

Age-Friendly Inclusive Services

A Practical Guide to Creating
Welcoming LGBT Organizations



National Resource Center ON LGBT AGING



CONTENTS

LGBT Older Adults in Profile	4
Addressing Ageism	9
The Evolution of LGBT Language	11
Practices that Promote Inclusion and Safety	13
Programs and Advocacy for LGBT Older Adults	16
Creating and Sustaining a Welcoming Organizational Culture	24
Conclusion	27
Resources: Organizations that Support LGBT Older People	28
Glossary of Aging Terms	29
Glossary of LGBT Terms	30



The National Resource Center on LGBT Aging is the country's first and only technical assistance resource center aimed at improving the quality of services and supports offered to lesbian, gay, bisexual and/or transgender older adults. Established in 2010 through a federal grant from the U.S. Department of Health and Human Services, the National Resource Center on LGBT Aging provides training, technical assistance and educational resources to aging providers, LGBT organizations and LGBT older adults. The center is led by Services & Advocacy for GLBT Elders (SAGE) in collaboration with 18 leading organizations from around the country: the American Society on Aging, CenterLink, FORGE Transgender Aging Network, GRIOT Circle, Hunter College, the LGBT Aging Project, Meals on Wheels Association of America, the National Asian Pacific Center on Aging, the National Association of Area Agencies on Aging (n4a), National Association of Nutrition and Aging Services Programs, National Caucus & Center on Black Aged (NCBA), National Center for Elder Abuse, National Indian Council on Aging, the National Council on Aging's National Institute of Senior Centers (NISC), National Hispanic Council on Aging (NHCOA), Openhouse, PHI, and the Southeast Asia Resource Action Center (SEARAC).

lgbtagingcenter.org
facebook.com/lgbtagingcenter
twitter.com/lgbtagingcntr

Services and Advocacy for GLBT Elders (SAGE) is the country's largest and oldest organization dedicated to improving the lives of lesbian, gay, bisexual and transgender (LGBT) older adults. Founded in 1978 and headquartered in New York City, SAGE is a national organization that offers supportive services and consumer resources to LGBT older adults and their caregivers, advocates for public policy changes that address the needs of LGBT older people, provides education and technical assistance for aging providers and LGBT organizations through its National Resource Center on LGBT Aging and cultural competence training through SAGECare. With offices in New York City, Washington, DC and Chicago, SAGE coordinates a growing network of 28 SAGE affiliates in 20 states.

sageusa.org
facebook.com/sageusa
twitter.com/sageusa
youtube.com/sageusa

DEAR SERVICE PROVIDER:

Thank you for your interest in providing the best possible services to older adults who are lesbian, gay, bisexual, and transgender (LGBT). This guide is our fifth in a series produced by SAGE's National Resource Center on LGBT Aging. LGBT organizations play a critical role in their communities, providing a safe haven for LGBT people who are not always welcomed elsewhere to gather, meet other people with similar experiences, celebrate their identities, and find support on a wide range of social, health and legal issues. Yet, many LGBT older people do not feel comfortable at LGBT organizations, viewing them as interested only in young people or afraid of experiencing age-based discrimination from staff or fellow participants. This fear can be especially heightened in LGBT older adults who have experienced decades of discrimination based on their sexual orientations and gender identities, and who now feel they are being shut out of their own community because of their age.

You likely already serve, or will soon serve, LGBT older adults or you may be asked for resources by those who care for them. Recent estimates suggest that there are 3 million lesbian, gay, bisexual and transgender people over age 55 in U.S., and this number will continue to grow exponentially. SAGE's National Resource Center on LGBT Aging was created to address the unique needs of this diverse and growing population.

First produced in 2015, this guide was updated in 2017 to include additional information and resources about LGBT older adults and caregiving. This guide is intended to help you understand the unique challenges that LGBT people face as they get older, and provide you with some tools and strategies to ensure that LGBT older adults feel more included and safe in LGBT organizations. As part of an LGBT organization, you are already supporting LGBT people who may be struggling and are striving to build happy and successful lives. We hope that this guide complements your work, and enhances your ability to extend your care and service to LGBT older people. Thank you for your efforts to create secure, affirming and supportive spaces and programs for LGBT older adults.



Sherrill Wayland
Manager, National Projects
SAGE (Services & Advocacy for GLBT Elders)

*Institute of Medicine of the National Academies. *The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Understanding* (2011). The National Academies Press: Washington, DC.

LGBT OLDER ADULTS IN PROFILE

Lesbian, gay, bisexual and transgender (LGBT) older adults are, generally speaking, a resilient population that faces many unique challenges. It is no surprise that today's LGBT elders have faced discrimination, yet many of them have responded to such adversity by building movements to advocate for equal rights, developing their own support systems and communities, and creating "families of choice." According to *The Aging and Health Report**, the most comprehensive national health study of LGBT people age 50+ to date, most LGBT older people feel good about the communities they belong to and have at least some social support. Many of them also engage in activities that bolster their health and wellness, such as moderate physical activity, or attending religious services.

However, the effects of a lifetime of social stigma, and prejudice both past and present, cannot be underestimated. Despite the fact that we live in a time of tremendous social change and increasing visibility and inclusion of LGBT people, it is important to remember that today's LGBT older adults came of age in an era that was far less affirming of their identities. For some, their true sexual orientations and gender identities were dangerous secrets that could result in loss of work, housing, and family, as well as the stigma of being labeled as criminals, sinners, and mentally ill. History taught this generation that hiding—presenting as heterosexual and gender conforming—was the key to physical, social, and financial survival. Therefore, many LGBT older people greatly feared association with a more open LGBT community, a feeling some hold to this day.

Society's view and acceptance of LGBT people is changing, but for some older adults, the fear and social stigma they experienced has disrupted their lives, their connections with their families of origin, their lifetime earnings and their opportunities to save for retirement. In addition, the added stress of dealing with decades of discrimination means that LGBT older people are at greater risk of physical and mental illnesses, and other issues, such as depression, disability, chronic illnesses, poverty, social isolation, poor nutrition, and premature mortality.

While LGBT older adults may be at risk for poorer health outcomes, research suggests that they are less likely than non-LGBT elders to access the kinds of services and programs they need. Many LGBT elders feel out of place in both LGBT and aging organizations. They may think that LGBT community organizations, perhaps an essential source of support when they were younger, are no longer welcoming or address the challenges they face as they grow older. However, they cannot turn to aging network services and providers, senior centers, meal programs and other support programs because they fear discrimination or harassment if their sexual orientations or gender identities become known. LGBT community organizations, therefore, have an important role to play in offering programs and services to LGBT older people, and in connecting them to LGBT-affirming aging services.

*Frederiksen-Goldsen, K. I., Kim, H.-J., Emler, C. A., Muraco, A., Erosheva, E. A., Hoy-Ellis, C. P., Goldsen, J., Petry, H. (2011). *The Aging and Health Report: Disparities and Resilience among Lesbian, Gay, Bisexual, and Transgender Older Adults*. Seattle: Institute for Multigenerational Health.



“Our research at ACRIA on older LGBT adults dispels the stereotype of wealthy sexual minorities with a lot of disposable income. In contrast we find many are struggling with basic needs for economic security and housing and are discriminated against on the basis of age, gender and gender expression, race/ethnicity, and HIV-status. Many of these older adults feel invisible, so it is vital that LGBT community organizations continue to provide a voice and advocate for this unseen and unheard population.”

