

Oregon's First LGBTQ+ Older Adult Survey

Wednesday, April 27, 2022

CMS Alignment Meeting

Survey





Acknowledgements & Thanks

- AARP Oregon
- Aging Well Program of Cascade AIDS Project
- Alzheimer's Association
- EngAGE NW
- Governor's Commission on Senior Services
- HIV Alliance
- Metropolitan Community Church of Portland
- Oregon Home Care Commission
- Oregon LGBTQ+ Aging Coalition
- Quest Center for Integrative Health
- PRIDE Foundation
- SAGE Metro Portland

And Members of the Oregon LGBTQ Older Adult Survey Advisory Committee

Terminology

Transgender: Individuals whose gender identity or gender expression do not align with their biological or assigned sex

Sexual Orientation: A person's primary physical, romantic, and/or emotional attraction to other people.

Gender Identity: The gender you feel you are inside (man, woman, neither or both).



Video: Aging as LGBT: Two Stories



Survey Background

- Lack of existing data on people in Oregon
- Community Driven: Need and Request
- Oregon Department of Human Services, Office of Aging & People with Disabilities

Advisory Committee



Survey Goal & Purpose

"I am concerned about my future as I, and the people in my community, grow older. I worry about who will take care of us, and I wonder who I'll be able to turn to for help as my body gets more feeble."

- Goal: Understand the risks, needs and strengths of demographically diverse LGBTQIA2S+ Oregonians aged 55 and older, including those not represented in previous studies
- Purpose: Produce publicly available findings to be used for advocacy, training, education, program and policy development and other purposes
- Build/Strengthen LGBTQIA2S+ community relationships

Survey Advisory Committee

Purpose:

- Advise APD and the Research Team from lived and professional experience
- Engage diverse perspectives of sexual orientation, gender identity and racial groups
- Establish and foster ongoing community and member relationships and collaborative work

Participated in:

- Developing survey
- Education and Outreach
- Communication



Survey Components

- Conducted by <u>Karen Fredriksen</u> <u>Goldsen</u>, PhD and her research team at the University of Washington
 - Under the supervision of their Institutional Review Board
- Oregon Behavioral Risk Factor Surveillance System (OR-BRFSS) data 2013-2018
- Community-based survey people aged 55+ who identify as LGBTQ+ 1,402 valid responses
- Online, phone, paper options and in translation (10 languages)



Key Finding -Demographics

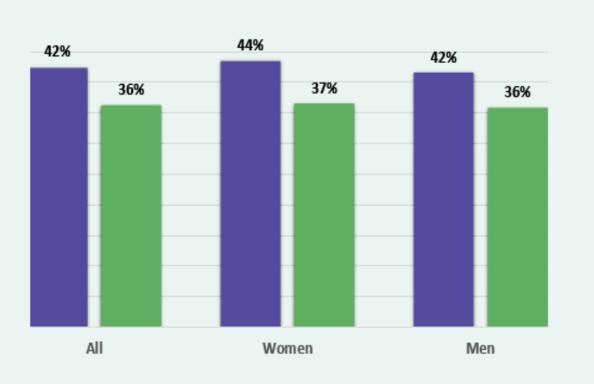
(pre-existing 2013-2018 OHA BRFSS Data)

- Compared to their heterosexual counterparts
 LGB Oregonians are more likely to be:
 - People of color (10.7% vs. 8.1%)
 - Living at or below 200% of the FPL (42.5% vs. 36.6%)
 - Living alone (36.9% vs. 28.5%)
 - Experiencing heightened risk of poor physical and mental health, disabilities, and comorbidities
 - Experiencing financial barriers to medical care (10.5% vs. 7.2%)
- Also, less likely to be married/partnered (48.3% vs. 62.2%)

Disability (BRFSS)

Rates of Disability by Sexual Orientation, Adults 55 and Older (OR-BRFSS)

