



Aging and
Retirement



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LGBTQ+ Aging and Retirement Issues

A Critical Review of Current Studies and Knowledge
Gaps

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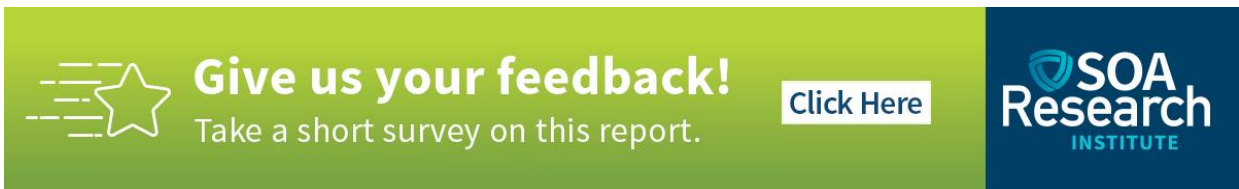
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LGBTQ+ Aging and Retirement Issues

A Critical Review of Current Studies and Knowledge Gaps

Executive Summary

This paper presents a detailed review of select studies on the experiences and challenges faced by LGBTQ+ older adults, particularly in the context of aging and retirement. Through a systematic analysis of fourteen studies, this review aims to provide a nuanced understanding of the issues encountered by this population, highlighting key themes including discrimination, healthcare access, social support, resilience, end-of-life preparation, and mental health.

There exists a broad body of scholarly work that has shed light on the distinct challenges and experiences of aging LGBTQ+ adults in the United States. This research underscores a number of issues, particularly financial and health disparities, social isolation, and housing challenges. The literature selected for this paper aligns to these themes from the broader body of research. However, it should be noted that many LGBTQ+ adults have experiences that vary from these general themes, and it is important to acknowledge the nuances inherent in the research.

METHODOLOGY

The research employed a structured search strategy across multiple databases, including Google Scholar, LGBT Life, PubMed, and PsycINFO. Keywords reflecting LGBTQ+ identities and aging-related terms were used to capture relevant studies. The selection process involved rigorous inclusion and exclusion criteria, focusing on peer-reviewed studies published in English and originating from the United States. Both qualitative and quantitative methodologies were included to ensure a comprehensive analysis.

KEY THEMES

1. **Discrimination and Marginalization:** Many LGBTQ+ older adults have faced discrimination in healthcare, employment, and housing, leading to stress, adverse health outcomes, and financial instability. Intersectionality with other aspects of their identity can exacerbate the experience of discrimination.
2. **Housing and Healthcare Access:** Many LGBTQ+ seniors feel compelled to conceal their identities to access essential services, driven by past and anticipated discrimination. This concealment, combined with real existing bias, can lead to inadequate care and support.
3. **Social Support:** While connections with LGBTQ+ individuals, family, and communities can provide vital support, many older adults face social isolation due to familial estrangement and the loss of peers.
4. **Resilience:** Despite significant documented challenges, many LGBTQ+ older adults have effectively adapted and developed coping strategies to navigate adversity.
5. **End-of-Life Preparation:** Preparing for end-of-life care is often complicated by concerns about inclusive and non-discriminatory services, highlighting the need for culturally competent care practices.
6. **Mental Health:** Lifelong discrimination and isolation contribute to a high occurrence of mental health issues among LGBTQ+ older adults, which may necessitate tailored interventions.
7. **Financial Health and Planning:** Financial challenges are a significant concern for many LGBTQ+ older adults, stemming from instances of underemployment, unemployment, and potential housing insecurity, issues closely linked to sexual orientation or gender identity.
8. **LGBTQ+ Culture:** The life experiences of LGBTQ+ older adults, including pivotal events and shifting societal mindsets, can influence their perspectives on aging, community involvement, and end-of-life care.

9. **Gender Identity Beyond the Binary:** There are unique and unexplored challenges faced by transgender, non-binary, and gender non-conforming older adults. This demographic can contend with a multitude of complexities as they navigate the aging process.

METHODOLOGICAL INSIGHTS

While the thematic analysis is purposely geared towards identifying general patterns through themes, the authors acknowledge the extensive spectrum of experiences within the LGBTQ+ population. It is important to note that individual experiences may deviate from these themes, and for some individuals, may not align with them at all.

The research involved a detailed review of existing literature on LGBTQ+ aging, focusing on studies that examine the experiences, challenges, and support networks of LGBTQ+ older adults. Research commenced with a structured search strategy using a broad list of keywords. Studies were selected for short list analysis employing criteria such as recency (for example, published following the 2015 ruling on Obergefell v. Hodges which established nationwide legalization of same-sex marriage), relevance, the inclusivity of the definition of LGBTQ+, the thoroughness and uniqueness of the dataset, and more. Included studies rely upon diverse methodologies, enhancing the depth and breadth of the analysis. This methodological diversity allows for a nuanced understanding of both subjective experiences and objective realities. An inductive thematic analysis approach was employed to the selected literature, which included coding the data, identifying emerging patterns, and organizing these patterns into distinct themes.

Where referencing published research, this report uses the same acronym used by the researchers (e.g., LGBT, LGB) for clarity on the population included in that research. Otherwise, this report uses LGBTQ+ to reference the population overall. As discussed later in this report, there is an identified gap in both research on identities beyond lesbian and gay, as well as in disaggregating the experiences and data for individual identities.

LIMITATIONS AND FUTURE RESEARCH

The review identifies significant gaps in the existing literature, particularly the narrow focus on certain identities and the complexities of Sexual Orientation and Gender Identity (SOGI) data collection. There is space for future research to incorporate more diverse identities and experiences, employ culturally sensitive methodologies, and expand the scope to include international perspectives.

CONCLUSION

The exploration into the current literature provides a structured understanding of topics and themes addressed in existing studies on retirement and aging within the LGBTQ+ population. Future research exploring the socio-cultural and economic factors shaping the lives of LGBTQ+ older adults may provide a more comprehensive understanding of the issues. More comprehensive research in this field may serve to fill in gaps in existing academic literature and help to address issues that many older LGBTQ+ people face.

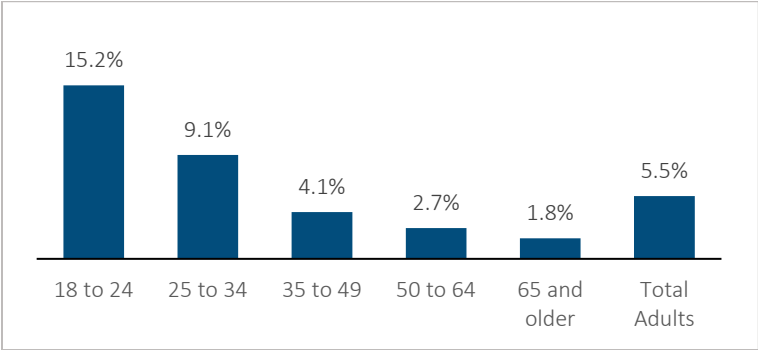
The findings outlined in this paper are based on the current legislative environment. The legislative landscape surrounding LGBTQ+ rights is evolving and changes in policy can significantly impact the experiences of LGBTQ+ adults. As such, future research and understanding will be affected by any shifts in legislation.

Section 1 Demographic Context

Understanding the exact size of the LGBTQ+ population in the United States presents a complex challenge, as no definitive statistics capture the entirety of this population. Various factors contribute to this ambiguity, including in some cases individuals' reluctance to have their sexual orientation or gender identity officially recorded. Consequently, a range of estimates exists, provided by different organizations, each attempting to approximate the size of the LGBTQ+ population. The following section leverages this range to offer context and nuance to the demographic shift in LGBTQ+ representation over the last few years, and how the population for this study is defined.

Recent data from the 2020-2021 Behavioral Risk Factor Surveillance System (Figure 1) reveals a notable demographic trend: an estimated 5.5% of adults across the United States self-identify as LGBT, which equates to 13.9 million individuals. To put this into perspective, this figure is nearly double the entire population of Arizona.¹

Figure 1
ADULT LGBT POPULATION IN THE UNITED STATES BY AGE, 2020-2021

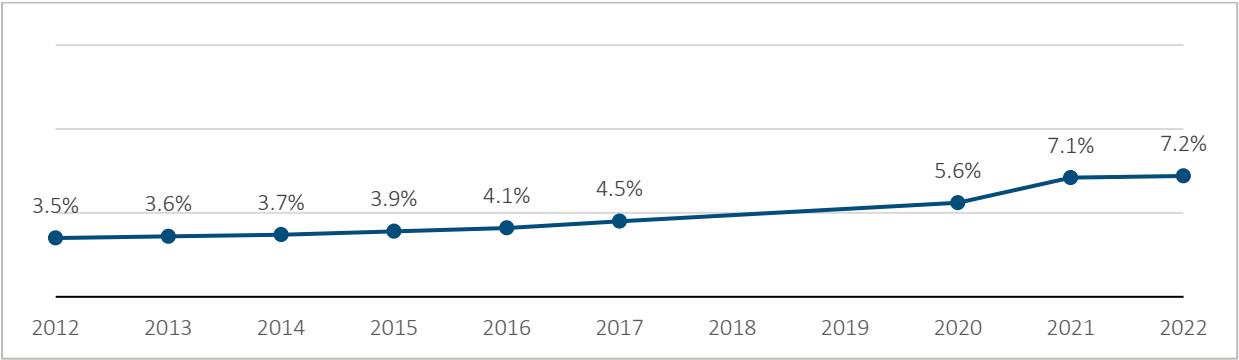


Source: 2020-2021 BRFSS2

Within this self-identified LGBT+ population, estimates range from 2.7 to 3 million adults aged 50 and above and approximately 1.1 million aged 65 or older.^{2,3} Long-term projections indicate a potential population of over 5 million LGBT+ seniors in the United States by 2060.³

An overarching observation from this review of studies is the complex nature of these statistical analyses and the resulting variation among surveys. For instance, Gallup's 2022 assessment, shown in Figure 2, suggests a slightly higher prevalence of LGBT identification, standing at 7.2%.⁴ This discrepancy highlights the importance of recognizing the inherent variability within demographic studies and the necessity of corroborating findings from multiple reputable sources.

Figure 2
SELF-IDENTIFICATION AS LGBT OR SOMETHING OTHER THAN HETEROSEXUAL IN THE U.S., 2012-2022



Gallup4

Note: Respondents who volunteer another identity (e.g., queer, same-gender-loving; pansexual) are recorded as “Other LGBT” by interviewers. These responses are included in the LGBT estimate. Data was not collected in 2018 and 2019.

Clearly, this population growth represents a change in our demographic landscape with implications for healthcare, social services, and other infrastructure.

1.1 THE CURRENT LANDSCAPE OF INTERSECTING FACTORS AND IDENTITIES

The experiences of LGBTQ+ older adults may be influenced by a myriad of intersecting factors. For example, many individuals find acceptance, support, belonging, and meaningful connections through communities that celebrate their identities. Positive experiences can contribute to resilience, self-confidence, and a sense of empowerment. Conversely, discrimination, prejudice, and stigma can detract from these positive aspects, leading to feelings of isolation and potential mental health challenges. Intersectionality further complicates this dynamic, with individuals facing compounded forms of discrimination based on intersecting factors such as race, ethnicity, and socioeconomic status. Similarly, the acronym LGBTQ+ encompasses a diverse array of gender and sexual identities. Those identifying within this spectrum may encounter common challenges due to marginalization, but it is important to recognize distinct and individual experiences shaped by specific sexual orientation and gender identity, age, racial and ethnic background, socioeconomic status, education, housing stability, geographic region, and disability status.

1.2 DIVERSE SEXUALITIES, ORIENTATIONS, AND IDENTITIES

One recurring theme in the existing literature is the necessity of making clearer distinctions among different sexualities, orientations, and identities.⁵ While some research papers opt to collapse sexuality and gender identities together due to methodological considerations and small sample sizes, others advocate for a more granular examination of these distinctions. This encompasses both academic and pragmatic purposes in recognizing that the needs and experiences of, for instance, lesbian women may differ significantly from those of gay men or transgender individuals.⁶ Research investigating specific identities more narrowly supports and acknowledges the spectrum of sexualities, orientations, and gender identities that exist.

Section 2 Barriers to Successful Aging of LGBTQ+ Individuals

In the field of gerontology, the concept of successful aging holds a prominent place. For LGBTQ+ individuals, successful aging may be contingent on the elimination of social exclusion and marginalization across all stages of life. Essential elements such as adequate healthcare services, economic stability, robust social connections, and familial support serve as the bedrock for achieving successful aging generally, and this remains true for those who identify as LGBTQIA+.⁷ In particular, well-developed social connections through a strong community network are widely acknowledged to positively impact an individual's health as they age.^{8,9}

In a number of different contexts, the conventional life course paradigm primarily assumes a heterosexual experience, assuming that by the time individuals reach their elderly years, they would typically have children or extended family members to provide caregiving support, or they would access assisted living facilities tailored to meet their needs.⁹ For LGBTQ+ individuals, these scenarios may vary considerably. Research indicates that LGBTQ+ individuals are more likely to rely on chosen family¹, romantic partners, and close friends for care and support as they age.^{8,9}

¹ “Chosen family” refers to the network of non-biological relationships intentionally formed among individuals who seek mutual support, love, and camaraderie. This concept holds particular resonance within LGBT populations, where individuals can face estrangement from their biological families due to their sexual orientation, gender identity, or expression.

