# IMPROVING THE LIVES OF TRANSGENDER OLDER ADULTS

**Recommendations for Policy and Practice** 

**EXECUTIVE SUMMARY** 



# MORE ON SAGEUSA.ORG AND TRANSEQUALITY.ORG

Download the full report, Improving the Lives of Transgender Older Adults, as well other resources on issues described in the report. Aging poses unique challenges for transgender older adults. They came of age during decades when transgender people were heavily stigmatized and pathologized. Some came out and made gender transitions during these years, while many others kept their identities hidden for decades and are now coming out and transitioning later in life. Many challenges facing transgender elders are common to the broader older lesbian, gay, bisexual and transgender (LGBT) population, but some are different. With a growing older transgender population, there is an urgent need to understand the challenges that can threaten financial security, health and overall well-being.

Improving the Lives of Transgender Older Adults responds to these concerns by examining the social, economic and service barriers facing this population. This report includes a detailed literature review, profiles of the experiences of transgender elders around the country and more than 60 concrete recommendations for policymakers and practitioners.

# Snapshot: Key Challenges Facing Transgender Older Adults



### **DID YOU KNOW?**

A recent Institute of Medicine report on LGBT health identified transgender aging as a major research gap, naming topics such as elder abuse, substance abuse, risks and best practices for long-term hormone therapy, sexual health and cancer as areas in which more transgender research is needed.

Source: National Academy of Sciences. (2011). The health of lesbian, gay, bisexual, and transgender people: Building a foundation for better understanding. Washington, DC: Institute of Medicine of the National Academies.

# **Aging Service Barriers**

Today's aging services network provides a wide range of critical services for older adults, from meals and transportation to educational activities and legal help. Yet this network is currently ill-equipped to provide competent and nondiscriminatory services to transgender older adults, or to address their unique needs. Few aging providers offer cultural competence training or outreach specific to transgender communities. Many transgender older adults are not getting the support they need, and many are reluctant to seek services at all.

# **Health Care Barriers**

A lack of cultural and clinical competence regarding transgender people and their health needs, as well as bias and outright discrimination by providers, create serious barriers to quality care for transgender older adults. These barriers, together with financial barriers, mean that many transgender older adults often avoid or delay seeking care. In addition, medically necessary care related to gender transition is often arbitrarily excluded from public and private insurance. Inability to access this care can contribute to declining health, and these exclusions are often also used to deny coverage for preventive and other medical care transgender older adults need.

# **Health Disparities**

The confluence of widespread discrimination across the lifespan, weaker support networks, and barriers to quality care contribute to poor health outcomes for many transgender older people. Transgender people report higher rates of disability, general poor health, depression, anxiety, loneliness and suicidal ideation. Thus, many transgender elders enter their later years with severe health concerns yet without the social and community supports to manage their health.













In 2011, members of the Advisory
Committee for the Transgender Aging
Advocacy Initiative met in Washington, DC
to agree on immediate advocacy priorities
that would support transgender elders.
Clockwise, from upper right: Aaron Tax, SAGE;
Bishop Tonyia M. Rawls, Freedom Center
for Social Justice; Masen Davis, Transgender
Law Center; Barbara Satin, GLBT Generations;
Earline Budd, Transgender Health
Empowerment; Harper Jean Tobin, National
Center for Transgender Equality; and
Joo-Hyun Kang, initiative facilitator.
See the full list of committee members on
the back of this summary.

# Violence

Multiple studies have shown that transgender people across the age spectrum— and particularly transgender people of color—face alarmingly high rates of physical and verbal violence, including child abuse, sexual violence, intimate partner violence, workplace violence and hate crimes. With smaller support networks, transgender elders are also at greater risk of elder abuse, exploitation and neglect, yet might be less willing to report cases of violence and abuse for fear of discrimination and further violence. Research has shown that transgender people's experiences of trauma can increase the likelihood of long-term health and social problems. Agencies working to address elder abuse may be ill-prepared to offer competent support to trans older adults.

# **Employment and Housing Discrimination**

The employment and economic security challenges experienced by many older people are even more pronounced for transgender older adults. Transgender people face high levels of employment and housing discrimination, and consequent economic and housing instability. Many have lost jobs and homes due to discrimination. The economic and personal impact of this discrimination can accumulate over a lifetime and impact earnings, savings and Social Security benefits. Even those who transition in mid-life and start out financially secure are often devastated by discrimination.

# **Privacy and Documentation Issues**

Identification documents are frequently required for employment, housing, public benefits, bank accounts and more. For transgender older adults, IDs and official records that don't accurately reflect their names and gender identities compromise their privacy and lead to harassment, discrimination and even bias-driven violence. Unfortunately, many states and some federal agencies impose intrusive and burdensome requirements for updating gender designations—such as documenting specific surgeries or obtaining a court order—that many transgender people cannot meet for financial, medical and other reasons.



