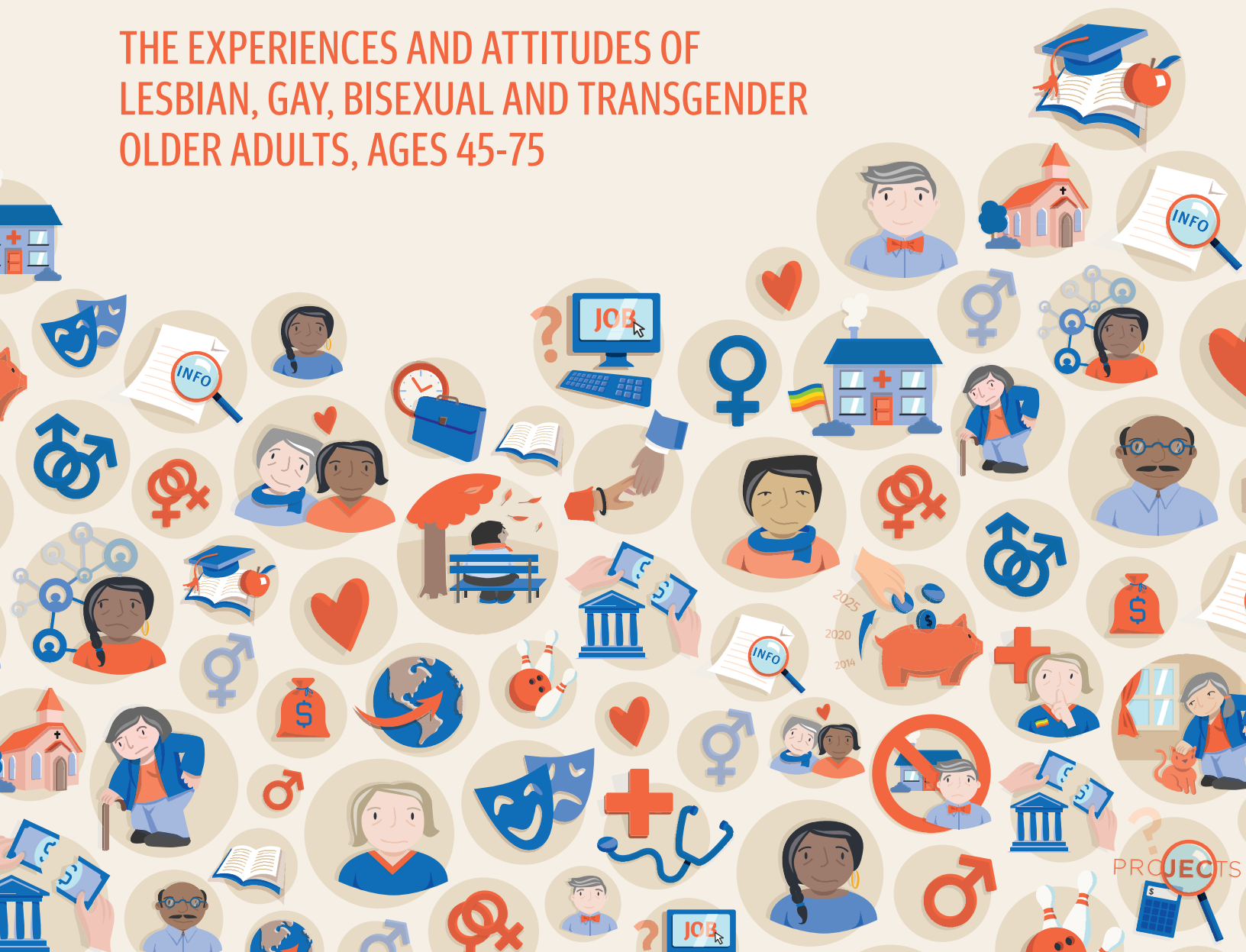


OUT & VISIBLE

THE EXPERIENCES AND ATTITUDES OF
LESBIAN, GAY, BISEXUAL AND TRANSGENDER
OLDER ADULTS, AGES 45-75



ACKNOWLEDGEMENTS

SAGE would like to thank the Gill Foundation for its generous support of this research initiative and report. We are deeply grateful to David Krane, Marjie Sands and John Simmons at Harris Poll for leading this LGBT older adult market research study—and to Bob Witeck at Witeck Communications for his invaluable insights and guidance on emerging LGBT households and markets. Finally, we would like to express our gratitude to Rebecca Gillan (Senior Vice President) and John Hagerty (Senior Strategic Advisor) at the AARP Research Center for their indispensable advice throughout the life of this project.

ABOUT NIELSEN AND THE HARRIS POLL

On February 3, 2014, Nielsen acquired Harris Interactive and The Harris Poll. Nielsen Holdings N.V. is a global information and measurement company with leading market positions in marketing and consumer information, television and other media measurement, online intelligence and mobile measurement. Nielsen has a presence in approximately 100 countries, with headquarters in New York, USA and Diemen, the Netherlands. For more information, visit nielsen.com.

A NOTE ON TERMINOLOGY

“Older people” and “older adults” are used interchangeably throughout this report to describe the age sample of this study: people between the ages of 45 and 75. In order to compare experiences between age brackets, in some instances we use the term “younger” (older) people to refer to people ages 45-59 and “older” (older) people to describe people ages 60-75. When comparing transgender respondents to non-transgender respondents, we use the term “cisgender” to refer to non-transgender respondents.

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LESBIAN, GAY, BISEXUAL AND TRANSGENDER (LGBT) OLDER ADULTS

in the U.S. are at the nexus of two highly visible national trends.

The first trend is demographic: every day, 10,000 people turn 65, a shift that will rapidly age this country and dramatically impact the lives of LGBT people who often grow older without sufficient supports, resources or rights. The second trend is cultural: as LGBT people gradually achieve significant (though limited and not yet equal) legal rights, making it easier for certain segments to live openly as LGBT people, the public has become increasingly allied with their LGBT family members and friends, and invested in the LGBT experience. Yet while these two trends have magnified the visibility of aging in America, as well as the barriers affecting LGBT people, the relationship between aging and LGBT life remains largely understudied. This study seeks to make more visible the concerns and aspirations of LGBT older people across the spectrum.

Out and Visible: The Experiences and Attitudes of Lesbian, Gay, Bisexual and Transgender Older Adults, Ages 45-75 examines the values, needs, wants and lifestyle preferences of LGBT older people. This study explores the aging realities of LGBT people, as well as their fears, beliefs, behaviors and aspirations in areas such as healthcare, finance and retirement, support systems, housing and sources of information. SAGE also recognizes that this country has grown increasingly diverse in its racial and ethnic composition, and that women and transgender people (as two examples) often require

unique supports. Thus, this study takes a closer look at the extent to which African Americans, Hispanics, women and transgender people have unique considerations within a diverse LGBT market.

