Meeting the Health Care Needs of Lesbian, Gay, Bisexual, and Transgender Older Adults
The National Center for Health in the Aging

Main initiatives focus around the following:

• Establishing collaborations with national and state aging agencies
• Conducting needs assessments with health center programs and health center program look-a-likes to determine primary medical care service delivery needs among grantees that serve the elderly
• Providing an annual National Primary Care Symposium on Aging
• Offering remote, on-site, and one-on-one training and technical assistance and peer mentoring, and conducting a new HRSA BPHC grantee training and orientation call
• Developing protocols and tools
• Providing knowledge of health literacy and skills necessary to reading, understanding, and acting on basic health care information
• Facilitating outreach to seniors
The Aging Population

- People 65 years and older represented 12.4% of the population in the year 2000 and are expected to be 19% of the population by 2030 (Administration on Aging, 2011), so the health and wellness of the elderly population is very important.

- It is also important that appropriate policies be created to address the specific needs of the elderly population, such as the Public Health Aging Policy.
Data

- Estimated range of lesbian, gay, bisexual or transgender (LGBT) Americans ages 60 and over: 1.75 and 4 million
LGB Older Adults Health Disparities

<table>
<thead>
<tr>
<th>Category</th>
<th>Experience distress</th>
<th>Receive Care in ER</th>
<th>Not get Prescription</th>
<th>Delay Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>LGB</td>
<td>20%</td>
<td>24%</td>
<td>22%</td>
<td>29%</td>
</tr>
<tr>
<td>Heterosexual</td>
<td>9%</td>
<td>18%</td>
<td>13%</td>
<td>17%</td>
</tr>
</tbody>
</table>
Meeting the Health Care Needs of Lesbian, Gay, Bisexual, and Transgender Older Adults

Mark Simone, MD
Instructor of Medicine, Harvard Medical School
Mount Auburn Hospital
Cambridge, MA
Financial Disclosures

- None
Learning Objectives:

At the end of this presentation, participants should be able to:

1. Demonstrate awareness of the specific health disparities that affect LGBT older adults
2. Understand the impact of a lifetime of discrimination for LGBT older adults
3. Understand key legal and financial issues affecting LGBT older adults
“The LGBT community has stepped up in the past to address coming out, AIDS, and civil rights. The next wave has to be aging.”

Case

- An 82 year old man comes into an outpatient primary care office for an initial visit.
- Do you think the provider should ask his sexual orientation? Why or why not?
- Is it important?
Demographics of Older LGBT Population
### Demographics

**Do you, personally, identify as lesbian, gay, bisexual, or transgender?**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Yes</th>
<th>No</th>
<th>DK/Ref</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 to 29</td>
<td>6.4</td>
<td>90.1</td>
<td>3.5</td>
</tr>
<tr>
<td>30 to 49</td>
<td>3.2</td>
<td>93.6</td>
<td>3.2</td>
</tr>
<tr>
<td>50 to 64</td>
<td>2.6</td>
<td>93.1</td>
<td>4.3</td>
</tr>
<tr>
<td>65+</td>
<td>1.9</td>
<td>91.5</td>
<td>6.5</td>
</tr>
</tbody>
</table>

October 18, 2012, “Special Report: 3.4% of U.S. Adults Identify as LGBT:
Inaugural Gallup findings based on more than 120,000 interviews” by Gary J. Gates and Frank Newport,
Demographics of Older LGBT Adults

- Older LGBT Adults:
  - 1 million to 2.8 million
  - 2 million to 6 million by 2030

- Economically similar to heterosexuals, except
  - Lesbian/bisexual women and same sex female couples have higher rates of poverty than gay/bisexual men and heterosexuals

- More likely to live in urban areas, but
  - LGBT couples counted in all states and over 90% of US counties

Cahill et al. National Gay and Lesbian Task Force Foundation 2000
Albeda R et al. “Poverty in the Lesbian, Gay, and Bisexual Community” The Williams Institute, March 2009
Background and Disparities
Case

- An 82 year old man comes into an outpatient primary care office for an initial visit.
- Do you think the provider should ask his sexual orientation? Why or why not?
- Is it important?
- What barriers would keep a provider from asking?
- What barriers would keep an older LGBT person from disclosing?
“Gen Silent”
LGBT Aging in the News

Gay Elders' Distinctive Challenges Get Closer Look

October 9, 2007
Aging and Gay, and Facing Prejudice in Twilight
By JANE GROSS

‘Invisible And Overlooked’
A growing population of lesbian and gay senior citizens seeks recognition for their unique needs and challenges.
By Jessica Bennett | Newsweek Web Exclusive
Sep 18, 2008

The Love That Will Finally Speak Its Name
It took the death of my dear life partner for me to find the courage to come out of the closet.

