

AN INDEPENDENT EVALUATION OF MINDOUT

The mental health project for lesbians, gay men, bisexual and transgender people in Brighton & Hove and beyond. 12 years on...

By Dr Paul Hanna, PH Independent Research Consultants, September 2011





Preface from the MindOut Trustee Board

MindOut is a key provider of services to Brighton and Hove's largest minority community and is one of the few LGB&T specific mental health services in the country. We have pioneered suicide prevention for LGB&T communities, as well as running a unique combination of advice, information, advocacy and peer support group work.

The MindOut Trustees Board would like to express how much they welcome this very useful independent summary of MindOut's work to date.

This evaluation is timely considering MindOut, formerly a project within Mind In Brighton & Hove, became an independent charity in 2010. MindOut has gone from strength to strength over past 12 years, and its trustees are very pleased to take over stewardship of this vital organisation. The MindOut project has always developed in response to service user consultation and increasing demand and this report is part of on-going review and development of our service delivery.

This evaluation highlights the profound impact that MindOut services can have for individuals. For the Trustees, it is heart-warming to be reminded of the very real and very valued contribution that MindOut makes to people's recovery. It encourages us to press on with our work to improve the well-being and resilience of LGB&T people with lived experience of mental health issues.

This evaluation also confirms that MindOut services continue to be enriched by a combination of:

- **advice & information**
- **casework & advocacy**
- **peer support group work**
- **mental health promotion**
- **anti-stigma campaigning**
- **LGB&T affirmative practice training**

This combination remains effective, useful and very much needed. It is still what people really want and benefit from. Our central values of empowerment and self-determination run throughout all these services.

The Trustees look forward to developing our local work as well as promoting good practice at a national level. We will be considering the suggestions made in this report in terms of future strategic planning, and developing the service based on the needs of service users.

The Trustees would like to thank everyone who took part in this evaluation, particularly the author, and all the staff and service users who continue to shape the future of MindOut services.

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1.

EXECUTIVE SUMMARY OF REPORT

1.1 Overview

MindOut in Brighton and Hove is a mental health service specifically helping LGBT individuals with mental health issues. Previously a project working from within Mind in Brighton and Hove (1999-2011) MindOut is now an independent organisation. MindOut predominately offers an advice, information and advocacy service, a peer support group service and seeks to raise awareness of the issues faced by LGBT individuals with mental health problems in the local LGBT community and general public. The most recent aims of the project proposed in 2007 comprise of five key elements to the service.

The five aims are to achieve:

- Improved access to appropriate mental health services for LGBT people.
- Reduced social isolation for LGBT people with mental health problems.
- Improved suicide prevention for LGBT people.
- Increased involvement in mental health promotion by LGBT people with mental health problems.
- Increased awareness and support around mental health in the LGBT community.

The current independent evaluation has been conducted to explore the extent to which each of these aims have/have not been met and propose recommendations for the future of MindOut. The evaluation was conducted in August and September 2011 and opens with a review of the need for such a specific service in the Brighton and Hove region. Following this, a review of MindOut's services over the past twelve years is presented to document shifts in the organisations aims, structure and services. Drawing on data collected by service users for this evaluation, attention then turns to a comprehensive

appraisal of the current services offered by MindOut. Here it is established that MindOut is achieving significant success in meeting its declared aims, whilst also often offering its service users added benefits.

1.2 Major achievements

Through the hard work and dedication of MindOut's workers, this evaluation finds that MindOut meets its aim of improving access to appropriate mental health services for LGBT people. In addition, the advice, information and advocacy service provides support and guidance on a range of additional issues such as housing and employment. This achievement is reflected in the increasing demand for the service and the voices of those currently using the service who also suggest the advice, information and advocacy service empowers them and offers hope and practical support in times of adversity.

This evaluation finds that MindOut's peer support group work provides an essential service to LGBT individuals with mental health issues. It offers support to individuals that they cannot find elsewhere due to the safe space in which such individuals are interacting with other people in similar situations, reducing isolation and suicidal distress.

In evaluating the recent implementation of 'themed' peer support groups this report finds that this added addition to the services offered by MindOut has been a success. Although in the early stages, the 'themed' peer support groups enable the homogenous 'LGBT identity' to be understood as more diverse, offering service users to overcome ►



Stamp Out Stigma: MindOut's annual campaign against the double stigma of identifying as LGBT and living with mental health problems (above)

► issues specific to particular aspects of their identity and experiences.

MindOut continues to successfully raise awareness of mental health issues experienced by LGBT individuals through its promotional strategies.

In addition, this evaluation commends MindOut's efforts to involve LGBT individuals with mental health issues in the awareness raising activities and the running of MindOut as an organisation.

1.3

Recommendations

Based on the findings of this independent review the following recommendations are suggested:

- **Expansion** of both advice, information and advocacy and peer support services, including funding sources, staffing and quantity of services on offer to cope with the increase in demand (potentially due to public sector funding cuts and/or MindOut going independent), reduce waiting lists, and enable the continuation of this essential service.
- **Extend the model** employed by MindOut to other LGBT communities. A high number of referrals from outside Brighton & Hove demonstrates need across Sussex.



SINCE ATTENDING THE GROUPS AT MINDOUT IT HAS HELPED ME ENORMOUSLY. I DON'T FEEL SO ISOLATED AND ALONE WITH MY PROBLEMS. BEING ABLE TO RELATE TO OTHER LGBT PEOPLE HAS REALLY HELPED ME ●●

- **Independent research** investigating the issues around the benefits of group membership in terms of recovery, factors involved in group retention rates and experiences of new members within the group service which would comprise of a full evaluation of the peer support group structure.

- MindOut needs to continue with the development of **'themed' peer support groups** and targeted groups for particularly isolated people, eg older people.

- The **promotion of MindOut within statutory services** and the further development of relationships between the two parties. ■

2.

INTRODUCTION LESBIAN, GAY, BISEXUAL, AND TRANSGENDER (LGBT) AND MENTAL HEALTH

“1 in 4 people, like me, have a mental health problem. Many more people have a problem with that.”



Read Stephen's story

time to change

LET'S end mental health discrimination

2.1 Current knowledge of mental health issues in LGBT communities

Mental health issues are certainly nothing new and are not isolated to LGBT communities. In 2008 the World Health Organisation reported that throughout the world, 450 million people suffer from 'mental disorders' with more suffering from 'mental problems' (WHO, 2010). Of course, those from a more critical orientation might suggest that this figure is merely a reflection of the ever increasing number of mental health diagnosis featured in the DSM (Diagnostic and Statistical Manual of Mental Disorders) (e.g. Marecek and Hare-Mustin, 2009). However, what most will agree on are the situated, embodied, real and difficult experiences of individuals with mental health problems. Further, what is also clear when examining mental health data is that certain groups in society are highly over-represented in experiences and diagnosis of mental health issues (e.g. Fox and Prilleltensky, 2009).

Research conducted throughout the western world has a tendency to agree that LGBT individuals are far more likely to experience mental health issues at some point during their life. For example, in Australia McLaren, Jude and McLachlan (2008) argue that increased rates of depression were found in gay men in comparison to their heterosexual counterparts. A recent large scale survey conducted in Ireland surveyed 1100 LGBT people online (age 14-73 representative of population) and conducted 40 in-depth interviews with LGBT individuals (Mayock et al., 2010). They found that 86% of online and 90% of interview participants had suffered

depression at some point, with over 60% of those interviewed attributing their experiences of depression directly to their LGBT identity. They also found that 77% of participants surveyed online had self harmed at least once with 50% having self-harmed more than 6 times in their life.

