

# "Out about Town"

Survey of the Needs of Lesbian, Gay, Bisexual and Transgendered People in Luton 2003/ 2004

# (Executive summary only)

Produced by the Needs Assessment Subgroup of Luton LGBT Steering Group

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# **Executive Summary**

### Introduction

Luton Lesbian, Gay, Bisexual and Transgendered Steering Group (known as the 'Steering Group') is a voluntary forum for LGBT people and service providers who have an interest in developing services and facilities for LGBT people in Luton. In April 2003 the Steering Group was awarded funding through the Community Funding Initiative to undertake a small-scale survey of the needs of LGBT people living, working and socialising in the town. The survey was conducted on a voluntary basis between August 2003 and February 2004. In total 99 people took part in the survey. The key findings, in general, and for each chapter are shown below. More detailed summaries and recommendations are highlighted at the end of each chapter (or below for the 'summary only' version).

### **General Findings**

Overall the findings from the needs assessment presented a positive view of the experiences of LGBT people dealing with services and living in Luton. However, there were a number of areas where there was room for significant improvement. In particular, key themes that re-emerged throughout were the need for improved information and a sense of a LGBT community away from, or in addition to, the commercial scene. It was clear that many LGBT people preferred to seek information and advice related to their sexuality/ gender identity from other LGBT people. While this can partly be achieved voluntary, and though informal social networks, there is a need to consider a role for a paid, or paid, LGBT Officer, or Officers.

# Access to Services, Information and Advice

Respondents stated that wider information about LGBT services, rights, etc. and informal social support through social activities were the most important developments they would like to see. Access to community, primary care and sex health services were generally good. However, a quarter of respondents had been made to feel uncomfortable about their sexuality/ gender identity by a health, social services, or other type of professional. There was a need for GP practices to reassure LGBT service users that they would receive nondiscriminatory services, and to clarify when and how an individual's sexuality/ gender identity should be documented. The main issue in relation to access to sexual health was the difficulty that many respondents had faced making an appointment. There were also issues about access to sexual health information for women-who-have-sex-with-women and transgendered people.

# Experience and Reporting of Discrimination and Violence

Discrimination from various institutions towards our respondents and their families was generally low with the exception of 'education and schooling' and

'employment'. Over half (54.5%) of our sample had been a victim of a homophobic or transphobic incident in the last five years. One in five respondents had experienced 'five or more incidents' in this time. Around one-third of respondents said they would 'definitely not', or were unsure about, reporting such an incident to the police. Although around half (53.9%) of respondents were aware that they could report homophobic/ transphobic incidents through Community Investigators at Luton Police Station, fewer respondents were aware of other options for reporting such crimes. Respondents were almost evenly divided about whether or not Luton was a safe place for LGBT people.

### Mental Health and Social Support

Overall we found a very positive picture of mental health and social support among LGBT people in Luton. Only 3% of respondents were not 'out' to anyone. 73.5% of our sample had never thought about or attempted suicide. However, 8.2% had attempted suicide once, and 3.1% had attempted it more than once. 93.7% agreed to some extent that their sexuality/ gender identity had been a 'positive' and 'enriching' part of their lives.

The most common living arrangements among our sample were living with a same sex partner (39.8%) followed by living by oneself (30.6%). Friends were by far the most common source of support in relation to emotional problems. They remained important in terms of the provision of physical care, but their importance declined relative to parents and partners. The significance of friendship as an important source of informal social support for LGBT people was reiterated.

### Sexual Health

71.4% of the male sample had taken a test for HIV; 25% of the male sample had not been tested. Of those who had tested for HIV, 24.5% (33.9% among the male sample) said they were not sure of their HIV status at the time of the survey. 60.7% of the male sample had been vaccinated against Hepatitis B; 33.9% of the male sample said they had not been vaccinated.

70% of women in our sample for whom a cervical smear test is available under the NHS cancer screening programme had had a test. This was lower than the national target of 80%.

