
South Glamorgan Community Health Council

LGBTQ+ and access Healthcare

16 December 2021



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About the Community Health Councils (CHCs)

CHCs are the independent watchdog of the National Health Service (NHS) within Wales. CHCs encourage and support people to have a voice in the design and delivery of NHS services.

CHCs work with the NHS, inspection and regulatory bodies. CHCs provide an important link between those who plan and deliver NHS services, those who inspect and regulate it and those who use it.

CHCs hear from the public in many different ways. Before the coronavirus pandemic, CHCs regularly visited NHS services to hear from people while they were receiving care and treatment. CHCs also heard from people at local community events, and through community representatives and groups.

Since the coronavirus pandemic, CHCs have focused on engaging with people in different ways.

This includes surveys, apps, videoconferencing and social media to hear from people directly about their views and experiences of NHS services as well as through community groups.

There are 7 CHCs in Wales. Each one represents the “patient and public” voice in a different part of Wales.

Introduction & Background

The South Glamorgan Community Health Council strives to hear from patients and the public across all demographics, communities, and groups within Cardiff & The Vale of Glamorgan.

As well as requesting general feedback from the public on matters concerning their healthcare, the CHC also run specific, targeted campaigns for information and feedback from patients with specific health conditions or disabilities, from specific sectors of society, or on specific services within the NHS, in order to ensure we hear from all groups of society with regards to their healthcare provision.

In this instance, the CHC wanted to hear directly from patients who are a part of the LGBTQ+ society, about their experiences when accessing NHS Healthcare Services in Cardiff & Vale, with a view to making recommendations to Cardiff & Vale UHB on how to improve the experience from a patient point of view, if appropriate to do so.

What we did

Due to the Covid-19 Pandemic restrictions, the South Glamorgan CHC has been unable to carry out physical scrutiny visits to NHS Services across Cardiff and the Vale of Glamorgan as we would under normal circumstances. As a result, we have been required to adapt the way we connect with patients and the public across Cardiff & Vale, in order to gather their views and experiences of accessing NHS Services.

The South Glamorgan CHC launched an online survey to gain feedback and insight from patients and the public who identify as part of the LGBTQ+ society, across Cardiff & Vale, on their experiences when accessing NHS healthcare. The survey was listed on our website, and publicised through our Facebook and Twitter social media channels.

The survey ran from 22nd February 2021 through to 31st May 2021, and asked questions around:

- The Impact of a persons' sexuality and/or gender identity on healthcare needs
- Being open about a persons' sexuality and/or gender identity with healthcare professionals
- Positive and negative experiences of accessing healthcare services
- Healthcare services in Cardiff & Vale

Who we are hearing from

93 Respondents completed our survey, some of whom described their sexuality and/or gender identity as:-

- Cis lesbian
- Gay male
- Gay transgender man
- trans masculine bisexual queer
- Gay cisgender male
- Bisexual/pansexual/queer woman
- Pansexual non binary
- Non binary queer
- Late emerging lesbian
- Bisexual and non-binary/agender
- Gender fluid, Trans Non-Binary.
- Straight, bi/pansexual
- Lesbian
- Gender fluid/queer
- polysexual, polyamorous, non-binary trans woman.
- cis-het-mono's person? I'm queer. "
- Queer/bisexual
- Gay, queer...
- Pansexual cisgender
- Gay gender non-confirming person (biologically male)
- Queer/ bisexual cisgender
- Heterosexual
- Cisfemale bisexual
- Queer trans masculine
- Transgender
- Non binary trans (FtM).
- Transgender woman
- Bisexual. Cisgender female.
- Bi Trans women



What we heard

At a glance;

55 (59%) people agree or strongly agree that their sexuality and/or gender identity impacts on their healthcare needs.

63 (83%) strongly agree or agree that they think it's important to be open about their sexuality and/or gender identity with healthcare professionals.

29 (38%) people strongly agree or agree with the statement that they feel comfortable being open about their sexuality and/or gender identity with healthcare professionals.

