



Seattle Rainbow Housing

Aging in Community:

Addressing LGBTQ Inequities in Housing and Senior Services

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*"I do worry about being elderly and ending up in a rest home and the staff not accepting me or my spouse or our relationship.
Are we going to feel comfortable being able to kiss each other?
Can we have our photos up on the wall?
Will we feel safe? How will staff interact with us?
Will we be treated differently or
go back in the closet to protect ourselves?"*

Acknowledgements

This report results from a community engaged effort to examine the housing and service-related needs of LGBTQ older adults in Seattle/King County. I want to acknowledge the many individuals and organizations that made this project possible. Without the active participation across so many diverse corners of the Seattle/King County LGBTQ community and the housing and service sectors, I could not have completed this work. I deeply appreciate Maureen Kostyack and the City of Seattle Office of Housing, who provided ongoing support and resources through all phases of the project. I want to thank Seattle Councilmember Lorena González for recognizing the need and making resources possible to complete this work. I deeply appreciate the efforts of Councilmember Lisa Herbold for working with Aging with Pride and Generations Aging with Pride to ensure that LGBTQ older adults were identified as a health disparate population in the City of Seattle Housing Levy. I also want to thank King County Council Chair Joe McDermott for his support of LGBTQ older adults and their communities. I deeply appreciate the following individuals and organizations that stepped up and gave their time so generously to serve on the Rainbow Housing Advisory Committee including Marsha Botzer, Ingersoll Gender Center; Alex Brennan, Capitol Hill Housing; Debbie Carlsen, LGBTQ Allyship; Maureen Kostyack, City of Seattle Office of Housing; Luis Fernando Ramírez, Hermanos; Cicily Nordness, Seattle Housing Authority; Ray Padilla, Bellwether Housing; Ruben Rivera-Jackman, Generations Aging with Pride and Senior Housing Assistance Group (SHAG); Steven Sawyer, POCAAN; and Jon Morrison Winters, City of Seattle Aging and Disability Services. These individuals gave their time and expertise to provide guidance and feedback on every aspect of the project including the review of existing LGBTQ housing materials, input on community-based listening sessions, survey development, outreach and recruitment, data collection and analysis, and the development of recommendations based on the information gathered through the project.

I want to acknowledge the City of Seattle LGBTQ Commission for their input and support of this project. I also want to thank Emily Skola, Alisa Strayer, Ian Johnston, Ian Kirkman, and Jayn Goldsen, and the many others who helped distribute surveys, and assisted with the review of literature and data analyses to ensure its success. I want to recognize and thank all the LGBTQ older adults and countless other community members who provided feedback and input across all phases of the project including outreach and recruitment, information gathering, the strengths and housing-related needs, analysis of findings as well as contributed their vision and ideas for the future. I hope this report and the recommendations identified will lead to improvements in housing as well as aging, health and human service-related programs for Seattle/King County's LGBTQ older adults, and their families and communities.



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Executive Summary

Seattle/King County is vibrant, with a growth rate surpassing most large metropolitan areas, intensifying issues of housing affordability and accessibility. Given profound demographic shifts and the aging of the U.S. population overall, Seattle/King County is becoming increasingly older and more diverse by race, ethnicity, sexual orientation, and gender identity and expression. With one of the largest LGBTQ communities in the nation, 8% of older adults in Seattle/King County are LGBTQ accounting for more than 27,000 older adults. Housing and aging issues are at a critical crossroads - still today in Seattle/King County LGBTQ older adults remain largely invisible and underserved.

This project was commissioned by the City of Seattle Office of Housing, with the goals of examining the housing and senior service needs of LGBTQ older adults to create an action agenda. More than 500 surveys were returned, with 419 completed by LGBTQ older adults, reflecting unprecedented diversity including those age 70 and older (30%), people of color (32.5%), women (43.1%), and trans/non-binary (17.8%).

Based on the information gathered, several key housing and senior service challenges emerged:

- Inadequate services prevent LGBTQ seniors from remaining in their homes and aging in community.
- Lack of affordable, stable, safe, and accessible housing for LGBTQ seniors.
- Limited cultural capacity of providers to ensure LGBTQ affirming housing environments.
- High rates of discrimination and bias in housing, with most not obtaining legal recourse.
- LGBTQ racial inequities in access to affordable housing and senior services.
- Insufficient community engagement and advocacy for LGBTQ aging and senior housing.
- Lack of information necessary to proactively guide and monitor decision making to better support LGBTQ communities and eliminate inequities in the allocation of City resources.

Seattle/King County is falling behind other major metropolitan areas in addressing LGBTQ housing and senior needs. In 2013, the City of San Francisco commissioned a report to assess the needs of LGBTQ older adults. Based on the findings and advocacy efforts, San Francisco's Department of Aging and Adult Services now invests more than 6 million dollars to address the needs of LGBTQ seniors, with an LGBTQ Senior Center and two LGBTQ senior housing buildings – Seattle/King County has neither. This report is an important first step for Seattle/King County to have the information necessary to address the needs of LGBTQ older adults and their communities.

*"We have the history and years of experience.
But our talents are being wasted. It is our turn. Count us in."*

Key Findings

LGBTQ older adult participants were resilient yet at-risk. More than six out of ten wanted to stay in their current homes, yet many were vulnerable to losing their housing resulting from a convergence of risk factors within the context of rising rents and housing costs.

*"We are being forced back into the closet.
We don't have safe and affordable places to live or good services."*

LGBTQ participants compared to older adults in Seattle/King County had significantly higher rates of renting, elevated rent cost burden, and were more likely to live alone in old age with no supports available.

Reporting higher than average housing cost burden and living in unaffordable housing and most were living on fixed incomes. Twenty percent experienced homelessness in the past five years.

In Seattle/King County
**58% of renters aged 60+
were housing cost burdened**
compared to
**87% of the LGBTQ older adult
participants**

Three-quarters of the LGBTQ older adults barely had enough financial resources to make ends meet. One-quarter were well-resourced; many of them did not feel specialized housing or services were necessary.

Nearly 40% of the LGBTQ older adult participants wanted to move, which is significantly higher than older adults in general – yet most faced significant

barriers to moving.

LGBTQ older adults had elevated disparities in disability and health. Yet many homes and neighborhoods are ill-equipped to accommodate mobility limitations, which drives heightened demand for accessibility and home modifications and supports.

LGBTQ older adults experienced high rates of discrimination, with trans older adults reporting nearly double the rates. More than four out of five LGBTQ older adults did not report, thus did not receive, any legal recourse.

In the general population
**13% of adults aged 65+
want to move**
compared to
**39% of LGBTQ older
adult participants**

*Those who moved within
the past year experienced*
Homelessness 48.5%
Eviction 33.3%
Foreclosure 15.2%
within the past five years

Most LGBTQ older adults were not accessing needed senior or housing services because the services were felt to be non-LGBTQ affirming, too costly, and/or not accessible.

LGBTQ older adults are active in housing and service advocacy. Over half raised money or donated food, clothing or supplies, or helped someone with a housing search and place to stay.

Racial and ethnic minority LGBTQ older adults reported higher levels of housing cost burden, lack of support, and lack of access to many housing and aging services than non-Hispanic Whites.

The consequences of losing housing late in life were severe for LGBTQ older adults, as they often could not secure new housing. Even after a short hospital or rehabilitation stay, many did not have a social or financial safety net necessary to retain their housing, which if lost often led to premature institutionalization for the remainder of their lives. Eviction often led to homelessness, which can result in premature mortality. Not addressing aging and housing needs directly within LGBTQ communities can result in much greater public cost.

Action Plan and Recommendations

1. Promote aging in community via funding an LGBTQ Senior Center with LGBTQ affirming services and programs to support these resilient at-risk older adults.

Recommendations:

- Fund an LGBTQ-affirming Senior Center with one-point entry (e.g., for senior services, referral, enrollment assistance, case management), built within the LGBTQ community so it is trusted and can reach those in greatest need and provide support and technical assistance to other providers.
- Expand awareness of, and access to, home repair and housing modification programs to maintain and support accessible and safe housing.
- Test the effectiveness of additional home-based mental health and substance abuse counseling services, especially for older adults who report difficulty accessing and maintaining such support services.

*"Hey, I was arrested in the park. It is not safe.
We need services that we build in our community."*

2. Fund and provide affordable, stable, safe, and accessible LGBTQ senior housing.

Recommendations:

- Prioritize and fund affordable LGBTQ senior housing developments incorporating best practices, such as formalized agreements with trusted community-based aging service providers early in the development process; provision of storefront visibility; and ample, dedicated space for the delivery of senior services for residents and the community. Incorporate LGBTQ affirming principles with equity and age-friendly universal design in housing developments for low-income and mixed-income levels.
- Increase the supply of rental housing subsidies, and assistance with mortgage payments, property taxes, and utilities. Provide housing counseling, rental assistance, eviction prevention support, and legal services to decrease housing instability and homelessness of LGBTQ older adults.
- Develop and test alternative housing models, such as home share programs, community-based housing via community land trusts, intergenerational housing programs, and models designed to allow professional and volunteer caregivers to live among those needing home-based services.

3. Enhance cultural capacity and create LGBTQ affirming housing environments and services with attention to high-risk groups through trainings and resources.

Recommendations:

- Fund, design and implement an LGBTQ equity housing training forum tailored toward housing providers, including intersectionality and culture, and race/ethnicity.
- Develop and facilitate LGBTQ affirming trainings, specifically for shelters, transitional housing, and long-term care facilities, to reduce social isolation and end bullying by residents.
- Create and disseminate an LGBTQ affirming housing and resource guide for community use and resident housing councils.

*"I remember the early days of AIDS here in Seattle. We were dying.
No one would help us. Now we are old and dying.
Still today - no one is here to help us."*

4. Ensure the reporting of discrimination and legal recourse.

Recommendations:

- Launch a community-wide awareness campaign on what constitutes discrimination and how to report it, including legal protections in public accommodations such as shelters, transitional housing, and long-term care facilities.
- Ensure the handling of discrimination complaints is affirming for marginalized and underserved LGBTQ older adults, including the oldest, trans, bisexuals, and people of color. Pilot test the use of navigators to support vulnerable seniors and others through the reporting process and investigation of complaints.
- Expand fair housing testing to assess violations of housing discrimination laws by sexual orientation and gender identity and expression, as well as intersectional forms of discrimination such as race/ethnicity, disability, and use of housing vouchers.

5. Promote LGBTQ community support, engagement and advocacy.

Recommendations:

- Work with nonprofit and for-profit agencies and communities to promote the understanding of LGBTQ aging and housing issues.
- Prioritize addressing the needs of hard to reach and traditionally underserved LGBTQ older adults, including people of color, immigrants and linguistically diverse, those living in poverty, the oldest, trans, queer, bisexual older adults, those living with HIV/AIDS, and those with disabilities.
- Include more diverse LGBTQ older adult voices in housing and senior advocacy efforts as well as planning processes, including land use, urban design, and housing and senior service advisory boards.

6. Expand the collection and utilization of data to monitor LGBTQ housing and aging-related service needs, and to ensure equity in budgeting and the allocation of City and County resources.

Recommendations:

- Expand the collection of data on sexual orientation and gender identity and expression using best practices when voluntary demographic data are collected via City and County agencies and contractors, such as client intake and other forms for services and contracts.
- Ensure training is available for City and County workers and contracted staff to attain skills and abilities needed to effectively collect such data. Assess and pilot test methods to make data publicly available.
- Analyze and eliminate LGBTQ inequities in the City's and County's allocation of resources, including housing initiatives, senior programs and services, and all other policy and regulatory mandates.

Conclusion

We urge the Mayor, City and County officials, and departments to implement these recommendations, with the community providing much needed advocacy. It is important to honor and utilize the many strengths and valuable contributions LGBTQ older adults have made and continue to make. We now have an opportunity to implement an action plan that is LGBTQ-affirming, age-friendly, and promotes racial equity - one that recognizes and caters to the strengths of LGBTQ older adults as they *age in community with pride*.

*"As a trans activist of color I want to help my community
- who will be there to help me with my needs."*

Introduction

Seattle/King County is vibrant and growing, with a growth rate that surpasses most large metropolitan areas.¹ In 2015, the population in King County exceeded 2 million,³ and between 2015 and 2017, the Puget Sound region gained over 80,000 new residents.⁴ Since 2010, rental prices in King County have increased by 58.7%⁵ and the cost of living has increased by 21.8%.⁶ As Seattle/King County continues to increase in population size, housing in the region is of heightened demand and cost, creating many serious challenges for older adults in the area.⁷ Within the context of growth in the overall population size, issues of housing affordability and accessibility intensify.

