

**Draft - Online Survey Topics, for Public Comment**  
**Send comments to Tom.Nolan@sfgov.org 415-355-3517 by close of business 1/11/2013**

Survey Priority Areas	Specific issues within these areas	Examples of possible questions/question components	Other Notes
<b>Identification of social/health service gaps and needs:</b> What kinds of services do people use or not use? If they don't use those services, why not?	1 What do LGBT older adults consider to be their most important social service and health service needs?	For this and subsequent questions, consider asking about needs of respondent and their partner, if they have one, and be sure to include caregiver-related topics wherever appropriate. Be sure to include need for legal assistance (advance directives, estate planning), long term care	Consider revising the CAP list a little (include generic home care, affordable housing, accessible housing, cull other surveys for lists of services), help with hoarding & cluttering. Ask about now and over the next X number of years?
	2 How do LGBT older adults get their needs met? For those who do not access services, are they getting their needs met in other ways?		For example, do people have families or choice that they can rely on? what kinds of things do they rely on this group to do? What things can they NOT rely on this group for and does this group really meet their needs the same way a legal spouse/biological children can? Do they have someone they know that they feel 100% comfortable assigning as executor or holder of the power of attorney - or in other words, someone they trust implicitly to make decisions for them when they are too ill or after they have died? Include formal vs. informal sources of support.
	3 What kinds of services (aging, social, & health services) are LGBT older adults actually using?	Which of the following services have you (or your partner?) utilized in the last 12 months (2 years?)? (Check all that apply from a big long list). Consider including key health screenings to this (e.g., prostate, HIV, other)	We need to be clever about how to get this information in a fairly small number of questions. This is just one idea. Be sure to include mental health, substance abuse, HIV/AIDS, legal services, etc. Timeframe of use (12 months, 24 months) should be short enough that it is reasonable to think that the person will remember.
	4 Are the services that people are using LGBT-focused services or mainstream senior services?		Given that the number of LGBT-focused senior service organizations is fairly small compared to the population, does this matter? Isn't it more important that folks are getting culturally relevant services wherever they get them? Maybe try to get at people's comfort level - is there some reason they feel safer (perhaps fold this into the question about why people didn't access services)?
	5 For people who are accessing services, do they feel that those services were competent with respect to LGBT-specific issues? (Staff is knowledgeable about unique issues, recognizes and supports chosen families, etc.)		For which of the services you used in the last 12 months would you rate the provider as competent...

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<b>Identification of social/health service gaps and needs:</b> What kinds of services do people use or not use? If they don't use those services, why not?	6 Do you feel you have a plan in place for long term care (and other) needs?		Include questions about caregiving (e.g., who do you expect will be a caregiver for you, who do you expect to provide care for? Have you spoken to those people about those plans? Other long term care planning - how concrete are the plans?
	7 What kinds services (social services & health services) do LGBT older adults feel they need, but are unable to access?	Which of the following services do you feel you (or your partner?) needed (or needed more of?), but did not receive in the last 12 months? (be sure to include legal assistance, benefits counseling, caregiver support, etc.)	Health care access - to what degree is affordability as issue?
	8 For those who report unmet needs, why didn't they access those services?	For each service - Don't know how or where to get the service/need help navigating the system, concerned about eligibility/cost, don't feel welcome as an LGBT person, don't feel that the services are "for them," etc. Have to choose between various services due to cost (e.g., paying rent, services, food, meds, etc.)	It would be really helpful to know specifically which services people perceive to be unwelcoming (rather than just asking folks to check off a variety of reasons that might apply to a variety of unmet need services). Not sure how to do that in a small number of questions.

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<b>Housing:</b> Where do LGBT seniors live? Is that housing appropriate, stable, and accepting?	9 In what type of housing do respondents live?	E.g., Rental - apartment (subsidized vs. not?), Rental - SRO, Shelter, Owned - condo, Owned - house, Homeless, section 8, public housing, rent controlled, SRO, shelter, no housing at this moment, etc.	Consider whether to ask about what kind of housing they prefer? Include whether the mortgage is paid off so we can use it to do calculate the elder economic security index.
	10 Do LGBT older adults feel safe being out of the closet in their housing setting? If not, why not?		We need to be focused on LGBT housing issues in this section, or else we might just end up with the usual mantra - SF needs more affordable, accessible housing.
	11 Is the respondent's current housing situation stable, or is it likely to transition soon?		Perhaps this topic includes homelessness and/or risk of homelessness? Evictions/threat of eviction, especially for rent controlled apartments? Waitlists? Predictors of homelessness? Foreclosure? At risk of moving out the of the city?
	12 What is the LGBT experience with homelessness/risk for homelessness?	Experience on the streets? Experience in the shelters? What are the key question to address here? Housing according to gender identity?	that would only apply to those who have experienced homelessness or that risk? Maybe this could be covered with a combination of the housing setting question and the safety being out question?
	13 Does respondents' housing have services on-site? If so, is it welcoming to LGBT older adults and/or targeted to them?		(Move this question under the needs/services section?)
	14 Is the housing where respondents live appropriate to their needs as they age in the coming years?	E.g. stairs/mobility issues, SRO issues	Note that housing appropriateness is probably really more related to health and disability, not age, so we may want to consider the best ways to word this. Access to home modification services, need for those services.
	15 What remedies might be plausible for housing-related issues?		Not sure if this makes sense to be addressed in the survey, but worth considering.

