Toe in the water

The double jeopardy of race and sexual orientation in North Wales

NISEN

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FOREWORD

Few studies as yet tell us about the circumstances and experiences of black and minority ethnic individuals who identify as lesbian, gay or bisexual, and fewer still against the backdrop of rural isolation.

This piece of exploratory research breaks new ground in as much as it provides a number of insights pertinent to those wishing to improve service delivery to marginalised groups, those wishing to understand the multi-faceted nature of people's identities, and how they are expressed, and to those in this position themselves who have not been given the confidence to speak out. But preliminary studies like *Toe in the water* are important not simply for what they illustrate and illuminate about the lived experiences of these individuals, but also in advancing knowledge about the complex inter-sections and interplay between forms of discrimination as they impact on the individual's sense of wellbeing.

As such, studies such as these provide a number of pointers for service providers and for future research.

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OVERVIEW

This research was devised at the North Wales Equality Centre and delivered by the North Wales Race Equality Network in joint collaboration with Stonewall Cymru and was funded by the Wales Equality and Diversity in Health and Social Care Research and Support Service Joint Initiative Funding.

The small-scale innovative project has successfully reached out to a hitherto unrecognised and ignored sub-population in Wales. The study has documented sensitive and previously unrecorded data. The cost to the two partnership organisations in bringing this project to a successful close has been considerable. It is only through the dedication and perseverance of staff and management that such exemplary outcomes have been achieved.

In regard to the future commissioning of cutting edge research initiatives a re-examination of levels of funding would merit consideration. Demonstrating a greater recognition and prioritisation of equality work through a more confident level of investment would help to promote engagement with traditionally excluded groups. Effective engagement is vital in order to enhance and legitimatise policy decisions through incorporating the valuable insights and experiences of marginal groups but it also fosters investment and good integration for people from traditionally excluded sections of the community (Williams & Baker 2009).

INTRODUCTION

This is a stand-alone Welsh piece of research with its own findings from talking to people who identify themselves both as lesbian, gay or bisexual (LGB) and black, minority ethnic (BME) through a variety of methods. However, because of the sparsity of UK research that looks at the intersectionality of race and sexual identity issues we think it is important to view this research alongside the work of the Everyone IN, the Minority Ethnic LGBT Project (2009) project which focused predominantly at agency / organisational level.

In the Everyone IN report the Black Ethnic Minority Infrastructure in Scotland, the Equality Network and Lesbian, Gay, Bisexual and Transgender Rights Scotland acknowledge the inherent major difficulties of accessing many respondents from this group in society. For example the Project's Roundtable Discussion brought together equality rights and advice organisations; statutory and voluntary sector bodies as well as lesbian, gay, bisexual and transgender (LGB and T) and minority ethnic (ME) organisations and half a dozen individuals who may identify as ME / LGB and T.

The key themes identified by the Everyone IN Project, which focused its research on the agencies providing services for ME / LGB and T people, included: the importance of having ME / LGB and T voices in service development or policy initiatives; the need for more concrete information / data from further community based research; the development of services and policies alongside such research; the need for greater work across and between sectors in particular for stronger partnerships between ME and LGB and T organisations. Commitment and

leadership at both a national policy level and at organisational level was also identified as crucial to facilitating and co-ordinating progress.

The key themes identified by the *Toe in the water* Project, which focused its research only on the experience of people who identified as lesbian, gay or bisexual (LGB) and black, minority, ethnic (BME) in a rural area, included the 'coming out' / disclosure dilemma; rural isolation and the contrasts between high visibility as a BME person and invisibility as a LGB person; the search for accepting peer support within BME and LGB communities; the need for access to appropriate information; and multiple discrimination and the need for role models.

Within North Wales there is no history of joint strand work in relation to sexual orientation and race. This *Toe in the water* Project used the unique strand specific knowledge of Stonewall Cymru and the North Wales Race Equality Network to develop joint strand collaboration and to establish initial contacts with this particular section of society. A variety of methods were utilised in this research and a phenomenological approach was used to enable participants to make their voices heard bringing to the fore deeper issues. Ethical boundaries and anonymity were essential rudiments in establishing the rapport and empathy so critical to gaining depth of information, particularly when investigating issues where the participants have a strong personal stake.

There were ten responses to the e-survey. Five of these were responses which fitted the research criteria. Three individuals also contributed their views through informal channels. Out of the ten e-survey respondents five were from an ethnic minority, including White European, Mixed race, Asian and Caribbean. Three of the participants were under 25. Sexual orientation identity included three gay men and two gay / lesbian women. Three participants lived in a rural location the other two were urban based. Four out of the five respondents agreed to be contacted for further research or participation.

