

Transcript of Radio Ombudsman #23: Day Riley on being transgender, mental health and what Pride means to her

In a special edition to mark Pride month 2021, Rob Behrens talks to PHSO Facilities Analyst Day Riley. Day shares her personal experiences of the challenges of being trans and living with mental health issues. She also shares her thoughts on how we can all be better allies for the LGBT+ community and other minority groups and explains why Pride for her is all about activism.

Rob: Hello, and welcome to Radio Ombudsman in Lockdown. My special guest today is Day Riley, PHSO facilities analyst in Manchester. The podcast is a special edition because we have a special guest, of course, to mark Pride Month. And Day has been working for PHSO for ten years. She's keen to share her personal experience of being trans, and of living with post-traumatic stress disorder, depression, and anxiety, since she was a young adult, and the challenges of managing that.

We're lucky to have Day with us. Her personal experiences reflect those of some of the more vulnerable groups of people who are disproportionately impacted by poor public services, and who might want to bring complaints to us. We know that these can be challenging and distressing subjects to talk about. And so, we're particularly grateful to Day, for taking the time to share her experiences with us. Day, rightly believes that the best way to break down barriers is to have open discussion around these issues.

And we hope that this podcast will help to do this. We also hope it will raise awareness internally of the challenges of LGBTQ+ people and people living with mental health issues, that they have to face, and how we can all be better allies to support them, whether as colleagues, or complainants. So,

Day, welcome and thanks very much for joining us today on Radio Ombudsman.

Day: No, thank you for having me, Rob. It's lovely to have the opportunity to talk to people about these things that are really important to me.

Rob: That's good. So, the tradition on Radio Ombudsman is to begin by asking our guests to talk a bit about where they grew up, and their background, and the values they were instilled with from a young age. Could you tell us something about those things?

Day: Yeah, of course. I grew up in a town called Skelmersdale, it's one of the new towns that was built in the 1970s. Very working-class, and I don't know how much people know about the history of new towns. A lot of new towns didn't really succeed in the idea in the way that had been hoped. A lot of business didn't really come to there, so there was a lot of unemployment and a lot of poverty, especially in Skelmersdale, at the time, I was growing up.

Both my parents were Labour Councillors, and ardent socialists, so I was kind of brought up with socialist values from a very young age. The idea of everyone being equal, people being free to believe and think what they want to, and also, that public service is a normal part of life. It's something that you should do, and I think that has helped inspire me and leading me to working in the public sector, as something I really value.

And especially, those kind of values, aligned with the Ombudsman Service in that we provide a really important service to people who have been let down by the state, really, and that sense of justice is really important to me.

Rob: Okay. So, two questions come from that. First of all, when did you know that you wanted to go into public service? What was your trajectory coming to PHSO?

Day: I previously worked in customer service for a mail-order company, and actually, I first moved into the civil service by getting a job at the DWP. I worked for the Job Centre, taking telephone calls about employment and support allowance which was what replaced incapacity benefit. So, like the sick benefit.

So, moving into the Ombudsman service, was really important to me as part of trying to make change happen in things that I think were absolutely vital.

Rob: Okay, thank you. Now, I want to ask you a bit more about your personal experience of being transgender, but just before that, just tell me, did socialist values include issues around diversity when you were growing up?

Day: Yeah, but I guess, only in as much as where the battle lines were drawn in the 1980s, I suppose, which is when I was growing up in the early '90s. So, I was very aware of racial

equality and the injustices in South Africa, injustices in South America, and the feminist battle. Both my parents professed to be feminists and I've always grown up seeing women as equal to men, but I think in terms of LGBTQ stuff, and how the arguments have developed around racial justice and feminism, and things like that, it's been an ongoing education for me.

I've had to continue to learn as those... as I guess, the battle lines have changed. We've won some fights and need to win others.

Rob: Yeah, okay. So, could you tell us a bit about your personal experience?

Day: Yeah.

Rob: When did you begin to address the issues for yourself, personally?

Day: For my journey, it's a bit of a complex one, really. I think if you'd asked me when I was a young child, four or five, Day, do you ever think that you should have been a girl, I would have been able to tell you then, yes, definitely. It was something that was very present in my life. When you see cartoons on TV or watching sport, my dad was a big track and athletics fan, so I watched lots of track and field, I never imagined myself as the male participants.

