Sexual orientation research review 2008

Martin Mitchell, Charlie Howarth, Mehul Kotecha and Chris Creegan

NatCen
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Equality and Human Rights Commission Research Report Series

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Research Team
Equality and Human Rights Commission
Arndale House
The Arndale Centre
Manchester
M4 3AQ

Email: research@equalityhumanrights.com
Telephone: 0161 829 8500
Website: www.equalityhumanrights.com

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ACKNOWLEDGEMENTS

The authors of the report are very grateful to all those involved with the production of the review. We would like to thank Susan Botcherby, David Darton and Jackie Driver at the Equality and Human Rights Commission for commissioning the review and for their advice and support during its completion.

We would also like to express our thanks to Julie Fish, Brian Heaphy, Ruth Hunt, Sally McManus, Surya Monro, Ian Rivers and Alison Parken for their helpful comments and input into aspects of the review. Their contributions were invaluable and gratefully received.

Our thanks also go to other members of the Qualitative Research Unit who shared the responsibility for drawing together information and references during the early stages of the review, including Meg Callanan, Lindsey Dawson, Sue Johnson and Helen Ranns.
### ABBREVIATIONS AND ACRONYMS

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<th>Acronym</th>
<th>Full Form</th>
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<tr>
<td>ACAS</td>
<td>Advisory, Conciliation and Arbitration Service</td>
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<td>BAAF</td>
<td>British Association of Adoption and Fostering</td>
</tr>
<tr>
<td>BCSP</td>
<td>Birmingham Community Safety Partnership</td>
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<tr>
<td>BME</td>
<td>Black and minority ethnic</td>
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<tr>
<td>CPS</td>
<td>Crown Prosecution Service</td>
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<td>CSCI</td>
<td>Commission for Social Care Inspection</td>
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<tr>
<td>DCLG</td>
<td>Department of Communities and Local Government</td>
</tr>
<tr>
<td>DFID</td>
<td>Department for International Development</td>
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<tr>
<td>DTI</td>
<td>Department of Trade and Industry</td>
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<tr>
<td>the Commission</td>
<td>Equality and Human Rights Commission</td>
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<tr>
<td>GLADD</td>
<td>Gay and Lesbian Association of Doctors and Dentists</td>
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<tr>
<td>IHS</td>
<td>Integrated Household Survey</td>
</tr>
<tr>
<td>LGB</td>
<td>lesbian, gay or bisexual</td>
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<tr>
<td>LGBT</td>
<td>lesbian, gay, bisexual and transgendered</td>
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<tr>
<td>LLGBC</td>
<td>Leicester Lesbian, Gay and Bisexual Community</td>
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<tr>
<td>NATSAL</td>
<td>National Survey of Sexual Attitudes and Lifestyles</td>
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<tr>
<td>NCRC</td>
<td>National Centre for Social Research</td>
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<tr>
<td>ONS</td>
<td>Office for National Statistics</td>
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<tr>
<td>PSHE</td>
<td>Personal Social and Health Education</td>
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<td>TUC</td>
<td>Trades Union Congress</td>
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FOREWORD

Introduction

NatCen was commissioned to undertake a review of evidence on sexual orientation in the spring of 2008. Recognising the growth of policy research in this area, the Equality and Human Rights Commission wanted to ensure that it had an up to date and comprehensive picture of evidence relating to lesbian, gay and bisexual people to inform its thinking and provide a base to build on as new evidence emerges. The changes in legislation, policy and practice across the equalities and human rights sphere in this decade are well documented and sexual orientation is no exception. These changes have been accompanied by new research and evaluation responding to and anticipating new developments.

By definition, any evidence review is out of date as soon as the cut off date for what can be included has passed. NatCen was commissioned to incorporate evidence up to and including 2008. However, since the review was completed there have been several significant legal changes and a raft of new research publications.

Legislative changes

On 27 April 2009, the Government published the landmark Equality Bill. This brings together the three existing equality duties (gender, race and disability) into a single Public Sector Equality Duty and extends it to cover sexual orientation for the first time. This means that in law, public bodies will need to
consider the needs of, and promote equality for lesbian, gay and bisexual people who are employees or use their services. The Bill should become law in 2010 and is widely considered to be the most significant piece of legislation yet aimed at securing greater equality for lesbian, gay and bisexual people.

The Human Fertilisation and Embryology Act came into effect in April 2009, offering legal recognition to both same-sex parents and removing barriers for lesbians accessing regulated fertility treatment. This was followed by The Offences (Aggravation by Prejudice) (Scotland) Bill, passed on 3rd June 2009. When the Act comes into effect in 2010, it will extend the legislation in Scotland to cover crimes motivated by prejudice on the grounds of sexual orientation, in line with the rest of the UK.

**New research evidence**

Against this backdrop new evidence is emerging all the time. In the education arena for example, Stonewall has continued to shed light on homophobic bullying with the publication of The Teachers' Report: Homophobic Bullying in Britain's Schools (Guasp 2009). While the Equality Challenge Unit has published important new research on the experiences of lesbian, gay, bisexual and trans staff and students in higher education (Valentine et al 2009). New deliberative research commissioned by the Advisory, Conciliation and Arbitration Service and the Chartered Institute of Personnel and Development, and undertaken by NatCen, considers the management of sexual orientation and religion and belief in the workplace following the introduction of employment regulations in 2003 (Dickens et al 2009).
Two further reports from Stonewall provide evidence in relation to two less researched areas, sport and migration, with the publication of Leagues Behind: Football's failure to tackle anti-gay abuse (Dick 2009) and City Lights, a study of Scottish LGBT migration patterns (Stonewall Scotland 2009). Also a new book from Ryan-Flood (2009) builds on previous research on lesbian motherhood.

Looking beyond the UK, the EU Fundamental Rights Agency published its new report Homophobia and Discrimination on Grounds of Sexual Orientation and Gender Identity in the EU Member States: Part II - The Social Situation (FRA 2009). The report, commissioned by the European Parliament, finds that discrimination, harassment and violence against lesbian, gay, bisexual and transgender people is widespread throughout the EU. It builds on an earlier report which contained a comparative legal analysis of the situation in the EU Member States (FRA 2008).

This is by no means an exhaustive list of new research, but it highlights the continued and welcome growth of evidence on the impact of sexual orientation on equality outcomes and the experience of discrimination.

**Public data on sexual orientation**

A key finding of this review is that the absence of reliable statistical data on sexual orientation is a major obstacle to measuring progress on tackling discrimination and inequality. Here too there have been important
developments in recent months. Though the 2011 Census will not include a question on sexual orientation, in December 2008, the Office for National Statistics announced that in future their major social surveys, in which participation is voluntary, will include a question on sexual identity. This was a landmark decision. For the first time, people who are LGB will be given the opportunity to identify their sexual orientation in major government surveys. From January 2009, ONS will be introducing a sexual identity question within the constituent surveys that make up the Integrated Household study (IHS): Annual Population Survey, Labour Force Survey, English Housing Survey, Living Costs and Food Module (formerly Expenditure and Food survey), General Lifestyle Module (formerly General Household survey), Life Opportunities Survey and Opinions Module (formerly Omnibus Survey). The inclusion of sexual identity in the IHS represents a vital step forward even though national LGB data may not be available until 2010 and regional level data will be unavailable for a number of years after that.

In fact new research commissioned by the Commission itself (Ellison and Gunstone 2009) involving an online survey of over 5000 respondents revealed that the majority of the sample (75 per cent) think it is acceptable to ask people about their sexual orientation in large national surveys. And the majority of respondents (78 per cent) would support, or do not mind the introduction of, a non-compulsory question on sexual orientation in the 2011 Census. The research also provides new and wide ranging evidence on attitudes to lesbian, gay and bisexual people. These issues are discussed in more detail in a research paper published by the Commission (Botcherby and Creegan 2009).
EXECUTIVE SUMMARY

Background

In January 2008*, the Equality and Human Rights Commission commissioned the National Centre for Social Research (NatCen) to review current research and evidence on sexual orientation in order to inform future policy development and strategy in relation to sexual orientation in England, Scotland and Wales.

Coverage and approach

The review includes consideration of quantitative and qualitative sources of data, evidence on a wide range of substantive issues and published and unpublished material including policy reviews, guides and best practice literature. It was conducted by the synthesis and analysis of previous research reviews and audits and by an extensive literature search and review of subsequent developments and other identifiable gaps in evidence.

Key messages

The social and political landscape

Over the last 30 years, there has been a shift in the focus of research from making the case for minority rights, to exploring lesbian, gay or bisexual (LGB) people’s experiences within communities and organisations. More recently there has been a growing emphasis on mapping needs and to a lesser extent on evaluating service provision. Research is now required that:
• moves beyond needs to developing a greater understanding of the organisational factors that prevent those needs from being met;
• systematically maps targeted provision for LGB people across services and sectors at both national and subnational levels;
• evaluates the impact of mainstream policy and practice on outcomes for LGB people in health, education and other areas.

The legislative and policy context
The introduction of new legislation enshrining rights for LGB people and the acknowledgement of sexual orientation as a key equality strand provide a major impetus for the future direction of research. Specifically, these developments create the opportunity to integrate the investigation of LGB people’s experiences within mainstream social policy research. This presents a range of challenges including:
• creating robust evidence about the impact of new equality legislation on the lives of LGB people and attitudes to sexual orientation;
• developing a clear understanding of the relationship between legislative change and the formulation and implementation of policy;
• investigating the relationship between the seven equality strands and identifying the implications for promoting good relations between LGB people and other communities.

Devolution and constitutional change
A series of devolution reforms have established new political institutions in Scotland and Wales with specified duties and responsibilities on equality.
These have impacted on policy development and the focus of research, which presents implications for research on sexual orientation including:

- the chance for research to focus on specific developments within countries where appropriate;
- the opportunity to compare and contrast data from England, Scotland and Wales;
- the need to ensure consistent approaches to data collection on the impact of legislation.

Commissioning, funding and dissemination

There is a continuing nervousness and reluctance to address sexual orientation in social policy research. Historically research on sexual orientation has tended to be generated from the ‘bottom up’ and from within the LGB research community. There is now a need for a strategic approach that includes:

- explicit acknowledgement of sexual orientation within funding strategies;
- proactive commissioning of research on sexual orientation by UK governments and other key research commissioners including the major research foundations;
- a central resource for dissemination of research evidence and information about policy and practice.
Measurement and statistical data

The absence of robust statistical data on sexual orientation presents a major obstacle to measuring progress on tackling discrimination and inequality. This is a complex and sensitive issue both politically and methodologically. These difficulties need to be overcome in the interests of developing a reliable and credible body of evidence on sexual orientation. Specifically there is a need for:

- robust baseline statistical data underpinned by an agreed approach to measuring the prevalence of different sexual orientations within the general population;
- routine inclusion of sexual orientation as a demographic characteristic on major government surveys and other longitudinal research;
- a proactive approach to monitoring sexual orientation within organisations and communities in order to provide comparative data.

The focus of research

The social, political and legislative developments that have taken place provide a fresh incentive to extend and refine the focus of research, which historically centred on individual experiences of discrimination, albeit within a range of organisational or community contexts. There is now a need to prioritise research that:

- explores changing forms and experiences of discrimination;
- sheds light on institutionalised responses to sexual orientation and the consequences of a hetero-normative lens on individuals and households;
identifies new ways of challenging homophobia and heterosexism;

promotes and enables evidence-informed policy in relation to sexual orientation;

addresses the needs of service providers and practitioners whose responsibilities are shaped by the new legislative framework.

**Diversity and difference**

The increasing acknowledgement of diversity within the LGB population has implications for the focus and design of research. For example, greater consideration needs to be given to when LGB population data should be aggregated and when a specific focus on subsections of the LGB population is required. Specifically, consideration needs to be given to:

- commissioning research that fills gaps in knowledge about specific subsections of the LGB population;
- ensuring that future research on the LGB population as a whole pays appropriate attention to exploring, analysing and reporting diversity and difference;
- understanding attitudes to sexual orientation in the context of a diverse society.

**Doing research on sexual orientation**

The review demonstrates growing sophistication and innovation in the field of sexual orientation research. Researchers have responded to the challenges of conducting research including the considerable complexity of sexual identity
and the methodological challenges this poses. Future priorities include the need for:

- improved sampling and recruitment in both quantitative and qualitative research;
- greater transparency and consistency in audience appropriate reporting of research methodology;
- evaluation of the use of new approaches, particularly online methods;
- ongoing review of the ethics of researching sexual orientation;
- consideration of the value of participatory approaches particularly in relation to key sub-populations.

**Key findings**

**Measuring sexual orientation**

- The absence of robust and reliable data on the size of the LGB population and the prevalence of different sexual orientations has implications for the measurement of inequalities and for monitoring progress in tackling them.
- Current evidence does not suggest that the inclusion of a question on sexual orientation would affect overall response rates to the Census or social surveys.
- A sexual orientation question on the Census would help to promote recognition of sexual orientation as an equality strand, address issues of parity and citizenship and meet user needs.
- The establishment of a common framework to define and measure sexual orientation would facilitate the collection of consistent and comparable data.
• A range of different approaches has been used in assessing the size of the LGB population nationally, and estimates vary between 0.3 and 7 per cent. This lack of consistency suggests that such estimates should be treated with considerable caution.

• There is also a lack of reliable evidence about the size of the LGB population at a sub-national or local level, with local estimates tending to be based on extrapolation from national surveys.

**Attitudes to LGB people**

• A large-scale, longitudinal survey research is needed to measure changes in attitudes in Wales, to match the one-off attitudinal surveys in Great Britain and Scotland. Particular attention needs to be paid to delineating attitudes to bisexual people.

• More qualitative exploration is required into why people hold negative attitudes to LGB people and how these are reflected in policies and practices.

• Such exploration could shed light on the role that the media, religious bodies and other institutions play in creating, reinforcing and changing social attitudes. Crucially, very little is known about the impact of legislation on attitudes.

**Families and relationships**

• The introduction of legislation recognising the partnership and parenting rights of LGB people provides the basis for reframing and shifting the focus of the research agenda in this area. Whilst the need for data on the
specific experiences of LGB people as a key sub-population will remain, there is now a need for baseline and comparative data on LGB families and relationships.

- The absence of baseline statistics on patterns of same-sex relationships and LGB families prevents robust contextualisation and comparison of LGB people’s experiences of same-sex relationships, households, experiences of family life and LGB parenting within the population.

- Information is lacking in three key areas: relationship trends and patterns amongst same-sex couples; patterns of households and support among LGB people; and the number of households headed by LGB parents/the number of children in families with LGB parents. There is a particular need for robust longitudinal studies on LGB parenting and outcomes for children.

**Education**

- Policy and practice on homophobic bullying and support for LGB young people remains a key research priority, and systematic evaluation is needed to assess the impact of policy and provide evidence on good practice. Research in this area needs to be considered in the context of recent changes in the legislative context.

- Discrimination and bullying among peers could be linked to absenteeism and under-achievement, according to qualitative research. Further research is needed to develop a more rigorous understanding of the relationship between the educational experiences and outcomes of LGB
children and young people and to explore ways of tackling discrimination and bullying.

- Research is needed concerning the inclusion of sexual orientation in the curriculum. The experiences of LGB students and staff in further and higher education and teaching on sexual orientation are also areas that relatively little is known about.

- Further research might survey the experiences and career paths of teaching and support staff in all levels of education, to complement the significant body of qualitative work on the experiences of LGB teachers in schools.

**Employment**

- The absence of a reliable LGB sample frame, a lack of a meaningful comparative baseline with heterosexuals, the use of non-random samples and small sample sizes has limited research concerning the experiences of LGB people at work including patterns of discrimination and harassment. Case studies and qualitative work have tended to focus on ‘good practice’ or larger employers or the description of experiences without comparison to those of heterosexual workers.

- There remains a lack of reliable statistical information on the occupations, incomes and career paths of LGB people against which meaningful comparisons can be made. This is particularly true of such data at a sub-national level.
• Job opportunities may be limited by fears of discrimination and harassment amongst LGB people, but very little is known about the relationship of sexual orientation to reduced life opportunities or employment outcomes.

• While homophobia remains a key issue for LGB people in the workplace, recent evidence highlights that even where overt homophobia appears not to be a factor, LGB people face considerable challenges when negotiating their sexual identity with managers, colleagues, customers and clients.

• The need remains for more robust evidence on exemptions from the sexual orientation employment regulations for the purposes of organised religion, even though fewer issues have arisen in this area than anticipated.

• Little is known about the impact of the employment regulations for LGB people generally, particularly across different sectors and different sizes of employers – most existing data was collected before recent legislative changes. Subsequent research on cases taken since the introduction of the regulations provides important insight into the nature of discrimination faced by individual LGB employees and the handling of cases within tribunals and courts.

Health and social care

• Despite some variability in quality, transparency and reliability, there have been significant improvements in survey research in this area. However, qualitative work is needed to explain why health inequalities and outcomes exist and to inform appropriate health and social care interventions.
• The absence of adequate baseline data on sexual orientation at national and local levels means that there is continued reliance on convenience and opportunity sampling via community groups/organisations, commercial establishments and the Internet.

• A significant barrier to the development of provision and the better targeting of resources is the lack of patient statistics on sexual orientation. Disclosure of sexual orientation remains a problematic issue for LGB people because of continuing fears about the impact of disclosure. Research is needed to address the feasibility, appropriateness and ethics of recording such information and the likely impact of doing so on subgroups within the LGB population.

• Sexual orientation is rarely explicitly mentioned in mainstream policies and practice guidance outside of the fields of HIV and gay men’s sexual health. Future research might examine the extent to which sexual orientation is incorporated into mainstream policies and the impact that the inclusion or exclusion of LGB health concerns has on care delivery and health outcomes.

• Most areas of LGB health and social care remain under-researched relative to the general population. Although there is a historical body of work on gay and bisexual men and HIV and/or sexual health and a growing body of research in relation to lesbian and bisexual women’s health, more research is required in other areas such as physical health, mental health and social care.
Local authorities

- Despite useful case study research on local authorities, there is still the need for a more comprehensive look at local authority policy and practice, particularly in the context of new legislative developments (for example, access to adoption and fostering and housing for same-sex couples).
- Evidence in Scotland suggests that there may be disparities in LGB provision, but to date there has been no systematic survey of local authority policy and practice in England and Wales.
- While some local authorities have conducted mapping exercises of the LGB communities and needs, no national study has yet been undertaken.

Housing

- A useful body of research has begun to shed light on the housing experiences of LGB people. A significant gap, however, is the continuing absence of reliable baseline data on sexual orientation.
- There is a need for research to systematically map the policies and practices of housing providers. Such research needs to explore the impact of changes in legislation and guidance on access to, and experiences of, housing provision for LGB people.

Crime and policing

- Estimates of the level of homophobic hate crime have improved considerably but there is still an absence of official estimates in Britain, and estimates for Scotland and Wales could be improved through better comparisons to England.
• Evidence suggests the rate of hate crime in Britain has increased but research is needed into whether this is a consequence of better reporting, increased homophobia or both. We also know relatively little about the motives of perpetrators of homophobic hate crimes and why some people may be more likely than others to be perpetrators.

• Policies and practices of police forces in Wales vary considerably, but less is known about patterns in England and Scotland.

• There is an absence of reliable official data on the incidence of same-sex domestic abuse, although considerable steps have been made in estimating its level and understanding its nature. A data gap also exists on how the police and criminal justice system handle same-sex domestic abuse. This also applies to the experience and handling of male rape.

**Media, sports, arts and leisure**

• Research suggests that television under-represents or portrays negatively LGB people, perpetuating lesbian and gay stereotypes. Further research may, therefore, be needed in terms of the representation of LGB people in the media and its effects, including examination of newspapers, radio and new media forms such as computer games and the Internet.

• Further research is needed on the experiences of LGB people in sport, including the affect of the reinforcement of heterosexual stereotypes on levels of participation, both in sport generally and in relation to choice of sporting and leisure activities according to sexual orientation.

• There also appears to be a lack of research into the relationship between sexual orientation and the arts. Research here might prioritise examination
of the level of representation of LGB people in the arts, the way in which they are portrayed and general access to the arts, culture and leisure activities for LGB people and their families.

- Evidence suggests that LGBs often need to separate themselves socially from predominantly heterosexual environments in order to create relatively safe, gay-friendly environments. Research in this area could investigate the positive and negative impacts arising from the creation of separate gay-friendly LGB social spaces. For example, in relation to the impact on local economies and the expenditure of LGB households.

**Participation and representation**

- LGB people perceive barriers in various forms of democratic participation, but the nature of such barriers requires further exploration.

- We found little research on investigating the barriers for LGB people becoming involved in their local communities, apart from suggesting that local authorities are not sufficiently engaging their LGB communities and research on barriers to becoming a democratic representative.

**Diversity in the LGB population**

- The amount and quality of research that specifically focuses on sub-groups within the LGB population varied. Virtually all remain under-researched.

- Research on bisexual people was very limited. The issues, inequalities and discrimination they face are an area still requiring specific attention.
• The experiences of lesbians and bisexual women were still underexplored compared to gay men. The impact of gender was also not always systematically explored in general research on sexual orientation.

• There is still a lack of research on BME LGB people, particularly those outside the black, South Asian and Irish communities. Important themes of alienation and dissonance were largely underdeveloped.

• Evidence suggests that BME LGB people are more likely to suffer from homophobic crimes and abuse; it does not explain why this is the case.

• The literature indicates that there are structures in place within black communities that enable LGB people from these communities to thrive. However, it does not go on to explore in detail what these structures are and how and why they enable LGB people to thrive.

• LGB disabled people are one of the most under-researched sub-populations. The studies that have been done mainly focus on the double discrimination that people with learning disabilities face and their desexualisation, leaving the experiences of other LGB disabled people unexplored.

• Age was relatively well discussed in the literature, both in terms of young people and older people. Particular stages in the life course, transitions from youth and into old age and the experiences of trans LGB people require more focused attention.

• A small but significant body of research had begun to develop in relation to LGB people of faith and their experiences of organised religion. But this tends to focus primarily on LGB Christians and Muslims.
• The impact of class and locality on discrimination are also particularly under-researched, as is that of refugee status.

Methodological issues

• Research still tends to aggregate the LGB population. This can restrict and marginalise the experiences of sub-groups. The experiences of bisexual people remain largely invisible.

• There have been significant improvements in the sampling and recruitment of research participants in both quantitative and qualitative research. However, it remains the case that all survey research about the LGB population continues to be susceptible to some criticism because the absence of accurate population statistics means that it is not possible for researchers to use random probability sampling, which means that it is impossible to make inferences about the wider population.

• Greater transparency and consistency in reporting research methods is required. This is particularly important given the sampling and recruitment challenges presented by researching LGB populations. While reporting needs to be audience appropriate, there needs to be wider discussion about what this means.

• Researchers in this area have used a wide variety of methods. Principal areas requiring attention are the need for large-scale baseline data and the systematic evaluation of the use of new methods, particularly web-based surveys, online recruitment and email communications.

• There is limited discussion of ethical conduct and review. Significant areas requiring further research and discussion are privacy in the changing
social and legal context and the impact of the sex and/or sexual orientation of researchers on the research process, especially interviewing.

- Though the use of LGB organisations and experts as advisors has been widespread, the use of participatory approaches has been more limited.

**Recommendations and initiatives**

- In Scotland there is a national strategy to challenge prejudice and discrimination through the LGBT (lesbian, gay, bisexual and transgendered) Hearts and Minds Agenda. It is less clear whether a coordinated strategy exists in England and Wales.

- Difficult relations are identified between LGB people and people of faith as well as difficult experiences for LGB people of faith. Tensions between LGB people and other groups are less well documented.

- Capacity may need to be built in the LGB community in order to facilitate active involvement in consultation and furthering of equality agendas.

- Clear statements on equality by organisations, equality audits and monitoring of policies are all recommended as ways to promote the equality agenda in relation to sexual orientation.

- Awareness training and good practice guidance are also recommended ways to promote the equality agenda. However, a need was identified to evaluate the effectiveness of awareness training and to show examples of good practice.
1 INTRODUCTION

1.1 Aims and objectives

In January 2008, the Equality and Human Rights Commission commissioned the National Centre for Social Research to conduct a review of research and evidence on sexual orientation.

The aim of the review was to establish a clear and coherent picture of the existing evidence base in relation to sexual orientation in England, Scotland and Wales in order to inform future policy development and strategy. It focused on six key objectives:

• to examine recent and relevant sources of quantitative and qualitative data on the lesbian, gay and bisexual population;
• to discuss the methodological implications of research concerning lesbian, gay and bisexual people;
• to examine recent and relevant policy and practice documentation relating to sexual orientation;
• to establish what gaps in evidence exist and consider priorities for future research;
• to consider the policy and practice implications of existing evidence for key stakeholders;
• to consider ways in which the quality of data on sexual orientation can be improved.
1.2 Coverage and approach

The review has included consideration of:

- quantitative and qualitative sources of data and the methodological challenges associated with generating and integrating different types of data. This included primary research, secondary analysis and policy evaluations (both process and impact);

- evidence on a wide range of substantive issues including attitudes to lesbian, gay and bisexual people, the nature and extent of discrimination, the demographic characteristics and circumstances of the lesbian, gay and bisexual population, lesbian, gay and bisexual identities across the life courses, multiple and intersecting identities, legislative, service provision including impact and outcomes and participation and representation;

- published and unpublished material including policy reviews, guides and best practice literature.

It comprised three key elements:

- the synthesis and analysis of previous research reviews and audits;

- a literature search and review of subsequent developments and other identifiable gaps in evidence in previous reviews and audits;

- peer review by key policy and research informants.

This is not a ‘systematic review’. However, it does seek to meet the above objectives as comprehensively as possible. Its primary focus is on the most recent evidence available. With a few exceptions this dates from 1995 onwards. Although its purpose is to create a baseline of current evidence in
England, Scotland and Wales, some references are made to international (mainly North American) research.

1.3 Context

The review took place following a period of considerable legislative change. Recent changes include the introduction of the Equality Act (Sexual Orientation) Regulations (2007), the Civil Partnership Act (2004) and the Employment Equality (Sexual Orientation) Regulations (2003). Other specific changes have taken place within England, Wales and Scotland which for the first time recognise same-sex relationships. The Scottish Government and the Welsh assembly also have specific responsibilities and duties in relation to equality.

These changes together with the creation of the Equality and Human Rights Commission (the Commission) make such a review timely. Sexual orientation is one of six equality strands that the Commission is responsible for and it has commissioned a series of research reviews where it is known that there are gaps in evidence and that more comprehensive evidence is needed to frame and inform public policy.
2  MEASURING SEXUAL ORIENTATION – DEFINITIONS
   AND SIZE

2.1  User need for national and local statistics

2.1.1  Limited amount of robust and reliable statistical data

The changes described above have provided a new impetus to measure the extent of the lesbian, gay and bisexual population in the UK in order to provide a baseline to measure inequalities related to sexual orientation. Previous reviews have found that, although there is a large body of qualitative and small-scale survey work describing the experiences and sexual behaviours of LGB people (see later chapters), there is a lack of robust statistical evidence detailing the size or characteristics of the lesbian, gay and bisexual population or the prevalence of specific inequalities related to sexual orientation (Aspinall and Mitton 2008; McManus 2003; Purdam et al 2007). For example, during the final regulatory assessment for the Civil Partnership Act, the Department of Trade and Industry (DTI) found ‘very little reliable data on the size of the LGB population’ (DTI 2003, p. 13). There has also been a lack of consistency in definition of the concept being measured, the questions asked and the response categories used in the surveys that have been undertaken (Betts 2008). This lack of robust statistical evidence has largely prevented any meaningful comparison of the level of inequalities faced by LGB people relative to heterosexual people (or indeed differences between lesbians and gay men), particularly for equality monitoring and service development at local and organisational levels.
2.1.2 User need in relation to the Census and social surveys

The Office for National Statistics (ONS) was made aware of a strong user requirement for information on ‘sexual identity’ through the consultation of the 2011 Census (ONS 2008). It announced in spring 2006 that a question on sexual identity was not considered to be suitable for inclusion in the next Census. There were two key reasons for this. Firstly it was felt that there might be a detrimental effect on response rates due to the sensitive nature of the subject of sexual orientation and possible respondent concerns about confidentiality and disclosure in the context of a compulsory Census. Secondly there were doubts about the accuracy of data produced by a question or questions that had not been adequately tested in terms of public understanding of the concept of sexual orientation and the administration of such a question (for example, interviewer or self-administered surveys). It is worth noting that similar issues were raised in relation to the proposed inclusion of questions on religion and belief prior to the 2001 Census.

Instead, ONS decided to trial a question on sexual identity in government social surveys and to establish the ONS Sexual Identity Project. Further information about the progress of this project can be found at but key work to date has involved conceptual clarification, reviews of existing survey questions on sexual identity, question development and testing (qualitatively and quantitatively) and survey field trials. The aim is to produce an acceptable question to be added to the Integrated Household Survey (IHS) and to allow for experimental estimates of the size and characteristics of the LGB
populations to be produced and evaluated from 2009 to 2011. The first set of estimates of the LGB population are planned for 2010. Reliable local authority data could be provided by 2012 for some larger local authorities or authorities with significant LGB populations. However, despite the Sexual Identity Project representing a significant development, the absence of a question on sexual orientation on the Census has been questioned on both methodological and political grounds (for example, Purdam et al 2007; Aspinall and Mitton 2008). It has been argued that the absence of Census data has a detrimental effect on the work of public bodies (for example local authorities, primary care trusts, police forces) and their ability to ensure inclusive service delivery.

2.1.3 Methodological issues in relation to Census and surveys

A key problem relating to measuring the size of the LGB population and providing estimates of prevalence is that sexual orientation remains a sensitive subject, with many people being unhappy to answer questions about their sexual orientation. In this context, methodological issues relating to whether a question on sexual orientation should be included on the Census tend to focus to the impact on overall response rates of asking such a question and whether the sensitivity of asking it will lead to incomplete and inaccurate data.

Impact on overall response rate to Census and surveys

Evidence from surveys generally supports the view that asking a question on sexual orientation does not affect the overall response rate to surveys. For example, in his review of UK experiences of administering survey questions on sexual identity and sexual orientation in the UK, Betts (2008, p. 4) notes,
‘there was no evidence to suggest that survey response rates had been affected by the inclusion of a question on sexual identity’. In their trial of interviewer-administered questions on sexual identity on the Omnibus survey, ONS found that ‘no respondents dropped out of the interview immediately after being asked this question thus allaying fears that it could have a detrimental effect on response rate’ (Taylor 2007, p. 4). Aspinall and Mitton (2008, p. 61) also observe that, although similar concerns were expressed in the US in relation to inclusion of a question about sexual orientation in large-scale studies, such as the Nurses’ Health Study, they ‘proved to be unfounded’. An exception to this overall pattern was a small-scale postal survey by the General Register Office Scotland that, in a split test, found a 31 per cent response rate where a question on sexual orientation was included (see Aspinall and Mitton 2008, p. 62). Overall, however, the evidence does not appear to support a significant impact on response rates to surveys when a question on sexual orientation is included.

**Impact on response rates to individual questions**

The impact of asking questions on sexual orientation on response rates to individual questions is less clear cut. In particular, concerns have been expressed about high rates of refusal to questions on sexual orientation. Aspinall and Mitton (2008, p. 67) note that this concern proved persuasive in the decision not to include a question on sexual orientation in the UK 2011 Census. The finding by the General Register Office for Scotland in their small-scale postal test that the percentage of respondents reporting non-heterosexual orientations (2.2 per cent) was outnumbered by the percentage of respondents selecting ‘prefer not to say’ (8.5 per cent) and not answering
the question (6.2 per cent) was significant in their decision not to include such a question in further Census tests (Aspinall and Mitton 2008, pp. 61–2). Betts (2008, p. 29) also reports that feedback from the Scottish Census Small Scale Test indicated that 11 per cent of respondents were ‘very unhappy or unhappy’ answering the question on sexual identity compared to fewer than 5 per cent for most questions. More recently, ONS found that more people still chose the ‘prefer not to say’ response ‘than the three minority groups combined’ in their Omnibus trials of questions on sexual identity (Taylor 2007, p. 4). However, it would be wrong to assume that response rates to questions on sexual orientation are only affected by concerns about privacy or objections to being asked the question.

Mode of administration

Notably, refusal rates and ‘prefer not to say’ responses have been found to be lower when questions are interviewer-administered rather than self-administered (Betts 2008, p. 29), suggesting that the decision to include a question on sexual orientation on the Integrated Household Survey, rather than the Census, may be appropriate given that the former is interviewer-administered. Lower refusal rates and ‘prefer not to say’ responses on interviewer-administered surveys are thought to relate to the fact that interviewers could give help in understanding the question and that ‘objecting to being asked and objecting to giving an answer did not necessarily correspond’ (Betts 2008, pp. 4–5). However, the fact that refusal rates have remained high in self-completion surveys compared with interviewer-administered tests suggests that there may still be issues about ‘invasion of privacy’ (Betts 2008, p. 29). From an ethical point of view this suggests that a
self-completion approach may be preferable because it provides a greater opportunity to refuse to respond. The self-completion approach of the Census would therefore be more preferable ethically, even though it may potentially mean less complete and accurate data; although clearly this would have a negative impact on the decision whether to include a question on sexual orientation in the Census. However, there may be other means to address the completeness of data that would mitigate such a decision (see below). It would also be wrong to assume that refusal rates relate only to mode of administration of surveys or solely to issues of privacy and disclosure.

**Reasons for ‘prefer not to say’ responses**

Exploration of the reasons why people use ‘prefer not to say’ responses indicate not only that privacy and objections to being asked a question on sexual orientation are key issues but also that other issues related more to methodological approach and understanding of the purpose of the question are important. In their trials of a question on self-perceived sexual identity on ONS Omnibus survey, follow-up with people who selected the ‘prefer not to say’ option suggested that they chose this option because:

- ‘it was wrong to ask such questions because it could be used to pre-judge the responder;
- such information was no one else’s business;
- did not believe the assurances of confidentiality;
- felt uncomfortable responding to this when the interviewer was female (male respondent);
• needed more information about the reasons for the question’ (Taylor 2007, p. 5).

This suggests that ‘prefer not to say’ responses could be reduced by better explanation about why information on sexual orientation needs to be gathered. They could also be reduced by clearer information about what confidentiality means in terms of the storage and presentation of data. Both of these might be achieved by oral or written information. The issue of gender of interviewer would be removed by a self-completion approach such as that used in the Census. It is also important to stress that those who answer ‘prefer not to say’ may well be heterosexual and no inference can be drawn that those likely to answer ‘prefer not to say’ are lesbian, gay and bisexual people who are not confident enough to respond to the question.

Improved response also related to whether the questions on sexual orientation are included with other questions on socio-demographic factors and whether the question is made to stand out in other ways, for example, by being administered differently. During the ONS Omnibus trial ‘both interviewers and respondents believed that this question should not be treated differently from other sensitive questions’ and that it ‘stood out’ because it was not in a section of the interview with similar questions and was administered differently (Taylor 2007, p. 4).

Other findings also question whether answering ‘prefer not to say’ is related to objection to the question and concerns about privacy or if other factors are
involved. For example, ONS also found that such responses related to factors including having no educational qualifications, belonging to a lower socio-economic group or coming from a deprived neighbourhood. Taylor (2007, p. 5) observes that those people answering ‘prefer not to say’ to the questions on sexual orientation were also less likely to consent to be recontacted for further research but that further analysis showed that this relationship was ‘mediated by deprivation rather than being causative’. She cautions that further investigation is needed for this finding to be confirmed.

2.1.4 Political and moral context

In addition to methodological issues there are also a set of issues that relate to the political and moral context in which questions about sexual orientation are asked and the impact on levels of completeness and accuracy of prevalence data.

Measuring ‘out’ LGB sexual orientations

Some authors argue that measures of the prevalence of different sexual orientations will always take place within a particular prevailing social and moral context, with estimates affected by the level of acceptability of asking questions of sexual orientation and the level of acceptability of non-heterosexual sexual orientations. In this context, responses to questions on sexual orientation can act as measures of the degree of acceptability of different sexual orientations and the extent to which LGB people are prepared to express their sexual orientation openly in relation to specific policies and social circumstances. Purdam et al (2007, p. 4), for example, suggest responses to questions on sexual orientation may indicate reactions based on
'pride and self-confidence’ as well as ‘political anger, moral/religious guilt’ or feelings of suspicion about the ‘political motives of researchers’. In this sense responses to questions on sexual orientation can act as a useful measure of ‘out’ (or open) LGB sexual orientations, especially where responses in relation to the prevalence of different sexual orientations are measured over time. Indeed, it is possible that concerns about privacy and fears of disclosure of one’s sexual orientation have sometimes been overplayed. In his reviews of UK surveys that asked questions on sexual orientation Betts (2008, p. 4) found that ‘there was little evidence of respondent concern about privacy, that is, the interviewer or any other person present knowing which answer had been given’. At the same time, where respondents do have concerns about disclosing their sexual orientation, some have begun to develop models for accounting for under-reporting or misreporting that could be used to address these issues (for example, Berg and Lien 2006).

Changing social context of the acceptability of measuring sexual orientation

Others have also pointed to the way in which the measurement of sexual orientation occurs in a context of social and moral change. The National Surveys of Sexual Attitudes and Lifestyles (NATSAL I and II), for example, showed increased reporting of various aspects of same-sex experience in 1989–1990 and 1999–2001. These changes might indicate an increase in same-sex sexual behaviour, that people are more willing to report such behaviour, or possibly both of these trends. Similarly in the Northern Ireland Life and Times Survey, the proportion of respondents answering ‘I do not wish to answer this question’ reduced from five per cent in 2000 to 1.3 per cent in
2005. Given that the wording of the question on the Northern Ireland Life and Times Survey did not change over this period, ONS state that they can only hypothesise that respondents ‘have become more willing to answer substantively’, attributing this change to individuals becoming ‘more aware of issues relating to sexual identity, which public bodies have a duty to monitor as a diversity strand’ and greater experience of interviewers in administering the question (Betts 2008, p. 25). Aspinall and Mitton (2008, p. 67) also observe that there is likely to be a time-lag between the ‘public recognition’ of sexual orientation as a protected equality strand and the ‘preparedness’ of people to disclose their sexual orientation in formal data collection. It may therefore be possible to gain more accurate measures of sexual orientation as equality legislation relating to this strand becomes more embedded and the public are made more aware of the importance of collecting information on this aspect of social identity and inequalities. A question on sexual orientation in the Census would therefore be a key part of gaining recognition of sexual orientation as an equality strand and of possibly improving the accuracy of the measurement of the prevalence of different sexual orientations over time.

**Policy, parity and citizenship**

Others argue that, despite methodological problems, non-inclusion of a question on sexual orientation in the Census raises issues of citizenship. Several authors have commented that recognition as a social group in the Census is vital in terms of recognition of the inequalities and life opportunities that such groups experience (Appiah 2005; Aspinall and Mitton 2008, p. 60). In the absence of robust statistical data on the prevalence of different sexual
orientations the lack of data relative to some other strands means that the ‘lack of data sources on sexual orientation is now conspicuous’ (Aspinall and Mitton 2008, p. 66). In the context of the need for equality monitoring many users of official statistics have argued that ‘sexual orientation should be recognised and represented equally with other equality strands’ (Aspinall and Mitton 2008, p. 63).

This approach would provide a ‘parity of respect or esteem’ across the different strands preventing the emergence of an artificial hierarchy (Aspinall and Mitton 2008, p. 64). While there have been some concerns about the appropriateness and relevance of asking sexual orientation in the context of all equal opportunities monitoring and all social surveys, such questions will be important where they can be justified on policy grounds. The Scottish Population Survey Coordinating Committee (2003), for example, took the view that legal requirements would not necessarily mean that every survey would have a duty to include questions identifying equality groups but that ‘decisions would need to be taken to ensure the necessary information was available to support policy decisions’ (p. 3, cited in Aspinall and Mitton 2008, p. 65). The absence of robust statistical data on the size of the LGB population and the prevalence of different sexual orientations in the UK in the context of the equalities agenda suggests that inclusion of a question on sexual orientation could be justified in terms of citizenship and the need to support policy decisions.
2.2  Defining and measuring sexual orientation

The conceptual language used to describe sexual orientations is crucial in terms of capturing different aspects of it and for describing and measuring the experiences of people who make up the lesbian, gay, bisexual and transgendered (LGBT) community. Existing reviews and research show that there has been considerable discussion of the:

- complex nature of sexual orientation and the possibility of people changing and redefining their sexual orientation during their lifetime;
- correct term(s) that should be used to describe and capture sexual orientation (for example, sexuality, sexual identity, sexual orientation, sexual preference, lesbian, gay, bisexual, queer, men-who-have-sex-with-men, heterosexual (McManus 2003; Heaphy et al 1998).

Key issues have related to: whether it is appropriate to treat LGBT people as a single group; whether sexual orientation should be discussed on a continuum or as discrete categories; and the appropriateness and consistency of the categories used to measure the concept.

2.2.1 Conceptualising sexual orientation

LGBT people as a group

A key issue relating to categorisation is the extent to which LGB people are treated as a single homogenous community (that is, as an LGBT community) or broken down into sub-groups to reflect differences in experiences, for
example, between gay men and lesbians, or lesbians and gay men and bisexuals. Similarly the appropriateness of the acronym LGBT, to include transgender and transsexual people, has been questioned given that transsexuality and transgender are primarily related to sex and gender rather than sexual orientation (Aspinall and Mitton 2008, p. 63). There may be circumstances, for example, when estimating prevalence, monitoring inequalities or addressing specific needs – that it will be more appropriate to treat LGB or LGBT people as a group. For example, Stonewall Cymru (2004) defines LGB people as a ‘community of interest’ in the context of ‘a group of people connected by a common interest or characteristic rather than a geographical location’. Morrison and Mackay (2000) also argue that the concept of a ‘gay community’ can act as the foundation for learning, empowerment of that community and change. In other circumstances it will be more appropriate to disaggregate figures for lesbian, gay and bisexual people where their experiences are likely to be different due to gender, patterns of relationships etc (for example, in relation to sexual health issues, numbers of civil partnerships, experiences of employment – these issues will be explored in more detail in subsequent chapters). Another issue is also whether a focus on a single LGB, or LGBT, community is appropriate given diversity and intersectionality across the LGB population and whether such a focus can lead to neglect of the diversity and differences of experiences across the community (these issues are addressed in more detail in chapter 15, section 15.1 in relation to researching LGB people).
Continuum of sexual orientation or discrete categories

Another aspect of the discussion of the complexity of defining sexual orientation focuses on whether sexual orientation is best represented as a continuum of varying and changing experiences or as discrete and more or less fixed orientations. Discussion here has focused on whether researchers should use a continuum of points along a scale reflecting varying degrees of experience between heterosexuality and homosexuality (for example, entirely heterosexual, mostly heterosexual, bisexual, mostly homosexual, entirely homosexual), or on discrete and mutually exclusive categories (for example, gay, lesbian, bisexual, heterosexual, other). An example of the former approach is the NATSAL, which gathers data across behaviour, attraction and experiences scales and asks questions such as whether the respondent has ‘ever had sexual intercourse/genital contact with a same-sex partner’ (sexual behaviour) or whether they have ‘had a same-sex partner in the last five years’ (experience, partnership). By comparison the British Social Attitudes Survey has used the question, ‘which of the following best describes yourself’, followed by the discrete responses: ‘heterosexual, gay, lesbian, bisexual, transsexual, can’t choose, not answered’. The latter approach, with the exception Adult Psychiatric Morbidity Survey, was the one most commonly used in the 10 UK surveys reviewed by ONS (Betts 2008, p. 19). Useful reviews of these issues are provided in more detail by McManus (2003), Purdam et al (2007) and Wilmot (2007).
Appropriateness of definitions

An important consideration is that the categories used in gathering data are appropriate for purpose. Key issues include whether one is trying to capture specific experiences of sexual orientation in terms of sexual experiences, sexual behaviour, attraction, identity, experiences of discrimination or a combination of these (which may be valuable in some instances). An overarching issue relates to whether questions focus on ‘current’ sexual orientation or sexual orientation throughout a person’s life. Research attempting to explore an individual’s sexual orientation throughout their lifetime, for example, may want to include changing dimensions of experience, behaviour and attraction. Other studies with more specific focuses such as sexual health or patterns of family may, for example, want to focus on sexual activities or numbers of same-sex couples. By comparison a study examining prevalence of inequalities related to sexual orientation at a particular historical point may focus on current experiences, behaviours or identity. These issues are also addressed in chapter 15, section 15.1 in terms of the comparability and relevance of definitions used when attempting to research the LGB population.

2.2.2 Sexual orientation and sexual identity

Sexual orientation in the legislative context

A key controversy has been whether the term ‘sexual orientation’ is appropriate in the context of the complex and potentially changeable nature of sexuality (Garnets 2000). The term has primarily been criticised for being
overly deterministic, forcing people into one category or another which may not fit their overall experience or overly assuming that the orientation towards another person is sexual. However, it has been deemed better than ‘sexual preference’ or the suggestion of sexual lifestyles, which can be seen to assume a conscious and deliberate choice trivialising the probable complex psychological, social and cultural processes involved in shaping sexual orientation.

Notably, ‘sexual orientation’ is the term used in equalities legislation and it has now started to gain more currency than ‘sexuality’ in this context (Aspinall and Mitton 2008, p. 62). For example, in the Employment Equality (Sexual Orientation) Regulations ‘sexual orientation’ is defined as ‘an orientation towards:

• persons of the same sex;
• the opposite sex;
• or both sexes’.

Despite the problems with this concept, the term is a pragmatic solution that allows the description and capture of discrimination against a person because of their ‘sexual orientation’ and provides a definition of the comparative categories against which unlawful or unfair treatment can be assessed (for example, comparison of treatment between a person sexually orientated towards someone of the same-sex and another person orientated towards the opposite sex).
Self-perceived sexual identity

In the attempts to develop questions on sexual orientation by ONS, however, there is recognition that ‘the concept of sexual orientation encompasses different dimensions, including attraction, behaviour, fantasy, emotion and identity’. In this context ONS thought that it would be useful to use the term ‘sexual identity’ when trying to achieve a measure of all these different elements (ONS 2008, p. 1). On the advice of its ‘User/Stakeholder’ and the ‘Expert Research’ groups, ONS attempted to develop a question that can measure prevalence based on ‘self-perceived sexual identity’ (that is, how respondents perceive themselves rather than how others would categorise them). The advantage of this approach is that it is not restricted to a focus on single elements of sexual orientation such as behaviour or attraction. It also allows respondents to define for themselves the different elements of sexual orientation that are most important to them. Purdam et al (2007, p. 3) argues that, provided response categories are chosen carefully in order to ensure that they do not impose responses that fail to offer representation to people whose sexuality may change through their life time, such as bisexuals, a focus on self-perceived sexual identity ‘empowers participants by enabling them to articulate their own identities’. A disadvantage of asking a question on self-perceived sexual orientation is that some people who are less used to having to define their sexual orientation, such as heterosexuals, misunderstand the meaning of ‘sexual identity’, which can affect overall estimates of prevalence (see below).
2.2.3 Questions of sexual orientation and sexual identity

Lack of consistency in questions used

Even in surveys attempting to measure the prevalence of different sexual orientations and the inequalities that LGB people face there has been little consistency to date in terms of the concept being measured or the response categories used (Berg and Lien 2006; McManus 2003; Purdam et al 2007; Wilmot 2007). In the ONS review of the experiences of administering survey questions on sexual identity and sexual orientation the surveys reviewed referred variously to ‘sexual orientation’, ‘sexuality’ or ‘were not explicit about which concept they were measuring’ (Betts 2008, p. 7). ‘Question stems also varied in terms of whether the term “sexual identity” (or similar) was mentioned’ (Betts 2008, p. 3). For example, the Fair Treatment at Work Survey asked the question, ‘Which of the answers on the card best describes you?’, followed by the options: ‘straight or heterosexual; gay, lesbian or homosexual; bisexual; other’; while the Scottish Census Small Scale Test used ‘Which of the following best describes your sexual orientation?’, followed by ‘heterosexual, gay/lesbian, bi-sexual, other prefer not to answer’ (see Betts 2008, pp. 17–18).

Betts (2008, p. 3) also notes that, while only relatively few terms were used in the response categories, there was ‘great variety as to which formal and colloquial alternatives were used and in which combinations’. For example, some surveys used ‘heterosexual’, ‘straight’ or both of these. Others used ‘homosexual’ and/or ‘gay/lesbian’, ‘gay’ and ‘lesbian’ separately or a combination of these. The National Mental Health Survey also used
'transgender’ as a response category to a question inviting the respondent to describe their sexual orientation, which would appear to confound sexual orientation and sexual identity. In this respect it will still be useful to develop a consistent approach to asking questions related to sexual orientation. The comparability, applicability and relevance of categories used in surveys will also need to be periodically reviewed and agreed (see chapter 16, section 16.1)

**Developing consistency in questions on sexual orientation**

There have been several recent attempts to develop greater consistency in the use of questions on sexual orientation and response categories. Stonewall has suggested the response categories of ‘lesbian’, ‘gay’, ‘bisexual’, ‘heterosexual’ and ‘other’ as well as a choice not to disclose. These were adopted as the standard in the small-scale Census Test in Scotland, the NHS standard application form for jobs, the pilot monitoring of a sexual orientation question for those applying for a public appointment by four government departments and a number of other public sector surveys (see Aspinall and Mitton 2008, p. 62). More recently ONS trialled two questions (as a part of the Sexual Identity Project) on their Omnibus survey. In the first trial in July/August 2006 they asked, ‘Which of the following best describes your sexual identity… heterosexual, gay or lesbian, bisexual, other, prefer not to say’. In the second trial in November/December 2006 they asked, ‘Do you consider yourself to be… heterosexual or straight, gay or lesbian, bisexual, other, prefer not to say’ (Wilmot 2007, p. 11). The questions, response categories and prevalence rates are shown in Table 1 (see Wilmot 2007, p. 11), although a note of caution needs to be sounded in relation to the
prevalence estimates as not all respondents were asked the question on sexual orientation\(^8\) (Betts 2008, p. 4).

### Table 1  ONS omnibus survey

<table>
<thead>
<tr>
<th>July/August 2006</th>
<th>November/December 2006</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘Which of the following best describes your sexual identity’?</td>
<td>Do you consider yourself to be...</td>
</tr>
<tr>
<td>Heterosexual – 92.0%</td>
<td>Heterosexual or straight – 96.8%</td>
</tr>
<tr>
<td>Gay or Lesbian – 1.3%</td>
<td>Gay or Lesbian – 0.8%</td>
</tr>
<tr>
<td>Bisexual – 1.2%</td>
<td>Bisexual – 0.6%</td>
</tr>
<tr>
<td>Other (please specify) – 0.9%</td>
<td>Other (please specify) – 0.3%</td>
</tr>
<tr>
<td>Prefer not to say – 4.6%</td>
<td>Prefer not to say – 1.5%</td>
</tr>
</tbody>
</table>

The testing of these prototype questions by ONS suggested that misunderstanding of sexual orientation was principally found in relation to the concepts of ‘sexual identity’ and ‘heterosexuality’. In the former case, removing the words ‘sexual identity’ from the question stem, and clarifying the term ‘heterosexual’ by placing the colloquial term ‘straight’ beside it, increased the number of people who considered themselves to be heterosexual and reduced the percentage who used the option ‘prefer not to say’. Consequently, the wording of questions on sexual orientation seems to be more likely to impact on estimates of the prevalence of heterosexuality than the under-reporting of lesbian, gay or bisexual orientation. In the Omnibus trials it was noted that ‘LGB rates across the modes appeared to be more consistent than those for heterosexual respondents’ (Betts 2008, p. 5).
Following these findings it would seem the question stem and the response categories used in the November/December 2006 Omnibus trial represents a sensible option in terms of developing a question on sexual orientation. The response category ‘bisexual’ would allow an option for people who perceive their sexuality to be fluid or that they are orientated towards people of both sexes, while the ‘other’ category allows an option for people who prefer not to be categorised or feel their sexuality has been excluded from the response categories (asking for specification also allows exploration of this category or reclassification where there has been misunderstanding of the question). The ‘prefer not to say’ option also addresses the ethical issues of objection to the question, privacy or fear of disclosure. The only other difference from the suggestion put forward by Stonewall is that there are not separate categories for ‘lesbians’ and ‘gay men’. Since some lesbians may wish to identify as gay, the category ‘gay or lesbian’ seems preferable where information about sex or gender of the respondent is gathered elsewhere in the survey. This would allow a breakdown of the category by sex or gender and would be in line with the other response categories for sexual orientation, which are not broken down by sex/gender in this version of the question.

2.3 Existing Census and administrative data

2.3.1 The Census and same-sex cohabiting households

The 2001 Census in England and Wales gathered data on people living with someone of the same-sex who they identified as their partner. This indicated that there were 78,523 of such households, with 75,747 in England and 2,776 in Wales. This represented 0.19 per cent and 0.12 per cent of all people aged
16 and over in England and Wales, for England and Wales respectively. Our review indicates that there are no comparable figures for Scotland. These figures need to be interpreted with care because the measure is a ‘poor proxy for the LGB population’. The measure ‘omits single persons, those in partnerships but not co-resident and people who decline to disclose their relationship’ (Aspinall and Mitton 2008, p. 68; see also Bindel 2004; Carvel 2004). Black et al (2000) estimate that only a third of same-sex couples disclosed their relationship in this way.

Nonetheless, the figures do reveal some interesting information about the likely geographical distribution of same-sex couples. Brighton and Hove and inner London local authorities ranked highest in terms of the percentage of households identifying themselves as same-sex cohabiting couples, with other cities and towns such as Manchester, Blackpool and Bournemouth, known for visible LGB communities, among the top 20. To this extent these figures begin to reinforce anecdotal experience and provide indicators of the possible need for further research on the needs of LGB communities in particular localities. However, without reliable figures on the size of local LGB populations this may well be a result of higher visibility of lesbian, gay and bisexual people in these areas not necessarily higher populations.

2.3.2 Civil partnerships

Since December 2005 information has also been available about the number of civil partnerships in the UK. Information published by ONS reveal that there were 18,059 civil partnerships in the UK between December 2005 and December 2006, with 16,173 taking place in England, 1,131 in Scotland and
627 in Wales.\textsuperscript{10} Once again, these figures provide a poor estimate of the number of LGB people in the UK. While the figures can include couples who are not co-resident, they still exclude single people and same-sex couples who have decided not to register their partnerships. Research conducted by the Local Government Association (Campbell 2008) indicates the rate of civil partnerships may also have been swelled in the first years of civil partnerships by long-established couples who had previously not had the opportunity to gain legal recognition of their partnership. This means that early rates of civil partnerships may be unreliable as a guide to the future take-up of civil partnerships, with the number of registrations decreasing in 2007 compared to 2006 (Campbell 2008). There is, however, a similar geographical distribution for civil partnerships compared to same-sex cohabiting couples identified in the Census. This may provide some indication of the relative importance of the LGB population in particular localities, although it is worth noting that civil partnerships have been registered in virtually all local authorities in the UK.

Purdam et al (2007, p. 18) argue that in order to provide statistics on civil partnerships that it is ‘important that one relevant question on civil partnership status in included in national government surveys’. Significantly, the existing question on legal marital status will be expanded in the 2011 Census to include civil partnership categories, and ONS have consulted with stakeholders and experts on the wording of such a question.\textsuperscript{11} Information on ‘same-sex civil partnership’ and same-sex cohabiting relationships will also be gathered as part of a relationship matrix in the Census. However, because same-sex couples who are not civil partners may be less likely to disclose their relationship due to the lack of a visible legal status, it is still not likely to
be possible to produce a completely reliable estimate of the percentage of same-sex couples who have registered their partnership.

2.3.3 Concerns about making inferences from existing data sources
Great care should therefore be taken when using existing Census data and information about civil partnerships, particularly when trying to draw more general inferences about the size of LGB population. One concern is that sample sizes, especially at the local authority level, are simply not large enough to draw statistical inferences. Black et al (2000, p. 139) note that ‘because gays and lesbians constitute a relatively small fraction of the population, modest measurement problems could lead to serious errors in inference’. Another concern is that underestimation of the size of the LGB population could be used to prevent or reduce levels of service provision (McManus 2003, p. 38; Barry 2000), particularly where service providers or stakeholders may be relatively hostile to LGB people (Pruitt 2002).

2.4 Working estimates of size of the LGB population
In the absence of reliable data on the size of LGB population from the UK Census or administrative data, the best available data are working estimates based on previous survey research. These are often produced in the context of legislative change and tend to focus on estimates of the size of the British LGB population as a whole rather than at a sub-national or local level. Varying size and distribution of the estimates relates to the issues discussed in relation to defining sexual orientation and sexual identity above.
2.4.1 Estimates by government departments and ONS

Depending on the measure used, estimates of the size of the LGB population have varied between 0.3 and 7 per cent. During the Final Regulatory Assessment for the Civil Partnership Act the DTI drew on previous research to make an estimate of the size of the LGB population and the potential impact of the Act. They argue that, ‘ whilst no specific data are available, a range of research suggests that lesbian, gay and bisexual people constitute 5–7 per cent of the total adult population’ (DTI 2003, p. 13). These figures have been widely quoted (Purdam et al 2007, p. 1), for example, by IDS Diversity at Work (Frost 2006) to suggest that approximately 2.4–3 million of the UK population are LGB. More recently, the ONS Sexual Identity Project found that a review of ten UK public sector surveys indicated that survey estimates of those self-identifying as LGB ranged from 0.3 to 3 per cent (Betts 2008, p. 3). The minimum and maximum percentage rates for each substantive sexual orientation category and type of missing data are shown in Table 2. However, even these estimates must be treated with caution as most of the surveys were limited in their population or geographical coverage and were subject to sample design differences.
Table 2  Minimum and maximum percentage rates for each substantive sexual identity category and type of missing data

<table>
<thead>
<tr>
<th>Substantive categories</th>
<th>Missing data</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Don’t know</td>
</tr>
<tr>
<td>Heterosexual</td>
<td>1.6</td>
</tr>
<tr>
<td>Lesbian/Gay</td>
<td>1.6</td>
</tr>
<tr>
<td>Bisexual</td>
<td>3.0</td>
</tr>
<tr>
<td>LGB Total</td>
<td>0.0</td>
</tr>
<tr>
<td>Other/none</td>
<td>0.0</td>
</tr>
<tr>
<td>All Subst</td>
<td>0.3</td>
</tr>
</tbody>
</table>

Adapted from Betts 2008, p. 12

2.4.2 National survey of sexual attitudes and lifestyles

At the time of the Final Regulatory Impact Assessment for the Civil Partnership Act (2004) (DTI 2003), Aspinall and Mitton (2008) note that the most robust survey data on sexual orientation were seen to come from the National Surveys of Sexual Attitudes and Lifestyles (NATSAL I and II) conducted by the National Centre for Social Research in 1990 and 2000 (Wellings et al 1994; Erens et al 2003). The study interviewed a randomly selected, clustered sample of 19,000 respondents living in England, Scotland and Wales at stage I; and 11,000 respondents at stage II. While the focus of the study was not specifically on the LGB population or sexual orientation, it provided ‘reliable, accurate and valid estimates of the proportion of the population engaging in same-sex activity or having ever cohabited with a same-sex partner’ (McManus 2003, pp. 24–5). Given that the study was conducted at two stages it was also able to indicate changes at the level of
the population that had been occurring in people’s same-sex sexual experience and behaviour and attitudes, with changes being particularly marked for women. Papers have been published on the sexual behaviour of ‘women who report having sex with women’ (Mercer et al 2007) and the ‘increasing incidence of male homosexual partnerships and practices in Britain 1990–2000’ (Mercer et al 2004). Some of the key findings extrapolated from the NATSAL studies are shown in Tables 3 and 4.12

**Table 3 Male sexual experiences**

<table>
<thead>
<tr>
<th>Men</th>
<th>NATSAL I 1990 (%)</th>
<th>NATSAL II 2000 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you ever had a sexual experience, not necessarily including genital contact, with a partner of the same sex?</td>
<td>5.3</td>
<td>8.4</td>
</tr>
<tr>
<td>Have you ever had sex with a same-sex partner, including genital contact?</td>
<td>3.7</td>
<td>6.3</td>
</tr>
<tr>
<td>Have you had a same-sex partner in the last five years?</td>
<td>1.4</td>
<td>2.6</td>
</tr>
</tbody>
</table>
The NATSAL survey also highlighted urban concentration of LGB people, with Greater London, for example, having twice the number of gay men as the rest of the country at the time of NATSAL I. This concentration appeared to be reduced by the time of NATSAL II, however, possibly because of an increased acceptability of LGB people in the UK and an increased willingness of LGB people who live outside London to identify their sexual orientation (see Purdam et al 2007, pp. 6–7).

However, there are still limitations to the NATSAL surveys because of: the focus on sexual behaviour and same-sex partnership; the fact that the survey included only people living in private households; that it achieved a 66 per cent response rate; and that there was a risk of under-reporting of LGB sexual

### Table 4 Female sexual experiences

<table>
<thead>
<tr>
<th>Women</th>
<th>NATSAL I 1990 (%)</th>
<th>NATSAL II 2000 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have you ever had a sexual experience, not necessarily including genital contact, with a partner of the same sex?</td>
<td>2.8</td>
<td>9.7</td>
</tr>
<tr>
<td>Have you ever had sex with a same-sex partner, including genital contact?</td>
<td>1.9</td>
<td>5.7</td>
</tr>
<tr>
<td>Have you had a same-sex partner in the last five years?</td>
<td>0.6</td>
<td>2.6</td>
</tr>
</tbody>
</table>
attraction and behaviour (McManus 2003, p. 25). The NATSAL II survey also had a narrower target sample population: those aged 16–44 (Purdam et al 2007, p. 6).