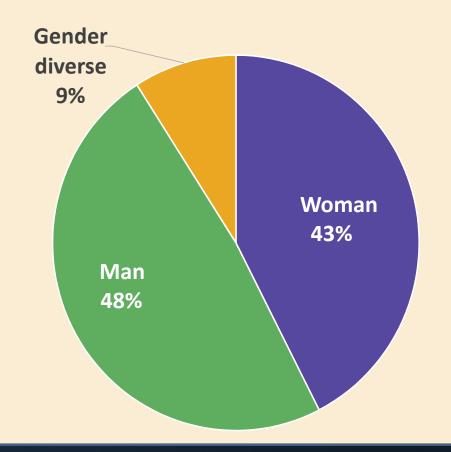
■ LGB ■ Heterosexual

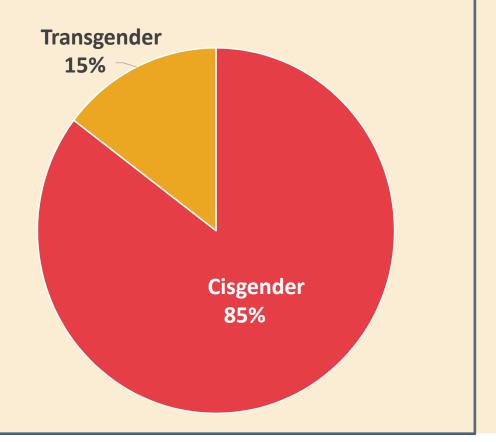


Community Survey Participants

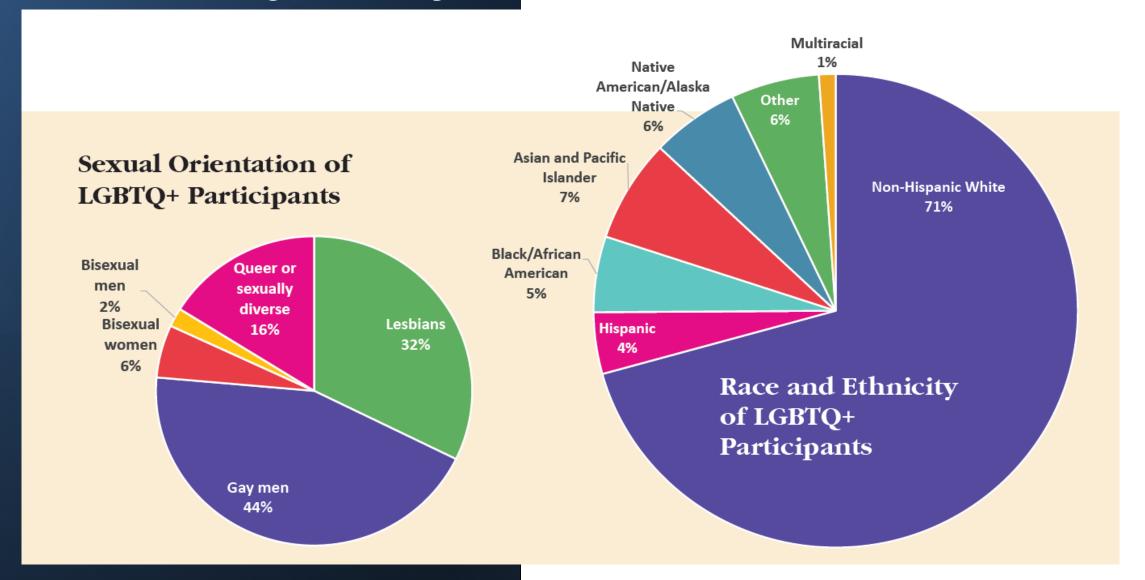


Gender Identity of LGBTQ+ Participants





Community Survey



Key Finding -Access to Services (Community Survey Data)

"I'm a case manager and I have difficulty placing my LGBTQIA clients within any community in Oregon. They often decline facility placement because they don't feel welcome and they fear discrimination. We need more long-term care facilities for our aging LGBTQIA community."

