



**LOS
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LGBT
CENTER®**

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December 13, 2019

Secretary Mark Ghaly, MD
California Health and Human Services Agency
1600 Ninth Street, Room 460
Sacramento, California 95814

Re: Master Plan for Aging Proposed Agenda Priorities

Dear Secretary Ghaly:

The Los Angeles LGBT Center (Center) applauds the State of California for intentionally developing a Master Plan on Aging to ensure that we are preparing for the growing population of seniors across this state. As part of this effort the Center is writing to recommend that the California Master Plan on Aging acknowledge and prioritize the unique needs of LGBT seniors who as community continue to face severe challenges across a spectrum of issues.

Since 1969, the Center has served the needs of the most vulnerable members of the LGBT community, and today we see over 42,000 client visits each month. Our organization provides more direct services to the LGBT community than any other organization in the world, and the fastest growing client population at the Center is LGBT seniors. The Center's Senior Services Department assists more than 2,000 clients, who are currently accessing 200 monthly social activities, workshops, and support groups. At the Center, we provide a safe environment for seniors to connect with other seniors and mitigate the devastating effects of social isolation. Of these clients, over one-third receive specialized case management, including being connected to the Veterans Administration and community services.

Los Angeles is home to an estimated 65,000 LGBT seniors, and there are tens of thousands more LGBT seniors across state. Despite the growing populations of LGBT seniors, this community continues to face invisibility within policy settings and what is worse many LGBT seniors still face the dire consequences of a lifetime of anti-LGBT bias. The legacy of discrimination has left many LGBT adults facing frightening economic insecurity, with one third of older LGBT adults living at or below 200 percent of the federal poverty level. For the LGBT elders whose partners died before nationwide marriage equality, many are still being denied the economic and family benefits of different-sex married couples — including Social Security and retirement.

Further, over two-thirds of LGBT older adults have been victimized three or more times in their lifetimes and because older LGBT people still face so many challenges, including hostility in mainstream senior spaces, many have chosen to remain deeply closeted or to return to the closet after years of living openly. Or, they simply don't seek services at all. According to a recent AARP survey LGBT Older Adults have a 15% higher rate of social isolation compared to the

heterosexual population. Harmful effects of this social isolation include depression, delayed care-seeking, poor nutrition and premature mortality. That is consistent (if not low) in comparison to what we witness with the LGBT seniors we serve.

For these reasons, the Center strongly recommends the Master Plan on Aging include the following:

- **Funding for LGBT-specific services** - Population-specific services are both more effective and necessary because services directed at the older adults are typically unable to effectively identify experiences of LGBT harassment and discrimination, even less provide affirming services. LGBT older adults seek out LGBT-specific programs where they know they will be surrounded by providers and fellow clients who understand or share their lived experiences.
- **Cultural competency for service providers** - It is imperative that providers who serve LGBT seniors understand the historical circumstances and current realities of anti-LGBT bias which exacerbate negative outcomes for our community. Cultural competency training prevents harmful practices that hurt LGBT clients, whether overtly or inadvertently. This commitment to cultural competency cannot be effective without adequate funding to pay for the cost of providing and attending training. Such training must be ongoing, consistent, and accompanied by technical assistance.
- **Ensuring the implementation of the LGBT designation as a group of greatest social need, and adding people living with HIV to this category** – In 2018, California took the important step of designating LGBT seniors as a group of greatest social need. The Master Plan must determine whether this designation is truly being implemented. Further, seniors living with HIV/AIDS should be specifically added as a category as a group of greatest social need. HIV/AIDS programs and support networks for LGBT seniors are almost non-existent, even in cities like Los Angeles where LGBT-specific services are more common. Many elders do not think they can contract HIV, and those that are HIV positive are heavily stigmatized. According to data from the Center for Disease Control, 45% of people living with HIV in the United States are over 50 years old. Ongoing medical costs, the emotional toll of living with HIV, and discrimination faced by seniors whose status is discovered by discriminatory providers increase negative outcomes for HIV-positive seniors. The Master Plan must designate this vulnerable population as a group of greatest social need.
- **Data collection and research on the needs of LGBT older adults** – While the studies of LGBT seniors that do exist show tremendous disparities and negative outcomes, the reality is that as a whole there is dearth of information and research focused on aging in the LGBT community, and what does exist, often doesn't focus on subpopulations including transgender seniors, lesbian and bisexual women, and LGBT communities of color. AB 959, which required state entities to collect data on sexual orientation and gender identity, was a step in the right direction toward addressing this gap. Now the State must ensure this data is actually being collected, and across all agencies. With accurate data and additional research, the State can effectively utilize funding to address the needs of particular populations by identifying disparities and challenges, which can inform the way in which programs are designed to meet the needs of the LGBT senior population.
- **Services to prevent homelessness** – The dual challenges of housing discrimination and the ever-increasing cost of housing mean many LGBT seniors are on the brink of homelessness and preventative measures are key to stopping a greater crisis. These measures include expanding access to assisted living waivers and increasing shallow subsidies for aging in place, which can stop at-risk seniors from entering the cycle of homelessness.

- **Designing homeless shelters with older LGBT Americans in mind** – Rising rents and fixed incomes mean thousands of older LGBT Californians are one crisis away from homelessness. It is imperative that facilities designed for Californians experiencing homelessness are accessible for and friendly to older adults and specifically to older LGBT adults. Higher rates of disability are among the many health disparities in the LGBT community. Homeless shelters need to be both physically accommodating as well culturally inclusive of the LGBT community and should actively incorporate wraparound services to empower seniors, including access to medical and mental health services, case management, and social activities.
- **Designated funding for underserved populations** – Though LGBT seniors experience many similar challenges, the community is not a monolith. There are important distinctions across race, ethnicity, gender identity, HIV status, immigration status, and many other factors that impact LGBT seniors and the aging population as a whole. The Master Plan on Aging should designate funding for underserved populations across the senior population to address the unique challenges faced by these communities.

Thank you for taking the time to consider the needs of some of the most vulnerable older adults in California. We strongly urge you to incorporate our recommendations to ensure LGBT seniors can thrive in our great state.

Sincerely,



Kiera Pollock, MSW
Director of Senior Services