



YOUTH CHANCES:

Integrated Report

2016





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SECTION A:

Summary



Youth Chances

This document provides an overview of the key findings from this five-year ground-breaking research project about the experiences of lesbian, gay, bisexual, trans and questioning (LGBTQ) 16-25year olds in England funded by the Big Lottery Fund and conducted by METRO Charity in collaboration with Ergo Consulting and the University of Greenwich.

The project surveyed 7,126 young people aged 16-25. Of these 6,514 were LGBTQ young people. 612 were heterosexual non-trans young people and 956 were trans young people. 29 commissioners of services for young people and 52 relevant service providers across England were also surveyed.

The findings show high levels of discrimination, abuse and mental health issues that young LGBTQ people face which indicate a need for more to be done to improve the lives of LGBTQ young people.

Being different

Over half of LGBQ respondents (53%) knew they were LGBQ by the age of 13. Over half of trans respondents (58%) knew they were trans by the same age.

When coming out as LGBQ or trans, over four fifths of LGBQ respondents (81%) and nearly two thirds of trans respondents (62%) told a friend first. Over a quarter of LGBQ young people (29%) have not told their mother, nearly a half (45%) have not told their father, and 5% have not told anybody.

Approximately half of trans respondents have not told parents or siblings that they are trans and 28% have not told anybody.

Young people tell us that they most want emotional support to help them when they are coming out but most are not getting it.

The second most important thing to them is to meet other LGBTQ people and again over half of them did not get this opportunity.

Participation

LGBTQ young people are twice as likely not to feel accepted in the area where they currently live, compared to heterosexual non-trans young people.

59% of LGBTQ young people that would be interested in joining a religious organisation have stopped or reduced their involvement owing to their sexuality or gender identity.

Over a third of LGBTQ young people (34%) are not able to be open about their sexuality or gender identity at a sports club they are involved in.

Staying safe

73% of the LGBTQ sample agreed that discrimination against LGB people is still common and 90% of the LGBTQ sample agreed that discrimination against trans people is still common.

About three quarters of LGBTQ young people (74%) have experienced name calling, nearly a half (45%) have experienced harassment or threats and intimidation and almost a quarter (23%) have experienced physical assault.

88% of LGBTQ young people do not report incidents to the police and when cases are reported only 10% lead to a conviction.

29% of LGBTQ respondents reported domestic or familial abuse, compared to 25% of the heterosexual non trans group. Over a third (36%) of LGBTQ respondents cited their sexuality or gender identity as at least a contributing factor in the abuse.

Almost one in five (18%) LGBTQ young people have experienced some form of sexual abuse, compared with one in ten (11%) of non-trans heterosexuals in our sample. Most LGBTQ respondents who have experienced sexual abuse (79%) have not received any help or support.

Nearly one in ten LGBTQ young people report that they have had to leave home for reasons relating to their sexuality or gender identity.

Enjoying and achieving

Nearly half of LGBTQ young people (49%) reported that their time at school was affected by discrimination or fear of discrimination. Consequences reported included missing lessons, achieving lower grades, feeling isolated and left out and having to move schools are all reported.

61% reported name calling because they were LGBTQ or people thought they were. This figure includes the experiences of heterosexual non-trans respondents: it is an issue for all young people.

About one in five LGBTQ young people experience physical attack at school on account of their sexual identity or gender identity. The majority do not report this and only a small proportion of those who do experience resolution. For some reporting the abuse means that it gets worse.

Around two thirds of LGBTQ young people say they learn a lot about relationships and safer sex between a man and a woman, compared to less than 5% who say they learn a lot about same sex relationships and safer sex.

89% of LGBTQ young people report learning nothing about bisexuality issues and 94% report learning nothing about transgender issues.

Only 25% of LGBTQ young people report that they learned anything at school about safer sex for a male couple.

Health & wellbeing

Less than one in five LGBTQ young people (18%) report that school provided any useful preparation for happy and healthy sex and relationships. It appears that respondents found what was missing from their peers: over four fifths of LGBTQ respondents (84%) say talking with friends and partners was useful.

Nearly two thirds of LGBTQ young people (65%) think their school supported its pupils badly in respect of sexuality or gender identity. Schools scored low in terms of having specific things in place that would demonstrate that support: little awareness amongst young people of school policies to protect LGBTQ young people; only a very small proportion reporting seeing affirmative posters representing sexual

and gender diversity or access to other resources such as books; little awareness of any links with LGBTQ support groups and organisation outside school.

Economic wellbeing & career success

(15%) of LGBTQ young people report that their time at work has been affected by discrimination or fear of discrimination about their sexuality or gender identity. This drops further to 10% of LGBTQ young people who report that their time at university was affected.

The level of reported name calling is also lower in these settings: 18% of LGBTQ young people report name calling at university and 10% report name calling at work.

Gay male respondents were more likely to have ever had a sexually transmitted infection compared to all other sexuality groups. Whilst gay men made up 30% of the survey sample, they accounted for over half of respondents who had ever had an STI and 67% of those who reported repeat STIs.

59% female respondents reported thinking that they are overweight, compared to 44% of male respondents. Women also report higher levels of eating problems, with greater proportions overeating, undereating, overeating and then vomiting and refusing to eat.

42% of LGBTQ respondents report going for medical help for depression or anxiety, compared to 29% of heterosexual non-trans respondents.

Over half of LGBTQ respondents (52%) report self-harming, either now or in the past. This compares to 35% of heterosexual non-trans young people.

44% of the LGBTQ respondents report having ever thought about suicide. This compares to 26% of heterosexual non-trans respondents.

Support

Only a minority of areas of England appear to have services that are sensitive to the specific needs of LGBTQ young people.

Commissioners indicated local leadership, young people's involvement and the implementation of diligent commissioning processes, including an evidence base, as the key drivers for improving policy.

Key findings

1. All respondents perceive that discrimination against LGBTQ people in general is still common and this is confirmed by the higher levels of discrimination, and disadvantage that young people experience.
2. LGBTQ young people feel substantially less accepted in their local community than their heterosexual, non-trans counterparts particularly in religious organisations and sport.
3. LGBTQ young people experience significantly higher levels of verbal, physical and sexual abuse.
4. Nearly 1 in 10 of LGBTQ young people (8%) have had to leave home for reasons relating to their sexuality or gender identity.
5. Most young LGBTQ people feel that their time at school is affected by hostility or fear, with consequences such as feeling left out, lower grades and having to move schools. Most report that their school supported its pupils badly in respect of sexuality or gender identity.

6. Schools also neglect areas that are known to be public health concerns. Sex and relationships education is not inclusive of LGB relationships and does not provide young people with the emotional and sexual health information they need. This is a particular concern for young gay and bisexual men who are at higher risk of STIs and HIV.
7. LGBTQ young people experience less discrimination at university and work, which are also rated as environments that are much more tolerant and supportive than school.
8. LGBTQ young people report significantly higher levels of mental health problems including depression and anxiety, self-harm and suicidal thoughts. High rates of poor mental health were found in the whole sample, presenting a concerning picture in the youth population at large.

9. Trans young people face the greatest levels of disadvantage and discrimination and report lower overall satisfaction with their lives. 36% of trans respondents agreed with the statement 'In most ways my life is close to my ideal', compared to 47% of LGBQ respondents and 51% of heterosexual non-trans respondents.

10. It is clear that the needs of LGBTQ young people for support and help are great yet only a minority of areas in England have services addressing the specific needs of young LGTQ people and there is little evidence of local service commissioning for the specific needs of LGBTQ young people.

SECTION B:

Findings

Authors: Dan Baker, Patricia Durr
and Peter Scott

Editors: Greg Ussher, Elizabeth West,
Elana Covshoff, David Naylor
and Chris Markham



Introduction

This report outlines what we know about the experiences of lesbian, gay, bisexual, trans and questioning (LGBTQ) 16-25 year olds in England – as reported by young people themselves. It comes from a five-year ground-breaking research project funded by the Big Lottery Fund and conducted by METRO Charity in collaboration with Ergo Consulting and the University of Greenwich. The project surveyed 7,126 young people aged 16-25, making it the biggest, most representative and robust survey of its kind. The project has also surveyed 29 commissioners of services for young people and 52 relevant service providers across England. Full reports of the survey of 16-25 year olds, survey of commissioners and survey of service providers present comprehensive accounts of methodology, data and findings. Further reports of the follow-up survey of commissioners and follow-up survey of service providers provide information on the impact of the findings on commissioning and delivery of services for LGBTQ young people so far.

The findings show high levels of discrimination, abuse and mental health issues that young LGBTQ people face indicating a need for more to be done to improve the lives of LGBTQ young people, whether we are involved in the day to day lives of young people as parents or carers, family members, teachers, youth workers, or we are shaping the responses and support young people can access as providers or commissioners of services or policy makers. Our young people are badly served. While the initial findings from the Youth Chances research published in 2014 have already made an impact, we hope that the comprehensive evidence provided leads to further action.

In 2014 we published a summary report representing the first-cut analysis of responses from the survey of young people. This was followed by two reports in the same year detailing the analysis of surveys of commissioners and service providers. A further two reports in 2015 detail the findings of a follow-up survey to commissioners and providers to assess the impact, if any, of the first set of reports. While we intend that the data be used for further analysis in order to identify and respond to further need of sub-groups within the LGBTQ population, as well as at regional level, this report summarises the research and its impact at the end of the five-year project.



Background

Youth Chances was a social research project aiming to identify the needs of LGBTQ young people and improve the commissioning and provision of services to meet their needs. Its starting point was that not enough was known about the specific needs of this group of young people – their experiences are not routinely captured at local, regional or national levels. METRO Charity, like other organisations providing direct services to young LGBTQ people, understands the significant challenges facing them. Youth Chances' aim was to understand whether LGBTQ young people fare significantly worse than their heterosexual non-trans¹ counterparts in respect of their health, wellbeing and life chances; what specific deprivations, exclusions or under-achievements LGBTQ young people experience; what support is available to them and what more needs to be done.