Lorraine Barr
NEWSWEEK
From the magazine issue dated Sep 3, 2007
Healthcare Disparities

- Healthy People 2020: LGBT Americans are affected by health disparities
- Institute of Medicine: The Health of LGBT People, March 2011

Makadon, H. *NEJM* 2006
Healthcare Disparities

The Aging and Health Report, Disparities and Resilience among LGBT Older Adults (2011) found:

- Nearly 1/2 have a disability
- Nearly 1/3 report depression
- Almost 2/3 have been victimized three or more times
- 13% have been denied health care or received inferior care
- More than 20% do not disclose their sexual or gender identity to their physician
- About 1/3 do not have a will or durable power of attorney for health care
# Health Disparities


<table>
<thead>
<tr>
<th>Health Indicator</th>
<th>Women</th>
<th>Men</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Lesbian and Bisexual</td>
<td>Gay and Bisexual</td>
</tr>
<tr>
<td></td>
<td>Heterosexual, %</td>
<td>Heterosexual, %</td>
</tr>
<tr>
<td></td>
<td>%</td>
<td>%</td>
</tr>
<tr>
<td></td>
<td>OR (95% CI)</td>
<td>OR (95% CI)</td>
</tr>
<tr>
<td></td>
<td>AOR (95% CI)</td>
<td>AOR (95% CI)</td>
</tr>
</tbody>
</table>

**Access to care**

- **Insurance**
  - Women: 94.56%
  - Men: 93.36%
  - Analysis: 0.60** (0.44, 0.82)
  - Regression: 0.79 (0.55, 1.13)
- **Financial barrier**
  - Women: 8.26%
  - Men: 6.81%
  - Analysis: 1.67*** (1.29, 2.16)
  - Regression: 1.25 (0.97, 1.62)
- **Personal provider**
  - Women: 92.41%
  - Men: 88.57%
  - Analysis: 1.11 (0.76, 1.60)
  - Regression: 1.43 (0.97, 2.11)

**Behavior**

- **Smoking**
  - Women: 11.61%
  - Men: 13.15%
  - Analysis: 1.71*** (1.36, 2.15)
  - Regression: 1.57*** (1.22, 2.00)
- **Excessive drinking**
  - Women: 4.61%
  - Men: 11.12%
  - Analysis: 1.77** (1.27, 2.47)
  - Regression: 1.43* (1.02, 1.99)
- **Physical activity**
  - Women: 49.02%
  - Men: 51.23%
  - Analysis: 1.12 (0.88, 1.01)
  - Regression: 1.01 (0.78, 1.31)

**Screening**

- **Flu shot**
  - Women: 55.07%
  - Men: 50.40%
  - Analysis: 0.92 (0.77, 1.10)
  - Regression: 1.20 (1.00, 1.44)
- **Mammogram**
  - Women: 79.77%
  - Men: 88.41%
  - Analysis: 0.73* (0.54, 0.98)
  - Regression: 0.71* (0.52, 0.97)
- **PSA test**
  - Women: 23.89%
  - Men: 49.85%
  - Analysis: 2.20*** (1.79, 2.70)
  - Regression: 1.80*** (1.46, 2.23)
- **HIV test**
  - Women: 28.31%
  - Men: 76.47%
  - Analysis: 8.23*** (6.22, 10.88)
  - Regression: 7.91*** (5.94, 10.54)

Note: AOR = adjusted odds ratio; CI = confidence interval; OR = odds ratio; PSA = prostate-specific antigen. Adjusted logistic regression models controlled for age, income, and education; heterosexuals were coded as the reference group.

