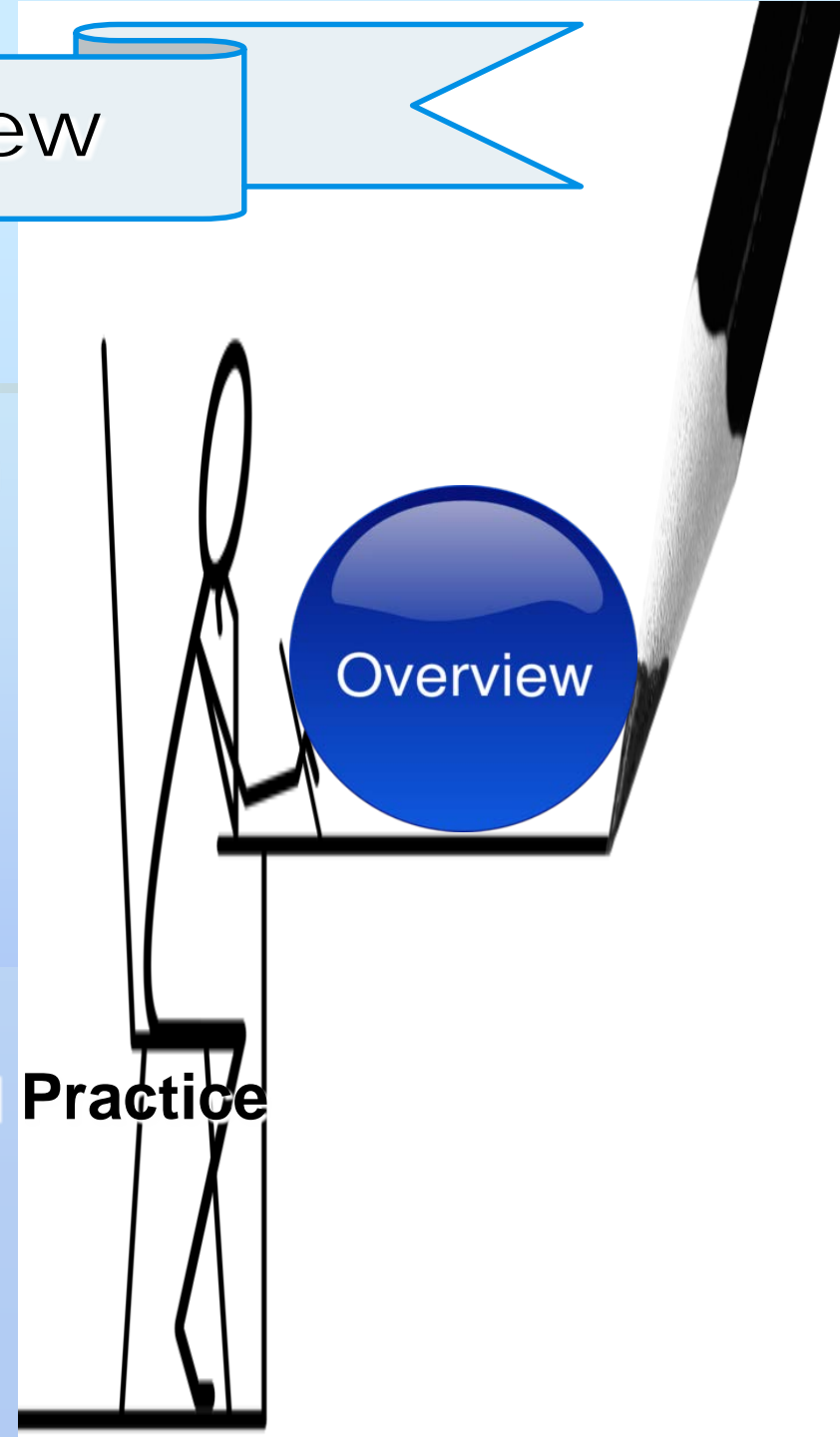


Aging and Concerns for Lesbian, Gay, and Bisexual Seniors in the North Region of British Columbia

**Julius Okpodi, PhD
UHNBC – Social Work
Prince George, BC, Canada**

Overview

- **Introduction**
- **Rationale for the Research**
- **Research Question**
- **Theoretical Framework**
- **Research Method**
- **Research Findings**
- **Implications for Policy and Practice**
- **Conclusion**





Introduction

- ✓ Many researchers and practitioners have become interested in the aged, the aging process, and the concerns of seniors.
- ✓ There is an assumption in all these studies that neglects to consider the LGB senior population.
- ✓ LGB seniors share with all seniors the same goal of living with comfort and dignity in their last stages of life.
- ✓ This research explores the experiences and perceptions of LGB seniors as they contemplate retirement.

Retirement

is wonderful.

It's doing nothing
without worrying
about getting
caught at it.

- Gene Perret





Rationale

Purpose and Goal:

- ✓ To understand the research participants' meaning-making from their perceptions and experiences of growing older within the BC Northern Health Authority boundaries.
- ✓ To provide an understanding of the aging concerns and housing challenges as LGB seniors contemplate retirement.
- ✓ To explore some LGB experiences of overt and covert discrimination when seeking housing and healthcare services.



Research Question

✓ **Primary Question:**

What are the experiences of LGB people who grow older within BC Northern Health Authority boundaries; and what meaning-making arises from these experiences?

Theoretical Framework

Constructivism

- ✓ Social constructivism acknowledges that people construct knowledge or contribute to knowledge development through their experiences and perceptions of reality.

