AGING IN THE LGBT+ COMMUNITY

HOUSING NEEDS ASSESSMENT
Fostering a Culture of Respect and Inclusion

Funded by:
“My current experience with seniors’ facilities (visiting a family member) is one of the LGBTQ+ community ignored or of actively hostile residents and caregivers.”

EXECUTIVE SUMMARY

Based on this study and a scan of external research and media coverage across Canada, there is an identified need for tailored housing solutions for LGBT+ seniors as well as greater inclusion across the spectrum of housing options.

By 2030, one in four Canadians, or 9.5 million people will be over the age of 65 years (Government of Canada, Fall 2014). The City of Calgary projects 287,000 seniors will be living in Calgary by 2042 (15% of the city’s population) – of whom 43% will be over the age of 75.

Just how many seniors identify as LGBT+ is not evident. Estimates range from 2% to 13% of the senior population – that’s as many as 780,000 Canadians or 19,890 Calgarians who are over 65 years and identify as LGBT+. Many individuals from the LGBT+ senior population lived during an era when non-mainstream sexual and gender expressions were stigmatized, condemned, and criminalized. Some may have limited social networks, unaddressed trauma, or remain ‘closeted’ as a result. A key concern for LGBT+ seniors is fear of discrimination and stigma.

The LGBT+ Seniors Housing Needs Assessment Survey generated a total of 121 completed surveys, from across Calgary and surrounding areas. Survey respondents from Calgary represented 32 out of a total 35 postal code prefixes, showing broad geographic representation considering the small sample size.

A common theme from qualitative interviews was that housing concerns are amplified for low-income earners. An individual may not be able to move, even if they face discrimination or otherwise feel unsafe, if finances limit choice. Only 16% of LGBT+ Seniors wanted housing community reserved for LGBT+ Seniors. Respondents were more likely to support and allied model or LGBT+ ‘aware’ model of housing. The most important thing for respondents was that there were on-site social activities that make LGBT+ residents feel included (66%). On a personal level that the participants relationships are respected (80%) and that they can share a room with their partner (92%).

Respondents indicated that they prefer to stay in their home and/or their community for as long as possible. Recognizing the strength, resilience, and knowledge within the LGBT+ seniors’ population that can be shared with other members of the community is critical.

Any strategy to address the needs of LGBT+ seniors must be attentive to the diversity of experiences within the senior population and within the LGBT+ community. Maintaining open communications among affected groups and keeping issues important to LGBT+ seniors visible will enable progress towards the goal of raising awareness and will give consideration to the housing needs of LGBT+ seniors. When the project is in active decision-making phases, co-developing options and proposals with a broad range of LGBT+ seniors will be critical.
The SHARP Foundation is a Calgary-based non-profit organization committed to providing a continuum of care including housing, healthcare, and support to those living with HIV or at the highest risk of contracting HIV. The SHARP Foundation history is rooted in the LGBT community and the organization works to decrease the impact of discrimination based on gender identity, sexual orientation, and HIV status. Through previous needs assessments and community engagement the SHARP Foundation has recognized the growing need for housing options for LGBT+ elders. The SHARP Foundation has leveraged its position in the community to facilitate diverse stakeholders to connect, discuss, and explore solutions to this issue. This report is the first piece of local research relating to LGBT+ seniors and housing and aims to provide a baseline from which housing providers, support workers, communities, and policy can respond.

For more information please contact: info@thesharpfoundation.com

FUNDED BY Calgary Homeless Foundation

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DEFINITIONS

The following definitions are as used within this research project.

SENIOR A person 50 years of age or more.

LGBT+ Lesbian, Gay, Bi-Sexual, or Transgender (LGBT) – and (+) any other gender or sexual minority group (for example, queer, Two-Spirit, questioning, Gender non-binary, pansexual, and asexual).

SENIORS’ HOUSING any type of housing model or facility that is dedicated to seniors’ or older adults (including, private and non-profit independent housing, assisted living, and residential care).

AGING IN PLACE a term used to describe a person living in the residence of their choice, for as long as they are able, as they age. This includes being able to have any services (or other support) they might need over time as their needs change.

INSTITUTIONAL HOMOPHOBIA refers to the many ways in which government, businesses, churches, and other institutions and organizations discriminate against people based on sexual orientation. Institutional homophobia is also called heterosexism.
INTRODUCTION

This report provides a summary of the findings from a research project on the housing needs and experiences of lesbian, gay, bi-sexual, transgender, and other gender or sexual minority seniors, who are 50+ years old and living in Calgary or a surrounding community. The project included a survey of LGBT+ seniors and interviews with various stakeholders working in or representing the intersection of housing, seniors, and/or LGBT+ people. The aim of this project is to better understand the makeup of LGBT+ Seniors in Calgary and to present recommendations for housing and/or service providers.

BACKGROUND

AN AGING POPULATION

The population of seniors (65+) in Canada is growing at a faster rate than any other age group, due to the aging of the baby boomer generation (half of whom have reached retirement age), long life expectancy, and low birth rates. By 2030, one in four Canadians, or 9.5 million people will be over the age of 65 years (Government of Canada, Fall 2014). While Calgary has a younger population average than other major cities in Canada, seniors are still the fastest growing age group. The City of Calgary projects 287,000 seniors will be living in Calgary by 2042 (15% of the city’s population) – of whom 43% will be over the age of 75 (City of Calgary, September 2015).

