

Trans & Non-binary Experiences of GPs in Brighton & Hove

September 2025

Healthwatch Brighton and Hove





Contents

Summary - Trans & Non-binary Experiences of GPs in Brighton and Hove	4
Recommendations - Healthwatch Brighton and Hove Healthwatch Brighton	7
Main report - Trans & Non-binary Experiences of GPs in Brighton and Hove	8
Introduction	8
Method	9
Sample Profile	10
Findings	11
Experiences at your GP	11
Seeking gender-affirming care from their GP practice	11
Rating their GP for gender-affirming care	11
Seeking other types of care from their GP practice	13
Rating their GP for other care they have sought	13
How they felt the NHS staff at their GP surgery treated them	15
How confident they felt using their GP surgery	16
Accessing HRT	17
Experience of accessing gender-affirming medication or hormone-replacement-therapy (HRT) prescriptions through their GP	17
Waiting times to be seen by a gender identity specialist since they first contacted their GP	18
Impact of lack of access to HRT	18
Name Change	19
Changing their first name at their GP practice	19
Why they have not changed their first name at their GP practice	19
How often staff at their GP surgery used the name they asked them to use	e20
Pronouns	22
Notifying their GP practice of the pronouns they would like them to use	22
Why they have not spoken to their GP practice about pronouns	22
How often staff at their GP surgery use the pronouns they asked them to	us 23
Gender Marker	25

Experience of changing their gender-marker on their GP records	25
Why they decided not to change their gender-marker	26
How long the process of changing their gender-marker took	27
Experience and impact of changing their gender-marker?	28
Accessing anatomy related conditions after changing their gender-mar	ker29
Additional comments about their experience	30
Recommendations	32
References	33
Appendix 1 –Survey question responses in full	34
Rating their GP for gender-affirming care	34
Rating their GP for other care they have sought	37
Experience of accessing gender-affirming medication or hormone-replacement-therapy (HRT) prescriptions through their GP	38
Waiting times to be seen by a gender identity specialist since they first contacted their GP	39
Why they have not changed their first name at their GP practice	40
Why they have not spoken to their GP practice about pronouns	40
Why they decided not to change their gender-marker	40
Additional comments about their experience	42
Appendix 2 – Healthwatch Survey FAQ	45
	45
Appendix 3 – Promotional materials	49
Appendix 4 – LGRT+ Switchboard Newsletter	49

Summary - Trans & Non-binary Experiences of GPs in Brighton and Hove

We were one of 10 local Healthwatch who were commissioned by Healthwatch England to enhance their understanding of Trans and Non-binary experiences of GP care. Locally, we had 34 responses¹ to this survey, and though the feedback does highlight some areas of concern, there were many positive findings too.

Respondent Profile

The majority (79% or 27 people) of those that responded were aged 25 to 54. Most self-described themselves as trans or non-binary (69%, 23 people), and when asked to select the most suitable of categories, they were broadly split into equal thirds as trans-masculine, non-binary and trans-feminine. More than half specified their sexual preference as bi-sexual or pansexual (56%, 19 people).

They were predominantly White: British/English/Northern Irish/Scottish/Welsh (65%, 22 people) or 'Any other white background' (24%, 8 people).

Almost two thirds (63%, 20 people) were neurodivergent and over one half had a disability (56%, 18 people).

Summary

In summary, GP support for gender and other care was good overall, but a significant minority thought less so. More respect was thought to be shown by GPs, Practice Nurses and receptionists, compared to Pharmacists and Practice Managers.

Again, accessing HRT was not problematic for most, although some had a more negative experience. Continuing this theme of mixed experiences, waiting times to change their gender marker varied considerably with some waiting up to 2 years.

GP experience

 The majority had sought gender care from their GP less than 6 months ago (70%, 24 people). Most rated their GP support as good (63%, 19 people) with many positive comments. However, 20% (6 people) rated their GP support as poor.

Page **4** of **50**

¹ With a sample size of 34 people, and not likely to be representative of the TNBI population of Brighton and Hove, it was decided to focus on descriptive statistics and qualitative extracts rather than employ tests for statistically significant differences or correlations.

- The majority (82%, 28 people) had also sought other types of care from their GP within the last 6 months, and the majority rated their GP support for other care as good (64%, 22 people). Though again, almost a fifth (20%, 6 people) rated their GP support as poor.
- Around three quarters (75%, 25 people) agreed their GP, Practice Nurse and Receptionist, treated them with respect, but it was considerably less for the Pharmacist (63%, 25 people) and Practice Manager (51%, 18 people).
- Over half (59%, 22 people) felt confident of using their GP as a trans or nonbinary person.

Accessing HRT

- Almost half had accessed HRT through their GP with no issues, and a fifth had not tried. Just under a fifth (18%, 8 people) had experienced issues such as refusals, delays, and abrupt changes by having their subscription randomly stopped, and having to change GPs due to staff changes.
- Almost half had long waits to be seen by a gender specialist, taking from 6 months to 6 years, and others had gone privately.
- Only one person reported a negative impact from this process.

Name Change

- The majority (65%, 22 people) had changed their first name at their GP practice and many reported that they had already done so before registering this with their GP. Of those that hadn't told their GP surgery, half said that they didn't intend to.
- Three quarters reported that the GP, receptionist and practice nurse always use the name they had been asked to use. This was less so for the Pharmacist (67%) and for the practice manager (60%).

Pronouns

- The majority (71%) had told their GP practice of the pronouns that they would like them to use.
- When asked why they had not done so, the responses were a mixture of 'didn't need to' or concerns over negative transphobic responses from the staff. Two comments were 'Don't need to as I pass' and 'I never needed to request different pronouns, they just switched over when my file was updated from'.

 Most thought the GP and nurse used their pronouns correctly. This was slightly less for the manager, receptionist and pharmacist.

Gender Marker

- A third (35%, 12 people) had changed their gender marker in their GP record, a quarter (26%, 9 people) had thought about it but not done so, and 5 people (15%) had not thought about it. One person had tried but failed, but we do not know details of why or how this happened.
- When asked why they hadn't changed their gender marker the responses were about lack of a suitable category (non-binary), worries over the impact and of not being sure how to do it.
- Half (54%, 7 people) said having their gender marker changed took less than 6 months, with most of those in under a month (38%, 5 people). For just under a third it took between 6 months to 2 years, with one person (8%) still in the process and waiting.
- A fifth (21%, 4 people), reported that everything has been the same as before since they started to change their gender-marker, though three people (16%) have lost access to their previous NHS record.

National report comparisons

Aside to Healthwatch England commissioning 10 local Healthwatch (including us), Healthwatch England ran a national survey to complement the results. In total, 1393 people replied from the local and national surveys; What trans and nonbinary people told us about GP care. (Healthwatch England, 2025)

Similar to the national survey, our local survey reported a mix of experiences. Comparing our local findings against the data from all the local Healthwatch we see that slightly fewer people had formally changed their gender marker on their GP record – local 35%, nationally 40%.

In many areas our local NHS services seemed to fair better:

Findings	Brighton & Hove	National
Rated their general GP are as good	82%	53%
Felt their GP receptionists treated them with respect	75%	50%
Rated their gender GP care as good	63%	32%
Confident in using their GP for their healthcare needs	59%	39%
Had lost access to their NHS record	16%	28%
Had their HRT prescriptions disrupted	3%	16%

Recommendations - Healthwatch Brighton and Hove

In light of these findings, we make the following recommendations:

- 1. There should be clear guidelines and training for GP staff and other health workers:
 - to reduce the concerns of TNBI patients being treated negatively by members of staff.
 - on the importance of the use of TNBI patients' preferred names and pronouns.
 - on the importance of TNBI patients' gender markers, and clear information provided to patients on how to get their gender marker changed.
- 2. Gender markers should be amended to include non-binary as an option, to more accurately reflect patients' gender identity.
- 3. To alert NHS system leaders about the:
 - long waits for service users to be seen by a gender specialist, and the impact that can have on mental health.
 - need to reduce the long waits for patients to change their gender marker.
 - inconsistency of approach regarding HRT subscriptions and that patients are reliably informed of any changes in their subscriptions.
- 4. Patient records should include a 'body indicator' a marker that reflects the patient's physical anatomy relevant to clinical screening to show which health screening patients should be referred to, irrespective of their gender marker.

These first two recommendations above could be achieved by sharing and publicising the ru-ok? guide <u>"A Guide for Professionals working with young LGBTQ people"</u> which explains the importance of how professionals communicate with this community (ru-ok? & Healthwatch Brighton and Hove, 2024).

Main report - Trans & Non-binary Experiences of GPs in Brighton and Hove

Introduction

According to the 2021 Census, 0.5% of people stated their gender identity was different from their sex registered at birth. This is likely to be an underestimate as not everyone responded to the question. This figure is expected to increase as prior to the closure of the UK NHS Gender Identity Service (GIDS) in March 2024, the referral rates of people aged 18 to their service had been increasing at an exponential rate since 2014 (Cass, 2024, p. 24).

