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healthwatch Suffolk

My Health, Our Future (Phase 7)

The wellbeing of LGBT*Q+ young people in Suffolk

Acknowledgements

The continued support of the Suffolk and North East Essex Integrated Care System, and various partners collaborating with young people in Suffolk is essential to the success and achievements of the 'My Health, Our Future' (MHoF) programme. Above all, we thank school and college leaders, and students, at the following schools and colleges for supporting MHoF 2023:

- Abbeygate Sixth Form College
- Castle Manor Academy
- Chantry Academy
- Claydon High School
- County High School
- Copleston High School
- East Bergholt High School
- Felixstowe Academy
- Holbrook High school
- Horringer Court Middle School
- Ipswich High School
- Ipswich School
- King Edward VI School
- Mildenhall College Academy
- Newmarket Academy
- Northgate High School
- Ormiston Denes Academy
- Pakefield High School
- Samuel Ward Academy
- St Joseph's College
- Sir John Leman High School
- St Alban's Catholic High School
- Suffolk ONE Sixth Form College
- Thomas Gainsborough School
- West Suffolk College
- Westley Middle School
- Westbourne Academy
- The survey was also open to the public, gaining **77** responses.

Thank you to everyone who took the time to respond and share their experiences with us.

The Warwick-Edinburgh Mental Wellbeing Scale

This report includes reference to, and use of, a widely used measure of wellbeing known as the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS). It was developed by the Universities of Warwick, Edinburgh and Leeds in conjunction with NHS Health Scotland (©University of Warwick, 2006, all rights reserved).

Results related to the use of a shortened format of this scale can be found throughout, and within our section about wellbeing from page 15. For more information about WEMWBS, please visit https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs/.

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For more information about 'My Health, Our Future' (MHoF), or to download previous reports and insights, please visit:
www.healthwatchsuffolk.co.uk/mhof

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Introduction – LGBT*Q+ in focus

My Health, Our Future (MHoF) is a unique research programme exploring the physical and mental wellbeing of children and young people in Suffolk.

Since 2015, MHoF data has been helping schools, colleges, and integrated care systems to improve support for children and young people. The programme offers reliable insights into the current wellbeing of young people across Suffolk, providing data to support local decision-making about services, attract funding for local support and inform health and care system strategies around young people's health and wellbeing.

The programme has recorded over 55,000 responses from young people on topics like bullying, anxiety, and many other areas. The 'phase seven' survey included a new focus on physical health, prompting young people to share views on topics like sexual health support, and healthy lifestyles.

This report presents findings from phase seven of the MHoF survey for young people in secondary schools and colleges. It is focused on the health and wellbeing of LGBT*Q+ young people.

Young people completed the survey between December 2022 and July 2023.

This report is a part of a series relating to our findings in 2023/24.

Please **click this link** to find our other MHoF phase seven reports.

For more information about the MHoF research programme,and to access our full range of reports and content, visit **this link**.

Co-production

Each year, the My Health, Our Future' survey is reviewed together with young people, NHS commissioners, schools, colleges and other partners to make sure it remains relevant to local priorities. Most importantly, the co-production of the survey helps us to ensure the survey remains focused on issues that are important to young people.

For phase seven, we began by reaching out to schools and colleges in Suffolk to explore the issues highlighted in previous reports and gain insight into the challenges they face. We also approached local partners (e.g., Public Health Suffolk) to consider insights that may be valuable as they are developing new strategies and services. This led to the addition of new topics in the survey this year.

In addition, we collaborated with our Youthwatch Suffolk network of young people, who highlighted a range issues they felt could be explored in the survey. Together, we developed new sections addressing LGBT*Q+ issues in relationship and sex education classes, and content about seeking information or support around hormonal changes.

"Us young people rarely get a say in anything important, but it's about time we're included in conversations around our own mental and physical health. The survey gives us this opportunity!

*"From Youthwatch's contributions to the survey, new topics this year around the effects of hormones, experiences with GPs, and the experience of the LGBT*Q+ community around health were included. Without our involvement, these topics may have been overlooked."*

– **Youthwatch Member**



Who took part?

Sample summary

13,084 responses were recorded. Of these, 1,763 (15%) responses were from LGBT*Q+ young people.