With this in mind we looked at young people's experiences through the lens of, what was at the start of the project, the nationally recognised framework for young people's outcomes: participation; staying safe; enjoying and achieving; economic wellbeing; health and wellbeing².

- [Participation](#)
- [Staying safe](#)
- [Enjoying & achieving](#)
- [Economic wellbeing & career success](#)
- [Health & wellbeing](#)



1 'Non-trans' is a term used in the report to signify somebody who does not identify themselves as transgender. This is sometimes referred to as 'cisgender' (somebody who identifies with the same gender they were assigned at birth). 'Non-trans' is used here to improve accessibility.

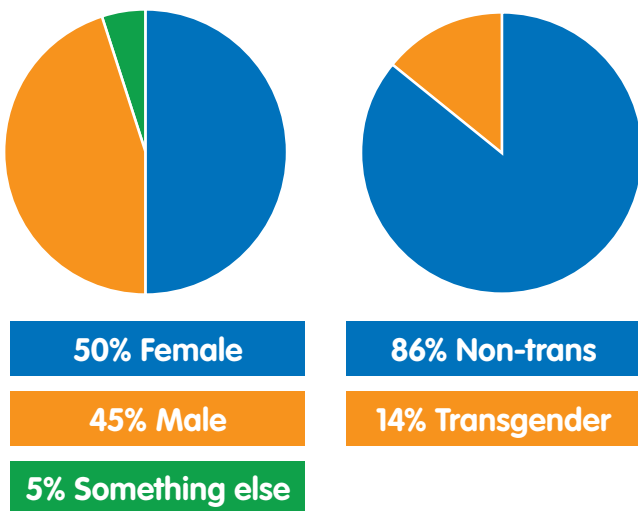
2 The Children Act 2004. (c. 31). London: HMSO; Cabinet Office and Department of Education, 2011. Positive for Youth: a new approach to cross government policy for young people aged 13 to 19. [pdf] London: HMSO.

Respondents to the survey

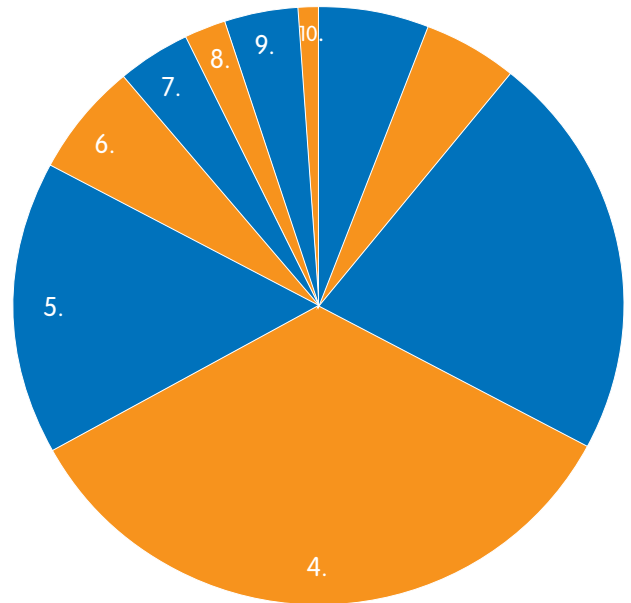
This was the largest survey sample of LGBTQ 16-25 year olds³³ in England, with a significant rate of response from trans young people⁴ it also includes a sub-group of respondents who self-identify as heterosexual and non-trans⁵. It is a representative sample of the English population:

- Gender identity distribution is roughly half male and half female
- Age spread is broadly consistent with the overall English population
- There is relatively even spread across the regions⁶
- Ethnic diversity is broadly consistent with the overall English population⁷

Gender of all survey respondents and proportion of respondents who identify as transgender



Sexual identity of all survey respondents



1. Female heterosexual 6%
2. Male heterosexual 5%
3. Lesbian 22%
4. Gay 34%
5. Female bisexual 16%
6. Male bisexual 6%
7. Female questioning 4%
8. Male questioning 2%
9. Female other 4%
10. Male other 2%

3 n=6,202

4 n=956

5 n=612

6 There is a slight over-representation of London and the South east (19% from London and 22% from the South east, compared to 15% and 16% respectively in the English population according to Census 2011)

7 A slight over-representation of White British (84% in Youth Chances sample, compared to 80% in English population according to Census 2011)

Key findings

1. All respondents perceive that discrimination against LGBTQ people in general is still common and this is confirmed by the higher levels of discrimination, and disadvantage that young people experience.
2. LGBTQ young people feel substantially less accepted in their local community than their heterosexual, non-trans counterparts particularly in religious organisations and sport.
3. LGBTQ young people experience significantly higher levels of verbal, physical and sexual abuse.
4. Nearly 1 in 10 of LGBTQ young people (8%) have had to leave home for reasons relating to their sexuality or gender identity.
5. Most young LGBTQ people feel that their time at school is affected by hostility or fear, with consequences such as feeling left out, lower grades and having to move schools. Most report that their school supported its pupils badly in respect of sexuality or gender identity.
6. Schools also neglect areas that are known to be public health concerns. Sex and relationships education is not inclusive of LGB relationships and does not provide young people with the emotional and sexual health information they need. This is a particular concern for young gay and bisexual men who are at higher risk of STIs and HIV.
7. LGBTQ young people experience less discrimination at university and work, which are also rated as environments that are much more tolerant and supportive than school.
8. LGBTQ young people report significantly higher levels of mental health problems including depression and anxiety, self-harm and suicidal thoughts. High rates of poor mental health were found in the whole sample, presenting a concerning picture in the youth population at large.
9. Trans young people face the greatest levels of disadvantage and discrimination and report lower overall satisfaction with their lives. 36% of trans respondents agreed with the statement '*In most ways my life is close to my ideal*', compared to 47% of LGBQ respondents and 51% of heterosexual non-trans respondents.
10. It is clear that the needs of LGBTQ young people for support and help are great yet only a minority of areas in England have services addressing the specific needs of young LGBTQ people and there is little evidence of local service commissioning for the specific needs of LGBTQ young people.

● Being different

The experience of LGBT ideation and activity starts early for many, particularly when compared with the age at which targeted provision for LGBTQ people generally starts. Over half of LGBTQ respondents (53%) knew they were LGBTQ by the age of 13. Over half of trans respondents (58%) knew they were trans by the same age.

Unsurprisingly relationships are critical to young people when they are coming out and LGBTQ and trans young people most commonly draw on their friends for information and support, often without turning to close family.

“With my parents it was more complex, as my mum got it and tried to deal immediately, my dad shut down, and to this day the reasons why he looks down on me, in my opinion, are rooted with the homophobia he originally felt. It certainly changed the way he saw me, which is affecting our relationship to this day.”
(Jake, gay man from the East of England, 18)⁸

When coming out as LGBTQ or trans, over four fifths of LGBTQ respondents (81%) and nearly two thirds of trans respondents (62%) told a friend first. Amongst the survey respondents over a quarter of LGBTQ young people (29%) have not told their mother, nearly a half (45%) have not told their father, and 5% have not told anybody. Approximately half of trans respondents have not told parents or siblings that they are trans and 28% have not told anybody.

Young people tell us that they most want emotional support to help them when they are coming out but most are not getting it.

The second most important thing to them is to meet other LGBTQ people and again over half of them did not get this opportunity.

“I think the main thing that young people going through the process of coming out really need is people they can talk to who have been in the same position as them.”
(Taz, gender queer person from the Southeast, 18)

● Participation

We asked young people questions about how involved they feel in their local areas and what sorts of social activities they engage with. These measures are generally accepted as good indicators of civic engagement and participation. LGBTQ young people are twice as likely not to feel accepted in the area where they currently live, compared to heterosexual non-trans young people.

There also remain particular areas of social activity where LGBTQ young people face exclusion. This might be because it is difficult to be open about their sexuality or gender identity, or they are excluded because of experienced hostility, or they appear reluctant to take part compared with heterosexual non-trans young people.

This is most marked in religious organisations, and to a lesser extent in sport. 59% of LGBTQ young people that would be interested in joining a religious organisation have stopped or reduced their involvement owing to their sexuality or gender identity. Over a third of LGBTQ young people (34%) are not able to be open about their sexuality or gender identity at a sports club they are involved in.

⁸ All quotes direct from young people as written, but with names changed to ensure anonymity.

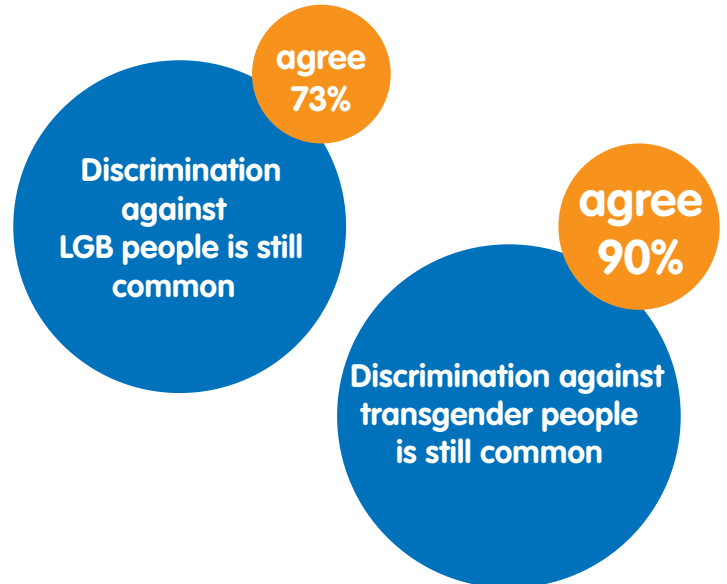
● Staying safe

Discrimination against LGBTQ people is still a significant problem with most young people perceiving discrimination as common especially against trans people. 73% of the LGBTQ sample agreed that discrimination against LGB people is still common and 90% of the LGBTQ sample agreed that discrimination against trans people is still common.

