



**LGBTQ mental
health service**

supported by



**OPENING DOORS
LONDON**

Ageing well in LGBTQ communities

Report on the need for recognition
for LGBTQ 50+

May 2018

About MindOut

MindOut was established in Brighton and Hove 18 years ago, offering mental health support to local LGBTQ people, aiming to improve LGBTQ experience of mainstream services and to influence national debate around LGBTQ mental health. Throughout that period, people over 50 have been actively involved in planning, developing, delivering and evaluating MindOut's work.

We have a strong ethos of service user participation and all of our work is co-produced with beneficiaries. LGBTQ people over the age of 50 with lived experience of mental health issues work as part of our staff team, as Trustees, volunteer Peer Mentors and online volunteers, as trainers and consultants. People over 50 contribute to governance, service development, service delivery, promotion, marketing and publicity, evaluation and recruitment.

We offer advice and information, advocacy, peer mentoring and peer support group work, an out of hours online chat service, counselling, volunteering opportunities, anti-stigma campaigning, workshops, courses and training.

For more information see www.mindout.org.uk
email info@mindout.org.uk
or tel 01273 234839

About Opening Doors London

Opening Doors London (ODL) is the largest provider of services and support to older people from the LGBT+ communities in the UK. We have a membership of over 1700 people who identify as LGBT+ and are over 50. We aim to ensure that older LGBT+ people live happy, healthy and independent lives that are free from loneliness, isolation, prejudice and discrimination.

For more information please visit our website: www.openingdoorslondon.org.uk

About Brighton & Hove LGBT Switchboard

Brighton and Hove LGBT Switchboard was set up in 1975, initially as a helpline, today Switchboard is the place for LGBTQ people looking for a sense of community, support or information. We connect people and support them through specially developed Switchboard services or link them to more specialist services. Since 2014 we have worked with those 50+ to develop the Older LGBT Project; providing support and social activities for those 50+.

The project celebrates the diversity of those 50+ in our communities whilst promoting health and wellbeing and supporting individuals to live independently free from loneliness, isolation and prejudice.

For more information see www.switchboard.org.uk or email info@switchboard.org.uk to contact the Helpline call 01273 204050

Good for some, desperate for others.

This report highlights significant differences in LGBTQ experiences of mental health in older age.

Anyone can experience challenges to maintaining good mental wellbeing, especially people from minority groups who experience discrimination, prejudice and stigma. In LGBTQ communities, there are higher rates of suicidal distress, anxiety and depression than the general population. Ageing brings more health and social issues which can and do impact on our mental and physical wellbeing.

Despite this, older LGBTQ people are often overlooked. We are concerned that LGBTQ communities, wider communities, health and social care services and commissioners are not including our needs and not celebrating our capacity and resilience.

For some time, older LGBTQ people have been telling us that their needs are not well met by mainstream services, which are often not seen as safe, appropriate or affirmative. More research and planning is required to ensure that the wellbeing of LGBTQ 50+ people is properly considered and provided for.

MindOut recently collaborated with LGBT+ charities and with older LGBTQ people with experience of mental health issues to explore the experiences of older LGBT+ communities. Our consultation with older LGBTQ people reveals key issues for our mental health in older age, what we need and how to get it, how everyone can end discrimination and make us visible.

Scope and methodology

This report summarises the experiences of people who identify as LGBT+ and are over 50. The consultation was led by a steering group of MindOut beneficiaries. We have included 80 survey responses from LGBT+ people in Brighton and Hove, 131 members of Opening Doors London responding to their annual survey, two focus groups of 12 MindOut service users and volunteers, members of Brighton & Hove Switchboard Older People's Project and members of Older and Out, a Brighton based social group.

Many of our respondents are living fulfilling, empowered, active lives. Some are making the best of difficult circumstances. Some are barely surviving. All share common concerns and several themes were repeated by the majority of respondents.

