

LGBT Mental Health Demonstration Project Impact Report 2010-2014

Introduction

Lesbian, gay, bisexual and transgender (LGBT) people constitute around 6-10% of our adult population. Despite improving social attitudes, it is still the case that LGBT people experience very significantly higher rates of mental ill health than the general population, as a result of stigma and discrimination. Evidence shows that suicidal behaviour is 3 times more prevalent among lesbian, gay and bisexual (LGB) people when compared to the general population; this rises to 8 times among transgender people. Self-harm is 8 times more prevalent among LGB people; this rises to 20 times among transgender people. The Demonstration Project was set up in response to compelling evidence around the mental health inequalities experienced by this minority (1)



These statistics starkly highlight the importance of addressing mental health and wellbeing among LGBT people. Yet set against this is the evidence that LGBT people are less likely to engage with mainstream mental health services and continue to face significant barriers and disadvantages.

Whilst increasingly more lesbian, gay, bisexual and transgender (LGBT) people are able to live open, happy and successful lives, many others face complex challenges. Due to their sexual orientation and/or gender identity, the day-to-day experience of many LGBT people in Scotland continues to include marginalisation, discrimination, prejudice, stigma, harassment and hate crime.

Many LGBT people continue to face rejection (or fear of rejection) by family, friends, colleagues and neighbours, and therefore often avoid being 'out' in many spheres of their lives. Whether or not they have issues or concerns regarding their own identity, many LGBT individuals may be contending with the attitudes or behaviour of



"I feel like I'm in a bubble or behind transparent glass. Like, almost invisible, people don't really understand me."

Index	
Introduction	1
Key Findings	3
Our Approach	4
Service Delivery	
Reach	
Evaluation and Learning	
Impact	6
Work with LGBT People	7
Group Services	
 Speak Out Creative Writing Pro 	ject
Case Study: Lilly's Story	
One-to-One Services	
Case Study: Jayne's Story	
Work with Mainstream Services	14
Advisory Group	
Partnership Work	
LGBT Audit Tool	
Recognition of our Work	17
SMHAFF Award	
Principles Into Practice Award	
Next Steps	18
Work with LGBT People	
Work with Mainstream Services	
Pilot Capacity Building Project	
Further Information	19
References	20

others; for example, the intolerance of other people or a lack of understanding or acceptance from others.

Societal ignorance, marginalisation or outright hostility can result in acute health inequalities including a very high prevalence of psychological distress (sometimes referred to as `minority stress`) and poor mental health. Many LGBT people feel unable to use mental health services, even in a crisis. Reasons

LGBT people are less likely to engage with mainstream mental health services

may include fear of being discriminated against, previous experience of poor, non-inclusive treatment or support and fear of having to explain or 'out' themselves in order to correct or challenge wrong assumptions. Coupled with these complex needs is a widespread lack of understanding of the day-to-day experiences and challenges frequently faced by LGBT people. This means the response of many mainstream health and support services often fails to fully meet the needs of LGBT people.

LGBT Health and Wellbeing launched its Mental Health Demonstration Project in July 2010, responding to decades of accumulated evidence around LGBT mental health inequalities. The project was the first of its kind in the UK and had two objectives: firstly, to establish and deliver an effective LGBT Mental Health Service for Lothian; secondly, in the longer term, to start to build an evidence base around ways to effectively reduce the health inequalities of LGBT people across Scotland.

LGBT Health and Wellbeing was funded by Scottish Government (primary funder) and NHS Lothian for three and a half years to deliver the project. The project was staffed by two full time Development Workers, a full time Project Assistant and a small team of volunteers. The project was assisted by an Advisory Group. The service comprised a range of intensive one-to-one mental health support interventions alongside a diverse and evolving programme of mental health group services.

LGBT Mental Health
Demonstration Project
was the first of its kind
in the UK

As well as direct service delivery, the project also worked with mainstream mental health services to improve their inclusivity and accessibility.

This Impact Report showcases some of the work undertaken with individuals and organisations and provides key findings identifying what makes mental health services inclusive, accessible and affirming for LGBT people.



The images used throughout this report were developed by people who have used our services. More information about our 'Photovoice' Project can be found on Page 5 of this report.

Key Findings

LGBT people are currently often poorly served by mainstream mental health services.

The Equal Access Report (CAPS & LGBT Health, 2012) echoes consistent findings elsewhere, showing that LGBT people's experience of stigma, discrimination, damaging assumptions and invisibility means that they continue to face significant barriers and disadvantages when using services; this inevitably leads to poor engagement with services.

It is essential that services have a proactive approach to developing a 'safe space' where diversity is respected and are prepared to challenge both staff and service users if this is not upheld.

Evidence shows that many LGBT people still do not feel safe accessing mainstream services because of the attitudes they may encounter there, both from staff and from other service users. Feedback from the Equal Access focus groups and surveys of professionals and of LGBT people who use mental health services identified safety and respect of difference as key requirements. Yet 53% of professionals completing the survey did not believe that mainstream services were a safe place for LGBT people.

