



LGBT National Helpline

**Impact Report
2013-14**

Introduction

LGBT communities in Scotland have made significant advances in equality over the last few decades, which have included the introduction of an equal age of consent, the abolishment of Section 28 and the recent passing of equal marriage. Many therefore feel that our communities have made massive strides and are, in some senses, “over the worst of it”.

In stark contrast to the great and important legal strides we have made, hate crimes against LGBT people in Scotland continue to be widespread and poor mental health within LGBT communities is consistently reported at three to four times the national average. A recent survey of LGBT youth across the UK showed that almost half of young LGBT people have seriously considered suicide. And despite making up only around 6-10% of the overall population, LGBT people make up around 25% of homeless figures in major British cities such as Glasgow, often as a consequence of family rejection.

As many of the quotes throughout this report reflect, in 2014 there is often still an acute polarity between our great success in achieving legal equality and the social difficulties that LGBT people continue to face on a day-to-day basis. This means that services which address the specific needs of LGBT communities are an absolute lifeline to many.

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“I now feel so much more confident about my rights in challenging transphobic behaviour and what support is available to me to report hate crime. This has clarified so many things. Thank you.”

“I feel a lot more settled knowing that sexuality is not set in stone and that it’s fluid for other people too. I thought I was weird, it’s very reassuring.”

“I want to thank you for last week. I was so close to ending it all and think I would have done if it wasn’t for your kindness and patience. It made me feel like somebody actually cared about what I’m going through.”

From LGLS to LGBT Helpline Scotland – a 40 Year History

Set up in 1974 by the Scottish Minorities Group, Lothian Gay and Lesbian Switchboard initially operating from a private phone line in Stockbridge, Edinburgh. The Switchboard developed into a larger volunteer-run service operating every evening, funded largely through community fundraising and eventually receiving some public funding.

In 2009 the volunteer-run Switchboard was planned to fold and LGBT Health was approached to take over the running of the service. LGBT Health and Wellbeing (LGBT Health) was set up in 2003 to promote the health, wellbeing and equality of lesbian, gay, bisexual and transgender (LGBT) people in Scotland. The 0131 number was retained, but the name of the service was changed to Lothian LGBT Helpline, to better reflect the diverse community it aimed to serve, and calls were answered one day a week by Edinburgh-based LGBT Health staff.

Subsequent funding from the Scottish Government has enabled LGBT Health to expand the Lothian helpline to a national service. The new service, which opened in May 2013, operates from a non-geographical number two days per week. The service is managed by a Helpline Coordinator with calls largely being answered by trained volunteers.

Setting up the LGBT Helpline Scotland (January – May 2013)

- Part-time Helpline Coordinator starts in post in January.
- Intelligence gathering meetings held with Samaritans Scotland, Lesbian and Gay Foundation Helpline (Manchester) and London Lesbian and Gay Switchboard.
- In light of the experience of other helplines, in order to make best use of limited resources and maximise access, the decision was taken to open 2 days per week from 12-9pm.
- A new non-geographical 0300 helpline number was obtained, which (unlike 0845 numbers) always charge local rates regardless of which phone a caller uses (e.g. 0300 numbers are included in mobile phone 'free minutes' packages).
- The existing 0131 Edinburgh number also remains functional as calls are automatically diverted to the 0300 number.
- Widespread advertising for volunteers through LGBT publications (including our own e-bulletins and website), online job advertising portals and Edinburgh's Volunteer Centre.
- 26 applications from potential volunteers received. Telephone interviews were carried out to assess suitability.
- 12 applicants were invited to the induction training programme run over 5 sessions in April. We accepted 9 of these as volunteers for the helpline.
- Flyers and posters advertising the new service were designed for national distribution.
- 20,000 flyers and 300 posters were posted to LGBT venues, sexual health services, GP surgeries and mental health organisations across Scotland in the run up to opening.
- An extensive online promotional campaign was carried out to ensure the new helpline number and opening times were advertised on relevant websites.
- The LGBT Helpline Scotland officially opened on 7th May 2013, taking its first call within 30 minutes.