- **25 (34%)** people strongly disagree or disagree with the statement
- **22 (29%)** are unsure whether they agree or disagree with the statement.

34 (45%) people strongly agree or agree that they are open about their sexuality and/or gender identity and have had negative experiences within healthcare.

- **31 (41%)** Strongly disagree or disagree with the statement
- **11 (14%)** Unsure whether they agree or disagree with the statement

46 (60%) people strongly agree or agree with the statement that they are open about their sexuality and/or gender identity and have had positive experiences within healthcare.

34 (45%) people strongly agree or agree that they believe they have been treated differently within a healthcare setting because of their sexuality and/or gender identity.

49 (53%) people strongly disagreed or disagreed with the statement that they have heard negative comments about people within the LGBTQ+ community when accessing healthcare – from staff or patients.

- 34 (36%) people strongly agreed or agreed with the statement
- 11 (12%) were unsure whether they agreed or disagreed with the statement

79 (85%) people strongly agree or agree with the statement that they would be happy for a healthcare professional to ask them about their sexuality and/or gender identity.

84 (90%) people strongly agree or agree with the statement that it is important for healthcare settings to show inclusion, for example by having posters/leaflets that show same sex couples or information specifically aimed at LGBTQ+ people.

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60 (65%) people strongly disagree or disagree with the statement that they are reluctant to access services because of their sexuality and/or gender identity.

39 (42%) people strongly disagree or disagree that they would like to be open about their sexuality and/or gender identity but do not feel comfortable in healthcare settings.

- 37 (40%) people strongly agree or agree that they would like to be open about their sexuality and/or gender identity but do not feel comfortable in healthcare settings.
- 17 (18%) Unsure whether they agree or disagree with the statement

43 (45%) people feel that healthcare services in Cardiff & Vale are adequate for their needs.

- 30 (32%) people are unsure whether they agree or disagree with the statement.
- 20 (21%) people do not feel that healthcare services in Cardiff & Vale are adequate for their needs.



On further analysis of the survey responses, the following themes were identified.

Assumptions

A common theme raised throughout the survey was around assumption; whether it was assumptions of a persons' pronouns or assumption of health care services/procedures/treatments that are required, despite them not being relevant to the person eg pregnancy tests.

Many respondents shared their experiences where healthcare professionals have assumed them to be heterosexual/straight/cis.

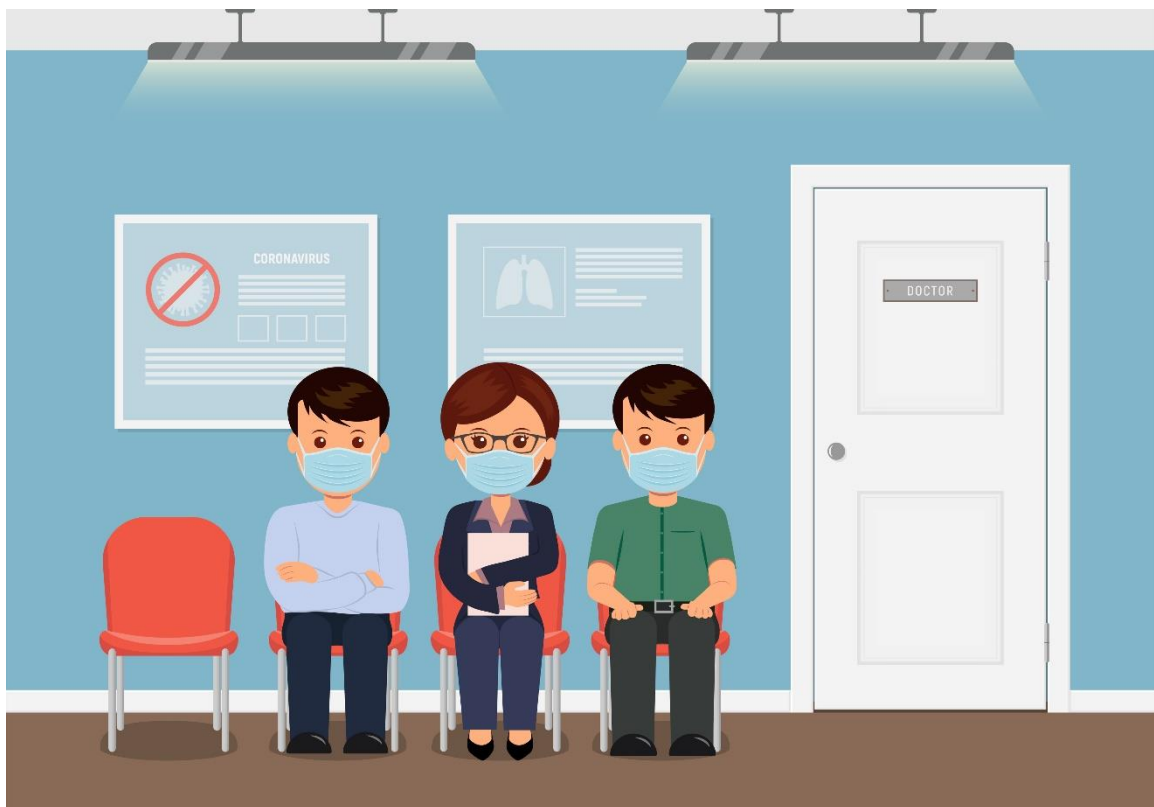
"Unconscious biases and assumptions or lack of understanding. Dismissive of the queer experience, particularly when accessing mental health services."