2.4.3 Other surveys
A review of other surveys from which it may be possible to provide estimates of the percentage of the general population that are LGB, or the prevalence of different sexual orientations, has been conducted by Aspinall and Mitton (2008, p. 66). This review included data sources such as the Metropolitan Police Authority’s Safer London Panel first (and second) panel surveys (Metropolitan Police Authority 2004, 2005) and ten UK workforce surveys including, for example, a survey of members by the Police Federation of England and Wales (2006). The Safer London Panel survey found that 2.4 per cent (2.5 per cent) identified as gay, 0.4 per cent (0.4 per cent) as lesbian, 1.5 per cent (1.6 per cent) as bisexual and 6.5 per cent (5.5 per cent) as ‘prefer not to say’. The Police Federation survey found that 1.1 per cent of its 46,923 respondents identified as bisexual, 1.9 per cent as lesbian/gay and 6.2 per cent ‘prefer not to say’. However, these studies were likely to be ‘sensitive to the survey context’ and that the larger and more robust of the studies provided ‘better estimates that smaller studies with less optimum designs’ (Aspinall and Mitton 2008). Another survey of note was the Gay and Lesbian UK Census 2001 conducted by ID Research. This survey achieved a sample of 10,500 LGB people but suffered from: not having comprehensive or representative coverage of LGB respondents in the UK; having a self-selected
sample of people already identifying as LGB; and being primarily generated for market and commercial rather than social policy purposes.

2.4.4 Local estimates

The review found little evidence of robust statistical evidence at a sub-national or local level. Where work had been attempted problems included non-random samples, small sample sizes and low response rates. For example, while the General Register Office for Scotland’s small-scale postal survey (General Register Office for Scotland 2006) cites proportions of the population by sexual orientation, Aspinall and Mitton (2008) note drawbacks in respect to sampling and achieved response. Similarly, the generalisibility of the Counted Out survey conducted for Stonewall Cymru (Robinson and Williams 2003) and the Counted In! survey (Stonewall Cymru 2007) are limited in that they had to use a non-random sample generated through LGB events, organisations and commercial venues in the absence of any alternative robust sampling frame (see also chapter 16, section 16.2). Other estimates of local LGB populations were based on inference from the NATSAL survey. Keogh et al (2006), for example, estimate that LGB people make up five per cent of the London population, giving a London LGB population of 358,000. However, these estimates are only as robust as the surveys and the definitions of sexual orientation on which the estimates are based.
2.5 Gaps and conclusions

The continuing need for robust and reliable data on sexual orientation

There is still an absence of reliable data on the size of the LGB population and of the prevalence of different sexual orientations on which it would be possible to accurately measure inequalities or progress on equality in the UK. In the absence of suitably comprehensive Census or administrative data, the work of the ONS Sexual Identity Project is a key development. The decision to trial a question for inclusion on the Integrated Household Survey is also to be welcomed. However, the decision not to include a question on sexual orientation on the 2011 Census can be questioned on methodological and citizenship grounds.

The evidence reviewed does not generally support the view that inclusion of a question on sexual orientation would affect overall response rates to the Census or social surveys. While there are legitimate concerns relating to the refusal to answer individual questions on sexual orientation, there was evidence of ways in which these concerns could be mitigated. Evidence also suggests that inclusion of a question on sexual orientation may be able to provide a relatively accurate and consistent measure of ‘out’ LGB, with key difficulties relating more to the measurement of heterosexuality. There is also the possibility of the development of models to account for misreporting or under-reporting where people fail to disclose their sexual orientation. Notably, inclusion of a question on sexual orientation on the Census and/or on government social surveys may also have role to play in promoting
recognition of sexual orientation as an equality strand and of addressing significant issues of parity and citizenship, as well as meeting user needs.

**Defining and measuring sexual orientation**

To date there has tended to be an absence of a commonly agreed way to define and measure sexual orientation. In some cases different definitions of sexual identity are appropriate but it is also helpful to have a common measure on which most people can agree. The concept of ‘sexual orientation’ and its measurement through ‘self-perceived sexual identity’ can represent a pragmatic solution to the need to measure the size of the LGB population and the prevalence of different sexual orientations at a specific historical point in particular localities. ONS trials have begun to produce promising, evidence-based questions and response categories that could be used to promote greater consistency of approach.

**Existing LGB population estimates and the poor quality of data**

In the absence of Census data on sexual orientation the main sources of data are administrative or working estimates of prevalence based on social surveys. In the absence of official estimates the best estimates are those based on high-quality survey research. Reviews of survey data and government extrapolations suggest that estimates of the size of the LGB population may vary between 0.3 and 7 per cent, with the degree of variation reflecting the different approaches used. While existing Census data on same-sex couples and civil partnerships may provide some useful information about the possible geographical distribution of same-sex couples, there is still an
absence of reliable data on the number of same-sex couples, the rate of civil partnerships and the percentage of same-sex couples taking up civil partnerships. Existing information is also a poor proxy for the size of the LGB population and there should generally be a significant degree of scepticism about estimates of the size of the LGB based on inferences from this data. There is also a lack of reliable evidence of the size of the LGB population at a subnational or local level, with local estimates tending to be based on extrapolation from national surveys. Notably, even when the Sexual Identity Project is concluded there may still be problems in providing reliable data at a subnational level and for some local authorities that are likely to have smaller LGB populations. The possible lack of reliable data on prevalence at a local authority level therefore will represent a significant obstacle to meaningful equality monitoring.
3 ATTITUDES TOWARDS LGB PEOPLE

Research on attitudes towards sexual orientation focused on attitudes towards LGB people, although in practice this usually meant lesbian and gay people with far fewer references to bisexual people. There was a relatively large body of research in this respect. It was mainly beyond the scope of this review to examine the substantial body of work looking at theoretical and political explanations for prejudice and discrimination against LGB people (although this is mentioned in section 3.2). Instead, our focus was on research that examined the nature of attitudes towards LGB people and factors linked to such prejudiced attitudes within this literature. The review also examined recommendations for reducing prejudiced attitudes towards LGB people.

In addition to the British Social Attitudes survey, which has occasionally asked questions related to sexual orientation, the most significant survey of attitudes to LGB people was *Living together: British attitudes to lesbian and gay people* conducted for Stonewall by YouGov in 2006 (Cowan 2007). The survey achieved a sample of 2,009 adults and was conducted using an online interview administered to members of the YouGov Plc GB panel of over 115,000 individuals who have agreed to take part in surveys. An e-mail was sent to panellists selected at random from the base sample according to the sample definition, inviting them to take part in the survey and providing a link to the survey. The responding sample was weighted to the profile of the sample definition to provide a representative reporting sample. The profile is normally derived from census data or, if not available from the census, from industry accepted data. The survey examined the nature of attitudes to LGB in
Britain and the extent of continuing prejudice. In Scotland, the most significant survey was *Attitudes to discrimination* (Bromley and Curtice 2003) which looked at attitudes towards a number of minority groups, including LGBs, and which achieved a representative sample of 1,665 people across the country in 2002. We found there were no similar studies in Wales.

In terms of trying to understand prejudice and discrimination, *Understanding prejudice* (Valentine and McDonald 2004) was particularly significant. This study used ten focus groups and 30 in-depth interviews to examine views of a number of minority groups among the majority white, heterosexual population. The fact that LGB people were one of a number of minority groups towards whom attitudes were examined allowed the authors to compare attitudes towards LGB people and those towards of minority groups. Bromley and Curtice’s (2003) study examined similar issues in Scotland but, once again, we could find no equivalent study in Wales.

3.1 The nature of attitudes towards LGB people

3.1.1 Changes in attitudes towards LGB people

Overall, research suggested that there has been a positive change in attitudes towards LGB people among the general population. A number of studies report a greater tolerance towards ‘male homosexuality’ in Britain (for example, Copas et al 2002), and towards LGB people in general (Cowan 2007). For example, the British Social Attitudes survey – which has been conducted annually since 1983 – found that, in 2008, ‘fewer than one in five
now believe homosexual relationships are always wrong, while half regard them as rarely or never wrong. In 1987, 75 per cent of people thought homosexuality was ‘always or mostly wrong’ compared to 32 per cent in 2008 (Ward and Carvel 2008). In their Britain-wide survey Stonewall report a number of ways in which greater acceptance of LGB people could be seen, for example:

- nearly two-thirds of people (60 per cent) believe that gay people should be able to be open about their sexual orientation, no matter what;
- almost three-quarters of people believe that public expression of prejudice against lesbian and gay people should be addressed (Cowan 2007, p. 7).

Such acceptance was also mirrored in Scotland. Drawing on a module of questions Bromley and Curtice (2003) found that over 50 per cent of those questioned did not feel that same-sex relationships were wrong. Only 30 per cent of their sample disagreed that gay or lesbian couples should not have the right to marry and only 19 per cent agreed with a statement that equal opportunities for LGB people had gone ‘too far’. There were no comparable figures for Wales.

Cowan (2007) also reports relatively widespread support for legislative changes that offer protection from discrimination to LGB people and towards equal legal treatment for LGB people in general. For example, 93 per cent of the YouGov survey sample supported the Employment Equality (Sexual Orientation) Regulations (2003); 68 per cent supported the Civil Partnership
Act (2004); 85 per cent supported the Equality Act (Sexual Orientation) Regulations (2007); and 89 per cent supported the making of incitement on the grounds of sexual orientation a criminal offence (Cowan 2007, p. 8).

An increasing number of people were found to also be increasingly comfortable with openly LGB people in their lives and the lives of their families. In 2003, for example, 26 per cent of people surveyed said that they would be uncomfortable with a GP who was LGB but by 2007 this had fallen to 14 per cent. The equivalent figures for ‘Your child’s teacher’ were 20 per cent in 2003 and 18 per cent in 2007 (Cowan 2007, p. 8). Only 18 per cent of their sample of Scots said that, leaving aside what political party they were in, they would prefer not to have an MSP who was gay (Bromley and Curtice 2003).

### 3.1.2 Continuing negative attitudes

The above positive changes notwithstanding, there was evidence in the literature to suggest that negative attitudes towards lesbian, gay and bisexual people still persist. On one level, tolerance of a minority group (whether this be a minority ethnic group or lesbian and gay people) does not necessarily equate to respect and approval of that group (Valentine and McDonald 2004, p. 7). The authors found that tolerance could be expressed as a ‘grudging acceptance’ of that group and was ‘often conditional upon groups keeping a low public profile (for example, by not openly displaying affection in public). A similar finding also emerged from a study conducted by Ellis et al (2002) on 226 students undertaking undergraduate psychology courses in the UK. The study found that the absence of negative attitudes towards same-sex
relationships did not necessarily translate into support for the human rights of gay men and lesbians. Notably, Cowan (2007) found that only 34 per cent of her survey sample held an overall ‘high opinion’ of lesbians and gay men. This was the same percentage as for people from ethnic minorities and similar for people from non-religious Christian groups (33 per cent), suggesting that prejudiced attitudes towards LGB people may be at around the same level as those for ethnic and non-Christian religious minorities.

Despite such findings, it was clear that it was no longer socially acceptable to be prejudiced without a good reason. However, feeling less positive towards a social group was not regarded as prejudiced if it was felt that it could be justified (Valentine and McDonald 2004, p. 7). One area where some people did regard discrimination as acceptable was in relation to parenting by LGB people. There were still concerns that LGB people may be inappropriate role models for children. For example, the British Social Attitudes Survey in 2008 showed that only just over a third of the British population believe that a lesbian couple can be as good parents as a man and woman, and just under that proportion think that a gay male couple can be as good parents (Ward and Carvel 2008). One reason for this is that gay men’s sexual orientation is still sometimes linked in the popular imagination with paedophilia. Although lesbians are not accused of corrupting children in the same way, there is some concern that lesbian mothers deprive children of a father or a male figure in their lives (Valentine and McDonald 2006, p. 10). There is no sound evidence to support either of these presumptions (see chapter 4, sections 4.4 and 4.5). Other evidence of continuing negative attitudes has included the widespread use of homophobic language in schools (see chapter 5, section
5.3). For example, it has been estimated that almost 17 million adults have witnessed such bullying at school (Cowan 2007). Hunt and Dick (2008) report that while only 27 per cent of lesbian and gay people over the age of 50 experienced homophobic bullying, Stonewall’s School Report found that 65 per cent of young lesbian and gay people at school in 2007 had experienced homophobic bullying. Just over half of those now over the age of 50 witnessed homophobic bullying of others while as many as 86 per cent of those now aged 18-24 witnessed homophobic bullying of others. The effects of such attitudes among young people are examined in more detail in chapters 5 and 10.

Nonetheless, not all negative views of LGB people are expressed as hatred. Valentine and McDonald (2004) developed a typology of the way in which prejudice is expressed, involving aggressive, banal, benevolent, cathartic and unintentional prejudice. While aggressive and cathartic prejudice are associated with animosity towards minority groups, banal, benevolent and unintentional prejudices can simply demonstrate a lack of understanding that such views are prejudiced or draw on views that are believed to be positive but which can in fact draw on restrictive or patronising stereotypes. The authors note that ‘much prejudicial talk about lesbians and gay men is not expressed in negative or hate talk but rather in terms of positive stereotypes about gay culture’; for example, lesbians and gay people were described as ‘happy’ or ‘fun’, with some heterosexual women talking about valuing gay men for their supposed feminine qualities (Valentine and McDonald 2004, p. 10).
3.2 Factors linked to discriminatory attitudes

A number of concepts and factors have been drawn upon to explain negative attitudes based on sexual orientation and specifically towards LGB people. Sociological theories have tended to draw on concepts of homophobia and heterosexism, while discussion in the literature above has made reference to various social characteristics, economic concerns, psychological factors and the lack of tolerance of cultural diversity and difference among the majority, white, heterosexual population. We briefly examine sociological theories before examining the other factors discussed in the literature.

3.2.1 Homophobia, heterosexism and the ‘heterosexual assumption’

Theoretical explanations of attitudes have tended to be linked to the concepts of homophobia and heterosexism (Fish 2006). Homophobia is usually regarded as a set of beliefs in which the holder of those beliefs exhibits prejudice, hatred and dislike towards LGB people. Heterosexism, by contrast, is the explicit or implicit view that homosexuality is inferior to heterosexuality, in a similar way to racism regarding people from ‘Black’ racial groups as inferior to people from ‘White’ groups. The concept of homophobia has sometimes been criticised for reducing negative attitudes towards LGB people to the psychology of a few irrational individuals without examining the wider social, economic and legal processes that have supported the institutionalisation of heterosexuality and the disparagement of homosexuality. Heterosexism, on the other hand, links prejudice and discrimination to a set of institutionalised beliefs, practices, laws and policies. Fish (2006, pp. 7–8, 26) notes that, although the concept of homophobia can reduce such attitudes to
personal prejudice with no reference to the power and processes which sustain that prejudice’, it may be too early to simply replace the concept of homophobia with that of heterosexism. Furthermore, before the term homophobia can be completely superseded ‘we need first to understand heterosexism as a theoretical concept’ and to ‘recognise its similarities and differences to other forms of oppression and how it is perpetuated’ (Fish 2006, p. 26).

The link between heterosexism, homophobia and negative attitudes towards LGB people has been conceptualised in a number of ways. These have included the ‘heterosexual imperative’ (Wilton 1993), the ‘heterosexual matrix’ (Butler 1990), the ‘heterosexual panorama’ (Blasius 1994) and ‘heteronormativity’ (Warner 1993). However, most recently Weeks et al (2001, p. 41) have used the term the ‘heterosexual assumption’ to describe the ‘all-embracing institutional invalidation of homosexuality, and presumption in favour of heterosexuality’. However, while all these concepts are useful, they have also been criticised for being more descriptive rather than explanatory and for sometimes leading towards the implication that heterosexual people themselves are the source of negative attitudes, even when this is not the intended case.

Other concepts used to explain negative attitudes towards LGB people have included ‘social reproduction’ (D’Emilio 1993; Riddough 1980) and ‘compulsory heterosexuality’ (Rich 1993). The former places prejudice towards LGB in the context of the perceived existence of LGB ‘outside of’, and
sometimes in ‘opposition to’, traditional patterns of heterosexual family and married life necessary for capitalist production; while the latter places prejudice in the context patriarchal control over many aspects of women’s lives. However, there appears to be limited linkage of these theories to the policy context outside of the academic literature.

### 3.2.2 Factors linked to the development of homophobic attitudes

**Social characteristics**

The literature outlined a number of social characteristics that could influence who is likely to hold discriminatory attitudes towards lesbian, gay and bisexual people. These are summarised in the Table 5 below. Although a wide variety of characteristics linked to negative attitudes are identified, the crucial discussion around why these factors have an impact on attitudes is notable by its absence. In the same way, there is very little theorisation around why people hold such attitudes beyond a fairly superficial level of explanation.
Table 5  People likely to hold discriminatory attitudes towards lesbian, gay and bisexual people

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>Older people (defined variably as either 55 and over or 65 and over) more likely to hold discriminatory attitudes than younger people</td>
</tr>
<tr>
<td></td>
<td>(variably defined as 18–24 or 15–44) (Bromley and Curtice 2003; Cowan 2007).</td>
</tr>
<tr>
<td></td>
<td>However, younger people are more likely to be the perpetrators of homophobic hate crimes (see chapter 10, section 10.2)</td>
</tr>
<tr>
<td>Educational attainment</td>
<td>Those with fewer educational qualifications are more likely to hold discriminatory attitudes (Bromley and Curtice 2003; Cowan 2007)</td>
</tr>
<tr>
<td>(in terms of educational</td>
<td></td>
</tr>
<tr>
<td>qualifications held)</td>
<td></td>
</tr>
<tr>
<td>Ethnicity</td>
<td>Older, white men found to be least likely to support legal equality for gay men and lesbians and least likely to feel that prejudice against these groups need be tackled (Mori 2003; and Valentine and McDonald 2004, cited in Cowan 2007). People from minority ethnic groups are more likely to acknowledge that anti-gay prejudice exists. However, there is some evidence that young</td>
</tr>
</tbody>
</table>
people from minority ethnic groups can experience particularly hostile reactions from their families and communities when coming out (see chapter 9, section 9.1)

<table>
<thead>
<tr>
<th>Gender</th>
<th>Men are more likely to be uncomfortable with same-sex relationships than women (Bromley and Curtice 2003; Cowan 2007). Women are more likely than men to acknowledge that homophobic prejudice exists (Valentine and McDonald 2004)</th>
</tr>
</thead>
<tbody>
<tr>
<td>If someone has a child</td>
<td>Those that do not have children are more likely to hold negative views towards lesbian and gay people (Stonewall 2003)</td>
</tr>
<tr>
<td>Marital status</td>
<td>Those married or cohabiting or divorced or widowed are most likely to harbour negative views towards same lesbian and gay people (Stonewall 2003)</td>
</tr>
<tr>
<td>Preference of area in which to live</td>
<td>Those with a preference for living in an area with a diverse population were found to be less likely to hold such discriminatory views (Bromley and Curtice 2003)</td>
</tr>
<tr>
<td>Social class</td>
<td>Social classes A and B are more likely to hold discriminatory views than those in social class C (Stonewall 2003)</td>
</tr>
<tr>
<td>Voting patterns</td>
<td>Conservative voters are more likely to hold</td>
</tr>
</tbody>
</table>
negatives views about lesbian and gay people than Labour voters (Stonewall 2003)

| **Where someone lives** | Those living outside London are more likely to harbour discriminatory views compared to those living in the city (Stonewall 2003) |

**Economic concerns**

A second approach to explaining negative attitudes linked to LGB people is to see them to economic concerns about competition for scarce resources. Bromley and Curtice (2003) observe that there is a well-rehearsed argument about the relationship between economic hardship (for example, competition over jobs or housing) and racial prejudice. In contrast, they contend ‘gay men and lesbians arguably constitute less of a perceived direct “threat” in the competition for supposedly scarce economic resources’ and that the ‘reasons behind prejudice towards this group clearly have their roots elsewhere’. For instance, the researchers note in their Scottish study that those on the highest incomes are for the most part less likely to be prejudiced than those on the lowest but there was ‘no consistent relationship at all between attitudes and our respondents’ self-rated economic hardship’. Similarly, there is little difference between the views of those in work and the attitudes of unemployed people. However, one exception to this pattern was the perception that national government and local authorities prioritise the needs of LGB relative to the heterosexual majority (Valentine and McDonald 2004). An example would be the view that local authority spending on services for
LGB people is not appropriate: in their survey Bromley and Curtice (2003) found that 60 per cent of their respondents thought giving money to LGB groups and organisations in their area was a ‘waste of money’. However, this view often neglects that LGB people are tax payers and citizens themselves and suggests that national and local governments may need to work harder in explaining the reasons for spending on such services.

**Psychological factors**

A third explanation looks at psychological factors and argues that the reason for homophobic attitudes lies in whether heterosexual people value diversity and feel a ‘psychological affinity’ to LGB people. Conversely, holding homophobic prejudice serves a ‘function’ for a particular individual in terms of supporting their own identity. In the former case, Bromley and Curtice (2003) discovered that, ‘those who say they know a gay man or lesbian, who believe that gay men and lesbians have a great deal in common with other people, and who like to live with different kinds of people are for the most part far less likely (and sometimes as much as half as likely) to adopt a discriminatory view than are those who are not in this position’. In the latter case, Valentine and McDonald (2004, p. 7) argue that holding a homophobic prejudice can serve the function of confirming the identity for people, for instance, by making some people of faith believe that they are being ‘good Christians’ (Valentine and McDonald 2004, p. 6).
Lack of toleration of diversity and difference

Slightly more complex explanations of homophobic attitudes have linked them to perceptions among the majority white, heterosexual group that their culture is being unfairly ignored and undermined. Valentine and McDonald (2004, p. 13) discovered that a common element in the justification of prejudice is that minority groups do not behave like ‘us’ or fit in with ‘us’. This relates to the earlier point about perceptions that LGB people exist ‘outside’ – and sometimes in ‘opposition’ to – traditional patterns of family life. Indeed, the researchers did find that lesbians and gay men were sometimes regarded as cultural threats to traditional English values and ways of life (Valentine and McDonald 2004, p. 16). However, they also note that an ‘emphasis on sameness and the importance of minority groups fitting in shows a significant lack of appreciation for difference and for notions of equality and human rights’ (Valentine and McDonald 2004, p. 9). In this context, it would seem that reassurance is required that acceptance of the rights and identity of one social group does not necessarily lead to the withdrawal of rights and identity for another. Further research is required to examine how the rights of LGB people and heterosexual people are balanced by government, local authorities and policy makers, and how they can be successfully promoted in this respect.

3.2.3 Perpetuation or reduction of negative attitudes

Religion

The literature presents some conflicting evidence regarding the direction in which religious beliefs influence heterosexist and homophobic attitudes. On
one hand, there is evidence to suggest that those who attend a religious service are more likely to hold discriminatory views towards lesbian, gay and bisexual people (for example, Bromley and Curtice 2003). Equally, those who have no religious attachment at all are also less likely to express prejudiced views (Bromley and Curtice 2003).

On the other hand, there was evidence to suggest that religious beliefs do not play a significant part in attitudes towards same-sex relationships and that those individuals holding religious beliefs are just as likely as anyone else to support laws to protect the rights of LGB people. Cowan (2007, p. 18) found that 84 per cent per cent of religious people disagreed with the statement, ‘homosexuality is morally unacceptable in all circumstances’. The majority of religious people they surveyed (83 per cent) also believed that gay people should not be discriminated against when accessing services such as health and social care.

Other research also supported the view that there is not a straightforward relationship between religious beliefs and prejudice against LGB people. In their qualitative study of the views of people of faith from the Christian, Muslim, Jewish and Hindu religions, Hunt and Valentine (2008, p. 5) found that their participants felt that the public statements of some religious leaders wrongly created the impression that all people of faith are prejudiced against LGB people thereby disguising differences of experiences and attitudes within faith communities. For example, participants indicated attitudes varied between generations and that younger people of faith were less likely to be prejudiced against LGB people (Hunt and Valentine 2008, p. 18). Similarly, where people of faith knew LGB people in their everyday lives, through work, socialising or in their own faith community, they were less likely to hold
prejudiced attitudes (Hunt and Valentine 2008, pp. 2–3). Some participants in the study believed that prejudiced views stemmed from socio-cultural factors (for example, whether homosexuality was illegal in particular societies, whether or not legislation protected the rights of LGB people within a particular society), rather than from religion per se (Hunt and Valentine 2008, pp. 14, 18).

Nonetheless, religion continues to be seen by many to be a major cause of anti-gay prejudice. Based on extrapolation from their survey Stonewall argue that more than half of the population thinks that public prejudice is caused by religious attitudes (Cowan 2007, p. 12). The participants in Hunt and Valentine’s (2008, p.2) study also acknowledged ‘that some parts of the faith community objected to lesbian and gay sexuality’ and that this sometimes reinforced the view that all people of faith were prejudiced against LGB people. The relationship between religion and sexual orientation is discussed further in chapter 13.

**Media**

Negative attitudes towards LGB were also perceived to be perpetuated by television and newspaper media, including over-emphasis on the conflicts between LGB people and other groups such as people of faith (Hunt and Valentine 2008, p. 5). At the very least, research suggests that television companies did little to promote acceptance and tolerance of LGB people and, at worst, served to re-circulate and reinforce clichés and stereotypes about gay men and lesbians (Cowan 2007). In their survey of *Living together*, Stonewall found that nearly three-quarters of their respondents felt that the media frequently used gay people as the subject of jokes; 83 per cent also
believe that the media relies heavily on clichéd stereotypes of gay people (Cowan 2007, p. 13). This supports findings from Stonewall’s 2006 Tuned out report, which documented the use and impact of gay stereotypes broadcast on BBC television (Cowan and Valentine 2006, p. 15) (see chapter 10, section 10.1). However, while almost a fifth of people thought television was responsible for anti-gay prejudice, this figure was even higher for tabloid newspapers, with just over half of respondents in the Living Together survey blaming tabloid newspapers (Cowan 2007, p. 13). There appears, however, to be a significant discrepancy between the perceived impact of the tabloid press and its actual impact on the views of its readers about LGB people. For example, Cowan (2007) found that The Sun readers had a higher than national average opinion of gay people, in fact five per cent higher. However, some broadsheet newspapers scored much higher still in terms of the positive attitudes of their readership. For instance, 98 per cent of people reading the Guardian newspaper think that anti-gay prejudice should be tackled (Cowan 2007, p. 17). Clearly, qualitative research in this field could help further illuminate the complex relationship between readership and homophobic or accepting attitudes. Hunt and Dick (2008) report that nearly half of lesbian and gay people think the overall portrayal of lesbian and gay people on television is unrealistic. However, two thirds think the portrayal on Channel 4 is realistic and more than eight in ten lesbian and gay people think Channel 4 is likely to respond to complaints about homophobia as seriously, or more seriously, than other complaints. In comparison just three in ten think ITV would take complaints less seriously. Hunt and Dick argue that public bodies and companies that make a positive effort to include lesbian and gay people, and take active steps to prevent discrimination, reap rewards in the support they
will receive from them. They also point out that TV broadcasters that reflect the real lives of lesbian and gay people are viewed more positively by lesbian and gay viewers.

Further Stonewall research has shed light on the attitudes of LGB people in Wales. Research revealed that the majority of respondents felt offended by the portrayal of LGB people in the print media (63 per cent) (Stonewall Cymru 2007). Slightly fewer people felt offended by the portrayal of LGB people in broadcast media (61 per cent). Just under two thirds of respondents felt offended by the lack of positive portrayals of LGB people in the media and just under half were made to feel anxious over homophobic victimisation due to media portrayals.

Extent and quality of contact with LGB people

Whether or not a person knows an LGB person has also been found to influence their attitudes, although the quality of the contact is crucial if positive attitudes are to develop. On the whole, the literature indicates that people are less likely to hold discriminatory attitudes towards LGB people if they know someone who belonged to that group or if they felt that such groups had commonality with the rest of society (Bromley and Curtice 2003; Hunt and Valentine 2008; Stonewall 2008). It has been suggested that heterosexual people tend to know of more LGB today – either through their social networks or because of well-known figures in public life – and that this affects their attitudes to LGB people. For instance, 86 per cent of people in one study said their opinions of celebrities such as Sir Elton John, Will Young and Martina
Navratilova did not change when they found out they were gay or lesbian (Cowan 2007). Additionally, people of faith have also acknowledged that theological positions suggesting they should be hostile to the lives of LGB people are also sometimes challenged in communities where they meet, work and sometimes socialise with LGB people (Hunt and Valentine 2008, p. 3). Other research, however, presents a more complex view by suggesting that knowledge of, or contact with, LGB people is not enough in itself. Contact in public spaces, without engagement, is insufficient to foster respect and can even exacerbate prejudice. Instead, more accepting attitudes toward LGB people rest on the quality of contact (Valentine and McDonald 2004, p. 9). Negative experiences of gay men or lesbians can lead to powerful negative generalisations against those in these groups as a whole, although positive encounters do not work in the same way (Valentine and McDonald 2004, p. 7). However, the authors do not greatly elaborate on what type of contact would lead to better relations between groups other than stating that ‘working relationships are particularly effective in developing respect for minority groups’ (Valentine and McDonald 2004, p. 9). Conversely, group or peer dynamics can play an important role in the escalation of hostility. Individuals with high levels of prejudice appear to reinforce each other’s attitudes and behaviour, resulting in an increased prejudice. This process of reinforcement and escalation may contribute to the development of extreme forms of anti-social behaviour and violence (Valentine and McDonald 2004, p. 14).
3.3 Best practice in reducing negative attitudes

Rather than providing examples of best practice, the literature to date has suggested a number of broad action points or recommendations that would need to be further operationalised (for example, Valentine and McDonald, 2004, p. 22). Combining the literature available these have consisted of the following.

**Working together at a national level to tackle prejudice and hate crime**
There is a call for government, agencies (including the Commission) and minority groups to work together to tackle prejudice and to develop a national strategy to reduce homophobic attitudes and prevent hate crime. However, it is recommended that such a strategy should tackle everyday prejudices and stereotypes as well as more visible hate crimes and bullying. An example of such a national strategy is *Challenging prejudice: changing attitudes towards lesbian, gay, bisexual and transgender people in Scotland* (LGBT Hearts and Minds Agenda Group 2008), which published the recommendations of the LGBT Hearts and Minds Agenda Group (see chapter 14, section 14.1).

**Presenting more positive images**
This involves working with the media to foster more positive images of LGB people: for example, by influencing journalists and broadcasters with a view to improving the way they represent them and by working with schools and colleges to educate people to interpret the information they receive more critically (see chapter 14, section 14.1). The media should portray the lives of LGB people realistically.
Fostering respect for difference and diversity by carefully thought through contact between social groups

Previous research has suggested that the best way to reduce prejudice is to bring different groups together so that people can learn about each other. It is argued that contact reduces people’s feelings of uncertainty and anxiety about others by encouraging a sense of familiarity and therefore predictability and control. This is known as the contact-hypothesis (Valentine and McDonald 2004, p. 20). However, such contact must be thought through carefully. Simply informing people about minority groups without addressing the fundamental need to foster a need for respect for difference, diversity and human rights can increase resentment rather than reduce it (Valentine and McDonald 2004, p. 9). Other suggestions have also involved concentrating efforts to reduce prejudices on those people most marginalised in society (for example, young white unemployed men) and encouraging religious organisations to address the apparent ‘disconnect between the anti-gay statements of some religious leaders, and the attitudes of ordinary “people of faith”’ (Cowan 2007, p. 21; Hunt and Valentine 2008, pp. 20–3) (see also chapter 14, section 14.1).

Encouraging respectful environments in the places where people regularly meet such as workplaces and schools

The literature indicated that workplaces are important sites where minority and majority groups meet and, as such, can provide fertile ground for fostering better relations between groups (Valentine and McDonald 2004; Hunt and Valentine 2008). The public feel that organisations and institutions, including employers and schools, should take responsibility for reducing prejudice.
(Cowan 2007, p. 14). Consequently, it is recommended that employers should take a role in creating workplace cultures that encourage contact between different groups. It is suggested that employers should ensure they fully comply with the law and tackle all forms of bullying and harassment. Similarly, schools should develop policies that comprehensively address anti-gay bullying (see also chapters 5 and 6).

**Evaluating strategies and monitoring progress**

It is recommended that a programme of research be put in place that enables policy makers to evaluate strategies to reduce heterosexist attitudes and homophobic prejudice and to benchmark progress.

### 3.4 Conclusions and gaps

**The need for regular, large-scale attitudinal research**

The review found that current attitudes towards LGB people had been mapped reasonably well through one-off surveys in Britain and Scotland. However, there is still an absence of regular, large-scale attitudinal research relating to sexual orientation and attitudes to LGB people, particularly in Wales. Longitudinal survey research and official statistics are required if progress in reducing negative attitudes towards LGB people is to be measured. Such research should also explicitly address attitudes towards bisexuality as well as towards lesbians and gay men.
Greater understanding and theorisation of reasons for negative attitudes

The research available had made good progress in terms of beginning to map the social factors and characteristics linked to prejudiced attitudes. It also did well in detailing the areas of change in attitudes and where attitudes have remained relatively static. Significant gaps remained, however, in terms of understanding how persistent negative attitudes to LGB people relate to the concepts of heterosexism and homophobia and how such attitudes are reflected in institutionalised policies and practices, as well as in everyday experiences and views. Further qualitative work would help illuminate the reasons for continuing negative attitudes and the complex relationship between the media, religion and others factors, and the role they play in creating, reinforcing and changing social attitudes. Additionally, despite reference to attitudes towards legislative changes, very little to date has been written about the interaction between equality laws and the impact on people’s views towards LGB people.

Good practice in managing changing attitudes towards sexual orientation

A final area that emerged was the need to examine the management of changes in official attitudes towards sexual orientation (evidenced, for example, through legislative changes establishing the rights of LGB people or protecting them from discrimination) and the attitudes of some members of the general public. The research suggested that such changes can make some more marginalised members of the wider community feel that their beliefs and values are being challenged and undermined. Broad strategies have been
suggested for facilitating and managing such difficulties. However, qualitative research would help in clarifying such difficulties, mapping examples of good practice and identifying solutions where difficulties and problems arise.
4 FAMILIES AND RELATIONSHIPS

The review found that there is a large body of work, particularly qualitative studies, on the experiences of LGB families but virtually no reliable information about the number of families including or headed by LGB people. Research has tended to focus in two areas. Firstly, on same-sex couple relationships and households and the development of family or support networks different from heterosexual families. Secondly, on the nature of LGB parenting and the extent to which this impacts on child development and the experiences of children brought up in LGB families. More recently, these two focuses have also been reinforced through key pieces of legislation such as the Civil Partnership Act (2004) and the Adoption and Children Act (2002)\textsuperscript{15} in England and Wales and the Adoption and Children Act (Scotland) (2007).\textsuperscript{16} They will also be reinforced through the Human Fertilisation and Embryology Bill (2008), for example, in debates about what constitutes a good family life and appropriate care for children.

4.1 Legislative context

4.1.1 Recognition of same-sex couples

Until the Civil Partnership Act (2004) same-sex couples were only legally recognised in very limited ways (for example, nearest relative in the context of mental health, tenancy succession) using provisions of the Human Rights Act (1998). Even in these cases such recognition was a response to legal campaigns by LGB people and not the act of a responsive state. The
introduction of civil partnership has completely changed the context of the discussion of same partnerships and LGB family life. The Act came into effect in December 2005, creating the legal status of ‘civil partner’ enabling same-sex couples for the first time to obtain legal recognition of their relationship and to gain a number of rights and responsibilities. Key rights included:

- Equal treatment with heterosexual married couples for taxation and life insurance purposes (for example, a civil partner does not have to pay inheritance tax or capital gains tax);

- Recognition equivalent to a married heterosexual partner under the intestacy rules, that is, where one partner dies without leaving a will the other partner is given priority in terms of inheritance and other rights associated with death (for example, right to register the partner’s death);

- Eligibility for bereavement benefits such as claims for fatal injury compensation;

- The requirement for public sector survivor pensions to be paid to civil partners where a public scheme can meet the cost. This requirements does not extend to private sector pension schemes where payments may still be at the discretion of trustees .

- Ability to apply for parental responsibility where a partner is not the biological parent of the child;

- Formal recognition as next of kin, preventing denial of visiting rights in hospital, and access to information and involvement in medical decisions about the treatment of an incapacitated partner;

- Right to succeed a local authority or housing association tenancy;
• Recognition of civil partners for immigration and nationality purposes, particularly the right to remain in the UK for non-EEA citizens whose partnership subsists for two years or more and for some partnerships akin to UK civil partnership to be recognised in the UK;
• Exemption from testifying against one’s partner in a court of law.

Key responsibilities included:
• A duty to provide reasonable maintenance for a partner and children that are part of the family, which continues after a partnership is dissolved in cases where a child has been legally adopted by a non-biological partner;
• Joint treatment for income-related benefits (for example, Job Seekers Allowance, Working Tax Credits), which has also been extended to unregistered cohabiting same-sex partners in the same way as for unmarried, cohabiting heterosexual partners;
• Liability for funding of a partner who enters higher education;
• To provide evidence of irretrievable breakdown of the relationship in order for the partnership to be dissolved (the civil partnership equivalent of divorce).

Although civil partnership is often referred to as ‘marriage’ (particularly in the media) it is not equivalent to marriage. The main differences are essentially in terms of names for different aspects of the process of becoming a civil partner compared to becoming married (for example, officially a civil partner registers their partnership rather than becoming married); the procedures involved in
becoming a civil partner and the dissolution of civil partnerships; and the fact that a civil partnership is not marriage recognised in a religious sense.

### 4.1.2 Parenting rights

There have been no laws in the UK specifically prohibiting LGB people from becoming parents, either biologically, by adoption or fostering, or by retaining custody of children from past heterosexual relationships. However, until recently society was extremely hostile to the idea of LGB parenting (to some extent it still is – see chapter 3, section 3.1), with this being reflected in the framing of legislation, family policies and the decisions and practices of social services, family courts, fertility clinics and adoption agencies. In particular, even where individual officials and practitioners were sympathetic to LGB parents, questions were raised about whether LGB people would be suitable parents in terms of gender-identity role models and the impact their sexual orientation may have on the sexual orientation of their children. Other issues were raised in terms of whether same-sex couple relationships would offer the same security and stability of heterosexual married relationships and whether the children of LGB parents would suffer discrimination and harassment at school and in the wider community. Recent legislative changes have tended to shift the emphasis away from discrimination based on the sexual orientation and marital status of parents towards an examination of the quality of parenting and the ability of the parent, or parents, to provide a stable and loving home for the child.
4.1.3 Adoption and fostering

One of the most significant developments for LGB people in this respect has been the Adoption and Children Act (2002). Although, in the past, there was no law preventing adoption or fostering by same-sex couples, there was no specific right for them to apply and be considered as adoptive parents and there was no legislation preventing discrimination against same-sex couples or LGB prospective parents. At the same time, LGB people could only technically apply to adopt as individuals and not as couples. Among other reforms to the Adoption Act (1976), the Adoption and Children Act made it possible for adoption orders to be made in favour of single people, married couples and, for the first time, unmarried couples including same-sex couples (Creegan et al 2007, p. 95). This part of the Act came into effect in December 2005. A key reason for making the changes was to try to broaden the pool of prospective adoptive parents, although attempts to recognise LGB relational rights in the context of the other legislation discussed above also played a part. In making these changes the Act went a long way to recognising that lesbians, gay men and same-sex couples could be suitable parents. However, if a person enters a civil partnership with a biological or existing adoptive parent of a child, they do not automatically become the parent of the child. As with a heterosexual relationship he or she becomes a step-parent and must apply to adopt the child in order to gain full legal rights as a parent.

Lesbian, gay and bisexual people who want to foster must also apply to do so and undergo an assessment. Guidance issued in 1991 suggested that, while lesbian and gay people should not be excluded from fostering, 'the chosen way of life of some adults may mean that they would not be able to provide a
suitable environment for care and nurture of a child’. It was added that no one has a ‘right’ to be a foster parent. However, the same guidance also recognised that the ‘needs and concerns of young gay men and women must also be recognised and approached sympathetically’. In relation to fostering some local authorities have been more welcoming of same-sex couples than others.

To date, no local authority has been known to refuse same-sex couple adoptions or fostering. However, some religious agencies have refused applications on the basis that they only place children with heterosexual married couples. The recent discussion over whether Catholic adoption agencies receiving state funding would handle applications from LGB parents was an extension of this policy, which will become unlawful after an 18-month period of transition due to end in December 2008. It is also notable that the children adopted or fostered by LGB people in the past tended to be those considered ‘hard to place’ (for example, the severely disabled). The effect of the legislation on the success of applications by LGB people to adopt has yet to be examined.

### 4.1.4 Assisted conception

Another area of discrimination arose from the Human Fertilisation and Embryology Act (1990) which specifically required fertility clinics providing assisted conception to consider the ‘need for a father’. While the law did not strictly prohibit single women and lesbians from accessing such services it was sometimes used to justify refusals. The Human Fertilisation and
Embryology Act (2008) will amend the existing legislation on assisted reproduction, removing the reference to ‘the need for a father’ and replacing it with the obligation to consider the ‘welfare of the child including the need of the child for supportive parenting’ (Infertility Network 2008).

4.1.5 Sperm donors and birth registration

A key issue for lesbian couples who have started families using donated sperm has been the assumption that only the biological mother and father could be recorded on birth registration certificates (Graham et al 2007, pp. 47–8). Until 2003 only biological mothers and married fathers had automatic parental responsibility. Since 2003 any father named on a child’s birth certificate also receives automatic parental responsibility. In the context of donor insemination this meant that a lesbian co-parent could be excluded from the registration on the birth certificate of a child in favour of the biological father regardless of the extent to which the donor would be involved in the parenting of the child (Graham et al 2007, pp. 78–80). The Human Fertilisation and Embryology Bill will also allow same-sex co-parents to be named on the birth certificate in a situation where there has been a conception through sperm donation.

4.1.6 Custody after divorce

Although there was no specific legislation preventing LGB people from having custody of children following divorce, the sexual orientation of LGB parents was sometimes taken into consideration by family courts as a negative factor
in determining which parent should be awarded custody or in denying a parent contact with their children. Once again, the attitudes of family courts has changed significantly in recent decades, with this change in attitudes sometimes preceding the legislation discussed above. Decisions today are less likely to be influenced by the sexual orientation of applicants relative to their ability to provide for the welfare of the child. However, Stonewall found that two in five lesbian and gay parents still expect to be treated worse than heterosexuals ‘if they appear before a family court in a divorce custody case’ (Hunt and Dick 2008, p. 10).

4.2 Patterns of LGB families

4.2.1 Number of LGB families

One of the most significant issues in relation to research on sexual orientation and families is the absence of any reliable data on the number of families formed or headed by LGB people (that is, the number of same-sex couples, the number of LGB people who have children and who live with them). In chapter 2, we noted that some official sources of information in the Census identified a person living with a same-sex partner, and the number of civil partnerships, but that these figures are extremely unsatisfactory as a measure of the number of same-sex couples in Britain as a whole (see chapter 2, section 2.3). In this context, Stonewall (2007, pp. 5) states that, because there is no question on the Census relating to sexual orientation, it is therefore ‘not known how many gay people have families’. Despite the inclusion of the category ‘partner’ in relation to the question on household members and their
relationships within the household, this still gives no idea of the number of same sex couples in the population. Despite including same-sex civil partnerships in the question on marital status in the 2001 Census, this still gives no idea of the number of same-sex couples overall or the proportion of same-sex couples who have entered civil partnerships. There will also continue to be no reliable statistical information on the number and different types of households found among LGB people or the number of households headed by LGB people with children. Despite anecdotal and speculative assumptions that ‘openly gay or lesbian’ households have contributed considerably to diversity of family life in Britain (McRae 1999, p. 1) there is no reliable way to confirm or deny the extent of this contribution.

4.2.2 Context of research on same-sex couples

Given the absence of statistical data on patterns of LGB families most research has therefore tended to be qualitative, detailing the form and experiences of such families. One area where there has been a particularly large body of work in this respect has been in relation to same-sex couples and LGB households. An important factor influencing the context of this research has been debates over the changing nature of family life and the role of the family in providing wider social stability. Weeks et al (1999) note that one side of these debates has tended to assume the strength of the traditional heterosexual family and marital commitments, with a belief, among some, that LGB families are undermining traditional religious and family values, representing one part of a wider breakdown in moral or social values. The other side of the debate has tended to view LGB families as part of the
changing nature of society, representing new and emerging forms of family life and commitments that are not necessarily any better or worse than more traditional patterns. However, given the ‘heterosexual assumption’ that runs through much of the discussion of patterns of family life, it has often been difficult to produce research that does not address itself to the view that LGB-headed families and same-sex relationships are automatically inferior to heterosexual families and married life or at least problematic in some respect. Much research to date has attempted to show the value of LGB families and relationships despite this hostile context.

4.2.3 Stability and longevity of same-sex relationships

A body of research preceding the civil partnership legislation suggested that same-sex couples were less stable than heterosexual married couples and that such relationships were less likely to last (for example, Modcrin and Wyers 1990; Johnson 1990). This research was criticised for often not comparing like with like: for example, comparing married heterosexual couples with an undifferentiated category of same-sex couples, whereby some couples may still be forming their relationship and where there was no possibility of same-sex ‘marriage’ at the time (Sarantakos 1996, p. 160). Others noted the survival of same-sex couples despite a lack of institutional support for them (Jamieson 1999, p. 487). More recent research has indicated that same-sex couples are prepared to invest a considerable amount of ‘emotional labour’ and ‘discussion and negotiation’ in terms of sustaining their relationships (Weeks et al 2001, p. 112), although some work points to problems in same-sex relationships including domestic violence, in general
research suggests that it is no more common in same-sex relationships than opposite sex relationships (see chapter 9, section 9.3).

Other research has focused on the extent to which such patterns of negotiated commitments influence such issues as sexual monogamy (for example, Shernoff 1995), money management (Burns et al 2006) and household formation among same-sex couples (Mitchell 2004). However, despite research suggesting that LGB people have a range of commitments, including long-term and stable commitments, the absence of reliable statistical evidence on same-sex couples means that it is impossible to say definitively whether same-sex relationships are any more or less long-term and stable than heterosexual relationships.

Research has also suggested that same-sex couples may have developed relationships that are different from traditional patterns of heterosexual married relationships (although reflective of broader trends also found among heterosexuals more widely). It has been argued that, because until recently the relationships of LGB people had to exist largely outside of heterosexual structures of recognition and validation, LGB people were ‘free’ to experiment with new relationship and family forms. Also, some authorities contend that LGB couples have developed relationships based on an ‘egalitarian ideal’ (Weeks et al 2001, pp. 109–114; Dunne 1997) and ‘mutual satisfaction’ rather than the contractual obligation of traditional marriage (Edwards et al 2003, p. 16), although not all evidence supports this (for example, Gabb 2004; Jamieson 1999). These ideas have been particularly encapsulated in the
4.2.4 LGB households

There is some survey and qualitative work that suggests that LGB people, and particularly gay men, may be more likely to live in independent, one-person households and that this may have implications for social support and care for LGB older people (Age Concern 2002; Heaphy et al 2003; Mitchell 2004). Age Concern (2001) suggest that LGB people are: two-and-a-half times as likely compared to their heterosexual equivalents to live alone; twice as likely to be single; and four-and-a-half times as likely to have no children to call upon in times of need (Fish 2007e). These issues are also addressed in the chapters on health and social care (chapter 7, section 7.5), housing (chapter 9, section 9.4). However, many of these findings are speculative without an adequate statistical baseline of patterns of households by sexual orientation. There is also a danger of assuming that LGB people are isolated, when we have little statistical information about patterns of support and care found among LGB
households relative to heterosexual households. What qualitative research there is suggests that new forms of care and support may be developing in order to support LGB households as well as the possibility of growing old alone or caring isolation (Age Concern 2002, p. 9; Donovan et al 1999, p. 700; Mitchell 2004, p. 245; Wojciechowski 1998).

4.2.5 Support networks and families of choice

A significant body of research has been built around the relationship of LGB people to their families of origin and the identification of ‘families of choice’ or ‘friends as family’ as complements or alternatives to traditional sources of family support among LGB people (Nardi 1992; Weeks et al 1996, 1999; Weston 1991). Research suggests that relationships with families or origin can be difficult as individuals try to balance cultural and religious expectations about family life and family responsibilities with their own needs as LGB people (Julien et al 1999; Yip 2003b). In this context, families of choice are sometimes seen as arising from rejection by families of origin or distancing by LGB people from unsupportive families and networks (Wilton 2000 p. 127). Stonewall Scotland are currently undertaking EHRC funded research into migration of LGB people. In other cases the idea of a family that is ‘chosen’ represents a ‘powerful affirmation of a new sense of belonging’ (Weeks et al 1999, p. 302; see also chapter 7, section 7.5). Such families of choice were particularly seen in the response to HIV/AIDS, but had also begun to develop in relation to other aspects of emotional support and physical care such as care for LGB older people (Heaphy et al 2003; Weeks 1998). They have also begun to develop in relation to complex parenting arrangements: for example,
where gay men act as sperm donors for lesbian parents and are actively involved in parenting arrangements alongside lesbian couples (Dunne 2005). However, there can also be difficulties in accessing such networks and in creating the distance necessary to create them, particularly in relation to minority ethnic communities with a strong sense of socio-religious obligations such as respect for parents and maintenance of family honour (Yip 2003b).

Despite such qualitative work, research prior to the Civil Partnership Act suggested that there was a ‘lack of recognition of lesbian and gay relationships as authentic family networks’ (Albarran and Salmon 2000, pp. 451–3). Stonewall (2007) also note the lack of acknowledgement of LGB caring responsibilities in social policy. While some of these issues have now been resolved for civil partners and LGB parents, the response of organisations to same-sex couples who have not registered their partnership and to other members of families of choice has not been explored. While some research has begun to develop in relation to the relative strengths or weaknesses of ‘families of choice’ as a source of care and support compared to same-sex couples (Mitchell 2004), the significance of families of choice for LGB people relative to heterosexual people and among heterosexual people has still to be fully explored.

### 4.3 Civil partnerships

Research to date on the impact of civil partnerships on discrimination and inequalities faced by same-sex couples has been relatively limited, principally because the legislation needed time to become sufficiently embedded. In this
context most discussion of the impact of civil partnerships has been speculative, with supporters, sceptics and detractors from the legislation variously putting forward arguments to support their case. However, some qualitative research has been conducted, or is ongoing, that sheds light on the attitudes and experiences of same-sex couples relating to civil partnerships or gay ‘marriage’. Key pieces of research have included that by Smart et al (2005) exploring the meaning and significance of legitimating same-sex relationships preceding and during the introduction of civil partnerships; and research ongoing by the National Centre for Social Research exploring the perceived impact of recent legislative changes, including the Civil Partnership Act, on the lives of same-sex couples (Mitchell and O’Connor 2009), both funded by the ESRC.

4.3.1 Concerns about gay ‘marriage’ and civil partnerships

Research and government consultation prior to the Civil Partnership Act showed that formal recognition of same-sex partnerships aroused ‘mixed feelings’ among gay men and lesbians (Women and Equality Unit 2003b, pp. 32; Weeks et al 2001). Where same-sex couples embraced the idea of civil partnership this often reflected pragmatic concerns such as recognition for taxation or pension purposes or recognition as next of kin in the context of health and social care. In other circumstances involvement by the state in the lives of same-sex couples often raised tensions between the desire for equality, social recognition and social validation, on the one hand, and the desire for commitments that are self-defined and negotiated between partners on the other (Mitchell 2004; Smart et al 2005).
Despite the possible positive impacts from civil partnerships, a number of commentators have been concerned that civil partnership can represent the extension of assumptions about monogamy, interdependency and economic dependence between partners based on traditional models of heterosexual marriage (Knights 2006; Tatchell 2005). There have also been concerns that civil partnership will ‘normalise’ same-sex relationships thereby jeopardising the egalitarian, negotiated and democratic qualities found among same-sex couples that were described above. For example, in their study of money management in same-sex relationships, Burns et al (2006, p. 10) discuss the ‘potentially normalising effects’ of civil partnership in terms of its assumption of the desire for financial interdependence between couples, which may not ‘adequately reflect the experiences of lesbian and gay couples’ (Burns et al 2006, p. 3). In fact, they found that an ethic of ‘co-independence’ was upheld for same-sex couples, even among those considering civil partnership (Burns et al 2006, p. 29).

These issues have been particularly discussed in terms of the potential negative financial impact of the Civil Partnership Act on same-sex couples in receipt of means-tested benefits such as Job Seekers Allowance, Housing Benefit, Council Tax Benefit, Pension Credits and tax credits and whether this will deter people from becoming civil partners. In particular, there have been concerns that same-sex partners will be worse off because their partner will be regarded as financially responsible for them and that, in line with heterosexual couples, this will be the case whether same-sex couples choose to register their partnership or not (Knights 2006).
Another concern among commentators is that civil partnership will create new forms on inequalities. For example, Tatchell (2005) argues the fact that civil partnership exists as a distinct institution from heterosexual marriage that is not fully equivalent to marriage reinforces homophobic views that same-sex relationships are different and second best. At the same time, the decision by the current government not to create a similar institution to civil partnership for heterosexual couples who do not wish to marry creates ‘a form of legal apartheid based on sexual orientation’ (Tatchell 2005). Other concerns have also included: the fact that certain employment benefits can be lawfully restricted to married couples and civil partners while excluding other couples who may have equally long-term commitments (Frost 2006; Employee Benefits 2005); and the fact that civil partnerships may reinforce the reliance on care and support between couples in the context of increasing numbers of one-person households where such partners may be unavailable (Mitchell 2004). In this context, some commentators perceive a need to acknowledge a range of couple and non-couple commitments through the use of ‘civil commitment pacts’ (Wilkinson and Kitzinger 2005).

A final concern is the increased visibility that may occur through becoming a civil partner or through exercising same-sex couple partnership rights may create new difficulties for same-sex couples or lead to new forms of overt and covert discrimination (Wheelan 2005). At one level, civil partnership raises dilemmas for same-sex couples about whether to invite family members who are hostile to the relationship to the ceremony (Muir 2006). At another level, issues have been raised about the response of specific services to same-sex couples. For example, staff responsible for the registration of marriages have
on a number of occasions refused to conduct civil partnerships; and couples have had difficulties registering their partnerships within particular local authorities (Creegan et al 2007, p. 36; Davies 2007; Grosz 2007).

At the same time, there have been examples of venues trying to refuse to conduct civil partnership ceremonies (Shepherd 2007) or refusing same-sex partners facilities such as hotel rooms (Minto 2006). A particular difficulty has been religious opposition to civil partnerships (Gledhill and Nazir-Ali 2006), including opposition to LGB clergy who want to enter such a partnership (Wynne-Jones 2006). The recent employment tribunal case of an Islington registrar who did not want to conduct civil partnerships on the grounds of religious conscience also raises issues about the potential for discrimination in the delivery of services to LGB people. While some of these forms of discrimination may have begun to be addressed by the Equality Act (Sexual Orientation) Regulations (2007) (making discrimination in the provision of goods and services unlawful), there is no substantive evidence to date on whether civil partners have experienced new forms of discrimination as a result of becoming civil partners or how such issues have been addressed in the context of potential contradictions between legislation: for example, between the Equality Act and the Employment Equality (Religion or Belief) Regulations (2003) (see chapter 6, section 6.3).
4.3.2 Positive views and impacts of civil partnership

By comparison others have identified positive impacts from civil partnership for society and for LGB people; although the impacts identified have sometimes been more speculative than supported by evidence. One possible key positive impact is that civil partnerships may increase stability and longevity among same-sex partners creating the conditions for improved mental and sexual health and greater security for children. For example, during the consultation exercise on the creation of civil partnerships the Women and Equality Unit argued that civil partnerships would ‘bring increased security and stability to those same-sex couples who register their partnership, and to their children’ (Women and Equality Unit 2003a, p. 69).

Similarly, King and Bartlett (2006) argue that the stability and better mental health associated with marriage may be transferred to civil partnerships, with knock-on impacts of improved self-respect, reduced contacts with multiple sexual partners and improved sexual health. Other feasible positive impacts have also included reduced stress and drug-taking arising from less social exclusion and less prejudice (King and Bartlett 2006) and the potential for improved relationships with family members arising from increased visibility and support for the relationship (Petre 2006).

Research on the actual impact of civil partnerships is limited but suggests that the legal and social recognition provided to civil partners is important to the couples, to family members and possibly to the wider society. Smart et al (2005) found that the majority of couples they interviewed were pleased with the civil partnership legislation although some wanted full equality and to be
able to hold a religious ceremony. Couples were divided over whether it mattered that there are separate categories of civil partnership and marriage. They were aware that they might be criticised by their friends for ‘selling out’ and adopting heterosexual values by registering their partnership but thought that celebrating their commitment to each other was more important. When friends criticised them for ‘marrying’ this was experienced more as reserve in their enthusiasm rather than as outright hostility.

For couples who had undertaken gay ‘weddings’, Smart et al (2005) also found a positive impact in that this helped create ‘new forms of kinship’ with families of origin, with same-sex partners being seen as son-in-laws, sister-in-laws, etc. Partners were also put ‘on a new footing’ being ‘absorbed into the wider family’ (Smart et al 2005, p.3). Qualitative research also suggests that civil partnership can have a positive impact on the acceptance of same-sex couples by people of faith where LGB people are seen to be demonstrating that they are living by similar principles implied in heterosexual marriage such as commitment or monogamy (Hunt and Valentine 2008, p. 15). Other same-sex couples who had undertaken a ceremony by comparison felt that a positive impact of civil partnership was that becoming partners actually helped prevent unwanted interventions in their lives, either from family members or the state (for example, taxation, immigration).

The evidence for an impact on commitment was less conclusive. Smart et al (2005) found three sorts of commitment among the same-sex couples they interviewed, including (a) ‘commitment as a promise for the future’; (b)
commitment as an ongoing sedimenting process (over years); and (c) commitment as potentially fragile and as requiring external supports’. Most couples fell into the second category because they had lived together for some time and felt they had demonstrated their commitment in many and varied ways over time. They ‘did not think their ceremony would, or had, made any difference to their level of commitment’ (Smart et al 2005, p. 3). It remains to be seen whether civil partnership will have an impact on couples who are making a promise for the future or who feel their relationship is emotionally fragile and in need of external support. One piece of significant research that has recently been funded by the ESRC in this respect is that being undertaken by Heaphy and Smart that will look at the experiences of people under 35 who have entered civil partnerships.

4.3.3 Popularity of civil partnerships

Some commentators have taken the suggested positive impacts of civil partnership to argue for the popularity of civil partnerships among same-sex couples. For example, because it is likely the number of civil partnership registrations will pass the government’s own estimate of 22,000 by 2010, given current rates of registration (for example, Ward 2006), they believe this demonstrates a ‘real appetite’ for civil partnerships among LGB people (Curtis 2006). However, others have been more cautious, observing that more recent figures show a decline in civil partnerships, with earlier figures possibly indicating a rush to register among long-term partners who had been previous denied the legal recognition of their partnership (Campbell 2008). Yet more commentators have also pointed to the prediction of low percentages of take-
up of same-sex partnership rights akin to civil partnership in other countries. For example, Tatchell (2005) reports that less than 15 per cent of same-sex couples have registered their partnerships in Denmark and The Netherlands where such rights were introduced earlier than in the UK.¹⁹ Hickman (2006) also reports an Internet survey of 18,000 people via the gay dating website ‘gaydar’, which suggested that as many as one-quarter of gay men would say a definite ‘no’ to civil partnerships. While the research being conducted by the National Centre for Social Research will explore the reasons why people do or do not decide to register their partnerships (Mitchell and O’Connor 2009), there is still a need for accurate statistical information on the number of LGB people and same-sex couple households in order to accurately access the popularity of civil partnerships.

4.4 Reviews of LGB parenting

There was a considerable body of work examining the impact of LGB parenting on children, which reflected the controversial nature of this subject and the need to inform the changing legislative context above.

4.4.1 Context of the reviews

A particularly comprehensive review of LGB parenting was conducted by Selman and Mason (2005) for the Scottish Executive. While this review was originally conducted to examine the issue of adoptions by LGB parents, the authors found a significant body of research relating to parenting by LGB people. The review revealed that research on LGB parenting tended to focus
on the differences or similarities between LGB and heterosexual parenting, particularly with a view as to the whether LGB parenting has a negative impact on the identity or welfare of children brought up by LGB people. Selman and Mason (2005) note a number of key questions that inform the research and the context of their review. These were:

- are children raised by LGB parents predisposed to homosexuality?
- are such children more prone to develop psychiatric problems?
- will there be a lack of appropriate gender role models?
- are the children of same-sex couples subject to stigma and harassment by peers?

They also note other concerns raised by opponents of LGB parenting and adoption (for example, Morgan 2002), such as:

- does a homosexual lifestyle lead to neglect and conflict?
- is the gender identity of children raised by same-sex couples problematic?
- are same-sex relationships less stable than heterosexual relationships?
- is the life expectancy of gay and/or lesbian parents shorter?

A number of commentators have noted that such questions often assume that homosexuality is wrong from the outset and that this skews the context of the discussion. For example, Clarke (2002) argues that research on lesbian parenting is presented in a number of ways: as no different from heterosexual parenting; as different and deviant; as different and transformative; and as different only because of oppression. The presentation of LGB parenting as
‘no different’ plays down differences emphasising that it conforms to a heterosexual role model with limited or no impact on children. The different but ‘deviant’ approach suggests that LGB parenting is problematic and harmful, while the differences arising from the ‘oppression’ approach go some way to mitigating these problems, which are caused by such oppression rather than the nature of LGB people per se (for example, if LGB relationships are less stable and secure for children this may be because of a lack of social support for LGB parents and external pressures on the relationship). Only the ‘transformative’ approach suggests that LGB families may actually be new forms of family life that are as valid as traditional forms of parenting (albeit with their own set of problems and issues similar to those in experienced heterosexual-parented families). In this context discrimination against LGB parents has tended to reflect this imbalance in the discussion of LGB parenting, with a neglect of quality of parenting across different sexual orientations.

