



# GRAI MATTERS

March 2012

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**EDITOR: June Lowe**

**We welcome your contributions to GRAI Matters. Please contact us at:**

GRAI Matters Newsletter  
GRAI PO Box 715  
Mt Lawley, 6929

[info@grai.org.au](mailto:info@grai.org.au) | [www.grai.org.au](http://www.grai.org.au)

## Welcome

The GRAI board has met several times since the beginning of the year. First up was continuing work on the Strategic Plan which will take the organisation forward into the next 5 years. This planning process is still ongoing, however we are already well advanced. Building partnerships and raising the profile of GRAI, including increasing membership, were identified as priority areas to start with in 2012. Part of the strategic planning also involves ensuring the sustainability and good governance of the Board, with attention to such things as succession planning and skills development.

We have been fortunate to fill our vacancies on the Board with two talented members who have stepped up to join the Board bringing their excellent skills. Dan Parker was a previous Board member who has spent a year or so working in the USA, including work for SAGE Golden Rainbow project (LGBTI aged support). Dan is a clinical psychologist. Our second new member is Paul Garde, a lawyer who has worked in various agencies including Indigenous organisations and AIDS councils. We welcome them to the Board. This newsletter profiles both Dan and Paul, and also 'old-new' Board member, Dean Smith, who joined us at our 2011 AGM, contributing an impressive skill set too.

This quarter, the Board has also been involved in various community events including the community consultation on suicide prevention organised by GLCS (Gay & Lesbian Community Services). Several of the Board also joined forces to attend the recent PRIDE Summer quiz night finishing equal first only to be pipped at the post by the final deciding question!

While Australia is still waiting for the Federal Government to announce how they will proceed with reforms to the aged care sector (based on the Productivity Commission's report from last year), the Senate Standing Committee on Community Affairs has a current Inquiry on Palliative Care in Australia. GRAI has made a submission to this inquiry, outlining the need to consistently consider LGBTI issues within a palliative care setting. It builds on the submission made to the Productivity Commission. Special thanks to June Lowe for her work on this.

## Letter from the Chair

*Continued page 2*

## Letter from the Chair continued

### New US Centre for LGBTI elders

Interestingly, the opening of a new LGBTI seniors centre by the American organisation SAGE (Services and Advocacy for Gay Elders - the largest and oldest elders LGBTI organisation) received considerable media coverage here in Australia. While the coverage has raised the profile of aged care issues for LGBTI people, there has been little reference to what is happening here in Australia. For an interesting interview by Natasha Mitchell with Catherine Thurston, Senior Director of Programs at SAGE on ABC Radio National follow this link: <http://www.abc.net.au/radionational/programs/lifematters/sage/3902024>

### Anti-Bullying

I attended a recent Equal Opportunity Commission event on 'Gender and Sexuality Based Bullying in Schools is a serious issue'. This was held on the National Day of Action Against Violence, on 16 March 2012.

One of the speakers, Tiffany Jones from Gay

and Lesbian Health Victoria, presented on the Safe Schools Coalition Victoria which is dedicated to supporting gender and sexual diversity in schools. It was inspiring to hear how some schools have taken positive steps to ensure their schools are inclusive for LGBTI students, supported by a no tolerance policy to homophobic (and any) bullying. On a personal note, it was hard not to reflect on how different the school experience would be with such positive moves.

I was surprised at the level of agreement with much of what GRAI seeks in aged care environments. Perhaps this anti-bullying approach offers another source of information we should be investigating.

There is still work to be done to raise the issue of LGBTI ageing with both the wider community and within the LGBTI community. Thank you for joining us as we work towards this.

Jude Comfort  
Chair

## Dean Smith: a focus on GRAI Membership

Small community organisations like GRAI depend on their membership for inspiration and feedback: providing an essential link to that often hard-to-define 'community' which motivates all our activities.

