

# PROJECT visibility

---

## TRAINING MANUAL



Co-creating an aging services community that supports  
lesbian, gay, bisexual, and transgender (LGBT) elders  
and their families

*This manual is dedicated to the LGBT elders who remain isolated  
from living for years with society's stigma and discrimination  
and...  
to all the caregivers who are changing institutions from the inside-out*

---

Boulder County Area Agency on Aging  
P.O. Box 471  
Boulder, CO 80306  
303-441-3583  
[infoLGBTelders@bouldercounty.org](mailto:infoLGBTelders@bouldercounty.org)  
[www.projectvisibility.org](http://www.projectvisibility.org)



## Table of Contents

Welcome .....	3
Beginning with Basics: Terms and Concepts .....	4
Eight Basic Points about LGBT Elders (sidebar) .....	8
Frequently Asked Questions .....	9
Gay Grief. Ways to Show Culturally Competency in LGBT issues (sidebar).....	10
Reflections of a Lesbian Caregiver. Facts about LGBT Elders (sidebar).....	11
Studies about LGBT Elders (sidebar) .....	12
The Power of Coming-out Stories (sidebar) .....	14
Know Your Rights regarding Long Term Care Homes. ....	15
LGBT-friendly Admissions and Marketing and Recreation Staff .....	16
Facts about the LGBT Continuum (sidebar).....	17
Nursing Staff. What We Have Learned (sidebar) .....	17
Legal Issues.....	18
Recommended Estate Planning Documents. Seven Colorado Laws that Extend LGBT Protections.....	19
Conclusion .....	20
<b>TOOLKIT:</b>	
Inclusive Space Posters.....	23-24
Check List of Practical Solutions.....	25
Sample Inclusiveness Statement .....	27
Sample Inclusive Intake Form .....	28
Trans Etiquette .....	29
Aging Bisexuals – What’s Your BiQ?.....	30
HIV/AIDS Information Sheet .....	31
A Brief, Beginning Guide to LGBT Culture.....	32
Appendix I: Glossary of LGBT Terms and Acronyms .....	34
Appendix II: LGBT History in the U.S. and Europe .....	39
Appendix III: Additional Resources — Multicultural • National and Colorado Resources • Reports .....	51

### **Acknowledgments** — general research and statistics

- “Outing Age 2010” National Gay and Lesbian Task Force Policy Institute
- “Improving the Lives of LGBT Older Adults” April 2010. Movement Advancement Project (MAP) and Services & Advocacy for Gay, Lesbian, Bisexual & Transgender Elders (SAGE) <http://www.sageusa.org>
- Movement Advancement Project (MAP) <http://www.lgbtmap.org/>
- One Colorado Education Fund [www.one-coloradoeducationfund.org](http://www.one-coloradoeducationfund.org)

## Welcome to Project Visibility

The following statement sums up the personal history of today's LGBT elders. It is from SAGE, Services and Advocacy for GLBT Elders, the nation's oldest advocacy organization for LGBT seniors, founded in 1978 in New York City.

*“Historical prejudice against today's LGBT elders has disrupted their lives, their connections to their families of origin, their propensity to have and raise their own children, and their opportunities to earn a living and save for retirement. The current cohort of LGBT elders age 65+ consists of individuals whose expressions of love have been labeled a psychiatric disorder (until the Diagnostic and Statistical Manual was changed in 1973), a criminal activity (until the last sodomy laws were struck down in 2003), anti-family and immoral (still by many religious groups), and a security risk or morale threat (still by the U.S. military). [edit.: Don't Ask Don't Tell ended Sept. 20, 2011]. These individuals have seen AIDS decimate their social networks and destroy their communities. They have felt increasingly unwelcome or invisible in LGBT communities as their bodies showed the effects of aging.”<sup>1</sup>*

This cohort came of age before the 1969 Stonewall Revolt in a time far less tolerant than now. Most lived ‘in the closet’ during their working years; some ‘came out,’ some did not, upon retirement. Recent studies show that almost without exception, they all fear what will happen to them as they age and need senior services. Our Boulder County focus groups found that LGBT elders are deeply concerned about aging and access to services. They are uncertain about where to go when they need help. Participating elders wondered which providers were ‘safe and friendly.’ They wanted staff to be properly educated about LGBT issues.

Because they fear discrimination, neglect, and even violence, LGBT seniors are five times less likely to access services. This training will help you become a culturally responsive service provider. You will learn how to create policies and procedures and use language and actions that are LGBT inclusive.

The *Project Visibility* film, the cornerstone of the training, illustrates some of the thoughts and concerns of LGBT elders in our area. In the film, LGBT elders discuss their lives and their concerns about being vulnerable to service providers. They challenge you to examine your assumptions about who they are and the kind of lives they lead. It is the goal of the *Project Visibility* training to open the minds and hearts of eldercare providers to the strengths and needs of this overlooked segment of the population. Thank you for being such an advocate.

Boulder County Area Agency on Aging  
P.O. Box 471  
Boulder, Colorado 80306  
303-441-3583  
[www.projectvisibility.org](http://www.projectvisibility.org)  
[infoLGBTelders@bouldercounty.org](mailto:infoLGBTelders@bouldercounty.org)

---

<sup>1</sup> “Improving the Lives of LGBT Elders” 2010, p4. Services and Advocacy for GLBT Elders (SAGE).

## **Beginning with Basics: What Do the Terms Heterosexism, Homophobia, Transgender, and Coming Out Mean?**

### **Heterosexism**

Heterosexism is the belief that heterosexuality—the physical, sexual and emotional attraction that people of the opposite sex feel for each other—is superior to homosexuality.

Because heterosexism is so woven into our culture, describing it sometimes feels like explaining water to a fish. Often it is difficult for even well intentioned heterosexuals to see that heterosexism is all around them and, worse yet, that they are participating in it. Heterosexism can be both blatant and subtle.

Here are some examples of heterosexism and how it affects LGBT people:

- Going out to dinner is a wonderful way for couples to connect and relax. A gay couple, however, may think twice about holding hands across the table. Will people stare or say something rude? Walking down the street, a gay couple may wonder if it's safe to hold hands. Most heterosexual couples aren't concerned with such things.
- Most administrative forms still say "Married, single, widowed, divorced." Even by checking "Married" (if a gay or lesbian person has a legal marriage allowed nationally since June 26, 3015), the assumption will be that the person is heterosexual. There is generally no option to identify the gender of the spouse.

Allan G. Johnson in his book, *Privilege, Power, and Difference* (2005), illustrates privileges that heterosexuals enjoy:

- Heterosexuals are free to reveal and live their intimate relationships openly—by referring to their partners by name, recounting experiences, going out in public together, displaying pictures on their desks at work—without being accused of "flaunting" their sexuality or risking discrimination.
- Heterosexuals can move about in public without fear of being harassed or physically attacked because of their sexual orientation.
- Heterosexuals don't run the risk of being reduced to a single aspect of their lives, as if being heterosexual summed up the kind of person they are. Instead, they can be viewed and treated as complex human beings who happen to be heterosexual.
- Heterosexuals can turn on the television or go to the movies and be assured of seeing characters, news reports, and stories that reflect the reality of their lives. [Edit.: this is changing rapidly. Same-sex couples appeared in ads during the 2014 Olympics.]
- Heterosexuals can live where they want without having to worry about neighbors who disapprove of their sexual orientation.

### **How does heterosexism affect service to seniors?**

Humans tend to make assumptions about a person's life with a few facts. For instance, if an older woman states that she had been married and has children, we may categorize and relate to her as heterosexual.

What we may not know is that her most significant relationship has been with or continues to be with a woman. That aspect of her life may not be evident in the initial admissions process, in care-planning sessions, or in casual conversation. Nevertheless, it is an essential part of her life. Making the assumption about her relationships hinders any therapeutic process.

### **Sexism**

Sexism, or traditional gender role stereotyping, is linked to heterosexism. Many of us were raised to think that women like sewing, cooking, and getting their nails polished. Men, on the other hand, like to work with tools and watch sports. While these gender roles are now being questioned in the heterosexual community as well, in the LGBT community, people have been challenging them for much longer. Logically, a single-sex couple couldn't rely on those traditional roles and still maintain a household. Thus, women learned to fix leaky toilets and men learned to sew on buttons.

You can help your clients thrive by encouraging them to explore a variety of interests and skills, regardless of their gender.

### **Homophobia**

Homophobia is the fear of or discomfort with homosexuals and homosexuality. LGBT people can experience varying degrees of internalized homophobia that is a deep questioning about whether they're OK or moral or any number of societal judgments. It's much like how people of color can experience internalized racism. Ingrained, prejudicial social norms have a strong pull. Experiencing homophobia is common; the ability to see it in oneself is often more difficult.

For instance, in a Life Development class of nursing students, the subject of gays and lesbians arises. Several members of the class expressed disgust at the idea of gays being open about their relationships. One future nurse states, "I don't like to see them hold hands at the mall. Why do they have to flaunt it?"

### **Actual Examples of Homophobia**

In a day care setting, Robin, who has dementia, is the dance hall queen. She loves to dance and often acts out sexually, putting her hands on men's crotches. One day, she starts dancing with a woman, and talks to her as if she is a man. A staff member laughs and pulls her away from the woman and matches her up with a man.

June and Donna are residents of an Alzheimer's assisted living facility. They did not know each other before living at the facility. They became friendly and are now together all the time. They often hold hands in the public area and seem happy to be together.

Staff members are tolerant, but make jokes and comments about them. June's son is concerned about their relationship and complains to the administrator. After some time, he takes June away from the facility to another one. Donna is bereft, but no one speaks to her about June's absence.

Phoebe and Carol have been together for over 20 years. Phoebe is 15 years younger than Carol. When they come into an assisted living to see if it would be a good fit for Carol, the receptionist assumes that Phoebe is Carol's daughter.

Robert is a nursing home resident and has never been married. The staff assumes that Robert is gay because he never talks about women and has men friends visit him. One day, Robert's roommate accuses Robert of touching him sexually and wants him out of the room. The staff immediately believes this charge without discussing it with Robert, and they respond by being suspicious of Robert and having him on a 15-minute watch.

As you continue to read this manual and learn more about creating LGBT-friendly services and facilities, you'll learn alternatives to the problematic, painful examples listed above. Consider using these scenarios as jumping off points for discussion with other administrators and caregivers where you work.

## **Transgender Older Adults**

*With credit to Loree Cook-Daniels of the Transgender Aging Network/TAN*

The term *transgender* or "trans" includes a range of individuals whose gender identity, that is their sense of themselves as male or female, does not exactly fit with their biological sex. In its broadest meaning, "transgender" includes people who are intersex, male to female (MTF or transwomen) or female to male (FTM or trans men) trans folks, cross-dressers, or simply gender variant. Some trans people live according to their realized gender, that is their sense of their true gender identity; some do not. Transgender people may have their names changed in some, none, or all of their documentation, such as birth certificates, driver's licenses, social security cards, mortgages, wills, and medical records.

Transgender people can be homosexual, bisexual, or heterosexual.

## **Transitioning**

Transitioning refers to the process of beginning to express one's gender identity as different from what it has been. It's a transition from one's former, assigned gender identity to one's experienced or "realized" gender identity. This may include changing one's outward public appearance, such as clothing and hairstyle, and it may involve electrolysis, hormone use, and/or gender-related surgery. Transgender people who use hormones typically do so throughout their lives. While many choose to have sexual reassignment surgery, such as a female having breasts removed, not all trans people do. Genital surgery is more common among Male to Female transgender (trans women) than among FTM (trans men) people. Other surgeries may include removal of the Adam's apple and hysterectomy.

You may not always realize the gender identity of a person requesting services at your facility. It is always important to focus on the person's experience of their gender instead of how they may appear to others. Caregivers and administrators will be more successful in serving the trans community with open communication and an understanding of gender identity issues.

## **Six Ways to Improve Elder Care from a Trans Perspective**

As a caregiver,

1. Acknowledge the chosen gender of your client during and after transition as part of all activities and residential services.
2. Accept a trans person's right to present fully in the gender of choice, without being identified as trans if s/he wants to present only as the gender of choice. For instance, a female to male client may prefer to be known as male, not as FTM or as a trans man.
3. Provide assistance with restroom use, if needed, and assure privacy. In facilities with gender-specific restrooms, let your clients tell you which restrooms they prefer.
4. Be sensitive to medical needs and educate personnel, as needed, about trans-related subjects, such as hormone replacement therapy and use, and continued need for gynecological treatment in trans men and for prostate exams in trans women.
5. Train all staff to be respectful and accepting.
6. Create an accepting environment throughout the facility, including among other residents.

## **Coming Out**

The LGBT community uses the term "coming out" to describe the process of being open about being lesbian, gay, bisexual, or transgender. Not all LGBT people are out, and those who are may be selective about who they tell. For instance, some may not be out at work. Others may not be out to their biological families. Some don't even want information from gay organizations sent to their home out of fear that the mail carrier will know about them.

Coming out is a very personal journey. Many older LGBT people choose not to be out when they are forced to live in a long-term care community even if they had been out before. They are concerned about being ostracized and ridiculed by their peers and staff, and additionally, of being a victim of neglect or even violence. This means that they cannot reminisce or be a part of any life-review process. The people with whom they eat their meals, attend concerts, or play cards will never really know them, and they are likely to feel isolated and not understood. It also means that their care plans lack vital information that could help their psycho-social and physical health.

As a service provider, being sensitive to this issue is paramount. Your job is to let them know, in different ways, that you and your staff are open and accepting people.

## What are some ways by which you can demonstrate your acceptance?

- Ask questions that are open-ended and that don't contain heterosexist language. For instance, you can ask "Who do you consider family" or "Is there someone in your life that needs to be in this care conversation?"
- If you are in a facility, purchase and display books that have LGBT themes or that include LGBT stories among others. Show movies like "The Kids are All Right" or "Trans America," and include a follow-up discussion led by someone from a local LGBT community center.
- Posting an anti-discrimination statement that is inclusive of LGBT identity in the main lobby is helpful to LGBT clients and their loved ones and to LGBT employees.

If you think that a potential or current client is LGB or T, do not try to force them to come out. Don't try to guess, either. Instead, focus on your language, verbal and written, and the environment you create. This helps promote a safe climate someone might freely choose to disclose information about his or her sexual orientation and/or gender identity.

