It’s OK to be you.

How do the ‘Coming Out’ experiences of young lesbian, gay, bisexual transgender and questioning (LGBTQ) people impact on their mental health.

November 2016

With thanks…

Thank you to all participants; for your openness in completing the questionnaire and for taking part in the focus groups, for demonstrating courage and resilience despite challenging “Coming out” experiences, and for being role models by sharing your feelings and describing events for the purpose of this report.

Summary

In 2016, 2BU-Somerset conducted their ‘Coming Out’ survey to extend understanding of the impact of homophobia and internalised oppression and to investigate the potential impact this has amongst young people who identify as lesbian, gay, bisexual, transgender and questioning (LGBTQ).

This data provides an insight into the additional challenges young people who are LGBTQ may face such as stigma, societal discrimination and homophobia which can lead to negative mental health outcomes such as psychological distress and self-destructive behaviours.

This report highlights the impact of minority stress, raises implications for professionals working with young people who are LGBTQ and indicates the level of support needed by some young people responding to issues relating to gender identity and sexual orientation.
2BU-Somerset is the only organisation of its kind in Somerset providing targeted support for young people who identify as LGBTQ.

The organisation has been established for over thirteen years providing professional support and guidance should any issues emerge as young people come to terms with their gender identity or sexual orientation. This support is in the form of a regular group meeting, peer support, liaison with schools and colleges and by establishing links with other organisations such as youth clubs, child and adolescent mental health services, school nurses, counsellors amongst others. Young people can be referred by any one of these organisations as well as being able to can refer themselves. Young people seeking support from 2BU are in many cases struggling to come to terms with their sexuality, gender identity or ‘coming out’.
Introduction.

A valuable insight into the potential impact of ‘coming out’

For this report young people who identify as LGBTQ consider their ‘coming out’ experiences, provide examples of homophobia and comment on how this has affected them in their day-to-day lives.

The results provide a valuable insight into the potential impact of ‘coming out’ and the experiences of internalised homophobia amongst young people who are LGBTQ and we have the following recommendations:

- Raise the profile of the support needs for some young people who identify as LGBTQ.
- Share findings and reflections acquired as a result of this (and other studies) with professionals, service providers, commissioners and stakeholders across Somerset,
- Inform the practice of professionals supporting young people who are LGBTQ.

“Coming Out is not necessarily a one off event”

‘Coming out’ is a term used to refer to the point at which a person decides to tell another person about their gender identity or sexual orientation. This process is considered to be a vital part of accepting who you are as a person and can be a liberating and a positive experience (Pace 2013).

For some people however, the ‘coming out’ process can be less positive. Some people may experience discrimination, feel isolated, face rejection or victimisation and harassment and it is worth remembering that the ‘coming out’ process is “not necessarily a one off event. The stress that ‘coming out’ can bring may result in an individual seeking support and this highlights the need for research to inform the support process.
Participants were asked to report on their personal or witnessed experience of homophobic, biphobic and transphobic bullying.

The expectation of threat or the imagined possibility of negative events can affect an individual’s ability to function socially and/or academically and can undermine both motivation and identity. Stress can occur as a result of the ‘threat’ of a harassment or victimisation and not necessarily as a direct result of a prejudiced event.

85% of respondents indicated that they had either been bullied, they had witnessed bullying or both. When asked if they had reported these incidents, only 32% of young people had reported these incidents to members of staff at school or at college, others indicated:

“I got some grief from my head of year in school and got bullied by my class mates but I never reported it as I was too scared too”.

“This [homophobia] was reported, and dealt with, but it took a lot of bravery to stand up for myself, especially when your deepest feelings and who you are has been openly criticised”.

“I used to have people wait outside school to beat me up and stuff. I got used to it eventually, you come to expect that it is going to be like that. One of my friends did stick up for me. I never reported it cause well, I did report it once and the school said it’s not my problem because I wasn’t on school site”.

“When I first joined school I had rocks thrown at me for being a lesbian. I also got into a couple of fights in school too”.

“I got bullied in primary school for it, I got thrown into walls. I wore boys clothes in primary school and got bullied for it.

I have not witnessed bullying 15%
I have been bullied 45%
I have witnessed bullying 27%
I have been bullied and witnessed bullying 13%
Young people who are LGBTQ provide an account of the prevalence of depression, alcohol misuse and drug misuse, self-harm, suicidal ideation and implications for sexual health.

Young peoples experiences.