Our new Strategic Plan recognises the importance of a strong membership, and identifies some areas where we hope to engage our members more fully. Taking on the new role as GRAI membership liaison person is Dean Smith. So don't be surprised if Dean calls you sometime in the coming year!

### Profile on Dean

It was great to welcome Dean as a new member of the GRAI Board following his election at the 2011 AGM. Dean's hope is that he can bring some of his policy and advocacy experience to the group's activities. Dean's previous professional roles include the Chief of Staff to a Federal Aged Care Minister. During this time he drove a number of reforms in the aged care area - including an increase in aged care places including a greater emphasis on ageing in the community and the development of the first National Strategy for an Ageing Australia.

*Continued page 3*

### Dean Smith continued

These roles inspired an enduring interest in aged care issues, and led to his nomination to join the Board at GRAI.

Dean is keen to ensure there is a greater awareness among Perth's GLBTI community about ageing issues. He believes that this awareness will bring messages of both empowerment and satisfaction but also an honest discussion about many of the challenges including social isolation, depression and discrimination.

Like all of us, he wants to guarantee the community's hard-won gains of respect, dignity and equality are not abandoned as GLBT people age.

Dean has accepted the challenge of growing the membership base of GRAI. He believes many in the community will be willing to support the advocacy of GRAI by adding their names and a modest donation to the group.

No doubt GRAI will benefit from Dean's networking and fundraising experience. While living in Sydney, he was Vice President of the Sydney Gay and Lesbian Business Association (SGLBA) which provided a network for business professionals. The SGLBA regularly used its activities to support and fund a variety of volunteer GLBTI community groups.

Dean is a relatively new arrival to Perth, and GRAI is his first committee membership in Perth's GLBTI community. We were lucky to 'get in first!'



Dean (Deano) Smith joined GRAI in 2011



Dan Parker rejoins the GRAI Board

### Welcome (back) Dan Parker PhD

I am happy to be rejoining GRAI's vibrant and dynamic Board, and its plan of work, after several years' absence.

I was on the GRAI Board first in 2008-2009. I am a clinical psychologist, currently working with the WA Psycho-Oncology Service of the Department of Health, and am soon to transfer to the Department of Health's Older Adult Mental Health Service.

At the end of 2009, I moved back to Palm Springs, California, and during 2010-2011, had the opportunity to be the Clinical Director for an LGBT older adult mental health program, which was being developed at the Golden Rainbow Centre - SAGE.

During my several years there, this rather innovative program was successful in securing over \$500,000 in private and public funding to provide individual and group counselling to LGBT older adults, using well-tested CBT therapy models. Therapy services were provided within this LGBT older adult centre which had a healthy ageing focus, and were offered in conjunction with

### Dan Parker continued

the peer-led Chronic Disease Self-Management Program, and other health education, wellness, fitness, exercise and social programs.

Looking back after some months away, this was a very forward-looking older adult program--- for any sector older adults! I hope to be able to take what was valuable in that experience and use it to forward the important work GRAI is doing locally to address similar issues.

As clinical provider, I have provided counselling services to the LGBT community for many years, in both Australia and the US. During 2006-2009, I had a private practice in Mount Lawley with a strong focus on LGBT clients. While living in Palm Springs from 1991-2005, I was a contracted psychologist with the local Desert AIDS Project; and had a full time LGBT-focussed clinical practice.

I am currently an independent member of the National LGBT Health Alliance (Australia), the Gay and Lesbian Medical Association (US), the International Psychogeriatrics Association, and the Australian Association of Gerontology. I had the chance recently to present on work in LGBT ageing issues in psychology at the Sydney Australian Association of CBT conference, and hope I can also increase awareness of LGBT ageing issues

**“... integrating new understandings of healthy ageing and longevity into our communities, and increasing understandings of late life development and resiliency as they apply to those of us who are LGBT and ageing.”**

in my upcoming work with Older Adult Mental Health.

