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Retirement housing preferences of the homosexual elderly

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San Jose State University, 1992

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RETIREMENT HOUSING PREFERENCES
OF THE HOMOSEXUAL ELDERLY

A Thesis

Presented to

The Faculty of the Department of Nursing
San Jose State University

In Partial Fulfillment
of the Requirements for the Degree
Master of Science

By


Victor Harry Holliger

August, 1992

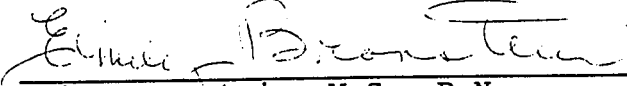
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Virgil Parsons, D.N.Sc., R.N.

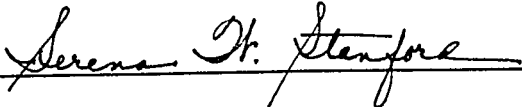


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ABSTRACT

RETIREMENT HOUSING PREFERENCES
OF THE HOMOSEXUAL ELDERLY

by Victor Harry Holliger

This research project investigated preferences in retirement housing among older homosexuals. A nonrandom volunteer sample of two lesbians and eight gay men, with a mean age of 56.6 years, were interviewed. The majority indicated a need for homosexual-sensitive retirement facilities, though they did not feel such a facility should be exclusively for homosexuals. Sensitivity towards homosexuality by the facility's staff and security were the most frequently mentioned characteristics desired.

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Chapter 1

INTRODUCTION

According to the Kinsey Report (1948), 10% of the adult population in the United States is homosexual. This means that of the 146,000 San Franciscans over the age of 60, approximately 14,600 are senior gay men and lesbians. If one includes the entire San Francisco Bay Area, this figure increases dramatically. In a homosexual aggregate of this size, there are bound to be a considerable number who will seek retirement housing. There likely is an interest in homosexual-sensitive retirement facilities.

The creation of a gay male and lesbian retirement housing complex is not a new idea. During the 1930's, Sweden's homosexual king, Gustaf Adolfus, assisted in the establishment of a housing complex in Stockholm for his country's retired homosexual population (Cockrell, 1988). To date, however, there is no exclusively homosexual retirement housing facility in the San Francisco Bay Area.

According to Ebersole and Hess (1981), the term "community" may be defined as a "social group of any size whose members reside in a specific locality, share government, and have a common cultural and historic heritage" (p. 250). Community implies a group whose members care for each other in times of need. It would seem that

any legitimate homosexual community, then, would include concern for its elderly members.

During the past two decades, researchers in homosexuality have examined the existence and special needs of this elderly homosexual minority. According to Berger (1982b), Kelly (1977), and Lucco (1987), one of the concerns of senior homosexuals is housing. As stated, homosexual-sensitive retirement housing facilities presently do not exist. Senior gay men and lesbians may end up alone and isolated, in environments with no one to share their rich homosexual life experiences. The establishment of retirement housing for homosexuals may provide an alternative milieu for promoting social interaction and combating possible loneliness and social isolation.

Research by Lee (1988) indicates homosexual elders still feel invisible in the "liberated" homosexual communities. There remains a lack of organizations for older gay men and lesbians (Berger, 1982b; Lee, 1988). The suggested senior housing for graying homosexuals could help establish elderly homosexual visibility and eliminate what Lee (1988) has labeled "an empty niche in the ecology of gay communities" (p. 80).

Statement of the Problem

Housing is a very important concern for any elderly individual since it raises questions regarding privacy,

independence, freedom of intimacy, and sexual expression of the individual. Ebersole and Hess (1981) state that housing should match the individuals with an environment that meets their needs. Spradley (1986) asserts that an environment should promote, among other things, mental well-being by permitting privacy, independence, and most importantly, continuation of one's life style. Furthermore, cultural supportive environments also need to be considered (Snyder, 1982).

Burnside (1981) states that by the 21st Century, the aged population (over 65 years old) is expected to be 29 million. When gerontologists, policy and program planners, and direct service providers speak of this elderly population, they seem to assume all to be heterosexual and forget that approximately 10% are homosexual. Society remains heterosexist (Friend, 1987) and simply does not recognize the existence of older gay men and lesbians. Nor is the dominant heterosexual society prepared to deal with the psychosocial needs of the thriving older homosexual subculture in the United States. Very possibly the majority of senior homosexuals eventually end their lives in environments that neither promote their mental well-being, nor counter the prevalent negative social attitudes towards homosexuals. This study focuses on the retirement housing preferences of the next generation of gay male and lesbian

elders, homosexuals who are presently in their 50's and 60's. This generation has experienced first-hand the Gay Rights movement of the 1960's, the Gay Pride activism of the 1970's, and the homosexual political and financial clout of the 1980's. The establishment of senior gay male and lesbian retirement housing could emerge from this generation of socially conscious homosexuals.

