

The letter 'B' is rendered in a bold, stylized font. It is primarily magenta with a thick black outline. The interior of the 'B' is filled with a light teal color, and the top and bottom curves are accented with a yellow-green color. The 'B' is positioned on the left side of the page, partially overlapping the teal background.

COMMUNITY HEALTH PROFILES

Understanding the health needs of gay and MSM communities: using the Gay Men and other MSM Community Health Profile

A BOLDER HEALTHIER BIRMINGHAM

Intro to Community Health Profiles

- Full reports and additional resources can be found on the [Community Health Profile Homepage](#)
- Further information on the research in this webinar can be found in the [Gay Men and other MSM Community Health Profile report](#)
- See also the [Infographic Summary](#)
- For more information on the background and research methodology of the profiles watch our '[Intro to Community Health Profiles](#)' video



Language: Other Relevant Definitions

Men who have sex with men (MSM)

- Often used clinically to refer to **sexual behaviour** only, regardless of sexual orientation. MSM comprise a diverse group in terms of behaviours, identities, and health care needs.

Coming Out

- When a person first tells someone about their orientation

Homophobia

- The fear or dislike of someone, based on prejudice or negative attitudes, beliefs or views about lesbian, gay or bi people.

Heteronormativity

- The assumption that somebody is straight/heterosexual as the 'default' option; often erasing LGBTQ+ identities

Data Collection

2021 Census:

- Two **new questions** were included on the 2021 Census
- *Q1: Which of the following best describes your sexual orientation?*

Straight/ Heterosexual	Gay or Lesbian
Bisexual	Other

Other Considerations:



- Data that are relevant to the experiences of gay men and other MSM people may include:
 - Sexual orientation identity
 - Sexual behaviour
 - Sexual attraction
 - Relationship status
 - Gender identity and sex assigned at birth

Data Limitations



Limitations of census: Due to grouping of 'gay or lesbian', significantly limited understanding of health and wellbeing from 2021 census



Grouping by LGBTQ+: Often specific data on gay men is unavailable, often being presented as part of the wider LGB+ or LGBTQ+ cohort



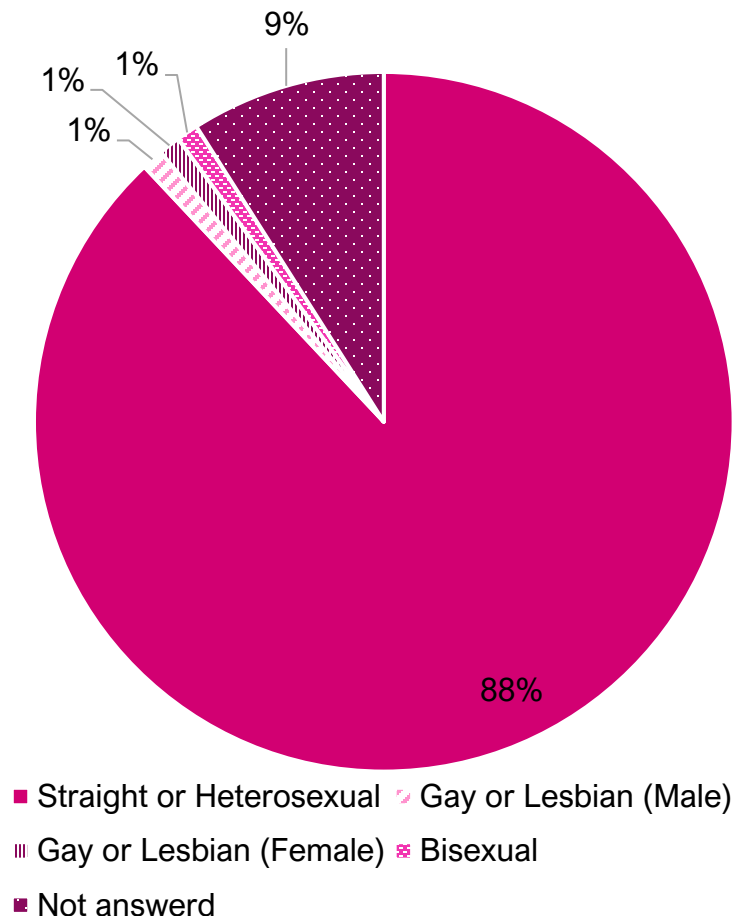
Unadjusted Variables: data from GP patient survey (GPPS) and Health Survey for England (HSE) have not been adjusted