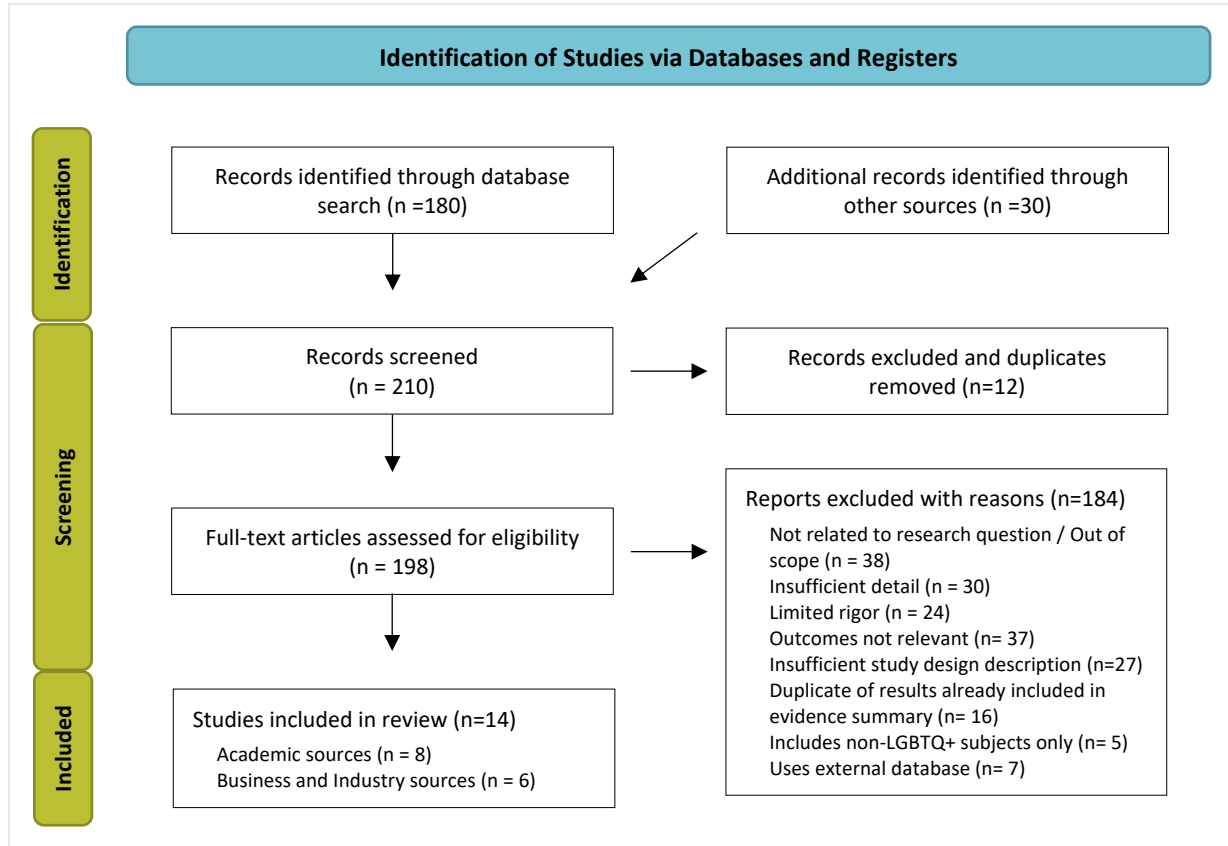
Section 3 Methodology

With an understanding of the ongoing demographic shift, particular challenges, and implications of intersectionality outlined above, the analysis involved a detailed review of existing literature on LGBTQ+ aging, focusing on studies that examine the experiences, challenges, and support networks of LGBTQ+ older adults. An inductive thematic analysis approach was employed to selected literature, which included coding the data, identifying emerging patterns, and organizing these patterns into distinct themes. These themes provide a structured understanding of topics and themes addressed in existing LGBTQ+ research, offering a solid foundation for the analyses.¹⁰

In this section, the paper delves into the methodology and source characteristics that form the basis of the review. Initially, the comprehensive search strategy is outlined, detailing our approach to database selection and keyword utilization, specifically tailored to capture the nuances of aging for the LGBTQ+ population. The rigorous criteria that guided inclusion and exclusion of studies is then discussed, enabling a focused and relevant review. The study selection process is also outlined, illustrating the systematic approach to screening, and reviewing literature, emphasizing diversity and depth in the review questions. Next, the process of data extraction, creating transparency and structure in presenting the systematic review results is described. The section concludes with an overview of the thematic analysis approach. This includes the identification and synthesis of data patterns into coherent themes, providing a nuanced narrative of the experiences of LGBTQ+ older adults described in existing research. While the thematic analysis is purposefully geared towards identifying general patterns through themes, the authors acknowledge the extensive spectrum of experiences within the LGBTQ+ population. It is important to note that individual experiences may deviate from these themes, and for some individuals, may not align with them at all.

3.1 LITERATURE SELECTION

Figure 3
OVERVIEW OF PROCESS FOLLOWED TO PRIORITIZE LITERATURE



3.1.1 OVERVIEW OF APPROACH

Phase 1: Identification

- **Search Strategy:**

The research commenced with a structured search strategy across several databases including Google Scholar, LGBT Life, PubMed, and PsycINFO. This strategy involved the integration of keywords reflecting LGBT identities ("gay," "lesbian," "bisexual*," "queer," "sexual minority*," "gender minority*") alongside terms related to aging and long-term care services ("long-term care," "nursing home," "residential care," "subacute facility," "rehabilitation facility," "aged care home," "home care," "home health care," "adult day care," "assisted living"). The search was guided by the National Institute on Aging (2017) definition of long-term care services and supports (LTSS), encompassing a variety of care settings.

To address the economic and social dimensions of aging within the LGBT population, additional keywords were incorporated into the search strategy: "LGBT+ Aging," "Retirement," "LGBT Financial Planning," "Queer Economics," "Same-Sex Couples + Finance," "LGBT+ Wage Gap," "Economic Inequality + Sexual Orientation," "Financial Literacy," "Non-Traditional Families and Finance," "Health Care Costs for LGBT," "Tax Implications for LGBT," "Intersectionality in LGBT," "Adoption and LGBT Finances," and "Legal Barriers

in LGBT Finances." This broad approach aimed to capture the diverse challenges and considerations unique to the LGBT population in the context of aging, focusing on financial planning, legal issues, and health care costs.

- **Additional Searches:** To facilitate thoroughness, ancestry and descendency searches of references from retrieved studies and relevant review articles were conducted.

Phase 2: Screening

- **Inclusion and Exclusion Criteria:** The review focused on peer-reviewed studies published in English, originating from the United States, with a specific focus on the experiences of LGBTQ+ older adults close to, or currently in retirement situations. Priority was given to research that directly contributes to understanding the specific circumstances and needs of this population within such environments. Studies were excluded that did not align with the core focus, including those relying on external datasets not specifically curated for analyzing LGBTQ+ experiences in care settings, and comparative studies between LGBTQ+ and non-LGBTQ+ populations concerning aging, where the primary focus was not on LGBTQ+ experiences in retirement (Figure 3). Additionally, to uphold the comprehensiveness and reliability of the review, the following criteria were employed to evaluate the selected studies:
 - *Relevance:* The study's focus on LGBTQ+ older adults and their experiences in retirement settings.
 - *Thoroughness and Uniqueness of Dataset:* Preference for studies with comprehensive data collection and unique datasets that provide new insights into the studied demographic.
 - *Definition of LGBTQ+:* Clarity and inclusivity in the definition of LGBTQ+ populations being studied.
 - *Data Integrity and Citation Frequency:* The credibility of the data, as evidenced by the number of citations and the study's influence in the field.
 - *Robustness of Methodology:* The strength and appropriateness of the research methods used to gather and analyze data.
 - *Results and Conclusions:* The clarity, relevance, and impact of the study's findings and conclusions.
 - *Limitations:* A clear acknowledgment and discussion of the study's limitations.
 - *Date/Year of Publishing:* Consideration of the publication date to ensure the timeliness and relevance of the research in the context of current challenges and practices in long-term care.

Phase 3: Selection

- **Study Selection:** The selection process involved screening titles and abstracts for relevance, followed by a full-text review of potentially eligible studies. The selection emphasized a strategy that supported representation of a broad range of LGBTQ+ identities within the study populations, ensuring that the research encompasses a wide spectrum of experiences and perspectives.

3.1.2 CHARACTERISTICS OF SOURCES

This systematic review incorporates 14 studies that collectively provide a multifaceted understanding of the experiences and challenges faced by LGBTQ+ older adults. These studies were selected based on their relevance, methodological rigor, and the breadth of perspectives they offer on the topic.

3.1.3 STUDY DESIGN AND METHODOLOGY

The selected studies employ various research methodologies, enhancing the depth and breadth of the analysis.

- **Qualitative Approaches:** Several studies utilize qualitative methods such as in-depth interviews and thematic analyses to explore personal experiences and perceptions.

- **Quantitative Techniques:** Other studies apply quantitative approaches, including surveys and statistical analyses, providing empirical data (either directly through primary research, or through meta-analysis of relevant public datasets) on the prevalence and characteristics of issues faced by LGBTQ+ older adults.

This methodological variation allows for a nuanced understanding of both the subjective experiences and objective realities of the population in question.

3.1.4 STUDY PARTICIPANTS AND DEMOGRAPHICS

- The studies feature diverse participant samples encompassing LGBTQ+ elders, and a range of genders, ethnicities, and socio-economic backgrounds within the population.
- This diversity creates a broad representation and applicability of the findings, capturing the experiences of various subgroups within the LGBTQ+ older adult population.
- Including perspectives from researchers and professionals offers additional context and depth to understanding the issues faced.

3.1.5 QUALITY OF EVIDENCE

Studies were selected based on their methodological rigor and relevance to the research topic. The overall quality of evidence is considered robust, contributing to the reliability and validity of the review's conclusions.

3.2 SELECTED STUDIES

Where referencing published research, this report uses the same acronym used by the researchers (e.g., LGBT, LGB) for clarity on the population included in that research. Otherwise, this report uses LGBTQ+ to reference the population overall. As discussed later in this report, there is an identified gap in both research on identities beyond lesbian and gay, as well as in disaggregating the experiences and data for individual identities.

3.2.1 LITERATURE INCLUDED IN THIS STUDY

A final list of 14 whitepapers were selected from academic, business, and industry sources based on the approach outlined above. Each report is listed here with publishing and source details as well as summary findings pulled from the study and related selection details.

Movement Advancement Project & SAGE. (2017). **Understanding Issues Facing LGBT Older Adults**
<https://www.lgbtmap.org/file/understanding-issues-facing-lgbt-older-adults.pdf>³

- **Summary findings:** Growing older in the United States is filled with uncertainty. For LGBT elders, there are added challenges that make aging more fraught. Years of employment discrimination can result in lower retirement savings and Social Security income. LGBT elders face substantial discrimination in housing, when accessing medical care, and in aging-specific programs and services. With fewer connections to families of origin, LGBT elders may be at increased risk for social isolation. In many respects, LGBT elders show remarkable resilience given that many of their experiences as young people were in a time when being LGBT was less accepted. As detailed in this report, without strong economic security, access to competent affirming healthcare, and social support, LGBT elders face more challenges when aging.
- **Dataset:** Not provided (secondary research)
- **Methodology:** Secondary research review

- **LGBTQ+ representation:** LGBT (lesbian, gay, bisexual, and transgender)
- **Limitations:** Less recent, not a quantitative research study, lack of definition and separation in the identities included
- **Criteria for inclusion:** Thematic relevance, thoroughness of topic, inclusion of extensive external research references

Henry, R. S., Perrin, P. B., Coston, B. M., & Witten, T. M. (2019). **Transgender and gender non-conforming adult preparedness for aging: Concerns for aging, and familiarity with and engagement in planning behaviors.** *International Journal of Transgender Health*, 21(1), 58–69. <https://doi.org/10.1080/15532739.2019.1690612>¹¹