Given profound demographic shifts and the significant aging of the U.S. population overall, Seattle/King County is becoming increasingly older and more racially, ethnically, and culturally diverse. It is estimated that within two decades, older adults will constitute more than 20% of the U.S. population overall.⁸ The population of Seattleites over 60 years of age has increased by 24%, with approximately 345,000 King County residents over the age of 60.⁷ In King County, 23% of those over the age of 60 are racial or ethnic minorities.

We are also witnessing increasing diversity in the older adult population by both sexual orientation and gender identity and expression. Seattle has one of the largest LGBTQ populations in the country.⁹ It is estimated that 2.4% of the U.S. population age 50 and older self-identifies on public health surveys as lesbian, gay, bisexual or transgender, which accounts for more than 2 million older adults nationally.¹⁰ This number is expected to more than double by 2030, to 5 million LGBTQ older adults. When also taking into consideration the number of older adults who are in same-sex relationships, engage in same-sex sexual behavior, or who are sexual or gender diverse but who do not publicly identify as lesbian, gay, bisexual or transgender, the number of sexual and gender diverse older adults increases substantially, representing more than 8% of the older adult population. Currently, there are more than 27,000 LGBTQ adults over the age of 60 living in Seattle/King County.

LGBTQ older adults in the state of Washington, including Seattle/King County, experience systematic health disparities,¹¹ which are inequities in health resulting from social, economic, and environmental disadvantages.¹² As a result, LGBTQ older adults are at elevated risk of disability and poor physical and mental health compared to heterosexuals of similar age, even when accounting for differences in age, income and education.¹¹ Despite the alarming findings regarding health disparities in the LGBTQ older adult population, they remain largely invisible in aging and housing services and policies in Seattle/King County.

The report, *At-risk and Underserved: LGBTQ Older Adults in Seattle/King County* (2015)¹³ first identified LGBTQ older adults as an at-risk, underserved and under-counted population in Seattle/King County. In 2015, the Seattle Mayoral LGBTQ Task Force Report stated, “The City should develop measures to evaluate the inclusivity of its policies, programs, and practices to ensure that they are inclusive of LGBTQ seniors”.¹⁴ In the 2016-2019 *Area Plan on Aging* in Seattle/King County, LGBTQ older adults were for the first time identified as an underserved population in need of outreach and services.⁷ More recently, in 2017, Mayor Durkan released an updated draft of the Age Friendly Seattle Action Plan, which outlines goals to create and enhance services for community-dwelling seniors.¹⁵ In addition, the King County Veterans, Seniors, and Human Services Levy was reapproved in November 2017, providing funds to address housing, veterans, and aging services.¹⁶ Such efforts intersect with the City of Seattle’s

Race and Social Justice Initiative, designed to address and eliminate racial inequities in the access and delivery of services and programs, contracting, workforce development, and outreach and public engagement, which all require attention to individual, institutional and structural racism.

Seattle now has one of the highest homelessness rates in the country. Recent research conducted in Seattle found that among LGBTQ adults of all ages 63% experienced increased rent, 27% moved due to rent or renovations, 5% had experienced homelessness, 5% reported “doubling-up” with friends or family rent-free, and 2% faced eviction or foreclosure over the previous two years.¹⁷ In regional studies of the homeless population, 18% identified as LGBTQ compared to 4.8% of the general population living in Seattle.¹⁸ Nationally, studies have found that approximately 30% of transgender adults have experienced homelessness during their lifetime.¹⁹ While existing information points to critical challenges in housing for older adults in general and LGBTQ younger adults in Seattle, there is a dearth of research specifically examining the housing and senior service needs of LGBTQ older adults.

“Housing as a basic need provides not only shelter, but ideally serves as a place of refuge, respite, and safety. Aging in place connotes the ability to live at home independently and safely, regardless of age, income, or ability.”²⁰ However, because of the extremely high rates of social isolation among LGBTQ older adults, aging in place, primarily in one’s home, also can connote risk. Aging in community - connected, engaged and safe, is critical for LGBTQ older adults. Population aging itself will outgrow the supply of accessible and affordable housing not only locally, but nationally,² which has the potential for severe consequences among LGBTQ older adults given the many challenges they face.

Housing and aging issues in the LGBTQ community remain at a critical crossroads. LGBTQ older adults remain largely invisible in Seattle/King County, in the LGBTQ community, and in services. They continue to occupy the margins and are vastly underserved in housing, aging and health services. In a national survey, 78% of LGBTQ older adults reported interest in affordable LGBTQ-friendly housing.²¹ Previous studies have consistently cited the need for further research of the housing-related needs of the local LGBTQ older adult population. As a result, the City of Seattle Office of Housing commissioned this study on the housing and senior service needs of LGBTQ older adults.

Comprehensive and up-to-date information is critically needed to understand the strengths and needs of LGBTQ older adults to take effective action. The goals of this report are to provide an overview of the housing and senior service experiences and needs of LGBTQ older adults living in the Seattle/King County, and to create an action agenda to equip community stakeholders and Seattle/King County policymakers with the information necessary to ensure local housing efforts and aging services are inclusive, relevant, and effective for LGBTQ older adults and their families, caregivers and communities.

*“Parents are usually gone and there is often tension with our siblings
because of our sexual orientation.
Without children or parents - who will help us?
I'm currently thinking about leaving Seattle because
I can't afford to grow old here.”*

Community Engaged Approach

This project required a comprehensive community engaged approach to identify the needed information to assess the full range of housing and aging service needs of Seattle/King County's diverse LGBTQ older adults. The process started by reviewing available information on housing and service needs, as well as demographic trends within Seattle/King County. We examined numerous recent reports including: Washington State University's Metropolitan Center for Applied Research & Extension (2018)²²; Seattle/King County's Point-in-Time Count (2017)¹⁸; King County Aging and Disability Services' *Area Plan*⁷; LGBTQ Allyship Housing report (2017)¹⁷; Housing Development Consortium of Seattle-King County 2017 Annual Report (2017)²³; City of Seattle's *Age Friendly Seattle Action Plan 2018–2021* (2018)¹⁵; and *At-risk and Underserved: LGBTQ Older Adults in Seattle/King County*.¹³ Next, we assessed available population-based and service-related data on LGBTQ older adults (e.g., the Behavioral Risk Factor Surveillance System survey).²⁴ We also reviewed the compilation of comments and recommendations from the University of Washington's Aging with Pride annual forums including Town Hall: Aging the LGBTQ Way (2015); LGBTQ Aging and Health (2016); and, Aging with Pride and City of Seattle: Aging the LGBTQ Way Forum (2017).

Our goal was to ensure inclusion of traditionally under-represented groups of the LGBTQ community including people of color, those living in poverty, the oldest LGBTQ adults, women, bisexuals, queer, and transgender and gender diverse older adults. An important aspect of the project was to promote racial equity and to gather information from racially, ethnically and culturally diverse LGBTQ older adults on the housing and service needs they experienced. The project also incorporated an intersectional lens assessing the intersections of race/ethnicity, sexual orientation, and gender identity and expression. We developed and implemented multiple outreach and recruitment techniques to ensure diverse participation including offering all our information gathering tools in English and Spanish. We worked with many diverse older adults, community agencies, and community-based outreach workers to reach those hardest to reach, and those living in assisted living and long-term care facilities, shelters, as well as older adults who were homeless. While the age of 50 is not typically considered "old age," because of health disparities and chronic stress, LGBTQ adults are more likely to experience early onset of disability,¹¹ more multiple chronic conditions²⁵ and premature death.²⁶ Thus, in this study we included participants aged 50 and older.

The Rainbow Housing Advisory Committee began meeting in November 2017; the survey was circulated from January 2018 to June 2018 (six-month data gathering period). As a result of this rigorous outreach process, 502 surveys were completed, with 419 completed by LGBTQ older adults (50 and older, residing in Seattle/King County, and LGBTQ or sexual/gender diverse), an unprecedented number of LGBTQ older adults from traditionally under-represented groups. The success of these outreach efforts would not have been possible without the help, engagement and participation of LGBTQ older adults, community groups, and advocates that work directly within these diverse communities. Because of the targeted nature of the outreach activities, it is important to recognize that this is one of the most diverse samples to date of LGBTQ older adults. Thus, the findings reported are based on the extensive outreach strategies and are not generalizable to all LGBTQ older adults living in Seattle/King County. We also included direct quotes from the participants, many of whom took the time to write comments on the surveys and share their experiences with us.

For more information about the survey, see *Methodology* section (Appendix I).

Who Participated in the Project?

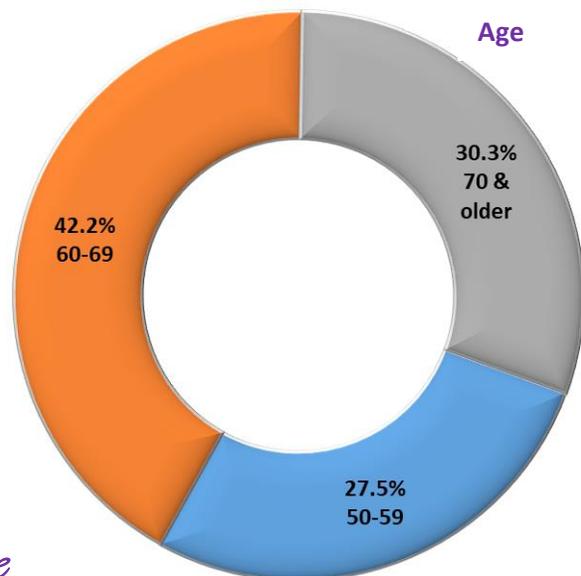
The Seattle/King County LGBTQ older adult community is tremendously diverse in many important ways including by sexual orientation, gender identity and expression, sex, age, race and ethnicity, income, education, and geographic location. This project secured the most demographically diverse sample to date of Seattle/King County's LGBTQ older adults including over 73% age 60 and older and more than 30% age 70 and older, and 32.5% adults of color. When comparing LGBTQ older adult participants to older adults in Seattle/King County's general population, several key findings emerge that deserve attention:

- Significantly more LGBTQ older adults had a disability (43.2%) compared to straight older adults in Washington State, including Seattle/King County (35.0%).¹³
- LGBTQ older adults compared to straight older adults in Washington State, including Seattle/King County, were a health disparate population, with elevated rates of multiple chronic conditions and adverse physical and mental health outcomes.¹¹
- Six out of ten (62.5%) LGBTQ participants 65 and older had a bachelor's degree or higher compared to 38% of Seattle's general older population,¹⁵ yet their incomes have not kept pace. Contrary to popular stereotypes, 35.7% of LGBTQ older adult participants' households had incomes below \$20,000 and half had household assets (including real estate, cars, businesses, financial assets, retirement) less than \$10,000.

Findings

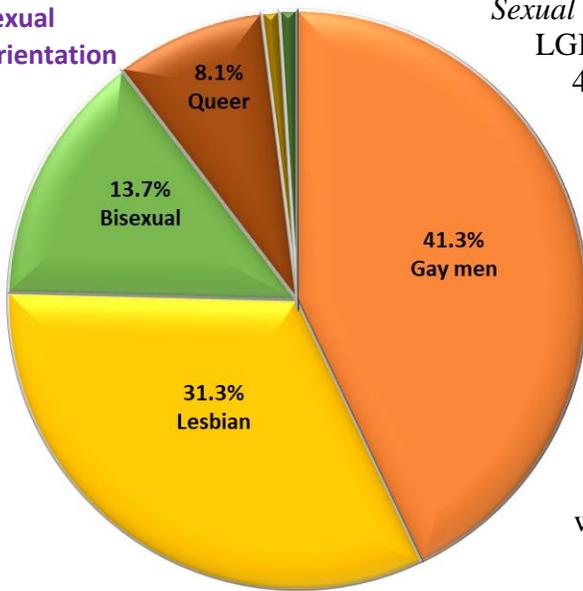
In Seattle/King County, 419 lesbian, gay, bisexual, trans (transgender and gender non-binary), and queer (LGBTQ) older adults participated in the Seattle Rainbow Housing Survey. Because a primary goal of the project was to ensure the representation of demographically hard to reach segments of the population, the background characteristics may not be reflective of all LGBTQ older adults living in Seattle/King County.

Age: Participants ranged from 50 to 87 years of age, with a median age of 65. Nearly one-third (30.3%) were 70 years of age and older and 42.2% were 60 to 69 years of age. We also included those 50 to 59 years of age (27.5%) because LGBTQ older adults compared to straight older adults often experience disability and are more likely to have more multiple chronic conditions at younger ages.²⁵



"Being trans and older, employment is very difficult for me to get, which limits my housing."

