



**AAG**

Australian  
Association of  
Gerontology

**DISRESPECTING  
LGBTI IDENTITY**

**▶ A UNIQUE  
FORM OF  
ELDER ABUSE**

Report of the Australian Association of  
Gerontology workshop facilitated and led by  
Dr Catherine Barrett, Director Alice's Garage  
held in Melbourne on 20 November 2018

Report launched on 25 October 2019

# ACKNOWLEDGEMENTS

## ACKNOWLEDGMENT OF COUNTRY

Australian Association of Gerontology (AAG) acknowledges Traditional Owners of Country throughout Australia and recognises the continuing connection to lands, waters and communities. We pay our respect to Aboriginal and Torres Strait Islander cultures, and to Elders past, present and emerging, and to all Aboriginal and Torres Strait Islander peoples including members of the Stolen Generations. For further information see AAG's Aboriginal and Torres Strait Islander Ageing Advisory Group (ATSIAAG)



## SPONSOR

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**Australian Government**  
**Department of Health**

## DEDICATION

This report is dedicated to Shivane Mansfield who passed away on 27 September 2019, aged 73. Shivane was a kind, caring person and a fierce advocate for trans rights. She mentored other trans people and frequently provided free training to medical staff on trans issues. During the late 1970's and 80's, Shivane, who at the time worked for the Melbourne Map Centre, traversed the rugged terrain in a bid to map up to 75 waterfalls in the rivers and streams system of the Otways in Victoria. Despite poor health, Shivane generously shared her life story at the AAG workshop that is the basis for this report. After the workshop and dinner, Shivane said that she was very happy to be invited to speak and had found the whole afternoon and evening inspiring and full of social connection. Shivane's legacy lives on through the many lives she touched, this report and her publications on waterfalls.

## CONTRIBUTORS

### Workshop presented by

Dr Catherine Barrett, Director of Alice's Garage

### Workshop presenters

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## CONTENT WARNING

This paper discusses abuse of older LGBTI people, which may be emotionally challenging to engage with. If you are impacted by the content and need some support, you can call:

### 1800 184 527 Q Life

LGBTI peer support and referral.

### 1300 22 4636 Beyond Blue

Support for anxiety, depression and suicide prevention

### 13 11 14 Lifeline

Crisis support and suicide prevention

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**Pictured: Dr Catherine Barrett**, Director Alice's Garage



# ABOUT US

## AUSTRALIAN ASSOCIATION OF GERONTOLOGY (AAG)

Since 1964, the Australian Association of Gerontology (AAG) has been Australia's peak national body linking researchers, educators, policymakers, practitioners and other experts engaged in ageing issues. With over 1400 members across every State and Territory in Australia, our members include researchers, geriatricians, nurses, allied health professionals, aged care practitioners, policy makers, consumer representatives and other experts in ageing. AAG has 18 Collaborating Research Centres that represent all major research in ageing in Australia.

AAG's purpose is to improve the experience of ageing through **CONNECTING RESEARCH, POLICY and PRACTICE**

## ALICE'S GARAGE

Alice's Garage is part of the Celebrate Ageing Program, a social enterprise challenging ageism and building respect for older people.

Alice's Garage focuses on empowering older LGBTI people. It strengthens the voices of older LGBTI people, draws on their knowledge and skills to address the challenges they face and builds communities where LGBTIphobia and ageism are addressed. The purpose of the Garage is to address the inequalities older LGBTI people face related to ageism and the legacies of our LGBTIphobic histories. The vision is to build a sense of Place, belonging and community connection for older LGBTI people – and to inspire others to do the same. Further information is available at <https://alicesgarage.net/>

Alice's Garage was established by Dr Catherine Barrett in 2016. Catherine has over 30 years' experience working with older people as a clinician, educator, researcher and capacity builder. She has been working with LGBTI Elders since 2007. Catherine was a Human Rights Medal finalist in the 2018 Human Rights Awards. She is the AAG 2019 Glenda Powell Travelling Fellow.



# EXECUTIVE SUMMARY

This paper aims to help improve understanding about the unique forms of elder abuse experienced by LGBTI people and to kickstart discussions about developing integrated policy and practice improvements by:

- ▶ Providing background information about definitions and the demographics of LGBTI communities.
- ▶ Briefly reviewing the policy context in Australia, including:
  - LGBTI ageing and aged care policy
  - aged care quality policy
  - elder abuse policy.
- ▶ Briefly reviewing the research context, including:
  - The Tango Project
  - AAG scoping review on LGBTI ageing research.
- ▶ Reporting on the AAG pre-conference workshop held in November 2018, including:
  - overview of the evidence
  - twelve presentations by (or on behalf of) LGBTI elders
  - evaluation of the workshop.
- ▶ Providing five key policy recommendations to kickstart discussions in relevant forums.

**Pictured: Jamie Gardiner**, Vice-President Liberty Victoria



# POLICY RECOMMENDATIONS

We need to better understand the unique forms of elder abuse experienced by LGBTI people, to inform the development of integrated policy and practice improvements. The following policy recommendations have been developed to kickstart discussions in relevant forums, including:

- the Royal Commission into Aged Care Quality and Safety
- implementation of the National Plan to Respond to the Abuse of Older Australians
- implementation of the LGBTI Diversity Action Plans.

