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Coláiste na hOllscoile Corcaigh

Factors Influencing Occupational Participation for Older Gay Men

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CARL Research Project
in collaboration with
Gay Project

CARL COMMUNITY - ACADEMIC RESEARCH LINKS
University College Cork, Ireland

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- provide their services on an affordable basis;
- promote and support public access to and influence on science and technology;
- create equitable and supportive partnerships with civil society organisations;
- enhance understanding among policymakers and education and research institutions of the research and education needs of civil society, and
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Abstract

As the population of gay and lesbian older adults grows in terms of size and visibility, the need for research regarding the issues relating to this minority group equally grows. Occupational therapists must consider sexual orientation and how it influences occupational participation to provide a client-centred service to gay and lesbian service-users. A small-scale qualitative study took part in an urban area in the south of Ireland to investigate factors influencing occupational participation among older gay men. Semi-structured interviews were carried out with six men, aged between 44 and 65 years, who self-identified as older and gay. Findings produced three themes influencing occupational participation: life journeys, unsafe spaces, and social networks. Life journeys varied, yet all culminated in participants developing resilience, and a positive outlook as a result of overcoming adversity. Experiences and fears of heteronormativity and homophobia were outlined as barriers to accessing healthcare and meaningful occupations and a layer of social inaccessibility was faced by participants in certain occupations due to the actions and attitudes of others. Barriers to occupational participation, such as homophobia and heteronormativity, must be addressed to prevent occupational deprivation among gender and sexual minority groups. The findings of this study will benefit both community organisations and healthcare providers, by providing insight into the occupational needs of this population, as well as the barriers they face. In addition, this research adds knowledge to occupational science and occupational therapy theory regarding the occupational participation of sexual minority groups.

Keywords: occupation, participation, older, gay, GSM, occupational therapy

Factors influencing occupational participation for older gay men.

Introduction

The term 'occupation' refers to all purposeful or meaningful activities and it is understood that engaging in occupation, not only has a positive influence on health, but is vital to human life (Wilcock, 2006). Occupational participation occurs when individuals actively engage in the meaningful activities which make up their daily lives (Townsend & Wilcock, 2004). Williamson (2002) suggests occupations are made meaningful through a mixture of individual life experiences, physical, social and cultural environment, and personal identity. Sexual orientation is one factor that influences identity formation, and in turn, patterns of participation in occupation. As Jackson (1995) previously illustrated, sexual orientation is a core factor influencing how we choose and experience occupations.

As the older adult population rises in number, so does the population of older people who identify as lesbian, gay, bisexual, and transgender (LGBT) (CSO, 2016). The reality of an ageing population encourages us to recognise the occupational needs of older lesbians and gay men, and it is vital that we do so "within the context of" and with an appreciation of their experience "growing up gay" (Twinley, 2014, p. 623). For LGBTs, their sexual orientation has been and continues to be a significant reason for encountering barriers when engaging in meaningful occupation (Twinley, 2014; Hash & Rogers, 2013). Unquestionably, older members of the LGBT community have experienced exclusion from social and political activities in the past including inequality in government legislation and healthcare policies (Hammack & Cohler, 2011; King, 2016; De Vries, 2007). Inequality and exclusion from society has contributed to the experiences of stigma and discrimination faced by gay and lesbian people (Hammack & Cohler, 2011; Ward, et al., 2010).

The Community Access Research Links (CARL) organisation, in partner with the Gay Project, identified the need for research into the potential barriers to engaging in meaningful activities that exist for older gay men. In this current study, the researcher aims to examine gay men's experiences through an occupational lens. This will be achieved by exploring the occupational participation of older gay men living in Ireland. It is valuable to explore the day to day lives of these men, in order to better understand factors that support and hinder participation in everyday activities.

Before continuing it is essential to define the following terms relevant to this research, sexual orientation, sexuality, heteronormativity, heterosexism and homophobia. The principal concept to be explored in this study is sexual orientation, this refers to one's acted or imagined preference in choosing sexual partners (Devine & Nolan, 2014). Sexuality is a combination of a person's sexual

orientation, gender identities and roles, intimacy, eroticism, sex and reproduction (Hyland & McGrath, 2013; World Health Organisation, 2006). Heterosexism is described by Brotman, et al, (2006) as "the privileging of heterosexuality over all other sexual orientations and identities" (p. 490). The term heteronormativity describes a common perspective "which sees heterosexual experience as the only, or central, view of the world" (Harrison, 2001, p. 143). Brotman, et al (2006) defined homophobia as "the fear, hatred, or mistrust of gays and lesbians often expressed in overt displays of discrimination" (p. 490).

Literature Review

The literature fell into two categories; sexual orientation and occupational therapy and the role of sexual orientation in ageing, which summarises the ageing concerns of non-heterosexual individuals, barriers to ageing with pride and the supports of older gay men.

Sexual Orientation and Occupational Therapy

Sexual orientation is a crucial part of an individual's identity, which influences choice and the experience of occupation (Jackson, 1995). Sexual orientation is relevant to both occupational science and occupational therapy, however sexual orientation is not always addressed in everyday practice. In Javaherian, et al., (2008) less than half of the occupational therapists (OT's) surveyed felt comfortable working with LGBT clients. Similarly, Kingsley and Molineux (2000) found that the topic of sexuality was taboo among practicing OTs and they downplayed the importance of sexual orientation, in order to appear non-homophobic. Kingsley and Molineux (2006) found that OTs acknowledged that sexual orientation has an influence on a client's occupational participation.

Walsh and Crepeau (1998) demonstrate that sexual orientation influences occupational choices, relationships with others, and self-concept. Devine and Nolan (2014) suggest engagement in certain occupations provided participants with an outlet that facilitated the transition of assuming a gay identity. Sexual orientation can impact the experience and choice of occupations in several ways, for example a fear of discrimination and the experience of heterosexism (Bergan-Gander & von Kurthy, 2006). Hyland and McGrath (2013), explored the barriers preventing OTs from addressing sexuality in practice, findings included a client's age, staff lack of knowledge and training, and the therapists perceived lack of readiness combined with fears of offending a client. Similarly, McGrath and Lynch (2014) found that socio-cultural norms relating to sexuality, perceived professional competence and confidence, along with prioritization of resources to be the key barriers preventing OTs from addressing sexuality with older clients. Despite increased visibility of the issue, OTs in Ireland remain reluctant to address older adults' concerns relating to sexuality (McGrath & Lynch, 2014). In this

literature review, no research was found investigating the role of sexual orientation in the lives of older gay men and lesbians, nor how sexual orientation may impact the occupational participation of this population in an Irish context.

The Role of Sexual Orientation in Ageing

Due to the restrictions placed on non-heterosexual individuals in the past, the older population of gay and lesbian individuals have experienced discrimination and marginalization. Lesbian and gay senior citizens have a history of hiding their sexual identities from health care professionals to avoid biased treatment (Brotman, et al., 2003; Swiatek & Jewell, 2018). Harrison (2001) expressed concerns about the invisibility of this population, these concerns are echoed by other authors (Shankle, et al., 2003; Harrison, 1999; Heaphy, 2007; Brotman, et al, 2003). Harrisson (2001) compared neglecting to address sexual concerns of clients for 'privacy' reasons, to the notion of 'taboo' in the work of Kingsley and Molineux (2000). Harrison (2001) stated that "like taboo, the concept of privacy, in this context, serves as a barrier to fully understanding a client's life experiences" (p. 143).

Older LGBT adults experience similar challenges to their non-LGBT counterparts (Hash & Rogers, 2013; Orel 2014). However, being in a sexual minority group presents unique challenges. Lesbians and gay men face discrimination, specific health and mental health concerns, and unsupportive policies and services (D'Augelli & Grossman, 2001). Hughes (2009) illustrated that older gay men are concerned that their sexual orientation would affect care through a lack of awareness about LGBT issues and that same-sex relationships would not receive recognition. Jackson, et al., (2008) found that older LGBTs fear discrimination and suspected that discrimination will happen to them in health care. Brotman et al, (2007) suggests that participants experienced discrimination in two ways; "the actual discrimination" and "the anticipation of discrimination experienced by seniors prior to accessing health services" that mediates their willingness to access services (Brotman, et al., 2007). Participants also expressed a variety of concerns different than their heterosexual counterparts, such as discrimination in employment, healthcare, housing, and long-term care (Czaja, et al, 2016; Quam & Whitford, 1992).

Past experiences and environmental contexts often act as barriers to occupational participation for this population. One fifth of the older men involved in Heaphy, et al., (2004) study, reported that disclosing their sexual orientation, had a negative impact on relationships with family members. In Kuyper & Fokkema's (2010) study, older LGB adults who had experienced negative reactions to disclosing their sexual orientation in the past, had associated high levels of loneliness. A prominent barrier is negative societal attitudes towards LGBTs. D'Augelli & Grossman, (2001) found that three

quarters of participants had experienced victimisation. Participants that experienced physical attack were more likely to report poorer mental health, more isolation and lower self-esteem (D'Augelli & Grossman, 2001). Frederick-Goldstein et al, (2013), found that LGB older adults reported poorer mental health, along with a higher risk of disability, smoking, and excessive drinking. Boggs et al (2017) similarly found environmental barriers to be ageism and heterosexism, which negatively impacted access to social support, health care, home assistance and housing.

Supports of Older LGBTs

The positive influence of friendship and support networks is highlighted in previous research (Barrett, et al., 2015; Heaphy, et al., 2004). Chosen families are an important feature of non-heterosexual ageing (Heaphy, et al, 2004). Participants outlined safety and confidence, as benefits established through relationships with other gays and lesbians. Similarly, a gay and lesbian social network has been recognised as a buffer against the impact of minority stress (Kuyper & Fokkema, 2010). Resilience from enduring a lifetime of discrimination was distinguished as a strength, to combat against the above descried barriers (Boggs, et al, 2017).

Conclusion

Kingsley & Molineux, (2000) recommend that the occupational therapy profession must improve its "understanding of the relationship between sexual orientation and occupation" (p.209). Likewise, Bergan-Gander and von Kurthy (2006) recommend further research into how sexual orientation affects different client groups within a range of diverse cultures. As discussed in the literature review gay and lesbian older adults face a range of challenges different than their heterosexual counterparts, this suggests that being part of a sexual orientation minority group influences the experience of occupation. Twinley (2014) has previously explored how occupation is influenced by sexual orientation for both older gay men and lesbians, within a British context. Devine and Nolan (2014) have studied a population of young gay men through an occupational perspective in an Irish context. Equally, the older gay men of Ireland deserve the opportunity to have their voices heard.

Research Question

The research question is: *What are factors influencing older gay men's occupational participation?*

The purpose of this research is to explore what influences occupational participation for this specific group in society. The research presented in the above literature review supports investigating the experiences and occupational preferences of older gay men within an Irish context.

Research Aims

- To discover what influences older gay men's participation in meaningful occupation.
- To observe how various factors, hinder or enable older gay men to participate in meaningful occupation.

Research Design

Methodology

Given the nature of the topic, a qualitative methodology with an interpretive phenomenological approach was chosen to explore individual meanings of occupation. The goal of interpretive phenomenology is to understand the features of human life and the meanings that people associate with their world (Carpenter & Suto, 2008). This methodology was deemed appropriate for this current study, as the research seeks to explore the meanings behind, and the influence of social, historical, and cultural contexts on occupational participation for older gay men.

Method

The researcher completed semi-structured interviews (Appendix A) with 7 participants to generate information about older gay men's patterns of occupations and the associated meanings attached to these occupations. The interviews were recorded on a Dictaphone and transcribed verbatim by the researcher.

Recruitment Procedures

Participants were recruited through purposive sampling, with assistance from a gatekeeper at a local community LGBT organisation. Purposive sampling is the selection of individuals with experiences and traits necessary for addressing the research aims (Carpenter & Suto, 2008). In this study, participants were chosen based on their gender (male), their self-identification with the term "older", or other similar description and their sexual orientation (gay). Participants were recruited through the gatekeeper (five) and through posters advertising the study (see Appendix B) placed in city centre locations (two). Inclusion and exclusion criteria are displayed in the table below.

Table 1: Inclusion and exclusion criteria.

Inclusion criteria:	Exclusion criteria:
Men who identify as older, elder or senior.	Men who are bisexual, heterosexual or transgender.
Men who self-identify as gay.	Gay men who self-identify as young.

Capacity to provide informed consent.	No capacity to consent.
Currently living in Ireland.	

Participants

Seven men aged 32 to 65 years, who self-identified as being gay and older, attended one interview each. Prior to the interview, willing participants were sent an information sheet (Appendix C) outlining the study and a consent form to sign on the day of the interview (Appendix D). Participation was voluntary and the participants were told that they could withdraw from the study at any point. To preserve anonymity, the only demographic information collected from participants was age (Appendix E). Due to audio issues, one interview was unable to be transcribed, thus six participants are represented in the data analysis.

Ethical considerations

Several methods were used to ensure that participants would remain anonymous, that confidentiality was preserved, and that participants and researcher felt safe. Before providing written consent, an information sheet was sent to potential participants. The risks of participants becoming distressed when talking about their own occupational experiences were deemed minimal. If psychological stress were experienced, and on request of the participant, the researcher could provide details of an LGBT helpline. Participants were over 18 years old and were considered able to provide their informed consent. Participation was voluntary and could be terminated at the request of the participant. All study data was handled as confidential and in line with GDPR guidelines (GDPR, 2016). The interview tapes were transcribed by the researcher and signed consent forms were kept in a locked drawer, accessible only to her. Anonymity was ensured, pseudonyms were assigned to each participant and all identifiable information was omitted from the data. The raw audio data was permanently deleted after the completion of the research. The study was evaluated and approved by the University College Cork Ethics Panel (Appendix F & G).

Procedure

Seven interviews were conducted face-to-face in various locations chosen by the participants to alleviate any potential discomfort. Three interviews were conducted in UCC, two interviews were conducted in the participants' workplace, one interview was conducted in a local café and one was conducted in a local LGBT community organisation. Interviews lasted between 38 minutes and 2 hours 15 minutes. Participants spoke about their daily occupations and their associated meaning.