---

# Health Disparities


<table>
<thead>
<tr>
<th>Health Outcomes/Conditions</th>
<th>Women Maine Homosexual, %</th>
<th>Lesbian and Bisexual</th>
<th>Men Gay and Bisexual, %</th>
<th>AOR (95% CI)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Frequent poor physical health</td>
<td>15.47</td>
<td>15.79</td>
<td>1.02 (0.81, 1.30)</td>
<td>1.07 (0.80, 1.30)</td>
</tr>
<tr>
<td>Disability</td>
<td>36.87</td>
<td>44.27</td>
<td>1.36** (1.14, 1.62)</td>
<td>1.47*** (1.22, 1.77)</td>
</tr>
<tr>
<td>Frequent poor mental health</td>
<td>9.36</td>
<td>15.92</td>
<td>1.83*** (1.42, 2.37)</td>
<td>1.40* (1.07, 1.81)</td>
</tr>
<tr>
<td>Obesity</td>
<td>25.93</td>
<td>36.27</td>
<td>1.63*** (1.36, 1.95)</td>
<td>1.42*** (1.18, 1.71)</td>
</tr>
<tr>
<td>Arthritis</td>
<td>52.24</td>
<td>53.70</td>
<td>1.06 (0.83, 1.36)</td>
<td>1.29 (0.99, 1.67)</td>
</tr>
<tr>
<td>Asthma</td>
<td>15.89</td>
<td>20.57</td>
<td>1.37** (1.10, 1.70)</td>
<td>1.20 (0.96, 1.49)</td>
</tr>
<tr>
<td>Diabetes</td>
<td>11.87</td>
<td>13.59</td>
<td>1.17 (0.91, 1.51)</td>
<td>1.25 (0.96, 1.64)</td>
</tr>
<tr>
<td>High blood pressure</td>
<td>43.33</td>
<td>36.02</td>
<td>0.74 (0.54, 1.00)</td>
<td>0.86 (0.62, 1.20)</td>
</tr>
<tr>
<td>High cholesterol</td>
<td>47.13</td>
<td>44.10</td>
<td>0.88 (0.69, 1.14)</td>
<td>1.00 (0.77, 1.30)</td>
</tr>
<tr>
<td>Cardiovascular disease</td>
<td>10.71</td>
<td>10.51</td>
<td>0.98 (0.73, 1.31)</td>
<td>1.37* (1.00, 1.86)</td>
</tr>
</tbody>
</table>

Note: AOR = adjusted odds ratio; CI = confidence interval; OR = odds ratio. Adjusted logistic regression models controlled for age, income, and education; heterosexuals were coded as the reference group.

*Questions were asked in 2003, 2005, 2007, and 2009.

**Question was asked in 2003, 2005, and 2009.

---

Discrimination faced by LGBT elders
A Lifetime of Discrimination

Figure 4: A 70-year-old Lesbian has Seen These Events in Her Lifetime

1948 (age 8) — Alfred Kinsey's research reveals that homosexuality is far more widespread than commonly believed

1962 (age 22) — 1st state, IL, decriminalizes private, consensual homosexual acts

1969 (age 29) — Stonewall riots against abusive police incite widespread protest for equal rights & acceptance

1982 (age 42) — 1st state, WI, outlaws discrimination based on sexual orientation

1996 (age 56) — U.S. Supreme Court strikes down CO's Amendment 2, which denied gays and lesbians protections against discrimination

2008 (age 68) — Marriage for same-sex couples is legal in CA for several months, until voters pass Proposition 8

1950

1960

1970

1980

1990

2000

2010

1973 (age 33) — American Psychiatric Association ceases designating homosexuality a mental disorder

Early 1980s (age 44) — AIDS crisis leads to new organizing and advocacy within the LGBT community

2003 (age 63) — U.S. Supreme Court strikes down sodomy laws

MA Supreme Court rules that barring gays and lesbians from marriage "denies the dignity and equality of all individuals" and makes them 2nd-class citizens

2004 (age 65) — Legal same-sex weddings begin in MA

Source: InfoPlease.com; MAP analysis

Improving the Lives of Gay, Lesbian, Bisexual and Transgender Older Adults 3/2010
Transgender Experience

- Social stigma
- Psychological pain
- Economic hardship
Generational Contrasts

- The older generation of gays and lesbians may be less likely to have come out of the closet

- Generations:
  - “Pre-Stonewall”
  - “Post-Stonewall”
Disclosure of LGBT identity by LGBT elders
## Coming Out: the Stonewall Generation

