



Face-to-Face awareness actions

Deliverable 2.5

FACE-TO-FACE AWARENESS ACTIONS:

GENERAL PUBLIC

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The Project

The <u>"Best4OlderLGBTI – Best Interest for the Older LGBTI"</u> project intends to fight against discrimination based on age, sexual orientation, gender identity, gender expression and sex characteristics of older people, and to promote the rights of older LGBTI people, through raising awareness of different target groups contributing for a more equal and inclusive society.

The aim of the project is to contribute to the decrease of inequalities and discrimination faced by older LGBTI people when attending public services, as well as health and social care, and to encourage the reporting of cases of discrimination. Furthermore the project aims to create a network of professionals.

Main Activities:

- Development of an awareness-raising campaign in 6 EU Member States (Italy, Greece, Ireland, Portugal, Netherlands, Romania) that will include both online and face-to-face actions. The actions will target different groups in society, namely: Health and social professionals; Professionals of public services; Teachers; Employers; General Public; University students.
- Adaptation and development of an innovative face-to-face intervention programme targeting health and social professionals with the aim of mitigating stereotypes and negative attitudes regarding sexuality and gender in old age, including LGBTI.

Expected Results:

- Changes in attitudes and behaviours of professionals and the general public towards older LGBTI people.
- Raise awareness about age discrimination and sexuality of older people, including LGBTI.
- Encouragement of political and social discussion.

- Encouragement of reporting of cases of discrimination.
- Reduced inequalities and discrimination in attendance of public services and health and social care for older LGBTI people.

Partners:

- Anziani e Non Solo (Italy)
- KMOP Social Action and Innovation Center (Greece)
- Age Action Ireland Ltd (Ireland)
- Stichting Roze 50+ (Netherlands)
- CASO50+ Centro de Atendimento e Serviços 050+, Associação (Portugal)
- Fluxphera (Portugal)
- European Association for Social Innovation (Romania)

Associate Partners

- ILGA Europe
- European Network of Social Authorities
- AGE Platform Europe
- IAM Intersectionalities and more

The Best4OlderLGBTI project is implemented with the financial support of the European Union by the Rights, Equality and Citizenship (REC) Programme.

Target group

Shifting society's attitudes towards older LGBTI people can be achieved by raising awareness and challenging existing (negative) stereotypes both in key target groups (such as professionals that work directly with older and/or LGBTI people) and in the general public. Debunking myths and misconceptions and providing accurate information on age, sexuality and gender on all levels of society can help create a more open, accepting and supportive environment for older LGBTI people.

These actions will target people of different ages, educational and professional backgrounds that are not included in other target groups. Each action will target 6-8 participants with the above characteristics.

Learning Outcomes

The face-to-face awareness actions aim to transfer to participants some key-messages related to sexuality and gender in older age. The main goals of the face-to-face awareness actions are to familiarise participants with the main myths and stereotypes against older LGBTI people, the discrimination they face on different contexts, as well as to aid participants in identifying and responding to them in their living and working contexts.

Through the face-to-face awareness actions participants will be able to:

- Understand key LGBTI concepts and issues
- Understand gender identities, sexual orientations and sex characteristics, and make clear distinctions between them
- Identify and avoid stereotypes based on age
- Identify and avoid stereotypes based on Sexual Orientation, Gender Identity and Sex Characteristics (SOGI)
- Understand the ways in which ageism and anti-LGBTI stereotypes create unique challenges for older LGBTI people
- Respond to such stereotypes and prejudices with true facts

Module

Activity	Estimated Time
Introductions & Presentation of the project	15 minutes
Basic LGBTI terminology	20 minutes
Common myths and stereotypes towards older LGBTI people	40 minutes
Combating stereotypes & Supporting older LGBTI people	35 minutes
Closing & Feedback	10 minutes

Activities

Activity 1: Introductions & Presentation of the project

Estimated time: 15 minutes

Part 1: Introductions (10 minutes)

Welcome participants and introduce yourself (your name, studies, position in the organisation, role on the event, etc.) You can also provide more information about yourself to break the ice and encourage participants to talk about themselves.

Ask participants to briefly (1 minute) introduce themselves (name, studies, profession) and share their expectations from the Face-to-face awareness action.

Part 2: Project Presentation (5 minutes)

After all participants have introduced themselves, briefly present some basic information about the project's key objectives and activities, and your organisation.

You can prepare a presentation with basic information to use if you find it helpful, but make sure to keep it short and stay on time.

Activity 2: Basic LGBTQI terminology

Estimated time: 20 minutes

Learning Objectives

The aim of this activity is to make participants familiar with the key concepts and basic LGBTI terminology.

After the end of the activity participants will be able to:

- Describe and understand what sexual orientation, gender identity, gender expression and sex characteristics are, as well as the main LGBTI identities and terms.
- Use appropriate, non-discriminatory terminology when referring to or communicating with LGBTI people.

Prepare a presentation with the following definitions of key concepts, LGBTI identities and other terms related to LGBTI issues. Make sure participants understand the different terms and provide clarifications when needed.

Key concepts	
Gender Identity	It refers to a person's inner sense of their gender. It
	may or may not match with the gender the person
	was assigned at birth and/or their gender expression
	(Theofilopoulos & Paganis, 2019).
Gender Expression	It is the external manifestations of gender, expressed
	through a person's name, pronouns, clothing,
	haircut, behaviour, voice or body characteristics. It

	may "match" with the gender identity of the same
	person (eg. A man having a masculine gender
	expression), but this is not always the case
	(Theofilopoulos & Paganis, 2019).
	Sex characteristics include the primary (such as internal
	and external reproductive organs, chromosomes and
Sex characteristics	hormones), as well as the secondary (such as muscle
	mass, body hair, breast development and other)
	characteristics of sex. (PARADISO, 2019)
	Refers to each person's capacity for profound
	affection, emotional and sexual attraction to, and
Sexual Orientation	intimate and sexual relations with, individuals of a
	different gender or the same gender or more than one
	gender (Theofilopoulos & Paganis, 2019).

LGBTI identities	
Gay	A person that identifies as a man and experiences emotional, romantic and/or sexual attraction to people
ou,	of the same gender (PARADISO, 2019)
	A person that identifies as a woman and experiences
Lesbian	emotional, romantic and/or sexual attraction to people
	of the same gender (PARADISO, 2019)
Bisexual	A person that experiences romantic and/or sexual
	attraction to people of two or more genders. It is often

	used as an umbrella term to describe various forms of
	polysexuality ¹ . (PARADISO, 2019)
Transgender / Trans	It is an umbrella term, which includes those people who have a gender identity, which is different to the gender assigned at birth. It includes multiple gender identities, such as trans man, trans woman, non-binary, agender, genderqueer, gender fluid, etc (Theofilopoulos & Paganis, 2019).
Queer	Queer is a complex term with multiple interpretations. In the past, it was used as derogatory term for gay people, but in the 80's it was reclaimed from activists and academics as a positive and confrontational self-description to challenge social norms around sexuality, sexual orientation, gender identity and/or other forms of normativity. It is often used by people that do not accept the traditional concepts of gender and sexuality and do not identify with any of the terms of the LGBTI+ acronym, but also as an umbrella term for all LGBTI+ people. As a term, it also identifies with certain parts of the Queer Theory. (PARADISO, 2019).
Intersex	Persons who identify with this term are born with sex characteristics that do not belong strictly to male or female categories, or that belong to both at the same time. This term stands for the spectrum of variations of sex characteristics that naturally occur within the human species. It also stands for the acceptance of the physical fact that sex is a spectrum and that people

¹ Polysexuality is defined as the attraction towards more than one gender. It can include identities such as bisexual, pansexual and others, whereas monosexuality refers to attraction towards one gender (i.e. heterosexual, gay/lesbian).

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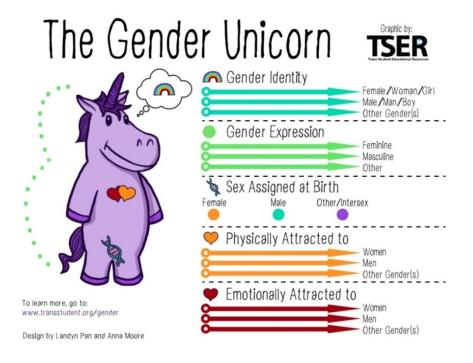
	with variations of sex characteristics other than male or
	female do exist (Theofilopoulos & Paganis, 2019).
	People who experience romantic, sexual or affectional
Pansexual	desire for people of all genders (Theofilopoulos &
	Paganis, 2019).
	A person who defines themselves using this term is
	someone who experiences no or very little sexual
	attraction. Each such person experiences things like
Asexual	relationships, attraction, and arousal somewhat
	differently. This term also refers to a spectrum of
	identities of people who experience little or no sexual
	attraction (Theofilopoulos & Paganis, 2019).
	People who do not identify their gender within the
	male/female binary but somewhere outside or
Non-binary	between. Some of them use gender neutral pronouns
	such as they/them (Theofilopoulos & Paganis, 2019). It is
	often used as an umbrella term, in which terms such as
	genderfluid, agender and others are included.

Other terms	
	The fear, unreasonable anger, intolerance or/and
Biphobia	hatred toward bisexuality and bisexual people
	(Theofilopoulos & Paganis, 2019).
	People whose gender identity is the same as the
Cisgender / Cis	gender they were assigned at birth. It is used as the
	opposite of transgender/trans.

Heteronormativity	Refers to cultural and social practices where men and women are led to believe that heterosexuality is the only conceivable sexuality. It implies that heterosexuality is the only way of being "normal" (Theofilopoulos & Paganis, 2019).
Heterosexual	A person who is attracted to people of a different gender. Often, heterosexuality is described as attraction towards the "opposite" gender, however this approach is based on the view of gender as a binary, erasing the existence of non-binary and intersex people.
Homophobia	The fear, unreasonable anger, intolerance or/and hatred directed towards homosexuality (Theofilopoulos & Paganis, 2019).
Legal Gender Recognition	It is the official procedure to change a transgender person's name and gender identifier in official registries and documents such as their birth certificate, ID card, passport or driving license. In some countries, it's impossible to have your gender recognized by law (Theofilopoulos & Paganis, 2019).
Transition	It includes some or all of the following personal, medical, and legal steps: telling one's family, friends, and co-workers; using a different name and new pronouns; dressing differently; changing one's name and/or sex on legal documents; hormone therapy; and possibly (though not always) one or more types of surgery (referred to as gender reassignment or gender confirmation surgery). The exact steps involved in transition vary from person to person (Theofilopoulos &

	Paganis, 2019).
	A matrix of cultural and personal beliefs, opinions,
	attitudes and aggressive behaviours based on
	prejudice, disgust, fear and/or hatred directed
	against individuals or groups who do not conform
Transphobia	to, or who transgress societal gender expectations
	and norms. It particularly affects individuals whose
	lived gender identity or gender expression differs
	from the gender role assigned to them at birth
	(Theofilopoulos & Paganis, 2019).

You could also use The Gender Unicorn graph, by the Trans Student Education Network, which is a very useful tool to familiarise people with different LGBTQI identities and explore the concepts of sexual orientation, gender identity, sex assigned at birth and gender expression.



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The graph is available online on TSER's website² in multiple languages. There is also an interactive version that you can use to showcase the way different identities can coexist and/or interact with each other. This visualization can aid participants in understanding new terms and concepts.

Activity 3: Common myths and stereotypes towards older LGBTI people

Estimated time: 40 minutes

Learning Outcomes:

Through this activity participants will be able to:

- Identify and avoid myths and stereotypes against older LGBTI people.
- Respond to such myths and stereotypes with true facts.

Part 1: Brainstorming (10 min)

Facilitators will encourage participants to think of common ideas and images of older people, regarding sexuality and gender and share them with the rest of the group. The facilitator will write down on a flipchart all the ideas expressed. Encourage all participants to take part in this exercise.

Part 2: Presentation and discussion (30 min)

Prepare a presentation with the main myths and stereotypes against LGBTI older people along with facts and evidence to debunk them, once the group has come up with a good number of myths and stereotypes. Evidence may include statistics from surveys on

²http://www.transstudent.org/gender/

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LGBTI issues and older age, scientific facts, as well as stories and testimonies from older people who identify as LGBTI (e.g. through videos) or from your own experience working with older LGBTI people.

Some examples of common myths that you can include in your presentation are the following:

Myth	Facts
	This is a very common misconception towards older
	people (not only those who are LGBTI). Existing
	evidence however shows that sexual relationships
	are a need present throughout the lifespan of
	people. Changes associated with ageing, health
"Older people are not interested	issues and the use of medication may impact the
in forming romantic and/or	sexual life of older people (Kazer, 2013), but this is
sexual relationships" / "Older	not the same as lack of sexual desire. Medication
people are not sexually active"	aimed to treat sexual dysfunction can help people
	of all genders to remain sexually active later in life.
	As mentioned by the LTCOmbudsman (2015) "one
	study revealed 61% of people over 60 said their sex
	life today was the same or better than in their 40s,
	and 26% of those over 75 remain sexually active".
	LGBTI identities are not at all new. The fact that
	LGBTI issues have gained more visibility in the last
"Being LGBTI is a new trend. Only	decades does not mean that LGBTI people have
younger people identify as	suddenly started to exist; LGBTI people have always
LGBTI"	existed, but homophobic and transphobic societal
	attitudes, violence and discrimination,
	stigmatization, pathologisation and criminalization

of non cis and/or heterosexual people, as well as the lack of legal protections have kept them invisible. According to a survey mentioned by SAGE (2013) in 2010 approximately 1.6 million LGB older adults lived in the United States. For many people being LGBTI (and especially older) is synonymous of living alone, but this is far from the truth. LGBTI people can form satisfying, long-lasting, loving relationship, though the lack of legal protection for same-sex relationships in many countries may mean that these relationships are not officially recognized by the state. Many LGBTI people also have biological or adopted children: bisexual people may be in different-sex relationships and many lesbian or gay people may have come "Older LGBTI people don't have out later in life, after they have been in different-sex families/partners/children" relationships and/or marriages. (APA, 2012). Also a lot of LGBTI older adults have created "families of choice": social networks consisting of close friends that offer them a sense of belonging, resilience, and support (APA, n.d). However LGBTI people are, according to SAGE (2018), twice as likely to live alone and four times less likely to have children than their cisheterosexual peers, thus increasing the risk of social isolation. This common stereotype may not apply only to

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older LGBTI people, but it is a widespread

misconception about LGBTI people. LGBTI people

is LGBTI"

"You can always tell if someone

	can express themselves (and their identities), in many different ways, the same way cis-heterosexual people do. A person's gender expression (appearance, clothing or mannerisms, etc) is not necessarily an indicator of their identities.
"Older people are not affected by STIs"	This stereotype is based on the preconception that older people do not engage in sexual activity or that if they do it is always within a long-term monogamous relationship. Furthermore, the progress that has been made on the treatment of HIV has resulted in more people reaching into their older years (SAGE, 2018)
"All people (know they) are LGBTI from a very young age"	There is no specific point in life when people realise they are LGBTI. Some may know their sexual orientation and/or gender identity from a very young age (as children, teenagers or young adults), while others may come out in their 30s, 40s, 50s or even later in life. Intersex people (especially those who have been subjected to sex "normalising" surgeries) may find out later in life or not be aware that they were born with an intersex variation. Some people may have known that they are LGBTI but stayed in the closet for many years, for fear of experiencing stigmatisation, violence and discrimination, and losing their social support. This is especially true for older adults who lived a big part of their lives when being LGBTI was considered a mental disorder or criminalised.

LGBTI identities are no longer classified as mental health disorders. Homosexuality was first depathologised in 1973 when the American Psychiatric Association removed it from its Diagnostic and Statistical Manual (DSM). On the 17th of May 1990, the General Assembly of the World Health Organization (WHO) decided to remove homosexuality from the International Classification of Diseases (ICD).

"LGBTI people are mentally ill"

Trans identities are also depathologised. In 2018, the World Health Organization (WHO) released the new version of ICD (ICD 11) which removed trans identities from the mental health disorders chapter. All trans-related diagnoses have been removed from the chapter Mental health disorders. A new chapter, named "Conditions related to sexual health", has been added to ICD and it includes a new diagnosis of "Gender incongruence" that replaced the previous "Gender Identity Disorder" diagnosis (Theofilopoulos & Paganis, 2019). The new version of ICD was officially adopted by the General assembly of the WHO in May 2019.

"Older LGBTI people have the same needs and problems that older cis-heterosexual people"

While there are of course issues related to ageing that are common both for LGBTI and cisheterosexual people, there are also significant differences in the way people with an LGBTI identity experience ageing. Anti-LGBT societal attitudes can impose additional barriers for older LGBTI people on issues such as accessing health care services, social

support, retirement and finances (APA, 2012). For example LGBTI people may become estranged from their families of origin or their (biological) children, thus limiting their social support. Also women in same-sex relationships may have a smaller joined income compared to women in different-sex relationships (because of pay gaps between men and women), and experience bigger financial problems, due to the accumulate loss of income (APA, 2012). According to the American Psychological Association (2012) "lack of legal protections may raise problems in medical and financial decision making, couple autonomy in health and end-of-life decisions, access to appropriate health care, parenting rights, health care and retirement benefits, inheritances, living arrangements, and property rights."