I always imagined myself as the women, but I think because we don't really, at the time, have those conversations, being trans wasn't something that was prominent or suggested as something that you might be. I just internalised all of that and was just like, "Well, this is the body I've got. Everyone tells me I'm a boy, or as I grew up, I'm a man. So, I guess that's what I am." But the doubt and a very strong sense internally of being feminine, of not fitting in, of wanting to be part of the girls, was always there.

Rob: Yeah.

Day: But I think in terms of actually coming to terms and recognising that I needed to change my life was about four or five years ago. I came out to my wife four years ago, roughly around this time four years ago, but I'd been dealing with it, on my own, internally, for about maybe two years before that, thinking, "Why do I always see a woman's face when I look in the mirror? Why do I think of myself as feminine? What does this mean?" And reading in the press, and being able to see the visibility of trans people beginning to take place.

Hearing trans people's stories, I was able to recognise that this is very much my story too.

Rob: Thank you for that. What are the barriers and the difficulties that you faced in confronting this situation when it came to everyday situations, and at work?

Day:

I think one of the hardest things, and very early things, is that process of coming out. As you know, the facilities' roles with PHSO are very open and facing all of our colleagues. So, coming out, it wasn't something I could just do to my friends and family, and to my little team in the office. It was something that I knew I would have to tell, at the time, the 350 people who worked in our Manchester office, who dealt with me every day.

I have to deal with contractors, and the public, as well, and trying to get the building repaired, or we're dealing with visitors coming in. Often, I'm involved with that. So, there was a constant knowledge that I'm going to be out, and present, and open, and that things are going to happen that aren't necessarily be ideal for me. I know that I don't look as what most people would imagine a woman to look like. I don't sound what most people imagine women sound like.

So, I get misgendered quite a lot, which means that people will refer to me as he, or sir, or mister, or any of these kinds of things. Trans people do face prejudice and not necessarily intentionally, but there's a societal expectation of what masculinity and what femininity means, and trans people don't fit in with that. So, I'm always confounding people's expectations just by existing. That can be challenging because I don't have a choice in that.

It's not something I can turn on and off. This is my life and I have to live it. So, there's almost this constant need to come out. I come out constantly to people because people will misgender me and I have to say, "Oh, actually, no. I prefer to be called she, or I'm actually a woman." Any of these kinds of things. So, those are the little barriers that occupy, I guess, my daily life, living and working for PHSO.

Rob: Okay. So, just tell us a bit about how PHSO colleagues responded to this? I can remember when this happened four years ago, and I had a conversation with you, and I misgendered you, and you were very generous in your response to that, but what was it like, the majority of people, how did they respond to this?

Day: It was scary. (Laughter) I'm not going to lie. I was very worried about negative reactions, and thankfully, that wasn't the case at all. Everybody, from my immediate team, to the rest of my colleagues, has been really supportive, really understanding, and like you say, mistakes happen. You did misgender me, other colleagues misgender me, it happens. I feel like I can tell if someone's doing it with the intent to harm or if someone's just made a mistake.

I'm not foolish. I know, again, I know what I sound... I know that how I look and sound for most people ticks the box in their head that says man. So, that's going to happen and that's a challenge that I have to manage. But I've had colleagues speak up for me when other people have misgendered me, it's not always me saying, "Oh, actually, I'm actually this." I've had other colleagues say, "Oh, Day's this." I think we've done some amazing work.

Recently, we just launched a trans inclusion policy in the office which Paula Waite, equality and inclusion specialist shared with me, and that seems really great. We just also did a presentation which we've done before as well about trans issues and helping to raise awareness of the experience of trans people. So, I feel like I work for a very inclusive employer who understandably has sometimes had to learn

with me about what it's like to have a trans person in the office. And how we might have issues arising from that.

Rob: Thank you for that. So, we know that many people who are LGBTQ+ struggle with mental health issues due to the challenges that they face. You've done some work in this area, can you tell us a bit about that, please?

Day: Yeah, of course. Yeah, I think, first of all, just to quickly explain some of why those issues are faced. It's not just obviously the open prejudice that LGBTQ people can face. It's also, you're automatically out-sided by being LGBTQ. First of all, you have to learn yourself that you're not normal and that comes with a sense of perjorativeness a lot of the time. And so, you're internalising that, that you're not normal, there's something potentially wrong with you.