By comparison recent policy discussion has tended to shift the focus of research to ‘What is in the best interests of the child?’ (Selman and Mason 2005, p. 4). Instead of an emphasis on the sexual orientation of the parent, there is an emphasis on potential of the parent or parents to provide a secure, stable and loving home. For example, changes to the Adoption and Children Act (2002) in England and Wales that gave same-sex couples the right to apply to adopt were informed by the view that such couples, ‘if carefully selected’, could increase the number of families in which children would be ‘offered social, emotional, financial and legal security in the future’ (Selman and Mason 2005, p. 4). At the same time, entry into a civil partnership was
seen as one possible indication of the security and stability of same-sex relationships that could taken into account when assessing the likely quality of relationships among LGB couples applying for adoption (Women and Equality Unit 2003a). However, assumptions about the problematic nature of LGB parenting remains in questions, for example, about whether birth parents should be informed when children are placed with LGB people for adoption and fostering.

### 4.4.2 Reviews of research on LGB parenting

The review by Selman and Mason (2005) also looked at a substantial body of work on the impact of LGB parenting on children in Britain and America, including original research and existing reviews. They noted that there was no consensus on the impact of LGB parenting from these previous reviews because they were divided into reviews that indicated a ‘fairly positive message’ and those which ‘attack these reviews as misleading because they do not acknowledge the flawed nature of individual research studies’ (Selman and Mason 2005, p. 6). However, their findings can be discussed in terms of positive reviews of LGB parenting, negative reviews and reviews with a balanced approach.

**Positive reviews of LGB parenting**

These reviews suggest that there is a lack of evidence substantiating that LGB people do not make good parents and that there may even be some evidence that lesbians couples make better parents because of the combined greater awareness that they have of parenting skills as two mothers. They
also suggest that there is no evidence of confused gender-identity among children raised by LGB parents. Limitations discussed in these reviews include the fact that: many of the studies focus on lesbian mothers and not gay fathers; many children included in the research were born in past heterosexual relationships; and most samples were small, predominantly from white ethnic backgrounds and well-educated. One example of a positive review is that of Perrin et al (2002), which concluded that, ‘A growing body of scientific literature demonstrates that children who grow up with one or two gay and/or lesbian parents fare as well in emotional, cognitive, social, and sexual functioning as do children whose parents are heterosexual. Children’s optimal development seems to be influenced more by the nature of the relationships and interactions within the family unit than by the particular structural form it takes’ (cited in Selman and Mason 2005, p. 8).

Negative reviews of LGB parenting

Most criticisms arising from negative reviews of the literature are methodological and state that research that gives a positive view of LGB parenting is not sufficiently rigorous or generalisable. For example, in their review of 49 empirical studies, Lerner and Nagai (2001) make the criticisms that:

- the studies had unclear hypotheses and research design;
- they are missing adequate comparison groups;
- they have self-constructed, unreliable and invalid measures;
- they had non-random samples, including parents who recruit other parents;
- samples were too small to yield meaningful results;
• there was missing or inadequate statistical analysis;
• no generalisations could be made from the data.

However, despite the validity of some of these criticisms (particularly the absence of generalisable, statistical information about LGB families compared to heterosexual families), Selman and Mason (2005) note that some of the points raised demonstrate a fundamental lack of understanding of the qualitative nature of some of the studies reviewed. In addition, methodological criticisms do not in themselves demonstrate that LGB parenting is better or worse than heterosexual parenting, rather than more research is needed that is methodologically robust.

Two of the best-known negative reviews have been produced by Morgan (2002), of the Christian Institute, and Dailey (2002). In addition to the methodological issues raised above, Dailey, for example, lists a range of ways in which he believes a gay lifestyle may be harmful to the upbringing of children. These include presumed greater promiscuity and unsafe sexual practices among gay men and assumed higher rates of domestic violence and substance misuse among LGB people. However, many of the proposed negative impacts from gay lifestyles are more speculative than evidence based and see these negative consequences as arising from being LGB per se, rather than from a response to LGB oppression or social circumstances. They also treat LGB people as an undifferentiated category in which all LGB people are believed to behave in the same way.
Reviews with a balanced approach

Selman and Mason (2005) identify a number of reviews that were generally supportive of LGB parenting but which adopted a ‘more balanced approach to the literature’. In their review of 21 studies conducted during the 1980s Stacey and Biblarz (2001) observe that, while positive reviews frequently downplayed differences relating to the impact of LGB parenting, such differences were often ‘modest’ and related more to the gender of the parents and the social conditions under which LGB people have to raise their children rather than sexual orientation being a causal factor of the differences. They conclude that ‘social science research provides no grounds for taking sexual orientation into account in the political distribution of family rights and responsibilities’ (Stacey and Biblarz 2001, p. 179). Similarly, in their review of the literature the British Association of Adoption and Fostering (BAAF 2004) conclude that ‘there is no evidence supporting the use of a person’s sexuality as precluding effective parenting’. Despite acknowledging the limitations of many existing studies, they argue that the evidence supports the view that ‘sexuality is not a determining factor in the capacity to offer a good home to a child’. Given the nature of the reviews, Selman and Mason (2005, p. 12) conclude that ‘there is no strong evidence which suggests that gays and lesbians should be excluded from consideration for adoption’.

4.5 Other research on LGB parenting

In addition to the reviews described above there is also more robust review of parenting by Tasker (2005) that provides a more evidenced-based analysis. There is also a growing body of individual studies examining different aspects
of the experience of LGB parenting and LGB-headed families. Once again, the focus of these studies has tended to be the impact of LGB parenting on child development, although there are also a range of studies providing descriptions of the experiences of LGB people and their families in relation to such issues as lesbian motherhood, gay fatherhood, fostering and adoption and the impact of continuing discrimination against LGB people on the children of LGB parents.

4.5.1 Impact of LGB parenting on child development

One of the most important bodies of work in this area has been that produced by Golombok and her colleagues (for example, Golombok et al 1983; Tasker and Golombok 1995; Golombok and Tasker 1996; Golombok et al 1997). Overall this work appears to indicate that there are no negative impacts on the development of children in lesbian-headed families. Where there are differences these tend to be relatively benign or positive, with positive factors being particularly associated with the gender of the mothers. For example, Golombok et al (1997) compare the psychological development of children raised in lesbian-headed families with single and two-parent heterosexual families. Some 30 lesbian mothers and 42 families headed by a single heterosexual mother were compared with 41 two-parent heterosexual families using standardised interview and questionnaire measures. The results suggested that ‘children raised in fatherless families from infancy experienced greater warmth and interaction with their mother and were more securely attached to her, although they perceived themselves to be less cognitively and physically competent than their peers from father-present families’. In
2003 Golombok et al also conducted a study examining the quality of parent-child relationships and the socio-emotional and development of a community sample of seven-year-old children with lesbian parents. In it, 39 lesbian mother families, 74 two-parent heterosexual families and 60 families headed by single heterosexual mothers were compared on standardised interview and questionnaire measures administered to mothers, co-mothers/fathers, children and teachers. They state that findings were in line with earlier investigations ‘showing positive mother-child relationships and well-adjusted children’.

Significantly, Selman and Mason (2005) discuss these studies among some of those that they consider to be best-designed because of their comparative element.

4.5.2 Lesbian mothers

Research on LGB parenthood has tended to focus on lesbians, partly because gendered expectations about motherhood and childcare mean that lesbians are more likely to have responsibility for children within the household. In this context some research has focused on how lesbian motherhood can create different gendered dynamics within households (for example, Dunne 1998; Wright 1998) or reproduce existing understandings of the sexual division of labour (for example, in the way that birth mothers retain primary responsibility for child care in lesbian-parented households – Gabb 2004). Other research has explored how non-traditional ways of conceiving, such as donor insemination, challenge traditional models of heterosexual family life and the way in which lesbians negotiate and manage their roles and identities in this context (Haimes and Weiner 2000). Although the scope of
these studies is relatively limited in terms of their samples and generalisability, their importance lies in telling us about the way in which society responds to different family forms and the type of discrimination faced by such families. More recent research in the US has been conducted by Charlotte Patterson.21

4.5.3 Gay fathers

By comparison the body of research on gay fathers is smaller. This is partly for the reasons discussed above in relation to the focus on lesbian mothers and partly because research on gay men has tended to focus on the ‘lifestyles of young “single” gay men’ and on ‘families of choice’ (Dunne 2005, p. 1). Where there has been research on gay fathers, the focus of the research has tended to be on the impact of parenting by gay fathers on their children. One of the earliest studies by Bigner and Jacobsen (1989) found that fathers did not differ significantly from heterosexual fathers in terms of overall parental involvement, intimacy, parenting skills and attitudes to parenting. They also found that gay fathers tended to be more communicative with their children and to enforce rules more strictly. Barrett and Tasker (2001) report on the views held by 101 gay fathers on their sons and daughters. While the research suggests that men with cohabiting male partners viewed themselves as successfully meeting a variety of parenting challenges, with few gender differences arising in older children, it was limited in that this was the view of the parents and not those of their children.

In her research, funded by the ESRC, Dunne (2005) looked at the degree and type of responsibility gay men have for their children, and their relationship
with the mothers of their children, using questionnaire, telephone interviews and email communications with 100 respondents. She examined the experiences of a range of gay fathers, including: married men not ‘out’ to their wives; divorced men who were the main carers; divorced men who were actively co-parenting; divorced men where there were access problems (sometimes as a result of their sexual orientation); foster carers; donor fathers co-parenting with lesbian couples; and donor fathers going through IVF with a female heterosexual friend. A key finding included that gay men were actively involved in caring for their children, often maintaining good relationships with their ex-wives where they had divorced. The fathers believed that their children had gained from having a gay parent in that ‘dealing with homophobia enabled them to be more tolerant individuals’. This was reflected in more egalitarian households and a parenting style where they hoped that their children would grow up ‘to be, and think, for themselves’. However, gay fathers often felt isolated both in the mainstream as parents and within the gay community (Dunne 2005, pp. 24–5). Other important work describing the accounts of gay fathers includes the work of Strah and Margolis (2003).

4.5.4 Fostering and adoption

Research on fostering and adoption by LGB people has tended to focus on qualitative accounts of the experiences of LGB foster parents and adopters. Important work in this respect is the work by Hicks and McDermott (1999) and Hicks (2005) that looked specifically at these types of experiences. Qualitative research being conducted by the National Centre for Social Research (Mitchell and O’Connor 2009) will examine the impact of the Adoption and
Children Act on the intentions of same-sex couples to foster and adopt and on the experiences of same-sex couples who have applied to adopt or foster post-implementation. However, there are still gaps in the research in terms of work providing comparative experiences of LGB foster parents and adopters relative to their heterosexual equivalents and work that focuses on the impact of LGB fostering and adoption specifically from the perspective of children and young people who had been fostered or adopted (Selman and Mason 2005, p. 14).

Other research has included that by Hicks (2000) on the role of social workers in conducting assessments of lesbian applicants to foster and adopt. In this case she conducted 30 interviews with social workers. In the context prior to the implementation of the Adoption and Children Act, she found that social workers worked within a ‘heteronormative’ context in which the fitness of heterosexual applicants relative to lesbians was assumed, particularly in relation to role models for gender and sexual orientation. In this context some lesbian applicants were often constructed as a ‘threat’ or ‘militant’ while others were constructed as ‘automatically safe’ conforming to a model of the ‘good lesbian’. However, we do not know whether such attitudes have changed among social workers since the changes made by the Adoption and Children Act that formally gave same-sex couples the right to apply to adopt.
4.5.5 Birth registration

Although we found no specific research relating to lesbian couples, donor fathers and birth registration, research conducted by Graham et al (2007) did shed light on the experiences and issues faced by lesbian couples in the context of sole or joint birth registration (prior to the introduction of the Human Fertilisation and Embryology Act 2008). In cases where lesbians had conceived using donated sperm there were two attitudes to the nature of birth certificates. The first one was that the birth certificate reflected ‘biological parentage’ and that it was not necessary for a lesbian co-parent to be named on it. The second attitude was that rules governing who is allowed to be recorded on the birth certificate reflected a ‘gender bias’ because if a heterosexual couple has conceived a child through a sperm donor the non-biological father can be recorded on the birth certificate. Those who viewed the rules as a gender biased ‘found the situation difficult to accept’ (Graham et al 2007, pp. 47–8). Additionally, some lesbians saw the rights of donor fathers being privileged over the lesbian co-parents as discrimination, particularly where it was agreed with the male donor prior to conception that he wanted limited or no involvement with the child. The non-biological mother was seen as the day-to-day parent of a child, assuming financial and social responsibility. ‘Denying the non-biological mother the right to co-register was a seen as a failure to recognise the responsibilities she has committed to and fails to give legal rights appropriate to her role’ (Graham et al 2007, pp. 78–9).
4.5.6 Children of LGB parents

A significant issue in relation to the children of LGB parents is whether being a part of such families will lead to harassment, discrimination or victimisation within the wider society but particularly within school. Another issue is also how LGB parents will handle the realisation by their child or children that they belong to a non-traditional family form and how they and others (for example, teachers, social workers) will respond to these challenges. The issue of homophobic bullying in schools is addressed in more detail in chapter 5. However, despite the fact that homophobic bullying does exist, Stonewall’s Equalities Review reached the conclusion that this is ‘insufficient reason for lesbian and gay people not to have children’ (Stonewall 2007, p. 5). Indeed, it would seem remarkable to suggest that other children who might be bullied because of the social status of their parents (for example, parents from lower socio-economic groups, minority ethnic groups or those with disabilities) should not have children. It could also be argued that, rather than focusing on the negative impacts for children of being part of LGB-headed families, future research should focus on how discrimination can be challenged and how such children and their parents could be better supported.

One study that has examined the impact of the realisation of children on belonging to an LGB-headed family is that by Stevens and Perry (2003), which examined how open lesbian mothers were to their children about their sexual orientation, including where the children were conceived by donor insemination. Using standardised interviews with 38 mothers, they found that half of the children, aged five to nine years, in the sample were said to be
aware of their mother’s sexuality, while only two were completely unaware. Most of the children developed awareness gradually rather than being told and none reacted negatively to finding out. All of the mothers had told, or planned to tell, their children about their conception where they had been conceived by donor insemination. This suggests that where problems do occur for the children of LGB people these arise from outside the family rather than within it. However, the research to date is limited by small numbers and the focus only on lesbian mothers and there is a need for further research.

4.6 Best practice

Best practice in relation to LGB families and relationships is increasingly being set within a statutory framework and associated guidance (for example, civil partnership registrations with the context of the Civil Partnership Act, adoption with the context of the Adoption and Children Act). However, evidence suggests that professionals may still require guidance on how to respond appropriately to LGB people and their families and that discrimination still exists against same-sex couples and LGB people in some areas of family policy and practice.

Relationships and households

Although there is a great deal of information on the implications of the Civil Partnership Act for same-sex couples the review found no published references on how registrars should respond to the needs of same-sex couples during the registration process. Such guidance may be all the more
necessary now due to the recent ruling of an employment tribunal of religious
discrimination against registrars who object to conducting civil partnerships
because of their strong religious beliefs. Best practice on how to respond to
LGB households and ‘families of choice’ is discussed in the chapter on health
and social care (for example, Royal College of Nursing and UNISON 2005).

LGB families

Most guidance on best practice relevant to LGB families has related to the
process of adoption and fostering. For example, Creegan et al (2007, p. 54)
provide a ‘checklist for action’ for local authorities in relation to LGB fostering
and adoption that includes the following advice:

- Proactively welcome potential lesbian, gay and bisexual foster and
  adoptive carers, for example by advertising in the local gay press;
- Ensure that selection focuses on the adults’ caring abilities and the
  child’s needs, rather than the applicants’ sexuality. Do not subject
  lesbian, gay and bisexual people to different or additional procedures;
- Provide sexuality training to all those involved, including placement
  officers and adoption panels;
- If possible, provide specific support, such as a social network, for
  lesbian, gay and bisexual carers;
- Take prompt action to address homophobia. Be prepared to discipline
  staff or de-register carers;
- Liaise with the Albert Kennedy Trust – a charity providing lesbian, gay
  and bisexual foster carers for lesbian, gay and bisexual young people
rejected by their families or experiencing difficulties in care – and include them on your list of leaving care and fostering agencies.

Other guidance on assessing lesbian and gay foster carers and adopters is available via the British Association of Adoption and Fostering from their website.23

There is also continuing support for LGB parents. For example, Pink Parents24 is a national project, managed by the D’Arcy Lainey Foundation and aims to reduce the isolation and discrimination that LGBT families face. The organisation offers support and guidance in relation to all LGBT parenting issues. They also offer children and young people, within LGBT families, a place to share their experiences, through meetings, social events and activities (Stonewall 2007, p. 18). Saffron (2001) has also written ‘the complete lesbian parenting book’ that includes the experiences of birth mothers, co-parents, step-mothers, single mothers, children, fathers and donors’ as well as a range of information about lesbian parenting (for example, adoption and fostering, step-parenting, homophobia at school, coming out to children, legal recognition of co-parents, donor insemination through clinics) from a self-help point of view.
4.7 Conclusions and research gaps

The need for baseline and comparative data on LGB families and relationships

There is a rich body of qualitative and small-scale survey research detailing the developments and experiences found in relation to same-sex relationships, households, experiences of family life and LGB parenting. However, it is difficult to put these experiences into context in the absence of baseline statistics of patterns of same-sex relationships and LGB families in comparison to heterosexual relationships and families. Key information is lacking in three main areas:

- same-sex couples: for example, the number of same-sex couples, the proportion of same-sex couples who are civil partners and the longevity of same-sex relationships relative to heterosexual married couples and unmarried heterosexual cohabiting couples;
- patterns of households and support among LGB people, including the number of one-person and single households, the extent to which these patterns are different from heterosexual patterns of households and support;
- number of households headed by LGB parents and the number of children in families with LGB parents.

Stonewall (2007, p. 18) note that inclusion of a question on sexual orientation in the Census would be key to providing much of this information. However,
despite the need for statistical information, there will also need to be further qualitative work that can detail the experiences of same-sex couples, LGB households and LGB families in the context of improved sampling frames as well as research that can explore issues of LGB relationships and families in comparison to the experiences of heterosexual people. There is also a greater need for research that focuses explicitly on families and households involving bisexual people.

Robust longitudinal studies on LGB parenting

There was a significant and growing body of work on LGB parenting and its impact on child welfare and development. While overall this research suggests that there is no detrimental impact from being raised by LGB parents, the criticism levelled at many of the studies for poor methodological rigour needs to be addressed. Once again, the ability to develop studies that are not based on limited or convenience samples will depend on the established of adequate sampling frames and the inclusion of appropriate comparative samples with heterosexual families. Additionally, there is a need for more longitudinal studies that explore the experiences of LGB parenting over time. A significant gap in the research is to explore the experience of LGB parenting over time from the point of view of children and young people, particularly in the context of continuing homophobia in schools and the wider society.
Researching LGB families and relationships in a new legislative context

One of the most significant aspects of the review of research relating to families and relationships is the substantial change in the legislative context affecting same-sex couples and LGB families. There has been a substantial shift from the need for research to make the case for LGB partnership and parenting rights towards the need for research that explores the experiences of same-sex couples, and LGB parents and their families, in the context of a new legislative framework. New research will need to focus attention away from the value of same-sex relationships and LGB parenting *per se* to examine factors affecting access to new partnership and parenting rights (for example, what factors encourage or prevent the take-up of civil partnerships?; are the needs of LGB adopters being met by adoption services?). It will also need to refocus attention away from issues such as whether LGB people make good parents, and to ask what qualities make good parents across different sexual orientations. Similarly, rather than asking whether LGB households lack support, it will be necessary to examine which type of households lack support across sexual orientations and how their needs can be met. Although sexual orientation may be a factor in relation to these issues, researching families and relationships in a way that presumes that LGB families and partnerships are less desirable is less tenable.
5 EDUCATION

Research in education focused mainly on the issue of addressing homophobic bullying, both for children and young people and for teachers. Research on wider educational issues appeared to be very limited and we found virtually no research related to sexual orientation in further or higher education. There was a body of research that had begun to reveal the relationship between heterosexism, homophobia and educational attainment but, apart from some connections between homophobic bullying and absenteeism, these issues were not fully explored. Research in this area needs to be considered in the context of legislative changes over the last 10 years and additional research is still needed to assess the impact of recent legislation on the policies and practices of educational institutions.

5.1 Legislative and policy context

Key legislation in relation to education and sexual orientation includes the Learning and Skills Act (2000), and related guidance on sex education in schools, and the Equality Act (Sexual Orientation) Regulations (2007) and of course the Employment Equality (Sexual Orientation) Regulations (2003) (discussed in more detail in Chapter 6) in relation to teachers and other school employees. However, it is also important to understand the historical context of legislation on education related to sexual orientation in order to appreciate the nature of much of the research.
Section 28(2a)

Until 2000 in Scotland, and 2003 in England and Wales, the context of education and discrimination based on sexual orientation was very much defined in relation to Section 28 of the Local Government Act (1988) (Section 2a in Scotland). Controversially, this Section stated that a local authority should not:

- 'intentionally promote homosexuality or publish material with the intention of promoting homosexuality';
- 'promote the teaching in any maintained school of the acceptability of homosexuality as a protected family relationship'.

Although the aim of the Section among its proponents was to limit discussion of sexual orientation, it technically never actually prevented teachers from discussing sexual orientation in the classroom or from discussing issues such as sexual health promotion. For example, in the context of the rise of HIV/AIDS, the Section stated that neither of the above clauses should be taken 'to prohibit the doing of anything for the purpose of treating or preventing the spread of disease' (see Thorp and Allen 2000, p. 7). At the same time, the Section only applied to local authorities and not to teachers per se. Subsequently, responsibility for sex education was passed from local authorities to school governors by the Learning and Skills Act (2000).

Despite the lack of the applicability of the Section to schools, it did nonetheless have a detrimental effect on discussion of sexual orientation in education. Thorp and Allen (2000) state that, arguably, Section 28 did exactly
what its supporters wished, by ‘limiting the discussion of homosexuality in schools’. It did so by creating ‘misconceptions about its scope and meaning (Thorp and Allen 2000, p. 13). For example, Douglas et al (1997) found that, of 307 randomly selected schools in England and Wales, the majority of teachers were uncertain about what responsibilities the Section placed on them. Similarly, even after the repeal of the Section, it seemed to leave a legacy of confusion in education with regards to addressing sexual orientation, with some local authorities also explicitly expressing a desire to retain like elements of the provision (for example, Kent County Council) (Gillan 2003). At best, the Act engendered confusion within the teaching profession with regards to the issues that they could cover around homosexuality in the classroom and the help that could be provided to pupils experiencing homophobic bullying. At worst, the Act provided a pretext for local authorities and educational institutions to conveniently sideline discussion of issues related to sexual orientation or to homophobia and heterosexism in the educational sphere.

**Learning and Skills Act (2000) and related sex-education guidance**

Section 28 elicited a strong negative response from LGB groups and from many children’s organisations, trade unions, health experts, school governors and teachers themselves. It was repealed in Scotland in 2000 and in England and Wales in 2003. Following repeal the context of the discussion of sexual orientation was set by the Learning and Skills Act (2000) and related guidance on sex and relationship education (Schools Out 2003).
The current government position is that the sexual orientation and relationships of LGB children, young people and the children of LGB families should neither be promoted nor stigmatised. The Learning and Skills Act (2000) states that, when sex education is given to registered pupils in state maintained schools, they must ‘learn the nature of marriage and its importance to family life and bringing up of children’. However, sex and relationship guidance (issued at the time by the DfEE) also stated that there are ‘strong and mutually supportive relationships outside marriage’ and that ‘care needs to be taken to ensure there is no stigmatisation of children based on their home circumstances’.

More specifically the guidance also states that ‘young people whatever their developing sexuality need to feel that sex and relationship education is relevant to them and sensitive to their needs’ and that teachers ‘should be able to deal honestly and sensitively with sexual orientation, answer appropriate questions and offer support’. It also states that ‘schools need to be able to deal with homophobic bullying’ and that schools should feel able to deal with the harm and distress that bullying can cause, including when it is ‘related to sexual orientation or any other reason’. Notably, Welsh assembly circular, Respecting others: Anti-bullying (23/2003) also recognised that schools should produce anti-bullying policies that included anti-homophobic bullying measures (Parken 2009). However, in the introduction to the guidance on the Learning and Skills Act it is also made clear that ‘there should be no direct promotion of sexual orientation’ (see Schools Out 2003; Thorp and Allen 2000, p. 26).
The Equality Act (Sexual Orientation) (2007) in education

More recently the context of education has also been affected by the Equality Act (Sexual Orientation) (2007). These regulations make discrimination on the grounds of sexual orientation unlawful in a number of areas including education in schools and provide individuals with the right to seek damages and redress through the courts if they believe they have been discriminated against because of their sexual orientation. A useful summary of the impactions of the Act for schools is available through teachernet (Teachernet 2007). The regulations make it unlawful to discriminate against a person:

- in the terms on which it offers to admit him or her as a pupil;
- by refusing to accept an application to admit him or her as a pupil;
- in the way in which a pupil is afforded access to any benefit, facility or service;
- by refusing access to any benefit, facility or service;
- by excluding him or her;
- by subjecting him or her to any other detriment.

Notably, Teachernet (2007) state that ‘schools that already employ non-discriminatory practices and adhere to DCSF guidance should already be acting within the spirit and letter of the Regulations’. However, they observe that ‘schools will need to make sure that gay, lesbian or bisexual pupils, or the children of gay, lesbian or bisexual parents, are not singled out for different and less favourable treatment from that given to other pupils’. They should also ‘check that there are no practices which could result in unfair, less
favourable treatment of such pupils’ and ‘ensure that homophobic bullying is taken as seriously and dealt with as firmly as bullying on any other ground’.

Some schools with a religious ethos have expressed concerns about these regulations in relation to their teaching on sexual orientation. The Teachernet guidance states that, ‘provided their beliefs are explained in an appropriate way in an educational context that takes into account existing guidance on the delivery of SRE and RE, then schools should not be acting unlawfully’.

However, ‘if a school conveyed its belief in a way that involved haranguing, harassing or berating a particular pupil or group of pupils then this would be unacceptable in any circumstances and might constitute unlawful discrimination under these regulations’. We found no research that had explored these specific issues to date.

5.2 General issues in schools and training

As throughout this chapter, research focused largely on the issue of schools with only very limited discussion of discrimination in education outside of schools.

Schools

Keogh et al (2006) argue that heterosexual gender norms, which do not admit non-typical sexual expression, dominate the education system in Britain. Indeed, the authors argue that the heterosexual nature of much of sex and relationship education training serves to alienate and marginalise LGB young people. Stonewall (2007) argue that unfounded anxieties still persist over
teaching young people about same-sex relationships; namely, that if children are taught about LGB people, they will become lesbian, gay or bisexual themselves. A report by the CLG (2007) illustrates the difficulties with broadening the nature of sex and relationship education for many children because parents have the right to have their children withdrawn from sex and religious education because of their religious convictions. The challenging experiences of LGB young people are further compounded by the lack of knowledge that teachers often have about the issues that affect them. Hunt and Jenson (2007) report that seven in ten pupils have never been taught about LGB issues or had these issues addressed in class, while four in five LGB pupils have no access to information on LGB issues and more than 60 per cent don’t have an adult they can talk to at school.

Research shows that LGB young people may be confused about their sexual orientation during their years of education. Many young people know they are LGB by the age of 11 or 12, or have feelings of being different, but do not come out until they are 15 or 16. This period has been referred to as the ‘isolation years’ in which children and young people may be particularly in need of support (LLGBC 2005). This view was confirmed in a study by the Space Project (2002), which reflected previous findings, that is, that ‘young people reported experiences that led to feelings of isolation, having a lack of support, a need for information about lesbian, gay and bisexual lifestyles, and a request for more awareness and acceptance of their “different” sexualities’. They also reported ‘difficult experiences at school, and a need for local service providers to address their specific needs’. Notably, within the context of the support that could be made available to LGB young people, Imich and
Bayley (2001) argue that educational psychologists can make a positive difference.

Training

Research on general issues relating to education and training outside schools appeared to be very limited. However, Mann and Weaver (2003), in their small-scale survey of 52 HIV positive gay men in Richmond, found that many participants were reluctant to access adult learning opportunities in order to return to work because they considered that they would be unsympathetic to their condition and to their sexual orientation.

5.3 Homophobic bullying

5.3.1 Levels of homophobic bullying in schools

The majority of the reviewed literature focused on homophobic bullying that takes place within schools. Evidence suggests that homophobic bullying is an increasing problem in schools and that LGB young people, and those perceived to be LGB, may be more at risk of bullying (House of Commons Education and Skills Committee 2007; Hunt and Jensen 2007). Indeed, Hunt and Jensen (2007, p. 3) found in their survey of 1,145 young people of secondary school age who were lesbian, gay or bisexual (or who thought they might be) that 65 per cent had experienced homophobic bullying. Other studies have provided figures on the levels of bullying for LGB young people compared to their heterosexual counterparts. For example, some studies estimate that between 30 and 50 per cent of LGB young people have
experienced some form of bullying in secondary schools compared with 10–20 per cent of young people who have experienced general bullying (Hunt and Jensen 2007; Fish 2007; see also Rivers and Duncan 2002). Other literature which points to the prevalence of homophobic bullying within schools includes the review by Warwick et al (2004, p. 8) of homophobic bullying. They report on one UK study that compared the experiences of 1,200 lesbian, gay and bisexual people with 1,200 heterosexual men and women. Lesbians and female bisexuals reported being bullied more often at school (30 per cent and 35 per cent) than young heterosexual women (20 per cent). Gay men were bullied more often when young (51 per cent) than heterosexual men (47 per cent) (see Rivers and Duncan 2002). Cowan (2007) also found that 36 per cent of the general population that they surveyed reported having seen anti-gay bullying at school.

5.3.2 Nature of homophobic bullying in schools

In terms of the form that bullying takes, a review of the research on sexual orientation conducted by Stonewall (2007) found that lesbian and gay people were subjected to both verbal and physical abuse within schools. Warwick et al (2004, pp. 9–10) also report that ‘males were more likely to report being physically assaulted than females, and lesbian and bisexual women were more likely to report that no one would speak to them while at school (see King et al 2003).

In terms of verbal abuse, Thurlow’s study (2001) of homophobic pejoratives, involving 377 14 and 15 year olds, found that 10 per cent of the 6,000 most
vitriolic pejoratives generated were of a homophobic nature. Also, participants rated homophobic abuse as less serious than racist abuse. However, boys in the sample not only reported more homophobic pejoratives than girls, but also rated them more seriously. The study goes on to conclude that the evidence indicates the high prevalence of homophobic pejoratives and the relatively ‘flippant’ way in which they are used.

Stonewall’s School Report (Hunt and Jensen 2007) found that, ‘even if gay pupils are not directly experiencing bullying, they are learning in an environment where homophobic language and comments are commonplace’. In fact, 97 per cent of young people in their survey who were LGB, or thought they might be, had heard derogatory use of phrases such as ‘dyke’ or ‘poof’ at school (Hunt and Jensen 2006, p. 3). More recently, a study conducted by the Association of Teachers and Lecturers (ATL) also confirmed this view in the UK. The study asked teachers in nursery schools upwards to secondary schools which terms of abuse they had heard children and young people use. The report quoted on the BBC website indicated that 83 per cent of teachers had heard the word ‘gay’ used as a term of abuse, compared to 59 per cent for its nearest rival ‘bitch’. ‘Poof’ (29 per cent), ‘batty boy’ (29 per cent), ‘queer’ (26 per cent), ‘lezzie’ (24.8 per cent), ‘homo’ (22 per cent), ‘faggot’ (11 per cent) and ‘sissy’ (5 per cent) were also commonly used terms of abuse. This suggests that being LGB is something that children and young people believe is undesirable and inferior, with such attitudes being deeply ingrained in the minds of children at relatively early age. Rivers and Duncan (2002) also found that homophobic name-calling in the classroom caused distress to LGB young people but that such verbal abuse often went unchallenged. Hunt and Jensen
(2007) report that only seven per cent of teachers are reported to respond every time they hear homophobic language and 30 per cent of lesbian and gay pupils report that adults are responsible for homophobic incidents in their schools.

5.3.3 The effects of homophobic bullying

The literature indicated that homophobic bullying could have extremely adverse effects on the experiences of young people, affecting both their performance at school and their mental health. In their review of the effects of homophobia in schools (Warwick et al 2004, p. 10) note that 'homophobic bullying has implications for the immediate and longer-term emotional well being of young people and their ability to achieve at school'. They state that research has shown that 'harassment of same-sex attracted young people can contribute, among other things, to lack of sleep, loss of appetite, isolation, nervousness, being upset or angry, elevated rates of actual and attempted suicide and self-harm, absenteeism, truancy and limited achievement' (for example, Dyson et al 2003; Rivers and D’Augelli 2001). Reviews of the relevant research also indicate that such bullying can lead to low attendance and high absenteeism, poor academic attainment, low self-esteem, self-harming behaviours, substance abuse and suicidal ideations and behaviour (Creegan et al 2007; Keogh et al 2006; Thompson and Johnston 2003).

Absenteeism and its possible affects on school outcomes were key issues. In his retrospective study, Rivers (2000) found that, although not all same-sex attracted young people who experienced homophobic bullying absented
themselves from school (for example, by feigning illness or truanting), around two-thirds did. He also found that absenteeism and isolation could impact on academic performance, particularly on ‘A’ level results, and/or pupils’ decisions to stay on at school post-16. Hunt and Jensen (2006, p. 3) found that seven out of ten gay pupils in their survey who experienced homophobic bullying stated that it had an impact on school work and half of those who experienced such bullying ‘skipped school at some point because of it’. Another key issue was the affect of homophobic bullying on mental health and its link to self-harm and suicidal thoughts. In a study of the long-term correlates of bullying, 53 per cent of adult lesbians and gay men reported contemplating harming themselves as a result of being bullied at school, while 40 per cent indicated they had attempted to harm themselves or had attempted suicide on at least one occasion (Rivers 2001). ChildLine (2001) also discovered that homophobic bullying is one of the key causes leading to children feeling suicidal.

5.3.4 Reasons for the persistence of homophobic bullying in schools

Absence of anti-homophobic bullying policies or strategies

Stonewall (2007) attribute the high prevalence of homophobic bullying within schools to a lack of strategy and policy mechanisms within these schools for dealing with the issue. The work by Douglas et al (1999) supports the conclusion that little had been done within schools to deal with the issue of homophobic bullying. At the time of their study of 307 secondary schools in England and Wales, they found that school policies on bullying seldom
referred to LGB issues. This was despite the fact that staff were aware of the homophobic bullying that went on in schools. Subsequently, Warwick et al (2001) also discovered that teachers ‘were aware of homophobic bullying but were confused, unable or unwilling to address the needs of lesbian and gay pupils’.

Such a view was understandable in the context of the continuation of Section 28 in England and Wales at the time of most of the reviewed research. However, research conducted since the repeal of the Section 28 often continues to indicate the absence of adequate anti-homophobic bullying policies. For example, in a review conducted by O’Loan et al (2006) for the Scottish Executive they found that very few schools had explicit anti-homophobic bullying policies incorporated into their general anti-bullying practices. Estyn, the Inspectorate for Education and Training in Wales, has also made it clear in guidance that schools should develop effective anti-homophobic bullying policies (Estyn 2006). Other studies further reinforce the message that local authorities, head teachers, governors and school staff still need to play a pivotal part in tackling homophobia (Keogh et al 2006, Fyfe et al 2006). Hunt and Jenson’s (2007) research revealed that only a quarter of schools say that homophobic bullying is wrong in their school, but that in schools that have said homophobic bullying is wrong, gay young people are 60 per cent more likely not to have been bullied.
The issue of heterosexual masculinity and femininity

Research suggests that the disparagement of homosexuality and the desire to be seen as heterosexual among children and young people is a significant factor in the reproduction of heterosexuality and in the outcome of homophobic bullying. Various studies focus on the issue of masculinity and peer socialisation among boys as a way of gaining a purchase on homophobic bullying in schools. It has been found that boys and young men, whether or not they identify as gay or bisexual, appear to particularly sensitive to comments that call into question their heterosexuality and masculinity, sometimes reacting violently to such suggestions (Thurlow 2001; Kimmel and Mahler 2003). Phoenix et al (2003) conducted 45 group discussions and two individual interviews with 11–14 year-old boys attending 12 London schools. A key finding ‘was the importance of being able to present themselves as properly masculine in order to avoid being bullied by other boys by being labelled gay’.

Other research suggests the importance of peer influence on the views of boys about homosexuality. For example, Ashley’s study (2003) of children in primary school concluded that peers, not teachers, are the key role models for boys. Findings by Phoenix et al (2003) show that some boys from Black and minority ethnic communities particularly pursued ‘hyper’-masculine identities, including the overt display of violence and/or sexual prowess in order to show that they were not gay. Notably, Warwick et al (2004, p. 11) indicate that in-depth studies highlight ‘that striving to be a particular sort of boy or young man can have an impact on achievements at school, with masculinity in some
schools and among some young people being defined in opposition to studiousness, so limiting some male pupils’ will and capacity to learn’ (Renold, 2001). This is also shown, for example, in the criticism and accusation current among some young people that studious pupils or pupils who take an interest in their work are ‘gay’. Challenging homophobia in schools may help to promote achievement among the wider school population.

By comparison there is relatively limited discussion of the role of heterosexual femininity in homophobic bullying. Warwick et al (2004, p. 12) report that physically active girls are particularly likely to have their heterosexuality questioned due to the traditional link between masculinity and sport. They state: ‘this not only limits some girls’ and young women’s willingness to participate in sports but also can affect their romantic relationships. Being teased or bullied for not going out with a ‘proper girl’ may encourage some boys to end the relationship (Cockburn and Clarke 2002). The result is that the activity and behaviour of girls is restricted and controlled for fear of being called a lesbian.

5.4 Homophobic bullying of young people outside of schools

Much of the literature on homophobic bullying tends to focus on either primary or secondary schools, at the expense of the further and higher education sectors. The only exception to this is the study conducted by LGBT Youth (2006) on Scottish colleges and universities.27 Even then, this study focuses largely on exploring with stakeholders the barriers and facilitators to compliance with Employment Equality (Sexual Orientation) Regulations.
Furthermore, although Keogh et al. (2006) mention homophobic bullying that exists outside of the school environment, they also note that very little of the work deals with the homophobic bullying that occurs in other places where young people may frequent (for example, youth centres).

5.5 Impact of homophobia in schools on teachers

Another area of research discussed in the literature was the impact of homophobia in schools on teachers (for example, Creegan et al. 2007). Prior to the Employment Equality (Sexual Orientation) Regulations, teachers who were LGB had to judge carefully whether and how they should make their sexual orientation known to colleagues and pupils (Koschoreck 2003). Studies of the experiences of lesbian and gay teachers, mostly small-scale and in-depth studies, noted the challenges faced when working in ‘heteronormative’ settings. Warwick et al. (2004, p. 19) note that, historically, concerns were ‘expressed about the proximity of people who are attracted to their own sex for fear that children’s sexual innocence will be tainted and their (hetero) sexuality disoriented’ (Blount 2003). Teachers were fearful about what would happen if their sexual orientation became known to colleagues and pupils. It has been found that pupils and staff who display a personal dislike of homosexuality can undermine the professional practices of lesbian and gay teachers. Pupils may disrupt classes through the use of homophobic taunts and harassment, while colleagues and head teachers may provide little support in protecting teachers from homophobic abuse and may even put pressure on them to resign (Irwin 2002). However, more recent studies suggest that the general population are more supportive of LGB people as
teachers than in the past. For example, by 2007 only 18 per cent of the general population said that they would feel uncomfortable if their child’s teacher was LGB (Cowan 2007, p. 8). Other similar findings are reported by Warwick et al (2004, p. 19). Further research is needed into the experiences in the context of how the legislation stands now, both in terms of being able to challenge homophobic bullying and the employment rights of LGB teachers and other staff.

5.6 Best practice

As with the research in this area, best practice issues focused in challenging homophobic bullying. Warwick et al (2004) state that, ‘as with tackling bullying in general, preventing homophobic bullying requires action to be taken across the whole school (see also Smith and Samara 2003). Specific examples of best practice in this respect include:

- providing continuing professional development for school staff;
- providing support services for pupils (or at least referrals to these);
- providing pupils with opportunities to voice their concerns;
- broadening the curriculum, and ensuring that texts, videos and other curriculum sources include realistic portrayals of same-sex attracted women and men (Warwick et al 2001).

Warwick et al (2004, p. 13) also provide an audit checklist that has been developed through existing work challenging homophobia in schools. This includes whether:

- the anti-bullying policy includes reference to homophobic incidents;
• the equal opportunity policy makes reference to sexual orientation;
• the senior management team support activities to address homophobic bullying;
• the sex and relationship education addresses sexual orientation;
• there is training for staff to address issues related to homophobia and sexual orientation.

Others have also provided checklists for staff involved with education working in local authorities. Creegan et al (2007) make specific suggestions, including:
• provision of guidelines on homophobic bullying to schools;
• provision of sexuality training to all teaching staff at schools, not just those that deliver sex education;
• raising teachers' awareness of local LGB groups whom they can refer pupils to;
• providing a safe environment for LGB staff;
• the inclusion of sexuality monitoring in education services;
• encouraging LGB people to become involved in education (for example, as governors);
• ensuring that staff are acquainted with legislation relevant to LGB issues and education.

Some teachers have reported feeling unprepared to tackle issues related to sexual orientation and homophobia confidently (for example, Douglas et al 1997). The best approaches, however, utilised the interactive teaching and learning activities gained from PSHE (personal, social and health education)
and other subjects to help address homophobia. It has been reported that ‘these sorts of interactive teaching and learning activities… have been shown to be useful in assisting pupils learn about sexualities and homophobia, providing students with opportunities for reflection on the needs of their peers – including same-sex attracted young people – on their own sexuality-related values and understandings, and on the forms of support that might best provide for those encountering homophobia’ (Warwick et al 2004, p. 14; see also Robinson and Ferfola 2001).

A range of initiatives and resources were identified from the literature. These included:

- the Education for All campaign, set up by Stonewall in partnership with a broad coalition of organisations including Youth Scotland and various government departments;²⁸
- the Education Action Challenging Homophobia group, which aims to challenge homophobia in schools through education and provision of support for young people who may be experiencing it;²⁹
- the Stand up for us – challenging homophobia in schools resource;³⁰ This is a resource that was developed as a part of the National Healthy Schools Standard which aims to raise awareness within schools about homophobia and homophobic bullying;
- the Joint Action Against Homophobic Bullying (JAAHB) project.³¹ This project is set up in south-west England and involves partnership work between LGBT organisations, LEAs, the police and other stakeholders. The project aims to encourage schools to become safe environments for all children;
• *Schools out*, which is an organisation which works for equality for LGBT people within education through the provision of training for teachers, pupils and advice on legislation and policy;\(^{32}\)

• *Responding to and preventing homophobic bullying in schools* (2007) is a published resource for teachers produced by the DCSF (DCSF 2007);

• *Safe to Learn* (2007) is an initiative launched by the DCSF offering help in tackling homophobic bullying in schools (DCSF 2007);

• *Respectme* anti-bullying campaign in Scotland;\(^{33}\)

• Stonewall’s Education Champions Programme (campaign to work with local authorities to tackle homophobic bullying);**

• Stonewall’s Youth Volunteering Programme.***

Significantly, LGBT Youth Scotland have also created a useful web-based resource to help young people who may be experiencing homophobic bullying.\(^{34}\) Finally, Imich et al (2001) also argue that there is real scope for educational psychologists to make a difference to the educational experiences of LGB young people.

### 5.7 Conclusions and research gaps

**Current policies and practices in relation to homophobic bullying and support for LGB young people**

Although there was a considerable body of research in relation to homophobic bullying and sex education and the attitudes of teachers towards addressing these issues, much of this research is now out of date because of changes in the legislative context. Knowledge of whether current policies and practices
address these issues would be greatly enhanced by a systematic survey of them. In addition to gauging the current climate, such research could also map good practice in order to inform policy and practice development.

The relationship between heterosexism, homophobia and educational outcomes

Qualitative research suggested that heterosexism and homophobia among peers (for example, in the use of pejorative language) could be linked to academic under-achievement among boys and restricted activities and sporting under-achievement among girls. Investigating peer-led ways to challenge these trends could help to improve the performance of all children as well as the performance of children and young people who are attracted to people of the same or both sexes.

Research also suggested a link between homophobic bullying, absenteeism from school and poor educational attainment. Further work is needed on the relationship between gender, sexual orientation and educational outcomes at secondary level, and at further and higher levels.

A wider focus on education and training as a whole

The work reviewed on education was highly focused on homophobic bullying. Although this area needs further work, so is research on the wider relationship between sexual orientation and education and training at all educational levels. One piece of research identified that gay men living with HIV may be
reluctant to enter adult learning because of how their HIV-status and sexual orientation will be received. This would be one interesting avenue to explore. Other areas to explore might include: the inclusion of issues related to sexual orientation in curriculum; the experiences of LGB students and staff in further and higher education; and the existing teaching on sexual orientation in universities and its relationship to reducing prejudice and discrimination.

The experiences of teachers, lecturers and other staff

There was a significant body of qualitative work on the experiences of LGB teachers in schools. Further research might survey the experience of teaching and lecturing staff in all levels of education, as well as other support staff. Such research could also examine the impact of being an ‘out’ LGB member of staff on the ability to challenge heterosexism and homophobia in the workplace and on career progression and pay.
6 EMPLOYMENT AND TRAINING

6.1 Legislative context

As with other substantive areas in the review, discussion of employment and training needs to be set in the context of legislative change. In particular, examination of inequalities based on sexual orientation in relation to employment and training need to be set in the context of the Employment Equality (Sexual Orientation) Regulations (2003). These regulations have significantly changed the legal context in which LGB people work and the degree of protection that they and heterosexual people have from discrimination based on their sexual orientation. Useful summaries of the regulations have been produced by the Labour Research Department (2003) and ACAS (2005) and Stonewall. The TUC have also undertaken a useful review of the anticipated issues arising from the implementation of the regulations and the experience of people who have taken cases of sexual orientation discrimination in employment and training (Fitzpatrick 2007).

The regulations came into force on 1 December 2003 enacting in UK law the sexual orientation provisions of the Framework Equal Treatment Directive of the European Union (2000/78/EC). They make it unlawful to discriminate against an individual on the basis of their sexual orientation, whether they are oriented to people of the same sex, opposite sex or both sexes. It covers areas such as recruitment procedures (for example, wording of advertisements), terms and conditions (for example, carers leave entitlements, free travel), promotions, transfers, dismissals and training. It also
covers vocational training that is not directly in an employment context. Since
the Civil Partnership Act any employment benefits extended to married
couples must also be extended to civil partners, although they do not have to
be extended to same-sex couples who are not civil partners unless they are
also extended to unmarried heterosexual couples. The only exemptions
allowed under the regulations are if there is a ‘genuine occupational
requirement’ for a job (for example, a gay man might be employed to counsel
young men who are coming out or to head a gay rights campaigning
organisation) or for the ‘purposes of organised religion’ (see below).
The regulations cover direct discrimination (for example, stating that the
employer will not employ LGB people) and indirect discrimination (for
example, only inviting married partners to social functions), harassment and
victimisation of people who attempt to use their rights under the regulations.
Harassment on the grounds of sexual orientation means violating a person’s
dignity or creating an intimidating, hostile or offensive environment and has
proved particularly significant in cases of sexual orientation discrimination.

Notably, anything done by a person in the course of their employment is
treated under the regulations as done by the employer. This applies whether
or not the harassment was done with the employer’s knowledge or approval,
although it is a defence for the employer to show that they took steps as were
reasonably practicable to prevent the harassment, either directly by the
person doing the harassing or in the course of their work (see Fitzpatrick
2007, p. 31). Most discussion of sexual orientation and employment needs to
be set in this context, although there are some aspects of the experience of
employment and training for LGB people that appear to be continuous despite
the legislation or where the regulations appear to have had limited affect to date.

6.2 General research on experiences of LGB employment

Although there is a significant body of quantitative and qualitative research describing the discrimination and inequalities experienced by LGB employees, the absence of official information of the size of the LGB population relative to the heterosexual population makes meaningful comparative analysis difficult. Purdam et al (2007, p.14) observe that a ‘major gap in existing evidence’ is that the ‘key sources for measuring labour market circumstances in the UK – the Census and the Labour Force Survey – do not collect information on the sexual orientation of respondents’.

6.2.1 Size of the LGB workforce

In the absence of such data estimates of the size of the LGB population tend to be extrapolated from government department estimates of the size of the LGB population as a whole or on inferences from Census or administrative data. For example, Stormbreak (2003) estimates that the proportion of the adult population that is gay or lesbian is 7–8 per cent and, using a conservative estimate based on these figures, that 1.4 million people who are working in the UK are either gay or lesbian (cited in Purdam et al 2007, p. 6). Similarly, Briscoe (2006) refers to a DTI report that says 5–7 per cent of the working age population are gay, lesbian or bisexual, while Arbsheibani (2006) draws on the Labour Force Survey and Census figures on the number
of reported same-sex cohabiting couples to suggest that such couples constitute 0.2 per cent of the working population. However, these estimates are only as good as the original data on which they were based. The problematic nature of these figures was discussed in chapter 2, indicating a significant gap in terms of robust information on the size and characteristics of the LGB workforce on which meaningful comparisons with heterosexual colleagues would need to be based.

6.2.2 General patterns of discrimination and inequalities

There have been a large number of surveys of patterns of discrimination faced by LGB people in the workplace (for example, TUC 2000; Stormbreak 2003), although they are often limited by their lack of comparative heterosexual groups and/or non-random or small samples. There have also been a number of qualitative studies and/or case studies of the experiences and views of LGB employees that have been useful in terms of detailing their experiences of discrimination and their specific concerns. Important examples of this before the Employment Regulations are Palmer (1993) and Robinson and Williams (2003); while an important example post the regulations is Colgan et al (2006)'s detailed qualitative case study of 16 employers, including a number of good practice employers. Key issues have included the following.

Fear of discrimination that prevents LGB people being open about their sexual orientation

Studies have repeatedly shown that a significant proportion of LGB employees fear discrimination and harassment if they are open about their
sexual orientation at work. Frost (2006) reports that as many as half of LGB staff hid their sexual orientation from employers or colleagues. LGB people are prevented from being open about their sexual orientation because of fears about career progression, losing their job (particularly in temporary employment) and because of the ‘macho’ or religious attitudes and behaviours of co-workers (Colgan et al 2006, p. 5). Their difficulties can also lead to unwanted assumptions about being heterosexual and feelings of isolation and lack of support (Keogh et al 2006, p. 18).

**Experiences of discrimination**

Studies indicated a seemingly high percentage of LGB employees who have experienced some form of discrimination. A TUC survey of employees suggested that 44 per cent had experienced some form of discrimination (TUC, 2000 cited in Denvir et al 2007, p. 33). Experiences of discrimination have ranged from discomfort or signs of embarrassment shown by managers and colleagues towards the person’s sexual orientation, to exclusion, homophobic comments and insults, direct or constructive dismissal, lack of promotion and denial of employee benefits (Colgan et al 2006, p. 13; Keogh et al 2006, p. 19; Robinson and Williams 2003). Experiences of direct discrimination have formed a significant proportion of complaints made against employers and colleagues and that have been taken to employment tribunals (see below).
**Harassment and homophobic bullying**

Stonewall (Hunt and Dick 2008) found, in their study of 1,658 lesbian, gay and bisexual people across Britain, that one in five LGB people ‘have experienced bullying from their colleagues because of their sexual orientation’ during the period since the introduction of the Regulations. Among those who had been bullied, a quarter had been bullied by their manager, half by people in their own team and a third by people junior to them. LGB people in occupational groups C2DE were 50 per cent more likely to have been bullied than those in occupational groups ABC1 (Hunt and Dick 2008, p. 18). Frost (2006) reports that 23 per cent of LGB staff in one study had been harassed or bullied compared to 10 per cent of staff as a whole. Harassment and bullying have included homophobic comments and insults, openly offensive graffiti, physical intimidation and assault (Colgan et al 2006, p. 13; Keogh et al 2006, p. 18). Such cases have also formed a significant proportion of the complaints made against employers and colleagues that have been taken to employment tribunals (see below).

**Homophobic workplace cultures and their association with restricted employment options**

Colgan et al (2006, p. 9) found that a ‘range of factors had influenced the work and career choices of LGB respondents including: the transition from school to work; type of work; choice of sector; organisational and workplace culture; geographical location; gender and equality politics and negotiating identities at work’. Choice of work environments tended to reflect those that were perceived as being LGB-friendly. The researchers also found that ‘macho
cultures’ within both white and blue-collar professions led some of the respondents, particularly gay male respondents, to avoid particular organisations or to move on from them. Discrimination and harassment could also ‘play a part in lesbian, gay and bisexual workers’ decisions to avoid promotion or stay within certain parts of organisations’ thereby further restricting already reduced employment options (Colgan et al 2006, p. 5).

*Negatives outcomes from homophobic work environments such as poor productivity and/or leaving employment*

Bowen and Blackmon (2003) argue that the fear and threat of isolation are particularly powerful for ‘invisible minorities’ such as LGB people; not being able to be out ‘can inhibit social exchange and task exchange and reduce self-efficacy’. Working in a ‘gay friendly’ environment has positive impacts on job satisfaction, productivity and company loyalty for LGB people (Guasp and Balfour 2008), while working in a negative environment can cause LGB people to feel stressed, excluded, ostracised, self-censored and ultimately a desire to leave a job (Colgan et al 2006, p. 15). Importantly, ‘discrimination and harassment were reported to have played a part in the decisions taken by some respondents to leave organisations’ (Colgan et al 2006, p. 13), thereby reducing employment options and wider life opportunities. In their study Arabsheibani et al (2006) indicate that there is some evidence that gay men may also be more likely to be unemployed than their heterosexual counterparts.
6.2.3 General findings broken down subnationally

In their survey of 354 LGBT people in Wales, Robinson and Williams (2003) found that 20 per cent of respondents concealed their sexuality in the workplace and 25 per cent reported being dismissed from a job because of their sexual orientation. They also suggest that, while women in Wales were less likely to be ‘out’ at work than men, by comparison men were more likely to have been dismissed from a job, to have not received the same education and training as heterosexuals and to have been economically exploited because of their sexual orientation (Robinson and Williams 2003, p. 4). Keogh et al (2006, p. 18) also found in their survey of 463 people living, working and socialising in the London Borough of Lambeth that one in seven (14 per cent) of respondents ‘described problems at work and almost half of these felt their LGBT identity was relevant to the problem’. However, the studies suffer from having non-random samples and difficulties related to the recruitment of a hidden population to be able to draw more robust conclusions about the representativeness of these issues for their wider LGB population.

6.2.4 General findings intersecting with other communities

In 2008 Stonewall published research concerning the experiences, perceptions and expectations of lesbian and bisexual women and the impact that their sexuality might have on them at work (Miles 2008). Participants felt that being a lesbian was something that they had to think about in relation to their work though typically their sexual orientation was secondary, and felt to be something they could conceal if they wanted to. The extent to which sexual orientation was a concern at work related to the level of confidence women
felt about it. The research highlighted the importance of staff networks and positive role models in building confidence. That research apart we found no studies that specifically examined the employment and training experiences of groups intersecting with sexual orientation but there were some useful findings that could be drawn from general studies. Colgan et al (2006, p. 5) found that their findings underlined the ‘heterogeneity of LGB workers in terms of gender, ethnicity, disability, age, occupation, desire to be out at work, etc.’. In particular, they found that BME LGB participants reported a range of employment experiences including, ‘juggling multiple identities; seeking work away from family areas and businesses and the importance of racism and homophobia being challenged by both LGB and BME communities’. Disabled participants reported experiences of ‘isolation and exclusion from both LGB and disabled communities and of having to make decisions about whether to come out about both sexuality and disability’ (Colgan et al 2006, p. 10). A common trend across BME and disabled LGB employees in the study was that, as their LGB sexual orientation was less visible than other aspects of their identity, one way to manage multiple discriminations was not to be out about their sexual orientation at work.

6.2.5 LGB incomes, socio-economic position

Reliable research on the incomes of LGB people relative to heterosexual people is limited. Significantly, ‘it is generally perceived, and perpetuated through the media, that all gay people come from affluent, middle-class backgrounds’ (Stonewall 2007). This view may be confounded by the fact that it is easier for middle class people to move away from their communities of
origin, to come out and to participate in the visible symbols of the LGB community, such as the commercial scene of pubs and clubs and purchase of consumer products associated with LGB identity (for example, magazines, clothing). Consequently, findings like those reported by Curtis (2006) of a survey of 1,118 readers of Diva and Gay Times magazines that gay men’s and women’s earnings outstrip the average heterosexual person’s salary by £10,000 per year are likely to be unrepresentative and misleading. By comparison Purdam et al (2007, p. 15) state that no study to date offers a clear understanding of how the so-called ‘pink pound’ associated with higher disposable incomes may, or may not, be representative of either disposable income or general economic positioning of lesbians and gay men in the larger economy.

In their review of the socio-economic background of LGB people, Stonewall found only one major study that provided a comprehensive survey of gay and lesbian incomes and this was in the USA. According to this study gay men earn between 17 and 28 per cent less than similarly qualified heterosexual men (cited in Stonewall 2007, p. 29). Another recent study of the incomes of same-sex cohabiting couples using Census data in the UK found gay men in this type of household earned 1 per cent less than men living in equivalent heterosexual couples; but lesbian couples earned 35 per cent more than women in heterosexual couples (Arabsheibani et al 2006). However, when controls were included for education and the ‘graduate effect’, gay men in couples earned 6 per cent less than their heterosexual equivalents, while lesbians still earned 11 per cent more than their heterosexual equivalents. Nonetheless, caution should be taken in interpreting this work because of
sampling issues (see chapter 15, section 15.3) and because no direct comparison is made on the basis of possible gendered pay inequalities between gay men and lesbians (Parken 2003).

However, Arabsheibani et al (2006) do note that research on sexual orientation, discrimination and pay can be further complicated by age, education, and the concentration of lesbians and gay men in London and the south-east and in the public sector. It may be the case that, if gay men have lower incomes, this is because they are concentrated in sectors of employment, such as the public sector, where pay is generally lower, and this requires further investigation. At the same time, if lesbians have higher incomes than heterosexual women, this may be because of different patterns of gendered work and child care arrangements that seem to be found among same-sex couples and heterosexual couples identified in qualitative studies. These studies suggest that lesbians may be more likely to be childless and to be in full-time paid work, or to reject the gendered assumptions often found in heterosexual relationships that one partner should give up work to care for children, usually the woman. Once again, these suggested patterns require further statistical investigation.

6.3 Research relating to the impact of the Employment Regulations

Research relating to the impact of the Employment Equality (Sexual Orientation) Regulations has tended to focus on reviews of the number and experiences of cases taken under the regulations. Important quantitative analysis in this respect was undertaken by ACAS (Savage 2007), while
important qualitative analysis has been done for ACAS and the DTI (Denvir et al 2007). The TUC were also funded by the DTI to conduct a quantitative and qualitative analysis of all known cases of sexual orientation discrimination up to 2007, including published employment tribunal decisions, relevant higher court judgements, cases referred to ACAS and the Employment Tribunal Services and any other sources of additional information about cases that had been withdrawn, settled or otherwise disposed of (Fitzpatrick 2007).

Fitzpatrick (2007, p. 5) found that there was a lack of reliable figures on the exact number of sexual orientation discrimination cases with discrepancy between ACAS figures and those in the Employment Tribunal Service Annual Report, 2005–2006. Nonetheless, taken together the reviews by the TUC and ACAS provide a significant picture of the impact of the regulations in relation to individual cases.

6.3.1 Number of sexual orientation complaints

Savage (2007) conducted a statistical analysis of ACAS case records of all sexual orientation cases brought between January 2004 and August 2006, including a review of ET1 forms submitted by sexual orientation complainants and ET3 forms submitted by employers stating their grounds for resisting the claims. He found there were 470 cases in which sexual orientation was the main jurisdiction over the period. Two-thirds of sexual orientation complainants were men, with most sexual orientation claimants appearing to be lesbian and gay, although this was difficult to say as the ET1 forms did not routinely collect information on sexual orientation (Savage 2007, p. 18).
Seven in ten respondent employers belonged to the private sector, broadly reflecting the make-up of the UK workforce. Public sector claims were most likely to be brought against organisations in the criminal justice system, including the police and prison service, and local authorities (Savage 2007, p. 3).

6.3.2 Symmetricality and discrimination against people ‘on the grounds of’ sexual orientation

The fact that the regulations are symmetrical, thereby also protecting heterosexual people from discrimination, was shown in the case of Mrs E Hegarty v The Edge (Soho) Ltd in which a heterosexual woman made a successful case of direct discrimination when made redundant from a gay bar in London, only to be replaced by a gay man shortly afterwards (Fitzpatrick 2007, p. 14). There were also cases of discrimination against heterosexual people among the cases examined by Denvir et al (2007, p. 5), although it was unclear whether these cases related to the perception that the heterosexual people were gay or lesbian, were in some way affiliated with LGB people or were cases of discrimination of LGB people against heterosexuals.

The phrase ‘on the grounds of’ sexual orientation has been taken to mean that discrimination can also occur on the basis of ‘perceived’ sexual orientation or ‘discrimination by association’ (Fitzpatrick 2007, p. 13). An example of direct discrimination against a person by association was seen in Brian Lacey v The University of Ulster and Paul Davidson. This, however, was
a significant decision in that Mr Lacey’s complaint on a failure to appoint was based on the inclusion on his application form of his research interest as including ‘homosexuality in Ireland’ (Fitzpatrick 2007, p. 13). Other cases on perceived sexual orientation have been less clear cut: for example, a case of a heterosexual car showroom salesman who took an unsuccessful case of harassment on the grounds of perceived homosexuality to an employment tribunal. At the time of writing the case had gone to appeal.