Demographic Overview

- **Population size:** 7,711 males identified as 'gay or lesbian' (0.9% of total population).^[1]
- **Ethnic group (England):** 72% of gay men identified as 'White British' and a further 14% 'Any Other White' (74% heterosexual men England average).^[2]
- **Religion:** 63% had 'no religion' (39% heterosexual), 27% Christian (46% heterosexual).^[2]
- **Age (Eng and Wales):** 33% aged 16 to 24 (13% heterosexual), 28% aged 25 to 34 (16% heterosexual).^[1]

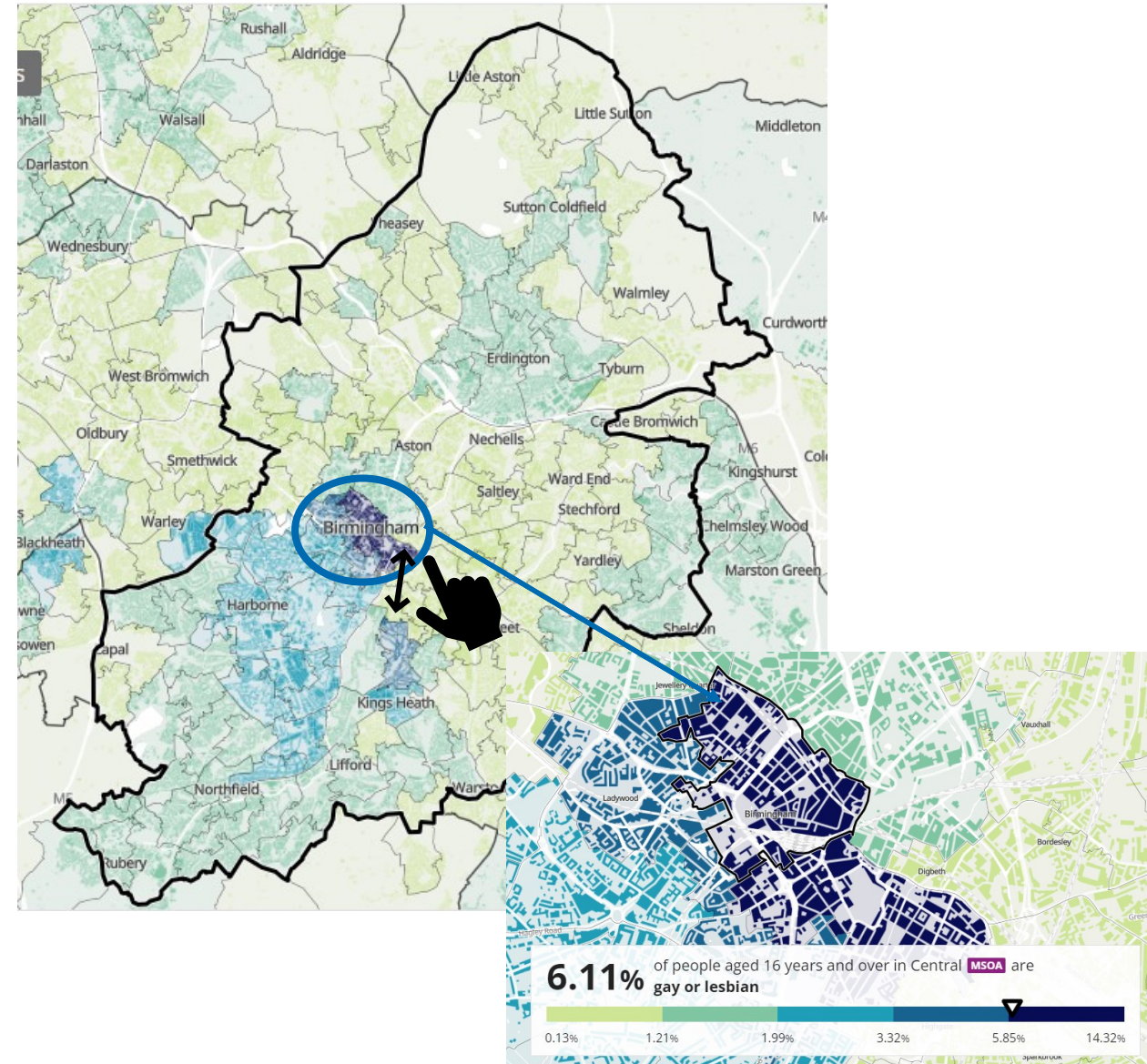
Demographic data relates to the Birmingham population unless otherwise stated.