In Brighton & Hove, a total of 2,341 people aged 16 years or over (1.0%) indicated that their gender identity was different from their sex registered at birth, which is double that seen in the South-East (0.5%) and England (0.5%), and the highest seen outside of London, Luton, Manchester, and Leicester (Brighton & Hove: 2021 Census briefing, p. 16).

The largest proportion of those who identify with a gender different from their sex registered at birth are those aged 25 to 34, which at 1.5%, is more than three times the national average for this age group in England and Wales of 0.5%. (Brighton & Hove: 2021 Census briefing, p. 16). Brighton & Hove consistently shows higher representation across most gender-diverse categories, reflecting its reputation as one of the UK's most LGBTQ+ inclusive cities.

The proportion of residents aged 16 and over in Brighton & Hove identifying as non-binary is the highest seen in any upper tier local authority in England (Brighton & Hove: 2021 Census briefing).

Research by the LGBT Foundation and TransActual shows that trans and non-binary individuals often encounter unique challenges and barriers when seeking healthcare, which can lead to unmet needs or negative experiences (TransActual, 2021). This is why Healthwatch England, and 10 additional local Healthwatch around the country, are undertaking this survey on trans and non-binary people's experiences of healthcare.

Gathering feedback directly from these communities helps us better understand their specific healthcare needs, identify where services may fall short, and work towards improving care. Our goal is to use the feedback to drive positive change. By providing evidence-based recommendations, we can encourage care leaders and service providers to make changes that improve access to and quality of care for trans and non-binary people.

We present the findings here for Brighton and Hove. The compilation of evidence from the additional Healthwatch will highlight the experience of trans and non-binary individuals nationally, and support Healthwatch England in their pursuit of campaigning for improved healthcare for all.

Method

Healthwatch England produced the questionnaire using Smart Survey, which was then shared with the local Healthwatch that were administering the survey. Most of the questions were multiple choice or checkboxes, with some open-ended comment boxes. Healthwatch England shared their survey nationally, and each local Healthwatch shared it within their own communities.

In support of this project, we designed promotional materials to use as handouts, in mailshots and on social media (see Appendix 2).

We added a news piece to our website to provide further context on the survey, "If you're trans or non-binary, what's your experience of GP services?". https://www.healthwatchbrightonandhove.co.uk/news/2024-10-29/if-youre-trans-or-non-binary-whats-your-experience-ap-services

We sent a standalone mailshot to our audience mailing list, as well as featuring the survey in two of our monthly newsletters. These were delivered to 1,328 active subscribers. We shared the survey on our social media channels - Facebook, X and Instagram - and with the Community Works' members list which has 700 subscribers, including charities, not-for-profits, and community groups in the local area.

We partnered with Brighton & Hove LGBT Switchboard for this project, who advised the best way to engage our target group was to offer a prize draw for participants. We offered a voucher prize draw and added this offer to the survey welcome page: "As a thank you for taking part, Healthwatch Brighton and Hove are pleased to offer a £75 Love to Shop voucher as a prize draw for everyone that completes the survey. You can register for the prize draw at the end of the survey." We provided them with social media assets which they included in their October audience newsletter, which has 1,161 subscribers. They also posted to their social media accounts on Facebook, X, Instagram, Threads, and LinkedIn.

In addition to this partnership, we conducted outreach with targeted local organisations. Allsorts Youth Project, The Clare Project and The Village Metropolitan Community Church shared the survey with their communities. Wellsbourne Healthcare CIC also distributed the survey within their network.

We distributed print versions across several Brighton city centre locations including the Jubilee Library, The Ledward Centre, several queer-inclusive cafes & bars, as well as in the pigeonholes of our neighbouring organisations at Community Base.

Once the survey had concluded, Healthwatch England shared with us all responses they had received where respondents had specified Brighton & Hove as their location. We had direct access to the responses of those that completed our local survey.

To contextualise the findings, we first present an outline of those who completed the survey, and this will be followed by the main findings.

Sample Profile

In total, we had 57 responses to the survey. Healthwatch England collected 17 that specified the Brighton & Hove Area. Of the 40 that we collected locally, 23 were excluded because:

- 14 specified their location as other than Brighton & Hove.
- 8 did not specify a location at all.
- One person that was in Brighton & Hove, was under 18 years of age.

This left a total of 34 responses² that were within area, over 18, and that self-identified as trans or non-binary.

The survey questions were grouped into the following categories and are reflected in the way the findings are presented.

- 1. Experiences of their GP
- 2. Accessing HRT
- 3. Name change
- 4. Pronouns
- 5. Gender Marker

² With a sample size of 34 people, and not likely to be representative of the TNBI population of Brighton and Hove, it was decided to focus on descriptive statistics and qualitative extracts rather than employ tests for statistically significant differences or correlations.

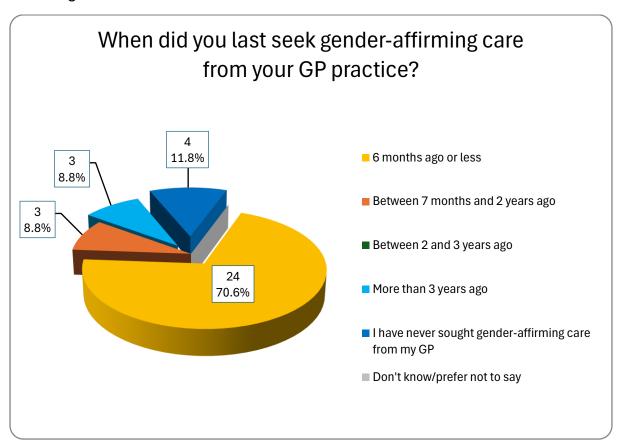
Findings

Experiences at your GP

Seeking gender-affirming care from their GP practice

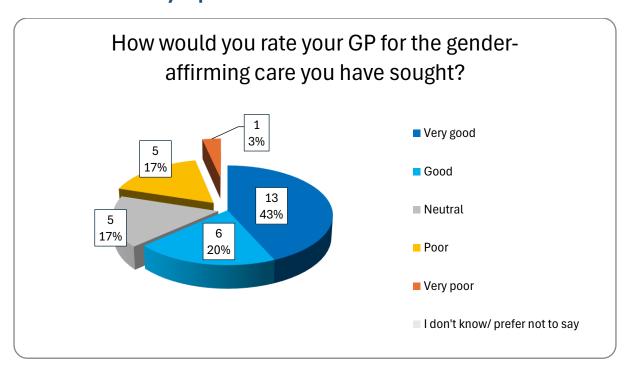
Gender-affirming care that a GP could provide includes contraception, signposting, referrals to gender identity clinics, prescribing hormone replacement therapy medication (HRT) under a shared-care agreement, access to mental health support, nutritionist care, support with identity documents, fertility treatment and preservation.

The majority (71%, 24 people) had sought gender-affirming care from their GP practice within the last 6 months. Only 12% (4 people) had never sought genderaffirming care form their GP.



Rating their GP for gender-affirming care

In terms of the gender-affirming care, the majority (63%, 19 people) rated their GP support as good (43% 'very', 20% 'good'). However, a significant minority of 20% (6 people) rated their GP support as poor (17% 'poor', 3% 'very poor').



Comments that reflect this somewhat polarised opinion, included:

A supportive GP surgery:

- "I have a trans GP here in Brighton who has shaped his whole surgery to be trans inclusive. I asked for the hormones I need, and I was given the hormones I need."
- "I visit my GP practice regularly for testosterone injections and on balance the nursing team are very good. My GP is very affirming, and we've had discussions about my long-term health as a result of my gender affirming care."

Positive comments made about the supportive WellBN practice:

- "My GP is amazing, they offer informed consent HRT for those on the GIC waiting list (alongside some other criteria), have a very supportive and protrans environment and have a bunch of information for trans people on their website. I'm with WellBN in Brighton."
- "Since moving to Brighton, my GP has been excellent (it's WellBN, essentially a group of GPs covering a larger area than normal). There is a dedicated trans health team, easy access to bridging prescriptions for hormones, 3-month check-ups, and generally a positive, welcoming attitude to trans and non-binary people. Though this is unusual in the UK, and one of the main reasons I moved to Brighton."

Lack of GP support:

• "I'm not sure if I'll get the chance later, so I'll start by saying that I've had to change GPs 3 times to get to where I can get the care that I require. The

most recent time because an understanding doctor retired, and the new people didn't even know that they were supposed to be working with a shared care agreement."

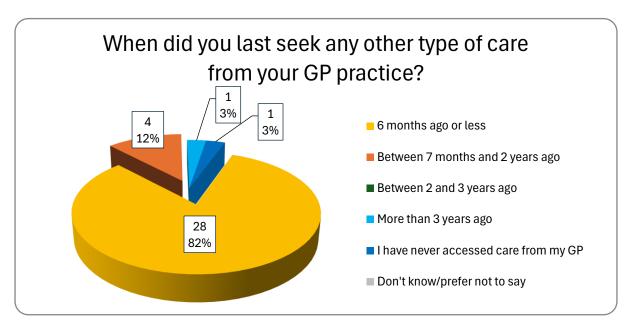
"I feel that my local GP doesn't recognise my gender identity or honour it.
 The care I receive and pronouns used/way I am referred to does not acknowledge or respect me. And the fact that assumptions are made in terms of my relationships to others/reproduction is also not valuing to me."

