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Sexuality and aging “Growing older out of the closet”: Stigma and LGBT aging

By 2040, Spain will be home to the world’s longest-living people. It currently has the fourth highest life expectancy in the world, 83 years. In addition, if the current trend continues, it is on its way to surpassing Japan, Switzerland and Singapore until reaching the top position in 2040. According to a new survey from the Institute for Health Metrics and Evaluation, published in the *Lancet*, (Foreman et al., 2018), its inhabitants can look forward to the longest life expectancy in the world—an average of 85.8 years by 2040. Spain is one of the European countries that has undergone the most significant societal changes in the 21st century contributing to an aging population, in particular, high life expectancy coupled with low fertility. It is expected that in the year 2049, the population aged 65 and older will be 31.9% of the total population (Abellán & Ayala, 2012; Serrano, Gatz & Latorre, 2014). It is also important to note that the increase of people older than 80 years of age is greater than the remaining population groups (Abellán & Ayala, 2012). Currently, they form 5.3% of the total population. It is calculated that in 2049 this will rise to 11.8%, which will cause greater consumption of health assistance and care in the home, due to the fact that chronic diseases have a greater risk of causing disability and will require greater long-term care.

There is an increasingly crucial need to approach a growing reality, related to the sexuality of the aging LGBT minority, which deserves the greatest attention and respect.

The [United Nations Principles for Older Persons \(1991\)](#) include independence, participation, care, self-sufficiency, and dignity. Building on these principles, 2012 was declared the European Year for Active Aging and Solidarity between Generations, with IMSERSO taking the lead in Spain. Goals included raising public awareness of the valuable contribution that older people make to society and the economy; promoting active aging and intergenerational solidarity; respecting the potential of all older people, regardless of their origin; combatting age discrimination; and overcoming age-related stereotypes. To be able to offer the possibility of complying with these principles and goals, there is a demand for all public institutions, such as the state government, various non-governmental organizations, academic institutions, and the private sector, to tackle the current challenges in order to build a secure future.

For 20 years, I have worked as a psychologist and professor at the Albacete Medical School, and during those 20 years, I have jointly carried out teaching and research activities. My experience has led me to believe that teachers, researchers and all professionals related to the world of health sciences have the responsibility to put our teaching and research knowledge and our clinical practice and care skills at the service of the individuals with whom we interact or work (either as students, patients or participants in our research projects, etc.) following criteria of fairness, equality, dignity, acceptance, respect, and ethical and moral standards.

Sexuality is a fundamental part of human beings and, as professionals and given our responsibility as researchers and teachers, it behoves us to transmit respect for the different realities, manifestations, and diverse forms of expressing this sexuality, as an

inherent part of the aging process. Parallel to the unprecedented growth of the older population, there has been a significant increase in the visibility of LGB people. However, owing to issues of disclosure and stigma, it remains very difficult to know how many older LGBT people there are and their particular needs (de Vries & Croghan, 2014)—especially in an international context. The older gay and bisexual men of today were born and raised in adverse historical and social contexts, where homosexuality was regarded as a mental illness, and persecution and discrimination were sadly common, creating conditions of fear and anticipation of rejection (Haber, 2009). As suggested by minority stress theory (Meyer, 2003), such exposure to stigma and discrimination are risk factors for physical and mental health problems (Lyons & Hosking, 2014; Pereira, Serrano, de Vries, Esgalhado, Afonso & Monteiro, 2017), both at a subjective level (highlighting individual processes of coping with stress and adversity) and at an objective level (highlighting objective properties of the stressors). The clear articulation of such adverse social conditions demands a critical gerontological perspective, creating the need to recognize configurations and spaces, however marginal and minor, such as that of LGBT older people. The identity and the social and physical development of lesbian, gay, bisexual and transgender (LGB) individuals are still restricted by the presence of negative attitudes and the concomitant experience of stigma and discrimination (de Vries, 2015; Rankin, Weber, Blumenfeld, & Frazer, 2010).

Research, through scientific data, must be a reference to guide the teaching activities of all the professionals dedicated to the field of health, whose calling it is to help and improve individuals' lives using the technical and scientific skills acquired over years of education and training. It is for this reason that the training of future professionals should be focused towards revealing the reality and diversity of opinions that exist among human beings, and which should be accepted and respected without the weight of stigma, judgment or prejudice. I would like to acknowledge the long history and dedication in this field of my colleagues Henrique Marques Pereira (Professor at the University of Beira Interior, UBI/Portugal) and Brian de Vries (Professor Emeritus at the University of San Francisco, United States), who helped me to appreciate the importance and the necessity of attempting to continue contributing to this research area.

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