Due to the lack of widespread monitoring of sexual orientation and gender identity within mental health services, LGBT people and their needs remain largely invisible. The lack of monitoring, and the fact that LGBT people are often not 'out' when using services, in an attempt to avoid assumptions and discrimination, means that it is not possible for services to undertake a robust analysis of the uptake of their services by LGBT people. This lack of monitoring also means that services are not well placed to establish the needs of this minority and to evaluate whether they are meeting those needs.

For LGBT individuals the impact of avoidance or assumptions is an exacerbation of their distress which often results in disengagement from much needed support services.

A particular key area of cultural competency repeatedly identified is that of health and social care professionals not making assumptions and being able to talk openly about issues related to sexuality or gender identity, rather than avoiding these issues. Equally whilst individuals often access mental health services with issues that are closely associated with their LGBT identity, providers need to avoid an inappropriate emphasis on these issues and the assumption that being LGBT will necessarily be linked to the poor mental health experienced by an individual.

Self-stigma has a major impact on the mental health and wellbeing of LGBT people.

Many people internalise societal stigma and negative attitudes to LGBT identities, which impacts on their self-esteem, and more generally on how comfortable they feel with their LGBT identity. Crucially, this also impacts on their confidence in accessing mainstream services. Inclusive and affirmative services can play a key role in addressing self-stigma.

LGBT minority stress can be a major contributor to mental ill health.

LGBT people experience a number of stressors associated with their minority status, including self-stigma, expectations of rejection and discrimination and actual experiences of rejection, discrimination and violence. This interpersonal prejudice and discrimination and reduced social support results in LGBT people often experiencing associated high levels of chronic psychological distress, anxiety and poor mental health.

Finding a sense of belonging and community is vital to wellbeing, recovery and resilience.

Societal attitudes and feeling different from the norm often result in isolation, which in turn impacts on mental and emotional wellbeing. Finding a sense of belonging and community, which is affirming of LGBT identity, is therefore often vital to an individual's recovery process as it helps tackle self-stigma, reduces social isolation and creates resilience.

Our Approach

Service Delivery

Through our specialist LGBT service, individuals are offered a supportive environment where they can address mental and emotional health issues without experiencing cultural barriers. The service is affirmative of their LGBT identity and they can be 'out' and be themselves without fear of prejudice or discrimination. The service is delivered in a culturally sensitive manner that takes cognisance of the specific issues that may affect an individual as an LGBT person, for example poor mental health associated with stigma, discrimination and prejudice, not just within society but also within family units and friendships.

In our work with individuals, our monitoring of recovery has focussed on 10 key aspects of wellbeing that we have found to be of particular relevance to LGBT people:



"When I came to the centre it was to find a place for myself. I'm glad I'm gay because I've got all these people."

- Isolation
- How people feel about themselves
- People's awareness of mental health support services
- People's ability to access other mental health services
- How people support others with their mental health
- How people manage their mental health
- How people cope when others are negative towards them
- Ways that people become more aware of things that affect their mental health
- Ways that people become less likely to self-harm
- Ways that people are less likely to make plans to end their life.

Reach

Evaluation shows that as a community-based specialist organisation we have a good reach into the LGBT community and are able to reach individuals and sections of the community not engaging with mainstream health and third sector services. This means that our specialist services have a particularly strong prevention and early intervention impact on the LGBT community.

Over the course of the project, we have worked with over 3,000 individuals.

Our 2013 Service Evaluation indicated that 31% of respondents identified as transgender, thus indicating very successful engagement with this seldom-reached section of the LGBT community. This is crucial as recent research (Trans Mental Health Study, 2012) shows that that transgender people experience particularly acute mental health inequalities, with 1 in 3 trans people reporting they avoided seeking urgent mental health support due to their transgender identity.

As an organisation we take a proactive approach to working to break down the barriers that exist in mainstream service delivery. We play a central role in cultural bridging, with many people using our services going on to use other (mainstream) mental health services that they might not have otherwise accessed. To achieve this cultural bridging we co-deliver workshops with mainstream providers, which helps introduce members of the LGBT community to providers they would not necessarily have engaged with and starts to build their trust in those services, while building the capacity of these providers to understand and engage with LGBT people effectively. In addition over 50% of people accessing our one to one services were signposted to other mental health services.

As well as increasing access to services, over 4 in 5 people using our mental health services also felt more able to access support from their peers as a result of their engagement with our services.

Feedback indicates that people using our services have valued the sense of belonging, acceptance and LGBT-affirmative practice that is central to our approach to working with individuals and groups. This enables individuals to focus on addressing their mental health issues in a holistic way that

4 in 5 people using our mental health services felt more able to access support from their peers

does not pathologise, over-emphasise, or avoid sexual orientation or gender identity issues.

Evaluation and Learning

The Mental Health Demonstration Project set out to identify an effective service delivery model and a range of interventions and programmes that would reduce the mental health inequalities of LGBT people. This meant the project had from the start a strong focus on proactive learning, with rigorous evaluation built in to all its activities. In all our work with LGBT people we set out to deepen our understanding of peoples' day-to-day lived experience, the impact of discrimination and social stigma, how they managed their mental health and their experience of services.

In order to build strong resilient individuals and communities it is important that we recognise that there are significant mental health inequalities that exist in the LGBT community. The LGBT community is a recognised 'at risk' group in relation to suicide; 36% of individuals we worked with indicated they experienced suicidal thoughts and 29% self-harmed. Building knowledge of the specific mental health needs of LGBT people and the way in which specialist and mainstream services can best serve these was central to the work of the Project.