Need for a National Helpline

Studies have shown that LGBT people continue to face barriers when accessing services; whether it's professionals assuming that a gay service user is heterosexual unless they state otherwise, a transgender person's gender identity being ignored or mocked, or a bisexual person being considered "confused". The effect of these experiences on LGBT individuals can be at best a discomfort accessing mainstream services, and at worst feelings of humiliation or invisibility. Unfortunately, while so many LGBT people experience poor mental health, many also have a mistrust in the very services that are there to help them. Even the most LGBT-friendly of mainstream services can feel like a no go zone to an LGBT person who experiences abuse on the street on a daily basis. As a result, many LGBT people feel that they can only speak to a specialist LGBT service, even if their issue (for example, a relationship breakdown) does not necessarily have a direct link to their gender identity or sexual orientation.

"Such a big help being able to phone you. It's the only place where it's safe to be the real me."

"You've been really good listening to me talk about this. It's such a difficult time in my life. You're the only people who I can talk to."

Whilst studies show that many LGBT people gravitate to large cities in the hope of finding acceptance, many LGBT people in Scotland continue to live in rural areas where no LGBT specific support is available to them. A few Scottish cities have historically benefitted from their own local LGBT helplines, however many areas have been left without such support. The recent closures of the volunteer run LGBT helplines run in Glasgow and Tayside has meant that opportunities for isolated and vulnerable LGBT people to pick up the phone and speak confidentially about their sexual orientation or gender identity have been in decline. By the time LGBT Helpline Scotland began taking calls in May 2013, the only remaining local LGBT helpline in Scotland was Lothian LGBT Helpline, which was also staffed by LGBT Health.

In our experience of providing a wide variety of face-to-face services to LGBT people, LGBT Health has consistently found that LGBT people take a long time to approach our services, sometimes after years of struggling with their identities. Attending, for instance, an LGBT social group or LGBT specific counselling service requires a level of courage which can feel both alienating and frightening to someone who is questioning their sexual orientation or gender identity for the first time, and who may not relate to definitive terms such as 'bisexual' or 'lesbian'. 'Testing the water' is an important step in any LGBT individual's journey to self-acceptance, and an anonymous service such as a helpline is the perfect way for many people to take those important first steps; especially for those who live in areas where (even with the strongest will to access support) there simply is nothing available to them. LGBT Helpline Scotland offers this accessible service for all people in Scotland, alongside providing localised information – for instance on LGBT groups and social opportunities - from the Scottish Borders right through to the Shetlands.

Feedback from callers, reflecting the range of callers and issues:

“My situation is desperate. People here don’t seem to want to help, not sure whether it’s because I’m an asylum seeker or because I’m gay. Nobody at the home office or immigration told me that there is support available here for gay asylum seekers – I’m very glad I called.”

“Thank you so much. I was really thinking of doing something stupid earlier but it’s made all the difference being able to talk to you about all this stuff that’s been driving me crazy.”

“It means so much to me to know that I’m in the right and that I have a case against my homophobic boss. Can’t tell you how good it feels to know that the law is on my side.”

“You really went out of your way to help me support my son through the homophobic bullying he’s going through – I didn’t know that half of this support was out there.”

“I wouldn’t be where I am now if it wasn’t for you. Before I started calling you I felt terrible about my sexuality and was very isolated, but all of you have been fantastic and really supportive.”

Delivery Model

How we Support our Callers

LGBT Helpline Scotland is currently operated by our part-time Helpline Coordinator, a paid sessional worker and 7 volunteers, who take calls every Tuesday and Wednesday between 12-9pm. During opening hours, volunteers take all primary calls, with the Helpline Coordinator (or the sessional worker in his absence) offering support to the volunteers and taking any secondary calls which come through to the helpline.

The service offers specialised Scotland specific information and emotional support not just to LGBT people or those questioning their sexual orientation or gender identity, but also to their families and friends and to supporters, such as mental health professionals. We work with whatever issues the caller brings and no issue is a no-go zone. We provide everything from frank discussions around sex and sexual health (including where and how often to get a check-up), to information on social groups for isolated individuals, through to emotionally supporting our callers with anything from ‘coming out’ to relationship problems, hate crime support and gender reassignment advice. Our volunteers have talked callers down from suicide, helped them to come to terms with family rejection and been that first person to refer to a transgender caller as the gender they have always known themselves to be but have never dared say aloud. Alongside this we act as a third party reporting service, reporting hate crimes directly to the police on the caller’s behalf, so that those who feel unable to speak to the police do not need to make a report themselves.

