



**XIV** CONGRESSO INTERNACIONAL  
DE PSICOLOGIA CLÍNICA  
*10 a 13 novembro de 2021*



**Isipa**  
Instituto Universitário  
de Ciências Psicológicas,  
Sociais e da Vida

# Mental Health and Sexual Stigma on LGB Senior: A Systematic Scoping Review

(BD: SFRH/BD/143214/2019)

**José Alberto Ribeiro-Gonçalves\*, Joana Correia Jesus<sup>a</sup>, Pedro Costa\*, & Isabel Leal\***

**\*William James Center for Research, ISPA – Instituto Universitário**

**<sup>a</sup>Secretaria Regional da Educação, Ciência e Tecnologia**

[jgoncalves@ispa.pt](mailto:jgoncalves@ispa.pt)

## Introduction

Currently, and for the first time in history, most people can expect to live beyond the age of 60 years (WHO, 2015).

According to data from the United Nations, in 2050 one in six people in the world will be senior (UN, 2019).

Preoccupation about health of these seniors – Mental and physical

To understand the specific needs of this population, it is essential to examine the psychosocial context in which they have developed throughout their life cycle

Sexual minority seniors (LGB) in particular seem to have lower levels of mental health when compared to heterosexual seniors (Stonewall, 2011), and one of the main causes attributed to this health disparity is the continued exposure to several sources of sexual stigma, generating minority stress (Meyer, 2003).

Self-stigma

Felt stigma

Enacted Stigma

## Introduction

This population are at higher risk for the development of mental issues such as depression, anxiety and substance abuse (Hawthorne et al., 2018).

### Previous Reviews:

Cruikshank's classic review (1991)

Fredriksen-Goldsen and Muraco (2010)

Murray et al.'s (2012)

McParland & Camic (2016)...

The present systematic scoping review aimed at:

- Understanding how and which factors of sexual stigma influence the mental health of sexual minority seniors;
- Summarize the empirical research in this field of sexual minority aging;

## Method

### Search Strategies

A comprehensive search of the relevant literature was undertaken using the electronic databases EBSCO Host (Psyinfo and Psycarticles), PubMed, Web of Science, Scopus and Scielo. In addition, ResearchGate, Google Scholar and reference lists and publications of identified authors were also inspected.

The search broad-based key-terms was as follows:

[Aging *or* old\* *or* elder\* *or* gerontol\* (TI/ABS)] AND [sexual minorit\* *or* homosexual\* *or* bisexual\* *or* sexual identity *or* sexual orientation *or* non-heterosexual *or* lesbian *or* gay (TI/ABS)] AND [stigma *or* homophobia *or* self-stigma *or* felt stigma *or* homonegativity *or* heterosexism (TI/ABS)].

### Inclusion/Exclusion Criteria

Four main inclusion criteria: (1) exclusively senior people aged 60 or over, (2) sexual minorities - LGB, (3) addressing sexual stigma and (4) its relationship with mental health.