Out and Visible reveals various insights about LGBT older people in this country, including:

- **Profound concerns about aging**, including physical decline, remaining independent, loneliness in older age, and the loss of support systems and physical attractiveness;

- **A fear of judgment and inferior care from healthcare providers**, with many LGBT older people not disclosing their sexual orientations or gender identities to their providers;

- **Financial insecurity in retirement years**, including a fear of cuts in essential government programs, concerns that one's savings will run out and delayed retirement;

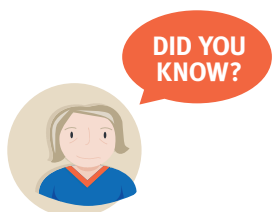
- **Smaller support systems over time**, including high numbers of LGBT older people living single, alone and fearing discrimination in housing and long-term care settings;
- **The desire to serve as mentors once retired**, as well as engage in travel, leisure activities, volunteering, part-time employment and social groups; and
- **Differences in aging concerns and aspirations among transgender people, African Americans, Hispanics and women** (among others), which suggests tailored approaches to more underserved segments of the LGBT older adult population.

Out and Visible details a uniquely comprehensive, nationally representative quantitative study on aging among older LGBT people. Its timeliness and comprehensive scope are in line with SAGE's purpose as an organization, which has been dedicated to innovation in LGBT aging for more than 35 years. Throughout the decades, SAGE has pioneered services and programs, policy initiatives, online resources and training initiatives that have transformed the aging experiences of LGBT people nationwide. *Out and Visible* reaffirms SAGE's premiere standing in leading essential interventions that respond to the most pressing issues facing LGBT older people.

Ultimately, *Out and Visible* aims to make LGBT people more visible as a population and as a market to the wide array of providers,

businesses, community advocates, policy leaders and media professionals who are positioned to improve their overall quality of life. Together, we can reach a diverse population that has remained underserved for too long, while helping them attain a full life that's financially secure, free of discrimination, surrounded by community and replete with the types of leisure, activities and chosen careers that they deserve, regardless of age, sexual orientation or gender identity, among other characteristics. We invite you to join us in making our varied aging experiences as LGBT people more "out and visible"—and in turn, more satisfying and rewarding.

SAGE (Services and Advocacy for GLBT Elders)
October 2014



CONSERVATIVE ESTIMATES SUGGEST THAT THERE ARE MORE THAN **3 MILLION LGBT PEOPLE AGE 55 AND OLDER** IN THE U.S., AND THAT THIS NUMBER WILL **DOUBLE** IN THE NEXT TWO DECADES AS THE BABY BOOM GENERATION FULLY RETIRES.

The data used in this report came from an 18-minute online survey conducted by Harris Poll on behalf of SAGE. A sample of 2,376 people ages 45-75 were surveyed online. The study was fielded between March 4, 2014 and March 21, 2014. Using figures from Harris Poll’s proprietary LGBT archive, data were weighted for education, age by gender, race and ethnicity, region and household income, where necessary, to align the respondent data with the U.S. population data on LGBT residents, ages 45-75 and non-LGBT residents, ages 45-75. Additionally, Harris Poll’s weighting algorithm allowed for adjustments that accounted for attitudinal and behavioral differences between

those who are online from those who are not; those who join online research panels from those who do not; and those who responded to this survey and those who did not. Finally, LGBT African American and Hispanic respondents were oversampled to ensure a sufficient number of completed interviews for analysis. For more information on why and how distinct subpopulations were studied, please see the “limitations section” on page 22 of this report.

BACKGROUND

In 2012, SAGE commissioned Harris Poll to lead a two-year market research study focused

on the values, needs, wants and lifestyle preferences of LGBT older people. The first phase of the study was qualitative and took place in early 2013. A diverse cross-section of LGBT people age 45 and older participated in online bulletin boards. Participants were split into two samples, ages 45-59 and age 60 and older, with an equal split between higher annual household incomes (\$50,000 and higher) and lower annual household incomes (less than \$50,000) for each group. The results of this qualitative study were used to identify themes and insights that informed the quantitative study described in this report.

DEMOGRAPHIC
CHARACTERISTICS
OF SURVEY
RESPONDENTS
(N = 2,376)

LGBT, TOTAL	N = 1,857	NON-LGBT, TOTAL	N = 519
Age		Age	
45-59	1,133	45-59	272
60-75	724	60-75	247
Gender and Transgender Status		Gender	
Male	1,185	Male	252
Female	669	Female	267
Transgender	137		
Race and Ethnicity			
White/Other	1,549		
African American	147		
Hispanic	161		
Annual Household Income			
Less than \$50,000	856		
\$50,000 to \$74,999	362		
\$75,000 to \$99,999	250		
\$100,000 or more	330		

EXECUTIVE SUMMARY

In early 2014, SAGE commissioned Harris Poll to conduct a uniquely comprehensive, nationally representative quantitative study on the values, needs, wants and lifestyle preferences of LGBT older people between ages 45 and 75. The study included 1,857 LGBT people and 519 non-LGBT people, and was conducted March 4-21, 2014. What follows are key findings from the study across six general areas: issues with aging, healthcare, finance and retirement, support systems, housing and sources of information. *Out and Visible: The Experiences and Attitudes of Lesbian, Gay, Bisexual and Transgender Older Adults, Ages 45-75* aims to make LGBT people more visible as a population and as a market to the wide array of providers, businesses, community advocates, policy leaders and media professionals who are positioned to improve the quality of life for LGBT older people.

Key Findings

1 When it comes to aging, LGBT older people are more concerned than non-LGBT older people with regard to personal finances, physical decline, remaining independent, loneliness in older age, support systems and physical attractiveness.

Aging concerns in general are highest among LGBT older people in their 40's and 50's, low-income people, women, transgender people, African Americans and Hispanics. For example, one in two (51%) LGBT older people is very or extremely concerned about "having enough money to live on," as compared to 36% of non-LGBT people; and one in three (32%) LGBT older people is very or extremely concerned about "being lonely and growing old alone," as compared to 19% of non-LGBT people.

2 Many LGBT older people report that their primary healthcare providers do not know about their sexual orientations, and many feel reluctant to discuss their sexual orientations and gender identities with other healthcare providers for fear of being judged or receiving inferior care.

In particular, transgender older people fear that they will experience limited access to healthcare providers and be denied medical treatment as they age. Forty-three percent of LGBT older people who are single and 40% of LGBT older people in their 60s and 70s say their healthcare providers don't know their sexual orientations. Two-thirds of transgender adults (65%) feel that there will be limited access to healthcare as they grow older.

3 LGBT older people are far more concerned than non-LGBT older people about their financial security and retirement: as one example, far more LGBT older people than non-LGBT older people express unease about having saved enough money to retire.

Like their non-LGBT counterparts, LGBT older people are concerned about the consequences of potential cuts in programs critical to their retirement, such as Social Security. Forty-two percent of LGBT older people are very or extremely concerned that they will outlive the money they have saved for retirement, as compared to 25% of non-LGBT people; and 44% of LGBT older people are very or extremely concerned that they will have to work well beyond retirement age in order to have enough money to live, as compared to 26% of non-LGBT people.

