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Housing as a determinant of health for older LGBT Canadians: Focus group findings from a national housing study

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ABSTRACT

This article shares key focus group findings from a national study focused on the housing needs of older (55+) lesbian, gay, bisexual, and transgender (LGBT) Canadians. LGBT populations have and continue to face systemic discrimination and barriers to appropriate housing across the life course, and yet little attention has been given to solutions. Many older LGBT adults live alone, face poverty, and have limited familial supports which impact on their housing options. The purpose of this research was to examine how the housing needs of older LGBT Canadians are addressed at community, organizational, and policy levels. Focus group participants in five Canadian provinces were asked to describe their experiences and perceptions of safe, affordable, affirming housing for older LGBT people. Five themes from the data help guide housing providers and policymakers in improving housing for older LGBT Canadians: (a) understanding life-long and evolving fears of discrimination among older LGBT populations, (b) recognizing diversity among older LGBT populations, (c) operationalizing LGBT-inclusive housing philosophies, (d) addressing isolation and exclusion through housing interventions, and (e) providing LGBT people with tools to access appropriate housing. These themes offer practical policy and programming approaches to address the housing needs and concerns of older LGBT Canadians.

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Introduction

As Canada's population ages, a critical concern is developing housing models and policies to meet the needs of increasingly diverse and often vulnerable older adults (55+). Older

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lesbian, gay, bisexual, and transgender (LGBT¹) adults are an historically overlooked, marginalized, and disadvantaged segment of the aging population due, in part, to the fact that many older LGBT adults live alone, do not have connections with their families of origin, live in poverty, and have experienced systemic discrimination and harassment across the life course (Addis et al., 2009; Emler, 2016; K.I. Fredriksen-Goldsen et al., 2017). Even as there are significant differences among the constituent groups that comprise the LGBT acronym, a consistent and pervasive facet of their experience is their “otherness” – their minority status (Emler, 2016; Institute of Medicine, 2011; K.I. Fredriksen-Goldsen et al., 2017).

Given systemically precarious social conditions shaping the lives of older LGBT adults, it is surprising that Canadian scholarship, policy, and practice addressing LGBT aging and housing remains scarce. Indeed, in a recent narrative review of the literature on poverty in sexual and gender minorities across Canada, Kia et al. (2019a) found that although exploratory studies substantiate the salience of adverse material conditions in the lives of older LGBT Canadians, this literature continues to be in its infancy. Table 1 and Table 2 Kia et al. (2019a) specifically note that there exist significant gaps in how poverty is experienced in specific groups of LGBT older adults, including those who identify as transgender. Similarly, Brotman et al. (2015), in their conceptualization of service issues located at the intersection of LGBT identities and the life course,

Table 1. Age and race distribution.

	Age			Race
	<i>n</i>	Range	Mean	
Halifax	12	45–81 (and one aged 19)	61	11 White, 1 Indigenous and White
Ottawa	12	39–94	66	10 White, 1 Black, 1 Other
Winnipeg	15	52–78	68	12 White, 1 Black, 1 Latinx, 1 Other
Calgary	4	60–71	64	4 White
Nanaimo	9	46–82	68	8 White, 1 Indigenous

Table 2. Sexual orientation and gender identity by focus group location.

	Lesbian	Gay	Bisexual	Pansexual	Queer	Straight	Prefer not to answer
Halifax	1 ^b	7 CM 1 TM 1 ^b 1 ^a				1 ^a	
Ottawa	2 CW 1 ^b	1 CM ^c 1 ^b	1 ^a	1 CM ^c	2 CM ^c	1 CM 1 ^b 1 ^a	1 ^b
Winnipeg	5 CW 1 TW 1 ^b 1 ^a	2 CM 1 2S 2 ^b 1 ^a	1 TW				
Calgary	1 CW ^c 1 ^a 1 ^b	1 CM			1 CW ^c		
Nanaimo	2 CW 1 NB ^c	3 CM		1 CW	1 NB ^c	1 ^b	1 ^b

CW = cisgender woman; CM = cisgender man; TW = transgender woman; TM = transgender man; NB = non-binary; 2S = Two-Spirit

^aParticipant identified their gender identity as “other.”

^bParticipant declined to identify a gender identity.

^cParticipant identified multiple sexual orientations.

acknowledge both the historical and continued exclusion and marginalization of older sexual and gender minorities in health and social care systems across Canada, and attribute this phenomenon, in part, to the dearth of scholarship and policy addressing this area. Complicating the dearth of LGBT aging literature further, emerging scholarship in this area has indicated that older sexual and gender minorities may be affected by a variety of systems of marginalization, including those specific to race, sex, gender identity and expression, class, and ability, among others (Addis et al., 2009; Brotman et al., 2015; Kia et al., 2019b), and that scholarship in this area, therefore, needs to account for the complex heterogeneity reflected in the issues, experiences, and needs of older LGBT adults. Accordingly, there is an urgent need to address knowledge gaps surrounding the complex, multifaceted, and intersecting social conditions and experiences of older LGBT populations in Canada.

By 2024, over 20% of the Canadian population will be 65 years or older (Statistics Canada, 2012, 2018). The full extent of this demographic shift is not yet fully known but will likely create significant burdens on the existing health and social systems currently in place. A key service gap exists in determining if housing policies – where they exist – are addressing the unique issues facing diverse and vulnerable segments of older adults (55+), including older LGBT populations. Housing is a pressing policy challenge in that many older LGBT individuals have lived through systemic discrimination and harassment, including in the area of housing, at a time in Canada's history when there were limited legal protections and human rights legislation related to sexual orientation, gender identity, and gender expression (Addis et al., 2009; Adelman et al., 2006; Brotman et al., 2015, 2003). Indeed, scholars such as Brotman et al. (2015) and Kia (2016), have explicitly written about the tendency for older LGBT adults to avoid or guardedly approach housing programs intended for seniors, including residential care, particularly given the exposure of many in these groups to socially sanctioned and systemic anti-LGBT stigma, discrimination, and violence over their lifetime, and across social contexts and institutions. The addition of basic legal protections for this cohort of LGBT “baby boomers” is significant in that it meant that sexual orientation was no longer a prohibited ground for discrimination under the Canadian Charter until 1998, as was the addition of gender identity and gender expression under the Canadian Human Rights Act and Criminal Code in 2017 (Canadian Centre for Gender and Sexual Diversity, 2018).

