

May 12, 2017

Heather Menne
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U.S. Department of Health and Human Services:
Administration for Community Living
330 C Street, SW
Washington, DC 20201

Submitted by e-mail: Heather.Menne@acl.hhs.gov

RE: Department of Health and Human Services, Administration for Community Living, Agency Information Collection Activities; Proposed Collection; Public Comment Request; Proposed Extension With Modifications of a Currently Approved Collection; National Survey of Older Americans Act Participants (FR document 2017-04843; 82 FR 13457)

Dear Ms. Menne:

The National Association of Social Workers (NASW) appreciates the opportunity to comment on the notice issued by the Administration for Community Living (ACL) in the Federal Register on March 13, 2017.

As the largest membership organization of professional social workers in the United States, with 130,000 members, NASW works to enhance the professional growth and development of its members, to create and maintain professional standards, and to advance sound social policies. Social workers play an integral role throughout the Aging Network in providing services funded by the Older Americans Act (OAA), and NASW consistently supports reauthorization of and funding for OAA programs. Moreover, social workers engage with and advocate for lesbian, gay, bisexual, and transgender (LGBT) older adults across service settings.

Several foundational NASW documents emphasize the association's support and advocacy for LGBT older adults. For example, the *Code of Ethics*¹ exhorts social workers to prevent and eliminate discrimination on the basis of age, sexual orientation, and gender identity or gender expression, among other cultural factors. Similarly, two NASW policy statements—"Lesbian,

¹ National Association of Social Workers. (2015). *Code of ethics of the National Association of Social Workers*. Retrieved from <http://www.socialworkers.org/pubs/code/default.asp>

Gay, and Bisexual Issues”² and “Transgender and Gender Nonconforming People”³—call for an end to discrimination on the basis of gender identity, gender expression, and sexual orientation, including denial of access to public accommodations, throughout the public and private sphere. These policy statements also urge inclusion of questions on gender identity in health surveys and data collection, census data, and public health monitoring data at the state and national levels. NASW’s “Aging and Wellness” policy statement notes that structural biases and oppression, including those related to sexual orientation and gender identity, impede access to economic, health, and social resources throughout the life span—and that the intersectionality of these cumulative effects often diminishes well-being later in life.⁴ Likewise, intersectionality is a primary theme of the association’s *Standards and Indicators for Cultural Competence in Social Work Practice*.⁵ This publication also stresses the centrality of cultural competence in service delivery and of the education and training needed to provide culturally competent services.

Thus, maximizing service equity and quality to LGBT older adults in OAA-funded programs is a high priority for NASW. For this reason, NASW opposes ACL’s proposal to erase LGBT older adults from the National Survey of Older American Act Participants (NSOAAP). The survey provides critical data on whether federally funded aging programs—case management, homemaker and transportation services, the National Family Caregiver Support Program, and congregate and home-delivered meals—reach *all* older adults, including LGBT older adults. Furthermore, the survey yields invaluable data about older adults’ self-reported physical, social, and emotional well-being.

As stated within ACL’s March 17 notice, the NSOAAP tracks performance outcomes in OAA-funded programs and informs program development. NASW shares ACL’s commitment both to evidence-informed service delivery and to the role of data in evaluating effectiveness. Without data on services provided to older adults who identify as LGBT, however, the Aging Network will not be able to assess its effectiveness in meeting the needs of LGBT older adults. Additionally, both state units on aging and area agencies on aging have asked ACL for more robust data about the Aging Network’s service provision to LGBT older adults.⁶

The need for data on service delivery to LGBT older adults is stressed in Healthy People, a framework of “science-based, 10-year national objectives for improving the health of all

² National Association of Social Workers. (2015). Lesbian, gay, and bisexual issues. In *Social work speaks: Policy statements of the National Association of Social Workers, 2015–2017* (10th ed., pp. 198–206). Washington, DC: NASW Press.

