



Count Me In Too

Initial Findings LGBT Community Report

Count Me In Too Action Group
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University of Brighton

spectrum

the count me in too researchers

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introduction

Count Me In Too! is a groundbreaking research project that is exploring what it is like to be LGBT (lesbian, gay, bisexual and trans) and live, work or socialise in Brighton & Hove, in collaboration with LGBT people, community and voluntary groups and local statutory services.

This report is the result of planning, partnership, engagement and analysis over two years. It has involved and empowered people who have never before been asked about their lives. To see lasting positive changes in Brighton & Hove for all LGBT people, it is for all of us, including YOU, to use the evidence in this report (and the academic report that accompanies it), perhaps in your existing partnerships, perhaps in new partnerships, or in new ways of working.

These initial reports were produced after many hours and days of meetings, emails and phone calls where the action group analysed the large, rich data pool that our respondents provided for us, and identified key findings. Dr. Kath Browne recorded these in the *Academic Initial Findings Report*, and worked with the Action Group to produce this *LGBT Community Report*. This report only looks at the findings of Count Me In Too. It does not make recommendations; instead it will inform future partnerships and action. We wanted not to shock or comfort with easy 'headline' findings, but to involve people in analysing the data further around some key themes.

After saying who took part, this report will explore where and how we live in its first few sections:

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- 10 home, neighbourhoods and homelessness ●
- 12 relationships, civil partnerships, families ●
- 15 going out ●
- 18 difference, discrimination and exclusion ●

then move on to what our needs are and how they are being met:

- 22 safety ●
- 24 health and wellbeing ●
- 28 support, services, monitoring ●

More detailed information (including sampling, sourcing, and significance levels) can be found in the Initial Findings Academic Report. The Academic Report follows the same structure as this LGBT Community Report. It offers more detailed statistics and commentary as well as comprehensive information about the research process, statistical tests and so on.

count me in too!



a little history

Count Me In Too has built on the achievements of the award-winning 'Count Me In' research study. Carried out in 2000, Count Me In examined the personal, social and community LGBT needs. The results led to the development of the Count Me In LGBT Community Strategy 2001-2006. This informed and guided developments by community groups, service providers and planners, and has been used by Health Services and the Council to check progress around how the city meets LGBT needs.

This time around, Count Me In Too provides detailed, up-to-date statistics that can be compared with the 2000 findings. It also looks at newly emerging issues and changes in Brighton and Hove. Count Me In Too also explores the realities of LGBT people from groups within the LGBT communities who are 'marginalised' - their needs and experiences are overlooked. Too few of these people may be included in research to generate valid statistics; the researchers may not understand their issues or know how to start discussing them; or the use of questionnaires may exclude some people. Younger people, for example, were underrepresented in Count Me In; and some people need to use a different language - e.g. British Sign Language.

When we looked at the data we had, we chose to break it down around specific identity groups. We chose lesbians/gay women, gay men, bisexual people, queer people, trans people, Deaf (or hearing impaired) people, Black and Minority Ethnic (BME) people, disabled people (including those who are long term health impaired), people with mental health difficulties (see academic report for the details of this group), people who feel isolated, people living with HIV, younger (under 26) and older people (over 55), and people on low incomes (earning under £10,000).

We wanted to look at the differences between groups, how different kinds of needs and experiences interact, and to really examine our community in all its diversity.

Our partnership approach makes Count Me In Too a positive example of community engagement. We made contact with many agencies, groups and individuals to create our focus groups and questionnaires, and then, during summer 2006, Count Me In Too research began. We used 2 main tools. The first was a questionnaire with subsections about different identity groups (e.g. bisexual people) and experiences (e.g. homelessness). Secondly, we also held 20 focus groups, most of which brought together people with common backgrounds or experiences (e.g. BME LGBT people, or LGBT parents). We asked questions suggested by people experienced in working with the issues that we wanted to explore. In this way our research reflects the concerns of the LGBT community and service providers.

These initial reports are a tool for positive change. Although two years of work has gone into this project, we see this as just the beginning. We hope you will join us, support us or work with us to make Brighton & Hove better - for all of us.

community involvement:

introducing the team

The greatest strength of this project is that it has been designed and carried out by, with and for LGBT people. We think that over 60 LGBT people (so far!) have worked as volunteers on project design and publicity as the 'Steering Group', on data analysis as the 'Action Group', and through suggesting questions for the questionnaire and commenting on the project and processes.

The Participants: 819 people completed questionnaires and 69 people took part in focus groups lasting around 2 hours. Of the people who took part in the focus groups, 29 had not completed a questionnaire, so the focus groups were our only way of hearing from them.

The Community Steering Group: Nick Antjoule, Leela Bakshi, Mark Cull, Camel Gupta, Sandy Levy, Angie Rowland-Stuart, Joanna Rowland-Stuart, Pat Thomas, Lisa Timerick, John Walker, and 7 others

The Action Group: PJ Aldred, Nick Antjoule, Leela Bakshi, Mark Cull, Petra Davis, Camel Gupta, Julie Nichols, Lisa Timerick

The Researchers: Dr. Kath Browne, University of Brighton and Arthur Law, Spectrum Coordinator.

where next?

These initial findings explore key themes that have emerged from first analysis of the statistics and stories, and set the scene for more investigation during 2007/8.

Further examination of the data is planned, looking in more detail at themes including Domestic Violence, Community Safety, Health, Mental Health, Drugs & Alcohol, Housing, Older people, Young people, Bisexual People, Trans People and more. These themed analyses will involve users, providers and commissioners of services, and be led by existing inter-agency LGBT working groups. Please contact us if you're interested in getting involved.

Spectrum is seeking funding to pay for development of a new Community Strategy that will bring together action plans and objectives, to outline practical changes that will address issues identified in this research. Please contact us if you're interested in getting involved as a service provider or as part of the Community Reference Group.

who was counted?

From the start, Count Me In Too wanted to include and reach beyond those who are usually counted in LGBT questionnaires. It did this by engaging with marginalised people in the LGBT community using both the focus groups and the questionnaire. These sample figures show that to a large extent this project engaged broadly.

Of the 819 people who completed the questionnaire, a brief sample profile is:

- 86% of the sample lived in Brighton & Hove.
- 34% of the sample identified most closely as lesbians and gay women, 53% gay men, 6% bisexual, 3% queer, questioning, unsure and heterosexual added up to under 2% of the sample and other just over 2%.
- 5% of the sample were trans
- 56% of people are male, 41% female with 3% in other gender categories
- No one who answered the survey was under 16. 60% of people were aged between 26 and 45, 15% (122) are defined as young people (under 26) and those over 55 (10%) are classified as the older age group.
- Just under 3% of the sample identified as BME and just over 3% identified as an 'other' ethnicity category.
- 3% of the sample identified as being deaf, deafened, hearing impaired or deaf blind.
- 15% of the sample had a disability
- 7% of the sample had tested positive for HIV
- 16% were parents or closely related to young children
- 10% of the sample earned under £10,000 (here classed as low income), with 12% earning over £40,000 (high income).

