A Joint Project between COTA SA and the South Australian Rainbow Advocacy Alliance
Acknowledgments

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Desmond Ford
LGBTIQ Ageing Well Project Manager, COTA SA (April 2017 to October 2017)
Head – Programs and Business Development, COTA SA (October 2017 to current)

LGBTIQ People Ageing Well Project Advisory Group Members:

• Cris Davis
• Bill Gaston
• Carol Hannaford
• Dee Morrissy
• Cath Petracco
• Pam Price
• Jenny Scott

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COTA SA staff and volunteers
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L2Q on the EP
Pride of the South
Uranian Society
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... I’ve fought these battles all of my life – I’m over it. I need someone I can trust to advocate for me.... I don’t have a partner or family I trust to act in my best interests...
In recent years, there have been strides towards equality for all Lesbian, Gay, Bisexual, Transgender, Intersex and Queer/Questioning (LGBTIQ) people.

For many older folk, who lived through a time when they experienced stigma, exclusion, discrimination, criminalisation, family rejection, social isolation or inappropriate non-consensual medical treatment, this has been long-overdue.

But although there have been several changes in terms of legislation, service provision, policy work and communications in recent years, many significant gaps and absences remain. Many older LGBTIQ people continue to fear or expect prejudice from people around them, including health professionals. As a result, they hide their identities and are less likely to access services when they need them.

The specific voice of older LGBTIQ people remains largely absent from government and private sector policy and decision-making, and their specific needs are still not considered in many government and sector programs and policies.

In the quest for equality for LGBTIQ people, the often heard response is “….I treat everyone the same….“. This response doesn’t recognise the lived experiences of older LGBTIQ people and how those experiences have come to impact on their lives.

Many older people started negotiating their sexuality or gender identity in a period when homosexuality was a crime and a mental illness. People often lived their lives in both shame and secrecy, carefully living their lives and negotiating relationships out of the gaze of the public eye.

The LGBTIQ People Ageing Well Project commenced in April 2017 as a 12-month joint project between COTA SA and the South Australian Rainbow Advocacy Alliance (SARAA), funded by the then Department for Communities and Social Inclusion (DCSI).

The main aim of the project was to engage with older people from South Australia’s LGBTIQ communities to find out what matters most to them as they age to better inform policy and create a groundswell for change to the policies that impact on the lives of older LGBTIQ people.

The project also celebrated the lives and contributions of older LGBTIQ people. Their stories and lived experiences have the power to promote a greater understanding of a unique set of issues, but also the power to create changes that will support and enhance the lives of South Australia’s older LGBTIQ population.

Through the project COTA SA and SARAA wanted to make sure there were opportunities for people to celebrate their achievements and to come together in a forum where their many and varied contributions could be appropriately acknowledged.

This report makes a number of recommendations that can and will make a significant difference to the lives of older LGBTIQ South Australians, and must be addressed by all levels of government and the ageing and aged care sector.

We are pleased to be able to endorse this report as a critical starting point for further action.

Desmond Ford
Head - Programs and Business Development
COTA SA

Holley Skene
Chairperson
SA Rainbow Advocacy Alliance
Summary of Findings

Overarching Issues

- Federal, state and local governments should appoint a reference group or advisory panel to provide advice on policies and legislation affecting older LGBTIQ people. This panel could be facilitated with the assistance of COTA SA and SARAA at a State level.

- All agencies receiving federal, state and local government funding or support should be required to demonstrate that they are actively ensuring inclusivity of the LGBTIQ community including specific accountability measures that incentivise departments and put in place consequences for non-compliance.

- Collaboration should be promoted between various agencies such as COTA SA, SARAA, Catalyst and Uniting Communities Bfriend project to distribute information about LGBTIQ services and maximise advocacy efforts.

- Communication about activities and events across the LGBTIQ community including non online formats needs to be improved.

- Specific strategies need to be planned to identify and engage with those more marginalised groups from within the LGBTIQ communities, recognising the diversity within our community and to consider their specific needs. These specific groups would include but not be limited to, people who identify as Aboriginal or Torres Strait Islander, people with disabilities or from CALD backgrounds.