Key findings

Invisibility kills

A multi-layered, suffocating cloak of invisibility settles over hidden minorities within LGBTQ communities. Older people with physical disabilities, older lesbians, older bi people, older BAME people, older single people to name a few.

Elaine is single, uses a wheelchair, is a parent. She encounters shocking discrimination wherever she goes. People see the chair and her age - that's often all and her sexuality is roundly ignored. Many LGBTQ community venues are closed to her, when she goes to older people's places she can't be out, if she talks about her kids then she 'must be heterosexual'. Her daughter doesn't want to know and blames Elaine for her own difficulties. It gets her down. The stress of coming out, or not, asserting herself, or not, gets too much and she has often considered suicide.

25% of those responding to the ODL survey reported that they had experienced a number of different forms of discrimination or prejudice related to their identity in the last year. This included homophobia, biphobia, transphobia, sexism, racism, religious intolerance and disability discrimination.

"I was queer bashed in July last year. I never reported it to the police - I have no trust in them."

V has been a trans activist since her early 40s. She lived in London and suffered severe transphobic assault. Now in her 70s she has gone back to wearing male clothing. She can no longer face the hate crime. She had moved to Brighton as a last resort and feels that if she cannot live as she wishes to here, then there is nowhere else she can go. She has been forced by violence to de-transition in order to live her old age in relative peace. Sometimes she feels that she has betrayed herself and wishes she were dead.

Coming out in later life

Our consultation revealed moving stories of people who felt they had left it too late to explore their sexuality and/or their gender identity, or had experienced real challenges when they did come out.

One person recounted how a diagnosis of bi-polar disorder in their youth, followed by many years of psychiatric treatment meant that whenever they tried to discuss gender this was dismissed as part of their 'illness'. The conversation was closed down and they were actively discouraged from talking about their identity. They were hopeful, and envious, of increasing understanding of trans issues and wanted opportunities to meet younger trans and non-binary people.

Over 77% of respondents to the ODL survey said that their experience of being LGBT+ and how they express their identity had changed as they had grown older. Some of this was negative:

"I feel too old for lesbian venues."

"Being on the gay scene no longer seems an option."

"I didn't come out until I was 45. By that time, I had been married for 22 years and had two daughters. I was demonized by my children and former family friends... and completely shut out of the end game when my former male partner died."

By contrast, others related how much they had benefitted from more openness and having 'grown into' their identities and noting that attitudes towards LGBTQ lives in the wider community have changed over the years.

"I am more proud, more open, more Gay than ever..."

"It's easier to be open as no one can sack me for it now..."

"I feel more comfortable in my skin and accepting of being LGBT, I struggled with the concept when I was younger."

"With age has come a more familiar sense of who I am, over and above being trans. It quieter now, with less to prove..."

Health and social care

LGBT+ people are more likely to have poorer physical and mental health than heterosexual people. Smoking and other substance use are higher in LGBTQ communities, often due to the effects of stigma, discrimination and marginalisation.

When older LGBTQ people discuss what may lay ahead for them, the fear of disappearing into a heteronormative, cisgenderist health care hell is shared repeatedly. Residential care and supported housing is perceived to be devoid of understanding or celebration of diversity, washed out of minority cultural expression, particularly dreadful to those of us who have been instrumental in creating and living very out lives. All of our respondents wanted to ensure that if they were to need care, acknowledgement of identity would be essential to their wellbeing.

Many organisations say that they treat all people the same - but that suggests that a person's sexual orientation or gender identity is irrelevant to the delivery of treatment or service. Personalised care is not necessarily about creating special services but about services thinking differently to ensure equality of delivery.

Respondents suggested that all older people's service providers should receive LGBTQ affirmative practice training, that LGBTQ 'kite marks' for older people's services should be developed and that LGBTQ groups should go into older people's services on a regular basis.

"They won't want those gay fliers, this is the older people's ward."

