Taking Pride in Celebrating Diversity With LGBTQ+ Residents, Staff

By Joanne Kaldy

Many LGBTQ+ older adults have had to hide their true selves from friends, family, and colleagues all or most of their lives. Even those who have been free to share this part of themselves have likely had to deal with bigotry, biases, and even hate in the world at large. When they become part of an aging community, they may experience an additional level of complexity as they confront the unique experiences their family, friends, and community, they desire to feel welcomed, accepted, and respected for who they are. Even the best-intentioned PALTG community may not know exactly how to provide a truly LGBTQ+ friendly environment, but there are tools and resources to help.

There are currently about 3 million LGBTQ+ adults over age 50 in the United States. This number is expected to more than double by 2030. Even though PALTG home to more LGBTQ+ residents than ever, these individuals don’t always feel welcome and safe. “There are still concerns that LGBTQ+ people may have to re-close when they go into a nursing home. Hiding your identity isn’t something most people think about unless they’re LGBTQ+. That is why we are developing relationships with inclusive providers,” said Sherrill Wayland, MSW, the Director of Special Initiatives at SAGE – Advocacy & Services for LGBTQ-Elders in New York. It is important for these communities, she said, to have robust policies, practices, and procedures that help them live up to their commitment to inclusivity.

Does the Shoe Fit?
Ms. Wayland urges practitioners and others to put themselves in the shoes of LGBTQ+ residents: “Think about being 80 and moving into a retirement community and being afraid to have anything that identifies them as LGBTQ+. At the same time, she said, “Intake forms that identify them as LGBTQ+.”

Inclusivity Requires Understanding
“We often hear, ‘We treat everyone the same,’” Ms. Wayland said, “but not everyone is the same, so we need support to the meet the unique needs of each individual.” At the same time, she observed, “you can’t expect staff to be open and welcoming if we haven’t given them the opportunity to learn about what this means and how to do it.” Ms. Wayland added, “We have a training and certification program that includes topics such as the basics of what LGBTQ+ means, stories of real-life LGBTQ+ older adults, skills to work with these individuals, and suggested improvements across multiple departments.”

These kinds of tools and resources — developed and vetted by experts — are readily available, so facilities don’t have to reinvent the wheel (see https://sage-usa.care/). Because consistency is key, it is important to use the same training materials and information across departments and facilities.

The tone is set as soon as someone walks in the door of the facility. People want to know that they’ll be treated with respect and dignity and that they won’t face biases from staff, families, or other residents,” said Ms. Wayland. It is important, she stressed, to have nondiscrimination policies in place, to understand what it means to be LGBTQ+, and to provide what these residents will need to really call a facility “home” and feel safe and respected there.

What Makes a Facility Truly LGBTQ+ Friendly?
It may be easy to assume your community is LGBTQ-friendly and welcoming. However, it is important to know what signals to older adults and their families that a community is actually a place where LGBTQ+ residents can thrive and enjoy safety and quality of life. These include:
• A nondiscrimination policy that addresses sexual orientation, gender identity, and gender expression. The facility should openly share this information. For instance, it should be easily visible on your website and not hidden as though it’s an afterthought. Residents want to feel confident that their same-sex partners and significant others will be treated with the same consideration, respect, and involvement as blood relatives, particularly when they have designated same-sex individuals as their medical powers of attorney.
• Staff training/certification designed to ensure that everyone from the administrator to the housekeeping staff to the groundkeepers understands the needs of LGBTQ+ residents and treats them with respect and dignity. This includes things like staff referring to residents by their preferred name.
• Enrichment activities geared to the special needs/concerns of LGBTQ+ residents such as Pride celebrations and book clubs with LGBTQ+ literature.
• The ability to address special health needs, such as those of HIV-positive residents and transgender individuals.

Ms. Wayland said, “We can always be proactive from an organizational standpoint. We can let residents know we are inclusive and that we are doing everything possible to support them.”

Unique Experiences of Transgender Residents
Many long-term care communities may also need to consider the special care needs of transgender individuals, including biomedical needs such as hormone replacement therapy or the complexity of assessing gendered living quarters. Research shows that transgender individuals may be hesitant to seek out medical care, including long-term care, due to harassment and discrimination. For instance, a 2017 review of end-of-life care in LGBTQ+ individuals found transgender individuals are less comfortable discussing end-of-life care with their provider than lesbian, gay, and bisexual (LGB) individuals; providers are also more comfortable offering care to LGBT patients than transgender ones (Geriatrics (Basel) 2017;21(1):13). The authors note that “transgender adults in particular represent a population for which knowledge about the aging experience and appropriate end-of-life care is especially lacking.”

The following resources can help facilities provide affirming care to transgender older adults:
• M.B. Deutsch, “Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People,” 2nd ed. (Transgender Care, University of California–San Francisco, 2016). https://transcare.ucsf.edu/guide-lines

Don’t Forget About the Staff
It is important to remember inclusion needs to apply to LGBTQ+ staff as well. As Ms. Wayland noted, “People don’t want to work someplace where they feel discriminated against. Organizations that step up and say, ‘We embrace diversity, equity, and belonging’ send a signal to LGBTQ+ people and anyone else who is looking for employment that this organization embraces them.” In times of staffing shortages, this can help attract employees for whom diversity, inclusion, and equity are important.

Every Place Is Different
A culture of inclusion may be more natural for some facilities. For instance, Alec Pruchnicki, MD, a New York–based geriatrician who works at The Lott Residence, an assisted living facility, said, “We have always had a very diverse population, and we’ve always celebrated this diversity.”

Times have changed, Dr. Pruchnicki noted, “We have only two HIV-positive patients who had had the virus for many years and are on medications to treat it. To our staff, it’s just another chronic illness and it’s treated as such.” These individuals aren’t shunned or avoided by other residents, and they are treated with respect and caring by staff.

In general, Dr. Pruchnicki said, “We like to think that our culture is naturally open and accepting because of the makeup of our population. Our diversity even extends to economics. We have retired physicians, successful musicians and artists, as well as formally home–less people.” Addressing diversity may be more challenging, he observed, in facilities where the population is highly homogeneous.

Dr. Pruchnicki advised, “You have to work with the population you have and make sure that everyone feels accepted, respected, safe, and welcomed. Routine, ongoing staff training can help.” It also is important to have leaders and managers who are engaged, model inclusion, and interact regularly with residents and staff so they can promptly identify and address any biases or other issues.