Further, their findings also suggest that one-fifth of their online participants and one-third of interview participants had attempted suicide at least once in life. They argue that females were more likely to have attempted suicide with a quarter of all female participants, compared to 15% of male participants, having attempted suicide at least once in their lifetime. In England and Wales the situation appears similar with Warner and colleagues' (2004) large scale research on 1285 gays, lesbians and bisexual people finding high rates of mental illness (43%) and attempted suicide (31%) amongst the sampled population.

The reasons for such high rates of mental health issues within the LGBT community are not fully understood however issues such as isolation and lack of belonging have been noted (e.g. McLaren, Jude and McLachlan, 2008). Furthermore, a growing body of literature suggests that there is a direct correlation between suffering homophobic abuse, and increased likelihood of mental health issues in LGBT individuals (e.g. Pitts et al., 2006). In their meta-analysis and systematic review, King and colleagues (2008) conclude that:

“...it is likely that the social hostility, stigma and discrimination that most LGB people experience is at least part of the reason for the higher rates of psychological morbidity observed”

This stigma, discrimination and harassment is experienced in high frequency despite the perception that the general public ►

MindOut Director of Services Helen Jones: getting the anti-discrimination message out to the Brighton community



I HAVE BEEN LIVING WITH FREQUENT SUICIDAL THOUGHTS AND I STRONGLY BELIEVE THAT THE SUPPORT THAT I HAVE RECEIVED FROM MINDOUT HAS HELPED STOP ME ACTING ON THEM!!! ●●

► are more aware of LGBT people (Ash and Mackereth, 2010). In addition, the healthcare sector is not immune to forms of LGBT harassment and discrimination. For example, Beehler (2001) argues that at least 25% of LGBT people experience negative attitudes from healthcare staff. In addition, the Department of Health's (2007) report suggests that LGBT individuals are often treated differently by healthcare professionals and face discrimination within the health system.

The prevalence of mental health issues within LGBT communities has attracted a growing concern. For example the *Journal of Child and Adolescent Psychiatric Nursing* has recently dedicated a special edition to LGBT and mental health (see for example Poster and Weber, 2010). In addition, it has also been argued that not only do LGBT individuals with mental health issues suffer prejudice within the healthcare sector, but they also face discriminatory practices within the LGBT community due to the stigmatisation of their mental health issues.

This 'double discrimination' potentially leads to enhanced isolation and prejudice within services and groups that only focus on LGBT issues or mental health problems, and thus it is suggested that services are needed that take into consideration that this group of individuals have LGBT issues and mental health problems (Johnson, 2007). It is at this intersection that MindOut targets its services.

2.2

Mental health issues among Brighton and Hove's LGBT community

Although the above review offers us an insight into the relationship between being LGBT and experiencing mental health issues it does not address the specific context of Brighton and Hove. Brighton and Hove is said to represent the 'gay capital of the UK' with around 14% (35000 individuals) of its population identifying as LGBT (Browne and Lim, 2010). Therefore, with a strong representation of LGBT people within Brighton and Hove, alongside the 'liberal' and 'bohemian' identity the city is said to possess (e.g. VisitBrighton); it could be assumed that issues of discrimination might not be as prevalent in this area. However, the recent 'Count Me In Too' (Browne, 2011) study in Brighton and Hove finds that this might not be the case. For example, they found that 73% of their research participants had experienced some form of hate crime over the past five years directly related to their 'gender' or 'sexual' identity. When turning to their data on mental health and housing their findings are equally as troubling. For example, their research found that 80% of LGBT people in Brighton and Hove were experiencing mental health issues and nearly ►



IT WAS VERY USEFUL BEING IN AN ALL-TRANS SPACE SO I DID NOT FEEL I HAD TO EXPLAIN MYSELF OR WORRY ABOUT BEING JUDGED. ESSENTIAL. THE MIX OF MENTAL HEALTH AND TRANS ISSUES WAS VERY IMPORTANT ●●

Service user talking about one of MindOut's themed peer support groups

► 25% of LGBT people had been homeless at some point in their lives. In addition, they found that 23% of LGBT individuals had seriously considered taking their own lives, a figure over 50% lower than that reported by the service users of MindOut (Saw and Jones, 2007).

Therefore, despite being situated within the 'gay capital of the UK' these findings mirror the troubling situation uncovered in other areas of the UK (e.g. Ash and Mackereth, 2010; Johnson, 2007), Ireland (e.g. Mayock et al., 2010), Australia (e.g. Pitts et al., 2006; McLaren et al., 2008) and the USA (e.g. Mustanski et al., 2010). However, Brighton and Hove does represent a city in which a number of charities and organisations function in an attempt to serve this population, it is these services in Brighton and Hove that the following section shall document.

2.3 LGBT and mental health service in the Brighton and Hove region

Brighton is fortunate to boast a number of charities and organisations which cater for LGBT individuals or individuals with mental health needs. Some of the more prominent include:

● **Allsorts Youth Project** in Brighton and Hove offers support for under 26 year olds who identify as lesbian, gay, bisexual, trans or unsure.

● **The Terrence Higgins Trust** which offers advice, guidance and support for individuals living with HIV.

● **Gender Trust** is a national charity based in Brighton which provides support and information for individuals who consider themselves transsexual, gender dysphoric or transgenderist, their partners, families and professionals.

● **Brighton Lesbian and Gay Switchboard** offering a counselling

service by LGBT counsellors and a telephone helpline.

● **Brighton Linkup** provides an alternative social group for those that do not like the 'scene'.

● **GOAL** group provides support for gay men affected by alcohol dependency.

● **Metonoya** offers a private counselling and psychotherapy to LGBT individuals.

● **Outlet Accommodation** offers housing advice for gay people in Brighton and East Sussex.

● **Lucas Bright, Sprit Space and Spring to Mind** all offer alternative therapy services from Andy Lucas such as hypnotherapy.

● **The Sussex Beacon** which offers a care service for individuals suffering from HIV and AIDS.

● Disabled lesbians – **GEMMA** provides a self-help group for disabled lesbians through befriending and support services.

● **Lezgetactive** offers a social group for lesbians and their families organising a range of events such as BBQ's, nights out, etc.

● **Threshold** is a mental health service provider specifically for women which aims to facilitate appropriate responses for women's mental health needs.

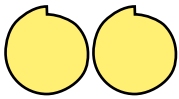
● **Broken Rainbow** offers support for LGBT people suffering domestic violence.

● **The Richmond Fellowship for Community Mental Health** based in Brighton and Hove offering one of the largest voluntary mental health services but not specific to LGBT needs.

This evaluation does not wish to speculate on the successfulness or need of these organisations but rather has presented this list in order to highlight one fundamental factor – that none of the above offer services specifically for LGBT individuals with mental health issues. ■

3.