6.3.3 Cases of discrimination against LGB people

The reviews of sexual orientation discrimination cases in employment have consistently found that sexual orientation claims are dominated by allegations of bullying and harassment followed by examples of direct discrimination (Savage 2007; Denvir et al 2007). In their qualitative study of the experience of sexual orientation discrimination claimants, Denvir et al (2007, p. 5) found that interviewees often experienced both types of harassment with a pattern of bullying and harassment followed by an incident of direct discrimination immediately prior to taking an employment tribunal.

Fitzpatrick (2007, p. 45) notes that ‘there have not yet been any decided indirect discrimination cases on sexual orientation discrimination’. It is possible that this has arisen as many cases were expected to relate to discrimination against same-sex couples (for example, invitations to married partners at work functions that would indirectly exclude same-sex couples). These may have been avoided through awareness of the Civil Partnership Act
and the greater attention it has received in the media compared to the employment regulations.

**Direct discrimination**

Examples of direct discrimination in the research of Denvir et al (2007) related to allegations of discrimination in recruitment, employment contracts, pay, pension entitlements and working conditions. People interviewed for the research also generally reported that it was ‘assumed or suggested that they could not do their job as well as other colleagues, because of their sexual orientation’. Another theme was claimants who thought their employers were using disciplinary procedures unfairly or excessively to force them from the organisation and ultimately to use them to dismiss them. The way in which the procedures were used and the judgements that were made were ‘disproportionate to the professional mistakes of which they were accused’, and their heterosexual colleagues were treated differently. They also felt that the reasons given for the use of disciplinary procedures masked prejudice on the grounds of sexual orientation (Denvir et al 2007, p. 5). An example of direct discrimination is the refusal to employ a gay couple in a bar in a small Welsh village. The employer tried to justify the discrimination on the grounds that he thought employing a gay couple would be disastrous for his business, though he had nothing against gay people personally. However, the tribunal regarded this as a case of blatant direct discrimination.

Fitzpatrick notes there has also been a willingness on the part of tribunals to find in favour of LGB claimants, particularly if they have corroborating
evidence of the direct discrimination from colleagues or others (Fitzpatrick 2007, p. 46).

**Harassment and bullying**

When the regulations were proposed there was some concern that it would be difficult to draw a ‘proper dividing line between “innocent” banter and unlawful harassment’. But in reality most cases taken to tribunals have been cases of ‘crude harassment’ (Fitzpatrick 2007, p. 11). Examples of bullying and harassment based on sexual orientation are allegations of verbal abuse, name calling, sabotage of work, threats and physical violence, sexual harassment and unfair treatment by managers. The bullying and harassment were sometimes perpetrated by one or two individuals but in other cases was part of a wider culture of homophobia within an organisation (Savage 2007, pp. 3–4). Claimants often felt that managers were complicit in the harassment by not dealing with the problem or not remedying it sufficiently (Denvir et al 2007, p. 6). Often the bullying had gone on for a considerable period of time (up to three years in some cases) before a person would make a complaint (Savage 2007, pp. 3–4). The following are examples of harassment cases.

- Constant regime of homophobic behaviour – An employee left his job when it became known to a manager that he was gay and he was subjected to a regime of crude insults by his manager and other colleagues whom the manager had told. Even though the complainant in this case refused to take a formal grievance, the tribunal took the view that the employer had allowed harassment to take place with their knowledge. In addition to violating the dignity of the complainant and creating an intimidating, hostile, degrading, humiliating or offensive
environment, the tribunal also took into account that the employer had failed to add sexual orientation to their equal opportunities policy. It took this to mean that sexual orientation was being treated differently to other forms of unlawful harassment.

- Failure of public authority to deal adequately with homophobic bullying
  – The manager of a bookings officer in a theatre consistently made offensive and aggressive comments about the officer. The employer was found to have failed to have applied its grievance procedures to the complaints made by the complainant despite evidence from his partner and a former colleague of the harassment. Appropriate officers were not appointed to investigate the complaint and disciplinary proceedings against the manager were conflated with the investigation of the complainant’s grievance. The tribunal took the view that the employer had failed in their duty to protect the employee who had been bullied and harassed contrary to their own policies. This was an example where an employer failed to implement their own grievance policy in a sensitive and consistent fashion. Trying to deal with complaints of this nature in an informal way when they were clearly more serious was also thought to indicate an unwillingness to treat sexual orientation and harassment in an equivalent way to other forms of discrimination.

Other useful summaries of the nature of harassment cases are provided by Fitzpatrick (2007, pp. 31–7) and Creegan et al (2007, pp. 78–9).
6.3.4 Intersection of sexual orientation and religion and belief

A key area of concern has been the impact of the exemption from the Employment Equality (Sexual Orientation) Regulations where employment is for the ‘purposes of an organised religion’. In this case it was thought that some religious organisations may use their view that homosexuality is wrong to specifically attempt to exclude or dismiss LGB employees. However, a judicial review of this provision interpreted it narrowly, stating that it would only cover employment, ‘for example ministers, imams and rabbis’, as opposed to teachers who are employed ‘for the purposes of education’ or health workers, who are employed ‘for the purposes of healthcare’. Attempts by organised religion to discriminate on grounds of sexual orientation are therefore likely to be subject to ‘strict scrutiny’ (Fitzpatrick 2007, p. 23).

In addition, there have been concerns that religious organisations may try to use the Employment Equality (Religion or Belief) Regulations (2003) to:

- exclude LGB people as employees from organisations with a religious ethos;
- avoid having to deal with LGB members of the public on grounds of religious conscience;
- justify prejudiced treatment or harassment of LGB colleagues on grounds of freedom of religious belief.

Fears about exclusion of LGB workers have been raised in relation to specific provision under the religion and belief regulations that relate to ‘genuine occupational requirements’ for workers to be of a specific religion or belief in order to comply with the religious ethos of an organisation. However, there
have been no publicised cases of this nature to date (Fitzpatrick 2007, p. 20). The judicial review described above in relation to the purposes of organised religion under the sexual orientation regulations, and the unsympathetic response of tribunals to attempts by religious organisations to redefine jobs to exclude people with none or different religions (for example, McNab v Glasgow City Council, see Fitzpatrick 2007, pp. 20–3) suggests that such exclusions would have to be very narrowly defined to have to show a highly legitimate purpose in creating such exclusions.

A key case to date in terms of whether it is legitimate for employees of religious conscience to avoid dealing with LGB members of the public in circumstances where doing so may represent a change in the terms and conditions of their employment is the case of an Islington registrar. In this case the registrar, who had worked in her job for 17 years, argued that her religion taught her that same-sex partnerships are morally wrong so she could not perform civil partnership registrations. Her employer, Islington Council, disagreed and suspended her from her post after she refused to conduct any registrations. The employment tribunal took the view that the registrar had been subject to religious discrimination and harassment within the definition of the Employment Equality (Religion or Belief) Regulations (though it also acknowledges that were other incidents which had a bearing and so it is unclear as to what implications this ruling will have for similar cases). At the time of writing her employer was considering whether to appeal against the decision. The case raises considerable difficulties in relation to other equalities laws such as the Equality Act (Sexual Orientation) Regulations (2007) (which prohibit discrimination in the provision of goods and services) and in relation to the
Civil Partnership Act (2004) (which requires local authorities to conduct civil partnerships). In reality an accommodation is often reached that registrars who have strong religious beliefs against homosexuality are exempted from conducting civil partnerships, leaving them to colleagues with no religious beliefs or who feel less strongly on the issue. A key difficulty may arise in a local authority if all registrars wished to be exempted. Legal clarification and practice guidance in this respect would be welcome.

Evidence on whether people of faith would attempt to use the Employment Equality (Religion or Belief) Regulations to justify prejudiced treatment of LGB colleagues was divided. Qualitative research with people of faith suggested that there were a variety of responses to working with LGB colleagues. Some participants in Hunt and Valentine’s (2008, p. 7) research indicated that, although working with LGB people had not been easy for them, it could prompt them to ‘change the way they thought about gay people and their own role within a job’. While in some cases this changed their views about LGB people in a positive direction, in other instances the people of faith accommodated LGB people in their work lives by making a distinction between their private views and their professional role or by accepting that LGB people were entitled to a private life. None of the participants in the study felt that LGB people should not have the right to be openly gay at work. However, they did feel if they experienced ‘discomfort’ around LGB colleagues that they would have to do something about it, that is ‘their discomfort was their responsibility’. In one case this meant that the participant felt it necessary to leave her job to work in a different environment (Hunt and Valentine 2008, pp. 7–8).
However, in other research cases have been documented of attempts to justify prejudiced treatment of LGB colleagues on religious grounds. An example is the employment tribunal case of Mr T Apelogun-Gabriels v London Borough of Lambeth (outlined below).

**Distribution of homophobic material**

This was an unsuccessful claim of direct religious discrimination under the religion and belief regulations. A Christian council employee was dismissed for downloading extracts from the Bible that were hostile to homosexuals and distributing them to colleagues. He claimed religious discrimination but the tribunal took the view that it was the complainant’s conduct in distributing homophobic literature that was the reason for his dismissal not his religious beliefs. The fact that the employer provided a prayer room was taken into account in deciding that the employer was not discriminatory. The case shows that employers and trade unions can treat with scepticism claims that homophobic actions will be protected under the religion and belief regulations. Consequently, while employment tribunals may be sympathetic in some circumstances to employees who do not wish to deal with LGB people on grounds of religious conscience, they have been less sympathetic about religious conscience as grounds for prejudiced actions against LGB colleagues.

Despite the research on intersection of religion or belief and sexual orientation discrimination described above, the review found no research specifically addressing: the issues raised by the potential conflicts between the sexual orientation and religion and belief regulations in employment; the difficulties
such tensions might raise; or how to promote better working relationships between LGB employees and employees with religious or other beliefs. This would appear to be a significant priority for research.

6.3.5 Outcomes of sexual orientation discrimination cases

The pattern of outcomes of sexual orientation claims was broadly similar to cases brought under other discrimination jurisdictions, with around half resulting in a settlement between the claimant and the employer, a quarter being withdrawn, and one in seven proceeding to a full employment tribunal hearing. Where claimants settled this was due to advice from representatives or because of concerns over costs or the stress of continuing with the case. The median settlement figure was similar to that of other discrimination jurisdictions at £2,748. Four in ten claimants received less than £2,500 but one in seven received a large settlement figure of £10,000 or more (Savage 2007, p. 5).

Negative impacts on claimants

Some sexual orientation claimants asserted that the bullying and harassment that they had experienced caused them to develop mental health problems, including anxiety and depression, with some people included in the review also having contemplated suicide (Savage 2007, p. 4). When taking a case of discrimination, claimants also reported a range of problems such as: difficulty gaining a reference, thereby restricting future work opportunities; poor self-confidence and self-esteem attributed to the impact of prolonged bullying; and
the need to change their career or the place in which they lived in order to
regain employment (Denvir et al 2007, p. 7).

**General impact of the regulations on LGB people**

To date research examining the impact of the employment regulations on LGB people has come from smaller-scale case studies but there has been no large-scale survey of their impact among LGB people as a whole or among the general public. Colgan et al (2006) found that LGB people in their case study sample generally felt aware but not knowledgeable of the regulations. They drew on internal sources of information (for example, intranet, training, LGB groups) and external ones (for example, media, gay press, Stonewall, government websites) but their knowledge rarely came directly from their employer.

There was often a perception that the employment regulations had made little difference to good practice employers as these employers were already ‘ahead of the game’ having adopted equal opportunities policies including sexual orientation prior to the implementation of the regulations. However, positive impacts were identified among LGB workers in terms of creating an ‘impetus for new initiatives’ to tackle sexual orientation discrimination at work and a form of ‘leverage’ for LGB employee groups and networks. Over two-thirds of their LGB respondents also said that they ‘would be more likely to take a grievance’ if a problem arose on grounds of sexual orientation since the introduction of the employment regulations. This was because the regulations were viewed as giving them ‘greater confidence to challenge employers’ and
because the regulations were thought to provide a ‘more defined framework in which to pursue a complaint’ (Colgan et al 2006, pp. 16–17).

However, research still needs to be conducted on the experience of LGB people of the regulations among people who work for a range of different employers, not only ‘good practice’ employers, with a clear demarcation of experiences pre and post legislative change. Qualitative work being conducted by the National Centre for Social Research, funded by the ESRC, will help contribute to this picture, although is still a need for robust survey work.

6.3.6 Organisational and managerial handling of sexual orientation complaints

Organisational policies

Organisational and managerial cultures can have an important role to play in terms of whether LGBs experience positive or negative work environments and the extent to which they are prepared make a complaint when they experience sexual orientation discrimination. For LGB employees the ‘extent to which homophobia is accepted or challenged within the workplace is a key indicator of inclusion’. In particular, specific concerns have been related to the ‘enforcement of policy’ in organisations and the extent to which ‘organisations relied on LGB people to come forward and ‘whistle blow’ before tackling problems’ (Colgan et al 2006, p. 5). In his review of claims of sexual orientation discrimination, Fitzpatrick (2007, p. 34) shows that failure to adapt
equal opportunities policies to include sexual orientation or to enforce them
where they exist has been taken by employment tribunals as a failure to take
such discrimination seriously. Trying to ignore complaints or only taking
informal measures to alleviate a situation have also been taken to reflect an
unwillingness to treat sexual orientation harassment as seriously as other
forms of harassment.

**Management understanding**

Despite line managers and human resources managers being seen as
important sources of support to tackle sexual orientation discrimination,
employment research indicates that some managers have a poor
understanding of the issues and are not well-trained in how to handle them.
Stonewall’s Peak Performance, Guasp and Balfour (2008) reported that LGB
people’s experiences of being open about their sexual orientation in the
workplace, both positive and negative, is critically dependent on managers
who can be a barrier to change. In their *Annual Diversity Report* (2006/2007),
the Department for International Development (DFID) report their own
research, which showed that, although a lot of progress had been made,
‘there is a general lack of understanding, awareness and a reluctance to
disclose information around … sexual orientation issues’ (DFID 2007, p. 3).
They also found that addressing sexual orientation is still perceived as having
a low priority in DFID, with ‘less visible leadership’ and a ‘lack of capacity by
managers to deal with sexual orientation issues’ (DFID, 2007, p. 12). Where
poor handling of sexual orientation has occurred, research has indicated that
this may be due to poor training among managers. For example, in focus
groups with ACAS conciliators it was suggested that the reason why
managers sometimes failed to stop homophobic bullying and harassment ‘may be due to a lack of training or managers not receiving the support they need from human resources departments to tackles discrimination effectively’ (Savage 2007, p. 4). Such issues may be further exacerbated among smaller employers with some research reporting that awareness-raising strategies related to the regulations have tended to be mainly targeted at large employers (Bellis et al 2005, cited in Denvir et al 2007, p. 34).

Management handling of grievances
The reviews of sexual orientation employment tribunal cases has shown that claimants have been found to have little faith that internal grievance procedures will resolve their complaints of sexual orientation discrimination. There is consequently a tendency to want to ‘externalise’ their complaint from their organisation as soon as possible in order to receive a fair hearing. In their qualitative study of claims of sexual orientation discrimination, a strong theme found by Denvir et al (2007, p. 3) was that claimants said employers tended to ‘respond to their complaint by seeing them as the problem, rather than a victim of unfair treatment’. Claimants were often disciplined or demoted for poor work performance until they felt they had no option but to resign. Such employers also tended to deny allegations of sexual orientation discrimination and alleged incidents of bullying and harassment. In his review of complaints against employers based on sexual orientation, Savage (2007) found that claimants often alleged that managers were either joining in instances of bullying or harassment or failed stop it when it was reported. Some respondent employers used the fact that claimants had failed to instigate formal grievances prior to bringing an employment tribunal claim as a
defence arguing that the claims should therefore be struck out (Savage 2007, p. 4).

Reviews of employment tribunal cases have also highlighted incidents of prejudiced handling of grievances resulting in unfair hearings. It has been suggested that this indicates the importance of ensuring that all senior staff receive comprehensive training on avoidance of homophobia during disciplinary proceedings and more broadly that all workers are given training on treating LGB workers with respect (Fitzpatrick 2007, p. 16). Claimants thought that dispute resolution procedures were ‘flawed often exacerbating their experience of discrimination rather than resolving it’ (Denvir et al 2007, p. 3). Sexual orientation claimants ‘felt they did not receive a fair hearing in internal grievance procedures’, with their complaints often being ‘ignored or trivialised’ and sometimes resulting in ‘further abuse or victimisation’ (Savage 2005, p. 4).

Confidentiality and in some cases anonymity were perceived as necessary when making claims of discrimination and/or harassment. Colgan et al (2006, p. 14) found that their respondents would be particularly concerned about exposing themselves and generating a backlash when seeking a resolution to discrimination and harassment and felt that even supportive handling of a complaint could not guarantee a change in individual attitudes in the workplace. Where positive experiences of the management handling of sexual orientation issues in the workplace have been described this has tended to
relate to employers having good equal opportunities and anti-bullying and harassment policies that have been fully implemented.

### 6.4 Monitoring sexual orientation discrimination in employment

Issues relating to the difficulties of equality monitoring and meaningfulness of data without national, subnational or local baseline data were addressed in general in chapter 2. However, the issue of equality monitoring raises particular issues in relation to employment because monitoring applicants and the make-up of an existing workforce are essential elements in discovering whether some social groups are being disadvantaged and/or the impact of measures to promote equal opportunities. Stonewall have published detailed guidance on monitoring which includes ten steps to monitoring sexual orientation in the workplace (Cowan 2006). Reviews of equality monitoring to date have tended to note the way in which the difficulties associated with monitoring sexual orientation can be used to avoid doing so at all or the lack of priority given to the monitoring of sexual orientation in job application forms relative to other diversity strands.

In their guidance to local authorities as employers, Creegan et al (2007, p. 89) note that ‘prejudice on the part of heterosexual people and concerns about confidentiality on the part of lesbian, gay and bisexual people mean that local authorities need to be cautious about undertaking monitoring’. They urge authorities to consider why they are asking for data on sexual orientation from employees; what they will be able to learn from the data given the current absence of baseline data; how employees will respond if they do not fully
understand why they are being asked; and what pressures will be put on LGB employees if they are being asked to disclose their sexual orientation in circumstances where they may not feel comfortable to do so.

Previous consultation by GLADD of their members in 2005 suggested that only around one in six would complete an equal opportunities monitoring question on sexual orientation. This was because of reservations, including: discomfort around answering; a view that the data is irrelevant or unnecessary; a fear of negative consequences related to disclosure; a need to know why the monitoring is being done; and concerns about the labels being used and the perception of monitoring itself. Guasp and Balfour (2008, p. 25) also found that a remaining challenge is ‘persuading lesbian and gay employees of the confidentiality of monitoring sexual orientation in the workplace’. Such views were reflected in high non-response to questions on sexual orientation on several workforce surveys: for example, reaching 42–60 per cent and in Luton Borough Councils’ 2004 and 2005 surveys (cited in Aspinall and Mitton 2008, pp. 67–8). However, it has been argued that the fact it may be difficult to measure the characteristics of the workforce of residents in terms of sexual orientation does not mean that performance indicators cannot be developed. For example, anonymous staff surveys and exit interviews may still provide valuable information about the experiences of LGB employees, and workforce surveys could be used to measure the attitudes of employees to policy implementation relating to sexual orientation (Creegan et al 2007, pp. 90–1).
Which equality strands statutory authorities recognise in job application forms appears to be highly variable and there is little systematic data. However, in their Internet review of 76 NHS trust and 113 local authority job application forms, Aspinall and Mitton (2008, p. 59) found that sexual orientation was rarely asked for relative to other equality strands such as gender, ethnic group/origin or disability (see Table 6 below). However, they note applications for the NHS via the central portal uses a model application form, in which sexual orientation is mandatory.

Table 6  Equality strands included in job application ‘equal opportunities monitoring’ forms

<table>
<thead>
<tr>
<th></th>
<th>NHS trust job application forms (of 76)</th>
<th>Local authority job application forms (of 113)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>49</td>
<td>96</td>
</tr>
<tr>
<td>Gender</td>
<td>67</td>
<td>102</td>
</tr>
<tr>
<td>Ethnic group/origin</td>
<td>76</td>
<td>108</td>
</tr>
<tr>
<td>Disability</td>
<td>70</td>
<td>95</td>
</tr>
<tr>
<td>Religion</td>
<td>9</td>
<td>15</td>
</tr>
<tr>
<td>Sexual orientation</td>
<td>5</td>
<td>10</td>
</tr>
</tbody>
</table>

Adapted from Aspinall and Mitton 2008, p. 61
6.5 Best practice

Factors promoting best practice in reducing discrimination and promoting good relations related to sexual orientation in employment are relatively well documented compared to the other substantive areas discussed in this review (for example Colgan et al 2006, Guasp and Balfour 2008). Guides to the employment regulations and good practice within this legislative context have been produced by ACAS (ACAS 2005) and Stonewall (2004). An important guide to the employment regulations and good practice within this legislative context has been produced by ACAS called Sexual orientation and the workplace: a guide for employers and employees (ACAS 2006a). This guide includes examples of the nature of discrimination and harassment as well as suggestions for good practice relating to sexual orientation in terms of recruitment, retaining staff, monitoring of sexual orientation and how to make a complaint or handle grievances. This guide is also further supported by Tackling discrimination and promoting equality: good practice guide for employers, also produced by ACAS (ACAS 2006b). Notably, many of the suggestions for good practice in promoting equality in this respect, such as having an equality policy, equality training, fair recruitment procedures and countering bullying and harassment, can be implied from the discussions above or have been suggested by LGB people themselves. Colgan et al (2006, pp. 11–16) found that LGB workers made a number of suggestions for promoting equality in employment based on sexual orientation to indicate that an employer was LGB-friendly. These included:

- good equal opportunities policies;
• internal training and/or campaigns to highlight inclusion, diversity and respect for LGB people within the workplace;
• support for the establishment of LGB networks;
• mentoring for LGB employees;
• the presence of visible LGB role models and/or the appointment of diversity champions in the workplace;
• visible signs of support for LGB people such as making benefits employee benefits available to heterosexual couples also available to same-sex couples, the sponsorship of LGB external events.

Other guidance has focused on good monitoring of equalities or inequalities based on sexual orientation within a workplace (as discussed in section 6.4) or by comparing different employers. An important example of the latter approach is Champions, Stonewall’s Diversity Championship Programme.35 This is a ‘good practice forum in which employers can work with Stonewall, and with each other, to promote diversity in the workplace’. The programme publishes a Workplace Equality Index. All 300 plus participating organisations are assessed on measured criteria, benchmarked, and progress is charted year on year, while the best performing top 100 employers are published in annual list Stonewall’s Workplace Guide series provides practical advice on a number of initiatives regarding LGB equality in the workplace (for example how to monitor sexual orientation, preventing and responding to homophobic bullying, how to set up network groups, and career development/support of LGB staff). The guides feature practical tips and best practice based on research conducted with leading organisations. The programme has recently
been highlighted by the study *Peak performance: gay people and productivity* (Guasp and Balfour 2008). Based on the findings from the report the authors make similar suggestions to those discussed above (Guasp and Balfour 2008. pp. 26–7).

### 6.6 Conclusions and research gaps

**Measuring LGB experiences of employment against heterosexuals**

Our review suggests that there is a reasonably large body of small-scale survey work, case studies and qualitative studies detailing the general experiences of LGB people in employment and the general patterns of discrimination and harassment experienced by LGB workers. However, such survey work has been largely limited by the absence of a reliable LGB sample frame, a lack of a meaningful comparative baseline with heterosexuals, non-random samples, small sample sizes and a lack of clarity about whether the discrimination being discussed was experienced pre or post the employment regulations. Case studies and qualitative work have tended to be limited by a focus mainly on ‘good practice’ or larger employers or on the description of experiences without comparison to heterosexual workers. In particular, there remains a general lack of reliable statistical information on the size, characteristics and incomes of LGB people relative to heterosexual people against which meaningful comparisons can be made and against which progress on promoting equal opportunities can be assessed. This is even more true of such data at a subnational level. Another issue is that, while this review is indicative of restricted job opportunities arising from both the fear of
discrimination and harassment for LGB people and actual experiences, there appears to be an almost complete absence of research on the relationship of sexual orientation to reduced life opportunities or unemployment.

**Intersection with other identities**

Some general research includes the experiences of social groups intersecting with LGB people, such as BME and disabled groups, but there appears to be no substantive research dealing specifically with employment issues for people whose identities and experiences intersects with other groups. Fewer issues than initially anticipated have arisen as a result of exemptions from the sexual orientation employment regulations for the purposes of organised religion, but there is still a need to research:

- the conflicting freedoms between different equality strands, particularly issues arising from the religion and belief regulations;
- what difficulties have arisen;
- how these issues might be resolved in order to promote good relations across communities.

**Progress on equality of opportunity since the employment regulations**

The most comprehensive body of work post the employment regulations focused on reviews of cases where respondents made claims against employers of direct discrimination, bullying or harassment or poor handling of grievances. This research provides important insight into the nature of discrimination faced by individual LGB employees and the attitude of the state to such discrimination. However, relatively little is known about the impact of the employment regulations for LGB people more generally, particularly
across a variety of different sectors of employment and different sizes of employers. While there has also been the development of good practice guidance on the employment of LGB people and the promotion of equal opportunities at an organisational level, there are still difficulties measuring progress in this respect due to difficulties measuring sexual orientation in the workplace and lack of reliable and robust information at both organisational and societal levels against which progress can be measured. A key priority might therefore be to develop new ways of measuring and testing innovative ways of measuring inequalities and equality of opportunity related to sexual orientation and employment.
7 HEALTH AND SOCIAL CARE

Health inequalities related to sexual orientation in health and social care focus on the ways in which discrimination and stigma affect the health of LGB people. There was a significant body of research in relation to health and social care and sexual orientation relative to other substantive areas in this review, although many aspects of LGB health and social care were still under-researched. Research was principally found in relation to access to health and social care for LGB people, their health and social care needs, and the way in which discrimination and prejudice may be linked to poorer health and negative health outcomes. A great deal of research connected to the health needs of gay and bisexual men in the context of HIV/AIDS and wider sexual health issues. More recently, however, a considerable literature developed around broader health inequalities related to physical health, mental health and social care for both gay men and lesbians. There was a growing body of work on lesbian and bisexual women’s health and the health needs of younger and LGB older people. There was also fledgling work on other sections of the LGB population, including bisexual people, LGB people from BME groups and LGB people who are disabled, although there are major gaps in this regard. A range of best practice initiatives and resources to meet the health needs of LGB people had been developed but there needs to be greater consolidation and mainstreaming of this information.
7.1 Legislative and policy context

Until this decade there was no specific legislation related to sexual orientation in the provision of health and social care. Before then practitioners and LGB people often had to use more general equal opportunities policies designed to deliver high-quality care (for example, General Medical Council 2003; Royal College of Nursing and UNISON 2005). Alternatively, they could try to improve public consultation about health services (Farrell 2004; Local Government Association 2001), in order to address the health and social care concerns of LGB people (although this strategy was not always successful). More recently, a number of changes have created a stronger momentum to specifically address LGB health and social care needs. These include:

- changes in legislation relating to the provision of health and social care and legislative relating to other aspects of sexual orientation (for example, civil partnerships);
- a growing body of literature that consistently demonstrated the health issues and inequalities faced by LGB people (for example, apparent higher rates of suicide and self-harm among LGB people; higher incidence of smoking, alcohol consumption and drug use; and greater need for social support among LGB older people; homophobic hate crime and bullying).

7.1.1 Legislation

Legislative changes across a wide range of areas have the potential to affect LGB people in relation to health and social care. Possibly the most important has been the Equality Act (Sexual Orientation) Regulations (2007). These
regulations prohibit discrimination on the grounds of sexual orientation in the provision of goods and services, including health and social care. They cover public, private and voluntary organisations. This means, for instance, ‘that a gay man cannot be turned away from a GP practice on the grounds of his sexual orientation, or a woman cannot be refused a smear test or testing for sexually transmitted infections because she is a lesbian’ (Fish 2007b). Other important pieces of legislation are the Civil Partnership Act (2004) and the Disability Discrimination Act (2005). The former Act formally gave same-sex partners the right to be recognised as their partner’s next of kin and to make medical decisions on their behalf in healthcare settings. The latter Act, while it does not explicitly refer to sexual orientation, does prohibit discrimination against disabled people in employment, the provision of goods and services, education and transport and may impact in areas where LGB people are more likely to be affected by ill health, for example, in relation to HIV and cancer (Fish 2007m). However, the impact of these legislative changes on policy and practice has not been fully explored to date.

7.1.2 Inclusion and exclusion in health and social care policies

In addition to the legislative changes described above, a number of key policies in health and social care have applicability for the health and social care issues faced by LGB people but these vary in the extent to which they explicitly acknowledge LGB people. Indeed, one of the core principles of the NHS Plan (2002) was to challenge discrimination. Fish (2007i) argues this means that commissioners and providers should actively consider how services are delivered and how they are perceived by LGB service users.
However, there is limited specific mention of sexual orientation in the plan. Similarly, *Choosing health: making healthy choices easier* aims to tackle the causes of ill health and reduce inequality. It identified key areas of health inequality such as smoking, alcohol, obesity and sexual health, all of which are relevant to LGB people (Fish 2007c). However, Fish argues that LGB people’s needs ‘in relation to these four lifestyle issues should be more explicit in local commissioning guidance’.

There was a similar lack of focus on LGB people in health and social care providers’ policies. Fyfe et al (2006) found that of the 32 councils they canvassed only ten social work departments referred to sexual orientation in their strategies, and only one had a separate LGBT action plan. Moreover, Pringle (2003) notes that a review of ‘policies in the NHS in Scotland reveals that the health of LGBT people is largely ignored’.

Beyond general commitments to equality for LGB people, the policy coverage for LGB people is therefore mixed. One area where there appears to be relatively good coverage is sexual health. This is particularly relevant to gay and bisexual men, who are disproportionately likely to be affected from poor sexual health. The *National strategy for sexual health and HIV* (Department of Health 2001) was the first national strategy for sexual health, which explicitly mentioned gay and bisexual men. However, while the strategy was a significant step forward, it made no mention of women who have sex with other women and, according to Henderson et al (2002), this is ‘symbolic of the invisibility of lesbian and bisexual women in sexual health services in this country’.
LGB people appeared to be particularly badly represented in policies on mental health, even though research suggests that LGB people have specific health needs (for example, National Institute for Mental Health in England, 2007). The National Suicide Prevention Strategy (2002), for example, aimed to reduce suicide among key high-risk groups and to promote mental health among socially excluded groups. However, despite the fact that research suggests that LGB people are socially excluded and are at higher risk than heterosexuals of suicide, the strategy did not explicitly mention LGB people. LGB people were also not mentioned in Our Choices In Mental Health Framework (Department of Health 2006), the government’s mental health policy document, which set out choices available for service users in mental health provision. These oversights appear to support Creegan’s et al (2007, p. 59) general claim that ‘the needs of lesbian, gay and bisexual people are often ignored in policy development in relation to inequalities in health and social care.’

7.2 Quantity, quality and focus of information

Despite the considerable amount of useful literature in relation to health and social care, evidence suggests that LGB health needs are still under-researched relative to the needs of the general population. For example, Boehmer (2002) conducted a review of all English-speaking articles from MEDLINE between 1980 and 1999 and found that, of 3,777 articles, only 0.1 per cent contained references to LGB people. She concludes that ‘findings supported that LGBT issues have been neglected by public health research and that research unrelated to sexually transmitted infections is lacking’. In
addition the quality of the information and the sole emphasis on the problematic aspects of LGB lifestyles in some of the research remained a key difficulty. There was a considerable amount of statistical and survey information, some of which has been condensed into previous reviews such as that produced by Fish (2007a) (discussed below). However, the sampling and methodology used in some surveys and qualitative work included in these reviews is not always clear, and in other cases the strength of statements made about specific health inequalities may not be adequately justified without national and local comparative baseline data. There was also a gap in terms of qualitative work that was able to explain some of the trends identified.

7.2.1 Scope of the information and research

A key problem in relation to information on health and social care inequalities is the absence of Census or survey data from which to gain baseline comparative data with the general population and the substantial difficulties associated with gaining a sample frame from which to generate a representative list of LGB people (see chapter 2, section 2.1 and chapter 15, section 15.2). Despite such problems, there were examples of national and local survey work that have attempted to address the need to achieve sufficiently large and robust samples. Key among these were the annual Vital statistics – gay men’s sex survey conducted by Sigma Research (for example, Hickson et al 2002; Weatherburn et al 2006), which recruits through a large number of health promotion agencies targeted at gay men and via an online survey. There have also been a number of lesbian and bisexual women’s sexual and general health surveys (for example, Fish and Anthony 2005),
including most recently *Prescription for change*, a survey of 6,178 lesbians and bisexual women in Britain conducted by Stonewall (Hunt and Fish 2008). At a local level there have also been a number of well-conducted health needs assessments (for example, Cant and Taket 2006, for North London; Cant 1999, for Bromley; Hockley 2003, for Somerset; Coia et al 2002, for Glasgow). Particularly good examples are the assessment conducted by Sigma Research for Lambeth Council (Keogh et al 2006) and the Count Me In and Count Me In Too surveys conducted in Brighton and Hove; the latter of which was a partnership between Spectrum (a LGBT community forum), the University of Brighton and Brighton & Sussex Community Knowledge Exchange and Brighton and Hove PCT. Notably, not all of such health needs assessment are formally published and to some extent remain a body of ‘grey’ literature.

There has also been a number of qualitative studies that have attempted to reveal the range of health needs found among LGB people, both generally (for example, Platzer and James 2000) and in relation to physical (for example, Malley 2001), sexual (for example, Hickson et al 2002) and mental health (for example, Stonewall 2003). More recently survey and qualitative work have also begun to be produced in relation LGB needs in term of social care, such as *Putting people first*, produced by the Commission for Social Care Inspection (CSCI 2008).

In addition, Fish (2007a) has produced possibly the most comprehensive resource on LGB health and social care issues in the form of 13 separate
briefings sponsored by the Department of Health. These cover the particular health needs of almost the entire spectrum of LGB groups, including LGB young people, LGB old people, LGB disabled people, BME LGB people, bisexual people, gay people and lesbians.

7.2.2 Focus on negative aspects of LGB health

Another key issue in the discussion of LGB health and social care is the fact that the focus on health inequalities and the issues that need to be addressed as a result can create an overly negative and pessimistic view of the lives of LGB people. Fish (2007a) observes that, ‘in focusing on health inequalities, they may create the impression that being LGBT is a negative experience’. However, she also notes that ‘many LGBT people live fulfilled, healthy lives’. Consequently, in discussing health inequalities based on sexual orientation, it is important to avoid the possible heterosexist view that LGB lifestyles are unhealthy per se (for example, in the assumption that is sometimes made that gay and bisexual men’s sexual orientation is automatically linked with HIV/AIDS).

Instead, the research literature needs to be seen in light of the way in which discrimination and social circumstances can combine with various aspects of physical, sexual, mental and social health to produce potential negative outcomes for LGB people related to their sexual orientation. It also needs to be seen in the context of the way in which the health and social care needs of LGB people have often been misrepresented and ignored, with inadequate
access to health and social care and an over-focus on sexual health
(Stonewall 2007).

7.2.3 Diversity, intersectionality and health

A final issue is that, while some attention has been paid to the health and social care needs of some LGB groups, other subsections of the LGB community have been relatively neglected. The needs of bisexual people, beyond their sexual and mental health, were less well-documented, and research often failed to consider their needs separately from lesbian and gay people (Fish 2007h). Despite the considerable efforts of Fish (2007a) and others (for example, Keogh et al 2006) to draw together research on health and social care inequalities and needs experienced by LGB people living with a disability and LGB from BME groups, the research literature in these areas was comparatively sparse. At the same time, while there is a growing body of research on the health and social care needs of older and younger LGB people, there are still gaps in the research literature in these areas. Where research on the health needs of social groups intersecting with sexual orientation has been identified, it is included where appropriate in the rest of this chapter.

7.3 Access to health and social care

The literature suggests that LGB people’s access to health and social care is limited by a wide range of factors. Generally, these factors fall under the three umbrellas of: LGB people’s own fears of discrimination; actual incidences of discrimination; and a wider institutionalised heterosexism within health and
social care. These factors may both limit the range of provision available for LGB people, and make this group’s experiences of the provision that does exist negative. While the majority of the research paints a negative picture of health and social care vis-à-vis LGB people, this is not to suggest that LGB people’s experiences are wholly negative or to ignore the significant progress that has been made in removing many barriers; rather, it highlights the barriers that still do exist in the hope that future strategies may remove them.

7.3.1 Fear of disclosure

Research indicates that many LGB people have expectations of negative care. Stonewall’s Serves You Right (Hunt and Dick 2008) reported that one in fourteen lesbian and gay people expect to be treated worse than heterosexuals when accessing healthcare for a routine procedure or an emergency procedure, while eight per cent have the same expectations about general practice. Indeed, according to Fish (2007b), ‘many LGBT people fear that if they disclose their sexual orientation or gender identity status to a healthcare worker, they will receive discrimination and poorer treatment’. In many cases this causes a reluctance to disclose sexual orientation even when it could lead to the provision of more appropriate healthcare. According to Fish (2007g), reasons for non-disclosure have often been ‘attributed to concerns about an adverse reaction and concerns about confidentiality – who will have access to this information (for example, whether or not it will be made available to employers and mortgage companies)’. In other cases, the LGB person may delay seeking care if they feel they will be forced to admit their sexual orientation, which in turn could have negative consequences for their prognosis or the support they receive (Fish 2007b).
Levels of disclosure

Survey evidence supports the idea that LGB people are reluctant to disclose their sexual orientation to healthcare practitioners. Keogh et al (2004) found that only half of gay men are out to their GP. This same finding was also made by Sigma Research (Dodds et al 2005), who note that, of those who were not out, 39 per cent had no intention of ever disclosing their sexual orientation.

Other subsections within the LGB population may be more or less likely than gay men to disclosure their sexual orientation. Older and younger LGB people may be particularly unlikely to come out to health and social care providers. A study of LGB young people found that as few as 13 per cent had disclosed their orientation to their healthcare provider (Allen et al 1998), while a figure of 14 per cent was quoted in a study on older people (Hubbard and Rossington 2005). Fish (2007a) notes that passing as heterosexual may be an ingrained practice for LGB older people who have lived through times when same-sex behaviour was criminalised.

Compared with gay men, lesbians appear to be slightly more likely to disclose their sexual orientation in a healthcare setting. In Prescription for Change (Hunt and Fish 2008) report that half of lesbian and bisexual women are not out to their GP, while one in ten say that a healthcare worker ignored them when they did come out and only three in ten lesbian and bisexual women say that healthcare workers did not make inappropriate comments when they came out. Eliason and Schope (2001) found that a third of lesbians have not
come out to their healthcare provider, while a survey of 200 lesbians in Glasgow found that 40 per cent felt unable to come out to their GP. The statistics nonetheless suggest that many lesbians are fearful of disclosure. Wilton and Kaufmann’s (2001) qualitative research of lesbians receiving maternity care revealed that respondents were acutely aware of the personal attitudes of midwives and the potential effects of disclosure.

Finally, bisexual people may be less likely than either lesbians or gay men to disclose their orientation to their GP or mental health professional (Meckler et al 2006).

While fears of homophobia or heterosexist provision from healthcare providers may be influenced by the sexual orientation of the LGB person, other factors may play a part. For example, Keogh’s et al (2006) study of the needs of LGBT people in Lambeth found that other key influences were age, income and educational achievement. It is pertinent that many of the studies on disclosure rate fail to break down responses by these factors and therefore their findings must be treated cautiously.

**Context of care and relationship to carer**

Another important factor is the patient’s relationship to the healthcare provider. Specifically, those LGB people receiving care from a carer in their home or residential setting will have a very different relationship to providers than, for example, those LGB people whose health needs can be met by a GP or an outpatient service. The different relationship LGB people in care have with providers is illustrated in research on LGB older people and LGB disabled
people, particularly in relation to access to social care. For example, care staff may assume that such individuals are either asexual or heterosexual (Keogh et al 2006; CSCI 2008; Fish 2007a). Indeed, LGB disabled or older people may not challenge these misconceptions because of fears of discrimination. An LGB older person in residential care may be the only LGB person living there and so might feel isolated and hide his/her sexual orientation (Fish 2007e). (These issues are also addressed in chapter 9, section 9.4.)

Similar issues exist for disabled people. According to Fish (2007m), ‘many disabled LGB people pass as heterosexual and do not come out to professionals because they fear being refused services or treated in a derogatory manner’. They may also face the unique challenge of a ‘double coming out’, as both disabled and LGB (Davidson-Paine and Corbett 1995).

However, these issues are not the same for all LGB disabled people. For instance, Abbott and Howarth (2005) found that LGB people with learning disabilities were more likely to disclose their orientation to a member of staff with whom they felt confident than a member of their family, while the opposite was true for LGB non-disabled people. To explain this, Fish (2007m) speculates that ‘because LGB people with learning difficulties often live at home with their family and rely on them for financial or practical support, they may be more likely to fear rejection from their family than other LGB people’.
7.3.2 Barriers to access

**Homophobia among healthcare staff**

Research indicates that LGB people’s perceptions of negative care may be matched by their experiences of accessing services. For example, half of respondents in Hunt and Fish’s (2008) survey of 6,178 lesbian and bisexual women reported negative experiences in the health sector within the last year. One possible cause behind these experiences is homophobia from staff. Studies of the attitudes towards sexual orientation of healthcare staff indicate that some are indeed homophobic: Beehler (2001) found that 25 per cent expressed negative or homophobic attitudes, while 20 per cent of GLADD’s (2004, cited in Stonewall 2007) respondents admitted to being homophobic. Ten per cent of respondents in a study on social workers were found to be homophobic (Berkman and Zinberg 1997). Such findings suggest that homophobia is an issue in health and social care among a minority of staff.

Just because a health or social care professional holds homophobic views, these will not necessarily be reflected in their practice. However, research suggests that in some cases direct discrimination has been experienced. Mitchell (2004, p. 41) found that some of the gay men who have disclosed their sexual orientation to their healthcare provider had made themselves vulnerable to hostility, surveillance, neglect, voyeuristic attention, loss of dignity or compromised treatment. Allen et al (1998) investigated young people’s experiences of healthcare and found that in some cases, when they had come out to a health provider, they had been dismissed or ridiculed.
Platzer and James (2000) studied lesbians’ experiences of nursing care and found that some nurses were homophobic in how they asked the respondents about their sexual health, while some also reacted in a negative way when lesbian patients disclosed their sexuality. King et al. (2003) reports that for mental health ‘one-third of gay men, a quarter of bisexual men and over 40 per cent of lesbians reported negative or mixed reactions from mental health professionals when they disclosed their sexual orientation’; furthermore, ‘one in five lesbians and gay men and a third of bisexual men stated that a mental health professional made a causal link between their sexual orientation and their mental health problem’.

**Heterosexism in the delivery of care**

Even if LGB people do not experience overt homophobia, they may face another, possibly far more entrenched problem: heterosexism. The concept of heterosexism in this sense includes both an implicit or unconsciousness of the needs and experiences of LGB people and a set of institutionalised practices that devalue homosexuality while supporting heterosexuality. Indeed, Berkman and Zingberg (1997) found that, although only 10 per cent of social workers were homophobic, a much larger proportion held what they defined as heterosexist views. They may, for example, make assumptions that the LGB patient is heterosexual, making it more difficult for him/her to come out. They may also base their dealings with LGB people on crude stereotypes which may be inadequate representations of the complex and diverse range of LGB health needs. More seriously, however, research suggests that heterosexism is institutionalised in health and social care. This may be reflected particularly in the array of services being directed at meeting
heterosexual health needs, ignoring LGB health needs (see Fish 2006 and chapter 3, section 3.2).

**Poor training on how to respond to LGB people**

One way in which heterosexist beliefs and practices may be perpetuated is in a lack of training of staff to meet LGB health issues. According to Pringle (2003), there is a lack of input on sexual orientation in the undergraduate medical curriculum, nursing education and training of allied health professions. Also, in some areas LGB healthcare needs may not be on the main medical research agenda. For instance, the Mind Information Unit (2001) suggested that in mental health ‘there is a paucity of research into the needs of lesbians, gay men and bisexual men and women… as users, carers, professionals; in community and institutional settings; in voluntary, statutory and private provision’.

**Sexual health services**

Heterosexist assumptions could also contribute to an unfair spread of health and social care services for LGB people. Sexual health for gay and bisexual men may be under-funded. Fish (2007k) suggests that ‘while the number of HIV diagnoses is increasing among gay men there has not been a corresponding increase in resources dedicated to them’. Nevertheless, some writers suggest that this is an area of LGB health need which has received considerably more attention and resources than some others. One example is the sexual health of lesbian and bisexual women. According to Creegan et al (2007, p. 59), ‘specific sexual health services are often targeted at gay men in relation to HIV/AIDS, but [are] absent for lesbians’. For Henderson et al
(2002), this is also seen in the National strategy for sexual health and HIV (Department for Health, 2001), which they note did not mention the word lesbian, and made no reference to women who have sex with other women. Henderson et al (2002) report that there were currently very few services meeting lesbian health needs, yet other research suggests that the specialist provision which does exist may be well received. For example, Carr et al (1999) evaluated a pilot scheme in Glasgow for a family planning lesbian health service, the only one of its kind in the UK at the time, and found that ‘client satisfaction was high’.

Mental health services

It has been suggested that poor levels of provision of services to LGB people also exist in relation to mental health. LGB people are more likely than heterosexual people to use mental health services (Fish 2007a). King et al (2003) found that LGB people had mixed experiences of the responsiveness of mental health services to their needs and further suggested that some practitioners pathologised LGB patients’ sexualities. Butler et al (2000, cited in Creegan et al 2007, p. 59) reported that mental health services may feel unsafe or hostile to LGB people. This may be because practitioners do not know how to deal sensitively with issues surrounding sexual orientation. Fish (2007a) suggested that ‘there are acknowledged difficulties for mental health professionals in getting the balance right. In some of the accounts reported, the mental health professional was regarded as insensitive if they placed too much emphasis on sexual orientation in the clinical setting, while others were regarded as insensitive if they ignored it’. 
Another issue which may cause LGB people to be dissatisfied with mental health services is the likelihood that they will not be treated by a LGB therapist even if they want to be. Bartlett et al (2001) surveyed 218 therapists and found that 179 (82 per cent) described treating LGB patients, and in the majority of cases sexual orientation was an important part of the work. However, only one respondent reported that he/she was lesbian or gay. The authors conclude that ‘the British Confederation of Psychotherapists’ practitioners take on gay and lesbian clients/patients, although many do not see these social identities as relevant to the therapeutic process. Evidence from this study indicates that such clients/patients may encounter overt or covert bias, including the pathologisation of homosexuality per se’. However, the extent to which having more LGB practitioners would be appreciated by LGB patients, and the impact that they would have on challenging heterosexism within medical health, is unclear from this research.

**Diversity, intersectionality and provision of services**

Research suggests that a range of health needs among the LGB populations are not being met. For example, alcoholism may be a particular issue for lesbians (Malley 2001). Lesbians also have a lower rate of breast self-examination despite studies indicating that they are at a higher risk of breast cancer (Fish and Wilkinson 2003). However, few resources have been dedicated to tackling either of these problems.

BME LGB people may suffer particular forms of exclusion from health and social care services. The access of BME people to health services may differ from the access of BME heterosexuals and white LGB people (Cahill et al
While the access of BME LGB people generally is under-researched, that on BME lesbian and bisexual women is especially minimal.

LGB older and disabled people are two groups that may face unique barriers to health and social care services. While there is much research on the fears of LGB people living outside care of the residential environment, and some speculating that social care workers do indeed discriminate, we could find little on the actual experiences of LGB people in these places. One study which appears to suggest that there is some discrimination is Commission for Social Care Inspection’s (CSCI 2008), which used a survey of 92 LGB people who had used social care services, feedback from a CSCI conference of LGB issues, a representative sample of 400 Annual Quality Assurance Assessment Forms from service providers and discussions with service providers and users. It found that only 7 per cent of older people’s care homes had worked specifically on equality around sexual orientation. It also revealed that service providers made a number of heterosexist misconceptions, such as that clients were asexual and therefore sexual orientation was not an issue. Other assumptions included the belief that few or even no LGB people used the services so sexual orientation was not an issue, and that the needs of LGB people were no different from those of heterosexuals.

According to Brothers (2003), health and social care services have made little effort to take account of the life experiences of LGB disabled people. Also, both LGB and heterosexual disabled people may have insufficient access to information about sexual orientation. They may not have received relevant sex education in schools not least because many would have attended
special schools which may not have used the mainstream PSHE (personal social health education) curriculum. As adults, they may lack appropriate information about sexual health, particularly LGB sexual health, and may not have access to information about fertility issues.

**Positive aspects of access to healthcare**

While the majority of the research on LGB people’s access to health and social care services paints a negative picture, it is important to note that many LGB people have positive experiences of health and social care. For example, the Commission for Social Care Inspection's survey (CSCI 2008) of 92 LGB people who had used social care services found that 62 per cent felt that all or most staff treated them with respect as an LGB person. Furthermore, positive experiences may result even when barriers prevent access to services. Keogh et al (2006) note that LGB older people, who may be excluded from social care environments, may have ‘stronger social support networks, a stronger subculture, greater role flexibility and greater personal resilience’ than older heterosexuals because the anticipated lack of support in old age has led them to develop all of these. As such, ‘they are more likely to be self-sufficient and less likely to be socially isolated than older heterosexual men’ (Keogh et al 2006).

### 7.4 Physical health

The review revealed a considerable body of research discussing a range of issues related to LGB physical health. These focused on: aspects of LGB lifestyles such as smoking, drinking alcohol and drugs use; indications of
higher risks of certain cancers and the need for screening in this respect; and
issues related to body image and weight, exercise and eating disorders. It has
been suggested by some people that LGB people live less healthy lifestyles
than heterosexuals. While some researchers have disagreed with this, much
of the research we consulted suggested that aspects of LGB lifestyles may
have harmful effects on physical health. This may be partly because the LGB
‘scene’ is centred around clubs and bars, where there is easy access to drugs
and alcohol. It has also been argued that unhealthy lifestyles can be linked to
the stress of coping with anti-LGB prejudice, discrimination and low self-
esteeem (Mitchell et al 2001; Fish 2007i). However, it is important to
emphasise that there is no singular ‘LGB lifestyle’ – not all LGB people use
the scene, for example – and that the nature of physical health issues vary
considerably across subsections of the LGB community and across regions
(Hunt and Fish, 2008).

7.4.1 Smoking

Research suggests that smoking may be a particular issue for LGB people.
Tang et al (2004) found that gay men may smoke more than lesbians, but
both smoke more than heterosexuals: their study reveals that 25 per cent of
lesbians smoke, compared with 15 per cent of heterosexuals, and 33 per cent
of gay men smoke, compared with 21 per cent of heterosexuals. Bisexual
women may also be more likely than heterosexuals to smoke, while more
young lesbian and bisexual women smoke than their heterosexual peers (Fish
2007d). While lesbian and bisexual women are more likely than heterosexual
women to smoke currently, they are also more likely to have smoked at some
point in their life. Hunt and Fish’s (2008) health survey of 6,178 lesbian and bisexual women found that two-thirds of respondents had ever smoked, compared with a half of heterosexual women. Given the overall trend that LGB people appear to smoke more than heterosexual women, it is perhaps unsurprising that they are at increased risk of lung cancer. Smoking may also increase the chance of anal cancer in men (Palefsky et al 2005) and cervical cancer in women (Fish and Wilkinson 2000). Hunt and Fish (2008) report that fifteen per cent of lesbian and bisexual women over the age of 25 have never had a cervical smear test, compared to seven per cent of women in general.

7.4.2 Alcohol

Research indicates that heavy alcohol consumption appears to be a particular issue for lesbians and bisexual women. Creegan et al (2007, p. 59) report that lesbian and bisexual women are more likely to be affected by their own or someone else’s drinking than heterosexual women. According to Ziyadeh et al (2007), compared with heterosexual women, lesbian and bisexual young women are more likely to have consumed alcohol in the past month, more likely to have binged drank in the past year, and they also report a higher number of drinks consumed when drinking. Lesbians and bisexual girls may be more likely than heterosexual peers to have consumed alcohol before the age of 12 (Greenwood et al 2001). Heavy drinking among lesbians may persist across the life course, while heterosexuals may curtail theirs as they grow older (Malley 2001).
In contrast with lesbian and bisexual women, some research suggests that gay and bisexual men’s drinking patterns do not diverge from those of heterosexual peers. While gay men may spend more time than heterosexual men in bars and at parties, Trocki et al (2005) found that this does not mean that they drink more overall. However, Mitchell et al (2001, p.14) note that ‘both gay men and lesbians have been found to have higher rates of alcohol use compared to their heterosexual counterparts’. Mitchell et al (2001) also report on research that indicates that excessive smoking and drinking among LGB people generally has been linked to a greater risk of lung cancer, colon cancer, heart disease and stroke.

7.4.3 Drugs

Much of the research suggests that LGB people are more likely than heterosexuals to use recreational drugs. Drugs and alcohol may be important parts of ‘the scene’. Keogh et al (2006), who conducted research with LGBT people in the London Borough of Lambeth, report that respondents ‘described being in a social network where alcohol and drug use was very common and where access, acceptance and peer pressure to use were high’. Additionally, the authors note that ‘drugs were [also] used to escape from the unhappiness, anxiety or depression respondents suffered as a consequence of a heterosexist society’. However, they found no evidence that drug and alcohol problems were correlated with gender or ethnicity.

The suggestion that some LGB people are more likely to use drugs was supported by the research we consulted. There was evidence that among this
population there is an increasing trend towards poly-drug use: for example, poppers and Viagra (Ruf et al. 2006). Drugs use may be especially associated with gay and bisexual men, and particularly the latter. According to Weatherburn et al. (2000), community surveys have found that bisexual men are as likely as gay men to use alcohol, poppers and gamma hydroxybutyrate (GHB), but more likely to have used all other drugs.

It appears that drug use is a substantial issue for women as well. Hunt and Fish (2008) report that lesbian and bisexual women are more than five times more likely than heterosexual peers to have taken recreational drugs. Additionally, they found that over 10 per cent of lesbian or bisexual women had taken cocaine, compared to 3 per cent of all women. Drug use may also be a particular feature of LGB youth culture. Fish (2007a) reports that, compared with heterosexual young people, LGB young people were three times more likely to use MDMA/ecstasy, eight times more likely to use ketamine and 26 times more likely to use crystal methamphetamine.

While drug use may be particularly associated with gay and bisexual men (Mitchell et al. 2001), we could find no comparative statistics of drug use among gay and bisexual men and women to test this. Generally, though, there is a problem with studies of LGB drug and alcohol use, according to Stall et al. (2001). They suggest that samples are ‘frequently recruited from bars and clubs, and so are likely to be skewed towards the LGBT people with a high alcohol and drug intake’. Until it is possible to gain a randomly selected, representative sample of the LGB population these findings should be treated with some caution.
7.4.4 Obesity, body image and eating disorders

Research indicates that lesbians and gay men may differ from heterosexuals regarding obesity levels, although there is some contradictory evidence. According to Fish (2007a), lesbians are more likely to be overweight than heterosexuals. A study in the US made the same finding for minority ethnic lesbians (Evans et al 1998). If these findings are correct, it would put lesbians at greater risk of breast cancer and cardiovascular disease (Yancey et al 2003; Kavanagh-Lynch et al 2002; Roberts et al 2003). However, a recent health survey of lesbian and bisexual women found that the Body Mass Indexes (BMIs) of respondents were on average the same as heterosexual women (Hunt and Fish 2008). If lesbians are more likely to be overweight, this might be because they are not so pressured by the heterosexual feminine desire to be thin (Wojciechowski 1998).

There appears to be less research on the obesity and fitness levels of gay and bisexual men. However, it is likely that, in contrast to lesbians, gay men have lower BMIs than heterosexuals. Gay men may be pressurised to be thin by particular notions of the ideal male body, which, according to Mitchell et al (2001), is muscular or slim. This may explain why gay men are apparently more likely than heterosexual men to have eating disorders (Kaminski et al 2005).

7.4.5 Cancers

It is likely that LGB people are at greater risk than heterosexual people of certain cancers. Gay men may be particularly at risk of prostate or anal cancer
compared to heterosexual men. Anderson et al (2004) found that anal cancer was 20 times more common in gay men than the general population. Palefsky et al (2005) suggests that the incidence of anal cancer among gay and bisexual men had increased since the introduction of Highly Active Antiretroviral Therapy (HAART) in treatment for HIV. According to Blank (2005), prostate cancer is potentially common in gay or bisexual men, although there is little or no research on the disease among this group.

According to Hunt and Fish (2008), one in 12 lesbian and bisexual women aged between 50 and 79 has been diagnosed with breast cancer, compared to one in 20 of all women. In relation to cervical cancer, Fish (2007a) notes that lesbians are believed to be at a lower risk because of the disease’s association with heterosexual sex. Indeed, apparently 15 per cent of lesbian and bisexual women over the age of 25 have never had a cervical smear test, compared with seven per cent of all women. However, ‘lesbians who have previously had sex with men may be at some risk and there is evidence to suggest that women who have only had sex with women have developed cervical abnormalities’. (It is worth noting that Hunt and Fish (2008) report that amongst lesbian and bisexual women who had not ever been tested for a sexually transmitted infection (more than half the sample), two in five have had sex with men in the last five years while three in five of those who have slept with men in the last five years have not attended screening for infections because they do not think they are at risk.) Additionally, there were key differences between lesbians and heterosexual women in relation to breast self-examination. Fish and Wilkinson (2003) report that lesbians commonly report not knowing what to look for or how to check their breasts.
7.5 Mental health

7.5.1 Level of mental health problems

Many LGB people do not have poor mental health. However, much of the research we consulted suggests mental health problems are found among all sections of the LGB population. Possibly one of the most robust sources of information on the incidence of mental health problems among LGB people was conducted by the National Institute for Mental Health in England (King et al 2007). They used a systematic review of articles on a range of literature search databases (for example, Medline, Embase, Psycinfo, Cinahl, Applied Social Science Index) to ‘quantify the risk of mental disorders substance misuse, suicide, suicidal ideation and deliberate self-harm in lesbian, gay and bisexual people’ (National Institute for Mental Health in England 2007, p. 2). Of the 476 papers selected only 25 met the study’s robust inclusion criteria. They note that ‘data was extracted on 214,344 heterosexual and 11,971 non-heterosexual people aged 12 and over’. By conducting meta-analyses on these figures their review shows, among other findings, that there was a ‘two fold excess in suicide attempts in lesbian, gay and bisexual people… The risk of depression and anxiety disorders (over a period of 12 months or a lifetime)... were at least 1.5 times higher… and alcohol and other substance dependence over 12 months was also 1.5 times higher’ (National Institute for Mental Health in England 2007, p. 3). Other research by Keogh et al (2006) found that 41 per cent of respondents reported mental and emotional health issues within the last year, of whom 54 per cent felt that their LGBT identity was relevant to their problem.
The level and types of mental health issues vary across different subsections of the LGB population. Dobinson et al (2003) found that bisexual people reported poorer mental health than either heterosexual or lesbian and gay men peers. They appeared to be at greater risk of anxiety, depression or suicidal thoughts. Younger LGB people may be at higher risk of mental health issues than heterosexual peers (see section 5.3.3 on the effects of homophobic bullying). This may be associated with the difficulties of defining their sexual identity and ‘coming out’ to friends and family (Fish 2007j).

According to research discussed by Fish (2007a), BME LGB people are more likely to be affected by homophobic violence, abuse or harassment, all of which are associated with poor mental health (see also chapter 10, section 10.2). Furthermore, BME LGB people face a ‘double jeopardy’ of integrating their BME and LGB statuses, both of which are disparaged in the wider population.

Research indicates that LGB people are also more likely than heterosexuals to have consulted a mental health professional (King et al 2003). One report that sheds some doubt on this was the Healthcare Commission’s Count me in (2007) Census, which canvassed 30,804 in-patients receiving mental health or learning difficulties support. It found that only 2 per cent of mental health inpatients identified themselves as LGB. However, this may not be the true number of LGB people who receive inpatient mental health care since 9 per cent of respondents preferred not to disclose their sexual orientation, and 16 per cent were classified as ‘not known’ (which included people who were not asked).
7.5.2 Reasons for mental health problems

If, as other research suggests, LGB people are at increased risk of poor mental health, this may be for a variety of reasons. One is experiences of homophobia. Even the expectation of discrimination, Meyer (1995, p. 41) argues, can lead to mental health issues. It could result in a ‘hypervigilance’ which arises from the taxing ‘costs of coping’ with having to live with the fear of homophobia. More generally, heterosexism may also be to blame. According to Mitchell et al (2001, p. 14), ‘numerous studies have shown that heterosexism, and the related stresses it causes, are associated with low self-esteem, and higher rates of clinical depression, substance abuse, eating disorders, anxiety disorders, and bipolar disorder, than among heterosexuals’. The National Institute for Mental Health in England (2007, p. 10) also argues that ‘it is likely that the social hostility, stigma and discrimination that most LGB people experience is likely to be at least part of the reason for the higher rates of psychological morbidity observed’.

7.5.3 Deliberate self-harm

Deliberate self-harm is associated with low self-esteem and high anxiety (Fish, 2007a). Research suggests that LGB people may be at far greater risk of self-harm than heterosexuals. Skegg et al (2003) found that gay and bisexual men were more than five and a half times more likely to self-harm than heterosexuals peers. Hunt and Fish (2008) report that one in five lesbian and bisexual women have deliberately harmed themselves in the last year, compared to 0.4 per cent of the general population, while half of women under the age of 20 have self-harmed compared to one in fifteen of teenagers.
generally. Lesbians and bisexual women were found to be more than two times more likely to have self-harmed. Research has suggested that those lesbians reporting the most homophobic incidents are more likely to self-harm. Generally however, health professionals may be unaware of LGB people’s greater propensity to self-harm. Crawford et al (2003) surveyed 126 health professionals working with adolescents who harm themselves and found that over three-quarters were unaware that young homosexual men are more likely to self-harm.