Mark Brennan-Ing

Director for Research and Evaluation
ACRIA, Center on HIV & Aging
New York, New York

LGBT Older Adults: A Diverse Community

While many LGBT older people face similar challenges, it is important to remember that they are unique individuals who should be approached in a personalized, relationship-centered way. Here are some additional issues to consider when working with LGBT older adults. You may already be familiar with many of these issues, since discrimination against LGBT people exists to this day, but it is important to consider how decades of discrimination can compound and negatively affect LGBT older people.

LGBT older people of color: Older people of color who are LGBT have not only had to deal with prejudice due to their sexual orientation and/or gender identities, but also racism. They may come from cultures that perceive “coming out” as negatively affecting the family and community, making it less likely they will disclose their sexual orientation or gender identity to healthcare and aging service providers. As a result, they are often even more at risk of illness, poverty, social isolation and other issues that affect LGBT older people. In addition, the severity of racism is well-documented in the heterosexual community, but also exists within LGBT communities.

Transgender older people: Transgender people who transition later in life often have fewer resources, such as transgender role models or mentors, places to socialize and meet people similar in age, and other community supports. Transgender people who do have support may find that their SOFFAs (Significant Others, Friends, Family and Allies) are excluded from transgender support groups, even if they are dealing with difficult issues of their own. Many couples in which one person is transgender and the other is cisgender are “mixed orientation,” meaning one identifies as LGBT and the other as straight; the person who is straight may not feel welcome in an LGBT organization. In addition, many LGBT older people are uncomfortable with or hostile to transgender issues, so LGBT community organizations may have to address transphobia with older participants.

Older people with HIV/AIDS: The number of older adults now living with HIV/AIDS in the United States is the largest ever in history; in 2015, it is estimated that 50% of HIV-infected individuals in the U.S. are age 50 or older. LGBT older adults who lived through the beginning of the HIV/AIDS epidemic may be suffering from the long-term effects of stigma and marginalization, as well as survivor’s guilt after watching so many friends and colleagues die from the disease. Many older adults with HIV/AIDS did not expect to live long enough to have to plan for retirement, and are dealing with the unknown effects of long-term treatment as well as a lack of social support, high levels of isolation, and a decreased ability to cope with the rigors of disease management. It is important to remember, however, that LGBT older adults with HIV/AIDS, and those who were on the front lines caring for those with HIV/AIDS, are resilient—they are survivors who created systems to care for each other at a time when government and healthcare systems denied them help, and can be great resources in figuring out how your organization can support LGBT older adults.

LGBT Baby Boomers: While it can be tempting to lump all people over a certain age into an “older person” box, there are significant differences between LGBT older people—for example, those in their 50s and those in their 80s. LGBT Baby Boomers (those born between 1946 and 1964) are part of the first generation to start living life more publicly. LGBT Baby Boomers, particularly those born at the tail end of the generation, are more likely to be open about their sexual orientations and gender identities, and to expect dignity and respect from healthcare and aging service providers. However, one survey found that more than half of LGBT Baby Boomers thought that being LGBT would make aging harder, citing fears of double discrimination and fewer opportunities to connect with other people.*

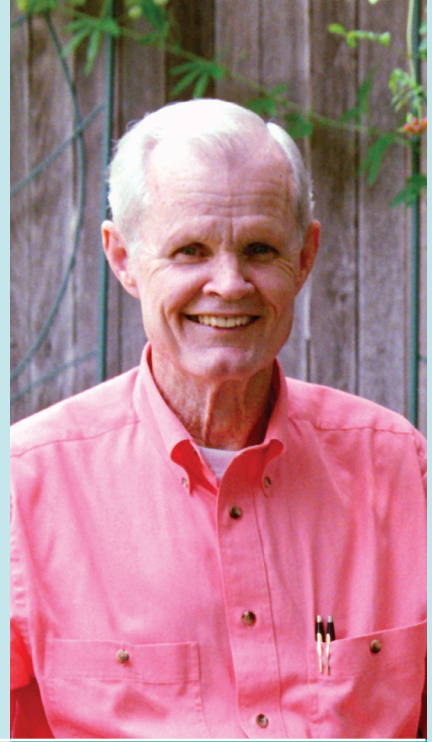
LGBT older adults and Caregiving: As people age, many will need support from a caregiver. Often times this support is provided by a family member. Because LGBT older adults are less likely to have children and may be estranged from their families of origin, they typically rely on *families of choice* for care. Existing caregiver support services are largely geared toward family members and may not meet the needs of this group, or may be perceived by LGBT people as unwelcoming to non-traditional families. It’s also important to recognize that some LGBT older adults have no one in their lives at all who can act as a caregiver, which can result in poorer health outcomes and premature institutionalization.

LGBT older people and Families: Many LGBT older people were in heterosexual marriages as a way to fit into societal norms. Some came out after divorce or the death of a spouse. Some LGBT older people also have children and grandchildren. Do not assume that an older person who was married to a person of the opposite sex, or one who has children, is straight and/or cisgender.

*MetLife Mature Market Institute and American Society on Aging. Still Out, Still Aging (2010).

LGBT History: Timeline

The world in which we grow up has an incredibly important effect on how we age. Many LGBT older adults lived much of their lives in a society that was extremely hostile to them. Consider some of the events that have happened in the lifetime of Richard, a gay man born in 1930, and imagine how they have affected him as he has grown older. Creating a safe environment for LGBT older adults requires recognizing the differences between their experiences and those of younger LGBT people. Recent gains in legal and cultural acceptance don't erase the impact of decades of negative experiences.



2015	<i>Obergefell v. Hodges</i> : The U.S. Supreme Court legalizes same-sex marriage nation-wide.	85 years old
2003	<i>Lawrence v. Texas</i> strikes down the remaining laws criminalizing same-sex sexual conduct.	73 years old
1994	Don't Ask, Don't Tell is passed.	64 years old
1983	The beginning of the AIDS crisis, a time of extreme fear and prejudice against LGBT people.	53 years old
1973	The American Psychiatric Association removes <i>Homosexuality</i> from its list of mental disorders.	43 years old
1969	Stonewall Riots take place in New York City; this event is widely seen as the birth of the LGBT rights movement.	39 years old
1952-54	The McCarthy hearings target "homosexuals," resulting in thousands of government employees being denied employment; the American Psychiatric Association lists <i>Homosexuality</i> in its first official list of mental disorder.	22-24 years old



“LGBT centers are expanding programs and services for the growing number of LGBT older adults in their communities. For example, some centers are helping them navigate Medicare, Medicaid or HIV-related care. And it’s not just creating new programming but asking, ‘How do we act as a guide for older people when it comes to aging services?’ Other centers are building affordable housing for LGBT elders, and pairing it with services that address the overall physical and mental well-being of older people. I’m 64, and aging today is so different for me than for folks just 10 years older. Previously, LGBT older people either couldn’t come out when accessing services, or stayed isolated and didn’t access services at all. So I’m thrilled to see centers adapting to the changing needs of LGBT older adults, now and for the future.”

