

Transgender Older Adults
What Providers Need & Don't Need To Know


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THE CARE PLAN
HEALTH & AGING SERVICES ON YOUR TERMS

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Welcome




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Mission


We manifest positive health and aging outcomes. We are committed to addressing the challenges faced by LGBTQ+ communities. We establish “aging on your terms” through assessment, care management, advance care planning, and education. We are rooted in the belief that each client has individual resources and support systems that when utilized can drastically improve emotional and physical well-being. We enthusiastically approach the aging process with innovation and integrity.




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Values 

- Clients are experts of their care and define their success
- Develop resources for LGBTQ+ people to age with dignity and affirming support
- Collective care = caring for ourselves
- Success is expansive
- Culture of appreciation



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Successful Aging 



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Challenges To Successful Aging 




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LGBTQ+ Older Adults 

- 50+ years old
- Varied experiences, resources and communities
- Often invisible or unsafe in healthcare settings




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LGBTQ+ Older Adult Priorities 

- Isolation and Loneliness
- Housing
- Finances
- Care Support
- Healthcare

Video:
<https://www.youtube.com/watch?v=fV308qz6Y5g>



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Reflection

What are your thoughts about the themes raised in Gen Silent?



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SEXUALITY AND GENDER ARE INDEPENDENT OF ONE ANOTHER:

SEXUAL ORIENTATION is who you are attracted to romantically, emotionally, spiritually, physically, and/or sexually.

GENDER IDENTITY is how you understand and define your own gender.

GENDER EXPRESSION refers to how you outwardly express your own gender.

GENDER ATTRIBUTION is how your gender is perceived by others.

Sexuality
(who you love)

Gender
(who you are/how you see yourself)

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Terminology

Lesbian	Transgender	Intersex
Gay	Trans woman/man	Male
Bisexual	Non-binary	Female
Queer	Two Spirit	Anatomic Sex
Pansexual	Cisgender	
Same Gender Loving	Gender Queer	
Questioning	Gender Neutral	
Asexual	Gender Variant	
Polyamorous	Gender Expansive	
Sexual or Romantic Orientation	Gender Identity	

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Introductions

“Hi, my name is _____. My pronouns are _____, how about you?”

“What would you like me to call you?”

“What is your relationship with this person? Is it alright for me to share your personal health information with them?”

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Communication Practice

Turn to the person next to you and have a conversation on any subject for 5 minutes.

You cannot use the words 'he' or 'she', instead use 'they/them' or the person's name

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TRANS RESILIENCE

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To Transform




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Family of Choice

- Trans and LGB cultural heritage in the wake of fractured families of origin
- Heal many harms
- Vital element of well-being, social support, and connection to resources




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Caregiving


19% of transgender older adults and lesbians in comparison to 17% of bisexual respondents and 9% of gay men reported needing assistance from friends in the last 6 months.

Informal providers are preferred




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CHALLENGES




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Healthcare Access & Experiences

- 40% of transgender OA have received inferior healthcare or had their care denied, in comparison to 11% of LGB people
- 65% of transgender OA feel there will be limited access to healthcare as they age
- 11% of LGBTQ+ OA have had their POA disregarded
- 41% of LGB people 50 have a disability



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Social and Familial Support

- 3-4x less likely to have children
- 2x as likely to age alone
- Invisibility within aging systems
- 78% go back in the closet in LTC




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HIV


- 22-28% of transgender women are living with HIV
- 56% of black transgender women are living with HIV (estimated)
- Among the 3 million HIV tests reported to the CDC in 2015, transgender people who received a new HIV diagnosis was more than 3x the national average
- In 2014, an estimated 45% of HIV+ Americans were 50<



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HIV & Aging 

- May be more prone to organ system injury & comorbid conditions
- Low bone mineral density (BMD)
- Hypertension
- Diabetes
- Cholesterol
- Certain cancers that typically occur at older ages
- Neurocognitive and psychiatric problems, including depression




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Personal Resistance 

Personal Beliefs and Experiences

- Focus on youth within communities
- Lived through HIV/AIDS crisis, trauma
- 'I have a partner, I'm fine'
- 'Talking about this stuff is depressing'
- 'I don't want to be a burden to anyone'
- 'My case manager is too young to understand'
- 'I don't have anything or anyone'




