Optimizing Aging Collaborative

UCSF





Source: Openhouse LGBT
Aging Cultural Humility
Training Curriculum, "From
Isolation to Inclusion:
Reaching and Serving LGBT
Seniors" (2015).

Supported by the UCSF Geriatrics Workforce Enhancement Program: Health Resource and Services Administration (HRSA) Grant Number U1QHP28727.

Training in Competent Care for LGBTQ Older Adults

Ageism and Heterosexism

Working with older people, we seek to provide the highest quality of care. This includes creating a safe and welcoming environment for all people.

San Francisco is home to more than 12% of older adults who identify as LGBTQ. It is imperative that we have the skills to serve them well and with compassion.

Ageism and heterosexism are common and often subtle. Our trainings will help address common ways that we can create an open environment for older people and improve competencies in serving those who identify as LGBTQ.

Some example trainings:

LGBTQ History and Barriers to Health and Social Services

Working with Transgender Older Adults

Increasing Inclusion, Combating Isolation

Inclusive Strategies for Sexual Orientation & Gender Identity Data

Unique Needs of LGBT Older Adults

The majority of lesbian, gay, bisexual, transgender, and queer/questioning (LGBTQ) older adults have lived through a lifetime of discrimination, social stigma, and the effects of prejudice both past and present.

LGBTQ older adults may be apprehensive of health care professionals and are less likely to seek out senior resources.

Health care and social service providers should be aware of unique issues facing LGBTQ older adults, including:

- Social isolation
- Depression and anxiety
- History of trauma
- Poverty
- Legal discrimination
- Chronic illness
- Delayed care-seeking and advanced illness
- Poor nutrition
- Increased premature mortality risk

Interviewing and Collecting Data from

LGBTQ Older Adult Clients

An important principle of person-centered care is that the more providers know about their clients, the better service they will be able to provide.

Sexual orientation and gender identity are different aspects and should not be incorporated into one question. "Sexual orientation" is defined by who a person is primarily physically, romantically, and /or emotionally attracted to. "Gender identity" is defined as the gender you feel you are inside.

When planning for data collection on sexual orientation and gender identity, it is important to address confidentiality and privacy. Below are recommendations for addressing these topics, which you can adapt to the best approaches for your agencies and staff.

EXAMPLES

Sexual Orientation and Sexual Activity

Do you think of yourself as:

- Lesbian, gay, or homosexual
- Straight or heterosexual, that is, not gay or lesbian
- Bisexual
- Not listed above. Please specify
- Not sure

In the past (time period, e.g. year) with whom have you engaged in sexual activity? Choose ALL that apply.

- Men
- Women
- One or more of my partners have been transgender
- I have not engaged in sexual activity with a partner

Gender Identity

Many transgender people identify simply as male or female and will not check a transgender or other box when offered. To address this, researchers recommend asking open-ended questions or a pairing of questions, such as:

What is your gender (choose ALL that apply)?

- Male
- Female
- Trans Male/Trans Man
- Trans Female/Trans Woman
- Transgender
- Not listed above, please specify ____

What was your sex at birth (meaning, on your original birth certificate)?

- Male
- Female

Suggestions for Staff

- At the **beginning** of interviews, state that you will be asking demographic and personal questions. Explain the agency's confidentiality policy and state the client's right to abstain.
- Discuss sexual orientation and gender identity in private.
- Be respectful of a client's individual "coming out" experience. It may take time to build trust to disclose, do not force the client to answer questions that make them uncomfortable.
- Use gender neutral language.
- Ask open-ended questions.
- Don't make assumptions about an LGBTQ older adult's life history.
- Ask for clarification on unfamiliar terminology.
- Ask about and then restate your clients' preferred identification, name and pronoun back to them.
- Do not assume LGBTQ older adults are open about sexuality and gender identify in every aspect of their lives.
- When asking about family, be open ended. Ask who they consider family.
- Be supportive when an individual selfidentifies as LGBTQ.
- Focus on the whole person.

Adapted from Openhouse SF trainings. For more info www.openhouse-sf.org