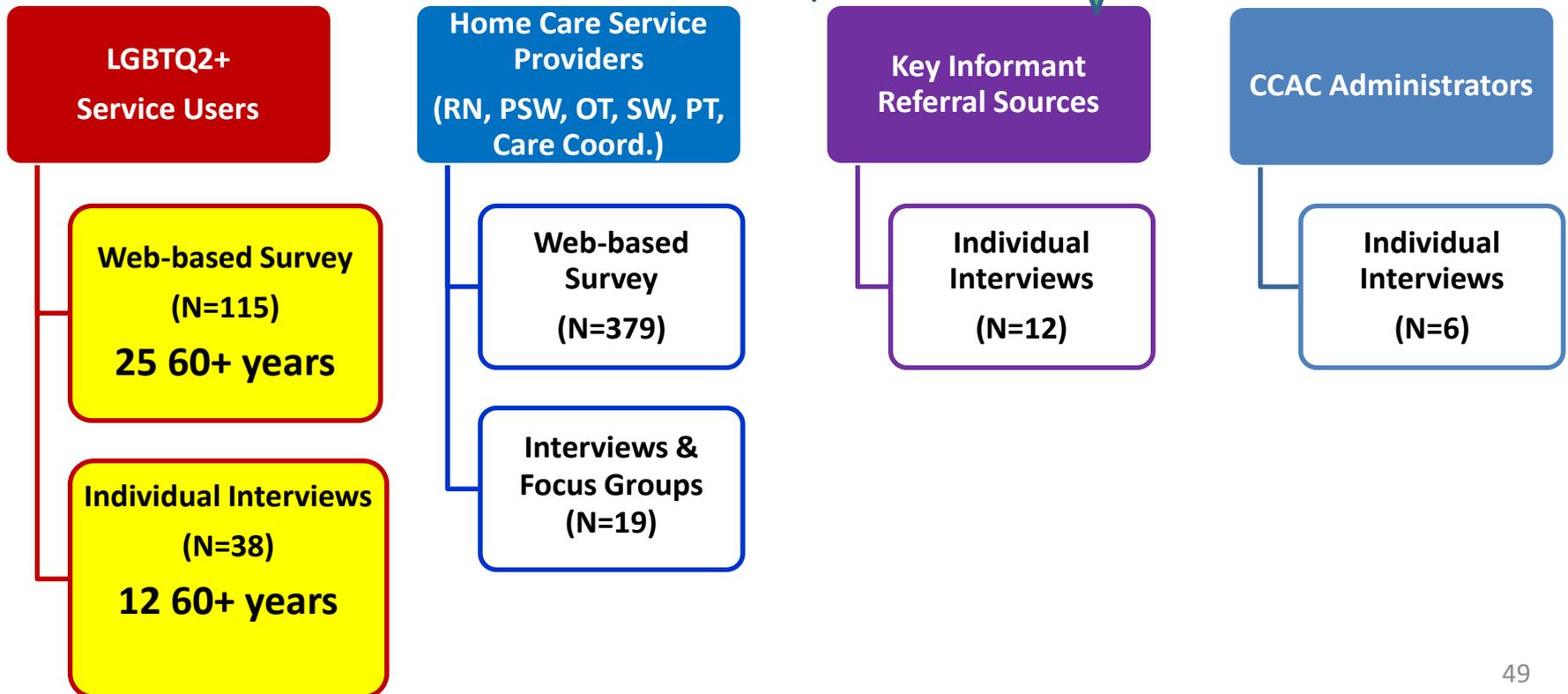
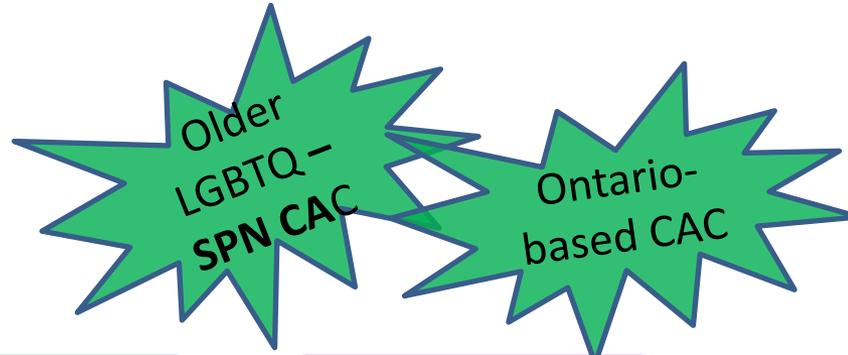
# Invisibility of Diversity In LGBTQ2 Research

- Implications for understanding these populations' needs and issues in relation to aging.
- Transgender and bisexual people, people of color, those living with disability, and those with limited social privilege such as privileges of citizenship – for instance LGBTQ im/migrants and refugees- are unlikely to be represented in current research.
- Lack of research that examines difference across the masculine through feminine spectrum of gender expression and identity
  - social positioning in relation to ethnicity, poverty, employment status, and other difference that influences one's experience of ageing and physical and mental health risk.