Apart from the discrimination they may face on the basis of their sexual orientation, gender identity and/or sex characteristics, older LGBTI people may also face discrimination based on their age, within the LGBTI community (APA, 2012). Having limited access to community support and events, together with the gradual shrinkage of peer social support networks (due to health reasons or death) can leave older LGBTI people with very few or no people to turn to.

These are some of the most common myths regarding sexuality and gender in older age. Partners can include other stereotypes that are relevant to the partners' country

context.

Activity 4: Combating stereotypes towards older LGBTI people

Estimated time: 35 minutes

Learning Outcomes:

Through this activity participants will explore ways in which they can actively support

older LGBTI people and raise awareness on sexuality, gender and age.

Part 1: Work in groups (15 min)

Divide participants into 2 groups. Give groups 5 minutes to discuss ways in which they

can combat stereotypes and support older LGBTI people in their everyday lives. Next,

give each group 5 minutes to present their ideas.

Part 2: Presentation (20 min)

After both groups have presented their ideas, make a presentation covering good

practices for allyship. Include guidelines participants can apply in their everyday

lives to combat stereotypes on the basis of age and sexuality and/or gender, and

to actively support older LGBTI people.

Some examples of guidelines to include in your presentation are the following:

Avoid making assumptions. Someone's gender identity, sexual orientation and/or

sex characteristics is not something you can guess by their appearance.

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therein.

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- If you know an older person is LGBTI do not share this information with others without the person's consent. Some LGBTI people (especially older) are not out to their friends, family or workplace.
- Always use the name and the pronouns they introduce themselves with or ask
 you to use. This applies also when you are referring to the period before they
 came out. If you're not sure what pronouns you should use, just ask.
- Don't ask trans people about their previous or "true" name. It is a rude and
 invalidating question; the name they use currently is their true name.
- Always use the language the person uses in order to describe themselves. Some LGBTI people may (rarely) refer to themselves with terms that are considered offensive by the majority of the community (e.g a transgender person may identify themselves as a "cross-dresser" or "transsexual", and a gay man may use terms such "faggot" to refer to himself). Use these terms only if the person you talk with identifies this way.
- Try to raise awareness among friends and family, in your workplace, as well as in public (e.g. through social media) about the stereotypes and prejudices based on age, sexual orientation, gender identity and sex characteristics, and the problems older LGBT people face.
- Try to expand your knowledge on LGBTI issues, and on issues regarding older age. You can do this by searching for relevant educational material and information online, and getting in touch with LGBTI and/or human rights civil society organisations that work on these issues.

The above list of guidelines is not exhaustive. Feel free to add guidelines that are relevant to your country's context.

Activity 5: Closing & Feedback

Estimated time: 10 minutes

After closing the discussion thank again all participants for their presence and

involvement and ask them for their general impression and feedback.

This could be done either as a short informal discussion or you could provide

participants with post-it notes to write down their feedback. Leading a discussion is

preferable, especially when the number of participants is small, since it gives

participants the chance to exchange opinions as well, but written feedback can be

used when there is not enough time for discussion.

Some questions you could ask participants are the following:

What did they learn?

Did they get answers for the questions they had on older LGBTI people?

Was there anything that surprised them?

What will they keep from the day?

After participants have shared their thoughts on the activities and the content of the

Face-to-Face actions, ask them to fill-in the evaluation questionnaire (see Annex).

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Annex

Evaluation Questionnaire

	Totally disagree	Disagree	Neither agree nor disagree	Agree	Totally Agree
The objectives of the action were met.	1	2	3	4	5
The structure and content was easy to follow.	1	2	3	4	5
The action promoted and facilitated interaction and participation.	1	2	3	4	5
The content covered will be useful for my work/personal life.	1	2	3	4	5
The facilitator had sufficient knowledge on the topic.	1	2	3	4	5
The facilitator had sufficient facilitation skills.	1	2	3	4	5
The time allotted was sufficient.	1	2	3	4	5
The place where the action took place was suitable.	1	2	3	4	5
The place where the action took place was easily accessible.	1	2	3	4	5
Practical issues (equipment, stationery, etc) were sufficiently covered.	1	2	3	4	5
I would suggest to other people to take part in this action.	1	2	3	4	5



www.best4older-lgbti.org

PROJECT PARTNERS:



















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FACE-TO-FACE AWARENESS ACTIONS:

EMPLOYERS

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Athens, 2019

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Dublin, 2020

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The Project

The <u>"Best4OlderLGBTI – Best Interest for the Older LGBTI"</u> project was set up to fight against discrimination based on age, sexual orientation, gender identity, gender expression and sexual identity of older people, and to promote the rights of older LGBTI people, through raising awareness of different target groups contributing for a more equal and inclusive society.

The aim of the project is to contribute to a decrease in any inequalities and discrimination faced by older LGBTI people when availing of public services, as well as health and social care, and to encourage the reporting of cases of discrimination. Furthermore, the project aims to create a network of professionals

Main Activities:

- Development of an awareness-raising campaign in 6 EU Member States (Italy, Greece, Ireland, Portugal, Netherlands, Romania) that will include both online and face-to-face actions. The actions will target different groups in society, namely: Health and social care professionals; Public service employees;
 Teachers; Employers; General Public; University students.
- Adaptation and development of an innovative face-to-face intervention
 programme targeting the above groups with the aim of mitigating stereotypes
 and negative attitudes regarding sexuality and gender in old age, with a focus
 on those identifying as LGBTI

Expected Results:

- A positive change in attitudes and behaviours towards older LGBTI people.
- Raised awareness about age discrimination and sexuality of older people, including LGBTI.
- Encourage political and social discussion.
- Encourage reporting of cases of discrimination.

 Reduced inequalities and discrimination among those utilising public services and health and social care for older LGBTI people.

Partners:

- Anziani e Non Solo (Italy)
- KMOP Social Action and Innovation Centre (Greece)
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- StichtingRoze 50+ (Netherlands)
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- Fluxphera (Portugal)
- European Association for Social Innovation (Romania)

Associate Partners

- ILGA Europe
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Target group

Each of us is continually learning new ways to live, work and play. Adapting to new concepts, new technologies and being mindful that we are all different is part of life today.

Raising awareness and challenging negative stereotypes helps shift society's attitudes towards older LGBTI people. Debunking myths and misconceptions and providing accurate information on age, sexuality and gender helps create a more open, accepting and supportive environment for older LGBTI people.

These actions will target people of different ages, educational and professional backgrounds that are not included in other target groups. Each action will target 6-8 participants with the above characteristics.

Through advances in health care, and other factors, people are living longer, healthier, more active lives that at any time in the past. You may not work directly with older people, but they are growing in number and constitute a very important target group. It's important to remember that we are all ageing.

By giving people the tools and information they need to understand the realities of older LGBTI people and the challenges they face, we can be better equipped to transfer this knowledge to our colleagues, families, etc. and cultivate acceptance, support and openness. Each action will target 6-8 people.

Learning Outcomes

The face-to-face awareness actions aim to transfer to participants some key-messages related to sexuality and gender among older people. The main goals of these face-to-face awareness actions are to:

 Become familiar with the myths and stereotypes around older LGBTI people, and the discrimination they can face in different contexts

- Support those working to identify and respond to myths, stereotypes and discrimination in their living and working environment
- Provide specific guidelines on how to bring this knowledge to a wider audience

Through the face-to-face awareness actions participants will be able to:

- Understand key LGBTI concepts and issues
- Understand gender identities, sexual orientation and characteristics, and make clear distinctions between them
- Identify and avoid stereotypes based on age
- Identify and avoid stereotypes based on Sexual Orientation, Gender Identity and Sex Characteristics (SOGISC)
- Understand the ways in which ageism and anti-LGBTI stereotypes create unique challenges for older LGBTI people
- Respond to such stereotypes and prejudices with facts
- Inform and discuss issues of age and gender and sexuality with colleagues

Module

Activity	Estimated Time
Introduction & Presentation of the project	15 minutes
Basic LGBTI terminology	20 minutes
Common myths and stereotypes towards older LGBTI people	40 minutes
Combating stereotypes & supporting older LGBTI people	35 minutes
Closing & Feedback	10 minutes

Activities

Activity 1: Introduction & Presentation of the project

Estimated time: 15 minutes

Part 1: Introduction (10 minutes)

Welcome the participants and introduce yourself (your name, studies, position in the organisation, role on the event, etc.) You can, of course, provide more information about yourself to break the ice and encourage participants to talk about themselves.

Ask participants to briefly (1 minute) introduce themselves (name, studies, profession) and share what they are expecting from the session.

Part 2: Project Presentation (5 minutes)

After all participants have introduced themselves, briefly present some basic information about the project's key objectives and activities, and your own organisations role in the project.

You can prepare a presentation with basic information to use if you find it helpful, but make sure to keep it short and stay within the allotted time.

Activity 2: Basic LGBTI terminology

Estimated time: 20 minutes

Learning Objectives

The aim of this activity is to raise awareness of some key concepts and terminology around LGBTI issues.

After the end of the activity participants will be able to:

- Describe and understand what sexual orientation, gender identity, gender expression and sex characteristics are, as well as the main LGBTI identities and terms.
- Use appropriate, non-discriminatory terminology when referring to or communicating with LGBTI people.

Prepare a presentation around the following key concepts and the terminology related to LGBTI issues. Ensure that the participants understand the different terms and provide any clarification requested.

Key concepts	
Gender Identity	Refers to a person's own sense of their gender
	identity. It may, or may not, match the gender the
	person was assigned at birth and/or their gender
	expression (Theofilopoulos & Paganis, 2019).
Gender Expression	The external manifestation of gender, expressed
	through a person's name, pronouns, clothing,
	haircut, behaviour, voice or body characteristics. It
	may "match" with the person's gender identity (e.g.
	a man having a masculine gender expression), but

	this is not always the case (Theofilopoulos & Paganis, 2019).	
Sex characteristics	Sex characteristics include the primary (such as internal and external reproductive organs, chromosomes and hormones), as well as the secondary (such as muscle	
	mass, body hair, breast development and other) characteristics. (PARADISO, 2019)	
Sexual Orientation	Refers to a person's capacity for affection, emotional and sexual attraction to, intimacy and sexual relations with, individuals of a different gender or the same	
	gender or more than one gender (Theofilopoulos & Paganis, 2019).	

LGBTI identities		
	A person that identifies as a man and experiences	
Gay	emotional, romantic and/or sexual attraction to people	
	of the same gender (PARADISO, 2019)	
	A person that identifies as a woman and experiences	
Lesbian	emotional, romantic and/or sexual attraction to people	
	of the same gender (PARADISO, 2019)	
	A person that experiences romantic and/or sexual	
Bisexual	attraction to people of two or more genders. It is often	
Disexuui	used as an umbrella term to describe various forms of	
	polysexuality ¹ . (PARADISO, 2019)	
Transgender / Trans	This includes people who have a gender identity, which	

¹Polysexuality is defined as the attraction towards more than one gender. It can include identities such as bisexual, pansexual and others, whereas being monosexual refers to attraction towards one gender (i.e. heterosexual, gay/lesbian).

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	is different to the gender assigned at birth. It includes
	multiple gender identities, such as trans man, trans
	woman, non-binary, agender, genderqueer, gender
	fluid, etc (Theofilopoulos & Paganis, 2019).
	Queer is a complex term with multiple interpretations. It
	is used as derogatory term for gay people, but in the
	80's it was reclaimed from activists and academics as a
	positive and confrontational self-description to
	challenge social norms around sexuality, sexual
Ouear	orientation, gender identity and/or other forms of
Queer	normativity. It is often used by people that do not
	accept the traditional concepts of gender and
	sexuality and do not identify with any of the terms of
	the LGBTI+ acronym, but also as an umbrella term for all
	LGBTI+ people. As a term, it also identifies with certain
	parts of the Queer Theory. (PARADISO, 2019).
	Persons who identify with this term are born with sexual
	characteristics that do not belong strictly to male or
	female categories, or that belong to both at the same
	time. This term stands for the spectrum of variations that
Intersex	naturally occur within the human species. It also stands
	for the acceptance of the physical fact that sex is a
	spectrum and that people with variations of sexual
	characteristics other than male or female do exist
	(Theofilopoulos & Paganis, 2019).
	People who experience romantic, sexual or affectional
Pansexual	desire for people of all genders (Theofilopoulos &
	Paganis, 2019).
Asexual	A person who defines themselves using this term is

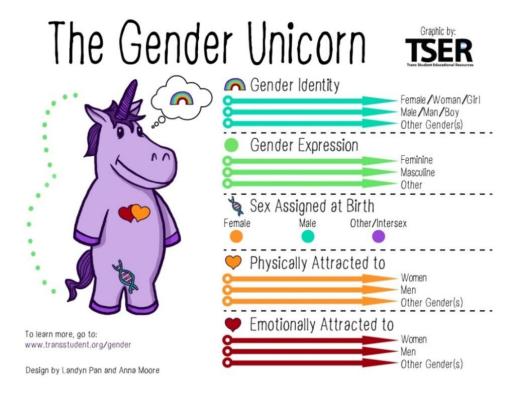
		someone who experiences either none or very little
		sexual attraction. Each person experiences things like
		relationships, attraction, and arousal somewhat
		differently. This term also refers to a spectrum of
	identities of people who experience little or no sexual	
		attraction (Theofilopoulos & Paganis, 2019).
		People who do not identify their gender within the
		male/female binary but somewhere outside or
NI.	an hinan	between. Some of them use gender neutral pronouns
IN	Non-binary	such as they/them (Theofilopoulos & Paganis, 2019). It is
		often used alongside terms such as genderfluid,
		agender, etc.

Other terms			
	The fear, unreasonable anger, intolerance or/and		
Biphobia	hatred toward bisexual people and bisexuality as a		
	concept (Theofilopoulos & Paganis, 2019).		
	People whose gender identity is the same as the		
Cisgender / Cis	gender they were assigned at birth. It is used as the		
	opposite of transgender/trans.		
	Refers to cultural, and social practices, where		
	people believe that heterosexuality is the only form		
Heteronormativity	of sexuality. It implies that heterosexuality is the only		
	way of being "normal" (Theofilopoulos & Paganis,		
	2019).		
Heterosexual	A person who is attracted to those of a different		
TICICIOSCAUGI	gender. Often, heterosexuality is described as		

attraction towards the "opposite" gender, howeve		
	this approach is based on the view of gender as	
	binary, erasing the existence of non-binary and	
	intersex people.	
	The fear, unreasonable anger, intolerance or/and	
	hatred directed towards homosexuality and those	
Homophobia	who are homosexual. (Theofilopoulos & Paganis,	
	2019).	
	The official procedure to change a transgender	
	person's name and gender identifier in official	
Long Condex Poosenition	registries and documents such as a birth certificate,	
Legal Gender Recognition	ID card, passport or driving licence. In some	
	countries, it is not possible to have your gender	
	recognized by law (Theofilopoulos & Paganis, 2019).	
	It includes some or all of the following personal,	
	medical, and legal steps: telling one's family, friends,	
	and co-workers; using a different name and new	
	pronouns; dressing differently; changing one's name	
Transition	and/or sex on legal documents; hormone therapy;	
Talismon	and possibly (though not always) one or more types of	
	surgery (referred to as gender reassignment or gender	
	confirmation surgery). The exact steps involved in	
	transition vary from person to person (Theofilopoulos &	
	Paganis, 2019).	
	A matrix of cultural and personal beliefs, opinions,	
Transphobia	attitudes and aggressive behaviours based on	
	prejudice, disgust, fear and/or hatred directed	
	against individuals or groups who do not conform	

to, or who transgress societal gender expectations and norms. It particularly affects individuals whose lived gender identity or gender expression differs from the gender role assigned to them at birth (Theofilopoulos & Paganis, 2019).

The Gender Unicorn graph, by the Trans Student Education Network, is a useful tool to familiarise people with different LGBTQI identities and explore the concepts of sexual orientation, gender identity, sex assigned at birth and gender expression.



The graph is available online on TSER's website² in multiple languages. There is also an interactive version that you can use to showcase the way different identities can

²http://www.transstudent.org/gender/

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coexist and/or interact with each other. This visualisation can assist in understanding new terms and concepts.

Activity 3: Common myths and stereotypes towards older LGBTI people

Estimated time: 40 minutes

Learning Outcomes:

Through this activity participants will be able to:

- Identify and avoid myths and stereotypes against older LGBTI people.
- Respond to such myths and stereotypes with true facts.

Part 1: Brainstorming (10 min)

Facilitators will encourage participants to think of common ideas and images of older people, regarding sexuality and gender and share them with the rest of the group. The facilitator will write down on a flipchart all the ideas expressed. Encourage all participants to take part in this exercise.

Part 2: Presentation and discussion (30 min)

Prepare a presentation with the main myths and stereotypes against LGBTI older people along with facts and evidence to debunk the monce the group has come up with a good number of myths and stereotypes. Evidence may include statistics from surveys on LGBTI issues and older age, scientific facts, as well as stories and testimonies from older people who identify as LGBTI (e.g. through videos) or from your own experience working with older LGBTI people.

