

## ISSUES FACED BY THE AGING LESBIAN AND GAY COMMUNITY IN SRI LANKA

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**Abstract:** Homosexuals (lesbians and gays) are an important social sex group that garners national and international attention from a range of perspectives. The main purpose of this study is to examine the issues confronting Sri Lanka's aging lesbian and gay community. The study was based on a qualitative research design, and the snowball sampling method was used to identify respondents as older lesbians and gays, as they are one of the hidden groups in society. The qualitative sample consisted of 20 persons, including two lesbians (02) and eighteen (18) gay persons who were aged 60 years and over. The data were analyzed using thematic and content analysis. It is a notable characteristic that these respondents form friends far from their family, siblings, and parents. These friendships are between 3–4 people. As they are unmarried, they have lived alone because of separation from their parents, a lack of marriage, and a lack of children. They have become excluded from society because they have been marginalized, neglected, and hampered by it. It has been confirmed that 16 respondents suffer from financial shortages in old age because they do not save money or invest. In addition, lesbians are experiencing financial pressure due to lower incomes than gay men. Most respondents were found to have illnesses such as high cholesterol and diabetes. They know about sexually transmitted diseases, but a large proportion of them don't know how to prevent them. Another point raised is that healthcare providers suffer from discrimination when accessing health services. Lack of financial resources, lack of health insurance, economic insecurity, and discrimination are facing challenges in care, while 18 respondents identified a significant need for institutionalized care. According to the conclusions reached through the analysis, due to the social, economic, health, and care problems faced by this lesbian and gay elderly community, focus on institutional care and implement programs to educate the general public, health care professionals, and employees of public and private institutions about them and HIV prevention. And it is timely that this community is participating effectively in counseling programs.

**Keywords:** homosexuals, lesbians, gays, aging

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### Introduction

At present, lesbians and gays are a prominent minority population group in society, and they are receiving attention from various aspects at the national and international levels. In various regions of the world, the population is aging, and it can be recognized that the number of elderly lesbians, gays, and bisexuals is growing significantly (Muraco et al., 2013). The difficulty in defining the sexual orientation of this community, the reluctance to act openly in society, and the paucity of studies based on such sexual minority groups have made it difficult to identify and assess the elderly lesbian and gay population. Currently, the aging community is growing globally as well as in Sri Lanka (Dissanayake, 2016). In South Asian countries like Sri Lanka, with the growth of the lesbian and gay community and

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their prominence in society, this community also faces the problem of population aging in the future. Therefore, through this research, an attempt is made to study the problems faced by the aging lesbian and gay community in Sri Lanka from a scientific perspective.

According to the Center, “a lesbian is a woman whose enduring physical, romantic, and/or emotional attraction is to other women. Some lesbians may prefer to identify as gay or as gay women”. Also, “gay people are defined as people who endure physical, romantic, and/or emotional attraction to people of the same sex. Sometimes, lesbian is the preferred term for women” (The Center, 2023).

Nowadays, there is a growing interest in the aging world (Westwood et al., 2015). In this regard, social policies have been documented in the United States, Australia, Canada, the Netherlands, Israel, and Ireland, particularly in relation to health and social care issues. Several recent surveys in the United States have reported that 3.5% of the adult population is homosexual, out of a population of more than 8 million (Gates, 2011).

The number of lesbian and gay communities in Sri Lanka has not yet been calculated. However, in 2017, a study conducted by the organization representing the LGBT community called "Equal Ground" in Sri Lanka reported that 19.6% of people over 18 years of age living in districts in Sri Lanka, including Colombo, Matara, Nuwara Eliya, and Galle, identified as LGBT. LGBT people living across the country are estimated to make up 5% of Sri Lanka's population (Brown, 2017). Thus, it has become clear that the lesbian and gay community has grown to some extent in Sri Lanka. Today, the aging lesbian and gay community has become a lonely, isolated, and depressed population (Fredicson et al., 2010). More recently, researchers have focused more attention on the health, housing, and social care support needs and rights of the LGBT community (Carrs & Rose, 2013).

However, there is a lack of research on the aging lesbian and gay community, especially on issues related to gender and aging. As a result, the LGBT community has to face many problems, such as not getting married, not having children, caregiving, and financial shortages due to aging. Compared with other South Asian countries, Sri Lanka is a rapidly aging country. In the 1990s, the percentage of people over the age of 60 was 6.6%, which grew to 12.4% by 2012 and is expected to double to 24.8% by 2041 (UNFPA, 2014). According to these data, the elderly population of Sri Lanka is growing at a rapid rate compared with that in the past. In addition, the lesbian and gay community ages in the same way, and due to their sexual orientation, problems arise with aging more than in the general population. Globally, the aging Lesbian and Gay population is likely to grow in the future rather than in the present, and it is important to intensify addressing the issue of the aging Lesbian and Gay population.