As individuals age, many changes can happen, often in relatively short amount of time. For example: retirement, decreased income, increased healthcare requirements, or death of a spouse. These changes may lead seniors to require smaller or less demanding homes, more affordable housing, and/or increased health supports.

A continuum of housing options is available for seniors in Calgary including those with low incomes and acute healthcare requirements. However, there is concern about the overall availability and diversity of housing and healthcare options available for an aging population. For example, the Conference Board of Canada estimates a 71% increase in continuing care requirements from the 65+ population, from 2011 to 2026 (Greg Hermus, 2015).

Efforts are emerging to support seniors to stay in their homes and their communities for as long as possible. This is meeting the demands of a higher educated, higher income, and more independent population of seniors. Also, this ensures seniors can continue to access the programs, services, and community connections they already know.

LGBT SENIORS

Just how many seniors identify as LGBT+ is not evident (Employment and Social Development Canada, 2018). Estimates range from 2% to 13% of the senior population – that’s as many as 780,000 Canadians or 19,890 Calgarians who are over 65 years of age and identify as LGBT+. However, due to ‘social invisibility’ or lack of disclosure, the numbers may be even higher. Many individuals from the LGBT+ senior population lived during an era when non-mainstream sexual and gender expressions were stigmatized, condemned, and criminalized. Some may have limited social networks, unaddressed trauma, or remain ‘closeted’ as a result.

Similar to seniors in general, research has found that LGBT+ seniors indicate a strong preference for aging in place. Recent research in Canada and Alberta has found that LGBT+ seniors have concerns and fears about having to return to the closet when entering a collective housing or care facility and concerns about maintaining privacy, stigma and discrimination. This project aims to provide further information around the needs, wants, and concerns of LGBT+ seniors, while offering a Calgary-specific evidence-base to support action from the housing, healthcare, and social services sectors.

“We want when people move in for the housing to say ‘this is inclusive, no hate and no bullying’.”
METHODS

This project used a community-based research approach by actively engaging an advisory committee to co-develop tools, guide project direction, and support outreach – and by training peer researchers to support data collection and knowledge mobilization activities. The advisory committee included LGBT+ seniors, academics, and community service providers. Literature and resource reviews provided context and guidance to the project.

With support from the advisory committee, project participation was achieved through outreach to community groups, non-profit agencies, housing providers, municipal governments, local media, and sharing of information across personal and professional networks. Many individuals from the LGBT+ senior population lived during an era when non-mainstream sexual and gender expressions were stigmatized, condemned, and criminalized. Some may have limited social networks, unaddressed trauma, or remain ‘closeted’ as a result. Outreach was focused within Calgary, but included Airdrie, Okotoks, and Cochrane. Special effort was made to connect with LGBT+ seniors who also represented other minority groups such as new Canadians, and people of different ethnic/cultural identity.

METHOD LIMITATIONS

Using the snowballing method of surveying allowed this research project to reach the greatest amount of respondents within tight fiscal constraints. However, there are two disadvantages to the method. First, there are risks of sampling bias and margin of error. Since people refer those whom they know and have similar traits this sampling method can have a potential sampling bias and a margin of error. Secondly, the method often has a lack of cooperation. There are fair chances that even after referrals, people might not be cooperative. However, this was not an issue with this research project.

ETHICS

This research was approved by Human Research Ethics Board (HREB) at Mount Royal University is designed and conducted in such a manner that protects the rights, welfare and privacy of research participants in compliance with the Tri-Council Policy Statement (TCPS2).

<table>
<thead>
<tr>
<th>Tool/Strategy</th>
<th>Details</th>
<th>Timeline</th>
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<tbody>
<tr>
<td>Survey</td>
<td>N=121                      Calgary &amp; surrounding communities LGBT+, 50 years+ (or under 50 and thinking about housing as they age)</td>
<td>January 2019 to March 2019</td>
</tr>
<tr>
<td>Interviews</td>
<td>N=15                      Non-profit housing and/or care providers (5) Other professionals working with LGBT+ (3) LGBT+ Seniors (9) LGBT+ and/or senior advocates (5) Government representatives (2)</td>
<td>February 2019 to March 2019</td>
</tr>
<tr>
<td>Advisory Committee</td>
<td>N= 10                      LGBT+ Seniors (5); SHARP Foundation; Mount Royal University (2); Centre for Sexuality; Habitus Collective</td>
<td>October 2018 to April 2019</td>
</tr>
<tr>
<td>Peer Researchers</td>
<td>N=3                       LGBT+ Seniors</td>
<td>November 2018 to April 2019</td>
</tr>
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SUMMARY AND DISCUSSION OF SURVEY DATA

The LGBT+ Seniors Housing Needs Assessment Survey generated a total of 121 completed surveys, from across Calgary and surrounding areas. Overall, the sample showed diversity across gender, sexuality, age, and ethnic/cultural identity. The survey included a large portion of respondents who are still of working age (71% under 65) and living independently. The purpose of this study is primarily exploratory and the findings are not necessarily generalizable to the total population of LGBT+ seniors in Calgary; the data should be taken as suggestive rather than representative of the population.