Some examples of common myths that you can include in your presentation are the following:

Myth	Facts
"Older people are not interested in forming romantic and/or sexual relationships" / "Older people are not sexually active"	This is common misconception about older people; not only those who are LGBTI. Existing evidence however shows that sexual relationships are a need present throughout a person's life. Changes associated with ageing, health issues and the use of medication may impact the sexual life of older people (Kazer, 2013), but this is not the same as lack of sexual desire. Medication aimed to treat sexual dysfunction can help people of all genders to remain sexually active later in life. As mentioned by the LTC Ombudsman (2015) "one study revealed 61% of people over 60 said their sex life today was the same or better than in their 40s, and 26% of those over 75 remain sexually active".
"Being LGBTI is a new trend. Only younger people identify as LGBTI"	The fact that LGBTI issues have gained more visibility in the last decades does not mean that LGBTI people have suddenly started to exist; LGBTI people have always existed, but homophobic and transphobic attitudes, violence and discrimination, stigmatisation and criminalisation of non-cis and/or heterosexual people, as well as the lack of legal protections have kept them invisible. According to a survey mentioned by SAGE (2013) in 2010 approximately 1.6 million LGB older adults lived in

	the United States.			
	For many people being LGBTI (and especially older)			
	is synonymous of living alone, but this is far from the			
	truth. LGBTI people form satisfying, long-lasting,			
	loving relationships, though the lack of legal			
	protection for same-sex relationships in many			
	countries means that these relationships are not			
	officially recognized by the state. Many LGBTI			
	people also have biological or adopted children:			
	bisexual people may be in different-sex relationships			
"Older LGBTI people don't have	and many lesbian or gay people may have come			
families/partners/children"	out later in life, after they have been in different-sex			
rannies, parniers, crimaren	relationships and/or marriages. (APA, 2012). Also, a			
	lot of LGBTI older adults have created "families of			
	choice": social networks consisting of close friends			
	that offer them a sense of belonging, resilience, and			
	support (APA, n.d).			
	However, LGBTI people are, according to SAGE			
	(2018), twice as likely to live alone and four times			
	less likely to have children than their cis-			
	heterosexual peers, which increases the risk of social			
	isolation as they age.			
	This common stereotype may not apply only to			
	older LGBTI people, but it is a widespread			
"You can always tell if someone	misconception about LGBTI people. LGBTI people			
is LGBTI"	can express themselves (and their identities), in			
	many different ways, the same way cis-heterosexual			
	people do. A person's gender expression			
	(appearance, clothing or mannerisms, etc) is not			

	necessarily an indicator of their identities.		
"Older people are not affected by STIs"	This stereotype is based on the preconception that		
	older people do not engage in sexual activity or		
	that if they do it is always within a long-term		
	monogamous relationship. Furthermore, the		
by 3113	progress that has been made in the treatment of		
	HIV has resulted in HIV+ people living well into older		
	age (SAGE, 2018)		
	There is no specific point in life when people realise		
	they are LGBTI. Some may know their sexual		
	orientation and/or gender identity from a very		
	young age (as children, teenagers or young adults),		
	while others may come out in their 30s, 40s, 50s or		
	even later in life. Intersex people (especially those		
	who have been subjected to sex "normalising"		
"All people (know they) are LGBTI	surgeries) may find out later in life or not be aware		
from a very young age"	that they were born with an intersex variation.		
	Some people may have known that they are LGBTI		
	but stayed in the closet for many years, for fear of		
	experiencing stigmatisation, violence and		
	discrimination, and losing their social support. This is		
	especially true for older adults who lived a big part		
	of their lives when being LGBTI was considered a		
	mental disorder or criminalised.		
	LGBTI identities are no longer classified as mental		
	health disorders. In 1973 the American Psychiatric		
"LGBTI people are mentally ill"	Association removed homosexuality from its		
	Diagnostic and Statistical Manual (DSM. It wasn't		
	until 17 th of May 1990, that the General Assembly of		

the World Health Organization (WHO) removed homosexuality from the International Classification of Diseases (ICD).

In 2018, the World Health Organization (WHO) released the new version of ICD (ICD 11) which removed trans identities from the mental health disorders chapter. All trans-related diagnoses have been removed from the chapter Mental health disorders. A new chapter, named "Conditions related to sexual health", has been added to ICD and it includes a new diagnosis of "Gender incongruence" that replaced the previous "Gender Identity Disorder" diagnosis (Theofilopoulos & Paganis, 2019). The new version of ICD was officially adopted by the General Assembly of the WHO in May 2019.

"Older LGBTI people have the same needs and problems that older cis-heterosexual people"

While there are of course issues related to ageing that are common both for LGBTI and cisheterosexual people, there are also significant differences in the way people with an LGBTI identity experience ageing. Anti-LGBT societal attitudes can impose additional barriers for older LGBTI people on issues such as accessing health care services, social support, retirement and finances (APA, 2012). For example, LGBTI people may become estranged from their families of origin or their (biological) children, thus limiting their social support. Also, women in same-sex relationships may have a smaller joined income compared to women in

different-sex relationships (because of pay gaps between men and women), and experience bigger financial problems, due to the accumulated loss of income (APA, 2012). According to the American Psychological Association (2012) "lack of legal protections may raise problems in medical and financial decision making, couple autonomy in health and end-of-life decisions, access to appropriate health care, parenting rights, health care and retirement benefits, inheritances, living arrangements, and property rights." Apart from the discrimination they may face on the basis of their sexual orientation, gender identity and/or sex characteristics, older LGBTI people may also face discrimination based on their age, within the LGBTI community (APA, 2012). Having limited access to community support and events, together with the gradual shrinkage of peer social support networks (due to health reasons or death) can leave older LGBTI people with very few or no people to turn to.

These are some of the most common myths regarding sexuality and gender in older age. Partners can include other stereotypes that are relevant to the partners' country context.

Activity 4: Combating stereotypes & supporting older LGBTI people

Estimated time: 35 minutes

Learning Outcomes:

Through this activity participants will explore ways in which they can actively support older LGBTI people and raise awareness on sexuality, gender and age.

Part 1: Work in groups (15 min)

Divide participants into 2 groups. Give groups 5 minutes to discuss ways in which they can combat stereotypes and support older LGBTI people through their work. Next, give each group 5 minutes to present their ideas.

Part 2: Presentation (20 min)

After both groups have presented their ideas, make a presentation covering good practices for being an ally. Include guidelines focusing on your area of work.

Some examples of guidelines to include in your presentation are the following:

- Avoid making assumptions. Someone's gender identity, sexual orientation and/or sex characteristics is not something you can guess by their appearance.
- If you know an older person is LGBTI do not share this information with others without the person's consent. Some LGBTI people (especially older) are not out to their friends, family or workplace.
- Always use the name and the pronouns they introduce themselves with or ask
 you to use. This applies also when you are referring to the period before they
 came out. If you're not sure what pronouns you should use, just ask.

- Don't ask trans people about their previous or "true" name. It is a rude and invalidating question; the name they use currently is their true name.
- Always use the language the person uses in order to describe themselves. Some
 LGBTI people may (rarely) refer to themselves with terms that are considered
 offensive by the majority of the community (e.g. a transgender person may
 identify themselves as a "cross-dresser" or "transsexual", and a gay man may use
 terms such "faggot" to refer to himself). Use these terms only if the person you
 talk with identifies this way.
- Try to raise awareness among friends and family, as well as in public (e.g. through social media) about the stereotypes and prejudices based on age, sexual orientation, gender identity and sex characteristics, and the problems older LGBT people face.
- Include provisions for transgender employees that have not changed their legal documents, e.g allow them to register on documents visible to all employees with the name they use, have their work email and cards under the name they use, etc
- Be public about the support for LGBTI rights/human rights: mention in your website/social media that your company/office respects and includes people of all gender identities and sexual orientations.
- Try to expand your knowledge on LGBTI issues, and on issues regarding older age. You can do this by searching for relevant educational material and information online and getting in touch with LGBTI and/or human rights civil society organisations that work on these issues.
- Ensure that transgender employees have access to the restrooms of their gender and include gender-neutral restrooms (or make all restrooms gender-neutral, if creating more is not an option).
- Offer option for parental leave for employees in same-sex relationships, in accordance with national legal framework.

- Inform employees on the issues affecting older LGBTI people. Share with them
 relevant educational material and information and encourage them to
 participate in events and workshops, such as these awareness actions!
- Do not consider heterosexuality as the only model.
- Do not allow or use homophobic, bi-phobic and transphobic language in your work environment.
- Explicitly include anti-LGBT discrimination and harassment in your company's/office's anti-discrimination policies.
- Support (older) LGBTI employees, by offering psychological support services or (if this is not possible) by offering a list of services/organisations they can reach out.
- Create a safe environment where people (and their families) feel comfortable. Use gender-neutral language when referring to employees' families (e.g use "partner" instead of "wife"/"husband"), Try to organise a talk/event/training in your workplace on LGBTI issues and old age, open to all employees. Invite people from LGBTI and/or human rights civil society organisations, professionals from other fields working with older LGBTI people, as well as older people who are openly LGBTI to talk about their experiences.

The above list of guidelines is not exhaustive. Feel free to add guidelines that are relevant to your country's context.

Activity 5: Closing & Feedback

Estimated time: 10 minutes

After closing the discussion thank again all participants for their presence and involvement and ask them for their general impression and feedback.

This could be done either as a short informal discussion or you could provide participants with post-it notes to write down their feedback. Leading a discussion is preferable, especially when the number of participants is small, since it gives participants the chance to exchange opinions as well but giving written feedback can be used in case there is not enough time for discussion.

Some questions you could ask participants are the following:

- What did they learn?
- Did they get answers for the questions they had on older LGBTI people?
- Was there anything that surprised them?
- What will they keep from the day?

After participants have shared their thoughts on the activities and the content of the Face-to-Face actions, ask them to fill-in the evaluation questionnaire (see Annex).

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Annex

Evaluation Questionnaire

	Totally disagree	Disagree	Neither agree nor disagree	Agree	Totally Agree
The objectives of the action were met.	1	2	3	4	5
The structure and content was easy to follow.	1	2	3	4	5
The action promoted and facilitated interaction and participation.	1	2	3	4	5
The content covered will be useful for my work/personal life.	1	2	3	4	5
The facilitator was knowledgeable about the topic.	1	2	3	4	5
The facilitator had good facilitation skills.	1	2	3	4	5
The time allotted was sufficient.	1	2	3	4	5
The place where the action took place was suitable.	1	2	3	4	5
The place where the action took place was easily accessible.	1	2	3	4	5
Practical issues (equipment, stationery, etc) were sufficiently covered.	1	2	3	4	5
I would suggest to other people to take part in this action.	1	2	3	4	5



www.best4older-lgbti.org

PROJECT PARTNERS:



















Face-to-Face awareness actions

Deliverable 2.5

FACE-TO-FACE AWARENESS ACTIONS: HEALTH & SOCIAL PROFESSIONALS

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Athens, 2019

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The Project

The <u>"Best4OlderLGBTI – Best Interest for the Older LGBTI"</u> project intends to fight against discrimination based on age, sexual orientation, gender identity, gender expression and sex characteristics of older people, and to promote the rights of older LGBTI people, through raising awareness of different target groups contributing for a more equal and inclusive society.

The aim of the project is to contribute to the decrease of inequalities and discrimination faced by older LGBTI people when attending public services, as well as health and social care, and to encourage the reporting of cases of discrimination. Furthermore the project aims to create a network of professionals

Main Activities:

- Development of an awareness-raising campaign in 6 EU Member States (Italy, Greece, Ireland, Portugal, Netherlands, Romania) that will include both online and face-to-face actions. The actions will target different groups in society, namely: Health and social professionals; Professionals of public services; Teachers; Employers; General Public; University students.
- Adaptation and development of an innovative face-to-face intervention programme targeting health and social professionals with the aim of mitigating stereotypes and negative attitudes regarding sexuality and gender in old age, including LGBTI;

Expected Results:

- Changes in attitudes and behaviours of professionals and the general public towards older LGBTI people.
- Raise awareness about age discrimination and sexuality of older people, including LGBTI.
- Encouragement of political and social discussion.
- Encouragement of reporting of cases of discrimination.

 Reduced inequalities and discrimination in attendance of public services and health and social care for older LGBTI people.

Partners:

- Anziani e Non Solo (Italy)
- KMOP Social Action and Innovation Center (Greece)
- Age Action Ireland Ltd (Ireland)
- Stichting Roze 50+ (Netherlands)
- CASO50+ Centro de Atendimento e Serviços 050+, Associação (Portugal)
- Fluxphera (Portugal)
- European Association for Social Innovation (Romania)

Associate Partners

- ILGA Europe
- European Network of Social Authorities
- AGE Platform Europe
- IAM Intersectionalities and more

The Best4OlderLGBTI project is implemented with the financial support of the European Union by the Rights, Equality and Citizenship (REC) Programme.

Target group

Some people may be uncomfortable revealing sensitive information to health and social professionals who need it to provide certain services. Regarding sexual expression, it does not get the same levels of acceptance at all ages, so an older person may hesitate in giving some important information. In addition to having the same basic health and social needs as the general population, LGBTI people experience, for example, health disparities and barriers related to sexual orientation and/or gender identity or expression. However, many older LGBTI people avoid or delay contact health and social services because of fear of discrimination¹. Since health and social professionals often contact with older people in fragile situations it is important they recognize the challenges older LGBTI people face when attending their services, deconstructing the myths and stereotypes against older LGTBI people and contributing to a professional environment where they can feel safe and comfortable, fighting discrimination behaviours.

Learning Outcomes

The face-to-face awareness actions aim to transfer to participants some key-messages related to sexuality and gender in older age. The main goals of these face-to-face awareness actions are to:

- Familiarise health and social professionals with the main myths and stereotypes against older LGBTI people, and the discrimination they face on different contexts
- Support health and social professionals in identifying and fighting myths, stereotypes and discrimination in their working contexts
- Support health and social professionals providing an affirmative, inclusive, and respectful environment for all, with a focus on older LGBTI people
- Provide health and social professionals with specific guidelines to support their professional activity when contacting with older LGBTI people.

Through the face-to-face awareness actions participants will be able to:

¹ GLMA (2006). Guidelines for Care of Lesbian, Gay, Bisexual, and Transgender Patients. Retrieved from:

http://www.glma.org/_data/n_0001/resources/live/GLMA%20guidelines%202006%20FINAL.pdf The European Commission support for the production of this publication does not constitute an endorsement of the contents which reflect the views only of the authors, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

- Understand key LGBTI concepts and issues
- Understand gender identities sexual orientations and sex characteristics, and make clear distinctions between them
- Identify and avoid stereotypes based on age
- Identify and avoid stereotypes based on Sexual Orientation and Gender Identity and Sex Characteristics (SOGI)
- Understand the ways in which ageism and anti-LGBTI stereotypes create unique challenges for older LGBTI people
- Respond to such stereotypes and prejudices with true facts
- Have the knowledge, resources and confidence to address issues associated with older sexuality
- Exchange knowledge with their colleagues to promote inclusive professional environments

Module

Session	Estimated Time	
Introductions & Presentation of the project	15 minutes	
Basic LGBTI terminology	20 minutes	
Common myths and stereotypes towards older LGBTI people	40 minutes	
Combating stereotypes & Supporting older LGBTI people	35 minutes	
Closing & Feedback	10 minutes	

Activities

Activity 1: Introductions & Presentation of the project

Estimated time: 15 minutes

Part 1: Introductions (10 minutes)

Welcome participants and introduce yourself (your name, studies, position in the organisation, role on the event, etc.) You can also provide more information about yourself to break the ice and encourage participants to talk about themselves.

Ask participants to briefly (1 minute) introduce themselves (name, studies, profession) and share their expectations from the Face-to-face awareness action.

Part 2: Project Presentation (5 minutes)

After all participants have introduced themselves, briefly present some basic information about the project's key objectives and activities, and your organisation.

You can prepare a presentation with basic information to use if you find it helpful, but make sure to keep it short and stay on time.

Activity 2: Basic LGBTI terminology

Estimated time: 20 minutes

Learning Objectives

The aim of this session is to make participants familiar with the key concepts and basic LGBTI terminology.

After the end of the session participants will be able to:

- Describe and understand what sexual orientation, gender identity, gender expression and sex characteristics are, as well as the main LGBTI identities and terms.
- Use appropriate, non-discriminatory terminology when referring to or communicating with LGBTI people.

Prepare a presentation with the following definitions of key concepts, LGBTI identities and other terms related to LGBTI issues. Provide make sure participants understand the different terms and provide clarifications when needed.

Key concepts	
Gender Identity	It refers to a person's inner sense of their gender. It
	may or may not match with the gender the person
	was assigned at birth and/or their gender expression
	(Theofilopoulos & Paganis, 2019).
Gender Expression	It is the external manifestations of gender, expressed
	through a person's name, pronouns, clothing,
	haircut, behaviour, voice or body characteristics. It
	may "match" with the gender identity of the same
	person (e.g. A man having a masculine gender

	expression), but this is not always the case
	(Theofilopoulos & Paganis, 2019).
	Sex characteristics include the primary (such as internal
	and external reproductive organs, chromosomes and
Sex characteristics	hormones), as well as the secondary (such as muscle
	mass, body hair, breast development and other)
	characteristics of sex. (PARADISO, 2019)
	Refers to each person's capacity for profound
	affection, emotional and sexual attraction to, and
Sexual Orientation	intimate and sexual relations with, individuals of a
	different gender or the same gender or more than one
	gender (Theofilopoulos & Paganis, 2019).

