

2020 Doctoral Dissertation (Abstract)

Subjective Life Challenges of Older Sexual Minorities and Responses
by Staffs in Elderly Nursing Homes
: Focusing on homosexuals and bisexuals

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I. Background

The term “sexual minority” refers to people whose sexual identity, orientation, and/or practices are different from the majority of the population. In 2019, the Organization for Economic Co-operation and Development (OECD) announced that the average ratio of LGB (lesbian, gay and bisexual) people in the adult population is 2.7%. However, understanding their actual number is extremely difficult.

Most studies on older sexual minorities were conducted in the US, and the results show that long-lasting discrimination and prejudice have a negative impact on the lives of older sexual minorities (health risks, loneliness, poverty, etc.). Factors to reduce such negative impact (acceptance of identity, support, etc.) are currently being studied. Older sexual minorities fear discrimination and prejudice when using medical and care services, and practical solutions for discrimination and prejudice (development of LGBTQ Cultural Competency, etc.) are much needed.

II. Objectives

For older sexual minorities to have a high quality of life, knowing their challenges and these backgrounds and providing the appropriate response and support are essential. Thus, we conducted two studies to shed light on these issues.

The first study clarified the structure of subjective challenges and anxieties in the lives of older sexual minorities as well as their background, including their life-course experiences, which were the object of a qualitative survey. The second study addressed the needs and challenges of older sexual minorities, examining the attitude of staffs in the elderly nursing homes toward sexual minorities and the related factors from multilateral viewpoints.

Challenges for sexual minorities can be related to their sexual orientations and/or their sexual and gender identities. In this study, we focus on gay, lesbian, and bisexual people, because staffs in elderly nursing homes have difficulty in recognizing their existence if they don't self-disclose.

III. First study

1. Methods and survey subjects

To understand challenges of older sexual minorities and these backgrounds, we gathered data on their present/future challenges and life course using semi-structured interviews. The survey respondents were 22 gay, lesbian, and bisexual individuals with an average age of 67.1 years. The survey was conducted from May 2017 to February 2019. The analysis was conducted using qualitative data analysis (Sato 2008).

2. Results

[] indicates categories and << >> indicates subcategories. Four categories were extracted: [impact of negative viewpoints], [no reliance/situations that makes it difficult to rely on others], [need for a place to spend time without concerns], and [strategies of self-help and mutual help]. The category [impact of negative viewpoints] consisted of four subcategories: <<knowing about negative viewpoints>>, <<hiding one's sexual orientation>>, <<pain of hiding oneself>>, and <<sexual orientation is not a problem>>. The category [no reliance/situations that makes it difficult to rely on others] consisted of three subcategories: <<living without relying on others>>, <<limited support>>, and <<impractical response>>. The category [need for a place to spend time without concerns] consisted of two subcategories: <<environment where one does not have to hide>> and <<safe formal services>>. The category [strategies of self-help and mutual help] consisted of three subcategories: <<life that affirms one's identity>>, <<preparing for old age and death>>, and <<connection with others>>.

3. Discussions

Respondents strongly felt the [impact of negative viewpoints]. They reported having negative feelings about themselves because of the impact of the viewpoints of heterosexual people. However, there were some people who did not deny their own identities and felt that their <<sexual orientation is not a problem>>. Common factors among these respondents were environments that did not exclude minorities and having someone they could trust. The respondents in this study did not mention economic difficulties. The reason for this may be the fact that they hide their sexuality, which prevents direct discrimination, or the expectation of living alone encouraging early savings.

As preparation for the future, respondents mentioned [strategies of self-help and mutual help]. They

also felt that when care becomes necessary, care home service cannot be avoided, and wished for <<safe formal services>>. Many of the concepts identified in this study are consistent with findings in western countries. However, the emphasis on self-regulating awareness and behavior is different from previous studies.

IV. Second study

1. Methods

1) Survey respondents and period

Subjects were staff of 26 special long-term care homes in 23 wards of Tokyo Prefecture. 994 questionnaires were distributed and 607 ones were returned (response rate of 61%). The survey was conducted between November 2019 and February 2020.

2) Measurements

The dependent variable was the response of the staff to older sexual minorities. The respondents were asked to read vignettes and choose their responses. Factor analysis identified two factors, “active response” and “avoidance of negative response,” and each question was synthesized as a simple score based on the factor analyses. The independent variables consisted of following twelve aspects: i) years of experience, ii) human rights training, iii) age, iv) self-identified gender, v) aversion to gay and lesbian people, vi) attitude toward gay and lesbian people, vii) occupation, viii) work style, ix) sexual orientation, x) LGB acquaintances, xi) size of institution, and xii) awareness of the wishes of older sexual minorities.

3) Statistical methods

We performed a paired t test on “responses that respect the wishes of sexual minority residents” and multiple regression analysis on “factors associated with the response.”

2. Results

Responses by the respondents were significantly consistent with “awareness of the wishes of older sexual minorities” The respondents tended to avoid negative responses. As for factors associated with the response, “full-time employment” and “awareness of the wishes of older sexual minorities” was significantly related to promotion of “active response,” while “an accepting attitude toward gay and lesbian people” and “awareness of the wishes of older sexual minorities” was significantly related to promotion of “avoidance of negative response.”

3. Discussions

The respondents selected responses consistent with “awareness of the wishes of older sexual minorities” and tended to avoid negative responses. The reason for this is that staffs in the elderly nursing homes are educated on the self-determination of users and the respect for diversity as a desirable attitude for professionals in their field, as well as the increasing social acceptance of sexual minorities.

As for factors that influence the staffs’ response, full-time employment was significantly related to promotion of an active response. The reason for this is that part-time staffs are in a difficult position to make their own decisions on possible responses other than what they are instructed. Also, this study showed that an accepting attitude toward gay and lesbian people was related to significant avoidance of negative responses, supporting a previous study that argued that people who acknowledge and accept homosexuality do not have negative attitudes toward sexual minorities (Wada 2009).

4. Limitations and future challenges

There were four limitations: 1) Staffs in the facilities that agreed to participate in the survey may already have stronger interest in the support of sexual minorities than ones in the facilities that did not; 2) the reliability and validity of the dependent variable “avoidance of negative response” are not sufficient; 3) there may be factors associated with the independent variables that this study did not examine; and 4) the respondents may have provided responses that they consider ideal for their occupation.

V. Overall discussions

1. Facilities that respect older sexual minorities' choices

The first step is to make existing facilities and services places where users can live in peace, and to communicate that to the users. It must be made clear that the right to choose, e.g., whether to come out or not, belongs to the user. In this study, staffs were not negative toward older sexual minorities, but efforts should be made for such attitude to be clear to the users.

2. Staff who can respond to diverse users

To prevent inappropriate responses to residents, staffs' awareness of equality and human rights should not be left to chance, but should be promoted and internalized through specific situations and examples. Since the desired service is not always the same, the needs of residents and the responses from staffs should be regularly examined. To that end, a system must be put in place to continuously provide comprehensive cultural competency training on sexuality as well as other issues.

3. Community challenges

Challenges associated with living in a community prior to moving into facilities include building relationships in a community. In this study, the respondents' responses were not negative. However, interacting with people of the same generation in a community poses a high risk of discrimination/prejudice and isolation. To solve these issues, extensive policies are needed to eliminate discrimination and prejudice against sexual minorities and offer sensitive support in each person's day to day life.

4. Future challenges

We have identified four future challenges: 1) Expanding study subjects to sexual minorities in all categories; 2) hearing from older sexual minorities who are not connected to support organizations; 3) understanding different generations, and 4) developing a "Cultural Competency Training."