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Foreword

In the development of this ground-breaking research report, Fighting With Pride (FWP) could not have wished for a better partner than the Northern Hub for Veterans and Military Families Research. The Hub fields a team which combines extensive academic insight with lived experience. Together our organisations share a conviction that LGBT+ veterans, serving personnel and families should have the opportunity to thrive. You will see in this research report that we look to a future in which the hundreds of organisations which support veterans will bring infectious change for all of those affected by this lamentable policy of exclusion.

As we knocked on doors it became clear that the absence of academic research on the health and well-being of LGBT+ Veterans in the UK has supressed their voices and they have been unheard. Our first paper was therefore an interim Lived-Experience Perspective published in the Canadian Journal of Military and Veteran Families Health in 2021, identifying why UK research was so crucial.

The Armed Forces Covenant Fund Trust and NHS England have been committed to the cause of finding remedy for the impact of the ban from the beginning of FWPs journey and we are grateful to them for enabling and supporting this essential inaugural research.

They have helped us gather a community that was torn asunder, to swiftly deliver mutual support and the beginnings of connections to veterans services. In this programme they have enabled the research team to reveal, that despite the damage done, a community of veterans exists that wish to have the opportunity of better health and well-being.

This research and resultant report could not have been created without the courage of LGBT+ veterans who have helped the team stem decades of erasure and demonstrate the burgeoning needs of veterans who have never presented to veterans services. In their submissions and interviews the veterans gave a full and pitiful account of the cruel inhumanity of the 'ban' and in many cases they spoke of the zeal of the enforcers. These veterans once proudly served our nation but faced the sudden loss of all they cherished and earned, not through the action of a foreign enemy, but from the Armed Forces in which they placed their trust. Together the veterans who took part in this research have helped us understand the challenges faced by this community in the years of their service and in the years since. They have told us, often through tears of pain, of their hopes and fears for the future and we pledge that our organisations will work to ensure that the Armed Forces Covenant extends its reach to them in the future. The voracious Special Investigation Branch interrogations, invasive medical inspections, assaults, and prison sentences so many endured must not be the end of this story. We thank these veterans for their service today and in the past. The painstaking

analysis by the research team, of this precious data will help guide the development of services by organisations dedicated to the task of bringing to an end the legacy of these darkest of days.

For too many decades the destructive force of the 'gay ban' has been lost from the consciousness of those who share responsibility for creating a better future for this long-neglected veterans group. In this report the accounts of the veterans who felt the full force of the ban shine a light upon its enduring impact. Many of the LGBT+ Veterans who took part have been hidden from sight in an imposed shame, from services which might have helped. Many remain isolated and lacking the confidence or trust that attitudes might have changed, made worse through the loneliness suffered as a result of their cruel disposal. For some these services remain an unenviable choice and reminder of a difficult past. Tackling isolation and loneliness allows connection to support services, whilst understanding and welcoming support services help end isolation and loneliness, the two are directly beneficial, to all. Despite a desire for change by veterans organisations, not enough is known in veterans services of how to offer that warm welcome. This research report ably demonstrates the urgent unmet needs of veterans hidden from sight and is the strongest possible business case for the Pride in Veterans Standard, a scheme which aims to support veterans organisations to extend the warmest of welcomes.

It is important to acknowledge that the accounts of the veterans given in this research paper are a million miles from the experiences of those who serve in our Armed Forces today. FWP and the Northern Hub share pride in all that has been achieved in the serving communities, who have worked to make their organisations inclusive. No workplace is without imperfections for those who are different however in todays Armed Forces we see LGBT+ personnel taking their place at the front line of operations all over the world, they are welcomed and valued for their contribution and supported at every level of command. If we are to join the generations of LGBT+ personal who are part of the Armed Forces family, work must begin to end the loneliness, isolation, impoverishment, and poor health of the generations that went before. And when this work is done, all those who were lost will have been found.



Craig Jones MBE and Caroline Paige
Executive Chair and Chief Executive Officer
Fighting With Pride



Northern Hub for Veterans and Military Families Research, Northumbria University

The Northern Hub for Veterans and Military Families Research are a multi-disciplinary team of academics, peer researchers and PhD students conducting translational research in the Armed Forces Community. Our research is both qualitative and quantitative, covering health and social care, public health, psychology, social policy, human geography, and nursing.

At the heart of the Northern Hub, we strive to attract and facilitate collaboration across the Armed Forces sector. We work with a variety of organisations across the Government, Local Authorities, NHS, and Third Sector.

"Our work is driven by the needs of veterans and their families - integration into the community that we work with and for is at the heart of the hub's mission"

Professor Matthew Kiernan, Director of the Northern Hub











Fighting With Pride

Fighting With Pride supports the health and well-being of LGBT+ Veterans, service personnel and their families – in particular those most impacted by the ban on LGBT+ personnel serving in the Armed Forces prior to January 2000.

Over the past 3 years we have been working closely with service charities and organisations to raise awareness of the consequences of the ban and connect them to those LGBT+ Veterans who were left behind.

The commitment to help has been heart-warming, but even as we now pass the 23rd anniversary of the ban being lifted, there remains much still to do to end isolation and loneliness once and for all and deliver a warm welcome of support and inclusion.



Acknowledgements

This project was made possible by the support of NHS England who helped Fighting With Pride gather this dispersed community and the Armed Forces Covenant Fund Trust who, through its Tackling Loneliness Programme, made this research possible. We would like to thank Armed Forces Covenant Fund Trust and NHS England for their early and continued support to enable this research.

We would sincerely like to thank all those who took part in this project, who shared their stories with us and took the time to complete the survey. This project could not have happened without the support of the participants.

We would also like to extend our appreciation and thanks to the Peer-Researchers Dave Small and Sally McGlone who carried out interviews in Phase One and Research Assistants Shannon Allen and Rachel Giles-Haigh for their support, time, and commitment to this project.

Project Team

This project was designed and carried out in collaboration between Fighting With Pride and the Northern Hub for Veterans and Military Families Research team at Northumbria University. The project began in April 2021 and aims to provide an evidence base for future development of services and support designed to raise the visibility of LGBT+ veterans and provide access to social connection, and develop solutions where barriers exist, particularly for those who feel socially isolated.



Project team (L-R): Dr Alison Osborne (Senior Research Assistant), Craig Jones MBE, Caroline Paige, and Dr Gill McGill (Principal Investigator)

1. Introduction

1.1 Background

Homosexuality was decriminalised in England and Wales through the 1967 Sexual Offences Act of UK parliament. The law was then extended to Scotland by the Criminal Justice (Scotland) Act 1980 and to Northern Ireland by the Homosexual Offences (Northern Ireland) Order 1982. However, LGBT+ service personnel within the UK Armed Forces continued to be investigated and discharged under the Single-Service Discipline Acts for each branch of service; Army Act 1955, Air Force Act 1955, and Naval Discipline Act 1957 (Harries-Jenkins & Dandeker, 1994). The 'gay ban' was enforced by the UK Armed Forces using the rationale that homosexuality was incompatible with military service, the presence of LGBT+ individuals undermined unit cohesion, morale, operational effectiveness and that homosexual behaviour could cause offence, induce ill-discipline, and compromise security (Dean Sinclair, 2009; Ministry of Defence, 1996). Despite the focus on homosexuality, this policy included all LGBT+ personnel with no distinction between sexual orientations and gender identity (Paige, Dodds, & Jones, 2021).

According to these exemptive military laws, individuals were dismissed for homosexuality under the guise of 'general misconduct' or behaviour deemed detrimental to 'good order and discipline' (Ministry of Defence, 1994, Annex 2). As a result of these dismissals, LGBT+ military personnel had medals, awards, and commissions taken, pensions and gratuities disregarded or degraded and their association with the Armed Forces barred (Paige et al., 2021).

In 1999, the European Court of Human Rights ruled that the discharge of four service members from the UK Armed Forces on the basis of homosexuality, violated Article 8 of the European Convention of Human Rights involving protection of an individual's right to a family and private life (Edel, 2015). Following this, the gay ban was repealed in the UK Armed Forces on 12 January 2000 (Belkin & Evans, 2000; Oakes, 2001).

Historically, across the globe, there have been long-standing bans on homosexual and transgender individuals joining and serving in Armed Forces. Among the Five Eyes (FVEY) alliance countries, the UK was one of the last to repeal the Armed Forces gay ban with Australia and Canada lifting the ban in 1992, New Zealand in 1993 and the US in 2011. The repeal of these policies included transgender individuals, expect for Australia and the US where they were excluded from military service until 2010 and 2021 respectively. In the case of the US this was following a number of bans and repeals over the last decade.

Despite the repeals, a significant number of LGBT+ military personnel during the ban experienced traumatic investigations to uncover evidence of homosexuality and subsequent dishonourable discharges, forced resignations, and alienation from the military family without access to social, financial, or mental health support, which reduced overall well-being (Paige et al., 2021). Little is known of the UK LGBT+ veterans' community or the long-term impact of serving during the Armed Forces gay ban.

1.2 LGBT Veterans Independent Review

In June 2021, FWP gave evidence to the Select Committee on the Armed Forces Bill on the historic treatment of LGBT+ Veterans and the consequences endured today in the lives of those effected. Receiving cross-party support, Fighting With Pride's wish for an Independent Review was captured in the Veterans' Strategy Action Plan and announced by the Government January 2022 (Office for Veterans' Affairs, 2022).

The Review is independent of the Government and HM Armed Forces, the aim of the review is to examine the effect the pre-2000 ban on homosexuality in the UK Armed Forces has had on LGBT veterans. The Review seeks to better understand the experience of LGBT veterans who served in the UK Armed Forces between 1967 and 2000, and make recommendations to the Government as to how best to fulfil their commitments set out it the Strategy for Our Veterans (Ministry of Defence & Cabinet Office, 2018).

Following the appointment of Rt Hon. The Lord Etherton as chair of the review, a call for evidence was launched July 2022. The call for evidence sought to gather evidence from all who experienced or witnessed the ban, including other military personnel who served between 1967 and 2000, those who helped to implement the ban; and families, friends and representatives of LGBT personnel who served between 1967 and 2000 who could not respond themselves. Organisations and academics who might have insight into the impact of the ban through providing services or through research were also encouraged to contribute. The call for evidence closed 01 December 2022, with the findings and recommendations of the Review being announced on the 08 June 2023.

Note: the government uses the term LGBT, not LGBT+.

1.3 First Annual Conference

As part of this project, the first annual conference for Research with the UK LGBT+ Veteran Community was launched on the 23rd anniversary of the lifting of the ban - Thursday 12th January 2023. The project team presented findings from Phase One and were joined by invited speakers and delegates from across the United Kingdom.

The aim of the conference was to bring together academics, the health and social care sector, local government, charities, and LGBT+ community and veterans to focus on the past, present day and future of LGBT+ veterans and their experiences during and after military service. Among the speakers at the event was The Rt Hon. The Lord Etherton PC, Kt, KC, Chair of the LGBT Veterans Independent Review and Kate Davies CBE, National Director of Health & Justice, Armed Forces and Sexual Assault Services Commissioning, NHS England.

1.4 Existing Literature

To identify existing academic evidence on the impact of serving under the homosexuality ban, including the specific effect of social isolation and loneliness on LGBT+ military personnel, an updated systematic narrative review was carried out. A summary of the findings is presented in this report following four life-period stages: pre-enlistment, military service during the homosexuality ban, military service after ban repeal, and post-military life. The full review is under preparation for publication. Additionally, several papers specifically focussed on the experiences of homosexuality bans with transgender individuals to highlight further nuances between sexual orientation and gender identity (see section 1.4.5 Impact of Homosexuality Bans on Transgender Individuals for summary).

1.4.1 Pre-enlistment: Preparedness for Discrimination

The review identified pre-enlistment experiences of LGBT+ personnel that may have represented risk or protective factors that influenced how well they subsequently coped with serving under the homosexuality ban in the Armed Forces. Several studies suggested that low personal resilience when faced with the reality of service life under the ban may be explained by young age, naive motives for joining the military, and a lack of awareness of sexual minority identity before enlistment, particularly if they had a religious upbringing (Cianni, 2012; Gouliquer, Poulin, & Moore, 2018; Hillman, 2007; Poulin, Gouliquer, & Moore, 2009; Vaughn, 2014).

LGBT+ individuals who had an awareness of their sexual orientation prior to joining the military presented with other risk factors, such as a lack of knowledge of the homosexuality ban, underestimation of the enthusiasm with which it was enforced or the price of discovery (Heggie, 2003). Overestimations in abilities to conceal sexual orientations and coping with the associated fear, paranoia, and isolation of serving in silence were also demonstrated (Cianni, 2012; Vaughn, 2014).

A lack of preparedness for coping with sexual orientation discrimination during service under the homosexuality ban overall appeared more prevalent in LGBT+ personnel who had not yet accepted their sexual identity, indicating a strong sense of self is needed to buffer against the strain of concealment and harassment (Cianni, 2012; Gouliquer et al., 2018; Hillman, 2007; Vaughn, 2014).

1.4.2 Military Service During the Homosexuality Ban: Culture of Oppression, Coping and Concealment Strategies and the Impacts

The review highlighted the institutional discrimination and harassment experienced by LGBT+ individuals who served during the oppressive ban culture, including traumatic homosexuality investigations, sexual assault, blackmail, threats, retaliatory outings, and violence (Ahuja, Ortega, Belkin, & Neira, 2019; Bower, 2000; Chen, Granato, Shipherd, Simpson, & Lehavot, 2017; Cianni, 2012; Cochran, Balsam, Flentje, Malte, & Simpson, 2013; Cole, 2017; Curtis, 2014; Gouliquer et al., 2018; Heggie, 2003; Hillman, 2007; Livingston, Berke, Ruben, Matza, & Shipherd, 2019; Mount, Steelman, & Hertlein, 2015; National Defense Research, 2010; Parco & Levy, 2013; Parco, Levy, & Spears, 2015; Poulin et al., 2009; Przegienda, 2018; Reichert, 2010; Riseman, 2019; Robinson-Thomas, 2018; Spinks, 2015; Trivette, 2010; Van Gilder, 2019; Vaughn, 2014; Walker, 2020; Wood, 2020).

A range of coping strategies employed to deal with emotional distress caused by these experiences were also identified. These mainly involved identity management strategies implemented to resolve dissonance experienced between their sexual and military identities created by the ban. The most common strategies involved concealment and suppression of their sexual identity (Ahuja et al., 2019; Bower, 2000; Chen et al., 2017; Cianni, 2012; Cochran et al., 2013; Curtis, 2014; Eleazer, 2019; Gouliquer et al., 2018; Heggie, 2003; Hillman, 2007; Levy, Parco, & Spears, 2015; Livingston et al., 2019; Madu-Egu, 2013; McNamara, Lucas, Goldbach, Holloway, & Castro, 2021; Mount et al., 2015; National Defense Research, 2010; Parco & Levy, 2013; Parco et al., 2015; Poulin et al., 2009; Przegienda, 2018; Riseman, 2019; Robinson-Thomas, 2018; Spinks, 2015; Trivette, 2010; Van Gilder, 2019; Walker, 2020; Wood, 2020), compartmentalisation of their personal and professional lives (Ahuja et al., 2019; Bower, 2000; Chen et al., 2017; Cole, 2017; Curtis, 2014; Eleazer, 2019; Gouliquer et al., 2018; Heggie, 2003; Hillman, 2007; Levy et al., 2015; Livingston et al., 2019; Madu-Egu, 2013; McNamara et al., 2021; Mount et al., 2015; Poulin et al., 2009; Przegienda, 2018; Reichert, 2010; Robinson-Thomas, 2018; Spinks, 2015; Van Gilder, 2019; Vaughn, 2014; Wood, 2020), passing as heterosexual to conform with the heteronormative military culture (Bower, 2000; Cianni, 2012; Cole, 2017; Curtis, 2014; Eleazer, 2019; Gouliquer et al., 2018; Heggie, 2003; Levy et al., 2015; Livingston et al., 2019; Mount et al., 2015; National Defense Research, 2010; Parco & Levy, 2013; Parco et al., 2015; Poulin et al., 2009; Przegienda, 2018; Reichert, 2010; Robinson-Thomas, 2018; Vaughn, 2014; Wood, 2020) or seeking professional

excellence to compensate for perceived personal failure to live authentically (Ahuja et al., 2019; Cole, 2017; Eleazer, 2019; Levy et al., 2015; Parco et al., 2015; Robinson-Thomas, 2018).