Some of my current personal and clinical/research interests include program development/implementation to increase services for LGBT older adults; integrating new understandings of healthy ageing and longevity into our communities, and increasing understandings of late life development and resiliency as they apply to those of us who are LGBT and ageing.

I and my partner Alan lived in San Francisco for over 20 years before moving to Palm Springs in 1999, and then to WA in 2005. We are now both committed Australian as well as US citizens. We feel some sense of accomplishment in having moved country and re-established work, friendships and community involvements in later adulthood.

After 16 years together, Alan and I decided to marry in New York State when the door to same sex marriage opened there in 2011, and found this an important and surprisingly positive step to take in our relationship. I, and we, look forward to many years of involvement in the LGBT community of Western Australia, and to the work of GRAI in particular.



Graphic from the LGBT Older Adult Coalition, Michigan

## Paul Garde

The third in our 'trilogy' of GRAI Board profiles is Paul Garde. Recently arriving in Perth, Paul decided to respond to our call for people to fill the casual vacancies on the GRAI Board. We warmly welcome Paul, who is committed to 'making a difference' and brings his valuable legal background to assist the work of the Board.

Paul grew up in Brisbane during the Bjelke-Petersen era from which he escaped by studying at the ANU, Canberra. After graduating in Arts and Law, he was proud to work for the South Australian Dunstan Government's Ministry of Consumer Affairs in the Consumer Affairs Minister's Office.

After the fall of the SA Labor Government, Paul moved to Sydney and became admitted as a NSW Solicitor. In Sydney, Paul initially worked for Professors Julian Disney and Ron Sackville at the NSW Law Reform Commission. Thereafter Paul trained as a litigation solicitor with the Australian Government Solicitor, was General Counsel at the Joint Coal Board and first General Counsel at the NSW WorkCover Authority.

Whilst working with major national law firm, Mallesons Stephen Jaques, Paul also volunteered on the ACON Legal Working Group as the AIDS crisis hit Sydney hard in the late 1980s.

In 1992, Paul was part of a small committee of volunteer lawyers who helped found Australia's first and still only specialist HIV/AIDS Legal Centre (HALC). He served on its Management Committee till 2000. For over 3 years from 1996, Paul served as HALC's full-time Director during some of the hardest times in Sydney

during the AIDS crisis, operating out of ACON's premises.

From 2000, Paul took a necessary break from the AIDS field and retrained as a family law & commercial mediator, a Local Court Arbitrator and Supreme Court Costs Assessor. In the mid-2000s, Paul ran his own small Surry Hills legal practice with a family law, legal aid and consumer credit law focus. By late 2010, Paul had successfully mediated well over 500 family law matters for NSW Legal Aid.

In late 2010, Paul undertook a seachange move to Broome to help the Kimberley Land Council with its heavy litigation workload. Last year Paul decided he much preferred Perth to Broome and moved himself and his elderly dog south. He now does contract/locum legal work here in Perth.

When asked what drew him to the GRAI Board, Paul responded, "Well, firstly I like volunteering: it's nice to give something back. From my experience at HALC - which has become a centre of excellence - I can see how from little things, big things can grow. That's very satisfying."

"Secondly, I thought GRAI's work looks interesting and unique, and things like retirement are starting to loom larger now I'm past the indestructible stage!"

From little things big things grow



## Stay Socially Active – You May Live Longer

By Dr Alan Emery, Registered Psychologist, GRAI member

A recent study shows that social isolation increases the risks for early death. Researchers in the Department of Psychology at Brigham Young University found that “the influence of social relationships on the risk of death are comparable with well-established risk factors for mortality such as smoking and alcohol consumption and exceed the influence of other risk factors such as physical inactivity and obesity.” They analyzed 148 medical articles looking at more than 300,000 people and found that individuals who do not have strong social relationships are as likely to confront early death as people who have been smokers or heavy drinkers. This research, entitled *Social Relationships and Mortality Risk: A Meta-analytic Review*, was first published in the July 2010 issue of Public Library of Science Medicine.

