The Rainbow Makers

Cultural safety and older LGBTI Australians

Dr Catherine Barrett
and Malloy

August 2018

LGBTI National LGBTI Health Alliance

SILVER RAINBOW

Foreword

This narrative resource traces the journey of Malloy, an older lesbian, as she navigates her way through an experience of discrimination by an aged care service provider. It highlights the importance of culturally safe aged care services and the power of aged care service providers to make a difference to the lives of lesbian, gay, bisexual, trans and gender diverse and intersex (LGBTI) elders and older people.

We first met Malloy at our 2018 Health in Difference Conference where Malloy shared her story at a panel brought together by Dr Catherine Barrett, Director of Alice's Garage. Malloy's insights were powerful. She described the impacts of discrimination on her and how the discrimination opened an old wound created by years of attempted 'conversion' therapy in her twenties.

Following Malloy's panel presentation, we took a photograph of Malloy surrounded by Conference delegates as a reminder to Malloy that she is loved and supported. The photograph was so powerful we asked Malloy's permission to use it to produce a LGBTI inclusivity poster for aged care services (see back cover).

This resource traces the important person story of one older lesbian. However, we also want to acknowledge that Malloy's story may have similarities with and differences from the stories of other lesbian elders and older people and other gay, bisexual, trans and gender diverse and intersex elders and older people.

We are grateful to Malloy for sharing her experiences with such generosity. We would also like to congratulate the authors of this resource and thank them for their support for Malloy.

The National LGBTI Health Alliance is proud to sponsor and support this resource. It is a great opportunity for individuals and organisations to share their stories, and to show case the impacts of culturally safe and inclusive services.

Samantha Edmonds

Silver Rainbow – National Project Manager

National LGBTI Health Alliance

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Acknowledgements

We would like to thank Maria Pallotta-Chiarolli and Marilyn for their feedback on this resource – and for the wonderful support they have provided to Malloy. We would also like to thank Caroline from Acceptance for her support and Kaye Bradshaw for assisting in identifying LGBTI community networks.

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We recognise that the acronym LGBTI does not include everyone as there are identities and ways that people that describe themselves not included in this acronym. This resource is for all people of diverse sexualities, genders, bodies and relationships.

We acknowledge the traditional custodians of country throughout Australia and celebrate their continuing connection to land, waters and community. We give our respects to Aboriginal and Torres Strait Islander peoples, their cultures and to Elders both past and present.

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Section 1: Introduction

"I was isolated for a long time. But since the discrimination, doors have been opening up for me — and I mean the right doors! The right doors have opened up and put me in contact with people who are caring towards me. When I was discriminated against I met people who were caring and they gave me the support I needed. They made a Rainbow for me. Everything's on the improve and I'm not going back to how I was before. I'm quite proud now to be who I am. I'm an older lesbian and I'm trying to stand on my own two feet — I'm doing that now and I know that I've got the back up."

Malloy

My first contact with Malloy was through a phone call. I was given her number by a mutual friend, Maria Pallotta-Chiarolli, who told me that Malloy was an 82-year-old lesbian family friend living in Adelaide. Maria also told me Malloy had experienced much grief at the loss of her partner, Natalie, and sadness and stress related to her challenging her church parish over its homophobia towards her. Malloy and Maria had an 18-month battle with her parish that had involved going through official complaints procedures to the Archdiocese authorities and distressing discussions with church officials.

Maria was hoping I could step in to provide supportive LGBTI communities and services, as she feared Malloy's passion for living and community-belonging was fading. I thought Malloy might want to contribute to Alice's Garage, a project I coordinate. My early impressions of Malloy were of a woman who was intelligent, witty, passionate and direct. During our first phone call, Malloy told me she wanted to reconnect with LGBTI communities and share her story.

Over many phone calls and an interstate meeting, Malloy shared her story with me. She told me about the rejection by her family and years of attempted 'conversion' therapies. She told me she had been a pioneer in establishing the Catholic LGBTI group called 'Acceptance'. We made a series of audio recordings of her story that were transcribed and set aside while we discussed how best to share her story.

Several months after our first contact, I received a very distressed call from Malloy. During the call Malloy recounted an episode of sexuality related discrimination by an aged care service provider. Malloy was tearful and distraught. She talked about how her world had been turned upside down and how the discrimination had opened old wounds.

I rang Malloy daily for the next week to provide her with support and to explore the options for responding to the discrimination she experienced. I assured her we would work through the issues together. I also reassured her that she was a wonderful person and that her lesbian identity was something to be proud of.

I contacted several aged care advocacy services – and, while these options were being explored, I also talked to Malloy about connecting with LGBTI community members in South Australia. I was concerned that Malloy felt very alone. I called many of my contacts and put a message out on the Alice's Garage Facebook, asking for LGBTI community members to rally behind an elder who had experienced discrimination by an aged care service.

One of the first people I contacted was Robyn Burton, Diversity Project Manager ECH, who had visited Malloy with me a month earlier. The other contact was Desmond Ford from Council on the Ageing, South Australia, who was coordinating an LGBTI Ageing Project. Both Robyn and Desmond contacted Malloy immediately to offer their support – and then reconnected Malloy with local LGBTI community members. I also contacted Louise Herft, an advocate from the Aged Rights Advocacy Service (ARAS) in Adelaide. Louise agreed to meet with Malloy to discuss what had occurred and then later advocated for Malloy's issues to be resolved by the aged care service.

With the support of LGBTI members and an effective advocate in her corner – the discriminations were addressed, and Malloy's life was transformed.

We made a rainbow

In conversations about what occurred we recognised the power of people coming together to 'make a rainbow' for LGBTI elders and older people experiencing discrimination or abuse. We called ourselves Rainbow Makers. Rainbows are symbols of hope in many LGBTI communities – and, in this context, making a Rainbow was about restoring cultural safety. In many ways Malloy had a history of creating her own rainbows though activism, resistance and resilience, including as an LGBTI elder. But grief, fatigue, illness and the need to confront two major issues of sexuality related discriminations meant her rainbow, or hope, was fading.