We have developed our own online database which has details of over 400 signposting opportunities relevant to our callers. The database is easily searchable and means volunteers have a wealth of information at their fingertips from social groups for minority ethnic LGBT people to LGBT speed dating and gender reassignment clinics.

Approach

Callers can approach their first call with us in many different ways and can raise a wide variety of issues, so it's imperative that our volunteers are equipped with the skills and confidence to know how to respond. Direct advice is often offered to our callers around issues such as sexual health, hate crime and LGBT rights. However, the majority of our calls are from people seeking emotional support. Sometimes, it's simply enough to have a friendly and non-judgemental person on the end of the line who a caller can talk to about issues that they are unable to discuss with anybody else in their life. At other times, it's a lot more complicated than that.

We never assume to be experts on our callers lives, instead we use a non-directive person centred approach that aims to provide callers with the confidence in themselves to be able to make their *own* decisions and find a path that's right for them. For example, 'coming out' is a big issue discussed on the helpline. Whilst coming out might be an incredibly positive step for one person, it could be a very difficult process for another, depending on factors such as what else is going on in a person's life, their culture, support networks, and mental health. Thus coming out for Person A who has good mental health and a liberal set of family and friends might result in the loss of a few friends and the gaining of many new ones – an exciting new start! However coming out for Person B who has mental ill health and lives in a tiny community might result in them being disowned by their entire family and community at a time in their lives when they are struggling with depression.

The team are skilled at getting to the core of our callers' issues and will, where relevant, signpost callers to appropriate services which can offer more specialised support than we can offer over the telephone, for example a local counselling service, a transgender support group, or a friendly helpline approved online forum for those who are socially isolated.

Use of Volunteers

LGBT Health is a community development health initiative with a strong commitment to volunteering. Volunteering is viewed as a key way both to support service delivery and to develop the personal capacity of individuals themselves and collectively, the LGBT community.

Selection

We ask all of our volunteer applicants their reasons for wanting to join us, both in their applications and during our initial interviews. It's important for us to understand the reasons that people are willing to give up their spare time for a role that can be, at times, extremely challenging. The most common answers we receive tends to be a wish to "give something back" to the LGBT community, and a desire to make a difference to individuals who are struggling with issues around their sexual orientation or gender identity. The LGBT specific nature of our helpline is often the main draw for our volunteers, who all, in some way, have a personal link to LGBT issues, whether through their own experiences or those of people close to them.

Since opening, we have carried out two rounds of recruitment for volunteers. Each time we advertise for new volunteers, we screen them by conducting an informal telephone interview to assess their telephone skills, before issuing an invitation to attend our induction training.

Induction

The induction training package developed for helpline volunteers consists of 5 sessions totalling 24 hours. It is an extensive one due to the sensitive nature of the calls we receive, the (often) vulnerable state of our callers, the large amount of signposting and the fact that our volunteers are working solo (although supervised). It is extremely important to us that we have knowledgeable, confident and skilled volunteers who we are sure can provide a compassionate, empathic and professional service.

The induction training sessions use roleplays, case studies, videos and presentations. With each training topic, volunteers are required to take the information they have learned and then act in roles as 'volunteers' and 'callers', each time giving each other feedback and then watching as the trainers act out similar calls. Training covers basic counselling skills, common issues affecting LGBT communities and information about signposting across Scotland. Specific sessions are run on dealing with more challenging calls such as supporting suicidal callers and how to handle inappropriate sexual/hoax calls.

LGBT specific issues covered include gender reassignment, current legislation affecting LGBT people, supporting a parent of an LGBT child and discussing diverse sexual practises and sexual health with ease.

Whilst the induction training aims to leave no stone unturned, it is in the nature of a helpline that new topics or issues will arise. We therefore aim to prepare our volunteers to have the confidence and skills to know how to respond when they *don't* have the answers. Even if it's a case of taking the caller's details, researching information for them and getting back in touch later.

"I explained a lot of really heavy stuff today and you just took it in your stride. It's really put me at ease and I'm feeling good about myself. It's an excellent service, thank you."

