Housing is widely recognized as a key determinant of health and yet many older lesbian, gay, bisexual and transgender (LGBT) Canadians continue to experience or are at risk of housing precarity or homelessness. This report offers the key findings from our national study on the housing issues facing older LGBT Canadians and recommendations on addressing these important inequities.

LGBT Housing Matters

Addressing the knowledge gaps in meeting the housing needs of older LGBT Canadians.

Jacqueline Gahagan, PhD & Marco Redden, BA

LGBT Housing Matters: Addressing the knowledge gaps in meeting the housing needs of older LGBT Canadians.

Results of the LGBT Housing Matters project

This study was funded by the Social Science and Humanities Research Council, Phase 1 Partnership Grant. The recommendations found in this report are solely those of the research team.

Suggested Citation: Gahagan, J., Redden, M. & the National LGBT Housing Matters Research Team (2020). *LGBT Housing Matters:* Results of the Canadian LGBT older adults housing project. Halifax, NS: The Gender and Health Promotion Studies Unit, Dalhousie University.

The LGBT Housing Matters Research Team

Principal Investigator: Jacqueline Gahagan, Dalhousie University

Co-applicants:

- Dr. Alex Abramovich, Centre for Addiction and Mental Health
- Dr. Liesl Gambold, Dalhousie University
- Dr. Mohammad Hajizadeh, Dalhousie University
- Dr. Shawn Harmon, Dalhousie University
- Dr. Eli Manning, Dalhousie University
- Dr. Rita Orji, Dalhousie University
- Dr. Meaghan Sim, Dalhousie University
- Dr. Mikiko Terashima, Dalhousie University
- Dr. Ren Thomas, Dalhousie University
- Dr. Paul Flowers, Glasgow Caledonia University, UK
- Dr. Anders Kottorp, Malmo University, Sweden
- Dr. Shari Brotman, McGill University
- Dr. Tamara Sussman, McGill University
- Dr. Brent Oliver, Mount Royal University
- Dr. Áine Humble, Mount Saint Vincent University
- Dr. Arne Stinchcombe, Saint Paul University
- Dr. Brian de Vries, San Francisco State University

Dr. Francisco Ibenez-Carrasco, St. Michael's Hospital

Dr. Mary Bryson, University of British Columbia

Dr. Hannah Kia, University of British Columbia

Dr. Nathan Lachowsky, University of Victoria

Partners Organizations:

Jane Osborne, British Columbia Association of Community Response Networks

John Ecker, Canadian Observatory on Homelessness

Esther de Vos, Capital region Housing Corporation

Martin Krajcik, Egale Canada Human Rights Trust

Bob Linscott, Fenway Community Health Centre

John O'Keefe, Northwood

Horst Backe, Living OUT Visibly and Engaged Community Response

Kevin Quigley, MacEachen Institute

George Hartgrove, Ottawa Senior Pride Network

Hanqing Yang, prideHealth

Mike Tuthill, Rainbow Resource Centre

Floyd Visser, The SHARP Foundation

Nathan Sparling, HIV Scotland

Project Manager: Dr. Logan Lawrence

Research Assistants:

Gabriel Exunga

Marco Redden

Katherine Luber

Lisa Lachance

TABLE OF CONTENTS

Executive Summary	4
Section 1: Project Summary	5
Introduction	5
Partnership Overview	5
Project Importance	7
Theoretical Approach and Methodologies	8
Section 2: Survey	9
Introduction	9
Participant Demographics	9
Key Findings	10
Affordability	10
Safety and Inclusivity	10
Creating Affirming and Affordable Housing	11
Section 3: Focus Group Data	12
Introduction	12
Participant Demographics	12
Analysis	12
Key Themes	12
Fear of discrimination	12
Recognizing intersecting barriers to housing	13
Addressing isolation and exclusion through housing	15
Mobilizing government: Interventions and opportunities	16
Operationalizing LGBT-inclusive philosophies	17
Increasing LGBT acknowledgment and support in housing	18
Conclusion	20
References	21
Appendix- Survey Data	27

Executive Summary

As Canada's population ages, a key health promotion concern is developing housing models and policies to meet the needs of diverse and marginalized older adults (55+). Older lesbian, gay, bisexual, and transgender (LGBT) adults are an overlooked and disadvantaged segment of the aging population. Many older LGBT adults live alone, do not have connections with their biological families, live in poverty and experience systematic discrimination and harassment across the life course. There is limited data about the specific housing needs of these populations and as such there is an urgent need to address knowledge gaps about intersecting concerns related to aging, housing, and LGBT populations Canadians.

With funding support from the Social Sciences and Humanities Research Council (SSHRC), we undertook a 1-year Partnership Development grant with our national research team in order to undertake: 1. a scoping review of existing international housing policies, programs and interventions aimed at LGBT populations, 2. a national online housing survey, and 3. focus group discussions in an effort to identify the housing needs of older LGBT Canadians and potential solutions to address these needs.

The following report provides an overview of our key findings from our national online survey and focus group discussions. A total of 970 participants agreed to respond to the online survey, including housing service providers and LGBT-identified individuals. In addition, focus group discussions were held in five Canadian cities with a total of 52 participants.

Survey findings: A number of key policy and programming issues emerged from the survey data including, issues of training for housing providers and landlords on the housing needs and rights of LGBT tenants and residents, the need to collect better data from tenant and residents, the need to address gaps in housing policies, laws and regulations as they relate to LGBT tenants and residents, the need to explore intergenerational housing approaches such as home sharing and cooperatives for LGBT Canadians, among others.

Focus group findings: Our 52 focus group participants raised a variety of housing-related concerns and discussed potential interventions to address these for older LGBT populations. Specifically, participants expressed fear of discrimination in housing as well as the intersecting barriers to safe and affordable housing. Participants envisioned housing that would address social isolation and exclusion through community-building and intergenerational housing models, programs and policies. The need for a call to action for government and housing providers to ensure policies and practices are making housing more affordable, accessible, safe, and affirming for all LGBT people in keeping with the National Housing Strategy and current human rights protections.

Section 1: Project Summary

Introduction

As the number of baby boomers reaching age 65 grows, a key challenge for Canada is to determine how well existing housing policies can respond to the needs of diverse populations of older adults. Recent Canadian data indicate that the growth rate of the population aged 65 years and older is approximately 3.5% (which is about four times the growth rate of the total Canadian population). It is expected that by July 1, 2024, over 20% of the Canadian population will be 65 years or older (1,2). The full extent of this demographic shift is not fully known but will likely create significant burdens on the health and social systems currently in place. A key issue in meeting the needs of the aging Canadian population is in determining if housing polices, where they exist, are addressing the unique issues facing diverse and marginalized segments of older adults (55+), specifically, older lesbian, gay, bisexual and transgender (LGBT¹) populations. This is a particularly pressing challenge in that many older LGBT adults live alone, do not have connections with their biological families, live in poverty and experience systematic discrimination and harassment across the life course, including in relation to housing, due to their sexual orientation and/or gender identity and expression (3-6).

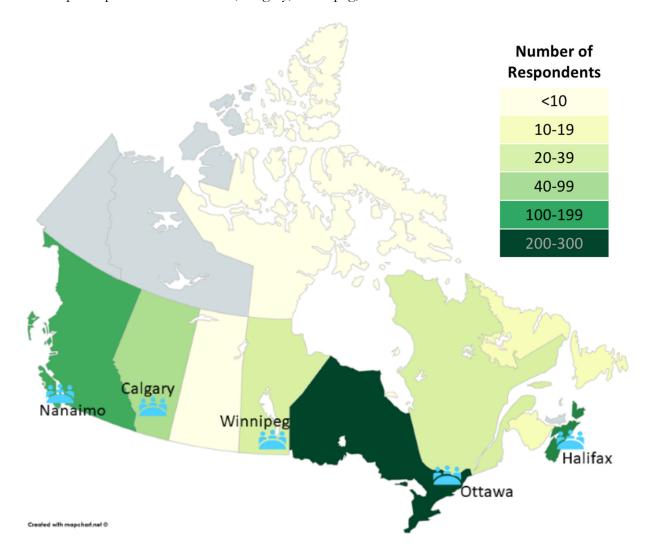
Despite the importance of housing for vulnerable populations as stated in the National Housing Strategy (NHS), some Canadian provinces have yet to create adequate housing policies for our diverse aging populations, including historically marginalized segments of the population such as older (55+) LGBT Canadians (7-10). Given this, the goal of our Phase 1 Partnership grant was to examine the existing housing policies and knowledge gaps in relation to meeting the housing needs of older LGBT populations (10). Our key study objectives were to systematically identify the housing needs of older LGBT Canadians in relation to the intersection of key policy concerns of this demographic shift in Canada.

Partnership Overview

Our partners on this national housing study consisted of an interdisciplinary group of researchers, graduate students, policy analysts, non-profit sectors, government partners, LGBT community members, including those with lived experience of homelessness or being precariously housed. Our partnership was aimed at meaningful engagement in our examination of existing housing policies and knowledge gaps in our understanding of housing policy-related issues facing older LGBT adults in the Canadian context. Further, our partnership reflects the evolution of our earlier funded work with our partners from the Jean Monnet European Union Centre of Excellence (EUCE) where we undertook a study of select EU housing facilities to examine the unique housing needs of older (55+) LGBT populations (64). In our Phase 1 research, our team has expanded this work to the Canadian context in an effort to address key housing disparities facing older LGBT adults. With partners from Nova Scotia, Quebec, Ontario, Manitoba, Alberta and British Columbia, we have been able to map a better national understanding of promising housing policies with a particular

¹ LGBT was used in this grant noting that this is the preferred acronym for use with the baby boomer cohort (55+) for whom the term "queer" may hold historically derogatory connotations (88). However, given that the national survey was open to people of all ages, the acronym was expanded to include Two-Spirit (2S) and Queer (Q) individuals, as well as other self-identifications.

emphasis on older LGBT populations. Specifically, sections 2 and 3 of this report detail findings from our national online survey with close to 1000 participants and our focus group discussions with 52 participants from Nanaimo, Calgary, Winnipeg, Ottawa and Halifax.



