



# FACTS ON LGBTQ+ AGING

A publication by SAGE and the National Resource Center on LGBTQ+ Aging

**sage** | Advocacy & Services for LGBTQ+ Elders  
**We refuse to be invisible®**

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## LGBTQ+ Older People

**LGBTQ+ older people are a diverse and widespread population, residing in every area of the country.**

While the lack of a national probability study makes it impossible to know the size of the LGBTQ+ older adult population with precision, it is estimated that by 2030 there will be approximately 7 million LGBTQ+ people in the U.S. who are 50 and older.<sup>1,2</sup>

LGBTQ+ older people face unique challenges as we age. LGBTQ+ elders are...



## Caregiving

Caregiving can be a rewarding but sometimes challenging experience. Because LGBTQ+ older people tend to rely on families of choice,<sup>8</sup> their care networks are often structured differently than those of their non-LGBTQ+ peers. LGBTQ+ people face unique obstacles in both giving and receiving care, from healthcare laws that privilege biological families to a lack of resources for LGBTQ+-specific needs.

**21 percent of older LGBTQ+ people have provided care to friends, compared to only 6 percent of non-LGBTQ+ older adults.<sup>9</sup>**

**LGBTQ+ people become caregivers at a higher rate than non-LGBTQ+ people, and make up 9% of the caregivers in the United States.<sup>10</sup>**

**LGBTQ+ caregivers are more likely to be caring in isolation, which can exacerbate stress and lead to caregiver burnout.<sup>11</sup>**

## Cultural Competency

LGBTQ+ elders are significantly less likely than other older adults to reach out to senior centers, meal programs, and other vital services,<sup>13</sup> and may even be reluctant to access medical care. After decades of experiencing discrimination and harassment, many simply assume they will not be welcome in these environments.

**Many LGBTQ+ people have reported delaying or avoiding necessary medical care because they fear discrimination or mistreatment by health care staff.<sup>14, 15</sup>**

**Nearly 1 in 4 transgender people report having to teach their health care provider about transgender issues in order to receive appropriate care, and 15% report being asked invasive or unnecessary questions unrelated to the health care they are seeking at the time.<sup>16</sup>**

**88 percent of LGBTQ+ older people say they would feel more comfortable with long-term care services if they knew staff had been specifically trained about the needs of LGBTQ+ patients. More than two thirds say this would make them feel *much* more comfortable.<sup>17</sup>**



## Discrimination

LGBTQ+ older people came of age at a time when simply being openly LGBTQ+ could get them arrested, fired, or worse. As such, they have experienced discrimination based on their perceived or actual sexual orientation and gender identity on many fronts. Moreover, they've lived through many years in which this discrimination was condoned and even encouraged by society in the form of laws, policies, and cultural norms. 82 percent report experiencing at least one instance of victimization, such as threats, harassment, or even physical assault.<sup>18</sup>

**About two-thirds of LGBTQ+ older people have experienced victimization at least three times in their lives.<sup>19</sup>**

**More than half of LGBTQ+ older people report being discriminated against in employment and/or housing.<sup>20</sup>**

**It's been reported that LGBTQ+ older people have received inferior, neglectful health care or have been denied health care altogether.<sup>21</sup>**

**Research has shown that repeated experiences of discrimination can lead to long-term negative health outcomes.<sup>22</sup>**

## Health Care

Ongoing experiences of discrimination and prejudice often lead to what is commonly referred to as *Minority Stress*,<sup>23</sup> and it has been well documented that such experiences can profoundly impact both mental and physical health.<sup>24</sup> Not surprisingly, LGBTQ+ older people experience significant health disparities:

Research has repeatedly shown that LGBTQ+ people have higher rates of poor physical health and mental distress.<sup>25, 26</sup>

41 percent of LGBTQ+ older people report having a disability, compared to 35 percent of heterosexual older adults.<sup>27</sup>

A national study of transgender people found that in the prior year, 23% of respondents avoided going to a doctor when they needed to because they feared being mistreated, and 33% did not go because they could not afford it.<sup>28</sup>



**34 percent of LGBTQ+ older people worry about having to hide their identity in order to access senior housing.**<sup>35</sup>

## HIV/AIDS

HIV disproportionately impacts the LGBTQ+ community, and LGBTQ+ older people are no exception. Thirty years ago, the idea that someone with HIV would live decades was unimaginable; now people with HIV are living well into their golden years.

