

# Seeking support in Liverpool: issues and barriers for asylum seekers and refugees who are lesbian, gay, bisexual, trans or intersex

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## Abstract

The following article highlights significant issues and barriers that lesbian, gay, bisexual, trans and intersex (LGBTI) asylum seekers and refugees can experience when seeking asylum in the UK and accessing relevant support services in Liverpool. This action-orientated research project was developed in collaboration with Sahir House (Merseyside's HIV support, information and training centre) in 2013 to respond to the distinct lack of specialist support available to these groups in Liverpool at the time. The project was established as a scoping study to identify and highlight the unique experiences and support needs of LGBTI asylum seekers and refugees in Liverpool that could be used as evidence to improve personal experience, service provision and professional practice in Liverpool in the future. Data collection consisted of participant observation at Sahir House and ten semi-structured interviews with professionals with direct or indirect experience of supporting LGBTI asylum seekers or refugees in Liverpool. The research identified and highlighted a number of issues LGBTI asylum seekers and refugees may

encounter before, during and after the asylum process that can impact negatively on their experience of the UK asylum process; ability to disclose their identities to others; mental, physical and emotional health and wellbeing; confidence, self-esteem and self-worth; physical living conditions; mobility through the city; and ability to seek and access support in Liverpool. Further, the research identified key personal, social and structural barriers that could restrict LGBTI asylum seekers and refugees from 'telling their story' in full to decision-makers and from disclosing their multiple intersecting identities to professionals in support organisations. Given the extensive number of concerns raised in the research, this article concludes with recommendations for service providers and commissioners of services that could be used to improve personal experience and support provision, availability and accessibility, reduce barriers to disclosure within services, and significantly reduce isolation for this extremely vulnerable group of individuals in Liverpool.

## Background

In May 2015, same-sex sexual acts were illegal in 76 of the world's countries, with five of these countries (Mauritania, Sudan, Iran, Saudi Arabia and Yemen) actually enforcing the death penalty (in addition to some provinces of Somalia and Nigeria, and non-state actors such as Sharia judges in Iraq) [1]. In the world today, individuals who identify themselves as, or are perceived to be, lesbian, gay, bisexual, trans or intersex (hereafter LGBTI) face and fear real acts of persecution, torture, sexual violence, abuse, stigma and discrimination, not only enacted upon them by state and non-state actors, but by members of their families and communities too [2]. Seeking asylum in countries that can provide LGBTI people with the rights and protections they are entitled to as human beings may therefore be some individuals' only option to live a safe and secure life. In the UK, however, the process of seeking asylum is a significantly complex, multifaceted, problematic

and traumatising process to experience and manoeuvre through as an LGBTI person [2–4].

In 2010, the UK Lesbian and Gay Immigration Group (UKLGIG) exposed that 98–99% of asylum claims made by lesbians and gay men were refused at the initial decision-making stage of the asylum process, compared to 73% of all asylum claims [5]. Given these figures, a number of reports in recent years have raised significant concerns over the Home Office decision-making process that has subjected genuine LGBTI asylum applicants to being returned to or relocated within their country of origin if the Home Office deemed they could be 'discreet' about or conceal their sexual orientation; outright disbelief of their sexual orientation or gender identity; inappropriate, humiliating and sexually explicit questions and stereotyping in Home Office interviews; and having to 'prove' their sexual orientation or gender identity to exceptionally high Home Office standards, whilst decision-makers assess the applicant's credibility

using minor discrepancies to doubt their claim [2,4–6]. But whilst this process has improved since 2010 (largely due to updated policy, guidance and training that UKLIGIG and other stakeholders have developed in collaboration with the Home Office), large numbers of initial asylum denials on LGBTI cases continue to be overturned on appeal, suggesting that there are still significant flaws in the decision-making process [2,6].