Research Questions

This study sought to determine the retirement housing preferences of gay men and lesbians presently in their 50's and 60's. The following research questions were asked:

1. Is there a common retirement housing preference among homosexuals in their 50's and 60's?
2. Is there an intention to enter such a facility if one existed?
3. What are the desired services and features related to a retirement housing facility for homosexuals in their 50's and 60's?
4. What are the least desired services and features related to a retirement housing facility for homosexuals in their 50's and 60's?

Purpose and Need

The purpose of this study was to investigate the interest in planned retirement housing among gay men and lesbians now in their 50's and 60's and their preferences

regarding facility characteristics. There were no homosexual-sensitive retirement housing facilities for the existing elderly homosexual aggregate at the time of this study. Greater than 50% of the participants in several studies (Almwig, 1982; Kehoe, 1988; Lucco, 1987; Robinson, 1979) indicated an interest in such facilities. This study was designed to explore the immediate and future desires and need for homosexual-sensitive retirement housing facilities among this sector of American society.

The homosexual community is now realizing what the Black, Hispanic, and other minorities concluded during the 1960's. The dominant culture seems unwilling, or unable, to provide the unique kinds of services required by the homosexual sector (Berger, 1982a). This is further aggravated by the hostile environment members of this alternative life style encounter in a homophobic society. The size of the homosexual community in addition to the studies indicating an interest in homosexual retirement housing needs are noteworthy.

Definitions of Terms

For the purpose of this study, the following definitions applied:

1. Gay man is a nonpejorative synonym for the male homosexual. His sexual orientation is self-identified.

2. Lesbian is a nonpejorative synonym for the female homosexual. Her sexual orientation is self-identified.

3. Retirement housing facility refers to any residential complex or retirement community that primarily serves the retired population.

Research Design

This study on homosexual-sensitive housing preferences utilized a qualitative research approach, and the method applied was the case study. An interview schedule was developed to collect the data. Each interview was tape recorded. The target population consisted of homosexuals who ranged from 50-69 years old.

Limitations

There were two major drawbacks to this case study methodology. The first drawback was that of subjectivity. The familiarity of the researcher with the topic made objectivity difficult. Furthermore, objectivity was especially problematic since the data were collected by only one investigator who might have interjected preconceived ideas in the design and analysis of variable relationships.

The second major drawback for this study was its inadequacy as a basis for generalization. The method of selecting the subjects was not random. An individual was included if the person met the criteria and consented to participate. Findings cannot be generalized beyond the

participating population, but the findings will provide a basis for further research.

Chapter 2

CONCEPTUAL FRAMEWORK AND REVIEW OF RELATED LITERATURE

This chapter provides a discussion of the conceptual framework for this study. The framework is based on Leininger's conceptual model. A review of related literature also is included.

Conceptual Framework

Leininger's theory (1988) of cultural care diversity and universality provided the conceptual framework for this investigation of planned retirement housing preferences of the homosexual population. This ethnonursing approach is based on the assumption that cultural, historical, and social factors are crucial for maintaining a state of well-being of an individual (Leininger, 1988). The desired goal of ethnonursing is culturally congruent care.

Ethnonursing contains four key, reticulated concepts:

(a) culture, (b) care, (c) health, and (d) environment.

According to Leininger (1988), culture refers to the "learned, shared, and transmitted values, beliefs, norms, and life practices of a particular group"; care refers to the "phenomena related to assisting, supporting, or enabling behavior toward or for another individual (or group) to improve a human condition or lifeway"; environment refers to the "totality of an event, situation, or particular experience that gives meaning to human experiences"; and

health refers to a "state of well being that is culturally defined, valued, and practiced" (p. 156). Culture may be viewed as the "blueprint" for understanding the individual. The environment, which includes physical, social, and ecological aspects, plays a dominant role in the shaping of culture.

To clarify her theory of cultural care diversity and universality, Leininger developed the Sunrise Model, a conceptual "picture of the theory" (see Appendix A). The model illustrates how the various components of Leininger's theory "influence the care and health status of individuals, families, groups, and sociocultural institutions" (Leininger, 1988, p. 156) and gives a holistic view of the reticulated components and how research can be initiated at any given point of the model. Leininger (1988) insists that her model "should not be used from a causal, linear, or positivistic perspective, but rather with the goal to discover the essence, meanings, and patterned expressions of generic and professional care" (p. 157).

According to Leininger (1984), American nursing has been ethnocentric due to a unicultural orientation. Differences in emics (values, beliefs, and patterns of a culture or subculture) may provide unexpected, non-therapeutic results. By incorporating the client's emics into his or her care, the nurse better serves the health

client's emic knowledge and experiences are more important than those of the nurse.

