Annie Emery

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PARTICIPANT: Okay, so my name's Annie Emery. I consider myself to be an adopted Mancunian, I guess. I'm originally from Birmingham and I came up to Manchester in 2000, was when I first moved up here. When I finished university I went and worked in theatre, so that was my first role, and I worked at the Birmingham Rep Theatre for about five years and then I ended up going freelance and I worked with a theatre company up here in Manchester. So I was kind of thinking maybe I should move up and it just so happened that as I was thinking that one of my best mates said I've just bought a house in Salford. So I said, right, it's all falling into place, so I ended up moving up here in 2000 and I've been here ever since. I love it in Manchester, feel very adopted, very much like it's home, so it's great.

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INTERVIEWER: Brilliant, could you tell us a little bit about your upbringing in Birmingham, what it was like for you. Some people have talked a little bit about their first awareness of being different, their sexuality, that sort of thing.

PARTICIPANT: Yeah, of course. I grew up in a little suburban town really, in the north of Birmingham and didn't really have any reference for gay stuff at all really, so I wasn't really aware of anything gay or lesbian, anything like that. I guess I was always a huge tomboy as a child. I had a brother and a sister, older than me, twins actually, and I was much more interested in my brother's toys than my sisters, so very much wanted to be a boy really. Not trans, necessarily, but play with my brother's things. I very clearly remember my first realisation that I was possibly a bit different, was when I was watching Bugsy Malone and Jodie Foster plays Tallulah, and I was about the same age as she was in the film when I watched it. I just remember having a bit of a moment and thinking, oh hang on, what's this about, you know? I must have been maybe ten or eleven, something like that. I really struggled then, I think because of the place I lived, it was very conservative, it was very white middle-class really. As I said, I didn't have any reference, the only gay people that I was sort of aware of, one was Martina Navratilova, and in that time of course, this was early eighties, it was seen as a bad thing really, there was a lot of negativity, particularly around female tennis players, there wasn't a huge amount of role models really, anything like that. And of course gay men on television were Larry Grayson, or your John Inman, your sort of camp, unthreatening, presence on TV really. I had no awareness that I could be, that I even could go out with girls. So I kind of suppressed it and denied it for a very long time. I got very upset about it, I didn't really talk to anyone about it. I finally came out to myself when I was nineteen, so it took eight years of denying it all really, and then when I went to university I came out to myself, which was quite a painful experience looking back and it's incredible to think where I am now and I've worked in LGBT equality for fifteen years but back then it was, I found it very difficult. I came out at university, met my first girlfriend there and slowly throughout my twenties I grew to accept myself a bit more. Worked in theatre, of course, which is a very open place for being LGBT. When I moved up to Manchester I moved into a house with four gay men, so that was guite a full-on

party house really, back in the day when I could do that sort of thing! We had a great time, it was fantastic, we were out at the weekends in the village and this was the back-end of the nineties, the two thousands. I moved up properly in 2000 but I used to come for weekends. We had a brilliant time, young, free and single and having a brilliant time out on the scene. So by then I was much more comfortable with who I was. So it was a huge journey, I was very, I thought it was the worst thing in the world growing up. I just thought, how can I, I can never tell my parents, I can never be open, I'm going to have to marry a man and it just didn't, I didn't think it could be a path for me. So to get to the place where I was fully out to everybody, living in a gay household, got a job working in a gay organisation. If that sixteen-year old had been told this is where you're going to be, incredible really, having that difference, because I really struggled with it to start with.

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INTERVIEWER: It's quite a transformation.