HISTORICAL TRAJECTORIES OF MINDOUT



I'M PROUD TO REPRESENT MINDOUT, AN AMAZING ORGANISATION, WITHOUT WHOM I PROBABLY WOULDN'T BE ALIVE EVEN TODAY, LET ALONE FEELING ABLE TO TAKE PART IN PRIDE ●●

Service user talking about going on the MindOut bus at Brighton Pride (below)



The idea of having a mental health service specifically for LGBT individuals in Brighton and Hove came to the fore in 1998 when Brighton and Hove LGBT Switchboard approached Mind with the idea of providing a service that addresses the specific mental health needs of LGBT individuals.

From the initial idea, a number of meetings were held between Mind, Brighton and Hove LGBT Switchboard, local community groups, service providers and activists. From these meetings and negotiations it was decided that it would be beneficial for Mind to provide advocacy and group work services for lesbian and gay individuals with mental health issues, and training for service providers working with lesbian and gay individuals experiencing mental health problems.

Following the decision to incorporate a mental health service specifically for lesbian and gay individuals within Mind, an application was made to Comic Relief to fund the project. The funding bid was a success and in February 1999 MindOut was launched as a project within Mind in Brighton and Hove offering mental health support and advice to LGBT individuals in the Brighton and Hove region.

In its first year MindOut's key aims were to: A) establish a steering group for the project; B) establish a case work advocacy service; C) facilitate group advocacy; D) promote and commission homophobia awareness training for mental health service providers; and E) publicise and promote the service.

In both the 'Report on the first year of operation' (Jones and Worker, 2000) and the 'Independent evaluation of the first year of operation' (Platzer, 2000) there is an overwhelming sense that these aims were sufficiently met.

In its first year MindOut's advocacy service saw thirty eight people through its doors, twenty six of these identified as 'gay'

and twelve as 'lesbians'⁽¹⁾, at this stage there were no transgender or bisexual individuals using the service. However, 95% of those individuals seen in the first year of service declared that they were experiencing mental health issues.

In the same year, the group work had one closed group with eight regular attendees of whom five were gay men and three lesbians. By the end of the first year the group service had an additional four lesbian and fourteen gay men on its waiting list and the recommendation was made that an additional sessional worker should be appointed to facilitate another group.

Expanding service

Of course, over the subsequent twelve years MindOut has grown, developed and evolved almost beyond recognition. In 2003 MindOut's project experienced one of its greatest shifts in vision and user population with the inclusion of bisexual and transgender individuals to its service (these individuals were not actively rejected during the three years of Comic Relief funding, rather just not explicitly targeted).

The start of 2003 also marked the end of the Comic Relief funding with new funds coming from the local Social Services slippage, a substantial donation from a grateful client, and The Lankelly Foundation. During 2003 the advocacy service offered by MindOut worked with a total of one hundred and three people, a significant increase on previous years which also included fifteen individuals whom identified as transgender.

Group work service and suicide prevention

Group work also experienced a shift in emphasis from advocacy to support and two groups (one for men and one mixed LGBT) ran throughout the year. Forty two group sessions were held in total with regular attendance of twelve members in the men's ►

1) However there was not the option to identify as 'bisexual' or 'transgender' on the monitoring form.

MindOut wins the Stonewall Community Group of the Year Award:

(left to right) MindOut client Rowan Reid, TV celebrity Sue Perkins, Stonewall chief executive Ben Summerskill, MindOut Director Helen Jones, MindOut Senior Practitioner Jason Saw, rugby player for Wales Gareth Thomas



► group and seventeen in the mixed. In addition, a 'social space' was facilitated by the group workers at the end of the closed group session whereby individuals from both groups (men and mixed LGBT) and ex-members could meet in an informal but safe space. In the evaluation report for the period 2003-2004 (Jones, 2004) it was noted that the combination of the structured group sessions in conjunction with the social space was a great success providing a service for users which many suggested was the highlight of their week.

Following the end of The Lankelly Foundation funding in 2005 MindOut successfully secured three years funding from the Big Lottery. During this three year period of Big Lottery funding, MindOut once again tailored and developed its services. Acknowledging emerging research suggesting high levels of suicide risk in LGBT communities MindOut developed a peer support group specifically for LGBT individuals that had, or were experiencing suicidal distress. 'Out of the Blue' had sixteen individuals participating in the group sessions during 2006 and was a well received addition to MindOut's services in its six month evaluation. MindOut also addressed the prevalence of suicidal distress amongst the LGBT community through a research project they conducted in partnership with the University of Brighton and Allsorts Youth Project. This research sought to establish how discrimination and prejudice affects LGBT people's experience of suicidal distress and explore those individuals' survival strategies.

In addition to the integration of suicidal distress in the remit of MindOut, the 2005-2007 period also witnessed an increase in

the promotion of 'acceptance and support' for LGBT people with mental health problems. For example, in June 2006 MindOut featured on the front cover of the local magazine 'G-Scene' and has a three-page spread covering mental health issues in the LGBT community. MindOut, in collaboration with Brighton and Hove LGBT Switchboard, also hosted an LGBT mental health promotion event called 'Let's Get Better Together'.

Annual vigil for those lost to suicide

In December 2006 a suicide memorial tree was planted in St. Anne's Well Gardens, Hove, with a vigil held the following February for LGBT people, friends and family to remember those that have been lost to suicide.

The year 2007 saw the inauguration of 'Mind Out for the Laughs', a comedy night hosted at the Komedia in Brighton with LGBT performers, to raise awareness of the mental health needs of LGBT people. At the same time, MindOut saw 216 people using their advocacy service (April 2006 - March 2007) and continued their peer support groups with 78 individuals attending over the same period. Both of these aspects were seen to be complimentary to each other and essential to the Brighton and Hove area in an independent evaluation carried out by Hazel Platzer (2006).

A renewed funding agreement with the Big Lottery marked the start of 2007 and the current MindOut project entitled 'MindOut, Lesbian, Gay, Bisexual and Transgender mental health project'. It is this current project and the developments of MindOut's services over the past five years that our attention now turns. ■

4.

THE CURRENT PROJECT

MINDOUT – LESBIAN, GAY, BISEXUAL AND TRANSGENDER MENTAL HEALTH PROJECT



HELPING ME WITH GETTING THE MENTAL HEALTH SUPPORT I NEEDED, HELPING ME WITH MY HOUSING. WITHOUT THE HELP OF MY ADVOCATE I BELIEVE I WOULD BE DEAD ●●

4.1

The aims of the current project

In 2007 MindOut successfully renewed its funding agreement with the Big Lottery for an additional five years' financial support. Along with the PCT, the Big Lottery has enabled the continuation of MindOut's services in the Brighton and Hove region during times of austerity.

The main aims of this project were to achieve:

- Improved access to appropriate mental health services for LGBT people.
- Reduced social isolation for LGBT people with mental health problems.
- Improved suicide prevention for LGBT people.
- Increased involvement in mental health promotion by LGBT people with mental health problems.
- Increased awareness and support around mental health in the LGBT community.

In order to meet these specific aims MindOut predominantly offers two particular types of service: advice, information & advocacy, and peer support group work. In addition, MindOut also provides LGBT training to mainstream service providers and promotes awareness around LGBT mental health issues to LGBT communities and the general public.