4 When planning for retirement, both LGBT and non-LGBT older people rely largely on their own knowledge and education.

However, LGBT older people (21% vs. 13%) are more likely than non-LGBT older people to rely on government tools when planning for retirement, while non-LGBT older people (37% vs. 28%) are more likely than LGBT older people to use the services of a financial advisor.

5 While most LGBT older people age 60 and older report being retired, many of those who are not retired anticipate working, on average, until age 69.

Moreover, half of all single LGBT older people believe that they will have to work well beyond retirement age. Additionally, 37% of LGBT older people, ages 45-59, anticipate that, on average, they will retire at age 65, and 26% do not know when they will be able to retire.

6 Among the types of activities they would like to enjoy in retirement, both LGBT older people and non-LGBT older people cite leisure activities, travel, volunteering, starting a hobby, working part-time and joining social groups.

However, LGBT older people are more likely to see themselves as mentors, and non-LGBT older people are more likely to say they will spend their retirement time with their families and friends. Additionally, partnered LGBT older adults are much more likely than single LGBT older adults to envision spending their retirement years enjoying leisure activities (64% vs. 55%), traveling (62% vs. 46%) and spending time with family and friends (51% vs. 39%).

7 Many LGBT older people are concerned that volunteering and working during their retirement years will be hindered if others know about their sexual orientations and gender identities.

Yet LGBT older people are less likely than non-LGBT older people to say that their age will be a barrier to these activities. One in four (27%) LGBT older adults feels that work or volunteer activities will not be open to him/her if others know about his/her sexual orientation, and one in three (33%) transgender adults feels those same activities will not be accessible if others know about his/her gender identity.

8 LGBT older people are more likely than their non-LGBT peers to live alone, have smaller support networks over time and are less satisfied with the information they receive related to support systems.

LGBT African American and transgender older people are more likely than their peers to report that people from their churches or faith are part of their support networks. About one in three (34%) LGBT older people lives alone, while 40% of LGBT older people say that their support networks have become smaller over time. African American LGBT adults are three times as likely as White or Hispanic LGBT adults to say that people from their churches or faith are part of their support systems (26% vs. 8% and 8%).

9 LGBT older people report fearing and experiencing discrimination in housing and long-term care environments, respectively—and many LGBT people are interested in LGBT-friendly affordable housing.

One in eight (13%) LGBT adults and one in four (25%) transgender adults say that they have been discriminated against when searching for housing on the basis of their sexual orientations and gender identities, respectively. Forty-four percent of LGBT older adults are very or extremely

interested in living in an affordable LGBT-friendly housing development at some point in the future.

10 When seeking information on aging, both LGBT and non-LGBT people are likely to rely on the internet, as well as family and friends, as their top sources. Among LGBT older people, women are more likely than men to rely on government sources, and men are more likely than women to rely on social media. Additionally, African American LGBT older people are much more likely than both Whites and Hispanic LGBT older people to consult government sources for information on aging (37% vs. 23% vs. 20%). “Younger” LGBT adults (aged 45 – 59) are much more likely than “older” LGBT adults (aged 60-75) to rely on friends and family members as sources of information on aging (42% vs. 34%), while “older” LGBT adults are much more likely to rely on professionals (42% vs. 34%) and non-profit organizations (44% vs. 31%) than their younger LGBT counterparts.

Conclusions and Recommendations

The results of this study attest to the importance of creating welcoming environments that support LGBT older people in various aspects of their lives. Concerns about aging are high among LGBT older people (especially among Hispanics, African Americans, women, transgender people and single people, as notable examples), and they need to feel welcome as LGBT people in the aging and long-term care systems, and as older adults in LGBT communities.

Many LGBT older people report not disclosing their identities to their healthcare providers for fear of being judged; this information can be systematized into the patient intake process and paired with proper training, policies and protocols to ensure that LGBT patients are identified and treated properly by healthcare providers. Likewise, financial professionals, nonprofit organizations and government agencies are positioned to improve their offerings to LGBT older people so that they prepare properly for their retirement and feel more secure about their financial futures. Because many LGBT older people anticipate working well beyond retirement age, they need proper legal protections in the workplace and

access to employment programs that speak to them as LGBT older people dealing with age- and LGBT-related biases in employment.

Many LGBT older people report living alone, being single and seeing their support networks become smaller over time; LGBT aging programs can fill this gap, but these types of supports need more funding support and widespread expansion. Mainstream aging providers can also benefit from LGBT cultural competence training, and aging programs rooted in definitions of “family” and “next of kin” should be expanded to include friends, caregivers and others who are central to LGBT people. As the economy worsens and housing insecurity increases, LGBT older people face additional challenges when they encounter discrimination in housing and long-term care settings. Stronger legal protections are needed in these areas at federal, state and local levels. Additionally, LGBT older people could benefit from LGBT senior housing, along with an array of complementary housing supports and policy improvements.

Finally, without accurate information that reaches LGBT older people through proper channels, LGBT older people might lack the information they need to

make wise choices earlier in their aging lives. Further research should help the public and private sectors grasp how LGBT older people can access better information on all aspects of their lives. In the meantime, the current information emanating from the public and private sector should be increased, made more readily available, and vetted for accuracy, accessibility and LGBT-inclusivity.



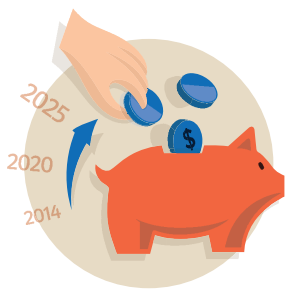
Visit sageusa.org for more information on this national study, including the full report and executive summary, the survey questionnaire and frequently asked questions (FAQ). Also, if you're interested in partnering with SAGE to understand key areas of this report in more depth, or to explore how SAGE can support your organizational and business strategies related to LGBT older people, please contact us at [212-741-2247](tel:212-741-2247) or email us at outandvisible@sageusa.org.

DETAILED FINDINGS

A quality of life as one ages requires financial security, affordable and quality housing, strong support networks, meaningful and enjoyable activities, and accurate information to deal with life's options and stressors. Yet as the findings described in this report attest, many LGBT older people are concerned that they will not have the funds necessary to retire, and in turn anticipate working beyond retirement age. Additionally, many LGBT older people are single, living alone and report smaller support networks over time. They also report discrimination when seeking housing and fear how they will be treated in assisted living and other long-term care environments. Yet LGBT older people are multi-faceted. This study shows that LGBT people are also more likely to be mentors than their non-LGBT peers, rely on their knowledge and networks for information related to aging, and many aspire to live an older life of leisure, travel and volunteering.