### **Eight Basic Points about LGBT Elders**

LGBT elders' fears about aging are different from those of heterosexual elders. They are afraid of ridicule, discrimination, ostracism, neglect, and harm.

LGBT elders may want to talk about their lives to someone who understands and is not uncomfortable.

LGBT elders do not need LGBT caregivers, but LGBT-friendly caregivers are essential.

LGBT elders may be at greater risk of social isolation, substance abuse, and depression.

LGBT elders and caregivers will watch for signs of inclusiveness and acceptance—in your behavior, language, and in the environment.

Service providers need to make an effort to market to the LGBT population and to create policies that create an inclusive environment for clients and staff.

LGBT elders may have opposite-sex partners or may have had them in the past. They may have children and grandchildren.

LGBT elders may not want to come out. Do not ask them about their sexual orientation directly or speculate about it with others.

LGBT elders may choose to come out to certain people, but not others. If you have documentation that mentions their sexual orientation, find out if they want the rest of the staff to know before you tell others.



## Frequently Asked Questions

### **Why do I need to know about a client's sex life? It's none of my business.**

Knowing someone's sexual orientation is different from knowing about that person's sex life. It's about whom they love and whom they choose as intimate partners. As stated in the *Project Visibility* film, knowing a person's sexual orientation helps know about their life experience.

### **Why do I need this training? I know gay people, and I'm not a mean person.**

We all learned anti-LGBT attitudes and they don't go away by magic (or even by good intentions alone). Even LGBT people have stated how helpful this training was to them! We believe that everyone can learn something new about this issue.

### **Are we talking about special treatment? I treat everyone equally.**

This training is focused on LGBT elders obtaining the fair and *equal* treatment that is due to every older adult. When LGBT elders feel they must hide their sexual orientation, they often don't access services or, when they do, they benefit less because they don't feel safe sharing their lives. Under those circumstances, their treatment is far from equal.

### **How can an older LGBT person be a parent or grandparent?**

Some LGBT people married when they were younger and had children with an opposite-sex partner. They discovered or accepted their same-sex orientation or gender identity later in life. Others, in couples or on their own, had children through adoption, fostering, or donor insemination.

### **I think one of my clients is gay, but she won't talk about her life. What should I do?**

Begin by communicating your personal openness and acceptance of all people. Never "out" people or ask directly if they are lesbian, gay, bi, or transgender. While some people do not care if you ask, other LGBT folks would be frightened. Give her time to feel safe with you, and let her decide when and whether to come out. Use inclusive forms like the one on page 24.

### **What if someone who is gay is attracted to me? That really creeps me out.**

Unfortunately, the predator stereotype lingers for LGBT people. Just as heterosexuals are not attracted to everyone they meet of the opposite sex, gay men and lesbians are not attracted to everyone they meet of the same sex. If you are approached by an LGBT person in whom you have no interest, respond as you would otherwise by saying, "No, thank you" Consider what makes you feel uncomfortable: are you concerned about being mistaken for homosexual?

### **What if I think homosexuality is wrong?**

We don't have to agree with someone's behavior or beliefs in order to listen, respond, and provide him or her with respectful, sensitive care. Respect others' differences and individuality just as you would want them to respect your own.

### **How should staff respond to sexual activity between residents of the same sex?**

Staff should respond the same way they'd respond to resident-to-resident sexual activity between opposite sex partners. The same considerations of privacy and confidentiality, safe sex practices, safety, and consent apply.

## Gay Grief

### **Six ways to show that your organization is culturally competent in LGBT issues**

Post an LGBT-affirming anti-discrimination policy in plain sight in your admissions office

Encourage admissions staff to use inclusive language, such as “significant other” or “partner” instead “husband” or “wife.” “Who is important to you?” is what really matters.

Use photographs of same-sex couples in your promotional literature. Include the rainbow flag or other LGBT-friendly symbols on your website.

Include Pride Marches, gay churches, or queer-friendly concerts in your activities listings.

Include LGBT-inclusive movies, books, and magazines in your library and social areas.

When talking to clients, mention LGBT people in your own life, such as family, friends, or co-workers (even yourself, if applicable.) Come out!

In addition to the universal characteristics of grief, members of the gay community who lose a partner or significant other often experience other painful aspects in their grieving process.

Many people and agencies in our culture, including biological families, workplaces, businesses, and places of worship, may not treat a gay relationship as equal to a traditional heterosexual marriage. This can feel like an invalidation of the remaining partner’s loss.

Prior to a partner’s death, an LGBT person may have to deal with hospitals and health care personnel concerning visitation, care, and legal issues. After death, in one of the worst times of their lives, grieving partners may be left to contend with unwelcome biological family interference and heterosexist assumptions and biases at the funeral home, from a representative of a pension plan, or in dealing with inheritance of property.

Additionally, many members of the gay community have experienced a disproportionate loss of partners and friends from AIDS, giving them less time to recover from grief or rebuild circles of friends. Finally, because often LGBT couples have long been closeted, many gay people lack a model for older widowhood. In some cases, death may force a “coming out” for the remaining partner; this adds psychological stress.

All of the situations above can be an impediment to the beginning stages of grief. Psychologists call this *disenfranchised grief*, a grief that is not spoken about or acknowledged.

In *Gay and Lesbian Aging*, the authors (Gilbert Herdt & Brian deVries) tell us,

Those who are disenfranchised from the grief and death systems of North American are left without the support and tools through which their grief may be addressed; they are also left without the scripts to recite and roles to enact at the time of death.

Those who experience disenfranchised grief withhold expression of their grief because there is no encouragement from the outside world for it. It leaves the griever in a halted state, and the grief never gets a chance to fully move through the spirit and body.

## Reflections of a Lesbian Caregiver

by Mary Jo Osterman, Ph.D., Louisville Colorado

My partner, DJ, and I were together for nearly fifty years. "Being together" meant a number of different things over five decades: living 600 miles apart and talking on the phone every night, living in the same city but in separate apartments, living together as "friends" or "roommates." Finally -- after thirty years (1992) and DJ's retirement from a United Methodist seminary -- we moved to Louisville into a house together where we slowly began to deal with our relationship and cautiously (for DJ), affirming our identity, speaking our love to each other, and acknowledging that we were a lesbian couple within our small old lesbians' support group.

I came out personally in 1981 and had another short, very public lesbian relationship that ended when my partner, Phyllis, committed suicide after losing a battle to become ordained as a United Methodist minister. Through it all, DJ remained closeted, yet she and I remained closely connected. Over the years I'm sure people guessed the nature of our relationship, but we never said.

In the fall of 1997, I began to notice that DJ's memory was failing a little. Her brother began noticing that she wasn't responding to his emails as thoroughly as she normally did. Daily tasks became harder. She left water running or the stove on. She forgot that the dishwasher needed a special kind of soap, and misplaced things constantly. Driving and managing money became huge issues, with me so slowly and indirectly taking over those tasks while trying to leave DJ with as much dignity as possible. She remained in total denial of her memory loss, becoming frustrated and then angry, blaming me for all the problems. She began not wanting to go anywhere. She made numerous repeat phone calls to people. We lost contact with friends, stopped going to church, and became more and more isolated. However, for several years, DJ could pass the short memory test given by her doctor, so I began making notes every night and then before DJ's next appointment, I would send them to her doctor. Finally, we got a diagnosis of dementia (possible Alzheimer's disease.)

My stress level increased until finally in 2001, I reached out to our local senior center and to its Alzheimer's Association caregiver support group. That's when my learning really began! Now I had to decide whether or not to be honest about my relationship with DJ. Someone at the senior center advised me not to come out, so at the first meeting I spoke of DJ as a longtime friend who lived with

## Facts about LGBT Elders

1-3 million Americans over 65 are lesbian, gay, bi or trans. By 2030, over 4 million will be.

According to the National Gay and Lesbian Task Force, LGBT seniors are five times less likely to access senior services than are heterosexual seniors.

Older LGBT people may be in a more advanced state of frailty when they finally access services.

These seniors are "twice-hidden" due to social discrimination on two levels: ageism and homophobia or heterosexism.

LGBT seniors often face antigay or gender discrimination by mainstream elder care providers. This makes them "invisible" and impedes their access to vitally important services.

At the same time, LGBT elders frequently confront ageism within the LGBT community and in the organizations created to serve that community's needs.

me. However, as I listened to others' details of their lives with their loved ones, I realized I couldn't get any real support if I lied. I didn't return to the group for a whole year. Finally, desperate for help, I returned and identified myself as a caregiver with a lesbian partner. I was accepted -- cautiously at first -- then more and more naturally. By 1992 DJ could not be left alone in the house, so a friend offered to come and "visit" with her once a month while I went to my support group. Much, much later, that friend told me about how every month she would see changes in DJ such as less ability to play Canasta or Scrabble or work on small jigsaw puzzles.

Being a lesbian caregiver means constantly coming out. Every time a new person joined my support group, I had to come out. I also had to come out to doctors, lawyers, insurance people and memory care facility staff and caregivers to let them know that I had an active "power of attorney" as I made decisions to accommodate DJ's increasing illness.

I know I put off too long seeking day care for DJ (and respite for me!) because I wasn't sure how the various facilities in Boulder County would accept us as a couple. I had heard horror stories of other gay and lesbian elders around the country who had been refused admission or who were taken in but then either neglected or harassed. In my visits to facilities, I came out to staff and asked questions about their knowledge of and experience with LGBT elders. I got mixed responses -- some obviously uncomfortable, others not picking up on my fear of discrimination and adequate care issues.



*Mary Jo & DJ dance*

Ultimately I chose Balfour Cherrywood Village because forty minutes into the interview, Debbie had still not asked or assumed what my relationship to DJ was. When I commented on that, she said "Well, I assumed you would tell me sooner or later." When I came out and expressed my concerns, Debbie, while somewhat naive about LGBT issues (which she now laughingly admits), was so obviously open, accepting and caring.

As she said, "If there's a problem with staff acceptance, they won't be here very long!" In the fall of 2004, DJ began day care and I discovered that the staff was indeed diverse and compassionate. DJ was thoroughly integrated into the community and much loved. Once DJ moved into Cherrywood, I realized I also had to come

## **Studies about LGBT Elders**

For LGBT elders, struggles with heterosexism can pose threats to health, well-being and happiness in old age. As LGBT people grow older and rely more and more on public programs and social services for care and assistance, they may have less independence from institutions that might discriminate against them. The fear of experiencing discrimination can reinforce social isolation, placing people at higher risk for self-neglect, decreased long-term quality of life, and increased mortality risk.

—*Outing Age*

A 1999 Brookdale study found that 65% of 253 gay and lesbian seniors in NYC reported living alone. This was nearly twice the rate of all people 65 years or older in New York, of whom only 36% lived alone.

The same study found that fewer than 1 in 5 gay and lesbian seniors were currently living with a life partner. In contrast, nearly half of the general elderly population was currently married. Also, 90% percent of these gay seniors had no children compared to 20% in the heterosexual population.

out to each new staff person, caregiver, housekeeper, and visiting family members of residents. Otherwise they assumed that DJ was my mother since she was older than I am. Each time there was that momentary panic and internal thought process: Do I come out and correct them? Or let the error stand and perhaps compound the situation. Usually I took a deep breath and said, "No, DJ is my partner; we've been together X number years." Mostly, that was accepted, and either then or later some very meaningful conversations occurred.

DJ remained at Balfour Cherrywood (a secured *assisted* living facility) for four years where she slowly declined. At one point the director, Megan, told me that when she was talking to another resident about his disease, DJ would come around to listen -- the first time she was really seeking information.

In 2009 I had to move her from Balfour Cherrywood to their secured *nursing* facility, The Reserve. She needed to be moved because of falling episodes and her need for pureed food and feeders with meals. There I found new very diverse and compassionate staff and caregivers. I also began relating to a hospice team off and on (another understanding group). In 2010 DJ began to use a hospice-provided wheelchair part of the time and then full-time. She lost interest in swallowing and drinking (or perhaps ability to do so). On Christmas day I found her very agitated and seemingly in pain. After I put her in her bed, she never got up again. Hospice and Reserve caregivers supported my decisions about the last few days of her life. Actually, they were really DJ's decisions made before her illness). DJ died early in the morning on January 3, 2011. I was with her.

Over fourteen years of caregiving, I realized that most of the Alzheimer's-related issues DJ and I faced were physically no different than those faced by others. *The disease doesn't discriminate; people do.* However, often what happened was not outright discrimination, but rather a subtle but all pervasive heterosexual bias built into human interactions. It was the bias on forms that left me without a box to check *my* relationship status; the bias in strangers who routinely assumed two women of different ages must be mother-daughter; the bias in videos and stories used with dementia residents that always identified two same-sex people as mother-daughter or father-son, or sisters or brothers. These biases affected me. But more importantly, they affected DJ because they influenced how caregivers worked with her either to affirm or deny her steadily diminishing sense of herself.

As I watched family, friends, neighbors, senior center staff, medical personnel, and caregivers try to find language to include us, I also began to realize how bound to heterosexual language our culture was. To be more inclusive, people would say "your friend" but then revert to their usual heterosexually-based language. Perhaps my musings below will help others as we all try to use inclusive language in ALL situations, not just when working with those with dementia.

When we talk to someone who has some form of dementia, it is important to try to connect with familiar things from their past. If you are reading a story, describing a picture, or showing slides, try to think outside your usual -- perhaps heterosexist -- assumptions of relationships. Heterosexism is the act of approaching the world from an exclusively heterosexual viewpoint: *it discriminates against gay, lesbian, bisexual, and transgender people.*

So when trying to expand your language to be more inclusive, mix up the images:

**Instead of asking these questions, ask these:**

Do you have a husband/wife?	Who is your family? Who is important to you? Do you have a spouse, mate, partner, loved one, or significant other?
Are you married?	Is there someone with whom you share/d your life? Are you in a committed relationship or partnership?
Is that your friend? (for two men or women)	Who is that person to you? (could be a life partner, ex-partner, daughter, other relative, OR friend)
Is that your Mother/daughter or Father/son? for people of different ages	Who is that person to you?
Is that your child? Children (of any age)	Who is that child to you? (could be niece, nephew, special friend, neighbor's child, cousin etc.)
Is that your grandchild?	Who is that child to you? (could be godchild etc.)

