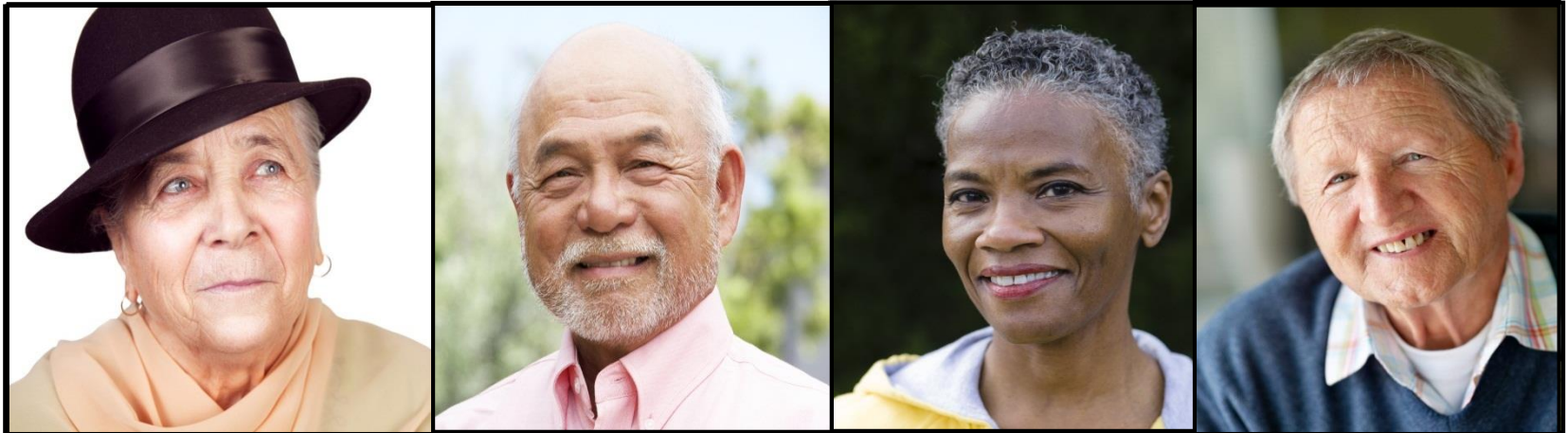


Equity

A Powerful Force for the Future of Aging



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Elder Friendly Futures Conference

September 15, 2016 ■ Lynnwood, WA

Marginalization: Health & Aging



Health and Well-being in Marginalized Communities

- Aging with Pride: National Health, Aging, Sexuality and Gender Study
- Healthy Hearts in Tulalip Native Community
- HIV/AIDS and Older Adults in China

The Nelson Family Presents
THE ADVENTURES OF

Ozzie & Harriet

BEST OF RICKY AND DAVE





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MODERN FAMILY



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U.S. Health Priorities



Institute of Medicine Report (IOM, 2011)

- At-risk and underserved

Healthy People 2020

- Inclusion of sexual and gender identity
- National health priorities

Growing Number Older Adults with HIV

Emlet, C. A., Fredriksen-Goldsen, K. I., Kim, H. J., & Hoy-Ellis, C. (2015). The relationship between sexual minority stigma and sexual health risk behaviors among HIV-positive older gay and bisexual men. *Journal of Applied Gerontology*.

GENDER-QUEER

LESBIAN

GAY

QUEER

QUESTIONING

INTERSEX

TRANSGENDER

Bisexual

Two-Spirit

Shifting Landscape



Global worldwide aging and diversity

Estimate 2.4 million LGBT, age 50 and older

- Every population group
- Hidden-within-hidden
- Increasing diversity by race and ethnicity

Kim, H.-J. & Fredriksen-Goldsen, K. I. (2016). Disparities in mental health quality of life between Hispanic and non-Hispanic White LGB midlife and older adults and the influence of lifetime discrimination, social connectedness, socioeconomic status, and perceived stress. *Research on Aging*.

Figure 1. Non-response Over Time: Sexual Identity Question



Time Trends in Rates of “Refuse to Answer” on Sexual Orientation by Age: Washington State Behavioral Risk Factor Surveillance System (BRFSS-WA), 2003-2010

Fredriksen-Goldsen, K. I., & Kim, H.-J. (2015). Count me in: Response to sexual orientation measures among older adults. *Research on Aging*, 37(5), 464-480.