In 2018, 17% of all new HIV diagnoses in the U.S. were in people aged 50 and older.<sup>29</sup>

Researchers estimate more than 50 percent of patients with HIV have an HIV associated neurocognitive disorder, which can impact memory, motor skills, and other aspects of cognitive function, as well as cause depression or psychological distress.<sup>30</sup>



## Housing

Appropriate housing is a cornerstone of wellness, and a major concern for many older adults. Unfortunately, bias and discrimination can make it more difficult for LGBTQ+ older people to find housing that is safe, affordable, and conducive to aging well.

In a matched-pair test across 10 ten states, 48 percent of same-sex couples experienced adverse treatment when seeking senior housing.<sup>32</sup>

Nearly one-quarter (23%) of transgender individuals report having experienced some form of housing discrimination in the past year.<sup>33</sup>

21 states and 5 territories have no explicit laws prohibiting housing discrimination on the basis of sexual orientation and/or gender identity.<sup>34</sup>



## Financial Security

Discrimination can negatively impact an individual's opportunities in education, employment, housing stability and much more. All of this leads to decreased financial stability and less (if any) accumulation of wealth. Many LGBTQ+ older people have experienced these inequities throughout their lifetime, and the cumulative effects are clear:

**In general, LGBTQ+ people are poorer and have fewer financial resources than their non-LGBTQ+ counterparts.<sup>36</sup>**

**Research has shown that LGBTQ+ people are likelier to be subject to employment discrimination, making their earnings—and their Social Security payments—lower.<sup>37</sup>**

**One-third of LGBTQ+ elders live at or below 200% of the federal poverty level.<sup>38</sup>**

## Social Isolation

Social connectedness is an important factor in healthy aging, impacting happiness, health and even lifespan.<sup>40</sup> But LGBTQ+ older people, who are more likely to live alone and have smaller social networks,<sup>41</sup> are particularly vulnerable to social isolation.

**59 percent of LGBTQ+ older people report feeling a lack of companionship and 53 percent report feeling isolated from others.<sup>42</sup>**

**Research has shown that loneliness and isolation are associated with poor physical health. Some experts have equated the health risks of prolonged isolation to those of smoking 15 cigarettes a day.<sup>43</sup>**

**25 percent of SAGE care management clients in New York City report having no one to call in case of an emergency.<sup>44</sup>**



**Transgender people in the U.S. are more than twice as likely to be living in poverty as non-transgender people. Transgender people of color are more than three times as likely.**

## Wellness

Wellness affects health outcomes and encompasses positive habits such as physical activity, abstaining from cigarettes and alcohol, and receiving regular check-ups from a physician. In the same way that Minority Stress impacts physical health, it also takes its toll on mental health and overall wellness.

**Nearly one in three LGBTQ+ people smoke, a rate that is more than 50% higher than the general population.<sup>45, 46</sup>**

**LGB older people are significantly more likely to drink alcohol excessively than heterosexual older adults, and transgender older adults are more likely to drink excessively than their non-transgender counterparts.<sup>47</sup>**

**39% of LGBTQ+ older adults have had suicidal thoughts,<sup>48</sup> and 2 of every 5 transgender people have actually attempted suicide in their lifetime.<sup>49</sup>**

**Despite all of these challenges, LGBTQ+ older people are living vibrant, full lives throughout every part of the country and around the world.** They were the pioneers who stood up and pushed back at the Stonewall uprising, and the caregivers who stood by friends and loved ones through the height of the AIDS epidemic. They are models of resilience, celebrating their identities while persevering through adversity and helping to bring about incredible change for all LGBTQ+ people over just a few short decades.


