

SaferSex4Seniors

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For Providers: Are Your Services Affirming and Supportive of LGBT Seniors

Baby boomers are turning 65 and many thousands of them identify as Lesbian, Gay, Bisexual, and/or transgender. Are your services ready for them? Here are a few frequently asked questions about providing care and services to older LGBT folks.

Q. I've heard that LGBT older adults have unique needs. Can you describe them?

Today's LGBT seniors have faced life factors that impact on their sense of self and security in very unique ways. These factors include: the coming-out process; social stigma and oppression; threats to economic security; loss/lack of family support; and lack of equal treatment due to the lack of laws and policies protecting equality or because such laws and policies are not honored. Most LGBT seniors have lived during a time when it was commonly believed that being gay was a sin, crime, and/or mental illness. For them, it was impossible to be openly gay and be safe from violent attacks, harassment, imprisonment, loss of employment and rejection by their families.

Q. What does the term "family of choice" mean?

Countless LGBT older adults have experienced temporary or permanent estrangement from their families of origin (ie, mother, father, brother, sister, biological kin). The LGBT community has created important friendship networks offering a strong sense of belonging and mutual support over the lifespan; these networks are termed "families of choice." It is highly recommended that aging services structure family events and care planning meetings to include LGBT families of choice.

Q. How can I best meet the needs of older LGBT clients or patients?

Knowing someone's sexual orientation is different from knowing about who that person is as a sexual being. Sexuality, including sexual orientation and gender identity, is an integral part of everyone's identity, whether they identify as lesbian, bisexual, gay or straight, or as trans or cisgender – the term used for those whose gender identity matches the gender assumed and or assigned at birth. It is crucial that a provider knows as much about their client's/patient's sexuality as those individuals choose to share, so they can ensure that person's needs are being addressed and that they are receiving appropriate services.

Here are a few tips:

Educate yourself. Learn about the specific health issues facing LGBT people.

Be sensitive. Make sure you and your staff know which pronouns are appropriate to use when referring to a transgender patient or same-sex couple. Present visual cues for patients, such as displaying a LGBT-friendly emblem. This will demonstrate that your office is a safe space for all.

Revise client forms. Allow options for male/female/transgender/other, with space for different self-identification, and use neutral terms like “partner”, “spouse”, or committed relationship rather than “single,” “married” or “divorced.” Use “parent 1” and “parent 2” to include same-sex couples raising children.

Don’t assume. Avoid making assumptions about a patient based on their appearance. When taking a sexual history, ask, “Are your current or past sexual partners men, women or both?” You might also need to say and ask. “This may be a surprising question, but I never want to make assumptions about my clients/patients. May I ask if you identify as male or female, or any other word?”

Listen attentively. Be sensitive to the fact that this disclosure may be difficult for your patients. Work to build trust and gain credibility by never assuming you know all the answers, or know all about your patient, and by always being conscious of how you are communicating. Become informed about the potential unique strengths, stressors, and legal challenges in the lives of LGBT older adults.

Revise websites, brochures, waiting rooms, and forms to be inclusive and welcoming to LGBT older adults. Involve all team members and office staff in changes. Ideally, these "cultural" changes need to be implemented and supported by top-level decision makers.

Finally, *recognize diversity* among LGBT older adults. Just like all your straight patients are not the same, neither are your LGBT patients.

Q. Where can I learn more?

Advocacy groups for successful aging, such as the *National Resource Center on LGBT Aging* (www.lgbtagingcenter.org) and *Boulder County Area Agency on Aging’s Project Visibility* (<http://www.bouldercounty.org/family/seniors/pages/projvis.aspx>) offer care providers training, education, and resources for providing welcoming services for LGBT older adults. These training programs are designed to ensure that aging service organizations can professionally, sensitively, effectively and appropriately serve our communities. In addition, the Consortium on Sexuality and Aging at Widener University provides information and resources.

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