Stonewall



LGBTQ+ Life in the UK: 2026



Stonewall is a charity campaigning, supporting and advocating for Lesbian, Gay, Bi, Trans+ and Queer people.

We will work until every person who is LGBTQ+ is living free from discrimination, prejudice and inequality, making our shared future safer, fairer and more prosperous.

Stonewall is a diverse and inclusive organisation, underpinned by values that have helped us achieve decades of life-changing impact for LGBTQ+ people.

Our objectives, set out in our strategy *In Courage and Unity, Is Hope*, are to provide leadership to navigate turbulence for LGBTQ+ issues; to shape a policy and legislative agenda focused on improving LGBTQ+ lives; and to develop safe and inclusive places where everyone can work, play and succeed throughout their lives.

We will not rest until everyone, everywhere has equal rights.

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FOREWORD

Simon Blake OBE



In our strategy *In unity and courage is hope* we committed to ensuring data and evidence drives all of our work. I am therefore delighted to present our new report *LGBTQ+ Life in the UK: 2026*.

We last published research of this depth in 2018. If you, like me, are a before and after person, that was before Covid. So much has happened since then and so it was important we ask lesbian, gay, bi, trans+ and queer people across the UK about their lives now.

Working with YouGov, we asked almost 3,500 people about their families, their safety, their health, their work and money. And importantly about their hopes and fears in the years ahead. We then invited experts to review the findings and respond to what they found and I am delighted that we now have the most comprehensive picture of the experience of the LGBTQ+ community in the UK for almost a decade.

The good news first.

Nearly half of the people we spoke to believe acceptance of LGBTQ+ people is higher than it was ten years ago. Those who are open with family and friends overwhelmingly feel accepted by them. Fewer people are hiding who they are at work than when we last asked. Fewer are facing discrimination in shops, in bars and in healthcare. Three in four people who use LGBTQ+ community spaces find them welcoming. Running through the data is a clear link between being able to live openly and being happy. None of this happened by accident. It came from decades of campaigning, from pushing for changes to the law, and from millions of ordinary acts of courage: coming out at work, at the school gate and at the family dinner table.

But progress is not the same as arrival and there is so much more to do.

Half of the LGBTQ+ community feel pessimistic and worried about where equality is heading, and only a quarter feel optimistic. Importantly when we last asked, optimism outweighed pessimism by a wide margin. Something has shifted, and many people in our communities are now anxious, even fearful. Fewer than one in five believe politicians take our rights seriously. Fewer than one in four trust the police, the courts and government bodies to protect them. That should be a wakeup call for every single one of us.

For trans+ people, the picture is even starker. Eight in ten are pessimistic about the future. Nearly two-thirds see transphobic abuse online in any given month, around double the figure when we last asked. Many avoid streets, bars and gyms, and some even avoid their own families, to stay safe. That is a dark stain on our shared humanity.

When we asked what LGBTQ+ campaigning should prioritise over the next ten years, trans+ rights was the most common answer. Those who wanted less focus on trans+ rights were outnumbered nine to one. As one person put it: ‘until all of us are equal & free, none of us are equal & free’.

Some of the statistics are harder still. More than half of LGBTQ+ people have considered suicide at some point in their lives. Take that in. Most hate crime experienced by queer people goes unreported, because people do not believe anything will change. Just as in 2017, fewer than half would feel comfortable holding a partner’s hand in the street.

These findings must not be a reason to despair. They are a heat-map. They show where legal changes have improved lives and where they have not yet reached people’s lives. They also show where changes have hurt our community. They show why LGBTQ+ equality must remain a priority for all politicians.

They remind us that those in our community most likely to be left behind must shape what comes next including trans+ people, disabled people, people of colour, asylum seekers and refugees and people of faith. The findings also show us that those things that make the biggest difference to people’s lives – being able to be yourself and being accepted by the people around you – are within our collective power to change.

LGBTQ+ Life in the UK: 2026 reflects what many of us instinctively feel: there has been genuine progress towards achieving equality for the LGBTQ+ community, but that progress is not experienced equally by all of us. For trans+ people in particular things feel worse not better, and for the whole community the future looks uncertain.

We are standing at a crossroads: we must continue working for positive change as the political and cultural climate poses new and real risks to our freedoms and our families. Some of the data in this report makes for tough reading, and it should sharpen our resolve to unite for change.

This report looks both backwards and forwards. It provides important data as we work to create a safe and equal world for all LGBTQ+ people to live, work and thrive.

My ask is that you work with us to make sure the next report tells a better story. That means all of us understanding what this data tells us and being determined to act.

Thank you to everyone who took the time and energy to share their experiences with us, sometimes in painful detail and to everyone who reviewed the findings and offered their perspective. Together you have given us a clear picture of who we are and what we need.

As I say often, 15-year-old me who was in awe of the people who had the courage to found Stonewall would never have believed the progress in his lifetime. 52-year-old me cannot believe how much further we still have to go to realise our vision of a world where everyone, everywhere has equal rights.

LGBTQ+ equality must remain a priority for all politicians



SIMON BLAKE OBE
CEO, Stonewall

FOREWORD

Sandi Toksvig



In 1979, in my final year at Girton College, Cambridge, the college authorities discovered I was gay. They were so horrified they tried to throw me out. In the end I was allowed to stay because of my excellent academic record. So my advice has always been: if you must be homosexual, do at least be clever about it.

Fifteen years later, under threat from the tabloids, I did an unheard-of thing. I told the press that I was in a relationship with a woman. We had three children, and we two mums did not want them growing up in the shadow of a secret. The next morning, the front page of the Daily Mail informed the nation: "If God had meant lesbians to have children he would have made it possible." Given that we already had three, I felt the point had been somewhat answered. The death threats came anyway, and my family had to go into hiding. I was told my career was over and I would never work again. Much to the irritation of the Daily Mail, I have somehow managed to struggle on.

I tell these stories because they show how far we have come. A couple of years ago, Girton publicly apologised to me and made me an honorary fellow. Earlier this year I rang the bell for equality at the London Stock Exchange, a building not famous for its warm, fuzzy, inclusive spaces, alongside its out and proud chief executive. Thirty years ago, none of that would have seemed possible.

But I also tell them because I have learned that coming out is not something you do once. Being out – and proud, and loud if you can be – is an everyday necessity, and never more so than now.

That is why this report matters so much. When I came out, there was no shortage of people willing to tell the public what lesbians were, what our families were and what we deserved. What was in short supply was evidence: the actual lives of LGBTQ+ people, told by LGBTQ+ people. Prejudice thrives on silence and assumption. Data does not leave much room for either.

In these pages, almost 3,500 LGBTQ+ people from across the UK tell us about their lives. Much of it is cause for celebration. Most of those who are open with family and friends feel accepted by them, and our community spaces are more welcoming than they were. But some of it stopped me in my tracks. LGBTQ+ parents are still meeting the same tired assumptions about who counts as a real family. Fewer than half of LGBTQ+ people would feel comfortable holding a partner's hand in the street. Most anti-LGBTQ+ hate crime is never reported so the official figures, already rising, tell only part of the story. And trans+ people, overwhelmingly, feel the ground shifting beneath them.

Hard-won rights can be rolled back, and we would be foolish to think it could not happen here. So we must stay alert, stay organised and stay connected. When I talk about community, I mean everybody, leaving no one out: lesbian, gay, bi, trans+ and queer, standing shoulder to shoulder. Those who oppose us would very much like us to be divided. We should disappoint them. We should also, frankly, keep having more fun than they do. I suspect they have always envied that.

This report also reminds me how much we lose when we lose our places to meet. As LGBTQ+ venues close, so do the chances for conversation, laughter and the passing of wisdom from one generation to the next. Seek out your elders. Seek out the young. Wisdom often comes from people who once felt excluded and now, against the odds, belong.

I believe that equality is not only achievable but inevitable, even when progress is hard to see. But inevitable does not mean automatic. It takes work, and it takes evidence like this to show those in power exactly what needs to change. We cannot allow another generation to grow up with the silence, fear and prejudice that so many of us did.

I want all of us to do more than survive. I want us to thrive. Read this report, share it, and then let's get on with it.

SANDI TOKSVIG

Executive summary

LGBTQ+ Life in the UK: 2026 examines the lives of LGBTQ+ people across the country, documenting experiences of equality, belonging, safety, health, work, and future planning.

The first major report of its kind from Stonewall since 2018, it captures almost a decade of change in LGBTQ+ equality, revealing that many believe acceptance has increased over the last ten years, while also finding significant pessimism about the future.

The report provides comparative analysis with the data presented in Stonewall's landmark *LGBT in Britain* series, published between 2018 and 2020. It shows that in many areas of life, reported levels of discrimination are now lower, including in public, at the workplace, and in accessing healthcare.

Discrimination nonetheless remains unacceptably high in some settings, and the daily lives of LGBTQ+ people are not without challenge. The mental health data revealed in this report is particularly stark, pointing to the impact of sustained inequality on personal wellbeing.

Our data also shows that the greatest burden of inequality often falls on the more marginalised within our community, including those with disabilities, ethnic minorities and, invariably, trans+ people. In fact, the evidence presented in this report is overwhelming; trans+ people document worse outcomes across virtually every metric including higher levels of discrimination, poorer mental health and wellbeing, and lower confidence in future life security. In contrast to the overall LGBTQ+ population, a majority feel that acceptance has fallen in the last decade, and there are very high levels of pessimism about the future of LGBTQ+ equality.