- Most LGBT*Q+ responses were from young people in Year 7 to Year 11 **(64%/ 1133).**
- A further **34% (596)** were from students in Year 12 and Year 13 in schools and Colleges. There were also a small number of responses from university students and young people not in mainstream education.
- The largest proportion of LGBT*Q+ students were female **(59%/ 1,047)**. This was followed by **259 (15%)** people who preferred to describe their gender another way, and **415 (24%)** male.
- **57% (1005)** of LGBT*Q+ students identified as Bisexual. **13% (227)** identified as gay female/lesbian, and **11% (198)** identified as gay male. A further **333 (19%)** preferred to describe their sexuality another way.

Year Group	Count	%
Year 7	236	13%
Year 8	223	13%
Year 9	299	17%
Year 10	221	13%
Year 11	154	9%
Year 12	389	22%
Year 13	207	12%
No answer	27	1%
Not in education	4	0%
Home schooled	2	0%
University	1	0%

Additional support needs

Additional support needs have been shown to impact on students' wellbeing across the MHoF programme. See table for a breakdown of responses from LGBT*Q+ students.

Additional support needs	Count	%
None of these apply to me	767	44%
Receiving free school meals	238	17%
Diagnosed mental health difficultly	406	23%
ADHD	242	14%
Special educational needs	194	11%
Autism, Asperger's syndrome, or ASD	252	14%
Disability	197	11%
Young carer	112	6%
Has been in care	99	6%
Has children/A parent	37	2%
Has been a refugee	35	2%

- **27% (475)** of LGBT*Q+ students identified having one additional support needs. A further **24% (422)** identified two or more additional support needs.
- LGBT*Q+ students were more likely to report having an additional support need. For instance, almost a quarter **(23%)** of LGBT*Q+ students reported having a diagnosed mental health difficulty, compared to **7% (681)** of heterosexual students.
- LGBT*Q+ students were almost twice as likely to report having a disability **(11% vs. 4%)** and a special educational needs **(11% vs. 4%)** compared to heterosexual peers.



Our Results

Wellbeing (SWEMWBS)

Young people's wellbeing has increased after experiencing record low scores for the last two years. However, scores for LGBT*Q+ students showed no meaningful difference.

- The Short Warwick-Edinburgh Mental Wellbeing Scale was used to measure wellbeing. Students respond to seven statements and receive a score ranging between 7 and 35. A higher score indicates better wellbeing.
- **12,959** students responded to the SWEMWBS questions.
- LGBT*Q+ young people have a lower wellbeing score (poorer wellbeing) than heterosexual students, and a national average recorded in 2020.

National SWEMWBS data
NHS research in 2020 reported the average SWEMWBS score for young people in England (aged 11 to 16) as **24.6.**



Suffolk (2023)

- **18.5** (LGBT*Q+ respondents)
- **20.7** (Heterosexual respondents)

National NHS data

24.6 (2020)



23%

of LGTB*Q+ young people felt optimistic about their future ‘all of the time’ or ‘often’.

Happiness (the GCI)

Developed by the Children's Society, the Good Childhood Index (CGI) is a short questionnaire that can be completed by children themselves. It is used to measure wellbeing overall and in relation to 10 aspects of life.

Students were asked how happy they are with:

- Their relationships with family.
- The home they live in.
- How much choice they have in life.
- Their relationships with friends.
- Things they have (like money and things they own)
- Their health
- The way they look.
- What may happen to them in the future.
- School
- The way they use their time.

