Despite the strides we’ve made towards LGBT equality in recent years, many LGBT people still face significant barriers to leading healthy, happy and fulfilling lives in Britain today.

This report, part of our state-of-the-nation LGBT in Britain research series with YouGov, uncovers worryingly high rates of poor mental health experienced by LGBT people in Britain today, as well as the challenges many LGBT people face when accessing wider healthcare services.

In the last year alone, half of LGBT people have experienced depression and three in five have suffered from anxiety, far exceeding estimates for the general population. And our findings show that poor mental health is also higher among LGBT people who are young, Black, Asian or minority ethnic, disabled or from a socio-economically deprived background. It’s a shocking picture, that must serve as a wake up call for healthcare providers across the sector.

While there are committed individuals and organisations doing outstanding work, this report shows that instances of discrimination, hostility and unfair treatment in healthcare services are still commonplace. Many LGBT people — particularly those who are trans — continue to be ‘outed’ without their consent, treated with inappropriate curiosity and subjected to unequal treatment because of who they are. Mirroring the findings of the UK Government’s recent National LGBT Survey, a worrying proportion of LGBT people say they’ve been pressured to access damaging ‘conversion therapies’ to change their sexual orientation and gender identity.

This discrimination — both experienced and expected — can deter LGBT people from accessing help when they’re in need: one in seven LGBT people, including more than a third of trans people, have avoided treatment for fear of prejudice.

The persistence of these inequalities calls for leadership from the very top and action at all levels. The UK, Scottish and Welsh Governments must play an important role in this. For example, the UK Government implementing the commitments it made in the LGBT Action Plan, including ensuring that the National Adviser for LGBT healthcare in England has the remit and resources to drive change.

Knowing that we have somewhere to turn when our health is in crisis is crucial. These findings stand as a stark warning that for too many LGBT people, this still isn’t the case. With strong leadership across government and the NHS, building on the best practice of health and social care providers across the country, we can bring forward the day when every LGBT person gets the healthcare support they need to lead a happy, healthy life.

Ruth Hunt, Chief Executive
THE STUDY

Stonewall commissioned YouGov to carry out a survey asking more than 5,000 lesbian, gay, bi and trans (LGBT) people across England, Scotland and Wales about their life in Britain today. This report, part of a series based on the research, looks at mental health and well-being of LGBT people and investigates the specific experiences of LGBT people when accessing healthcare services. This study shows the rates of depression, anxiety and other mental health conditions among LGBT people. It also looks into the accessibility of healthcare services and discrimination LGBT people face when seeking medical support.

CONTENTS

Key findings 5

Mental health 6

Discrimination in healthcare 11

Smoking, alcohol and drug use 16

Methodology 19
Half of LGBT people (52 per cent) said they’ve experienced depression in the last year.

One in eight LGBT people aged 18-24 (13 per cent) said they’ve attempted to take their own life in the last year.

Almost half of trans people (46 per cent) have thought about taking their own life in the last year, 31 per cent of LGB people who aren’t trans said the same.

Forty-one per cent of non-binary people said they harmed themselves in the last year compared to 20 per cent of LGBT women and 12 per cent of GBT men.

One in six LGBT people (16 per cent) said they drank alcohol almost every day over the last year.

One in eight LGBT people aged 18-24 (13 per cent) took drugs at least once a month.

One in eight LGBT people (13 per cent) have experienced some form of unequal treatment from healthcare staff because they’re LGBT.

Almost one in four LGBT people (23 per cent) have witnessed discriminatory or negative remarks against LGBT people by healthcare staff. In the last year alone, six per cent of LGBT people – including 20 per cent of trans people – have witnessed these remarks.

One in twenty LGBT people (five per cent) have been pressured to access services to question or change their sexual orientation when accessing healthcare services.

One in five LGBT people (19 per cent) aren’t out to any healthcare professional about their sexual orientation when seeking general medical care. This number rises to 40 per cent of bi men and 29 per cent of bi women.

One in seven LGBT people (14 per cent) have avoided treatment for fear of discrimination because they’re LGBT.
A worrying number of LGBT people have experienced depression, anxiety, had suicidal thoughts or even attempted to take their own life in the last year. LGBT people are at a higher risk of experiencing common mental health problems than the general population. Participants explained how experiences of discrimination and harassment in day-to-day life, rejection from one’s family and friends and being subjected to hate crimes and incidents can have a negative impact on mental well-being.

