

# 'Do you feel that being part of the LBTQIA+ community affects your health care?'



**A short report based on engagement gathered from the  
2024 Norwich and King's Lynn Pride events**

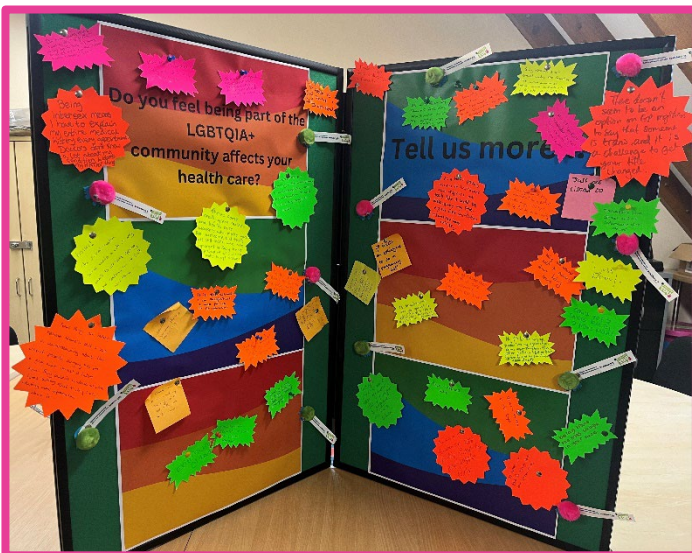
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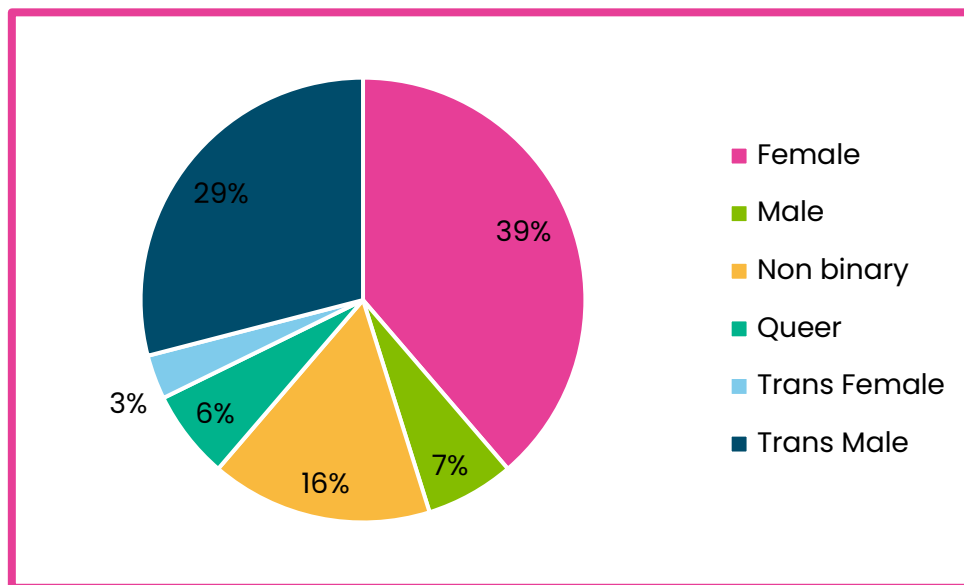
## Background

In July and August, Healthwatch Norfolk attended Norwich Pride and King’s Lynn Pride to engage with members of the LGBTQIA+ community about their experience of health care.

More specifically, people were asked in an open setting: “Do you feel that being part of the LBTQIA+ community affects your health care?” by members of the Healthwatch Norfolk team- people could cast a ‘yes’ or ‘no’ counter in a collection box and were given the opportunity to elaborate on their experience of healthcare. The information collected was further analysed to draw deeper meaning. For a theme to be considered, it had to be referenced in at least three responses. At the end of each event the counters were tallied and recorded.



We received 164 responses to the initial question of ‘Do you feel that being part of the LGBTQIA+ community affects your health care?’ in the ‘Yes/No’ format. We also received 36 qualitative responses from the event where people had elaborated on their experience of healthcare as a member of the LGBTQIA+ community (these responses can be found at the end of this report). For these extended responses, some demographic data was collected. The average age of respondents was 26 years old and 30 of the 36 respondents self-identified as ‘White-British’. The only other ethnic group represented in the data was ‘White-Other’, which was selected by one person. The remaining responses did not include demographic information. In terms of gender identity, the largest subgroup was ‘Female’, of which 12 people (39%) identified themselves as. While this demographic data suggests that the findings of the survey will not be generalisable with the wider Norfolk population due to disproportionality and sample size, it can still provide a valuable insight into LBTGQIA+ healthcare in Norfolk. The findings can also be used as the basis of future work.