We also recognised an opportunity to document a resource that included Malloy's experiences and the supports we provided. We wanted to do this to help service providers understand the impact that discrimination can have on LGBTI elders and older people, the importance of cultural safety and their role in support and advocacy. We also wanted to send a message to other LGBTI elders and older people that there are services and supports available to assist them.

Our recognition of the power of this resource grew and Malloy was supportive of co-leading the project and of including her historical experiences that we had previously documented. As we developed the resource we began to have conversations about cultural safety – a critically important concept in LGBTI inclusive aged care services that is poorly understood. We recognised that the principles of promoting cultural safety for Malloy could provide learnings for working with other LGBTI elders and older people.

We hope this resource will assist aged care service providers to better understand how they can advocate for and support LGBTI elders. We also hope it will build confidence amongst LGBTI elders and their allies that there are service providers out there who are willing and able to help.

Catherine Barrett
Director, Alice's Garage
Part of the Celebrate Ageing Program

Section 2: Malloy's story

I started to realise I might be a lesbian when I was 12, or even a bit younger. My first lesbian experience was when I was 18. None of my girlfriends treated me terribly well. They all left in the end and went off and got married or did other things. Broke my heart, usual story.

My mother caught me with one of my girlfriends in my bedroom. My mother tried to bash her up and me, which was awful. My father slung insults at me for years and years and years. And so, it started with my family. My sister and my two brothers didn't seem to be able to cope with the fact that gay people are around for life. Well, they just don't want to deal with it. So, I gave them away.

Then I had a breakdown. It was over my girlfriend, who left me. I was working in the telephone exchange and I lost my job because I had a breakdown and was so insecure and not attending work when I should have been.

I called one of the supervisors at the telephone exchange Aunty Thelma. She was an older, very devout Catholic woman who took pity on me, and invited me to come and live with her. So, I packed up, left my flat and went to live with her. I allowed her to take me over. She became a mother figure and she told me a lot about the church. I'd only become a Catholic about six years before. Then she decided that I needed to go to a home for wayward children. I balked at that and said, "No way." And then she said, "Well, what about going and seeing a psychiatrist at the Hillcrest?" I thought, "Okay." Hillcrest was a psychiatric hospital.

I went into Hillcrest as a voluntary inpatient, and the psychiatrist had all these weird religious ideas and said to me that if I ever went back to practising being a lesbian again, "God wouldn't love you." I became an inpatient for three months, and then an outpatient for six years. He tried electroconvulsive therapy, LSD and anything he could get his hands on that he thought might turn me straight.

He tried a treatment where you'd look at a picture and you might get a prick in the finger. You look at a picture of a boy and you don't get a prick – and then you look at a picture of a girl and you get a prick. It was ridiculous. Can you imagine how ridiculous that is? Anyway, I had that a few times. It didn't do a thing for me. It didn't make me straight.

I would also go to psychotherapy on a weekly basis, and then they tried LSD therapy. They would give me an injection and I'd have to stay overnight. I don't think it had any effect on me – the only thing I can tell you that happened is that everything looked a different colour. Everything was blueish, reddish, and my hands looked red and blue. That would wear off overnight and the next morning I'd go home. But I've got no idea what we talked about under LSD. I can't remember now. I had about eight of those.

In the meantime, I couldn't work anymore. They put me on a pension. I used to go out and do housework to support myself, and then, later in life, I did a lot of other cleaning jobs.

I met a lovely social worker called Marilyn, who was trying to pull me away from all the conversion therapy. She wanted me to accept myself. I'm still friends with her today. I ring her up regularly. I've known her for more than 50 years.

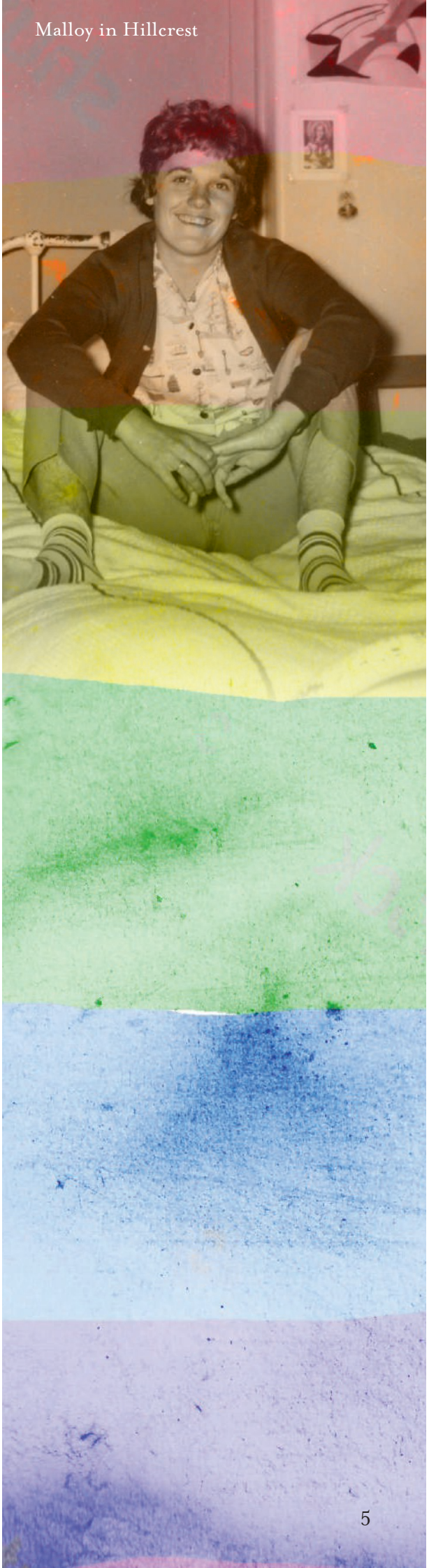
Then I went to see a woman in the Catholic diocese. She wasn't a Catholic herself, and she started me thinking about accepting me for who I was. Then I met a Mercy nun who suggested I go out and find myself a girlfriend. It was through her that I finally one day said, "I'm not scared of being who I am anymore."