Note: Further quotes from this survey are provided in Appendix 1.

Seeking other types of care from their GP practice

This would include any type of care not specifically related to their gender changes, such as an injury or illness.

The majority (82%, 28 people) have sought other type of care from their GP within the last 6 months, whilst 12% (4 people) had never sought any other type of care from their GP.

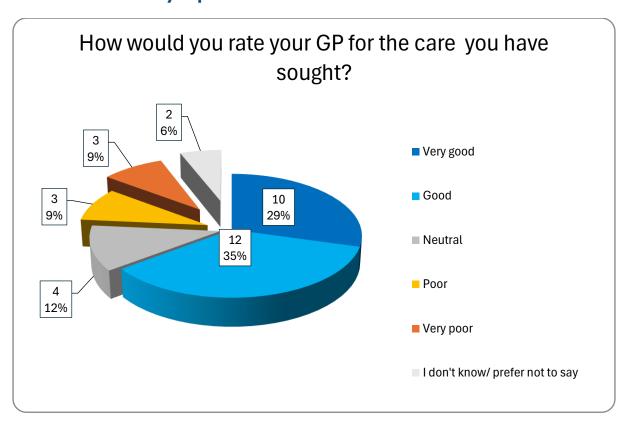


Rating their GP for other care they have sought

The majority (64%, 22) rated their GP support for other care as good (29% 'very good', 35% 'good'). However, 18% rated their GP support for other care as poor (9% 'poor', 9% 'very poor').

Although mostly favourable, this further illustrates the mixed responses people had to their GP experiences.

Trans & Non-binary Experiences of GPs



Comments that reflect this somewhat polarised opinion, included:

A supportive GP surgery:

- "Always have had good advice from my doctor on my normal & trans health."
- "I always feel listened to and given enough time to find my words. I've been at many practices in my lifetime, but WellBN on Western Road is by far the best in my experience. I love the equal importance of mental health alongside physical health."

Lack of understanding of the trans experience:

- "I can usually get an appointment when I need one. Although the last time I
 tried to see a GP I was instead given an appointment with an ANP, which I
 didn't like as I want my gender affirming care taking into account when
 discussing my cardio-vascular health."
- "After changing my pronouns and title many moons ago the various NHS
 systems don't seem to talk to each other and in fact ended up getting a
 friend who works in hospital admissions to correct it on all platforms. My GP
 reception is such that you'd have to shout at full volume to declare you'd
 like a quiet 5 min alone with a receptionist to discuss delicate matters,
 which when you've already been misgendered feels ridiculous."

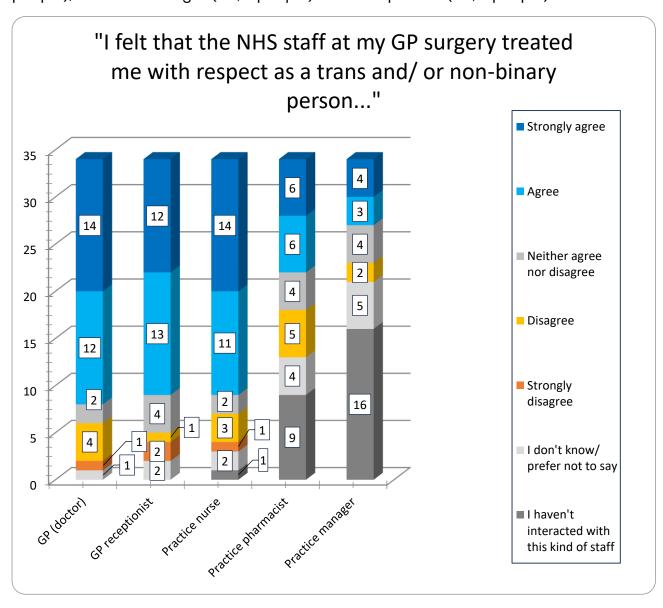
Note: Further quotes from this survey are provided in Appendix 1.

How they felt the NHS staff at their GP surgery treated them

Although the overall figures are favourable, there was some varying level of opinion when contacting with staff.

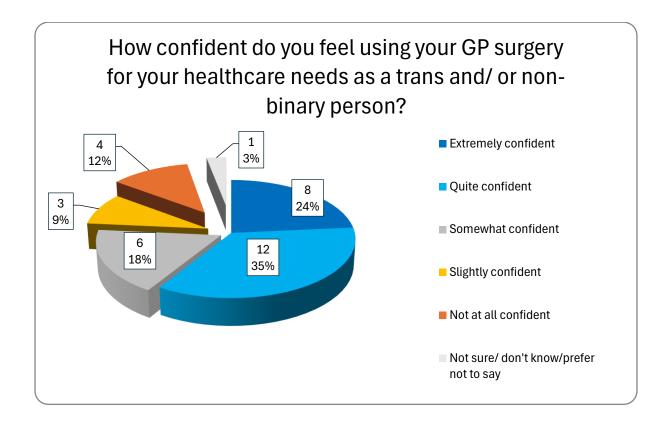
Around three quarters of those that interacted with their GP (76%, 26 people), Practice Nurse (76%, 25 people) and Receptionist (74%, 24 people), agreed or strongly agreed that they treated them with respect as a trans and/ or non-binary person. It was less than half (48%, 12 people) for the Pharmacist and less for the Practice Manager (39%, 7 people).

However, a fifth of those that interacted with the Practice Pharmacist disagreed that they were treated with respect as a trans and/ or non-binary person (20%, 5 people). For the GP, this figure was 15% (5 people) who disagreed or strongly disagreed. It was lower for those that interacted with the Practice Nurse (12%, 4 people), Practice Manager (11%, 2 people) and Receptionist (9%, 3 people).



How confident they felt using their GP surgery

Over half (59%, 22, people) reported feeling quite or extremely confident about using their GP surgery for their healthcare needs as a trans and/ or non-binary person. A fifth (21%, 7 people) were only slightly or not at all confident.

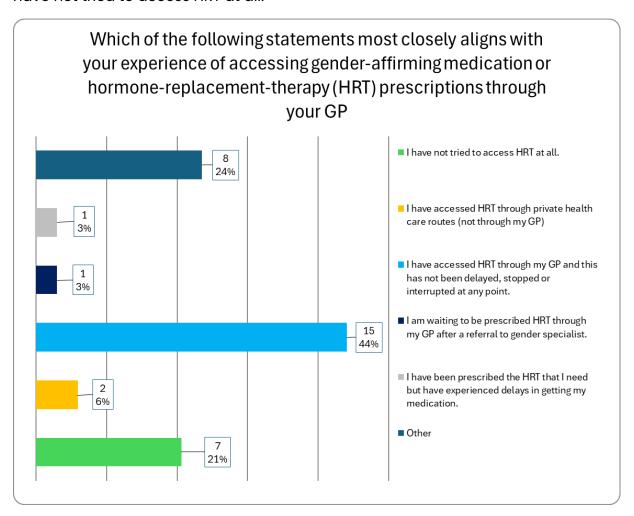


Accessing HRT

Experience of accessing gender-affirming medication or hormonereplacement-therapy (HRT) prescriptions through their GP

This includes prescriptions through shared-care agreements that their GP is responsible for prescribing.

Less than half (46%, 15 people) have accessed HRT through their GP and this 'has not been delayed, stopped or interrupted at any point'. A further 18% (6 people) have not tried to access HRT at all.

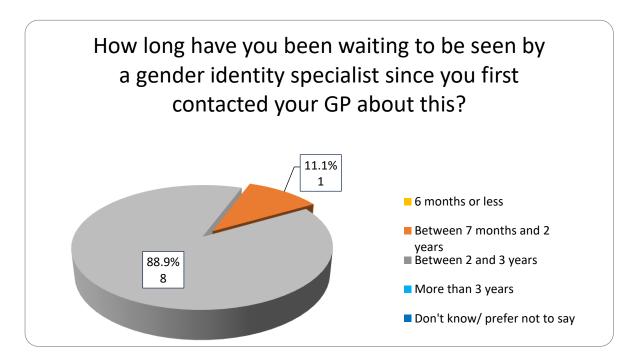


Other responses included:

- "I don't want to take hormones but am looking to get top surgery. Will do this privately though as I don't think the NHS will be able to help me in any timeframe."
- "I have requested my hormones to be tested and to have advice regarding taking hormones, but the Dr just looked at me and said, "you don't look like you have PCOS [Polycystic Ovary Syndrome]" and then ended the conversation."

Waiting times to be seen by a gender identity specialist since they first contacted their GP

Of the 9 people that responded, most said 'between 2 and 3 years' (44%, 4 people). Only one reported being 'Between 7 months and 2 years'.



Comments showed people seeking private care or alternative GPs:

- "Am looking to do this privately. Have NOT contacted my GP as their front of house staff is transphobic."
- "My GP did not offer to refer me back to the gender clinic, but told me to change GP 'where they deal with people like you'."

