

GAY AND GRAY: CARING FOR LGBT OLDER ADULTS

Opportunity Conference
Monday, February 27, 2017
1:45 – 3:00 p.m.

PRESENTERS

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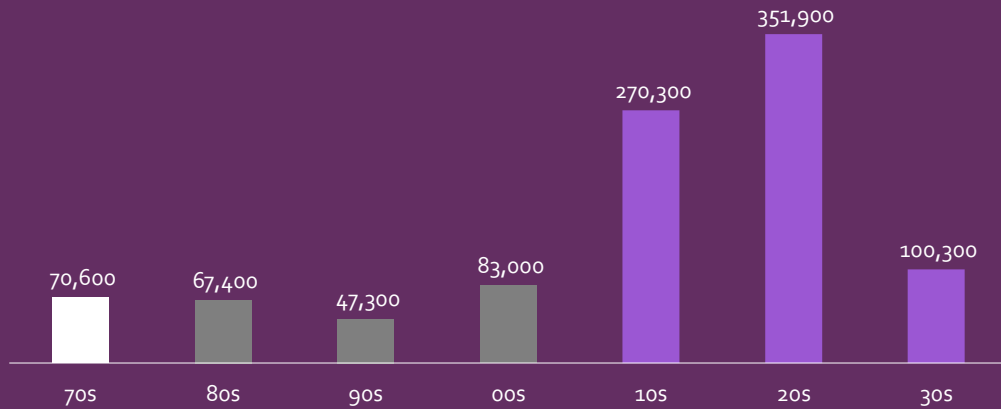
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PRESENTATION

1. Shifting Demographic
2. LGBT Older Adults
3. Relevant Laws & Regulations in Long Term Care
4. Scenarios

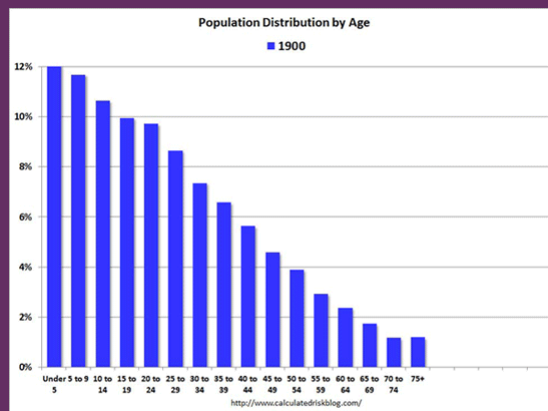
THE AGE WAVE

65+ ADDED TO MN EACH YEAR

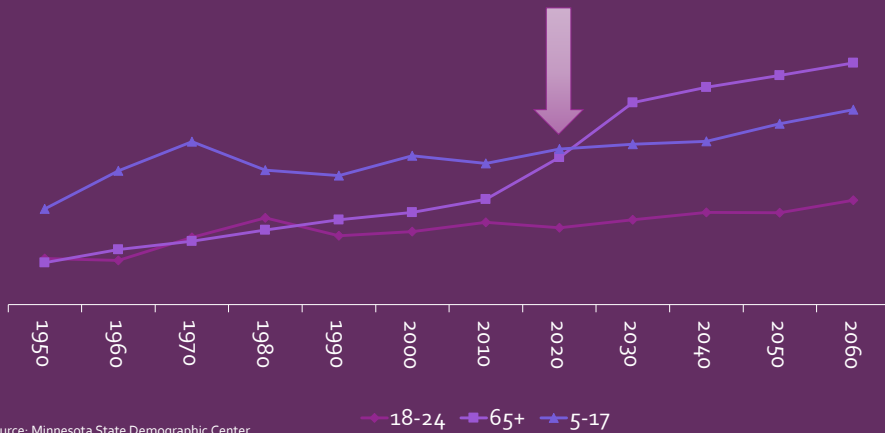


Source: Minnesota State Demographic Center

THE "WAVE"