"I'm not a label, I'm a human being ... In my life I haven't felt valued or validated because of my mental health and sexuality ... If it wasn't for the Centre I don't think I would be here, to be honest."

Evaluation has been central to capturing the impact of our services. In our programme of mental health support we have used a wide range of tools to help us evaluate each aspect of service delivery, providing both a quantitative and qualitative evidence base. We have developed ways to both evaluate the long term impact of one-to-one support as well as the immediate impact following brief interventions such as courses and workshops. We produced annual evaluation reports; the results are summarised below.

One research method we found particularly effective was **Photovoice**, a social research tool for group evaluation and feedback, gathered through a series of focus groups. Photovoice proved an extremely powerful tool that enabled people to speak about their experiences in a safe and supportive environment. The photos and personal quotes provided throughout this report were largely generated through this process. We used this method to explore people's experience in relation to a range of issues: accessing mainstream services, coming out and community safety. We have produced a fuller Photovoice Report that captures all the work undertaken during the lifespan of the project.

Each year over 1,000 people used our mental health services, with around 1 in 3 people accessing our one-to-one support. We found this one-to-one support often played a vital role in enabling people to then go on to access our broader programme of groups and events, as well as further mental health support elsewhere.

Evaluation has been an important tool in guiding the development of the range and scope of our services, enabling us to identify and respond to gaps in service provision and emerging trends and issues.

Impact

36% of service users had suicidal thoughts

55% reported a reduction in suicidal thoughts after using our group or one-to-one mental health services

29% of service users self-harmed

64% reported that they are less likely to self-harm as a result of using our group or one-to-one mental health services

68% of service users report feeling more able to access other services as a result of engaging with the Mental Health Demonstration Project

81% report feeling more able to access support from their peers as a result of their engagement with our services

64% of people using our group services report feeling more resilient

73% of service users report a reduction in feelings of isolation after accessing our group services

58% of service users report feeling ok about themselves after accessing our group services

54% feel more able to manage their mental health after using our group services

(All figures our Annual Service Evaluation, 2013, or from feedback forms completed following attendance at a course, workshop or group.)

Work with LGBT People

Group Services

Group activities are at the core of our service. They provide a sense of community that participants have told us time and time again is essential to their individual recovery process.

In the last three years, over 2,000 people have accessed our group activities, which have included mental wellbeing workshops, courses, events and a range of monthly wellbeing groups. Mental

wellbeing workshops and information sessions have covered a wide range of topics such as managing self-harm, disordered eating, crisis planning, building social confidence, exploring identity and information sessions on a range of mental diagnoses and substance misuse.

Courses have focused on self-exploration and developing selfhelp skills including CBT, Transactional Analysis, art therapy and mindfulness through photography; they have often been delivered in partnership. 3 in 5 people using our mental health services reported they felt extremely or very isolated

Mental wellbeing groups meet on an ongoing basis, and have developed according to identified needs. They have included a listening group, spirituality group, women's group and a group for people with learning disabilities.

Isolation has consistently been identified as the most pressing issue for people using our services. In one-to-one assessments feelings of isolation have had the highest score, with 60% of individuals reporting feeling 'extremely isolated' or 'very isolated' on accessing services. Being able to deliver group services, and start to provide people with a sense of belonging and community, has been crucial in addressing this isolation.

This has also been the area where our services have the most impact, shown in both long term

"We all get together and have a good time. Certainly the most people I meet in my life are here."

sustained impact evaluation through one-to-one support (28% positive improvement on average per participant) and immediate impact evaluation of group services (73% of participants report a positive impact).

A key finding has been that just as LGBT minority stress can be a major contributor to poor mental health, conversely finding a positive sense of LGBT community coupled with the right mental health support be a major contributor to recovery.

It is often the combination of tailored mental health support and this sense of acceptance, belonging and community that people who use our service tell us has been key to improving their mental and emotional wellbeing and has in turn often provided them with the confidence to seek out other support.

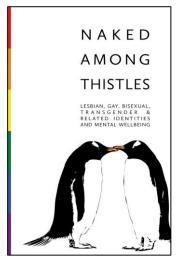
Speak Out Creative Writing Project

We ran a creative writing project from September 2013 to February 2014, which culminated in the publication of a collaborative anthology of writing about LGBT identities and mental wellbeing, entitled <u>Naked Among Thistles</u>. The project was developed in response to service users' requests for creative writing activities, and the ongoing need to create platforms for the stories and voices of people who are marginalised by stigma and discrimination to be heard. The project aimed to create an empowering space for participants to explore ways to express their narratives creatively, in a way which maintains their



ownership and control over their representation, and supports their ability to continue to do so in the future.

Creative writing is a powerful tool for creating understanding and encouraging empathy via emotional insight, as well as being engaging and accessible to the general public. The book illustrates some of the complex ways that stigma impacts on mental wellbeing, in a way which goes beyond statistics and case studies. Writing is also a therapeutic exercise in its own right, and this project has provided an opportunity for LGBT people to develop these skills in a way which contributes to their own wellbeing and recovery.