### *Research objectives*

The main objective of this study is to examine the issues faced by the aging lesbian and gay community in Sri Lanka. In addition, the study explores issues related to social and economic issues faced by the lesbian and gay community, health, and aging issues faced by the aging lesbian and gay community in Sri Lanka.

### **Methods**

The study was based on a qualitative research design, and the snowball sampling method was used to identify respondents as older LG (lesbian and gay) people, as they are one of the hidden groups in society. The qualitative sample consisted of 20 people, including two lesbians (02) and eighteen (18) gay people who were aged 60 years and over. The data were analyzed using thematic and content analyses.

### **Results and Discussion**

Demographic and socioeconomic characteristics such as age, marital status, residence sector, and economic background were examined. The respondents' ages ranged from 60 to 65 years, while the majority of them (18) were unmarried. Approximately 13 people were from urban areas, while 7 were from rural areas. According to religion, 13 respondents were Buddhist, 7 respondents were Catholic, and only one respondent was Tamil. The highest number of respondents was reported from the Colombo district (8). Approximately 12 respondents passed the O/L exam, and only 4 respondents passed the A/L exam, but in this sample, anyone can get a degree or higher education level. It has been reported that the majority of them earn less than Rs. 10,000 monthly.

#### *Social issues facing the aging lesbian and gay community.*

According to this sample, 15 respondents' parents are not living at present, and 5 respondents' parents are still living. In addition, 15 of the respondents have siblings. However, the unique feature here is that most respondents do not live with their parents or siblings. It was found that the main reason for their estrangement from the family is that they have become estranged from the family and spend time alone due to neglect, threats, and unwillingness to accept them in the family.

This lesbian and gay community maintains homosexual relationships during their lifetime, and 13 respondents in the sample stated that they don't have partners at present, but some respondents who maintain such relationships in old age were also reported. In Sri Lanka, homosexuals can't enjoy the same benefits as heterosexuals because they can't register a civil partnership or marriage. Strong alliances exist within the LGBT, bisexual, and transgender communities (Grossman et al., 2001). The lesbian and gay community maintains friendships away from family due to aging, loneliness, and discrimination. According to this sample, all respondents were more interested in making friends.

Table 1: Respondents ideas of friend relationships (Source: Sample survey, 2021.)

Respondent	LG person's voice
Rohana <sup>1</sup> is a 65-year-old gay man. He lives in a rural area of Puttlam district and is engaged in the field of beauty culture.	<i>"I have many friends. After my mother passed away, my gay friends helped me with charity work. No one was allowed to do any work. My friends did all the gardening and housework. It helps me a lot in all my work"</i> .
Ashoka is 65 year old and lives in a rural area of Kurunegala district.	<i>"Since I found out that I am different, I have been in contact with gay men a lot. When I was ostracized by society, I felt relaxed when I was with them. The next day I got a chest pain and was stopped at the Kurunegala Hospital. My family didn't come to see me. My friends took care of me by bringing food and drinks in the morning and evening. I am still treated by them".</i>
Sanath is a gay person and 63 years old, He lives in Colombo district	<i>"Everyone needs friends to talk to when they have a problem and to share their sorrows and joys. I had friends like that. When my relationships stopped and I was very sad, they were the ones who made up my mind. I used to go to nightclubs and come back happy. We meet at least once a month. It makes me very happy."</i>

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<sup>1</sup> Please consider that all the names in this sample is imaginary. Respondents' privacy is protected.

All three cases reported by these three respondents indicate that lesbian and gay older people are more willing to build friendships. The LGBT aging community is friendly and mutually supportive. Here, it could be recognized that they build more friendships with homosexuals than heterosexuals. It could be identified in the data analysis through this survey that there are usually 3–4 people in friendship (average of 3.7). A similar finding was reported in the survey of the lesbian, gay, and bisexual communities, with an average of 2.5% of respondents being friends and 56% of the sample having at least one close friend. Furthermore, it was revealed that more support was received from friends and family. Because of LG persons, the community has to face various difficulties from society. At a young age, they have to face various difficulties in going to school, finding employment, hospitalization, and getting services from the public or private sector (Masini, 2008).

