



Leadership Council of Aging Organizations

Katie Smith Sloan

May 12, 2017

VIA E-MAIL: Heather.Menne@acl.hhs.gov

Ms. Heather Menne
U.S. Department of Health and Human Services
Administration for Community Living
Washington, DC 20201

RE: "DEPARTMENT OF HEALTH AND HUMAN SERVICES, Administration for Community Living, Agency Information Collection Activities; Proposed Collection; Public Comment Request; Proposed Extension With Modifications of a Currently Approved Collection; National Survey of Older Americans Act Participants"

Dear Ms. Menne:

The Leadership Council of Aging Organizations (LCAO) is writing to oppose the Administration for Community Living's (ACL) proposal to erase lesbian, gay, bisexual, and transgender (LGBT) older adults from the National Survey of Older American Act Participants (NSOAAP).

This survey provides critical data on whether federally-funded aging programs like Meals on Wheels, family caregiver support, adult day services, and senior centers reach all older adults, including LGBT older adults. The more we know, the more we can do to make sure LGBT older adults receive the services they need. While neither ACL's original notice nor ACL's corrected notice in the Federal Register provide any articulation of, information about, or explanation of ACL's attempt to erase LGBT older adults from the NSOAAP, what we do know is that ACL will no longer have data on how the aging network is meeting the needs of this population.

Since 1980, LCAO has been the country's preeminent coalition representing older Americans. Comprised of 72 national nonprofit organization members, LCAO focuses on the well-being of America's older population and is committed to representing their interests in the policy-making arena. LCAO serves as a source of information about issues affecting older persons and provides leadership and vision as America meets the challenges and opportunities presented by its aging society.

The proposal to remove LGBT from the NSOAAP is fundamentally at odds with LCAO's vision of recognizing the diversity of America's older population and working to ensure that no older person is a victim of discrimination. In recent years, ACL has made significant progress in addressing the needs of LGBT older adults. This change would represent a significant step backward from the progress we have made, and appears to be part of a recent, systematic effort by the Administration to eliminate data necessary for full inclusion of the LGBT community in federal programs. This includes: the elimination of a sexual orientation and gender identity question from HHS's Annual Performance Report for Centers for Independent Living; the cancellation of a HUD LGBT youth homelessness survey; and the failure to include a sexual orientation and gender identity question in the 2020 Census.

Data, research, and the experience of Services and Advocacy for GLBT Elders (SAGE), its affiliates, and its partners across the country confirm that LGBT older adults face a number of barriers to successful aging.

First, LGBT older adults face higher rates of social isolation and have thinner support networks than their non-LGBT peers. They are up to twice as likely to live alone, half as likely to have close relatives to call for help, and four times less likely to have children to assist them.¹ They are also much more likely to be disconnected from families of origin.²

Second, LGBT older adults face higher poverty rates than their non-LGBT peers. Nearly sixteen percent of single gay men over 65 live in poverty, compared to just 9.7 percent of single heterosexual men their age. Further, six percent of lesbian couples age 65 and older have incomes below the poverty line, compared to 3.5 percent for heterosexual married couples in the same age group.³

Third, LGBT older adults face pronounced health disparities compared to their non-LGBT peers. HIV impacts the LGBT community disproportionately,⁴ and it is affecting an increasing number of older adults.⁵ The National Institutes of Health (NIH) and National Institute on Aging (NIA)-funded *Aging and Health Report* outlines a number of other disparities, including: lesbian, gay and bisexual (LGB) older adults face higher rates of disability and mental health challenges; older bisexual and gay men face higher rates of physical health challenges; bisexual and lesbian older women have higher obesity rates and higher rates of cardiovascular disease; and transgender older adults face greater risk of suicidal ideation, disability, and depression compared to their peers.⁶

Lastly, despite their need to rely on providers for services because of their truncated informal support networks, LGBT older adults lack access to LGBT-culturally competent care and services. Indeed, a 2001 U.S. Administration on Aging study found that LGBT older adults are 20 percent less likely than other older adults to access government services such as housing assistance, meal programs, food stamps, and senior centers.⁷ Despite this disconnect, most State Units on Aging are not making any systematic effort to assess and address the needs of this population.⁸ The very age of the 16 year-old ACL study we cite further demonstrates the necessity for ACL to collect updated data on whether the aging network is meeting the needs of this population.