Other strategies involved self-alienation of LGBT+ individuals from their social support networks to facilitate concealment (Cianni, 2012; Cole, 2017; Eleazer, 2019; Heggie, 2003; Hillman, 2007; Levy et al., 2015; Livingston et al., 2019; Poulin et al., 2009; Przegienda, 2018; Riseman, 2019; Robinson-Thomas, 2018; Walker, 2020; Wood, 2020) or purposeful maintenance of social connections to buffer against the isolation and distress of concealment (Bower, 2000; Chen et al., 2017; Curtis, 2014; Eleazer, 2019; Gouliquer et al., 2018; Heggie, 2003; Levy et al., 2015; McNamara et al., 2021; Moradi, 2009; National Defense Research, 2010; Parco et al., 2015; Robinson-Thomas, 2018; Trivette, 2010; Vaughn, 2014).

The negative impact of oppression imposed by the ban itself and coping strategies deployed to cope with the oppression were identified. Poor emotional well-being of LGBT+ individuals related to experiences of sexual and military identity incongruity and perceived violations of military values of integrity and authenticity during concealment strategies were demonstrated (Ahuja et al., 2019; Bower, 2000; Cianni, 2012; Curtis, 2014; Heggie, 2003; Hillman, 2007; Livingston et al., 2019; Madu-Egu, 2013; Mount et al., 2015; Parco & Levy, 2013; Parco et al., 2015; Robinson-Thomas, 2018; Spinks, 2015; Van Gilder, 2019), which could lead to morally injurious outcomes over time if left unresolved (Litz et al., 2009).

Poor mental and physical health outcomes of exposure to chronic exposure to discrimination and concealment stress such as depressive or posttraumatic stress symptoms, suicidality, substance abuse and fatigue were also highlighted (Ahuja et al., 2019; Cianni, 2012; Cochran et al., 2013; Gouliquer et al., 2018; Heggie, 2003; Livingston et al., 2019; Madu-Egu, 2013; Mount et al., 2015; National Defense Research, 2010; Parco & Levy, 2013; Poulin et al., 2009; Przegienda, 2018; Reichert, 2010; Riseman, 2019; Robinson-Thomas, 2018; Spinks, 2015; Van Gilder, 2019; Walker, 2020).

Negative repercussions for the careers of LGBT+ personnel were another commonly identified impact of the ban which mainly involved forced discharge and associated difficulties accessing civilian employment (Bower, 2000; Chen et al., 2017; Cianni, 2012; Cochran et al., 2013; Cole, 2017; Gouliquer et al., 2018; Heggie, 2003; Hillman, 2007; Madu-Egu, 2013; McNamara et al., 2021; Moradi, 2009; National Defense Research, 2010; Poulin et al., 2009; Reichert, 2010; Riseman, 2019; Spinks, 2015; Trivette, 2010; Van Gilder, 2019; Wood, 2020). Discharges also represented one of the sources of corrosive ban-induced alienation experienced by LGBT+ subsequently cut off from military support and family support if they revealed the reason

behind their discharge to unaccepting family members or continued identity concealment strategies (Heggie, 2003; Mount et al., 2015; Parco et al., 2015; Smith, 2008; Trivette, 2010).

Other sources of alienation identified by LGBT+ personnel during the ban included social isolation during identity management strategies from military peers, intimate partners, and within healthcare settings, which further deteriorated mental health (Bower, 2000; Cianni, 2012; Curtis, 2014; Gouliquer et al., 2018; Heggie, 2003; Hillman, 2007; Livingston et al., 2019; Madu-Egu, 2013; Moradi, 2009; Mount et al., 2015; Parco et al., 2015; Poulin et al., 2009; Przegienda, 2018; Reichert, 2010; Riseman, 2019; Robinson-Thomas, 2018; Smith, 2008; Spinks, 2015; Trivette, 2010; Van Gilder, 2019; Walker, 2020; Wood, 2020). Reductions in social and task cohesion were also noted from the silence imposed on LGBT+ individuals by the ban and subsequent camaraderie paradox created when openness is needed for unit bonding and operational effectiveness (Cole, 2017; Curtis, 2014; Moradi, 2009; Parco & Levy, 2013; Trivette, 2010).

1.4.3 Military Service Post-Ban Repeal: Policy-Attitude Gap

Most LGBT+ personnel across studies adopted a cautious attitude in the post-repeal environment and only selectively disclosed their sexual identity after identifying acceptance cues and developing shared trust, respect, and familiarity (Cole, 2017; Curtis, 2014; Heggie, 2003; Levy et al., 2015; Madu-Egu, 2013; McNamara et al., 2021; Mount et al., 2015; National Defense Research, 2010; Przegienda, 2018; Reichert, 2010; Robinson-Thomas, 2018; Spinks, 2015; Trivette, 2010; Van Gilder, 2019; Walker, 2020; Wood, 2020). The continued secrecy utilised by LGBT+ individuals may be a negative consequence of policy implemented in the post-repeal environment to prevent sexual orientation discrimination by privatising sexuality for all military personnel (Oakes, 2001).

While intended to promote equality by imposing sexual identity concealment on both homosexual and heterosexual personnel, this policy change may further contribute to the camaraderie paradox identified in several studies and exacerbate reductions in social cohesion (Cole, 2017; Parco & Levy, 2013; Trivette, 2010). The review additionally highlighted how covert discrimination and anti-LGBT+ attitudes persisted in military and healthcare contexts despite the policy change, which contributed to perceptions of an ongoing post-ban culture of intolerance, hostility, and ostracism (Curtis, 2014; Gouliquer et al., 2018; Heggie, 2003; McNamara et al., 2021; Mount et al., 2015; Przegienda, 2018; Reichert, 2010; Riseman, 2019; Robinson-Thomas, 2018; Spinks, 2015; Van Gilder, 2019; Walker, 2020; Wood, 2020).

1.4.4 Post-Military Life: Transitional Difficulties

The long-term impact of the ban was also emphasised by the transitional difficulties experienced by LGBT+ individuals returning to civilian life after a homosexuality-related discharge or career of sexual identity concealment (Ahuja et al., 2019; Bower, 2000; Chen et al., 2017; Cole, 2017; Eleazer, 2019; Gouliquer et al., 2018; Heggie, 2003; Hillman, 2007; Poulin et al., 2009; Riseman, 2019; Robinson-Thomas, 2018; Van Gilder, 2019; Vaughn, 2014; Walker, 2020). Alienation from military or family support systems, financial concerns (including housing and employment), deteriorating mental health, and delayed sexual identity development were all identified as enduring negative ban impacts (Bower, 2000; Curtis, 2014; Gouliquer et al., 2018; Heggie, 2003; Riseman, 2019; Robinson-Thomas, 2018). However, some LGBT+ individuals demonstrated increased personal resilience by utilising mental health support, seeking advocacy and reparation for their negative ban experiences, and reconnecting with their social networks to help resolve associated emotional distress and restore disillusioned beliefs about the integrity of the military (Ahuja et al., 2019; Chen et al., 2017; Curtis, 2014; Eleazer, 2019; Gouliquer et al., 2018; Hillman, 2007; Parco et al., 2015; Riseman, 2019; Robinson-Thomas, 2018; Van Gilder, 2019; Walker, 2020).

1.4.5 Impact of Homosexuality Bans on Transgender Individuals

The review also highlighted the impact of the homosexuality ban specifically on transgender personnel (Ahuja et al., 2019; Chen et al., 2017; Eleazer, 2019; Levy et al., 2015; Parco et al., 2015). Similarities in exposure to oppressive events and deployment of identity management strategies were demonstrated, although passing, seeking perfection, and a new strategy involving seeking healthcare to begin their gender transition, were most frequently described. Common ban outcomes experienced by transgender personnel included poor mental health, alienation, and emotional distress, supported findings from LGBT+ personnel. However, the amount of distress experienced by transgender personnel varied according to several factors such as level of identity acceptance, perceived social support, reactions to disclosure, utilisation of healthcare, and personal and collective resilience resources.

1.5 Project Rationale

Evidence demonstrating the negative impact of the institutional silence and discrimination imposed on LGBT+ service personnel by the gay ban is beginning to emerge both anecdotally and in academic literature (Paige et al., 2021). Recent reviews have highlighted the poor mental health and well-being of LGBT+ active-duty service members and veterans including increased suicidality, substance use, poor physical health, vulnerability to sexual assault, and a lack of emotional and social support. Exposure to minority stressors such as stigma and

discrimination within military and healthcare settings were additionally identified, which exacerbated mental health difficulties (see also Mark et al., 2019). However, reviews have mainly included research on LGBT+ military populations from Canada and the USA with comparative military homosexuality bans that were repealed in 1992 and 2011, respectively. Disparities in the timing of ban repeals by country, indicates a cautious approach is needed when generalising findings across militaries with different policy contexts, particularly for transgender personnel who remained excluded in some militaries until recently (Suh, 2019).

Paige et al. (2021) acknowledged the dearth of research investigating the impact of the UK Armed Forces gay ban and provided preliminary evidence of the negative treatment British LGBT+ military personnel were subjected to. This included traumatic investigations to uncover evidence of homosexuality and subsequent dishonourable discharges, forced resignations, and alienation from the military family without access to social, financial, or mental health support, which reduced overall well-being. However, the review highlighted that much more research is needed to uncover the lived experiences of UK LGBT+ military personnel to help identify areas of need and develop effective strategies to help them reconnect with the Armed Forces community and recover from the negative long-term impact of the ban including feelings of social isolation and poor mental health.

The literature review carried out by the research team uncovered pre-enlistment factors potentially implicated in the resilience of LGBT+ individuals to the culture of oppression and fear cultivated by the ban. Various sources of emotional distress and isolation were identified by LGBT+ personnel who served under the ban. These included homosexuality investigations, discrimination and harassment, and deployment of identity management strategies to conceal, compartmentalise, or camouflage their sexual identity. The impact of ban experiences on mental and physical health, career damage, specific perceptions of alienation and social support, and subsequent healthcare utilisation were also highlighted. The impact of the policy-attitude gap experienced by LGBT+ personnel in post-repeal military and civilian contexts was also reviewed, including selective disclosure of sexual identity and continued perceptions of alienation and covert discrimination, particularly by military leaders and health care providers. Suggestions on how to mitigate this gap, improve the health and well-being of LGBT+ individuals, and support their reintegration into the military family and wider LGBT+ community were discussed.

Finally, the need for more peer-reviewed research was identified to uncover the lived experience of LGBT+ personnel who served under the ban, particularly in the UK Armed Forces context to clarify the findings highlighted in this review and inform interventions to improve the support provided to LGBT+ individuals.

2. Project Method

2.1 Aims

The aims of this research project were to examine the impact of the LGBT+ Armed Forces ban on LGBT+ veterans and, in turn, better understand their lived experience of social isolation and loneliness. Having a greater understanding of the risks associated with becoming lonely and socially isolated, linked to the individual experiences of serving under 'the ban', will provide an evidence base for service provision, help and support to prevent and respond to social isolation and loneliness.

2.2 Design

To fully understand social isolation and loneliness in the LGBT+ Veteran community, a mixed methods approach was carried out over two phases (see Figure 1). Phase One consisted of a qualitative exploratory study involving semi-structured interviews with a sample of LGBT+ veterans to understand their lived experience of the LGBT+ Armed Forces ban. Findings from the Phase One interviews informed the development of an online survey that was distributed to the wider LGBT+ veterans' community, the quantitative element to gain a greater understanding of the impact of the ban, social isolation, and loneliness. Following the analysis of Phase One and Phase Two, the findings were then combined to provide a more comprehensive understanding through triangulation (O'Cathain, Murphy, & Nicholl, 2010).

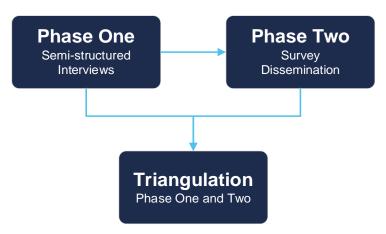


Figure 1. Project two-phase design

2.3 Participants

LGBT+ veterans were recruited from across the UK, using purposive sampling. Peer-led participant recruitment was undertaken in Phase One by peer researchers from Fighting With Pride. Participants in Phase Two were recruited through the Fighting With Pride membership network. All participants enlisted before 12th January 2000 (the lifting of the ban), self-identified as being LGBT+ and as having been affected by the ban (see Table 1).

Table 1 Participant demographics for Phase One and Phase Two

	Phase One	Phase Two
Sample Size	15	101
Age		
Range	49-79 years	47-79 years
Mean (SD)	59.3 years (9.07)	61.2 years (6.82)
Gender Identity		
Man	40.0%	45.6%
Woman	60.0%	52.5%
Transgender History	20.0%	10.9%
Armed Forces Branch		
RNRM	13.4%	32.7%
British Army	53.3%	40.6%
RAF	33.3%	27.7%
Length of Service		
Range	3-14 years	1-44 years
Mean (SD)	5.9 years (2.99)	10.4 years (9.49)

As part of Phase Two, survey respondents were also asked a number of additional questions regarding their sexual orientation and knowledge of the ban before joining the Armed Forces. Following the open text question 'how would you describe your sexual orientation?' respondents used 11 different terms to describe their sexuality (see Figure 2). Textual responses also indicated that a large number of interview participants and survey respondents were not aware of their sexual orientation prior to enlistment in the UK Armed Forces.

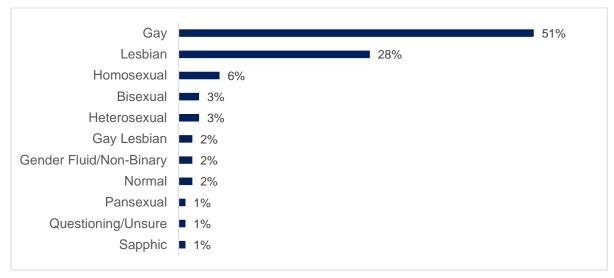


Figure 2 Phase Two survey respondents' sexual orientation terminology (N=101)

When asked about their knowledge of the UK Armed Forces gay ban prior to enlistment, 68% said they had no knowledge. Furthermore, 60% said the ban was not mentioned or discussed during enlistment or during initial training, and 16% could not recall.

2.4 Data Collection

Phase One: Peer-researchers from Fighting With Pride carried out telephone interviews using a semi-structured interview schedule. The interviews lasted around 90 minutes and were recorded using a digital recorder and then transcribed and uploaded to NVivo 12 server for analysis. All identifiable data was removed from the data at the point of transcription.

Phase Two: An online survey was distributed to the Fighting with Pride member network. The survey questions were developed from Phase One findings and included closed and openended questions. Questions focused on their experiences of serving in the UK Armed forces during the gay ban, support needs and connection to others and making amends. The survey was designed to take no longer than 30 minutes to complete.

Two scales were also included in the Phase Two survey to measure social isolation and loneliness of respondents, the De Jong Gierveld Loneliness Scale (De Jong Gierveld & Tilburg, 2006) and the Lubben Social Network Scale (Lubben et al., 2006). De Jong Gierveld Loneliness Scale counts the neutral and positive responses for both the emotional and social loneliness questions. The sum of both scores gives a total loneliness score, which ranges from 0 (not lonely) through to 5 (extremely lonely). A cutting score of 2 distinguishes between lonely and non-lonely individuals (Fokkema, De Jong Gierveld, & Dykstra, 2012; Van Tilburg & de Jong Gierveld, 1999). Lubben Social Network Scale is separated into two categories: family and friends. Each of these categories contained three questions and each of these questions is equally weighted and scored from 0-5 with an overall score of between 0-30 higher scores indicate larger social networks. A score of less than 12 is deemed to be socially isolated (Lubben et al., 2006).