Project Importance: A Brief Historical Background to LGBT Human Rights in Canada

Despite advances in recognizing and formally adopting LGBT human rights legislation and protections under Canadian law, it is important to recognize the long history of systematic discrimination against LGBT Canadians. Specifically, same-sex sexual activities between consenting adults were considered crimes punishable by imprisonment before 1969 in Canada. For the baby boomer cohort, the decriminalizing of private same-sex sexual acts was a watershed moment for LGB human rights under Canadian law, although insufficient to address ongoing stigma, violence and harassment (13,14). It is equally important to note that it was not for another decade before the first Canadian province amended its charter of human rights to include sexual orientation as a prohibited ground for discrimination, and another four decades before the Canadian Human Rights Act was amended to prohibit discrimination against gender identity or expression (13). While these important human rights are now entrenched in Canadian society, the ways in which they are enacted in practice remain variable, and in some instances not well understood, including within the context of Canadian housing policies and practices (64, 68-70). Addressing the dearth of information in our national evidence-base about the specific ways in which LGBT¹ older Canadians are included in or absent from housing policies is an important step is addressing the longstanding erasure of the needs of these populations (10, 15-17). Given this, our study used a gender-based analysis (GBA+) grounded in the Social Ecological Model (SEM).

Housing as a Key Determinant of Health: Although the recently released National Housing Strategy (NHS) recognizes housing as a key determinant of wellbeing, less is known about the unique challenges and constraints facing older LGBT adults in securing safe, affordable and appropriate housing, free from bias, stigma, and harassment in the Canadian context (10, 18-20). While there is currently very limited available data from Canada and other countries on these issues, existing data indicate that many LGBT adults do not feel safe in their current neighborhoods which can lead to a profound sense of loneliness and social isolation, a lack of social acceptance, heightened anxiety and an enduring need to remain hidden about their sexual orientation and/or gender identity for fear of being 'outed', being removed from their current housing situation, or being denied housing altogether (21-23). It is noted that precarious housing situations among older LGBT adults can lead to a lack of trust in key social institutions that many older heterosexual adults will turn to for assistance as they age, such the biological family, the legal system, government social supports and programs, and the health care systems (24-29). Given this, many of these taken for granted 'social benefits' are simply avoided by older LGBT adults due to fear of rejection, reprisal or institutionalization (30, 31). These are particularly significant issues in that many older LGBT adults live alone, do not have connections with their biological families, live in poverty and experience systematic discrimination and harassment across the life course due to their sexual orientation and/or gender identity and expression (32-35).

Other factors that contribute to the unique situation for older LGBT adults include the dearth of LGBT-specific housing programs, social support services and advocacy (36-38). For example, discriminatory practices among housing providers may result in not renting to LGBT tenants in favor of heterosexual tenants or in charging higher rental rates to LGBT tenants compared with their heterosexual age-matched peers (39, 40, 71-73). The limited existing data on discriminatory housing practices suggest that the fear of the loss of independence associated with aging also creates

unique housing challenges for older LGBT Canadians unlike their heterosexual counterparts. For example, moving into long term care (LTC) facilities can result in older LGBT adults going back into the closet to hide their sexual orientation or gender identity from care providers or other residents for fear of mistreatment, neglect, isolation or homophobic and transphobic harassment (41-43). It is important to acknowledge that older LGBT adults may find themselves in the same LTC facility with the peer group or generation who were opposed to LGBT human rights and other LGBT protections under the law. Rather than finding themselves in a safe and caring environment, LTC facilities may become the 'final closet' for older LGBT adults (44-46).

Theoretical Approach and Methodology

Our approach to this national housing research project is informed by the Social Ecological Model (SEM) which is a theory-based framework aimed at understanding the ways in which a range of personal- and environmental-level factors interact and impact on individual outcomes through to policy-level outcomes (48-50). The core levels of the SEM include individual or intrapersonal, interpersonal, organizational, community and policy environments. These multiple levels of influence can impact on, for example, if and how well an individual is able to engage with their peer network, their community or organizations of choice, and their local government – all of which can influence housing. Further, the SEM perspective can be highly appropriate in understanding the various levels of factors that are contributing, both positively and negatively, to complex phenomenon facing older populations such as how low-income seniors' access to food, what vulnerable seniors transitional care needs are in moving from hospital to home, and how the built environment can contribute to levels of physical activity among older adults (50-55). According to the SEM literature, often the most effective approaches to understanding and intervening on a particular phenomenon of interest, in this case housing policies in relation to older LGBT adults, is to draw on a combination of interventions at all levels of the model. See Figure 1 below.

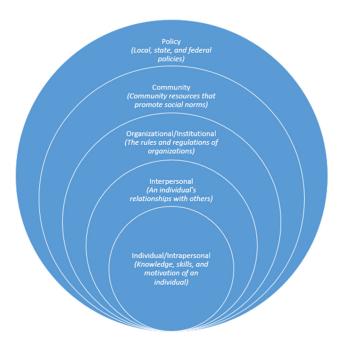


Figure 1: SEM Theoretical Model

Further, the SEM was incorporated with gender-based analysis (GBA+) at all levels of influence by examining if and how gender is considered in housing policies. As indicated by the Canadian Institutes of Health Research (CIHR), the term 'gender' refers to the socially constructed roles, behaviours, expressions and identities of girls, women, boys, men, and gender diverse people (56-59). Further, gender influences how people perceive themselves and each other, how they act and interact, and the distribution of power and resources in society. Although gender is often represented as a binary (girl/woman and boy/man), it is important to consider the diversity in how individuals and groups understand, experience, and express gender. For this study, we drew from the Government of Canada priority of ensuring the integration of GBA+ into all programs and policies. Our team included both the GBA+ and the SEM to provide an analytic framing be advance our understanding of the levels of influence on housing from the individual level through to the policy level (61-63).

Section 2: Survey

Introduction

The following section provides an overview of the key findings from our national online housing survey data. The online survey was open for 6 months and yielded 970 completed or partially completed surveys. A total of 711 participants selected the version of the survey for Two-Spirit, Lesbian, Gay, Bisexual, Transgender and Queer (2SLGBTQ) populations, 50 selected the version for housing service providers, and 102 selected the option for housing service providers who identify as 2SLGBTQ, and 119 did not select an option. The 2SLGBTQ survey instrument consisted of 69 closed ended questions with open-ended space for further elaboration. The focus of this section is on the close-ended responses from those who completed the survey for 2SLGBTQ self-identified respondents only. Tables detailing each survey question are available in the appendix.

Participant Demographics

The majority of respondents were from Ontario (38%), Nova Scotia (22%), and British Columbia (19%). The remaining 21% of responses came from Alberta, Manitoba, Quebec, New Brunswick, Newfoundland and Labrador, Saskatchewan, Northwest Territories, and Nunavut. A total of 78% of respondents indicated that they currently live in a city. The mean age was 55 years old and just over half (52%) of respondents reported completing at least an undergraduate degree. The vast majority (90%) of respondents identified as Caucasian/white. For sexual and romantic orientations, 53% self-identified as gay, 31% as queer, 27% as lesbian, 15% as bisexual, while other identities such as pansexual were selected by under 10% of respondents. For gender identity and expression, 37% identified as cisgender men, 28% as cisgender women, 15% as nonbinary/agender/gender fluid, and other identities including Two-Spirit, transgender man and transgender woman were selected by under 10% of respondents each. Approximately one third (33%) self-identified as a person with a disability, of which 80% described the disability as invisible. In terms of income, 34% of respondents reported a gross yearly income of between \$20,000 and \$49,999 and 59% were receiving employment income. Further, 66% of respondents indicated they did not have extra money after paying bills and 14% indicated they have difficulty paying bills no matter what they do.

Key Findings

Results from the survey data highlighted key housing issues of importance to 2SLGBTQ Canadians. This data fills important knowledge gaps regarding the housing needs and experiences of 2SLGBTQ populations and provides direction for future interventions. Respondents indicated the need for improved training for housing providers and landlords on the housing needs and rights of 2SLGBTQ tenants and residents, the need to collect better data from tenant and residents, the need to address gaps in housing policies, laws and regulations as they relate to 2SLGBTQ tenants and residents, the need to explore intergenerational housing approaches such as home sharing and cooperatives for 2SLGBTQ Canadians, among others.

Affordability

Our sample included a high proportion of 2SLGBTQ people who reported living on tight budgets. High housing costs were a key concern amongst our sample. Many respondents indicated housing challenges in recent years, with 59% experiencing rising rent and 30% having to move neighborhoods due to housing unaffordability. In fact, 28% indicated that in the past five years they had fallen behind on rent or mortgage payments or had to borrow money for housing costs.

Safety and Inclusivity

Our survey included several questions about general community safety and 2SLGBTQ acceptance and inclusivity in housing and wider communities. Our results indicate that many respondents have safety and inclusivity concerns related to 2SLGBTQ identities within their places of residence. While 15% of respondents felt housing facilities in Canada were somewhat or very inclusive for 2SLGBTQ populations, 39% felt they were somewhat or very non-inclusive and 46% were uncertain. It is important to note that 40% of respondents indicated that they felt unsafe in their communities at least sometimes, and 85% reported that if they felt unsafe, it was due to their known or perceived sexual orientation. Over half, (53%) attributed feeling unsafe to others' perceptions of their gender identity or expression. Interestingly, 13% of respondents felt their communities were unsupportive of lesbian, gay, and bisexual people, while 20% were uncertain and 66% felt their communities were supportive.

Over one third (36%) of respondents reported having negative housing-related experiences in the past five years. Of these respondents, almost half (48%) did not feel comfortable discussing their sexual orientations with housing staff or landlords and 32% did not feel comfortable discussing their gender identity/expression. Close to one third (29%) of respondents indicated that negative experiences were due to the housing environment being non-inclusive, intake forms containing heteronormative or cisnormative language, staff or landlords having made assumptions about gender identity or expression, or having had negative interactions with other residents related to the respondents' 2SLGBTQ identity.

Contrastingly, 50% of respondents reported having had positive housing experiences related to their sexual orientations and/or gender identities. Of these, 40% indicated that experiences were positive because the housing environment was inclusive or because they felt comfortable discussing sexual orientation with other residents. Further, 36% indicated that 2SLGBTQ-friendly staff or landlords contributed to their positive experiences.

Creating Affirming and Affordable Housing

When we asked respondents to rate the importance of various factors in contributing to a positive living environment, our 2SLGBTQ respondents provided vital feedback about the qualities needed to create affirming housing. Respondents strongly highlighted the need to live with other 2SLGBTQ people, with close to 80% indicating that this was important to them. Unsurprisingly, 94% answered that community acceptance of lesbian, gay, bisexual, and queer people was important, and 90% indicated that the same was important for transgender, non-binary, and Two-Spirit people. Accessing housing with staff or landlords that identify as 2SLGBTQ was important to over half (57%) of respondents.

