

# Top Ten Concerns of Older LGBT Adults

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A Survey conducted by:  
The Worcester LGBT Elder Network  
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# Executive Summary

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## *Executive Summary*

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When the Massachusetts Commission on LGBT Aging announced it would hold four Listening Sessions across the state, the Worcester LGBT Elder Network decided to survey older LGBT adults about their Top 10 Concerns as they age. We opened the survey on Survey Monkey in late July and closed it in early September. We asked people to rank their Top 10 Concerns out of 18 commonly heard complaints. Seventy-three people responded with 69 completing the survey. This was not a scientific survey. Given the mode of distribution, respondents self-selected to complete the survey. In fact, our respondents showed themselves to be overwhelmingly Caucasian and well educated. Their input should nonetheless be helpful to the Commission as it deliberates and continues to listen to the LGBT community concerning resources for older adults.

To rank the Top 10, we took the first 10 concerns out of 18 that received the most votes numerically and then sorted them by the rating average supplied by Survey Monkey. Here are the results:

1. Staying independent
2. Loss of partner
3. Financial stability
4. Isolation and loneliness
5. Going to a nursing home
6. Declining health
7. Affordable housing
8. Health insurance coverage
9. Not being able to drive
10. Needing help with personal care

All 10 concerns reverberate throughout the general aging population. They can have different implications for the LGBT community because of the differences in social support systems experienced by LGBT older adults. Nearly half (42%) of the respondents told us they were 55 to 64, not the age one expects someone to be overly worried about the first and fourth concerns on the list: **staying independent** or **isolation and loneliness**. The two are related in that more LGBT older adults face life alone than do their contemporaries in the general population.<sup>1</sup> Staying independent is one defense against loneliness and isolation.

No. 2, **loss of partner**, is something almost every older adult who is coupled worries about. As we age, we face evidence of our own mortality daily. Loss of a loving partner who has shared the ups and downs of life is indeed a fearsome thing to contemplate. For LGBT elders the possibility of marriage to a same-sex partner has been possible here in Massachusetts for 10 years. Commitment to a partner, however, has always been a part of LGBT life. Relationships that have lasted decades are far more common than the general public thinks. It wasn't until the advent of marriage equality



that LGBT elders have been able to celebrate their relationships publicly. When a partner dies, the social support system of the survivor is critical to the widowed partner's grieving process. Grief support groups designed for LGBT people are an important service for the survivor.

In the five years that WLEN has been active, we have heard anecdotally from baby boomers (people born between 1946 and 1964) that they are concerned about who is going to take care of them in old age and what services will be available when they need them. One interesting change in the last 10 years has been the acceptance of same-gender marriage equality. Nearly half (46%) of the respondents told us that they were currently married. **Financial stability**, third on our list of Top 10 Concerns, is more common for married couples than for single people.<sup>2</sup>

The differences in social support systems for LGBT people center on family. Many LGBT older adults are estranged from their birth families and depend on families of choice, circles of friends who look after each other. More than a third of our respondents told us they were single, divorced or widowed. Being married or partnered not only contributes to financial stability but to overall wellness. **Declining health** is sixth on the list of Top 10 Concerns.

**Going to a nursing home**, No. 5 on our list, is high on almost every older person's list of concerns. Despite advances in long-term care, admission to a nursing home strikes at the No. 1 concern, **staying independent**. It also has a lot to do with the No. 3 concern of our respondents, **financial stability**. Recent polls indicate that very few people approaching their 60s and 70s have purchased long-term care insurance.<sup>3</sup> Most rely on spending down their assets and qualifying for Medicaid as a way to afford long-term care if they should ever need it. The best improvements in long-term care come with the most expensive settings. LGBT older adults are less likely to be able to afford these amenities than their contemporaries in the general population. Besides the prospect of losing one's independence and health (Nos. 1 and 6 of the Top 10 Concerns), memories of less than optimal conditions surrounding parents' and friends' last days in nursing homes color older LGBT people's fear of going into a nursing home.