Data Analysis

Phenomenological thematic data analysis was chosen to analyse the meaning of the lived experiences described by participants. This method understands, translates, and illustrates the data through deconstruction, which uncovers the meanings of the phenomenon (Thomas 2000). Prior to coding, the transcripts were read several times while listening to the tape to ensure accuracy and allow the researcher to become immersed in the data. This enabled the researcher to identify and organise relevant sections for coding. Pertinent statements were highlighted on the transcripts and line-by-line coding was employed for each transcript by allocating labels to relevant sections of data (Appendix H). The data was studied for differences and similarities, to identify components that best described the participants' experiences (Appendix I). 34 initial codes were established and grouped to form three initial themes (Appendix J). Concept mapping was utilised to explore relationships between identified subthemes (Appendix K). Subthemes were refined and synthesised to form three overarching themes and seven associated subthemes which are presented in Table 2 below.

Trustworthiness

Prior to data collection, researcher underlying assumptions were explored to avoid bias in data analysis (Appendix L). To improve dependability, the researcher attended supervision and engaged in consistent reflexivity through a reflexive journal (Appendix M) (Kingsley and Molineux, 2000). The data collection and analytical process was transparent as the researcher provided clear justification for decisions in the research proposal and audit trail. It was intended to complete two layers of member checking, after interviews were transcribed and once themes had been identified. Due to time constraints this was not possible.

Findings

Three themes that influenced occupational participation emerged from the data: Life journeys, safe spaces, and social networks. The main themes and their associated subthemes are presented in the table below, each will be described using direct quotes with pseudonyms.

Table 2: Themes and subthemes

Broad themes	**Subthemes**
1. Life journey	a. Personal History b. Age and Experience
2. Unsafe spaces	a. Homophobia b. Heteronormativity c. Inaccessible
3. Social network	a. Family b. Friends c. LGBTQ community involvement

1. Life Journey

When asked about present daily occupations, participants brought up their past. In doing so they described a life journey that was unique to each person yet had similarities across all participants. Their experiences illustrated "one type" of story of gay aging in Irish context which included two subthemes personal history and age and experience. Each subtheme described will explore participant experiences and associated occupations.

a. Personal history

Participants grew up in an historical context when non-heterosexuals "were jailed, hospitalized as insane, and shunned by the Catholic Church" (Sean, 65). Being labelled as different and battling to fit in to a heteronormative society were described during this stage of life. Liam described being told he was different by his father while playing dolls with his sister.

> *"My father came in when I was about 6, and that was the first time I heard the word different because he just went, "Oh my God. Why? Why do you have to be so different from the rest of your brothers?" And that was the first time I heard different. And then it became part of my life."* (Liam, 62)

Similarly, outside of the home, Mike described school as a "threatening place" and had to battle his way through life fearing discrimination and violence.

> *"Basically, having to battle your way through to school and at home or to the local shop. You don't know what you'd be faced with. So that was something I would have been quite nervous about."* (Mike, 44)

James reported experiencing bullying in school, which had a lasting effect on his participation in educational activities and prevented him from learning in a group environment.

> *"To be in school for me is not a good thing for me. I associated it with something bad, bullying and other bad situations."* (James, 56)

Some participants adopted new occupations, that were not meaningful to them, in order to hide their "difference" and to "fit in" with others.

> *"You knew you were different and you're trying to fit in… I used to play soccer as a kid, and it was to prove that I was straight, … but I hated every minute of it… It was done more to fit in. I was one of the lads."* (Liam)

Participation in meaningless occupations was done to fit in to a heteronormative society and to hide his sexual orientation. Participants describe encountering adverse experiences and battling through. Participation in occupations was central to their experience.

James described lying about his sexual orientation due to the potential threat of homophobia. Lying about one's sexual orientation to prevent potential discrimination and violence was a negative experience.

> *"I hear what they say about gay people … and then I was kind of afraid and I lied… I even created a girlfriend it was horrible"* (James).

Alcohol was used by participants to cope with fear and anxiety. As well as easing "anxiety and social problems" (James), alcohol facilitated participation in everyday occupations by allowing participants to overcome their fear of homophobia.

> *"What alcohol did for me, it allowed me to go to school, it allowed me to go out, it allowed me to mix because it was illegal to be gay… I acted a part that the world wanted me to do it and it was those substances that allowed me."* (Liam)

Participants developed healthier coping mechanisms over time. For James, creative occupations provided an outlet for expression. Participation in meaningful occupations assisted participants through this process and resulted in improved confidence.

> *"It was a long process … I was really depressive and then after that, I started to find my way and art has helped me a lot … and the difference is quite remarkable when I think about it myself."* (James)

Personal growth described by participants was supported through participation in meaningful occupations. Participants drew strength from overcoming adversity and found acceptance.

> *"come to terms with being different and that battle of accepting yourself as different."* (Liam).

Participants faced bullying, discrimination, and violence throughout their lives. Occupations were used to hide sexual orientation for one participant and to cope with fear and anxiety for others. For one participant, art supported his personal development and enhanced his confidence. The process of overcoming difficulties experienced by participants was associated with a changed outlook.

b. Age and Experience

Participants described that with "age and experience" came acceptance and enhanced confidence. Maturity was associated with building confidence and resilience. Volunteering and employment occupations were pursued as a means of giving back to the community and supporting others. Participants adopted a positive outlook toward aging despite changes in health that negatively impacted occupation. Additionally, participants describe attaining a sense of spirituality from various occupations.

After hiding their sexual orientation for years when it was illegal to be gay, more inclusive attitudes and laws, enabled gay men to find their voice.

> *"But it's years of being silenced, I now have found a voice."* (Liam).

Maturity was described as helping participants to enhance their confidence and overcome anxiety.

> *"I think maturity helps as well … to be a middle-aged man has been good for me because I feel myself much more balanced than before… I'm a completely different person now than I was before".* (James)

> *"Every time I left the house, there was anxiety about who would be around the next corner, you know and now as a much more confident older man, that's not something I give any consideration to really*." (Mike)

Participants were different ages and encountered different experiences, yet their narratives presented a similar process. Their life journey ultimately led to participants developing resilience.

> *"As long as and as resourceful as I am, I want to be able to advocate for myself and problem solve and be as resilient as I am."* (Sean)

Participants took up volunteering to give back to the LGBT community, for Pat it was "because the community was very good to me when I turned up as a young fella" (Pat, 56).

> *"It's my life. It still has to do with my background and my own personal history. I mean, I was born in Ireland when it was illegal to be gay and the battle for things and then the stigma with HIV. So it's really it's really like close to my heart that I want people who are living with HIV now like to help them, because I meet people and they are isolated and they're lonely."* (Liam)

Similarly, employment occupations allowed participants to support others going through a similar experience.

> *"I had years where I felt, shameful around my own sexuality… I wanted to work in an area where you could relieve that sense of shame for other people. So, I suppose that would have been my motivation for this area of work."* (Mike)

Due to their past experiences, Mike and Liam chose to spend time helping others going through a similar experience.

Overcoming barriers throughout their lifetime enabled participants to establish a positive outlook towards aging. Overall participants viewed themselves to be in good health.

> *"I am 62 and sometimes I just have to remind myself I am… I'm mentally fine, I'm physically fine, even though I am positive, and I have had cancer and everything, I always keep saying I am still very healthy… [Running] is about the only time, I think, of the age, at 62, you have to slow down from the cardio."* (Liam)

A positive outlook toward aging was described, participants can still do what they want despite health problems, as Sean states "I can still manage most of my activities of daily living*"*. Sean's health

problems impacted his occupational participation, yet he was able to adapt occupations to continue participating in valued occupations.

> *"Well nature and pathogenesis is my teacher. And I'm learning from that what I can and cannot realistically do. And with the dementia becoming more and more symptomatic… I carry my keys and my fob. I keep it around my neck because I've lost so many keys before they were in my pocket and I can't find it. If it's on my neck I can't lose it."* (Sean)

Participants cultivated their own personal philosophy, that recognises "life is finite" (Mike), encouraged participants to "make the most of it" (Liam) and to find "joy in the simple things" (Sean).

> *"I just had a very, very positive outlook. It was like, yeah this is what I mean about facing the bad things. If this is the worst that can happen and if I'm gonna die, there is fuck all I can do about it, I'm not gonna sit here in my bed dwelling on it."* (Liam)

Despite most participants being raised in Catholic families, all reported to be either atheist or agnostic. Participation in occupations like meditation (James & Mike) and yoga (Edward) provided a sense of spirituality for three participants. Others gained a sense of spirituality from music and art.

> *"Art is a bit of a spiritual thing. Music in a lot of a way, so abstract when you feel about it something or listen to music, it is a connection to stuff you don't know. That's for me spirituality."* (James)

Participants' sense of identity evolved with age and with this evolution, occupational participation also changed. Overcoming barriers and building an identity of strength and resilience was demonstrated to support participation in meaningful occupations, as did the positive outlook cultivated by participants. Meaningful occupations reaffirmed participant identity and influenced their sense of identity.

2. Unsafe spaces

Safe and unsafe spaces were described by participants in employment, education, travel and sports. A safe environment was somewhere where they did not have to explain or defend their sexual orientation. The characteristics of unsafe spaces were discussed by all participants and included homophobia, heteronormativity, as well as physical and social inaccessibility.

a. Homophobia

Participants described fearing homophobia and experiencing discrimination and violence. In environments and occupations where homophobia was present, participants were forced to hide their sexual orientation to ensure their safety.

> *"And I was working people from all over Europe… and they are all straight… for a long time I was afraid to say I was gay because there is a lot of people who do not understand that. And I feel myself in a kind of, you know, better to prevent something… and I lied… I even created a girlfriend it was horrible."* (James)

Mike reported encountering homophobia for the first time in a long time when campaigning for the marriage referendum.

> *"Some people would threaten violence at the door. So just seeing that because you don't see it a lot and was a reminder that it's still there. I remember there was thirty something percent of people who voted no. So that's significant."* (Mike)

Sean described experiencing homophobia recently:

> *"I'm walking with my fabulously naturally blond hair ...with my earrings and all and a young group of hooligans… three or four of them… were catcalling me in broad daylight … But it was meant to be jeering and then hateful."* (Sean)

Edward experienced violence and found it to be positive overall as he gained increased confidence in his self-defence skills and received support from his community.

> *"One night coming home… a farmer with a pitchfork attacked me… he was roaring about queers and this and we don't want your type around here… I'm very aware now about personal safety… I didn't have any (injuries) because I know how to defend myself ... I had the result I wanted in lots of ways and I feel very vindicated, very supported by my local community*." (Edward, 56)

Homophobic attitudes were encountered in religious institutions, such as schools and hospitals.

> *"When we went to put up posters in a local hospital... It was just a support group for people living with HIV. We weren't allowed and it's the same, when you're trying to do sex education at schools, the school has to be agreeable to what you can talk about, what you can't talk about. So I think even though there's been a great change… there's still a culture in Ireland… you still have a cohort of people who like, you know who actually, honestly, honestly believe … that*

people like me are, you know, they've been taught by their Church and everything they we're deviant." (Liam)

The religious affiliations of certain institutions, increased fear for gay men when in these spaces. Furthermore, the influence of religion is stated by Mike:

"The messaging around sexuality that you get from lots of religion and that would certainly have an impact… it feeds into the bigger picture of, you know, discrimination, homophobia, and transphobia… I think a lot of the messaging could be very harmful you know, to women, you know, to gay people, to trans people." (Mike)

Homophobic attitudes are still present among individuals and institutions in Ireland. This may hinder older gay men from participating in meaningful occupations as they may fear discrimination and violence.

b. Heteronormativity

Heteronormativity was identified as a characteristic of unsafe spaces and forced participants to come out in various contexts. Edward encountered heteronormativity in the workplace:

"I found I was coming out to people a lot because they were assuming that I was straight". (Edward)

In Edwards' situation and others, heteronormativity forced participants to share something personal and private with individuals they barely knew. To prevent this from occurring, Liam has developed a way to make others aware of his sexual orientation and avoids needing to verbally come out.

"It's a very heteronormative world that I live in… it's assumed, unless you are a screaming Queen, you're straight. When you meet people, we have to come out, you know, I have to tell people I'm gay like if I meet new people or something… generally I wear things like these (bracelets) so they kind of cop on." (Liam)

The issue of heteronormativity in senior housing was raised by Sean and fuelled concerns regarding his future. Heteronormativity in long-term care and the absence of LGBT specific services in Ireland was described by Sean as a barrier to accessing long-term care. The importance of interacting with others who he shared his experiences and values in a long-term care facility was highlighted by Sean.

> *"I don't want to be in any place where I have to explain myself, apologise for anything, retreat to a closet… I don't want to be sitting in around and among heterosexual seniors talking about their children and grandchildren … That was not my lived experience."* (Sean)

Participants described living in a "heteronormative world" (Liam), where they needed to come out as others assumed that they were straight. Heteronormativity was a barrier to accessing care and raised concerns regarding the future.

c. Inaccessibility

The overall physical inaccessibility of the city where Sean lived was noted as a barrier to participation. Physical inaccessibility placed restrictions on where Sean could go, what he could do and accelerated fears concerning declining health.

> *"Oh my God, have you walked on an Irish footpath recently? … Some of those pavers … they look lovely and all, but some of them are very slippery… I'm at the point now where… it's broken hip time... So there's the challenge of that stairs, accessibility, you know… Did you know the City Library does not have a lift?" (Sean)*

Mike discussed the social inaccessibility of gay spaces which have been invaded by hen parties. Lack of respect by individuals in gay spaces, eliminates the sense of safety they once provided for gay people.

> *"Gay bars in smaller cities kind of were invaded by hen parties and, you know, places for people (heterosexuals) to go where they didn't feel threatened by people in there, which is fine… but then it becomes more of that and less of the other… I suppose it's more about people being respectful of spaces."* (Mike)

Social inaccessibility due to the attitudes and culture present in certain sports was also discussed. Most participants describe engaging in solitary sports to keep fit. Sean states that it was "the hypermasculinity of organized sport" that prevented him from participating in team sports. Mike states that team sports were unsafe spaces when he was growing up.

> *"Team sports for me were certainly, you know, not fun safe spaces, so I never got into sports"* (Mike).

On the other hand, in physically and socially accessible places, free from homophobia and heteronormativity, people felt comfortable and could be open about their sexuality and free from worry or concern. Comfortable environments facilitated occupational participation.

> *"I don't want to go anywhere where I feel uncomfortable you know, or where I have to check myself … Whereas if you're at a gay event, where you don't have that worry or concern ... everybody has the same understanding … and people may have similar journeys. There may be more commonality with somebody life experience."* (Mike)

Comfort was present in environments where there was a shared understanding between individuals, for example at gay events. The accessibility of certain occupations was influenced by attitudes held by others present.

Occupations that took place in unsafe spaces were avoided, which highlights the importance of having safe spaces. As described by the participants above, safe spaces are places without homophobia and heteronormativity, that were physically and socially accessible.

