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The Stonewall Generation: Culturally Competent Homecare to the Rescue



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You're born into a society that condemns you as unnatural and criminal. You spend the first decades of life living in fear of jail, violence and extreme marginalization. But times change dramatically and decades later, 50 years after Stonewall, LGBTQ Americans find themselves living in a world of emerging normalcy, PRIDE, and marriage equality. Yet sadly, too many of the Stonewall Generation—men and women born in in the years before Stonewall—are still living in fear. They are mostly alone and isolated, having been abandoned by their families decades earlier, and having lost most if not all of their peers during the AIDS crisis.

Tragically, the Stonewall Generation still suffers with a health care system that too often discriminates against them and prevents them from receiving

the critical care they need to achieve quality of life and adequate social and medical care and counseling. Too many LGBTQ Americans in the 70s, 80s and 90s are psychologically incapable of dealing with the stress and challenges of coming out; they simply don't feel safe in senior housing, adult day care centers, community centers and even some hospital and clinic settings.

“It takes a long time to build up that trust after living so long having to assume a different identity,” says my colleague Arthur Fitting, a registered nurse for almost 30 years, and the LGBTQ Program Director for the Visiting Nurse Service of New York. “Rather than going through the process of coming out over and over, the older population often withdraws for their own safety. That’s a barrier in terms of reaching out for help, including reaching out to access health care.”

The estimated three million LGBTQ Americans age 55 and older are much more likely than their non-LGBTQ peers to avoid the health care system as they age—which is when they need it most—and to report feeling more isolated and vulnerable, according to SAGE (Services and Advocacy for Gay, Lesbian, Bisexual & Transgender Elders), which provides extensive resources, advocacy and cultural competency training around health care. I’m proud to say that VNSNY, the organization that I lead, is certified at the highest level in SAGECare training across every division of our business.

In home health care, it is our mission to take care of isolated, vulnerable patients, and to assess what they need in order to stay safe and independent in their own homes and on their own terms. Because we work with people in the full context of their lives—not just in clinics or doctors’ offices—we are the perfect workforce to bridge the gap in care and ensure that members of the LGBTQ community have access to the physical, emotional and social

supports they need as they age. In fact, we've been doing this since we began 126 years ago.

As we celebrate a momentous PRIDE Month during this 50th anniversary of Stonewall, I think about the care delivered day in and day out to people of all backgrounds by our visiting nurses, social workers, home health aides, rehabilitation therapists, hospice workers, and myriad others. And I am reminded how far we've come as health care providers in serving the LGBTQ community—as well as how far we still have to go.

I see our culturally compassionate care every day in the small moments, when a patient who is HIV-positive shares her gratitude for a home health aide spreading lotion on her back when others, over the years, would turn away. I see it at the end of life when a hospice nurse pays extra attention to the relationship between a patient and his roommate of 20 years, and eventually, with the couple's enthusiastic approval, brings in a hospice volunteer to frame photographs of the men and decorate the walls. And I see it when an LGBTQ patient notices a rainbow flag pin on his physical therapist's shirt and ventures to share his story, including his loneliness as an elderly gay man living alone. That VNSNY physical therapist, Peter Wu, connected his patient with SAGE—and opened up a new world of community for him.

“Being LGBT isn't something you can see unless someone opens up to you,” says Peter. “By VNSNY being so visible in our support of LGBT individuals, with so many of us wearing the rainbow pin and marching each year in New York City's annual PRIDE March, we show not just that we have a program or two, but that we are deeply involved. We are here for the LGBT community every day, in so many ways.”

I see our culturally compassionate care, too, in life-changing moments, such as when a visiting nurse's support for a patient recovering from gender affirmation surgery includes speaking to the patient's mother about making an effort to use the pronoun "she." "Traveling from one gender to another is a big change, and patients going through it really need to have their feelings supported," says nurse Soraya Gomez, one of more than 250 VNSNY clinicians who have been specially trained in transgender health and gender affirmation post-surgical care.

Knowledge and understanding are vital remedies for fear and discrimination, notes VNSNY nurse Shannon Whittington, who directs our Gender Affirmation Program and writes and speaks frequently on improving quality and access to care for the transgender community. "This population is accustomed to being discriminated against by health care workers," she says. "The clinical aspect of our program's training is obviously very important, but we also really stress the cultural side. One person can change the world, and I believe we've done that here."

Looking Back...

VNSNY was founded in 1893 with the mission of providing care to vulnerable communities by meeting people where they are, literally and figuratively, beginning with poor immigrant families living in the tenements of the Lower East Side. In the late 1970s and early 1980s, when a mysterious illness began claiming the lives of gay men at an alarming rate, our visiting nurses were on the front lines, armed with the mission to care for those in need. They played a leading role during the height of the AIDS epidemic here in New York, not only delivering clinical care but also disseminating information, helping patients navigate stigma and isolation, and creating systems to support vitally important home care for those impacted by the epidemic.

“We’ve always cared for patients whatever condition they might have,” says Marilyn Liota, whose remarkable career as a visiting nurse at VNSNY spanned sixty years, from 1952 to 2012. “In the AIDS epidemic, once we knew what we were dealing with, we used what we’d always used before—universal precautions. A patient is a patient. An illness is an illness.”

In the 1990s, Claudia Paul was a home health aide working with HIV-positive New Yorkers. Although recently developed retroviral medications were transforming their prognosis for the better, Claudia found that many of her clients were so bothered by the new drugs’ side-effects that they stopped taking their pills, putting their health at risk. “If only someone would sit down with the patient for five minutes and explain the benefit of the medications, it would be so helpful,” she says. “And if someone really listened to the patient’s concerns about side-effects, maybe they could find another regimen with fewer side-effects.”

Claudia became that person—an educator, an active listener, a patient advocate. In other words, a visiting nurse. She got her nursing degree, specializing in geriatrics, and is now a hospice nurse with VNSNY Hospice and Palliative Care, bringing compassionate end-of-life care to patients and loved ones of all cultures and communities.

And Moving Forward

We realize there is still a great deal more work to do in order to improve access and delivery of care for the LGBTQ community, especially for LGBTQ seniors and the transgender community, two groups who are especially vulnerable. That’s why VNSNY has provided SAGE training to every one of our employees in cultural issues, sensitivities and best practices around sexual orientation and gender identity. From the front lines to our central offices, we create a welcoming, bias-free and safe space to deliver or facilitate care. We

are also active proponents of the [NYC Health LGBTQ Health Care Bill of Rights](#), and we conduct outreach and educational workshops across the metropolitan area to ensure that members of the Stonewall Generation know they have access to culturally competent care and need no longer fear the stigma and discrimination that may have defined their younger years.

An outward symbol of our commitment is the rainbow flag pin that all our employees are encouraged to wear. [Arthur](#), our LGBTQ Program Director who has been a visiting nurse for more than 30 years, explains the power of a symbol when it's backed by action. "The pin signals that you can speak to us, and we will listen to you," he says. "This is a safe space for you to receive care and, if you choose to, open up and tell your story."

In celebration of [World Pride 2019 and Stonewall 50](#), I'll be marching with tens of thousands of my fellow New Yorkers during New York PRIDE on June 30th, along with Arthur, Shannon, Peter and nearly 300 other VNSNY employees—all of us taking Marilyn Liota's words to heart, as we do with every person we serve: "A patient is a patient." We want the LGBTQ community to know that we're here, we're listening, and we're proud to be caring for you.

LGBTQ

Home Health Care

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Pride

Aging