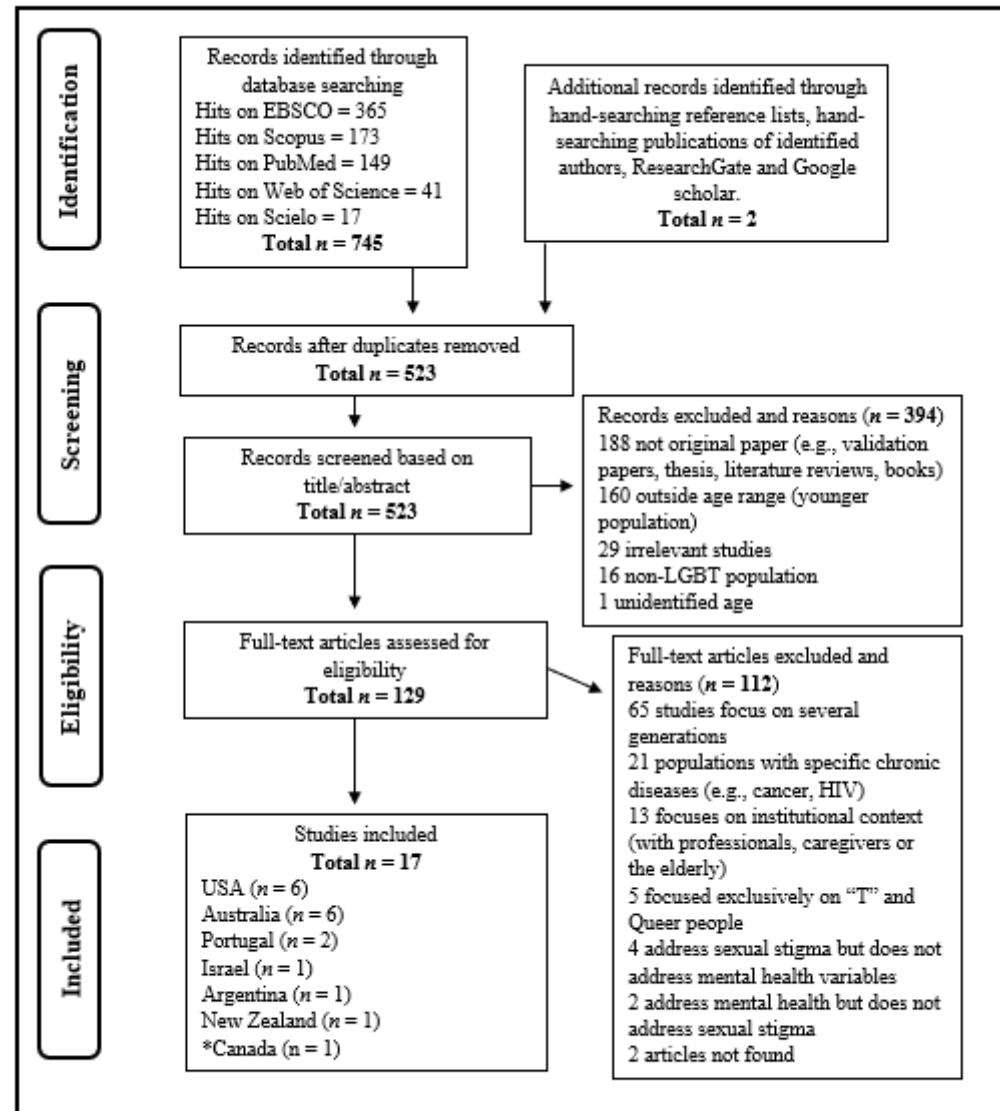
A further criterion was that papers had been published in peer-reviewed scientific journals between January 2000 and October 2020, in English, Portuguese or Spanish.

All systematic searches followed PRISMA guidelines

# Method

## Coding

A coding scheme was developed in order to systematize the information obtained from the selected studies. Based on the literature, and using Herek's (2009) conceptualization of sexual stigma, two researchers independently extracted and coded the results of all studies included in the review.



\*Note: Some studies were done partially between Canada and the United States; the total number of studies is 17

Figure 1. PRISMA flow diagram

## Results

Approximately 70% of studies were published after 2009, and the overwhelming majority were carried out in the United States (35%) and Australia (35%).

Combining the 17 studies included in this review, the total number of participants was 3,672 LGB seniors, 69% gay men and 29% lesbian women

Nearly 53% of the studies used a quantitative approach, 41% a qualitative approach, and 6% a mixed-methods approach.

Regarding theoretical models, although most articles did not identify a theoretical perspective to guide the research (47%), the main theoretical perspectives used were the Minority Stress Theory (MSM; 29.4%),

Five themes were identified: (1) Sexual stigma(s) and mental health indicators; (2) Self-stigma and mental health; (3) felt-stigma and mental health; (4) enacted stigma and mental health, and (5) Sexual stigma(s), access to health care, and mental health.

## Results

### (1) Sexual stigma(s) and mental health indicators

Different types of sexual stigma have a different influence on mental health of LGB seniors

Among the three types of sexual stigma, self-stigma was lesser examined (64%) than enacted stigma (70%), but more so addressed than felt stigma (58%).

Several studies reported moderate levels of psychological distress, depression, and moderate levels of drug use/abuse, and low levels of alcohol consumption

Sexual stigma variables were often moderately related to these mental health indicators

### (2) Self-stigma and mental health;

Studies reported high levels (average scores between 60% and 76% of the total value of the scales) of self-stigma among LGB seniors

Moderate correlations with mental health variables such as psychological distress (about .50)

Concealment of sexual orientation and internal identity conflicts as two of main factors that promoted self-stigma

## Results

### (3) Felt-stigma and mental health;

Rejection was associated with feelings of loneliness and anxiety

Invisibility also strongly contributed to felt stigma, which negatively impact the quality of life of LGB seniors

Events of discrimination can contribute to facilitating and heightening fears of future stigmatization; this hypervigilance mechanism is characteristic of felt stigma

### (4) Enacted stigma and mental health

Enacted stigma had a significant positive relationship with physical impairment and depression (b around .39 and 1.09 respectively), a significant negative relationship with quality of life (b around -.16), and a high prevalence of substance use and/or abuse

Physically assaulted reported more negative changes in their mental health

### (5) Sexual stigma(s), access to health care, and mental health

Self-stigma and enacted stigma - among the most significant predictors of disclosure of sexual orientation to health and age-care service providers (OR between .34 and .46).