Issues with Aging

Research has long been concerned with understanding how people feel about their aging over time—what drives their feelings and choices; differences among types of older people; and what compels joy and satisfaction on one end of the spectrum, and what spurs loneliness and isolation on the other end. A 2013 AARP study on attitudes about aging found that, depending on one’s health, many older people define “old” as cohorts older than themselves. Also, having a purpose in life, feelings of connectedness and the treatment that older people receive from others as they age are only a few factors that affect satisfaction in later life.¹ A 2012 national health study on LGBT older people found that 74% are satisfied with their lives, though that same study also found significant disparities in areas related to community belonging, social support, internalized stigma, health behaviors, caregiving and more.² Thus, this study asked LGBT older people to report their concerns on a variety of issues related to their aging lives.



51% OF LGBT OLDER PEOPLE ARE CONCERNED ABOUT HAVING ENOUGH MONEY TO LIVE ON AS THEY AGE.

When it comes to aging, LGBT older people are more concerned than non-LGBT older people with regard to personal finances, physical decline, remaining independent, loneliness in older age, support systems and physical attractiveness.

- 51% of LGBT older people are very or extremely concerned about having enough money to live on, as compared to 36% of non-LGBT older people.
- 43% of LGBT older people are very or extremely concerned about declining physical health, as compared to 33% of non-LGBT older people.
- 33% of LGBT older people are very or extremely concerned about depending on others for money, as compared to 18% of non-LGBT older people.

- 43% of LGBT older people are very or extremely concerned about not being able to take care of themselves, as compared to 34% of non-LGBT people.
- 32% of LGBT older people are very or extremely concerned about being lonely and growing old alone, as compared to 19% of non-LGBT older people.
- 30% of LGBT older people are very or extremely concerned about not having someone to take care of them, as compared to 16% of non-LGBT older people.
- 21% of LGBT older people are very or extremely concerned about losing their physical attractiveness, as compared to 12% of non-LGBT people.

Aging concerns in general are highest among LGBT older people in their 40's and 50's, low-income people, women, transgender people, African Americans and Hispanics.

- LGBT older women are more concerned than LGBT older men with having enough money to live on (57% vs. 49%); not being able to take care of themselves (51% vs. 39%); and being a burden to those they love (42% vs. 30%).
- Transgender older people tend to be more worried about being a burden to their loved ones (48% vs. 32%); knowing where they will live as they grow older

(42% vs. 27%); and losing their physical attractiveness (31% vs. 20%) than their cisgender (non-transgender) peers.

- African American and Hispanic LGBT older people are more concerned than White LGBT older people when it comes to being a burden to their loved ones (43% vs. 29%).
- Nearly half of Hispanic LGBT older people (45%) are concerned about losing their partners.
- Concerns regarding the loss of physical attractiveness are more pronounced for Hispanic LGBT older people than their racial and ethnic peers—34% vs. 22% for older LGBT African Americans and 18% for older White LGBT people.



PERCENTAGES OF LGBT OLDER PEOPLE CONCERNED ABOUT LOSING THEIR ATTRACTIVENESS AS THEY AGE.

34%	22%	18%
OF HISPANIC LGBT OLDER PEOPLE	OF AFRICAN- AMERICAN LGBT OLDER PEOPLE	OF WHITE LGBT OLDER PEOPLE

Healthcare

Previous research has found significant health disparities among LGBT older people in areas related to physical and mental health, including high blood pressure, cholesterol, diabetes, heart disease, HIV/AIDS, depression and more.³ Health disparities among LGBT people have been linked to a lifetime of stigma, discrimination, violence and victimization; higher poverty rates; a lack of access to LGBT-competent providers; and low rates of health insurance coverage. In turn, improving the health of LGBT people can improve health and well-being, reduce healthcare costs, increase the length and quality of life and reduce the spread of disease. Further, open communication between providers and LGBT patients allows providers to better identify, understand and treat LGBT patients, and some research has shown that patients who disclose their sexual orientations might also feel safer discussing their risk behaviors.⁴ Thus, LGBT older people in this study were asked about their experiences with healthcare providers and their feelings about being open about their sexual orientations and gender identities.

PERCENTAGE OF TRANSGENDER OLDER PEOPLE WHO BELIEVE HEALTHCARE WILL BE LIMITED OR DENIED AS THEY AGE.



LIMITED	DENIED
65%	55%

Many LGBT older people report that their primary healthcare providers do not know about their sexual orientations, and many feel reluctant to discuss their sexual orientations and gender identities with other healthcare providers for fear of being judged or receiving inferior care. In particular, transgender older people fear that they will experience limited access to healthcare and be denied medical treatment as they age.

- 36% of LGBT older people—or more than one in three people—say that their primary healthcare providers are unaware of their sexual orientations. Forty-three percent of LGBT older people who are single and 40% of LGBT older people in their 60s and 70s say their healthcare providers don't know about their sexual orientations.
- While most LGBT older people (65%) say that their relationships with their primary healthcare providers are open and honest, nearly one in four (23%) are reluctant to discuss certain issues for fear of being judged.

- LGBT older men are more concerned than LGBT older women about being judged by their healthcare providers (25% vs. 18%). More than one-third (35%) of transgender adults are concerned about being similarly judged.
- One in five LGBT older people (20%) and nearly half of transgender older people (44%) feel that their relationships with other healthcare providers—such as hospital or nursing home staff—would be adversely affected if their sexual orientations/gender identities were known.
- Hispanic LGBT older people are more concerned than African American LGBT older people and White LGBT older people about the quality of care they would receive from these other providers, if their sexual orientations were known (34% vs. 23% and 16%).
- Two-thirds of transgender older people (65%) feel that there will be limited access to healthcare as they grow older and more than half (55%) feel that they will be denied medical treatment because of their ages.

Finances and Retirement

Recent research has documented profound retirement insecurities among the U.S. population. A 2012 report on retirement confidence found that only 14% of Americans are very confident they will have enough money to live on in retirement, and 60% of workers have a total savings and investments of less than \$25,000. More than half report that they have not calculated what they will need financially to live in retirement.⁵ Financial professionals, nonprofits, online companies and others can help adults earlier in life to take measures that will secure their retirement financial picture, but it remains unclear the extent to which LGBT people are planning for their retirement, as well as how they feel about their retirement years.⁶ LGBT older people are particularly vulnerable to financial insecurity due to employment concerns, a lifetime of discrimination and smaller support networks. Thus, this study asked LGBT older people about their aspirations and concerns regarding retirement, as well as what types of activities they are undertaking to plan and enjoy their retirement years.

LGBT older people are far more concerned than non-LGBT older people about their financial security and retirement: as one example, far more LGBT older people than non-LGBT older people express unease about having saved enough money to retire.

- 47% of LGBT older people are very or extremely concerned that they will not be able to live the lives they want in retirement due to lack of money, as compared to 28% of non-LGBT older people.
- 44% of LGBT older people are very or extremely concerned that they will have to work well beyond retirement age just to have enough money to live, as compared to 26% of non-LGBT older people.

