

Cross-Party Group on LGBTI+ issues

Minute of Wednesday 28 June 2017 meeting

Venue: Scottish Parliament, Committee Room 4

1. Welcome and apologies

Present:

Patrick Harvie MSP (Co-Convener, chairing)
Jamie Greene MSP (Co-Convener)
Rona Mackay MSP
Annie Wells MSP

Liam Stevenson TIE Campaign
Jordan Daly TIE Campaign
Lewis Dougan TIE Campaign
Cara Spence LGBT Youth Scotland
Catherine Somerville Stonewall Scotland
Maruska Greenwood LGBT Health and Wellbeing
Liam Beattie HIV Scotland
Alistair Rose SX and Waverley Care
Hannah Pearson Equality Network
James Morton Scottish Trans Alliance
Christina Grant Dumfries and Galloway LGBT Plus
Susan Hart Scottish Borders LGBT Equality
Zoe McGuire Audit Scotland

Paul F Cockburn Individual
Paul Aitken Individual
Sophie Castle Individual

Apologies:

Kezia Dugdale MSP
Ben Macpherson MSP
Pink Saltire
LEAP Sports Scotland
Ben Munnoch

The meeting was chaired by Patrick Harvie MSP.

2. Mental Health: contributions from organisations working in mental health, observed by Maureen Watt MSP, Minister for Mental Health

LGBT Youth Scotland provided the group with a briefing on LGBT young people and mental health. The key points they made were:

LGBT young people experience poor mental health at very high rates compared to the general population – it is estimated that 1 in 4 LGBT young people have a mental health condition. Research by LGBT Youth Scotland with more than 300 LGBT young people aged 13-25, found that 40% of all LGBT respondents and 67% of transgender respondents considered themselves to have a mental health problem.

Discrimination and fear of discrimination in families and communities, along with concerns over safe places to socialise, mean that LGBT young people often miss out on factors that contribute to positive mental health. Hiding one's sexual orientation or gender identity, the societal pressure to conform to gender expectations, and experiencing homophobia, biphobia or transphobia in school can all have a very negative impact on an individual's health, such as raised levels of anxiety and social isolation.

Through a scoping exercise with responses from more than 60 LGBT young people, they found mental health support services, such as CAMHS, are not currently meeting the needs of LGBT young people, with transgender young people experiencing a particularly difficult time.

A recent scoping activity on mental health services conducted by LGBT Youth Scotland, found that the vast majority of LGBT young people expressed disappointment, isolation and frustration in relation to the service they accessed. Overall, when asked about their service experience, 'not ok' received the highest number of responses (41%), followed by 'terrible' (35%). Transgender young people expressed particularly high levels of dissatisfaction, commenting that they were often misgendered and that mental health professionals were often not equipped to support them.

When asked what would have helped to improve their experiences, young people recommended improved confidentiality and training on LGBT identities, particularly trans identities.

LGBT Health and Wellbeing provided the group with a briefing on the mental health of LGBT adults. They said that LGBT Youth's findings also resonated with the adult LGBT population. The key points they made were:

LGBT people experience significantly higher rates of poor mental health, depression, psychological distress, suicidal behaviour and self-harm than the general population. Poor emotional wellbeing and mental health frequently starts in adolescence, around the period of first 'coming out' to oneself and others, and is often linked or exacerbated by school bullying, yet commonly continues into adulthood.

Poor experiences of engagement with mental health and other services can lead to people being reluctant to seek support at an early stage and so the opportunity for prevention or low-level early intervention is lost. Reasons for poor engagement with mental health services are complex, but can include both 'coming out' or not 'coming out'. Many people can be reluctant to disclose their LGBT status, having faced previous discrimination when accessing services, such as the assumption that LGBT identity and mental health issues are linked. LGBT people may be invisible to support services.

Mental health services are often not a safe place for LGBT people, both because of discrimination, prejudice and lesser treatment from staff, but also because of the attitudes of other service users. We know for example that LGBT in-patients on a psychiatric ward can face discrimination from other patients, and see this not being addressed by staff because "the person is unwell".