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How to Care Plan with Older Adults

- Start early
- Explain the role of choice
- One topic at a time
- Focus on their 'triggers' or priorities, not yours
- Identify and include support team (family of origin, chosen family, ex-partners, friends, neighbors, etc.)
- Make practical recommendations
- Document and review with client regularly




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Areas to Address

- Housing
 - LGBTQ+ friendly
 - Independent and LTC
 - Location
- Legal
 - Advance Directives
 - Estate Planning
 - End of Life
- Health
 - Current Providers
 - Medications
 - Needs
- Financial
 - Retirement planning
 - Medicaid planning
 - Benefits
- Care
 - Support team
 - Advocates
 - Caregiving Access



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When To Consider Aging Services?

Healthy, Independent, Minimal illness or injury.	Home Environment or Independent Living	Home Health as needed Care overseen by Primary Care Physician
Requires assistance, not able to live entirely independently. Chronic illness, early stages of dementia, or illness / falls every 3-6 months	Home with Caregivers Supportive or Assisted Living	Home Health Palliative Care for chronic illnesses
Requires intensive assistance, wheelchair or bed bound. Frequent hospitalizations, physical decline without recovery.	Home with 24 hour help Assisted Living Skilled Care Facility	Home Health unless it is no longer helping with recovery Palliative Care typically transitions to hospice when decline continues

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Activity

Your client Jim is a 55 year old transgender man who is a long term survivor of HIV. He attends a support group and receives medical care at a local LGBTQ health center. He recently broke his hip after a fall and needs to have surgery in a hospital and stay in a skilled care rehab facility for a few weeks after. Jim is deeply concerned about how hospital staff and residents in the rehab facility will treat him. Jim has seen other friends treated poorly by staff in rehab facilities once they know a person is HIV+ or gay. He's especially concerned because he has Medicaid and doesn't know his options.

Please develop a plan to support Jim

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Resources for Care Planning



LGBTQ+ Documents

- AARP Prepare to Care Guide <https://www.aarp.org/content/dam/aarp/home-and-family/caregiving/2017/05/prepare-to-care-guide-lgbt-aarp.pdf>
- SAGE Create Your Care Plan - Medical Procedures <https://www.sageusa.org/wp-content/uploads/2018/05/sageusa-creating-your-care-plan-lgbt-guide-medical-procedures.pdf>
- Affinity Community Services - Create Your Own!

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Resources for Care Planning



Advance Directives

- Will
- Power of Attorney for Health
- Power of Attorney for Estate
- Living Will/5 Wishes

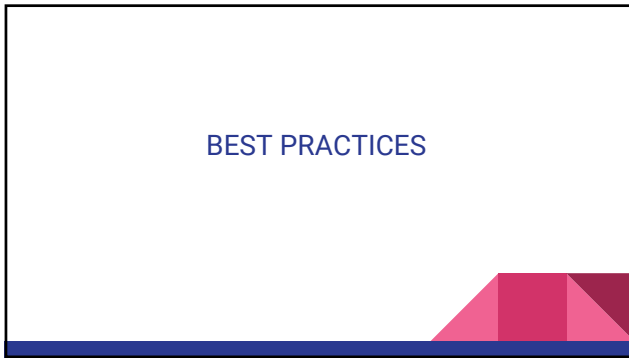
Care Coordination

- Lotsa Helping Hands <https://lotsahelpinghands.com/>
- Care Calendar <https://www.carecalendar.org/>
- Caring Bridge <https://www.caringbridge.org/>



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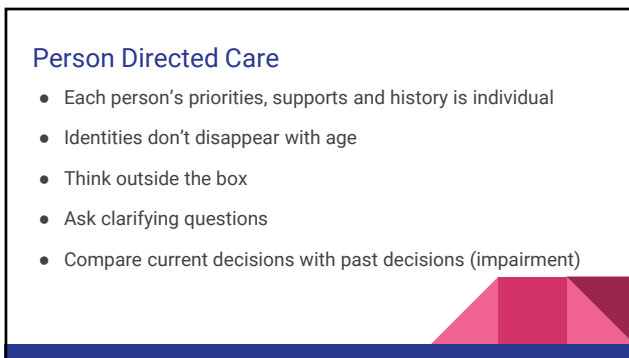
BEST PRACTICES