Then I got to the stage where I was brave enough to tell the psychiatrist I didn't want to see him anymore. This social worker, Marilyn, put me on to another psychiatrist, and his attitude was totally different. He wanted me to accept myself for who I was.

Then I used alcohol to help me get through. But after a while I decided I needed to go to AA. So, I went to AA for about three years. I never thought I was an alcoholic. I used alcohol more than I should. I've modified that now.

My faith in God was always there – it helped me to get through. When I became a Catholic, in 1954, I was in a relationship with a woman. I struggled with the attitudes of the Church to gay people. To be a Catholic and to be gay is awful. Most end up giving the church away – because if you're in a sexual relationship with someone and you're a Catholic, that is regarded as a sin and you can't go to Holy Communion. Going to Holy Communion to receive the Eucharist, or the body of Christ, is the centre of Catholic faith. I stayed with the Church because I wanted to and because I needed to. But I had a lot of discrimination from people when they knew I was a lesbian.

He tried electroconvulsive therapy, LSD and anything he could get his hands on that he thought might turn me straight.



Malloy in Hillcrest

Malloy holding a photo of herself as a child

Then I joined and help establish a group called Acceptance. It's a group to support LGBTI Catholics and we used to meet once a month. I felt that my relationship was with God, not necessarily with the teachings. My faith in God is still very strong.

It took me a long time to move away from Aunty Thelma and get a flat of my own. That needed to happen because she was running my life. I knew it and so did everybody else. But she was very good to me. She cared for me. I felt safe with her. But I left and then I started to live again.

I met my partner Natalie in the 1990s. I met her through the Gay and Lesbian Counselling Service and she came to a Lesbian Line Christmas party. I wasn't interested in a relationship with her at first, but we formed a friendship and we used to go to LGBTI community events together. She needed someone, and I needed someone. We were together for 22 years. Our relationship was a bit stormy, and she wasn't a great communicator or very demonstrative, but she was extremely generous. After we got together she wasn't terribly interested in mixing with the LGBTI community. We had a wonderful time travelling around Australia together. She died of complications from her diabetes.

For the last three years I have been volunteering, visiting residents in a nursing home. I visit up to six residents a day. I do that four days a week. I do this for God. Because a lot of them are lonely and don't have people to visit them. I love older people, I seem to relate quite well to them. The residents there are always so happy to see me. I love doing this.

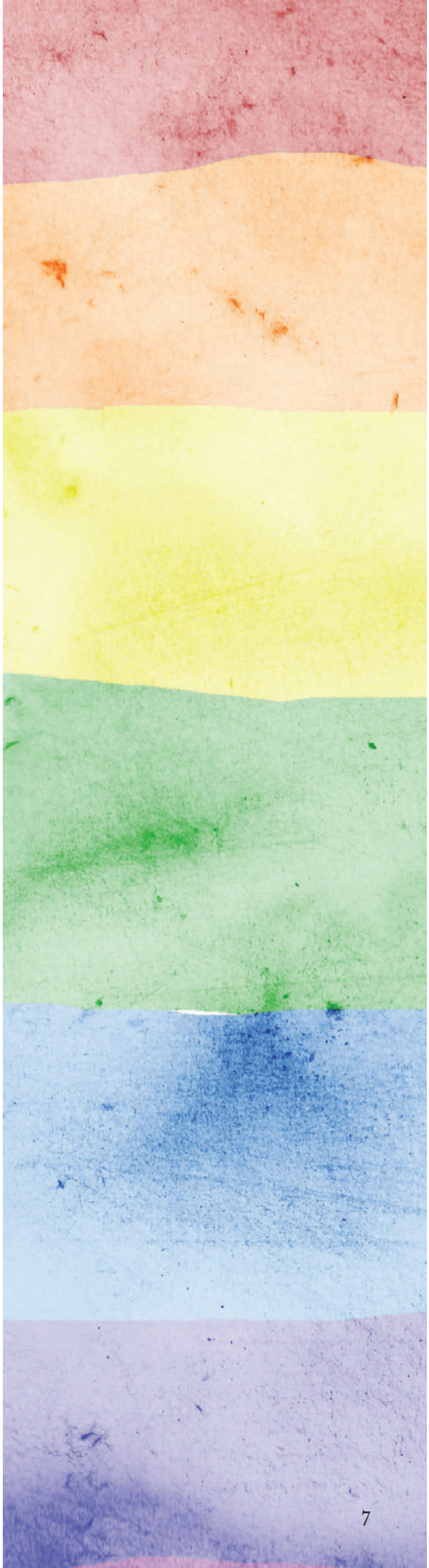
Am I happy with my life? No. No, I'm not. It's just one long big struggle, but I just keep going.

Am I happy with my life? No. No, I'm not. It's just one long big struggle, but I just keep going.

Recently I was discriminated against by an aged care service provider. I thought to myself: here we go again. I've had this happen to me a lot over the years. Just before the discrimination by the aged care service provider, I'd experienced discrimination in my Parish. I got the strength to work with Maria to challenge that right up to the Church authorities. And we won!

When the discrimination by the aged care service provider happened I felt rejection, which I don't cope well with. I've had the issue of rejection all my life. Complete rejection. I thought: here we go again! I felt I was being rejected again and I lost hope and the will to keep fighting. I felt I was being put down and I wasn't good enough. I felt angry and it opened up a lot of wounds from the past. It also made me sick. I got gastritis within two days and I saw the doctor and he said to me, 'How do you think you've got gastritis?' and I said, 'I don't want to discuss it'. I wasn't eating very well, I wasn't enjoying my food and I felt a little bloated. He gave me the usual medication you get for gastritis and it took about three weeks to have an effect. My blood sugar went sky high for days.