Half of LGBT people (52 per cent) said they’ve experienced depression in the last year, with another ten per cent saying they think they might have experienced depression. Two thirds of trans people (67 per cent) have experienced depression in the last year. Seven in ten non-binary people (70 per cent), more than half of LGBT women (55 per cent) and more than two in five GBT men (46 per cent) have had the same experience.

Rates of depression are also higher among LGBT people who’ve experienced a hate crime based on their sexual orientation and/or gender identity (69 per cent). LGBT people aged 18-24 (68 per cent), and Black, Asian and minority ethnic LGBT people (62 per cent) are also more likely to experience depression in the last year. LGBT people in category C2DE (lower income households) are more likely to experience depression than LGBT people in category ABC1 (higher income households), 64 per cent compared to 48 per cent respectively.

According to Mind, around one in six adults in general in England report experiencing a common mental health problem (such as anxiety and depression) in any given week.

Having always known that my gender identity doesn’t match my birth sex it has just become more difficult year after year. Unfortunately, being married with children it will be impossible to ever do anything about it, which is the cause of my depression and which I have never discussed with my GP, even though I should have. I will have to rely on anti-depressants to keep me sane. Torben, 41 (Wales)

As an LGBT individual suffering from severe anxiety and depression, I cannot fault the help and support I get from my county hospital and my local GP. Tom, 56 (South East)

I am being treated for depression, which is caused in part by not being able to access any LGBT senior age-related groups within 80 miles of me. I would be actively involved in such a group if I could find one, but there is nothing. I feel very isolated. Rosemary, 70 (Wales)
Three in five LGBT people (61 per cent) said they’ve experienced anxiety in the last year. Four in five non-binary people (79 per cent) have experienced anxiety in the last year compared to 65 per cent of LGBT women and 54 per cent of GBT men. Seven in ten trans people (71 per cent) have experienced the same in the last year.

Incidence of anxiety is higher among LGBT people in category C2DE compared to LGBT people in category ABC1, 70 per cent compared to 58 per cent. LGBT people who have experienced a hate crime because of their sexual orientation and/or gender identity in the last year are also particularly likely to have experienced episodes of anxiety, with 76 per cent saying so.

LGBT people who have experienced anxiety in the last year

I have a severe anxiety disorder and therefore I rarely leave my house except for going to work. I’m fairly certain the reason I rarely experience harassment anymore, and haven’t in the last year, is simply because I go to great lengths to hide from it, not because there has been any great change. I experienced harassment and violence because I was/am known to be trans in my small town on a daily basis for many, many years. I have been hit, kicked, tripped, spat at, cornered, I was even whipped across the face with a skipping rope once in the street. I’ve been called just about every vile name under the sun.

Lars, 24 (East of England)

One in ten LGBT people (10 per cent) have said they experienced some form of addiction in the last year. One in five disabled LGBT people whose activities are ‘limited a lot’ because of a health problem or disability (19 per cent) have experienced some form of addiction in the last year, compared to seven per cent of LGBT people who aren’t disabled.
One in eight LGBT people (12 per cent) have said they experienced an eating disorder in the last year. One in four non-binary people (24 per cent) have experienced this in the last year compared to 13 per cent of LGBT women and nine per cent LGBT men. More than one in five Black, Asian and minority ethnic people (22 per cent) and one in five trans people (19 per cent) have experienced an eating disorder in the last year.

LGBT people who have experienced an eating disorder in the last year

- **22%** BAME LGBT people
- **11%** White LGBT people

One in eight LGBT people aged 18-24 (13 per cent) said they’ve attempted to take their own life in the last year.

Twelve per cent of trans people made an attempt to take their own life in the last year, compared to two per cent of LGB people who aren’t trans. Particular communities at higher risk include: 11 per cent of non-binary people, eight per cent of Black, Asian and minority ethnic LGBT people, eight per cent of LGBT disabled people, and seven per cent of LGBT people in category C2DE who made an attempt to take their own life in the last year.

Half of LGBT people aged 18-24 (52 per cent) have thought about taking their own life in the last year. Half of non-binary people (50 per cent) and almost half of trans people (46 per cent) have had those thoughts in the last year, compared to 31 per cent of LGB people who aren’t trans. Bi people are more likely to have thought about taking their own life than lesbian and gay people, 41 per cent compared to 28 per cent.