*Figure 1* Pie chart depicting sexuality of respondents as percentages. Number of respondents for this question totalled 30.

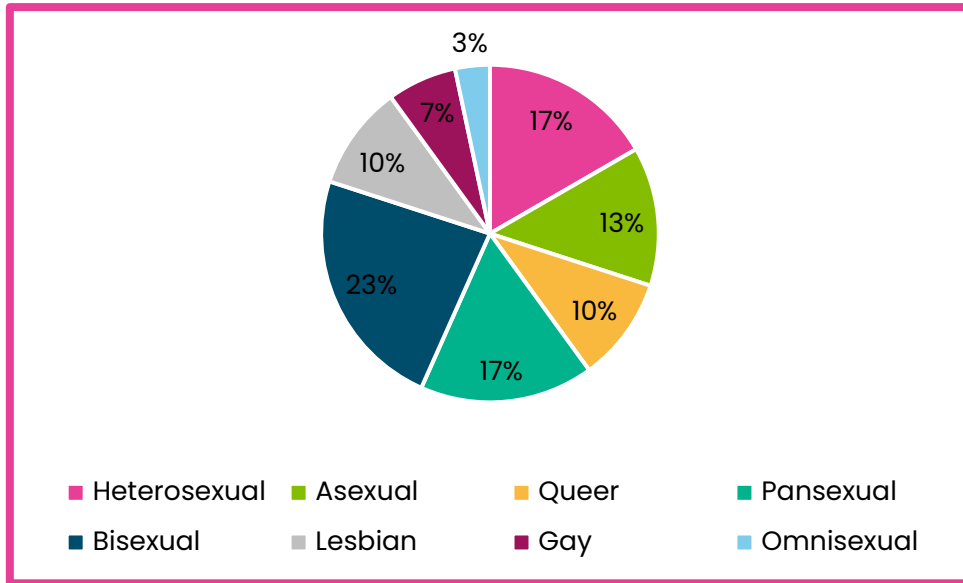


Figure 2 Pie chart depicting the gender of respondents as percentages. Number of respondents for this question totalled 31.

## Findings

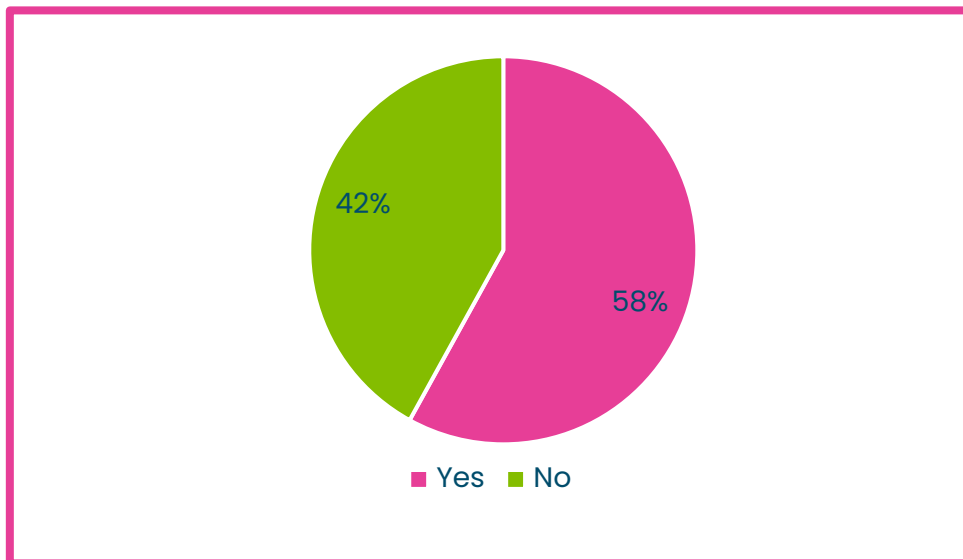


Figure 3 Pie chart depicting percentage of users who answered, 'yes' or 'no' to the question 'Do you feel that being part of the LGBTQIA+ community affects your health care?'. Total number of responses numbered 162.

From the 'Yes/No' responses to the question 'Do you feel that being part of the LGBTQIA+ community affects your health care?', Healthwatch Norfolk received 94 'Yes' responses (58%) while 68 people answered 'No' (42%). From the 36 in-depth responses that were given, the majority were of a negative sentiment, with just four people providing positive

accounts of the healthcare they receive. Several themes were identified from these responses that had been shared by multiple people. The most common theme being that people felt that there was a lack of understanding/consideration for a patient's sexuality and gender when it came to their treatment. This included issues around gender stereotyping and lack of awareness around transgender issues. One respondent described:

My title/pronouns often get ignored by the GP surgery. When talking about trans issues they look at me like I'm crazy.

Another person described similar issues with their GP practice:

My GP repeatedly misgenders me and isn't even trained in trans issues.

