
Lived experiences and their consequences for health in sexual and ethnic minority young adults in the UK – A qualitative study

A BRIEFING REPORT

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- *“With being a woman and then being black and then also being pan, even though that doesn't really come up in most consultations or anything. But yeah, I think those identities together make it a lot harder. So yeah, just kind of having to work really hard to get help or support is a problem.”*

PID17 – Black British Nigerian pansexual woman

- *“People will always talk, people will always discriminate, so I just do what I have to do, I don't care about what people think, I don't care about who will judge me, so I'm just myself and I just love doing what I love to do.”*

PID27 – Black-American gay man

- *“The only way I get to prove my point is reversing the tables, so whenever I am speaking to a white gay man who talks about their racial preferences, I'm like ‘oh no, that's perfectly fine, because I don't date white guys’ and then all of a sudden ‘that's racist.’ And it's like ‘but really? But you don't see the “no black and no Asians” in your bio as racist, but suddenly me not dating a white guy is racist’ and then I have to explain that it's not that I don't date white guys, I don't date a particular brand of white guys who believe that there's no racism in racial preferencing.”*

PID23 – Kashmiri gay, queer man

Background

Substantial research shows that young individuals who identify as sexual and/or gender minorities (Lesbian, Gay, Bisexual, Transgender or Queer [LGBTQ+], collectively referred to as sexual and gender minority) have higher rates of mental ill-health (such as depression, anxiety and suicidality) and poorer wellbeing than cisgender heterosexual individuals^{1,2}. Specifically, sexual and gender minority individuals are more likely to report adverse health-related behaviours or self-harm such as substance abuse (for example, use drugs and drink excessively) and risky sexual behaviour compared to their cisgender heterosexual peers². Sexual and gender minorities continue to face discrimination in various social contexts and often refrain from disclosing their sexual and/or gender identity due to fear of adverse consequences. This is despite the considerable progress in political and sociocultural rights and acceptance sexual minorities have gained in many countries in recent decades, including the UK^{1,3,4}. However, the overwhelming research on health in sexual and gender minorities has been largely restricted to White individuals, with very few studies examining health in those individuals who identify with both sexual minority- and ethnic minority identities (and including gender and/or religious minority identities)⁵.

Why do we think it is important to study lived experiences and health in young adults who identify as being both ethnic and sexual minority?

Ethnic minorities in the UK are more likely to face discrimination, be bullied or harassed both in schools and workplaces (regardless of their sexuality and gender identity)⁶⁻⁸. Ethnic and sexual minority individuals are even more likely to face discrimination and experience higher levels of stress as they must balance living with multiple minority identities (which may also include gender, faith and religious identities) compared to individuals with one minority identity. It is hypothesised that this added stress due to multiple forms of identity-related discrimination impacts lived experiences, expectations, and aspirations ultimately affecting health in multiple minority individuals. However, no study in the UK has comprehensively examined health and wellbeing in ethnic and sexual/gender minority individuals. Further, this study focuses on young adults as adolescence and young adulthood is a critical period of increasing self-awareness and social exploration with self-identities and greater numbers come out at earlier ages⁹.

In addition to addressing a significant gap in research knowledge, findings from this study could help inform public health policy to improve the lives of ethnic and sexual/gender minority individuals^{4,10}. It could also help contribute to the design of future research projects.

Further, the research addresses health and equity issues outlined in the **2018 Government LGBT Action Plan** such as the need to ‘improve our understanding of the needs of specific groups within the LGBT population...’ including those of ethnic minority individuals¹¹.

Aim of the study

The main aim of this study was to examine the intersection of multiple minority identities (ethnic-sexual-gender-religious) to better understand diversity in the lived experiences of ethnic and sexual/gender minority young individuals and their risk in regard to mental health and wellbeing.

Methodology

This study collected information on lived experiences, health, and wellbeing via in-depth semi-structured qualitative interviews. To be eligible to participate, individuals had to self-identify as being *both* ethnic and sexual minority (any form of either identity). Participants had to be between 18 to 30 years of age and resident in the UK for a minimum of 5 years (nationality or immigration status did not matter).

Participants were recruited in multiple ways: advertising and networking via project-dedicated social media accounts (Instagram and Twitter), snowballing (asking participants to disseminate information about the project through their networks) and liaising with sexual minority organisations/charities (for example advertising on their websites). The research team also spread information about the project in their social networks. Our goal was to recruit 30 individuals from a diverse range of ethnic and sexual minority backgrounds. Once a prospective participant expressed interest to take part, the individual was provided with a participant information sheet (which explained the aims of the study, what the interview entailed, and confidentiality issues) and a consent form (which had to be signed and returned before the interview). All interviews were conducted online and in English using *Microsoft Teams*. Participants were reimbursed with e-vouchers for their time and participation.

The semi-structured interview (based on a published protocol¹²) consisted of 5 main sections: **1. Life Story, 2. Social Identities &**

Communities, 3. Challenges, Stress & Coping, 4. Healthcare Utilisation and 5. Reflections & Goals (See page 24 for further information).

Interviews were designed to be completed within one and a half hours. The interview protocol was used as a framework to structure the interview and collect information we considered integral for this project. However, participants could highlight and discuss any issues not included in the protocol.

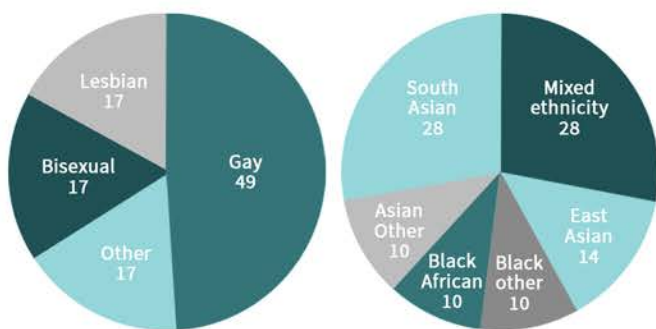
Two members of the research team who identify as being sexual minority conducted all interviews. These two members developed familiarity with the interview data by reviewing the interview material and participating in the transcription process. They took detailed notes throughout and arrived independently at similar overall themes. These two lists of identified themes were then consolidated into a master list or codebook which represents a list of major codes with code definitions. They were consolidated through iterative discussions between these two researchers and the project Co-Principal Investigators (Co-PIs). Patterns within the codes were then determined in order to categorise the data into four overarching categories. The whole research team subsequently reviewed the codebook, alongside the interview data, and were satisfied that they are a good representation of the content of the interviews. Interview material from one participant was judged not be useable and was excluded from analysis.

Main Findings

Interview material from 29 participants were transcribed and used in the analysis. Figure 1 gives an overview of the participants' key demographics. Mean age of participants was 24 years. The majority (56%) of participants identified as South Asian or mixed ethnicity, and 49% identified as gay. Only 4 of the 29 participants did not currently identify with their sex assigned at birth. 22 of 29 participants mentioned an explicit experience of racism (this included racism from within the LGBTQ+ community as well as wider society). 26 of 29 participants mentioned past or present experiences with mental ill-health (most commonly depression and/or anxiety).

Analyses of the interview material revealed that while participants' experiences at the intersection of minority identities were very diverse, they can be divided into four main overarching categories:

1. Challenges, 2. Barriers to support & wellbeing, 3. Protective factors and 4. Behavioural changes. Each of these four categories are summarised below. Predominant findings include experiencing high levels of mental ill-health, a severe lack of appropriate mental health support, and significant discrimination from within the sexual minority community including stereotyping and racism. Participants described physical rejection from LGBTQ+ spaces as well as a more general lack of representation in the LGBTQ+ community, and the need for ethnic minority specific queer spaces. We could only include a few selected quotes in this report, and these are exemplars of what participants told us. Some codes within the four overarching categories include more example quotes than others which reflects their predominance.