While the national picture may be challenging, it is positive to discover that LGBTQ+ people generally report feeling accepted by their immediate social networks. Many find friends, family, and their LGBTQ+ community to be sources of support and belonging.

Together, the evidence presented in this report suggests there has been progress made toward the goal of achieving equality for LGBTQ+ people in the UK over the last decade, but as challenges have arisen – notably organised opposition to trans+ rights and the proliferation of an anti-rights rhetoric – progress feels fragile as we look to the future.

In the face of these challenges, policymakers must now renew their commitment to LGBTQ+ equality so that solutions to the issues highlighted in this report are found, and that the progress made is safeguarded, built on, and extended to all LGBTQ+ people in every part of the UK.

Many believe acceptance has increased over the last ten years, but there is significant pessimism about the future

Key findings

1 Equality - progress, challenges, and the state

- Around half (48%) of all LGBTQ+ people believed that acceptance was higher than ten years ago, a quarter (26%) of trans+ people said the same.
- Half (50%) of LGBTQ+ people were pessimistic about the direction that LGBTQ+ equality is going in the UK, rising to 80% of trans+ people.

2 Belonging - family, friends, and community

- Two-thirds (67%) of LGB+ people were open about their sexual orientation to family, with 88% to friends. Half (52%) of trans+ people were open about their gender identity with family, and 85% with friends.
- Most LGB+ respondents felt accepted by family (93%) and friends (99%), but fewer trans+ people felt accepted by family (86%) and friends (95%).

3 Safety - discrimination, crime, and abuse

- 7% of LGBTQ+ people reported that they had ever been questioned about their sex assigned at birth when using single-sex spaces, including 41% of trans men and 32% of trans women. 11% of lesbians also reported this.
- 18% of people who experienced a potential hate incident in the last year reported it to police. Half (54%) of those who reported to police were dissatisfied with their response.
- Almost two-thirds (64%) of trans+ people had experienced indirect transphobic abuse online in the previous month.

4 Health - services, mental health, and wellbeing

- 18% of LGB+ people said that healthcare staff lacked understanding of LGB+ health needs, while 39% of trans+ people experienced the same for trans health needs.
- Half (54%) of all LGBTQ+ people had ever considered suicide, and 22% had attempted suicide. This rises to 71% and 32% of trans+ people.

5 Work - inclusion, discrimination, and finances

- A third (30%) of LGB+ people had hidden or disguised their sexual orientation at work during the last year, while 46% of trans+ people had done so for their gender identity.
- One in ten LGBTQ+ people had experienced negative comments or conduct from colleagues (11%) and customers or clients (10%) on account of their LGBTQ+ identity in the last year.

6 Future - financial planning, family formation, and older age care

- Over half (55%) of LGBTQ+ people do not have confidence in being financially secure in retirement.
- Just a third (33%) of LGBTQ+ people have confidence that care providers would understand their needs as an LGBTQ+ person, but this is lower among trans+ people (18%).

Introduction

In 2017, Stonewall commissioned YouGov to survey LGBTQ+ people on their experiences of everyday life across key areas such as health, home and community, work, and university. More than 5,000 LGBTQ+ people generously shared their experiences, which formed the basis of a series of reports, *LGBT in Britain*, published between 2018 and 2020.

This was a landmark series, cited widely by those in the sector and beyond. It was also published in a markedly different political climate. Since then, LGBTQ+ people have faced growing pressures, and as we experience increasing threats both to our community and to broader civil society, there is a perception among many that life has become more challenging.

LGBT in Britain was released at a time when published data on LGBTQ+ people was limited. Following its release, the evidence base has grown through the UK Government's National Survey in 2018, the Censuses of 2021/22, and research by LGBTQ+ and other organisations. We know more about the needs and wants of the LGBTQ+ community than ever before, but as this report reflects, this doesn't always translate into action from policymakers.

Almost a decade on, it is time to build on the legacy of *LGBT in Britain*, renew our evidence base, and establish how life has changed for LGBTQ+ people since 2017. *LGBTQ+ Life in the UK: 2026* identifies where there has been progress, where issues remain, and where emerging challenges demand action.

Since *LGBT in Britain*, the acronym we use to refer to our community has changed, and it is right that the title of this new report reflects this. *LGBTQ+ Life in the UK: 2026* better represents Stonewall's inclusive approach to securing equality for all lesbian, gay, bisexual, trans+ and queer people across all four nations of the UK.

The data underpinning this report, once again generated in collaboration with YouGov, is rich and expansive. It allows us to understand where experiences are similar across the LGBTQ+ population, as well as where outcomes differ between parts of the community. Throughout the report, we present these differences wherever possible, recognising that the LGBTQ+ population is not monolithic.

LGBTQ+ Life in the UK: 2026 identifies where there has been progress, where issues remain, and where emerging challenges demand action

This report is divided into six substantive chapters, each covering a different theme. These are:

- Equality – progress, challenges, and the state;
- Belonging – family, friends, and community;
- Safety – discrimination, crime, and abuse;
- Health – services, mental health, and wellbeing;
- Work – inclusion, discrimination, and finances;
- Future – financial planning, family formation, and older age care.

This report is aimed at a broad audience: policymakers, LGBTQ+ organisations, wider civil society, and the LGBTQ+ communities themselves.

LGBTQ+ Life in the UK: 2026 is just one way we are meeting our strategic objective of shaping policy and legislative change through evidence. However, its value extends beyond this report: its findings add to existing evidence on LGBTQ+ experiences in the UK, and will inform our work in the coming years to ensure all LGBTQ+ people are safe, equal, and thriving.

SECTION 1

Equality - Progress, Challenges, and the State

A core function of the state is to provide equality for all, ensuring that marginalised communities are recognised as equal citizens and legally protected regardless of shifting social attitudes or political pressures.

It is positive then that the last decade has seen significant legal and policy developments towards equality for LGBTQ+ people, with increasing inclusion of sexual orientation and gender identity in government policymaking, and progressive legislative reforms.

In 2018, the LGBT Action Plan was published by the Conservative Government,[1] outlining how it planned to improve the lives of LGBT people and drawing significantly on data gathered through the landmark National LGBT Survey in 2017.[2] Moreover, the Censuses of 2021-22 strengthened our understanding of the LGBTQ+ community, with all four UK nations collecting data on sexual orientation for the first time, and all but Northern Ireland gathering gender identity data.

Laws aimed at addressing the historic injustice of the criminalisation of same-sex activity were also adopted in the last decade. Fifty years on from partial decriminalisation in England and Wales, the 'Alan Turing Law' introduced automatic pardons for historic convictions.[3] In 2022, the scheme was expanded to a wider range of offences, and also covered women for the first time.[4] Scotland and Northern Ireland adopted similar legislation in 2018.[5]

Additional initiatives included addressing the dismissal of LGBTQ+ people from merchant ships in 2017,[6] and the 2023 Etherton review into systemic abuse and criminalisation of LGBTQ+ people in the UK armed forces.[7]

One of the most significant reforms during the last ten years was the introduction of same-sex marriage in Northern Ireland, through legislation brought in by the UK Government in 2019.[8] At the time, Northern Ireland was the only UK nation not to have legalised same-sex marriage through its own legislature, with England and Wales and Scotland having done so in 2013 and 2014 respectively.

At the same time as these advances, tensions on trans+ rights erupted in the legal and policy space. Proposed reforms to gender recognition laws in England and Wales were abandoned amid a contentious public debate, while in Scotland the *Gender Recognition Reform (Scotland) Bill 2022* was controversially blocked by the UK Government.

This conflict also notably moved into the courts, with the Supreme Court in *For Women Scotland v The Scottish Ministers* ruling in April 2025 that the definition of 'sex' for the purposes of the Equality Act 2010 refers to 'biological' sex.[9] In May 2026, the Equality and Human Rights Commission published its long-awaited updated Code of Practice for Services, Public Functions, and Associations in an attempt to clarify how service providers should implement the ruling.[10] This was one of the most consequential developments on LGBTQ+ rights in recent history, and its ramifications are yet to be fully felt.

Overall, the story of the last decade is mixed, and the responses to the questions in this section reflect that, highlighting both advances in LGBTQ+ equality and concerns about the future, with a sense that hard-won gains are now under threat.

A core function of the state is to provide equality for all

“This report brings a vital discussion to the fore: when rights are eroded and discrimination goes unchallenged, we create the conditions for isolation, exclusion and worsening mental health. Defending your dignity, anticipating hostility or wondering whether the state will protect you takes a toll, particularly for trans+ people. Political leaders must answer for the human consequences of their decisions. Our sector must challenge prejudice, tackle discrimination within our own services and stand alongside LGBTQ+ communities.
We cannot keep asking people to become more resilient while making their lives less safe. We have it in our gift to protect rights, confront hostility and help build a future people can trust.”

Sarah Hughes
Chief Executive, Mind



Progress over the last decade

When asked whether acceptance of LGBTQ+ people was higher, lower, or about the same compared with ten years ago, around half of our sample said they believe that acceptance has increased (48%), compared with 32% who said that acceptance is lower (net +16%).[11]

There was some variation based on identity, with bisexual people most likely to say that acceptance was higher (51%, net +20%), especially bisexual men (58%, net +34%). The most significant variation, however, was that trans+ people were much more likely to say that acceptance was lower than ten years ago (58%, net -32%), including three-quarters of trans women (75%, net -68%).

In terms of regional variation, fewer respondents in both Scotland (44%, net +6%) and Wales (45%, net +14%) believed that acceptance had increased compared with the UK average.