3. Social networks

Supportive social networks were an important feature influencing occupational participation. Three subthemes emerged under social networks: family, friends, and LGBT community involvement.

a. Family

The key role of family was providing participants with emotional and social support. Partners were shown to influence occupational participation.

> *"My partner is big into cycling, so he's taken me on cycling the Greenways a few times… That's more me being dragged down, rather than something I want to do myself."* (Pat)

For some participants, biological family members were supportive and facilitated occupational participation. Family members took over care of pets which allowed travel.

> *"My sister and I would always been a little bit closer anyway. So, I'd be in contact with her lot. I got two cats. When we are away, she moves into our house, so we don't have send them out, which is great."* (Mike)

For other participants this was not the case. Friends filled the role of family in Sean's life. Sean's "rainbow family" was made up of those who have a shared understanding. Friends provided emotional and social support and supported occupational participation.

> *"I grew up, as many in my generation did in an Irish Catholic, alcoholic, dysfunctional family of origin. It wasn't all awful but it was loud, sometimes abusive… but here in my rainbow family of choice, these are the people that I choose to affiliate with now, people who understand me and … speak the same language. We don't have to explain. We don't have to apologize... We celebrate who we are, together, you know… I've lived my life with my family of origin now I want to live it with my family of choice, my rainbow family."* (Sean)

For some participants biological family members provided emotional support and enabled participation in valued occupations. For others, chosen family members fulfilled this role.

b. Friends

Socialising with friends was important to participants. Meeting friends for dinner or coffee and attending "events with friends" (Mike) were valued occupations.:

> *"dinner with my friend on a Tuesday night, its neither for fun nor relaxation it's just a fulfilling and enjoyable. Good company. That kind of thing."* (Pat)

Participants engaged in occupations to make friends and expand their social networks.

> *"I joined the choir as a social thing to meet new people."* (Pat)

Occupations that involved socialising with friends were highlighted as meaningful to the participants. Friends played an important role in the lives of participants and were actively sought out.

c. LGBT community involvement

Friendships with other LGBTQ community members were found to be essential. Most participants attended LGBT specific groups and events. The inclusive environment was beneficial to participants and encouraged participation as Mike illustrates:

> *"I suppose it just feels inclusive. It's nice not to feel like the minority" (*Mike)

LGBT groups and events provided participants with opportunities to meet new people and form connections with individuals who share similar interests.

> *"Having been away for a year, I still have a few pals, but I've had to rebuild. So I've had to completely rebuild … the (local LGBT organisation) for example I purposely contacted them."* (Edward)

Conversations with those who shared their life experiences and interests had positive outcomes.

> *"Just talking with the people and somehow you think about things in a different way and you have different ideas."* (James)

Commonality between LGBT individuals at these groups and events was one factor that encouraged participation.

> *"Whereas if you're at a gay event, where you don't have that worry or concern... There may be more commonality with somebody life experience and, you know, to have that … is important. I think."* (Mike)

Social networks made up of family, friends, and other LGBT community members influenced occupational participation. LGBT community organisations and events provided safe spaces for gay men to engage in meaningful conversations and to build connections with others who share similar values, interests, and experiences.

Discussion

The aim of this study was to explore the influences on older gay men's occupational participation. The data revealed that similar experiences can have different meanings for different individuals and thus personal contexts must be considered. This discussion further explores the influences of life journeys, safe spaces and social networks on occupational participation for a sample of older gay men living in the south of Ireland.

Life Journey and Occupation

Past experiences influenced participants' identity and in turn the occupations they engaged in. Life journeys culminated in participants developing resilience and a positive outlook through overcoming barriers faced in the past. In the past, occupations were done to fit in, and participants had to hide their sexual orientation to prevent homophobia. For all participants, it was important to help others that are going through situations like those they experienced in the past. The positive outlook towards aging

suggested by participant responses, supports the findings of Fenkl and Rodgers (2014) that older gay men had a great deal of optimism regarding aging, despite adverse past experiences. Law (2002) outlines various personal factors influencing occupational participation, such as an individual's skills, preferences and their sense of control and competence, however the influence of past experiences on these personal factors is overlooked and further research is warranted in an LGBT context. Akin to previous research, participants in this study reported participating in occupations that put them in a position to help other people struggling with issues relating to their sexual orientation and found it rewarding to make a difference in the lives of others (Fenkl & Rodgers, 2014).

Participants in the current study abandoned organized religion and shaped a personal sense of spirituality. Participants used both group and solitary occupations to attain a spiritual connection, as found in previously conducted research among this population (Beagan & Hattie, 2015). Unlike Beagan and Hattie (2015) who found that some participants remained in the religions of their upbringings, all of the participants in the current study identified as agnostic or atheist.

Unsafe Spaces and Occupation

Places without homophobia and heteronormativity, that were physically and socially accessible, were considered safe spaces for participants and facilitated occupational participation. In unsafe spaces, participants experienced fears of homophobia and had to hide their sexual orientation to avoid homophobia. Homophobic attitudes in religious institutions such as schools and hospitals were described by participants, findings suggest that occupational participation in these places was discontinued or limited as a result. Similarly, heteronormativity was described as a barrier to accessing long-term care by Sean. Heteronormativity was outlined as a reason for coming out to new people and was actively avoided by Liam who wore LGBT bracelets to get others to "cop on". The accessibility of the physical environment is a challenge faced by older adults, regardless of their sexual orientation. In the current study, the two oldest participants highlighted changes in their health associated with the aging process and described how this impacted on their ability to participate in meaningful occupations, such as going to the library for Sean.

Similar to the findings of Brotman et al., (2007) participants in this study report fearing and experiencing homophobia and heteronormativity while participating in meaningful occupations. Research illustrates the presence of negative physical and psychological consequences associated with experiencing victimisation due to one's sexual orientation (Garnets et al., 2003). Interestingly, Edward

describes experiencing enhanced confidence in his self-defence skills and receiving support from his local community. Edwards experience parallels findings that anti-gay victimisation can provide opportunities for personal development, as well as risks for impairment (Garnets et al., 2003). In line with the findings of Czaja et al., (2015) participants attributed societal attitudes to religious institutions and encountered legal discrimination in schools and hospitals. Robinson, (2016) found that fears of being ostracised for their sexuality were strongest when men spoke about aged-accommodation settings. Only one participant, Sean outlined fears about accessing residential care, however this may be because all other participants were under 65 years old. Comparable to previous findings, heteronormativity was regularly encountered by participants, as outlined by Edward in his workplace, heteronormativity was seen as a factor that forced individuals to share their sexual orientation with each new acquaintance (Bergan-Gander & von Kurthy, 2006; Twinley, 2014). Rankow, (1997) argued that constantly having to reveal their sexual orientation to others as they participate in work or leisure activities may cause further stress for gay people. This may be why Liam has adopted a way to avoid having to formally come out to each person he meets. The physical inaccessibility of the city placed restrictions on where Sean could go and what he could do. As outlined by Law (2002), occupational participation is affected by location and the built environment, which is constructed to suit the needs of the average person. Accessibility issues in the physical environment are faced by aging individuals regardless of their sexual orientation.

The social accessibility of occupations and environments was highlighted as a factor influencing participation. Gay bars have been described as important safe spaces for occupational participation for gay men and women (Devine & Nolan, 2014). However, the invasion of these safe spaces may reduce participation as outlined by Mike. The invasion or loss of safe spaces for gay men may cause occupational deprivation, which could have negative impacts on health and wellbeing (Wilcock 1998). Previous research indicates that gay men are underrepresented in traditional `masculine' team sports (Elling, & Janssens, 2009). Similarly, participants in the current study reported undergoing negative experiences while engaging in sport. Furthermore, in line with the findings of Elling, & Janssens (2009), spaces where gay men could participate in sports without being confronted with heteronormativity and homophobia were sought out, many participants found this space in local LGBT community organisation

Social Network and Occupation

Family, friends, and LGBT community involvement influenced occupations for participants. Occupations involving friends were meaningful and friends were actively sought out when not present in their life. Family, whether biological or chosen, supported participants to partake in valued occupations. Meeting friends for dinner or coffee and attending events with friends were valued occupations. Friends played an important role in the lives of participants and were actively sought out. LGBT community organisations and events provided safe spaces for gay men to engage in meaningful conversations and to build connections with others who share similar values, interests, and experiences. Previously, Law (2002) has outlined that access to social support plays an important role in facilitating participation. In alignment with the findings of Fenkl & Rodgers, (2014), this study found that family members, partners and friends played a significant role in the lives of participants, provided emotional support and influenced occupational participation.

Increased levels of loneliness and isolation are reported among older LGBT adults (Kuyper & Fokkema, 2010). On the contrary, loneliness and isolation were not reported by any of the participants in the current study. The majority of participants were linked with a local LGBT organisation and this may be why isolation and loneliness were not encountered among the current sample of older gay men. LGBT community organisations provided safe spaces where individuals can meet new people, engage in meaningful conversations and valued occupations. Relationships with other LBGT community members have been found to provide a sense of safety and confidence (Heaphy et al., 2004), which may be why participants sought out the LGBT community organisation.

Limitations of this study

Three important limitations in the current study are recognised. Firstly, findings are based on data gathered from only six participants, and therefore cannot be generalised to the wider population of middle-aged and older gay men. Due to the time restrictions, member checking was not completed as planned. Furthermore, five out of the six participants were recruited through a local LGBT organisation. The sensitive nature of the research topic made it difficult to recruit participants, it may be that participants recruited were those who felt more confident and comfortable discussing their sexual orientation.

Implications for practice and research.

The findings of this research indicate several factors that influenced occupational participation for participants, which adds to the understanding of sexual orientation in occupation. Occupational participation is possibly shaped by participants' life journeys, the presence of safe spaces and social

networks. Occupations were utilised in different ways by participants. Occupations to hide, to express and to reaffirm participant sexual orientation were described throughout their life journeys.

Findings reinforce the assumption that sexual orientation is integral to the study of occupations and a core theme that affects occupations, their meaning and the environmental opportunities and constraints for participation in occupations (Jackson, 1995). It is essential that safe spaces exist in healthcare settings that are inclusive and accessible for aging gay men and women in Ireland. Healthcare practitioners need to be aware of the negative influences of homophobic and heteronormative attitudes, to avoid making assumptions when working with LGBT individuals. Occupational therapists may consider building links with local LGBT organisations in order to support clients to build supportive social networks and to engage in meaningful occupations in a safe space.

As the population of gay older adults grows in terms of size and visibility, the need for evidence-based knowledge regarding the issues relating to this population group equally grows. As outlined above, occupational therapists need to understand the importance of sexual orientation and how it influences occupational participation for LGBT clients. Further research is warranted to understand the role of past experiences on current occupational participation for this population. Facilitators and barriers present in the various environmental contexts (physical, social, political) negotiated by older gay men and the related effects on occupational participation requires further investigation.

Dissemination of results

A copy of the final research report will be submitted to the Community Access and Research Links (CARL) for publication online. A separate report will be developed and will be sent to the Gay Project (Appendix N), outlining what steps they can take to address older gay men's concerns and to support participation in meaningful occupations. Furthermore, an online poster presentation for Gay project members will take place in June 2020.

Conclusion

Findings outline how life journeys, safe spaces and social networks can influence occupational participation for older gay men. These factors may be considered by OTs when working with LGBT clients to plan effective and client-centred interventions. Several barriers to occupational participation, such as homophobia and heteronormativity, were outlined and must be addressed to prevent occupational deprivation among gender and sexual minority groups. Furthermore, LGBT community organisations were found to enable occupational participation by providing various groups and

activities in a safe space. Sexual orientation shaped the meaning and experience of occupation for participants, which highlights the importance of considering sexual orientation in occupational therapy theory and practice.

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Appendices

Appendix A: Interview Question Guide

Daily Routine

Q1. Describe a typical day in your life?

a. What is satisfying about your daily routine?

i. How so?

b. What, if anything, would you change about your routine?

c. Is there anything about being gay that affects your daily routine?

Activities (Occupations)

Q2. What activities do you participate in for fun?

a. Do you think your sexual orientation has any impact on this?

i. How does/did your sexual orientation affect your participation in this activity?

b. What is the meaning or importance of this activity to you?

Q3. What activities do you participate in to relax?

a. Do you think your sexual orientation has any impact on this?

i. How does/did your sexual orientation affect your participation in this activity?

b. What is the meaning or importance of this activity to you?

Q4. Do you participate in any spiritual activities?

a. Do you think your sexual orientation has any impact on this?

i. How does/did your sexual orientation affect your participation in this activity?

b. What is the meaning or importance of this activity to you?

Q5. Do you participate in any sports activities?

a. Do you think your sexual orientation has any impact on this?

i. How does/did your sexual orientation affect your participation in this activity?

b. Are there any positive/negative impacts of participating in this activity?

c. What is the meaning or importance of this activity to you?

Q6. Do you currently participate in paid employment activities? Or in the past?

a. If at all, how does/did your sexual orientation affect your participation in this activity?

b. What are the positive/negative effects of participating in this activity/ not participating in this activity?

c. What is the meaning or importance of this activity to you?

Q7. Do you participate in any volunteer activities?

a. Do you think your sexual orientation has any impact on this?

   i. How does/did your sexual orientation affect your participation in this activity?

b. What is the meaning or importance of this activity to you?

Q8. Do you currently participate in any educational activities?

a. Would you like to participate in further education?

   i. Why?

   ii. What has prevented you in the past?

b. Do you think your sexual orientation has any impact on this?

c. How does/did your sexual orientation affect your participation in this activity?

d. What is the meaning or importance of this activity to you?

Q9. Do you participate in any group activities?

a. Do you currently participate in any gay groups?

b. Have you been a member of any gay groups in the past?

   i. Why did you choose to participate in the group?

   ii. What was the meaning of participating in this activity to you?

c. Why do you not/have you not participated in any gay groups?

d. Would you consider participating in a gay group? Why?

Q10. Do you like to participate in any outdoor activities?

a. Do you think your sexual orientation has any impact on this?

b. How does/did your sexual orientation affect your participation in this activity?

c. What is the meaning or importance of this activity to you?

Q11. Are there any activities you don't do now that you would like to participate in?

a. Why would you like to participate in this activity?

b. What has stopped you from partaking in this activity previously?

Environment (physical, social, cultural, virtual, political)

Q12. Physical

a. Does anything in your physical environment (Natural and built) impact your daily activities?

b. What environmental factors enable you to do the things you want to do?

c. Does anything in the physical environment prevent you from doing the things you want to do? If so, what and how?