NHS psychiatric nurse, talking to a MindOut worker who was distributing leaflets

Isolation and loneliness

Brighton & Hove has one of the largest LGBTQ communities in Europe (approx 38,000 people), but many LGBTQ individuals find it hard to establish social networks, with age and mental health issues presenting significant barriers.

Many LGBTQ people report high levels of loneliness and lack of social and community engagement. Brighton & Hove is a destination of choice for LGBTQ migrants who are seeking a safe sense of community, which many do not find. Older people want to create a community response to these needs, before they get there themselves.

There are many reasons why people from the LGBT+ communities experience social isolation and loneliness, not least because of not wanting to socialise in their own neighbourhood because of potential prejudice and hostility from neighbours.

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MindOut beneficiaries reported that offering and receiving peer support can reframe a sense of being alone, can make value out of difficulties, can inspire new and healthier behaviours, can foster connectedness and pride in your own and other people's achievements.

Almost 70% of those attending ODL activities said that they did so to meet new people and to connect with the LGBT community. It also gives people from the LGBT communities an opportunity to volunteer - using their skills and experience to support others from their community. 74% said that attending ODL has helped them feel less isolated.

Approx 50% of respondents to the MindOut surveys use social media to support their mental health. 70% were keen to increase their digital confidence to use existing online support as well as to explore developing online services. We know from recent research that younger LGBTQ people use social media for mental health support, but little is known about the online help seeking behaviour of older LGBTQ communities, and how useful this might be.

"...interaction between younger and older LGBTQ people is also needed. This will help to build respect for each other... we have so much to give and yet are often seen as past it once we reach mid to late 40s, if not before."

Survey respondent

Living with the history of institutionalised homophobic and transphobic abuse

Many older LGBTQ people who came out before changes to human and civil rights lived in fear of public, private and workplace exposure, humiliation, punishment, arrest, incarceration, disinheritance, dismissal, persecution, assault, loss of family, loss of children, loss of home and property, people were killed. Treatments to 'cure' homosexuality and gender dysphoria, such as the use of aversion therapies has deeply affected many people.



Peter, and numerous others, lost successful careers and pensions in the Armed Forces. Today it would be outrageous and illegal to punish or sack someone for being gay, but 50 years ago it was a different story. His treatment by his employer, the devastation he witnessed to his friends lives, including suicides, left Peter bereaved, sad and angry. For many years he struggled with depression and anxiety as a direct result.

After leaving the Navy, Peter volunteered with Rank Outsiders, providing support and advice to LGBTQ people who had been discharged. Now in his 70s, Peter has found a 'place to settle' with his past. He worked through many of his issues with the help of other LGBTQ people at MindOut peer support groups. He has volunteered with MindOut's and co-facilitated peer support groups.

At a recent MindOut event, Peter said in public for the first time that he was "proud to have served in the Royal Navy and proud to be a gay man".



Role models

We need more role models, more blueprints for positive ageing. Ruth Rose is one such role model. At the age of 84 she has more energy than people a third of her age. She puts much of this down to early morning sea swimming, she swims every day of the year with a group of dear friends. Ruth is a highly regarded activist and consultant on all aspects of ageing:

“My life is centred around helping elderly people and becoming a woman is incidental to that, I’m just the same as anyone else - once you’ve done your transition that’s about it.”

Ruth is much in demand for consultation and public speaking engagements. Ruth also challenges the notion that we can leave it too late. Ruth underwent medical transition at the age of 81, as far as she knows the oldest person to do so.

Ruth runs workshops for young trans and non-binary people, she is very generous with her experience and offers herself as an example of a life well lived. Her advice for ageing well includes:

“It’s very important to value yourself. You don’t have to be mentally ‘unwell’ to need mental health advice, maintaining mental health is as important as physical health. You have to overcome stigma that’s more in your own mind, than other people’s. Walk along with your head up high, like life deserves to have you!”

Amaze yourself by doing something new every now and again, that you thought you’d never try. Give something back (like volunteering). This is about respect!”