The project was launched as part of Book Week Scotland in November 2013, with an introductory workshop followed by an open mic event. This was followed in early 2014 by a series of focused creative writing workshops, led by professional writers, who were offered training in working creatively with people with a diverse range of mental health issues and identities. These sessions were framed by the goal of producing an anthology of creative writing about LGBT identities and mental wellbeing. An open call-out was also released for submissions to the anthology; these pieces of writing were then compiled into a book, which was published in printed, eBook and online format. Participants had the opportunity to input into the production of the book in a session with the publisher. The book was launched at a celebratory public event, where 18 of the contributors to the book performed their work to a warm and supportive audience, alongside accomplished feature performances from each of the workshop leaders.

Outcomes

Increased mental wellbeing, skills and creativity

As a result of the workshops:

- 80% of participants said that they feel better about themselves
- 48% said that they felt less lonely
- 36% said that they felt more aware of things that affect their mental health
- 34% said that they feel more able to support others with their mental health
- 25% said that they feel more able to cope with their day-to-day lives
- 50% detailed other benefits, including increased confidence, creativity, feeling safe and supported, feeling valued, and feeling part of a community.

In addition, some participants have continued to develop their skills after the project has ended, performing at spoken word events and submitting work to other publications.

Increased understanding

The introduction to the book includes a section on using the book as a learning resource, which gives a set of suggested pieces to use when exploring a variety of topics. The book will be used as a resource in our own capacity building work with mainstream organisations; in addition, organisations are already independently circulating the book, including NHS Lothian and LGBT Youth. It is also being used in the Mad People's History course at Queen Margaret University.

Challenging stigma and discrimination

Increasing understanding challenges stigma and discrimination by changing individuals' attitudes. We also asked book launch attendees how they might use the book to further challenge stigma and discrimination in their communities; they said:

Increased capacity to support others

The project increased individuals' ability to support people they know, as quotes from those attending the book launch illustrate. It has also increased the capacity of literary communities who engaged in the project to support LGBT people and people who have lived experience of mental ill health: the facilitator training allowed a number of those who run events in the community to engage meaningfully with the issues, as well as further engagement via the book launch, a podcast interview with the Scottish Poetry Library, and an article in arts magazine *The Skinny*. Using an artistic medium that positions the project within the artistic communities is a powerful way of reaching a demographic who may not otherwise encounter this type of discussion.

The project has been well-received by participants, audience members, the wider community and other organisations. You can download the full Impact Report on the Speak Out Project from our website.

"I am going to share this book with friends and family who are struggling with their mental health wellbeing. I am excited about sharing this – and hope that it will be a useful way to build support and a sense of solidarity."

"[I would use this book to support others] by sharing parts and stories that I think they can relate to and by telling them of the places to contact should they need help."

"The number of diverse voices reading was a very powerful tool for increasing understanding. In particular I learned more about the experience of transgender people. Together, all the voices were so rich in communicating human experiences."

"I think I could show people that they are not alone and that others have shared their experience."

"By sharing my poetry and talking about my own experiences I hope to encourage others to open up and feel less isolated and a wee bit more supported about their situation. The poems are a great was of opening a conversation about everything from relationships to feelings of safety or loss."

(Feedback from book launch event)

"If I encountered discrimination in a particular context I might 'plant' the book where people could pick it up."

"We are displaying the book in our office, where we have people coming and going, we hope a range of people will pick them up and take them with them. We will promote the book at any opportunity. I think everyone should read this book ... [It's] a real force for change!"

"Would recommend them to read it or passages from it to gain more insight – use it more as an olive branch to bridge gaps of misunderstanding or myths."

"With broader knowledge base which this adds to, I can see it increasing awareness and I can always refer to passages or entire works as opportunity arises."

Case Study: Lilly's Story

Lilly is a 53 year old woman, who identifies as lesbian. She first accessed LGBT Health and Wellbeing just over a year ago.

She describes her reasons for referring herself at that time, when she was also living outside of Edinburgh in a rural community with no LGBT services:

"The kids had grown up and left the family home. I was stuck in this empty house, with nothing happening. I originally came looking for a voluntary opportunity then realised there were lots of services available to me too.

A part of me had got lost, especially in grandparenthood. It felt like I'd started to live a lie (my children requested that I not tell my grandchildren about my female partner), and part of me was dying. My identity as a lesbian wasn't acknowledged, I felt like an invisible woman.

The mental health support I was receiving at the time doubted the validity of my identity as a lesbian. It didn't make

me doubt myself but I knew I needed to look out something that would be affirmative to that part of who I am."

Lilly found that affirmation in her contact with LGBT Health. Shortly after getting in touch, Lilly moved to Edinburgh, and in the last year she has used a range of services. I asked Lilly how our services had impacted on the relationships she has:

"I feel like I can be more open with more of my family.

I am now in a relationship. After my last relationship ended in my 40s, I gave up on the idea of having another. I chose to be celibate for a long time. Age played a part in that. I felt that I wasn't supposed to have a sexual self as an older woman.

Coming along to things like the women's wellbeing group helped me see myself as someone who could



be in a loving relationship, no matter what my age. I can't explain how much I love that group! It has provided me with education, friendship and support from a mostly older crowd."