The distribution of ethnic and sexual identity groups

Note: 'Other' includes identities such as asexual and pansexual
All numbers are percentages

Challenges

Many participants described challenges they experienced at different points in their life (such as childhood, late adolescence, during university or the time after just *coming out*), including experiences of discrimination/prejudice relating specifically to their ethnic/faith/sexual or gender identities and the intersection of these identities. Examples of challenges relating to the intersection of identities included being asked to leave a place of worship due to their sexuality, and racism/stereotyping on LGBTQ+ dating apps. At other times participants related explicit experiences to identifying with ethnic and sexual minority identities, such as a 'double burden' of discrimination (for e.g., being socially excluded in school and facing racism/discrimination associated with both sexual and ethnic minority identities).

Further, participants reported mental health difficulties (such as depression, anxiety or post-traumatic stress disorder), experiences of trauma (rejection by families after coming out, being physically assaulted or sustained emotional abuse throughout childhood from peers) and internalised homophobia (for e.g., feelings of shame and guilt related to their sexuality, and initial rejection of their sexuality). Participants also reported direct and vicarious experiences of homophobia (for e.g., observing others being subjected to verbal slurs relating to their sexuality), sexism, racism (from wider society generally) and related microaggressions (for e.g., slower access to medical care at A & E, racial profiling from security guards or assumed increased pain tolerance when seeking medical care). Participants commonly described experiencing discrimination including racism, sexism, objectification and stereotyping from within the LGBTQ+ community. This often resulted in them feeling excluded, marginalised and not as attractive or desirable as their White peers.

Challenges encountered can be described as follows:

DIRECT RACISM

- *'At university, the first group of friends I found, made a lot of race jokes at my expense and I thought, 'Oh, I've got to laugh along, I'll be the token Asian, I'll laugh with them so that it's not at me and this is fine, it's just what humour is.' And then I gradually realised that it wasn't okay, and I've always had a lot of personal confusion of whether I'm white passing, or exotic, as a lot of people have termed me.'*

PID15 – Mixed-ethnicity (Chinese-Irish), lesbian & non-binary

- *"Being Asian in the UK, for example, a white majority country, I do notice a lot of dating preferences, like racial preferences, that kind of thing. Quite a lot of gay guys will say explicitly that they don't want anything to do with Asians or that kind of thing"*

PID3 – Chinese bisexual man

DIRECT HOMOPHOBIA

- *"Just, like, "Gay boy," those sorts of things... like teachers associating me with HIV because I was gay, but obviously I'm only 15 years old, I don't even know what HIV is at that point.*

PID20 – Pakistani gay man

- *"A lot of the times I feel like I get burnt out, I get exhausted because I have to work that extra bit harder to even be considered on the same level as a straight person, who's doing a mediocre job at what they are doing"*

PID28 – Kenyan-Indian gay man

INTERNALISED HOMOPHOBIA

- *"I'm not a proud gay man but it's something I want to get to. I don't think I'm there. There's still internalised homophobia."*

PID14 -Chinese gay man

- *"I'm all for gay/queer people should have the same rights and be treated the same. But for me, I feel like that only applies to other people, like for other queer people it's completely fine, but for me to be gay is not an unacceptable thing. I still see it as inferior... even though I don't. Academically or theoretically I don't think that, but then something within me does, maybe just absorbing through society. it's completely fine for anyone else to be gay but for some reason not me. Which then to me tells me that I think, I still have that residue of internalised homophobia from growing up, just heteronormativity"*

PID14 – Chinese gay man

DESENSITISATION TO/DOWNPLAYING DISCRIMINATION

Participants often underreported the severity of discriminatory actions. And while a few were aware of underreporting discrimination, others only realised upon reflection

- *“Racial bullying, is, unfortunately, a thing. But I’ve never experienced really severe instances, more minor stuff like calling names. Now I think looking back, a lot of it was just kind of accepted as the norm, so I didn’t say much about it.”*

PID12 – Chinese Italian-British asexual woman

- *“As I’ve gotten older, I’ve gotten... I don’t want to say used to it, but for lack of better words – you get used to it. It still happens. You just brush it off, I guess, and like – what else can I do?”*

PID28 – Kenyan-Indian gay man

EXPERIENCING RACISM/DISCRIMINATION/STEREOTYPES FROM WITHIN THE LGBTQ+ COMMUNITY

A particular experience was dealing with stereotypes about what it meant to be ethnic minority and sexual minority (i.e., identifying with dual minority identities) from people in the LGBTQ+ community (i.e., assuming participants are not out to families, more likely to be homophobic, would not be able to commit to a long-term same-sex relationships, families would not be accepting). Further, participants expressed racial and religious discrimination on dating apps and other online forums and in general, not feeling attractive and desired, and being rejected from LGBTQ+ spaces.

Dealing with and overcoming stereotypes/assumptions:

- *“But I think the automatic assumption that everything is going to be super difficult and that your parents hate you or that you’re estranged from/not told your parents is really annoying because when people see white LGBT people, they would kind of know not to make assumptions about family, they would sort of know that there is this diversity of, like, “Okay, sometimes it’s really difficult, sometimes your parents kick you out, and sometimes the fact that you’re from a rural village can mean that your family has not been exposed to as many images of LGBT people as if you maybe live in a city.” ...but I always imagine that people are quite surprised when they find out that the Indonesian side of my family is actually just really nice and really fine with everything.*

PID13 – Mixed-ethnicity (Indonesian-White), lesbian woman

- *“I think it’s very, very confusing for people. And I think I’ve had some weird incidents, like I’ve definitely had really ignorant comments, people who assume that my parents want to have an arranged marriage for me, or something like that. They will, literally, just come up to me – they don’t even know me – they’ll say that to me. Or comments like, “I can’t believe that you are...” Or again, treating me like the unicorn. Which then makes me feel weird. Like, say, “I can’t believe you are Indian, and you are gay! It doesn’t work.” And I’m like, “Okay. Well, I didn’t choose either of those things. Those are just things that I was born with. And I’m very proud of both of those things.”*

PID24 – Indian lesbian queer woman

■ *"I think being brown and Muslim you kind of get asked all the time 'how did your parents take it? Have they disowned you?' And it's like 'no, bitch, why would they disown me? Did your parents disown you?' And I'm pretty sure that's not something that's asked of all people from all religions and certainly not of all nationalities. And people always assume that I must not speak to my parents or that I am estranged from family members. I'm none of those things. Don't get me wrong, my parents aren't coming to a Pride parade any time soon, and they're certainly not happy, but I'm not in the closet, nor will I ever give up my relationship with my parents."*

PID23 – Kashmiri gay/queer man

Objectification because of ethnicity

■ *"It's funny but I think it gets annoying sometimes, to be viewed as a giant sex object because I'm black and gay. Even straight people make the jokes about me having a big. You know. Even on Grindr [A gay dating app] it's funny because no one ever says 'hey' anymore. Everyone just says BBC or stuff like that."*

PID2 – Nigerian gay man

Racial preferencing in LGBTQ+ spaces

■ *"The way I see it is that because the beauty standards, have been historically centred around Western Aryan features, and historically as well, Chinese men have been emasculated in the media throughout the last few centuries. There's a sort of internalised homophobia on the apps where they don't want to date anyone who's camp or feminine, I find that being a person who looks Chinese, I am Chinese, of course, you know, I'm racialised as Chinese. A lot of times on a lot of the [dating apps] it's a lot of just no replies. But I've also had the occasional message say, "Oh, I'm not into Asian lads at all," or, "I'm not into just Asian guys,"*

