[PROTECT]





Conference: Improving the Health and wellbeing of LGBTQ+ Communities in Wolverhampton

7 November 2019

Time

9.00 am

Public Meeting? YES

Type of meeting

Partnership Boards



Agenda

Item No. Title

1 **Presentation Slides** (Pages 1 - 98)

This page is intentionally left blank

Improving the Health and Wellbeing of LGBT+ Communities in Wolverhampton

Thursday 7 November 2019

CITY OF WOLVERHAMPTON OCOUNCIL

Our mission: Working as one to serve our city

wolverhampton.gov.uk

Agenda

matatalala alatatatat

the anneanna an anneanna

Morning Session

09:00am	Registration and Refreshments	10:50am	Break
09:30am	Welcome by Councillor Anwen Muston and John Denley	11:00am	Mental Health and Wellbeing: Tommy Sylvester
09:20am	Key Note Address by Dr Michael Brady	11:10am	Round Table Discussion on Mental Health and Wellbeing
10:00am	Sexual Reproductive Health	11:40am	Feedback on Mental Health and Wellbeing
10:10	Round Table Discussion on Sexual & Reproductive Health	11:50am	The Impact of Hate Crime
10:40am	Feedback on Sexual Reproductive Heath	12:30pm	My Story by Festus Osuji
	12:40 -	- Lunch	

Improving the Health and Wellbeing of LGBT+ Communities in Wolverhampton

wolverhampton.gov.uk

Thursday 7 November 2019

Afternoon Session

1:10pm	Access to Utilisation of Healthcare by Nate Watson	2:50pm	Break
1:20pm	Round Table Discussion on Access to Utilisation of Healthcare	3:00pm	Dementia Care and Later Life by Caron Rogers
1:50 pm	Feedback on Access to Utilisation of Healthcare	3:10pm	Round Table Discussion on Dementia Care and Later Life
2:00pm	Young People's Needs by Dr Ruth Watson and Emma Save	3:40pm	Feedback on Dementia Care and Later Life
2:10pm	Round Table Discussion on Young People's Needs	3:55pm	Next Steps by Councillor Anwen Muston
2:40pm	Feedback on Young People's Needs	4:00pm	Nate Watson will close conference with a performance

Improving the Health and Wellbeing of LGBT+ Communities in Wolverhampton Thursday 7 November 2019

wolverhampton.gov.uk

Welcome

Councillor Anwen Muston & John Denley (Director of Public Health)



Key Note Address

Dr Michael Brady Health of LGBT+ Communities





Health of LGBT+ communities

റ ഉല്പാന് ന Michael Brady

National Advisor for LGBT Health, NHS England and NHS Improvement

NHS England and NHS Improvement



Significant progress has been made towards LGBT equality. However research and survey evidence demonstrates that:



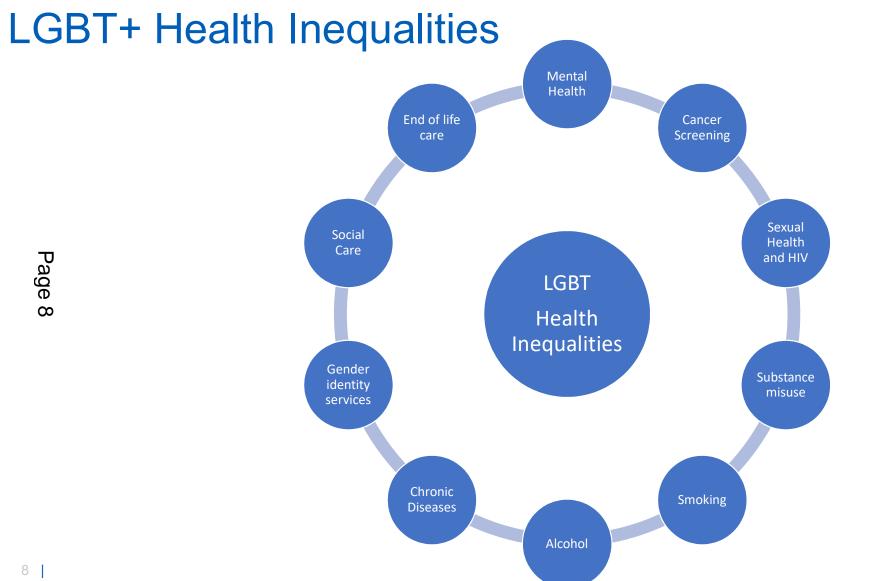
LGBT people face considerable barriers to leading happy, healthy, and fulfilling lives

LGBT people face discrimination, bullying, and harassment in education, at work in the media and on the streets

LGBT people face greater inequalities in health satisfaction, access, experience and outcomes

7

Page 7



NHS

8

National LGBT survey and Action Plan





Health Education Safety Workplace Rights and the Law Data and Monitoring Representation International

1. https://www.gov.uk/government/publications/national-lgbt-survey-summary-report

2. https://www.gov.uk/government/publications/lgbt-action-plan-2018-improving-the-lives-of-lesbian-gay-bisexual-and-transgender-people

LGBT Action Plan: Health commitments



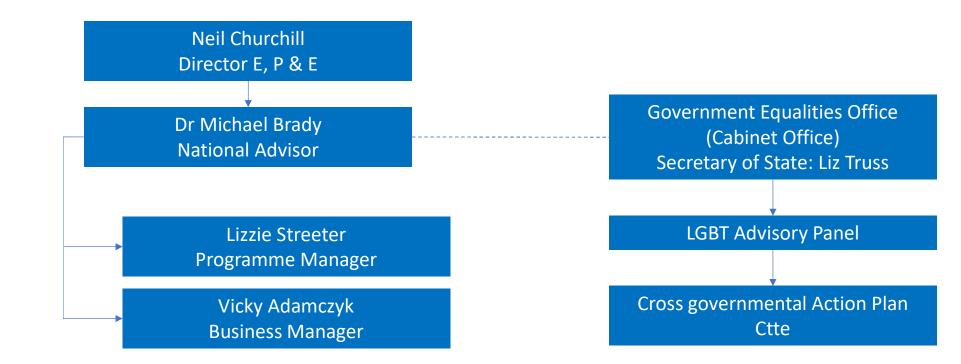
- 1. Appoint a National Advisor to lead LGBT improvements in healthcare
- 2. Improve the way gender identity services work
- 3. Improve understanding of the impacts on children and adolescents of changing their gender
- 4. Improve mental health care for LGBT people
- 5 Enhance fertility services for LGBT people
- 6. Ensure LGBT people's needs are taken into account in health and social care regulation
- 7. Support improved monitoring or sexual orientation and gender identity in healthcare services
- 8. Continue to review the blood donation referral period for MSM
- 9. Committed to tackling HIV/AIDS transmission
- 10. Improve support for LGBT people with disabilities



- 1. https://www.gov.uk/government/publications/national-lgbt-survey-summary-report
- 2. https://www.gov.uk/government/publications/lgbt-action-plan-2018-improving-the-lives-of-lesbian-gay-bisexual-and-transgender-people

National Adviser for LGBT health: Directorate of Experience, Participation and Equalities





LGBT+ inclusive care

Sexual orientation and gender identity monitoring

- "If you don't count us, we don't count"
- Sexual orientation and gender identity monitoring are essential to fully understand inequalities and experience
- Standards for sexual orientation monitoring exist and have been included in NHS patient experience surveys – but have not been fully rolled out across the NHS and social care
- We are committed to rolling out sexual orientation monitoring
- We have begun work on gender identity / trans status monitoring

foundation	NH Engla	
Implementation		
Guidance		
Fundamental Standard		
for Sexual Orie	ntation	

12 1. www.england.nhs.uk/about/equality/equality-hub/sexual-orientation-monitoring-information-standard/



LGBT+ inclusive care

Advice and influencing

- Working to ensure the needs of LGBT people are considered and inequalities are addressed within the implementation of the Long Term Plan.
 - Specific work:
 - Primary care
 - · Mental health
 - Specialised Commissioning
 - Cancer
 - Children and young people
 - Maternity
 - Older people and ageing
 - Personalised care
- Provide visibility and a voice for LGBT people, representing and advocating for the LGBT health sector and communities within NHS England.



NHS

The NHS Long Term Plan





www.nationallgbtpartnership.org

Page 13

LGBT+ inclusive care



Education and Training

- Supporting workforce development and improving training is key
- Training needs to be for all staff :
 - Understand experience and inequalities
- Page Challenge hetero-normative and cis-normative culture
- 4 • Gender affirming and supportive of preferred pronouns
- We will:
 - Influence education and training at all levels
 - Share examples of best practice of LGBT inclusive training initiatives and produce a toolkit / how to guide.
 - Bring together the evidence base for LGBT health inequalities and care and identify • gaps.
 - Use the evidence to inform policy, commissioning and training

Inclusive workplaces and workforce equality

The Interim People Plan¹ commits to:

- Create a healthy, inclusive and compassionate culture by:
 - Valuing and respecting all
 - Promoting equality and inclusion and widening participation
 - Tackling bullying and harassment, violence and abuse
- Organisations that are inclusive and support their LGBT staff are more inclusive and supportive of their LGBT patients
- LGBT staff networks have often been the instigators of changes that improve their care of LGBT patients

1. www.improvement.nhs.uk/resources/interim-nhs-people-plan/

<u>၂</u>Ω







Summary (1)



- There are clear inequalities in access, experience and physical and mental health outcomes for IGBT+ individuals
- The lack of routine monitoring for sexual orientation and gender identity / trans status means we don't fully understand the scale of the problem

- Do you know how many of your service users are LGBT+?
 Do you know how their experience / outcomes differs from
- Do you know how their experience / outcomes differs from others?
- Do you have specific approaches / initiatives to address inequalities for LGBT+ communities?
- Awareness raising, education and training of all health and social care professionals is essential to improve experience
 - Are you confident your workforce understand and can address LGBT+ inequalities?
 - Is your training fit for purpose to develop and support your staff?

Summary (2)



- A consistent, strategic and committed approach across the system is needed to make real change
 - Partnership working across health, social care and voluntary and community sector
 - Engaging and involving LGBT+ individuals and communities at all stages
- Page 17
- As we address LGBT+ health inequalities we need to better understand the impact of intersectionality between disadvantaged groups
 - Age
 - Ethnicity
 - Disability
 - Poverty



Contact us

Twitter:@drmbradyE-mail:england.lgbtadvisor@nhs.net

NHS England and NHS Improvement

Sexual and Reproductive Health

Dr Radhika McCathie



Sexual and Reproductive Health

Round Table Discussion



Sexual and Reproductive Health

Feedback



BREAK



Mental Health and Wellbeing

Tommy Sylvester



Mental Health and Wellbeing

Round Table Discussion



Mental Health and Wellbeing

Feedback



Impact of Hate Crime

Councillor Anwen Muston



LGBT+ Health Event - This is not an option, this is Life -



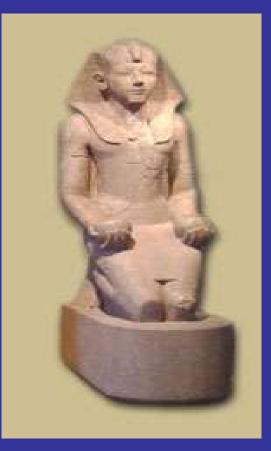
Presentation on

Impact of Violence, Harassment & Prejudice on our Health & Wellbeing by: Anwen Muston

Egyptian - The Woman Who Was King Hatshepsut (1479 - 1457 BC)

Hatshepsut, as a female, had many obstacles to overcome. There was always a threat of revolt, especially as her bitter nephew came of age. Using propaganda and keen political skills, she deftly jumped each hurdle she faced. To quell the fears of her people, she became a "king" in all statuary and relief during her reign. She even dressed in the traditional garb of *male* rulers: the shendyt kilt, the nemes headdress with its uraeus and khat headcloth, and the false beard.

http://www.eyelid.co.uk/Hatshepsut.htm



Cybele 203 BC

Her cult had already been adopted in 5th century BC Greece

Galli (singular Gallus) was the Roman name for castrated followers of the Phrygian goddess Cybele, which were regarded as a third gender comparable to transgendered people in the modern world.

The first Galli arrived in Rome when the Senate officially adopted Cybele as a state goddess in 203 BC.

Until the first century AD, Roman citizens were prohibited from becoming Galli. Under Claudius, however, this ban was lifted.



http://www.hellenicaworld.com/Greece/Mythology/en/Cybele.html

Cybele and Attis

The goddess appears alone, 8th–6th centuries BC. Later she is joined by her son Attis, who incurred her jealousy. He, in an frenzy, castrated himself, and subsequently died. Grieving, Cybele resurrected him. The evergreen pine and ivy were sacred to Attis.

Some ecstatic followers of Cybele, known in Rome as galli, willingly castrated themselves in imitation of Attis. For Roman devotes of Cybele Mater Magna who were not prepared to go so far, the testicles of a bull, one of the Great Mother's sacred animals, were an acceptable substitute, as many inscriptions show. An inscription of AD 160 records that a certain Carpus had transported bull's testes from Rome to Cybele's shrine at Lyon, France

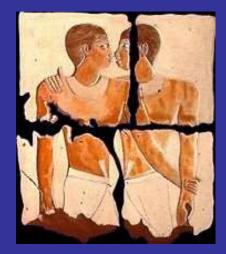
12,000 BC

Near the end of the Upper Palaeolithic Era, human beings have left artefacts and artwork suggesting an appreciation of homo eroticism Examples include a few cave paintings and hundreds of phallic "batons" among which is a graphically carved double dildo from Gorge d'Enfer (in present-day France) that seems to have been crafted for two women to use together



Egyptian Pharaoh Khnumhotep and Niankhkhnum 2400 B.C

 Khnumhotep and Niankhkhnum were ancient Egyptian royal servants. They shared the title of Overseer of the Manicurists in the Palace of King Niuserre during the Fifth Dynasty of Egyptian pharaohs, circa 2400 B.C., and are listed as "royal confidants" in their joint tomb. They are speculated to be the first recorded same-sex couple in history.



Transgender Terminology

F to M - Female to Male / M to F – Male to Female

CIS Gender

Gender stereotype – someone who has pre conserved ideas on what men and women should look like and behave like, they think that gender is binary

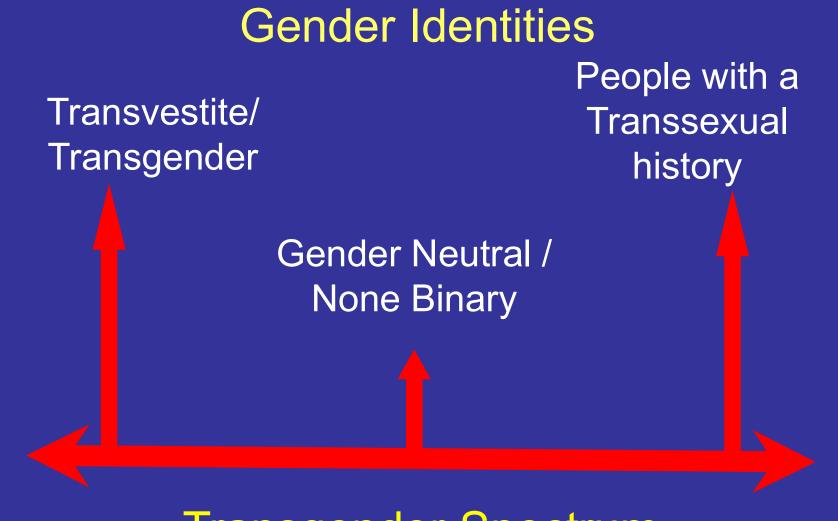
Gender Identity - whether a person feels like a man, woman, combination of these or neither.

Transgender Terminology 2

The word "Transgender", which is sometimes shortened to "Trans".

Trans is also an umbrella term used to describe all aspects of the transgendered community.

None Binary –It describes behaviour, expression or identity that does not conform to dominant gender norms of male and female



Transgender Spectrum

A Simple View

Transvestite/ Transgender



Day Tripper

Gender Neutral / None Binary



Duel Nationality People with a Transsexual history

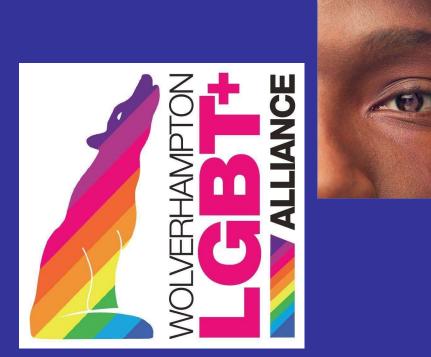


Emigrated

36

Stamp Out & Report Hate Crime Racist – Faith – Homophobic – Transphobic - Disability





People Can be LGBT+ Regardless of:

- 1. Age
- 2. Race
- 3. Religion and Belief
- 4. Disability
- 5. Gender (male or female)
- 6. Sexual orientation

Or whatever social background you come from

WHAT IS HATE CRIME?

Any incident where you or anyone else has been targeted because they or you are believed to be different:

- race
- religion
- sexuality
- gender identity
- or have a disability

Bullying is... any action against any person or group, who may be seen as different

- Homophobia is: any abuse because you are or people think you are lesbian, gay or bisexual
- Biphobia is someone who could love either sex.
- Transphobia is... any abuse because you are or people think you are transgender

Mistaken Identities

Sexual Orientation and Gender Identity are Different

Targeted Hate Crime

- At work
- Schools and in Educational Establishments
- In every day life, shopping, socialising, cinema, using a health centre or using public facilities.
- In the Media
- On line social Media

Services Providers

- Health
- Education
- Public or Private Services & Facilities

Proportionate Means of Achieving a Legitimate Aim

Domestic Abuse

- Being LGBT+ means that you have the same right to be protected from domestic abuse as anyone else.
- Anyone suffering physical, sexual, emotional or financial abuse, or are being threatened or intimidated by a current or former partner who have experienced domestic abuse.
- Child abuse within the home for being LGBT+
- It can happen anywhere a pub or club, in the street or at work - it doesn't just have to happen in the home environment.

Initial Response by the Police

- Use of correct names and identities
- Understand what has gone on and why
- Properly recorded as Transphobic or Homophobic
- Taken seriously and understood
- Properly Investigated with respect
- On going support offered
- Special measures explained
- Refusal to prosecute find out why
- Hormone Therapy Trans Women & Men

The Court

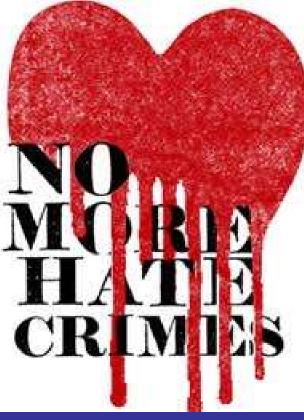
- Special measures are in place if required
- The Court is briefed on the issues and legalities surrounding the case
- Offer private space for interviews
- Police and court security are briefed regarding the perpetrators family and friends that maybe in the court
- Use of correct names and identities

Working with Others

 It is important to take a multi team approach to get the best results in prosecuting hate crimes and supporting the survivors

Impact of Hate Crime





Issues Faced by the LGB T+ Community

- Dealing with none acceptance
- Confidence
- Self esteem
- Social exclusion
- Isolation
- Stress
- Anxiety
- Fear & perceptions of others
- Dealing with hate crime

Surviving can be Hard

Self Harm



This happens

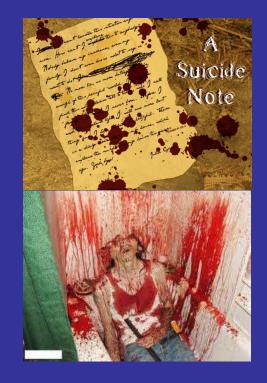
Family Rejection



 Some parents family and friends hold negative attitudes toward LGBT+ and therefore don't support them.

Suicide

We have a high suicide rate among the TG community. Some say that as many as 33% of transsexual people commit suicide before completing their transition and up to 50% of TG people will have attempted suicide before the age of 20. These are pretty sobering statistics.



Various reasons can lead to suicide

Alcohol











Prostitution



Implications

Personal Safety Sexually Transmitted Diseases

Hate Crime Review 2014



Hate Crime Review

The criminal offences that specifically deal with hate crime only cover some of the protected characteristics from within Equality Act 2010.

These are covered by two bits of legislation

The Police and Crown Prosecution Service (CPS) record all hate crime related incidents involving race, religion, sexual orientation, gender identity or disability

Hate Crime Review

The Criminal offences that specifically deal with hate crime are covered in these two bits of legislation

- Crime and Disorder Act 1998
- Public Order Act 1986

Crime & Disorder Act 1998

If someone commits one of a list of offences and, in doing so, demonstrates, or was motivated by, hostility on the grounds of:

- Race or
- Religion & Belief

These are known as aggravated offences

Public Order Act 1986

This tackles the problem of stirring up hatred on the grounds of:

- Race
- Religion
- Sexual Orientation

There are different tests that need to be applied before any prosecution can be considered.

Criminal Justice (CJA) Act 2003

As well as the these offences the law deals with hate crimes through special sentencing powers

Section 145 Race & Religion & Belief Section 146 – Disability, Sexual Orientation, Gender Identity

They all have to demonstrate the same evidence under the prosecutes code test

Starting point of 30 years for transphobic murder

The Difference

Basic Offence	Maximum Penalty for Basic Offence	Maximum Penalty for Aggravated Offence
Malicious wounding	5 years	7 years
Actual bodily harm	5 years	7 years
Common assault	6 months	2 years
Criminal damage	10 years	14 years
Fear or provocation of violence	6 months	2 years
Harassment, alarm or distress	Fine up to £1,000	Fine up to £2,500
Causing intentional harassment, alarm or distress	6 months	2 years
Offence of harassment	6 months	2 years
Putting people in fear of violence	5 years	7 years

The Way Forward

- Through understanding
- Removing stigma

 \bullet

- Through Education in Schools
- Training for people who provide services along with the wider community.
- Good clear policies and procedures

Transgender - This is not an option, this is Life -







Thank You Any Questions presentation by: Anwen Muston anwen49@gmail.com 07507 673045

My Story

Fetus Osuji

Improving the Health and Wellbeing of LGBT+ Communities in Wolverhampton Thursday 7 November 2019



LUNCH

Thursday 7 November 2019

Our mission: Working as one to serve our city

wolverhampton.gov.uk

matatald aldiatatat

az analization van telenangeaat

Afternoon Session

1:10pm	Access to and Utilisation of Healthcare by Nate Ethan	2:50pm	Break
1:20pm	Round Table Discussion on Access to Utilisation of Healthcare	3:00pm	Dementia Care and Later Life by Caron Rogers
1:50 pm	Feedback on Access to Utilisation of Healthcare	3:10pm	Round Table Discussion on Dementia Care and Later Life
8 2:00pm	Young People's Needs by Dr Ruth Watson and Emma Save	3:40pm	Feedback on Dementia Care and Later Life
2:10pm	Round Table Discussion on Young People's Needs	3:55pm	Next Steps by Councillor Anwen Muston
2:40pm	Feedback on Young People's Needs	4:00pm	Nate Ethan will close conference with a performance

Improving the Health and Wellbeing of LGBT+ Communities in Wolverhampton Thursday 7 November 2019

wolverhampton.gov.uk

Access To And Utilisation of Healthcare

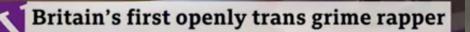
Nate Ethan

Improving the Health and Wellbeing of LGBT+ Communities in Wolverhampton Thursday 7 November 2019









Page 73







Access To And Utilisation of Healthcare

Round Table Discussion

Improving the Health and Wellbeing of LGBT+ Communities in Wolverhampton Thursday 7 November 2019



Page 75

Access To And Utilisation of Healthcare

Feedback



Young People's Needs

Dr Ruth Wilson and Emma Savage

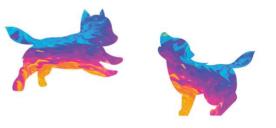




Emma Savage and Ruth Wilson x2y LGBT youth group LGBT+ Health Conference 2019



Background



- Started in 2000 by a youth worker
- ♦ Base 25 \rightarrow Terrence Higgins Trust
- Became an independent organisation in 2014
- Became a charity in 2015





Marcus in 2008

Services provided by x2y

Two groups for LGBTQ
 young people (11 to 17
 youth group and 18+ young
 adults group)



- Outreach worker (3 hours per week, term time only) to provide support, advice and training for schools and other organisations working with young people
- 1-to-1 support for young people who are not ready to access the group
- Counselling for those who need it

What do we do?

- Provide a relaxed safe space
- Opportunity to meet other LGBTQ young people
- Discussions on relevant topics, e.g. hate crime,
 - sexual health, internet safety / online abuse.
- Take part in local events (e.g. W'ton and B'ham Pride)
- Outside speakers
- Trips and activities
- Mentoring
- Counselling



Young people we support

- 11–17 group: between 30 and 40 young people in the last year (12 per week on average)
- 18+ group: about 16 young adults dip in and out
- Many of our young people have additional needs e.g. autism, mental health issues
- In the past mostly LGB young people; now approx.
 50% identify as trans or non-binary



National data



- 45% trans young people have attempted to take their own life and 22% LGB young people (Stonewall 2017)
- 24% homeless young people are LGBT and 69% of these young people have experienced rejection, abuse and/or violence from their families (Albert Kennedy Trust)
- 84% trans young people and 61% LGB young people have self-harmed (Stonewall 2017)
- LGBTQ young people from BAME backgrounds are slightly more likely to have suicidal thoughts (79%) than their White British LGBTQ peers (73%) (Stonewall 2017)

Local data



- More than 80% LGBTQ+ young people in Wolverhampton experience depression and anxiety
- 59% LGBTQ+ young people in Wolverhampton have considered taking their own life
- 79% LGBTQ+ young people in Wolverhampton identified lack of awareness about LGBT+ issues in schools as having a major impact on their mental health
- More than 80% of LGBTQ+ young people in Wolverhampton consider themselves to have low selfesteem and to lack confidence

Walker-Reed and Wilson, 2018, *Needs analysis of LGBTQ+ young people in Wolverhampton, commissioned by Wolverhampton HeadStart*



Quotes from our young people



One of my friends has been turned away by a GP because they were transgender I don't think they should ask that question 'Are you sexually active?' if you're with your mom and stuff

The doctor decided to just continue saying about how I can't know my sexuality if I'm not actually active. And say that it was just like a phase...



I was quite worried that it wouldn't stay confidential because of my age

More quotes

Why would I objectively go out of my way to feel depressed and feel like I want to die because I'm not the correct gender? I didn't choose to be like that, it's me. It's like people saying you choose the colour of your eyes.

None of us is even remotely interested in any kind of sexual activities... We deal with gender dysphoria every day.



He referred to non-binary as 'non-numerical'. He obviously didn't know much about it!

What LGBTQ young people want



- For health professionals to be mindful of confidentiality
- To have equal access to health services
- Health professionals to be knowledgeable about gender identity, especially non-binary and genderfluid identities
- Clarity about when their sexuality/gender identity is relevant
- Monitoring questions to include 'Pansexual' and 'Other please specify'
- Specific sexual health services for young people and/or LGBTQ+ people
- Visible signs of LGBT-friendly services (e.g. rainbow lanyards worn by staff at Gem Centre)



Local resources:

- x2y LGBT youth group
- Wolverhampton LGBT+ Alliance
- Inspiring Healthy Choices
- Wolverhampton Pride



National resources:

- Stonewall
- Diversity Role Models
- Mermaids
- ✤ GIRES
- No Outsiders
- School's Out
- Educate and Celebrate

x2y makes me feel I'm not alone, I'm not the only one who's going through this, and there are many more people like me.



Young People's Needs

Round Table Discussion



Young People's Needs

Feedback



BREAK



Dementia and Care In Later Life Caron Rogers

Improving the Health and Wellbeing of LGBT+ Communities in Wolverhampton Thursday 7 November 2019

wolverhampton.gov.uk

Dementia and Care In Later Life **Round Table Discussion**



Dementia and Care In Later Life Feedback



Next Steps

Councillor Anwen Muston





Improving the Health and Wellbeing of LGBT+ Communities in Wolverhampton

Thursday 7 November 2019

CITY OF WOLVERHAMPTON COUNCIL

Our mission: Working as one to serve our city

wolverhampton.gov.uk

matatatata atatatatat

tar annannen an annankant

This page is intentionally left blank