Sexual Orientation



Sexual orientation: About one-third (31.3%) of the LGBTQ older adult participants identified as lesbians; 41.3% as gay men; 13.7% bisexual; 8.1% queer; 1.0% as straight; and 1% as other.

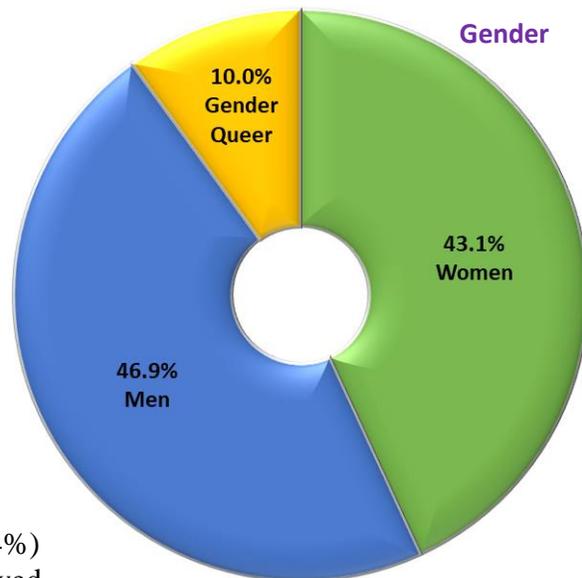
Gender identity and expression, gender: Nearly one-fifth (17.8%) of the participants identified as transgender or gender non-binary and diverse. For the purposes of this report we will use trans to connote transgender and gender non-binary and diverse. In terms of gender, 10.0% identified as gender queer or non-binary or gender diverse or expansive. The remaining participants identified about half women (43.1%) and half (46.9%) men.

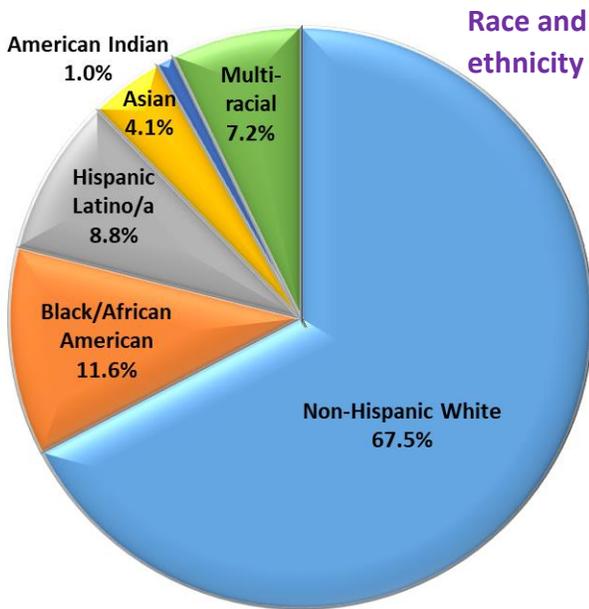
Race and ethnicity: The participants were significantly more diverse by race and ethnicity than previous projects, with 32.5% LGBTQ older adults of color and 67.5% non-Hispanic White. Of the people of color, 11.6% were Black/African American; 8.8% Hispanic/Latino(a); 4.1% Asian/Pacific Islander; and 1.0% Native American/Alaskan Native; 7.2% were multi-racial. Twelve percent (11.6%) of the participants were born outside of the United States or U.S. Territories.

Marital and partnership status: Nearly 70% (69.4%) were single including 5.9% divorced, 5.0% widowed, and 1.6% separated. Among the one-third (30.3%) married or partnered, 16.6% were legally married, 11.9% partnered but not married, and 1.9% in registered domestic partnership.

Income, poverty and financial status: When asked about their annual household income, more than one-third (35.7%) had an annual household income of \$20,000 or less. When taking both household income and size into account, more than 25% had incomes at or below 200% of the federal poverty level. Half (49.5%) had household assets (including real estate, cars, businesses, financial assets, retirements, etc.) of less than \$10,000.

“Single, older lesbian women living alone can have challenges, both in living arrangements and in socializing. This is true of single people generally, but harder if you are trying to find a subset that's only 10% of the population.”





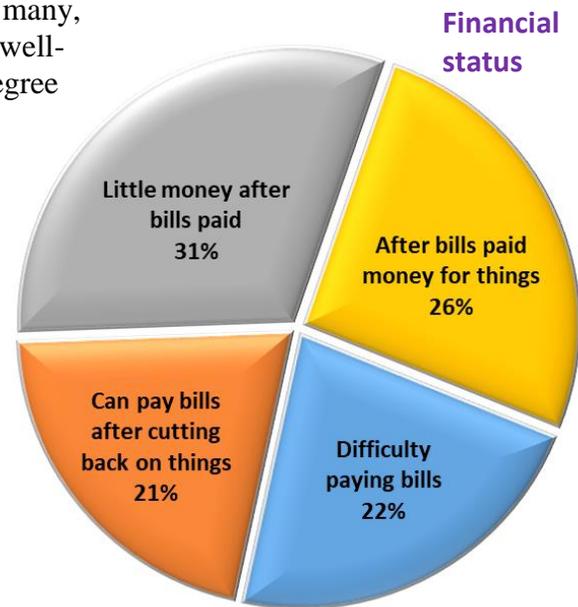
In terms of financial status and resources and ability to meet their financial obligations, 22.3% have difficulty paying bills; 21.0% had to cut back on other expenses to make ends meet; and 31.0% could pay bills but had little spare money to buy extra things. After paying bills, one-quarter (25.8%) had money for extra things.

There were significant differences in financial status by race and ethnicity and gender identity and expression. For example, all of the American Indian/Alaskan Native LGBTQ older adults had difficulty paying bills or had to cut back on other experiences to make ends meet as did 95.0% of Black/African Americans, 91.2% of Hispanic/Latinos(a), and 76.9% Asian/Pacific Islanders compared to 69.1% of non-Hispanic Whites. In addition, trans and bisexual older adults had significantly fewer financial resources

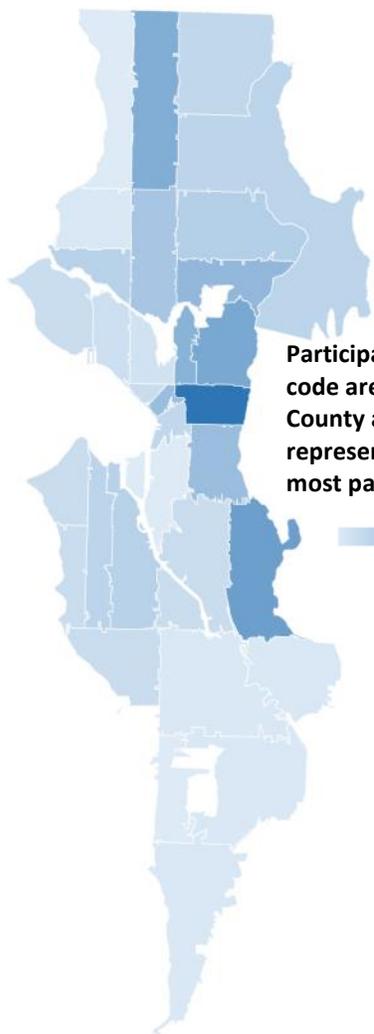
than cisgender or non-bisexual older adults, respectively.

Education: Despite severe economic challenges for many, the LGBTQ older adult participants were relatively well-educated. Over half (57.6%) had a 4-year college degree or more; 27.1% some college; 8.4% a high school degree or GED; and 6.9% less than a high school education.

Employment: Among the LGBTQ older adult participants 65 and older, 41.7% were working in paid employment, with 18% working full-time. Among those under 65, 36.1% were not employed. Twelve percent (12.4%) owned a business. Almost one fifth (17.9%) had served in the military including 24.3% men and 7.6% women. About one-third (31.5%) of trans participants had served in the military.



"Given that many LGBTQ have historically lower pay than "hets," as a group, we are not as financially secure. We have a hard time financially. Social security will be lower. Assets smaller. Having enough money to retire is more challenging."



Participants represented 55 zip code areas in the Seattle/King County area. Darker areas represent the areas with the most participants.

Geographic location: Participants from 55 different zip code areas participated in the project. The highest concentration of participants were from Capitol Hill (16.5%), Central District (8.0%), Rainier Valley (7.7%), and downtown (6.3%).

Disability and health: Nearly half (43.2%) reported a disability that substantially limited one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying. As a health disparate population, 37.1% of the LGBTQ older adult participants reported poor physical health and 29.7% mental distress. Almost one in five (18.5%) had a HIV or AIDS diagnosis. Among men, 30.9% had HIV/AIDS, and among transgender women 36.4% had HIV/AIDS. Largely resulting from Medicare, nearly all (99%) had health insurance.

“Chronic health problems disproportionately affect those in the LGBTQ communities of color than others. Many of us are just one major illness away from the streets.”

Summary

The LGBTQ older adult participants were diverse in terms of sexual orientation, gender identity and expression, age, race and ethnicity, employment status, education, and many more characteristics. They were demographically at-risk with limited financial resources, fewer family members, including family of choice, to assist them and many had accumulated disadvantages over the life course, such as higher rates of disability, regardless of their significantly higher rates of educational attainment. Racial and ethnic minority LGBTQ older adults, including Native American/Alaskan Natives, Black/African Americans, Hispanic/Latinos(a) and Asian/Pacific Islanders had significantly lower financial resources than non-Hispanic Whites, as did trans, gender diverse and bisexual older adults.

“Aging LGBTQ folks with limited income have a difficult time finding and keeping housing. This is especially true of those with HIV/AIDS because they’ve been ill a long time now with compromised immune systems, on top of aging in general. Ideally I’d like to see an LGBTQ-friendly assisted living place or a nursing home.”

Current Housing and Housing Needs

Access to affordable and quality housing is considered an important indicator of community health.²⁸ When comparing LGBTQ older participants to the general population of older adults in Seattle/King County, LGBTQ older adults are at elevated risk relative to several key housing indicators:

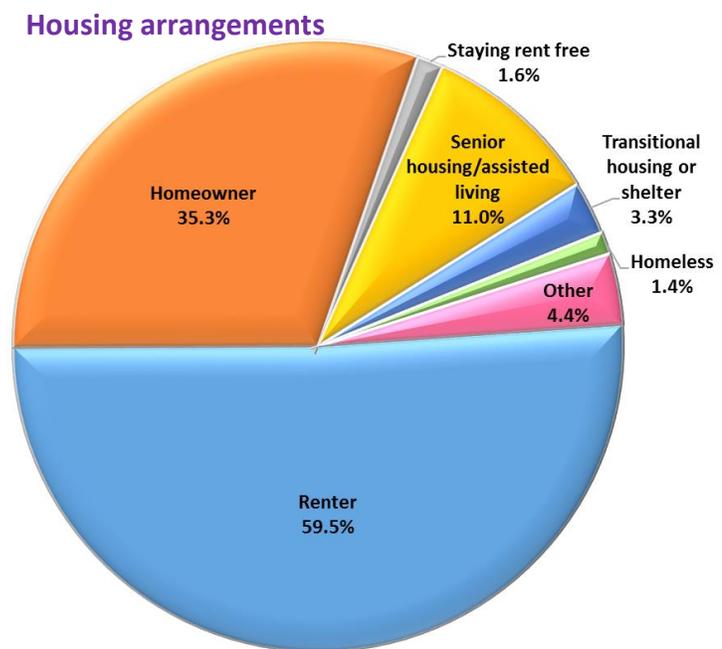
- Approximately one-quarter (25.3%) of adults 60 and older in Seattle/King County rent their home²² compared to 62.9% of the LGBTQ participants 60 and older.
- Over half (58.0%) of renters 60 and older in Seattle were housing cost burdened (spending 30% or more of their income on housing costs), which is considered unaffordable housing,²² compared to 86.8% of the LGBTQ participants 60 and older.
- Nearly 90% (87.0%) of adults age 65 and older in the general population want to remain in their homes³⁰ compared to 61.2% of LGBTQ participants age 65 and older. LGBTQ older adult participants who want to move face significant barriers.

Findings

Household composition: Among the LGBTQ older adult participants 60.2% lived alone. Those living alone were at elevated risk of housing instability since they were less likely to have someone available to support them when needs arise. In terms of other household types, nearly one third (28.5%) lived with spouse or partner, 8.6% with friend(s) or roommate(s), 5.3% other family of choice or children, and 4.4% lived with others.

Housing arrangements: Among participants 59.5% were renters. One-third (35.3%) were homeowners and another two percent (1.6%) stayed with friends or family rent free.