PID5 – Han Chinese gay man

■ *"A lot of the beauty standards queer men hold for each other are white and I don't think ethnic minorities are as desirable in that community, in terms of seeking out romantic or sexual relationships, and it's quite hard, because you don't really see it as desirable. There's that whole model minority myth which I guess means you see Asian men as more quiet, smart, almost asexual to some degree, and I think that exists for South Asian people to some extent."*

PID21 – Pakistani gay man

■ *"I guess because it's what you see on TV and whatnot, you go to clubs to meet people, or you go on dating apps to meet people. Even now I would say I am probably still stuck in the trap of dating apps to meet people and get validation. But, ultimately, someone like me isn't going to get validation in these environments. I'm not going to get validation in the clubs, I'm not going to get validation on dating apps just because of who I am and what I look like. I would say these arenas are much more tailored to let's say the white gay, even in terms of my body. So, again, it's very lonely, I just kind of keep to myself, if I'm being honest with you."*

PID20 – Pakistani gay man

■ *"The only way I get to prove my point is reversing the tables, so whenever I am speaking to a white gay man who talks about their racial preferences, I'm like 'oh no, that's perfectly fine, because I don't date white guys' and then all of a sudden 'that's racist.' And it's like 'but really? But you don't see the "no black and no Asians" in your bio as racist, but suddenly me not dating a white guy is racist' and then I have to explain that it's not that I don't date white guys, I don't date a particular brand of white guys who believe that there's no racism in racial preferencing."*

PID23 – Kashmiri gay queer man

Rejection from physical LGBTQ spaces

- *"I was once kicked out... Well, they let us in, and then kicked us out of this gay bar, because I was with a group of friends, and we were all ethnic minorities. They just kicked us out for no reason. Actually, at another bar as well. It was me and one friend, and they said that we were too drunk, and kicked us out. We were just sober. They just didn't want to let us in."*

PID26 – Mixed-ethnicity (Columbian-Indian), queer & non-binary

- *"I was in a gay club in London. It's quite a well-known one. And, basically...They attacked us three times that night – ... When I had flashbacks to that night, I just used to think, the way it happened, where there was fighting, the dancefloor cleared, everyone moved out of the way. I just think back in my head - I'm in a gay club. There are so many gay people around, and none of you have stepped in to stop these two white guys swinging at us. The only person who stepped in, at any point, was just before the fight was beginning - this one black guy stepped in to stop the fight happening. I remember screaming, asking people for help. The fact that no one helped, it literally left me with PTSD. I went for months of just staying in bed. Again, because I'm not allowed to be angry... I was, like - I don't want to be angry, I don't want to be aggressive otherwise it makes me just as bad as my attackers. So, I spent months just kind of feeling paralysed and... At one point, I just even wanted to take my life, to be fair with you. And if it wasn't for getting therapy, I wouldn't be here today."*

PID28 – Kenyan-Indian gay man

HOMOPHOBIA EXPERIENCED FROM FAMILIES AND/OR ETHNIC IDENTITY COMMUNITIES

- *"I'll continue with my prayers but I don't want to feel excluded in the mosque. Because there have been cases where people have asked questions, they have got in contact with my family. I've felt very excluded. So, I'm not saying that every mosque or every community is like that but it has happened in the past"*

PID01 – Pakistani gay man

- *"I think it's especially hard for first-generation people whose parents have emigrated to the UK and they have children, like me. It's especially hard for them because they grew up in the UK where the culture is a lot more accepting of it [being gay] than Pakistan. But they also have this culture at home where they're taught it's wrong. And you have these two competing ends of a rope which you're being pulled towards. It's really confusing at times because you want to be yourself, but at the same time you don't want to subject yourself to that kind of ridicule, I guess, the discrimination you might face once you come out to your family, because obviously they probably won't be accepting."*

PID21 – Pakistani gay man

- *"I was criticised at first. They told me that I don't belong here [Christian Church] because of my acts. I don't even need to visit the church. I actually felt discriminated and it was actually part of my hardest moment in life because I lost a parent, and I just needed someone who could be there for me."*

PID27 – Black-American gay man

- *"A lot of black people are from countries where it is still illegal to be gay and it's really embedded in the culture and religions that are more heavily practised in those countries. So, yeah, understanding the impact of that on top of just being queer in the first place, which is already quite hard in a lot of ways."*

PID17 – Black-British (Nigerian), pansexual queer woman

“There's always the worry about whether someone can accept my gender, but particularly with Chinese groups where I don't speak Cantonese and I don't have the cultural background that they do. I would feel almost like I'm invading a space and that I wouldn't be welcome because of my gender, on top of not having all of the background, the shared cultural uprooting and things because we moved a lot when I was a child, but there was never a Chinese community where we lived anyway. So, I didn't even have that until I moved to university, and suddenly, there were loads of people who looked like me but they had no shared cultural experience and basically, all of them that I knew were cis and straight, so I couldn't even bond with them over that.”

PID04 – Chinese-White, non-binary & transgender

DOUBLE BURDEN OF BEING ETHNIC & SEXUAL MINORITY

Participants narrated experiences that were directly associated with both ethnic and sexual identities (and times when this intersectionality was explicit)

“Being gay is one thing, but also being just Chinese in person, when COVID hit I got weird stares from the public and that kind of stuff, when I'm not with my white friends anyway. So, there's a lot of overlap between being gay and Chinese, sometimes when I'm offended, I'm like, “is it because I'm Chinese, is it because I'm gay? Is it because I'm both?”

PID5 – Han Chinese gay man

“It is a disadvantage to be Southeast Asian and gay at this point in time, objectively, just based on statistics, based on the hate crimes, based on the public perception of us.”

PID5 – Han Chinese gay man

“I was excluded a lot, in school and social groups, especially by the boys at around 13-14 years old. It was like ‘oh well, he's not into football, he's not into a lot of the stuff that we're into so socially we don't need to invite him to anything’. And I think because also at the same time I was brown, the girls would also be like ‘oh yes, you really can't come round to ours.’”

PID23 – Kashmiri gay queer man

MICROAGGRESSIONS

These were most often subtle actions related to both ethnic and sexual identities and were very commonly reported

“Honestly, it [microaggressions] does happen every day. Just because someone's not calling me a rude word, just sometimes the behaviours, and sometimes I'm just rendered invisible. I'd say a lot of my experience is just being invisible, like when I walk into rooms. Honestly, there are just so many situations. It's just constant being invisible I'd say is the experience.”

PID20 – Pakistani gay man

“It's not easy, I can tell you. People can drive you to an early grave based on what they say to you daily. They'll make you lower yourself into a level that you feel you are worthless, you feel like you have achieved nothing, you know? So, I just encouraged myself, I chose to be strong for myself.”

PID22 – Black lesbian woman

“I've had fetishization, where I've had... even my first girlfriend, when we broke up, she was like, “You've helped me realise that I like Indian girls.” And I was like, “What does that mean?” And I think there's just lots of things, say, microaggressions, at best, and then like racism, at worst, that I think have been difficult to deal with because the community is so white, and white dominated.”