LGBTQI identities	
Gay	A person that identifies as a man and experiences emotional, romantic and/or sexual attraction to people of the same gender (PARADISO, 2019)
Lesbian	A person that identifies as a woman and experiences emotional, romantic and/or sexual attraction to people of the same gender (PARADISO, 2019)
Bisexual	A person that experiences romantic and/or sexual attraction to people of two or more genders. It is often used as an umbrella term to describe various forms of polysexuality. (PARADISO, 2019)
Transgender / Trans	It is an umbrella term, which includes those people who have a gender identity, which is different to the gender assigned at birth. It includes multiple gender identities,

	such as trans man, trans woman, non-binary, agender,
	genderqueer, gender fluid, etc (Theofilopoulos &
	Paganis, 2019).
	Queer is a complex term with multiple interpretations. In
	the past, it was used as derogatory term for gay
	people, but in the 80's it was reclaimed from activists
	and academics as a positive and confrontational self-
	description to challenge social norms around sexuality,
Queer	sexual orientation, gender identity and/or other forms
	of normativity. It is often used by people that do not
	accept the traditional concepts of gender and
	sexuality and do not identify with any of the terms of
	the LGBTI+ acronym, but also as an umbrella term for all
	LGBTI+ people. As a term, it also identifies with certain
	parts of the Queer Theory. (PARADISO, 2019).
	Persons who identify with this term are born with sex
	characteristics that do not belong strictly to male or
	female categories, or that belong to both at the same
	time. This term stands for the spectrum of variations of
Intersex	sex characteristics that naturally occur within the
	human species. It also stands for the acceptance of the
	physical fact that sex is a spectrum and that people
	with variations of sex characteristics other than male or
	female do exist (Theofilopoulos & Paganis, 2019).
	People who experience romantic, sexual or affectional
Pansexual	desire for people of all genders (Theofilopoulos &
	Paganis, 2019).
Acoviral	A person who defines themselves using this term is
Asexual	someone who experiences no or very little sexual

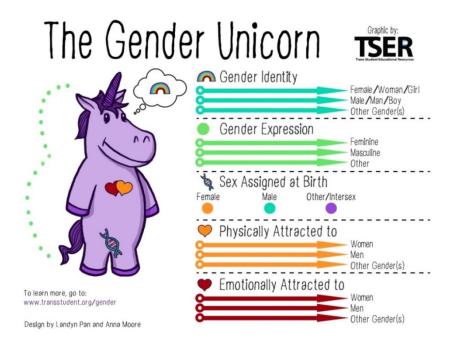
	attraction. Each such person experiences things like
	relationships, attraction, and arousal somewhat
	differently. This term also refers to a spectrum of
	identities of people who experience little or no sexual
	attraction (Theofilopoulos & Paganis, 2019).
Non-binary	People who do not identify their gender within the
	male/female binary but somewhere outside or
	between. Some of them use gender neutral pronouns
	such as they/them (Theofilopoulos & Paganis, 2019). It is
	often used as an umbrella term, in which terms such as
	genderfluid, agender and others are included.

Other terms	
Biphobia	The fear, unreasonable anger, intolerance or/and hatred toward bisexuality and bisexual people (Theofilopoulos & Paganis, 2019).
Cisgender / Cis	People whose gender identity is the same as the gender they were assigned at birth. It is used as the opposite of transgender/trans.
Heteronormativity	Refers to cultural and social practices where men and women are led to believe that heterosexuality is the only conceivable sexuality. It implies that heterosexuality is the only way of being "normal" (Theofilopoulos & Paganis, 2019).
Heterosexual	A person who is attracted to people of a different gender. Often, heterosexuality is described as attraction towards the "opposite" gender, however

	this approach is based on the view of gender as a
	binary, erasing the existence of non-binary and
	intersex people.
Homophobia	The fear, unreasonable anger, intolerance or/and
	hatred directed towards homosexuality
	(Theofilopoulos & Paganis, 2019).
Legal Gender Recognition	It is the official procedure to change a transgender
	person's name and gender identifier in official
	registries and documents such as their birth
	certificate, ID card, passport or driving license. In
	some countries, it's impossible to have your gender
	recognized by law (Theofilopoulos & Paganis, 2019).
	It includes some or all of the following personal,
	medical, and legal steps: telling one's family, friends,
	and co-workers; using a different name and new
	pronouns; dressing differently; changing one's name
— •10	and/or sex on legal documents; hormone therapy;
Transition	and possibly (though not always) one or more types of
	surgery (referred to as gender reassignment or gender
	confirmation surgery). The exact steps involved in
	transition vary from person to person (Theofilopoulos &
	Paganis, 2019).
	A matrix of cultural and personal beliefs, opinions,
Transphobia	attitudes and aggressive behaviours based on
	prejudice, disgust, fear and/or hatred directed
	against individuals or groups who do not conform
	to, or who transgress societal gender expectations
	and norms. It particularly affects individuals whose

lived gender identity or gender expression differs from the gender role assigned to them at birth (Theofilopoulos & Paganis, 2019).

You could also use The Gender Unicorn graph, by the Trans Student Education Network, which is a very useful tool to familiarise people with different LGBTQI identities and explore the concepts of sexual orientation, gender identity, sex assigned at birth and gender expression.



The graph is available online on TSER's website² in multiple languages. There is also an interactive version that you can use to showcase the way different identities can coexist and/or interact with each other. This visualization can aid participants in understanding new terms and concepts.

² http://www.transstudent.org/gender/

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Activity 3: Common myths and stereotypes towards older LGBTI people

Estimated time: 40 minutes

Learning Outcomes:

Through this session participants will be able to:

• Identify and avoid myths and stereotypes against older LGBTI people.

• Respond to such myths and stereotypes with true facts.

Part 1: Brainstorming (10 min)

Facilitators will encourage participants to think of common ideas and images of older people, regarding sexuality and gender and share them with the rest of the group. The facilitator will write down on a flipchart all the ideas expressed. Encourage all

participants to take part in this exercise.

Part 2: Presentation and discussion (30 min)

Prepare a presentation with the main myths and stereotypes against LGBTI older people along with facts and evidence to debunk them once the group has come up with a good number of myths and stereotypes. Evidence may include statistics from surveys on LGBTI issues and older age, scientific facts, as well as stories and testimonies from older people who identify as LGBTI (e.g. through videos) or from your own experience

working with older LGBTI people.

Some examples of common myths that you can include in your presentation are the

following:

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Myth	Facts
"Older people are not interested in forming romantic and/or sexual relationships" / "Older people are not sexually active"	This is a very common misconception towards older people (not only those who are LGBTI). Existing evidence however shows that sexual relationships are a need present throughout the lifespan of people. Changes associated with ageing, health issues and the use of medication may impact the sexual life of older people (Kazer, 2013), but this is not the same as lack of sexual desire. Medication aimed to treat sexual dysfunction can help people of all genders to remain sexually active later in life. As mentioned by the LTCOmbudsman (2015) "one study revealed 61% of people over 60 said their sex life today was the same or better than in their 40s, and 26% of those over 75 remain sexually active".
"Being LGBTI is a new trend. Only younger people identify as LGBTI"	LGBTI identities are not at all new. The fact that LGBTI issues have gained more visibility in the last decades does not mean that LGBTI people have suddenly started to exist; LGBTI people have always existed, but homophobic and transphobic societal attitudes, violence and discrimination, stigmatization, pathologisation and criminalization of non cis and/or heterosexual people, as well as the lack of legal protections have kept them invisible. According to a survey mentioned by SAGE (2013) in 2010 approximately 1.6 million LGB older

adults lived in the United States. For many people being LGBTI (and especially older) is synonymous of living alone, but this is far from the truth. LGBTI people can form satisfying, long-lasting, loving relationship, though the lack of legal protection for same-sex relationships in many countries may mean that these relationships are not officially recognized by the state. Many LGBTI people also have biological or adopted children: bisexual people may be in different-sex relationships and many lesbian or gay people may have come "Older LGBTI people don't have out later in life, after they have been in different-sex families/partners/children" relationships and/or marriages. (APA, 2012). Also a lot of LGBTI older adults have created "families of choice": social networks consisting of close friends that offer them a sense of belonging, resilience, and support (APA, n.d). However LGBTI people are, according to SAGE (2018), twice as likely to live alone and four times less likely to have children than their cisheterosexual peers, thus increasing the risk of social isolation. This common stereotype may not apply only to older LGBTI people, but it is a widespread misconception about LGBTI people. LGBTI people "You can always tell if someone can express themselves (and their identities), in is LGBTI" many different ways, the same way cis-heterosexual do. gender people person's expression (appearance, clothing or mannerisms, etc) is not

	necessarily an indicator of their identities.
"Older people are not affected by STIs"	This stereotype is based on the preconception that
	older people do not engage in sexual activity or
	that if they do it is always within a long-term
	monogamous relationship. Furthermore, the
	progress that has been made on the treatment of
	HIV has resulted in more people reaching into their
	older years (SAGE, 2018)
	There is no specific point in life when people realise
	they are LGBTI. Some may know their sexual
	orientation and/or gender identity from a very
	young age (as children, teenagers or young adults),
	while others may come out in their 30s, 40s, 50s or
	even later in life. Intersex people (especially those
	who have been subjected to sex "normalising"
"All people (know they) are LGBTI	surgeries) may find out later in life or not be aware
from a very young age"	that they were born with an intersex variation.
	Some people may have known that they are LGBTI
	but stayed in the closet for many years, for fear of
	experiencing stigmatisation, violence and
	discrimination, and losing their social support. This is
	especially true for older adults who lived a big part
	of their lives when being LGBTI was considered a mental disorder or criminalised.
	LGBTI identities are no longer classified as mental
"LGBTI people are mentally ill"	health disorders. Homosexuality was first
	depathologised in 1973 when the American
	Psychiatric Association removed it from its
	Diagnostic and Statistical Manual (DSM). On the 17 th
	G

of May 1990, the General Assembly of the World Health Organization (WHO) decided to remove homosexuality from the International Classification of Diseases (ICD).

Trans identities are also depathologised. In 2018, the World Health Organization (WHO) released the new version of ICD (ICD 11) which removed trans identities from the mental health disorders chapter. All trans-related diagnoses have been removed from the chapter Mental health disorders. A new chapter, named "Conditions related to sexual health", has been added to ICD and it includes a new diagnosis of "Gender incongruence" that replaced the previous "Gender Identity Disorder" diagnosis (Theofilopoulos & Paganis, 2019). The new version of ICD was officially adopted by the General assembly of the WHO in May 2019.

"Older LGBTI people have the same needs and problems that older cis-heterosexual people"

While there are of course issues related to ageing that are common both for LGBTI and cisheterosexual people, there are also significant differences in the way people with an LGBTI identity experience ageing. Anti-LGBT societal attitudes can impose additional barriers for older LGBTI people on issues such as accessing health care services, social support, retirement and finances (APA, 2012). For example LGBTI people may become estranged from their families of origin or their (biological) children, thus limiting their social support. Also women in same-sex relationships may have a

smaller joined income compared to women in different-sex relationships (because of pay gaps between men and women), and experience bigger financial problems, due to the accumulate loss of income (APA, 2012). According to the American Psychological Association (2012) "lack of legal protections may raise problems in medical and financial decision making, couple autonomy in health and end-of-life decisions, access to appropriate health care, parenting rights, health care and retirement benefits, inheritances, living arrangements, and property rights."

Apart from the discrimination they may face on the basis of their sexual orientation, gender identity and/or sex characteristics, older LGBTI people may also face discrimination based on their age, within the LGBTI community (APA, 2012). Having limited access to community support and events, together with the gradual shrinkage of peer social support networks (due to health reasons or death) can leave older LGBTI people with very few or no people to turn to.

"Older LGBTI people have no problems in attending health or social services"

Older LGBTI people are less likely to have health insurance, either because they have been rejected by their families when they are young, or because they are unemployed or homeless, or because they require services that are not available to them even when they have health insurance.

Also, they may experience discrimination or

prejudice from health or social professionals when seeking care/support. Bad experiences with inadequately-trained professionals are a big reason why LGBTI people do not seek medical care; many also report that they look for clues when arriving at a health care facility, such as the way they are greeted by staff, whether non-discrimination policies are posted in public areas, or if there are single occupancy or gender-neutral bathrooms. LGBTI people sometimes discover that providers do not have knowledge or experience in caring for them. These barriers present a challenge for LGBT individuals (National LGBT Health Education Center; Landry, 2017)

Creating an environment in which these conversations are more comfortable for the patient is an important goal for all health care staff. Because health care is for everyone, we must be prepared to serve people of all races, ethnicities, religions, ages, and backgrounds. When people have bad experiences with health care staff simply because they are (or seem) different, they may hide important information about themselves – or worse, they may not return for needed health care.

These are some of the most common myths regarding sexuality and gender in older age. Partners can include other stereotypes that are relevant to the partners' country context.

Activity 4: Combating stereotypes & supporting older LGBTI people

Estimated time: 35 minutes

Learning Outcomes:

Through this session participants will explore ways in which they can actively support

older LGBTI people and raise awareness on sexuality, gender and age.

Part 1: Work in groups (15 min)

Divide participants into 2 groups. Give groups 5 minutes to discuss ways in which they

can combat stereotypes and support older LGBTI people through their work as

health/social professionals. Next, give each group 5 minutes to present their ideas.

Part 2: Presentation (20 min)

After both groups have presented their ideas, make a presentation covering good

practices for allyship. Include guidelines focusing on their work as health/social

professionals.

Some examples of guidelines to include in your presentation are the following:

Avoid making assumptions. Someone's gender identity and/or sexual orientation

is not something you can guess by their appearance.

Use inclusive language that does not indicate you assume people's sexual

orientation or relationship status (e.g. use the term "partner" instead of

"husband/wife").

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therein.

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- If you know an older person is LGBTI do not share this information with others without the person's consent. Some LGBTI people (especially older) are not out to their friends, family or workplace.
- Always use the name and the pronouns they introduce themselves with or ask
 you to use. This applies also when you are referring to the period before they
 came out. If you're not sure what pronouns you should use, just ask.
- Don't ask trans people about their previous or "true" name. It is a rude and invalidating question; the name they use currently is their true name.
- Always use the language the person uses in order to describe themselves.
- Promote a safe and comfortable environment where older LGBTI people feel safe to talk to you openly. Poor communication with health and social professionals may lead to neglect important issues.
- Try to have an open mind regarding other people' sexuality and do not show or reveal any prejudice.
- Try to raise awareness among friends and family, co-workers, as well as in public (e.g. through social media) about the stereotypes and prejudices based on age, sexual orientation and gender identity, and the problems older LGBT people face.
- Try to expand your knowledge on LGBTI issues, and on issues regarding older age. You can do this by searching for relevant educational material and information online, and getting in touch with LGBTI and/or human rights civil society organisations that work on these issues.
- Assume a non-judgmental attitude. Non-judgmental questions about sexual practices and behaviours is crucial.
- Disseminate or visibly post a non-discrimination statement stating that equal care will be provided to all patients, regardless of age, race, ethnicity, physical ability or attributes, religion, sexual orientation, or gender identity/expression.
- Acknowledge relevant days of observance in your practice such as World AIDS Day, LGBT Pride Day, and National Transgender Day of Remembrance

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Inform colleagues on the issues affecting older LGBTI people. Share with them

relevant material and information and encourage them to participate in events

and workshops, such as these awareness actions!

The above list of guidelines is not exhaustive. Feel free to add guidelines that are

relevant to your country's context.

Activity 5: Closing & Feedback

Estimated time: 10 minutes

After closing the discussion thank again all participants for their presence and

involvement and ask them for their general impression and feedback.

This could be done either as a short informal discussion or you could provide

participants with post-it notes to write down their feedback. Leading a discussion is

preferable, especially when the number of participants is small, since it gives

participants the chance to exchange opinions as well, but giving written feedback can

be used in case there is not enough time for discussion.

Some questions you could ask participants are the following:

What did they learn?

Did they get answers for the questions they had on older LGBTI people?

Was there anything that surprised them?

What will they keep from the day?

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Annex

Evaluation Questionnaire

			Neither		
	Totally disagree	Disagree	agree nor disagree	Agree	Totally Agree
The objectives of the action were met.	1	2	3	4	5
The structure and content was easy to follow.	1	2	3	4	5
The action promoted and facilitated interaction and participation.	1	2	3	4	5
The content covered will be useful for my work/personal life.	1	2	3	4	5
The facilitator had sufficient knowledge on the topic.	1	2	3	4	5
The facilitator had sufficient facilitation skills.	1	2	3	4	5
The time allotted was sufficient.	1	2	3	4	5
The place where the action took place was suitable.	1	2	3	4	5
The place where the action took place was easily accessible.	1	2	3	4	5
Practical issues (equipment, stationery, etc) were sufficiently covered.	1	2	3	4	5
I would suggest to other people to take part in this action.	1	2	3	4	5



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PROJECT PARTNERS:



















Face-to-Faceawareness actions

Deliverable 2.5

FACE-TO-FACE AWARENESS ACTIONS:

PUBLIC SERVICES

Philippos Paganis

KMOP - Social Action and Innovation Center

Athens, 2019

Adapted by:

Anziani e non Solo

Carpi, 2019

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The Project

The <u>"Best4OlderLGBTI – Best Interest for the Older LGBTI"</u> project intends to fight against discrimination based on age, sexual orientation, gender identity, gender expression and sex characteristics of older people, and to promote the rights of older LGBTI people, through raising awareness of different target groups contributing for a more equal and inclusive society.