Within the same theme, people expressed frustration at the questions and procedures they were required to engage with by health staff. These included issues surrounding pregnancy tests and contraception being offered/required of those who did not feel that it was relevant to them. The opposite of this was also expressed, in which people were being denied services or information they required due to their gender identity and/or sexuality:

You can't get a smear test as a trans man.

Getting a smear is weird when the nurse asks if I might be pregnant! No, I'm a lesbian!

Another person expressed that:

Some things are better, however there's still a lack of understanding about the impact of prostate surgery has for a gay man versus a hetero man. They couldn't understand what I was talking about or why I was wanting more information about it.

While many people had issues with the level of understanding and consideration that was given to them by medical staff, there were instances where adjustments had been made based on their sexuality and gender. For example:

Positive! The sexual health clinic made a note on my chart to not keep offering me condoms as we don't need them.

While others experienced some success but were hindered by infrastructure and computer systems:

My GP let me put no gender on my registration form, unfortunately this option isn't available on their system to find my file/book appointments.

Other minor themes within the response data related to wait times being too long for transgender health clinics and services, with three people expressing such. One individual had been waiting five years to access a transgender clinic.

Several people mentioned feeling that their mental health concerns were either brushed aside because of, or attributed to, their gender transition.

Due to me being trans I was given no further mental health help as they accredited most of my mental health problems to being trans.

## Next Steps

It is apparent that most people within the sample feel that being part of the LGBTQIA+ community affects their health care, with almost 60% of respondents believing that to be the case. From the thematic analysis of 36 in-depth responses to the question, Healthwatch Norfolk identified a key theme of people experiencing a lack of understanding/consideration from medical staff for a patient's sexuality and gender when it came to their treatment. There needs to be a greater awareness and consideration for members of the LGBTQIA+ community when it comes to both their access to health care and their lived experience, to foster a more positive environment.

As this sample size was small, there is merit in conducting further research in this area in collaboration with other key partners, e.g. The Norfolk LGBT Project.

Respondent Number	Feedback
1	There doesn't seem to be an option on GP registers to say that someone is trans and it is a challenge to get your title changed.
2	Being asexual is not covered under the equality act. We are counted as 'other' which pushes us to the side. No rights.
3	As a trans person access to healthcare that respects me feels like it could be taken away at any time e.g. the NHS constitution and same sex care rulings.
4	Just not listened to.
5	Lack of consideration in uterus care for lesbians, let them get their tubes tied.
6	My GP insists on me doing a pregnancy test.
7	Being too scared to talk to the nurse about being trans.
8	Can't get a smear test as a trans man.
9	Having issues ignored by bias, gender stereotyping, reproductive rights, birth control.



10	My GP let me put 'no gender' on my registration form, unfortunately this option isn't available on their system to find my file/book appointments.
11	Conversion therapy is still legal.
12	My doctor is gay so he slays so hard.
13	Being intersex means I have to explain my entire medical history every appointment. Doctors don't know a lot about my condition and blame my HRT for things.
14	Positive! The sexual health clinic made a note on my chart to not keep offering me condoms as we don't need them.
15	There's some really great nurses and health care workers who make you feel welcome but there are still many who are ignorant or may have prejudice which can make things harder.
16	Doctors take far too long in the conversation to understand why I don't need contraception. It would be nice if they caught on quicker!
17	A doctor tried to blame my chronic depression on my transition.
18	It is often assumed I am straight/have a male partner at GP appointments.
19	Trans health care, suicide rates, hormone therapy saves lives.

20	Getting a smear is weird when the nurse asks if I might be pregnant! No, I'm a lesbian!
21	I have been fortunate to get great physical and mental health support from my GP.
22	I shouldn't have to lie about my sexuality to get the care I need.
23	Some things are better, however there's still a lack of understanding about the impact that prostate surgery has for a gay man versus a hetero man. They couldn't understand what I was talking about or why I was wanting more information about it.
24	My GP repeatedly misgenders me and isn't even trained in trans issues.
25	Trans healthcare is being restricted and becoming political. Conversion therapy is still legal. Why stop people being who they want to be?
26	Just assume I am straight and cis and unwanted. I feel unheard
27	As a transgender parent I feel very disappointed about the support and waiting times.
28	My title/pronouns often get ignored by the GP surgery. When talking about trans issues they look at me like I'm crazy.
29	Being trans the NSH laughs in your face
30	No support in place for young people going through puberty.

31	I am treated the same because most of the time they treat people fairly.
32	Due to me being trans I was given no further mental health help as they accredited most of my mental health to being trans.
33	When I tell I'm bisexual, they ask which way more inclined.
34	Being a lesbian means any question about sexual activity requires me to out myself to my doctor.
35	Five year wait for the transgender clinic. I've had a really long wait.
36	Waiting times for trans health care are really damaging.