Prompted to identify the most significant improvement in LGBTQ+ equality over the last ten years, two factors were most frequently highlighted.[12] Firstly, the legalisation of same-sex marriage was cited by 693 respondents (20% of all respondents). As the response that follows recognises, despite occurring outside the review period (except in Northern Ireland), it was a landmark legislative change and its impact was felt throughout the last decade:

> ***Obviously gay marriage was legalised over 10 years ago, but it takes a few years of gay weddings to happen for people to start to socially accept this. I feel that by the time I got married in 2020 that there was little prejudice or unconscious bias***
>
> lesbian cisgender woman, 25-34

The second most common factor was ‘acceptance’, which was referenced by 609 respondents (18%). While less tangible, this reflects the feeling among many that, in general, LGBTQ+ people enjoy greater levels of social inclusion than a decade ago. For instance:

> ***There has been massive movement in the acceptance of LGBTQ+ over the past 10 years led mainly by the youth who are much more accepting of LGBTQ+ people***
>
> gay cisgender man, 55-64

> ***Greater acceptance and greater openness, both in wider society generally, and in the workplace***
>
> bisexual cisgender man, 55-64

Around half said they believe that acceptance has increased

There is also a relationship between these factors. As the response below illustrates, legislative change and social acceptance are interconnected, with the passage of progressive laws having the ability to positively influence social attitudes:

> ***I know it wasn’t strictly in the last 10 years, but the Marriage (Same Sex Couples) Act 2013 to me marks the moment when people around me began to treat queer people as truly equal and not perverse or deviant. I noticed a real shift around 2016 in the way people spoke about and reacted to LGBTQ+ people - it became a lot more accepting and positive***
>
> lesbian cisgender woman, 25-34

Many also identified increased visibility in the public sphere, such as better representation in media, as a positive change. For instance:

> ***General presence in mainstream media means that LGBTQ+ seems less ‘other’ and a bit more normalised***
>
> asexual cisgender woman, 25-34

Table 1 outlines the individual factors most frequently mentioned in response to this question, grouped together under thematic headings.[13]

Present-day challenges

Despite more of our sample feeling that there has been an increase in acceptance of LGBTQ+ people in the last decade, the data suggests there is a perception that progress towards equality has stalled, with low levels of optimism about the direction of travel in the UK.

A quarter of our sample reported being optimistic about the direction that LGBTQ+ equality is going in the UK (24%), compared with half who reported that they were pessimistic (50%, net -26%). Trans+ people were overwhelmingly pessimistic (80%, net -72%) compared with cisgender LGB+ people (44%, net -17%). There is also an age divide, with young people more likely to be pessimistic than the older populations (18-24: net -26%, 65+: net +5%).[14]

This pessimism cannot be explained simply by a general tendency towards cynicism or nostalgia: the same question asked in our similar research in 2017 generated an overall net optimism score of +40%, and +14% among trans+ people, suggesting that the pessimism seen in 2026 might be a response to current political conditions.

Social inclusion (n=889)	Law reform and legal rights (n=810)	Public visibility (n=370)
Acceptance (n=609)	Laws/legal (n=73)	Media/TV (n=248)
Attitudes (n=41)	Marriage equality (n=693)	Representation (n=154)
Awareness (n=72)	Protections (n=37)	Visibility (n=122)
Normalisation (n=89)	Rights (n=131)	
Openness (n=117)		
Understanding (n=47)		

Table 1. Most significant improvements in LGBTQ+ equality in the last ten years by theme

Trans+ rights (n=1160)	Political (n=812)	Prejudice (n=509)	Law reforms and legal rights (n=234)	Media (n=182)
Trans (n=934)	Extremism (n=46)	Bigotry (n=104)	Equality (n=86)	Social media (n=44)
Transphobia (n=296)	Government (n=118)	Discrimination (n=97)	Laws/legal (n=126)	Traditional media (n=144)
	Politicians (n=71)	Homophobia (n=124)	Rulings (n=50)	
	Reform (n=184)	Hate (n=220)		
	Right (wing) (n=545)	Religious (n=121)		

Table 2. Biggest challenges currently facing LGBTQ+ equality by theme

Just a quarter reported being optimistic about the direction that LGBTQ+ equality is going in the UK

Analysis of the qualitative data supports this, with two possible contributors to this pessimism: the pushback on trans+ rights and the increasing influence of an anti-rights rhetoric. When asked for the biggest challenge currently facing LGBTQ+ equality, around a quarter of respondents referenced opposition to trans+ rights as a challenge (27%, n=934).[15] For instance:

> ***The erosion of trans rights and the politicisation of trans rights - there seems to be no ground for shared discussions and this is making lives incredibly difficult for trans people***
>
> bisexual cisgender woman, 18-24

Conversely, a small minority of respondents described a focus on trans+ issues as a barrier to broader LGBTQ+ equality (3%, n=102). These responses demonstrate the division that has grown on this issue, even within the LGBTQ+ community, but they remain outnumbered by a rate of around nine to one by those expressing views supportive of trans+ rights.

The second most common challenge identified was the political right, which attracted 545 responses (16%). Several respondents suggested that these were interconnected challenges, with some actors on the right using trans+ issues to sow division:

> ***Opposition to trans rights, particularly with respect to gender non confirming people (trans or not), and how it's being used as a wedge issue for the right wing***
>
> bisexual cisgender woman, 35-44

> ***The biggest challenge is from the far right and media organisations using the 'trans debate' to undermine progress, scare people and mislead them***
>
> gay cisgender man, 25-34

Our data also identified an apparent trust deficit between LGBTQ+ people and the state, which may also be contributing to this pessimism about LGBTQ+ equality. Our findings reveal that:

- 23% trust state institutions such as the police, courts, and government bodies, to protect the rights of LGBTQ+ people, with 50% distrusting (net -27%).[16]
- One third (32%) feel that laws, policies, and official guidance protect the rights of LGBTQ+ people, whereas 41% disagree (net -9%).[17]
- A majority do not believe that politicians take the rights of LGBTQ+ people seriously: just 19% agree, while 58% disagree (net -39%).[18]

Trust in the state was highest among gay men and older LGBTQ+ people. Respondents in Scotland expressed greater trust across all three metrics by four percentage points compared with the UK average. In Wales, trust in state institutions was lower (18%, net -32%), while the other two metrics were comparable to the UK average.

Trans+ people were much less likely to trust state institutions (net -66%), feel that laws, policies, and guidance protect their rights (net -53%), and believe that politicians take LGBTQ+ rights seriously (net -72%).

Notably, there was no material variation in trust in state institutions based on ethnicity within our sample, which contrasts with some published evidence that has found low trust in state institutions, particularly police and courts, among ethnic minorities.[19]

Future priorities

Finally, we asked our sample to identify what the priority for LGBTQ+ advocacy should be in the next ten years.[20] In line with the challenges identified above, respondents most frequently identified trans+ issues as the priority (24%, n=825), recognising the need to secure trans+ rights against increasing opposition. For instance:

> ***Trans rights, because until all of us are equal & free, none of us are equal & free, and trans people are in the spotlight right now***
>
> bisexual cisgender woman, 25-34

> ***Standing together as and with the whole LGBTQ+ community, and not accepting a rollback on trans rights***
>
> gay cisgender man, 55-64

"As reflected in the report, the last decade has seen an onslaught of misinformation and hatred directed at trans+ people. Trans+ people's lives have become a political football, picked up and run with by an irresponsible media and others intent on playing out a culture war that seeks to divide and inflame. This has been brought into sharp focus by the 'For Women Scotland' Supreme Court judgment in April 2025 which set trans+ rights back 25 years, especially following its adoption by the Equality and Human Rights Commission, leaving employers, service providers and schools who wish to be trans+ inclusive having obstacles placed in their way and trans+ people excluded from full participation in UK society. The wider danger is that if it is seen that anti-trans campaigning can succeed – against the general will of the population – who will be next?"

Robin White
Barrister, Old Square Chambers



Trans+ rights (n=829)	Law reform and legal rights (n=661)	Social inclusion (n=301)	Education (n=253)	Prejudice (n=222)
Trans (n=825)	Conversion practices (n=46)	Acceptance (n=219)	Education (n=229)	Discrimination (n=68)
Transphobia (n=48)	Equality (n=292)	Normalisation (n=43)	School (n=62)	Hate (n=116)
	Hate crime (n=63)	Understanding (n=55)		Homophobia (n=54)
	Laws/legal (n=192)			
	Protections (n=218)			

Table 3. Priority areas in advocating for LGBTQ+ equality in the next ten years by theme

A quarter of respondents referenced opposition to trans+ rights as the biggest challenge currently facing LGBTQ+ equality

As above, a much smaller number of people expressed priorities such as reducing the focus on trans+ rights and endorsing a separation of LGB+ and trans+ advocacy (3%, n=90). These views were again far outnumbered by supportive voices by a rate of around nine to one.

Beyond this, responses were more varied. The next most popular response was 'equality' (8%, n=292). This was a cross-cutting response that covered many areas, but responses such as the one that follows highlighted the need to secure equality protections for LGBTQ+ people against increasing threats:

> *Ensuring that the current levels of equality are at a minimum maintained and not allowed to slip away*

gay cisgender man, 25-34

Again, there is a relationship between these factors, with some perceiving opposition to trans+ rights to be part of a broader undermining of the rights of LGBTQ+ people generally:

> *Stop treating trans lives as political points to be scored. The attacks on the rights and lives of trans people are attacks on all of us*

gay non-binary person, 25-34

> *Trans rights are the number one priority at the moment. Attacks on trans people are a wedge to try and start breaking the rights we've managed to get through struggle*

bisexual cisgender man, 35-44

Summary

Taken together, this data paints a picture of a UK which has seen meaningful advancements in LGBTQ+ equality over the last decade, with much of our sample perceiving higher levels of acceptance, alongside notable legislative change and increased visibility.

