

# NEW WRITING - LEAD ARTICLE

# Eww 'one of them'...! On being gay and disabled

# Gudrun Limbrick

Gudrun Limbrick is one of the founding trustees of the Handsel Trust having worked for the organisation which paved the way for the Trust, One Hundred Hours, since its inception in the early 90s. Gudrun is a social researcher by trade, and has conducted several significant pieces of research in both lesbian and gay issues, disability issues and other issues relating to social exclusion and community mapping. She is currently running the Handsel Trust's research into the needs of families of young children with disabilities, <u>the SOFTY Survey</u>.

# Summary

Best estimates suggest that around 10% of the population identifies as lesbian, gay or bisexual. We often forget that this means that 10% of the disabled population are also gay. While there are undoubtedly issues for some disabled young people who are beginning to explore their own sexuality, there may be additional challenges for those who identify as gay. This article endeavours to examine some of the key issues that may warrant thought when practitioners are working with disabled people who are gay.

#### Introduction

I have Cerebral Palsy. I find that people most often have an unconscious block when it comes to my disability ... I think in society generally, disabled folks are considered asexual and not very beautiful. Forum contributor

Sexuality is not an easy topic for many people. It is, however, what keeps the world going and sex and sexuality are fundamental parts of the lives of the majority of people. For parents and carers of young people, it can be easier to put off that 'birds and the bees' conversation for as long as is humanly possible. The discussion about the gay birds and the gay bees may never happen at all. Throw disability into the equation and many of us would rather bury our heads in the sand than tackle the issues. As the above quote suggests, many of us would rather see disabled people as asexual.

Being gay has become a lot more socially acceptable in recent years. Equality in the age of consent, the advent of civil partnerships, the ending of Section 28 (which outlawed the 'promotion' of same-sex relationships by local authorities), and anti-discrimination laws have all given a legal structure in which more and more people have been able to 'come out' revealing their sexuality to the world. In the world of politics, sport, pop music, religion and television, celebrities and notables are declaring their gayness and becoming role models for young people who are becoming aware of their own homosexuality.

But is this filtering through to the disabled world? Researching for this article, I trawled the internet looking for information about being gay and disabled. I searched for information for gay and disabled people, information for parents and carers, information for people working with young disabled people, and academic tracts but found very little at all. I also got in touch with the large disability organisations to see what they could suggest. Through disabled organisations, I found little relating to being gay and, through gay organisations, I found little relating to being disabled. It seems that, although this is an important and difficult topic, there are relatively few resources to help families, individuals and service providers.

This article intends to look at the issue of being gay and disabled from the perspective of the gay person and to explore the implications for care providers. The topics for discussion are:

- 1. Coming out
- 2. The gay community
- 3. Social care issues
- 4. Assumptions of heterosexuality
- 5. Cultural sensitivity
- 6. Resources

The quotes used to illustrate the text are taken from discussions by gay and disabled men and women on Facebook, a social networking site and from interviews carried out with young disabled people by the author.

#### **Coming out**

I had juvenile epilepsy... and... the lack of understanding of it and of queer sexualities was such that I had a very hard time on all sorts of levels. I was overprotected because of epilepsy, was bullied for never taking part in football ... and protected myself as a teenage boy against rampant heterosexuality. This meant a shy reclusive young man who stayed at home and read. Forum contributor 'Coming out' is the process a person goes through to let someone know that they are gay, or think that they might be gay. It is by no means a one-off event, but an on-going process as different people come into our lives. Telling family and friends can be a huge step but, for many gay people, it can be coming out to ourselves, realising that we are gay, which can actually be the most difficult time. For many, this often comes at that time in our lives when hormones are going crazy, family relations are stretched to their limit and confusion and stroppiness reign – puberty.

So how does this differ for the young person with disabilities? In essence, it does not. There are the same fears, doubts, uncertainties and worries about rejection. And yet many disabled people describe having to go through particular difficulties.

The quotation above illustrates one of the key issues experienced by some people overprotection. Parents of disabled children can be overprotective of their children, fearing that they are vulnerable out in the big, wide world. This is a natural emotion, and certainly not exclusive to the families of children with disabilities, but can leave young people feeling unable to make their own way. Add to this the feelings of concern that parents might have about their children embarking on emotional and / or sexual relationships, and then add in the uncertainties and fear about a child embarking on gay emotional or sexual relationships, and parents may come to feel very overprotective indeed.

Anyone exploring their own sexuality and who they are as a person needs privacy. They may also want opportunities and time to meet with other gay people. For a disabled person with limited mobility or independence, this may not be easy. Many gay people tend not to come out as gay to their friends and family until after they have had a first same-sex relationship (in other words, until they are sure). The kind of privacy this needs may not be possible for someone who has limited independence or overprotective parents.

