Measuring diversity: Improving access and outcomes for LGBT people

Making Diversity Interventions Count

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June 1st 2016
Young LGBT people who have attempted or taken their lives

Dominic Crouch aged 15

Ayden Keenan-Olson, 14

Michael Morones 11
Lizzie Lowe aged 14

Jamey Rodemeyer aged 14

Lucy Meadows teacher in Accrington Lancashire

GP, Nazim Mahmood aged 34
Mental health problems

- Twice as likely to attempt suicide;
- 1.5 times greater risk for depression and anxiety disorders (over 12 months/lifetime);
- 1.5 times increase in substance dependence;
- LB at risk of substance dependence;
- Lifetime prevalence of suicide attempt was especially high in gay and bisexual men.

Mental health and LGBT people

- Mental health and well being
- Self harm
- Depression and anxiety
- Suicide

- Children and adolescent mental health;
- Adult mental health services
- Mental capacity
- Dementia care
Association between sexual orientation and discrimination

- Discrimination on grounds of sexuality common for LGB people;
- Discrimination – greater likelihood of OCD
- More likely to seek help for mental distress (Chakraborty et al. 2011)
Trans mental health study

- My gender identity was treated as a symptom of a mental health issue rather than my genuine identity 29%
- I was asked questions about my sexual behaviour that I felt were irrelevant and that made me uncomfortable 26%
- I was given advice or suggestions by a mental health provider that I thought were inappropriate 20%
- I was asked questions about my body that I felt were irrelevant and made me uncomfortable 18%
A bit of history.....

- Only removed from the *Diagnostic and Statistical Manual (DSM)* in 1991;
- Considered a disease by the WHO until 1993;
- Being trans is still included in the DSM-5 as gender dysphoria replacing GID;
- Association with disease ‘section 28’ LGA 1988;
- 2010 UK Equality Act;
Preventing suicide: cross government strategy 2012

Area 2: Tailor approaches to improve mental health in specific groups

- lesbian, gay, bisexual and transgender people;
- Staff in health and care services, education and the voluntary sector need to be aware of the higher rates of mental distress, substance misuse, suicidal behaviour or ideation and increased risks of self-harm amongst lesbian, gay and bisexual people, as well as transgender people.
This project focuses on ensuring that Leicestershire Partnership NHS Trust works closely alongside local City CCG, Public Health, leading LGB&T health academics, LGB&T communities & providers to ensure a co-design approach:

- Monitoring
- Visibility - leaflets, posters
- Website
- Review Website & non-specific marketing - LGB&T
- How visible in non-specific marketing

- Introducing Monitoring
- Robust Marketing & Comms Strategy

- Care Pathway starting point - self-referral
- Marketing & Communications through local groups & wider LLR communities
- Wider Media
- Robust marketing & Comms Strategy
- Self-referral route
- GP’s-specific resource e.g. In the Pink
- Signposting e.g. Centre, Trade & associated groups
- Community Engagement Plan

- Understand LGB&T issues - fully trained & understand specific histories, present & barriers
- Practitioner objectives re language, assumptions, history
- Can ask monitoring question
- Competent language use
- Understand usefulness of knowing how to integrate

- LGB&T Centre/Trade
- Recognising & responding to specific issues e.g. self-harm, alcohol, wellbeing, hate crime
- Care Pathways into other services
- Understand service provision including monitoring

- Tailored Services
- Confident Staff
- Visibly inclusive in service
- Obviously welcoming outside service
Issue:

LGB&T individuals face health disparities linked to social stigma, discrimination and denial of their civil and human rights:

- High rates of psychiatric disorders
- Substance abuse
- Self-harm and suicide
- Violence and victimisation

Early intervention in mental health rather than standard mental health care approach could deliver savings of £38,000 per person over 10 years-reducing need for hospitalisation and acute care-significant cost benefit.
Evidence shows many LGB&T people experience difficulties accessing mainstream MH services, because of fears of being judged and misunderstood in relation to sexual orientation:

- Specialist LGB&T Open Mind talking therapy service established to remove barriers

- Offers bespoke clinical service in a safe, confidential LGB&T friendly space.

- Improved mental health and wellbeing

- Worked with established local LGB&T Centre, Trade, mainstream mental health providers to develop a co-design approach.

- Promote positive mental, social, physical and emotional wellbeing in tandem with established local service provision.
Innovation - Opportunity for NHS services to support LLR’s LGB&T communities to improve access and outcomes in relation to mental health and wellbeing in partnership with local LGB&T provider services focusing on:

- One to one support with specialist IAPT practitioner
- Self-referral
- NICE approved evidence based psychological interventions
- Improved service user outcomes and recovery rates around depression, anxiety, panic disorder, OCD, phobias, stress, low mood etc.