## CHARTER OF RIGHTS FOR OLDER PEOPLE

1. Australia should have a National Charter of Rights for Older People that specifically includes the right to protection from elder abuse, including abuse and discrimination based on LGBTI identities.

## ROYAL COMMISSION INTO AGED CARE

2. The Royal Commission into Aged Care Quality and Safety should include a specific focus on the unique forms of elder abuse experienced by LGBTI people in both residential aged care and at home.

## NATIONAL PLAN TO RESPOND TO THE ABUSE OF OLDER AUSTRALIANS

3. Future iterations of the National Plan to Respond to the Abuse of Older Australians (and its implementation plans) should include specific initiatives to prevent and respond to the unique forms of elder abuse experienced by LGBTI people in both residential aged care and at home. They should also include LGBTI people as a priority group.

## DIVERSITY ACTION PLANS

4. Future iterations of the:
  - Australian Government diversity action plan
  - Actions to support LGBTI elders: a guide for aged care providers
  - Actions to support LGBTI elders: a guide for consumers
  - Shared actions to support all diverse older people: a guide for aged care providers(and their implementation plans) should include specific initiatives to prevent and respond to the unique forms of elder abuse experienced by LGBTI people in both residential aged care and at home.

## LGBTI AGEING RESEARCH

5. The Australian Government should commission appropriate literature reviews on LGBTI elder abuse in both institutional and community settings to assist in identifying research gaps. For example, a systematic review that builds upon the findings of AAG's Scoping Review on **LGBTI Ageing Research 2019**.<sup>(1)</sup>

# BACKGROUND

## INTRODUCTION

Older LGBTI people may face specific ‘difficulties’ because of disrespect for their LGBTI identities. This can take many forms including: discrimination, exploitation, LGBTIphobic comments, mis-gendering, and restricting sexual or gender expression. After a lifetime of discrimination, the cumulative impact of this disrespect can be profound. However, these experiences are often not named as ‘elder abuse’ by older LGBTI people, their families and friends, government agencies or service providers. **We need to understand the unique nature of LGBTI elder abuse in order to begin to develop policy and practice responses.**

## DEFINITION OF ELDER ABUSE

The World Health Organisation defines elder abuse as:

**“a single or repeated act, or lack of appropriate action, occurring within any relationship where ‘there is an expectation of trust which causes harm or distress to an older person.’”(2)**

## WHY WE HAVE USED THE TERM LGBTI

When using the term ‘LGBTI,’ we are using the language that is known within the ageing and aged care sector. We recognise and acknowledge that there are people of diverse relationships, bodies, sexualities and genders that are not overtly named in this acronym. However, this paper is intended to be inclusive of all people with diverse bodies, genders, relationships or sexualities who might describe themselves in different ways.

## DEMOGRAPHICS

The size of Australian LGBTI communities is difficult to determine (due in part to the lack of recognition of LGBTI people in key measures such as the National Census).<sup>1</sup> However, the proportion of LGBTI people in Australia is estimated to be up to **11 per cent of the population.**(4) There is very little information available about the number of people in each of the subgroups within the LGBTI acronym:

- ▶ A recent population-based sample of over 20,000 Australians aged 16–69 found that 14.7% of women are same-sex attracted, 13.5% engage in same-sex behaviour, 1.2% are lesbian and 2.2% bisexual; and 6.8% of men are same-sex attracted, 6.0% engage in same-sex behaviour, 1.6% are gay and 0.9% bisexual. (5)
- ▶ The Royal Children’s Hospital Melbourne estimates that around one per cent of children and adolescents experience gender identity issues, although not all of these will continue into adulthood.(7)
- ▶ There are no firm figures for the number of Australians born with intersex variations. A low-range statistic for traits evident at birth is around 1 in 2,000 people (0.5% of births) but a more likely figure may be closer to 1.7%.(8)

We acknowledge that the relationship between people with intersex variations and the lesbian, gay, bisexual and transgender communities is complex.(9) We note that the Darlington Statement: Joint consensus statement from the intersex community 2017, says:

**“Intersex is distinct from other issues. We call on allies to actively acknowledge our distinctiveness...”(10)**

<sup>1</sup> On 22 August 2019, the National LGBTI Health Alliance published a Joint Statement in Support of LGBTI Inclusion in the 2021 Census.(3)

There are three key sets of Australian government policies that relate to elder abuse of LGBTI people:

- ▶ LGBTI ageing and aged care policy
- ▶ Aged care quality policy
- ▶ Elder abuse policy.

These policies have developed independently over time, and consequently there are some overlaps and gaps in the policy framework. The policy recommendations in this paper are intended to kickstart discussions about the development of integrated policy and practice improvements in relation to LGBTI elder abuse.