Impact of lack of access to HRT

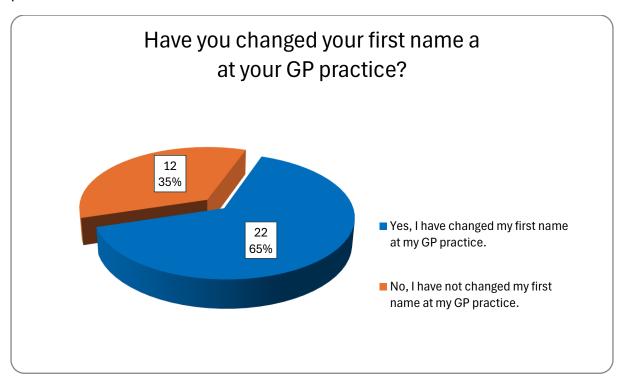
There was only one response, illustrating that delayed access can affect someone's wellbeing:

"If I had been able to access it earlier in life it would have been so completely different that it's hard to start to explain. Lack of access to something starts with not being aware that the thing even exists and that it can help you. It was largely that which has been my issue earlier in life. I would have been a much happier person if I had access to this sooner but I'm glad the process of getting it has been relatively smooth. I get some delays to getting medication but it's not too significant. Mainly it's just hard that if I leave the area then I won't be able to know I can continue."

Name Change

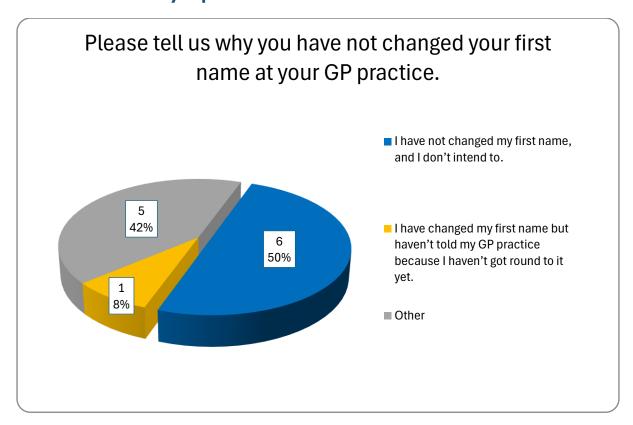
Changing their first name at their GP practice

Almost two-thirds (65%, 22 people) had changed their first name at their GP practice.



Why they have not changed their first name at their GP practice

Half of those that had responded (50%, 6 people) had not changed their first name at their GP practice and didn't intend to. Only one person (8%) had changed their first name, but haven't told their GP practice because they 'haven't got round to it yet'.



Of the 'Other' responses, the majority (42%, 5 people) were about having previously changed their first name before registering at their current GP surgery, but one was about finding it 'pointless':

- "I changed my first name 10 years previously, so it was already changed when registering for WellBN."
- "The idea of changing my name when they can't get title or pronouns right feels pointless like I've mentally not thought about that part of my journey as I'm so worn down by these systems that already harm us."

How often staff at their GP surgery used the name they asked them to use

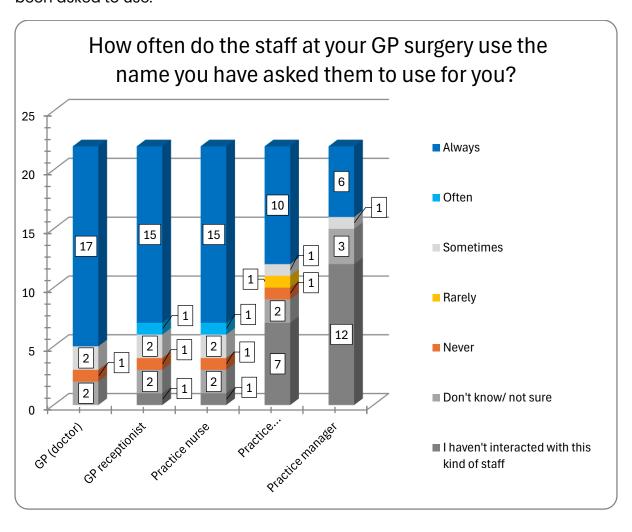
Although use of preferred names was rarely respected throughout, a greater proportion of GPs, Nurses and receptionists did so compared to Pharmacists and Practice Managers.

- Of the 22 people that interacted with the GP, just over three-quarters (77%, 17 people) reported that they always use the name they had been asked to use.
- Of the 21 people that interacted with both the Receptionist and the Practice Nurse, just over three-quarters (76%, 15 people) reported that they always use the name they had been asked to use (71% 'always', 5% 'often').

- Of the 15 people that interacted with the Practice Pharmacist, over two-thirds (67%, 10 people) reported that they always use the name they had been asked to use.
- Of the 10 people that interacted with the Practice Manager, 60% (6 people) reported that they always use the name they had been asked to use.

Only two people (13%) of those that interacted with the Practice Pharmacist reported that they never or rarely used the name they had been asked to use.

Only 1 person (5%) of those that responded and interacted with the GP, Receptionist or Practice Nurse reported that they never used the name they had been asked to use.



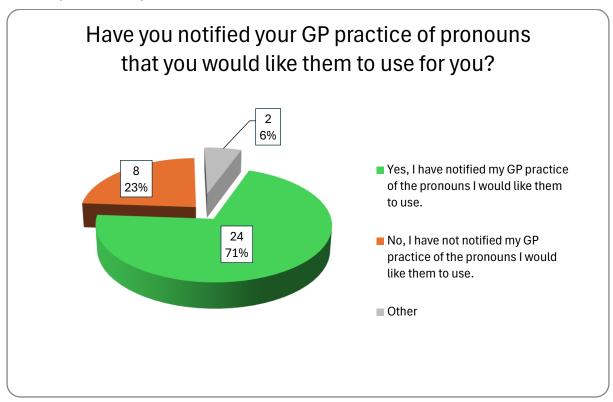
Pronouns

Notifying their GP practice of the pronouns they would like them to use

24 people (71%) had notified their GP practice of the pronouns that they would like them to use, with just under a quarter (24%, 8 people) reporting that they had not done so.

Of the two 'other' responses (6%) the comments were:

- "Don't need to as I pass."
- "I never needed to request different pronouns, they just switched over when my file was updated from female to male."



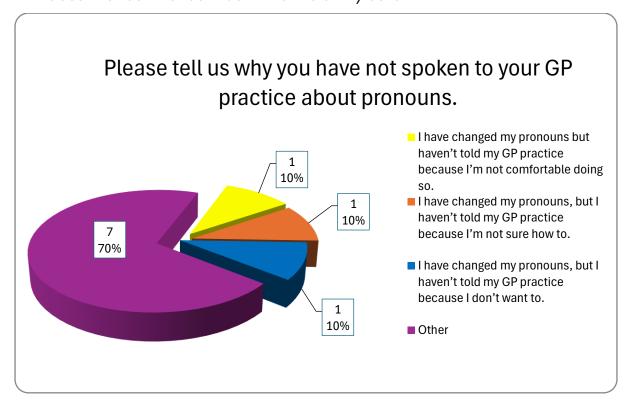
Why they have not spoken to their GP practice about pronouns

One person reported that they changed their pronouns but haven't told their GP practice because they were not comfortable doing so, another because they were not sure how to, and another because they did not want to.

The other responses indicated a lack of respect and being unaware about how to change pronouns:

• "Front of house staff is transphobic so don't feel safe to disclose as I don't want this to affect the care, I'm able to get."

• "I am happy with the pronouns on my legal documents, I would prefer they/them but don't really know how to approach them about it and it doesn't affect me too much in terms of my care."

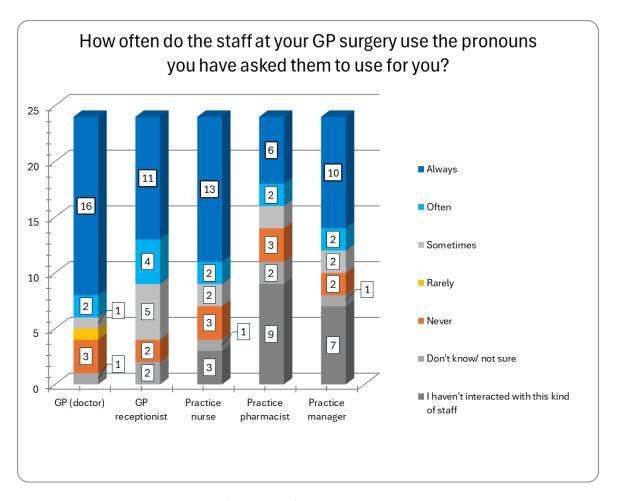


How often staff at their GP surgery use the pronouns they asked them to us

Although pronouns were not always respected throughout, a greater proportion of GPs, Nurses and Practice Managers used the preferred pronouns compared to the receptionist and Pharmacist.

