

Briefing 4

Older lesbian, gay and bisexual (LGB) people



(a) What are older LGB people's health needs?

Older people are overwhelmingly perceived to be heterosexual; consequently, older lesbian, gay and bisexual (LGB) people have often been invisible in service provision for older people. Older LGB people's needs may be, in some respects, no different from those of other older people: for example, their safety and physiological needs may be addressed by physical adaptations to their home. However, other needs are often overlooked in planning care, such as opportunities for maintaining social networks.

Older LGB people may have a greater need for health and social care services because, compared with their heterosexual contemporaries, they are:

- two-and-a-half times as likely to live alone;
- twice as likely to be single; and
- four-and-a-half times as likely to have no children to call upon in times of need.¹

One of the biggest concerns for all older people is the possibility of needing residential care. But for older LGB people, there is no dedicated accommodation in the UK. Some care staff and other residents may hold discriminatory attitudes² towards older LGB people, which are particularly problematic when they live in close proximity. In smaller accommodation or extra care housing, an older LGB person may be the only non-heterosexual person living in the home, which may mean that they become isolated and hide their sexual orientation.

The introduction of the Civil Partnership Act 2005 gave same-sex couples similar rights to those enjoyed by heterosexual married couples; this means that same-sex couples are eligible to occupy accommodation together in extra care sheltered accommodation and in residential care homes.



(b) Communicating and engaging with older LGB people

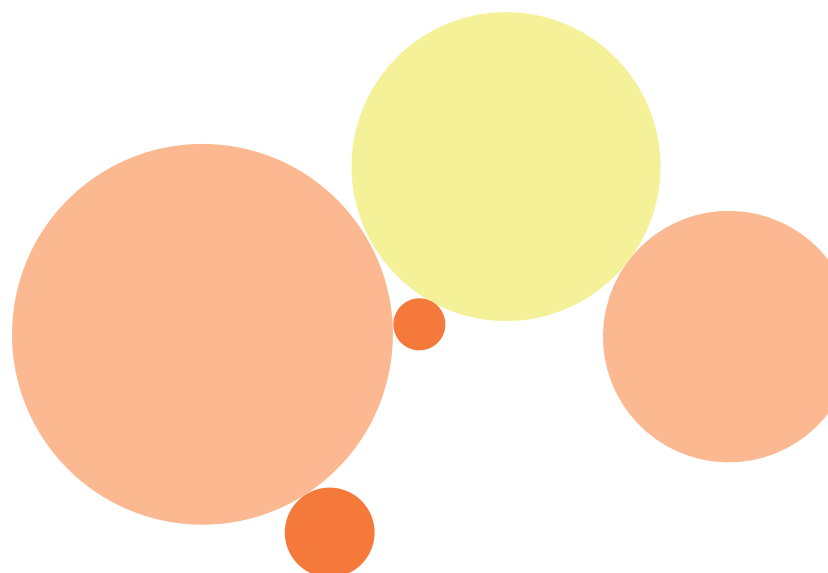
Many health and social care providers claim not to have worked with older LGB people. Older LGB people may feel particularly vulnerable about being open about their sexual orientation. Passing as heterosexual has often been a necessary survival strategy for older LGB people who have lived in times when same-sex behaviour was criminalised and they risked the loss of their jobs, their children or contact with their family of origin.

Community safety concerns are increased for older people, who feel more vulnerable to harassment or attack due to their age. Users of older people's facilities are often reluctant to 'come out' because other older people may pass on this information to the community at large.

They may also use different terms to describe themselves and their relationships, for instance referring to 'my friend'. Furthermore, only 14% of older LGB people are open about their sexuality with healthcare providers.³

Older LGB people are unlikely to discuss their sexual orientation, while staff assume heterosexuality and fail to mention LGB issues. Questions about relationships and histories need to be asked in inclusive language and the assessment process should be sensitive to the value that both single older LGB people and those in couples place on their identities and community links.

Levels of disclosure are likely to change in the future; increasingly LGB people are living open lives, making it less likely that they will be closeted in later life. Higher numbers of visible older LGB people will expect service providers to be able to commission appropriate services.