Each of these four aspects directly addresses the aims listed above. For

example: 'improved access to appropriate mental health services for LGBT people' is directly addressed through the advocacy work; 'reduced social isolation for LGBT people with mental health problems' is achieved through peer support groups; 'improved suicide prevention for LGBT people' is predominantly established via the 'Out of the Blue' group work with its specific focus on suicide; 'improved involvement in mental health promotion by LGBT people with mental health problems' is undertaken through the promotional work at Pride for example; and finally, 'increased awareness and support around mental health in the LGBT community' is achieved through promotional events such as 'Mind Out for the Laughs'.

Therefore, on the surface it appears that MindOut has the sufficient infrastructure to successfully meet its aims with particular aspects addressing particular aims.

However, I would argue that having reviewed MindOut as an LGBT mental health service, each aspect of the service meets much more than just one aim.

I am also of the opinion that overall MindOut achieved success beyond its stated aims. Drawing on data from previous evaluations and open-ended questionnaire data collected from service users for the present evaluation, the following section shall provide a review of MindOut since 2007 to look at each of the services offered in relation to the aims listed above. The presentation of the evaluation in this way will enable what follows to highlight how MindOut is meeting its aims and also provide an understanding of any additional aspects its service users are suggesting it offers them. ►



**I GET TO MAKE A DIFFERENCE
TO DISCRIMINATION, STIGMA,
PEOPLE'S LIVES, HOW PEOPLE
ARE TREATED WHEN THEY ARE
IN NEED**

MindOut advocate, above

4.2

Advice, Information & Advocacy

As highlighted above, during the period April 2006 to March 2007 MindOut experienced two hundred and sixteen individuals using the advocacy service. Of these two hundred and sixteen, seventy five were men, one hundred and eleven women, seventeen were transgender with data on the additional thirteen unknown.

The period April 2010 to March 2011 saw approximately two hundred and forty four people using the advice, information and advocacy service. Of these, 48% were female, 42% were male and 10% transgendered. As with previous years, the majority of advocacy service users identified as white British and were aged 18-64.

Increasing demand for advocacy

These figures represent the continuing need for the advice, information and advocacy service and show how demand has increased at a steady rate over the period in which MindOut has operated. However, when reviewing the most recent data collected (April 2011 – June 2011) an unprecedented increase in service users is apparent.

This three-month period witnessed one hundred and sixty advocacy cases, a figure only eighty four short of that seen during the previous twelve month period. The individuals were once again mainly white British, with around 10% identifying as transgender and the other 90% split between males and females.

It is not within the remit of this evaluation to establish the exact cause of such a dramatic increase in demand for the advice, information and advocacy service however it can be speculated that two factors would have almost certainly had an impact.

Firstly, it was during this period that the first wave of major government cutbacks was felt in relation to the 132,000 public sector job losses implemented in 2010, with worse predicted for 2011 (Butler, 2011). Therefore, it is possible that the increase in advice,

information and advocacy service users is a direct reflection of the decreasing services offered through the public sector.

In addition, it was during the first week of April that MindOut became independent from Mind and moved to new premises at the Community Base, Queen's Road, Brighton. Thus it could be speculated that moving to the new premises which offer more access to MindOut's services due to its central location, coupled with the publicity surrounding MindOut going independent, may have had an impact on the demand for the service due to an increased awareness of the services on offer.

The structure of MindOut's advice, information and advocacy service has also shifted slightly since the start of 2011. An advocacy worker left their post at the start of the year due to uncertainty over funding. The recruitment process for a placement was unsuccessful and it was decided to be in the best interests of MindOut for a current part-time senior practitioner to undertake Advocacy Qualification Training and take on the post alongside the practitioner work.

In addition, it was also decided that a new 'case worker' position should be made available, the position was subsequently filled in the summer with the new 'case worker' starting in August. This position is designed to offer a more flexible, person-centred approach which can offer more than focused advocacy and longer term support for service users and the organisation more generally.

MEETING ITS AIMS

- **advice, information and advocacy**
- **improved access to mental health services**
- **reduction in isolation**
- **improved suicide prevention**

The advice, information and advocacy service offered through MindOut offers advice and information on a variety of issues such as, health, housing, relationships, finance, mental health treatments and many more. It could be suggested that the organisation provides a service similar to that offered by the Citizens Advice Bureau.

However, due to the specific focus on LGBT individuals with mental health issues the service is tailored for such individuals and ►



I'M VERY HAPPY WITH THE ADVOCACY RECEIVED AND WOULD LOVE TO BE ABLE TO USE IT AGAIN BUT WOULD ONLY USE IT AS A LAST RESORT AS IT IS UNDER-RESOURCED AND HAS MANY CLAIMS ON ITS TIME ●●

► provides a safe space for LGBT individuals with mental health issues to seek advice.

It is of particular importance here to reflect on the information presented in section 2.1 whereby it was suggested that many LGBT individuals with mental health issues experience discrimination within mainstream services and thus the specificity of this service appears essential. In addition, MindOut also provide advocacy via writing official letters on behalf of service users, attending meetings between service users and practitioners, and negotiates with service providers upholding the rights of the individual in all cases.

Of the one hundred and sixty advice, information and advocacy cases seen so far this year sadly only thirteen returned evaluation forms for this research, however, those returned proved a rich source of data. From the returned forms it was clear to see an overwhelming level of gratitude and appreciation for the advice, information and advocacy service received. For example, 85% of respondents found the advocate 'very supportive' as opposed to 'fairly supportive' (8%), 'fairly unsupportive' (0%), 'very unsupportive' (0%)².

High levels of support

This level of support felt by the advice, information and advocacy users was clearly an aspect that they valued highly and was consistently expressed throughout the qualitative element to this evaluation. For example, when asked 'what was most helpful about the work of the advocate' one respondent replied:

"Provided support for me in a very stressful meeting with my employer. Made a big positive difference to me"

Here then, the service user is clear to highlight that it was support they needed. The situation they found themselves in had become too stressful for them to deal with on their own and it was through the work of the advocate that they were able to overcome the situation, dealing with issues of employment, and enjoy positive change in their life.

Psychologically, it could be argued that the advocate in this situation (amongst many other situations) empowered the service user

in such a way that they were able to 'step outside' the subjectivity of a disempowered LGBT individual with mental health issues and agentically regain their own sense of 'self' (e.g. Foucault, 1990).

This regaining of the self was also expressed by another service user that suggested the most helpful aspect of the service they received was:

"The way they were happy to take over and advise and know who should be contacted. I feel like a weight has been taken off my shoulders"

Here then, it was the stress of the situation this individual was faced with when trying to establish who they needed to contact in order to deal with their situation that was having an adverse affect on their wellbeing. Through the knowledge, support and advice of the advocacy worker this individual experienced a 'weight being taken off their shoulders', a metaphorical way of expressing their reduction in stress, ability to cope and experience of empowerment, due to the work of the advice, information and advocacy service. This point is reiterated through 46% of service users expressing that MindOut's advocates enabled them to 'feel in control'.

This level of support can be seen as a clear example of the advice, information and advocacy service meeting the aim of providing improved access to mental health services. As one service user comments:

"Helping me with getting the mental health support I needed, helping me with my housing. Without the help of my advocate I believe I would be dead"

In this extract it is clear to see that access to mental health services is explicitly identified as the most helpful aspect of the advice, information and advocacy service. The service user identifies their need for access to mental health services which also infers that they were struggling to access such services prior to meeting with the MindOut advocate.