2.5 Data Analysis

Data from Phase One and Phase Two were analysed separately. All qualitative data was entered into NVivo and were analysed using Thematic Analysis following the six steps of Braun and Clarke (2006): familiarisation with the data, generation of initial codes, searching for themes, reviewing themes, defining, and naming themes and producing the report. Quantitative data was entered into SPSS where descriptive statistics were collated, and univariate analyses carried out.

In order to get a nuanced understanding of social isolation and loneliness in the LGBT+ veterans cohort, the research drew on the four fold typology of loneliness and social isolation proposed by Townsend (1963) and developed by (Tunstall, 1966). Scores for the Lubben Social Network Scale and De Jong Gierveld Loneliness Scale measures were dichotomised based on the cut-off points into 'lonely/not lonely' and 'isolated /not isolated.' Based on these

dichotomised scores, four participant categories were created on the loneliness/isolation spectrum: neither lonely nor isolated, lonely but not isolated, isolated but not lonely, and both lonely and isolated.

3. Findings

This is a notice to draw your attention to the potentially upsetting content in this section that may trigger negative thoughts and/or feelings. Your well-being is important to the research team, and we would like to make you aware that the quotes from participants who took part in the study are used in this report to make sure that their voices are heard. There is no censorship of the events participants recall or their experiences of serving during the ban. Please be mindful of the sensitive nature of the stories that are told.

3.1 Triangulation of Phase One and Phase Two

Following the analysis of Phase One and Phase Two, the findings were triangulated to gain a more complete understanding of the impact of the LGBT+ Armed Forces ban on LGBT+ veterans and their experiences of social isolation and loneliness (see Figure 3). This methodological approach enabled a multi-dimensional perspective and enriched the research findings, allowing for the participant voices to remain strong and central to aims and objectives Triangulation takes place at the interpretation stage of the research findings, here findings were listed from each of the Phases to determine where they were in agreement (convergence), provided complimentary information (complementarity) and where there were disagreements in the findings (discrepancy or dissonance) (O'Cathain et al., 2010).

From the triangulation, three overarching themes were identified with sub-themes (see Table 2). Each are discussed with supporting quotes from the qualitative data and quantitative data findings. See McGill et al. (2022) for an in-depth report on Phase One findings.

Table 2 Overarching themes and sub-themes from triangulation

Overarching Themes	Sub-Themes
Emotional Impact	Violation
	Feelings of Mistrust
	Sacrifice
	Mental Health and Well-Being
Changing to Adapt and Adapting to Change	Suppressing Sexual Orientation and Gender Identity
	Cultural Normalisation
	Constant Vigilance: Heightened Stress and Anxiety
Aftermath: Barriers to Help Seeking	Fear and Shame
	Perceptions and Experiences of Accessing Support
	Lack of Appropriate Support

PHASE ONE PHASE TWO Pre-enlistment environmental INTERPRETATION influences and societal prejudice Cognitive suppression/self policing Identity challenges during service On alert/constant vigilance Service before self: living a double life Sacrifice Chaff and flares: decoy behaviour Cultural normalisation **Emotional Impact** Privacy and intrusion Contradiction/conflict Fear and scare tactics Violation of hypocritic oath/abuse of power Social isolation Loss of trust/broken confidentiality Feelings of loss Criminality Impact on emotional health and **Changing to Adapt and** well-being **Adapting to Change** Cumulative vulnerability No transitional support Organisational values vs. personal values - dissonance Families and friends' support Relationship breakdown Poor treatment and reluctance to access support Pretending to be heterosexual Perception of self **Aftermath** Low self-esteem Finding a sense of connection **Barriers to Help Seeking** and acceptance No knowledge of support available Criminal records

Fear and shame to get help

Homophobia – military and civilian

Figure 3 Triangulation of Phase One and Phase Two findings

More complicated than an apology

Finances - pensions

3.1.1 Emotional Impact

Participants recalled questioning of their LGBT+ identity, personally and by others, which caused feeling of fear and isolation. Interactions (primarily with superiors implementing the ban) had negative emotional impacts for many participants leaving some feeling violated, unable to trust anyone and sacrificing their freedom to reveal their true identity and live their respective lives as LGBT+. These negative experiences lead to consequences for the participants that impacted during and after service life.

Phase Two survey respondents were asked to what extent they felt that their dismissal from the Armed Forces, due to being LGBT+, affected a number of factors (see Figure 4). Respondents felt dismissal had a large or great effect on their mental health and well-being (86.3%), their friendships (69.2%) and their family relationships (68.1%).

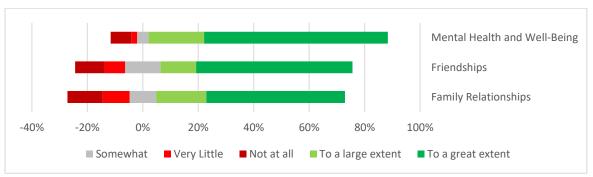


Figure 4 The extent to which survey respondents felt their dismissal from the Armed Forces affected their mental health well-being, friendships, and family relationships

3.1.1.1 *Violation*

Contributing to the emotional impact of the ban on participants and survey respondents was the prevalence of a violation of human rights¹. Key pathologies included becoming victims of deeply embedded prejudice which created structural vulnerabilities and an increased likelihood of encountering emotional difficulties. The emotional impact of ill-treatment was intensified by the ban and resulted in an 'unsafe' working environment. investigations into their sexual orientation and/or gender identity through the Special Investigations Branch (SIB) were also cited as violating.

Throughout the interviews, participants described their personal experiences of violation whilst serving during the ban and the constant fear of being 'found out'. They explored the predatory behaviour of investigators, poor treatment, and the intrusion into their private life during investigations – violation in all aspects of their life.

¹ LGBT+ people have the same human rights as all individuals, which includes the right to nondiscrimination and the condemnation of violation of the right to be treated as equals with equal access to protection regardless of gender or sexual orientation (Hoffman & Rowe, 2010).

"They wanted their pound of flesh. I mean when they searched my room they went through papers and everything and I... luckily, I never had anything that anybody ever sent me anyway" (Interview Participant)

"It was a complete violation of everything and that, you know, to watch your world been got through was... that's kind of a fairly inexplicable feeling as well" (Interview Participant)

Furthermore, 74.7% of survey respondents agreed or strongly agreed that they were made to feel uncomfortable during these investigations experiencing threats of violence (see Figure 5).

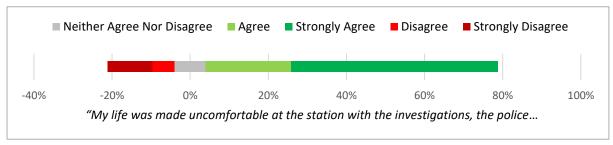


Figure 5 The extent to which survey respondents agreed with the statement "My life was made uncomfortable at the station with the investigations, the police work, the odd word, the sort of threat to violence from other people"

Negative behaviours, being made to feel uncomfortable and experiencing violation was characteristic of many participants' working environment. This was not something only perpetrated by the investigators, but also for many, by those in their chain of command. Some participants and respondents shared the response they received when their sexual orientation and gender identity was discussed with their chain of command:

"I just said to him, I'm gay and he just went... He just hit the roof... there's no fucking room for you poofters in this man's army" (Interview Participant)

"I went and saw the Brigadier and that was awful. She told me I was an utter disgrace to the corps, I'd let the corps down, she hated me" (Interview Participant)

"When I admitted to them that I was probably trans and wanted to continue cross dressing they got me to sign this for their records... and recommended I was temperamentally unsuitable. I then had to go to Captains Table to request discharge, I wasn't allowed to talk to anyone, at the Table all the discussion was around my cross dressing and thoughts about transforming into a female. I was treated like a criminal and kicked out. Was told that I had embarrassed the Navy, myself, my family. I was immature and wasn't trying and not responding to their treatment" (Survey Respondent)

Participants reflected on the intrusive nature of the investigations and the 'grilling' questions they were subjected to. In many cases, the nature of questions was not warranted or even logically relevant to the investigation.

"One was quite horrible, sort of shouting questions... They showed my photos, so they showed a photo of like seeing me sat on the bed with about 4 other women with our cuddly toys and just said, why are you sat on the bed? What were you doing? Were you having an orgy? What do you do when you have sex with a woman? Do you use clitoral stimulation? Do you use sex toys?" (Interview Participant)

"It's playtime for the RPs [Regimental Police]. They think they've won the lottery, don't they? They beasted me, unmerciful, they could not have been any worse. There was no physical violence, they didn't need to be able to punch you" (Interview Participant)

Questions from investigators were described as 'horrendous, very intrusive'. When survey respondents were asked to what extent they agreed with this in their experience, 82.5% agreed or strongly agreed (see Figure 6).

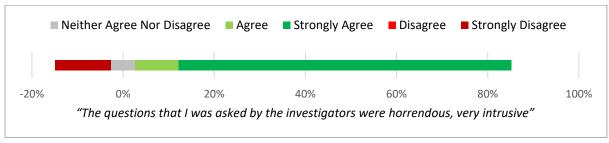


Figure 6 The extent to which survey respondents agreed with the statement "The questions that I was asked by the investigators were horrendous, very intrusive"

Many participants were also questioned about where they went for entertainment and about other military personnel's behaviour in an attempt to locate other LGBT+ military personnel. Participants were placed in difficult situation of whether or not to disclose such information and the consequences this may have.

"My Officer in Charge kept grilling me. She wanted to know where we went for entertainment. What we did with our time. She was always hoping that I would confess and give up the ghost of everybody that I knew. Give our secret places away" (Interview Participant)

This was corroborated by survey respondents, who reported being questioned about where they went for 'entertainment' by investigators (see Figure 7) in further attempts to identify other LGBT+ personnel (65.3%).

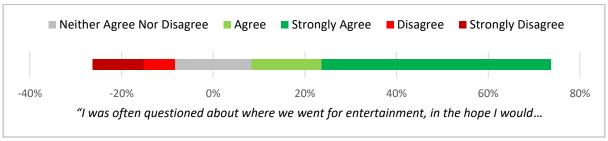


Figure 7 The extent to which survey respondents agreed with the statement "I was often questioned about where we went for entertainment, in the hope I would confess where they may find others like me"

² Regimental Police are responsible for regimental discipline, whereas Military Police are responsible for upholding the law and for investigating serious crimes and offences in the Armed Forces.

Further violating their right to privacy, one interview participant in particular described the public nature of their treatment by investigators and senior service personnel:

"They took me, marched me down to my room, in full view, again of everyone and I had to stand in my room while they totally went through everything" (Interview Participant)

In addition, participants describe threatening behaviour from investigators, the use of intimidation to get 'answers', blackmail to get them to leave the Armed Forces, and threats to involve their families in search of evidence of their 'guilt' and to subsequently 'expose' them to their families.

"There's the SIB... You know, them twats got involved for two days. Complete intimidation, you know, it was about, we are going to go and talk to every single person that you know. We are going to turn your family's home upside down. We want to find any piece of evidence" (Interview Participant)

"They said they knew about my twin, that she was gay and that if I didn't sign then, you know, it was likely that they would get her. They said they'd contact my widowed mum and just tell her what was going on" (Interview Participant)

As with interview participants in Phase One, 69.5% of survey respondents agreed or strongly agreed that investigators threatened to contact everyone they knew to find evidence of their sexual orientation (see Figure 8)

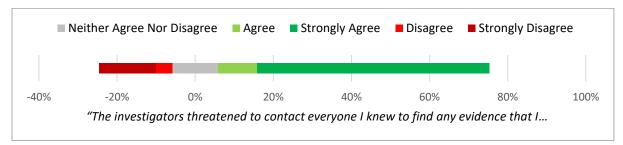


Figure 8 The extent to which survey respondents agreed with the statement "The investigators threatened to contact everyone I knew to find any evidence that I was gay"

For some, their families were contacted and informed of the investigation, their sexual orientation and nature of the dismissal. This led to some difficult conversations for those that had not disclosed their LGBT+ identity to family and this led to the breakdown in important familial relationships:

"They'd rang my mother up to say I was being discharged after I'd told her I was leaving of my own accord. I was forced to come out to my mother and the rest of my family when I wasn't ready. My aunt offered to pay for a psychiatrist!" (Survey Respondent)

These threats also included warning of being sent to the medical block. The following participant was threatened with being strip searched:

"Threats to send me to the medical block to be strip searched because they said they thought I had love bites on my back" (Interview Participant)

For many the threat of being sent for medical examinations became a reality. Participants were sent for medical examination as part of investigations or as a direct result of disclosing their sexual orientation or gender identity. This was an overwhelmingly negative and potentially traumatising experience, leaving participants exposed, vulnerable, violated, humiliated, and often not given the opportunity for representation or communication.

"I was investigated by the SIB followed by a thorough medical examination before attending the captain's table to be discharged... Throughout the whole process I was totally alone with no representation and was not told of what or why this was happening. The horror of all this was the unannounced meeting with the SIB in a prison cell" (Survey Respondent)

"I was placed in a prison cell when the SIB came in and started asking questions which became very intrusive and personal to the point that I refused to answer them. Shortly afterwards I was medically examined which seemed excessive and obtrusive. I was kept totally in the dark with the proceedings, had no offer of help or advice throughout" (Survey Respondent)

"They took me to the medical centre in [anonymised]. He said, right, because we think you're gay, we need to have a medical exam. So I went there, and the medical officer was a reserve officer, lovely lady and she said, look what they want me to do is stick my finger up your bottom to see if there is a reflex, a reflex of your sphincter. So apparently if it does something, she said... She said, its complete balderdash, but I have to do it and we were both in tears at this point" (Interview Participant)

As well as medical examinations, several interview participants were also sent to see a psychiatrist.

"I went to the Drs to admit that I was confused about my sexuality. I was isolated from everyone and sent to a Psychiatrics Ward for evaluation. I spent 7 weeks in there. They got me to tell my parents who were disgusted and horrified in me" (Survey Respondent)

"Various further interviews, various obscene, offensive questions. Sent to a psychiatrist to see if I was nuts. See if I was trying to just say that I was even though I wasn't. Sent for a medical examination of my nether regions to see if that would confirm it" (Interview Participant)

"I admitted I was a lesbian, but they sent me to see a psychiatrist. I still remember the psychiatrist. I don't remember anything else except he asked me if I masturbated. I am still trying to figure that out... I did lie, of course. But apparently that was how he assessed I was a lesbian" (Interview Participant)

Experiences of being sent for medical examination and/or sent to see a psychiatrist were prominent in the participant interviews and textual data from survey respondents. However, when asked to what extent they agreed with the statement 'I was sent to see a psychiatrist',

survey respondents were fairly evenly split, 43% agreed or strongly agreed and 47% disagreed or strongly disagreed (see Figure 9).

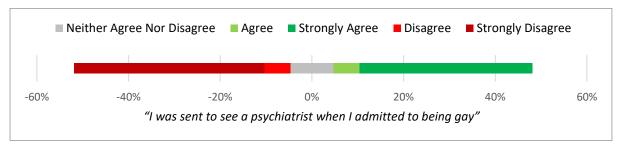


Figure 9 The extent to which survey respondents agreed with the statement "I was sent to see a psychiatrist when I admitted to being gay"

Sexual orientation and gender identity was frequently treated as a medical problem with a severe lack of understanding from all medical and psychological professionals. For several participants, psychiatric assessment resulted in immediate dismissal from the Armed Forces:

"I was medically discharged for a depressive condition after my psychiatrist realised, I was determined to explore my gender identity further" (Survey Respondent)

"The psychiatrist realised I was gay and offered me a medical discharge immediately or an admin discharge the next morning" (Survey Respondent)

"I was discharged 'due to circumstances outside of his control' and sent to an (Armed Forces) Psychiatric Hospital, at (Hospital Name) put on drugs, subjected to humiliating tests and IQ tests. Prior to that I was warned I could be sent to a military prison for up to 2 years" (Survey Respondent)

It is clear from interview participants' and survey respondents' narratives that medical or psychiatric intervention had a damaging effect on them regarding their perception of self and created a greater reluctance to seek out or access support in future due to the negative experiences (see also 3.1.3 Aftermath: Barriers to Help Seeking).