A number of interventions were deemed important to our respondents for creating affirming and affordable housing. For example, 2SLGBTQ diversity training for staff working in the housing sector and landlords was rated important by close to 90% of respondents, and 96% agreed with the need for anti-discrimination laws specific to the housing sector. In terms of affordability, 93% of respondents rated the need for affordable housing policies such as rent control and landlord licensing as important. Policies for first-time home buyers were important to 80% of respondents. 86% felt that funding for co-op housing and the creation of intentional 2SLGBTQ communities was important. When asked about intergenerational 2SLGBTQ housing programs, 83% indicated that this was important to them. In addition, 94% of respondents felt that housing programs for 2SLGBTQ youth in care and/or experiencing homelessness and 2SLGBTQ seniors were important. Further, 78% wanted to see data collection of sexual orientation/gender identity for people accessing residential care facilities.

Our data also provided some important insights into the information needs of 2SLGBTQ populations regarding housing. Only 41% of respondents felt they had sufficient knowledge of their rights related to housing while 32% did not and 27% were uncertain. Over half (57%) of respondents reported that they most frequently access housing-related information through social media.

Section 3: Focus Group Data

Introduction

In addition to the data our research team collected from the online national survey, we also examined housing issues for older LGBT individuals through focus groups held in cities in five Canadian provinces: British Columbia, Alberta, Manitoba, Ontario, and Nova Scotia. Older LGBT individuals were invited to share their views and experiences on housing. The focus groups provided an important means to bring some of the key findings from the online survey forward for discussion and further elaboration. As the project progressed, we also invited younger members of the community to participate to share their thoughts on possible intergenerational housing models and policies. Focus group questions were designed to spark conversation about the unique housing issues in relation to safe, affirming, and affordable housing for this population, as well as innovative housing interventions, models, policies, and practices.

Participant Demographics

A total of 52 people participated in the focus groups, ranging in age from 39 to 94 (additionally, a 19-year old participated in one focus group), with median age being 66. A variety of sexual orientations and gender identities were represented and about half identified as cisgender (11 preferred not to answer the question about their gender identity). Over 50% had a university degree or higher, most self-identified as Caucasian/white, and approximately 30% self-identified as a person with a disability.

Analysis

Focus groups were audio recorded, transcribed verbatim, and managed using MAXQDA qualitative data software. Informed by a social ecological framework, researchers carried out content analysis of the transcripts, interpreting and identifying key themes from the data. Six key themes were identified through the analysis of the open-ended focus group data. Each theme is briefly discussed in the following sections.

Key Themes

Fear of discrimination

Salient in all the focus group sessions was the perception that housing experiences had been or could be fraught with subtle or outright homophobia and/or transphobia. Focus group participants expressed fear of LGBT-based discrimination while seeking housing and shared stories of first and secondhand situations exemplifying this. While participants felt that mainstream culture has changed for the better, many continue to be highly cautious around disclosure of LGBT identities and need assurances of safety and affirmation in order to 'come out' in housing settings.

"I think our generation was brought up differently too. Like, I've been with my partner 35 years and I've never held her hand in public, ever. Like I just-- I personally don't feel comfortable with it... I was brought up to basically hide my identity. Like, I never denied it, but I never went out there expressing it either. You know? There's still people that-- like our neighbours know, but it's just like, two old women living together? Hmm. You know?" -Calgary participant

When discussing care settings, many participants expressed fears of facing discrimination from health and personal care staff, while some felt hopeful that those in the workforce nowadays, especially younger staff, would embody more accepting values than in past decades. Some participants pointed out a lag in acceptance of transgender people, who had additional fears and concerns in various housing settings. Concerns were also raised about continuing lack of acceptance in rural areas and in housing affiliated with certain religious groups.

"...a very, very good friend who is a trans woman in this case-- tremendous fear.... Around shock and questions from whatever setting she might be in particularly if it's healthcare, and you know, fear of danger and violence in pretty well every setting. Whether that's independent, supported, assisted living-- and even the woman I'm talking about who's reasonably affluent and capable had a lot of fear about being outed in settings in which she didn't feel safe. I thought that was interesting because it felt like something that was more-- there was a time, you know, when outing was a popular thing to be doing but that's-- people in rural settings are still living with that. That fear of being outed." -Nanaimo participant

Numerous participants explained that their concerns about care settings were focused on the other older residents who might hold more outdated and discriminatory views while facing little or no repercussions for expressing these. Anti-discrimination laws were seen as helpful, however, participants worried about negative treatment and the overall lack of enforcement of existing laws and policies.

"When you age, you become a little more vulnerable and you kind of think to yourself, 'oh my God am I gonna be strong enough to continue this fight?" Cause it almost feels like that, that we're still forging, we're still opening up new territories and new frontiers, and so-but as we're finding out it's the younger generations as service providers aren't-they're not really the problem, right? It's those-it's the other tenants in buildings or other people in your community that-we heard anyway that there were lots of concerns about." -Calgary participant

While some participants felt that non-LGBT spaces could potentially be isolating and dangerous, others strongly disagreed with the idea of creating LGBT-specific housing. The lasting impacts of historical exclusion and discrimination were salient in the words of several participants who felt that LGBT-specific housing could ghettoize the LGBT community and result in targeting the community with homophobic and transphobic violence and harassment.

"That would be my nightmare! I've worked all my life to get out of the ghetto, I don't want to be back into one!" -Nanaimo participant

"The way the world is turning... that would be a hell of a good opportunity for somebody to get rid of a whole bunch of us at once if they wished....Not to labour on fear and all that kinda stuff, but I mean, you just have to be vigilant." -Winnipeg participant

Recognizing intersecting barriers to housing

Throughout the focus group discussions, participants quickly pointed out factors that made finding safe and affirming housing more challenging for LGBT people of varying backgrounds and circumstances. Participants made it clear that there was no universal LGBT experience in housing, and that understanding these intersections is paramount when creating solutions. Intersections

between aging, health, socioeconomic status, and LGBT identity were identified by participants as compounding barriers to safe and affordable housing.

'I have seen many barriers for LGBTQ in subsidized housing. In particular subsidized seniors housing... it's just not housing that's been set up for people who are different or who have different types of presentations, and so in my time working in the seniors sector and supporting seniors, even seniors who are mainstream but are struggling with mental health... certain disabilities are very much marginalized inside those communities. You know, and then you layer on gender and sexual presentations that are not part of the mainstream, heteronormative, and it just ups the anti... And when your choices are limited because you don't have the income and you need to be in subsidized housing, it's-- yeah. It's a significant barrier to layer on, the gender or sexual minority." -Nanaimo participant

Participants felt that affordable housing was a key challenge nationally and this led to concerns about availability of housing for those with financial barriers (e.g. no pension, savings, or family supports) and those with unique age-related care needs that are often stigmatized (e.g. older gay men living with HIV).

"I think when you're talking about affordability I think also, availability, the fact that there's not a lot of vacancies so that means landlords are in the power position and they, even though they're not supposed to, can pick and choose... it's a lot easier for someone to be discriminatory based on how you present..." -Nanaimo participant

"We're the lucky ones. We have that income, we have-- I think there's a fairly strong network of older people in the LGBT community, but there's still this large portion of people who are still in the closet, holed up in their home, they have virtually no money..." -Calgary participant

'I mean is there really a strategy for even aging period, let alone aging with disability or aging with HIV?" -Halifax participant

Discrimination based on one's LGBT identity was felt to be heightened in these instances and which in turn caused individuals to hide their identities. Many participants expressed concern for LGBT people experiencing homelessness and having to navigate the shelter system as it is widely understood that shelters were particularly unsafe spaces for them.

"I also volunteer at a social centre.... I daily see street people and homeless that I know are queer. They don't identify as queer because of a poisonous atmosphere at times. Not all of us are inclusive in our mind, open or compassionate. So, I see them and I'm going-- I look at myself and I say, "what happens to them? Where's their housing?" They choose to live on the street for a variety of reasons-- they're usually older people, meaning long, long years ago when it was unwise to be openly gay, lesbian, etc. So that's my question, where does their housing come from? And I know some of them die. They die on the street." -Ottawa participant

"When we have um, this many people there's no way that some of them aren't gay. So, is it that they're going back into the closet out of a sense of necessity? If you do identify as having mental health or substance use issues, your-- or if you are homeless, precariously housed, if you're experiencing extreme poverty, you are already vulnerable, so are you wanting to add another level of vulnerability by being out as well?" -Nanaimo participant

There was an overarching concern amongst focus group participants about the lack of options for those with increasing healthcare needs and participants worried about LGBT safety in long-term care facilities, especially in rural areas. Some participants raised the issues facing transgender individuals such as landlords who were outwardly hostile and/or refusing to rent to gender diverse individuals. Racism was frequently identified as an intersecting factor, with discussions of the additional barriers faced by LGBT Black, Indigenous, and people of colour seeking housing.

As a home care nurse... I have had someone Two-Spirited, that would ask me as their nurse, "is there a long-term care facility where I can be admitted with like, my own people?" And I said, "are you afraid to be Indigenous or are you afraid to be gay?" He said "both!" and um, I said, "I have no idea" and I'd been nursing now, at that time, for 25 years and um, when I started researching, there wasn't a space identified and I went, "ok, all these space in long-term care facilities, there's gotta be some other clients out there that are Two-Spirited" and once he found out there wasn't a space, he said, he said "it will just increase the barriers for me to be placed in a facility." So he used to be out, now he's in. He's closed in." -Nanaimo participant

Addressing isolation and exclusion through housing

Participants across Canada raised concerns about the issue of isolation in non-affirming housing. These concerns were connected to the need to be cautious around 'coming out,' feeling they might not fit in with majority non-LGBT groups, and that their unique sociocultural needs and interests would go unfulfilled.

"I imagine that 83-year-old person feels very isolated cause they don't want to expose themselves-- they're afraid and they just won't fit in. So neighborhood associations, community groups and stuff-- gay and lesbian people just aren't part of that-- and trans people aren't part of that vocabulary. And so if we're integrating, or finding a place to live, we risk being isolated..." - Nanaimo participant

In discussing new possibilities for affirming housing, participants envisioned housing that purposefully fosters community connectedness between LGBT people and with supportive allies. Participants imagined options that would equitably meet the diverse needs and preferences of LGBT people. While some preferred the idea of housing communities consisting only of older LGBT people as a safe and enjoyable option, others preferred to imagine mixed, but affirming communities.

"Anybody buying a condo would need to know that they are in a structure that was a LGBTQ-friendly structure in addition to some of the areas being very targeted to include people on lower-based income. But the other idea is whether a floor or something within the multi-story could be LGBTQ only for people who feel more comfortable in that kind of a setting." Ottawa participant

"Much housing that's publicly provided, is this-- over here we've got the families, over here we've got the seniors, over here we've got this, over here we've got... you know? So for me from that perspective it's kind of— we have a tendency to silo and ghettoize and that is a barrier... we have these systemic structural barriers to people actually being able to be together in community and not be discriminated. ... What are the potential for intergenerational you know, types of housing rather than siloed by age and other demographics?" -Nanaimo participant

Intergenerational housing, for example, was regarded as an affirming option which would allow older and younger LGBT populations to share housing and related resources and skills. This approach appealed to many who felt that age-specific housing isolates older people. There was an expressed desire amongst participants to create bidirectional support networks with younger generations, especially younger LGBT people, and many felt this was not currently happening in their communities. Participants envisioned housing options that offer a combination of private space, independent space and communal space and where intergenerational activities are available.