Anyone working with an individual or a family at such a time, will be aided if they can 'read the signals' and realise what is happening despite the secrecy that people coming out often employ. Tact and diplomacy are key attributes! The coming out experience for an individual can be critical in how they view the next years of their lives as a gay person. A poor coming out experience can damage a relationship with the family irreparably while also creating trust issues within the individual's other relationships into the future.

## **The Gay Community**

I was born with muscular dystrophy and other birth defects. It sucks how the general LGBT [lesbian, gay, bisexual, transgender] community doesn't include us. If they do, they expect us to be as muscular as we can. Or, they think we're asexual, which we're not. Forum contributor

There are a number of support and social groups which are aimed at gay people who have disabilities, some of which are detailed below. These groups have few resources – no paid staff and little money – and tend to be run by volunteers. This does not mean that they are not of value but does mean that the support they can offer is necessarily limited. Primarily aimed at the individual gay person themselves, for some they are a life-saver. For others, they are not appropriate, or not in the right geographical area.

The gay community itself has an infrastructure based around exclusively gay or gay-friendly pubs and clubs and community groups. This is a limited infrastructure with the vast majority of community group again lacking funding, premises and paid staff. There are undoubtedly practical issues around accessibility such as a lack of wheelchair access, hearing loops and sign language, Braille or audio information, and other issues.

> I am a member of the LGB [lesbian, gay and bisexual] society at University, but can never do anything with them as 99.9% of the group is fully able-bodied.

> > Interviewee

Asking disabled gay people if they felt, as disabled people, part of the gay community, responses were not always positive.

'Eww "one of them"' is how I appear to be seen by the gay community. 'Eww "one of them" is how I appear to be seen by the disabled world. I don't fit into either category (gay or disabled) very well. Being a minority within a minority – whichever way you look at it – I just don't fit. But I love my fiancé and he loves me so at the moment it's all good – has been since August 2008.

Interviewee: Ben Haysom-Newport

The male gay community has long been stereotyped as one which is based on aesthetics and appreciates the body beautiful to the exclusion of those who are 'different'. While this is a generalisation and by no means true of the community as a whole, there are pockets of this which can be damaging for some individuals. In the gay press, positive images of disabled gay men are few and far between.

There is always a temptation to refer gay disabled people in need of support onto resources within the gay community in the belief that they will have the know-how to deal with someone who is gay. It is important to be aware, however, that they may not have the resources to deal with someone who is also disabled.

#### Social care issues

The needs of the LGBT community are ... unrecognised within social care provision. Social care providers need to recognise that all disabled people have the right to express their sexuality and to form relationships, and providers need to cater for the needs of LGBT disabled people rather than assuming that all disabled people are heterosexual and have uniform needs.

Regard (see under 'Resources' below)

A 2007 survey by the Commission for Social Care Inspection (now the Care Quality Commission) suggested that nearly half of disabled gay, lesbian and bisexual people who use social care have faced discrimination by their service providers.

These days, there is not only a human imperative to reduce the level of discrimination, but also a legal imperative. The Equality Act (Sexual Orientation) Regulations 2007 made it unlawful for a person providing goods, facilities or services to members of the public to discriminate against anyone on the grounds of sexual orientation. This legislation applies, of course, to care service providers.

Guidelines have now been issued to support people working in health and social care (by the Department of Health – details below). From the perspective of the gay individual, this article would like to focus now on two key areas through which individual care providers can make a real difference.

## Assumptions of heterosexuality

The Commission for Social Care Inspection survey mentioned above, found in their last review that, because of the discrimination experienced, less than 40% of their gay disabled respondents felt comfortable enough to come out about their sexuality. Coming out to care providers is not easy. Many individuals fear a bad reaction to their sexuality. As a care provider you may feel that you are approachable and accessible, and that no-one would imagine that you would be shocked or homophobic. However, gay people do not necessarily fear a bad reaction because of what they know about the individual concerned, but purely because they have had negative reactions from other people or services in the past.

Additionally, we tend to assume everyone is heterosexual – which can make it difficult for individuals to contradict us. Because perhaps 90% of the people we meet are heterosexual, we tend to assume that everyone is. Not only are we statistically likely to be correct but it means that we avoid 'offending' people by suggesting that they might be gay when they are not. This, however, does not help the 10% of people who are gay and who find it difficult to let people know they are gay when they are assumed to be straight. Being aware of this and using non-genderspecific pronouns and terms is easy (once you get used to it) and very reassuring for the gay person who might be assessing whether or not they can come out to you.

Asking about a 'partner' and what 'they' do, is much more accessible to a gay man than asking if they have a 'girlfriend' and what 'she' does, and yet most heterosexual people will not even notice the subtle change.

## **Cultural sensitivity**

My dealings with social services in my new area has been fantastic. I moved here to move in with my fiancée, so they knew from the start. My Occupational Therapist has been brilliant – treating me as half of any 'normal' couple, she's fantastic.