Until now these social repercussions in the risk of early death have taken a back seat to the more widely promoted behavioural issues such as smoking, substance use, exercise or other lifestyle activities.

As early as 1988 it was found that people with poor social relationships die earlier than people with stronger social contacts. Studies show that in the last 20 years the number of people who say they have no close friends has tripled. During that time our social links have become ever more transient with close friends or family members increasingly scattered across the country or the world. In addition, we continue to be distracted from meaningful social interactions by the pull of television, the internet, on-demand movies, video games and other solitary pursuits. And texting is rapidly becoming a substitute for face to face contact.

**“the influence of social relationships on the risk of death are comparable with well-established risk factors for mortality such as smoking and alcohol consumption and exceed the influence of other risk factors such as physical inactivity and obesity.”**

Add to that the challenges that come with ageing such as physically slowing down; work changes, redundancies and retirement; reduced economic resources; health concerns; the illness or death of partners, spouses and friends; and many older people find themselves progressively more isolated and alone. Mature-age LGBTI people are particularly impacted by these social changes as many live alone, have

little immediate family support and reduced social networks available to them.

To date allied health providers, physicians, hospitals, social service organisations and

funding sources haven’t fully recognised the connection between diminished social relationships and the risk of early death. And programs to enhance social relationships have not been developed, publicised or funded to the same extent that smoking-cessation, alcohol treatment, diet or exercise programs have been. But recent studies are providing significant evidence that may help shift this awareness and support LGBTI programs to enhance services to minimise social isolation and increase positive social interactions for its members and consumers.

This is an important wake up call for our ageing LGBTI community. We need to be sure we remain socially engaged and connected and we also need to encourage others we know to do the same. If we find ourselves or people we know becoming isolated it’s time to look for ways to reconnect, reach out and find social connections and activities—and quite possibly we’ll add a few years to our lives at the same time.

## Checking out Opening Doors, UK

By June Lowe, GRAI Board member

Our last Newsletter featured ‘Opening Doors’, a social outreach program for GLBTI elders in Campden, London.

The idea seems to be catching on, with Lambeth in South London now exploring community interest in a similar project in their borough.

Under the heading ‘Older and Out in South London?’ an event in March 2012, organised by Age UK London, Age UK Lambeth, Opening Doors and Greater London Forum for Older People, called for people’s views for ways ‘to make London’s southern boroughs friendlier places for older LGBT people’.

Obviously, the London demographics are much more conducive to establishing such initiatives. However, our interest is well and truly piqued, and we will follow their progress closely.

In April I will be visiting England for family reasons and will endeavour to make contact with Opening Doors - hopefully to report back in the next *GRAI Matters*.

Meanwhile, we recommend [http://www.youtube.com/watch?v=JpKSRU900y0&feature=player\\_embedded](http://www.youtube.com/watch?v=JpKSRU900y0&feature=player_embedded)



Members of Opening Doors, Campden UK

## Irish LGBT eyes not smilin’

### Over a third of Ireland’s older LGBT people fear rejection in society

A study launched in November 2011 examined the challenges faced by the older gay community in Ireland.

**Visible Lives**, the first major study of its kind, was commissioned by the Gay and Lesbian Equality Network (GLEN) to examine what effect **LGBT people over 55** across the country felt their sexuality had on their lives.

The report’s key findings were that:

- Most older LGBT people surveyed went through the whole of their adolescence and their early adulthood without disclosing their sexual orientation or gender identity to anyone and without any contact with other LGBT people.
- 35% still feel that friends will reject them if they tell them they about their sexual orientation or gender identity.
- 28% are not out to any of their neighbours.

- One in ten are not out to any of their close family.
- 26% are not out to any of their healthcare providers because of fear of negative reaction.