The North Wales Race Equality and Stonewall Cymru are grateful to all the participants, and the Wales Equality and Diversity in Health and Social Care Research and Support Service for enabling this 'cross equality strand' exploratory research. We hope that the results will lead to further research in this area.

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RECOMMENDATIONS

1 Recognise and acknowledge the intersectionality between the equality strands of Race and Religion and Sexual Orientation. Aid the development of links and increased understanding between the two different communities (BME and LGB). This will alleviate the stress and fear of discrimination that LGB BME people suffer.

2 Support the development of peer support between people who identify as both LGB and BME. Encourage more joined up support and advice provision between single strand BME and LGB groups, this will increase the range of appropriate information available, raise awareness and increase the number of safe spaces for peer support.

3 Develop agency service provision to recognise and respond to the particular needs of people who identify as both LGB and BME. Public bodies and agencies need to signal that they are welcoming and confidential, doctors need to encourage patients to feel confident enough to disclose their sexual orientation, as this information may be vital to health diagnosis.

4 Increase visibility by encouraging and supporting role models. Having visible, open LGB BME leaders in society reassures others that they will not be discriminated against and encourages them to be out at work and home.

Summary of issues raised

The 'coming out' / disclosure dilemma
– the choice between disclosing your sexual orientation and possibly suffering rejection and discrimination, or not being out and possibly suffering isolation.

Rural isolation
A member of the BME community in a rural area experiences high visibility, but paradoxically a LGB person is often invisible to service providers, who are unaware of or prepared for the needs and issues of a LGB BME person.

The search for accepting support
The search for peer support from people of like minds, is there a gay scene and is it accepting of a BME LGB person.

Access to appropriate information
Access to appropriate information is difficult for a BME LGB person and this restricts choices to progress.

Multiple discrimination
Too many battles for acceptance from the BME community, the LGB community and general society and there are no role models to lead the way.

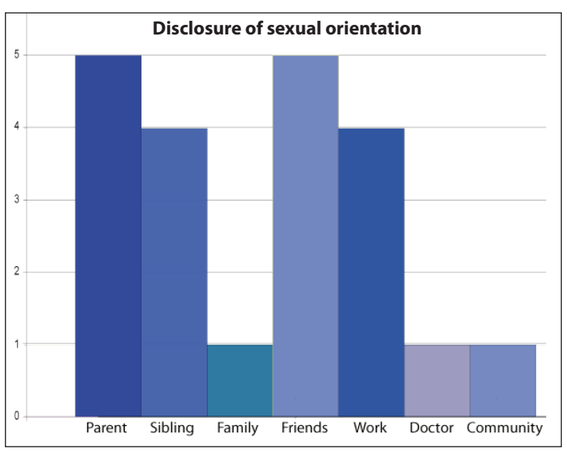
MAIN ISSUES

THE COMING OUT / DISCLOSURE DILEMMA

Coming out, that is the process of acknowledging that you are attracted to someone of the same sex / gender, often requires a choice between two equally undesirable alternatives, whether to disclose your sexual orientation and possibly suffer rejection, or not be out and possibly suffer isolation. Coming out is not necessarily a one-off event, LGB people may have to come out many times during their lives to a variety of people for support and services. How does being LGB from a BME community impact on that dilemma?

Identity is part of one sense of self, this can be extremely complex. Race and ethnicity are not 'natural' categories, even though both concepts are often represented as if they were. Their boundaries are not fixed, race and ethnic groups, like nations, are imagined communities. - Martin Bulmer

We asked participants to tell us who they had disclosed their sexual orientation to:



Despite the small sample size there appears to be a lack of confidence in the responsiveness and or acceptance from 'extended family', 'doctors' and 'community'. The lack of confidence in doctors is also reflected in the non BME respondents, and Stonewall research. This particular finding could be an effect of participants belonging to a younger age group however, it needs further investigation as the qualitative data is indicative but inconclusive. We asked participants to tell us the positive aspects of disclosure:

Being able to be myself - rather than a doctored version of myself.

Open minded towards sexuality.

'Meeting new people who are questioning or coming out.

Acceptance of, my sexuality by family and colleagues makes me 'normal' life.

I was fortunate that I was out and my parents sort of accepted that.

We asked participants to tell us the negative aspects of disclosure:

Hostility/ judgment/ attitude/physical and verbal abuse by community members / family.

Isolated in black community due to cultural pressures/ homosexuality not accepted.

People think we have enough to fight against due to your race let alone adopting this gay life choice which people see will cause more problems.

