

# Trans and Gender Diverse Health Needs Assessment (Lancashire)

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Public Health Registrar (ST2)

Blackburn with Darwen Borough Council

# With thanks to

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## Partner Organisations:

- Blackburn with Darwen Council
- Blackpool Council
- Lancashire County Council
- Cumbria and Lancashire Public Health Collaborative
- Lancashire LGBT
- Spectrum Inclusion
- Out in the Bay
- Chrysalis
- Renaissance
- Leeds and York Partnership NHS Trust
- Lancashire Teaching Hospitals NHS Trust
- Black Beetle Health

## Steering Group Members:

- Lewis Turner (Chair), Lancashire LGBT, he/him
- Sonia Johanna Chauhan, Blackburn with Darwen Council Public Health, she/her
- Michael Alexander, Blackpool Council Public Health, he/him
- Dianne Draper, Blackpool Council Public Health, they/them
- Catherine Taylor, Blackburn with Darwen Council Public Health, she/her
- Natalie Dodd, Blackburn with Darwen Council Public Health, she/her
- Sasha Johnson, Blackburn with Darwen Council Public Health, she/her
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- Ellie Shackleton, Cumbria and Lancashire Public Health Collaborative, she/her
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- Robert Mee, Out in the Bay, he/him
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- Stephanie Holmes, Chrysalis, she/her
- Anthony Harrison-West, Renaissance, he/him
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- Shelley Mullarkey, Renaissance, she/her
- Jenny Simpson-Hoyle, Leeds and York Partnership NHS Trust, she/her
- James Wilson, Leeds and York Partnership NHS Trust, he/him
- Bradley Baines, Leeds and York Partnership NHS Trust, he/him
- Jay McNeil, Lancashire Teaching Hospitals NHS Trust, he/him
- Tan Paya, Black Beetle Health, they/she
- Kay Kasese, Black Beetle Health, she/they

# Outline

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Journey so far

Methods

Key findings

- Demographics
- Physical and mental health
- Access to services
- Wider determinants of health

Recommendations

Next steps

Sensitive topics are covered

- Including discrimination and harassment, suicide and self-harm



TGD HNA Steering Group chaired by Lancs LGBT established in November 2023



Literature review completed in November 2023 (by Dr Michael Alexander, Blackpool Council)



Online survey created, ran from May – August 2024



Results analysed, presented at steering group November 2024

→ Noted findings demonstrated little change from Trans Mental Health (McNeil *et al.*, 2012) Study 13 years ago  
→ Agreed in-person workshop to craft recommendations and action plan



Recommendations agreed at in-person workshop in February 2025



Initial findings and key recommendations presented to C&L PH Leadership Group (in November 2024 and February 2025 respectively)

## Journey so far

## Data collection

- 130 responses received, with many detailed responses to open-ended questions
- Survey limitations
  - English language only (due to time and funding restrictions) – may exclude non-English speakers/speakers of other languages
  - Online - may exclude those without internet access
  - Purposive sampling method and small number of participants → sample not representative of entire population

# Findings

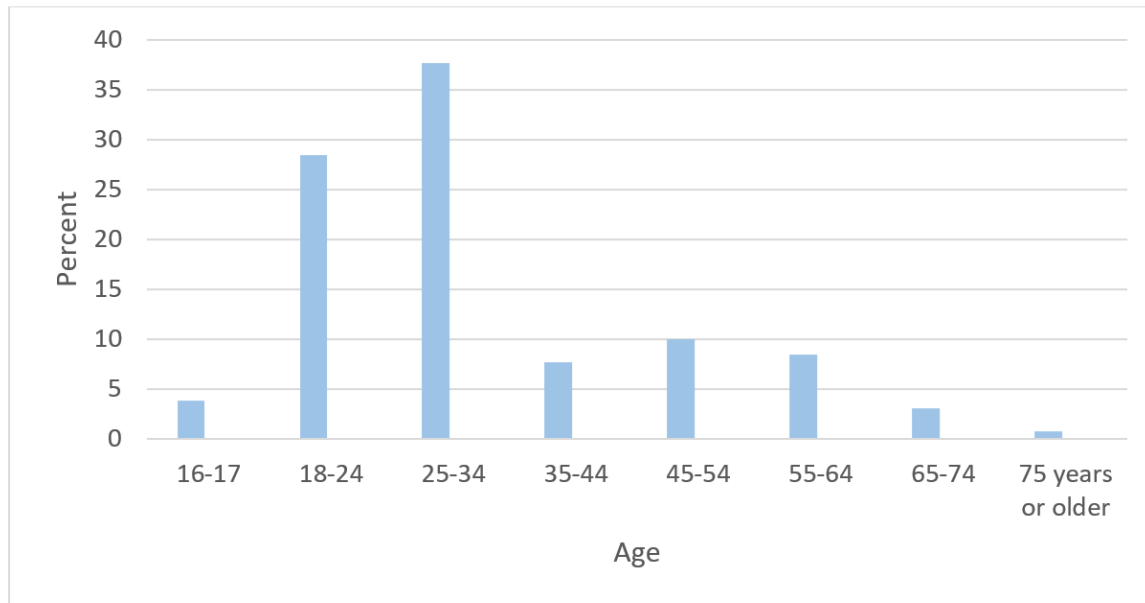
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# Demographic data