"We benefit each other all the way up and down the line. For a lot of these younger folks too, especially our younger queer kids who've been kicked out, disowned, all that kind of stuff. I mean, it gives them a mother, a father, a grandmother, or a grandpa, and it keeps us connected. It keeps us in tune with what's going on in the world, so I'm all for it." -Winnipeg participant

"So how do we create something that's intergenerational and ...intercultural, right? So again, you've got a lot of new Canadians coming from countries where, you know, homosexuality is still a crime... bringing all that together-- there's a daycare centre, and you know-- so, I think it's one of these opportunities... I think there's an opportunity here to create a model community" -Calgary participant

Many focus group participants emphasized the requirement for housing and housing benefits to be flexible to the changing needs of older populations, including those with disabilities. Wanting to avoid multiple moves later in life, participants expressed a desire for housing where multiple levels of housing and care can be flexibly accessed within the same facility which would allow for aging in place.

"Something with enough flexibility so that they can change if the clientele changes. You know, if they're living longer or they have more complex medical needs, is there the flexibility in the space to allow people to stay or at least transition within the building so they keep their same group of friends, but they might move." - Halifax participant

"I think if you're coming up with one solution you've gotta look at what comes next so that people just don't give into another dead end. Get all excited and think ok I've found my place but then ten years later suddenly realize, well, I can't stay here anymore." -Halifax participant

Mobilizing government: Interventions and opportunities

Participants identified multiple opportunities for government-directed interventions to create safe and affordable housing for older LGBT people. These included municipal zoning policies for affordable housing units, government funding, supportive processes for co-housing, and creating accountability structures for initiatives such as equity, diversity and inclusion (EDI) training within care facilities.

"There's this idea of trying to enshrine housing as human right. And I think that's an important thing to try and get different levels of government to buy into, is that as a human you have a right to it. You have a right to safe, affordable housing" -Nanaimo participant

"It could be part of inclusionary zoning. Inclusionary zoning says that you will do-- do it for affordability. Why can't it be inclusionary zoning for affordability with some priorities for special groups because they have been historically discriminated against and not allowed access?" -Ottawa participant

There was widespread consensus on the need for increased financial support from government directly into the hands of those seeking affordable housing. Specifically, some participants felt that portable housing benefits would resolve some problems created by existing rent-geared-to-income programs.

"This is what I was saying about the subsidies for the individual not being in control of the home or the landlord or anybody. Because, if they don't know, then they can't discriminate. And that's happening in some of the homes where I can see it happening, and the management's even discriminating and it's-- they shouldn't be." -Ottawa participant

"It makes sense to bridge rent for \$300 to keep someone where they already are as opposed to going into rentgeared-to-income. Rent geared to income comes out of the city's budget, ok? If we can do-- if we can do a bridge financing and have a separate pot of money, why don't we do that? Why don't we take rent-geared-toincome and do bridge financing and rent-geared-to-income." -Ottawa participant

Some participants suggested the need to shift inclusive housing into the hands of the LGBT community. Many expressed interest in this option but practical and financial barriers made it clear that a supportive, system-level framework would be required for this approach to be sustainable.

"He didn't really want to be ghettoized. He didn't want to see us living in sort of a community of our own. And I've been thinking a lot about that comment, and I've tossed it around in my head and I still can't really come up with whether I'm pro or con. But, if we're looking at housing, do we then-- do we try to build our own community? Do we have-- you know, is that the route that we should go? Do we-- do we have this stepped living, you know? And if we do, then that in my mind means that we, [laughing] "we", god forbid that we build it ourselves because we don't have the finances to do that but, but is it something that we should be looking at so that we have a community that's our own. Um, gated, not gated, I don't care." -Halifax participant

"The government should be willing to subsidize or kick in a bursary or something for people who are willing to try some innovative housing options, because I think if the group of people wanted to organize their own housing and look after it themselves, they're not having all this bureaucracy" -Halifax participant

Operationalizing LGBT-inclusive philosophies

Participants indicated that LGBT-affirming housing requires that housing providers operationalize and concretize their equity, diversity and inclusion philosophies. Further, it was noted that generic inclusion and anti-discrimination policies were seen as ineffective where leadership and enforcement procedures were lacking. Rather, it was felt that there is the need to put in place LGBT anti-discrimination approaches for landlords, facility or care staff, and other tenants/residents which mirror, enact and enforce the philosophy of EDI.

"They have excellent criterion but the follow-up is pathetic. Everyone's supposed to be so inclusive but ... friends and my more like, acquaintances and they claim they've had their lives threatened and even straight allies had their lives threatened by people.... But they say well you go to the police. Well, that's true I mean the police are there for a reason but if housing has this code of conduct and it's clearly being broken, isn't there some kind of process with teeth and a backbone and a will that can enforce that code instead of making it pie in the sky when you die?" -Halifax participant

"You can put you know, an inclusive flag on your doors... but how do you make sure that if someone feels unsafe, that they have somewhere to go? ... That the management is willing to take some pretty decisive steps? ... So creating even a process, right?" -Calgary participant

To further operationalize inclusive philosophies, participants suggested inclusive language on documentation such as housing information materials and intake forms. Many participants expressed the need to be given the option to disclose their LGBT identity within a supportive environment.

"I need gender diversity, you know, not just training but sort of directive and policy around that, and forms that acknowledge that there's something other than Mrs, Mr, you know, he, she, etc." -Nanaimo participant

Many participants suggested mandatory EDI training for all management and staff working in housing, as well as education for residents/tenants living in communal housing settings.

"Especially for-- if anyone is vulnerable as a vulnerable population, to know that I feel secure, and am not going to be abused in any way certainly perhaps because I'm a woman, perhaps because I'm a leshian, perhaps because I have a mental illness, perhaps because I'm a visible minority-- all those factors are important to me and our society as it exists today make us vulnerable in certain sectors. So if we have that sense of security, dignity, and respect which goes back to education of the-- yes, absolutely the managers, the institution, absolutely-- but the people who actually touch us are the caregivers. So, if there could be, perhaps a different type of education, another module put in to open it up, people like ourselves going in, people from your department going in and changing the curriculum." -Ottawa participant

"I really feel we need, in addition to policies around residents, families. Because if it's not open and apparent with residents' families, it's going to be very difficult to have that inclusion.... In that way of it being a community of people, the families, the volunteers, whoever is there... they're all partners together. And I think that's incredibly important because if we just focus on training staff—even that would be a big improvement, by the way— But on the other hand it's not really going to create what we want in the long-run, which is this very inclusive and affirming sort of community." -Nanaimo participant

Increasing LGBT acknowledgment and support in housing

Alongside the enforcement of anti-discrimination and inclusivity policies in housing, focus group participants wanted to see the existence of LGBT people acknowledged, respected, and celebrated. This requires an understanding of the social and cultural histories and needs of LGBT older adults and creating opportunities to meet those needs in housing. Participants shared frustrations with housing providers who claimed to be inclusive but did not know whether they even had any LGBT residents/tenants.

"They could at least show some diversity and inclusivity in their basic advertising. Their websites show all white, heterosexual individuals and couples. They advertise their programs and activities surrounding heteronormative families... no Pride of any kinds...no indication whatsoever that someone like me would be welcome there. I might be, but I can't see it." -Winnipeg participant

"By having a culture within the building, for instance with staff, etc. That's what you need to promote. So it's ok-- so if it gets out that someone's gay, then that's fine and let's celebrate that.... "Oh, can we go to Pride?" Well, yeah, absolutely." -Calgary participant

Suggestions included advertisements depicting LGBT people or pride flags and explicit messages of welcome. In communal living settings such as long-term care and assisted living facilities, participants wanted involvement in Pride celebrations, LGBT-specific events and activities, and other opportunities for LGBT people to form connections with each other and their allies.

"I wish that they could at least create a couple of opportunities a year, minimum, where they're bringing people together and encourage some level of community and so people get to know each other and get to respect each other for who they are." -Calgary participant

"Social settings, I think that might be a really big thing in it because a lot of these um, congregate housing settings have social activities but if the LGBT community does not feel welcome, they're not gonna access that. You're still gonna have the isolation of these elderly people, and I think that's gonna be a really, really big problem." -Ottawa participant

"My model of growing older is to be living with birds of a feather somehow, whether that's in a house or on a floor or in a building, or whatever... Not really for safety reasons and not for health reasons but I think because we'll have a lot more fun together." -Halifax participant

Conclusions

In keeping with the social ecological model (SEM), the following section offers a series of recommendations that map onto the different levels of SEM influence. As indicated in both the survey and focus group data, there are a number of key housing policy and programming issues that are in need of urgent attention in addressing the unique housing needs of and concerns among older LGBT Canadians. Specifically, at the level of Municipal, Provincial, and Federal policy development and analysis, financial issues such as rent control, rent subsidies, portable benefits, supports for first-time home buyers, support for accessibility upgrades are needed to help meet the housing needs of LGBT older adults. In addition, addressing zoning and funding considerations for affordable housing, including LGBT-specific housing, is warranted. Additional attention to procedures for landlord licensing and supports for co-housing and intergenerational options is needed as is greater focus on the current regulations and standards for care facilities regarding inclusion and training. Taking an intersectional lens to housing policy development is needed in an effort to address the issues associated with anti-discrimination laws specific to the housing sector.

At the level of the Community, greater attention to intergenerational programming and related supports to address issues of social isolation among older LGBT populations is needed. In addition, supports for homeless LGBT people across the life course are needed. When we consider the organizational or institutional level, we see the need for policy enforcement and procedures for anti-discrimination approaches in housing for older LGBT Canadians. This can be further facilitated through the development of LGBT-specific programming and networking within facilities which can increase awareness about LGBT history and the unique issues facing these populations as they age. Given the overall dearth of systematically collected data on residents in, for example, supportive housing, inclusive approaches are needed, including offering tenants or residents the option to safely disclose LGBT identity to housing staff. Overall, there is a need to provide equity, diversity and inclusion (EDI) training for housing staff, management, residents and families to ensure older LGBT residents have a safe and affirming place to call home.