- COTA SA and SARAA continue to support an Advisory Group for older LGBTIQ people.
Social Isolation

- Establish a virtual and physical community hub for older LGBTIQ South Australians.
- Explore strategies for improving transport options for older LGBTIQ people with mobility issues.
- Establish a Community Visitors Scheme for the older LGBTIQ community.
- Invest in comprehensive digital literacy training including in regional and rural centres using a peer approach.
- Create opportunities for intergenerational contact and story-telling, including through the establishment of an oral history project to capture rainbow stories of older South Australians.

Health and Wellbeing

- Require mandatory training for health professionals and domestic violence workers around the physical and mental health needs of individuals and groups within the LGBTIQ community.
- Increase government investment to improve availability and accessibility of mental health services and counselling for the older LGBTIQ community.
- Establish a system of peer advocates for older LGBTIQ people to support their interactions within the health and the aged care system.
- Develop and promote activities and programs to enhance older LGBTIQ people’s physical and mental health.

Housing

- Develop a comprehensive housing strategy for older South Australians that makes specific reference to LGBTIQ people.
- Research models of co-housing and associated funding.
- Establish a means of providing support with ongoing maintenance for older LGBTIQ people living in their own homes.
- Support/establish housing co-ops/associations which take account of the needs of older LGBTIQ people.

Aged Care

- Require aged care peak bodies to make specific reference to LGBTIQ people in their charter, and expressly list non-discrimination as a necessity for staff and the community.
- Continue and extend LGBTIQ-specific information sessions on the aged care system (including Centrelink, MyGov, packages, assessments, ACAT) to metropolitan and regional locations.
- Promote organisations in the aged care sector that have Rainbow Tick accreditation to LGBTIQ community members, thereby encouraging all agencies to gain it.
- Establish a system of peer advocates for older LGBTIQ people to support their interactions within the health and the aged care system.
- Develop specialist LGBTIQ aged care options, including residential care options.
Social isolation is the biggest issue for us... I see it all the time and it scares me as I age... it can happen so quickly...
Background

In November 2016, COTA SA approached the South Australian Rainbow Advocacy Alliance (SARAA) with a view to developing a joint project - LGBTIQ People Ageing Well - which would inform the South Australian Government and both organisations about the needs of older LGBTIQ people and provide an impetus for targeted support for that population.

A joint proposal for a 12-month project was put to the Department for Communities and Social Inclusion (DCSI) and funding of $36,525 was provided for a 0.4 FTE Project Manager and on costs and expenses.

Governance

COTA SA and SARAA appointed Desmond Ford as the 0.4 Project Manager from April 2017, with COTA SA providing in-kind administrative support and office space for the Project Manager.

A project Advisory Group was established and met for the first time on 6 July 2017. The group included a representative of SARAA, volunteers with COTA SA as well as other LGBTIQ community members. The Advisory Group started meeting monthly from July 2017.

During these meetings, terms of reference for the group were agreed, the details of consultations discussed, the action planning day structure was planned as well as a High Tea. The general ethos of the Advisory Group was collaborative and congenial; the group worked easily together, sharing ideas and opinions and maintaining a responsible overview of the recommendations of the Project Manager.

The Advisory Group took on significant roles in the planning and execution of the Action Planning Day, the High Tea, the development of the areas for action and for this report.

The Advisory Group is continuing to meet monthly to plan its activities following the release of this report and will continue to inform COTA SA policy moving forward.
The main objectives of the LGBTIQ People Ageing Well Project can be sorted into two key categories:

**Engagement**

To engage older LGBTIQ people in conversations about their experiences of ageing, with a view to using their input and unique experiences to develop the report’s Findings and Areas for Action.

**Celebration**

To celebrate and acknowledge the lives and achievements of older LGBTIQ people.
Setting up the conversations and consultations with older LGBTIQ people was impacted by two features of this population:

- No primary source of communication or networking such as a newspaper or website exists, so communicating with a broad range of older LGBTIQ people is difficult.
- Past and continuing experiences of discrimination makes some members of the community reluctant to speak publicly and/or they have little sense of commonality with other LGBTIQ people.