It was almost like I was back in the old days, but with the extra vulnerability and loneliness of grieving a partner – and being isolated from my LGBTI community.



Section 3: A rainbow in the making

In this part of the resource, four service providers share their responses to Malloy's story and their actions to 'make a rainbow'. We start this with each service provider sharing their account of what occurred and then Malloy shares her reflections on what she experienced, maintaining the focus on her journey.

ECH

Written by Robyn Burton, Diversity Project Manager ECH

ECH is one of South Australia's largest aged care providers, an enterprise that celebrates diversity and enables people to have the best life possible as they age. ECH recognises that a central element to the notion of 'best life possible' is the acknowledgement and respect of each person's diversity, culture, individual worldview and life story. ECH is proud to be the first aged care provider in South Australia to attain Rainbow Tick accreditation and the first mainstream aged care provider in South Australia to deliver a tailored service specifically for older people from LGBTI communities.

As the ECH Diversity Project Manager, I first heard about Malloy through Catherine Barrett, who advised me that there was an older lesbian who was socially isolated and wanted to reconnect with the lesbian community in Adelaide. Catherine and I first met Malloy in her home, where she told us a little about her history and her desire to reconnect with the LGBTI community following the death of her partner.

I received a phone call from Malloy, during which she told me about the discrimination she experienced and that she felt alone. I sent Malloy an email following our conversation, telling her, "You're not alone in this. You have friends to help you".

Over the next few months, ECH supported Malloy to become reacquainted with the LGBTI community, assisting her to attend her first ever Pride March and joining with other LGBTI community members following the Pride March for a dinner hosted by ECH. At this dinner, the Chief Executive of ECH heard Malloy's story and was concerned about her ongoing wellbeing. A visit by one of the ECH Retirement Living Consultants was arranged to give her options to move into an ECH unit.

Although Malloy didn't take up the option of alternate accommodation, ECH was proud to support and advocate for Malloy through the experience of discrimination and continue our support through our LGBTI social events.

W: www.ech.asn.au | P: 1300 275 324

Malloy responds to Robyn Burton

Robyn has helped me a great deal. It's good to have her on my side. She did try to encourage me to move from here. I wouldn't. She arranged for two people to contact me, one woman who's with the ECH rental accommodation people and the others with the buy-in accommodation. I went to have a look at them, but at this stage I want to stay here. It's good to know that Robyn will help me if I need to move from here.

One of the things that Robyn said to me which I felt very pleased with, she said, 'You're not alone.' She also said, 'We are here to help you'. I thought that was lovely of her and then she went on to say that I could contact her again if I needed support.

I was with Robyn and ECH at Pride March. It was all very nice. I went in the ECH car in Pride March. Robyn arranged for those that felt the walk might be a bit much, to go by car. Well it's the first time I've been in the Pride March. Afterwards, about 20 ECH staff went to dinner and we were all giggling about the ways the people at the restaurant were looking at us.

They ECH staff were lovely and they were asking me what had gone on. I don't know how they knew, but they must have known. They seemed genuinely concerned

ECH have now got an LGBTI support group going. I went with about 15 of the group to a Museum recently. There were lots of gay men – I get on quite well with gay men, so that was good. We are going to the Zoo next time. I'll keep going with them, I'm enjoying it.

I have been feeling a bit isolated. I felt isolated from LGBTI communities. When I was discriminated against I felt lonely. I felt shocked.

I felt okay about my sexuality for years. I did a lot of work on my sexuality for 25 years. I blossomed from a little girlie with so much hurt and pain. But when any little thing comes up I feel hurt and rejected. It takes me back to the pain and the hurt from way back, and I must rebuild again. The reconnecting with LGBTI communities that ECH has made happen, has given me an outing and people to talk to. It's nice being with My Own People. It has helped heal the hurt.

Council on the Ageing, South Australia

Written by Desmond Ford, Head – Programs and Business Development

COTA SA is the peak body for South Australians aged 50 and over. The organisation has a significant role in advocating with and for older South Australians on a range of issues. In 2017 COTA SA, in partnership with the South Australian Rainbow Advocacy Alliance, (SARAA) started the 'LGBTIQ People Ageing Well Project'. Since commencing in March 2017, the project has been engaging with older LGBTI people across SA to understand the things that matter most to them as they age. In early 2018 the Project held an Action Planning Day for older LGBTI people to prioritise and plan an ongoing user movement for older LGBTI people, linked with both COTA SA and SARAA.

My first contact with Malloy was via a phone call about information on becoming a volunteer in a role similar to a peer counsellor. It was hoped that QLife might be an option, however that didn't eventuate. The next time I had contact with Malloy was after Catherine Barrett put out a request to provide support to Malloy. I contacted Malloy and we arranged to meet and have a conversation about what was happening for her at the time and to see how the project might assist. The difficulties Malloy was experiencing made her need to reconnect with other LGBTI people quite urgent. I was able to link Malloy into several events. In that way, we were able to support her – and her insights have been useful and important for us in understanding the lives of older LGBTI people.

The project also organised a couple of social gatherings, including a High Tea in December 2017. Malloy was one of about 80 older LGBTI people who enjoyed an afternoon of socialising. Malloy met folk she hadn't seen in up to 30 years. The event really highlighted the importance of social gatherings for older LGBTI people and how such gatherings need to be offered in a place and at a time where people can feel safe and welcomed. During the conversations over the course of the project, many older LGBTI people talked about their concerns for themselves and others – as to how easy it was to become disconnected and isolated.