Outside the UK asylum process, restrictive government policies on healthcare, education, accommodation, welfare support and employment act to socially exclude and marginalise asylum seekers and refugees, which can exacerbate existing mental health issues and cause mental distress [7]. In the media, people seeking asylum are constructed as 'bad migrants', perceived to negatively impact social cohesion and economic growth in the UK [8], though refugees can represent '... a largely untapped source of talent' who, if given improved employment prospects, could 'contribute financially to their host country, as so many wish to do' [9]. LGBTI asylum seekers and refugees can also experience extreme homophobic, transphobic and xenophobic abuse and discrimination from UK nationals [10], as well as from within their own refugee communities [3,11] and LGBTI community [12], that are often vital sources of comfort and support. If an LGBTI asylum applicant is also HIV positive, this can profoundly intensify their experience of seeking asylum in the UK and influence the support provision they receive during this process [13]. These particular individuals are extremely marginalised due to their HIV, immigration and LGBTI identity, and may therefore face further stigma and discrimination [14] in addition to facing further complications during the asylum process and when accessing support services.

## Research rationale

In Liverpool (a key UK asylum dispersal area) and the surrounding areas (Knowsley, Sefton, St Helens, Halton and Wirral), extensive austerity measures imposed by the Coalition Government since 2010 and continued under the current Conservative Government have impacted disproportionately on social welfare and service provision availability [15–17]. As a consequence, many voluntary, community and statutory services that had previously provided support to specific groups such as asylum seekers and refugees, LGBTI people or people living with HIV have diminished or discontinued, leaving many people with limited support and some with no support at all [18].

HIV-positive LGBTI asylum seekers and refugees living in Liverpool and the surrounding areas can access Sahir House, Merseyside's HIV support, training and information centre based in Liverpool City Centre, where they can receive a wide range

of 'in-house' support including counselling and psychotherapy, social/outreach support, asylum case support, peer support and mentoring, drop-in sessions, complementary therapies and information, and skills and training provision. However, there are no organisations in Liverpool that can provide such well-rounded support to LGBTI asylum seekers and refugees in general, particularly to those who are not also living with HIV.

To respond to this issue, Sahir House developed the following action-orientated research project to identify key issues facing LGBTI asylum seekers and refugees in Liverpool and identify essential support needs throughout the asylum process, which could be used practically to inform service provision, professional practice and organisational policy, and lead to the development of services and training in Liverpool in the future. The project was supported by the charity Interchange, in the University of Liverpool, that links students in higher education with local voluntary and community organisations for research and work-based learning projects. As an Interchange student I was selected to conduct the research for my Master's Degree in Research Methodology.

## Research methods

As little was known about individual experience in Liverpool, an exploratory, interpretivist approach was adopted using qualitative data collection methods (participant observation and semi-structured interviews) to explore how lesbian, gay, bisexual, trans and intersex asylum seekers and refugees, who may or may not have also been living with HIV, might experience the UK asylum process and relevant support services available to them in Liverpool. This particular approach enabled the researcher to confirm findings within previous literature, identify gaps in the literature and in professional knowledge, and highlight core concerns for professionals and stakeholders. Data collection commenced when ethical approval was granted by the University of Liverpool's Committee on Research Ethics, with research adhering to the ethical procedures of the British Sociological Association, the University of Liverpool and Sahir House (i.e. regarding confidentiality, safeguarding, equal opportunities and data protection).

Due to my limited experience and knowledge of the third sector, participant observation was a particularly fruitful source of knowledge at each stage of the research process [19]. As participant observation would involve some direct and indirect contact with service users, I was enrolled as a volunteer researcher at Sahir House after completing in-depth training and receiving an enhanced Disclosure and Barring Service (DBS) check. In this role, participant observation was conducted in the offices of Sahir House for four hours

per week between May and September 2014. I was introduced to service users and professionals as a volunteer researcher from Sahir House so that my role was known to those I was observing. This time was particularly used to shadow the support work of their Race and Asylum Team to observe how LGBTI asylum seekers and refugees could be supported by Sahir House and other organisations and services in Liverpool, in addition to observing how professionals engaged with these particular service users and clients. Some observation also took place at community support events, training sessions, seminars, conferences and sub-group meetings, which enabled me to gain insight into the partnership work between organisations in Liverpool and to network with a range of relevant professionals who could inform the research. Participant observation enabled me to gain knowledge of the service provision that was and was not available to LGBTI asylum seekers and refugees in Liverpool. Observation notes were then analysed to identify key themes and topics which could be discussed during the semi-structured interviews.

