



as we grow older

a study of the housing and
support needs of older
lesbians and gay men

Ruth Hubbard and John Rossington

Commissioned by Polari with research moneys from the
Housing Associations Charitable Trust





5th Floor, Central House
14 Upper Woburn Place
London WC1H 0AE

AIMS AND ACTIVITIES PRIOR TO THIS RESEARCH

Polari was established in 1993 by lesbians and gay men concerned that the needs and wishes of older gay people were not being represented within existing housing and community care provision. After registration as a housing association with the Housing Corporation, Polari obtained a grant from the Housing Association Charitable Trust to commission research into the housing and support needs of older lesbians and gay men. Given the lack of research on this topic published in Britain, Polari felt that it had to find out what older lesbians and gay men themselves wanted before it started to develop its own housing provision.

AIMS AND ACTIVITIES SINCE THIS RESEARCH

In view of the recommendations made within this research, Polari's original vision of providing housing came under review, as it seemed to be just one of many strategies which would be likely to make a difference to the welfare of older lesbians and gay men. In addition the planning and resources involved in setting up a housing project would demand all the energies of what was then a small un-funded body. The emphasis changed from wanting to set up a new specialist housing to putting pressure on existing service providers to include and meet the needs of older lesbians and gay men.

In the light of this, Polari decided to shift its focus onto strategies which would be likely to benefit more people across the whole country. These now include:

- A strategy which looks at housing and social care together, as they are experienced by older lesbians and gay men.
- Development of training and awareness-raising programmes to promote inclusive, effective provision by existing service providers.

- The provision of information about existing practice.
- Building a national network of organisations and individuals who have an interest in the above.
- Development of mechanisms to enable older lesbians and gay men to articulate their own housing and social care needs.
- The provision of information about informal social support groups to reduce the high levels of isolation experienced.

From 2002 to 2005 Polari's Polari in Partnership Project has been involving older lesbians and gay men in local decision making by

- forming local groups in Hackney, Kingston and Westminster to discuss their needs and their views of local services
- working with local councils; PCTs and other health service trusts; local Age Concerns and the voluntary sector; and other relevant bodies.

Work has focused on housing, health, care and other help to stay independent, and community safety. The project has been funded by the Community Fund, Bridge House Estates, City Parochial Foundation, Lloyds TSB Foundation and Comic Relief. An evaluation is being undertaken and a report will become available in autumn 2005.

HOW TO GET INVOLVED

We welcome individuals and group members who want to join us in Polari's aims. There are many ways in which you can help by sharing your views, passing on useful contacts, spreading the word, helping out with regular tasks, participating in focus groups or as a member of the Management Committee. Membership is free.

Please contact us at:

POLARI

5th Floor, Central House
14 Upper Woburn Place
London WC1H 0AE

Tel 020 7255 4480

Fax 020 7255 4482

Email: info-polari@madasafish.com

www.polari.org

ACKNOWLEDGEMENTS

We would like to thank the following for their significant contributions:

Kate Devlin
Dr Hugo de Waal
Evelyn Mensah
Chris Messelah, COC, Amsterdam

and also acknowledge the assistance of:

Rashida Bharmal, Age Concern England
Liz Barker, Age Concern London
Sylvia Barratt-Moore
Howard Carr
Steve Cody
Louise Hart, Association of Greater London Older Women
Richard Johnson
Arthur Law
Tracey Roose, National Federation of Housing Associations

and the help of the following organisations:

Afternoon Salon, COC, Amsterdam
Circle 33 Housing Association
Libertines
Liverpool Housing Trust
Manchester Alliance of Community Care
North British Housing Association
Northern Older Lesbian Network
Pimpernel Group
September Group

and for their support in producing this publication

Centre for Policy on Ageing

Contents

Section 1:	INTRODUCTION AND BACKGROUND	
1.1	Introduction to the Study	6
1.2	The Research Context	10
1.3	The Public Policy and Practice Context	20
Section 2:	THE EXPERIENCES AND VIEWS OF OLDER LESBIANS AND GAY MEN	
2.1	Findings from Older Lesbians and Gay Men	25
2.2	Developing Services: What Lesbians and Gay Men Want for the Future	46
Section 3:	WHAT IS AVAILABLE, WHAT IS POSSIBLE?	
3.1	Housing Providers: What Are They Saying?	63
3.2	Lesbians and Gay Men Taking the Initiative	72
Section 4:	CONCLUSIONS	
4.1	Conclusions and Recommendations	80
	BIBLIOGRAPHY	84

SECTION 1: INTRODUCTION AND BACKGROUND

1.1 Introduction to the Study

We were commissioned by the Polari Housing Association to research the housing needs of older lesbians and gay men. This report is the result of that research.

The original brief was:

- What are the housing needs of older lesbians and gay men?
- What is the range and extent of unmet need amongst that group?
- What do they want, both in terms of buildings and service provision?
- What type and level of provision is needed, how can it be provided and can existing housing models be adapted?

From the outset it was clear that very little work had been undertaken in this field. Older lesbians and gay men have been ignored in this country, both by the gay and lesbian community and by statutory providers of community care and housing services.

Research was undertaken, therefore, from a low base of previous knowledge and it was decided to approach the project in a number of different ways:

- We produced a questionnaire which we attempted to circulate as widely as possible through a number of established groups/networks for older lesbians and gay men; by extensive advertising in the lesbian and gay media and housing/community care publications; by working with individuals who through their work had contact with the group

we were seeking to reach; and by attending lesbian/gay events and directly approaching possible respondents. The findings are covered extensively in this report.

- We conducted extensive interviews with a small number of selected older lesbians and gay men who have experiences of relevance to this report; they are cited and quoted throughout the report.
- We held public meetings in Brighton, Manchester and London. In London, separate meetings were held for women and men. In Brighton the meeting was predominantly male, and in Manchester exclusively female.
- We conducted interviews with a range of housing providers and a survey of managers of residential care homes and wardens of sheltered housing schemes.
- We looked at the available literature and at the work that has been undertaken both in the United States and Holland. We followed this up with a visit to Amsterdam.

We would like to acknowledge the co-operation we received from many older lesbians and gay men. We were appreciative of their honesty and openness to, at times, very personal questions.

We were amazed by the strength and warmth of so many people we met. Often this strength was exhibited by people who have suffered from homophobia that we can only imagine:

'I was first sent to see a psychiatrist in 1925 when I was 17 years old. I remained under treatment for 25 years receiving aversion therapy and drug treatment. This includes two periods as an inpatient. In 1950 I was discharged and told I was incurable. It is only in the last 5 years that I have felt good about myself and my sexuality.'

Arthur (86), Sussex

There is some evidence that lesbians and gay men show great strength and adaptability as we grow older:

- US social research findings indicate that there are a number of factors which are associated with positive ageing in lesbians and gay men.
- In Holland, amongst the extensive clubs for older lesbians and gay men, chronic mental health conditions associated with older people, such as Alzheimer's and other dementias, are virtually unknown.
- We were unable to contact any older lesbians and gay men who suffered from mental infirmity despite extensive attempts.
- Though anecdotal, the evidence that exists shows that perhaps fewer lesbians and gay men enter specialist accommodation for older people.

We believe that there is a need for more systematic UK research in these areas.

We believe that the quality of life for lesbians and gay men is enhanced by the maintenance of good social networks. Those who have nurtured friendships throughout their lives, and have access to appropriate social networks, have a far better quality of life. There are particular issues now arising for those who have lost so many friends through AIDS.

At the end of the report we set out an agenda of issues we believe need to be addressed to meet the needs of older lesbians and gay men.

Lesbians and gay men must recognise the importance of our older citizens to our community. They represent our past, as books like *Daring Hearts* (Brighton Ourstory Project, 1993) and *Women Like Us* (Neild and Pearson, 1992) illustrate. Many of the rights we now enjoy were achieved by them. They also represent our future. As such, they should be treasured and supported.

Finally we would like to state that this work has been a privilege to undertake. We now both understand ourselves and the completeness of our sexuality better.

Ruth Hubbard and John Rossington
Lima Research
November 1995

1.2 The Research Context

There are no published research studies looking at the housing/support needs of older lesbians and gay men in this country.

A limited amount of (mostly US) research has addressed ageing in lesbians and gay men, with some important findings and identification of some of the social/emotional/legal issues and discrimination facing older lesbians and gay men. These findings are discussed in this chapter. There may be difficulties, however, in trying to translate US research findings directly into a British context.

Recent years have also seen, both here and in the US, a number of publications focusing on the lives of lesbians and gay men in this century, for example Porter and Weeks (1991); Kennedy and Davis (1993); Lesbian Oral History Group (1989); Gay Men's Oral History Group (1989); and Brighton Ourstory Project (1993). These life story approaches are important as we make attempts to 'reclaim' our past, and they are often moving testaments to the strength, adaptability and courage of lesbians and gay men in facing homophobia. However, it is unclear how they can make a major contribution to addressing some of the specific problems and social policy issues that older lesbians and gay men face as they look to the future.

Some limited research in Britain has looked at lesbians and gay men and housing. A few groups have attempted to identify the issues, and raise awareness of, some of the housing/support needs of older lesbians and gay men. This notably applies to

Pensioners' Link Lesbian Workers' group. In addition, some policy initiatives taken by housing and care providers have been evident, leading to a body of literature. British research and policy work/campaigning is referred to in this chapter. In focusing on broad equal opportunities objectives, however, lesbians and gay men have often been subsumed with other groups, with little recognition of the specificity of the discrimination faced. Further, ageism frequently goes unrecognised as an issue for equal opportunities.

US research on lesbian and gay ageing and British findings around housing for lesbians and gay men are the focus of this chapter and provide the contextual background to the study, introducing some of the issues and themes. There are good summaries elsewhere of housing research and older people generally, such as Clapham, Kent and Smith (1990); relevant studies are referred to where appropriate throughout this report, and the general policy and practice context around housing and care for older people is addressed directly in the next chapter. However, the study commissioned by Polari to a large extent breaks new ground and, as such, it is an exploratory piece of research.

▪ US Research Findings

LESBIAN AND GAY AGEING

Berger (1980; 1982a; 1982b; 1984), amongst others, forcefully challenges the stereotypes of older lesbians and gay men. In the process, some of the positive factors associated with lesbian and gay ageing emerge.

The picture painted by US research, such as that cited above, bears no relation to any stereotypes that exist of the older, increasingly effeminate, no longer sexually attractive gay man who is isolated from friends and family, preying on children or paying for sexual favours, who is, of course, ultimately 'desperately unhappy' (Berger, 1982a, p 237). Kehoe (1989) points out that stereotypes of older lesbians may be less pervasive because of the comparative historical invisibility of lesbians, coupled with the invisibility generally of older women.

However, the picture of lonely, embittered older lesbians without family and friends and hiding from shame again tells us more about homophobia and societal beliefs and attitudes than it does about the experience of being an older lesbian.

In Berger's (1982b) study, gay men over 40 were as well-adjusted as younger gay men, reporting less depression and few psychosomatic symptoms. Older gay men were, in fact, more satisfied with life than a sample of older heterosexuals. More recently, Quam and Whitford (1992) find high levels of life satisfaction amongst lesbians and gay men over 50. Others, for example Weinberg and Williams (1975), Kelly (1977) and Minnigerode and Adelman (1976, cited by Berger, 1982a) report similar and additional positive findings about (mainly) gay men and their adaptation to ageing. Kehoe's (1989) study of 100 lesbians over 60 reveals older lesbians as having good self-images with very positive feelings about their sexuality and with networks of (mainly lesbian) friends around their own ages. Wolf (1978) and Robinson (1979) (both cited by Berger, 1982a) found that older lesbians' friendship networks acted as kinship supports, in the absence of traditional family supports. Laner (1978) found older gay men preferred, too, associating (and having relationships) with peers rather than substantially younger or older people.