- 42% of LGBT older people are very or extremely concerned that they will outlive the money they have saved for retirement, as compared to 25% of non-LGBT older people.

- 43% of LGBT older people are very or extremely concerned that they will not be able to deal with unexpected, major emergencies in retirement, as compared to 30% of non-LGBT older people.

Like their non-LGBT counterparts, LGBT older people are concerned about the consequences of potential cuts in programs critical to their retirement, such as Social Security.

- Social Security is the resource that most LGBT (83%) and non-LGBT (86%) older people say they are depending on to fund their retirement years.

- Both LGBT (58%) and non-LGBT older people (56%) express high levels of concern over the impact that cuts in government spending will have on their future financial security and on such government programs as Social Security, Medicare or Medicaid.

- 67% of LGBT older people with annual incomes less than \$50,000 are concerned that cuts in Social Security, Medicare or Medicaid will make these programs unavailable or offer them at reduced levels.

PERCENTAGES OF LGBT OLDER PEOPLE WHO FEEL THEY WILL NEED TO WORK WELL BEYOND RETIREMENT AGE.



50% OF SINGLE LGBT OLDER PEOPLE

36% OF PARTNERED LGBT OLDER PEOPLE

When planning for retirement, both LGBT and non-LGBT older people rely largely on their own knowledge and education. However, LGBT older people are more likely to draw on government sources, while non-LGBT older people are more likely to use financial advisors for retirement planning.

- Both LGBT (57%) and non-LGBT (54%) older people say they are most likely to rely on their own knowledge and education when planning for retirement.
- LGBT older people (21% vs. 13%) are more likely than non-LGBT older people to rely on government tools when planning for retirement, while non-LGBT older people (37% vs. 28%) are more likely than LGBT older people to use the services of a financial advisor.

While most LGBT older people age 60 and older report being retired, many of those who are not retired anticipate working, on average, until age 69. Moreover, half of all single LGBT older people believe that they will have to work well beyond retirement age.

- While most (70%) LGBT older people ages 60-75 are retired, 13% anticipate that, on average, they will have to work until age 69 before they can retire. Another 10% feel that they will never be able to retire or don't know when they can retire.
- 37% of LGBT older people ages 45-59 anticipate that, on average, they will retire at age 65, and 26% do not know when they will be able to retire.

- Half (50%) of single LGBT older people feel that they will have to work well beyond retirement age, as compared to 36% of partnered LGBT older people and 27% of single non-LGBT older people.

Among the types of activities they would like to enjoy in retirement, both LGBT older people and non-LGBT older people cite leisure activities, travel, volunteering, starting a hobby, working part-time and joining social groups. However, LGBT older people are more likely to see themselves as mentors, and non-LGBT older people are more likely to say they will spend their retirement time with their families and friends.

- LGBT and non-LGBT older people are similar in what they want to do during retirement. During their retirement years, roughly three in five LGBT and non-LGBT older people (59% vs. 65%) look forward to enjoying leisure activities, and about half (53% vs. 55%) want to travel. Other similarities include: volunteering (40% LGBT vs. 40% non-LGBT); starting a hobby (33% vs. 34%); getting a part-time job (28% vs. 27%); and joining a social group (19% vs. 19%).
- Non-LGBT older people (59%) are more likely to say that they will spend their time in retirement with family and friends than LGBT older people (45%).
- While the percentage is small, LGBT older people are twice as likely as non-LGBT older people to envision themselves mentoring others (14% vs. 7%).

- Partnered LGBT older people are much more likely than single LGBT older people to envision spending their retirement years enjoying leisure activities (64% vs. 55%), traveling (62% vs. 46%) or spending more time with family and friends (51% vs. 39%).

Many LGBT older people are concerned that volunteering and working during their retirement years will be hindered if others know about their sexual orientations and gender identities. Yet LGBT older people are less likely than non-LGBT older people to say that their age will be a barrier to these activities.

- When volunteering or working in retirement, LGBT older people are less worried than non-LGBT older people that their ages will prevent some opportunities from being open to them: 63% of LGBT older people say that age is not a concern vs. 51% of non-LGBT older people.

- However, one in four (27%) LGBT older people feels that work or volunteer activities will not be open to him/her if others know about his/her sexual orientation.

- One in three (33%) transgender older people feels that work/volunteer activities will not be open to him/her if others know about his/her gender identity. Another one in three (38%) transgender older people is not sure how these opportunities will be affected.



1 IN 4 LGBT OLDER PEOPLE AND 1 IN 3 TRANSGENDER OLDER PEOPLE FEAR THAT VOLUNTEER ACTIVITIES WILL NOT BE OPEN TO THEM IN OLDER AGE IF THEIR SEXUAL ORIENTATIONS OR GENDER IDENTITIES BECOME KNOWN.

Support Systems

Support systems are essential to all people as they age, especially LGBT people who might be at greater risk of social isolation. Previous research has found that 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.⁷ These supports are critical in helping people deal with daily tasks and cope with larger physical, financial and emotional life challenges and transitions. A 2011 national health study on LGBT older adults found that 53% of respondents felt isolated from others.⁸ Without strong support systems, older people might lack the supports they need to cope with later life—much less enjoy it. Thus, LGBT older people in this study were asked to describe their living arrangements and support systems over time.

PERCENTAGES OF LGBT OLDER PEOPLE WHO SAY THAT PEOPLE FROM THEIR CHURCHES OR FAITH ARE PART OF THEIR SUPPORT NETWORKS.



26% 8% 8%

OF AFRICAN-AMERICAN LGBT OLDER PEOPLE OF WHITE LGBT OLDER PEOPLE OF HISPANIC LGBT OLDER PEOPLE

LGBT older people are more likely than their non-LGBT peers to live alone, have smaller support networks over time and are less satisfied with the information they receive related to support systems. LGBT African American and transgender older people are more likely than their peers to report that people from their churches or faith are part of their support networks.

- About one in three (34%) LGBT older people lives alone, as compared to 21% of non-LGBT people.
- 48% of LGBT older people are living with spouses or partners, as compared to 70% of non-LGBT older people. LGBT older women are far more likely than LGBT older men to live with a partner or spouse (59% vs 43%) and less likely to live alone (25% vs. 38%).
- 40% of LGBT older people say that their support networks have become smaller over time, as compared to 27% of non-LGBT older people.

- Only one in three LGBT older people (38%) is satisfied with the information he/she receives about personal support systems, as compared to nearly half (49%) of non-LGBT older people.
- African American LGBT older people are three times as likely as White or Hispanic LGBT older people to say that people from their churches or faith are part of their support systems (26% vs. 8% and 8%).
- Transgender older people are far more likely than cisgender (non-transgender) older people to say that their churches/faith (23% vs. 9%) or religious figures (15% vs. 7%) are part of their support networks.