- **Summary findings:** Transgender or gender-nonconforming (TGNC) individuals reported many concerns about aging, both gender identity-specific and not. The most common aging concern was losing the ability to care for themselves followed by having to go into a nursing home or assisted living facility. The age preparatory behaviors that individuals were most commonly aware of included: life insurance, wills, organ donation, regular medical checkups, living wills, durable power of attorney for healthcare, and trusts. Gender non-conforming individuals had significantly more familiarity with age preparatory behaviors than trans feminine individuals but had lower levels of planning to engage in age preparatory behaviors than both trans masculine and trans feminine individuals.
- **Dataset:** Survey sample from individuals (N = 154) who self-identified as transgender or gender-nonconforming (TGNC). Participants tended to be younger (M age = 29.89, SD = 8.2), bisexual (31.8%), college educated (36.4% with 4-year degree, 16.9% a 2-year/technical degree, and 24.7% some college with no degree), white/European American (non-Latino) (67.5%), and atheist or agnostic (53.2%).
- **Methodology:** A dual recruitment method was used to gather cross-sectional survey data via two online mechanisms: Amazon's Mechanical Turk (Mturk) and an online snowball sample collected via a TGNC listserv comprised of individuals who had participated in previous research, community leaders, organizations, and trans-related e-lists. Researcher-generated questions in collaboration with an outside TGNC expert were created to examine generic and identity-specific aging concerns.
- **LGBTQ+ representation:** TGNC: transgender and gender non-conforming
- **Limitations:** Lack of sample diversity (primarily young, white, and well-educated), reports all TGNC together or creates artificial groupings, did not delve into stage of transition and age at transition
- **Criteria for inclusion:** Recency, thematic relevance, rigorous approach to align sample to general population demographics (aside from race and education), rare research focused on TGNC population

Concannon, L. (2022) **Pioneering Safe & Inclusive LGBT Specific Retirement Accommodation. Exploring Models in the USA, UK, & Spain.** Available at SSRN: <https://ssrn.com/abstract=4258086> or <http://dx.doi.org/10.2139/ssrn.4258086>¹²

- **Summary findings:** The assumption of heterosexuality in residential care is the 'norm' whereby non-normative sexualities are negated. For those considering long-term care, the fear of alienation and having to go back into the 'closet' is of profound concern, with researchers observing both stress and resilience shown in relation to these worries. The argument most frequently presented to counter this is training managers and care staff to deliver non-discriminatory health and social care practices, targeting the unique needs of LGBT residents. However, from within the gay community has come a solution to end the type of homophobic behavior often encountered in mainstream care environments. This has seen the radical and sometimes controversial growth in alternative forms of retirement housing for gay older adults.
- **Dataset:** Content of selected studies on LGB (lesbians, gay men, and bisexuals) experience with long-term care
- **Methodology:** Broad and systematic review of the literature concentrating on the experiences of lesbians, gay men, and bisexuals and the concerns and treatment of LGB individuals in long-term care

- **LGBTQ+ representation:** LGB: lesbians, gay men, and bisexuals
- **Limitations:** No transgender representation due to lack of studies available, LGB treated as a single identity, narrow focus on long-term care
- **Criteria for inclusion:** Recency, thematic relevance, unique point of view, breadth of existing literature leveraged

Craig C., and Greenwald L., “Retirement Confidence Survey and the LGBTQ Community,” EBRI Issue Brief, no. 560 (Employee Benefit Research Institute, June 14, 2021) ¹³

- **Summary findings:** [Note: This source uses the term *Americans* to refer to people in the U.S.]
 - In each income group, LGBTQ Americans are less likely to be confident in having enough to live comfortably throughout retirement.
 - LGBTQ Americans are more likely to consider debt to be a major or minor problem for their household than non-LGBTQ Americans, across each income group.
 - Low- and middle-income LGBTQ Americans are less likely to agree that they are knowledgeable about managing their day-to-day finances than non-LGBTQ Americans.
 - LGBTQ Americans, in the lower- and upper-income groups, are more likely to agree that retirement savings is not a priority relative to current needs than non-LGBTQ Americans.
 - In the lower- and middle-income groups, LGBTQ Americans are more likely to feel their household’s financial needs are different than other households.
 - LGBTQ Americans are less likely to work with a financial advisor but are more likely to express a preference for working with an advisor who has had similar life experiences to them and is an ally of the LGBTQ community.
 - LGBTQ retirees are more likely to say that they retired earlier than planned.
- **Dataset:** Survey sample of 2,677 Americans ages 25 or older. The survey included 1,545 workers and 1,132 retirees—this year included an oversample of 807 completed surveys among LGBTQ Americans (639 workers and 168 retirees).
- **Methodology:** The Retirement Confidence Survey, in its 32nd year in 2022, is the longest-running survey of its kind, measuring worker and retiree confidence about retirement, and is conducted annually by the Employee Benefit Research Institute (EBRI) and Greenwald Research. The 2022 survey was conducted online January 4 through January 26, 2022. Data are weighted by age, sex, LGBTQ status, household income, and race/ethnicity. Unweighted sample sizes are noted on charts to provide information for margin of error estimates. The margin of error would be ± 2.5 percentage points for workers, ± 3.0 for retirees, and ± 3.5 for LGBTQ respondents in a similarly sized random sample.
- **LGBTQ+ representation:** LGBTQ: defined as respondents who self-described their sexual orientation as gay, lesbian, bisexual, asexual, queer, or other, or who described their gender identity as transgender, gender non-conforming, or other
- **Limitations:** Narrow focus on retirement financials, generalized findings without deeper analysis, lack of visibility into the results from the different identities included in the LGBTQ+ sample
- **Criteria for inclusion:** Recency, thematic relevance, survey sample size

Nationwide Retirement Institute. (2022) *LGBTQ+ finances flash poll findings* (NFM- 22096AO). Nationwide Mutual Insurance Company. Retrieved from <https://news.nationwide.com/lgbtq-community-falling-behind-on-financial-security/> ¹⁴

- **Summary findings:** LGBTQ+ in the U.S. are less likely than the general public to have a positive view of their personal financial situation, the LGBTQ+ community is falling behind on financial security and has lower levels of financial literacy, LGBTQ+ people report similar top financial goals and challenges as the general population, the LGBTQ+ community faces unique financial challenges and many experience career limitations due to their gender identity or sexual orientation, LGBTQ+ respondents list improved

- benefits for unmarried partners, increased representation, and increased awareness of bias as the most beneficial for the personal finances and financial planning of the LGBTQ+ community.
- **Dataset:** Large survey sample of 1,000 nationally representative adults and 1,000 members of the LGBTQ+ community representing Gen Z through Baby Boomer age groups as well as White, Black, and Hispanic populations.
 - **Methodology:** Edelman Data and Intelligence (Dxl) conducted an online survey on behalf of Nationwide. The survey was fielded from April 22 through April 28, 2022 and has an overall margin of error of $\pm 3\%$ at the 95% confidence level.
 - **LGBTQ+ representation:** LGBTQ+
 - **Limitations:** Narrow focus on financial health, not specifically focused on older adults, generalized findings without deeper analysis, few results dive deeply into the results of specific identities
 - **Criteria for inclusion:** Recency, survey sample size, comparator data for the general population

B. Savage & M. N. Barringer (2021) **The (minority) stress of hiding: the effects of LGBT identities and social support on aging adults' concern about housing**, *Sociological Spectrum*, 41:6, 478-498, DOI: 10.1080/02732173.2021.2010627 ¹⁵

- **Summary findings:** Findings reveal A) significant variations in the degree of worry among segments of the aging LGBT population, and B) ameliorating factors such as social support contribute to a level of resilience and may decrease the degree to which they worry about hiding their identity to access housing.
- **Dataset:** Dataset from AARP's "Maintaining Dignity: Understanding and Responding to the Challenges Facing Older LGBT Americans" a broad survey of 1,762 LGBT adults who self-identified as lesbian or same gender loving females (N=627), gay or same gender loving males (N=680), bisexual or pansexual women and men (N=162), and "gender expansive" (N=264): transgender, trans woman, trans man, gender non-binary, genderqueer, gender fluid, or intersex. The AARP intentionally oversampled gender expansive participants for analytical and data reporting purposes.
- **Methodology:** Analysis of AARP's 2017 data from "Maintaining Dignity: Understanding and Responding to the Challenges Facing Older LGBT Americans" to identify the relationship between the dependent variable: Need to hide LGBT identity to have access to housing with the independent variables of identity and social support, and control variables of relationship status, household income, political views, race/ethnicity, education, and community. Descriptive statistics were first run for the independent and dependent variables, as well as the control variables. Next, three multivariate OLS regression analyses were run to examine the effects of identity, social support, and other sociodemographic variables on the extent to which aging adults worry about having to hide their LGBT identity to have access to suitable housing options as they age.
- **LGBTQ+ representation:** Highly inclusive SOGI data was recoded into four groupings: lesbian, gay, bisexual/pansexual, and gender expansive
- **Limitations:** Narrow focus on housing access, lack of access to hidden populations, recoding of identities (such as transgender representation being conflated with gender non-binary, genderqueer, gender fluid, or intersex) limits findings for specific identities, inability to separate identities more cleanly due to sample size, variables not explored from questions asked, lack of specificity in survey on the meaning of specific items
- **Criteria for inclusion:** Recency, thematic relevance, robust research methodology and rigor, size and quality of data set, inclusion of pansexual and gender expansive identities

Caceres, B. A., Travers, J., Primiano, J. E., Luscombe, R. E., & Dorsen, C. (2020). **Provider and LGBT Individuals' Perspectives on LGBT Issues in Long-Term Care: A Systematic Review**. *The Gerontologist*, 60(3), e169–e183. <https://doi.org/10.1093/geront/gnz012> ¹⁶

- **Summary findings:** Perspectives from elder-care providers identified two themes, they A] lack knowledge and training on LGBT health issues and B] generally report negative attitudes toward same-sex relations among older adults. Perspectives from LGBT individuals found that they (i) are concerned about long-term planning, (ii) fear discrimination from providers in long-term care, and (iii) identify several strategies for improving care of LGBT older adults receiving long-term care.
- **Dataset:** Content of 19 selected studies focused on provider and LGBT individuals' perspectives related to long term services and supports (LTSS)
- **Methodology:** Meta-analysis of 19 studies followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses statement. Included peer-reviewed English-language data-based studies published through August 2018 that were conducted in the United States and that examined LTSS staff and/or LGBT individuals' perspectives regarding LGBT issues in LTSS were eligible for inclusion. Data abstraction consisted of data reduction, data display, data comparison, conclusion drawing, and verification. Thematic analysis was conducted on the data from the accepted studies.
- **LGBTQ+ representation:** LGBT is used in the report, but terms were inconsistent across included studies
- **Limitations:** Majority of LGBT perspectives were from younger people who have not experienced long-term care, only one study looked at home healthcare. Provider-focused studies rarely included provider sexual orientation or transgender status. Twelve of the 19 studies pre-date the Marriage Equality Act. Limited racial & ethnic diversity in study participants.
- **Criteria for inclusion:** Systematic deep dive analysis of past research, thematic relevance, unique approach including the perspectives of both the LGBT recipients of LTSS but also the providers

de Vries, B., Gutman, G., Humble, Á., Gahagan, J., Chamberland, L., Aubert, P., Fast, J., & Mock, S. (2019). **End-of-Life Preparations Among LGBT Older Canadian Adults: The Missing Conversations**. *International Journal of Aging and Human Development*, 88(4), 358–379. <https://doi.org/10.1177/0091415019836738> ¹⁷

- **Summary findings:** LGBT (lesbian, gay, bisexual, and transgender) older adults are more likely than their heterosexual peers to age with limited support in stigmatizing environments often poorly served by traditional social services challenging their preparedness for end of life. Four superordinate themes were identified: (a) motivators and obstacles, (b) relationship concerns, (c) dynamics of LGBT culture and lives, and (d) institutional concerns. Several pressing issues emerged including depression and isolation (more common among gay and bisexual men), financial/class issues (lesbian and bisexual women), and uncomfortable interactions with health-care providers (transgender participants).
- **Dataset:** Transcripts from 14 focus groups and three individual interviews with 40 gay/bisexual men, 29 lesbian/bisexual women, and 24 transgender persons (including those who identified as gay, lesbian, bisexual, and heterosexual).
- **Methodology:** 14 focus groups and three interviews of 93 community-dwelling LGBT persons aged 55 to 89 in five Canadian urban centers. Pilots emphasized the need for same-gender groupings to optimize participant comfort. Bisexual individuals were included in the other groups due to low participation. Interviews were used to accommodate availability issues. Transcripts of interviews and focus groups were coded the same way. Recruitment took place through community agencies, social media, promotional materials in LGBT-identified venues (e.g., community centers), news reports in the LGBT and broader press, and by referral.
- **LGBTQ+ representation:** Identified participants as gay/bisexual men, lesbian/bisexual women, and transgender persons
- **Limitations:** Conflation of disparate identities by gender status (male, female, trans) to include bisexuals with gay and bisexual participants due to low participation. Underrepresentation of bisexual women and men, transwomen, people of color, rural LGBT older persons, and those with more complex healthcare and social care needs.

- **Criteria for inclusion:** Focus on lived experience and personal narrative, size of qualitative data set

Fredriksen Goldsen, K., & de Vries, B. (2019). **Global Aging with Pride: International Perspectives on LGBT Aging.** *International Journal of Aging and Human Development*, 88(4), 315–324.