Terry Stone

Former Executive Director
CenterLink: The Community of LGBT Centers
Fort Lauderdale, Florida

ADDRESSING AGEISM

Our culture is permeated with negative and devaluing assumptions about aging. Think about some of the most common stereotypes about older people. How many times have you heard older people described as cranky, loud, old-fashioned, non-sexual, sick, slow, unable to learn new things, demanding, or frail?

Ageism refers to the negative stereotypes, discrimination and prejudice faced by older adults. We can see the effects of ageism in negative media images of older people, workplace discrimination, the prevalence of elder abuse, and even in seemingly harmless statements like “having a senior moment” to describe forgetfulness. Ageism conveys the message that “old people” are less valuable, less important, less attractive, less useful and less worthy of attention and resources than younger people.

Negative attitudes about growing older span all age groups. People are exposed to ageist attitudes from a young age. These beliefs are reinforced by a lifetime of exposure to negative aging stereotypes, so that as people age, they may begin to view themselves negatively. Or, they may try to disassociate themselves from other older people, with attitudes such as, “I’m not old; I’ll be old in 10 years...”

LGBT older people not only must deal with ageism in broader society, but also within LGBT communities. After all, LGBT people have heard the same negative messages about aging that non-LGBT people have. However, ageist attitudes from within LGBT communities tell LGBT older people that they do not belong within their own communities. Many LGBT elders feel disconnected from or unwelcomed by younger generations of LGBT people. Studies have found that older gay men feel ignored or marginalized by the LGBT community, and consequently view their social support as diminishing as they age. LGBT older people also feel that the LGBT movement does not address their issues or do enough to engage them.

Addressing assumptions about older people, and current practices that unintentionally exclude LGBT older people from your organization, is an important step toward inclusion. Here are some ways you can begin to think about ageism, and identify the subtle clues that may tell LGBT older adults they are not welcome in your organization:

- Do not presume that there are LGBT older people in your community. Considering the rapidly growing population of people age 65+ in the U.S., chances are that you will be working with LGBT older people at some point, if you are not already working with them. Discrimination based on sexual orientation and gender identity does not disappear when LGBT people turn 65, and many LGBT older people want to maintain a feeling of belonging and active participation in the LGBT community.
- Assess your program offerings and/or advocacy work. Do you offer any programs or services directed toward older adults? Do you offer intergenerational learning and socializing opportunities? What time do you offer programs? Older adults may not want to drive or travel at night, and would prefer daytime programs, for example. Do you use microphones during large presentations so that everyone can hear? If you are an advocacy organization, what issues do you address? Are any of them directly relevant to older people's issues?
- If you host Pride events, consider whether they are accessible to older adults. Heat, sun, crowds and lack of seating can make it difficult for older adults to participate. Reserving a shaded seating area is a simple way to make your event more inclusive.
- Look at the makeup of your board, staff or volunteers. Are older adults represented across these three groups, or helping to shape your programs or advocacy work?
- Think about the ways you already support diversity and inclusion in your organization. Working in an LGBT organization, you most likely already deal with many types of diversity among participants and staff. What are the strategies you use to help diverse populations feel accepted and included in your work and service settings? How can you adapt these same strategies to reach out to and welcome LGBT older adults?

THE EVOLUTION OF LGBT LANGUAGE

Over the decades, the terms that LGBT people have used to describe themselves—and the terms used by non-LGBT people—have changed. Words such as homosexual or queer mean different things to LGBT people of different ages, life experiences and cultural heritage. Understanding what these terms means to LGBT older adults is crucial, because finding out what terms they use and then echoing back their language is a clear way to convey respect and openness to them. This section will highlight just a few terms; for a more comprehensive list, please see the [Glossary of LGBT Terms](#).

LGBT Language and Older Adults Checklist

- ❑ Consider using “LGBT older adults,” which is a general term for LGBT people 65 (the current standard age of retirement) or older. The term “older adults” may be preferable to “old,” “senior,” “elderly” or “aging” (terms which many don’t identify with personally). Also acceptable are “older LGBT people” or “LGBT older people.”
- ❑ Avoid terms such as “queer” and “dyke,” which are generally considered offensive to LGBT older people. While these terms are being reclaimed by some LGBT people, generally younger generations, they have a long history of negative connotations for LGBT older adults.
- ❑ Keep in mind that LGBT older adults may not have kept up with cultural language shifts and may still use terms that are now considered outdated or offensive, such as “homosexual,” “lifestyle,” or “sexual preference.”
- ❑ Remember that LGBT older people accustomed to hiding their sexual orientations and gender identities may not describe themselves as LGBT. They may also rely on euphemisms to describe their partners or significant others, such as “friend,” “special friend,” “roommate,” “companion,” or “cousin.”
- ❑ If you are ever unsure about how to address a person, **let the person guide you**. Remember that everyone is different and people will appreciate you taking the time to learn what terms they prefer, because it demonstrates your commitment to respect and safety. Once they have used a term to describe themselves, then you can reflect that term back, even if it listed above as a term to avoid.



“Take a look at your organization as a whole to see how accessible it is for LGBT older adults. What kind of furniture do you have? Is it low to the ground, or lacking arms or other supports? How do you get information out about programs? Web-only, which can be difficult for older people? If you do flyers, is the font big enough for older people to read? What about the make-up of your staff and board? If it’s only young people, that sends a clear message to older people that they do not have a place in your organization.”

Britta Larson

Director of Senior Services
Center on Halsted
Chicago, Illinois

PRACTICES THAT PROMOTE INCLUSION AND SAFETY

First Impressions

LGBT older adults who are looking for services and community will notice clues that your organization is open and willing to help them. Here are some questions to consider as you think about the first impressions your organization might make on LGBT older people.

- Do you include images of older adults in your marketing materials, or on your website? Are they printed in small, hard-to-read fonts? Are your outreach materials mostly web-based (e.g., organizational Facebook page or Twitter feed)?
- Take a look at how your organization is decorated. If the décor includes photos or images that represent your participants' communities, do these photos or images include older adults?
- Mobility, hearing and vision problems are common as we age. Is your organization and/or events accessible for people with mobility issues who may be using canes, walkers, or wheelchairs? What is the noise like in your organization? Is there loud music or excessive background noise that might make it difficult for older adults with hearing problems to participate in activities or have one-on-one conversations?

Making the Right First Impression: Checklist

- Include photos of older adults of different races and ethnicities in your marketing and outreach materials and on your website. Do not only include photos of older couples; use group shots of older adults or intergenerational groups as well.
- Hang inclusive pictures, quotes, and/or symbols in highly visible and active spaces to show that your organization embraces diversity and is a safe space for all.
- Place information about aging resources and services in orientation packets, community rooms, and offices.
- Do not rely solely on social media or your website for outreach and marketing. Offer printed materials as well, such as calendars, flyers and brochures, and ensure that they are available in large print (14 pt font minimum). Avoid all caps, and double space text where possible.
- Avoid printing materials on glossy paper, which can cause a glare that makes it difficult to read for people with low vision.
- Ensure that all speakers at presentations use microphones, including during Q&A sessions.
- Avoid loud music or excessive background noises during presentations, in reception areas, or in settings where you need to speak one-on-one with community members.
- Speak slowly and clearly, and ask, "What can I do to help you hear me?" when talking to someone with a hearing impairment.
- Speak directly to an older participant or involve them in the conversation when talking with their caregiver.