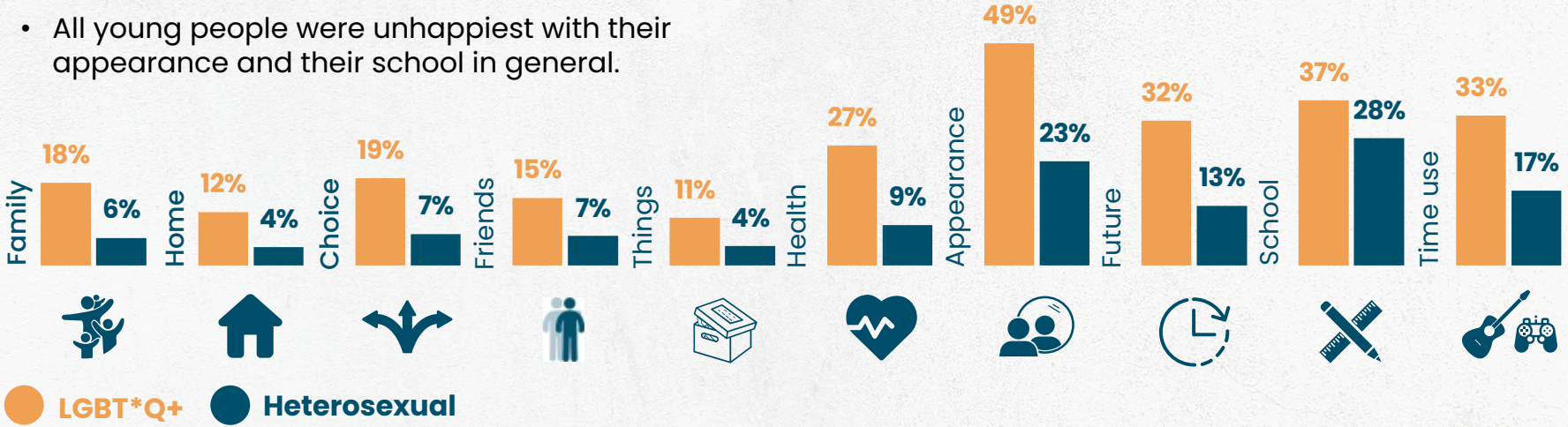
Students' responses to the ten aspects of life included in the index amount to an average happiness score. Scores below the midpoint (0 to 4) on the 0 to 10 scale are considered to have low wellbeing for the various aspects of life included in the index.

For more information about the CGI, please visit https://www.childrenssociety.org.uk/information/professionals/good-childhood-index.

Happiness (GCI)

The Good Childhood Index (GCI) was used to measure young people's happiness in relation to ten different aspects of life. The graph below shows the proportion of LGBT*Q+ young people scoring below the mid-point on the 0-10 scale, compared to heterosexual peers. These students would be considered as having 'low wellbeing'.

- LGBT*Q+ students were more likely to score below the mid-point (0-4), which suggests they were unhappier with all domains.
- All young people were unhappiest with their appearance and their school in general.
- LGBT*Q+ students were **three times** as likely to indicate unhappiness with their home life and their health than heterosexual students.

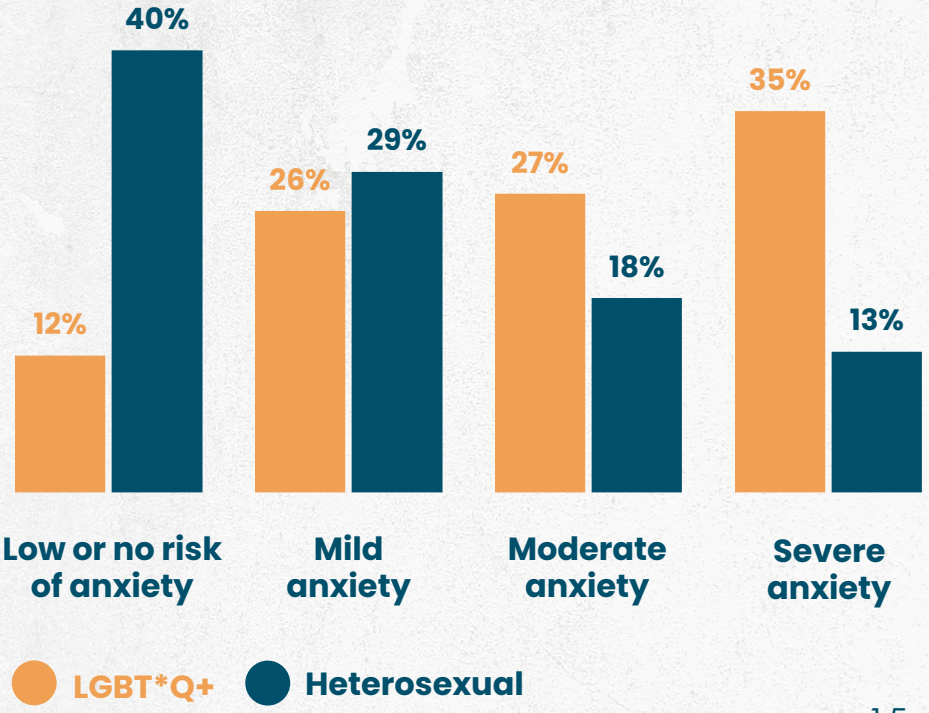


Anxiety(GAD-7)

Less than 1 in 8 (12%) LGBT*Q+ young people in Suffolk have 'low' or 'no risk' of Generalised Anxiety Disorder. That compared to 40% of heterosexual students.