### Physical Health

LGBT respondents in the sample were found to have higher rates of smoking (especially among men), alcohol consumption (especially among women), and frequent drug use (i.e. at least once a month) compared to the general UK population, or comparable LGBT samples in a neighbouring county (i.e. Buckinghamshire and Milton Keynes). Around one-third of respondents used leisure/ sports centres or health clubs in Luton to exercise or keep fit

(although many respondents preferred to exercise at home or outdoors). Of those people who did not use leisure/ sports centres or health clubs, 16.4% said the reason they chose not to was because they didn't perceive these spaces to be LGBT-friendly.

### Key Recommendations

Detailed recommendations are included with the summary at the end of each chapter. These are the principal recommendations only.

- Luton LGBT Steering Group should continue to raise its profile in the local community.
- Consideration should be given to seeking funding of a paid LGBT Officer, or LGBT Officers.
- In terms of social support priority should be given to the provision of information and the development of informal social networks. Possibilities for the development of a jointly-funded regional LGBT helpline should be investigated.
- GP practices should take more of a leading role in ensuring that LGBT people know that they will receive non-discriminatory treatment or advice. Policies should be developed about when and how LGBT sexuality/ gender identity should be documented.
- Sexual health services should review information on the sexual health needs of women-who-have-sex-with-women and transgendered people as well as that for gay and bisexual men. Luton and Dunstable GUM clinic will need to investigate the difficulty that many respondents had making an appointment.
- Funding should be sought for an investigation into the needs of LGBT people and their families in relation to 'education and schooling'. Information about protection for LGBT people in employment should be made more widely available.
- Bedfordshire Police and the Diversity forum need to continue to raise the profile of ways of reporting homophobic and transphobic incidents in Luton. The police will need to find ways to re-assure a minority of LGBT people that their reports will be handled sensitively and without prejudice.
- The Steering Group should work with service providers as appropriate to help disseminate information and increase the uptake of HIV testing, Hepatitis B vaccination, and cervical smear tests as appropriate.
- The Steering Group should seek to encourage appropriate agencies to further investigate the tentative findings that LGBT people may have increased incidence of smoking, alcohol consumption and drug use. Appropriate interventions should be developed where necessary.
- Luton Borough Council Leisure Services should continue to involve LGBT people in leisure and sports activities, and find ways to reduce

the perception among a minority of LGBT people that facilities in the town are not LGBT-friendly.

# Access to Services, Information and Advice: Summary and Recommendations

### Awareness of Luton LGBT Steering Group

At the time of the survey only 14.1% of the sample had heard of the Steering Group (who were not already members, or who did not already know a member of the group). The Steering Group should continue to raise its profile in the local community. A person or subgroup should be appointed to take responsibility for ensuring that the profile of the group is maintained.

### Access to Existing Services in Luton

Non-LGBT organisations (e.g. Samaritans, Victim Support, Relate) were best known among our sample, but groups, services or organisations that were directed at LGBT people, or perceived to be LGBT-friendly, were most used (e.g. The Lodge, gay-bedfordshire.co.uk website, Men4Men Project).

### Support Needs and the Development of New Services

The developments that respondents said they would find most useful were, information about local LGBT services and legal rights, and informal social support through social activities. There was a specific need to build informal social networks and social spaces in addition to those offered through the LGBT commercial scene (e.g. café, sports activities, walking group, etc.). Formal social support such as a helpline was not a priority but was still thought to be important.

The Steering Group should appoint a person or subgroup whose role it will be to provide information about local services, legal advice, etc. for LGBT people. This group should have responsibility for ensuring that information provided by the Steering Group is up to date, distributed regularly, posted on the Steering Group website, etc.

The Steering Group should consider holding regular social events and develop adhoc subgroups as necessary to take responsibility for these events. A proportion of these events should be held away from the scene.

The Steering Group should not prioritise a helpline as its main development. Instead, the Steering Group should explore the possibility of working with other local LGBT organisations to develop a joint-funded regional LGBT helpline.