To address these challenges, some of the consultations took place in private homes where a volunteer host brought together members of existing location, friendship or social groups or networks for an exchange of views. The Project Manager facilitated the conversation but did not host these events.

Events hosted by the Project Manager were held in public spaces and were advertised broadly to the community as much as possible. Some common key questions (see below) were asked but the Project Manager also created opportunities for participants to speak spontaneously and to take the conversation in directions that individuals and/or the group saw as appropriate.

The common questions asked were:

- What matters most to you as an LGBTIQ person as you age, for yourself and your community?
- What are some of the key challenges for you or your community as you age?
- What is working well for you or your community as you age?

During the first eight months of the project, the Project Manager organised and facilitated 13 consultations, 10 of which were in metropolitan locations and 3 in regional South Australia, which were attended by 160 older LGBTIQ South Australians (see Table 1, page 9). The Project Manager also liaised with a range of existing LGBTIQ agencies during this phase.

An action planning day was held in February 2018 as part of the project where the main themes were discussed and explored in greater detail. Participants in the initial conversations received a personal invitation and the event was advertised broadly across the LGBTIQ community attracting a wide range of participation.

The day’s program was designed to provide participants with an overview of the project, opportunities to contribute ideas and develop recommendations about ongoing actions.
Two major elements formed the celebration phase of this project:

The Intergenerational Event

Within the LGBTIQ community there are some significant differences between those who are aged over 50 and those who are younger.

There have been a number of significant changes impacting on the lives of LGBTIQ people since the 1970s, when Adelaide hosted the first Pride march in the country. Those activists continued to push for social reform through the 80s and 90s when there was much greater visibility of LGBTIQ people. This activism meant that for many younger people their path was made less challenging, although the activism continued and continues now as younger people take up the challenge.

The purpose of this event was to trial this intergenerational information-sharing of information and experiences. Feedback from both age groups was positive and further sessions mooted, including as a specific intergenerational story telling event either as part of ZestFest or Feast 2018.

High Tea

Social isolation is identified as a significant concern within the LGBTIQ community, so a High Tea was organised with 80 members of the older LGBTIQ community. Those who came alone were incorporated into the social context easily; some reported catching-up with people they’d not seen for 20 or 30 years; the volume of talk at 8 round tables was high from the minute people arrived. Advisory Group members distributed themselves across the tables so that they could facilitate interaction if anyone was looking a bit lost or isolated. Feedback from participants was extremely positive.

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Table 1
The project findings can be separated into five main categories:

- **Overarching Issues**
- **Social Isolation**
- **Health and Wellbeing**
- **Housing**
- **Aged Care**
Older LGBTIQ people need a place at the table

There were once two formal LGBTIQ advisory groups located within State Government (one in SA Health and one in DCSI), but there is no longer any group with direct links to government in a formal advisory or reference capacity.

The LGBTIQ voice is often absent from policy and decision making; specific LGBTIQ needs have not been considered in many government and sector programs, and this results in significant gaps in services.

A common theme raised throughout the project was that people were frustrated and disappointed at what felt like a decreasing interest and, in some cases, a watering down of their capacity to provide formal advice to governments and political parties on policies and legislation that affects older LGBTIQ people.

Issues for ATSI and CALD LGBTIQ people

Project participants acknowledged that the public face of the LGBTIQ community tends not to include Aboriginal or Torres Strait Islanders and/or culturally and linguistically diverse (CALD) members. These groups are at additional risk given they are already statistically more likely to be socially isolated.

Issues for older regional and rural LGBTIQ people

People in regional centres raised concerns about their privacy, confidentiality and lack of choice of health providers; they knew that such challenges would not be as pronounced in metropolitan areas. They were aware that many people did not disclose their sexuality or previous gender identity for fear of being outed in their community.

Lack of central communication mechanisms

The Gay and Lesbian Community Service (previously called Gay and Lesbian Counselling Service) closed some years ago. This was named as a key service for LGBTIQ people and an important resource for information and support. It was also noted that whilst the national phone line QLife (run by the National LGBTI Health Alliance) has started providing a national service, the service is not partnered with a local service provider in South Australia at this stage.