Yet if LGBT people accessing mental health services do not feel safe when they disclose their LGBT status, or able to talk openly about their experiences, families of choice and support networks, then their support and recovery may be restricted.

SX provided the group with a briefing on the mental health of gay and bisexual men. They shared findings from a recent soon to be published piece of research by... The findings included:

32% of gay and bisexual men in the study had a diagnosed mental health condition, such as anxiety or depression. 53% of men who disclosed having depression were men in same-sex relationships. In some cases, the poor mental health of gay and bisexual men can be linked to their HIV positive status, which can result in stigma and discrimination; a lack of confidence in their relationships and sex life; and engaging in risk-taking behaviour such as chemsex.

SX said we are experiencing a mental health crisis, and that they would like to see discussions across sectors and cross-party groups, including the mental health cross-party group and the sexual health and blood borne viruses cross-party group. They also commented that the lack of LGBTI inclusion in the Scottish Government's Mental Health.

The Scottish Trans Alliance (STA) spoke about mental health in relation to trans identities, including the requirement of psychiatric assessment for access to gender reassignment hormones and surgeries. This can result in trans people not accessing support for mental health issues, for the fear that revealing any mental health difficulties may delay their transition or access to hormones and surgeries.

The STA spoke of the lack of understanding and respect of trans identities in mental health services, including the equation of poor mental health with being trans. Many service providers for example, think having mental health issues is intrinsic to being trans and gender identity is blamed for any mental health problems that may arise. Similarly, some trans people have found that having a diagnosis of Borderline / Emotionally Unstable Personality Disorder (BPD/EUPD) or having experienced sexual abuse results in some mental health service providers claiming that their gender identity is not legitimate. They also spoke of barriers to accessing care, such

as staff misgendering patients. This can be particularly traumatic if a patient is in crisis, especially because trans patients are still sometimes placed on the wrong gender ward. Lack of confidence and knowledge about engaging with trans people often results in mental health services refusing to accept trans patients referred to them. Often mental health services inappropriately try to transfer the general mental health care of trans patients to gender identity clinics which do not exist to provide mental health support (only assessment of readiness for hormones and surgeries).

JG asked if there was any medical research on the prevalence of mental health issues in the LGBT population.

LGBT Health and Wellbeing replied that most of the existing research focuses on environmental links and minority stress, rather than medical factors.

LD from the TIE Campaign shared their own personal experience of accessing mental health services as a LGBT patient, speaking of the lack of LGBT specific support and experiences of victim blaming from both staff and other patients in inpatient services. They said that being in a place of safety is crucial when you are in crisis and is the foundation to recovery. They thanked MW for coming to the meeting, and said they look forward to hearing her thoughts.

MW thanked the group for inviting her to the meeting, and thanked the organisations that spoke for sharing their expertise. She said that as Minister for Mental Health she wants to create a Scotland where people get help at the right time. She commented on the lack of LGBTI inclusion in the Mental Health Strategy, saying that she wanted the strategy to be inclusive of all people and therefore did not include specific groups. She said that she had also met with other equality groups when consulting for the strategy, such as learning disability, deaf and autism groups. MW said that the strategy focused on the whole life journey, that is, starting well, living well, ageing well and dying well. The strategy includes maternal mental health in relation to starting well.

MW spoke about the success of the See Me programme, funded by the Scottish Government and Comic Relief, to end mental health stigma and discrimination. She said that the next step for this programme was to tackle stigma and discrimination in social care settings. She said that social care services are a microcosm of society, and the government has a duty to tackle any prejudice in such settings.

MW spoke of the importance of early intervention and prevention, to lessen the overall strain on mental health services. She commented on the government funding many organisations receive and the vital prevention and support work they are doing. She said that peer support is one of the most successful ways in which people come to terms with their mental health.

MW said that the Scottish Government was listening and welcomed conversations such as these. She said that the Mental Health Strategy was not set in stone, and it can be reviewed and refreshed, particularly through the Mental Health Strategy bi-annual forum of stakeholders which had its first meeting last week to help track progress on the actions in this Strategy, and to help develop new actions in future years.