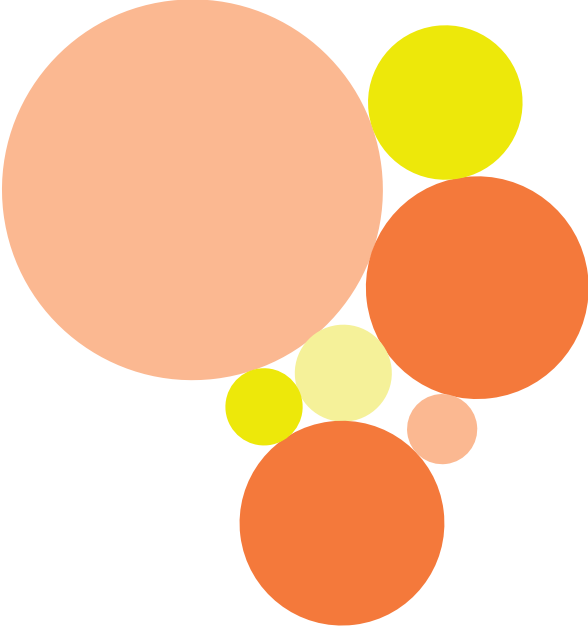


(c) Evidence and statistics

Violence and victimisation

- 36% of LGB people (aged 60–91) had been subjected to verbal abuse.¹
- 44% of men and 16% of women had been physically attacked (gay and bisexual men were three times more likely than lesbian and bisexual women to be physically attacked).¹
- Lower self-esteem and increased thoughts of suicide were associated with experiences of violence.¹

Perceptions of health and social care professionals

- Only 25% of older LGB people believed that health professionals were positive towards LGB people.³
 - Only 16% trusted health professionals to be knowledgeable about LGB lifestyles.³
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(d) Policy/legislation

There are two pieces of legislation that directly impact on the lives of older LBG and trans (T) people in receipt of services.

Equality Act (Sexual Orientation) Regulations 2007

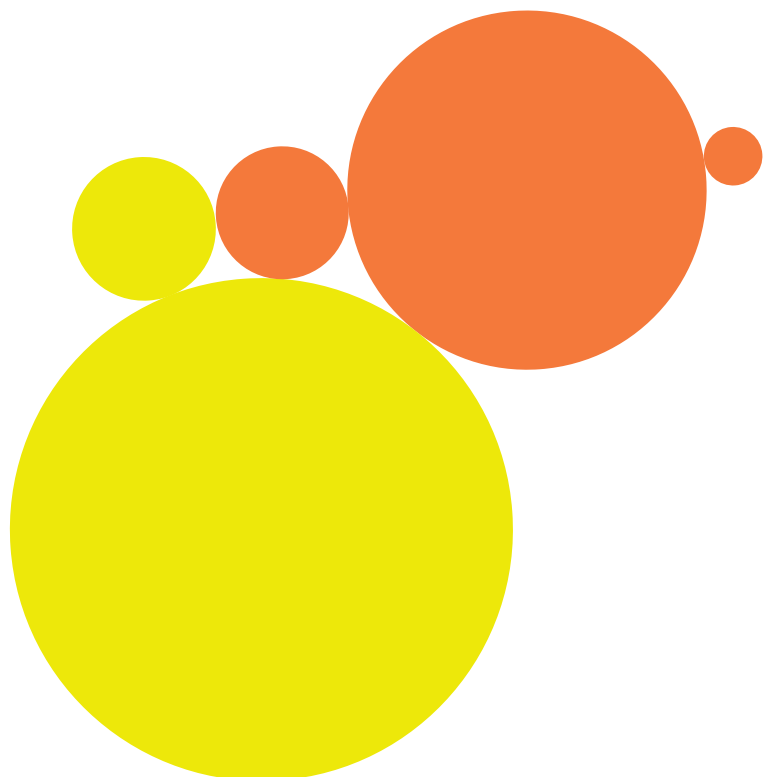
LGB people are offered protection against discrimination in the provision of goods and services. Providers will need to ensure that services do not directly or indirectly discriminate against older LGB people.

Amendment to the Sex Discrimination Act 1975

The Government is committed to amending the Sex Discrimination Act before the end of December 2007 to prohibit discrimination on the grounds of gender reassignment in the provision of goods and services (including health and social care).