Intake, Interviews and Confidentiality

Because many LGBT older people are accustomed to hiding their sexual orientations and gender identities, they may not be comfortable identifying as LGBT even if they are seeking services or community through your organization. It is best to use general welcoming statements when first seeing LGBT older people in your organization—“We are a resource for LGBT people and their friends, and we’re happy you have found us.” During intake or other initial interactions, there are several practices you can implement, many of which your organization may already do, to put LGBT older people at ease.

Interview and Forms Checklist

- Ensure that the questions you ask are open-ended and apply universally.
- With all community members, use language that does not implicitly assume participant sexual orientation or gender identity.
- Don’t assume a sexual orientation or gender identity based on knowing the person is married, or has children or grandchildren.
- Ask older adults how they self-identify—their name, chosen pronoun, orientation, gender, their partner, relationship status, etc.
- Discuss the importance of disclosing self-identifying information to ensure appropriate services.
- Define “safe space” in a way that welcomes partners who do not identify as LGBT as well as people of all ages. Create an opening for LGBT older people to talk about family members of choice by asking questions such as “Who in your life is especially important?”
- Because some LGBT older adults can be very isolated, it may be helpful to identify whether someone has a support system in place. Questions such as “who might you call in an emergency” or “Is there anyone you could rely on for help if you needed it” can be useful for starting this conversation. You may also want to ask what plans, if any, they’ve put in place for the future, and whether they’ve completed advance directives.
- Pay attention to clues that you need to continue to build safety.
- Keeping in mind that not all older same-sex couples have been legally married, use “relationship status” on intake forms instead of marital status, and give additional options, including “other” with a blank line for the person to complete.
- Allow gender to be an open question by having a blank line that can be used to indicate gender.



SAGE’s National Resource Center on LGBT Aging offers a guide on best practices for asking questions about sexual orientation and gender identity when working with older adults. You can find all of our best practice guides at lgbtagingcenter.org/guides.

Confidentiality Checklist

- ❑ Include a clearly defined confidentiality statement that fully explains your organization's confidentiality procedures before you provide intake/admissions forms and applications.
- ❑ Offer a person the option of refusing to answer a question in writing until it can be discussed in the privacy of an office.
- ❑ Emphasize that your policy on confidentiality also includes not discussing sexual orientation and/or gender identity with others, including the participant's family and friends, without permission from that participant.
- ❑ Invite LGBT older people to work with you to create a process for maintaining and keeping their important personal information in a way that feels safe and comfortable for them.

“For our organization, partnering with SAGE gave us the opportunity to really look at our organization and find some critical areas of service delivery that were missing. Chase Brexton Health Care is an almost 40 year old organization, and our origin was in the LGBT community. Like so much of the broader LGBT community, the role for our elders so often was left undefined as an afterthought. Although our patients have been aging, so many of our services really focused on our youth. Working to peel back not only the ageism of society but also our community's ageism has helped us to not only create some new elder specific outreach and programming, but also examine the way we deliver all of our messaging and services. As a health center, bringing attention to our LGBT elders has meant bringing attention to their health disparities, and with all of the amazing resources from SAGE, we have built up some real enthusiasm across our organization to try and do something about it.”

Nate Sweeney

Executive Director
The LGBT Health Resource Center
of Chase Brexton Health Care
Baltimore, Maryland

PROGRAMS AND ADVOCACY FOR LGBT OLDER ADULTS

Offering programs, services and advocacy opportunities for LGBT older adults is one of the best ways to demonstrate inclusivity. If you are not sure where to start, reach out to your community: look for local aging organizations or groups to partner with (see page 28 for a list of groups); identify and connect with LGBT older adult community leaders; or do a needs assessment and/or convene focus groups of LGBT older people to determine their interests. If you are in an advocacy organization, take a look at the issues you work on. Do any of them relate to or directly impact older adults? If not, identify issues that LGBT older adults care about, but that also relate to your mission, to expand your work to include LGBT people of all ages. Opportunities to socialize can have a major impact on LGBT Older Adults, who are often at risk for isolation.

“Our weekly Coffee & Conversation gathering had existed as a group of about 20-25 folks for more than a decade. Today, the same event draws nearly 200 attendees and is widely known as one of the largest, weekly gatherings of LGBT seniors in the nation. When asked the reason for the incredible growth, my answer is that we shifted the focus away from the organizer and placed it... appropriately so...on the individual which in turn afforded our group a much greater opportunity for increased socialization. Our society which for so long had often belittled gatherings whose focus was ‘merely’ human interaction, has finally come to recognize this vital need. The 75 year long Harvard Grant & Glueck study so poignantly notes that in the third act of our lives, it matters little which car you drive, your professional status or how many highly-paid lectures you have presented. One of the main take-aways from this study is that good relationships keep us happier & healthier. Here at The Pride Center, using socialization as a means to create and maintain our group, we are then in a position to further enhance, enlighten and engage the lives of those in our LGBT senior community.”

Bruce Williams

Senior Services Coordinator
The Pride Center
Wilton Manors, Florida

Programs and Services Checklist

- ❑ Decide if current programming can be modified for LGBT older adults. For example, if you already offer support groups, consider adding groups that address issues LGBT older adults face, such as a “Coming Out Later in Life” group, a bereavement group, a caregiver support group, an LGBT grandparents group or an Older Lesbians or Gay Men or Transgender discussion group.
- ❑ Do not hesitate to start small—social programs, such as a weekly or monthly lunch or coffee group, can be a great way to begin attracting older adults to your organization and can go a long way toward combating isolation.
- ❑ Think about timing, location and refreshments. Daytime programs are often more convenient for LGBT older people, and may be a less busy time at your organization. Try to hold programs in quieter areas or reserve a space specifically for LGBT older adults. And, most important, serve food! Refreshments are key to attracting participants.
- ❑ Do joint programs with local aging organizations, or other organizations that reach the diverse populations you wish to include.
- ❑ Make your organization’s meeting spaces available for aging or LGBT older adult groups to hold events or convenings. This can help your organization foster new partnerships within the aging community.
- ❑ Rather than one-time events, seek to provide active, ongoing programming, events, and holiday celebrations within your organization that address and support the healthy aging of LGBT older participants.
- ❑ Familiarize yourself with the local aging network and the kinds of services older adults need, and identify LGBT-friendly service providers, so that you can refer LGBT older participants to services or programs your organization does not provide. See the [Glossary of Aging Terms](#) for more information on services.
- ❑ Other programming ideas include:
 - An intergenerational group between younger and older LGBT people. Many of the societal problems faced by LGBT youth such as bullying, loneliness, and isolation are issues LGBT older adults face as well. LGBT older people might welcome the opportunity to provide support to LGBT youth. A group with a specific project or goal that older and younger people can work on together, such as an intergenerational theater group, can be particularly effective.
 - Health programs and services that address health disparities for LGBT older adults, evidence-based healthy aging courses, or groups for older adults newly diagnosed or living long-term with HIV/AIDS.
 - Informational programming such as a seminar on successful retirement, a “lunch and learn” about long-term care planning or a clinic for completing advance directives.
 - Activities that are not explicitly targeted to older adults, but might organically welcome them due to their focus, such as computer classes, gardening classes or history seminars. Such groups can appeal to all age groups, and might also promote intergenerational communication.
 - Groups or activities that are fun and support a high quality of life for older adults, such as art or creative writing classes; language classes; travel groups; tea dances; trivia nights; current events discussion groups; meditation; dance, tai chi and/or feldenkrais classes; movie viewings; or speed dating events.

