





Queer Finds

Amplifying LGBTQIA+ voices to influence change in mental health service delivery



86.3% of trans, genderqueer and non-binary respondents felt their **gender identity** 'significantly' affected how they are treated.

80% of respondents from minoritised ethnic backgrounds felt their race or ethnicity 'moderately' or 'significantly' affected how they are treated.



"They need training that goes beyond tick boxes because it is exhausting. These are not optional extras."

Hopelessness

Frustration

"What's the point? I'll just suffer.
I haven't got the fight anymore to help myself."

"I have complained about [discrimination], but they haven't kept records."

Recommendations



Training

 Include LGBTQIA+ competency in professional development requirements, with role-sensitive training from queer providers.

Data

- Collect, analyse, and act on sexuality and gender identity data, with inclusive options on all forms.
- Emphasise confidentiality policies to ease fears of being outed.

Policies

- Involve LGBTQIA+ communities directly in policy development.
- Implement policies allowing trans and non-binary people to access gendered services safely.
- Show commitment to enforce policies and training. Have robust complaint pathways and quick response times.

Service design

- Involve LGBTQIA+ communities directly in the design, delivery, and evaluation of services.
- Fund peer support programmes and targeted support for intersectional identities.
- Provide gender neutral facilities to reduce daily stress for trans and nonbinary clients.
- Designate specialist clinicians with expertise in gender diversity whom teams can consult.

Service delivery

- Allow patients to request an LGBTQIA+ clinician.
- Allow patients to share what aspects of identity are important to their mental health; don't assume what is relevant.
- Implement standard practices to introduce yourself with pronouns.



Partnerships

- Fund peer support groups, safe drop-in spaces, and community events.
- Map existing LGBTQIA+ groups and build referral pathways to them, especially those serving intersectional demographics.