(Fredrickson et al., 2013; Finkenauer et al., 2012; Fabbre, 2014; IOM 2011; Siverskog, 2014)

# LGBTQ2 Home Care Access Project

Community-based, MM, Multi-armed



## Age

<b>60-64</b>	10(40.0%)
<b>65-69</b>	7(28.0%)
<b>70-74</b>	5(20.0%)
<b>75-79</b>	1(4.0%)
<b>80+</b>	2(8.0%)

## Region

<b>Toronto</b>	9(39.1%)
<b>Hamilton/Niagara</b>	3(13.0%)
<b>South West</b>	3(13.0%)
<b>Central East</b>	2(8.7%)
<b>Mississauga/Halton</b>	2(8.7%)
<b>Champlain</b>	1(4.4%)
<b>North East</b>	1(4.4%)
<b>South East</b>	1(4.4%)
<b>Waterloo/Wellington</b>	1(4.4%)

## Household income

<b>Under \$10,000</b>	2(8.3%)
<b>\$10,000-\$19,999</b>	8(33.3%)
<b>\$20,000-\$29,999</b>	3(12.5%)
<b>\$30,000-\$39,999</b>	2(8.3%)
<b>\$50,000-\$59,999</b>	1(4.2%)
<b>\$60,000-\$69,999</b>	3(12.5%)
<b>\$70,000-\$79,999</b>	2(8.3%)
<b>\$80,000-\$89,999</b>	1(4.2%)
<b>\$100,000+</b>	2(8.3%)

\*Questions that allowed participants to select more than one option; totals do not add to 100%.

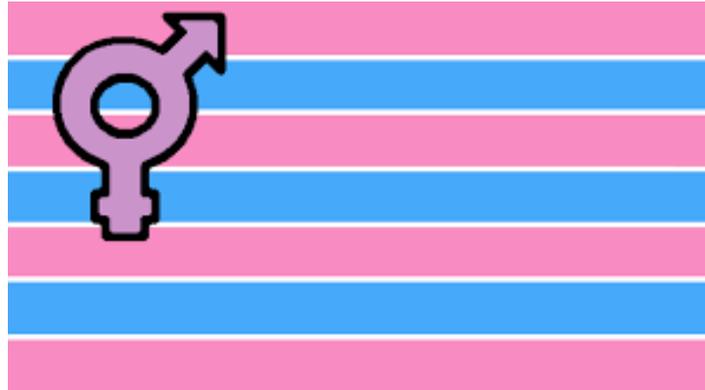
<b>*<u>Gender identity</u></b>	
Male	14(56.0%)
Female	10(40.0%)
<b>Genderqueer</b>	1(4.0%)
<b>Other (lesbian)</b>	1(4.0%)
<b>*<u>Sexual identity</u></b>	
Gay	15(60.0%)
Lesbian	9(36.0%)
Queer	4(16.0%)
<b>Bisexual</b>	1(4.0%)
<b>Two-spirit</b>	1(4.0%)

<b>*<u>Relationship status</u></b>	
<b>Single</b>	9(36.0%)
<b>Married</b>	6(24.0%)
<b>Widowed</b>	6(24.0%)
<b>Dating</b>	2(8.0%)
<b>In relationship</b>	1(4.0%)
<b>Common-law</b>	1(4.0%)
<b>Open relationship</b>	1(4.0%)
<b>Polyamorous</b>	1(4.0%)
<b><u>Impairment – yes</u></b>	
<b>Physical</b>	13(54.2%)
<b>Mental</b>	3(12.5%)
<b>Cognitive/learning</b>	1(4.2%)

\*Questions that allowed participants to select more than one option; totals do not add to 100%.

# Not Acknowledging & Respecting You

“My health card still had “M” on it. They came in thinking they were dealing with a male. So that was kind of awkward for me.”(Sheila,63)



## Being Fearful of Touching You

"She backed up. I was sitting here and she was there and she backed up and, '\*Gasp\*' never heard of that [lesbians]!' And she didn't say a lot in words, but her body language was very judgmental. I was shocked quite frankly at her reaction. She was closed with her hands close to her. She stepped back and sort of put her hands up and then she was very careful not to touch me."

(Louise, 69)

# Disrupting Discourses

- Importance of an analysis that disrupts the characterization of the queer older adult cohort as passive recipients of systemic discrimination and stigma or fearing disclosure during health care interactions.
- Narratives that signal agency with respect to enacting resistance and resilience.
- Three inter-related practices:
  - affirming declarations of identities
  - centring past and present activism
  - embeddedness in care communities



# Affirming Declarations of Identity

- “We did not hide the fact. I mean when I came home I hugged and kissed my partner and, you know, words of endearment and so on like that. I mean I ignored whoever was there and just went in and said hi, how was your day, hugs and kisses... there was no hiding or pretense or ... this is who we are, you know.” (Sylvie, 67)
- “If you have a home care provider who is a long termer and *especially in my home*, then I’m not going to start hiding who I am.” (Michael, 61)
- “So, the occupational therapist is separate from the physiotherapist is separate from the nurse is different from the PSWs. So I guess there’s [sic] four agencies.” (Sheila, 63).