Among renters, almost half (48.0%) lived in a private rental not subsidized. Forty-six percent (45.7%) lived in subsidized housing and/or received rental assistance, including 19.0% who lived in housing subsidized through the Seattle Housing Authority; 17.2% lived in another type of subsidized or affordable housing; and 9.5% lived in a private rental paid via a housing voucher or other rental assistance.



"I'd like to see section 8 vouchers be more realistic to the rents being asked in the 'New Seattle'."

One in ten (10.4%) lived in senior housing, assisted living or another age-restricted community. Less than one percent (0.5%) were living in a nursing home or other type of health care facility.

Homelessness: Homeless individuals are defined as those who are lacking “a fixed, regular, and adequate nighttime residence,” including those living in shelters.²² Seattle is one of four metropolitan areas in the U.S. with the largest homeless populations along with New York City, Los Angeles, and San

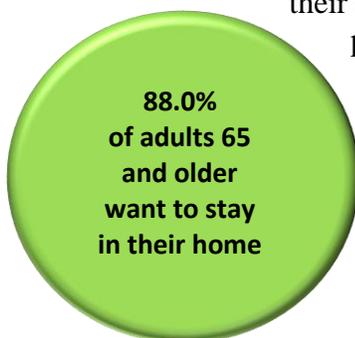
Francisco—these cities are also high-cost housing markets.²⁹ About 5% of the LGBTQ older adult participants were homeless, including 3.3% living in shelters or transitional housing and 1.4% living on the streets. In the past five years, one in five (19.9%) had experienced at least one episode of homelessness.

Housing cost burdened: The cost of housing consists of many items including rent or mortgage, utilities, property taxes, and other direct

housing expenses. Households spending 30% or more of their income on housing costs are generally considered to be burdened by housing costs²⁹ and living in unaffordable housing.²²

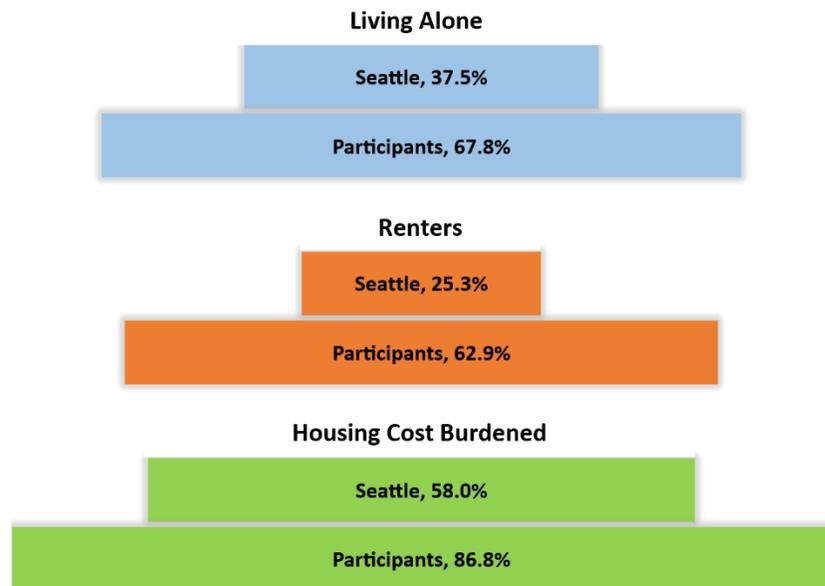
Among LGBTQ older adult renters age 60 and older, the housing cost-burdened share was high at 86.8%; among renters 50 and older 85.9% were housing cost-burdened. Although the share of cost-burdened LGBTQ older adults homeowners compared to renters was lower, six out of 10 (61.5%) homeowners were cost burdened and living in unaffordable housing.

Aging in Community: Although the majority of LGBTQ older adults (62.8%) want to remain in their current housing, this is significantly lower than the older adult population in general; nearly 40% (37.2%) want to move from their current housing.



Housing instability: Nearly 40% (38.4%) of the participants did not feel confident they could continue living in their current housing as long as needed. Four out of 10 (42.8%) had moved within the past four years, including 10.8% who had moved within the past year. Of those who moved

Housing Indicators Seattle vs. Participants, 60 and older



“I live in a nursing home. I don't have anyone to help. I want to move. Can't go out. I don't want to live like this.”

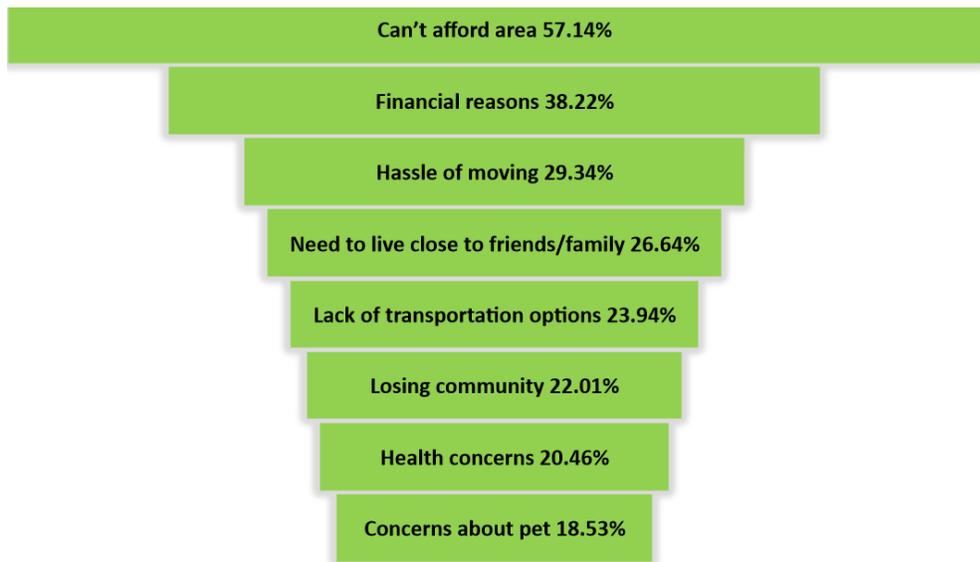
within the past year, 48.5% experienced homelessness, 33.3% eviction, and 15.2% foreclosure within the past five years. Eviction was associated with homelessness.

Those who moved within the past year experienced
Homelessness 48.5%
Eviction 33.3%
Foreclosure 15.2%
within the past five years

Barriers to moving: Among the LGBTQ older adult participants, nearly 90% (86.9%) reported barriers to moving. The most frequently identified barriers included not being able to afford to live in a desired area (57.1%); financial reasons (e.g. unable to sell property, owe more than house is worth) (38.2%); the hassle or uncertainty about what to do with personal belongings (29.3%); the need to live close to current friends, family, and other informal supports (26.6%); lack of transportation (23.9%); fear of losing connection to the history, culture or community (22.0%); health concerns (20.5%); and difficulty relocating with pets (18.5%).

Housing challenges: Challenges LGBTQ older adult participants experienced in the past 5 years included rising rents and home prices (74.8%) and the gentrification of their neighborhood and feeling pushed out (45.1%). In addition, many reported difficulties finding housing because of the following: lack of information about available housing (36.6%); credit score (22.6%);

Barriers to moving



housing voucher or other rental assistance (12.4%); or the result of a past conviction or arrest (10.6%).

Accommodations: Among participants with a disability, within the past five years 23.7% had difficulty finding housing with reasonable accommodations for a disability.

More than two-thirds (67.5%) of those with a disability reported having difficulty finding affordable housing or housing in sufficiently good condition. More than three-quarters (76.4%) of the LGBTQ older adult participants overall reported that in the future they would need additional physical supports and home modifications, including grab bars, railing, ramps, good lighting, and elevators.

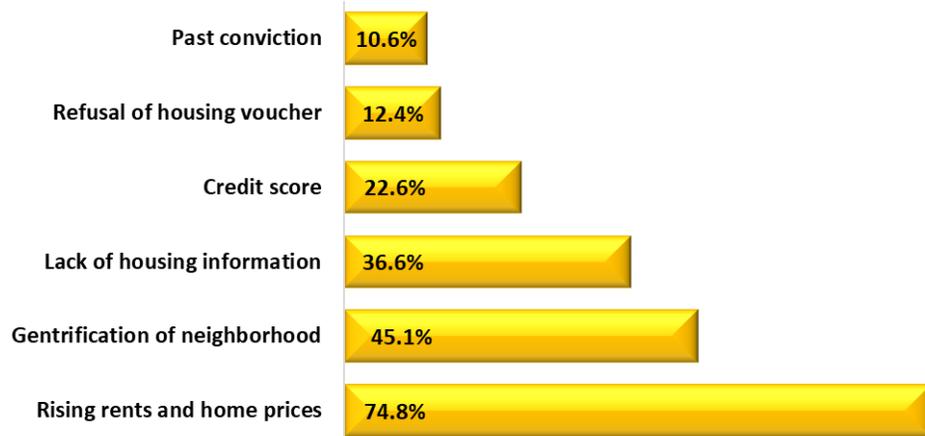
"The "gayborhood" is disappearing, and the newer generations aren't getting the benefit of experiences of an older generation."

Addressing housing challenges: More than 90% (93.1%) of the LGBTQ older adults indicated that expanding the availability of affordable housing was a priority for addressing the current housing issues facing their community. They also identified other important ways to respond to the current housing needs of LGBTQ

older adults: expand the supply of rental housing subsidies (68.4%); increase renter protections (63.8%); provide more housing close to services and other supports in the community (59.4%); improve information and referrals for

affordable housing and housing assistance programs (59.1%); develop more housing for mixed income levels (54.7%); develop more affordable housing in communities of color (53.4%); and provide assistance with mortgage payments, property taxes, or utilities (52.8%).

Housing challenges



Future housing needs: Four out of ten (41.2%) of the LGBTQ older adult participants want to live in senior housing or to live in an age-restricted community; 40.0% low-income or subsidized housing; 36.28% want to live with other LGBTQ adults; 27.1% want shared housing or community-owned housing; 14.2% assisted living; and 3.1% a nursing home or other health care facility.

Interestingly, only 13.4% would ideally live in intergenerational housing or housing for families with children or people all ages.

“I had an issue with a lack of wheelchair access. It was promised that a ramp would be built and then deemed too costly.”

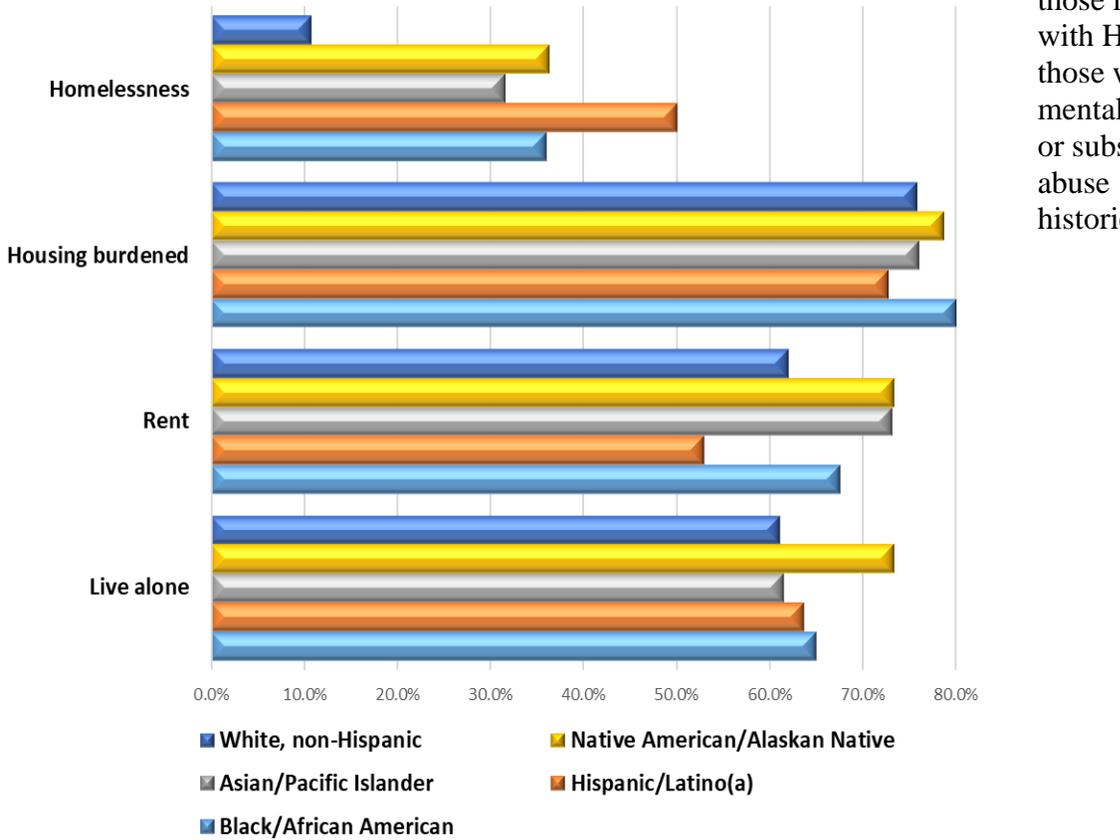
There were several inequities in housing indicators by race and ethnicity. Those most likely to rent included Native American/Alaskan Natives (73.3%),

Asian/Pacific Islanders (73.1%), and Black/African Americans (67.5%). The highest housing cost burden was reported by Black/African Americans (80.0%), Native American/Alaskan Natives (78.6%), and Asian/Pacific Islanders (76.0%). Those with the highest rates of living alone were Native American/Alaskan Natives (73.3%), followed by Black/African Americans (50.0%).

