

COLLECTING SEXUAL ORIENTATION, GENDER IDENTITY DATA FROM OLDER ADULTS TO IMPROVE SERVICES

Sean Cahill, PhD, Director, Health Policy Research

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Bob Linscott, MTS, Assistant Director, LGBT Aging Project

OUTLINE

- I. Why collect sexual orientation and gender identity (SO/GI) data in elder service settings?
 - A. Understanding LGBT older adults
 - B. State LGBT Aging Commission recommendation, recent federal regulatory developments
- II. How to collect SO/GI data to improve services
 - A. Understanding SO/GI terminology
 - B. The new SO/GI questions
 - C. How to ask SO/GI Questions
- III. How to use the data to improve services for LGBT older adults
- IV. Questions, discussion

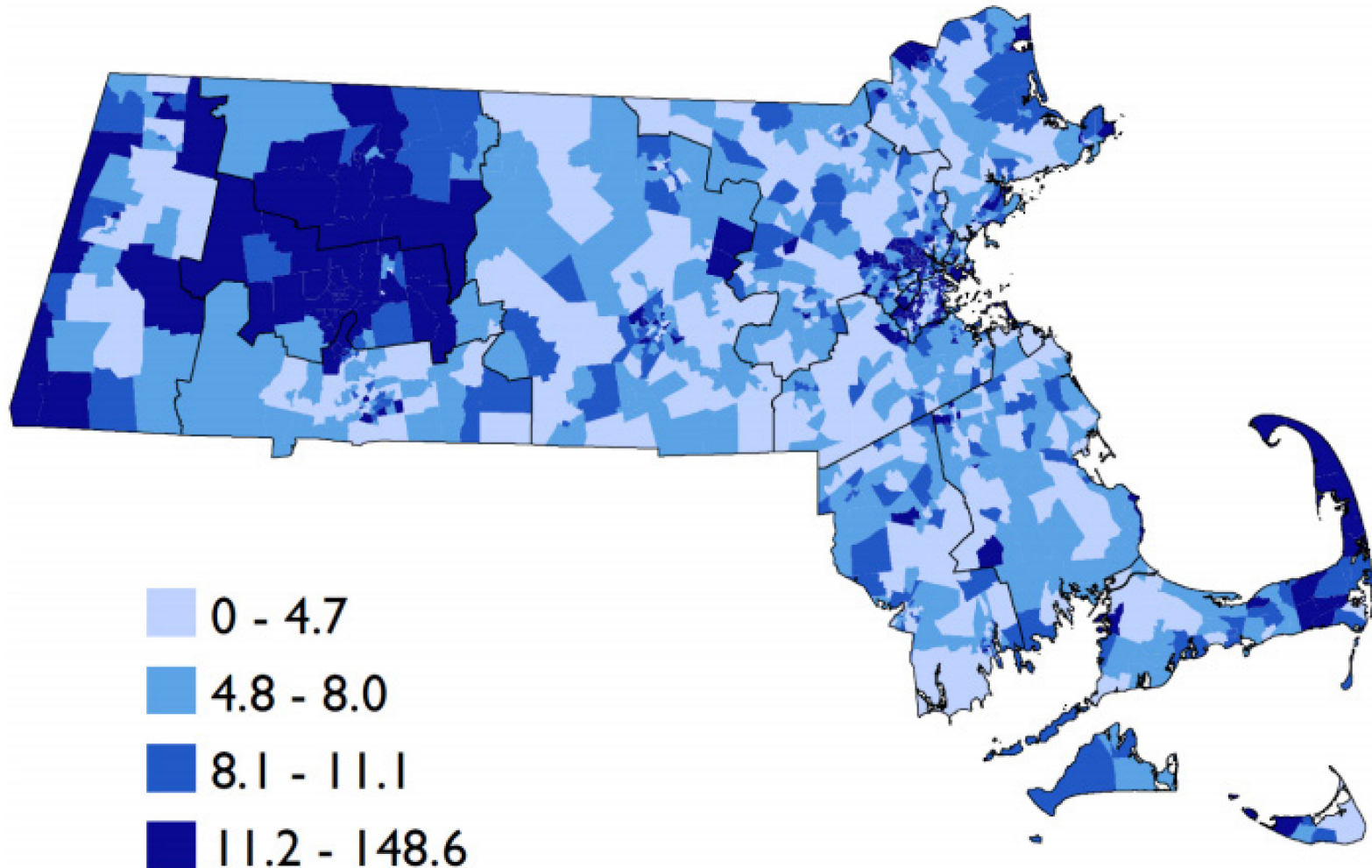
PART I: WHY COLLECT SO/GI DATA? *UNDERSTANDING LGBT OLDER ADULTS*



LGBT PEOPLE LIVE EVERYWHERE

- ❑ Not only in Boston and Northampton, but in every part of the Commonwealth, including rural areas
- ❑ LGBT elders come to your senior center, meal program, and live in your nursing home or long-term care facility
- ❑ It's important to create a welcoming, affirming environment in which people are comfortable being "out"
- ❑ Being "closeted" causes minority stress

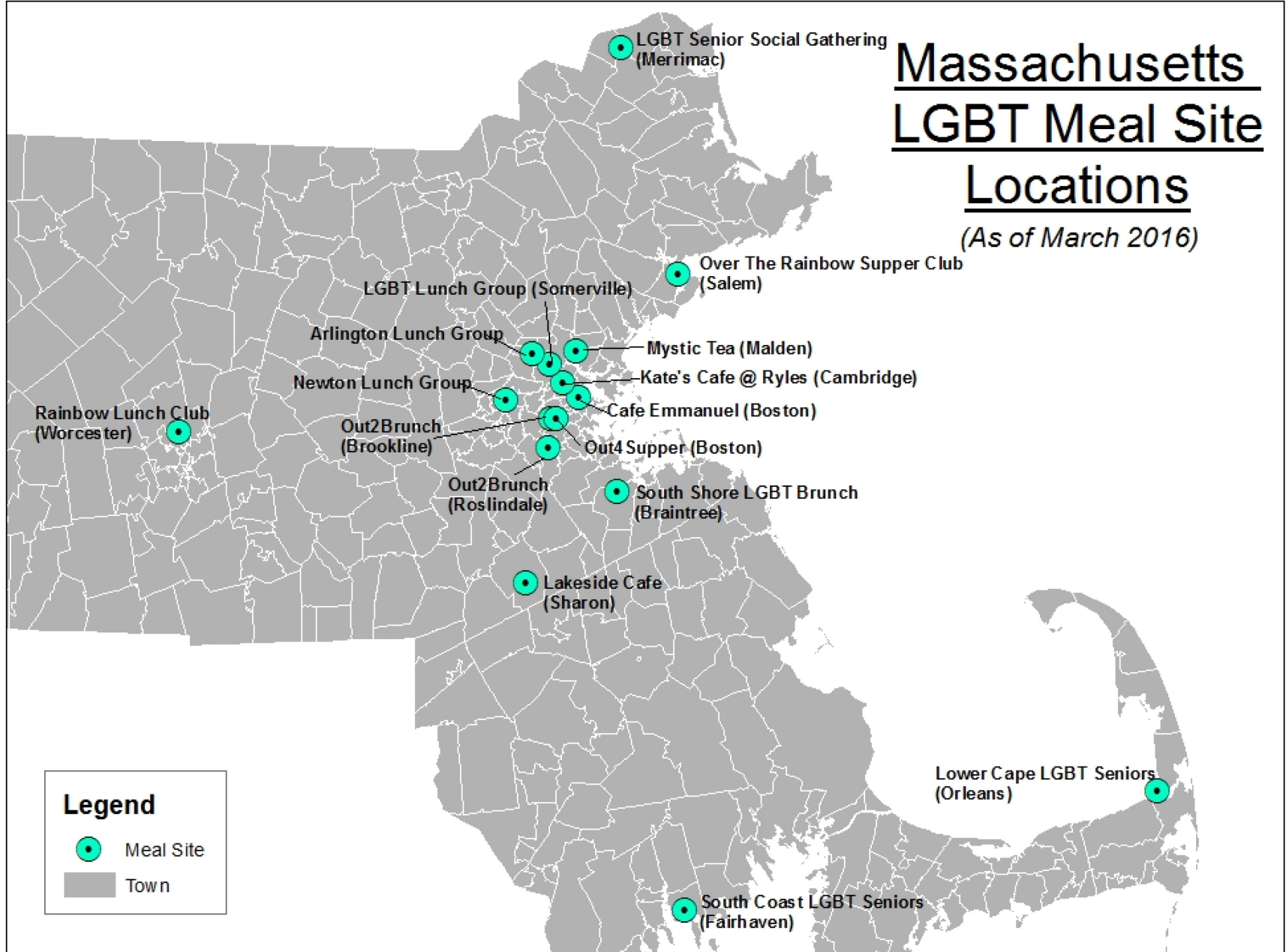
Same-sex couples per 1,000 households
by Census tract (adjusted)