“Our monthly Lunch and Learn series has been one of our most popular and consistently attended events. Each month’s workshop features a guest speaker or topic, ranging from Financial Planning to ‘Sex After 60.’ Some people come specifically to hear about topics they’re interested in, others come every month to enjoy a meal and social time, with some good information on the side. These events have also been a great outreach venue for our other services”

Alex Kent, MPA

SAGECAP Program Replication Coordinator
Chase Brexton Health Care
Baltimore, Maryland

Advocacy Checklist

- ❑ Support issues and public policies that matter to all older adults, such as Social Security, age-friendly programs, affordable housing, long-term care access, and/or elder services.
- ❑ Build relationships with aging advocacy groups in your community, encouraging them to support and include LGBT older people in their work.
- ❑ Organize panels and presentations on policy issues that impact LGBT older adults; co-sponsor these events with local advocacy groups.
- ❑ Make sure to include your LGBT older adult participants in your advocacy work, encourage them to attend lobby days and town hall meetings where your organization has a presence, and equip them with information on state and local policies that affect them.
- ❑ Encourage LGBT older adults to prepare advance directives, wills and other important documents to protect themselves, their partners, and their families of choice.
- ❑ When bringing in volunteer attorneys or financial advisors, be sure that they are using inclusive language and presenting information about particular issues that affect LGBT older adults, such as Social Security, Medicare and caregiving.



SAGE’s National Resource Center on LGBT Aging offers several staff training options to address anti-LGBT bias in aging services, as well as the free guide [Inclusive Services for LGBT Older Adults: A Practical Guide to Creating Welcoming Agencies](#). Consider using these resources to inform aging services providers in your community about how they can better meet the needs of LGBT older people.

Partnerships

The world of aging services is vast, and it is not necessary for you to learn everything there is to know about aging to be inclusive and welcoming to older people. Knowing where to refer older participants for LGBT-friendly services is an essential element of providing them with support. For instance, if an older adult indicates they are providing ongoing support and care to a friend or family member, ask how they are doing and if they would like a referral to an aging provider that supports caregivers.

Partnerships Checklist

- ❑ Build partnerships with organizations that address aging topics such as housing, benefits, estate and elder law, caregiving, Alzheimer's, community-based elder services (e.g., senior centers), long-term care, home care services, and geriatric care management.
- ❑ Offer to make presentations about LGBT issues to aging organizations, or encourage them to get LGBT cultural competency training, to ensure that aging service providers are LGBT-affirming.
- ❑ Identify organizations or resources for LGBT older adults in your community and partner with them to more fully include LGBT older adults in your organization. Types of resources might include local meet-up groups, LGBT-welcoming faith communities, or LGBT-friendly senior centers or meal sites. In addition, several national organizations for LGBT older people have local chapters around the country. See page 28 for a list.

“Although the LGBT movement has gained rapid acceptance in the last few decades, LGBT older adults can still feel isolated and fearful of accessing services due to the discrimination they have faced throughout their lives. Being able to discuss one’s sexual orientation and/or gender identity with providers increases the availability of an older adult’s social support, which is crucial to mental health and successful aging overall. Staff training is key to increasing understanding and addressing the unique needs of our LGBT older adults. The goal of such training is to ensure that the attitudes, actions, and practices of service providers contribute to the creation of aging services that support the safety, inclusion, and welfare of our LGBT older adults, their families, and their caregivers.”

Terri Clark, MPH

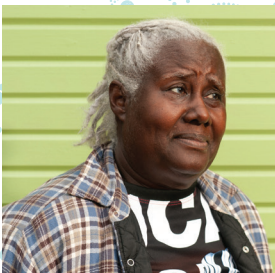
Prevention Services Coordinator
Action Wellness
Philadelphia, Pennsylvania

Outreach

Once you organize some programs for LGBT older adults, make sure everyone knows about them!

Outreach Checklist

- Prominently list older adult programs in your organization's calendar, newsletter or other outreach materials.
- Advertise your programs in local community newspapers that have senior sections.
- Ask your aging services community partners to help spread the word to their participants.
- Be sure to include your local Area Agency on Aging, Senior Centers, Ombudsman's office, and community organizations that support older adults and their caregivers.
- Co-sponsor or volunteer to speak at aging network organizations' events and programs, as well as events that reach out to other diverse people. (Aging network organizations are responsible for serving and representing the needs of older people.)
- Place employee want ads in aging network and people of color materials, newspapers, media, social media and organizations, to help build a diverse staff.



SAGE's National Resource Center on LGBT Aging offers an interactive tool to help you find resources for older adults in your state. Search by state or by type of service. Visit the Local Resources section at lgbtagingcenter.org.



“One of the biggest difficulties I see with our older adults is isolation or loneliness. LGBT older people are often estranged from their families of origin, and while they have close friends, those friends are usually the same age and facing the same challenges. So their support networks are frail. LGBT older adults also don’t feel comfortable in LGBT spaces, such as bars. It’s important to have a dedicated space where they can meet other older people, socialize and make friends. Our most popular program is a discussion group. Attendees love having a place where they can express themselves, where they’ll be heard. In addition, lunch is the core of our programming. We schedule programs on health, finances, employment and more, before and after lunch so that attendees can make a day of it—some of our attendees come from far away. I encourage other LGBT organizations to expand their programs in a holistic way to address LGBT older people’s needs, including health and spiritual and vocational well-being. It can be more difficult to coordinate, and take awhile to build, but that’s okay, as long as you are addressing the interests of the LGBT older adults in your community.”

Britta Larson
Director of Senior Services
Center on Halsted
Chicago, Illinois



“The Los Angeles LGBT Center established its Senior Services Department in 1998 and in 2008 our Board, in recognition of the greying of our community, prioritized the department as part of the organization’s strategic plan. Older LGBT men and women have a desire to see themselves reflected in the community, and that is exactly what our program and services do. We provide our elders with over 160 educational, enrichment and social programs each month, as well as safe-affordable housing for LGBT people 62+, support groups, case management services, and programs for LGBT Veteran seniors.

Senior Services is located at the Center’s Village in Hollywood where the bulk of our activities takes place. Programming is also provided daily for our residents at the Triangle Square Apartments, weekly in North Hollywood at MCC and now at our new location Mi Centro, located in Boyle Heights. Senior Services continues to provide cultural competency trainings throughout Southern California to ensure LGBT seniors receive culturally appropriate services throughout the region. This has cultivated a larger network of community organizations providing programs for LGBT seniors.

In March, 2017, The Center broke ground on its new facility, The Anita May Rosenstein Campus. This will be an intergenerational project for youth and seniors including a dedicated Senior Services facility as well as 100 units of affordable housing for LGBT seniors. The facility is scheduled to open in early – mid 2019.”