These positive findings relating to older lesbians and gay men's adaptability to ageing may be associated with a number of factors, as summarised by Berger (1982a):

'Older lesbians and gay men may have developed an ability to isolate their self-image from society's rejection/discrimination of them. Thus self-image remains high despite homophobia and also despite ageism. (An alternative explanation is favoured by Friend (1989) who states that by challenging heterosexism and minimising homophobia, older lesbians and gay men have a greater potential to age with a sense of power, pride and fulfilment.)

Older lesbians and gay men, if on their own, may be able to find support within networks that do not regard being single as being out of place.

The self-concepts of lesbians and gay men may be less tied to notions of masculinity and femininity so that when physical changes occur as one grows older (such as loss of some strength and sexual capacity for men, and loss of reproductive ability for women), such losses may be much easier to adapt to.

As older lesbians and gay men's life patterns/events may not have followed conventional patterns, there may be less experience of "role loss", such as no longer being a "wife" or "husband" (in the conventional sense), when a partner dies, or no longer having emotionally/financially dependent children. In addition, "role flexibility" may be more the norm in lesbian/gay relationships, so that when a partnership splits up in later life, or when one of the couple dies, the remaining person can, say, cope with cooking, laundry, bills and so on'

Despite US research emphasising the success of lesbians and gay men in their adaptation to ageing, problems faced specifically by the older lesbian and gay man are also identified. The broad sweep of most studies, however, means that none of these social issues are explored in depth and policy solutions not generally addressed at all. Housing/care issues for older lesbians and gay men are usually touched upon, for example Dulaney and Kelly (1982); Kimmel (1978); Kehoe (1989).

Thus, for example, there is a recognition of how hospital and nursing home policies 'inadvertently' (Berger, 1982a) create problems for lesbians and gay men.

'Nursing homes rarely make provision for the sexual expression of any of their residents, but even less so for their homosexual residents. Will the residents be placed in a home that is accessible to the same sex partner? Will the home allow conjugal visits with the resident's partner? Will roommate assignments be made so that older homosexuals in the same facility can share rooms? If staff and other residents become aware of the older person's homosexuality, will the quality of service

decline? Will the person be ostracised?' (Berger 1928a, p239).

Other issues identified are legal problems, particularly around wills and property inheritance (Dlugos, 1984). Emotional needs, particularly around bereavement, and specific medical needs are also acknowledged as having salience for older lesbians and gay men.

Kehoe takes a slightly different approach: the problems that older lesbians face, she states, are generally those that face many older women, namely economic worries and loneliness, especially for those lesbians who are retired and living outside metropolitan areas where organisations such as SAGE (Senior Action in a Gay Environment) in New York and GLOE (Gay and Lesbian Outreach to Elders) in San Francisco, bring them together. Berger (1982b) also finds many older gay men are 'isolated from each other' (p 14).

Much US research on lesbian and gay ageing, therefore, generally emphasises the positive attributes lesbians and gay men bring to ageing and their consequent successful adaptation in the majority of cases. Some however, for example Kehoe, would stress less the special nature of this (in her case lesbian) ageing and more the commonalities experienced by older people (and in her case, older women) generally. Whether lesbians and gay men adapt better to ageing or more generally whether they are, in fact, intrinsically 'different' from other older people is debatable. What is not in doubt, where it is touched upon, is that even if lesbians and gay men adapt positively to ageing there are also specific difficulties faced by them in certain contexts that often relate to the particular discrimination they face; they bring a certain experience of discrimination which needs to be acknowledged and addressed. This discrimination may relate to discrimination that older people face generally coupled with and compounded by discrimination because of their sexuality (this can of course be compounded with other factors based on race, class, gender, disability, etc.) This experience and the issues raised are little explored in US research on lesbian and gay ageing and consequent policy implications not developed. It is hoped this study extends this discussion.

US RESEARCH FINDINGS IN THE BRITISH CONTEXT

From the previous paragraph it is clear that there are at least three key problems with the nature and focus of US research in attempting to translate it directly into the British context:

- a) US research on older lesbians and gay men displays what appears to the British reader to be a preoccupation with individualistic/therapeutic approaches. Corresponding individualistic/therapeutic solutions are also evident, with what we might be more inclined to identify as broader societal social problems. The US focus is often at the expense of the critical examination of policy, institutional and wider societal structures and approaches. The US approach is typified by books such as *Lambda Gray: A practical, emotional and spiritual guide for gays and lesbians who are growing older* (Reyes,1994), which is a collection of predominantly personal essays on the experience of being an older lesbian or gay man, with a concentration on personal relationships and personal fulfilment in this role. Such approaches reflect historical, cultural and political differences between the USA and Britain.
- b) The social policy contexts of Britain and the US are fundamentally different. This applies to housing, health and the care of older people as much as any other area.
- c) US research on lesbian and gay ageing (which is the main thrust of all work on older lesbians and gay men) is, in itself, abstracted to some degree from policy concerns.

Despite these problems, the research on older lesbians and gay men in the USA has several important functions:

- a) To a lesser or greater extent, it identifies older lesbians and gay men as a group with special personal characteristics. However much one might also seek to emphasise similarities

between older people, this approach at least does not automatically and immediately 'problematise' older lesbians and gay men. Positive benefits to being an older lesbian or gay man are described, *despite* homophobia and discrimination.

- b) It identifies a number of general policy concerns including those in the area of housing/health, which can then be more specifically addressed in the British context.
- c) It highlights methodological differences including the make-up of samples and the difficulties of contacting older lesbians and gay men. This highlights the invisibility of the group generally, and points up the efforts required to successfully reach older lesbians and gay men. US research on older lesbians and gay men is, in fact, overwhelmingly based on small samples with generally fewer than 50 subjects and little diversity in terms of social class, ethnic background and so on.

■ Research on Lesbians and Gay Men and Housing in Britain

Housing as an important and specific issue facing lesbians and gay men has been recognised in some quarters: by housing campaigners (and their associated press), for example Shelter, CHAR (Housing Campaign for Single People); by certain policy makers, for example particular local authorities; and by lesbian and/or gay organisations and, in particular, lesbian and/or gay helplines who have long flagged up the fact that the greatest proportion of calls relate to housing difficulties (for example Dibblin, 1988; Foster, 1988).

Despite this, almost no systematic research has taken place on lesbian and gay men's housing needs. The specific research that does exist is often anecdotal or based on one or two case studies and, whilst useful, makes it difficult to widen analyses and findings to all lesbians and gay men.

Perhaps the most widely quoted research in this area is Anlin's (1989) *Out but not Down! the housing needs of lesbians* which was a survey of 28 lesbians. Significantly, the survey confirms that housing difficulties for lesbians are, indeed, often directly related to sexuality (with some severe cases of harassment and violence cited). Lesbians in the survey wanted to build up a safe community, living close to friends or in areas with large numbers of lesbians, but where they could also maintain their privacy/space through living in self-contained rather than shared accommodation. The ages of those surveyed ranged from 19 to 43 (five were over 40), so it is difficult to make firm conclusions about the specific difficulties/needs of older lesbians.

Looking at the issues from a slightly different angle, Brown's (unpublished, 1987) report examined local authority housing policies in London boroughs, finding some widespread discriminatory practices operating. For example, only 55 per cent of London boroughs at this time gave gay/lesbian partners the same rights of succession to council housing as heterosexual partners. Survey evidence to back up assertions of the lack of equal rights in certain areas is clearly important. This particular finding will have also had specific significance for older lesbians and gay men.

In addition, by focusing specifically on lesbians and gay men (which both Anlin and Brown do), rather than general equal opportunities issues, attention is drawn to this group and issues which **specifically** affect lesbians and gay men (and how issues identified for, say, disabled or black people could be compounded by issues around sexuality). Some local authorities appear to have been reluctant to directly address housing issues for lesbians and gay men, preferring instead to take wider and more general equal opportunity 'good practice' approaches across the board, for example in harassment policies. This may deny the specific experience of lesbians and gay men.

The other research findings concerning housing and lesbians and gay men relate specifically to young lesbians and gay men and homelessness, with the central finding that disproportionate numbers of young lesbians and gay men are homeless/in housing difficulty because of hostility towards their sexuality, often from parents (Foster, 1988; Dibblin, 1991). Whilst this does not directly relate to older lesbians and gay men, it gives some indication of the stress under which relationships can be placed following the discovery or assertion of a lesbian/gay sexuality. In addition, CHAR (Housing Campaign for Single People) have recently reported (cited by Shelter, 1993) that those who work with older, single, long-term homeless people are beginning to realise that significant numbers originally lost homes in similar ways, many years ago.

With such few existing studies (and with none specifically relating to **older** lesbians and gay men) groups and organisations have consistently pointed out the lack of research in this area (for example Association of London Authorities, 1990; CHAR, 1986; Dibblin, 1988). A reluctance to fund such research compounds the invisibility of discrimination against lesbians and gay men and allows their needs to continue to be not properly recognised (Association of London Authorities, 1990).

Despite this context, some groups have attempted to raise awareness of the specific needs of older lesbians and gay men in relation to their housing (13 of the 28 recommendations from the Older Lesbians Conference in 1984 specifically relate to housing). This applies particularly to the Pensioners' Link Lesbian Workers' Group who produced a (1989) report on old lesbians and which led to an article in *Social Work Today* (1989). Through case studies, the report (reproduced by the Lesbian Information Service, 1994) and article graphically illustrate some of the issues that older lesbians face with regard to their housing and care, including residential care. These publications provide a good introduction to themes such as

social isolation, fear of coming out in the local community, living in areas where few lesbians and gay men live, discrimination possibly faced in residential care, and economic difficulties. They also reveal some of the housing aspirations of older lesbians.

▪ Conclusions

This Polari-commissioned research study is much needed. In itself it will not supply all the answers to questions around older lesbians and gay men and their housing needs and certainly not to those questions for all lesbians and gay men. Although some voluntary sector groups have, in recent years, attempted to raise relevant issues and achieved some significant policy gains, this has been in the context of a virtual research vacuum.

1.2 The Public Policy and Practice Context

This project is not designed to look at the policies of providers of services and accommodation for older people. However, it is important to acknowledge the framework of the development of services that is the context in which any development of resources will need to work.

- **Community Care**

The NHS and Community Care Act 1991 has had a profound impact on the provision of housing and support services for older people wherever they live. The number of residential homes is expected to reduce over the coming years as more and more older people are supported to live in their own homes. The act introduced 'needs assessment', a process by which each person's support needs are identified and a 'care package' devised to meet them. However, the budgets local authority social services departments have to meet these community care needs are limited and there is considerable evidence that older people are still being placed in residential care because of a lack of community care resources (National Federation of Housing Associations, *Community Care in the Market Place*, 1994).

Very few local authorities actually own their residential homes now. Most of them are within the private sector, varying from very large companies through to small family owned and run homes. However, there is a small vibrant voluntary sector still operating. Simultaneously, community care contracts to provide services traditionally identified with local authorities, such as home helps, meals on wheels and day centre provision, are being awarded to private sector firms and voluntary organisations.

There is increasing evidence that the budgets allocated to local authorities are not sufficient to meet even some of the most basic demands made on them. As a result councils are investigating, and many are introducing, charging policies for 'those who can afford it'. Relatives and carers are being put under greater stress.