#### Interviewee

Being gay is not a big deal. Most gay people are happy not to have to talk about it all the time, and for it not to be a key issue. This is particularly true of gay people who are settled in stable relationships. But it is important, in the interests of creating a positive experience, for those working with them to keep in mind that the individual is gay so that approaches and conversations can be culturally sensitive.

It is likely that most discrimination experienced by gay individuals in care provision is not deliberate. Those who tell gay jokes, make derogatory comments and refuse to carry out certain care activities for gay people are thankfully only a minority.

Most discrimination, we assume, is unintentional and happens because people do not take the time to learn about individuals and their relationships. Taking the time to talk to an individual about how they see their own gay lives is a key step in not succumbing to stereotypes which can be unwittingly offensive and discriminatory. A simple step can be to ask a woman, for example, how they like to be described on paperwork. There are a few options – lesbian, gay woman, homosexual, for example – and taking the time to learn which an individual prefers is generally appreciated. This may seem like a minor concern, but using terms which mirror the individual's own preferred terminology is reassuring and limits the risk of causing offence.

Taking the time to learn about lifestyles and aspirations, in the majority of cases, will tell a familiar tale. Gay people are rarely different in most respects from their heterosexual counterparts. The sensitive approach recognises this 'sameness' and the normality and individuality of the gay person while leaving space to remember the challenges a gay person may face – or may have faced in the past.

#### Resources

The author has compiled this list of resources with the help of some key disabled organisations and some key gay organisations. Some are more useful that others, some are more relevant than others. It is hoped that, as a whole, the list will support those working with gay disabled people. If you have comments to make on the value of any of the resources listed, or you have further resources to add, please contact the author.

**Regard:** The National Organisation of Disabled Lesbians, Gay Men, Bisexuals and Transgender (LGBT) People.

The group aims to raise awareness of disability issues within the LGBT communities, and to raise awareness of sexuality issues within the disability communities. The group also works to combat social isolation amongst their membership and campaigns on issues specifically affecting disabled LGBT people.

Regard is a membership organisation. They welcome membership applications from all those defining themselves as Disabled LGBT People as well as from friends and supporters.

Membership is free in cases of financial hardship. See website for more information on how to join.

#### http://www.regard.org.uk/

**Outsiders:** This is a community of disabled people who campaign for the acceptance of disabled people as sexual partners. They run a self-help club for people with physical and social disabilities to find love. They offer help and advice to the disabled community and health professionals and work with other disability groups to increase understanding and work towards solving personal problems faced by people with disabilities. They produce a leaflet entitled 'Disabled and Homosexual'. Outsiders is not specifically about gay issues.

http://www.outsiders.org.uk

Guidance from the Care Quality Commission: How we promote the rights of people whatever their sexual orientation. This is guidance for inspectors of social care providers but it also makes very clear and useful reading for social care providers and practitioners.

http://www.cqc.org.uk/guidanceforprofessional s/socialcare/careproviders/guidance.cfm?widCal l1=customWidgets.content\_view\_1&cit\_id=262 1

Department of Health briefing: Reducing health inequalities for lesbian, gay, bisexual and trans people – briefings for health and social care staff. A comprehensive series of briefings which are very helpful for front-line workers and service managers.

http://www.dh.gov.uk/en/Publicationsandstatist ics/Publications/PublicationsPolicyAndGuidance /DH\_078347

The following resources are about disabled people and sexuality, but not specifically gay sexuality:

**PMLD and sexuality:** A fact sheet from Mencap. It covers –

- What is the law?
- Do people with profound and multiple learning disabilities need sex education?
- How can a person without the capacity to consent to sexual activity express their sexuality?

http://www.mencap.org.uk/document.asp?id=1 616&audGroup=&subjectLevel2=41&subjectId= 9&sorter=1&origin=subjectId&pageType=&page no=4&searchPhrase=

Growing up, sex and relationships: a booklet for young disabled people: This is produced by Contact a Family. It mentions gay relationships briefly.

http://www.cafamily.org.uk/pdfs/GrowingUpYo ungPeople.pdf

# Growing up, sex and relationships: a booklet to support parents of young disabled people: This is produced by Contact a Family. As the companion leaflet above, this is a very clear, useful guide which mentions gay relationships very briefly.

http://www.cafamily.org.uk/pdfs/GrowingUpPar ents.pdf

**Relationships:** This is produced by Scope. It is a clear, useful leaflet which briefly mentions being gay.

http://www.scope.org.uk/downloads/action/pu blications/lifestyleoptions/relationships.pdf

# Young disabled people can have sex and

*relationships:* This is produced by Brook. The booklet includes a short section on gay, lesbian and bisexual relationships. Available for a fee from Brook.

http://www.brook.org.uk/content/M8 1 sexrela tionships.asp

**Note:** Gudrun will be writing a follow-up article on this topic for IQJ in 2010. If you have thoughts, experiences or resources that you would like to contribute on the issues mentioned in the article, or if you have questions or queries you would like to put to the author, please contact her at <u>glimbrick@virgin.net</u>