<https://doi.org/10.1177/0091415019837648>¹⁸

- **Summary findings:** As a marginalized and growing segment of the older adult population, lesbian, gay, bisexual, and transgender (LGBT) older adults face distinct risk factors related to cognitive impairment and dementias, including social isolation, discrimination, barriers to health care access, limited availability of and support for caregivers, and higher rates of certain chronic illnesses. The research findings spanned disparities, challenges, strengths, and resilience.
- **Dataset:** Content of selected papers on LGBT aging.
- **Methodology:** Thematic review of LGBT aging research papers from 10 countries including empirical work and thought pieces in response to a call for papers following the preconference, Global Aging with Pride, held at the 21st International Association of Gerontology and Geriatrics World Congress.
- **LGBTQ+ representation:** LGBT: not further defined
- **Limitations:** Brevity / lack of depth on themes identified, lack of inclusion criteria for the papers included in the review, LGBT treated as a single identity.
- **Criteria for inclusion:** Recency, thematic relevance, clear summary of themes from LGBT aging research

Putney, J. M., Keary, S., Hebert, N., Krinsky, L., & Halmo, R. (2018). **"Fear Runs Deep:" The Anticipated Needs of LGBT Older Adults in Long-Term Care.** *Journal of Gerontological Social Work*, 61(8), 887–907.

<https://doi.org/10.1080/01634372.2018.1508109>¹⁹

- **Summary findings:** Older lesbian, gay, bisexual, and transgender (LGBT) adults are a vulnerable yet resilient population who face unique stressors as they foresee health decline. Participants' needs and concerns about residential care were informed by their own current or past health crises, personal and professional caregiving roles, and having witnessed friends', partners', and family members' health decline and need for long-term care. With respect to their fears, five themes became apparent: affordability, caregiving, dementia, safety, and suicide. Related to these fears, participants expressed two primary areas of need: LGBT-inclusive settings and LGBT-trained and -sensitive staff.
- **Dataset:** Transcripts from seven focus groups with accompanying short questionnaires with input from a total of 50 people.
- **Methodology:** This qualitative study collected data from a sample (N = 50) of LGBT-identified adults aged 55 and over across seven focus groups and a brief questionnaire with an inductive, thematic analysis approach to data analysis. Purposive sampling strategies used to recruit participants aged 55 and older and self-identified as LGBT. Participants learned of the study through advertisement in local senior centers, announcements at aging service access points, and LGBT congregational meal sites. Study recruitment stopped when no new themes emerged in the data.
- **LGBTQ+ representation:** LGBT: lesbian, gay, bisexual, and transgender with demographics collected around sex assigned at birth, gender identity, sexual orientation though this level of granularity was not represented in the findings due to the small sample size
- **Limitations:** Small sample, only one state represented, demographic data unconnected to responses, narrow focus on housing and residential care
- **Criteria for inclusion:** Recency, qualitative sample, unique data set, in-depth methodological detail

Fredriksen-Goldsen, K. I., Jen, S., Bryan, A. E. B., & Goldsen, J. (2018). **Cognitive Impairment, Alzheimer's Disease, and Other Dementias in the Lives of Lesbian, Gay, Bisexual and Transgender (LGBT) Older Adults and Their Caregivers: Needs and Competencies.** *Journal of Applied Gerontology: the official journal of the Southern Gerontological Society*, 37(5), 545–569. <https://doi.org/10.1177/0733464816672047>²⁰

- **Summary findings:** As a health disparate population, LGBT older adults and their caregivers face heightened risk of unmet needs due to cognitive impairment, Alzheimer’s disease, and other dementias. Given these risk factors (i.e., historical context, unique family structures, barriers to care, caregiving burden, and health factors), a defined set of 10 core competencies have been developed for working with LGBT older adults living with cognitive impairment, Alzheimer’s disease, and other dementias, and their families and caregivers. Diversity of intersecting identities and experiences, including cognitive impairment, leads to differing configurations of risk and resilience, associated with different treatment and support needs.
- **Dataset:** Several datasets from several cited past studies
- **Methodology:** This study builds on earlier research on core competencies for professional practice in health and human services for LGBT older adults and their families. These original core competencies were developed through a systematic analysis of existing research findings and the extant literature on LGBT aging, and existing competencies for culturally relevant practice with older adults. To develop key competencies for specialized practice with LGBT older adults living with cognitive impairment and Alzheimer’s disease and other dementias, as well as their families and caregivers, systematic reviews were conducted of the original competencies developed as they applied to cognitive impairment, Alzheimer’s disease, and other dementias. Next, the authors analyzed research findings from Aging with Pride and existing literature on LGBT aging as well as literature focusing on culturally competent practice in Alzheimer’s disease and dementia care.
- **LGBTQ+ representation:** LGBT: lesbian, gay, bisexual, and transgender
- **Limitations:** Age of datasets, narrow focus on cognitive impairment
- **Criteria for inclusion:** Systematic deep dive analysis of past research, thematic relevance

Cantave, Cassandra. **Dignity 2022: The Experience of LGBTQ Older Adults.** Washington, DC: AARP Research, June 2022. <https://doi.org/10.26419/res.00549.001> ²¹

- **Summary findings:** The findings increase understanding of the lived experience of older LGBTQ adults in the areas of relationships, caregiving, home and community, health care, financial security, and their concerns about supportive aging and potential discrimination based on LGBTQ identity, age, and disability. In general, the study highlights concerns which vary somewhat across identities about having enough social supports as they age, caregiving needs, the negative impacts of discrimination, lack of financial security and its consequences, but also some positives in relationships with medical and mental health providers, life satisfaction, the opportunities for increasing awareness in the U.S. of support needs.
- **Dataset:** Robust survey and interview sample of 2004 participants with representation across identities, US states, age groups over 45, living arrangements, race, and ethnicity
- **Methodology:** In November 2021, Community Marketing & Insights (CMI) conducted an eight-minute survey along with interviews of LGBTQ panelists with results weighted by race and ethnicity.
- **LGBTQ+ representation:** LGBTQ including Lesbian, Gay, Bisexual Men & Women, Bisexual and Pansexual, Transgender and Nonbinary
- **Limitations:** Results may underrepresent older LGBTQ in the U.S. who are not open about their identity
- **Criteria for inclusion:** Recency, thematic relevance, focus on lived experience, use of existing data sets. to supplement sample, clearly defined methodology and specific criteria for LGBTQ inclusion.

Carrillo, A. (2022). **A glimpse at the Financial Journey to Retirement for LGBTQ+ People in the United States.** SOA. Retrieved from <https://www.soa.org/4aa620/globalassets/assets/files/resources/research-report/2022/age-ret-lgbtq-carrillo.pdf> ²²

- **Summary findings:** Through examining the financial journey from the various vantage points of members of the LGBTQ+ community, there are several conclusions which can be drawn:

- More data is a catalyst to better understanding.
- Protection against discrimination facilitates building long term wealth.
- Societal and family acceptance strengthens the foundation.
- Different needs call for different support.
- Reducing the uncertainties simplifies the path.
- Education and access to financial services and benefits reduce the burden.
- **Dataset:** Not provided (secondary research)
- **Methodology:** Secondary research review
- **LGBTQ+ representation:** LGBTQ+
- **Limitations:** Not a quantitative research study, lack of clarity in the identities included
- **Criteria for inclusion:** Recency, thematic relevance, integration of existing government data, qualitative perspective.

Society of Actuaries Research Institute & Sexuality and Gender Alliance of Actuaries. (n.d.). **Aging and Retirement Issues for LGBTQ+ People Essay Collection.** <https://www.soa.org/resources/research-reports/2022/2022-aging-retirement-lgbtq/>²³

- **Summary findings:** This effort aimed to explore how differences in retirement security and outcomes are experienced by LGBTQ+ people to promote a better understanding of the underlying issues surrounding the differences.
- **Dataset:** Not provided (secondary research)
- **Methodology:** Juried essay collection including personal perspective and secondary research reviews. A panel of judges from both organizations did a blinded review of the essays for publication and awards. The judges selected one essay for top prize. Consideration was given to creativity, originality, and the extent to which an idea could contribute to furthering the conversation on these issues.
- **LGBTQ+ representation:** LGBTQ+
- **Limitations:** Not a quantitative research study, lack of clarity in the identities included.
- **Criteria for inclusion:** Recency, thematic relevance, qualitative perspectives, moderate references to external research.

Where referencing published research, this report uses the same acronym used by the researchers (e.g., LGBT, LGB) for clarity on the population included in that research. Otherwise, this report uses LGBTQ+ to reference the population overall. As discussed later in this report, there is an identified gap in both research on identities beyond lesbian and gay, as well as in disaggregating the experiences and data for individual identities.

3.3 ANALYTIC APPROACH

3.3.1 OVERVIEW OF THEMATIC ANALYSIS

- **Data Extraction:** Relevant information from the selected studies was extracted using a standardized form, detailing study design, sample characteristics, settings, methods, and key findings.
- **Approach:** An inductive thematic review, as described by Braun & Clarke¹⁰, was utilized to analyze the data from the selected papers. This approach focused on identifying and coding data patterns.
- **Theme Identification:** Through meticulous examination of the literature, patterns were organized into themes that closely represent the experiences of LGBTQ+ older adults. These themes include discrimination, resilience, financial concerns, and institutional barriers, among others.

- **Data Synthesis:** The synthesis involved a narrative approach, where the lead author initially identified themes, which were then reviewed and refined by the research team to create a full representation of the data.
- **Reporting of Findings:** The results of the thematic analysis are detailed in the study, highlighting the emergent themes and their implications for the experiences of LGBTQ+ older adults.

Section 4 ANALYSIS OVERVIEW

4.1 META-THEMES IN THE ANALYSIS

In recent years, the lens through which the aging experiences of LGBTQ+ individuals are viewed has broadened.^{24,25} Research endeavors have transitioned from a narrow focus on individual experiences to an understanding that these experiences are deeply embedded in larger systemic and socio-cultural fabrics. Thematic analysis of the selected studies was used to identify two critical meta themes that inform understanding of the complex realities of many LGBTQ+ older adults. These themes, 'Systemic Agency of Decision Making' and 'Interrelation of Socio-Cultural and Economic Factors,' serve as key frameworks for understanding the challenges and resilience characteristics of this demographic. They offer a more integrated and holistic perspective, enhancing comprehension of the intricacies of the aging journey, and encompass all of the themes discussed in the following section.

4.1.1 SYSTEMIC AGENCY OF DECISION MAKING

This meta theme provides insight into how systemic structures and societal norms influence the decision-making autonomy of LGBTQ+ older adults. It brings to light the systemic invisibility and marginalization many in this group face. This further impacts their agency in making decisions related to aging and retirement. As various studies examined the experiences of LGBTQ+ older adults, it became evident that the systemic agency of decision-making is a critical lens through which their realities are shaped. The strategies employed by many LGBTQ+ older adults to navigate discriminatory systems and assert their autonomy have led researchers to ascribe resilience and strength to this population.²⁴ Understanding the intricate ways in which societal norms and structures influence their decision-making capabilities provides insight into the challenges they face. Studies have noted how societal attitudes, economic status, and cultural norms intersect to form a systemic removal from visibility²⁶ creating a set of challenges which provide a frame for the key themes examined in this paper.

- **Limited Representation:** Historically, LGBTQ+ older adults have lacked representation in discussions and policies surrounding aging, which affects their ability to make informed decisions about their care and retirement needs.²⁴
- **Barriers in Healthcare and Services:** Due to their invisibility, there is often a lack of tailored healthcare and services that recognize and adequately address the specific needs of LGBTQ+ elders.²⁶
- **Challenges in Advocacy and Agency:** Systematic marginalization impacts their self-advocacy and agency, making it difficult for many to assert their rights and preferences in care settings.²⁷
- **Procedural and Implicit Dimensions of Care:** While procedural aspects (like policies and training) are crucial, the implicit dimensions (such as attitudes, biases, and cultural norms of providers) can influence how care is delivered and received.²⁸

4.1.2 INTERRELATION OF SOCIO-CULTURAL AND ECONOMIC FACTORS

The second meta theme encapsulates the notion that the lived experiences of many LGBTQ+ older adults are molded by an amalgamation of their diverse identities and socio-economic determinants.²⁹ This theme underscores the multidimensional nature of their existence, where various layers of identity intersect with socio-economic elements, collectively shaping their journey through aging.^{30,31} Delving into this theme, it becomes evident that the interplay of these factors shapes the individual experiences of the LGBTQ+ older adult population.^{32,33,34} This confluence of identities and socio-economic influences both explains and influences many of the key themes considered in this paper.

- **Multiplicity of Identities:** LGBTQ+ older adults possess multiple intersecting identities—such as race, gender, socioeconomic status, and more—that collectively influence their experiences and challenges in aging. These intersecting identities contribute to the complexity of their experiences, as they navigate not

just issues related to their sexual orientation or gender identity but also contend with other forms of marginalization and privilege.^{15,18,29,35}

- ***Influence on Health and Well-being***: The interplay of socio-cultural and economic factors affects health, financial stability, and overall well-being.^{36,37}
- ***Gaps in Holistic Understanding***: A lack of recognition of this interrelation may limit understanding of the needs of older LGBTQ+ adults and lead to policies and interventions that are not inclusive.³⁸

By exploring these connections, a more holistic understanding of how systemic issues, and the interplay of various socio-cultural and economic factors shape the experiences of LGBTQ+ older adults was gained.