And you have to overcome cultural and religious biases potentially as well. So, you're automatically kind of prejudiced against yourself because of that, how you know you're not meeting society's expectations. So, that can be a really hard thing for LGBTQ+ people to deal with, and just to quickly give some kind of statistics on that. Gay and bisexual men are four times more likely to attempt suicide than the rest of the population.

88% of trans people experience depression. 84% have thoughts of suicide, and illegal drug use is four times more likely for gay and bisexual women than for heterosexual women. So, there are clearly issues within the LGBTQ community, and with mental health, that isn't present in people who aren't LGBTQ. I've had the mental problems, as I

say, for a very long time, from being a young adult, both relating to the challenges of being trans, but also, outside of that.

And so, I have kind of been in therapy and on medication for a large part of my adult life, and unfortunately, about two years ago, I got to the point where I was going to kill myself, and was hospitalised because of that, onto a secure mental health ward for a month. And I was placed on a female ward which was really important to me. I think if I'd been placed on a male ward because of my physicality, rather than my gender identity, that would have been really challenging for me.

But a lot of the staff there hadn't really dealt with a trans person before, didn't really know, in some ways, what to do with me, or they could obviously help me with my mental health that didn't relate to my trans-ness, but weren't really in a place to support me about my trans-related issues. And so, I talked with the psychology team at the hospital, that I wanted to help them to understand it more, and help train them to understand the issues relating to the challenges of being LGBTQ+.

But also, creating a space in the ward, and I go back on a voluntary basis, I try to go at least once every fortnight to run a group therapy session for people to talk about the issues of gender and sexuality, in general, and also, because we sometimes, obviously, there are LGBTQ+ people on the ward too. But also, to raise awareness and to help people who aren't in the community to understand some of the issues that we face, and how those barriers that affect people, LGBTQ in terms of that sense of normality, also impacts on most people who have just normal, in inverted commas, mental health problems.

The barriers are the same, and so, breaking them down is the same work, and helping people understand their similarities, I think, is a really important way of changing that, and changing people's views to see being LGBTQ+ as normal.

Rob: I mean, it's quite chastening to listen to that because when we go into hospital and we're in a serious situation, most people look to the clinicians and the experts to help them solve the problems, which of course, you did. But, at the same time, you had to help them understand what it is they were dealing with, and you may have been better placed than most of the clinicians to understand the issues. That's a very unique position to be in.

Day: Yeah, it was. I think that there is something to be said that for any person with a minority experience, you are almost forced to become an expert in your experience. You're constantly having to explain your people issues, wherever your people may be, you sometimes can be forced to become an advocate for whatever it is that your minority experience is. And that can be challenging, in itself, that's a burden in itself, that obviously isn't there for most people.

Rob: It says a lot about your strength of character that you've been able to handle that. But, I mean, how would you rate the National Health Service in providing the support and the treatment that was necessary to go through that kind of crisis?

Day: Ooh, that's a challenging question, because, on the one hand, I'm like the people I interacted with and obviously, I still work with the psychology team in delivering the group therapy sessions are really committed to helping people. All of my interactions with people providing mental health services for the NHS have been positive, on an individual basis. On an organisational basis, perhaps less so. I think, for both, in terms of trans healthcare and mental healthcare, waiting times for support are incredibly long.

As mentioned, I came out about four years ago, I only, six months ago, was able to access hormone treatment to support the kind of physical changes that I want to undergo, and only just had a letter back from one of the gender clinics to offer me access to the clinic. So, I've been on a waiting list for about three years. In terms of mental health, obviously, I'm sure lots of people have the experience of trying to self-refer for generic therapy, to access therapy for a period of depression or anxiety.

And those waiting lists can be months long. But if you have more complex issues, the waiting times are again, unimaginably long. I was discharged from the hospital ward in September 2019, and I said at the time, it was absolutely vital that I continue to receive care and support, otherwise, I was going to wind up back where I was. If you just push me out and don't offer me support to help change my life, my life isn't going to change, and I'm going to continue to feel depressed and suicidal and struggling with the complex PTSD issues that I've had.