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# Age, region, ethnicity

Age of respondents, n=130 responses



## Geographic region

- 62% Lancashire County
- 20% Blackpool
- 12% Blackburn with Darwen
- 4% 'other', 2% skipped

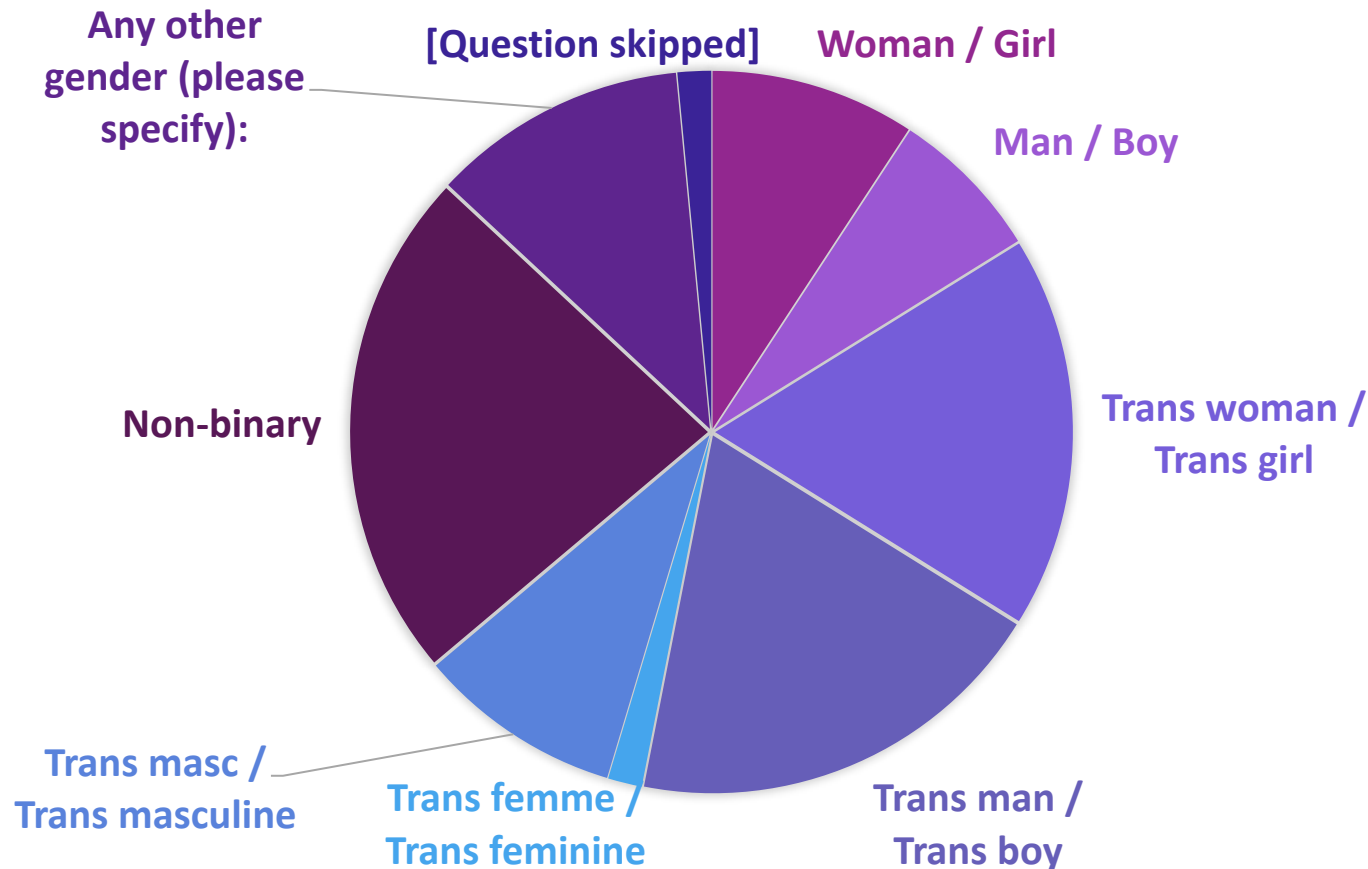
"What is your ethnic group", n=130 responses