There is no longer a South Australian-specific newspaper operating locally since BLAZE ceased publication; the paper was an important source of information about local groups and services and has not been replaced with a website or other central form of communication. Information is now very difficult for people to find, particularly those who do not have the capacity to access the internet.
Areas for Action

• Federal, state and local governments should appoint a reference group or advisory panel to provide advice on policies and legislation affecting older LGBTIQ people. This panel could be facilitated with the assistance of COTA SA and or SARAA at a State level.

• All agencies receiving federal, state and local government funding or support should be required to demonstrate that they are actively ensuring inclusivity of the older LGBTIQ community including specific accountability measures in place that incentivise departments to do this and put in place measures for non-compliance.

• Collaboration should be promoted between various agencies such as COTA SA, SARAA, Catalyst and Uniting Communities Bfriend project to distribute information about LGBTIQ services and coordinate advocacy efforts.

• Communication about activities and events across the older LGBTIQ community including non online formats needs to be improved.

• Specific strategies need to be planned to identify and engage with those more marginalised groups from within older LGBTIQ communities, recognising the diversity within our community and to consider their specific needs. These specific groups would include but not be limited to, people who identify as Aboriginal or Torres Strait Islander, people with disabilities or from CALD backgrounds.
The issue of social isolation is very significant within the LGBTIQ community. Whilst there is, of course, considerable diversity across the community, the shared experiences of criminalisation, violence, exclusion, bullying and discrimination have led many individuals and small groups to choose, for safety, to function entirely within the LGBTIQ community.

Many have also experienced rejection by family and local community members. Those older LGBTIQ people who choose to access local social opportunities for older people can feel nervous about doing so based on previous experiences of discrimination and exclusion.

Older LGBTIQ people, particularly older gay men, are more likely to be single and less likely to have children (or they may have no contact with them). Many will need support as they age to assist in ensuring they remain connected to their local community and/or specific activities of interest.

Ageing intensifies the needs of people who are socially isolated and gradually changes the situation of those who have established satisfactory social contexts. The loss of partners and friends from existing networks; the changes wrought by illness and reduced mobility; reducing incomes leading to changes in living circumstances; all contribute to isolation, as does ageism within the community itself.

As in the broader community there is a division between community members who are computer and technology literate and those who are not. Those without technical know-how and equipment have less access to the broader community and to information specific to the LGBTIQ community, compounding any isolation they are experiencing.

Areas for Action

• Establish a virtual and physical community hub for older LGBTIQ South Australians.

• Explore strategies for improving transport options for older LGBTIQ people with mobility issues.

• Establish a Community Visitors Scheme for the older LGBTIQ community.

• Invest in comprehensive digital literacy training in regional and rural and regional areas.

• Create opportunities for intergenerational contact and story-telling, including through the establishment of an oral history project to capture rainbow stories of older South Australians.
Older LGBTIQ people need to feel safe and respected by their health care providers. There is a lack of LGBTIQ-specific health information resources in mainstream health education and training and in health practices more generally.

Whilst suicide amongst the cohort of younger LGBTIQ people is widely acknowledged, suicide amongst older LGBTIQ people attracts little attention. Suicide ideation is linked with social isolation, particularly for those people who ‘live on the edges’ of the LGBTIQ community and who live with ongoing internalised homophobia. There is a clear need for greater investment in mental health services that target and support older LGBTIQ South Australians.

**Areas for Action**

- Require mandatory training for health professionals and domestic violence workers around the physical and mental health needs of individuals and groups within the older LGBTIQ community.

- Increase government investment to improve availability and accessibility of mental health services and counselling for the older LGBTIQ community.

- Establish a system of peer advocates for older LGBTIQ people to support their interactions within the health and the aged care system.

- Develop and promote activities and programs to enhance older LGBTIQ physical and mental health.
A safe and affordable place to live is fundamental to people’s ability to lead full and meaningful lives as they aged.

Continued discriminatory government policies and social attitudes and practices have positioned some older LGBTIQ people in a particularly vulnerable economic position with a flow-on effect regarding access to housing.