# Notes

- <sup>1</sup>*Out & Visible: The Experiences of Lesbian, Gay, Bisexual and Transgender Older Adults, Ages 45-75*, SAGE, 2014.
- <sup>2</sup>*Outing Age 2010: Public Policy Issues Affecting Lesbian, Gay, Bisexual and Transgender Elders*, The National Gay and Lesbian Task Force Policy Institute, 2010.
- <sup>3</sup>*Improving the Lives of LGBT Older Adults*, Movement Advancement Project and SAGE, 2010.
- <sup>4</sup>Ibid.
- <sup>5</sup>*Understanding Issues Facing LGBT Older Adults*, Movement Advancement Project & SAGE, 2017.
- <sup>6</sup>U.S. Department of Housing and Urban Development, Office of Policy Development and Research, *Message from the Assistant Secretary: LGBT Elders*. Accessed December 20, 2020, [https://www.huduser.gov/portal/pdredge/pdr\\_edge\\_frm\\_asst\\_sec\\_011312.html](https://www.huduser.gov/portal/pdredge/pdr_edge_frm_asst_sec_011312.html).
- <sup>7</sup>*LGBT Aging: A Review of Research Findings, Needs, and Policy Implications*, Williams Institute, 2016.
- <sup>8</sup>*Improving the Lives of LGBT Older Adults*.
- <sup>9</sup>*Still Out, Still Aging*, MetLife Mature Market Institute and American Society on Aging, 2010.
- <sup>10</sup>*Caregiving in the U.S. 2015*, AARP Public Policy Institute and National Alliance for Caregiving, 2015.
- <sup>11</sup>*Caregiving in the LGBT Community: A Guide to Engaging and Supporting LGBT Caregivers through Programming*, SAGE, 2017.
- <sup>12</sup>Fredriksen-Goldsen et al., *The Aging and Health Report*, 2011.
- <sup>13</sup>*Improving the Lives of LGBT Older Adults*.
- <sup>14</sup>*Discrimination Prevents LGBTQ People from Accessing Health Care*, Center for American Progress, 2018.
- <sup>15</sup>*The Report of the 2015 U.S. Transgender Survey*, National Center for Transgender Equality, 2016.
- <sup>16</sup>Ibid.
- <sup>17</sup>*Maintaining Dignity: Understanding and Responding to the Challenges Facing Older LGBT Americans*, AARP, 2018.
- <sup>18</sup>Fredriksen-Goldsen, *Aging and Health*.
- <sup>19</sup>Ibid.
- <sup>20</sup>Ibid.
- <sup>21</sup>*LGBT Aging: A Review of Research Findings*.
- <sup>22</sup>U.S. Department of Health & Human Services, *Healthy People 2020: Discrimination as a Social Determinant of Health*, last updated October 8, 2020. Accessed December 20, 2020, <https://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health/interventions-resources/discrimination>.
- <sup>23</sup>Ilan H. Meyer, *Prejudice, Social Stress, and Mental Health in Lesbian, Gay, and Bisexual Populations: Conceptual Issues and Research Evidence*, 2003.
- <sup>24</sup>See e.g., Pascoe & Smart, *Perceived Discrimination and Health: A Meta-Analytic Review*, 2009.
- <sup>25</sup>See e.g., *Health and Access to Care and Coverage for Lesbian, Gay, Bisexual, and Transgender Individuals in the U.S.*, Kaiser Family Foundation, updated 2018.
- <sup>26</sup>See e.g., Pascoe & Smart, *Perceived Discrimination*.
- <sup>27</sup>Fredriksen-Goldsen, *Aging and Health*.
- <sup>28</sup>*The Report of the 2015 U.S. Transgender Survey*.
- <sup>29</sup>Centers for Disease Control and Prevention, *HIV Surveillance Report*, 2018 (Updated); vol.31, Published May 2020. Accessed December 20, 2020, <http://www.cdc.gov/hiv/library/reports/hiv-surveillance.html>.
- <sup>30</sup>U.S. Department of Health & Human Services, HIV.gov: *Growing Older with HIV*, last updated May 26, 2020. Accessed December 20, 2020, <https://www.hiv.gov/hiv-basics/living-well-with-hiv/taking-care-of-yourself/aging-with-hiv>.
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- <sup>32</sup>*Opening Doors: An Investigation of Barriers to Senior Housing for Same-Sex Couples*, Equal Rights Center, 2014.
- <sup>33</sup>*The Report of the 2015 U.S. Transgender Survey*.
- <sup>34</sup>*Equality Maps: State Nondiscrimination Laws, Movement Advancement Project*. Accessed December 22, 2020, [https://www.lgbtmap.org/equality-maps/non\\_discrimination\\_laws](https://www.lgbtmap.org/equality-maps/non_discrimination_laws).
- <sup>35</sup>*Maintaining Dignity*.
- <sup>36</sup>See e.g., *Health and Access to Care and Coverage for Lesbian, Gay, Bisexual, and Transgender Individuals in the U.S.*, Kaiser Family Foundation, updated 2018.
- <sup>37</sup>*The Report of the 2015 U.S. Transgender Survey*.
- <sup>38</sup>*Improving the Lives of LGBT Older Adults*.
- <sup>39</sup>*Understanding Issues Facing LGBT Older Adults*.
- <sup>40</sup>See e.g., Cacioppo JT & Hawkley LC, *Social Isolation and Health, With an Emphasis on Underlying Mechanisms*, 2003.
- <sup>41</sup>*Out & Visible*.
- <sup>42</sup>Fredriksen-Goldsen, *Aging and Health*.
- <sup>43</sup>Holt-Lunstad et al., *Social Relationships and Mortality Risk: A Meta-Analytic Review*, 2010.
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- <sup>47</sup>Fredriksen-Goldsen, *Aging and Health*.
- <sup>48</sup>Ibid.
- <sup>49</sup>*The Report of the 2015 U.S. Transgender Survey*.

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