The focus groups were asked to identify their own labels - the details can be found in the academic report. To simplify a complex list of labels, briefly, the sample included:

- 29 people who identified as gay men, 20 lesbians and gay women and 8 bisexual people
- 31 males and 30 females
- 23 people who claimed disability allowances or identified as disabled
- 21 employed, 7 retired and 10 unemployed with 3 on incapacity benefits
- 10 aged between 16 and 25, 9 over 55 and 40 between the ages of 26 and 55.

brighton & hove

This Brighton & Hove section outlines how those who took part in the focus groups and survey feel about the city, the celebration of Pride and the desire to do volunteer work in the city.

Most people feel Brighton & Hove is a fabulous place to live as an LGBT person and better than other places they have lived. LGBT people who live elsewhere would like to live here and use the services that are available in Brighton & Hove

76% of participants found it easy or very easy to live in Brighton & Hove as an LGBT person; only 5% found it difficult. Only 3% of people had never lived anywhere else. 70% of people who had lived elsewhere thought that Brighton & Hove was a better place to live; 4% found it worse than where they lived previously. Of 105 people who completed the questionnaire and lived outside of Brighton & Hove, 52% would like to live here. 62% would like the LGBT services that they use here to be available where they live. 39 people used services in Brighton & Hove because they are not available where they live.

“It’s [Brighton] a fabulous place. The sea definitely keeps me here and the Downs, the countryside and do love all of that. But probably, well, it’s my home, really, it is my home...it has a big LGB community and so that’s clearly a very important part of my staying.”

“It’s got everything I need here and I feel like really supported here. I’ve got all my friends here. It is easier to be out than anywhere else in the country, I’m sure pretty much.”

Difficulties encountered living in Brighton and Hove are discussed later in the report.

90% of respondents have attended Pride in Brighton & Hove. Certain groups are less likely to have attended Pride and more likely to say that they don’t want to attend Pride

45% of respondents went to Pride every year for the past 5 years. Only 2% said they didn’t want to attend Pride; this figure rises to 11% of older people and 5% of people who earn less than £10,000 per year. 26% of trans people hadn’t been to Pride. By contrast, no bisexual or queer people said that they didn’t want to go to Pride.



“We’ve all had challenging lives and stuff, but there has been progress, there’s been a huge amount of progress in the city and Pride is the example of that. There are 150,000 people who are going to descend on Brighton in two weeks time. The Pavilion will be pink, everyone will be up for it. I think is a fantastic thing. From those early days when there were a few hundred of us dodging missiles around Churchill Square and trying to chant, ‘We’re here, we’re queer, we’re not going shopping’ and trying to miss the bullets.”

In focus groups people mentioned difficulties of access, lack of parent friendly space at Pride. They commented that the council is only interested in LGBT people because of the money Pride brings to the city.

There is a large pool of potential volunteers willing to do unpaid work with LGBT groups and the wider community. They want to be supported and appreciated by LGBT people

483 people (60% of respondents) indicated that they want to do or have done voluntary work in the past 5 years. 86% said they might volunteer with an LGBT group.

When asked about reasons for wanting to volunteer, three quarters wanted to be of service to others and the community, and half indicated personal development. The same proportion gave social reasons, and a quarter indicated employment reasons (e.g. moving into work). Some people expressed fear of negative experiences when working on a voluntary basis, referring to past events.

“Few people have to do a huge amount of work and are pilloried for doing so. I have useful talents and am committed to volunteering for our community - but do I need the crap?”

home, neighbourhoods and hom

This section explores where people live, the problems in neighbourhoods, who people live with, accommodation problems and homeless statistics and stories.

LGBT people live all over the City, not just in a few areas

Only one fifth of LGBT people who completed the questionnaire lived in St James Street and Kemptown.

There are stories of verbal abuse and bullying in some neighbourhoods. Some people were reluctant to tell other LGBT people that they came from certain areas

29% of those who lived in deprived areas (see academic report for the full list) had experienced discrimination on the basis of their sexual or gender identities. Particular neighbourhoods were also mentioned in the focus groups and experiences of abuse and violence recounted.

“There were these two people, they were hassling me - putting like lit matches through my door, food through my door, just writing DYKE right across the landing, getting shouted out you know like on the balcony as you are walking down the road, ‘Oh you fucking poof’ and all that and ‘Go back to Lesbos land’. It went on for about six years.”

21% of those who live in deprived areas said they did not tell people on the scene where they live. 14% had received negative reactions from LGBT people because of where they live.

“People say ‘I’m not coming back with you because you live at Whitehawk.’ So I say I live at East Brighton.”

People have a variety of living arrangements which vary according to sexual and gender identities, age and other factors

Most respondents lived with a same sex partner: 39% of respondents overall, 52% of lesbians and gay women and 38% of gay men, just over a quarter of those who defined as queer and 17% of bisexual people. More people (44%) in the 26 to 55 age group lived with a same sex partner. Around a quarter of people over 55 and those under 26 lived with a same sex partner. People who have mental health difficulties (35%) and people who feel isolated (27%) were less likely to live with a same sex partner. Trans people were also less likely to live with a same sex partner (18%). 7% of lesbians and gay women lived with children. Almost a third of respondents lived alone, rising to 49% of people over 55, and 39% of people who said they are isolated. 10% of people lived with gay or lesbian friends, and 7% with straight friends.

Around 10% of gay men, lesbians/gay women, and bisexual people lived with gay and lesbian friends. People with mental health difficulties were more likely to live with lesbians and gay friends (13%). Queer people were the most likely to live with gay and lesbian friends (26%). 20% of those under 26 lived with gay and lesbian friends, those between the ages of 46 and 55 were the least likely to live in this arrangement (5%). 8% of those over 55 lived in this household form.

The number of people living with straight friends was highest amongst people under 26 (22%). The figure decreased steadily, from 9% of those aged between 26 and 35, to 3% of those aged over 55.

Only 2% of respondents lived with people who are not friends or family, but 4% of people who feel isolated or sometimes feel isolated lived that way, compared to only 1% of the rest of respondents.

Most people were happy with their accommodation, but a quarter of people said they have problems getting accommodation and most said that cost of housing is a problem

Over 80% of respondents were happy with their accommodation, with 14% saying that they were not happy with where they lived. However, 25% had problems getting accommodation: 86% of these people found Brighton & Hove too expensive, and 44% said that there was a lack of suitable housing. 17% said that the lack of LGBT friendly options was a problem.