## 1. LGBTI AGEING AND AGED CARE POLICY

### LGBTI Ageing and Aged Care Strategy (2012)

The National LGBTI Ageing and Aged Care Strategy (the LGBTI Strategy) was released by the government in 2012 and was given a five-year implementation time frame (ending in 2017).(4) *The strategy included an action relating to protection from discrimination but did not specifically refer to elder abuse.*

### Legislative protections (2013)

In 2013, the 'special needs' groups identified in the Aged Care Act 1997 were amended to include LGBTI people.(11) In the same year (2013), the Sex Discrimination Act 1984 was amended to provide new protections against discrimination on the basis of a person's sexual orientation, gender identity, and intersex status, and to provide protection against discrimination for same sex de facto couples. (12) The amendment also removed the religious exemptions related to aged care, meaning that all Commonwealth-funded aged care service providers (regardless of their organisation type) are required to provide non-discriminatory services to LGBTI people.

### Review of the LGBTI Ageing and Aged Care Strategy (2017)

On 23 November 2017, Minister Ken Wyatt launched the Review of the National LGBTI Ageing and Aged Care Strategy Final Report.(13) *The only reference to elder abuse in the Final Report was the following information:*

**'The Charter of Care Recipients' Rights and Responsibilities clearly sets out the right of LGBTI people receiving aged care... to be treated without exploitation, abuse, discrimination, harassment or neglect. These protections are also included in the new draft Single Quality Framework.'**(13)

### Aged Care Diversity Framework (2017) and Diversity Action Plans (2019)

The Aged Care Diversity Framework (the Diversity Framework) was launched in December 2017.(14) It builds on the previous LGBTI Ageing and Aged Care Strategy, with the vision that:

**"All older people experience a high-quality aged care system that ensures equitable access and outcomes and embraces their diverse characteristics and life experiences."**(14)

The Diversity Framework is supported by four Diversity Action Plans that are relevant to older LGBTI people, which were launched in February 2019:(15)

- ▶ Australian Government Diversity Action Plan
- ▶ Actions to support LGBTI elders: a guide for aged care providers
- ▶ Actions to support LGBTI elders: a guide for consumers
- ▶ Shared actions to support all diverse older people: a guide for aged care providers.

The Guide for aged care providers identifies actions that providers could take to deliver more inclusive and culturally appropriate services for older LGBTI people.(16) It acknowledges that there is no 'one-size-fits-all' approach to diversity, and that each provider will be starting from a different place and operating in a different context.

- ▶ **The Actions to support LGBTI elders: a guide for consumers includes outcome 6, which states [from the perspective of an older person]:**

**'I access services from a provider who has a clear understanding of elder abuse – the specific effects and consequences (physical, emotional, mental) on L, G, B, T and/or I peoples. They have procedures in place to ensure my safety is maintained.'**(16)

- ▶ **The Shared actions to support all diverse older people: a guide for aged care providers includes outcome 1:**

**'Provide consumers with simple, understandable information on... how to report and receive support for elder abuse.'**(17)

- ▶ **The Diversity Framework and the other two Action Plans do not specifically refer to elder abuse.**

## 2. AGED CARE QUALITY POLICY

### **Royal Commission into Aged Care Quality and Safety (2018 ongoing)**

The Royal Commission into Aged Care Quality and Safety was established in October 2018 and hearings commenced in January 2019.(18) The Commissioners are required to provide an interim report by 31 October 2019, and a final report by 30 April 2020. The revised Letters Patent outline the Commission's terms of reference, which are broad enough to cover policies about both LGBTI aged care and elder abuse (within residential and home aged care).(18) *As at the time of writing, the Royal Commission does not appear to have focused on LGBTI elder abuse issues yet.*

### **Charter of Aged Care Rights (2019)**

The Charter of Aged Care Rights, which came into effect on 1 July 2019, applies to consumers once they start receiving Australian Government funded aged care, including residential care, home care packages and flexible care.(19) *The Charter contains 14 rights, and the one most relevant to LGBTI elder abuse states:*

**'I have the right to live without abuse and neglect.'**(19)

## Aged Care Quality Standards (2019)

The Aged Care Quality Standards, which are contained in the Quality of Care Amendment (Single Quality Framework) Principles 2018, came into effect on **1 July 2019**.<sup>(20)</sup> The Aged Care Quality and Safety Commission will monitor and assess aged care providers based on the quality of the service experienced by consumers. *The standards most relevant to LGBTI elder abuse are:*

### 'Standard 1 – Consumer dignity and choice

The organisation demonstrates the following: each consumer is treated with dignity and respect, with their identity, culture and diversity valued.

### Standard 5 - Organisation's service environment

Consumer outcome: I feel I belong and I am safe and comfortable in the organisation's service environment.

### Standard 6 - Feedback and complaints

Consumer outcome: I feel safe and am encouraged and supported to give feedback and make complaints. I am engaged in processes to address my feedback and complaints, and appropriate action is taken.'<sup>(20)</sup>

## 3. ELDER ABUSE POLICY

### Australian Law Reform Commission review (2017)

In 2016, the Australian Law Reform Commission (ALRC) was asked to consider Commonwealth laws and legal frameworks and how they might better protect older persons from abuse. In August 2016, Alice's Garage made a detailed submission to the ALRC specifically about LGBTI elder abuse.<sup>(21)</sup>

In June 2017, the ALRC Final Report was released.<sup>(22)</sup> The report noted that older LGBTI people:

- ▶ may experience abuse related to their sexual orientation or gender identity
- ▶ may rely on families of choice and face either abuse by these people or a failure to recognise them as family members
- ▶ may be reluctant to disclose they are LGBTI to services for fear of discrimination
- ▶ may have a higher exposure to other risk factors that may increase their vulnerability to abuse, such as mental health issues or social isolation.<sup>(22)</sup>

*The ALRC recommended the development of a National Plan to combat elder abuse and that:*

**'The National Plan should take into account the different experiences and needs of older persons with respect to gender and sexual orientation.'**<sup>(22)</sup>

### State and territory policy reviews

New South Wales, South Australia and Western Australia have completed specific reviews into elder abuse. All three completed reports express support for a national approach to elder abuse.