▪ Housing

Housing providers are, nevertheless, looking at ways of providing support and care for their tenants through more imaginative provision of services than normally associated with traditional housing management. Amongst the schemes established are the redefining role of the warden in sheltered accommodation, increasing the care services in sheltered housing, the establishment of peripatetic care teams to enable people to stay in their own homes and the provision of home care in leased housing. However, it should be noted that many of these schemes are themselves experiencing funding problems.

SHELTERED HOUSING

The government has been concerned for some time at the future of sheltered accommodation. They commissioned a

survey from Ernst and Young on sheltered housing which was completed in 1991/1992, though it has not been published. However, the main findings are an open secret and can be summarised as:

- A. There is over provision of sheltered housing but an under provision of sheltered housing for very frail people.
- B. Providers should consider adapting their present stock to meet the needs of frail older people.
- C. Too many people who enter sheltered housing are not in physical need of that accommodation.

These conclusions will not come as a surprise to most people already working in the field. Many providers have already identified the problems, and organisations like Anchor Housing Association had undertaken considerable research themselves. There is increasing evidence that:

- Many sheltered accommodation blocks were inappropriately designed with small bedsit units being particularly unpopular.
- Many blocks were in poor physical location, away from shops and public transport and sometimes at the top of steep hills!
- More people are wishing to stay in their own homes rather than go into specialist accommodation.
- A lot of people expressed a preference for sheltered accommodation did so not because of their physical health but because of their concerns over personal safety.

However, it would be wrong to leap to too many conclusions over these findings. We are faced with a rapidly growing population amongst older people. The Ernst and Young report was also completed before the effects of the community care legislation could be assessed.

Government funding for new sheltered housing for the elderly is likely to be extremely limited. The Housing Corporation who fund housing associations have cut the percentage of their

allocation for sheltered accommodation by five times in less than five years.

STAYING PUT

If the aspirations of older people and the thrust of the NHS and Community Care Act 1991 are to be met, it is vital that the physical state of a person's own home allows them to remain in it. Local authorities have a limited budget for adaptations and the programme is in most areas spent shortly into the financial year with applicants facing very considerable waiting times. The funding system for grants to owner-occupiers is inflexible and fails to meet their needs.

▪ Conclusions

The aim is for fewer people to be placed in institutional care with greater emphasis being placed on providing services to people in their own homes. However, in practice some local authorities are already recognising that large residential care homes can prove cheaper than high standard care in the community. Sheltered housing and its future are being reviewed at the present time. Its role is likely to be restricted. Many housing providers are examining their role and exploring the possibility of providing care and support to their tenants in both their specialist and their general stock. Local authorities are increasingly becoming enablers rather than providers and the providers in the voluntary and private sectors are becoming competitive bidders. Local authorities' other key role will be as the prioritiser of need and assessor of means to pay.

All the conclusions at the end of this report are made against the backdrop of this policy agenda.

SECTION 2:
THE EXPERIENCES AND VIEWS
OF OLDER LESBIANS AND GAY MEN

2.1 Findings from Older Lesbians and Gay Men

■ Research Methods

We produced a questionnaire which we attempted to circulate as widely as possible: through a number of established groups/networks for older lesbians and gay men; by extensive advertising in the lesbian and gay media and housing/community care publications; by working with individuals who through their work had contact with the group we were seeking to reach; and by attending lesbian/gay events and directly approaching possible respondents.

We conducted extensive interviews with a small number of selected older lesbians and gay men who have experiences of relevance to this report; they are cited and quoted throughout.

We held public meetings in Brighton, Manchester and London. In London, separate meetings were held for women and men. In Brighton the meeting was predominantly male and in Manchester exclusively female.

We conducted interviews with a range of housing providers and a survey of managers of residential care homes and wardens of sheltered housing schemes.

We looked at the available literature and at work that has been undertaken in both the USA and Holland. We followed this up with a visit to Amsterdam.

■ Participants

One hundred and thirty-one lesbians and gay men returned completed questionnaires. Given the lack of networks for older lesbians and gay men and their invisibility on the commercial pub/club scene, this was a reasonable response. However, the resources required in terms of time, advertising and outreach to achieve such a response in the available time were considerable.

Clearly the sample of lesbians and gay men achieved was not random or necessarily representative of older lesbians and gay men in general.¹ It was intended, however, to contact and engage a wide cross-section of older lesbians and gay men and, in this respect, attempts were largely successful and more successful in achieving diversity compared to much US research:

- Half the sample was female, half male.
- A range of people of different ages returned the questionnaire (see Table 2 for breakdown of respondents' ages by sex). A slightly older overall sample of gay men was achieved compared to lesbian respondents. The questionnaire was entitled 'Survey of the Housing Needs of Older Lesbians and Gay Men'; respondents self-selected in terms of whether they felt this applied to them – no guidelines on a lower age for respondents was stated.
- Over 10 per cent of lesbian respondents identified themselves as belonging to an ethnic minority.
- Thirteen of the lesbians and 14 of the gay men defined themselves as disabled (20.6% of the sample) (see Table 1).
- A variety of housing tenures and living arrangements were apparent.

¹ It is probably conceptually and practically impossible to achieve a random sample of this group; the means of locating the sample and the level of response reflect the experience of other researchers, for example Kehoe (1989), Berger (1982b).

Table 1
Disability and ethnicity of respondents

	Lesbians	Gay men	All
Disabled	13 (20%)	14 (21.2%)	27 (20.6%)
Ethnic minority	7 (10.8%)	0	7 (5.3%)

Although seven (over 10%) of the lesbians identified themselves as belonging to an ethnic minority, none of the gay male respondents did (see Table 1).² A further three questionnaires arrived after analysis and it was impossible to include these – two of these (women) identified themselves as black. Overall, numbers are probably too low to draw any significant specific conclusions in this area. A focused study in this particular area might be appropriate.

In addition, it had been hoped to be able to contact more older lesbians and gay men in sheltered housing and in specialist accommodation for older people, such as registered care/nursing homes. Five per cent of older people generally live in such institutional settings. (Shelter, 1993). Despite several additional initiatives taken to contact older lesbians and gay men in both these groups, significantly greater numbers were not achieved and this clearly has implications for the conclusions that can be drawn. The substantial diversity that was achieved amongst respondents, however, was certainly reflected both in the variety of current living situations and in plans, aspirations and beliefs about the future which were expressed.

² Berger (1982) and Kehoe (1989) emphasised how unsuccessful they had been in attracting those from ethnic minority groups to their samples. Kehoe achieved a figure of 6 per cent. She states 'the greatest need in all research on homosexuals is to broaden the scope of sampling to include ethnic minorities and other categories not presently presented in published studies' (p9).

Table 2
Breakdown of ages of respondents to questionnaire

	Lesbians	Gay men	All
Under 40	5 (7.7%)	1 (1.5%)	6 (4.6%)
40-49	22 (33.9%)	5 (7.6%)	27 (20.6%)
50-59	16 (24.5%)	29 (43.9%)	45 (34.3%)
60-69	8 (12.3%)	22 (33.3%)	30 (22.9%)
70+	7 (10.8%)	8 (12.1%)	15 (11.4%)
Unknown	7 (10.8%)	1 (1.5%)	8 (6.1%)
Total	65	66	131

▪ Respondents' Current Housing Situations

LIVING WITH OTHERS

Table 3 shows who respondents live with or if they live alone. Over half (57.5%) of gay male respondents live alone, whereas closer to a third of lesbians live alone (38.4%). As people grow older, it appears that they are more likely to be living alone: 73.3 per cent of male respondents over 60 years of age (22 out of 30) live on their own. Although this does not hold true for female respondents aged 60-69, five out of seven women over 70 years of age live on their own (71.4%) This age factor may be partly accounted for by factors such as the death of partners and, to a lesser extent, friends.

Of those living with others, it is perhaps unsurprising that more lesbians (10) live with son(s) and/or daughter(s) than gay men (2). Within our sample, this is generally indicative of dependent children in the household, rather than an older parent living with (and perhaps dependent on care from) their children. In fact, only one gay man falls into this latter category.

Table 3
Who do older lesbians and gay men live with?

	Lesbians	Gay men	All
Living:			
Alone	25 (41%)	38 (55.1%)	63 (48.5%)
With partner	15 (24.6%)	21(30.4%)	36 (27.7%)
With son(s) and/or daughter(s)	10(16.4%)	2 (2.9%)	12 (9.2%)
With parent(s)	1 (1.6%)	2 (2.9%)	3 (2.3%)
With friend(s)	7 (11.5%)	4 (5.8%)	11(8.5%)
Other	3 (4.9%)	2 (2.9%)	5 (3.8%)
Total	61 ³	69 ⁴	130

The fact that more lesbians live with their dependent children than gay men is unsurprising given gender divisions in terms of bringing up children and especially when the younger overall ages of lesbian respondents, some of whom would be likely to still have dependent children, are considered.

Those lesbians and gay men (3) living with a parent are all their parent's primary carers. Slightly more lesbians than gay men live with friend(s). A few of these arrangements have obviously been carefully planned:

'The house is jointly owned by three women friends... we might get a helper to live in when we are all dodderers!'

Doreen (68), London

³ includes three lesbians who live with more than one of partner, friend, son/daughter, etc. Therefore, number of respondents to this question is 58.

⁴ includes three gay men who live with more than one of partner, friend, son/daughter, etc. Therefore number of respondents to this question is 66.

A quarter of lesbians and nearly a third of gay men live with their partners, although one might perhaps have expected even more people to be living with a partner, especially amongst lesbians. It is clear, however, that some other respondents have previously lived with partners who have then died:

'Since my partner died I have made quite determined efforts to contact older gay women without success.'

Jean (74), Greater Manchester

'I live in a pretty village, the atmosphere of which suits me as I am a private person, especially since my partner of 30 years died eight years ago.'

Rachel (71), Suffolk

'My own life partner died in an accident six years ago...and I am more or less adjusted to this.'

Robert (64), Middlesex

HOUSING TENURE

Sixty per cent of all respondents live in their own (or jointly owned) homes. This is very close to the figure for all those over 60 who are home-owners; 59 per cent according to the General Household Survey (1991). Given that, in general terms, women are more likely to rent than own and men more likely to own than rent (Forrest, Murie and Williams, 1990), it is surprising that slightly more lesbians own than gay men and that 29 per cent of lesbian respondents rent as opposed to 35 per cent of gay men. However, of those who do rent accommodation, gay male respondents are more likely to live in council/housing association properties (77.3%) than lesbians (55.5%) who are more likely to live in privately rented accommodation. Two respondents, a lesbian and a gay man, lived in mobile homes, and both were over 70. One 52-year old lesbian is homeless due to illness and staying with a friend temporarily, and a gay man of the same age is in very unsatisfactory, unpleasant and dangerous short term letting:

'I am the single gay man between seven other young people. I'm 52 with sciatica and they are 25/30. They are aggressive against gays and don't care about the house at all. I can't deal with them because I am gay. I need quiet life – I want to receive my friends without problems. I feel very insecure about the future. I'm very depressed. I don't know how I can change my situation. I am not English and don't speak well English...My ceiling fell down and I was hurt. My landlord gave me some compensation.'

Juan (52), London

The same man spends between a third and a half of his income on such unsatisfactory accommodation. Twenty-five other respondents spend the same proportion of their income on their accommodation, although at least they do not describe such unsatisfactory living conditions (details of income spent on accommodation costs is in Table 5). Two of the total of ten people who spend more than half their income on their accommodation are home-owners (one lesbian felt she had to lie about her income in order to be able to buy her own accommodation); the remainder (8) are in private rented accommodation. The majority of lesbians and gay men, however, spend less than a third of their income on their accommodation costs.