The Generalised Anxiety Disorder Assessment (GAD-7) presents students with seven statements to identify probable cases of Generalised Anxiety Disorder. From their average scores, students can be categorised as having 'mild', 'moderate', or 'severe' anxiety.

- **12,148** students responded to these questions, including **1,639** LGBT*Q+ students. The graph demonstrates the percentage of students attributed to each anxiety category.
- The graph shows that LGBT*Q+ young people were twice as likely to fall within the moderate to severe anxiety category **(62%/ 1,015)** compared to **31% (2881)** of heterosexual students.



What would help?

12,137 responded to the question (1,646 LGBT*Q+ students). The response choices were recommendations proposed by young people in the 2022/23 MHoF (Phase Six) survey regarding what could be improved.

- The most favoured suggestion for improvement by LGBT*Q+ students was more awareness of mental health among school or college staff and students **(61%)**. This was closely followed by more information about support options and where to access them **(51%)**.

- The most favoured suggestions for improvements by heterosexual students were more after-school activities **(45%)** and more awareness among staff and students **(41%).**

Statements	LGBT*Q+	Heterosexual
Access to counsellors/ someone to talk to	47%	32%
Guest speakers with knowledge about mental health	31%	25%
More awareness of mental health among staff and students	61%	41%
More information about support options and where to access them	51%	35%
More frequent lessons on mental health	41%	30%
More time to discuss mental health	49%	32%
An after school or breakfast club that provides healthy food	30%	23%
School lunches to offer healthier options for food	37%	33%
More after school activities (sports, music, art, dance)	44%	45%



1 in 5

LGBT*Q+ students said don’t have someone at their school or college they could talk to about their mental health.

Someone to talk to

Young people were asked who they would most likely talk to at their school or college.

- All students were most likely to talk to another student about their mental health. This included almost half **(49%)** of LGBT*Q+ young people. This highlights the importance of raising awareness of mental health among young people and ensuring they are informed about where to find support when needed.
- LGBT*Q+ young people were slightly more likely to want to talk to teachers, mental health support teams, student support, and personal progress tutors than heterosexual peers.
- Heterosexual peers were slightly more likely to indicate that they would most likely want to talk to no one compared to LGBT*Q+ young people **(24% vs. 23%).**

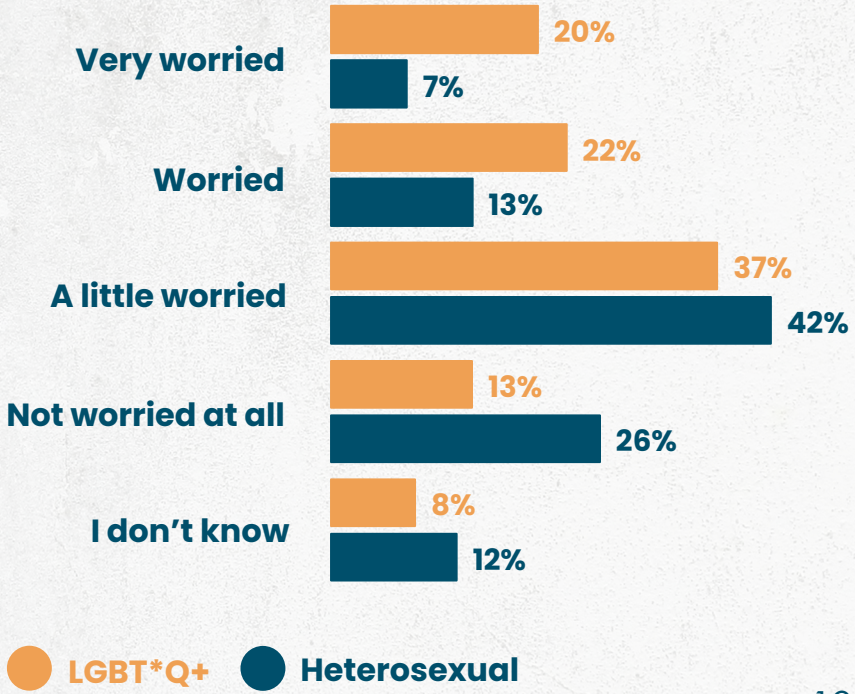
Most likely to speak to...	LGBT*Q+	Heterosexual
Teacher	28%	26%
School nurse	7%	7%
Mental health support team	16%	14%
Another student	49%	43%
Student support	10%	9%
Personal progress tutor	16%	11%
Pastoral staff	11%	9%
Other/ Someone else	16%	17%
No one	23%	24%

Cost of living

LGBT*Q+ young people were twice as likely to be 'very worried' or 'worried' about the potential impact of the rising cost of living on themselves and their families.