I have my first appointment for therapy, based on that request, next week. So, almost two years later, and I think COVID has obviously, potentially, extended that delay somewhat, but to have had effectively no support from the

NHS for my mental health issues for almost two years after leaving hospital, is a profound failing, in my view. Fortunately, ironically, because of transitioning, my marriage ended, I needed to sell my house.

So, I had some funds and was able to fund private therapy for myself in the meantime, to enact some of those changes that I needed to make, to get back to not feeling suicidal all the time. But obviously, not everyone is fortunate enough to be in that position. There are just a lot of people who are waiting for support and treatment who aren't receiving it, and I think that's a real shame.

Rob: Thank you for that. I mean, it strikes me, and it's obvious from how you've described it, that you have all the advantages of being rigorous in your thinking, you understand the sector and how it operates, and you have a magnificent temperament. There are lots of people with mental health issues that don't have those advantages, who would be less able to cope with the situation you describe, which is horrendous anyway. So, that's very chastening, indeed.

What do you think we, as the Ombudsman Service, can do to make access to our services easier for people with mental health challenges?

Day: It's a difficult question, really. I think, for a lot of people, who struggle with their mental health, there's two issues, really. One, is something that affects me in the same way, in that you're already trying to just cope with everything that you have going on, or the struggles that you've got, the issues that you're trying to manage. And so, when things go wrong,

having the energy to make a complaint, and to fight for that complaint, and to go through it, as I'm sure our complainants and our colleagues here can understand, the challenges in negotiating a complaints process and being a strong advocate for yourself, is hard.

So, I haven't made a complaint about the length of time I've needed to wait for the therapy. I can also briefly say that while I was off work sick for a very long time with trying to recover from obviously the position I was in a couple of years ago, to the point that I no longer was... my sick pay with the office ran out which was fine. But in trying to make a claim for benefits, I made a claim, I never heard back from anyone. I didn't follow that up because I was just like, this is too much for me to deal with, right now.

A few months ago, I was like, okay, I feel like I can chase this up, but I didn't want to speak to someone on the phone, so I tracked down a very long-winded complex way of finding an email address, to sort of say that there's an email for people who had accessibility issues, and I emailed to say, "I made a claim. I've never heard anything about it. I find talking on the phone and being an advocate for this stuff, challenging and tiring. Please can you consider making an adjustment for me to communicate by email, and we can try and find out what happened to this claim?"

I've had no response to that. I, obviously, talked about my mental health issues in that as a barrier to why I might need a reasonable adjustment, and I haven't made a complaint about that because it's just a lot of energy that I don't really have. I'm trying to live and work, and manage my life as it is. So, that impetus and self-confidence to complain isn't there. The second issue I think is a matter of trust. A lot of people who have been through the mental health system in the UK

and again, the same for the trans healthcare system, don't have a lot of trust.

They have had negative experiences, and rightly or wrongly, I think the perception is that the Ombudsman is just another part of that system, and so trying to believe that the Ombudsman Service will provide what they need isn't always there. I think changing that, I think it is probably about having messages on our website about the support we can offer for people struggling with their mental health.

I think the work that we've obviously done, starting to publish our findings and all of that on the Ombudsman website is a really important step in allowing people to see that they can access justice here and that things will happen, and that we're not just another barrier who is going to say no, you don't count. Your thoughts and feelings aren't valid. I think a lot of it is just going to have to be, for now, at least, being very open that we understand the challenges that people will face with mental health, and that we're willing to support them.

And take into consideration the issues in terms of communication or speed of dealing with things that those issues might face, I guess.

Rob:

That's very interesting, thank you. It seems to me that I agree that the transparency of publishing cases online has great potential, to reach out to communities that we don't often reach. But we also need to continue to reach out in person, and the people that we deploy to do that have to be representative of the communities they're talking to. If that's not the case, then the trust that you're talking about won't easily be constructed.

So, we need to pay more attention to who we send out and what they say, as opposed to making just sure that there is a meeting. So, maybe, you have a role to play in that, in the future.

I would like to continue this conversation for at least another hour, but we don't have that luxury. This is Pride Month, what does Pride mean to you?