7.5.4 Suicide and parasuicide

Apart from the study by the National Institute for Mental Health in England (King et al, 2007), there appears to be something of a lack of large-scale reviews or surveys on suicide and parasuicide in the UK, while the smaller-scale surveys that do exist often used convenience sampling. Nonetheless, the research that does exist suggests that LGB people are significantly more likely than heterosexuals to consider or attempt suicide.

According to Warner et al (2004, cited in Fish 2007j), gay men are at substantially higher risk than heterosexual people of suicidal behaviours. Young LGB people may also be at increased risk. Greco and Glusman (1998) report that LGB young people’s suicide rates are two to three times higher than heterosexual peers, accounting for 30 per cent of completed adolescent suicides. A rate of attempted suicides of 25.5 per cent was reported by Stonewall’s (2003) survey of 98 LGB young people recruited in Edinburgh gay
pubs and clubs, and 54.1 per cent reported seriously considering suicide at some point in their life.

BME groups face a particular set of issues around suicide, parasuicide and self-harm. According to King et al (2003), BME LGB survey respondents were less likely than white respondents to have considered suicide. Fish (2007a) suggests that this might be because of strong cultural and religious taboos towards suicide among BME groups. However, Marshall and Yazdani (2000, cited in Fish 2007a) found that British-born South Asian young women were more likely to attempt suicide or self-harm than both white and Afro-Caribbean peers. It is therefore not possible to make generalisations for BME LGB people as a whole.

7.5.5 Importance of affirmative support for good mental health

Evidence suggests that LGB people experience different relationships of support from their families (including parents, children, ex-partners and other kin) than heterosexual people. In chapter 4, families and relationships, we reviewed evidence that suggested that many LGB people move away from their family and community of origin in order to be open about their sexual orientation and to find affirming relationships (see chapter 4, section 4.2). In this context many LGB people also develop ‘families of choice’ – supportive networks of partners, ex-partners, friends and selected kin – as alternatives and complements to their family of origin; particularly where their families are hostile to their sexual orientation, relationships are strained, or the LGB person is not completely open about their sexual orientation. Having support
for one’s sexual orientation from a network of LGB people can be a significant factor in good mental health in times of need. Indeed, Mitchell et al (2001, p. 19) note that ‘the ability to participate in a strong LGB subculture, and high degrees of emotional support from LGB friends, have been associated with lower levels of psychological distress’.

Access to social support can be experienced differentially depending on a variety of factors: for example, some LGB older have been found to have developed social networks (Mitchell et al 2001). We noted earlier in the chapter that the creation of social networks was a reaction of older gay men to perceived discrimination in care homes which conferred considerable benefits on the individual. Younger people, on the other hand, may find it particularly difficult to access support from other LGB people, especially when first coming out. Fish (2007d) suggests that the time the LGB young person knows his/her sexuality (often by age 11 or 12) until around age 15 or 16 can be period of isolation during which they may be afraid to come out to friends and family, or, if they do, have their sexuality dismissed by adults (see also chapter 5). LGB people may fall into a range of other categories which may determine their access to social support networks: for example, sexual orientation, ethnicity, disability and HIV status. King et al (2003) found that bisexual people are less likely than lesbians and gay men to report that their siblings had been positive about their sexuality. BME LGB people’s access to social support networks varies. However, according to Greene (1997, cited in Fish 2007a), this group is more likely to retain contact with BME heterosexual groups. This was because the wider BME community may provide crucial
support to enable the individual to cope with the racism of wider society. Regarding LGB disabled people, their access to LGB support networks may be severely limited since, according to Fish (2007m), disability often involves a reduction in networking opportunities. This would further increase the isolation the individual feels for being disabled. Finally, HIV status may be an important determinant of access to social support networks. White (2003) studied the support experiences of 30 HIV-positive gay men, whose status as ‘infected’ may exclude them from both heterosexual and LGB society.

7.6 Sexual health

As the most widely known LGB health risk, a lot of research has been carried out on HIV and AIDS among gay men and bisexual men. However, it is important to emphasise that this is far from the only sexual health problem faced by LGB people. Gay and bisexual men are also at higher risk of a variety of other STIs, while lesbian and bisexual women, who are often considered to have the best sexual health of all social groups, do in fact have their own set of sexual health issues. A number of recent studies into the sexual behaviour of LGB people have helped to shed light on some of the health issues faced by this group. A particularly good example is Vital statistics 2001, which was the first nationwide survey of gay men in the UK (Hickson et al 2002).
7.6.1 Gay and bisexual men and sexual health

**HIV/AIDS and testing**

According to Weatherburn et al (2007), around 80 per cent of domestically acquired HIV infections arise from sex between men. Furthermore, 59 per cent of all people living with AIDS are gay and bisexual men (UK Collaborative Group for HIV and STI Surveillance 2006). However, it is important to avoid implying that being gay or bisexual is automatically linked with HIV. Reid et al (2004) report from a community survey than over half of gay and bisexual men had had no contact with the virus. They also note that only around 7 per cent of gay men had tested positive for the virus.

Nevertheless, it is clear that HIV/AIDS is a particular sexual health issue for gay and bisexual men. Henderson et al (2001) found that half of gay men in two community surveys had never been tested, thus placing them at greater risk of ill-health and poor access to treatment if they are HIV positive. Two separate studies of people recruited at gay bars in Glasgow and Edinburgh sought to uncover the reasons why some gay and bisexual men arrange HIV tests, while others do not. Hart et al (2002) found that half of their 2,498 respondents reported having ever had an HIV test. Flowers et al (2003) found that the most important factor associated with never being tested reported by their 803 respondents was fear of a positive HIV result. The problem with these studies is that they used convenience sampling and are therefore unrepresentative of the wider gay and bisexual male population; however, they do provide useful findings for those using the scene in Scotland.
There are few studies on testing and HIV prevalence among BME gay and bisexual men. However, Fish (2007k), writing about those that do exist, notes that ‘UK researchers suggest that there is no evidence that sex between men is either less or more common among any minority ethnic group compared with the ethnic majority… [However] compared with white gay men, African-Caribbean men in the UK were twice as likely to be living with diagnosed HIV infection, while South Asian men were less likely to be doing so. Despite this increased risk, African-Caribbean men were less likely to use outpatient services’.

**Sexual practices and STIs**

The incidence of STIs appears to be increasing in gay and bisexual men aged between 18 and 29 (Bekerian 2003). A number of studies have sought to make a link between such a finding and an apparent increase in high-risk sexual practices (for example, Elford et al 2002; Keogh and Weatherburn 2000; Bekerian 2003). Elford et al (2002) conducted an annual survey of 2,938 gay men between 1998 and 2001 and discovered increases in the number of respondents reporting UAI (unprotected anal intercourse) with a partner of unknown or discordant (different) HIV status. The rise of certain methods for men to seek sex with other men, such as the Internet, ‘back rooms’ and sex tourism, may contribute to the increase. Elford et al (2001) surveyed 743 gay men using London gyms on Internet sex. They found that 34.4 per cent had used the Internet to find a partner with whom to have casual sex. Keogh and Weatherburn (2000) conducted 20 in-depth interviews with users of back rooms. They found that many respondents had developed
personal strategies for mitigating the risks of infection of this form of anonymous sex.

The research we consulted also revealed other possible issues for gay and bisexual men. According to Bekerian (2003), ‘gay males become sexually active as early as 14 years of age, and may not have the experience or assertiveness to adopt safer sex, for example by using a condom’. Devlin et al (2003) identified particular issues for bisexual men. Apparently, they are less likely than gay males to be educated about STIs, are more likely to have trouble obtaining condoms and are more likely to practise unsafe sex with a greater number of men (see section 5.2 on teaching about LGB issues in schools). These studies would suggest variations in the knowledge of safer-sex practices within subsections of the gay and bisexual male community. This indicates a need for further research to elaborate these findings.

7.6.2 Lesbian and bisexual women and STIs

It may be a common misconception that lesbians cannot catch STIs. This may partly rest on the assumption that this group does not have sex with men. However, in their study of 803 lesbian and bisexual women attending lesbian sexual health clinics as new patients, Bailey et al (2003) found that 85 per cent of respondents reported having had sex with men at some point. Furthermore, certain STIs may be contracted from lesbian sex: Fish (2007a) notes that ‘STIs (trichomoniasis, genital herpes and genital warts) have been diagnosed in women with no sexual history with men. Although gonorrhoea and chlamydia were infrequently found in lesbians, bacterial vaginosis (BV)
occurred more commonly among lesbians than heterosexual women’. Despite such findings, fewer than half of respondents to Hunt and Fish’s (2008) survey reported having been screened for STIs.

Lesbian and bisexual women may have a range of sexual health needs beyond prevention or treatment of STIs. Henderson et al (2002) suggest that, other than unwanted conception and freedom from STIs, issues for lesbians include ‘enforced celibacy, absence of sexual fulfilment, unequal and abusive sexual relationships, difficult and painful sex, relationship disruption, and feelings of low self-worth and sexual health’. However, the sexual health needs of lesbians and bisexual women are still often neglected by healthcare providers.

7.7 Monitoring LGB patients

The literature identified that one of the current issues preventing better targeting of resources at LGB people is a lack of patient statistics on this population. One suggested way of rectifying this is asking all new patients what their sexual orientation is. Stonewall (2007) note that this could be recorded on a patient’s medical record. However, the research notes some problems with recording patients’ sexual orientation. Stonewall (2007, p. 25) observe that ‘[while] it is possible that this would ensure immediate enhanced service delivery, and a patient would not have to keep “coming out”… it could lead to an increase of discriminatory practices’. Similarly, Hunt and Cowan (undated, p. 46) conclude that it is ‘not appropriate at this stage to introduce universal patient monitoring until the health sector is able to demonstrate a
more universal acceptance of LGB people. This could be reflected in the increase of visible health sector employees who are LGB, who may be able to provide advice about making services accessible’. Other issues related to the difficulties of asking for information about sexual orientation at the point of first contact (especially in public environments such as reception desks) and concerns about confidentiality of information (for example, from GPs to other practice staff such as receptionists and from insurance companies). Stonewall have produced a guide on monitoring sexual orientation in the healthcare sector (referred to below).

7.8 Best practice

Health and social care was one of the areas where we found the most evidence of good practice guidance and a wide range of resources targeted at service providers, practitioners and LGB people. Guidance related to policy initiatives, access to services and the need for resources tailored according to sexual orientation. Guidance and resources addressed issues related to specific areas of health care (for example, sexual health, mental health) and to specific subsections of the LGB population (for example, BME LGB people, lesbians and bisexual women) (see Fish 2007a). One of the key issues in relation to best practice guidance in health and social care was the vast array of literature and information which at times can be overwhelming. Although there were some attempts to bring this together in places, it would be better to systematically gather all evidence and guidance relating to sexual orientation together in an easily accessible form in a central resource.
7.8.1 Policy initiatives, guidance and general resources

Policies, initiatives and guidance

A range of policies and initiatives were discussed in the literature in relation to healthcare and the health service. As mentioned above, one of the most comprehensive sources of information on policies and resources was Fish’s *Reducing health inequalities for lesbian, gay, bisexual and trans people – briefings for health and social care staff*, published by the Department of Health (Fish 2007a). This contains a comprehensive discussion of guidance and resources in relation to general health inequalities, mental health, sexual health and different aspects of health experiences within various subsections of the LGB population. In addition, the Department of Health Sexual Orientation and Gender Identity Advisory Group are working with external stakeholders on the delivery of a programme of work to promote equality and eliminate discrimination for LGBT people in health and social care (as both service users and employees) (Fish 2007b). A number of professional organisations, including British Medical Association (British Medical Association 2005a, 2005b) and the Royal College of Nurses and UNISON (Royal College of Nursing and UNISON 2005), have also provided guidelines in relation to the responsibilities of healthcare practitioners towards LGB people and in terms of delivering non-discriminatory practice to LGB people and their families.

Stonewall are also involved with a number of initiatives. For example, Stonewall Scotland and NHS Scotland (2005) published *Fair for all – the wider*
challenge: good LGBT practice in the NHS, which provides guidance to NHS staff with a ‘responsibility for developing policy and planning, and those with a remit for Equality and Diversity, Patient Focus and Public Involvement, Organisational Development, Human Resources and Training’. They have also produced Monitoring sexual orientation in the health sector (Hunt and Cowan undated) and Being the gay one: experiences of lesbian, gay and bisexual people working in the health and social care sector (Hunt et al 2007) – the latter being a project to identify the barriers to reporting homophobia against health and social care employees. Stonewall have also helped produce a Department of Health guide on single equality schemes for health trusts etc (to be published in the near future) and a guide for LGB patients on their rights in conjunction with the General Medical Council.

In relation to social care the Commission for Social Care Inspection published their social care best practice guide, Putting people first: equality and diversity matters 1: providing appropriate services for lesbian, gay, bisexual and transgendered people (CSCI 2008). The report identified a number of ways in which social care services can be improved for LGB people. It states that ‘in order to actively meet the needs of LGB people, service providers need to take specific steps in order to ensure that LGB people are not discriminated against and that they receive an equal service’. These include:

- creating an ethos in the service where LGB people are valued through positive leadership and action on the issues;
- reviewing policies and procedures and assessment/admission processes to ensure that they do not discriminate;
• providing training and support to staff on the issues;
• positive action to make LGB people feel welcome and able to come out, for example through ensuring inclusion of LGB people in publicity;
• ensuring that LGB people have a choice of which staff support them;
• enabling LGB people to have contact with their communities and friends;
• valuing LGB people’s relationships;
• taking appropriate action when discrimination does happen;
• listening to the views of LGB people and monitoring progress (CSCI 2008, p. 6).

**General healthcare resources**

In addition to the policies, initiatives and guidance above, Fish (2007c) identifies a range of general resources, including:

- The development of a Department of Health DVD and online resource that aims to support healthcare organisations in developing strategies to promote equality and eliminate discrimination for LGBT people. It can be used as a practical tool in training staff and raising awareness;\(^{39}\)
- The NHS Inclusion Project Scotland, which aims to mainstream LGBT equality and diversity issues in the NHS, and which has produced guidelines for good practice in healthcare for LGBT people;\(^{40}\)
- The Gay and Lesbian Association of Doctors and Dentists.\(^{41}\)
7.8.2 Training, development and inclusivity

One of the themes which emerged from the earlier discussion was that staff may discriminate against LGB people not necessarily because they are homophobic but because they lack training on how to deal with LGB people. This may be unsurprising given that, according to Pringle (2003, cited in Fish 2007b), there may be a lack of input on sexual orientation in the undergraduate medical curriculum, nursing education and training of allied health professions. As such, many of the best practice guidance suggests the need for further staff training. Stonewall (2007, p. 25) conclude that ‘training of all NHS staff to understand and appreciate the needs of the lesbian and gay community is essential, and should be a core part of any primary training programme’. Stonewall Scotland and NHS Scotland (2005) echo the call for more training, and recommend that LGB issues should be raised at team meetings and presentations. They also suggest that healthcare providers should consider adopting the ‘champion’s model’ in which a senior member of the organisation develops specialist knowledge of LGBT issues and promotes them. Stonewall Scotland and NHS Scotland (2005) recommend the use of ‘patient journey models’. During these, staff break down LGB patients’ progress through each stage of service delivery, asking themselves at each stage how the patient would feel with respect to equality and diversity policies. Other research has also highlighted the experiential learning opportunities (for example, the use of role play) (Hinchcliff et al 2005). The Department of Health has published core training standards on sexual orientation (Cree and O’Corra 2006).
Fish (2007c) argues that ‘good communication with LGBT people encourages them to be involved in their own healthcare and promotes better health outcomes’. She suggests that ‘using language that respects LGBT people and acknowledges same-sex relationships is needed for person-centred care’. Hunt and Cowan (undated) recommend that staff should avoid making heterosexist assumptions, for example by the using gender-neutral terms such as ‘partner’ instead of ‘boyfriend’ or ‘girlfriend’ when referring to the patient’s partner if his/her gender is unknown. Inclusive language may be particularly important for bisexual people. Doblinson et al (2003) state that bisexual users of health services feel it is important for providers to use inclusive language, initiate discussion around bisexuality and ask open-ended questions. Questions should be asked again over time in case things change for the individual. Explicit inclusion of the word ‘bisexual’ in health promotion campaigns is also suggested (cited in Fish 2007h).

Other issues identified in the literature in relation to access to care included creating a welcoming environment for LGB people in healthcare settings and the possibility of tailored interventions. For instance, Fish (2007c, p.3) states that ‘a welcoming environment can be made more explicit by providing a non-discrimination policy statement which states that equal care will be provided to all patients, regardless of age, disability, gender, gender identity, race, religion and sexual orientation’. Hunt and Cowan (undated) also state that providers should place on walls posters which inform LGB people that they can come out to staff without fear of discrimination. Additionally, some evidence suggests that tailored interventions are particularly effective in addressing the
needs of LGB people, for example, in terms of stopping gay men smoking (Harding et al 2004).

7.9 Conclusions and research gaps

Quality and transparency in research findings

There was a significant body of research in relation to discrimination and inequalities relating to health and social care compared to research on other substantive areas in the review, although there was evidence that LGB health and social care inequalities were still under-researched compared the general population. Despite some continuing variability in the quality of research and transparency in the reporting and reliability and validity of findings, there have been significant improvements in the quality of some survey research with regular, high-quality findings being produced (for example, Stonewall, Sigma Research). A significant obstacle to conclusive findings remains the absence of adequate baseline data for sexual orientation at national and local levels. Many surveys have gone to great lengths to achieve as robust samples as possible but have still had to rely on access to LGB people through community groups/organisations, the LGB commercial scene and the Internet; which has significant limitations in terms of determining a full picture of LGB health.

Many studies were also reported in reviews and guidance documents without clear reference to the adequateness of the samples used in these studies. Some findings (for example, those on smoking, alcohol use and drugs use) should be treated with caution where they are based on convenience
sampling or recruitment through the LGB ‘scene’. It has been suggested that a thorough review of when, where and how exclusion related to sexual orientation exclusion occurs in public health delivery is still required. Robust information of the highest quality will continue to be needed if there is to be a greater move from the production of information on health inequalities experienced by the LGB population to an impact on the development of service provision.

Recording and monitoring sexual orientation

A significant barrier to the development of provision and the better targeting of resources was the lack of patient statistics on sexual orientation. One way of remedying this would be to note sexual orientation on patients’ records to monitor sexual orientation at the point of access to services. However, research suggests that disclosure of sexual orientation remains a problematic issue for LGB people because of continuing fears about the impact of disclosure. In this context Stonewall (2007, p. 25) have suggested that ‘research should also be implemented to see how useful and effective it would be to record a patient’s sexual orientation on their records’. Such research would also need to address the appropriateness and ethics of recording such information.

It has also been suggested that disclosure of information on sexual orientation is linked to age, income and educational achievement and that research in this field should examine the impact of these factors on views about the recording of sexual orientation.
Improving the mainstreaming of sexual orientation in health and social care policy and practice

A number of important policies were pertinent to health and social care inequalities and concerns experienced by LGB people but sexual orientation and the LGB population were rarely explicitly mentioned in mainstream policies and practice guidance outside of the field of HIV and gay men’s sexual health. It is possible that the Equality Act (Sexual Orientation) Regulations (2007) will provide a new incentive to include an assessment of the impact of sexual orientation on the experience of health and social care. Future research might examine the extent to which sexual orientation is incorporated into mainstream policies on health and social care and the impact that the inclusion or exclusion of LGB health concerns has on the delivery of care and health outcomes.

Areas of research requiring further development and attention

Most areas of LGB health and social care remained under-researched relative to the general population. Although there is a growing body of research in relation to lesbian and bisexual women’s health, and a historical body of work on gay and bisexual men and HIV and/or sexual health, more, and more robust, research is required in other areas of health such as physical health, mental health and social care.

Although a great deal of statistical evidence on patterns and trends in health inequalities and outcomes existed, there was a need for more qualitative work
to explain why these patterns may exist and to inform appropriate health and social care interventions.

The identification of discrimination, health inequalities and health risks to some extent inevitably focuses on the negative aspects of LGB health, but to focus solely on these negative aspects can be detrimental (see, for example, the negative use of such information in debates about whether LGB people can be suitable parents – chapter 4, section 4.4). It is important that researchers balance discussion of the negative consequences of LGB ‘lifestyles’ with other factors that may be positive.

There was fledgling work on needs of BME and LGB disabled people but still major gaps in this respect. Our research also identified a need for greater research on the specific needs and experiences of older people, young people and bisexual people. It is possible that participatory approaches to research may help reduce some of the difficulties identified in terms of involving people from these groups in research.

**Improving the dissemination of guidance on best practice**

The literature on guidance relating to best policy and practice in the delivery of services to LGB people tended to be vast and dispersed. Despite efforts to draw such guidance together, dissemination of guidance would benefit from it being drawn together in a central location. Research could also be conducted into the applicability and effectiveness of guidance, including guidance on training.
8 LOCAL AUTHORITIES

8.1 Overview

Issues relevant to local authorities are discussed in a number of other chapters in this review: for example, policies relating to local authority involvement in fostering and adoption, housing, hate crime and community safety, and sports and leisure facilities are discussed in chapters 4, 9, 10 and 11, respectively. We also touch on the role that local authorities have as employers in chapter 6 and on their historically controversial relationship to the discussion of sexual orientation in local authority maintained schools arising from Section 28 (2a) in chapter 5. However, a few studies focused specifically on the relationship between the work of local authorities and LGB equality and social inclusion.

More recently, new research funded by the ESRC began on LGBT equalities initiatives in local government. The research, being conducted by Richardson and Monro, began in 2007. It will explore the impact of a changing policy and legislative context on LGBT equality initiatives in local government based around three main themes: processes of local authority resistance and compliance with such changes; cultural change; and debates concerning sexual orientation, citizenship and democracy. The study will be conducted in England, Wales and Northern Ireland and will use a variety of methods including qualitative tracking methodologies, focus groups and interviews with national and local stakeholders. However, beyond this key study, there has been relatively little specific research on sexual orientation and local authorities, particularly since the introduction of the Equality Act (Sexual Orientation) Regulations (2007).

8.2 Policy and legislative context

8.2.1 General policy context

Cooper et al (2005) note that the relationship between LGB people and local authorities has not been an easy one. During the 1980s a number of local authorities ‘recognised the ways in which lesbians and gay men were discriminated against, and initiatives were put in place to address this. These included mechanisms for community involvement, same-sex tenancies, adoption and fostering policies, education initiatives, symbolic initiatives (such as flying the rainbow flag), and public awareness raising events’. However,
towards the end of the 1980s such initiatives were often labelled ‘loony left’ by the populist press, with the most notorious result being Section 28 of the Local Government Act (1988), which prohibited the ‘promotion’ of homosexuality by local authorities (see chapter 5, section 5.1).

This Section, along with a number of other changes in government policy at that time, led to a ‘retraction of work concerning lesbian and gay equality’, with lasting effects for those authorities singled out by the media for attention well into the current decade. For example, Cooper et al (2005) found that some authorities that had not conducted work on sexual orientation during the 1980s now began to do so. However, those ‘authorities that began initiatives in the 1980s have tended to conduct less work subsequently due to the difficulties they experienced’. A legacy still remains, therefore, in terms of preventing attempts to address inequalities experienced by LGB people in local communities and to address social exclusion based on sexual orientation in some local authorities. However, other policy initiatives in local government have enabled the development of initiatives and practices that attempt to include LGB people.

Recent attempts by local authorities to include LGB people can be put in the context of legislation and policy change in the philosophy of public service delivery, which is encapsulated in the ‘Local: Vision’ proposals and the earlier modernisation agenda. In particular, there has been a move away from the ‘one size fits all’ approach to ‘citizen-centred’, more responsive services designed to meet a diverse range of requirements. This philosophy of meeting the needs of every citizen encourages local authorities to provide LGB people
with specific services where they have distinct needs and to remove barriers to accessing services where they exist. Cooper et al (2005) observe a number of changes in the local government policy context between 1990 and 2001 that had affected the way in which local authorities responded to LGB people. These included:

- changes in the way that work with LGB people is framed (for example, a move away from a focus on equality, in which LGB people were seen as a class of people needing opportunities, to an emphasis on diversity and social inclusion, which treats LGB people more as individuals with specific needs);
- development of community safety initiatives linked to attempts to reduce hate crimes;
- interagency working and partnerships, so that work with LGB people is often conducted with partner organisations (often in the voluntary sector) rather than directly by local councils.

These changes have generally lead to a more positive context for the adoption of policies and practices relating to sexual orientation, although there are still significant challenges (outlined below).

8.2.2 Legislative context

A variety of legislation passed within the last ten years has promoted equality for LGB people accessing local authority services, of which the Local Government Acts of 1999 and 2000, along with the Equality Act (Sexual Orientation) Regulations (2007) and the Civil Partnership Act (2004) are
perhaps the most salient. While the former two of these Acts allowed local authorities to address sexual orientation issues as part of a wider agenda of community involvement and community well-being, the latter Act meant that local authorities should examine all of their policies and practices to ensure they are not discriminatory.

**Local Government Act (1999)**

The Local Government Act (1999) provides a particularly good example of the citizen-centred approach embodied in legislation. It uses the concept of ‘Best Value’ – an approach which seeks to ensure the continuous improvement of services and to ensure that they are designed to be responsive to the needs of citizens, not the convenience of service providers (Creegan et al 2007). Therefore, authorities must engage with all sections of society, particularly during the review process: the DETR note that ‘a customer focus to Reviews is essential. It is important that authorities seek out the views of all potential users, especially those who have traditionally been under-represented’ (DETR Circular, 10/99, 14 December 1999, para 17, quoted in Creegan et al 2007, p. 95). Related to this, Reviews should set targets to ‘redress disparities in the provision of services to those that are socially, economically or geographically disadvantaged’ (DETR Circular, 10/99, 14 December 1999, para 17, quoted in Creegan et al 2007, p. 96).


The Local Government Act (2000) requires local authorities to prepare a community strategy for ‘promoting or improving the economic, social and environmental well-being of their area’ [Section 4(1)]. This is accompanied by
the requirement to consult with ‘appropriate persons’ when preparing or modifying the strategy.

**Equality Act (Sexual Orientation) Regulations (2007)**

The Equality Act (Sexual Orientation) Regulations (2007) were intended to bring sexual orientation legislation in line with that relating to gender, race and disability. They outlawed discrimination on the grounds of sexual orientation in the provision of goods and services, including in the exercise of public functions, whether that is work carried out by the public authority itself or that which has been outsourced to a private or voluntary body. Specifically, the regulations made it unlawful to:

- refuse to provide goods, facilities and services on grounds of sexual orientation;
- provide goods, facilities and services of a different quality on grounds of sexual orientation;
- provide goods, facilities and services in a different manner on grounds of sexual orientation;
- provide goods, facilities and services on different terms on grounds of sexual orientation.

However, the fact discrimination on the basis of sexual orientation (that is, that local authorities should equally not discriminate against heterosexuals) does not make the provision of services to LGB people unlawful. The regulations allow local authorities to meet people’s needs in relation to ‘education, training or welfare’ on grounds of their sexual orientation or to provide ‘ancillary
benefits’ in relation to these needs (Creegan et al 2007). This means that local authorities can provide services to meet specific LGB needs, such as targeted youth services or services addressing homophobic hate crime in the local community.

8.3 Local authority policy and practice

Despite the considerable strengthening of legislation for LGB people accessing local authority services over recent years, some research suggests that problems still remain. Two studies, by Fyfe et al (2006) and Cooper et al (2005) (see also Carabine and Monro 2004; Cooper and Monro 2003; Monro 2007, 2006), are useful in this regard. The survey by Fyfe et al (2006) of the policies and provision for sexual orientation of local authorities in Scotland uncovered an uneven picture of policy development and service provision. Sexual orientation did not appear to feature prominently in the equality policies of the authorities. When the local authorities were asked to rank the priority given to the six equality themes, sexual orientation was last. Of 32 local authorities, nine had equality policies which referred to sexual orientation. Only one had a separate LGBT policy, and only three monitored the effectiveness of their policies for LGBT people. Additionally, only six councils advised that they provided capacity building support for LGBT groups. Research discussed in chapter 12 suggests that such support is important for increasing the participation and representation of the LGB community (see also chapter 14, section 14.2).
The case study research conducted by Cooper et al (2005) of 12 local authorities based across Britain also found that, while LGB equality initiatives are less controversial than they were in the 1980s, they remain marginal, under-resourced and hampered by political nervousness. A key issue in relation to this nervousness related to fears about negative press coverage from a hostile media. The research highlighted a number of other challenges remaining:

- The lack of legislation, until recently, to underpin the work of local authorities, particularly in the context of the lingering negative effect of Section 28.
- Continuing prejudice and discrimination that inhibits councils and councillors from taking positive action to address inequalities and which sometimes leads to existing work being undermined.
- The abolition of committee structures in councils, removing an avenue for community representation that can mean LGB issues are sidelined.
- The absence or under-resourcing of structures to support community involvement and representation by LGB people.
- The movement towards contracting out of services, which makes some equalities work more difficult to implement.
- Conflict between different equalities areas, especially between race and faith equalities and LGB equalities, as well as tensions over the inclusion of bisexual and transgendered people.
Uneven development of initiatives so that some local authorities have well-developed policies on LGB issues (particularly urban authorities), while others do not (particularly rural authorities).

Cooper et al (2005) conclude that ‘homophobia remains rife in local authorities, as shown, for example, in the refusal to discuss sexual orientation issues – even in some cases, to use the terms ‘lesbian and gay’; in watering down of initiatives; blocking of policies and, in a few, outright discrimination or harassment’. Subsequent literature drawing on the study includes Monro (2006), which examines and develops performance indicators for evaluating equalities work in local government (focusing on LGB equalities), and Monro (2007, 2005), which explore organisational cultural issues and LGB equalities work in local government.

Nonetheless, although Cooper et al (2005) shed considerable light on change in local authorities in the 1990s and early 2000s, it predates very recent changes affecting local authorities which may impact on equality issues. For example, it would be useful to know the extent to which the Equality Act (Sexual Orientation) Regulations (2007) have impacted on local authority practice vis-à-vis LGB people. More recent case study research on the implementation of community strategies does suggest that LGB(T) voices continue to be unheard within local authorities (Monro 2008). The themes discussed in relation to the work being conducted by Richardson and Monro (forthcoming) suggests that these issues may be addressed by their research.
8.4 Best practice

Possibly the most comprehensive best practice guide for local authorities is Creegan et al (2007). Their guide is intended to inform local authority policy and practice so they can engage effectively with, and provide for, LGB people. It covers a wide range of aspects of provision, including corporate planning, service delivery, customer care, community engagement, monitoring, and policies towards authorities’ own LGB employees. It also provides a rich source of examples of existing best practice. Creegan et al (2007) emphasise the need for local authorities to make a corporate commitment to LGB equality. This, they say, is vital so that LGB issues are ‘mainstreamed’ into everything the authority does. To achieve this, the authority must have a rigorous corporate equality framework which does not treat LGB people as a homogenous group, but rather acknowledges that they may experience discrimination because of both their sexual orientation and also other factors, for example age, ethnicity and disability. Creegan et al (2007) note that authorities have several ‘corporate levers’ at their disposal to help mainstream equality issues. These include Best Value (discussed in chapter xx, section the Equality Standard for Local Government (a mechanism available for English local authorities to mainstream equalities in employment and service delivery) and the Comprehensive Performance Assessment tailored frameworks the Audit Commission has produced for councils of various levels. In addition to its discussion of corporate planning, Creegan et al (2007) provide suggestions for how local authorities can meet the specific needs of LGB people in the context of citizen-centred service delivery. These include meeting needs under the new Equality Act (Sexuality Orientation) Regulations
(2007), equal opportunities for service provision, embedding equality in procurement and contracts, and using feedback to improve services. In their chapter on community development and involvement, Creegan et al (2007) provide practical methods for engaging LGB communities. They note the importance of corporate tools, such as community strategies, Local Area Agreements (three-year agreements, based on localised Sustainable Community Strategies agreed between central government, local authorities and key partners, to deliver sustainable communities) and Local Strategic Partnerships (a key mechanism for promoting community well-being, developing community strategies and determining Local Area Agreements). Creegan et al (2007) also provide general guidance around engaging with local LGB communities, particularly via LGB groups and forums. They make suggestions about funding LGB groups. However, they note that there is no one blueprint for engaging with LGB communities, and that local authorities should expect the process to be challenging.

8.5 Conclusions and research gaps

Systematic review of policies and practices by local authorities

Despite useful case study research in relation to the practices and policies of local authorities, there is still the need for a comprehensive survey of the response of local authorities to the issues faced by LGB people and particularly in relation to new legislative developments (for example, access to adoption and fostering, local authority housing for same-sex couples) and statutory duties (for example, community involvement and consultation). Fyfe’s et al (2006) survey for the Scottish Executive of the policies and
practices of local authorities in Scotland was a useful starting point, which suggested that there were disparities in LGB provision and that responses to LGB people were not always good. We are, however, unaware of corresponding research in England and Wales, which would illuminate whether this is a nationwide problem.

**A review of policies and practices in a new and changing legislative context**

In the last few years there has been a raft of changes in local authorities. There have been considerable organisational shifts, along with new legislation making statutory duties on equality more stringent. Accompanying this have been philosophical moves towards contracting out services and an increased focus on citizen-centred service delivery. The dynamic landscape in which equality issues must sit may render obsolete even research in the field carried out just a few years ago. Once again, although there is good, qualitative case study research in this respect, it will be important that this research is updated. It would also be useful to have a survey of the policy and practice response of local authorities to issues related to sexual orientation since the Equality Act (Sexual Orientation) Regulations (2007).
There were a number of important small-scale surveys and qualitative studies looking at housing issues experienced in relation to sexual orientation. These tended to focus on the experiences of LGB people in terms of harassment and discrimination and problems related to gaining access to housing services. There were also studies that looked at the experience of homelessness among LGB young people and concerns that LGB older people express in relation to the possible loss of independent living and their fear that they may have to use residential care services that do not respond to their needs.

9.1 Nature of housing issues

According to Stonewall (2007), while most LGB people do not have specific housing needs arising from their sexual orientation, they are more likely to experience housing problems such as abuse or harassment. These may often go unaddressed since LGB issues are poorly understood by authorities (Creegan et al 2007). Three studies are particularly noteworthy for their contributions to increasing understanding of these areas. Firstly, Stonewall Cymru (2006) studied housing issues for LGB people in Wales from the perspectives of LGB people, housing providers and other stakeholders, using a mixture of quantitative and qualitative research methods. Secondly, Stonewall Scotland (2007) reported on the response of focus groups of LGB people from across Scotland to a set of draft housing standards designed to address the social housing needs and concerns of LGB people. Thirdly,
O’Connor and Molloy’s (2001) qualitative study sought to understand the causes and nature of homelessness among LGB young people along with experiences of service use.

9.1.1 Harassment and abuse

In studies of their housing needs LGB people have frequently identified harassment and abuse as particularly salient concerns for them. Dick (2008) reports that homophobic hate crimes can occur anywhere, including around the home. Stonewall Cymru (2006, p. 6), for instance, found that ‘harassment in and around the home was the most prolific cause of housing problems’ (see also chapter 10, section 10.2), noting that it happened across all tenure types and ranged from verbal abuse to physical abuse. They also note that such abuse and harassment tended to escalate over time. Keogh et al (2006) found similar types of abuse but their respondents also reported incidents of criminal damage, fouling and neighbours playing repeatedly loud songs with homophobic lyrics. They also discovered that it was frequently young people who were to blame. However, LGB people may fear drawing attention to themselves by reporting incidents of intimidation, verbal abuse, graffiti etc. (Stonewall Scotland 2007). In order to avoid harassment, LGB people may try to hide their sexual orientation from family and neighbours (Stonewall Scotland 2007). However, this may be extremely difficult in practice because of the way in which one’s home is an essential part of everyday life (Stonewall 2007).
Stonewall Scotland (2007) also considered the effects of harassment on the emotional well-being of LGBT people, noting how it lowered self-confidence while increasing the chances of suicidal thoughts and self-harm. Stonewall Cymru (2006) echoed these findings but also found that it increases the chance of homelessness and may also have an effect on a wider group of people, such as neighbours who share the consequences of homophobia-inspired anti-social behaviour and vandalism.

While, as noted above, harassment and abuse occur across all housing tenures, LGB individuals in certain types of accommodation experience specific problems. Those still living in the family home may encounter particularly damaging abuse if their sexual orientation is discovered by family members who hold homophobic attitudes (see section 9.3). LGB people in hostel or other temporary accommodation are also more likely to experience abuse or harassment (Creegan et al 2007). Finally, Stonewall Cymru (2006) found that LGB people in shared private sector or social housing may have problems with sharing communal areas, being accepted by flatmates and landlords, and having a lack of privacy, all of which may impact negatively on quality of life. This report also highlighted that ruralness or urbanity affected the experiences of LGB individuals: it noted that there was ‘a consensus expressed from those participants who had lived in both urban areas and smaller towns in Wales that attitudes within smaller towns were more negative than in larger urban areas’ (Stonewall Cymru 2006, p. 23). Furthermore, those living in estates or in rural areas may experience particular isolation (Creegan et al 2007).
9.1.2 Tenancy problems

An area of concern highlighted in the research literature was the right of a same-sex partner to succeed to a local authority or housing association tenancy in the event of their partner’s death. The Mendoza v Ghaidan (2002) ruling held that under the Human Rights Act (1998) sexual orientation was an ‘impermissible ground of discrimination’, and thus allowed Mendoza to succeed his partner’s tenancy. However, the right of a same-sex partner to succeed their partner’s tenancy was not established for same-sex couples in general until the Civil Partnership Act (2004). However, this only applied to couples who had registered their civil partnership until the Equality Act (Sexual Orientation) Regulations (2007) made it unlawful to discriminate in the provision of goods and services, including housing. However, Stonewall (2007) write that LGB people may still be facing tenancy succession problems. Further research is needed to examine the impact of the legislative changes in relation to these issues.

9.2 Access to housing and housing services

LGB people were accorded equal rights with heterosexual people to access housing services by the Equality Act (Sexual Orientation) Regulations (2007). Local authorities are required to give LGB people equal access to social housing and to help any LGB tenant who is experiencing harassment from other tenants. The regulations also outlawed discrimination on the basis of sexual orientation when renting or buying a property in the private sector. In practice, however, LGB people may still be facing discrimination. Hunt and Dick (2008, p. 5) found that ‘one in five lesbian and gay people expect to be
treated worse than heterosexuals when applying for social housing’ in their
email survey of 1,658 respondents conducted on their behalf by YouGov.
Although this research can be seen as problematic due to its exclusion of LGB
people without email or Internet access, its findings are corroborated by other
research. For instance, the majority of respondents in Stonewall Cymru’s
(2006) sample (which contained individuals in social and private housing)
were reluctant to approach housing support services: because of fears they
would be discriminated against; because they thought that the provider would
lack knowledge of LGB needs; or because of their own lack of knowledge
about what LGB provision was available. LGB service users in some studies
lacked confidence in the ability of housing providers to deal with issues related
to their sexual orientation (Hunt and Dick 2008). In some cases such lack of
confidence was thought to originate from homophobic staff. However, others
felt that it arose because staff lacked knowledge of LGB issues. Where users
had accessed housing services and had disclosed their sexual orientation,
they felt that, while providers were not always homophobic, they did
misunderstand the needs of LGB people. For example, one respondent
reported that a hostel did not understand why he did not want to share a room
with another man who he felt might be homophobic. In a study of lesbian and
bisexual Muslims, Jivraj et al (2002) found that there was a lack of accessible
information to meet their housing needs. Additionally, respondents felt that the
quality of their first contact with a provider affected significantly their
confidence in disclosing their orientation.

The lack of confidence that some LGB people have in the ability of housing
providers to deal effectively with LGB issues appears to be justified. Stonewall
Cymru (2006) note that, while the majority of providers whom they interviewed expressed an interest in providing LGB-specific services, most had little appreciation of the needs of this group. This lack of understanding is sustained because few reported monitoring the sexual orientation of applicants in a way that could help them identify issues that needed to be addressed. Additionally, while many housing services covered sexual orientation in equal opportunities policies, very few included issues related to sexual orientation in their housing strategy or gave guidance to their staff or customers on how to approach LGB issues. A similar situation was found to exist in Scotland by Fyfe et al (2006), who discovered that only six out of 32 housing departments referred to sexual orientation in their strategies. This is a bleak picture since, according to Keogh et al (2006), housing departments and children’s services within local authorities have key roles to play in tackling homophobic harassment. The latter may be important because in their study young people were commonly found to be the perpetrators of homophobic abuse (see also chapter 11, section 11.2).

9.3 LGB young people and homelessness

Research indicates that LGB young people are especially at risk of homelessness (Creegan et al 2007). O’Connor and Molloy (2001) is a particularly thorough and important study for understanding the experiences of this hard-to-reach group. The authors conducted in-depth interviews with 33 lesbian and gay young people with experiences of homelessness and 45 in-depth interviews with a range of housing, homelessness and lesbian/gay organisations to understand the causes and nature of homelessness among
LGB young people along with experiences of service use. They conclude that their respondents broadly fell within three groups determined by the reasons they gave for their homelessness. They are those whose homelessness is:

- Apparently caused by factors unrelated to their sexuality – factors included family breakdown, disruptive parental behaviour, physical and sexual abuse, leaving care and religious and cultural expectations. To this extent their problems were similar to those experienced by homeless people in the wider population;

- Caused by their sexuality – often, these people had a relatively stable upbringing which was shattered by them revealing their sexual orientation to their family. This pattern has been found by other research: Dunne et al (2002, p. 103), for example, emphasise the significance of the process of ‘coming out’, arguing that ‘at a time when it may be easier than before for a person to come out at a younger age, the risks associated with constructing identity and lifestyles against the norm should not be underestimated’. Moreover, specific cultural factors may be particularly important. Many of O’Connor and Molloy’s (2001) respondents from minority ethnic groups reported particularly violent reactions from family members, who were afraid that having a LGB relative would bring shame on the family. It is worth noting in this context that Dick (2008) reported that young people are more likely to be a victim of homophobic abuse: three quarters of 18 to 24 year olds who experienced a hate incident were subjected to homophobic abuse during the incident compared to three in five victims aged 45 to 54.
Caused by both their sexuality and other factors – in these cases it was often difficult to ascribe predominance to either the person’s sexuality or to other factors since they interrelated to produce a complex nexus of causation. O’Connor and Molloy (2001, p. 100) note that ‘a problematic family background can compound the rejection felt by a young person because of their sexuality. Alternatively, homophobic abuse can be regarded as merely another form of abuse to which the young person is subject’.

In addition to analysing the causes of homelessness among their respondents, O’Connor and Molloy (2001) also highlight the damaging influence on LGB young people of material deprivation and particularly psychological trauma resulting from homelessness. The consequences of these for young people may include self-harm, suicide, prostitution, crime or substance abuse.

9.4 LGB older people and the loss of independent living

Research suggests that the housing concerns of LGB older people relate mainly to growing older and associated fears about the loss of independent living in a context where they would have to rely on residential services that may be heterocentric and in which they may experience homophobia and isolation. With the aim of understanding LGB older people’s housing needs and the perceived barriers to accessing housing services, ODS and Stonewall (2005) conducted interviews with 64 LGB older people living in a range of accommodation, and various service providers in Scotland. The majority of
respondents said that they felt that their housing needs were being met. Many, however, indicated high levels of concern with the possibility of being LGB in old age. Some of these fears originated from factors also applicable to heterosexual LGB people: for example, ‘loneliness, difficulty forming long-lasting relationships, career problems and fears of discrimination in the healthcare system’ (Harrison 1996, p. 16, cited in Mitchell 2004, p. 241). However, other fears may relate to the individual’s sexual orientation. In relation to ill health or old age, people usually look within their household for practical support and care (Mitchell 2004, p. 241). However, for many LGB older people, this may not be possible since research suggests that they are less likely to have a partner or children to look after them (Heaphy and Yip 2006; Heaphy et al 2004; Heaphy et al 2003). The impact of such issues may fall particularly heavily on older lesbians, since they are likely to live longer and be among society’s poorest groups (Creegan et al 2007). One could speculate, therefore, that they would be significantly more likely to have to rely on unsuitable care.

There appeared to be no research on the actual experiences of LGB people in residential care. Most discussion to date focused on the perceptions of care of LGB people not currently in care (for example, ODS and Stonewall 2005; Fish 2007e; Stonewall Scotland 2007; Turnbull 2001; Creegan et al 2007). These perceptions appear to be largely negative. They are expressed not only by older people themselves but also by younger people in a range of housing situations (Stonewall Scotland 2007; Heaphy et al 2003). LGB people may perceive that assumptions of heterosexuality, or even asexuality, tend to permeate such environments (ODS and Stonewall 2005) and that
homophobia may be experienced from staff and other residents (Fish 2007e). Since a LGB person might be the only LGB person in the care setting, the sense of isolation could be considerable (Fish 2007e; Heaphy et al 2004, Heaphy and Yip 2006). Discrimination may be particularly severe for LGB older people in residential care, both because of heteronormative attitudes in the delivery of care (for example, not allowing a same-sex couple to share a room, organising social activities that focus on heterosexual cultures) and because of potential discrimination from other residents.

Unsurprisingly, respondents in studies on LGB older people and housing have sometimes indicated a preference for exclusive LGB residential homes (for example, ODS and Stonewall 2005). Indeed 83 per cent of those surveyed in a study in 1995 (Hubbard and Rossington 1995, cited in Creegan et al 2007, p. 61) suggested they would prefer this type of accommodation. Yet, no such provision currently exists (Fish 2007e). Other qualitative research suggests that some LGB people are planning to live in old age with partners, if they have one, or with gay friends and/or relatives. This was a prospect that was regarded positively, both as a way of avoiding loneliness and for mutual support, as well as to avoid having one’s gay identity effectively stripped in a care home environment (Mitchell 2004).

9.5 Best practice

The discussion above suggests that local authorities, housing associations and other housing providers have a key role to play in reducing harassment and abuse faced by LGB tenants and improving access to housing for LGB
people. They also have a role to play in creating residential care that is inclusive and responsive to the needs of LGB older people and supporting services targeted to support LGB young people when disclosing their sexuality to family members and wider members of their community.

Resources identified in the literature tended to focus on the needs of younger LGB people where they had become homeless: for example, the Albert Kennedy Trust provides LGB young people (under 21) with supportive and caring homes (Stonewall 2007). Stonewall Housing also provides temporary, supported housing for 16- to 25-year-old LGB people, along with housing advice, advocacy and resettlement advice for those moving into independent accommodation (Stonewall 2007). In Wales, Triangle Wales provides housing services more generally, including a helpline, one-to-one mentoring and floating support to LGBT people of all ages (Stonewall Cymru 2006). However, it also has services specifically for LGB people aged between 16 and 25. The service is currently negotiating nomination rights with housing associations for a move on accommodation and has compiled a list of ‘gay friendly’ private landlords for LGB people looking for accommodation. Gold (2005) has also produced a document discussing the issues faced by LGB people in relation to housing and homelessness for Shelter. This document describes best practice, too.

Creegan et al (2007) have compiled a list of recommendations for local authorities and other housing providers working with LGB clients. Recommendations include to:
• Liaise with the Stonewall Housing Association to improve knowledge of the specific issues faced by LGB people;

• Facilitate social groups for LGB people in care homes and housing forums for LGB people living in estates;

• Conduct Equality Impact Assessments, which involves ‘working through all policies and practices, and identifying where these may have consequences for equalities groups. Any negative consequences should then be eliminated, reduced or counterbalanced where possible’ (Gold 2008, p. 20);

• Implement policies which recognise succession rights and tackle homophobic abuse;

• Put up posters stressing that the organisation supports LGB people and will not tolerate homophobia (Gold 2008). This was felt to be important by respondents in Stonewall Cymru’s (2006, p. 30) study, who indicated that when visiting housing offices such notices made them feel that they were ‘in a safe environment and able to talk to someone about their housing needs’;

• Increase provision of accommodation specifically for LGB people such as direct-access hostels, supported housing for care leavers and nursing homes for older people;

• Encourage younger LGB people to become active in services for LGB older people.

Other implications arising from the discussion above also include tackling harassment by young people through education and children’s services.
9.6 Conclusions and research gaps

The need for baseline data and monitoring

The review demonstrates that there is a useful body of research that has begun to map the range of housing issues that are experienced by LGB people. A significant gap, however, is the continuing absence of reliable statistical baseline data on housing issues related to sexual orientation. This means that, however useful existing qualitative research is for understanding the nature of LGB housing issues, it is difficult to obtain a picture of how many people might be affected relative to their heterosexual counterparts. Stonewall (2007) also attribute the lack of data to housing providers not being encouraged to monitor client sexual orientation.

Impact of legislation on discrimination and access to housing

Another area of interest is the impact that changes in legislation and guidance have had on LGB access to housing and reduction in discrimination and harassment. For example, it will be important to review what impact the Civil Partnership Act (2004) has had on tenancy succession for civil partners and whether the Equality Act (Sexual Orientation) Regulations (2007) has led to equivalent access to housing services for unregistered same-sex partners and LGB people compared to heterosexual service users. It will also be important to examine whether the legislation has led to a reduction of discrimination, greater inclusion of the needs of LGB people in housing strategies and planning of services, and greater incentive for providers to tackle such issues.
Reviewing good practice and providing guidance

More research is needed to direct housing policies and practices of local authorities and other housing providers. Gold (2008, p. 20) identifies a lack of research on ‘planning service provision [for LGB people] and ensuring the appropriateness of different approaches’. Furthermore, according to Stonewall (2007, p. 23), there is ‘a distinct lack of training or initiatives to support those who work directly with lesbian and gay people with housing issues. There is also no research that identifies the impact that this lack of training has on individual experiences’. LGB people living in social housing face the problems that authorities may not explicitly mention LGB housing needs in their policies (for example, for Scotland, ODS Social Justice and the Scottish Executive 2006), nor will they have necessarily trained their staff to deal with them (Stonewall Cymru 2006; Creegan et al 2007). This suggests that a review of local authority and housing association policies and practices relating to sexual orientation would be useful, including mapping of good practices that could be used to inform guidance on responding to the needs of LGB clients.

Gaps in the experiences of LGB people in relation to housing issues

Other gaps relate to knowledge about the experiences of specific groups within the LGB community. For example, we noted above that although there is a body of research relating to the fears of LGB people about relying on mainstream residential care there is no research to date looking at the actual experiences of LGB already receiving such care. Similarly, although a number of studies have suggested that young BME LGB people might have
particularly negative experiences in relation to housing, these issues have not been systematically explored as the main focus of a study.
10 HATE CRIME, POLICING AND SAME-SEX VIOLENCE

Until recently research evidence on homophobic hate crime, policing and the treatment of same-sex violence was mainly limited to small-scale national or local surveys, or to qualitative studies describing the experiences of people who encountered the police and criminal justice system. Once again, changes to the legislative context, described below, have substantially altered the focus and emphasis of research, from documenting negative experiences of the criminal justice system towards monitoring the level of homophobic hate crime and incidents and how well the police respond to crimes reported by LGB people. Although official government surveys, such as the British Crime Survey, do not record information on crimes according to the sexual orientation of victims as a matter of course, a number of significant surveys have begun to examine the response to homophobic hate crime. This chapter looks at research relating to the nature, level and experience of homophobic crime and at the response of the police to these crimes and the issue of same-sex violence.

10.1 Legislative context

Historically many aspects of the sexual orientation of gay and bisexual men were treated as criminal in Britain. Although male homosexuality was partially decriminalised by the Sexual Offences Act (1967), this was only for gay and bisexual men over 21 and in private. The age of consensual sex for gay and bisexual men was not equalised with heterosexuals at 16 years old until 2001, and it was not until the Sexual Offences Act (2003) that the offences of gross
indecency and buggery were removed from the statute books. Consequently, until recently gay and bisexual men have had a difficult relationship with the police and criminal justice system, often being regarded as criminals rather than the victims of crimes. Although lesbians were never effectively criminalised in the same way as gay or bisexual men, they were often treated with a similar level of disrespect in their contact with the police and criminal justice system. Research conducted in the areas of hate crime, policing and the treatment of same-sex violence therefore needs to be seen in this historical context.

A number of pieces of legislation and guidance have substantially shifted the emphasis of research in this field. Several legal changes have attempted to improve the reporting of homophobic hate crimes and incidents and to encourage the police and local authorities to improve their response to them. The Crime and Disorder Act (1998), for example, places on police and local authorities a duty to create crime and disorder reduction partnerships and strategies for their areas (these processes are also discussed in chapter 14, section 14.2). Acknowledging that the LGB community may be ‘hard-to-reach’, the statutory guidance accompanying the Act requires partnerships to actively engage with LGB people in order to address their concerns (Creegan et al 2007). The Crown Prosecution Service Homophobia Statement (2007) also provides guidance on homophobic crime and guarantees LGB people a level of service from the justice system (Creegan et al 2007).
More recently, there has been a specific focus on the reduction of homophobic hate crimes. The Criminal Justice Act (2003) was a considerable step forward in tackling homophobic hate crime since it empowers courts in England and Wales to impose tougher sentences for crimes aggravated by the victim’s sexual orientation. While it does not create a separate offence for homophobic assault, from 2005 it required judges to treat homophobia as an aggravating factor in assaults involving or motivated by it (Fish 2007a; Purdam et al 2007). This could lead to an increase in the sentence if the defendant is found guilty.

The Scottish Executive has set up a Working Group on Hate Crime and published a consultation paper on hate crime towards specific social groups. The working group recommended that, ‘The Scottish Executive should introduce a statutory aggravation as soon as possible for crimes motivated by malice or ill-will towards an individual based on their sexual orientation’ (Scottish Executive 2004, p. 4), although at the time of writing such provision had not been put in place.

The Criminal Justice and Immigration Act (2008) also extended the provisions on incitement to racial hatred to create the new criminal offence of incitement to homophobic hatred from May 2008. The new offence will cover incitement to serious acts of hatred, including, for example, homophobic song lyrics that encourage the murder and torture of LGB people. However, the Act retains a ‘religious defence’ that exempts criticism of homosexuality on the grounds that people of faith may regard sexual conduct between people of the same-sex
as morally wrong or a lifestyle that should not be encouraged. The law does not prohibit freedom of speech on homosexuality, the telling of ‘gay jokes’ by comedians or cover playground insults (Stonewall 2008, information bank).

10.2 Homophobic hate crime and incidents

Although there have been a number of useful surveys on homophobic hate crimes and incidents, attempts to uncover a complete picture of its incidence suffer from the problem that official data sources such as those from the Home Office do not systematically record offences related to sexual orientation (Purdam et al 2007) and because many of such offences go unreported and recorded (Dick 2008, p. 5). According to McManus (2003, p. 43) the British Crime Survey did include a question on the experience of violence, harassment or anti-social behaviour ‘due to the offender’s homophobic/anti-gay or lesbian attitudes’ but there has been little official evidence beyond this to date.

In this context, Stonewall’s report, *Homophobic hate crime: the gay British crime survey* (Dick 2008), is the best source of information on homophobic hate crime. The research, sponsored by the Home Office, used online interviews with LGB adults from YouGov’s panel of 185,000 respondents across Britain. Respondents from the panel who had identified themselves as LGB were contacted by email inviting them to take part. The study achieved a sample of 1,721 respondents, although it is not stated what the response rate is or how panellists were recruited (Dick 2008, p. 36). However, the study tends to reinforce findings from previous smaller-scale surveys and qualitative
case studies, which collectively help to build up a picture of homophobic hate crimes and incidents in Britain.

**10.2.1 Patterns of hate crime and incidents**

*Nature of hate crimes and incidents*

In the discussion of crimes against LGB people a distinction is often drawn between hate crimes and hate incidents. The Association of Chief Police Officers (ACPO) defines a hate crime as ‘any hate incident, which constitutes a criminal offence, perceived by the victim or any other person as being motivated by prejudice or hate’. A hate incident is defined as ‘any incident, which may or may not constitute a criminal offence, which is perceived by the victim or any other person as being motivated by prejudice or hate’ (cited in Dick 2008, p. 11). In the Gay British Crime Survey, Dick (2008, p. 7) found that hate crimes and incidents experienced by LGB people included physical assault, the threat of violence, insults and harassment, vandalism against the homes or property (for example, cars) of LGB people and unwanted sexual contact. Other crimes experienced by LGB people and identified as homophobic included robbery and burglary (Dick 2008, pp. 10–11).

*Levels of homophobic hate crime*

Despite inconsistency in the way hate crime has been measured, research does suggest that LGB people experience high levels of hate crime and that these levels may have remained consistent over the past decade. For example, Stonewall’s (in Mason and Palmer 1996) study of homophobic hate
crime in Britain found that one in three gay men and one in four lesbians had experienced at least one violent attack during 1990–1995. By 2008 Dick found that ‘one in five lesbian and gay people had experienced a homophobic hate crime or incident in the last three years, while one in eight had been a victim in the last year’ (Dick 2008, p. 5). Often these incidents occurred repeatedly and around people’s homes: 27 per cent of respondents in a survey of LGB people in Birmingham had suffered this type of repeated harassment (BCSP 2002, cited in Purdam et al 2007, p. 11).

Findings for Scotland and Wales tended to rely on older or smaller scale-surveys. In the Beyond Barriers (2002) study in Scotland, 68 per cent of respondents had been verbally abused or threatened by someone who has assumed they are LGB, and 23 per cent of respondents had experienced a physical assault at some point in their life. Two separate studies in Wales reported that one in three LGB people had been victims of bullying or violence in their lifetime (Stonewall Cymru 2003; Williams and Robinson 2004). The Stonewall Cymru (2007, p. 6) survey found that ‘22 per cent of respondents had experienced homophobic harassment in the past 12 months and 5 per cent had experienced homophobic violence’. Although Stonewall’s most recent general survey of the extent of hate crime in Britain does not provide a breakdown of the level of hate crime for England compared to Scotland and Wales, it does give evidence of how much their respondents perceive that homophobic hate crimes and incidents are a problem in particular regions. In this case Wales is in the top three areas where such crimes are perceived as a problem, with 14 per cent of respondents saying that they are a problem, the same percentage as for London. By comparison Scotland is mid-range in the
table, with 12 per cent of respondents seeing hate crimes and incidents as a problem in their area (Dick 2008, p. 13). Dick (2008) also reports that almost a third of lesbians have been insulted or harassed because of their sexual orientation in the last three years compared to over one in five gay men.

**Who is affected by hate crime**

There was also some evidence that different subsections of the LGB community may be affected by the hate crime and incidents to a different extent. In this case, gay men have been found to be over two and a half times more likely to be the victim of a hate incident involving a physical assault than lesbians (Dick 2008, p. 7), which appears to reiterate previous research findings (Beyond Barriers 2002; Stonewall Cymru 2003; Williams and Robinson 2004). However, when lesbians do experience a hate crime, the perpetrator is more likely to be committed by someone they know, either someone living locally or a work colleague (Dick 2008, p. 6).

There is also evidence that people from BME groups have to deal with higher rates of hate crimes and incidents and racism. In the former case, Dick (2008) discovered that ‘8 per cent of all black and minority ethnic lesbian and gay people have experienced a physical assault as a homophobic hate incident, compared to 4 per cent of all lesbian and gay people’ (Dick 2008, p. 5). GALOP (2001) found that 68 per cent of respondents in a study of black LGB people in London had experienced homophobic abuse, and 56 per cent had experienced racism. However, while the GALOP (2001) report usefully broke down responses by ethnicity, it failed to make clear whether abuse originated predominantly from within or outside the respondent's community. A
qualitative study would be useful to explore this issue and to investigate whether there is a relationship between homophobic hate crime and racism. The experience of hate crime and incidents also differs by age. According to Williams and Robinson (2004), LGB older people are less likely to have experiences of abuse or violence. However, Age Concern (2001, cited in Fish 2007e) found that 36 per cent of LGB people aged 60–91 had been subjected to verbal abuse, and 44 per cent of men and 16 per cent of women had been physically attacked. These are comparable rates with LGB people generally, suggesting that the incidence of abuse does not diminish with age, although it is not clear whether those instances which were reported happened prior to, or during, old age. By comparison young people may be more likely than some other groups to have experienced abuse or violence (Ellis and High 2004). Additionally, the children of LGB parents may also experience harassment because of the prejudice towards the sexual orientation of their parent(s) (Stonewall Cymru 2003; Dick 2008)

**Who commits homophobic hate crime**

Not all research specifies exactly who committed hate crimes or incidents. However some research suggested that hate incidents are more likely to be committed by young people. For instance, in Stonewall’s survey three in five victims experienced a hate incident committed by a stranger under the age of 25. Such incidents were even more likely to be committed by young people towards other young people, with seven in 10 victims of hate incidents aged 18–24 saying that the person perpetrating the incident was a stranger under the age of 25. Others factors associated with perpetrators were that they
tended to live in the same area as the victims and that one in 10 was the victim of an incident perpetrated by a work colleague (Dick 2008, p. 14).

**Triggers to hate crime and ‘safe spaces’**

Higher rates of hate crime and incidents mean that LGB people have to be acutely aware of the visibility of their sexual orientation in public spaces, whether or not this is in an environment with a visible gay scene (pubs and clubs) or community. Over a third of victims of homophobic hate crimes and incidents in Stonewall’s survey said the perpetrator identified them as gay because of where they were, for example a gay venue, or who they were with, for example, their partner (Dick 2008, p. 6). Half of lesbians experiencing hate crimes and incidents said they occurred when they were with their partner. One study that asked Scottish LGB people to assess their feelings of their safety in different areas found that the perceived least safe areas were the street (61 per cent), in or near a non-gay venue (47 per cent) and on public transport (47 per cent) (Beyond Barriers 2002). In this context it might seem unremarkable that LGB people have often tried to create relatively ‘safe spaces’ in large towns and cities or in specific locations (for example, some rural areas and seaside towns).