12,137 students responded, including **1,617** LGBT*Q+ students.

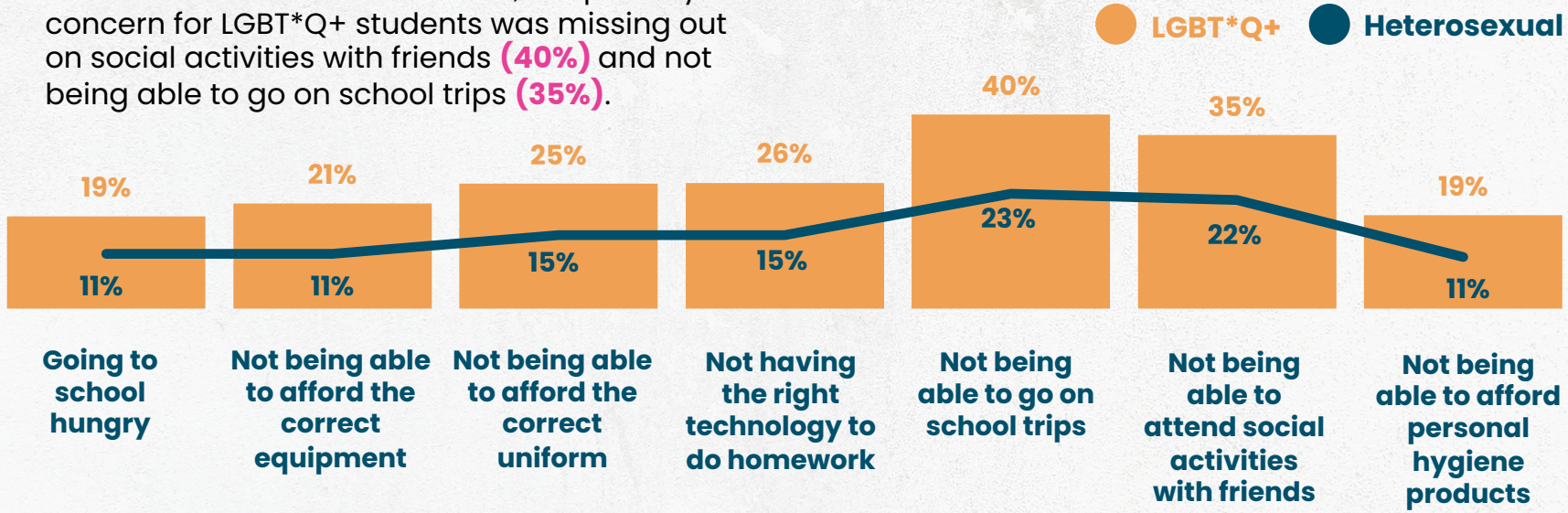
- **37% (594)** of LGBT*Q+ students were 'a little worried' about the potential impact of the rising cost of living on themselves and their families. This is compared to **42% (3,877)** of heterosexual students.
- **42% (680)** of LGBT*Q+ students were either 'worried' or 'very worried'. This is compared to **21% (1,916)** of heterosexual students.
- A further **13% (217)** of LGBT*Q+ young people did not express any worry at all regarding the cost of living and **12% (1,109)** heterosexual students.



What are you worried about?

The graph below shows the percentage of students who said they were worried about a number of statements 'now' or for 'the future'.