Source: The Williams Institute, UCLA

Massachusetts LGBT Meal Site Locations

(As of March 2016)



LGBT ELDERS

- Collecting SO/GI information is important because LGBT elders experience unique disparities and challenges
 - May be more likely to be single and/or live alone
 - Less likely to have children, grandchildren
 - May be more in need of formal caregiving support, elder services than others

LGBT ELDERS

- ❑ LGBT elders came of age under conditions of intense homophobia
 - Homosexuality criminalized in 50 states
 - Categorized as a mental illness; electroshock therapy used as treatment
 - Condemned as sin by all major religions
 - Legitimate cause for being fired or denied employment
- ❑ Many LGBT elders thought of non-disclosure as a survival strategy

SOCIAL ISOLATION MAY BE GREATER FOR LGBT ELDERS

- ❑ Older gay/bi men, bisexual women in Mass. more likely to live alone, according to BRFSS—could indicate social isolation
- ❑ 44% of 2,560 LGBT older adults partnered, 55% live alone (Fredriksen-Golden 2011)
- ❑ Lower parenting rates for same-sex partners, LGBT elders have implications for caregiving in old age (Gates & Cooke, 2011; de Vries, 2006)



LIFE EXPERIENCES SHAPE LGBT ELDERS' ACCESS TO HEALTH CARE, SUPPORT NETWORKS

- ❑ LGBT veterans often associate military service with anti-gay prejudice, dishonorable discharge, may not access Dept. of Veterans Affairs services
- ❑ For many older gay men, AIDS decimated their social networks, increasing social isolation
- ❑ Older Americans more likely to hold antigay views, morally disapprove of homosexuality
- ❑ Ex: 63% of Americans 70+ believe homosexuality “always wrong” vs. 41% of 30-39 year olds
- ❑ Many older Americans believe wrongly that HIV is casually transmitted

LGBT PEOPLE AND DISABILITY

Research has shown higher rates of disability among LGBT people compared to the general population

- In a sample of 2,560 LGBT adults 50 and older, 47% reported having a physical disability (Fredriksen-Goldsen et al. 2011)
- Aggregate data from 2003 – 2010 WA BRFSS showed that 41% of LGB people age 50+ had a physical disability compared to 35% of heterosexuals

CONCERNS RE: HEALTH CARE

- ❑ Some LGBT elders fear discrimination in health care and in senior living settings, from home care aides (Stein et al. 2010)



**STATE COMMISSION
RECOMMENDATION, RECENT
FEDERAL REGULATORY
DEVELOPMENTS**

**SPECIAL
LEGISLATIVE
COMMISSION ON
LESBIAN, GAY,
BISexual AND
TRANSGENDER
AGING**

1. DATA COLLECTION

Exec. Office of Health & Human Svcs., Exec. Office of Elder Affairs, Dept. of Housing & Community Development ***should collect voluntary and confidential sexual orientation and gender identity data as a standard practice*** for:

- Individual assessments
- Program monitoring data systems
- Consumer satisfaction surveys
- Public health surveillance
- Research and evaluation

“If you don’t count us, we don’t count.”