Table 4
Homes/housing tenure

	Lesbians	Gay men	All
Own/co-own	39 (63.9%) ⁵	35 (56.5%)	74(60.2%)
Rent ⁶	18 (29.5%) ⁷	22(35.5%)	40 (32.5%)
Sheltered	1(1.6%)	1(1.6%)	2 (1.6%)
Homeless	1 (1.6%)	0	1 (0.8%)
Mobile home	1 (1.6%)	1 (1.6%)	2 (1.6%)
Short term letting	0	1 (1.6%)	1 (0.8%)
Other	1 (1.6%)	2 (3.2%)	3 (2.4%)
Total	61	62	123

Table 5
Income spent on accommodation costs

	Lesbians	Gay men	All
Less than a third	40 (69%)	47 (72.3%)	87 (70.7%)
A third to a half	13 (22.4%)	13 (20%)	26 (21.1%)
More than half	5 (8.6%)	5 (7.7%)	10 (8.1%)
Total	58	65	123

⁵ includes one lesbian in a co-ownership scheme

⁶ includes those in housing association, council and private rented accommodation

⁷ includes one lesbian in a housing co-op and one in 'tied' accommodation.

CONDITION/MAINTENANCE OF HOUSING

Significant numbers – 21 lesbians (33%) and 15 gay men (23%) – experience some difficulties with the condition or maintenance of their homes (see Table 6). Eight of these (22%) live in council or housing association property; this means that people also experience problems with maintenance and the condition of their homes if they live in council or housing association property. The proportion of those with worries about the condition/maintenance of council/housing association property is roughly equal to the proportion of those **in** council/housing association property.

Table 6
Condition/maintenance of home

	Lesbians	Gay men	All
No problems	42 (66.6%)	50 (76.9%)	92 (71.9%)
Some difficulties	21(33.3%)	15 (23.1%)	36(28.1%)
Total	63	65	128

A backlog of repairs is mentioned by one 75-year-old man in council accommodation.

Another states:

'The building dates back to 1928, windows don't fit properly, toilet outside, no bathroom (bath in kitchen)...The Housing Association say they will refurbish building in due course – I have a letter to this effect dated November 1993 but no work started to date.'

Peter (54), London, with chronic lower back pain and clinical depression, living in a housing association bedsit

A 71-year-old woman who finds it impossible to heat her council flat in winter (in common with three others) says:

'Complaining is sometimes ignored, I'm probably seen as a pain.'

Jean (71) London

Respondents to this questionnaire (in common with other older people) find that as they increase in age, they are more likely to experience difficulties with the condition and maintenance of their home. The vast majority cite a lack of money for necessary repairs and an increasing inability to undertake DIY jobs as reasons. This inability is sometimes linked to health problems:

'My back problems have made some house and garden jobs difficult for me. It's OK for as long as I can pay others to do them but now, as my friends are getting older, I can't ask them for help so easily as they are also developing some physical problems.'

Elsbeth (58), Yorkshire

A few lesbians cite a lack of DIY skills and an inability to tell good 'tradespeople' from bad in terms of getting necessary repairs/maintenance done on their homes as reasons for poor housing maintenance. This might account for the slightly greater numbers of lesbians than gay men citing problems in this area.

In addition to those for whom the maintenance of their homes is problematic, a small number of respondents find getting into and round their home difficult. One 59-year-old woman in private rented accommodation states that the only entrance to her property is down an unlit and unsafe alleyway. Another woman in a wheelchair has a bathroom which is completely inaccessible to her. Several mention stairs as a problem:

'There are 58 stairs to my front door and no lift. They are beginning to become a significant problem.'

David (62), London

'I find the two flights of stairs getting harder.'

Peter (65), Liverpool, with arthritis and thrombosis in his legs

HEALTH

Many of the lesbian and gay men who returned questionnaires had health problems – 29 (46%) of lesbians and 31 (47%) of gay men (see Table 7). As previously stated, questionnaire respondents self-selected in the sense that no lower age limit was given to filling out the questionnaire. It seems likely that a significant factor in why individuals decided to fill in and return questionnaires may have been the experience of health problems, for these are very substantial proportions in our sample. Perhaps those with health problems are particularly aware of the lack of appropriate housing and support available to them as they get older.

A great variety of health problems were cited, with arthritis the most common. A few people clearly had potentially very disabling combinations of health problems, for example:

'I have angina, arthritis, cataracts and gall bladder problems.'

Frank (78), London

'Polio, malnutrition, anaemia.'

Leslie (82), Hampshire

'(a) Retinal (both eyes) and incipient cataract

(b) Possible prostate cancer

(c) Knee/back problems (arthritis)

Bernard (64), Hove

A few cited mental health problems, such as depression, and two respondents stated they had previously had breakdowns. None had degenerative conditions such as Alzheimer's Disease.

Table 7
Health

	Lesbians	Gay men	All
No health problems	34(54%)	35 (53%)	69 (53.5%)
Health problems	29(46%)	31(47%)	60 (46.5%)
Total	63	66	129

Many respondents recognise the current significance and future importance (to their housing and support needs) of their continued good health. This has been recognised as a very important factor by older people generally (for example Forrest, Murie and Williams, 1990). Many respondents acknowledge how lucky they have been, and are, in this respect. A few describe the positive steps they take to try and remain fit, healthy and active:

'I live a holistic lifestyle so that I keep healthy. I hope to live well into my 90s in my own home with a little support from community services. I consider a car essential to my independence and safety. I only have a small pension but I will ensure I can go on budgeting carefully to maintain my present simple lifestyle.'

Judith (59), London

Far more, however, express their worries; some have considerable anxieties about their health in the future and what declining health might mean for their lives:

'Future housing needs are dependent upon my continued fairly good health, having regard to my partner's unavoidable demands on me.'

Harry (70), Birmingham

'I worry about becoming even more physically disabled and my house becoming a prison.'

Jane (46), Nottingham

'Now that my partner is unlikely to live long I worry about what will happen to me if I am unable to manage for myself. I have already reduced my hours of work through severe back problems. I have no family and in the past never really considered being unwell or alone – now the prospect frightens me.'

Michael (50), East Midlands

Some respondents link their anxiety about their future health with their sexuality, and what declining health would mean to their gay/lesbian life:

'I worry about what I would do if and when I would get frail. I have seen other people lose their partners, unable to get about, ending up in hospital wards and old people's homes and having to be careful with visitors and so forth. It would be so much more relaxing (and therefore better for one's health) not to have to hide one's past – or indeed one's present, friends and relationships.'

Rosa (64), Yorkshire

'I anticipate the possibility of becoming old and sick and needing caring for, and residential care, with dread and hope that before this happens there will be residential accommodation for elderly lesbians.'

Patricia (44), Yorkshire

'The main problem is how best to keep active control over my life for as long as possible. Distance from shops, etc. and the inadequacy of public transport are main eventual worries for the next (car-less) stage. My chief worry is what happens if I lose my sight. At a later stage I foresee a need for continuous care'

(my mother died, after four years in a nursing home, at 95). I fear greatly being absorbed into such a “helpless” community and being cut off from friends/family.’

Bernard (64), Hove

INFORMAL AND COMMUNITY CARE

Table 8 shows that over 25 per cent of respondents are involved in providing care for somebody else, sometimes more than one person. These figures do not include those (mostly women) who are caring for dependent children. The figures indicate just how important and extensive the informal caring sector is, at least among this group of older lesbians and gay men.

Of the 17 gay men and 16 lesbians providing care for someone else, gay men are more likely to be providing care for members of their own families, or partners (as already shown, more gay male respondents live with partners than do lesbian respondents). Several of those caring for partners are in their 60s or 70s themselves; the desire to care for partners at home may be linked to worries about being unable to move easily as a couple into sheltered accommodation or residential accommodation as several respondents indicate. This may reflect a realistic assessment of such accommodation and its suitability for older lesbian and gay male couples (see Section 3.1, and the discussions in Section 2.2).

Table 8
Caring for Others

	Lesbians	Gay men	All
Care for someone else	16 (25%)	17(26.6%)	33 (25.8%)
Do not care for someone else	48(75%)	47 (73.4%)	95 (74.2%)
Total	64	64	128

Some undertake full-time and very extensive caring responsibilities.
For example:

'(I care for) my lover, doing just about everything, but nurses call in frequently – he gets attendance allowance.'

Arnold (73), London

'(I care for) my partner, full time and 100 per cent.'

Harry (70), Birmingham

'I help my partner with washing, dressing, getting around, shopping, cooking, most things.'

Gertrude (54), Surrey

Others provide much-needed practical help for others:

'(I care for an) aged parent – I help three days a week at her home.'

Lionel (52), West Midlands

'(I care for) my father who lives on his own 60 miles away. I get most shopping and do some cooking.'

Cyril (57), Tyneside

'(I care for) my sister, 83, now incontinent and in a nursing home. I look after her finances, etc.'

Graham (73), Bristol

Although also caring for family and partners, lesbians are more likely to care for friends/neighbours:

'(I care for) my next door (male) neighbour who has mental ill health. I make sure he is well and gets at least one hot meal a day.'

Elsbeth (71), Surrey

'The woman I live with is 82 [friend's mother]. I help with shopping and her secretarial work, etc.'

Muriel (52), London

Table 9

Community Care Services			
	Lesbians	Gay men	All
Home help	3	2	5
Meals on wheels	1	2	3
Community nursing	1	1	2
Day centre	1	2	3
Other	1	0	1
Pay for service	4	2	6
Free service	1	2	3

Lesbians receiving community care services = 5

Gay men receiving community care services = 4

Eleven lesbian respondents and seven gay male respondents state that they are cared for by someone else. These are generally partners although one carer is an ex-partner, one is a friend, one is cared for by her daughter and another by her two sons.

Nine respondents were receiving some form of community care – five lesbians and four gay men (see Table 9 above). A further four believed they needed some community care services extended to them, including nursing/cleaning/shopping, physiotherapy, home help, and one woman needed a carers group 'if I could be sure of tolerance' [Gertrude (54), Surrey]. Two others anticipated the need for formal services in the near future. Twice as many pay for their community care services as do not.

LOCAL COMMUNITIES AND NEIGHBOURS

Perhaps surprisingly, substantial proportions of respondents felt safe in their local communities (see Table 10), both lesbians and gay men. Some cited the fact that they lived in a 'liberal area' or within an area where substantial numbers of lesbians and gay men live.

Some respondents mentioned a general feeling of intimidation, the fact of rising crime and, for lesbians, particular safety issues for women. Others cited incidents, sometimes horrific ones, that had happened within their local communities. Those who reported such incidents represented sizeable minorities of the overall sample. Further, incidents were often related to the fact of being a lesbian or gay man.

'I live in a very male dominated area that is very homophobic. It's OK as long as I keep quiet about my lesbianism.'

Sylvia (45), South Wales

'As an "out" gay man, I am targeted by young criminals.'

Noel (65), Sussex

'I was raped three years ago by a teenager.'

Peter (55), London

'I have had graffiti on the house because of, and about, my sexuality.'

Lyall (58), Lancashire

Table 10
Feeling safe in the community

	Lesbians	Gay men	All
Feel safe	42 (68.9%)	43(68.3%)	85(68.5%)
Feel unsafe	19(31.1%)	20(31.7%)	39 (31.5%)
Total	61	63	124

Clearly, safety within their local community is an important issue for older lesbians and gay men, as it has been shown to be for older people generally.