I have also seen Malloy at a couple of other gatherings and checked in with her, from time to time, about how things are going for her. The organisation is committed to a range of strategies, in partnership with SARAA, to address the concerns of older LGBTI South Australians. One of the most significant issues is to ensure older LGBTI people, like Malloy, have opportunities to stay connected and to ensure their rights are protected. People aged 50 and over in SA are a diverse group, in every way possible. COTA SA recognises the importance of connecting with and listening to people from a range of communities, including LGBTI people. Older LGBTI people matter to COTA SA. Malloy's story matters to COTA SA.

P: (08) 8232 0422 | W: www.cotasa.org.au

COTA
For older Australians

Malloy responds to Desmond Ford

When I first decided to make contact into the LGBTI community I was told to contact Desmond Ford who was working for COTA, South Australia on LGBTI Ageing.

I told Desmond about the discrimination that had happened to me and he said he would like to come and see me in my unit and he did. I hadn't met him before; I'd only spoken with him over the phone. He was nice and supportive. He said he knew two other lesbians who he would put me in contact with to see if either would meet me to go out for coffee.

I met him again at Pride March and was invited to High Tea, which was being put on by COTA, South Australia. The High Tea was wonderful. There were at least eighty LGBTI elders there. It was in a beautiful historical house with all these lovely tables set out with all little small sandwiches and cakes and things like that and scones and tea and coffee and water and they had a bar there. I met people I hadn't seen in thirty years.

I met a group of older lesbians. Well, the first thing they did when I got there was invite me onto their table. I felt they're honest. And everybody was kind and caring and wanted to know what I'd been doing with my life. They were caring towards me.

I loved being there. I thoroughly enjoyed it. It was nice. They were friendly. I think I did tell some of them about the discrimination that had happened to me and they were all ears. They were interested. It was nice to think that they cared. It was nice. I do hope they have some more afternoon teas. When I left I wondered, when will we meet again?

I have been to two workshops with Desmond. One of them was about what COTA South Australia was trying to do to get the LGBTI community to have more things going for LGBTI elders. The other one was ECH and COTA which was about accommodation for LGBTI elders and other things. Now people say to me "Hello Malloy." I get addressed by most people because they know who I am – it is very nice, providing they are genuine. I am meeting people out there now and people know who I am – that feels good.

I don't have LGBTI friends yet. I don't have people to ring me and ask how I am going. I am out there more socially – I'm meeting more people. But no friends yet. That could change. I might ask someone to catch up for a coffee – but I don't know them well enough yet. Maybe that will change. Half the time I think this is the way it is meant to be. I spend Christmas alone, Easter alone, birthday alone. That's the way it has been. I want it to change. It's only be three years since Natalie died. I still feel very lonely.

I'm on Desmond's mailing list for more workshops and social outings and I hope that I will meet more people. The social outings bring people into my life. It's heaps better than it was. I am doing more than I ever was. I'm enjoying it. Maybe it's okay that it's not going at a fast pace. I have more social contacts and networks than I had before. It's good. Desmond has brought something lovely into my life. He is a nice fella. I hope it continues.

Aged Rights Advocacy Service, Inc South Australia

Written by Louise Herft, Strategic Projects Manager, Aged Rights Advocacy Service

The Aged Rights Advocacy Service Incorporated (ARAS) was established in 1990 to advance and protect the rights of aged care residents. Twenty-eight years on, it has grown into an organisation that also provides its services to older people using community care services, Aboriginal Elders, those living in retirement villages and people who are experiencing elder abuse. ARAS is one of nine member states and territories of the Older Persons Advocacy Network delivering advocacy services under the National Aged Care Advocacy Program. Today, ARAS is a leader in South Australia's aged care and elder abuse advocacy sector and contributes nationally to improving the system to ensure that the rights and entitlements of older people are upheld.

ARAS provides a confidential and free service to older people, their carers and family representatives. The advocates at ARAS are experienced, skilled and empathic people who work with individuals to assist them to speak up about their concerns relating to their quality of life or quality of care in aged care services. The advocates focus on the particular needs or situations of the individuals they represent and take their side when their rights are not being upheld.

When Catherine Barrett approached me with a request to advocate for Malloy, I immediately agreed to meet with her.

At our meeting, Malloy told me what had been happening to her over several months. She was clearly distressed and felt humiliated, bullied and harassed. Malloy told me about her historical experiences of discrimination and how the current difficulty had raised the old hurt for her. We talked about what she wanted to achieve and the options for achieving that.

Malloy gave me permission to call the aged care service and arrange a meeting with them, Malloy and I, to discuss and resolve these issues. This meeting took place a couple of weeks later and gave Malloy the opportunity to voice her feelings, with the support of an ARAS advocate by her side. The meeting took a couple of hours and it was a difficult meeting for Malloy, but an agreement was reached.

I believe that having the meeting and having access to a professional advocate boosted Malloy's self-confidence in handling the situation. As a result of this experience, Malloy's self-esteem has grown, and she is enjoying new friends and acquaintances in the LGBTI community and through her contact with ECH and COTA SA. I am happy that ARAS had the opportunity to advocate for the rights of this remarkable older person.

P: (08) 82325377 or 1800 372 310 | W: http://www.sa.agedrights.asn.au/

aras

Malloy responds to Louise Herft

Louise works for ARAS. She telephoned me and put me at ease straight away. Then said she would like to meet with me to hear about what was going on.

Louise came to meet me about a week later. I just talked to her about what had happened and how I was feeling unhappy. She was very, very professional and at the same time she was very caring and lovely towards me. Absolutely.

Louise contacted the aged care service to set up a meeting. We met with the service to talk about what happened and what we were going to do. It was really stressful. In the meeting, I felt I was under attack. Having Louise there was great. Louise challenged the service several times about what they were saying. She tried to get the service to see what it was like from my perspective. She told the service that what they were doing was discrimination.

I have felt bullied by the service in the past and I think it will happen again. The best thing that I can do is keep my distance.