- More than 50% have service needs that are not met. The most common challenges they experience in accessing services include:
 - Difficulty in applying or fear of not meeting qualifications
 - High costs
 - Services experienced or perceived as not being LGBTQ+ inclusive
 - Lack of availability and difficulty locating and accessing services



Key Finding - Access to Aging, Health & other Services

- Most needed services and programs:
 - Medical and health services (67%)
 - Social support programs (64%)
 - Mental health/substance use tx (48%)
 - Food assistance (38%)
 - Medication assistance (35%)
 - Transportation (35%)
- Also, most do not have wills or powers of attorney for health care and have not completed documents for end-of-life care



Key Finding - Adverse experiences

 24% of LGBTQ+ older adult participants have experienced elder abuse in the past year

 76% did not report the experience to the authorities



Key Finding - Adverse experiences

- The most common barriers to reporting abuse are:
 - Distrust of authorities' fair treatment of LGBTQ+ people (26%)
 - Feeling ashamed because of the experience (20%)
 - Lack of knowledge on how to report (16%)
 - Fear of having to disclose their identity (16%)



APS Reporting

Safeline: 1-855-503-SAFE (7233)

Adult Protective Services

https://www.oregon.gov/DHS/SENIORS DISABILITIES/ADULT-ABUSE/Pages/index.aspx

How to Report Abuse/neglect

https://www.oregon.gov/dhs/abuse/Pages/index.aspx

Brochure: Reporting Abuse of Older Adults and People with Disabilities

 https://sharedsystems.dhsoha.state.or.us/DHSForms/ Served/de9373.pdf

Key Finding - Adverse experiences

"While I am out to those close to me, putting up a pride flag or BLM sign feels unsafe and could put my family at risk."

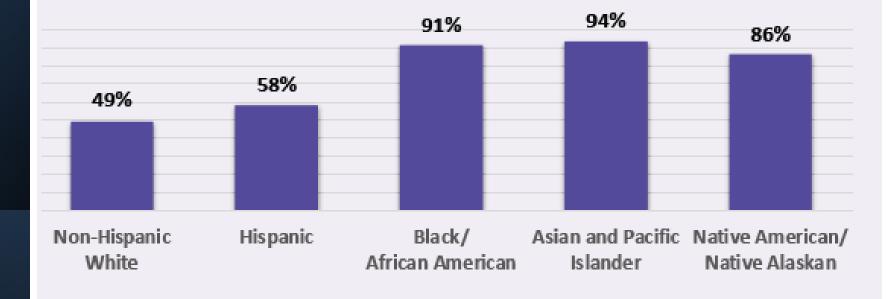
- Nearly 60% of participants experienced discrimination within the last year
- Most experienced discrimination due to the perception of the following:
 - Sexual orientation or gender identity or expression (56%), age (42%), and gender (30%)
 - Risks of discrimination are notably high among people of color
- 21% of participants do not disclose their sexual or gender identity to healthcare, aging, or other service providers



Key Finding - Adverse experiences

As a senior retired person,
I'm still very much "in the
closet." I wish things could
be different and that I
could have a relationship
with a man."

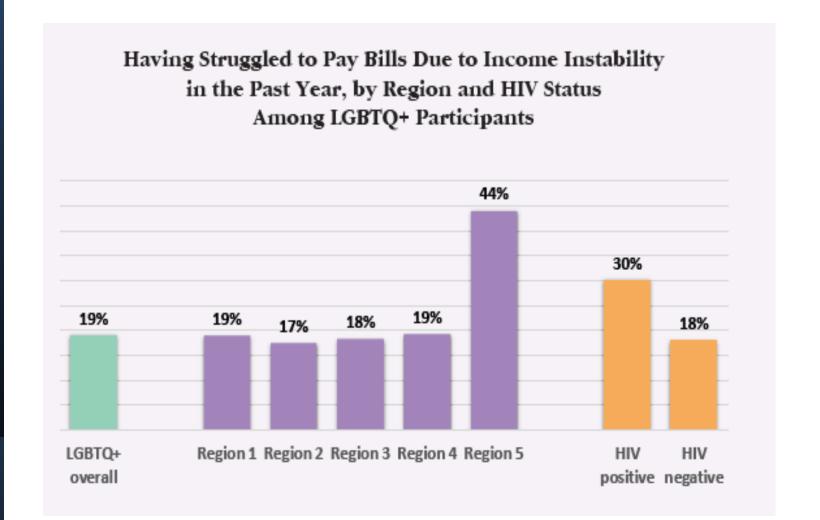
Rates of Discrimination in the Past Year Among LGBTQ+ Participants