# Centering Past and Present Activism

- “Facing so much discrimination at her job and with her family just kind of butched her up, and with her health, I think by that time she just figured if she was going to die, she was going to die a lesbian.” (Margaret, 68)
- “It’s not a matter of coming out to them; it’s just a matter of that I’m out of the closet and I’m not going back in ... I’m entitled to the same services as anybody else with the same respect as anybody else too.” (Simon, 72).



# Embeddedness in Care Communities

- “I had a friend come in and make meals. I had half a dozen friends that came and went with meals.” (Kathy, 60)
- “I started a live-in community for social activists when I was teaching at the university. So, I lived with 10 other people and we shared cooking and social activism, so that’s just part of me.” (Bill, 75)



# Embeddedness in Care Communities

- “And then actually one of her [ex]partners came out. [Name of partner] was the butch and I was the fem in our relationship, so there were things around the outside of our property that I couldn’t get to. And her former partner, we all were friends, and I finally said to [name of former partner], she was coming every weekend to cut the grass or shovel snow or do something outside for me that I couldn’t get to, so I said, ‘Why don’t you just move in?’ And she did, so the three of us lived together for the final year of [name of partner]’s life” (Margaret, 68).

# Concluding Thoughts ...

- Affirmative declarations of sexual identities are located within the context of lifelong activism and relationships with LGBTQ2 communities.
- Act autonomously, deciding to assert and affirm ‘who they are’ through a politicized lens of recognition and representation with respect to their right to access high quality health services.
- Signal their resistance to, and resiliency in the face of, experienced and anticipated denial and discrimination.
- “Of course we all get old, but it’s a matter of what we do with our lives. My life continues to have value.” (Michael, 61)

# Concluding Thoughts ...

- Social isolation a concern but should not be over-exaggerated:
  - resilience including development of fictive kin networks and resistance strategies go unrecognized.
- Pre (silent) and post (boomer) liberation era cohorts have unique experiences, identities and need
  - Silent era older adults often associate identity as a private matter
  - Avoidance and non-disclosure are acts of resistance related to experiences of life-long exposure to discrimination and stigma
- Non-disclosure may not be an option for trans older adults

# LGBTQ2 Access & Equity Framework – Home Care



# A & E Framework component prompts: Integrating LGBTQ2 older adults' resistance

A & E Framework	Current Prompts	Resistance & Resiliency Prompt
<b>Community Engagement</b>	Are LGBT people engaged with the organization? Which LGBT people are involved in the community engagement process to ensure their diversity is represented?	What strategies ensure the politicized engagement of LGBTQ2+ older adults (e.g., their knowledge of systemic oppressions and related barriers)?  What is the nature of organizational relationships with community-based and grassroots LGBTQ+ older adults' networks to support such a strategy?
<b>Education &amp; Training</b>	How does the organization advocate for resources for education/training for providers?	How does the organization ensure education/training to promote service providers' understanding of LGBTQ2+ older adults' as community activists and advocates (i.e., not passive care recipients)?  What community relationships are required to do so?
<b>Policies</b>	Are policies that address equity for LGBT service users and employees consistent across all programs?	Do organizational equity policies span across older adult program policies to acknowledge sexuality generally and LGBTQ2+ sexuality specifically?
<b>Leadership</b>	Are people at all levels of the organization involved in leadership opportunities including volunteers and allies associated with the organization?	What are the roles of LGBTQ2+ older adults in the organizational leadership structure?  How do these roles integrate knowledge and skills related to LGBTQ2+ older adults' community-related activism and advocacy?
<b>Environment</b>	Positive images of LGBT people on organizational brochures, materials?	Do images on organizational brochures, materials, etc. perpetuate or disrupt stereotypes of LGBTQ2+ older adults as passive care recipients?
<b>Programs &amp; Services</b>	How does the organization support a culture of disclosure for LGBT staff?	How does the organization recognize that LGBTQ2+ people may be part of care communities and offer support where needed to informal care communities to foster positive health outcomes?

# Resources

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## Webinar Series on Older LGBTQ2 People

### Housing and Home Care: An Older LGBTQ2 Person's Perspective

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12:00pm - 1:00pm EDT



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Director and Associate Professor,  
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Affiliate Researcher, Centre for Community and Educational  
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# Questions?

# Webinar Series on Older LGBTQ2 People

## Thank you!

If you have questions or would like more information on the older LGBTQ2 people webinar series please contact:

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