"Negative experience. I was told in a follow up after major surgery by a nurse" you're still young enough to find a nice man". They just assumed I was straight."

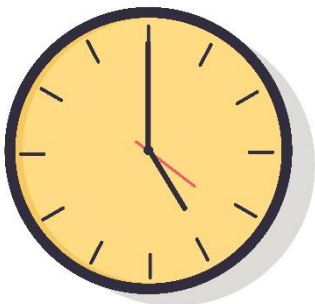
"GP ignored symptoms, assumed oral infection was STD due to my sexuality. Was adamant, and made assumptions about infidelity! Suggested STD check when presenting issue was due to inhaler hygiene. Horrific experience. Also, Outpatient nurse assumed 'wife' calling reception was meant for me, insisted it was until I pointed out I have a husband. No apology given"

"A completely separate experience with the dermatology clinic: I've been told that if I were to be prescribed a particular medication for my skin, I'd need to attend the clinic every month for a pregnancy test before I could be given the medication in case I were unknowingly pregnant (I should clarify my partner is trying to get pregnant not me). I explained that I was a gay woman with no intention of becoming pregnant and do not have sex with men - yet I would still need to do this because its procedure for women. It makes no sense and what a waste of everyone's time. Services need to be able to adapt to seeing different types of people. And when they have limiting procedures, be able to override those with common sense!"



On occasion this has resulted in some patients having to spend time within their appointment explaining their sexuality and/or gender identity so that the healthcare professional had a better understanding of their needs.

"I assume the doctors aren't educated on trans women and I will have to spend a large amount of my appointment time explaining."



"usually asked more questions about being trans in general so I am used more as an educational moment rather than a patient needing care, will usually get comments made on my appearance"

"I'm a cis women engaged to a trans woman. Often I don't disclose this when accessing sexual clinic advice as I figure they won't be informed about trans women. I usually just let them assume that I am with a man (they usually assume this if I am after sexual health advice) and don't disclose. I wish I felt I could be more open but I don't want to spend 5 minutes explaining that my partner hasn't had surgery, how her hormones impact our sex etc. I wish doctors didn't assume I was straight and asked more questions, I would feel more open about taking about my experiences"

Many of these assumptions are often related to the fact that some people are mis-gendered during their appointment.