According to this sample, all respondents reported that they were teased and stigmatized by their friends while going to school (Table No. 2). Those events were the most impactful moments of their lives. Cases of psychological distress due to being ostracized from class and friends during the school year were reported.

*Table 2: Difficulties caused by society due to being a Lesbian and Gay (Source: Sample survey, 2021)*

<b>Difficulties caused by society</b>	<b>Number of respondents</b>
Went to school	20
When entering the job	14
In hospitalization	13
In going to a government or private institution	12

Because of LG persons, the community has to face various difficulties from society. This community can recognize that it is subjected to social stigma and embarrassment from the general society. Also on social media, it could be recognized through their interviews that there is a negative attitude toward this community, and due to their sexual orientation, the person has not found the right place. As a result, they have become a hidden community in society.

*Economic issues faced by the aging lesbian and gay community.*

Here, the homosexual community is more likely than the elderly community to face various problems after aging due to not marrying and not having children, and the main problem they face is financial scarcity (Robinson, 1987). According to this sample, three of these respondents are currently employed. Of these, the largest group of gay respondents are employed in the beauty industry, and there are four respondents in the sample. It stated that both lesbian women's monthly income is very low and that it is not enough for the economy gender-wise. A similar idea is that a survey of lesbian, gay, and bisexual social support networks over the age of 60 found that lesbian women had lower incomes than gay men in a gender comparison (Grossman et al., 2000).

Here, in looking at the composition of doing the same job as before, 7 of the respondents continue to do the same work even after they are old, and it can be recognized that all the respondents who are employed in the beauty industry are currently working in the same job after they are old. According to continuity theory, the LG community continues to do the same work after they get old because their economy is not strong, they do not marry, and they do not have children due to a lack of formal care.

It can be recognized that most of the respondents have faced certain problems, such as job loss, rejection, and neglect, due to their sexual orientation. It was also reported that one lesbian woman was subjected to various forms of harassment at the workplace because of her sexual orientation. Half of the respondents reported not having a permanent residence and living in rented accommodations. Accordingly, it has become difficult to pay for those houses in old age. As a result, it is seen that problems will have to be faced in the economy during aging.

In focusing on savings, it is seen that nine respondents have made savings, and all of those respondents have made savings in the bank. However, there is a problem with taking care of the aging LG respondents when they are unable to find a job in their old age because they have not saved any money. It is also seen here that none of the respondents in this sample have made any financial investments, and none of them have any land. That is, the instability of the economy can be seen in these respondents.

According to this survey, 16 respondents stated that the economy is inadequate because of aging, and four respondents stated that the current economic level is adequate. In addition, 18 respondents reported not receiving pensions or allowances, and only two respondents reported receiving pensions or allowances. According to the study by Farland & Sanders in 2003 on lesbian and gay needs, 70% of the sample reported financial deficits. Accordingly, it is clear from the literature review that there are financial obstacles for the LGBT aging community.

*Health and caring issues faced by the aging LG community.*

Aging is a challenge for every person, but the aging LG community faces additional difficulties in their old age (Kelly, 1977). As a sexual minority group, the aging LG community has been exposed to health and care problems and disparities compared with the general population (Butler & Hope, 1999). As they are a sexual minority community in society and live under constant stress, their physical and mental health conditions are disproportionately affected. At present, the LG community has received global attention. According to a survey conducted by Farland and Sanders in 2003, more than half of the aging LG community identified that they don't have adequate services to meet their physical and mental needs (Farland & Sanders, 2003). It is important to focus on the health problems faced by the aging LG community.

*Table 3: Physical problems faced by the aging lesbian and gay community (Source: Sample survey, 2021)*

<b>Physical problems</b>	<b>Number of respondents</b>
Cholesterol	19
Diabetics	12
Leg and Back pains	10
High Blood presser	7
Arthritis	5
Cancer	2

In discussing the health status of the aging LG community, according to this sample, 18 respondents stated that they were not satisfied with their current health status, but only two respondents were satisfied with their current health status. Cholesterol was reported by the highest number of respondents, and 19 respondents were affected by these diseases. Here, compared to gays, lesbians suffer from diseases such as arthritis and cholesterol. More than half of the sample was diagnosed with diabetes.