The aim of the project is to contribute to the decrease of inequalities and discrimination faced by older LGBTI people when attending public services, as well as health and social care, and to encourage the reporting of cases of discrimination. Furthermore, the project aims to create a network of professionals.

Main Activities:

- Development of an awareness-raising campaign in 6 EU Member States (Italy, Greece, Ireland, Portugal, Netherlands, Romania) that will include both online and face-to-face actions. The actions will target different groups in society, namely: Health and social professionals; Professionals of public services; Teachers; Employers; General Public; University students.
- Adaptation and development of an innovative face-to-face intervention programme targeting health and social professionals with the aim of mitigating stereotypes and negative attitudes regarding sexuality and gender in old age, including LGBTI.

Expected Results:

- Changes in attitudes and behaviours of professionals and the general public towards older LGBTI people.
- Raise awareness about age discrimination and sexuality of older people, including LGBTI.
- Encouragement of political and social discussion.
- Encouragement of reporting of cases of discrimination.

• Reduced inequalities and discrimination in attendance of public services and health and social care for older LGBTI people.

Partners:

- Anziani e Non Solo (Italy)
- KMOP Social Action and Innovation Center (Greece)
- Age Action Ireland Ltd (Ireland)
- StichtingRoze 50+ (Netherlands)
- CASO50+ Centro de Atendimento e Serviços 050+, Associação (Portugal)
- Fluxphera (Portugal)
- European Association for Social Innovation (Romania)

Associate Partners

- ILGA Europe
- European Network of Social Authorities
- AGE Platform Europe
- IAM Intersectionalities and more

The Best4OlderLGBTI project is implemented with the financial support of the European Union by the Rights, Equality and Citizenship (REC) Programme.

Target group

The existing negative prejudice towards older LGBTI people can be combated through awareness-raising actions aimed at debunking stereotypes and challenging societal attitudes towards this particular minority group.

These actions can be particularly helpful when directed to key target groups such as professionals working in public services. It must be remembered that by being constantly at high contact with all types of beneficiaries as well as the local community as a whole, this group represents an essential target in our Project.

Raising awareness by providing accurate information on age, sexual orientation, gender identity and sex characteristics will positively affect not only the public service providers but also their beneficiaries and their communities who will meet a more open, accepting and supportive environment for older LGBTI people.

These actions will target people working in public services in various positions.. Each action will target 6-8 participants with the above characteristics.

Learning Outcomes

The face-to-face awareness actions aim to transfer to participants some key-messages related to sexuality and gender in older age. The main goals of the face-to-face awareness actions are to familiarise participants with the main myths and stereotypes against older LGBTI people, the discrimination they face on different contexts, as well as to aid participants in identifying and responding to them in their living and working contexts.

Through the face-to-face awareness actions participants will be able to:

- Understand key LGBTI concepts and issues
- Understand gender identities, sexual orientations and sex characteristics, and make clear distinctions between them
- Identify and avoid stereotypes based on age

- Identify and avoid stereotypes based on Sexual Orientation, Gender Identity and Sex Characteristics (SOGI)
- Understand the ways in which ageism and anti-LGBTI stereotypes create unique challenges for older LGBTI people
- Respond to such stereotypes and prejudices with true facts

Methods

The methods that will be used in the awareness actions include:

- Presentation followed by discussion: The facilitator makes a presentation which
 includes the main information around the topic of the activity. Right after the
 presentation a discussion is opened with all participants to provide additional
 information and/or clarifications.
- Working in groups: Participants are divided in small groups (2-3 persons) to discuss
 a topic and then present their ideas to the other group(s).
- Discussion followed by presentation: Participants are encouraged to think about a certain topic and discuss it with the rest of the group. Then, the facilitator makes a presentation which includes the main information around the topic of the activity, answering questions that came up during the discussion and providing further clarifications.
- Brainstorming: Participants share their thoughts and ideas on a certain topic. The
 aim of the activity is to gather as many ideas as possible. The facilitator makes it
 clear that there are no wrong answers and encourages participants to express
 themselves freely.

Facilitators may create and use material such as PowerPoint presentations and/or printed material with information, as well as make use of other types of material (e.g. videos with personal testimonies, etc).

Module

Activity	Estimated Time
Introductions & Presentation of the project	15 minutes
Basic LGBTI terminology	20 minutes
Common myths and stereotypes towards older LGBTI people	40 minutes
Combating stereotypes & Supporting older LGBTI people	35 minutes
Closing & Feedback	10 minutes

Activities

Activity 1: Introductions & Presentation of the project

Estimated time: 15 minutes

Part 1: Introductions (10 minutes)

Welcome participants and introduce yourself (your name, studies, position in the organisation, role on the event, etc.) You can also provide more information about yourself to break the ice and encourage participants to talk about themselves.

Ask participants to briefly (1 minute) introduce themselves (name, studies, profession) and share their expectations from the Face-to-face awareness action.

Part 2: Project Presentation (5 minutes)

After all participants have introduced themselves, briefly present some basic information about the project's key objectives and activities, and your organisation.

You can prepare a presentation with basic information to use if you find it helpful, but make sure to keep it short and stay on time.

Activity 2: Basic LGBTI terminology

Estimated time: 20 minutes

Learning Objectives

The aim of this activity is to make participants familiar with the key concepts and basic LGBTI terminology.

After the end of the activity participants will be able to:

- Describe and understand what sexual orientation, gender identity, gender expression and sex characteristics are, as well as the main LGBTI identities and terms.
- Use appropriate, non-discriminatory terminology when referring to or communicating with LGBTI people.

Prepare a presentation with the following definitions of key concepts, LGBTI identities and other terms related to LGBTI issues. Make sure participants understand the different terms and provide clarifications when needed.

Key concepts			
	It refers to a person's inner sense of their gender. It		
Gender Identity	may or may not match with the gender the person		
	was assigned at birth and/or their gender expression		
	(Theofilopoulos &Paganis, 2019).		
Gender Expression	It is the external manifestations of gender, expressed		
	through a person's name, pronouns, clothing,		
	haircut, behaviour, voice or body characteristics. It		
	may "match" with the gender identity of the same		

	person (eg. A man having a masculine gender
	expression), but this is not always the
	case(Theofilopoulos &Paganis, 2019).
	Sex characteristics include the primary (such as internal
	and external reproductive organs, chromosomes and
Sex characteristics	hormones), as well as the secondary (such as muscle
	mass, body hair, breast development and other)
	characteristics of sex. (PARADISO, 2019)
	Refers to each person's capacity for profound
	affection, emotional and sexual attraction to, and
Sexual Orientation	intimate and sexual relations with, individuals of a
	different gender or the same gender or more than one
	gender(Theofilopoulos &Paganis, 2019).

LGBTI identities		
Gay	A person that identifies as a man and experiences emotional, romantic and/or sexual attraction to people of the same gender (PARADISO, 2019)	
Lesbian	A person that identifies as a woman and experiences emotional, romantic and/or sexual attraction to people of the same gender (PARADISO, 2019)	
Bisexual	A person that experiences romantic and/or sexual attraction to people of two or more genders. It is often used as an umbrella term to describe various forms of polysexuality ¹ . (PARADISO, 2019)	
Transgender / Trans	It is an umbrella term, which includes those people who	

¹Polysexuality is defined as the attraction towards more than one gender. It can include identities such as bisexual, pansexual and others, whereas monosexuality refers to attraction towards one gender (i.e. heterosexual, gay/lesbian).

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	have a gender identity, which is different to the gender
	assigned at birth. It includes multiple gender identities,
	such as trans man, trans woman, non-binary, agender,
	genderqueer, gender fluid, etc (Theofilopoulos
	&Paganis, 2019).
	Queer is a complex term with multiple interpretations. In
	the past, it was used as derogatory term for gay
	people, but in the 80's it was reclaimed from activists
	and academics as a positive and confrontational self-
	description to challenge social norms around sexuality,
	sexual orientation, gender identity and/or other forms
Queer	of normativity. It is often used by people that do not
	accept the traditional concepts of gender and
	sexuality and do not identify with any of the terms of
	the LGBTI+ acronym, but also as an umbrella term for all
	LGBTI+ people. As a term, it also identifies with certain
	parts of the Queer Theory. (PARADISO, 2019).
	Persons who identify with this term are born with sex
	characteristics that do not belong strictly to male or
	female categories, or that belong to both at the same
	time. This term stands for the spectrum of variations of
Intersex	sex characteristics that naturally occur within the
	human species. It also stands for the acceptance of the
	physical fact that sex is a spectrum and that people
	with variations of sex characteristics other than male or
	female do exist (Theofilopoulos &Paganis, 2019).
	People who experience romantic, sexual or affectional
Pansexual	desire for people of all genders (Theofilopoulos
	&Paganis, 2019).
Asexual	A person who defines themselves using this term is

	someone who experiences no or very little sexual
	attraction. Each such person experiences things like
	relationships, attraction, and arousal somewhat
	differently. This term also refers to a spectrum of
	identities of people who experience little or no sexual
	attraction (Theofilopoulos & Paganis, 2019).
	People who do not identify their gender within the
	male/female binary but somewhere outside or
Non-binary	between. Some of them use gender neutral pronouns
	such as they/them (Theofilopoulos &Paganis, 2019). It is
	often used as an umbrella term, in which terms such as
	genderfluid, agender and others are included.

Other terms		
Biphobia	The fear, unreasonable anger, intolerance or/and hatred toward bisexuality and bisexual people	
	(Theofilopoulos &Paganis, 2019).	
	People whose gender identity is the same as the	
Cisgender / Cis	gender they were assigned at birth. It is used as the	
	opposite of transgender/trans.	
	Refers to cultural and social practices where men	
	and women are led to believe that heterosexuality	
Heteronormativity	is the only conceivable sexuality. It implies that	
	heterosexuality is the only way of being "normal"	
	(Theofilopoulos &Paganis, 2019).	
Heterosexual	A person who is attracted to people of a different	

	gender. Often, heterosexuality is described as
	attraction towards the "opposite" gender, however
	this approach is based on the view of gender as a
	binary, erasing the existence of non-binary and
	intersex people.
	The fear, unreasonable anger, intolerance or/and
Homophobia	hatred directed towards homosexuality
	(Theofilopoulos &Paganis, 2019).
	It is the official procedure to change a transgender
	person's name and gender identifier in official
La mal Canaday Da aa mu'ilian	registries and documents such as their birth
Legal Gender Recognition	certificate, ID card, passport or driving license. In
	some countries, it's impossible to have your gender
	recognized by law (Theofilopoulos &Paganis, 2019).
	It includes some or all of the following personal,
	medical, and legal steps: telling one's family, friends,
	and co-workers; using a different name and new
	pronouns; dressing differently; changing one's name
Transition	and/or sex on legal documents; hormone therapy;
Hansmon	and possibly (though not always) one or more types of
	surgery (referred to as gender reassignment or gender
	confirmation surgery). The exact steps involved in
	transition vary from person to person (Theofilopoulos
	&Paganis, 2019).
	A matrix of cultural and personal beliefs, opinions,
	attitudes and aggressive behaviours based on
Transphobia	prejudice, disgust, fear and/or hatred directed
	against individuals or groups who do not conform
	to, or who transgress societal gender expectations

and norms. It particularly affects individuals whose lived gender identity or gender expression differs from the gender role assigned to them at birth (Theofilopoulos & Paganis, 2019).

You could also use The Gender Unicorn graph, by the Trans Student Education Network, which is a very useful tool to familiarise people with different LGBTQI identities and explore the concepts of sexual orientation, gender identity, sex assigned at birth and gender expression.



The graph is available online on TSER's website² in multiple languages. There is also an interactive version that you can use to showcase the way different identities can coexist and/or interact with each other. This visualization can aid participants in understanding new terms and concepts

Activity 3: Common myths and stereotypes towards older LGBTI people

Estimated time: 40 minutes

Learning Outcomes:

²http://www.transstudent.org/gender/

Through this activity participants will be able to:

- Identify and avoid myths and stereotypes against older LGBTI people.
- Respond to such myths and stereotypes with true facts.

Part 1: Brainstorming (10 min)

Facilitators will encourage participants to think of common ideas and images of older people, regarding sexuality and gender and share them with the rest of the group. The facilitator will write down on a flipchart all the ideas expressed. Encourage all participants to take part in this exercise.

Part 2: Presentation and discussion (30 min)

Prepare a presentation with the main myths and stereotypes against LGBTI older people along with facts and evidence to debunk them, once the group has come up with a good number of myths and stereotypes. Evidence may include statistics from surveys on LGBTI issues and older age, scientific facts, as well as stories and testimonies from older people who identify as LGBTI (e.g. through videos) or from your own experience working with older LGBTI people.

Some examples of common myths that you can include in your presentation are the following:

Myth	Facts
"Older people are not interested	This is a very common misconception towards older
in forming romantic and/or	people (not only those who are LGBTI). Existing
sexual relationships" / "Older	evidence however shows that sexual relationships
people are not sexually active"	are a need present throughout the lifespan of

people. Changes associated with ageing, health issues and the use of medication may impact the sexual life of older people (Kazer, 2013), but this is not the same as lack of sexual desire. Medication aimed to treat sexual dysfunction can help people of all genders to remain sexually active later in life. As mentioned by the LTCOmbudsman (2015) "one study revealed 61% of people over 60 said their sex life today was the same or better than in their 40s, and 26% of thoseover 75 remain sexually active". LGBTI identities are not at all new. The fact that LGBTI issues have gained more visibility in the last decades does not mean that LGBTI people have suddenly started to exist; LGBTI people have always existed, but homophobic and transphobic societal "Being LGBTI is a new trend. Only attitudes, violence discrimination, and people identify younger stigmatization, pathologisation and criminalization LGBTI" of non cis and/or heterosexual people, as well as the lack of legal protections have kept them invisible. According to a survey mentioned by SAGE (2013) in 2010 approximately 1.6 million LGB older adults lived in the United States. For many people being LGBTI (and especially older) is synonymous of living alone, but this is far from the truth. LGBTI people can form satisfying, long-lasting, "Older LGBTI people don't have loving relationship, though the lack of legal families/partners/children" protection for same-sex relationships in many countries may mean that these relationships are not officially recognized by the state. Many LGBTI people also have biological or adopted children:

bisexual people may be in different-sex relationships and many lesbian or gay people may have come out later in life, after they have been in different-sex relationships and/or marriages. (APA, 2012). Also a lot of LGBTI older adults have created "families of choice": social networks consisting of close friends that offer them a sense of belonging, resilience, and support (APA, n.d). However LGBTI people are, according to SAGE (2018), twice as likely to live alone and four times less likely to have children than their cisheterosexual peers, thus increasing the risk of social isolation. This common stereotype may not apply only to older LGBTI people, but it is a widespread misconception about LGBTI people. LGBTI people "You can always tell if someone can express themselves (and their identities), in is LGBTI" many different ways, the same way cis-heterosexual people do. Α person's gender expression (appearance, clothing or mannerisms, etc) is not necessarily an indicator of their identities. This stereotype is based on the preconception that older people do not engage in sexual activity or that if they do it is always within a long-term "Older people are not affected monogamous relationship. Furthermore. the by STIs" progress that has been made on the treatment of HIV has resulted in more people reaching into their older years (SAGE, 2018)

"All people (know they) are LGBTI from a very young age"

There is no specific point in life when people realise they are LGBTI. Some may know their sexual orientation and/or gender identity from a very young age (as children, teenagers or young adults), while others may come out in their 30s, 40s, 50s or even later in life. Intersex people (especially those who have been subjected to sex "normalising" surgeries) may find out later in life or not be aware that they were born with an intersex variation.

Some people may have known that they are LGBTI but stayed in the closet for many years, for fear of experiencing stigmatisation, violence and discrimination, and losing their social support. This is especially true for older adults who lived a big part of their lives when being LGBTI was considered a mental disorder or criminalised.

"LGBTI people are mentally ill"

LGBTI identities are no longer classified as mental health disorders. Homosexuality was first depathologised in 1973 when the American Psychiatric Association removed it from its Diagnostic and Statistical Manual (DSM). On the 17th of May 1990, the General Assembly of the World Health Organization (WHO) decided to remove homosexuality from the International Classification of Diseases (ICD).

Trans identities are also depathologised. In 2018, the World Health Organization (WHO) released the new version of ICD (ICD 11) which removed trans identities from the mental health disorders chapter. All trans-related diagnoses have been removed

from the chapter Mental health disorders. A new chapter, named "Conditions related to sexual health", has been added to ICD and it includes a new diagnosis of "Gender incongruence" that replaced the previous "Gender Identity Disorder" diagnosis (Theofilopoulos & Paganis, 2019). The new version of ICD was officially adopted by the General assembly of the WHO in May 2019.