Some respondents shared experiences of accessing services where staff had used incorrect pronouns (his/he, her/she or them/they)

Mis-gender – "to identify the gender of (a person, such as a transsexual or transgender person) incorrectly (as by using an incorrect label or pronoun)"

(Merriam-Webster, 2022)

"A doctor refused to call me by my preferred pronouns, I was told that the women's health clinic was only accessible for 'women' and I felt I wasn't taken seriously".

"I also had a sexual health screening which was carried out extremely badly. I was sent to the male bay but when I disclosed I was trans, a nurse wheeled a trolley with female equipment (speculum etc) from the female bay to mine, in full view of other patients, and then the nurse misgendered me when I got my results as she thought I was a trans woman!!"

"My counsellor seemed accepting and understanding when I told her about my sexuality. However when I tried to register with my current GP, I wrote down what my title and pronouns are and this has been completely ignored and I have been referred to using incorrectly gendered words."

Other respondents explained it was the language used on Forms that are not inclusive and often lead to patients being mis-gendered.

"Services need to move away from a heteronormative approach. My partner and I are undergoing fertility treatment. All of the forms refer to 'father' or 'male partner' it can't be that hard to be more inclusive."



"Impact on mental health when questioning sexuality and gender. Sexual health needs. Forms when asking about smears/periods/hysterectomy are all targeted towards women rather than acknowledging trans men health also need to be included in this, so I am unable to report on my health properly."

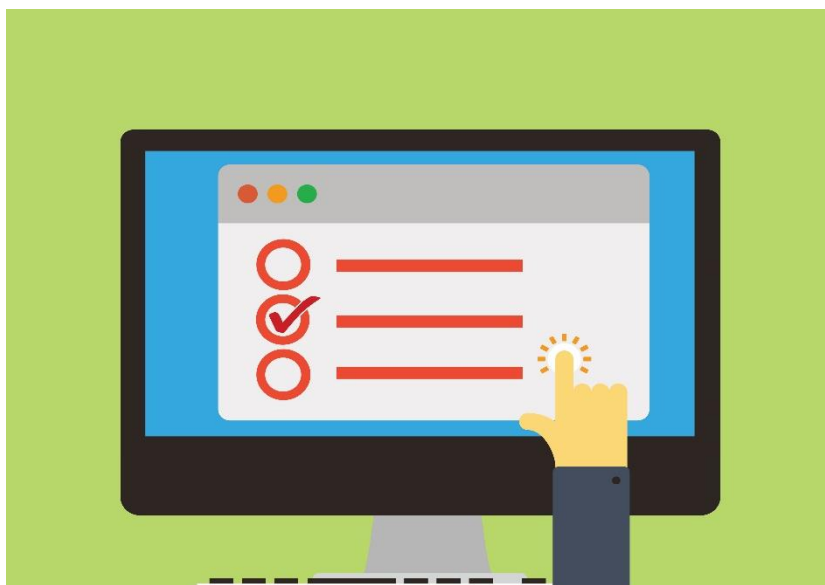
When asked whether any improvements could be made to services, some felt that the language on the forms needed to be changed to meet all needs of people.

"Please ask more GP services to include other gender identities like non binary in their online forms etc"

"Changing language and asking the right inclusive questions"

"Less gendered forms at GUM clinics! They made my visit with my partner super awkward and she has to fill out a "male" form"

"Consider language used and how you can make it gender neutral if possible - for example, ""people who menstruate"" rather than women, or ""people with prostates"" rather than men. This may seem ""too PC"" but it is actually hugely helpful for trans and non binary service users. "



Impact on Care

Some respondents explained that their sexuality and/or gender identity was relevant to their healthcare, however healthcare professionals need to differentiate between sex and gender, and not get them confused with each other.

"I don't have a gender identity. I have a sex, which is sometimes relevant to my healthcare. My sexuality may also be sometimes relevant to my healthcare. I have no problem being asked about this if so. I don't think that healthcare professionals should have to tiptoe around questions of identity - if it's medically relevant, there is no problem in discussing it - if it's not relevant then there is no reason for it to come up."