AGE

- 55 - 64: 56%
- 65 - 74: 24%
- 75+: 15%
- Under 55 but...thinking about housing as I age: 5%

GEOGRAPHY

The survey sample included broad geographic representation from across the city of Calgary and including surrounding communities.
- 85% in Calgary, 8% Cochrane; and 7% from another surrounding community
- Within Calgary, 32 of a possible 35 postal code prefixes were represented

ETHNO-CULTURAL IDENTITY

While the majority of the sample identified as European or Caucasian, there was some representation from diverse ethno-cultural backgrounds. Others identified as ‘Canadian’ which may include both Canadian and non-Canadian born persons.
- 71% self-identified as Caucasian or European in origin;
- 27% self-identified as Canadian, and
- 10% identified as either Aboriginal, Metis, Jewish, Latino, or Asian

GENDER & SEXUAL IDENTITIES

The representation of men and women was nearly equal (47% and 46% respectively) with another 8% identifying as trans. However, some of those who identified as man or woman may also include trans persons. Diverse sexual identities were also represented within the survey sample, with the largest number of respondents identifying as gay (44%).

A number of lived experience stakeholders self-disclosed having spent much of their adult life in relationships that did not align with their sexual identity or living under an assigned gender identity. For many, ‘coming out’ or ‘transitioning’ happened later in life or was an ongoing process, which sometimes resulted in rejection by loved ones. This suggests that there may be seniors who are LGBT+ but do not openly identify as such.

- 47% of respondents self-identified as women; 46% self-identified as men; 8% trans; 4% other (including queer, two-spirit)
- 45% gay, 35% lesbian; 9% straight; 11% other (including: pansexual, asexual, bisexual, questioning)

BEING ‘OUT’

Qualitative data revealed that being open is situational. Some stakeholders had mainly positive experiences as an LGBT+ person and were able to be open in all contexts – which ranged from being a vocal community advocate or “only if asked”. For others, they were open in particular spaces or with particular persons, once safety was assured.

In other cases, such as with neighbors, survey respondents said, “it doesn’t come up” or “it isn’t anyone’s business”. Survey data suggests that those over the age of 65+ may be less likely to be open.

Seniors’ housing stakeholders who participated in interviews could identify few or no residents who had self-identified as LGBT+. While this in itself does not indicate being ‘in the closet’,...
stakeholders recognize that the population of seniors who are LGBT+ is underrepresented in residences and the broader seniors’ community. This under-representation may have to do with personal factors, such as personal readiness to disclose, institutional homophobia or organizational barriers, or, as other research has identified, a personal choice to maintain secrecy “to assure wellbeing” (Employment and Social Development Canada).

Who are you open to about your gender identity and/or sexual orientation? (full sample v 65+)

RELATIONSHIP STATUS & LIVING ARRANGEMENT

IMMEDIATE FAMILY MEMBERS

84% Yes
70% Some
8% No
3% Few

FRIENDS

77% Yes
63% Some
17% No
4% Few

FAMILY DOCTOR

83% Yes
82% Some
4% No
1% Few

OTHER HEALTHCARE PROFESSIONALS

69% Yes
65% Some
15% No
6% Few

SOCIAL SERVICES PROFESSIONALS

68% Yes
58% Some
13% No
4% Few

NEIGHBOURS

47% Yes
44% Some
23% No
23% Few

“I would like to be closer to others like myself, [but] I cannot afford the rents. I travel every day to be with my people… it’s very expensive.”

“It’s time to create something for those of us who have no children or family.”
A majority of survey respondents are in a long-term relationship and/or living with their partner (42% respectively), however the proportion may be smaller than for seniors in general. For example, other research has identified that 55% of Calgary seniors (65+) are married or in a common law relationship - and 26% are living alone (City of Calgary, 2009) as compared to 39% of our sample. The presence of a partner can be a protective factor in the context of housing and aging in that a partner is available to share costs or to provide care and social support. However, for LGBT+ seniors, a common concern articulated by survey and interview respondents is fear that same sex partners are not able to room together in a care facility – or may be separated due to having different care requirements.

- 42% Married or common-law; 39% Single
  - Long-term relationship not living together, 2.5%; divorced, separated; dating or polyamourous (8%); widowed (5%)
- 39% are living alone (62% for 65+)
- 42% with spouse/partner (21% for 65+)
- 8% with child or other family member (3%)
- 12% with roommate or friend (9%)
- 15% with pet (15%)
- 5% with tenant (3%)

EDUCATION

Overall, the sample is well educated, with 61% having a BA or higher.80

- 44% undergraduate degree; 17% graduate
- 9% technical or trade certificate
- 17% some postsecondary (no degree)
- 10% high school only
- 3% less than high school

EMPLOYMENT

Being that the majority of the survey respondents were under 65 years old, most are still working part or full time (52%). Of those respondents who are 65 years old or older, the majority are fully retired (77%).