Sexual Orientation by Sex



Geography Overview

- [Census mapping tool](#): sexual orientation available to MSOA level
- 'gay or lesbian' identity ranges from 0.13% to 6.1% of MSOAs
- MSOA by population density:
 1. Central (6.1%)
 2. Digbeth (6.0%)
 3. Ladywood – Summer Hill (5.3%)



Mental Wellness and Balance

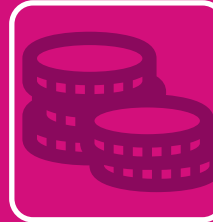
Stonewall LGBT in Britain Health Report (2018): [3]

- High percentage of gay men experienced anxiety (54%).
- Higher percentage of GBT men experienced depression (46%) compared with men in general population (13%).

2018 National LGBT Survey: [4]

- Less gay men (20%) accessed or tried to access mental health services in the preceding year compared with all other LGBTQ+ respondents (32%).

Risk Factors for Poor Mental Health



Lifestyle and wider determinants: lower income, substance abuse



Demographics: being disabled, single, born abroad, aged 18 to 24, ethnic identity



Homophobic discrimination and bullying, not being out, internalised homophobia

Healthy and Affordable Food



In Health Survey for England (HSE) (2011 to 2018) gay men were less frequently identified as being overweight (52%) compared with heterosexual men (68%).^[5]

- Some research suggests higher risk for disordered eating behaviours e.g. binge eating, purging, dietary weight restraint.^[6]
- Review article found 3.4% gay men and 2.9% bisexual men were underweight compared with 1.2% heterosexual men.^[7]
- Theorised differences may be due to unique pressure gay men experience to fit a particular ideal of the male body.^[8]

Active at Every Age and Ability

Active Lives survey (2020 to 2021): [9]

- 67% gay men report being physically active, 64% heterosexual men.

National LGB+T Partnership report (2016): [10]

- Smaller LGBTQ+ studies typically report lower levels of physical activity
- 55% of gay men were categorised as not being active enough to maintain good health, only 18% met recommended guidelines.

Fewer gay men (6%) participated in team sports than heterosexual men (17%).^[9]

Out on the Fields (2015) study: 70% of gay men agreed homophobia is more common in team sporting environments than general society.^[11]



Living, Working and Learning Well



Coming Out [12]

- Gay men reported higher rates of feeling comfortable as an LGBTQ+ person in the UK (64%) compared with other LGBTQ+ identities (56%)



Discrimination [12]

- 17% experienced homophobic incidents in the workplace
- 19% experienced lack of understanding from healthcare staff
- 9% experienced unequal treatment from healthcare staff



Compounding Factors

- The % of disabled and minority ethnic LGBTQ+ people who had negative experiences of healthcare was higher than for non-disabled people and White LGBTQ+ people

Protect and Detect

UKHSA (2021) ^[13]

Sexual health data: gay men often grouped with bisexual men and other MSM.