"The greatest impact was after leaving the service. The aftereffects of the investigation by the naval police and the psychiatrist made me feel very ashamed, like I was a bad person and unclean in some way. I hid who I was from everyone but close family for several years" (Survey Respondent)

3.1.1.2 Feelings of Mistrust

Recurring patterns and incidents that led to the development of mistrust had a psychological effect on participants and impacted significantly on relationships, the ability to seek help and support and absence of identity resilience. The most prominent way that feelings of mistrust developed was in response to the fear of being reported and personal experience of betrayal and abandonment. Being unable to trust anyone manifested itself as the inability to feel safe and, in turn, trust others coupled with the need for constant vigilance and self-policing. It was

evident from participant responses that the risk of trusting others was too great, particularly as it could lead to a loss of career as a consequence.

'Camouflage', as a theme, was explored in Phase One. However, the key aspects of this theme remain prevalent across both Phase One and Phase Two findings. The sub-theme of mistrust emphasises and reinforces the need for camouflage and the reasons for self-protection based on fear:

"We had everyone that was completely against people being gay" (Interview Participant)

"I was always worried about when I met other gay people. I never used to tell people I was in the military because I was always worried about being shopped" (Interview Participant)

"We would go somewhere and there would be a women's disco and you had to sign in. So, you would sign in with a different name because you would think the SIB would be there... there was always that sort of hidden thing that you had to do to avoid being caught" (Interview Participant)

"I didn't tell anyone, I hid letters and pretended I liked men. I was careful on phone calls" (Survey Respondent)

"The attitude towards gay people was very negative and derogatory. There were very outspoken views that there was no place for gays in the military. This view was led by [NAME] who made clear that he, and hence the Navy, had no time or space for gay men in the Armed Forces" (Survey Respondent)

Feeling unable to trust anyone was compounded by the prejudice that was ever present in the working environment as a result of 'the ban' and the experiences of friends and colleagues. Participants described what happened to others when they revealed their LGBT+ identity or were found out. The consequences included a loss of career, threat of violence and fear from being watched:

"A friend of mine came out as, well probably didn't even have a word for it, as transexual. She went to tell the Officer in Charge that she thought she was in the wrong gender – end of career" (Interview Participant)

"But it just made my life uncomfortable here on the station with the investigations, the police work, the odd word, the sort of threat to violence from other people" (Interview Participant)

"They had people stationed outside the pub here investigating me. They had; they had the local civilian police here" (Interview Participant)

"At the time it was black Ford Escort estates that the SIB, the Special Investigation Branch, the SIB used to drive round in...if you saw a black Ford Escort estate drive round the camp it just put the fear of God in you, you know, absolutely put the fear of God in you" (Interview Participant)

The inability to share their LGBT+ identity with anyone due to a fear of the consequences and subsequent mistrust of other was corroborated in the survey responses, with 89% agreeing or strongly agreeing that they if they talked to anyone about this, they would lose their job (see Figure 10).

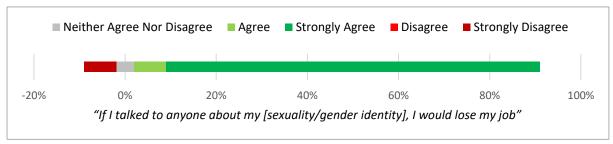


Figure 10 The extent to which survey respondents agreed with the statement "If I talked to anyone about my [sexuality/gender identity], I would lose my job"

Further responses from the survey emphasised the ever-present risk of being discovered and of what might happen. This resulted in constant vigilance, distress, and anxiety. Respondents discussed feeling as though they were being watched or followed, that they could not relax and had no support networks they could turn to.

"Paranoid on leave due to SIB so no escape. Worry and pressure of consequences" (Survey Respondent)

"I felt I was always looking over my shoulder. You couldn't be yourself unless off camp and then you couldn't relax in case the place was raided by the MP [Military Police]" (Survey Respondent)

"I felt that there were people out there to get me and I was being watched all of the time" (Survey Respondent)

"Secretive, scared, felt you could trust no one, lonely at times, felt like you were being watch by what group of people you hung around with" (Survey Respondent)

"Being diagnosed as intersex when in service was terrifying. The threat of Colchester was ever-present but that it cost me my career was heart-breaking" (Survey Respondent)

Mistrust of others was exacerbated by the presence of the Special Investigations Branch and for 45.6% of survey respondents, seeing the typical vehicle of choice used by the investigators created fear – outside of any actual investigations or interactions with them (see Figure 11).

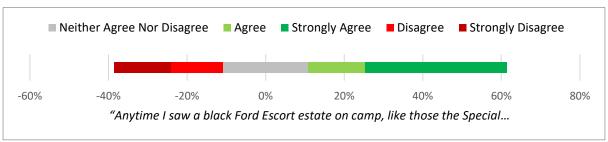


Figure 11 The extent to which survey respondents agreed with the statement "Anytime I saw a black Ford Escort estate on camp, like those the Special Investigation Branch drove, I was terrified"

3.1.1.3 Sacrifice

Self-sacrifice in the context of serving in the UK Armed Forces, is an integral aspect of professional duty, discipline to follow rules, exhibiting self-control and respect for authority. A prevalent theme that emerged from Phase one, *service before self* described participants narratives about 'coping techniques' and conforming to heterosexual norms in order to feel safe. The resultant sacrifice of self by the LGBT+ veterans who took part in this study, set against 'the ban', was at the expense of their mental health and well-being and resulted in self-neglect and repression of personal needs and feelings.

Military life is unique. It is widely recognised that those who serve in the Armed Forces prepare to sacrifice their life, be part of a cohesive unit and show loyalty to the Crown. This sacrifice extends to the family/significant others who also make sacrifices, whether in peacetime or war. The importance of sacrifice cannot be understated and affected participants daily lives. Having to live under the protection of camouflage represented 'double sacrifice' sacrifice that is aligned to the values of serving in the military that is accepted and understood and the sacrifice of self that is deeply personal and unwelcome.

"There was this increasing anger that why should my life be so offensive and so incongruous with being able to be an army nurse, it didn't make sense" (Interview Participant)

"I felt guilty and confused as I wanted a career in the Army. Worthless at times and felt I did not belong. Very stressed in case I was found out. I often asked myself, what is wrong with me and why am I like this. I knew others would think less of me if they knew I was a lesbian" (Survey Respondent)

"I'd not sort of defined myself in that sort of way until that. Then sort of began to think about it and obviously panic about it" (Interview Participant)

"I also had to support the SIB enforcing the ban as part of my job, but left due to this and it not being compatible with my own ethics and sexuality once I discovered what that was" (Survey Respondent)

This double sacrifice was often discussed in relation to living a double life and was a phrase frequently used by both interview participants and survey respondents regarding their time in the Armed Forces.

"Living a double life. Unable to be my authentic self. Living with a secret" (Survey Respondent)

"What was so difficult about it I think was, after a fantastic weekend and the thought of having to go and do that again on a Monday morning and just not be me anymore" (Interview Participant)

"I was always going out with men, going on dates with men, trying to be... not so much trying to be straight but trying to be not gay" (Interview Participant) "I felt that I could not be myself and that I had to be another person" (Survey Respondent)

"I couldn't talk to anyone, I was able to cross dress whilst on leave and in secret. When I was at sea, I could pretend to be someone else but that what took its toll as I just couldn't be myself" (Survey Respondent)

When asked how they would describe what it was like to serve in the Armed Forces during the ban, sacrifice was a common characteristic of the survey responses:

"Name calling. Could all be over in an instant.... End of career, housing, food, friends. Having to lie, make up stories. Always looking over your shoulder. Made me embarrassed of my own sexuality. Made me feel a lesser person, one who was open to abuse and ridicule" (Survey Respondent)

"Frightening, lonely, dirty, outcast, severely gay bashed, taken out of my comfort zone, Court Martialled, threatened, robbed, deprived, imprisoned, mind games, loss of confidence, removed the joy of sex, self-hate, made to feel ashamed of being me, nervous" (Survey Respondent)

Once their LGBT+ identity was revealed, participants felt that their Armed Forces career and their contribution to military service was not recognised or acknowledged. This included not only loss of career but also future hopes, security, and safety.

"It took away my career, it took away my pension, it took away my future. It just, it just utterly destroyed it, and it took away a job I know I was good at... it just took away my home, my livelihood, my future, career, pension. It doesn't really get much worse than that, does it?" (Interview Participant)

"He's right for promotion, but my unit said, we're not going to promote him" (Interview Participant)

"It could have been different. I signed up to serve my country for at least 9 years and feel like I signed up for a lifetime of hell. I'm now on illness benefits as I don't have long to live. It would be nice to know I may get my service pension in my lifetime" (Survey Respondent)

"I knew that if I wanted to be happy in a settled relationship then I had to leave to achieve this. I was tired of lying all the time even though the ban had been lifted. I was stuck in my own learned behaviour" (Survey Respondent)

Many participants and survey respondents reflected on the harsh, dismissive nature of their discharge from the Armed Forces:

"I think it was a letter and I received a message to say, your service is terminated" (Interview Participant)

"You've got your red book and it says, services no longer required" (Interview Participant)

"Getting absolutely nothing out of it apart from a piece of paper that says you're worthless" (Interview Participant)

"I got tired of hiding and bought myself out. Then, after two years in the reserve, I sent a letter from a psychologist confirming I was gay and got a single sentence letter back from the MoD saying, 'Your service has been terminated as per the date of this letter" (Survey Respondent)

The way in which participants were discharged resulted in devastation and shock. For some, there was a sense of feeling there was nowhere to go and there was nothing left for them.

"I was in a right state. It's like I was in shock, it was the biggest shock of my life. I had never had anything like that ever happen to me in my life before... I was 27, 27 years of age and like my world fell apart. What do I do? You know, who do I tell? What can I do?" (Interview Participant)

"It didn't matter that literally I've lost all of my friends... I was literally given 10 minutes, marched by RAF police to my room, given 3 big boxes and told to put everything in it and it would be shipped back to an address back in the UK or back here" (Interview Participant)

"I plummeted to depths that I didn't believe were possible. Obviously, I'd lost my career, I'd lost my friends. I'd lost my livelihood, and this is a funny thing to say, but you're kind of, you're almost somebody when you're in the military and you're not, out here, you're just nobody. You know, you're Joe Soap out here" (Interview Participant)

It was clear that who they were in the military, which was a major part of participants identity, was taken away from them. Participants and respondents both described moments where they were 'physically' stripped of their Armed Forces identity:

"I got the Court Martial, put in prison, they take everything off you, your uniform and everything" (Interview Participant)

"The RSM was handed a pair of scissors and cut my stripes off me and threw them in the bin. I was told I was a disgrace to the WRAC. I was then marched back to my room told to pack my suitcase and then marched off camp. I had no train ticket, no money and nowhere to go. I was effectively homeless" (Survey Respondent)

The behaviour of their colleagues in the Armed Forces towards themselves and other LGBT+ military personnel, left interview participants feeling as though they were criminals. This was also found in the survey, where 71.7% of respondents agreed or strongly agreed with the statement "I was vilified. I was treated like a criminal" (see Figure 12).

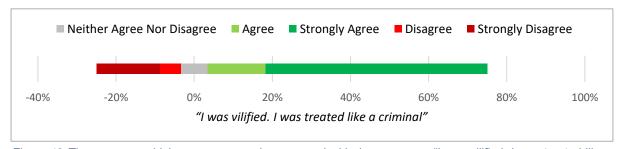


Figure 12 The extent to which survey respondents agreed with the statement "I was vilified. I was treated like a criminal"

Of the survey respondents, 7.9% reported having been court martialled as a result of being LGBT+ whilst serving in the UK Armed Forces under the ban. Of these, 50% received a criminal record as a result. For many LGBT+ military personnel serving prior to 2000, the investigations led to criminal records.

"I mean have an honourable discharge and yet still have a criminal record for it" (Interview Participant)

"I was Court Martialled, sentenced to 112 days detention and dishonourable discharge from the Army... I had a complete breakdown, when I recovered, I was told to Soldier on, I purchased my discharge, I had lost too much weight and was medically unfit to be discharged, I was sent home to mother for her to fatten me up for 3 months to be able to be discharged from the Army. (Survey Respondent)

3.1.1.4 Mental Health and Well-Being

All through the narrative data, participants serving in the Armed Forces during the ban talked about the impact on their mental health and well-being. As noted earlier in Figure 4, 86% of survey respondents felt their mental health had been affected. Whether this was a result of difficulties in reconciling their identity, the experience of intrusive investigations, the consequences of negative treatment from others, a profound sense of loss, or all of this, the impact on their mental health and well-being has been long-term.

The need to hide their sexuality whilst serving in the Armed Forces heightened anxiety and stress for many of the survey respondents with the fear that they would be 'found out' and lose their career. The reality of these fears led to loneliness and poor mental health.

"It was like leading a double life having to keep my sexuality secret. I was very aware further into my RN of the ban and became increasingly concerned and frightened of being found out. These fears became a reality in the end and this time was traumatic, lonely and very upsetting. This had a profound effect on me for the rest of my life causing mental health issues with which I had had to deal with" (Survey Respondent)

"I really really struggled as I was so confused and knew if I talked to anyone, I would lose my career. It just got too much, I started to struggle emotionally really badly to the point of a breakdown till it got too much" (Survey Respondent)

Constantly looking over their shoulder and living on the edge regarding their sexual orientation and/or gender identity, alongside intense investigations, were mentally exhausting. For one survey respondent this influenced their response to an investigation into their sexuality:

"It's very difficult to pretend all the time and makes you mentally exhausted" (Survey Respondent)

"The SIB came on camp and investigated 4 of us... I was so tired at the questions I eventually admitted to being gay, I couldn't see any other way out" (Survey Respondent)

For some participants, it was the discharge itself that was the most triggering for their mental health. The dismissal led to low mood, 'dark moments' and an inability to settle into civilian life, changing jobs frequently.

"I have had times when I've had break downs... I get dark moments in my life" (Interview Participant)

"I got through that process and was discharged and that destroyed me" (Interview Participant)

"I suffered some big mental health issues when I left and you know, deep dark depressions and almost suicidal at points. Low mood, constant low mood. Not being able to fit in and constantly moving from job to job, to job, to job, to job..." (Interview Participant)

"I was discharged penniless and in a fragile mental state which required medication and counselling for years. Felt like a criminal" (Survey Respondent)

There were acknowledgments of serious mental health difficulties, depression, and self-harm as a result of their time in the Armed Forces during the ban. For some, difficulties arose years after discharge, highlighting the long-term impact on their mental health.

"I was getting very depressed. I was sitting all day not being able to eat. I went down to about 8 stone. I eventually found a therapist and I realise, with hindsight, it is like that knock on effect. You know, I dealt with what I dealt with when I was 27, but by the time I was coming up to 40 and all those things happened, it just had that knock on effect" (Interview Participant)

"I've been in intensive care because of overdoses. Self-harm, my self-harm has got so severe that I've had skin grafts because I'd used caustic soda. So, and it's all because, I don't know, I've just sort of felt this inner shame and I just can't get rid of it" (Interview Participant)

Suicidal ideation was cited by both interview participants and survey respondents, particularly as a result of hiding their identity and the investigations whilst in the Armed Forces.

"It was deeply painful, and the actual investigation is the only time in my life that I very seriously, well I was about to kill myself because I just felt I had nothing left" (Interview Participant)

"Fraught with tension always having to hide my sexual orientation. Depressing as I couldn't have a fulfilling relationship with another guy; I got more and more depressed turned to alcohol and eventually attempted suicide" (Survey Respondent)

"I was taken aback upon reading my discharge papers. It said my conduct on discharge was exemplary, which according to the English dictionary means 'serving as a desirable model' and 'very good'. I never felt very good or even good after my discharge and went from one low-paid job to another, drank alcohol every day and tried to commit suicide multiple times" (Survey Respondent)

There were recurring references to isolation, being physically removed from others, not allowed to interact with others and being treated as a risk. Following losses in all areas of their lives, job, family, friends, home, financial security, survey respondents discussed feeling that there was no one they could turn to, leading to loneliness and forced isolation.