Some towns do have existing ‘gay villages’, which are intended to be ‘safe havens’ for LGB people. Skeggs (2005) studied two such spaces, in Manchester and Lancaster. Skeggs employed a mix-method approach comprising: interviews with key local informants; a survey of a total of 900 plus local LGB people in the two cities; focus groups with local LGB people; and ‘citizens’ enquiries’ (interaction forums between key local informants and
focus group participants). The report notes that Manchester had a well-established, highly visible gay space in the heart of the city; in contrast, Lancaster, a small, provincial city, had only one public space identified as ‘gay-friendly’. They found that far from being a haven from heterosexual violence, Manchester’s gay village was considered dangerous by many respondents. Confirming the research above, these people tended to believe entering the gay village marks LGB people as gay and so they are more likely to be recognised. In contrast, the relative invisibility of LGB people in Lancaster made respondents feel safer. However, Skeggs (2005) notes, that the ward in which Manchester’s gay village is located is known as a crime hotspot, and it is not clear whether the gay village has a role to play in this or whether a high crime rate would exist without it. It would therefore be useful to know whether LGB people using established gay villages in other large cities feel as conspicuous and unsafe as respondents in Manchester did. It would also be useful to know whether another interesting finding for Manchester – that heterosexual men and women use the gay village as a haven and, unlike LGB people, feel safe within it – is applicable elsewhere.

**Effects of hate crime**

Homophobic hate crime may have a profound effect on the quality of life of victims. To avoid it, LGB people may change their behaviour in public, such as avoiding displays of affection with another LGB person (Fish 2007a), or even acting as if they are heterosexual (Skeggs 2005). Dick (2008, p. 6) reveals that ‘a third of lesbian and gay people alter their behaviour so as not to appear lesbian or gay to prevent being a victim of crime. The fear of hate crime and incidents also created considerable anxiety and worry for some LGB people.
In fact, one in ten lesbian and gay people say that being a victim of crime is their biggest worry, more than being ill or having financial debts (Dick 2008, p. 6). The experience and fear of hate crime can also lead to poorer mental health, additional stress, hypervigilance and parasuicide and suicide (see chapter 7, section 7.5).

10.2.2 Reporting of homophobic hate crime

*Under-reporting of crimes and incidents*

The under-reporting of hate crime and incidents is extremely significant in terms of gaining a realistic estimate of the size of the problem and of targeting policing appropriately. Dick (2008, p. 5) reports that a third of victims do not report incidents to the police because they do not think the police would or could do anything about it (p.6): only 6 per cent reported them to third parties; seven in ten did not report hate crimes or incidents to anyone. There were a range of reasons why LGB people do not report hate crime to the police. Some of these reasons related to the perceived seriousness of the incident among LGB people themselves or the ability of the police to do anything about them. For instance, Dick (2008) found that one in five of those who do not report incidents do not think that what they have experienced is an offence. In other cases, 14 per cent of victims of homophobic hate crimes or incidents did not report them to anyone because they felt they happened too frequently to make reporting them repeatedly worthwhile. A study in Scotland found that only 17 per cent of victims of homophobia-motivated assaults had reported them to the police because ‘it was considered to be a waste of time,
not serious enough or the police would not do anything about it’ (Beyond Barriers 2002, p. iii).

Dick also found that a third of LGB people do not report incidents because they believe that there is little that the police can do about it. The report notes that half of all hate incidents reported to the police by their respondents resulted in no action being taken other than it being recorded (Dick 2008, p. 25), which may act as a discouragement to further reporting. A similar effect may arise from low conviction rates for hate crimes: for example, the CPS reports that in 2003 73 out of 103 cases resulted in a conviction (CPS 2005, cited in Purdam et al 2007). Dick (2008, p. 25) also found that only one per cent of homophobic crimes or incidents committed against victims in their survey resulted in a conviction.

Lack of confidence in the police

Other reasons for failing to report hate crimes and incidents related to a lack of confidence in the police, despite considerable efforts by some police services to work with LGB people. Dick (2008, p. 6) reports that ‘a majority of lesbian and gay people still strongly believe that the police cannot and will not take homophobic hate crimes seriously’. Hunt and Dick (2008) found that one in five of respondents would expect to be treated worse than heterosexuals when reporting a crime if the police knew their sexual orientation (Hunt and Dick 2008, p. 11). These negative perceptions may be justified in some cases. For example, Beyond Barriers (2002) states that only 43 per cent of respondents in Scotland who had reported a homophobic incident felt that it had been handled well, while National Advisory Group’s (1999) survey of
2,656 LGB people found that a majority of people reporting crimes expressed dissatisfaction with the police for all categories of crime apart from ‘damage to property’.

Different causes of dissatisfaction emerge from the literature. One is discrimination from the police. In Stonewall Cymru’s (2003) study, a quarter of respondents reported being discriminated against or harassed by the police. This may be because of the police’s ‘machismo subculture’ (Burke 1994) since, as Stonewall Cymru (2003, p. 44) note, ‘all major studies of policing have, across time and in many different countries, highlighted the tendency for working groups of police officers to display hostile, negative and stereotyped views toward LGB people’. Another is the anxiety that a person will be charged with a gay offence if, for example, he/she is attacked in a public place where it could be assumed he/she was seeking sex with another LGB person. Moreover, if the case were taken to court, the victim may have to reveal his/her sexual orientation which could lead to harassment from others afterwards. According to Creegan et al (2007, p. 62), this lack of faith in the police and criminal justice system is caused by ‘decades of institutional and personal discrimination’.

**Uneven quality of police practices**

However, while many LGB people are dissatisfied with the police force and criminal justice system, not all are. Williams and Robinson (2004, p. 213) note that ‘the diverse policing policies and practices relating to the LGB community across the four police forces in Wales have created an uneven distribution of both positive and negative experiences’. It is reasonable to assume that there
is a similar diversity across police forces in England and Scotland (see, for example, Dick 2008, p. 28). Similarly, although Stonewall Cymru (2003, p. 47) report high levels of police discrimination they also commented that ‘it is likely that proactive policing strategies regarding homophobic hate crimes and a reduction in the over policing of gross indecency offences has had the beneficial effect of smoothing out the once contentious relations between the police and LGB community’.

10.3 Same-sex violence

Another area where LGB people may encounter the police and criminal justice system is in relation to same-sex violence, both as victims and perpetrators. Anecdotal evidence from the past suggests that these issues were not treated sensitively or remained largely hidden from view. While there was some research in relation to male rape and same-sex domestic violence, the handling of these issues by the police and criminal justice system remains a largely under-researched area.

10.3.1 Male rape

There appears to be a significant lack of research in the United Kingdom on male rape. Indeed, we found no reports on the experiences of male rape victims and only three reports on the attitudes of others towards male rape: Davies et al 2007; Davies et al 2003 and Davies et al 2001. All of these studies used a very similar methodology in which between 100 and 200 students or members of the public read a sexual assault scenario and then
answered survey questions on it which measured their moral judgements. These studies all found that male respondents made more antivictim judgements than female respondents. Davies et al (2001, p. 607), for instance, conclude that ‘male respondents judged gay male victims more negatively than they did other victims. Female respondents’ judgements were pro-victim regardless of victim gender and victim sexual orientation’. However, the three studies were all surveys with no qualitative element and as such were unable to understand the social processes through which males and females had come to hold apparently divergent views.

10.3.2 Domestic abuse in same-sex relationships

Estimating the level of same-sex domestic abuse has been difficult for two reasons. Firstly, because domestic abuse has been traditionally associated with heterosexual relationships, particularly violence towards women from men. In feminist theory, such violence is used by men as a mechanism through which they can exercise power over women and, consequently, mainstream resources are still arguably channelled towards helping female victims of heterosexual domestic abuse (Stonewall 2007). At the same time, the assumption of gender equality in same-sex relationship has meant that LGB people may struggle to articulate their experience of abuse. Giorgio (2002, p. 123), for example, uses in-depth interviews with 11 abused lesbians and ten domestic violence advocates to reveal how lesbians ‘struggle to define the relationship’s abuse, their lesbian identity, and their own understanding of gendered violence in the context of cultural and institutional stigmatisation of lesbians’.
Secondly, there are problems estimating the level of same-sex domestic violence because there may still be issues of under-reporting, particularly in relation to official police data. For example, Gadd’s et al (2002) multimodal study of domestic abuse within male same-gender relationships in Scotland found that respondents were often too embarrassed to report incidents to police. They also found that many respondents had misunderstood the questions on domestic abuse in the Scottish Crime Survey, which is one survey which could have provided some indication of the actual levels of same-sex domestic abuse. For these reasons, therefore, ‘same-sex domestic violence remains a largely “hidden” issue in lesbian, gay and bisexual communities’ (Creegan et al 2007, p. 62).

More recent studies have, however, begun to present a picture of the level of same-sex domestic abuse and its nature. For example, Hunt and Fish’s (2008) survey of over 6,000 lesbian and bisexual women found that a quarter had experienced domestic violence (the same proportion as women in general) and in two-thirds of cases the perpetrator was another woman. Another survey produced by Sigma Research, which also included gay and bisexual men, made similar findings. It found that 22 per cent of women had suffered physical, sexual or mental abuse or violence from a female regular sexual partner at least once, and 19 per cent had suffered recurrent abuse; 29 per cent of men had suffered abuse at least once, and 24 per cent recurrently (Henderson et al 2002). However, the figures for this latter study need to be
interpreted with care as it used opportunity sampling, not random sampling, and recruited men and women by entirely different methods.

Perhaps the most thorough research on this issue to date is Donovan’s et al (2006) comparative study of domestic violence in heterosexual and same-sex relationships. The authors conducted a same-sex domestic abuse survey of 800 people, 67 interviews with LGB and heterosexual men and women, and four focus groups. Over one-third of the survey respondents reported being victims of domestic abuse in a same-sex relationship. This abuse was most commonly emotional abuse and was seldom mutual. Although patterns of abuse varied between men and women, they did less so on the basis of sexuality: male perpetrators of all sexual orientations tended to be physically and sexually abusive, whilst female perpetrators of all sexual orientations tended to be emotionally abusive. Many victims, regardless of gender and sexuality, drew on narratives of love to explain why they remained with their abusive partner. Donovan et al also noted that there were ‘risk factors’ associated with suffering from same-sex domestic violence. These included being under 35 years old, having a low income, few qualifications and being in a first-time same-sex relationships (Donovan 2007).

10.4 Best practice

In relation to hate crime, Dick (2008, pp. 33–5) makes ten recommendations based on the findings of the Gay British Crime Survey. These include:

- improving the reporting and recording of homophobic hate crime (for example, encouraging LGB and heterosexual people to report hate
crimes; educating and informing LGB people in order for them to better recognise the nature of homophobic incidents and to report them; improving investigation and conviction rates);

• preventing the perpetration of homophobic hate incidents and crimes (for example, tackling homophobia among young people in schools and among work colleagues and employers);

• providing better support and information for the victims of hate crime and incidents;

• providing targeted information to groups not traditionally associated with homophobic hate crimes (for example, lesbian and family friendly initiatives that are not necessarily associated with gay bars and clubs);

• the collection of reliable data on homophobic hate crimes through the British Crime Survey.

Since the Crime and Disorder Act (1998), local authorities and police forces have been obliged to create crime and disorder reduction partnerships and strategies for their areas, and, within this process, to consult with LGB people, who are regarded as a hard-to-reach group. McManus and Rivers (2002) provide a guide to engaging with LGB people during the consultation. The Association of Chief Police Officers (ACPO 2000) have also published a document which sets out the police service’s approach to identifying and combating hate crime and hate incidents, including homophobic crime and incidents. The guide expresses the service’s philosophy, based on the duty to protect and respect human rights within a richly diverse society. ACPO (2000) also presents examples of good practice to be developed and adapted and
identifies sources of further information to assist in this. According to the authors it is designed for all those involved in tackling crime.

Creegan et al (2007, p. 62) have also provided a list of recommendations for local authorities to improve community safety for LGB people. These are:

• prioritise confidentiality in all safety work with LGB people;
• act as an intermediary between the police and LGB community (for example, by catalysing a LGB safety group);
• encourage LGB participation in safety and justice matters (for example, by becoming independent members of police authorities);
• include sexuality in the monitoring of police and safety services;
• ensure staff are familiar with relevant legislation and guidance such as the National Policing Charter (which provides a framework for community policing, provides training on LGB matters and ensures that homophobic hate crime are effectively investigated and monitored).

A number of resources are also available for LGB people experiencing hate crimes or same-sex violence. For example, GALOP is a London community safety charity which provides a helpline for LGB people, supports case work, conducts training and research, and responds and contributes to policy consultations. Publicly funded initiatives include Broken Rainbow and Report It. The former is Home Office-funded and provides a phone line for LGBT people experiencing domestic violence and also collates research into same-sex violence. The latter is a police-funded website which provides LGB people with information about hate crime and provides a means for them to report,
anonymously if necessary, incidents of abuse or violence. Many police forces also now have LGBT liaison officers who have a public telephone number or other means of reporting hate crime (for example, through websites or LGB police liaison groups).

10.5 Conclusions and research gaps

Official estimates of homophobic hate crime and same-sex violence

Estimates of the level of homophobic hate crime have improved considerably since the publication of Stonewall’s Gay British Crime Survey but there is still an absence of official estimates of the level of homophobic hate crime in Britain, and estimates for Scotland and Wales could be improved through better comparisons to England. Stonewall (2007) also note that there appears to be an increasing rate of hate crime in Britain and that research is needed into whether this is a consequence of better reporting, increased homophobia, or both. Inclusion of a question, or questions, on sexual orientation or sexual identity in the British Crime Survey would represent a significant step forward in addressing these issues. Like hate crime, there is no reliable official data on the actual incidence of same-sex domestic abuse. Again, official estimates would help establishing the level of the problem and the resources necessary to target it.

Specific experiences of victims and perpetrators

Despite a reasonably comprehensive examination of the levels of hate crime experienced by different subsections of the LGB community, there remain
gaps in knowledge of the experiences and causes of homophobic hate crime for specific groups. For example, there is a need for qualitative research on the harassment and abuse of black LGB people which would investigate the relationship between homophobic hate crime and racism. There was also a noticeable absence on the experience of hate crime among LGB disabled people.

We also know relatively little about the perpetrators of homophobic hate crimes. While some knowledge of the reasons why people may perpetrate homophobic hate crime can be gained from the chapter on attitudes to LGB people (see chapter 3, section 3.2), we still know little about the motives of actual perpetrators or how to tackle them. Similarly, while we know that young people are more likely to be perpetrators we need a more complete understanding of why young people become involved in homophobic incidents, key influences in this respect, or the most effective ways of addressing these issues. Exploration of the relationship between sexual identity formation, homophobic bullying in schools and a possible progression to hate crimes might be one interesting avenue to explore (see also chapter 5).

**Mapping good police practices of working with LGB communities**

Many LGB people appear to lack confidence that they will be dealt with fairly by the police when they report a crime. Some police forces may indeed be poor in dealing with LGB issues, but not necessarily all. A study into the LGB policies and practices of police forces in Wales uncovered considerable
variety of provision, both good and bad (Williams and Robinson 2004). Further research is required to establish whether this is similarly the case in England and Scotland. Generally, there may also be a need for more research into the best methods police forces and local authorities should employ to tackle homophobia and hate crime (Stonewall 2007). Research also suggested that some LGB people feel unsafe in spaces such as ‘gay villages’ (for example, Skeggs 2005). Further research would be useful in determining effective ways of improving safety in communities where LGB are more highly visible.

The experience and policing of same-sex violence

While considerable steps have been made in estimating the level of same-sex domestic abuse and understanding its nature, there appears to be a gap in terms of how well such issues are handled by the police and criminal justice system. These issues also apply to the experience and handling of male rape.
11 MEDIA, SPORTS, ARTS AND LEISURE

Despite evidence that LGB people may be highly concentrated in certain areas of cultural and leisure activities such as the media and arts (Stonewall 2007), we found relatively little research in these areas compared to the other substantive areas discussed in this review. We also found very little research in relation to LGB people and sport and leisure activities, which is an area where anecdotal evidence suggests many LGB people feel socially excluded. What research there was tended to emphasise the role of the media, sport and the arts in reproducing stereotypical views of LGB people and reinforcing heterosexual views of the world. It also began to identify the ways in which cultural and leisure activities can serve to socially exclude LGB people, either through reinforcement of heterosexual stereotypes of masculinity or femininity, or by reinforcing the need for separate social spaces for LGB people.

11.1 Media

In their study Profiles of prejudice, Stonewall (2003) found that the media, and particularly television, was key to influencing prejudices based on sexual orientation. One of the most significant studies in this respect was Stonewall’s Tuned Out: the BBC’s portrayal of lesbian and gay people (Cowan and Valentine 2006). The authors found that LGB people were portrayed negatively on the BBC, the main state supported broadcaster in Britain. Using a form of content analysis the researchers viewed BBC One and BBC Two between 7pm and 10 pm for eight weeks and monitored programmes for anything of gay interest, and then ran four focus groups of LGB people and
two focus groups of heterosexual people to discuss the findings. The study found that, of 168 hours of programming, gay people were represented for only 38 minutes; for six minutes positively and 32 minutes negatively. They were disproportionately represented in entertainment programmes, including game shows, chat shows and comedy. Lesbians were hardly represented at all. Some 51 per cent of references to gay people were intended for comic effect, reinforcing the view that LGB sexual orientation is something to be mocked, wary of or disparaged. There were almost no examples of homophobia or homophobic preconceptions being challenged. Stonewall (2007) also observe elsewhere that ‘in the history of broadcasting… there has been a tendency to portray gay men simply as effeminate and camp, belying the fact that in real life gay men are no less likely than straight men to be responsible individuals, carry out serious and perhaps community-serving professions’. Similar stereotypes can also be said to have been applied to lesbians.

One significant problem with the *Tuned Out* research was that it was not clearly specified how the researchers categorised portrayals of LGB people as either positive or negative (see chapter 16, section 15.3.2). Notwithstanding this issue, the suggestion that the BBC portrays LGB people negatively is important, particularly given that it is a publicly funded broadcaster and is therefore significantly funded by LGB people. Other Stonewall research found that many LGB people believed that the BBC’s portrayal of them was unrealistic. Hunt and Dick (2008) found that only 43 per cent of respondents felt that BBC One’s portrayal of LGB people was realistic. Out of terrestrial broadcasters, Channel 4’s portrayal was considered the best
(64 per cent) and ITV’s the worst (30 per cent). Two Welsh surveys have also found that LGB people thought that negative and inaccurate media portrayals of LGB people contributed to discrimination and their mistreatment. For example, the Counted Out survey in 2003 found that respondents felt that media representation of LGB people meant that they could not express their identity in public and that they were offended by statements about LGB morality (Robinson and Williams 2003). Stonewall Cymru’s Counted In! survey of 403 LGB people also found that 60 per cent of their sample felt ‘offended by portrayals of LGB people on TV’; 63 per cent felt offended by ‘articles in the print media’; and 65 per cent ‘were offended by the lack of portrayals on LGB people across all media’ (Stonewall Cymru 2007, p. 8).

We could find little research on other media and LGB people. One exception is Cowan (2007), who reported that 51 per cent of people think that tabloid newspapers are responsible for public prejudice against lesbian and gay people in Britain today, while 19 per cent think that TV is responsible and 13 per cent broad sheet newspapers. Cowan reports that there was ‘a significant discrepancy in how newspapers’ contribution to anti-gay prejudice is perceived and their readers’ own views of gay people’ (see chapter 3, section 3.2). There appears to a lack of research on how LGB issues are covered in the mainstream press or on the actual level of anti-LGB content in non-television media (this was despite past media watch reports in the lesbian and gay press).
11.2 Sport

Research suggests that homophobia may be rife within sport. Stonewall (2007) note that the lack of ‘out’ sportspeople, along with expected homophobic derision, had a negative impact on LGB youth participation in sport. This had caused a high LGB drop-out rate, particularly among women, not least because LGB young people have few role models to whom to aspire (Stonewall 2007; see also Fish 2007i). However, it is arguable that traditionally homophobia has received less attention than other forms of discrimination, particularly racism. In football, for instance, although the Football Association has an anti-homophobia statement and supports the International Gay and Lesbian Football Association World Championship. However, there is no equivalent of a specific high profile campaign and little visible action has been done on homophobia, though ‘Kick It Out’ now has responsibility for challenging homophobia as well as racism.

Many mainstream sports like cricket, rugby and football do now, however, have gay teams at amateur level. Among the limited research on sport were two ethnographies of such teams. Both studies note that sports tend to be dominated by heterosexual norms (‘hetero-normativity’), and they therefore aimed to investigate the extent to which these affected the teams they studied. Price and Parker (2003) conducted an ethnography of a gay rugby team in Britain. They found that, rather than challenging the hetero-normativity of rugby, the team inadvertently complied with it. In a study of a lesbian football team in London, Caudwell (2007, p. 193) uncovered a complex picture of both compliance and resistance to heterosexual norms of
behaviour, noting that, ‘despite challenges to hetero-normativity, there is evidence of normative practices that devalue femme-ininity and transsexuality, and, at times, deny some players access to positions on the field of play’.

LGB people in sport also appears to generally be an under-researched area. While there is some research on LGB sports teams, there is little research on the experiences of LGB people in heterosexual teams. This may be partly explained by the difficulty in many sports of ‘coming out’, making this group particularly hard to reach. SportScotland has recently commissioned a review of homophobia in sport by researchers at Brunel, Queen Margaret and Glasgow universities and Stonewall will be publishing research on homophobia in football in 2009.42

11.3 Arts

According to Stonewall (2007, p. 6), ‘lesbian and gay people are generally invisible in the public demonstration of the arts, even though there is a high concentration of gay people who work in the arts. If public personas do exist, they are exaggerated caricatures or are overly concerned with their sexuality’. We identified no studies on LGB people’s relationship to the arts, either in terms of their access to the arts or their involvement in them. However, Stonewall (2007) identify this as a problematic area. They note that although many LGB people work in the arts ‘this background gay presence is often not reflected in public art. In discussions of culture, the sexuality of the artist is cautiously avoided’ (Stonewall 2007, p.35).
11.4 Leisure

Studies in relation to leisure and sexual orientation have tended to focus on the way in which LGB people have had to create separate spaces in order to socialise and relax and the impact that this can have on the economies of particular localities and on the income of LGB people themselves. An example is the case study approach taken by Skeggs (2005), which looked at the creation of dedicated gay spaces (‘gay villages’) in which LGB interests, services and businesses are concentrated. According to Purdam et al (2007, p. 15) such spaces can be commercial hubs with a significant impact on local economies, ‘A number of larger UK cities… have began [sic] to consider economic impact on the city’s economy following the growth in leisure industry and/or “gay villages”’. Skeggs (2005) studied two such spaces, in Manchester and Lancaster (see chapter 10).

While such spaces can be good for the economies of particular towns, the environments they create can come at a cost premium for LGB people. One study that has begun to examine this relationship is by Pritchard et al (2000), who have looked at the way in which LGB occupy different leisure spaces to heterosexual people, including as tourists. Using in-depth interviews and focus groups to investigate the inter-relationships between sexual orientation and tourist behaviour they found that LGB tourist choices may be determined by the need to escape the heterosexism of society to find like-minded people, often in specifically gay-friendly locations and spaces. However, the impact for some LGB of feeling the necessity to seek out such locations on their choice of holiday and income has not been fully explored.
Overall, the importance of LGB people to the leisure industry has been under-researched. According to Purdam et al (2007, p. 15), ‘while much is made of the “Pink Pound”, no study offers a clear understanding of how this may or may not be representative of either disposable income or general economic positioning of lesbians and gay men in the larger economy’. They further note that although some studies indicated that LGB people may have more disposable income than heterosexual people others do not. Research in this area would clearly benefit from a large-scale survey measuring LGB people’s economic positioning vis-à-vis heterosexual people in relation to the level of choice they have in relation to tourism and other leisure activities (see chapter 6, section 6.2). Notably, the access of LGB people to other leisure facilities such local arts, sports and community centres are also a neglected area of research activity.

11.5 Best practice and recommendations

An example of best practice in relation to the media is the Look Out project that was set up to monitor and challenge negative portrayals of LGB people in Wales as a result of the findings from the Stonewall Counted Out Survey (Robinson and Williams 2003). The project, funded by Comic Relief for three years, worked with volunteers to monitor the Welsh media, encourage them to write to media organisations and tackle journalists on their portrayals of LGB people. By working with the journalists LGB people were often able to secure more accurate and positive representations. The main aims of the project included:
• building relationships with the Welsh media;
• providing journalists with accurate LGB-related advice and information;
• working with LGB people and community groups to promote practical support and advice on media relations.

Creegan et al (2007) also observe that the cultural sphere may be key to reducing homophobia and fostering a sense of community cohesion. They recommend that, if organised inclusively, local arts, sport and leisure services could break down prejudice through educating heterosexual people about the reality of LGB life. In this respect they make several best practice recommendations for local authorities in relation to access to cultural and leisure facilities (Creegan et al 2007, p.64), which include:

• ensure that family tickers and passes for leisure and arts venues recognise LGB partners and families;
• support arts projects that enable LGB people to express themselves and to build community understanding;
• include a variety of LGB titles, plus information about LGB community groups, in main and community libraries;
• ensure that relevant staff are familiar with Department for Culture, Media and Sport guidance which suggests that strategies and services should be developed in consultation with marginalised groups, including LGB people.

The only other best practice example we could find in the literature was the Football Association’s anti-homophobia statement.
11.6 Conclusions and research gaps

**Monitoring of the representation of LGB people in the media and its effects**

Overall, LGB may be largely invisible in media, sports, arts and leisure. Where they are visible their representation can be unrealistic and caricatured, showing only a narrow range of LGB experience. In television, for instance, research suggests that the BBC may under-represent or portray negatively LGB people, thus perpetuating lesbian and gay stereotypes (Cowan and Valentine, 2006). Further research may therefore be needed in terms of the representation of LGB people in the media and its effects, including examination of newspapers, radio and new media forms such as computer games and the Internet.

**The affect of heterosexual stereotypes on participation in sport**

Like media, in sport there may be problems also, perhaps largely because of the dominance of hetero-normativity in ideas about masculinity and femininity. Further research is needed on the experiences of LGB people in sport, including the affect of the reinforcement of heterosexual stereotypes on levels of participation, both in sport generally and in relation to choice of sporting and leisure activities according to sexual orientation.
Representation in, and access to, the arts

There also appears to be a lack of research into the relationship between sexual orientation in the arts. Research here might prioritise examination of the level of representation of LGB people in the arts, the way in which they are portrayed and general access to the arts, culture and leisure activities for LGB people and their families.

The effect of separate social spaces for LGB people

Evidence suggests that LGB often need to separate themselves socially from predominantly heterosexual environments in order to create relatively safe, gay-friendly environments. An example is the creation of commercial ‘gay villages’ or specific gay-friendly holiday destinations. Research in this area could investigate the positive and negative impacts arising from the creation of separate gay-friendly LGB social spaces: for example, in relation to the impact on local economies and the expenditure of LGB households.
12 PARTICIPATION AND REPRESENTATION OF LGB PEOPLE

12.1 Overview

According to Stonewall (2007, p. 12), ‘an active involvement in society, by members from diverse and varied backgrounds, makes a significant contribution to the democratic state’. However, research suggests that, although participation in civil society in the form of voting, donating or volunteering may be high (for example, Stonewall Cymru 2007, p. 5) participation levels of LGB people in formal democracy are low relative to heterosexuals, and that as a community they are under-represented. The research links these to expectations or experiences of discrimination. Stonewall (2007) suggests that unequal treatment could lead to an LGB person becoming more involved in gay activism, or alternatively disengaging from politics altogether. Political disengagement may partly explain why so few people at the top of government are LGB or openly so.

Some of the research suggests that policy makers are not doing enough to tackle problems for LGB people around participation and representation. Creegan et al (2007, p. 11) suggest that LGB issues remain the ‘poor relation’ of other equalities issues, such as gender and race. The authors add that within local authorities LGB equality ‘risks being sidelined because it is seen as unrelated to local political priorities and an optional extra in the face of more ‘deprived’ communities’. Cooper et al (2005) claim that moves within local authorities towards cabinet government and the elimination of service committees have impacted negatively on LGB representation. A lack of policy
concern with LGB issues apparently leads to a ‘vicious circle in which lack of understanding, combined with homophobia, exacerbates the problems faced by lesbian, gay and bisexual people by denying them equal access to public services’ (Creegan et al 2007, p. 11).

Despite these issues, there are a number of best practice initiatives which have successfully promoted the interests of LGB people. These have had to overcome a variety of problems, particularly difficulties around identifying and engaging with LGB people. Beyond local communities, work has also been done to reshape trade unions to be more democratic and thus better represent the interests of minority groups like LGB people.

12.2 LGB people’s participation in local communities

Research suggests that many LGB people are not active in political life. As such they may be under-represented. Local authorities and policy makers committed to equality for LGB people may attempt to engage with them to enable them to participate. Indeed, the literature talks about building capacity for LGB people, and provides suggestions for how this can be achieved. Sitting alongside this may be other measures, such as the promotion of the LGB community to other social groups through LGB cultural events and the employment of positive media strategies. However, the research also suggests a number of obstacles to engaging with LGB communities exist. In the first place it may be difficult for local authorities to identify their LGB population, not least because it may be geographically and socially diverse. Local authorities have used a variety of means to locate LGB groups. Once a
LGB population is identified, there may be barriers around communicating with them, some of which may relate to these people’s own suspicions of public bodies. The literature suggests ways these barriers can be overcome.

Two reports which are particularly useful in shedding light on these issues, and in providing best practice guidance to overcome barriers where they exist, are Creegan’s et al (2007) *Sexuality – the new agenda* and the LGBT Hearts and Minds Agenda Group (2008) *Challenging prejudice: changing attitudes towards lesbian, gay, bisexual and transgender people in Scotland*. The former provides local authorities with practical support and case study examples on how to engage with their LGB communities. The latter is the output of the Hearts and Minds Agenda Group, which consisted of LGBT community representatives who were commissioned by the Scottish Executive. It is best practice guidance for policy makers to tackle discrimination in five areas of public life. In the chapter entitled ‘Citizenship and Social Capital’ LGBT Hearts and Minds Agenda Group (2008) proposes a National Community Capacity Building Strategy.

### 12.2.1 Identifying LGB communities

The literature suggests that perhaps one of the key problems making it difficult for public authorities to facilitate greater LGB community participation is in the first place identifying the target group. This may be because of a lack of information: there is a paucity of large-scale surveys which record individuals’ sexual orientation. Local Authorities and other agencies base their impact assessments and action plans on not only local data but also on national
demographic data acquired from the census and other sources. Without this data they cannot develop comprehensive action plans or have comparative data for their own studies. It may also be because in some places the very notion of an LGB community is contested. Barlow (2003, p. 73) reports that ‘many people, including some LGBT people, deny the existence of LGBT communities’. Creegan et al (2007, p. 9) note that ‘in many places, there are no obvious lesbian, gay and bisexual “communities”’. They suggest that this may be because in such places LGB people may be geographically dispersed and therefore isolated from one another; alternatively, they may not publicly express their sexual orientation because of fears of discrimination, and thus remain hidden and unrepresented as LGB people.

Where the LGB community is not easily identifiable, local authorities wishing to engage with LGB people must devise ways to identify them. Some local authorities have conducted mapping exercises of their LGB communities. *Count me in*[^44] was funded by a number of local health and administrative bodies in Brighton and Hove. The study surveyed over a thousand LGB people in the area. A series of community forums and feedback events were then held in order to prioritise the concerns brought up by the findings. The report makes 171 recommendations for service providers and community groups.

Other local authorities have utilised different methods to engage with LGB people and many have worked with Stonewall and become members of its Diversity Champions Programme. Creegan et al (2007) note two examples of
authorities who have engaged with their own employees to access LGB communities. In an anonymous survey of 23,000 employees, Nottinghamshire County Council included optional questions on sexual orientation. This enabled the authority to begin building a profile of the LGB presence amongst its own staff and the broader LGB community. Staffordshire County Council started an LGBT employees group. While this group has focused initially on providing support to its members, the authority hoped that over time it could function as a ‘knowledge base’ to provide strategic input into policies affecting the wider LGBT community.

Local LGB community groups and forums may play an important role in identifying and providing access to LGB people. The LGBT Hearts and Minds Agenda Group (2008, p. 45) suggests that a national engagement with existing LGB networks is necessary to build capacity for the LGB community in Scotland. It concludes that ‘there is a need for more people to take ownership of LGBT issues, and all possible partnerships should be harnessed to the best of possibilities’. It encourages the development of ‘a shared agenda with LGBT people, organisations, allies and other individuals that are explicitly prepared to take on LGBT issues’. Noting that such partnerships exist within all areas of Scotland where LGBT people have developed capacity, the LGBT Hearts and Minds Agenda Group (2008) proposes that the National Community Capacity Building Project identifies them and supports their facilitation and communication where appropriate.
However, some of the literature cautions that, even where LGB groups are successfully engaged with, policy makers should not assume that these are able to represent all LGB people. Wild (cited in Stonewall 2007) notes that in order to act effectively as a minority body of representation, the LGB community has had to mask internal diversities. Creegan et al (2007) argue that the term ‘community’ is misleading, since it implies that LGB people are a homogenous group when they are not. Moreover, Stonewall (2007) warn that, where an LGB community has been identified, it may only represent a minority of visible LGB people who are active in the LGB community. Visible LGB people may be those who are members of LGB groups, yet many LGB people are not involved in these. Barlow (2003) surveyed 225 LGBT people for his mapping exercise of the LGBT community in the London Borough of Newham. To the question of ‘would you be interested in hearing about or joining an LGBT group in Newham?’, 54 per cent responded ‘yes’. Therefore, a sizeable proportion (around half) of Newham’s population either did not know or were not interested in LGBT groups.

An over-reliance on visible LGB people could lead to policy makers unknowingly neglecting the experiences and needs of the majority of LGB people (Stonewall 2007). One such under-represented group may be LGB young people. The LGBT Hearts and Minds Agenda Group (2008, p. 47) notes that ‘the network of LGBT youth groups only covers a third of Scotland’ and that LGB young people as a whole are hard to reach. They therefore propose that the National Community Capacity Building Project should ally itself to existing work for LGBT young people in Scotland.
12.2.2 Communicating with LGB groups

The importance of effective communication in engaging LGB people (once identified) is highlighted in the literature. However, there may be significant barriers to overcome. LGB people may be suspicious of, and unresponsive to, public bodies. Several studies note such feelings. Cooper et al (2005) suggest that local authorities remain institutionally homophobic. Keogh’s et al (2006) study of LGBT people in Lambeth report a traditional mistrust and wariness among some groups such as LGBT older people towards the council. Over half of respondents to the Count Me In survey in Brighton and Hove reported that they felt that the needs of LGBT were not taken into account in the planning of local services.

There is some guidance for breaking down communication barriers. Creegan et al (2007) provide a number of recommendations for building a relationship of trust with LGB communities, including that local authorities should clearly advertise that they want to build relations with the LGB community, that they should have clear terms of reference for meetings and consultations, and should be honest about the benefits to LGB people of involvement. Keogh et al (2006) urge Lambeth Council to ‘consider how it promotes itself to LGBT communities and communicates with them’. For its proposed National Community Capacity Building Programme, the LGBT Hearts and Minds Agenda Group (2008) recommends a national website for LGBT communities and an annual conference for local LGBT organisations.
12.2.3 Building LGB community capacity

In addition to providing guidance on how public bodies can communicate more effectively with LGB groups, the literature also provides some diverse suggestions for how to build LGB community capacity. The two most comprehensive guidance documents for increasing capacity we found were Creegan et al (2007), *Sexuality – the new agenda*, and the LGBT Hearts and Minds Agenda Group (2008) recommendation for a National Community Capacity Building Project.

Creegan’s et al (2007) chapter on community development and involvement provides local authorities with practical steps on how capacity can be built. It notes that to this end local authorities now have a wide range of tools at their disposal. These include Best Value, Community Strategies, Compacts, Local Strategic Partnerships and Neighbourhood Renewal.

The chapter particularly emphasises the role of LGB groups, which we noted above could be used to identify LGB people, in capacity building. One example which it provides of a successful engagement with an LGB group is Devon County Council’s engagement with the Intercom Trust, an LGBT support forum based in Exeter. The two organisations have liaised on a number of initiatives, such as developing an action group against school-based homophobic bullying, and the introduction of civil ceremonies for same-sex couples. As a member of the Council’s Equalities Reference Group, Intercom is paid a fee and has to sign a service level agreement. Through
working with Intercom, the Council can contact LGB groups and individuals, including via the forum’s email list.

Such partnerships may, however, be rare. The chapter in Creegan et al (2007) notes that generally the LGB voluntary sector is insufficiently involved in service delivery. Furthermore it may also be insecure and under-resourced. The chapter reports that ‘research in Birmingham found that, despite each group providing services for 5–15,000 people per year, 87 per cent of LGB groups were entirely voluntary, 81 per cent had less [sic] than 5 volunteers and 45 per cent had an annual income of under £500’ (Creegan et al 2007, p. 67), while Stonewall (2007) suggest that many LGB groups were established by one-off funding and ceased once it ran out. Creegan et al (2007) acknowledges that the issue of public funding is often complex and sensitive, and that it may compromise the independence of funded groups. However, it suggests that they may retain the ability to comment independently on local authority policies and practices if clear lines of communication and terms of reference are established.

The LGBT Hearts and Minds Agenda Group’s (2008) recommendation for a National Community Capacity Building Project appears to provide a holistic strategy for increasing the capacity of the LGBT infrastructure within the country. Specifically, it advocates the use of local development workers to manage the provision of ‘needs-led opportunities such as outreach and detached work, dedicated information and advice services, the formation of groups and the development of other engagement and participation
opportunities such as community volunteering and activism’ (LGBT Hearts and Minds Agenda Group 2008, p. 45). Also, the report provides specific recommendations for how LGBT community members can be empowered. These include establishing a training programme for LGBT groups to meet their basic needs and developing mentoring for group organisers and activists, such as shadowing and short-term placements. The report notes the need to target particularly hard-to-reach sections of the LGBT community (LGBT Hearts and Minds Agenda Group 2008, p. 45).

Both reports call for political leaders to commit to proactive action towards LGB equality. The LGBT Hearts and Minds Agenda Group (2008) advises that it would ‘like to see Scottish ministers and other political leaders being more proud and proactive about their commitment to LGBT equality’. Creegan et al (2007) suggest that ‘corporate leadership is vital to ensure that work on lesbian, gay and bisexual issues is “mainstreamed” into everything the authority does as an employer and service provider’. They add that a variety of ‘corporate levers’ provided by the modernisation agenda can be used by local authorities to effect change for LGB people. These include the Equality Standard for Local Government, Best Value and the Audit Commission’s tailored frameworks for the Comprehensive Performance Assessment; additionally, there is a variety of legislation requiring authorities to commit to equality.
12.2.4 Promoting LGB interests to the wider community

Attempts to increase the capacity of the LGB community may face the barrier of homophobia within many areas of public life. For example, in chapter 10 we note research which suggested that media representations of LGB people are often homophobic. Research also suggests that hostile local media may affect the willingness of local authorities to pursue a pro-equality agenda. From case studies of 12 local authorities based largely on 100 in-depth interviews and 50 follow-up or informal interviews with stakeholders and council employees, Cooper et al. (2005) concludes that the councils were reluctant to commit to LGB equality initiatives partly because of fear of the media. Similarly, Creegan et al. (2007, p. 24) report that ‘hostile local media can play havoc with policy implementation and cause policy attrition and rapid retreat. This is particularly so where children are involved: for example, in education and social services, where entrenched and deeply offensive stereotyping can fester unchallenged if nurtured by ‘homophobic press’. To mitigate this problem, the authors advise local authorities to develop a long-term corporate media strategy to accompany policy development and implementation. They should be positive and open about policy initiatives, whilst at the same time being well-prepared to deal with adverse coverage.

Beyond media strategy, the literature suggests some other ways of encouraging LGB participation in public life, in particular around the promotion of LGB culture. From their study of the needs and experiences of LGBT people in Lambeth, Keogh et al. (2006) urge the council to consider the ‘need to publicly recognise and encourage the substantial contribution that LGBT
people and communities make to the social, economic and cultural capital of the borough’. As part of their strategy for winning the hearts and minds of Scottish people vis-à-vis LGBT people, the LGBT Hearts and Minds Agenda Group (2008) suggests that government funds a programme of LGB cultural events. The authors suggest that ‘one of the most powerful and persuasive mechanisms to win hearts and minds is to provide the opportunity for people to engage with LGBT communities through an “evolving cultural calendar”. Increased visibility and interaction promotes understanding and reduces misconceptions and stereotypes surrounding LGBT communities’ (LGBT Hearts and Minds Agenda Group 2008, p. 46). They note how government funding helped to make one event, LGBT History Month in Scotland, successful.

12.3 LGB people’s participation in politics and trade unions

In the previous section we noted research which suggested that LGB people’s participation in community life may be hampered by homophobia. Specifically, this work related to the effects of a hostile local media. In this section, we discuss research which suggests that LGB people may face similar barriers in trade unions and in applying to become a democratic representative.

12.3.1 Politics

It is suggested that if LGB people are represented proportionately in government then there must be a correspondingly proportionate number of LGB politicians. However, Hunt and Dick (2008, p. 6) note in a Stonewall
report that ‘in early 2008 there are no openly gay or lesbian people in the British cabinet, the Scottish cabinet or the Welsh cabinet. There are only two openly gay peers in the House of Lords out of more than 700 members and only one lesbian MP in the House of Commons.’ This bleak picture may be partly caused by the belief of LGB people that they will be discriminated against in the application process to become a democratic representative. Such a belief was reported by respondents in Hunt and Dick’s (2008) study, an online YouGov survey of 1,658 LGB people. The authors note that ‘nearly nine in ten lesbian and gay people think they would face barriers from the Conservative Party; six in ten think they would face barriers from the Labour Party and nearly half expect to face barriers if they sought selection from the Liberal Democrats’ (Hunt and Dick 2008, p. 6). Respondents perceived similar barriers in the process of becoming a local councillor: ‘nearly two-thirds would expect to face barriers from the Labour Party, nearly nine in ten would expect to face barriers from the Conservative Party, and half would expect to encounter barriers from the Liberal Democrats’ (Hunt and Dick 2008, p. 7).

Other research by Stonewall (Cowan 2007), of the attitudes of British people as a whole towards lesbian and gay people, suggests that many heterosexual people perceive similar barriers. This research canvassed 2,009 British adults, also through a YouGov’s online panel. Respondents identified no political party as gay-friendly: to the question of ‘which political parties do you think are gay-friendly?’, 43 per cent responded that they thought the Liberal Democrats were, 42 per cent for Labour and 26 per cent for the Conservative Party. The report also notes that ‘more than half of the British public thinks that gay people are likely to conceal their sexual orientation in politics’ (Cowan 2007,
The two reports help to explicate the extent to which both LGB and heterosexual people perceive that there are barriers for LGB people wishing to become democratic representatives. However, further research would be valuable to build on Stone wall’s *Serves You Right* report (Hunt and Dick 2008) to illuminate what people perceive the nature of these barriers to be. The scope of the research means that the report does not specify the extent to which respondents felt that the barriers were due to homophobic attitudes, or other causes. It is also not clear how serious respondents perceived the barriers to be, such as whether it was felt that they would make it impossible to become democratic representatives, or merely more difficult.

### 12.3.2 Trade unions

Some research has been conducted on LGB people’s representation in trade unions. Two studies we consulted have explored issues of democracy and representation for LGB people and other minority constituencies in trade unions (Colgan 1999; Colgan and Ledwith 2002). These note that research has increasingly pointed to heterogeneity of trade union membership, and that certain groups, such as LGB people, have called for their interests and concerns to be acknowledged within the unions. Colgan (1999) uses a case study of UNISON, the UK’s largest trade union, to demonstrate the value of developing self-organised structures to improve the representation and participation of LGB people (for an earlier study see Humphrey 2002). Colgan
and Ledwith (2002) focus on the extent to which trade unions have been reshaped to meet demands for gender democracy. They draw on case studies of two unions – the print union GMPU, 17 per cent of whose members are women, and UNISON, three-quarters of whose members are women – to examine these changes and the extent to which they are sufficient. Stonewall Cymru (2007) found that 30 per cent of the LGB people in their survey sample in Wales were members of trades unions, although this was a non-random sample and non-comparative figures for the heterosexual population were given.

12.4 Best practice

Throughout this chapter we have discussed a number of best practice recommendations and initiatives, including Stonewall’s Diversity Champions Programme. Creegan et al (2007) and the LGBT Hearts and Minds Agenda Group (2008), which was discussed at length in section 12.2, provide comprehensive guidance for engaging with, and building capacity for, LGB local communities. The former is a particularly useful resource for existing best practice initiatives run by local authorities. These cover a wide range of areas that local authorities wishing to increase the representation and participation of LGB people may want to consider, including assessing the needs of LGB communities, engaging LGB community forums, raising public awareness of homophobia, media strategies, equalities policies, corporate policy and planning, partnership working, use of feedback and funding LGB groups.
Aside from these resources aimed at policy makers, Stonewall published *Get involved* (Stonewall 2002), a guide for LGBT people to become ‘active citizens’. Its chapter entitled ‘Democratic Participation’ provides detailed information on how to become a political party member, a parish councillor, a local authority councillor, an MP, and a range of other ways related to democratic representation.

12.5 Conclusions and research gaps

Identifying LGB communities

In section 12.2 we noted the difficulties that policy makers face in identifying LGB communities, which may often be dispersed, ill-defined and diverse in the range of LGB people they include. Thus, where policy makers do engage with identified LGB communities, they may be unrepresentative of LGB people in that area as a whole, not least because a high number of LGB people may not be involved in groups. Stonewall (2007, p. 12) call for research ‘to examine the extent to which those who identify as lesbian, gay or bisexual, belong to or interact with a local LGB community, and whether there is any subsequent involvement in public life, via this route’. Furthermore, Stonewall (2007) note that, while some local authorities have conducted mapping exercises of the LGB communities in their area and their needs, others have not, and no national study has yet been done. The authors call for this to be rectified.
Barriers to participation

A fair amount of research suggests that LGB people perceive barriers in various forms of democratic participation. However, we found little research exploring the nature of the perceived barriers. For example, research by Hunt and Dick (2008) indicates that LGB people perceive that they will be discriminated against when applying to be a democratic representative. While this research is useful in indicating that these fears exist in the first place, it does not explain their extent or the causes of them. A qualitative follow-up study could be effective in elucidating these issues. A qualitative approach could also be used to investigate whether the fears are actually justified, perhaps through interviews with LGB people who have become democratic representatives either locally or nationally.

Apart from a lack of research on barriers to becoming a democratic representative, we found little research investigating the barriers for LGB people becoming involved in their local communities other than that suggesting that local authorities are not sufficiently engaging their LGB communities. Related to this, we uncovered no research suggesting why some LGB people become involved in gay activism, while others disengage from politics altogether.

Government and the media

Cooper et al (2005) have provided useful research suggesting that organisational changes to local authorities have made them less concerned with LGB equality issues. However, they, along with Creegan et al (2007),
also mention that homophobia from the media may discourage authorities from pursuing pro-LGB agendas. We could find no research which explored this possibility in detail.
13 DIVERSITY IN THE LGB POPULATION

This chapter explores the issue of diversity within the LGB population. It examines what such diversity means in terms of researching this population and discusses the diversity and difference within the reviewed research literature, although some issues related to these themes are discussed in more detail in other chapters. It also draws together issues specifically related to addressing diversity within the LGB population and the intersection of sexual orientation with other social identities.

13.1 Researching diversity in the LGB population

The literature acknowledged the increasing need to address diversity when researching the LGB population. Stonewall (2007, p. 37) point out that LGB people entertain multiple identities so that they seldom belong only to one social group. Diversity within the LGB population means that LGB people can differ by sexual orientation (that is, orientation to the same-sex or to both sexes), gender, ethnicity, (dis)ability, age, religion or belief and a range of other issues such as class location and immigration status (for example, refugees). Keogh et al (2006, p. 4) state that ‘LGBT people are integral to all social or demographic groups including those based on social class, age, education, faith, ethnicity, migrancy, nationality etc’ and that the needs of LGB people will ‘vary depending on which other social groups they belong to’. At the same time, there is growing recognition that LGB people do not constitute single unified categories and that individuals within this population can be increasingly influenced by ‘hyphenated’ or ‘fractured’ identities (Harding 1986,
As such, the literature suggests that it is important for policy makers and others to acknowledge the diversity that exists within LGB communities if they are to communicate and consult with these communities and if they are to formulate policies that are effective. Yet despite criticisms that equality legislation can sometimes promote the conception of LGB people and other social groups as homogeneous and separate entities, there has been relatively little discussion of what the exploration of diversity across the LGB population means in terms of research strategies and policy development.

### 13.1.1 Identifying diversity within the LGB population

As alluded to in chapter 2 (section 2.2) one key issue is when it is appropriate to refer to LGB people as a whole and when this can lead to neglect of diversity and difference of experiences within the LGB population (these issues are also addressed in chapter 14). A number of questions seem to arise from this issue. Firstly, when is it appropriate for data to be collected and analysed on LGB people as a group or on lesbian, gay and bisexual people separately? This question includes further considerations such as when it is appropriate to talk about ‘LGB’ (or, indeed, LGBT) people as a group or when data should be broken down by sexual orientations (for example, identifying the experiences of bisexual people separately) or by gender (for example, identifying the experiences of lesbians separately)? Secondly, when is it appropriate to analyse data according to the experiences of various subsections of the LGB population (for example, BME LGB people, LGB disabled people, LGB older people) and when should research be conducted
on specific subsections of the LGB population (for example, specific research on LGB young people or LGB South Asian people)?

Notably, some areas of research relating to sexual orientation and LGB people in general still remain under-researched (for example, statistical patterns of inequalities and discrimination experienced by LGB people), and in these circumstances research on the LGB population as a whole may be appropriate as a specific priority. In chapter 2 we identified the way in which concepts such as a ‘community of interest’ (Stonewall Cymru 2004) or an LGB ‘gay community’ (Morrison and Mackay 2000) could act as important indicator of inequalities and discrimination associated with sexual orientation and as the foundation for learning, empowerment and change. In other circumstances, however, a focus on the LGB population as a whole can mask important differences of experiences across the population (Wild, cited in Stonewall 2007), for example, in relation to gender, ethnicity, age.

Creegan et al (2007) argue that the term ‘community’ can be misleading, since it implies that LGB people are a homogenous group when they are not. The chapter on participation and representation (chapter 12) notes that researchers and policy makers should not assume that they had represented all LGB people even where some LGB people had been successfully engaged. For example, Stonewall (2007) warn that where an LGB community has been identified it may only represent a minority of visible LGB people who are active in the community or on the LGB scene. In this context, reflecting diversity and difference in the design, conduct and analysis of research
becomes even more important; and disaggregation of general findings, specific research on subsections of the LGB community and/or research on the experiences of individual’s whose identities and experiences intersect with sexual orientation will be an important priority. Inclusiveness in research is something that researchers and funders need to actively incorporate into all stages of research design (McManus 2003, p. 9). It will also require specific, targeted research to address where there are major omissions related to diversity in the research data.

Strategies for identifying and researching diversity and difference in the LGB population are discussed in greater detail in chapter 13. However, it is worth stressing that a range of strategies were identified that promoted diversity and inclusiveness in research. Some researchers have argued that incorporating diversity involves ‘attending to the specificity of that need… considered in relation to the broader social factors in an individual’s life’ (Keogh et al, 2006, pp. 4–5). Yet, while this individual approach might be the ideal, it still requires recruitment and sampling strategies that guarantee access to a diverse population in the first place. In chapter 15 we note that gaining access to the LGB population is hampered in that there is no comprehensive official list that records a person’s sexual orientation or that includes all people who are LGB within specific national or local contexts. Given that a person’s sexual orientation is not immediately apparent, and the sensitivities around asking about it, this makes such sampling and recruitment difficulties all the more problematic (McManus 2003, p. 25; Harrison 1996). This is a problem that is particularly compounded for particular subsamples of the LGB population.
such as LGB people from BME communities, LGB people of faith, LGB disabled people and LGB older people.

Researchers had, however, begun to develop recruitment, sampling and fieldwork strategies that promoted greater inclusion and diversity in conduct, analysis and reporting of research. Recruitment via specific social events, use of outreach workers, snowballing and via the Internet were all found to be useful strategies to include greater diversity within a sample or to target specific subsections of the LGB population, where they were managed carefully to avoid the pitfalls of such methods (see section 15.2). Additionally, greater use of participatory approaches to research and matched interviewers to the subgroup being researched might also provide fruitful approaches to promote greater diversity (see sections 15.3 and 15.4). Nonetheless, some subsections of the LGB population still remain under-researched.

Researchers will therefore need to consider when it is appropriate to prioritise research on specific subsections of the population and to develop specific strategies necessary to identify and include those groups. Another consideration might be how to more effectively mainstream difference and diversity in the way that research questions are asked and findings are reported. Once again, these issues are addressed in more detail in chapter 14.
13.1.2 An integrated approach to researching inequality?

Another key issue arose in terms of whether LGB issues should be researched as a separate issue at all, or whether sexual orientation should be, to some extent, mainstreamed into a broader equality agenda and research. In some cases such arguments reflected the view that government institutions had a duty to promote equality for all, as defined, for example, for the Welsh assembly in the Government of Wales Acts (1998) and (2006) (Chaney and Fevre 2002; Parken and Young 2007). In others such arguments tended to reflect a broader criticism of identity politics that arguably promote understanding of inequality and discrimination in relation to separate and distinct social groups (for example, solely in terms of sexual orientation, disability, ethnicity) rather than examining what groups have in common (for example, Humphrey 2002). An alternative approach might, for example, involve conducting research on income or educational attainment and ensuring that the way in which these issues are experienced from different social groups and across different sexual orientations are explored in a non-competitive way.

Given the recent acknowledgement of sexual orientation as a ‘strand’ in equalities legislation these issues were not widely explored but some authors had begun to look at how diversity and the intersection of sexual orientation with other social identities and experiences might be more successfully included in a broader equality agenda. For example, in the context of the allocation of public monies by local authorities to social groups, Keogh et al (2006) argue that councils should pursue an integrated equalities agenda.
This is one which acknowledges how different equality groups overlap and which seeks to emphasise LGBT issues in all equality agendas (for example, needs of lesbians, bisexuals and transgender women in exploring the agenda for women). They argue that this should be done in preference to establishing and pursing the needs of amorphous and separate communities such as ‘LGBT’ communities or ‘faith’ communities, thereby avoiding hierarchies of oppression as different ‘groups’ set against one another. Humphrey (2002) also refers to practices within UNISON, the UK’s public sector trade union, that promote greater collaboration between different self-organised groups (for example, disability groups co-existing and collaborating with groups for minority ethnic groups and LGB groups) so that the differences in each group are harnessed in order to facilitate greater joined-up working.

Other researchers were more sceptical about integrating research on sexual orientation within a broader equalities agenda at this stage. For example, given the Welsh assembly’s ‘equality duty’ the Multistrand Project considered how to promote equality and human rights for ‘all strands’ in a non-competitive way, and to find routes to intersectionality. A key finding of the project was that lack of data on LGBs within Equality Impact Assessments lead to truncated enquiry into LGB equality, with no data often being equated with no problems (Parken and Young 2007). Similarly, in terms of representation and participation, Creegan et al (2007) observe that LGB issues remain the ‘poor relation’ in respect of other equalities issues, such as gender and race. The authors add that, within the context of the work of local authorities, LGB equality ‘risks being sidelined because it is seen as unrelated to local political priorities and an optional extra in the face of more ‘deprived’ communities’
(Creegan et al 2007, p. 11). Colgan et al (2006) also found that, with regard to the different identities and forms of discrimination that individuals can experience, there was a perception amongst respondents (largely from local authorities and schools) that a hierarchy of discrimination existed in which sexual orientation was marginalised in comparison to other forms of discrimination. The findings of Aspinall and Mitton (2008), which indicate that there is a lack of sexual orientation monitoring relative to most other forms of equality monitoring in the UK, serve to accentuate this point. Other researchers and commentators have suggested that they would like to see government ministers and political leaders be proud and proactive about their commitment to LGBT equality before such issues are integrated into a broader equality agenda (LGBT Hearts and Minds Agenda Group 2008).

13.2 Diversity and difference in the research literature

13.2.1 Overview

The extent to which the LGB population were treated as an aggregate group or discussed in terms of various differences tended to depend on a number of factors. These were: the purpose of the research; the quality of the research design; the volume and breadth of research in a particular substantive area; and the nature of the methods used (for example, quantitative or qualitative).

Purpose of the research

When researching attitudes to LGB people, for example, attitudes were rarely broken down for lesbians, gay men and bisexuals; rather, LGB people tended
to be treated as a group, although in practice researchers often only referred to lesbians and gay men. However, if the purpose was to explore the experience of hate crime or health then statistical patterns were often broken down for particular groups. Similarly, where the experiences of the LGB population were discussed in qualitative research in relation to employment, these were also often broken down by factors such as gender, ethnicity and/or disability (for example, Colgan et al 2006).

**Quality of the research design**

Some researchers simply talked about LGB or lesbian, gay or bisexual (although usually lesbian or gay) people as a whole without ever breaking down experiences in terms of difference or diversity. In some cases this was because of poor sampling strategies so that there was not sufficient diversity within the sample to talk about. However, in other cases considerable efforts were made to include diversity within the conduct and reporting of the research. Examples of good practice in this respect in relation to both quantitative and qualitative research are discussed in chapter 14, section 14.2.

**Volume and breadth of the research in a substantive area**

In some areas such as health and housing a large body of research had developed that enabled researchers to explore a range of different experiences among subsections of the LGB population. Researchers could target their focus where it was clear that certain groups were under-represented or there were specific needs, although there were still gaps.
Nature of the methods used

Exploration of difference and diversity was not dependent on method but could be influenced by the nature of the method used. For example, larger surveys could achieve samples that facilitated exploration of differences in a meaningful way (for example, large lesbian and bisexual women’s health surveys such as that conducted by Hunt and Fish 2008, or the Gay British Crime Survey, Dick 2008). Qualitative studies could explore the specific experiences of subsections of the LGB community (for example, LGB young homeless people).

The following sections will explore what the reviewed literature has to say on the way in which sexual orientation interacts with other identity issues.

13.2.2 Bisexuality

Discussion of specific inequalities and discrimination faced by bisexual people was very limited. Despite extensive discussion of the importance of recognising women and men who do not necessarily identify as lesbian or gay (see chapter 2, section 2.2), discussion of the experiences of bisexual people tended to be limited to the size of the bisexual population, the context of sexual and mental health, and to some case examples within better-designed qualitative research. Survey research often treated LGB people as its target population but in reality focused almost exclusively on the experiences of gay men and lesbians, or failed to discuss whether bisexual people experienced inequality, discrimination or social exclusion differently. The experiences of
bisexual people and the issues, inequalities and discrimination that they face are areas of research still requiring specific attention.

**Health issues**

In the health research there was evidence that bisexual people were less likely to disclose their sexual orientation to their GP or a mental health practitioner (Meckler et al 2006). They reported poorer mental health than either heterosexual or lesbian and gay men peers and appeared to be at greater risk of anxiety, depression or suicidal thoughts (Dobinson et al 2003). Bisexual men were as likely as gay men to use alcohol and some drugs (for example, poppers, gamma hydroxybutyrate (GHB) but more likely to have used all other drugs (Weatherburn et al 2000). Bisexual men were also less likely than gay males to be educated about STIs, more likely to have trouble obtaining condoms, and were more likely to practise unsafe sex with a greater number of men (Devlin et al 2003). There was also a common misconception that many women who identified as lesbians had no experience of sex with men that placed them at risk of cervical cancer and STIs. Yet research did not bear this out (Bailey et al 2003). Further discussion of these issues can be found in chapter 6.

13.2.3 Gender

Differences between the experiences of lesbians and gay men were discussed in relation to families and relationships, same-sex violence, sport, income, hate crime, media representation and health and social care, although particularly in relation to the last. In addition to a number of
experiences and inequalities felt differently by lesbians and gay men, there was also a body of work which showed how patterns of families and relationships among lesbians and gay men questioned assumptions about traditional patterns of gender in relation to parenting, sexual and domestic violence and heterosexual femininity and masculinity. With the exception of health and parenting, there was usually much more literature on gay men than lesbians.

**Gendered assumptions and their implications**

In some instances gender arose as an issue in research because of the traditional assumptions about the roles of men and women in heterosexual patterns of family life or in terms of the assumptions about the power relationships between men and women. For example, in relation to parenting lesbians received greater attention than gay men partly because they were more likely to have responsibility for children within their households and partly because of traditional gendered expectations about motherhood and childcare (see also chapter 4). A number of issues tended to have a greater impact on lesbians than gay men such as assisted conception and birth registration. However, there was also a body of research that addressed attitudes towards parenting in lesbian- and gay-headed households (for example, will they be appropriate gender role models) and how such households and relationships create different parenting and gendered dynamics (for example, Dunne 1998; Haimes and Weiner 2000; Wright 1998). The body of work on gay fathers was smaller but also addressed how family relationships and parenting dynamics might be different compared to heterosexual- or female-headed families and households (for example, Barrett
and Tasker 2001; Dunne 2005). For example, the research found that gay
fathers tended to be more communicative with their children than
heterosexual fathers, yet they felt more isolated as parents that their female
equivalents.

