

DISRUPTING DISPARITIES

SOLUTIONS FOR LGBTQ NEW YORKERS AGE 50+



Nearly one-third of LGBTQ New Yorkers are over the age of 50. Although a key part of New York State's rapidly growing elder population, LGBTQ older people remain largely invisible and face disparities rooted in discrimination, a lack of legal and social recognition, a reliance on chosen family, reduced access to inclusive services, and other social determinants of health and well-being. While LGBTQ older people are resilient, these and other unique challenges have severe negative health, economic, and social implications that demand action.

Given the unique challenges faced by LGBTQ older New Yorkers, AARP New York and SAGE, with support from the AARP Foundation, commissioned a report, **Disrupting Disparities: Solutions for LGBTQ New Yorkers Age 50+**, to document the disparities faced by New York State's 50-plus LGBTQ population and identify concrete policy solutions to address these disparities.

The report found **widespread disparities in health and well-being, economic security, caregiving, and social connections** with even greater disparities for LGBTQ older people of color and transgender older people. For instance, LGBTQ older people experience:

- **Mental and physical health disparities** due to the lack of competent, inclusive health care, and lifelong experiences of discrimination. These disparities include increased rates of disability, poor physical and mental health, alcohol and tobacco use, and HIV. Many of these health disparities put LGBTQ older people at an increased risk of experiencing COVID-19 more acutely.
- **Economic insecurity** since older LGBTQ people have fewer financial resources and are more likely to be low-income relative to non-LGBTQ older people. Nearly one-third of LGBTQ older people live at or below 200% of the federal poverty level, compared to a quarter of non-LGBTQ people. Housing options are also limited for LGBTQ older people who are more likely to be low-income, face housing discrimination in senior living communities, and may have a history of housing insecurity or homelessness.
- **Isolation and a disconnectedness from services** due to thinner support networks. LGBTQ older people are far more likely to live alone than non-LGBTQ individuals and far less likely to rely on adult children or other family members for informal caregiving. Social isolation can be difficult to overcome because there are fewer opportunities to socialize in age-friendly and LGBTQ-inclusive environments.

To help ensure that 50-plus LGBTQ New Yorkers have more choices as to how and where they live as they age successfully, we urge policymakers to adopt the following recommendations. Many of these recommendations are even more important in light of the COVID-19 pandemic and its effect

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on older people in New York, including LGBTQ people and especially LGBTQ people of color. Policymakers in New York State should:

- **Formally designate LGBTQ older people and older people living with HIV as groups of “greatest social need” under the Older Americans Act.**
- Establish a **standing Commission on LGBTQ Aging** to identify challenges, share best practices, and develop recommendations on ways to improve the quality of life of 50-plus LGBTQ New Yorkers.
- Create a **task force to review how family is defined** in New York State laws and policies and ensure that those definitions are fully inclusive of families of choice.
- Update the **New York State Office for the Aging’s equal access guidance** to explicitly prohibit discrimination based on gender identity or expression and provide additional guidance on the respectful treatment of transgender New Yorkers.
- Adopt a **comprehensive caregiving law with an inclusive definition of caregiver** that includes spouses, domestic partners, biological relatives, and non-biological individuals with the equivalent of a family relationship.
- Adopt an **LGBTQ long-term care residents’ bill of rights.**
- Establish an **independent Long-Term Care Task Force** to examine the state of long-term care and the broader long-term care system.
- Mandate a minimum level of **LGBTQ cultural competency training for state-funded providers** from organizations with expertise in LGBTQ aging.
- Expand **LGBTQ programming and targeted outreach** to LGBTQ older people to ensure that existing programming is LGBTQ-competent.

- Systematically **collect, analyze, and report LGBTQ-inclusive demographic data** by:
 - Adding **LGBTQ-inclusive questions to every form where other demographic information, such as age and race, is asked.**
 - Ensuring that **COVID-19 surveillance efforts and patient records** capture sexual orientation and gender identity as part of routine demographic information.
 - Developing a **strategic plan and timeline to expand LGBTQ-inclusive data collection** to all New York State data systems, intake forms, survey instruments, and needs assessments.
 - Conducting **regular assessments of the needs of older LGBTQ New Yorkers** and ensuring that LGBTQ older people are represented in broader community needs assessments.

The time to act is now to disrupt these disparities. We encourage policymakers, elected officials, and community leaders to adopt and implement the policy changes necessary to address the disparities faced by 50-plus LGBTQ New Yorkers.

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