Tripp Mills

Deputy Director, Senior Services
Los Angeles LGBT Center
Los Angeles, California

CREATING AND SUSTAINING A WELCOMING ORGANIZATIONAL CULTURE

Policies and Procedures to Address Bias

To make lasting change in an organization, it is essential to have policies in place that support respect, inclusion, safety and advocacy for LGBT older adults. Personnel at every level of an organization must play a role in ensuring that the organization's culture, mission and vision are inclusive of LGBT and other diverse older adults.

LGBT organizations are often already engaged in significant diversity and inclusion work. Staff from different parts of the organization should work together to review current policies and diversity work to see how they can be modified, revised, or improved to address LGBT older adults. It is also critical to provide training and support to employees, volunteers, and participants about how they contribute to creating inclusion. For new employees, set aside time during orientation to detail your organization's commitment to LGBT older adults and the policies that support this goals. Remind staff, volunteers, and other participants that while they are entitled to their own beliefs, ageist language and behaviors will not be tolerated.

Involving people at every level of your organization in reinforcing an inclusion policy will mean that they need to give or receive feedback about biased behaviors. When addressing discriminatory remarks or behaviors made by others, staff and participants may fear retribution, have concerns about offending the person they are confronting, or not know how to address bias. Yet this is a vital step toward creating a safe and inclusive environment. Every person involved in service provision should be trained on how to confront bias, and procedures on how to address bias should be put in place.

Policies and Procedures Checklist

- Create ongoing monitoring and safe mechanisms for staff, volunteers, and participants to report and address biased behavior. These mechanisms should empower people at all levels of the organization to address bias, and set up an expectation that they will act on any discrimination they witness and follow up with the people affected by the biased behavior.
- Allow opportunities for staff to practice their skills, knowledge, and attitudes to increase comfort when working with the diverse LGBT community.
- Establish a wide range of champions—people who represent the diversity you wish to see in your organization—who can serve as resources and support for staff, volunteers and participants as they work toward inclusion.
- Put the practices, such as the ones described in this guide, in place to support inclusion and safety of older LGBT adults and educate staff, volunteers, and participants on these practices. Ensure that organizational leaders model these practices and the addressing of bias.
- Dedicate time during new employee orientation and the annual in-service calendar to include reinforcement of inclusion and safety practices.



SAGE's National Resource Center on LGBT Aging offers trainings for all levels of staff on how to create age-friendly LGBT organizations. Find out more at lgbtagingcenter.org/training.

Cultural Competency Training

In addition to training on how to address bias, consider training for all staff on how to identify and address the needs of LGBT older adults. Staff members need to participate in training programs with trusted and credible trainers who can impart important knowledge about working with LGBT older people and their intersecting identities of race, ethnicity, culture. The National Resource Center on LGBT Aging can help you connect with training on topics such as ageism, caregiving, housing rights, and the unique needs of LGBT older adults, including some trainings developed specifically for LGBT organizations.

You might also consider training or seminars on working generally with older adults. Such training could cover the range of services available to meet older adults needs, policy issues affecting older people, or disability awareness (e.g., working with older adults who have hearing or vision problems, or mobility issues).

Evaluation

LGBT organizations should continually review and assess their effectiveness in responding to LGBT older adults' needs. If possible, create a system to collect feedback from participants on your inclusion work. The data collected from LGBT older adults will be especially helpful because they are best suited to offer immediate and tangible ways that services and programs can be tailored to their needs.

Policies and Procedures Checklist

- Have conversations with LGBT older adult participants about how well they feel your organization is doing.
- Ask members within your community who work with LGBT older adults for recommendations for effectively engaging this population.
- Form a group of participants and/or staff who can provide internal and ongoing feedback on how your organization's work to serve LGBT and other diverse older adults.
- Create and distribute informal or formal surveys to capture data about the needs, interests and experiences of diverse older adults in your organization.
- Create and distribute workforce surveys for the organization's staff to understand how prepared they are to serve LGBT older adults, and what resources they feel they need for this work.
- Ask family members, friends and other support networks of your participants about the efficacy of your organization's services.



Evaluate Us!

SAGE's National Resource Center on LGBT Aging wants to know what you thought of this guide, and how you used it. Your feedback is an important part of our work to improve the lives of LGBT older adults across the country. Visit <https://www.surveymonkey.com/s/SafeSpaces> and let us know.

CONCLUSION

LGBT older adults deserve to age with dignity and respect, and LGBT organizations can play an important role in improving their quality of life. We hope that this guide has given you the information and inspiration you need to ensure that every LGBT person remains an active and vital part of the LGBT community as they age. SAGE's National Resource Center on LGBT Aging is committed to providing community organizations with the tools and resources necessary to serve LGBT older people. For further guidance about the topics covered in this guide and other information related to LGBT aging, please call SAGE at 212-741-2247, or visit our websites: sageusa.org and lgbtagingcenter.org.

RESOURCES

Organizations that Support LGBT Older People

The following are organizations for LGBT older adults that have local chapters across the country, or where you can find more information on LGBT aging. Visit the *Local Resources* section at SAGE's National Resource Center on LGBT Aging (lgbtagingcenter.org) for additional organizations and government agencies that support older people.

SAGENet

sageusa.org/sagenet

SAGENet is the local affiliate network of SAGE (Services and Advocacy for GLBT Elders). SAGENet affiliates provide community programs, social services and more to LGBT older adults in several locations around the country.

FORGE Transgender Aging Network

forge-forward.org/aging

The Transgender Aging Network (TAN) exists to improve the lives of current and future trans/SOFFA (Significant Others, Friends, Family and Allies) elders through advocacy, research, and promoting awareness of transgender aging issues.

GRIOT Circle

griotcircle.org

GRIOT Circle is an inter-generational, culturally diverse community based organization serving the needs of lesbians, gay men, and bisexual and transgender elders of color over the age of fifty.

LGBT Aging Issues Network

asaging.org/lain

American Society on Aging's constituent group who are professionals working to raise awareness about the concerns of lesbian, gay, bisexual and transgender (LGBT) elders.

LGBT Aging Project

lgbtagingproject.org

Dedicated to ensuring that lesbian, gay, bisexual and transgender older adults have equal access to the life-prolonging benefits, protections, services and institutions that their heterosexual neighbors take for granted.

Old Lesbians Organizing for Change (OLOC)

oloc.org

Provides Old Lesbians with the chance to meet like-minded women in our common struggle to confront ageism, to share mutual interests, and to experience the joy and warmth of playing and working together.

Openhouse

openhouse-sf.org

Openhouse enables San Francisco Bay Area LGBT seniors to overcome the unique challenges they face as they age by providing housing, direct services and community programs.

Prime Timers Worldwide

primetimersww.com

The Prime Timers is a social organization that provides older gay and bisexual men the opportunity to enrich their lives.

“To organizations just starting out, find a local aging organization that is welcoming and engaging and partner with them. You’ll hear people saying that they don’t know any LGBT older adults, or they don’t serve them, but you just need one senior center or church or community group to open up the door. From there, you can expand your outreach to other organizations, present statistics, and talk about how having even one safe space can make all the difference to LGBT older adults. The process may seem slow, but remember that even though you may start with only 1 or 2 people, that’s 1 or 2 lives you’re saving.”