In Victoria and Queensland, the issue of elder abuse was also considered by inquiries into family violence.

In 2018, the Final Report of the West Australian Select Committee into Elder Abuse found:

**“FINDING 16 Older people who identify as lesbian, gay, bisexual, trans or intersex are subject to the same type of abuse as the rest of the community but also can experience discrimination unique to their identity and, as a result of their life experience, are less likely to speak up and report elder abuse when it occurs to them.”(23)**

### **National Plan to Respond to the Abuse of Older Australians (2019)**

The National Plan to Respond to the Abuse of Older Australians was launched on 19 March 2019.(24) It sets out the commitment of the Australian government and each of the eight state and territory governments to work together on five priority areas of action:

1. Enhancing our understanding
2. Improving community awareness and access to information
3. Strengthening service responses
4. Planning for future decision making
5. Strengthening safeguards for vulnerable older adults.

**Despite the recommendation of the ALRC, the National Plan does not include any specific actions in relation to LGBTI elder abuse.(24)**

The companion document Everybody’s Business: Stocktake of elder abuse awareness, prevention and response activities in Australia describes the work already underway across Australia as at March 2019.(26) *The stocktake only lists a few organisations who are currently doing work specifically about LGBTI elder abuse, including:*

- ▶ Alice’s Garage (Celebrate Ageing)
- ▶ Silver Rainbow (National LGBTI Health Alliance)
- ▶ Office for Ageing Well (South Australia)
- ▶ GLBTI Rights in Ageing Inc (Western Australia).(26)

The Implementation Plan to support the National Plan to respond to the abuse of older Australians was released in July 2019.(27) *The only task in the implementation plan about LGBTI elder abuse is that the South Australian Officer for Ageing Well will fund some awareness raising focused on older LGBTI people.*

# RESEARCH CONTEXT

## THE TANGO PROJECT (2016-18)

In October 2016, Alice's Garage launched The Tango Project. This two-year project provided older LGBTI people in Victoria with an Independent Third Party to document and address the difficulties (including abuse and discrimination) that they face based on their LGBTI identities. The project team was led by Dr Catherine Barrett and Ro Allen, Gender and Sexuality Commissioner for Victoria, was project patron. The project was conducted in partnership with a group of older LGBTI people.

A report on the first year of the project was launched in 2017.(28) One of the key observations was that older LGBTI people did not relate to the language of 'abuse' and were more likely to refer to 'difficulties.' Dr Barrett noted that this approach may reflect the limited sense of entitlement that older LGBTI people have because historically the onus of responsibility was on them to conform to social norms.(28)

**"We didn't think of it as abuse or discrimination. It was just the way things were. We thought we were in the wrong, so we just had to shut up and live silently (LGBTI Elder)."**

## AAG SCOPING REVIEW ON LGBTI AGEING RESEARCH (2019)

It was beyond the scope of this project to conduct a literature review about LGBTI elder abuse. However, in a separate project AAG conducted a scoping review of LGBTI ageing research. A report on that project is expected to be launched in October 2019. (29)

The aim of the scoping review was to map the range of LGBTI ageing research through systematic searches of the academic and grey literature in English-language publications up to July 2018. A total of 837 publications were identified for inclusion in the review. The authors then classified the publications according to various criteria including the topics explored.

*Table 1 shows that the scoping review found very few publications that appears to relate to LGBTI elder abuse (around 1% of LGBTI ageing research).* However, given the findings of the Tango Project, it appears likely that some relevant behaviours are not being labelled as 'elder abuse' by research participants and/or researchers. Therefore, it is possible that some elder abuse research identified in the scoping review has been classified under other related topics. (e.g. discrimination).

*Further work is required to properly the assess the nature and extent of existing research around LGBTI elder abuse.*

Table 1. AAG Scoping Review on LGBTI Ageing Research 2019 - Topics explored

Topic	All regions N=837	
	Number of publications	Percentage
Ageing experience	227	27.12
Dementia/Alzheimer's	24	2.87
Experience of social exclusion, loneliness and isolation	76	9.08
HIV/AIDS	68	8.12
Identity commitment, concealment and development	209	24.97
Mental health and mental healthcare services	265	31.66
Physical health and access to healthcare	208	24.85
Aged care in residential nursing homes	120	14.34
Aged care in the home or community/social services	189	22.58
End-of-life care and planning	38	4.54
Training professionals working with older LGBTI people	195	23.30
Bereavement	19	2.27
Caregiving/Carers	49	5.85
Community/social support	214	25.57
Family (biological and/or of choice)	78	9.32
Relationships, intimacy and sexuality	113	13.50
Discrimination	286	34.17
<b>Elder abuse</b>	<b>12</b>	<b>1.43</b>
Employment/unemployment	20	2.39
Finance	21	2.51
Housing	53	6.33
Legal and estates	33	3.94
Media portrayal of older LGBTI people	22	2.63
Policy and legal	52	6.21
Poverty	43	5.14