- Gay men may be at higher risk from STIs, according to new STI diagnosis rates in England (2021):

7,014.4 per 100,000

Bisexual, gay and other MSM

291.9 per 100,000

Men who have sex with women



- Statistic includes higher rates of specific STIs including Chlamydia, Gonorrhoea, Herpes, Syphilis, Genital warts. Gay men and other MSM also at higher risk of HIV

Ageing and Dying Well

- Limited data on older gay men
- 19% of gay men in England and Wales were aged 55 or over compared with 38% heterosexual men.^[1]
- Evidence indicates that older LGBTQ+ people experience poorer health and access to healthcare.
- Additional barriers to accessing end of life care



Delay in health seeking behaviour due to previous mistreatment



Hide identity from healthcare workers and caregivers for fear of discrimination



Support groups e.g. dementia groups, often heteronormative



Unable to list family of choice or partner for end-of-life decision making

Other Key Inequality Data and Conclusions

Other Key Inequality Data

Hazardous
drinking, illicit
drug use,
smoking

Mental, behavioural
and
neurodevelopmental
disorders

Experiences of
chronic
loneliness

Intersectionality
and
compounding
inequalities

Conclusions:

- CHP provide an evidence summary to start building co-produced solutions. Important to note that the CHP is **not** a fully inclusive document that will accurately map the experience of all gay men and other MSM. Should use as a **starting point**.
- Important to decrease stigma and discrimination associated with 'coming out' and avoiding heteronormative assumptions to accurately map gay men and other MSM's experiences with health and wellbeing.

Opportunities for Engagement: Profile Review

Potential Feedback Areas:



Appropriate language used throughout



Community area of importance not included



Missing dataset or relevant report



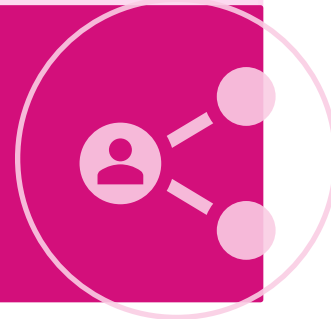
General comments and feedback

- Encouraged to read full report/area of interest in report
- Feedback may be added to future versions of profile
- Organisation details may be added
- Feedback can be submitted to CommunitiesTeam@Birmingham.gov.uk

Opportunities for Engagement: Dissemination of Findings

- ✓ Team members
- ✓ Wider organisation
- ✓ Partner organisation(s)
- ✓ Community organisations working with gay men and other MSM

Have you shared the profile with?



- ✓ Reading section(s) of interest in the report
- ✓ Referencing the profile in a new project
- ✓ Including findings in project/service proposal
- ✓ Influencing discussions with relevant stakeholders
- ✓ Making your daily practice more inclusive

Have you used the profile by?



References and Further Reading

General Reading

- Stonewall:
- ONS: [2021 census overview for sexual orientation](#)

References

[1] [ONS Custom Data Tool](#)

[2] NHS England (2023). [GP Patient Survey](#)

[3] Stonewall (2018). [LGBT in Britain: Health report](#)

[4] Government Equalities Officer (2018). [National LGBT survey](#)

[5] NHS Digital (2021). [Health and health-related behaviours of lesbian, gay and bisexual adults](#)

[6] Parker LL, Harriger JA. Eating disorders and disordered eating behaviors in the LGBT population: a review of the literature. J Eat Disord. 2020;8:51

References and Further Reading (2)

References

- [7] Semlyen J, Curtis TJ, Varney J. Sexual orientation identity in relation to unhealthy body mass index: individual participant data meta-analysis of 93 429 individuals from 12 UK health surveys. *Journal of Public Health*. 2019;42(1):98-106
- [8] Regan H, Jama A, Mantzios M, Keyte R, Egan H. Exploring the experiences of gay men with regards to eating, exercise, and mindfulness-based concepts. *American Journal of Men's Health*. 2021;15(3):15579883211016341.
- [9] [Sport England. Active Lives Survey, 2020](#)
- [10] The National LGB&T Partnership (2016). [Survey of Exercise & Physical activity in LGB&T Lives in England](#)
- [11] Denison E, Kitchen A (2015). [Out on the fields: The first international study on homophobia in sport](#)
- [12] Stonewall (2017). [LGBT in Britain – Hate Crime and Discrimination](#)
- [13] UK Health Security Agency (2021). [National STI surveillance data](#)
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