

## Workplace & general other settings, LGBT community engagement Need To Know Information

### **General -- Need to know community statistics & life experience factors:**



Useful data concerning numbers of LGBT&T communities (Bournemouth Dorset Poole Christchurch: see below) – used to estimate averages in percentage terms & from geographical areas locally for those using your services, staff & volunteers. Globally, Dorset, UK and across the world, research and data indicates that the LGBT&T population is never less than 6% (conservative estimate) of the total population, but that it may be as high as in the area of 10%: this indicates a sizable population, and one with particular needs because of prejudice & discrimination, family rejection, and other harmful factors.

The true percentage may be a little higher than 10% if one takes into account the latter factors which inhibit self-disclosure as LGB or T because of the record of personal impacts of very harmful kinds (bullying, discrimination in employment, etc.) that many community members still encounter if they are 'Out' as lesbian, gay, bisexual, or Trans.

The extent to which one is 'Out' varies according to population groups: the elderly (60's and over) being the most likely to conceal their sexual orientation or gender self-identification due to being brought up in times when to be gay for instance was a criminal offence. The 16 – 24 age group contrasts with this as the most likely to self-identify as LGB or T due to living in a much more accepting social & cultural environment where anti-LGBT views & behaviour are regarded as likely from the most ignorant and anti-social, and can be in some cases crimes subject to prosecution.

### **Dorset Bournemouth, Poole, Christchurch population statistics:**

All Persons (number based on **2011 Census statistics**)    765,680                    -                    **LGB or T: 45,940**

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### **Reporting incidents or hearing about incidents that may require reporting with the consent of the individual(s) victimised:**

ALWAYS be aware that compared to other forms of ASB homophobic banter, bullying and sometimes blackmailing type abuse and violence or threats of violence there are still for many community members issues on not being confident or prepared to report to the police, council, emp:

**Fear of the consequences of self-disclosing one is LGB or T** (for example causing loss of potential for promotion, etc. In one case a gay man being treated for a physical medical condition disclosed his sexual orientation to his consultant so that he could ask for help on other medical matters relevant to the disclosure: the until then over years excellent patient – consultant relationship then nose-dived and the patient thereafter struggled to maintain support for aspects of treatment concerning his main health condition – clearly the consultant was homophobic, for his conduct involved subsequent from the revelation indirect discrimination in the services he provided to the patient.

**Poor confidence in coming forward to the police or local authority on reporting anti-LGBT ASB:** public service organisations will have strong policy statement stances on respecting and implementing the law on anti-LGBT prejudice, ASB, bullying, but often because training and INDEPENDENT monitoring of services delivery is poor and/or lacking, frontline officers may often be ill-equipped or even unwittingly indifferent to how they handle anti-LGBT incidents of ASB.

*If you learn of an incident and for the reasons above the incident victim is undecided on taking action to report, it can be important to clarify that there are statutory protections on their identity being concealed/anonymity maintained by those they report to, AND that in reporting the incident they are likely to be helping others that have also been victimised/bullied.*

**You can report the incident via email – [contact.lgbtdorsetequality@gmail.com](mailto:contact.lgbtdorsetequality@gmail.com) -- bullet-point info (when, what, where, response of the victim / perceived victim to give their confirmed consent for supportive action) to the Network, and encourage the victim to contact us directly so we can support them as and where required on either putting in an anti-LGBT ASB incident report, or with the Network being informed such an incident report has been submitted.**

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Mental health impacts of prejudice, discrimination, and indirect discrimination: rejection by family members, parents, relatives, friends, acquaintances:

These impacts are serious and can involve moderate to severe depression, various psychological disorders of varying degrees of severity, disrupted sleep, suicidal thoughts and attempts at suicide (sections of the Trans community are the most prone to these), inability to concentrate, difficulty in holding a job, fear of walking in or visiting areas due to reputations for homophobic attacks in those locations, truancy from school or college due to bullying, major difficulties concerning family and interpersonal relationships, stress, anxiety, difficulty in forming loving relationships & partnerships. The biggest struggle LGB&T people have is coming to terms with not being heterosexual or not having binary (clear-cut male or female) gender.

