GMC Apology



My story - Dr Dan Saunders

I joined GLADD when I was still a medical student and have been a member since the GLADD inaugural AGM which was I April 1995. I'd only really come out to myself part-way through medical school having felt very uncertain during school years, despite going to quite a progressive comprehensive school, one which was saddled with the impact of Section 28. At the time the GMC and its approach to LGB people was still influential and pervasive, such that it seemed near-impossible to identify any fellow LGB medical students and connect with them.

Coming to my first GLADD meeting was therefore revelatory as I was welcomed and met colleagues who were clearly getting on successfully with their medical lives despite all that was going on around them. Some indeed were very senior and turned out to be fantastic role models, mentors and coaches in various ways – thank you – I think most of you know who you are! I also remember staying at Peter and Huw's lovely home and being taken out to "Heaven" by them after the GLADD meeting – revelatory as I was at medical school in the Midlands!

I think it is really important however to remember how some things were then in comparison to now. We met in secret in the early years, on a Saturday afternoon/evening, mainly in London, and often in members' homes rather than in public venues, as there remained quite a concern about being "found out" or "outed". Communication was mainly by paper newsletter which was posted in anonymous brown envelopes. The internet was just coming into existence and although some members had e-mail addresses it was not universal. The newsletter was called "GLADD Tidings" - think the name was probably come up with by Jolyon Oxley who edited it for many years. We were very fortunate indeed that Teck, David Harvey's partner, was a very good illustrator and captured so many events in images that we were able to include.

David was a huge inspiration to many and also had achieved many amazing things in his career including being he Royal Paediatrician. Such were the times then that even committee meetings were held in secret. We were invited to his and Teck's home for one but warned that we might have to step around some journalists from a red-top paper as they had "discovered" that the royal paediatrician is not only a gay man but "living in sin" with another man – and were trying to produce a Sunday papers exposé.

Even though laws were gradually changing, attitudes were not, sadly. We have always recognised the importance of education, training, and supporting junior members of GLADD. An early survey of medical school deans produced some notable responses including "We don't have *that* sort of person in our medical school and nor do we have any lesbian or gay people in our city, so we do not intend to include any of your "stuff" in our curriculum – I consider this matter closed".

We also organised our own survey into members' attitudes and experiences. All of this was done by post of course, surveys were returned (in brown envelopes) and I had to manually import all the information onto an Excel database and then produce some analysis. Some of the questions from that very first survey are still used today in the GLADD/BMA survey, the latest one from 2022 does show some improvement in our collective experiences as LGBTQ+ doctors, dentists, medical and dental students, but also shows there is more to be done!

I can recall going to meetings at the Department of Health in GLADD's earlier years where they cited their pride in their inclusivity of "ladies and coloured people in the NHS" and had not even thought to include other areas of equality that we would now consider protected characteristics.

GLADD has always been welcoming and inclusive of transgender members but perhaps not always explicitly so. This is consistent in fact with many LGB voluntary sector organisations who have more recently demonstrated an explicit shift towards trans friends and colleagues. Prior to this we explored the issue carefully and thoughtfully as we produced guidance to "Dignity at work for lesbian and gay doctors and dentists" – note the terminology. I was proud to support this work with Professor Zoe Playdon who pulled together a very broad, but expert, panel to generate the guidelines. We had a lot of discussion about whether or not the guidance needed to explicitly support trans colleagues but in context trans people had greater protection legally than LGB people at the time.

The guidelines were written well in advance of same sex couples legally having the right to marry (2014) or the Equality Act (2010) so up until that point, transgender people did in many ways have greater protection. Although our "GLADD Guidelines" might be considered old-fashioned now, they were contextually appropriate for the time in which they were generated; indeed they were I think probably ahead of their time. They carefully outlined practical and sensible steps and recommendations and were proactive in nature; so much so that when we presented the guidelines

to both the BMA and GMC, they were easily adopted by both organisations and I think set the tone for work that they have taken on (often in consultation with GLADD) subsequently.

Ten years ago I, and another member from GLADD in fact, were both nominated for an HSJ award as "Influential LGBT leaders in the NHS" – this perhaps not being very notable in itself but there had also been three NHS Chief Executives nominated – two of whom declined the nominations on advice from their Board that receiving such an award would be "career limiting". One wonders whether such advice would still be given today, but I fear it might be. There is however a very effective NHS Confederation LGBTQ+ senior leaders' group which does include some notable NHS Chief Execs and senior medical leaders, so hopefully there is a sustainable change in the tide.

For some, there may be questions about whether or not GLADD remains relevant in the 21st century. Many things in LGBTQ+ medical life are indeed better but we still have, I think, unique challenges and concerns. I've been fortunate in my career not to experience a huge amount of homophobia, although I have definitely had some career opportunities denied to me because of my sexual orientation – in some cases in hindsight not working for some organisations has turned out to be a blessing! GLADD continues to be called upon for its wisdom and expertise most notably and recently being the GMC apology to doctors struck off because of their sexual orientation. Turning full circle I have recently been to my first GLADD "regional social" for quite a few years – it remains joyous to connect with like-minded colleagues, but also saddening to learn that there indeed remains significant homo- and trans-phobia within healthcare and the NHS.

Given that UK society is not perhaps as tolerant and welcoming a place as it was 5-6 years ago, I'm hopeful that this short article will remind us all of the need to remain connected and support one another.