You never know which word or image will stir memories in the minds of LGBT persons with dementia. You might give a resident's partner an opening to tell you the truth. And you may be very surprised at what a dementia resident might say! It's all in asking the right questions. Help everyone feel visible, included and valued.

A final musing: the LGBT community does not all use the same words, so it's always appropriate to ask "What would be the appropriate word for me to use?" And to my LGBT friends, keep educating until everybody has enough language to include you!

### **The Power of Coming Out Stories**

All LGBT people have a story about when they first realized their difference and when they first let other people know. Many older LGBT people have never had a chance to share that story with anyone outside their close circle of friends. This limits their interactions, and as Anne says in the Project Visibility film, "You can feel a part of them missing."

When anyone, including an LGBT person shares a deeply personal experience, such as their coming out story, they encourage other people, both straight and gay, to share personal life experiences. This helps create bonds and understanding among those in your community. Encourage out LGBT people to share their coming out stories with support staff and clients.

## **Know Your Rights as an LGBT Senior Advocating for a Client, Yourself, or a Loved One**

**When looking for a Long Term Care facility, check for the following:**

- ✓ Facility listed in a local LGBT resource guide.
- ✓ Staff creates a welcoming environment.
- ✓ Staff has received sensitivity training.
- ✓ Marketing materials contain a non-discrimination policy.
- ✓ Staffs use inclusive language.
- ✓ Intake doesn't assume heterosexuality.

**When living in a care facility, you have certain rights including\*:**

- ✓ The right to participate in decisions about the care you receive.
- ✓ The right to be fully informed about resources available to you.
- ✓ The right to make independent choices about your life.
- ✓ The right to have privacy and confidentiality.
- ✓ The right to be treated with dignity and respect
- ✓ The right to have a safe and secure home-like environment.
- ✓ The right to appeal any discharge.
- ✓ The right to raise concerns and complaints without fear of reprisal.
- ✓ The right to freedom from abuse, mistreatment, and neglect.
- ✓ The right to freedom from physical and chemical restraints.
- ✓ The right to have your medical, physical, psychological, and social needs met.
- ✓ The right to contact an Ombudsman (your advocate) to help resolve any violation to the rights listed above. In Boulder County, call 303-441-1173 for free confidential help.

\*As guaranteed by the federal 1987 Nursing Home Reform Law. For further information about Resident Rights, see the National Long-Term Care Ombudsman Resource Center's website:  
<http://www.ltcombudsman.org/>

## LGBT-Friendly Admissions and Marketing

Admissions and Marketing is the face of your organization. To become LGBT-friendly (and LGBT-savvy), review your marketing materials. Do they include a non-discrimination statement? Photos of same-sex couples? Stories of LGBT people who are single, widowed?

When an LGBT older adult comes into your office seeking information about care issues, he or she will look at the walls and on the tables and bookshelves. LGBT inclusive posters, magazines, books, plus a non-discrimination statement in the lobby and in the staff offices can make all the difference. We've provided a list of generation-appropriate suggestions in the appendix of this manual.

Revise your admissions forms to reflect the variety of relationships, households, and families that exist. Showing inclusivity by adding the word *partner* where you find the word *spouse* is paramount. Such awareness and effort makes the experience better for both of you.

Market to the LGBT population by reaching out to LGBT organizations in your area. You can find these organizations and businesses in the phone book, online, or through the LGBT community center. Most metropolitan areas have a chapter of Parents and Friends of Lesbians and Gays (PFLAG) that can provide contacts and other resources. Advertising in LGBT publications and participating in area LGBT events, such as conferences, Pride celebrations, and film festivals are great ways to promote your organization as welcoming and accepting.

## Recreation and Activity Personnel

Create a library of LGBT-related books, magazines, music, and films. Again, see the appendix for suggestions.

Be aware of LGBT events and organizations in your community. Get on their e-lets. Put up flyers announcing Pride events and fundraisers. Help your client access these activities if they are out.

Prospective LGBT clients will listen to the language you use. Keep your questions open-ended; instead of asking about husbands or wives, ask whom they consider family. If your residents are open-minded and your LGBT clients willing, ask the LGBT clients to share coming out stories.

### Facts about the LGBT Continuum

Human beings experience a wide continuum of sexual practices and lifestyles. They range between completely homosexual behavior and completely heterosexual behavior, with many people falling somewhere within the gradient.

Below are some social-sexual patterns that many gay, lesbian and bisexual people experience during a lifetime:

1. Heterosexual marriage with or without a period of homosexual relations, following or followed by living as a gay person.
2. Celibacy with a homosexual affectionate orientation
3. Having and raising children, including adoption.
4. Long term gay friend/lover relationship
5. Living as LGB or T with no long-term sexual relationship
6. Bisexual life without marriage

From an article titled *An Invisible Population: Old Lesbian, Gay, Bisexual and Transgender Individuals*, 2003



## **Nursing Staff**

Because nurses and CNAs want to find ways to make their clients comfortable, they naturally talk to people about their lives. As a caregiver, it is always good practice not to assume anything about their lives.

For instance, if you know a client was once married to a person of the opposite sex, don't assume that the most significant person in his or her life was or is that spouse. If clients state that they are single on a form, don't assume they aren't currently in a significant relationship or never had a long-term relationship. Instead, ask open-ended questions, such as "Who do you consider family?" or "Who do we speak to about care concerns?" Let them know that you are accepting and open-minded.

### **Staff Training**

Staff turnover makes it difficult to assure proper training in all aspects of care. The Project Visibility film comes in a 13-minute and a 21-minute version. Putting LGBT training on the checklist of subjects for all new personnel helps establish a safe and inclusive environment for all.

### **Care Planning**

In care-planning meetings, encourage staff to incorporate sensitivity to and awareness about a client's sexual orientation or gender identity. Nursing and social services should be communicating about family issues as well as care issues. Someone on staff needs to be designated as an LGBT advocate insuring that facilities and agencies gain expertise and confidence in providing sensitive care for LGBT clients.

Also, in all situations, be sure to obtain permission to put in a person's sexual orientation or non-traditional gender identity or expression in their files. Usually, you will find that an elder will want to be out to a particular staff person(s) and not be out to everyone.

### **What We Have Learned**

Our experience in the aging field tells us that in general, providers have a one-dimensional view of older adults. As the Boomers age and become vocal, this may change.

Most providers aren't comfortable discussing a client's sexuality, much less a client's sexual orientation or gender identity or expression. Often, providers do not consider or address it. Even providers who are LGBT themselves often do not think of their older clientele population as including lesbians, gay men, bi, or trans-gender people.

What we do know, and what the research supports, is that many LGBT older adults are fearful of going into a facility or even of receiving care in their own homes. They are afraid of being discovered. They fear being misunderstood. They fear ridicule, neglect, and even violence.

## Legal Issues

Because of watershed equality gains in 2013 and 2014, and ultimately the marriage equality decision by the United States Supreme Court on June 26, 2015, same-sex couples now receive unprecedented federal benefits. *Cautionary notes:* Civil Unions are not the same as marriages. Changes at large governmental agencies may take time to implement. Unmarried couples and single LGBT people should still create wills and dictate end-of-life wishes to strengthen their cases against possible challenges by biological relatives. If you are an LGBT individual, always contact a qualified attorney in your state for legal advice about your particular situation.

### **Social Security: good news**

Historically, the unequal treatment of same-sex couples by the Social Security Administration has cost LGBT seniors money they could use to help secure their retirement, as the higher amount of social security between spouses is paid to the surviving spouse and LGBT people could not be legal spouses. As of Dec. 13, 2013, the SSA began processing claims from widows and widowers of same-sex marriages, based on state of residence, not celebration. Policies are being finalized.

### **Medicaid: some more good news**

Medicaid has exemptions to avoid requiring a healthy heterosexually-married partner to sell a shared home or to live in poverty to qualify a spouse for long-term care. Traditionally, an LGBT partner could lose his or her house if their partner needs to go to a nursing home and is in the process of spending down assets to qualify for Medicaid. In 2011, Health & Human Services (HHS) instructed States that they are empowered to treat same-sex partners the same as married heterosexual couples regarding protection from "spousal impoverishment" under Medicaid.

### **Federal Gift Tax Law: even more good news**

August 29, 2013, the IRS ruled that same sex couples who are legally married in any state will be treated as married for federal tax purposes, regardless of whether or not the state where they reside recognizes same-sex marriages. That means that the marital exemption for lifetime gifts between spouses is now available for legally married LGBT partners.

### **Inheritance and end-of-life planning: Plaintiff Edie Windsor defeats DOMA**

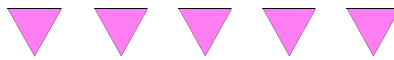
Since the fall of DOMA on June 26, 2013, LGBT married couples receive equal treatment with respect to federal inheritance taxes: a couple's estate transfers to the 'second to die' without taxes. While the creation of end-of-life documents is still highly recommended, in theory, married LGBT couples should be able to make spousal care decisions in times of need even without having a will etc. Heterosexual partners (even unmarried) are typically granted such rights automatically.

### **Veterans Benefits: still more good news**

Sept. 4, 2013: The Obama administration issued a letter stating, that, in the wake of the fall of DOMA, Title 38 of the U.S. code which governs veteran benefits (and stated that spouses are only opposite sex) is no longer valid. Some of the spousal benefits allocated under Title 38 concern disability, taxes, green card application, survivorship, insurance, and joint burial at a veteran's cemetery. Benefits extend to couples married in any state that allows gay marriage.

## Recommended Estate Planning Documents for LGBT Individuals

- **Living Will** – Gives personal wishes about types of care.
- **Healthcare Power of Attorney** – Names someone to make health care decision when incapacitated.
- **Advance Directive** – Includes both of the above.
- **Durable Power of Attorney** – Appoints a person of your choice for financial decisions.
- **Will** – Passes your wealth according to your wishes upon death.
- **Trust** – Revocable and Testamentary can avoid probate and will challenges.
- **Designated Beneficiary Agreement** – In Colorado, two unmarried persons can give rights to one another.
- **Hospital Visitation Directive** – List of people who you are allowing to visit.
- **HIPAA Release for Medical Records** – Instructs providers with whom to share medical information.
- **Declaration of Disposition of Last Remains** – Names the person you choose to dispose of your remains.



## Eight Laws that Extend the Rights of LGBT Coloradoans

- **Employment Nondiscrimination:** - Illegal to consider or inquire about sexual orientation or gender identity when hiring. The law applies to all employers, labor organizations, vocational training and schools.
- **Hate Crimes Protections** – Involving crimes committed against a person because of perceived race, color, religion, ancestry, national origin, physical or mental disability, or sexual orientation or gender status.
- **Housing and Public Accommodations Nondiscrimination** – Illegal to discriminate against anyone based on perceived or actual sexual orientation or gender identity in schools, hotels, restaurants, stores, hospitals, clinics, health clubs, and all types of housing, both public and private.
- **Second-Parent Adoption** – Enables unmarried couples to adopt one another's children.
- **Designated Beneficiaries** – Effective July 1, 2009, two adults who cannot be married to make each other a decision maker in case of incapacity of the other.
- **Domestic Partnership Beneficiaries for State Employees** – health insurance to partners.
- **Colorado Civil Unions Act:** Effective May 1, 2013, creates a legally recognized relationship between two eligible people.
- **Same-Sex Marriage:** Effective Oct 7, 2014, two same-sex adults can marry in Colorado.

## Conclusion

We know this manual presents a lot of information all at once. Take time to absorb and integrate its concepts and facts. Meanwhile, if you can remember these basic tenets, you'll have made a great start:

1. LGBT elders are afraid of being vulnerable to insensitive service providers. They fear ostracism, discrimination, ridicule, neglect, and violence.
2. Service providers have the power and the responsibility to allow everyone to feel secure. Here's how you can help make LGBT elders feel more secure:
  - Don't make assumptions
  - Use inclusive language, such as gender neutral pronouns or spouse vs. husband
  - Ask open-ended questions
  - Create an LGBT-friendly environment
  - Use the tool kit provided
  - Affirm elder/resident rights
  - Repeat a Project Visibility training periodically; share with colleagues and friends. Visit [www.projectvisibility.org](http://www.projectvisibility.org) for further information.
3. In every aspect of care, from the admissions process to the care plan, there is an opportunity to practice this awareness.