Around a quarter of respondents have been homeless at some point in their lives. Most were homeless for less than 18 months (93%), and nearly a third were homeless for under a month. Some groups are more likely to become homeless

Homelessness had been experienced by 36% of trans people, 33% of disabled people, 33% of people who said they were bisexual, queer or other, 33% of people who earn under £10,000, 29% of people living with HIV, 22% of lesbians/gay women and 19% of gay men. Those who earn under £10,000 were over four times more likely to have been homeless than those who earn over £40,000. 13 people were sleeping rough, living in temporary accommodation, staying in a hostel or with friends, or sofa-surfing at the time when they completed the questionnaire.

"When I came out, when I got together with my first partner [either] family would have had each of us live at home but her parents wanted me to stay away from her house & street, and my parents were hostile to her. We often didn't know where we were going to stay next week and sometimes that night. We stayed in very temporary accommodation and slept on floor/sofa/ 'housesat' for friends. It was years before I thought of this as being homeless, because we had a roof over our head. We contacted several lesbian/gay housing support services but they were full to capacity. The lack of a place to go was massively stressful. Due to stressful fall outs with family, even more stressful. My partner started getting panic attacks and I know my mental health was not good. This made it harder to enter house-shares as we obviously didn't come across as easy going housemates. We house-shared with people from China, Eritrea, Malaysia who perhaps didn't recognise our stress and I know didn't initially recognise that we were a couple. One person who sublet to us told us to leave when a friend visited her & I think pointed it out we were a couple. We lived together for 9 months in a house with 'no boyfriends after 10pm' rule. When housemates worked out we were sleeping together, they giggled a lot but didn't make problems."

18% of people who have been homeless have used sex to have somewhere to stay, compared with around 5% of people who have never been homeless

4% of people overall had had sex, or made themselves available to have sex, to have somewhere to stay.

See 'Out On My Own: Understanding the Experiences and Needs of Homeless Lesbian, Gay, Bisexual and Transgender Youth', Mark Cull, Hazel Platzer and Sue Balloch. June 2006
www.brighton.ac.uk/sass/research/

relationships, civil partnerships, fa

The relationships, civil partnerships and families section outlines the types of relationships people have; feelings about, and information on, civil partnerships; and the problems faced by LGBT parents and their children.

The vast majority of respondents usually have monogamous relationships, but quite a few choose other arrangements

82% of people who had been in a relationship said they usually had monogamous relationships, though 14% of people did not usually have committed relationships; some had open or polyamorous relationships (relationships involving more than one partner).

There are varied opinions about Civil Partnerships. The proportion of people who state that they have or might want a civil partnership ranges from 50% to 90% for different identity groups

Young people were the most likely to have or possibly want a civil partnership: 90% of people under 26 said they had or might want a Civil Partnership, compared to only 50% of people over 55. Deaf people were least likely to want to enter a civil partnership, with 30% saying they definitely would not. People who were more likely to have or possibly want a civil partnership included disabled people and people in higher income brackets (84% of people who earn more than £20 000 per year, compared to 70% for people earning under £10 000).

Discussion at focus group indicated that some see civil partnerships as progress towards equality, while others expressed disgust and anger. Legal and financial benefits were welcomed. There was divided opinion about whether it was preferable to be offered the opportunity to enter a civil partnership rather than marriage.

“I think it’s progress. My ex-partner and I talked about making our relationship more solid in some way. It was basically that the house we lived in was mine and I knew that if I went under a bus the next day that there’d be quite a squabble within the family about the assets. There wasn’t any means at the time other than a will. So I kind of welcome it. I know it’s not the real deal, that’s hopefully going to come in the future, but it is a bit of progress. I think the numbers of people doing it sort of speaks volumes and it means something quite significant to them. It’s just a nice, nice thing in the gay world that isn’t just about, you know, shagging and taking pills really. Commitment isn’t really talked about an awful lot, I don’t think.”

“I’m quite looking forward to the point where teenagers or the people who [are] coming out and have some contact with kind of queer society for the first time [are] going to see couples who’ve been together for a long time, and know that’s an option there.”

“I think it’s pathetic, I mean, we’re [gay people] always going to be different, so why suddenly do we want to rush to be the same? I mean being gay is the biggest excuse you’re ever going to have in your life to be different. You’ve been different from an early age and you’re family and the trouble you’ve had with your friends and the place you live. Then suddenly you’re at a certain age and you want to get married. I mean, no I disagree with that, I think it’s a load of rubbish.”

People in same sex relationships need more information about how civil partnership affects them; some people on benefits are unaware of their duty to notify agencies if they live with a partner. Some people have experienced financial loss as a result of the Civil Partnership Act

One third of respondents who lived with a partner said that they did not have enough information on how the Civil Partnerships Act affects them. 34% were unsure as to why they should report their living arrangements, or felt that the duty didn't apply to them. 29% of people who lived with a partner had reported this to all or some of the relevant agencies, while 27% had not reported to any agency.

Out of those who had reported, 23% had experienced financial loss as a result of the Civil Partnership Act, because their partner's income was then taken into account when calculating benefits. Focus group participants indicated that by requiring LGBT people on benefits to declare if they are in a same sex relationship, the Act changes entitlement to benefits and number of bedrooms available to people living together in social housing. There was discussion about the negative impact of this for LGBT disabled people.

LGBT parents and their children frequently experience exclusion and discrimination, both from other LGBT people and from the wider community, and need increased access to advice and support

Parents reported difficulties directly related to the parent's sexual or gender identities in many different services. These included youth clubs, preschool provision and legal advice services (between 10 and 20%), housing, benefits and health care services (all around 22%). More than a third (34%) reported difficulties at school. 28% of parents said their child had been bullied or taunted because of the parent's sexual or gender identities. Half of parents did not know where to get advice and support around being an LGBT parent or the implications of the Civil Partnership Act.

Focus group participants described choosing to be part of groups with straight parents and at times not coming out in these groups, and there was discussion about negative responses from LGBT people who are not parents.

"I think there's real difficulties in our communities about lesbians and gay men who have children. A lot of people say that they don't want children, but then when you mention you know a lesbian or gay couple that have children, there's this real sort of like 'they're not the same as us' type feeling. We can't really deal with children and their lesbian and gay identity at the same time."

"I think that you experience another level of oppression from the LGBT community, that parents have some sort of exclusion going on there."

The majority of respondents currently have good relationships with their family of origin, but family backgrounds are important and can be difficult

"We all get on really well and they're completely gay friendly."

While 74% of respondents described this relationship as good or very good, sadly more than one in ten respondents indicated that they have poor or very poor relationships with their family of origin. Focus group participants described pain and loss when negative responses to sexual or gender identity affected relationships with family members.

"They completely rejected me and have requested I make no further contact with them."

"It's not fair that they feel they can sort of push me away because (I am gay), because that's who I am."

"(It's) painful because there is this 'We want you in the family, but we don't actually want you'. This is how I put it in my head: they want me, their daughter, in the family, but they don't want all of me."

going out

This going out section looks at how comfortable people feel about straight and LGBT venues, as well as people's need for different kinds of social space and sources of information.