Transgender:
- Developed a separate Transgender self-referral pathway to improve access into primary healthcare
- In line with updated national guidance on gender identity clinic referrals - people no longer need assessment by a psychiatrist before being referred to a gender identity clinic
- People with gender dysphoria can now be referred directly to a gender identity clinics (Nottingham & Northampton) by the Open Mind LGB&T service (NHS England approved)
- Ensures people with gender dysphoria who would have previously been to seek a referral only through their GP now have a choice of referral routes
LEICESTER CITY OPEN MIND SERVICE (IAPT)
SELF REFERRAL – Referral Options

Service User Self Refers

- Telephone
- Fax
- Post
- Open Mind Website
- Email

Potential Future Options depending on security etc.
LEICESTER CITY OPEN MIND SERVICE (IAPT)
SELF REFERRAL – Admin Team Process

Service User Self Refers

Referral Date

Admin Team receive Self Referral Form via Post or Fax

Admin Team complete Self Referral Form over the phone

Within 48 hrs

Admin Team Trace NHS Number

Admin Team enter Referral Form & Scan into PCMIS & Maracis

Log Book

Self Referral?

Referrals kept in folder in Admin Office

YE

LGB

Admin contacts service user or vice versa? (see “Admin Team Contact With Service User Process”)

NO

Log Book

20 working days after referral date?

YE

Admin contacts service user or vice versa?

NO

Log Book

Books 1st Appointment within Current Contacts

APPOINTMENT TYPE = ASSESSMENT & TREATMENT

OPT-IN DATE

Books 1st Appointment

YE

LGB

Assign to Initial Assessment

NO

LOG

Assigned directly to LGBT Therapist

1) CASE STATUS = DEACTIVATED – DECLINED TREATMENT

2) REASON FOR DEACTIVATION = NOT OPTED IN (Declined Service)

SERVICE USER SELF REFERS

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SERVICE USER SELF REFERS
LEICESTER CITY OPEN MIND SERVICE (IAPT)
SELF REFERRAL – GP Communication

Therapist discusses GP communication with Service User @ Initial Assessment

Is there any Risk?

YE

More detailed letter sent? Possibly alerts? ²

NO

Basic letter is sent to GP Surgery after Initial Assessment ²

Last Treatment Session?

YE

Basic letter is sent to GP Surgery after Final Treatment Session or case closed for another reason³

NO

Basic letter is sent to GP Surgery after Initial Assessment ²

Service to define what is contained in this letter³
LEICESTER CITY OPEN MIND SERVICE (IAPT)
SELF REFERRAL – Marketing & Publicising

Open Mind Website
The pathway has been aligned to the Interim Gender Dysphoria Protocol and Service Guideline 2013/14

NHS England are now responsible for funding hormone therapy rather than the GP

Is patient confident that current GP will support them through Hormone treatment?

YE

Hormone therapy may take up to a year after initial assessment at the Gender Identity Clinic

NO

Patient directed to the LGBT Centre/Trade to review the list of advocate GP’s who have a specialist interest in transgender issues

Therapist sends letter to current GP to confirm patient referral to the Gender Identity Clinic

The list of specialist GP’s will be derived from consultation with local trans support groups and the GP subscribing lead at the CCG

If the scenario that no agreement is given from any GP – what is the solution?

Patient responsible for selecting and transferring care to preferred GP from list

Therapist can continue to treat patient (see note in blue below)

Therapist can filter out through Initial Assessment those service users that are interested in being referred to the Nottingham Gender Identity Clinic

Note: This process is currently only applicable to the Nottingham Gender Identity Clinic

Dependent on the discretion of the patient, the Open Mind treatment can be completed either at the date the Gender Identity Clinic receive the Referral OR can continue until 1st Appointment at Gender Identity Clinic (current waiting list is 8 weeks) OR until treatment with Open Mind has completed (therapist can offer a MAXIMUM OF 20 SESSIONS).
National Organisations

Broken Rainbow
The UK's only organisation offering support to LGBT victims and survivors of domestic violence and abuse. The organisation runs a confidential helpline.
Tel: 0300 999 5428  www.broken-rainbow.org.uk

FFLAG
Families and Friends of Lesbians and Gays
A national voluntary organisation and helpline service supporting the parents and families of lesbian and gay people.
Tel: 0845 652 0311  www.fflag.org.uk

The Gender Trust
Provides support for anyone affected by gender identity issues.
Tel: 0845 231 0505  www.gendertrust.org.uk