At the end of the training course, we select volunteers who we feel are suitable for the service for an initial three-month probationary period, before accepting them as permanent volunteers. We do everything we can to support the trainees to become volunteers and will only not select someone at the end of the course if we feel that their involvement could potentially be detrimental to the callers and the service, or if they have skills more suited to other volunteering opportunities within LGBT Health or elsewhere. In our first recruitment drive, we accepted nine out of twelve trainees; in our second, we accepted all four trainees.

Ongoing Support and Supervision

The Coordinator is responsible for providing ongoing support to our volunteers, including quarterly structured one-to-one support and supervision sessions. These provide an opportunity to discuss any issues which arise during their work and reflect on their practise in a personalised and supportive space.

Every two months we hold group meetings which are split into two sessions. One session is used as a peer support space where volunteers can discuss difficult calls, reflect on their roles and support each other. The other session is used for ongoing training, with training topics identified by the volunteers themselves. Training is usually provided by a speaker from an external organisation, and to date topics covered have included issues for newly diagnosed HIV+ men, domestic abuse within LGBT communities, issues for transgender people undergoing transition and making third party reports to the police via the helpline (i.e. for victims of hate crime). We have worked in partnership with a number of organisations to deliver these trainings including Waverley Care, LGBT Youth Scotland and NHS Lothian's sexual health services.

Volunteer Progression

Since opening in May 2013 we have had a total of 13 volunteers working with us. Whilst it may sound discouraging to learn that 6 of these volunteers have left us over that period, this is mostly due to the busy lives that our committed volunteers tend to lead. One of our volunteers left the service to become our paid helpline sessional worker, who now assists with the delivery of the service in the Coordinator's absence.

Another left to become a face-to-face volunteer counsellor within LGBT Health's Counselling Service, while a further volunteer enjoyed their work with us so much that they are now exploring becoming a gender identity specialist when they finish their degree in medicine, a career decision which would see them provide further essential support to the LGBT community. These examples demonstrate that working on the helpline has clearly served to inspire and open doors for many of its volunteers. For a community development organisation such as LGBT Health, which seeks to improve the lives of *all* LGBT people, these too are important outcomes.

The Experience of Volunteers

"I have volunteered in many places, and it's rare to find the level of support and opportunity for growth that LGBT Health offers."

"[LGBT Health] is a fantastic space to have and I feel really taken care of in terms of support and supervision."

In early 2014 LGBT Health carried out its annual organisation wide Volunteer Survey, which 7 helpline volunteers responded to. Their responses indicate they feel very well trained and supported:

- 83% of volunteers indicated they received support whenever they needed it
- 83% of volunteers thought their support and supervision was excellent
- 83% that their volunteering was well organised
- 71% thought training was excellent
- 71% felt they knew fully what to expect from the organisation

When asked to identify their favourite thing about volunteering with the organisation, responses included:

"Volunteering on the helpline allows me to practice my counselling skills in an environment and within a community I feel connected with."

"Feeling that I'm giving back to my community and helping to provide a valued resource."

"The sense of self respect it has given me and the feeling of helping others who need support."

Volunteers also acknowledged the role was at times a challenging one:

"I've faced some difficult calls and at times found it challenging to trust myself to be able to respond to difficult situations truthfully and effectively."

"The nature of the helpline work can be emotionally challenging, as we take some difficult calls."

In their responses, it was clear that volunteering for an LGBT organisation served as a key motivator:

"The organisation is a fantastic resource and appears to be very well run. I have felt the training and on-going support I've received has been very thorough. Everyone in the organisation is always very welcoming, friendly and positive."

"What I value is the opportunity to have a role within an LGBT organisation, and make a difference for LGBT communities, rather than struggling to make a point in the mainstream non LGBT world!"

Publicity and Promotion

The ability to effectively publicise the LGBT Helpline across Scotland, to ensure that those that need the service are aware of its existence, has been critical. The funding available to do this has been very modest, so there has never been a reliance on paid adverts. Instead the service has been promoted in a range of different ways:

- Helpline details are listed in around 100 LGBT, mental health and other relevant magazines and websites across Scotland.
- Over 40,000 flyers have been sent to LGBT venues, sexual health services, GP surgeries, student university societies and libraries across Scotland.
- LGBT Helpline Scotland generates many of its calls from our own dedicated website, www.lgbt-helpline-scotland.org.uk that provides callers with in depth information about what we do and how we can support them (alongside advice around keeping calls private and safe).
- We have online profiles in several LGBT dating and social networking websites such as Facebook, Twitter, Gaydar, Diva Date, Gaydar Girls and Fitlads.
- We ensure ongoing promotion at events such as the annual Pride festivals and third sector conferences.