- 45% employed full-time (including self-employed); 7% working part-time or seasonally;
- 33% retired and 8% partly retired (77% and 18% respectively for 65+)
- 4% unemployed (seeking work), 5% disability/AISH

CHILDREN & STEPCHELDREN

According to qualitative data, LGBT+ Seniors may be estranged from family due to their gender or sexual orientation. On the other hand, many have ‘chosen family’ and strong social networks that are a strength and source of resilience. As one housing provider shared, their aim is to ask residents who their support persons are (as opposed to ‘next of kin’) and allow them to self-define rather than assume family members are the primary support.

INCOME

Being that the majority of the survey respondents were under 65 years old and still working, most are still relying on employment income as their main source of income. After the age of 65, pension and retirement savings become the main income source.

- The majority of respondents rely on employment income as one of their main sources of income (89%); followed by pension (42%) and retirement savings (31%)
- For those 65+, 91% rely on pension and 50% rely on retirement savings, and 29% rely on employment income
- Other sources of income are also an important income source
- Social support (i.e. CPP or disability) – 13%, (12% of 65+)
- Friends and family – 3%, (6% of 65+)
- Rental income – 7%, (12% of 65+)
PLANS TO FULLY RETIRE
(FOR THOSE STILL WORKING) (N=79)

CURRENT HOUSING
• 59% own their primary residence²³ (54% of 65+)
  • 51% of whom have a mortgage or line of credit remaining²⁴ (33% of 65+)
  • 41% rent (46% of 65+)
• 43% house
• 18% townhouse, duplex, row house
• 33% apartment or condo
• 6% retirement residence or community (including 55+ apartment)
• 1 (1%) individual living in a long term care facility and none currently homeless/shelter
• For 65+: 35% house, 18% townhouse, 27% apartment, 18% retirement residence or community, 1 long-term care facility

HOUSING COSTS
To be considered affordable, housing must cost less than 30% of a household’s disposable income²⁵. A common theme from qualitative interviews was that housing concerns are amplified for low-income earners. An individual may not be able to move, even if they face discrimination or otherwise feel unsafe, if finances limit choice. Income also dictates choice of neighborhood. One survey participant commented that they lived in a 55+ apartment building that, while affordable, forced them to be far from their “community”.
• 58% spend 30% or more of gross income on housing and related costs (62% of 65+)
• 50% spend less than 30%; 3% not sure (35% and 3% of 65+)
• 54% say their housing is affordable; 39% somewhat; 7% no (for 65+: 59%, 38%, 3%)

HOUSING & COMMUNITY SATISFACTION

“I don’t think I would feel comfortable to live in a residence among people with partners and children. This is not my reality.”
MOVING
As income information was not gathered in this survey, it is difficult to determine participant’s economic standing. However, it is notable that a change in finances is the primary reason respondents identified they would move, even if they weren’t planning to. In addition, affordability was one of the top three concerns reported by participants in regard to living in a seniors’ community or housing facility.

68% A change in my financial situation / earnings
Need for improved physical accessibility 36%

34% Feeling unsafe or insecure in my current home or neighbourhood

My current housing costs increased 33%
To reduce demands of home maintenance 32%
A change in my relationship status 27%
Feeling isolated / wanting to live around others 20%
Need for better access to amenities or public transit 15%

HOUSING PREFERENCE (AS AGE) – RANKING

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>My Own Private Residence</td>
<td>77%</td>
<td>6%</td>
<td>8%</td>
<td>4%</td>
<td>6%</td>
</tr>
<tr>
<td>Seniors Community or Housing Co-Operative</td>
<td>11%</td>
<td>33%</td>
<td>30%</td>
<td>26%</td>
<td>0%</td>
</tr>
<tr>
<td>Sharing With Family or Friends</td>
<td>8%</td>
<td>35%</td>
<td>21%</td>
<td>21%</td>
<td>15%</td>
</tr>
<tr>
<td>A Multi-Generational Housing Community (Includes Seniors and Non-Seniors Together)</td>
<td>6%</td>
<td>26%</td>
<td>32%</td>
<td>19%</td>
<td>18%</td>
</tr>
<tr>
<td>Seniors Care Facility</td>
<td>5%</td>
<td>5%</td>
<td>10%</td>
<td>22%</td>
<td>59%</td>
</tr>
</tbody>
</table>

PREFERRED TYPE OF SENIORS HOUSING (RANKING)

16% A housing community reserved for LGBT+ Seniors
57% A housing community primarily for LGBT+ Seniors, but welcoming to friends and allies
32% A housing community for seniors of all gender and sexual orientations (not LGBT+ specific)

“We are aware some older LGBTQ members are residing in senior facilities and are feeling they are heading or are back in the ‘closet’.”