### Stonewall generation: Baby boomers

<table>
<thead>
<tr>
<th></th>
<th>% of LGBT respondents who are “completely” or “mostly” out</th>
<th>% of LGBT respondents whose families are “completely” or “very” accepting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lesbians</td>
<td>76%</td>
<td>61%</td>
</tr>
<tr>
<td>Gay men</td>
<td>74%</td>
<td>57%</td>
</tr>
<tr>
<td>Bisexuals</td>
<td>16%</td>
<td>24%</td>
</tr>
<tr>
<td>Transgender</td>
<td>39%</td>
<td>42%</td>
</tr>
</tbody>
</table>

Many who have lived wholly or partially in the closet:

- Have elaborate constructs to protect their sexual orientation
- Are at risk of exposure with disability or sickness
Background of Older LGBT Adults

Those who have been out are more likely to:

- Be estranged from children or grandchildren
- Be single or without children
- Have extensive ‘chosen family’ of support networks, which can be threatened by aging and illness
Health Impacts of Discrimination in Older LGBT Adults

Social stressors
- Coming out
- Prejudice
- Stigmatization
- Anti-gay violence
- Internalized homophobia

Mental Health in Older LGBT Adults

- Major depression
- Generalized anxiety disorder
- Suicide

Survey of 416 older LGB adults active with LGBT social agencies:

- 39% considered suicide
- 12% had suicidal thoughts in the past year
LGBT Aging Fears

Fears of aging:

- Rejection by children and family
- Uncertain support network
- Discrimination in health care, employment, housing and long-term care

Quam and Whitford *Gerontologist* 1992
MetLife Mature Market Institute 2006
Fear of Discrimination

- LGBT baby boomers report (2006 survey):
  - Greatest concern of aging was discrimination due to sexual orientation in 32% of gay men and 26% of lesbians
  - >50% did not have strong confidence that they will be treated with dignity and respect
  - 12% of lesbians had absolutely no confidence that they will be treated respectfully
Disclosure and Access to Care

Fear of discrimination:
- Avoidance of care
- A significant problem in nursing home and assisted living facilities
- Leads to non-disclosure of sexual orientation

Nondisclosure leads to:
- Inappropriate preventive care and screening recommendations
- Negative affect on the patient-provider relationship
- Perpetuates the invisibility of older LGBT patients

Disclosure of Sexual Orientation for Older LGBT Adults

Goal of inquiring into sexual orientation:
- Provide sensitive care
- Address unique healthcare needs
- Identify potential challenges to support systems
- Provide opportunity for disclosure and better patient-doctor relationship
How to ask about sexuality in older adults

- Don’t assume that because your patient is old, that they must be heterosexual
- Also, don’t assume that because your patient is gay, that they will be comfortable with “full disclosure”
- Language matters
Language Matters

“Are you married?”
- “Who are the important people in your life?”
- “Do you have a significant other?”
- “Are you in a relationship?”
- “Do you live with anyone?”
- “Tell me more about yourself?”
Medical needs of LGBT elders
Health Behaviors Over the Life Course by Sexual Orientation

- Smoking:
  - Lesbians and gay men more likely to smoke than heterosexuals when younger
  - Lesbians, but not gay men, more likely than heterosexuals to smoke when older

- Alcohol:
  - Lesbians and gay men drink more when younger, but no differences when older
Health of Older Gay Men

- Sexual health / STI’s
- Cardiovascular health
- Anal Cancer:
  - 57-61% prevalence in MSM
  - 72-90% in MSM with HIV
- Prostate cancer

Appelbaum *The Fenway Guide to Lesbian, Bisexual and Transgender Health* 2007
Health of Older Lesbians

Receive less preventive care
- Access health care services less often
- Enter health care system later
- Inappropriate care
- Disclosure affects screening

Valanis et al. Arch Fam Med 2000; Solarz A. Institute of Medicine, National Academy Press, 1999
Health of Older Lesbians

- Coronary artery disease
  - Obesity\textsuperscript{1,2}
  - Smoking\textsuperscript{2,3}

- Cervical cancer
  - 29\% lesbians did not have routine Pap screening test\textsuperscript{4}
  - Disclosure improved screening rates\textsuperscript{5}