- *Massachusetts Special Legislative Commission on LGBT Aging Recommendations, September 2015*

The Health of Lesbian, Gay, Bisexual, and Transgender People

Building a Foundation for Better Understanding

INSTITUTE OF MEDICINE
OF THE NATIONAL ACADEMIES

Healthy People 2020





FEDERAL REGULATORY DEVELOPMENTS

Stage 3 Meaningful Use Guidelines

- According to Centers for Medicare and Medicaid Services, Office of Health IT, SO/GI data fields must be incorporated in EHR software certified under the Meaningful Use incentive program

HRSA to require SO/GI data collection by CHCs for May 2016 in Uniform Data System

- “Improving the health of the nation’s underserved...is a priority of the Health Center Program”
- “Sexual orientation & gender identity can play significant role in determining health outcomes”

FEDERAL REGULATORY DEVELOPMENTS

Center for Medicare/Medicaid Services Equity Plan

- “Comprehensive patient data, including...sexual orientation, gender identity...are required to plan for quality improvements, and to address changes among the target populations over time.”

PART II: SO/GI DATA COLLECTION

- Basic SO/GI terminology
- The new CDS Questions
- How to ask these questions
- Framing
- Pushback



RECAP

- **LGBT Elders–**
 - lifetime of discrimination
 - Invisible in aging service demographics
- **Current Data Collection–**
 - Inadequate to meet needs of this population
- **EOEA Massachusetts**
- working to make entire elder service network safe, welcoming and inclusive for ***all*** older adults and caregivers
- Asking demographic questions on SO/GI

SEXUAL ORIENTATION

Sexual orientation: how a person identifies her/his physical, emotional attraction to others:

- **Heterosexual (straight)**: describes someone who is attracted to people of a different sex
- **Gay**: someone who is attracted to people of the same sex; gay is usually used to describe men attracted to other men
- **Lesbian**: describes a woman who is attracted to other women
- **Bisexual** – individuals who are attracted to both men and women

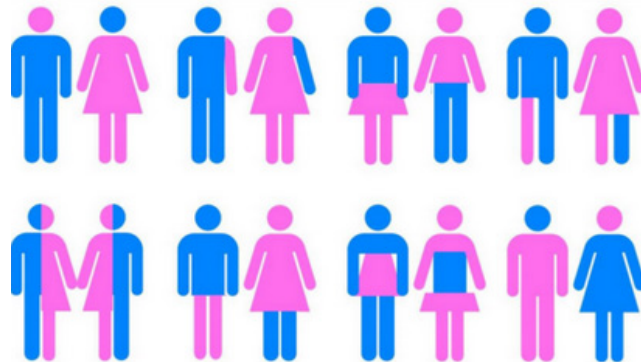
THE 'Q' IN LGBTQ

- **Queer** – some may describe their sexual orientation in other ways, such as “queer” instead of LGB
- **Questioning** – In some cases people just refer to themselves as in a period of questioning the sexual orientation
- It is important to note that the word ‘queer’ is more often used by LGBT youth and for many LGBT older adults the word is often associated with painful memories.