³ National Association of Social Workers. (in press). Transgender and gender nonconforming people. In *Social work speaks: Policy statements of the National Association of Social Workers, 2015–2017* (10th ed., eBook Update Spring 2017, pp. 54–62). Washington, DC: NASW Press.

⁴ National Association of Social Workers. (in press). Aging and wellness. In *Social work speaks: Policy statements of the National Association of Social Workers, 2015–2017* (10th ed., eBook Update Spring 2017, pp. 10–18). Washington, DC: NASW Press.

⁵ National Association of Social Workers. (2015). *Standards and indicators for cultural competence in social work practice*. Retrieved from

http://www.socialworkers.org/practice/standards/Standards_and_Indicators_for_Cultural_Competence.asp

⁶ Choi, S. K., & Meyer, I. H. (2016). *LGBT aging: A review of research findings, needs, and policy implications*. Retrieved from <https://williamsinstitute.law.ucla.edu/wp-content/uploads/LGBT-Aging-A-Review.pdf>

Americans.”⁷ Within Healthy People 2020, the LGBT Health topic area identifies “elder health and well-being” as an issue that “will need to continue to be evaluated and addressed,” and it identifies the “lack of social programs targeted to and/or appropriate for LGBT youth, adults, and elders” as a “social determinant affecting the health of LGBT individuals.”⁸ The LGBT Health objectives focus entirely on the need for data collection.⁹ More specifically, the Older Adults topic area within Healthy People 2020 identifies “enhanced data on certain subpopulations of older adults, including aging LGBT populations,” as an “emerging issue in the health of older adults.”¹⁰ The Older Adults topic area includes two objectives especially relevant to data collected within the NSOAAP: (1) “reduc[ing] the proportion of noninstitutionalized older adults with disabilities who have an unmet need for long-term services and supports” and (2) “reduc[ing] the proportion of unpaid caregivers of older adults who report an unmet need for caregiver support services.”¹¹

Along the same lines, the Institute of Medicine has recommended that “data on sexual orientation and gender identity should be collected in federally funded surveys administered by the Department of Health and Human Services and in other relevant federally funded surveys.”¹² The importance of such data in serving LGBT older adults is underscored by the following research findings.

- LGBT older adults face higher rates of poverty rates than do other older adults. Nearly 16% percent of single gay men older than 65 live in poverty, compared to 9.7% of single heterosexual men in the same age group. Moreover, 6% of lesbian couples aged 65 and older have incomes below the poverty line, compared to 3.5% of heterosexual married couples in the same age group.¹³
- LGBT older adults face pronounced health disparities compared to their peers. HIV affects the LGBT community disproportionately,¹⁴ for example, and the condition affects

⁷ U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. (2017). *About Healthy People*. Retrieved from <https://www.healthypeople.gov/2020/About-Healthy-People>

⁸ U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. (2017). *2020 topics and objectives: Lesbian, gay, bisexual, and transgender health. Overview*. Retrieved from <https://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health>

⁹ U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. (2017). *2020 topics and objectives: Lesbian, gay, bisexual, and transgender health. Objectives*. Retrieved from <https://www.healthypeople.gov/2020/topics-objectives/topic/lesbian-gay-bisexual-and-transgender-health/objectives>

¹⁰ U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. (2017). *2020 topics and objectives: Older adults. Overview*. Retrieved from <https://www.healthypeople.gov/2020/topics-objectives/topic/older-adults>

¹¹ U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion. (2017). *2020 topics and objectives: Older adults. Objectives*. Retrieved from <https://www.healthypeople.gov/2020/topics-objectives/topic/older-adults/objectives>

¹² Institute of Medicine. (2011). *The health of lesbian, gay, bisexual, and transgender people: Building a foundation for better understanding*. Retrieved from <http://nationalacademies.org/hmd/reports/2011/the-health-of-lesbian-gay-bisexual-and-transgender-people.aspx> [Quote appears on p. 9.]

