

*Assessing Resources
Benefitting the LGBT Community
in Greater Jacksonville*

SERVICES FOR ELDER

KBT & Associates
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Introduction

How many seniors live in Duval County today? Enough to fill Everbank Stadium. Twice.

More than 140,000 people age 60 or older live in Duval County, according to the U.S. Census. If we look beyond Duval's borders to the five-county metropolitan area, the population swells to almost a quarter million seniors. And that number will almost double by 2030.

Scattered throughout this sea of older people are thousands who are lesbian, gay, bisexual or transgender. Like their non-elderly peers, they range from being very public to very private about their sexual orientation and gender identity.

But elder LGBT individuals confront challenges that are distinct from their younger counterparts. Aging inevitably increases our vulnerability as our physical and mental agility wane and financial resources diminish. With time, we become more and more dependent upon the assistance of others.

In ideal circumstances, those "others" are friends and family members who know us and understand us. But all too often, circumstances are not ideal. Less fortunate LGBT elders may lack family members able to care for them, leaving them isolated. They may find themselves depending upon professional caregivers -- either in the home, in clinic or day-care settings or in institutional environments. These caregivers, and the institutions and organizations for which they work, may or may not be welcoming to LGBT individuals. The LGBT elder, in one of the most vulnerable phases of life, may experience great anxiety and uncertainty about self-disclosure and its consequences.

What, if any, steps have communities and elder-serving professionals, organizations and institutions taken to help LGBT elders navigate these waters? In what ways has the elder-serving community acknowledged the needs of LGBT elders and attempted to meet those needs?

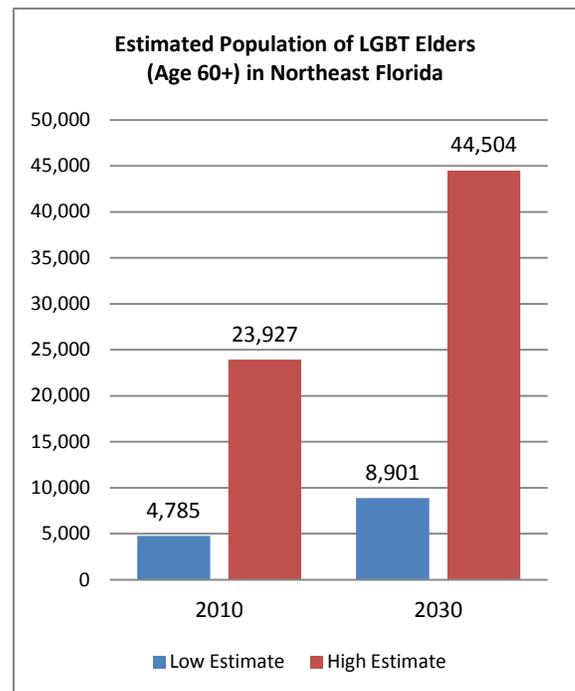
In this report, we outline briefly the challenges facing LGBT seniors and the ways in which the Greater Jacksonville community has responded.

What Do We Know About LGBT Elders?

The short answer: not a lot. Unfortunately, very little research -- nationally or locally -- provides data on the LGBT community in general; even less on elders in the community. JCCI, which conducts annual reports on a host of Jacksonville community indicators, has only minimal research on the area's LGBT population and tracks no indicators that relate directly to the LGBT community beyond the number of HIV/AIDS cases reported. "Despite extensive general data on elders and decades of advocacy by LGBT activists, only a handful of state and federal demographic and health surveys collect data on LGBT elders," according to *Outing Age 2010*, a report of the National Gay and Lesbian Task Force Policy Institute.

Estimates vary widely on the number of LGBT elders. Some resources report that 2% of those surveyed self-identified as LGBT; other sources put the proportion between 5% and 10%. Using these numbers, somewhere between 4,785 and 23,927 LGBT elders reside in the five counties of Northeast Florida.