Key Finding – Economic and Housing Stability

One-third of LGBTQ+ older adult participants have difficulty paying bills or buying nutritious meals due to financial instability



- Region 1 (61%): Columbia, Multnomah, Clackamas, and Washington
- •Region 2 (26%): Clatsop, Tillamook, Yamhill, Polk, Marion, Lincoln, Benton, Linn, and Lane
- •Region 3 (9%): Douglas, Coos, Curry, Josephine, and Jackson
- •Region 4 (2%): Hood River, Wasco, Jefferson, Crook, Deschutes, and Klamath
- •Region 5 (2%): Sherman, Gilliam, Morrow, Umatilla, Union, Wallowa, Wheeler, Grant, Baker, Lake, Harney, and Malheur

Key Finding -Health & Well Being

"There is very little support for transgender women in my age range. I believe this keeps transwomen and transmen, such as myself, from coming out and seeking the care we often desperately need."

- Quality of Life & General Health
 - 80% good, 20% poor
 - Heightened risk of poor general health for:
 - People living with HIV
 - At or under 200% of the Federal Poverty Level
 - People who are transgender
- Differences among racial/ethnic participants:
 - Asian and Pacific Islanders (63%) and
 Black/ African Americans (66%) show the
 lowest rates of good quality of life

Key Finding -Health & Well Being

- Cognitive Impairment
 - One in three report subjective cognitive impairment
 - Higher rates among all racial/ethnic minorities
- COVID-19
 - 95% vaccinated (as of 8/21)

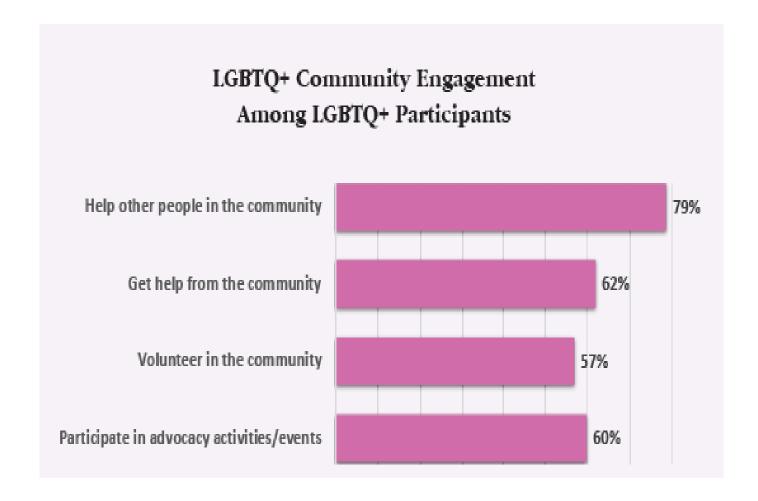


Key Finding – Mental Health

- Suicidal ideation: 21% of the LGBTQ+ older adult participants have experienced suicidal ideation in the past year
- Greatest elevated risk of suicidal ideation are:
 - Black/African Americans, Asian and Pacific Islanders, Native
 American/Alaska Natives
 - People aged 55-64, people with lower incomes, people living in frontier areas, and gay men

Key Finding –Social Resources & Resilience

More than 70% of LGBTQ+ older adult participants have three or more people they can count on for social and emotional support



 And more than 40% attend faith, spiritual, or religious services

Key Finding –Social Resources & Resilience

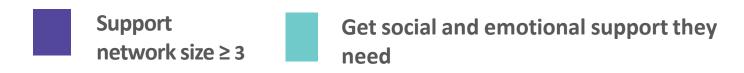
I am 78 and incredibly frustrated. I experience frequent cognitive impairments, confusion, physical discomfort, pain and stress. I feel socially isolated and I miss the active lifestyle I used to have. I also miss social interactions I had from volunteering with youth programs.