"Older LGBTI people have the same needs and problems that

older cis-heterosexual people"

While there are of course issues related to ageing that are common both for LGBTI and cisheterosexual people, there are also significant differences in the way people with an LGBTI identity experience ageing. Anti-LGBT societal attitudes can impose additional barriers for older LGBTI people on issues such as accessing health care services, social support, retirement and finances (APA, 2012). For example LGBTI people may become estranged from their families of origin or their (biological) children, thus limiting their social support. Also women in same-sex relationships may have a smaller joined income compared to women in different-sex relationships (because of pay gaps between men and women), and experience bigger financial problems, due to the accumulate loss of income (APA, 2012). According to the American Psychological Association (2012) "lack of legal protections may raise problems in medical and financial decision making, couple autonomy in health and end-of-life decisions, access to appropriate health care, parenting rights, health

care and retirement benefits, inheritances, living arrangements, and property rights."

Apart from the discrimination they may face on the basis of their sexual orientation, gender identity and/or sex characteristics, older LGBTI people may also face discrimination based on their age, within the LGBTI community (APA, 2012). Having limited access to community support and events, together with the gradual shrinkage of peer social support networks (due to health reasons or death) can leave older LGBTI people with very few or no people to turn to.

These are some of the most common myths regarding sexuality and gender in older age. Partners can include other stereotypes that are relevant to the partners' country context.

Activity 4: Combating stereotypes towards older LGBTI people

Estimated time: 35 minutes

Learning Outcomes:

Through this activity participants will explore ways in which they can actively support older LGBTI people and raise awareness on sexuality, gender and age.

Part 1: Work in groups (15 min)

Divide participants into 2 groups. Give groups 5 minutes to discuss ways in which they can combat stereotypes and support older LGBTI people in their job. Next, give each group 5 minutes to present their ideas.

Part 2: Presentation (20 min)

After both groups have presented their ideas, make a presentation covering good practices for allyship, inclusions and respect. Include guidelines participants can apply in their job to combat stereotypes on the basis of age and sexuality and/or gender, and to actively support older LGBTI people.

Some examples of guidelines to include in your presentation are the following:

- Avoid making assumptions. Someone's gender identity, sexual orientation and/or sex characteristics is not something you can guess by their appearance. Use inclusive language that does not indicate you assume people's sexual orientation or relationship status (e.g use the term "partner" instead of "husband/wife").
- If you know an older person is LGBTI do not share this information with others without the person's consent. Some LGBTI people (especially older) are not out to their friends, family or workplace.
- Always use the name and the pronouns they introduce themselves with or ask you to use. This applies also when you are referring to the period before they came out. If you're not sure what pronouns you should use, just ask.
- Don't ask trans people about their previous or "true" name. It is a rude and
 invalidating question; the name they use currently is their true name. However, if
 the service you are providing requires ID or other document verification that are
 not matching the gender identity of a beneficiary, ask for ID discretely avoiding
 any comments about it.
- Always use the language the person uses in order to describe themselves. Some
 LGBTI people may (rarely) refer to themselves with terms that are considered
 offensive by the majority of the community (e.g a transgender person may
 identify themselves as a "cross-dresser" or "transsexual", and a gay man may use

- terms such "faggot" to refer to himself). Use these terms only if the person you talk with identifies this way.
- Try to raise awareness among friends and family, in your workplace, as well as in public (e.g. through social media) about the stereotypes and prejudices based on age, sexual orientation, gender identity and sex characteristics, and the problems older LGBT people face.
- Try to expand your knowledge on LGBTI issues, and on issues regarding older age. You can do this by searching for relevant educational material and information online, and getting in touch with LGBTI and/or human rights civil society organisations that work on these issues.

The above list of guidelines is not exhaustive. Feel free to add guidelines that are relevant to your country's context.

Activity 5: Closing & Feedback

Estimated time: 10 minutes

After closing the discussion thank again all participants for their presence and involvement and ask them for their general impression and feedback.

This could be done either as a short informal discussion or you could provide participants with post-it notes to write down their feedback. Leading a discussion is preferable, especially when the number of participants is small, since it gives participants the chance to exchange opinions as well, but written feedback can be used when there is not enough time for discussion.

Some questions you could ask participants are the following:

- What did they learn?
- Did they get answers for the questions they had on older LGBTI people?
- Was there anything that surprised them?
- What will they keep from the day?

After participants have shared their thoughts on the activities and the content of the Face-to-Face actions, ask them to fill-in the evaluation questionnaire (see Annex).

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Annex

Evaluation Questionnaire

	Totally disagree	Disagree	Neither agree nor disagree	Agree	Totally Agree
The objectives of the action were met.	1	2	3	4	5
The structure and content was easy to follow.	1	2	3	4	5
The action promoted and facilitated interaction and participation.	1	2	3	4	5
The content covered will be useful for my work/personal life.	1	2	3	4	5
The facilitator had sufficient knowledge on the topic.	1	2	3	4	5
The facilitator had sufficient facilitation skills.	1	2	3	4	5
The time allotted was sufficient.	1	2	3	4	5
The place where the action took place was suitable.	1	2	3	4	5
The place where the action took place was easily accessible.	1	2	3	4	5
Practical issues (equipment, stationery, etc) were sufficiently covered.	1	2	3	4	5
I would suggest to other people to take part in this action.	1	2	3	4	5



www.best4older-lgbti.org

PROJECT PARTNERS:



















Face-to-Face awareness actions

Deliverable 2.5

FACE-TO-FACE AWARENESS ACTIONS:

TEACHERS

Philippos Paganis

KMOP - Social Action and Innovation Center

Athens, 2019

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The Project

The <u>"Best4OlderLGBTI – Best Interest for the Older LGBTI"</u> project intends to fight against discrimination based on age, sexual orientation, gender identity, gender expression and sex characteristics of older people, and to promote the rights of older LGBTI people, through raising awareness of different target groups contributing for a more equal and inclusive society.

The aim of the project is to contribute to the decrease of inequalities and discrimination faced by older LGBTI people when attending public services, as well as health and social care, and to encourage the reporting of cases of discrimination. Furthermore the project aims to create a network of professionals

Main Activities:

- Development of an awareness-raising campaign in 6 EU Member States (Italy, Greece, Ireland, Portugal, Netherlands, Romania) that will include both online and face-to-face actions. The actions will target different groups in society, namely: Health and social professionals; Professionals of public services; Teachers; Employers; General Public; University students.
- Adaptation and development of an innovative face-to-face intervention programme targeting health and social professionals with the aim of mitigating stereotypes and negative attitudes regarding sexuality and gender in old age, including LGBTI;

Expected Results:

- Changes in attitudes and behaviours of professionals and the general public towards older LGBTI people.
- Raise awareness about age discrimination and sexuality of older people, including LGBTI.
- Encouragement of political and social discussion.
- Encouragement of reporting of cases of discrimination.

 Reduced inequalities and discrimination in attendance of public services and health and social care for older LGBTI people.

Partners:

- Anziani e Non Solo (Italy)
- KMOP Social Action and Innovation Center (Greece)
- Age Action Ireland Ltd (Ireland)
- StichtingRoze 50+ (Netherlands)
- CASO50+ Centro de Atendimento e Serviços 050+, Associação (Portugal)
- Fluxphera (Portugal)
- European Association for Social Innovation (Romania)

Associate Partners

- ILGA Europe
- European Network of Social Authorities
- AGE Platform Europe
- IAM Intersectionalities and more

The Best4OlderLGBTI project is implemented with the financial support of the European Union by the Rights, Equality and Citizenship (REC) Programme.

Target group

Teachers and educators, even though they -usually- do not work directly with older people, constitute a very important target group. Their involvement with children, teenagers and young adults makes them a key group in the effort to combat harmful myths and stereotypes on age, sexual orientation, gender identity and expression, sex characteristics, and the intersection of these identities. By giving teachers the tools and information they need to understand the realities of older LGBTI people and the challenges they face, they can be better equipped to transfer this knowledge to their students and cultivate a stance of acceptance, support and openness. Each action will target 6-8 teachers/educators.

Learning Outcomes

The face-to-face awareness actions aim to transfer to participants some key-messages related to sexuality and gender in older age. The main goals of these face-to-face awareness actions are to:

- Familiarise teachers with the main myths and stereotypes against older LGBTI people, and the discrimination they face on different contexts
- Support teachers in identifying and responding to myths, stereotypes and discrimination in their living and working contexts
- Provide them with specific guidelines on how to bring this knowledge to their students

Through the face-to-face awareness actions participants will be able to:

- Understand key LGBTI concepts and issues
- Understand gender identities, sexual orientations and sex characteristics, and make clear distinctions between them
- Identify and avoid stereotypes based on age
- Identify and avoid stereotypes based on Sexual Orientation, Gender Identity and Sex Characteristics (SOGISC)

- Understand the ways in which ageism and anti-LGBTI stereotypes create unique challenges for older LGBTI people
- Respond to such stereotypes and prejudices with true facts
- Inform and discuss issues of age and gender and sexuality with their students

Module

Activity	Estimated Time
Introductions & Presentation of the project	15 minutes
Basic LGBTI terminology	20 minutes
Common myths and stereotypes towards older LGBTI people	40 minutes
Combating stereotypes & Supporting older LGBTI people	35 minutes
Closing & Feedback	10 minutes

Activities

Activity 1: Introductions & Presentation of the project

Estimated time: 15 minutes

Part 1: Introductions (10 minutes)

Welcome participants and introduce yourself (your name, studies, position in the organisation, role on the event, etc.) You can also provide more information about yourself to break the ice and encourage participants to talk about themselves.

Ask participants to briefly (1 minute) introduce themselves (name, studies, profession) and share their expectations from the Face-to-face awareness action.

Part 2: Project Presentation (5 minutes)

After all participants have introduced themselves, briefly present some basic information about the project's key objectives and activities, and your organisation.

You can prepare a presentation with basic information to use if you find it helpful, but make sure to keep it short and stay on time.

Activity 2: Basic LGBTI terminology

Estimated time: 20 minutes

Learning Objectives

The aim of this activity is to make participants familiar with the key concepts and basic LGBTI terminology.

After the end of the activity participants will be able to:

- Describe and understand what sexual orientation, gender identity, gender expression and sex characteristics are, as well as the main LGBTI identities and terms.
- Use appropriate, non-discriminatory terminology when referring to or communicating with LGBTI people.

Prepare a presentation with the following definitions of key concepts, LGBTI identities and other terms related to LGBTI issues. Provide make sure participants understand the different terms and provide clarifications when needed.

Key concepts			
Gender Identity	It refers to a person's inner sense of their gender. It		
	may or may not match with the gender the person was assigned at birth and/or their gender expression		
	(Theofilopoulos & Paganis, 2019).		
Gender Expression	It is the external manifestations of gender, expressed		
	through a person's name, pronouns, clothing,		
	haircut, behaviour, voice or body characteristics. It		
	may "match" with the gender identity of the same		
	person (e.g. A man having a masculine gender		

	expression), but this is not always the case
	(Theofilopoulos & Paganis, 2019).
	Sex characteristics include the primary (such as internal
	and external reproductive organs, chromosomes and
Sex characteristics	hormones), as well as the secondary (such as muscle
	mass, body hair, breast development and other)
	characteristics of sex. (PARADISO, 2019)
	Refers to each person's capacity for profound
	affection, emotional and sexual attraction to, and
Sexual Orientation	intimate and sexual relations with, individuals of a
	different gender or the same gender or more than one
	gender (Theofilopoulos & Paganis, 2019).

LGBTI identities			
Gay	A person that identifies as a man and experiences emotional, romantic and/or sexual attraction to people		
	of the same gender (PARADISO, 2019)		
Lesbian	A person that identifies as a woman and experiences		
	emotional, romantic and/or sexual attraction to people		
	of the same gender (PARADISO, 2019)		
Bisexual	A person that experiences romantic and/or sexual		
	attraction to people of two or more genders. It is often		
	used as an umbrella term to describe various forms of		
	polysexuality ¹ . (PARADISO, 2019)		
Transgender / Trans	It is an umbrella term, which includes those people who		

¹Polysexuality is defined as the attraction towards more than one gender. It can include identities such as bisexual, pansexual and others, whereas monosexuality refers to attraction towards one gender (i.e. heterosexual, gay/lesbian).

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	have a gender identity, which is different to the gender
	assigned at birth. It includes multiple gender identities,
	such as trans man, trans woman, non-binary, agender,
	genderqueer, gender fluid, etc (Theofilopoulos &
	Paganis, 2019).
	Queer is a complex term with multiple interpretations. In
	the past, it was used as derogatory term for gay
	people, but in the 80's it was reclaimed from activists
	and academics as a positive and confrontational self-
	description to challenge social norms around sexuality,
Queer	sexual orientation, gender identity and/or other forms
Queei	of normativity. It is often used by people that do not
	accept the traditional concepts of gender and
	sexuality and do not identify with any of the terms of
	the LGBTI+ acronym, but also as an umbrella term for all
	LGBTI+ people. As a term, it also identifies with certain
	parts of the Queer Theory. (PARADISO, 2019).
	Persons who identify with this term are born with sex
	characteristics that do not belong strictly to male or
	female categories, or that belong to both at the same
	time. This term stands for the spectrum of variations of
Intersex	sex characteristics that naturally occur within the
	human species. It also stands for the acceptance of the
	physical fact that sex is a spectrum and that people
	with variations of sex characteristics other than male or
	female do exist (Theofilopoulos & Paganis, 2019).
	People who experience romantic, sexual or affectional
Pansexual	desire for people of all genders (Theofilopoulos &

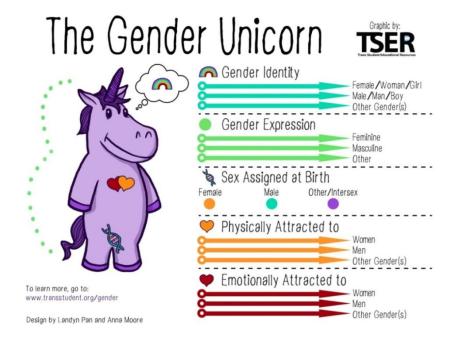
	A person who defines themselves using this term is
	someone who experiences no or very little sexual
	attraction. Each such person experiences things like
Asexual	relationships, attraction, and arousal somewhat
	differently. This term also refers to a spectrum of
	identities of people who experience little or no sexual
	attraction (Theofilopoulos & Paganis, 2019).
	People who do not identify their gender within the
Non-binary	male/female binary but somewhere outside or
	between. Some of them use gender neutral pronouns
	such as they/them (Theofilopoulos &Paganis, 2019). It is
	often used as an umbrella term, in which terms such as
	genderfluid, agender and others are included.

Other terms		
Pinhohia	The fear, unreasonable anger, intolerance or/and	
Biphobia	hatred toward bisexuality and bisexual people (Theofilopoulos & Paganis, 2019).	
	People whose gender identity is the same as the	
Cisgender / Cis	gender they were assigned at birth. It is used as the	
	opposite of transgender/trans.	
	Refers to cultural and social practices where men	
	and women are led to believe that heterosexuality	
Heteronormativity	is the only conceivable sexuality. It implies that	
	heterosexuality is the only way of being "normal"	
	(Theofilopoulos & Paganis, 2019).	
Heterosexual	A person who is attracted to people of a different	

	gender. Often, heterosexuality is described as attraction towards the "opposite" gender, however this approach is based on the view of gender as a binary, erasing the existence of non-binary and interpolaries
	intersex people. The fear, unreasonable anger, intolerance or/and
Homophobia	hatred directed towards homosexuality (Theofilopoulos & Paganis, 2019).
Legal Gender Recognition	It is the official procedure to change a transgender person's name and gender identifier in official registries and documents such as their birth certificate, ID card, passport or driving license. In some countries, it's impossible to have your gender recognized by law (Theofilopoulos & Paganis, 2019).
Transition	It includes some or all of the following personal, medical, and legal steps: telling one's family, friends, and co-workers; using a different name and new pronouns; dressing differently; changing one's name and/or sex on legal documents; hormone therapy; and possibly (though not always) one or more types of surgery (referred to as gender reassignment or gender confirmation surgery). The exact steps involved in transition vary from person to person (Theofilopoulos & Paganis, 2019).
Transphobia	A matrix of cultural and personal beliefs, opinions, attitudes and aggressive behaviours based on prejudice, disgust, fear and/or hatred directed against individuals or groups who do not conform

to, or who transgress societal gender expectations and norms. It particularly affects individuals whose lived gender identity or gender expression differs from the gender role assigned to them at birth (Theofilopoulos & Paganis, 2019).

You could also use The Gender Unicorn graph, by the Trans Student Education Network, which is a very useful tool to familiarise people with different LGBTQI identities and explore the concepts of sexual orientation, gender identity, sex assigned at birth and gender expression.



The graph is available online on TSER's website² in multiple languages. There is also an interactive version that you can use to showcase the way different identities can coexist and/or interact with each other. This visualization can aid participants in understanding new terms and concepts.

²http://www.transstudent.org/gender/

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Activity 3: Common myths and stereotypes towards older LGBTI people

Estimated time: 40 minutes

Learning Outcomes:

Through this activity participants will be able to:

• Identify and avoid myths and stereotypes against older LGBTI people.

• Respond to such myths and stereotypes with true facts.