“You see how many youth are LGBTQ2S+? There are as many of us.”
MOST IMPORTANT FROM SENIORS HOUSING

- On-site social activities that make LGBT+ residents feel included
- On-site support groups or events specific to LGBT+ residents
- Proximity to LGBT+ events or groups
- Transportation to LGBT+ events or groups
- None of the above

IMPORTANCE

<table>
<thead>
<tr>
<th>The People There Do Not Assume My Sexual Orientation</th>
<th>Very Important</th>
<th>Somewhat Important</th>
<th>Not Important</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>38%</td>
<td>37%</td>
<td>25%</td>
</tr>
<tr>
<td>The People There Do Not Assume My Gender</td>
<td>28%</td>
<td>15%</td>
<td>57%</td>
</tr>
<tr>
<td>My Relationship Status Is Respected</td>
<td>80%</td>
<td>13%</td>
<td>7%</td>
</tr>
<tr>
<td>My Partner Is Respected As My Caregiver</td>
<td>92%</td>
<td>6%</td>
<td>2%</td>
</tr>
<tr>
<td>I Am Allowed To Share A Suite Or Room With My Partner</td>
<td>87%</td>
<td>10%</td>
<td>3%</td>
</tr>
<tr>
<td>People Respect Me And My Partner Showing Affection To Each Other</td>
<td>78%</td>
<td>17%</td>
<td>5%</td>
</tr>
</tbody>
</table>

WHEN IT COME TO YOUR HOUSING, HOW IMPORTANT IS IT FOR YOU TO BE OPEN ABOUT YOUR GENDER AND/OR SEXUAL IDENTITY OR EXPRESSION?

<table>
<thead>
<tr>
<th>Gender</th>
<th>Sexuality</th>
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<tbody>
<tr>
<td>Extremely important</td>
<td>31%</td>
</tr>
<tr>
<td>Very important</td>
<td>31%</td>
</tr>
<tr>
<td>Somewhat important</td>
<td>25%</td>
</tr>
<tr>
<td>Not so important</td>
<td>4%</td>
</tr>
<tr>
<td>Not at all important</td>
<td>8%</td>
</tr>
</tbody>
</table>
PHYSICAL AND EMOTIONAL HEALTH

- 48% are currently living with a long-term or chronic mental or physical health condition
  - For those 65+ this rises to 53%
- 10% are HIV positive or undetectable
- 28% say their health currently impacts their housing needs in some way (42% of 65+)
  - 36% of whom require physical accessibility accommodations
  - 29% of whom require housing that accepts their use of drugs or alcohol
  - 10% of whom require in-home care or access to health services (transportation or proximity)
  - 10% of who face stigma or discrimination

CONNECTION TO COMMUNITY

“We put condoms in all the bathrooms to send the message that we are open about sexuality and encourage safe sex. Our staff respect all relationships as a personal choice, but they are trained to recognize the signs of an unhealthy power dynamic.”

Very Connected
Somewhat connected
Somewhat disconnected
Very disconnected

Excellent
Very good
Good
Fair

Responders of age 65+
EXPERIENCES OF DISCRIMINATION IN HOUSING

The majority of survey respondents (53%) said their experiences as an LGBT+ person in the context of housing has mainly been positive. Some respondents commented that their gender or sexuality has “never come up” whereas others express having been denied housing or being explicitly harassed by a landlord or residents/neighbors. Among the 12% of respondents who had a negative or very negative experience, there is greater representation of living in a co-housing environment (for example, apartment of retirements residence – 56% of sample as compared to 40% of full sample).

HOUSING CONCERNS

Survey respondents were asked to identify their top three concerns about moving into a senior’s facility. This was an open-ended question; meaning respondents could answer in their own words. Responses were then coded according to common themes.

THE TOP CONCERNS:

1. Discrimination related to gender or sexuality:

A key concern for LGBT+ seniors is fear of discrimination and stigma – this includes from peers, caregivers, staff or institutional policies. As one interviewee stated, “there is a general lore in the LGBT+ community about people having to return to the closet”. In survey responses this concern was articulated in the following ways:

<table>
<thead>
<tr>
<th>Concern</th>
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<tbody>
<tr>
<td>“anti-gay residents”</td>
</tr>
<tr>
<td>“not being inclusive”</td>
</tr>
<tr>
<td>“other residents’ homophobia”</td>
</tr>
<tr>
<td>“insults and threats of violence”</td>
</tr>
<tr>
<td>“not feeling safe being out”</td>
</tr>
<tr>
<td>“not having my same sex marriage recognized”</td>
</tr>
<tr>
<td>“feeling isolated from other gay people”</td>
</tr>
<tr>
<td>“being disrespected for who I am”</td>
</tr>
<tr>
<td>“lgbt rights within facility”</td>
</tr>
<tr>
<td>“coming out again, over an over”</td>
</tr>
<tr>
<td>“showing affection”</td>
</tr>
<tr>
<td>“lack of acceptance of my sexual orientation”</td>
</tr>
<tr>
<td>“cultural or religious judgement from care providers”</td>
</tr>
</tbody>
</table>

Fears around ageism, racism, inclusivity, elder abuse, vulnerability, and safety in general were also common.

2. General comfort

This includes concerns related to comfort, location, access to resources, availability of activities, cleanliness, independence, and privacy.

3. Affordability

Cost was the third most common concern noted by survey respondents.
DISCUSSION

Based on this study and a scan of external research and media coverage across Canada, there is an identified need for tailored housing solutions for LGBT+ seniors as well as greater inclusion across the spectrum of housing options. Based on stakeholder interviews and other consultations (with media, non-LGBT+ community groups, and municipal governments) the response to this project was positive. Most are already thinking about, acting on, or interested in discussing inclusion for LGBT+ seniors and were aware of concerns coming from the community and through media. Appendix B includes a list of resources to further support service providers and organizations to identify and address barriers to inclusion.