According to research for NHS Digital, one in twenty adults in general reported thoughts of taking their own life in the past year and fewer than one per cent said they attempted to take their own life in the last year.
More than two in five LGBT people (42 per cent) said they felt at some point over the last year that life was not worth living. Seven in ten LGBT people aged 18-24 (70 per cent) have felt life was not worth living in the last year. Non-binary people and trans people are also more likely to have felt that life was not worth living, 64 per cent and 60 per cent respectively.

Three in five LGBT disabled people (59 per cent) have felt life was not worth living at some point in the last year, compared to three in ten LGBT people who aren’t disabled (31 per cent).

I’m concerned about the way trans people are treated. One of my closest friends killed himself 4 months ago.
Joshua, 30 (Wales)

I have recently been off work because of stress due to homophobic bullying by my managers. While my colleagues are great, the managers are terrible. An official complaint to HR found that homophobic attitudes extend there also, and I have been faced with either quitting or returning. I return next week but I am feeling stressed and depressed, and at times suicidal.
Dewi, 36 (Wales)

LGBT people who have felt life was not worth living in the last year

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<tr>
<th>Gender</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Bi women</td>
<td>50%</td>
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<tr>
<td>Bi men</td>
<td>43%</td>
</tr>
<tr>
<td>Lesbians</td>
<td>37%</td>
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<tr>
<td>Gay men</td>
<td>32%</td>
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Almost half of LGBT people aged 18-24 (48 per cent) said they’d deliberately harmed themselves in the last year. Forty-one per cent of non-binary people said they harmed themselves compared to 20 per cent of LGBT women and 12 per cent of GBT men. More than a third of trans people (35 per cent) have self-harmed in the last year, compared to 14 per cent of LGB people who aren’t trans. More than one in four LGBT disabled people (28 per cent) have self-harmed compared to 11 per cent of LGBT people who aren’t disabled.

According to research for NHS Digital, around six per cent of adults in general said they had self-harmed in the last year.
RECOMMENDATIONS

THE DEPARTMENT OF HEALTH AND SOCIAL CARE SHOULD:
- Explicitly address the needs of LGBT people in the updated Suicide Prevention Strategy.
- Include guidance on meeting the needs of LGBT young people, including specific guidance on supporting trans young people, in the curriculum for the new Mental Health Support Teams.
- Ensure the training provided to all Designated Senior Leads for mental health in schools and colleges includes guidance on meeting the needs of LGBT young people, including specific guidance on supporting trans young people.
- Significantly upscale and accelerate the implementation of the Transforming Children and Young People’s Mental Health Provision strategy to help more young people benefit from the proposals.

NHS ENGLAND SHOULD:
- Make mental health a key priority for the new National LGBT Health Adviser.
- Support the widespread implementation of the Sexual Orientation Monitoring Information Standard in mental health services by providing training and guidance for practitioners.

NHS DIGITAL SHOULD:
- Ensure that future studies on the national prevalence of poor mental health among young people and adults includes analysis in respect of sexual orientation, gender identity, including for people with multiple protected characteristics (for example, BAME LGBT people and LGBT disabled people), to identify inequalities and develop targeted interventions.

MEDICAL AND NURSING SCHOOLS, THE ROYAL COLLEGE OF PSYCHIATRISTS, THE BRITISH PSYCHOLOGICAL SOCIETY AND MENTAL HEALTH TRAINING PROVIDERS SHOULD:
- Review their curricula, standards and compulsory and ongoing training to ensure they’re fully inclusive of the mental health needs of LGBT people.

NHS MENTAL HEALTH SERVICES SHOULD:
- Train all staff on the mental health needs of LGBT people (including providing training for CAMHS practitioners on referral pathways for Gender Identity Development Services).
- Consistently monitor patients’ sexual orientation (using the Sexual Orientation Monitoring Information Standard) and gender identity, supported by training for practitioners, to identify inequalities in LGBT patient experience and outcome and develop targeted services and initiatives to address these.
- Make LGBT-inclusive information and resources readily available for patients.
- Join Stonewall’s Diversity Champions programme. Like over 75 health and social care organisations who are already members, the programme can help you to develop effective training and deliver LGBT-inclusive services.