PID24 – Indian lesbian queer woman

EXPERIENCING MENTAL HEALTH DIFFICULTIES

These included a range from more common difficulties such as low mood, anxiety disorders, to more severe and

- *“Like, with health I was going to say a lot of black queer people are really depressed. It makes it worse that there are no services. Because it's just dealing with a lot of factions of your life that are very traumatic and just always having to juggle your norm, being those identities. A lot of black queer people I know are basically just surviving.”*

PID18 – Black African queer woman

- *“Okay, in terms of mental health, I'll be very honest with you. There have been a lot of points in my life where I literally just thought – okay, I'll just kill myself – commit suicide. And when I was 16 and was realising, I just thought in my mind – okay, I'll kill myself when I'm 30, and I'll live out a good 15 years, then I'll just kill myself when I'm 30 – that was my plan. And I had it all planned out and everything. I knew exactly what I was going to do when I was 30, how I would do it, what I would do, what things I would leave for people. And that was genuinely in my mind. Like - okay, I have an issue, I'll just kill myself when I'm 30.”*

PID10 – Asian Mauritian gay man

- *“This is very depressing, but I do battle a lot with suicidal thoughts, and I don't know. This is quite negative, but I just don't know what my life would be like past 30. I can't really imagine it, because it feels like there are a lot of barriers that I would have to encounter or have encountered.”*

PID20 – Pakistani gay man

- *“But then taking that into consideration, my sexuality and my struggle with mental health throughout my life, when people tried to say, “Oh my God, you should get a boyfriend or something, it's part of life, that's how you enjoy life.” I have always pushed it off with, “Well, I'm depressed. I have anxiety. I don't love myself. If I don't love myself, how can I expect someone else to love me?” ... but then over the years I have friends telling me, “But don't you think you're using that as a shield? So, at a certain point rather than that is a philosophy in life that I believe is valid, it became an excuse for me to not seek a relationship or just being happy by myself.”*

PID12 – Chinese Italian-British, asexual woman (questioning)

Barriers to support & wellbeing

Participants expressed being made to feel invisible or pushed to the margins of the LGBTQ+ community due to the dominance of White of gay men. Many of the participants sought help or support from family/friends and from online resources, and to a lesser extent from professionals for the challenges including mental health issues they faced. However, they encountered a number of barriers or obstacles which either hindered their ability to get the support they sought or prevented them seeking support in the first place. These included: a perceived lack of ethnic/faith/sexual and/or gender minority community they could turn to and a lack of ethnic and sexual minority role models and representation in public life. Some participants sought professional help or counselling, but many expressed difficulties in accessing support, concerns around the attitudes of professionals when accessing formal support as well the unavailability of ethnic/faith/sexual/gender-minority professionals. Participants from a mixed-ethnic background expressed not feeling part of either ethnic community. Lastly, many participants conveyed they found the study interviews therapeutic highlighting the need to talk about their experiences and issues.



The different forms of barriers to support included:

DOMINANCE OF WHITE GAY MEN IN THE LGBTQ+ COMMUNITY SPACES

The dominance of White gay men in LGBTQ+ spaces and culture results in unconscious replication of wider societal gender and racial dynamics. This further results in the neglect of more marginalised groups' needs and voices.

- *"...there's the whole umbrella term LGBTQIA but the representative, the person who is in the majority, the poster boy, is cis gay white men so then other identities are less visible. So, if you say 'think of a gay person, you'd probably think of a gay, white man rather than a gay British Chinese man"*

PID14 – Chinese gay man

- *"One of the reasons I don't identify as gay is because a lot of the gay people I've met in my life, I have not got along with. I actually hate them, not hate them... but a strong dislike, could never be friends or see anything romantic with them. And I think a lot of the reasons is because, I think a lot of gay men, especially White gay men, fail to recognise their experiences do not dictate the entire community's. There's other letters other than the 'G' within our community, and they fail to acknowledge those."*

PID23 – Kashmiri gay/queer man

- *"I think that I've had so many horrible experiences with men that made me realise that just because we are all queer doesn't mean that we're as supportive of each other... When things happen to men, like queer-bashing, we are always really supportive. We give a lot of emotional labour, but then we don't get the same when something happens to a queer woman. That started to really grate on me and my friends, because we felt like there wasn't that equal balance. It reinforced this idea that we are just not the same. Queer men that I've met are less political and less conscious of trans issues, or non-binary issues, feminism, or just any... or antiracism, even... I've seen so many incidences of queer men being racist about other men and say they wouldn't be attracted to men of colour, or whatever. To be honest, I just really don't see the value in hanging out with them."*

PID24 – Indian lesbian queer woman

- *"Like, yes, we all have being queer in common, but racial identities can have an added impact. Majority white queer spaces don't really see that and don't really hold space for that as well. So, it can feel alienating."*

PID17 – Black British (Nigerian), pansexual queer woman

- *"Since there is so much focus on white people's experiences, I think a lot of queer people's experiences from South Asian households can often be forgotten about or excluded or not really included in any kind of narratives which isn't ideal."*

PID21 – Pakistani gay man

LACK OF REPRESENTATION WITHIN LGBTQ+ COMMUNITY

Many participants identified disengagement with the LGBTQ+ community. They expressed a desire to be more engaged and recognised the potential for support and being part of a community.

- *"I have never really been a part of the 'scene', and that is something I'm trying to change, because, as I'm getting older, I'm acutely aware how my straight friends are getting settled down, thinking about kids, marriage. And, you know, comparing my own timeline to theirs has been quite hard... especially during lockdown when a lot of their relationships accelerated. So, for me, I'm trying to integrate into a gay community. And definitely I'm trying to do that by joining community-based LGBT communities"*

PID5 - Han Chinese gay man next

“Well it’s mostly because I think of myself as trans first and then sexuality as secondary and I know the T is there in LGBT, but often, when people talk about it, they’re talking about lesbians, gays and bisexual people [laughs] and about their specific sexuality and their attraction to people. I’m grey ace, so that’s also not really a huge concern for me, [laughs]...So I’m part of the LGBTQI community [laughs], but the trans part is the most important part.”

PID4 – Chinese-White, non-binary, transgender

A LACK OF ETHNIC MINORITY LGBTQ COMMUNITY (INCLUDING LACK OF ROLE MODELS/EXAMPLES IN THE MEDIA OF ETHNIC AND SEXUAL MINORITY INDIVIDUALS)

“I think it’s only recently that I’ve gone out of my way to look for people who identify as LGBT+. A close friend of mine is Chinese and gay. So, through him, I’ve met more gay people (he met on online dating apps). Most of them have specific dating apps use, and even if they don’t end up dating, they’ll still have some sort of relationship happening. But a lot of those apps are oriented around hook-ups or more sexually oriented in nature, so it is even harder for me to find asexuals, even if I wanted to, through dating apps, because it’s not the purpose of those dating apps.”

PID12 – Chinese-Italian British, asexual woman (questioning)

“We exist but we’re not very visible. It’s been hard for me to find people like me who have these intersecting identities. There are gay Asians but in the UK there’s a different context where Asian is synonymous with South Asian, which I’m not South Asian”

PID14 – Chinese gay man

“Literally, when was the last time I saw anything about queer South Asian people on TV or in films, in books, anything like that. We just don’t exist. They don’t feel anything about us because they refuse to acknowledge that we could be a thing. Our South Asian communities aren’t very loud about that, and we don’t have that space in our queer community. They [society] don’t really understand it. They feel a bit sorry for us, like, “Oh, you must have had a really tough upbringing. The other patronising side of things, “You’re so brave.” Literally, no I don’t. I’m just being myself. And it’s really patronising for people to say that. I just don’t see us. And I think that society just refuses to accept that we exist. Even in queer communities, I just don’t see us. It’s really sad for me because I know that we do exist.”