Questions? Please contact Boulder County Area Agency on Aging

Boulder County Area Agency on Aging  
LGBT Programs  
P.O. Box 471  
Boulder, Colorado 80306  
[infoLGBTelders@bouldercounty.org](mailto:infoLGBTelders@bouldercounty.org)  
LGBT office: 303-441-3583 or Help Line: 303-441-1617  
[www.projectvisibility.org](http://www.projectvisibility.org)



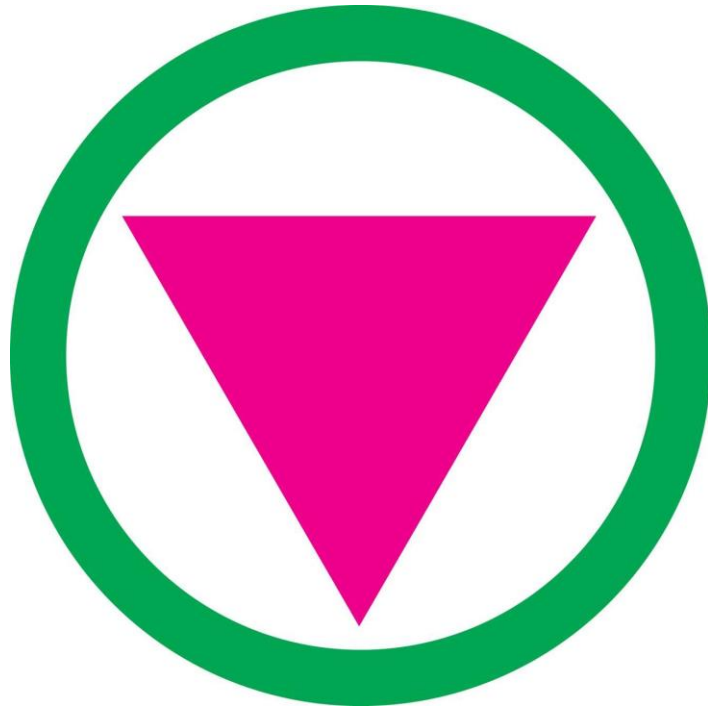
<sup>2</sup>

<sup>2</sup> [http://en.wikipedia.org/wiki/LGBT\\_symbols](http://en.wikipedia.org/wiki/LGBT_symbols)

# TOOLKIT



# Inclusive Space



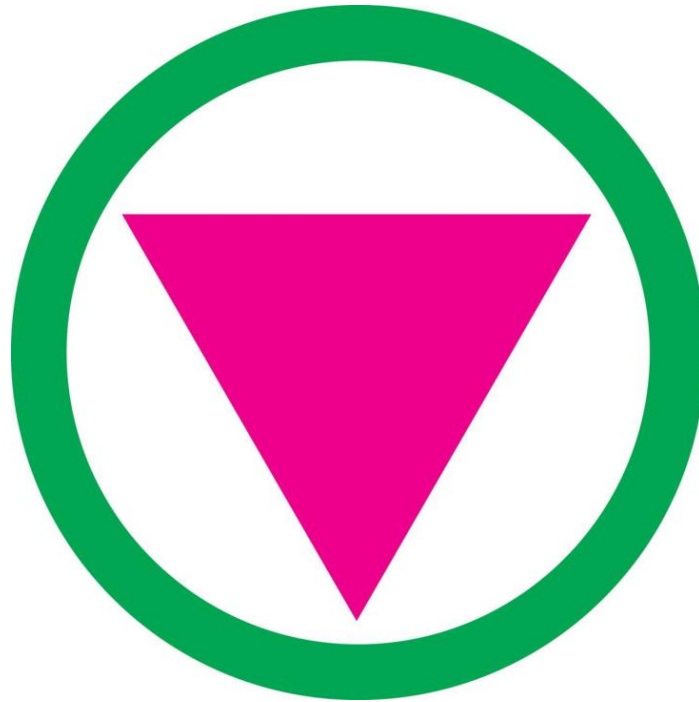
This space  
***RESPECTS***

all aspects of people including age, gender, race, ethnicity, religion/no religion, national origin, language, education, marital status, body size, political affiliation/philosophy, sexual orientation, gender identity/expression or variance, physical and mental ability, social-economic status, genetic information and HIV and veteran status.



*This INCLUSIVE SPACE poster was originally created by Boulder County Public Health. To request more posters, please call Boulder County Area Agency on Aging, 303-441-3583.*

# Espacio Inclusivo



En este lugar se  
***RESPETA***

íntegramente a la persona incluyendo edad, raza, origen étnico, sexo, ideología u opinión política, religión/ninguna religión, nacionalidad, idioma, nivel de educación, estado civil, orientación sexual, identidad de género, aspecto físico, expresión personal, habilidad física y mental, estatus socio-económico, información genética y estado VIH, y condición de veterano de guerra.



*Este cartel de Espacio Inclusivo fue creado originalmente por el Departamento de Salud Pública del Condado de Boulder. Para solicitar más carteles, favor llamar a la Agencia del Area del Envejecimiento del Condado de Boulder, 303-441-3583.*



## Check List of Practical Solutions: Does Your Organization Do This?

### Creating an Inclusive Infrastructure

- ✓ Agency procedures and policies are LGBT inclusive for residents *and* staff
- ✓ Forms have inclusive language. The word “partner” is an option along with “married” and “single,” or “Do you have a primary relationship?” or “Who do you consider family?” or “Who will be coming to see you?”
- ✓ Admission forms explain how confidentiality is protected and who accesses medical records.
- ✓ A system is in place and enforced to maintain confidentiality of client records.
- ✓ Human resource policies include an LGBT non-discrimination policy for hiring and acknowledging partners.
- ✓ Care conferences and records have open-ended and LGBT-inclusive questions.
- ✓ Marketing materials contain a non-discrimination policy that includes sexual orientation and gender identity and expression.
- ✓ Your agency/services are listed in LGBT publications and local resource guides.
- ✓ Representatives from your organization or your practice speak to LGBT organizations and conferences.
- ✓ Your organization provides staff training on LGBT cultural competency and LGBT elder concerns.

### How to create a welcoming environment:

- ✓ Post a non-discrimination policy in your waiting room or office that includes sexual orientation and gender identity and expression.
- ✓ In your lobby and waiting area, include magazines, brochures, and resource guides of interest to LGBT elders.
- ✓ Have LGBT-friendly referrals available if you are unable to serve a client.
- ✓ Treat friends and/or partners accompanying an LGBT client with the same respect given to a spouse or relative.

### Develop effective everyday communication skills:

- ✓ **Don’t assume anything.** Do not assume heterosexuality, even when a client reveals they are or have been married or have children and/or grandchildren.
- ✓ Let the client give information at their pace.
- ✓ Ask only what is needed to provide competent care/service.
- ✓ Explain why you need certain sensitive information before asking for it.
- ✓ Apologize if a client is offended by what you ask.
- ✓ Be willing to accept only vague references about a client’s personal life.

- ✓ Talk to colleagues who are LGB or T or who have experience with LGBT clients.
- ✓ Continually educate yourself and staff on LGBT issues by reading, attending conferences, lectures, or LGBT-related events, inviting guest speakers, etc.

**Ask open-ended questions such as:**

- ✓ Tell me about your living situation. With whom do you share the household?
- ✓ Are you currently in a relationship? Tell me about that.
- ✓ Where do you get your support? Who do you turn to in time of need?
- ✓ What people are important to you? Who do you consider to be family?
- ✓ Is there someone you would like to have involved in your care?

**Use gender-neutral language**

- ✓ Use gender-neutral terms when you do not know the gender of a client's significant other.
- ✓ If a client is using gender-neutral language, they **may** be trying to conceal their sexual orientation.
- ✓ If you think a client is using gender-neutral language to conceal their sexual orientation from you, do not assume they don't want you to know; however, do not assume that they are asking you to probe further.
- ✓ If a client uses terms that many think are derogatory to describe themselves (e.g., fag, dyke, etc.) do not assume it is okay to use these terms. Also, do not assume that these terms have derogatory meaning to all clients. **Ask what terminology the client prefers.**

## **Sample Inclusiveness Statement**

### **OUR POLICY**

*We are committed to providing the highest quality of personal service  
to all individuals, regardless of:*

**Age**  
**Race**  
**Ethnicity**  
**Gender**  
**Religion or No Religion**  
**National Origin**  
**Language**  
**Education**  
**Political affiliation/philosophy**  
**Marital Status**  
**Sexual Orientation**  
**Gender Identity, Expression, or Variance**  
**Physical or Mental Ability**  
**Body Size**  
**Genetic Information and HIV Status**  
**Veteran status**  
**Socio-economic Status**

## Sample Inclusive Intake Form

Here is an example of a way to update your forms that will immediately tell any LGBT prospect that you are inclusive. While these types of questions may be considered too personal for today's more closeted seniors, you can be ready for the onslaught of much more out Boomers! Credit goes to One Colorado's LGBT health survey: <http://www.one-colorado.org/>.

Instead of Married/Widowed/Divorced/Separated, consider "Who is your family?"  
or

What is your current relationship status? (Select all that apply)

- ☐ Solo
- ☐ Partnered with someone of the same sex
- ☐ Partnered with someone of a different sex
- ☐ Married to a same-sex partner or in a civil union
- ☐ Married to a different-sex partner
- ☐ Other (please specify, or not...):

Instead of Male/Female, consider:

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

- ☐ Male
- ☐ Female
- ☐ Transgender
- ☐ Gender variant
- ☐ Gender queer (likely few of our current elders would use this identifier...!)
- ☐ Transman
- ☐ Transwoman
- ☐ Other (please specify):

How do you identify your sexual orientation? (Select all that apply)

- ☐ Gay
- ☐ Lesbian
- ☐ Bisexual
- ☐ Queer
- ☐ Heterosexual
- ☐ Other (please specify):

# Trans Etiquette

by Matt Kailey, [www.tranifesto.com](http://www.tranifesto.com)

1. **Treat trans people as you would treat anyone else** – Don't do things to call attention to trans people, even if your goal is to let them know that you accept them. No winking, smiling, little innuendoes, mentioning trans people you know or asking trans people if they know so-and-so who is trans – they might, but they probably don't.
2. **Use the correct pronoun** – The correct pronoun is whatever gender the person is presenting. A male crossdresser is "he" when dressed as a male and "she" when dressed as a female. If you are unsure of which pronoun to use, ask – but there is no need to ask if traditional masculine or feminine appearance and behaviors are being presented.
3. **If you make a mistake with a pronoun or name, move on** – Don't make a big deal out of it. If you are alone with the person, apologize and drop it. If you are in a crowd, move on. Don't draw attention to your slip-up by making a face or groaning, falling all over yourself to apologize, or making excuses to others around you. Let it go.
4. **Don't say, "I'll never get that pronoun (name) right."** – When you say this, you are saying, "I don't care enough to try." One thing that helps is to see the person as an entirely new and different individual instead of a man that you now have to call "she" or a woman that you have to call "he."
5. **Don't say, "You will always be a man (or woman) to me" or "I still see the man (woman) in you."** – Again, you are saying, "I don't care enough or respect you enough to see who you really are," "My feelings are more important than yours or "I don't recognize you as a person."
6. **Don't touch the person inappropriately or ask personal questions unless you are invited to do so** – Trans people are not public property. Touching something on a person to see if it is real or asking personal questions about a person's body or sex life is inappropriate. Do not do or say anything that you would not do or say to anyone else.
7. **Don't "out" a trans person** – If you see a person on the street that you know to be trans, it is a private matter and not appropriate to tell your friends that the person is trans. It is also not appropriate to mention anything that would "out a trans person if you are with that person in a public setting.
8. **Remember that trans people do not always want to talk about being trans** – Trans people have many and varied interests, just like everyone else. And trans people are not responsible for educating you or giving you advice about a friend, coworker, or family member who is or might be trans. General conversation is always appropriate.

**Use common sense and respect and you will be fine.**

## **Aging Bisexuals – What’s Your BiQ?**

*By Terri Clark, MPH, CHES ©2012*

Misinformation and myths abound for bisexuals. Here are some common questions asked about bisexuals and bisexuality.

### **Q. What is bisexuality?**

When it comes to defining bisexuality, senior (and not so senior) bisexuals may embrace varying definitions (if they use the label at all), for example: Someone who is capable of feeling romantic, spiritual, and/or sexual attraction for two (or more) genders; a person who loves despite gender; one who loves individuals first and genders second; one who is open to sexual or emotional exploration with more than one gender.

### **Q. I hear a lot about lesbian and gay people, but I rarely hear about bisexuals. Why is that?**

Bisexuals (young and old) have been underrepresented in research, media and the arts. For the most part, we are merged into the discussions of gay and lesbian aging. Issues confronting older lesbian and gay men do overlap with the experiences of older people who are bisexual, but only partially. Our aging services and community providers have bisexuals accessing services even if they don’t realize it. The pervasive invisibility of bisexuality has given us few or no role models, let alone an identity for who we are.

### **Q. I’ve heard that bisexuals are really gay or lesbian. Is that true?**

Bisexuals are rarely seen. When a bisexual falls in love, they sometimes begin to identify (publicly or privately) as lesbian, gay, or heterosexual, and thus are invisible as a bisexual person. For example, a woman with a male partner is presumed to be straight; if with a female partner, assumed to be lesbian; a woman or man alone, probably heterosexual. If they are in a “gay venue”, they are probably presumed to be gay, rather than bisexual. The world is not black and white. It is this myth that all things fall into either gay or lesbian that keeps many people from understanding bisexuals and bisexuality.

### **Q. I grew up decades ago and never heard of the word “bisexual”.**

The term bisexual was not fully embraced until the gay rights movement was well underway and bisexuals were coming out as part of the Pride movement. Many seniors have never heard the word bisexual. Everyone now over 50 became an adult when the American Psychiatric Association (APA) still listed homosexuality as a mental illness. The APA never officially classified or declassified bisexuality.

### **Q. Can bisexual seniors “pass” as heterosexuals so they don’t face the same discrimination as gay or lesbian seniors might face?**

Gay and non-gay folks often reject bisexual seniors as fence sitters or for using heterosexual privilege and passing as straight when convenient. To deny your bisexuality is just as painful and damaging for a bisexual as it is for gay or lesbian seniors to live in (or go back into) the closet.

*Terri Clark, MPH, CHES is an accomplished program planner, trainer and facilitator with expertise in LGBT issues, HIV prevention, and sexuality. She can be reached at [tclark@actionaids.org](mailto:tclark@actionaids.org) or 917-204-7883.*

## HIV/AIDS Information Sheet

*Why HIV/AIDS is of concern to those who care for elders:*

- HIV (Human Immunodeficiency Virus) is a retrovirus that leads to the breakdown in the immune system.
- Unchecked HIV will progress to AIDS (Acquired Immune Deficiency Syndrome). Currently, there is no cure for AIDS.
- HIV is transmitted through the exchange of body fluids, and is not communicable through casual contact. Older women at higher risk: vaginal dryness, cells break, HIV enters.
- In the U.S. more than 1.1 million people are estimated to be living with HIV/AIDS, representing a slight increase over time. (CDC). By 2017, half of HIV-infected individuals will be 50 years or older.
- People of color in the US have been disproportionately affected by HIV/AIDS since the beginning. For example, the AIDS case rate per 100,000 African Americans in 2007 was more than 9 times that of whites; Latinos are 5 times' whites. Of U.S. women over age 50, 11% are African American, yet they have 65% of all HIV infections among older women. (CDC). The prison population has 4 times the infection rate as the general population.
- Gay and bisexual men accounted for an estimated 53% of infections in 2006, and are the only group for which new infections are on the rise. (CDC)
- HIV/AIDS patients are living longer, more functional lives. More than 9% of all Colorado residents diagnosed with AIDS are age fifty or older. (COLTCO/*The Legal Center*)
- Improvements in treatment have led to people with HIV disease living longer. It is expected that the number of people living with HIV/AIDS over the age of sixty will increase.
- Symptoms of HIV disease, like fatigue and weight loss, may be erroneously attributed to aging in an older adult, leading to misdiagnosis.
- Older adults are often diagnosed with AIDS in a later stage of the disease and may die sooner than a younger HIV/AIDS patient.
- Under the Americans with Disabilities Act, nursing homes are defined as public accommodations and cannot refuse to admit people because of their HIV/AIDS status.
- People with HIV/AIDS are protected against discrimination in housing under the federal Fair Housing Act (FHA).
- Facilities that receive Medicare, Medicaid, or Hill-Burton funds may not discriminate against persons with disabilities, as covered under Section 504 of the Rehabilitation Act of 1973.