The project originally sought to gather the experiences of LGBTI asylum seekers and refugees themselves but, at the time, only two individuals felt comfortable enough to talk about their unique experiences and it was felt that these individuals may have been identifiable in the research. Therefore, the research instead focused on gathering experiential knowledge from professionals. Ten semi-structured interviews were conducted with professionals from Sahir House's 'LGBT and HIV Asylum Project Advisory Group', consisting of professionals from key HIV, LGBTI, mental health support and refugee community organisations, in addition to legal professionals, asylum activists, academics and researchers. Professionals were selected purposively for their experience of directly or indirectly supporting LGBTI clients and their knowledge of client experience, support needs and support provision availability and accessibility in Liverpool. Informal discussions with professionals during advisory group meetings and participant observation provided opportunities to discuss the research topic, introduce the project and discuss the professionals' potential roles within it, and those interested in taking part were invited for an interview. At the beginning of each interview, participants were provided with an information sheet and it was ensured that they understood that their involvement in the research was voluntary, confidential and anonymous. Informed consent was given via a consent form before the interview and a debrief form afterwards. It should be noted that none of the professionals interviewed had direct experience of supporting an intersex asylum seeker or refugee, though many of the issues highlighted below will be relevant to these clients. Therefore, when the professionals'

clients are referred to specifically, the acronym 'LGBT' is used.

In terms of data analysis, observation notes and audio recorded interviews were transcribed (and anonymised) into the qualitative data analysis software NVIVO 10, chosen for its ability to support data collection, management and analysis [20]. Transcriptions were analysed using thematic analysis whereby key themes, words or topics in the data were identified and coded, with similarly coded data then grouped into categories to later inform theory production [21].

## Research findings

The following section highlights key issues and concerns regarding the experiences of LGBTI asylum seekers and refugees (who were living and accessing support services in Liverpool) during four stages of the UK asylum process: before seeking asylum, during the asylum process, denial of an asylum application and acceptance of an asylum application. The issues below were deemed by professionals to impact on their clients' mental, physical and emotional health and wellbeing; confidence, self-esteem and self-worth; physical living conditions; mobility through the city; ability to disclose their identities to others; and ability to seek support in Liverpool.

### *Before seeking asylum*

Some of the professionals' clients had experienced significant trauma and persecution in their home country at the hands of family, friends, community members and state officials (such as police, teachers and government officials) because they had identified themselves as, or been 'found out' or perceived to be, LGBT. Within these cases, persecution had included, but was not limited to, torture, violence, sexual violence, 'corrective' procedures, stigma and discrimination. These clients showed a high prevalence of mental health issues such as depression, anxiety and post-traumatic stress disorder.

Professionals noted that some individuals had been, or had witnessed others being, reported to legal officials (in their country of origin) by authority figures such as government officials, police, faith leaders, teachers and community elders (in addition to family, friends and community members). In some cases this had led to these individuals being hunted, publicly humiliated, imprisoned, tortured or even killed. Because of these experiences, some of the professionals' LGBT clients feared speaking to or seeking support from people they perceived to be authority figures in Liverpool, such as Home Office officials, doctors, nurses and other support practitioners.

If their identities were known in their home community, LGBTI asylum seekers and refugees

were also likely to have been ostracised by their families, friends and communities due to the high prevalence and organisation of homophobia and transphobia:

**When he actually disclosed that he was gay his father totally turned against him and he didn't want to know him anymore... and he's here now with no money ... no support off his family and there's no way that he can ever rely on them ... so he feels basically totally alone in the whole world**  
(*observation from a Mental Health Professional*)

As a result, when arriving in the UK (and later in Liverpool), these individuals were unlikely to have any social support from people in their home community, leaving them extremely isolated.

#### Implications for practice

LGBTI asylum seekers in Liverpool would benefit from initial and ongoing one-to-one support from qualified practitioners who are aware of and sensitive to the potential trauma and isolation these individuals may have experienced in their home countries and in the UK on account of their sexual orientation or gender identity. This support could help to build up trust between clients and practitioners that may enable clients to speak about their experiences, which in turn may allow practitioners to fully address and support their clients' support needs. Practitioners should be welcoming and accepting of LGBTI identities and provide informal but confidential spaces within services to help reduce the fear and anxiety these individuals may feel when speaking to service providers in Liverpool.