Relationships with immediate neighbours, in some contrast, were almost always at least cordial (see Table 11). Over 80 per cent of our sample described relationships as being 'ok/fair' or 'good/excellent'. Only six respondents reported poor or bad relationships with neighbours. Again, these few were sometimes related to particular incidents around sexuality.

'I've had harassment from young men across the road and across the landing because of my lesbianism.'

Bessie (54), London

Table 11
Relationships with neighbours

	Lesbians	Gay men	All
Good/excellent	30 (48.4%)	42 (63.6%)	72 (56.3%)
Ok/fair	19 (30.6%)	12 (18.2%)	31 (24.2%)
Distant	4 (6.5%)	3 (4.5%)	7 (5.5%)
Mixed	1 (1.6%)	0	1 (0.8%)
Non-existent/don't know them	3 (4.8%)	6 (9.1%)	9 (7%)
No immediate neighbours	2 (3.2%)	0	2 (1.6%)
Bad	3 (4.8%)	3 (4.5%)	6 (4.7%)
Total	62	66	128

The US Kehoe (1989) study reported that 52 per cent of lesbians surveyed were not 'out' to neighbours. Although most respondents in this study mentioned very good relationships with neighbours, they were not commonly 'out' to neighbours. Few echoed the following easy comments about relationships with their neighbours:

'I am outrageously out.'

Matthew (43), Manchester

'Fine – no problem, and they know a dyke lives next door.'

Glad (71), Middlesex

'Plenty of gay neighbours, who I mix with!'

Jane (46), Nottingham

However, many respondents clearly valued their neighbours and felt their neighbours respected them, even when not 'out' (several commented that although not 'out' they were sure their neighbours knew). It is unclear as to whether not generally being out to neighbours is a result always of fear of the consequences, or other factors such as a simple desire for privacy, feeling that discussing one's sexuality is inappropriate with neighbours or some other reason. Kehoe (1989) interprets her figures as a simple desire for privacy but given levels of homophobia it would be surprising if fear of a negative response, or in extreme cases, even fear of violence did not play a part; judging by respondents' comments in this questionnaire different factors may be involved for different people.

'[We are] very guarded – my partner is very wary of their reactions so we're not out to them.'

Gertrude (54), Surrey

'I keep myself to myself and that's how I like it.'

Geoff (57), London

'The neighbours don't know quite what to make of me – never have male visitors, not many friends visit, they rarely see me in smart, "going out" clothes. I long to be able to be 'me' to the neighbours, to invite females to my home without husbands thinking the worst.'

Rachel (71), Suffolk

▪ Conclusions

Overall, the wide range of respondents to the questionnaire provide a very rich source of information about their current housing situations, health, communities, and caring roles/needs. Despite the diversity illustrated many of the specific issues facing older lesbians and gay men in these areas can be delineated. Older lesbians and gay men may be a multifarious group and experience discrimination common to many older people, but they also exhibit some commonalities of experience which can very often be linked to the fact that they are

lesbian or gay. Thus it is arguable that challenging discrimination needs to be central in the provision of any services.

The next chapter goes on further to discuss older lesbians' and gay men's hopes, fears and aspirations for the future and some of the specific services required, connected with their housing and care needs.

2.2 Developing Services: What Lesbians and Gay Men Want for the Future

▪ Looking to the Future

Many respondents to the questionnaire expressed their positive approaches to growing older and in terms of attempts to plan for housing and care needs; others state their worries and fears; many were both positive **and** negative about the future.

Lesbians and gay men clearly recognised the connections between their personal health, resources and well-being as they grew older:

'I am very lucky having enough money to support myself, with only minor health problems.'

George (64), London

'We are at present in good health and working.'

Iris (58), Ayrshire

'I would like to stay put (in my own home) depending on my health.'

Tom (51), East Anglia

'I am fortunate in that I have a job with a good salary so I can afford my own property in a nice area. If I were to become sick, however,...'

Kate (44), Avon

Even with good health and some resources, however, problems for older lesbians and gay men may remain. There are questions around 'community' and friends, relationships and lifestyles and the importance of these for the older person's comfort, security and quality of life. It is perhaps these issues that make the context for lesbians and gay men growing older different to that of heterosexual men and women. Heterosexual environments may be unable to respond adequately in these areas. This was recognised by many respondents:

'I will always be surrounded by straights/lack of lesbian community developments for local support. For myself I see no problems in meeting future housing needs in a physical/financial sense as I am financially secure. However, there is a lack of "suitable" provision to even buy into, in a social/community sense. As I get older I anticipate being more dependent on my immediate neighbours and should like these to be lesbian.'

Elizabeth (47), London

'I'm very fortunate in my circumstances but very aware of the lack of suitable housing in congenial environments for homosexual people.'

Betty (65), Shropshire

'As a retired social worker I have seen sufficient of the elderly being mixed hugger-mugger in mixed sex communities. In any case those that I know are all "straight" and I wish to maintain my lesbian independence and integrity to the end of my days. I would also wish my partner to be with me and our relationship accepted.'

Doris (60), Yorkshire

The unsuitability and unacceptability of much existing sheltered or specialist accommodation has been recognised by other groups who are discriminated against. No Asian or Afro-Caribbean elders were using the sample residential homes in a study in Leicester and minute proportions were using sheltered accommodation (cited by Patel, 1990). But black and Asian elders were not against such housing in principle. Patel states that much more consideration needs to be given to the needs and wishes of black elders including a greater commitment to countering racism. There are clearly echoes here with the expressed sentiments of older lesbians and gay men who feel their needs in existing mainstream accommodation will not be acknowledged and met.

The questionnaire specifically asked what housing options respondents felt that they had as they grew older. Again, the mixture of positive approaches, the worries and anxieties and the recognition of the importance of financial resources and health, was evident.

The vast majority of home-owners hoped to stay in their own homes, in some instances by raising income on their property, or moving to smaller, more suitable properties, presumably by 'trading down' and releasing capital. Saunders (1990) has pointed out that home ownership and being able to 'trade down' or raise income in this way, via mortgage annuity schemes for instance, indicates how home ownership 'may come to underpin privatised consumption in other areas of life' (p162). Certainly, some of those without their own homes expressed a belief that owning might at least bring some security for the future:

'Very little [option] as I can't see my economic situation improving so I can't see any hope of my owning my own property.'

Bessie (54), London

'There are not a lot [of options] unless you have "capital" or your own house.'

Maurice (58), London

Lesbians' and gay men's access to home ownership is, of course, not only affected by the economic disadvantage faced by lesbians as a group, but also by insurance companies who discriminate against gay men because of the perceived risk of AIDS (London Housing Unit, 1988; Association of London Authorities, 1990). Forrest, Murie and Williams (1990), however, assert that positive images home ownership may be overstated; although home ownership can deliver satisfaction and be a successful way of organising and controlling one's housing, it is not inevitably so: the health, design and general condition of the owned housing is important. As shown in the last chapter, many older lesbians and gay men are acutely aware of this.

There is evidence of some thought and planning, within available resources:

'If I survive my partner, I hope to find an unpaid helper in return for accommodation.'

Arnold (73), London

'I hope to do flat exchanges for selected weeks at the seaside with other elderly women who want to visit London.'

Janet (55), London

'We are accepted happily in our local community but realise we have to find somewhere to live when I do retire in a year or two as my accommodation comes with the job. We are thinking about a mobile home in Herefordshire so that we're close enough to stay in touch with friends and relatives.'

Susan (60), Gloucestershire

Despite this, many worries are expressed too, and many respondents believe they have no, few, or do not know of any, options they may have in terms of their accommodation as they get older:

'I have no acceptable options as almost all homes for the elderly or nursing homes are mixed.'

Nora (71), Lancashire

'Fewer options as money is/becomes a problem.'

Giles (50), Hull

'There are no options unless supplied by oneself.'

Rodney (55), Essex

▪ Developing Services

There were three areas in which lesbians and gay men were very clear that the development of services was a priority:

- a) specific community care services for lesbians and gay men;
- b) specific accommodation for older lesbians and gay men;
- c) the development of social and support networks.

COMMUNITY CARE SERVICES

Eighty-eight out of 117 respondents (75%) to this question wanted specific community care services for lesbians and gay men (see Table 11).

The minority who did not, where comments were made, generally had concerns in one or more of three areas: worries about creating a 'ghetto'; worries about saying their needs were different to everyone else's; and assertions that mainstream services should provide for their needs.

'I think it is more important that service providers and carers should be fully aware of, and trained about, our lives.'

Bernard (64), Hove

Others had little faith in such mainstream services to provide a non-discriminatory service, even if needs were similar.

'We have previously been neglected.'

Don (68), London

'[With specific services] acceptance would be made public so I'd feel more able to ask, as a lesbian carer, for what I need, without fear of discrimination. That is impossible at present.'

Gertrude (54), Surrey

Table 12
Respondents wanting specific community care services

	Lesbians	Gay men	All
Want community care services	46 (79.3%)	42 (71.2%)	88 (75.2%)
Do not want community care services	12 (20.7%)	17 (28.8%)	29 (24.8%)
Total	58	59	117

'They [home carers] don't know I'm gay, and if they did I know they wouldn't treat me the same, as they sometimes make comments that are overtly homophobic.'

Jim (65), London

Others see very positive reasons for the development of specific services:

'If I needed them, I would probably feel very lonely and it would help to feel that I was part of a genuine community of gay

people, including all the [community care] services listed above.'

Rosa (64), Yorkshire

'[There would be the possibility of socialising with other lesbians and gay men if not mobile.]'

Doreen (68), London

'I would feel more comfortable with gay attendance, around personal care, etc.'

Leslie (82), Hampshire

It should also be noted that many respondents see 'community care' in a very broad sense. Thus, as well as traditional services such as home helps and so on, respondents wanted:

'A meeting place – licensed, offering lunches and facilities for entertainment and meeting friends – outings/holidays.'

Jean (74), Greater Manchester

'Visits by kindred spirits/counselling'.

Janet (55), London

'Services geared up to our specific needs – eg daycare, befriending schemes for isolated people, respite care for carers, advocacy schemes, etc.'

Ruth (40), Leeds

Again, some of the specific issues faced by older lesbians and gay men are being recognised and interpreted into service delivery needs and aspirations for lesbians and gay men as a group.

ACCOMMODATION

'The idea of specific housing and/or sheltered accommodation for elderly gay men and women is a wonderful one. The resulting comfort, support and security would be priceless.'

Mike (57), Wales

Ninety-one per cent of lesbians and 75 per cent of gay men want to see specific accommodation for lesbians and/or gay men. Of those who do not want specific accommodation, worries about ghettos being created are mentioned again.

'I'm against ghettos.'

David (68), London

'Specific housing yes, but styled on "singles" – I do not want a ghetto.'

Noel (65), Sussex

'It might be helpful for some, but I feel it could become a ghetto.'

Susan (60), Gloucestershire

'I'm not keen on housing specifically for lesbians/gays – I prefer a more integrated approach.'

Peter (54), London

The theme of the importance of getting equal treatment from mainstream housing providers was also expressed by some participants.

'Equality is what is important.'

Tom (51), East Anglia

'I found it difficult to answer some questions relating to accommodation/services that are specifically for lesbians and gay men. I regard accommodation as a basic need for all.'

Sylvia (45), South Wales

Again, these views echo those of black older people. Patel (1990) states 'black elders are part of this society and hence entitled to mainstream services. The service designed to address black elders' needs (determined by them and located in their experience which is historically and structurally based) must ensure that the methods developed allow black elders to fight "racial" subordination' (p58).