GENDER IDENTITY

- A person's internal sense of gender (do I consider myself male, female, both, neither?)
- All people have a gender identity





THE T IN LGBT: TRANSGENDER

Transgender

- Gender identity not congruent with the assigned sex at birth
- Alternate terminology
 - Transgender woman, trans woman, male to female (MTF)
 - Transgender man, trans man, female to male (FTM)
 - Trans feminine, Trans masculine
- Non-binary, genderqueer
 - Gender identity is increasingly described as being on a spectrum



CARING FOR TRANSGENDER OLDER ADULTS

- ❑ For many transgender people, an important part of affirming gender identity includes hormone therapy and gender affirmation surgeries
- ❑ Asking someone what pronouns they prefer is very common place today and helps clarify any uncertainty as to the gender the person is expressing



SEXUAL ORIENTATION AND GENDER IDENTITY ARE NOT THE SAME

All people have a sexual orientation and gender identity

- How people identify can change
- Terminology varies

Gender Identity \neq Sexual Orientation





REVIEWING TERMINOLOGY

Sexual Orientation

- To whom you are physically and emotionally attracted
- With whom you have sex
 - How you identify your sexuality

Gender Identity

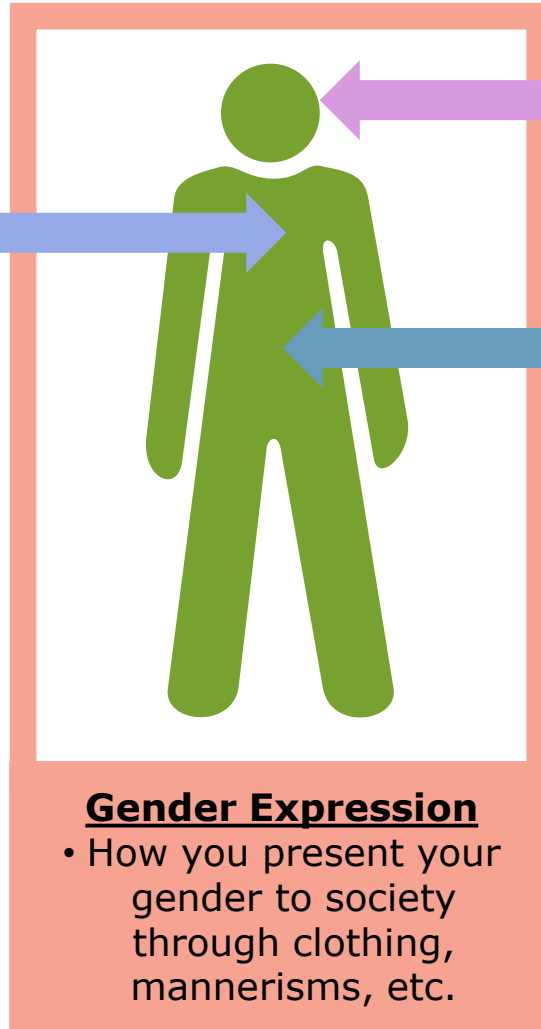
- What your internal sense tells you your gender is

Sex

- Refers to the presence of specific anatomy. Also may be referred to as "Assigned Sex at Birth"

Gender Expression

- How you present your gender to society through clothing, mannerisms, etc.



QUIZ: WHICH OF THE FOLLOWING IS NOT A SEXUAL ORIENTATION?

- ☐ Heterosexual
- ☐ Homosexual
- ☐ Transsexual
- ☐ Lesbian

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THE NEW SO/GI QUESTIONS

CDS-2-CM
0 (1357332575)
04/21/2016

AA. NAME AND IDENTIFICATION NUMBERS

AA.2. CASE RECORD NO.

a. Case record no.

AA.1. NAME OF CLIENT

a. Last/Family name

b. First Name

c. Middle Initial

AA KEY FACTS

a. Enter the client's residential street address or Post Office box.

b. Enter the client's residential city or town.

d. Enter the client's residential zip code.

e. Enter the client's telephone number

f. Enter the age of the client in years.

AA.3. GOVERNMENT PENSION AND HEALTH INSURANCE NUMBERS

a. Pension (Social Security) Number

b. Health insurance number (or other comparable insurance number)

AA HEALTH CARE COVERAGE

a. Other Health Care Coverage

b. Other Health Care Coverage #

c. Other Health Care Coverage (second)

d. Other Health Care Coverage (second) #

e. Primary MD Name

f. Primary MD Telephone

g. Primary MD Fax #

h. Primary MD Address

i. Primary MD City/Town

AA MEDICAL/SOCIAL RESOURCES AND HEALTH SUMMARY

a. Has the client been seen by a physician in the past 12 months?