#### During the asylum process

Professionals spoke of the Home Office's decision-making process as a site of extreme pressure, stress and anxiety for their LGBT clients:

**... it's not a process you can logically control because it's down to how people choose to perceive you, how they choose to interpret what evidence and what information you give them**  
(*observation from a Sexual Health Service Professional*)

Professionals particularly raised concerns about: the Home Office's reliance on documentary evidence of sexual orientation or gender identity, which is highly problematic for individuals who concealed their identities in their home countries to avoid persecution; the perceived 'institutionalised culture of disbelief', which places all emphasis on the asylum applicant to prove their identity; and the use of inappropriate and sexually explicit questions during substantive interviews. Two professionals

raised concerns that Home Office officials did little to understand and be sensitive to the needs of their trans clients, in one case referring to a trans woman using 'he' pronouns and referring to her as a lesbian. This asylum process was also deemed by professionals to be significantly re-traumatising to LGBTI asylum seekers, with eight professionals raising concerns about their clients having to retell and 'relive' their highly sensitive and deeply traumatic experiences of persecution each time they spoke to Home Office officials, judges, solicitors, case workers, doctors and support workers.

The UK asylum process is extremely complicated and subject to frequent and rapid change, therefore sound legal advice and representation was deemed by professionals as essential throughout the asylum process. However, reductions in legal aid have reduced the amount of legal representation and advice people seeking asylum can receive:

**I've got a client at the moment who's not being represented in court next week unless they can find the funding ... no one's willing to take it on and I'm not allowed to speak because I'm not legally trained**  
(*observation from an Asylum Support Worker*)

As a result, some asylum applicants have to submit their extremely complex asylum cases with little and inadequate legal advice, if any at all. Consequently, this may harm an applicant's asylum case as they may not follow appropriate guidance, adhere to strict Home Office deadlines or fully prepare themselves when communicating with decision-makers. Four professionals highlighted the importance of non-legal advocates who could accompany asylum applicants to court or to interview, ensure their rights were being honoured, support translation in written and telephone correspondence with the Home Office, and support LGBTI asylum seekers to relieve other barriers that may stop or prevent them from disclosing their identities or telling their story in full to decision-makers.

Asylum seekers can be dispersed to other regions of the UK at any point in their asylum claim on a non-choice basis. As such, the continuation of support and care for dispersed LGBTI asylum seekers (and particularly for those living with HIV) was a significant concern for professionals, particularly for individuals dispersed to smaller communities where specialist support provision was minimal or non-existent. When dispersed away from Liverpool, LGBTI asylum seekers may lose contact with their existing social support networks. In their new location, it may take a considerable time to orientate themselves, become aware of and access relevant support services (which may be

vital to their care) and meet other people they feel they can trust, particularly if they fear approaching others because of their experiences of homophobia and transphobia in their country of origin and in the UK.

The substantive interview was a site of extreme pressure, where mental health could deteriorate rapidly:

**“ ... if he gets it wrong there is a possibility that he’s got to go back to the country he escaped from ... and if he goes back to the country that he came from then he could be killed ... so it’s the matter of life and death ... you don’t have a second chance ”**  
(*observation from a Mental Health Professional*)

Professionals particularly highlighted the extreme anxiety their clients would feel before their substantive interview, the inability of individuals who had suffered trauma to tell their stories in a coherent way, the Home Office’s lack of patience and clarity when asking questions, and their frequent failure to request clarification from interviewees on information that could later be used to refuse their application.

Fear of detention and forced removal, which can happen at any time during an asylum claim, was highlighted by five professionals to impact significantly on mental health:

**“ ... they can never feel safe during the whole process because at any time they can be detained. Every time they go to sign at the Home Office ... anytime at their door it could be Home Office people to detain them and then forcefully remove them ”**  
(*observation from an Asylum Support Worker*)

When detained in Immigration Removal Centres, professionals spoke specifically of homophobic and transphobic abuse that their clients had experienced from other detainees, the lack of availability and accessibility to legal advice, the difficulty in accessing support due to internet use and website access restrictions, and the hostility received from IRC staff.