In addition, housing issues are also presented as a source of concern for the individual. It is through the help of the

² One respondent did not answer this question.



**...THE ADVOCATE SERVICE COULD
BE BETTER FUNDED SO THERE
WERE MORE ADVOCATES SO HE
WOULD HAVE MORE TIME ●●**

- ▶ advocate that not only are the logistical aspects of the service highlighted as important but also that this level of help and support impacts the overall wellbeing of the individual.

Thus through the powerful suggestion that the help of the advocate actually kept the service user alive it appears that the advice, information and advocacy service directly addresses the aim of suicide prevention in addition to its foundational aim of improving access to services. It was not only this service user that expressed a clear link between the work of MindOut's advocates and the potential for suicide had the service not be available. When asked if the service user received the outcome they wanted via the advocates help another service user commented:

"Yes – have a home, money, counselling and am still alive!" (emphasis in original)

It is through comments such as these that it is clear to see the impact that MindOut's advice, information and advocacy service has had on the lives of so many. In addition, it is also important to note that despite there being a number of alternative services available in the Brighton and Hove area (see section 2.3) providing an advice, information and advocacy service specifically for LGBT individuals with mental health issues is essential.

This is the case due to the overwhelming array of information, active barriers to people using other services due to real or anticipated discrimination, previous poor experiences or discrimination from others; resulting in feelings of disempowerment and in some cases, suicidal distress. Further, it can also be suggested that the empowering effects of MindOut's advice, information and advocacy service do not stop with the individuals being able to cope with accessing services but this also appears to span out into their everyday life with 46% suggesting that they feel 'less isolated' due to the service received.

The extent to which MindOut's advice, information and advocacy service was helpful to the service users is clearly highlighted through the examples above. However, it is also reinforced through the following comments. When asked if there were any additional comments they wished

to make about the advice, information and advocacy service one service user notes "I loved my advocate". This expression of affection clearly highlights the importance of the work carried out by the advocates, a point that is also clear to see when examining comments regarding the ways in which the advocate could improve their service. When asked 'Was there anything the advocate could have done differently or better' two service users commented:

"Could not have been more helpful"

"Not really I am most grateful for the availability of the advocate"

In addition, 69% of service users stated that they were 'very satisfied' with the level of service received and 15% quite satisfied, resulting in 85% suggesting that they would recommend the service to a friend⁽³⁾. The only negative aspect of the advice, information and advocacy service expressed by individuals using the service was the need for enhanced funding. As the following comment:

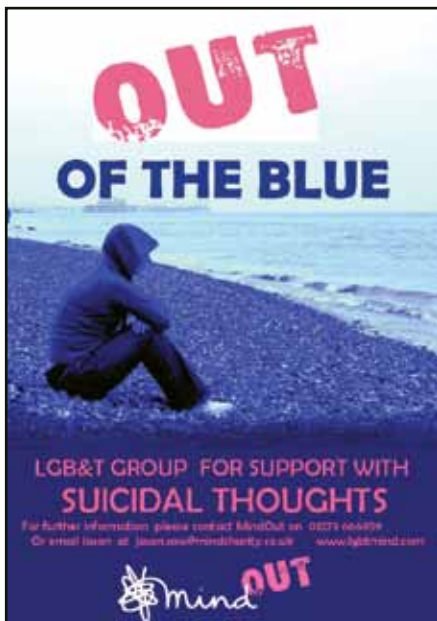
"...the advocate service could be better funded so there were more advocates so he would have more time"

"Very happy with the advocacy received and would love to be able to use it again but would only use it as a last resort as it is under-resourced and has many claims on its time – more funding please"

"...still hard due to limited time"

Therefore, from reviewing the advice, information and advocacy service offered by MindOut it appears that this aspect of their organisation provides an essential service to the local LGBT community with mental health issues. Not only does the service enable access to appropriate mental health services but it also empowers these individuals to resolve issues surrounding employment and housing. Through this work the individuals that access the service experience increased wellbeing effects as documented above. The following section provides an independent review of the peer support groups currently offered by MindOut. ▶

3) Two service users did not complete page two of the evaluation form therefore these percentages could represent a total of 100%



4.3 Peer Support Groups

In addition to the advice, information and advocacy service offered by MindOut, their peer support group services constitute an important aspect to their organisation. The peer support groups are split into a range of individual groups offering slightly different types of group structure and focus. At present, MindOut is currently running four formal groups and two informal groups. These groups are as follows:

Formal Groups

- 1) Open group** – x1 mixed – provides a space for LGBT individuals with mental health concerns to meet in a safe setting to talk to each other about their experience, worries etc – facilitated by a group leader.
- 2) Mixed group** – (9 week sessions) – same as Open mixed group however has an intake of individuals on week one which stay in the same group for the duration of the 9 weeks, people can drop out of the groups but no one can join after the first two weeks – facilitated by a group leader.
- 3) Themed groups** – The themed groups are a recent addition to the peer support group services offered by MindOut. These groups are closed groups with a similar structure to the closed groups listed above. The first of the themed groups offered was a ‘mens’ group, with the second themed group, a ‘trans’ group, currently running – facilitated by a group leader.
- 4) Out of the Blue** (mixed suicide prevention group) - provides a safe space for LGBT individuals who are or who have experienced suicidal distress to meet others in a similar position - facilitated by a group leader.

Informal Groups

- 1) Weekly social group** offering current and ex service users the chance to meet over a coffee and food after the formal groups. This space allows individuals from the different groups to come together in a social capacity.
- 2) BlackOut**- less formal social group that since the departure of the organiser has now ceased to meet (still used for publicity to show that the service is there for BME LGBT mental health sufferers) – un-facilitated at present.

As a large number of the returned forms showed that many individuals attend/have attended more than one formal group (11 more than one group, 12 open group only, 3 out of the blue only, 5 trans group only, 3 mixed only, and 1 men’s group only). Further, from analysis of the feedback from service users there is considerable overlap in the responses from each group[s]. Therefore, the following section shall evaluate the peer support groups as a whole followed by a specific focus on the themed ‘men’s’ and ‘trans’ groups as these represents a new aspect to the peer support group system.

MEETING ITS AIMS

- reducing isolation,
- suicide prevention,
- empowerment and wellbeing - Open, Closed and Out of the Blue groups

One of the main aims of the peer support groups offered by MindOut is to reduce isolations for LGBT individuals experiencing mental health issues. As mentioned in section 2.1 and 2.2, LGBT individuals with mental health issues experience high levels of discrimination.

Understood as ‘double discrimination’ these individuals often experience stigma and discrimination from the general population due to their LGBT identity. In addition, within the ‘safe space’ of the local LGBT community where many LGBT individuals find a sense of belonging, LGBT individuals with mental health problems often suffer discrimination due to their mental health issues.

The result of being misunderstood in both communities often transpires into isolation, anxiety, lack of self-esteem and depression.

However, the peer support groups offered by MindOut attempt to provide a space in which LGBT individuals with mental health issues can meet with other individuals in a similar situation and thus provide social support in an environment that is non-discriminatory. From my evaluation of this service it appears that this goal is being met with the peer support groups providing LGBT individuals with mental health problems the chance to feel part of a community, offering hope, reducing isolation, enhancing wellbeing and often reducing suicidal distress.