However, there is a feeling that progress has stalled, with widespread concerns around challenges to trans+ rights and the rising influence of right-wing political views. There is little optimism for the future of LGBTQ+ equality, and a significant trust deficit in the state.

These overall statistics, while telling, suppress variations within the community. Most notably, feelings of acceptance, optimism for the future, and trust in the state are all substantially lower among trans+ respondents compared with cisgender people.

The data shows that there is a need to redouble efforts to promote social inclusion of LGBTQ+ people and to safeguard and build on hard-won equality protections. The focus of these efforts must be on the most marginalised parts of the LGBTQ+ community, especially trans+ people.

As many of the qualitative responses included here indicate, this is not just a battle that must be fought for its own sake, but with recognition that trans+ rights are being used as a wedge issue to challenge LGBTQ+ equality more broadly.

1 Government Equalities Office, *LGBT Action Plan,* 2018. https://assets.publishing.service.gov.uk/media/5b39e91ee5274a0bbef01fd5/GEO-LGBT-Action-Plan.pdf.

2 Government Equalities Office, *National LGBT Survey,* 2018. https://assets.publishing.service.gov.uk/media/5b3b2d1eed915d33e245fbe3/LGBT-survey-research-report.pdf.

3 *Policing and Crime Act 2017.* https://www.legislation.gov.uk/ukpga/2017/3/contents.

4 Home Office, *More historic convictions for homosexuality to be wiped,* 2023. https://www.gov.uk/government/news/more-historic-convictions-for-homosexuality-to-be-wiped.

5 *Historical Sexual Offences (Pardons and Disregards) (Scotland) Act 2018.* https://www.legislation.gov.uk/asp/2018/14/contents. *Policing and Crime Act 2017 (Commencement No.2) Order (Northern Ireland) 2018.* https://www.legislation.gov.uk/nisr/2018/128/made.

6 *Merchant Shipping (Homosexual Conduct)* Act 2017. https://www.legislation.gov.uk/ukpga/2017/26.

7 *Ministry of Defence, LGBT Veterans Independent Review,* 2023. https://www.gov.uk/government/publications/lgbt-veterans-independent-review.

8 *The Marriage (Same-sex Couples) and Civil Partnership (Opposite-sex Couples) (Northern Ireland) Regulations 2019.* https://www.legislation.gov.uk/uksi/2019/1514/contents.

9 *For Women Scotland Ltd (Appellant) v The Scottish Ministers (Respondent),* [2025] UKSC 16. https://supremecourt.uk/cases/uksc-2024-0042.

10 Equality and Human Rights Commission, *Code of practice for services, public functions and associations,* 2026. https://www.equalityhumanrights.com/equality/equality-act-2010/codes-practice/services-public-functions-and-associations-code-0.

11 C2. Do you feel that acceptance of LGBTQ+ people in the UK is higher, lower, or about the same compared with ten years ago?

12 C3. Looking back at the last ten years, in your opinion, what, if anything, do you think is the most significant improvement in LGBTQ+ equality in the UK?

13 For readability, Tables 1-3 in this section report individual coded responses mentioned by at least 1% of total respondents (n=35) and themes mentioned by at least 5% of respondents (n=174). Theme counts represent the number of respondents who mentioned at least one factor in that theme and do not equal the sum of all factors due to some respondents mentioning more than one. Coding captures synonyms and related words.

14 C1. How optimistic or pessimistic do you currently feel with the direction LGBTQ+ equality is going in the UK?

15 C4. In your opinion, what is currently the biggest challenge facing LGBTQ+ equality in the UK?

16 C6. To what extent, if at all, do you trust or distrust state institutions, such as the police, courts, and government bodies, to protect the rights of LGBTQ+ people?

17 C7_1. I feel that laws, policies, and official guidance protect the rights of LGBTQ+ people.

18 C7_2. I feel that politicians take the rights of LGBTQ+ people seriously.

19 Government Equalities Office and others, *Inclusive Britain update report,* 2023. https://www.gov.uk/government/publications/inclusive-britain-update-report/inclusive-britain-update-report.

20 C5. Looking ahead to the next ten years, in your opinion, what, if anything, do you think should be the priority in advocating for LGBTQ+ equality in the UK?

SECTION 2

Belonging - Family, Friends, and Community

The relationship between the individual and the state, discussed in Section 1, is key to achieving legal equality, but close social networks, including family, friends, and the community, play a key role in shaping a sense of belonging.

Regrettably, however, both families and schools often lack understanding of LGBTQ+ experiences and become a source of social exclusion and isolation, while education on LGBTQ+ relationships and families is often inadequate.

It is positive then that in recent years there have been some advancements in LGBTQ+ inclusion in schools. For instance, in 2025 the Department for Education updated its guidance on Relationships, Sex and Health Education, providing for stronger recognition of different family structures including those with same-sex parents.[21]

More contested, however, is teaching on gender identity. Most recently, the UK Government consulted on guidance related to "gender-questioning children" as part of broader safeguarding guidelines.[22] This area continues to evolve and will no doubt be a significant point of debate in the coming years.

In religious communities – another important place of belonging for many – there have also been some moves towards LGBTQ+ inclusion. For instance, in 2022 the Church of Scotland voted to allow ministers and deacons to conduct same-sex marriages.[23] By contrast, the Church of England abandoned its own plans to permit same-sex blessings in 2026.[24]

While families, schools, and places of worship remain settings where some LGBTQ+ people feel reservations about being open, many find belonging among like-minded people in LGBTQ+ community spaces. Yet the availability of physical spaces for the LGBTQ+ community is shrinking rapidly: in London alone, more than half of LGBTQ+ venues closed permanently between 2006 and 2022.[25]

Taken together, there is a risk of isolation for LGBTQ+ people and fragmentation within the community, and our data shows some evidence of this, but also that many LGBTQ+ people are able to live openly within a supportive community.

Close social networks, including family, friends, and the community, play a key role in shaping a sense of belonging

Openness with friends remains broadly comparable across sexual orientation and gender identity

Family and friends

Our sample was asked to what extent they were open about their sexual orientation and gender identity to certain groups of people, including family and friends. As Chart 1 shows, 67% of LGB+ respondents were 'fully' or 'somewhat' open about their sexual orientation with family, and 88% with friends. Openness with family was higher in Wales (75%) than the UK average.

Bisexual people were less likely to be open with family (56%) compared with the overall LGB+ population. Ethnic minorities were significantly less likely to be open with family (44%, 71% for white people), while there was no significant variation in openness with family for those from religious communities. Openness with friends remained consistent across these groups.[26]

In terms of trans+ people and gender identity, Chart 1 illustrates that 52% were open with family, while 85% were open with friends. Non-binary people are much less likely to be open with family about their gender identity (40%) than trans men (86%) and trans women (66%).[27]

This data suggests that there is greater wariness about being open with family compared with friends for both sexual orientation and gender identity, with trans+ people being especially cautious about disclosing their gender identity to family. Openness with friends remains broadly comparable across sexual orientation and gender identity.

We also asked LGBTQ+ people how accepted they felt by those they were open to about their sexual orientation or gender identity. Chart 2 shows that a near totality of LGB+ respondents felt accepted by family (93%) and friends (99%) in relation to their sexual orientation.[28]

Acceptance was highest among older generations: those in the 55-64 (96%) and 65+ (97%) age cohorts were more likely to say that they felt accepted by family, compared with those in the 18-24 (92%), 25-34 (93%), and 35-44 (91%) cohorts. Those of an ethnic minority background were less likely to feel accepted by family (88%) than white people (93%).

These variations notwithstanding, acceptance remained relatively consistent across groups, and most LGB+ people feel accepted by family in relation to their sexual orientation.

Feelings of acceptance were lower for gender identity, but numbers remain very high, with 86% of trans+ people feeling accepted by their family and 95% by friends. Non-binary people were slightly more likely to feel accepted by family (89%) than trans men (82%) and trans women (85%). However, Chart 2 demonstrates that the strength of feeling was weaker, with fewer trans+ people saying they felt 'fully' accepted than LGB+ people.[29]

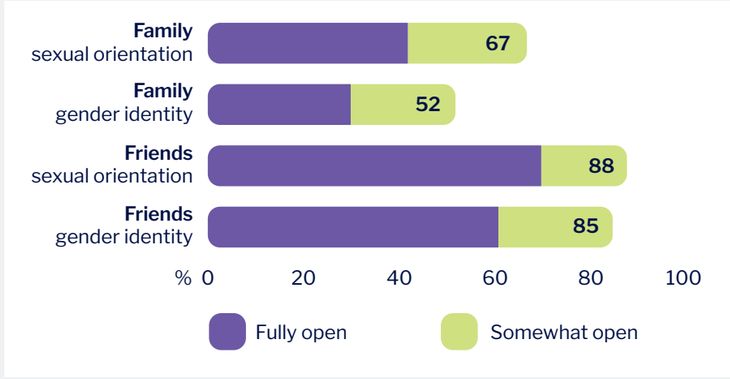

Chart 1. Openness about sexual orientation and gender identity with family and friends

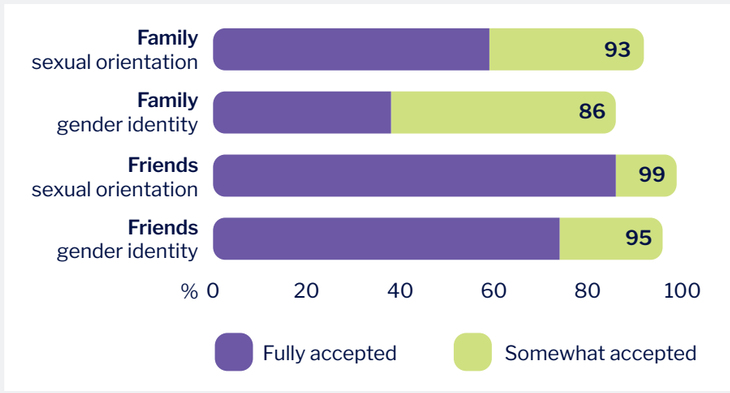

Chart 2. Acceptance of sexual orientation and gender identity among family and friends

There is strong correlation between openness and acceptance of sexual orientation and levels of reported happiness (outlined in Section 4), with LGB+ people who report higher levels of openness and feelings of acceptance also reporting higher levels of happiness. Although this happiness cannot solely be attributed to openness about sexual orientation, this finding supports the idea that living openly and authentically within a supportive community may be associated with more fulfilling lives for LGB+ people.