Specific recommendations for Government and healthcare organisations in Scotland and Wales can be found in our LGBT in Scotland and LGBT in Wales health reports.
Stonewall’s Unhealthy Attitudes research with healthcare providers revealed that LGBT people face discrimination and lack of understanding of their specific health needs when accessing services. Healthcare services have a legal duty under the Equality Act 2010 to treat LGBT people fairly and without discrimination. However, this research shows that LGBT people continue to face these barriers in accessing healthcare treatment today.

LGBT people have often had their specific health needs overlooked by healthcare professionals, which leaves them with a lack of trust in their healthcare provider. Multiple needs are often not taken into account, which affects some of the most vulnerable LGBT people. Some LGBT people aren’t open about their sexual orientation and/or gender identity when seeking medical help because of fear of unfair treatment and invasive questioning.

One in eight LGBT people (13 per cent) have experienced some form of unequal treatment from healthcare staff because they’re LGBT. A third of trans people (32 per cent) have experienced unequal treatment, including 16 per cent who say this happened in the last year alone. One in five non-binary people and LGBT disabled people (both 20 per cent) have experienced this at one time. Similarly, one in five Black, Asian and minority ethnic LGBT people (19 per cent), including 24 per cent of Asian LGBT people, have experienced this.

I was going for my PIP assessment. I held my hand out to shake and the nurse didn’t look at myself or my wife after I introduced who she was and no eye contact throughout the interview. We felt we wanted to leave.

Philippa, 48 (Wales)

An NHS nurse asked about my recent gender reassignment surgery and then went on to compare me to being a paedophile as if being trans is the same thing.

Igor, 32 (East of England)

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<th>LGBT Group</th>
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<tr>
<td>Lesbians</td>
<td>17%</td>
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<tr>
<td>Bi men</td>
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<td>Gay men</td>
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<td>Bi women</td>
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One in four LGBT people (25 per cent) have experienced inappropriate curiosity from healthcare staff because they’re LGBT, including nine per cent who’ve experienced this in the last year alone. Half of trans people (48 per cent) and more than a third of non-binary people (36 per cent) have experienced inappropriate curiosity; 29 per cent of trans people experienced this in the last year alone.

A third of LGBT disabled people (34 per cent) and three in ten LGBT people aged 18-24 (30 per cent) have experienced this.

Lesbians are more likely to experience inappropriate curiosity; 30 per cent of lesbians have experienced this compared to 23 per cent of bi women and 17 per cent of gay and bi men.

One in ten LGBT people (10 per cent) have been outed without their consent by healthcare staff in front of other staff or patients. More than one in four trans people (27 per cent) have been outed without their consent compared to seven per cent of LGB people who aren’t trans. Similarly, 15 per cent of LGBT disabled people have experienced this.

I have experienced repeated expression of prejudiced attitudes towards me by mental health service providers due to me being trans, some in NHS and some in non-NHS services. Repeatedly being needlessly outed as trans without my consent by NHS professionals to other NHS professionals, despite being transitioned for over 15 years and having a Gender Recognition Certificate. And repeatedly being asked intrusive and completely irrelevant questions by NHS professionals about my transition and other aspects of being trans. Euan, 39 (Scotland)

Almost one in four LGBT people (23 per cent) have at one time witnessed discriminatory or negative remarks against LGBT people by healthcare staff. In the last year alone, six per cent of LGBT people – including 20 per cent of trans people – have witnessed these remarks.

A concerning number of LGBT people have been pressured to access services that are supposed to change or suppress their sexual orientation and/or gender identity. One in twenty LGBT people (five per cent) have been pressured to access services to question or change their sexual orientation when accessing healthcare services. This number rises to nine per cent of LGBT people aged 18-24, nine per cent of Black, Asian and minority ethnic LGBT people- and eight per cent of LGBT disabled people.

One in five trans people (20 per cent) have been pressured to access services to suppress their gender identity when accessing healthcare services.