Respondents also shared experiences of finding themselves as role models:

“I’m often told, as a visible older non-binary person, that I’m an inspiration to younger non-binary people who constantly experience ageism in being told it’s just a... phase.”

Ageism puts us all to shame

Our survey respondents were angry, shocked and saddened at the degree of ageism they encounter within LGBTQ communities.

“My partner and I have been refused entry to pubs and clubs because we are deemed to be too old. I am 55 and my partner is 72.”

“I think older LGBT are dismissed from the popular LGBT culture...there may be one event or tent that is slanted toward older LGBTQ people...”

Ageism adds to the minority stress (Meyer 2003) which all LGBTQ people have to deal with. Its another pressure on our mental health as we age. Ageism is everywhere, and for some it is all the more painful to find it in our own communities. Around 35% of respondents to the ODL survey said that they had experience ageism in the last year. This was mainly when ‘out in the world’ but also, significantly 13% said that this had occurred in the wider LGBT+ community.

“why is it OK to joke about age, when we wouldn’t tolerate laughter about race or gender? People often say I don’t look 58 but when I ask what does a 58 year old lesbian look like the answers are usually body shaming ideas about anyone over 50.”

"I was surprised in a mixed age group to hear a lesbian in her 40s say she didn't think there were older lesbians, it was as if we were another species. To her we were just "old women."

Older men had found themselves assumed, by younger people, to be sexually predatory:

"Once at gay pride I kissed a young friend of mine goodbye at the train station, it was an emotional farewell and we were hugging."

A group of young men started calling me a paedophile and saying to my friend to run and call the police. It was so humiliating, they were laughing. The worst of it was that they were all gay."

Suicidal distress

Gay and bisexual men are over four times as likely to have attempted suicide in their lifetime as heterosexual men.

Older LGBTQ people report high levels of suicidal distress. Last year 80% of MindOut service users talked to us about suicidal distress, 90% of MindOut trans clients were at risk of suicide.

The case study below illustrates the combination of circumstances which can exacerbate mental health issues for someone who is already experiencing loneliness and isolation and shows how a specific and timely service can have a massive impact:

I am 83 and life had thrown me on a heap and just left me there to die. I am full of cancer. I have bowel cancer. I have a colostomy. I have bipolar and all of my life I have wanted to kill myself.

I got in touch with Jason because I met him in a gay bar he was handing out leaflets and talking to people about suicide. I had never told anyone I was suicidal, not even my doctor, I was too scared I thought they would lock me up.

Jason is now my advocate and without a doubt has saved my life. I live in a block of flats, private rented. The lift is always broke and sometimes I am unable to get out of my flat because the lift doesn't work and I can't walk down the stairs. My legs are bad and I walk with a frame. I would without doubt fall down the stairs. At times I was a prisoner in my flat.

Once the lift was not working so I went out and went to the shops. When I returned home the lift was broken. It was 7pm, dark, cold. I have no family and no friends. I slept on a bench near my block of flats. I was terrified, I thought I would be attacked or murdered. I had nowhere to empty my colostomy bag, it over spilled, I stank!

I noticed someone waiting for a lift at 5am, it was working again. I got in with a lady who said I was disgusting, that I stink and she was going to call the police and have me put in care. I wanted to die.



Jason was furious that I was in this situation. He got all sorts of people on side to help me; people from the council and housing options, my landlord was put in his place, council housing was offered, I have home help and support with my personal care.

I have a safe place to live without a lift. All this from a chance meeting in a gay bar with a kind man! Jason invited me to join the lesbian and gay social group that he runs at Mind Out. I was so nervous, but arrived jolly and flamboyant and a bit cocky but terrified. "Who would like me or want to talk to someone like me?" I thought.

I loved it. I go every week and speak to people like me, gay people with problems, lonely, suicidal, older and younger, gay men and women and transsexuals. I met a friend there. He is 30 something. We meet up for coffee and for chats about life. We go to the theatre. I can't understand why he would want to spend time with me as I'm so old and so unwell.