FEAR OF DISCRIMINATION
Based on the results of the survey, LGBT+ seniors face uncertainty and fear related to their status as an LGBT+ person if they are to move into a senior’s co-housing environment. This fear is shaped by generational experiences of stigma and discrimination and uncertainty about staff and resident readiness to include and accept members of the LGBT+ community. This concern is further amplified by more general concerns around isolation, safety, a loss of independence, and affordability of housing options. Stakeholders spoke to the importance of addressing history of trauma and loss, and experiences of stigma and discrimination – as well as recognizing the strength, resilience, and knowledge within the LGBT+ seniors population that can be shared with other members of the community.

DESIRE FOR LGBT-CENTRIC HOUSING
There is strong desire within the community for housing that is LGBT+-centric. Based on key stakeholder interviews, this preference reflects the desire to feel safe to express personal identity while at the same time having an environment of respect and personal safety in existing seniors’ homes or other mainstream housing and care environments. This uncertainty is perpetuated by stories within the community about individuals keeping their gender or sexuality hidden to avoid discrimination or for fear of stigma. For those without the luxury of options, due to affordability, health requirements, or a lack of family support, there is the additional concern of having ‘nowhere else to go’ should they face discrimination.

Examples of LGBT+-centric housing initiatives include: Triangle Square\textsuperscript{26} and GLEH (Gay and Lesbian Elder Housing)\textsuperscript{27} Los Angeles, CA, and Tonic Housing\textsuperscript{28} in the UK.

PREFERENCE TO ‘AGE IN COMMUNITY’
A majority of Calgary and area survey respondents (76%) ranked living in their own private residence as their top choice for housing as they age\textsuperscript{29}. Most are satisfied or very satisfied with their current housing and their neighborhood or community. While there are a number of factors that

\begin{quote}
“Every time I enter a new space I have to ask myself, ‘is it safe?’ Coming out is a continuous process.”
\end{quote}
could prompt a move, a change in finances is the primary reason survey respondents can anticipate moving even if they don’t want to. These findings indicate the importance to foster, not only inclusive housing, but a broader culture of inclusion and respect across communities. This may be especially important in Calgary and surrounding areas due to a potentially dispersed and invisible population of LGBT+ seniors. Survey respondents from Calgary represented 32 out of a total 35 postal code prefixes, showing broad geographic representation considering the small sample size.

**POPULATION DIVERSITY** Any strategy to address the needs of LGBT+ seniors must be attentive to the diversity of experiences within the senior population and within the LGBT+ community. Stakeholders in this research discussed the generational differences within the seniors’ population which impacts the experiences as an LGBT+ person; as well as that some groups within the LGBT+ community continue to face more stigma and discrimination than others. Still yet, being a part of the community doesn’t necessarily mean an individual openly identifies as LGBT+. This research found that a diversity of options and approaches is more likely to meet the needs of LGBT+ seniors as opposed to a one-size-fits-all approach. Achieving this requires sensitivity to the intersection of religious and cultural values and the mental health of both residents and staff. When the project is in active decision-making phases, co-developing options and proposals with a broad range of LGBT+ seniors participating will be critical.

**INCLUSION IN EXISTING HOUSING** Creating a broad organizational culture of inclusion demands awareness raising, education, and respectful dialogue at various levels, including among organizational leadership, front-line staff, healthcare providers, and residents. Stakeholders discussed the importance that inclusion efforts be made mindfully and meaningfully, via partnership with LGBT+ persons and advocates, and with sensitivity to culture and religion. Furthermore, there may be a lack of awareness around safe housing options in general. Housing providers that implement meaningful practices and activities to ensure safety of LGBT+ residents should make efforts to raise awareness within the LGBT+ and broader community as well as address more general fears related to safety, isolation, and cost.

An initiative such as “Vieillir sans honte: démystifier l’homosexualité et la bisexualité auprès des aînés” (GRIS-Montréal) in Montréal, QC, offers workshops where seniors live and visit to increase awareness and provide space for LGB discussions, questions and sharing experiences – or Open House in San Francisco, CA, provides housing and social support services for LGBT+ seniors. Resources such as SAGE in the USA and Stonewall Housing in the UK provide a board platform for dialogue, advocacy, and resource development.

“None of my neighbours know I am a lesbian although I am sure they have thought it. I have never felt the need to voice my lifestyle but if asked I am comfortable discussing it.”