Most people socialise in straight venues and feel comfortable doing so

"I go to straight pubs a fair bit because a lot of my friends are straight, and I want to socialise with them."

"We go to straight/mixed bars mainly. It's still easier and all that."

"Pubs in Kemptown you find you get more - oh, what's the word? - hostility. The Bristol Bar and sometimes the Barley Mow and it's just nice pubs to go into, there's no atmosphere, everyone's just sitting there, they're minding their own business and people really couldn't care what you get up to. Whereas you walk into a gay bar, everybody wants to know who you are and what you're up to."

Straight venues were described as 'comfortable' for 61% of respondents and 'uncomfortable' for 17%. The live music scene was described as welcoming and friendly. 49% of bisexual people said straight venues and services welcomed them and their same-sex partners; 20% disagreed.

Most people enjoy LGBT venues in Brighton & Hove


The majority of those who answered the questionnaire said that they enjoyed LGBT venues and events in Brighton & Hove (73%).

"I'd probably go to gay bars about 90%, 10% straight. So usually I'm on the gay scene, that's where I feel more comfortable. I'm not so comfortable when I'm in straight places, not 100%, no. There's few places in the world that has so many choices for gay people as Brighton. I think for a good gay lifestyle, it's great"

Not everyone enjoys the scene as much, and there are issues for trans people, younger people and bisexual people

The use of the term 'gay' scene is appropriate here where only 42% of trans people enjoyed using the scene. Similarly lesbians (68%), bisexuals (64%) and those who define with other sexual identities (56%) did not enjoy the scene as much as gay men. Those who smoke (80%) are more likely to enjoy the scene than those who don't (69%).

84% of people under 26 enjoyed using the scene; this fell to around 54% for people over 46. Yet, young people in the focus groups commented that underage LGBT people are barred from most LGBT space.



“A lot of bars, like some places will only accept people who are over 21, and then some places will accept over 18. I’ve noticed that there are some particular places that are very awkward about letting young people in because they just think, ‘Oh, trouble’.”

“You can’t go to pubs because you’re under age and you can’t go to clubs, it’s quite hard to sort of interact with people. You can’t just go up to someone and say ‘You wanna date?’.”

Bisexual people commented in focus groups that lesbian and gay scene venues could be unwelcoming to bisexual people with partners of different sexes: in the questionnaire, 38% of bisexual people indicated that these venues were not welcoming, while 36% said they were welcoming.

“I’ve got a boyfriend, we are both as gay as each other, you know, we’ve been out as queer, gay, whatever you want to call it for years and years and years, and he comes down here and we wanna go out and going to a straight venue it just doesn’t cross our minds. It’s just, you know, ‘Where shall we go? Shall we go to the Marlborough? Shall we go to the Queen’s Head, Queen’s Arms?’ We’ve got a queer history as everybody else in the pub. [But] when we go out to these places we can’t be affectionate with each other and we can’t kiss and cuddle and be obviously together like you would same sex couples in the same place and it feels uncomfortable. Sometimes we’re like we’re getting filthy looks from people like, you know, ‘What’s that straight couple doing in here?’ I have to regulate my behaviour to gay pub.”

going out

People want greater diversity in social venues and events

Throughout the focus groups there was a call for alternative social options that do not revolve around the commercial scene and particularly socialising that is dependent on drinking (and drug taking).

“Having a social centre to go to that doesn’t revolve around like drinking and smoking would be really good.”


“That’s a lot of pills to be popping that weekend and that’s a lot of alcohol to be drinking and actually in part I think it’s because there’s nothing else to do. I mean really, how else are you gonna meet people, where else are you gonna hang out with people?”

The segregation that is part of Brighton’s commercial gay scene was also seen in a negative light:

“It just annoys me I think that you can’t have pubs that are from the 18 year olds up to the 80 year olds, for our sort of generation the idea of going to the pub was a little social gathering, wasn’t it? It was a social club.”

Other options and possibilities were fondly remembered:

“I can remember in the last five years [one thing] that happened that wasn’t club driven or Pride driven or something. It was somebody I knew who used to go out clubbing a lot and was actually trying to kick quite a serious habit and was frustrated that there wasn’t any means for him to socialise other than clubs or whatever. So he set up a series of picnics that happened in Queens Park. It was really nice because people just came along, it was a nice sunny day, brought food along, they shared food and they just hung out in the sunshine, chatting, playing rounders, whatever. It was just really nice and everyone was welcome, you know, dogs, cats, people, kids everything, it was really nice; and that sort of thing doesn’t happen enough, because it is all about going out and partying, which is lovely but it’s difficult to socialise in any other way.”



People perceive a lack of a central information source providing information about LGBT services, life and activities in Brighton & Hove. People who organise groups and events, and people who want to find out about them, both commented on this

Switchboard and the local LGBT press were mentioned as sources of information about events in the city. There were issues around access for Deaf people, people who are less familiar with LGBT scene, and others. Particular issues mentioned were not being able to get into scene venues or places where magazines may be delivered, and so missing out on support or social networks.

“It would be nice to have a community centre, one place, one-stop shop where everything was there, where you could go for information, support, advice.”

“It would be incredibly useful to have one website, one phone number, one office, and actual physical space to be able to go in somewhere and pick up information and talk to people. It means you’re kind of making the first step in getting to know people and it didn’t matter if [people] used computers or whatever the internet or read gay magazines or whatever, it would be much more accessible for everyone.”

difference, discrimination and exc

This section looks at how LGBT people are discriminated against, both by straight society and by other LGBT people. It discusses positive new legislation, then some of the problems we have in recognising we have been discriminated against. Finally, it looks at experiences of marginalisation and examines the hierarchies within the LGBT community, and how they can lead to experiences of exclusion and isolation.

Equality legislation has had some positive effects, and some everyday forms of oppression have become invisible - but despite this, the majority of people said they had experienced some form of abuse (from verbal to physical) in the past five years

The questionnaire asked about forms of discrimination against which legislation has been passed. A quarter of respondents said that during the past 5 years they had experienced “direct or indirect discrimination in the provision of goods, services or facilities” (as defined in the Equality Act 2006). There was recognition that legislation can have a valuable effect.

“One day my boss just called me into his office and said, ‘There’s no easy way to say this, are you going for a sex change?’ I thought I was going to get a P45, but I wasn’t really going to live a lie any more, so I said ‘Yes’. He just said ‘Get a letter from your GP saying you’re undergoing gender reassignment, we’ll support you 100%’. That’s because a policy had just been developed and had addressed trans issues following legislation.”

Oppression continued to be a part of everyday lives.