Contact details for the Helpline continues to be promoted in LGBT Health's general publicity, including our printed programme (distribution of 5,000 per quarter), website and range of e-bulletins (distribution of around 2,500 per month).



Developments in Delivery

Email Service

LGBT Health is constantly looking for new ways to make the helpline more accessible. It is clear from the number of 'hang-up' calls that we receive (callers who hang up the phone before they manage to speak – an average of around 26 calls a month), that many people find speaking directly with a volunteer too daunting.

From our discussions with LGBT helplines in Nottingham and London, it became clear to that offering support solely via the telephone would create a barrier to some members of our communities. Both helplines take in a significant number of support requests through their email services, often from people who either cannot or, for a range of reasons, simply will not use the telephone to seek support.

Therefore in May 2014 we set up an email address for our callers and began to advertise this on our website and through our online profiles on social networking sites. Since then we have begun to receive emails on a weekly basis and it is clear from some of the requests that these people are likely not to have made contact with us otherwise.

Some examples of people who we have supported through email include a Polish gay man who was not confident speaking English over the telephone, a teenage transgender girl whose parents were often at home, an MSP's PA who needed urgent support for a trans person in their constituency who didn't work during our opening hours, and a gay man from Egypt who was facing homophobic death threats and needed urgent advice about claiming asylum in Scotland. We have learnt that for some people, emailing is convenient and cheaper than calling (important for those experiencing financial difficulties), and that for many an email service is the only accessible way to get the support that they need.

Presence on Online LGBT Dating Sites

The helpline is present and active on several LGBT dating websites such as Fitlads, Gaydar Girls, Diva Date and men's dating site Gaydar, which enables us to support people online. During the first week of opening a community page on Gaydar, we were invited to 'chat' with one of the users through their online chat service.

Although using the chat rooms was not the intention when we opened our profile, they quickly became a quick and accessible way of supporting particularly men. Due to the nature of Gaydar these requests tend to be from men who have concerns about their sexual health (who often contact us before or after they meet other men for sex). Since opening, we have offered sexual health advice to around 100 men this way and we will continue searching for new ways of reaching LGBT people online.

Callers

Regular Themes

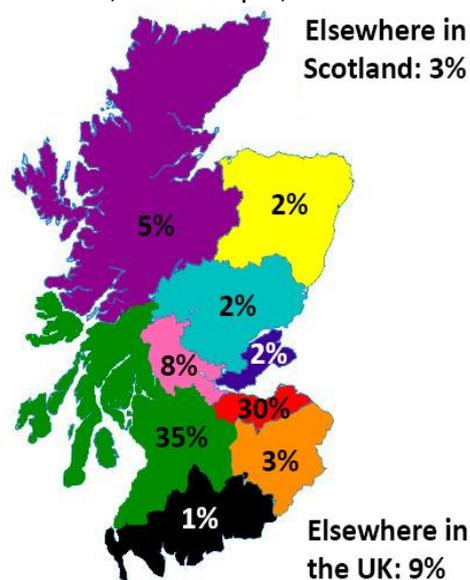
In its first 16 months a total of 965 calls were taken on the helpline. Calls have ranged from very short calls requesting specific information, to lengthy emotional support sessions. On average calls have been 22 minutes long.

At the end of each call, volunteers and staff complete a monitoring form which collects important anonymised data regarding call themes and (where possible) caller demographics. This data is crucial in serving to shape volunteer training and the publicity strategy for the helpline.

An analysis of this data indicates that 78% of our callers seek emotional support, compared with 22% who require information only (examples include those looking for a specific LGBT group or an LGBT friendly B&B). Our callers often discuss multiple overlapping and related issues within each call, for example, mental health struggles often go hand-in-hand with coming out. The most common themes discussed during calls are:

- romantic and sexual relationships (47% of calls)
- sexuality (42% of calls)
- social exclusion and isolation (34%)
- mental and emotional health (31%)
- coming out, in relation to either sexual orientation or gender identity (31%)
- gender identity (21%)
- sex and sexual health (19%)
- abuse, homo/bi/transphobia and harassment (16%).