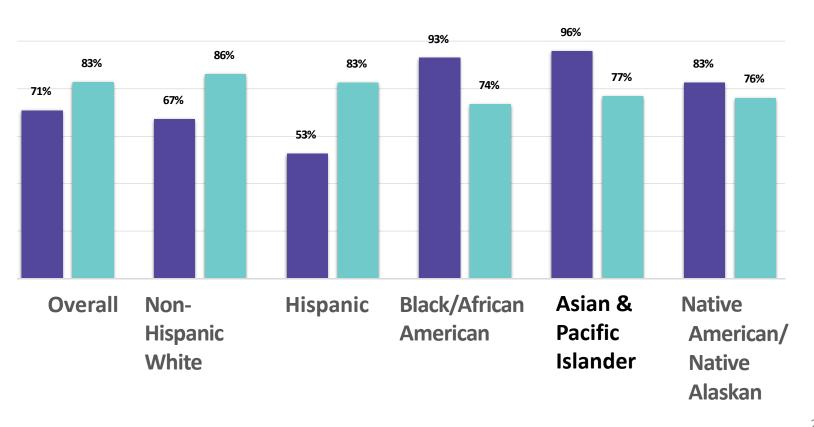
 Despite close relationships and communities, nearly 20% report lack of social support, which is highest among people of color

- People living with HIV:
 - Report smaller social network sizes, with nearly a half (49%) having two or less people they can turn to for support
 - Are more likely to get help from the LGBTQ+ community (77%)
 - Only 25% attend faith, religious, or spiritual services
- Most of those living with HIV (89%) report adequate internet access

Key Finding –Social Resources & Resilience

Rates of Support Network and Social Support Among LBGTQ+ Participants





Post Survey Work

- Public presentations on survey findings
 - 23 to date, additional 5 scheduled

7 Community listening meetings



Top Priorities for Action Plans

From community listening sessions:

Health/Mental Health Care	Economic Security/Poverty
Housing	Discrimination
Elder Abuse (including self-neglect)	Food Assistance
Educate, Communicate, Support	Unmet Service Needs/Access
Community Engagement/ Social Support	Training, trained facility staff and homecare workers



Health & Mental Health Feedback

Issues: lack of providers, lack of LGBTQIA2S+ friendly providers, access barriers, health care for older adults that is not ageist or discriminatory, high rates of suicidal ideation amongst people of color, low disclosure rates

Ideas for action:

- -Advocacy and training across health care networks
- -Increase access to LGBTQIA2S+ friendly medical providers, especially in rural areas
- -Increase suicide prevention efforts, including culturally specific interventions
- -Build partnerships with other agencies doing suicide prevention training, have joint or promote call/help lines & other resources
- -Reduce barriers to behavioral health services



Health & Mental Health Actions

Ideas for action:

- Employ or support providers to employ Community Health Workers (CHWs) especially from diverse communities
- Explore telehealth to serve LGBTQIA2S+
- Provide navigation assistance to resources that are LGBTQIA2S+ friendly to address social determinants of health such as housing and food assistance
- Promote peer, support and wellness groups that are LGBTQIA2S+ specific
- Provide trauma informed care



Additional Actions

- Encourage and provide assistance for endof-life care planning, especially for those without supports
- Educate healthcare providers about ageism, LGBTQIA2S+ specific medical issues
- Create welcoming environments including using visuals and symbols
- Represent LGBTQIA2S+ in materials/visuals
- Partner with Community Based and faithbased organizations for outreach



Racial/Ethnic Specific Priorities

Issues: LGBTQIA2S+ is taboo topic in some communities, language access, cultural knowledge, limited financial resources

Ideas for action:

- -LGBTQIA2S+ services and resources for culturally specific groups
- -Homebound seniors of color need technology, also technology access for social, recreational activities and telehealth
- -Multi-generational education and supports
- -Native speakers of Latinx Indigenous languages to go out to the community
- -Increase access to the Internet to facilitate finding and accessing resources
- -Support safe spaces for the Black community to discuss HIV (consider CBO partnerships)



Next Steps

Oregonians feel welcomed and safe in communities that can meet their increasing care needs."