“It is a very subtle thing you see because discrimination is a word that sounds like something very active that somebody does to you and actually oppression, which I prefer to speak about is like a soup that you are sitting in. It is in your eyes and you nose and it is everywhere so it isn’t something that you can say well that person did that thing to me. You can identify those events but they are like the carrots in the soup, they are like the big bits that you can grab hold of and say ‘well I was walking along the Level and somebody hit me over the head without provocation and then proceed to racial abuse me’. So that to me is at the hunk of you know carrot or leek or whatever it is that’s in the soup but the rest of the soup is there all the time. And you know that’s life, that is actually what life is like when you are you know you are a woman, you are a Lesbian, you are Asian, you are Muslim, you are all of those things that I am. I think in Brighton there is a kind of naivety, ‘oh we are all very nice in Brighton and therefore we don’t discriminate against anybody’ and I think that’s a problem. There is a kind of naïve collusion with institutional and other forms of what is soupy oppression, which people don’t really recognise.”

A number of respondents who had experienced this 'soup' effect had difficulty naming their experiences as discrimination, abuse or homophobia. Yet many negative experiences were described in the focus groups. One woman who said she had not experienced homophobia went on to say:

"I was only sitting on the bus this afternoon and there was quite a lot of school kids going on about fucking lesbians and all that and I don't tolerate that situation so I could have told them to shut up but I didn't. I just sat there and just listened to them and, you know, that's really bad abuse at me because I'm a lesbian."

73% of respondents reported some form of abuse (ranging from verbal abuse to physical violence) over the past 5 years as a result of their sexual or gender identities, most commonly negative comments and verbal abuse, and mainly from strangers in the street.

Marginalisation has a significant impact on the feelings, life experiences and life choices of LGBT people, who commonly experience abuse and other kinds of harassment and discrimination

"I would have said ten years ago that being different was really hard and I didn't like it and I would like to be less different., But now I'm entirely the other way, and being queer and being British Asian and being a combination of the two is who I am and not many people are. That doesn't make me better than anyone else, but it means that my experience is something that's valuable because not many people share it and it's part of my life, I guess. I can see the ways in which being queer and being British-Asian separately and together have made me good at things that I am happy that I'm good at [and] are part of the qualities about myself that I like."

In focus groups, as well as feeling positive about being 'different', participants talked about how negative responses to their identity left them feeling angry, hurt and hopeless, or disadvantaged at work and in education. This influenced their life choices: they spoke about the need to balance pride and safety, and not to over-estimate their ability to fight discrimination.

"I wish we could just go out, down to the pub or wherever without being stared at."

"When you think about safety, one probably thinks about physical hurt, being beaten up. But even if it's a 10 year old that shouts abuse at you, it hurts a hell of a lot and even if you don't consciously think about it, the whole week you're probably affected by that, very depressed just because of that little thing."

Paid employment was discussed in a variety of ways in the focus groups. Positive aspects included having the power to be your own boss, working with supportive employers and feeling free to be out at work. 69% of respondents said they were out at work, with a further 13% sometimes out or unsure whether they were out.

Other people talked about the problems they had at work, pointing to the continued discrimination experienced in workplaces:

“I find I don’t suffer any problems when I go into shops. I think that’s because there’s the constant emphasis on the kind of putting the customer first and what have you and so if I was ever to kind of get ‘That’s £2.50 please, Sir’ I would not stand and tolerate it for a second. When I am serving customers myself and they greet me as Sir, I feel there is nothing I can say, because I’ve got almost no ground to stand on, to say anything. They haven’t really, you know, gone ‘You fucking transsexual’.”

“She’s been threatened with disciplinary action if she comes out to an LGBT service user. It’s a historical kind of things about being gay is unprofessional, that it’s something you leave at home. It’s not something that you can bring to inform your work.”

“In my current job I think I’m being kind of unfairly discriminated against for promotional purposes. I think they’re kind of worried as to how the customers will react if I have position over of authority, if they were to call a manager to solve the situation and the manager is trans, I think that’s where they’re kind of really concerned, and because of that I’m being treated worse off.”

“An awful lot of us have come out of local authority or voluntary sector jobs because we are fed up with institutional racism, sexism, homophobia - decided to be our own bosses, because we felt that we had the talent and ability and intelligence to do that. I know I left a job that I loved because of racism and homophobia.”

LGBT people experience discrimination for different reasons and in different ways

Participants described how different aspects of their identity led to them feeling marginalised: over 80% of BME respondents felt marginalised by their identity, around 60% of bisexual and trans people, around 40% of disabled people, and over 30% of Deaf people. Trans people talked about a lack of understanding of trans issues and experiences, though they also felt the value of being part of the LGBT community.

LGBT people, businesses and services fail to respect and include LGBT people who are ‘different’

In this research, we looked at the experiences of specific identity groups. Responses from all these groups listed ‘other LGBT people’ as one of the top four sources of bullying, abuse, discrimination, or exclusion. Within focus groups, people talked about how their ‘other’ identities separated them from the LGBT community, as well as a lack of understanding from LGBT service providers.

“It is actually scary being out on the gay scene. Say if I’m chatting somebody up in the Marlborough or wherever, or chatting a female up, and it’s all going well and I’m like ‘Oh no, I’ve got to do the bisexual bit - now is this going to be the end of it, it’s either going to go two ways, she’s either going to go ‘Great, fine, not a problem’; the other way she’ll be like ‘Bye!’.”

"It's also contagious. An ex-girlfriend, when she identified very strongly as a lesbian, when she started dating a bi woman all her lesbian friends ostracised her and she got chucked out of the lesbian scene for, you know, 'contamination'."

"When you start talking to people on the scene and you explain to them that you've got a mental health they seem to disappear, they just don't seem to want to know. You are classed as nutter, as soon as you say you've got a mental health problem, 'Oh you're a nutter'."

"If you go to a [gay] pub and you say 'I'm from Whitehawk', and they're like, 'Well where's your Burberry?'. The Pride in Whitehawk float challenges that. So I think it's about having more positive imagery. It's challenging what they usually think about, about LGBT communities."

"More awareness from the gay community really. You know, a bit more in the positive attitude."

Many LGBT people feel isolated

One third of the total sample indicated that they felt isolated or sometimes felt isolated, but this figure was much higher for some identity groups: 75% of people who identified as BME and 50% who identified as Traveller/other identity; and 57% of Deaf people. Income was also an important factor. People with lower incomes were more likely to feel isolated: only 50% of people on lower incomes indicated that they did not feel isolated.

In focus groups, people described physical isolation - for example, rarely leaving the house for fear of homophobic abuse from local people, or having few (or no) friends or places to go. People also described feeling alienated from others who did not share their culture or understand their perspectives and issues.