Housing

Research and experience have shown that LGBT older people struggle to secure safe and affordable housing, whether buying or renting a home, or residing in welcoming aging and long-term care settings. A recent 10-state investigation found that same-sex older couples experienced adverse differential treatment when attempting to access senior housing, and a 2011 report documented numerous incidents of LGBT bias and discrimination in independent living and assisted-living facilities.⁹ As one intervention, in a broader array of housing support possibilities, community advocates and developers have begun building LGBT senior housing complexes, which have increasingly captured the attention of the public and LGBT older people alike. A lack of secure housing can have detrimental effects on any older person—in particular, on LGBT older people who enter later life with diminished savings and profound legal, economic and cultural barriers. Thus, this study asked LGBT older people to describe their experiences and fears with regard to housing, as well as their interests in living in LGBT-friendly housing.

LGBT older people report experiencing and fearing discrimination in housing and assisted-living environments, respectively—and many LGBT people are interested in LGBT-friendly affordable housing.

- One in eight (13%) LGBT older people says that he or she has been discriminated against when searching for housing on the basis of sexual orientation.
- One in four (25%) transgender older people reports experiencing housing discrimination on the basis of gender identity.
- One in four non-White LGBT older people (24%) reports experiencing housing discrimination on the

basis of race or ethnicity, as compared to 18% of non-White, non-LGBT older people.

- One in six (17%) LGBT older people is very or extremely concerned that he or she will be discriminated against if others in an assisted-living community know about his/her sexual orientation or gender identity.
- 78% of LGBT older people are at least somewhat interested in living in an affordable LGBT-friendly housing development at some point in the future—with 44% being very/extremely interested in such communities.



**78% OF LGBT
OLDER PEOPLE ARE
AT LEAST SOMEWHAT
INTERESTED IN LIVING
IN LGBT-FRIENDLY
AFFORDABLE HOUSING.**

Sources of Information

What's the best way to reach LGBT older people with essential information? New research from AARP has found that most people of all ages prefer to receive their retirement plan documents in print formats instead of electronic formats.¹⁰ Additionally, internet use continues to increase steadily among older adults age 65 and older; the Pew Research Center has found that 59% of older people age 65 and older go online, and 47% have a high-speed broadband connection. However, older people with lower incomes and educational attainments have adopted the internet and broadband at lower levels than their more affluent, well-educated peers. Additionally, many older people face physical challenges with technology, are skeptical about its value and show difficulties in learning how to use it.¹¹ Understanding where and how LGBT older people access information to address their health, financial and other retirement questions is critical to supporting their choices over time—yet this topic has not been sufficiently researched. Thus, this study asked LGBT older people about the sources they access for information on aging.



40% OF LGBT
OLDER PEOPLE RELY ON
THE INTERNET AND
THEIR FAMILY/FRIENDS
AS PRIMARY SOURCES
OF INFORMATION
ON AGING.

When seeking information on aging, both LGBT and non-LGBT older people are likely to rely on the internet, as well as family and friends, as their top sources. Among LGBT older people, women are more likely than men to rely on government sources, and men are more likely than women to rely on social media.

- Both LGBT and non-LGBT older people are most likely to rely on the internet (40% vs. 38%) and family and friends (40% vs. 40%) as their primary sources of information on aging.
- LGBT older women are more likely than non-LGBT older women to look to government sources for information on aging (26% vs. 15%), while LGBT older men are

three times as likely as non-LGBT older men to rely on social media (11% vs. 4%).

- Older LGBT African Americans are much more likely than both LGBT older Whites and Hispanics to consult government sources for information on aging (37% vs. 23% vs. 20%).
- “Younger” LGBT older people (aged 45-59) are much more likely than “older” LGBT older people (aged 60-75) to rely on friends and family members as sources of information on aging (42% vs. 34%), while “older” LGBT older people are much more likely to rely on professionals (42% vs. 34%) and non-profit organizations (44% vs. 31%) than their “younger” counterparts.

CONCLUSION

Information is power—and this study significantly enhances knowledge on the values, needs, wants and lifestyle preferences of LGBT older people, ages 45-75. The lessons from this report should compel leaders across industries to account for the needs and interests of this growing though underserved population—from the aging and long-term care field to the LGBT nonprofit sector to the wide array of businesses invested in the health and quality of life of all older people in this country. Yet while this study is both path-breaking and extensive, more research is necessary to better understand the various areas covered in this report, as well as additional topics or distinct sub-groups of the LGBT older adult demographic. The findings in this report should be read with a dose of caution, given some methodological limitations, and a great deal of possibility, given the vast opportunities. The more we know about the aging lives of LGBT people, the more we can ensure that they improve over time.

Limitations

The methodology used for this survey resulted in a nationally representative sample of LGBT older people between the ages of 45 and 75. However, though Harris Poll's approach accounted for attitudinal and behavioral differences between those respondents who are online and those who are not (among other characteristics), it is possible that these findings might not fully account for LGBT older people who do not use the internet. Additionally, the sample represents people who self-identify as LGBT, and this might exclude older people who do not self-identify for a variety of reasons, including generational differences. In particular, survey questions that accurately capture a person's transgender status, especially in older age, are in their infancy of measurement in the research field, which might have affected the sample of transgender older adults.

In addition, African American and Hispanic LGBT older people were oversampled in this study to allow for proper statistical analysis, yet because there are no national studies that count the number of LGBT older people, we cannot precisely understand whether the sample sizes for these two population groups adequately represent the national populations of LGBT African American and Hispanic older people. Also, while the study includes 137 transgender respondents, and yields insightful findings on transgender older people's experiences and attitudes, it is difficult to discern whether this sample adequately represents the population of transgender older people at large.

Finally, the data represents responses from one point in time—March 2014—and therefore is not longitudinal in nature. Caution should be exercised when drawing conclusions about the long-term nature of these findings.

Discussion and Recommendations

ISSUES WITH AGING

The results of this study depict a diverse population grappling with the personal and financial implications of aging, revealing numerous opportunities to ensure that LGBT people have what they need in order to create a secure future. In many ways, LGBT older people are more likely than non-LGBT older people to be concerned about various questions related to aging. Will they be financially secure? Will they become less physically attractive, or will they lose their physical and mental independence? Will they become lonelier over time and have smaller support systems, which are critical to sustaining an engaged older life?

LGBT aging advocates have long argued that LGBT older people struggle to find community in LGBT spaces, where youthfulness is revered and older people are less embraced, as well as in aging spaces that might be unwelcoming, even hostile, to LGBT people. These concerns might also be the result of having experienced a lifetime of discrimination that has yielded worse health outcomes, diminished savings and a distrust of institutions. Have LGBT older

people grown accustomed to expect discrimination, and are these aging concerns a manifestation of that general unease?

These questions and concerns should incentivize the aging and long-term care field to create more welcoming environments, largely through LGBT cultural competence training for their management, staff members, volunteers and residents. A trained environment will be more adept at reducing overall bias and at establishing policies, protocols and programs that account for the unique needs of LGBT older people. The findings also suggest that further research is needed to better understand certain segments of the LGBT older adult population, across different geographic regions, as well as discreet topics that both expand on these subject matters and explore new areas. Needs assessments, research and other forms of systematic inquiry should be funded and implemented to study the full diversity of this aging population.