The mental health

support I was receiving

at the time doubted the

validity of my identity

as a lesbian. It didn't

make me doubt myself

but I knew I needed to

look out something that

would be affirmative to

that part of who I am

Lilly talks about why it made a difference to get mental health support from a specialist LGBT organisation:

"A major thing for me was approaching the organisation with my BPD (borderline personality disorder) mental health diagnosis. I wasn't seen as a label, or defined by my mental health diagnosis. I felt like human, and valued.

I'd spent 10 years receiving mental health services where I'd been stigmatised because of my BPD. With that diagnosis in particular, expressions of sexuality become pathologised. As a lesbian with a psychiatric label I felt I wasn't taken seriously and I didn't challenge it at the time.

I feel I would absolutely challenge any discrimination now. In the past a social worker has told me to keep my lesbian identity private in case my children ended My experiences of support from other organisations has always felt in some way conditional, I feel with LGBT Health has accepted all of me

up in care. My experiences of support from other organisations has always felt in some way conditional, I feel with LGBT Health has accepted all of me."

Lilly has since also become a volunteer with LGBT Health and tells us what it has felt like to be able to give back:

"I feel part of a team being able to volunteer. I now know people I wouldn't have before and I feel more able to support others, which makes me feel good."

Lilly also contributed to the Scottish Mental Health Arts and Film Festival's 'Out of Sight, Out of Mind' exhibitions, putting together her participatory artwork based on her experiences, and

working with LGBT Health staff to create a second piece exploring experiences of labelling. These pieces were exceptionally well-received by audiences, and Lilly spoke of them as a profound experience with positive effects for her confidence.

Support Provided by our Specialist Services

Over the last year Lilly has accessed informal social groups and events such as our weekly drop-in or the Icebreakers group run on the commercial gay scene, as well as the monthly film nights. Lilly has also attended mental health information groups on topics such as depression and sleep and mental health courses focusing on topics such as dealing with anxiety.

Lilly has accessed individual art therapy sessions through our pilot art therapy service, group art therapy weekends with topics such as identity. Lilly has also regularly attended out fortnightly women's wellbeing group and contributed to discussions around what it is to be an LGBT woman.

Through building her confidence Lilly has also become a valued volunteer.

Case Study: Jayne's Story

Jayne is a woman in her mid-40s who identifies as gay. Jayne first made contact with LGBT Health back in November 2010. In 'My Mental Minx' Jayne tells, in her own words, her story and her experience of using the organisation's Mental Health Demonstration Project.

My Mental Minx

"Without accessing LGBT Health and Wellbeing my life would be totally different. I would still be in a place of hell, I would be withdrawn, isolated and my life would be empty. More importantly I would not be alive today.

I came to LGBT Health and Wellbeing feeling desperate. I started self-harming as a teenager and over the years I had started to believe there was something wrong with me, that I was abnormal and different from everybody else.

For a long time I had lived with a hidden belief that there was evil inside me, but I was too terrified to tell anyone. Over time the fear began manifesting in different ways – through self-harming, alcohol, an eating disorder and putting myself at risk of danger. I tried desperately to get help.

But in this horrible situation, when I felt that what I needed was support and validation for how low I was feeling, instead I was given ECT treatment; they shocked my mind. Until now I haven't disclosed this to anyone because I feel ashamed.

I feel that the treatment was outrageously irrelevant to me; what I was going through was an emotional thing, not a mental thing. Later I was eventually given a diagnosis called borderline personality disorder, but this just felt like another label to me.

I did not get better because of diagnoses, ECT, medication or anything else hospitals did or didn't do for me. I got better and continue to get better now I have around me people who showed that they cared

and because of that I get to laugh again.

LGBT Health and Wellbeing is a place of safety and non-judgment. It feels secure, safe and a place where I can be myself, accepted as I am. The support from the staff and the existence of the Centre are a lifeline to me.

In my previous experiences with mental health professionals, people had often linked my sexual orientation to my mental health conditions and both had felt like labels. Here they treat me as a whole person. They have shown me that a mental health condition is part of you, but not all of you and that has been important to me.

Through mental health workshops I've gained a better understanding of some of the patterns of self-destructive behaviour I've engaged in, and at the workshop on borderline personality disorder I learned more about the diagnoses than anyone had explained to me before.

There's also been emotional and therapeutic support that's accompanied all of this. Art Therapy



Without accessing LGBT Health and Wellbeing my life would be totally different. I would still be in a place of hell, I would be withdrawn, isolated and my life would be empty. More importantly, I would not be alive today

groups have given me a space to feel safe enough to release feelings through art that I couldn't or can't express verbally. I've also had one-to-one sessions that have meant I've had a space to reflect on how things are affecting me.

But perhaps the most important thing for me is that coming to LGBT Health and Wellbeing I no longer feel alone. The weekly drop-in has been a place to meet new people, build social skills and gain new friends. It gives me the feeling of not being alone, of being part of a group and being accepted. Icebreakers, a social group that meets on the 'scene' and the women's group that meets at the Centre have been important part of this too."

Support Provided by our Specialist Services

Jayne first accessed our one to one mental health support in November 2010, initially meeting our Mental Health Development Worker fortnightly. After a few months, a referral to the Beyond Trauma Service at Health in Mind was made, and Jayne started to use this service. Jayne has continued to use the Beyond Trauma support, alongside other mental health services and the Alcohol Referral Team.