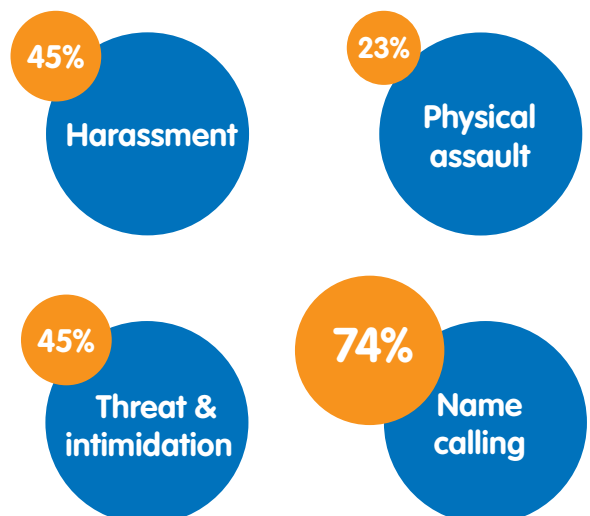
These perceptions are consistent with disturbingly high levels of abuse and violence that LGBTQ young people face. Verbal abuse is very common, and a substantial minority of LGBTQ young people report very serious crimes including physical and sexual abuse. About three quarters of LGBTQ young people (74%) have experienced name calling, nearly a half (45%) have experienced harassment or threats and intimidation and almost a quarter (23%) have experienced physical assault. Over half of all types of crime had happened in the last year: 88% of LGBTQ young people do not report these incidents to the police and when cases are reported only 10% lead to a conviction. This finding accords with recent research by Stonewall ⁹.

“I only began IDing as Trans in the past year and I’m 20 now. Back in Secondary I was out as Bi but it really made no difference to my actual learning experience. Just my travel between there and home. Bullying on the buses and while walking home was common. Now that I’m home between Uni terms and Trans, I’m scared to go out because of those people and how they maybe with me now should I encounter them...”
(Dee, pansexual trans woman from the North East, 20)

Proportion of LGBTQ sample who agree discrimination is common



Proportion of LGBTQ sample who have experienced bullying or hate crime



⁹ Guasp, A. 2013. Homophobic Hate Crime: The Gay British Crime Survey. London: Stonewall. pp.17-23

● Enjoying and achieving

Discrimination and fear of discrimination is affecting young LGBTQ people's experience of school and their ability to enjoy and achieve.

Overall nearly half of LGBTQ young people (49%) reported that their time at school was affected by discrimination or fear of discrimination. The consequences can be devastating for their education and life chances: missing lessons, achieving lower grades than they might have expected, feeling isolated and left out and having to move schools are all reported.

*"In year 11, before I had come to terms with things myself, I was tricked into coming out to someone and was severely bullied, it meant that I had lots of time off school and avoided contact with other students at breaks, including eating my lunch in the toilets on my own for fear of being verbally abused by fellow students. I gave up at school at this point. I did well on my GCSEs but never fulfilled my full potential because I hated every minute of being there."
(Simon, Gay man from London, 22)*

61% of the whole sample reported name calling because they were LGBTQ or people thought they were. This is slightly higher than the proportion of LGB respondents reporting homophobic bullying in recent Stonewall research¹². This figure includes the experiences of heterosexual non-trans respondents: it is an issue for all young people.

About one in five LGBTQ young people experience physical attack at school on account of their sexual identity or gender identity. The majority don't report this and only

29% of LGBTQ respondents reported domestic or familial abuse, compared to 25% of the heterosexual non trans group. These findings are consistent with the levels of severe maltreatment during childhood reported by young adults in research by the NSPCC¹⁰ but our survey shows the level is slightly higher for LGBTQ young people.

Over a third (36%) of LGBTQ respondents in our survey cited their sexuality or gender identity as at least a contributing factor in the abuse. Almost one in five (18%) LGBTQ young people have experienced some form of sexual abuse, compared with one in ten (11%) of non-trans heterosexuals in our sample. Our findings on non-trans heterosexual young people are consistent with findings from NSPCC on experience of sexual abuse of the general population¹¹. Of significant concern is that most LGBTQ respondents who have experienced sexual abuse (79%) have not received any help or support.

It is clear that a significant proportion of LGBTQ young people are at high risk of discrimination and abuse; that they are not getting the support that they need and that the consequences can be very serious: nearly one in ten LGBTQ young people report that they have had to leave home for reasons relating to their sexuality or gender identity.

10 25% of 18 to 24 year olds report severe maltreatment in Radford, L. et al. (2011) Child abuse and neglect in the UK today. London: NSPCC. p. 88

11 11% of 18-24 year olds report contact sexual abuse in Radford, L. et al. (2011) Child abuse and neglect in the UK today. London: NSPCC. p. 88

12 Guasp, A., 2012. The School Report: The Experiences of Gay Young People in Britain's Schools in 2012. London: Stonewall p. 8

a small proportion of those who do experience resolution. For some reporting the abuse means that it gets worse.

*“Severe, genuine verbal abuse (Prick, bender etc.). Minor skirmishes, such as damage to possessions. Lack of support from staff at school for incidents.”
(Aqib, gay man from the south east, 17)*

In sex and relationships education, where more inclusion might be anticipated, young people report very limited acknowledgement of LGBTQ relationships and issues. Around two thirds of LGBTQ young people say they learn a lot about relationships and safer sex between a man and a woman, compared to less than 5% who say they learn a lot about same sex relationships and safer sex.

89% of LGBTQ young people report learning nothing about bisexuality issues and 94% report learning nothing about trans issues. In terms of addressing well-known higher sexual health risks for gay and bisexual men¹³, schools are demonstrably ineffective. Only 25% of LGBTQ young people report that they learned anything at school about safer sex for a male couple.

Less than one in five LGBTQ young people (18%) report that school provided any useful preparation for happy and healthy sex and relationships. It appears that respondents found what was missing from their peers: over four fifths of LGBTQ respondents (84%) say talking with friends and partners was useful.

The overwhelming message from young people is that schools can and should do much more. Nearly two thirds of LGBTQ young people (65%) think their school supported its pupils badly in respect of sexuality or gender identity.

Schools scored low in terms of having specific things in place that would demonstrate that support: little awareness amongst young people of school policies to protect LGBTQ young people; only a very small proportion reporting seeing affirmative posters representing sexual and gender diversity or access to other resources such as books; little awareness of any links with LGBTQ support groups and organisations outside school.

*“My school had no posters, no helplines and no sex education for LGBTQ. There were loads of posters for bullying, but no information for anyone who was considered to be gay or LGBTQ. Posters, talks, awareness and action is what my school lacked, and that is what I believe would help.”
(Ali, lesbian from the south east)*

● Economic wellbeing & career success

In contrast to school, a smaller proportion (15%) of LGBTQ young people report that their time at work has been affected by discrimination or fear of discrimination about their sexuality or gender identity. This drops further to 10% of LGBTQ young people who report that their time at university was affected.

It appears that the transition into adulthood and the new environments that introduces does improve LGBTQ young peoples' experiences.

*“There’s an LGBT society, the Student Union has an LGBT week, the counselling services are notably great and are apparently really helpful for dealing with stuff like sexuality based issues, there are posters everywhere; basically, ‘...’ offers a really great inclusive environment and seems to strive to maintain it.”
(Jed, gay man from the north west, 19)*

13 Public Health England, 2013. Health Protection Report Volume 7 Number 23. [pdf] London: Public Health England. pp. 8-21

The level of reported name calling is also lower in these settings: 18% of LGBTQ young people report name calling at university and 10% report name calling at work.

“They employ a large, diverse range of staff and are all very accepting. There is also a manager and a supervisor who are LGBT, so it is nice to have someone similar to me in a higher position. They also have no tolerance policies on LGBTQ bullying, and the staff are very approachable to talk to on this issue. Also, in the induction training we had examples of things employees at other stores within the company had done, why they weren’t acceptable and how those people had been dealt with, and this included an example of a transgendered woman who had been laughed at, so it was nice to know they take their no tolerance policy seriously, and that they felt comfortable using examples with an LGBT person in.”
(Tina, lesbian from the south east, 17)

Whilst work to improve these conditions is still important, the worst experiences are encountered at school where young people are younger and likely to be more vulnerable. Feedback from respondents suggests better reporting mechanisms for homophobic bullying, awareness amongst young people of school policies to protect LGBTQ young people; posters and resources representing sexual and gender diversity, links with LGBTQ support groups and organisations and more inclusive relationships and sex education are needed to improve these areas.

Health & wellbeing

We asked young people a range of questions about their physical, mental and sexual health. In general we found little difference in overall levels of physical and sexual health but we know that there are significant differences within particular sexual and gender identity subgroups. We know, for example, that gay male respondents in our sample were more

likely to have ever had a sexually transmitted infection compared to all other sexuality groups. Whilst gay men made up 30% of the survey sample, they accounted for over half of respondents who had ever had an STI and 67% of those who reported repeat STIs.

In respect of body image, 59% female respondents reported thinking that they are overweight, compared to 44% of male respondents. Women also report higher levels of eating problems, with greater proportions overeating, undereating, overeating and then vomiting and refusing to eat. These patterns in body image and eating problems are also manifest in national research that shows more adolescent women than adolescent boys have been on a diet to change their body shape or lose weight ¹⁴.

Previous research has presented how LGBTQ people experience poorer mental health than the general population ¹⁵. The stress associated with minority status and associated discrimination has been presented as a reason for this situation ¹⁶.

The differences in mental health for LGBTQ young people we have found are startling. Several measures in the survey indicate that mental health problems are significantly worse amongst LGBTQ young people including acute problems such as self-harming and suicidal ideation.