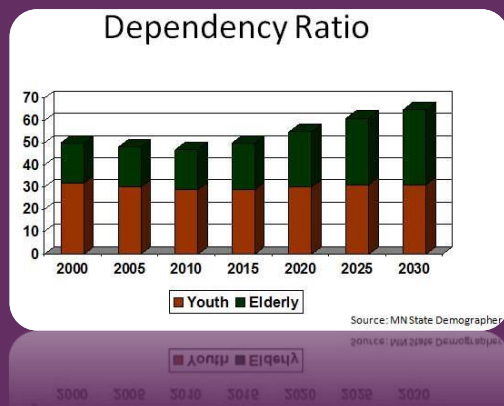


AGE CHANGES

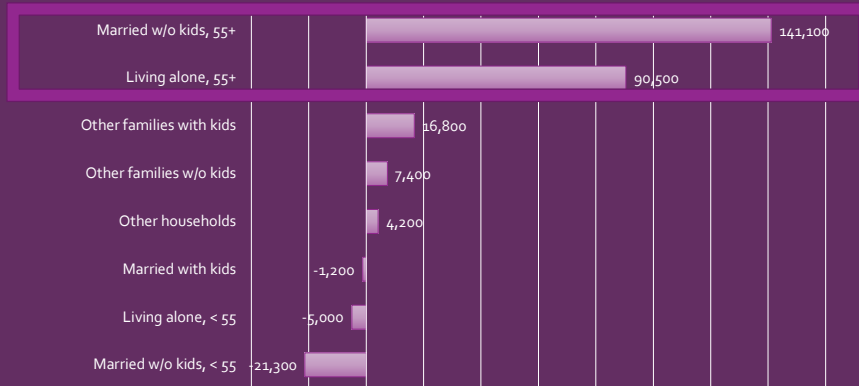


INFLUENCING THE TREND

1. Aging of the Baby Boomers (1946-1964)
2. Increase in life expectancy
 - Medical advances
 - Public health
3. Decrease in birth rate