- Of the 24 people that interacted with the GP, 18 people (75%) reported that they always or often use the pronouns they had been asked to use. Though three people (17%) reported that they never or rarely used the pronouns they had been asked to use.
- Of the 24 people that interacted with the Receptionist, 15 people (63%) reported that they often or always use the pronouns they had been asked to use. Though two people (8%) reported that they never used the pronouns they had been asked to use.
- Of the 21 people that interacted with the Practice Nurse, 15 people (71%) reported that they often or always use the pronouns they had been asked to use. Though three people (14%) reported that they never used the pronouns they had been asked to use.

- Of the 15 people that interacted with the Practice Pharmacist, 8 people (60%) reported that they often or always use the pronouns they had been asked to use. Though three people (20%) reported that they never used the pronouns they had been asked to use.
- Of the 17 people that interacted with the Practice Manager, 12 people (71%) reported that they often or always use the pronouns they had been asked to use. Though two people (12%) reported that they never used the pronouns they had been asked to use.



Comments showed contrasting experiences:

- "I have a high telephone voice so the receptionist can sometimes assume my pronouns, even though all my title, sex, and name have been updated on the system."
- "I keep receiving letters about having a smear test (I am a trans woman).
 My mother rang to complain as I find this painful and difficult it feels like a slap in the face."

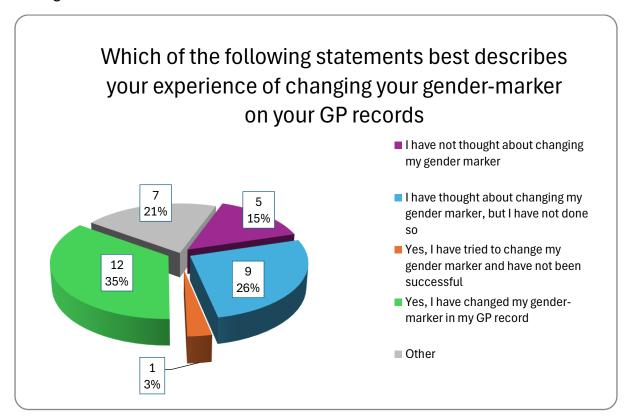
Gender Marker

Experience of changing their gender-marker on their GP records

A gender-marker is how the NHS records patients' gender. At present, the options are male or female. There is no non-binary option and there is no distinction between sex and gender in the GP record.

Over a third (35%, 12 people) had changed their gender marker in their GP record. Only one person (3%) had tried but had not been successful.

Just over a quarter (26%, 9 people) had thought about changing their gender marker, but had not done so, and 5 people (15%) had not thought about changing their gender marker.



The other comments reveal difficulties about not recognising a preferred gender, health screening, discrimination and issues with their GPs:

Not recognising a preferred gender:

- "I am non-binary, sad to hear this is not recognised."
- "Not sure how well this would work. I wrote nonbinary in my registration form but that didn't seem to have had any effect. I am foreign and my country doesn't allow name changes. I feel nervous changing my name on the record as I have no official ID to match this. I'm worried this would cause trouble later."

Concerns over health screening:

- "However, this means I'm getting pointless reminders about smear tests as I'm down as female now, but no marker to show I don't need this - this is emotionally difficult for me."
- "I changed it legally before registering with my current GP, I am thinking of changing it again for purposes of health screening reminders in the future."

Worries about discrimination:

 "I fear changing it would lead to discrimination and violence against me when travelling or in the UK."

Issues with their GP:

 "This took AGES!!! And didn't actually happen until I switched to a trans positive GP."

Why they decided not to change their gender-marker

Of the 19 people who had not changed their gender-marker, this was attributed to there being no categories for the preferred gender, worries about the consequences and being unsure about how to change:

No suitable gender marker categories:

- "Because I am non-binary and there isn't an option to do that."
- "I am still exploring being non-binary and gender fluid and also, I feel that the GP in the past has wrongly written down things on my records (naming me wrongly for my sexual identity which upset me based on their wrong assumptions) so I wouldn't trust them with this now that much."
- "I identify as non-binary, but also a lot of my medical issues related to my experiences as being discriminated against for having what is seen as a female body. I have chronic bladder issues that no one understands because most experts in urology specialize in male anatomy and the treatment and issues as well as menstrual related issues are not taken seriously. I also don't identify as a male or a man. I think in a medical situation it makes sense for Drs to know I have a body that has been assigned as female, because most of my health issues are specific to that. Even though I think that isn't relevant in other parts of my life."

Worries:

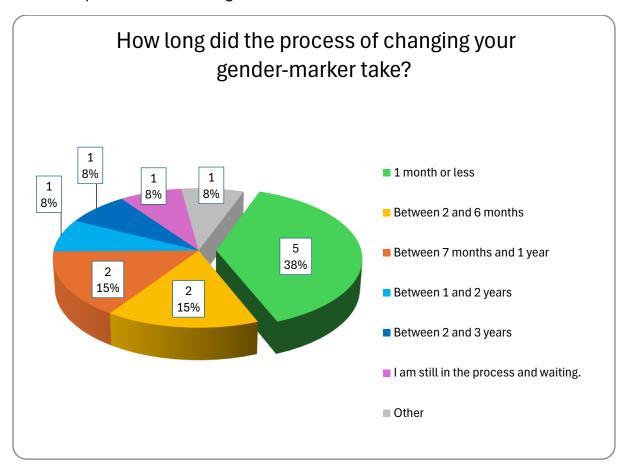
- "I'm worried about losing my records and also not being notified of relevant health scans for my anatomy. I'm also a little daunted by the process, although I think it's likely I will do it in the future."
- "Am foreign and want to make sure everything matches my legal ID which
 is what documents my settled status and right to access NHS care. Also
 front of house staff at GP is transphobic and I don't want to jeopardize any
 healthcare access for me."

Don't know how to change:

- "I do not know how to."
- "I don't think I am able to change my marker until I've been seen by the GIC, which is unfortunately likely to be many years away due to the long waiting lists."

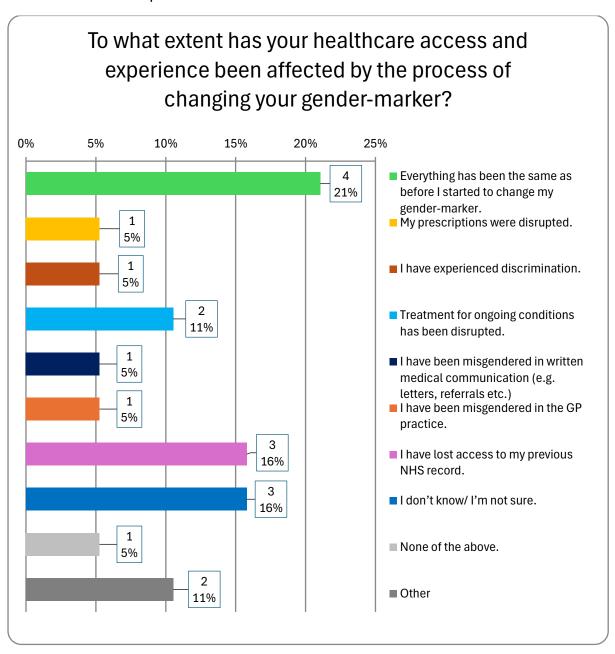
How long the process of changing their gender-marker took

Over half (54%, 7 people) had their gender marker changed in under 6 months, most of those (38%, 5) people having been changed in under a month. For almost a third (31%, 4 people) it took between 6 months to 2 years, with one person (8%) still in the process and waiting.



Experience and impact of changing their gender-marker?

Just over a fifth (21%, 4 people), reported that everything has been the same as before they started to change their gender-marker. However, 3 people (16%) have lost access to their previous NHS record.

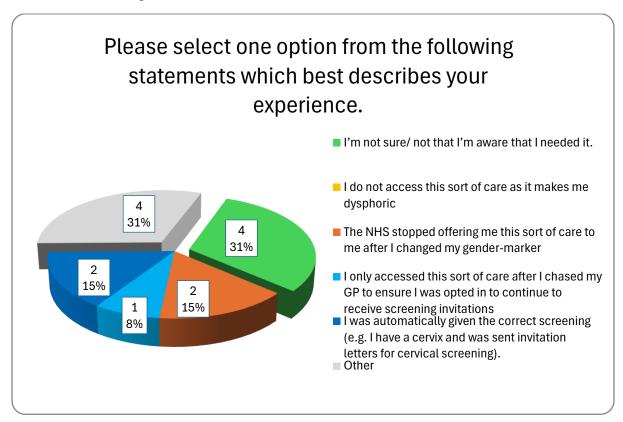


Accessing anatomy related conditions after changing their gender-marker

The NHS invites patients to access some care (such as cancer screening) based on their gender marker, conditions related to certain anatomy such as cervical screening (smear tests), or if you have a cervix or prostate screening if you have a prostate gland. Anatomy-based screenings are recommended.

Almost two thirds (31%, 4 people) were not sure or not aware that they still needed certain screenings based on their anatomy. A further 15% (3 people) reported that the NHS stopped offering them this sort of care after they changed their gendermarker.

Three people (15%, 2 people) reported that they were automatically given the correct screening (e.g. they have a cervix and were sent invitation letters for cervical screening).