In a similar light to findings of past



IN THE SIX YEARS I HAVE BEEN COMING TO OUT OF THE BLUE IT HAS BEEN THE MOST AMAZING EXPERIENCE AND IS MY LIFE LINE. IT ALLOWS ME TO FACE MYSELF AND MY ISSUES. I HONESTLY DON'T THINK I WOULD STILL BE ALIVE WITHOUT IT ●●

Service user talking about MindOut's suicide prevention peer support group

► evaluations, the peer support groups received very positive feedback from service users. Positive words such as: 'enjoyable', 'comfortable', 'warm', 'open', 'supportive', 'understanding', 'empathetic', 'safe', 'caring', 'life-saving', 'welcoming', and 'honest' among many others were consistently found throughout the service users evaluations of MindOut's peer support groups.

In this feedback it is clear to see that the peer support groups provide a specific space in which LGBT individuals with mental health issues can meet each other enabling a reduction in experiences of isolation. For example, one service user comments that MindOut's peer support groups provide:

"A very useful opportunity to share experiences with others in a similar position, who will understand rather than judge. It can reduce the feelings of stigma and isolation"

Thus, it is apparent from this account that the experience of 'double discrimination' is not simply an academic hypothesis but rather a real experience for LGBT individual with mental health issues. The peer support groups offer these individuals with a space in which they do not feel judged, an experience presumably far removed from their everyday life in which the general population or LGBT community do not understand them resulting in feelings of isolation and experiences of discrimination.

It is here then that the peer support group service enables an alternative understanding of the 'self' and their 'identity' which would not be possible without such a specific service on offer. As another service user elaborates:

"Since attending the groups at MindOut it has helped me enormously. I don't feel so isolated and alone with my problems. Being able to relate to other LGBT people has really helped me"

Therefore, the peer support groups do not only enable a reduction in isolation by default of bringing people together. Rather, these groups enable a reduction in isolation which helps these individuals to better understand their experience of being an LGBT individual with mental health issues facilitating an enhanced ability to 'cope'. In addition, they provide a sense of 'belonging' which has long been linked to enhanced self-esteem and confidence (e.g. Lee and Robbins, 1998)

Peer support group service users also offer insights into the benefits they receive through attendance in relation to MindOut's

aim of suicide prevention. As highlighted above, 'Out of the Blue' offers a specific group setting for individuals experiencing suicidal distress and thus we could expect that feedback from users of this group relates to their experiences of suicidal distress. For example, as one member of 'Out of the Blue' comments:

"In the six years I have been coming to Out of the Blue it has been the most amazing experience and is my life line. It allows me to look within and find ways to face myself and my issues. I honestly don't think I would still be alive without it"

It is clear from this account that providing a specific group for the needs of LGBT individuals with mental health issues who are also experiencing suicidal distress is essential. As this account suggests, without the invaluable work of MindOut and in particular the 'Out of the Blue' support group this individual does not feel that they could cope with the situation they are faced with.

Therefore, it appears that MindOut is enabling individuals with suicidal distress to cope better and to essentially 'stay alive'. At this stage it is hoped that the words of the service user above emphasise just how important the 'Out of the Blue' peer support group is for the local LGBT community with mental health issues.

However, through analysis of responses from all the service users that returned the group evaluation forms, it becomes apparent that the peer support groups more generally (e.g. open group, closed group) also facilitate the reduction in suicidal distress for their users. For example, there are many examples when peer support group service users have commented how their engagement with the service has "Kept me alive", or been "Life changing and saving", to highlight but a few.

As a current/past member of the open group and both closed groups (not 'Out of the Blue'), one service user elaborates on this issue in more detail stating:

"Over the past few years, I have been living with frequent suicidal thoughts and I strongly believe that the support that I have received from MindOut has helped stop me acting on them!!!"

It is clear then that although not specifically established to facilitate the reduction in suicidal distress all peer support groups offered through MindOut are having that effect on their service users.

In addition to meeting the specific aims ►



**ONLY OTHER TRANS PEOPLE CAN
EVER KNOW WHAT IT IS REALLY
LIKE, AND HOW MUCH WE ARE
REJECTED BY SOCIETY** ●●

Service user talking in relation to one of
MindOut's themed peer-support groups

► of MindOut, the peer support groups also enable a sense of empowerment and enhance general wellbeing. For example, when asked to write down what comes to mind when thinking about attending peer support groups one service user notes:

"I have never been to anything like this before and now I am good Tuesdays and feel positive after the group session and all day Wednesday"

From the above extract the service user implicitly documents the daily struggle [s]he faces through his/her suggestion that the week tends to be filled with negative emotions. It is through participation in the group that this service user feels empowered to overcome some of these negatives even if only for a short period.

In addition, another service user highlights how the peer support groups enabled the taking control of a situation and ability to cope. Commenting on the peer support group service offered by MindOut the service user quite aptly comments:

"Thank you for turning my life around"

Themed groups: Men's and Transgender group

As mentioned in the introduction to this evaluation, dedicated focus shall now be given to the 'Men's' and 'Trans' 'themed' peer support groups due to their recent introduction as an additional service offered by MindOut.

At present such themed groups are at the early stages of a 'trial period' with the completion of the 'men's' group, the 'trans' group currently being offered and three other groups expected to run over the coming 18 months. Therefore, this evaluation can only offer a relatively small insight into the usefulness of 'themed' groups.

However, bearing in mind the that transgender service users consistently felt as though their specific needs were being overlooked at times by MindOut in the 2010 feedback forms, it is expected that the findings from this aspect of the evaluation could prove extremely significant.

The feedback from the themed groups suggests that such groups were a welcome addition to the peer support group services offered by MindOut. For example, users suggest:

"It was very useful to be in the Men's group, more of the same please"

"Keep themed groups"

"Themed groups are very useful"

In addition to the general positive experience of having such themed groups, the majority of service users that had used the men's group, or were currently using the trans group, elaborated on the benefits of such specific group interactions. For example, as one 'men's' group service user comments:

"A specific group has enabled me to feel safe and to understand and share experiences with others in similar situation"

Thus it would appear that offering a group with a more specific 'identity' enabled the service users to feel more embedded in the collective identity of the sub-group rather than the more general LGBT identity. This aspect of belonging to a sub-group within the broader LGBT community was a particularly salient feature in the evaluative comments offered by individuals accessing the 'trans themed groups'. As a number of the service users' comment:

"It was very useful being in an all trans space so I did not feel I had to explain myself or worry about being judged. Essential. The mix of mental health and trans issues was very important" (emphasis in original)

"Totally invaluable. I could not have spoken about a huge amount of stuff if I hadn't been in this specific group, especially early on in my transition, exactly what I needed"

"Only other trans people can ever know what it is really like, and how much we are rejected by society"

"I was able to ask questions that are very personal to me without feeling like a prat or a freak. I was therefore able to deal with these trans issues and feel confident in doing so"

"Trans issues are so often ignored/ relegated or worse deemed the same as LGB that this trans group has proved a godsend. While I am not discounting that LGB does cross over with trans, things like surgeries, isolation and trans phobia are often different"

Thus, from this feedback it appears that offering specific groups, in conjunction with the more general LGBT groups, is an ►



**MINDOUT HAS SHOWN ME HOW
PEER SUPPORT CAN WORK; IT
HELPS THOSE NEEDING SUPPORT,
IS BENEFICIAL TO THOSE OFFERING
SUPPORT, AND BUILDS GROUP
COHESION AND A SENSE OF
COMMUNITY**

MindOut volunteer worker

► essential element to the wellbeing of the service users. It is clear to see that although a sense of belonging is felt within the broader LGBT identity, these individuals often feel that the specifics of their situation can be overlooked when such a broad focus to the needs of LGBT individuals is adopted.