All ten professionals referred to asylum accommodation as a site of extreme pressure, stress and anxiety for LGBTI asylum seekers (even more so for individuals also living with HIV) which could impact significantly on the deterioration of mental and physical health. On dispersal to Liverpool, asylum seekers are first housed in shared accommodation on a short-term basis until further accommodation is made available by Serco, the housing provider for asylum seekers in the North West of England. They are usually housed with individuals from the same country or similar

countries of origin who can often be openly and severely homophobic, transphobic and anti-HIV. As such, professionals detailed how their clients often felt unsafe, unable to relax, unable to be themselves and feared being disclosed as LGBT or HIV positive, leading to feelings of extreme isolation even within shared accommodation. The quality of asylum accommodation in Liverpool was deemed by professionals as extremely poor with some clients having faulty plumbing and electricity or mould on the walls, as the following quote highlights:

**“ ... they had urine dripping down into the kitchen from a leak and the toilet was leaking everywhere and there were rat marks ... it was just appalling ... and then there was damp. So it was bringing up all these other complications with her health and her HIV ”**  
(*observation from an Asylum Support Worker*)

The location of asylum accommodation in Liverpool was also a concern as a lot of accommodation was situated in socially and economically deprived areas of Liverpool where there was no ‘natural safety net’ of support for LGBTI or HIV-positive people. One professional explained that in these locations there could be social cohesion issues and a high prevalence of hate crime. Support availability and accessibility was also limited if individuals lived far from the city centre, where most support organisations for LGBTI or HIV-positive people are based.

Most of the professionals’ clients received just £36.62 per week to cover all living costs such as food, clothing, transport, telephone calls and socialising. All ten professionals interviewed expressed that this amount was insufficient in enabling clients to meet even their essential living needs, with many reliant on food banks and food vouchers from support organisations to feed and clothe themselves and their families adequately. The high cost of public transport in Liverpool was a significant concern for four professionals who explained that clients living far away from the city centre could struggle to attend legal and medical appointments and access other forms of support such as counselling, psychotherapy, support with their asylum case, social support, drop-in sessions and community events. In Liverpool, these services provide LGBTI and HIV-positive people, whether they choose to disclose their identities or not, with opportunities to meet other people and build friendships and social support networks that can help to improve their overall mental health and wellbeing and bring them out of isolation [22]. However, if these services cannot be accessed, these individuals are left unsupported and isolated.

Interpreters in Liverpool can help asylum seekers and refugees gain knowledge of, and access to, services and support, ensure their support needs are understood and fully met by service providers and

ensure they have the correct understanding of the medical, legal and social support that is provided to them. However, accessing the correct interpreter can be problematic in Liverpool as for some languages only one or two interpreters may be available, which can leave some individuals without vital language support. In addition, interpreters may be from the same home country or community as those for whom they interpret. As a result, some individuals fear that the information they disclose in front of an interpreter may be relayed to their family members, social groups or communities in their countries of origin, Liverpool or in other areas of the UK. This could potentially lead to additional persecution, violence and fear and further endanger individuals if they were sent back to their country of origin on refusal of their asylum claim. In two cases in particular, two professionals spoke of instances in which their client's sexual orientation or HIV status had been disclosed to members of their asylum community in Liverpool by their interpreter. In these cases, their clients experienced abuse and discrimination from their community and were ostracised from it, which resulted in these clients becoming extremely isolated and receiving very little or no social support from members of their community.

#### Implications for practice

During the UK asylum process, LGBTI asylum seekers in Liverpool would again benefit from one-to-one advocacy work as this could provide individualised support and enable trust to be built up over time. Practitioners should ensure their LGBTI asylum seeker clients are supported throughout their asylum claim, have a good understanding of the UK asylum process, know what is involved, know their rights within it and are well prepared for any contact they have with Home Office officials. Good quality legal advice, support and guidance from legal professionals who understand the complexity of asylum claims based on sexual orientation and gender identity is essential and should be made available and accessible at the earliest possible opportunity. LGBTI clients should be informed of what to do if they are detained or threatened with forced removal as acting quickly and with the right support (i.e. solicitors, support workers, support groups, etc.) may help to reverse the decision. For those who are detained, regular contact with practitioners can help them to feel less isolated and more motivated to continue with their claim.