HOUSEHOLD GROWTH 2010-2020



Source: Minnesota State Demographic Center

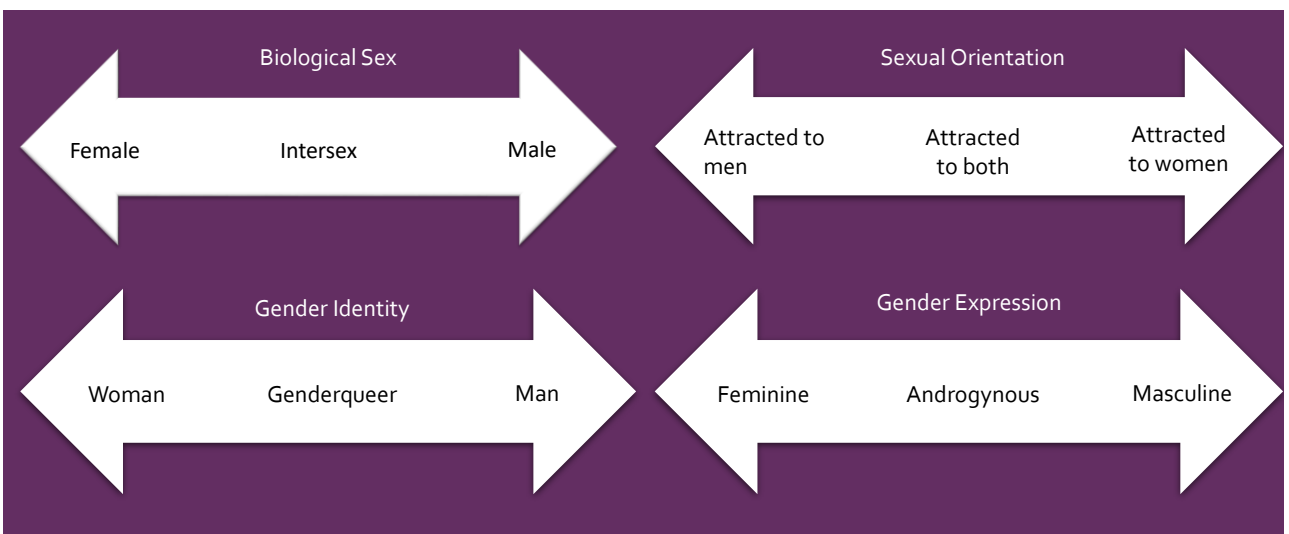
DISPARITIES EXIST

	All	White, non-Hispanic	Of Color (all)	Specific Populations of Color			
				African American	American Indian	Asian	Hispanic/Latino*
Population	2,849,567	2,173,218	676,349	238,723	20,906	184,683	167,558
Median age	36	40	26	27	32	27	25
Median household income	\$64,630	\$68,743	\$43,187	\$28,972	\$39,326	\$62,916	\$42,175
Percent in poverty	9%	6%	24%	32%	29%	17%	21%
Percent foreign-born	10%	2%	41%	28%	5%	61%	41%
Home ownership rate	71%	77%	38%	25%	44%	57%	41%
Adults with a bachelor's degree or higher	38%	40%	26%	19%	15%	44%	16%
High school graduation rate	72%	82%	52%	46%	37%	70%	46%
3rd grade reading: proficient	74%	86%	55%	52%	53%	64%	51%

* Of any race.

AGING + LGBT

FRAMEWORK



TWIN CITIES LGBT AGING NEEDS ASSESSMENT (2012)

Nearly 2x as likely to
be a caregiver

Less likely to have a
caregiver

Half as likely to have
children

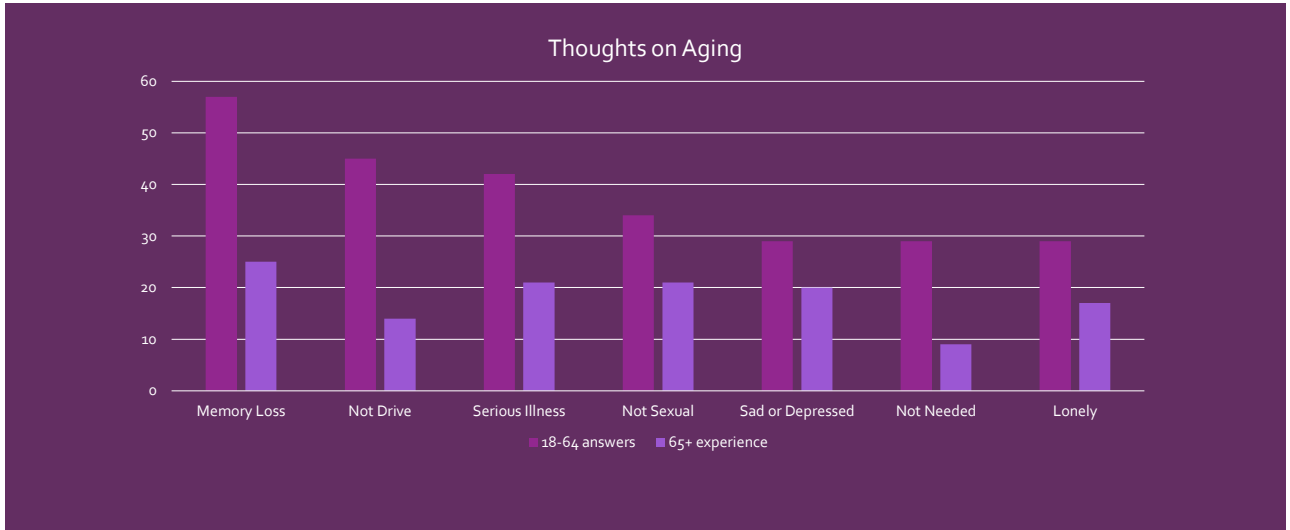
More likely to live
alone

Less than 1:5 believe
they would receive
sensitive care if LGBT
identity were known

WHAT % OF OLDER ADULTS...

1. Experience memory loss?
2. Are not able to drive?
3. Have a serious illness?
4. Are not sexually active?
5. Feel sad or depressed?
6. Feel not needed?
7. Are lonely?

POLL ANSWERS



AGEISM

prejudice or discrimination on the basis of a person's age

the last accepted "ism"

GENERATIONAL DIVIDE

Silent Generation

Baby Boom Generation

Generation X

Millennials

RELEVANT LAWS & REGULATIONS IN LONG TERM CARE

SCENARIOS

BULLYING

You learn that a lesbian woman named Susan feels isolated and sometimes not safe. She fears group settings and often will eat alone.