Leininger (1979) asserts that "the diverse needs of cultural and subcultural groups (including minorities) will become more problematic and challenging" (p. 315) to the nursing profession. Atchley (1985) claims that the elderly currently represent 11.3% of the population and will expand to 20.9% of the population by the year 2030. Furthermore, Atchley (1985) asserts that along with this graying of the American population will be an increased need for services sensitive to minority and ethnic groups among the elderly. Leininger (1979) declares that the nursing profession should "take seriously people's needs for personal, social, and culturally-based support systems that will help them grow and realize their full human potentialities" (p. 328). She advocates "planning for quality life care for the elderly" (Leininger, 1979, p. 315), where care is "closely related to home and community cultural values so that the care will be meaningful and desired by the elderly in their familiar environments" (Leininger, 1979, p. 319).

Review of Related Literature

During the past several decades, many researchers and practitioners have become interested in the aged, the aging process, and the concerns of the elderly. However, there is a heterosexual assumption in all these studies which

neglects to consider the elderly homosexual aggregate. Gay male and lesbian elders share with all elderly the goal of living with comfort and dignity in their last stages of life.

One major concern of the published literature has been housing for the elderly. This is a subject that raises questions regarding privacy, independence, freedom of intimacy, and sexual expression. While numerous studies have assessed the attitudes and preferences of the elderly heterosexual population regarding retirement housing facilities, few studies have been found assessing the housing preferences of aging homosexuals. The purpose of this literature review is to summarize the relevant literature concerning housing preferences of the graying homosexual community.

Self-actualization is the highest level of human function as defined by Maslow (1962). Ebersole and Hess (1981) emphasize that the environment, the state of one's health and sociocultural background are important for awakening one's potential. Leininger (1979) also emphasizes the need of different culturally based support systems to promote people's full human potentialities. Fries and Crapo (1981) assert better mental and physical health are linked with autonomy and with control over one's environment rather than the environment controlling the individual. Berger

(1982a) insists that association with other gay men and lesbians is crucial to self-acceptance, particularly with the present elderly homosexuals who experienced adolescence during a severely repressive period in homosexual American history. Exposure to other gay men and lesbians assists in countering the prevalent homophobia and negative social attitudes this aggregate continuously faces (Berger, 1982a, p. 24).

Early inquiry on homosexuality by various researchers (Beck, 1963; Hoffman, 1968; Weinberg, 1973; Weinberg & Williams, 1975) has developed an accurate composite image of this thriving subculture. The homosexual aggregate is psychologically healthy, and gay men and lesbians come from every socioeconomic and religious background. Also, the homosexual community exhibits varied life styles and is a population usually indistinguishable from the heterosexual mainstream.

Recent research by Berger (1982b), Friend (1987), Kehoe (1988), and Lee (1987) on aging homosexuals has dispelled many fallacies. There is a great diversity among graying homosexuals as is true for aging heterosexuals. The problems senior gay men and lesbians face many times are similar to those faced by their heterosexual counterparts such as health and mental-health care, legal rights, transportation, finances, and housing (Lee, 1987).

However, Friend (1987) notes that older homosexuals are "faced with the double stigmatization and oppression of both age and an unpopular sexual orientation" (p. 309). Berger's study (1982a) also confirms Friend's findings. Though federal nursing home regulations mandate married couples the right to room together (Branselle, 1987), Friend (1987) found the same is not true for homosexual couples. Society continues to discriminate against homosexuals on the basis of sexual preference. Life insurance policies may be withheld if one's homosexuality is discovered, wills that name homosexual "marriage" partners can be contested successfully, and visitation rights in hospitals and nursing homes do not reflect client's family-of-choice (Kelly, 1974).

Research by Lee (1987) and Lucco (1987) has shown that the plight of elderly gay men and lesbians is not as negative as some researchers report. Friend (1987) argues that research on the aging of homosexual people can provide clinical implications for the heterosexual elderly. Nonetheless, researchers agree that the homosexuals do have unique concerns regarding aging.

The initial study that broached the subject of homosexual housing was by Kelly (1974), a social worker and gerontologist. An exploratory study of 241 homosexual men from the Los Angeles area used questionnaires and taped

interviews. Kelly was interested in exploring the stereotypes related to aging gay men. In a question related to retirement housing, 51% of the respondents indicated a need for homosexual-sensitive housing facilities. Unfortunately, the respondents ranged from 16 to 79 years old, making interpretation of the data difficult. Kelly made no attempt to obtain sample respondents from the lesbian aggregate.

There are two early studies that touch on the lesbian response to homosexual-sensitive retirement housing. For her master's thesis, Robinson (1979) interviewed 20 West Coast lesbians over 50 years old concerning their adaptation to their homosexuality. Sixty percent of her sample responded positively to the idea of a homosexual-sensitive retirement community. No respondent expressed an interest in a heterosexual retirement community. On the East Coast, Almvig (1982), also working on her degree in social work, interviewed 25 lesbians over the age of 65 and found 61% of her respondents preferring health-related retirement housing sensitive to the homosexual client.