Canadian funding and programs on housing are supported by all three levels of government. The federal government, through the National Housing Act and National Housing Strategy, sets priorities for housing, such as ensuring that all Canadians have access to safe housing (Government of Canada, 2018). They also detail funding agreements between the provinces and territories, ensuring that funding reaches them to be used for programs (e.g., home renovations and rent supplement programs). Canada Mortgage and Housing Corporation (CMHC) runs federal housing programs, issues mortgage insurance, and conducts technical and socioeconomic research related to housing. Given this responsibility, the fact that LGBT seniors are not seen as a priority population in practice remains concerning.

There is also a dearth of LGBT-specific policy at lower levels of government. Provincial and territorial governments develop their own housing strategies based on their priorities, such as accommodating increased population growth or providing more housing options for older adults (Government of Canada, 2018). Their strategies often indicate how they will

use federal funds. Each province and territory has a ten-year agreement and three-year action plan indicating the amount of funds it will access through the National Housing Strategy and how these funds will be spent. Provincial governments also operate and manage their own housing units through either provincial or regional housing authorities, though most have not significantly expanded their housing supply since the early 1980s.

At the municipal level, housing departments have much more limited budgets and responsibilities. Municipalities indicate in their official plan or strategy where new housing will be located and the number of each type of unit that is needed, depending on projected population growth. Their land use by-laws indicate the type of housing that can be built in each area, such as single-family housing or multi-family housing. Specific types of housing, such as secondary suites, may be allowed through a separate municipal by-law. However, in terms of housing supply, most municipalities do not build or operate units themselves. Some do have municipal development corporations, which are arms-length from the municipal government and can use municipal surplus land or sell it to nonprofit housing authorities to build affordable housing. These organizations tend to be funded through municipal taxes or a percentage of developer fees.

Despite human rights advances, housing protections for LGBT populations in Canada's National Housing Strategy is lagging in that some Canadian provinces have yet to create adequate housing policies for their diverse aging populations such as older LGBT Canadians (Banerjee, 2007; Cahill et al., 2000; Canadian Mortgage and Housing Corporation, 2017; Government of Canada, 2018). And while housing is given the noted lack of data and focus on the housing needs of older LGBT Canadians, the rationale for this focus group study was to advance our knowledge about how to better meet the needs of this vulnerable population.

Theoretical framework

This research is informed by the Social Ecological Model (SEM), which aims to understand the ways in which a range of personal- and interpersonal-level and system-level factors interact and impact on individual outcomes through to policy-level outcomes (Creswell, 2014; Creswell & Poth, 2018; Fredriksen-Goldsen et al., 2015). The core levels of the SEM include intrapersonal, interpersonal, organizational, community, policy, and structural environments. These multiple levels of influence can impact, for example, if and how well an individual is able to engage with their peer network, community or organizations of choice, and local government – all of which can influence housing. Further, the SEM can be effective in understanding the various levels of factors that contribute, both positively and negatively, to the complex phenomena facing older populations including how older LGBT persons experience housing and how to develop recommendations specific to each level in the model (Carlson et al., 2012; Fenway Institute, 2017; Fredriksen-Goldsen et al., 2015; Graham et al., 2009; Keller et al., 2007; Lee & Quam, 2013). According to the SEM literature, often the most effective approaches to understanding and intervening on a particular phenomenon of interest are to examine possible combinations of interventions at all levels of the model (Creswell, 2014).

Current study

The current study was one component of a larger national project studying older LGBT Canadians' housing needs. The full project included a scoping review of international LGBT-related housing research, a Canadian national online survey focusing on the housing experiences and needs of older LGBT Canadians, and focus group discussions held in five provinces. This article reports only on the methods and findings of the focus group component of the project.

To examine the unique housing issues facing older LGBT individuals, focus groups were held in five cities in five Canadian provinces: British Columbia, Alberta, Manitoba, Ontario, and Nova Scotia where we had existing community- and university-based research partnerships. The focus groups offered an important means to bring some of the key findings from a previously conducted online survey forward for discussion and further elaboration with older LGBT individuals and housing providers. For instance, while survey findings indicated that the majority of LGBT respondents agreed with a need for more LGBT-affirming and affordable housing options, our focus group questions prompted participants to discuss what LGBT-affirming and affordable housing would mean to them, and what policy interventions they envisioned to achieve this. As the project progressed and based on some of the discussions of early focus groups, we also invited younger members of the community to participate to share their thoughts on possible intergenerational housing models and policies. The focus group discussion guide was designed to spark conversation about unique housing issues facing older LGBT populations in relation to safe, affirming, and affordable housing, as well as innovative housing interventions, models, policies, and practices.

Methods

Drawing from the principles of community-based research (Jull et al., 2017; Rubin et al., 2012), our research team worked with our community partners to locate accessible spaces to conduct in-person focus group discussions in the five Canadian cities. Focus groups are particularly well suited to exploring complex phenomena with marginalized groups as this approach helps minimize the separation between the researchers and the participants (Hughes & DuMont, 1993). Additionally, to be effective, focus groups need to be responsive to the needs of participants which informed the selection of community settings known to be inclusive by community members. Further, members of the research team who identify as part of the LGBT community facilitated the focus group discussions in an effort to encourage participants to share authentically and freely (Fallon & Brown, 2002). Discussions in Halifax, Ottawa, and Calgary were facilitated by the second author, one discussion in Halifax was facilitated by the first author, and discussions in Winnipeg and Nanaimo were each facilitated by project team members from partner organizations. Ethics approval was received from the principal investigator's university.

Study recruitment

Ten focus group discussions were held in five Canadian cities: one in Nanaimo, British Columbia; two in Calgary, Alberta; one in Winnipeg, Manitoba; one in Ottawa, Ontario; and four in Halifax, Nova Scotia. The initial recruitment criteria included being 55 years of age or older, being able to communicate and understand English, and self-identifying as a member of the LGBT communities, and/or being a housing provider who self-identified as a member of the LGBT communities. Recruitment took place through word of mouth through our community partners and with our national team members who shared the link to the study. Interested participants were asked to contact the research assistant and/or community-based organization who shared this recruitment information with them, at which point, a member of the research team confirmed dates, time, and location of the focus group sessions. No incentives were offered for participation.