PID24 – Indian lesbian queer woman

“When it comes to the LGBT community, as a whole, you rarely see a kind of religious representation, I guess. Because, a lot of the times, people just see the LGBT community as a monolith, so even being within it, you end up seeing that as well. I haven’t really seen much representation, of people saying, “Oh yeah, I’m Hindu, I’m Sikh, I’m LGBT.” It’s not something people want to talk about, even though they should.”

PID28 – Kenyan-Indian gay man

“Yes, because until I was about 18, I didn’t even know really much about the LGBT community at all. I knew that gay people existed and that’s the extent of what I knew [laughs] and then I got to university and suddenly, I was hearing things like bisexual and trans and then I was like, “Wait a minute [laughs], wait just one damn minute, I know what that is, that’s me” [laughs], but it took a really long time.”

PID04 – Chinese White, non-binary & transgender

“...the big LGBT community and then the small cluster would be black within the LGBT, and then the even smaller cluster would be black bisexual, and then an even smaller-smaller would be black bisexual women. So, I’m a little fish in such a big pond I don’t know if I can really say what I need to say, and lots of people feeling they can relate to me. Because I feel like for sometimes people to listen to you, they need to feel like they can relate to you and sometimes I don’t really feel that if I’m speaking to people because I’m in such a small group within such a big group.”

PID08 – Black African British bisexual woman

PARTICIPANTS WHO IDENTIFIED AS MIXED ETHNICITY EXPRESSED FEELING A SMALL PART OF BOTH COMMUNITIES BUT NOT ACCEPTED BY EITHER.

Some also expressed the need to 'balance expectations' associated with being mixed ethnicity within LGBTQ+ spaces and in wider society

■ *"I know I've done this before, where I've labelled myself as a way to understand myself, you end up pushing yourself into a box, like being 'mixed race' always being both at the same time, you can never really be one because you are not one or the other, you're always like half. And I always used to call myself 'half Asian, half Irish' and I was like, 'mm, actually, I'm both' ...labels are quite important in doing that, to make sure that you can see yourself being all of what you are."*

PID15 – Mixed-ethnicity (Chinese-Irish), lesbian & non-binary

■ *"Feeling like I'm not black enough for black spaces, but I'm obviously not white, so while in the space I've grown up in that's fine, entering into new spaces, I'm always aware of it. I guess it's kind of isolating. I don't really talk about it and most of the time that's fine because I don't really think about it, but when I do think about it, it's just about the fact I don't have anyone to talk to about it."*

PID19 – Mixed-ethnicity (White-Black Jamaican), gay & non-binary

NEVER HAVING ACCESSED FORMALISED SUPPORT

Despite the number of challenges faced by participants, nearly half never sought professional help even though they experienced mental health difficulties

■ *"So mental health services, I think the experience has been very poor. Like being heavily medicated, not receiving an appropriate service, being guided to counselling with limited sessions. I would say the overall system of mental health support has been terrible (one out of five). So, I've just given up with accessing support, because I've been so less hopeful from accessing it in the first instance, where I thought to myself it could help me, in cases where I was feeling suicidal or when things were overwhelming for me. And then again the community could never understand. I was labelled as a mad case because of my mental health difficulties."*

PID01 – Pakistani gay man

■ *"Therapy has been the single greatest godsend in my life. And I just think who I was before therapy and who I am after therapy – and it's a growth process and it's still something I have to work on. And self-work I guess never ends. But the mindset that I have now, I honestly couldn't have even fathomed that this was even remotely possible."*

PID23 – Kashmiri gay queer man



CONCERNS THEIR THERAPISTS WERE NOT RELATABLE

Some participants expressed difficulties in accessing optimal help from therapists (for e.g., White therapists may not understand the nuances of cultural and ethnic-related issues)

“I always felt if someone could listen to me, could understand me, could support me, and then I could move forward. But it was as system that was built to fail. And I think even in the LGBT community there weren't many... What is the word... Counselling, appropriate for cultural communities. So, counselling for the LGBT South Asian community or counselling for the LGBT African communities. It was very British-centred, around the delivery.”

PID01 – Pakistani gay man

“A lot of black or trans, non-binary, people, I mean friends, have talked to me about it in terms of services. So yes, that's really an important thing. Because yes, of course it's hard when you're just a white trans person but when you factor in other things it's very difficult to manoeuvre. And, yes, the waiting lists as well. It's quite difficult in terms of trying to get on the waiting list for certain hormones and stuff like that for black trans people.”

PID18 – Black-African queer woman

“I'm either getting someone who's a woman of colour who doesn't really understand my queerness, or a white queer woman who doesn't understand the nuances of being a woman of colour. It's just unfortunate. Because even in therapy, when you are supposed to be able to be fully open and say everything - I'm still censoring myself. I'm still holding back. I'm still not saying everything that I want.”

PID24 – Indian lesbian queer woman

EXPERIENCING THE STUDY INTERVIEW AS THERAPEUTIC, APPRECIATION OF BEING ABLE TO TALK/DISCUSS THEIR EXPERIENCES - MISSING THIS OPPORTUNITY IN DAILY LIFE

“So, I don't have anything else to add with you. But I'm grateful that you've listened to me and I do feel that there's a sense of relief, just talking to you today for an hour and a half. It's just made me feel better that someone has listened to me and... Not that it should have been a counselling session or... But it's just been good speaking to you. Not to lay it off my chest, or if I had any issues, but just someone listening to you. So, I found it very helpful that I've been able to think and come up with points.”

PID01 – Pakistani gay man

“It feels very therapeutic. I don't necessarily feel triggered in any sense, and I guess I'm also quite reflective as a person and it's almost like 'Wow, is someone really asking me to just talk about myself?' So yes, I'm grateful; I'm grateful to be able to be prompted in this way as well to understand for myself how I've been processing all of this, and I think a few of your questions also have helped address some blind spots.” I've never really thought about coping, for instance and yes, just it was useful, regardless of the results of the study, just doing this in itself helps.”

PID11 – Asian-Malaysian gay man (gender fluid)



Protective factors

While many participants highlighted negative experiences and barriers to support, they were often also eager to share their positive experiences and key sources of support and community. These included: pride in identifying as LGBTQ+ and the importance of cultural/faith communities and identities, access to online resources, and micro-communities and friendship groups. Participants who felt marginalised by the mainstream LGBTQ+ community, expressed the importance of being able to talk to people with similar experiences. It was especially helpful when participants didn't have to explain the complexities of their identities. Many participants, with and without prompting, were keen to share their pride in their identities, stressing the joy, solidarity, freedom and strength they found in their diverse and intersecting communities. They also spoke about the process of learning about themselves and their identities through online and offline resources as instrumental for allowing them to come to terms with their own experiences and equipping them to advocate for themselves and their communities.

Key protective factors included:

QUEER JOY!