"It is critical for healthcare services not to conflate sex and gender identity. The healthcare needs of women and trans women are different and shouldn't be conflated. In particular, record keeping matters - if trans men, for example, are recorded as male then they won't receive invitations to cervical screenings. I also expect health professionals to respect the fact that I don't perceive myself to have a gender identity, only a sex, and to act accordingly, in accordance with their duties under the Equality Act in respect of the protected characteristic of sex."

"I understand that my sexuality can be important in diagnosis and treatment, as well as believing I should not have to hide my identity."

Many respondents were able to share positive experiences where they were not treated differently because of their sex or gender.

"The most positive experience is when it doesn't change the experience"

"If the subject of my sexuality is raised in a consultation the doctor normally doesn't bat an eye. That is positive to me. There is no negativity or on the other hand special treatment. Just a genuine neutral reaction. That's what equality is about. I don't want any leaflets or special programmes for gay people, just honest real equality."

"It's massively important, psychologically as well as physically/medically, being treated with respect and getting the right care without barriers"

"when I realised my GP was also gay I felt more at ease discussing my mental as well as my physical health."

"I don't feel I've had any negative experiences, when I've had to discuss my sexuality in an appropriate setting with a healthcare provider it seemed to be handled all very appropriately."



Similar to people who have certain protected characteristics, such as people with disabilities or people from ethnic backgrounds, people from LGBTQ+ backgrounds do not want to be treated any different but just be seen as a person and to have their choices respected by others.

"It's nothing to be ashamed of"

"I started being open years ago and it was fine so I have continued!"

"I am open in almost all settings - the only exception are those I do not feel safe in, for example if someone nearby makes obviously harmful remarks and I am alone."

"It is a key part of who I am. Having come out in my 30s I won't be going back into the closet for anyone."

"I have been able to be open about who I am".



Whilst the majority of survey respondents stated their sexuality and/or gender identity did not have an impact on their healthcare needs, it is also important to reflect on why others did not feel the same way.

Whilst some patients stated they were not treated differently, others felt that they were. Some respondents said they have had to wait longer than others to access treatment;

"I don't feel it has, however u know from others experience it has and can get in their way of getting appropriate care."

"...I have also been rejected care because I was trans and seen as too complex of a patient just for having a trans history. Leaves me feeling like I am seen as "other" and that no one knows how to treat me"

"I have had treatment denied because I was trans. Left me distraught and having to fight for basic care. It took a year before I was provided the care I was needing. I had to jump over more hoops than cisgender patients just because I am trans."

"Yes, a nurse once told me to wait while I was getting an injection, I'd seen every single patient there go, get it done and then leave. The nurse called my name, ignoring my preferred title, and as I stood up they gave me a confused look, as I was male-presenting. They then told me to wait outside the room, and I saw 2 other patients enter and leave before I was seen. I'd had the injection previously and I was dressed in a more 'feminine' manner and had no such issue."

One respondent even suggested that medical professionals seem to initially assume a medical condition is caused by the gender reassignment surgery or treatment received, without adequate understanding and discussion with the patients.

"I am open about being a gay male but do not always disclose I am trans because I do not want any health condition to be blamed on being trans- for example, if I was to seek physical healthcare I would tell the Dr I am trans so my bloods are monitored correctly, but if I was seeking mental healthcare I wouldn't disclose I am trans because I have previously experienced my mental health issues all being seen as down to transition."



As a result of these negative experiences, this has meant that some people do not openly discuss their sexuality and/or gender due to the fear of being treated differently, and the response they would get from Healthcare professionals.

"I'm worried if I'm open about being gay I would be treated differently"

"I think it's important to be open, and I want to be open, but occasionally I have felt scared of being judged, or given health advice that isn't relevant to people who are not cis/hetero"

"Embarrassing as not sure how they will respond if I come out to them and how I will be treated. Sexual health services do not meet my needs so I go to Pontypridd who are great"

"Mostly to do with sexual health and family planning. Also would feel uncomfortable with men sometimes due to experiences of sexual harassment/abuse from men"

"I am misgendered, accidentally and knowingly, every time I speak to medical staff, which makes me feel uncomfortable and avoid medical treatment. I am scared about seeking support from my GP about my gender in case they are bigoted and make things worse. I am hiding my gender from my counsellor in case they judge me for it, which means I can't reap the full benefits of counselling."