In two discussions (one in Calgary and one in Ottawa), non-LGBT identified housing providers were invited to join the focus groups due to their strong connections with the LGBT communities and awareness of the unique housing issues facing these communities. Additionally, in one Halifax focus group discussion, younger LGBT people from an LGBT youth organization were invited to join to contribute to the conversation around intergenerational housing solutions for LGBT communities given that these issues were being raised as important in all focus group discussions. A total of three participants who did not fit the initial recruitment criteria attended the focus group discussions. While no participant's contributions were excluded from data analysis, the themes identified in this paper are attributable primarily to the contributions of those participants who met our initial recruitment criteria (LGBT people 55+), and included quotations are exclusively from older LGBT participants.

Sample

Our focus group sample comprised 52 LGBT community members and housing providers with a median age of 66, ranging in age from 39 to 94 (and one 19-year-old attended one focus group discussion). Focus group attendance ranged from two to 15 people and ranged in duration from 45 minutes to 2 hours. At one Halifax session, only one participant attended and thus the facilitator conducted an interview using the focus group discussion guide. A variety of sexual orientations and gender identities were represented, and 54% of the participants identifying as cisgender (11 preferred not to answer the question about their gender identity). Over 50% had completed a university degree or higher, most self-identified as white, and approximately 30% self-identified as a person with a disability. Participants' annual incomes varied, but most reported modest or low annual incomes, with 38% reporting between 20,000 USD and 49,000, USD and 23% reporting below 20,000. USD

Procedures

Following a brief introduction to the research study, participants provided informed consent in writing and completed a brief demographic questionnaire before the focus group discussions began and each was audio-recorded. Open-ended questions were used

to elicit rich, in-depth responses from participants about their experiences and perceptions of key concepts (Creswell, 2012). For instance, groups were asked, “Based on your experiences, were these housing services, programs or resources [you have previously accessed] inclusive or affirming of lesbian, gay, bisexual, and transgender people? If so, what specifically made these inclusive or affirming?”, “What types of housing services, programs or resources do you think could improve access to safe and affordable housing for older LGBT adults?” and, “Do you think there are barriers to accessing safe and affordable housing for older LGBT adults? If so, what are those barriers?” The development of the focus group discussion guide was informed by our earlier research with older LGBT people and housing service providers as a part of the larger research project.

Analysis

All focus group discussion recordings were transcribed verbatim and managed using MAXQDA (version 2018) data analysis software. Thematic content analysis was conducted by the principal investigator and primary research assistant in consultation with the national team (Bryman, 2016; Creswell, 2012). Each transcript was read multiple times and initial impressions were recorded as memos using MAXQDA. Initial codes consisting of words or phrases were created from key segments of text in each transcript. A secondary coding process involved grouping codes that address similar concepts or issues and if discrepancies were found, these were resolved between the principal investigator and the core research team members. Memos were used as decision trails to record instances of changed or new codes. Segments retrieved from groups of codes were read through to identify meaning in relation to the research questions. Finally, groups of codes were organized into conceptually descriptive overarching themes (Sandelowski & Barroso, 2003). Codes related to the themes presented were grouped using the code sets feature in MAXQDA and coded segments that were particularly evocative or meaningful to each code were highlighted for use as illustrative quotations.

Results

Focus group participants offered a wide variety of experiences and ideas related to addressing the housing needs of older LGBT Canadians. Although participants discussed a range of housing settings, approaches, programs, policies, and personal circumstances, the following five themes were identified as key for housing policymakers and service providers to understand and incorporate when considering solutions for older LGBT people across the spectrum of housing options. All names presented are pseudonyms.

Understanding fears of discrimination

The legacy of oppressive attitudes and policies in the Canadian housing landscape was central in the focus group discussions. Participants recalled personal instances of homophobic and/or transphobic discrimination and violence as well as among their LGBT peers in various housing contexts over the years. For instance, George (Halifax) pointed out, “I came from a time when people could be kicked out of their apartment because they were gay.” Many participants acknowledged the impacts of positive changes in human rights

laws and legislation, social attitudes and norms, and health and social programs, but older LGBT participants still feared encountering discrimination and rejection in various housing settings. While fears were explicitly stated, participants also revealed adaptive measures taken to protect themselves against potential discrimination in housing. For some, concealing their LGBT identity for the sake of their personal safety was a needed strategy at a time when there were limited legal protections in place to address discrimination based on one's sexual orientation and/or gender identity. Beth (Calgary) described never holding hands with her partner of 35 years saying, "I was brought up to basically hide my identity. Like, I never denied it, but I never went out there expressing it either. You know?" Others described processes of identifying and purposefully avoiding known discriminatory housing options. For instance, Pam (Halifax) described telling landlords and rental property managers over the phone that she was a lesbian asking them about their anti-discrimination policies for LGBT people. She and others required some form of assurance of safety before pursuing housing options or coming out in housing settings.

In several focus group conversations, participants revealed that although they felt safe in their current rental or owned housing settings, they feared what would happen if they needed to enter long-term care or assisted living facilities. Issues of violence and discrimination in these congregate care settings were familiar stories among the participants. When discussing these settings, many participants expressed fear that health and personal care staff could discriminate against them with no formal recourse. Others felt hopeful that the attitudes of a younger workforce toward older LGBT populations in these settings have become more accepting than in previous decades. Pat (Calgary) said, "but as we're finding out it's the younger generations as service providers aren't – they're not really the problem, right?" Some participants noted regional differences, sharing stories about friends living in rural areas where care facilities were perceived to be unaccepting of LGBT populations. These differences were also discussed as intersecting with certain LGBT identities. For example, Gail (Nanaimo) shared an aging transgender friend's experience in rural British Columbia saying,

... a very, very good friend who is a, trans woman in this case—tremendous fear Around shock and questions from whatever setting she might be in particularly if it's healthcare, and you know, fear of danger and violence in pretty well every setting. Whether that's independent, supported, assisted living— and even the woman I'm talking about who's reasonably affluent and capable had a lot of fear about being outed in settings in which she didn't feel safe. I thought that was interesting because it felt like something that was more—there was a time, you know, when outing was a popular thing to be doing but that—people in rural settings are still living with that. That fear of being outed.