Often feel isolated in gay community as it seems to still be taboo - you can be gay, but you have to abandon your cultural / ethnic identity.

We asked participants to tell us how they coped:

I can not, (cope) I cry!

Leading a double life - one to show to community and another in private.

Being extremely careful when I am with narrow minded community people / extended family.

Making strong links with other gay black people.

A friend came out to his family, and then there was emotional blackmail from the mother, 'if you don't get married I will kill myself'. The whole family thinking you are bringing the family's name down. He did get married and succumbed to the pressure. After a few years, they had a child, eventually he did realise that he couldn't cope leading the two lives and he did tell his wife they divorced and he moved to London.

Particular reference is drawn to the double jeopardy of being twice as vulnerable which is afforded by the intersectionality of race and sexual orientation. The issue of being identified by the identifications that you share with those people and how all those aspects, or different identities, all point back to you. Disclosure of these identities may carry with them consequences for those who are included within, or excluded from, them.

RURAL ISOLATION

Rurality can compound feelings of being isolated and the coming out dilemma. A member of the BME community in a rural area experiences high visibility, but paradoxically a LGB person is often invisible to service providers, who are unaware of, or prepared for, the needs and issues of a LGB BME person.

LGB people, and those exploring their sexual orientation, can sometimes find themselves isolated in a hostile environment experiencing homophobic bullying and harassment. Add ethnicity to this emotive amalgam and one has a rural minority ethnic population of North Wales which is diverse and often very isolated. BME Individuals and groups in rural areas face similar challenges to those experienced by all rural residents however, they are often in a paradoxical situation which makes their experiences distinct. On the one hand, their low numbers, diversity and dispersed spatial distribution can make them highly visible within rural communities. On the other hand, these demographic features can also result in making them invisible to service providers. Furthermore, the low numbers of people in any one ethnic group, and the scattered nature of the population, diminishes the possibility of mutual support.

Isolation in a small minority; being a small minority within a small minority.

I think the main thing with isolation, especially in North Wales; there are two issues, obviously isolation [and] where there is nothing. You don't know if there are other LGBT people.

What we would need is more places - , there isn't anywhere (to go or find out where to go), maybe (we) need a group or something that would give advice or support for LGBT people. I know there are two in North Wales but that's not advertised extensively. You might see it in the Gay Times, but if people have no access to buying that then they are completely isolated.

I lived in xxxx, which was a city; obviously there were gay venues, gay support groups and various activities. Also lived in a smaller town, yyyy, that didn't have anything there, but there was enough community, because cities weren't that far, once people knew about each other they would meet up.

THE SEARCH FOR ACCEPTING PEER SUPPORT

The friendship and help of someone in the same situation and experiencing similar issues are invaluable, the importance of sharing the issues of coming out and dealing with discriminatory social attitudes and feelings of isolation are essential. The Stonewall Cymru website provides information on LGB peer support groups across Wales but these are scarce and often unfunded, and there are no BME LGB groups in Wales.

The search for peer support from people of like minds might bring a LGB BME person to the gay scene, but is that any more accepting than the BME community?

It would just be nice to be able to share and talk about our problems. It may just be half a day or half an hour, I'm with people that understand me or know me and I can be open. That just helps people to release that tension and anxiety that they have. Ok, then you go back to your 'other' life.

The LGB community are not aware sometimes of the additional pressures that BME people have, although they're accepting, there is no discrimination, but there is that additional pressure and they're not aware and they don't realise. So as a result they, the (BME) groups themselves, provide that support. I know one of my (BME) friends . . . his boyfriend couldn't understand why he couldn't move in with him. I remember discussing with him, explaining to his boyfriend that it's not that easy for him. I can understand. But it's that pressure from home as well.

One can ... feel isolated in gay community as it seems to still be taboo - you can be gay, but to abandon your cultural ethnic identity. I think the LGB group is more accepting and open. When I was in xxxx, when we used to go to clubs and things, you do find that there will be a big BME community but they'll all sort of congregate and meet up. They will provide the support to each other.

I feel Isolated in black community due to cultural pressures/ homosexuality is not accepted. People think we have enough to fight against due to your race let alone adopting this gay life choice which people see will cause more problems.

I feel can not be part of both groups BME Gay. If I am not accepted in Gay community and not accepted in Black community where do I belong? When there is . . . no one to turn to stress/ anxiety/ depression/ fear/ de-motivation/ isolation all these could lead one to contemplate suicide.