"My healthcare needs are met but I always feel that I cannot be completely open about my sexuality until I become comfortable with the staff. Until this happens there is always a degree of reserve on my part concerning all areas of the consultation/appointment. It becomes the elephant in the room for me whilst the staff member may be oblivious to this. This is not surprising because my sexuality is the last thing on their minds but uppermost in mine."

"Because of possible negative experiences and I have heard staff talk about people being gay in a negative way"

"the awkwardness from staff, which makes me feel awkward."

"Fear of staff talking about me and my sexuality. I was even forced out of a job in C&V UHB due to homophobic staff"



Staff Attitude

One of the main themes that have run throughout, is the attitude of medical staff.

Some respondents who shared their positive experience referred to the positive response from medical staff, and the support and level of understanding they have received.

"My GP knows of my sexuality and I feel comfortable with that. She is supportive"

"I am having period related issues and am in a relationship with a woman, my doctor was incredible, not once did she push the pregnancy issue or keep asking if that was an option."

"Went to MSM clinic in Cardiff a few years ago was a very good experience. Nice staff, didn't feel awkward."

"Extremely positive with my GP. Varies with others"



"Positive in CVUHB All staff are respectful"

"There are good examples and not so good but things are better and better in my experience"

"No so far drs etc have all been wonderful"

However, some respondents shared negative experiences where they felt the attitude and behaviour of staff was inappropriate.

"I choose to because if a doctor then shows a negativity I know I don't want to be treated by them. I have stopped disclosing as much because i pass now as my gender but also because I have received such negative reactions when I needed urgent care that it has put me off from disclosing. While being rushed into resus I had a nurse comment that they couldn't even tell I was trans which was not an appropriate setting nor appropriate to say. Although I have complaints upheld there is lasting damage about these experiences. In regard to sexuality, I have received less stigma in healthcare related to this so I feel more comfortable disclosing."

"On occasion I have lied about my sexuality, having worked in C&V UHB I hear first-hand how staff talk behind patients' backs, what is said in handovers etc. As a result I hide my sexuality."

"I was mocked and was called 'it' by admin staff at GP office"

"one negative experience I've had is a colleague telling me I should enjoy the unsolicited male attention (from an older male patient) just because I was a homosexual."

"Negative I have been commented on my looks, stopped from entering a ward, constantly told I am so brave for being trans, in a sexual health clinic I was asked how I was able to get people to sleep with me considering I am trans"

"Yes, patient comments I don't like gay people, the nurse agreed. They thought I could not hear them through the curtain, felt they were looking at me all the time felt uncomfortable"

"I have experienced transphobic harassment from GP staff members"

"I have experienced senior clinicians making comments at the desk about me within earshot, and they are clearly not careful about whether they upset people"

"When my late partner (transgender ftm) was sick and dying, several health care workers asked him inappropriate questions. Both him and I felt we had no agency to say anything as his life was literally in their hands."



"in a psychiatric screening which I was required to go through before being referred to the gender identity clinic. The psychiatrist misgendered me, asked me intrusive questions about my sex life and was extremely patronising. He also clearly didn't understand the GIC referral process and kept ringing me to ask me what was supposed to happen next!"

*"Positive - mainly within sexual health clinics understanding trans identity and impact on mental and physical health. GP's can be hit or miss with this and usually have to tell them what i need rather than they tell me.
negative - comments about me looking good for being trans, comments about how family took it etc which was not appropriate to the appointment, denied hormones because they didn't think I need it even though I had been on them for years and under care of a clinic"*

Respondents felt that staff lacked understanding around LGBTQ+ people. When asked how services could be improved a vast amount of respondents commented that staff need to be trained/better educated so that they had an understanding of some service-user needs.