# REPORT ON AAG WORKSHOP

## WORKSHOP PROCEEDINGS

AAG's pre-conference workshop, Disrespecting LGBTI Identity – A Unique Form of Elder Abuse, aimed to help participants to understand the lived experience of LGBTI elder abuse by hearing older LGBTI people sharing stories. Further information is provided in the workshop flyer at **Appendix 1**.

The workshop was hosted by Dr Catherine Barrett (Director, Alice's Garage) and funded by the Department of Health. It was held on Tuesday 20 November 2018 from 3.30 pm to 5.30 pm at the Melbourne Convention Exhibition Centre. The workshop preceded the 51st AAG Conference which commenced the following day. This event was free for invited participants.

Twenty-six people attended the workshop. Participants included aged care consumers, carers, researchers, service providers, peak bodies and advocacy groups. This workshop began with brief overviews of current research, followed by twelve presentations by (or on behalf of) older LGBTI people. Some of the older LGBTI people shared experiences of their peers. This 'third person' format acknowledged the emotional cost of asking older LGBTI people to relive the trauma of their own abuse.

After the workshop, the older LGBTI people went out to dinner together to support each other after an emotionally challenging afternoon and to celebrate their courage in speaking out.

### **Pictured: Dr Luke Gahan,**

Research Fellow National Ageing Research Institute



## PRESENTATIONS

### **Welcome**

#### **Dr Sue Malta (Convenor, AAG LGBTI Special Interest Group)**

The workshop began with a welcome by Dr Malta, who gave an Acknowledgement of Country and acknowledged that it was International Transgender Day of Remembrance. A trigger warning and contact numbers for support services were placed on each table.

### **Overview of evidence**

#### **Dr Catherine Barrett (Director, Alice's Garage)**

- ▶ The Tango Project documented 19 'difficulties' or instances of LGBTIphobic abuse experienced by older LGBTI Victorians – none were reported to complaints or advocacy services. Only one was reported directly to the project coordinator, raising questions about why older LGBTI people are not reporting abuse.
- ▶ Catherine posed the idea that, as William Faulkner said, 'The past is not dead, it is not even past.' In other words, we have legislative and policy reform but older LGBTI people may still feel the onus of responsibility to 'straighten up' or hide their LGBTI bodies, relationships and identities to avoid upsetting others.
- ▶ Examples shown from research where older LGBTI people said they had never experienced LGBTIphobic discrimination but then described responses and incidents that legally could be considered discrimination.
- ▶ There is a need for outreach – for advocacy and complaints services to build relationships of trust with older LGBTI people so that there is take up of their services.
- ▶ We need to understand the unique ways in which older LGBTI people experience elder abuse, so that we can put preventative strategies in place. The example of the Kinfolk Project was shared – a response to older trans and gender diverse people describing the restrictions to the expression of their gender identity.

## Dr Luke Gahan (Research Fellow, National Ageing Research Institute)

Dr Gahan spoke about a workshop conducted by the Australian Institute of Family Studies and the National Ageing Research Institute that discussed 'how do LGBTI people define elder abuse?'(30) The participants framed their answers around human rights and included the following suggestions:

- ▶ Rights to access services
- ▶ Sexual rights
- ▶ Self-identity
- ▶ Freedom from discrimination
- ▶ Posthumous rights
- ▶ Sexual abuse
- ▶ Over-medication
- ▶ Door-to-door scammers
- ▶ Online dating fraud.

### LGBTI elders

Older LGBTI people were invited to speak about experiences of elder abuse of older LGBTI that they had experienced or that they were aware of. Given the emotional difficulties these topics raised, participants were invited to finish their presentation by identifying one thing that makes them strong.

## Toni

- ▶ Toni identifies as gender diverse and uses 'she/Toni' pronouns.
- ▶ Misgendering happens to trans and gender diverse (TGD) people often.
- ▶ Some examples:
  - Dentist calls out a transwoman's name in the waiting room and then when she stands up, the dentist looks at her and says, 'oh but I was looking for a woman'
  - Toni receives mail addressed to 'Mr'
  - Salesperson calls Toni 'Sir' and then when Toni says 'that should be Madam' the salesperson deliberately repeats calling her 'Sir'
  - Phone calls often result in misgendering.
- ▶ Dead-naming' means referring to a TGD person by their previous name.
- ▶ Misgendering and dead-naming can be institutional, personal or indirect but it matters. It might seem like a minor micro-aggression but when it happens repeatedly, it adds to existing stigma, internalised transphobia and extends complex trauma.
- ▶ Aged care service providers are delivering services to older TGD people after they already have decades of accumulated trauma.
- ▶ If you misgender someone, just apologise and continue.
- ▶ If it happens to me, I will correct people who I will have an ongoing relationship with. Most of the time, I just let it slide. What other people think of you is none of your business and there is very little you can do about it.
- ▶ Australian results from a recent worldwide survey found that only 2 out of 5 people will use correct pronouns for trans people.(31)
- ▶ What makes me strong is hope for the future.