The first nation-wide attempt to gather information on lesbians over 69 years old was performed by Kehoe (1988), a San Francisco gerontologist. To find respondents, Kehoe sent posters and announcements to feminist book stores and colleagues and universities, as well as homosexual

colleagues and universities, as well as homosexual associations describing her project. One hundred and thirty-four pretested questionnaires were sent out to those who responded to the flyer. One hundred and six questionnaires were returned within the allotted 4 month period. Greater than 50% of the respondents expressed an interest in homosexual-sensitive retirement facilities.

An even larger study, including both gay men and lesbians, that focused solely on the retirement housing preferences of graying homosexuals, was conducted by Lucco (1987). A nonrandom sample of 399 gay men and 57 lesbians, with a mean age of 63.3 years, completed the anonymous survey. The results indicated a majority were interested in planned homosexual-sensitive retirement housing.

What emerges from the literature review is the paucity of work related to homosexual-sensitive retirement housing facilities. The rights to a sense of identity, personal dignity, and self-determination need to be secured for elderly homosexuals. According to Pogoncheff (1979), there is an estimated homosexual population of at least 20 million in the United States alone. A definite need exists for further studies regarding homosexual-sensitive retirement housing preferences.

Chapter 3

DESIGN AND METHODOLOGY

This chapter is a discussion of the design and methodology of the study. The case study research method was used to study housing preferences of the graying homosexual population. Included in this section will be a description of the data collection instrument and the selection of the sample population.

Research Design

As the literature review demonstrates, little quantitative data exists regarding housing preferences for the aging homosexual population. According to LoBiondo-Wood and Haber (1986), "qualitative methods are important in the repertoire of tools available for developing knowledge" (p. 182). LoBiondo-Wood and Haber (1986) recommend using the case study format when in-depth information is desired and when there is a lack of background information. The case study format also is an appropriate transcultural nursing technique when focusing on a narrow area of inquiry. Therefore, the case study design was selected to explore the topic of homosexual-sensitive retirement housing facilities.

Description of Sample

The sample population came from counties in the northern San Francisco Bay Area. There were no accurate accounts of the racial, age, or socioeconomic parameters of

the American homosexual population available. Entree into this cultural subgroup was achieved through friendship networks, homosexual bars, and homosexual-sensitive book stores. Participants were selected in a nonrandom manner, with the final selection based on geographic location, consent, and ability to coordinate the timing for the interview.

Efforts were made to procure key informants and general informants. According to Leininger (1985), a key informant represents an individual "most knowledgeable about the domain" (p. 147). "Domain" refers to the area of investigation. The key informant also is representative of the domain (Leininger, 1985).

Data Collection

The interviews took place from November, 1991, through January, 1992. The interviews lasted approximately 1-2 hours and were conducted by the same interviewer, which allowed for clarification of any misunderstood questions. The interview was executed in a standardized format as asserted by Spradley (1979). All questions were asked in the same order, and the interviews were tape recorded.

Instrument

The data collection instrument used in this study was an interview schedule (Appendix B). The interview schedule functioned as a guide for the interviewer for both phrasing

the questions and recording the responses. The schedule was developed by the researcher based on Spradley's (1979) ethnographic interview techniques. The questions were derived from the literature and critiqued by the researcher's advisors to establish content validity. Input from informants was encouraged for additional verification of content validity. Approval by the San Jose State University's Department of Nursing and the San Jose State University Institutional Review Board for Human Subjects (IRB-HS) was obtained.

An announcement was placed at locations where the researcher planned to gain access to respondents (Appendix C). Permission to place the announcement was first obtained. Included in the announcement was an explanation regarding the purpose of the study and a telephone number for any interested person to call.

Analysis

As mentioned earlier, each interview lasted approximately 1-2 hours, with only one interview scheduled a day. Each audio taped interview was then transcribed by the researcher. After five interviews were completed, the researcher scrutinized the responses to each question in order to find common themes. Categories were established from the common dimensions. Each additional interview was transcribed and examined for similar themes. After the

completion of 10 interviews, the dimensions for each question were again reviewed to determine if further categories existed. No major new themes emerged.

It was obvious in reviewing the tapes there was a quantity of material. Each respondent proved attentive and thoughtful in his or her responses. Unfortunately, not all of the material could be presented due to the time limitation of this study. Analysis was directed at meeting the objectives of this study.

