1. What is the difference between sexual orientation and gender identity? Are all transgender people also lesbian, gay, or bisexual?

While sexual orientation and gender identity often get conflated or grouped together, they are both separate identities. Everyone has a sexual orientation and a gender identity. For example, a transgender man can also be heterosexual.

Your gender identity is the gender you feel you are inside; it is how you connect to the sex that you were assigned at birth. For many people, the gender that you feel you are now *matches* the sex you were assigned at birth -- these people are cisgender. For example, if when you were born the doctor assigned you the sex “female”, and today, you still identify as a woman, you are cisgender. Statistically speaking, most of the population is cisgender. For transgender people, this internal gender identity may *not match* with their assigned sex. For example, someone who was born and assigned the sex “male”, but now identifies as female may identify as transgender.

Sexual orientation, on the other hand, is your primary physical, romantic, and or/emotional attractions to other people. Think of sexual orientation as who you love. For example, if someone identifies as a Lesbian, their primary physical, romantic, or emotional attraction is most often towards other women.

2. Does someone have to alter their body with medical procedures to be considered transgender?

No. While some transgender people have surgery or use hormones, not everyone does. These decisions are private and individual for each person. There is no one way to be transgender and there is no universal transgender experience. Transgender is an umbrella term that includes many different identities. Many Transgender older adults have had no surgery; some of the most common reasons for this include cost, health, and personal choice.

3. How should I ask about someone’s preferred name or pronoun without offending them?

When working with a client for the first time, you can ask “how would you like me to address you?” This question will give everyone you care for the choice on how to identify. If you are unsure of someone’s gender identity, you can ask “what pronouns do you use?” or “what are your pronouns?” This may be an uncomfortable question for some, but the more that this question is asked, the more normalized it will become, and you can help lead the way.

4. What should I do if I think an elder is being discriminated against because they are LGBT? Who should I tell if I believe a co-worker is behaving inappropriately or in an otherwise homophobic, biphobic, or transphobic manner? What if there is an ethical issue that a staff member raises about treating LGBT elders?
Creating a welcoming and affirming environment for LGBT people requires everyone's commitment to make sure we are all working at the highest standard. Conflict between staff and/or elders about LGBT issues can be handled like any other interpersonal conflict. The New Jewish Home has designated Stakeholders – including Rabbi Malamy – to help you with LGBT related questions and concerns. You should contact one of these Stakeholders and they will advise you on an appropriate course of action. Many of these individuals will be wearing a rainbow in some form, either on their badge or their lanyard.

5. Our services have nothing to do with sex or sexuality, why does it matter if I know about someone’s sexual orientation or gender identity?

   Sexual orientation and gender identity are an important part of a person’s life. This identity is part of a larger history and culture, and is not just associated with how an individual has sex. When a new elder enters The New Jewish Home, they are allowed to bring pictures of family and friends to help make them feel at home. If the elder does not feel comfortable telling you that they are LGBT, they may not feel comfortable bringing these important and comforting items. Knowing that someone is LGBT tells you about their identity, their history, and the important relationships in their life. Helping elders feel open and comfortable is an essential aspect of our commitment to deep knowing of all of our elders. Being open to these conversations can also have a very deep impact on the elder’s mental and physical health.

6. When working with a transgender older adult, which bathroom (or other gender-segregated facility) should they use?

   Transgender people should always have access to bathrooms or other gender-segregated facilities (facilities where men and women are apart) based on their self-identified gender, regardless of whether it accords with their physical appearance, legal sex, surgical or medical history, or sex assigned at birth. Any concerns can be directed to one of the Stakeholders or your supervisor.

   For example, if an elder identifies as a man he should be able to use men's facilities and have a male roommate. Questions or concerns from other elders should be directed to a supervisor, Stakeholder, or another person trained in transgender cultural competency. Remember, transgender status is personal information protected like all other medical information.

7. The New Jewish Home does not discriminate against LGBT people, but some of our elders have negative feelings about LGBT people. How can we help manage interactions between elders?

   There are several ways to manage conflicts between elders. Make it clear to your elders that they are expected to treat LGBT people with the same level of respect they show others. You can take whatever mediation or conflict resolution practices you already have in place and extend them to include LGBT people. For example, The New Jewish Home already has policies and practices in place to handle conflict around race, ethnicity, or religion. Those same policies can be used to manage any conflicts around LGBT residents. Any questions or concerns can be reported to the Stakeholders and your supervisor.
8. How should we discuss LGBT competency with deeply religious or otherwise socially conservative employees or residents?

Learning about the needs and culture of LGBT older adults is about getting the information you need to treat LGBT people with the care and respect everyone deserves, and to deliver the best care possible, as you do with all of your clients. Learning about LGBT people is not meant to change your deeply held beliefs, it is intended to help you treat LGBT people with understanding and respect. Remember that LGBT people can also be deeply religious.

9. What information can I discuss with a residents partner or family of choice if their relationship has no official or legal recognition? How do I know when I can share information about a resident?

If the resident has given you permission to discuss their medical information or other private information with another person you should respect that relationship and share information like you would with legally recognized family. If the resident has not given you permission to discuss their private information you should refrain from doing so until you can ask your supervisor for advice on how to proceed. Remember that many LGBT older adults often rely on families of choice, asking about those chosen family members will allow the older adult to give you accurate information on who they would like to make decisions for them should they not be able to.

Resources:

For more information about data collection and intake questions please see Inclusive Questions for Older Adults: A Practical Guide to Collecting Data on Sexual Orientation and Gender Identity available from the National Resource Center on LGBT Aging at www.lgbtagingcenter.org

For more information on transgender-affirming policies please see Creating Equal Access to Quality Health Care for Transgender Patients: Transgender-Affirming Hospital Policies available at www.lambdalegal.org

For more information on best practices please see A Practical Guide to Creating Welcoming Agencies available from the National Resource Center on LGBT Aging at www.lgbtagingcenter.org