The elderly population is among the nation's fastest growing cohorts. In Florida, the Bureau of Economic and Demographic Research projects one out of four Floridians will be age 60 or over by 2030. In Northeast Florida counties, the ratio is expected to be between 24% in Duval County and 34% in Nassau County by 2030, meaning almost 450,000 residents of the Northeast Florida region are expected to be age 60 or older. Using the ranges above, between 8,901 and 44,504 of these elders would be lesbian, gay, bisexual or transgender.



What Challenges Confront LGBT Elders?

LGBT elders confront what one observer called a "double whammy." They face all of the challenges that are associated with aging -- diminishing health, increasing isolation and the need for adequate financial and legal resources and protections. And they face all of this in the context of their sexual orientation and gender identity and associated fears and vulnerability.

National research indicates that LGBT elders experience significant health disparities, diminished social interaction and fewer financial and legal resources than the general population.

PHYSICAL AND MENTAL HEALTH

LGBT elders exhibit higher rates of disability, higher rates of mental distress and are more likely to smoke and engage in excessive drinking¹. Lesbian and bisexual women are less likely to receive mammograms². Nine percent of all LGBT older adults are living with HIV disease, while 20% of bisexual older men and 14% of gay older men have HIV³. A greater proportion of those over 50 have been diagnosed with HIV than those under age 24, yet HIV prevention programs remain targeted at younger individuals⁴.

Beyond these specific health issues, there is the challenge of obtaining care.

LGBT adults are more likely to delay or not seek health care and to delay or not get prescription medications.⁵ Lack of insurance or health care coverage is one cause. But fear of discrimination also keeps many LGBT individuals from seeking medical help or from being open about their sexuality with their physician. More than 30% of LGBT individuals have not revealed their sexual orientation or gender identity to their primary physician.⁶

SOCIAL INTERACTION

LGBT elders are less likely to have partners, spouses or children than their heterosexual peers and are more likely to live alone, risking social isolation which can lead to impaired mental and physical health⁷. "LGBT older people are twice as likely to live alone, twice as likely to be single, and 3 to 4 times less likely to have children—and many are estranged from their biological families."⁸

Nearly one-third of LGBT elders report depression⁹, and 20% of lesbian, gay and bisexual elders report psychological distress and 22% require medication for emotional health issues¹⁰. While 2% of the

¹ *Aging and Health Report, Disparities and Resilience Among Lesbian, Gay, Bisexual and Transgender Older Adults* published in 2011 by the University of Washington

² *LGBT Older Adults and Health Disparities*, published in 2010 by SAGE - Services & Advocacy for Gay, Lesbian, Bisexual & Transgender Elders

³ *Aging and Health Report, Disparities and Resilience Among Lesbian, Gay, Bisexual and Transgender Older Adults*.

⁴ The U.S Centers for Disease Control

⁵ *LGBT Older Adults and Health Disparities*

⁶ *Aging and Health Report, Disparities and Resilience Among Lesbian, Gay, Bisexual and Transgender Older Adults*

⁷ *Aging and Health Report, Disparities and Resilience Among Lesbian, Gay, Bisexual and Transgender Older Adults*.

⁸ *LGBT Older Adults and Health Disparities*

⁹ *Aging and Health Report, Disparities and Resilience Among Lesbian, Gay, Bisexual and Transgender Older Adults*

¹⁰ *LGBT Older Adults and Health Disparities*

heterosexual population contemplates suicide, 5% of lesbian, gay and bisexual elders and 50% of transgender elders do so.¹¹

These data notwithstanding, some experts think that LGBT elders are, in many ways, better equipped to deal with the challenges of aging than their heterosexual counterparts.