MW said that she ultimately wanted parity of esteem of physical and mental health by the end of the strategy implementation, with health professionals seeing the patient as a whole person.

NK followed up on the Minister's comments by thanking the group for the opportunity to listen, and expressing gratitude for members sharing their knowledge and experience. He said that the twice yearly forums of the Mental Health Strategy stakeholder group are an opportunity for the government to challenge and test the actions in the Strategy. He also said that they would welcome hard evidence and high calibre research.

After MW and NK left, the group reflected on the discussion and agreed actions to be undertaken.

LGBT Health and Wellbeing commented that whilst See Me is an incredibly valuable programme, the stigma and discrimination they are tackling is related to mental health itself, not LGBTI identity or LGBTI mental health. LGBTI people are facing a 'double discrimination' when accessing mental health services. They also commented on the ask for more research and evidence. LGBT Health and Wellbeing said that there is already plenty of evidence to justify action, and all of our evidence points in the same direction.

LGBT Youth Scotland also commented on research. They said that they use qualified academic researchers to conduct all their research, who utilize big sample sizes.

PH asked whether there was a recent literature review of on LGBTI mental health.

TIE said that Children in Scotland had recently compiled a list of literature related to LGBT young people and mental health. They said that it might be useful for the cross-party group to do something similar.

SX commented that some of the best researchers in the world, such as Dr Jamie Frankis at Glasgow Caledonian University, have conducted research on LGBTI mental health issues.

Stonewall Scotland said that they are due to meet with the new director of See Me, Calum Irving. Calum was previously the director of Stonewall Scotland, so is most definitely open to discussing LGBTI mental health. They also commented on Stonewall's recently published School Report, which found that almost half of all LGBT pupils still face bullying at school for being LGBT, and more than two in five trans young people have tried to take their own life due to bullying. This research was conducted by the Centre for Family Research at the University of Cambridge.

LGBT Youth suggested setting up a small working group to look at compiling a literature review on LGBTI mental health. Both SX and the STA said that they would like to be involved.

JG commented on the importance of consolidating evidence, and asked how we can address the perception of data.

PH said MSPs on the LGBTI+ CPG could submit PQs about the progress of the Mental Health Strategy after the summer recess.

JG asked whether the group should write a letter to Maureen Watt, further outlining their concerns about the lack of LGBTI inclusion in the Mental Health Strategy.

LGBT Youth said that they already have written a letter to Maureen Watt regarding the lack of LGBTI inclusion in the Mental Health Strategy, and are currently in discussions with the Minister's office to arrange a meeting. The letter was a joint letter from LGBT Youth, Equality Network, Scottish Trans Alliance, Stonewall Scotland and LGBT Health and Wellbeing.

LGBT Youth further commented that it is not the responsibility of the voluntary sector to fill in the gaps of the mental health service. We are not all trained mental health professionals. They also further commented on the Mental Health Strategy, saying that if you do not cover protected characteristics, it is not a strategy for all.

PH summarised the group's actions in relation to the mental health discussion: engage in discussion with See Me; collate the existing body of research on LGBTI mental health; and have a follow up discussion with Maureen Watt, Minister for Mental Health.

HIV Scotland asked when the meetings of the Mental Health Strategy implementation group will take place.

LGBT Health and Wellbeing confirmed that the first meeting had taken place last week and that they had been invited. A date has not yet been set for the next meeting.

TIE asked when the Scottish Government consulted with LGBTI organisations on mental health.

LGBT Youth explained that they, Equality Network and Stonewall Scotland had all submitted responses in October to the Scottish Government's consultation on 'Mental Health in Scotland – a 10 year vision'. LGBT Youth said that they had conducted focus groups with young people to feed into their response.

LGBT Health and Wellbeing said they had submitted three responses to the consultation.

SX commented that even leading mental health charities had not been listened to in relation to the Mental Health Strategy.

LGBT Youth commented on the importance of providing clear recommendations to the government, which they have done, such as robust training for all mental health professionals.

3. Minute of the last meeting (19 April 2017)

The group approved the minute.