Q13. Social Environment

a. Does anything in your social environment (friends and family) impact your daily activities?

b. What environmental factors enable you to do the things you want to do?

c. Does anything in the environment prevent you from doing the things you want to do? If so, what and how?

Q14. Cultural Environment

a. Does anything in the cultural environment (beliefs and values in Irish society) impact your daily activities?

b. What environmental factors enable you to do the things you want to do?

c. Does anything in the environment prevent you from doing the things you want to do? If so, what and how?

Q15. Virtual Environment

a. Does anything in your virtual environment (technology, social media and other apps) impact your daily activities?

b. What environmental factors enable you to do the things you want to do?

c. Does anything in the environment prevent you from doing the things you want to do? If so, what and how?

Q16. Political and Economic Environment

a. Does anything in the political and economic environment (housing, healthcare, policy) impact your daily activities?

b. What environmental factors enable you to do the things you want to do?

c. Does anything in the environment prevent you from doing the things you want to do? If so, what and how?

Q17. Well that concludes the interview questions. Is there anything further that you would like to add?

Q18. Do you have any questions for me?

Would you like to participate in member checking? Would you like to attend the poster presentation?

Thank you for giving up your time to participate in the interview.

Daily Routine

Q1. Describe a typical day in your life?

d. What is satisfying about your daily routine?

ii. How so?

e. What, if anything, would you change about your routine?

f. Is there anything about being gay that affects your daily routine?

Activities (Occupations)

Q2. What activities do you participate in for fun?

c. Do you think your sexual orientation has any impact on this?

i. How does/did your sexual orientation affect your participation in this activity?

d. What is the meaning or importance of this activity to you?

Q3. What activities do you participate in to relax?

c. Do you think your sexual orientation has any impact on this?

i. How does/did your sexual orientation affect your participation in this activity?

d. What is the meaning or importance of this activity to you?

Q4. Do you participate in any spiritual activities?

c. Do you think your sexual orientation has any impact on this?

i. How does/did your sexual orientation affect your participation in this activity?

d. What is the meaning or importance of this activity to you?

Q5. Do you participate in any sports activities?

d. Do you think your sexual orientation has any impact on this?

i. How does/did your sexual orientation affect your participation in this activity?

e. Are there any positive/negative impacts of participating in this activity?

f. What is the meaning or importance of this activity to you?

Q6. Do you currently participate in paid employment activities? Or in the past?

d. If at all, how does/did your sexual orientation affect your participation in this activity?

e. What are the positive/negative effects of participating in this activity/ not participating in this activity?

f. What is the meaning or importance of this activity to you?

Q7. Do you participate in any volunteer activities?

c. Do you think your sexual orientation has any impact on this?

i. How does/did your sexual orientation affect your participation in this activity?

d. What is the meaning or importance of this activity to you?

Q8. Do you currently participate in any educational activities?

e. Would you like to participate in further education?

iii. Why?

iv. What has prevented you in the past?

f. Do you think your sexual orientation has any impact on this?

g. How does/did your sexual orientation affect your participation in this activity?

h. What is the meaning or importance of this activity to you?

Q9. Do you participate in any group activities?

e. Do you currently participate in any gay groups?

f. Have you been a member of any gay groups in the past?

iii. Why did you choose to participate in the group?

iv. What was the meaning of participating in this activity to you?

g. Why do you not/have you not participated in any gay groups?

h. Would you consider participating in a gay group? Why?

Q10. Do you like to participate in any outdoor activities?

d. Do you think your sexual orientation has any impact on this?

e. How does/did your sexual orientation affect your participation in this activity?

f. What is the meaning or importance of this activity to you?

Q11. Are there any activities you don't do now that you would like to participate in?

c. Why would you like to participate in this activity?

d. What has stopped you from partaking in this activity previously?

Environment (physical, social, cultural, virtual, political)

Q12. Physical

a.Does anything in your physical environment (Natural and built) impact your daily activities?

b.What environmental factors enable you to do the things you want to do?

c.Does anything in the physical environment prevent you from doing the things you want to do? If so, what and how?

Q13. Social Environment

a. Does anything in your social environment (friends and family) impact your daily activities?

b. What environmental factors enable you to do the things you want to do?

c. Does anything in the environment prevent you from doing the things you want to do? If so, what and how?

Q14. Cultural Environment

a. Does anything in the cultural environment (beliefs and values in Irish society) impact your daily activities?

b. What environmental factors enable you to do the things you want to do?

c. Does anything in the environment prevent you from doing the things you want to do? If so, what and how?

Q15. Virtual Environment

a. Does anything in your virtual environment (technology, social media and other apps) impact your daily activities?

b. What environmental factors enable you to do the things you want to do?

c. Does anything in the environment prevent you from doing the things you want to do? If so, what and how?

Q16. Political and Economic Environment

a. Does anything in the political and economic environment (housing, healthcare, policy) impact your daily activities?

b. What environmental factors enable you to do the things you want to do?

c. Does anything in the environment prevent you from doing the things you want to do? If so, what and how?

Q17. Well that concludes the interview questions. Is there anything further that you would like to add?

Q18. Do you have any questions for me?

Would you like to participate in member checking? Would you like to attend the poster presentation?

Thank you for giving up your time to participate in the interview.

Appendix B: Recruitment Poster

CALL FOR RESEARCH PARTICIPANTS

ARE YOU AN OLDER GAY MAN?

We are trying to learn more about the daily activities of older or senior gay men. If you would like to participate in an interview please feel free to contact the researcher using the details below.

Contact:
Joy Kelleher
4th Year Occupational Therapy Student
University College Cork
Email:116320661@umail.ucc.ie
Phone: 0858378317

Appendix C: Information Sheet

University College Cork, Ireland
Coláiste na hOllscoile Corcaigh

Department of Occupational Therapy and Occupational Science,
Brookfield Health Science Complex,
University College Cork,
College Road,
Cork

09/09/2019

Dear Sir,

We are asking you to take part in a research study because we are trying to learn more about the supporting and inhibiting factors that influence older gay men's daily activities.

This research aims to explore older gay men's experiences engaging in occupation. In occupational therapy, the word occupation refers to any meaningful way in which you occupy your time. Occupations can fall into a range of areas such as **self-care** (for example, washing or eating), **leisure** (e.g. sports or reading) and **productivity** (e.g. volunteering or formal employment). We are trying to explore how sexual orientation can have an impact on one's choices and experiences in later life.

If you agree, you will be asked to participate in a semi-structured interview that should take around one and a half hours. You can change your mind and decide that you will not take part in the study at any time before, during or up to 1 month after the interview has taken place. You do not have to provide a reason why you will not be taking part. You will retain full anonymity. We will ensure this by using pseudonyms (pretend names, alternative names) and by eliminating any identifying information from the final study. The final study will be published online.

After the interview process has been completed, we will transcribe all interview materials. You will be asked if you would like to review your interview transcript it can be sent to you to ensure that it is an accurate interpretation. Data will be held for ten years after collection and will be stored in a locked cabinet and on an encrypted computer. After a ten-year period, the information will be permanently erased.

In the interview, sensitive topics may arise through discussion. If you are uncomfortable with any question, you have the choice not to answer. The interview can also be postponed until a further date if necessary. The researcher can provide details of LGBT support services on request so that support can be obtained following the interview.

Kind Regards,

_____

Joy Kelleher

4th Year Occupational Therapy Student

If you would like to find out more about the study, you can contact me by phone or email.

Contact Details:

Researcher	Supervisor
Joy Kelleher	Prof. Jeanne Jackson
116320661@umail.ucc.ie	j.jackson@ucc.ie
0858378317	

Appendix D: Consent Form

This is to confirm that (please tick the box):

- ☐ I have read the attached information letter which explains the research study.
- ☐ I understand that the letter is asking me to consent to my participation in an interview.
- ☐ I understand that all the information gathered will be kept strictly confidential, which means that my name will not be included in any written reports, publications or presentations.
- ☐ I understand that in addition to my participation being voluntary, I am free to stop participating in the research at any time before, during or up to 1-month post interview, without reason.
- ☐ I understand that this research will be written in a final report and the researchers might publish the findings of the study in the Irish Journal of Occupational Therapy.
- ☐ I understand that the researchers might present the information at conferences and seminars.

I freely consent for my participation in the study.

Name: _____

Signature: _____

Date: _____

Appendix E: Participant Demographics

Number	Pseudonym	Age	Interview length
1.	Edward	56	01:15:03
2.	Sean	65	02:02:41
3.	James	56	56:01
4.	Mike	44	59:30
5.*	Mark	32	01:16:38
6.	Liam	62	02:14:24
7.	Pat	56	38:20

*Audio was not able to be transcribed.

Appendix F: Ethics Application Form

UCC University College Cork, Ireland Coláiste na hOllscoile Corcaigh	**ETHICS APPROVAL FORM** **Social Research Ethics Committee (SREC)** ✉ srec@ucc.ie

Introduction

UCC academic staff and postgraduate research students who are seeking ethical approval should complete this approval form. Ethical review by the Social Research Ethics Committee (SREC) is required where the methodology is not clinical or therapeutic in nature and proposes to involve:

- direct interaction with human participants for the purpose of data collection using research methods such as questionnaires, interviews, observations, focus groups etc.;
- indirect observation with human participants for example using observation, web surveys etc.;
- access to, or utilisation of, anonymised datasets;
- access to, or utilisation of, data concerning identifiable individuals.

SREC @ UCC considers itself an enabling committee, promoting strong research ethics amongst UCC's community of staff and student researchers. We are open to all types of research in the social research domain and if your research approach does not readily fit into this research form, do not be discouraged. Please add additional relevant notes to convey what you think is pertinent about the ethical aspects of your study.

Application Checklist

This checklist includes all of the items that are required for an application to be deemed complete. In the event that any of these are not present, the application will be returned to the applicant ***without*** having been sent for review. Please ensure that your application includes all of these prior to submission. Thank you and best of luck with your research.

All relevant files are combined into **one PDF** file (SREC application form, consent forms, information sheets, data collection instruments, permission letters, etc.)	Yes / No
Completed SREC Application Form	Yes / No
Information Sheet(s) / Information Statement (i.e. at the beginning of an electronic survey) included	Yes / No
Consent Sheet(s) / Consent Statement (i.e. at the beginning of an electronic survey) included	Yes / No

Data Collection Instrument: Psychometric Instruments / Interview Guide / Focus Group Schedule / Survey Questionnaire / etc. included	Yes / No
Copy of permission letters to undertake research from relevant agencies/services included (if available)	Yes / No
If you are under academic supervision, your supervisor(s) have approved the wording of and co-signed this application prior to submission	Yes / No
If this is a resubmission, all the revised and new text is highlighted in yellow	Yes / No

APPLICANT(S) DETAILS

Name of UCC applicant(s)	Joy Kelleher	**Date**	19/09/2019
Department / School / Research Institute / Centre / Unit / College	Department of Occupational Science and Occupational Therapy, University College Cork	**Contact No.**	0858378317
Correspondence Address	Department of Occupational Science and Occupational Therapy, Brookfield Health Science Complex, University College Cork, College Road, Cork	**Email Address**	116320661@umail.ucc.ie
Name and year of course (students only)	Occupational therapy 4th year	**Name of supervisor(s)** (students only)	Prof. Jeanne Jackson
Is this a resubmission?	Yes	SREC Log No. (if known):	
What type of SREC approval are you seeking?	Full approval ☒ Outline approval ☐ Funding approval ☐		

Obtaining ethical approval from SREC does not free you from securing permissions and approvals from other institutional decision-makers and agency ethical review bodies. These bodies may accept the SREC approval, but researchers are responsible for ensuring they are compliant in advance of collecting data.

Project working title	Facilitators and barriers of occupational participation among older gay men in Ireland.

If this is a collaborative project / community-based participatory research project / *joint* application with another agency, please complete this additional section:

Names of research partners / civil society organisations collaborating on this project (this section must be completed for participatory / community-based participatory research studies)	Gay Project
Agency contact person and position	Michael O Donnell
Agency address	4 South Terrace, Ballintemple, Cork, T12 DP46
Details of the partnership (roles, type of partnership, etc.)	This project is a collaboration between three parties; The Community-Academic Research Links (CARL), The Gay Project and the researcher. CARL invites non-profit, voluntary or community organisations to suggest potential research topics that can be pursued by students on their behalf across a wide range of academic disciplines in UCC. CARL is responsible for reviewing the student's application form, arranging a meeting between all the relevant parties and creating the research agreement. After the research report has been completed CARL will publish a copy of the report on their website. The Gay Project will inform and recruit participants in various ways, both those who are service users of the Gay Project and possible others who are not actively participating through snowball recruitment. The researcher and the organisation will collaboratively agree on the questions for interviews. The researcher will meet with the Gay Project in January 2020 with a preliminary list of interview questions (Appendix A) which may be modified after discussion. The researcher will be responsible for devising the research question, reviewing the literature, choosing the methodology and methods, seeking ethical approval,

	conducting the research, analysing the findings and developing a final research report. There are no letters of permission from the collaborating partners needed as the partners have initiated the study. The Gay Project contacted the CARL in order to find students looking to conduct research. The researcher applied to conduct relevant research in order to address the research needs of the Gay Project and was accepted. A research agreement outlining the roles of both parties involved was signed by the researcher, the Gay Project representative and the CARL representative. The final research poster and report will acknowledge the Gay Project as a research partner. One dissemination will be done with the community group outside UCC (to be planned nearer to the time).