“Many women spent their lives raising the next generation...and did not have extra resources to save for their own needs once they can no longer work. Supports such as affordable housing and long-term care needs to be a priority.”
IDEAS AND RECOMMENDATIONS FROM STAKEHOLDERS

PUBLIC AND SERVICE PROVIDER EDUCATION & AWARENESS

Barriers to achieving integrated LGBT+ inclusive seniors’ housing identified by stakeholders included discriminatory attitudes and practices, and isolation resulting from a fear of stigma and discrimination. Strategies that focus on community and service provider education and awareness aim to dismantle these barriers and rebuild relationships on a more equal footing. Practical ideas are identified below:

• Educate seniors and landlords about housing rights and pathways to report and resolve disputes
• Train front line housing staff, care workers, and support staff about LGBT+ issues and considerations
• Train staff and residents around safe sex and healthy relationships; support seniors to remain sexually active and foster healthy relationships
• Support seniors’ agencies, initiatives, and service providers to recognize the unique experience of LGBT+ seniors
• Educate and challenge staff and residents around discriminatory language and behavior

INCREASED VISIBILITY & HEALTHY DIALOGUE

Another group of strategies instrumental in dismantling barriers and engaging people in the development of inclusive communities falls loosely into dialogue and visibility. Maintaining open communications among affected groups and keeping issues important to LGBT+ seniors visible will enable progress towards the goal of raising awareness and will give consideration to the housing needs of LGBT+ seniors. Practical ideas are identified below:

• Find opportunities to facilitate open, healthy dialogue around LGBT+ issues and rights (for example discussing current events that relate to LGBT+ issues)
• Create opportunities to increase community visibility by connecting staff, residents, and community members with advocates who are willing to discuss their perspectives and experiences, and answer questions
• Foster intergenerational initiatives to build community, belonging, and mentorship
• Recognize ongoing silence and unaddressed trauma within the LGBT+ seniors community
• Establish an LGBT+ seniors hub to build connections within the community
• Intergenerational approaches to support seniors to remain connected to community, increase awareness of LGBT+ rights through history, and create positive mentorship relationships

“The ‘Golden Years’ should bring freedom to be oneself, to be comfortable in one’s skin and secure in one’s surroundings”
Many of the challenges that lay ahead for LGBT+ seniors as they identify their housing needs could be overcome with a thoughtful approach to the policies and practices of housing providers. While policy approaches will vary considerably between service providers, some general principles and practices could inform those decisions. Practical ideas are identified below:

- Support and maintain diversity on boards, among staff and residents
- Create an LGBT+ Advisory Committee to establish a gender and sexuality lens
- Create and implement organizational policies and strategies around inclusion and anti-discrimination
- Identify pathways to terminate or evict on the basis of discriminatory behavior or comments
- Assess practices that may be creating unintentional barriers, such as rooming policies, policies around immediate family members
- Prepare staff to respond concretely to requests, for example same sex partnerships
- Recognize and promote knowledge of human rights and establish practices to uphold those rights
- Assign a human rights champion within organizations to lead initiatives and activities to overcome barriers or inequities
- Complete an organizational audit to review intake forms, practices, policies etc.
- Include practices that allow for relationships of trust to form between staff and residents, to allow, for example, for safe disclosure (recognizing for example, that not all LGBT+ persons are ‘out’)
- Staff and resident codes of conduct or handbooks that outline expectations and include
## APPENDIX B: Resources to foster inclusion of LGBT+ seniors

