

The facts on LGBT aging

Caregiving

Caregiving can be a rewarding but sometimes challenging experience. LGBT caregivers face unique obstacles, from healthcare laws that privilege biological families to a lack of resources for LGBT-specific needs. Because LGBT people are twice as likely to age alone and four times less likely to have children, LGBT elders become caregivers more often than their heterosexual counterparts.

- More than half (54 percent) of LGBT elder care recipients receive care from their partner; a quarter (24 percent) receive care from a friend
- 21 percent of older LGBT adults have provided care to friends, compared to only 6 percent of their heterosexual counterparts
- LGBT caregivers are more likely to be doing so in isolation and tend to have poorer mental and physical health

Cultural competency

Due to a lifetime of discrimination, harassment, and violence, LGBT elders are more likely to become ill at an earlier age than their straight peers. In some instances, an LGBT elder might only seek assistance for emergency care, which can be costly not only to their health but also their financial security.

- About 20 percent of LGBT people avoid medical care out of fear of discrimination
- 88 percent of LGBT older adults want long-term care facilities that are culturally competent
- 50 percent of transgender individuals have taught their medical providers about transgender care

Discrimination

LGBT elders can be targets of discriminatory acts ranging from hiring and salary discrimination to neglectful health care providers. LGBT older adults often experience victimization based on their perceived or actual sexual orientation and gender identity. Discrimination can lead to negative

consequences for LGBT elders:

- About two-thirds of LGBT older adults have experienced victimization at least three times in their lives
- Victims of discrimination have a higher likelihood of poor health outcomes
- It's been reported that LGBT older adults have received inferior, neglectful healthcare or have denied healthcare altogether

Health care

LGBT older adults are less likely than their heterosexual peers to reach out to providers, senior centers, meal programs, and other entitlement programs because they fear sexual orientation- or gender-based discrimination and harassment. LGBT older adults experience mental and physical illness more frequently than their heterosexual counterparts:

- Nearly one-third of transgender people do not have a regular doctor and report poor general health
- LGBT older adults have higher rates of poor physical health and mental distress
- 41 percent of LGBT older adults report having a disability, compared to 35 percent of heterosexual older adults
- 9 percent of lesbian, gay, bisexual and queer people report that a doctor or other health care provider used harsh or abusive language while treating them; among transgender people, the number was 21 percent

HIV/AIDS

HIV disproportionately impacts the LGBT community, and the number of LGBT older adults with HIV is increasing. Thirty years ago, the idea that someone with HIV

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would live decades was unimaginable. Now people with HIV are living well into their golden years.

- Half of all HIV-infected Americans are over 50 years old
- Adults 50 and older account for 15 percent of all new HIV/AIDS diagnoses, and 29 percent of all persons living with AIDS
- Researchers estimate more than 50 percent of patients with HIV have an HIV-associated neurocognitive disorder

Housing

Older LGBT couples often experience discrimination when seeking rental housing and senior housing. If when they are admitted into a senior housing development or facility, they are frequently discriminated against by property managers, staff, other residents, or service providers, making the experience of living there miserable or even life-threatening.

- 48 percent of LGB couples experience adverse treatment when seeking senior housing; trans individuals experience adverse treatment at even higher rates
- Half the LGBT population lives in states with no laws prohibiting housing discrimination against them
- 34 percent of LGBT older adults fear having to re-closet themselves when seeking senior housing

Legal and financial

A host of variables—gender, generation, ethnicity, state of residence, and marital status—make financial decisions especially challenging for LGBT older adults. Ongoing legal discrimination, compounded with a lifetime of challenges, make it harder for LGBT older adults to be financially secure.

- In general, LGBT people are poorer and have fewer financial resources than their heterosexual counterparts
- LGBT people are likelier to be subject to hiring or salary discrimination, making their earnings—and their Social Security payments—lower

- Transgender older adults are more likely to experience financial barriers than non-transgender older adults, regardless of age, income, and education.

LGBT aging

LGBT older people are living vibrant, full lives across the U.S. and around the world. While the U.S. census has never measured how many LGBT people live in America, reports estimate that there are currently around 3 million LGBT adults over age 50. That number is expected to grow to around 7 million by 2030. LGBT older people face unique challenges as we age. LGBT elders are:

- Twice as likely to be single and live alone
- Four times less likely to have children
- Far more likely than our heterosexual peers to have faced discrimination, social stigma, and the effects of prejudice
- More likely, therefore, to face poverty and homelessness, and to have poor physical and mental health

But LGBT older adults are resilient. They were the pioneers who stood up and pushed back at the Stonewall uprising. On the whole, we have gained acceptance and rights that were unimaginable in the dark days when we were labeled criminals, sinners, or mentally ill. We have seen gains in federal rights in the areas of marriage and adoption, and nearly half of states have passed legislation to eradicate discrimination in employment and housing.

Social isolation

Accessing safe, friendly services can be difficult for LGBT older adults who do not

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live in major cities. Social connectedness keeps older adults healthy and helps them live longer. LGBT older adults are twice as likely to live alone, making them vulnerable to social isolation. LGBT older adults living with HIV also face high rates of isolation, which has been shown to have a negative impact on health and well-being, particularly cognitive function.

- Nearly 60 percent of LGBT older adults report feeling a lack of companionship; over 50 percent reported feeling isolated from others
- The health risks of prolonged isolation have been equated with smoking 15 cigarettes daily
- 41 percent of transgender people are reported to have attempted suicide

Wellness

Wellness affects health outcomes and encompasses positive habits such as physical activity, abstaining from cigarettes and alcohol, and receiving regular check-ups from a physician. LGBT older adults have experienced decades of bullying, discrimination, and verbal and physical abuse.

Self-care is frequently more difficult for LGBT elders because they are much more likely to live on their own, have fewer financial resources, and don't necessarily trust their health care providers to treat them from a place of cultural competency.

- LGBT people smoke cigarettes at rates 68 percent higher than the general population
- LGB older adults are significantly more likely to consume alcohol than heterosexual older adults
- LB women sit an average of four to five more hours per week than heterosexuals

The logo for SAGE, featuring the word "sage" in a blue, lowercase, serif font.

- Helps LGBT older people age with the respect and dignity they deserve
- Established in 1978 to support for LGBT elders in New York City
- Advocates at the federal and state levels with and on behalf of LGBT older people
- Nationwide network of affiliates working with LGBT elders across the country
- Five senior centers in New York City with robust calendars of events and activities

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Services for
LGBT Elders
We refuse to be invisible