Numerous participants explained that their fears about congregate living settings such as long-term care (LTC) facilities were due to the perception that older non-LGBT residents grew up at a time when discriminatory views about LGBT people were the norm. Participants felt that anti-discrimination policies are important but rarely enforced with LTC residents and that this was particularly challenging in the context of cognitive impairment. Participants shared stories of lifelong self-advocacy and resilience but worried about the ability to continue this if their health was to decline and they became reliant on care providers within LTC settings. As Dale (Calgary) expressed, "When you age, you become a little more vulnerable and you kind of think to yourself, 'Oh my God am I gonna be strong enough to continue this fight?'"

The need to address the fear of discrimination was woven throughout participants' perspectives on housing solutions and interventions for older LGBT people. This was particularly potent when conversations turned to the creation of LGBT-specific housing. While some participants felt that LGBT-focused housing would be safe and affirming, others connected this idea to the legacy of social exclusion they had witnessed and experienced throughout their lives. The lasting impacts of social marginalization were salient in comments such as Glenn's (Nanaimo): "That would be my nightmare! I've worked all my life to get out of the [gay] ghetto, I don't want to be back into one!" Others felt that older LGBT populations as a whole were still at risk of violence and being housed together would make them an easy target for harassment and violence. As Sandy (Winnipeg) said,

The way the world is turning . . . that would be a hell of a good opportunity for somebody to get rid of a whole bunch of us at once if they wished. . . . Not to labor on fear and all that kinda stuff, but I mean, you just have to be vigilant.

It was important to participants that housing providers and policymakers understand and recognize the historical and current discrimination facing many within LGBT populations. Further, it was argued that this contextual understanding is necessary in an effort to create housing programs and policies that will provide older LGBT people with assurances that discrimination will not be tolerated and that anti-discrimination policies will be appropriately enforced.

Recognizing heterogeneity in older LGBT populations

As consistently emphasized among focus group participant, the housing needs of older LGBT populations are not the same and therefore housing solutions can not utilize a one-size-fits-all approach. Specifically, the need to recognize intersecting determinants of safe, affordable, and affirming housing for older LGBT populations such as the degree of being "out", the level of support from families of choice, one's gender identity and lived gender expression, among others, is crucial as is the move away from regarding LGBT populations as a homogenous whole. For example, participants discussed how perceptions of the financial success of particular segments within LGBT populations such as white, educated, cisgender gay men, had created a societal impression that housing for LGBT populations is a non-issue. Jack (Calgary) recalled:

I always go back to [former Alberta premier] Ralph Klein going on about LGBT people didn't need any more rights because we were already like wealthy and could do anything we wanted. That was like this stereotype-thing that he was throwing out there.

Participants pointed out that although acceptance and financial success may be the case for a fraction of the population, many LGBT people face housing insecurity and have not benefitted from shifts in societal attitudes and policies in the same way. Brad (Halifax) noted, "if you're economically privileged, the chances of running into that kind of discrimination are probably less." During a conversation about LGBT-inclusive housing, Glenn (Nanaimo) commented:

It occurred to me, you're talking about different populations here. And there are some of us who have the choice whether to be in or out. We can pass. There are others where that is not an option. They're very clearly transgender, or, to choose whether or not to be in or out is not

a choice that they have. They're out—period— and so, I think there are different needs for people like that.

Participants made it clear that while there is no universal LGBT housing experience, these unique differences need to be considered when developing policy and programming solutions. Specifically, many participants noted that housing affordability remains a significant national challenge and that the financial inequities faced by some LGBT people further compounded discrimination-based barriers to housing by limiting their options for housing. For example, it was felt that, "In particular subsidized seniors housing . . . it's just not housing that's been set up for people who are different or who have different types of presentations." Rod (Nanaimo) summarized, "And when your choices are limited because you don't have the income and you need to be in subsidized housing, it's – yeah. It's a significant barrier to layer on the gender or sexual minority." This was seen as an opportunity for discriminatory behavior to go unchecked. Ben (Nanaimo) summarized:

I think when you're talking about affordability I think also, availability, the fact that there's not a lot of vacancies so that means landlords are in the power position and they, even though they're not supposed to, can pick and choose. So, I think there's two parts to that. One, there is the ability that they can scam people more. There's a lot of scams where you put a deposit and then there's no apartment and I think older people are definitely vulnerable to that. But I think it almost means that . . . it's a lot easier for someone to be discriminatory based on how you present, be whatever difference that may be if it's visible, they can just say, "Oh I chose to go with this person" or "I saw this person first" when that's not the case. So, are there policies or legislation or something that can tighten those things up so that landlords cannot be discriminatory?

The issues related to the intersections of race, culture, and LGBT identity in housing emerged from several focus groups. For example, racist and colonialist systems of regulation were understood by participants as key drivers in the perpetuation of housing barriers for nonwhite LGBT people in Canada. Specially, participants expressed concern about the lack of housing options for LGBT Black, Indigenous, and other people of color. As Sandra (Nanaimo) exemplifies the significance of various identity intersections with Indigeneity when it comes to housing:

We're absolutely terrified to state that we're First Nations even to apply for rent. 'Cause who wants to rent to an Indian? "Oh they all drink, right." So, "They won't pay rent on time, they're all asleep." That's the stigma associated with First Nations who are low-income. . . . This particular Elder was like, "It's gonna be hard enough for me to find rent to begin with, if I add one more layer that I am gay, I'll never be able to find a place." That's how he felt. So, I think there are more people out there, Elders who are more secretive about it because there's a shift in power from your independence to depending on others, so it's better to give up your identity to get the care.

In addition, there was also an acknowledgment of the unique concerns of older transgender and gender diverse individuals, who were felt to be at greater risk of discrimination from housing providers. As Liz points out:

I know specifically two, trans women here in Nanaimo who had a very difficult time renting a place to live. They'd phone— the one woman had a low voice, she'd phone, say, "I'm looking," you know, and they'd set up a time and she'd show up and with the low voice you

know, [she] was dressed in a dress and so on and it was like, “No, no, no.” She knew it was because she was, trans. That was the only reason.