LGB seniors also reported fear of victimization, avoiding seek health care, which in turn increasing the risk of mental health difficulties



## Discussion

The review shows that the three types of sexual stigma have a direct relationship with the levels of mental health in LGB seniors

All three sexual stigmas were associated with moderate to high impact on anxious and depressive symptoms – Particularly, for LGB seniors, in addition to the chronicity of the minority stress, it can also have a cumulative effect throughout the life cycle, insofar as continued exposure can generate cumulative mental and physical health risk; this exposure can lead to a diminished capacity to face aggression and microaggression, thus leaving LGB seniors even more vulnerable to mental health difficulties

We found that hypervigilance was one of the main intermediary factors between sexual stigma and mental health variables, particularly in anxiety - hypervigilance can generate psychophysiological reactions characteristic of anxiety such as muscle tension, constant fear, excessive worry, rumination and a feeling of loss of control or that something negative is about to happen, reinforcing the relationship between sexual stigma and anxiety symptoms

## Discussion

Invisibility and social rejection were other major intermediary factors between sexual stigma and mental health in LGB seniors - invisibility enhances the fear of LGB seniors to expose themselves, reinforcing the cycle of withdrawal and retraction and seem to be strongly associated to more restlessness and mental health issues, creating the expectation of LGB seniors to be alone, stigmatized, disadvantaged, and isolated with a feeling of silencing, disempowering, and rejection.

A recent review by Brunson et al. (2019) indicates that rejection sensitivity mediated the degree of emotional dysregulation and proximal stress in LGB seniors, enhancing the internalization of symptoms.

Concealment of sexual orientation and internal conflicts appeared as two of the intermediate factors between sexual stigma, particularly self-stigma, and mental health...and all types of sexual stigmas negatively influenced mental and physical health care of LGB seniors

## Discussion

Suggestions for future studies and gaps in the literature:

- Research on populations with specific orientations/identities who may suffer more stigma, including bisexual, transgender, intersex, and non-binary people.
- Oldest LGB senior populations, aged 80 and over,
- Studies regarding the cumulative impact of sexual stigma over the lifecycle on mental health of LGB seniors
- Comparative studies that focus on health indicators and their variation according to sexual orientation, comparing mainly LGB and heterosexual seniors.
- Research that focuses on positive variables in LGB seniors, mainly studies that address the determinants of well-being, resilience and successful aging in LGB seniors.
- Research to validate the applicability and effectiveness of interventions from the general population to the LGB senior population.