Other key demographic differences in housing needs: When comparing key housing indicators, by other demographic characteristics, several important differences also emerged. Those significantly most likely to live alone and experience high housing cost burden with diminished financial status were those 60 and older, trans, bisexual, single, veterans, those with limited education, and living with a disability.

Those at greatest risk of housing instability (e.g., not confident they can continue living in their current housing) or homelessness in the last five years included those age 70 or older, living in poverty, queer, trans and gender non-binary and diverse, renters with high housing cost burden, those with a disability, those living with HIV, and those with mental health or substance abuse histories.

Inequities in housing indicators by race and ethnicity



“My mortgage payment is lower than rent at most apartments in Seattle, and I still have difficulty paying it. I live on the outskirts of town to afford this place, which makes getting to my Harborview appointments or taking part in most activities difficult and quite a long process.”

Discrimination, Victimization and Bias in Housing

It is important to account for the experiences of discrimination, victimization, and bias in housing experienced by LGBTQ older adult participants. Discrimination, victimization, and bias are known to have harmful cumulative effects on the ability to access and retain housing in later-life. Those who experience abuse in later life are at increased risk of nursing home placement and increased mortality.³¹ When assessing discrimination and bias in housing some important findings emerged:

- Nearly one-third (31.3%) of the LGBTQ participants reported experiencing discrimination based on sexual orientation in the sale or rental of a house, apartment, or condominium.
- Discrimination based on perceived gender identity and expression was nearly double across most types of discrimination, with 53.9% of trans older adult participants having experienced discrimination in the sale or rental of house, apartment, or condominium.
- Nearly half (48.15%) of trans older adult participants reported being physically hurt, pushed, punched, assaulted or physically threatened by someone in their housing.
- Of the LGBTQ older adult participants who experienced discrimination, only 14.9% reported it, due to lack of understanding of how to report or lack of trust of the reporting systems.

Findings

Housing discrimination by sexual orientation and gender identity and expression

In Seattle/King County it is illegal to discriminate in the rental or sale of housing based on sexual orientation, gender identity, sex, marital status, age, race, creed, disability, and alternative sources of income. When participants were asked about experiences of housing-related discrimination because of their perceived sexual orientation, nearly one-third (31.3%) reported experiencing discrimination in the sale or rental of a house, apartment, condominium, or lot. Among trans participants more than half reported discrimination in the sale or rental of a house, apartment, condominium, or lot (53.9%).

Biased treatment

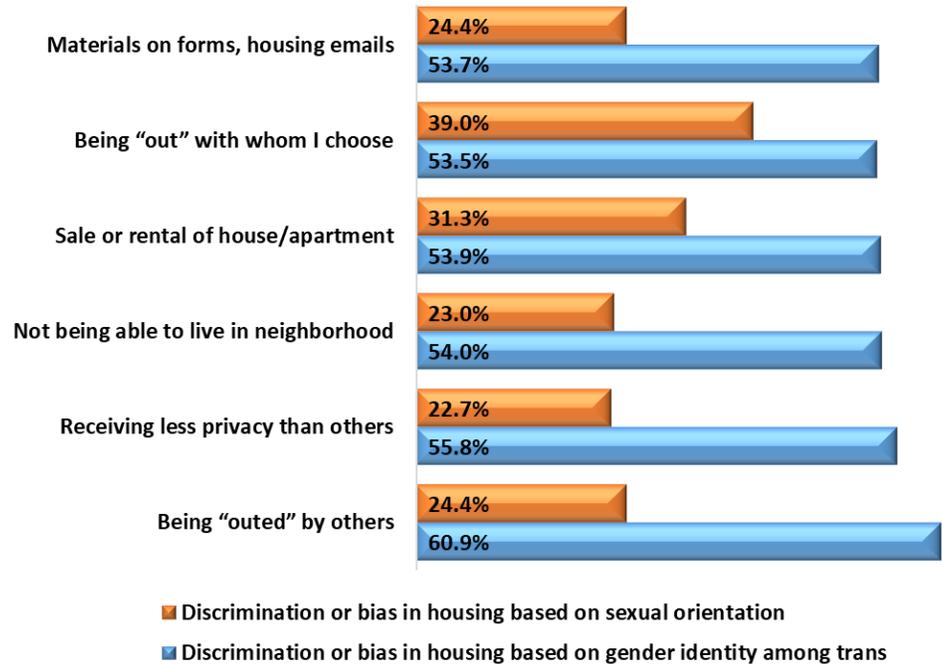
Bias refers to attitudes and beliefs, either explicit or implicit, resulting in unequal treatment,³³ which in housing and services would likely result in the loss of one's sense of security and safety. Nearly one-quarter (23.0%) of the participants perceived biased treatment based on sexual orientation in not being able to live in the neighborhood in which they wanted; 16.9% experienced biased treatment in advertising and/or the evaluation of housing applications; and 14.2% in unequal rents, deposits, or fees. Among trans participants the most common types

"I think being a "woman of a certain age" is already a bias against me (so I'm very unopen about my orientations-sexual or otherwise.)"

of housing-related biased treatment experienced included not being able to live in the neighborhood in which they wanted (54.0%) followed by bias in the enforcement of housing rules or policies (48.8%); advertising or evaluation of housing applications (45.7%); and unequal rents, deposits, or fees (36.1%).

Previous research has found that acts of housing discrimination occur most often during rental transactions.³² Types of biased treatment experienced by LGBTQ renters based on their sexual orientation included: enforcement of housing rules or policies (28.3%); materials on forms, housing bulletin boards, walls, and emails (24.7%); and lack of response to repair requests and other housing concerns (19.8%).

Housing related biased treatment and/or discrimination



Among trans older adult renters, the most frequent types of biased treatment experienced included: material on forms, housing bulletin boards, walls, and/or emails (53.7%); enforcement of housing rules or policies (48.8%); and not having repair requests or other housing concerns addressed (41.2%).

There were also racial inequities in the rates of discrimination in housing because of perceived sexual orientation. For example, discrimination in the sale or rental of a house, apartment, condominium, or lot was experienced most frequently by Hispanic/Latinos(a) (61.5%), followed by Black/African Americans (52.9%), Native American/Alaskan Natives (41.7%), and Asian/Pacific Islanders (37.5%) compared to non-Hispanic Whites (24.4%).

Discrimination by gender identity and expression was also significantly higher for trans older adults of color. For example, among trans older adults, eighty percent of the Hispanic/Latinos(a) and Asian/Pacific Islanders, 60% of Black/African Americans and 57.1% of Native American/Alaskan Natives had experienced discrimination in the sale or rental of house, apartment, condominium, or lot compared to 35.0% of non-Hispanic Whites.

Four out of ten (40.0%) LGBTQ older adult renters with a disability experienced biased treatment in securing reasonable accommodations for a disability.

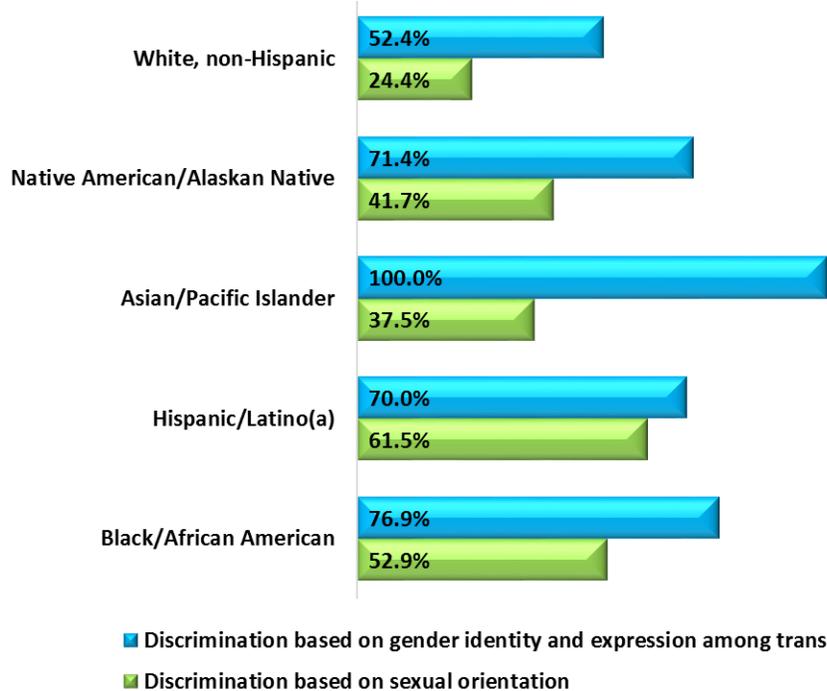
"Very few care about seniors, let alone LGBTQ seniors. Ageism is very, very real. And devastating."

The LGBTQ older adult participants also reported high rates of discrimination in the workplace as well as hate crimes due to their perceived sexual orientation or gender identity or expression, both of which have the potential for

long-term impact on their economic resources available for housing. For example, 41.2% of the LGBTQ older adults reported experiencing discrimination in employment hiring and 32.6% had been fired from a job due to their perceived sexual orientation. Four out of 10 (41.7%) experienced a hate crime and 17.9% have experienced a violent crime three or more times.

Trans older adult participants reported nearly double the rates of discrimination in the workplace due to their gender identity or expression, including discrimination in employment hiring (80.8%) and having been fired from a job (73.5%). Two-thirds (66.0%) experienced a hate crime and 37.7% a violent crime three or more times.

Discrimination sale or rental of house, apartment, condominium, or lot by race and ethnicity



Other biases in housing:

Many LGBTQ older adult participants experienced additional types of biases in their housing based on their perceived sexual orientation and gender identity and expression. By sexual orientation, the other common types of biases encountered was not able to be “out” and live openly or with whom they chose (39.0%); having felt isolated or made to feel invisible in their housing (26.60%); bullied in their housing (25.3%); “outed” by others in their housing (24.4%); and received less privacy than others in their housing (22.7%).

Trans participants also experienced additional biases in their housing at almost double the rate based on their perceived gender identity or expression, including not having access to appropriate bathrooms (57.8%); isolated or made to feel invisible (57.4%); received less privacy than others in their housing (55.8%); being “outed” by others in their housing (53.5%); and bullied in their housing (46.3%).

Biased treatment in shelters, transitional housing and long-term care facilities: Type of housing was associated with the rate of biased treatment experienced in housing. Compared to home owners and renters, those in shelters, transitional housing and long-term care facilities reported high rates of biased treatment. For example, based on their perceived sexual orientation, biased treatment included not able to be “out” and live openly or with whom they choose (50.0%); “outed” by others in their housing (48.8%); and in the enforcement of housing rules or policies (36.6%).

“A secure safe environment is needed where LGBTQ tenants do not even need to think about being harassed, outed, assaulted.”

Trans participants living in shelters, transitional housing and long-term care facilities reported extremely high rates of biased treatment based on their perceived gender identity or expression, including receiving less privacy than others in housing (76.9%); enforcement of housing rules or policies (75.0%); in materials on forms, housing bulletin boards, walls, emails (75.0%); and in getting reasonable accommodations for a disability (72.7%).