"LGBT elders' life experience may in some ways provide them greater personal resources for coping with living alone... Studies show that maintaining extended social networks and lifelong, intimate friendships can have a positive impact on aging.... What appears in social science literature as single life among LGBT people may therefore mask multigenerational networks of intimate support, deep friendship, and alternative parenting which over the lifespan create an emotional and social safety net equivalent to that of conventional family configurations."¹²

FINANCIAL AND LEGAL RESOURCES

LGBT individuals are likely to enter their senior years with fewer financial resources than heterosexuals for multiple reasons. They are less likely to be married and connected legally to additional financial resources and benefits. They are more likely to have been the victim of workplace discrimination and, thus, received less compensation. They have lower rates of health insurance coverage and, often, the benefits that they do receive from a partner are taxable income. Taxation of health benefits costs the average LGBT employee with partner benefits more than \$1,000 a year in taxes.¹³

Many benefits that accrue without question to heterosexual partners in marriage are denied to same sex partners. Among them are Social Security survivor benefits and Veterans Administration benefits. Survivors in a same sex marriage generally must pay taxes on assets inherited from their partner.¹⁴

And, in most cases, LGBT elders must put in place a series of specific and often expensive legal arrangements to try to ensure that financial decision making and property will pass to a partner or family-of-choice member. Without the proper documents, state laws automatically direct who will inherit property.¹⁵

¹¹ Ibid.

¹² *Outing Age 2010*, published by the National Gay and Lesbian Task Force Policy Institute

¹³ Ibid.

¹⁴ SAGE - Services & Advocacy for Gay, Lesbian, Bisexual & Transgender Elders

¹⁵ Ibid.

How Does Northeast Florida Assist and Support LGBT Elders?

Northeast Florida is fortunate to have an LGBT-friendly agency -- ElderSource --coordinating community-based services to seniors. Through its leadership, greater Jacksonville has been recognized as one of the leading communities in the nation in terms of providing support for LGBT seniors.

To understand the critical role that ElderSource plays, it is helpful to understand the framework for delivery of senior services.

The Older Americans Act, passed in 1965, is the primary vehicle by which services for older Americans are funded and provided. The Act established a range of federally funded programs to support the needs of seniors, including services provided through senior centers, Meals on Wheels and other in-home care services. To be eligible for these services, individuals must be at least 60 years of age, low-income minority elders, or elders in "greatest economic and social need."

Services provided and funded through the Older Americans Act and many other federal and state programs are coordinated in communities through Area Agencies on Aging. There are 650 Area Agencies on Aging nationwide -- one of which is ElderSource.

ElderSource is a private, nonprofit, independent agency that receives federal and state funds as well as private contributions. It serves a seven-county area.

Long before the federal government acknowledged that LGBT elders might fit the definition of targeted groups (see box), leaders at ElderSource concluded that LGBT elders met the criteria of "social and economic need." In 2011, the agency formed a task force to advise it on matters relating to LGBT elders, and it included the needs of LGBT elders in its periodic community needs assessment, which effectively sets the agenda for the work of the agency.

"By identifying LGBT elders as a target population, we were able to require those organizations seeking to contract with us to address the needs of LGBT elders across all realms -- from training staff in cultural competency, to communications and policies and service delivery," said Linda Levin, CEO of Elder Source.¹⁶

ElderSource must submit a plan for its work in its district to the state -- and that most recent state plan includes specific actions addressing the needs of LGBT elders.

Acknowledging LGBT Elders

In July 2012, the Department of Health and Human Services issued new guidance for interpretation of "greatest economic and social need" stating: "While the definition of 'greatest social need' in the Older Americans Act includes isolation caused by racial or ethnic status, the definition is not intended to exclude the targeting of populations that experience cultural, social or geographic isolation due to other factors. In some communities, such isolation may be caused by minority religious affiliation. In others, isolation due to sexual orientation or gender identity may restrict a person's ability to perform normal daily tasks or live independently. Each planning and service area must assess their particular environment to determine those populations best targeted based on 'greatest social need.' "

http://aoa.gov/AoARoot/AoA_Programs/OAA/resources/Faqs.aspx#English

¹⁶ Interview with Linda Levin March 2013.

Today, ElderSource:

- Requires all organizations with which it contracts to meet its four-part test for being LGBT friendly (see box).
- Asks all agencies to whom it may refer clients whether the agency meets the four-part test. While ElderSource cannot require that agencies be LGBT friendly, it uses that screen to determine the most appropriate referrals.

ElderSource is the first Area Agency on Aging in Florida to take these steps, and Levin has been asked to train other area agencies. She has shared her agency's work with others at conferences across the state and region.