4.2 THEMATIC ANALYSIS

In this thematic analysis, the paper delves more deeply into how existing research captures the complex experiences of LGBTQ+ older adults. Drawing from the selected studies nine key themes are uncovered, which highlight the challenges and strengths within this demographic and reflect the broader systemic, socio-cultural, and gender-related dynamics involved.

4.2.1 OVERVIEW OF THE KEY THEMES

1. ***Discrimination and Marginalization***: Exploring the existence of discrimination in healthcare, employment, and housing, and its impact on minority-related stress and well-being.
2. ***Housing and Healthcare Access***: Addressing concerns about concealing identity to access essential services, due to past and anticipated discrimination.
3. ***Social Support***: Clarifying the role of connections with LGBTQ+ individuals, family, and communities, and the contrasting issue of social isolation.
4. ***Resilience through Change***: Examining the perseverance developed through overcoming adversity and developing coping strategies.
5. ***End-of-Life Preparation***: Identifying challenges in preparing for end-of-life care, including concerns about inclusive and non-discriminatory services.
6. ***Mental Health***: Highlighting common mental health issues resulting from lifelong discrimination and isolation.
7. ***Financial Health and Planning***: Connecting the financial challenges related to sexual orientation or gender identity impacting access to care and support.
8. ***LGBTQ+ Culture***: Recognizing the impact of different experiences and histories, such as the HIV/AIDS epidemic, on aging and end-of-life perspectives.
9. ***Gender Identity Beyond the Binary***: Shedding light on the growing recognition of diverse gender identities beyond the traditional binary.

These themes collectively provide a comprehensive view of research about the aging experiences of those identifying as LGBTQ+, revealing the interplay between individual resilience and systemic challenges.

Figure 4
FREQUENCY OF THEMES

Rank	Theme	Frequency	Sources with this theme
1	Housing and Healthcare Access	25	3, 11, 12, 15, 16, 18, 19, 20, 21, 23
2	Discrimination and Marginalization	18	3, 12, 14, 15, 16, 19, 20, 21, 22, 23
3	Social Support	13	3, 11, 12, 15, 16, 17, 19, 20, 21
4	Financial Health and Planning	11	3, 13, 14, 17, 19, 20, 21, 22, 23
5	Mental Health	10	3, 15, 17, 19, 20, 21, 22, 23
6	Resilience through Change	7	3, 12, 15, 18, 19, 20
7	LGBTQ+ Culture	6	3, 12, 15, 17, 18, 19
8	End-of-Life Preparation	5	11, 16, 17
9	Gender Identity Beyond the Binary	5	11, 15, 19, 20, 21

Section 5 Analysis of Findings within Identified Themes

5.1 DISCRIMINATION AND MARGINALIZATION

Although discrimination and marginalization ranked second in frequency, its many intersections with subsequent themes makes it foundational to the discussion of those themes and grounding to this study. Discrimination and marginalization are pervasive issues impacting many LGBTQ+ older adults across multiple spheres, including healthcare, employment, and housing. This systemic discrimination can lead to minority stress, a common conceptual framework describing the generally adverse impact of cumulative negative and positive experiences relating to one's LGBTQ+ identity.

The ways in which discrimination and marginalization interact with other aspects of LGBTQ+ aging include:

- **Discrimination in Healthcare:** LGBTQ+ older adults can face discrimination in healthcare settings ranging from lack of understanding and respect for their identities to outright denial of care.
- **Employment Challenges:** In the workplace, LGBTQ+ older adults may encounter barriers to employment or advancement, as well as harassment or exclusion, which can impact financial stability and retirement planning.
- **Housing Discrimination:** LGBTQ+ elders seeking housing, especially senior living facilities, can be met with challenges, including discrimination based on sexual orientation or gender identity, which can lead to housing instability and insecurity.
- **Impact on Mental Health:** The cumulative effect of discrimination and marginalization may lead to heightened levels of stress, anxiety, and depression among LGBTQ+ older adults.
- **Intersection with Other Identities:** The experience of discrimination can be compounded for LGBTQ+ older adults who also belong to other marginalized groups, such as racial minorities or those with disabilities.

Case Studies and Examples Error! Bookmark not defined.

“Churches were mentioned by GBM (Gay and Bisexual Men) and LBW (Lesbian and Bisexual Women). They were seen to offer structure for community and social interactions, but with some trepidation—as was religion in general. GBM, for example, reported some fear that “others will use their faith against me” (as a Gay or Bisexual Man). One LBW (Lesbian or Bisexual Woman) noted that she “does not feel welcome in church because of its active role” against same-sex marriage. Nevertheless, she still found it difficult to sever her relationship with a community of which she had been a part for most of her life.”

Discrimination and marginalization impact many of the themes to be discussed with a strong relationship to the ability of LGBTQ+ elders to access housing and healthcare.

5.2 HOUSING AND HEALTHCARE ACCESS

The potential disparities in housing and healthcare are frequently mentioned throughout the literature, including higher rates of being unhoused, lack of access to housing and healthcare, and discrimination when seeking housing and healthcare. Many LGBTQ+ older adults harbor concerns about needing to hide their identities to safely access housing and healthcare services. This fear is often based in previous life experiences and concern about future mistreatment from both providers and residents. The following are key components of this theme:

- **Previous Experiences of Discrimination:** Past incidents in these settings reinforce fears and create a sense of vulnerability among LGBTQ+ older adults.

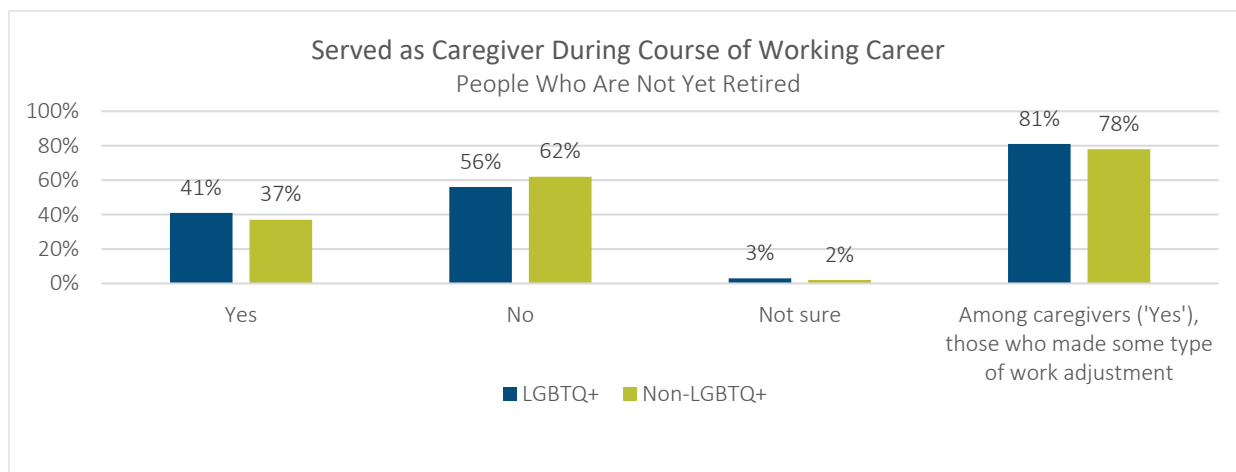
- **Anticipation of Future Discrimination:** The expectation of potential bias can be as impactful as actual experiences, influencing behavior and access to services.
- **Access to Healthcare:** Fear of discrimination can lead LGBTQ+ older adults to delay or avoid seeking medical care, potentially exacerbating health issues.
- **Housing Insecurities:** Anxiety about being open about their LGBTQ+ identity in senior living facilities or other housing situations can affect choices about where and how to live.
- **Impact on Quality of Life:** These concerns and the realities behind them can alter the overall quality of life, leading to increased isolation and decreased mental and physical health.
- **Geographic Intersectionality:** These concerns and the realities behind them can be more pronounced in rural or conservative areas, where societal norms may be less accepting of LGBTQ+ identities.

Case Studies and Examples¹²

“There’s a great deal of silence because LGBT folk tend to go back into the closet when they are in need of care. They grew up in an era when to be LGBT was either criminal or sinful. If any staff have particular [anti-LGBT] faith or cultural beliefs that might impinge upon their care, they don’t want to risk that – or saying anything to their peers. It’s as if they’re wearing a paper bag over their head that masks their true identity ... and it’s oppressive because they’re not being treated as a whole human being (Purvis, 2018).”

Based on research done by the Transamerica Center for Retirement Studies on caregiving experience,³⁹ among those who are not yet retired, LGBTQ+ people are more likely than non-LGBTQ+ people to be currently serving and/or have previously served as a caregiver (41%, 37%, respectively). About one in five of LGBTQ+ and non-LGBTQ+ people are currently caregivers (both 19%). 24% of LGBTQ+ people have been caregivers in the past compared with 19% of non-LGBTQ+ people. LGBTQ+ caregivers are also somewhat more likely than non-LGBTQ+ caregivers to have made some type of work adjustment as a result of caregiving (81%, 78%, respectively). Some portion of the difference can be explained by LGBTQ+ individuals serving as caregivers for chosen family or other members of the LGBTQ+ population who are unable to or do not feel comfortable receiving care through more formal senior living options.

Figure 5
CAREGIVING EXPERIENCE



Transamerica Center for Retirement Studies, 2022³⁹

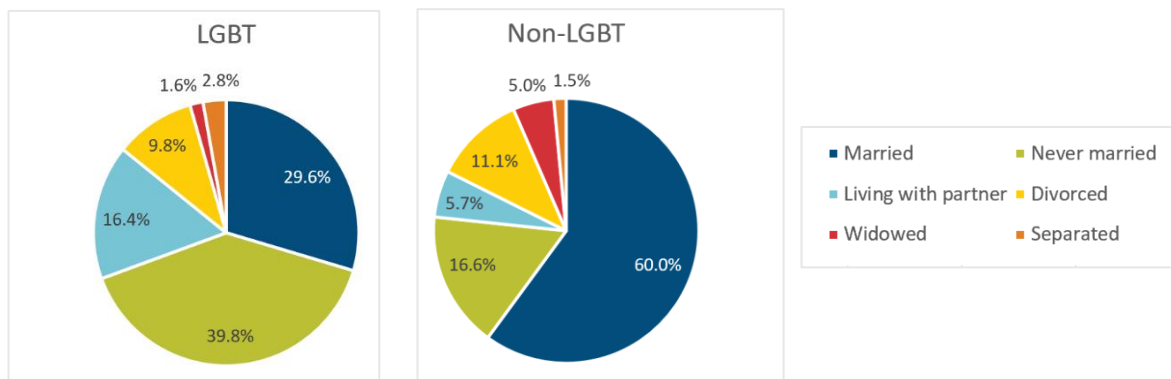
Access to housing and care becomes particularly important when aging LGBTQ+ adults rely on ‘chosen family’ for social support or lack such support entirely.²¹

5.3 SOCIAL SUPPORT

Social support plays a vital role in the well-being of LGBTQ+ older adults, influencing their resilience and quality of life. However, many in this demographic experience social isolation, which can have significant mental and emotional impacts.

Spouses and partners are a common source of support and connection in the general aging population. Obergefell vs. Hodges, decided by the U.S. Supreme Court in 2015, holds significance for social support of the LGBTQ+ population. It legalized same-sex marriage nationwide, providing legal recognition of LGBTQ+ relationships. By affirming equal rights for LGBTQ+ individuals and couples, the decision in 2015 helped reduce stigma and discrimination, contributing to a positive shift in societal acceptance and understanding of LGBTQ+ issues. The following figure illustrates marital status statistics four years following the legalization of same-sex marriage. Research shows that LGBT adults are less likely to be married or living with a partner (46.0%) than their non-LGBT counterparts (65.7%). Provided Obergefell remains intact the authors may anticipate further evolution in these statistics.