Another issue that was affected by traditional assumptions was same-sex
violence. The traditional association of women as the victims of rape meant
that male rape was virtually neglected as an issue (see chapter 9). Similarly,
the association of domestic violence with heterosexual men, and the
assumption of greater power equality in same-sex relationships, meant that
domestic violence was a relatively neglected area of research until recently.
Resources for the victims of domestic violence were largely channelled
towards heterosexual women (Stonewall 2007). Research conducted on
same-sex domestic violence indicated that patterns of such violence differ by
gender. For example, Donovan et al (2006) found that, although patterns of
domestic abuse varied between men and women, they did less so on the
basis of sexual orientation: male perpetrators of all sexual orientations tended
to be physically and sexually abusive, whilst female perpetrators of all sexual
orientations tended to be emotionally abusive.

Other issues where gender was seen to play an important role in social
exclusion and in reinforcing heterosexism were in the reinforcement of
heterosexual femininity and masculinity through sport and bullying in schools.
For example, Caudwell’s (2007) ethnographic study of a lesbian football team
discovered a complex picture of both compliance and resistance to
heterosexual norms of behaviour, noting that despite challenges to hetero-
normativity there was evidence of normative practices that devalued femininity
and, at times, denied some players access to positions on the field of play
(see chapter 11, section 11.2). Warwick et al (2004) also address the link
between gender, sexual orientation and bullying in schools, reporting that
physically active girls were particularly likely to have their heterosexuality
questioned due to the traditional link between masculinity and sport. The
result was that the activity and behaviour of girls could be restricted and
controlled for fear of being called a lesbian. Phoenix et al (2003) also address
the complex interplay between sexual orientation, gender and ethnicity in
relation to homophobic behaviour among boys in schools. They observe that
some boys from Black and minority ethnic communities pursued hyper-
masculine identities, including the overt display of violence and/or sexual
prowess in order to show that they were not gay.

**Health and health services**

Health and access to health services were by far the areas where the greatest
discussion of the intersection of sexual orientation and gender occurred. This
was especially the case in relation to sexual health. The focus on HIV/AIDS
and STIs among gay and bisexual men meant that the sexual health needs of
lesbians and bisexual women had been relatively neglected (Creegan et al
2007, p. 59; Henderson et al 2002). Despite the fact that lesbians and
bisexual women were often considered to have the best sexual health of all
social groups, research shows that they do in fact have their own set of sexual
health issues. More recently surveys of lesbian and bisexual women’s health
show that they face a range of health issues, including but not exclusively
sexual health issues (for example, Fish and Anthony 2005; Hunt and Fish 2008). Research shows that lesbians face particular problems compared to gay men and their heterosexual female counterparts: for example, alcoholism may be a particular issue for lesbians (Greenwood et al 2001; Malley 2001; Ziyadeh et al 2007). Further issues of lesbian and bisexual women’s health are discussed in chapter 7.

Although there was a significant body of health research on lesbians and bisexual women, this was not matched by levels of services targeted to meet their needs (Campbell 1997). The importance of such services is underlined by the difficulties experienced by some lesbians when coming out to their GP and the experiences of prejudicial treatment from healthcare professionals. Beyond Barriers (2002), for example, points to differences between lesbians and gay men in terms of health information. The report argues that, on the whole, gay men are much better served with health information and information about services than lesbian, bisexual and transgender individuals. In this context, some researchers argue that there should be health services specifically geared towards the needs of lesbians and bisexual women. For example, Carr et al (1999) evaluated a pilot scheme in Glasgow for a family planning lesbian health service, the only one of its kind in the UK at the time, and report that ‘client satisfaction was high’. However, a study by the RCM (Kaufman 2000) concludes that appropriate maternity care for lesbian clients requires, in effect, nothing more than a woman-centred approach and, as such, the skills required to help lesbian mothers will benefit all women.
Employment and income

Apart from health, further differences between lesbians and gay men based on gender can be seen in the literature on employment and income (see also Miles 2008). Blandford’s (2003) analysis of the 1989–96 General Social Survey data indicates that both gender and sexual orientation had a bearing on earnings. The analysis reveals that, whilst gay men had a 30–32 per cent income disadvantage when compared to heterosexual peers, lesbians and bisexual women actually enjoyed an earnings advantage of 17–23 per cent. Another recent study of the incomes of same-sex cohabiting couples using Census data in the UK found gay men in this type of household earned 1 per cent less than men living in equivalent heterosexual couples; but lesbian couples earned 35 per cent more than women in heterosexual couples (Arabsheibani et al 2006). These findings resonate with Dunne’s (1998) assertion that research on gender inequality in employment often has a heterosexual bias built into it – a bias that obscures non-heterosexual experiences in relation to employment.

Hate crime

There was relatively limited discussed of differences in the experience of hate crime compared to the other areas discussed above. Nonetheless, interesting differences in the patterns of hate crime experienced by gay men and lesbians did emerge. Dick (2008, p. 7) found that gay men were over two and a half times more likely to be the victim of a hate incident involving a physical assault than lesbians, which reiterated previous research findings (Beyond Barriers 2002; Stonewall Cymru 2003; Williams and Robinson 2004).
However, when lesbians experienced hate crime, the perpetrator was more likely to be someone they knew, either someone living locally or a work colleague (Dick 2008, p. 6).

**Media representation**

Discussion of gender and media representation was limited but one study did find, that of 168 hours of programming, gay people were represented for only 38 minutes; for six minutes positively and 32 minutes negatively. Of this coverage, lesbians were hardly represented at all (Cowan and Valentine 2006).

13.2.4 Ethnicity

There was a small literature on the intersection of ethnicity and sexual orientation in terms of inequalities, discrimination and social exclusion. This was mainly in the areas of employment, health and homophobic hate crime and abuse, although the findings were usually adjuncts to larger general studies. There were only a few studies specifically on the experiences of LGB people from BME communities. These usually focused on health and different cultural and family dynamics in relation attitudes to sexual orientation. In addition to the substantive themes above, specific issues also arose in terms of: feelings of alienation from the LGB community; dissonance from the BME person’s own community; or contradictory experiences of support or helplessness in the context of racism from the wider community. Studies tend to focus on the experiences of LGB people from the Black-Caribbean or African, South Asian and Irish communities, to the exclusion of the
experiences of other communities such as the Chinese, Arab or Eastern European communities.

**Generalisability**

The intersection between ethnicity and lesbian, gay and bisexual identities has been explored by a number of studies. However, some studies argue that the complexity of the interaction between sexual orientation and ethnicity makes generalisations difficult: for example, Sigma Research 2004 (cited in Stonewall 2007) explores the experiences of minority ethnic gay men through the use of case studies. The report focuses on two minority ethnic groups: Black Caribbean gay men and Irish gay men. In examining the experiences of both groups, one of the key conclusions reached was that being gay and belonging to a minority ethnic group did not necessarily lead to a situation of ‘double exclusion’. Although there is a similarity between both groups with regards to the social institutions (for example, the church) and the attitudes towards homosexuality that they were raised with, the meanings attached to such institutions and the functions they served were extremely diverse. In a similar vein, Keogh et al (2006) also argue that the complexities surrounding the interplay between sexual orientation, gender and ethnic minority membership make it difficult to generalise about experiences of LGBT individuals who belong to minority ethnic groups.

Other researchers, however, discuss similarities of experiences among LGB people from different minority ethnic groups. Some studies indicate a dissonance between cultural identity and sexual orientation so that LGB people from such groups experience feelings of being torn between identities,
depression and helplessness: for example, Bhugra (1997) notes that a degree of dissonance existed between cultural and sexual orientation among the 52 South Asian gay men that were surveyed. Yip (2003b) also found such feelings of dissonance interacting with religion among his sample of LGB Muslims who were mainly of South Asian cultural background (see also below). At the same time, Keogh’s et al (2006) review of the literature reveal that Black and Asian LGB people often felt alienated by many LGBT organisations (although specific reasons were not given). In this respect, while these early pieces of research are vitally important, the themes of dissonance and alienation would appear to require further research and further development.

In spite of the difficulties faced by those LGB BME people, Keogh et al (2006) argue that there are structures within such communities that enable LGB people from them to thrive (see also Keogh et al 2004). However, evidence in this respect varied for different minority ethnic groups and was sometimes contradictory. For example, Greene 1997 (cited in Fish 2007) notes that some LGB people from BME groups are able to sustain relationships with their family and community of origin that provides vital support against racism in the wider society. Some research suggests that LGB people from BME groups are less likely to have considered suicide than their White counterparts, partly because of strong cultural taboos against it. However, the complex interplay between gender, ethnicity and sexual orientation is again revealed. Marshall and Yazdani 2000 (cited in Fish 2007a) found that British-born South Asian young women were more likely to attempt suicide or self-harm than both white
and Afro-Caribbean peers. It seems therefore that great caution should be taken in generalising about LGB people from BME groups.

**Employment**

We found no studies specifically addressing the employment experiences of LGB people from BME communities. However, Colgan’s et al (2006) case study of the employment experiences of LGB people did include LGB people from BME communities. In particular, they found that BME participants reported a range of employment experiences including: ‘juggling multiple identities; seeking work away from family areas and businesses; and the importance of racism and homophobia being challenged by both LGB and BME communities’. A common theme across the experiences of LGB people from BME communities was that, as their LGB sexual orientation was less visible than other aspects of their identity, one way to manage multiple discriminations was not to be out about their sexual orientation at work (see also chapter 6, section 6.2).

**Health**

A number of studies related to the health experiences of LGB people from BME communities, although they tended to focus mainly on the experiences of Black-Caribbean men, with some also drawing on research from the USA. While the access of BME LGB people generally was under-researched, that on BME lesbian and bisexual women was especially minimal. Cahill et al (2003) suggest that access to sexual health services for LGB people from BME communities may differ from the access of BME heterosexuals and white LGB people. There were few studies on testing and
HIV prevalence among BME gay and bisexual men. However, Fish (2007k), writing about those that do exist, notes that ‘UK researchers suggest that there is no evidence that sex between men is either less or more common among any minority ethnic group compared with the ethnic majority…

[However] compared with white gay men, African-Caribbean men in the UK were twice as likely to be living with diagnosed HIV infection, while South Asian men were less likely to be doing so. Despite this increased risk, African-Caribbean men were less likely to use outpatient services’. A review of the relevant literature on health and social inequality by Keogh et al (2006) also concludes that evidence indicated that Black-Caribbean men were more likely to test positive for HIV and to experience sexual health morbidity in terms of clinical symptoms. These issues are compounded by the finding from one of the studies reviewed by Keogh et al (2006) that Black Caribbean men have difficulty expressing their sexual health needs (Fenton et al. 1999). Keogh et al (2006) also found that, although very little research has been done on Black-Caribbean lesbians and bisexual women, these groups may have a higher rate of obesity and smoking than other ethnic groups.

The relationship between minority ethnic group status and sexual orientation has also been discussed in relation to mental health. Some researchers have begun to make links between the ‘double jeopardy’ that BME LGB people face and mental health because of the pressures they face from homophobia and racism (see chapter 6). According to research discussed by Fish (2007a), BME LGB people are more likely to be affected by homophobic violence, abuse or harassment, all of which are associated with poor mental health (see below and chapter 10, section 10.2). As discussed above, BME LGB people
also face a particular set of issues around suicide, parasuicide and self-harm, particularly for South Asian young women.

**Homophobic crime and abuse**

The literature also suggests that Black and Asian LGB people may suffer from higher rates of homophobic crime and abuse, including such crimes within their own communities. In the recent Gay British Crime Survey conducted by Stonewall, Dick (2008, p. 5) discovered that ‘8 per cent of all black and minority ethnic lesbian and gay people have experienced a physical assault as a homophobic hate incident, compared to 4 per cent of all lesbian and gay people’.

Keogh et al (2006), drawing on a study by GALOP (2001) involving the completion of 145 questionnaires, found that 57 per cent of Black and Asian young people had suffered from abuse of a physical nature, compared to 47 per cent of respondents as a whole. Likewise, 45 per cent of Black respondents had suffered from some form of homophobic violence compared to 32 per cent overall. However, while the GALOP (2001) report usefully broke down responses by ethnicity, it failed to make clear whether abuse originated predominantly from within or outside the respondent’s community. In presenting the above findings, there was also very little exploration in the literature with regards to why Black and Asian LGB people are more likely to suffer from homophobic crime and abuse.
13.2.5 Disability

Most discussion of LGB people with a disability was in the context of access to health and social care, particularly social care, although there was also some limited discussion of employment. The majority of research reviewed focused on people with learning difficulties, although there was some other work on access more broadly. Important themes to emerge were: the double exclusion that LGB people with disabilities felt from the LGB and disabled communities; vulnerability in the context of care; and their desexualisation as LGB people. The intersection of disability with sexual orientation appears to be one of the most under-researched areas in the literature in need of much greater attention, though there are some examples of research on LGB people’s experiences of service provision – see, for example, the Rainbow Ripples Report (Rainbow Ripples and Butler 2006).

Double exclusion

A theme that emerged in a number of contexts was the double exclusion that LGB with disabilities experienced. For example, a report by the Disability Rights Commission (cited in Stonewall 2007) concludes that LGB disabled people encountered discrimination on two fronts: from heterosexual people and from within the gay community itself. This conclusion resonates in the findings of other reports that indicate that disabled lesbian, gay and bisexual people are not only discriminated by council services, who do not take into account their sexual orientation and who often exclude them from consultations, but also by lesbian, gay and bisexual services who do not take account of their disabilities (Creegan et al 2007). Similar experiences have
also been reported in the context of employment. For example, disabled
participants reported experiences of ‘isolation and exclusion from both LGB
and disabled communities and of having to make decisions about whether to
come out about both sexuality and disability’ (Colgan et al 2006, p. 10). As
with BME LGBs, a theme that emerged was that, as their LGB sexual
orientation was less visible than other aspects of their identity, one way to
manage multiple discriminations was not to be out about their sexual
orientation at work.

**Vulnerability and support**

Another issue for LGB people with a disability was their vulnerability in a
context where they might be less able to establish social networks that
support and affirm their sexual orientation and where they may be more reliant
on carers who could be homophobic. Chapter 6 notes that the access of LGB
disabled people to support networks may be severely limited since disability
often involves a reduction in networking opportunities (Fish 2007m).

Another important factor was the disabled person’s relationship to their carer.
LGB people receiving care from a carer in their home or residential setting will
have a very different relationship to providers, for example, where care and
health needs can be met by a GP or by an outpatient service. According to
Fish (2007m), ‘many disabled LGB people pass as heterosexual and do not
come out to professionals because they fear being refused services or treated
in a derogatory manner’. They may also face the unique challenge of a
‘double coming out’, as both disabled and LGB (Davidson-Paine and Corbett
1995).
However, these issues are not the same for all LGB disabled people. Abbott and Howarth (2005), for example, found that LGB people with learning disabilities were more likely to disclose their orientation to a member of staff with whom they felt confident than a member of their family, while the opposite was true for LGB non-disabled people. To explain this, Fish (2007m) speculates that, ‘because LGB people with learning difficulties often live at home with their family and rely on them for financial or practical support, they may be more likely to fear rejection from their family than other LGB people’. Creegan et al (2007, p. 56) also notes that disabled lesbian, gay and bisexual people can face discrimination ‘in respect of safety and bullying, choosing how to live in the way that they want (independent living)…’.

**Desexualisation**

Brothers (2003) argues that health and social care services often make little effort to take account of the life experiences of LGB people with a disability. In particular, it may be assumed that disabled people are not sexually active, that they have no sexual interest or are heterosexual. They may not have received relevant sex education in schools, partly because many would have attended special schools which may not have used the mainstream PSHE curriculum. As adults, they may lack appropriate information about sexual health, particularly LGB sexual health, and may not have access to information about fertility issues. In this respect they are desexualised.

Much of the literature on the desexualisation of disabled people refers to those with learning difficulties. For example, Creegan et al (2007) argues that the rights of LGB people that have learning disabilities are often overlooked under the presumption that such individuals are not, or do not wish to be,
sexually active. Other studies have explored the experiences of people with learning difficulties who had or wanted same-sex relationships (Abbot and Howarth 2005) and ways to empower people with learning difficulties to engage with sexual orientation and safer sex messages (for example, through the use of gay outreach workers) (Valios 2002; Cambridge 1996).

**Best practice in relation to disability**

In terms of best practice, Creegan et al (2007) outline a number of good practice points that local authorities can adopt to address issues faced by LGB people with disabilities. These include:

- better collaboration between disabled organisations and local authorities so that councils can benefit from the expertise within these organisations;
- ensuring consultations between local authorities and local LGB populations are in accessible venues;
- local authorities ensuring that the information available to LGB people is accessible to those with disabilities (for example, providing information on audio tape and large print);
- local authorities encouraging LGB individuals to become active in disability issues in the area;
- ensuring that local authority staff are kept abreast of legislation concerning the rights of disabled people;
- the provision of a ‘consumer guide’ for LGB disabled people which details services available in the local area.
13.2.6 Age – young people

Age was relatively well discussed across the substantive areas. We know nothing about the age profile of the LGB population but age was explored in relation to attitudes (both among and towards the LGB population), families and relationships, education (although mainly in that it affected children and young people at school), health and social care, housing, hate crime (both as perpetrators and victims) and media. It was less well explored in employment or in terms of the methodological issues raised by researching older or younger people. Young people were especially discussed in terms of education, health and social care, housing (especially homelessness) and hate crime.

Feeling different and the need for affirming support

Research on LGB young people focused particularly on the difficulties they may have in gaining support that is affirming of their sexual orientation in the period between childhood and the time before they are able to live independently as adults. For example, Keogh et al (2006) argue that the needs of LGBT people may be heightened at certain critical stages in their life, with one such stage being the transition from childhood to adulthood. At this time young people who begin to identify as LGB may need additional support to come to terms with their identity or support that is affirming of their sexual orientation.

Fish (2007d) observes that the age at which LGB young can become aware of their sexual orientation – often by age 11 or 12 until around age 15 or 16 –
can be period of isolation during which they may be afraid to come out to
friends and family. Where young people disclose their sexual orientation it is
sometimes dismissed by adults. The result is that some LGB young people
may experience emotional distance from their family and have less peer
support than their heterosexual equivalents (Keogh et al 2006). In their study
exploring retrospective accounts of LGB identity formation during adolescent
years Flowers and Buston (2001) found that compulsory heterosexuality
formed the key context through which identity formation and reported stress
could be understood. Their study found accounts of identity formation riddled
with the themes of: being ‘defined by difference’; ‘self reflection and inner
conflict’; ‘alienation and isolation’; ‘living a lie’; ‘telling others’; and ‘wholeness
and integrity’.

Creegan et al (2007) outline a number of issues that LGB young people may
experienced at home, school and in the community. These include: violence
and verbal abuse; increased vulnerability to mental health problems due to
homophobic attitudes; a limited space to socialise in (particularly where they
are too young to access the ‘gay scene’ of pubs and clubs); a lack of
adequate sex and relationship education for young people in care; additional
discrimination based on their sexual orientation faced by young people when
they leave care; and the fear of ‘coming out’ to service providers due to
anxieties about discrimination. Creegan et al (2007, p. 58) also draw on the
work of O’Connor and Molloy (2001) to argue that sexual orientation can play
a complex role in the creation of youth homelessness (see chapter 8, section
8.3).
**Lack of support and the impact on health**

In addition to evidence on homophobic bullying (see section 5.2) the literature also shows that LGB young people feel a lack of support in school and from health professionals in a way that can have negative impacts on their lifestyles and on their mental health: for example, the Space Project (2002) found that LGB young people reported feelings of isolation, a lack of support and a need for more information about LGB lifestyles. Concomitant to these feelings was a need for schools and services to address these issues and a request for wider awareness and acceptance of their sexual orientation. However, there was abundant evidence that schools to date have rarely been good at challenging homophobic bullying or addressing the needs of LGB young people (see chapter 4, section 4.3). Younger LGB people may also be especially unlikely to come out to health and social care providers. Allen et al (1998) found that as few as 13 per cent LGB young people had disclosed their orientation to their healthcare provider. The result is that LGB younger people may be particularly at risk of mental health problems compared to their heterosexual peers, with this being associated with feelings of a lack of support as complements or alternatives to family and friends at a time when the young people are trying to define their sexual orientation (Fish 2007j).

The literature on LGB young people also explores other challenges that LGB young people experience as they grow up: for example, Rivers and Carragher (2003) focus on the socio-developmental factors that affect the positive development of a lesbian and gay identity. The authors review the effectiveness of different types of behaviours that young people engage in so
avoid harassment and discrimination. The vulnerability of LGB young people was acknowledged by the authors, who focus on the risk-taking behaviours that some LGB young people take part in because of the pressures discussed above. Such behaviours are seen by the authors to be associated not only with sexual orientation but also with fears for personal safety.

Research indicates that LGB young people are at greater risk of drug use, attempted suicide and suicide than their heterosexual peers. For example, Fish (2007a) reports that, compared with heterosexual young people, LGB young people were three times more likely to use MDMA/ecstasy, eight times more likely to use ketamine and 26 times more likely to use crystal methamphetamine. Greco and Glusman (1998) also report that LGB young people’s suicide rates are two to three times higher than heterosexual peers, accounting for 30 per cent of completed adolescent suicides. While caution must be exercised in referring only to LGB young people on the scene, a rate of attempted suicides of 25.5 per cent is reported by Stonewall’s (2003) survey of 98 LGB young people recruited in Edinburgh gay pubs and clubs; 54.1 per cent of the same sample reported seriously considering suicide at some point in their life (see also chapter 6). This suggests that LGB young people may be particularly at risk of poor health especially where their only support system is through access to gay pubs and clubs.
13.2.7 Age – older people

Older people were viewed particularly in terms of household and relationship patterns, health and social care and housing. There was evidence that LGB older people feared growing older in a context where they may lose their independence and have to rely on services that might be heterocentric and homophobic, and of strong and supportive networks among LGB people. There were also concerns about ageism in the LGB scene and community.

Alienation and isolation from the scene

LGB older people may experience alienation and isolation from the LGB scene due to ageism. Stonewall Cymru (2003) observe that LGB older people tend to be less involved in the LGB gay scene or community activities in general, and that this social exclusion can have a detrimental impact on health and social well-being. The authors attribute the social exclusion of LGB older people within the LGB scene to the fear that LGB younger people have of getting older and the ageism that results.

Support and security in old age

Heaphy et al (2003, p. 4) observe that ‘openly ageing as a lesbian, gay man or bisexual is a new phenomenon’ that ‘raises new dilemmas for non-heterosexuals themselves, and for policy makers’. In this sense dilemmas were particularly linked to the assumed absence of care and support from family members (especially children), and/or appropriate care from the wider community or society, or from partners. Age Concern (2002, p. 21) suggest that ageing can be significantly different for LGB older people because they have ‘significantly diminished support networks when compared to the general
older population’. This was because they were more likely to live alone, less likely to have children, and more likely to age as a single person (Age Concern 2002, p. 21). In their survey of older (50 plus) LGB people, Heaphy et al (2003, pp. 9–10) found that a ‘particularly high proportion’ (65 per cent) of their older (50 plus) gay and bisexual male survey participants lived alone, with this living arrangement being more common among gay and bisexual men than for lesbians (41 per cent), and increasing with age. Similarly, Age Concern (2002, p. 21) cite research from the USA that 75 per cent of LGB older people in the sample lived alone compared to 33 per cent in the wider general population. In the same research 80 per cent of lesbians, gay men and bisexuals were found to age as single people, without a life partner or significant other, compared to 40 per cent in the equivalent wider general population.

In this context, financial security can be particularly important for LGB people in older age in order to provide for care and to preserve a sense of independence and control over one’s living arrangements and identity (see also chapter 8, section 8.4). However, some LGB people put off thinking about financial planning for older age because of more general fears about what will happen to them with regard to care and support (Heaphy et al 2003). Heaphy and Yip (2006) note that financial security in old age can also be hindered by workplace prejudice (see chapter 5, section 5.2).

**Concerns about care and support**

In the context of possible reduced access to affirming care and support, Heaphy et al (2003, p. 3) found in their study of LGB older people that
‘considerable concerns were expressed about care provision and special housing’, with ‘notable distrust about respect for their sexual identities and relationships’ (see also Taylor and Robertson 1994, p. 562). Chapter 8, section 8.4 notes that research suggests the care and support concerns of LGB people as they grow older are mainly associated with fears about the loss of independent living in a context where they would have to rely on residential services that could be heterocentric and in which they might experience homophobia and isolation. Creegan et al (2007) observe: that LGB older people can experience extreme isolation (especially in rural areas and if the ‘gay scene’ is youth orientated); that they are one of the poorest groups; and that they can experience both elder abuse and homophobic abuse and violence.

Research to date has concentrated on these issues and concerns among people who are not currently in receipt of residential care (for example, ODS and Stonewall 2005; Stonewall Scotland 2007; Turnbull 2001; Creegan et al 2007). However, such concerns appear to be deep seated and were expressed both by LGB older people and younger people in a range of housing situations (Stonewall Scotland 2007). For example, Mitchell’s (2004) qualitative study of the care and support implications arising from relationship and household patterns among 30 gay and bisexual men found that interviewees expressed concerns that they might have to hide their sexual orientation or that their needs as gay or bisexual men would not be met if they had to go into residential care. Other research has also suggested that health and social care staff may assume that LGB older people are asexual or heterosexual and that they may not challenge these misconceptions because
of fears of discrimination (Keogh et al 2006; CSCI 2008; Fish 2007a). Indeed, research indicates that LGB older people may be particularly reluctant to disclose their sexual orientation to health and social care professionals. Hubbard and Rossington (2005) found that only 14 per cent of LGB older people had disclosed their sexual orientation to a healthcare provider. Heaphy et al (2003, p. 12) found the key reasons LGB older people gave for wanting to avoid institutional care were that the services and environments were seen to be operated according to heterosexual assumptions that failed to address specific lesbian, gay and bisexual needs. Many LGB older people felt that health and social care professionals lacked knowledge about LGB lifestyles and could therefore not respond appropriately to their needs (Heaphy and Yip 2006).

Although we could find no studies of the actual delivery of social and residential care to LGB older people, there was some indication that such services have not been good at responding to the needs of LGB older people. For example, CSCI (2008) found that only 7 per cent of older people’s care homes had worked specifically on equality around sexual orientation. Despite this, suggestions have been made in terms of best practice to meet the needs of LGB older people: for example, Creegan et al (2007) provide the following policy recommendations for local authorities involved in providing care and housing for older people. These include:

- provision of services that allow LGB older people to grow old with dignity;
- ensure staff who work with LGB people have training in sexuality;
• provision of a guide for LGB older people that covers key areas such as healthcare and housing;
• facilitation of social groups for LGB older people (for example, in sheltered accommodation);
• greater collaborative work between local authorities and mainstream services for older people to raise awareness about LGB issues;
• inclusion of questions on sexuality in any monitoring that takes place with older people;
• encouraging LGB older people to participate in services for older people;
• encouraging LGB people to become involved in decision making through local forums.

Research by Heaphy et al (2004, 2003) and Heaphy and Yip (2006) also addresses the social care implications of ageing among LGB people, including the need for home carers who are knowledgeable about and sensitive to the needs of LGB older people.

**Strong support networks**

Despite concerns about care and support in old age expressed by LGB people, not all research supports the view that it was necessary to be overly pessimistic in this regard. Although acknowledging the key challenges that face LGB older because of their age and sexual orientation, Keogh et al (2006) nevertheless also draw attention to some of the positive aspects of ageing for LGB people. For example, they argue that LGB older may have strategies and resources that they have developed as a result of the adversity...
they faced with regards to their sexual orientation, such as developed social networks and effective personal coping strategies, which they can transfer and use to deal with ageing. LGB older people may also have stronger social support networks, a stronger subculture and greater personal resilience to deal with ageing because of their past experiences of discrimination. Additionally, LGB older people may also be better able to cope with the demands of old age than their heterosexual counterparts because of less rigid gender roles in traditional heterosexual relationships that see men as breadwinners and women as dependents and carers. As a result, gay men may be more likely to be self-sufficient and less likely to be socially isolated than older heterosexual men. Where older lesbians are concerned, they may more likely be independent financially and less dependent on a breadwinner (Keogh et al 2006).

In the face of concerns about an absence of care, or appropriate care, from family and health and social services, research suggests that LGB people have also begun to develop informal support networks among friends and in the wider LGB community. Positive expectations about care in old age tend to arise where LGB people had prepared reflexively for possible long-term illness and infirmity in old age ‘through anticipated reliance on friends’ or ‘self-help within a collective community’ (Donovan et al 1999, p. 700; see also Age Concern 2002, p. 9; Heaphy et al 2003; Wojciechowski 1998). Such expectations were particularly linked to the concept of ‘families of choice’ discussed in chapter 4, section 4.2. For example, Mitchell’s (2004) study shows that gay and bisexual men were planning to live in old age with partners, if they have one, or with gay friends and/or relatives. This was a
prospect that was regarded positively, both as a way of avoiding loneliness and for mutual support, and also to avoid having one’s gay identity effectively stripped in a care home environment. Interviewees discussed care and support in old age being linked to ‘Golden Girls’ scenarios, with semi-independent (and sometimes intergenerational), shared living arrangements, including elective kin or gay friends (Mitchell 2004, p. 245). However, there are still some concerns about the wider LGB community responding to the needs of LGB older people. Heaphy’s et al (2003) highlight the importance of LGB communities in supporting LGB identities but voice concerns over the exclusion of LGB older individuals due to the failure of such communities to target these individuals to date.

13.2.8 Religion and belief

Religion and belief emerged as a significant issue in the review. This was both in terms of the perceived views of people of faith towards LGB people, and in relation to the experiences of LGB people of faith as a result of real and perceived exclusions of their ability to practise their faith and have access to the communal, spiritual and pastoral aspects of religious life. As discussed in chapter 3, religion has often been discussed as a source of negative attitudes towards LGB people, even though research suggests that the majority of people of faith do not hold homophobic views and actually support equality laws related to sexual orientation (see chapter 3, section 3.2).
Religious beliefs and views about LGB people

Research on the impact of religious belief on the attitudes of people faith towards LGB people and their support for discrimination based on sexual orientation is mixed. For example, work conducted for Stonewall by Hunt and Valentine (2008) entitled, *Love thy neighbour: what people of faith really think about homosexuality*, suggests the perception that all people of faith are intolerant of LGB people is not always the case. This research used six focus groups with people who were Christian, Muslim, Jewish and Hindu, and lesbian and gay people of faith within those communities, to examine the views of people of faith towards LGB people. The research demonstrates that, while participants acknowledged that sometimes strongly held religious beliefs meant that people of faith did not approve of lesbian and gay people, this did not mean necessarily mean that they hated LGB people or that they felt the need to judge people because of their sexual orientation (Hunt and Valentine 2008, p. 4).

A strong theme to emerge was that prejudice against LGB people was often linked to socio-cultural factors rather than to religion *per se*. It was felt that attitudes to gay people varied between generations, with younger participants making a distinction between faith, culture and theology. These younger people were more likely to decide their views on faith and sexual orientation for themselves, seeing attitudes about sexual orientation deriving from culture rather than their views about spirituality. Participants also thought that equality legislation could send a key signal in terms of the non-acceptability of discrimination against LGB. Some expressed the view that, ‘although some
people of faith may not agree with the way some lesbian and gay people live their lives, gay people deserve exactly the same protections from discrimination as everyone else’ (Hunt and Valentine 2008, p. 2).

Such findings are important in demonstrating the ‘variety of views and attitudes towards lesbian and gay people from people of faith’ and that people of faith are ‘not automatically discriminatory’ (Hunt and Valentine 2008, p. 4). However, care must be taken in interpreting this research as it is derived from only a few focus groups with people of faith and it is not clear from the report how participants were recruited or selected. It is therefore not possible to say how representative their views were of the wider faith community. Cowan (2007) found that, although the majority of people with faith in their general population survey supported the rights of lesbian and gay people in such spheres as health, social services and education, religion was still seen by many people in the wider population to be a key source of anti-gay prejudice. A study by Yip (2003) also corroborated this view. Yip’s survey, which involved 565 respondents in Britain, found that the majority of respondents felt that churches had ‘encouraged heterosexism in society’ (97 per cent) and that churches had contributed to the ‘perpetuation of homophobia’. However, once again, these findings must be interpreted with care as the sample size was relatively small for a national survey and contained the views of individuals that were largely from ‘White’ ethnic groups.

**Danger of hierarchies of oppression**

Another way in which religion was seen to impact on the issues related to sexual orientation and the lives of LGB people was in the policy and service
priorities of local authorities. Research indicates there was concern that social
and voluntary groups funded by public monies (particularly local authority
monies) promoting faith agendas may, at best, exclude the needs of LGB
people and, at worst, perpetuate discriminatory attitudes towards such
communities (Keogh et al 2006). As discussed in section 13.1 research
suggests that sometimes a hierarchy of oppressions exists in terms of local
authority provision of services and equal opportunities monitoring in
employment (Colgan et al 2006; Aspinall and Mitton 2008). Tensions between
the allocation of monies to faith groups and LGB groups particularly exist in
some local authorities. Keogh et al (2006) argue that one way to avoid such
hierarchies and tensions was for local authorities to pursue an integrated
equality agenda.

Experiences of LGB people of faith

We found a small but growing literature detailing the experiences of LGB
people of faith. Possibly reflecting greater perceived hostility to LGB people
among sections of specific religious communities, this literature tends to
concentrate on the experiences of LGB people of faith within the Christian and
Muslim communities. Apart from some participants in Hunt and Valentine’s
(2008) study above and discussion of methodological questions, the reviewed
literature on religion and sexual orientation focuses almost exclusively on
Islam and Christianity. There was an absence of literature looking at how
sexual orientation and faith were experienced by individuals from other faiths,
such as Judaism, Hinduism or Buddhism.
Prioritisation of the views of organised religion over the needs of LGB people of faith

Commentary and research tend to reflect the way in which the concerns of organised religion and religious authorities were prioritised over the needs of practising LGB people of faith. For example, in their *Equality impact assessment of the Equality Act (Sexual Orientation) Regulations 2007*, the Department of Communities and Local Government acknowledge that ‘many groups and individuals with a strong faith identity are concerned that the extension of goods, facilities and services protection to include sexual orientation will require faith organisations and individual business owners to act in a way that is incompatible with their beliefs’, including, for example, a requirement to offer core religious observances and practices such as marriage or sacraments to LGB people (DCLG 2007, p. 9). While they acknowledge that denial of marriage or sacraments to LGB people of faith ‘is a difficult issue for those in this position’, with ‘negative impacts for those involved’ and ‘complex human rights issues’ (DCLG 2007, p. 9), in conclusion they were inclined to exempt religious institutions from the regulations as the ‘best balance between the rights of non-discrimination and freedom of thought, conscience and religion (DCLG 2007, p. 10).

Notably, in discussions and debates about faith and sexual orientation, LGB people of faith felt they were ‘being ignored and their spiritual needs neglected in favour of politics’. Further, LGB people of faith wanted ‘to be able to express their faith rather than let rhetoric make them and others lose sight of what is important’ (Hunt and Valentine 2008, p. 22). Hunt and Valentine
(2008, p. 10) note that LGB people of faith said that being LGB was less an issue for their families than the concerns about ‘how they would continue to abide by the principles of their faith, and participate in the faith community’, especially if they were unable to access key observances that confirmed their faith.

**Dissonance, compartmentalisation and individualised approaches**

The tensions raised by the refusal or reluctance of some religious authorities to address the reality of the lives of LGB people living in faith communities and wishing to practise their faith were also documented in other research by Yip on Christianity and Islam (Yip 2003a; 2003b). This research indicates that LGB people of faith within these communities could experience dissonance between their belief and their sexual orientation. Such dissonance was seen to affect the quality of life of individuals, some of whom experienced feelings of depression and helplessness as a result of not being accepted. As a result of these experiences, some people of faith gave in to the perceived incompatibility of their religion with their sexual orientation by underplaying their sexual orientation, ending the practice of their faith altogether or retreating from their religious communities to practise their faith privately.

In his qualitative study involving 42 interviews with non-heterosexual Muslims from mainly South Asian backgrounds, Yip (2003b) notes that religious censure of homosexuality pressured many of his interviewees to ‘compartmentalise their sexuality and religion’. He found that Muslim LGB people often attempted to maintain their faith by ‘privatising’ it and withdrawing from religious communities. For example, some of Yip’s participants
accommodated expectations that they would marry and concerns about family honour by using marriage as a way to distance themselves from the ‘parental gaze’ and then to use the space ‘to explore their sexuality outside wedlock’. Others interpreted their faith in their own way rather than relying on the absolute views of religious leaders and the interpretation of text through them.

The balance of religious belief and sexual orientation was also explored by Yip (2002) from the angle of the neo-secularisation thesis. In this study, involving 565 LGB Christians, Yip examined how LGB people of faith interacted with religious authority in formulating their views on sexual orientation and spirituality. The study concludes that the self, rather than religious authority structures, determined how respondents viewed issues concerning spirituality and sexual orientation. That is to say, reason and understanding of biblical precepts within the context of lived experiences determined participants understanding of their Christian faith more than religious authority structures. Likewise, the study found that religious authority structures lacked influence on respondents’ views about sexual orientation; the balance between religious belief and sexual orientation rested with the individual. In his subsequent study with non-heterosexual Muslims, Yip (2003b) found that his participants also established their own understanding of their faith: for example, by arguing that sexual orientation was ‘intrinsic and God-created’, that ‘God is compassionate and loving to all people’ or by reinterpreting religious texts in the ‘light of present day realities’. However, the people who practised such individualised approaches were often young, well-educated, living in large metropolitan communities and in full-time employment. It remains to be seen whether such an approach is equally
available to older, less well-educated people who may not have an independent income or be able to live independently from their family in diverse communities that are accepting of their sexual orientation and their faith.

**Tensions and resolutions**

Social ways of responding to the dissonance and tensions that many LGB people of faith experience between their sexual orientation and their belief are also discussed in the research literature. Ways in which to promote good relations between LGB people and faith communities in general are discussed in section 13.1. However, the way in which tensions between religious beliefs and sexual orientation was particularly seen to be resolved, or at least ameliorated, for LGB people of faith was in the development of support groups and legislative frameworks that provided a lead on acceptable moral attitudes towards discrimination and inclusion in society.

Yip (2003b) observes that LGB Christians, and to a lesser extent LGB Muslims, have begun to confront the discrimination and exclusion that they can feel from religious communities through the establishment of support groups. He argues that such groups have two roles for LGB people of faith: ‘providing a safe platform for identity reinforcement and community building (a defensive strategy)’; ‘mobilising members for the construction of reverse discourse and actions to challenge discrimination (an offensive strategy)’.

Through such groups LGB Christians have been particularly successful in creating LGB-affirming theology and social resources that challenge the accuracy and moral authority of views and structures that justify discrimination.
against LGB people on religious grounds. Although such a strategy is less evident among LGB Muslims, Yip argues that ‘there is no denying that they will increase’. Such groups are, therefore, important in terms of attempting to gain ‘religious citizenship’ for LGB people of faith. Some also emphasise the importance of financially supporting such groups in a context where they have a role to play in providing safe spaces for LGB people to explore the issues of faith and spirituality and as a site to facilitate dialogue between religious organisations and LGB people (LGBT Hearts and Minds Agenda Group 2008). Yip (2003b) states that support groups among Muslims are still ‘embryonic and in great need of encouragement’.

Another way of addressing issues faced by LGB people of faith was through anti-discrimination or equality legislation. Hunt and Valentine’s (2008, p. 14) participants noted the impact that legal changes have on attitudes to LGB people, ‘even amongst those who have strongly held views about the morality of homosexuality’. Participants pointed out that, in countries where homosexuality was still a criminal offence, condemnation of LGB people was more acceptable. They also felt that the decriminalisation of homosexuality and subsequent anti-discrimination legislation relating to sexual orientation had led to a greater acceptance of lesbian and gay people by people of faith in Britain (Hunt and Valentine 2008, p. 14.). In this sense such legislation provides a lead on acceptable moral codes within a society that exists alongside religious authority.
A further issue is the ‘perceived’ tension between LGB people and people of faith who may hold negative views about them. Stonewall are due to publish shortly EHRC funded research into to what extent these conflicts actually exist and how professionals in the workplace and in service delivery would deal with them if they arose.

13.2.9 Other issues – class, location, refugee status

There has been limited research on the intersection between class and sexual orientation within the reviewed literature. The literature that does deal with the issue questions the assumption that gay identity is always associated with upward class mobility (Keogh et al 2006), as well as pointing out that the ‘gay scene’ is more accessible to middle class and well-educated people than those that are working class and not so well educated (Weatherburn et al 1999). Quite clearly, more research needs to be done on the issue of class and sexuality.

The issue of locality and sexuality has also been given limited examination in the reviewed literature, though a number of Stonewall’s reports incorporate a regional dimension (see for example Dick 2008; Hunt and Dick 2008 and Hunt and Fish 2008). Studies indicate that access to a gay scene is problematic for those living in rural areas (Weatherburn et al 1999) and, furthermore, social inclusion schemes that target geographical localities often overlook communities that are held together by common interest, such as the LGB community (Stonewall Cymru 2004). According to this view, members of the LGB community are likely to travel distances in order to acquire support and
guidance from other peers who may lack funding. Again, it would be helpful for more studies to explore the interaction between sexual orientation and locality.

Finally, there has been very limited research done on the issue of refugees and sexual orientation. McGhee’s study (2003) of gay and lesbian refugees is the only one in the reviewed literature that deals with this issue. The study focuses on the contested nature of refugee status based on the grounds of sexuality. The possible intersection of discrimination between being a refugee and sexual orientation needs further exploration if the experiences of the LGB population are to be disaggregated and fully appreciated.

13.3 Conclusions and research gaps

Identifying and researching diversity in the LGB population

The literature points to the complexity of both the issue of LGB identity and the multidimensional and differential nature of the discrimination experienced by LGB people. There was increasing acknowledgement that experiences within the LGB population will be diverse in terms of the specificity of need and the sampling and recruitment strategies necessary to target diverse populations. However, greater consideration may need to be given about when data should be collected on the LGB population as a whole; when it should be disaggregated; and when separate research on subsections of the LGB population is required.
An integrated research and policy agenda

There was less discussion in terms of whether sexual orientation should continue to be researched as a separate strand in order to give a better account of identities and discrimination intersecting with sexual orientation and to avoid subsuming differences within the LGB population. What discussion there was suggested that it is probably too early to integrate sexual orientation into a broader research and policy agenda, given the absence of detailed information on sexual orientation inequality and the recent development of sexual orientation as a separate strand in equalities legislation. This was particularly so because sexual orientation was still seen to be a poor relation of other equality strands with the potential for research and for policy work to be seen as less of a priority or to be completely ignored.

Identifying gaps and priorities

The review indicates great variability in the amount and quality of research that had been undertaken on different experiences and identities intersecting with sexual orientation, although virtually all remain under-researched relative to other substantive areas in the review.

Bisexuality

Research on bisexual people is very limited. The issues, inequalities and discrimination they face are an area still requiring specific attention.
Gender

Gender was relatively well explored compared to other social identities intersecting with sexual orientation. But beyond the area of health and certain areas of research where gendered assumptions meant that women traditionally had greater roles, the experiences of lesbians and bisexual women were still under-explored compared to gay men. The impact of gender was also not always systematically explored in general research on sexual orientation.

Ethnicity

With regards to ethnicity, there is still generally a lack of research on this issue. What research there is focuses on LGB people from the Black, South Asian and Irish communities to the exclusion of other communities, and the important themes of alienation and dissonance are largely underdeveloped. Likewise, though the literature indicates that LGB people from BME backgrounds are more likely to suffer from homophobic crimes and abuse, it does not explain why this is the case. The literature also indicates that there are structures in place within Black communities that enable LGB people from these communities to thrive. However, the literature does not go on explore in detail what these structures are and how and why they enable LGB people to thrive. Differences of experiences for LGB people from different minority ethnic groups suggests that researchers and policy makers should also be cautious in terms of how much generalisation can be made for LGB people from communities with diverse ethnic, historical and cultural backgrounds.
Disability

The intersection of disability with sexual orientation appears to be one of the most under-researched areas in the literature in need of much greater attention. The existing studies focus on the double discrimination that LGB disabled people face and the desexualisation of LGB disabled people. Even then, these studies have concentrated largely on those with learning disabilities, leaving the experiences of LGB people with other types of disabilities unexplored. Further research might explore more fully the nature of the double discrimination that LGB people face and broaden the agenda to look at a range of disabilities (for example, physical disabilities, mobility, hearing and sight impairment).

Age

Age was relatively well discussed in the literature, both in terms of young people and older people. There were specific issues related to particular stages in the life course, transitions from youth to adulthood and growing older in the context of different family dynamics and relationships. Although these had begun to be explored issues relating to the different experiences that LGB young and older have in terms affirming support still require greater research.

Religion and belief

A small but significant body of research has begun to develop in relation to LGB people of faith although this tends to focus primarily on LGB Christians and Muslims. A number of themes have begun to develop, including: the need to address the apparent disconnect between the view of people of faith and religious leaders; the prioritisation of the views of organised religion over the
needs and citizenship of LGB people of faith; dissonance, alienation and compartmentalisation; and the role that support groups and legislation can play in reducing these tensions. All of these issues and concepts require further conceptual development and investigation. Finally, as the Stonewall review (2007) point out, further work is also needed on the potential for conflict that exists between sexual orientation and religious beliefs and how these tensions and conflicts can be resolved.

Other issues

The impact of class and locality on the experience of sexual orientation discrimination are also particularly under-researched, as is that of refugee status.
14 GENERAL RECOMMENDATIONS AND INITIATIVES

In addition to the examples of best practice identified in relation to each substantive area of research, there are a number of important recommendations and approaches to addressing inequalities and discrimination based on sexual orientation that emerged across these areas. This chapter summarises these recommendations and approaches.

Recommendations tend to be grouped around three main themes:

- challenging prejudice and discrimination and building good relations;
- building and supporting capacity among LGB people to challenge prejudice and discrimination;
- establishing and implementing policies, practices and training.

14.1 Challenging prejudice and discrimination and building good relations

Recommendations under this theme focus on the need to establish the nature of prejudice and discrimination on the basis of sexual orientation (particularly for LGB people); to develop comprehensive and proactive strategies to challenge prejudice and discrimination; and to promote good relations with, and within, communities with whom LGB people have traditionally had a difficult relationship.
14.1.1 Recognising and understanding the issues

The establishment of sexual orientation as a ‘strand’ within equalities legislation has brought a renewed attention to inequalities, prejudice and discrimination against LGB people. One theme to emerge was that recognition of sexual orientation as an important aspect of inequality and discrimination does not automatically mean that policy makers and service providers will have knowledge or understanding of the issues faced by LGB people. In their general assessment of the needs of LGB people in Wales, Stonewall Cymru (2004, p. 3) note that LGB people will need to be ‘recognised as an eligible “community of interest” in funding schemes and social inclusion programmes’. It has been argued that, where information has not already been gathered about the inequalities and needs of the LGB population (or sufficiently robust information) at national and local levels, this should be a significant priority.

A number of documents reviewed emphasise the importance of assessing the needs of LGB people within particular localities in order to plan services and address discrimination, including an audit of existing services (Fyfe et al 2006; Platzer 2003; Stonewall Cymru 2004). At the level of individual services researchers indicate the important role that research can have in recognising and understanding the needs of the LGB population who are often characterised by their ‘invisibility’. For example, in her study of social work practice and the needs of LGB older people, Langley (2001) found that her work highlighted a number of challenges. These were: ‘working with invisibility and the fear of oppression’; ‘developing awareness and recognition of lesbian and gay relationships and supportive networks’; ‘the need for anti-oppressive
empowering services which match the needs and circumstances of older lesbian women and gay men; and ‘the need for greater awareness of the heterosexist assumptions which influence institutional responses and individual practice’. Such issues highlight the importance for government, local authorities and service providers of commissioning research on sexual orientation issues in order to adequately understand them (LGBT Hearts and Minds Agenda Group 2008, p. 49).

14.1.2 Consultation

Another key element of understanding the issues in relation to sexual orientation and the needs of LGB people is consultation. Such consultation could occur at national or regional level, or at the level of individual services or organisations. An example of good practice in this respect at a national level was the establishment by the Scottish Executive of the LGBT Hearts and Minds Agenda Group. This group, which included representatives from the LGB community in Scotland, was formed to look at ways to tackle negative and discriminatory attitudes towards LGBT people (LGBT Hearts and Minds Agenda Group 2008 – see also below). Additionally, in Wales other researchers called for ‘regional lesbian, gay and bisexual fora’ to be developed (Stonewall Cymru 2004, p. 6) as recommended by Stonewall’s good practice guide (2005) or, for example, for employers to ‘consult with LGB employees’ in the workplace so that policy development is ‘rooted in the everyday experiences of lesbian, gay and bisexual workers’ (Colgan et al 2006, p. 19). Additionally, Stonewall Cymru (2007, p. 3) recommend the ‘setting up of virtual LGB networks across Wales to aid communication for
both local community strategy partnerships to access the voice of lesbian, gay and bisexual people, particularly those who are from rural areas and women, younger people, older people, disabled people and from ethnic minorities’.

14.1.3 Developing national and local strategies

Once there is an understanding of inequalities, discrimination and needs in a specific locality, organisation or service, the next step appears to be to develop a national or local strategy to address the issues. Once again, the LGBT Hearts and Minds Agenda Group (2008) provide a good example in this respect. This group was set up specifically to find ways to challenge prejudice against LGBT people in Scotland. It identified five areas of work for strategic intervention:

- workplaces and public services;
- religion and belief;
- education and family;
- media and leadership;
- citizenship and social capital.

Subgroups were established for each of these themes. The groups met regularly, heard evidence from other sources and drew up recommendations considered by the whole group. The reports set out recommendations for each of the five areas listed above, as well a number of cross-cutting recommendations (these are referred to as appropriate in the remainder of this chapter). National strategies to tackle prejudice and discrimination based on sexual orientation have also been called for elsewhere, emphasising the
need for government, agencies (including the EHRC) and groups representing LGB people to work together (Valentine and McDonald 2004, p. 22).

Another useful example of an initiative to tackle discrimination, inequalities and needs related to sexual orientation is the *Making it count*, a collaborative planning framework designed to reduce the incidence of HIV infection during sex between men (Hickson et al 2003). Devlin et al (2003), in the field guide for people working in the HIV field that accompanies the framework, assert that HIV incidence among homosexually active men should not be seen solely as the responsibility of gay men’s HIV prevention agencies but rather as a national problem, the solution to which involves mobilising all members of society, all services and all authorities and all levels of government. It states that ‘*Making it count* describes a collective, national HIV prevention response which mobilises central and local government, the media, gay community organisations, health and social services, the general public, gay men and other homosexually active men themselves’. Once again, the emphasis is on a coordinated strategy involving partnership working.

14.1.4 Proactive leadership and communication

In addition to developing strategies, there is also a call for proactive leadership and for government, public bodies and service providers to take a lead in reducing inequalities and discrimination against LGB people and a lead in addressing their needs. Again, the LGBT Hearts and Minds Agenda Group provides a good example in this respect, making specific recommendations. At the level of government it welcomes positive leadership
statements made by ministers in relation to sexual orientation discrimination but argues that government ‘should take every opportunity to make further positive leadership statements on challenging prejudiced attitudes towards LGBT people’. The LGBT Hearts and Minds Agenda Group also state that it would like to see ministers and other political leaders being ‘more proud and proactive about their commitment to LGBT equalities’, particularly in their contact with the media (LGBT Hearts and Minds Agenda Group 2008, pp. 4–5). While these recommendations are made in relation to Scotland, it seems reasonable that they would also apply to England and Wales.

At the level of local authorities and publicly funded bodies there is also a call for similar proactive leadership. This includes that ‘all publicly funded bodies develop an explicit strategy for LGBT inclusion within their communication and promotional activities’ (LGBT Hearts and Minds Agenda Group 2008, p. 5) and that local authorities go further with their public duties to promote equality. In the latter instance, for example, they recommend that:

…the Scottish Government: convey a firm expectation to the bodies it funds that they should promote sexual orientation and gender identity equality alongside their other statutory equality duties; work in partnership with the Equality and Human Rights Commission and the LGBT sector (including transgender organisations) to seek appropriate guidance and good practice examples from public bodies who have made clear commitments to promoting LGBT equality alongside
existing public duties. It is also recommended that the Scottish Government sets a target of full compliance from public bodies in time for the introduction of the expected statutory duty which will cover all equality strands (LGBT Hearts and Minds Agenda Group 2008, p. 23).

Again, although this is directed to the Scottish Government, there seems to be no reason why similar leadership could not be expected from the UK Government or from the Welsh assembly.

At an organisational level, Colgan et al (2006, p. 119), for example, highlight the need for policy initiatives that have been shown to make a difference to LGB workers (for example, the appointment of diversity champions; workplace campaigns highlighting inclusion and safety; the establishment of LGB groups and networks; and the integration of equality and diversity into job roles and performance management systems). However, in addition to the establishment of such policy initiatives it is also recommended that they should be ‘promoted’ and that their visibility is a key to their success from the point of view of LGB employees (Colgan et al 2006, p. 19).

Improving promotion and communication about support for initiatives to tackle discrimination and inequality based on sexual orientation are also thought to be important at government and local authority levels. For example, it is suggested that the Scottish government and the EHRC ‘support national LGBT organisations to work together and in partnership with local LGBT
communities to develop a national LGBT community website and annual networking and training conference for LGBT community groups and organisations’ (LGBT Hearts and Minds Agenda Group 2008, p. 48). Fyfe et al (2006, p.3) also suggest that local authorities improve their communication of support for diversity and equality policies through leaflets, posters and council websites and by challenging prejudice when it is identified in the local community.

14.1.5 Targeting opinion makers

Targeting opinion makers and organisations that can influence attitudes towards sexual orientation are also discussed in the literature. Included among these opinion makers are schools, employers, political parties, religious institutions and the media (these issues are also addressed in the relevant substantive chapters). Cowan (2007), for example, suggests the following:

- schools should develop policies that comprehensively address anti-gay bullying;
- employers should ensure they fully comply with the law and tackle all forms of bullying and harassment;
- political parties should actively encourage lesbian and gay people to become MPs and councillors;
- religious organisations should address the apparent disconnect between the anti-gay statements of some religious leaders and the attitudes of ordinary ‘people of faith’.
The greatest attention, however, is given to the role of the media in influencing opinions and attitudes towards sexual orientation issues. The LGBT Hearts and Minds Agenda Group (2008, p. 5) suggests that government commission a ‘media analysis project to monitor trends in LGBT coverage’ across a range of media. Cowan and Valentine (2006) also emphasise the need to make sure that LGB people are portrayed realistically and responsibly in television and newspapers (for example, that portrayal is natural and realistic, balanced and unsensationalised and that LGB people and characters are actually represented in ways that reduce prejudices). It is also suggested the government and the EHRC ensure that the Press Complaints Commission and the Standards Commission for Scotland ‘demonstrate that they ‘take homophobic and transphobic coverage and conduct seriously’, and they ‘should produce clear statements that explicitly detail how seriously they view homophobic and transphobic coverage and conduct and the actions they will take if it occurs’ (LGBT Hearts and Minds Agenda Group 2008, p. 42). A final suggestion is that LGB organisations should also ‘develop a toolkit for use by media professionals that contains information, guidance and examples of best practice for LGBT inclusive reporting’ and that promotes ‘general LGBT awareness for journalists and other media professionals’ (LGBT Hearts and Minds Agenda Group 2008, p. 5). Such an approach is similar to that discussed in relation to the Look Out project that arose from the Stonewall Cymru Counted Out survey (Robinson and Williams 2003) discussed in chapter 10, section 10.5.

Another suggestion for targeting opinion makers and influential bodies is to encourage competition between them in terms of meeting good practice
equality standards. A good example of this is Stonewall’s Workplace Equality Index amongst employers (Stonewall 2007, p. 28), although such indexes could also be applied in other spheres (for example, in relation to local authorities, police services, health authorities). Another suggestion is that government and public bodies sponsor awards for best employers in relation to diversity issues with specific reference to sexual orientation (LGBT Hearts and Minds Agenda Group 2008, p. 22). Again, such award schemes could also apply elsewhere.

14.1.6 Building links and good relations with other groups

One of the greatest potential difficulties between groups was identified as being between LGB people and people of faith (for example, Yip 2008, section 3). In particular, the ‘received wisdom that all people of faith are likely to be homophobic can have an impact on how people of faith and gay people interact with each other and can create barriers to community cohesion’ (Hunt and Valentine 2008, p. 5). It is thought that this further perpetuates and heightens tensions between the communities. Although other difficulties are identified, for example, in terms of issues relating to tensions between the identities and experiences of people from minority ethnic groups, disabled people, older people, younger people and LGB people from these groups, there is less discussion about this, or indeed about how good relations can be promoted there. One suggestion, however, is that government and the EHRC could support good relations by promoting opportunities for joint working on common issues, although such joint issues are not specified.
Promotion of good relations between faith and LGB communities tend to focus on views about the potential impact of anti-discrimination and human rights legislation on the views of people of faith towards LGB people and more local or micro strategies and mechanisms for facilitating greater dialogue, understanding and mutual recognition between the two groups. In terms of legislation a key finding is that not all people of faith held negative or hostile views about homosexuality and that many people of faith believe that LGB people deserve exactly the same legal protections from discrimination as everyone else (Hunt and Valentine 2008). In their focus groups with people from different faith communities, Hunt and Valentine found their participants often felt that prejudiced attitudes towards LGB people was as much connected to social and cultural issues as to religion. The key to tackling prejudice based on sexual orientation in faith communities is therefore to tackle prejudice in society more generally (Hunt and Valentine 2008, p. 23). In this respect, some participants thought that ‘increased legal protections for lesbian and gay people had a “civilising effect” on society’. They felt that ‘an increased acceptance of gay people on a national, political level had an impact on attitudes at a local level’ (Hunt and Valentine 2008, p. 2).

Consequently, even if people of faith had no interaction with gay people, ‘changing laws does apparently change culture and can consequently change attitudes’ (Hunt and Valentine 2008, p.17).

There are a number of recommendations linked to local and micro-strategies and mechanisms for promoting good relations between LGB and faith communities. Some of these discussed broad efforts to ‘reach out’ establish dialogues or acknowledge the existence and needs of LGB people of faith within faith communities. There was less discussion of practical strategies to
achieve these aims although there were some notable exceptions. From one perspective these included addressing specific initiatives where LGB people and people of faith may share issues in common. Examples given included work with faith and ethnic minority groups around existing initiatives such as: Holocaust Memorial Day (where LGB people and other groups shared a common experience of oppression and discrimination as a result of Nazism); and LGBT History Month (for example, where the history and experiences of LGB people from a diverse range of backgrounds can be emphasised). Other initiatives relate to common work to raise awareness of the sexual orientation and religion or belief regulations in relation to discrimination in employment and promote opportunities for joint working on common issues related to addressing discrimination (LGBT Hearts and Minds Agenda Group 2008, p. 20). From another perspective there was a focus on ways of working that might be more likely to promote good relations. These include:

- recognising that there are different views and perspectives within faith communities and that not all religious people are anti-LGB;
- dialogue and co-existence of gay communities and faith communities;
- discussing issues of sexual orientation quietly and privately to avoid dogma and aggression in public areas of debate;
- working directly with individuals of faith and not just those who claim to represent them;
- working with religious organisations that are aiming for community cohesion and not just listening to the voices that shout the loudest when discussing sexual orientation;
• teaching respect for different faiths and sexual orientations in schools (Hunt and Valentine 2008, pp. 20–2).

Other recommendations for promoting good relations relate to:

• raising the profile of LGBT-affirmative faith and belief viewpoints;
• reducing false impressions of conflicts between groups;
• recognising the pastoral care aspects of religion and faith for LGB people (Hunt and Valentine 2008);
• financially supporting and signposting supportive groupings within faiths (LGBT Hearts and Minds Agenda Group 2008, p. 29).

Indeed, in relation to the last point, Yip (2003b) comments on the important role that support groups for LGB Christians and Muslims play as a way to provide safe spaces for them to explore the issues of faith and spirituality and as a site to facilitate dialogue between religious organisations and LGB people (see also chapter 13, section 13.2). It also allows LGB people of faith to raise their profile in a context where otherwise discrimination would potentially render them invisible. As discussed above, others point to the fact that religious organisations should address the apparent disconnect between the anti-LGB statements of some religious leaders and the support of most people of faith for laws protecting LGB people from discrimination (see chapter 3, section 3.2).

A role that research could play is identified in terms of mapping existing and potential conflicts between sexual orientation and other diversity and equality
strands and how investigating these tensions and conflicts could be resolved. For example, the LGBT Hearts and Minds Agenda Group (2008, p. 31) recommends that ‘the UK Government, Equality and Human Rights Commission, Scottish Government and Scottish Commission for Human Rights should develop guidance about, and seek to clarify on, the requirements of equality and human rights law in areas that inter-relate sexual orientation and gender identity and religion and belief’. Research could therefore play a significant role in informing such guidance, whether in Scotland or Britain-wide.

### 14.2 Building and supporting capacity among LGB people

Another set of recommendations and initiatives relate to building and supporting capacity among LGB people to challenge prejudice and discrimination and to address needs themselves. Recommendations concentrate on building partnerships and capacity to address these issues, the establishment of LGB networks and forums and responding to the information and support needs of LGB people.

#### 14.2.1 Building partnerships and capacity

Building capacity to deal with sexual orientation discrimination and to address LGB needs involves identifying and responding to needs and responding to statutory requirements to consult with and involve the LGB community in local strategic partnerships. For example, in work on assessing the role of a community organisation in providing infrastructure and capacity building for
support in the LGBT community in Brighton, Platzer (2003) discusses the need to understand the number and nature of LGB groups within a particular locality and their needs, if any, in terms of resources and training to deliver such support. Several researchers also comment on the need for statutory bodies to consult with and involve LGB people in decisions about local strategies. However, they suggest that such consultation activities can assume that there is a body of LGB people who are ready and capable of being involved.