Once one self-identifies as LGB or T the most severe emotional & mental health negative consequences are largely moved through positive self-affirmation and the ability to socialise, meet potential partners and form loving enduring relationships, and be connected with powerful supportive communities and a whole range of specific support groups and organisations – as well as seeing positive role models in the media and news.

**Sport (many but not all forms), education (schools and colleges particularly), rural areas, and the care sector are major settings where little or ineffectively challenged anti-LGBT prejudice, bullying, discrimination take place.** All of these settings offer particularly large threats and challenges, especially if one is not Out as LGB or T to oneself. Signposting to support groups in each of these areas is very important, as is knowing the processes and channels to use when bullied or threatened.

Communications & Engagement points:

**The starting and end points for all forms of communication & engagement with sexual & gender minorities (LGB&T) is that all members of the latter are first and foremost individuals,** as is the case with the broader general population that LGB&T people are also members of at general society level and often make outstanding contributions to society, the nation, the arts, sport, in the military & defence, science (Alun Turing, etc.)

**Some forms of religion, particularly in their fundamentalist, exclusivist, dogmatic forms have histories & values which are particularly discriminatory and prejudiced where sexual & gender minorities are concerned,** because the existence of both the latter call into question their world views on what a good believer must be and do. The oldest of the world cultures (culture is different to dogmatic religion in particular) are lacking in entrenched homophobic, biphobic, transphobic dynamics in terms of their main characteristics. This is also the case with late 20<sup>th</sup> Century to

contemporary cultural norms influenced by respect for human rights, respect for the individual, and respect for diversity

**Stereotype thinking is a common sign of anti-LGBT viewpoints** that could be overt, or non-intended and just unthinkingly absorbed from pre-equality & LGBT human rights times cultures and social perspectives held by non-LGBT people or those opposed to the rights and respect for the individuality of non-heterosexual & non-binary people. **A major example of this and important to note, politely but firmly challenge involves ‘one size fits all’ thinking and assumptions, such as all gay men are/must be ‘camp’ / effeminate, and all lesbians ‘butch’ / masculine**

As a recent example from the UK immigration ‘Hostile Environment’ in the decision of an Immigration Tribunal hearing by a tribunal judge indicated in as many words ‘you can’t really be gay because you don’t wear make up and talk & act effeminately’ -- LINK – 1970’s & 80’s style stereotyping of the two LGB and T communities is a major mistake, and characteristic of those holding openly or concealed/not publicly stated anti-LGBT values & perspectives.

Not all Trans community members are all on a path to having medical intervention to change their sex; there has always from the earliest time been androgyny (characteristics in terms of how the individual feels and regards themselves, their mode of dress, and how they hold themselves, express themselves, speak, etc.) and in modern terms the major Trans population of those who are ‘non-binary’ (regard themselves as neither specifically male or female).

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#### **Useful information guides:**

The following are useful to explore themes on LGB&T experiences and communication & engagement topics under the theses of Sport, General/workplace, Healthcare/NHS

**Network information resources page:** <http://lgbtdorsetequality.network/resources/> and <http://lgbtdorsetequality.network/mental-health-related-information/>

#### **Sport:**

**Just a Ball Game? Homophobia in Sport Survey** -- <http://www.justaballgame.co.uk/public/download/homophobia-in-sport-the-survey.pdf>

**Alan Mercel-Sanca - Sport BU ‘Homophobia in Sport: What’s the Score?’ research project information resource** -- <http://ahs-exhibition2012.co.uk/pdfs/Bournemouth%20University%20Homophobia%20In%20Sport%20Report.pdf>

**Stonewall: Training Guide:** Educating staff about lesbian, gay and bisexual equality -- [https://www.stonewall.org.uk/sites/default/files/training\\_guide.pdf](https://www.stonewall.org.uk/sites/default/files/training_guide.pdf)

**Healthcare/NHS** -- <https://www.stonewall.org.uk/sites/default/files/stonewall-guide-for-the-nhs-web.pdf> and [https://www.stonewall.org.uk/sites/default/files/healthcare\\_equality\\_index\\_2015.pdf](https://www.stonewall.org.uk/sites/default/files/healthcare_equality_index_2015.pdf)

**Trans & Non-Binary** -- All About Trans: <https://www.allabouttrans.org.uk/about/support-organisations/> and

Communi-T: <https://communit.home.blog/about-us/>