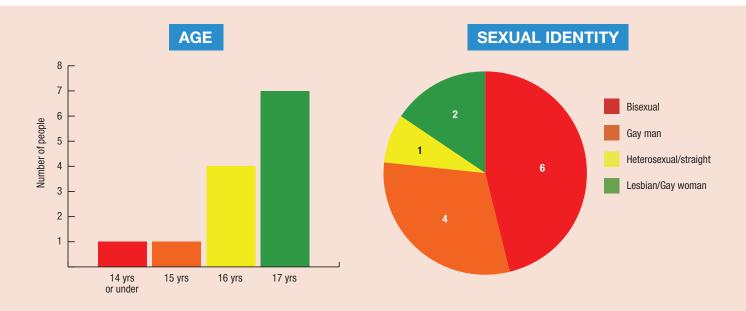


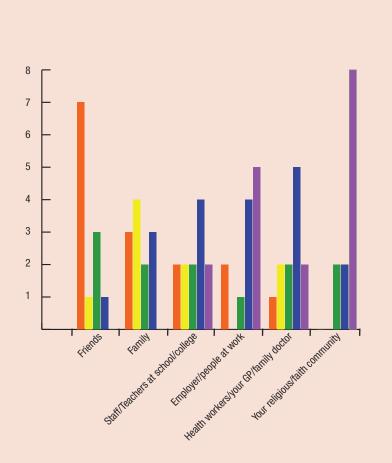
LGBT NEEDS ASSESSMENT

Summary of the key findings for under 18 years old

Seventeen individuals stated on the initial question that they were under 18, 13 individuals answered any subsequent questions. This analysis is based on these 13 individuals.



PROPORTION OF YOUNG PEOPLE WHO ARE OUT AND WHO TO



The group that the most individuals were 'out' to was their friends and very few individuals were out to their health workers

All Most

A few

None

Not Applicable

Three out of 13 survey respondents said they had had problems with their family because of their sexuality/gender identity. Eight out of twelve reported that they had experienced bullying, abuse or violence because of their sexuality or gender identity.

HOW BULLYING, ABUSE AND VIOLENCE BE CHALLENGED?

Suggestion 1:

Education in schools for pupils and teachers

"Better education, talking about sexuality not just sex. Seeing homophobia as bullying. Not having homophobic staff, one of my teachers refers to things as 'that's gay' how are the kids supposed to learn when the teachers do that????"

Suggestion 2:

Education for the general population

"It isn't just young individuals but older individuals who also need to be educated."

Suggestion 3:

Health advice and information

Mixed views on whether specialised literature was required or general literature, with an LGBT representation.

Suggestion 4:

Safer streets

"Make the 'Hate crime' official."

Suggestion 5:

Improving young LGBT people's experiences in education settings

"Miss X did an amazing sex education class. She talked about all of the sexual scale from straight to gay, as well as the emotional side of everything. A lot of the homophobes in school actually came up and apologised to me after class. I love Miss X."

MENTAL HEALTH

Seven of the 13 survey respondents had experienced mental health problems, two were 'unsure' and only three had never experienced any mental health problems.

AWARENESS OF YOUNG PEOPLE LGBT SERVICES

Half of the survey respondents said that they were aware of a LGBT health and social care services or community organisation in Wirral or Merseyside. Three individuals were aware of the 'Work It Out' LGB youth group at Brook and had attended. Three had also heard of THT.

IMPROVING SERVICES FOR YOUNG LGBT PEOPLE

Provide more social events, support groups and improving the attitudes of individuals on Wirral. Better support services and a greater acceptance of those with a trans history was also felt to be important.

"Advertising health campaigns in magazines and TV."

"Able to use female (or applicable reassigned gender) toilets in sexual health services."

"More understanding of/for those with a Trans history."

"Improve people's attitudes."

"More social clubs or help clubs, more help services"