The study also found that a quarter of respondents had been married at one time, a third were parents and 31% “felt lonelier” as they aged.

Ireland’s Minister of State for Older People, Kathleen Lynch TD said: “This report offers unique insights into

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## Irish LGBT eyes not smilin' Continued

the lives of lesbian, gay, bisexual and transgender people and shows the negative consequences of living through a period where a fundamental aspect of their identity - to be themselves and to live openly and securely with the person they love - was stigmatised."

Kieran Rose, Chair of GLEN, said: "The participants' stories are a powerful reminder of the importance of the legislative and social

progress of the last twenty years, and the profound impact this has had on their lives and on LGBT people more generally.

"This progress, especially the status and strong protections and supports arising from civil partnership and the government's commitment to enact gender recognition legislation, are strong platforms from which

the recommendations made in this report can be implemented."

Data was collected from around 180 people aged between 55 and 80 years across Ireland.

*Adapted from an article by Stephen Gray for PinkNews.co.uk 3 November 2011*

<http://www.pinknews.co.uk/2011/11/03/over-a-third-of-irelands-older-lgbt-people-fear-rejection-in-society/>



## Mary McAleese, GLBT-Friendly Political Figure of the Year

While the effects of past discrimination on Ireland's LGBT community are still painfully visible (report above), the tide is definitely turning.

A video of a powerful speech made by Irish President Mary McAleese is indicative of the momentous shifts that conservative, Catholic Ireland has undergone with regards to its political attitudes towards people of diverse sexuality.



Mary McAleese, President of Ireland (1997- 2011).

Accepting an Award for LGBT-Friendly Political Figure for the Year,

Mary McAleese notes that 2011 was an historic year for the Irish LGBT community with the passing of civil partnership legislation.

However, she acknowledges that there is still much work to be done.

**"I pray that we can that we can achieve full equality and deconstruct the noxious apparatus of homophobia, which attempts to demean the human person, causing such awful damage," she said.**

The full recording of Mary McAleese's GALAS Award acceptance speech is at:

<http://www.youtube.com/watch?feature=endscreen&v=Bk-QgoXFC1c&NR=1>

## News from the National LGBTI Health Alliance

The National LGBTI Health Alliance began life in 2007 with an HIV/AIDS focus, later broadening its membership in 2009 to include other NGOs working in LGBTI health and other issues. The Alliance has gone from strength to strength as an effective advocate on LGBTI health needs, embracing issues such as mental health, ageing issues, youth issues and removing discrimination. GRAI is a long time member of the Alliance.



### ➤ MindOUT



Barry Taylor,  
MindOUT Project  
Officer, Chair of  
National LGBTI  
Alliance, and member  
of the Australian  
Suicide Prevention  
Advisory Council.

**MindOUT** is the first national LGBTI mental health and suicide project in Australia. In 2011, the National LGBTI Health Alliance secured major funding from the Federal Department of Health and Ageing (DoHA) for this 2 year project. The project employs two staff and will be rolling out several initiatives over the next 18 months.

Project Officer for **MindOUT** is Barry Taylor, who has been touring the country meeting with LGBTI organisations and mental health and suicide prevention organisations.

Perth was among Barry Taylor's first stakeholder briefings, where GRAI Board member Dean Smith joined the well-attended meeting hosted by GLCS on 31 January 2012.

Dean was mindful to ensure that the issues of mental health and suicidality among older GLBTI adults were well represented. However, despite youth suicide often taking centre stage in public debate, the meeting was presented with some powerful statistics on elder suicide.

According to the first national survey of LGBTI mental health in Australia, recently conducted by MindOUT, high rates of suicide appear amongst 40 to 50 year olds and over 65s.

Other presentations made at the meeting included GLCS and the Freedom Centre. Four areas are seen as key to addressing suicide prevention:

- reducing discrimination and increasing safety;
- increasing health and well-being, including mental health;
- awareness and suicide prevention, and
- LGBTI community connection and social support.