Closing the Gap

Aging with Pride

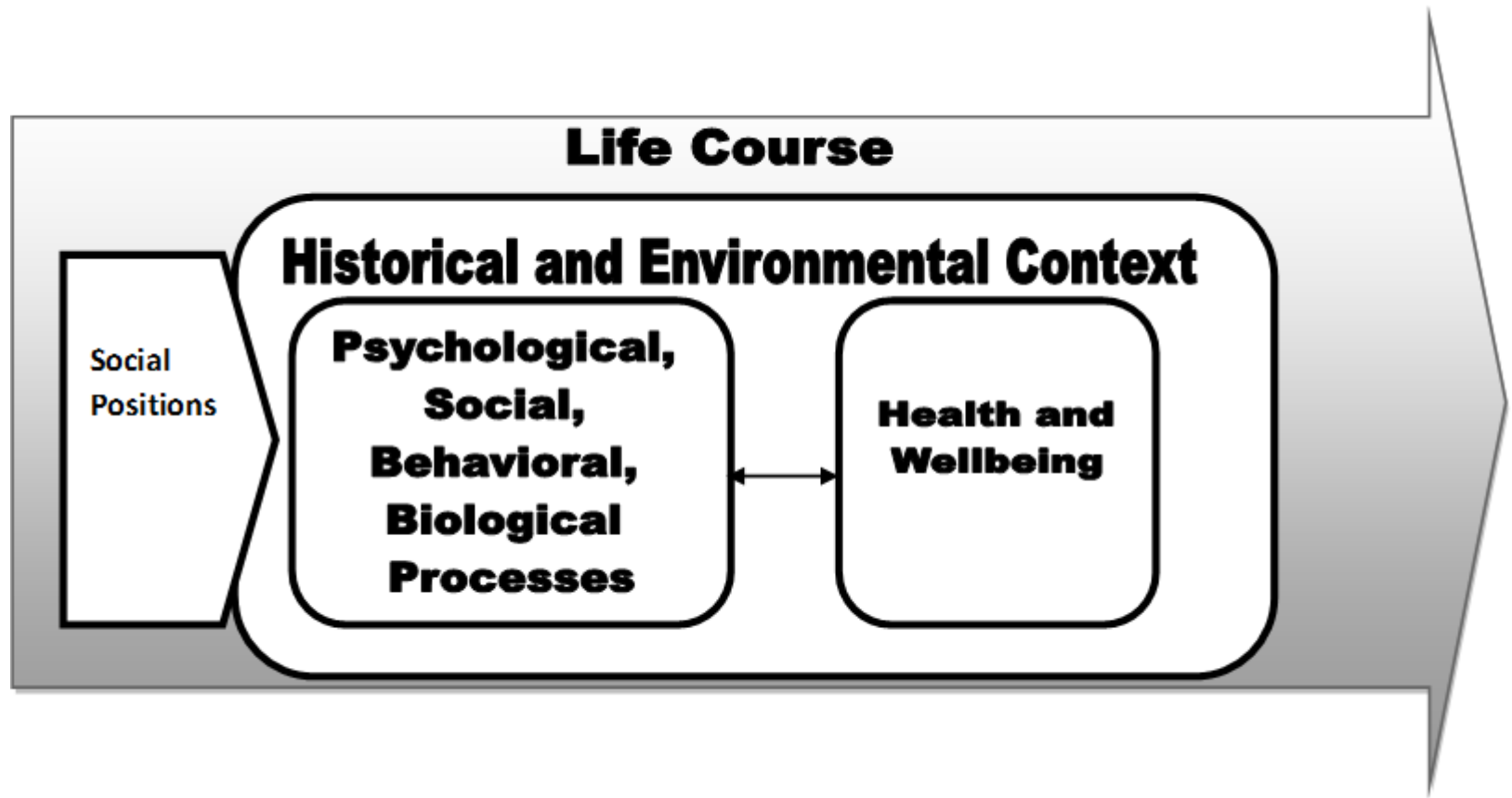
National Health, Aging, Sexuality and Gender Study



Aging with Pride: National Health, Aging, Sexuality and Gender Study

- Analysis of population based data (NHIS, HRS, BRFSS)
- National community-based survey (N=2,450)
- Longitudinal design
- Use of biological and self-report measures

Figure 2: Health Equity Promotion Model



Fredriksen-Goldsen, K. I., Simoni, J. M., Kim, H.-J., Lehavot, K., Walters, K. L., Yang, J., Hoy-Ellis, C. P., & Muraco, A. (2014). The Health Equity Promotion Model: Reconceptualization of lesbian, gay, bisexual, and transgender (LGBT) health disparities. *American Journal of Orthopsychiatry*, 84(6), 653-63.