The following data provides indication of the impact that the coming out experiences and homophobic, biphobic and transphobic bullying (HBT) may have had on the mental health and wellbeing of young people who identify as LGBTQ.

The anticipation of a stressful event, the continuous attention this anticipation requires and concealing ones sexual identity are all considered additional factors associated with negative mental health outcomes for LGBTQ people.

From the 2016 ‘Coming Out’ Survey

Have you personally experienced?

“'Well from every single angle, you get pictures and images, you know, everybody’s saying in the media your going to find somebody of the opposite gender and you’re going to live happily every after. …When you realise you are a different you know, gay you just shut down while you work it out...”
Young people told us that they had experienced low mood and depression and considered this to be as a result of ‘coming out’ or their experiences of homophobia, biphobia and transphobia. Participants also stated they had been prescribed medication by their doctor for the treatment of depression.

“I kept it inside, I'm not good at expressing my thoughts, I would probably have made a mess of it [Coming out] if I’d tried to say something. I got upset”.

“Well I feel quite scared of what other people think, you could be quite confident in yourself but once someone tells you so many times that you are not worth anything you start believing it”.

One respondent shared a specific account as to their use of alcohol and/or drugs and confirmed this to be a coping strategy to ameliorate the stress that they associated with their sexual orientation.

“The impression I get of a lot of the gay scene sort of does revolve round those sort of activities [alcohol] if you want to have a good time”.

“Well I’ve been told gay is wrong so often and I know I’m not supposed to do drugs (Pause) I can’t help who I am can I? And the drugs, well that is about control, or loss of (Pause) and I can control that”.

One young person provided further illustration to support the importance of family relationships and connectedness. The young person made a clear link between their use of drugs and alcohol and the difficulty in ‘coming out’ to family.

“It’s before you come out as well, er you’re hiding who you really are. I got involved [alcohol and drugs] It’s, (Pause) it is very difficult, you know, trying to hide from your parents”

According to Young Minds “6-8% of young people are reported to self-harm or impose pain on themselves”. Of the young people surveyed for our 2016 “Coming Out” survey, 76% reported deliberate self-harm. We do need to operate caution in order to avoid generalised comments and remember there are many complex reasons behind any act of self-harm. However young people surveyed said:

“I don’t think its all about being gay as such or lgbt its more about how lgbt people are treated, cos if they were treated in the same way as straight people it wouldn’t cause us to self harm or what ever”.

“It did help for a bit when I felt really bad about being a lesbian, I was just depressed and lonely and didn’t understand my feelings that’s
Suicide

According to the online questionnaire 47% (n=52) of young people who identify as LGBTQ taking part in this survey have attempted suicide. This is a higher figure than the 23% of LGB young people surveyed by Stonewall in 2012 and 7% of all young people aged between 15-19 reported by the Samaritan’s in 2013.

“That sounds like me, I get told to kill myself all the time by everyone, I should [Pause].”

“Even in college, some one told me to get aids and die… I might as well”

“Well the messages about who you are, like gay is bad and then you have really low self worth and you just don’t feel like you are worth anything then like not being here is all you think about… attempting [suicide], Something I did”.

It is difficult to extrapolate conclusions about the relationship between sexual identity and self-harm or suicide ideation for this report however there is ample evidence to illustrate the excess stress associated with stigma, alienation, isolation and problems with self-acceptance which have the potential to have a greater impact on mental health and well-being.

Young people who are LGBTQ are therefore more vulnerable to self-harm, suicide ideation and attempt.

If young people who are LBGTQ are at risk of excess distress, it is vital that professionals and policy makers are aware of the factors that can reduce this stress in order to improve their mental health and well-being. Consideration should be given to both the individual in order to manage and cope with the stress as well as attention given to the environment where the stress exits such as school, at home or other social situation, illustrated by one survey participant:

“Having someone to talk to and rationalise something in your own mind and have a proper conversation about it and slot the pieces together instead of just having the pieces spinning around in your own head, that’s not good for you”.

“… homophobia or internalised oppression may have an impact on the lives of young people”
In Summary:

With the information shared in this report the author hopes to:

- Develop the support model for young LGBTQ people in order to make the most of the resilience and coping strategies already identified by each individual.
- Explore affirmative approaches and promote self-acceptance in order young people who are LGBTQ can explore their identities in a healthy manner.
- Inspire and inform others, in particular those who can become role models for LGBTQ young people.
- Champion other professionals and gather local support and expertise in order to support such a tailored intervention or support programme for young people who are LGBTQ and struggling with their gender or sexual identity.
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