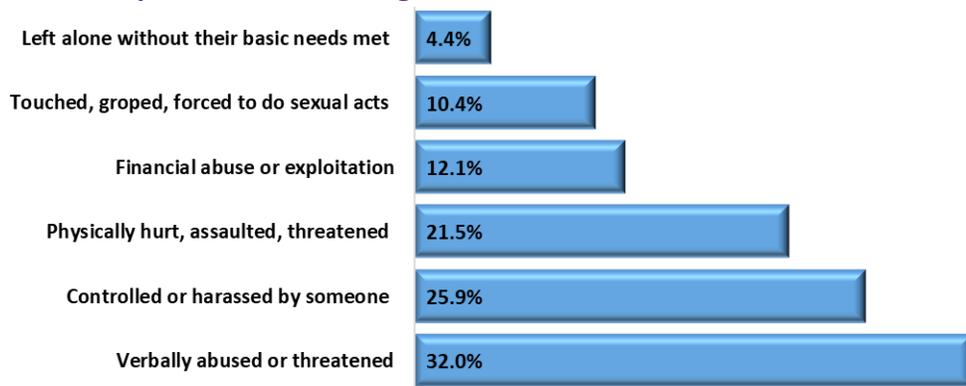
Intersecting types of discrimination:

Participants reported intersecting types of discrimination or harassment they experienced in housing. One-quarter (25.0%) experienced discrimination in housing based on their sex or gender; 21.7% age; 18.5% race or skin color; 12.0% poverty or alternate source of income, 11.7% disability or ability status, and 7.8% marital status.

“Shelters are not safe for us. I've lived on the streets off and on but now I'm getting older and I don't know what to do. I fear for my life like I never have before.”

Abuse in housing: Many types of abuse can also occur in housing including physical, verbal, sexual, and/or economic abuse. Nearly half (48.5%) of the LGBTQ older adult participants

Abuse experienced in housing



reported experiencing abuse in their housing, including having been verbally abused or threatened by someone (32.0%); controlled or harassed by someone (25.9%);

physically hurt, pushed, punched, assaulted, or physically threatened (21.5%); or touched, grabbed, or groped without their consent or forced to do sexual acts (10.4%). In addition, 12.1% experienced financial abuse or exploitation in housing (such as forced or tricked to give someone money or property), and 4.4% experienced neglect, having been left alone without their basic needs met (such as food, water, or medications). Among trans older adults nearly half (48.15%) reported being physically hurt, pushed, punched, assaulted or physically threatened by someone in their housing. Safety was a common concern for many LGBTQ older adults as noted in many comments.

“I am constantly concerned about my physical safety particularly at night because of being gay.”

Reporting housing discrimination: Despite the alarming rate at which the LGBTQ older adult participants experienced discrimination in housing, only 14.9% reported it. Reasons for not reporting housing discrimination included not knowing where to go for help (38.0%); not

knowing about legal protections against housing discrimination (35.5%); and, not knowing where to get information on housing discrimination (28.1%). About 40% of the participants shared other reasons for not reporting housing discrimination, which most often stated a lack of trust in the reporting systems, such efforts would be futile, and nothing would change or be corrected, even if it was reported.

"I'm poor and living in a nursing home. I can't be who I am as a bisexual person. I have to hide. People stare at me. I would like to die. I would now."

For example, none of the Hispanic/Latino(a) older adult participants reported housing discrimination. Furthermore, 87.1% of Black/African Americans, 81.8% Asian/Pacific Islanders, and 80.0% of Native American/Alaskan Natives did not report housing-related discrimination.

Other key demographic differences in discrimination and biased treatment: When examining types and frequency of discrimination, renters were significantly more likely than homeowners to experience discrimination in the sale or rental of a house, apartment, or condominium. In addition, LGBTQ older adult renters compared to homeowners,

experienced many other types of discrimination at nearly twice the rate, including discrimination by sex and gender, age, and race or skin color. Those experiencing housing cost burden, compared to those who did not, experienced higher rates on almost all indicators of discrimination. Renters compared to homeowners were also significantly more likely to have experienced biased treatment, e.g., being "outed" by others in their housing.

Queer and/or trans identified older adults experienced the highest rates of discrimination across nearly all types when compared to those who identified as lesbian, gay or bisexual and/or cisgender. Those partnered or married, compared to those single, and those living with others compared to those living alone, also experienced elevated rates of housing discrimination. Other demographic factors associated with elevated risk for discrimination included those oldest compared to those younger and those living in poverty. Those with a disability were almost twice as likely to experience discrimination in housing based on sexual orientation or gender identity or expression. Those with lowest level of educational attainment (high school or less) were significantly less likely to report housing-related discrimination compared to those with more than a high school education.

"While I don't identify as trans, I'm definitely gender queer and my presentation has always been "androgynous". This has caused so much discrimination and harassment that I can't even quantify it."

Community Resources, Support and Engagement

The LGBTQ community is engaged with many opportunities for social connection, yet it is often characterized as youth oriented. Social and community resources, including emotional and social support, instrumental assistance, and tangible resources, have been found to be important protective factors in enhancing housing stability and providing a safety net during times of need. The findings highlight several key factors related to social and community resources, supports and engagement associated with LGBTQ older adults' housing experiences, needs and vulnerabilities.

- As friends and chosen family members age, many experienced their own limitations, which reduced their ability to assist others. LGBTQ older adults are less likely to have children, relatives or other people to help them compared to the general older adult population in Seattle/King County. Thus, LGBTQ older adults are less likely to have a safety net when problems arise as they age.¹³
- The oldest LGBTQ older adults, the long-term survivors, are at greatest vulnerability of social isolation since they have generally outlived their peers and those available to help them. They are especially vulnerable to housing instability and are at heightened risk of premature institutionalization or death.
- LGBTQ older adults participate in their communities and have much to offer, yet few have access to meaningful employment or volunteer opportunities. Most of them have been directly involved in addressing the housing challenges facing Seattle/King County. LGBTQ older adults who feel a strong connection to their community are often hesitant to leave, underscoring a need for support to age in community.

Findings

Support available: Most LGBTQ older adults reported many strengths as they built strong communities and networks of support. Three-quarters (76.1%) of the LGBTQ older adult participants had someone they could turn to for instrumental or short-term support. Yet most were supported by peers of similar age, many of whom face their own aging and health challenges as they age, which limits their ability to provide intensive or on-going support. Significantly fewer Black/African American and Hispanic/Latino(a) LGBTQ older adults compared to non-Hispanic Whites had someone they could turn to for support.

“Being older and LGBTQ can be a very isolating experience especially for those of us who are estranged from relatives and childless ourselves.”

The LGBTQ older adult participants were less likely to be married or partnered or to have children or others to support them compared to most older adults in Seattle/King County. Only about one-quarter of LGBTQ older adults in Seattle/King County had children¹³ and few had cross-generational ties, which may result in less support in old age. These factors can also place limits on housing options for LGBTQ older adults as they age.

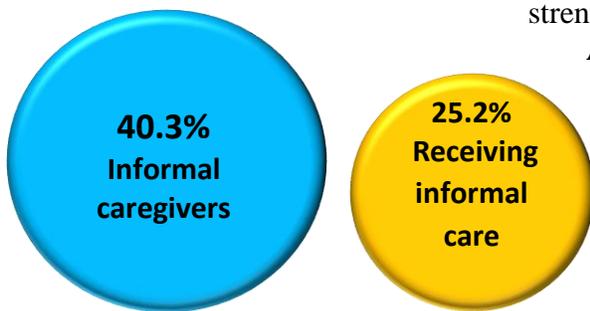
Social isolation: Many LGBTQ older adults reported social isolation, which increases risk of adverse aging and health outcomes, including poor health, memory loss, and premature institutionalization or mortality.³⁴ More than 6 out of 10 participants (64.3%) reported they felt socially or emotionally unsupported in the past week. Half (50.9%) felt there was no or little support from others in their neighborhood. Many of the LGBTQ older adults expressed feeling discounted, ostracized and marginalized by the ageism in the LGBTQ community.

Faith, spiritual or religious support: Older adults often turn to places of faith or worship for support, community, and help in older age, which has been identified as a protective resource in aging.³⁵⁻³⁷ However, many LGBTQ older adults have had adverse experiences and have become estranged from religious or spiritual institutions. More than half of the participants (56.4%) reported they did not have access to a supportive spiritual community or place of worship in their neighborhood. More than one-third (39.7%) attended spiritual or religious services or activities in the past month. Black/African American and Hispanic/Latino(a) LGBTQ older adults had higher levels of participation in spiritual and religious activities than non-Hispanic Whites.

Caregiving: In response to the larger cultural and historical context as well as the HIV/AIDS pandemic, LGBTQ communities have demonstrated strength in their ability to provide care for one another. Among the LGBTQ older adult participants, 2 out of 5 (40.3%) were caregivers, assisting a spouse, partner, friend, or other family member because of health-related need. There were racial and ethnic inequities in the provision of informal caregiving. For example, Black/African American (46.3%), Asian/Pacific Islander (44.0%) and Hispanic/Latino(a) (43.8%) LGBTQ older adults were significantly more likely to be providing informal, unpaid caregiving compared to non-Hispanic Whites (37.6%).

While more than 40% of LGBTQ older adults were providing informal care, only one-quarter (25.2%) were currently receiving care or help from a spouse, partner, friend, or family member because of a health limitation despite high levels of disability and impairment. There weren't significant racial or ethnic differences in receiving care despite higher levels of disability and impairment among LGBTQ older adults of color.

Disclosure: The extent to which LGBTQ older adults were willing and able to access support from others was found to be associated with the degree they disclosed or were "out" about their sexual orientation and/or gender identity or expression. Four out of ten participants (40.4%) openly disclosed and were out about their sexual orientation to others. One-third (33.8%) were out only under certain conditions, and more than one-quarter (25.8%) were never out.



"LGBTQ older people are more isolated than many others. They are not often out. Many still feel a need to guard being out,"

As might be expected, we found significant differences in disclosure rates of sexual orientation by age. For example, of the youngest group, 50-59 years of age, about half (47.1%) were out; 40.2% were out only under certain conditions; and 12.7% were never out. Among those 70 and older, less than one-third (29.8%) were out, 32.9% out only under certain conditions, and 37.3% were never out. By race and ethnicity, Black/African American, Hispanic/Latino(a), and Asian/Pacific Islander LGBTQ older adults were less likely to openly disclose their identities compared to non-Hispanic Whites.

Less than one-third (30.9%) of trans older adult participants were out about their gender identity or expression to others; 12.7% were only out under some conditions, and more than half (56.4%) were never out. Among those age 70 and older, only 6.7% of the trans participants were out, and 93.4% were never out.

“We need more community-based organizations, services that can fill in for the lack of immediate family in terms of care-giving help.”

Giving back: LGBTQ older adult housing-related advocacy: Over half of LGBTQ older adults raised money or donated food, clothing or supplies (59.7%); helped someone with a housing search (53.4%); or let someone stay with them for 1 day to 3 weeks (51.1%). Approximately a third of participants connected someone with a place to stay (37.7%); advocated for housing solutions (32.8%); or tried to find others a job (31.3%).

LGBTQ housing advocacy



Limited volunteer opportunities: Nearly half (47.7%) of the LGBTQ older adult participants did not have access to volunteer opportunities in their neighborhood.

Other key demographic differences in support and caregiving: Several demographic groups reported significantly lower levels of social support than other groups, including those who were single, lived

alone, living in poverty, and experienced housing burden. Those who identified as queer, gender non-binary, bisexual, and had a disability reported significantly less social support than did other demographic groups.

Women reported significantly higher levels of support than men across some key indicators, such as social support and engagement in religious and spiritual activities. In terms of caregiving, the oldest age group was significantly more likely than the younger age groups to both provide caregiving and receive care. Women and those gender non-binary were significantly more likely to provide caregiving support, although men also provided relatively high levels of care. The demographic profile for those receiving care was more similar, although those with a disability and those living in poverty were significantly more likely to receive care.

Gaps in Services to Support Aging and Housing

LGBTQ older adults, compared to older adults in general, are less likely to access health, aging or human services, which has been found to be strongly associated with past experiences of discrimination and victimization in service settings.³⁸ A recent study found up to 60% of Seattle's LGBTQ older adults, especially among those hardest to reach and most vulnerable, would forego utilizing much needed aging-related services if it required them to access services in the general community.⁴²

LGBTQ older adult participants in this project were surveyed about the housing and aging-related services and programs they *needed* but did not use in the past 12 months. Participants were also asked about *barriers* to services and programs that impacted their housing, and their recommendation for the future. Several key highlights emerged:

- Many LGBTQ older adults reported needing, but not accessing, a variety of housing and aging-related services and supports that could potentially help them remain in their own homes and communities, because they perceived them as not LGBTQ affirming.
- Some aging and housing support services were perceived to be too costly, even among LGBTQ older adult participants who would likely meet income eligibility requirements.
- Among those at risk of housing instability, nearly two-thirds (62.4%) did not have access to a welcoming senior center in their neighborhood.
- Top recommendations for safe and affirming housing for LGBTQ older adults included developing LGBTQ-specific friendly housing, ensuring housing programs/materials are LGBTQ inclusive, providing LGBTQ training for housing providers, developing an LGBTQ guide to housing, and providing training on intersecting identities (sex, gender, sexual orientation, race, ethnicity, culture, income) for housing providers.