Focus group participants frequently commented on the compounding and intersecting nature of inequities that arise when older LGBT people identify as having disabilities or when they develop health-related problems which may require a guarded or reluctant disclosure of personal information to housing providers. Both visible and invisible factors such as one’s transgender identity or HIV+ status were seen as particularly stigmatized in housing and general healthcare settings. Kim (Halifax) asked, “I mean is there really a strategy for even aging period, let alone aging with disability or aging with HIV?” Focus group participants frequently pointed to LTC facilities as housing sites which were generally unprepared to equitably serve people of diverse and intersecting identities, abilities, and histories. Sandra (Nanaimo) shared her exposure to some of these intersections as a home care nurse:

I have had someone, Two-Spirited, that would ask me as their nurse, “Is there a long-term care facility where I can be admitted with like, my own people?” And I said, “Are you afraid to be Indigenous or are you afraid to be gay?” He said, “Both!” and um, I said, “I have no idea” and I’d been nursing now, at that time, for 25 years and um, when I started researching, there wasn’t a space identified and I went, “Ok, all these space in long-term care facilities, there’s gotta be some other clients out there that are Two-Spirited” and once he found out there wasn’t a space, he said, he said, “It will just increase the barriers for me to be placed in a facility.” So, he used to be out, now he’s in. He’s closed in.

The specific needs of older LGBT populations who are experiencing homelessness were also raised frequently in the discussions. It was felt that discrimination based on one’s LGBT identity would be heightened for people navigating the shelter system and accessing services while homeless, which could cause people to need to hide their identities. Pat (Calgary) discussed their own experience with homelessness and had seen how “transgender [people] stopped transitioning ‘cause they’re not welcome in the shelter system and that’s out there too and that affects our seniors as well.” Some participants had related experiences and shared concerns, including Alex (Ottawa) who said,

I also volunteer at a social center . . . I daily see street people and homeless that I know are queer. They don’t identify as queer because of a poisonous atmosphere at times. Not all of us are inclusive in our mind, open or compassionate. So, I see them and I’m going—I look at myself and I say, “What happens to them? Where’s their housing?” They choose to live on the street for a variety of reasons—they’re usually older people, meaning long, long years ago when it was unwise to be openly gay, lesbian, etc. So that’s my question, where does their housing come from? And I know some of them die. They die on the street.

Operationalizing LGBT-inclusive philosophies

Most focus group participants felt that while written statements of support for LGBT people from housing providers were a good first step toward inclusion, these needed to be supported and animated by concrete action steps, including those which set out a culture of safety and inclusion for all residents and that map onto existing human rights legislation. While this would be ideal, many participants expressed deep frustration with generic statements of anti-discrimination policy without evidence of

enforcement and leadership from housing providers. Dale (Calgary) said, “You can put you know, an inclusive flag on your doors ... but how do you make sure that if someone feels unsafe, that they have somewhere to go? ... That the management is willing to take some pretty decisive steps?” Blair (Halifax) recalled trying to advocate for their rights after being discriminated and being told, “Well you go to the police.” They felt, “Well, that’s true, I mean the police are there for a reason, but if housing has this code of conduct and it’s clearly being broken, isn’t there some kind of process with teeth and a backbone and a will that can enforce that code?” Further, participants emphasized the need to put in place LGBT anti-discrimination training and related policies for landlords, housing facility and LTC staff, and other tenants/residents that mirror, enact and enforce the philosophy of equity, diversity, and inclusion (EDI). As Jade (Ottawa) commented:

Especially for—if anyone is vulnerable as a vulnerable population, to know that I feel secure, and am not going to be abused in any way certainly perhaps because I’m a woman, perhaps because I’m a lesbian, perhaps because I have a mental illness, perhaps because I’m a visible minority— all those factors are important to me and our society as it exists today make us vulnerable in certain sectors. So, if we have that sense of security, dignity, and respect which goes back to education of the—yes, absolutely the managers, the institution, absolutely—but the people who actually touch us are the caregivers. So, if there could be, perhaps a different type of education, another module put in to open it up, people like ourselves going in, people from your department going in and changing the curriculum.

Several focus group participants felt that in order to create safe and affirming congregate housing settings, EDI education needed to be provided holistically to all tenants or residents and their families. According to Gail (Nanaimo),

If it’s not open and apparent with residents’ families, it’s going to be very difficult to have that inclusion ... In that way of it being a community of people, the families, the volunteers, whoever is there ... they’re all partners together. And I think that’s incredibly important because if we just focus on training staff—even that would be a big improvement, by the way—but on the other hand it’s not really going to create what we want in the long-run, which is this very inclusive and affirming sort of community.

Although participants agreed that housing providers had a vital role to play in EDI training, it was also noted that various levels of government needed to be involved in creating accountability structures for such training within, for example, government funded or subsidized housing and LTC settings. Specific suggestions included mandatory EDI training for landlords or other housing providers and staff to become licensed or certified as LGBT-safe and affirming and to make this training available to residents as well.

Operationalizing EDI according to participants must also required amending heteronormative housing documentation such as information materials on EDI policies and EDI-related intake forms. Ensuring diverse gender and sexuality-inclusive language and images on, for example, intake forms was regarded as a signifier of safety and inclusion which was seen as providing older LGBT people with some indication that they would be accepted in that housing setting. As Dana (Winnipeg) suggests,

They could at least show some diversity and inclusivity in their basic advertising. Their websites show all white, heterosexual individuals and couples. They advertise their programs

and activities surrounding heteronormative families . . . no Pride of any kinds . . . no indication whatsoever that someone like me would be welcome there. I might be, but I can't see it.

Focus group participants also expressed great interest in having the option to disclose their sexual orientation and/or gender identity to housing providers as part of the intake process, including on leasing or registration forms. As Gail (Nanaimo) highlights, there is a need for, “gender diversity, you know, not just training but sort of directive and policy around that, and forms that acknowledge that there’s something other than Mrs., Mr., you know, he, she, etc.”

In addition to measures to improve training and policy enforcement, focus group participants described wanting to see the history of LGBT peoples acknowledged, respected, and celebrated in housing. This was particularly the case in congregate settings where participants felt that housing providers could learn about the histories of LGBT people and create opportunities to meet social and cultural needs. Dale (Calgary) envisioned, “By having a culture within the building, for instance, with staff, etc., that’s what you need to promote . . . if it gets out that someone’s gay, then that’s fine and let’s celebrate that!” Specifically, participants suggested involvement in Pride celebrations and other LGBT-specific activities for LGBT tenants/residents to safely form connections with each other and with allies. Dale continued:

I wish that they could at least create a couple of opportunities a year, minimum, where they’re bringing people together and encourage some level of community and so people get to know each other and get to respect each other for who they are.