References

- 1. Statistics Canada (2012). Residential care facilities 2009/2010. Ottawa, ON: Author
- 2.Statistics Canada (2018). Year Book. Seniors. Ottawa, ON: Author. https://www150.statcan.gc.ca/n1/pub/11-402-x/2011000/chap/seniors-aines/seniors-aines-eng.htm
- 3.Addis, S., Davies, M., Greene, G., MacBride-Stewart, S., & Sheperd, M. (2009). The health, social care and housing needs of lesbian, gay, bisexual and transgender older people: A Review of the literature. Health and Social Care, 17(6):647-658. DOI:10.1111/j.1365-2524.2009.00866x
- 4.Adelman, M., Gurevitch, J., de Vries, B., & Blando, J. (2006). Open house: Community building and research in the LGBT aging population. In Kimmel, D., Rose, T., David, S. (Eds.), Lesbian, gay, bisexual, and transgender aging: Research and clinical perspectives, (pp. 247–264). New York, NY: Columbia University Press.
- 5.Brotman, S., Ferrer, I., Sussman, T., Ryan, B., & Richard, B. (2015). Access and equity in the design and delivery of health and social care to LGBTQ seniors: A Canadian perspective. In Orel, N. & Fruhauf, C. (Eds.), Lesbian, gay, bisexual and transgender older adults and their families: Current research and clinical applications (pp. 111–140). Washington, DC: American Psychological Association.
- 6. Brotman, S., Ryan, B., & Cormier, R. (2003). The health and social service needs of gay and lesbian elders and their families in Canada. The Gerontologist. 43(2), 192–202.
- 7. Canadian Mortgage and Housing Corporation. (2017). Seniors' Rental Housing: Canada, Provinces and Metropolitan Areas. Ottawa: CMHC.
- 8. Banerjee, A. (2007). An overview of long-term care in Canada and selected provinces and territories. Toronto, ON: Women and Health Care Reform Group, York University.
- 9. Cahill, S., South, K., & Spade, J. (2000). Outing age: Public policy issues affecting gay, lesbian, bisexual and transgender elders. New York, NY: National Gay and Lesbian Task Force Policy Institute.
- 10. Government of Canada (2018). National Housing Strategy: A Place to Call Home. Ottawa: Department of Family, Children and Social Development. https://www.placetocallhome.ca/pdfs/CanadaNational-Housing-Strategy.pdf
- 13. Canadian Centre for Gender and Sexual Diversity. (2018). Queer Canadian History Timeline Precolonization to Present. Toronto: CCGSD.
- 14. Kinsman, G. (1996). The Regulation of Desire. Toronto: Black Rose.
- 15.Bauer, G. R., Hammond, R., Travers, R., Kaay, M., Hohenadel, K. M., & Boyce, M. (2009). "I don't think this is theoretical. This is our lives": How erasure impacts healthcare for transgender people. Journal of the Association of Nurses in AIDS Care, 20(5):348–361.
- 16.Bell, S. A., Bern-Klug, M., Kramer, K. W. O., & Saunders, J. B. (2010) Most nursing home social service directors lack training in working with lesbian, gay, and bisexual residents. Social Work in Health Care. 49(9): 814–831.
- 17. Daley, A. E., & MacDonnell, J. A. (2011). Gender, sexuality and the discursive representation of access and equity in health services literature: Implications for LGBT communities. International Journal for Equity in Health, 10(40), 1–10.

- 18. Fredriksen-Goldsen, K. I., Hoy-Ellis, C. P., Goldsen, J., Emlet, C. A., & Hooyman, N. R. (2014). Creating a vision for the future: Key competencies and strategies for culturally competent practice with lesbian, gay, bisexual and transgender (LGBT) older adults in the health and human services. Journal of Gerontological Social Work, 14(14), 37–41.
- 19. Dobbs, D., Eckert, J. K., Rubinstein, B., Keimig, L., Clark, L., Frankowski, A. C., & Zimmerman, S. (2008). An ethnographic study of stigma and ageism in residential care or assisted living. The Gerontologist. 48(4):517–526.
- 20. Furlotte, C., Gladstone, J., Cosby, R., & Fitzgerald, K. (2016). "Could we hold hands?" Older Lesbian and Gay Couples' Perceptions of Long-Term Care Home and Home Care. 35(4): 432-446. DOI: 10.1017/S0714980816000489
- 21. Gardner, A. T., de Vries, B., & Mockus, D. S. (2014). Aging out in the desert: Disclosure, acceptance and service use among midlife and older lesbians and gay men. Journal of Homosexuality. 61(1):129–144.
- 22. Grant, J. M., Mottet, L. A., Tanis, J., Harrison, J., Herman, J. L., & Keisling, M. (2011). Injustice at every turn: A report of the national transgender discrimination survey. Washington, DC: National Center for Transgender Equality and National Gay and Lesbian Task Force.
- 23. Grigorovich, A. (2016). The meaning of quality of care in home care settings: Older lesbian and bisexual women's perspectives. Caring Sciences, 30:108-116. DOI: 10.1111/scs.12228
- 24. Hughes, A. K., Harold, R. D., & Boyer, J. M. (2011). Awareness of LGBT aging issues among aging services network providers. Journal of Gerontological Social Work, 54, 659–677.
- 25. Hughes, M. (2007). Older lesbians and gays accessing health and aged-care services. Australian Social Work, 60, 197–209. Institute of Medicine. (2011). The health of lesbian, gay, bisexual, and transgender people: Building a foundation for better understanding. Washington, DC: National Academies Press.
- 26. Institute of Medicine. (2011). The Health of Lesbian, Gay, Bisexual and Transgender People: Building a Foundation for Better Understanding. Washington, DC: The National Academies Press. http://www.iom.edu/Reports/2011/The-Health-ofLesbian-Gay-Bisexual-and-Transgender-People.aspx.
- 27. Israel, T., Walther, W., Gortcheva, R., & Perry, J. S. (2011). Policies and practices for LGBT clients: Perspectives of mental health services administrators. Journal of Gay and Lesbian Mental Health Providers, 15, 152–168.
- 28. Jackson, N. C., Johnson, M. J., & Roberts, R. (2008). The potential impact of discrimination fears of older gays, lesbians, bisexuals and transgender individuals living in small-to moderate-sized cities on long-term health care. Journal of Homosexuality, 54(3), 325–339.
- 29. Johnson, M. J., Jackson, N. C., Arnette, J. K., & Koffman, S. D. (2005). Gay and lesbian perceptions of discrimination in retirement care facilities. Journal of Homosexuality, 49(2), 83–102.
- 30. MacKay, K., Wellner, J., & OMA Health Promotion. (2013). Housing and Health: OMA calls for urgent government action, housing-supportive policies to improve health outcomes of vulnerable populations. Ontario Medical Review. July/August.
- 31. MacDonnell, J., & Daley, A. (2015). Examining the development of positive space in health and social service organizations: A Canadian exploratory study. Journal of Gay and Lesbian Social Services. 27(3):263–301.

- 32. Mahieu, L., Cavolo, A. & Chris Gastmans. (2018). How do community-dwelling LGBT people perceive sexuality in residential aged care? A systematic literature review, Aging & Mental Health. DOI: 10.1080/13607863.2018.1428938
- 33. McFarland, P. L., & Sanders, S. (2003). A pilot study about the needs of older gays and lesbians. Journal of Gerontological Social Work.40(3):67–80.
- 34. MetLife Mature Market Institute & The Lesbian and Gay Aging Issues Network of the American Society on Aging. (2010). Out and aging: The MetLife study of lesbian and gay baby boomers. Journal of GLBT Family Studies. 6(1):40–57.
- 35. Murray, E., Numer, M., Merritt, B., Gahagan, J. & Comber, S. (2012). Healthy-aging among LGBT seniors in Canada: A review of the literature. International Journal of Health, Wellness, and Society, 1(4):179-192. Retrieved from http://ijw.cgpublisher.com/
- 36. Moore, D. (2009). Designing long-term care for lesbian, gay, bisexual, transsexual and transgender people. In Armstrong, P., Boscoe, M., Clow, B., Grant, K., Haworth-Brockman, M., Jackson, B., ... & Springer, J. (Eds.), A place to call home: Long-term care in Canada, (pp.104–110). Halifax, NS: Fernwood.
- 37. Muraco, A., & Fredriksen-Goldsen, K. (2011). "That's what friends do:" Informal caregiving for chronically ill lesbian, gay, and bisexual elders. Journal of Social and Personal Relationships. 28:1073–1092.
- 38. Ontario Long-Term Care Homes Act (2007, c. 8). Retrieved from: https://www.ontario.ca/laws/statute/07108
- 39. Ross, E., Scott, M., & Wexler, E. (2003). Scan on the health and housing needs of ageing lesbians. Toronto, ON: Older Lesbians in Valued Environments and Sherbourne Health Centre.
- 40. Donaldson, W. V., Asta, E. L., & Vacha-Haase, T. (2014). Attitudes of heterosexual assisted living residents towards gay and lesbian peers, Clinical Gerontologist, 37(2), 167–189.
- 41. Fredriksen-Goldsen, K. I., Kim, H.-J., Barkan, S. E., Muraco, A., & Hoy-Ellis, C. P. (2013). Health disparities among lesbian, gay male, and bisexual older adults: Results from a population-based study. American Journal of Public Health. 130(1):1802–1809.
- 42. Gahagan, J., Humble, A., Gutman, G., & de Vries, B., (2018). Older LGBT Adults' End-of-Life conversations: Findings from Nova Scotia, Canada. Atlantis: Critical Studies in Gender, Culture and Social Justice. 39(1):31-40.
- 43. Grenier, A., Barken, R., Sussman, T., Rothwell, D., Bourgeois-Guérin, V., & Lavoie, J. (2016). A Literature Review of Homelessness and Aging: Suggestions for a Policy and Practice-Relevant Research Agenda. Canadian Journal on Aging / La Revue Canadienne Du Vieillissement. 35(1): 28-41. doi:10.1017/S0714980815000616
- 44. Croghan, C., Moone, R. & Olson, A. (2013). Friends, Family, and Caregiving Among Midlife and Older Lesbian, Gay, Bisexual, and Transgender Adults. Journal of Homosexuality. 61:79-102. DOI: 10.1080/09918369.2013.835238.
- 45. de Vries, B. (2009). Aspects of life and death, grief and loss in lesbian, gay, bisexual, and transgender communities. In Doka, K. &Tucci, A. S. (Eds.), Living with grief: Diversity and end-of-life care (pp. 243–257). Washington, DC: Hospice Foundation of America.
- 46. Golant, S. (2015). Aging in the Right Place, Baltimore: Health Promotion Press, Inc.