☐ 0 - No
☐ 1 - Yes

b. Other Physician 1

c. Specialty of Other Physician 1

Other Physician 1's Telephone Number

e. Other Physician 2

f. Specialty of Other Physician 2

g. Other Physician 2's Telephone Number

h. Preferred Hospital

i. Preferred Hospital Telephone Number

j. Pharmacy Name

k. Pharmacy Telephone Number

l. Preferred CHHA

m. Preferred CHHA Telephone Number

n. Does the client/family seek primary care appropriately?

☐ 0 - No
☐ 1 - Yes

BB. PERSONAL ITEMS

BB.1. GENDER

a. Gender

☐ 0 - Male
☐ 1 - Female

BB.2. BIRTHDATE

a. Birthdate

BB.3. RACE/ETHNICITY

CDS-2-CM
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4/21/2016
Page 1 of 23



CDS 2.3 SECTION BB. PERSONAL ITEMS SECTION 1: GENDER

The current question 1.a. will be edited.

Gender: What was your sex at birth (on your original birth certificate)?

☐ ☐ Male

☐ ☐ Female

CDS 2.3 SECTION BB. PERSONAL ITEMS SECTION 1: GENDER

New question 1.b. will be added.

What is your current gender identity? (Check all that apply.)

- ☐ Male
- ☐ Female
- ☐ Female-to-male (FTM)/transgender male/trans man
- ☐ Male-to-female (MTF)/transgender female/trans woman
- ☐ Genderqueer, neither exclusively male nor female
- ☐ Additional gender category (or other)
- ☐ Did Not Answer

CDS 2.3 SECTION BB. PERSONAL ITEMS

SECTION 2: SEXUAL ORIENTATION

New question 2.a. will be added.

Do you think of yourself as:

- ☐ Heterosexual or Straight
- ☐ Lesbian, Gay or Homosexual
- ☐ Bisexual
- ☐ Not Sure
- ☐ Did Not Answer
- ☐ Other



HOW TO ASK SO/GI QUESTIONS

Framing the intake interview

- “This is a standardized assessment”
- “It is comprehensive so we can learn as much about each client to provide best possible care”
- “I ask every question to everybody and don’t make any assumptions”
- “I will ask questions that don’t apply to you and questions that are difficult to answer (and for me to ask!)”
- “You can decline to answer anything”



HOW TO ASK SO/GI QUESTIONS

Challenges for Case Managers

- Uncomfortable asking hard questions (race, education, incontinence, \$)
- You are experts in asking difficult questions in a compassionate way
- You will develop your style with practice

Responses

- “We can move on and come back to these questions a little later”



HOW TO ASK SO/GI QUESTIONS

Challenges for non LGBT Clients

- I don't understand why this is relevant. I just want laundry service.

Responses

- "Some questions are very important to different people and some questions don't apply to everybody"
- Remember you can choose to not answer anything.



HOW TO ASK SO/GI QUESTIONS

Challenges for LGBT Clients

- Tremendous fear could arise based on lifetime of discrimination.

Responses

- "If you are uncomfortable having this on your record, we can keep this between us."
- Don't make assumptions based on mannerisms or certain phrases ` I live with a longtime friend' but you can ask – "is this friend important to you?"



HOW TO ASK SO/GI QUESTIONS

About Confidentiality

- Answering SO/GI information is then available to all ASAPs.

Options

- Make sure they are aware of this if they seem uncomfortable with disclosure
- SO/GI status could be in client notes or kept confidential with Case Manager
- Remind them that having this as part of their care plan improves competent service.