14 Centre for Appearance Research and Central YMCA 2011. The Body of Public Opinion: Attitudes to body image in the UK. [pdf] London: YMCA Central. p. 4

15 Chakraborty A, et al. 2011. Mental health of the non heterosexual population of England. British Journal of Psychiatry 198(2) pp. 143-148.

16 Meyer I, 2003. Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: conceptual issues and research evidence. Psychological Bulletin 129(5) pp. 674-697.

42% of LGBTQ respondents report going for medical help for depression or anxiety, compared to 29% of heterosexual non-trans respondents.

*“When I was at school I told a couple of friends that I was bisexual at the time and word got out and the whole school thought instantly I was a lesbian... I am now however...but when this leaked out at school I got horrifically bullied by the majority of the pupils in my year. The school well they did nothing about it! Ever since I’ve struggled with my confidence and suffered anxiety and depression. Cheers [name of college]”
(Ursula, lesbian from the south east)*

Over half of LGBTQ respondents (52%) report self-harming, either now or in the past. This compares to 35% of heterosexual non-trans young people in our sample and to a rate of 12% for this age-group self-reported in a household survey by the NHS in 2007 ¹⁷.

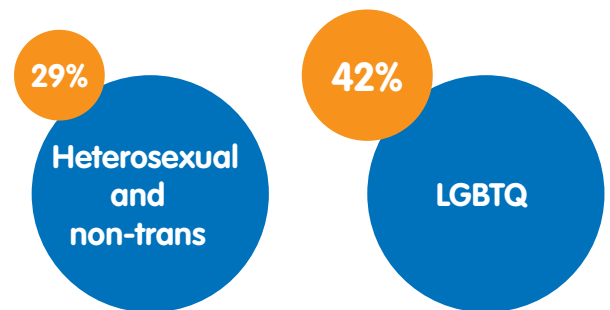
44% of the LGBTQ respondents report having ever thought about suicide. This compares to 26% of heterosexual non-trans respondents and a rate of 21% documented in the same research from the NHS ¹⁸.

The rates of self-harm and suicidal ideation reported by both groups exceed national statistics, suggesting an alarming rise in the prevalence of poor mental health amongst all young people.

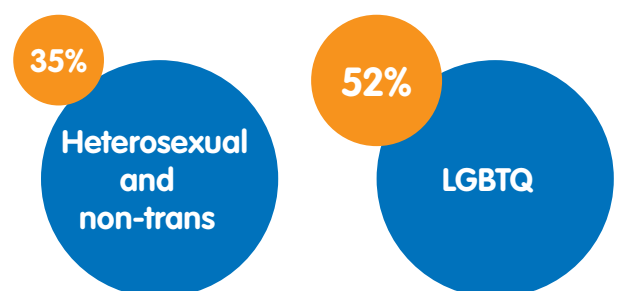
In addition to these acute mental health conditions, a substantial minority experience problems with accessing physical and mental health services related to their sexuality or gender identity.

*“I had a psychologist who was treating me for depression. I wanted to tell him about my trans issue, but he was treating me like ‘one of the lads’ like I was a ‘proper chap’. He had no idea I had such an issue about my gender because he was trying to build my confidence by complimenting my ‘male’ gender, which, was actually damaging.”
(Charlie, trans woman from the east midlands, 21)*

Percentage of respondents going for medical help for depression or anxiety



Percentage reporting self-harming now or in the past



¹⁷ The NHS Information Centre for Health and Social Care 2009. Adult Psychiatric Morbidity in England 2007, results of a household survey. London: NHS Information centre p. 82

¹⁸ The NHS Information Centre for Health and Social Care 2009. Adult Psychiatric Morbidity in England 2007, results of a household survey. London: NHS Information centre p. 82

Support

Our survey of commissioners indicates little evidence of local commissioning that serves the specific support needs of LGBTQ young people, either through specific LGBTQ services or within mainstream services. The limited engagement of only 29 respondents and the findings themselves are disappointing and concerning. A complementary picture emerged from our provider survey (52 respondents).

Only a minority of areas of England appear to have services that are sensitive to the specific needs of LGBTQ young people.

Respondents from both surveys confirmed that the main obstacles to improving this underdeveloped area were the impact of public sector austerity cuts; the structural change to public services; historical and continuing prejudice; as well as the limited needs assessments of LGBTQ young people.

One provider commented starkly on the:

“increased demand for support with decreasing resources” and another noted encountering *“institutional homophobia”*.

Commissioners indicated local leadership, young people’s involvement and the implementation of diligent commissioning processes, including an evidence base, as the key drivers for improving policy.

One commissioner said:

“There is a severe lack of information, particularly regional or even local. Any information/data about the needs, wants and aspirations of young LGBTQ people would be most welcome.”

The main enablers that providers identified were funding and access to specialist knowledge and understanding. Throughout there was a strong call for robust data that can provide an evidence base for the needs for this population.

Youth Chances has delivered this missing evidence, and following dissemination of the findings has begun to develop better practice and policy to meet the needs that have been identified. Having established a growing network of commissioners, provider organisations, young people, policy makers and academics, a series of seminars on key areas identified – safety and risk, transgender young people, mental health and, schools – took place shortly after the dissemination of the initial findings. The aim of these seminar events was to examine the data in these areas and begin to develop a set of policy and practice recommendations that will be shared with commissioners and organisations working with young people.

The follow-up surveys of commissioners and service providers to assess the impact, if any, of the initial findings showed that there had been a particular impact on service providers, with those who had read the reports saying they had been particularly useful for evidencing need and general awareness raising. The number of commissioners who were aware of the reports and who had read them was much lower, and whilst this could be attributed to significant changes in the way services are commissioned since the first survey it suggested a lack of continuity in responding to LGBTQ young people’s needs during these changes. Both follow-up survey reports identified a wider dissemination of research and sharing of knowledge as key recommendations for improving impact. A full list of recommendations can be found in the follow-up survey of commissioners and follow-up survey of service providers reports.

Next Steps

This report represents the final phase of the five-year research project. We are committed to making a difference to the lives of LGBTQ young people and plan to take the following next steps following the end of the project:

1. Further analysis and research

We are working with academic partners to undertake collaborative analysis to further analyse the data. These will test clear hypotheses grounded in literature for the purpose of submitting articles to peer reviewed journals. We have set out a 'Data Sharing Policy' that can be found on the project website.

2. Further data releases

We will further examine the responses in order to release data for different regions of England. We will also be examining the variation between our LGBTQ sample and the heterosexual non-trans sample, as well as national statistics for the general 16-25 year old population. We will explore the impact of 'being out' and how LGBTQ young people experience life having told people about their sexuality or gender identity.

The diversity within our LGBTQ sample necessitates understanding of sub-groups across sexuality, gender and different trans identities, as well as variables such as population density, class, age, ethnicity and religion.

The clear message from the young people we surveyed is that there is much work ahead to ensure that LGBTQ young people are afforded the same life chances as their peers. We are inviting collaboration to maximise the impact of the evidence base we have achieved and to create a real sea change in how our young people are served.

3. Service development

We will seek to use the data to inform service delivery that responds to the needs identified within the report. This will be achieved through working with partnership organisations that provide services for LGBTQ young people regionally, and young people themselves, through data sharing, capacity building and, support in developing services targeting issues that have been identified as being particularly relevant in the local area.

SECTION C:

Impact – Survey of Commissioners



Background

In 2010 METRO Charity, in collaboration with Ergo Consulting and the University of Greenwich, began the five-year ground breaking 'Youth Chances' research project funded by the Big Lottery Fund. The aim of the project was to support providers and commissioners in meeting the needs of 16-25 year olds who are lesbian, gay, bisexual and/or trans (LGBT), as well as those who might be questioning their sexual orientation (LGBTQ).

The research explores issues flagged in previous studies, such as METRO's 'We Are Bovered' report (2008) into the experiences of LGBTQ young people in South East London, which showed high levels of bullying, family problems, isolation, low self-esteem, self-harm, attempted suicide, alcohol and drug use and sexual risk amongst LGBTQ young people. For many young people this was coupled with poor access to necessary services around these areas. In addition, this study follows literature demonstrating very little documentation of targeted commissioning, services and good practice in England. These findings provided the impetus to conduct a similar study into the same range of experiences of LGBTQ young people nationally, for the original national Youth Chances study in 2012.

As a result, part of the Youth Chances project surveyed over 7,000 16-25 year olds, making it the biggest, most representative and robust survey of its kind. In the same year, the project also surveyed commissioners of services for young people and relevant service providers across England. 29 commissioners and 52 service providers responded. Findings from the first stage of the research can be separated into those from the overall young people's survey and those from the commissioners' survey:

Young People's Survey

- LGBTQ young people experience **higher levels of verbal, physical and sexual abuse**, and fear of such abuse.
- Nearly **1 in 10** of LGBTQ young people (8%) have **had to leave home** for reasons relating to their sexual orientation or gender identity.
- Most young LGBTQ people feel that their time at **school is affected by hostility** or fear and most report that their school supported its pupils badly in respect of sexual orientation or gender identity.
- LGBTQ young people report significantly **higher levels of mental health problems**.
- Trans young people face the **greatest levels of disadvantage and discrimination**, amongst the LGBTQ sample.

Commissioners Survey

- There is **little evidence of local commissioning that accounts for the specific needs of LGBTQ young people**, either as specific services or as mainstream services that meet specific needs.
- **None of the 29 respondents rated their district as excellent** overall, 7 rated local commissioning for LGBTQ young people as good and 14 rated it as adequate.
- According to the respondents, the main **obstacles to improving this undeveloped area of commissioning** were a lack of funding, structural change to public services, historical and continuing homophobia, and difficulties assessing the needs of young LGBTQ people.
- There is **no evidence of national policy drivers influencing commissioning** with LGBTQ young people, but rather islands of historically contingent commissioning.
- In identifying **drivers for improving commissioning** for LGBTQ young people a number indicated local leadership, young people's involvement and the implementation of diligent commissioning processes including an evidence base.
- There are **very few plans for developing services to respond to specific needs** and a strong call for robust data that can provide an evidence base that assesses the needs of this population.