This picture is more mixed for gender identity, where there is much weaker correlation with happiness. Given that, as seen above, trans+ people generally feel accepted by family and friends, the broader legal and policy environment concerning trans+ issues, as outlined in Section 1, may be having an influence here.

There is strong correlation between openness and acceptance of sexual orientation and levels of reported happiness

Parental experiences

We invited LGBTQ+ people who are parents or guardians to share their experiences of raising children and any impact their identity had on this experience. Sentiment analysis of these responses reveals that respondents were three times more likely to report negative experiences (n=60) than positive experiences (n=20), with 23 responses being coded as mixed.[30]

Many negative responses reflected on heteronormative assumptions made about family structures. For instance:

> *Exceptionally expensive to go through fertility treatments. Assumptions made about parentage. A lot of people asking who was the "mother". A lot of healthcare appointments/paperwork ask about father rather than second parent*

bisexual cisgender woman, 35-44

> *Schools, health care providers and other public services often met us with a reserved curiosity and a lot of gender stereotypes. The school complaining about who to call when there's no female name amongst the parents. GPs asking if we want to reschedule appointments so a non-existent mother can join etc.*

bisexual transgender man, 45-54

Other respondents encountered more openly hostile and prejudiced behaviour:

> *When I met my partner 26 years [ago] we had two children each between 6 and 1 month old. We were something of a spectator sport in our local area and the children faced a lot of nasty comments at school. They were often excluded from birthday party invites and some children were encouraged not to play with them*

lesbian cisgender woman, 45-54

Some of the mixed responses suggest that respondents found community among other LGBTQ+ parents, but encountered more discriminatory attitudes in broader society:

> *I have had positive experiences with LGBTQ parenting groups - however I have also faced discrimination and harassment from people whilst with my children*

queer transgender woman, 35-44

Meanwhile, some responses demonstrate that parenting as an LGBTQ+ person can be a largely positive and fulfilling experience, enabling deep connections within the family and beyond:

> *As the step-parent of children (now adults) I feel that I was fully accepted as a co-parent by both my partner and the children's heterosexual mother. My children's friends and their families have known about mine and their father's sexuality and have not acted negatively towards us. Our openness about our relationship and the creation of a safe space to discuss things allowed some of our children's friends to use us as sounding boards for their own worries*

gay cisgender man, 65+

The vast majority of responses to this question were coded as sentimentally neutral (n=213), meaning that respondents believed their experience of parenthood was not impacted by their LGBTQ+ identity. In many cases, however, this was because they were not perceived as LGBTQ+, either because they were not open about their identity, or because they were in heterosexual presenting relationships.

Religious community

We also asked religious respondents how open they were to, and how accepted they felt by, the people in their place of worship. This analysis revealed that more than half of LGB+ people who attended places of worship said they were 'not very open' or 'not open at all' (55%).[31] When it comes to feeling accepted, 86% of those open about their sexual orientation felt some level of acceptance, which is lower than for family and friends, but remains high.[32]

For gender identity, 53% of trans+ people were open, with 47% not being open. This is slightly higher than for sexual orientation, however some caution should be exercised here due to the relatively small base of trans+ people from a religious background, which is not significant enough for analysis of feelings of acceptance.[33]

LGBTQ+ community spaces

We asked respondents how welcoming they find LGBTQ+ community spaces, such as LGBTQ+ venues, LGBTQ+ community and exercise groups, or Pride events. This data reveals that the overwhelming majority of those who attend community spaces find them welcoming (75%), with just 8% reporting them as unwelcoming (net +67%).[34] Our similar research conducted in 2017 found that 67% of respondents experienced these spaces as welcoming.

A third of LGBTQ+ people reported that they did not attend community spaces at all (35%), consistent with the findings of our similar research conducted from 2017. Groups most likely not to attend were bisexual men (45%), those who selected an 'other' sexual orientation (44%), and trans women (46%).

Older people were also more likely to avoid attending LGBTQ+ community spaces and groups (65+: 50%). Those in rural (45%) and town and fringe (45%) areas were also more likely not to attend these spaces than those in urban areas (33%). Limited availability of LGBTQ+ spaces in rural areas may be one explanation for this variation.

Although LGBTQ+ community spaces are reported to be welcoming, some within the community still experience discrimination. When asked about instances of discrimination in these spaces on the basis of seven characteristics,[35] 18% of LGBTQ+ people indicated that they had ever experienced an incident on the basis of at least one.

When removing those who do not currently attend LGBTQ+ spaces, 24% of this group had ever experienced discrimination. Our similar research in 2017 found that 32% of those who attended LGBTQ+ spaces reported ever experiencing discrimination.[36]

There was some regional variance, with the highest incidence reported in London (23%) – driven largely by ethnicity-based discrimination – the North East (21%) and North West (20%). Discrimination was higher among ethnic minorities (30%), especially Asian/Asian British people (29%), and people of faith (28%). It was also higher among trans women (29%). These data suggest that there is work to do to ensure LGBTQ+ spaces are inclusive of LGBTQ+ people with intersecting points of marginalisation.

> "As Deputy Mayor for Communities and Social Justice for London, I know that true belonging means feeling respected, included and able to be your authentic self. That sense of belonging is so often shaped by strong relationships with family, friends and faith communities, which can provide vital sources of support, connection and resilience. Yet too many LGBTQ+ people still face barriers to acceptance and inclusion, particularly those who are Black and minoritised, migrants, older people, trans+, or members of faith communities. It is essential that we continue to show positive leadership in supporting LGBTQ+ people. By challenging discrimination, fostering understanding and strengthening families and communities, we can ensure LGBTQ+ people feel respected, represented and able to participate fully in civic and community life."
>
> **Debbie Weekes-Bernard**
> Deputy Mayor for Communities and Social Justice, London



> Our community has faced constant, growing bad faith interrogation for years. The popular narrative about us is a distortion robbed of our authorship. This forms the divisive idea that transness is not natural human diversity, driving discrimination and the removal of rights. In this climate, spending time in community reflecting on our history reminds us that, while we oscillate between regression and progression, we will ultimately move forward together. History allows us to find a real sense of belonging in our everyday lives. To know people like you have always been here proves that you belong in the present and frees you to imagine a future for yourself."
>
> **Marty Davies**
> Founder, Trans+ History Week



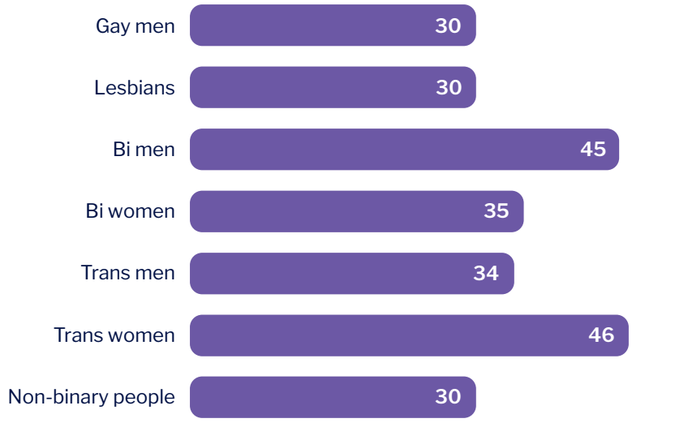

Chart 3. Non-attendance of LGBTQ+ community spaces among selected groups

Summary

Together, this data suggests that LGBTQ+ people feel broadly accepted by their social networks. While there is still some reservation about being open, especially among more marginalised groups such as ethnic minorities and trans+ people, those who are open are likely to report feeling accepted.

The data also reveals that those LGBTQ+ people who do not sit neatly within a binary understanding of sexual orientation or gender identity – for example, bisexual and non-binary people – are much less likely to be open to family and friends. While our survey did not ask why respondents were not open, possible explanations for this finding might include being able to 'pass' as straight or cisgender to those outside the LGBTQ+ community, or experiencing erasure from within the community.

While Section 1 found that social acceptance of LGBTQ+ is perceived to have risen in the last decade, the data presented in this section shows there is still work to be done. Discrimination reported by LGBTQ+ parents as well as some in LGBTQ+ community spaces is evidence of this.