Leininger's Culture Care Theory

- ✓ Ethnonursing approach under the assumption that cultural, historical, and social factors are crucial for maintaining and stabilizing the well-being of the person.
- ✓ Pinpoints the variability in how people are treated within cultures, enables healthcare professionals to understand the belief systems/traditions & cultures and incorporate them into the care plan.

A decorative banner with a blue outline and a white fill, featuring a ribbon-like shape with pointed ends. The word "Methodology" is centered in the banner in a black, sans-serif font.

Methodology

✓ **Qualitative Study:** An exploratory study

✓ **Sample Selection**

- 13 Self-identifying LGB senior participants who lived within BCNHA boundaries. 10 Northern Interior; 1 Northeast Region; and 2 Northwest Region

✓ **Data Collection**

- Demographic Information (Questionnaires)
- Semi-Structured Interviews

Findings 1

Themes

- ✓ **(1). Ageism and lifestyle perceptions** (Ageism affects LGB relationships, causes fear and loneliness. Seniors are viewed as bed blockers and are warehoused in facilities).
- ✓ "When you hit 40 and 45 years... as a gay man, it's really difficult to find a partner unless you are perfectly fit, perfectly handsome, and you got all the latest gadgets"
- ✓ "Right now we warehouse our old people... treat them like cattle. Everybody must be up at eight a.m. for their bath, food and their meds; and it's on a schedule and a routine"
- ✓ "Bed blocking... you don't deserve to be in that bed because you are old. A younger, fit, healthy, productive person deserves the bed."

Findings 2

- ✓ **(2). Being sensitive, honoring relationship, and accommodating partners** (Invalidation of LGB persons, Separation of (break bond) partners, lack of respect, insensitivity, and lack of choices).

- ✓ “They refused to take my partner's name as a next of kin. ...I was going to be refused admission. So, I ended up giving my son's name”

- ✓ “we need to honour relationships. So, whether its siblings or best friends, it does not matter. We need to create housing services that allow those relationships to be fostered and continued.”

Findings 3

- ✓ **(3). Autonomy, independence, respect and dignity** (LGB seniors deserve respect: Want to age at home with minimum support, ensure caregivers are sensitive and trained, want to communicate via door signs or opinionated about services).

✓ "you hang a sign on your door every morning. ...and if there was nothing on your door, someone comes and knocks waiting for answer. So, if someone had heart attack, fall, or got stuck in the bathroom. ...that would be a great way of managing people's autonomy and allowing them to live independently"

Findings 4

- ✓ **(4). Need for housing amenities/ resources, social/recreation opportunities** (LGB seniors want retirement housing situated within the city limit: “Icy road & driveway”, air quality (breathe clean air), wheelchair access, transportation services, ground level accommodation, onsite nurse and financial planner. Others want educational programs for employees, and a place to socialize with one another).

- ✓ “A place that has good air quality, so that we can breathe”
- ✓ “Being able to get out and move and engage in recreation is going to increase the longevity of your life, and your level of independence”
- ✓ “Wheelchair accessibility needs to be everywhere and not isolated places”

✓ (5). Housing preferences

Guided by:

(i) size of the community; (ii) accessibility; (iii) college and university;
(iv) hospital and the availability of healthcare services.

- ✓ **12 Participants** agreed that Prince George or within the city limit is the ideal location.
- ✓ **1 Participant** disagreed: **“Rural residents are rural for a reason and would prefer to retire to a small town”**. (Structures in form of a cabin with all amenities, its affordable and less expensive unlike the city).
- ✓ **PG/ City limit:** sidewalks & ramps are not properly cleared, city environment are not peaceful (noisy and frightening), and it is too populated.

Latent themes

- ✓ **(1). Isolation, fear, and loneliness**
 - ✓ Social and emotional challenges resonate from fear of being alone, loss of contact with community, isolation, and loneliness (biological ties).

- ✓ **(2). Seniors are weak and unable to give consent**
 - ✓ Protection against systemic policies (right to fair treatment).

Implications for Policy and Practice

- ✓ LGB seniors' health and housing issues need to become a mandatory part of the cultural competency education for all social and health professionals.
- ✓ LGB Seniors need affirming and non-judgmental Healthcare workers. Helping professionals need to understand their belief systems and perception of others.
- ✓ Healthcare and housing needs of the LGB seniors need to include the provision of culturally sensitive care.
 - ✓ (staff educational programs, enactment of LGB non-discrimination policies, the use of LGB-inclusive language both on documents and in verbal communications).
 - ✓ (inclusion of partners, close friends, and families of choice in care).



Limitations

- ✓ Inherent problems of cross-race interviewing (Heterosexual & Black researcher, interviewing people of other colours/ sexualities).



- ✓ Participants in this research appeared to be well-educated and owned homes. If homeless LGB participants or those living in a shelter were interviewed, their responses may have yielded different findings for this research.

Future Research

- ✓ There is a strong need for supportive housing where partners who are also aging, best friends, and siblings can care for their loved ones:
 - ✓ Future research is required to ascertain if supportive housing is the best option for our senior citizens.
- ✓ Contrasting view: findings from this research indicate interest in mixed (heterosexual and homosexual) retirement housing unlike the literature suggested.
 - ✓ Future exploratory study with urban LGB seniors to identify why LGB seniors in the north would want mixed retirement housing.

Conclusion

- ✓ Ageism presents many health and social challenges to LGB people.
- ✓ Constructivism and Leininger's theory are of particular significance in creating meaning of the perceptions/experiences, and subcultures of LGB people.
- ✓ This meaning-making becomes socially constructed over time to serve economic, political, and social purposes.
- ✓ Supportive facilities will help actualize successful aging in care, rather than removing "people's" autonomy, independence, and dignity.

Questions