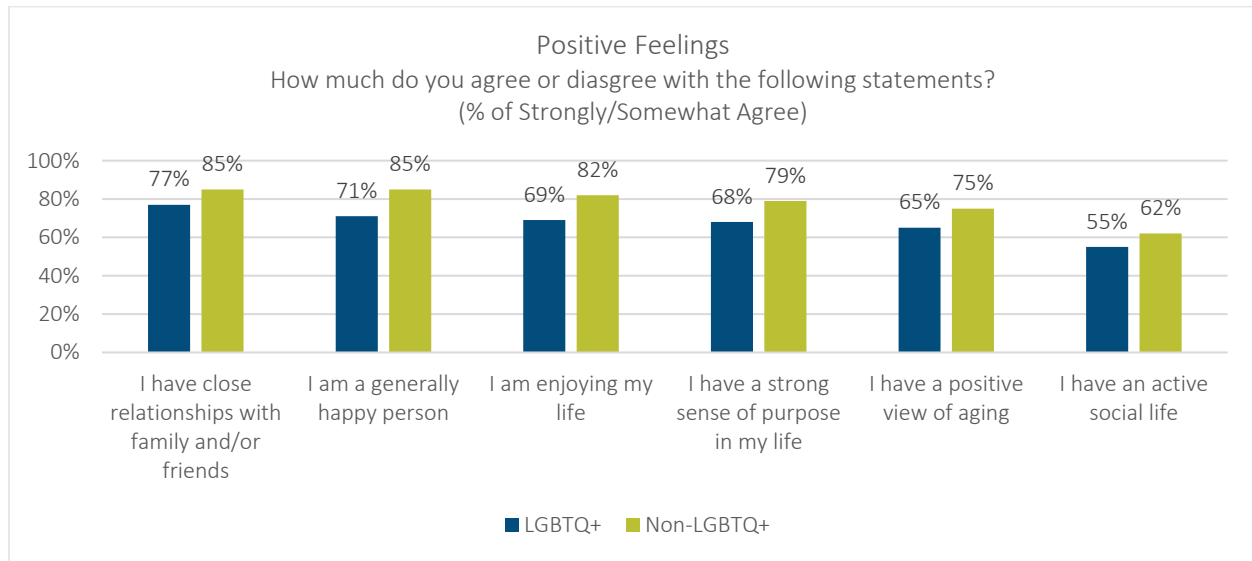
Figure 6
MARITAL STATUS



The Economic Well-Being of LGBT Adults in 2019, Williams Institute⁴⁰

Based on research done by the Transamerica Center for Retirement Studies on the outlook of life,³⁹ while many people have a positive outlook on life, non-LGBTQ+ people are more likely than LGBTQ+ people to say they have close relationships with family and/or friends (85%, 77%, respectively), report being generally happy people (85%, 71%), and indicate that they are enjoying life (82%, 69%).

Figure 7
OUTLOOK ON LIFE: POSITIVE FEELINGS



Transamerica Center for Retirement Studies, 2022³⁹

Non-traditional legal partnerships, such as same-sex marriages or domestic partnerships, represent fundamental sources of support for many LGBTQ+ individuals, yet they are often overlooked or disregarded in mainstream discourse. Understanding the role of these partnerships in providing social support is essential for recognizing the diverse ways in which LGBTQ+ individuals form and maintain supportive networks which offer a sense of belonging and emotional sustenance. In addition, relationships formed with other LGBTQ+ individuals and supportive groups provides essential connections for sharing experiences and receiving support. The following are key components of this theme:

- **Importance of Community Connections:** Association with other LGBTQ+ individuals and supportive communities can provide emotional support and a sense of belonging.
- **Family Dynamics:** The role of biological families can range from robust support to estrangement or lack of understanding from family members, providing one reason many develop chosen families for support.
- **Impact of Social Isolation:** Social isolation is a significant issue, especially for those without children or traditional family structures, leading to heightened risks of loneliness and depression.
- **Role of LGBTQ+ Organizations and Groups:** LGBTQ+ organizations and informal social groups often provide essential support networks, offering spaces where individuals can share experiences and receive support.
- **Digital Connectivity:** For some, digital platforms and social media offer a means to connect with supportive communities, especially important for those living in isolated areas or with mobility issues.
- **Intersectional Analysis:** Individuals who lack family support or who are estranged from their biological families often rely on chosen families or LGBTQ+ community networks, which may vary in availability and support depending on geographic location and cultural context.

Case Studies and Examples³

“One noted that she and her siblings had taken care for their father, who aged in place and died at home. She said, ‘We took care of him for the last two years of his life.’ I said to him, ‘Daddy, what am I going to do? I don’t have three daughters.’ He said, ‘God help you, sweetheart.’”

While much has been written about the kind of social support needed by LGBTQ+ elders in literature, there is an equal amount of focus on the magnitude of resilience in this population. In fact, researchers have posited that resilience is an expectation rather than the outcome of interrelated factors affecting this population.

5.4 RESILIENCE THROUGH CHANGE

Resilience is observed in many LGBTQ+ older adults, shaped by their experiences of overcoming adversity throughout their lives. This resilience manifests in various forms to support navigating the particular challenges of aging. Indeed, this resilience is not just a characteristic, but often a necessity born from persistent discrimination and marginalization, requiring individuals to continually adapt and persevere in the face of societal and systemic challenges. The following are key components of this theme:

- **Coping with Discrimination:** The ability to deal with and overcome past and present discrimination is a significant aspect of LGBTQ+ resilience.
- **Adaptability:** Many LGBTQ+ older adults have learned to adjust to changing social attitudes and legal landscapes, exhibiting flexibility and resourcefulness.
- **Community Building:** An important component of resilience is the ability to build and maintain supportive communities, which offer mutual aid, emotional support, and a sense of belonging.
- **Positive Identity Formation:** Despite societal challenges, many LGBTQ+ older adults have forged strong, positive identities, which contribute to their overall resilience.
- **Legacy of Activism:** The history of social action in the LGBTQ+ population, including the fight for rights and recognition, has imbued many older adults with a sense of purpose and resilience.
- **Intersectional Analysis:** Resilience can manifest differently across various subgroups within the LGBTQ+ population, with some, such as transgender individuals, facing unique challenges that require distinct coping strategies.

Case Studies and Examples³⁰

“As a black gay man, I’ve learned that you have to fight the fear. The fear of life. The fear of existing in the world. My creative energy and art have made me fearless.” - Beau, 59

“I am shocked I made it. I proudly see myself as someone who lived the life.” - Tina, 60+

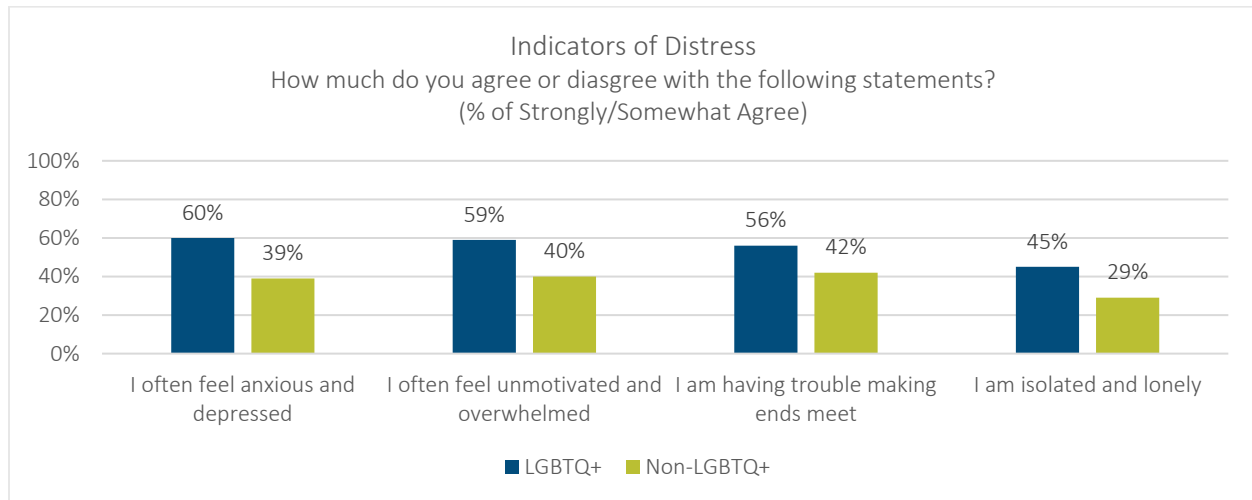
Exploring resilience in LGBTQ+ older adults highlights their capacity to overcome adversity and sets the stage for a deeper examination of mental health within this population.

5.5 MENTAL HEALTH

Mental health issues, such as depression and anxiety, have been reported across multiple studies to be more prevalent among LGBTQ+ older adults, potentially due to the cumulative effects of discrimination, marginalization, and social isolation.

As per research done by the Transamerica Center for Retirement Studies on life outlook,³⁹ LGBTQ+ people are more likely to be experiencing distress. LGBTQ+ people are more likely than non-LGBTQ+ people to agree that they often feel anxious and depressed (60%, 39%), often feel unmotivated and overwhelmed (59%, 40%), have trouble making ends meet (56%, 42%), and are isolated and lonely (45%, 29%).

Figure 8
OUTLOOK ON LIFE: INDICATORS OF DISTRESS



Transamerica Center for Retirement Studies, 2022³⁹

The following are key components of this theme:

- **Cumulative Stress:** The accumulation of stress from lifelong experiences of discrimination and stigmatization can contribute to mental health issues among LGBTQ+ older adults.
- **Social Isolation:** Social isolation, often a result of estrangement from biological families or the loss of a partner, can exacerbate mental health challenges.
- **Barriers to Mental Health Services:** Accessing culturally competent mental health providers who understand and cater to the distinct experiences of LGBTQ+ older adults can be difficult.
- **Impact of Aging on Mental Health:** The natural challenges of aging, such as declining physical health and independence, can intensify existing mental health issues.
- **Intersectionality of Identities:** Mental health concerns can be more pronounced in LGBTQ+ older adults who also belong to other marginalized groups and face compounded discrimination and social challenges, such as racially or ethnically diverse LGBTQ+ individuals, or those living in poverty.

Case Studies and Examples^{3,33}

“Advocates and researchers suggest that access to services is made more difficult by mental health conditions and conversely, a lack of access compounds the impacts of these conditions. Living alone, like many LGBT elders do due to lack of family connections, increases social isolation and loneliness, significant predictors of depression among older adults.”

“A fear of in-home services by people outside of the gay community arose: ‘I think one issue would be if you thought that somebody was coming who was not in the gay community, you’re going to have to de-gay your house.’”

An integral aspect of mental health is dignity, which ties into the delicate issue of end-of-life preparation. Current discourse suggests that mental wellbeing is intricately linked to end-of-life considerations.

5.6 END-OF-LIFE PREPARATION

End-of-life preparations for LGBTQ+ older adults are often complicated by concerns about the availability of supportive and inclusive care services, and potential discrimination in end-of-life settings, such as hospitals, nursing facilities, hospice, religious institutions, and funeral venues. This theme encompasses the particular challenges faced in ensuring that final wishes are respected. The following are specific components of this theme:

- **Advance Care Planning:** Many LGBTQ+ older adults have experienced difficulties in advance care planning, including legal documentation and ensuring their wishes are respected, especially in healthcare decisions.
- **Concerns About Inclusive Care:** There is often a concern that end-of-life care settings and providers may not be inclusive or respectful of their identities, relationships, and preferences.
- **Impact of Past Discrimination:** Previous experiences can lead to apprehension about the level of care and dignity they will receive in their final days.
- **Relationship Recognition:** LGBTQ+ elders express doubt about whether their relationships and chosen families will be legally recognized and allowed to be involved in end-of-life decisions.
- **Communication with Providers:** Effective communication with healthcare providers about end-of-life wishes can be challenging, particularly if there is a lack of cultural competence regarding LGBTQ+ issues.
- **Intersectional Analysis:** Transgender and non-binary individuals may face additional concerns about their gender identity or name being respected in end-of-life care and funeral arrangements.

Case Studies and Examples¹⁷

"One GBM (Gay or Bisexual Man) said that he was ‘shocked into planning by the death of his friend,’ and another recalled ‘families of friends came in and took everything’—something he hoped to avoid. An LBW (Lesbian or Bisexual Woman) echoed this view having ‘seen first-hand what happens when a long-lost relative shows up and makes a claim on the estate.’ Several LBW (Lesbian or Bisexual Women) and transgender participants spoke of health crises (e.g., cancer diagnoses, heart attack) prompting their completion of the necessary documents to provide direction and structure at life’s end."

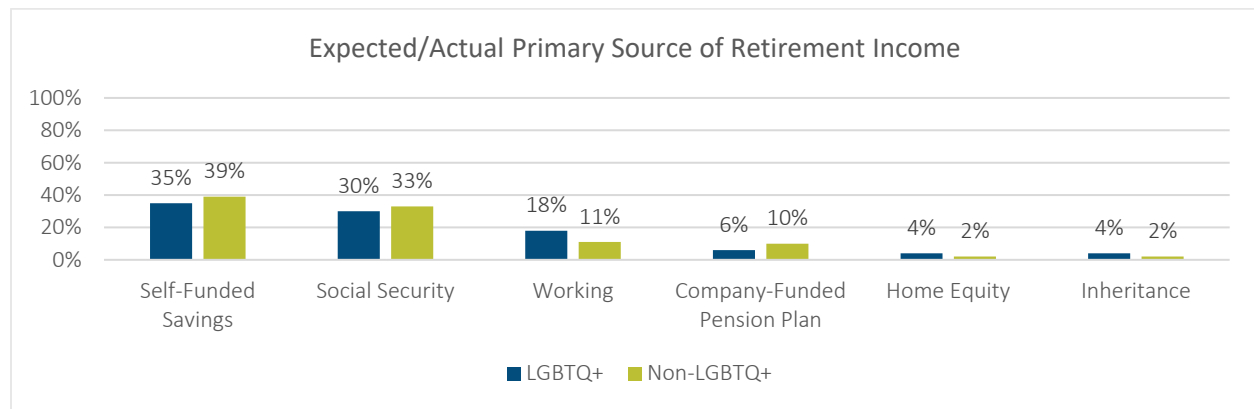
Preparedness encompasses not only an end-of-life plan or emotional and physical readiness but also the assurance of financial security and stability in life's final years.