PARTICIPANT: Yeah, looking back, because I didn't have any reference and I think I now work with a lot of young people and it's about not having that connection with other gay people and that's the one thing that the young people I work with say they find the most valuable, when they start other LGBT people and make connections and make friends because often in those families you do feel isolated or it's not talked about or it's taken as a joke, which I think it was in my generation, a lot of my family, it just wasn't seen as a real thing, it was a bit of a, like I say, it was your John Inmans and your Larry Graysons, it was all a bit of a laugh really. Thankfully it's really changed, I'm of the generation where when I first started going out, which was early nineties really, when I was at university, you'd go down the back of an alley and knock three times on a door. Someone would come and look through the window and say yeah, you're one of us, she can come in and then when, I was actually in Birmingham, on the scene in Birmingham, because I know in Manchester, with Mantos was the big, when it kicked off the village really, and they had the windows open. Didn't have any blinds on the windows and that was what happened in Mantos. When I was in Birmingham around that time and there was a cafe called the Angel Cafe Bar, they opened up and they had these huge plate glass windows that were floor to ceiling and I remember going out with my friend and we were like oh my god, they haven't got the blinds up. We're exposed! That was the feeling, that was the sense, that you were exposed to everybody and suddenly you weren't hidden away and that kind of added to the feeling of it being wrong somehow, you were secreted away somewhere, you weren't part of the world really, you were having to do things in secret and that was a lot of gay people that I've spoken to and my own experiences about that double life feeling. I came out to myself at nineteen, I didn't come out to my parents till I was twenty-three. So I had a good few years where I was going out with a girl and not sharing any of that with my family, so you do sort of get that sense of hiding stuff and I think that added, the fact that we were having to go to clubs that were hidden down dark alleys really added to that. So I do feel privileged in a way to have lived in a generation where we've seen so much change and it's so different now. The battles aren't won but it's a lot difference to my experience in the eighties as a young woman, as a teenager.

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INTERVIEWER: Could you talk about the eighties and the nineties, could you, do you remember the first time you heard about HIV, or anything sexual health related, but HIV might be the one-

PARTICIPANT: I mean it's probably not the going to come as a surprise that it was the adverts, a lot of people probably say that. I vividly remember the tombstones, John Hurt's voice, I can still, I've seen them since obviously doing training and all sorts of stuff around HIV. I do remember the... just terrified. That kind of added to the whole sense of fear around sex and it was such an unbelievable campaign to say you're going to die. This huge sort of tombstones rising up and John Hurt's gravitas voice. It was terrifying. Absolutely terrifying. I guess that was the point, to terrify people. But that doesn't work as we know, so that was my first understanding of HIV. I remember very well being at school and you mustn't share toilet seats, you mustn't drink out of the same can, you mustn't touch their hands, I remember all that very vividly. I remember Diana going to the wards and touching people and people being like, oh my god, what's she doing? That's really vivid all that kind of memory of the stigma and the isolation around people living with HIV. That being about AIDS or the AIDS, none of this kind of living with HIV. It was about AIDS, you never really heard about HIV, it was all about it being about AIDS. Seeing stuff on the television, particularly from the States, watching young men near to death, it was frightening time really, in the eighties around HIV and AIDS.

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INTERVIEWER: Could you tell me a little about how you first got involved in LGBT or sexual health related work?

PARTICIPANT: As I said, I worked in theatre for my first coming out of university, so for about ten years. Then I hit thirty and thought I need to get a proper job, stop living out of a suitcase. Actually one of the lads I was living with worked at the LGBT Foundation, it was the LGF back then, and a job had come up and he said I know you're looking, why don't you apply for this job. It was distribution so it was out driving a van around the North West and delivering our magazines but also our condoms and lube. At the time I was driving around, I'd been touring a hell of a lot, so I had the skills, I could drive and van and I know my way around the North West. I applied for the role and got it and that was my first foray into the work of the LGBT Foundation, my first foray into equality work, especially around sexual orientation and gender identity. I delivered the condoms, I went out all times of day and night, we were the first, it was myself and a colleague, we did it together, it was two women, and we were called the delivery dykes and we had t-shirts that said if you want it, we've got it, on the back of them. You wouldn't get away with it now would you? We headed off in our van and went all over the North West and we delivered, we used to have a magazine called Out North West and that was the first time it got taken out beyond Greater Manchester really, we developed a whole network as far as Cumbria and sort of down into Cheshire and Liverpool and Blackpool, and people were so welcoming, really wanted the information. We went to a lot of bars and clubs obviously, but also places like little B&Bs or gay centres or just places where people I knew there was a bit of a gay space really and when you went into deepest darkest