Outside the asylum process, practitioners may need to support clients to move to different accommodation if they feel particularly unsafe (i.e. due to homophobic or transphobic abuse) or if their accommodation is inadequate for their mental and physical health needs. Access to donations of food and clothing can be essential for clients struggling to meet essential living needs and the provision of travel passes can enable these individuals to access support services which may be vital to their care and could further alleviate feelings of isolation. If interpreters are needed, using those who are known to be aware of and sensitive to the issues associated with disclosure of sexual orientation, gender identity and/or HIV status for asylum seekers and refugees is highly recommended.

### *Denial of asylum application*

The professionals interviewed emphasised that an asylum application denial could re-traumatise LGBTI clients who could be terrified of returning to their country of origin due to the real threat of further persecution on account of their sexual orientation, gender identity or HIV status and additional persecution because of their attempt to claim asylum. Mental health was identified to deteriorate most rapidly at this stage of the asylum process, with some individuals contemplating suicide to avoid returning to their country of origin.

Appealing an asylum decision is extremely challenging and there is very little time to submit an asylum appeal. Therefore, quality legal advice from legal representatives who can manoeuvre through the varying, complicated stages of the asylum appeals process is invaluable to denied LGBTI asylum applicants. However, due to legal aid reductions, most legal professionals in Liverpool can only represent asylum appeals if they have more than a 50% chance of success. As a result, some LGBTI asylum seekers may have to rely on non-legal advocates to support their application who cannot legally advise or represent them as they are not legally trained. Others are left without help and unable to submit well-supported asylum appeals to the Home Office (particularly given the complex appeals process, strict guidelines and lack of appeal guidance available), which may result in their appeal being refused and the individual voluntarily or forcibly being removed from the UK.

When genuine LGBT asylum applicants receive their final asylum decision and are faced with voluntary removal, forced removal or destitution, they are left in an extremely vulnerable position. Many of these applicants would rather face destitution (with no accommodation, no financial support and no recourse to public funds) than be returned to persecution in their country of origin. This is particularly disconcerting given the extreme funding reductions made under the Coalition and Conservative governments, as very few services in Liverpool can support destitute asylum seekers. Additionally, the extreme pressure of potential destitution or removal can lead some individuals to disclose previously unknown information to service providers in desperation, in the hope of receiving additional social support. Two professionals spoke of how asylum refusals and destitution had effectively 'forced' their clients to disclose their HIV-positive status to professionals in order to access HIV support, because refugee community organisations where they had previously received support had closed down.

**Implications for practice**

After an asylum application denial, LGBTI asylum seekers in Liverpool would benefit from rapid access to counselling and psychotherapy to ensure their mental health needs are supported as soon as possible. Access to legal advice regarding asylum appeals is essential to ensure that genuine asylum claimants know their rights within the UK asylum process and to ensure they are not denied by the UK Home Office and returned to persecution. For destitute asylum seekers, support services should be provided to ensure they are not left unsupported and vulnerable to exploitation.

*Acceptance of asylum application*

The need for support does not end when an asylum applicant is granted refugee status. Mental health professionals in particular emphasised that after being granted refugee status, their clients would often begin a process of self-reflection in which they would confront and reflect upon experiences that they may have repressed during the asylum process. This self-reflection often included confronting their experiences of seeking protection in the UK, their identities in relation to sexual orientation and/or gender identity (and for some, an HIV-positive identity) and all the emotional, psychological, mental and physical trauma associated with their need to gain protection in the UK. The following quote emphasises this process:

**“ ... it's once the process finishes that they actually then face what they've gone through, because they have that moment of break and that moment of reflection and they turn around and go wow ... I was a survivor of rape or I was a survivor of torture, and then the flashbacks kick in and then the memory kicks in and then that trauma starts again ”**

*(observation from a Counsellor)*

After receiving their refugee status, newly accepted refugees have only 28 days to arrange new accommodation, apply for relevant benefits and effectively arrange their new life in the UK, before they are removed from their asylum accommodation. Like UK nationals, refugees must manoeuvre through the extremely complicated UK benefit system accurately and in a timely manner, adhering to strict guidelines and deadlines, but face extreme benefit sanctions if they are unable to. This system can be near impossible for a refugee to work through alone if they do not understand the benefit system, are unaware of available benefits, do not have a good grasp of written and spoken English language (in relation to application forms and automated telephone services) or computer literacy (for online-only application forms). In addition to this, whilst refugees are entitled to the same

standard of care as UK nationals within voluntary, community and statutory support organisations, this is often not the case due to xenophobic attitudes and hostile discrimination.