Finding happiness in identifying as being queer and belonging to queer communities

- *"I think the best of both worlds, like I mentioned before, like I love being part of the queer community and learning more about it like in the last year, it's so uplifting, so affirming and, it's just joy. There's so much queer joy and finding it and finding people that you can enjoy it with."*

PID15 – Mixed-ethnicity (Chinese-Irish), lesbian & non-binary

PRIDE IN IDENTITIES

In relation to both sexual and ethnic identities

- *"Being raised mixed race in a very white environment... My mother has always pushed on us a 'You are who you are, you just need to own it and it'll be a lot easier to deal with the people who can't deal with it.' I am 'other'; I may as well go full 'other' and be as comfortable in my own skin as possible and everyone else can mind their business. They're chronically incapable of minding their own business, but I'm not going to let that get to me."*

PID19 – Mixed-ethnicity (White-Black Jamaican), gay & non-binary

- *"Just coming to myself I'd say is probably really powerful. So, it kind of defies all expectations. It defies all understandings of how identity and sexuality should be understood, if that makes sense. So, I'd say that in itself is powerful and positive ... just to simply come into who I am in my own right, rather than just simply be confused by what society says."*

PID20 – Pakistani gay man

- *"Given the choice to identify myself again, through any sexuality or any race or gender or anything, I would make the same options that I am now. I'd still be Kashmiri, I'd still be queer. Yes. And it's the same if people don't assume that I'm gay, I'm always offended that people think I'm straight."*

PID23 – Kashmiri gay queer man

COMING OUT AS A POSITIVE EVENT AND PROTECTIVE FACTOR

Helped people be themselves

- *"I just woke up the second day and felt like... I had told them. But it just brought a lot of weight off my shoulders for a while. I thought to myself that's it, now myself, if the community say anything, or anything to happen, then I've got an answer; I know what to do. The guilt had disappeared as a result, because I just was truly myself."*

PID01 – Pakistani gay man

- *"I decided to take that leap of faith and just tell a few people. And since they were so accepting, it really validated my identity. And it made me feel as though it was something I didn't really need to hide anymore."*

PID21 – Pakistani gay man

RELIGION AS A PROTECTIVE FACTOR

- *"I am Muslim by status, and I do feel very spiritual. I think it is beautiful when someone can be religious, regardless of whether that's Muslim or Christian, and can still be really close to both their religion and also their sexuality. Because, you know, especially with religion everyone is taught this is bad, you have to be straight, you have to be cis, and people are moving past that interpretation."*

PID25 – Mixed-ethnicity (South Asian), bisexual queer woman

- *"I know that I can still be Hindu and gay. Recently there's also been Hindu gay weddings, which has been really nice to see. When you see that you feel really reassured. But yeah, I've never been told by anybody that it's against my religion. I think Hinduism is just a bit like that in general. Like, as far as I'm aware, there's no, like, strict rules on how to practise the religion at all anyway."*

PID16 – British Indian gay man

ACCESSING ONLINE BLOGS/READING/RESEARCH AS SUPPORT

- *"Tumblr. Honestly, everything is on Tumblr. That's one thing my parents didn't really control in my life, was what I did on the Internet, I guess that's one part because they are not familiar with. It just allowed me to be more open, discussing my sexuality, gender, sex, relationship, be more willing to explore these things and finding bits and pieces that I feel could guide me as well as for me to agree with and for me to form an opinion of my own. So, yes, that's how I found asexuality, on Tumblr."*

PID12 – Chinese-Italian British, asexual & woman (questioning)

- *"I will quite frequently watch TikTok compilations on YouTube of lesbians and queer couples to just feel a little happier because, I think, whilst they've become microcosms, you can sometimes forget that queer people are not in fact all around you. They provide that sense of connection on a very accessible level."*

PID15 – Mixed-ethnicity (Chinese-Irish), lesbian & non-binary

- *"I've searched for forums or Discord groups for specifically Asian LGBT people. There are various ones I've found that I've fallen in and out of. I'm not always very vocal, or even participate that much in group chats, but it is at times where I am feeling a little bit isolated, it is kind of comforting to see that other people are venting about similar issues."*

PID29 – Pakistani-Indian bisexual woman



IMPORTANCE OF MICRO COMMUNITIES/HIGHLY SPECIFIC COMMUNITIES WHERE THEY DIDN'T HAVE TO EXPLAIN THEMSELVES

- *"I can hopefully soon, when things open up again [re: Covid-related lockdown], go into more black queer spaces, meet people physically and know the space is designed for us, so I don't have to necessarily be like "Oh, there's a bit of an issue," or "Is this person this or that?"*

PID08 – Black-African British, bisexual woman

- *"The difference between being gay in the non-binary community and being non-binary in the LGBT community is the non-binary community, is a far more open accepting community... it's just kind of whoever you are, identify as, nobody's got a problem with it. They want to know what makes you most comfortable."*

PID19 – Mixed-ethnicity (White-Black Jamaican), gay & non-binary

- *"Finding other LGBT people has been very good for me. And finding a community that isn't completely white so that people can understand some of my experiences, even if they don't understand, even half of them, finding people to be friends with who aren't white has just been very good because they get it to some extent. But again, the intersection is so small that there's nothing really that's everything all at once."*

PID19 – Mixed-ethnicity (White-Black Jamaican), gay & non-binary

Behavioural changes

Many participants reported specific behavioural changes as a result of the challenges they faced. These included outwardly suppressing their sexual identity to avoid being identified as sexual minority or avoiding situations which may result in challenges, such as potentially discriminating peers. Such behaviour changes provide short-term benefits through reducing instances of discrimination. However, longer term implications include diminished social networks, perpetuated anxiety, and minimised acceptance of identities. Some participants expressed a need to be hypervigilant to potential threats (for example, when out in certain neighbourhoods or when interacting with certain types of people or even when maintaining relationships).

COMPARTMENTALISATION OF IDENTITIES

This especially occurred when cued by environment changes e.g., when "back home around family"

- *"I'd say most of the time growing up and as an adult I've compartmentalised these two identities [British-born Chinese and LGBTQ] and feel like I can't almost integrate them especially being gay but yes, in the British-born Chinese context where I don't know many queer people"*

PID14 – Chinese gay man

- *"I think my interaction with different communities depends on how I can present myself. For example, if I'm around my friends who might be LGBT, but they are from a white or mixed background, I'm freer to be femme around them. But then I don't have that option to feel like I can discuss my culture with them. If I'm with someone from a more cultural, religious background, I feel more free to have conversations about culture and religion with them, but then can't really be femme or expressive in my identity, my gender-side of it, my sexuality side of it. So, I get some from one community and some from the other community, but there's never one where I can just be both sides of myself with."*

PID28 – Kenyan-Indian gay man

“It’s basically a kind of compartmentalisation. I think it helps me feel like I am still a part of both communities [ethnic and LGBTQ] and it helps me feel that I still have a place. I think that’s probably one of the reasons why I haven’t made an effort to go and tell lots of people and be, like, “This is me, if you love me you’ll accept me,” just because, growing up I felt a little bit different, and I think it was because I knew that I wasn’t straight and I knew that wasn’t something that was accepted in my community. So, I’ve always kind of felt a little bit on the outskirts. And I think trying to force it on people in the Indian/Pakistani Muslim community would kind of alienate me more from that. And so when I’ve spent a lot of my life trying to keep a foothold in each one, that’s not something I want to lose.”

PID29 – Pakistani-Indian, bisexual woman

MINIMISING OVERT GAY BEHAVIOURS TO PREVENT BEING IDENTIFIED AS LGBTQ+ DUE TO CONCERNS AROUND PHYSICAL AND EMOTIONAL SAFETY

Expressing oneself as straight/heteronormative to ‘fit-in’ or blend into certain social contexts or situations (school, family, work and in public)

“I think my body responds accordingly to needing to change and diminish myself in some ways so that I can continue and maintain my relationship with people I love.”

PID11 – Asian Malaysian gay man (gender fluid)

“I work with a lot of male colleagues, so I just try and be a bit more masculine around them just so they don’t think I’m gay. And, I guess, that’s because I’m scared of the career implications that’s going to have on me. Even some family members have said to me, “I wouldn’t list it on job applications while you are still young,” because there are some employers who are going to look at that and decide, based off that, not to hire you.”