"How I'm still here is difficult to fathom as many times I have thought what is the point? I'd lost my Job my new family & my only true friends at the time. I lost my accommodation my home I lost financial security - I lost a sense of belonging" (Survey Respondent)

"Isolating, worrying and stressful. There was no empathy, support or understanding. Treated as a risk to the forces rather than a human being" (Survey Respondent)

"Once my sexuality was known to the SIB life became very difficult. I was isolated and sent 300 miles away from home and told not to contact anyone. I was 17 and alone trying to take my life several times" (Survey Respondent)

"I felt disengaged from the real world and that I was some form a of a Walter Mitty character" (Survey Respondent)

Ultimately, LGBT+ veterans described how they were made to feel they no longer belonged in the Armed Forces, stripped of their military identity. As with Phase One, the impact on perception of self was strong in the narratives provided in the Phase Two data. Self-perception, in the context of the themes that emerged, included self-image as well as self-esteem. Both interview participants and survey respondents reflected on overwhelming feelings of shame, being made to feel unworthy and 'not normal'.

"I was interrogated for being gay and this was a horrific experience. I was made to feel ashamed and that I didn't belong in the military. I was moved to a different department and even though no evidence was found I was made to feel that I was a disgrace to the Army and that I wasn't normal and was a threat to women. It was like treading on eggshells all of the time and always looking over my shoulder" (Survey Respondent)

"It seemed everywhere I went I wasn't quite good enough - I didn't quite meet expectations my confidence hit rock bottom. It's affected my whole life right up to the present day & only recently I am at last having psychotherapy for what I experienced" (Survey Respondent)

"Feeling a lack of worth, feeling unworthy... for a long time and it still affects me to an extent, that feeling of self-worth" (Interview Participant)

"Felt shame and depressed, hid anxiety which eventually had physical effects on health. Frustration seeing immorality of straight colleagues whilst I hid. Had good friends but illegal nature of ban ruined my career, confidence, and future ability to adapt in civilian life" (Survey Respondent)

The impact on their mental health, well-being and self-perception affected the way in which participants continued to live their lives. Specifically, this was evident in the way interview

participants continued to outwardly identify themselves to a certain extent, but it was also the enduring impact of what others have said about them.

"Even now, when I talk about it, I get this big well up of emotions and this anger inside" (Interview Participant)

"I think the impact of it is almost like a shock to the system, you're told, you know nobody, like you'll never get a job, you're you know, a pariah and you just believe it" (Interview Participant)

"I felt I couldn't be my true self. I felt devalued and ashamed for being gay. It made me very secretive which has carried on through all my life with sometimes negative consequences. I find it difficult to be open to people even today" (Survey Respondent)

"I became really resentful at being gay. Again, I reverted back to that person who almost didn't want to be gay" (Interview Participant)

"I felt like a fraud. Confused. Disgusting. Failure. Regretful that I had taken a wrong path in life. Depressed and anxious which engrained itself into my personality" (Survey Respondent

"I mean I was a really, what I consider a very, eventually, I was pretty confident and happy and outgoing and then just when I left it was like, I don't know, I was just left with this shell of a person and I've stayed with it... it's like I'm not the me I'm meant to be, if that makes sense" (Interview Participant)

3.1.2 Changing to Adapt and Adapting to Change

Changing to adapt and adapting to change encompasses the perceived consequences of being discovered, compounded by constantly living in fear. The change in behaviour operated at a number of different levels but was fundamentally based on stigma and resultant negative thoughts, feelings and behaviours about the participants sexual orientation and/or gender identity. The prejudice that led to behaviour change was viewed through interpersonal interactions and needs to be understood at an institutional level. This theme has a focus on how others made participants feel and the organisational values versus personal values that resulted in conflict. Concealment of LGBT+ identity through 'going it straight' and 'marching on' led to a significant degree of distress and social isolation.

"You start living your lie at a very early age and it becomes a pattern, you just lie all the time. It doesn't feel like a lie, it seems more avoiding the truth and playing a game, to belong, to feel the peer pressure of whatever that is, whatever your difference is, you want to comply, you want to be with your peers, you want to be like everybody else, so you adapt, and you keep on adapting nearly all your life" (Interview Participant)

"I kept to myself. Strived to be good at my job and to be kind and helpful to others. To be liked. Avoiding controversy. Avoiding drinking with colleagues, in case something slipped. Making sure if in the presence of naked men not to look" (Survey Respondent)

"You know, you spend such a long time adapting your personality in there that when you come out, you just look around and you think how do I fit in here? How? I am so different from these people. You know, I think differently. I act differently" (Interview Participant)

3.1.2.1 Supressing Sexual Orientation and Gender Identity

Supressing thoughts of LGBT+ identity did not only involve avoiding acting on thoughts but also avoiding thinking about sexuality, feelings, and thoughts. Figure 13 demonstrates the significant number of survey respondents who felt that they had to hide their sexuality or gender identity during military service (99%).

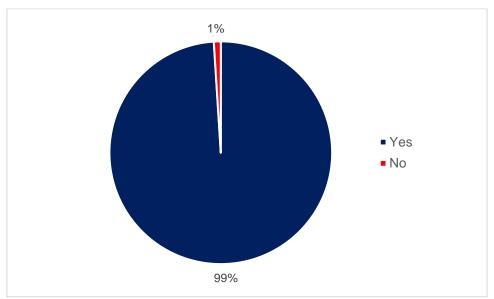


Figure 13 Survey respondents' responses to 'Did you feel you had to hide your sexuality or gender identity?' during military service

As a result of supressing thoughts and regulating their behaviour around their sexual orientation and gender identity, participants experienced psychological distress and behaviour change for self-protection.

"Now I have to start hiding myself" (Interview Participant)

"I just wanted to be the same as everybody else, I didn't want to be gay" (Interview Participant)

"You're having to do and think and achieve all of the time and I think your sexuality falls away from you at that point, you know, you are too busy focused on what you need to do to get through to pass out" (Interview Participant)

"It made me feel like I wasn't 'right' and shouldn't have feelings for women. That I had to keep hiding everything about myself. How I spoke to people, I even felt that I needed to check my body language in case that was mis interpreted. I felt a great strain having to live my double life" (Survey Respondent)

"I was now in the job, so I'm going to lose the job if I don't hide everything" (Interview Participant)

The conflict that resulted from being unable to be their true self led participants to suppress their 'secret', and because this suppression tended to be ineffective, it resulted in preoccupation with the need to hide their thoughts and desires:

"I was 17 when I joined up and so I was unable to discuss with or look for advice about my feelings, as doing so to the RAF doctor, supervisor or colleague would result in me being reported and investigated. The possible rejection and negativity around the topic made me suppress my own wants and needs to conform. I withdrew into myself and didn't acknowledge my own sexual identity. I lacked confidence and emotional intelligence" (Survey Respondent)

"Styling it in this way where you're kind of, not aggressive, but you become unapproachable, so you throw up boundaries, you've got that attraction, inside me I had that attraction, but I was trying to throw everyone off the scent... you don't want people to get too close" (Interview Participant)

Supressing LGBT+ identity meant participants were unable to share parts of themselves with other and for some it meant they were unable to acknowledge their partner in public.

"I didn't tell anyone, I hid letters and pretended I liked men. I was careful on phone calls" (Survey Respondent)

"Just didn't acknowledge it if anyone asked me or met my partner outside the camp/barracks" (Survey Respondent)

This also led to employing subterfuge to 'cover up' their actions and behaviours, allowing them to further hide their sexual orientation or gender identity. Survey respondents reflected on how they presented to by straight and how, for one, their boyfriend would send letters signed with a female's name to help keep their secret.

"I pretended to a straight. I made up stories about girlfriends and lads' nights out. I was very conscious of what I was saying and who I was saying what to" (Survey Respondent)

"I had to hide my sexuality by pretending I had a girlfriend" (Survey Respondent)

"Told colleagues I was going to see my 'girlfriend' at the weekends Not my 'boyfriend'. My boyfriend wrote to me as a woman and signed his name with a girl's name" (Survey Respondent)

3.1.2.2 Cultural Normalisation

The nature of the ban, as a policy directive, resulted in the lack of protection and promotion of rights of lesbian, gay, bisexual, and transgender people that led to stigmatisation, isolation and conflict with family and peers about their sexual orientation or gender identity and an inability to disclose this. When their sexuality or gender identity did not fit the 'norm', LGBT+ military personal were investigated and segregated from the rest of their colleagues.

"I never dared discuss my sexuality. There were connotations of not being psychologically or socially acceptable and that you may have had or suffered from

mental health problems. I remember a time when sex with foreign women was discussed prior to a port visit and very negative talk about 'lady boys' and being 'gay'. Being unfaithful did not seem to be a problem in the Navy but 'gay sex' was!" (Survey Respondent)

"They found women's clothing in my possession. I was interviewed and kept away from regular duties and after being left in limbo, I was medically discharged" (Survey Respondent)

Concealment of gender and sexual identity was a reaction to the stigma and fear. But, despite the attempts to conform to societal expectation and the norms that were enforced and expected, the consequences attributed to psychological damage and resulted in a reduced sense of authenticity of self. Unsurprisingly, intrapersonal disruption was detrimental in other ways too.

"It was trying to fit in to societal... and my family's, expectations and also because I knew it's easier, it's easier, if you're not gay" (Interview Participant)

"We certainly wouldn't be holding hands or showing any affection towards each other. You just learned to adapt, and you learn to keep secrets. You learn to have a special language" (Interview Participant)

"We decided to get married so that nobody could even ever question us ever again – we got married in a registry office... You know it was a funny thing to do but we felt safe" (Interview Participant)

Life was viewed as heteronormative in the Armed Forces prior to 2000 and LGBT+ sexual orientation was viewed as a contradiction to this. Consequently, many survey respondents discussed consciously choosing to live a heterosexual life in line with what they felt was expected of them, adapting their behaviour and being cautious in social situations. This was also seen with some of the interview participants.

"Having girlfriends and being 'normal heterosexual' every day" (Survey Respondent)

"I hid it - quite effectively as it happens. I identified and lived as normal a male life as anyone else - I married and had a family and joined in most of my crew's socialising events, although at times, especially when on detachments, I spent time alone rather than join in on occasions" (Survey Respondent)

"I remained very cautious throughout my naval career - until my last 4 years of service I never allowed myself to have any gay friends, let alone a regular partner or boyfriend. I had to live a Jekyll & Hyde existence and, worse than that, I often had to lie including during Positive Vetting interviews which I disliked intensely - it was an insult to my integrity that I could not avoid" (Survey Respondent)

Due to this normalisation of a heteronormative life, participants blamed themselves for being 'caught' and not hiding their sexual orientation or gender identity. There were a number of survey respondents that used language such as 'wasn't careful', 'let slip', and 'broke my rules'.

"The Petty officer who supervised my training had been discharged for being a lesbian. She was one of a large number caught up in the same sweep. It was a shock to hear how many were caught. When I did finally fall for a woman I worked with I knew that it was the right path for me, I wasn't careful and was found out within a few weeks and made to resign my commission" (Survey Respondent)

"I had let slip about my sexuality to some younger colleagues who kept it to themselves, unfortunately one of them said something in front of a SNCO of the same rank as me on the opposite shift from me. He told the Warrant Officer who interviewed me. I came clean and admitted that I was gay. The process was administrative, 99% of my colleagues did not care about my sexuality, but my WO was obliged to pass it up the chain" (Survey Respondent)

"I broke my 'rules' 4 years before I left by actually arranging to see someone more than once - and he became, at the age of 33 for me, my first partner" (Survey Respondent)

3.1.2.3 Constant Vigilance: Heightened Stress and Anxiety

The need to always be on alert for fear of being reported or 'found out' resulted in constant vigilance. The resultant heightened state of stress was caused by attempts to hide from constant danger and behaving in a way that would divert attention.

"There was always a fear of being found out. It definitely affected me psychologically, that I was different and unclean. This impacted on leadership, and I found myself more of a 'behind the scenes' person rather than out front and leading type individual" (Survey respondent)

The tactic of constant vigilance and the need for increased state of alertness resulted in an extreme sensitivity to potential hidden danger, either from other people or the environment. Not only did the need to be alert compromise integrity it led to feelings of rejection. This lack of acceptance and not being able to converse with others on 'equal grounds' meant that vigilance was a defensive coping mechanism that was repeatedly and continually used in everyday life.

"This hidden culture that you just... it was like you were living this double life and that, you had to be careful who you told and just keep things under cover really" (Interview Participant)

"I wasn't sure of my sexuality but after realising I was gay, I felt I was living under constant supervision, terrified anyone would find out" (Survey Respondent)

"Those in charge often told stories of abuse and dishonourable discharge. Job insecurity daily. Hiding identities. Regular questioning and mocking" (Survey Respondent)

The prevailing prejudice resulted in a constant preoccupation with hiding and secrecy, vigilance regarding their behaviour and what they talked about. This left a constant state of fear and heightened anxiety.

"You were always lying, always on the edge I suppose" (Interview Participant)

"You had to be really clever and on the edge of always being prepared to explain yourself in some way" (Interview Participant)

"I was very careful in what I said, even though in my branch, there was not much homophobia. It was known that the MP's were on the lookout. So was quite frightening in some ways" (Survey Respondent)

"An almost permanent fear/terror of being "found-out" and brought to face some sort of criminal action under Armed Forces legislation" (Survey Respondent)

"Awful. Walking on eggshells. Looking over my shoulder all the time. I couldn't relax and was scared to give away too much about myself. I felt I was having to be evasive and found this difficult to engage with colleagues fully" (Survey Respondent)

"Had to hide everything, diary's, address books, photographs. Had to watch what you said to people, how you acted around people" (Survey Respondent)

"You owe, you invent non-existent social life and non-existent girlfriend. Your more worried about what investigators might find under your bed than what the IRA might have planted under your car" (Survey Respondent)

The constant state of lying and feeling as though they were living 'on the edge' was a finding from interview participants and survey respondents. The majority of survey respondents, 87.9%, agreed or strongly agreed with this (see Figure 15).

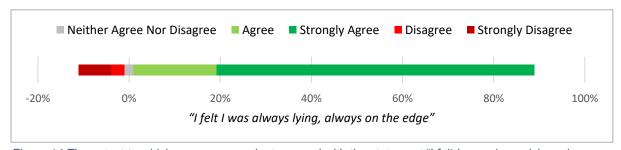


Figure 14 The extent to which survey respondents agreed with the statement "I felt I was always lying, always on the edge"

As discussed in 3.1.1.3 Sacrifice, leading a double life was something that was frequently referenced by interview participants and survey respondents. The energy to maintain a 'double life' was immense, this was incredibly stressful largely because of the threat that was ever-present. Specifically, the ever-present threat of exposure that would result in being categorised as a member of the LGBT+ community against their will:

"Lonely and living a double life. Always keeping my private life separate and never sharing private information. Constantly on my guard and wary of letting others guess" (Survey Respondent)

"One was hyper aware of having to conform. To avoid letting slip any indication of one's sexuality. There was an element of fear every day. Although that being the norm it becomes acceptable" (Survey Respondent)

"Awful. Walking on eggshells. Looking over my shoulder all the time. I couldn't relax and was scared to give away too much about myself. I felt I was having to be evasive and found this difficult to engage with colleagues fully" (Survey Respondent)

"Difficult, leading a double life, always looking over my shoulder, paranoid, always watching what you say" (Survey Respondent)

"I was having to live a double life, sometimes triple life. What I mean by that is that when I was in the (name of service) trying to be someone I am not because society said this is what you are supposed to be but then coming back to (anon) and then living a completely different life again ... it was literally living sort of on a knife edge" (Interview Participant)

Living a double life and needing to be careful was also experienced by 91% of survey respondents who agree or strongly agreed with the statement 'I felt I was living a double life and had to be careful who I told, keeping things under cover' (see Figure 15).