ETHICAL APPROVAL SELF-EVALUATION

If your answer falls into any of the shaded boxes below, please address each point later on in the application form

		YES	NO
1	Do you consider that this project has significant ethical implications?	✓	
2	Will you describe the main research procedures to participants in advance, so that they are informed about what to expect?	✓	
3	Will participation be voluntary?	✓	
4	Will you obtain informed consent in writing from participants?	✓	
5	Will you tell participants that they may withdraw from the research at any time and for any reason, and (where relevant) omit questionnaire items / questions to which they do not wish to respond?	✓	
6	Will data be treated with full confidentiality / anonymity (as appropriate)?	✓	
7	Will data be securely held for a minimum period of ten years after the completion of a research project, in line with the University's *Code of Research Conduct* (2016)?	✓	
8	If results are published, will anonymity be maintained and participants not identified? (see Q. 30 below regarding open data considerations, if relevant)	✓	
9	Will you debrief participants at the end of their participation (i.e. give them a brief explanation of the study)?	✓	

10	Will your project involve deliberately misleading participants in any way?		✓
11	Will your participants include children / young persons (under 18 years of age)?		✓
12	If yes to question 11, is your research informed by the UCC *Child Protection Policy*? http://www.ucc.ie/en/ocla/policy/		
13	Will your project require you to carry out "relevant work" as defined in the National Vetting Bureau (Children and Vulnerable Persons) Acts 2012 to 2016?		✓
14	Do you require official Garda Vetting through UCC before collecting data from children or vulnerable adults?	✓	
15	Will your participants include people with learning or communication difficulties?		✓
16	Will your participants include patients / service users / clients?		✓
17	Will your participants include people in custody?		✓
18	Will your participants include people engaged in illegal activities (e.g. drug taking, illegal Internet behaviour, crime, etc.)?		✓
19a	Is there a realistic risk of participants experiencing either physical or psychological distress?	✓	
19b	Is there a realistic risk of the researcher experiencing either physical or psychological distress?		✓
20	If yes to question 19a, has a proposed procedure for linking the participants to an appropriate support, including the name of a contact person, been given? (see Q. 33)	✓	
21	If yes to question 19b, has a proposed procedure/support structure been identified?		✓
22	Are your research participants students with whom you have some current/previous connection (module coordinator, research supervisor, professional tutor, etc.)?		✓
23	Will your study participants receive payment / gifts / voucher / etc. for participating in this study?		✓

DESCRIPTION OF THE PROJECT

*Ethical review requires that you **reflect** and seek to **anticipate** ethical issues that may arise,*

rather than reproduce copious text from existing research proposals into these boxes.

*Entries should be **concise** and relevant to the point / question.*

24. Very brief description of your study (15-25 words max.)
[i.e. This is a qualitative study of primary school teachers' attitudes towards religious teaching using focus groups to collect original data]

This is a qualitative study, using semi-structured interviews to generate information about the facilitators and barriers affecting older gay men's occupational participation.

25. What is your study about? (100-200 words max.)

Focus of the research will be on gay men who identify themselves as 'older', 'elder' or 'senior' (choice of term to be explored with participants during the research process). The researchers aim to explore how older gay men spend their time and what factors affect the choices that they make. We seek to explore age and sexual orientation, among other factors that influence how individuals partake in the activities of daily living (occupational participation).

Research aims:

- To discover what influences older gay men's participation in meaningful occupations?
- To explore what factors, hinder and enable older gay men to participate in meaningful occupation.
- To understand how individuals express their identities through participating in occupations.
- To uncover what needs older gay men have in order to participate in societal activities.
- To see if this populations needs can be met by a local community organisation.

26. What are your research questions?

1. What influences older gay men's participation in meaningful occupations?
2. What are the facilitators and barriers to occupational participation for older gay men?
3. What needs do they have in order to participate in societal activities?
4. Does discrimination based on sexual orientation affect occupational participation? If so, how?
5. What can be done by community support organizations to support older gay men to participate in meaningful occupation?

27. Brief description and justification of methods and measures to be used (attach questionnaire / interview protocol / discussion guide / etc. for **full** SREC approval. **Not** required for SREC outline approval)

Given the nature of the topic, a qualitative methodology with an interpretive phenomenological approach was chosen to allow exploration of individual meanings that the interviewees associate with their daily activities. Phenomenology searches for the underlying meanings within human experience and aims to uncover differences, as well as commonalities in individual perspectives (Carpenter & Suto, 2008). The goal of interpretive phenomenology is to understand the features of human life and the meanings that people associate with their world, by examining language in its cultural context (Carpenter & Suto, 2008). This methodology was deemed appropriate for this current study, as the researcher seeks to explore the meanings behind occupational participation for older gay men, with an emphasis on the social, historical and cultural contexts, and how these contexts can influence the meanings of occupations. Additionally, this concept of phenomenology is in harmony with the client-centred and holistic approach of occupational therapy practice (Bergan-Gander & von Kürthy, 2006).

The researcher will complete semi-structured interviews (Appendix A) with around 5-10 participants. Researchers who have completed similar studies, have encouraged the employment of semi-structure interviews with a small number of participants (Devine & Nolan, 2007). Interviews are estimated to last between 1-2 hours. During the interview, participants will be asked if they are fatigue or stressed and the interview will be adjusted. (See Potential Stress.)

The interviews will take place in the Gay Project building, in UCC or in another location of the participants choosing. It is typical in qualitative research to conduct the research project at a place that is comfortable and convenient for the participant. Among other things, this decreases the power imbalance and shows respect to the participant.

Interviews will be recorded on a Dictaphone. Interviews will be transcribed verbatim in March 2020 after all the interviews have been completed and recorded. Participants will then be invited to review their transcripts to ensure accuracy. Interview transcripts will then be reviewed from March to April 2020. At the end of the data analysis stage, participants will again be asked if they would like to engage in member checking to approve the themes that will be identified through data analysis.

An interpretive thematic approach to data analysis was considered the most suitable method to analyse the meaning of the lived experience of the participants. This method understands, interprets and explains data through the process of deconstruction, which reveals the meanings of the phenomenon (Bergan-Gander & von Kürthy, 2006). The steps involved in an interpretive thematic analytic approach involve identifying, analysing and reporting on patterns present within data (Braun & Clarke, 2006; Carpenter & Suto, 2008).

28. Participants (recruitment methods, number, age, gender, exclusion/inclusion criteria, detail permissions to be sought / secured already)

The participants in this study will include 5-10 men who identify as both older and gay. I have chosen to study older, elder or senior gay men due to the lack of research investigating the experiences and specific needs of this population, within an Irish context. It is hoped that participants from both rural and urban areas will be recruited for the study. As this is a qualitative research study it involves a small number of participants, this will facilitate an in-depth exploration into the experiences of individuals.

There are two methods of recruitment involved in this current research project. The first uses the Gay Project as a gatekeeper to share information about the research project with older gay men who access the service, and will invite them to participate in the research project. Information from men interested in participating will be gathered by the Gay Project, including their name, contact number and home address. The researcher will then use this information to contact potential participants in order explain the study further and ask if they would like to participate. If they choose to participate, the information sheet and consent form will be posted to their address or can be discussed over the phone and the consent form can be reviewed and signed at the beginning of the interview.

The second form of recruitment comes from the use of poster advertisements. A poster inviting older gay men to participate in the study will be dispersed throughout Cork City (Appendix B). Interested men can contact the researcher by phone or email. The potential participants will be contacted by the researcher to explain the study further, answer any questions they may have and ask them if they would like to participate. If they choose to participate, the information sheet and consent form will be posted to their address or can be discussed over the phone and the consent form can be reviewed and signed at the beginning the interview.

Participants will be recruited through purposive sampling, with assistance from a gatekeeper at the Gay Project. Purposive sampling is the selection of individuals with particular experiences and personal traits necessary for addressing the research aims or question (Carpenter & Suto, 2008). In this study, participants will be chosen based on their gender (male), their self-identification with the terms “older”, “elder” or “senior” and their sexual orientation (gay).
If difficulty arises in recruiting participants, snowball sampling will be employed to increase the sample size. Snowball sampling involves the researcher initially identifying one or two participants and asking if they know anyone else who may be interested in participating in the study and who meets the sampling criteria (Carpenter & Suto, 2008).

It is hoped that two types of participants can be recruited for this research; those who are “out of the closet” or who identify themselves as gay to others, and those who remain “closeted” or who do not openly identify as gay or disclose their sexuality to others. An ideal sample size would an equal number of “out” gay men and gay men who are not “out”.

As the researcher hopes to recruit participants who are not openly gay, steps have been put in place to ensure that participants are protected and there is no risk that they could be inadvertently ‘outed’. The participants data will be stored in an encrypted file. Participants will be assigned a pseudonym to protect anonymity. Any identifiable details will be removed from the both the interview transcripts and the final research report. As the interview location is subject to participant choice, they can avail of a private room in University College Cork, if they do not wish to attend the Cork Gay Project building, or the interview can take place at a location of their choosing.

Exclusion criteria:

- Men who are bisexual, heterosexual or transgender
- Gay men who identify as young.
- No capacity to consent.

Inclusion criteria:

- Men who self-identify as elder, older or senior.
- Men who self-identify as gay
- Capacity to provide informed consent.
- Men who are currently living in Ireland

Permissions to be sought/secured: Signed consent will be obtained from participants before the interview. This consent form does not require a witness signature to be completed by the researcher as some participants may sign their consent form at home.

29. Concise statement of *anticipated* ethical issues raised by your project. How do you intend to deal with them? Please address *all* items where your answers fell into a shaded box in the self-evaluation above. (350 words max.)

Wellbeing and safety:

I have received Garda clearance. If any information in the interview indicates potential risk to the safety of the participant, the researcher can provide details to the participant about how to report elder abuse to the Gardai. The researcher can also provide participants with the details of the HSE elder abuse Information Line (1850 24 1850).

Potential stress

It will be explained to the participants that their participation is voluntary, and they can withdraw at any time before, during or up to one month after the interview has taken place. The participants will be informed of this in the information letter and will be reminded at all stages of the research process.
Interviews will be held in the Gay Project, in UCC or in a place chosen by the participant where they feel comfortable. Interviews will be kept brief and to the point, to avoid any unnecessary stress for participants. Participants will be ensured that there is no right or wrong answer to questions, and that it is alright if they do not have an answer.
However, psychological stress may be experienced by participants if the discussion of discrimination, alienation or violence arises. In this case, and at the request of the participant, the researcher can provide the individual information about how to access the LGBT helpline, the Samaritans or HSE psychology services.

Potential lack of clarity:

The researcher will be responsible for providing information about the research itself, and what participation will entail; as well as ensuring that it is understood by participants. Misunderstandings may arise due to the use of occupational therapy vocabulary. For this reason, the researcher will explain relevant occupational therapy terminology to participants prior to the interview and will avoid using these terms when not necessary. Moreover, the researcher will use simple dialogue and communicate at the participant's eye-level. The researchers contact details will be provided on the information letter should participants have any queries that they would like to discuss privately. All information provided in the flyer, the information letter and consent form will use a large size font to enable easier reading for older adults that may have reduced vision.

Potential fatigue and physical discomfort:

To minimise the risk of physical discomfort to participants, the researcher will ensure that the room is accessible, quiet and private. Heating, ventilation, lighting and furniture arrangements will be adjusted to

ensure that they are appropriate for the participants. The researcher will check that the participants are comfortable, and request that it be made known to me if they are to experience any physical discomfort throughout the interview. The researcher will also watch for any signs of physical discomfort and ask if the participant needs a break.

Power Imbalance:
The researcher will take several measures in order to minimise power imbalance between the researcher and participant. In terms of appearance and clothing, the researcher will dress in casual clothing. To make the participants feel relaxed and at ease, the researcher will ensure the environment facilitates a quiet and calm atmosphere. The researcher will also modify their language by using simple dialogue and a friendly tone of voice, to make the interviewee feel more comfortable. It will be made clear to participants that the researcher is looking to learn from their experiences and that they are the experts in the area we will be discussing.

Member checking:
Each participant will be invited to engage in member checking. This will consist of posting the interview transcripts to the participants to ensure an accurate interpretation has been made. This is done to give participants an opportunity to review what they have said, add more information if they want to, and to edit what they said. This allows participants to take an active role in checking the data, thus, ensuring that their views and opinions be accurately portrayed. If the participant agrees they will also be asked to review and approve the themes that will be identified through the data analysis.

30. Data:
(a) What type of data will you be storing?
(b) How and where will you store your data? (provide details for both physical *and* electronic documents). **(c) For how long will you store the data?** (A minimum storage period of 10 years is required)
(d) Who will have access to the dataset? (*Sample* prompts: If you plan to make your raw research dataset available publicly as part of the open data movement, please address your protocol here. For collaborative/community-based participatory research, please address issues such as shared ownership of data, publication of findings, etc. If your funder contractually requires you to give them access to the 'raw' dataset, examine relevant implications, including appropriate anonymisation, protocols for secure access to the dataset, etc.).
(e) If you are planning to analyse an existing dataset, please outline how the original consent process allows for your analysis.

(a) Electronic data will take place in the form of audio recordings and interview transcripts from interviews. Physical data includes participant completed consent forms. In this study we will be collecting data concerning a person's sexual orientation. Under the GDPR (2016) this is viewed as a 'special categories of data' which requires stronger safeguards and can be processed only under specific circumstances. In the current research, the data subject will be required to give informed consent, processing this data is necessary for archiving purposes in the public interest, scientific or historical research purposes and processing is necessary for the provision of health or social care or treatment or the management of health or social care systems and services.
(b) The audio will be moved from the Dictaphone to the researcher's laptop and stored in an encrypted folder. The audio data will then be deleted from the Dictaphone. Physical data will be stored in a locked cabinet in the researcher supervisor's locked office, which is located on the Brookfield Health Sciences Building. All electronic data will be stored in an encrypted folder on the researcher's personal laptop.
(c) The data will be stored for a minimum of 10 years, in accordance with UCCs data storage policy.
(d) The dataset will only be accessible to the researcher and the research supervisor.
(e) Not Applicable

31. Arrangements for informing participants about the nature of the study (cf. Question 3)

An information sheet (Appendix C) and consent form (Appendix D) will be sent to the participants address. It will also provide the researchers contact details so that if questions arise, participants can call or email the researcher appropriately. The consent form will include a list of all elements of the study that require informed consent.

32. How you will obtain Informed Consent? (cf. Question 4 - attach relevant form(s))

The researcher will obtain written signatures from participants, after they have reviewed the information sheet provided and have had an opportunity to discuss any potential concerns they may have. Participants will also be informed that they can withdraw from the study at any time up until one-month post interview.

33. Outline of debriefing process (cf. Question 9). If you answered YES to Questions 19a or 19b, give details here. State what you will advise participants to do if they should experience problems (e.g. who to contact for help).

If psychological stress is experienced and on request of the participant, the researcher can provide details of the LGBT helpline on 1890 929539 or the Samaritans on 116123. If psychological distress is experienced, the researcher can provide details for the participant to access psychology services. If the researcher hears any information that indicates potential risk to the safety of the participant, the researcher can provide details to the participant about how to file a report to the Gardai or how to report elder abuse to the HSE.