Data is a critical tool, which will identify LGBT older adults' gap between need and service provision. From state units on aging to area agencies on aging, the aging network has asked ACL for more and better

¹ LGBT Movement Advancement Project & Services and Advocacy for Gay, Lesbian, Bisexual and Transgender Elders (MAP & SAGE), *Improving the Lives of LGBT Older Adults*. 2010. Available at <http://www.lgbtmap.org/file/improving-the-lives-of-lgbt-older-adults.pdf>

² LGBT Movement Advancement Project & Services and Advocacy for Gay, Lesbian, Bisexual and Transgender Elders (MAP & SAGE), *Improving the Lives of LGBT Older Adults*. 2010. Available at <http://www.lgbtmap.org/file/improving-the-lives-of-lgbt-older-adults.pdf>

³ M.V. Lee Badgett, et al., Williams Inst., *New Patterns of Poverty in the Lesbian, Gay and Bisexual Community*. 2013. Available at <https://williamsinstitute.law.ucla.edu/research/census-lgbt-demographics-studies/lgbt-poverty-update-june-2013/>

⁴ Centers for Disease Control and Prevention: *HIV Among Gay and Bisexual Men*. 2016. Available at <https://www.cdc.gov/hiv/group/msm/>

⁵ Centers for Disease Control and Prevention: *HIV Among People Aged 50 and Over*. 2017. Available at <https://www.cdc.gov/hiv/group/age/olderamericans/>

⁶ Fredriksen-Goldsen KI, Kim HJ, Emlert CA, et al.: *The Aging and Health Report: Disparities and Resilience Among Lesbian, Gay, Bisexual, and Transgender Older Adults*. 2011. Seattle, WA: Institute for Multigenerational Health, University of Washington.

⁷ LGBT Movement Advancement Project & Services and Advocacy for Gay, Lesbian, Bisexual and Transgender Elders (MAP & SAGE), *Improving the Lives of LGBT Older Adults*. 2010. Available at <http://www.lgbtmap.org/file/improving-the-lives-of-lgbt-older-adults.pdf>

⁸ A SAGE report found that: State Plans filed by 29 States make no reference whatsoever to LGBT older adults; an additional 12 State Plans have isolated references to LGBT older adults, but do not address specific actions being taken to reach and target this population; and only nine States, and the District of Columbia, specifically address efforts to reach out and target LGBT older adults.

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data on LGBT older adults in the communities it serves.⁹ ACL must continue collecting data on whether the aging network is reaching LGBT older adults in order to ensure the maximum inclusion of LGBT older adults in programs funded under the Older Americans Act (OAA). We need more of this data on the experiences and needs of LGBT elders in our country – not less of it.

We therefore urge the Trump Administration and ACL to retain the LGBT question in the NSOAAP. It is not only the moral thing to do, it is the fiscally prudent thing to do. Asking demographic questions about sexual orientation and gender identity will increase the quality, utility, and clarity of the information collected. We further believe that by continuing to collect this data, and learning more about this population, ACL and the aging network will help more LGBT older adults to live independently, minimize the burden on the aging services network, and ultimately save taxpayer resources by reaching those who are most vulnerable.

Sincerely,



Katie Smith Sloan
Chair

cc: President Donald J. Trump
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Secretary Thomas E. Price
The U.S. Department of Health & Human Services
Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, DC 20201

Ms. Ivanka Trump
Assistant to the President
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Mr. Jared Kushner
Senior Advisor to the President
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20500

⁹ Choi SK, Meyer IH: *LGBT Aging: A Review of Research Findings, Needs, and Policy Implications*. 2016. Los Angeles, CA: The Williams Institute, UCLA School of Law. Available at <http://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-Aging-A-Review.pdf>