Health Disparate Population

American Journal of
**PUBLIC
HEALTH**

Health Disparities Among Lesbian, Gay, and Bisexual Older Adults: Results From a Population-Based Study

Karen I. Fredriksen-Goldsen, PhD, Hyun-Jun Kim, PhD, Susan E. Barkan, PhD, Anna Muraco, PhD, and Charles P. Hoy-Ellis, MSW

American Journal of
**PUBLIC
HEALTH**

Disability Among Lesbian, Gay, and Bisexual Adults: Disparities in Prevalence and Risk

Karen I. Fredriksen-Goldsen, PhD, Hyun-Jun Kim, PhD, and Susan E. Barkan, PhD

Distinct Groups



Unique risks and strengths

- LGBT people higher education, comparable or less income
- LGBT people have historically been more likely to serve in the military
 - 41% of transgender older adults served in the military
 - Most LGBT veterans do not access their health benefits
- ▶ Unique circumstances of diverse groups of LGBT older adults

Life Course Perspective



Social context

Cultural meaning

Structural location

- Invisible Generation
- Silent Generation
- Pride Generation

Adversity



LGBT older adult participants

- Victimization
 - Discrimination
 - Everyday bias
- ▶ Many have trauma related histories that must be considered.

Fredriksen-Goldsen, K. I., Emlet, C. A., Kim, H.-J., Muraco, A., Erosheva, E. A., Goldsen, J., & Hoy-Ellis, C. P. (2013). The physical and mental health of lesbian, gay male and bisexual (LGB) older adults: The role of key health indicators and risk and protective factors. *The Gerontologist*, 53(4), 664-675.

Historical Trauma



“I am not aware that anyone close to me knows or suspects my sexual orientation. My son once hinted at it but not in recent years. At my death, they will probably find tell-tale clues.”

88-year-old participant

Resilience



LGBT older adult participants

- Wellness activities
 - Spiritual or religious activities
- ▶ Recognize the many strengths and resources of LGBT older adults and their families.


Lack of Access



LGBT older adult participants

- Denied or received inferior healthcare
 - Do not disclose sexual or gender identity
 - Bisexual older adults less likely to disclose
- ▶ Physicians' failure to recognize, and patients' reluctance to disclose, both create an incomplete assessment.

Unique Support



LGBT older adult participants

- Rely heavily on friends and partners, most of similar age
 - Often lack a will or durable power of attorney
- ▶ There may be limits in friends' ability to provide care over the long-term, especially if decision-making is required.