### Access to Informal Support

The majority of LGBT people in our sample felt most happy seeking advice and information about their sexuality/ gender identity from other LGBT people. Where this was not possible, self-help books and the media were the next most used sources of information and advice.

The Steering Group should continue to work with Luton Library Services to ensure that appropriate self-help books (e.g. on coming to terms with one's sexuality/ gender identity, affirming LGBT culture/ identity) are available.

The Steering Group should monitor the local media (e.g. newspapers, radio, etc.) for homophobic, transphobic or misleading features. The group may want to consider developing a way of responding to such features.

### Access to Health and Community Services

Overall LGBT people in our sample had a positive experience of health and community services, but a minority had experienced discrimination in ways that need to be addressed. One-quarter of respondents had been made to feel uncomfortable about their sexuality/ gender identity during an interaction with a health, social services, or other type of professional.

The majority (56.6%) of respondents were 'out' to their GP/ practice, but 36.4% were not out. Where individuals had 'come out' the majority felt that their GP/ practice had responded well. However, GP practices need to take more of a lead in reassuring LGBT service users that they will receive a non-discriminatory service.

Policies need to be developed about when it is relevant to document a person's sexuality/ gender identity and how this can be done in a consistent way that preserves patient confidentiality. The Steering Group should raise the concerns expressed by respondents in this respect with the Diversity Sub Committee of Luton Primary Care Trust's Trust Board.

### Access to Sexual Health Services and Information

Overall 47.3% of respondents said that they could 'always' find information about sexual health when they needed it in the local area. A further 36.6% said they could find the information they needed 'some of the time'. However, men were happier about the level of access to sexual health information than women or trans people. The Steering Group should ask local sexual health service providers to review the levels of information available locally to women who have sex with women and trans people.

75% of respondents had heard of Luton and Dunstable GUM services. Men were much more likely to have used GUM services. Services were generally rated as 'excellent', 'good' or 'satisfactory', with the exception of 'ease of

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making an appointment'. 24% (n=6) of those who had used Luton and Dunstable GUM had used another GUM outside Bedfordshire because of difficulty obtaining an appointment. The Steering Group should raise this issue with local sexual health service providers and the GUM clinic at Luton and Dunstable hospital.

### Sex/ Gender Identity of Service Provider

Over half of the sample (55.2%) felt that they would 'sometimes' prefer advice or information about their sexuality/ gender identity to come from a person of the same sex/ gender identity. 25% felt they would always prefer advice and information of this nature to be given in this way.

Where appropriate the Steering Group should raise this issue with the commissioners of local support services. It is clear that there is a role for a local LGBT Officer, or Officers, to provide information about sexuality and gender identity issues.

# *The Experience and Reporting of Violence and Discrimination: Summary and Recommendations*

# Experience of Discrimination from Services

With the exception of 'education and schooling' and 'employment', the experience of discrimination in relation to different services among our respondents and their families was low. Overall, 23.4% (n=15) of our sample said they, or their family, had experienced discrimination in relation to 'education and schooling'; 15.9% (n=13) had experienced discrimination in employment.

The Steering group should investigate the possibility of seeking funding to research the nature of discrimination in 'education and schooling' among LGBT people in Luton, and/ or of facilitating spaces where LGBT people, the children of LGBT people, and LGBT young people can come together to talk about the issues that affect them.

The Steering Group should investigate ways of locally disseminating information about legislative changes (e.g. the repeal of Section 28, employment protection for LGBT people) that promote the rights of LGBT people in education and employment.

### Experience and Reporting of Homophobic/ Transphobic Incidents

54.5% of the LGBT people sampled had been a victim of a homophobic or transphobic incident in the last five years. In this time 17.3% had experienced a homophobic/ transphobic incident 'five times or more'.

About one-third (31.2%) of respondents said they would 'definitely' report homophobic/ transphobic violence, harassment or verbal abuse to the police. A further 31.2% said they would 'probably' do so. But this left around one-third of respondents who said they would 'definitely not' (28%) report such an incident to the police, or who were 'not sure' (9.7%) about doing so. Women and trans people were least certain about reporting incidents.