Irene Tsikitas

Director of Programs and Services

Triangle Community Center

Norwalk, Connecticut

GLOSSARY OF AGING TERMS

Area Agency on Aging (AAA): A nationwide network of state and local programs that help older people plan and care for their lifelong needs. Services include information and referral for in-home services, counseling, legal services, adult day care, skilled nursing care/therapy, transportation, personal care, nutrition and meals.

Assisted Living: Residential setting that provides varying levels of help and support for its residents including regular supervision, social activities, and health-related services.

Caregiver: A friend, family member, or other unpaid person who provides direct assistance to someone who is ill, disabled, or needs help with daily activities. Sometimes called a *Family Caregiver*.

Continuing Care Retirement Community (CCRC): A large complex of housing units divided into levels of care including independent living, assisted living, skilled nursing care, providing services associated with all the different living situations. CCRCs allow residents to be a part of a continual community instead of moving and transitioning as their health necessitates.

Council on Aging: A private, nonprofit organization or public agency that serves as a county focal point on aging and traditionally provides supportive services to older adults (located in some, but not all counties). Sometimes they serve as advisory boards to the municipal senior centers.

Geriatric Care Manager: A health and human services professional who helps older adults and their caregivers by assessing an individual's needs and conditions to help create a comprehensive care plan and arrange for services such as housing, medical assistance, and other services as needed.

Home Care: A service that assists those in need of in-home supports to continue living and functioning from the comfort of their own home. The home care model of care can include both professional and informal supports such as family, neighbors, and friends.

Home Health Care: Medical services provided to patients in the home. Professional nurses, doctors or other licensed medical professionals provide this type of medical care.

Long-Term Care: A continuum of care both medical and social for those with chronic illness.

Meals on Wheels: A meal plan service, usually subsidized, and run by a social services department or volunteer organization, which delivers hot meals to the elderly, ill, or homebound people who might otherwise be unable to have them.

Medicare: A national federally sponsored social insurance program created in 1966. Medicare works with private insurance companies to provide access to insurance for adults 65 and older and younger adults with disabilities. Medicare has 4 parts; Part A is largely funded through the payroll tax.

Medicaid: Medicaid is a joint federal and state program that helps with medical costs for some people with limited income and resources, including children, pregnant women, parents, elders and individuals with disabilities. Medicaid also offers benefits not normally covered by Medicare, such as nursing home care and home health services.

Nursing Home/Skilled Nursing Facility: A privately operated establishment where maintenance and personal or nursing care are provided for persons who are unable to care for themselves properly; a facility for care (usually long-term) of patients who are not sick enough to need hospital care but are not able to remain at home.

Older Americans Act: Created in 1965, this act provides funding for adults 60 and over for services involving supportive home and community settings, health promotion services, elder rights programs and personal care.

Older, Elder, Senior: Usually refers to adults age 65 and older, though sometimes the exact age differs depending on the context. (See page 31 for the preferred term LGBT older adult.)

Rehab Services: The process of helping a person who has suffered an illness or injury restore lost skills and so regain maximum self-sufficiency. For example, rehabilitation work after a stroke may help the patient walk and speak clearly again.

Senior Center: A community resource center where older adults come together for services and activities. It is a place where older adults can come find support, address needs and interests, and find ways for involvement in and with the center and the community.

Senior Citizen: Typically senior citizens are defined as persons over the age of 60 years of age. People are said to be senior citizens when they reach the age of 60 or 65 because those are the ages at which most people retire from the workforce. (See page 31 for the preferred term LGBT Older Adult.)

Social Security: Act signed into law in 1935 that was designed to pay retired workers over the age of 65 a continual income.

State Unit on Aging: State Units on Aging are agencies of state governments designated by the governor and state legislature as focal points for all matters relating to the needs of older adults within that particular state.

Title III: A breakdown of the funding of the Older Americans Act. Specifically, Title III addresses community-based programs and nutrition based programs including Meals on Wheels and congregate meal sites.

Visiting Nurse Association (VNA): A certified Home Health Agency with a community Board of Directors providing nursing care, rehabilitation therapies and Home Health Aide service in the community. Certified means approved by the Department of Public Health for reimbursement under Medicare, Medicaid and other insurance policies.

GLOSSARY OF LGBT TERMS**

Acquired Immune Deficiency Syndrome (AIDS)

The last stage of the infection from Human Immunodeficiency Virus (HIV) that attacks a person's white blood cells. This means they can no longer fight off sickness and disease.

Ally

A person who works for social change for a group that faces injustice or disadvantage. The ally is not a member of that oppressed group but supports and fights for equality on behalf of the group, e.g. heterosexuals who support LGBT rights.

Bisexual, Bi*

An individual who is physically, romantically, and/or emotionally attracted to both men and women. "Bisexual" does not suggest having equal sexual experience with both men and women. In fact, some people who identify as "bisexual" have not had any sexual experience at all.

Cisgender

Individuals whose gender identity and/or gender expression do align with their biological or assigned sex. If someone was assigned the sex female at birth and lives comfortably as a woman, she is likely cisgender.

Closeted, In the Closet or Stealth*

Describes a person who does not share with others, or only shares with a few "safe" people, that they are lesbian, gay, bisexual and/or transgender.

Coming Out*

A lifelong process of self-acceptance of one's sexual or gender identity that may include a sharing of that identity with others. How much people are "out" may differ by setting, people they are with, and life stage. The coming out process is unique for each individual, and is the choice of each individual. LGBT older adults often hide their sexual orientation or gender identity from their health care and social service providers (do not "come out") for fear of being treated badly.

Discrimination*

Unfair and unequal treatment in favor of or against an individual or group based on group identity; e.g. African American, female, Arabic, youth, or LGBT. Discrimination is the actual behavior towards the individual(s).

Dyke

Slang for a lesbian. It originated as a negative label for a masculine or butch woman, and this usage still exists. It has been reclaimed by some as a positive word.

Faggot/Fag

An offensive, negative slang sometimes used to describe gay men.

Family of Choice

Diverse family structures usually created by LGBT people, immigrants, and racial or ethnic minorities, that include but are not limited to life partners, close friends, and other loved ones not biologically related or legally recognized but who are the source of social and caregiving support.

Family of Origin

The family in which a person grows up, or the first social group a person belongs to, which is often a person's biological family or an adoptive family.

Gay*

A word used to describe anyone, mainly men, who have primary physical, romantic, and/or emotional attraction to someone of the same sex, e.g., gay man, gay people. Many gay people prefer this term over "homosexual" which retains negative connotations. Lesbian can be a preferred term for a gay woman. While younger men may use the term "queer," this term is generally considered offensive to older people.

Gender

A person's internal sense of being male, female or another gender. A person may choose to express their gender through culturally defined norms associated with male and female, which may or may not align with a person's internal gender identity or with the sex they were assigned at birth.

Gender Expression*

How a person outwardly expresses their gender identity and/or role; how they dress, walk, wear their hair, talk, etc. Typically, transgender people seek to make their gender expression match their gender identity, rather than their sex assigned at birth.

Gender Identity*

The gender you feel you are inside (man, woman, neither or both). For transgender people, their birth-assigned gender and their personal sense of gender identity do not match. Gender identity and sexual orientation are not the same. Transgender people may be heterosexual, lesbian, gay, or bisexual. For example, a transgender woman who was assigned a male gender at birth and is attracted to other women may self-identify as a lesbian.