Those renting are at risk of becoming homeless if not able to keep up with the market; those who own a property must meet the ongoing costs of their home (rates, taxes, maintenance, utilities); public housing availability has reduced and housing coops are being phased out for larger, more impersonal housing associations. Within such a context, members of the older LGBTIQ community are particularly exposed.

There are models of co-housing which have the potential to meet the housing and social needs of the older LGBTIQ community which require further research.

**Areas for Action**

- Develop a comprehensive housing strategy for older South Australians that makes specific reference to older LGBTIQ people.
- Research models of co-housing and associated funding.
- Establish a means of providing support with ongoing maintenance for older LGBTIQ people living in their own homes.
- Support/establish housing co-ops/associations which take account of the needs of older LGBTIQ people.
The LGBTIQ community is entitled to expect that, as they age, their specific needs will be respected and accommodated. This means ensuring that aged care service providers know how to do so, are committed to doing so and are held accountable for doing so.

Whilst there has been significant progress in the aged care sector over recent times through the LGBTI Ageing and Aged Care Strategy and the Silver Rainbow training (managed by the National LGBTI Health Alliance), aged care services vary greatly in their capacity to create a culture of welcome and safety for older LGBTIQ people. This is the case for people wanting support to stay in their own home or for those making the decision to go into residential care.

The Silver Rainbow training has been a start by training workers. However it is not mandatory so there are still many agencies who have not introduced it into their service. It was also noted that many NGOs in the aged care space are run by faith based organisations, many of which have not welcomed LGBTIQ people.

Whilst the Silver Rainbow training remains optional for aged care services they cannot be assumed to be safe for older LGBTIQ people.

Some aged care services are also starting to think about retirement villages for older LGBTIQ people, but there are very few and most of them are based in the metropolitan region.

Project participants also indicated that older LGBTIQ people may need additional support to help them navigate the aged care system, particularly since so many lack a partner or supportive family members.

**Areas for Action**

- Require aged care peak bodies to make specific reference to older LGBTIQ people in their charter, and expressly list non-discrimination as a necessity for staff and the community.

- Continue and extend LGBTIQ-specific information sessions on the aged care system (including Centrelink, MyGov, packages, assessments, ACAT) to metropolitan and regional locations.

- Promote organisations in the aged care sector that have Rainbow Tick accreditation to older LGBTIQ community members, thereby encouraging all agencies to gain it.

- Establish a system of peer advocates for older LGBTIQ people to support their interactions within the health and the aged care system.

- Develop specialist LGBTIQ aged care options, including residential care options.
The older LGBTIQ people who need the most support are practically invisible – they won’t come to things like this and maybe not go to social gatherings either… they may be poor, vulnerable and isolated – we would help them but there’s not a mechanism for that to happen at the moment.
Conclusion

COTA SA and the SA Rainbow Advocacy Alliance (SARAA) have provided an opportunity for older LGBTIQ South Australians to be heard in relation to what is important to them as they age. This is the first time the question has been put specifically to this generation. The people we talked to were clear, consistent and thoughtful in their responses, acknowledging the good work being done, making suggestions for change and being mindful of those more marginalised older LGBTIQ people who perhaps couldn't be involved in the consultations.

This report contains a number of clear and considered recommendations to both government and the private and not-for-profit sector that would improve the lives of the ageing LGBTIQ community. Unless concrete steps are taken to act on these recommendations, there is a very real risk that older LGBTIQ people will continue to fall through the gaps identified in this report.

There is a strong appetite and desire within the older LGBTIQ community for a peer led model of advocacy and support. Through the project there were many examples of older LGBTIQ people informally taking up the role of support person and/or advocate for other LGBTIQ people in need of assistance. There is a great opportunity to harness this existing capacity and strength, albeit that there needs to be some coordination and central point of reference like a Community Hub overseen by a body with a role to manage and coordinate.

COTA SA and SARAA are committed to taking these actions forward, engaging with key stakeholders and staying connected to older LGBTIQ people across South Australia, keeping them informed of progress against actions.