A large number of our calls also touch on other themes, such as suicidal thoughts, abuse, family conflict and cultural/faith issues.



Demographics

We have consistently found that the bulk of our callers identify as men, despite advertising our service in very few gender-specific places. This is in contrast to our one-to-one services at LGBT Health, where often services are accessed by more women than men. We feel that this is likely to reflect cultural pressures which expect men to keep their emotions hidden – in other words, we feel that the anonymity of the service means that many men who would feel uncomfortable using face-to-face support feel more comfortable speaking to a stranger over the phone.

With regards to ethnicity, we have found reaching minority ethnic LGBT people an ongoing challenge. We acknowledge that there are often acute cultural barriers for some communities in speaking about sexuality and gender identity, and we therefore plan to target minority ethnic services with a publicity campaign in the hope of reaching those LGBT people who, due to their intersectional identity, are often facing multiple levels of discrimination.

23% of our callers told us that they are living with a disability – a statistic considerably higher than the national average (especially given the average age of callers), which we feel reflects the accessibility of the service. Many disabled people experience physical or mental barriers to accessing face-to-face support; the helpline allows LGBT people with disabilities the opportunity to seek support from their own home at a time which suits them (within the constraints of our opening hours), and in a place which is accessible to them.

Caller Survey

Because of the anonymity of the service, helpline callers are not generally asked to provide information about themselves, except where this is directly relevant to the call (e.g. caller location where we are trying to signpost a caller to a local service). However during August 2014 we carried out a telephone survey with some of our callers, asking them a series of questions at the end of the call to get a feel as to who our callers are (e.g. their gender and age), and to gather their feedback on the service. Due to the sensitive nature of many of our calls, we were only able to survey those callers who were not in particular distress at the time of the call ending; a total of 35 surveys were completed over the period.

In terms of the demographic of callers, the survey found that:

- 71% of our callers identify as male, compared with 23% female and 6% of callers who identified their gender as something else (examples include gender queer and “probably male”)
- The most common age bracket of our callers was 26-49 years old (80% of callers)
- 66% of our callers identified their ethnicity as white British/white Scottish, with 6% of our callers identifying their ethnicity as Asian (28% of callers did not answer this question)
- 46% identified as gay (this includes some female respondents), compared with 17% bisexual, 9% lesbian, and 26% ‘other’ (including heterosexual callers)
- 23% of our callers told us that they have a disability.

Whilst only a small number of survey respondents identified as transgender, our quarterly monitoring reports indicate that this is in fact a significant beneficiary group, with around 26% of our callers identifying as transgender. We therefore recognise the need to ensure that future caller surveys capture the feedback from this beneficiary group.

In relation to their use of the service 57% of respondents were calling us for the first time, 31% had called us between 1-5 times, and 11% were regular callers who had called us more than 5 times.

We asked our callers about their use and views of the helpline, and found that:

- Almost half (49% of callers) called us as a first attempt at accessing support and had not accessed any other kind of support beforehand
- A significant percentage of callers - 69% - said they would go on to access other services. The most common referral was to LGBT social groups (37% of all calls taken), with other examples including sexual health services and mental health/counselling services.
- 85% of our callers reported that the service had made a positive difference to their situation and/or wellbeing.

The quotes from callers used throughout this report largely come from this Caller Survey.

Case Studies

The life stories of those calling the helpline are varied and unique. These two case studies aim to illustrate the impact the service can have on those lives.

Bob

Bob is a gay man in his 60's who lives in a small town in the Highlands. Bob has spent the majority of his life married. He had always been aware of his attraction to men but felt unable to ever explore his feelings. "I didn't want to break my wife's heart", Bob told us. Due to both his family upbringing and growing up "in different times", he kept his sexuality "buried, it was a guilty secret that I wanted to go away, but which never did". "At times I felt like my entire life was a complete lie. I felt guilty that I was lying to my wife. I loved and respected her very deeply, I really did. But I just knew that the true intimacy I needed was with another man, and no matter how hard I tried, it just wasn't there with her. I felt terrible about that, and still do. She'd given up everything for me, raised 3 children, worked so hard at keeping our lovely little home a comfortable place for us all. I was suicidal at times...yes, often I just wanted to end it all.. for pretty much my entire married life".