The Four-Part Test

ElderSource has established a four-part test to determine whether organizations are LGBT friendly:

- 1) Do you consider your organization to be LGBT friendly?
- 2) Do you have in place policies that affirm LGBT persons?
- 3) Have you had or are you willing to have cultural competency training for your staff?
- 4) Do you have signage (such as a rainbow decal) in your lobby or other public place indicating that it is a LGBT friendly environment?

In addition, she sits on the advisory committee to the state plan on aging and, in that role, has been successful at having LGBT issues written into the state plan. The 2013-2016 plan, under Long-Term Care Services, states:

"To ensure that long-term care services are provided to those who need them most, and to meet requirements of the Older Americans Act, the Department targets outreach activities to minority, rural, low-income and linguistically isolated (limited English proficiency) elders. Another group, emerging as needing services and basically invisible until recently, is elders who identify with the lesbian, gay, bisexual, and transgender (LGBT) community. People in the LGBT community may face poverty in their elder years because they may not have spousal benefits when one of the partners dies and may lack health insurance because they do not qualify for spousal benefits. Social isolation is another major reason to target LGBT elders. There now are goals for meeting the needs of this population statewide. The AAA in PSA 4, Elder Source, has an initiative that looks at the specific needs of LGBT elders. Staff there have conducted a survey to identify common concerns."¹⁷

HOSPITALS AND HEALTH SYSTEMS

Hospitals and major health systems are key players in providing health services for elders. While there may be many sensitive and caring individuals working in these settings, most major hospitals in Northeast Florida do not have in place specific policies or programs addressing the needs of LGBT elders.¹⁸ A potential bright spot, however, may be Baptist Health System.

Baptist Health System recently (October 2012) launched its AgeWell Center for Senior Health, a specialized outpatient center and care-team approach to managing the health of patients age 65 or older

¹⁷ Florida State Plan on Aging 2013-2016

¹⁸ For instance, Mayo Clinic Jacksonville provides partner benefits for same-sex partners of employees but does not have any specific programs addressing the unique needs of LGBT patients, according to the Public Relations department. And St. Vincent's HealthCare adheres to values of the Catholic Church, which "teaches that such acts [homosexual] are always violations of divine and natural law," according to Catholic Answers.

who are in declining health or have had two or more hospital visits in the past 12 months. AgeWell serves a very frail population: patients have an average age of 81 and are not institutionalized (assisted living/nursing homes). According to Executive Director Shikha Iyengar, 70% of patients are depressed, one-third have impaired cognition and 75% are not socially connected.

Most of the AgeWell patients are in need of community resources and the Center relies on ElderSource to help it connects patients to these services. ElderSource also helps to train AgeWell staff to be familiar with the scope of community resources.

While the staff of the AgeWell Center have not had cultural sensitivity training around LGBT needs and issues, staff does participate in a training program called "Ageless Wisdom," which briefly addresses LGBT issues. Ageless Wisdom is mandatory for the nursing staff and certain caregivers, said Iyengar. This training is supported in part by a grant from The Community Foundation for Northeast Florida.

(Iyengar's background includes experience working in a teaching nursing home in Pittsburgh at the time that HIV/AIDS was emerging as a major public health issue. The nursing home made a decision to accept HIV/AIDS patients, creating great anxiety among staff, residents and the family members of residents. The nursing home launched an intensive educational and training program for all three groups, addressing both the medical and social issues. They engaged Episcopal clergy, developed policies and, after several months implemented the new program with minimal disruption and no staff defections.)

As the AgeWell Center matures, it will begin to move its services out into the community, taking care closer to the patient, in community-based locations. Among the services it seeks to develop is a series of support groups, which will allow seniors to gather together periodically for social interaction, education and health monitoring and maintenance.

Where are the Gaps in Services?

Thanks to the work of ElderSource, LGBT elders in Northeast Florida are more likely to be able to access LGBT-friendly community-based services.