There was support in (English city), there's a group that was just for BME people. They have a dance or disco once a month. There were lots of BME

people, which became friends and knew each other. For some it was difficult to be out, they used to 'come out, but to the family they weren't out' . . . it would be great to have something like that (here), as there are people living in isolation. They could go to support groups but you have to travel to Liverpool or Manchester. In having BME support, you can better relate and understand, because there are the family and cultural pressure that are not the same for other groups.

Whilst the research base for peer support may still be in its infancy, the need for this type of service is strongly supported by participants' responses.

ACCESS TO APPROPRIATE INFORMATION

Access to appropriate information is difficult for a BME LGB person and this restricts choices to progress.

LGB BME individuals can suffer from being visible within their local community but invisible to those providing public services. Additionally, negative attitudes towards LGB / BME people may not be tackled effectively because the groups affected cannot easily build strong local support networks. Discrimination, social isolation and social exclusion and inappropriate services can lead to poor mental health, wellbeing and risk of suicide.

Research (Cook et al 2007, Cowen et al 2009, Stonewall 2007 & 2009) suggests that LGB people have very specific concerns that are not necessarily met by service providers and that LGB people can experience broad social inequalities. Discrimination and homophobia can have a significant impact on LGB people's engagement with society and infrastructures in society.

Traditionally LGB people have been under the radar, but now statutory and community agencies appear to take LGB into account in order to provide services. Several suggestions for disseminating services were put forward.

... through councils' website and in libraries. If resources allow it, in papers or whether local media will publicise Another good place would be (where) there are lots of BME communities . . . perhaps at a BME event.

Statutory agencies are not sure how to approach those at community level in terms of sensitive issues, there is reluctance on their part to cause offence. They do not know the protocol or who to approach.

... some community leaders think this sort of thing doesn't happen, somewhere else (but) not here. I think you just need to establish that relationship, that, ok, there may be some breaking that wall down a bit at a time. Maybe you may find somebody from inside, somebody from within that community.

It is different in cities . . . there are more people there so (statutory agencies) feel more confident. The agencies are there to look after LGB and provide services. In rural areas finances comes into play, the resources are scarce, agencies would rather such issues are left on back burner.

There is a lack of information, or information can not really be accessed, in relation to LGBT stuff. There isn't anywhere to go, or even for sexual side of thing for advice or check ups. There needs to be a better awareness of sexual health services.

I would be comfortable, but I know some people who are not because they feel they are being rejected or not being taken seriously, therefore they are a bit apprehensive about even telling their doctors that they're gay.

... because they're not confident enough and although there's confidentially, they'd fear would it go back to family or community? Agencies should . . . emphasise whatever's discussed is confidential and that there is respect for sexual orientation. I think people would feel more confident in an environment where they feel comfortable to discuss their issues.

MULTIPLE DISCRIMINATION

Taking on too many battles for acceptance from BME community, LGB community and general society and no role models to lead the way.

There are consequences of being written into or out of particular categories, individual multiple identities may be fragmented and segmented by category politics of locality or 'community' pressure. People are complex, with many different characteristics making up who they are. Internal and external perceptions of individuals may be at variance, and when characteristics challenge mainstream normative or stereotypical values individuals are faced with a dissonance of being true to one's self or creating an exterior that is apparently more acceptable to current cultural norms.

It's a very complicated issue, the cultural background is a part of the effect, but it's also an issue in relation to sexual orientation. When you come out to your family, you are effectively giving them a hot potato as they have to come out to other people, it's a passing down the line of this hot potato.

I think you find that 3rd generation, it's more accepting. There are still issues, there are some religions like Islam it's still not accepted, or in Jamaica, the West Indian culture, it's not the done thing. Although they may be (gay), but they still feel culturally its not (allowable), there's that force that would prevent them for being accepted or more out.

One of my friends he was a Muslim and a gay. When he came out he was sent to a psychiatrist and forced to go through this treatment that he really didn't want to do. You feel sorry for the person because . . . they're just coming out. Again there's all this pressure from all of them, he ended up being depressed and had a break down, because there wasn't anybody else to talk to.

I have had loads of chats with my friends and they say 'it's like you're leading a double life.' It's like you have to tell lies to the family. And at the same time, you don't want to do that. But you have to experience who you are. You're basically hiding your true self all the time. They find that very sort of. . . it creates a lot of pressure for them, to bring the two together.

I consider myself unique! From my personal view, I am comfortable being Asian and being gay. Ever since as teenager I discovered I was different, I never felt guilty, I just accepted that. Fortunately there wasn't that pressure from the family as well. They were very accepting. So I was lucky in that sense. But, I have seen from other friends who are BME and gay. It's difficult to reconcile the two lives.

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For further information
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