Chapter 4

ANALYSIS AND INTERPRETATION OF THE DATA

This chapter presents an analysis of the information gathered through the interview with 10 respondents. The respondents were key informants from the homosexual community in various stages of dealing with retirement. Analysis of the responses reveals three categories of information: (a) socioeconomic data about the respondents, (b) descriptive data about housing preferences, and (c) details regarding interest in homosexual-sensitive retirement housing. The narrative discussion presented is a composite description of the information provided by the responses in each category.

Socioeconomic Data

The sample was composed of eight men and two women. Age ranged from 50 to 68 years old, with a mean of 56.7 years. Four of the respondents lived with significant others, while four of the respondents lived alone. Two respondents lived with roommates.

All of the participants in the sample had at least a high school diploma. Three of the sample held a baccalaureate degree. Two respondents held higher degrees. Three of the respondents had incomes of \$25,000 or less a year, while five participants had annual incomes of \$25,000-\$35,000. Only two respondents reported annual incomes of

over \$35,000. Two participants owned their own homes. The predominant ethnic identity of the sample was Caucasian, with one Hispanic participant and one Black participant. Six respondents stated they were Protestant, three respondents were Catholic and two participants were Jewish.

Descriptive Data About Housing Preferences

The interviews revealed descriptive information about retirement housing preferences among the participants. Respondents were asked to define the phrase, "retirement housing facility." The majority of the participants identified a housing complex which provided shelter, security, and some form of health care security. Each respondent felt an individual would live an independent life in one's own apartment or housing unit, having access to health and social services. Each participant emphasized the importance of maintaining control over one's life. Data regarding the participants' choice location for the retirement facility indicated an urban or suburban setting; none indicated a rural setting. Five of the respondents specified that the facility should only allow people of one's own age cohort. All of the respondents indicated they would consider a retirement facility only if they were without a significant other; none expressed an interest in entering a facility with a significant other. Furthermore, no respondent expressed an interest in entering a nursing

home in his or her senior years. There was no definite anticipated age of entry into retirement housing among the sample.

Respondents were asked to identify and describe those features and services they considered essential for a retirement housing facility. Nonessential features and services also were identified. From their responses, a composite of the desired retirement housing facility was formed.

Affordability, security, and staff sensitivity were the three most frequently mentioned features by the volunteer respondents. All participants indicated that the costs for a housing facility should be at a reasonable fixed rate. Six respondents specifically mentioned the limited incomes of senior citizens as the major limiting factor for seniors accessing into a retirement facility. The majority indicated affordability would probably limit the amount of medical service proffered by the retirement facility.

Staff sensitivity was listed by nine of the volunteer respondents as an essential feature they would look for in a retirement facility. Four cited their personal life experiences as a homosexual in a homophobic society as the reason for insisting on staff sensitivity. One explained, "I would want them [the staff] to know that I am a gay person. I would much prefer a facility that would respect

my homosexuality.... Gay people are still treated like third-class citizens."

An awareness of violence towards the elderly was prevalent in the response to the question regarding essential features for a retirement housing facility. Eight respondents supported their insistence on security by remarking specifically about the "gay bashings" and violence directed towards gay men and lesbians, and the violence directed towards senior citizens in general. One participant expressed his concern about security for elderly homosexuals particularly if "word got out that it [the retirement housing complex] was all gay."

A variety of other services also were considered essential. Four of the sample indicated that allowing pets was important. Four respondents indicated accessibility to public transportation as an important factor. Access to social services, to entertainment, and to shopping, and the provision of one meal were frequently mentioned as essential features and services to look for in a retirement housing facility.

The most frequently indicated nonessential services by the volunteer respondents were maid service and three prepared meals a day. Two participants felt van or taxi service was nonessential. Six participants stated they could not think of any specific nonessential features or

services. No one outstanding item was mentioned by this group as nonessential.

Details Regarding Interest in Homosexual-Sensitive Retirement Housing

Of the 10 respondents, only two answered yes to the question, "Would you consider moving into a retirement housing facility for homosexuals?" Each respondent had no significant other, and each was employed as a bartender in one of the local homosexual bars. The other eight respondents agreed to the need for the establishment of retirement housing facilities for homosexuals. However, they felt a facility exclusively for homosexuals was not for them. As one respondent declared, "Some of my friends who have a total gay life...would love a place like this [homosexual retirement housing]. I think they would be lost around heterosexuals." Another respondent stated, "I think it's a wonderful idea because I know a lot of older homosexuals who don't have a social life." All of the respondents agreed homosexuals had "special needs" and "their own issues" regarding retirement housing concerns which have not been addressed.

The respondents in this study noted a difference between a homosexual-sensitive retirement housing facility and a homosexual retirement housing facility. Each participant viewed the latter as being exclusively

homosexual, while the homosexual-sensitive facility represented a housing complex where tolerance towards the homosexual alternative life style was supported. As one respondent stated:

I just think it [an exclusively homosexual facility] limits your outlook on life and your exposure to various people. There are a lot of straight people out there who are wonderful people. And there are a lot of gays that are not such wonderful people. I would not want to be limited to one aspect of society.