Cumbria, you sort of got a real sense of the potential isolation that people were feeling. So Out North West became a bit of a lifeline for people and it really opened up access to meeting others and finding out stuff and particularly stuff around campaign work and sexual health work and that sort of thing. Then delivering the condom and lube packs and I remember a really funny story actually, we used to get our condoms provided by a company in Brighton, and we went down and did a bit of an away day with them and we went down and they showed us - the factory wasn't there, the factory was in Thailand I think - but they showed us where the condoms came in and they gave us all these samples, and I remember really vividly, I was sitting around a boardroom table and we were all having lunch and they were showing us all these samples and we had condom demonstrators and they were saying there's flavoured lube, and we were all tasting this lube and I just thought, if my mother could see me now! Sat in this boardroom throwing around all these condoms and lube, that was a funny experience.

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PARTICIPANT (continued): So then I guess I became part of the sexual health team because I was out distributing stuff and as I continued in my career at the Foundation, as I say I started off doing distribution and delivery and then I worked in the comms team, so I was a production manager so I was responsible for all our magazine, the campaigns, the leaflets, I was responsible for scheduling it all and getting it all to print, getting all the resources and sourcing all the bits and pieces for campaigns and that sort of stuff. Booking advertising, that was my role and then I then became a programmes manager so I started to take on some key programmes the organisation was doing particularly around services so I took on, we did a programme with carers, a huge volunteering programme and what I was really interested in, when I started in 2003, we got a lot of stick from the community about not doing stuff for women. The Foundation had come out of Healthy Gay Manchester and Lesbian and Gay Switchboard. It was that merger. So obviously Healthy Gay Manchester was focused on gay and bisexual men and their sexual health needs. A lot of the funding we were given as is true for a lot of gay organisations, the funding originally came in the nineties from HIV prevention work. So there was a real sense from the female community, well what are you doing for us? You're called the Lesbian and Gay Foundation, well what's the lesbian bit? Actually we did provide a lot of services for women, we provided the magazine, mental health and support services for women, but we needed to try and do something else. So I set up an internal working group and we spearheaded developing some work for women and it was hard because there was no money because according to the medical professionals, lesbian women were seen as very low risk in terms of any kind of sexually-transmitted infection. Obviously there was no issue around pregnancy so we weren't viewed as an important part of that. It was all about gay and bisexual men and their risk and behaviours and also preventing pregnancy and STIs, teenage pregnancy, that kind of thing. So it was really hard to try and get some traction really in terms of women needing some support and in the end what we did was I went out and I'd done some work in terms of getting some advertising for Out North West so I went out and got my contacts and said, look, we want to develop a resource for women, we're going to need some money, will you support it? So I ended up writing a little booklet about sex for lesbian and bisexual women. We called it Beating About the Bush. We got advertising in it, that's how we afforded the print. We asked some

lesbian businesses to advertise in it, which they did. It came, I remember really clearly the day it arrived, the few of us who had got together to do it ran down to get all these boxes of print and it was so great to see a resource specifically for lesbian and bisexual women in my hand that we'd worked on together. It was, it's probably changed now, at the time it was the fastest, we got rid of it the quickest, it was demanded that much that women wanted it that much that it left our offices really quickly. It was the most popular resource we'd done.