¹³ Lee Badgett, M. V., Durso, L. E., & Schneebaum, A. (2013). *New patterns of poverty in the lesbian, gay, and bisexual community*. Retrieved from <https://williamsinstitute.law.ucla.edu/research/census-lgbt-demographics-studies/lgbt-poverty-update-june-2013/>

¹⁴ Centers for Disease Control and Prevention. (2017). *HIV among gay and bisexual Men*. Retrieved from <https://www.cdc.gov/hiv/group/msm/>

an increasing number of older adults.¹⁵ According to a report funded by the National Institutes of Health and the National Institute on Aging, lesbian, gay, and bisexual older adults face higher rates of disability and mental health challenges than do their heterosexual peers; older bisexual and gay men face higher rates of physical health challenges than do older heterosexual men; older bisexual and lesbian women have higher obesity rates and higher rates of cardiovascular disease than do older heterosexual women; and transgender older adults face greater risk of suicidal ideation, disability, and depression than do cisgender older adults.¹⁶

- LGBT older adults face higher rates of social isolation and have less robust support networks than their heterosexual and cisgender peers. They are up to twice as likely to live alone, half as likely to have close relatives to call for help, four times less likely to have children to assist them as they age, and are much more likely to be disconnected from families of origin.¹⁷
- A 2001 study conducted by the Administration on Aging (as cited in a 2010 report by the LGBT Movement Advancement Project [MAP] and Services and Advocacy for Gay, Lesbian, Bisexual, & Transgender Elders [SAGE]) found that LGBT older adults were 20% less likely than other older adults to access government services such as housing assistance, meal programs, food stamps, and senior centers.¹⁷ The fact that this research is dated reinforces the need for LGBT data collection with the NSOAAP.

The preceding data demonstrate that LGBT older adults face multiple barriers to quality of life—barriers the Aging Network must address if it is to fulfill the OAA’s goal of “meet[ing] the diverse needs of the growing numbers of older persons in the United States.”¹⁸ These data also highlight the need for culturally competent service delivery to LGBT older adults. Therefore, NASW urges ACL to continue to collect demographic information on sexual orientation and gender identity within the NSOAAP. Such data will help the Aging Network to ascertain the extent to which it reaches LGBT older adults, understands this community’s needs, and meets those needs—as well as to identify and implement strategies to enhance service delivery to LGBT older adults. Ultimately, these steps are essential to achieve the OAA’s stated goal of “help[ing] older adults to live independently in their homes and communities.”¹⁹ From the perspective of the social work profession, equitable, culturally competent service delivery to LGBT older adults is also central to the realization of human rights and of social and economic justice.

¹⁵ Centers for Disease Control and Prevention. (2017). *HIV among people aged 50 and over*. Retrieved from <https://www.cdc.gov/hiv/group/age/olderamericans/>

¹⁶ Fredriksen-Goldsen, K. I., et al. (2011). *The aging and health report: Disparities and resilience among lesbian, gay, bisexual, and transgender older adults*. Retrieved from <http://www.lgbtagingcenter.org/resources/resource.cfm?r=419>

¹⁷ LGBT Movement Advancement Project & Services (MAP) and Advocacy for Gay, Lesbian, Bisexual & Transgender Elders (SAGE). (2010). *Improving the lives of LGBT older adults*. Retrieved from <http://www.lgbtmap.org/file/improving-the-lives-of-lgbt-older-adults.pdf>

¹⁸ Administration for Community Living. (2014). *Administration on Aging: Older Americans Act and Aging Network*. Retrieved from https://aoa.acl.gov/AoA_Programs/OAA/Introduction.aspx

¹⁹ Administration for Community Living. (2015). *Administration on Aging*. Retrieved from <https://aoa.acl.gov/>

Thank you for your consideration of NASW's comments. Should you have questions about the association's comments, please contact my office at naswceo@naswdc.org or (202) 336-8200.

Sincerely,

A handwritten signature in black ink that reads "Angelo McClain". The signature is written in a cursive style with a small flourish at the end.

Angelo McClain, PhD, LICSW
Chief Executive Officer