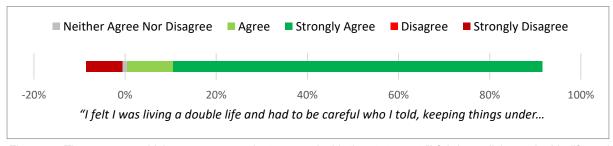


Figure 15 The extent to which survey respondents agreed with the statement "I felt I was living a double life and had to be careful who I told, keeping things under cover"

3.1.3 Aftermath: Barriers to Help Seeking

Understanding the barriers to help-seeking is an important step towards facilitating early access to support, including health and social care services, and improving psychological well-being. Table 3 denotes responses to the survey question that asked whether respondents had looked for support before, during and after service. They were more likely to have looked for support after serving in the Armed Forces than before or during.

Table 3 Survey responses to looking for support before, during and after service

	Yes	No
Before Service	4.3%	95.7%
During Service	11.6%	88.4%
After Service	43.9%	56.1%

Furthermore, 56.3% of LGBT+ veterans who did seek help and received support felt that it was helpful but 81.3% felt that it was just too difficult to find the support they needed and found it too difficult ask for help.

The challenges that LGBT+ veterans faced were on a personal and systemic level, preventing them from getting the support they needed. Personal barriers included perception of self and

the prejudice. The systematic barriers related to the way in which services are designed and delivered that may result in them being less accessible and inclusive for LGBT+ veterans. The fear of asking for help was rooted in significant experiences of discrimination and rejection, fear, and shame.

3.3.1.1 Fear and Shame

Part of the reason participants and respondents often felt unable to access support was the feeling that there was no one to turn to who would understand the lived experience of serving during the ban or being unable to identify as LGBT+. The resultant fear and shame of revealing gender identity in this unhealthy working environment left participants feeling socially and emotionally fearful and ashamed.

"There were only a few people that I felt really close to in there, but I would never disclose anything, never ever disclose anything to them. As close as I was, you know, I just didn't feel confident enough to be able to have that conversation" (Interview Participant)

"I hadn't declared it to them, and you know, I couldn't say anything. I couldn't go back home" (Interview Participant)

"I'd been made to feel ashamed of who I was, I had zero confidence and no selfesteem all of this and much more made it difficult to ask for help" (Survey Respondent)

Participants felt that it would be more acceptable to take drugs than to admit to being gay and found it too difficult to leave the fear, shame, and related distress behind once they were discharged from the military.

"Taking drugs is more acceptable than being gay, you know. It's almost like it's more acceptable to get kicked out for taking drugs then it is for being gay" (Interview Participant)

"How would I be received, and I don't know and as there's pretty much zero confidence at the best of times. No, I am not sure I want to put myself through that" (Interview Participant)

"The thing that I found really hard and again it was a cause of great shame for us, going for jobs. I could always feel myself sweating and face going but I can always remember myself sweating and thinking, shit what do I say? Eventually I learned how to lie. I'd say, oh done my 6 years and I decided I didn't want to stay in" (Interview Participant)

"I doctored my discharge papers, because that was the other thing, you know, I had had all good reports and I'd had excellent on my report and I'd had 97% or something like that, but when they discharged me, they reduced that to fair and 60%" (Interview Participant)

The fear and shame extended to life after serving in the Armed Forces. 70.3% of survey respondents agreed that their dismissal from the Armed Forces affected their relationships

with their family, 69.6% agreed that their dismissal affected their relationships with their friends. For many whose friends and family were unaware of their LGBT+ identity, the fear of them finding out was overwhelming and exacerbated the difficulties they already felt in looking for support.

"Didn't want family and friends to find out about my sexuality" (Survey Respondent)

"Stiff upper lip inbred into us I was broken inside but getting through days wearing a mask. I've never confronted the damage it had done for almost 40 years" (Survey Respondent)

"There was many people I didn't tell really. I just kept it hidden; it was just inner shame that I carried internally for so many years" (Interview Participant)

"I've just sort of felt this inner shame and I just can't get rid of it" (Interview Participant)

"I felt ashamed and unable to ask for support. Ashamed for being discharged and ashamed for being gay" (Survey Respondent)

3.3.1.2 Perceptions and Experiences of Accessing Support

The real possibility of attempting to access services and pathways for support and being faced with misunderstanding and worry about discrimination led to vulnerability, characterised by a feeling that there was nowhere to go and no one to turn to.

"Feeling all too often that there was nobody I could go to. Nobody who would understand it. Nobody who would get where I was coming from." (Interview Participant)

"I felt I couldn't talk to anyone, a lot less understanding and support around then" (Survey Respondent)

"There's nobody I can go to. Just nobody, completely isolated" (Participant Interview)

"I was not aware of any support being available to me. I felt like a criminal" (Survey Respondent)

This was further supported by quantitative findings where, 84% of survey respondents agreed or strongly agreed with the statement regarding not feeling there was anyone they could go to or who would understand their experiences (see Figure 16).

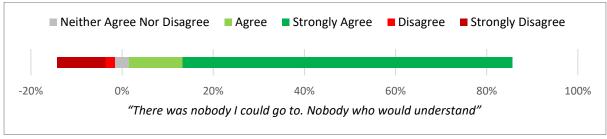


Figure 16 The extent to which survey respondents agreed with the statement "There was nobody I could go to. Nobody who would understand"

Participants described how they felt unable to seek support as it was fraught with difficultly, both during service and after discharge. As a result of negative experience and perceptions of mistreatment, there was an understandable reluctance to access support. This resulted in some participants feeling like they just had to get on with it alone. Others felt frustrated about the extent to which their mental health was adversely affected and that this was not recognised.

"You just lived with that sort of discrimination, you just got on with it, you know, played the game" (Interview Participant)

"Most people associate PTSD and the military with bombs, bullets, and everything else that goes with it, because of what happened to me I have a diagnosis of PTSD" (Interview Participant)

Trust in the organisation, service provider or people they would be interacting with was key to accessing support. For many participants this trust simply did not exist. Fears around the divulgence of their veteran status and the lack of discretion were also a barrier:

"Between my 'encounter' with my parents aged 5, and my approach to Stonewall over 30 years later, I had hidden who I was because I didn't know who to trust or what support was available. Such information wasn't as easily accessible then as it is now. There were no computers or digital databases, there were no open forums, role models, visible support groups, and even if a support group existed, I didn't trust that they would keep my military ID secret. Getting it wrong just once, was 'game over'. And for me that meant losing my family, a price that was far too high to pay then, one that I wasn't prepared to risk" (Survey Respondent)

There was also a reluctance from some to access any support that fell under the umbrella term of 'veteran specific' or support for Armed Forces due to how they perceived they would be treated. This was largely due to their treatment and experiences in the Armed forces and serving during the ban.

"I've never got any help from the army. I didn't want it, because of the way they treated me, I didn't want any more people looking at me, you know, and giving me that shame again" (Interview Participant)

"I've never sought any help from any veterans' groups, any army support groups, because I thought, as soon as I go there, they're just going to point the finger... judge me and make me feel guilty for being who I am and what I am" (Interview Participant)

"I knew that I couldn't go to any of the veteran's charities, that was quite apparent because the attitude at the time was, (a) you've been thrown out, (b) you were a faggot" (Interview Participant)

"Those people that are veterans, lots of them still have that homophobic mindset. You know, when you come into an Armed Forces Breakfast Club as a gay veteran, you're still having to deal with that. They call it banter" (Interview Participant

"I had no information as to what was available, and I didn't feel I could trust the Veteran community" (Survey Respondent)

For those participants who did access support their negative experiences led to a sense of isolation and low self-esteem:

"I was vilified. I was treated like a criminal" (Interview Participant)

"I mean I was like a social leper" (Interview Participant)

"I was made to feel crap and unworthy" (Survey Respondent)

Negative experiences of accessing support and feeling unable to ask for help compounded feelings of isolation and confirmed assumptions that there was no-where to go for help. It also reinforced and heightened existing fears of being misunderstood and the risk of being subject to further prejudice and discrimination:

"I did go to my GP and said, I think I do want some... they called it psychosexual counselling at the time. She just looked, this woman looked at me and said, oh I think you've already made up your mind. She said, well look at how you're dressed. She had taken a look at me and the way I was appearing and because I wasn't all girly and made up with loads of jewellery and you know, nails and all the rest of it, painted long nails. She's made a value judgement at me by looking at how I dressed" (Interview Participant)

"The words that that psychiatrist had said to me, you know, you'll never get a job, your parents will be ashamed... disgusting and all that" (Interview Participant)

"The GP at my local surgery was ex-army and expected me to carry on taking orders and 'buck up' and had no sympathy whatsoever. When I tried in past 2 years to seek help, I was told by one NHS service that I did not qualify or was not suitable, they did not sign post me anywhere else. I have also been on waiting lists that are over two years long and still not seen anyone. I now have a strong mis trust of authority and the services out there that turned me away. It makes me reluctant to try any new agency" (Survey Respondent)

Unsurprisingly, the negative experiences described by participants confirmed the real and perceived lack of understanding and the impact of being made to feel ashamed and misunderstood. The prejudice and discrimination extended to the attitude of clinicians:

"I was taken to an army psychiatrist who said I couldn't possibly be a transgender person, woman. I was not effeminate. I was not, I didn't look anything like the stereotype. I couldn't possibly be that. I was just trying it on to get, to cover up for being gay" (Interview Participant)

"I was sent to see a psychiatrist on a military base to see whether I was making it up, whether I was gay or not. I was questioned and the questions they asked were just absolutely vulgar and disgusting. They talked to me like I was just irrelevant. It was just awful and of course, you know, that made me feel quite ashamed to be gay" (Interview Participant)

"Because to the attitude from the couple of people I contacted it was apparent that I was on my own. I was a ship without a rudder" (Survey Respondent)

3.3.1.3 Lack of Appropriate Support

Phase Two survey respondents were asked to what extent they felt that their dismissal from the Armed Forces, due to being LGBT+, affected a number of factors (see Figure 17). The respondents felt that their dismissal from the Armed Forces had a large or great effect on their finances (74.5%), employment/careers (64.8%), and accommodation (56.3%). This reinforces the results from Phase 1 that also highlighted the lack of appropriate support.

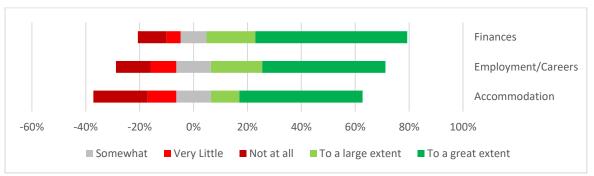


Figure 17 The extent to which survey respondents felt their dismissal from the Armed Forces affected their finances, employment/careers and accommodation

Immediate/sudden loss of structure from the military life to civilian life created further difficulties in accessing support. Participant felt that they did not know where to turn and had no knowledge of support available following transition.

"The structure of the military really helps you to operate. Once that's taken away and you're trying to cope out here without that structure, it's just incredible, it's so difficult to do" (Interview Participant)

"I signed up at 15 ¾. I'd become, even just within those 6 years, institutionalised" ((Interview Participant)

"After being 'thrown out' my whole world had changed!... it was like leaving school at the age of 25! I didn't know how to do anything from going to the doctors (I stood in front of him until he told me I could sit down!) to opening a bank account... I just didn't know how to do any of 'normal life tasks'" (Survey Respondent)

"I was given no support. And I just had to find your own feet...There's no, you know sort of like debriefing, you're sort of supposed to get on with it, you know they had no responsibility to me, I'm just there and get on with it" (Interview Participant)

"Didn't even know where to start. I didn't think any of the military charities or organisations would help. I didn't know where to turn in the civilian world either" (Survey Respondent)

It was felt the support that is provided traditionally as part of resettlement was not afforded to LGBT+ veterans:

"Not only no financial package, but no other sort of guidance" (Interview Participant)

"The thing is, I think if I'd have given, if I'd done my 18 months' notice or if I was coming out, you get your 18 months, with that you also get your resettlement" (Interview Participant)

"Other people, who had done, you know, served however many years would have some resettlement, you know, guidance as to what to do, how to do it, what things are out there and whatever. Whereas because I was thrown out and thrown out for that reason, there was nothing" (Interview Participant)

"If everything had been equal and I had finished my time, I would have been given a rehabilitation settlement. I would have been given some extra money for some training for civilian life" (Interview Participant)

Participants described a sense of feeling that there was no help available through service provision and many struggled significantly as a result.

"It didn't exist, and didn't exist for 30 years and still doesn't really exist otherwise there would be no need for surveys and FWP" (Survey Respondent)

"I didn't know who I could safely go to without feeling even worse. I had no idea about the benefits system or how to get help" (Survey Respondent)

"I served during the dark ages - pre-2000. There was no support. Even in the post military years there was no support for gay veterans" (Survey Respondent)

"There was very little support available for trans folk in those days" (Survey Respondent)

Responses from those that were able to access support services, focussed on the lack of understanding these services had about LGBT+ individuals or veterans, never mind LGBT+ veterans. These survey respondents also experienced homophobia.

"NHS did not understand, and some were homophobic" (Survey Respondent)

"Some in the NHS were homophobic and also believed the ban should be in place" (Survey Respondent)

"People don't understand that you can be intersex and Trans due to the condition" (Survey Respondent)

As well as being unable to access appropriate support, some LGBT+ veterans felt that they could not turn to their family either:

"Didn't know where to turn. My father didn't speak to me for 2 years so just had my mum to talk too" (Survey Respondent)

"He said to me, it's a disease and it can be cured and those were his exact words" (Interview Participant)

A number of participants specifically referenced Fighting With Pride and Rank Outsiders as turning points in seeking and receiving support:

"Before 'FWP' 'Fighting With Pride' there was nothing for anyone who is part of the LGBTQI+ community - especially a transgender Veteran" (Survey Respondent)

"I didn't identify myself as a veteran and I thought, well I got kicked out, so I don't qualify for anything. It's only just with, like Fighting with Pride that I can actually start to maybe look at other things" (Interview Participant)

"Put very simply, there was no support - except from Rank Outsiders which, for the first time in my life, provided an opportunity to meet others in a similar situation to myself" (Survey Respondent)

When able to connect with the LGBT+ community, particularly with those who had served under the ban, it was found to be a positive experience. Some participants felt that this counteracted the general poor understanding of the diversity of the LGBT+ community and the impact of serving in the Armed Forces under the ban:

"You felt so isolated for so long, just sort of like being in touch with other veterans that, not necessarily definitely had a similar experience, but although that does help greatly, but just to sort of get back into that sort of military family and have that camaraderie and not feel so isolated" (Interview Participant)

"That accelerated everything, because it finally felt, I knew some gay people" (Interview Participant)

"Talking to other female veterans in Snowdonia and hearing their stories, it sort of really helped and we gelled so quickly, and we're sort of going to be lifelong friends and it's really helped my self-esteem and also helped my confidence" (Interview Participant)

Connecting with peers was a positive experience and provided social connection. Of the survey respondents 58.3% said they connected with others through organisations or charities. Furthermore, 40.6% felt they would benefit from accessing support now.

3.2 Prevalence of Social Isolation and Loneliness

To further explore the prevalence of social isolation and loneliness that emerged in Phase One, some survey questions in Phase Two specifically focused on the nature and extent of both. As discussed in 2.5 Data Analysis, four typologies of loneliness and social isolation were created based on survey responses: loneliness/isolation spectrum: neither lonely nor isolated, lonely but not isolated, isolated but not lonely, and both lonely and isolated (see Figure 18).

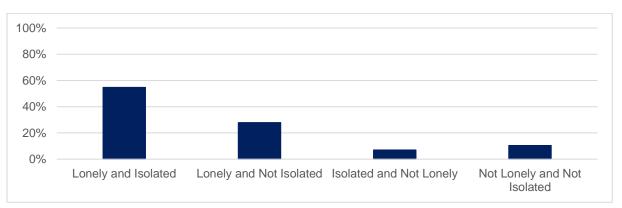


Figure 18 Typologies of social isolation and loneliness of Phase Two participants

Over half of the survey respondents (54.7%) reported being both lonely and socially isolated. More specifically, 84.4% of survey respondents reported being lonely and 62.2% of survey respondents reports being socially isolated. More importantly, only 10.5% of survey respondents did not report feeling lonely or socially isolated.

