Project 3: The experiences of LGBT staff and people of faith

End of project report

April 2019

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1. **Background**

This report covers the following key areas:

a) Membership of the group  
b) Purpose  
c) Format of the project group  
d) Key highlights  
e) Recommendations

2. **Membership of the project group**

Ros Hunt  
Khakan Qureshi  
Stewart Selby  
Susannah Cornwall  
Siobhan Anderson  
Jagtar Singh  
Kate Buckley-Coole  
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Lizzie Streeter  
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Martin Hasani  
Zieda Ali  
Michael Booth  
Pete Mercer  
Sophie Barnes  
Parminder Kaur Kondral  
Sital Singh Mann  

Anglia University  
Birmingham South Asians LGBT  
College of HealthCare Chaplains / CHCC  
Exeter University  
Faith Belief Forum  
Jagtar Singh and Associates  
LGBT - NHS ENGLAND  
LGBT Consortium  
LGBT Humanists  
Liberal Judaism/GIRES  
London Queer Muslims  
NHS BOLTON CCG  
QGSDC London  
Stonewall  
Switchboard  
UK Sikh Healthcare Chaplaincy Group  
UK Sikh Healthcare Chaplaincy Group

3. **Purpose of the project group**

The **purpose** of the project group was to:

a) Establish mechanisms to help facilitate continued dialogue between the NHS and LGBT organisations with a focus on religion and belief through a set of agreed terms of reference and workplan.

b) Work together to capture and disseminate the specific needs of the marginalised groups, e.g. lesbian, gay, bisexual, and transgender (LGBT) staff who may be further marginalised in their own communities, particularly in faith and belief groups which have a strong heteronormative bias.
c) Work with individuals / representative bodies to capture the lived experience of members through creative and interactive means.

4. Format of the project group

Two meetings involving key stakeholders were arranged. Research, practice and the lived experience of key stakeholders was shared and eventually captured as part of three digital stories.

5. Key highlights

The following represents a summary of the key insights through themes that were shared in relation to this project:

• **Research and inequalities:** In a survey of 5,000 LGBT people, a third of lesbian, gay and bi people of faith (32 per cent) aren’t open with anyone in their faith community about their sexual orientation. One in four trans people of faith (25 per cent) aren’t open about their gender identity in their faith community. Only two in five LGBT people of faith (39 per cent) think their faith community is welcoming of lesbian, gay and bi people.

• **GP and first contact:** The need to address the key role of the GP in the journey of ‘finding a voice’ and the impact of this first contact on identity, stress and mental health.

• **Continuing professional development (CPD) and education:** Members highlighted the need to influence (a) the core curriculum of the education and training for all NHS staff; and (b) communication materials relating to these issues - including at GP practices.

• **Patient confidentiality:** The need for all staff to be aware of the importance of medical confidentiality.

• **Complexity:** Recognition of the fact that faith and belief are fluid and that individuals may lose or change their faith / belief.

• **Safeguarding:** Issues of safeguarding with regards to dealing with conversion therapy, wider spiritual abuse and instances of apostasy were highlighted – along with the impact on the individual.

• **Equality analysis:** The importance of the use of equality analysis when designing services was highlighted.

• **Intolerance and fear of change:** The group identified: a) the existence of long-held and deep founded ‘teaching’ of moral parameters that have reinforced intolerance and exclusion; (b) inevitable resistance to or fear of change; (c) fear of the ‘other’ and the risk of de-stabilisation if the conversation is not managed with care; and (d) the many conversations and negotiations required to bring about change – including “hearts and minds”, and cultural change.
6. **Recommendations of this project group only** (note these recommendations are specific to this project group only some will support the recommendations put forward to support the review of the 2015 guidelines & others will support future discussions with key individuals and bodies in the system)

(a) **Review of the 2015 Chaplaincy guidelines**: Include reference to the experience of LGBT and people of faith in the guidelines.

(b) **Policy**: Consider the findings of the 2018 Faith & Sexuality Survey which examined the role religious belief has on people’s understanding and acceptance of their sexual orientation in the UK.

(c) **LGBT and faith and health inequalities**: Look at ways of developing strategic partnerships with key stakeholders who represent LGBT people of faith in order to address health inequalities through the prisms of sexuality and faith and impact on health.

(d) **LGBT Advisor NHS**: Influence the work of the new advisory team with respect to work around health inequalities, health and wellbeing, safeguarding and the intersection between faith and sexual orientation.

(e) **Safeguarding**: Issues of safeguarding should be encouraged with regards to dealing with conversion therapy, wider spiritual abuse and instances of apostacy were highlighted – along with the impact on the individual.

(f) **Share the lived experience**: Communicate the digital stories developed as part of this project across the NHS as a communication and training tool.

(g) **Capture other lived experience**: It was highlighted during the project how important it was to also capture the experience of trans people and people of faith and intersex and other people of faith.

(h) **Support the development of resources**: The need to develop resources to help organisations - including chaplaincy departments - to develop inclusive environments welcoming LGBT people of faith.