The results from these data do not indicate a preference towards a housing facility limited to members of one's own gender. The majority of respondents favored a facility for both gay men and lesbians. As another respondent declared:

I like to be exposed to as many different people as possible. Lots of diversity. Women experience the world differently from the way men do, and I want to be exposed to that. I enjoy my women friends, and I learn a lot from them. I have a different point of view to offer them.

Discussion

It is probably impossible to find a random sample that is representative of all older homosexuals since the universe of older gay men and lesbians is unknown. This

study does not necessarily reflect all the life styles of the aging homosexual population. The sample population for this study has demonstrated that older homosexual people have concerns similar to older heterosexuals, such as health, income, housing, security, access to medical care, access to transportation, and access to social services. The current findings are similar to previous studies by Berger (1982a), Friend (1988), Kehoe (1988), and Lee (1987) and demonstrate the great diversity among aging homosexuals. This inquiry found older homosexuals come from varied living arrangements and varied socioeconomic positions.

This information agrees with the findings by Almvig (1982), Lucco (1987), Kehoe (1988), and Robinson (1979) concerning an interest in gay men/lesbian retirement housing facilities. All of the respondents voiced the need for homosexual-sensitive retirement housing. Only two of participants in this study expressed any interest in entering an exclusively homosexual retirement housing facility. The aforementioned studies indicated between 50% to 60% of their respondents would consider relocating to a homosexual retirement facility. The previous studies, however, did not differentiate between the homosexual-sensitive retirement facility and an exclusively homosexual retirement facility. This difference may explain the

discrepancy between the present findings and some of the previous studies.

The current data regarding essential and nonessential features and services are in general agreement with Lucco's study (1987). In both this study and Lucco's study, the majority of respondents preferred an urban/suburban setting for a retirement facility. Staff sensitivity to residents' needs/problems and access to scheduled public transportation were the most common desired features in both studies. Least desired services and features, however, varied between studies. This may be due to the data collection instrument used by Lucco. Volunteer respondents in Lucco's study were given a list in which the participant was to place each item in order of preference.

The data collection instrument used by Kehoe (1988) and Lucco (1987) was a questionnaire which was distributed through gay men and lesbian organizations and publications. It may be that those who elected to participate had a particular interest in the area of examination and may have been more willing to fill out the questionnaire and return it. Those with no interest may have discarded or ignored the questionnaire. It is also possible that persons who had received the questionnaire passed it on to a friend thereby changing the characteristics of the sample.

Both Almvig (1982) and Robinson (1979) used an interview schedule for their studies. Their results do differ from this current study by claiming the majority of their respondents would prefer homosexual retirement complexes. Neither study, however, dealt with respondents' intent to enter such retirement facilities. Furthermore, the focus for Almvig's (1982) study and Robinson's (1979) study focused on lesbian adaptation to aging and not exclusively with housing preferences. Their interview schedules may not have fully explored the respondents' attitudes regarding homosexual-sensitive retirement housing facilities.

In summarizing the data, it is important to note the respondents tended to agree there is a need for retirement housing facilities sensitive to the homosexual life style. This did not necessarily mean all homosexual elderly would make this choice. The majority of participants in this study preferred not to enter such a facility. Also noteworthy are the concerns related to security and sensitivity to alternative life styles in a retirement housing facility for homosexuals. Such concerns would have to be addressed before the establishment of such a housing complex.

Chapter 5

CONCLUSIONS AND RECOMMENDATIONS

By the 21st Century, the aged population will dramatically increase, representing an important segment of society. A significant elderly homosexual population exists amidst the aging heterosexual population. Yet, gerontologists, policy and program planners, and direct service providers have failed to acknowledge the existence of older gay men and lesbians (Friend, 1987). Retirement housing preferences of older homosexuals represents one example.

The objective of this study was to identify the features and services related to retirement housing facilities for the senior homosexual population and to determine whether an interest existed in homosexual-sensitive retirement housing facilities. The conclusions were based on 10 key informants who volunteered to answer 14 questions during a taped, open-ended interview. The interviews provided descriptive information about housing preferences and details regarding interest in homosexual-sensitive retirement housing.

This study confirmed the findings of earlier studies concerning living arrangements for elderly gay men and lesbians. There definitely was considerable interest in retirement housing facilities that would be sensitive to the

homosexual experience. Homosexual preferences for services and features seemed no different from heterosexual preferences. Interest in exclusively homosexual retirement facilities was lacking.

The concept of retirement housing specifically sensitive to the homosexual minority warrants further consideration and investigation. The review of literature demonstrates the paucity of information regarding housing preferences for older homosexuals, but the interest still exists. In a metropolitan area such as the San Francisco Bay Area, feasibility studies should be conducted to determine the homosexual community's desire for homosexual-sensitive retirement housing and possible local prospective sponsors for such housing projects. More detailed information would be necessary.