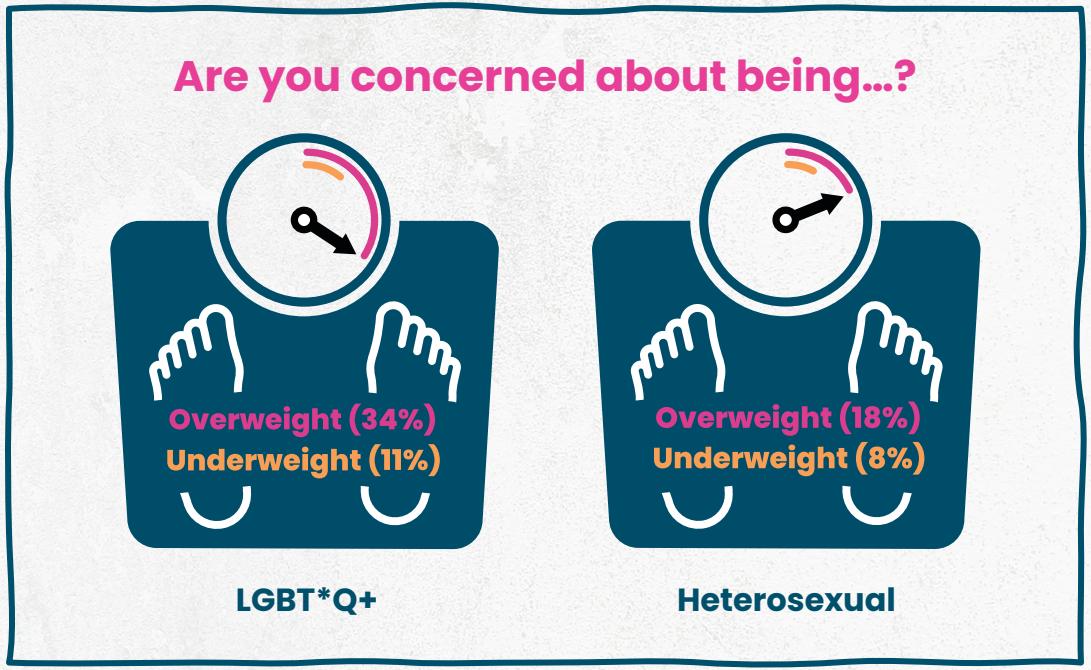
- LGBT*Q+ were more likely to report feeling worried about all of the statements now or in the future compared to heterosexual students.
- Similar to heterosexual students, the primary concern for LGBT*Q+ students was missing out on social activities with friends **(40%)** and not being able to go on school trips **(35%)**.
- LGBT*Q+ students were twice as likely to report they were worried about being able to afford hygiene products, going to school hungry, and not being able to afford the correct equipment.



Healthy lifestyles

We asked young people whether they were concerned about their weight. 11,831, including 1,607 LGBT*Q+ students.

- LGBT*Q+ young people **(45%/ 721)** were more likely to report concern about their weight compared to heterosexual students **(26%/ 2,396).**
- **A quarter (26%/ 411)** of LGBT*Q+ students had no worries about their weight, compared to **50% (4,623)** of heterosexual students.
- **34% (550)** of LGBT*Q+ students were concerned about being overweight, and **11% (171)** were concerned about being underweight.



Managing weight

We asked young people what would help them to manage their weight.

The table illustrates students who were concerned about their weight and their preference for what would help them to manage their weight.

- The most favoured option by LGBT*Q+ **(30%)** and heterosexual students **(37%)** was information about losing or gaining weight. This was closely followed by information about healthy diets.

- LGBT*Q+ students were more likely to want information about services in their local area to help them manage their weight, compared to heterosexual students **(14% vs. 9%)**. They were also more likely to want someone to talk to about their weight **(21% vs. 14%).**

Statements	LGBT*Q+	Heterosexual
Information about losing or gaining weight	30%	37%
Information about healthy diets	32%	30%
Information about exercise and sporting activities	27%	27%
Improved access to sporting activities	22%	22%
Information about services in my local area to help manage my weight	14%	9%
Someone to talk to about my weight	21%	14%
Something else	16%	10%