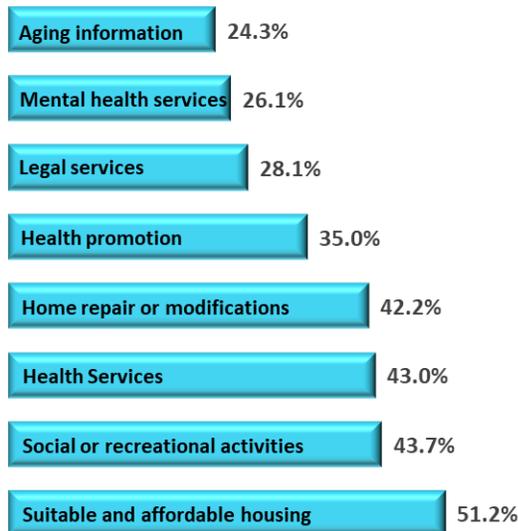
Findings

Services and programs needed: Many aging-related services are designed to assist older adults so they can remain living independently in their own homes and communities. More than half (51.2%) indicated that in the past 12 months they needed access to suitable and affordable housing. Other housing and home-related support services identified as needed included home repair, maintenance, and/or modifications (42.2%); home delivered meals or free groceries (17.9%); and door-to-door transportation (17.7%). In-home health services and personal care or housekeeping (20.5%) or skilled nursing care (6.7%) were also identified as needed.

"I was soliciting bids from plumbers/electricians/handyman/roofers for various repairs/upgrades to home. When some of the prospective bidders realized that I'm a lesbian they suddenly became disinterested in bidding on the job with no explanation or became rude and did a vanishing act."

Several other aging related services were also needed to support their ability to remain in their housing including chronic disease education and management (42.9%); health promotion, wellness and exercise classes (35.0%); legal services (28.1%); mental health services (26.1%);

Services and programs needed



support groups (26.1%); information, referral, and outreach (24.3%); case management and social worker support (16.6%); and caregiver support and respite (9.2%). Among those at-risk of housing instability, nearly two-thirds (62.4%) did not have access to a welcoming senior center. Black/African American, Hispanic/Latino(a), and Asian/Pacific Islander LGBTQ older adults were significantly less likely than other racial and ethnic groups to have access to an LGBTQ affirming senior center in their neighborhood. Several other types of services were ranked as likely needed in the future including: assistance with activities of daily living such as bathing, dressing, or eating (93.8%).

Barriers to services: Not LGBTQ affirming: The LGBTQ older adult participants were also asked what specific barriers they encountered in accessing

needed services in the past 12 months. The most common reason they did not access needed services was because the services were perceived to be non-LGBTQ affirming, such as aging information and referral (50.0%); social and recreational activities (46.0%); suitable and affordable housing (29.3%); social work and case management services (27.1%); and health promotion, wellness, or exercise classes (25.3%). Among the nearly 30% of LGBTQ older adults that were well-resourced, many did not feel specialized services or housing were necessary.

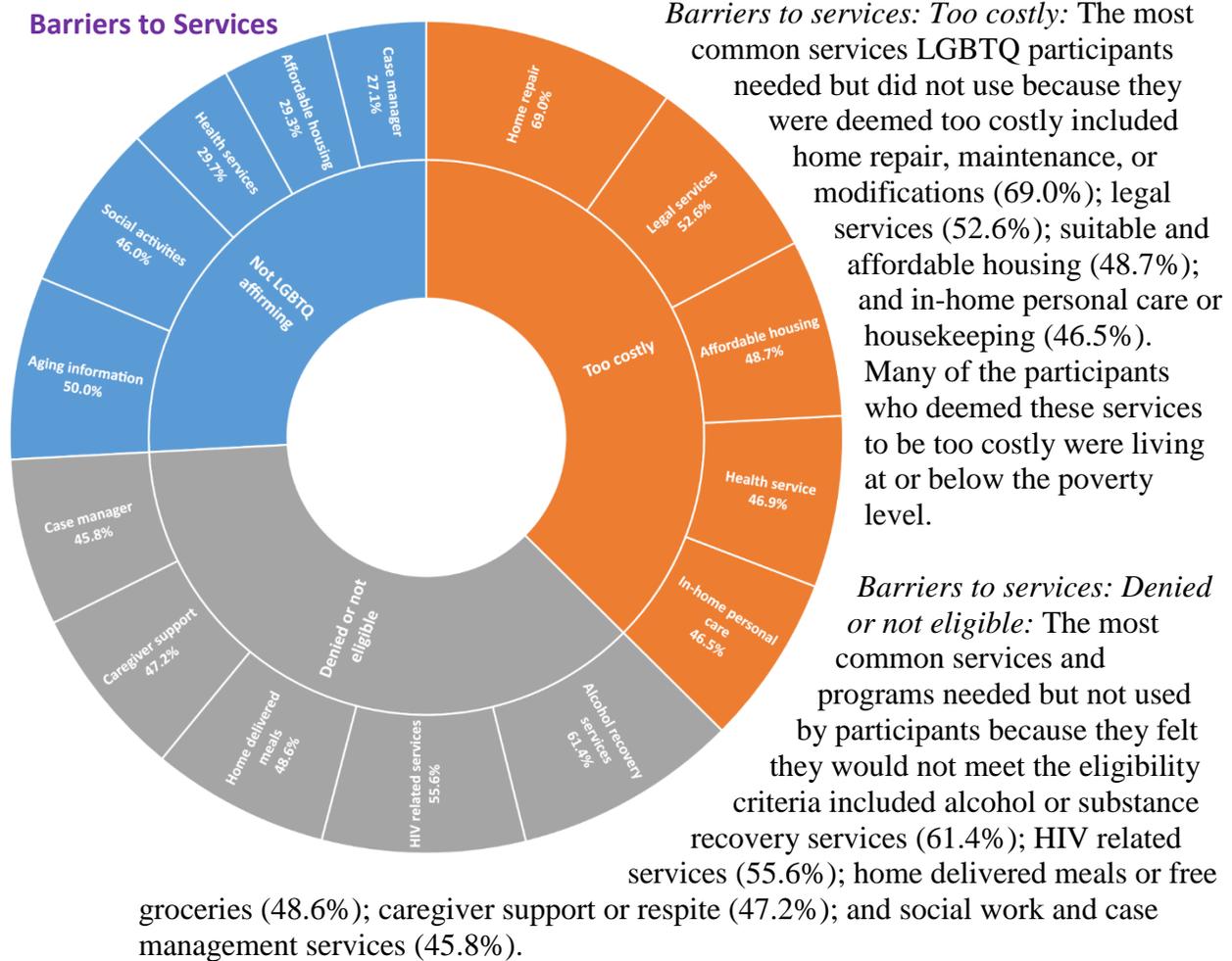
Racial and ethnic minority LGBTQ older adults across all groups (Hispanic/Latino(a), Black/African American, Asian/Pacific Islander, and American Indian/Alaskan Native) were significantly more likely than non-Hispanic Whites to report affordable and suitable housing as non-LGBTQ affirming. In addition, Black/African American, Hispanic/Latino(a) and American Indian/Alaska Native LGBTQ older adults were significantly more likely to identify lack of LGBTQ and trans affirming services as barriers.

Others who experienced services as not being LGBTQ affirming included 63.6% of those living with HIV/AIDS; and 78.9% of the trans participants when accessing trans affirming health

"Housing that is affordable and encourages people to be active and engaged and that helps people stay healthy, especially the aging population dealing with the health effects of HIV."

"Affordable housing is disappearing from Seattle at an alarming rate - create more units suitable for LGBTQ older adults."

services (e.g., health insurance coverage, legal documents, as well as specific gender-affirming interventions and needed adaptations to routine medical screenings and procedures).



Recommendations for safe and welcoming housing for LGBTQ older adults: Participants ranked recommendations they thought would help make housing safe and affirming for LGBTQ older adults. They ranked the recommendations in the following order: Develop LGBTQ-specific friendly housing (82.8%); ensure housing programs, forms, and materials are LGBTQ inclusive (71.7%); provide LGBTQ training for housing providers (68.5%); develop an LGBTQ guide to housing (66.2%); and provide training on intersecting identities (sex, gender, sexual orientation, race, ethnicity, culture, income) for housing providers (55.5%). Among trans participants, 67.9% indicated a need for trans affirming training for housing providers.

“To help older LGBTQ adults there needs to be specially trained people who are sensitive to their life experiences and can assure them that there are safe places for them.”

Other key demographic differences in accessing services and barriers encountered: There were several other significant demographic differences in terms of lack of access to specific services. The demographic groups most likely to identify the need for affordable and suitable housing included those living alone, single, renters, with high housing cost burden, living at or below the federal poverty level, and those living with a disability compared to the other demographic groups. Those who were significantly most likely to report the lack of LGBTQ and trans affirming services as a barrier included those living alone, renters, with high housing cost burden, living at or below the federal poverty level, and those living with a disability compared to the other demographic groups.

LGBTQ older adult demographic groups least likely to have access to an inclusive and affirming senior center in their neighborhood included those living alone, single, those at or below the federal poverty level, renters with high housing cost burden and living with a disability compared to other groups. In addition, those who were oldest, identified as bisexual, queer and trans non-binary, men, having a high school or less education, and having served in the military were the demographic groups significantly more likely than others to report not having access to an LGBTQ affirming senior center in their neighborhood.

*"I'm a trans woman that is old. I need help.
I might lose my housing and my health is declining.
I don't feel safe in my neighborhood.
What am I to do. I don't have anyone to help me.
I'm alone, sick, and tired. Racism and poverty affect my every day.
How can we get more support for our community?
Who is there to help us when we need it most."*

Action Plan and Recommendations

Within the context of growth in the overall population size, issues of housing affordability and accessibility are intensifying in Seattle/King County. Based on the information gathered, several key housing and senior service challenges emerged:

- Inadequate services prevent LGBTQ seniors from remaining in their homes and aging in community.
- Lack of affordable, stable, safe, and accessible housing for LGBTQ seniors.
- Limited cultural capacity of providers to ensure LGBTQ affirming housing environments.
- High rates of discrimination and bias in housing, with most not obtaining legal recourse.
- LGBTQ racial inequities in access to affordable housing and senior services.
- Insufficient community engagement and advocacy for LGBTQ aging and senior housing.
- Lack of information necessary to proactively guide and monitor decision making to better support LGBTQ communities and eliminate inequities in the allocation of City resources.

Seattle/King County is falling behind other major metropolitan areas in meeting LGBTQ housing and senior service needs. In 2013, the City of San Francisco commissioned a report to assess the needs of LGBTQ older adults. Based on the findings and advocacy efforts, San Francisco's Department of Aging and Adult Services now invests more than 6 million dollars to address the needs of LGBTQ seniors, with an LGBTQ Senior Center and two LGBTQ senior housing buildings – Seattle/King County has neither. This report is an important first step for Seattle/King County to have the information necessary to address the needs of LGBTQ older adults and their communities.

Key findings

LGBTQ older adult participants were resilient yet at-risk. More than six out of ten wanted to stay in their current homes, yet many were vulnerable to losing their housing resulting from a convergence of risk factors within the context of rising rents and housing costs.

Compared to older adults in Seattle/King County, LGBTQ older adults had significantly higher rates of renting, elevated rent cost burden, and were more likely to live alone in old age with no supports available.

Reporting higher than average housing cost burden and living in unaffordable housing and most were living on fixed incomes. Twenty percent experienced homelessness in the past five years.

Three-quarters of the LGBTQ older adults barely had enough financial resources to make ends meet. One-quarter were well- resourced; many of them did not feel specialized housing or services were necessary.

Nearly 40% of the LGBTQ older adult participants wanted to move, which is significantly higher than older adults in general – yet most faced significant barriers to moving.

Elevated disparities in disability and health have been documented among LGBTQ older adults. Yet many Seattle/King County homes and neighborhoods are ill-equipped to accommodate mobility limitations, which drives heightened demand for accessibility and home modifications and supports.

LGBTQ older adults experienced high rates of discrimination, with trans older adults reporting nearly double the rates. More than four out of five LGBTQ older adults did not report, thus did not receive, any legal recourse.

Most LGBTQ older adults were not accessing needed senior or housing services because the services were felt to be non-LGBTQ affirming, too costly, and/or not accessible.