I got sectioned after a suicide attempt and the nurse said that my mental health problems were due to allowing Satan in my soul. If I just accepted my true gender then God could forgive me. Elijah, 19 (South East)

My ex-girlfriend who had self-harmed tried to look for support and counselling, however she was directed to a Christian counsellor funded by the church, and the general consensus was being gay is making you self-harm so you can be healed by returning straight. Ezmae, 40 (Wales)

LGBT people who have experienced inappropriate curiosity from healthcare staff

- Trans people: 48%
- LGB people who aren’t trans: 20%
Until very recently, I seldom had a good relationship with health centre staff, GPs and nurses. It seems to me that it never occurs to many of them to ask for or be receptive to information about gender and sexuality so that they can factor this in when dealing with healthcare needs. I suggest much better training is required in some areas. I’m 65 now and this is a concern as I think about ageing and how people are treated in hospitals and in care homes. Linda, 65 (Scotland)

One in four LGBT people (25 per cent) said they’ve experienced a lack of understanding of specific lesbian, gay and bi health needs by healthcare staff; almost one in ten LGBT people (nine per cent) had encountered this in the last year. A third of Black, Asian and minority ethnic LGBT people and LGBT disabled people (both 33 per cent) said they experienced a lack of understanding of lesbian, gay and bi specific health needs.

I was told my health conditions and issues were all caused by the fact I’m bi, even though I’m monogamously married and have dealt with the symptoms since I was 11. Imogen, 33 (Wales)

Three in five trans people (62 per cent) said they’ve experienced a lack of understanding of specific trans health needs by healthcare staff; 41 per cent had experienced this in the last year.

Doctors and nurses are really uninformed. Going for an appointment about my mental health usually ends with me in tears because they’ve decided all of my anxiety and depression is caused by me being trans. Lisa, 21 (Wales)

I was informed, when looking for mental health resources, that my depression and stress were wholly the fault of my gender identity and expression, rather than due to the strange working hours I keep and the stress of buying my first home. Ned, 23 (Wales)

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<th>LGBT people who have experienced a lack of understanding by healthcare staff</th>
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<td>Lesbians</td>
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<td>Gay men</td>
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<td>Bi men</td>
<td>15%</td>
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One in five LGBT people (19 per cent) aren’t out to anyone about their sexual orientation when seeking general medical care. This number rises to 40 per cent of bi men and 29 per cent of bi women, compared to 11 per cent of lesbians and 10 per cent of gay men. More than one in four Black, Asian and minority ethnic LGBT people (27 per cent) aren’t out to anyone about their sexual orientation. Almost one in five trans people (18 per cent) aren’t out to anyone about their gender identity when seeking medical care.

Health professionals ask if I might be pregnant, and when I say no, follow up with ‘Have you had unprotected sex with your partner since your last period’ which, even if I had, would hardly get me pregnant. Having to decide whether to come out to people you hardly know and may never see again is never-ending and a little bit wearying. Claire, 36 (Scotland)

Two in five trans people (40 per cent) and seven per cent of LGB people who aren’t trans said they have experienced difficulty accessing healthcare because they are LGBT. Almost one in five LGBT disabled people (19 per cent), LGBT people aged 18-24 (18 per cent) and Black, Asian and minority ethnic LGBT people (18 per cent), including 23 per cent of Asian LGBT people, have experienced difficulty gaining access to healthcare services.

One in six trans people (16 per cent) and two per cent of LGB people who aren’t trans have been refused care by a healthcare service because of being LGBT.

One in seven LGBT people (14 per cent) say they’ve avoided treatment for fear of discrimination because they’re LGBT. Almost two in five trans people (37 per cent) and a third of non-binary people (33 per cent) have avoided treatment for fear of discrimination. One in four LGBT people aged 18-24 (26 per cent) and one in five LGBT disabled people (20 per cent) and Black, Asian and minority ethnic LGBT people (19 per cent) have avoided treatment.