In my previous experiences with mental health professionals, people had often linked my sexual orientation to my mental health conditions and both had felt like labels. Here they treat me as a whole person

Alongside one-to-one support, the Mental Health Development Worker also accompanied Jayne to a GP appointment, taking on an advocacy role and supporting Jayne to speak up for herself, something that she had found difficult in the past.

Jayne also attended a meeting with Lothian and Borders Police's LGBT Liaison Officer around violent and threatening behaviour she was experiencing from a family member. This meeting enabled her to explore her options including discussing how they would investigate and how to formally report the issue.

The police were able to arrange a local Community Safety Team to do a home assessment to recommend how she could safeguard herself at home. She was also accompanied to Women's Aid so she was aware of how their services work should she feel that she needed to flee her home.

Jayne also used one-to-one support to deal with a situation that arose whilst she was in hospital undergoing treatment. A staff member said to Jayne, "cause your dad abused you... that's why you are



gay". This interaction with the hospital had a detrimental impact on Jayne's wellbeing, as she found this response to her identity extremely traumatic. Jayne commented to our Development Worker that had she not already had mental health support in place she feared how she would have responded to this.

Jayne has also continued to use some of our regular group support services including the drop-in, Icebreakers and women's wellbeing group. She has also taken part in our Photovoice focus groups, and has found this a creative and powerful way for her to speak about her life and recovery.

Work with Mainstream Services

Advisory Group

The development of the Mental Health Demonstration Project has been guided by an the externally facilitated multi-agency Advisory Group, which comprised a breadth of representation from Scottish Government, NHS Lothian, local and national mental health services and campaigns, clinical mental health staff and other local and national LGBT organisations. The Advisory Group met on a quarterly basis and played a crucial role in ensuring the Project was well linked in, service

Advisory Group Members

Scottish Government
Scottish Recovery Network
CAPS
See Me
Breathing Space
VOX
Depression Alliance
Bipolar Scotland
LGBT Youth Scotland
NHS Lothian
NHS Health Scotland
NHS Health Scotland
See Me
Waverley Care
Depression Alliance
Gay Men's Health

development was informed by wide-ranging expertise and Project learning was widely disseminated. NHS Lothian facilitated the group and were key stakeholders.

Partnership Work

As well as providing direct specialist support services to LGBT people, the Project has undertaken crucial cultural bridging work to support individuals to access other mainstream statutory and voluntary sector services. Joint work in service delivery has been undertaken with a wide range of mainstream agencies including Depression Alliance, Bipolar Scotland, Crew 2000, Edinburgh Carers' Council and NHS clinical services.

The Project also hosted and co-delivered focus groups and consultation events with a range of partners, such as Consultation & Advocacy Promotion Service (CAPS) and NHS Lothian. These served to promote greater understanding of the day-to-day experience and needs of LGBT people.

"The NHS is family obsessed, which is the atmosphere in services. People assume that you're heterosexual. The language is heterosexual, if you say partner they assume it is a heterosexual relationship."

"There can be a link between LGBT identity and your mental health but this shouldn't be assumed. But the psychiatrists ears prick up when you tell them and they assume it is the cause of the diagnosis."

'It's an education and awareness issue for all staff. People are not aware or have their own prejudices; they may have had no exposure to LGBT people."

"Often it is not the professionals but other service users that are threatening, professionals need to watch out for discrimination and create the Safe Space."

(Equal Access focus group and survey, 2012)

Capacity Building

The LGBT Mental Health Demonstration Project has done extensive capacity building work with other providers by offering specialist knowledge and guidance on good practice in relation to mental health provision for LGBT people. This work has been crucial in achieving a real and sustained impact on LGBT mental health inequalities through increased understanding and commitment to inclusive practice from mainstream providers.

This capacity building work has included:

- Support provided to 44 organisations in working with LGBT service users in relation to mental health issues
- Tailored training provided to 18 organisations and 300 practitioners

During the demonstration project we have continued to develop our skills and knowledge of ways to support organisations develop their LGBT awareness and approach to building affirmative services.

"Started a vital discussion that we will continue as a management team."

"I'll be more confident raising issues in the team and better awareness of where and when to signpost."

"I've got a clearer understanding of the terms and how to engage effectively and support our staff."

(Feedback from LGBT awareness training to third sector organisations)

In 2010 we worked with CAPS to research LGBT people's experience of mental health services through an online survey of both LGBT people and professionals in the mental health field. The findings in the Equal Access Report (CAPS & LGBT Health, 2012) highlighted that there is still much to be done to ensure that people have a positive experience of accessing mental health services. 53% of professionals completing the survey did not believe that mainstream services were a safe place for LGBT people. The Report illustrates there is currently a significant gap between the perceptions of those working in mental health services as to how LGBT-inclusive they think their services are, compared to the actual experiences of many LGBT people using those services, which are often much less positive.

LGBT Audit Tool

One key outcome of the Mental Health Demonstration Project was to develop a practical and lasting tool that would support the development of LGBT-inclusive practice within mental health services. The development of the resulting Audit Tool has been shaped by our research findings, and our own experience both of delivering specialist services for LGBT people and of our training and capacity building work with mainstream providers. The tool has been developed with input from a wide range of statutory and third sector representatives, including our Advisory Group members.

