

LGBT Seniors in the District of Columbia

It is estimated that up to 3.5 million Americans over the age of 65 are lesbian, gay, bisexual, or transgender (LGBT)¹ or almost 16% of that population.² A major challenge facing LGBT seniors nationwide and in the District is the threat of discrimination and economic insecurity, as well as a lack of traditional support networks and proper healthcare. In fact, LGBT seniors who live alone are at increased risk for depression, substance abuse, unnecessary institutionalization, and premature death.³

Support

- A 1999 study found that 65% of gay and lesbian seniors surveyed reported living alone — nearly twice the rate of all seniors. The study also found that 90 percent of gay and lesbian seniors had no children, compared to 20 percent of all seniors.⁴
- According to a 2005 survey, more than a quarter of LGBT baby boomers reported great concern about discrimination as they age. Less than half expressed strong confidence that healthcare professionals will treat them “with dignity and respect.”⁵

Barriers to Care

- LGBT seniors may be more likely to face poverty and economic insecurity, and therefore not be able to afford quality care.⁶
- There is a lack of quality health insurance among LGBT seniors. They are also very unlikely to receive supplemental coverage through their partners’ plans, which is important for prescription drug coverage.⁷
- LGBT individuals face income discrimination. Gay men earn up to 32% less than heterosexual men. 14% of LGBT individuals make less than \$10,000, more than double the proportion of the general population.⁸ Also, lesbian couples over the age of 65 are twice as likely to live in poverty than any other household.⁹

¹ Services & Advocacy for GLBT Elders. “No Need to Fear, No Need to Hide: A Training Program about Inclusion and Understanding of Lesbian, Gay, Bisexual, and Transgender Elders.” 2004; 150.

² U.S. Census Bureau. “Annual Estimates of the Resident Population by Sex and Selected Age Groups for the United States: April 1, 2000 to July 1, 2008.” <<http://www.census.gov/popest/national/asrh/NC-EST2008-sa.html>> Accessed on 25 September 2009.

³ Services & Advocacy for GLBT Elders. “No Need to Fear, No Need to Hide: A Training Program about Inclusion and Understanding of Lesbian, Gay, Bisexual, and Transgender Elders.” 2004; 4.

⁴ Cahill, S., K. South, J. Spade. “Outing Age: Public Policy Issues Affecting Gay, Lesbian, Bisexual, and Transgender Elders.” <<http://www.thetaskforce.org/downloads/reports/reports/OutingAge.pdf>> Accessed on 01 October 2009.

⁵ MetLife Mature Market Institute. “Out and Aging: The MetLife Study of Lesbian and Gay Baby Boomers.” <<http://www.sageusa.org/uploads/OutandAging.pdf>> Accessed on 01 October 2009.

⁶ Services & Advocacy for GLBT Elders. “No Need to Fear, No Need to Hide: A Training Program about Inclusion and Understanding of Lesbian, Gay, Bisexual, and Transgender Elders.” 2004; 150.

⁷ Services & Advocacy for GLBT Elders. “No Need to Fear, No Need to Hide: A Training Program about Inclusion and Understanding of Lesbian, Gay, Bisexual, and Transgender Elders.” 2004; 151.

⁸ Public Interest Directorate. “Lesbian, Gay, Bisexual and Transgender Persons and Socioeconomic Status.” <http://www.apa.org/pi/ses/LGBC_fact_sheet.pdf> Accessed 25 September 2009.

⁹ Albelda, R., M.V. Badgett, A. Schneebaum, G. Gates. “Poverty in the Lesbian, Gay, and Bisexual Community.” <<http://www.law.ucla.edu/williamsinstitute/pdf/LGBPoverlyReport.pdf>> Accessed 01 October 2009.

- LGBT seniors also face institutional discrimination. For example, Social Security survivor benefits are not paid to same-sex partners. Medicaid regulations protect the assets of a spouse when the other enters a nursing home, but this protection is not offered to same-sex couples. Tax laws and other regulations of 401k's and pensions also discriminate against same-sex partners.¹⁰
- Seniors are more susceptible to programs that force one to act as their biological gender. Nursing facilities may feel the need to define "male" and "female" for certain situations that may cause discomfort for transgender seniors.¹¹

Medical Concerns

- HIV/AIDS is the greatest health risk for older gay men, who may be unaware of their status if they are symptom-free.¹² In DC, persons over 50 account for about a third of the HIV/AIDS cases. 32% of that population is male and reports their mode of transmission coming from sex with other men.¹³
- The prevalence of anal and rectal cancer is also spreading in many gay male populations, especially in those with a history of HPV.¹⁴
- Untreated medical conditions are the greatest health risk for lesbians, who are much less likely to have regular medical check-ups and gynecological exams. Lesbians may also be at a higher risk for some kinds of cancer, particularly breast cancer.¹⁵
- While the long-term effects of hormones and sexual reassignment surgery are just being studied, older persons who stop taking hormones may experience significant side effects.¹⁶
- A major health factor for LGBT seniors are stressors, such as the strain of estrangement, the necessity of living a secret life, and the threat of violence. Hate crimes can lead to Post-Traumatic Stress Disorder (PTSD), which can cause sleep disorders and other mental health issues.¹⁷

In Summary

The District of Columbia does not currently include questions about sexual orientation or gender identity when collecting demographic information on LGBT seniors served through senior providers. However, plans are currently underway to include these questions in the Harmony Data Collection system. More data is needed on the LGBT elderly population in DC to learn more about its needs and how they can be addressed.

The data that is available, and the nationwide research done on the senior LGBT population, indicates that steps must be taken to ensure that LGBT seniors living in the District of Columbia receive a proper level of care, have support programs available to them, and are informed about medical issues that are prevalent in the LGBT community.

¹⁰ Services & Advocacy for GLBT Elders. "No Need to Fear, No Need to Hide: A Training Program about Inclusion and Understanding of Lesbian, Gay, Bisexual, and Transgender Elders." 2004; 150.

¹¹ Services & Advocacy for GLBT Elders. "No Need to Fear, No Need to Hide: A Training Program about Inclusion and Understanding of Lesbian, Gay, Bisexual, and Transgender Elders." 2004; 229.

¹² Services & Advocacy for GLBT Elders. "No Need to Fear, No Need to Hide: A Training Program about Inclusion and Understanding of Lesbian, Gay, Bisexual, and Transgender Elders." 2004; 227.

¹³ Government of the District of Columbia Department of Health. "District of Columbia HIV/AIDS Epidemiology Update 2008." 2008; 64.

¹⁴ Services & Advocacy for GLBT Elders. "No Need to Fear, No Need to Hide: A Training Program about Inclusion and Understanding of Lesbian, Gay, Bisexual, and Transgender Elders." 2004; 227.

¹⁵ Services & Advocacy for GLBT Elders. "No Need to Fear, No Need to Hide: A Training Program about Inclusion and Understanding of Lesbian, Gay, Bisexual, and Transgender Elders." 2004; 225

¹⁶ Services & Advocacy for GLBT Elders. "No Need to Fear, No Need to Hide: A Training Program about Inclusion and Understanding of Lesbian, Gay, Bisexual, and Transgender Elders." 2004; 229.

¹⁷ Services & Advocacy for GLBT Elders. "No Need to Fear, No Need to Hide: A Training Program about Inclusion and Understanding of Lesbian, Gay, Bisexual, and Transgender Elders." 2004; 225-229.