Part 1: Brainstorming (10 min)

Facilitators will encourage participants to think of common ideas and images of older people, regarding sexuality and gender and share them with the rest of the group. The facilitator will write down on a flipchart all the ideas expressed. Encourage all

participants to take part in this exercise.

Part 2: Presentation and discussion (30 min)

Prepare a presentation with the main myths and stereotypes against LGBTI older people along with facts and evidence to debunk themonce the group has come up with a good number of myths and stereotypes. Evidence may include statistics from surveys on LGBTI issues and older age, scientific facts, as well as stories and testimonies from older people who identify as LGBTI (e.g. through videos) or from your own experience

working with older LGBTI people.

Some examples of common myths that you can include in your presentation are the

following:

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Myth	Facts
"Older people are not interested in forming romantic and/or sexual relationships" / "Older people are not sexually active"	This is a very common misconception towards older people (not only those who are LGBTI). Existing evidence however shows that sexual relationships are a need present throughout the lifespan of people. Changes associated with ageing, health issues and the use of medication may impact the sexual life of older people (Kazer, 2013), but this is not the same as lack of sexual desire. Medication aimed to treat sexual dysfunction can help people of all genders to remain sexually active later in life. As mentioned by the LTCOmbudsman (2015) "one study revealed 61% of people over 60 said their sex life today was the same or better than in their 40s, and 26% of those over 75 remain sexually active".
"Being LGBTI is a new trend. Only younger people identify as LGBTI"	LGBTI identities are not at all new. The fact that LGBTI issues have gained more visibility in the last decades does not mean that LGBTI people have suddenly started to exist; LGBTI people have always existed, but homophobic and transphobic societal attitudes, violence and discrimination, stigmatization, pathologisation and criminalization of non-cis and/or heterosexual people, as well as the lack of legal protections have kept them invisible. According to a survey mentioned by SAGE (2013) in 2010 approximately 1.6 million LGB older

adults lived in the United States. For many people being LGBTI (and especially older) is synonymous of living alone, but this is far from the truth. LGBTI people can form satisfying, long-lasting, loving relationship, though the lack of legal protection for same-sex relationships in many countries may mean that these relationships are not officially recognized by the state. Many LGBTI people also have biological or adopted children: bisexual people may be in different-sex relationships and many lesbian or gay people may have come "Older LGBTI people don't have out later in life, after they have been in different-sex families/partners/children" relationships and/or marriages. (APA, 2012). Also a lot of LGBTI older adults have created "families of choice": social networks consisting of close friends that offer them a sense of belonging, resilience, and support (APA, n.d). However LGBTI people are, according to SAGE (2018), twice as likely to live alone and four times less likely to have children than their cisheterosexual peers, thus increasing the risk of social isolation. This common stereotype may not apply only to older LGBTI people, but it is a widespread misconception about LGBTI people. LGBTI people "You can always tell if someone can express themselves (and their identities), in is LGBTI" many different ways, the same way cis-heterosexual do. person's gender people expression (appearance, clothing or mannerisms, etc) is not

	necessarily an indicator of their identities.
"Older people are not affected by STIs"	This stereotype is based on the preconception that
	older people do not engage in sexual activity or
	that if they do it is always within a long-term
	monogamous relationship. Furthermore, the
2, 6.1.5	progress that has been made on the treatment of
	HIV has resulted in more people reaching into their
	older years (SAGE, 2018)
	There is no specific point in life when people realise
	they are LGBTI. Some may know their sexual
	orientation and/or gender identity from a very
	young age (as children, teenagers or young adults),
	while others may come out in their 30s, 40s, 50s or
	even later in life. Intersex people (especially those
	who have been subjected to sex "normalising"
"All people (know they) are LGBTI	surgeries) may find out later in life or not be aware
from a very young age"	that they were born with an intersex variation.
	Some people may have known that they are LGBTI
	but stayed in the closet for many years, for fear of
	experiencing stigmatisation, violence and
	discrimination, and losing their social support. This is
	especially true for older adults who lived a big part
	of their lives when being LGBTI was considered a mental disorder or criminalised.
	LGBTI identities are no longer classified as mental
"LGBTI people are mentally ill"	health disorders. Homosexuality was first
	depathologised in 1973 when the American
	Psychiatric Association removed it from its
	Diagnostic and Statistical Manual (DSM). On the

17thof May 1990, the General Assembly of the World Health Organization (WHO) decided to remove homosexuality from the International Classification of Diseases (ICD).

Trans identities are also depathologised. In 2018, the World Health Organization (WHO) released the new version of ICD (ICD 11) which removed trans identities from the mental health disorders chapter. All trans-related diagnoses have been removed from the chapter Mental health disorders. A new chapter, named "Conditions related to sexual health", has been added to ICD and it includes a new diagnosis of "Gender incongruence" that replaced the previous "Gender Identity Disorder" diagnosis (Theofilopoulos &Paganis, 2019). The new version of ICD was officially adopted by the General assembly of the WHO in May 2019.

"Older LGBTI people have the same needs and problems that older cis-heterosexual people"

While there are of course issues related to ageing that are common both for LGBTI and cisheterosexual people, there are also significant differences in the way people with an LGBTI identity experience ageing. Anti-LGBT societal attitudes can impose additional barriers for older LGBTI people on issues such as accessing health care services, social support, retirement and finances (APA, 2012). For example LGBTI people may become estranged from their families of origin or their (biological) children, thus limiting their social support. Also women in same-sex relationships may have a

smaller joined income compared to women in different-sex relationships (because of pay gaps between men and women), and experience bigger financial problems, due to the accumulate loss of income (APA, 2012). According to the American Psychological Association (2012) "lack of legal protections may raise problems in medical and financial decision making, couple autonomy in health and end-of-life decisions, access to appropriate health care, parenting rights, health care and retirement benefits, inheritances, living arrangements, and property rights."

Apart from the discrimination they may face on the basis of their sexual orientation, gender identity and/or sex characteristics, older LGBTI people may also face discrimination based on their age, within the LGBTI community (APA, 2012). Having limited access to community support and events, together with the gradual shrinkage of peer social support networks (due to health reasons or death) can leave older LGBTI people with very few or no people to turn to.

These are some of the most common myths regarding sexuality and gender in older age. Partners can include other stereotypes that are relevant to the partners' country context.

Activity 4: Combating stereotypes & supporting older LGBTI people

Estimated time: 35 minutes

Learning Outcomes:

Through this activity participants will explore ways in which they can actively support

older LGBTI people and raise awareness on sexuality, gender and age.

Part 1: Work in groups (15 min)

Divide participants into 2 groups. Give groups 5 minutes to discuss ways in which they

can combat stereotypes and support older LGBTI people through their work as

teachers/educators. Next, give each group 5 minutes to present their ideas.

Part 2: Presentation (20 min)

After both groups have presented their ideas, make a presentation covering good

Include guidelines focusing practices for allyship. on their work as

teachers/educators.

Some examples of guidelines to include in your presentation are the following:

Avoid making assumptions. Someone's gender identity, sexual orientation and/or

sex characteristics is not something you can guess by their appearance.

If you know an older person is LGBTI do not share this information with others

without the person's consent. Some LGBTI people (especially older) are not out

to their friends, family or workplace.

Always use the name and the pronouns they introduce themselves with or ask

you to use. This applies also when you are referring to the period before they

came out. If you're not sure what pronouns you should use, just ask.

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therein.

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- Don't ask trans people about their previous or "true" name. It is a rude and invalidating question; the name they use currently is their true name.
- Always use the language the person uses in order to describe themselves. Some LGBTI people may (rarely) refer to themselves with terms that are considered offensive by the majority of the community (e.g a transgender person may identify themselves as a "cross-dresser" or "transsexual", and a gay man may use terms such "faggot" to refer to himself). Use these terms only if the person you talk with identifies this way.
- Try to raise awareness among friends and family, as well as in public (e.g. through social media) about the stereotypes and prejudices based on age, sexual orientation, gender identity and sex characteristics, and the problems older LGBT people face.
- Try to expand your knowledge on LGBTI issues, and on issues regarding older age. You can do this by searching for relevant educational material and information online, and getting in touch with LGBTI and/or human rights civil society organisations that work on these issues.
- Inform colleagues on the issues affecting older LGBTI people. Share with them relevant educational material and information and encourage them to participate in events and workshops, such as these awareness actions!
- Try to bring issues around sexuality, gender identity and age in your classroom and start a dialogue with students. Discuss the myths and stereotypes about older LGBTI people and the challenges they face.
- Do not consider heterosexuality as the only model.
- Do not allow or use homophobic, biphobic and transphobic language in your work environment.
- Try to use LGBTI-inclusive curricular materials in your classes. There are plenty of LGBTI historical events and positive role models you can use.
- Create a safe environment where students (and their families) feel comfortable.
 You can, for example, use representations of diverse families (such as those

- headed by same sex couples, single-parent families, adoptive families, or stepfamilies) in your classes.
- If possible, try to organise a talk/event in your school on LGBTI issues and older age, open to students, teachers and parents. Invite people from LGBTI and/or human rights civil society organisations, professionals from other fields working with older LGBTI people, as well as older people who are openly LGBTI to talk about their experiences.

The above list of guidelines is not exhaustive. Feel free to add guidelines that are relevant to your country's context.

Activity 5: Closing & Feedback

Estimated time: 10 minutes

After closing the discussion thank again all participants for their presence and

involvement and ask them for their general impression and feedback.

This could be done either as a short informal discussion or you could provide

participants with post-it notes to write down their feedback. Leading a discussion is

preferable, especially when the number of participants is small, since it gives

participants the chance to exchange opinions as well, but giving written feedback can

be used in case there is not enough time for discussion.

Some questions you could ask participants are the following:

What did they learn?

Did they get answers for the questions they had on older LGBTI people?

Was there anything that surprised them?

What will they keep from the day?

After participants have shared their thoughts on the activities and the content of the

Face-to-Face actions, ask them to fill-in the evaluation questionnaire (see Annex).

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Annex

Evaluation Questionnaire

	Neither					
	Totally disagree	Disagree	agree nor disagree	Agree	Totally Agree	
The objectives of the action were met.	1	2	3	4	5	
The structure and content was easy to follow.	1	2	3	4	5	
The action promoted and facilitated interaction and participation.	1	2	3	4	5	
The content covered will be useful for my work/personal life.	1	2	3	4	5	
The facilitator had sufficient knowledge on the topic.	1	2	3	4	5	
The facilitator had sufficient facilitation skills.	1	2	3	4	5	
The time allotted was sufficient.	1	2	3	4	5	
The place where the action took place was suitable.	1	2	3	4	5	
The place where the action took place was easily accessible.	1	2	3	4	5	
Practical issues (equipment, stationery, etc) were sufficiently covered.	1	2	3	4	5	
I would suggest to other people to take part in this action.	1	2	3	4	5	



www.best4older-lgbti.org

PROJECT PARTNERS:



















Face-to-Face awareness actions

Deliverable 2.5

FACE-TO-FACE AWARENESS ACTIONS:

THIRD LEVEL STUDENTS

Philippos Paganis

KMOP – Social Action and Innovation Centre

Athens, 2019

Adapted by:

Billy O'Keeffe

Age Action Ireland

Dublin, 2020

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The Project

The <u>"Best4OlderLGBTI – Best Interest for the Older LGBTI"</u> project was set up to fight against discrimination based on age, sexual orientation, gender identity, gender expression and sexual identity of older people, and to promote the rights of older LGBTI people, through raising awareness of different target groups contributing for a more equal and inclusive society.

The aim of the project is to contribute to a decrease in any inequalities and discrimination faced by older LGBTI people when availing of public services, as well as health and social care, and to encourage the reporting of cases of discrimination. Furthermore, the project aims to create a network of professionals

Main Activities:

- Development of an awareness-raising campaign in 6 EU Member States (Italy, Greece, Ireland, Portugal, Netherlands, Romania) that will include both online and face-to-face actions. The actions will target different groups in society, namely: Health and social care professionals; Public service employees; Teachers; Employers; General Public; University students.
- Adaptation and development of an innovative face-to-face intervention
 programme targeting the above groups with the aim of mitigating stereotypes
 and negative attitudes regarding sexuality and gender in old age, with a focus
 on those identifying as LGBTI

Expected Results:

- A positive change in attitudes and behaviours towards older LGBTI people.
- Raised awareness about age discrimination and sexuality of older people, including LGBTI.
- Encourage political and social discussion.
- Encourage reporting of cases of discrimination.

 Reduced inequalities and discrimination among those utilising public services and health and social care for older LGBTI people.

Partners:

- Anziani e Non Solo (Italy)
- KMOP Social Action and Innovation Centre (Greece)
- Age Action Ireland Ltd (Ireland)
- StichtingRoze 50+ (Netherlands)
- CASO50+ Centro de Atendimento e Serviços 050+, Associação (Portugal)
- Fluxphera (Portugal)
- European Association for Social Innovation (Romania)

Associate Partners

- ILGA Europe
- European Network of Social Authorities
- AGE Platform Europe
- IAM Intersectionalities and more

The Best4OlderLGBTI project is implemented with financial support from the European Union through its the Rights, Equality and Citizenship (REC) Programme.

Target group

As students each of us is continually learning and adapting to new ways to live, study, work and play. Adapting to new concepts, new technologies and being mindful that we are all different is part of life today and forms part of life long learning not just formal education.

Raising awareness and challenging negative stereotypes helps shift society's attitudes towards older LGBTI people. Debunking myths and misconceptions through accurate information on age, sexuality and gender helps create a more open, accepting and supportive environment for older LGBTI people.

These actions will target people of different ages, and from different educational backgrounds.

You may not work directly with older people, but people are living longer, healthier, more active lives that at any time in the past, are growing in number and constitute a very important target group. It's important to remember that we are all ageing.

By giving people tools and information they can come to understand the realities of life for older LGBTI people and the challenges they face. We can be better equipped to transfer this knowledge to our colleagues, families, etc. and cultivate acceptance, support and openness. Each action will target 6-8 people.

Learning Outcomes

The face-to-face awareness actions aim to transfer to participants some key-messages related to sexuality and gender among older people. The main goals of these face-to-face awareness actions are to:

- Become familiar with the myths and stereotypes around older LGBTI people, and the discrimination they can face in different contexts
- Support those working to identify and respond to myths, stereotypes and discrimination in their living and working environment

• Provide specific guidelines on how to bring this knowledge to a wider audience

Through the face-to-face awareness actions participants will be able to:

- Understand key LGBTI concepts and issues
- Understand gender identities, sexual orientation and characteristics, and make clear distinctions between them
- Identify and avoid stereotypes based on age
- Identify and avoid stereotypes based on Sexual Orientation, Gender Identity and Sex Characteristics (SOGISC)
- Understand the ways in which ageism and anti-LGBTI stereotypes create unique challenges for older LGBTI people
- Respond to such stereotypes and prejudices with facts
- Inform and discuss issues of age and gender and sexuality with colleagues

Module

Activity	Estimated Time
Introduction & Presentation of the project	15 minutes
Basic LGBTI terminology	20 minutes
Common myths and stereotypes towards older LGBTI people	40 minutes
Combating stereotypes & supporting older LGBTI people	35 minutes
Closing & Feedback	10 minutes

Activities

Activity 1: Introduction & Presentation of the project

Estimated time: 15 minutes

Part 1: Introduction (10 minutes)

Welcome the participants and introduce yourself (your name, studies, position in the organisation, role on the event, etc.) You can, of course, provide more information about yourself to break the ice and encourage participants to talk about themselves.

Ask participants to briefly (1 minute) introduce themselves (name, studies, profession) and share what they are expecting from the session.

Part 2: Project Presentation (5 minutes)

After all participants have introduced themselves, briefly present some basic information about the project's key objectives and activities, and your own organisations role in the project.

You can prepare a presentation with basic information to use if you find it helpful, but make sure to keep it short and stay within the allotted time.

Activity 2: Basic LGBTI terminology

Estimated time: 20 minutes

Learning Objectives

The aim of this activity is to raise awareness of some key concepts and terminology around LGBTI issues.

After the end of the activity participants will be able to:

- Describe and understand what sexual orientation, gender identity, gender expression and sex characteristics are, as well as the main LGBTI identities and terms.
- Use appropriate, non-discriminatory terminology when referring to or communicating with LGBTI people.

Prepare a presentation around the following key concepts and the terminology related to LGBTI issues. Ensure that the participants understand the different terms and provide any clarification requested.

Key concepts			
Gender Identity	Refers to a person's own sense of their gender		
	identity. It may, or may not, match the gender the		
	person was assigned at birth and/or their gender		
	expression (Theofilopoulos & Paganis, 2019).		
Gender Expression	The external manifestation of gender, expressed		
	through a person's name, pronouns, clothing,		
	haircut, behaviour, voice or body characteristics. It		
	may "match" with the person's gender identity (e.g.		
	a man having a masculine gender expression), but		

	this is not always the case (Theofilopoulos & Paganis,			
	2019).			
	Sex characteristics include the primary (such as internal			
Sex characteristics	and external reproductive organs, chromosomes and			
	hormones), as well as the secondary (such as muscle			
	mass, body hair, breast development and other)			
	characteristics. (PARADISO, 2019)			
	Refers to a person's capacity for affection, emotional			
	and sexual attraction to, intimacy and sexual relations			
Sexual Orientation	with, individuals of a different gender or the same			
	gender or more than one gender (Theofilopoulos &			
	Paganis, 2019).			