## A Brief, Beginning Guide to LGBT Culture

Here are some ideas of the kinds of things you could include in your organization's library to indicate LGBT inclusivity, circa 2012. Ask your residents and clients to suggest their favorites.

### **LGBT-positive Movies that seniors might appreciate, including documentaries.**

And the Band Played On	Gen Silent	Priscilla, Queen of the Desert
Before You Know It	Gods and Monsters	Steam: The Turkish Bath
Before Night Falls	If These Walls Could Talk 2	Stonewall
Before/After Stonewall	Imagine Me and You	Strawberry and Chocolate
Beginners	Intersexion	Tales of the City
Better Than Chocolate	Jeffrey	The Dresser
Billy Elliot	Kiss Me Guido	The Times of Harvey Milk
Boys Don't Cry	Kiss of the Spider-Woman	The Kids are All Right
Boys in the Band	Kissing Jessica Stein	The Times of Del Martin & Phyllis
Brokeback Mountain	Lianna	Lyon
Cabaret	Longtime Companion	To Wong Foo, Thanks for
Cloudburst	Love! Valour! Compassion!	Everything!
Crying Game	Ma Vie en Rose	Torch Song Trilogy
Desert Hearts	Milk	Transamerica
Eddie and Thea	My Beautiful Launderette	Victor/Victoria
Faces & Facets of Transgender	Object of My Affection	The Wedding Banquet
Experience	Philadelphia	We Were Here
For My Wife		Wilde

---

### **Music**

Judy Garland  
Ethel Merman  
Broadway show tunes  
Opera  
Indigo Girls  
Holly Near  
Ronnie Gilbert  
Cris Williamson  
k.d. lang  
Rufus Wainwright  
Anything from Olivia  
Records  
Melissa Ethridge  
Elton John  
Meg Christian  
Margie Adam

### **Events/People/Places**

Pride parades  
Womyn's music festivals  
Drag balls  
MCC Church  
Dinah Shore Golf Classic  
Provincetown  
Key West  
Fire Island  
Palm Springs  
Greenwich Village  
San Francisco's Castro  
Olivia Vacations  
RSVP Vacations  
Ellen DeGeneres  
Rosie O'Donnell  
Kate Clinton

### **Magazines**

The Advocate  
Curve  
Out Magazine  
Lesbian Connection  
Lambda Literary Report

### **TV Shows**

Will and Grace  
Queer As Folk  
The L Word  
Ellen (April 30, 1997 Ellen comes out, a pivotal moment on TV)  
Orange is the New Black (Netflix)



## Books

There are thousands of fiction and non-fiction books about LGBT life and concerns. Here is a sampling of some, circa 2008.

*And the Band Played On: Politics, People, and the AIDS Epidemic*, non-fiction by Randy Shilts

*Angels in America*, a play by Tony Kushner

*Bastard Out of Carolina*, fiction by Dorothy Allison

*Becoming a Man*, a memoir by Paul Monette

*Chloe Plus Olivia: Anthology of Lesbian Literature*, Lillian Faderman, editor

*Dykes to Watch Out For*, a comic series by Alison Bechdel

*Fun Home*, a graphic memoir by Alison Bechdel

*Gay American History*, Jonathan Ned Katz, editor

*Giovanni's Room*, by James Baldwin

*Hidden from History: Reclaiming the Gay and Lesbian Past*, edited by Martin Duberman

*Is It A Choice?* non-fiction Q&A by Eric Marcus

*Maurice*, a novel by E.M. Forster

*Memory Board* by Jane Rule

*Orlando* by Virginia Woolf

*Rubyfruit Jungle*, Rita Mae Brown

*Stone Butch Blues*, Leslie Feinberg

*Tales of the City*, a series by Armistead Mauphin

*The Color Purple*, by Alice Walker

*The Well of Loneliness*, a 1920s lesbian fiction classic by Radclyffe Hall

*This Bridge Called My Back, Writings by Radical Women of Color*, by Cherrie Moraga and Gloria Anzaldua, editors

*Zami: A New Spelling of My Name*, an autobiography by Audre Lorde

Any book by Katherine V. Forrest (romance and mysteries)

Lesbian-focused presses: Firebrand, New Victoria, Naiad, and Bella Books

# APPENDIX I

## Glossary of LGBT Terms and Acronyms

**Acquired Immune Deficiency Syndrome (AIDS)** The last stage of the infection from Human Immunodeficiency Virus (HIV) that attacks a person's white blood cells. This means they can no longer fight off sickness and disease.<sup>3</sup>

**Ageism** The practice of stereotyping or discriminating against people because of age, most often elders or youth. Institutional ageism shows up as poor policies that belittle people based on age.

**Ally** For our purposes, one who is an advocate for and friend of the LGBT community.

**Bisexual** A person who is or may be romantically and sexually attracted to men or women.

**Butch** A person who identifies as masculine, whether physically, mentally or emotionally. Butch has been a derogatory term for a lesbian, but it can also be used positively.

**Cisgender** A person whose gender identity matches their physical body. For example, a person born as female who identifies as female and feels like a woman; could be heterosexual, bisexual, gay or lesbian.

**Cisgender privilege** Benefits given to cisgender individuals that can be denied to transgender individuals. The list includes being called by the proper pronoun; safe, competent and confidential medical treatment; the ability to find appropriate clothes that fit; unquestioned access to sex-segregated facilities, like bathrooms, locker rooms, shelters or prisons; job protection.

**Closeted or "in the closet"** A person who is not open about his or her sexual orientation or gender identity.

**Come Out** To declare to oneself and/or publicly affirm one's lesbian, gay, bisexual, or transgender identity, sometimes to one person in conversation, and sometimes by an act that places one in the public eye. Coming out is not a single event, but a lifelong process. In each new situation, a gay man or lesbian must decide whether or not to come out.

**Crossdresser** Sometimes called a transvestite. Typically men (mostly heterosexual) who sometimes wear traditional opposite-gender clothing for personal reasons. Some women cross dress also.

**Drag** Usually refers to the clothing associated with one gender when worn by a person of another, as in Drag Queen (man dressing as feminine) or Drag King (woman dressing masculine). Often used for theatrical effect.

**Dyke** A term used to describe a more masculine-looking lesbian, often in a derogatory context. Some lesbians have reclaimed the word as an affirmation.

**Faggot/Fag** A derogatory term used to describe boys or men who may exhibit feminine attributes, or attraction to men.

---

<sup>3</sup> National Resource Center on LGBT Aging "Inclusive Services Guide" p.26

**FTM/F2M** Abbreviation for female-to-male transgender person.

**Gay** One of several terms applied to gay, lesbian, (and sometimes bisexual) people that has been adopted by them as a sign of pride. While “gay” is sometimes used to refer to both men and women, technically, it refers to men. A gay man has emotional, social, psychological, and physical attachments and responses to other men.

**Gay Man** The preferred term for a man who is sexually attracted to other men.

**Gender Binary** The idea or belief that there are only two genders (male/female) and that a person must fit into one or the other.

**Gender Identity** Relates to whether a person sees oneself as male or female, as neither male nor female, or as a combination of both. This may or may not agree with others’ perceptions of this person or of their physical body.

**Gender Expression** An individual’s characteristics and behaviors such as appearance, dress, mannerisms, speech patterns, and social interactions that are perceived as masculine or feminine.<sup>4</sup>

**Gender Normative** A person who conforms to societal gender based expectations.

**Gender Nonconforming or Variant** A person who is or is perceived to have gender characteristics and/or behaviors that do not conform to traditional or societal expectations. Gender nonconforming people may or may not identify as lesbian, gay, bisexual, or transgender.<sup>5</sup>

**GLBT** Acronym for gay, lesbian, bisexual, and transgender.

**GLBTQIA2-S** Acronym for gay, lesbian, bisexual, and transgender, with the Q standing for *queer* or *questioning* (usually applied to youth), I for *intersex*, A for *allies*, and 2-S is *two-spirit*

**Heterosexism** –The institutionalized assumption that everyone is or should be heterosexual, with its accompanying benefits. It can affect the language we use on intake forms and the icebreaker questions we ask. For example: “Is your husband/wife still alive?”

**Heterosexual** A man attracted to a woman or a woman attracted to a man.

**Heterosexual Privilege** Benefits automatically granted to heterosexual people, which are denied to LGBT people. Before the ground-breaking 2015 marriage equality decision, these privileges included, for example: automatic access to loved one in the hospital; Social Security survivorship benefits; Family and Medical Leave Act benefits to care for a spouse, children, or in-law; and foreign spouse citizenship. It still includes the general societal sanction for affection and intimacy between heterosexual partners; same-sex partners can be subject to ridicule and even violence.

**Hir/Ze** Examples of gender neutral pronouns, used instead of his or her. For example: “Ze made a good point during hir talk.”

**Homophobia** A fear of or discomfort with gays, lesbians, and bisexuals or with things associated with LGBT people and their lives. These attitudes are based on a lack of knowledge and on cultural conditioning. Homophobia may also be manifested as a fear of being perceived as

---

<sup>4</sup> “Invisible: The State of LGBT Health in Colorado.” One-Colorado Education Fund. 2012. P.3.

<sup>5</sup> Ibid.

lesbian, gay or bisexual, the fear of one's own attraction for members of the same gender, or the fear of being gay, lesbian, or bisexual. For example, homophobia is:

- Looking at a gay male or lesbian and automatically thinking of their sexuality, rather than seeing him/her as a whole, complex person.
- Not asking about a gay man/lesbian's lover although you regularly ask, "How is your husband/wife or boyfriend/girlfriend?" when you run into a heterosexual friend.
- Feeling repulsed by public displays of affection between gay men or lesbians, but accepting the same affectionate displays between heterosexuals as O.K.
- Stopping a conversation when you ask someone if they're married and they say, "No, I have a partner." Or you ask where they work and they say "I'm an LGBT activist."
- Not confronting a heterosexist or homophobic remark for fear of being identified with gay men/lesbians.

**Homosexual** A person whose sexual and emotional orientation is toward members of the same sex; a person who has emotional, social, psychological, and physical commitment and responses to members of the same sex.

**Internalized homophobia** The experience of shame, aversion, or self-hatred in reaction to one's own feeling of attraction for a person of the same sex. Among seniors, this may take the form of self-neglect, isolation, and/or depression.

**Internalized transphobia** The experience of feeling shame, aversion, or self-hatred in reaction to one's own sense of being transgender.

**Intersex** (including people formerly called hermaphrodites) Relating to persons having both male and female sexual characteristics, this may be noticeable at birth or may become apparent after puberty. This may include physical or genital ambiguity, chromosomal ambiguity, or discrepancies between physical and chromosomal sex characteristics.

**Lesbian** A woman who is emotionally, socially, psychologically, and physically attracted to other women. "Lesbian" is one of the oldest terms for women who are attracted to women, derived from the name of a Greek island, Lesbos, where the lesbian poet, Sappho, had a school in 400 B.C.

**LGBT** Acronym for lesbian, gay, bisexual, and transgender.

**Lipstick Lesbian** Usually refers to a lesbian with a feminine gender expression. Can be used in a positive or a derogatory way, depending upon who is using it. May also be used to refer to a lesbian who is seen as automatically passing for heterosexual.<sup>6</sup>

---

<sup>6</sup> <http://www.lgbt.ucla.edu/documents/LGBTTerminology.pdf>

**MTF/M2F** Abbreviation for male-to female transgender person

**Outing<sup>7</sup>**

The act of publicly telling (sometimes based on rumor and/or speculation) or revealing another person's sexual orientation or gender identity without that person's consent. It is considered inappropriate by a large portion of the LGBT community, and can still be very damaging socially, personally, and/ or professionally to the individuals who are "outed."

**Pink Triangle** During World War II, the Nazis interred gay men and lesbians as well as Jewish people, gypsies, and others. In the concentration camps, each group was forced to wear a triangle insignia to mark them as a member of a particular group (Jews wore two yellow triangles forming a Star of David). Gay men were forced to wear a pink triangle to identify them as a group. Lesbians, wore a black triangle, the symbol of "social misfits."

Some have taken this very powerful reminder as an incentive for change. In recent decades, the pink triangle has become one of the most recognizable and powerful symbols for gay people and the oppression they have faced throughout Western history. The pink triangle was a commonly used insignia throughout the early gay liberation movements. It is a symbol of pride, resistance, and solidarity.

**Queer** A term that has historically been used as a derogatory term for LGBT persons. More recently, some LGBT persons have reclaimed the word to express inclusiveness and pride in the LGBT community.

**Rainbow Flag** A recognized symbol of the LGBT community. Use of the rainbow flag began in the 1970s. Today, it is recognized throughout the US and Europe as a symbol of LGBT pride. The six colors of the rainbow represent the diversity of the LGBT community, a community that encompasses people from all backgrounds, races, ages, and national origins and that spans the panoply of faiths and experience.

**Sexual Orientation** Refers to the gender (male or female) of the person someone is usually attracted to. A person may be attracted to of the same sex (lesbian or gay), of another sex (heterosexual), of either sex (bisexual), or multiple genders/sex (pansexual.)

**Sexual Reassignment Surgery (SRS)** A term used by some medical professionals to refer to a group of surgical options that alter a person's birth sex. Also known as "Gender Confirming Surgery."<sup>8</sup>

**Stealth** This term refers to when a person chooses to be secretive in public about their gender history, either after transitioning or while successfully passing. Also called "going stealth." Hormone replacement therapy is generally necessary to pass. For some transgender individuals, to not be recognized as a transgender person is the goal of transition.

**Stonewall & Pride Celebrations** On June 28, 1969, a routine raid on the Stonewall Bar on Christopher Street in New York City turned into a riot when marginalized homosexual and transgender patrons resisted expulsion and arrest. (Gay icon Judy Garland had committed suicide on June 22, 1969. Some say this was a contributing factor.) The riots continued for several nights.