"Just recently there was two kiddies from across the road, they were standing there for well over an hour and a half throwing stones at the car. The man knew his kids were doing it, he even threw one and it hit a bus. It's intimidation. I've had my car, damage done to my vehicle, they just plonk their arse, ram right up to the back of it. They take my disabled parking bay, half in and half out and block me in so I can't get out - but why? What have I done? I've only been there, what, 2 years. I hardly go out the house. I very occasionally see the neighbours and if I do go out it's usually late at night when they're all in bed. "

"I wouldn't go along to the Women's Walking Group, and what tempers my enthusiasm is experiences all through my life of going to something like that and not fitting. It's not that I look different and people are horrible to me, it's the sort of things that people talk about and their attitudes to life are very different to me. Life experience has told me that probably I won't have anything in common with them and it won't lead to friendships and really is quite a negative experiences for me to feel like they're all having a good time and chatting making friends and [that] I can't be part of that something that fits with one layer [of my identity] isn't going to fit with the other layers."

safety

This section outlines the findings regarding hate crime and domestic violence and abuse. It also discusses public awareness of knowledge of safety initiatives in Brighton & Hove, as well as police and safety service performances in the last five years. Finally, it talks about improvements that people would like to see.

Hate Crime against LGBT people is common, but many people don't report it

Almost three quarters of respondents had experienced hate crime in the past 5 years (ranging from verbal harassment to physical violence) because of their sexual and/or gender identities. Only a quarter reported any of the hate crime incidents they'd experienced. Of those who had reported, 85% had reported the incident as being related to their gender or sexual identities. Of the people who chose not to report at all, more than half made that choice for 'other' reasons - reasons we had not listed in the questionnaire.

When people did report hate crime, they mainly reported it to the Police (55%) or elsewhere (37%), rather than to the Community Safety Team (7%) or through the True Vision self reporting scheme (1%).

"There's a lot more talking than there used to be, a lot more listening but I still hear about things going on. There's still people getting beaten up; you still hear stories of being verbally abused in the streets, and it's those kind of things that would stop a mate of mine who would never come into town."

"I was attacked outside Revenge and I had my mouth kicked in and stitches here, all because there was a person next to me who was being quite verbal and they thought it was me. But when the Police came it was just horrendous, they were crap. But that was going back a few years, about five years now. There's been a couple of situations since then, but on one occasion I didn't phone the Police but then on other times I have. It just depends how desperate it is, but there would be something at the back of my mind that thinks 'How would I be treated now?', because I thought it was quite appalling then."

Domestic Violence and Abuse is an important issue for LGBT people, but many people do not report it

Around two thirds of trans people and 44 % of bisexual people had experienced abuse, violence or harassment from a family member or someone close to them. A third of lesbians/gay women, and a quarter of gay men, shared that experience. Around a third of respondents overall had experienced domestic violence, rising to around half of certain groups: people in the Traveller/Other category, disabled people, people with mental health difficulties, and people who feel isolated. Overall, only 22% of domestic violence and abuse was reported, mainly to the Police. Some Police services did not take LGBT domestic violence seriously, as this report (which happened outside of Sussex) shows:

"They used to say 'Oh, it's you two dykes again. Oh, it's you two'. So yeah, that was a problem."

People do not know about the initiatives that support LGBT people who experience homophobic, biphobic and transphobic crime

22% of respondents were not aware of any LGBT specific services for victims of crime in Brighton & Hove, and 13% of people who didn't report incidents said they "didn't know who to turn to". While 63% of respondents were aware of the Police LGBT Community Liaison Officer, only 30% knew about the LGBT community safety officer, 24% knew of the True Vision self reporting pack, and 20% knew of the Partnership Community Safety Team.

LGBT people have varied opinions about services that deal with crime against us. The Police were praised in Focus Groups and responses to the questionnaire

"They've got a base board outside (John Street) and it states quite specifically that homophobic crime is illegal, you know and stuff like that, and that at least indicates to me that they are not going to victimise me if I go in as a gay man and report some sort of crime. I hope, at least they say so on the outside."

"I was very, very surprised (with the police presence in the Pride parade) because it is one of the things, it's like the Forces, they wouldn't dare admit it once upon a time, 'I'm gay'. You'd get thrown out, you know. I was amazed that there were actual police there who would admit to being gay."

Researcher: What difference did it make to your attitude to the police?

"I'd be more inclined to confide in them over an issue."

58% of people who had lived in Brighton & Hove over 5 years felt that the Police had improved in that time. Although there were stories of lack of respect and ineffective responses from Police, participants were pleased by changes in police practice and attitudes in recent years. 43% reported "good" responses to incidences of hate crime and domestic violence, though 32% said response was "poor". At 62%, the majority said that services to victims of crime were "neither good nor bad". 21% of respondents felt that the Police are prejudiced against LGBT people, while 37% said they are not.

"The Police, I'm surprised, the Police have been great. To be honest, I thought the Police would be a bit awful, I thought the Council would be the better one. But the Police, they have got cases together, prosecutions. [The council is] very good on paper and announcements but when it comes to actually doing anything actively, it all gets brushed under the carpet really. As soon as I'd given my statement the Council like don't need to do anything about it any more, and they've let him carry on. I never get any replies, none of my emails or letters are answered, phone calls that I'm promised I'll get by the afternoon just never turn up."

There is enthusiasm for further initiatives to improve services

Three quarters of respondents said they would like increased Police presence in hate crime hotspots, and two thirds would like to see increased publicity for convictions of hate crime and LGBT awareness training for Police and service providers. Over 35% would like there to be hate crime reporting centres in LGBT venues and organisations. Around 45% would like to see a new homophobic/ biphobic/transphobic crime hotline.

health and wellbeing

This section begins by looking at mental health, access to support and suicide. It moves on to address drugs, alcohol and smoking. It then looks at sex work and access to health services, including a discussion of being out to your GP. Finally, this section looks at some possible improvements to LGBT health and wellbeing, including a suggestion for a healthy living centre.

While only 10% of the survey experienced poor physical health in the last 12 months, twice as many (20%) experienced poor emotional wellbeing, and some groups were more likely to rate their emotional wellbeing as poor or very poor

Lesbians/gay women (65%) and gay men (64%) were most likely to report good or very good emotional wellbeing in the last year. By contrast, other identities reported lower rates of positive emotional wellbeing: only 26% for trans people, 42% of people living with HIV, 48% for queer people and 57% for bi people.

Overall, around a fifth of people said they had poor or very poor emotional well being over the last year, but this proportion rose to 42% of trans people, 38% of people who feel isolated, 37% of people on low incomes, and over a quarter of people over 55.

Mental health remains a priority health issue, with only 1 in 5 people reporting no mental health difficulties in the past 5 years. Some groups were more likely to have experienced mental health difficulties

The questionnaire asked people whether they had experienced mental health difficulties in the last 5 years with emotional distress, depression, anxiety, anger management, fears/phobias, problem eating, panic attacks, self harm, addictions/dependencies, suicidal thoughts, stress, confidence/self-esteem, stress, insomnia. 80% (656) people said they had experienced one or more difficulties.

No BME people, only 5% of trans people, 4% of people who feel isolated, 12% of young people and 13% people on lower incomes said that they had not experienced any of these difficulties. People on lower incomes were twice as likely as others to have experienced some of these difficulties.