Overall 53.9% of our sample were aware that they could report hate crimes against LGBT people through the Community Investigators at Luton Police Station. However, respondents were not as aware of other options for reporting hate crimes (e.g. hate crime report forms in pubs and clubs, Bedfordshire Police and Steering Group websites, etc.). Only 23% of our sample were aware of the Diversity forum.

The Steering Group will need to continue to work with Bedfordshire Police, Diversity and Luton Borough Council to address ways in which awareness can be raised about the different ways in which LGBT people can report homophobic/ transphobic incidents to the police. Bedfordshire Police will also need to find ways to re-assure sections of the LGBT that, if they report hate crimes or incidents, their report will be handled sensitively and without prejudice.

### Is Luton a Safe Place for LGBT People?

Overall 58.5% of our sample agreed that Luton was a 'safe' place for LGBT to live to some extent. However, 41.5% disagreed that this is the case.

# *Mental Health and Social Support: Summary and Recommendations*

# Mental Health

Overall we found a positive picture of mental health among LGBT people in Luton. 79.8% of our sample were 'out' about their sexuality/ gender identity to 'everyone' or to 'most people'. Only 3% (n=3) were not out to anyone.

50.5% of our sample felt that their mental health had *not* been affected or suffered because of issues relating to their sexuality or gender identity. However, 23.2% had had a 'few problems' and had sought professional help; 7.1% had had 'a lot of problems' and had sought professional help.

73.5% of our sample had never thought about or attempted suicide. 8.2% of the sample had attempted suicide at least once. A further 3.1% had attempted suicide more than once. As a percentage of their sex male-to-female transsexuals and men were more likely to have attempted suicide.

93.7% of the sample agreed to some extent that their sexuality is a 'positive' and 'enriching' part of their life, despite the fact that 25.3% also said they 'sometimes' found the 'stress of being lesbian/ gay/ bisexual/ transgendered' too much to cope with.

Where applicable the Steering Group should work with local mental health services providers and charities to reduce attempted suicide among LGBT people. The helpline discussed in the summary and recommendations for chapter 3 should include an emphasis on helping those people who felt that their mental health had suffered or been affected by issues relating to their sexuality or gender identity.

### Social Support

The top three living arrangements among our LGBT sample were: living with a 'same sex partner' (39.8%); living by oneself (30.6%); and 'other' arrangements (10.2%), including living with a landlord or in student halls.

'Friends' were by far the most important source of emotional support among our sample. 80.6% of respondents said they would turn to 'friends' if they were experiencing emotional problems, compared to 34.7% who would turn to 'parents', and 23.5% who would turn to 'siblings'.

70.4% of the sample disagreed that they felt lonely when they thought about their sexuality/ gender identity. 86.8% agreed to some extent that, in most cases, they felt surrounded by people who affirmed and supported their sexuality/ gender identity.

In terms of physical care and support, 'friends' remained an important source of support, but their importance declined relative to 'parents' and 'partners'. 63.3% of the sample said they would look to 'parents' to provide care and support if they became ill or were involved in an accident; 52% said they would look to 'friends'; and 50% would look to a 'partner'.

Service providers should recognise the important role played by friends and partners in addition to 'family' in providing care and support. Providing this type of social support should be included as a key part of the attempt to build local LGBT social networks described in the summary and recommendations for chapter 3.

# Sexual Health: Summary and Recommendations

### HIV Prevention

Overall 46.5% of our sample had tested for HIV. This figure increased to 71.4% of the male sample. 25% of the male sample had not tested for HIV.

Of those people who had taken an HIV test, 5.1% (n=5) said they were HIV positive. At the time of the survey 56.6% of the sample said they were sure that they were HIV negative (53.6% among the male sample). 24.5% said they were not sure of their HIV status (33.9% among the male sample). Small numbers of women (n=2) and trans people (n=2) also said they were unsure of their HIV status.