---

<sup>7</sup> National Resource Center on LGBT Aging "Inclusive Services Guide" p.27

<sup>8</sup> <http://www.lgbt.ucla.edu/documents/LGBTTerminology.pdf>

This rebellion, begun by drag queens, butch lesbians, and primarily working-class bar patrons, marked the beginning of the modern gay and lesbian movement. Activists began organizing in New York, Chicago, and Los Angeles, each city hosting its first Gay Pride March in 1970. Each June, Pride marches, rallies, and celebrations are held throughout the nation and world commemorating Stonewall.

**Transgender** An umbrella term to describe the continuum of individuals whose gender identity and expression to varying degrees does not correspond with their genetic/biological sex. In its broadest sense, it includes those who choose to affirm an identity other than their biological sex (male-to-female and female-to-male transgender people), crossdressers, people who are gender variant to greater or lesser degrees, and intersex people.

**Transition** The process by which an individual changes their physical body (either surgically or by outward appearance only) to more completely match their internal gender identity

**Transphobia** The negative behavior expressed towards people who are of ambiguous gender or who are transgender. Transphobia manifests itself as employment and health care discrimination, physical and psychological violence, and general ignorance.

**Transsexual** People who have a strong sense of incongruity between their birth sex and their internal sense of gender identity. Often this term is applied specifically to those who seek or have had hormone treatments and surgery to bring their body into conformity with their experienced gender identity.

**Two-Spirit** A concept embraced by Native peoples to describe a person whose essence and physical appearance embodies a continuum of male and female gender roles.

## APPENDIX II

### LGBT History in the U.S. and Europe

#### BEFORE THE 20TH CENTURY:

Historical evidence indicates that gay, lesbian, bisexual, and transgender people have been with us since the beginning of recorded history and probably before.

**700-400 B.C.** The Greek lyrical poet Sappho lived on the island of Lesbos. Sappho, a woman, reportedly had women lovers. It was common for Greek men, including nobility, to have male lovers, and this practice was not frowned upon or seen as an indication of an identity other than heterosexuality.

**Pre-colonial America** In pre-colonial America, and in almost all cultures and religions, there have been individuals who performed the roles of keepers of the rituals, gatekeepers, mediators between gods and humans, between men and women, between the dead and the living. They were most often lesbian, gay, transgender or otherwise androgynous individuals. In Native American culture, they often have been referred to as 'two-spirit.'

**Colonial America** In the 1600s a Puritan minister, Michael Wigglesworth writes of his homosexual feelings in a secret diary.

**1700s and 1800s** romantic friendships between women, known as "Boston Marriages," are an accepted practice in the US.

**1860** Gay poet Walt Whitman publishes the second edition of *Leaves of Grass*.

**1870** The world's first gay periodical was published in Germany.

**1895** Writer Oscar Wilde is sentenced to two years of prison at hard labor for homosexual acts

**THE 20<sup>TH</sup> CENTURY** --- The beginning of the modern gay rights movement.

**1913** *O Pioneers!* is published by lesbian author, Willa Cather.

**1924** Henry Gerber starts the first gay organization in the US, The Society for Human Rights.

**1928** Radclyffe Hall publishes the first undisguised lesbian novel, *The Well of Loneliness*.

**1933** Adolf Hitler bans the gay press in Germany.

**1934** The Nazis begin sending perceived homosexuals to concentration camps where they are required to wear a pink triangle.

- 1947** *Vice Versa* becomes the first lesbian magazine.
- 1948** The Kinsey Report finds that 4% of men identify as exclusively homosexual, and 37% of all men report having had sexual relations with other adult males.
- 1951** The Mattachine Society begins in Los Angeles as a response to police harassment of homosexuals. This is a crucial early step in the early gay rights movement (then called the “homophile” movement).
- 1952** Christine Jorgensen becomes the most famous transgender person of her day with the first broadly publicized gender reassignment surgery (male to female.)
- 1953** Alfred Kinsey publishes a report on female sexuality in which he claims that 2% of women identify as exclusively homosexual and 13% of all women had participated in homosexual acts on at least one occasion.
- 1955** A lesbian organization known as the Daughters of Bilitis forms in San Francisco to promote community among and provide support for lesbians in the U.S.
- 1956** *The Ladder*, a lesbian magazine, begins publication.
- 1960** The Daughters of Bilitis hold the first national lesbian conference in San Francisco. American transgender activist and author Virginia Prince publishes the first issue of “Transvestia” magazine. Its readership is primarily male crossdressers.
- 1961** Illinois becomes the first US state to decriminalize homosexuality. Also, in 1961, drag entertainer Jose Sarria becomes the first openly gay candidate to run for elective office in the US, when he campaigns for the Board of Supervisors in San Francisco.
- 1963** The first gay rights picketers protest discrimination in the military.  
Gay civil rights leader and teacher of non-violent tactics, Bayard Rustin, orchestrates and leads Martin Luther King’s famous March on Washington DC.
- 1965** Gays and lesbians picket the White House and Pentagon over discrimination against homosexuals in hiring for jobs with the civil service.
- 1966** In San Francisco, the first gay community center opens its doors.
- 1967** CBS Reports airs the first nationally broadcast documentary on homosexuality in the US. The show, hosted by Mike Wallace, focuses on the challenges faced by homosexuals.
- 1969** On the night of June 27-28, the Stonewall Riots begin in New York City’s Greenwich Village. Occurring after a police raid of the Stonewall Inn and lasting three days, they are often referred to as the beginning of the “Gay Liberation Movement.” While clearly much



gay social civil rights work had taken place before then, the Stonewall Riots both accelerate and mark a turning point in the tenor of the movement.

**1970** One year after the Stonewall Riots, the first gay pride marches take place in Chicago, New York and Los Angeles to commemorate the event.

**1971** NOW (National Organization of Women) declares the oppression of lesbians a “legitimate” concern—the former “lavender menace” gains power.

The Metropolitan Community Church of Los Angeles becomes the first organization serving the LGBT community to own property in the US.

**1972** For the first time, an openly gay person is ordained by a major Christian denomination (United Church of Christ).

In another first, a gay person is elected to a public office (Ann Arbor City Council).

A gay-themed show, “That Certain Summer,” is the first of its kind to win an Emmy

East Lansing, Michigan becomes the first US City to ban discrimination in hiring based on sexual orientation.

**1973** The American Psychiatric Association removes homosexuality from its official list of mental disorders. The American Psychological Association follows in 1975.

**1974** Boston, Massachusetts resident Elaine Noble becomes the first open gay or lesbian person to be elected to a state legislature.

**1975** The Bisexual Forum is founded in New York City.

Clela Rorex, a county clerk in Boulder Colorado, gains national attention when she begins issuing marriage licenses to same sex couples. She contends there are no county laws preventing her from doing so. She is eventually forbidden to continue by the State Attorney’s Office. The licenses are not revoked.

**1977** The first official gay/lesbian delegation is received at the White House. Anita Bryant leads an anti-gay campaign in Florida that repeals a recently enacted non-discrimination ordinance in Dade County.

**1978** November 27th, San Francisco Mayor George Moscone and openly gay city council member Harvey Milk are murdered by Dan White. Massive demonstrations break out around the country when White is convicted only of voluntary manslaughter and sentenced to just 7-8 years in prison.

**1979** First National March on Washington March for Lesbian and Gay Rights draws 200,000.

**1980** New York becomes the twenty-fourth state to revoke its sodomy law.

- 1981** Wisconsin becomes the first state to pass a statewide gay rights bill.
- 1982** PFLAG (Parents and Friends of Lesbians and Gays) incorporates as a national organization.  
The first Gay Games are held in San Francisco, with gay and lesbian athletes participating from 28 states and 10 nations.
- 1983** Coretta Scott King comes out in support of gay rights. The HIV virus is identified.
- 1984** Berkeley, CA becomes the first US city to pass a domestic partner law.
- 1985** Actor Rock Hudson dies of complications due to AIDS.  
The US Supreme Court overturns an Oklahoma law banning homosexuals, or anyone defending homosexuals, from teaching in public school.
- 1986** Two lesbians in California become the first LGBT couple in the US to be granted joint adoption. In *Bowers v. Hardwick*, SCOTUS upholds a Georgia law forbidding sodomy between homosexuals, but does not indicate whether it applies to heterosexuals.
- 1987** The National March on Washington in support of Gay and Lesbian Rights draws 600,000. The number of people participating makes it the largest civil rights demonstration in the history of the US up to that time. *The Names Project* unveils the AIDS Memorial Quilt on the Capitol Mall in Washington DC. The AIDS Coalition to Unleash Power (ACT-UP) is founded in response to the U.S. government's slow response to the AIDS crisis.
- 1988** The first annual National Coming Out Day is celebrated on October 11.  
The Episcopal Diocese of Newark, New Jersey becomes the first church in the US to support and condone blessing relationships between gay and lesbian couples.  
Sweden becomes the first country to pass laws protecting homosexuals in matters of social services, taxes, and inheritance.<sup>9</sup>
- 1989** Denmark becomes the first country to create registered partnership laws for same-sex couples, with most rights of marriage included.
- 1990** The Hate Crime Statistics Bill passes Congress. The new law requires the collection of data on crimes motivated by prejudice against people because of their sexual orientation, as well as, race, ethnicity, or religion.  
The Ryan White CARE Act is passed. It is the largest federally funded program in the United States for people living with HIV/AIDS.<sup>10</sup>

---

<sup>9</sup> [https://en.wikipedia.org/wiki/Timeline\\_of\\_LGBT\\_history](https://en.wikipedia.org/wiki/Timeline_of_LGBT_history)

<sup>10</sup> [http://en.wikipedia.org/wiki/Ryan\\_White\\_CARE\\_Act](http://en.wikipedia.org/wiki/Ryan_White_CARE_Act)

- 1991** Amnesty International begins including, as prisoners of conscience, men and women jailed because of their sexual orientation.
- Lotus, a major publicly held US company, becomes the first to extend partner benefits to their LGBT employees.
- 1992** The University of Iowa, followed by the University of Chicago, extends domestic partner benefits to their gay and lesbian employees.
- Canada joins the majority of NATO countries in permitting military service by gays and lesbians. Bill Clinton becomes the first President to appoint open gays and lesbians to government positions.
- Colorado voters pass Amendment 2, which prohibits anyone from making a claim of discrimination based on sexual orientation, and repeals existing antidiscrimination ordinances in Aspen, Denver, and Boulder.
- 1993** The National LGBT March on Washington DC brings a record-breaking crowd of over one million. Colorado, now known as “The Hate State,” leads the march.
- Domestic partner benefits go into effect in New York City.
- Massachusetts becomes the first state to pass a law designed to protect gay and lesbian students in its public schools.
- “Don’t Ask, Don’t Tell” becomes law in the U.S. military.
- 1994** Deborah Batts becomes first open lesbian African-American appointed as a federal judge.
- The American Medical Association comes out in opposition to the supposed “medical cure for homosexuality.”
- 1995** President Clinton signs an executive order forbidding the denial of security clearances due to homosexuality.
- 1996** The Supreme Court of the United States declares Colorado’s Amendment 2 unconstitutional.
- The 7<sup>th</sup> US circuit court rules in favor of a youth that sued the Ashland Wisconsin School District. The youth, Jamie Nabozny, claimed his high school failed to stop the physical and verbal assaults directed toward him because of his homosexuality.
- A US District Court rules that the Pentagon’s “don’t ask, don’t tell” policy is unconstitutionally discriminatory.
- The Defense of Marriage Act (DOMA), which defines marriage as the union between one man and one woman, passes Congress. DOMA becomes the basis for all Federal laws relating to same-sex partnerships and ensures that no state will be required to recognize a same-sex marriage from another state. President Clinton signs the act.

- 1997** New Hampshire passes a law protecting LGB people from discrimination.  
Hawaii compromises on same-sex marriages by passing a domestic partnership law.
- 1998** Matthew Shepard's murder in Wyoming begins a renewed battle for hate-crimes legislation at the national level. Such legislation would include sexual orientation along with race, ethnicity, and religion.
- 1999** The Vermont Supreme Court holds that under the state constitution, the state must extend to same-sex couples the same benefits that married couples receive.

**THE 21<sup>ST</sup> CENTURY** --- the beginning is marked by the debate over same-sex marriage

- 2000** The Vermont Legislature creates the status of "civil unions" to fulfill the State Supreme Court's mandate made in the 1999 ruling.  
A female-to-male transsexual in Quebec Canada is granted the right to have his birth certificate sex designation changed from female to male.
- 2001** The Netherlands offers civil marriage to same-sex couples.
- 2003** Belgium and three Canadian provinces begin to allow same-sex marriages.  
The Massachusetts Supreme Court rules that gays and lesbians have a legal right to marry under the Massachusetts Constitution.  
The U.S. Supreme court strikes down the "Homosexual Conduct Law" (forbidding sodomy) in *Lawrence vs. Texas*. Equal protection, rights to privacy and liberty are cited.
- 2004** Massachusetts becomes the first state to legalize same-sex marriage.  
San Francisco city Mayor, Gavin Newsom, authorizes city clerks to grant marriage licenses to same-sex couples.
- 2005** Connecticut legislature is first to legalize civil unions without court mandate.  
Same-sex marriage, adoption by same-sex parents become legal in Canada and Spain.  
Maine adds sexual orientation and gender identity to existing anti-discrimination laws.  
Civil union law takes effect in Switzerland and New Jersey  
South Africa legalizes same-sex marriage.
- 2006** Pension Reform Act allows any person to designate any other person to receive the former's tax-deferred retirement plan and draw it down over time. This helps a younger, terminally ill woman who wants to give her retirement account to her nephew, as well as the single LGBT older person who wants to designate a life-long friend.

Updated language in the 2006 reauthorization of the Older Americans act expands the definition of caregiver to include LGBT chosen families.

Progress accelerates, as seven states enact relationship equality laws, and six states enact non-discrimination laws. Many states pass safe schools initiatives.