Achieving equality is vital but older lesbians and gay men also have a desire for the development of their own specific accommodation, indicating little faith in mainstream alternatives, as described above.

Fears of 'ghettoes' could be linked to fears about personal safety and being an easy target and, indeed, when the addresses of hostels for lesbians and gay men run by the housing association Stonewall have been discovered, they have been subject to harassment (cited by Foster, 1988).

However, the overwhelming majority of lesbians (who, it could be argued, as women are even more vulnerable in terms of personal safety) favour specific accommodation and view such accommodation as actually **safer** than other types. A substantial proportion of lesbians comment that their preference would be for women- or lesbian-only accommodation.

'I would like to live in a gay community, preferably women only.'

Janet (55), London

'We would be interested in sheltered housing but not in a city, preferably for women and run by women.'

Iris (58), Ayrshire

'I'd prefer lesbians only though I'd be much happier with mixed lesbian and gay, rather than heterosexual.'

Moll (55), London

Table 13
Respondents wanting specific accommodation

	Lesbians	Gay men	All
Want specific Accommodation	51 (91.1%)	46 (75.4%)	97(82.9%)
Do not want specific accommodation	5 (8.9%)	15(24.6%)	20 (17.1%)
Total	56	61	117

When asked what kind of accommodation was wanted/needed, there were almost as many answers as respondents. Some respondents had clearly given it a lot of thought.

'Flats with warden and call system and a nursing home attached. Communal facilities available set near the local country. A place where one could take one's own furniture and keep one's pets. The communal facilities to include a good vegetarian/vegan option in restaurant meals. The nursing home to include complementary medicine and holistic nursing care.'

Judith (59), London

'I would like lesbian-only small units with simple cooking facilities but with a communal area for socialising, dancing and some card playing. Accommodation that allows independence and privacy but prevents women from being lonely.'

Muriel (52), London

'Small bungalows – one bed, living room, etc. Secure and warm but not segregated, ie a village, but yet be part of a street, say several in one street so you can mix in hetero society as well.'

Elspeth (71), Surrey

'Self-contained, warden assisted, beautifully laid out premises.'

Glad (71), Middlesex

There were, however, some recognisable strands in what respondents said. A large number of respondents talked about sheltered housing; it was more often mentioned than any other type of accommodation. The difficulties within sheltered accommodation for anyone who is 'different' have been recognised by Middleton (1983), who also notes from her study that 'isolated people were known and talked about. Single men had little chance of developing new friendships – a problem which could only be resolved by a highly improbable increase in the male intake' (pp 266-267). The idea of a men-only scheme does not seem to have occurred or be important to male participants.

Slightly fewer numbers mentioned residential care homes. Those that did often noted the importance of women-only or men-only facilities and staff.

'I am happiest in the company of other gay men. It would be a big strain if I had to go into an ordinary residential home – I would hate to have to go into a mixed sex hospital ward or nursing home and hate being looked after by women.'

Lionel (52), West Midlands

Included were often statements about the need for partners to be in, or close to, the care facilities, others (re)stated worries regarding being separated from their partner, and the need for continuing help after the death of a partner.

'[Would like] a caring environment enabling me and my partner to stay together with such support and assistance as either or both might need, particularly on the death of either.

Harry (70), Birmingham

Many mentioned a full range of accommodation options and several argued that the options didn't matter as long as provision, and those running it, was 'lesbian/gay friendly'.

'I've heard of no services/facilities for older lesbians apart from groups we set up ourselves. As I get older, I will not be able to rely just on my own resources or my friends, yet I will feel alien from heterosexual facilities. So we need a range of statutory and voluntary services and accommodation provided for lesbians and with lesbians having a real say in how they are run, and preferably lesbians running them.

Sara (44), Lancashire

One central theme was the need for privacy, preferably in self-contained accommodation, but with facilities which give opportunities for socialising and communal facilities generally; it is unclear whether these might apply to older lesbians/gay men as specific groups. Middleton (1983), again, shows that those who disliked the social side of communal life felt pressured into participating or inadequate for not joining in: 'communal facilities in existing schemes are, at best, a bonus and, at worst, an unwelcome burden' (p267). Perhaps it is a case of recognising that such schemes are not necessarily for everyone.

Comments on location partly echoed these thoughts with several respondents returning to the theme of wanting to live in an area populated with other lesbians and gay men.

'I would like to feel less isolated. Just the knowledge that people of my own orientation were near, then if any problems arose, we could help each other. Would help a lot for all concerned. I don't mean live in each other's pockets, just the psychological feeling of nearness.'

Peter (65), Liverpool

'I would be happier to live in an area where there was a large lesbian/gay community. At the moment my isolation prevents me from being out where I live although I am comfortably out elsewhere. I feel like I am returning to the closet whenever I come home.'

Pat (44), Yorkshire

'I'd like city centre accommodation within the gay village [Manchester].'

Sean (54), Lancashire

Others mentioned the seaside, notably the south coast around Brighton, and a few talked in general terms about wishing to live away from cities.

Finally, although a few respondents indicated they were involved in religious groups of some kind, several respondents emphasised a need for secular, not religious, provision:

'I am particularly anxious that any future choices should not be limited to "provision" by those who are convinced that God knows best and has put them in charge of someone – it might be me.'

Bernard (64), Hove

Overall, there is an overwhelming desire for specific accommodation and the potential benefits this could bring for older lesbians and gay men.

SOCIAL CONTACTS

One of the key findings from questionnaire respondents was the need for more social contacts for older lesbians and gay men. A degree of loneliness was expressed, despite the resourcefulness of many older lesbians and gay men. That some older lesbians and gay men are lonely should not be surprising given the almost total lack of networks/groups specifically for them. US research also frequently finds that despite positive ageing in lesbians and gay men, there is much loneliness.

For those living outside major metropolitan areas, there are few appropriate lesbian and gay groups to become involved with.

'I don't know how you contact older lesbians/gay men. I belong to the older lesbian network based in xxx and the oldest member is only 61 and with no problems relating to age. Most are in their 40s.'

Dora (71), Wales

'I dream of having a friend nearby who can acknowledge me without being nervous. I would like to see at least a third of the village gay.'

Rachel (71), Suffolk

'The loneliness of just not being able to have a laugh about things that gays find humour in and which "society" thinks is wrong, slowly eats away at you. Just to be with one's own people without the overt or obvious display of "being gay" for its own sake.'

David (62), Middlesex

It should be remembered that loneliness has assumed a prominent place in the image of old age generally and some studies find that loneliness among older people is not especially

prominent. Married women and single parents frequently turn out to be the 'loneliest' groups (Wenger, 1983).

Loneliness itself was expressed, then, by some of our sample. However, this was not overly extensive. What **was** very widely expressed, however, was a general desire for more lesbian and gay social contacts (see Table 14). This certainly does not reflect the sometimes influential idea that older people want to gradually withdraw or 'disengage' from society. This erroneous idea has been criticised for its negative view of old age but is still sometimes influential in policy debates; in policies which have sought to separate older people from society; in treating them as 'different' and in reinforcing negative images of old age (Clapham, Kemp and Smith, 1990).

The active and extensive desire for more social contacts as expressed by respondents was often for contacts in their own age range (again replicating US findings). In addition, the black lesbian respondents stated how they would like more social contact with other black lesbians, particularly older black lesbians.

Table 14
Respondents' desire for more social contacts with lesbians and gay men

	Lesbians	Gay men	All
More lesbian and gay social contact	42 (75%)	39 (69.6%)	81(72.3%)
No more lesbian and gay social contact	14 (25%)	17(30.4%)	31 (27.7%)
Total	56	56	112

The need for lesbian/gay company is compounded, for some, by the constant risk of unwanted 'disclosure' and discrimination/hostility from the heterosexual community.

'I am a member of the local golf club (very male oriented) and a spiteful letter was sent to the secretary informing the club that I was the president of the lesbian club in xxx (I am not the president, nor is there any such club). I was not challenged but an atmosphere has been created. I no longer feel welcome.

Jean (74), Greater Manchester

There are a few older lesbian networks across the country, notably the Older Lesbian Network in London and the Northern Older Lesbian Network, and some localised groups for gay men. However, in general there are few formal networks run by older lesbians and gay men to encourage friendship.

■ Conclusions

In some ways older lesbians' and gay men's expressed wishes about service developments in housing and care reflect the wishes of older people generally. Older lesbians and gay men want decent housing and community care services as they get older, appropriate to their needs, as well as opportunities for maintaining and developing social contacts.

However, because of a belief in and/or acute awareness of the specific discriminatory effects of current mainstream provision, many older lesbians and gay men want their own specific community care and housing services and opportunities for social contacts and maintaining supportive networks with other older lesbians and gay men. They believe that such specific provision will lead to appropriate and non-discriminatory services for them.

SECTION 3:
WHAT IS AVAILABLE,
WHAT IS POSSIBLE?

3.1 Housing Providers: What are they Saying?

An important part of this research was to attempt to ascertain the level of service that housing providers felt they were providing for lesbian and gay tenants. A number of providers were interviewed in the private, public and voluntary sectors. Across the board there was a general lack of awareness at the issues being raised and great surprise at the questions being asked.

There is a general assumption amongst many policy makers we spoke to that older lesbians and gay men did not have a sexual identity because of their age. Older people in general frequently suffer from a lack of recognition of their sexuality and restrictions are placed on its expression in many circumstances (Greengross and Greengross, 1989). Housing providers need to recognise the importance of a lesbian or gay identity generally, as well as acknowledge lesbian and gay men's rights to have sexual relationships.

This chapter is divided into three sections. Some time was spent talking to policy makers in organisations. However, it quickly became apparent that there was a lack of awareness of the quality of life lesbians and gay men could expect living in specialist

accommodation. We thus undertook a survey of staff within specialist schemes. The results of a similar exercise in Holland which duplicates many of our own findings were examined; this is the subject of the next chapter.

▪ Stated Policy

Many of the organisations interviewed for the research referred to their equal opportunities policy when they were asked about the position of lesbians and gay men within their own accommodation.

There are many examples of good, indifferent and bad policies that exist amongst housing providers. There are of course many issues of equal opportunities for lesbians and gay men which apply across the range of housing policy. It is not within the remit of this report to look at all those issues and they are well covered in the National Federation of Housing Associations document *Tackling discrimination against lesbians and gay men* (NFHA, 1993).

It is interesting that in this otherwise excellent report no mention is made of specific issues relating to older people in specialist accommodation. Common issues amongst housing associations and local authorities interviewed, housing organisations did not know if they housed many, if any lesbians and gay men or the quality of life they may be experiencing. None had ever been aware of any grievance being taken up on the grounds of sexuality and training for wardens of sheltered accommodation or staff of residential care homes on lesbian and gay issues was very rare.

No thought had taken place on the needs of lesbians and gay men to be able to be free to develop their own lifestyle in a context of semi or complete communal living. Neither had any consideration been given to the concept that lesbians and gay men might wish to spend more time with people who share their own sexuality.

There was little recognition that the emphasis on group living can actually exclude minorities if positive action is not taken.

'I went for an interview for sheltered accommodation and I was informed that it was a house rule that every morning at 10.30 a.m. all the residents have coffee together and tell each other what they did the day before. Well, they wouldn't want to know! So I took a flat in the private sector at £160 per week which has the mobility standards I need. I'm paying for it out of my life savings.'

Simon (78), Sussex

Additionally there is the private sector little appreciation that the way residential care homes promote themselves is heterosexist. The following are all quotes from the brochure of residential care homes.

'A real family atmosphere with children and grandchildren free to visit at all times.'