When Bob's wife died two years ago, during his grief he gradually plucked up the courage to call the helpline. He felt that "it was time I just said these things, got this off my chest. I live in such a small town that's there's no opportunities to speak with anyone here – there's no gay groups, no gay venues, and I couldn't tell the people in my community about this – they're terribly old fashioned and homophobic. I know a lesbian couple who were driven out of town here".

Through offering emotional support, a listening ear and empathising with Bob's situation, our volunteers (over the course of 5 or 6 calls within a few months) gently asked Bob open questions about how he feels about his life, what he would like out of the future. "I would love to settle down with a man, I really feel like it's something I need to do, I need to try this before I get too old and lose all confidence." We gently began asking Bob how he might achieve his dreams, and offered links to various kinds of support across the country.

"The support of the people on the helpline has been fantastic ... I wouldn't have been able to do any of this if it wasn't for them."

Bob joined a small LGBT social group in Inverness, which is over 100 miles away from his town but was, he felt, worth the journey. "It's a small and friendly group of people, who I can really just be open with, talk about my real feelings, not have to hide anything at all. It feels so freeing, and it's the first time in my life I've been able to have conversations without hiding anything or putting up a front".

Bob now has plans to move to Edinburgh, and calls us regularly to discuss his plans and to sound out ideas about his big move. He feels he needs to broaden his circle of LGBT friends, which he feels is impossible in his town. "Goal one is more friends, goal two is the man of my dreams....but to be honest, at my time in life, I never thought I'd even get to this stage. Just finding gay friends is something I never thought I'd be able to do. The support of the people on the helpline has been fantastic, I'm sure I must have been rattling on without much sense many times but they stick with you, they encourage you to talk more, they don't judge you. I wouldn't have been able to do any of this if it wasn't for them."

Alan

Alan is a 39 year old bisexual man who lives in Lanarkshire. Alan became aware of his feelings for other men through a one-off encounter he had after a work night out a few years ago. Since then, Alan has been visiting saunas and cruising grounds at least once a week, and had been engaging sexually with a number of men.

On his first call to the helpline, our volunteer focused on the emotional impact of his behaviour and how this had been affecting him. "I have a girlfriend, and I feel like, well I want to stay with her, I love her...but I just need to explore this side of things. I feel ashamed but I think I'm addicted if I'm being honest". We offered empathy to Alan during these calls, reflecting how difficult this must be for him. Gently as the first call went on (which lasted nearly 2 hours), our volunteer asked about his sexual health. "You mentioned before that you've been with a lot of men recently, do you mind if I ask if you've been using any protection?" Alan was dismissive at first, saying that of course he is "always safe". Our volunteer asked him if he was comfortable discussing what he considered to be safe sex, at which point he revealed that he had been using condoms when he was receiving anal sex, but not when giving anal sex or during oral sex.

We praised Alan's use of condoms when receiving anal but drew his attention to the fact that anal sex in any position is unsafe without a condom, and also that there are many STI's that can be transmitted through oral sex. Alan seemed shocked that he could "pick things up through fucking", so we pointed him in the direction of online safer sex information provided by Terence Higgins Trust and suggested he get a sexual health check-up. We left the discussion about safer sex there as he didn't seem to want to go further and gave the impression he was very uncomfortable.

A few weeks later Alan called back and spoke to a different volunteer. He asked if he was likely to have "picked up HIV from giving anal sex" to numerous men, and was very distressed that he might have "given AIDS" to his girlfriend. We discussed the difference between HIV and AIDS and signposted him to a testing service in Glasgow – the Steve Retson Project - which offers an anonymous testing service for men who have sex with men. Alongside this we offered Alan emotional support and the space to explore his feelings of guilt and fear.

We hadn't heard from Alan for a while, when he eventually called us a few months later. Alan had been tested and was found to be positive for chlamydia. He said that he was now using condoms for anal intercourse, but said that he really didn't want to for oral sex, as he noticed that no other men seem to use them and felt it would be seen as "weird". We suggested that if he wasn't going to use condoms for oral sex, then it's a good idea to get tested every 6 months, or even more often depending on how many encounters he is having, alongside giving some practical advice (e.g. not brushing teeth before performing oral sex, avoiding oral sex if he has cuts and sores in his mouth, not swallowing).