HOW TO ASK SO/GI QUESTIONS

Opportunities for LGBT Clients

- So many LGBT older adults have spent their lifetime invisible and yearn to have this question asked.
- Asking SO/GI validates them and shows that the agency is willing to include LGBT people
- Asking SO/GI creates a safe space that allows LGBT older adults to finally be their authentic selves. That can lead to positive mental/physical health outcomes

QUIZ: WHICH OF THE FOLLOWING IS NOT AN APPROPRIATE TERM FOR A TRANSGENDER PERSON?

- ☐ Gender Queer
- ☐ Transsexual
- ☐ Transvestite
- ☐ Trans Man / Trans Woman

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PART III: HOW SO/GI DATA WILL IMPROVE SERVICES FOR LGBT OLDER ADULTS



PERSON CENTERED CARE:

- The more that providers know about their individual clients the better services they will be able to provide for them.
- Asking for SO/GI data helps address health/home care disparities for LGBT older adults



SO/GI DATA WILL HELP IMPROVE SERVICES:

Stories from the field

- Somerville Cambridge Elder Services
- South Shore Elder Services
- Senior Care
- Ethos

SO/GI DATA WILL HELP PROVIDERS:

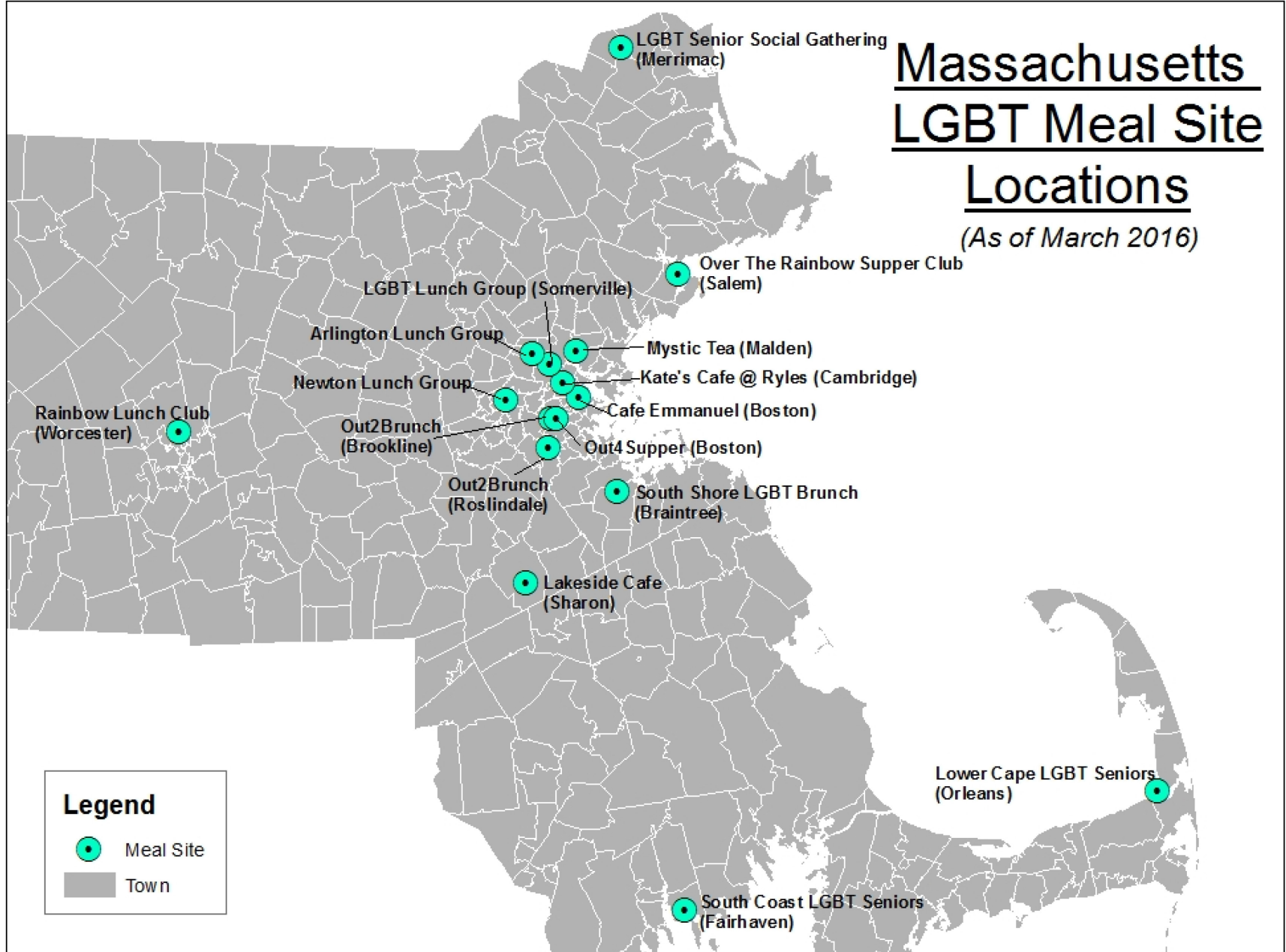
- Anticipate critical gaps in caregiving for unbefriended LGBT older adults
- Address social isolation through programming or referrals to LGBT programs
- Identify LGBT clients facing economic hardships
- Monitor bullying in senior housing towards LGBT residents