McGhee (2003), for example, talks about attempts to create LGBT ‘active citizens’ and ‘active communities’ in the context of the community safety partnerships. She argues that such strategies not only require multi-agency partnerships but also empowerment programmes for LGB people that involve all sections of the LGBT community (raising questions, for example, about who is ‘invited’ to be an active citizen?). In this context, McManus and Rivers (2002) wrote a guide for community safety partnerships on responding to the needs of LGB people in the context of the statutory requirement to consult LGBT communities. The LGBT Hearts and Minds Agenda Group (2008, p. 45) also call for a review of current best practice in capacity building work in the LGBT and other sectors and suggest the role out of a National Community Capacity Building Project in partnership with local authorities and the LGBT community.

A number of ways that local authorities and other public bodies can strengthen community capacity and encourage community engagement are
suggested. These include government and local authorities supporting a small grants scheme for LGBT organisations to develop new work in specific LGBT communities where needs or capacity are identified and evolving, and financially supporting a calendar of LGBT events (for example, LGBT History Month, International Day Against Homophobia, local Pride events). In addition it is suggested that such activities should specifically target harder-to-reach groups within the LGB community such as younger and older people, minority ethnic groups and disabled people.

14.2.2 Networks and forums

The literature also discusses tackling prejudice and discrimination against LGB people in specific local or organisational settings through support for LGB networks and forums. Research conducted for the Department for International Development shows that, where there was a perceived lack of progress on addressing sexual orientation discrimination, some staff attributed this to a lack of an LGBT network of support. LGB employees supported the development of such a network as long as they could remain anonymous if they wished (DFID 2007, p. 12). Colgan et al (2006) also found that the existence of LGB networks were valued by LGB staff as a way of making a difference to their working lives. However, they identify challenges in terms of making sure such networks are representative and relevant to change within the organisation.

Other examples of discussion of networks and forums are seen in education. Mulholland (2003) reports on the Bolton Homophobic Bullying Forum. The
forum ‘met monthly to plan a pilot project and gathered evidence
demonstrating the need to do this work and highlighting how it would feed into
Sex and Relationship Education (SRE), Citizenship, Social Inclusion, PSHE
and National Healthy School Standard’. The forum then worked with ‘three
pilot secondary schools in Bolton to develop and implement an action plan…
to tackle homophobic bullying and address the emotional health and well-
being of young lesbian, gay and bisexual people’. It can be argued therefore
that the EHRC could issue guidance that such networks and forums should be
supported by employers, schools and in other settings as examples of good
practice in relation to tackling prejudice and reducing discrimination.

14.2.3 Information and support for LGB people

A final aspect of building and supporting capacity among LGB people was
seen in terms providing information to support LGB people. Stonewall Cymru
(2004, p.7) recommend that ‘widespread public information be made available
on how to contact local lesbian, gay and bisexual groups’. Recommendations
for the delivery of such information include providing a government-
sponsored, high-quality, central web-based resource that would bring together
information and advice from all LGB projects that can assist public services
and employers on equality matters (LGBT Hearts and Minds Agenda Group
2008, p. 1); and an ‘all-Wales, 24/7 lesbian, gay and bisexual peer support
helpline’ that could ‘provide peer support for people in difficulties due to their
sexual orientation’ (Stonewall Cymru 2004, p. 7). Other researchers comment
on the need to provide financial and political support for specific LGB support
groups or dissemination of information: for example, Yip (2003b) describes
how ‘help groups offer a safe environment to explore the thorny issue of Islam and non-heterosexuality (particularly homosexuality) which the wider gay and lesbian community rarely provides’. However, he notes that current efforts to provide support groups are ‘embryonic and in great need of encouragement’. Others offer information sheets on specific issues, such as planning for later life as an LGB person, as examples of good practice in the type of information that can be disseminated (Age Concern 2003). Consequently, there were a number of ways in which it was suggested that the information and support needs of LGB people could be met.

14.3 Policies, practices and training

The final theme to emerge in relation to recommendations and initiatives is the need to establish and implement of policies, practices and training on equality in relation to sexual orientation. Three issues stand out: the policies and practices themselves; awareness training on sexual orientation issues; and provision of good practice guidance.

14.3.1 Policies, audits and monitoring

Most of the many policies and practices described in the literature are discussed in the specific substantive chapters above. However, some common elements do stand out. The first of these is that it is important for organisations to have a clear statement on their commitment to equality based on sexual orientation. Fyfe et al (2006, p. 1) discuss the importance, for instance, of local authorities making ‘explicit references to sexual orientation’
in their statements on equality issues and having in place ‘guidelines to deal with discrimination or harassment on grounds of sexual orientation’ when problems occur.

In addition to making statements and having policies on equalities and diversity, it is argued that it is important to conduct equalities impact assessments and reviews on all policies and practices (DFID 2007). Involving LGB people or networks in these reviews can be a useful strategy in highlighting barriers to changing policies and inconsistencies in practices. Colgan et al (2006, p. 19) state that evidence from their study in employment ‘suggests that regular and detailed audits and reviews of policy and practice that incorporate the perspectives of lesbian, gay and bisexual workers may provide a way of highlighting such barriers and the possible means of overcoming them’. Stonewall Cymru and Triangle Wales (2006) also suggest that reviewing policies and practices in housing can help identify whether a full range of services are ‘open and accessible’ to LGB people so that ‘preventative action’ can take place before potential discrimination occurs. Finally, the establishment of good policies and practices also requires monitoring. Most discussion on monitoring was about equal opportunities monitoring in relation to employment and health, although monitoring is also discussed in the context of access to services and inspections. Equal opportunities monitoring in employment is discussed in more detail in the chapters 2 and 6. However, concomitant to their discussion of reviewing accessibility of housing services above, Stonewall Cymru and Triangle Wales (2006) also suggest that housing services should specifically monitor issues
such as housing allocations, transfers, waiting lists and anti-social behaviour cases. In the context of education the LGBT Hearts and Minds Agenda Group (2008, p. 3) argue that there is scope to encourage LGB equality through school inspections (for example, through examination of pastoral care of LGBT young people, teacher training). They recommend that the ‘Equality and Human Rights Commission should develop clear guidance for local authorities and schools on their legal responsibilities for LGBT equality’. Such guidance could facilitate more focused inspection on issues related to sexual orientation.

14.3.2 Awareness training

We discussed above that, although many organisations and service providers are involved with LGB people on a regular basis, this does not automatically make them aware of the discrimination or difficulties faced by LGB people (Langley 2001). Consequently, despite calls by some for professionals to examine their own attitudes and practices towards LGB people to consider how services could be delivered (for example, Ahmann 1999), it is clear that service providers do not always know how to change their services for the better. A significant finding in the DFID (2007) annual diversity report, for example, is that managers felt there was a lack of capacity to deal with sexual orientation issues and this is echoed in the wider literature in employment (see chapter 6, section 6.3).

In this context awareness training can provide a way of generating capacity to deal with sexual orientation discrimination and inequalities. Stonewall Cymru
and Triangle Wales (2006) suggest that, in housing services, awareness training can serve several purposes. This includes raising awareness of:

- the housing issues, problems and needs faced by LGB people;
- how to deal with LGB clients in a sensitive manner and equip service providers with knowledge of appropriate language to use and so on;
- how to make housing service providers aware of specialist LGB services.

Other commentators suggest that awareness training can be particularly useful when it is targeted at front line staff and senior managers (Fyfe et al 2006). Suggested ways of developing awareness training include the use of focus groups with LGB people and the development of ‘train the trainer’ CD-ROMs (for example, Stonewall Scotland 2007).

However, the quality of awareness training can be highly variable and some researchers suggest further research that examines it from a critical perspective with clear outcome measures. In particular, some research suggests that such training can be imbued with mundane heterosexism (Peel 2002). Such training may benefit from better evaluation of it and research that maps what makes for effective training on sexual orientation issues.

14.3.3 Guidance on good practice

Reference to best practice guidance is given in each of the chapters on substantive themes preceding this chapter, so we have not reproduced it
here. However, two themes emerge from across the literature that may be pertinent to developing and disseminating good practice guidance.

Firstly, is the role that LGB people can have in reviewing good practice guidance to ensure that it is appropriate and relevant. As part of the Stonewall Scotland (2007), for example, the authors comment that Stonewall Scotland, the LGBT Centre for Health and Well-being and the Scottish Federation of Housing Associations (SFHA), developed a set of LGBT housing standards designed to address the social housing needs and concerns of LGBT people. The standards were drafted by the project team drawing on previous work done in this area and then reviewed by focus groups involving LGBT people across Scotland. Revisions were made based on the feedback from the focus groups. An electronic housing survey was also made available for people who were either unable or unwilling attend one of the focus groups.

Secondly, is the need to find ways to promote and share good practice. Once again, there was an emphasis on developing a government-supported, central, web-based resource bringing together advice and information from all major LGB-funded projects and the need to support local authorities to promote good practice in relation to LGB diversity and equality issues (LGBT Hearts and Minds Agenda Group 2008).
14.4 Conclusions and research gaps

Challenging prejudice and discrimination and building good relations

A lot of good progress has been made in understanding the prejudices and discrimination that LBG people face but it should not be assumed that everyone will understand the issues simply from their contact with them. There may still be a need to fill gaps in information and understanding at national and local levels.

Good progress had been made in developing a national strategy to challenge prejudice and discrimination in Scotland through the LGBT Hearts and Minds Agenda Group. It is less clear whether a similarly coordinated strategy was being developed in England and Wales. Where such strategies are developed it is important that they are visible. This may require a statutory duty for publicly funded bodies to promote equality based on sexual orientation.

Difficult relations were identified between LGB people and people of faith and difficult experiences for LGB people of faith. Tensions between LGB people and other groups are less well documented. A key role that researchers could play is to:

- map these tensions and conflicts;
- assist the EHRC to document tensions between potentially conflicting equality legislation;
- produce guidance on reducing tensions and promoting good relations.
Building and supporting capacity

It was suggested that capacity may need to be built in the LGB community in order to facilitate active involvement in consultation and furthering of equality agendas. In this respect mapping existing good practice in capacity building could be helpful. Guidance on supporting LGB networks and forums and support for central web-based resource bringing together information on projects that can assist public services and employers on equality matters are important recommendations for building community capacity.

Policies practices and training

Clear statements on equality by organisations, equality audits and monitoring of policies are all recommended as ways to promote the equality agenda in relation to sexual orientation. Clarification of legal responsibilities for local authorities, schools and employers in relation to auditing and monitoring is thought to be helpful in this respect. Consideration will also need to given to monitoring in other areas such as health and social care.

Awareness training and good practice guidance are also recommended as ways to promote the equality agenda. However, a need was identified to evaluate the effectiveness of awareness training and to identify examples of good practice. Examples of good practice in relation to the reduction of discrimination and promotion of equality also needed to be more effectively shared. Again, support for a central, web-based resource was raised.
15 RESEARCHING SEXUAL ORIENTATION – METHODOLOGICAL ISSUES

This chapter examines methodological issues in relation to researching sexual orientation that emerged from previous reviews and from the research literature covered in this review. The best review of methodological approaches to the study of sexual orientation was conducted for the Scottish Executive by the National Centre for Social Research in 2003 (McManus 2003). This appears to be the only methodological review of its kind. In the review McManus (2003, p. 8) argues that:

Appropriate and good-quality methods are necessary if quantitative research is to be representative, reliable and valid, and if qualitative research is to have depth, represent diversity and be able to map associations. Without these, there is no way of asserting that research findings reflect the real needs of LGBT communities, are able to inform complex policy and funding decisions, and should be taken seriously by potential funders.

Understanding what makes for good methodology is vital when assessing the robustness of studies. In this review wherever possible we have described the methodology of the studies or given an indication of their probable methodological robustness. A key problem in relation to previous research and reviews was that the methodological approach of the study or studies
referred to were not always transparent. This was a problem that was particularly acute in relation to database of abstracts and summaries of previous research. Since it was not possible to review the robustness of every study, this chapter examines discussion in the literature of what makes sound methodological research and gives examples of recent improvements or developments in research methodology relating to sexual orientation.

Encouraging greater discussion and clarity of methodology in research abstracts and discussion of findings should be a significant priority in future research on sexual orientation.

15.1 Definition and classification

Some key issues relating to the definition, classification and measurement of sexual orientation are discussed in chapter 2. The definition and classification of sexual orientation is intimately bound up with the way in which researchers approach the study of sexual orientation.

Comparable and relevant definitions of sexual orientation

One set of key issues relates to the way in which the sexual orientation of prospective research participants is conceptualised by researchers; their reflexivity and consistency in the way that they define sexual orientation within their studies; and their transparency in the way they describe such categorisations in their reports.

On the one hand, some researchers emphasised difficult issues associated with the definition of ‘sexual identity’ and the importance of not foreclosing
participation in studies through the overly restrictive use of the term ‘gay’ (Demo and Allen 1996; Robertson 1998): for example, by use of the term ‘non-heterosexuals’ (for example, Heaphy et al 1998) or by defining concepts as broadly as possible to remain inclusive (for example, using the term ‘same-sex couples’ in order to include people in same-sex relationships who do not necessarily identify as lesbian or gay – for example, Mitchell and O’Connor, forthcoming).

On the other hand, researchers emphasise that definitions must be ‘appropriate to the topic being researched’ and use categories that allow comparability with other research that is appropriate and relevant to the context of the research (McManus 2003, p. 7). An example of this approach was attempts to address definitions to key policy and legislative contexts through the use of ‘sexual orientation’ and ‘sexual identity’ in the current policy and legislative context described previously (see chapter 2, section 2.2) or to gain consistency in the definitions used to describe sexual behaviours, same-sex relationships or patterns of households. The principle issue, however, is that there should be ‘clear descriptions in research reports regarding what particular categories were used with respondents and how the categories being reported were derived’. Such categories should also be regularly reviewed by researchers and policy makers to ‘ensure that they are currently relevant and meaningful to the population being studied or consulted, as well as to other users of the data’ (McManus 2003, p. 7).
Recognising inclusiveness and intersectionality

Another issue of definition relates to the inclusiveness of the methodological approach and the recognition of diversity and intersectionality across sexual orientations. There is growing recognition that LGB people and heterosexual people do not constitute single unified categories and that individuals within those categories may be increasingly influenced by ‘hyphenated’ or ‘fractured’ identities (Harding 1986, p. 26). Keogh et al (2006, p. 4) state that ‘LGBT people are integral to all social or demographic groups including those based on social class, age, education, faith, ethnicity, migrancy, nationality etc. The needs of LGBT people will vary depending on which other social groups they belong to’. However, exactly what this means in terms of a methodological approach to research is rarely explored.

Keogh et al (2006, p. 4) proceed to examine three ways in which inequalities and needs relating to sexual orientation and diversity can be examined: for example, by looking at ‘groups which are already disadvantaged’; by examining the ‘social and cultural positioning’ of groups whose identities intersect with sexual orientation; or by examining ‘critical life stages’ where people experience need. However, they reject all of these approaches as problematic, arguing instead that investigating needs in an inclusive way ‘involves attending to the specificity of that need’. That is to say, researching intersectionality needs to be ‘considered in relation to the broader social factors in an individual’s life’ (Keogh et al 2006. p. 4.). Some examples of questions that might be asked on the intersection of sexual orientation with other identities using this approach are:
‘in what way might a Gay identity provide a Black Caribbean young man with greater life opportunities and in what way might it exacerbate his lack of opportunities?

• what are the resources that older Lesbians can draw on to counter isolation?

• in what way does the local education system perpetuate hatred of LGBT people in the local population?’ (Keogh et al 2006, p. 5).

Although most research in the review does not yet appear to have reached this level of complexity in its analytical approach, we found that researchers had increasingly begun to take into account the views and experiences of different subsections of the LGB community. This was particularly reflected in the way they sampled in order to try to include diversity or the way in which they reported their findings demonstrating different experiences across the LGB population. However, the situation is still not perfect, with some researchers still using convenience sampling and with others neglecting to report on diversity and intersectionality in their reports.

McManus (2003, p. 9) emphasises that ‘inclusiveness in research is something that researchers and funders need to actively incorporate into the first stage of developing a project’s design and research methodologies’. In quantitative research this can mean trying to gain a sample that is representative of the wider community and that includes stratified samples that allow for a diversity of experience. In qualitative research it means developing careful, purposive sampling that is inclusive of multiple identities.
and that maps a wide range of experience. In future, researchers may also need to consider when it is appropriate to conduct research on the LGB population as a whole and when it is important to prioritise research on specific subsections of the population (particularly when it is clear that they have been under-researched to date). Another consideration might be how to more effectively mainstream difference and diversity in the way that research questions are asked and findings are reported.

15.2 Sampling and recruitment

The problems involved in the sampling and recruitment of research relating to sexual orientation and the LGB community is fairly well documented in the literature. Overall, two main difficulties in relation to sampling and recruitment are identified.

The first, as discussed in chapter 3, is that there is no comprehensive official list that records a person’s sexual orientation or that includes all people who are LGB within specific national or local contexts. Given that a person’s sexual orientation is not immediately apparent, and the sensitivities around asking about it (particularly in public settings), this makes such sampling and recruitment difficulties all the more problematic (McManus 2003, p. 25). The second difficulty arises from the fact that LGB people are largely ‘concealed’ as a result of heterosexism and homophobia (McManus 2003, p. 22). Others refer to the ‘invisibility’ and ‘hidden’ nature of sexual orientation (Harrison 1996), a problem that is compounded for particular subsamples of the LGB population such as LGB people from BME communities, LGB people of faith
and for LGB older people, and so on. As a result there was a relatively wide discussion of the problems associated with achieving sufficiently large samples and satisfactory representative samples in quantitative research and, to a lesser extent, to achieve sufficiently diverse and purposively selected samples in qualitative research (for example, O’Connor and Molloy 2001; Gonsiorek et al 1991; Weston 1991; Webb and Wright 2001).

15.2.1 Quantitative sampling

In relation to quantitative research, random or probability sampling is the most desirable in order to achieve a representative sample from which results will be generalisable to a wider population. According to McManus (2003) there are two main methods for achieving such samples: selection from a comprehensive list of members of the relevant group; or screening of a population by asking a few brief questions to ascertain whether people from a wider community fit the criteria required for a particular study (in this case the correct sexual orientation). Yet, as alluded to above, the former approach is ‘precluded because no comprehensive list of LGBT people exists’. Although the latter approach has been applied (for example, Snape et al 1995; Gadd et al 2002), the costs of achieving a sample in this way are usually highly prohibitive, and are likely to produce high levels of under-reporting of homosexuality or non-response because of the sensitivities of asking questions on sexual orientation (McManus 2003, p. 25).

Given these problems, some researchers suggest that the best that can be done is to achieve as large a sample as possible with respondents being
drawn from as wide a range of sources as possible, in order to mimic the wider population and enhance the generalisability of survey findings (Gonsiorek et al 1991; Herek and Berrill 1992; McManus 2003, p. 24). This can also be complemented with quota sampling to help ensure diversity in the sample, for example, in polls of general population attitudes where estimates do not necessarily need to be as accurate or have confidence intervals calculated (Braunholtz 2000, cited in McManus 2003, p. 25). However, it remains the case that all survey research about the LGB population continues to be susceptible to some criticism because the absence of accurate population statistics means that it is not possible for researchers to use random probability sampling, which means that it is impossible to make inferences about the wider population.

Evidence suggests that a number of recent quantitative studies, particularly those commissioned by Stonewall, had begun to take these methodological issues seriously and to sometimes move beyond these minimum requirements. An example of a general population sample is that used in Stonewall’s survey of British attitudes to LGB people, *Living together* (Cowan 2007). In this case a professional polling organisation, YouGov Plc, used a combination of random and quota sampling of its panel of 115,000 people, achieving a representative sample of 2,009 adults. According to the authors, ‘an email was sent to panellists selected at random from the base sample according to sample definition, inviting them to take part in the survey and providing a link to the survey. The responding sample was weighted to the profile of the sample definition to provide a representative reporting sample’ (Cowan 2007, p. 20).
Another example is Stonewall’s study of lesbian and gay people’s experiences and expectations of discrimination, Serves You Right. In this case an email was sent to YouGov panellists selected because they had indicated that they were lesbian, gay or bisexual when they joined the panel (Hunt and Dick 2008, p. 4). However, although they achieved a large sample of 1,685 people, significant problems remain in that membership of the panel was voluntary and self-selecting and that no information was provided about the response rate to the initial invitation to take part in the survey or about the socio-demographic profile of the LGB panellists. Similar issues apply to Stonewall’s Gay British Crime Survey (Dick 2008) in that the respondents were recruited in the same way as the Serves You Right study, making it susceptible to the same criticisms.

Other Stonewall studies, such as Hunt and Fish’s (2008) survey of lesbian and bisexual women’s health, Prescription for Change, have also achieved outstandingly large samples for research on this population. However, the way in which the sample was recruited is not clear from the report. The results must still be interpreted carefully because of the fact that the respondents could not be randomly selected and we cannot be sure from the report how representative the respondents are of the wider lesbian and bisexual female population. Greater transparency in relation to the modes of recruitment and the profile of the sample would therefore greatly enhance the reading of such studies. Nonetheless, the size of the sample is a significant achievement for a study of this kind and a significant step in the right direction for survey research.
Another approach related to the problems of gaining adequate quantitative samples is to ‘piggy back’ on a large-scale random survey such as an Omnibus survey. For example, GALOP (1997) and Mason and Palmer (1996) argue that knowledge of homophobic hate crime could be greatly enhanced by inclusion of a unit of questions on the British and Scottish Crime Surveys (cited in McManus 2003, p. 25). More recently, the LGBT Hearts and Minds Agenda Group also recommended that the ‘Scottish Government and the Equality and Human Rights Commission continue to purchase a module on discrimination within the Scottish Social Attitudes Survey, on a four-year cycle’ and that it ‘should include questions on attitudes towards LGBT people’ (LGBT Hearts and Minds Agenda Group 2008). The advantage of this approach is that it also allows someone to answer questions based on a highly reliable sample. The disadvantage is that the number of questions that can be asked is limited. Other approaches to sampling and recruitment that have been used in quantitative research are discussed later in this chapter.

15.2.2 Qualitative sampling

The logic of qualitative sampling is different from that of quantitative sampling. As McManus (2003, p. 24) puts it, the ‘rationale in selecting those to be interviewed includes ensuring relevant diversity of coverage across certain key variables, rather than to select a sample that is statistically representative of the wider population’. The best qualitative studies, therefore, employed ‘purposive’ sampling where a range of factors, influences and experiences relating to the research question are identified and participants carefully
selected in order to ensure sufficient diversity in the sample to map the range of experiences, views or perspectives that might be expected in the sample. In this respect, the means by which participants are recruited is less important than the fact that recruitment was monitored to ensure that a sufficiently diverse range of experiences are captured in the sample. Quota sampling can then be applied to make sure that people are recruited to fit the range of criteria originally identified in the sampling strategy (for example, if it is noted that too many middle-aged people have been recruited the means of recruitment can be adjusted to target younger and/or older people). However, McManus notes that, in the past, not all qualitative studies were transparent about their criteria, or even whether any selection criteria were used. There was also an assumption that because a qualitative sample does not need to be statistically representative of the population as a whole that it also does not need to be systematic and deliberate (McManus 2003, p. 24). This is particularly pertinent as a criticism of many of the earlier qualitative studies of LGB parenting and relationships discussed in the chapter on families and relationships (see chapter 4, section 4.4).

We found examples of qualitative studies with well-articulated selection criteria and extremely carefully applied processes of purposive sampling and also studies in which selection criteria were poorly articulated and/or poorly applied. The former tended to give clear accounts of their sampling approach and any limitations arising from difficulties relating to their recruitment strategy. The latter, on the other hand, often made wide-ranging statements about the inferences that could be drawn from their studies without demonstrating the robustness of their sample or articulating any limitations.
that may arise from their sample or recruitment strategy. Such poorer studies often relied on convenience sampling, where the researchers simply accessed volunteers with little or no consideration of the biases this created in their samples. Such studies were also often limited in the amount of detail that they gave about the number of participants in the study (for example, number of participants overall or in focus groups), the range of experiences and views within their sample and/or the socio-demographic profiles of participants.

An example of a clearly articulated sampling strategy is Stonewall Cymru’s (2006) study of the housing needs of LGB people in Wales. In-depth interview participants were selected ‘on the basis that they represented a broad range of housing experiences and incorporated experiences and views of single LGB people, LGB couples, from a variety of Welsh locations and across different tenures’ (Stonewall Cymru 2006, p. 12). Another example of careful purposive sampling is seen in Mitchell and O’Connor’s study (forthcoming) of the impact of legislative changes on same-sex couples, such as the Civil Partnership Act (2004). In this study recruitment and selection criteria included the relationship of same-sex couples to civil partnership (for example, civil partners, intended civil partners, undecided about civil partnership, definitely does not want to be a civil partner), as well as other criteria such as gender, age, income, ethnicity, in order to achieve a diverse range of experience.

Multiple ways of recruitment (for example, through local authority registrars, community groups, advertising, a limited amount of snowballing) were then used and adjusted to meet specific quotas against set criteria. Additional efforts were made to contact groups representing disabled and minority ethnic
groups when it was clear in the early stages of the study that quotas for these groups were in danger of not being met. In a similar way, recruitment of civil partners was stopped when it became apparent that there was sufficient participants of this type and renewed efforts made to find people who did not want to become civil partners (for example, through renewed contacts with LGB organisations specifying the new requirements and a limited amount of snowballing).

15.2.3 Different approaches to sampling and recruitment

Given the difficulties of sampling and recruitment in studies relating to sexual orientation, and particularly LGB people, several authors note that it often helps to use a variety of recruitment methods (for example, Heaphy et al 1998; Martin and Dean 1993). In her review McManus (2003) describes a range of recruitments methods that can be used, each with different advantages and disadvantages. These are listed below with additional examples from this review. Notably, researchers rarely used a single approach, although evaluation of the success, failures and limitations of different recruitment strategies was not always included where recruitment strategies were described. One additional recent development worthy of note is the use of matched demographic comparison groups (see Rivers et al, 2008; Rivers and Noret 2008).

LGB pubs, clubs and events

Given that LGB people are a ‘hidden’ population, LGB pubs, clubs and social events (for example, Pride events, conferences) can act as a visible access
point to LGB people. Such spaces and events were used to distribute or promote surveys (paper and online), advertise that research is happening, and/or to recruit participants for face-to-face interviews. For instance, Robinson and Williams (2003, p. 8) describe the way in which they recruited people for their survey of the needs and experiences of LGB people in Wales through ‘areas and events where LGB people were likely to be present’. These included LGB events such as Cardiff Mardi Gras, several gay night clubs, Stonewall Cymru’s first annual conference, as well as events open to the general public that LGB people might attend, such as the St David’s Eisteddfod.

Such recruitment has been found to be particularly useful in the US and Australia, where LGB ethnicity specific events were run, for recruiting LGBT ethnic minorities (Battle et al 2002; Prestage et al 2000). More recently in Britain, Keogh et al (2006) used outreach workers and paid researchers to target specific venues for LGB minority ethnic groups and women’s venues in South London to promote their online survey of LGB needs in the London Borough of Lambeth (Keogh et al 2006, p. 11).

Although this is a targeted, easily accessible and affordable means of generating a relatively large sample size, there are significant concerns about this approach. Firstly, that it only accesses those people who are on the lesbian and gay ‘scene’; who are most ‘out’ about their sexuality; and who tend to be highly educated, literate, politically motivated and articulate (McManus 2003, p. 26; see also Julien et al 1999; Meyer 1995). At the same time it largely excludes specific groups within the LGB community such as
people who do not identify as ‘gay’, older people and the disabled. Over-representation of people drawn from the ‘scene’ can also lead to a negative picture of LGB people with ‘troubled histories’, for instance, of alcoholism and drugs use, which has been particularly problematic in the field of studies on health (Herschberger et al 1997; Martin and Dean 1993). Notably, a secondary analysis of the NATSAL survey (Johnson et al 2001) reveals that 22 per cent of men and 39 per cent of women who had sex with someone of the same-sex in the last five years had never been to gay bar, pub or club (McManus 2003, p. 26). One way to overcome this is therefore to balance recruitment through LGB pubs, clubs and events with recruitment through ‘non scene’ spaces, organisations and social groups (for example, Coia et al 2002; Pilkington and D’Augelli 1995).

**LGB media, organisations and direct mailing**

This approach makes use of the growth of lesbian and gay media through direct mailing inserts in newspapers, or magazines and advertising (Mason and Palmer 1996). It also uses the venues and membership lists of LGB organisations such as local community groups, interest groups or social groups. In their study of same-sex relationships Smart et al (2005) recruited their respondents through the gay press, lesbian and gay organisations, leafleting at venues and events and local LGB networks. Similarly, in a study of domestic violence in heterosexual and same-sex relationships Donovan et al (2006) made contact with over 220 relevant organisations.

The choice of membership lists and organisations is crucial. Using LGB magazines or social groups may only tap into LGB people who identify with a
lesbian or gay ‘lifestyle’, being subject to many of the same criticisms directed at recruitment through LGB pubs, clubs and events discussed above.

However, this has been balanced by specifically targeting the membership of non-scene organisations. For example, Robinson and Williams (2003, p. 8) used a number of ‘membership databases’ to disseminate their survey, including Stonewall Cymru, TUC Wales Lesbian and Gay Committee and the North Wales Lesbian Line. However, this still remains open to the criticism that only people who are inclined towards participation in groups, who may tend to be well-educated, articulate and middle class, are included.

**Internet and email recruitment**

The growth of the Internet and email opened up new forms of recruitment opportunities. In particular, the Internet has been used to advertise and conduct surveys, while the email membership lists of LGB organisations have been used to forward on information about research and to invite participation. A number of surveys have been made accessible via existing Internet forums and networks, usually as part of a wider multifaceted recruitment strategy (for example, Stonewall Cymru 2006). The 2001 National Gay Men’s Sex Survey used web-based recruitment (for example, gay.com) in addition to recruitment via LGB organisations, despite encountering technical challenges.

Recruitment is often via advertising ‘banners’ or ‘pop-up boxes’ on LGB websites, with this approach sometimes being primarily linked to carrying out web-based surveys (or surveys including a web-based component) (McManus 2003, p. 27). A recent example was the Lambeth LGBT Matters local needs
assessment, which used an online survey that was made available through a specific study-related website, promoted via paid banner advertising on three commercial websites (http://www.gay.com, http://www.gaydar.co.uk, http://www.gaydargirls.co.uk), via posters, post-cards and credit card styled mini-cards (Keogh et al 2006). Contact via the email lists of LGB organisations has also been used successfully to forward information about qualitative studies and to invite participation (Mitchell and O’Connor, forthcoming).

The benefits of these approaches are that they allow large numbers of people to be reached quickly and can help to reach some people living in rural areas. However, very little systematic work had been done in the literature to explore the possible biases introduced into the research by the use of the Internet and other electronic communications (McManus 2003, p. 8). For example, the vast majority of responses to Keogh’s et al (2006, p. 11) Lambeth LGBT Matters survey came via the Internet survey (499 compared to nine on paper), raising questions about whether this is a preferred method of response or whether certain people who are not online are more likely to be excluded? Dunne (2005, p. 6) notes in her study of gay fathers that access online did not appear to be linked to social deprivation – as ‘income did not appear a factor as the majority of unemployed fathers in the study had email access’. However, work still needs to be done in evaluating such modes of recruitment.

**Service providers and users**

Service providers have been used both to advertise information about ongoing research and to directly access people using their services. Where the purpose of a study is to evaluate experience of a particular service or
intervention, the most appropriate approach to sampling is to recruit from those who have had contact with the service or intervention (for example, Williamson et al 2001). A more recent development is the recruitment of people who may be accessing a service as a direct result of new equality legislation. For example, in their qualitative study of people who had made a claim against their employer on the grounds of sexual orientation discrimination, Denvir et al (2007, p. 39) recruited interviewees from the records of cases held by the arbitration and conciliation organisation ACAS. In some cases providers have also been asked simply to display posters or distribute information such as information cards at their offices or social venues (for example, Stonewall Cymru 2006).

However, if the purpose of the study is to assess the scope or reach of the service or evaluation or to study the effect of legislative changes more generally, then clearly recruiting only from those with contact with a service will lead to biases in the sample. Savin-Williams (1998) argues that recruiting gay, lesbian and bisexual respondents who are service users is likely to bias the sample towards those who are suffering, physically, socially and psychologically the most. Other commentators also note that over-representation of people drawn from ‘support groups’ has been found to present an overly negative picture of people with ‘troubled histories’ (Herschberger et al 1997; Martin and Dean 1993). It could also be argued that it is biased towards those who are in receipt of help (McManus 2003, p. 28).
**Snowballing**

In snowball sampling or snowballing, recruited participants refer the researcher to other potential participants who are eligible to take part in the study. This is a particularly useful approach when dealing with a particularly hard-to-reach group or with people who may be mistrustful of being approached by someone they are not familiar with or where it has proved difficult to recruit participants with like characteristics by any other means. The fact that snowballing tends to lead researchers to other participants who are similar to the one just contacted can have advantages and disadvantages. It can be beneficial if the research design needs to identify respondents who have had a particular minority experience (for example, Deren’s et al, 2001 study of male intravenous drug users who have had sex with other men) or if the aim of the research is to map social networks. Dunne (2005, p. 4), for instance, used snowballing as part of a wider strategy to achieve a sample for her study of gay fathers. She notes that ‘much time and effort was devoted to gaining the trust of and establishing contacts with gatekeepers, user groups and potential participants’ but that ‘participants were excellent propagandists for the research’. Similarly, Warner et al (2003) set out to explore the utility of snowball sampling in terms of accessing older gay men and lesbians and concluded that snowball sampling was effective in helping to identify individuals who could not easily be accessed through the ‘gay scene’.

The disadvantages of snowballing as a sampling technique are that it can lead to too many participants with similar experiences. Where qualitative studies are concerned, snowball sampling, unlike purposive sampling, does
not ensure that a diverse range of individuals are selected to participate in the study. This, in turn, can affect the data that is generated and can undermine the wider inferences that can be drawn from these studies. In relation to quantitative research it is also inappropriate where the aims of the research are to estimate prevalence of particular experiences or view (for example, local needs assessments) (McManus 2003, p. 29). One useful way to balance the effects of snowballing is, therefore, to limit the number of people linked along one chain and to use it only as part of a wider recruitment strategy (for example, Stonewall Cymru 2006).

Another criticism of snowballing is that it can be a slow and unreliable process that often hinges on a motivated first contact who, in turn, has a wealth of contacts. In their study of homeless gay and lesbian youth. O’Connor and Molloy (2001) found that young people who had settled down had lost touch with or did not know other young people who were homeless.

15.3 Methods and methodology

15.3.1 Overview

A range of quantitative and qualitative research methods were used in the studies of sexual orientation reviewed. In relation to quantitative methods these included reinterpretation and extrapolation from some official statistics (for example, Arabsheibani 2006); large- and small-scale surveys (for example, Hunt and Fish 2008; Stonewall Cymru 2006); content and thematic analysis of media content (Cowan and Valentine 2007); and statistical
analysis of case records in relation to employment tribunal decisions (Fitzpatrick 2007). The use of surveys was particularly evident in areas of investigation such as: attitudes to, and of, LGB people; patterns of needs and inequalities in health and social care; housing issues; and reporting of and attitudes to crime. Qualitative approaches included widely used methods such as in-depth interviews (for example, Burns et al 2006) and focus groups (for example, McLean and O’Connor’s 2003), as well as other less well-used techniques such as ethnographies (Price and Parker 2003) and email correspondences (for example, Dunne 2005). The use of such methods was seen virtually across all areas of research, although they are particularly evident in relation to the study of families, relationships and parenting and housing issues. Also, a number of studies used a case study approach deploying a range of methods (for example, Colgan et al 2006; Skeggs 2005). Consequently, there did not seem to be any issues in relation to the use of a diversity of methods to research sexual orientation.

15.3.2 Specific issues relating to methods and methodology

Issues relating to the use of particular methods are well covered in McManus’ (2003) previous methodological review of sexual orientation research. In this chapter we cover only those issues where discussion of methods and/or methodology generated a large body of work related to sexual orientation or where there appears to be methodological developments worthy of note. These were, principally, issues related to the need for improved administrative and large-scale survey data, the impact of sexual orientation on the conduct of interviews, and interesting methodological developments in research.
**Issues related to administrative and large-scale data collection**

It is notable across the review of all substantive themes that the absence of official, large-scale administrative and survey data was a significant stumbling block to the analysis of inequalities and discrimination based on sexual orientation. In her methodological review McManus (2003, p. 38) notes that, ‘while tailored primary research can allow for specific research questions to be explored directly, administrative data collected for other purposes may present a useful source for secondary analysis’. At the time of her review, she observes that ‘very few of these routine data sources include any measure of sexual orientation, identity or behaviour’ (McManus 2003, p. 38).

Keogh et al (2006, p. 3) also observe that ‘the Government does not collect appropriate data on the LGBT population’ so that we ‘know little of the size and variety of the LGBT population’ (see also Cant and Taket 2006). Despite significant development work by the ONS Sexual Identity Project (see chapter 2), this situation has changed very little to date. We also note that existing Census information on same-sex cohabiting couples, and administrative records on the number of civil partnerships, are poor proxy measures despite being some of the only official information relating to LGB people available (see chapter 2, section 2.3).

In this respect, concerns have been expressed about making any comparisons between LGB and heterosexual people on the basis of this information (for example, Black et al 2000), although some researchers had begun to try. For example, in their work on pay in Britain, Arabsheibani et al
(2006) use information from the Labour Force Survey to try to examine any
differentials between heterosexual and same-sex couples. They note that the
methodology used in the survey significantly underestimates the number of
same-sex couples at only 0.2 per cent of the adult working population. This is
because ‘it does not include those who are married and living with an opposite
sex partner or those who do not live with a partner, whether they have one or
not’; it also ‘does not include those who live with a same-sex partner but do
not reveal it in the survey’. However, in the absence of any better figures, they
argue that the subsection of same-sex couples identified by the survey can be
compared with a like sample among the heterosexual population, thereby
reducing ‘composition bias’ (Arabsheibani et al 2006, p. 18). Nonetheless, the
difficulties of working with such restricted subsections of both the LGB and
heterosexual population in terms of telling us anything significant about wider
pay differentials based on sexual orientation are immediately apparent. It can
also be argued that they are a poor substitute in the context of the need for
improved official data.

As we discussed in chapter 2, a significant methodological concern in relation
to inclusion of a question on sexual orientation on the Census is that it would
have a detrimental effect on response rates due to the sensitive nature of the
subject of sexual identity and possible respondent concerns about
confidentiality and disclosure in the context of a compulsory Census.
However, recent evidence gathered by ONS generally supports the view that
asking a question on sexual orientation does not affect the overall response
rate to surveys. Exploration of the reasons why people use ‘prefer not to say’
responses indicate that privacy and objections to being asked a question on
sexual orientation may be key issues but that other issues related more to methodological approach (for example, whether the question is interviewer-administered or self-administered; placing of the question in the survey) and understanding of the purpose of the question are also important. The research suggests that ‘prefer not to say’ responses could be reduced by better explanation about why information on sexual orientation needs to be gathered. They could also be reduced by clearer information about what confidentiality means in terms of the storage and presentation of data. It was also noted that the social and moral acceptability of asking a question on sexual orientation in the Census and surveys was likely to change over time (Betts 2008; Taylor 2007). Consequently, methodological work on gathering Census and other large-scale administrative data should remain a significant priority.

**Conduct of interviews**

A number of issues arose from the literature in relation to the conduct of interviews, both for survey and qualitative interviewing. First was the impact of the mode of administration on response rates to survey questions on sexual orientation. These issues are also discussed in more detail in chapter 2, although in essence refusal rates to the question on ‘prefer not to say’ responses were found to be lower when surveys were interviewer-administered rather than self-administered. Lower refusal rates for interviewer-administered questions were thought to relate to the fact that interviewers could help respondents understand the question, particularly for heterosexual respondents who were less familiar with the conceptual language of sexual orientation. They were also able to explain the purpose of
the question and why the data was needed. However, it has been argued that the fact that refusal rates are higher for self-completion surveys may suggest that there is an issue in relation to invasion of privacy and that from an ethical point of view a self-completion approach, when trying to gain an indication of prevalence of different sexual orientations, may be preferable. Further research is required before such conclusions can be fully drawn (Betts 2008).

Very little research had been done on the impact of the sex or sexual orientation of the researcher on research relating to sexual orientation or the experiences and views of LGB people about this issue (McManus 2003, p. 33). There has been some discussion about the value of ‘matching’ interviewers by sex. For example, Ross (2000) used only gay male interviewers in his survey of men-who-had-sex-with-men in Scotland. However, there appeared to be no discussion of such matching by sex elsewhere. By comparison there was a relatively wide discussion of the impact of sexual orientation in relation to qualitative interviewing. Spencer et al (1998) found no preference regarding the sexual orientation of the interviewer from their gay male respondents, but found that some lesbian respondents preferred a lesbian interviewer, or at least one that was not ‘anti-lesbian’.

From a different perspective some researchers argue that the sexual orientation of the interviewer can have a positive or negative effect on the interview encounter. For instance, Bradford et al (2001) argue that ‘although researchers of various sexual orientation and gender identities will contribute to this field, lesbian researchers have a unique perspective and an important
role to play’ (Bradford et al 2001, cited in McManus 2003, p. 34). Several gay and lesbian researchers comment on how use of their ‘self and insider status’ (Platzer and James 1997, pp. 629–30) can have a significant impact on their ease of access to participants and the ability to achieve a high degree of trust in qualitative interviewing (Dunne 1997). However, others note that ‘perceived commonalities’ between respondent and researcher can lead to relationships that are misleading and exploitative (Heaphy et al 1998, p. 456; Platzer and James 1997, p. 631). Additionally, if the respondent believes that they and the researcher share a common knowledge there is a danger that he or she will assume that the researcher already ‘knows’ what they mean and will not verbalise their experiences or views fully in qualitative interviews.

Where researcher and respondent do share the same sexual orientation it has been suggested that researchers should put in place clear ‘boundaries’ to ‘respect the unequal power relationship and the integrity of the research’. This involves avoiding suggestions that the researcher and respondent share the same views and generating ‘false hopes’ about the political outcomes of the research (Heaphy et al 1998, p. 466). Where an interviewee may possibly be known to interviewer, there should be a clear right to refuse the interview and to have another interviewer (Coxon et al 1993). Other research also suggests that the manner of the interviewer is more important in order to achieve positive interview encounters. This involves the interviewer being ‘warm, friendly, yet detached’, with their sexual orientation being relatively insignificant (Mitchell et al 1998).
**Methodological developments**

Although these methodological developments are not necessarily new or unique to research on sexual orientation they are worthy of note because they stood out from more commonly used methods such as surveys, in-depth interviews and focus groups. Common elements were that they were responding to a specific new legislative and policy climate (as in the analysis of sexual orientation employment tribunal cases or case studies of good practice employers) and/or to new developments in methodology that potentially make research on sexual orientation easier or more innovative (as in the case of the use of Internet recruitment or the use of email correspondence).

- Analysis of documents – work by the TUC, funded by the DTI, reviewing employment tribunal cases of sexual orientation discrimination was significant because of the fact that it emerged from a new legislative climate and depended on publicly recorded cases of discrimination. The work conducted by Fitzpatrick (2007) involved analysing published employment tribunal decisions and any relevant higher court judgements, as well as liaising where possible with ACAS, the Employment Tribunal Service and other sources to obtain additional information about cases that have been withdrawn, settled or otherwise disposed of. Another similar type of analysis was used as part of a wider research strategy examining appropriate services for people using social care. In this case the Commission for Social Care Inspection analysed a representative sample of Annual Quality Assurance Forms (400 in total) completed by managers of home care
agencies and care home, reporting the work they had carried out to make their services accessible and appropriate to a diverse range of people (CSCI 2008).

- Content and thematic analysis – an example of this type of research was carried out in order to analyse the BBC’s representation and portrayal of LGB people during their television broadcasting (Cowan and Valentine 2006). Stonewall researchers watched and recorded BBC One and BBC Two from 7pm to 10pm every other night for eight weeks over a period of two months, a total of 168 hours of peak time viewing. Programmes were monitored for anything of gay interest, including lesbian and gay people, gay characters or story-lines in fictional programmes, gay themes or features in factual programmes, use of gay terminology or insults, homophobia and mention of anything related to gay sexuality. The resulting data, both qualitative and quantitative, was analysed thematically. One significant problem identified in relation to this approach was the interpretation of positive and negative representation. The researchers provide the illustration of Daffyd Thomas in Little Britain (an effeminate character who is obsessed with his sexuality and who dresses in highly sexualised ways). The report notes that the irony of this sketch was appreciated by the London focus group, but not the less metropolitan groups.

- Use of the Internet and email – as discussed above, this was particularly seen in the use of professional polling organisations such as YouGov Plc to sample and recruitment general population and LGB populations for a number of surveys (for example, Cowan 2007; Dick
2008). Despite large samples, key methodological issues remained in that membership of the panel was voluntary and self-selecting and that no information was provided about the response rate to the initial invitation to take part in the survey or about the socio-demographic profile of the LGB panellists. Other uses of the Internet included recruitment for, and delivery of, online surveys and email correspondence as a method: for example, the Lambeth LGBT Matters local needs assessment discussed earlier in this chapter (Keogh et al 2006). By contrast Dunne (2005) used email correspondence to collect ‘as many individual stories as possible’. These ‘email dialogues’ often ‘extended over the course of the entire project’. Additionally Dunne suggests that they ‘afforded time for reflection, clarification and elaboration on both sides’. She also argues that this facilitated greater data collection and ‘avoided the need for transcription’. In order to ensure that the use of this approach was not overly biased towards people with access to computers, Dunne also completed her correspondence with telephone and face-to-face interviews (Dunne 2005, p.6).

• Case studies – there were several multimethod case studies that addressed particular themes or policies directly related to sexual orientation or aspects of LGB identity. For example, Skeggs (2005) studied the creation of dedicated gay spaces (‘gay villages’) in which LGB interests, services and businesses are concentrated. They compared the two locations of Manchester and Lancaster in order to examine, among other issues, perceptions of community safety. They employed a mix-method approach, comprised of interviews with key
local informants, a survey of a total of 900 plus local LGB people in the two cities, focus groups with local LGB people, and ‘citizens’ enquiries’ (interaction forums between key local informants and focus group participants). Another significant case study is that conducted by Colgan et al (2006) carried out with 16 employers in London and Yorkshire. The study involved the analysis of company documentation and reports; interviews with 60 management, trade union and LGBT network group representatives; a short survey and in-depth interviews with 154 LGB employees. Twelve of the 16 employers that agreed to participate in the research were members of the Stonewall Diversity Champion’s programme, with eight being listed within the top 100 employers in Stonewall’s Workplace Equality Index in 2006. This was interesting in that it facilitated comparison of different types of employment experiences for employees within the programme and outside it.

15.4 Ethical issues

Although it was clear that most research was conducted to high ethical standards there was very little specific discussion of ethical issues arising from research on sexual orientation. A notable exception to this pattern is Platzer and James’ (1997) discussion of methodological issues when conducting sensitive research on lesbian and gay men’s experience of nursing care. The authors raise the issue of how a lack of research resources can increase the risk of harm to both the researcher and the researched (for example, by jeopardising high-quality research) and how the way in which
research findings are disseminated can be potentially harmful to vulnerable participants. In addition McManus (2003, pp. 34–6) makes a contribution to the discussion of ethics in her methodological review of sexual orientation research. A number of key issues arise from these and other discussions.

**Balancing privacy and the completeness of data**

A key problem when researching sexual orientation is that it remains a sensitive subject, which some people believe should remain a private issue. Discussing sexual orientation often touches on a respondent’s most personal sense of self or aspects of their most intimate relationships. Research on sexual orientation can, therefore, sometimes be regarded as ‘intrusive’, with commentators suggesting that researchers need to consider how best to handle these issues and how probing they can be (Heaphy et al 1998, p. 464; Platzer and James 1997).

In survey research, the way in which survey questions on sexual orientation are worded is crucial in order to avoid refusals and missing data, and important work in this respect is being conducted by ONS (Betts 2008; see also chapter 2). Qualitative in-depth interviewing is often regarded as better at handling such sensitive issues because of greater opportunities to explain and clarify questions and to build trust and rapport between the researcher and respondent. However, researchers note that interviewees can ‘employ a variety of strategies during interviews, including silence, to protect the boundaries of disclosure’. It is important in this respect that respondents are clear in advance what they will be expected to discuss during the course of an
interview and that they have the right for these boundaries to be protected during the interview encounter (Heaphy et al 1998, p. 464; Duncombe and Marsden 1996).

It is also important, however, researchers recognise that research on sexual orientation is currently taking place in a context of rapid moral and social change. Some survey research suggests that individuals have become more aware of issues relating to sexual orientation in the last few decades and that they have become more willing to answer questions on it as it becomes a more recognised diversity strand (Betts 2008, p. 25; Aspinall and Mitton 2008, p. 67). Explaining the purpose of gathering information in terms of promoting equality may, therefore, help to reduce concerns about privacy and why the data is being collected.

Confidentiality, anonymity and protection from harm

McManus (2003, p. 36) states that ‘confidentiality and anonymity of data are key issues in social research’, especially when dealing with ‘sensitive areas like sex’ or where the sexual orientation of a respondent is concealed’ (see also Coxon et al 1993). Deliberate or accidental disclosure of an individual’s sexual orientation could lead to negative consequences such as victimisation or harassment. Research can also become a ‘threat’ to participants if it can be used to further stigmatisate or control their lives, with this especially being the case where there is ‘intrusion into the private sphere and over matters which are highly emotional or sacred’ (Platzer and James 1997, p. 627; Lee 1993; Seiber 1993). Ensuring that research data remains confidential and
anonymous are key to making sure that participants are protected from harm. One area that has received commentary in this respect is the reporting of qualitative interviews, particularly the use of verbatim quotations from transcripts. It is recommended that to preserve the anonymity of respondents, specific details – such as names, places or professions – which identify respondents may need to be omitted or changed in transcripts or the respondent given a false name or pseudonym (for example, O’Connor and Molloy 2001). The use of background information or ‘pen portraits’ to give context to quotations should also be carefully considered such that combinations of details do not make it possible to identify particular individuals.

**Informed consent**

Informed consent was less well discussed in the literature, although many studies did discuss providing information about the research prior to participation, seeking permission to access participant’s details or offering invitations to take part. Guidance on ethical standards in relation to informed consent, such as that offered by the Social Research Association, is widely available and usually contains detailed discussion of informed consent procedures. The minimum requirement is that, alongside informing respondents of who has funded a piece of research, information is also given on the purpose of the study, who will have access to the data, issues of what possible negative outcomes could result from their participation in the study, how the findings will be used, etc. (McManus 2003, p. 36).
One area of informed consent that was discussed explicitly was in relation to the use of observation. For example, 75 hours of participant observation were used in a Sigma Research study; *London’s gay sex venues (backrooms and saunas): an HIV prevention research and development project* (Keogh and Weatherburn 2000). McManus notes that, although such an approach ‘can produce very rich data, it is problematic from the perspective of ethical requirements of informed consent’ (McManus 2003, p. 31). This is because many different participants will come in and out of the setting and it will be difficult to gain the informed consent of each person to be observed without considerable inconvenience to the people involved and disturbance to the context.

**Diversity and inclusion**

Despite considerable efforts to include diversity in some areas of work on sexual orientation, the experience of inequalities and discrimination in particular parts of the LGB community still remain under-researched: for example, statistical patterns of inequalities and discrimination experienced by LGB people. However, those groups that remain under-researched are similar to those listed by McManus in her review in 2003. These include ‘lesbians and bisexual women, ethnic minority people, people with disabilities, younger and older respondents, and those living in rural areas’. As noted above, inclusiveness in research is something which researchers and funders need to actively incorporate into all stages of research design (McManus 2003, p. 9). It will also require specific, targeted research to address where there are major omissions in the research data.
Participatory approaches in research

There continues to be a lot of variation in research on sexual orientation in terms of the extent to which there is LGB consultation or participatory approaches in research. As has been pointed out, LGB organisations and venues are very much relied upon for accessing samples but they have much less involvement in ‘determining the research agenda, developing topic guides or questionnaires, or in the analysis of the findings’ (McManus 2003, p. 61). While it is being increasingly recognised as good and ethical practice to involve the subjects of research in the research process, it appears that very few studies tried to introduce participatory approaches in sexual orientation research. It seems that lesbian, gay and bisexual people are very much positioned as participants or respondents, as opposed to partners, within studies that explore issues relating to sexual orientation. Fenge (2002), although referring to sexual orientation only tangentially in relation to the issues facing older people, nevertheless raises the importance of participatory research as a way of making research more inclusive for minority groups among older people. In particular, Fenge (2002) underlines the importance of including service users in the knowledge and theory produced about their lives. Participatory approaches to research, including working in partnership with organisations representing subsections of the LGB community, may be one way of making sexual orientation research more inclusive.
15.5 Conclusions and research gaps

**Researching diversity and intersectionality within the LGB population**

Although there has been considerable movement in the literature in terms of researching and reporting on a diversity of experiences within the LGB population, research still mainly focuses on LGB people in an aggregate way. This can restrict what can be said about the experiences and issues facing particular groups within the LGB population (for example, minority ethnic groups and those with disabilities). Furthermore, bisexual people were, by and large, absent as a target group from the studies reviewed. Researching diversity and intersectionality would benefit from greater consideration by commissioners and researchers of when it is appropriate to conduct research on the LGB population as a whole, and when it is important to prioritise research on specific subsections of the LGB population (particularly where it is clear that particular groups have been under-researched in the past). Further consideration could also be given on how to mainstream difference and diversity in the way research questions are asked and the way that findings are reported.

**Greater transparency about sampling and recruitment of participants**

There were significant improvements in the sampling and recruitment of research participants in both quantitative and qualitative research. However, there remained pockets of convenience sampling that will limit the usefulness of findings. There was also a need for greater transparency in the discussion of methodology in reports and papers in relation to modes of recruitment and the profile of samples.
Broadening and evaluating the use of methods

A wide variety of methods were used by researchers. Principal areas requiring attention were: the need to prioritise the gathering of high-quality Census and/or other large-scale survey and administrative data; and the need to systematically evaluative the use of new methods of recruitment and methods, particularly the use of web-based surveys, online recruitment and email communications.

Ethical considerations

Although there was no evidence that ethical considerations were not being taken into account in the conduct of research, there was only limited discussion on the significance of sexual orientation in the conduct of research. Significant areas requiring further research and discussion are the issues of respect for privacy in a changing social and legal context and the impact of the sex and/or sexual orientation of researchers on the process of research, especially interviewing.

Participatory approaches

Although LGB people, organisations and groups are often involved in assisting researchers in facilitating research, their role in the design and conduct of research was limited. Very few of the studies reviewed had attempted to use more participatory approaches to the study of sexual orientation. Commissioners and researchers could use participatory
approaches as a key way to encourage greater inclusion and diversity within the research process.
ENDNOTES


2 The Integrated Household Survey will be a continuous population surveys that integrates the existing work conducted as part of the Labour Force Survey, General Household Survey, Expenditure and Food Survey, Omnibus Surveys and English Housing Survey. Since the survey will be made up of a number of existing surveys it will be the largest survey conducted in Britain to date. One aim will be to include a short core module, providing information on ‘census type socio-demographic variables’. See http://www.statistics.gov.uk/cci/nugget.asp?id=936.

3 The issue of expressing one’s sexuality is complicated by the fact of using proxies in some household surveys where one person provides information on behalf of another. The impact of using such proxies on disclosure of sexual orientation has not yet been sufficiently explored but will be investigated as a part of the ONS Sexual Identity Project (Betts 2008 p. 5).


5 For the purposes of this review we have separated transgender issues from LGB issues for this reason and because of the different equality legislation affecting transgender and transsexual people. Nonetheless, we recognise there will be circumstances in which LGB and transgender people will experience of sense of group interest and organise politically in this way.

7 The issue of sexual identity and representation also applies to trans people who may feel that their trans identity is a more important part of their sexual identity than their sexual orientation. However, the focus of this review is sexual orientation rather than sex or gender and these issues will be discussed in more detail in a separate review of trans issues.

8 Respondents were not offered the opportunity to respond to the question if the survey interviewer felt that the respondent would not be able to self-complete the answer or if privacy was compromised due to a third person being present. The questions were not asked in 15 per cent of cases, with the question being skipped most often with respondents who were older, from lower socio-economic classifications and people who were single.


11 Communication with NatCen as part of our involvement in the Sexual Identity project.


13 The one exception to this, the small-scale postal survey by the General Register Office mentioned in section 1.1.3, is generally regarded as too
problematic to draw a conclusion that a question on sexual orientation
should definitely not be included because of a small sample and low
response rate.

14 Issues relating to the reliability and utility of data produced by survey at
local authority level in areas with smaller LGB populations were also
discussed at a meeting to discuss the progress of the ONS Sexual
Identity Project held at the Royal Statistical Society on 13 February
2008.

15 Which formally allowed same-sex couples to apply to adopt in England and
Wales in 2005.

16 Which comes into effect in 2009.

17 Hostility towards LGB people and their families has been theorised in
relation to a number of different concepts, such as the existence of
LGB people largely outside and in opposition to processes of ‘social
reproduction’ (for example, Field 1995, Riddough 1990); ‘compulsory
heterosexuality’ (Rich 1993), the ‘heterosexual imperative’ (Wilton
1993) and the ‘heterosexual assumption’ (Weeks et al 2001).

18 Although current research being undertaken by the Qualitative Research
Unit at the National Centre for Social Research, and funded by the
Economic and Social Research Council, will explore these issues
(Mitchell and O’Connor, forthcoming).

19 Although some care must be taken in interpreting this statement given the
difficulties of accurately establishing the number of same-sex couples
at a national level generally.
20 These views are ‘assumed’ because there is yet no definitive evidence that LGB ‘lifestyles’ are worse than heterosexual lifestyles. The problematic nature of some of this evidence is discussed in the chapter on health and social care. It is interesting to note that the opponents of LGB parenting do not subject the health evidence they use to condemn LGB parenting to the same level of scrutiny that they give to the evidence that appears to support their case.


24 http://www.pinkparents.org.uk.

25 Parken (forthcoming) argues that Section 28 was effectively repealed a year earlier in Wales than in England. She notes that Welsh assembly circular (11/02) on Welsh assembly guidance, Sex and Relationships Education in Schools stated that Section 28 of the Local Government Act (1986) did not prevent ‘objective discussions of homosexuality’ in the classroom.


27 The Employment Equality (Sexual Orientation) Regulations in Scottish Colleges and Universities (2006); LGBT Youth Scotland.


30 The Stand up for us – challenging homophobia in schools resource,

31 The Joint Action Against Homophobic Bullying (JAAHB) project
    (http://www.intercomtrust.org.uk).


33 http://www.respectme.org.uk.

34 LGBT web-based resource to help young people who may be experiencing


36 Sigma Research, Vital statistics,

37 http://peace.brighton-hove.gov.uk/Intranet/CommitteeMgt.NSF/0/B2626C6BB73FB9F080257
    1880050F1BD/$File/Item+10+Count+me+in+Too.doc.

38 These briefing papers were written by Dr Julie Fish of De Montfort
    University as part of the Department of Health’s Sexual Orientation and
    Gender Identity Advisory Group’s (SOGIAG) work programme.


40 http://www.lgbthealthscotland.org.uk.

41 http://www.gladd.org.uk.

42 http://www.sportscotland.org.uk.


45 Golden Girls was a 1980s sitcom in which four elderly women lived
together as friends in a mutually supportive household.
46 Previous discussion has emphasised that it will not always be possible for people of the same age group to care for each other in old age. In this respect there is a need to build intergenerational care’ building bridges across generations’ (Age Concern, 2002 p. 9).

* The information in the report was accurate at the time it was written.

** www.stonewall.org.uk/educationchampions.

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Contacts

England
Arndale House
Arndale Centre
Manchester M4 3AQ

Helpline:
Main number
0845 604 6610
Textphone
0845 604 6620
Fax
0845 604 6630

Scotland
The Optima Building
58 Robertson Street
Glasgow G2 8DU

Helpline:
Main number
0845 604 5510
Textphone
0845 604 5520
Fax
0845 604 5530

Wales
3rd Floor
3 Callaghan Square
Cardiff CF10 5BT

Helpline:
Main number
0845 604 8810
Textphone
0845 604 8820
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www.equalityhumanrights.com
This report reviews the key evidence about the inequalities and issues that lesbian, gay and bisexual people face in Britain today. The review includes quantitative and qualitative sources of data on a wide range of substantive issues and published and unpublished materials, including policy reviews and best practice literature.

What is already known on this topic:

- Despite a significant growth of research evidence on sexual orientation, significant gaps remain, especially large-scale quantitative baseline data.
- Fear of prejudice and discrimination is widespread across a range of institutions and homophobic bullying in schools is endemic.
- Lesbian, gay and bisexual people can be reluctant to reveal their sexual orientation through fear of homophobia.

What this report adds:

- The report provides a wide-ranging and detailed account of the inequalities and issues that lesbian, gay and bisexual people face in areas such as education, employment, health and social care and public life. It includes specific discussion about measuring and researching sexual orientation.
- It underlines the continuing nervousness and reluctance to address sexual orientation in public policy and research and the major obstacle to measuring progress on tackling discrimination and equality that the absence of robust statistical data presents. The decision not to include a question on sexual orientation in the 2011 Census as ‘unsuitable’, highlights such reluctance and the sensitivities involved in bringing this issue into the public domain.
- The report argues that the recent introduction of legislation providing protection and improving rights on the grounds of sexual orientation creates a significant impetus for future research. Recent evidence suggests that prejudice against lesbian, gay and bisexual people in Britain is declining, but that homophobia remains entrenched within institutions and communities.
- While recent evidence points to tension at the interface of religious belief and sexual orientation, the review suggests that such conflict is overblown by high profile media cases and inflammatory reporting.
- The development of policy and practice on homophobic bullying and support for young lesbian, gay and bisexual people remains a key priority.
- Incorporating questions on sexual orientation into government surveys, the collection of administrative data and monitoring within organisations is a key priority.