

WELCOMING SOCIAL WELLNESS: A QUALITATIVE EXPLORATION OF OLDER GENDER AND SEXUALLY DIVERSE WOMEN'S WELLBEING AND SENSE OF BELONGING

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## FUNDED BY A LIVEABLE COMMUNITIES GRANT (2016/17)



#### AIM

This research sought to examine and understand GSD women's experiences and their health, aged-care and social support needs.







#### **SIGNIFICANCE**

Ageing individuals are often perceived as desexualised—asexual—and, when an individual's LGBTQ identity is added to the formula, it is argued that the effects of homophobia are compounded (Hinrichs & Vacha-Hasse, 2010).

Both staff and residents of aged care can be potential sources of sexuality-related discrimination (Johnson, Jackson, Arnette, & Koffman, 2005).

Hinrichs and Vacha-Hasse (2010) found that aged care staff members tended to rate scenarios relating to same-sex couples more negatively than opposite-sex couples.

Missing are tangible links between women's experiences with local health and social services and their overall wellbeing and social belonging, two known predictors of depression and suicidal ideation in older people.

#### **METHOD**

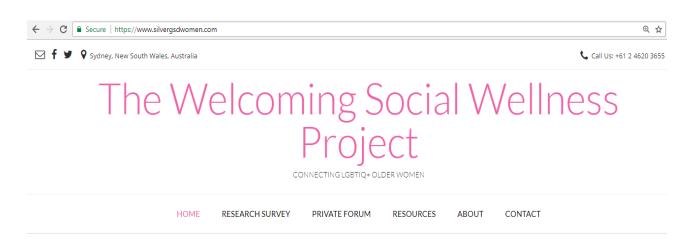
Interviews - 1 hr phone interview

Online forum and Facebook comments - project website and Facebook page

Open-ended survey questions - within and online quantitative questionnaire

The questions broadly explored the participants needs and experiences of engaging with health care, aged-care as well as support services.

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Welcome!

#### RECRUITMENT





Gave out postcards at a stall at the Sydney Gay and Lesbian Mardi Gras Fair Day -

Sent out postcards to healthcare services to display

Sent out postcards using the <u>AvantCard</u> displays across the state (12960 postcards were on display across 128 venues)

Advertised using LOTL (Lesbians on the Loose) newsletter's online platform - a link to the article advertising the study on LOTL can be found here: <a href="http://www.lotl.com/News/Seeking-Supportive-Services-for-Older-LGBT-Women-1862/">http://www.lotl.com/News/Seeking-Supportive-Services-for-Older-LGBT-Women-1862/</a>

**SAMPLE: INTERVIEWS** 

	Name	Sexual Identity	Gender Identity	Location	Metro/ Suburban/Regi onal
1	Beth	Gay	Woman	Gymea (Sutherland Shire)	Suburban
2	Carol	Heterosexual	Transwoman	Central Coast	Regional
3	Joan	Lesbian	Woman	Sydney City	Metro
4	Linda	Lesbian	Woman	Central Coast?	Regional
5	Melanie	Lesbian	Woman	Sydney City	Metro
6	Olive	Lesbian	Woman	Summer Hill (Inner West)	Suburban
7	Penny	Lesbian	Woman	Lismore (Northern Rivers region)	Regional
8	Ursla	Lesbian	Woman	Marrickville (Inner West)	Suburban

In total 8 interviews were undertaken with S&GD women over 55 years of age.

This included participants based in suburban (n=3), regional (n=3) and metropolitan areas (n=2) of NSW.

### SAMPLE: ONLINE FORUM & FACEBOOK

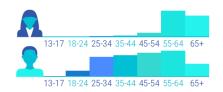
#### Total page likes



#### Audience by gender



#### Audience by age

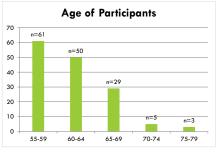


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### SAMPLE: ONLINE QUESTIONNAIRE N=148

Frequency	%
35	23.6
20	13.5
12	8.1
5	3.4
25	16.9
4	2.7
15	10.1
5	3.4
27	18.2
	35 20 12 5 25 4 15

Identified Sexuality	Frequency	Percentage
Lesbian	119	80.4
Bisexual	13	8.8
Straight/Heterosexual	6	4.1
Queer	6	4.1
Questioning	1	0.7
Other (Please Specify)	3	2.0



#### FINDINGS — MAIN THEMES

Heteronormative frameworks and practitioner comfort with GSD

Practitioners' and knowledge of gender and sexual diversity

Concerns about homophobia and aged-care services

Being and feeling connected

Social engagement



## HETERONORMATIVITY AND PRACTITIONER COMFORT WITH GSD

Two years ago I was diagnosed with breast cancer and underwent surgery, chemo and radiotherapy. I live on the North Coast of NSW. I found that information supplied and the support network available were focused on straight women (i.e., information for partners talked [about] husbands/wives, information re sexuality talked straight sex only and so on) ... I am surprised by the general lack of acknowledgement in areas outside the major cities. – Shirley

