CHAPTER SUMMARY

LGBT older adults have commonly experienced a lifetime of minority stress, thus increasing their rates of substance use disorders and other behavioral-health problems. This chapter explores the available research on LGBT elders’ behavioral health, historical and current risk factors, and treatment needs.

OVERVIEW

The older adult population is one of the fastest growing demographics in the United States. There is concern that as the baby boomer population ages there will be a marked increase in the number of older adults needing treatment for substance use concerns because this group historically presents with elevated rates of illicit substance use. Alcohol and prescription misuse are particular concerns. LGBT individuals are similarly expected to carry their earlier substance use patterns into their older adult years; others will develop a substance use problem as an elder after a lifetime of abstinence.

LGBT older adults often experience a culmination of risk factors for poor mental-health outcomes, including substance use. These risk factors include those that are generic for older adults in general and those that are LGBT-specific. However, there are few studies of older adult substance use treatment, and even fewer for LGBT older adults. Many among the latter group fear discrimination and rejection during treatment. Considerations during treatment include a lifetime of minority stress for many clients, inadequate support systems, co-occurring disorders, creating social networks that do not involve clubs and bars, the coming-out process as an older adult, and financial issues.

KEY TERMS

LGBT elder; LGBT older adult; early- and late-onset substance use; older adult alcohol abuse; older adult prescription use and misuse; minority stress; cumulative minority stress; ageism; co-occurring disorders; financial concerns; multiple losses; generic risk factors; LGBT-specific risk factors; family support
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