SO/GI DATA WILL HELP PROVIDERS:

- Build skills in cultural competency to provide safe, competent services for vulnerable populations – such as home care aides for a transgender elder.
- Enable I&R staff to provide specific resources for new LGBT clients

Massachusetts LGBT Meal Site Locations

(As of March 2016)



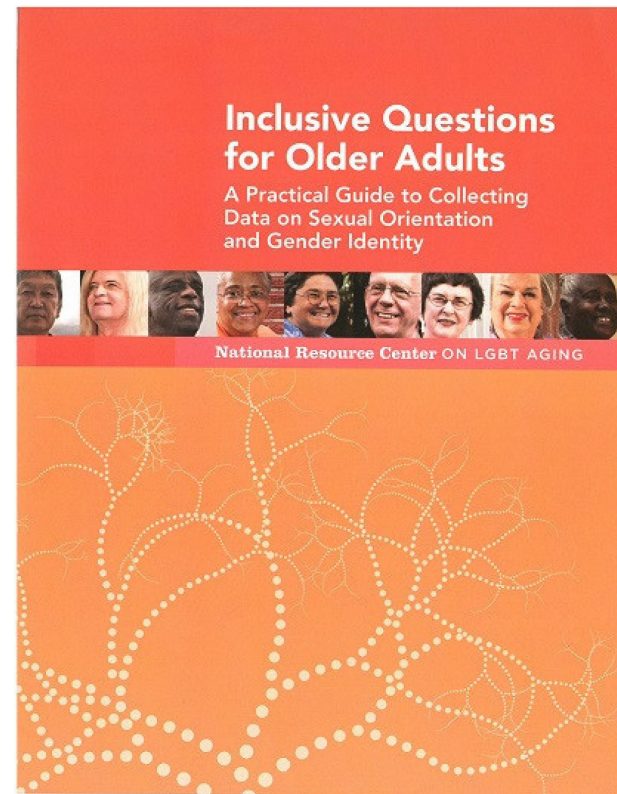
SO/GI DATA WILL HELP PROVIDERS:

- Identify the needs of LGBT older adults in their area.
- Develop programming to meet those needs.
- Help inform an ASAP's need for additional resources and cultural competency training as more LGBT clients come into their case load.

RESOURCES



<http://www.lgbthealtheducation.org/topic/sogi/>



http://issuu.com/lgbtagingcenter/docs/inclusivequestionsolder_adults_guidebook/1?e=0

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THANK YOU. QUESTIONS?

Sean Cahill, Director, Health Policy Research
scahill@fenwayhealth.org; 617-927-6016

Bob Linscott, Assistant Director, LGBT Aging Project
blinscott@fenwayhealth.org; 857-313-6578