This report outlines the findings of the follow-up survey of commissioners of services for 16-25 year olds, which was conducted in 2015 towards the end of the Youth Chances project. The follow-up survey aims to explore changes in the service provision and commissioning landscape since 2012 and to determine the impact of the original research. It should be noted that since the original study there have been considerable changes in how many services are commissioned and delivered following reorganisation in the NHS and public sector as a whole.

Aims of the follow-up survey

The overarching aims of the Youth Chances research were to identify the needs of young lesbian, gay, bisexual, trans or questioning people and improve commissioning and provision of services to meet these needs. The goal of the second stage of the research, involving follow-up surveys of commissioners and service providers, was to provide a snapshot of the impact of the original survey as well as providing insight into current policy and provision. This includes assessing how organisational leads, commissioners and providers have changed policies and practices as a result of Youth Chances and assessing the impact the research has had on service delivery.

Through exploring these issues the follow-up section of the study seeks to determine:

1. Awareness of the original study and research findings
2. Usefulness of the original study and research findings
3. Influence of the original research on service provision and commissioning
4. Barriers to preventing action on Youth Chances findings

Through exploring the areas above, the follow-up study seeks to outline the impact, if any, the original research has had and make recommendations for service providers and commissioners that will help to ensure that the needs of LGBTQ young people in England are successfully met in the future.

Methods

The follow-up research stage takes a mixed quantitative and qualitative survey ¹ approach. This differed from the first stage of the research, which was more heavily focused on quantitative questions. This mixed quantitative and qualitative approach was felt to be most appropriate for this stage of the study due to the smaller expected number of respondents, owing to changes in local commissioning, reduced number of questions and smaller amount of data collected compared with the first survey. Related to this, the follow-up stage was more concerned with the individual experience of, and response to, the Youth Chances research rather than generalising across large data sets. The inclusion of open-ended, qualitative questions also enabled participants to respond in their own language and terms and to describe their thoughts, opinions and feelings regarding service commissioning and provision, which would be difficult to ascertain in a quantitative survey. They also allowed participants to respond referring to their personal experiences and using relevant examples from their local services and commissioning.

The follow-up survey was shorter and more focused than the stage one survey and included questions on the awareness and usefulness of the original study and research findings, the influence of the original research and barriers to preventing action on research findings. In contrast to the first survey, questions on the mapping of LGBTQ services were omitted from the follow-up survey as the main goal was to determine the effect the 2012 research had on commissioning and provision rather than charting existing services. Although the key aim of the survey was to collect data, the survey also served a dual function as it informed participants of the key aims and findings of the Youth Chances research. In this way the survey was a tool to build knowledge and increase awareness of LGBTQ youth

issues amongst potential participants as well as gathering data.

Potential respondents were contacted via telephone and email. These were commissioners and service providers who had taken part in the initial stage of the research. Participation was voluntary with no statutory duty or financial incentive for survey completion. The survey was online for approximately two weeks and potential participants were contacted via telephone and/or email and sent a reminder during this time. Given the overall aim to explore the impact of the research it was felt that a narrow recruitment group restricted to previous participants was more appropriate than seeking to include new commissioners/commissioning bodies and services. In total 81 potential respondents were contacted – 52 of these were service providers and 29 were commissioners. Of these there were a total of 31 ² respondents – 18 from service providers and 13 from commissioners. The number of respondents was considered successful given increased funding and time pressures, considerable staffing turnover/changes, and the merging of local commissioning responsibilities since stage one of the research. The closure of several services since 2012 was an additional barrier to survey completion.

1 A copy of the survey can be found in the appendices.

2 Two duplicate responses were removed from the data to avoid repetition.

Results of Commissioners Survey

Awareness of the original study and research findings

Of the 13 respondents who completed the commissioners' survey 11 answered the question about whether they had completed the baseline Youth Chances commissioners' survey themselves or whether someone else had done so. Of these, 4 respondents had completed the 2012 survey. Regardless of whether they had completed the original survey, or not, awareness of the research reports was low amongst respondents. In contrast to the providers surveyed, the majority of commissioners were not aware of the research. However, awareness of the main and commissioners' surveys was highest, with 5 out of 10 respondents saying they had either fully or partially read the reports. This compares with 3 of 10 respondents for the provider survey. Around half of the respondents had not read the reports at all, which was notably higher than the proportion of those who completed the follow-up provider survey. One respondent commented '[I] wasn't aware of them and haven't had time to look at them'. This respondent continues to explain that she was asked to complete the follow-up survey on behalf of her commissioning department at the request of her manager. This could highlight either that their manager participated in the original survey, but was unable to complete the follow-up, or, as often seemed to be the

case, that a new member of staff was now responsible for commissioning. If it was the latter, it could indicate a lack of continuity of awareness of LGBTQ research due to commissioning staff turnover.

Usefulness of the original study and research findings

Commissioners' comments indicated that, at least among those familiar with the research, the original reports were beneficial. 7 of those answered a question about the usefulness of the original study – 4 stating it was very useful, 2 stating it was somewhat useful and 1 respondent stating it was not useful. The remaining respondents did not answer the question and based on the answers above this is likely to be a reflection of their lack of familiarity with the research. Participants were then asked to outline what was specifically useful in their work. 5 respondents answered this question and benefits mentioned include conducting a needs analysis and better understanding the needs of LGBTQ young people.

“Formed part of research into needs analysis”.

“Understanding commissioning needs for LGBTQ young people”.

One comment suggested it was not only the ability to capture need, but doing this from the perspective of young people, that was a unique

Have you read through the following Youth Chances reports?

Answer Options	Yes, fully	Yes, partially	No	Response Count
Commissioner survey report	3	2	5	10
Provider survey report	2	1	6	9
Main survey report	3	2	5	10

answered question: 9

skipped question 3

benefit of the Youth Chances research:

“Highlighting inequalities and capturing the voices of young people”.

Another respondent commented that the research was seen as useful in highlighting need and gaps in commissioning:

“Evidence of gaps in commissioning. Evidence of need to support commissioning against those gaps”.

One participant commented that they did not know what was most useful in the reports.

Overall the 2012 Youth Chances research has proved beneficial for commissioners who were familiar with the study. This was particularly because it was seen as helpful in raising awareness of LGBTQ need. However, perhaps what stands out most is the general lack of awareness, which shows the importance of effective dissemination for the findings of this stage of the study, and for future LGBTQ youth research more generally.

Influence of the original research on service provision and commissioning

In addition to the open ended question on the usefulness of the Youth Chances reports survey respondents above, participants were asked to choose from a list of specific ways in which the research has influenced different areas. Only half of the 12 survey respondents were aware of the research and of these, 4 completed questions on the influence of the study. The most common way in which the research was seen as having impact is in building evidence of need, which was mentioned by all 4 question respondents. This mirrors the results from the follow-up providers' survey. Other areas which were selected by 3 respondents each were community level commissioning, monitoring and evaluation, commissioning process and practice, service planning and, increasing awareness of LGBTQ issues and service need.

Two participants left written comments for this question. These reiterated the findings above indicating the importance of the research in building evidence of need for LGBTQ youth services.

“The report confirms the need for specialist commissioning for LGBTQ young people”.

One participant commented that the findings of the Youth Chances research helped directly with the planning and commissioning of new services:

“Youth group commissioned for LGBTQ young people with a variety of KPIs to address some of the inequalities highlighted in the reports”.

Participants were asked whether the Youth Chances research had affected intentions to commission local LGBTQ youth services. Of the 5 participants who answered the question, 2 said it had greatly increased them, while 1 said it had slightly increased them and 2 participants said the research had no effect on commissioning intentions. No participants said the research had reduced intentions to commission LGBTQ youth services. In written comments participants' stated the research was useful for highlighting LGBTQ youth need and for commissioning, planning and evaluating new services:

“It reinforced the need for a specialist group; the group was trialled and was successful. I am keen that the group continues (funding permitting) and that lessons learned can be rolled out to wider services”.

“The evidence galvanised the organisation to seek partners to commission, design, deliver and evaluate - i.e. co-produce - robust services for LGBTQ young people”.

In addition, one participant commented that the 2012 Youth Chances findings helped to emphasise need of currently commissioned services:

“The reports reaffirm this need for specialist LGBTQ services which we do commission locally”.

It is clear that amongst those who were aware of the Youth Chances research, the findings were most useful for demonstrating commissioning need and for planning effective, new services. Nevertheless, the increased motivation to provide new services among some participants did not always result in increased service provision due to several barriers and often resulted in inaction, as will now be discussed.

Barriers to preventing action on Youth Chances findings

Commissioners were asked what barriers prevented action on the Youth Chances findings. All three respondents mentioned financial constraints as barriers, one of those highlighted that this resulted in service provision focused on statutory duties:

“Funds are limited and statutory services have to be the priority”.

Two respondents mentioned that there were other commissioning priorities. Other obstacles mentioned by one participant each were lack of skills/capacity, lack of awareness of LGBTQ youth needs and re-organisation of local health services. Lack of evidence and legal impediments were not selected by any respondents.

Unfortunately participants did not expand on these answers and, because of the small sample size, it is difficult to say whether the obstacles selected are common amongst commissioners. In other comments two respondents stated that LGBTQ commissioning

is a priority in their local areas already:

“LGBTQ [people] remain a priority targeted group for the commissioning of youth services within Lancashire”.

“Commissioning these LGBTQ services continues to be a priority locally for young people in our area”.

Comments by one respondent highlighted the concrete benefits of the Youth Chances in the setting up of an effective youth group:

“METRO run the youth group on our behalf. They have recruited staff well and give young people the chance to volunteer and shape the service. Feedback from the young people has been positive and they speak about improved confidence, support and knowledge. I am confident these young people will have improved outcomes as a result”.