	Response percent	Response total
<b>White</b>		
English/Welsh/Scottish/Northern Irish/British	85%	110
Irish	1%	1
Any other White background	4%	5
<b>Asian/Asian British</b>		
Indian	1%	1
Pakistani	2%	2
<b>Mixed/Multiple ethnic groups</b>		
White and Black African	1%	1
Any other mixed/multiple ethnic background	1%	1
<b>Black/African/Caribbean/Black British</b>		
African	5%	6
<b>Any other ethnic group</b>		
Any other ethnic group (please specify) *	2%	3
<b>[Question skipped]</b>	2%	2

\*Those that entered 'any other ethnic group' specified 'British Gibraltarian' or 'British Iranian' in the free text.

# Gender identity

“Which of the following best describes your present gender identity?”, n = 130 responses

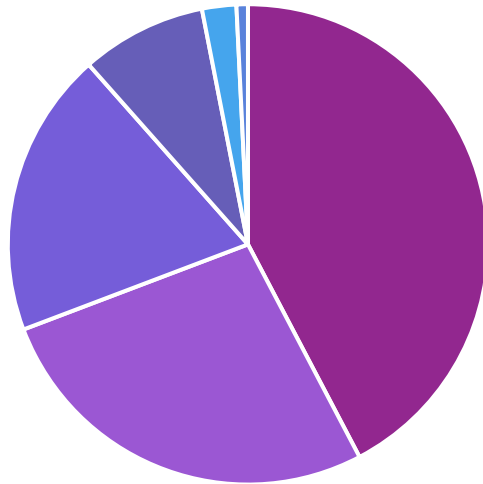


Free text answers - ‘any other gender’ selected

- Agender (n=5)
- Pangender (n= 1)
- Gender-fluid (n=1)
- Genderqueer (n=1)
- Trans guy non-binary (n= 1)
- Trans-androgynous transsexual and gender flexible (n=1)
- Bigender (n=1)
- Femdrogynous (n=1)
- Trans masculine non-binary (n=1)
- Agender/gender queer/gender fluid (n=1)

# Sexual orientation/sexuality

“Which of the following best describes you”, n=130 responses



- Other (please specify)
- Gay or Lesbian
- Prefer not to say
- Bisexual
- Heterosexual or Straight
- [Question skipped]

Free text answers, ‘other’ selected

- Pansexual (n=14)
- Queer (n=11)
- Asexual (n=8)
- Unlabelled (n=2)
- Asexual lesbian (n=1)
- Asexual panromantic (n=1)
- Asexual/queer (n=1)
- Biromantic homosexual (n=1)
- Bisexual or queer (n=1)
- Demi-romantic ace (n=1)
- Demiromantic, Pansexual (n=1)
- Depends on gender (n=1)
- Graysexual (n=1)
- Greysexual, sapphic (n=1)
- Homo-romantic asexual (n=1)
- Likely asexual spectrum (n=1)
- Mostly lesbian (n=1)
- Not really interested in sex at all (n=1)
- Omnisexual (n=1)
- Pansexual & demisexual (n=1)
- Pansexual with an erotic interest in men (n=1)
- Questioning (n=1)
- Transbian (n=1)
- Transgender (n=1)

# Physical and mental health

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# Physical and mental health