The other comments show the lack of automatic prompts and reliance on people having to request the appointments or seek support elsewhere:

- "I stopped receiving automated letters from the NHS, but my practice nurse did talk to me about it one time to check I knew that I still needed to be screened."
- "I will have to request my next appointment myself."

- "Accessed this through Clinic T as I did not feel comfortable accessing this through my GP, as I don't believe that they are adequately aware of the nuances of trans bodies."
- "Not routinely invited but know when I need it and go to specialist clinic."

Additional comments about their experience

The additional comments reinforce the key points of this study: showing the different experience of GP support, and denial of treatment due to their changed gender marker:

Positive experiences:

- "As someone who has been all the way through the system, what's missing is all of the work I've had to do to find GPs who are supportive and helpful. I'm extremely lucky to live in an area where there is such a person but I think he might be the only one of his kind in the UK. I had to wait far too long to be seen by the GIC. I had to swich GPs 3 times because the GP refused to do what was required. I've had consultants belittle and ignore my trans needs. But I'm very fortunate to live in a very accepting area where every healthcare person is well aware of trans issues (Brighton) and am passable enough that I don't get too much push-back from most people. Systems and red tape, however, get all of us and can be terrible without suitable support."
- "I am lucky that I moved to Brighton and have access to WellBN, I know I would not have the same experience at another GP and means that for now I feel I cannot move until I receive the care I need. I have struggled with therapist services particularly Psychology Sussex where I was misgendered throughout and has meant I have not tried therapy since."

Lack of GP support:

- "Front of house staff at my GP is openly transphobic and incredibly rude to me. They are also incompetent at communicating. This is so psychologically troubling for me that I will rather pay privately or to go A&E rather than having to face the absolute ordeal of trying to interact with them. There is no safe process to address this with the GP himself as it all runs through the front of house staff. It is an absolutely awful experience. I can't believe I pay taxes/NI to be treated like this."
- "I think they need training about use of language and understanding. My GP's comments were even done in front of a support worker from another service they made a complaint. It took a really long time for the worker to

hear back from the, but they never contacted me to apologise. I also had a bad experience when having blood taken (not to do with my gender) and I feel anxious about returning to do this. I have too much going on at the moment to change GP surgery. I have now been referred by another service to the Trans Health hub in Brighton which has opened since I visited my GP last."

Note: Further quotes from this survey are provided in Appendix 1.

Recommendations

In light of these findings, we make the following recommendations:

- There should be clear guidelines and training for GP staff and other health workers:
 - to reduce the concerns of TNBI patients being treated negatively by members of staff.
 - on the importance of the use of TNBI patients' preferred names and pronouns.
 - on the importance of TNBI patients' gender markers, and clear information provided to patients on how to get their gender marker changed.
- 2. Gender markers should be amended to include non-binary as an option, to more accurately reflect patients' gender identity.
- 3. To alert NHS system leaders about the:
 - long waits for service users to be seen by a gender specialist, and the impact that can have on mental health.
 - need to reduce the long waits for patients to change their gender marker.
 - inconsistency of approach regarding HRT subscriptions and that patients are reliably informed of any changes in their subscriptions.
- 4. Patient records should include a 'body indicator' a marker that reflects the patient's physical anatomy relevant to clinical screening - to show which health screening patients should be referred to, irrespective of their gender marker.

These first two recommendations above could be achieved by sharing and publicising the ru-ok? guide <u>"A Guide for Professionals working with young LGBTQ people"</u> which explains the importance of how professionals communicate with this community (ru-ok? & Healthwatch Brighton and Hove, 2024).

References

- Cass, D. H. (2024). The Cass Review Independent review of gender identity services for children and young people. London. Retrieved from https://cass.independent-review.uk/wp-content/uploads/2024/04/CassReview_Final.pdf
- (n.d.). Brighton & Hove: 2021 Census briefing. Retrieved from https://www.brighton-hove.gov.uk/joint-strategic-needs-assessment-jsna/population-and-population-groups/gender-identity-and-trans-non-binary-and-intersex-tnbi-people-brighton-hove
- Cass, D. H. (2024). The Cass Review Independent review of gender identity services for children and young people. London. Retrieved from https://cass.independent-review.uk/wp-content/uploads/2024/04/CassReview_Final.pdf
- Healthwatch Brighton & Hove. (2024). If you're trans or non-binary, what's your experience of GP services? Retrieved from https://www.healthwatchbrightonandhove.co.uk/news/2024-10-29/if-youre-trans-or-non-binary-whats-your-experience-gp-services
- Healthwatch England. (2025). What trans and non-binary people told us about GP care. Brighton & Hove: Healthwatch England. Retrieved from https://www.healthwatch.co.uk/report/2025-07-25/what-trans-and-non-binary-people-told-us-about-gp-care
- ru-ok?, & Healthwatch Brighton and Hove. (2024). A Guide for Pressionals working with young LGBTQ oeople. Brighton & Hove: Healthwatch Brighton and Hove. Retrieved from https://www.healthwatchbrightonandhove.co.uk/sites/healthwatchbrightonandhove.co.uk/files/Speak%20Out%20Toolkit%20FINAL%20Oct%202024.pdf
- TransActual. (2021). Trans lives survey 2021: Enduring the UK's hostile environment.

 TransActual. Retrieved from https://transactual.org.uk/wpcontent/uploads/TransLivesSurvey2021.pdf

Appendix 1 - Survey question responses in full

In the main report, wherever comments were listed, we only included two of the most salient comments relating to that question. We present here the full list of responses for those questions:

Rating their GP for gender-affirming care

Comments that reflect this somewhat polarised opinion, included:

A supportive GP surgery:

- "I have a trans GP here in Brighton who has shaped his whole surgery to be trans inclusive. I asked for the hormones I need, and I was given the hormones I need."
- "I visit my GP practice regularly for testosterone injections and on balance the nursing team are very good. My GP is very affirming, and we've had discussions about my long-term health as a result of my gender affirming care."
- "My GP practice in Brighton is excellent. I've met with several of the team at various points and have ongoing 12 weekly injections so in regular contact."
- "Good, but my GP surgery has a specific TNBI Service in place. Other GPs are not good."

Positive comments were made about the supportive WellBN practice:

- "My GP is amazing, they offer informed consent HRT for those on the GIC waiting list (alongside some other criteria), have a very supportive and protrans environment and have a bunch of information for trans people on their website. I'm with WellBN in Brighton."
- "Since moving to Brighton, my GP has been excellent (it's WellBN, essentially a group of GPs covering a larger area than normal). There is a dedicated trans health team, easy access to bridging prescriptions for hormones, 3-month check-ups, and generally a positive, welcoming attitude to trans and non-binary people. Though this is unusual in the UK, and one of the main reasons I moved to Brighton."
- "WellBN trans health support was great after poor experiences with other services they listened, understood and supported me with my next steps. Including email advise and support. They were also honest and realistic in terms of NHS waiting times and that I was better placed going private, if possible, with my gender affirming care."
- "I use WellBN which allowed me to get a dysphoria diagnosis in a much simpler way than other parts of the country. I'm able to access HRT while on

the Charing Cross GIC wait list which is interminably long. This is lifesaving. Only drawback is I have to travel from Bevendean to WellBN in Benfield/ Hangleton to get blood tests as Brunswick WellBN is always full due to high demand."

• "I was open to care in the past from the Gender Clinic but suffered a severely traumatic event about 7 years ago that caused me to drop off my care. I then started buying hormones at a later date from the internet. In the past year (about 6 months ago), I went to my GP to ask to go back on to prescribed hormone replacement therapy. The GP said they didn't have a doctor that "specialises in sex change". She used the term 'sex change' several times. I had been prescribed hormones since age of 21 - I'm now 46. They basically told me to change to the WellBN clinic because "that's where they deal with people like you". They then just changed the subject and asking me about other health issues that I hadn't come to discuss."

Lack of GP support:

- "I'm not sure if I'll get the chance later, so I'll start by saying that I've had to change GPs 3 times to get to where I can get the care that I require. The most recent time because an understanding doctor retired, and the new people didn't even know that they were supposed to be working with a shared care agreement."
- "My GP sadly doesn't seem to be able to link together the impact gender identity, poor gynae care (sadly I'm AFAB and have PCOS) & poor mental health support. He's never once suggested looking at my hormones and the consultant care I had after he referred me to gynae was also horrific and so I've not pressed it any further, especially as in the interim I've been diagnosed autistic and seeking support for that would likely be just as fruitful. I feel like my GP can't really serve any part of my care, but I also don't know what else to do as WellBN aren't taking on new patients."
- "I feel that my local GP doesn't recognise my gender identity or honour it.
 The care I receive and pronouns used/way I am referred to does not acknowledge or respect me. And the fact that assumptions are made in terms of my relationships to others/reproduction is also not valuing to me."
- "My GP received a letter from the gender service asking them to prescribe me contraception, and they didn't get in contact about it with me for months. I had to ask for the prescription myself and was not walked through how to take it or any potential risks."
- "Refused to perform a general medical check-up required before surgery."