There are gaps in services for people with mental health difficulties

54% of people with mental health difficulties felt the need for support. Of these, a third said they were unable to find the support they needed. People who talked about their mental health difficulties in focus groups often said that they did not use mainstream mental health services. Some highlighted the lack of out of hours support.

“My problems tend to get worse in the evenings and at night, especially being on my own, and there is nothing at all around for after hours services. All you get told if you do phone up for out of hours service: ‘Just go to A&E’. Now that’s fine for normal people - when I say normal people I don’t just mean straight people, I mean, I just mean people without mental health problems (Non-nutters basically). If I attend (A&E) daily I just get told to go straight home again.”

Researcher: So if you’re kind of feeling wobbly, shaky, what do you do out of hours?

“I usually end up taking an overdose. If there was somewhere at night out of hours where I could just go and talk to someone if I was feeling in crisis, it would help me out 100%. And stop me feeling suicidal, yeah, because there is nothing at the moment - there is a mental health line, but you can never get through, it is constantly engaged.”

MindOut, which provides a service dedicated to LGBT people with mental health difficulties, was mentioned as a unique and valuable support service.


“Without MindOut we’d be completely isolated.”

Large numbers of people have serious thoughts about suicide

Almost a quarter of all respondents reported serious thoughts of suicide, and 6% having attempted suicide, in the last 5 years. 3% had attempted suicide in the last year alone.

Around half of some groups said they had had serious thoughts of suicide in the past 5 years: younger people (46%), those on lower income (49%), those who feel isolated (47%), disabled people (54%), bisexual people (45%), queer people (44%), and trans people (56%).

“I might act...you know, look alright, but deep down I’m not. I’m actually...very suicidal, but not that suicidal to actually do anything.”

See ‘Understanding Suicidal Distress and Promoting Survival in Lesbian, Gay, Bisexual and Transgender (LGBT) Communities’ Katherine Johnson, Paul Faulkner, Helen Jones and Emma Welsh. January 2007  www.lgbtmind.com

Most people drink alcohol, but fewer people smoke. Just under half said that they had taken illegal drugs or used legal drugs without a prescription or medical advice

85% of people said that they drank alcohol. Some identity groups were less likely to drink alcohol: people on low incomes, BME people, disabled people, people with mental health difficulties, older people, people who feel isolated. Fewer people over 45 drank alcohol or used drugs.

One third of participants smoked; groups that were more likely to smoke included men, people aged between 26-45, and people who had issues with mental health.

Just under half of the people in the survey said that they had taken illegal drugs or used legal drugs without a prescription or medical advice. Most people who had used any kind of drug did so less than once a month on average in the last year. Cannabis was the most commonly used drug (66% of people have used this in the past year), followed by ecstasy, cocaine and poppers (around 45% in the past year).

In focus groups, people said that they believe LGBT people use drugs and alcohol as a coping mechanism for social and emotional difficulties

“I think a lot of people go out and get hammered at weekends and stuff because it’s the only way that gay men can meet each other, and drink does loosen you up, doesn’t it, and makes you feel a bit more relaxed so you can, you know, take that step to go and be rebuffed or not rebuffed or whatever.”

“I just got really drunk and like stoned in order to, kind of, like feel comfortable with myself, and I think maybe that’s something that a lot of people do. I put myself in this state where I don’t have to deal with it.”

“I think stress certainly as a deaf person can build up over years and years and years of sort of knocks and feeling of oppression. It’s like being in a rock and hard place really, as a deaf LGBT person, and I think alcohol is the place that people go to help resolve some of those problems. I think it’s deaf-gay identity where there’s oppression or a sense of discrimination from the hearing world and also from the straight community.”

health and wellbeing

People told us they feel there is a need for LGBT-specific information around drug use

Most people who used drugs (57%) agreed there should be LGBT campaigns and information in Brighton & Hove about drug use. Most people found out about drugs from friends (40%) or leaflets from drug organisations (30%), with 18% saying that they haven't been able to find any information.

79 people (10%) have taken payment for sex, with some identity groups are more likely to do so

Those who were living with HIV were almost three times (34%) more likely to have taken payment for sex than those who had not been tested or had tested negative. Disabled people were twice as likely (17%) to have taken payment for sex, compared with 8.6% of those who had no disability. People with mental health difficulties (12%) were twice as likely to have taken payment for sex as those who did not have mental health difficulties.

Lesbians/gay women (4%) were the least likely to have taken payment for sex. Queer people (18%), gay men (13%) and people who coded 'other' (13%) were more likely to have taken payment.

Most people are out to their GP, but there are worries about how services respond to sexual and gender identities

60% of people were out to their GP's. Lesbians/gay women, queer people, trans people, older people, people living with HIV, disabled people and those with mental health difficulties were more likely to have told their GP about their sexual or gender identities. In focus groups, people spoke about how to find a 'safe' or 'friendly' GP, and also about bad experiences and fear of going to see an unfriendly GP.

"When I go to GP surgery I had absolutely no choice at all of whether I can investigate, is this GP friendly to me or are they not friendly? It's rather like playing Russian Roulette. Twice, I got shot in the head."

People would like to see improvements in health care that are specifically for LGBT people

The lack of specific services in Brighton & Hove that cater for lesbians and gay women, trans people and bisexual people, and knowledge of LGBT health issues was discussed in focus groups.

"The only health issues that I really know about for lesbians are like breast cancer. I know little about that, but I do know that it's an issue for women who don't have children. I'm very ignorant, woefully ignorant, maybe that's an issue. If there was a poster on the wall (in my GPs surgery) saying 'look for a leaflet in our racks about your lesbian health', I would go and look for it."

"I know the Claude Nichol - I've heard nothing but good about them. On top of that there's the Wilde Clinic for gay men. There isn't so much here but in London there was things specifically aimed at lesbians. But there's nothing aimed at bisexual people and that's a whole different thing on its own. I'm polyamorous anyway, so I'm sleeping with people from both genders. There isn't any information that's specifically aimed at bisexual people and about the issues around that. If you look at the stuff that's aimed at straight women it doesn't really mention herpes, the chances of like contact between say women and oral sex with herpes and that sort of thing. So it's like it gets ignored. You either go to a straight one or you go to gay one, there isn't anything in between."

"I've got a whole part of mind stream which is not heterosexual, part of it that's bisexual, but there's a bit of it that's trans. So unless the health providers understand that and they understand the issues around that, it's very hard for them to diagnose what the hell's wrong with me. I think respect talks about do they take into account in their diagnosis, you know, the fact that I'm trans-gendered and that fits other parts of my health system. They don't take that into account, and even when I tell them it's important, they still don't take it into account."