**Implications for practice**

Like LGBTI asylum seekers, LGBTI refugees in Liverpool would benefit from access to counselling and psychotherapy that could enable them to gradually work through their experiences in a safe, secure, accepting and sensitive way. Timely advice and support from professionals with expert working knowledge and experience of the changing housing and benefits system is a necessity to ensure that LGBTI refugees are adequately supported by the UK Government, receiving the correct benefits, aware of all guidelines and deadlines related to their benefit entitlements, are fully aware of their rights in the UK, and know how to formally complain to support organisations and government officials if their rights are not upheld.

*Disclosure of LGBTI (and HIV-positive) identity in Liverpool*

The research identified that it is extremely rare for people who are seeking asylum who are LGBTI, living with HIV, or LGBTI and living with HIV to disclose their identities to professionals in support organisations in Liverpool. Service users are not expected to disclose this information to service providers unless it is a requirement to use a particular service. But in doing so, they may be signposted to more relevant or specialist services that can provide them with expert knowledge, information, guidance and support. Those who access specialist services may be able to make connections with other individuals or communities with similar identities or life experiences as them. For LGBTI asylum seekers and refugees, this experience has the potential to bring them out of isolation and may allow them to begin to thrive in Liverpool.

However, disclosing their identities to others can cause significant problems for LGBTI asylum seekers and refugees in Liverpool. Even within specialist LGBTI and refugee community organisations, LGBTI asylum seekers and refugees could feel unsafe and isolated. For example, in reference to service users within refugee community organisations, as the following quote details:

**“ ...if you're an LGBT person then you probably wouldn't want to access [refugee community] support because people ask you what your case is in these settings, it's just like normal conversation and they don't always feel comfortable lying and always trying to keep it hidden ”**

*(observation from a Campaigner and Activist)*

Whereas in reference to services users within LGBTI support organisations:

‘... you get the same attitudes towards asylum seekers that you get in the general public ... there can be people who are racist, people who are anti-immigration ... and with all the stuff that’s in the papers at the moment I think that [LGBTI organisations] can be a scary place to be ... you can’t get away from the fact that people who are LGBT UK nationals still have their own prejudices’

(*observation from an Asylum Support Worker*)

The ten professionals interviewed emphasised incidences in which their clients’ identities had become known to others in Liverpool, resulting in clients being ostracised from refugee and/or religious communities; being ‘outed’ in support services by other asylum-seeking and refugee service users; being ‘outed’ to their local and home communities by qualified interpreters; being forced to leave their accommodation; facing discrimination and prejudice from their communities, fellow services users and service providers alike; and becoming extremely isolated and vulnerable. As such, the core concern for LGBTI asylum seekers and refugees, who may also be living with HIV, is who can they trust? Whilst service providers and practitioners must ask themselves what is stopping LGBTI asylum seekers and refugees, some of whom may also be living with HIV, from disclosing their identities to support organisations.

### *Barriers to disclosure of LGBTI (and HIV-positive) identity in Liverpool*

The personal, social and structural barriers outlined below were deemed by professionals to restrict their clients from ‘telling their story’ in full to decision-makers during the asylum process, which could impact negatively on their asylum claim, and from disclosing their multiple intersecting identities to professionals in support organisations, which could limit their access to relevant support services that may be vital to their continued care in Liverpool.