The comments above also suggest the continued funding of youth groups is important for the wellbeing of LGBTQ young people.

Despite the optimism around the Youth Chances research and its role in helping increase awareness of LGBTQ youth need and highlighting commissioning gaps, as well as a keenness to implement some of the initial recommendations and commission new LGBTQ youth services, there appear to be barriers which prevent commissioners from doing so. These seem to include financial constraints, lack of skills/capacity, lack of awareness of LGBTQ youth needs, other service commissioning priorities and re-organisation of local health services. It is clear that more research exploring these issues is needed to better understand the nature of these obstacles. Only once these barriers have diminished will the findings of the research have a discernible effect on LGBTQ service delivery in the UK.

Recommendations

The follow-up commissioners survey has emphasised that, amongst those familiar with the Youth Chances research, the study findings have proved invaluable for highlighting need, planning and commissioning effective services and for better understanding LGBTQ young people's issues. However, although the findings have been disseminated through a range of networks and events, including local commissioner networks, conferences and committees, it is clear that in order for studies such as Youth Chances to result in real changes to the lives of LGBTQ young people, findings must be disseminated more widely amongst commissioners. Based on the research results the following recommendations are given to ensure services appropriately and effectively match the needs of LGBTQ young people:

1. It is imperative that **future research findings are disseminated widely and effectively to commissioners** as there was a lack awareness of the Youth Chances research amongst respondents. This might include further research presentations, question and answer meetings, training sessions and conferences.
2. The **commissioning of LGBTQ youth groups** should be a key priority in funding and planning future LGBTQ service provision.
3. More research to explore the specific **nature of barriers** for implementing LGBTQ youth study findings is needed.
4. Evidence of **LGBTQ youth need** is crucial in assisting commissioners in making future decisions around service delivery, and for addressing gaps in current commissioning.
5. Sharing of knowledge and experience around **specialist youth commissioning need** amongst commissioners would be beneficial to help ensure the needs of LGBTQ youth are met in the future. This might include knowledge sharing events such as workshops and conferences.

Appendix

Commissioners Follow-up Survey

Your role in local commissioning

1. Please give your name

2. Please give the full name of the commissioning body you work for

3. What is your job title in that commissioning body?

4. What geographical area does this commissioning body cover?

5. Please enter your contact details

Phone number

E-mail

Address

Research Impact

6. Did you complete the previous Youth Chances commissioner survey?

Yes

No

7. Have you read through the following Youth Chances reports? (If NO for all reports please SKIP to Q14)

Yes, fully

Yes, partially

No

Commissioner survey report

Commissioner survey report Yes, fully

Commissioner survey report Yes, partially

Commissioner survey report No

Provider survey report

Provider survey report Yes, fully

Provider survey report Yes, partially

Provider survey report No

Main survey report

Main survey report Yes, fully

Main survey report Yes, partially

Main survey report No

8. Have you found the research reports you read useful?

Yes, very useful

Yes, somewhat useful

No

9. Please explain why the research report(s) were not useful in your work

10. Please explain what was most useful in your work

11. Has the Youth Chances research influenced the following areas? (Please tick all that apply)

Community level service commissioning

Commissioning process or practice (e.g. funding)

Monitoring and evaluation of LGBTQ youth services

Planning and provision of services

Building evidence of need

Increasing awareness of LGBTQ issues and service need

Please explain the influence the report(s) have had as precisely as possible here:

12. How has the Youth Chances research impacted your intentions to commission local LGBTQ youth services?

Greatly Increased

Slightly increased

No impact

Greatly Decreased

Slightly Decreased

If you selected 'Greatly increased' or 'Slightly increased', please explain how.

13. Are any of the following barriers preventing action on Youth Chances findings (Please tick all that apply)

Lack of skills/capacity to make changes

Lack of awareness of LGBTQ young peoples' needs

Other service commissioning priorities

Lack of access to evidence need (e.g. research) for young LGBTQ people

Financial constraints

Legal impediments

Re-organisation of local health services

Please explain how any of the above represent barriers. Please also add any additional barriers here.

THANK YOU for taking time to complete our survey! We will send a copy of the follow-up report to the contact details provided at the start of the survey. If you would like any more information about the research project please do not hesitate to get in touch:

Tony Furlong

**METRO MSM Researcher, BME & Latino HIV
Prevention Advisor**

tony@metrocharity.org.uk

020 830 5000

14. If there are any other comments you would like to make about your experience commissioning young peoples' services, or about the Youth Chances research please make them below

SECTION D:

Impact – Survey of Providers



Background

In 2010 METRO Charity, in collaboration with Ergo Consulting and the University of Greenwich, began the five-year ground breaking 'Youth Chances' research project funded by the Big Lottery Fund. The aim of the project was to support providers and commissioners in meeting the needs of 16-25 year olds who are lesbian, gay, bisexual and/or trans (LGBT), as well as those who might be questioning their sexual orientation (LGBTQ).

The research explores issues flagged in previous studies, such as METRO's 'We Are Bovered' report (2008) into the experiences of LGBTQ young people in South East London, which showed high levels of bullying, family problems, isolation, low self-esteem, self-harm, attempted suicide, alcohol and drug use and sexual risk amongst LGBTQ young people. For many young people this was coupled with poor access to necessary services around these areas. In addition, this study follows literature demonstrating very little documentation of targeted commissioning, services and good practice in England. These findings provided the impetus to conduct a similar study into the same range of experiences of LGBTQ young people nationally, for the original national Youth Chances study in 2012.

As a result, part of the Youth Chances project surveyed over 7,000 16-25 year olds, making it the biggest, most representative and robust survey of its kind. In the same year, the project also surveyed commissioners of services for young people and relevant service providers across England. 29 commissioners and 52 service providers responded. Key findings from the first stage of the research can be separated into those from the young people's survey and those from the provider's survey:

Young People's Survey

- LGBTQ young people experience **higher levels of verbal, physical and sexual abuse**, and fear of such abuse.
- Nearly **1 in 10** of LGBTQ young people (8%) have **had to leave home** for reasons relating to their sexual orientation or gender identity.
- Most young LGBTQ people feel that their time at **school is affected by hostility** or fear and most report that their school supported its pupils badly in respect of sexual orientation or gender identity.
- LGBTQ young people report significantly **higher levels of mental health problems**.
- Trans young people face the **greatest levels of disadvantage and discrimination**, amongst the LGBTQ sample.

Providers Survey

- Only a **minority of areas of England appear to have services addressing the specific needs of LGBTQ young people**. Only 46 agencies provide services in this area.
- The aggregate annual **funding reported for such services is less than £1 million**, with much of this from non-statutory sources, and most providers indicating that their statutory funding was under threat.
- A **difficult funding environment for LGBTQ services** is consistent with the findings of the parallel survey of commissioning. This is reflected in relatively low capacity with approximately 100 full-time equivalent staff for specialist services and initiatives across England.
- The main enablers identified were funding, access to specialist knowledge and understanding from committed LGBT individuals or LGBT organisations.
- The main obstacles identified were the **lack of secure funding** to maintain adequate provision, **problems with access to schools** and the low profile and priority of the needs of this population as a result of continuing homophobia in many areas.
- Most respondents thought specialist and mainstream services needed to work together yet were sceptical that most mainstream services are currently sensitive to, or inclusive of, the needs of the young LGBTQ population.

This report outlines the findings of the 2015 follow-up survey of provider organisations working with 16-25 year olds, which was conducted in 2015 towards the end of the Youth Chances project. The follow-up survey aims to explore changes in the service provision and commissioning landscape since 2012 and to determine the impact of the original research. It should be noted that since the original study there have been considerable changes in how many services are commissioned and delivered following reorganisation in the NHS and public sector as a whole.

Aims of the follow-up survey

The overarching aims of the Youth Chances research were to identify the needs of young lesbian, gay, bisexual, trans or questioning people and improve commissioning and provision of services to meet these needs. The goal of the second stage of the research, involving follow-up surveys of commissioners and service providers, was to provide a snapshot of the impact of the original survey as well as providing insight into current policy and provision. This includes assessing how organisational leads, commissioners and providers have changed policies and practices as a result of Youth Chances and assessing the impact the research has had on service delivery.

Through exploring these issues the follow-up section of the study seeks to determine:

1. Awareness of the original study and research findings
2. Usefulness of the original study and research findings
3. Influence of the original research on service provision and commissioning
4. Barriers to preventing action on Youth Chances findings

Through exploring the areas above the follow-up study seeks to outline the impact, if any, the original research has had and make recommendations for service providers and commissioners that will help to ensure that the needs of LGBTQ young people in England are successfully met in the future.

Methods

The follow-up research stage takes a mixed quantitative and qualitative survey¹ approach. This differed from the first stage of the research, which was more heavily focused on quantitative questions. This mixed quantitative and qualitative approach was felt to be most appropriate for this stage of the study due to the smaller expected number of respondents, owing to changes in local commissioning, reduced number of questions and smaller amount of data collected compared with the first survey. Related to this, the follow-up stage was more concerned with the individual experience of, and response to, the Youth Chances research rather than generalising across large data sets. The inclusion of open-ended, qualitative questions also enabled participants to respond in their own language and terms and to describe their thoughts, opinions and feelings regarding service commissioning and provision, which would be difficult to ascertain in a quantitative survey. They also allowed participants to respond referring to their personal experiences and using relevant examples from their local services and commissioning.

The follow-up survey was shorter and more focused than the stage one survey and included questions on the awareness and usefulness of the original study and research findings, the influence of the original research and barriers to preventing action on research findings. In contrast to the first survey, questions on the mapping of LGBTQ services were omitted from the follow-up survey as the main goal was to determine the effect the 2012 research had on commissioning and provision rather than charting existing services. Although the key aim of the survey was to collect data, the survey also served a dual function as it informed participants of the key aims and findings of the Youth Chances research. In this way the survey was a tool to build knowledge and increase awareness of LGBTQ youth

issues amongst potential participants as well as gathering data.