# References

- Dalia. (2016). Counting LGBT population. Retrieved from <https://daliaresearch.com/counting-the-lgbt-population-6-of-europeans-identify-as-lgbt/>;
- Frost, D.M., & Meyer, I.H. (2012). Measuring community connectedness among diverse sexual minority populations. *Journal of Sex Research*, 49, 36–49;
- Kuyper, L., & Fokkema, T. (2009). Loneliness among older lesbian, gay, and bisexual adults: The role of minority stress. *Archives of Sexual Behavior*, 39, 1171–1180;
- Pocinho, M., Farate, C., & Dias, C. (2010). Validação psicométrica da escala UCLA –loneliness para idosos portugueses. *Interações: Sociedade e Novas Modernidades*, 18, 65–77;
- Russell, D., Replau, L.A., & Ferguson, M.L. (1978). Developing a measure of loneliness. *Journal of Personality Assessment*, 42, 290–294;
- Bentler, P. M. (1990). Comparative fit indexes in structural models. *Psychological Bulletin*, 107, 238–246. doi:10.1037/0033-2909.107.2.238
- De Vries, B. (2014). LG(BT) Persons in the second half of life: The intersectional influences of stigma and cohort. *LGBT Health*, 1, 18–23. doi:10.1089/lgbt.2013.0005-
- Gonçalves, J. A. R., Costa, P. A., & Leal, I. (2019). Minority stress in older Portuguese gay and bisexual men and its impact on sexual and relationship satisfaction. *Sexuality Research and Social Policy*, 1-10. doi:10.1007/s13178-019-00385-1
- Grabovac, I., Smith, L., McDermott, D. T., Stefanac, S., Yang, L., Veronese, N., & Jackson, S. E. (2019). Well-Being among older gay and bisexual men and women in England: A cross-sectional population study. *Journal of the American Medical Directors Association*, in press. doi:10.1016/j.jamda.2019.01.119
- Hair, J. F., Black, B., Babin, B. J., Anderson, R. E., & Tatham, R. L. (2006). *Multivariate data analysis* (6th ed). New Jersey: Prentice Hall.
- Kessler, R. C., Andrews, G., Colpe, L. J., Hiripi, E., Mroczek, D. K., Normand, S.-L. T., ... Zaslavsky, A. M. (2002). Short screening scales to monitor population prevalences and trends in non-specific psychological distress. *Psychological Medicine*, 32, 959–976. doi:10.1017/s0033291702006074
- King, S. D., & Richardson, V. E. (2017). Mental health for older LGBT Adults. *Annual Review of Gerontology and Geriatrics*, 37, 59–75. doi:10.1891/0198-8794.37.59
- King, M., Semlyen, J., Tai, S. S., Killaspy, H., Osborn, D., Popelyuk, D., & Nazareth, I. (2008). A systematic review of mental disorder, suicide, and deliberate self-harm in lesbian, gay and bisexual people. *BMC Psychiatry*, 8, 70–87. doi:10.1186/1471-244x-8-70
- Kline, R. B. (2010). *Principles and practice of structural equation modeling* (3rd ed). New York: Guilford Press.
- Lyons, A., & Pepping, C. A. (2017). Prospective effects of social support on internalized homonegativity and sexual identity concealment among middle-aged and older gay men: A longitudinal cohort study. *Anxiety, Stress, & Coping*, 30, 585–597. doi:10.1080/10615806.2017.1330465
- McLaren, S. (2016). The relationship between living alone and depressive symptoms among older gay men: the moderating role of sense of belonging with gay friends. *International Psychogeriatrics*, 28, 1895–1901. doi:10.1017/s1041610216001241
- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin*, 129, 674–697. doi:10.1037/0033-2909.129.5.674
- Pereira, H., de Vries, B., Serzedelo, A., Serrano, J. P., Afonso, R. M., Esgalhado, G., & Monteiro, S. (2019). Growing older out of the closet: A descriptive study of older LGB persons living in Lisbon, Portugal. *The International Journal of Aging and Human Development*, 88, 422–439. doi:10.1177/0091415019836107
- Pereira, H., Leal, I., & Marôco, J. (2010). Questionário de Identidade Homossexual [Homosexual Identity Questionnaire]. In I. Leal & J. Marôco (Eds.), *Avaliação em Sexualidade e Parentalidade* (pp. 43–55). Lisboa: Livpsic
- Pereira, H., Serrano, J. P., de Vries, B., Esgalhado, G., Afonso, R. M., & Monteiro, S. (2017). Aging Perceptions in Older Gay and Bisexual Men in Portugal. *The International Journal of Aging and Human Development*, 87, 5–32. doi:10.1177/0091415017720889
- Preacher, K. J., & Hayes, A. F. (2008). Asymptotic and resampling strategies for assessing and comparing indirect effects in multiple mediator models. *Behavior Research Methods*, 40, 879–891. doi:10.3758/brm.40.3.879
- Steiger, J. H. (1990). Structural model evaluation and modification: An interval estimation approach. *Multivariate Behavioral Research*, 25, 173–180. doi:10.1207/s15327906mbr2502\_4
- The Williams Institute. (2016). *LGBT aging: A review of research findings, needs, and policy implications*. Los Angeles, USA: Author.
- United Nations (UN). (2015). *World population prospects: The 2015 revision, key findings and advance tables*. New York, USA: Author.
- Wight, R. G., LeBlanc, A. J., Meyer, I. H., & Harig, F. A. (2015). Internalized gay ageism, mattering, and depressive symptoms among midlife and older gay-identified men. *Social Science & Medicine*, 147, 200–208. doi:10.1016/j.socscimed.2015.10.066
- World Health Organization (WHO). (2012). *Strategy and action plan for healthy ageing in Europe, 2012–2020*. Malta: Author.



**XIV** CONGRESSO INTERNACIONAL  
DE PSICOLOGIA CLINICA  
10 a 13 novembro de 2021



Instituto Universitário  
de Ciências Psicológicas,  
Sociais e da Vida

# Mental Health and Sexual Stigma on LGB Senior: A Systematic Scoping Review

## Thanks!

**José Alberto Ribeiro-Gonçalves\*, Joana Correia Jesus<sup>a</sup>, Isabel Leal\*, & Pedro Costa\***

**\*William James Center for Research, ISPA – Instituto Universitário**

**<sup>a</sup>Secretaria Regional da Educação, Ciência e Tecnologia**

[jgoncalves@ispa.pt](mailto:jgoncalves@ispa.pt)