However, community-based programs and services are only part of the array of resources that elders need. LGBT elders still must access mainstream health care institutions -- hospitals, clinics and physician networks. In addition, many will require institutional support as they age, through assisted living, skilled nursing and/or hospice organizations.

At mainstream health institutions, the Florida Patient Bill of Rights (Section 381.026(6) of the Florida Statutes) outlines the legal rights of patients. While it specifically addresses the rights of patients to have "an appreciation of his/her dignity" and impartial treatment "regardless of race, national origin, religion, physical disability, gender, age, marital status, or sources of payment," no mention is made of sexual orientation or gender identity.

At nursing homes, residents are covered by a Florida Nursing Home Bill of Resident's Rights. It references "the right to be treated courteously, fairly, and with the fullest measure of dignity," but makes no mention of discrimination in any form. There are more than 125 assisted living facilities and more than 55 skilled nursing homes licensed by the State of Florida within 50 miles of Jacksonville.¹⁹ There is no provision in the licensure process requiring these institutions to address the specific needs of LGBT elders, and their individual practices are as varied as their ownership.

SOCIAL INTERACTION

Beyond the health arena, there is no central social or cultural organization or hub for LGBT elders in Northeast Florida that could provide social connections and affirmation for aging LGBT individuals. Both JASMYN and the LGBT Resource Center at the University of North Florida are oriented to younger populations, and many of the social "clubs" are focused on nightlife as opposed to broader community connections.

"Ageism is an unfortunate fact of American life," notes *Outing Age 2010*. "While many LGBT people work to confront oppressive behaviors and practices that harm our community, ageism is an issue that has received relatively little notice on the list of LGBT social-justice concerns."

FINANCIAL AND LEGAL RESOURCES

Most of the financial and legal issues are beyond the scope of a single community to address. However, through ElderSource, LGBT elders can access legal assistance, enroll for benefits, and access information on health insurance and Medicaid.

¹⁹ Agency for Health Care Administration

Potential Opportunities for Investment

Philanthropists often take the measure of community needs and then look for opportunities to deploy their philanthropic capital to meet those needs. Frequently, the challenge lies not in the motivation to invest, but in finding appropriate targets and vehicles for the investment.

With respect to improving services for LGBT elders in Northeast Florida, philanthropic investment at this stage would be best directed to:

Community outreach and education;

Support of specific, existing programs.

COMMUNITY OUTREACH AND EDUCATION

In May 2012, ElderSource sponsored a local screening of the documentary GenSilent, which highlights the concerns of aging LGBT individuals. Bringing the film to Jacksonville was a major step in building awareness and understanding of the issue, and the success of the venture has brought national attention to the community..

In addition, the Southeast Regional Board of Area Agencies will have its 2014 conference at Amelia Island, with representatives from an eight-state region attending. Levin has arranged to have Gen Silent screened there.

ElderSource currently is working on a Photo Voice project, inviting 10-15 LGBT elders to use photographs and audio to tell their individual stories. ElderSource plans a major exhibit of the works, beginning in December 2013, in partnership with WJCT and photographer Ann Goldbauer.

Supporting events such as these help to broaden community awareness and understanding, increasing sensitivity and developing a broader base of support for community initiatives.

SUPPORTING SPECIFIC PROGRAMS

The two primary programs that emerge as potential targets for support are ElderSource and Baptist's AgeWell Center.

ElderSource sees as one of its great strengths its ability to provide LGBT elder sensitivity training. It has provided that training to the 11 agencies with which it contracts across seven counties in Northeast Florida.

But there is a much broader potential audience for this training: home health agencies, nursing homes, physicians offices, therapy center and senior centers, for example.

To effectively provide training in these venues, ElderSource needs to develop and launch a marketing campaign to build awareness of need for and availability of this training. As demand grows, it will need to expand its pool of trainers. Both the marketing campaign and expanding the pool of trainers would require financial resources not currently available to ElderSource.

AgeWell could be an important partner for ElderSource's training efforts, especially as it begins to move care out into the community. Baptist Health's scope of reach across Northeast Florida positions it to be a model program and leader in addressing the needs of LGBT elders in institutional and community settings.