Paul Martin also a member of the Australian Suicide Prevention Advisory Council (ASPAC). ASPAC is in consultation with DoHA to draft the National Suicide Prevention (NSP) Action Framework for 2011-2014. Suicide prevention activities will target high risk groups including LGBTI communities, rural and remote communities, youth and culturally and linguistically diverse communities.



## ➤ **LGBTI Representation: the beginning of the end of invisibility?**

Involvement in two influential advisory groups will give the National LGBTI Health Alliance the opportunity to represent members' interests at a national level and have real input into government policy and service delivery to LGBTI Australians.

Following the National LGBTI Ageing Roundtable in October 2011, the Federal Minister for Ageing, Mark Butler, agreed to include LGBTI representation on the **DoHA Ageing Consultative Committee**.

This is one of the key groups who are being consulted about the Government's responses to the Productivity Commission's 2011 report, *'Caring for Older Australians'*: i.e. will be shaping the future of ageing policy for Australia.



The Alliance has also been invited to send an LGBTI representative to the newly formed **Department of Human Services LGBTI Working Group**. The Department of Human Services (DHS) is responsible for agencies such as Centrelink and Medicare, so its' interest in improving service delivery to LGBTI clients is hugely significant.

For example, it appears that the DHS may incorporate GLBTI sensitivity training for its 40,000 staff, and reassess terminology in Departmental forms.

## ➤ **Anti-discrimination submission: religious exemptions**

**By Sujay Kentlyn, Health Policy Officer, National LGBTI Health Alliance**

The Health Alliance submission to the Commonwealth Attorney-General's Department Consolidation of Commonwealth Anti-Discrimination Laws Project has now been submitted.

The Discussion Paper stated that the Government does not propose to remove the current religious exemptions, apart from considering how they may apply to

discrimination on the grounds of sexual orientation or gender identity.

Submissions from many organisations (not only LGBTI groups) have strongly advocated that religious organisations should not be granted exemptions in their delivery of services. It will be very interesting to see how the Government responds on this issue.

**GRAI takes a keen interest in the issue of religious exemptions for sexuality-based discrimination, as 36.7% of residential aged care service providers in Western Australia are run by faith-based organizations. We are strongly of the view that these agencies (who also receive public moneys to provide services) should uphold non-discriminatory policies and practices.**

**Progressive faith-based organizations, some of whom have been in the forefront of GLBTI rights campaigns, also support this view, as the current legal 'permission' to discriminate tarnishes their reputation and continues to provide a source of fear for LGBTI elders.**

### ➤ LGBTI Ageing and Aged Care Working Group

Following the Sydney Roundtable on LGBTI ageing in October 2011, the Alliance formed the Ageing and Aged Care Working Group. GRAI Board member June Lowe is a member of this group, which meets monthly by teleconference. The first 'meeting' was held in January 2012 and the group's priorities and work plan are being finalized.

This working group enables us to maintain a national perspective on GLBTI ageing issues, to keep abreast of initiatives in other states and to work together on activities on a national scale. Work is already proceeding apace on LGBTI sensitivity training packages for aged care services, with the aim of a national roll-out in the future.

### Do You Know Someone With Dementia? Have You Provided Care Or Support For Them?

Griffith University is conducting research on the health and wellbeing of the families, friends and spouses who care for people with dementia.

If you are currently the main provider of care or support for a family member, friend or spouse with dementia, they would like to hear about your experiences. If you previously provided care or support for a person with dementia who is now in aged care or has recently passed away, they would also like to hear from you. (If you are not a carer, but know someone who is, please feel free to pass this on).

You can get involved by completing an anonymous survey on the type of care or support you provide, your health and your emotional wellbeing.

Your participation will help to increase community awareness of dementia and the wonderful work done by carers. The survey findings will be used to support carers who find the experience physically or emotionally overwhelming.