 "They didn't give me any information about my testosterone shot such as side effects or any pain after and I felt like they didn't do it correctly I was in a lot of pain."

Other:

- "My nurses at my surgery keep on top of my blood levels for my hormones & my doctor always answers my latest normal & trans health issues."
- "The only GAC I now get is testosterone injections every 14 weeks."
- "At this point, the only thing I require is for them to keep issuing my repeat prescription for HRT, and do the necessary periodic reviews, blood tests etc. They took over from my previous GP when I moved without an issue and have continued that way."
- "Blood test and HRT review."
- "I've been with one GP since before 2020 when I first sought out gender affirming care and was referred to a GIC; I initially accessed this privately. Shared care went relatively smoothly but I had substantial difficulties getting my records updated properly after my transition. More recently, I was transferred to a pilot (where the GP prescribed continuing the same medication, without any significant changes), and then in 2024 to the pilot Sussex Gender Service. I've recently had significant issues getting blood tests done by the GP."
- "I requested permanent sterilisation. The GUM clinic at Claude Nicole were very supportive and wrote to my GP. My GP did write to the CCG, but it had to go to a panel, and I had to try 2 more long-acting contraceptives before they agreed. Due to my gender identity and relationship to my body, trying the coil as I was required to under this rule was very disturbing and traumatic. My body also rejected the coil, and it was painful and resulted in a pregnancy possibility which also was traumatic as I have a phobia of pregnancy."
- "I was too distressed to go back to the GP and follow it up. Even years later I
 haven't. I'm not in a relationship with someone where there is a pregnancy
 possibility anymore, but I still don't want the capability of becoming
 pregnant."

Rating their GP for other care they have sought

Comments:

A supportive GP surgery:

- "Always have had good advice from my doctor on my normal & trans health."
- "I always feel listened to and given enough time to find my words. I've been at many practices in my lifetime, but WellBN on Western Road is by far the best in my experience. I love the equal importance of mental health alongside physical health."
- "They have a mental health team based at the surgery which I have found really helpful."
- "Ongoing issues so won't know how well this GP is for things other than trans related care for a while. They are VERY busy because they are pretty much the only helpful GP for trans people in the Brighton area."

Lack of understanding of the trans experience:

- "I can usually get an appointment when I need one. Although the last time I
 tried to see a GP I was instead given an appointment with an ANP, which I
 didn't like as I want my gender affirming care taking into account when
 discussing my cardio-vascular health."
- "General care has been okay. I think the smear test could have been more inclusive and empathetic towards the trans experience. That very much made me consider if I would do that again."
- "It's mixed, if I have a gender affirming nurse or Dr, then the care has been good. When not, then the care has been a bit dismissive or uncaring."
- "Wrong medications were given to me, I didn't feel listened to or heard by my GP. They made me feel not validated as an individual and wrongly prescribed drugs to me for mental health. There are only male GPs at my practice, and this is hard."
- "After changing my pronouns and title many moons ago the various NHS systems don't seem to talk to each other and in fact ended up getting a friend who works in hospital admissions to correct it on all platforms. My GP reception is such that you'd have to shout at full volume to declare you'd like a quiet 5 min alone with a receptionist to discuss delicate matters, which when you've already been misgendered feels ridiculous."
- "Went for UTI infection. Wasn't informed I could just get this via online doctor.
 Got an appointment that then was 2 hours delayed, and I had to leave without being seen (had to go to airport for work trip). The front of house

staff is rude incompetent and openly transphobic. I hate going there and pay privately wherever I can to avoid having to go there."

Other:

- "Seeking time off work following a traumatic experience where I was subject to a hate crime; GP provided sick note and signposted to psychological support services at Sussex Gender Service."
- "For minor things, e.g., appointment with the physio, they are good and quick, but with care for ongoing illness, I experience the same as I described before. The clinic I am seeing asks them to change my prescriptions or inform me on something, and they don't action these changes until I contact them myself. Thankfully I receive the letters quite quickly myself so I can usually ask them quite quickly, but they should action these changes themselves as my prescription has changed quite frequently in the past 2 years."
- "I am autistic and have long COVID, (both diagnosed) and my GP
 experiences have been very poor with GPs refusing to treat or advise on any
 acute symptoms that could be COVID related severe headaches, severe
 fatigue, skin and heart issues, anxiety, and repeatedly testing positive for
 COVID every couple of weeks."

I don't know/ prefer not to say:

• "I don't remember, it would have been at a previous GP surgery anyway."

Experience of accessing gender-affirming medication or hormone-replacement-therapy (HRT) prescriptions through their GP

Full list of 'Other' responses:

- "I don't want to take hormones but am looking to get top surgery. Will do this privately though as I don't think the NHS will be able to help me in any timeframe."
- "I have accessed HRT through private healthcare, which was then continued by my GP directly, and am now under the care of an NHS gender specialist."
- "I have previously been refused HRT from my GP then it was delayed and during that time I had HRT privately but now I get HRT through my GP with no issues."
- "I have requested my hormones to be tested and to have advice regarding taking hormones, but the Dr just looked at me and said, "you don't look like you have PCOS" and then ended the conversation."

- "I was under gender clinic 7 years ago but dropped off due to being severely traumatised. I have sourced online since."
- "I'm on HRT but there have had significant issues getting it over the last six years, I had to move GPs as my old one randomly stopped prescribing it to me!"
- "Mostly things have been ok once the GIC got things going. But that took about 4 years, and the bridging hormones weren't really enough. There have also been several gaps when I've been forced to change GPs due to staff changes."
- "When I moved to Brighton a few years ago, my GP was very good when prescribing HRT, I stopped taking it before there were some big shortages so am not sure how that would've affected me."

Waiting times to be seen by a gender identity specialist since they first contacted their GP

Comments

- "About 6 years through the NHS."
- "Am looking to do this privately. Have NOT contacted my GP as their front of house staff is transphobic."
- "I was placed on a waiting list and then saw someone privately (for diagnosis). My GP (in Leeds) then referred me to a specialist who saw me quite quickly, but the first appointment with him was also private."
- "I was seen by the GIC years ago, now discharged."
- "I'm past that stage now, but it took nearly 4 years initially."
- "N/A not referred."
- "My GP did not offer to refer me back to the gender clinic, but told me to change GP 'where they deal with people like you'."
- "Waited 20/04/2020 through 03/06/2024."

Why they have not changed their first name at their GP practice

Full:

- "I changed it a while ago when I was at a different practice."
- "I changed my first name 10 years previously, so it was already changed when registering for WellBN."
- "I changed my first name legally before registering with my Brighton GP."
- "I changed my name at a previous GP practice, age 19 (now 46)."
- "The idea of changing my name when they can't get title or pronouns right feels pointless - like I've mentally not thought about that part of my journey as I'm so worn down by these systems that already harm us."

Why they have not spoken to their GP practice about pronouns

One person reported that they changed their pronouns but haven't told their GP practice because they were not comfortable doing so, another because they were not sure how to, and another because they did not want to.

The other responses included:

- "A conversation about pronouns was never necessary, they switched pronouns along with updating my records to say I was male."
- "Front of house staff is transphobic so don't feel safe to disclose as I don't want this to affect the care, I'm able to get."
- "I am happy with the pronouns on my legal documents, I would prefer they/them but don't really know how to approach them about it and it doesn't affect me too much in terms of my care."
- "I pass so don't need to tell them."
- "I transitioned a long time ago; this question is irrelevant."
- "Idk [I don't know] how."
- "Not required."

Why they decided not to change their gender-marker

The 19 responses in full:

No suitable gender marker categories:

"Because I am non-binary and there isn't an option to do that."

- "I am still exploring being non-binary and gender fluid and also, I feel that the GP in the past has wrongly written down things on my records (naming me wrongly for my sexual identity which upset me based on their wrong assumptions) so I wouldn't trust them with this now that much."
- "I identify as non-binary, but also a lot of my medical issues related to my experiences as being discriminated against for having what is seen as a female body. I have chronic bladder issues that no one understands because most experts in urology specialize in male anatomy and the treatment and issues as well as menstrual related issues are not taken seriously. I also don't identify as a male or a man. I think in a medical situation it makes sense for Drs to know I have a body that has been assigned as female, because most of my health issues are specific to that. Even though I think that isn't relevant in other parts of my life."
- "Because there isn't a non-binary option".
- "I am non-binary, and that option does not exist".
- "There isn't an option for non-binary".

Worries:

- "I'm worried about losing my records and also not being notified of relevant health scans for my anatomy. I'm also a little daunted by the process, although I think it's likely I will do it in the future."
- "Am foreign and want to make sure everything matches my legal ID which
 is what documents my settled status and right to access NHS care. Also
 front of house staff at GP is transphobic and I don't want to jeopardize any
 healthcare access for me."
- "I am not far along enough in my transition to feel comfortable doing so".
- "I'm scared to ask for stuff these days".
- "Safety reasons".

Don't know how to change:

- "I do not know how to."
- "I don't think I am able to change my marker until I've been seen by the GIC, which is unfortunately likely to be many years away due to the long waiting lists."
- "I don't know how".
- "I thought it would be difficult".
- "I'm not exactly sure how to".