5.7 FINANCIAL HEALTH AND PLANNING

Financial challenges are a significant concern for many LGBTQ+ older adults. These issues can stem from a lifetime of underemployment, unemployment, and potential housing insecurity, all of which are often closely linked to sexual orientation or gender identity.

Based on research done by the Transamerica Center for Retirement Studies³⁹ on retirement income, LGBTQ+ and non-LGBTQ+ people similarly rely on or expect to rely on self-funded savings (i.e., 401(k), 403(b), IRA, and other savings and investments) as their primary source of retirement income (35%, 39%, respectively). About a third of LGBTQ+ and non-LGBTQ+ people also cite Social Security as a primary source of retirement income (30%, 33%). However, LGBTQ+ people are more likely to cite income from working as a primary source of retirement income compared with non-LGBTQ+ people (18%, 11%).

Figure 9
EXPECTED PRIMARY SOURCE OF RETIREMENT INCOME



Transamerica Center for Retirement Studies, 2022³⁹

Note: Responses not shown for “Other” (LGBTQ+: 1%, Non-LGBTQ+: 2%) or “Income from my business (among business owners)” (0% for both groups).

The following are key components of this theme:

- **Employment Discrimination:** Many LGBTQ+ older adults have faced discrimination in the workplace, negatively impacting career advancement and earnings over their lifetime.
- **Retirement Savings and Planning:** Due to potential gaps in employment or lower earnings, some LGBTQ+ older adults may find themselves less financially prepared for retirement than their non-LGBTQ+ counterparts.
- **Housing Affordability:** Financial constraints can limit housing options, making it challenging to find affordable and LGBTQ+-friendly housing, particularly in retirement.
- **Healthcare Costs:** Managing healthcare costs, especially for those with chronic conditions or those requiring gender-affirming treatments, can be a significant financial burden, exacerbating potentially already challenging financials.
- **Social Safety Net Access:** Navigating and accessing social safety nets, including pensions, social security, and other benefits, can be more complex for LGBTQ+ older adults, particularly for those in non-traditional relationships or living arrangements.
- **Intersectional Analysis:** Financial challenges are often intertwined with systemic issues like gender, race, religion, and sexual orientation discrimination in the workplace, impacting long-term fiscal stability.

Case Studies and Examples Error! Bookmark not defined.17

“Both LBW (Lesbian or Bisexual Women) and transgender participants addressed the financial challenges of their lives explicitly tied to their gender identity and sexual orientation. One transgender participant proclaimed that she was “less financially prepared than friends who didn’t have an issue called ‘being trans’ that ruined—interfered with their life.” Others drew attention to more systemic issues such as the “two-tiered system, where if you have the resources,” you can be more fully engaged in life (and prepare for end-of-life). Transgender groups mentioned underemployment, unemployment, and homelessness. LBW participants similarly noted that “resources are fundamentally lacking for lesbians”—unlike GBM (Gay or Bisexual Men) as several participants noted. Some financial concerns derived from “choices made in life that leave us relatively poor in old age” (e.g., engaging in poorly paid non-profit work). One woman expressed concern over her financial status following her partner’s death saying, “I can’t afford to stay in our house after her death.”

While financial challenges are evident for many LGBTQ+ elders, experiences vary across individuals. Such variations in lived experience highlight the diverse population contributing to LGBTQ+ culture.

5.8 LGBTQ+ CULTURE

The singular experiences and histories of LGBTQ+ older adults, including pivotal events and shifting mindsets, can shape their perspectives on aging, community involvement, and end-of-life care. The following are key components of this theme:

- **Historic Context:** Many LGBTQ+ older adults have lived through major historic moments, such as the Stonewall riots and the HIV/AIDS crisis, which have shaped their identity and community ties.
- **Cultural Shifts:** Shifting cultural attitudes towards LGBTQ+ rights and acceptance over the decades have influenced how these individuals view and experience aging.
- **LGBTQ+ Communities:** The LGBTQ+ population itself has played a significant role in providing a culture of support, advocacy, and belonging, although experiences within the population can vary.
- **Inter-Generational Differences:** There are notable differences in the experiences and attitudes of older and younger LGBTQ+ individuals, reflecting the changing social landscape.
- **Ageism within LGBTQ+ Communities:** Ageism can be a challenge within some segments of the LGBTQ+ population, where youth may be prioritized, leading to feelings of isolation for older adults.

LGBTQ+ culture serves as a backdrop for the ongoing narrative of gender identities beyond the binary, illustrating how evolving understanding of gender identity collectively forge a path toward greater inclusivity and self-expression within the population.

5.9 GENDER IDENTITY BEYOND THE BINARY

The recognition of gender identities beyond the traditional binary highlights unique challenges faced by transgender, non-binary, and gender non-conforming older adults. This demographic contends with a multitude of complexities as they navigate the aging process. The following are key components of this theme:

- **Cultural Competency in Healthcare and Services:** A significant barrier is the lack of cultural competency in healthcare and service provision. Transgender and non-binary individuals often encounter healthcare professionals who are not well-versed in their specific needs, leading to inadequate or inappropriate care.
- **Social and Institutional Discrimination:** Systemic discrimination remains a pervasive issue. This can manifest in various forms, from outright denial of services to subtler forms of bias, affecting the quality of care and support received.

- **Housing Insecurity and Discrimination:** Housing insecurity is a critical concern. Gender-expansive individuals may face discrimination when seeking senior housing, with fears of being forced to conform to traditional gender norms or being mistreated due to their gender identity.
- **Legal and Policy Barriers:** Legal and policy barriers can complicate matters further. Issues like name changes, gender marker changes on official documents, and legal recognition of relationships can impact everything from housing rights to medical decisions.
- **Unique Health Needs:** The health requirements of transgender and non-binary individuals can be complex, including considerations related to hormone therapy, surgeries, and mental health support. These needs are often not well understood or accommodated in typical aging services.

Case Studies and Examples^{17,12}

“Another transgender woman spoke of a friend who ‘was buried as a man; the female persona disappeared entirely,’ and she wanted to ensure this would not happen to her.”

“The anxiety is really that, because people have usually experienced homophobia or trans phobia in their lives, they are concerned when you go into the care home, you are losing control over what people you’re with. You’re going to be with other residents who may be anti gay or anti trans. You are going to be with staff who may be inadequately trained or indeed may believe that your sexual orientation or the fact that you’re gender has been reassigned is wrong. And they may conclude that they now have to go back in the closet (SCIE, 2021).”

Societal recognition and tolerance of gender identities beyond the binary continues to evolve and expand. Additional research may provide insights to increase understanding of the diversity of identities within the LGBTQ+ population. However, this is one of a number of gaps found in the current research literature.

Section 6 Gaps in LGBTQ+ Research

In the landscape of LGBTQ+ studies, significant progress has been made in understanding the diverse experiences of this population. However, as the field matures, it becomes increasingly apparent that there are substantial gaps in the collective knowledge. Identifying these gaps may offer perspective on critical areas where the collective understanding remains superficial or skewed. The existing literature is also a rich source of information on how the collective of researchers and stakeholders speak about gaps and opportunities for future research.

Currently available research studies are often broadly focused on experiences across LGBTQ+ identity, leaving out nuanced details and specific subgroup experiences. Key areas where research is lacking are listed below, found across the literature included in this report. These range from methodological considerations, such as the complexities of data collection, to substantive content areas, including the intersectionality of identities, mental health, and the experiences of subpopulations. By highlighting these gaps, the authors aim to chart a path for future research that is more inclusive, detailed, and representative of the diversity within the LGBTQ+ population.

- **Complexities in SOGI Data Collection:** Although there is a growing trend towards including Sexual Orientation and Gender Identity (SOGI) questions in demographic surveys, methodologies that sensitively and accurately gather this data is sometimes missing. This involves not only the design of the questions but also training practitioners in culturally sensitive approaches to create an emotionally safe environment for LGBTQ+ individuals, thereby enhancing the quality and reliability of the data collected.
- **Diversity within the LGBTQ+ Population:** Research has primarily focused on gay and lesbian older adults without considering other sexuality and gender identities. The distinct challenges and life experiences of bisexual, transgender, queer, intersex, and asexual seniors remain largely unexplored which decreases the collective understanding of the entire population.
- **Intersectionality:** The concept of intersectionality is valuable in understanding the multifaceted identities of LGBTQ+ older adults whose experiences are shaped not only by their SOGI but also by their race, ethnicity, socioeconomic status, and ability. Understanding the nuances of these intersections would provide greater clarity on the differences in lived experience.
- **Longitudinal Studies:** Current cross-sectional research provides snapshots of the lives of LGBTQ+ older adults captured in a single moment. Longitudinal studies could offer a fuller view into how needs, experiences, and resilience evolve and interact over time.
- **Non-Urban Populations:** LGBTQ+ seniors in rural or non-urban settings are rarely included in current research. Their experiences may differ significantly from their urban counterparts, particularly in terms of service availability, social support, and community acceptance. Investigating these differences would improve understanding of the different environments they navigate.
- **Caregiving and Family Dynamics:** The roles of LGBTQ+ older adults as caregivers, along with their familial interactions, present a complex dynamic. Further research could delve into how these roles are navigated, considering factors like chosen families, biological family relationships, and societal expectations. This would provide a fuller awareness of their support networks and emotional landscapes.
- **Mental Health:** While some studies have touched on mental health issues within this demographic, the research is limited. More comprehensive research could include examining prevalence rates, identifying risk and protective factors, and understanding the specific mental health challenges faced by LGBTQ+ older adults.
- **Resilience and Protective Factors:** The LGBTQ+ population has a reputation for strength through adversity which is mentioned in multiple studies. The focus of research could expand to better explore resilience and protective factors, potentially identifying coping mechanisms that enable positive aging experiences.
- **Policy and Service Provision:** There is little research on policy effectiveness and service provision. This includes evaluating current interventions aimed at improving the lives of LGBTQ+ older adults and identifying barriers to accessing culturally competent care and support.

- ***Hidden Populations:*** The reluctance of some LGBTQ+ older adults to participate in research, driven by fears of discrimination or stigma, poses a challenge. Furthermore, several of the studies included in this analysis mention the exclusion of sections of the population often due to the design of their own research or studies they have analyzed. Research focused on reaching these subgroups and developing strategies to engage them may be challenging but is needed for a more accurate view of the entire population.

Section 7 Conclusion

This review of select studies on LGBTQ+ older adults reveals a multifaceted landscape of experiences, challenges, and resilience against a backdrop of both discrimination as well as evolving societal acceptance. The studies included in this systematic review provide a broad understanding of this population in the context of aging and retirement.

The variation in methodologies across the selected studies, encompassing both qualitative and quantitative approaches, enriches the analysis, allowing for a nuanced understanding of both subjective experiences and objective realities. Key insights identified through thematic analysis underscore how pervasive discrimination and marginalization throughout life impacts multiple aspects of life in old age. Across the selected studies, common themes emerged which include:

- Discrimination and marginalization in healthcare, employment, and housing that occurs throughout a lifetime can be amplified by the intersection with other personal characteristics (such as race, socio-economic background, nationality) and contribute to challenges with housing, finances, and health in later life.
- Housing and healthcare access are a concern for many LGBTQ+ seniors due to both anticipated and experienced discrimination as well as a lack of culturally sensitive providers and environments.
- Social support can prevent isolation and provide a network to help with physical and mental health. This is often lacking for LGBTQ+ older adults who may have broken family ties and a lack of connection to other individuals and communities, however others have developed strong connections to chosen families and peer groups.
- Resilience is a common theme as well, calling out that many LGBTQ+ elders demonstrate an ability to adapt and cope with adverse situations, which may help in navigating the challenges of aging.
- End-of-life preparation is complicated by concerns about inclusive and non-discriminatory services, causing some LGBTQ+ adults to avoid planning while others prepare thoroughly in anticipation of problems.
- LGBTQ+ adults frequently experience mental health issues, often attributed to lifelong discrimination and isolation. The lack of culturally sensitive mental health care is a concern.
- Financial health and planning for LGBTQ+ elders are negatively impacted by a lifetime of underemployment, unemployment, and potential housing insecurity, as well as challenges related to the legal status of relationships.
- LGBTQ+ culture is not monolithic, and yet is mentioned in the research as a potential impetus to a sense of community to support older LGBTQ+ adults, created by shared history and events, but also a cause of concern when values diverge or when no community is available.
- Gender identity beyond the binary is increasingly recognized and mentioned in the literature and yet the research does not provide clear insight into the additional identities and specific complexities in the aging process for transgender, non-binary, and gender non-conforming older adults.