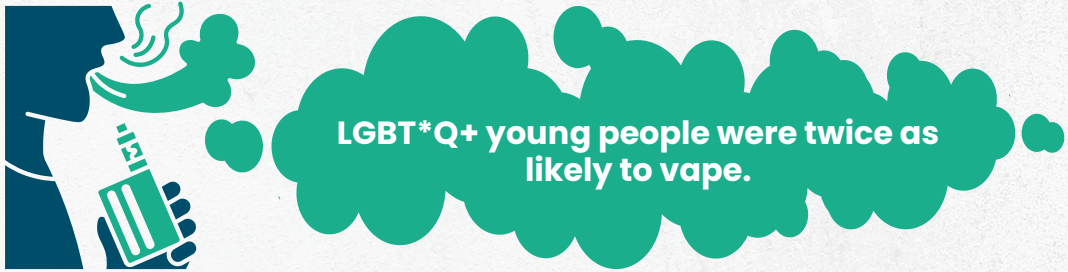
Vaping

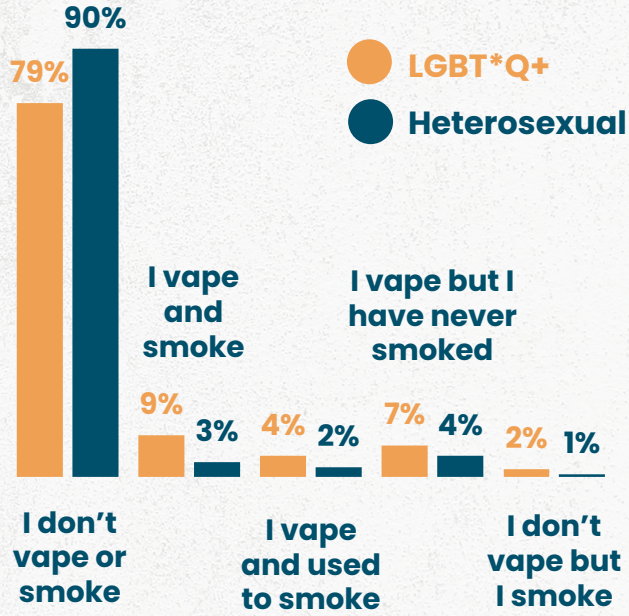
11,758 students responded to the question about vaping, including 1,591 LGBT*Q+ students.

- Most young people did not vape or smoke (see graph). Although, heterosexual young people were more likely to report this than LGBT*Q+ young people **(90% vs. 79%)**. In total, **20% (315)** of LGBT*Q+ students vaped compared to **9% (867)** of heterosexual students.

- The most common reason for vaping among all young people was that they liked the feeling it gives them.

- LGBT*Q+ young people were more likely to say they were 'addicted to them' **(35% vs. 29%)**, they are 'easier to get than tobacco cigarettes' **(17% vs. 7%)**, and they are 'trying to quit smoking' **(16% vs 10%)** than heterosexual peers.





Sexual health

We asked young people in Year 9 and above about their awareness of iCaSH. It is a local service that provides all aspects of sexual and reproductive health, including contraception, STI testing and treatment.

7,264 students responded to the question, including **1,137** LGBT*Q+ students.

- Most students were unaware of ICaSH before the survey. This included **80%** of heterosexual students and **73%** of LGBT*Q+ students.
- LGBT*Q+ young people were slightly more likely to have known of iCaSH than heterosexual students **(23% vs. 16%).**
- The table shows students' responses to what might prevent them from attending a sexual health clinic. LGBT*Q+ students were most likely to say they would feel embarrassed and be unsure of where a nearby clinic is located.

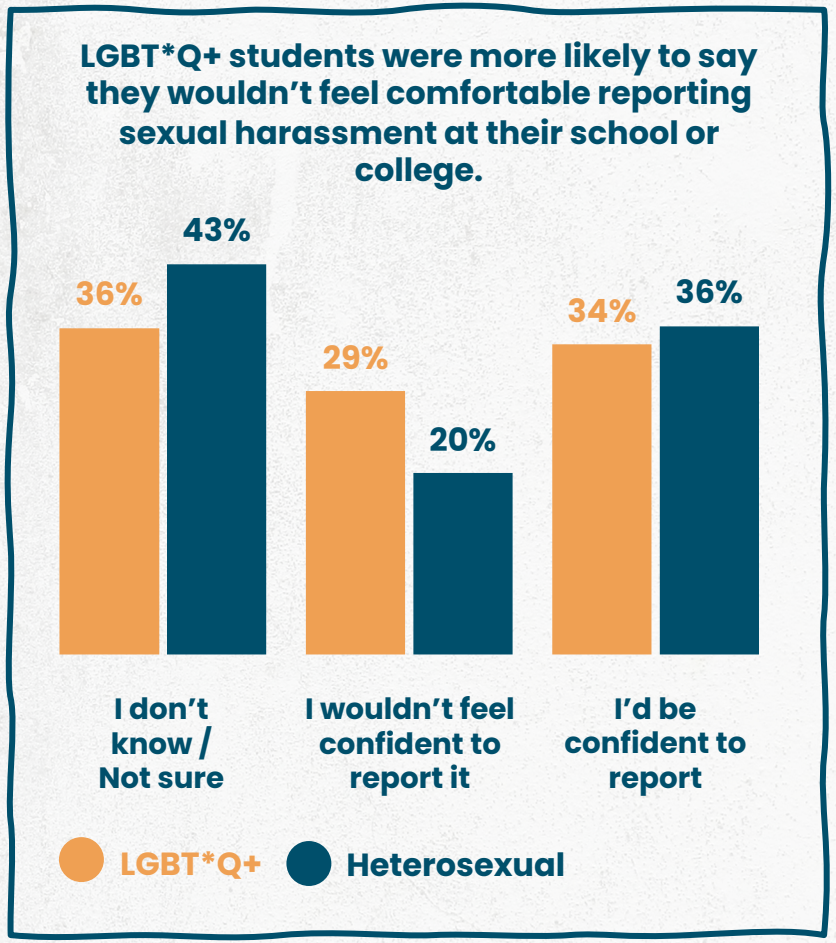
Answer choices	LGBT*Q+	Heterosexual
Feeling embarrassed	47%	34%
Unaware of nearby clinics	36%	23%
No clinics nearby	7%	4%
Wouldn't want to call for an appointment	28%	13%
Wouldn't want to reply on parents for transport	28%	15%
Something else	7%	3%
I don't know	32%	50%