**'If you misgender someone, just apologise and continue' – Toni Paynter**

## Malloy - by telephone

- ▶ I am 83 years old.
- ▶ I wrote a resource on cultural safety and older LGBTI people, which documents my six years of so-called 'conversion therapy'. It talks about sexuality based discrimination when I was young and a recent experience of by an aged care service provider [called The Rainbow Makers].(32)
- ▶ The recent experience of sexuality-based discrimination made me lose hope and I got sick. It re-opened old wounds and took me back to the old days when I experienced discrimination. Plus, I had the added burden of recently losing my partner and being isolated from the LGBTI community.
- ▶ What makes me strong is:
  - keeping on going
  - acknowledging my emotions and sitting with them
  - asking for help.
- ▶ I am grateful for the rainbow community and my faith.

The Rainbow Makers is available at

<https://lgbtihealth.org.au/resources/the-rainbow-makers/>

## David

- ▶ I am 89 years old.
- ▶ I was married for many years and have two adult daughters.
- ▶ I was a member of the Victorian Aids Council for six years and that liberated me from shame and years of guilt – about being gay.
- ▶ My daughters and their husbands are pretty conventional, and they just don't understand me being gay. They are loving but they don't really ask me about it. At Christmas, I don't quite fit in. The girls might change their minds later but I'm pretty old.
- ▶ What makes me strong is:
  - I'm out of the closet
  - Life is just fine
  - I love the world of men
  - My self-approval is independent of the approval of others.

David's story is presented in the documentary film **The Coming Back Out Ball(33)**



### **Jill Bolen (former Chief Superintendent, Queensland Police Service)**

- ▶ I grew up in a working-class family. My parents loved me and accepted me for who I was. They taught me to never look up to or down on anyone.
- ▶ It is really important for everyone to have an Enduring Power of Attorney, a Will and an Advanced Health Directive. Make sure you pick someone you trust and who will do what you actually want done. Don't just appoint your partner alone, have second person also.
- ▶ There was a lesbian who got cancer and she had given her adult children her Enduring Power of Attorney. The woman's partner got no say in any of the health decisions, even though the couple had previously discussed what the woman wanted. The children stole things from the couple's house.

- ▶ I know of another lesbian couple where the surviving partner got nothing from the superannuation or the Estate because they were in the closet about their relationship.
- ▶ My own partner died in 2011. When I rang her Dad to say she had died, his response was 'when are you coming to get her stuff' because he wanted to sell it.
- ▶ Please make sure you have the end-of-life documents. There is a really good resource about this for LGBTI people called Safeguarding the End of the Rainbow.(34)

### **Safeguarding the End of the Rainbow is available at**

<https://www.cotavic.org.au/publication/safeguarding-the-end-of-the-rainbow/>

**Pictured: Sue Malta**, Convenor AAG LGBTI Special Interest Group



## June Lowe (Chair, GLBTI Rights in Ageing Inc) – by telephone

- ▶ I met Velma in 2015. She was an 89-year-old lesbian who had just lost her same sex partner. I had made an ageist assumption that her partner had died. Actually, her partner had run off with someone else after 54 years together. Velma was looking for support and friendship and we celebrated her 90th birthday with her.
- ▶ Sadly, Velma had just been diagnosed with stomach cancer. She had previously been a nurse and knew she didn't want active treatment. She contacted her niece when she got to the point of needing someone to live with her. The niece moved in and started renovating Thelma's house right away.
- ▶ In December 2015, the niece moved Velma to a really cheap palliative care facility despite Velma having plenty of money.
- ▶ In April 2016, Velma passed away. We had organised a funeral celebrant who had spoken with Velma and documented her life stories. But Velma's niece, who was going to inherit everything, told the celebrant that she did not want any references to 'the lesbian society' made at Velma's funeral.
- ▶ At the funeral there were two distinct groups of people – her biological family and her lesbian family. The celebrant was very uncomfortable. The niece produced a booklet commemorating Velma's life, but it said nothing about lesbian identity or her 54-year relationship with a woman and in fact intimated that there was some mysterious 'Mr Right' hovering in the background

- ▶ The niece completely erased a major part of her aunt's life – her sexuality. Velma's friends were really shocked and hurt by that. This is a form of elder abuse that didn't just affect Velma's posthumous rights but spread out to the LGBTI community as well. Velma's friends were also silenced and disenfranchised.
- ▶ The memory of this experience gives me energy to continue to fight to make sure this doesn't happen to anybody else.