Five respondents had visual impairments and one had hearing impairments; 14 respondents had visual impairments and 12 had hearing impairments. This community has to face various problems because

of its weaknesses in living alone in old age. A survey by Stanley and Duong (2015) revealed that the aging LG community suffers from mental distress and has resorted to excessive alcohol consumption compared with heterosexuals. Because of this, the LG community has become prone to diseases.

Lesbian, gay, and bisexual women have lower access to health services than heterosexual women and may therefore be at increased risk of obesity and breast cancer (Brook, 1981). A similar idea was found in a 2013 study based on health disparities between lesbian, gay, and bisexual adults, which found that LGB adults were at higher risk of disability, mental health, smoking, and heavy drinking compared to heterosexuals. There, lesbian and bisexual women reported more diseases such as heart disease and obesity, and lesbian women were more at risk of poor physical health and living alone than gay and bisexual men (Fredriksen et al., 2013).

There is a high risk of STD spreading in this community, and 18 respondents are aware of STDs, but 12 of them are not aware of how to protect themselves. Three respondents were diagnosed with STDs. There are also cases of suicide attempts due to stress. LG communities face barriers to accessing health and social services. Lack of adequate financial resources to access formal support services results in health problems, lack of insurance, economic insecurity, discrimination, and a lack of security for their partners and loved ones (Butter and Hope, 1999).

Accordingly, the case of Saman, a 61-year-old running a beauty salon in an urban area, stated that

*"People in the hospital do not treat us well. One day while going to the hospital, the mask went off. The staff there made fun of me for looking me in the eye. Not only nurses and attendants but also the public look at us in the wrong way."*

There are several cases in which health staff has differentiated between these same-age respondents. A similar incident was reported by a 65-year-old gay person who lives in an urban area of Colombo.

*"Some people talk well and help us in a useful manner, but many people look down on us. We are often teased by the common people. I only go to the hospital to get medicine when I'm very sick. I don't want to be embarrassed"*.

It was clear from inquiries from the aging community that the general public's attitude towards this community made them uncomfortable at various times. As a result, they have become depressed. Discrimination not only affects mental health but also the care of the community. The homosexual community is reluctant to seek their diagnosis because of the discrimination against health and service professionals (Butler & Hope, 1999).

It was mentioned that most of these respondents, i.e., 13 respondents, seek treatment from private hospitals, and 7 respondents seek treatment from a government hospital. Among them are people who receive treatment in both government and private hospitals. Compared with government hospitals, patients do not feel uncomfortable in private hospitals, and because the private sector depends on money, they work to provide good services.

Table no 4: Difficulties in obtaining health services (Source: Sample survey, 2021)

<b>Respondent's characteristics</b>	<b>LG person's voices</b>
Case 2: a gay person who lives in a residential area of the Puttalam District	<i>“One day I had chest pain and had to go to the government hospital to get an ECG. Then, when they opened my chest area and had an ECG, several people came and went. They knew me as a gay person, according to my voice and my way of walking. Especially the nurses and attendants were laughing at me, and they asked about my gender revelation. That made me very uncomfortable”.</i>
Case 3: A 62- year - old gay male respondent living in the Gampaha District:	<i>“I was injured in an accident and was taken to the hospital immediately. My chest was open, and everyone was laughing at me. At that moment, I didn't have any friends or anyone who knew me. I was very embarrassed. They didn't care about me, and they looked at me like an animal. At least, they did not cover my clothes, which I had worn. It's kind of frustrating.”</i>

Government institutions such as hospitals face various difficulties. As a result of these inconveniences, they do not like to be around the general public. Although they are different from normal people due to their sexual orientation, they also have the same feelings as normal people. But due to the changes in society, they have become a community living far away from society.

In investigating the problems encountered in obtaining health care, 15 respondents from the sample had faced problems in obtaining health care. Only one respondent from this sample was satisfied with the health staff, and he was employed in the hospital. It was revealed that the health service staff discriminated against the aging LG community.

*Care issues faced by the aging LG community.*

Policies and programs are being implemented at the global and national levels for the care of the aging population (WHO, 2015). Similarly, in Western countries, including the United States of America, care-related measures have been taken for this aging LG community (Daniels, 2009). However, in Sri Lanka, no attention has been paid to any such policy programs or measures. Compared with the general population, the LG community faces problems due to aging, and caregiving issues are the main ones. Here, the reasons for not having family members or children have become a problem of not having someone to care for after old age.