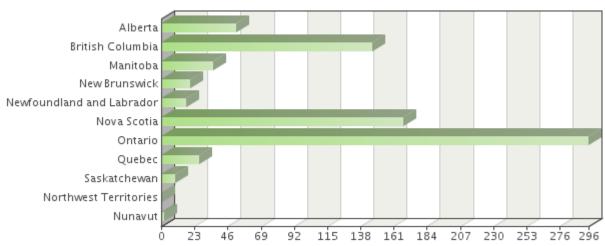
- 47. King, A. & P. Stoneman, (2017). "Understanding SAFE Housing putting older LGBT* people's concerns, preferences and experiences of housing in England in a sociological context", Housing, Care and Support. 20(3): 89-99, https://doi.org/10.1108/HCS-04-2017-0010
- 48. Creswell, J., & Poth, C. (2018). Qualitative inquiry and research design: Choosing among five approaches (4th ed.). Thousand Oaks, CA: Sage.
- 49. Creswell, J. (2014). Research design: Qualitative, quantitative, and mixed methods approaches (4th ed.). Thousand Oaks, CA: Sage.
- 50. Fredriksen-Goldsen, K., Kim, H. Shiu, C., et al. (2015). Successful aging among LGBT older adults: Physical and mental health-related quality of life by age group. Gerontologist. 55:154–168.
- 51. Carlson, J., Sallis, J., Conway, T., Saelens, B., Franke, L., Kerr, J., Cain, K.,& King, A. (2012). Interactions between psychosocial and built environment factors in explaining older adults' physical activity. Preventive Medicine. 54(1):68-73.
- 52. Fenway Institute (2017). Glossary of LGBT terms for health care teams. Boston, MA: National LGBT Health Education Center. Available at: https://www.lgbthealtheducation.org/wpcontent/uploads/2016/03/LGBT-Glossary_Jun2017.pdf
- 53. Carrie L. Graham, PhD, MGS Susan L. Ivey, MD, MHSA Linda Neuhauser. (2009). From Hospital to Home: Assessing the Transitional Care Needs of Vulnerable Seniors. The Gerontologist. 49(1):23–33. https://doi.org/10.1093/geront/gnp005
- 54. Keller, H., Dwyer, J., Senson, C., Edwards, V. & Edward, G. (2007). A Social Ecological Perspective of the Influential Factors for Food Access Described by Low-Income Seniors. Journal of Hunger & Environmental Nutrition. 1(3): 27-49. https://doi.org/10.1300/J477v01n03_03
- 55. Lee, M. G., & Quam, J. K. (2013). Comparing supports for LGBT aging in rural versus urban areas. Journal of Gerontological Social Work.56(2):112–126.
- 56. Leviten-Reid, C., & Lake, A. (2016). Building Affordable Rental Housing for Seniors: Policy Insights from Canada. Journal of Housing for the Elderly. 30(3): 253-270. DOI: 10.1080/02763893.1198738
- 57. Nowatzki, N., & Grant, K. (2011). Sex is not enough: The need for gender-based analysis in health research. Health Care for Women International.32:263-277.
- 58. Canadian Institutes for Health Research (2018). How to integrate sex and gender into research. Available at http://www.cihr-irsc.gc.ca/e/50836.html
- 59. Clow, B., Pederson, A., Haworth-Brockman, M., & Bernier, J. (2009). Rising to the challenge: Sex- and gender-based analysis for health planning, policy and research in Canada. Halifax: ACEWH.
- 60. Donner, L. (2005). Including Gender in Health Planning: A Guide for Regional Health Authorities. Prairie Women's Health Centre of Excellence http://www.pwhce.ca/pdf/gba.pdf
- 61. Status of Women Canada. (2018). Apply GBA+ (Gender-based analysis plus) to your work. https://www.swc-cfc.gc.ca/gba-acs/apply-appliquez-en.html
- 62. Status of Women Canada (2017) Government of Canada's Approach: Gender-based Analysis Plus. https://www.swc-cfc.gc.ca/gba-acs/approach-approach-approche-en.html
- 63. Status of Women Canada (2015). Audit of Gender-based Analysis: Fall 2015 Report of the Auditor General of Canada. https://www.swc-cfc.gc.ca/gba-acs/plan-action-2016-en.PDF

- 64. Frost, D., LeBlanc, A., & DeVries, B. (2017). Couple-level Minority Stress: An Examination of Same-sex Couples' Unique Experiences. Journal of Health and Social Behavior. 58(4): 455-472.
- 65. Canadian Mortgage and Housing Corporation. (2016). Determinants of Seniors Housing Choices Part II. Ottawa: CMHC.
- 66. Canadian Mortgage and Housing Corporation (2011). Census/National Housing Survey Housing Series: Issue 9 The Housing Conditions of Canada's Senior Households. Ottawa: CMHC.
- 67. Canadian Institute for Health Information, Statistics Canada, and Health Canada. Canadian Community Health Survey. 2015. Available at www23.statcan.gc.ca/imdb/p3Instr.pl? Function=getInstrumentList&Item_Id=238890&UL=1V&
- 68. Colpitts, E., & Gahagan, J. (2016). The Utility of resilience as a conceptual framework for understanding and measuring LGBTQ health. International Journal for Equity in Health, 15:60. https://doi.org/10.1186/s12939-016-0349-1
- 69. Ecker, J., Aubry, T., & Sylvestre, J. (2017). A Review of the literature on LGBTQ adults who experience homelessness. Journal of Homosexuality. DOI10.1080/00918369.2017.1413277.
- 70. Harvard University (1999). Harvard Authorship Guidelines. Boston: Harvard University. Available at https://www.hsph.harvard.edu/faculty-affairs/authorship-guidelines/
- 71. House of Commons Standing Committee on the Status of Women. Implementing gender-based analysis plus in the Government of Canada. Report of the Standing Committee on the Status of Women. http://publications.gc.ca/collections/collection-2016/parl/xc71-1/XC71-1-421-4-eng.pdf
- 72. Jones, G., & Gahagan, J. (2015). Migration, integration and health for aging LGBTQ2 populations in the EU: A strengths-based approach to policy. International Archives of Medicine 8(64), 1-10. https://doi.org/10.3823/1663
- 73. Lachowsky, N., Gahagan. J. & Anderson, K. (2018). Pathways to Health Equity for LGBTQ Populations. In N. Arya & T. Piggott (Eds.), Under-Served: Health Determinants of Indigenous, Innercity, and Migrant Populations in Canada. Toronto: Canadian Scholars.
- 74. Lee, E., Brotman, S. (2015) Social work and sexual and gender diversity (pp. 259-287). In Ives, N., Denov, M., Sussman, T. Introduction to social work in Canada: Histories, contexts and practices. Don Mills, ON: Oxford University Press.
- 75. Lune, H., & Berg, B. (2008). Qualitative research methods for the social sciences. 9th Ed. Toronto: Pearson.
- 76. Murray, E., Numer, M., Merritt, B., Gahagan, J. & Comber, S. (2012). Healthy-aging among LGBT seniors in Canada: A review of the literature. International Journal of Health, Wellness, and Society, 1(4), 179-192. Retrieved from http://ijw.cgpublisher.com/
- 77. Services and Advocacy for GLBT Elders (SAGE) (2014). Out & visible. The experiences and attitudes of lesbian, gay, bisexual and transgender older adults, ages 45–75. New York, NY: Author.
- 78. Smith, L. A., McCaslin, R., Chang, J., Martinez, P., & McGrew, P. (2010). Assessing the needs of older gay, lesbian, bisexual, and transgender people: A service-learning and agency partnership approach. Journal of Gerontological Social Work. 53(5):387–401.

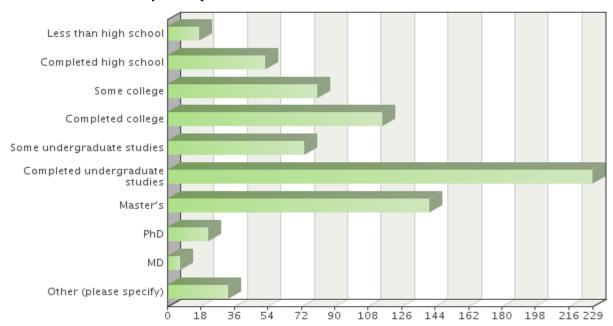
- 79. Sullivan, K.M. (2014). "Acceptance in the domestic environment: the experience of senior housing for lesbian, gay, bisexual, and transgender seniors". Journal of Gerontological Social Work. 57(2-4): 235-50.
- 80. Sussman, T., & Dupuis, S. L. (2014). Supporting residents moving into long-term care: Multiple layers shape residents' experiences. Journal of Gerontological Social Work. 57(5):438–459. 81. Patterson, J., Jabson, J., & Bowen, D. (2017). Measuring sexual and gender minority populations in health surveillance. LGBT Health. 4(2):82-85.
- 82. Walt, G., Shiffman, Schneider, H., Murray, S., Brugha, R., & Gilson, L. (2008). 'Doing' health policy analysis: methodological and conceptual reflections and challenges. 23:308-317. DOI:10.1093/heapol/czn024
- 83. Westwood, S. (2017). Gender and older LGBT* housing discourse: The marginalized voices of older lesbians, gay and bisexual women. Housing, Care and Support. 20(3):100-109. DOI:10.1108/HCS-082017-0020
- 84. Westwood, S., (2016). LGBT* ageing in the UK: spatial inequalities in older age housing/care provision. Journal of Poverty and Social Justice. 24(1): 63-76.
- 85. Westwood, S. (2015). "We see it as being heterosexualised, being put into a care home': gender, sexuality and housing/care preferences among older LGB individuals in the UK". Health & Social Care in the Community. 24(6). doi: 10.1111/hsc.12265.
- 86. Willis, P., Maegusuku-Hewett, T., Raithby, M. and Miles, P. (2016), "Swimming upstream: the provision of inclusive care to older lesbian, gay and bisexual (LGB) adults in residential and nursing environments in Wales". Ageing & Society. 36(2): 282-306.
- 87. Yang, J, Chu, Y & Salmon, M. (2018). Predicting Perceived Isolation Among Midlife and Older LGBT Adults: The Role of Welcoming Aging Service Providers. The Gerontologist, 58(5): 904–912. https://doi.org/10.1093/geront/gnx092
- 88. Travis, L. A., & Arizona, P. (2011). What you should know about LGBT older adults. ELDER CARE.

Appendix - Online Survey Data

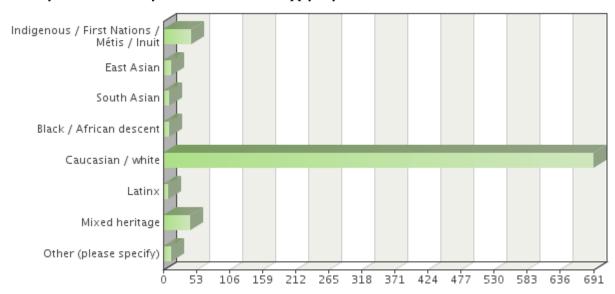
In which province or territory do you currently live?