## June gave evidence about LGBTI elder abuse to the WA Select Committee Inquiry into Elder Abuse 2018(35)



## Sally

- ▶ Alison was a woman who had transitioned many years earlier.
- ▶ At Alison's funeral, she was dressed as a male, she was referred to as a male and her family and the celebrant only used her previous male name.
- ▶ It was very distressing to all the TGD people there and they were shunned by her family throughout the funeral.
- ▶ Another Trans woman was one of the founders of Seahorse Victoria [a support and social group for the Victorian transgender community].
- ▶ She was only out to one of her nieces but enjoyed being able to express her female identity in her nursing home.
- ▶ When she passed away, the funeral erased her female identity. This is gender erasure. But the nursing home put on a party celebrating her real female life.
- ▶ What makes me strong is being an LGBTI Elder and being able to speak on behalf of my community.

**“What makes me strong is being able to speak on behalf of my community” – Sally**



## Kathy

- ▶ I'm only 72 so I think I'm too young to be an Elder. However, in the context of community respect for seniors I recognise the term as respectful.
- ▶ I fathered four children with my current wife of 48 years.
- ▶ I transitioned at work in the public service in June 2012 at the age of 62.
- ▶ The research case discussed - Sam is a transwoman who transitioned after moving into a residential aged care facility. Her nephew, who was her guardian, said "He is doing this for attention." "Don't encourage him."
- ▶ Based on research, and my community experience many trans and gender diverse people have to restrict their gender expression to avoid upsetting their family. They have to carry this emotional burden to stay connected with their family.
- ▶ My experience with both the trans community and the research findings demonstrate that: The pressures of rejection and isolation can be intolerable and many self-harm and some even end their life.
- ▶ My children love me but I'm 'grandpa' to them. I have to be a bit of each gender for the love of my family. And that's worthwhile, but it's tough.
- ▶ What makes me strong is my growing self-belief, along with the fellowship of the LGBTI community, acceptance that my family still love me, as a member of my church and gallery society and friendships with a small group of folk from the general community.

**"What makes me strong is the fellowship of the LGBTI community" – Kathy**

## Jamie Gardiner (Vice-President Liberty Victoria)

- ▶ I am 71 years old.
- ▶ One of the barriers is that people don't always recognise the discrimination and abuse that affects them but refer just to mere "difficulties". Discrimination is simply being treated 'less well' than others because of being LGBTI.
- ▶ People older than 70 have spent their whole lives living with these "difficulties." I think that they've been discriminated against, unlawfully, but they don't see it as that.
- ▶ Many of us have never had the opportunity to be treated as ordinary, dignified human beings.
- ▶ In 1976, I once had drunk guys calling out 'poofter' and throwing stones through my windows, late one night. It was only much later that I realised this was a hate crime.
- ▶ In this room, we are changing things by recognising the truth.
- ▶ What makes me strong is that I believe in hope and human rights and that doing the right things is its own reward.

**"I believe in hope and human rights" – Jamie Gardiner**

## Stories of LGBTI Carers – told by Anne Muldowney (Senior Policy Adviser, Carers Victoria)

- ▶ Carer's Victoria collaborated with Val's Café at La Trobe University on an evidence-based resource called An Extra Degree of Difficulty.(36) It explores the experiences and needs of older LGBTI carers and the carers of older LGBTI people. These are a few of their stories:
- ▶ Sharon is a lesbian and a Carer for her son who has an intellectual disability. She said I don't advertise that I'm a lesbian when I'm at the Carer support group. So, it's like a hidden side because I only tell people who I think will be understanding.
- ▶ Martin gave up his job to care for his partner who had a stroke. His partner is Muslim. He said I don't have any family, they have evaporated. Everything is OK as long as I don't talk about it. I feel like a servant. When I had to be assertive with a doctor about being his Carer, I got labelled as a 'difficult.'
- ▶ Trevor's partner has dementia. He said We need to support both the patient and the Carer. Carers get ignored and we need to do outreach to offer them support.
- ▶ Anne also pointed out that sometimes LGBTI Carers experience homophobia from the person they are caring for.
- ▶ What makes me strong is the people I work with.

### An Extra Degree of Difficulty is available at

<https://www.carers-sa.asn.au/wp-content/uploads/2017/08/Extra-Degree-of-Difficulty-Narrative-Resource.pdf>

## Max

- ▶ I am 68 years old.
- ▶ I've been out since I was 15. My parents were fine with it as long as I was safe and happy,
- ▶ I had a partner for 30 years, but he died 18 years ago.
- ▶ Dave is 84 years old. He was bisexual and had previously been married. But he got arrested at a beat and lost his wife, kids and everything.
- ▶ Now Dave is completely isolated. He never talks about it because he is so ashamed. He is very sick but won't get medical care. He will only let me visit him three times a year. I talked to him about expungement of criminal convictions for gay men, but it didn't make any difference.
- ▶ What makes me strong is that I've had an incredibly fortunate life as a gay man since 15.

**Max hosts The Breakfast Show on Hepburn Community Radio at <http://www.hepburnradio.net.au>**

## Gordon

- ▶ I'm 82 and came out at 14.
- ▶ I was born in Port Hedland but moved to Melbourne because I wanted to be out.
- ▶ Some people are still ashamed of being gay because of the prior way we viewed homosexuality as a crime.
- ▶ We really need resources to look after people's mental health.
- ▶ We also need to look at advocacy.
- ▶ There are subtleties and complexities, especial around families.
- ▶ It is important to be connected to the LGBTI community.
- ▶ What makes me strong is that I've never been in the closet and I have a great sense of pride in the community.