It is clear from the textual responses throughout the project that there is evidence of social isolation and loneliness in the LGBT+ veteran population. The percentages discussed above support this prevalence. The experience of social isolation and loneliness appear to have occurred as early as during service, with many textual responses highlighting being isolated from their colleagues by choice or force and not feeling as though they had anyone to turn to. This in turn lead to further experiences of social isolation and loneliness upon dismissal from the Armed Forces. Here they experienced loss across many aspects of their lives and were left lonely with no connections to the previous stable community. A few participants specifically discussed their experience of social isolation and loneliness:

"For much of my life in the Armed Forces I was intensely lonely" (Survey Respondent)

"I didn't recognise myself at times. I had created a false life based on lies. I struggled with anxiety and depression at times. At sea I felt so isolated and alone, often withdrawing to any quiet place I could find" (Survey Respondent)

"I do remember feeling incredibly lonely at times, but I didn't see that as being particularly unusual and we kind of, I think we never even discussed it either, you know, my generation just got on with it really. You know we weren't supposed to talk about loneliness or anything like that" (Interview Participant)

"I felt alone, isolated, lonely, sad, threatened and an outcast" (Survey Respondent)

"At that point I just felt completely alone. I didn't know anyone else who'd been through this" (Interview Participant)



Photo by Eduardo Pastor on Unsplash

4. Discussion

The aim of this study was to examine the personal impact of serving in the UK Armed Forces under the ban upon LGBT+ veterans. Phase One focused on the personal impact by facilitating individual participants to tell their story and Phase Two involved the distribution of a survey to disseminate to a wider pool of participants. Both phases of this research study considered the health and well-being of LGBT+ veterans, seeking to understand the risks associated with becoming lonely and socially isolated. Having a better understanding of individual experiences of serving under 'the ban' provides an evidence base for shaping effective service provision and community-based support. Providers of health and social care and support services should be aware of the impact of the ban upon those who served in the Armed Forces prior to 2000. It is evident that this understanding, together with strategies to promote well-being, striving to prevent social isolation and loneliness, is a step towards improving access to services and building meaningful connections with the LGBT+ veteran community.

4.1 Summary of Findings

The main findings from this study show that there are a number of themes that describe and explain the impact of serving under the ban (Figure 3 Triangulation of Phase One and Phase Two findings). The distinct themes of the *Emotional Impact, Changing to Adapt and Adapting to Change and Aftermath: Barriers to Help Seeking* provide an overarching description and summary of the depth and severity of the harm caused, told by the LGBT+ veterans who participated in Phase One and Phase Two of this study. Underpinning the key themes is the risk to health and well-being and the resultant social isolation and loneliness as a consequence of decades of employing camouflage techniques to blend into military life and expected cultural norms.

It became clear through Phase One and Phase Two of this research project that social cohesion is established through norms and practices of military life. But, because of the ban, this social connection was limited for LGBT+ serving personnel and resulted in the inability to develop self-identity and foster social relationships free from fear. This facilitated discrimination and harassment and caused emotional distress and mental ill health.

The findings suggest that the perspectives provided by the participants contextualise the concept of betrayal as a potential moral injury. Moral injury is seen as a fundamental betrayal of what is right by someone who holds legitimate authority in high-risk situations (Shay, 2014) and this conflict between human rights and discriminatory workplace practice translates well into the context of this research. Particularly considering the rule that allowed homosexuals

to be banned from serving in the Armed Forces was considered legitimate, with the principal argument being that the presence of homosexuals would be potentially damaging to operational effectiveness. For Shay (2014), the importance of re-shaping the balance between trust and mistrust for veterans who have, potentially, experienced moral injury is crucial. This will support the development, among formerly unconnected people, to gather social power where none existed before. This is an essential consideration for ensuring that the dignity of the LGBT+ veteran community is preserved and that a sense of community is nurtured (Bunkers, 2018).

This sense of betrayal arose as a direct result of emotional distress and long-lasting trauma that accumulated in feelings of violation, mistrust, and sacrifice of self. The concept of moral injury was initially developed and is often studied in the context of combat and has focused on the symptoms related to Post Traumatic Stress Disorder (PTSD) among the military veteran population (Nieuwsma et al., 2022). More recently, there is a growing understanding of exposure to trauma that is focused on the result of betrayal by trusted others, guilt, and shame. If not resolved, the resultant internal conflicts can exacerbate social issues such as isolation and mental ill health symptoms such as anxiety, depression, and substance misuse (Barnes, Hurley, & Taber, 2019).

Findings from this study demonstrate that changing to adapt to hostile and stressful environment required suppression of sexual orientation and gender identity to 'fit in' to the expected norms of the prevailing heterosexual environment of the Amred Forces before 2000. Subsequent experiences of rejection, hiding and concealment and constant vigilance resulted in a heightened state of stress and anxiety.

The behaviour change that resulted for the participants who took part in both Phase One and Phase Two of the research project was driven by the need to assimilate to normative ways of being, particularly heterosexual norms. For participants, the Armed Forces environment fostered conformity to normative institutional and culture values that were at odds with those who served as LGBT+ personnel. Conforming to the expected masculinities for men who served required projecting a 'straight' persona that ensured emotional, psychological and social survival. This acted as a mask to cover up vulnerability and to attain an accepted identity, legitimacy and to be socially accepted in the Armed Forces community(De Viggiani, 2012).

Adapting and changing as a way of protection against discrimination and ridicule and abuse for LGBT+ personnel in the Armed Forces was as a direct result of the unwillingness to embrace different sexual orientations or gender identities and expressions at an institutional

level. Pre-enlistment factors also contributed related to societal prejudice and a discriminatory attitude towards homosexuality in the United Kingdom (McCormack, 2013).

Identities are an important aspect of effective interactions. This was evident and particularly prevalent in the theme of *Adapting to Change and Changing to Adapt*. The themes that emerged across the data collected in both phases of the research project, suggest that identities are an important aspect of how effectively we are able to connect with others. But, when not fully open about one's true self, social interactions suffer leading to long-lasting harm, impacting on health and well-being.

The fear and shame that was described by the participants extended to their ability to seek help both with regard to perception and lived experience of accessing support. Findings from the study also revealed that there was a lack of appropriate support as well as a reluctance to reach out to service providers and military veteran specific support groups.

It is important to recognise that access to support services requires understanding of the way in which LGBT+ veterans consider their eligibility with regard to the degree of cultural alignment between the service provider and the individual service user (Redmond et al., 2015). The fear and shame was brought about by traumatic experiences of medical examinations, offensive questioning during interviews and being referred for psychiatric assessment for identifying as LGBT+. The result of this cumulative prejudice and abuse was an understandable reluctance to access veteran specific support in the days and years that followed after discharge from the Armed Forces. For some participants, the shame extended to the circumstances around their discharge and the further harm that this caused.

Despite the reluctant to seek help and the lack of knowledge of support services and difficulties with access, participants noted the importance of social networks and peer support forums. For those who accessed peer support groups (e.g., through, Fighting With Pride, Stonewall or Rank Outsiders), it was suggested that this peer support, particularly from those with lived experience of serving under the ban, was an integral part of their ability to share their stories. Access to this type of support was found to be both beneficial for receiving support and in giving support to others.

A focus on the way LGBT+ veterans considered their eligibility for accessing support may help to identify and address their needs in the future and recognise vulnerability and risk factors associated that lead to social isolation and loneliness. By attending to how vulnerabilities arise in relation to seeking access to support and recognising and acting on the challenges and barriers to access, the associated risks can be better understood with more appropriate provision made in the future.

4.2 Strengths and Limitations

A strength of this research project is the voices of the participants and the collaboration with Fighting With Pride. This peer-informed and lived experience study is the first academic, empirical research that aimed to explore lived experience of LGBT+ veterans affected by the ban in the United Kingdom.

The second phase of the research coincided with the *Call for Evidence* by the Defence Secretary in July 2022. Subsequently, the Independent Review was set up to provide the opportunity for the Government to better understand the lived experience of LGBT+ veterans who served prior to 2000. The research team were aware of the potential impact and resultant limitation that this could have had on participant recruitment for Phase Two survey completion. However, with the support of Fighting With Pride, 101 participants responded to the survey providing rich qualitative and quantitative data and subsequent evidence necessary to support the research aims and objectives.

4.3 Conclusions

This work advances knowledge on the lived experience of LGBT+ veterans by providing an evidence base for the development of effective service provision to enhance and improve the health and well-being of LGBT+ veterans. In addition to recognising the harm and cumulative vulnerability, brought about by discriminatory practice and abuse, there is a need to recognise that the risk of life-limiting social isolation and loneliness.

For some LGBT+ veterans, their basic needs have not been met because of their experiences, detailed, described and discussed in this report. Their hopes and aspirations were cut short by loss of their chosen career in the Armed Forces. The consequences of their discharge resulted in difficulties in accessing appropriate housing, employment, health and social care and a considered period of transition was denied. The loss of identity, overt sense of true self was profound. To fundamentally alter the way LGBT+ veterans think about their own sexuality and the part that serving in the Armed Forces played in the cause of this is, arguably, irreversible. Discussion and debate about recognition of the harms and making amends needs to acknowledge the life-changing impact and the possibility that no amount of recognition or recommendations will erase the life-long harm inflicted on LGBT+ veterans.

Undoubtedly, connecting with others is effective and provides a solution to build strength as an LGBT+ veteran community. The additional benefit includes visibility and recognition of the harms by the telling and re-telling of lived experience to raise awareness and, crucially, to make what happened visible. This certainly has the potential to reverse prejudice that some LGBT+ veterans still face as civilians.

4.4 Project Recommendations

Making Amends

Recommendations for recognising the benefits of visibility and raising awareness of the impact of the ban on LGBT+ veterans are aimed at attainment of accepted identity, legitimacy, and social acceptance. Including a public, far reaching, and meaningful apology that goes beyond the individual experience of those who served but extends to all who were also impacted, friends, family, significant others. It is recognised that 'making amends' will be addressed by the Independent Review.

Peer Support

Fighting With Pride is leading the way in helping to shape services for the future that enhance the health and well-being of the LGBT+ veteran community. The research findings support the view that, by creating mutually supportive networks, there is an opportunity to tackle social isolation and loneliness as well as enhance and improve health and well-being.

Public Archive

Creating visibility through storytelling and exposure to institutionalised prejudice has the potential to challenge stereotypes and facilitate community membership. There is now an opportunity for the lived experience of LGBT+ veterans to be preserved as part of a public archive. This would enable far-reaching access and acknowledge that making amends requires exposure as well as action.

Awareness Raising

To appropriately address the health and social care needs of LGBT+ veterans, every health and social care provider and military veteran support service must recognise the role of historical social stigma. It is crucial that training and awareness raising of the health and well-being needs of LGBT+ veterans are considered to improve both access and engagement in service provision and support.

Policy and Practice

It is recommended that health and social care policy and practice recognises that LGBT+ veterans are contributors to their own health and well-being and have unique needs. Health and social care providers need to actively consider the needs of this population, including planning, commissioning and provision of services. Understanding of the LGBT+ veterans experience, has the potential to provide considerable insight into the unacknowledged, underlying influences on their health and well-being.

Recommended Areas for Future Research

Offering an LGBT+ veteran friendly service is recommended as a visible way to acknowledge understanding and acknowledgement of the need to connect with LGBT+ veterans and support them. However, as this should be a long-term commitment, there must be a way of continuing to utilise evidence-based research to evaluate the effectiveness of LGBT+ friendly services in the future.

Further research is recommended regarding the long-term and far-reaching impact of the ban on individuals and significant others, including potential organisational moral injury.

It is also recommended that further research consider the sense of injustice and the missed opportunities as a consequence. The lives that have been lived during and after serving in the Armed Forces in the UK are not the lives that many participants hoped for.

4.5 Recommendations from LGBT+ Veterans

At the centre of the research project is the LGBT+ veterans' voice. As part of ensuring their experiences are shared and acknowledged, it was important to give them an opportunity to express their hopes and desires for addressing the consequences of the UK LGBT+ Armed Forces ban. Participants were asked to provide their recommendations for how amends can be made. These recommendations covered seven main areas and are explored below with supporting quotes.

Reinstate Pensions

"That's the big thing now. I'm short for my pension... Nothing can make a difference when I'm 60"

"Reinstatement of pensions. This would provide financial support to offer veterans a comfortable standard of living, security and to compensate for loss of pension if the ban had not taken place"

"Restoration of service pensions and reparation. Considering that people were forced to leave before their actual end of service and had no opportunity to sign an extension of service"

"Restoration of pensions for those who lost them - so many of us are now at or nearing pensionable age. Those who lost many years of contributions are now forced into poverty for something that happened a quarter of a century ago, that was unfair and punitive"

"Re-instatement of pension rights. This would compensate for the wrongful dismissal and allow for service veterans to live above the poverty line of a state pension which would respect those of us who have served our country"

Financial Compensation

"I would like a little bit of compensation because of what happened when I left, that mental decline, that lack of stimulation"

"Compensation for loss of earnings, resettlement grant, careers support and a lifetime if distress, homelessness and loss of my self-esteem"

"Reparation for the loss of career and humiliation/pain caused and for the fact I was unable to find a job for years afterwards"

"Financial recompense for earnings, pensions, and career prospects. Plus mental damage and damage to family and social networks"

"We do need compensation. Many of us were severely affected by our dismissal. We lost good jobs, careers and pensions. Some were able to forge new successful careers after it, but most could not. Many of us ended up in low paid jobs, unemployed, homeless, in prison, with addictions or even if we got employment, not able to settle down so we were not able to build up a secure career and pension"

"Compensation for those who suffered and endure the terrible impacts and consequences that the ban had, from being outed, interrogated, imprisoned, dismissed or pushed from service, without any kind of support or dignity, and left feeling ashamed, unemployable, and without a roof over their heads, purely because of who they loved"

Public Apology

"An Apology. For welcoming my service to my country but forbidding me from being myself. For making me live in fear of humiliation and loss, even though I served with distinction. For causing so much hurt and pain to those who served who weren't so lucky as me and who fell foul of a prejudice they did not deserve"

"Apology- It was unlawful to have the Ban"

"An apology for what happened before the lifting of the ban and one from the military for forgetting about us in the intervening years between the lifting of the ban and the 20th anniversary of the lifting of the ban"

"An immediate written, personal apology. (Not just a cover all by some Govt minister where not everyone will hear about it)"

"National level apology (HM King, Prime Minister, Sec of State for Defence, CDS). To try to correct the shame and stigma generated by what was an illegal ban"

"Government / King to issue a sincere apology for the treatment received by LGBT+ service personnel and families of those who are no longer living. This will go some way to giving people closure."

"Public individual apology from the monarchy and the Government. We served in HM Armed Forces no Government Forces. We pledged allegiance to the Queen. Therefore the apology should come from the King, Prime minister and Chief of the Armed Forces"

Amend Discharge Records, Return of Medals and Retired Titles and Pardons

"Amend our reason for discharge in our red books as it makes it look as if you weren't up to mustard and a full and frank apology"

"I would like Dismissed with Disgrace removed from my records"

"For those who lost them, the return of Commissions, Warrants, medals and Good Conduct Badges and to have the same rights accorded that other Veterans are accorded. In some instances, offences need to be expunged and Service certificates which have been defaced officially (Services No Longer Required) by having the top right hand corner cut off replaced"

"Medals returned and SNLR/Dishonourable discharge removed from red books"

"Reinstatement of medals, retired ranks etc. to bring individuals back to the veteran community and feel pride in their service"

"Wiping the criminal records of those who were convicted - carrying a criminal conviction for something that was no longer illegal in civilian life, has blighted so many lives. It's made it even harder for people to get jobs, housing, become volunteers and many other things"

"A full pardon. I want to be able to hold my head high and be proud of my service instead of hiding it"

Acknowledgment of the Ban and the Impact on LGBT+ Veterans

"Acknowledging to those affected that it was wrong. Because it is important to the individuals concerned to know that their service was appreciated and that it was curtailed through a lack of understanding"

"To recognise that the ban was wrong and that the method of dismissal was harmful and traumatic for many"

"Recognition of the appalling way in which LGBTQ+ were treated by the SIB. It needs to be acknowledged that it was not right and that we were not criminals and that the way we were treated was wrong"

"The military, the MOD and the government to openly admit to everyone how we were treated, what methods were used in gaining confessions and what consequences of the punishment meant. It's fine when ministers apologise on behalf of the establishment, but it has little foundation when the establishment remains silent"

"The public should be informed of the impact the ban had on so many men and women who served their country"

Visibility, Inclusion and Recognition of LGBT+ Service Personnel and Veterans

"Recognition that my service was not in vain, that I was fit to serve my country after all"

"Recognition of the work of LGBT+ Veterans. We did a great job!"