While the review provides valuable insights, it also highlights significant gaps in the existing literature. The narrow focus on certain identities, such as gay and lesbian individuals, often overlooks the distinct experiences of bisexual, transgender, queer, intersex, and asexual seniors. Additionally, complexities in data collection related to Sexual Orientation and Gender Identity (SOGI) need further attention to improve the reliability and inclusivity of research.

Future studies could address these gaps by incorporating more diverse identities and experiences, employing culturally sensitive methodologies, and expanding the scope to include international perspectives. In addition, these findings are based on the current legislative environment, which continues to evolve. Therefore, research efforts must continue to be informed by the effects of any future legislative changes impacting LGBTQ+ older adults. In conclusion, the findings of this review underscore the ongoing need for a holistic understanding of the socio-cultural and economic factors affecting the aging and retirement experience of LGBTQ+ adults.

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Appendix A: List of Acronyms

1. **LGBT / LGBT+ / GLBT / LGBTQ+ / LGBTQIA+**: Acronyms for Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, and Asexual. These terms, while not interchangeable, are commonly used umbrella terms to describe the population in research. When referencing research, the researchers' acronym was utilized and otherwise used "LGBTQ+".
2. **LGB**: An acronym for Lesbian, Gay, and Bisexual. This term is often used in research excluding transgender participants (among other identities).
3. **HIV / AIDS**: Acronyms for Human Immunodeficiency Virus and Acquired Immunodeficiency Syndrome, respectively. HIV is a virus that can lead to AIDS, a condition where the immune system is severely weakened.
4. **SOGI**: An acronym for Sexual Orientation and Gender Identity. It refers to the aspects of identity related to a person's sexual attraction and their gender experience or expression.
5. **HEPM**: An acronym for Health Equity Promotion Model. This is a framework used in public health to explore how various factors contribute to the health outcomes of specific populations, focusing on achieving equity in health.
6. **GBM**: An acronym for Gay or Bisexual Men.
7. **LBW**: An acronym for Lesbian and Bisexual Women.
8. **COVID-19**: An acronym for Coronavirus Disease of 2019. It refers to the infectious disease caused by the most recently discovered coronavirus.
9. **SAGE**: An acronym for Services & Advocacy for GLBT Elders. It is an organization dedicated to advocacy and services for LGBT elders, aiming to improve their quality of life.

References

- ¹ Flores, A. R., & Conron, K. J. (2023, December). Adult LGBT Population in the United States. *Williams Institute, UCLA School of Law*. <https://williamsinstitute.law.ucla.edu/publications/adult-lgbt-pop-us/>
- ² SAGE & National Resource Center on LGBT Aging. (2021, March). Facts on LGBTQ+ Aging. <https://www.sageusa.org/resource-posts/facts-on-lgbt-aging/>
- ³ Movement Advancement Project & SAGE. (2017). Understanding Issues Facing LGBT Older Adults. <https://www.lgbtmap.org/file/understanding-issues-facing-lgbt-older-adults.pdf>
- ⁴ Jones, J. M. (2023, February 22). U.S. LGBT Identification Steady at 7.2%. *Gallup*. <https://news.gallup.com/poll/470708/lgbt-identification-steady.aspx>
- ⁵ National Academies of Sciences, Engineering, and Medicine; Division of Behavioral and Social Sciences and Education; Committee on National Statistics; Committee on Measuring Sex, Gender Identity, and Sexual Orientation; Becker T, Chin M, Bates N, editors. Measuring Sex, Gender Identity, and Sexual Orientation. Washington (DC): National Academies Press (US); 2022 Mar 9. Summary. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK581047/>
- ⁶ Gambold, L. L. (2022). Aging out: Place and sexuality. *Sexualities*, 0(0). <https://doi.org/10.1177/13634607211060833>
- ⁷ Greenesmith, H. (2017, May 24). New Report: LGBT Elders Show Resilience Despite Barriers To Successful Aging. *HuffPost*. Retrieved from https://www.huffpost.com/entry/new-video-report-lgbt-elders-show-resilience-despite_b_5925dcbfe4b090bac9d46b10
- ⁸ Croghan, Catherine & Moone, Rajean & Olson, Andrea. (2015). Working With LGBT Baby Boomers and Older Adults: Factors That Signal a Welcoming Service Environment. *Journal of Gerontological Social Work*. 58. 10.1080/01634372.2015.1072759.
- ⁹ Gabrielson, M. L. (2011). “We have to create family”: Aging Support Issues and Needs Among Older Lesbians. *Journal of Gay & Lesbian Social Services*, 23(3), 322-334. <https://doi.org/10.1080/10538720.2011.562803>
- ¹⁰ Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77–101. <https://doi.org/10.1191/1478088706qp063oa>
- ¹¹ Henry, R. S., Perrin, P. B., Coston, B. M., & Witten, T. M. (2019). Transgender and gender non-conforming adult preparedness for aging: Concerns for aging, and familiarity with and engagement in planning behaviors. *International Journal of Transgender Health*, 21(1), 58–69. <https://doi.org/10.1080/15532739.2019.1690612>
- ¹² Concannon, L. (2022) Pioneering Safe & Inclusive LGBT Specific Retirement Accommodation. Exploring Models in the USA, UK, & Spain. Available at SSRN: <https://ssrn.com/abstract=4258086> or <http://dx.doi.org/10.2139/ssrn.4258086>
- ¹³ Craig C., and Greenwald L., “Retirement Confidence Survey and the LGBTQ Community,” EBRI Issue Brief, no. 560 (Employee Benefit Research Institute, June 14, 2021)
- ¹⁴ Nationwide Retirement Institute. (2022) *LGBTQ+ finances flash poll findings* (NFM- 22096AO). Nationwide Mutual Insurance Company. Retrieved from <https://news.nationwide.com/lgbtq-community-falling-behind-on-financial-security/>
- ¹⁵ B. Savage & M. N. Barringer (2021) The (minority) stress of hiding: the effects of LGBT identities and social support on aging adults’ concern about housing, *Sociological Spectrum*, 41:6, 478-498, DOI: 10.1080/02732173.2021.2010627

-
- ¹⁶ Caceres, B. A., Travers, J., Primiano, J. E., Luscombe, R. E., & Dorsen, C. (2020). Provider and LGBT Individuals' Perspectives on LGBT Issues in Long-Term Care: A Systematic Review. *The Gerontologist*, 60(3), e169–e183. <https://doi.org/10.1093/geront/gnz012>
- ¹⁷ de Vries, B., Gutman, G., Humble, Á., Gahagan, J., Chamberland, L., Aubert, P., Fast, J., & Mock, S. (2019). End-of-Life Preparations Among LGBT Older Canadian Adults: The Missing Conversations. *International Journal of Aging and Human Development*, 88(4), 358–379. <https://doi.org/10.1177/0091415019836738>
- ¹⁸ Fredriksen Goldsen, K., & de Vries, B. (2019). Global Aging with Pride: International Perspectives on LGBT Aging. *International Journal of Aging and Human Development*, 88(4), 315–324. <https://doi.org/10.1177/0091415019837648>
- ¹⁹ Putney, J. M., Keary, S., Hebert, N., Krinsky, L., & Halmo, R. (2018). "Fear Runs Deep:" The Anticipated Needs of LGBT Older Adults in Long-Term Care. *Journal of Gerontological Social Work*, 61(8), 887–907. <https://doi.org/10.1080/01634372.2018.1508109>
- ²⁰ Fredriksen-Goldsen, K. I., Jen, S., Bryan, A. E. B., & Goldsen, J. (2018). Cognitive Impairment, Alzheimer's Disease, and Other Dementias in the Lives of Lesbian, Gay, Bisexual and Transgender (LGBT) Older Adults and Their Caregivers: Needs and Competencies. *Journal of Applied Gerontology: the official journal of the Southern Gerontological Society*, 37(5), 545–569.
- ²¹ Cantave, Cassandra. Dignity 2022: The Experience of LGBTQ Older Adults. Washington, DC: AARP Research, June 2022. <https://doi.org/10.26419/res.00549.001>
- ²² Carrillo, A. (2022). A Glimpse at the Financial Journey to Retirement for LGBTQ+ People in the United States. SOA. Retrieved from <https://www.soa.org/4aa620/globalassets/assets/files/resources/research-report/2022/age-ret-lgbtq-carrillo.pdf>
- ²³ Society of Actuaries Research Institute & Sexuality and Gender Alliance of Actuaries. (n.d.). Aging and Retirement Issues for LGBTQ+ People Essay Collection. <https://www.soa.org/resources/research-reports/2022/2022-aging-retirement-lgbtq/>
- ²⁴ Hughes, M., & King, A. (2018). Representations of LGBT ageing and older people in Australia and the UK. *Journal of Sociology*, 5. <https://doi.org/10.1177/1440783317721350>
- ²⁵ TNL Community Fund. (2019). Social networks and social connections among lesbian, gay, bisexual and transgender (LGBT) people aged 50 and over [PDF file]. Retrieved from https://www.tnlcommunityfund.org.uk/media/documents/ageing-better/Ageing_better_LGBT_social_networks.pdf?mtime=20190723154919
- ²⁶ Stinchcombe, A., Smallbone, J., Wilson, K., & Kortess-Miller, K. (2017). Healthcare and End-of-Life Needs of Lesbian, Gay, Bisexual, and Transgender (LGBT) Older Adults: A Scoping Review. *Geriatrics*, 45. Retrieved from <https://semanticscholar.org/paper/ab1adc04013dad40809ced8e988af161cff887c8>
- ²⁷ Adams, M., & Tax, A. D. (2017). Assessing and meeting the needs of LGBT older adults via the Older Americans Act. *LGBT Health*, 4(6), 389–393.
- ²⁸ Foglia, M. B., & Fredriksen-Goldsen, K. I. (2014). Health Disparities among LGBT Older Adults and the Role of Nonconscious Bias. *The Hastings Center report*, 44 Suppl 4(0 4), S40–S44. <https://doi.org/10.1002/hast.369>
- ²⁹ MacCarthy, S., Saunders, CL., Elliott, MN. (2022) Sexual minority adults in England have greater risk of long-term mental health problems: Variation by age, socioeconomic status and race/ethnicity. *LGBT Health*
- ³⁰ Emler C. A. (2016). Social, Economic, and Health Disparities Among LGBT Older Adults. *Generations* (San Francisco, Calif.), 40(2), 16–22
- ³¹ Watson, S., Casey, L., Medina, C., & Mahowald, L. (2023). The LGBTQI+ Economic and Financial (LEAF) Survey: Understanding the Financial Lives of LGBTQI+ People in the United States. <https://www.mapresearch.org/file/MAP-LEAF-Survey-Report-2023.pdf>

-
- ³² Herrick, A.L., Stall, R., Goldhammer, H. *et al.* Resilience as a Research Framework and as a Cornerstone of Prevention Research for Gay and Bisexual Men: Theory and Evidence. *AIDS Behavior* 18, 1–9 (2014). <https://doi.org/10.1007/s10461-012-0384-x>
- ³³ Bradford, J. B., Putney, J. M., Shepard, B. L., Sass, S. E., Rudicel, S., Ladd, H., & Cahill, S. (2016). Healthy Aging in Community for Older Lesbians. *LGBT Health*, 3(2), 109–115. <https://doi.org/10.1089/lgbt.2015.0019>
- ³⁴ Fredriksen-Goldsen K. I. (2016). The Future of LGBT+ Aging: A Blueprint for Action in Services, Policies, and Research. *Generations* (San Francisco, Calif.), 40(2), 6–15.
- ³⁵ Otis, M.D., & Harley, D.A. (2016). The Intersection of Identities of LGBT Elders: Race, Age, Sexuality, and Care Network. *Handbook of LGBT Elders*. https://doi.org/10.1007/978-3-319-03623-6_5
- ³⁶ Medina, C., & Mahowald, L. (2023, January 12). Discrimination and Barriers to Well-Being: The State of the LGBTQ+ Community in 2022. *Center for American Progress*. <https://www.americanprogress.org/article/discrimination-and-barriers-to-well-being-the-state-of-the-lgbtqi-community-in-2022/>
- ³⁷ Formby, E. (2017). Exploring LGBT Spaces and Communities: Contrasting Identities, Belongings and Wellbeing (1st ed.). Routledge. <https://doi.org/10.4324/9781315747798>
- ³⁸ Gates, G. J. (2017, January 11). In U.S., More Adults Identifying as LGBT. Social & Policy Issues. *Gallup*. <https://news.gallup.com/poll/201731/lgbt-identification-rises.aspx>
- ³⁹ Transamerica Center for Retirement Studies. (2022). 23rd Annual Transamerica Retirement Survey.
- ⁴⁰ The Williams Institute. (2020). The Economic Well-Being of LGBT Adults in 2019

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Serving as the research arm of the Society of Actuaries (SOA), the SOA Research Institute provides objective, data-driven research bringing together tried and true practices and future-focused approaches to address societal challenges and your business needs. The Institute provides trusted knowledge, extensive experience and new technologies to help effectively identify, predict and manage risks.

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