93.1% of respondents who felt that the issue was applicable to them said they could 'always' or 'sometimes' get hold of condoms when they needed them. However, 15.2% of the sample thought that access to condoms could be made easier. A variety of suggestions were made improving the distribution of condoms in Luton. The Steering Group should work with The Lodge, the Men4Men Project and local GUM services to investigate the possibility of taking up these suggestions.

### Vaccination against Hepatitis B

42.2% of our overall sample had been vaccinated against Hepatitis B, although this figure increased to 60.7% for the male sample. 33.9% of men (n=19), 21.6% of women (n=8), and 20% of trans people (n=1), who felt the question was relevant to them, said they had not been vaccinated against Hepatitis B. The Steering Group should ensure this information is fed back to sexual health service providers in Luton.

### Women's Health

70% of women in our sample for whom a smear test was available under the NHS screening programme had had a smear test. This is lower than the national target of 80% and possibly reflects continuing confusion about whether women who have sex with women need to be screened.

The Steering Group should feed this information to Luton Primary Care Trust so that GP practices and Health Educators are aware of these issues. A clear and consistent policy should be developed for women who have sex with women about when and whether it is necessary for them to take a smear test.

The only woman among our sample for whom the NHS breast cancer screening programme was applicable because of her age had been screened appropriately.

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Full copies available by contacting lgbt\_luton@hotmail.com OR Luton LGBT Steering Group, PO Box 1012, LUTON, LU2 0XJ

# *Physical Health: Summary and Recommendations*

### Smoking

Although 56.6% of our sample were smokers, or had been at some time in the past, only 38.4% of the overall sample smoked at least once a day at the time of the survey. However, this is higher than the 28% of men, and 26% of women, who smoke in the general British population.

Of the 59 people in our sample who smoked at least once a day, 81.3% of men did so, compared to 44% of women. Most male, female and transsexual smokers smoked between 10 and 20 times a day.

The Steering Group should explore with Luton Primary Care Trust's smoking cessation services the possibility of establishing a cessation group targeted at LGBT people.

### Alcohol Consumption

While trans people in our sample were found to drink very little alcohol, men and women were found to be heavy drinkers compared to the general population; 46.4% of men, and 40.6% of women, drank 14 or more units of alcohol per week compared to 30% and 15% for men and women respectively in the general population. However, 58.6% of the overall LGBT sample drank less than 14 units of alcohol per week or none at all.

The Steering Group should work with Luton Primary Care Trust and the Community Alcohol Team to further investigate alcohol consumption among lesbian, gay and bisexual people, and to find ways of addressing problem drinking.

# Drugs Use

Although 55.6% of respondents had not used drugs, this was lower than the 61.7% of LGB people who had not used drugs in a directly comparable sample for Buckinghamshire and Milton Keynes. 44.4% of those sampled had used drugs other than alcohol for recreational purposes at least once in the past year; 19.2% had done so frequently (i.e. at least once a month) compared to 7% in the Buckinghamshire and Milton Keynes sample.

The Steering Group should work with appropriate agencies in Luton to help LGBT people avoid problematic drug users.

# Exercise and Use of Leisure/ Sports Facilities

Around one-third (34.3%) of our sample used leisure/ sports centres or health clubs in Luton to exercise or keep fit. The 'Living Well' gym stood out as the

facility that was used the most among LGBT people. Many people preferred to exercise outdoors or at home.

16.4% of those people who didn't use leisure/ sports centres or health clubs in Luton said a key reason for their decision was that they felt such spaces were not LGBT-friendly. Men and transsexuals were more likely to feel this way, with particular issues arising for trans people in terms of changing areas.

We recommend that the Steering Group works with Luton Borough Council Leisure Services to ensure that non-discrimination policies against LGBT are clearly in place and displayed. The council should also work towards offering cubicle changing facilities, for both male and female changing areas, in all its leisure/ sports centres or health clubs.