Equity: A Powerful Force

in the Future of Sexual and Gender Minority Dementia Caregiving

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#DementiaCareSummit

Framing the Research



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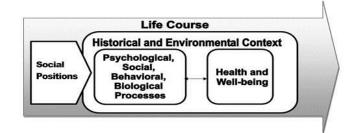
- Increasing diversity in aging
- Prevalence of older sexual and gender minorities
- Distinct risk and protective factors
 (Czaja, S. J., Sabbag, S., Lee, C. C., Schulz, R., Lang, S., Vlahovic, T.,...& Thurston, C., 2016; Fredriksen-Goldsen, K. I., Emlet, C. A., Kim, H.-J., Muraco, A., Erosheva, E. A., Goldsen, J., & Hoy-Ellis, C. P., 2013; Grossman, A. H., Frank, J. A., Graziano, M. J., Narozniak, D. R., Mendelson, G., El Hassan, D., & Patouhas, E. S., 2014)
- Unique systems of support: similarities and differences in care and caregiving

(Croghan, C. F., Moone, R. P., & Olson, A. M., 2014; de Vries, B., & Megathlin, D., 2009; Muraco, A., & Fredriksen-Goldsen, K. I., 2014)

>At-risk, resilient and underserved

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Moving Forward



- Health equity: Identification of mechanisms of risk and resilience and barriers to dementia care
- Context
- Intersectional identities
- Health-promoting and adverse mechanisms
- · Full range of health outcomes

Fredriksen-Goldsen, K. I., & Kim, H.-J. (2017). The science of conducting research with LGBT older adults - An introduction to Aging with Pride: National Health, Aging and Sexuality/Gender Study (NHAS). The Gerontologist 57(S1), S1-S14.

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Research Recommendations



- Ascertainment of sexual orientation and gender identity in dementia research and care
- Assessment of dementia-related disparities among diverse sexual and gender minorities
- Innovations promoting engagement and retention
- Building community infrastructure and support

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Research Recommendations



- Trajectories in dementia and dementia care
- Development and testing of interventions Building on strengths and challenges faced
- Dyadic approach with diverse care partners
- Engage and serve those with no care partner
- Ensuring relevance with population served

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Research Priorities: Interventions



Development and translation of evidence-based interventions in under-served communities

- Highly stigmatized populations
- Use of innovative outreach strategies
- Tailoring interventions to distinct needs Identity management Historical trauma histories Unique supports
- Lessons learned from diverse communities

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