- Breast cancer\textsuperscript{6,7}
  - Elevated risk

\textsuperscript{1}Valanis et al. Arch Fam Med 2000;9(9):843-853
\textsuperscript{2}J of ACH. 2011;59(1):51-56
\textsuperscript{3}American Journal Public Health 2012; 102(2): 292-300
\textsuperscript{4}J Women’s Health 2010;19(2):229-37
\textsuperscript{5}BMC Public Health. 2013 ;13:442
\textsuperscript{6}J Women’s Health 2012;21(5):528-33
\textsuperscript{7}J Women’s Health 2010;19(1):125-31
Medical Concerns for Transgender Older Adults

- Very little research
- Discrimination and healthcare disparities
  - More likely to use black-market hormones
  - Less likely to receive preventive care
  - Less likely to have mental health needs met
  - Higher rates of HIV, hepatitis C, and substance abuse
- Preventive care for the biologic sex
  - Prostate cancer in MTF
  - Ovarian cancer in FTM

Appelbaum The Fenway Guide to Lesbian, Bisexual and Transgender Health 2007
Transgender Health

- 70% older transgender adults delayed gender transition to avoid employment discrimination
- 13% report abusing alcohol or drugs to cope with mistreatment
- 16% attempted suicide at least once in their lifetimes

HIV/AIDS in Older Adults

Increasing prevalence
- 37% with HIV/AIDS >50 yo
- 50% by 2015
- 53% are in men who have sex with men

Increasing incidence
- Increasing incidence in those older than 50 years:
  - 17% new cases of HIV (2009)
  - 24% of new AIDS cases

HIV Prevention for Older Adults

- Challenges to providing HIV/AIDS education for older adults:
  - Health professionals’ ageism
  - Older adults’ reluctance to discuss sexuality
  - Misconception of HIV risk
Palliative Care Needs

- Health care professionals need training
- Explore sexual orientation
- Avoid heterosexist assumptions
- Recognize importance of partners in decision making
- Need for research into LGBT experiences
- Lesbians (vs. heterosexual women) tend to have more positive views of hospice, prefer alternative therapies, and are less likely to desire life-sustaining treatment

End of Life Issues for LGBT Older Adults

- Comorbidities
- Decision making
- Level of disclosure
- Mental health and stigma
  - Minority stress
  - Internalized homophobia
  - Stigma and misconceptions
- Discrimination
- Disenfranchised grief
Services and resources for LGBT elders
“Isolation, finding friend support, caregiving and health are the biggest issues older gay persons face. Who will be there for us, who will help care for us without judgment?”

- 66-year-old lesbian

LGBT older adults need more support

- What are the services needed by LGBT older adults?
- What resources are available specifically to LGBT older adults?
- What legal issues affect the health and well-being of older LGBT adults?
Risk for Isolation and Loneliness

- In comparison with heterosexual and non-transgender older adults, LGBT older adults are:
  - More likely to be isolated
  - Half as likely to have a significant other
  - 4 times more likely to have no children to help them
  - 49% of gays and lesbians over 50 years live alone compared to 33% of heterosexuals over 50
Risk for Isolation and Loneliness

- 10-25% of LGBT older people are unable to identify someone to call in a time of need
- LGBT elders lack support from, and feel unwelcome in, mainstream aging programs
- LGBT elders lack support from, and feel unwelcome in, the broader LGBT community

Improving the Lives of LGBT Older Adults, March 2010
Health and Psychosocial Needs of LGBT Older Adults. AIDS Community Research Initiative of America (ACRIA), 2011
In hospitable Health Care Environments

DELAY OR NOT SEEK HEALTH CARE

<table>
<thead>
<tr>
<th></th>
<th>Het. elders</th>
<th>LGB elders</th>
<th>Trans elders</th>
</tr>
</thead>
<tbody>
<tr>
<td>17%</td>
<td>29%</td>
<td>30%</td>
<td></td>
</tr>
</tbody>
</table>

NEGLECTED BY A CARETAKER BECAUSE OF SEXUAL ORIENTATION OR GENDER IDENTITY

*Improving the Lives of LGBT Older Adults, March 2010*
Community-Based Aging Services
Awareness of LGBT Aging Issues

- Survey of attendees at the Michigan Area Agency on Aging 2010 Conference
- Majority knew “nothing” or “only a little” about
  - Legal issues
  - Financial issues
  - Medicare/medicaid issues
  - Medical concerns
  - Barriers to service
- 63% wanted more training, 34% did not
Community Resources