Colorado passes RIGHTS FIVE specifically aimed at the LGBT community, making Colorado one of the most equality-minded states in the nation. These laws cover both sexual orientation and gender identity concerning:

1. Employment Nondiscrimination
2. Housing and Public Accommodations
3. Hate Crimes
4. Second-Parent Adoptions
5. Designated Beneficiary Agreements

**2008** Marriage for same-sex couples is legal in CA for several months, until voters pass Prop. 8. Protests erupt nationwide. An injunction is filed.

Older Californians Equality and Protection Act mandates that the California Department on Aging and Area Agencies on Aging address LGBT older adults' needs by including them in needs assessments and area plans; providing LGBT cultural competency training to staff, contractors, and volunteers; and ensuring that all provided services are free of discrimination based on sexual orientation and gender identity.

**The Congressional LGBT Equality Caucus is established** in the U.S. House of Representatives by co-chairs Tammy Baldwin (D-Wi) and Barney Frank (D-Ma). The Equality Caucus serves as a resource for Members of Congress, their staff, and the public on LGBT issues at the federal level. The Caucus works toward the extension of equal rights, the repeal of discriminatory laws, the elimination of hate-motivated violence, and the improved health and well-being for all regardless of sexual orientation or gender identity and expression.<sup>11</sup>

**2009** Housing and Urban Development (HUD) issues new regulations prohibiting discrimination based on sexual orientation or gender identity in HUD rental properties and public housing.

Administration on Aging (AoA) funds a national LGBT resource center for three years. SAGE/New York receives the grant.

HUD commits to first-ever federal study on housing discrimination against LGBT people

Matthew Shepard/James Byrd Jr. Hate Crimes Prevention Act expands federal hate crime act to include sexual orientation and gender identity

The U.S. Census bureau announces inclusion of same-sex households in 2010 census.

---

<sup>11</sup> <https://lgbt-polis.house.gov/>

- 2010** Health and Human Services (HHS). The proposed regulation issued by the Centers for Medicare & Medicaid Services, based on an Obama mandate would require hospitals that receive funds under Medicare and Medicaid to allow patients during a hospital stay to designate a same-sex partner as a visitor.

SAGE launches the National Resource Center on LGBT Aging [www.lgbtagingcenter.org](http://www.lgbtagingcenter.org)

- 2011** The Department of Justice announces it will no longer defend DOMA (Defense of Marriage Act) in court

The state of New York passes marriage equality legislation

“Don’t Ask, Don’t Tell” is repealed, effective Sept. 20, 2011

Health & Human Services (HHS) instructs States that they are empowered to treat same-sex partners the same as married heterosexual couples regarding protection from "spousal impoverishment" under Medicaid.

The Presbyterian Church (U.S.A.) approved the ordination of gay and lesbian clergy, joining several other Christian denominations that also ordain gay and lesbian clergy.<sup>12</sup>

- 2012** The Ninth Circuit Court of Appeals rules that California’s Proposition 8 violates the US Constitution’s ‘due process and equal protection’ clause. Still pending.

President Obama announces his support of gay marriage, saying his views “have evolved.” The First U.S. Circuit Court of Appeals rules that the Defense of Marriage Act (DOMA) is unconstitutional, possibly setting up a Supreme Court challenge.

Maine, Maryland, and Washington pass gay marriage laws, bringing the state total to nine (ten with Washington D.C.), with domestic partnership or civil union laws in nine others. Minnesota voters defeat an effort to add a DOMA to their state constitution. North Carolina voters prohibit gay marriage or civil unions.

Gender Identity Disorder, a term long-used to stigmatize transgender individuals, was removed from the American Psychiatric Association’s *Diagnostic and Statistical Manual of Mental Disorders (DSM)*. The new diagnosis is Gender Dysphoria, which communicates the emotional distress that can result from “a marked incongruence between one’s experienced/expressed gender and assigned gender.” This will allow for affirmative treatment and transition care without the stigma of disorder.<sup>13</sup>

- 2013** Jan. 21, 2013: **Pres. Obama becomes the first U.S. president to mention gay rights in an inaugural address:** *"We, the people, declare today ...that all of us are created equal -- It is now our generation’s task to carry on what those pioneers began. For our journey is not complete until our wives, our mothers, and daughters can earn a living equal to their efforts. Our journey is not complete until our gay brothers and sisters are treated like anyone else under the law -- for if we are truly created equal, then surely the love we commit to one another must be equal as well."*

---

<sup>12</sup> <http://lgbtmap.org/file/momentum-report-2011.pdf> p.1

<sup>13</sup> Jim Davis Rosenthal, Ph.D. Director, Office of Orientation and Assessment, University of Colorado, Boulder

Feb. 12, 2013: President Obama references gay service people in his **State of the Union address**: "This year, I will work with Congress and our military to finally repeal the law that denies gay Americans the right to serve the country they love because of who they are." The Pentagon begins offering some benefits to same-sex couples.

**AIDS turns 30.** According to the CDC and Prevention, of the over 1 million Americans living with HIV, 31% are over the age of 50. Research indicates that by 2017, half of the people living with HIV in the U.S. will be over more than 50 years old, with 1.4 million cases projected.

**California bans reparative therapy** aimed at changing the sexual orientation of gay and lesbian youth. The ban was appealed, and was upheld by the 9<sup>th</sup> district federal court; a final appeal was rejected in 2014 by the U.S. Supreme Court. The ban stands.

May 1, 2013: **Colorado Civil Unions Act**: This new law creates a legally recognized relationship between two eligible people. For details, refer to the statute and always obtain independent legal counsel. <http://www.one-colorado.org/your-rights/civil-unions/>

June 26, 2013: **The Supreme Court of the United States strikes down the federal DOMA and dismisses California's Prop. 8.** The finding is based on broad violation of the equal protection clause of the 14<sup>th</sup> amendment which prohibits certain classes of people from receiving equal rights. (DOMA plaintiff, New York lesbian Edith Windsor, sought relief from taxes owed on her inheritance from longtime partner, Thea.) Gay marriage laws in 13 states and the District of Columbia now hold federal benefits, as the government scrambles to bring parity to all branches, including the military.

July 29, 2013: **Pope Francis** offers: "If someone is gay and he searches for the Lord and has good will, who am I to judge?"

August 9, 2013: In reaction to Russia's recent anti-gay policies, President Obama states he hopes gay and lesbian athletes will "bring home the gold" at the **2014 Sochi Olympics**.

Aug. 29, 2013: **IRS and Treasury Department** announce they will recognize all same-sex couples who are legally married, even if the state where they live does not recognize their union. Married gay couples are now required to file as married, though they have the option to file jointly or separately. Legally married gay couples who live in states that do not allow gay marriage must still file as single on their state returns. *Note*: Social Security is still using the "place of residence" standard, not the "place of celebration," making survivor benefits uneven for those who live in the 37 states not recognizing gay marriage.

Sept. 4, 2013: The Obama administration issued a letter stating, that, in the wake of the fall of DOMA, Title 38 of the U.S. code which governs **veteran benefits** (and stated that spouses are only opposite sex) is no longer valid. Some of the spousal benefits allocated under Title 38 concern disability, taxes, green card application, survivorship, insurance, and joint burial at a veteran's cemetery. It is unclear as to whether those benefits will

extend to couples married in their state of residence only, or if it extends to couples married in any state that allows gay marriage.

Nov. 7, 2013: U.S. Senate passes the **Employment Non-Discrimination Act (ENDA)** in a 64-to-32 bipartisan vote. “ENDA would outlaw workplace discrimination on the basis of sexual orientation or gender identity. It is already illegal for employers to discriminate on the basis of race, color, sex, nationality, religion, age or disability. 29 states currently have no laws protecting LGBT individuals in the workplace.”<sup>14</sup> It stalls in the House.

Dec. 16, 2013: **Social Security Administration** states that is “[their] goal to treat all Americans with dignity and respect” and begins processing widow’s and widower’s claims by survivors of same-sex marriages. They pledge to develop policies, and encourage all who think they may be eligible to apply.

The **Boy Scouts** lifts its ban on gay troop members.

**By the end of 2013:** Marriage equality passes, either by court decision or state legislative or popular vote, in California, New Jersey, New Mexico, Delaware, Hawaii, Illinois (as of Jan. 1, 2014) Minnesota, Rhode Island, Maryland, and Utah\*. This brings the total of states allowing marriage equality to 18, plus Wash. D.C.

**2014** Jan. 6, 2014: The U.S. Supreme Court puts a stay Utah’s marriage equality, pending the state’s appeal; 17 states now legal. 33 states still have laws banning same-sex marriage.

Feb. 8, 2014: Attorney General Eric Holder announces that the **Justice Department** will recognize legal same-sex marriages in any situation where the federal government holds jurisdiction. The ruling includes bankruptcy, prison visits, survivor benefits for police officers and firefighters killed on the job, and the right to refuse to testify to incriminate a spouse, and applies all 50 states, not just those with marriage equality.

U.S. Dept.of Labor proposes revising the definition of spouse under the Family and Medical Leave Act (FMLA) in light of the 2013 DOMA ruling. Legal same-sex spouses (with “state of celebration” rule in place, not “state of residence”) would then be entitled to take unpaid, job-protected leave to care for each other, children, or other family.

Medicare lifts exclusion on transgender care. Transgender individuals can now be covered for hormone therapy and transition-related surgery, as medically necessary. “Trans Bodies, Trans Selves”, a massive 672-page resource book, is published.

The HHS rules that insurance companies must offer coverage to same-sex married couples if they offer it to opposite-sex couples.

---

<sup>14</sup> Huffington Post 11/07/2013



In response to the Windsor decision, the Social Security Administration publishes new instructions regarding Supplemental Security Income (SSI) benefits for those in same-sex marriages, encouraging any who think they may be eligible to apply.

October 6, 2014: SCOTUS announces they will not hear same-sex marriage appeals from lower courts. This means all lower court decisions (saying bans against gay marriage are unconstitutional) stand. Eleven more states will be enacting gay marriage: Indiana, Utah, Oklahoma, Wisconsin, Virginia, Colorado, Kansas, North Carolina, South Carolina, West Virginia, and Wyoming. On Oct. 7, a decision by the Ninth Circuit invalidating bans added Idaho, Nevada, Alaska, Arizona, and Montana. With a new total of 35 states plus the District of Columbia, 60% of U.S. population now lives in a marriage-equality state.

U.S. Department of the Interior initiates a project to identify hundreds of LGBT sites across the country as candidates for National Register of Historic Places, with the goal of securing National Landmark status for some sites. To date, the Stonewall Inn and four other sites are National Landmarks designated through the National Park Service LGBTQ Initiative.

**2015** Florida becomes 36<sup>th</sup> state to legalize gay marriage; St. Louis MO joins. More than 70% of Americans now live in a state with legal gay marriage, including 21 Native American tribal jurisdictions. Jan. 12: South Dakota marriage ban struck down, pending appeal to Eight Circuit. Jan. 16: SCOTUS announces it will hear gay marriage appeals April 2015.

Ireland becomes the first nation to approve same-sex marriage by popular vote, in spite of opposition from the Catholic Church. 62% voted in favor, 38% opposed. More than 60% of the nation's 3.2 million eligible voters voted; only one of 43 districts turned the ballot initiative down.

**June 26, 2015:** A historic victory in a 5-4 decision from the U.S. Supreme Court. **In *Obergefell v. Hodges*, SCOTUS rules that same-sex marriage equality is the law in all 50 states.** The White House is lit in rainbow colors.

The U.S. Department of Defense says it will lift the ban against transgender service members in the coming year. At least ten world nations already allow transgender individuals to serve openly.

The Boy Scouts vote unanimously to lift its ban on gay troop leaders, yet religious exemption still applies.

The Congressional LGBT Equality Caucus creates a Transgender Equality Task Force chaired by House members who have transgender family members. Its purpose is to bring awareness to the many issues that transgender people encounter, including job discrimination and violence.<sup>15</sup>

---

<sup>15</sup> <http://www.hrc.org/blog/congressional-lgbt-equality-caucus-announces-transgender-equality-task-force>

Religious Freedom Restoration Act (RFRA) legislative initiatives crop up in numerous states, led by the Colorado baker's case. These bills support denying service to LGBT individuals based on the religious objection of the business owner.

- 2016** The Congressional LGBT Equality Caucus announces formation of a bipartisan LGBT Aging Issues Task Force, chaired by Rep. Ted Deutch (D-FL.) The group's purpose is to advocate for legislative and administrative protections for LGBT older adults.

20 U.S. states plus D.C. offer employment non-discrimination law that covers sexual orientation and gender identity. 30 states do not.<sup>16</sup>

Nationwide, LGBT rights activists work for non-discrimination legislation and watch that hard-earned gains are not overturned.

---

<sup>16</sup> [http://www.lgbtmap.org/equality-maps/non\\_discrimination\\_laws](http://www.lgbtmap.org/equality-maps/non_discrimination_laws)

## APPENDIX III: Additional Resources

### Annotated Multicultural Resources

- “Older lesbians and gays of color may have experienced more overt and pernicious forms of racism than the current generation. Those experiences include racism within the broader lesbian and gay community.” *Lesbian, Gay, Bisexual and Transgender Aging: Research and Clinical Perspectives*, Edited by Douglas Kimmel, Tara Rose, and Steven David, Columbia University Press, 2006, page 9.
- “Lesbian, gay, and bisexual people of color may experience multiple layers of oppression, as they often not only contend with the negative societal reactions to their sexual orientation, but also may experience racial prejudice, limited economic resources, and limited acceptance within their own cultural community.” Giving Voice to Emerging Science and Theory for Lesbian, Gay, and Bisexual People of Color, Gary W. Harper, Nadine Jewewall, Maria Cecilia Zea, in *Cultural Diversity and Ethnic Minority Psychology*, Vol. 10(3), Aug 2004, pages 187-199.
- “Many LGB people of color have felt diminished and have suffered immeasurably because of oppression. LGB people of color often find refuge in their respective communities and have elected to minimize other aspects of their identities. The decision to disclose sexual orientation-to whom and when-may depend on the intensity of the oppressions. In fact, electing to come out may cause LGB people of color to feel as though they are leaving their place of refuge.” *Handbook of Counseling and Psychotherapy with Lesbian, Gay, and Bisexual Clients*, Ruperto M. Perez, Kurt A. DeBord, Kathleen J. Bieschke, American Psychological Association, 2000, pages 97-98.