Sexual harassment

LGBT*Q+ young people were much more likely to have heard or seen sexual harassment in their school/college than heterosexual students.

Between **8,449** and **7,444** students responded to questions in this section including **1,172** LGBT*Q+ young people.

- **73% (941)** of LGBT*Q+ students had heard or seen sexual harassment at their school or college compared to **54% (3481)** of heterosexual students.
- **1 in 3 (33%/ 423)** LGBT*Q+ students and **24% (1,524)** of heterosexual students had heard or seen wanted messages of a sexual nature.
- Over a quarter **(29%/ 378)** of LGBT*Q+ students and **19% (1,227)** of heterosexual students had heard/seen 'other unwanted sexual behaviour'.
- Furthermore, a quarter of LGBT*Q+ students **(24%/ 307)** and **16% (1,064)** of heterosexual students had witnessed 'sexual threats.



Relationship and sex education

Students were asked whether they had received information about the following RSE topics and whether this information was at the right time or what they wanted to know.

I haven't received information about...	LGBT*Q+	Heterosexual
Gender Identity	43%	29%
Sexual Orientation	32%	24%
Healthy relationships and consent	10%	10%
Options for contraception	19%	16%
Sexually transmitted infections	21%	16%
How to look after my sexual health	31%	23%

- Most students had received information about the RSE topics. Although, LGBT*Q+ students were more likely to say they had not **(see table left).**
- More than **2 in 5 (43%)** LGBT*Q+ students had not received information about gender identity, compared to **29%** of heterosexual students.
- **1 in 3 (32%)** LGBT*Q+ students said they had not received information about sexual orientation, compared to **1 in 4 (24%)** heterosexual students.
- Similarly, almost **1 in 3 (31%)** LGBT*Q+ students had not received information about how to look after their sexual health, compared to **23%** of heterosexual students.

Hormones

We sought to understand if young people felt they had received enough information about physical and emotional changes to expect during puberty. The questions on hormonal changes were designed with the support of Youthwatch Suffolk.

- LGBT*Q+ students were slightly more likely to say they had not received information about the physical **(9% vs. 8%)** and emotional changes **(14% vs. 11%)** than heterosexual peers.
- Whilst most students received information about the physical and emotional changes to expect during puberty, this information was often not enough or was given at the wrong time.
- **Almost half (48%)** of LGBT*Q+ students were given information about the emotional changes, but it was not enough or at the right time for them. This compares to **32%** of heterosexual students.

Physical changes	LGBT*Q+	Heterosexual
I haven't received information about this	**9%**	**8%**
I was given information, but it wasn't enough or at the right time	**42%**	**28%**

Emotional changes	LGBT*Q+	Heterosexual
I haven't received information about this	**14%**	**11%**
I was given information, but it wasn't enough or at the right time	**48%**	**32%**

healthwatch Suffolk

This report has been produced to support the ongoing development and implementation of children and young people's mental health and emotional wellbeing support in Suffolk. It will be publicly available on the Healthwatch Suffolk website. It will also be made available to Healthwatch England, and bodies responsible for the commissioning, scrutiny or delivery of local health and care services.

We confirm that we are using the Healthwatch Trademark (which covers the logo and Healthwatch brand) when undertaking work on our statutory activities as covered by the licence agreement.

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