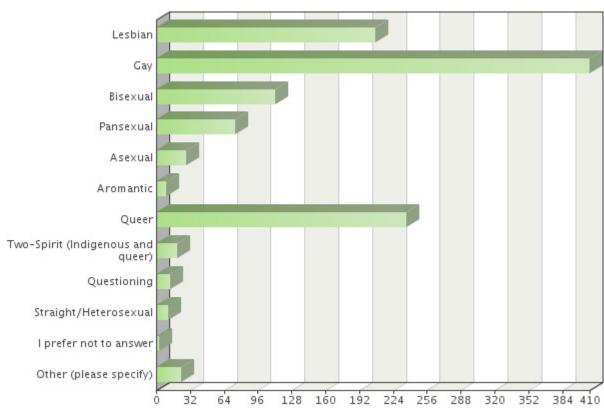
What education level have you completed?



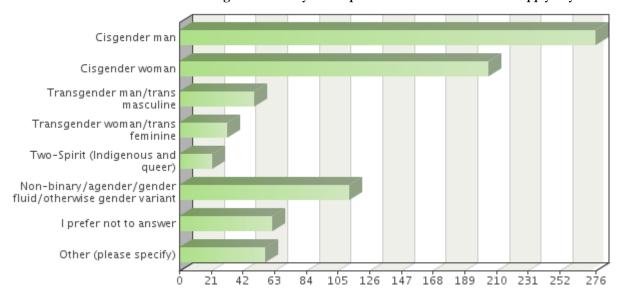
What is your ethnic identity? Please select all that apply to you.



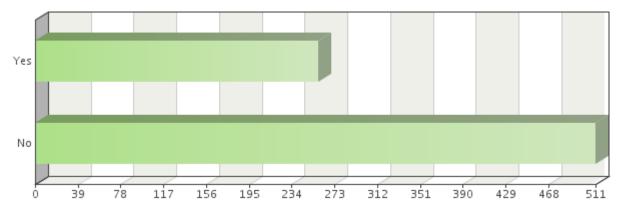
Here is a list of terms used to describe sexual and romantic orientation. Please select all that apply to you.



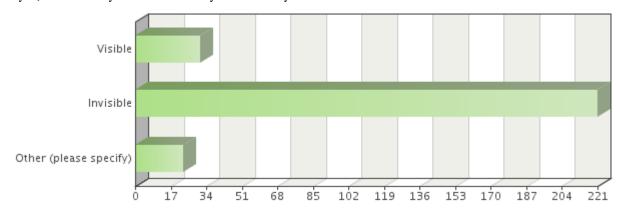
Here is a list of terms used to describe gender identity and expression. Please select all that apply to you.



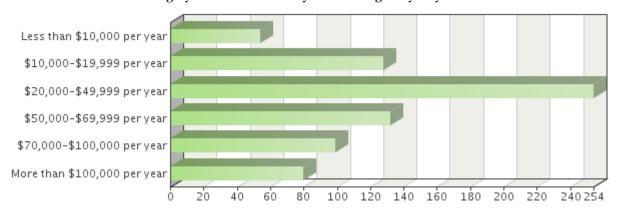
Do you identify as a person with a disability?



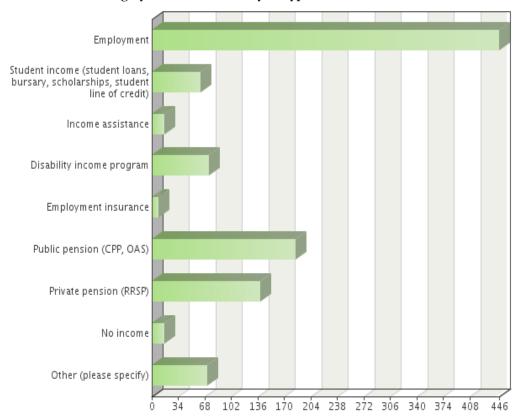
If yes, how would you best describe your disability?



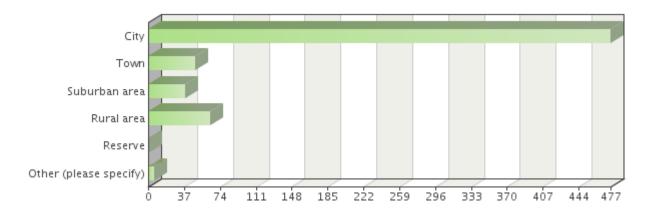
Please select the income category that best describes your current gross yearly income.



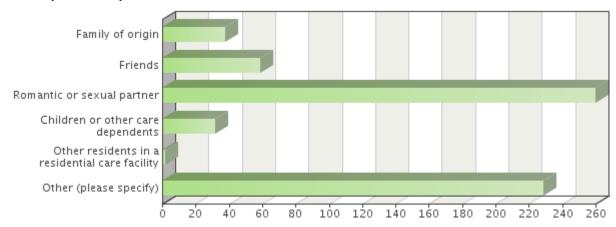
Please select the category that best describes your type of income.



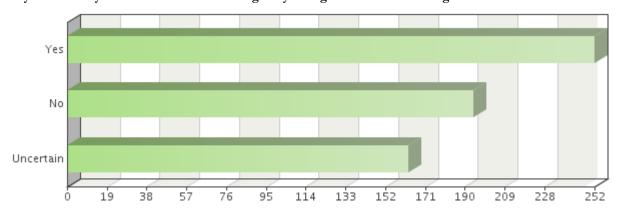
Where do you currently live?



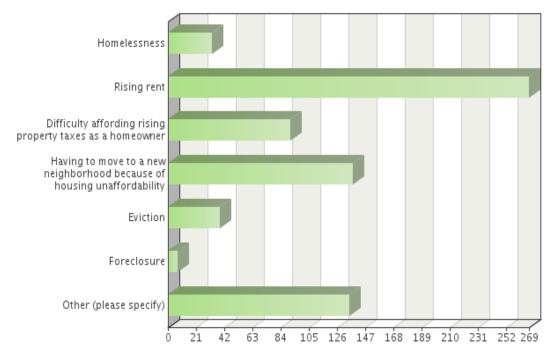
Who do you currently live with?



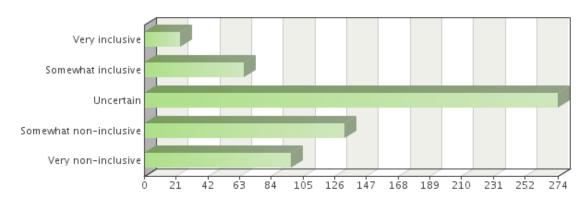
Do you feel like you have sufficient knowledge of your rights related to housing?



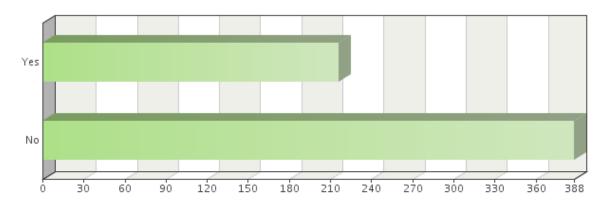
What housing challenges have you experienced in the past five years, if any?



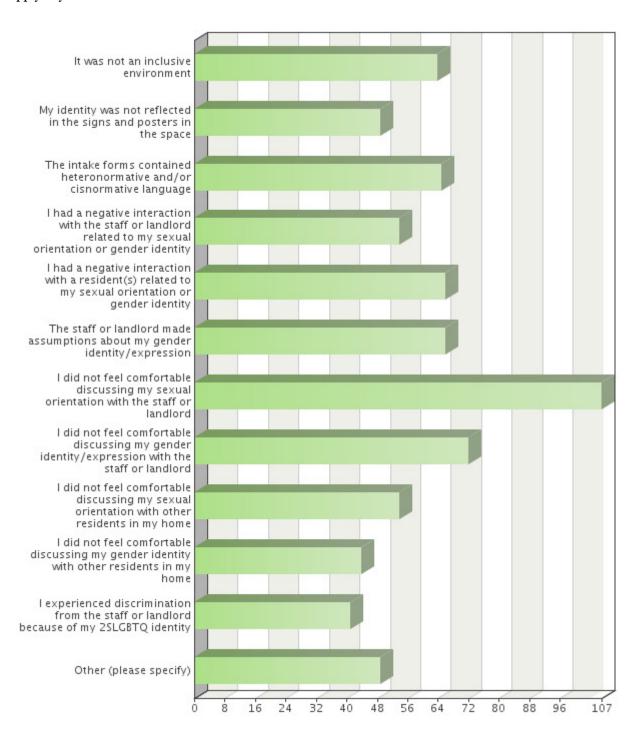
In general, how would you describe the inclusiveness of housing facilities in Canada for 2SLGBTQ populations?



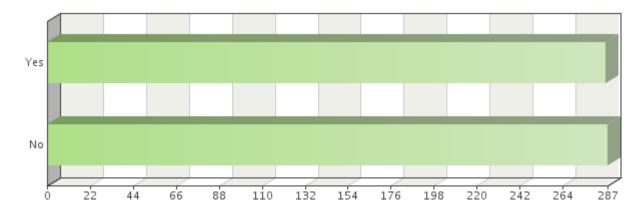
Have you had a negative experience(s) in the last five years related to your housing?



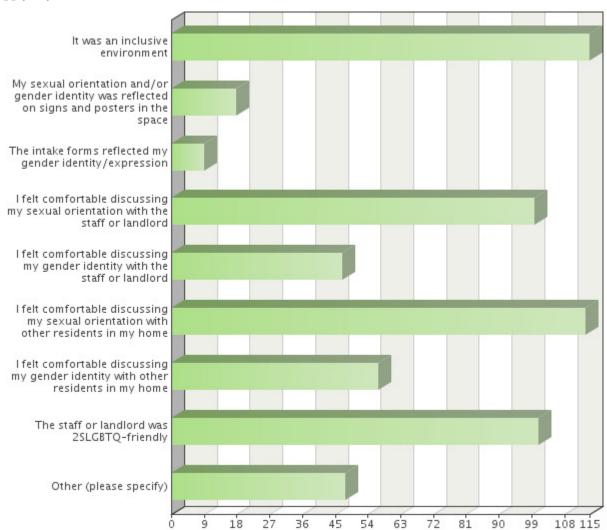
If you answered yes to the previous question, what made this experience(s) negative? Please select all that apply to you.