LGBT AGING ADVOCATES HAVE LONG ARGUED THAT LGBT OLDER PEOPLE STRUGGLE TO FIND COMMUNITY IN LGBT SPACES, WHERE YOUTHFULNESS IS REVERED AND OLDER PEOPLE ARE LESS EMBRACED.

HEALTHCARE

Many LGBT older people report that they don't disclose their sexual orientations and gender identities to their healthcare providers, fearing they will be judged (and their medical treatment will be compromised) if their providers know of their identities. These findings invoke the national health sector's focus on ensuring optimal, patient-centered care, as well as the federal government's renewed interest in improving health outcomes and reducing disparities among all Americans. If providers are not aware of their patients' sexual orientations and gender identities, and that lack of information is due in part to a fear of bias and discrimination from LGBT people themselves, the integrity of the patient-provider relationship has been compromised. Proper health treatment requires candid communication between patients and providers, and LGBT patients deserve professional interactions that affirm their sexual and gender identities at all ages. Without these norms, LGBT people will be left behind in any national initiative meant to improve the country's overall health and well-being.

Based on the findings from this study, healthcare providers should improve their interactions with LGBT patients to provide better patient-centered care. Questions regarding sexual orientation and gender identity should be integrated into clinical settings so that medical professionals capture

demographic data during the intake process that identifies LGBT people—this limits the chances that an LGBT person might withhold this information for fear of being judged. These questions require proper training of personnel to protect against discrimination, as well as protocols and policies that ensure privacy and confidentiality. Additionally, LGBT older people should be made aware of their legal rights and recourses should incidents of discrimination occur in a healthcare setting.

FINANCE AND RETIREMENT

A quality of life in retirement requires financial resources, yet many LGBT older people in this study are concerned they lack the funds to enjoy these years. Many also say that they will need to work beyond retirement age (especially single LGBT people) and fear that the government programs meant to support older people as they age, such as Social Security, could suffer from funding cuts that would weaken their economic safety net. LGBT aging advocates posit that a lifetime of discrimination in the workplace has contributed to diminished savings and higher poverty rates as one ages; this study supports the results of these trends.

Retirement years are also popularly understood as a period of travel and leisure, a time to enjoy a life that has been fully actualized and explore new opportunities—yet

this idyllic portrait does not extend across all people, including LGBT people with smaller incomes. Nevertheless, LGBT older people in this study express many of the same aspirations as non-LGBT older people: traveling, volunteering their time for important causes, starting hobbies or working part-time, and enjoying the benefits of connecting to social groups. Yet concerns about discrimination and potential barriers in volunteering and part-time employment surface for many LGBT older people. Further, this study shows that LGBT older people are more likely to be mentors in later life—a learning with profound implications for civic organizations and businesses seeking to bolster their engagement, volunteerism and activism.

The concerns that LGBT older people express regarding their abilities to retire offer opportunities for financial professionals, nonprofit organizations and government agencies to better invest in financial planning services that target LGBT people age 45 and older, especially in ways that speak to their unique lives and legal realities. The travel and retirement industries are well positioned to target LGBT people, while ensuring that all of their offerings impart LGBT-affirming messages. Living in “the closet” at a time when most people should be celebrating the fruits of their long lives is at odds with the goals of the retirement industry, broadly defined.

This study also speaks to the importance of defining and preserving critical programs that support low-income older people, while ensuring that these programs remain accessible to LGBT older people and same-sex couples. Additionally, federal, state and local governments should widely protect against employment discrimination on the basis of sexual orientation and gender identity. LGBT people who live in cities and states with these protections should be made aware of their rights to ensure enforcement. And because age-related discrimination against older people can begin as early as age 40, and age bias can couple with sexual and gender discrimination, LGBT older people need programs that support their employment prospects as they age. The public and private sectors should support “mature worker” programs that work specifically with LGBT older people and their unique circumstances.

SUPPORT SYSTEMS

This study also confirms research showing that many LGBT older people are single and live alone. LGBT people in this study also report that their support networks have condensed over time, a trend that can intensify the social isolation that affects many older people in later life, diminishing their general wellness. If living alone can couple with smaller support systems to spur isolation, and this phenomenon is

heightened among LGBT older people, then LGBT older people merit well-funded supports to spark engagement and reduce isolation.

Around the country, programs have sprouted to engage LGBT older people in creating communities, promoting fitness and education, and building spaces where LGBT people stay physically and mentally active. Yet these types of services are sparse and should be better funded and replicated to reach all parts of the country. Additionally, mainstream aging settings are gradually recognizing the existence of LGBT people and the need to create welcoming environments; in turn, many are turning to training professionals to educate them on the lives of LGBT people. The public and private sectors should invest in LGBT cultural competence training that creates a more responsive, modern workforce astute in the lives of LGBT people.

At the federal level, the Older Americans Act serves as the largest vehicle for funding and delivering services to older people nationwide; this legislation should be amended and reauthorized to account for LGBT older people and to better support programs, training and research related to LGBT older people. Oftentimes, policies and programs meant to support older people, especially in regards to caregiving and support systems, are based primarily on spouses and biological families;



THE PUBLIC AND PRIVATE SECTORS SHOULD INVEST IN LGBT CULTURAL COMPETENCE TRAINING THAT CREATES A MORE RESPONSIVE, MODERN WORKFORCE ASTUTE IN THE LIVES OF LGBT PEOPLE.



**THIS STUDY DOCUMENTS
MANY LGBT OLDER
PEOPLE EXPRESSING
CONCERNS ABOUT
DISCRIMINATION WHEN
SEEKING HOUSING,
AS WELL AS FEARING
MISTREATMENT IN
AGING AND LONG-TERM
CARE SETTINGS.**

these supports should expand their definitions of “families” and “next of kin” to include friends, caregivers and alternative kinship structures. Finally, since certain segments of the LGBT older adult population rely more on churches for support, such as African American LGBT older people and transgender older people, faith-based models should be expanded and supported to ensure that LGBT older people encounter more welcoming places of worship.

HOUSING

This study documents many LGBT older people expressing concerns about discrimination when seeking housing, as well as fearing mistreatment in aging and long-term care settings. It’s also possible that a lifetime of discrimination creates a sense of distrust about institutions meant to serve and protect LGBT people. In later life, especially if social networks deplete and LGBT older people become increasingly dependent on professionals, these fears can become more visceral and commonplace. It’s not surprising, then, that many LGBT older people in this study express an interest in living in LGBT-friendly senior housing at some point in their lives.