It's already changed:

- "I changed it at my old GP before registering with my new one when they
 referred me to the gender service. I may change it again for purposes of
 screening reminders in future."
- "I have changed it."

Other:

 "I forgot there was one, though they may have even changed it for me anyway."

Additional comments about their experience

The additional comments reinforce the key points of this study: showing the different experience of GP support, and denial of treatment due to their changed gender marker:

- "As someone who has been all the way through the system, what's missing is all of the work I've had to do to find GPs who are supportive and helpful. I'm extremely lucky to live in an area where there is such a person but I think he might be the only one of his kind in the UK. I had to wait far too long to be seen by the GIC. I had to swich GPs 3 times because the GP refused to do what was required. I've had consultants belittle and ignore my trans needs. But I'm very fortunate to live in a very accepting area where every healthcare person is well aware of trans issues (Brighton) and am passable enough that I don't get too much push-back from most people. Systems and red tape, however, get all of us and can be terrible without suitable support."
- "I am lucky that I moved to Brighton and have access to WellBN, I know I would not have the same experience at another GP and means that for now I feel I cannot move until I receive the care I need. I have struggled with therapist services particularly Psychology Sussex where I was misgendered throughout and has meant I have not tried therapy since."
- "I am lucky to have the GP I do. Most people do not have as good experience, and I can't move because I can't lose that care."
- "I feel very grateful that they have mental health workers as part of the surgery team!"
- "I so lucky to have a surgery so close to me that listened to my transgender needs. With good staff that help me out. Plus SGS positive help as well.
 Compared to waiting over 5 years for the GIC London."

- "My GP has been excellent for trans healthcare, but that is the reason I chose this GP, because I knew it had a very good reputation for transgender healthcare."
- "My GP is incredibly trans inclusive with a whole trans health hub, which I believe to be rare."

Lack of GP support:

- "Front of house staff at my GP is openly transphobic and incredibly rude to me. They are also incompetent at communicating. This is so psychologically troubling for me that I will rather pay privately or to go A&E rather than having to face the absolute ordeal of trying to interact with them. There is no safe process to address this with the GP himself as it all runs through the front of house staff. It is an absolutely awful experience. I can't believe I pay taxes/NI to be treated like this."
- "I think part of why I get misunderstood and not respected at the Dr is being autistic."
- "I think they need training about use of language and understanding. My GP's comments were even done in front of a support worker from another service they made a complaint. It took a really long time for the worker to hear back from the, but they never contacted me to apologise. I also had a bad experience when having blood taken (not to do with my gender) and I feel anxious about returning to do this. I have too much going on at the moment to change GP surgery. I have now been referred by another service to the Trans Health hub in Brighton which has opened since I visited my GP last."
- "Yes, my only piece of feedback is for the receptionists who have made assumptions about my gender based on my high phone voice. I would have appreciated them referring to my notes or politely asking me to confirm my pronouns, rather than misgendering me. I have completed my surgical transition so felt very jarring to have this happen again, especially after not feeling dysphoric for so long. However, I only have praise for the GPS, nurses, and blood test staff who are so kind, friendly, and have built a rapport with. They are honestly the best people, and I know I can be myself and talk to them about anything worrying me. When I first came out my GP back home years ago, told me everything was in my head, and I needed to get over it. This delayed me reaching out again, essentially adding an extra wait to be referred to the gender identity clinic. I feel so fortunate for the WellBN team who have solid trans education, monitoring, and who I feel do care deeply about their patients."

Other:

- "I transitioned 12 years ago and have had issues through that time due to being trans, such as having a female sex marker on my sexual health records and therefore being denied PEP at the pharmacy as they thought there had been a clerical issue. They literally said, "unless there's something you're not telling us!" implying of the shock factor if I did in fact tell them I was trans. Despite coming back several times, I eventually had to say to them "I am trans, please give me the PEP" in a full pharmacy which I was very unhappy about. If it happened to me now that I am more confident/ the comment wasn't made by the pharmacy assistant, it might not have bothered me so much."
- "I don't want my birth sex listed on my record as it opens me up to discrimination. I inform staff when I meet them where it could be relevant."
- "My NHS number has never been changed; I don't think that's right but am unsure what if anything it actually affects. I've been too burned out and busy with other life admin to try and address this."

Appendix 2 - Healthwatch Survey FAQ

healthwetch

FAQ: Healthwatch Survey on Trans and Non-Binary People's Experiences of GP Access

Participants and stakeholders:

Why is Healthwatch running a survey on Trans and non-binary people's experiences?

Research by the LGBT Foundation and TransActual shows that trans and non-binary individuals often encounter unique challenges and barriers when seeking healthcare, which can lead to unmet needs or negative experiences. By focusing on their experiences, we aim to identify issues, highlight what needs to change and advocate for inclusive, equitable healthcare for all.

Who should respond to the survey?

This survey is open to all gender-diverse people. If your gender identity differs from your sex assigned at birth, or you have a history with trans identity, we want to hear about your experiences of healthcare.

This survey is designed to centre the voices of Trans and non-binary people.

What if I haven't accessed healthcare services recently? Should I still participate?

Yes – even if you haven't used care services recently, your perspective healthcare and any past experiences you may have had are important to understanding the broader challenges Trans and non-binary people face.

Will the survey lead to real changes in healthcare?

Gathering feedback directly from these communities helps us better understand their specific healthcare needs, identify where services may fall short, and work toward improving care. Our goal is to use the feedback to drive positive change. By providing evidence-based recommendations, we can encourage care leaders and service providers to make changes that improve access to and quality of care for Trans and non-binary people.



I'm concerned about my privacy. How will my responses be used? How is my data protected?

We take privacy very seriously, and all responses to the survey are confidential. If you're interested in us asking you more about your experiences, you have the option to share your contact details. You don't have to provide these, and you can leave your answers anonymous. We will never share any identifying information without your explicit consent.

We'll use the data collected to identify trends, issues, and areas for improvement. Any information we share in our final reports will be anonymised, ensuring that individual respondents can't be identified.

Will participating in this survey impact my healthcare access?

No, your participation in the survey will not affect your access to healthcare in any way. Your responses are confidential, and healthcare providers cannot identify you based on your participation.

Can I share the survey with others who might want to participate?

We encourage you to share the survey with anyone who may have relevant experiences to share. You can share the survey link through social media, email, or word of mouth. The more people who participate, the stronger our case will be for improving healthcare services for Trans and non-binary people.

Who can I contact if I need help completing the survey or have more questions or concerns about it?

We are here to support you if you have difficulty accessing or completing the survey. Please reach out to your local Healthwatch if you need any help. They are here to listen and address any concerns you may have and want to ensure this survey is as inclusive and accessible as possible.

healthwetch

Non-participants/members of the public:

I don't believe in Trans or non-binary identities. Why should Healthwatch survey these groups?

Healthwatch believes everyone deserves the same quality of care. Our role is to listen to everyone and amplify their voices, particularly people from communities whose voices often aren't heard and who face health inequalities or barriers in accessing care.

I disagree with the idea of gender-affirming care. Why should Healthwatch support it?

Gender-affirming care encompasses medical, psychological, and social services to support individuals and, isn't always limited to Trans or non-binary individuals. Healthwatch supports the right of all individuals to access the care they need.

Shouldn't healthcare be about treating people's physical needs, not their gender identity?

Healthcare should be about treating *every* aspect of a person's wellbeing, including their physical, mental, and emotional health. Gender identity can play a crucial role in a person's healthcare needs, from accessing appropriate care to experiencing discrimination. Recognising and addressing these specific needs ensures everyone gets the most effective, compassionate, and respectful care possible.

Can't Trans and non-binary people access healthcare like everyone else? Why do they need special treatment?

While healthcare services are available to all, Trans and non-binary people often face barriers such as discrimination, lack of provider understanding, or difficulty accessing gender-affirming care. This survey is about identifying these barriers and ensuring Trans and non-binary people can access the same quality of care as anyone else, without prejudice or unnecessary obstacles.

healthwetch

Why is Healthwatch focusing on Trans and non-binary people when there are many other healthcare issues to address?

This is part of Healthwatch's broader efforts to improve healthcare for everyone. We want to ensure everyone has access to the healthcare they need, and that their voices are heard, and will focus in on different service areas or patient demographics to better understand what challenges and barriers to healthcare access exist.

Addressing specific challenges certain groups face does not detract from improving healthcare for all – it strengthens the overall quality and fairness of the system.

Appendix 3 – Promotional materials

Here are copies of the promotional materials we created to use in our social media and mailshots.



Appendix 4 – LGBT+ Switchboard Newsletter

You can read the full newsletter at https://us4.campaign-archive.com/?u=5513bd9c260a2ad6cbea17482&id=244db7932c



Healthwatch Brighton and Hove

113 Queens Road, Brighton BN1 3XG

01273 234 040

office@hwbh.co.uk

For more information about Healthwatch Brighton and Hove and what we do, visit **hwbh.co.uk**.