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Person Directed Care

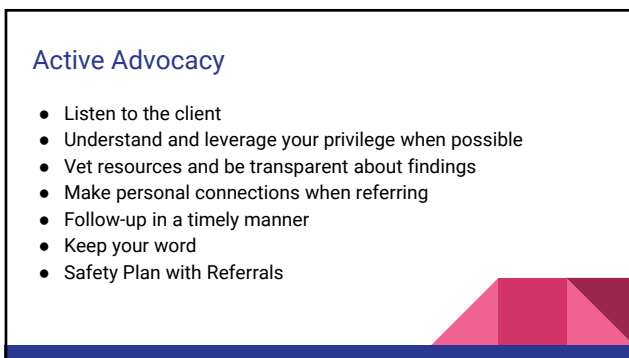
- Each person's priorities, supports and history is individual
- Identities don't disappear with age
- Think outside the box
- Ask clarifying questions
- Compare current decisions with past decisions (impairment)



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Active Advocacy


- Listen to the client
- Understand and leverage your privilege when possible
- Vet resources and be transparent about findings
- Make personal connections when referring
- Follow-up in a timely manner
- Keep your word
- Safety Plan with Referrals



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Organizational Strategies


- Ongoing Training & Cultural Competency
- Continually address bias within institutions
- Hire trans people!
- Update documentation
- Literature reflective of communities served



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Organizational Strategies


- Invite clients and staff to provide regular feedback
- Develop inclusive practices
- Regular client communication
- Comprehensive care plans and treatment goals
- Build a resource list of LGBTQ+ providers
- Partner with Trans organizations



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Reflection

How will your work be impacted by what you learned today?



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Thank You!



We utilize **Assessments, Care Management and Care Planning**
 To restore **Clarity, Comfort and Control** to our clients

As a **leader in the field of LGBTQ aging**, we train organizations and medical providers on **older adults and LGBTQ communities**.

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Stay Connected




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References



Fenway Health <https://fenwayhealth.org/trump-administrations-religious-refusal-actions-threaten-access-to-healthcare-by-lgbt-people/>

Services and Advocacy for GLBT Elders <http://sageusa.org/issues/disability.cfm>

Kates, Ranji, Beamesderfer, Salganicoff. "Health and Access to Care and Coverage for Lesbian, Gay, Bisexual and Transgender Individuals in the US." Kaiser Family Foundation (2015) <http://kff.org/report-section/health-and-access-to-care-and-coverage-for-lesbian-gay-bisexual-and-transgender-health-challenges/>

"LGB Individuals Living in Anti-Gay Communities Die Early" Columbia University (2014) <https://www.mailman.columbia.edu/public-health-now/news/lgb-individuals-living-anti-gay-communities-die-early>

Simone-Skidmore, "LGBTQ Aging: Addressing Disparities and Health Care Needs". The National LGBT Health Education Center (2011) <http://www.lgbthealtheducation.org/wp-content/uploads/LGBT-Aging-Addressing-Disparities-and-Health-Care-Needs.pdf>

Colpitts, Gahagan. "The utility of resilience as a conceptual framework for understanding and measuring LGBT health." International Journal for Health Equity, 2016. <https://equityhealth.biomedcentral.com/articles/10.1186/s12939-017-149-1>

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References



<https://marcibowers.com/dr-bowers/>

<https://sites.psu.edu/womeninhistory/2016/10/23/the-unsung-heroines-of-stonewall-marsha-p-johnson-and-sylvia-rivera/>

<https://www.patheos.com/blogs/removingthefileaf/2016/05/two-spirit-gender-identity-in-america-before-america/>

<https://www.publicmedievalist.com/transgender-middle-ages/>

Fredriksen-Goldsen, K. I., Kim, H.J., Emlert, C. A., Muraco, A., Erosheva, E. A., Hoy-Ellis, C. P., Goldsen, J., Petry, H. *The aging and health report: Disparities and resilience among lesbian, gay, bisexual, and transgender older adults*. 2011. Seattle: Institute for Multigenerational Health. Retrieved from: <http://www.agepride.org/wordpress/wp-content/uploads/2011/05/Full-Report-FINAL-11-16-11.pdf>