IMPROVING ACCESSIBILITY AND APPROPRIATENESS OF MAINSTREAM SERVICES

Recommendation	Actions	Outcome/s
Equip health and social care staff with the skills to work more sensitively with their LGB&T patients.	Appropriate validated/best practice benchmarking tool to be reviewed and selected by consensus agreement. Review services against a validated benchmark tool.	User friendly services that employ friendly and non-judgmental/non-discriminatory professionals. Quick and easy referral processes into health and social care services. Increase access/uptake of health and social care services.
Health and social care services to comply with the Equality Act 2010 (to include monitoring for protected characteristics, including sexual orientation and gender identity).	Review service monitoring forms to identify gaps in recording. Review 'Everything you always wanted to ask about sexual orientation monitoring but were afraid to ask'. A best practice guide to monitoring sexual orientation monitoring commissioned by NHS North West, aimed at the public sector carrying out monitoring of staff and service users: www.lgf.org.uk/policy-research/SOM/	
Health and social care services to comply with the Equality Act 2010 (to include monitoring for protected characteristics, including sexual orientation and gender identity).	Revisit diversity training to ensure that it raises awareness of how to effectively meet the needs of LGBT people.	Greater awareness and access of local health and social care services.
Raise profiles of local LGB&T services with LGB&T people and other mainstream services.	Scope training and promotional materials focusing on LGB&T young people, families and same sex couples. Scope/map local e-media/websites to use as promotional tools. LGB&T specific health promotion in targeted venues. General health promotion literature with LGBT representation and distribution into mainstream outlets/services.	Greater uptake/access of local health and social care services.
Ensure there is an effective transgender care pathway.	Review evidence base for pathway. Promote/raise awareness of pathway with community and health care professionals via appropriate networks and programme leads.	Greater awareness of the pathway and clarification of its purpose for both staff and patients.
Include LGB&T in local service re-design/development.	Targeted inclusion of LGB&T people in consultations about service design/development. LGBT population to be able to consider specific needs e.g. include LGB&T people in existing training packages with signposting to advice, websites.	To put measures in place to meet the specific needs of LGBT people from black and ethnic minorities, mental health needs, disabilities.

SUPPORTING POSITIVE MENTAL HEALTH

Recommendation	Actions	Outcome/s
Increase access and availability to social groups. Social media/e-media/virtual community inclusive of all ages.	Event or venue to facilitate initial local contact.	Reduced social isolation.
	Facilitate setting up of local/Wirral LGB&T forum. Map current provision/activities.	Establishment of networks away from pubs and clubs.
	map durioni providioni addividiodi.	Diverse range of activities e.g. gay literature book clubs, walking groups.
Increase access and availability to counselling support networks/systems.	Map local and Merseyside provision of LGB&T trained counsellors.	Improved knowledge for GPs to signpost to local services (i.e. Brook, Age UK, Sahir).
	Facilitate the setting up of family/parental support for those families who's children who are LGB or T.	Increased uptake of specialised services.
Training for health and social care professionals to focus on the health issues that specifically relate to LGB&T people.	GPs/Healthcare providers: Review 'Pride in Practice' (LGF& NHS North West). www.lgf.org.uk/Our-services/pride-in-practice	LGB&T champion within different health and social care settings who consistently educate the wider group.
	Review Lancashire charter mark scheme called the 'Navajo Mark'.	One charter/GP healthcare guidance inclusive of LGB&T to be championed to all healthcare settings.
	Adopt a 'standard of care' across Wirral for treatment of LGBT people.	Assurance that lesbian, gay and bisexual patients are treated fairly and
	Design a bag of resources to support GPs/healthcare providers.	able to discuss their issues openly with their GP or healthcare provider.
Review existing mental wellbeing Policies/strategies.	Services to identify if Policies/strategies have had a Mental wellbeing impact assessment carried out to identify impact on LGB&T communities.	Adaptation of existing mental wellbeing policies.
Raise profile of promoting positive mental wellbeing across LGB&T communities.	Social marketing campaign to focus on general stigma e.g. Challenging hate crime.	Reported increased wellbeing.
	Promoting wellbeing; including positive physical and mental health.	Reduced lifestyle risk in LGBT groups.
	Lobby/advocate requirements to report hate crime and discrimination as part of the Equality Act 2010.	

CHANGING CULTURE AND ATTITUDES

Recommendation	Actions	Outcome/s
Use sport and the arts as a vehicle to host messages.	Challenge the 'typical' Wirral family in messages by using images and examples of families involving same-sex parents/families. Work with local sports clubs e.g. Tranmere Rovers.	Change perceptions of the typical family
Anti homophobic/transphobic bullying policies in schools and workplaces.	Take findings to WASH and promote anti-homophobic bullying to influence head and governors.	Embedding of equality and inclusion in school and workplace environment.
	Learning from areas of good practice (locally).	Review PSHE for inclusion of LGB&T issues.
	Review Healthy Schools Initiative (HIS)/standards to see if these policies are included.	
	Review HIS to identify if there is adherence to these standards in practice.	
In partnership with LGBT groups, influence PCT policies to include LGB&T issues.	Participation in Multi Agency Risk Assessment Committee (which looks at Hate Crime including schools).	
	Use Safeguarding issue to promote education of LGB&T issues.	