You learn that she experiences bullying from other women because she identifies as a lesbian. Two particular ladies don't allow her to sit with them and make her sit away from others. They have been overheard telling her she isn't welcome to attend activities.

EMPLOYEE

A closeted gay man, George, is receiving services from your organization. A long term employee, Mary, learned George's sexual orientation and has told you that because of her beliefs, she cannot serve George.

DEMENTIA

Elise is a 93 year old transwoman receiving services from your organization. She transitioned at 65 when she retired from her job. She has two grown children and an estranged ex-wife. Elise's relationship with her children was strained, but over the last few years has gotten better. Both children live out of state. Elise has friends who visit her often and consider her family.

Elise is also in the mid stages of Alzheimer's Disease and is beginning to experience significant cognitive impairment. Elise is receiving hormone replacement therapy. She is beginning to experience confusion about her gender identity and biological sex. At times this has caused some behavioral issues.

FAMILY

Jessica, an older bisexual woman who never identified her sexuality until talking with a social worker at your skilled nursing facility. She has mild cognitive impairment and her son, Jacob, serves as her financial power of attorney.

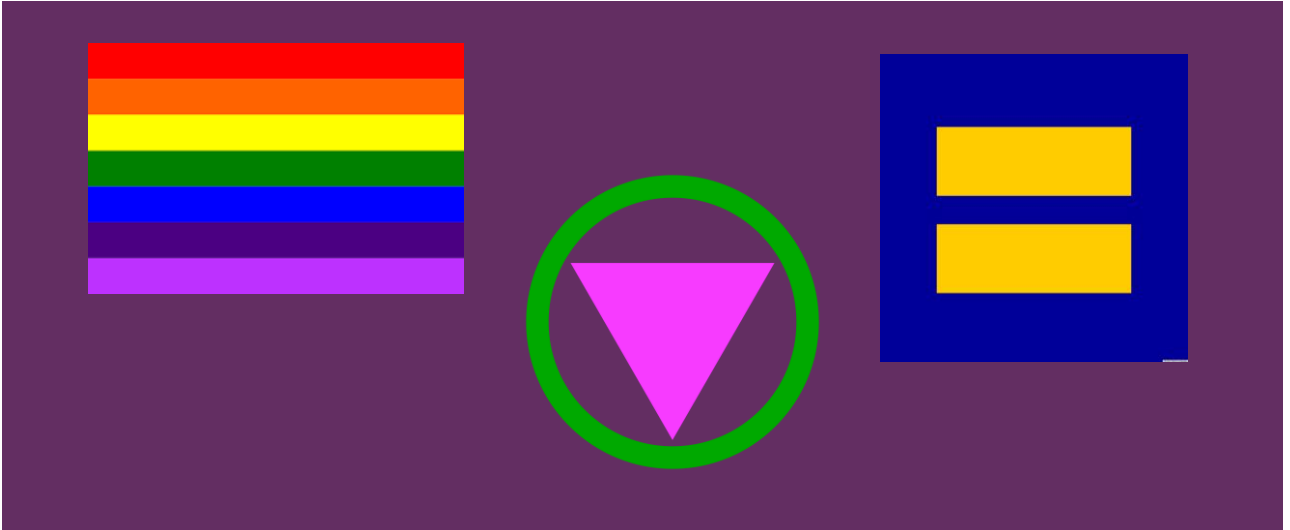
A woman, Grace, has been visiting Jessica. Jacob has complained that she has no right to visit Jessica and in the past has caused significant turmoil in Jessica's family. On the other hand, Jessica seems to enjoy Grace's visits and is overall happy.

ADMISSION

It is Friday at 4:30 PM you anticipate transfer of an admission to skilled care from a hospital after hip surgery. The discharge paperwork from the hospital notes that the gender of your new resident as "female." There is a notation that the individual identifies as being transgender.

When the resident arrives, you quickly discover that he identifies as male and goes by the name Joseph. His gender identity is male, but legal sex is female. You learn further that Joseph has not had gender confirmation surgery, but is receiving hormone replacement therapy.

WHAT CAN I DO?



RECOMMENDATIONS