- **20% of respondents had a long-term health condition** (*physical or mental health condition, disability or illness that had lasted or was expected to last 12 months or more*)
  - *Existing evidence suggests TGD people are at a greater risk of experiencing a disability or long-term health condition (Hudson-Sharp and Metcalf, 2016; McNeil et al., 2012; Government Equalities Office, 2018; Leven, 2022).*
- The most common long-term conditions were **mental health conditions** (70/130 respondents) and **autism or autism spectrum condition** (50/130 respondents).
- Average wellbeing scores were lower than national figures (ONS, 2022)
  - **E.g. 5.7 out of 10 for life satisfaction (7.54 nationally)**
- Most respondents reported **feeling lonely** some of the time (35%) or **often or always (35%)**
  - *Compared with 7.8% UK adults feeling lonely 'always or often' reported in 2023 (Big Mental Health Report, 2024)*

# Mental health, self-harm and suicide

## Mental health

- **84% of respondents felt their mental health negatively affected their day-to-day life**
  - *Trans Mental Health Survey which found elevated levels of common mental health problems (McNeil et al., 2012)*

## Deliberate self-harm and suicide

- **65% of respondents had deliberately harmed or hurt themselves**
- **73% of respondents had ever had suicidal thoughts**
- **43% reported had attempted suicide in the past**
- *Estimates England 2014 (APMS, 2014):*
  - *7.3% of adults had attempted self-harm*
  - *6.7% of adults had attempted suicide*
  - *21% of adults reported suicidal ideation*
- *Research which suggests the TGD population are at a higher risk of suicide and suicidal ideation (McNeil, Ellis and Eccles 2017; Jackson et al., 2023)*
- *Evidence also suggests reduced stigma and discrimination are linked with lower levels of suicidality (McNeil, Ellis and Eccles, 2017).*

# Access to services

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# Mental health services

- **43% of respondents** had accessed mental health services over the past 12 months
- **13% tried but were not successful**
- **10% did not try because they thought they would be unsuccessful**
- When asked why accessing mental health services was difficult over the past 12 months the most frequently selected answer choice was: having to **wait too long to access the services** (21 responses)

“ In 2022 I'm being told to jump through 5000 hoops that will take about 5 years before being allowed CBT. [...] I gave up, I now just struggle every day and have stopped going outside/living [...] ”