Having Louise in my corner was empowering. I didn't feel I was there alone. I felt I was with someone who knew how to handle it all. Louise knew the questions to ask and the points to make. I knew that Louise cared about the way I felt and what was happening to me. I trusted her. She knew my history. She was supportive – she wanted to know my history. She wanted to know what had happened to me recently and in the past.

Louise is very professional. She is spot on. She is wonderful because I know that if anything goes wrong in the future I can pick up the phone and know that she will help me.

Louise said to me afterwards, 'If you have any more problems just ring me'. I said I would. It's great that I wouldn't have to handle a situation like this on my own anymore.

If you ask me would I suggest to other LGBTI people to ring ARAS? Yes, of course. I'd say go for it and ring Louise.

Section 4: Outcomes right doors and rainbows

Malloy describes the outcomes achieved

I'm happy with the way things are now. I'm happy that I've met Catherine, Louise, Robyn and Desmond. I'm happy that we are writing this. I started writing my story 40 years ago and then I stopped. Now you're writing it here with me. For me having my story written is good and sad. It would be nice if the discrimination never happened. But I feel that we should tell our stories – or there will be no history.

I'm happy with the way things are now because I've got places to go to. I've got people to talk to. It has made me feel more confident about myself again. I'm more cared for than I used to be. More loved – whatever that means. Being told I'm loved means a lot to me. I can hardly believe it. I know it's true, but I can hardly believe it. In my past relationships, my partners have told me they loved me, but I don't think they really knew what love was. I don't know a great deal about love. I am discovering what love is. The calls I get help me to feel loved. All I know is that I don't know that I have ever felt that I have been loved that much. In the past my Aunty Thelma said, "You do what I want you to do and I will love you". I had to give up my sexuality to be loved. People who have loved me wanted something from me. That's not what God wants. That's not love.

In this day and age, I still have a family that has disowned me. It shouldn't be that way, but it is. So, I don't have family other than you people.

I'm learning about love now. I'm feeling like a little girl again. I'm feeling like I am loved.

I couldn't believe the amount of phone calls I was getting. It was nice. It was lovely. It was really nice.

I've been so isolated for a long time. But since the discrimination, doors have been opening for me – and I mean the right doors! The right doors have opened and put me in contact with my LGBTI community and services who are caring towards me. When I was discriminated against by the aged care service, I met people who were caring, and they gave me the support I needed. They made a rainbow for me.

Everything's on the improve and I'm not to go back to how I was – I'm quite proud now to be who I am. I'm an older lesbian and I'm trying to again stand on my own two feet – I'm doing that now and I know that I've got the back up.

Section 5: Reflections on cultural safety

In our conversations around the development of this resource, we recognised that what had taken place could be described as promoting cultural safety. We decided to share our insights about cultural safety in the resource, because cultural safety is so important to LGBTI elders and older people – and so poorly understood.

The concept of cultural safety was developed by The Nursing Council of New Zealand[1]. It focuses on: understanding how history impacts on health and wellbeing; understanding power imbalances in the interaction between service providers and clients; and service providers understanding how their values and beliefs impact on the services they deliver. The concept of cultural safety was applied to LGBTI health and wellbeing when it became one of the National Standards for LGBTI inclusive services, and that also forms the basis of Rainbow Tick Accreditation developed by Gay and Lesbian Health Victoria[2]. An understanding of cultural safety is critical to the development of LGBTI inclusive services – but this is not well understood. Very little is also known about what cultural safety means to LGBTI elders and older people.

In addressing these gaps, Crameri, Barrett and others[3] developed a framework to assist aged care service providers to build proactive systems to promote cultural safety for LGBTI elders and older people. The framework notes that to be LGBTI inclusive, an organisation must understand: the historical experiences of LGBTI elders and older people; older LGBTI people's safety needs; and power imbalances between LGBTI clients and aged care service providers. The framework calls for organisational leadership in the development of LGBTI inclusive policies to guide and educate staff.

In discussing Malloy's experiences and our responses, we realised we had gained new insights into cultural safety – both from the perspective of an LGBTI older person and from a position of working through a problem. In response, we have reshaped the framework for cultural safety in aged care. We begin with an understanding of history, then affirming LGBTI identities, rebuilding a sense of place, empowering LGBTI elders and older people and educating service providers. Each of these concepts are explored from Malloy's perspective in the following section.

Understanding the impacts of LGBTI history

As a young woman, Malloy experienced negative responses to her sexuality. She was disowned by family members and endured years of attempted 'conversion' therapy. Her experiences with psychiatric services taught her that health practitioners held power and authority which was difficult to challenge. There were few people that Malloy felt she could trust. Her experience of love was conditional – she felt she was loved on the condition that she renounce her lesbian identity.

1. Nursing Council of New Zealand. Guidelines for cultural safety, the treaty of Waitangi, and Maori health in nursing and midwifery education and practice. Wellington: Nursing Council of New Zealand, 2002

2. Gay and Lesbian Health Victoria. LGBTI inclusive practice. Available from: https://www.glhv.org.au/lgbti-inclusive-practice

3. Crameri, P; Barrett, C; Latham J.R. and Whyte, C (2015). Its more than sex and clothes. Culturally safe services for older lesbian, gay, bisexual, transgender and intersex people. Australasian Journal on Ageing. LGBTI Special Edition. 34(2). Pp. 21-25

These experiences had adverse impacts on Malloy's health and wellbeing. Malloy experienced depression and anxiety, low self-esteem and internalised conflict and lesbophobia. She worked hard in therapy over many years to let go of the belief that her lesbian identity was a sickness, and to reach a place where she could feel proud to be a lesbian.

When Malloy experienced sexuality related discrimination by an aged care service, it triggered many of the negative emotions she felt as a younger woman. She again felt that she was of less value because of her lesbian identity – and that she had no control over the discrimination she was experiencing. The feelings of powerlessness left Malloy emotionally distraught.