The study is clearly limited because of the small sample size and limited geographic area. It would be useful to repeat such a study and conduct similar interviews with a larger sample from other areas beyond the San Francisco Bay Area. Efforts to include non-Caucasian homosexuals should be made to obtain their input regarding housing preferences.

The invisibility of the older homosexual is coming to an end. The "closet door" is now open to reveal a resilient, aging homosexual population, a group not too dissimilar to the heterosexual population. Gay men and

lesbian elders share with all elderly the goal of living with comfort and dignity in the last stages of their lives. The quality of life as an individual ages may be determined less by one's sexual orientation and more by factors that affect older people in general. Exploring the option for a homosexual-sensitive retirement housing facility is just one way to address the problem of validity of the homosexual life experience and be responsive to the psychosocial needs of gay men and lesbian elders.

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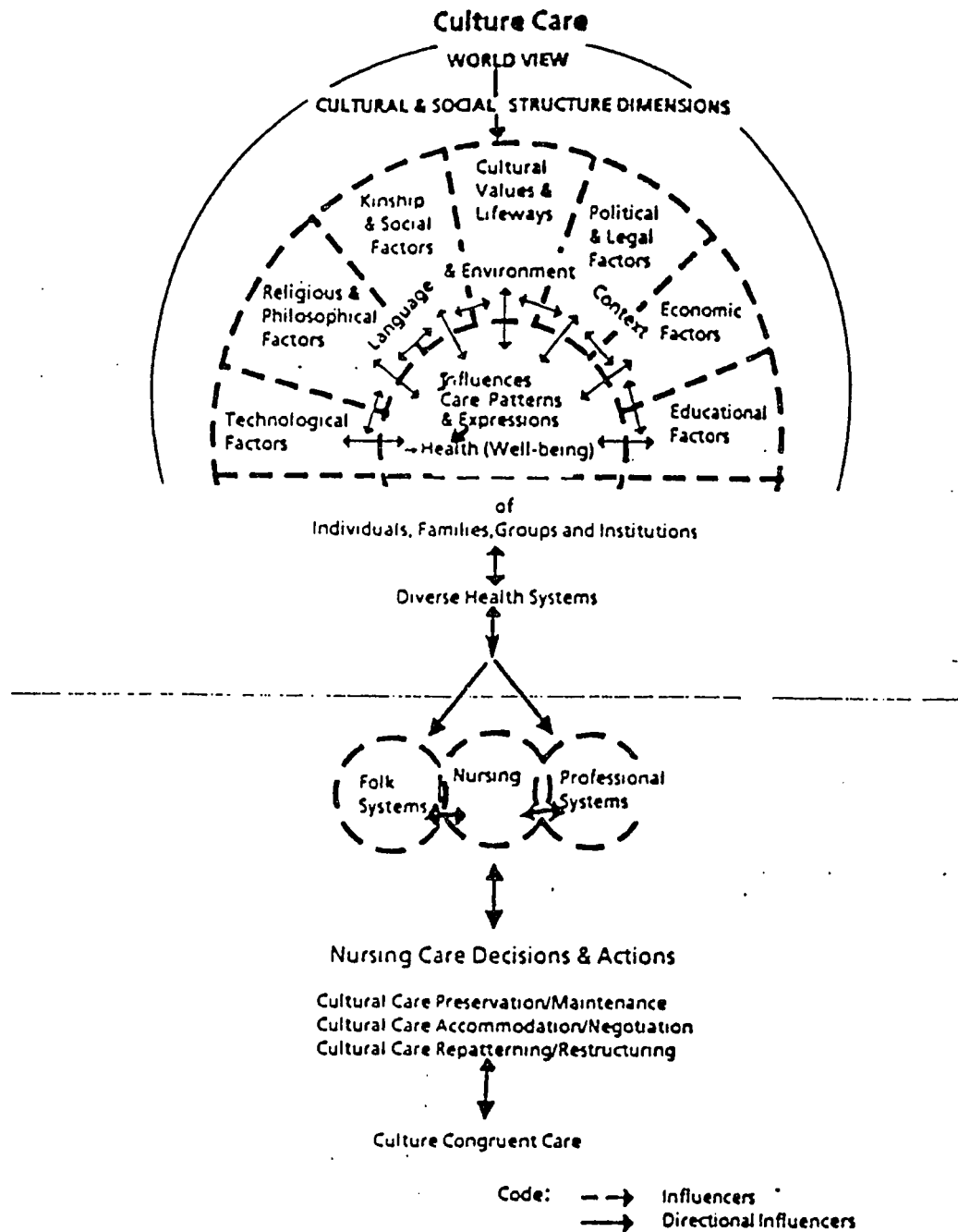
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APPENDIX A
Sunrise Model



Sunrise model to depict dimensions of cultural care diversity and universality: A theory of nursing.