## Experiences around transition – gender identity services

**31% (40/130) of respondents had accessed specialist gender identity services in the UK.**

**34% (44/130) were on a waiting list**

**6% (8/130) had tried to access services but were unsuccessful**

**Services most commonly accessed or attempted to be accessed were public (83%, 76/92) or private (49%, 45/92)**

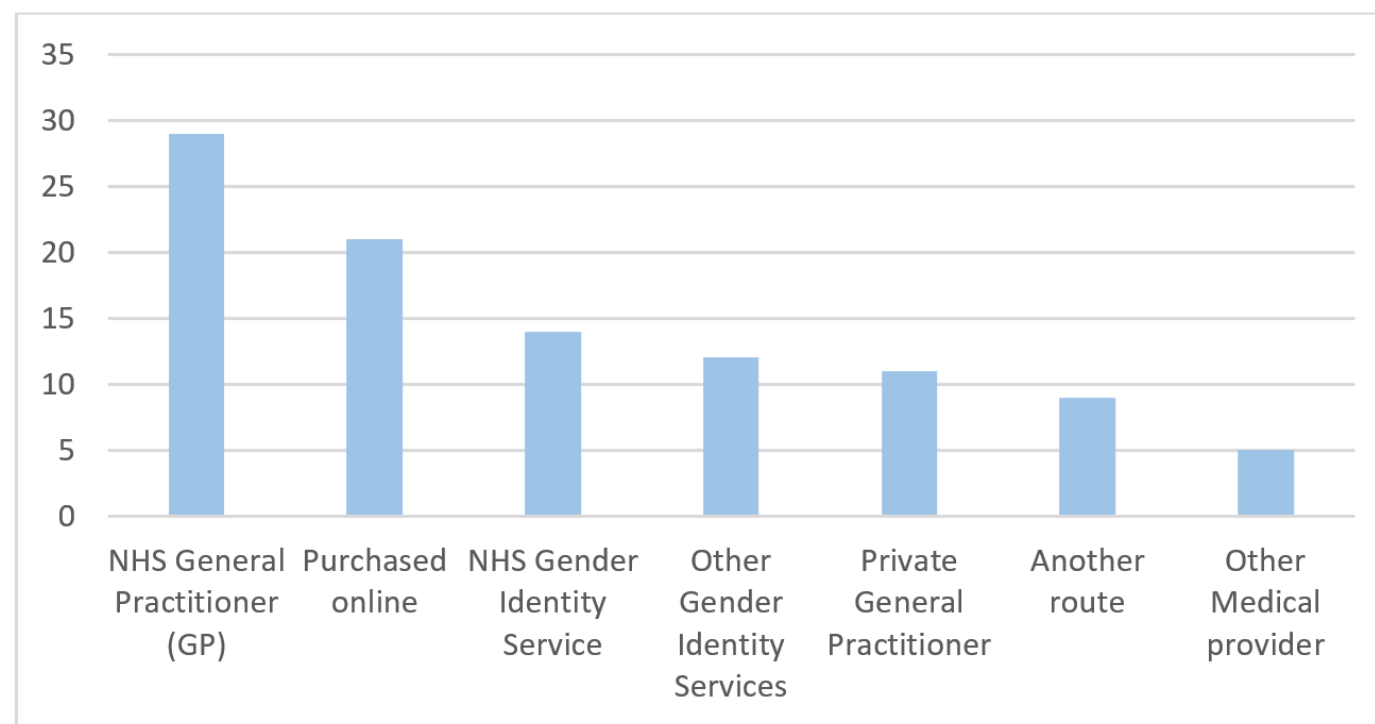
- *The nearest GIS to Lancashire is based in Leeds*
- *As of November 2022*
  - *3,563 people on the standard waiting list for a first appointment*
  - *6-month waits were expected for follow-up appointments*

*(Leeds and York Partnership NHS Foundation Trust, 2022).*

45% of respondents were **taking hormone treatments** at the time of the survey

Experiences  
around  
transition –  
medical  
interventions

*Response totals to the question: “Where did you get your hormone treatments from? Tick all that apply.”*



# General practice

- **Many positive experiences** described when asked about encounters with their GP

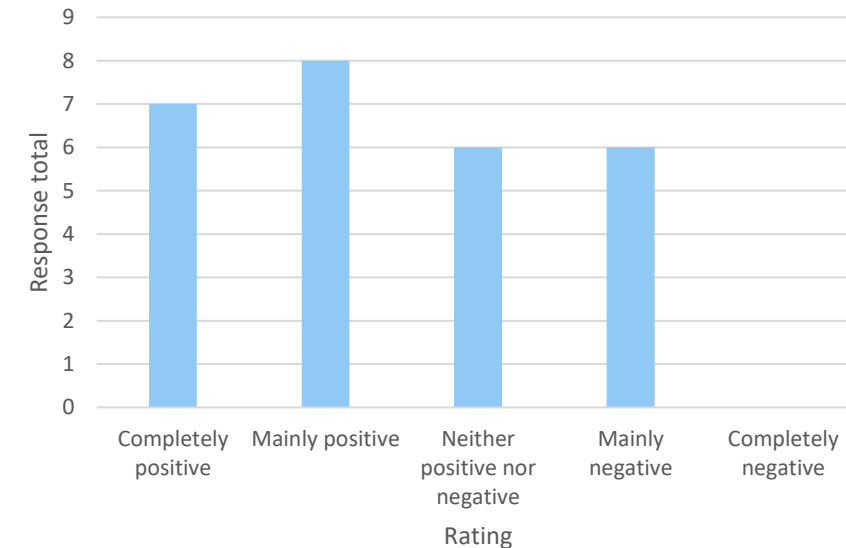
“ GP has always been very understanding and supportive ”

- **48% of respondents** rated the GP practice they used in the past 12 months as **completely positive or mainly positive**
  - *the GP Patient Survey 2023 found 71.3% of patients rated their overall experience of their GP practice as good (36.8% rated their experience as ‘very good’ and 34.5% rated this as ‘fairly good’) (NHS England, 2023)*
- **42% of participants** were not registered with their GP with the same gender as their gender identity
- Difficulties described
  - **limited availability of appointments**
  - difficulties **finding practices which offer shared care agreements with private providers**
  - **limited GP continuity**
  - **discrimination, misgendering**