I’m worried my healthcare provider will not take my gender identity seriously. Isra, 22 (Wales)

I’m too scared to access healthcare services because I’m worried that they won’t believe me and won’t let me get help. Ben, 21 (East Midlands)

Medical professionals are not that good with lesbians. I don’t go to the GP very often because they're not familiar with lesbian issues usually. Donna, 49 (Scotland)
RECOMMENDATIONS

NHS ENGLAND SHOULD:
- Run a highly visible national campaign to tackle homophobic, biphobic and transphobic discrimination in healthcare services and encourage reporting
- Support the widespread implementation of the Sexual Orientation Monitoring Information Standard by providing training and guidance for practitioners
- Support healthcare services to routinely monitor patients’ gender identity, where appropriate, and engage with the trans community to develop a Monitoring Information Standard for gender identity

MEDICAL AND NURSING SCHOOLS, ROYAL COLLEGES, THE GENERAL MEDICAL COUNCIL, THE NURSING AND MIDWIFERY COUNCIL AND TRAINING PROVIDERS SHOULD:
- Review their curricula, standards and training to ensure that teaching, and compulsory and ongoing training, covers homophobic, biphobic and transphobic language and discrimination, the health inequalities facing LGBT people, and providing LGBT-inclusive care, including specific information on providing trans-inclusive care

ALL HEALTH AND SOCIAL CARE PROVIDERS SHOULD:
- Implement mandatory equality and diversity training for staff, which covers their duties to LGBT people under the Equality Act 2010, homophobic, biphobic and transphobic discrimination and language, and providing LGBT-inclusive care, including specific training on trans-inclusive care
- Consistently monitor patients’ sexual orientation (using the Sexual Orientation Monitoring Information Standard) and gender identity, supported by training for practitioners, to identify inequalities in LGBT patient experience and outcome and develop targeted services and initiatives to address these
- Join Stonewall’s Diversity Champions programme. Like over 75 health and social care organisations who are already members, the programme can help you to develop effective training and deliver LGBT-inclusive services

THE GOVERNMENT EQUALITIES OFFICE SHOULD:
- Bring forward and implement comprehensive proposals to end the practice of conversion therapy. This includes any form of treatment or psychotherapy that aims to change a person’s sexual orientation or to suppress a person’s gender identity

Specific recommendations for Government and healthcare organisations in Scotland and Wales can be found in our LGBT in Scotland and LGBT in Wales health reports.

Further recommendations on trans inclusion in general healthcare services and transition-related healthcare can be found in our 2018 report with YouGov LGBT in Britain: Trans Report
SMOKING, ALCOHOL AND DRUG USE

In line with trends in the general population, LGBT people’s smoking, alcohol and drug consumption vary according to age: older LGBT people are more likely to drink alcohol almost every day than younger LGBT people, while younger LGBT people are more likely to smoke and take drugs.

One in six LGBT people (16 per cent) said they drank alcohol almost every day over the last year. Frequency of alcohol consumption increases with age; a third of LGBT people aged 65+ (33 per cent) say they drink almost every day, compared to just seven per cent of LGBT people aged 18-24. One in five LGBT men (20 per cent) drank alcohol almost every day over the last year compared to 13 per cent of LGBT women and 11 per cent of non-binary people.

According to the Office for National Statistics (ONS), one in ten adults in general (ten per cent) drink alcohol on five or more days in the week.

One in six LGBT people (15 per cent) smoke almost every day, however the majority of LGBT people (70 per cent) have not smoked at all in the last year. LGBT people aged 65 and over are less likely to smoke, fewer than one in ten (nine per cent) smoke almost every day. One in five LGBT people in category C2DE (21 per cent) smoke every day compared to 12 per cent of LGBT people in category ABC1.

According to the ONS, 15 per cent of adults in general smoke cigarettes in the UK.

I am a trainee doctor and would be considered successful, but I hide the fact that it’s a daily struggle. I often deal with depression and alcohol dependence due to absence of self-esteem, both resulting from childhood bullying. I’ve little support and live a fairly lonely life. Many LGBT people have similar experiences. It’s great that things are moving forward, but for many, significant damage of the past remains a factor in the present. Maximilian, 31 (North West)
**LGBT people who drink alcohol almost every day**

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<tr>
<th>Age Group</th>
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<tr>
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<tr>
<td>Aged 55-64</td>
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<td>Aged 45-54</td>
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<tr>
<td>Aged 35-44</td>
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<td>Aged 25-34</td>
<td>11%</td>
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<td>Aged 18-24</td>
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**One in eight** LGBT people aged 18-24 (13 per cent) take drugs at least once a month.

According to the Home Office around one in 25 (four per cent) adults in general aged 16 to 59 had taken a drug in the last month, while around one in 11 (nine per cent) young adults aged 16 to 24 had done so.