LGBTQ older adults are active in housing and service advocacy. Over half raised money or donated food, clothing or supplies, or helped someone with a housing search and place to stay.

Racial and ethnic minority LGBTQ older adults reported higher levels of housing cost burden, lack of support, and lack of access to many housing and aging services than non-Hispanic Whites.

The consequences of losing housing late in life were severe for LGBTQ older adults, as they often could not secure new housing. Even after a short hospital or rehabilitation stay, many did not have a social or financial safety net necessary to retain their housing, which if lost often led to premature institutionalization for the remainder of their lives. Eviction often led to homelessness, which can result in premature mortality. Not addressing aging and housing needs directly within LGBTQ communities can result in much greater public cost.

Action Plan and Recommendations

1. Promote aging in community via funding an LGBTQ Senior Center with LGBTQ affirming services and programs to support these resilient at-risk older adults.

Recommendations:

- Fund an LGBTQ-affirming Senior Center with one-point entry (e.g., for senior services, referral, enrollment assistance, case management), built within the LGBTQ community so it is trusted and can reach those in greatest need and provide support and technical assistance to other providers.
- Expand awareness of, and access to, home repair and housing modification programs to maintain and support accessible and safe housing.
- Test the effectiveness of additional home-based mental health and substance abuse counseling services, especially for older adults who report difficulty accessing and maintaining such support services.

2. Fund and provide affordable, stable, safe, and accessible LGBTQ senior housing.

Recommendations:

- Prioritize and fund affordable LGBTQ senior housing developments incorporating best practices, such as formalized agreements with trusted community-based aging service providers early in the development process; provision of storefront visibility; and ample, dedicated space for the delivery of senior services for residents and the community.

Incorporate LGBTQ affirming principles with equity and age-friendly universal design in housing developments for low-income and mixed-income levels.

- Increase the supply of rental housing subsidies, and assistance with mortgage payments, property taxes, and utilities. Provide housing counseling, rental assistance, eviction prevention support, and legal services to decrease housing instability and homelessness of LGBTQ older adults.
- Develop and test alternative housing models, such as home share programs, community-based housing via community land trusts, intergenerational housing programs, and models designed to allow professional and volunteer caregivers to live among those needing home-based services.

3. Enhance cultural capacity and create LGBTQ affirming housing environments and services with attention to high-risk groups through trainings and resources.

Recommendations:

- Fund, design and implement an LGBTQ equity housing training forum tailored toward housing providers, including intersectionality and culture, and race/ethnicity.
- Develop and facilitate LGBTQ affirming trainings, specifically for shelters, transitional housing, and long-term care facilities, to reduce social isolation and end bullying by residents.
- Create and disseminate an LGBTQ affirming housing and resource guide for community use and resident housing councils.

4. Ensure the reporting of discrimination and legal recourse.

Recommendations:

- Launch a community-wide awareness campaign on what constitutes discrimination and how to report it, including legal protections in public accommodations such as shelters, transitional housing, and long-term care facilities.
- Ensure the handling of discrimination complaints is affirming for marginalized and underserved LGBTQ older adults, including the oldest, trans, bisexuals, and people of color. Pilot test the use of navigators to support vulnerable seniors and others through the reporting process and investigation of complaints.
- Expand fair housing testing to assess violations of housing discrimination laws by sexual orientation and gender identity and expression, as well as intersectional forms of discrimination such as race/ethnicity, disability, and use of housing vouchers.

5. Promote LGBTQ community support, engagement and advocacy.

Recommendations:

- Work with nonprofit and for-profit agencies and communities to promote the understanding of LGBTQ aging and housing issues.
- Prioritize addressing the needs of hard to reach and traditionally underserved LGBTQ older adults, including people of color, immigrants and linguistically diverse, those living in poverty, the oldest, trans, queer, bisexual older adults, those living with HIV/AIDS, and those with disabilities.
- Include more diverse LGBTQ older adult voices in housing and senior advocacy efforts as well as planning processes, including land use, urban design, and housing and senior service advisory boards.

6. Expand the collection and utilization of data to monitor LGBTQ housing and aging-related service needs, and to ensure equity in budgeting and the allocation of City and County resources.

Recommendations:

- Expand the collection of data on sexual orientation and gender identity and expression using best practices when voluntary demographic data are collected via City and County agencies and contractors, such as client intake and other forms for services and contracts.
- Ensure training is available for City and County workers and contracted staff to attain skills and abilities needed to effectively collect such data. Assess and pilot test methods to make data publicly available.
- Analyze and eliminate LGBTQ inequities in the City's and County's allocation of resources, including housing initiatives, senior programs and services, and all other policy and regulatory mandates.

Conclusion

We urge the Mayor, City and County officials, and departments to implement the recommendations outlined, with the community providing much needed advocacy on behalf of addressing the housing and service needs of LGBTQ older adults. While LGBTQ older adults are pioneers and have made important contributions to our City and County, they face significant risks in housing, which increase their vulnerability as they age. As we move forward, we have an important opportunity to articulate and implement an action plan that is LGBTQ-affirming, age-friendly and promotes racial equity, as it recognizes and caters to the strengths of our diverse community. The action plan is designed to facilitate the delivery of services and to expand options and choices in housing, so LGBTQ older adults can, rather than age in place, age within their communities, engaged and supported. Such a multipronged approach is needed now to address the growing aging, health, and housing inequities facing LGBTQ older adults, so they can *age in community with pride*.

"I would only prefer to move if I could live with people who are LGBTQ because I would be freer to be myself and be around neighbors who I share life experiences with. I would prefer to live in a rainbow community."

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Appendices

Methodology

We developed a targeted outreach strategy to better understand the health and aging needs of older diverse LGBTQ adults who reside in Seattle/King County. The project announcement and survey, available online and hardcopy, were distributed via community centers, housing facilities, mental health and wellness centers, health and aging resource fairs, agencies serving those with HIV, and community outreach workers. To reach a more racially and ethnically diverse sample, both online and hardcopy versions of survey were available in English and Spanish. In addition, community outreach workers also distributed surveys within diverse communities. Targeted recruitment was needed to improve the diversity of the sample and to increase sample sizes for statistical comparisons and was not intended to produce a representative sample. Because of its targeted nature, the sample is likely not reflective of LGBTQ older adults living in Seattle/King County.

The announcement described the purpose of the project and criteria for inclusion. A link to the survey was embedded in the emailed project announcement. Participants could also call or email to receive an online or hardcopy survey. We also offered gift card incentives and the opportunity to enter a raffle for a \$200.00 gift card to QFC or Fred Meyer as a token of appreciation for their time.

To be eligible, participants were required to be 50 years of age or older, and residing in Seattle/King County. In addition, participants either identified as LGBTQ or were sexual/gender diverse, or attracted to or had an intimate or sexual relationship with someone of the same sex or gender.

The self-administered survey consisted of several sections including: Current housing; housing related discrimination and victimization; health and well-being; social support and engagement; housing related services and programs; and background characteristics.

Surveys were distributed and collected over a six-month period, from January 2018 through June 2018 and were completed by 502 participants, with 419 older adults meeting all the inclusion criteria, an unprecedented number of older adult participants across traditionally under-represented groups.

For data analysis, descriptive statistics were initially conducted. Next, in each report section, similarities and differences were examined by housing related indicators (living alone; at or below the federal poverty level; limited financial resources; renting; housing burden; homelessness in the past 5 years) and by background characteristics including age (70 and older; 60-69; 50-59); gender (women; men; gender queer or non-binary or gender expansive); sexual orientation (lesbians; gay men; bisexual women and men; and queer); gender identity (transgender and gender non-binary and diverse participants; cisgender); race and ethnicity (non-Hispanic White; Black/African American; Hispanic/Latino(a); Asian/Pacific Islander; Native American/Alaskan Native); partnership status (single; married/partnered); education (high school or less; some college or more); and ability status (living with a disability; no disability). In addition, we examined how current housing and housing instability, displacement, homelessness, discrimination and victimization, health disparities, community support and engagement, and gaps in services and programs were associated with housing related indicators and background characteristics. Statistical tests were applied, as appropriate. In this study, lesbians, gay men, bisexuals, and queers are treated as distinct groups (bisexual women and men were combined due to sample sizes).

Unavailable in most other studies, the sample of LGBTQ older adults in this study are age 50 and older and diverse in many respects. However, there are limitations that are important to consider. First, the design and sampling procedures used in this study do not allow for the generalizability of the findings. Thus, the findings cannot be generalized beyond those who participated in the study. Recruitment of underrepresented groups was a primary focus of the study, and while we achieved greater diversity than other previous studies, continued work is needed to find effective ways to reach diverse communities, including across diverse refugee communities. In addition, only self-report data were collected and likely based on participants' perceptions and interpretations rather than behaviors; such measures do not replace objective indicators.

Selected Key Terms and Measures

Background characteristics:

Sexual orientation: Participants were asked to select from one of the following categories: gay or lesbian; bisexual; straight or heterosexual; queer; or not listed above (please specify).

Gender: Participants were asked to select their current gender from one of the following categories: woman; man; gender queer or non-binary or gender diverse or expansive; or not listed above (please specify).

Gender identity and expression and trans: Participants were asked if they had ever considered themselves trans or transgender. In addition, they were asked which of the following best described their sex assigned at birth or listed on their first birth certificate: female or male. Participants were considered trans if they self-identified as trans or transgender or if their current gender was different than their sex assigned at birth, or if they identified as gender queer or non-binary or gender expansive, or not listed above.

Cisgender: Not transgender or trans.

Age: Calculated from participant's year of birth. Participants were grouped into age 50-59, 60-69, 70 and older.

Race and ethnicity: Participants were asked to identify their race and ethnicity by selecting one or more of the following: Non-Hispanic White; Hispanic/Latino(a); Black/African American; Asian/Pacific Islander; Native American/Alaskan Native; or not listed above (please specify). Participants who marked more than one race were categorized as multiracial. For Native American/Alaska Native, those who were exclusively Native American/Alaska Native and those who were Native American/Alaska Native multi-racial were combined for analyses due to small size.

Income: Participants selected their annual household before taxes in 2017 from the following categories: less than \$20,000; \$20,000-\$24,999; \$25,000-\$34,999; \$35,000-\$49,999; \$50,000-\$74,999; \$75,000 or more. Income was dichotomized by factoring annual household income with household size to determine whether participants were at or below the 200% of the federal poverty level (FPL).³⁹

Financial status: Participants were asked which of the following best described their current resources: I have difficulty paying bills no matter what I do; I have enough money to pay bills, but only because I cut back on things; I have enough money to pay bills, but little spare money to buy extra or special things; After paying bills, I have enough money for special things. Those with limited financial resources did not have money available to buy special things.

Education: Participants selected their highest level of education. Categories included: less than high school; high school or GED; less than 4 years of college; 4 years of college degree or more. Education was dichotomized into either high school or less, or some college or more.

Relationship status: Participants were asked to select their current relationship status from one of the following: single; married, legally recognized; registered domestic partnership, not married; partnered, not married, not registered domestic partnership; divorced; widowed; separated; other (please specify). Relationship status was categorized into married/partnered or single.

Physical disability: Participants were asked whether they had a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying.⁴⁰

Military status: Participants were asked if they had served in the military.

Housing-related indicators:

Living arrangement: Participants were asked with whom they currently live: I live alone; partner or spouse; other family of choice or children; friend or roommate(s); other (please specify). Living arrangement was dichotomized into living alone or living with others.

Housing arrangement: Participants were asked about their current living arrangement: renter; homeowner; staying with friends or family rent free; living in senior housing or age-restricted community; living in an assisted living community; living in a nursing home or other health care facility; living in transitional housing or a shelter; homeless; other (please specify).

Housing burdened: Participants were asked what percent of their income they estimate to spend on their housing including rent or mortgage, utilities, property taxes, or other direct housing expenses. Categories included: 0% to 9%; 10% to 24%; 25% to 29%; 30% to 49%; 50% to 74%; 75% or more. Households spending 30% or more of their income on housing costs were considered housing burdened²⁹ and living in unaffordable housing.²²

Housing instability: Participants were asked how confident they were that they would be able to continue living in their current housing for as long as they like.⁴¹ Housing instability was dichotomized into confident and not confident.

Homelessness past 5 years: Participants were asked if in the past five years they had experienced specific challenges finding or maintaining safe, quality, or affordable housing, with homelessness as a discreet response category.

*"Once gays and lesbians go into senior housing,
they go back into the closet.
That is so wrong.
There is safety in numbers.
So, designate some housing specifically for LGTBQ people."*