 Oregon Office of Aging & People with Disabilities (APD) steps:

- Foster/build ongoing community partnerships and collaborations
- Develop action plans based on community feedback



Questions and Discussion

Questions?

• Discussion:

- Does this generate any ideas for you and your organization to act to address gaps found in the survey?
- What barriers do you need to address to do this work?



Survey Links

- Survey Website
- Survey Report
- Survey Executive Summary
- Fact Sheet
- Oregon LGBTQ+ Older Adult Survey Results Presentation and Discussion



Contacts

- Oregon Department of Human Services,
 Office of Aging & People with Disabilities
 - Jane-ellen Weidanz, Administrator, Long Term Services & Supports
 Jane-ellen.Weidanz@dhsoha.state.or.us
 - Deb McCuin, Program Analyst
 <u>Debbie.McCuin@dhsoha.state.or.us</u>
 - Naomi Sacks, Policy Analyst
 Naomi.E.Sacks@dhsoha.state.or.us

- Aging & Disability Resource Connection of OR (ADRC of Oregon)
 - **–** 1-855-673-2372
 - Clearinghouse for information related to older adults and people with disabilities
- Alzheimer's Association: LGBTQ Community Resources for Dementia
- SAGE Metro Portland
 - Portland area-Advocacy & Services for LGBT Elders
- SAGE
 - National- Advocacy & Services for LGBT
 Elders

- Oregon Home Care Commission class
 - Diversity Awareness: Challenges Facing Lesbian, Gay, Bisexual, Transgender Older Adults

Understanding and awareness of LGBT issues and healthcare challenges; terms and definitions; how to create a welcoming and inclusive working relationship

- Free to Homecare workers, Person
 Support workers, Personal care
 attendants and APD Adult Care Home
 owners and their staff
- Small fee for others. Contact:
 <u>Training.OHCC@dhshoa.state.or.us</u>



- Oregon AIDS Education & Training Center
 - AIDS education and training
- Oregon Health Sciences University Transgender Health Program
 - Provides support, information and advocacy
- Transgender Aging Network
 - Improve the lives of current and future trans/SOFFA (Significant Others, Friends, Family and Allies) elders



- Two Spirit And LGBGTQ Health
 - Northwest Portland Area Indian Health Board
- Zami Nobla
 - National Organization of Black Lesbians on Aging
- LGBT Elders of Color
 - Connecting LGBT elders of color
- Prime Timers Worldwide
 - Enriching social lives of gay/bi men



Old Lesbians Organizing for Change

 Conceived as a way to utilize the unique experiences of Lesbians at least 60 years of age, to challenge ageism within our own community, within the larger women's community and within society at large

LGBTQIA+ Aging Project

 Fenway Institute-Advocacy, training, policy development, equity work for LGBTQIA+ older adults



Research & Publications

- Movement Advance Project & Advocacy & Services for LGBT Older Adults (SAGE)
 - Understanding Issues Facing LGBT Older Adults
- AARP & SAGE
 - LGBTQ Community Caregiving Guide: A Planning Guide for Caregivers in the LGBTQ Community
- SAGE- National Resource Center on LGBT Aging
 - Self-Care for the Caregiver
 - Inclusive Services & welcoming environments



Research & Publications

- Maintaining Dignity: Understanding and Responding to Challenges Facing Older LGBT Americans
 - AARP 2018 Survey
- The State of LGBTQ Dignity 2020: A
 Supplement to Maintaining Dignity
 Pre–COVID-19
 - AARP 2020



Research & Publications

Aging with Pride

 National longitudinal study of aging, health, and well-being of LGBTQ midlife and older adults and their families

Goldsen Institute

Research and publications on a number of LGBTQ+ older adult topics