These important historical and contemporary sociocultural elements were regarded as vital to the provision of LGBT-safe and affirming housing. As Ellis (Ottawa) remarked:

Social settings, I think that might be a really big thing in it because a lot of these um, congregate housing settings have social activities but if the LGBT community does not feel welcome, they’re not gonna access that. You’re still gonna have the isolation of these elderly people, and I think that’s gonna be a really, really big problem.

Addressing isolation and exclusion through housing

Participants identified social isolation and exclusion as key outcomes of non-affirming housing for older LGBT Canadians. These concerns centered on the need to hide one’s identity for personal safety reasons, feeling that they would not fit in with predominantly heterosexual and cisgender groups in housing facilities such as LTC and seniors housing. Without an addressing isolation and exclusion for LGBT seniors, participants feared aging alone without social connections. For example, as Celeste (Nanaimo) spoke about an older lesbian friend:

I imagine that 83-year-old person feels very isolated cause they don’t want to expose themselves—they’re afraid and they just won’t fit in. So neighborhood associations, community groups and stuff— gay and lesbian people just aren’t part of that—and, trans people aren’t part of that vocabulary. And so if we’re integrating, or finding a place to live, we risk being isolated.

Beyond basic issues of personal safety, participants felt that housing for older LGBT people needed to ensure housing programs in a manner that would foster greater social

connectedness. As Joe in Halifax put it, “My model of growing older is to be living with birds of a feather somehow, whether that’s in a house or on a floor or in a building, or whatever . . . because we’ll have a lot more fun together.” Participants emphasized the need for options that would equitably meet the needs of diverse LGBT populations, including those of varying income levels and healthcare needs. While some preferred the idea of LGBT-exclusive facilities, communities, or dedicated floors in existing facilities, others preferred to imagine LGBT affirming yet mixed housing communities. Randall (Ottawa) described how this could work:

Anybody buying a condo would need to know that they are in a structure that was a LGBTQ-friendly structure in addition to some of the areas being very targeted to include people on lower-based income. But the other idea is whether a floor or something within the multi-story could be LGBTQ only for people who feel more comfortable in that kind of a setting.

The suggestion of mixed-demographic housing options as a way to build community resonated with participant in that “we have these systemic structural barriers to people actually being able to be together in community and not be discriminated.” Naomi (Ottawa) offered further insights into her intersectional perspective:

When you talk about the LGBT community and it having a focus on housing, don’t you think that maybe it could perpetrate an idea of segregation? That, you know, as a black person I have faced discrimination all my life, and inequalities, politically, socially, economically. And in the housing market where they red-line credit applications and things of that nature, don’t you think that if you just focus on having an LGBT community that, that you lend yourself to isolating that community, don’t you want an inclusive, diverse environment where you have . . . mixed-income, with market rate and subsidized, that’s what makes a good community. Just like home-ownership and rental in a community make a good community. We wanna have inclusive environments where LGBT rights are protected.

Participants such as Gail (Nanaimo) asked, “What are the potential for intergenerational you know, types of housing rather than siloed by age and other demographics?” Many participants regarded the model of intergenerational housing as a highly appropriate approach in that older and younger LGBT people could co-create an affirming housing opportunity. As Sandy (Winnipeg) noted:

We benefit each other all the way up and down the line. For a lot of these younger folks too, especially our younger queer kids who’ve been kicked out, disowned, all that kind of stuff. I mean, it gives them a mother, a father, a grandmother, or a grandpa, and it keeps us connected. It keeps us in tune with what’s going on in the world, so I’m all for it.

Others, like Dale (Calgary), envisioned bridging cultural divides in housing:

So how do we create something that’s intergenerational and . . . intercultural, right? So again, you’ve got a lot of new Canadians coming from countries where, you know, homosexuality is still a crime . . . bringing all that together—there’s a daycare center, and you know—so, I think it’s one of these opportunities . . . I think there’s an opportunity here to create a model community.

Many focus group participants emphasized that housing programs and benefits need to be flexible and responsive to the changing needs of older people. Chris (Halifax) identified that there needs to be “the flexibility in the space to allow people to stay or at least transition within the building so they keep their same group of friends.”

Participants echoed a common desire to “age in place” and avoid multiple moves, whether that meant to age in their current home or apartment with LGBT-friendly supports in place, or be able to move into a single long-term care facility that would be affirming but also able to meet progressively complex health care needs as needed. Because finding LGBT safe and affirming housing is challenging for older LGBT individuals, it was felt that:

If you're coming up with one solution you've gotta look at what comes next so that people just don't give into another dead end. Get all excited and think ok I've found my place but then ten years later suddenly realize, well, I can't stay here anymore. (*Chris, Halifax*)

Providing older LGBT people with tools to access appropriate housing

Salient in all of the focus group discussions was the desire for older LGBT people to actively participate in the (re)imagining and creation of safe, affordable, and affirming housing through opportunities for older LGBT people to gather for similar discussions and to speak directly with housing providers and policymakers about their needs. Jade (Ottawa) commented that “people like ourselves” should be involved in EDI training for housing providers and staff.

Focus group participants offered numerous examples of how they were self-advocating and finding ways to make housing work for them, such as co-housing models in which LGBT people shared houses or rented rooms to other LGBT people of different ages and developed their own intergenerational, resource-sharing housing models. Vocalizing a central question, John (Halifax) asked:

Do we try to build our own community? ... Is it something that we should be looking at so that we have a community that's our own? Do we have—you know, is that the route that we should go? Do we—do we have this stepped living, you know? And if we do, then that in my mind means that we, [laughing] “we”, god forbid that we build it ourselves because we don't have the finances to do that but, but is it something that we should be looking at so that we have a community that's our own. Um, gated, not gated, I don't care.