Day:

Pride is something that has a really strong meaning for me. I think the experience of growing up in a very political household, means that I kind of see everything through a political lens. So, Pride, I think for a lot of people, is a celebration, whereas I see it as an activism. It's a movement to change things. And so, I think I am proud of who I am. I take pride in being a trans woman and the challenges that brings. And I'm proud that I live in, thankfully, a country where I can do that where it's not against the law, where there is support available for me.

In a lot of countries around the world, it is illegal to be trans. It is illegal to be gay, and I think, that Pride, for me, is that fight. It is that fight to say, "I'm standing up against the oppression that we experience, both in the UK, but also beyond that." That informs how I choose to live my life now, as well. So, I am open about being a trans woman, and taking advantage of opportunities like this, because maybe somebody else who isn't able to be out, hears this, and says, "Being trans is something I can be, or being trans is something that's okay to be. Being gay is something that's okay to be."

And so, I want to be a role model, and that's how I see Pride, for me, as being, is being me, as strongly and as fiercely as I can be, to ensure that everybody else knows that I'm not

going away. That people like me aren't going away, and that we're normal, and that this is an okay thing to be.

Rob: I've got two final questions for you, Day. What you have described is magnificent and remarkable, but do you have any regrets about the way you handled this?

Day: Yeah, I do, I suppose. And I think it's reasonable. Coming out, and it's difficult to say it's a regret because I don't necessarily think that I couldn't not have transitioned. It was something that was absolutely essential for me, but it did lead to the breakdown of my marriage, which is obviously... and a big destabilisation of a person's life who I loved very much. It's been challenging for my friends and family to see the challenges I've experienced.

And for them to have to come to terms with understanding and accepting the person that they thought I was, isn't the person I was. So, it's not necessarily that I would say, "Oh, I wouldn't come out again." I wish that I'd known sooner. I wish that I'd been able to do something about it sooner. So, I had so much life built up that had to be destroyed as part of that process.

Rob: Thank you for that. My last question is, is what can all of us do- you've already spoken well about your colleagues in Manchester, in supporting you, but what can we all do to be better allies to support people who are trans, and those who are living with mental health issues, whether colleagues or complaints?

Day:

I think the idea of being an ally is something that's really important to me because I see myself as an ally for people with minority experiences that aren't mine. And it's something that I come to understand better over the last few years, really. It's not just being, well, I don't discriminate against people or I think it's fine to have whatever, to be LGBTQ+ or to have mental health issues. It's actually part of taking on the fight for those people, and taking on advocacy for those people.

So, I think it's really important to do things like this, to offer a space for LGBTQ+ people to talk about that or to talk about having poor mental health and being open, and not having to hide it away. And it's also about making sure that we listen to what people with that minority experience are saying, but also, taking that up when we're not there. So, you, obviously, in your position, are fortunate to have access to spaces that I don't have access to.

And hopefully, from you talking to me, and learning about the trans experience, or knowing about the trans experience, or the mental health challenges that people can face, can advocate for that when you're talking to people in parliament or to other ombudsman services, so you can ask them, how are you taken into account, people who have experienced mental health challenges. Do you have trans inclusion policies at your workplace? Because we do, and here's mine, and sharing that knowledge.

And obviously, also relieves some of the burden that I talked about before, about having to be an advocate for yourself and for your people. If I can turn you, and obviously, everyone else listening, into people who are going to

advocate for people with mental health challenges, or people with LGBTQ+ issues, then my fight is easier. My burden is lesser, because you're taking it up on my behalf.

You're using the energy that I don't have because I'm spending that on dealing with all the stuff, you're using some of that energy that you have to spare, to make my life easier. And that's what I think being an ally is, and can really have value in society.

Rob:

Thank you, Day. Thank you for sharing with us today. You've been frank, articulate, generous, wise, and you've put into context what it means to be a campaigner. And you've talked about issues on an international basis. I've just come back from the International Ombudsman Institute Annual World Conference, where the Polish Ombudsman is fighting against a state that is hostile to gay and lesbian people.

And this broadcast will be listened to by people in Poland and all over the world, and it will be considered one of the most important Radio Ombudsman conversations that we've had. So, we're very, very grateful to you for being so generous with your time, and articulate with your views. We're proud to have you as a colleague, and thank you, and this is Rob Behrens from Radio Ombudsman, saying, enjoy the day, and thanks, Day, for your time.