In 1999, Karen and Fredriksen conducted a survey of lesbian women and gay men aged 17–81 from lesbian and gay families in the United States. It was reported that 82% of caregivers had experienced harassment based on their sexual orientation. According to the same survey, 93% were verbally bullied, 46% were emotionally bullied, 74% were physically bullied, and 8% were sexually bullied (Fredriksen, 1999).

A similar idea is evident in a 2008 study of 137 lesbian and gay respondents and 187 heterosexuals living in eastern Washington about the long-term health services of the aging lesbian and gay community living in small and medium-sized cities, in which many respondents commented that the task force and care providers are discriminated against. It was further reported that lesbians and gays do not have the same access to health and social services as heterosexuals and that they have to hide their sexual orientation when entering a care facility (Jackson et al., 2008).

None of the participants in this study planned to age in place. Although there is some relief for the two respondents who receive a monthly pension and the few respondents who have made savings, many LG respondents have no idea how to live this old life.

*"I am already living very hard. It's hard to get to work. I wish there was someone too."*

This comment was expressed by Nishantha, a gay resident of an urban area in Colombo. These comments are made because someone who suffers from physical discomfort with aging is not someone to care for when illness strikes. Senarath, a 60-year-old gay respondent, expressed a similar opinion.

This gay respondent may even have suicidal thoughts because of living alone for long periods of time and not having someone to care for. As a result, they become mentally distressed. The LG aging community has been reported to have low self-esteem, loneliness, poor mental health, and suicide attempts, and they are diagnosed with more mental health problems than the heterosexual population (Augelli et al., 2001).

*“He cooks and eats alone. Tired of life? I think it would be better if they were married. Then, we have someone to give us some medicine or take care of us in difficult times”.*

Ashoka is a gay person who lives in the urban sector in Kurunagala district.

All three of these incidents make it clear that there is unhappiness with caregiving in this community. That is because there is no one to take care of them. There were also cases where these people thought of taking their own lives. Living alone has led to many problems in old age. As lesbians and gays age, it directly affects the care of the individual (Lucco, 1987). Accordingly, none of the people in this sample had a specific person to care for. Therefore, various difficulties must be faced.

According to that, a lesbian old woman named Devi has given this idea:

*"There is no one to take care of people like us. They do not want to be accepted into old people's homes. Parents and siblings have ostracized us from the family. I do not want to get married. Men cannot adopt children because they don't like them. That's why I had to be alone all my life."*

When you look at this community humanly, you feel compassion for them. Living alone increases the risk of stress, anxiety, and depression. None of the aging LGs who participated in this study planned to retire. Although there is some relief for the two respondents who receive a monthly pension and the few respondents who have made savings, most of the LG community has no idea how to live this old life.

Table no 5: Respondents' views on how to live old age (Source: Sample survey, 2021)

<b>Respondents</b>	<b>LG person's voice</b>
Nishantha is a gay person who lives in the Colombo district	<i>“There is no care plan. If it becomes more difficult, you will have to go to an old people's home. Because there is no one to take care of. But there is doubt about whether people like us will be accepted into old people's homes.</i>
Kapila is a gay person who worked in an organization related to the LG community	<i>"There is no such plan. If something gets sick, he calls a friend in the company and asks for help. Those who know will help”.</i>

Devi is a lesbian woman who lives in the Colombo district.	<i>"I want to be happy as I am. I don't want to trouble anyone".</i>
Dharmasena is a gay man who lives in Puttalam district.	<i>"You can't think that the person you are dating will take care of you. You can't tell what your sister's children will do. Who will take care of us now that there is no one to take care of our parents?"</i>

It can be identified here that a reason this group is not planning care is that 15 respondents from this group currently live alone. Living alone because she is away from family and childless, she hasn't paid attention to care and lives on her daily income. Accordingly, when asking these respondents about institutional aging, the largest number of respondents from the sample expressed the need for institutional care.

Institutionalized care was introduced to meet the needs of individuals when there is no one to care for them. In Western countries, there are institutions that take care of lesbian and gay people when they are old, but in countries like Sri Lanka, where culture is held in high esteem, the lesbian and gay community has become a marginalized community. Accordingly, various responses were received from these respondents regarding institutional care. Eighteen respondents from this sample expressed the need for institutional care.