"Mentally it can be a strain going through transition or questioning one's sexuality but there is no support for that. Understanding how hormones may affect someone's health is something not commonly known, as a patient i end up having to be the knowledge bases that professionals rely on rather than the other way round."

"I am open but hesitate when speaking to medical professionals as they don't understand"

"I feel healthcare workers mostly GP's are not trained enough in transgender care"

"Staff need education. Often they do not mean to be rude or disrespectful, they react hurtfully sometimes because they feel awkward. Visibility is key and can make people feel comfortable"

"Encourage staff to be respectful of people's pronouns"

"a LOT more representation needs to be available. The Rainbow Fflag network is severely poor and the current people looking after the network are not being proactive enough. More resources need to be available as well as a major visual campaign explaining the health board are committed to supporting their LGBT+ staff."

"I think more needs to be done when training healthcare staff to meet the needs of all within the community (covered by the equalities act and more). I have experienced very negative comments actions towards LGBTQI+ service users by staff from other BAME back grounds and this can often feel uncomfortable to challenge as it can feel one characteristic can ""trump"" the other. Also working with young people who experiencing differences with their gender identify, i have noticed how staff often misgender, use the wrong pro nouns or refer to the gender they were born with. "



Other

Respondents also raised the following comments;

"it greatly impacts my mental health. Where is the mental health support?"

"I think sexual health testing needs to be made more accessible. It is difficult to use services due to the limited clinic hours and the significant demand. You can end up waiting for hours or not being seen. The Frisky Wales postal sexual health testing service during the pandemic has been excellent, should be continued and more widely promoted. More work also needs to be done to make prep more accessible through GPs/pharmacies and using home testing kits for 3 monthly tests. Getting seen at the clinic at CRI takes too long and is off putting."

"More mental health support,"

"I had bladder cancer. I knew something was wrong but I was referred multiple times to the gum clinic for STD checks rather than actually have any investigations done into my bladder etc. I do wonder if my sexuality had anything to do with this."

"Things have improved over the last few years but just one negative experience stays with you for a long time, there needs to be consideration of healing time from negative experiences and that past history of poor treatment will take some time before they can interact again with healthcare staff."

"I appreciate the effort to try and be as understanding and accommodating of minority needs so thank you :)"

Learning from what we heard

Following the CHC's survey undertaken, the following areas have been identified;

- Medical professionals often assume a persons' sexuality and/or gender
- Healthcare services can sometimes mis-gender a person, either from assumptions of staff or by the language used on medical forms.
- LGBTQ+ people want to be treated equally, as the same as anyone else accessing healthcare.
- It was acknowledged that a persons' biological sex (Male/Female) may have relevance to specific healthcare needs, but where it's not relevant then there are questions as to the importance of biological sex being an issue.
- Concerns throughout the feedback related more to trans people who may still require specific treatments, rather than sexuality.
- Negative experiences included being treated differently, which may be a factor as to why some people do not discuss sexuality and/or gender with the medical professional.
- Positive experiences include the support and understanding of staff, however negative experiences include the inappropriate behaviour of staff

Respondents raised the following areas of improvement;

- Change language on medical forms to be more inclusive, so that people can identify themselves appropriately
- Educate healthcare staff on LGBTQ+, so that they have a better understanding in order to support their service-users needs.

Thanks

We thank everyone who took the time to share their views and experiences with us about their health and care services and to share their ideas.

We hope the feedback people have taken time to share influences healthcare services to recognise and value what they do well – and take action where they need to as quickly as they can to make things better.

Feedback

We'd love to hear what you think about this publication, and any suggestions about how we could have improved it, so we can use this to make our future work better.

This report is available in Welsh and English.



Contact details



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If you write to us in Welsh, we will answer in Welsh. This will not lead to a delay in responding to your correspondence.

We welcome telephone calls in Welsh.

South Glamorgan Community Health Council