**Gordon talks about his life on a JOY 94.9 podcast available at <https://joy.org.au/ourvoice/2012/07/gordon-wilson/>**

## Shivanees – edited excerpt from Shivanees' story that was read out by Meredith Butler (Out & About Outreach Officer, Switchboard)

- ▶ My age is 72. I was born in the UK and am one of 11 children. I left school at 16 to care for my family.
- ▶ I was living in rural Victoria in a religious family when I started to have a desire to be a girl and started cross-dressing in my sister's clothes.
- ▶ In those days I could not talk about my feelings. Nothing could be discussed on sensitive subjects such as sex.
- ▶ I have experienced sexual abuse and rape.
- ▶ It took me 60 years to learn to be myself. I remember the day my psychiatrist asked me 'do you want to be a girl?' It was in November 2016. And I answered the question 'yes.'
- ▶ One of the best things that's happened in the last few years is being involved in Switchboard's Out & About program and events such as the Coming Back Out Ball and the invitation to Government House.
- ▶ These things have personally lifted my distress and we have come a long way. But at the same time, we still have a long way to go.

**Out & About is an LGBTI-peer service that connects volunteer visitors with older people living at home or in aged care.**

# EVALUATION OF WORKSHOP

AAG has been funded by the Department of Health to evaluate some of its work. AAG engaged the National Ageing Research Institute to design an evaluation program and tools. As part of this process, AAG sent surveys to people who attended the workshop. In summary the evaluation of this workshop found:

- ▶ There were 26 attendees at the workshop.
- ▶ 62% of workshop participants responded to the evaluation.
- ▶ 50% agreed they had learnt something during this workshop that may influence or change an aspect of their future work in the field of ageing. Some of the free text responses included:
  - Incredibly powerful, engaging and transformative for my understanding
  - Good to hear voices from the community
  - It will help me frame my future research to ensure my language is appropriate and respectful.
- ▶ Respondents were generally positive about the content of this workshop.
- ▶ Some of the free-text responses to the question “was there anything we could have done better” were:
- ▶ Ran overtime so no opportunity for discussion / formulation of approaches
- ▶ It was fantastic to hear from everyone but there were too many speakers
  - Too long without a break.
- ▶ On average, respondents felt the workshop was well organised and the presenters were effective communicators.
- ▶ 11 of 16 respondents felt that a workshop was the appropriate format to explore this topic.



**Pictured: Jill Bolen,**  
Former Chief Superintendent,  
Queensland Police Service

# APPENDIX 1



**AAG**  
Australian  
Association of  
Gerontology

**ADVANCING NOT RETIRING:  
ACTIVE PLAYERS,  
A FAIR FUTURE**

## DISRESPECTING LGBTI IDENTITY - A UNIQUE FORM OF ELDER ABUSE

### WORKSHOP HOSTED BY

LGBTI & Elder Abuse AAG SIGs

### PRESENTERS INCLUDE

Dr Catherine Barrett  
Director OPAL Institute

Dr Luke Gahan  
Research Fellow, National Ageing Research Institute

Older LGBTI people may face specific 'difficulties' because of disrespect for their LGBTI identities. This can take many forms including: discrimination, exploitation, phobic comments, mis-gendering, and restricting sexual or gender expression.

After a lifetime of discrimination, the cumulative impact of this disrespect can be profound. However, these experiences are often not named as **'elder abuse'** by LGBTI elders, their families and friends, government agencies or service providers.

In 2018, the government announced the development of a **National Plan to Combat Elder Abuse and an LGBTI Ageing Action Plan**. To inform the implementation of these plans, we need to understand the nature of LGBTI elder abuse and begin to develop policy and practice responses.

This workshop will begin with brief overviews of current research:

- ~ Dr Catherine Barrett will present on **The Tango Project** – a Victorian initiative that has explored the difficulties LGBTI elders experience.
- ~ Dr Luke Gahan will present on the **Australian Elder Abuse National Research Stage One: Strengthening the Evidence Base** – findings from the LGBTI workshop.

This will be followed by a panel of LGBTI elders sharing stories about their peers that will help participants to understand the lived experience of LGBTI elder abuse. This 'third person' format acknowledges the emotional cost of asking LGBTI elders to relive the trauma of their own abuse.

Participants will then break into smaller groups for tabletop discussions about potential policy and practice responses that could inform the implementation of the National Plan to Combat Elder Abuse and the LGBTI Ageing Action Plan.

**51<sup>st</sup> AAG CONFERENCE**  
21 – 23 NOVEMBER 2018  
MELBOURNE, AUSTRALIA

THIS WORKSHOP IS FUNDED BY THE  
AUSTRALIAN GOVERNMENT THROUGH THE  
DEMENTIA AND AGED CARE SERVICES FUND



Australian Government  
Department of Health



Tuesday, 20 November 2018



3:30pm to 5:30pm



Melbourne Convention Exhibition Centre  
1 Convention Centre Pl, South Wharf



\$55.00



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**#AAGCONF18**

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# NOTES



To improve the experience  
of ageing through  
**CONNECTING**  
**RESEARCH, POLICY**  
and **PRACTICE**

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