

# Addressing Social, Economic, and Health Disparities of LGBT Older Adults & Best Practices in Data Collection

## Key Findings

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

### *Aging with Pride*

National Health, Aging,  
Sexuality and Gender Study

#### LGBT Older Adults:

#### A Growing Population<sup>1,2</sup>

- Estimated 2.7 million adults ages 50 and older self-identify as lesbian, gay, bisexual, or transgender in the U.S. including 1.1 million ages 65 and older
- By 2060 the number of LGBT older adults will soar to 5 million
- Estimates more than double when considering same-sex behavior and romantic relationships
- 2,450 LGBT adults, ages 50 to 100, are participating in *Aging with Pride: National Health, Aging, Sexuality and Gender Study* the first ever national, longitudinal health, aging and well-being study

#### Resilience in the

#### Face of Adversity<sup>1,2,3</sup>

- Deep satisfaction with their lives
- Most engage in exercise and physical activities
- Involvement in spiritual and religious activities
- Foster close kin, families of support
- Pride and engagement in communities

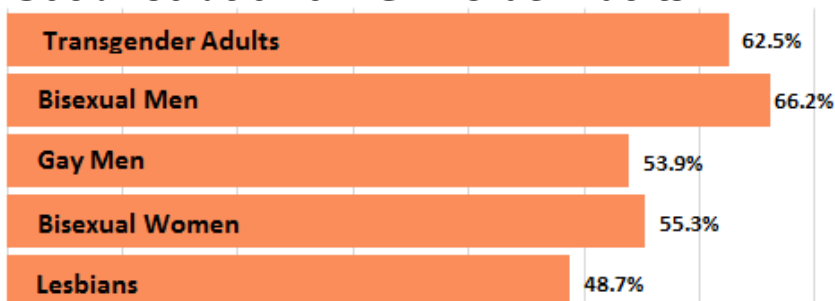
#### Key Disparities among LGBT Older Adults<sup>1,2,3</sup>

- Elevated risk of social isolation compared to heterosexuals
- Income not commensurate with education
- More lifetime discrimination and victimization
- Higher rates of physical limitations, weakened immune system, mental distress
- Lesbian and bisexual women: Higher rates of disability, cardiovascular disease, overweight, poor general health
- Gay and bisexual men: Twice as likely to live alone; higher risk of cancer, HIV
- Transgender older adults: Higher rates of discrimination, victimization, mental distress, poor health, less support
- Bisexual older adults: Higher stigma, less likely to disclose identity, lower income, less support
- Older adults of color, and those with lower income and education: Elevated risk of health disparities
- Limited access to aging, health, support services

***As a trans person, I am afraid of services so I avoid or refuse preventive care. I do not know what I will do if I am unable to care for myself.***

62-year-old trans bisexual woman participant

#### Social Isolation of LGBT Older Adults<sup>1</sup>



## Best Practices for Sexual Identity and Gender Identity Data Collection<sup>2</sup>

Data collection can be an important tool to address the needs of LGBT older adults. It is critical to determine what will be asked, why the information is being gathered, and how it will be used and by whom. These dynamic constructs reflect the shifting social and cultural meaning of sexual and gender identities. Having tested sexual identity and gender identity questions with more than 4,000 LGBT older adults, we recommend the following:

### Which of the following best represents how you think of yourself? (Check one box)

- Gay or lesbian
- Bisexual
- Straight (not gay, lesbian, or bisexual)
- Not listed above (please specify): \_\_\_\_\_

### Which of the following was your assigned status at birth? (Check one box)

- Female
- Male

### Currently, which of the following best represents your gender? (Check one box)

- Woman
- Man
- Not listed above (please specify): \_\_\_\_\_

### Do you consider yourself to be trans/transgender? (Check one box)

- Yes
- No

**Important considerations:** We recommend not including both sexual identity and gender identity in a single question because they are two separate aspects of people's identities and are best asked independently. Sex and gender should not be assumed by appearance but asked directly. It is important to consider also adding questions related to sexual behavior and romantic relationships. Confidentiality and non-discrimination must be assured when asking these questions. Unsupportive or negative responses to sexual identity or gender identity questions can be detrimental to the health and well-being of LGBT older adults.

---

### References and Resources

- <sup>1</sup>Fredriksen-Goldsen, K. I. (upcoming, Summer, 2016). The Future of LGBT Aging: Blueprint for Services, Policy and Research. *Generations*.
- <sup>2</sup>Fredriksen-Goldsen, K. I., & Kim, H.-J. (upcoming). The Science of Conducting Research with LGBT Adults. *The Gerontologist*, Supplement.
- <sup>3</sup>Fredriksen-Goldsen, K. I., Kim, H.-J., Emler, C. A., Muraco, A., ... Petry, H. (2011). *The Aging and Health Report: Disparities and Resilience among LGBT Older Adults*. Seattle, WA: Institute for Multigenerational Health.

---

**For more publications and information about this project go to: <http://Age-Pride.org/>**

---

**Aging with Pride Community Partners:** Center on Halsted, FORGE Transgender Aging Network, Gay & Lesbian Services Organization, Generations with Pride, GLBT Generations, GRIOT Circle, LGBT Aging Project/The Fenway Institute, Los Angeles LGBT Center, Mary's House, Milwaukee LGBT Community Center, Montrose Center, Openhouse, SAGE, SAGE Atlanta/The Health Initiative, SAGE Metro St. Louis, Utah Pride Center, and ZAMI NOBLA.

**Recommended citation:** Fredriksen-Goldsen, K. I., Kim, H.-J., Goldsen, J., Shiu, C., & Emler, C. A. (2016). Addressing Social, Economic, and Health Disparities of LGBT Older Adults & Best Practices in Data Collection. LGBT+ National Aging Research Center, University of Washington, Seattle, WA.

Research reported in this publication was supported by the National Institute on Aging of the National Institutes of Health under Award R01AG026526 (Fredriksen-Goldsen, PI). The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.

© LGBT+ National Aging Research Center, 2016, University of Washington, Seattle, WA

4101 15th Avenue NE • Seattle, WA 98105 • 1-800-558-8703 • [AgePride@uw.edu](mailto:AgePride@uw.edu) • [Age-Pride.org](http://Age-Pride.org)