To complete the survey online please go to <https://prodsurvey.rcs.griffith.edu.au/dementiacaresurvey>

To receive a hard copy of the survey, please contact Dr Siobhan O'Dwyer on (07) 3735 6619 or [s.odwyer@griffith.edu.au](mailto:s.odwyer@griffith.edu.au)

This research has been approved by the Griffith University Human Research Ethics Committee. If you have any questions or concerns, please contact Dr Siobhan O'Dwyer on the details above.

### 'Genny' Awards: 2011 a remarkable year for LGBT Ageing

Many GRAI members would have seen Stu Maddox's remarkable documentary 'Gen Silent' shown as a GRAI fundraiser during 2011 Pride. This moving (American) film tells of LGBT elders retreating into the closet in order to survive insensitivity or discrimination in care. The 'Gennys' are named in honour of this film, and celebrate the 'top ten' US stories of 2011 which had a positive impact on LGBT elders, together with the advocates and elders who made these breakthroughs possible. These stories represent many remarkable advancements in GLBT elders rights (and awareness) in the US, including: an LGBT elder Housing summit held by

the US Department of Housing and Urban Development (HUD); the inclusion of LGBT history as part of the school curriculum in California; the first Federally funded health study on the health of LGBT older people; and record dollars going into LGBT health and aging initiatives.

Importantly, hospitals receiving Medicare funding must respect GLBT kinship rights, and same-sex partners' are recognized by Medicaid so that the couple's home will not be taken if a survivor still lives there. It is an impressive list: for more information on the full 'Genny' countdown, go to: <http://stumaddux.com/blog/archives/444>



## Celebrate creating and expanding Safe Space

Marking moments of progress is important in charting progress in advancing the cause of positive LGBTI aging. Although these ‘achievement round-ups’ are traditionally end-of-year fare, we wonder what stories should be celebrated if we were to have an Australian equivalent of the ‘Gennys’?

We start by suggesting the following, and welcome further ideas from our readers:

1. The Productivity Commission’s inquiry, ‘*Caring for Older Australians*’, explicitly recognized the special needs and concerns of LGBTI elders and included recommendations for LGBTI inclusiveness within the aged care sector in their final report to the government.
2. The first Australian LGBTI Ageing Roundtable was held in Sydney (hosted by ACON and National LGBTI Health Alliance).
3. Federal Minister for Ageing, Mark Butler, agreed to include GLBTI representation on the influential Committee on Ageing.
4. Work begins on developing training packages for LGBTI aged care service providers (in Victoria and Sydney).
5. Care Connect (a Home and Community Care provider) in partnership with LGBT NGO Healthy Communities, offers special CACP packages for LGBTI older adults in South East Queensland.

## Australians deserve to age well

National LGBTI Health Alliance Member, Darryl Butler (Northern Territory), has asked that we share this link with you all. In particular, he hopes that we might be able to get some LGBTI stories onto their website!

**AgeWell** is a campaign to improve the Australian aged care system. You can share your stories directly through their easy to use website: <http://agewellcampaign.com.au/stories/share-your-story/>



### WHAT'S IN A NAME? ... GRAI Competition ... still running

Our last *GRAI Matters* Newsletter challenged our members to come up with a catchy new title for GRAI, but one that maintains our current acronym.

Your Board is concerned that our present name (with GRAI standing for ‘GLBTI Retirement Association Inc’) tends to mislead people to assume we are just about retirement homes. Although we don’t want to retire our acronym - GRAI has developed a name for itself - we would like our name to more accurately reflect our aims and activities: working to create a safe and inclusive environment for GLBTI elders, be it in the community, in the home, or in residential care.

Our thanks to GRAI member GEORGE SPENCER who has sent in some excellent ideas: any other talented wordsmiths out there? There’s a mystery prize for the winner!

Please send your suggestions to [info@grai.org.au](mailto:info@grai.org.au). We look forward to hearing from you!