Opinion is divided about specialist GP's for LGBT people. Most people support a LGBT Healthy Living Centre and those who earn under £10,000, who are isolated or have mental health difficulties are even more supportive. People are concerned that this should not replace friendly mainstream (not LGBT specific) services

45% of people were in favour of having a specialist GP service; 22% were unsure and 33% said no. By contrast 91% of those who answered the question supported the idea of a healthy living centre (85% of all respondents). Those earning under £10,000 (97%), who are isolated (96%), or who have mental health difficulties (93%) were more likely to want a healthy living centre.

“Brighton should have a gay centre. They should have a centre to go to that specifically deals with your well being, health. I mean it's the biggest gay community in Europe and we don't have what you might call our own place.”

Suggestions for the Healthy Living Centre included an imaginative range of LGBT health and community services, and links with alternative social spaces and an information centre, as identified in other parts of this report.

“Those services could be offered, anything from mental health to physical health to social activities, they're all in one place so that there's an interest in me being a gay man, rather than me having to go somewhere and tell them who I am and then [they] try and engage with me.”

In focus groups, people emphasised that every mainstream service should offer sensitive and appropriate support to LGBT people. People felt strongly that any healthy living centre or specialist service should be in addition to, rather than instead of, making sure mainstream services provide for our diverse community. One suggestion was to make a healthy living centre a Centre of Excellence that should offer specialist input where needed, and training opportunities for mainstream services; it should outreach to local services and act as a resource locally and perhaps regionally, nationally or even internationally.

“You need specialist centres that can do the research and carry things forward and advise the frontline people, but the frontline service should be able to cater for everyone.”

“I think the idea of having something like this would be highly beneficial, but it shouldn't be something that we would have to rely upon. I think we should be able to go to, no matter where we are, our local GP and be able to receive the services that we need without having to be told ‘Oh, well, if you go down to the community centre you'll be able to get yourself sorted out there’. Although it would be good to have it as a specialist kind of centre for health purposes and also for those people who kind of don't feel they can pluck up the courage to talk about these sorts of problems to their GP, but are able to go somewhere and talk about the problems that they face.”

See 'Report into the Medical and Related Needs of Transgender People in Brighton and Hove' Persia West
📄 www.spectrum-lgbt.org/trans

People's 'top 3' health needs are similar to the needs that came up in the survey

Mental health was seen as a top LGBT health priority by 47% of people. Sexual health was named by 41%, and issues around drug use (38%) and alcohol use (36%) were the next most frequent. Smoking and LGBT friendliness of health services were named by 25% of people, followed by access to counselling/group work, and emotional support (23% each). Physical health and access to GP's were named by smaller numbers.

support, services, monitoring

In this section, the report first looks LGBT people's need - both met and unmet - for informal support networks. It then looks at how people feel about using services, and the importance people place on their sexual and gender identities when they use services, moving on to how people feel about services gathering information about those identities through monitoring.

Many LGBT people give and receive support from friends, partners and/or families- but some people don't have support networks

Friends were the ones most often relied on in a crisis (73%), with partners (47%) and family of origin (41%) also commonly providing support. Worryingly, 92 out of 819 people - more than 10% - said that no one supported them on a regular basis.

Researcher: Who supports you on a regular basis?

"Myself. How sad is that?"

"And your friends surely, no?"

"What friends?"

"You must have friends."

"I'm not looking for friends. I don't trust people, that's my problem."

Only 8% of carers or people who are supporting others said they get support from professional services; 6% named support groups and 4% named voluntary services. 10% said they found support via internet groups and chatrooms.

Some groups within the LGBT communities are more uncomfortable about using mainstream (not LGBT-specific) services than others

Only 17% of people overall felt uncomfortable using mainstream services because of their sexual identity; but this figure increased amongst certain groups: 20% of people with mental health difficulties, 22% of lesbians and gay women, and 26% of bisexual people, rising to 36% of queer people and trans people.

Disabled people, those on lower incomes and those who are isolated were more likely to feel uncomfortable using mainstream services for reasons other than sexual or gender identities.

Most LGBT people feel that their sexual and gender identities are important when they use services, and they want services that realise that. However, there are concerns about LGBT specific services responding appropriately to some identity groups

"I'd like to imagine a clinic that the community can use that the staff, whether they are gay, straight or whatever, are aware of what the issues are in the communities specific to our needs."



One third of people felt that their sexual and gender identities were unimportant when they used services. 45% of people were out when they used services in Brighton & Hove, with a further 41% sometimes out or unsure whether they were out.

Two thirds of people would prefer to use services that are either LGBT-friendly (where LGBT identity is acknowledged and LGBT issues are considered) and/or LGBT specific (specifically for LGBT people).

BME people were less likely to see sexual and gender identities as important when they used services, and only 5% would prefer to use LGBT-specific services. Focus group participants spoke of providers of LGBT-specific services lacking understanding of specific aspects of identity, which could be present in other non-LGBT specific services.

“I did once try and go to occupational health through statutory services, but it was just such a negative experience, that since then I’ve just gone through lesbian and gay services and then had to talk about the BME issue. [In one LGBT service] I wrote on the form that I wanted someone who was sensitive to BME issues. The woman who I worked with said that somebody volunteered in the group, and she said ‘Do you have any experience of BME issues?’ and he said, ‘No, but I don’t think that matters’. I think that says a lot about what the problem is.”

LGBT people will give monitoring information so that services can plan better, and say people are more willing to give information about LGBT identity when services are considered LGBT friendly. When monitoring it is important to be aware of confidentiality issues

60% of people said they were willing to give information about their sexual and gender identities on an anonymous and confidential basis. This rose to 85% where services were considered LGBT friendly. Trans people and people with mental health difficulties were likely to give this information only sometimes. Focus groups offered words of warning regarding publicising these results.

“I recently filled in - I work for the NHS - their survey, and it came back, you know, ‘One bisexual’. Me. I think they feel more uncomfortable now I’ve sort of outed myself. Because I don’t think there’s no bisexuals, you know. I’m the first to perhaps say ‘That’s what I am’ and I’ve done that to sort of try and make it the norm, so that they’ll get used to that there’s an alternative way of living.”

There is a plea for service providers (and others) to act on the findings of consultations

In focus groups, strong feelings were expressed about making sure that services and politicians kept their promises and acted on the information they collected.

“There is a lot of great words about LGBT in Brighton. They say a lot of things and they do include us in pamphlets but I think actions speak louder than words.”

“I’d like to see [Count Me In Too] actually turn into some fruition as opposed to end up as a bunch of statistics in some Council in-tray.”

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all of you: for your commitment to a vision of a more inclusive city, through evidence-led development work, partnership work and community engagement.



your feedback

We welcome any comments and suggestions. Please email your feedback to us at: **comments@countmeintoo.co.uk** or contact the researchers (see inside cover).

Please also contact us if you are interested in supporting further analysis of the Count Me In Too data or being part of a Community Reference Group to oversee this continuing work.

Copies of this and other resources are available from **www.countmeintoo.co.uk** including a directory of local LGBT support organisations and groups.



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