I was surprised by the level of obvious discomfort some medical staff had with my sexuality and felt I had to out myself about 300 times during the process. – Dafne

You always end up feeling like you have to explain stuff that you don't want to have to explain. Then there's all the aging stuff which is another layer on top of that as well. - Ursula

#### PRACTITIONERS' KNOWLEDGE OF GSD

Being a transsexual, or transgender individual, there's a profound void of knowledge out there to the extent that you may have to actually establish eye contact with the health profession[al] and say okay, this is how things have gone about, and this is how things happen, yadda, yadda, yadda. Are you on board or not? And essentially determine whether they're going to exhibit some sort of self - I wouldn't say self-deprecating, but some sort of discrimination...when they see a patient, particularly patients like me. Thinking oh, God, this is the last bloody thing I wanted to do today. We never studied bloody transgender when I was doing my RN. So, you get the vacant look of despair, and people think oh God, that's just what I needed today isn't it. You know, and you're the last one here too...You can read the expressions on their face, and you think okay, righto, it's relationship 101 is it? Okay, well let's get down and start dealing with this. A, are you interested. B, okay. - Carol

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## CONCERNS ABOUT HOMOPHOBIA AND AGED-CARE SERVICES

#### Home Based Care:

I've know of a couple of incidents where women have felt like they have to de-dyke their house before someone comes to help them out with the cleaning or help with some basic health issue. - Joan

#### Residential Aged Care Facilities:

I have...turned my mind to this matter...as a future challenge over recent years... just in a purely speculative way. No plans are laid, but I suspect if I ever found myself needing one of these facilities it would likely go badly for me... to the extent that I currently favour removing myself from the stage [ending my own life] prior to the question even arising in earnest. Some people seem to be discomforted by talk like that, which I never understand. - Aufgegeben

#### BEING AND FEELING CONNECTED

With [name of venue], I just like that there's a whole variety of people that come through, people who aren't very swishy, people who are older, people who are younger. So [name of venue] is really a complete, across the board, variety of lesbians or bisexuals or people who are just figuring themselves out. — Pru

I mean the Older Women's Network is a very good organisation I know. Yes ... my decision to move [closer to LGBTQ community] is based on my sexuality and also my experience of having to end what was a lovely relationship which became dreadful very quickly. So it is all related to being gay, yes. I wish I was straight. It would be much easier. - Beth

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#### BEING AND FEELING CONNECTED

My partner and I find it very difficult to meet other lesbians for social activities where we can exchange thoughts, ideas, experiences, have fun, dance, laugh, etc. We have several gay male friends and we love them however it would be nice to speak to other women of our age, etc. - Sally

The other thing is your lifestyle changes a bit because things take a bit longer to do and money's a bit shorter perhaps. You can't go out for meals so often or to the best restaurants that you might have gone to once or twice a year before. You kind of fall out of the social circles a bit. – Linda

Sometimes it was at the venues - I just have hearing problems now, so if something is too noisy at a venue, it's no use my going, because I can't follow a conversation. - Olive

#### SOCIAL ENGAGEMENT

Health

The older you [are you] become invisible. Some of my friends have been telling me this - which is fascinating - but it's true. You can walk through - walk along somewhere and be invisible. — Melanie

I'm not very much a group person, so I go to these things very occasionally. So they do offer a really good social network and if you wanted any information - like, recently there's a woman at Hurstville who felt isolated, so without identifying her, she sent something into Contact saying she'd like to meet up with other lesbians in the area. So it does serve a really good, valuable social and networking role. - Olive

What I'm saying is I think it would do a lot of services good to have either a continuing reference group - ongoing is the term they use these days - or at least to run consultations from time to time. - Eddi

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# The Welcoming Social Wellness Project

CONNECTING LGBTIQ+ OLDER WOMEN

HOME RESEARCH SURVEY PRIVATE FORUM RESOURCES ABOUT CONTACT

#### LGBTIQ-affirming Services

THE WELCOMING SOCIAL WELLNESS PROJECT > LGBTIQ-AFFIRMING SERVICES

Organisation	Website			
ACON	http://acon.org.au			
BLISS - The Blacktown Lesbian Information and Social Support	http://womensandgirls.org.au			
Sydney Gay, Lesbian, Bisexual and Transgender Psychology	http://www.sydneyglbtpsychology.com.au/			
LGBT friendly Health Professionals	http://www.sydneyglbtpsychology.com.au/glbt-friendly-health-professionals/			
Lesbian and bisexual friendly health professionals	http://www.doclist.com.au/lists/nsw			
Q life	https://qlife.org.au/			
Women's Health NSW	http://whnsw.asn.au/			
Australian Lesbian Medical Association	http://www.almas.org.au/			
Blacktown Women's and Girl's Health Centre	http://womensandgirls.org.au/			

### CONCLUSION

There is a clear need for:

Culturally safe & LGBTIQ+ training

Visible LGBTIQ+ affirming services/practitioners

Visible LGBTIQ+ friendly facilities

Accessible Events & Social Opportunities for Older Women

Thank you – <u>t.dune@westernsydney.edu.au</u> & <u>www.silvergsdwomen.com</u>