Others shared examples of LGBT groups considering purchasing buildings for LGBT-specific housing but facing barriers that had, for a variety of political, financial, and other reasons, halted these projects. Francis (Nanaimo) shared:

I've been in a few groups in the past and all the way back in the '80s we looked at the possibilities of getting older and what we're gonna need and there was money around the table at the time, too, including myself. And it went on for a little while and then kinda, went this direction, that direction. People moved away and stopped like that, or just died. I think what we need to do is get serious about it. Start doing something, you know? Like even if we don't have a lot of resources, there are people out there with resources.

Given the diversity of older LGBT populations and their housing needs, it was clear in the focus groups that older LGBT people require choice and autonomy in relation to housing. Across the country, participants identified opportunities for government-directed interventions, housing models and policies to improve housing options for older LGBT people. Participants suggested the need to shift inclusive housing into the hands of the LGBT community with the help of system-level frameworks to make this approach sustainable

and thereby addressing key health and social determinants of these populations. Chris (Halifax) commented,

The government should be willing to subsidize or kick in a bursary or something for people who are willing to try some innovative housing options, because I think if the group of people wanted to organize their own housing and look after it themselves, they're not having all this bureaucracy.

Other policy ideas included “enshrin[ing] housing as a human right” (Ben, Nanaimo) and creating “inclusionary zoning for affordability with some priorities for special groups because they have been historically discriminated against” (Naomi, Ottawa). Participants suggested that governments at each level (e.g., municipal, provincial, and federal) could better support LGBT co-housing and intergenerational programs by offering financial support and legal/procedural information.

Lastly, financial interventions were seen by participants as a vital component of ensuring older LGBT people have autonomy and choice when accessing housing. There was consensus on the need for increased financial support from government directly into the hands of those seeking affordable housing. Specifically, Ottawa focus group participants felt that portable housing benefits would resolve problems created by existing rent-geared-to-income programs. For example, Sidney said, “This is what I was saying about the subsidies for the individual not being in control of the home or the landlord or anybody. Because, if they don't know, then they can't discriminate.” Naomi agreed, stating, “It makes sense to bridge rent for 300 USD to keep someone where they already are as opposed to going into rent-geared-to-income [housing].”

Discussion

These findings suggest that the housing needs of older LGBT adults are shaped by structural and systemic factors situated at the intersections of LGBT identities, older age, poverty, and race, among others. For example, several participants recalled troubling histories of discrimination in seeking, securing, and maintaining housing and, not surprisingly, remarked on fearing such mistreatment at a time when they might require congregate housing to address escalating care needs. In literature addressing LGBT aging, this distinctive expression of susceptibility to institutionalized hostility has been recognized and conceptualized as a product of the intersecting effects of homophobia, biphobia, transphobia, ageism, and other relevant systemic forces on the social conditions, health outcomes and experiences of older sexual and gender minorities (Fredriksen-Goldsen et al., 2019; Kia, 2016; Kia et al., 2019b).

Reflecting the intersectionality of LGBT aging and its relationship with housing issues and experiences, several of the participants discussed the role of race, poverty, gender expression, and gender identity in differentially shaping the types of adversity to which individual older LGBT adults may be subject. One participant, for example, reflected on the interlocking role of racism and settler colonialism, together with anti-LGBT stigma and ageism, in rendering Indigenous sexual and gender minorities susceptible to unique forms of discrimination. Another participant discussed erroneous generalizations historically made about the wealth of older LGBT adults, often based on the relative success of some white gay men, to justify exclusion of aging sexual and gender minorities as

populations with unique disparities and needs related to housing, often including those oppressed in relation gender and race. The findings above, namely those reflecting the impacts of intersectional oppression on the housing issues and needs of heterogeneous communities of older LGBT adults, are consistent with the limited existing scholarship in this area (Brotman et al., 2015; Kia, 2016; Kia et al., 2019a). As noted in the introduction, Canadian scholars writing in the field of LGBT aging (Brotman et al., 2015; Hulko, 2016; Kia, 2016), along with critical gerontologists with interests in this area (Grenier et al., 2016), have noted the likely salience of these and other systems of oppression in shaping the material and discursive marginalization of older LGBT adults across Canada. Similarly, writers addressing the social conditions and experiences of Indigenous sexual and gender minorities have remarked on the need to acknowledge the likely role of settler colonialism in differentially constructing the realities, experiences, and needs of those in these groups (Driskill, 2010; Hunt, 2016).

At the same time, however, the participants' accounts reflected a capacity for operationalizing housing initiatives needed to better foreground and account for their voices in the context of housing as a key determinant of LGBT health. For example, the need for mandated EDI training was commonly articulated as a potential policy response for enhancing LGBT inclusion in housing and better health and social outcomes among older adults, highlighting how interpersonal influences have intrapersonal effects. The potential to imagine and conceptualize transformative change in the realm of housing illustrated the relevance of centering the voices of older LGBT adults in catalyzing policy change in this sector. Although the need to actively engage aging sexual and gender minorities in programming and policy has, in the past, been acknowledged in the literature on LGBT aging (Addis et al., 2009), our study is, to our knowledge, among the first to empirically substantiate the relevance of this implication in the domain of housing and health.

However, despite this, there are limitations to our study including the lack of more diversity in our sample from those living in more rural areas of Canada as well as those who represent more diverse populations of older LGBT Canadians such as those who do not speak English, who experience other forms of stigma due to their race, ethnicity, country of origin, among other health and housing determinants. Our participants noted these demographic limitations, and in multiple cases took the opportunity to discuss how to better reach underrepresented older LGBT adults for inclusion in research and community initiatives, and to highlight the unique needs of older LGBT peers and community members of underrepresented intersectional identities. In this way, many participants demonstrated awareness of their own needs as older LGBT individuals while recognizing certain advantages they had when compared to others.

In keeping with the social ecological model, there are a number of key housing policy and programming issues that are in need of urgent attention in addressing the unique housing needs of and concerns among older LGBT Canadians. Specifically, at the level of municipal, provincial, and federal policy development and analysis, financial issues, such as rent control, rent subsidies, portable benefits, support for first-time home buyers and support for accessibility accommodations and upgrades are needed to help meet the housing needs of LGBT older adults. In addition, addressing zoning and funding considerations for affordable housing, including LGBT-specific housing, is warranted.