Finally, the correlation between openness and acceptance about sexual orientation and happiness is a highly positive finding, supporting the idea that when LGBTQ+ people can live openly and authentically, they have more fulfilling lives and are more likely to enjoy a sense of belonging.

21 Department for Education, *Relationships Education, Relationships and Sex Education (RSE) and Health Education,* 2025. https://assets.publishing.service.gov.uk/media/6970e7e67e827090d02d42e0/Relationships_education_relationships_and_sex_education__RSE__and_health_education__for_intro_1_September_2026_.pdf.

22 Department for Education, *Including guidance on children who are questioning their gender in 'Keeping children safe in education (KCSIE)',* 2026. https://www.gov.uk/government/publications/including-guidance-on-children-who-are-questioning-their-gender-in-kcsie/including-guidance-on-children-who-are-questioning-their-gender-in-keeping-children-safe-in-education-kcsie.

23 The Church of Scotland, *Same-sex marriage,* 2022. https://www.churchofscotland.org.uk/about-us/our-views/same-sex-marriage.

24 BBC News, *Church of England abandons proposals for same-sex blessing ceremonies,* 2026. https://www.bbc.co.uk/news/articles/cp9mz34184po.

25 BBC News, *Six in 10 London LGBTQ+ venues shut since 2006 – GLA,* 2024. https://www.bbc.co.uk/news/uk-england-london-68226196.

26 D1. To what extent, if at all, are you open about your sexual orientation among... D1_1. Your family / D1_2. Your friends.

27 D2. To what extent, if at all, are you open about your gender identity among... D2_1. Your family / D2_2. Your friends.

28 D3. Thinking about the people you are open to about your sexual orientation among these groups...To what extent, if at all, do you feel accepted by them in relation to your sexual orientation? D3_1. Your family / D3_2. Your friends.

29 D4. Thinking about the people you are open to about your gender identity among these groups...To what extent, if at all, do you feel accepted by them in relation to your gender identity? D4_1. Your family / D4_2. Your friends.

30 J4. Please can you tell us more about your experiences of raising children as an LGBTQ+ person, including any experience of discrimination you or your children have faced because of your sexual orientation and/ or gender identity, or any positive experiences you have had?

31 D1. To what extent, if at all, are you open about your sexual orientation among... D1_5. People at your place of worship.

32 D3. Thinking about the people you are open to about your sexual orientation among these groups...To what extent, if at all, do you feel accepted by them in relation to your sexual orientation? D3_5. People at your place of worship.

33 D2. To what extent, if at all, are you open about your gender identity among... D2_5. People at your place of worship.

34 N1. Thinking about your local LGBTQ+ community, for example LGBTQ+ venues, LGBTQ+ community and exercise groups, or pride events...To what extent do you consider it a welcoming or unwelcoming environment?

35 Sexual orientation, gender identity, ethnicity, disability, sex assigned at birth, age, faith or religion.

36 N2. Have you experienced any discriminatory treatment in your local LGBTQ+ community, such as LGBTQ+ venues, LGBTQ+ community and exercise groups, or pride events, because of your...



SECTION 3

Safety - Discrimination, Crime, and Abuse

Protecting the security and physical safety of marginalised people is one of the primary responsibilities of the state. Yet discrimination, hate crime, and other forms of abuse against LGBTQ+ people continue to be a pervasive harm in the UK.

Official data show that hate crimes against LGBTQ+ people remain stubbornly high; police-recorded hate crimes on the basis of sexual orientation and transgender identity are higher than five years ago in each of the four nations.[37] However, official data only tells part of the story, and many hate-motivated incidents never reach the police.

While this highlights that laws alone are not enough to prevent hate crimes against LGBTQ+ people, strong legislation is the basis of a robust response to anti-LGBTQ+ prejudice. It is therefore a positive development that the *Crime and Policing Act 2026* was adopted in England and Wales, bringing penalties for sexual orientation and transgender motivated hate crimes in line with those based on race and religion, sending a message that there is no hierarchy of hate.[38]

In Scotland, the *Hate Crime and Public Order (Scotland) Act 2021* also provided stronger protections against hate crime. This included the creation of an offence of 'stirring up hatred', including against sexual orientation, transgender identity, and variations in sex characteristics.[39]

Conversion practices are another insidious harm faced by LGBTQ+ people. As the National LGBT Survey demonstrated in 2018, conversion practices are a present-day reality, not a historic practice. It is therefore extremely welcome that the UK Government published its long-awaited Conversion Practices Bill in June 2026, committing to end this abuse.[40]

These are positive legislative developments, and their importance should not be downplayed. However, they exist alongside setbacks such as the Supreme Court ruling outlined earlier in this report, which have an impact on how safe many in our community feel. As our data demonstrates, depsite increasingly robust laws, these harms remain too common in the UK, leaving LGBTQ+ people at risk of discrimination, crime, and abuse.

Despite increasingly robust laws, LGBTQ+ people are at risk of discrimination, crime, and abuse

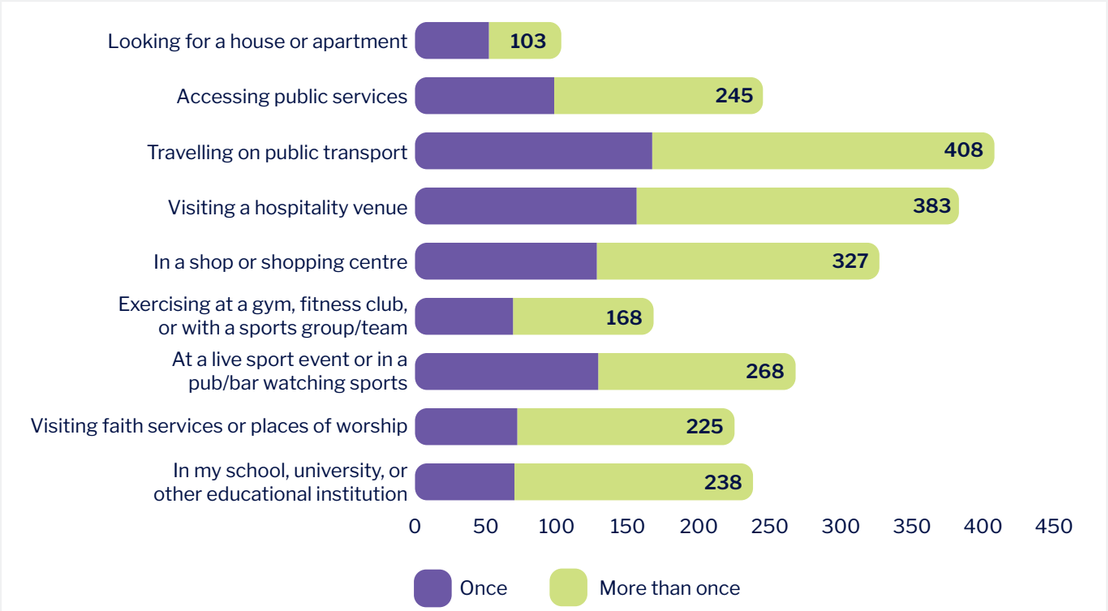

Chart 4. Discrimination in public settings during the last year (absolute numbers)

Discrimination was most frequently reported in public transport, hospitality venues, and shops

Discrimination in public life

Respondents were asked whether they had experienced discrimination on the basis of their sexual orientation or gender identity in different public settings in the last year. Chart 4 illustrates the absolute number of respondents who had experienced discrimination in each setting, revealing that discrimination was most frequently reported in public transport (n=408), hospitality venues (n=383), and shops (n=327).[41]

However, these results are impacted by how often people visit each setting, with the highest levels of discrimination being in the most frequently visited settings. Chart 5 shows the proportion of people who experienced discrimination in each setting when including only those who had been in that setting during the year. This analysis reveals a very different story, with anti-LGBTQ+ discrimination most likely to be experienced in faith services/places of worship (19%), live sport events/bars (15%), and education institutions (15%).

When analysing only those who had been in listed settings, trans+ people were more likely to have experienced discrimination in every situation, with incidence highest in faith services (34%), followed by hospitality, exercising, live sports, and education (26% each). Trans men and trans women were more likely to experience discrimination compared with non-binary people.

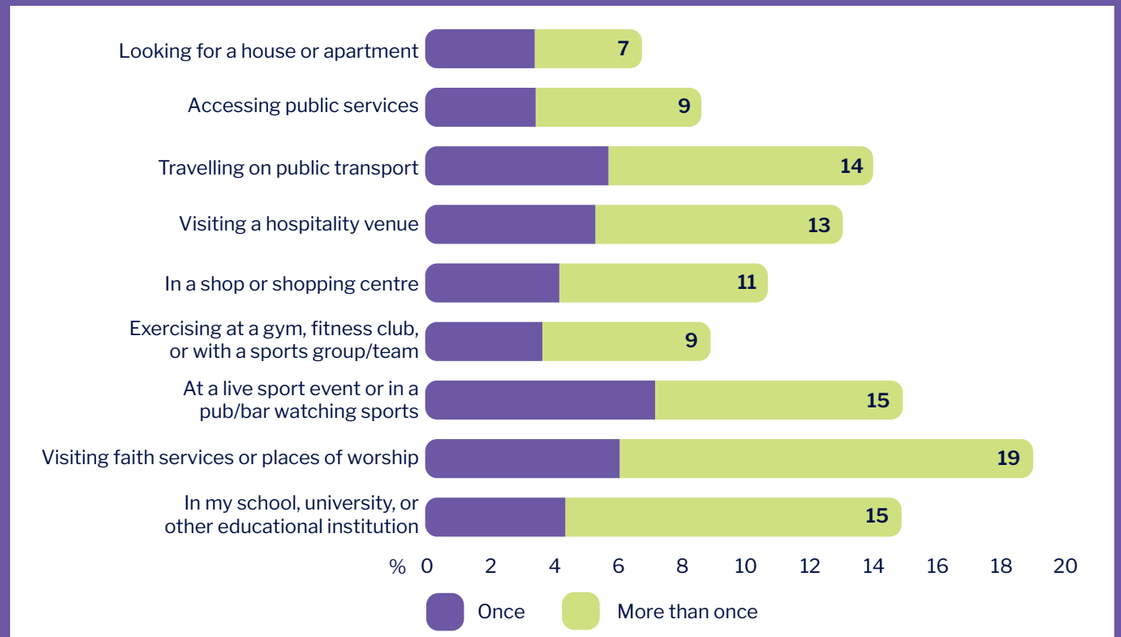

Chart 5. Discrimination in public settings during the last year (% of those in each setting)

Ethnic minorities also experienced higher rates of discrimination compared with white people in each setting, suggesting that there may be an intersectional aspect which heightens risk for those with multiple points of marginalisation.