The Audit Tool is designed to be used by any individual or team that provides a direct service to people. It helps service providers think about their practice and the practical steps that they can take to continue to improve their current practice.

Why use the Audit Tool

Reasons to use the LGBT Audit Tool include:

- It will help a service provider think about LGBT people's experience of their service. Recognising the diverse needs of individuals is a core component of providing good quality care and support, and LGBT affirmative practice will enhance people's overall experience of a service.
- The easy to use tool is designed to help service providers think about what practical steps they can
 take to develop their service so it meets the needs of the LGBT community and help ensure LGBTinclusive practice.
- Some small changes can often have a massive impact on the way LGBT people experience a service. The tool suggests possible step changes, but can also be used to promote, share and celebrate good practice.
- The Equality Act 2010 consolidates many of the protections against discrimination in employment and the provision of goods and services. Any organisation delivering a public service must consider the needs of different groups who might use their service and commit themselves to tackling inequality. As well as ensuring services work within the law, providers can use the tool to proactively ensure that service users are treated fairly and equally.
- The Scottish Government's Mental Health Strategy 2012-15 explicitly covers the need for equal access to mental health services under Commitment 14: Equality of Access to Services. The Audit Tool supports providers to meet that commitment.

How to use the Audit Tool

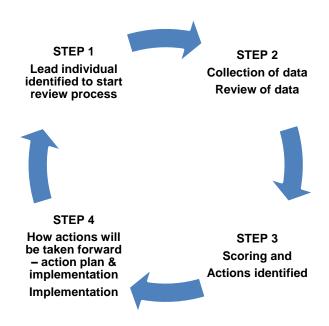
The tool can be used to gain an overall "snapshot" of a service and guide thinking around practice development. It is suggested that a number of staff get together to jointly complete the audit, as well as ideally involving service users.

The Audit Tool focuses on five development areas:

- Staff providing a mental health service are supported to develop an awareness of working with LGBT people
- 2. The service is safe and accessible for LGBT people
- The service has relevant policies and procedures to support LGBT-inclusive practice 3.
- 4. The service undertakes relevant equality monitoring, including of sexual orientation and gender
- 5. The service is proactive about its promotion, publicity and engagement.

The Audit Tool process

Using the tool is a circular four step process, so whilst organisations can start to use the Audit Tool at any point, once they have completed step 4 they will need to agree when they plan to start the process again.



The Scottish Government has funded a small scale Capacity Building Project to support organisations to use the Audit Tool. This pilot project will launch in October 2014 and run until March 2016. This ongoing work marks a recognition of the need to continue to share learning and good practice across Scotland.

The Mental Health Capacity Building Project will ensure that the legacy of Mental Health Demonstration Project is achieved and that organisations across Scotland can develop sustainable ways to develop their LGBT inclusive practice. The audit tool is widely available and we will continue to ensure that it has a national reach.

Recognition of our Work

SMHAFF Award

In October 2012 we were delighted to win the Best Educational Documentary category in the 2012 International Film Awards of the Scottish Mental Health Arts and Film Festival (SMHAFF) for Transvisions. The Transvisions film was produced as part of the LGBT Mental Health Demonstration Project thanks to a small grant from see me. This educational film explored the experiences of transgender people in Scotland.



The film was launched as part of the 2011 Festival, with a clip also shown at the subsequent awards ceremony and the film distributed in DVD form and available on YouTube.



This award provided great mainstream recognition and an opportunity for exposure of the issues of stigma and discrimination, and their impact on the mental health and wellbeing of transgender people.

Principles Into Practice Award

In March 2013 we were awarded a Principles Into Practice Award in the Respect for Diversity category. The Principles Into Practice Awards help identify, share and celebrate good practice across Scotland. Nominations in this category must clearly demonstrate how they have influenced mainstream service development and/or delivered change in individual care to meet specific needs. The award category was sponsored by NHS Health Scotland's Equality Team.



The one day conference and awards ceremony gave us an excellent platform to highlight the mental health inequalities of LGBT people and showcase the work of the Demonstration Project in addressing these and improving outcomes for individuals.

"The project was really interesting for a number of reasons for the panel. They presented evidence of outputs, so there were some clear measurable outputs of how they'd engaged. The fact that they were also reaching out to people with learning disabilities as well was impressive, the panel were impressed with that. To say, here's another disadvantaged group, that may not have a voice to be able to stand up for themselves and the project actually reached out to them. That proactive element with people with learning disabilities was something that really was meeting the principles of the Act."

Derek Baron, Chair of the PIP Judging Panel

Next Steps

Although funding for the Mental Health Demonstration project ended in March 2014, LGBT Health and Wellbeing continues to deliver a comprehensive and multifaceted range of programmes that promote wellbeing and build the confidence, resilience and social capital of individuals and communities. 'As part of maximising engagement, we promoted much of the mental health delivery under the name LGBT Headspace.

Headspace programme

Thanks to funding from NHS Lothian and the Robertson Trust our, Headspace mental health service continues to provide one-tone and group support, including a wide range of courses, groups and workshops that focus on promoting positive mental and emotional health, reducing social isolation and giving people a safe and culturally sensitive space to explore how best to manage their mental wellbeing. We will continue to build on the success of the Mental Health Demonstration Project and seek to use creative ways to engage people, including embedding the arts into our approach such as by participating in the Scottish Mental Health Arts and Film Festival.