One of our first responses to Malloy was to let her know that what happened to her was unlawful and could be challenged. It was also important that we told Malloy that as a lesbian she now has equal rights – the power imbalance has shifted and that we would find a service to advocate for her.

The historical experiences of LGBTI elders and older people vary enormously between communities and individuals. It is important to understand historical policies (federal and state)) and the impacts on each LGBTI person or community – as context for understanding the impacts on individual LGBTI elders and older people. It is also essential to understand the intersection and impact of discrimination on LGBTI older people who have a disability, are Aboriginal and Torres Strait Islander, from culturally and linguistically diverse backgrounds etc

Affirming LGBTI Elders and Older People

The experience of discrimination from an aged care service provider shattered the sense of lesbian pride Malloy had worked so hard to build. Shortly after the discrimination took place Malloy talked about feeling that she was 'nobody.' In response, we reminded her that there is no shame in being a lesbian. She later reported that this helped her make sense of what was happening. We reinforced to her that the onus of responsibility was no longer on her to 'straighten up' as it had been in the past. All the Rainbow Makers affirmed Malloy's lesbian identity, and this had an immediate and positive impact on Malloy's wellbeing.

The affirmation of LGBTI elders' and older peoples' identities, sexualities, genders, relationships and bodies that are shattered by discrimination is an aspect of cultural safety that has not been well explored but must be addressed and taken into consideration in responding to breaches of cultural safety.

Rebuilding a sense of place for LGBTI Elders and Older People

Malloy's historical experiences in her teens and twenties disrupted her sense of place in society. She was disowned by her family. She lost her job. She was no longer part of mainstream society and she was no longer deemed 'sane'. She was dis-placed by those who judged her sexuality.

In the years that followed, Malloy embraced her sexuality and built a new sense of place for herself. She connected with LGBTI friends and community, including her Catholic LGBTI community, who embraced her sexuality. She also met her partner Natalie and their relationship reaffirmed her place in the world. As a woman in her eighties, Malloy also made significant contributions as a volunteer. Through this work she improved the lives of others and knew she was making a difference – she felt connected and she felt she belonged.

These spaces Malloy carved out for herself were destroyed when she experienced discrimination by the aged care service provider.. The discrimination displaced her. She felt lost, disconnected and was no longer sure where she belonged. To address this, we helped to rebuild a sense of place and reinforced this by telling Malloy that she belonged. This message was strengthened through the LGBTI social events she attended.

We need to understand the safe, valuing and respectful worlds that LGBTI elders and older people have created for themselves. We need to understand how these might be shattered in culturally unsafe services and contexts – and how they can be rebuilt. Service providers who build relationships of trust with LGBTI elders and older people will understand how place is experienced and can be built.

Empowering LGBTI Elders and Older People

At times in Malloy's life she felt she had little power and no rights as a lesbian. She creatively found ways to reclaim power – by withdrawing from services or standing up and challenging treatments she was prescribed to 'cure' her lesbian identity.

When Malloy experienced discrimination, her power was again taken away – and she had to reclaim her power yet again. She was unable to do this initially because she was so distressed by what had occurred. However, with the backing of an advocacy service, and the support of LGBTI community members, she was able to regain control of her life.

Malloy recounts that the way Louise from ARAS interacted with her was empowering. Malloy describes how Louise made time to talk, wanted to know about her history, empathised and reassured her that she would assist. Malloy was almost immediately reassured that she had back up and this helped her to feel she could challenge the discrimination she experienced. There was an immediate decrease in Malloy's distress after making connections with Louise.

We need to understand how we can support LGBTI elders and older people to step back into 'the driver's seat' – or to reclaim their power. We can do this by listening to their stories, asking what matters to them, showing empathy and providing information and support…

Educating service providers

Service providers need to understand how their own values and beliefs about LGBTI people can impact on the services they provide. We all have 'culture'. Understanding our cultural values and beliefs in the context of our work can enable us to put aside our own cultural values in order to conform with organisational or governmental guidelines around LGBTI inclusivity. One invaluable tool for achieving this is through listening to LGBTI elders' and older peoples' narratives about their experiences or fears of aged care services. We need to step into the shoes of LGBTI elders and older people to understand what they fear and why. We also need to understand our role in minimising that fear. Malloy's story has been documented to help aged care service providers empathise with the fears of LGBTI elders and older people and build culturally safe services.

Section 6: Becoming a Rainbow Maker

This resource describes the devastating impacts of discrimination by an aged care service provider on one LGBTI older person. It also describes how we responded to the discrimination by making a Rainbow – or a culturally safe space – for the LGBTI older person. While this story relates to an older lesbian, there are lessons here for aged care service providers about being a Rainbow Maker for other L, G, B, T and/or I elders and older people. These lessons include:

1. **Understanding culture: we all have culture**: which includes the values and beliefs that underpin the way we live our lives. Aged care service providers need to understand their own values and beliefs about LGBTI people and the influence these have on the delivery of LGBTI inclusive aged care services.

   Suggested actions: Conduct a regular activity with staff where they reflect on their own culture, attitudes, values and beliefs and how these shape the way they interact with older people. Part of this should include staff sharing their values and beliefs, and any stereotypes they hold, about LGBTI people, and how this can impact on the quality of care given to LGBTI older people.

2. **Understanding history**: each LGBTI person and community has been affected by different forms of institutional discrimination. It important to understand historical treatment of LGBTI elders and older people as a context for understanding the experiences of each LGBTI elder or older person and the impact of these experiences have on their health and wellbeing.

   Suggested actions: Staff education could include inviting local LGBTI Elders and older people to share their experiences – or reading the narratives in the No Need to Straighten Up or My People reports and discussing the impacts of historical experiences of discrimination on health and wellbeing.

3. **Understanding re-traumatisation**: contemporary experiences of discrimination can re-traumatise LGBTI elders and older people who have previously experienced discrimination. It is important to understand that LGBTI elders and older people will respond to new trauma in a range of ways including: anxiety, fear, depression, anger and social withdrawal.