I am in pain a lot, I smell too, I know I do because of the colostomy. But he genuinely does care and I feel worthy again. I am good for him too, I am a good role model, he definitely needs a good role model, someone to talk to and guide him. We both have our issues, we talk about suicide, that helps. Being gay is hard. It's less hard with a friend and with Jason at MindOut.

Resilience, resistance and recovery

Our consultation was brim full of stories of survival, passion, activism and hope. Many older LGBTQ people find good mental health in older age, with greater self-acceptance and new freedoms.

Some come from a long history of social action:

"many people I work with talk of their times in activist groups... being out and proud in a day to day way over the last 50 years was a form of activism every day. These stories are things people are proud of, but often don't get the space to tell."

Focus group participants spoke of how they would like to see more LGBTQ community action around older age:

"We need to go the extra mile for each other."

LGBTQ space for 50+ people

Many respondents spoke of the need for, and positive experiences of, LGBTQ groups, services, events and opportunities for older people. This included the need for space to socialise which is not part of commercial LGBT venues where some could not get access and where some do not feel welcome. Some wanted café style space rather than pubs/clubs. Some were finding this within other community groups such as activity, sport, singing and dancing groups.

"I need somewhere I can BE my old gay self, without having to explain... I love coming here for the community vibe... highlight of the week."

"It's so important to meet others with the same lives... it has really helped me find out what I need."

"I'm more active and feel there is a worthwhile space for me at this stage of my life. I haven't been 'written off' as an older gay woman."

"I'm pleased to have a chance to go out and meet other gay men in my age group. It has helped a lot to combat loneliness."

Around 80% of survey respondents said that they felt more connected to the LGBT+ community because of their involvement with Opening Doors London and 86% reported that they felt that they could be themselves without fear of being judged.

"The 'Bi the way' group has allowed me to be frank and open about my identification as bisexual - something that I have never been able to do before."

Many thanks to all of our survey respondents, focus group participants and especially Elaine, Peter and Ruth for allowing us to feature their stories.

Recommendations and calls to action

Everyone

- don't assume older people are heterosexual
- don't assume that older people are cisgender
- don't assume older LGBTQ are not sexually active
- don't assume identities are fixed in older age

LGBTQ people over 50

- don't assume you are not welcome
- seek support when you feel you need to, don't leave it too late
- offer your support to other LGBTQ 50+
- offer your life experience as a community asset

LGBTQ venues

- work to include older people
- actively welcome older customers:
 - display inclusivity statements where they can be seen
 - use publicity, promotions and positive imagery
 - offer discounts - "elder hours"
 - reserve tables near the toilets and the bar and not under the speakers

LGBTQ community groups

- seek funding for specific older LGBTQ services
- have guest speakers and themed events aimed at LGBTQ people
- involve older LGBTQ people as supporters
- get information on what's out there for older LGBTQ people. Don't assume there is nothing. Google 'older LGBTQ' and see what comes up in your area

Older people's service providers

- increase visibility of LGBTQ service users
- publicity and promotion within LGBTQ communities
- training for staff and volunteers on affirmative practice

Employers

- don't assume all your older employees are heterosexual
- don't assume all your older employees are cisgender
- don't assume all your older employees are unlikely to come out or to transition
- do seek to remove heteronormative assumptions
- do talk about family life outside the traditional nuclear views
- do communicate/encourage discussions around generations in the workplace

Further research is needed

- long term effects of minority stress
- into on line and digital help seeking in older communities

References

www.ageuk.org.uk/our-impact/programmes/safe-to-be-me

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'MindOut Age Matters', funded by the Big Lottery and Lloyds Bank Rainbow Network, aims to work with LGBTQ 50+ communities to:

- reduce social isolation
- reduce suicidal distress
- provide peer support opportunities
- engage people over 70
- provide advice, information and advocacy support
- address ageism in LGBTQ communities
- work with people in supported housing and residential care.

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