34. Estimated start date and duration of project

1st of January 2020 – 20th of May 2020 (estimation)

35. Additional information of relevance to your application

36. Declarations

I/we agree that should there be unexpected ethical issues arising during the course of this study, that I/we will utilise my/our professional/disciplinary code of ethics, and/or notify UCC SREC, where appropriate	Yes
I/we have consulted the UCC *Code of Research Conduct* (2016) and believe my/our proposal is in line with its requirements	Yes
I/we have consulted the UCC *Child Protection Policy* and believe my/our proposal is in line with its requirements	NA

37. Signatures	
UCC Applicant(s)	**Academic Supervisor**
Joy Kelleher	Prof. Jeanne Jackson
Date:	Date:

1. Please submit a *signed* copy this form and all relevant attachments **as one PDF file** to srec@ucc.ie. No hard copies are required.
2. SREC is not primarily concerned with methodological issues, but may comment on such issues in so far as they have ethical implications.

Website links and helpful resources

UCC *Child Protection Policy*	https://www.ucc.ie/en/media/support/ocla/policies/UCCChildProtectionPolicyFINAL.pdf
UCC *Code of Research Conduct*	https://www.ucc.ie/en/media/research/researchatucc/documents/UCCCodeofResearchConduct.pdf
Garda Vetting of UCC Staff	https://www.ucc.ie/en/hr/gardavetting/
UCC Student Vetting Policy	https://www.ucc.ie/en/media/studyatucc/undergrads/downloadabledocumentssection/StudentVettingPolicyandProcedure.pdf
IT Support for UCC Researchers	http://www.ucc.ie/en/it/services/research/
EU Commission, Responsible Research and Innovation & H2020 **RRI Tools Website**	https://ec.europa.eu/programmes/horizon2020/en/h2020-section/responsible-research-innovation http://www.rri-tools.eu /
Irish Qualitative Data Archive (IQDA)	https://www.maynoothuniversity.ie/social-sciences-institute/research/iqda
Irish Social Science Data Archive (quantitative datasets)	http://www.ucd.ie/issda/

Electronic data storage

UCC NAS **(Network-Attached Storage)**	http://www.ucc.ie/en/it/services/networkfilestorenas/
UCC Device Encryption Service	http://www.ucc.ie/en/it/services/encryptionlaptop/

UCC Staff IT Services	http://www.ucc.ie/en/it/services/staff/
HEAnet FileSender	http://www.heanet.ie/services/hosting/filesender

Appendix G: Letter Confirming Ethical Approval

Coláiste na hOllscoile Corcaigh, Éire
University College Cork, Ireland

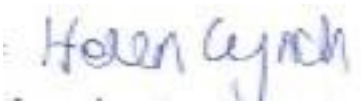
Date: 23rd January 2020

Re: Clinical Therapies: Social Research Ethics Committee Approval

This is to confirm that Facilitators and barriers of occupational participation among older gay men in Ireland, has been approved by the CT-SREC Committee,
Date: 23rd January 2020

Due to COVID-19 the formal letter is unavailable, but this letter is agreed to suffice in lieu of the letter and has been approved by my supervisor:
Jeanne Jackson.

Sincerely,



Helen Lynch
Module Co-ordinator for Research OT4004,
Department of Occupational Science and Occupational Therapy

Appendix H: Sample Analysed Transcripts

Joy: So do you participate in any volunteer activities?

Liam: It definitely was my sexual orientation. I mean, like I joined also on the north main street there is the Cork voluntary thing. And you can sign up for you know, if you sign up with them, they'd send you off things, different events that you might want to or groups you might want to volunteer for. But I found that anything I've done, it's always being related to LBGT issues and groups. I think that's a kind of self explanatory, really, I think anybody volunteering, you're going to volunteer for something that you're interested in. And I mean, I couldn't seem as I'd like to know, volunteering to train a bunch of strait's to play football or something. I wouldn't be interested. There's also in volunteering, I think, to get something back. It's like working with like minded people. And then most of my volunteering has been in sexual health. I've done sexual health courses with the HSE and everything because of being diagnosed HIV. Actually there are both reasons for the ones that I just worked with other LGBT organizations as well. It's because of my history of the difficult journey of being an a minority in society like that if I can help in any way, if my experience can help others to deal with it a bit better like I would hope that that's what I do, it's the main reason my book. I really hope. And because in everything I've done in trying to get out info about HIV and about everything I find when I start a personal story, I have had loads of conversations here to the medical society, the LGBT student body and everything. When you give a personal story it has much more impact than statistics than everything. And I'm hoping theres one woman I know. She's from Sweden. She wrote a book. And and it completely influenced the way things started to change in Sweden when her book came out about HIV. And I think that's for me. If I didn't get back the sense of, you know, sometimes well-being and stuff from volunteering, I wouldn't be doing it because it can be exhausting and it can be damned awful when you're listening to people tell you things that can't be done or not be done. And also one of the biggest things about volunteering. When we were in the other organisation with the support group. And they're the NGO like now I know that they, unlike on like HIV Ireland, they do like pregnancy crisis and abortion counseling and everything. But they get specific money and so part of the budget has to be for this HIV support group. I just found that they didn't involve the people in what they were doing at all. HIV Ireland work very closely with positive now, which is the Dublin group they

LGBT community

past experiences

help others

HIV services

29

at a conference and nobody of us we know it was an important conference because of it was about criminality and HIV in Europe. We've heard nothing. Just like every conference I said who are you getting the information for? And that's why I find volunteering as much as it could be rewarding, anybody who takes it up has to be prepared for the challenges. And again, that's why it comes down to it is not self-promoting. Because sometimes you can just want to give up and walk away. Just think I've done enough. And then you meet somebody who's in a bad way. You think this is why I do it. The reward you get when you meet somebody that you find, like meeting this Muslim guy who's gay, and very religious and positive. It's me at 25. He's only 25 because I was that Catholic young boy struggling with my religion, terrified of family, friends, my society, my culture. And if I can in any way help him like. That's why I do it. That is selfish in some ways, but it's selfish with a benefit for both it work for both. Because I don't think you could keep on volunteering if you weren't getting anything. I think people who say that are lying. You have to get some kind of fulfillment and my best fulfillment is seeing somebody, like we had a woman who used to come to the group and when she first came to us, she wouldn't, she had no thoughts of even telling people about her HIV and everything. And just in January. She got engaged and is married and she was never gonna talk. Never have a relationship, never have anything. And all she did was come to meetings and talk but she talked to other women in the group. And met other women through experience. I was like, this is why you do it, just seeing people's lives turn around. And that's why I think NGOs and stuff who work in that way. Or anybody if you're going into it yourself, is to remember that the people, the experts in the medical experts on, but the expert of living with a condition or something is the person living with it. And if you don't listen to them, I don't see the point in doing what they are doing. It's like because then it's always what we think should be done for you. It might have no relevance to my life. If you listen to somebody closely about what they need, what they want. Then you are going to at least meet them somewhere halfway like. So that's why I volunteer. And I don't think I'll ever stop. There are times I feel like I really want to give up. It happened about three weeks ago. I was in counseling and I was just saying to my councilor, I've just had enough, I said, I'm tired, worn out, I'm not getting anywhere. I had been at a meeting in Dublin and I had a huge part in setting up

Volunteering
rewarding
challenging
similar experience
fulfillment
HIV stigma
helping others
Healthcare

the peer mentoring in Ireland. And this meeting was not about peer mentoring, but there was a crowd from Belfast down and Dublin. And all throughout this conference they kept mentioning peer mentoring. And now Dublin and Belfast were actually setting up the program for this year. And I'm sitting there, listening to the man from Belfast and another woman from HIV Ireland. I was there at the beginning, I set it up why again is Cork, not just me personally being left out. I was like, so I e-mailed everything like and I'm still waiting. And I just said, I just I don't think I can do this anymore. It's like if I don't keep knocking on doors, nothing happens. But you get tired of being the one who's always knocking on the door. And then you go away and you revive and you go back again. It's just you have to keep reminding yourself. That whole thing goes back to that philosophy. Things get tough, things get hard. And I'll do them. It's like really simplifying that about my philosophy. If I'm really enjoying something or you, or anybody, I think, we throw ourselves into it, we love it. So I do when times are bad. Really bad and I get depressed. I wollow for about 24 hours. I give in to it, I cry, I lock the door and I go through the whole shit. And then I go right, now to carry on. I do not try to battle it off, you know. You know, you'll hear from people like, oh, you know, pull yourself together and everything. But no, I'm gonna fall apart for awhile.

philosophy

Joy: I guess in terms of educational activities, do you think that's your sexual orientation has any effect on the MA you're persuing?

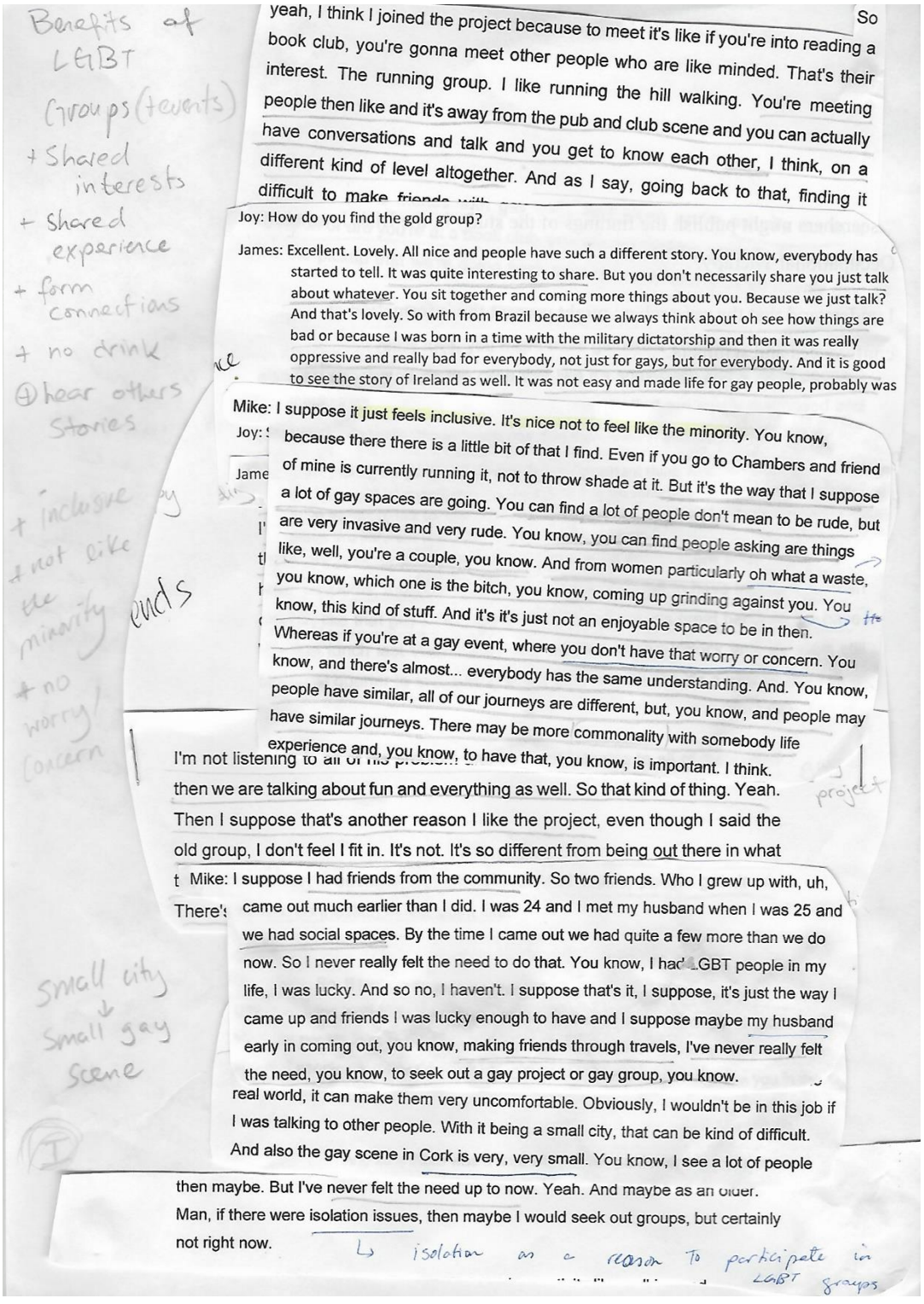
Liam: Yeah, yeah, definitely. Oh, without a doubt. When I when I decided I'm doing the degree, I had to think about what I was doing. You're going back to college at 57 years of age, like no illusions in my head, I hadn't been in college since I done philosophy, and that was way back in the 80s and I was like, oh, so you have to try. And unlike somebody who is doing it like for job and they have to pick some thing, field that they don't even want to study. I took my dead time and why I picked religion was I am not spiritual, I am an atheist, but I am very interested in the religious mind and what makes people think. And that's why I picked philosophy with it, I'm fascinated by the thought process and how people come to their beliefs and how that impacts on society. And because I had grown up in a society that was dominated by the Catholic Church. I decided I would look at contemporary religions. But look at its impact, particularly on LBGTs and one of the greatest things was like we did a lot of queer theory and gender

education

Religion

growing up

Appendix I: Data Display



Benefits of LGBT Groups (events)
+ Shared interests
+ shared experience
+ form connections
+ no drink
+ hear others stories
+ inclusive
+ not like the minority
+ no worry/ concern
small city → small gay scene

yeah, I think I joined the project because to meet it's like if you're into reading a book club, you're gonna meet other people who are like minded. That's their interest. The running group. I like running the hill walking. You're meeting people then like and it's away from the pub and club scene and you can actually have conversations and talk and you get to know each other, I think, on a different kind of level altogether. And as I say, going back to that, finding it difficult to make friends with

So

Joy: How do you find the gold group?

James: Excellent. Lovely. All nice and people have such a different story. You know, everybody has started to tell. It was quite interesting to share. But you don't necessarily share you just talk about whatever. You sit together and coming more things about you. Because we just talk? And that's lovely. So with from Brazil because we always think about oh see how things are bad or because I was born in a time with the military dictatorship and then it was really oppressive and really bad for everybody, not just for gays, but for everybody. And it is good to see the story of Ireland as well. It was not easy and made life for gay people, probably was

Mike: I suppose it just feels inclusive. It's nice not to feel like the minority. You know, because there there is a little bit of that I find. Even if you go to Chambers and friend of mine is currently running it, not to throw shade at it. But it's the way that I suppose a lot of gay spaces are going. You can find a lot of people don't mean to be rude, but are very invasive and very rude. You know, you can find people asking are things like, well, you're a couple, you know. And from women particularly oh what a waste, you know, which one is the bitch, you know, coming up grinding against you. You know, this kind of stuff. And it's it's just not an enjoyable space to be in then. Whereas if you're at a gay event, where you don't have that worry or concern. You know, and there's almost... everybody has the same understanding. And. You know, people have similar, all of our journeys are different, but, you know, and people may have similar journeys. There may be more commonality with somebody life experience and, you know, to have that, you know, is important. I think.