In addition, for this group of transgender individuals, they were able to express and understand shared experiences with other trans people which are often different to the shared experience they have with the other LGB service users at MindOut.

In fact, it would appear that celebrating each aspect of the general 'LGBT' identity, rather than homogenising LGBT individuals as a collective, indistinct group, is important for the service users of MindOut. This is a point highlighted by one of the 'trans' themed group users through her recommendation that the identity of 'trans' also needs to be unpacked in more detail to cater for the differing experiences of trans-women and trans-men. As she comments:

"As I was the only trans-woman for most of the time I was at a disadvantage, a minority within a minority...Would very much like a trans-woman only group or a lesbian group with T women next time please"

Therefore, it appears that operating 'themed' groups has been very successful further providing support for LGBT individuals with mental health issues. Based on the success of the men's and trans themed groups so far, it is suggested that more attention needs to be paid to the diversity of needs within the broader 'LGBT' identity in order to enhance the level of service experienced by all of MindOut's service users, particularly in light of negative feedback from the trans group in past evaluations (e.g. 2010 feedback forms).

Service user recommendations

Within the group evaluation forms the service users were offered the chance to suggest any recommendations they feel could be made. Of the recommendations listed a number of individuals commented that more funding was needed in order to offer more services. Other service users noted the need for "more social activities", "Perhaps having a quiet room for those who get anxious when it's busy", and another suggested that MindOut should revise its food policy recommending "Healthy food – vital when suffering with depression".

Such recommendations are relatively minor when considering the overall service

offered by MindOut and shall not feature in the recommendations of this evaluation. Nonetheless, it is suggested that these particular recommendations are taken up, or rejected, at the discretion of the Director of MindOut.

However, within the recommendations service users listed there appears to be one that does warrant more consideration that of group size and member retention. As two service users comment:

"Not changing the groups as often. We get used to the group and then the dynamics seem to change and people seem to disappear. In the past the closed groups stayed the same, different now as new people all the time"

"Very understanding and supportive, however several people dropped out and the group got smaller and smaller"

Issues with group retention are not easily resolved and it is not within the remit of this evaluation to speculate on possible ways in which this could be done. However, it is suggested here that research should be conducted with peer support group service users and members that have left, in order to establish possible causes for drop-out rates within the closed groups.

In addition, it is also recommended that a review is conducted to explore the group structure to see if there could be structural changes, such as a specific group for long serving members, which may facilitate greater retention rates. It is however acknowledged that the current system was put in place to provide wider access to the service and also accepted that the current financial situation may not permit changes.

In concluding on this evaluation of the peer support service offered by MindOut it is clear that this aspect of the organisation meets its specific aims whilst also providing added benefits such as empowerment and enhanced wellbeing. The overwhelming majority not only commended MindOut's peer support groups for the safe space it provides, opportunity to meet other LGBT individuals and reduction in stress and isolation, but also, as one service user points out:

"MindOut is a life saver"

It is on this comment that I wish to finish the evaluation of the peer support groups as I believe that it encapsulates what so many other service users have said and felt. ►



4.4 LGBT mental health promotion

As highlighted in section 4.1 two of MindOut's aims concern: increase involvement in mental health promotion by LGBT people with mental health problems, and increased awareness and support around mental health in the LGBT community. Although these aims will, in part at least, be fulfilled through the offering of MindOut as a service within the local LGBT community promoted through leaflets, and through 'word-of-mouth' in relation to those using the service passing on information and advice.

There are also more targeted measures adopted by MindOut to meet these aims. For example, MindOut is successfully in its fifth year of the comedy night 'MindOut For The Laughs' at the Komedia in Brighton. This event is run by LGBT comedians and thus facilitates an increased involvement in mental health promotion by LGBT people with mental health problems. In addition, the annual event helps to raise money and awareness for MindOut whilst also increasing awareness and support around mental health in the LGBT community.

MindOut also organise the event 'Stamp Out Stigma'. This event is run on the annual world mental health day and constitutes an 'open' walk (e.g. anyone can join in) along Brighton seafront to show a commitment to ending stigma and discrimination against LGBT individuals who have mental health issues and raising awareness for the general public. Last year this event was attended by hundreds of people including guest speeches from Paul Elgood Leader of Brighton Liberal Democrat Party and Scott Durairaj from Sussex Partnership NHS Foundation Trust. Thus, as with the 'MindOut For The Laughs' event, 'Stamp Out Stigma' facilitates the engagement of LGBT individuals with mental health issues in the promotion and awareness raising of LGBT mental health issues to the LGBT community and general public.

More specific events and strategies aimed at increasing awareness and support within the LGBT community include the 'MindOut Annual Suicide Memorial Candlelit Vigil at MindOut Memorial Tree'. This event was set up to raise awareness of suicidal distress within the LGBT community, and offers the chance for friends and family of LGBT individuals suffering from suicidal

distress to remember those that have been lost. This event was held in 2010 but did not go ahead in 2011 due to constraints on resources. Of the strategies aimed at increasing awareness and support within the LGBT community, MindOut write monthly articles for the local LGBT magazine GScene, their work with GScene has also included special editions in June 2006 and September 2009.

MindOut is also actively involved in Brighton and Hove's Pride Festival. This year saw Alexandra Burke headline the festival with between 33,000 to 50,000 people attending the main event and hundreds of thousands at the street parade (Manson, 2011). For this year's festival MindOut once again organised their open-top bus for the street parade and to take service users to the main event. Brief comments were obtained on the day from those service users that were on the MindOut bus during pride and through analysis of these comments it appears that the MindOut open-top bus was once again a great success and benefit to those individuals. The comments obtained include:

"This is the first time I have been on the bus and it is great. My anxiety and agoraphobia make it hard in the crowds and this is such a cool and safe way to take part"

"The bus for pride is so important for me to be able to take part...It also provides a safe way in terms of anxiety to get to the park without having to cope with all the crowds on the streets, which would also be too much to cope with"

"It [the bus] helps lessen the anxiety being with friends and workers from MindOut, who work hard making sure we are hydrated and have the suncream we always forget to put on. I'm proud to represent MindOut, an amazing organisation, without whom I probably wouldn't be alive even today, let alone feeling able to take part in Pride"

"Because of my mental health problems, I wouldn't be able to come to the Pride festival in Brighton because I'd get too anxious because of the crowds. Staff always look after us really well, and, don't look after us in a disempowering way, but just in a way that they are there for us and supportive and we all just feel part of a team. Erm, MindOut as a whole continually save my life throughout the year, so it's good to celebrate my Pride with a service that saves my life and keeps me living, keeps me breathing, keeps me sane-ish"

► Therefore, it is clear from the comments above that not only does the organisation of the open-top bus at the Pride festival raise awareness of LGBT mental health issues amongst the LGBT community (and general public), but it also facilitates the involvement of LGBT individuals in this promotion as it provides a 'safe space' through which the service users can engage with the festival more generally. It is also clear to see that without the involvement of MindOut in this festival, many of these individuals would avoid participating altogether due to the issues surrounding anxiety and stress these individuals experience in busy public places. In addition, MindOut's involvement in Pride enables these individuals to feel part of the broader 'LGBT' community through the 'taking part' in the festival whilst also offering many of the benefits associated with MindOut's more general services in isolation reduction amongst other aspects.