Potential respondents were contacted via telephone and email. These were commissioners and service providers who had taken part in the initial stage of the research. Participation was voluntary with no statutory duty or financial incentive for survey completion. The survey was online for approximately two weeks and potential participants were contacted via telephone and/or email and sent a reminder during this time. Given the overall aim to explore the impact of the research it was felt that a narrow recruitment group restricted to previous participants was more appropriate than seeking to include new commissioners/commissioning bodies and services. In total 81 potential respondents were contacted – 52 of these were service providers and 29 were commissioners. Of these there were a total of 31² respondents – 18 from service providers and 13 from commissioners. The number of respondents was considered successful given increased funding and time pressures, considerable staffing turnover/changes, and the merging of local commissioning responsibilities since stage one of the research. The closure of several services since 2012 was an additional barrier to survey completion.

1 A copy of the survey can be found in the appendices.

2 Two duplicate responses were removed from the data to avoid repetition.

Results of the Providers Survey

Awareness of the original study and research findings

Of the 18 respondents who completed the providers' survey 17 answered the question about whether they had completed the Youth Chances provider's survey themselves or whether someone else had done so. Of these, 8 respondents had completed the 2012 survey. Regardless of whether they had completed the original survey or not, awareness of the research reports was high amongst respondents. This was highest with the main survey report where 12 of the 14 respondents had either fully or partially read the main survey report. This compares with 8 of 12 respondents for the commissioner survey report and 10 of 13 respondents for the provider survey. The majority of respondents had fully read the main survey, while answers for the provider and commissioner reports were more evenly spread across those who had fully, partially and not read them. That said, only a minority of respondents had not read the reports at all.

Usefulness of the original study and research findings

It was clear that respondents found the original research beneficial with 10 stating it was very useful and 2 stating it was somewhat useful. No respondents described the research as not useful. Participants were then asked to outline

what was specifically useful in their work. The most commonly cited benefit of the research was justifying services and providing evidence for service provision need, especially to funders. 5 of the respondents referred to this as an advantage of the research:

"This is an area that hasn't been looked at in so much depth before. The research has helped us to justify and evidence the important work we do and also to raise the profile of those issues in both the community and with other services, including NHS providers".

"I used it to successfully inform funding bids".

Another frequently cited benefit of the 2012 Youth Chances reports highlighted in the quote above was that they helped raise the profile of LGBTQ issues and research in a variety of areas such as domestic abuse, homelessness and mental health. 4 respondents specifically mentioned the awareness raising potential of the research as a benefit:

"Always good to have mixed method research findings on which to base arguments for the need for inclusivity and awareness around LGBTQ issues at our Health Centre".

Have you read through the following Youth Chances reports?

Answer Options	Yes, fully	Yes, partially	No	Response Count
Commissioner survey report	5	3	4	12
Provider survey report	5	5	3	13
Main survey report	8	4	2	14

answered question: 15

skipped question 3

Other reasons the Youth Chances research was seen as useful were its use in training and for making comparisons and understanding differences between the national and local LGBTQ service provision landscape.

“Very useful statistics on experiences of LGBT young people - we have used them for training and for funding stuff”.

Overall the 2012 Youth Chances research has played an important role in helping service providers understand key LGBTQ issues and current research as well as providing evidence for service provision need and aiding funding applications.

Influence of the original research on service provision and commissioning

In addition to the open ended question on the usefulness of the Youth Chances reports’ survey respondents above, participants were asked to choose from a list of specific ways in which the research has influenced different areas. The most common way in which the research has had impact is in building evidence of need, which was mentioned by all 10 question respondents, thus mirroring the comments above. Other areas in which the research has been influential include service planning and delivery, and increasing awareness of LGBTQ youth issues and service need, all of which were mentioned by 8 respondents. In addition, half of respondents stated the research was influential in service provision and increasing awareness of LGBTQ research and policy.

In written comments participants flagged the importance of the survey in other areas. The most common of these was aiding funding applications because of the ease at which the reports allow relevant data to be located and selected. Training for staff, volunteers and other service providers was an additional area that was mentioned by many respondents:

“We have used the evidence to bid for local authority youth funding. We have used the evidence in training for volunteers, NHS staff and a number of other groups of health and social care professionals. The evidence will be eventually uploaded onto our ‘Evidence Exchange’ which is a public database of research into LGBT lives”.

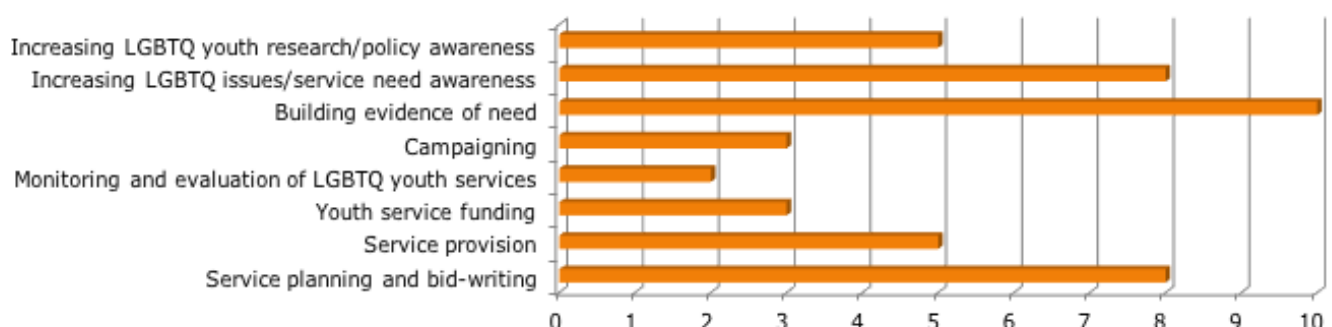
“[Youth Chances] now underlies all my youth mental health work, from designing services to writing funding bids”.

“We are supporting delivery of homophobic, biphobic and transphobic bullying awareness training for teachers and want to support service delivery in our education and training and clinical offer”.

The Youth Chances research has also been influential in helping to build knowledge about LGBTQ youth issues and planning services and support:

“Youth Chances has improved the knowledge about challenges and some opportunities that young LGBTQ people face in England, and therefore is a useful

Has the Youth Chances data influenced the following areas?



new resource in planning and advocating for more support for this population”.

Similarly, another respondent highlighted the usefulness of the Youth Chances data in planning and improving existing services, whilst also adding that it has been useful in formulating new campaigns:

“The report supports our existing work on improving the care pathway for transitioning students. It also influences the need for inclusivity in our campaigns around mental health and self-esteem and also around sexual health and relationships. We have also started to advise LGBTQ patients travelling abroad about personal safety so the figures on safety and risk just in the UK are a foundation for basing that advice on”.

When asked whether the Youth Chances research has affected intentions to provide local LGBTQ youth services 6 respondents said it had increased them (3 greatly, 3 slightly), and 5 respondents said it had had no effect. No participants said the research had reduced service provision intentions. In written comments some of those that stated the research has no impact on intentions to provide LGBTQ youth services said this was because they already provide such services, such as one respondent who stated ‘[name of organisation] as you know, already provide some of these services’. Where respondents expanded on how service provision intentions had been affected, they referred to funding bids, service planning and development, service delivery and increased awareness of LGBTQ issues. One participant commented that the survey had resulted in the intention to extend current service provision:

“We want to increase our services, so that young trans people have access to local support and to be able to meet other trans youth”.

Thus, not only has the research assisted in enhancing current services, improving knowledge, providing training and providing evidence necessary for funding applications, but in some cases it has also increased the motivation for providing LGBTQ youth services. Nevertheless, the increased motivation to provide services should not be interpreted as actual increased service provision due to several barriers which often resulted in inaction. This was highlighted in one participant’s comments that ‘larger forces [are] at work. Austerity’. The barriers to acting on the findings of the Youth Chances research will now be discussed.

Barriers to preventing action on Youth Chances findings

Participants were asked what barriers prevented action on the Youth Chances findings. The most commonly cited obstacles were financial constraints and a lack of staffing. Both were mentioned by 8 of the 10 question respondents. This implies that current LGBTQ youth services are under considerable financial and staffing pressure, which is preventing them from providing the LGBTQ young people’s services they would like.

“There are always limits on what one can achieve based on the amount of funding and external constraints”.

Another respondent simply wrote:

“Lack of Funding = lack of skills/capacity and staff “.