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PARTICIPANT [continued]: So from that we developed a safer sex pack for women, well a sexual information pack really, because it didn't contain any sort of sexual health barriers in it, we tried to put gloves in it, we tried to put dental dams in it, but in the end it was, it had lube in it and it had information in it about how to have sex safer if you're a lesbian or bisexual woman. That was really successful and then we ended up doing lots of other stuff for women, we developed a whole women's programme, we got it funded from the National Lottery, a big lottery fund, so it was great, by the time I'd moved on from the Foundation there was a specific programme for women about all aspects of their mental health, sexual health, inclusion, peer support, networking, all that sort of stuff. It was great to have been involved in that really and part of building that up because there's not a huge amount for lesbian women, there still isn't in my opinion, it's still, there's not a lot of funding about, there's not organisations that are engaging specifically with women. It's getting a lot better but there's still a long way to go I would say. In terms of the guy's stuff, I started working in delivering the condoms and then my final role at the Foundation really was head of services so I ended up leading on the sexual health programme for gay and bisexual men, so that was all about developing our campaigns and supporting the team to host our testing clinics and we did all sorts of new innovative stuff there so one of the things I was involved in was delivering, starting to do net reach, so as the gay and bisexual men's apps took off, in the late-2000s we knew that we needed to, there were spaces that men were meeting online and we knew we had to get in there somehow to give them safe sex information and support them. So we worked with Terrance Higgins Trust, did some partnership work with them and developed a net reach programme and we'd have people, I'm sure they still do it now, but we'd have our workers online, going into the chatrooms, going into the spaces where men were and saying, from the LGF, you want to ask anything, let me know, just here to let you know about any sexual health you want to know about. So that was a really good innovative project for us to be able to engage with men online because I think that's the key thing really for what the history of campaigning with people where they are. You can't expect people to come to you and you need to go out to them, which I suppose is what we were doing when we were going out with the magazine, getting messages out to the far flung reaches of the North West, in those more rural areas. it's getting people to talk about it, not be afraid, that's one of the big things, we'd go out and talk to people, find out what their needs were. But also why don't you test? It was all, I don't want to know, I'd rather not know if I'm positive or if I've got an STI, or I'm frightened of the needle or someone's told me that they put an umbrella, a sort of metal umbrella, and all the kinds of myths around how you get tested. So a lot of our work was about breaking down those myths and saying to guys, look, it's better to know, because you can get treated if you are positive. You can think about your partners and how you can protect them so it's

really important just to have the conversation. one of the real challenges is trying to make campaigning work empowering, talking about the sex you want to have and how you can do that safely. Not stuff like the gravestone and never have sex, because it's awful, there's a lot of guilt around sex, or fear, or the rise of chem sex, or men - men and women - but men particularly, engaging in sex when high or using drugs for whatever reason. Combinations of drugs and alcohol and it's just very unsafe and dangerous.

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PARTICIPANT [continued]: It's a dangerous practice. So it's about how do you support those guys and find out what else is going for them? To sort of get some of those other issues and talk about those to try and break some of those patterns of behaviour and try and support people. But it's tricky because at the end of the day it's personal choice, you don't want to be lecturing, that's one of our things, you don't want to lecture. Who are we to say you've got to wear a condom and you've got to do this? We knew that guys very often didn't like using condoms and it wasn't how they wanted to have sex so we needed to think about how can we - the message always was wear a condom - but how do we actually support guys that don't want to do that? It's a real challenge. I've done all sorts of things that would probably make people's hair curl. I've been in saunas until all kinds of times of night and going out handing out condoms, talking to guys about sex and finding out about different kinds of sexual practices and all sorts. The bottom line is about keeping our community as safe as we can and getting the message out there that we can talk about it because no one was talking about it when I was coming out. I didn't know anything about anything. It was much more hidden so I think being able to be more open and honest about stuff is really valuable.

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INTERVIEWER: That's great. Could you say a little bit more about the, I've come across a flyer in the archives, which says you'll name it, we'll test it, specifically targeted at women's sexual health, part of the being a better butch campaign or-

PARTICIPANT: That was a really early one actually, that was one of the first ones we did. That was about cervical screening actually, because there were, because lesbian women were told, if you're sleeping with women, you don't need to come for a screen. So we were like, actually, it's important that women do come and get tested. So that's what that was about. But then later on there was some new research that said that actually, human papillomavirus, HPV, is transmittable through skin to skin contact. So the thing that can lead to a cervical cancer diagnosis, or a throat cancer diagnosis, or an anal cancer diagnosis, is HPV. So we then got in touch with our funding manager at the time, got in touch with the NHS, the cervical screening programme, based in Sheffield, and said, this has just been published, obviously this is massively going to affect lesbian and bisexual women, we need to do something about this, so we wrote in a funding bid. We got some money and we did a bit campaign and a research project with lesbian and bisexual women and we went out and guestioned women in the North West and said have you ever been for a screen. If yes, do you keep up your screens regularly? If no, why not? What came back was a very large percentage that didn't go and the reason they didn't go was