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<b>Discrimination:</b> What is the nature of the discrimination that LGBT seniors have experienced in services and elsewhere, and how might it be remedied?	16 For people who are accessing services, do they feel accepted/welcome vs. isolated/discriminated against as an LGBT senior?		Perhaps there's a way to get at whether the discrimination seemed hostile/overt vs. softer bias? For this an subsequent questions, consider structure: "Have you—or do you know someone personally—who has had this experience?"
	17 For those who found services to be unwelcoming (or worse) to LGBT seniors, either because they used them and had that experience or because they didn't due to fear of that experience, what would make the services more welcoming?	e.g., specific things that people look for at mainstream providers that might indicate a welcoming environment (Recognition/support of families of choice? Respect of life-planning documents? Legal discrimination/unequal rights? Lack of respect for things like HIPAA confidentiality requirements (especially for HIV+ or transgender elders)? housing according to gender identity? respect of names/gender expression/pronouns) vs. services targeted specifically to LGBT older adults	Need to be careful that we don't end up with something that suggests that we need a separate, parallel system of services for LGBT older adults?
	18 In what kinds of settings have LGBT seniors experienced discrimination within the last year (or some other relevant timeframe)?	e.g., social services, health services, religious institutions, on the street, interactions with law enforcement, employment, long term care setting, housing etc.	Consider whether this should be specific experiences or if it should also include fear of discrimination (e.g., with law enforcement)? Consider also institutional discrimination of housing for families?
	19 What are the details of the discrimination that people have experienced?	Maybe there's an opportunity to collect some stories here in an open-ended question? Could be helpful for the task force to have some human stories.	
	20 What kinds of discrimination have people experienced from their ethnic/cultural community with respect to being LGBT?		
	21 What kinds of age discrimination have people experienced within the LGBT community?		Or in employment?
	22 Has the experience with discrimination changed in the last five years (better, worse)?		Lifetime experiences vs. current?
	23 Steps that people have taken to combat institutional discrimination (having wishes documented, legal protections).		Consider where this belongs - needs/gaps, or discrimination.
	24 What approaches might help remedy the age or ethnic/cultural discrimination issues?	e.g., intergenerational/mentorship programs, etc.	E.g., if we make a special lgbt estate planning kit available to lgbt seniors, would they use it (will, advanced healthcare directive, simple revocable trust). If we make the resources available online, would lgbt seniors be able to access it and would they actually use it?

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<b>Elder Abuse/Adult Protective Services:</b> What kinds of experiences have LGBT older adults had with abuse, and what resources do they feel they have to address it?	25 What are LGBT older adults' experiences with abuse by others?	Have you - or do you know someone personally - who...; have you ever experienced abuse that you think was related to your LGBT status? Specific issues related to caregivers and not being out to them? More at risk due to isolation from family? Do you feel safe in your neighborhood (day vs. night)? What was done to stop abuse, if anything?	Questions will probably need to focus on abuse by others, as it may be difficult to get people to identify their own self-neglect. Types of abuse by others according to APS: physical, financial, sexual, neglect, abandonment, isolation, abduction, psychological/mental. Include assault, domestic violence, identity of perpetrator.
	26 Would you feel safe reporting abuse? What would make you feel safe to do so?	e.g., do they trust the SFPD and DA enough to report abuse? Do they trust the LTC ombudsman system?	
	27 Do LGBT older adults know how to report abuse?	both in residential care and community settings	
	28 Have respondents ever been isolated to the degree that they were unable to adequately care for themselves (self-neglect)? Do they worry about becoming so in the near future?	cognitive impairment - actual, fears	

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Demographics: Possible topics	29 Age		
	30 Gender		
	31 Transgender		
	32 Orientation		
	33 Race/Ethnicity		
	34 Identity management - out vs. not		
	35 Employment	working/looking for work, etc.	
	36 Income		
	37 Number in household/living alone	other	
	38 Isolation indicators	Can you list someone who: you could comfortably list as an emergency contact person; you regularly see for social support; etc.	Include question about how far away these people are?
	39 Education		
	40 Living Arrangements		
	41 Children		
	42 Partnership Status	include marriage, domestic partnership, etc.	
	43 Physical health		
	44 Mental health	include suicidal thoughts?	
	45 Disability		
46 Health care coverage	Private Coverage, Non Managed Care (60-64 yrs of age), Private Coverage, Managed Care (60-65 yrs of age), Medicaid Coverage (60-64), Medicare with Supplemental Coverage, Medicare w/o Supplemental Coverage, Dually Eligible Beneficiaries (Medicare & Medicaid enrolled), Long Term Care Insurance (can check this in addition to others above		
47 Chronic health conditions			

Other issues to consider

Need to make sure that they unique concerns of PLWHA are incorporated, where relevant.