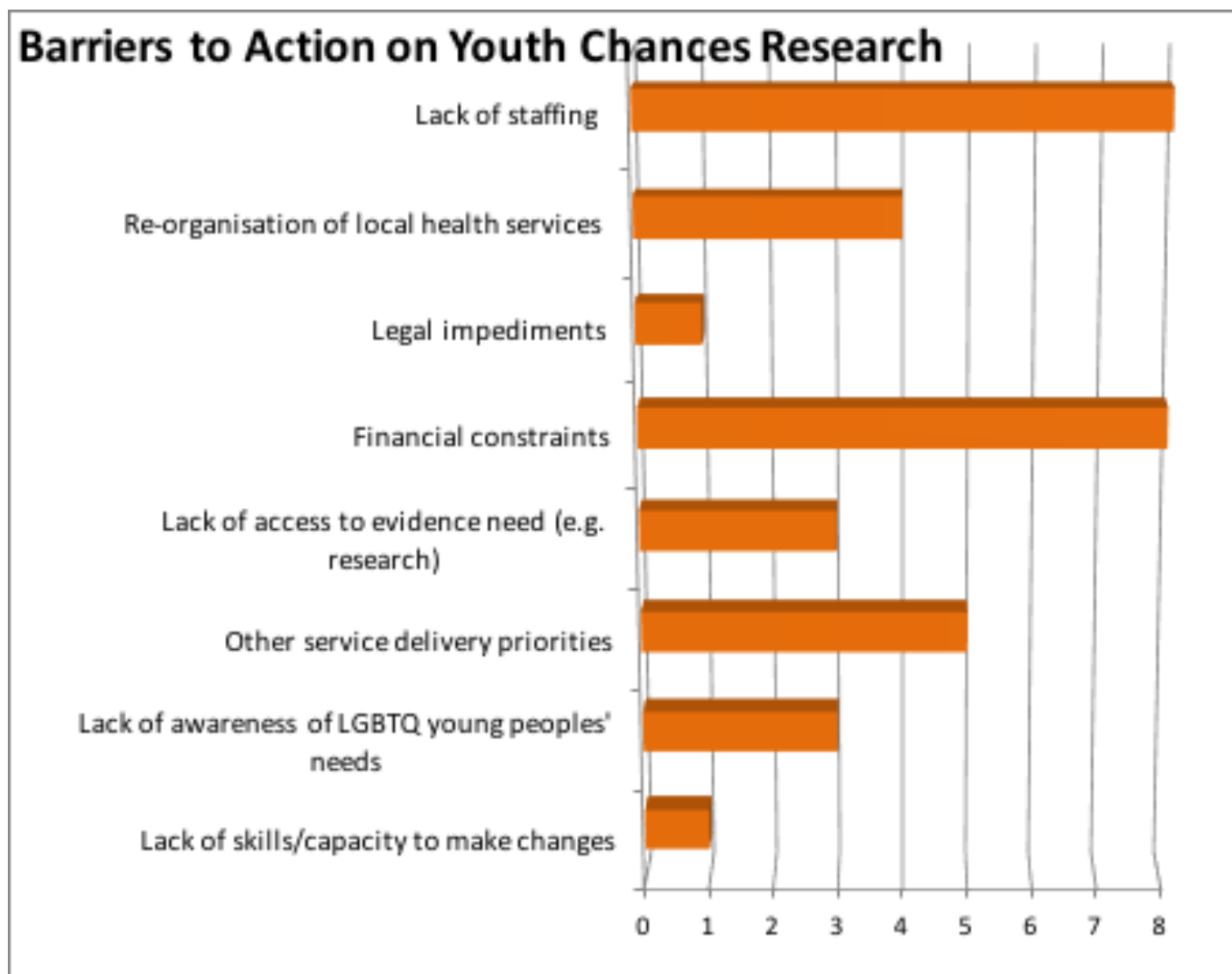
Respondents’ comments emphasised the real consequences that the current difficult funding situation has on LGBTQ service delivery. A lack of available funding is resulting in a lack of capacity, skills and staffing, which results in a dearth of LGBT services, which has concrete effects on the lives of LGBTQ young people:

“The current reality of funding for the charity and specifically to the LGBT charity sector is one of the great challenges for delivery of much needed services for young LGBTQ people. This has an impact on the well-being of this population and leaves their needs often unattended”.

An additional barrier mentioned by the majority of participants is the presence of other, more pressing service delivery priorities. This might indicate that understanding, processing and thinking about how the Youth Chances data might influence service provision requires significant focus and attention which conflicts with more immediate, day-to-day service delivery issues. This was suggested in comments by one provider:

“Project work takes a back seat to our day to day service delivery, particularly at busy times of the year. The will is there but not necessarily the way! The LGBTQ work here is nurse-led and unfortunately there is 14.5% vacancy rate in London for Practice Nurses so it’s not always possible to recruit nurses with the appropriate skills and experience; which then has a knock-on effect on time spent training new staff instead of being able to concentrate on improving service provision”.

“Main constraint is funding but above this is prioritising creating a service along with other delivery priorities”.



An additional barrier mentioned was the lack of knowledge and understanding of lesbian youth issues, particularly when contrasted with gay and trans issues. One participant felt that commissioners had little awareness of, or interest in, lesbian homelessness issues, for example, and that this resulted in the commissioning of inappropriate services. This was seen as particularly problematic given high levels of discrimination faced by lesbian communities:

“Young lesbian women face abuse on a daily basis, I suspect probably more than young gay men; lesbian women are being made invisible - most people will happily use the term ‘gay’ but will struggle to say ‘lesbian’ . Commissioning authorities have no interest in providing services for young lesbians, it’s all ‘G+T’ with the ‘L’ being forgotten. Far too much youth homeless provision is mixed sex, which is completely inappropriate for young women, and often an abusive environment for young lesbian women. Our council, when recommissioning youth homeless services, didn’t even include our young women only provision in the tender. It just wasn’t deemed necessary, so all the funding for it was effectively cut. We are still open (but struggling) and our residents (and staff) have to daily put up with abuse e.g. ‘you fucking dykes’,’ that’s the C T hostel, for ugly dykes’, I could go on and on with the hate and vile comments that are directed at the project. There is a desperate need for people to prioritise women only provision, in homelessness services”.

Four respondents mentioned the re-organisation of local health services as a significant barrier to acting on the Youth Chances research, although exactly why this was the case was not expanded upon in participants’ comments. However, this could be a useful area of exploration in future research.

On the whole participants’ comments demonstrated that the Youth Chances research has been a vital piece of research for LGBTQ service providers. It has aided understanding of LGBTQ youth issues and helped with funding bids, addressing need and planning new services in particular. Positive feedback in the survey included:

“Thanks for the survey. It’s excellent and so applicable to the age-group we care for - really great!”

“A great piece of research which will [provide] an interesting snapshot of youth in UK”.

Despite the optimism around the Youth Chances research generally, and a keenness to implement some of the recommendations from the initial findings, there were very real barriers to doing so and funding constraints and lack of staffing were the most notable of these amongst service providers. It is clear that only once these barriers have diminished will the findings of the research have a discernible effect on LGBTQ service delivery in England.

Recommendations

The follow-up providers survey has emphasised that the Youth Chances findings have proved invaluable for highlighting need, planning and providing effective services and for better understanding LGBTQ young people's issues. However, the research also highlighted the obstacles to action on Youth Chances research, and the biggest of these is lack of funding. It is clear that assistance in seeking funding for youth services and writing bids is imperative for the continuation of current effective LGBTQ youth services and for providing new innovative projects that respond to the need identified in the Youth Chances research. Based on the research results the following recommendations are given to ensure services appropriately and effectively match the needs of LGBTQ young people:

1. The further **sharing of current research findings and service delivery experiences**, such as through training sessions, conferences, dissemination events and online is imperative to increase awareness of young LGBTQ people's needs amongst service providers.
2. **Further LGBTQ youth research** is absolutely crucial to provide an up to date evidence base for funding applications, planning services and increasing awareness.
3. Future **LGBTQ youth recommendations should aim to be specific and achievable with minimal resource** allowing them to be incorporated into current responsibilities without having to recruit additional staff or volunteers.
4. **Assistance in seeking funding and writing well evidenced bids using regionalised data** for LGBTQ youth services is vital given the current difficult financial climate.
5. **Trans, lesbian and homeless youth services** are largely missing from current LGBTQ youth service provision. These groups must be addressed in future work. Future research must also demonstrate the needs of these communities and be effectively disseminated so commissioners are aware of these issues.

Appendix

Follow-up Providers Survey

Your role in local service provision

1. Please give your name

2. Please give the full name of the organisation on behalf of which you are completing this survey

3. What is your job title in that organisation (or role if you are a volunteer)?

4. Please enter your contact details

Phone number

E-mail

Address

Research Impact

5. Did you complete the previous Youth Chances providers survey?

Yes

No

6. Have you read through the following Youth Chances reports?
(If No please SKIP to Q14)

Yes, fully

Yes, partially

No

Commissioner survey report

Commissioner survey report Yes, fully

Commissioner survey report Yes, partially

Commissioner survey report No

Provider survey report

Provider survey report Yes, fully

Provider survey report Yes, partially

Provider survey report No

Main survey report

Main survey report Yes, fully

Main survey report Yes, partially

Main survey report No

7. Have you found the research reports you read useful?

Yes, very useful

Yes, somewhat useful

No

8. Please explain why the research report(s) were not useful in your work

9. Please explain what was most useful in your work

10. Has the Youth Chances research influenced the following areas? (Please tick all that apply)

Service planning and bid-writing

Service provision

Youth service funding

Monitoring and evaluation of LGBTQ youth services

Campaigning

Building evidence of need

Increasing awareness of LGBTQ issues/ service need

Increasing awareness of LGBTQ youth research and policy

Please explain the influence the report(s) have had in the areas selected above

11. How has the Youth Chances research affected your intentions to provide local LGBTQ youth services?

Greatly Increased

Slightly increased

No impact

Slightly decreased

Greatly decreased

If you selected 'Greatly increased' or 'Slightly increased', please explain below

12. Are any of the following barriers preventing action on Youth Chances findings (Please tick all that apply)

Lack of skills/capacity to make changes

Lack of awareness of LGBTQ young peoples' needs

Other service delivery priorities

Lack of access to evidence need (e.g. research) for young LGBTQ people

Financial constraints

Legal impediments

Re-organisation of local health services

Lack of staffing

Please explain how any of the above represent barriers. Please also add any additional barriers here.

13. If there are any other comments you would like to make about your experience providing young peoples' services, or about the Youth Chances research please make them below

THANK YOU for taking time to complete our survey! We will send a copy of the follow-up report to the contact details provided at the start of the survey. If you would like any more information about the research project please do not hesitate to get in touch:

Tony Furlong

METRO MSM Researcher, BME & Latino HIV

Prevention Advisor

tony@metrocharity.org.uk

020 830 5000





Embrace Difference

020 8305 5000

hello@metrocharity.org.uk

@METROCharity **METRO Charity**

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Authors: Ussher G, Baker D, Delacour M, Dye C, Furlong T, Scott P, West E (2016)