either because they'd been told by a medical professional that they didn't need to go or friends had said they didn't need to go or partners had said they didn't need to go. So then we did a big campaign. We made some really ridiculous videos with dolls in them, they'll be around I'm sure, which are sort of pastiches of famous Hollywood movies. We did this sort of friendly, user-friendly, booklet about why it's so important to go and get screened. We had posters, we had events, we had this booklet, we had videos, we had badges, and we went out across the North West and we went to all the bars, the clubs, the Prides, we really pushed out this message. And then we did this second piece of research. We went out and said have you seen the campaign, has it changed your behaviour? Has it made you more likely to screen? It was really successful. We halved the underscreening rate in the North West for lesbian and bisexual women. So a massive percentage. A real spike in the number of women who said yeah I'm going to go and get tested. Through that campaign I met women, I heard stories, I remember one woman, I was at Blackpool Pride and she grabbed me, she was on, we were on the pier, we were handing stuff out. And she said thank you so much for doing this campaign and she said it's too late for me, I didn't go and I've got a cancer diagnosis and I've always slept with women but she said thank you for doing it. Getting that sort of feedback, that real sort of tragedy for her, that actually, but it really brought it home to me that actually there are women that are dying because they're not going to get screened. The biggest thing to prevent cervical cancer is to get screened, that's the biggest prevention for it. If they catch it early enough they can treat you but if they don't there are deaths in this country from cervical cancer. So to have that message from health professionals to say you don't have to go, we needed to really stop that. So the success of the North West project meant we got another tranche of funding to take it national, so we went out to all the national Prides with it so that was a fantastic success really for lesbian and bisexual women's sexual health I guess. To be able to get that message out there. I remember really well going along and being told, you don't have to. Usually what happens when you go along and talk to a medical health professional is you get a, are you sexually active? Yes. What contraception are you using? I don't use contraception. Are you trying to get pregnant? No. Well why on earth aren't you using contraception? The risks of this, that and the other. Well, I sleep with women. Oh! Then they don't know how to compute that. Well they're getting better, I'm talking about my experiences.

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PARTICIPANT [continued]: We have a lot of anecdotal experiences from women actually through that research project and they were saying the same things, things like oh, you know, that's not really sexual activity is it then really? Oh well, we class you like a nun. Oh well, it's not real sex. All these things women were telling us that health professionals had said to them. So there is a real challenge around women being taken seriously. That was one of the biggest things throughout my time here and being a lesbian woman myself it's about being taken seriously because you're either seen as a bit of titillation for the straight guys or a butch scary dyke, lesbian figure. Your voice isn't heard or taken seriously, so it's a real challenge. My male friends would say, you don't have anything to worry about, you're not at risk of anything. So just being seen as that kind of low risk. I mean, the risks aren't as high as they are in other communities, absolutely that is true. But that doesn't mean there

is no risk. So it's really important to have those voices heard and for women to get the treatment they should be getting.

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INTERVIEWER: That's really great. Coming to the end now. Is there anything else you'd like to add that we haven't covered or that you think you'd like to say?

PARTICIPANT: I think it's great to see that things are improving for LGBT people. But I think it's, we mustn't ever become complacent, we mustn't ever... HIV is still with us. You can live with it now as a manageable condition, but it is a manageable condition with drugs and actually it's better not to have that, and to try and avoid that if you can. There's all sorts of, I've heard of issues of gay men wanting to contract HIV so it's done and dusted and you know, I'm going to get it anyway, so let's get it done and dusted and that kind of. We need to break down those sorts of barriers for supporting men and show that actually this doesn't have to be the kind of journey that you go on and it's about sort of getting testing and using protection and so on. So it goes back to that story I was telling you about how do we enable and empower men and not make them feel guilt or crap. It's so important to work with guys and support their sexual health choices and so on. It's been an amazing journey to be on in my generation really, to have come through the AIDS crisis in the eighties and to where we are now where you know, it's a liveable condition in this country. Let's not forget for other countries it's not, if there's no money about for drugs then people are still massively at risk and there's still a massive amount of deaths from HIV and AIDS. We need to keep fighting the good fight really.

[00:33:24] End of transcript.