#### *Personal and social barriers to disclosure:*

- Not being emotionally or mentally ready to talk about their experiences
- Fear of rejection from their families, friends, communities and professionals within support organisations
- Fear of prejudice and discrimination associated with their sexuality, gender identity and/or HIV status
- Fear of further disclosure by individuals to their local and home communities which could result in them becoming ostracised from these communities
- Fear that the disclosure of their identity may harm their asylum case

#### *Structural barriers to disclosure:*

- Lack of adequate services that can provide a wide range of support to LGBTI asylum seekers and refugees in Liverpool
- Lack of safe spaces for LGBTI asylum seekers and refugees in which to disclose their identities

#### **Implications for practice**

LGBTI asylum seekers and refugees need to feel safe and supported within services if they are to feel comfortable enough to disclose their multiple intersecting identities to professionals. Developing trusting relationships between service users and professionals can help to encourage disclosure of identities, which in turn might enable these clients to access further medical, social and emotional support. One-to-one advocacy work may enable such trusting relationships to be built up, not only in terms of trusting the individual professional but trust of the organisation as a whole. Greater visibility of services, specialist training for frontline staff and further partnership work between key stakeholders may help to improve personal experience, improve support provision, availability and accessibility, and reduce barriers to disclosure within services for LGBTI asylum seekers and refugees.

## Discussion

This article has identified a wide range of issues and barriers that LGBTI asylum seekers and refugees (some of whom may also be living with HIV) can experience when seeking asylum in the UK, and when accessing support services in Liverpool. Many of the issues and barriers identified in Liverpool confirm findings in previous relevant literature, such as the complexity and unpredictability of the UK Home Office decision-making process, relating to experiences such as having to prove your identity, the substantive interview, legal representation and the appeals process [2,5,6]; issues encountered during the asylum process, such as dispersal, detention and destitution [2–5]; experiences of discrimination from Home Office officials, professionals in support services, UK nationals and individuals within the local refugee communities [11–13,22]; and the significant and combined impact these experiences can have on mental health [7,22].

However, focusing the research on Liverpool has enabled identification of significant and specific concerns for LGBTI asylum seekers and refugees living or accessing services in this particular city. The poor quality of accommodation, the impact of poverty, the inability to travel to appointments and to services, the potential risks associated with interpreters and the potential of disclosure of an individual’s identity to others, are all core concerns for professionals, service providers, stakeholders and commissioners of services. These issues impact significantly on the mental, physical and emotional

health and wellbeing, in addition to the confidence, self-esteem and self-worth of LGBTI asylum seekers and refugees. As a consequence, LGBTI asylum seekers and refugees very rarely disclose their identities to others in Liverpool.

Liverpool needs a safe, welcoming and confidential space for LGBTI asylum seekers and refugees (including those living with HIV) to talk openly about their multiple intersecting identities and their unique experiences of seeking asylum in the UK. The provision of such a space could enable LGBTI asylum seekers and refugees to receive specialist information, guidance and support as they journey through and beyond the UK asylum process. It may also enable them to make connections and build up support networks with individuals who have similar identities or life experiences. This support may help to encourage LGBTI asylum seekers and refugees to disclose their identities to professionals within this space, in the knowledge that they are in a safe and confidential space and will be welcomed and supported. These individuals may then be brought out of isolation, supported by professionals and a peer group that may help them begin to thrive in Liverpool.

Professionals, service providers, stakeholders and commissioners of services must therefore work together to improve the availability and accessibility of specialist support services and safe spaces for this extremely vulnerable and isolated group to ensure that their unique support needs are fully addressed and met in the future. In the meantime, this research will be developed further, hearing specifically from asylum seeker and refugee voices in Liverpool, and will seek to action some of the project's recommendations with the support of Sahir House and other organisations in their 'LGBT and HIV Asylum Advisory Group'.

## Recommendations

The following recommendations will help service providers and commissioners of services to improve personal experience, improve support provision, availability and accessibility, reduce barriers to disclosure within services and significantly reduce isolation for LGBTI asylum seekers and refugees in Liverpool.

*The research calls for:*

- A dedicated support service for LGBTI asylum seekers and refugees to be established in Liverpool
- The provision of safe spaces to disclose in
- The provision of additional support services
- Greater visibility of services that are already available
- Specialist training to be given to all frontline staff in services who support individuals from these groups
- Greater accessibility to good-quality legal support
- The provision of specialist interpreters who are aware of the issues associated with disclosure of sexual orientation, gender identity and HIV status
- Further partnership work between services and organisations in Liverpool

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