4. Matters arising from the last minute

JG confirmed that he wrote a letter to the care home in Greenock that he visited, to enquire if the staff there have received any LGBT and/or HIV awareness training. He said that once he has received a reply he will share it with the group.

JG said that he has not yet asked a PQ regarding the breakdown of public vs private care homes, as well as the provision of LGBTI+ training for care home staff.

Equality Network, group secretary, confirmed that they had sent the group's letter on blood donation to Aileen Campbell MSP, Minister for Public Health and Sport. Once they have received a reply, they will circulate it to the group.

TIE said that they have not yet drafted a letter on behalf of the LGBTI+ CPG to the Scottish Government welcoming the establishment of the working group on inclusive education, as there were several initial issues within the group, including some members not understanding the nature of the group, that needed to be addressed first. TIE then provided the CPG with an update on the inclusive education working group. They said that the group had the second meeting last week, and have agreed that one of their first actions is to be a scoping exercise on LGBTI issues in schools, including examples of best practice in Scotland, as well as establishing a group sub-committee of teachers. TIE asked that if any members of the CPG knew of any examples of schools doing positive work around LGBTI inclusion, to please inform them.

MSPs have not yet contacted their local authorities after the elections in May regarding LGBTI inclusion in schools. Given the recent back to back elections, this action has fallen off the radar. However, PH said that it can be addressed again after the summer recess.

D&G told the group that their research on older LGBT people has not yet been published, but once it is they will circulate it to the group. They confirmed that they are working with LGBT Health and Wellbeing to pull together recommendations around older LGBTI peoples' agenda.

5. Update on other matters/ Any other business

TIE provided the group with an update on the recent incident at St. Kentigern's Academy in West Lothian, where a pupil said he was told to remove a Pride badge from his uniform because it 'promotes homosexuality'. West Lothian Council responded, saying that pupils at the school are asked to remove all non-school related badges from their uniforms. TIE said that they have since been contacted by four pupils, as well as three teachers from the school, who contacted them anonymously. The pupils and the teachers have told TIE of further anti-LGBTI incidents in the school. TIE said that they will continue to liaise with these contacts, and will provide an update at the meeting.

PH praised the courage of the young people for speaking out.

HIV Scotland told the group that PrEP will be available on the NHS from 10 July. People wanting to access PrEP will need a prescription and eligibility criteria applies. They said that they will be doing a lot of work around raising awareness of PrEP over the following weeks and would appreciate any social media support.

TIE told the group that they have also been working with Police Scotland around increasing the capacity of their school liaison officers to tackle LGBTI bullying and hate crime within schools.

Equality Network invited group members to a joint event organised by themselves, Amnesty Scotland and Stonewall Scotland, on Friday 30 June at Calton Hill in Edinburgh, to support Northern Ireland's marriage equality march taking place in Belfast the following day.

JG informed the group that he has been appointed as a member of the Equalities and Human Rights Committee.

6. Date of the next meeting and agreement of main discussion items for the September and November meetings

Next meeting: Wednesday 27 September 2017, Committee Room 4, 6-8pm.

As previously agreed, the September meeting will focus on trans equality, to coincide with the Scottish Government publishing their consultation on the Gender Recognition Act after the summer recess.

Equality Network suggested having intersex equality as the main discussion item for the November meeting, as the Scottish Government might also have a separate consultation paper on intersex issues.

JG asked if trans and intersex equality could be combined into one meeting.

STA explained that trans and intersex issues are separate and that intersex activists would not be happy with this.

LGBT Health and Wellbeing requested time at the September meeting to further discuss LGBTI mental health.

AGREED ACTIONS

- MSPs to contact their local authorities after the summer recess, regarding LGBTI inclusion in schools. TIE to produce letter template – rolled forward from last meeting.

- Stonewall Scotland to meet with the new director of See Me to discuss LGBTI mental health issues.
- LGBT Youth and Equality Network to collate the existing body of research on LGBTI mental health into one document to serve as a literature review. SX and STA to support with this.
- LGBT Youth to arrange a meeting with Maureen Watt, Minister for Mental Health, for a follow up discussion in relation to the joint letter from LGBTI organisations.