Alan was also building up to telling his girlfriend about his sex with men, which was causing him a lot of distress, particularly as he might have passed chlamydia on to her. We supported him further over the coming months whilst he went through a breaking up process with his girlfriend. He found it very difficult but he had joined a group for gay and bisexual men in Glasgow at Gay Men's Health, which we had signposted him to. "To be honest, my life feels really messy at the moment, and I've got a lot that I need to work though. It's down to this helpline that I got away with just chlamydia, which is at least treatable. If I'd have carried on with that road to self-destruction I don't know where I'd have ended up, or what I'd have picked up."

Next Steps

Domestic Abuse Campaign

Thanks to funding from the Scottish Government, we are embarking on a new campaign to support LGBT people affected by domestic abuse. This very overlooked issue greatly affects our communities and we are working closely with organisations such as LGBT Youth Scotland, AMIS (Abused Men in Scotland), and Relationship Scotland to upskill the knowledge of volunteers and staff about domestic abuse.

By the end of 2014, the helpline staff and volunteers will be fully trained and equipped to support our callers with this sensitive and often hidden issue, and we will be campaigning across the country to get the word out that we are here to help.

Expanding our Email and Online Service

With our email and online requests on the rise, it is clear there is scope to further increase our email service and online presence. We are therefore looking into new and different ways of engaging with LGBT people online. One approach that we would like to pilot is an on line chat facility for those who, for a variety of reasons, cannot or simply will not use the telephone. This would necessitate some additional resourcing as it will require additional IT capacity and volunteers will require further training in supporting people using this approach.

Opening Hours

We are fully committed to seeing LGBT Helpline Scotland thrive. We know that there are thousands more people out there who need our support, and recognise that the number of people we are currently reaching is scratching the surface of what we could achieve with longer opening hours and more funding. We are determined to see LGBT Helpline Scotland grow from a relatively new and successful national helpline into a permanent fixture for all lesbian, gay, bisexual and transgender people in Scotland.

"I wish there was a way of you having this service 7 days a week. You've saved a life today."

We were delighted to find such positive feedback from the survey. The only consistently negative feedback we received from our callers was in regard to our limited opening hours - 23% said that they felt we were not open for enough days and/or hours, with comments including "not practical", "restrictive" and "two days a week just isn't enough – what do we do if we're struggling in the meantime?" Moving into the future we would certainly hope to extend our hours, as it is clear that two days per week is not sufficient.

In order to achieve this, we will again be seeking to secure more funding for the helpline in order to extend the hours of our paid Helpline Coordinator, and in turn recruit more volunteers to deliver the helpline over longer periods of time than we can currently provide. In the meantime outwith our opening hours we will continue to refer our callers to London Lesbian and Gay Switchboard, who unfortunately lack our specialist local knowledge to effectively signpost callers, as well as to more general mental health services such as the Samaritans and Breathing Space.

LGBT Health and Wellbeing

LGBT Health and Wellbeing was set up in 2003 to promote the health, wellbeing and equality of lesbian, gay, bisexual and transgender (LGBT) people in Scotland. It provides support, services and information to improve health and wellbeing, reduce social isolation and stimulate community development and volunteering.

The organisation's key objectives are to:

- provide a programme of activities which tackle the life circumstances that contribute to the ill-health of LGBT people
- reduce levels of isolation and social exclusion experienced by LGBT people
- strengthen the capacity of the LGBT community to promote the health of individuals
- support individuals to adopt and sustain healthy lifestyles
- ensure that LGBT people have equity of access to mainstream health services and information which are responsive to their needs.

The LGBT Helpline Scotland provides a vital gateway to the wide range of projects and initiatives the organisation delivers from its bases in Edinburgh and Glasgow. For further details about the helpline contact our Helpline Coordinator Ste McCabe on stephen@lgbthealth.org.uk.

LGBT Helpline Scotland (Tuesdays & Wednesdays 12-9pm)

T: 0300 123 2523

E: helpline@lgbthealth.org.uk

W: www.lgbthealth.org.uk/helpline

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