Unmet Needs



LGBT older adults in King County

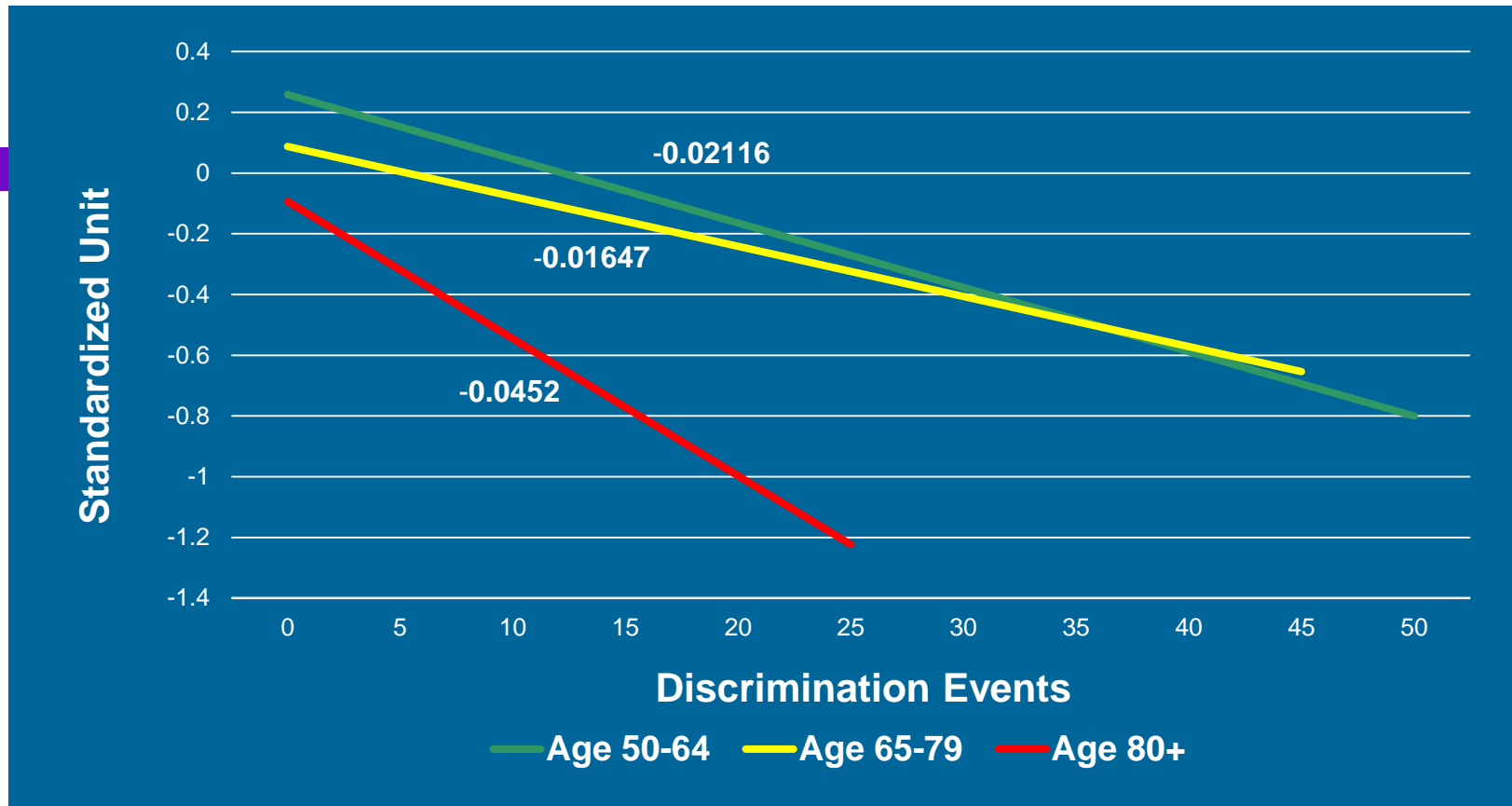
- Senior housing, transportation, legal services, social events, and support groups
 - Care partners: Supportive long-term care facilities
- ▶ Most services fail to take into account the unique needs facing LGBT older adults and their caregivers.

Invisible, Silent and Pride Generations



- Configuration of risks and resources differ by age group
- For older age groups: Lifetime discrimination lower; degree of internalized stigma higher; degree of sexual orientation disclosure lower
- Non-disclosure may reduce risk of discrimination yet reduce access to social resources. The degree of influence of discrimination is more negative for older age group

Figure 3. Lifetime Discrimination and Health by Age Groups



Slope Comparisons	Wald Test	p value
Between Group 1 & 2	$\chi^2_{(1)} = 0.71$	0.3985
Between Group 1 & 3	$\chi^2_{(1)} = 3.01$	0.0828
Between Group 2 & 3	$\chi^2_{(1)} = 4.41$	0.0358

Life Events



Retired Survivors
Midlife Bloomers
Visibly Resourced
Beleaguered At-Risk

Service Innovations



Aging as a community issue

Practitioner competencies

Emerging service models

Generations with Pride

Safe space trainings

Policy Innovations



Medicaid Waiver Program: Washington State
Special Legislative Commission: Massachusetts
Affordable Care Act
Bathroom Bills / Antidiscrimination Protections
Greatest Social Need

Research Innovations



Population level data collection

Development and testing: Evidence based practices

Technology

Local to global

Moving Forward



Aging and health trajectories over time

Culturally responsive services

Evidence based programs and policies

Interventions designed for unique needs

At-Risk and Underserved: LGBTQ Older Adults in Seattle/King County

Findings from *Aging with Pride*

Karen Fredriksen-Goldsen, PhD, Chengshi Shiu, PhD,
Hyun-Jun Kim, PhD, Charles A. Emlet, PhD, Jayn Goldsen, BS

Report published by Aging with Pride, University of Washington, Seattle, WA
October 2015



The Aging and Health Report

*Disparities and Resilience
among Lesbian, Gay, Bisexual, and Transgender Older Adults*

By Karen I. Fredriksen-Goldsen, PhD, Hyun-Jun Kim, PhD,
Charles A. Emlet, PhD, Anna Muraco, PhD, Elena A. Frosheva, PhD,
Charles P. Hoy-Ellis, MSW, Jayn Goldsen, BS, Heidi Petry, PhD



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