Governance and standards

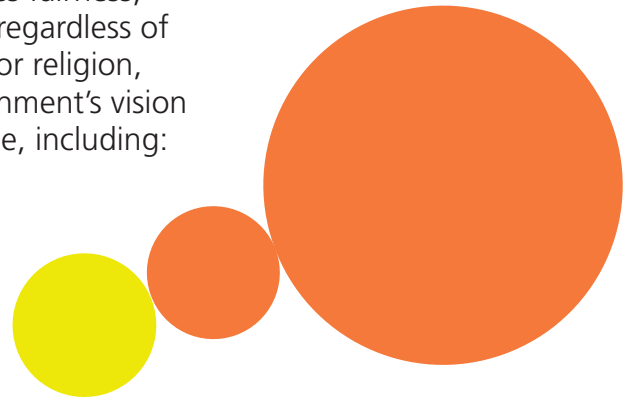
The Commission for Social Care Inspection (CSCI) regulates 27,000 services, including residential and nursing homes, adult placement schemes, fostering and adoption services and domiciliary care services. Its Equalities and Diversity Strategy (published in August 2006) specifically includes sexual orientation and gender identity and includes proposals from the LGBT Workers Group. Staff have undertaken training from Stonewall about providing inclusive services. More information on CSCI is available at: www.csci.org.uk



(e) Implications for policy makers

Our Health, Our Care, Our Say (Department of Health, 2006)⁴ makes a commitment to a health and social care system that promotes fairness, inclusion and respect for people from all sections of society, regardless of their age, disability, gender, sexual orientation, race, culture or religion, and in which discrimination will not be tolerated. The Government's vision identifies a number of outcomes relevant to older LGB people, including:

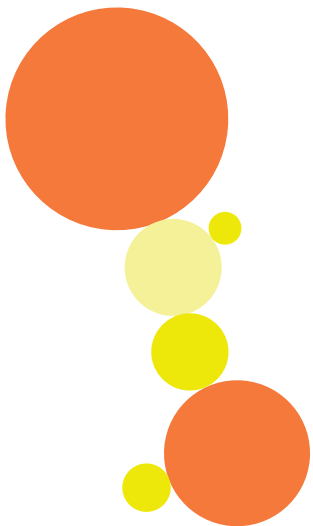
- improved quality of life;
- freedom from discrimination or harassment;
- personal dignity; and
- the exercise of choice and control.



(f) Implications for service commissioners and providers

Our Health, Our Care, Our Say promises to transform current practice, where too often older people are only offered services that are available and not those that they would choose. The diverse preferences of older LGB people may include support options not currently offered. Older LGB people are less likely to depend on family carers and more likely to want services designed so that diverse networks of supportive friends are recognised and involved.

*Health Reform in England*⁵ (2006) sets out a national commissioning framework which will be developed across all health, social care and voluntary and community sector partners to achieve a balance between preventative and intensive services. Solutions on how to do this will not be imposed because decisions about commissioning models should be made locally. The White Paper makes clear, however, that doing nothing is not an option. Service users must be involved in the design of services. Examples of how services should be designed include extra care that will allow older people to continue to live in their own homes, with a range of facilities to meet their support needs, rather than having to move to a residential care home.



(g) Links and resources

Planning for later life as a lesbian, gay man or bisexual person

This information sheet, published by Age Concern in 2005, covers bereavement and registration of death, care services at home, caring for an ill or disabled partner, housing and residential care, inheritance, next of kin status, partnership rights, hate crime, tenancy, wills and intestacy.

www.ageconcern.org.uk/openingdoors

The Whole of Me: Meeting the needs of older lesbians, gay men and bisexuals living in care homes and extra care housing

This resource pack offers practical suggestions for good practice and addresses concerns staff may have that prevent them from making changes.

www.ageconcern.org.uk/openingdoors

The Lesbian and Gay Alzheimer's Society Carer's Network

The network provides support for lesbian and gay carers. Its website gives advice on choosing residential accommodation and examples of good practice in social care.

www.alzheimers.org.uk/Gay_Carers/residentialcare.htm

Lesbian and Gay Bereavement Project

Tel: 020 7403 5969

Polari

Polari works for better services for older LGBT people and provides resources and articles relevant to LGBT ageing.

www.polari.org

Berkshire Older Lesbian and Gay Forum

www.bolgaf.org.uk

Lesbian Information Service

www.lesbianinformationservice.org

The Metro Centre

The Metro Centre hosts a 50+ group in London for LGB people over the age of 50.

www.metrocentreonline.org/m_50.htm



(h) References

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2. Johnson, MJ, Jackson, NC, Arnette, JK and Koffman, SD (2005) Gay and lesbian perceptions of discrimination in retirement care facilities, *Journal of Homosexuality*, 49(2): 83–102.
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4. Department of Health (2006) *Our Health, Our Care, Our Say*, Department of Health, London.
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(i) Further reading

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Bayliss, K (2000) Social Work Values, Anti-discriminatory Practice and Working with Older Lesbian Service Users, *Social Work Education*, 19(1): 45–53.

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Langley, J (2001) Developing anti-oppressive empowering social work practice with older lesbian women and gay men, *British Journal of Social Work*, 31(6): 917–32.

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