LGBTI identities	
Gay	A person that identifies as a man and experiences emotional, romantic and/or sexual attraction to people
Gay	of the same gender (PARADISO, 2019)
	A person that identifies as a woman and experiences
Lesbian	emotional, romantic and/or sexual attraction to people
	of the same gender (PARADISO, 2019)
Bisexual	A person that experiences romantic and/or sexual
	attraction to people of two or more genders. It is often
	used as an umbrella term to describe various forms of
	polysexuality ¹ . (PARADISO, 2019)
Transgender / Trans	This includes people who have a gender identity, which

¹Polysexuality is defined as the attraction towards more than one gender. It can include identities such as bisexual, pansexual and others, whereas being monosexual refers to attraction towards one gender (i.e. heterosexual, gay/lesbian).

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	is different to the gender assigned at birth. It includes		
	multiple gender identities, such as trans man, trans		
	woman, non-binary, agender, genderqueer, gender		
	fluid, etc (Theofilopoulos & Paganis, 2019).		
	Queer is a complex term with multiple interpretations. It		
	is used as derogatory term for gay people, but in the		
	80's it was reclaimed from activists and academics as a		
	positive and confrontational self-description to		
	challenge social norms around sexuality, sexual		
0	orientation, gender identity and/or other forms of		
Queer	normativity. It is often used by people that do not		
	accept the traditional concepts of gender and		
	sexuality and do not identify with any of the terms of		
	the LGBTI+ acronym, but also as an umbrella term for all		
	LGBTI+ people. As a term, it also identifies with certain		
	parts of the Queer Theory. (PARADISO, 2019).		
	Persons who identify with this term are born with sexual		
	characteristics that do not belong strictly to male or		
	female categories, or that belong to both at the same		
	time. This term stands for the spectrum of variations that		
Intersex	naturally occur within the human species. It also stands		
	for the acceptance of the physical fact that sex is a		
	spectrum and that people with variations of sexual		
	characteristics other than male or female do exist		
	(Theofilopoulos & Paganis, 2019).		
	People who experience romantic, sexual or affectional		
Pansexual	desire for people of all genders (Theofilopoulos &		
	Paganis, 2019).		
Asexual	A person who defines themselves using this term is		

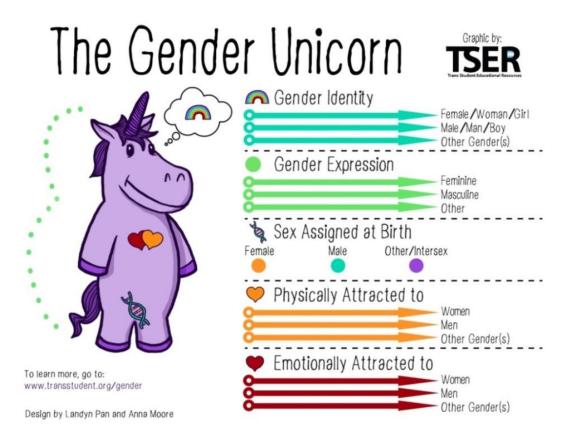
	someone who experiences either none or very little
	sexual attraction. Each person experiences things like
	relationships, attraction, and arousal somewhat
	differently. This term also refers to a spectrum of
	identities of people who experience little or no sexual
	attraction (Theofilopoulos & Paganis, 2019).
	People who do not identify their gender within the
	male/female binary but somewhere outside or
Non hings	between. Some of them use gender neutral pronouns
Non-binary	such as they/them (Theofilopoulos & Paganis, 2019). It is
	often used alongside terms such as genderfluid,
	agender, etc.

Other terms			
	The fear, unreasonable anger, intolerance or/and		
Biphobia	hatred toward bisexual people and bisexuality as a		
	concept (Theofilopoulos & Paganis, 2019).		
Cisgender / Cis	People whose gender identity is the same as the		
	gender they were assigned at birth. It is used as the		
	opposite of transgender/trans.		
	Refers to cultural, and social practices, where		
	people believe that heterosexuality is the only form		
Heteronormativity	of sexuality. It implies that heterosexuality is the only		
	way of being "normal" (Theofilopoulos & Paganis,		
	2019).		
Heterosexual	A person who is attracted to those of a different		
Helelosexoul	gender. Often, heterosexuality is described as		

	attraction towards the "opposite" gender, however			
	this approach is based on the view of gender as binary, erasing the existence of non-binary and			
	intersex people.			
	The fear, unreasonable anger, intolerance or/and			
Homophobia	hatred directed towards homosexuality and those			
nomophobia	who are homosexual. (Theofilopoulos & Paganis,			
	2019).			
	The official procedure to change a transgender			
	person's name and gender identifier in official			
Legal Gender Recognition	registries and documents such as a birth certificate,			
	ID card, passport or driving licence. In some			
	countries, it is not possible to have your gender			
	recognized by law (Theofilopoulos & Paganis, 2019).			
	It includes some or all of the following personal,			
	medical, and legal steps: telling one's family, friends,			
	and co-workers; using a different name and new			
	pronouns; dressing differently; changing one's name			
Tu 111 a	and/or sex on legal documents; hormone therapy;			
Transition	and possibly (though not always) one or more types of			
	surgery (referred to as gender reassignment or gender			
	confirmation surgery). The exact steps involved in			
	transition vary from person to person (Theofilopoulos &			
	Paganis, 2019).			
	A matrix of cultural and personal beliefs, opinions,			
	attitudes and aggressive behaviours based on			
Transphobia	prejudice, disgust, fear and/or hatred directed			
	against individuals or groups who do not conform			
	5 1			

to, or who transgress societal gender expectations and norms. It particularly affects individuals whose lived gender identity or gender expression differs from the gender role assigned to them at birth (Theofilopoulos & Paganis, 2019).

The Gender Unicorn graph, by the Trans Student Education Network, is a useful tool to familiarise people with different LGBTQI identities and explore the concepts of sexual orientation, gender identity, sex assigned at birth and gender expression.



The graph is available online on TSER's website² in multiple languages. There is also an interactive version that you can use to showcase the way different identities can

²http://www.transstudent.org/gender/

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coexist and/or interact with each other. This visualisation can assist in understanding new terms and concepts.

Activity 3: Common myths and stereotypes towards older LGBTI people

Estimated time: 40 minutes

Learning Outcomes:

Through this activity participants will be able to:

- Identify and avoid myths and stereotypes against older LGBTI people.
- Respond to such myths and stereotypes with true facts.

Part 1: Brainstorming (10 min)

Facilitators will encourage participants to think of common ideas and images of older people, regarding sexuality and gender and share them with the rest of the group. The facilitator will write down on a flipchart all the ideas expressed. Encourage all participants to take part in this exercise.

Part 2: Presentation and discussion (30 min)

Prepare a presentation with the main myths and stereotypes against LGBTI older people along with facts and evidence to debunk the monce the group has come up with a good number of myths and stereotypes. Evidence may include statistics from surveys on LGBTI issues and older age, scientific facts, as well as stories and testimonies from older people who identify as LGBTI (e.g. through videos) or from your own experience working with older LGBTI people.

Some examples of common myths that you can include in your presentation are the following:

Myth	Facts
"Older people are not interested in forming romantic and/or sexual relationships" / "Older people are not sexually active"	This is common misconception about older people; not only those who are LGBTI. Existing evidence however shows that sexual relationships are a need present throughout a person's life. Changes associated with ageing, health issues and the use of medication may impact the sexual life of older people (Kazer, 2013), but this is not the same as lack of sexual desire. Medication aimed to treat sexual dysfunction can help people of all genders to remain sexually active later in life. As mentioned by the LTC Ombudsman (2015) "one study revealed 61% of people over 60 said their sex life today was the same or better than in their 40s, and 26% of those over 75 remain sexually active".
"Being LGBTI is a new trend. Only younger people identify as LGBTI"	The fact that LGBTI issues have gained more visibility in the last decades does not mean that LGBTI people have suddenly started to exist; LGBTI people have always existed, but homophobic and transphobic attitudes, violence and discrimination, stigmatisation and criminalisation of non-cis and/or heterosexual people, as well as the lack of legal protections have kept them invisible. According to a survey mentioned by SAGE (2013) in 2010 approximately 1.6 million LGB older adults lived in

	the United States.				
	For many people being LGBTI (and especially older)				
	is synonymous of living alone, but this is far from the				
	truth. LGBTI people form satisfying, long-lasting,				
	loving relationships, though the lack of legal				
	protection for same-sex relationships in many				
	countries means that these relationships are not				
	officially recognized by the state. Many LGBTI				
	people also have biological or adopted children:				
	bisexual people may be in different-sex relationships				
"Older LGBTI people don't have families/partners/children"	and many lesbian or gay people may have come				
	out later in life, after they have been in different-sex				
	relationships and/or marriages. (APA, 2012). Also, a				
	lot of LGBTI older adults have created "families of				
	choice": social networks consisting of close friends				
	that offer them a sense of belonging, resilience, and				
	support (APA, n.d).				
	However, LGBTI people are, according to SAGE				
	(2018), twice as likely to live alone and four times				
	less likely to have children than their cis-				
	heterosexual peers, which increases the risk of social				
	isolation as they age.				
	This common stereotype may not apply only to				
	older LGBTI people, but it is a widespread				
"You can always tell if someone	misconception about LGBTI people. LGBTI people				
is LGBTI"	can express themselves (and their identities), in				
	many different ways, the same way cis-heterosexual				
	people do. A person's gender expression				
	(appearance, clothing or mannerisms, etc) is not				

	necessarily an indicator of their identities.		
"Older people are not affected by STIs"	This stereotype is based on the preconception that		
	older people do not engage in sexual activity or		
	that if they do it is always within a long-term		
	monogamous relationship. Furthermore, the		
by 3113	progress that has been made in the treatment of		
	HIV has resulted in HIV+ people living well into older		
	age (SAGE, 2018)		
	There is no specific point in life when people realise		
	they are LGBTI. Some may know their sexual		
	orientation and/or gender identity from a very		
	young age (as children, teenagers or young adults),		
	while others may come out in their 30s, 40s, 50s or		
	even later in life. Intersex people (especially those		
	who have been subjected to sex "normalising"		
"All people (know they) are LGBTI	surgeries) may find out later in life or not be aware		
from a very young age"	that they were born with an intersex variation.		
	Some people may have known that they are LGBTI		
	but stayed in the closet for many years, for fear of		
	experiencing stigmatisation, violence and		
	discrimination, and losing their social support. This is		
	especially true for older adults who lived a big part		
	of their lives when being LGBTI was considered a		
	mental disorder or criminalised.		
	LGBTI identities are no longer classified as mental		
	health disorders. In 1973 the American Psychiatric		
"LGBTI people are mentally ill"	Association removed homosexuality from its		
	Diagnostic and Statistical Manual (DSM. It wasn't		
	until 17 th of May 1990, that the General Assembly of		

the World Health Organization (WHO) removed homosexuality from the International Classification of Diseases (ICD).

In 2018, the World Health Organization (WHO) released the new version of ICD (ICD 11) which removed trans identities from the mental health disorders chapter. All trans-related diagnoses have been removed from the chapter Mental health disorders. A new chapter, named "Conditions related to sexual health", has been added to ICD and it includes a new diagnosis of "Gender incongruence" that replaced the previous "Gender Identity Disorder" diagnosis (Theofilopoulos & Paganis, 2019). The new version of ICD was officially adopted by the General Assembly of the WHO in May 2019.

"Older LGBTI people have the same needs and problems that older cis-heterosexual people"

While there are of course issues related to ageing that are common both for LGBTI and cisheterosexual people, there are also significant differences in the way people with an LGBTI identity experience ageing. Anti-LGBT societal attitudes can impose additional barriers for older LGBTI people on issues such as accessing health care services, social support, retirement and finances (APA, 2012). For example, LGBTI people may become estranged from their families of origin or their (biological) children, thus limiting their social support. Also, women in same-sex relationships may have a smaller joined income compared to women in

different-sex relationships (because of pay gaps between men and women), and experience bigger financial problems, due to the accumulated loss of income (APA, 2012). According to the American Psychological Association (2012) "lack of legal protections may raise problems in medical and financial decision making, couple autonomy in health and end-of-life decisions, access to appropriate health care, parenting rights, health care and retirement benefits, inheritances, living arrangements, and property rights." Apart from the discrimination they may face on the basis of their sexual orientation, gender identity and/or sex characteristics, older LGBTI people may also face discrimination based on their age, within the LGBTI community (APA, 2012). Having limited access to community support and events, together with the gradual shrinkage of peer social support networks (due to health reasons or death) can leave older LGBTI people with very few or no people to turn to.

These are some of the most common myths regarding sexuality and gender in older age. Partners can include other stereotypes that are relevant to the partners' country context.

Activity 4: Combating stereotypes & supporting older LGBTI people

Estimated time: 35 minutes

Learning Outcomes:

Through this activity participants will explore ways in which they can actively support older LGBTI people and raise awareness on sexuality, gender and age.

Part 1: Work in groups (15 min)

Divide participants into 2 groups. Give groups 5 minutes to discuss ways in which they can combat stereotypes and support older LGBTI people through their work. Next, give each group 5 minutes to present their ideas.

Part 2: Presentation (20 min)

After both groups have presented their ideas, make a presentation covering good practices for being an ally. Include guidelines focusing on your area of work.

Some examples of guidelines to include in your presentation are the following:

- Avoid making assumptions. Someone's gender identity, sexual orientation and/or sex characteristics is not something you can guess by their appearance.
- If you know an older person is LGBTI do not share this information with others without the person's consent. Some LGBTI people (especially older) are not out to their friends, family or workplace.
- Always use the name and the pronouns they introduce themselves with or ask
 you to use. This applies also when you are referring to the period before they
 came out. If you're not sure what pronouns you should use, just ask.

- Don't ask trans people about their previous or "true" name. It is a rude and invalidating question; the name they use currently is their true name.
- Always use the language the person uses in order to describe themselves. Some LGBTI people may (rarely) refer to themselves with terms that are considered offensive by the majority of the community (e.g. a transgender person may identify themselves as a "cross-dresser" or "transsexual", and a gay man may use terms such "faggot" to refer to himself). Use these terms only if the person you talk with identifies this way.
- Try to raise awareness among friends and family, as well as in public (e.g. through social media) about the stereotypes and prejudices based on age, sexual orientation, gender identity and sex characteristics, and the problems older LGBT people face.
- Try to expand your knowledge on LGBTI issues, and on issues regarding older age. You can do this by searching for relevant educational material and information online and getting in touch with LGBTI and/or human rights civil society organisations that work on these issues.
- Discuss with your classmates the issues affecting older LGBTI people. Share with them relevant educational material and information and encourage them to participate in events and workshops, such as these awareness actions!
- Report incidents of homophobic, biphobic and transphobic discrimination
 and/or violence to your university's relevant office. If your university doesn't have
 an office for reporting incidents of discrimination and violence, or the existing
 office doesn't cover anti-LGBTI incidents, organise with other classmates and
 bring up the issue to the administration.
- Challenge homophobic, biphobic and transphobic language an stereotypes expressed in your university/classes
- If possible, try to organise a talk/event in your university on LGBTI issues and old age, for students and faculty members. Invite people from LGBTI and/or human rights civil society organisations, professionals from other fields working with older

LGBTI people, as well as older people who are openly LGBTI to talk about their experiences.

 Get in touch with local LGBTI groups/organisations and ask them for informational material that you can share within your university (e.g posters, flyers).

The above list of guidelines is not exhaustive. Feel free to add guidelines that are relevant to your country's context.

Activity 5: Closing & Feedback

Estimated time: 10 minutes

After closing the discussion thank again all participants for their presence and involvement and ask them for their general impression and feedback.

This could be done either as a short informal discussion or you could provide participants with post-it notes to write down their feedback. Leading a discussion is preferable, especially when the number of participants is small, since it gives participants the chance to exchange opinions as well but giving written feedback can be used in case there is not enough time for discussion.

Some questions you could ask participants are the following:

- What did they learn?
- Did they get answers for the questions they had on older LGBTI people?
- Was there anything that surprised them?
- What will they keep from the day?

After participants have shared their thoughts on the activities and the content of the Face-to-Face actions, ask them to fill-in the evaluation questionnaire (see Annex).

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Annex

Evaluation Questionnaire

	Totally disagree	Disagree	Neither agree nor disagree	Agree	Totally Agree
The objectives of the action were met.	1	2	3	4	5
The structure and content was easy to follow.	1	2	3	4	5
The action promoted and facilitated interaction and participation.	1	2	3	4	5
The content covered will be useful for my work/personal life.	1	2	3	4	5
The facilitator was knowledgeable about the topic.	1	2	3	4	5
The facilitator had good facilitation skills.	1	2	3	4	5
The time allotted was sufficient.	1	2	3	4	5
The place where the action took place was suitable.	1	2	3	4	5
The place where the action took place was easily accessible.	1	2	3	4	5
Practical issues (equipment, stationery, etc) were sufficiently covered.	1	2	3	4	5
I would suggest to other people to take part in this action.	1	2	3	4	5



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PROJECT PARTNERS:













