Introduction

This section of the Joint Strategic Needs assessment aims to map the needs of LGBT people in West Berkshire as part of a formal process for the first time. It is acknowledged that the quality of evidence used is variable. However this is an important first step in recognising the needs of this group which include the need for further data collection, analysis and use.

Terminology:
- LGBT stands for: lesbian, gay, bisexual, and transgender.
- Lesbian: a woman who is attracted to other women.
- Bisexual: someone who is attracted to people of the same gender and/or opposite gender.
- Gay: a man or woman who is attracted to people of the same gender.
- Transgender: someone whose assigned sex at birth differs to their psychological gender.
- Gender identity: One's innermost concept of self as male or female or both or neither—how individuals perceive themselves and what they call themselves. One's gender identity can be the same or different than the sex assigned at birth.
- Sexual orientation: a person's sexual identity in relation to the gender to which they are attracted; the fact of being heterosexual, homosexual, or bisexual.
- Heterosexual/straight: someone who is sexually attracted to people of the opposite gender.
- Homosexual: someone who is sexually attracted to people of the same gender.

What do we know?

In considering the needs and experiences of healthcare of LGBT people, it is important not to view LGBT as a singular group but rather as a group of individuals with diverse differences. Within the term LGBT, individuals will identify with many different groups of which just two are based on sexual orientation and gender identity. We also need to consider that within the LGBT population there will be further minorities, including LGBT people who have a minority sexual orientation and transgender people who have a minority gender identity (their assigned sex at birth conflicts with their psychological gender, LGBT people who are disabled or from a Black or Minority Ethnic Background.
There is no robust evidence that will tell us how many LGBT people there are in the population although we can use what evidence we have to make some estimates and these are described below. There is a lack of high quality, large scale research around the needs of LGBT people. However, what is included indicates numerous inequalities in the health and wellbeing of LGBT people compared to the general population as well as inequalities in health and social care service access and provision.

In 2011, the Lesbian & Gay Foundation conducted the “I Exist” survey for lesbian, gay and bisexual people living in the UK.

The findings suggest that LGBT people are disproportionately affected by:

- hate crime
- discrimination and bullying
- mental health issues
- many cancer risk factors such as smoking
- sexually transmitted infections
- time off work due to stress and substance use

The data also suggests that LGBT people are actively involved in their communities, out to many people about their sexual orientation, and able to take advantage of increased social acceptance and legal protections.

The “I exist” survey respondent characteristics (sample = 2,580)

- 41% had a religion or belief 6% of whom said they were Christian
- 68% were in employment (similar to general population)
- 1/10 identified as carers (similar to general population)
- 42% said they had realized that they might be LGBT between the ages of 13-15
- Only 14% had come out by this age
- By 25 years old ¼ had not come out
- 3% have never come out

Research estimates indicate that 5-7% of people are LGBT. There will be variation between areas, with sexual minorities more likely to migrate to larger cities. An estimated 1% of the population identify with a gender that is not the same as the sex that they were born with. 0.2% may seek gender reassignment intervention with the median age for presentation for reassignment being 42 years of age. There are now an increasing number of people presenting in adolescence (Varney, 2013).

Data from the Integrated Household Survey, (IHS) 2014, showed that 1.7% of the national population identify as lesbian, gay or bisexual, (LGB). Younger people are more likely to identity as LGB with 2.7% of 16 to 24 year olds. This dropped to 0.5% for people aged over 65. Twice as many males (1.6%) as females (0.8%) in this
survey were likely to state their sexual identity as gay or lesbian. Along occupational lines, the survey showed that adults in Managerial and Professional Occupations were more likely to identify themselves as gay, lesbian or bisexual (2.2%) compared with those in either Intermediate Occupations or Routine and Manual Occupations (1.4% for both).

Using the figures for the South East from the IHS to estimate the local LGB population gives the following figures for West Berkshire. These are presented alongside the estimates for LGB people based on the higher 7% estimate reported in other surveys and the 1% estimate for the transgender population.

**Table 1: Estimated number of LGBT people living in West Berkshire**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Population (Mid-2013 estimates)</th>
<th>Estimated LGB population (based on IHS 2013)</th>
<th>Estimated LGB population (based on 7% of total population)</th>
<th>Estimated trans population (based on 1% of total population)</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL</td>
<td>123,836</td>
<td>2,105</td>
<td>8,668</td>
<td>1,238</td>
</tr>
</tbody>
</table>


The experiences reported by LGBT people in relation to workplace health and services are outlined in the table below.

**Table 2: Experiences of LGBT people relating to healthcare and workplace health**

<table>
<thead>
<tr>
<th>Topic</th>
<th>Experience</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthcare service quality (data relates to service using Stonewall’s Healthcare Equality Index Tool so are likely to represent the more positive experiences of care)</td>
<td>38% felt the organisation were lesbian, gay and bisexual friendly</td>
<td>(Stonewall)</td>
</tr>
<tr>
<td></td>
<td>63% felt they were treated with dignity and respect at all time</td>
<td></td>
</tr>
<tr>
<td></td>
<td>53% felt comfortable telling healthcare professionals their sexual orientation all of the time</td>
<td></td>
</tr>
<tr>
<td></td>
<td>68% would recommend services to friends or family if they needed similar care or treatment</td>
<td></td>
</tr>
<tr>
<td></td>
<td>33% of LGB people have not disclosed their orientation to any service user</td>
<td>(Stonewall)</td>
</tr>
<tr>
<td>Topic</td>
<td>Experience</td>
<td>Source</td>
</tr>
<tr>
<td>------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>Workplace health and wellbeing</td>
<td>Bisexual men are the least likely to have told any colleagues about their sexual orientation (35% had not disclosed their orientation to any colleague)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Older LGB respondents were less likely to be out with anyone at work than younger respondents</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Those who are out with colleagues are more satisfied with their sense of achievement (86% versus 54%)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Those who are out with colleagues are more satisfied with their job security (76% versus 50%)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Those who are out with colleagues are more satisfied with the support from their manager (86% versus 51%)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Those who are out with colleagues are more satisfied with the training that they receive (76% versus 46%)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>3/10 LGB people missed work in the last 12 months due to stress and 7% missed a month or more. 1/10 had missed work due to their alcohol use and 4% had missed work due to their drug use</td>
<td>(The Lesbian and Gay Foundation)</td>
</tr>
</tbody>
</table>

**What is the data telling us?**

The figure from the Integrated Housing Survey is lower than the 5-7% estimated from other surveys. This may be due to differences between surveys with some measuring other aspects of sexual orientation such as behaviour and attraction or covering different age groups.

**What are the key inequalities?** There is evidence that particular subgroups of the population are more likely to have poor wellbeing and mental health problems, this includes LGBT. Key areas where inequalities are described are; lifestyle behaviours (e.g. smoking and drug use), sexual health, mental health, workplace health, and service access and quality. Lifestyle, sexual health, and mental health inequalities are discussed in more detail later in this assessment.
It has been demonstrated that commissioners and providers of health and social care services fail to recognise LGBT communities which serves as a barrier to service access (Williams et al, 2013).

Recommendations for consideration

Services can address the needs of the LGBT community through:

- Proactively engaging with the LGBT community
- Developing appropriate services for this diverse community
- Monitoring take up of services and outcomes
- Working with representative and voluntary organisations for LGBT communities
- Awareness-raising amongst healthcare professionals and commissioners of the needs of the diverse LGBT communities.

Other services and partner organisations

GUM Sexual Health Services, The Florey Clinic
Trust House - Counselling and Support
Thames Valley Positive Support (TVPS) for HIV testing and support for people living with HIV.
C Card Scheme for young people
Sexual health website

National and local strategies

LGBT Foundation Policy Briefing and Factsheets (LGBT Foundation, 2016): summarises key policy documents such as the Care Act and Equality Act and provides links to the original documents.

Sexual Orientation: A guide for the NHS (Stonewall, 2012): A practical guide for NHS organisation on meeting the needs of LGBT people – as both employees and patients. It includes an action plan for improving services for LGBT patients and case studies of good practice, and suggestions for meeting the needs of LGBT patients. The Adult Social Care Outcomes Framework Companion Document (The National LGB&T Partnership, 2015) brings together existing evidence on the needs of LGBT people in a similar way to the Public Health Outcomes document but this time with a focus on care and support needs.

Other chapters you might be interested in

Population
Deprivation
Child and Adult Mental Health

If you have any questions about this chapter, please contact Public Health and Wellbeing Team on publichealthandwellbeing@westberks.gov.uk or 01635 503437