2010 Survey of Area Agencies on Aging (53% response rate, n=320):

- Few provide LGBT services or outreach (13%)
- 1/3 had trained staff around LGBT aging
- 4/5 willing to offer training

The SAGE Center: Portal to care

In March of 2012, through an Innovative Senior Center Initiative launched by NYC’s mayor, Services and Advocacy for GLBT Elders (SAGE), opened the nation’s first full time LGBT Senior Center.
The National Resource Center on LGBT Aging

- Project of SAGE, in partnership with 14 national orgs
- Funded by the U.S. Dept. of Health and Human Services
- Provides clearinghouse information (www.lgbtagingcenter.org)
- Trains service providers on culturally competent care
Discrimination in Long-Term Care Facilities

- 120,000 to 300,000 LGBT seniors living in nursing homes by 2030
- Unrecognized needs
- No JCAHO LGBT non-discrimination policy for nursing homes, assisted living, home care agencies, or hospice

Lesbian and Gay Elders and Long-Term Care: Fears and Perspectives

- Fear of being rejected or neglected
- Fear of having to go back into the closet
- Desire for gay residential option
- Fear of being maltreated or ostracized
- Greater anxiety about healthcare aids who help with ADLs
- Feel alone

Financial and legal challenges for LGBT elders
Hospital Visitation Rights

The New York Times

Well

Kept From a Dying Partner’s Bedside

Aggrieved Janice Langbehn, with her children, Danielle, 15; David, 13; and Katie, 12 (back to camera), has sued the hospital that treated her partner.

By TARA PARKER-POPE

Published: May 18, 2009
Advance Directives

- In many states, LGBT couples are seen as “legal strangers”
- Priority often given to blood relatives
- Unless advance directives are in place, default may be harmful for patients and families of choice
- Executive directive helps in hospital visitation arena (but visitation ≠ health care proxy)

Advance Directives

- Many elders don’t have the means to obtain them
- Even if legal, some health providers may disregard them, and patients may not know their rights
- LGBT elders must carry these documents with them at all times
- Default surrogate laws vary by states, with many not recognizing same-sex partners
Financial Concerns
Graph from “Improving the Lives of LGBT Older Adults”, 2010
Williams Institute, 2009
Summary

- Three to eight percent of elderly patients are LGBT
- LGBT older adults have specific medical, psychological, and social needs
- LGBT older adults may have difficulty disclosing their sexual orientation due to past negative experiences and a lifetime of discrimination
- Health care providers must provide the appropriate support and resources that address and are sensitive to the needs of LGBT elders
Summary

- LGBT older adults are at risk of isolation and lack of family supports
- There is reduced access to aging programs for LGBT older adults
- LGBT older adults fear and face discrimination in long-term care settings
- Advance directives are critical for older LGBT adults
- Legal and government policies may cause financial insecurity and barriers to accessing benefits for LGBT older adults
Questions?
Resources and National Organizations

- Services and Advocacy for Gay, Lesbian, Bisexual & Transgender Elders (SAGE)
  - www.sageusa.org
- Gay and Lesbian Medical Association
  - www.glma.org
- American Society on Aging
  - www.asaging.org
- National Lesbian and Gay Task Force
  - www.thetaskforce.org
- Fenway Community Health Center
  - www.fenwayhealth.org
- LGBT Aging Project
  - www.lgbtagingproject.org
The National LGBT Health Education Center provides educational programming and consultation for health care organizations throughout the nation and the world with the goal of eliminating health disparities among lesbian, gay, bisexual, and transgender (LGBT) people.

The Education Center is a part of The Fenway Institute, the research, training, and health policy division of Fenway Health, a Federally Qualified Health Center, and one of the world’s largest LGBT-focused health centers.


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• If you are dialed in through your telephone and would like to verbally ask the presenter a question, use the “raise hand” icon on your control panel and your line will be unmuted.
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<table>
<thead>
<tr>
<th>Name</th>
<th>Role</th>
<th>Email</th>
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<tbody>
<tr>
<td>Dr. Jose Leon</td>
<td>Clinical Quality Manager</td>
<td><a href="mailto:jose.leon@namgt.com">jose.leon@namgt.com</a></td>
</tr>
<tr>
<td>Johnette Peyton, MS, MPH, CHES</td>
<td>Health Promotion Project Manager</td>
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