<table>
<thead>
<tr>
<th>Resource</th>
<th>Author</th>
<th>Purpose</th>
<th>Target Audience</th>
<th>Where to find it</th>
</tr>
</thead>
<tbody>
<tr>
<td>LGBT Tool Kit (2017)</td>
<td>Long-term Care Homes and Services (LTCHS)</td>
<td>LGBT Tool Kit for Creating Lesbian, Gay, Bisexual and Transgendered Culturally Competent Care at Toronto Long-Term Care Homes and Services</td>
<td>Long-term Care Homes and Services Providers of Community Programs Health Advocacy and Education Initiatives</td>
<td>Rainbow Health Ontario</td>
</tr>
<tr>
<td>LGBTQ2S+ / Sexual and Gender Diversity</td>
<td>Alberta Health Services</td>
<td>Resources for providers and the public for awareness and building connections</td>
<td>Healthcare providers Public</td>
<td><a href="http://www.albertahealthservices.ca/info/Page15590.aspx">www.albertahealthservices.ca/info/Page15590.aspx</a></td>
</tr>
<tr>
<td>Seniors and Continuing Care</td>
<td>Alberta Health Services</td>
<td>LGBTQ2S+ Resources for Providers</td>
<td>Continuing care healthcare providers</td>
<td><a href="http://www.albertahealthservices.ca/info/Page16102.aspx">www.albertahealthservices.ca/info/Page16102.aspx</a></td>
</tr>
<tr>
<td>Continuing Care LGBTQ2S+ Education Presentation</td>
<td>Alberta Health Services</td>
<td>“Education for staff to increase understanding of providing safe and welcoming care for all patients, particularly those who identify as LGBTQ2S+.”</td>
<td>Continuing care healthcare providers</td>
<td><a href="http://www.youtube.com/watch?v=Dx-TYTV1uVs&amp;feature=youtu.be">www.youtube.com/watch?v=Dx-TYTV1uVs&amp;feature=youtu.be</a></td>
</tr>
<tr>
<td>Tips on Providing Safer and More Welcoming Continuing Care for LGBTQ2S+ Clients</td>
<td>Alberta Health Services</td>
<td>Tips to create a safer and more welcoming place for LGBTQ2S+ clients by increasing awareness, skills, and knowledge</td>
<td>Continuing care healthcare providers</td>
<td><a href="http://www.albertahealthservices.ca/assets/info/pf/div/if-pf-div-tips-providing-safer-welcoming-care.pdf">www.albertahealthservices.ca/assets/info/pf/div/if-pf-div-tips-providing-safer-welcoming-care.pdf</a></td>
</tr>
<tr>
<td>Historical Perspective</td>
<td>Alberta Health Services</td>
<td>Increase knowledge and awareness of the lived experience of LGBTQ2S+ seniors</td>
<td>Continuing care healthcare providers</td>
<td><a href="http://www.albertahealthservices.ca/assets/info/pf/div/if-pf-div-historical-perspective.pdf">www.albertahealthservices.ca/assets/info/pf/div/if-pf-div-historical-perspective.pdf</a></td>
</tr>
<tr>
<td>Tips for Establishing a LGBTQ2S+ Site Champion</td>
<td>Alberta Health Services</td>
<td>Information sheet that outlines the benefits of having an onsite LGBTQ2S+ champion</td>
<td>Continuing care healthcare providers</td>
<td><a href="http://www.albertahealthservices.ca/assets/info/pf/div/if-pf-div-tips-establishing-lgbt2s-site-champion.pdf">www.albertahealthservices.ca/assets/info/pf/div/if-pf-div-tips-establishing-lgbt2s-site-champion.pdf</a></td>
</tr>
<tr>
<td>Programs and Workshops</td>
<td>Centre for Sexuality</td>
<td>Workshops for seniors around sexuality and education. Audits for service providers and organizations around LGBT issues and inclusion</td>
<td>Seniors service providers organizations</td>
<td><a href="http://www.centreforsexuality.ca/">www.centreforsexuality.ca/</a></td>
</tr>
<tr>
<td>The Open Door Project</td>
<td>Lesbian, Gay, Bisexual and Transgender (LGBT) Aging Project</td>
<td>Promoted structural changes, training and more inclusive policies to support a safe and welcoming space for LGBTQ seniors</td>
<td>Organizations</td>
<td>A report by Landers et. al, (2010) evaluates this project.</td>
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<tr>
<td>Ouverture et inclusion</td>
<td>Projet Changement, Montréal</td>
<td>Video which can be used as an anti-homophobia facilitation tool</td>
<td>Senior’s living environments</td>
<td><a href="http://www.projetchangement.com/index.php/2013-06-02-00-31-26/videos">www.projetchangement.com/index.php/2013-06-02-00-31-26/videos</a></td>
</tr>
<tr>
<td>LGBT Training Courses</td>
<td>SAGCare, USA</td>
<td>LGBT cultural competency training</td>
<td>Service Providers</td>
<td>sageusa.care/our-services/coaching-training/</td>
</tr>
</tbody>
</table>
A common statistical definition of 'senior' is 65 years of age or older. However, at a community level senior can be defined as young as 50 years old. According to Homeless Hub: "in the housing sector an ‘older adult’ is anyone over the age of 50". The purpose of the definition used in this study was to include those who are already seniors as well as those who are approaching senior age and thinking about what housing options will be available to them as they grow older.

2 This project chose to use LGBT+ rather than LGBTQ2S+ for reasons of generational appropriateness and accessibility. It was the caution of our Advisory Committee that 'Queer' may have negative historical connotations for the demographic of interest and that additional letters to the acronym may become confusing.

3 See kerbycentre.ca for an annual Housing Directory for Seniors: https://www.kerbycentre.ca/general/kerbynews/publications/housing-directory-for-seniors/


5 Based on the above-noted estimates of LGBT+ persons in Canada (13%) and the total population of the Calgary census metropolitan area (MCA) in 2016 (153,905 over 65 years), we can estimate that our community has approximately 19,890 persons who are over 65 years and identify as LGBT+, and that this number will grow to more than 37,310 by 2043.


7 Homosexuality was de-criminalized in Canada in 1969


16 Homosexuality was de-criminalized in Canada in 1969

17 The total sample size (n=121), in particular that of seniors over the age of 65 (n=35), is relatively small. Therefore, it should be noted that the survey sample is skewed toward a young demographic of seniors and most respondents are still living independently. The perspectives of those who are over 75 and/or currently living in any kind of seniors housing and/or are housing insecure or homeless are under-represented. Similarly, stakeholder interviews represent various perspectives but the full continuum of housing options is not explored in detail within this research.

18 Ethnicity or cultural identity was included as an open-ended question — allowing participants to self-identify their background

19 Multiple responses allowed for both questions

20 As compared to 45% of Calgary seniors

21 Multiple responses allowed
Multiple responses allowed

(as compared to 71% of Alberta seniors)

(as compared to 20% of Alberta seniors)


https://www.trianglesquareapts.com/ Triangle Square Housing for LGBT+ people 62+ in Los Angeles, USA

http://www.gleh.org/ (Gay and Lesbian Elder Housing) Los Angeles, USA

https://www.tonicliving.org.uk/ Research and advocacy group to building housing communities for LGBT+ people in the United Kingdom

When ranked against living with family/friends, in a seniors community/co-housing, in a care facility, or in a multi-generational complex.