'Committed to the promotion of Christian family values.'

'Group outings to places of family interest.'

Many lesbians and gay men do not have children or grandchildren. A culture that is based on such concepts can be alienating to many and perhaps particularly to older lesbians and gay men.

■ Practice

Having faced growing frustration at the lack of awareness amongst policy makers of the needs of older lesbians and gay men in their specialist accommodation, it was decided to seek the views of people working on the ground.

SURVEY OF WARDENS OF SHELTERED ACCOMMODATION

We sent out a questionnaire to 150 wardens of sheltered accommodation schemes. These were picked randomly from the *Yellow Pages* directory in three geographical regions of England. A self-stamped envelope was enclosed for the reply and a letter explaining the project was included. Room was left for respondents to add their comments. We asked seven questions. The questions are reproduced here with an indication of what we were hoping to elicit.

1. Do lesbians and gay men have special needs living in accommodation for older people?
(Have the issues been considered by the project or/and the manager/warden?)
2. Would residents of your accommodation be able to be open about their sexuality?
(What is the practice in the home as viewed by the staff?)
3. Would you encourage lesbians and gay men to be open about their sexuality?
(What are your personal attitudes to lesbian and gay residents?)
4. Would it be possible for lesbians and gay men to develop relationships in your accommodation?
(Are lesbians and gay men regarded as having an active social life which can and should develop?)
5. Would you allow social events specifically for lesbians and gay men?
(Do you recognise that lesbians and gay men may wish to spend time with each other?)
6. Would you house a lesbian/gay couple in an established relationship?
(What commitment is there to equal opportunities?)
7. What action would you take if someone complained of discrimination because they were lesbian or gay?
(How would problems be addressed?)

Results

Thirty-seven (25%) of the sample returned the questionnaire. No respondent had received specific training on issues of sexuality, but equal opportunities training had obviously had beneficial effects.

The wardens who replied appeared confident, on the whole, in filling out the questionnaire. However, one Housing Association, a major national provider of sheltered housing for older people, returned the two forms sent to their wardens. They felt it inappropriate that their staff should have to answer such questions and referred us to their equal opportunities policy, which makes no reference to sexuality.

Do lesbians and gay men have special needs living in accommodation for elderly people?

Yes	No	Don't Know	No. of respondents
22 (66.6%)	6 (18.2%)	5 (15.2%)	33

Would residents in your accommodation be able to be open about their sexuality?

Yes	No	Don't Know	No. of respondents
14 (42.4%)	16 (48.5%)	3 (9.1%)	33

Would you encourage lesbians and gay men to be open about their sexuality?

Yes	No	Don't know	No. of respondents
19(57.6%)	13(39.4%)	1 (3%)	33

Would it be possible for lesbians and gay men to develop relationships in your accommodation?

Yes	No	Don't know	No. of respondents
25 (75.8%)	8 (24.2%)	0	33

Would you allow social events specifically for lesbians and gay men?

Yes	No	Don't know	No. of respondents
-----	----	------------	--------------------

17(54.8%) 13 (41.9%) 1 (3.2%) 31

Would you house a lesbian/gay couple in an established relationship?

Yes	No	Don't know	No. of respondents
25(80.6%)	6 (19.4%)	0	31

What would you do if there was evidence of discrimination against someone because of their sexuality?

Three wardens thought that equal opportunities could not operate in accommodation for older people.

Conclusions

Only 25 per cent of the forms were returned. The other 75 per cent could have been less sympathetic.

Many stated that they had never housed any lesbians and gay men. None positively stated that they had.

More wardens than not were personally supportive but recognised that there would be considerable difficulties for lesbians and gay men living in their accommodation. Most wardens stated that that they would openly house lesbian or gay male couples, supported by their organisations' equal opportunities policy. However, many wardens stated that such couples would face considerable antagonism. This is borne out by the comments of lesbians and gay men who live in specialist accommodation:

'In the [sheltered] accommodation I live in, nobody knows I am a lesbian. They mustn't. It is so gossipy and they pick on anybody who is different. It makes me very lonely.'

Jean (66), East Midlands

SURVEY OF CARE HOME MANAGERS

The results of this exercise were disappointing. One hundred and fifty of the questionnaires were sent out and 29 (19%) returned. Many of them were openly antagonistic. Commonly expressed views were:

Lesbians and gay men are only interested in sex and they are not interested in any other relationships.

All the residents are too old to have a sexual identity of any sort.

Lesbians and gay men are better off than heterosexuals because society panders to them.

Compared to the wardens there was little, if any, understanding of the concept of equal opportunities. Some managers expressed the wish to house lesbians and gay men, but usually on their terms.

Results

Do lesbians and gay men have special needs living in accommodation for elderly people?

Yes	No	Don't Know	No. of respondents
16 (57.1%)	4 (14.3%)	8 (28.6%)	28

Would residents in your accommodation be able to be open about their sexuality?

Yes	No	Don't Know	No. of respondents
14 (50%)	13 (46.4%)	1 (3.6%)	28

Would you encourage lesbians and gay men to be open about their sexuality?

Yes	No	Don't know	No. of respondents
11(42.3%)	14(53.8%)	1 (3.8%)	26

Would it be possible for lesbians and gay men to develop relationships in your accommodation?

Yes	No	Don't know	No. of respondents
20 (71.4%)	7 (25%)	1 (3.6%)	28

Would you allow social events specifically for lesbians and gay men?

Yes	No	Don't know	No. of respondents
16 (61.5%)	8 (30.8%)	2 (7.7%)	26

Would you house a lesbian/gay couple in an established relationship?

Yes	No	Don't know	No. of respondents
18(64.3%)	8 (28.6%)	2 (7.1%)	28

What would you do if there was evidence of discrimination against someone because of their sexuality?

Most would not do anything at all and expected the resident to put up with it. Most homes had no equal opportunities policy and no procedure for dealing with discrimination or harassment. The public and voluntary sector responses were slightly better but did not offer any real encouragement.

Conclusions

Less than 20 per cent of the forms were returned. Most managers stated that they had never housed any lesbians and gay men. None positively stated that they had. There were three forms that were broadly sympathetic to the aims of the research. Two of these were filled in by gay men. Again, the comments of lesbians and gay men in specialist accommodation are instructive:

Though of a comparatively high standard of accommodation, I don't think my care home is a particularly easy place for a gay man to live. They know about me but I have to be discreet which I never used to be. Also my gay friends tend not to visit me any more, not being made to feel welcome and also feeling it could make life difficult for me.

Paul (88) Merseyside

3.2 Lesbians and Gay Men Taking the Initiative

▪ The Dutch Experience

Relevant work by and for older lesbians and gay men has been undertaken in Holland. Most of this has been coordinated by the COC, of which there is no direct British equivalent. It was founded in 1945 to provide both social support for, and campaigning by, lesbians and gay men. It has about 8,000 members and operates in 40 towns and cities across the country. It receives statutory funding from the government and has premises in many parts of Holland.

SOCIAL GROUPS

In 1981 the first club for older lesbians and gay men started in Amsterdam and is known as the Sunday Afternoon Salon. About 70 people attend each week and there are about 200 people in the network. This group consists predominantly of men. The atmosphere is essentially informal with a bar available and people playing cards and chatting with each other.

The club operates a range of social and discussion groups. Topics have included relationships, keeping fit, modern art appreciation and protecting oneself from crime. Some discussion groups are ongoing when members wish to develop ideas further. Such a group is at the present time meeting to examine euthanasia.

Since 1985 there has been a separate group meeting fortnightly on Wednesdays. In contrast to the Sunday Afternoon meetings these are very formal. Members elect a president, there is a formal agenda and a guest speaker addresses the meeting. These meetings are entirely male and about 80 people attend each time. It is clear some people prefer the Sunday Afternoon informality whilst others opt for the structured format of the Wednesdays. Some, of course, feel happy attending both.

COC have now developed eight of these groups across Holland which vary in character according to the wishes of the members. Some of the groups include significant numbers of women. Because of the physical size of the country and its standards of public transport most people are in relatively easy reach of one of the meetings.

Mental frailty associated with old age is virtually unknown amongst members of these groups, though most regular members are in their sixties, seventies and older. In Amsterdam, only one member has gone into institutionalised care since 1981 and this referral was regarded as a mistake.

The common theme is one of mutual support. People who become ill are visited by other members. Relationships and, more usually, friendships develop. This is essentially a holistic and broad approach to community care, recognising that services are often better created by users than planners. COC has its own legal workers and social workers who can be accessed by members of the clubs.

There is a separate network for older lesbians as well, and regular meetings are held in Amsterdam. They produce a bi-monthly magazine, *De Leesbril (Reading Spectacles)*. This magazine covers a range of issues from the serious to the whimsical, including an older lesbians' pin-up of the month! They also seek to develop contacts with other groups of older lesbians internationally. A group of these women has been looking into developing some form of communal accommodation for older lesbians. However, this is at a very early stage.

RESEARCH

In 1993, the Sunday Afternoon Salon of the COC Amsterdam decided to investigate the quality of life of lesbians and gay men in nursing homes in Amsterdam.

It should be stressed that nursing homes in Holland are very different from those in this country. They are large, often with 200 beds and a very high physical standard. They combine the functions of residential care homes and nursing homes and are either municipal, in the ownership of Church or charitable organisations.

The research was prompted by a feeling that there was a culture in nursing homes that was homophobic. Initial research showed that homosexuality was not visible in nursing homes. The nursing homes conveyed the message that since this particular group is not visibly present in the nursing homes it is generally felt that no specific policy is warranted.

In 1994, the Sunday Afternoon Salon commissioned the Gay and Lesbian Studies Department of the University of Amsterdam, who had undertaken the initial work, to look at the subject further.

They spoke to older lesbians and gay men who stated that they wished to be open about their sexuality and if they encountered discrimination they wanted to be able to count on staff for support. People in their 50s and 60s were more assertive about their sexuality than those in their 70s and 80s.

They spent some time interviewing directors and heads of care in 23 nursing homes in Amsterdam. Responses often included the following reactions:

'They shouldn't put it on display all the time and they should behave like everyone else.'

'If gay people behave themselves there is no problem.'

'People have so many different needs and problems and they should try to deal with discrimination themselves.'

'You shouldn't create a problem out of this. If people keep quiet everything will be all right.'

In summary, directors and heads of care believed that talking about homosexuality created a problem, whereas the authors of the research perceived the problem as a structural one because homosexuality as an issue was ignored.

They recommended:

- a) All nursing homes should change their brochures to advertise that lesbians and gay men are specifically welcomed as individuals or couples.
- b) All homes should have a non-discriminatory rule covering sexuality.
- c) All staff in nursing homes should have specific training on sexuality.
- d) Potential residents should be informed at interview that discrimination will not be allowed.
- e) Gay and lesbian periodicals and publications should be made available in homes.

Since the research was undertaken, the first recommendation has been implemented in many homes and a training course in line with the third recommendation has been developed by a further education college in co-operation with COC for the staff of nursing homes.

■ Initiatives in Britain

As the lesbian and gay community matures and develops, it is apparent that individuals and groups are examining the development of community care services. In this country there appear to be a number of driving forces within these groups.

- Community care legislation has encouraged the growth of a 'market place' philosophy. Lesbians and gay men rightly perceive themselves as a 'market' in their own right and wish to see services which are appropriate to their needs and wishes.
- Many lesbians and gay men have experiences of care by developing and running services for people with AIDS and related conditions (and to a lesser extent through the development of Well Woman clinics). That experience has built up an expertise and an expectation of standards which groups and individuals will wish to see applied to older lesbians and gay men with care needs.
- As those who experienced the Gay Liberation movement which commenced in 1967, and those who experienced the rise of feminism/the Women's Liberation movement about the same time, grow older, demands to be fully accepted as lesbians and gay men will become more assertive.