# Hospital inpatient services

- Positive experiences described included being **proactive in checking pronouns, inclusivity and friendliness**
- Negative experiences :
  - **long waiting times**
  - **inappropriate curiosity**
  - **discrimination or harassment**
  - **assuming pronouns**
  - **lack of cultural competence and sensitivity from staff**
  - **poor management of mental health**
  - **being assigned gender-based wards which did not align with their gender identity.**

*“Overall, how would you rate the hospital inpatient services you used in the past 12 months?” (total responses received = 27)*

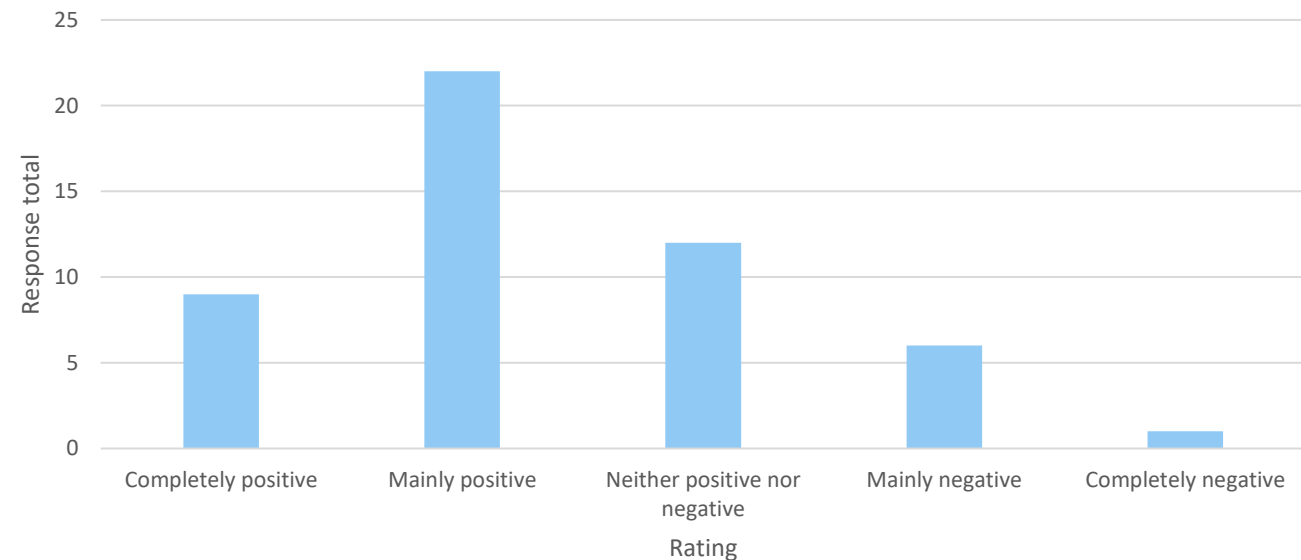


*“ Had very negative experience due to gender following stroke [...], nurses made it very clear they didn't think I belonged on the men's ward, spoke loudly about breasts and genitals, presumably in attempt to out me ”*

# Hospital outpatient services

- Experiences of hospital outpatient services over the past 12 months were mostly positive

*“Overall, how would you rate the hospital outpatient services you used in the past 12 months?” (total responses received = 50)*



- Positive experiences: good communication and support

*“ [...] my experience was really wonderful and felt very supported by staff ”*

- Negative experiences
  - long waiting times
  - being misgendered
  - limited cultural competence around gender diversity

# Cervical screening

- Some positive experiences
  - *“The appointments themselves went very well with very respectful and decent clinicians”*
- Negative experiences and barriers:

Negative experiences	Barriers to attending screening
<ul style="list-style-type: none"> <li>• <b>experiencing gender dysphoria</b></li> <li>• being <b>misgendered</b></li> <li>• being <b>assumed to be in a heterosexual relationship</b></li> <li>• being <b>deadnamed</b> during correspondence</li> <li>• experiencing <b>discrimination and gendered language</b> used</li> </ul>	<ul style="list-style-type: none"> <li>• <b>not receiving an invitation</b></li> <li>• <b>mental health difficulties</b></li> <li>• <b>gender dysphoria</b></li> <li>• <b>history of sexual assault</b></li> <li>• prior <b>adverse experiences</b> with healthcare and feeling that staff at General Practice are <b>not understanding or inclusive.</b></li> </ul>