Counselling and Self-Management Initiative

Funding from the Alliance has allowed us to develop and expand our Counselling Service, thus enabling us to offer greater opportunities for therapeutic support, both one-to-one and in therapeutic groups. The counselling is provided by a team of experienced volunteer counsellors who receive external clinical supervision and are managed by a Counselling Coordinator. The Counselling Coordinator and Mental Health Development Worker work closely to provide a wide programme of self-management courses and workshops.

Further information about Headspace and the Counselling Service can be can be found on our website www.lgbthealth.org.uk

Work with Mainstream Services

We are keen to build on the work undertaken within the Mental Health Demonstration Project, ensuring that we continue to promote mainstream services to the people we work with and support providers in the development of LGBT-inclusive services. We will also continue to seek engagement and co-delivery with a wide range of services in relation to our programmes.

Our robust service delivery model, evidence gathering and evaluation has given us a wealth of information about the way that mental health services can take steps to have a positive impact on LGBT people's mental wellbeing. Our new Capacity Building Project will allow us to continue to share this experience and help services develop their practice.

Pilot LGBT Capacity Building Project

The Scottish Government has invited LGBT Health to deliver a small scale Capacity Building Project. This 18-month pilot project will build on the learning gained from the Demonstration Project, which identified an acute need for capacity building work with service providers in order to support the development of more accessible, culturally competent and responsive services.

The Capacity Building Project will work with a small number of statutory and third sector mental health providers, who will be provided with tailored support, based on findings from a series of meetings with statutory and third sector mental health agencies in autumn 2013.

The capacity building work will encompass three interlinked activity strands:

- LGBT Audit Tool: ongoing development of this practical tool and the creation of written guidance to support service providers to use the tool.
- Support to organisations: provision of bespoke capacity-building support to mental health providers to enable them to work through the Audit Tool.
- LGBT awareness raising training: delivery of mental health-focused training on LGBT issues tailored to the specific needs of agencies working through the Audit Tool.

The pilot will provide bespoke support to organisations to work through the Audit Tool and will review their experience and feedback on this process to enable us to further develop the tool and inform the

development of guidance. This guidance document will use case studies to illustrate the benefits organisations obtained from using the audit tool, as well as some of the challenges they encountered, and will consider best practice in involving service users and carers in the audit process.

As part of the support available to agencies, the training needs of staff and volunteers will be assessed and some bespoke training offered to explore issues like LGBT identities, the specific mental health risk factors affecting LGBT people and the barriers they may encounter in relation to accessing services. The training will be strongly informed by our delivery of a specialist mental health service and our knowledge of working with LGBT people, including through specialist initiatives such as our transgender programme.

Through a rigorous review process of the activity strands we aim to use the learning from the pilot to inform future roll-out of the Audit Tool and associated guidance.

Summary

The Demonstration Project has been very successful in delivering a diverse and specialist mental health service in NHS Lothian. The Headspace programme has provided a vital LGBT affirmative space for people that has supported them in their individual journey to recovery. The project has had the added value of using our learning gained from direct service delivery to influence the direction and content of our capacity building work.

The project has also been very successful in ensuring that people have engaged with a variety of mainstream services. The service has been a vital bridge for many people wishing to access a culturally sensitive space whilst developing confidence and knowledge to enable them to access other mental health services.

Further Information

For further information about our organisation, services and research undertaken please visit our website www.lgbthealth.org.uk. The 'Online Resources' section of our website includes the Equal Access Report, as well as a range of other Impact Reports and resources.

To discuss any aspect of this report and the Audit Tool please contact Stacey Webster, Deputy Director, at stacev@lobthealth.org.uk or on 0131 523 1100.

LGBT Health and Wellbeing 9 Howe Street Edinburgh EH3 6TE 0131 523 1100 www.lgbthealth.org.uk

Mental Health Demonstration Project funded by:





Reference Materials

Scottish Transgender Alliance (2008), 'Transgender Experiences in Scotland'. Key research findings of the Scottish Transgender Alliance survey of transgender people living in Scotland

CAPS & LGBT Centre for Health and Wellbeing (2012), 'Equal Access for LGBT people?' User and experience-led evaluation of LGBT people's experiences of mental health services.

PhotoVoice Project – LGBT Health and Wellbeing (2010-2013)

Glasgow Anti-Stigma Partnership (2010), 'There's More to Me; Report on lesbian, gay and bisexual people's beliefs, attitudes and experiences of mental health'.

Maylock, A. et al. (2008), 'Supporting LGBT Lives: A study of mental health and wellbeing'. Commissioned by Gay and Lesbian Equality Network (GLEN) and Belong to Youth Project.

McNeil, J. et al. (2012), 'Trans Mental Health Study'. Largest UK study of trans mental health.

Stonewall Scotland and NHS Health Scotland (2003), 'Towards a Healthier LGBT Scotland. INCLUSION Project Working for Lesbian, Gay, Bisexual and Transgender Health.

University of Brighton & Spectrum (2007), 'Count me in Too'. Finding from the UK's largest scale LGBT community needs assessment (1)