PID28 – Kenyan-Indian gay man

“I then struggled with it a bit when I started working. I didn’t want to be out at work because I felt like it was very personal, for a start, and second of all, I was scared of the reaction. Because everybody else in my workplace was straight, like straight women. And I do feel a bit like I want to fit in with the straight women. The women were so tied to heterosexuality, as well, and I didn’t want them to exclude me. I do blend in with them because I am feminine as well. I didn’t want to lose that space that I had with them. So, I didn’t want to come out.”

PID24 – Indian lesbian queer woman

BEING HYPERVIGILANT TO POTENTIAL THREATS

“When I go out on my own or with predominately East Asian friends, I feel like there’s this preparation that a racial attack could happen. And it’s letting myself know it’s going to be okay if it does happen. So, there’s this, level of alertness towards it.”

PID5 – Han Chinese gay man

“But again, just every day, when I meet other Asian people, I have to really suss out whether they’re going to be homophobic or not, what’s the situation going to be? So, this is extremely stressful and draining. Sometimes it just feels like a tonne of bricks on my back and taking a toll on me.”

PID20 – Pakistani gay man

“...from the start of when you’re slightly different, I think you’re always on survival mode. I think you’re constantly thinking about surviving, maintaining bonds and friendships and other things.”

PID7 – Asian bisexual man

REJECTING OTHERS BEFORE BEING REJECTED

Some participants sometimes reported rejecting other individuals or groups when they perceived that those groups would reject them. This was done to prevent difficult situations often related to discrimination

■ *“I guess I consciously train myself in places to which I can avoid confrontation or conflict. Let’s say if I want to be friends with maybe lots of boys and maybe then I’d have to face more issues, but I purposely don’t choose to put myself in the situation because I know that girls are probably more likely to be more accepting of my sexuality than boys.”*

PID20 – Pakistani gay man

■ *“I feel like I reject before I get rejected, because I’m assuming I’m going to be rejected by them anyway, so why chase, pine, for people because I also see there’s Asian men who I think have a lot of internalised racism and won’t date other Asian men and primarily go for white men and are also racist and anti-black and things like that, colourism, all those things, which I just don’t understand – I reject, I’d say.”*

PID14 – Chinese gay man

Do our findings have any public health and policy implications?

Our findings indicate that there is substantial capacity to help improve the circumstances that contribute to detrimental experiences and health in young individuals who identify as being both ethnic *and* sexual/gender minority, and resident in the UK. Some of the issues identified in the interviews can be addressed locally, for example, in collaboration with local government, LGBTQ+ NGOs, forums and other kinds of advocacy groups.

Some recommendations include:

Creating friendly and accessible spaces – virtual and physical – where ethnic minority LGBTQ+ individuals may connect, interact and feel part of a community. While ethnic minority LGBTQ+ charities/NGOs exist, many participants were unaware of them. This is crucial as participants identified the importance of social support, as well as ethnic minority specific communities. Such spaces could be implemented taking into account age and situation (for example, in schools, universities, workplaces, local communities etc.). However, it is important that such spaces be safe and secure, and made available at relatively young ages. This will require active engagement and collaboration between local government (for example, councils) and communities, educational institutes and LGBTQ+ NGOs.



Participants expressed discrimination and racism (including objectification and stereotyping) faced from within the LGBTQ+ community. While this can be difficult to control, it must be highlighted in the wider LGBTQ+ community, including the potentially adverse impacts such discrimination may have on individuals. For example, this may involve sustained advocacy by LGBTQ+ NGOs (including ethnic minority and faith-based charities), online forums and dating apps to try and prevent visible discrimination based on ethnic origin, skin colour, religion/faith etc. The general public needs to be made aware of the deleterious effect discrimination may have on individuals. Further, existing LGBTQ+ spaces such as bars and clubs need to be made aware that discriminating against patrons due to their ethnic minority identities is a serious offence. We also need to ensure better and accessible reporting tools that people may use to report incidences of harassment and discrimination. However, in order to ensure proactive policies to address these issues, the national government will need to take stronger steps to formulate better policies with clear guidelines related to tackling discrimination associated with ethnic/sexual/gender-related identities. Such policies will only work when the government actively engages to ensure that such legislation is taken seriously in domains such as schools, universities and workplaces, as well as public spaces (physical and virtual).

There was both a lack of access of formalised mental health support but also awareness that such support could perhaps not be ideal due to the lack of ethnic minority and LGBTQ+ therapists. This barrier could be tackled by recruiting ethnic minority and/or LGBTQ+ therapists and councillors to work in the NHS. Other steps could include developing a mental health workforce competent and confident in understanding and working with equality and diversity issues including the intersectionality of identities. Offering initiatives and incentives for mental health services to increase timely access to psychological therapies for minority individuals could be prioritised.

Further, many participants stated they found the interviews therapeutic. This highlights the support that can come from being able to talk freely and openly about one's past experiences and situations. Providing some form of therapeutic care at schools, universities, places of work and worship can be a source of much needed comfort.

Some participants highlighted their faith and religion as a source of support. However, some also reported being excluded from places of worship due to their sexual/gender minority identity. While this is a potentially sensitive area, there is a need to review policies to prevent discrimination in faith-based communities. Further, stronger partnerships and dialogue between LGBTQ+ NGOs (including those that specifically work with ethnic minority LGBTQ+ communities) and faith-based organisations and local communities is essential to address exclusion and discrimination.



The lack of visible representation of ethnic and sexual minority role models in the media and greater society was highlighted. Role models play an important part in providing much needed confidence and support especially during childhood and young adulthood. Strong steps need to be taken by local and national governments to provide safe and conducive environments which may ultimately encourage individuals to come-out leading to greater visible diversity of role models in the LGBTQ+ community. The media industry needs to be forced to take this lack of representation seriously through the introduction of policies like actively monitoring diversity in the workforce. Publicly available data should be collected in relation to job applications, interviews and offers, and also promotions, retention and pay. This would enable greater accountability through the identification of pay gaps, promotion gaps, and by mandating *name-blind* CVs.

In 2018, the UK Government Equalities Office published the LGBT Action Plan report (based on data collected via an online survey answered by 108,100 individuals). The report outlines a comprehensive agenda to address LGBTQ+ related issues including improving access to public health services and increased safety at home, work and in public spaces. Strikingly, the report does not present any data by ethnicity (nor does it explain why). Further, data collected on ethnicity was done with broad categories. The report does not explicitly address potential issues that could be faced by individuals with multiple minority identities. Our study clearly highlights those individuals with ethnic and sexual minority identities face a different set of obstacles and challenges compared to their White peers. Future government reports and proposed policies must reflect this for a more inclusive and diverse approach to tackling inequalities. As of the January 2022, the fate of the 2018 LGBT Action Plan (including the strong agenda and funding to tackle LGBTQ+ issues) remains uncertain. While the current government has suggested it will set-up a new LGBT panel, there is the opportunity for an updated agenda to specifically address ethnic minority related issues.

Future research

This project has helped identify several themes that can severely impact mental health and integration of young ethnic and sexual minority individuals in the wider LGBTQ+ community. The team will continue to further analyse the rich qualitative data collected via interviews.

While this project is the first in the UK to analyse lived experiences in dual ethnic and sexual/gender minority individuals, it is restricted to younger adults and only scratches the surface in terms of participants included and themes explored. Future research needs to examine health and other related issues in older ethnic and sexual minority individuals who may encounter different barriers and challenges that are likely to vary across the lifecourse. Older individuals are more likely to be particularly affected due to the cumulative disadvantages resulting from sexual and ethnic minority identities and the ageing process. Our sample included very few participants who identified as Black, and none who identified exclusively with Middle Eastern/Arabic/North African, South American/Latinx or Southeast Asian identities, a limitation that should be addressed by future qualitative studies.