# Breast screening

- 12% of respondents believed they had received the appropriate invitation to breast cancer screening and **11% believed they had not**
- *Research performed by Mitchell and Howarth (2009) suggests TGD people may be less likely to be offered the appropriate screening (e.g. prostate screening for trans women or breast cancer screening for trans men).*
- *“Screening invitations are sent out to people based on the gender they are registered as at their GP practice; these invitations don’t take account of patients’ individual circumstances and whether they are a person with a trans history.” (London Assembly Health Committee, 2022)*

“ I need breast and prostate screening, because I'm a trans woman. [...] But I understand the NHS system can only record binary sex, so either way there is at least one screening I will need and probably not get invited to. I wish I could mark my sex as 'trans' or 'both' because it is a spectrum and I have multiple needs. ”

# Wider determinants of health

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## Accessing leisure or fitness facilities

- On average, participants rated **confidence with accessing public leisure and fitness facilities or engaging in organised sports or fitness activities as 2 out of 5** (on a scale of 1 to 5, with 1 being not confident and 5 very confident)
  - *Trans Mental Health survey found half of respondents avoided using public toilets or attending gyms, and a quarter avoided other leisure facilities, social groups or clubs (McNeil et al., 2012)*

# Housing

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- 52% of participants had experienced issues with housing in the past
  - *Contrasts with national data: in 2018, 9% of UK adults in private households had experienced housing difficulties in the past (ONS, 2020)*
  - *Evidence suggests TGD people face difficulty accessing housing services (Hudson-Sharp and Metcalf, 2016).*
- Other issues which emerged from open-ended questions
  - Being **denied accommodation** because of gender identity
  - **Fears over safety** in shared housing
  - Having to **leave the home** due to exclusion by family members/partners
  - **High rental costs**, difficulties paying rent and **poor quality** of available housing

## Employment

- **51% of participants were in either full-time or part-time employment or were self-employed/freelance.**
  - *Lower than findings from the National LGBT Survey which found **63% of TGD respondents** were in paid employment in the preceding year (compared with **83% amongst cisgender respondents**) (Government Equalities Office, 2018).*
- Job opportunities and unfair dismissal
  - **25% believed they had been turned down for a job** due to their trans status or identity
    - *UK survey found 35% of TGD people suspected they had been denied a job as a result of being trans (McNeil et al., 2012).*
  - **9% had been fired, constructively dismissed or laid off from a job** because of their trans status or gender identity

“ It came as a shock when I was laid off for no reason after pressing to know why it was said that my gender doesn't [...] portray the company well. ”

# Discrimination and harassment

- **Most respondents had experienced discrimination or harassment** at home (62%), work (63%), school/college/university (62%) or in a public place (68%) over the previous year
  - → A 2017 survey across England, Scotland and Wales found 41% of trans people had experienced a hate crime or incident in the previous 12 months (Bachmann and Gooch, 2017)
- **Some participants did not feel able to report hate crimes to the police** due to concerns about not being taken seriously or experiencing transphobia. *This is in keeping with evidence which suggests most hate incidents are not reported to the police (Government Equalities Office, 2018).*

“ I feel there is no point reporting any violence/harassment against me to the police, because they do not take transphobic attacks seriously and/or the police officer I speak might hold transphobic views and choose not to help me. ”

# Recommendations

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# Recommendations - overall themes

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01

Building a  
bigger, safer  
world for TGD  
people

02

Celebrating  
progress and  
positive stories

03

Designing in  
inclusion

04

Creating a  
confident and  
inclusive  
workforce

# Next steps

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- Steering group is ongoing
- Action plan will be drafted by Ellie Shackleton (Project Support Officer, Cumbria & Lancashire Public Health Collaborative)
  - This will be discussed at the next steering group in April

# Full report can be accessed here:

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[HTTPS://WWW.ADPH.ORG.UK/NETWORKS/NORTHWEST/  
TGD-HNA-LAUNCHED/](https://www.adph.org.uk/networks/northwest/tgd-hna-launched/)



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# Questions

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