**LGBT people who take drugs at least once a month**

<table>
<thead>
<tr>
<th>Age Group</th>
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<tbody>
<tr>
<td>Aged 18-24</td>
<td>13%</td>
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<td>Aged 25-34</td>
<td>9%</td>
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<td>Aged 35-44</td>
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<td>Aged 55-64</td>
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<tr>
<td>Aged 65+</td>
<td>1%</td>
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RECOMMENDATIONS

PUBLIC HEALTH ENGLAND AND THE OFFICE FOR NATIONAL STATISTICS SHOULD:

- Ensure all national datasets on alcohol, smoking and illegal substance use include analysis by sexual orientation and gender identity, and include analysis for people with multiple protected characteristics (such as LGBT disabled people and BAME LGBT people) where inequalities are identified. Support regional and local partners to implement targeted initiatives to address these inequalities.

- Support public health services to routinely monitor sexual orientation and gender identity by providing guidance and training for frontline staff.

LOCAL AUTHORITIES AND CLINICAL COMMISSIONING GROUPS SHOULD:

- Ensure LGBT inclusion is mainstreamed throughout the commissioning process for public health services by engaging with local LGBT groups and service users to identify their needs, setting clear service specifications for meeting the needs of LGBT people, and monitoring and evaluating progress against them.

- Commission specific services for LGBT people based on needs and issues identified.

- Join Stonewall’s Diversity Champions programme. Like over 50 local authorities and 75 health and social care providers who are already members, the programme can help you to develop effective training and deliver LGBT-inclusive services.

PUBLIC HEALTH SERVICES SHOULD:

- Ensure the needs of LGBT people are explicitly reflected in Health and Well-Being Boards’ Joint Strategic Needs Assessments.

- Implement mandatory equality and diversity training for staff, which covers their duties to LGBT people under the Equality Act 2010 and meeting the needs of LGBT service users.

- Develop and prominently display bullying and harassment policies which communicate a zero-tolerance approach to homophobic, biphobic and transphobic discrimination, and publicise clear complaints procedures to encourage reporting.

- Provide specific resources and signposting for LGBT service users.

- Consistently monitor service users’ sexual orientation and gender identity, supported by training for staff. Use this data to identify inequalities in service user experience and outcomes, and develop targeted interventions, including LGBT-specific services, to address them.

RECOMMENDATIONS

Specific recommendations for Government and healthcare organisations in Scotland and Wales can be found in our LGBT in Scotland and LGBT in Wales health reports.
Between February and April 2017, 5,375 LGBT people across England, Scotland and Wales completed an online questionnaire about their life in Britain today, which was administered by YouGov on behalf of Stonewall.

Participants were recruited through the YouGov panel and via an open recruitment that was circulated through a wide range of organisations, community groups and individuals.

The sample

- 53 per cent of respondents are from England, 24 per cent are from Wales and 23 per cent are from Scotland.
- 50 per cent are male, 41 per cent are female and eight per cent describe their gender in a different way. Different terms that respondents used to describe their gender identity include ‘non-binary’, ‘genderfluid’ and ‘genderqueer’. People who used a different term to describe their gender identity are referred to as ‘non-binary people’ throughout the report.
- 58 per cent are gay or lesbian, 30 per cent are bi, nine per cent use a different term to describe their sexual orientation and two per cent are straight. Different terms that respondents used to describe their sexual orientation include ‘pansexual’ and ‘queer’.
- 14 per cent said they identify as trans and another four per cent said they are unsure of whether they’re trans or are questioning their gender identity.
- 35 per cent are disabled.
- 28 per cent hold a religious belief or identify as a person of faith.
- Six per cent are Black, Asian or minority ethnic.

Unless stated otherwise, graphs referring to LGB identities, include all people who identify as lesbian, gay or bi, including people who identify as trans and those who do not identify as trans.

The figures have been weighted by region and age. All differences reported in the survey are statistically significant. All names in quotes have been changed for anonymity and ages have been assigned from within age bands.
I got sectioned after a suicide attempt and the nurse said that my mental health problems were due to allowing Satan in my soul. If I just accepted my true gender then God could forgive me.

Elijah, 19 (South East)

I am being treated for depression, which is caused in part by not being able to access any LGBT senior age-related groups within 80 miles of me. I would be actively involved in such a group if I could find one, but there is nothing. I feel very isolated.

Rosemary, 70 (Wales)