Experience of discrimination otherwise varied by setting, with some parts of the community more likely to be discriminated against in specific situations. For instance, lesbians were twice as likely to experience discrimination when looking for a house or apartment (13%) than gay men (6%), while gay men were more likely to experience discrimination at live sports events (20%) compared with lesbians (13%).

In terms of variation between the nations, incidence of discrimination in Scotland was lower than the UK average in most settings.

Our similar research from 2017 also asked about discrimination in public. To the extent that the settings are comparable, prevalence was significantly higher in each situation in 2017 when compared with 2026, such as in faith services/places of worship (28%, 9 points higher), hospitality venues (17%, 4 points higher), and shops (14%, 3 points higher).

Trans+ people were more likely to have experienced discrimination in every situation

“This timely report shows what those of us with LGBTQ+ family and friends already know: LGBTQ+ people continue to experience discrimination and abuse in the UK. It is essential that we understand the threats facing the LGBTQ+ community, and in particular trans+ people, in their wider context. Today, it is the trans+ community which faces the brunt of discrimination, as this report shows. Laws and frameworks which protect our safety such as the Human Rights Act, the Equality Act and the European Convention on Human Rights are an essential protective mechanism against discrimination and abuse. But the law is not enough: if you experience abuse on a daily basis, or if abuse against your community has become a cultural norm, you are less likely to report this abuse or trust that action will be taken. In order to defend our rights and freedoms, we need public figures across the political divide, as well as community, business and political leaders to lead by example and make a principled and passionate case for equal rights for all.”

Akiko Hart
Director, Liberty



Single-sex spaces

One area in which increasing tensions on trans+ issues may be having an impact is on the use of single-sex spaces such as public toilets and changing rooms.

Among all LGBTQ+ people, 7% reported that they had ever been questioned about their sex assigned at birth in these spaces. Predictably, this is highest among trans+ people, with one in five ever having been questioned (21%). Non-binary people were less likely to be questioned (12%) than trans women (32%) and trans men (41%).[42]

This last finding is revealing, given that much of the public discourse on this issue is focused on trans women. While the base is relatively small and caution should be exercised, the data points to a possible discordance between the attention given to this issue at a national level and the lived experiences of trans+ people.

Qualitative responses like the ones below illustrate how this is impacting trans+ people:[43]

I was attacked for using the women’s toilets in a pub. I was shaken at the time, but have felt much more nervous about going out since

asexual transgender woman, 65+

I am AFAB and use female/ women’s toilets. But because I dress androgynously and have short hair, I have had female people and women glaring at me, staring at me, and scowling at me, just for using the toilet. I experienced this many years ago, but the rate at which I experience this now has drastically increased due to the recent uptick in transphobic rhetoric

pansexual non-binary person, 25-34

Someone told me I was going into the wrong toilets/ changing area. Pointed to the sign on the door. It doesn’t stop me doing anything, because I work there, but it does make me feel unsafe

gay non-binary person, 45-54

This issue does not only impact trans+ people. Our data shows that 11% of lesbians report having been questioned, more than double the average for cisgender LGB+ people (5%). These accounts provide examples of the experiences of lesbians:

Generally I feel singled out when using public toilets. This has happened multiple times in different locations in the past year. People have tried to prevent me from going into the ladies’ toilets for having short hair, and have only let me pass when they hear my high voice

lesbian cisgender woman, 25-34

Was at a football game, going to the toilet and the woman following behind me stated that this was the ladies toilet

lesbian cisgender woman, 65+

Asked for the most recent time they were questioned in single-sex spaces, almost half of respondents reported that it had happened in the last year (45%). Fieldwork for this report concluded in April 2026, which aligns with the anniversary of the Supreme Court ruling on the interpretation of ‘sex’ in *For Women Scotland* (16th April 2025), however the data does not establish whether the ruling had an impact on these experiences. 27% said it most recently happened one to five years ago, 12% six to ten years ago, and 11% more than ten years.[44]

Hate crime

We asked respondents whether they had experienced any of a list of potentially criminal incidents in the last year: 32% of LGBTQ+ people had experienced some type of incident. The forms most commonly experienced were verbal harassment or intimidation (19%) and sexual harassment (12%). Women were much more likely to have experienced sexual incidents, including sexual harassment (18%), sexual touching (10%), and sexual assault (3%) in the last year compared with men.[45]

Trans+ people were more likely (45%) than cisgender LGB+ people (30%) to have experienced an incident, as were people with disabilities (38% vs 26% for those without). London was the region with the highest reported experience of incidents (38%).

We asked those who had experienced an incident whether they believe it might have been motivated by any of the six characteristics protected by hate crime legislation. A quarter of LGB+ people believed it might have been motivated by their sexual orientation (27%), while half of trans+ people felt their gender identity might have been a motivating factor (52%).[46]

A significant majority of the LGBTQ+ people we surveyed did not report the incident they experienced. Of those who believed that the incident they experienced might have been motivated by their sexual orientation or gender identity, 71% did not report the incident to anyone, while just 18% reported to police.[47] These findings are consistent with our similar research conducted in 2017, where 71% did not report the incident and 19% reported to police.

The most common reasons given for non-reporting were ‘I felt it wasn’t worth it or nothing would happen or change’ (58%), and ‘I thought it was too minor, not serious enough or happens all the time’ (54%). While these point to an internalised downplaying of the severity of the incident as a factor, the next two most popular reasons were more targeted towards police: ‘I thought the police wouldn’t take it seriously enough’ (38%), and ‘I don’t trust the police’ (27%).[48]

Where individuals did report incidents, there was majority dissatisfaction with police handling, although the base here was small: 54% were dissatisfied, including 35% being very dissatisfied. Just a third were satisfied (35%).[49] Sentiment analysis of qualitative responses mirrors this: of those who referenced a police response, 15 were negative, four were positive, and eight were neutral. The qualitative responses below provide a sample of some of these experiences:[50]

A significant majority of the LGBTQ+ people we surveyed did not report the incident they experienced

I was on the train with my husband going home in the evening. Some male teenagers passed by and called us some defamatory terms related to our sexuality and my ethnicity. My husband and I felt very scared and worried something bad might happen to us. We did not report it to the police as we have done so in the past and nothing was done about it

gay cisgender man, 35-44

Experienced homophobia at a football match. Reported it to stewards and police on site. The stewards were lovely and supported [sic], so were the police. The man in question ended up with a caution, which I felt was fair under the circumstances

bisexual cisgender woman, 35-44

“These findings should concern us all. No one should have to change where they go, what they wear or how they express who they are because they fear hostility, harassment or violence. Yet too many LGBTQ+ people continue to experience hate and discrimination, and far too many feel there is little point in reporting it. National Hate Crime Awareness Week is about turning awareness into action. We must challenge hate wherever it occurs, stand alongside those who are targeted, improve confidence in reporting and ensure victims are heard and supported. Tackling hate crime is everyone’s responsibility. Together, we can build communities where everyone can live safely, visibly and without fear.”

Mark Healey
Founder, 17-24-30 National Hate Crime Awareness Week



Navigating hostility in public settings

We asked respondents how comfortable they feel in a number of public settings, and whether they avoid situations or adjust their behaviour for fear of discrimination.

43% of LGBTQ+ people agreed that they would feel comfortable walking down the street while holding their partner’s hand, with 28% disagreeing (net +15%). This is consistent with our similar research from 2017 when 41% said they would be comfortable. Both gay men (net -27%) and trans men (net -5%) were more likely to be uncomfortable than comfortable, as were older populations, with all groups above 45 reporting greater levels of discomfort than comfort.[51]

A majority of LGBTQ+ people agree that they feel safe travelling on public transport (61%, net +46%). Women were less likely to feel safe (net +41%) than men (net +56%), while trans+ people (net +29%), especially trans women (net +7%), were considerably less likely to feel safe.[52]

Respondents were more likely to disagree that public sporting events are a welcoming place for LGBTQ+ people (37% disagree, net -21%). However, this represents an improvement from 2017, when 43% of respondents to our similar research disagreed (net -33%). Disagreement was highest among trans+ people (net -45%).[53]

In terms of how often LGBTQ+ people avoid certain situations or adjust their behaviour in public, our findings reveal that:

- 25% avoid certain bars or restaurants – this rises to 47% of trans+ people.[54]
- 22% avoid certain streets – rising to 39% of trans+ people.[55]
- 23% adjust the way they dress in public – 49% of trans+ people do this.[56]
- 11% avoid the gym, exercise classes, or sports groups – this is higher among trans+ people (29%).[57]
- 12% avoid single-sex spaces such as public toilets or changing rooms – 37% of trans+ people do this.[58]
- 13% visit family less often because they don’t feel accepted – again, trans+ people are more likely to avoid visiting family (31%).[59]

These numbers are lower than those found in our similar research from 2017, suggesting lower reported levels of avoidance and behaviour adjustment in 2026. However, trans+ people are engaging in these behaviours in much greater numbers than the general LGBTQ+ population, consistent with a higher perceived risk of discrimination within this community.

