

Thank you for participating in our LGBT community survey for lesbian, gay, bisexual and transgender (LGBT) older adults. This survey was designed for LGBT adults ages 50 and up who are living in three specific regions in Michigan – Western Michigan, Great Lakes Bay Region and the Thumb, and the Upper Peninsula.

Funded by a grant from the Michigan Health Endowment Fund, this survey aims to understand your impressions and experiences of services and information for LGBT older adults in these regions as part of an effort to train service providers and identify LGBT-affirming older adult care services in these areas. Partner organizations include: ACLU of Michigan, Area Agency on Aging -A, Area Agency on Aging West Michigan, the Grand Rapids Pride Center, Michigan 2-1-1, Perceptions, SAIL, SAGE Metro Detroit, UPCAP, and UP Rainbow Pride.

The survey includes about 20 questions and should take about 10 minutes to complete.

All results from this survey will remain confidential. No individually-identifying information will be shared in any way. A report of the results will be shared by the project and all survey takers will receive a copy of the report upon request.

Thank you for taking the time to complete this survey - your perspectives are greatly valued. For more information about the Michigan LGBT & Aging Initiative, please contact Project Director Kathleen LaTosch at LaTosch Diversity & Inclusion Consulting: klatosch@gmail.com or 248-812-9202.



The Michigan LGBT & Aging Project Survey

In partnership with the ACLU of Michigan, Area Agency on Aging 7-A, Area Agency on Aging of West Michigan, the Grand Rapids Pride Center, Michigan 2-1-1, Perceptions, SAGE Metro Detroit, SAIL, UPCAP, and UP Rainbow Pride. Funded by a grant from the Michigan Health Endowment Fund.

Michigan LGBT Older Adult Survey: Print

First, please tell us a little about yourself.

1. What is your age?

- 49 or under
- 50-59
- 60-69
- 70-79
- 80-89
- 90-99
- 100+

2. How would you describe your gender?

- Male
- Female
- Gender non-binary or gender expansive

3. Do you – or have you ever – considered yourself to be transgender or transsexual?

- Yes
- No

4. Do you think of yourself as lesbian, gay, bisexual, or same-gender-loving?

- Yes
- No

5. What is your race/ethnicity: (check all that apply)

- Hispanic or Latino
- White/Caucasian
- Black/African American
- Asian/Pacific Islander
- Arab American
- American Indian
- Not listed (please specify)

6. What county do you live in?

7. Who do you live with, if anyone? (check all that apply)

- No one - I live alone
- My spouse
- My partner/significant other
- My and/or my partner's parent(s)
- My and/or my partner's adult children (18 or older)
- My and/or my partner's minor-aged children (17 and under)
- Other relatives
- Housemate(s) or roommate(s) I am not related to

8. Do you drive and have access to a car you can use when you need it?

- Yes
- I drive but do not have a car
- I do not drive
- Other (please specify)

9. How do you usually get around in your community?

- I drive a car
- Someone drives me
- Walk
- Bike
- Public bus
- Door-to-door specialty bus service
- None of the above -- I don't have good ways to get around

Michigan LGBT Older Adult Survey: Print

Next, here are some questions about information and services for older adults in your community.

10. Have you ever tried to find information for older adults in your community, either for yourself or for someone else?

- Yes, for someone else -- PLEASE ANSWER QUESTIONS 11 AND 12
- Yes, for myself -- PLEASE ANSWER QUESTIONS 11 AND 12
- Yes, both for myself and for someone else -- PLEASE ANSWER QUESTIONS 11 AND 12
- No -- PLEASE SKIP QUESTIONS 11 AND 12 AND ANSWER QUESTION 13

11. Which of the following topics did you want information on? Please check all that apply, whether it was for yourself or for someone else.

- Managing bills and finances
- Public assistance to help pay for bills
- Finding a place to live
- Managing health problems
- Finding a doctor, dentist, or other specialist
- Getting enough food to eat
- Getting meals that are already prepared
- In-home care services
- Assisted living or nursing home services
- Dementia services
- Social or recreational activities
- Keeping home/apartment clean
- Transportation
- Help for legal problems
- Finding a job or job training
- Other (please specify)

12. Where have you gone for information about these topics in the past? Check all that apply.

- 211
- Area Agency on Aging
- AARP
- Between the Lines, Michigan's LGBT newspaper
- County department or commission on aging
- Elder Law of Michigan
- Faith-based organization or church
- Friends and family
- Home care agencies
- Internet
- Library
- LGBT organization
- Michigan Medicare/Medicaid Assistance Program
- Doctor or medical provider
- Other (please specify)

13. If you had to, where do you think you would you look for information for older adults either for someone else or for yourself?

14. As you think about getting older, please rate how concerned you are about each of the following issues:

	Very concerned	Somewhat concerned	Not very concerned	Not at all concerned	N/A or don't know
Transportation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Needing help with household chores	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Getting care while I am sick	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having to care for someone else	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Affording my home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Affording health care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Loneliness or social isolation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. Do you have any other concerns about aging not listed here?

16. Are you aware of any help or support in your community specifically for gay, lesbian, bisexual or transgender seniors and older adults?

- Yes
- No

17. Thinking about the organizations providing services for seniors and older adults in your community, how likely do you think they are to be affirming and respectful of

	Very likely	Somewhat likely	Somewhat unlikely	Very unlikely	Don't know
Gay, lesbian, and bisexual older adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transgender older adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

18. Have you heard of the Area Agency on Aging?

- Yes -- PLEASE ANSWER QUESTION 19
- No -- PLEASE SKIP TO QUESTION 20
- Not sure -- PLEASE SKIP TO QUESTION 20

19. How familiar would you say you are with what the Area Agency on Aging provides?

- Very familiar
- Somewhat familiar
- Not very familiar
- Not sure

20. How frequently do you read, watch, or listen to each of the following news sources for information and news about your area?

	Regularly	Sometimes	Never
Local TV news	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Printed newspaper	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Online version of local newspaper	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
News radio	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cable TV / Satellite TV	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

21. Where do you get news specifically about LGBT issues in your community? Check all that apply.

- Mainstream news sources such as television, newspapers or radio
- A local LGBT community center or support group
- Between The Lines, Michigan's statewide LGBT newspaper
- Statewide organizations such as the ACLU or Equality Michigan
- Blogs or other websites
- Friends and acquaintances
- None. I don't get news about LGBT issues
- Other (please specify)

22. If you are willing to participate in a follow-up survey next year, please let us know how we should contact you. Please note that the data will remain entirely confidential and your contact information will only be used to contact you for the follow-up survey.

E-mail

U.S. postal mail street address

City

Zip code

23. Do you want us to send you a copy of the report when the survey is complete? (Please make sure we have your contact information above)

Yes

This completes the survey. Thank you very much for your time. Surveys completed on paper should be mailed to:

Kathleen LaTosch
SAGE Metro Detroit c/o Affirmations
290 W. 9 Mile Road
Ferndale, MI 48220