Pink Parents
Pink Parents UK is a national project aiming to reduce the isolation and discrimination that LGBT families and families-to-be face.
Tel: 01380 727 935  www.pinkparents.org.uk

Pink Therapy
The UK's largest independent therapy organisation working with gender and sexual diversity clients aims to promote high quality therapy and training services for people who are lesbian, gay, bisexual and transgender and others who identify as being gender or sexual diversities.  www.pinktherapy.com

Additional sources of help

Adam Project
The ADAM (Action against Domestic Abuse for Men) Project supports male victims of domestic abuse in Leicestershire and also provides information and advocacy on relationship breakdown, safety planning, housing options, benefits, legal issues, budgeting, tenancy sustainment and signposting and referrals to other agencies.
Adam.project@wallaction.org.uk
Monday-Thursday 9am-5pm – Tel: 0116 242 6440
Friday 9am-4.30pm – Tel: 0116 242 6440

Leicester Parents Support Group
The group is made up of parents of gay, lesbian, bi-sexual and transgender children. It exists to help families and their children to understand, love and offer support where needed.
www.leicesterparents.org.uk

Counselling
Relate (relationship and guidance) 0116 254 3011 0116 255 8801
Leicester Counselling
Money and Legal Advice
Citizens Advice Bureau 0116 285 2081
Money Advice Centre 0116 242 1120
National Debtline 0808 808 4000

Employment
Job Centre Plus
Leicestershire Fit for Work Service 0116 285 1710

Addictions
Alcohol Advice Centre 0116 222 9545
Drug Advice Centre 0116 222 9555

Bereavement
CRUSE Bereavement Centre 0116 288 4119

Carers
CLASP for Carers 0116 251 0999

Mental Health
Leicestershire Focus Line 0800 027 2127
The Adhar Project 0116 220 0070
Saveria Resource Centre 0116 261 2837
Network for Change 0116 247 0335
Leicestershire Action for Mental Health Project LAMP 0116 255 6286

Victim Support 0300 303 1947

Domestic Violence Support
SAFE Domestic Violence Support Services for Women & Men in Leicester 0300 123 0918
Rape Crisis
Leicester Rape Crisis Helpline 0116 255 8852

Useful Websites
www.leicspt.nhs.uk
www.lampdirect.org.uk
enquiries@safedvs.co.uk

Leicestershire Partnership
NHS Trust

Open Mind
LGB&T Service

A talking therapy service for LGB&T people living in Leicester City who are feeling stressed, troubled, anxious or depressed, delivered in a safe and confidential LGB&T friendly space

For access to this service please contact 0116 295 2151
www.leicspt.nhs.uk

TRADE

LESGIAN GAY BI TRAN
the CENTRE
LEICESTER
LGB&T Open Mind IAPT service was officially opened on:

Wednesday 11 September 2013

By Kevin Mullins, National IAPT Programme Director, NHS England

Kevin Mullins
National IAPT Programme Director, NHS England

Norman Finlayson
Open Mind, Leicestershire Partnership NHS Trust

Paul Fitzgerald
Leicester LGBT Centre

Veronica Nall
Trade Sexual Health
Results:

- Comprehensive LGB&T training programme for both City & County IAPT services
- LGB & Transgender care pathway(s)
- LGB&T Service guide
- Memorandum of Understanding-LPT and LGB&T providers
- COMMS strategy
- Revised demographics screening
- Promotional film
- Opened by National IAPT programme Lead
- Improved trust & rapport between LLR’s LGB&T communities and service providers and Leicestershire Partnership NHS Trust and wider NHS health services
- Increased mainstream engagement with NHS services & access to further NHS provision without an increase in funding
- Now have a LGB&T JSNA presence-City/County
Moving Forward:

• Clinic now established and being utilised by our City LGB&T communities with steady flow of referrals—however much still to be done to ensure long-term sustainability, momentum and increase female and BME referrals into clinic—these challenges are consistent with what is happening nationally and require further work and partnership with specialist local and national providers going forward.

• Map achievements of service and outline way forward in relation to impact on physical/mental health, primary care and specialist mental health care etc.

• Issues—short, medium and log term
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Reading

Social work and lesbian, gay, bisexual and trans people
Making a difference

JULIE FISH

LESBIAN, GAY, BISEXUAL AND TRANS HEALTH INEQUALITIES

INTERNATIONAL PERSPECTIVES IN SOCIAL WORK

Edited by Julie Fish and Kate Karban
Reading


Bailey, L. et al. (2012) Trans Mental Health Study


http://jpubhealth.oxfordjournals.org/cgi/content/full/fdu105?ijkey=WVf8BccNSfrl
n9M&keytype=ref