### **DID YOU KNOW?**

According to the 2011
National Transgender
Discrimination Survey,
90 percent of respondents
had experienced
transphobic discrimination
at work and 24 percent
had lost their jobs because
of their employers'
discomfort with their
transgender identities.

Source: Grant, J.M., Mottet, L.A., Tanis J., Harrison, J., Herman, J.L., & Keisling M. *Injustice at every turn: A report of the national transgender discrimination survey.* (2011). Washington, DC: National Center for Transgender Equality and National Gay and Lesbian Task Force.

# Limited Knowledge Base

The research base on transgender aging is severely limited, which makes it difficult to assess the specific needs of transgender older people, as well as craft effective interventions for this population. An overarching problem is lack of data; most federal surveys and data collection systems do not assess gender in ways that allow for transgender individuals to be identified. Little is known about the health needs of trans people in later life, including how transition-related medical care should be monitored or modified as individuals age. Finally, there is a lack of information on best practices in researching hard-to-reach elder people (including transgender elders), which means that much of the existing data on transgender older people are unrepresentative of the broader population, particularly poor and low-income transgender elders and transgender elders of color.

# **Community Support and Engagement**

While many transgender older adults have strong community ties and families of choice, too many are socially isolated and lack opportunities to be actively engaged in their communities. Many feel unwelcome at senior centers, volunteer programs and even at LGBT community centers, which they may perceive as unfriendly to transgender people or to elders generally. While personal faith and membership in a faith community have been important parts of many transgender older adults' lives, many find themselves estranged or disconnected from those communities when they come out and transition. All of these barriers are not only detrimental to the well-being and health of individuals, but also to communities that could benefit from their energies and contributions.

To learn more about these topics, download the full report, *Improving the Lives of Transgender Older Adults*, at **sageusa.org** or **transequality.org**.

# Immediate Policy and Practice Priorities to Improve the Lives of Transgender Older Adults

In 2011 SAGE and the National Center for Transgender Equality launched a historic Transgender Aging Advocacy Initiative to outline the many policy and practice barriers facing transgender and gender non-conforming older adults, as well as some key solutions for addressing these barriers.

To help inform and create this advocacy roadmap, we brought together a diverse committee of leading experts from around the country.

The Advisory Committee of the Transgender Aging Advisory Initiative (listed on the back of this executive summary) identified several immediate policy and practice priorities to improve the lives of transgender older adults. While all of the issues outlined in the full report are important, the priorities listed below were identified based on their expected impact if accomplished, as well as the expected feasibility of accomplishing them within the next 1-2 years.

# Strengthening the Aging Services Network

- The Administration on Aging (AoA) should clarify, through agency guidance, that LGBT older adults constitute a group with "greatest social need," and that federally-funded service providers may not exclude LGBT older adults from programs and services.
- Congress should reauthorize and fully fund the Older Americans Act (OAA), and should include LGBT older adults in data collection, project assessment and reporting requirements, and explicitly include LGBT older adults in the definition of greatest social need.

# 2 Strengthening Long-Term Services and Supports in Long-Term Care

- Federal and state agencies and community organizations should develop and promote LGBT cultural competence training, best practices, and tools for long-term care facility staff, surveyors, ombudspersons, and home health care providers.
- The Centers for Medicare & Medicaid Services (CMS) should revise federal Medicaid conditions of participation to explicitly prohibit discrimination based on gender identity and sexual orientation in home- and community-based services; and revise federal nursing home surveyors' guidelines to clarify the rights of transgender residents to respect for their gender identity, autonomy in their gender expression, privacy regarding issues related to transgender status and freedom from bias-related harassment, discrimination and abuse.

# Protecting Individual Privacy

• The Social Security Administration (SSA) should eliminate gender as a data field in all its automated verification programs, and update policies to permit an individual to change the gender designation in her or his SSA record based on a letter from a physician stating that she or he has had appropriate clinical treatment for gender transition.

# Building a Foundation of Knowledge

- The Department of Health and Human Services should include questions that measure gender identity and sexual orientation in federal population-based surveys, such as the National Health Interview Survey, as well as surveys focused on older adults.
- The Office of the National Coordinator for Health Information Technology should include the collection of data on sexual orientation and gender identity within its meaningful use standards for electronic health records.

In addition, *Improving the Lives* of *Transgender Older Adults* includes more than 60 specific recommendations to address the challenges described in the report.

Read more at sageusa.org or transequality.org.



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### **ACKNOWLEDGEMENTS**

SAGE and NCTE would like to thank the Arcus Foundation and the David Bohnett Foundation for their generous support of this initiative and this policy report. We are also deeply grateful to the members of the Advisory Committee of the Transgender Aging Advocacy Initiative for offering their wisdom, experience and commitment to this historic initiative. The ideas detailed throughout this policy report are largely informed by your unique insights. Finally, we would like to thank Joo-Hyun Kang for facilitating the 2011 gatherings of the Transgender Aging Advocacy Initiative.

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