Table no 6: Respondents' Ideas of Institutionalized Aging (Source: Sample survey, 2021)

<b>Respondents</b>	<b>LG person's voice</b>
Jayalath is a gay respondent who lives in the Matara district.	<i>"I wish there were old-age homes for people like us. But they are not. Because there is no one to take care of us. We are looked at as animals. In a little while, I will be unable to do anything. At least if we had a place like ours, then we could be happy at the end of our lives."</i>
Marasinghe is a gay person who lives in the Kurunegala district	<i>" There are many people who are homeless. There are many people like us who have no homes or doors. It would be good if there was some relief for them".</i>

Senarath, a gay respondent aged 60, lives in the urban sector of Puttalam district.	<i>"It would be good if there was some plan to take care of people like us. If so, there is someone who will take care of it. Then there is no fear".</i>
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Accordingly, these respondents stated that it is important to introduce institutionalized care. He was of the opinion that, through this, the entire LG community would be able to live their old age without fear or doubt. According to Lucco, a survey of 456 elderly lesbians and gays, a large percentage of the sample was interested in planned nursing homes (Lucco, 1977).

But Ashoka, who lives in the rural part of Kurunegala, has the opposite opinion, that is,

*"People like us are fierce. And there are good ones. As you get older, you become hypocritical. Not helping. There is no unity. If there is an investment, there will be problems".*

This respondent commented that the coexistence of aging lesbian and gay people creates problems. As a result, he has stated that he is not suitable for institutional care. However, many LG respondents think that elderly care is necessary. Overall, this qualitative study found that the aging Lesbian and Gay community in Sri Lanka is in trouble in their old age due to sociological, social, and economic difficulties such as not marrying, not giving birth to children, being socially stigmatized, an insufficient economy, and severe mental pressure. This analysis also clarifies that care is directly affected.

### *Limitations*

Although lesbian and gay people live in Sri Lanka, most of them are not socialized and they are hidden from society. According to this study, the absence of information regarding the heterosexual community in Sri Lanka has prompted questions about the reliability of the data collection sources. There were no reports or data regarding the aging lesbian gay community in Sri Lanka. The lesbian and gay aging population is hard to publicly identify in society, and sample identification is difficult because of the limited number of community members in Sri Lanka. And also the reluctance of the elderly lesbian and gay community to respond to the questionnaire is the other limitation of this study. Those are some limitations of this study.

### **Conclusion**

The objectives of this study are to identify issues faced by lesbian and gay persons in Sri Lanka. The qualitative sample consisted of 20 persons including two lesbians (02) and eighteen (18) gay persons who were aged 60 years and over. Thus, the aging LG community has to face various social, economic, health, and care problems. The LG community is far away from family, brothers, sisters, and relatives

and most of the people are living alone, where they build friendships to overcome the loneliness of the deserts. It could be recognized here that even though there were partners in youth, those relationships become distant with aging. Additionally, because same-sex marriage is illegal in Sri Lanka, this community has experienced prejudice, lack of a marriage, lack of children, insufficient financial resources, lack of health insurance, and economic instability. As a result, they have become alienated from the family. Accordingly, 15 respondents are living alone in old age. Although aging heterosexuals can go to nursing homes, this community has lost the opportunity to do so. As a result, the community faces problems in care, and the strong need for institutional care can be further identified, with 18 respondents suggesting that institutional care is needed. Not only that, but also due to the aging of the homosexual community, they have to face various difficulties in obtaining health treatment. There were also reports of neglect as well as inconvenience in hospitals due to sexual orientation, especially in obtaining services from healthcare professionals. As a result, it has been established that many homosexuals are reluctant to seek health care and most are seeking private health care. The main reason for this was that private sector healthcare professionals provide services on a cash basis and minimize inconvenience. Due to this, it is important to pay more attention to the social, economic, health and caring problems of this aging LG community in Sri Lanka.

### **Implementations**

According to the conclusions reached through the analysis, the institutions related to the LGBT community should make arrangements to identify the community scattered throughout Sri Lanka, equality towards this community in social media, and respect their privacy, the general public, health care professionals, as well as employees of public and private institutions, should be aware of them. The implementation of awareness programs for the general public about this group of sexual minorities, physicians, nurses, and staff should pay more attention to their health issues without discriminating against the homosexual community, provide specialist medical care on the physical and mental health issues of the homosexual community, and provide the necessary guidance, related to the homosexual community. Implement appropriate sensitization programs for health workers to eliminate homophobia in institutions. It is advisable to implement appropriate sensitization programs for health workers in the hospital system to prevent inconvenience to the community who come to the hospital for treatment. There, programs can be implemented in collaboration with community-related organizations to treat the general community as equals and to raise awareness about them. And also it is necessary to force the institutional caring about this sexual minority community.

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