The solutions for creating LGBT-friendly housing and homes are varied and expansive. This study should compel housing providers, government officials, community advocates and developers to

imagine a robust system of supports that ensures LGBT older people can navigate the housing process equitably—from buying and maintaining a home or apartment, to adjusting to life in a nursing home, assisted living or independent living facility, or another housing arrangement (as new housing lifestyles are innovated). Governments and community organizations should promote best practices for housing providers when serving LGBT older adults; support LGBT senior affordable housing projects, including increasing funding and removing policy barriers that stifle the development of such projects; and encourage public-private partnerships that train housing providers on LGBT cultural competence and create “wrap-around” housing-related services for LGBT people as they age.

Housing and lending discrimination based on sexual orientation and gender identity should be prohibited at federal, state and local levels. LGBT older people should be made aware of their legal rights in states and cities that have fair housing laws and ordinances, as well as possible protections under the Fair Housing Act and the Federal Nursing Home Reform Act.

SOURCES OF INFORMATION

Ultimately, how do we best reach LGBT older people with the right information? This study indicates that most people still rely on the internet, as well as on family and friends for resources related to aging. It might be that the internet is the most widespread and available resource, and family members and friends are the most trusted messengers. This study shows that among LGBT older people, men are more likely to rely on social media and women are more likely to rely on government sources. Also, “older people” ages 60-76 generally rely on nonprofit organizations and professionals for this information.

Since many LGBT people rely on their friends and family for information, and on the internet, additional efforts should be undertaken to ensure that this information is accurate, LGBT-inclusive and available to the broad demographic of LGBT older people, including people who have smaller support systems and might rely less on technology and the internet for regular information. Here, special efforts should be placed on preventing fraud and online scams among older people. Equipped with accurate information, LGBT older people can make informed choices about their futures.

For the public and private sectors, these findings might compel targeted resources that reach different segments of the LGBT population, age 45 and older. It might also encourage nonprofit organizations to improve their outreach, messages, vehicles and overall information related to aging and retirement in ways that speak to the realities of LGBT people and do not presume a monolithic, heterosexual audience that is largely married with children. Information is power, whether it's the information we provide to LGBT people to make better choices about their futures, or the type of large-scale research that deepens our knowledge about the diversity of the American population and market. When we make that information visible, we ultimately help all older people pursue the lives they have always imagined.



**EQUIPPED
WITH ACCURATE
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PEOPLE CAN MAKE
INFORMED
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THEIR FUTURES.**

Future Directions for Research

This report significantly broadens the understanding on the values, needs, wants and lifestyle preferences of LGBT older people, ages 45-75. It provides insights into their concerns related to aging in areas such as healthcare, retirement and a financially secure future. And it describes a population struggling to stay connected to their social networks over time—many of whom are living single and alone—yet with dreams of living an active retirement where they can volunteer, serve as mentors and travel. Additionally, it describes a population that's very distinct across age brackets, income levels, gender/gender identity, and race and ethnicity. LGBT older people are not a monolith, nor are their experiences comprised entirely of hardship. This report provides an essential early lens onto their lives and their minds.

A major obstacle to studying the realities of LGBT older people is that few national federal surveys collect data on sexual orientation or gender identity, especially in surveys related to retirement, long-term care and health. Where surveys collect this data, the sample sizes of people age 50 and older are too small to form representative findings, and many

of these older samples tend to skew towards higher incomes and the more educated. Worse, LGBT elder subgroups such as older people of color and transgender older people, as two examples, remain notably understudied. Moreover, survey questions related to sexual orientation and gender identity are rarely validated among older people, which means that we lack both the data and best practices on data collection among older LGBT people. These structural barriers to robust data on LGBT older people should be removed.

Further research could expand on findings from many areas of this report—especially as they relate to more underserved populations such as transgender people, people of color, women and low-income people. Other topics should also be deepened. For example, for LGBT older people who are concerned about remaining independent in later life or who fear physical decline, future research could explore what drives these concerns and how providers, nonprofits and businesses can best create resources, programs and products that promote independence as long as possible. In regards to healthcare, further research could examine the extent to which LGBT older people

experience judgment and discrimination treatment from providers once their sexualities and gender identities are disclosed. Conversely, research could examine the questions that providers should use to best elicit this information in ways that fit their treatment approaches, resources and facilities. Finally, research could examine whether there are unanticipated benefits and consequences associated with disclosing one's sexual orientation and gender identity to a healthcare provider.

Further research could understand the quality of financial planning among LGBT older people, especially across income brackets. If many LGBT older people rely on their own knowledge and the internet, their financial plans might be lacking the precise expertise needed to determine how best to save for retirement, as well as the full spectrum of options that depend on income levels, assets, legal barriers and aspirations. Further research could understand what spurs LGBT older people to begin planning for retirement, which could compel more investment in the types of messages, resources and services that nonprofits, financial professionals and government

providers can offer to secure the financial lives of LGBT older people.

LGBT older people are more likely to be mentors than non-LGBT older people; further research could explore the types of mentoring and experiences they offer, what mentoring means for LGBT older people, and the types of mentorship opportunities that exist in various communities or virtually through technology. Given LGBT older people's interest in traveling, developing hobbies and volunteering in retirement, future research could study the various options, interests and concerns for each of these areas that could incentivize industries invested in retirement lifestyles.

Future research could examine more closely the social networks of LGBT older people and the impact of seeing one's network shrink over time. Here, further research could assess what it means to live alone successfully, especially in later life. What types of supports, resources, products and technology can aide a person who chooses to live alone or ends up alone through circumstance?

And as LGBT older people deal with discrimination in housing and long-term care settings, further research could examine how LGBT older people should navigate this system and exercise their legal rights (where applicable), as well as where housing providers can improve their systems to ensure LGBT older people can access affordable housing on fair terms.

Finally, further research is needed to understand where and how LGBT older people consume information. What media outlets are different segments of this population accessing? Who are the credible messengers on different areas of interest? What is the relationship between LGBT older people, aging and the internet, including new media and technologies? Finally, given the volume of rapid-fire data that confronts people daily, what's the best ways for information to stand out and directly reach different segments of LGBT older people? The more we know about connecting to this growing LGBT older adult population, the more *they* will know about making informed choices that will improve their lives—along the entire spectrum—as they grow older.



Visit sageusa.org for more policy and practice recommendations related to LGBT older people, including reports and analysis on transgender aging, health equity and LGBT older people of color, HIV and aging, inclusive services for LGBT older people, properly collecting data on LGBT older people in clinical settings, and much more.

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ABOUT SAGE

SAGE (Services and Advocacy for LGBT Elders) is the country's largest and oldest organization dedicated to improving the lives of lesbian, gay, bisexual and transgender (LGBT) older adults. Founded in 1978 and headquartered in New York City, SAGE is a national organization that offers supportive services and consumer resources to LGBT older adults and their caregivers, advocates for public policy changes that address the needs of LGBT older people, and provides training for aging providers and LGBT organizations through its National Resource Center on LGBT Aging. With offices in New York City, Washington, DC and Chicago, SAGE coordinates a growing network of 27 local SAGE affiliates in 20 states and the District of Columbia. For more information, visit sageusa.org.



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