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APPENDIX B
Interview Schedule

Interview Schedule

Section 1

1. What is your sex?
 - a. Female
 - b. Male
2. What is your age?

3. What is your ethnic identity?
 - a. Asian
 - b. Hispanic
 - c. White
 - d. Other (please specify) _____
4. Current living arrangement?
 - a. Own home
 - b. Rent
5. Current living condition
 - a. Alone
 - b. With lover
 - c. With roommate(s)
 - d. With family
 - e. Other arrangement (please specify) _____
6. What is your highest level of education?
 - a. Grade school
 - b. High school
 - c. Some college
 - d. College graduate
 - e. Master's degree
 - f. Other advanced degree
7. Present yearly income?
 - a. \$25,000 or less
 - b. \$25,000 - \$35,000
 - c. \$35,000 - \$45,000
 - d. Greater than \$45,000
8. Religious preference?
 - a. Protestant
 - b. Roman Catholic
 - c. Jewish
 - d. Other (please specify) _____

Section 2

1. Describe or define the phrase "retirement housing facility."
2. If you wanted or needed a retirement housing facility, what would you look for?
- 3 Describe your criteria as to when you would enter a retirement facility.
4. Would you prefer a housing facility limited to members of your own sex? Why or why not?
5. Describe those services you believe are essential in a retirement housing facility.
6. Describe those services you believe not necessary in a retirement housing facility.
- 7 When would you anticipate entering a retirement housing facility?
8. What are your feelings regarding a homosexual-sensitive retirement housing facility?
- 9 Would you anticipate entering a retirement housing facility alone?
10. Do you believe there is a need for homosexual retirement housing?
11. What are your feelings regarding entering a homosexual retirement housing facility?
12. Could you explain why/why not you would/would not enter a homosexual retirement housing facility?
13. What are your feelings regarding discrimination against elderly homosexuals and housing?
- 14 Do you know any elderly homosexuals living in retirement housing?

APPENDIX C
Announcement

November 30, 1991

Dear Friend:

First, let me introduce myself. I am a registered nurse conducting a county-wide study to gather information on preferred retirement housing facilities of the homosexual community. I am interested in interviewing gay men and lesbians in their 50's and 60's who are about to retire or who have just retired. This research is part of meeting the requirements for a master's degree in nursing at San Jose State University.

The information you provide will add to the presently limited knowledge on this topic. All information you give is strictly confidential.

If you would be willing to participate in this research project, please call me at the following number: (707) 554-2515. Thank you for your interest and response.

Respectfully,

Victor Holliger, R.N.

APPENDIX D

Consent Form for Participation

Consent Form

You, _____, are invited to participate in a research study of retirement housing preferences for homosexuals now in their 50's and 60's. The researcher hopes to collect qualitative data regarding interest in homosexual-sensitive retirement housing and factors related to facility characteristics. The study is being conducted, and will be reported, as a graduate thesis for the San Jose State University Department of Nursing.

If you decide to participate, I, Victor Holliger, will interview you utilizing the enclosed interview schedule. The interview will be tape recorded. The interview will take place at a mutually agreed upon location. If you consent to be interviewed, you may revoke your consent at any time. You may refuse to answer any of the questions before or during the interview. The interview will range from 60 minutes to 120 minutes. However, due to the type of questions and the individuality of the participants, the researcher cannot guarantee exactly the amount of time the interview will last. You will be encouraged to ask questions concerning the study before and during the interview.

It is hoped that the research will serve as the basis for further study regarding homosexual-sensitive retirement housing facilities. However, the researcher does not promise this. There are no guaranteed benefits to the individual participants of this study and no foreseeable risks, stress, or harm. Any information that is obtained in connection with this study that can be identified specifically with you will remain confidential. It will be disclosed only with your permission. I plan to share it with my thesis advisors who are on the faculty of the Department of Nursing at San Jose State University.

Your decision whether or not to participate will not prejudice any future relations with San Jose State University. As stated earlier, if you decide to participate, you are free to withdraw at any time without prejudice.

Your participation is voluntary. Again, you may withdraw at any time without prejudice. I may be reached at (707) 554-2515. My address is as follows: 1529 Marin Street, Vallejo, CA 94590. If you have any complaints regarding participation in my study, you may contact Dr. Virgil Parsons, Chair of the Department of Nursing, San Jose State University. If you have

any questions or complaints regarding subject rights or injury, you may contact Serena Stanford, Associate Academic Vice President for Graduate Studies in Research at San Jose State University.

Your signature indicates that you have decided to participate and that you have read the information provided above. You will be given a copy of this form for your files.

Signature

Date

Signature of Investigator