### Resources on Specific Racial and Ethnic Groups:

- See the National Resource Center on LGBT Aging for current reports and information: [www.lgbtagingcenter.org](http://www.lgbtagingcenter.org) A complete list of current NRC publications is at: <http://www.lgbtagingcenter.org/resources/resources.cfm?t=2>
- *Ethnic and Cultural Diversity Among Lesbians and Gay Men*, Beverly Greene (Ed), Sage Publications, 1997. Explores a broad range of culture-related topics specific to LGBT individuals. Includes empirical, clinical, theoretic and personal contributions.
- [www.hrc.org](http://www.hrc.org) - Human Rights Campaign has “Resources for Latinas and Latinos”, “Resources for Asian Pacific Americans”, “Resources for African Americans” that include organizations, new articles and books. Also see [griotcircle.org](http://griotcircle.org).
- *Living in the Margins: A National Survey of Lesbian, Gay, Bisexual and Transgender Asian and Pacific Islander Americans*, Alain Dang and Cabrini Vianney, The National Gay and Lesbian Task Force Policy Institute, 2007. Downloadable available at [www.thetaskforce.org/](http://www.thetaskforce.org/)

## National Resources for LGBT Aging Issues

### **National Resource Center on LGBT Aging, (NRC)** a program of SAGE

The country's first technical assistance resource center aimed at improving the quality of services offered to LGBT elders. Funded initially in 2010 by a federal grant, the NRC's website includes the latest research, topical articles and publications, and a large selection of web-based and live trainings. [www.lgbtagingcenter.org](http://www.lgbtagingcenter.org). A complete list of current NRC publications is at:

<http://www.lgbtagingcenter.org/resources/resources.cfm?t=2>

---

### **Administration on Aging (AoA)**

Under the Department of Health and Human Services, the AoA offers comprehensive information for seniors including training tools for diverse communities, including LGBT and how HIV/AIDS affects older adults.

<http://www.aoa.gov/>

### **American Association of Retired People (AARP) “Prism Network”**

Contains topics of concern to older LGBT Americans, and their family and friends.

<http://www.aarp.org/relationships/friends-family/aarp-pride/>

### **American Society on Aging (ASA)**

Offers professional education, publications, and online resources for senior care providers.

<http://www.asaging.org/>

For LGBT issues, see: **LGBT Aging Issues Network (LAIN)**

<http://www.asaging.org/lain>

### **Center of Excellence for Transgender Health**

Increasing access to comprehensive, effective, and affirming healthcare services for trans and gender-variant communities. At the University of California, San Francisco.

<http://transhealth.ucsf.edu/>

### **Gay and Lesbian Medical Association**

Organization of LGBT physicians, medical students, and their supporters. GLMA advocates on behalf of LGBT professionals and patients in healthcare settings.

[www.glma.org](http://www.glma.org)

### **Gay Men's Health Crisis**

Nation's first and leading provider of HIV/AIDS prevention, care and advocacy

[www.gmhc.org](http://www.gmhc.org)

### **GLBT Health Access Project**

Provides training, technical assistance and materials to agencies regarding the health care needs of all GLBTs and on creating welcoming environments for staff and clients.

<http://www.glbthealth.org/>

**Lambda Legal Defense Fund**

Nation's oldest (1973) and largest legal organization whose mission is to safeguard and advance the civil rights of LGBT issues and those with HIV through impact litigation, education and policy work  
[www.lambdalegal.org](http://www.lambdalegal.org)

**LGBT Aging Project**

Provides advocacy, education and outreach for LGBT elders/caregivers, greater Boston area  
<http://www.lgbtagingproject.org/>

**Movement Advancement Project (MAP)**

An LGBT policy and issues think tank that tracks legislation and LGBT organizational progress  
<http://www.lgbtmap.org/>

**National Center for Lesbian Rights (NCLR)**

A national legal organization committed to advancing the civil and human rights of LGBT people and their families through litigation, public policy advocacy, and public education  
[www.nclrights.org](http://www.nclrights.org)

**National LGBTQ Task Force (formerly the National Gay & Lesbian Task Force)**

Dedicated to building the grassroots political power of the LGBT community, since 1974.  
<http://www.thetaskforce.org/>

**Old Lesbians Organizing for Change (OLOC)**

Promoting Old Lesbian pride; challenging ageism; celebrating strengths; documenting lives  
[www.oloc.org](http://www.oloc.org) In Northern Colorado and the Front Range, contact [olocincolorado@yahoo.com](mailto:olocincolorado@yahoo.com)

**Parents, Family and Friends of Lesbians and Gays (PFLAG)**

Providing support, education and advocacy since 1973, through a nationwide network of local chapters.  
[www.pflag.org](http://www.pflag.org)

**SAGE: Services and Advocacy for GLBT Elders (SAGE)**

Oldest U.S. advocacy organization for LGBT elders, founded in 1978 in New York City  
As of February 2012, there are 22 chapters across the U.S., including at The Center in Denver.  
[www.sageusa.org](http://www.sageusa.org)

**Transgender Aging Network (TAN)**

Improving the lives of transgender individuals and their significant others, friends and families.  
[www.forge-forward.org/TAN](http://www.forge-forward.org/TAN)

**Transgender Law Center**

Working to change law, policy, and attitudes so that all people can live safely, authentically, and free from discrimination regardless of their gender identity or expression, since 2002.  
<http://transgenderlawcenter.org/cm>

## **Boulder County and Denver Resources for LGBT Aging Issues**

### **Boulder County AIDS Project (BCAP)**

Provides support, education and advocacy for those infected with or affected by the HIV virus.

<http://www.bcap.org/>

### **Boulder County Area Agency on Aging (BCAAA)**

Promotes the health and well-being of older adults by building on individual, family, and community strengths. For information about specific programs, call 303-441-3570 or visit

[www.BoulderCountyAging.org](http://www.BoulderCountyAging.org)

For information about resources for older adults, adults with disabilities, and caregivers call 303-441-1617 or visit <http://www.BoulderCountyHelp.org> and click *Seniors & People with Disabilities*.

Among BCAA's LGBT programs are the Project Visibility LGBT Cultural Competency Training, Silver Lining Directory, and 'rainbow elders' newsletter.

PO Box 471, Boulder CO 80306 (303) 441-4518 or (303) 441-3583

[www.projectvisibility.org](http://www.projectvisibility.org) or [infoLGBTelders@bouldercounty.org](mailto:infoLGBTelders@bouldercounty.org)

**The Center:** Denver's GLBT community center since 1976.

As a SAGE affiliate, it provides elder-specific programs.

1301 E Colfax Ave Denver, CO 80218 (303) 733-7743

[www.glbtcolorado.org](http://www.glbtcolorado.org)

### **Denver Regional Council of Governments (DRCOG)**

The Ombudsman Office offers LGBT Training for Assisted Living & Nursing Homes.

<https://drcog.org/programs/area-agency-aging/long-term-care-ombudsman-program>

### **Old Lesbians Organizing for Change (OLOC)**

In Northern Colorado and the Front Range, contact [olocincolorado@comcast.net](mailto:olocincolorado@comcast.net)

### **One Colorado**

A statewide advocacy organization dedicated to securing and protecting equality for LGBT Coloradans and their families.

(303) 396-6170 [www.one-colorado.org](http://www.one-colorado.org)

### **Out Boulder**

The community and communications center for Boulder County LGBTQ individuals.

2132 14th Street Boulder, CO 80302 (303) 499-5777 [www.outboulder.org](http://www.outboulder.org)

**PFLAG:** formerly known as Parents, Family and Friends of Lesbians and Gays. As the organization adopts a very queer and trans-inclusive mission, the name is no longer an acronym.

Boulder County chapter <http://pflagboulder.org/> (303) 444-8164

Denver chapter: <http://www.pflagdenver.org/> (303) 573-5861

## Recent Reports and Publications

<http://www.lgbtagingcenter.org/resources/resource.cfm?r=770>

From the National Resource Center on LGBT Aging and the Alzheimer's Association: "LGBT Caregiver Concerns". November 2015.

<http://www.lgbtagingcenter.org/resources/resource.cfm?r=705>

From the National Resource Center on LGBT Aging: "LGBT Programming for Older Adults: A Practical Step-by-Step Guide" illustrates how to host an LGBT-specific movie. January 2015.

[http://lgbtmap.org/understanding-issues-facing-lgbt-americans?utm\\_source=Understanding+LGBT+Issues](http://lgbtmap.org/understanding-issues-facing-lgbt-americans?utm_source=Understanding+LGBT+Issues)

From the Movement Advancement Project and others. "Understanding Issues Facing LGBT Americans". December 2014.

<http://www.lgbtagingcenter.org/resources/resource.cfm?r=695>

From SAGE: "Out & Visible: The Experiences and Attitudes of LGBT Older Adults, Ages 45-75." A Harris Poll survey of 1,857 LGBT and 519 non-LGBT older adults. October 2014.

<http://www.lgbtagingcenter.org/resources/resource.cfm?r=694>

From the National Resource Center on LGBT Aging and Whitman-Walker Health: "Creating End-of-Life Documents for Trans Individuals: An Advocate's Guide." October 2014.

<http://lgbtagingcenter.org/resources/resource.cfm?r=665>

From the National Resource Center on LGBT Aging: "Servicios Inclusivos para Personas Mayores LGBT: Una Guía Práctica para Agencias Acogedoras." May 2014.

<http://lgbtagingcenter.org/resources/resource.cfm?r=676>

From the National Resource Center on LGBT Aging: "Medicare and Transgender People." May 2014.

<http://lgbtagingcenter.org/resources/resource.cfm?r=662>

From the National Resource Center on LGBT Aging: "New Tax Benefits for Same-Sex Married Couples after the DOMA Ruling." April 2014.

<http://lgbtagingcenter.org/resources/resource.cfm?r=642>

From the National Resource Center on LGBT Aging: "Opening Doors: An Investigation of Barriers to Senior Housing for Same-Sex Couples." February 2014.

<http://www.lgbtagingcenter.org/resources/resource.cfm?r=615>

From the National Resource Center on LGBT Aging: "Residents' Rights and the LGBT Community: Know YOUR Rights as a Nursing Home Resident." October 2013.

<http://www.lgbtagingcenter.org/resources/resource.cfm?r=584>

From the National Resource Center on LGBT Aging: *“A Self-Help Guide for LGBT Older Adults and their Caregivers and Loved Ones: Preventing, Recognizing, and Addressing Elder Abuse”* February 2013.

<http://www.lgbtagingcenter.org/resources/resource.cfm?r=520>

*“Improving the Lives of Transgender Older Adults: Recommendations for Policy and Practice”* June 2012.

<http://www.lgbtagingcenter.org/resources/resource.cfm?r=487>

From the National Resource Center on LGBT Aging: *“Inclusive Services for LGBT Older Adults: A Practical Guide to Creating Welcoming Agencies”* March 2012.

[http://www.lgbtlongtermcare.org/wp-content/uploads/NSCLC\\_LGBT\\_report.pdf](http://www.lgbtlongtermcare.org/wp-content/uploads/NSCLC_LGBT_report.pdf)

2011 video and *“Stories from the Field”* from the National Senior Citizens Law Center.

[http://www.sageusa.org/resources/resource\\_view.cfm?resource=183](http://www.sageusa.org/resources/resource_view.cfm?resource=183)

*“Improving the Lives of LGBT Older Adults, March 2010”* from SAGE.

<http://lgbtmap.org/file/momentum-report-2011.pdf>

*“The Momentum Report — 2011 Edition: An Analysis of Key Indicators of LGBT Equality in the U.S. August 2011”* from Movement Advancement Project.

[http://www.aoa.gov/AoARoot/AoA\\_Programs/HPW/HIV\\_AIDS/index.aspx](http://www.aoa.gov/AoARoot/AoA_Programs/HPW/HIV_AIDS/index.aspx)

*“Older Adults and HIV/AIDS”* from the Administration on Aging, 2012.<sup>17</sup>

<http://www.tcaging.org/downloads/lgbtstudynational.pdf>

*“Ready to Serve? The Aging Network and LGB and T Older Adults”* A national survey of AAAs’ willingness and readiness to serve LGBT elders. 2010.

[http://www.aoa.gov/AoARoot/AoA\\_Programs/Tools\\_Resources/DOCS/AoA\\_DiversityToolkit\\_full.pdf](http://www.aoa.gov/AoARoot/AoA_Programs/Tools_Resources/DOCS/AoA_DiversityToolkit_full.pdf)

*“A Toolkit for Serving Diverse Communities”* from the Administration on Aging, 2010

<http://caringandaging.org/wordpress/wp-content/uploads/2011/05/Full-Report-FINAL.pdf>

*“The Aging and Health Report: Disparities and Resilience among Lesbian, Gay, Bisexual, and Transgender Older Adults”* by Fredriksen-Goldsen, K. I., Kim, H.-J., Emlet, C. A., Muraco, A., Erosheva, E. A., Hoy-Ellis, C. P., Goldsen, J., Petry, H. (2011). Seattle: Institute for Multigenerational Health.

[http://www.lambdalegal.org/publications/trt\\_trans-aging-were-still-here](http://www.lambdalegal.org/publications/trt_trans-aging-were-still-here)

*“Transgender Aging: We’re Still Here! Transgender Rights Toolkit: A Legal Guide For Trans People and Their Advocates”* from Lambda Legal, 2011.

---

<sup>17</sup> Thanks to Theresa Clark, ActionAIDS Philadelphia.



## NEW for 2016!

### **“Project Visibility: Person-Centered Care for LGBT Older Adults”** *A 30-minute web-based training*

“Project Visibility: Person-Centered Care for LGBT Older Adults” is now available 24/7 as a web-based training. This free 30-minute interactive course is designed for direct care staff at nursing homes, assisted living communities, and home health care agencies.

The course reviews LGBT history and terms and teaches three skills we hope will open the hearts and minds in those caring for this often invisible population:

- Make no assumptions
- Ask open-ended questions
- Affirm resident rights

To get started, employers can follow these steps:

- Watch a 5-minute video to hear reviews from Boulder County administrators
- Complete a six-question survey that sets a baseline for cultural inclusiveness
- **Very important:** Read the User Guide
- Register
- Share the course with staff

Go to [www.projectvisibility.org](http://www.projectvisibility.org)