"Recognition that across the services, not enough attention was attributed to the contribution gay men made"

"To be recognised, I would have died for my country but that didn't matter"

"To feel part of the Royal Navy again. To be included in events etc. Not just as a token gesture. I think the Armed Forces could learn a lot from LGBTQ+ veterans so others do not have to suffer what we went through"

"Inclusion of LGBT+ veterans in all service celebrations and services" "More involvement and communication"

"Emphasis that being GAY is NOT a life-style choice. It is natural and not necessarily as complex as some people would believe"

Education and Training for Services Working with LGBT+

"Educate healthcare professionals about the impact of the ban so they understand the fear and trauma that has been experienced"

"Training in the NHS into the impact of the ban on ex gay military"

"National level support system for LGBT Veterans to address significant impact still being experienced by many veterans"

"Make military charities embrace inclusivity by an intense training programme delivered by a non-military organisation to educate them properly not token gestures to inclusivity delivered by exmilitary personnel who think they understand"

Peer Informed Research

The Northern Hub for Veterans and Military Families Research at Northumbria University prides itself in taking a peer-informed approach to all our studies. The LGBT+ veterans who were involved in this study, either as participants or part of the research team, played a critical role as a conduit for the voices of the community to be heard. The collaboration with Fighting With Pride ensured all aspects of the project were peer-reviewed, specifically the materials for participant recruitment, interviews, and final reports. For further material on the lived experience of LGBT+ veterans, please see Jones (2019) - Fighting With Pride: LGBTQ in the Armed Forces.

In addition, Christina (Chris) Dodds was an integral part of the team and has granted us permission to share her own personal story. Chris is a member of the Northern Hub research team and is a PhD candidate undertaking a qualitative study focused on the lived experiences of female veterans. Chris served for 24 years in the Queen Alexandra's Royal Army Nursing Corps (QARANC), retiring in 2010. At the time of her retirement, Chris was the Corps Regimental Sergeant Major for the QARANC and the RSM at the Royal Centre for Defence Medicine in Birmingham.

We would like to give a heart-felt thank you to Chris for sharing her personal story of the impact of 'the ban' and for supporting the research study. Thank you, Chris.



Caroline Paige and Christina Dodds during a visit from HRH The Princess Royal to the Northern Hub for Veterans and Military Families Research at Northumbria University

I knew the impact of being gay before I ever joined up, one of my oldest friends joined about a year before me. Joining up was all we ever wanted to do, so when she left, I was surprised. We met up a while afterwards and she told me she had been kicked out because she was a lesbian. She was devastated, one minute your career is all planned out full of potential, next you have no plan B.

I don't know what I identified with at this point, but I had a hidden deeply buried idea I was a lesbian. When you joined up you got asked lots of leading questions about boyfriends and I remember making a boyfriend up, to save the hassle of saying I was single and therefore fearful of how this made me look.

I took an approach to the ban, that put my military career first. I remember my friend feeling lost on what life would hold for her, I had all my balls on being successful in the military, therefore, going it straight.

Over the years the lie I lived seemed a small sacrifice, but, as the years dragged on, I found it harder. I knew many women who were almost openly gay, all ranks. In my most confused periods, I actually feared some of these women, feared they would know I was gay.

We all knew the change was coming, when it did, I had nothing to fear anymore, and since this time I have been mostly openly gay. But two situations post the ban stand out to me:

When I was first appointed as RSM, I felt no compulsion to tell my senior officers, after all, I wouldn't go in and say "Hi, I'm straight". After a period of time, one asked one of my senior Warrant Officers, who would not say, but he came straight to me and said someone had asked. The next day I went to see them and had the conversation. Not to me, but the others went mad with the Warrant Officer, he had just wanted to know, as he didn't want to be embarrassed.

The second time was when I went on a 6-month tour with the US, a British Officer asked me, when I arrived, if I would refrain from letting people know I was gay, as the US had a different policy at that time. Essentially, they didn't want me to cause an issue with the US troops. For 6 months I, once again, lived a lie, but this time it was hard work because I was in a relationship with a woman.

To be honest I do not think the US command would have cared, I just think it was UK officers over thinking and placing me under a lot of additional pressure.

References

- Ahuja, A., Ortega, S., Belkin, A., & Neira, P. M. (2019). Trans in the United States military: Fighting for change. *Journal of Gay & Lesbian Mental Health*, *23*(1), 3-26.
- Barnes, H. A., Hurley, R. A., & Taber, K. H. (2019). Moral injury and PTSD: Often co-occurring yet mechanistically different. *The Journal of neuropsychiatry and clinical neurosciences*, 31(2), A4-103.
- Belkin, A., & Evans, R. L. (2000). The Effects of Including Gay and Lesbian Soldiers in the British Armed Forces: Appraising the Evidence.
- Bower, J. (2000). (Im) possible women: Gender, sexuality and the British Army: University of London, University College London (United Kingdom).
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, *3*(2), 77-101.
- Bunkers, S. S. (2018). With a kiss: betrayal. Nursing Science Quarterly, 31(1), 6-10.
- Chen, J. A., Granato, H., Shipherd, J. C., Simpson, T., & Lehavot, K. (2017). A qualitative analysis of transgender veterans' lived experiences. *Psychology of Sexual Orientation and Gender Diversity*, *4*(1), 63.
- Cianni, V. (2012). Gays in the military: How America thanked me. *Journal of Gay & Lesbian Mental Health*, 16(4), 322-333.
- Cochran, B. N., Balsam, K., Flentje, A., Malte, C. A., & Simpson, T. (2013). Mental health characteristics of sexual minority veterans. *Journal of Homosexuality*, *60*(2-3), 419-435.
- Cole, M. (2017). Gay, Lesbian, And Bisexual Military Personnel in The Post Don't Ask, Don't Tell Era: An Interpretative Phenomenological Analysis. Our Lady of the Lake University,
- Curtis, A. F. (2014). Portraits of Resilience: Same-Sex Military Couples' Experience of Deployment. Virginia Tech,
- De Jong Gierveld, J., & Tilburg, T. V. (2006). A 6-item scale for overall, emotional, and social loneliness: Confirmatory tests on survey data. *Research on aging*, 28(5), 582-598.
- De Viggiani, N. (2012). Trying to be something you are not: Masculine performances within a prison setting. *Men and masculinities*, *15*(3), 271-291.
- Dean Sinclair, G. (2009). Homosexuality and the military: A review of the literature. *Journal of Homosexuality*, *56*(6), 701-718.
- Edel, F. (2015). Case law of the European Court of Human Rights relating to discrimination on grounds of sexual orientation or gender identity.
- Eleazer, J. R. (2019). "We've been here all along": the standpoint and collective resilience of transgender US service members.
- Fokkema, T., De Jong Gierveld, J., & Dykstra, P. A. (2012). Cross-national differences in older adult loneliness. *The Journal of psychology, 146*(1-2), 201-228.

- Gouliquer, L., Poulin, C., & Moore, J. (2018). A threat to Canadian national security: a lesbian soldier's story. *Qualitative research in psychology*, *15*(2-3), 323-335.
- Harries-Jenkins, G., & Dandeker, C. (1994). Sexual orientation and military service: The British case. In W. J. Scott & S. C. Stanley (Eds.), *Gays and lesbian in the military: Issues, concerns and contrasts* (pp. 191-204): Transaction Publishers.
- Heggie, J. K. F. (2003). *Uniform identity?: lesbians and the negotiations of gender & sexuality in the British Army since 1950.* University of York,
- Hillman, E. L. (2007). "Don't Ask, Don't Tell" Panel Four: Service Member Experiences. Duke Journal of Gender Law & Policy, 14, 1253.
- Hoffman, D., & Rowe, J. J. (2010). *Human rights in the UK: An introduction to the Human Rights Act 1998*: Pearson Education.
- Jones, C. (2019). Fighting with Pride: LGBTQ in the Armed Forces: Barnsley (UK): Pen and Sword.
- Levy, D. A., Parco, J. E., & Spears, S. (2015). Purple in a black and white world: Self-determination theory and transgender military service. *Journal of Basic and Applied Sciences*, *11*, 359-369.
- Litz, B. T., Stein, N., Delaney, E., Lebowitz, L., Nash, W. P., Silva, C., & Maguen, S. (2009). Moral injury and moral repair in war veterans: A preliminary model and intervention strategy. *Clinical Psychology Review, 29*(8), 695-706.
- Livingston, N. A., Berke, D. S., Ruben, M. A., Matza, A. R., & Shipherd, J. C. (2019). Experiences of trauma, discrimination, microaggressions, and minority stress among trauma-exposed LGBT veterans: Unexpected findings and unresolved service gaps. *Psychological Trauma: Theory, Research, Practice, and Policy, 11*(7), 695.
- Lubben, J., Blozik, E., Gillmann, G., Iliffe, S., von Renteln Kruse, W., Beck, J. C., & Stuck, A. E. (2006). Performance of an abbreviated version of the Lubben Social Network Scale among three European community-dwelling older adult populations. *The Gerontologist*, *46*(4), 503-513.
- Madu-Egu, C. (2013). The effects of the Don't Ask, Don't Tell policy on gay, lesbian and bisexual veterans' emotional well-being.
- Mark, K. M., McNamara, K. A., Gribble, R., Rhead, R., Sharp, M.-L., Stevelink, S. A., . . . Fear, N. T. (2019). The health and well-being of LGBTQ serving and ex-serving personnel: a narrative review. *International Review of Psychiatry*, 31(1), 75-94.
- McCormack, M. (2013). The declining significance of homophobia: Oxford University Press.
- McGill, G., Osborne, A., Giles-Haigh, R., Allen, S., Small, D., & McGlone, S. (2022). Progress Report Phase One: An exploratory study of the experiences of LGBT+ veterans affected by 'the ban'. Retrieved from https://researchportal.northumbria.ac.uk/en/publications/progress-report-phase-one-an-exploratory-study-of-the-experiences
- McNamara, K. A., Lucas, C. L., Goldbach, J. T., Holloway, I. W., & Castro, C. A. (2021). You don't want to be a candidate for punishment": A qualitative analysis of LGBT service member "outness. Sexuality Research and Social Policy, 18, 144-159.

- Ministry of Defence. (1994). Armed Forces Policy and Guidelines on Homosexuality.
- Ministry of Defence. (1996). Report of the Homosexuality Policy Assessment Team: Ministry of Defence.
- Ministry of Defence, & Cabinet Office. (2018). *Strategy for Our Veterans*. Retrieved from https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachm ent_data/file/755915/Strategy_for_our_Veterans_FINAL_08.11.18_WEB.pdf
- Moradi, B. (2009). Sexual orientation disclosure, concealment, harassment, and military cohesion: Perceptions of LGBT military veterans. *Military Psychology*, 21(4), 513-533.
- Mount, S. D., Steelman, S. M., & Hertlein, K. M. (2015). "I'm not sure I trust the system yet": Lesbian service member experiences with mental health care. *Military Psychology*, 27(2), 115-127.
- National Defense Research, I. (2010). RAND Survey of Gay, Lesbian, and Bisexual Military Personnel. In *Sexual Orientation and U.S. Military Personnel Policy* (pp. 255-274): RAND Corporation.
- Nieuwsma, J. A., O'Brien, E. C., Xu, H., Smigelsky, M. A., Workgroup, V. M., Program, H. R., & Meador, K. G. (2022). Patterns of potential moral injury in post-9/11 combat veterans and COVID-19 healthcare workers. *Journal of general internal medicine*, 37(8), 2033-2040.
- O'Cathain, A., Murphy, E., & Nicholl, J. (2010). Three techniques for integrating data in mixed methods studies. *Bmj*, *341*.
- Oakes, M. (2001). *The Armed Forces Bill. Bill 4 of 2000-2001*. Retrieved from https://researchbriefings.files.parliament.uk/documents/RP01-03/RP01-03.pdf
- Office for Veterans' Affairs. (2022). Veterans' Strategy Action Plan: 2022-2024. Retrieved from https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1103936/Veterans-Strategy-Action-Plan-2022-2024.pdf
- Paige, C., Dodds, C., & Jones, C. (2021). Mental health and well-being of LGBT+ Veterans dismissed from the British Armed Forces before January 2000. *Journal of Military, Veteran and Family Health, 7*(S1), 122-126.
- Parco, J. E., & Levy, D. A. (2013). Policy and paradox: Grounded theory at the moment of DADT repeal. *Journal of Homosexuality*, *60*(2-3), 356-380.
- Parco, J. E., Levy, D. A., & Spears, S. R. (2015). Transgender military personnel in the post-DADT repeal era: A phenomenological study. *Armed Forces & Society, 41*(2), 221-242.
- Poulin, C., Gouliquer, L., & Moore, J. (2009). Discharged for homosexuality from the Canadian military: Health implications for lesbians. *Feminism & Psychology, 19*(4), 496-516.
- Przegienda, K. (2018). Quality of Life for the United States Military Lesbian, Gay, Bisexual Service Member in Open Service. Adler School of Professional Psychology,

- Redmond, S., Wilcox, S. L., Campbell, S., Kim, A., Finney, K., Barr, K., & Hassan, A. M. (2015). A brief introduction to the military workplace culture. *Work*, *50*(1), 9-20.
- Reichert, A. D. (2010). Telling the open secret: Toward a new discourse with the US military's Don't Ask Don't Tell policy: Texas A&M University.
- Riseman, N. (2019). Hunting Gays and Lesbians in the Australian Defence Force, 1974–1992. *Journal of the History of Sexuality*, 28(3), 325-356.
- Robinson-Thomas, J. F. (2018). The Psychosocial Implications of Being Lesbian, Gay, and Bisexual Military Personnel in a Post Don't Ask, Don't Tell Era.
- Shay, J. (2014). Moral injury. Psychoanalytic Psychology, 31(2), 182.
- Smith, D. M. (2008). Active duty military personnel presenting for care at a gay men's health clinic. *Journal of Homosexuality*, *54*(3), 277-279.
- Spinks, S. L. (2015). Out of the closet, onto the battlefield: Life for gay servicemen before and after the repeal of Don't Ask, Don't Tell. Capella University,
- Suh, C. K. (2019). Reviewing a ban on transgender troops from an international perspective. *Sw. J. Int'l L.*, 25, 155.
- Townsend, P. (1963). Isolation, loneliness, and the hold on life. *The family life of old people: An inquiry in East London*, 188-205.
- Trivette, S. A. (2010). Secret handshakes and decoder rings: the queer space of Don't Ask/Don't Tell. Sexuality Research and Social Policy, 7, 214-228.
- Tunstall, J. (1966). Old and alone: A sociological study of old people: London: Routledge.
- Van Gilder, B. J. (2019). Sexual orientation stigmatization and identity work for gays, lesbians, and bisexuals in the US military. *Journal of Homosexuality, 66*(14), 1949-1973.
- Van Tilburg, T., & de Jong Gierveld, J. (1999). Reference standards for the loneliness scale. *Tijdschrift voor Gerontologie en Geriatrie, 30*(4), 158-163.
- Vaughn, J. N. (2014). Lived experiences of military lesbians who served during the" Don't Ask, Don't Tell" policy: Morgan State University.
- Walker, S. L. (2020). The Art of Being Unseen: A Phenomenological Study Exploring Alienation as Told through the Lived Experiences of LGBTQ US Military Service Members Who Served before and during the DADT Repeal: Drexel University.
- Wood, M. L. (2020). Sexual Orientation Disclosure and Workplace Climate in the US Military: Relation to Stress, Coping, and Job Satisfaction. The Chicago School of Professional Psychology,



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