

# Creating Inclusive Residential Care for LGBTQ+ Elders

The CIRCLE study

Presentation for ARC Seminar: Health inequalities in later life – 10/7/24

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## What inequalities do LGBTQ+ older people face in care?

- Older LGBTQ+ people experience verbal and physical abuse in care environments.
- Minority stress raises the risk of older LGBTQ+ people needing social care.
- Older LGBTQ+ people experience higher levels of loneliness and social isolation.
- Older LGBTQ+ people go back into the closet to be safe in care environments.
- Care services are predominantly heteronormative and cis-normative.
- Care services do not see the relevance of LGBTQ+ status for care needs.
- Care services disregard LGBTQ+ relationships.
- There is a lack of consistent training on how and why to provide LGBTQ+ inclusive care.

## What is LGBTQ+ inclusive care?

- Access to care and resources that is equal and equitable to cis-gender and heterosexual people.
- An environment in which people's differences in sexual orientation and gender identity are valued and celebrated.
- Acknowledging that sexual orientation and gender identity are relevant to care needs.
- Facilitating full participation in the care environment.
- Discrimination and intolerance are addressed and eradicated.



## What is CIRCLE?

- CIRCLE is a 2-year research study funded by ARC KSS.
- Research Question: How can residential care providers be best supported to provide LGBTQ+ inclusive care?
- We are exploring and evaluating three different ways of supporting residential care providers to improve their LGBTQ+ inclusive care offer:
  - A comprehensive inclusion programme in 4 care homes in Sussex
  - An online Community of Practice, meeting quarterly
  - A co-designed resource for care homes

## Comprehensive Inclusion Programme

Data collection is ongoing, and so far, we have found:

- Staff attitudes are positive, but indication of further training needs.
- Marketing materials lack explicit imagery of LGBTQ+ community and affirmative care.
- Policies require more detailed inclusion policies.
- Before the inclusion programme, staff indicated that their home had enough staff and resources to implement the programme.

## Community of Practice: Impact

"It is furthering my knowledge on a subject mostly unknown about within my organisation."

"These conversations are vital for people supporting older people who are part of the LGBTQ+ community in care homes."

"Attending these events has strengthened our support of services we work with, and we have shared our learning to the independent sector."

"Networking with new people and learning about new initiatives, hearing life stories – feeling validated."

## Co-designed resource

• We have designed:

a z-card for use in care homes

a complementary video

a logo indicating commitment to LGBTQ+ inclusion

• Launch: 11 September 2024





## Co-designed resource sneak peek

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#### Health

Build awareness around additional health risks LGBTQ+ residents may have, including social isolation, addiction, HIV, and dementia but do not make assumptions.

Build awareness around HIV care and medication.

Ensure clear communication between different health professionals involved.

For LGBTQ+ residents with dementia, understand that people may forget/switch identity. Approach it day by day.

With routine health screenings, do not assume gender. Trans men may still need cervical screenings, and trans women may still need prostate screenings.



#### End of life care

Give people privacy with their chosen family and respect their space in the last moments of

Understand that LGBTQ+ older people have experienced a lot of abuse in their life and that their relationships have not been honoured. Make sure to honour them at the end of life.

Ask people about their preferences for the end of life and who they want to be involved.

Consider Power of Attorney and understand that in the LGBTQ+ community this might be a chosen family member.



### Training & policies

Have clear and explicit policies around how LGBTQ+ inclusion is ensured and how LGBTQ+ discrimination and abuse are dealt with.

Ensure all staff are trained on LGBTQ+ inclusion. Ask your manager for training.

Subscribe to websites like PinkNews or Gscene to stay updated about LGBTQ+ news.

## Trans & non-binary inclusion

Educate yourself on what it means to be trans/non-binary.

Recognise that older people can be trans, even if they have lived their whole life in one gender.

Understand that identifying as trans does not necessarily mean that people have had or need to have surgery. Transidentities are valid regardless of how someone's body looks.

For LGBTQ+ residents with dementia, understand that people may forget/switch identity. Approach it day by day.

## Early practice recommendations

- Build relationships with local LGBTQ+ organisations.
- Recognise that intersectional minority identities may have unique experiences of inequality and discrimination.
- Provide consistent, lived-experience led training to staff on LGBTQ+ inclusion and its relevance to care.
- Open the conversation.
- Be aware of your assumptions about residents and colleagues, and do not act on them.
- Be explicit and specific about your and your organisation's commitment to LGBTQ+ inclusion.
- Attend the quarterly CIRCLE Community of Practice meetings.
- Keep an eye out for the CIRCLE resource that will be launched in September 2024.
- Collect data on sexuality and gender identity so that inclusion can be monitored.



## The Team



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Website

# Ihank you!