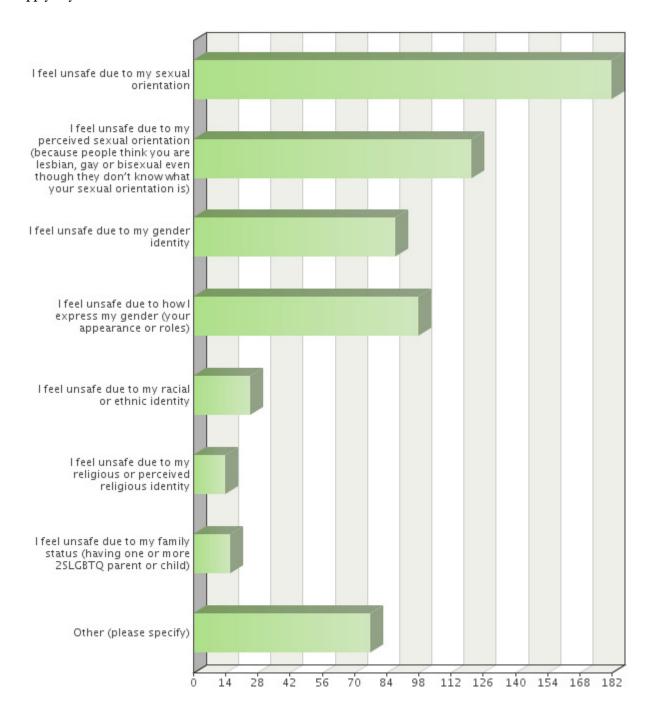
Have you had a positive housing experience(s) in the last five years related to your sexual orientation/behaviours or gender identity/expression?



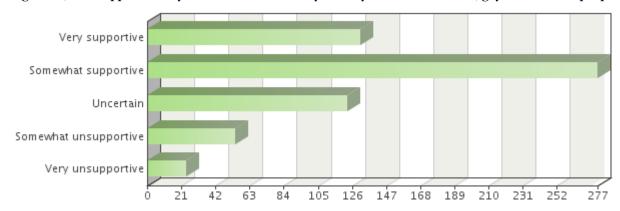
If you answered yes to the previous question, what made this experience(s) positive? Please select all that apply to you.



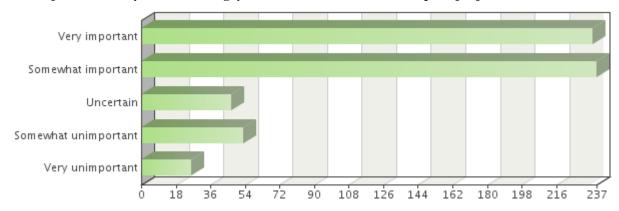
If you feel unsafe in the community where you live, is it related to any of the following? Please select all that apply to you.



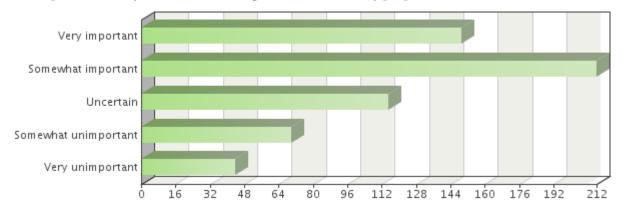
In general, how supportive do you think the community where you live is of lesbian, gay and bisexual people?



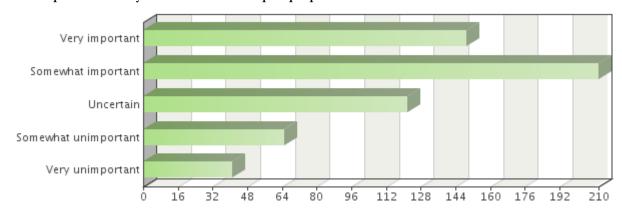
How important is it to you to live with gay, lesbian, bisexual, asexual and queer people?



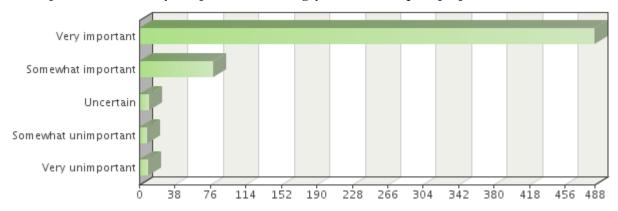
How important is it to you to live with transgender and non-binary people?



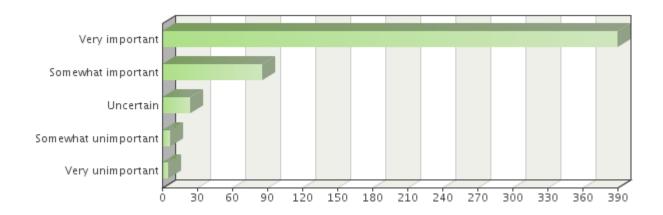
How important is it to you to live with Two-Spirit people?



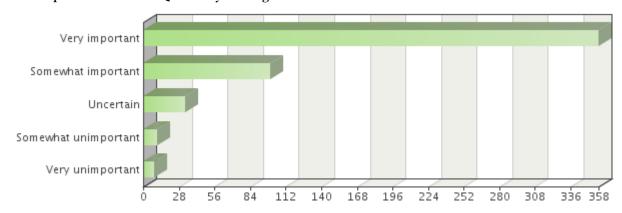
How important is community acceptance of lesbian, gay, bisexual and queer people?



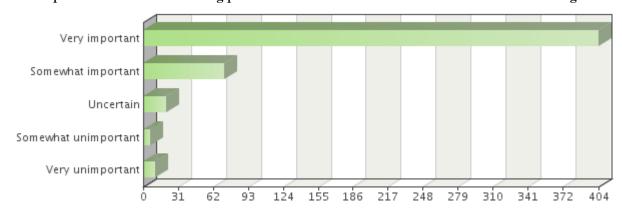
How important is 2SLGBTQ diversity training for staff working in the housing sector?



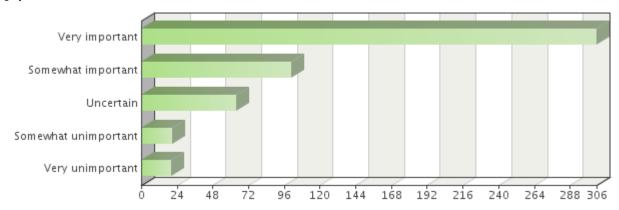
How important is 2SLGBTQ diversity training for landlords?



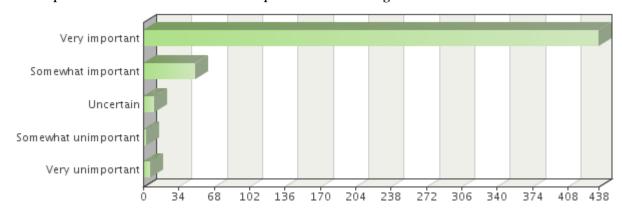
How important are affordable housing policies for tenants such as rent control and landlord licensing?



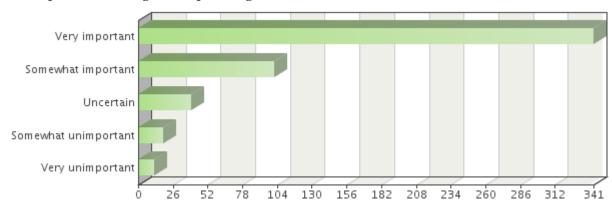
How important are Affordable housing policies for first-time home buyers such as interest-free down payment loans?



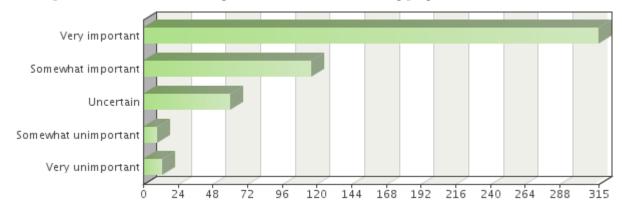
How important are anti-discrimination laws specific for the housing sector?



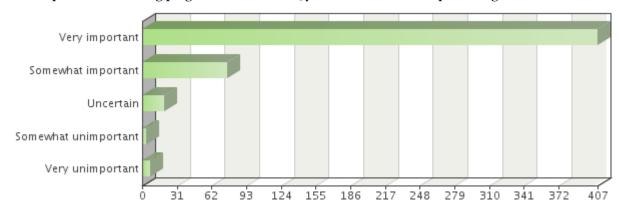
How important is funding for co-op housing and the creation of intentional 2SLGBTQ communities?



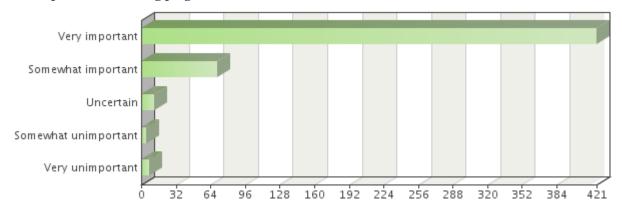
How important is the creation of intergenerational 2SLGBTQ housing programs?



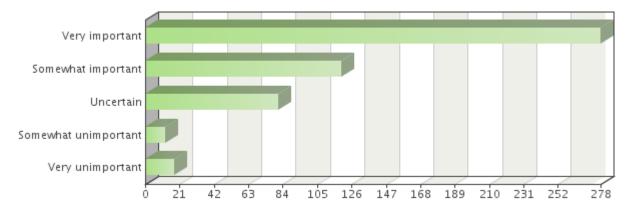
How important are housing programs for 2SLGBTQ youth in care and/or experiencing homelessness?



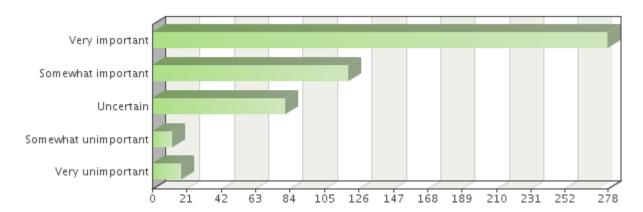
How important are housing programs for 2SLGBTQ seniors?



How important is data collection of sexual orientation/gender identity of people accessing residential care facilities?



How important is data collection of sexual orientation/gender identity of people accessing residential care facilities?



This research was funded by a Social Sciences and Humanities Research Council (SSHRC) Phase 1 Partnership Grant. The team wishes to thank our partners on this grant for their contribution to this research.

For more information, please contact Dr. Jacqueline Gahagan, Professor of Health Promotion, Dalhousie University, Halifax, NS B3H 3J 5 CANADA

Jgahagan@dal.ca

902-494-1155