The aging services world has as one of its top priorities keeping elders in their homes as long as possible. People thrive better in the familiar surroundings of home, and an active lifestyle is the best defense against the deprivations of aging. Our respondents reflected these facts in the high priority they gave our seventh concern: **affordable housing**. LGBT elders worry about high tax rates on homes they own or high rents for apartments. Low- and moderate-income housing is in high demand generally and has long waiting lists. There are no housing developments marketed specifically to the older LGBT population in Central Massachusetts. Those that do exist elsewhere are almost exclusively up-market housing and out of reach for most LGBT elders.

**Health insurance coverage**, No. 8, is on everybody's minds as we watch implementation of the Affordable Care Act unfold. Some people fear that Obamacare will be too expensive for individuals and the nation; others, especially those with chronic diseases, worry that the new insurance models won't cover all their needs. Overshadowing these worries are concerns for the long-term financial viability of Medicare on which almost everyone over 65 depends. Because so many LGBT older adults experienced long periods of unemployment or underemployment, many don't have the extra coverage of supplements to Medicare provided by employers. People worry about how they would



pay unexpected high medical bills. The worry is compounded for lower-income people, the so-called working poor, who don't qualify for MassHealth. Many of them can't afford preventive care and end up with worse and more expensive health conditions.<sup>4</sup>

Who among us isn't worried about **not being able to drive**, No. 9 of the Top 10? The automobile is central to American culture. Driving means independence. Without transportation people get out less and have smaller social circles, which carry a higher risk for isolation. While some could rightly argue that not being able to drive is a subset of staying independent (No. 1) and isolation and loneliness (No. 4), driving is so iconic in our American way of life that respondents to our survey singled it out for inclusion in their own personal Top 10 Concerns.

No. 10, **Needing help with personal care** is a general concern for the whole LGBT older population. Many are afraid that they will be mistreated if it is known that they are gay, and personal care is where they fear it will happen.<sup>5</sup> **Needing personal care** terrifies many in the transgender community, especially those whose bodies don't match their gender expression. Many transgender people avoid medical providers for fear of being mistreated when the incongruence between their bodies and their presentation is discovered. Reaching a point where they must depend on others to bathe and dress them is extremely worrisome.<sup>6</sup>

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<sup>1</sup> "The Issues: Social Isolation." SAGE (Services and Advocacy for Gay, Lesbian, Bisexual & Transgender Elders). <http://www.sageusa.org/issues/isolation.cfm> Accessed August 30, 2014.

<sup>2</sup> LGBT Movement Advancement Project (MAP) et al. "Improving the lives of LGBT older adults," March 2010, pp. 11-12. <http://www.lgbtmap.org/file/improving-the-lives-of-lgbt-older-adults.pdf>. Accessed August 30, 2014.

<sup>3</sup> Ujvari, Kathleen. "Long-Term Care Insurance: 2012 Update" (Fact Sheet 261), AARP Public Policy Institute, June 2012. [http://www.aarp.org/content/dam/aarp/research/public\\_policy\\_institute/ltc/2012/ltc-insurance-2012-update-AARP-ppi-ltc.pdf](http://www.aarp.org/content/dam/aarp/research/public_policy_institute/ltc/2012/ltc-insurance-2012-update-AARP-ppi-ltc.pdf). Accessed August 30, 2014.

<sup>4</sup> Fredriksen-Goldsen, Karen I., et al. "The Aging and Health Report: Disparities and Resilience among Lesbian, Gay, Bisexual, and Transgender Older Adults." Seattle: Institute for Multigenerational Health, 2011. p. 33. <http://caringandaging.org/wordpress/wp-content/uploads/2011/05/Full-Report-FINAL-11-16-11.pdf>. Accessed August 30, 2014.

<sup>5</sup> Lewis, Mimi. "Fear and Anxiety in Long Term Care: The particular case of LGBT older adults." Center for Advocacy for the Rights and Interests of the Elderly: March 3, 2014. <http://www.carie.org/fear-anxiety-long-term-care-particular-case-lgbt-older-adults/>. Accessed August 30, 2014.

<sup>6</sup> Tobin, Harper Jean. "Long-term Services and supports for Transgender People." National Resource Center on LGBT Aging, May 2012. <http://www.lgbtagingcenter.org/resources/resource.cfm?r=511>. Accessed August 30, 2014.