4.5 Staffing

Although there are clear drives for MindOut to empower LGBT individuals to be involved with the promotion of LGBT mental health issues (as highlighted above) it would appear that their inclusive, or participatory action approach, goes much further than their outward activities. It is only from a review of the current staff and volunteer data that it is clear to see the extent to which MindOut has truly embraced such a commendable approach. For example, the current staffing and volunteer figures include: 8 trustees, 6 staff and 3 volunteers. Of these 17 individuals currently involved in the running of MindOut 4 identify as female, 6 male, 3 trans and 2 other (with 2 not completing this aspect of the form); 5 of these identify as gay, 4 lesbian and 3 other (with 5 not completing this aspect of the form). Finally, 10 of the individuals currently working or volunteering for MindOut declared lived experience of mental health issues with 7 being current or ex mental health service users and 3 current or ex MindOut service users with the remaining 2 people identifying as carers.

Not only does this highlight MindOut's commitment towards inclusivity, but it also shows the extent to which they act on experts' recommendations for their service. For example, this level of inclusivity can be seen as a direct response to, and improvement on, a key recommendation made in the first independent review conducted by Hazel Platzer (2000). In this review Platzer comments "User-led activity should be supported and encouraged to promote peer support mechanisms such as drop-ins or socials in safe lesbian and gay community

settings and also with mainstream mental health services...Users could also be more involved in publicising the project" (p4). Therefore, with the activities organised by MindOut such as 'Mind Out For The Laughs', in conjunction with their participatory action approach adopted in their staffing demographics, it appears MindOut have expanded on and gone beyond their 2007 aim for the increased involvement in mental health promotion by LGBT people with mental health problems, by involving LGBT individuals with mental health issues not only in the promotion, but also in the very heart of the running and management of the MindOut organisation.

In order to include the opinions of the staff and volunteers at MindOut in this evaluation an open-ended questionnaire was sent out to those concerned. Unfortunately only four of these forms were returned. However comments from these workers shall now be presented in order to conclude this evaluation and capture some of their opinions with regards to the work they do and the work of MindOut more generally.

"I get to work in a field I believe matters. I get to make a difference to discrimination, stigma, people's lives, how people are treated when they are in need...MindOut is a great employer – very responsive, inclusive of staff views. We do so much to really include service users in all aspects of our work and organisation"

"Very proud of the work that I do, very supported by team/manager, I have a lot of confidence in Helen and the Trustee Board, flexitime is fab, I love MindOut for the Laughs, I get lots of job satisfaction, good outcomes from case work/advocacy, user involvement and participation"

"Helping people feel good/better. It's an ideal way to get involved in a project that means something to me. It has shown me how peer support can work; it helps those needing support, is beneficial to those offering support, and builds group cohesion and a sense of community...Seeing how people who talk about feeling suicidal can be supported. It's great seeing how the advocacy service can benefit some people – they have a weight taken off their shoulders"

"Volunteering in this role at MindOut gives me lots of scope to contribute to all this happening. It is great to be able to do this with some personal involvement with service users via the cooking and growing work"

Thus, it is clear from these comments that it is not only the service users that benefit from MindOut as an organisation, but also those working and volunteering for the service. ■



MindOut staff regularly feature in Brighton & Hove's local LGBT magazine, GScene

5. CONCLUDING REMARKS COMMENDING SUCCESS AND RECOMMENDING IMPROVEMENTS

5.1 Highlights of MindOut as a unique service

This evaluation has not only highlighted the need for an LGBT mental health service in Brighton and Hove (and potentially elsewhere) through a review of the problematic situation faced by such individuals (such as 'double stigma'), but it has also shown how MindOut is meeting the needs of this community. In addition, the bold move taken by MindOut to run independently from Mind in Brighton and Hove, coupled with the increasing public sector cuts, and rising service user figures, suggests that MindOut as a mental health service for the LGBT community should continue to flourish for years to come.

The extent to which MindOut provides an indispensable service to LGBT individuals with mental health issues can be emphasised no clearer than through the numerous suggestions of its service users who state that MindOut provides a 'life line' and offers the strength, support and determination to 'stay alive'.

This evaluation has found that through the hard work and dedication of the workers, MindOut meets its aim of improving access to appropriate mental health services for LGBT people.

In addition, the advice, information and advocacy service provides support and guidance on a range of additional issues such as housing and employment.

This achievement is reflected in the increasing demand for the service and the voices of those currently using the service who also suggest the advice, information and advocacy service empowers them and offers hope in times of adversity.

It has also been documented that MindOut's peer support group work provides an essential service to LGBT individuals with mental health issues. It offers support to individuals that they cannot find elsewhere due to the safe

space in which such individuals are interacting with other people in similar situations, reducing isolation and suicidal distress.

In evaluating the recent implementation of 'themed' peer support groups this report finds that this added addition to the services offered by MindOut has been a success. Although in the early stages, the 'themed' peer support groups enable the homogenous 'LGBT identity' to be understood as more diverse, offering service users the chance to express issues specific to particular aspects of their identity and experiences.

This development in MindOut's services appears particularly important for transgender individuals who in previous evaluations have suggested that their specific needs are sometimes overlooked. Finally, MindOut continues to successfully raise awareness of mental health issues experienced by LGBT individuals through its promotional strategies.

In addition, this evaluation commends MindOut's efforts to involve LGBT individuals with mental health issues in the awareness raising activities and the running of MindOut as an organisation.



THE MOST IMPORTANT FOCUS OF MINDOUT'S IMMEDIATE EFFORTS OUGHT TO BE ON SECURING FUNDING TO ENABLE SUCH A VITAL SERVICE TO CONTINUE ●●

5.2 Independent recommendations for future improvement to the services offered by MindOut

In light of the findings of this independent review, the following recommendations are suggested to further enhance the service offered by MindOut:

- **Expansion** of both advice, information and advocacy and peer support services, including funding sources, staffing and quantity or services on offer to cope with the increase in demand (potentially due to public sector funding cuts and/or MindOut going independent), reduce waiting lists, and enable the continuation of this essential service.
- **Extend the model** employed by MindOut to other LGBT communities. A high number of referrals from outside Brighton & Hove demonstrates need across Sussex.
- **Independent research** investigating the issues around the benefits of group membership in terms of recovery, factors involved in group retention rates and experiences of new members within the group service which would comprise a full evaluation of the peer support group structure.
- MindOut needs to continue with the development of **'themed' peer support groups** and targeted groups for particularly isolated people, eg older people.
- **The promotion of MindOut within statutory services** and the further development of relationships between the two parties.

Having highlighted these recommendations it should also be made clear that the most important focus of MindOut's immediate efforts ought to be on securing funding to enable such a vital service to continue. ■

6.

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