Further, qualitative studies need to be complimented by quantitative studies that examine variation in health including risk factors in nationally representative study populations. However, such data with adequate statistical power to analyse health differences in distinct ethnic and sexual minority groups is currently lacking. Our findings highlight that lived experiences can substantially vary by ethnic minority origin and religious/faith belief. Substantial investment will be required to set-up research infrastructure needed for high quality research such as establishing sexual minority cohort studies and including data about sexuality and gender identity in large datasets such as electronic health records and other data sources.

The research team

This project was conducted by a group of researchers from diverse disciplines including political sociology, social psychology, epidemiology and public health, and clinical psychology. This project was a collaboration between the **UCL Social Research Institute** and the **MRC unit for Lifelong Health & Ageing at UCL**.



Amal Khanolkar, PhD – Co-PI (Cisgender male, South Indian) is an epidemiologist specialising in chronic & noncommunicable disease epidemiology and methodology. He primarily works with population-based data (such as birth cohorts, national registers, surveys and audits). He has a keen interest in health inequalities research, especially related to ethnicity and immigration status. He also teaches on the MSc in Public Health programme at King's College London.



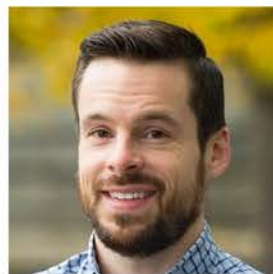
Victoria Redclift, PhD –Co-PI (Cisgender female, White) is a political sociologist specializing in the relationship between migration, 'race', ethnicity, and political exclusion, with particular interest in the racialization of health and wellbeing.



Evangeline Tabor (Queer, White) is a social epidemiologist, with a background in medical anthropology, specialising in LGBTQ+ health disparities and inequities across the lifecourse and is currently pursuing a PhD at University College London. Their current interests include the measurement of sexual orientation in UK longitudinal cohort studies, and chronic physical health disparities in sexual minority populations



Alexander Bolster (Gay, White British) is a trainee clinical psychologist. His research interests include health inequalities in mental health, especially those related to sexual minorities, adapting existing psychotherapy to better suit the needs of minority groups and trauma informed care. He previously delivered psychotherapy for individuals with depression, anxiety and trauma, and has worked in inpatient settings with individuals having more complex mental health difficulties. He is currently pursuing his doctorate at King's College London.



David Frost, PhD (Cisgender man, White, Gay) is a social psychologist whose research examines stigma, stress, resilience, and well-being among marginalised individuals, families, and communities with a particular focus on health inequalities experienced by sexual and gender minority populations.



Praveetha Patalay, PhD is a population health researcher who focuses on mental health across the lifecourse, health inequalities and how we can design our societies and health systems to prevent illness and promote better wellbeing for all.



AK conceived the research idea, which was further developed with VR, PP & DF.

AK, VR, PP & DF were responsible for writing the grant proposal which supported this project. ET & AB conducted the interviews and analysed the data. Results were discussed with AK & VR. AK first authored the report, with input from all team members, who read and approved the final draft.

Funding We would like to acknowledge the UCL Health of the Public Small Grant 2020 which funded this project.

Ethics This project including supporting documents (participant information sheet and consent form) were reviewed and approved by the UCL Research Ethics Committee (Approval ID 9673/001). This project is part of a larger mixed methods project “**Multiple Minority Identities & Mental Health - A mixed-methods approach to addressing health inequalities**”. In addition to the qualitative project described in this report, we also analysed health inequalities related to dual sexual- and ethnic-identities in a nationally representative sample of 9,789 adolescents aged 17 years from the UK-wide Millennium Cohort Study. Findings from the quantitative study can be accessed here: <https://www.medrxiv.org/content/10.1101/2021.07.12.21260381v1>

Glossary

Cisgender Often shortened to ‘cis’, a person whose sense of personal and gender identity corresponds with their assigned sex at birth.

Coming out of the closet or ‘to come out’ Often described as a psychological process or journey is a metaphor used to describe a LGBT people's self-disclosure of their sexual orientation or their gender identity to themselves or others. Coming out is often discussed as a single event in a person's life, but for many it will be repeated at different points in their life and in different settings.

Compartmentalisation Separating thoughts and feelings that conflict one another. This is often done as a defence mechanism to prevent unwanted situations or scenarios.

Hypervigilance Being in a state of high alert, constantly looking for danger or threats, both actual and perceived.

Internalised homophobia A conscious and/or an unconscious reaction to external negative attitudes toward people within a sexual minority orientation. It happens when a person consciously or unconsciously accepts homophobic biases and applies these biases to themselves. It can happen to anyone, regardless of sexual orientation.



Microaggressions Indirect, subtle, or unintentional discrimination against members of a marginalized group.

Qualitative study Collecting and analysing ‘non-numerical’ data such as experiences, opinions, thoughts, concepts etc. typically via interviews. Often described as the ‘opposite’ of quantitative data.

Queer joy! The joy expressed or associated with identifying as being queer, including positive emotions, expressed and associated with the lived experience of being queer or LGBTQ+.

Semi-structured interview A method of research most commonly used in the social sciences, this type of interview can be based on a protocol but is open and allows the interviewee to bring-in new ideas or thoughts.

Transgender A transgender (often shortened to ‘trans’) person is someone whose gender identity differs from that they were thought to be assigned at birth.

Interview protocol in brief

The interview protocol consisted of 5 main sections:

1. Life Story This section gave participants a chance to narrate their life histories including critical events and turning points. It helped obtain a broad sense of participants’ life trajectories. In the beginning of this section, participants were asked to draw a line that represented their life up until the time of the interview. Participants were told that the line could go ‘up’ and ‘down’ to represent ‘good’ and ‘bad’ times respectively in their life. The lifeline was a valuable tool to obtain visual depictions of events and transitions that constitute individuals’ understandings of their own life histories.

2. Social Identities & Communities This second section give participants time to describe their ethnic & sexual (and any other) identities in their preferred terms and how they potentially relate to one another. Participants were requested to list their identities on paper. This enables further detailed discussions of chosen identities, their inter-relationships, and how they determine community membership, and relationships with chosen communities, and whether these have changed over time.

3. Challenges, Stress & Coping This section asked participants about specific experiences related to prejudice, discrimination, racism, and violence they might have experienced at any time during their lives. They were also asked more generally about ‘challenges’ they might have encountered. Other aspects of this section included concealing sexual identities, coming out, self-acceptance and being accepted by others. The final part of this section focused on methods used to cope with challenges and stress, and whether participants sought support.

4. Healthcare Utilisation This section focused on health of the participants, as well as access to healthcare, and experiences related to accessing healthcare.

5. Reflections & Goals The final section asked participants about their life goals in relation to work, family and relationships. They were also asked what they thought were the most positive aspects of identifying as ethnic and sexual minorities.



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■ *“I do experience gender euphoria sometimes, sometimes I just wear something or even sometimes I just remember that I’m trans and I’m like, “Wow, what a cool, rad thing for me to be”*


PID04 – Chinese-White, asexual & transgender

■ *“...there’s the whole umbrella term LGBTQIA but the representative, the person who is in the majority, the poster boy, is cis gay white men so then other identities are less visible. So, if you say, ‘think of a gay person, you’d probably think of a gay, white man rather than a gay British Chinese man.’”*

PID14 – Chinese gay man

■ *“I’m actually a little bit offended when people think I’m straight, if I’m perfectly honest.”*

PID23 – Kashmiri gay queer man



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