I'm not listening to all of his problem

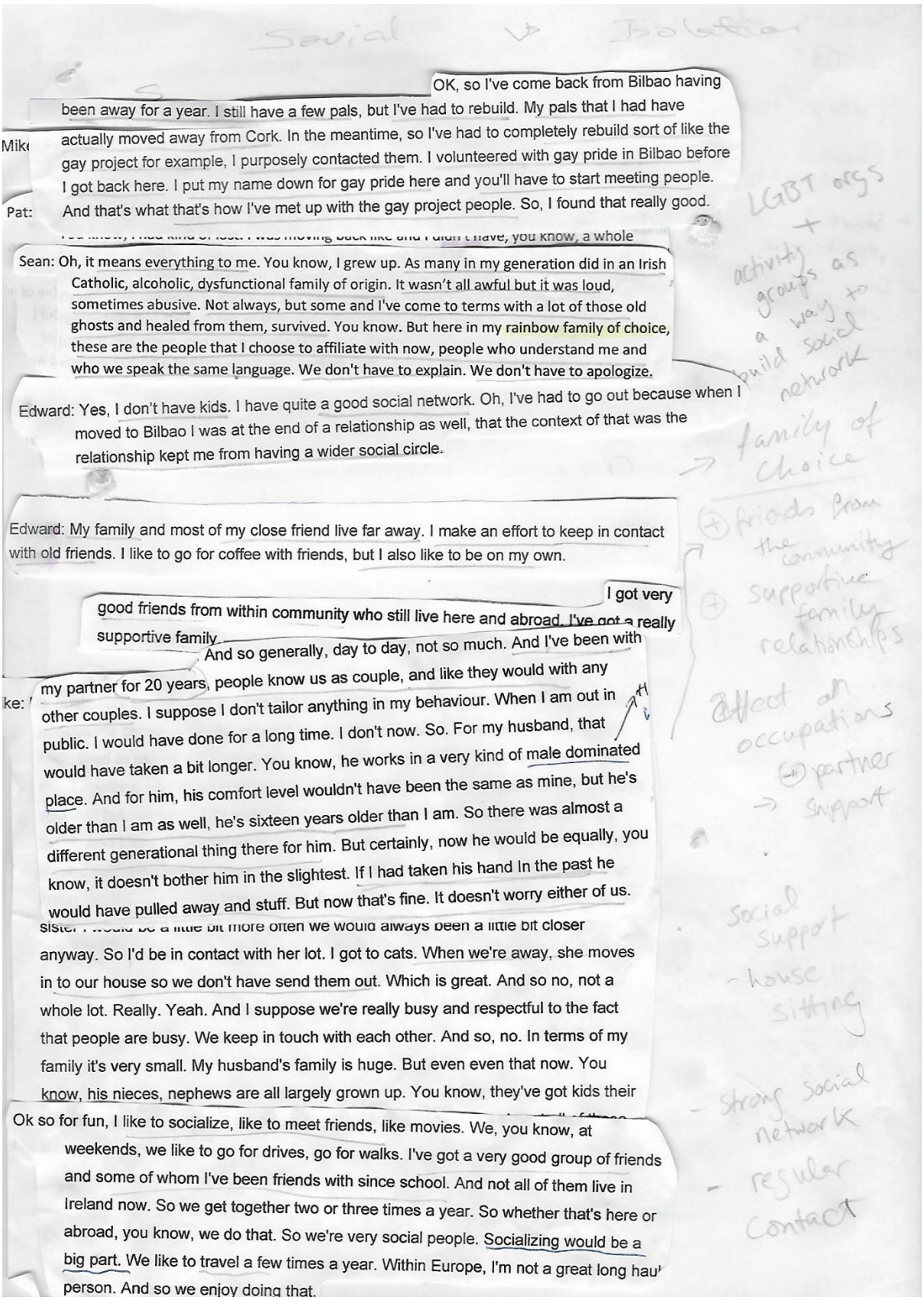
then we are talking about fun and everything as well. So that kind of thing. Yeah. Then I suppose that's another reason I like the project, even though I said the old group, I don't feel I fit in. It's not. It's so different from being out there in what

Mike: I suppose I had friends from the community. So two friends. Who I grew up with, uh, came out much earlier than I did. I was 24 and I met my husband when I was 25 and we had social spaces. By the time I came out we had quite a few more than we do now. So I never really felt the need to do that. You know, I had LGBT people in my life, I was lucky. And so no, I haven't. I suppose that's it, I suppose, it's just the way I came up and friends I was lucky enough to have and I suppose maybe my husband early in coming out, you know, making friends through travels, I've never really felt the need, you know, to seek out a gay project or gay group, you know.

There's

real world, it can make them very uncomfortable. Obviously, I wouldn't be in this job if I was talking to other people. With it being a small city, that can be kind of difficult. And also the gay scene in Cork is very, very small. You know, I see a lot of people then maybe. But I've never felt the need up to now. Yeah. And maybe as an older. Man, if there were isolation issues, then maybe I would seek out groups, but certainly not right now.

↳ isolation as a reason to participate in LGBT groups



OK, so I've come back from Bilbao having been away for a year. I still have a few pals, but I've had to rebuild. My pals that I had have actually moved away from Cork. In the meantime, so I've had to completely rebuild sort of like the gay project for example, I purposely contacted them. I volunteered with gay pride in Bilbao before I got back here. I put my name down for gay pride here and you'll have to start meeting people.

Pat: And that's what that's how I've met up with the gay project people. So, I found that really good.

Sean: Oh, it means everything to me. You know, I grew up. As many in my generation did in an Irish Catholic, alcoholic, dysfunctional family of origin. It wasn't all awful but it was loud, sometimes abusive. Not always, but some and I've come to terms with a lot of those old ghosts and healed from them, survived. You know. But here in my rainbow family of choice, these are the people that I choose to affiliate with now, people who understand me and who we speak the same language. We don't have to explain. We don't have to apologize.

Edward: Yes, I don't have kids. I have quite a good social network. Oh, I've had to go out because when I moved to Bilbao I was at the end of a relationship as well, that the context of that was the relationship kept me from having a wider social circle.

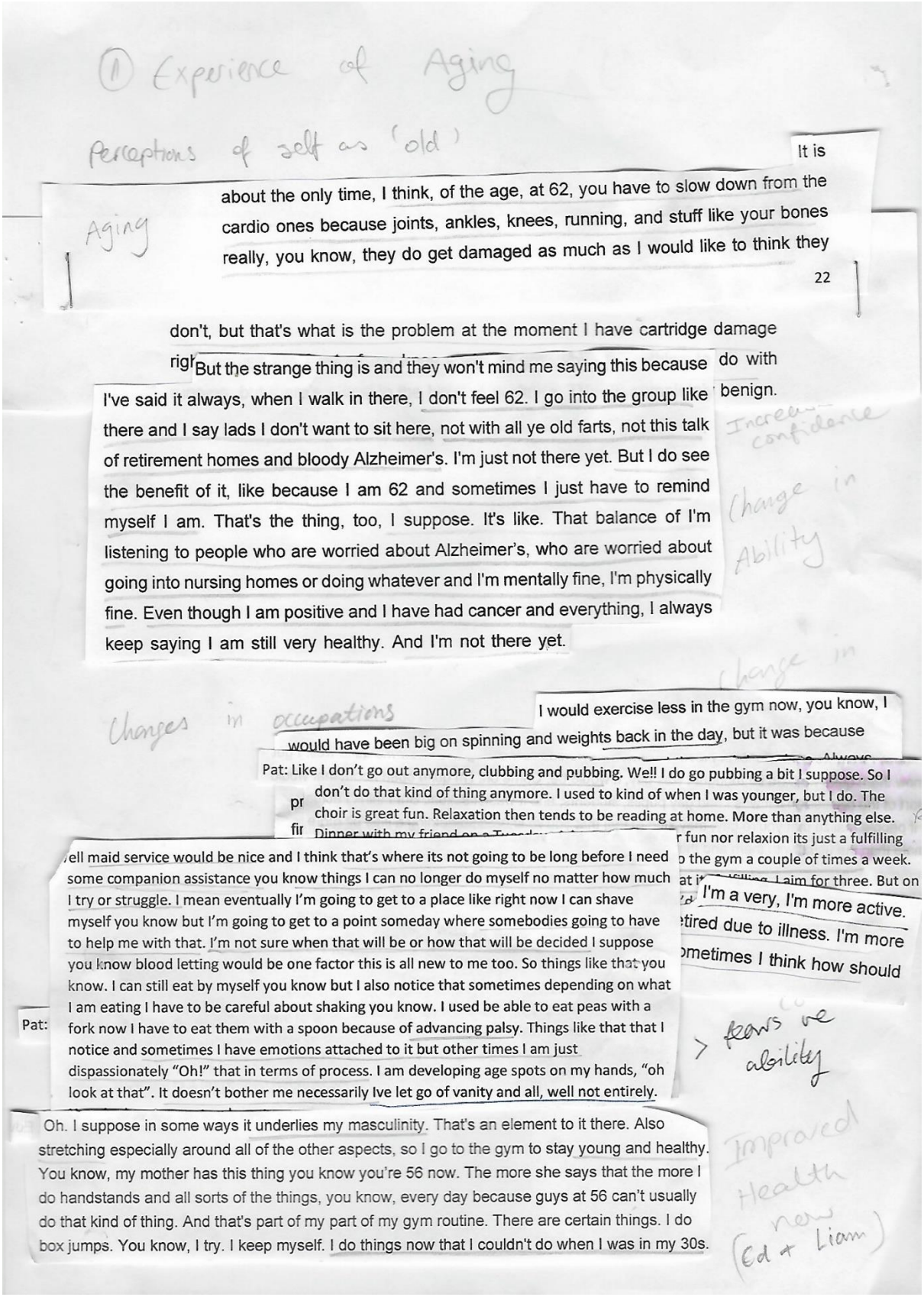
Edward: My family and most of my close friend live far away. I make an effort to keep in contact with old friends. I like to go for coffee with friends, but I also like to be on my own.

I got very good friends from within community who still live here and abroad. I've got a really supportive family.

And so generally, day to day, not so much. And I've been with my partner for 20 years, people know us as couple, and like they would with any other couples. I suppose I don't tailor anything in my behaviour. When I am out in public. I would have done for a long time. I don't now. So. For my husband, that would have taken a bit longer. You know, he works in a very kind of male dominated place. And for him, his comfort level wouldn't have been the same as mine, but he's older than I am as well, he's sixteen years older than I am. So there was almost a different generational thing there for him. But certainly, now he would be equally, you know, it doesn't bother him in the slightest. If I had taken his hand In the past he would have pulled away and stuff. But now that's fine. It doesn't worry either of us.

sister. I would be a little bit more often we would always been a little bit closer anyway. So I'd be in contact with her lot. I got to cats. When we're away, she moves in to our house so we don't have send them out. Which is great. And so no, not a whole lot. Really. Yeah. And I suppose we're really busy and respectful to the fact that people are busy. We keep in touch with each other. And so, no. In terms of my family it's very small. My husband's family is huge. But even even that now. You know, his nieces, nephews are all largely grown up. You know, they've got kids their

Ok so for fun, I like to socialize, like to meet friends, like movies. We, you know, at weekends, we like to go for drives, go for walks. I've got a very good group of friends and some of whom I've been friends with since school. And not all of them live in Ireland now. So we get together two or three times a year. So whether that's here or abroad, you know, we do that. So we're very social people. Socializing would be a big part. We like to travel a few times a year. Within Europe, I'm not a great long haul person. And so we enjoy doing that.

