

LGBTQ+ Older Adult Social Care Assessment (LOASCA) study

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Aim of the study

To investigate the ways social care professionals engage with sexual orientation and gender identity (SOGI) when assessing the care and support needs of older LGBTQ+ people.

Health disparities between LGBTQ+ older people and heterosexual counterparts

Increased demands on social care to develop inclusive services

Services are required to collect data about gender and sexual identity – not always happening.

Social work and social care accused of being sexuality and gender-blind

Historical experiences for older LGBTQ+ people matter

LGBTQ+ older people less likely to have familial support

LGBTQ+ older people often describe going back into 'the closet'

LGBTQ+ older people often seek social support from within LGBTQ+ groups

Methodology

- Multiple case study approach x 3
- Survey, professional interviews, case files, organisational documents, service user interviews
- Collaborative with 8 employed PPI co-researchers

Survey	Staff interviews	Organisational documents	Case files	Service user interviews
138	28	18	55	13

Case Sites Overview


Diverse size, ethnic diversity, population, setting

Urbantown – Densely populated metropolitan council, with substantial ethnic diversity, substantial number of ASC users and staff, low % of LGBT residents for population


Suburbia – Small suburban council, with midrange ethnic diversity, disproportionately low number of ASC users

Ruralshire – large, rural, remote council, very low ethnic diversity, mid-range number of ASC users and staff

*data from the 2021 National Census

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Key Findings

- LGBTQ+ people are **often missing** from **policy considerations** and **staff discussions**.
 - Challenges with **data collection** about service user's sexual orientation and gender identity.
 - The '**double-bind**' of professional and service user anxieties
 - Social work staff are seeking **greater knowledge** about how LGBTQ+ issues apply in their practice.
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Survey findings – quantitative

Key finding:

Some groups hold more cis/heteronormative views than others

Men held more heteronormative and essentialist sex and gender beliefs than women.

LGBTQ+ participants held less cis/heteronormative beliefs than cis/heterosexual participants.

Qualitative Survey Findings

"In my 27 years, I've never seen any training specifically on this area [LGBTQ+ people]."

"I do not think there are any barriers - **everyone should be treated equally** and with respect regardless of sex, gender, orientation."

"**I feel very uncomfortable asking** citizen's I support. Now we need to consider the pronouns of a citizen - he/she/they? - how should we approach asking this without possibly causing offence?"

"As social workers, it is our vocation to create the core conditions for therapeutic discussions. Supporting people to discuss their sexual orientation and gender identity is an essential part of this, often overlooked. When we leave this out of our assessments, we lose half the story, and miss our opportunities to validate and respect a person in need."

Professional Interviews

Most unable to identify any LGBTQ+ service users

"I haven't knowingly come across someone who's LGBT in practice."

Fear of 'saying the wrong thing' about sexuality and/or gender

"I think at the time I did feel uncomfortable because I just didn't want to offend anyone. I didn't want to say anything wrong."

'Treating everyone equally' mentioned as one of the reasons for not asking about sexuality/gender

"I don't ask the question because I think it's irrelevant, so I don't ask it. That doesn't matter what your identity is as to how I do my assessment; I would do everybody equally and fairly."

Able to raise EDI issues with management?

“It could be that you raise it with your manager depending on the gravity of what you’re talking about and the impact it could potentially have upon people [...] But I would feel comfortable having that discussion definitely.”

Need for more LGBTQ+-related training and education, pre- and post-qualification

“I said there’s this training, it’s to do with LGBTQ, and I said on a particular day, a particular time – it was online...There was me, the chap from the NHS...and a female social worker from another authority. Full stop. What a waste...Not one of my colleagues let alone anybody in the department.”

“But specific [LGBTQ+] training certainly I've not seen any.”



Case Files, Document and Service User Findings

Missed opportunities to discuss SOGI

Using relationships as a proxy for identity

Trans identities often missed from strategies and plans

LGBTQ+ usually unspecified, included in broader EDI

Need for professionals to support engaging with LGBTQ+ services

Need for a better awareness of LGBTQ+ service user needs



Implications

Local Authority, Practitioner, Policy

Greater emphasis on **data collection**; asking SU about SOGI in assessment

Supporting access to current **knowledge** about LGBTQ+ people

Training on LGBTQ+ issues – should be mandatory and coherent; applying training in practice

Ensure **environments** include pro-LGBTQ+ symbols for service users and staff; include SOGI-related considerations in inspections

Ensure staff are **aware** of local and national LGBTQ+ support organisations

Ensure that SOGI-related topics are included in practice and **EDI discussions**

Outputs

- SCIE knowledge repository
- Graphic novel
- Animated video
- Briefings
- Academic outputs





SCIE knowledge repository

Thank you!

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LOASCA website

Co-researcher experience

What did you enjoy most about being part of the research teams?

What did not work very well for supporting your engagement?

What do you think is the most important message from this research?

What's next for you?

