


# Quotes from two nurses in Stonewall's 'Unhealthy Attitudes' 2015

- ▶ “LGBT should be treated exactly the same as other patients, their sexuality is a matter for them, not me as a service provider” Nurse
- ▶ “We’re talking about a whole person, so everything concerning the person is relevant.”

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- 57% health and social care practitioners with direct responsibility for patient care say they don't consider sexual orientation to be relevant to one's health needs
  - Extensive research has shown the relevance of sexual orientation to both physical and mental health, including, for example, higher levels of depression and anxiety among lgb people than in the population in general
  - Treating all patients the same regardless of sexual orientation ( a sexuality blind approach) may be well meant, “but it isn't in line with the NHS's principle of person-centred care. This advocates the value of treating patients and service users as a 'whole person', where different aspects of their identity, their families and loved ones, and their individual priorities and goals are all considered relevant in providing the best possible treatment and support.”

# The Problem: Staff

- ▶ A quarter of patient-facing staff have heard colleagues make negative remarks about lgb people. Only half of lgb staff are open about their sexual orientation at work
- ▶ “because she was a lesbian she should have no problems lifting a patient on her own”
- ▶ A quarter of lgb staff have personally experienced bullying or poor treatment from colleagues in the last five years
- ▶ “A consultant – was very friendly and very good with me until somebody told him I was gay... then he turned nasty, rude, and joked like ‘he can run the pink team’.”

# The Problems: Patients/Service Users (Out Loud LGBT Voices in Health and Social Care. 2016)

- ▶ “I was told that I did not need to tell other mums that I was lesbian and then there would be no difficulties attending a mum and baby group - this ignored that my experience of parenting was entirely framed within a same sex relationship.
- ▶ “I was asked “if I’d had the downstairs surgery” after someone discovering I was trans - I was there about seizures. This isn’t the only time that question has been asked. Being asked “what it felt like to transition” by a well-meaning doctor - I was there about sleeplessness.”
- ▶ “An x-ray person made me come out to her because she didn’t believe that because I was sexually active and not using contraception that I couldn’t be pregnant. I had to come out as gay to a group of 2nd year medical students.”

# Lesbians, Gay Men, Bisexual and Trans People

# LGBTQ+

- ▶ **Queer:** In the past a derogatory term for LGBT individuals. Term now reclaimed by LGBT young people in particular who don't identify with traditional categories around gender identity and sexual orientation but still viewed to be derogatory by some.
- ▶ **Questioning:** Sometimes the Q can stand for questioning – someone questioning their sexuality or gender.
- ▶ **+** Many other expressions relating to sexual orientation or gender

- ▶ **Homophobia/Transphobia** - includes feelings of anxiety, disgust, aversion, anger, discomfort and fear that some experience around LGB and T people.
- ▶ **Heterosexism** – ideological system that denies, denigrates and stigmatises any non heterosexual form of behaviour, identity, relationship or community



- ▶ **Tolerance**– expressing tolerance or acceptance, but acting in an oppressive way by denying the difference of the experiences of LGB and T people – a sexuality blind approach

**Homophobia   Heterosexism   Tolerance   Acceptance**



# Important terms:

- ▶ **Passing** – behaviour of lesbian women and gay men which avoids them being identified as homosexual. **Gender** passing refers when an individual is perceived as belonging to a gender identity group that differs from the gender with which they were assigned at birth
- ▶ **Closeted** – gay people who do not reveal their sexuality to any or many others
- ▶ **Coming out** – firstly recognising your own sexuality and then the process of telling others about your sexuality: a life long series of events.

- ▶ **Internalised homophobia** – negative feelings that lesbian women and gay men may have about themselves because of their sexuality – internalising society’s negative messages about homosexuality.
- ▶ **Internalised trans-phobia** refers to feelings some people have inside about their being trans that they might not even be aware of. It refers to how some people hate that part of themselves and are ashamed of it.

# Impact of Oppression

- ▶ Message for many that homosexuality or being transgender is a weakness, a sickness, a perversion or a sin
- ▶ Until 1990 homosexuality considered a mental illness by WHO
- ▶ WHO still considers being transgender is a mental illness. This may change in 2018.
- ▶ Aversion therapy common in 1960's
- ▶ Conversion therapy active today – particularly in N. America. Tends to now be called 'Christian Counselling'. E.g. Christian Counselling and Education Foundation.