Further, it is noteworthy that some ninety-five percent of housing in Canada is built by private developers, while just five percent is built by public authorities or nonprofit organizations (Hulchanski, 2007). Nonprofit organizations often build and operate housing for specific demographic groups that are poorly served by the housing market, e.g., seniors, Indigenous peoples, and women fleeing domestic abuse. These households are often low-income and face particular barriers to market housing. Private and nonprofit housing authorities can access funding through provincial and federal government programs such as the National Housing Strategy which has a funding program for co-operative housing nonprofits and another for innovative development of rental housing. Individual owners and renters can also access provincial and federal program funding, such as rent supplements and energy efficiency adaptation funds.

Future housing research on the unique housing issues facing older LGBT Canadians should utilize a purposive sampling strategy to ensure greater representation across types of governmental and non-governmental, at various levels of government, and between urban and rural housing providers and tenants. This is particularly important in relation to issues such as zoning bylaws and other government restrictions on housing types, locations, and innovative technologies. Given that many older LGBT populations wish to age in place (Kushner et al., 2013; Rivera et al., 2011), zoning bylaws that allow units to be adapted for accessibility needs, such as the adaptable housing program in Saanich, British Columbia (District of Saanich, 2020), should be considered. Additional attention to procedures for landlord licensing and supports for co-housing and intergenerational options is needed as is greater focus on the current regulations and standards for care facilities regarding inclusion and training. Taking an intersectional lens to housing policy development is needed in an effort to address the issues associated with anti-discrimination laws specific to the housing sector. Further, there is a need for mechanisms that allow people to apply these laws, such as ombudspersons' offices, residential tenancy hearings, and provincial human rights commissions.

At the community level, greater attention to intergenerational housing programming and related policy supports to address issues of social isolation among older LGBT populations is warranted. In addition, there is an urgent need for upstream prevention-focused supports to address the issue of homelessness among LGBT people across the life course (Ecker et al., 2019). This will require ensuring greater community mobilization on the issue of housing for both younger and older LGBT Canadians. Further, housing as a key determinant of community and individual level health requires additional supports from within both LGBT and non-LGBT communities to ensure safe and affirming housing is the norm rather than the exception.

At the organizational or institutional level, we regard the need for EDI policy enforcement and evaluation procedures in place to address inclusivity and anti-discrimination approaches in housing for older LGBT Canadians. Our participants' insights in this regard are echoed by previous findings (e.g., Furlotte et al., 2016) that disclosure of LGBT identity is felt to be unsafe in LTC environments that are not explicitly affirming. Other studies have found that staff in LTC facilities have expressed negative and discriminatory reactions toward residents who disclosed non-heterosexual identities (Neville et al., 2015) and that the rights of non-LGBT residents to express their views supersede the rights of LGBT residents to not face discrimination (Willis et al., 2016).

While it is clear that EDI training is needed for housing staff, management, residents, and families to ensure older LGBT residents have a safe and affirming place to call home (de Vries et al., 2019), how this is instituted remains an important challenge to address going forward. A Canadian study found that staff training is the most common practice LTC facilities implement for LGBT-inclusivity, while more visible initiatives, such as LGBT programming, symbols, and community partnerships, were infrequently implemented (Sussman et al., 2018). Structural change is required alongside EDI training to achieve affirming spaces, for instance, through hiring LGBT people in all levels of organizations and creating LGBT resident/tenants' advisory boards (Sussman et al., 2018; Willis et al., 2017). Building LGBT community capacity can be further facilitated through the development of LGBT-specific programming and networking within facilities which can increase awareness about LGBT history and the unique issues facing these populations as they age (de Vries et al., 2019). Given the overall dearth of systematically collected data on residents in, for example, LTC settings, inclusive approaches are urgently needed, including offering tenants or residents the option to safely disclose their sexual orientation and/or gender identity to housing staff at intake.

Our findings are congruent with previous research that indicates that many older LGBT populations have ambivalent opinions regarding LGBT-specific or segregated housing (e.g., Putney et al., 2018; Rosenberg et al., 2018). Matthews et al. (2017) found that the creation of an apartment complex in Chicago specifically for LGBT seniors with limited income resulted in 57% of the residents reporting that their social networks had expanded after moving in, emphasizing how targeted housing may help address social isolation and improve health outcomes for this population. However, it is important to note that many older LGBT individuals prefer housing options that are inclusive of LGBT people within broader, diverse communities (Putney et al., 2018). This may be especially true for racialized older LGBT populations for whom white-dominated LGBT-specific spaces can be the sites of race-based exclusion, gentrification, and microaggressions (Hayslett & Kane, 2011; Sadika et al., 2020). Older, trans people have also expressed feeling separated and segregated from the broader LGB populations (de Vries et al., 2019). Our study offers important insights into the need for future housing research and policy-making to apply an intersectional lens to meeting the housing needs of older LGBT populations. Although LGBT-specific seniors' housing options may meet the needs of some, it is vital to consider a suite of housing options that will equitably address the health and social needs of diverse LGBT populations.

Limitations

It is important to note that while our focus groups were open to older LGBT Canadians in our five study sites, our sample was predominantly white, and few participants identified as transgender. As indicated in earlier housing research, we know that racialized LGBT people in Canada face significant overt racism and microaggressions in white-dominated LGBT spaces, and for this reason often avoid or feel excluded from LGBT community activities (Sadika et al., 2020). Trans populations face significant barriers in housing, health and social care settings and may feel that their needs are excluded in conversations centering cisgender LGB people (de Vries et al., 2019). Additional efforts are needed to ensure both racialized and transgender older LGBT populations feel welcome to engage

in housing research from their perspectives. Additionally, the application of other conceptual and analytic frameworks such as intersectionality (Crenshaw, 1989; Cronin & King, 2010) and the health promotion equity framework (Fredriksen-Goldsen et al., 2014) will allow for a deeper understanding of the intersecting contextual contributions to housing and health among older LGBT Canadians.

Note

1. The authors recognize that the acronym “LGBT” is no longer in use in much of the more contemporary literature addressing sexual and gender minorities, and is often replaced with “LGBTQ+” (i.e., lesbian, gay, bisexual, transgender, queer, and other sexual and gender minorities). In this paper, “LGBT” is being used intentionally to account for the historically derogatory uses of the term “queer,” to which many older adults have, in particular, been subject until relatively recently (Brown, 2009; Kia, 2016).

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