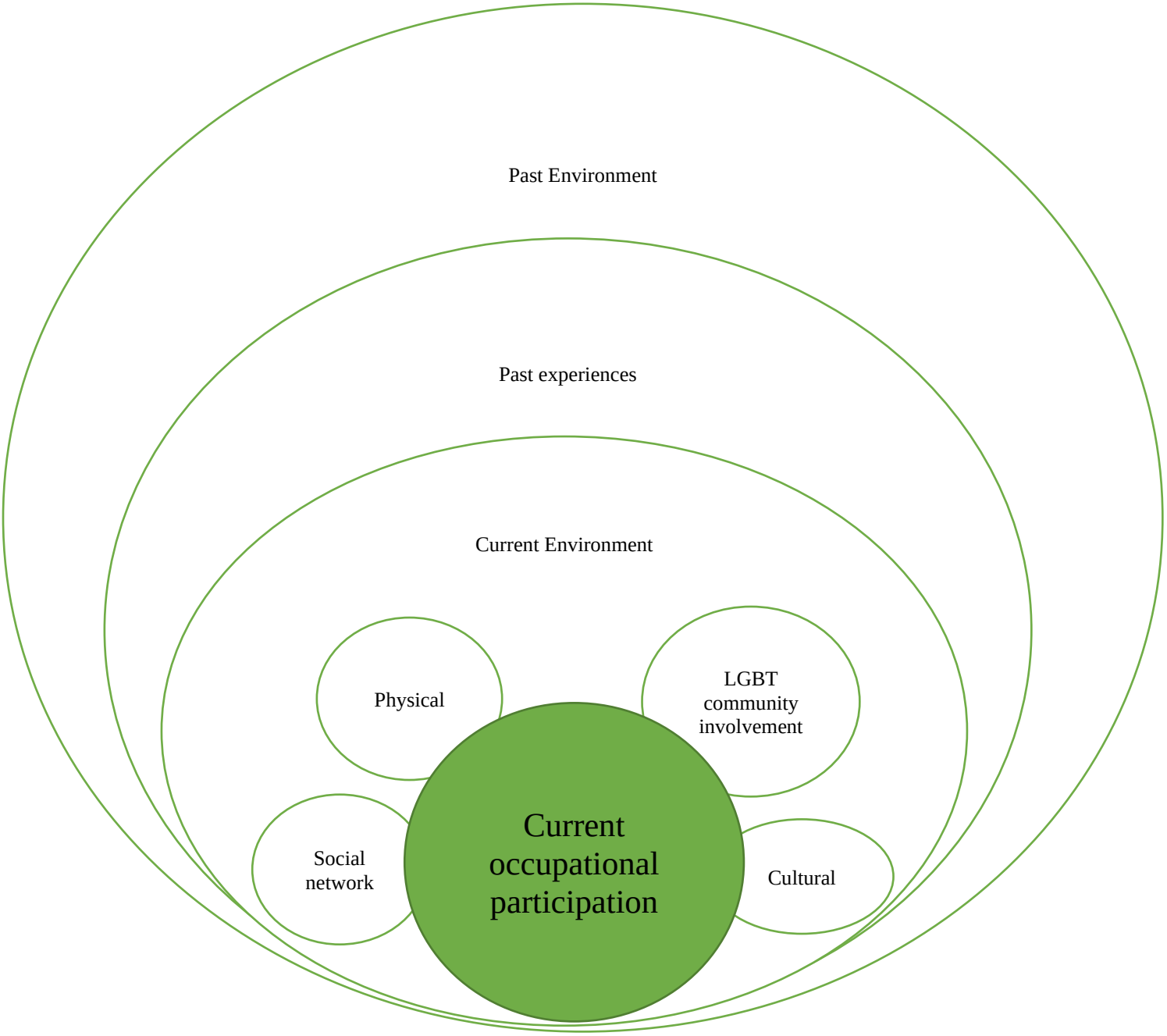

① Experience of Aging
Perceptions of self as 'old'
Aging
It is about the only time, I think, of the age, at 62, you have to slow down from the cardio ones because joints, ankles, knees, running, and stuff like your bones really, you know, they do get damaged as much as I would like to think they
22
don't, but that's what is the problem at the moment I have cartridge damage
But the strange thing is and they won't mind me saying this because
do with
I've said it always, when I walk in there, I don't feel 62. I go into the group like
benign.
there and I say lads I don't want to sit here, not with all ye old farts, not this talk of retirement homes and bloody Alzheimer's. I'm just not there yet. But I do see the benefit of it, like because I am 62 and sometimes I just have to remind myself I am. That's the thing, too, I suppose. It's like. That balance of I'm listening to people who are worried about Alzheimer's, who are worried about going into nursing homes or doing whatever and I'm mentally fine, I'm physically fine. Even though I am positive and I have had cancer and everything, I always keep saying I am still very healthy. And I'm not there yet.
Increase confidence
Change in Ability
Changes in occupations
I would exercise less in the gym now, you know, I would have been big on spinning and weights back in the day, but it was because
Pat: Like I don't go out anymore, clubbing and pubbing. Well I do go pubbing a bit I suppose. So I don't do that kind of thing anymore. I used to kind of when I was younger, but I do. The choir is great fun. Relaxation then tends to be reading at home. More than anything else.
Dinner with my friend
r fun nor relaxion its just a fulfilling
o the gym a couple of times a week.
I aim for three. But on
I'm a very, I'm more active.
tired due to illness. I'm more
ometimes I think how should
ell maid service would be nice and I think that's where its not going to be long before I need some companion assistance you know things I can no longer do myself no matter how much I try or struggle. I mean eventually I'm going to get to a place like right now I can shave myself you know but I'm going to get to a point someday where somebodies going to have to help me with that. I'm not sure when that will be or how that will be decided I suppose you know blood letting would be one factor this is all new to me too. So things like that you know. I can still eat by myself you know but I also notice that sometimes depending on what I am eating I have to be careful about shaking you know. I used be able to eat peas with a fork now I have to eat them with a spoon because of advancing palsy. Things like that that I notice and sometimes I have emotions attached to it but other times I am just dispassionately "Oh!" that in terms of process. I am developing age spots on my hands, "oh look at that". It doesn't bother me necessarily Ive let go of vanity and all, well not entirely.
Pat:
> fears re ability
Oh. I suppose in some ways it underlies my masculinity. That's an element to it there. Also stretching especially around all of the other aspects, so I go to the gym to stay young and healthy. You know, my mother has this thing you know you're 56 now. The more she says that the more I do handstands and all sorts of the things, you know, every day because guys at 56 can't usually do that kind of thing. And that's part of my part of my gym routine. There are certain things. I do box jumps. You know, I try. I keep myself. I do things now that I couldn't do when I was in my 30s.
Improved Health now (Ed + Liam)

Appendix J: Table of Initial Codes and Themes

Initial Codes	Emerging Themes
1. Past experiences	A. Personal Factors
2. Bullying	
3. Escapism	
4. Alcohol	
5. Philosophy	
6. Spirituality	
7. Coping	
8. Surviving	
9. Changes	
10. Health	
11. Fears	
12. Concerns	
13. Confidence	
14. Aging	
15. Resilience	
16. Acceptance	
17. Friendship	B. Social Factors
18. Partner	
19. Family	
20. LGBT community	
21. Work	C. Environmental Factors
22. Religion	
23. Homophobia	
24. Heteronormativity	
25. Volunteering	
26. Education	
27. Sport	
28. Inclusion	
29. Accessibility	
30. Physical environment	
31. Housing	
32. Politics	
33. Healthcare	
34. Stigma	

Appendix K: Sample Concept Map

Factors influencing occupational participation for older gay men.



Appendix L: Assumptions

Who am I?

I am a 21-year-old, heterosexual, white female, who has grown up in Ireland. I was raised catholic; however, I now consider myself to be an atheist. I chose to study occupational therapy when I had heard a selection of inspirational stories from one past students' experience on placement. The last three years have taught me about why it is important to understand the unique meanings of occupations for individuals. I am excited to learn more about this, within the context of older gay men living in Ireland.

Why I undertook this project?

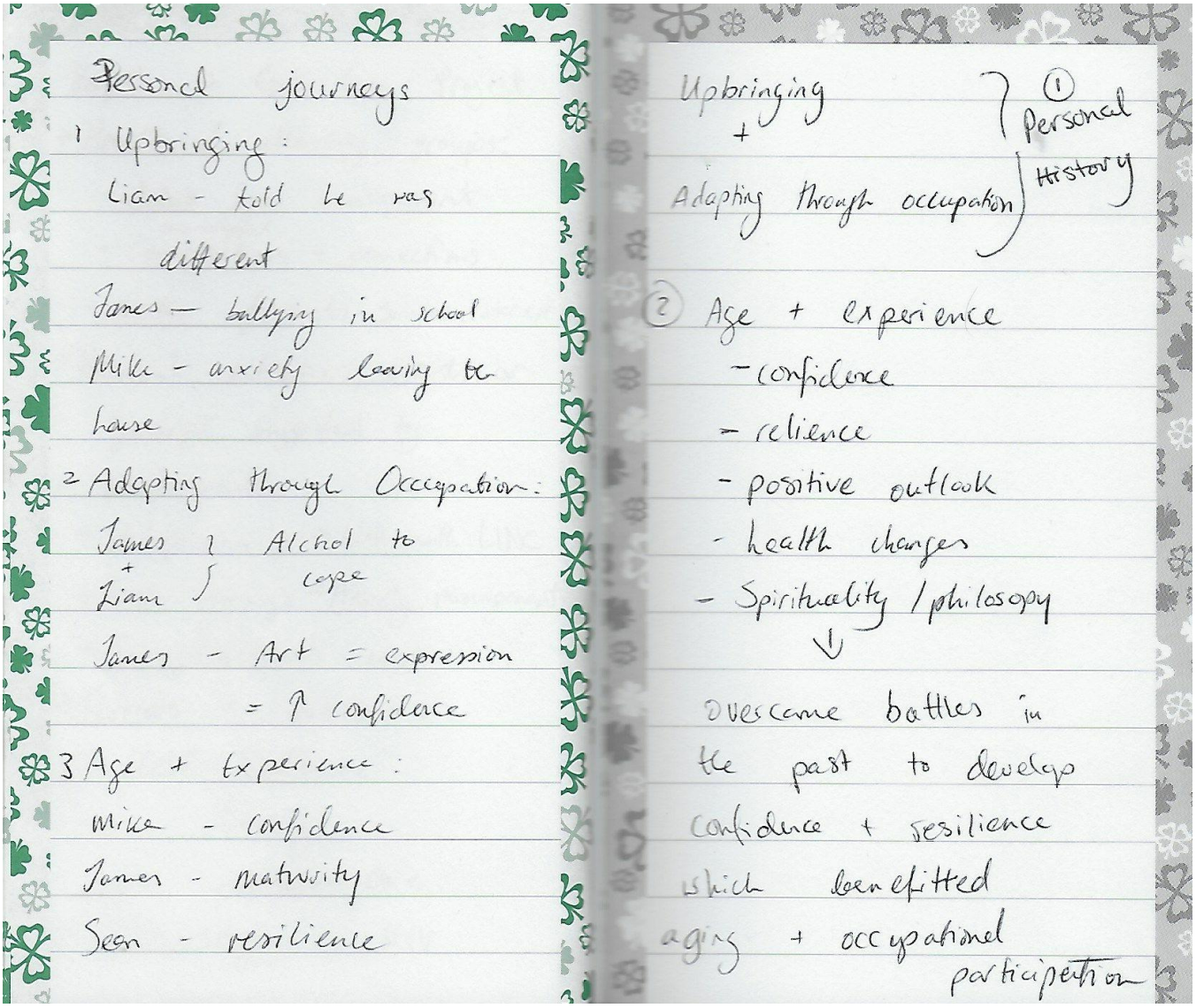
Starting in adolescence, I began to see unfair treatment of my gay, lesbian and bisexual friends. One gay friend of mine had water balloons thrown at him when we were 14, for no other reason than his sexual orientation. This was my first experience witnessing discrimination against someone based on their sexual orientation, and I remember the shock, the disbelief and the anger I felt realising that being gay is often still perceived as "taboo". Four years ago, my childhood best friend came out as a lesbian after moving away from our hometown. She received a mountain of support from old classmates and friends, however, a select few of friends felt the need to voice their criticisms of her sexual orientation online. Throughout my time at University, I have continued to hear stories from my friends about LGBT members being discriminated against, threatened with violence, experiencing actual violence and alienation due to their sexual orientation. I have undertaken this project due to the LGBT inequality I have witnessed throughout my life.

What are my assumptions in this research project?

Studying occupational therapy has thought me never to make assumptions or have expectations when it comes to a client's perspective. But it is important for us to search our minds because no one lives with a blank slate in their mind. I have thought a lot about this research project over the last few weeks and have accumulated some assumptions about the study.

- Experiences of discrimination will be experienced by all older gay adults.
- All participants who frequent local community organisations for gay men will share similar viewpoints and experiences.
- I will encounter problems in recruiting older "closeted" gay men.

Appendix M: Sample Reflexive Journal Entry



Personal journeys

1 Upbringing:

Liam - told he was different

James — bullying in school

Mike - anxiety leaving the house

2 Adapting through Occupation:

James + Liam } Alcohol to cope

James - Art = expression = ↑ confidence

3 Age + experience:

Mike - confidence

James - maturity

Sean - resilience

Upbringing + Adapting through occupation } ① Personal History

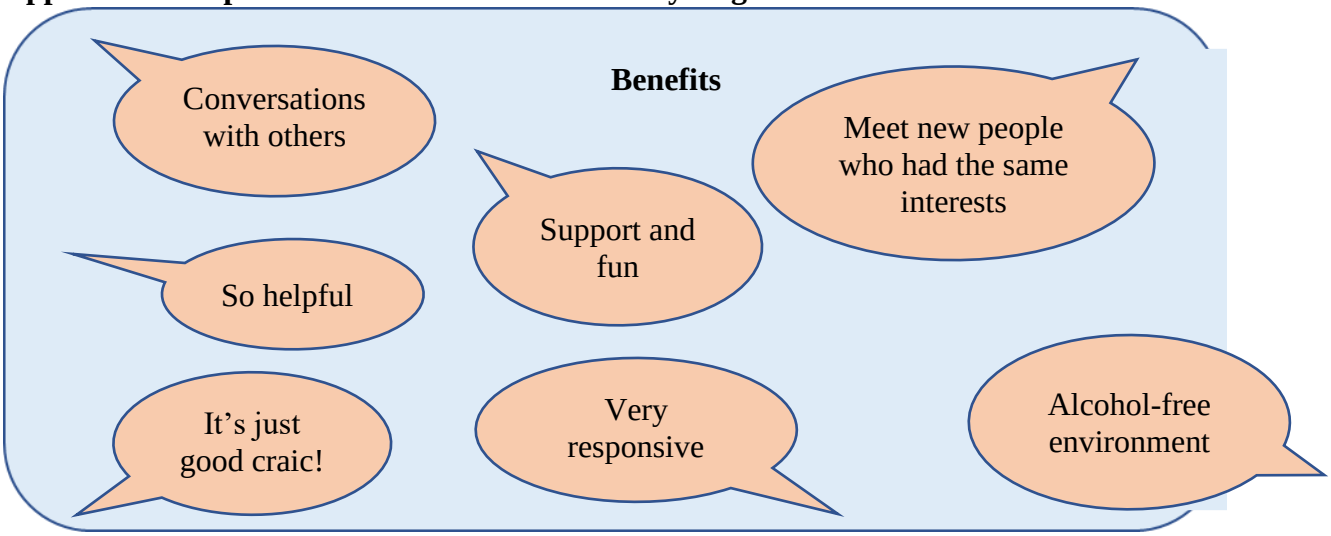
② Age + experience

- confidence
- reliance
- positive outlook
- health changes
- Spirituality / philosophy

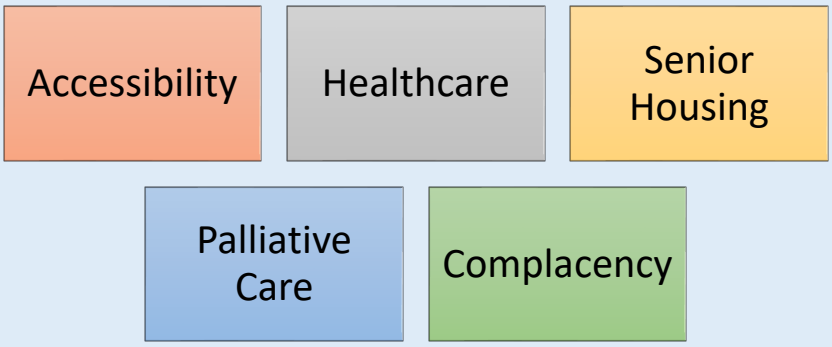
↓

Overcame battles in the past to develop confidence + resilience which benefitted aging + occupational participation

Appendix N: Report for Local LGBT Community Organisation



Suggestions

- Queer Oral History Project
- Collaboration with LINC
- Intergenerational mentoring
- Pet friendly space
- Befriending network
- Irish language
- Gardening
- Photography
- Anxiety management
- LGBT Prison Outreach
- LBGT dementia network
- Art

Concerns