The challenge for those who at present provide community care services and housing is to be able to adapt their resources to be receptive to the changes that are evolving, or lesbians and gay men will reject them and develop services for themselves.

The following is not an exclusive list. Neither does it attempt to describe any of the work in detail. It is an indication of the way that the climate is changing.

COMMUNITY CARE

In parts of the USA, there are already a number of lesbian and gay community care services. The most famous of these is GLOE (Gay and Lesbian Outreach to the Elderly) which operates in San Francisco. The group has obtained a grant from the City Board and provides meals, home helps and other community care facilities to older lesbians and gay men in their own homes. Similar schemes now operate in other cities, notably SAGE (Senior Action in a Gay Environment) in New York.

Interestingly, a consortium of 19 lesbian and/or gay groups in Brighton have recently submitted a Joint Finance (Local Authority/Health Authority) bid to East Sussex County Council to develop the provision of community care services to lesbian and gay men in Brighton and Hove. At the time of writing the outcome of the application is not known. The project, however, could be the first of many. It takes a more 'holistic' approach than most community care projects. Issues like health education, protection from crime and culture are seen as integral to the provision of community care. This echoes many questionnaire respondents' views about how community care should be provided to older lesbians and gay men, and what that care should consist of.

There are other smaller scale initiatives. For example, a lesbian and gay carers group now meets regularly in North London, run by and for lesbians and gay men. The group was originally set up for lesbian and gay people caring for people with dementia (and includes those who may be caring for people with dementia related to AIDS) but all lesbian/gay carers are welcome.

RESIDENTIAL CARE

There are a small number of residential care homes which are now specifically advertising themselves in the gay press as welcoming lesbians and/or gay men. These homes are predominantly small and run by lesbians and gay men. This is a trend which may well develop. Indeed a group lesbians in the north-west (a sub-group of the Northern Older Lesbians Network) has been meeting for some time looking at the possibilities of developing specialist accommodation for older lesbians. There is also a lesbian initiative of this sort in Brighton. With little recognition of the issues from mainstream funders/housing providers, however, these kinds of initiatives need more support if they are to succeed.

SECTION 4: CONCLUSIONS

4.1 Conclusions and Recommendations

- In both the questionnaires and the public meetings participants expressed equal concern at the provision of housing and community care for older lesbians and gay men. This is slowly being reflected in public policy practice.

Further there is recognition, certainly amongst lesbians and gay men, that community care services should not be looked at in a narrow sense and that older lesbians and gay men have specific needs that must be met. Advocacy, for example, is one of the most neglected areas of community care. Older lesbians and gay men want these service needs to be met by lesbians and gay men.

RECOMMENDATION 1

Housing and community care provision must be considered together if older lesbians' and gay men's needs are to be met.

- Providers are finding increasing difficulty in filling both residential care homes and sheltered accommodation. Funders have reviewed their policies with regard to older people, with increasing

emphasis being put on providing resources for older people in their own homes.

RECOMMENDATION 2

Imaginative ways of adapting existing housing stock should be considered

- It is clear from the questionnaires that the vast majority of older lesbians and gay men would value living in accommodation specific to them. In addition many (especially lesbians) would like single sex accommodation. Most older lesbians and gay men have little confidence in existing accommodation. Housing providers are having increasing difficulty in filling accommodation for older people.

RECOMMENDATION 3

Organisations such as Polari Housing Association should consider developing specific housing and/or community care provision for older lesbians and gay men.

- It is clear that equal opportunities policies and practices vary considerably in both sheltered accommodation and residential care homes. At the public meetings and through questionnaire responses, older lesbians and gay men expressed frustration at the lack of information on which accommodation is likely to be more 'gay/lesbian-friendly'. This is particularly pressing with regard to residential care homes where decisions on choosing a home often need to be made very quickly.

RECOMMENDATION 4

There is a need for a 'consumer guide' to specialist accommodation for older lesbians and gay men. This could have the effect of providers seeking to raise standards in order to be in the guide.

- There is a lack of understanding amongst providers of services for older people on the issues of sexuality and the lifestyles of lesbians and gay men. This partly reflects the rejection of sexuality in older people generally. There is also a lack of awareness of the potential of older lesbians and gay men as a 'market'. This is particularly salient as providers are having difficulty in filling some forms of accommodation.

RECOMMENDATION 5

Training packages need to be developed for service providers about sexuality in general, and issues relevant for older lesbians and gay men in particular.

- It is clear that many older lesbians and gay men enjoy a rich and varied lifestyle. Research points to the likelihood that lesbians and gay men adapt well to old age. However, both this and previous studies indicate that loneliness can be a major problem. There are a lack of established social settings for older lesbians and gay men (especially those over 60) to meet. The returned questionnaires show that where people are members of established groups, they are of great value. This is reflected in the work of COC throughout Holland. The commercial lesbian and gay scene is not conducive to the needs of most older lesbians and gay men, and services provided for older people by the voluntary sector and local authorities are seen as heterosexist.

RECOMMENDATION 6

Support should be given to assist and encourage groups and individuals to set up social groups by and for older lesbians and/or gay men and to help in supporting existing ones. This will require substantial efforts in outreach.

- There are many individuals and voluntary groups working in isolation in this field. Expertise and experience is not being shared and people often retire from the work feeling exhausted.

RECOMMENDATION 7

There is an urgent need for networking between relevant organisations and individuals to share experiences and exchange information

- Many older lesbians and gay men expressed a belief that the success of new initiatives was dependent upon the involvement of older lesbians and gay men themselves. It is also clear that the success of much of the work in Holland was achieved because of older lesbians and gay men being at the forefront, and because of access to a large constituency of older lesbians and gay men via existing networks/social groups.

RECOMMENDATION 8

Older lesbians and gay men should be involved at the centre of all developments in this field, as participants in the relevant organisations and through existing forums.

BIBLIOGRAPHY

Anlin, S (1989) *Out but not down! The housing needs of lesbians*, Homeless Action, London.

Association of London Authorities (1990) *Equality in Housing: Lesbians and gay men*, Association of London Authorities, London.

Berger, Raymond M (1980) 'Psychological Adaptation of the Older Homosexual Male', *Journal of Homosexuality*, 5 (Spring), pp 161-175

Berger, Raymond M (1982a) 'The Unseen Minority: Older lesbians and gays', *Social Work*, 27 (3).

Berger, Raymond M (1982b) *Gay and Gray: The older homosexual man*, University of Illinois Press, Urbana.

Berger, Raymond M (1984) 'Realities of Gay and Lesbian Ageing', *Social Work*, 29(1).

Clapham, David, Kemp, Peter and Smith, Susan J (1990) *Housing and Social Policy*, Macmillan, London.

Dibblin, J (1988) 'Jenny lives with Eric and Martin (and Rachel and Tracey and Kingsley and Isaac and Anwar...)' *Roof*, Nov/Dec.

Dlugos, Tim (1984) 'Gay Widows' in Denny, M, Ortlieb, C and Steele, T (Eds) *The View from Christopher Street*, Chatto and Windus: The Hogarth Press, London.

Dulaney, Diana D and Kelly, James (1982) 'Improving Services to Gay and Lesbian Clients', *Social Work*, 27(2), pp 178-183.

Forrest, Ray, Murie, Alan and Williams, Peter (1990) *Home Ownership: Differentiation and fragmentation*, Unwin Hyman, London.

Foster, J (1988) 'The dark side of the boom', *Youth in Society*, January 1988.

Friend, Richard A (1989) 'Older Lesbian and Gay People: Responding to homophobia', *Marriage and Family Review*, 14 (3/4), pp241-263.

Gay Men's Oral History Group (1989) *Walking After Midnight: Gay men's life stories*, Hall Carpenter Archives.

Greengross, Sally, and Greengross, Wendy (1989) *Living, Loving and Ageing: Sexual and personal relationships in later life*, Age Concern England, London.

Griffin, Gabriele (1993) *Heavenly Love? Lesbian images in twentieth century women's writing*, Manchester University Press, Manchester.

Kehoe, Monika (1989) *Lesbians Over 60 speak for themselves*, Harrington Park Press, New York.

Kelly, J (1977) 'The Ageing Male Homosexual: Myth and reality' *Gerontologist*, 17, pp 328-332

Kennedy, Elizabeth Lapovsky and Davis, Madeline D (1993) *Boots of Leather, Slippers of Gold: the history of a lesbian community*, Routledge, London.

Kimmel, Douglas C (1978) 'Adult Development and Ageing: A gay perspective', *Journal of Social Issues*, 34, pp 113-130.

Kleinberg, Seymour (1984) 'Harry and his Old Friends' in Denny, M, Ortlieb, C and Steele, T (Eds) *The View from Christopher Street*, Chatto and Windus: The Hogarth Press, London.

Laner, Mary R (1978) 'Growing Older Male: Heterosexual and homosexual' *Gerontologist*, 18, pp 496-501.

Lesbian Information Service (1994) *Old Lesbians Resource List*, Lesbian Information Service, Todmorden.

Lesbian Oral History Group (1989) *Inventing Ourselves: Lesbian life stories*, Hall Carpenter Archives.

London Housing Unit (1988) *Just Homes? The equal opportunity implications of the housing bill*, London Housing Unit, London.

Middleton, Laura (1983) 'Friendship and Isolation: Two sides of sheltered housing' in Jerrome, Dorothy (Ed) *Ageing in Modern Society*, Croom Helm, London.

National Federation of Housing Associations (1993) *Tackling Discrimination against Lesbians and Gay Men*, National Federation of Housing Associations, London.

Office of Population Censuses and Surveys (1989) *General Household Survey 1986*, HMSO, London.

Patel, Naina (1990) *A 'Race' Against Time: Social services provision to black elders*, Runnymede Trust, London.

Porter, Kevin and Weeks, Jeffrey (Eds) (1991) *Between the Acts: Lives of Homosexual Men 1885-1967*, Routledge, London.

Quam, Jean K and Whitford, Gary S (1992) 'Adaptation and Age-Related Expectations of Older Gay and Lesbian Adults', *The Gerontologist*, 32(3), pp 367-374.

Report from the Older Lesbians' Conference, March 24, 1984. Older Lesbian Network, London.

Reyes, Karen Westerberg (ed.) 1994, *Lambda Gray: A Practical, Emotional and Spiritual Guide for Gays and Lesbians Who Are Growing Older*, Newcastle Publishing, North Hollywood, California

Shelter (1993) Fact Sheets on Lesbians, Gay Men and Housing; Older people and housing; Young people and housing, Shelter, London.

Victor, C R (1987) *Old Age in Modern Society*, Croom Helm, London.

Webb, Sheila (1989) 'Old Lesbians: Out and proud', *Social Work Today* 20(34), pp 20-21.

Wenger, Clare (1983) 'Loneliness: A problem of measurement' in Jerome, Dorothy (Ed) *Ageing in Modern Society*, Croom Helm, London.

Weinberg, Martin S and Williams, Colin J (1975) *Male Homosexuals: Their problems and adaptations*, Penguin Books, New York.

polari

5th Floor,
Central House,
14 Upper Woburn Place,
London
WC1H 0AE

Tel: 020 7255 4480

Fax: 020 7255 4482

Email: info-polari@madasafish.com



Polari Housing is a Charitable Housing Association registered under the Industrial and Provident Societies Act 1965, No 27985R