   Suggested actions: Staff education should include an outline of trauma-informed care frameworks. It could also include discussing historical experiences of LGBTI elders and older people and discussing what it might feel like for LGBTI elders and older people to experience discrimination in aged care.

4. **Affirming LGBTI identities, bodies and relationships**: be aware that LGBTIphobia can devalue LGBTI elders' and older peoples' identities, sexualities, genders, bodies and relationships – which may never have been respected. Strategies for LGBTI inclusivity need to affirm all LGBTI identities.

   Suggested actions: Staff can affirm LGBTI sexualities, identities, genders, bodies and relationships by celebrating key LGBTI events, (eg: local Pride festivals), participating in commemorative events (e.g. Transgender Day of Remembrance), affirming stories of LGBTI people in the media and hosting LGBTI presenters. Affirmation also includes acknowledging significant relationships and respecting gender expression in policies and procedures and through inclusive delivery of care.

5. **Rebuilding a sense of place for LGBTI Elders:** understand how LGBTI elders and older people have built culturally safe spaces for themselves – in the safety of their own homes, in intimate relationships and friendships – and how this sense of safety can be consolidated.

   Suggested actions: Service providers need to communicate the work they are doing to be LGBTI inclusive to LGBTI communities and LGBTI elders and older people in particular. Service providers also need to address LGBTIphobic actions and comments when they occur – whether or not there are aware of clients or staff who have disclosed LGBTI status.

6. **Addressing power imbalances:** service providers need to understand that they are in positions of power (and the ways in which power imbalances manifest) and how they can communicate to LGBTI elders and older people that theirs is a culturally safe and respectful service.

   Suggested actions: Staff education could include asking staff to identify the nature of power imbalances eg: going into a clients home/space; holding details of clients personal, financial or health information; client's dependence on the service. Then staff discussion could include ways to address these imbalances – and communicate a message of LGBTI inclusivity.

7. **Demonstrating organisational leadership:** ensure that your commitment to culturally safe, LGBTI inclusive services is explicitly stated and accompanied by staff education. This will assist in ensuring that staff understand the need to deliver services to LGBTI elders and older people in ways that comply with legislative requirements, rather than their own values and beliefs.

   Suggested actions: Organisations need to explicitly state their commitment to LGBTI inclusive services and ensure all staff are aware of their legal responsibilities related to LGBTI clients.

Section 7: Support services for LGBTI Elders & Allies

If you are an LGBTI elder, or the ally of an LGBTI elder, we hope this resource has built confidence that there are service providers out there who are willing to help if you experience difficulty or discrimination. There are advocacy and support services in every state and Territory. We have listed some of the services below.

OPAN

The Older Persons Advocacy Network (OPAN) is a national network comprised of nine state and territory organisations that have been successfully delivering advocacy, information and education services to older people in metropolitan, regional, rural and remote Australia for over 25 years. Phone: 1800 700 600 or web: www.opan.com.au/

Aged care advocacy services

The Federal Government funds aged care advocacy agencies in each state and territory to provide free and confidential aged advocacy services to assist consumers of aged care services and other representatives who are acting on behalf of, or in the interests of, the older person.

These services are:

- **Australian Capital Territory:** ACT Disability, Aged and Carer Advocacy Service (ADACAS).
  P: (02) 6242 5060 | W:www.adacas.org.au
- **New South Wales:** Seniors Rights Service.
  P: 1800 424 079 | W: www.seniorsrightsservice.org.au/
- **Northern Territory:** Seniors & Disability Rights Service of Darwin Community Legal Service.
  P: (08) 8982 1111 | W: www.dcls.org.au
- **Queensland:** Queensland Aged and Disability Advocacy Inc. (QADA).
  P: (07) 3637 6000 | W: www.qada.org.au
- **South Australia:** Aged Rights Advocacy Service Inc. (ARAS).
  P: (08) 8232 5377 | W: www.sa.agedrights.asn.au
- **Tasmania:** Advocacy Tasmanian Inc. P: (03) 6224 2240 | W: www.advocacytasmania.org.au

- **Victoria:** Seniors Rights Victoria is the primary, government-funded destination for older Victorians, their friends and family members seeking information and support relating to elder abuse. Phone: 1300 368 821 | W: www.seniorsrights.org.au
- **Victoria:** Elder Rights Advocacy (ERA). P: 1800 700 600 | W: www.era.asn.au
- **Western Australia:** AdvoCare. P: (08) 9479 7566 | W: www.advocare.org.au

Aged Care Complaints Commissioner

The Aged Care Complaints Commissioner provides a free service for anyone to raise their concerns about the quality of care or services being delivered to people receiving aged care services funded by the Australian Government. You can make a complaint online, over the phone or by post.

P:1800 550 552 | W: https://www.agedcarecomplaints.gov.au/

National LGBTI Health Alliance – Silver Rainbow

The National LGBTI Health Alliance is the national peak health organisation in Australia for organisations and individuals that provide health-related programs, services and research focused on lesbian, gay, bisexual, transgender, and intersex people (LGBTI) and other sexuality, gender, and bodily diverse people and communities.

We recognise that people's genders, bodies, relationships, and sexualities affect their health and wellbeing in every domain of their life.

Silver Rainbow provides national coordination and support activities promoting the well-being of LGBTI elders and the ongoing delivery of the LGBTI awareness training to the aged care sector. Silver Rainbow works collaboratively with the government, aged care providers and related services, LGBTI older people and elders and organisations to create an LGBTI inclusive aged care sector.

Silver Rainbow has a range of resources and information available on our website for aged care providers, professionals, LGBTI older people and carers

W: www.silverrainbow.org.au

National:
https://lgbtihealth.org.au/ageing/
https://lgbtihealth.org.au/hub/#!/resource_categories=ageing-aged-care-resources

YOU ARE WELCOME HERE

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