Gender Role

Societal or ethnic/cultural expectations about how a person should dress, look, talk, and behave based on whether they are female or male.

Gender Perception

How observers classify a person's gender.

Going Stealth

A person living as a gender different from what was assigned to them at birth without people knowing or being able to tell that the person is transgender.

Heterosexual*

Used to describe people whose primary physical, romantic, and/or emotional attraction is to people of the opposite sex; also known as straight.

Heterosexism*

Belief that heterosexuality is the only "natural" sexuality and that it is inherently healthier or superior to other types of sexuality, including LGBT sexuality. The term refers to the negative attitudes, bias, and discrimination exhibited by people with this belief.

Homophobia/Transphobia/Biphobia*

Homophobia refers to a fear of lesbians and gay men. Biphobia is used to describe a fear of bisexual people. Transphobia is used to describe a fear of transgender people. These phobias reflect prejudice, hatred, antipathy, and avoidance toward lesbian, gay, bisexual and transgender people.

Homosexual

An outdated clinical, medical term that is no longer the preferred word used to describe someone who is gay or lesbian. It has taken on negative connotations because of its previous use as to denote a mental illness.

Hormone Therapy

Use of hormone treatments to create characteristics that reflect the sex with which a person identifies.

Identity or Self Identify

What people call themselves that expresses their internal reality. This may be different from external characteristics or how others might view them.

Lesbian*

A woman whose primary physical, romantic, and/or emotional attraction is to other women. Some lesbians may prefer to identify as gay (adj.) or as gay women. Many lesbians view “homosexual” as a derogatory term. While younger women may use the terms “dyke” or “queer,” these terms are generally considered offensive to older people.

LGBT/GLBT*

Acronym for lesbian, gay, bisexual and transgender. LGBT and/or GLBT can be used interchangeably.

LGBT Older Adults

The preferred term for LGBT people 65, the current standard age of retirement, or older. The term “older adults” may be preferable to “old,” “senior,” “elderly” or “aging” (terms which many don’t identify with personally). Also acceptable are “older LGBT people” or “LGBT older people” depending on context.

Lifestyle*

Term used to refer to lesbian, gay, bisexual, and transgender lives, generally considered offensive to LGBT people. Just as there is no one straight “lifestyle,” there is no one lesbian, gay, bisexual, or transgender lifestyle.

Minority Stress

The damaging physical and mental health effects of being stigmatized and/or the focus of prejudice and discrimination, which create a hostile and stressful environment.

Openly Gay*

Describes people who self identify as lesbian or gay in their personal, public and/or professional lives. Terms such as openly lesbian, openly bisexual, and openly transgender are also used. Sometimes referred to as being “out,” as in, “She is an out lesbian.” Openly gay people generally continue to scan each new environment for its level of safety before speaking of their LGBT identity.

Outing*

The act of publicly telling (sometimes based on rumor and/or speculation) or revealing another person’s sexual orientation or gender identity without that person’s consent. It is considered inappropriate by a large portion of the LGBT community, and can be very damaging socially, personally, and/or professionally to the individuals who are “outed.”

Partner

A nondiscriminatory and gender neutral way to describe one of the people in a committed, long-term relationship.

Queer*

Historically a negative term, it is now being used by some LGBT people—mostly younger ones and as a broader term—to describe themselves. However, it is not universally accepted even within the LGBT community and should be avoided unless quoting or describing someone who self-identifies that way.

Questioning*

A person who is unsure about his or her sexual orientation or gender identity.

Same-Gender Loving (SGL)*

A cultural term used most frequently in communities of color that affirms the same-sex attraction of men and women. The term may be favored by some over the labels gay, lesbian, or bisexual.

Sex*

The classification of people as male or female based on their anatomy (genitals or reproductive organs) and/or biology (chromosomes and/or hormones).

Sex Assigned at Birth

At birth, infants are usually given a sex designation of male or female by a doctor based on the child’s genitals.

Sex Reassignment Surgery

Surgery performed to create genitalia that reflect the sex with which a person identifies.

Sexual Orientation*

A person’s primary physical, romantic, and/or emotional attraction to members of the same and/or opposite sex, including lesbian, gay, bisexual and heterosexual (straight) orientations. It is the accurate term and should be used instead of the offensive term “sexual preference,” which conveys the suggestion that being gay or lesbian is a choice and therefore can be “cured” or changed.

Transgender*

An umbrella term for people whose gender identity and/or gender expression differs from the sex they were assigned at birth. The term may include but is not limited to transsexuals and cross-dressers. Transgender people may identify as female-to-male (FTM) or male-to-female (MTF). It is important to use the descriptive term (transgender, transsexual, cross-dresser, FTM or MTF) preferred by the individual. Transgender people may or may not decide to alter their bodies hormonally and/or surgically.

Transition

The process of changing genders in order to match the gender a person identifies as. This can include: Male to Female and Female to Male or Intersex.

Transsexual*

An older term that originated in the medical and psychological communities. While some transsexual people still prefer to use the term to describe themselves, many transgender people prefer the term transgender to transsexual. Unlike transgender, transsexual is not an umbrella term, as many transgender people do not identify as transsexual. It is best to ask which term an individual prefers.

Two-Spirit*

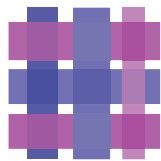
The term refers to LGBT people and reflects traditions among many Native American nations that accept and celebrate the diversity of human gender, spirituality, and sexuality.

*Adapted from the Gay & Lesbian Alliance Against Defamation (GLAAD) Media Reference Guide, www.glaad.org

**This glossary was developed using the following additional sources:

- *From Isolation to Inclusion: Reaching and Serving Lesbian, Gay, Bisexual and Transgender Seniors*, Openhouse LGBT Cultural Humility Curriculum for Senior Service Providers; Openhouse, San Francisco, CA. www.openhouse-sf.org/resources/training.
- LGBT Aging Project, Boston, MA. www.lgbtagingproject.org
- *LGBT Aging Health Issues*, Cook-Daniels, FORGE Transgender Aging Network, Milwaukee, WI. www.forge-forward.org/aging.
- *LGBT Aging: What Makes It Different? A Training Curriculum from the New York State Health & Human Services Network*, compiled and edited by SAGE, New York, NY. www.sageusa.org
- *Improving the Quality of Services and Supports Offered to LGBT Older Adults*, National Resource Center on LGBT Aging, New York, NY. www.lgbtagingcenter.org

**National
Resource
Center**



ON LGBT AGING

305 Seventh Avenue, 15th Floor
New York, NY 10001
212-741-2247
lgbtagingcenter.org
facebook.com/lgbtagingcenter
twitter.com/lgbtagingcntr or [@lgbtagingcntr](https://twitter.com/lgbtagingcntr)

**To support the National Resource Center on LGBT Aging,
visit lgbtagingcenter.org/donate**

The National Resource Center on LGBT Aging is supported, in part, under a cooperative agreement from the U.S. Department of Health and Human Services, Administration on Aging. Grantees undertaking projects under government sponsorship are encouraged to freely express their findings and conclusions. However, these contents do not necessarily represent the policy of the U.S. Department of Health and Human Services, and endorsement by the Federal Government should not be assumed.

© SAGE (Services and Advocacy for GLBT Elders), 2017, All rights reserved.