- ▶ Many, particularly older lesbian women and gay men 'pass', have closeted compartmentalised lives
- ▶ Deny essence of self- deny or disown partners
- ▶ A public view – if gays kept it to themselves – would be no problem
- ▶ Changes slowly happening since 1967, but most liberating changes only started in 2000.
- ▶ A 2017 You Gov poll showed that Seventy-eight per cent of people aged 18 to 24 said that gay sex was natural, while 69 per cent of those aged 65 and above believe it is not.

# Bullying and Hate Crime:

- Almost two thirds (65 per cent) of young lesbian, gay and bisexual people experience homophobic bullying in Britain's schools ( 75% in faith schools). Almost all gay pupils hear derogatory phrases such as "dyke" or "poof" used in school.
- ▶ Forty one percent of trans people have experienced a hate crime or incident because of their gender identity in the last 12 months

- ▶ Four in five anti-LGBT hate crimes and incidents go unreported, with younger LGBT people particularly reluctant to go to the police
- ▶ The number of lesbian, gay and bisexual people who have experienced a hate crime or incident in the last year because of their sexual orientation has risen by 78 per cent from nine per cent in 2013 to 16 per cent in 2017

- ▶ A quarter (26 per cent) of lesbian, gay and bi people alter their behaviour to hide their sexual orientation to avoid being the victim of a hate crime
- Hate incidents range from regular insults on the street to serious physical and sexual assaults
- Ref: Stonewall research by YouGov 2017 – sample 5000



# Some 'facts' about L G B and T people



- ▶ May 'come out' in later life
- ▶ Many will have been/are married and have children
- ▶ Want to be accepted as themselves
- ▶ Most learn good coping skills as they go through life – problems come from society's attitudes
- ▶ But oppression can result in additional problems, e.g. more drinking, obesity, mental health issues


“All LGBTQ people hear “gay” being bandied around as an insult from the earliest age; they may face verbal or physical bullying, from relatives, friends, people on the street; they may be rejected by family; they are relentlessly bombarded – even now – with the idea that there is something wrong with being lesbian, gay, bisexual, trans or queer; they may be discriminated against in the workplace. The damage is long lasting and profound: they have much higher rates of mental distress, of suicide, of alcohol and drug abuse...”



Owen Jones – Guardian 7 September 2017 referring to Good Morning Britain.

# The Solutions: Organisation

- ▶ Organisations should give a clear message that abuse from staff to staff or patients to staff is unacceptable
- ▶ Support LGBT staff through staff network groups and staff forums
- ▶ These LGBT networks should be supported to contribute to the way the organisation operates in relation to LGBT issues
- ▶ Health and social care organisations should encourage and celebrate LGBT role models at all levels of the organisation and encourage straight allies to speak up about LGBT equality in the work place.

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- ▶ ‘Straight ally’ is a term used to describe heterosexual people who believe that lesbian, gay and bisexual people should experience full equality in the workplace. Good straight allies recognise that gay people can perform better if they can be themselves and straight allies use their role within an organisation to create a culture where this can happen” (Straight Allies. Stonewall – Workplace Guides)
  - ▶ Are your policies inclusive? Use Stonewall resources to help


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- ▶ Have links to LGBT information on your website
  - ▶ Use visual cues to show your organisation is committed to LGBT equality, e.g. posters, rainbow flag
  - ▶ Ensure monitoring of sexual orientation/gender and help staff feel comfortable doing this

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- ▶ When commissioning ensure that service providers give evidence of how their services will approach/work with LGBT people
  - ▶ Train staff – consider mandatory training – those that need the training most often don't volunteer to do it!
  - ▶ Include LGBT news in your communications – e.g. events, groups
  - ▶ Celebrate successes of LGBT staff

# The Solution: Patients/service users

- ▶ Explore your own attitudes
- ▶ Avoid terms like marital status and next of kin. Use inclusive language, e.g. partner. Wearing a wedding ring doesn't mean that the partner is the opposite sex
- ▶ Don't assume that if someone has been married/has children they are not gay
- ▶ If someone has a same sex partner, offer positive messages
- ▶ Remember lesbians/gay men/trans people will have experienced/are experiencing oppression



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- ▶ Remember coming out is a life long and often agonising process
  - ▶ If someone 'comes out' to you, react positively and acknowledge your understanding
  - ▶ Beware terminology, e.g. some older lesbians do not like that term
  - ▶ Remember LGBT people want to be accepted as equal, not tolerated
  - ▶ It isn't enough to say 'we are here for everyone'.
  - ▶ "It is the organisation that needs to 'come out' as gay or lesbian friendly rather than depending upon clients to 'come out' in order to get their needs met." (Opening Doors: Age Concern 2001)