Another group reporting greater levels of avoidance are those who have previously experienced an anti-LGBTQ+ hate crime. For instance, as many as two-thirds of this group report avoiding certain bars or restaurants (64%) or streets (62%) for fear of discrimination. This points to the lasting impact that hate crime can have on victims, and the extent to which it can lead to behaviour adjustments long into the future.

Avoidance is lower in Scotland compared with the UK average: 15% said they avoid certain streets and 19% adjust the way they dress in public. Respondents in both Scotland (10%) and Wales (7%) were also less likely to avoid seeing family because they don’t feel accepted.

Online abuse

We asked respondents whether they had experienced homophobic, biphobic, or transphobic abuse online, including on social media, in the last month. This revealed that:[60]

- 7% of LGB+ people had experienced homophobic/biphobic abuse directed at them (3% once, 4% more than once).
- 36% of LGB+ people had seen homophobic/biphobic abuse directed at someone else (5% once, 31% more than once).
- 17% of trans+ people had experienced transphobic abuse directed at them (5% once, 12% more than once).
- 64% of trans+ people had seen transphobic abuse directed at someone else (5% once, 60% more than once).

This last statistic is the most notable; two-thirds of trans+ people had seen transphobic abuse online during the last month. This is even more revealing when compared against the findings of our similar research from 2017. While the three other metrics were higher in 2017, indirect transphobic abuse was around half the figure reported in 2026 (38%), which may suggest increasing anti-trans+ rhetoric is being reflected in growing abuse in online spaces.

Conversion practices

Conversion practices, sometimes called conversion therapy or reparative therapy, are efforts, interventions, or treatments intended or designed to change, ‘cure’ or suppress a person’s sexual orientation or gender identity based on the assumption that any sexual orientation or gender identity is inherently preferable to any other. Conversion practices are abusive and cause profound and lasting harm to LGBTQ+ people.[61]

Our survey found that 1% of LGBTQ+ people had ever undergone conversion practices, with a further 4% having been offered these practices but not having undergone them.[62] For reference, the National LGBT Survey conducted in 2017 found that 2% of LGBTQ+ people had undergone conversion ‘therapy’ and 5% had been offered them, however definitions were not identical.

As Chart 6 illustrates, and consistent with other research, incidence of conversion practices was higher among certain marginalised groups. Trans+ people, ethnic minorities, and those from a religious background were all two to three times more likely to have undergone or been offered conversion practices compared with their relevant counterpart.

Trans women were more likely to have undergone (7%) or been offered (17%) conversion practices than trans men (4% undergone, 10% offered). Lesbians had also undergone conversion practices at a higher rate (3%) than the overall LGBTQ+ population. In terms of regional variation, incidence was highest in London (3% undergone, 7% offered).

The stakeholders most often offering conversion practices were faith organisations or groups (48%) and family (39%), with healthcare providers or medical professionals (15%), local community members (12%), and teachers or education professionals (10%) being reported less frequently.[63]

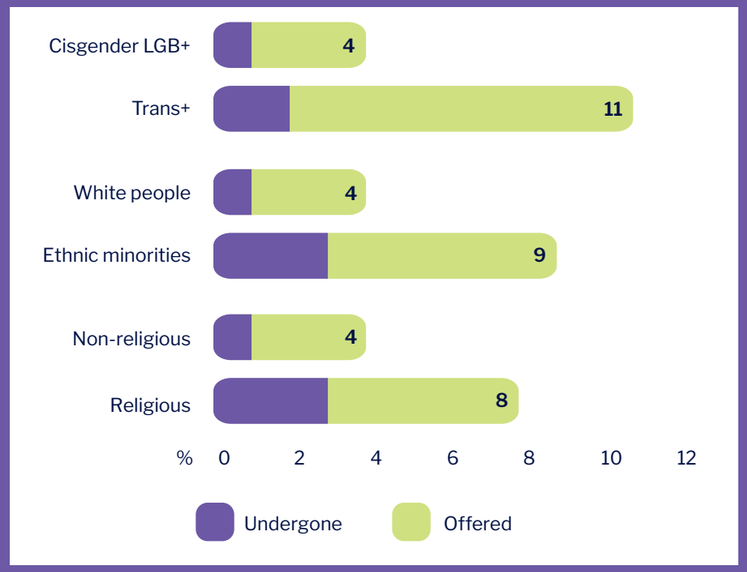

Chart 6. Incidence of conversion practices among selected groups

Summary

This data demonstrates the considerable risk of discrimination, crime, and abuse that LGBTQ+ people are exposed to in the UK. Although incidence appears to be lower compared with 2017 in some contexts, such as discrimination in public life and most forms of online abuse, incidents remain too high, and far too many LGBTQ+ people are adjusting their behaviour for fear of discrimination in public.

Moreover, hate crimes remain a particular challenge, with a large majority of LGBTQ+ people not reporting incidents to police. There appears to be a lack of faith in reporting processes, and a resignation that reporting would not change anything. This latest data also affirms that conversion practices remain a present-day risk for LGBTQ+ people in the UK.

The risk of harm is not evenly distributed; trans+ people are especially at risk, with signs that the ongoing public discourse on trans+ issues may be bleeding through into daily life. The use of single-sex spaces is a growing policy flashpoint affecting trans+ people, and there is also evidence of other members of the community being questioned. The increased incidence of online abuse against trans+ people is another likely symptom of heightened tensions.

While there have been improvements in legal protections, including important legislative reforms initiated in 2026 which will take some time to bear fruit, our findings show that much of the harm LGBTQ+ people face goes unaddressed. This data therefore suggests that increasing legal equality has not yet translated into consistent safety and freedom from abuse for LGBTQ+ people. Much more must be done by politicians, police, and other stakeholders to tackle persistent discriminatory attitudes and behaviours if LGBTQ+ people are to live safely and equally.



37 Home Office, *Hate crime, England and Wales, year ending March 2025,* 2025. https://www.gov.uk/government/statistics/hate-crime-england-and-wales-year-ending-march-2025/hate-crime-england-and-wales-year-ending-march-2025. Crown Office and Procurator Fiscal Service, *Hate crime in Scotland, 2024-25, data tables*, 2025. https://www.copfs.gov.uk/publications/hate-crime-in-scotland-2024-25-data-tables/. Police Service of Northern Ireland, *Trends in Hate Motivated Incidents and Crimes Recorded by the Police in Northern Ireland,* 2025. https://www.psni.police.uk/system/files/2025-11/1395992167/Hate%20Motivated%20Incidents%20and%20Crimes%20in%20Northern%20Ireland%202004-05%20to%202024-25.pdf. Note: transgender hate crimes in NI are roughly level over a five-year period to 2025.

38 *Crime and Policing Act 2026*. https://www.legislation.gov.uk/ukpga/2026/20/contents.

39 *Hate Crime and Public Order (Scotland) Act 2021*. https://www.legislation.gov.uk/asp/2021/14/contents.

40 Office for Equality and Opportunity, *Draft Conversion Practices Bill,* 2026. https://www.gov.uk/government/publications/draft-conversion-practices-bill.

41 E1. During the last year, have you personally felt discriminated against because of your sexual orientation and/ or gender identity in any of the following situations?

42 E4. Have you ever been questioned about your sex assigned at birth when accessing single sex spaces such as public toilets or changing rooms?

43 E2. You said you have felt discriminated against because of your sexual orientation and/ or gender identity in at least one situation. Please can you tell us more about the most recent incident and the impact it had on you?

44 E5. You said you have been questioned about your sex assigned at birth when accessing single sex spaces such as public toilets or changing rooms. When was the most recent time this took place?

45 F1. During the last year, have you personally experienced any of the following types of incidents?

46 F2. Thinking about the most recent incident, was there anything about the incident that made you think it MIGHT have been motivated by any of these factors?

47 F3. Thinking about the most recent incident you experienced which you believe was motivated by your sexual orientation and/ or gender identity. Who, if anyone, did you report this incident to?

48 F5. You said you did not report the most recent incident you experienced to the police…Why was this?

49 F4. You said you reported the most recent incident you experienced to the police. How satisfied or dissatisfied were you with the way the police handled the incident?

50 F6. Please can you tell us more about the most recent incident you experienced which you believe was motivated by your sexual orientation and/ or gender identity and the impact it had on you?

51 E3_1. I would feel comfortable walking down the street while holding my partner's hand.

52 E3_9. I feel safe travelling on public transport.

53 E3_2. Public sporting events are a welcoming space for LGBTQ+ people.

54 E3_3. I avoid certain bars or restaurants because I do not feel safe as an LGBTQ+ person there.

55 E3_4. I avoid certain streets because I do not feel safe as an LGBTQ+ person there.

56 E3_5. I adjust the way I dress when I go out in public because I fear discrimination/ harassment.

57 E3_6. I avoid going to exercise classes, the gym, or participating in sports groups and teams because I fear discrimination/ harassment.

58 E3_7. I avoid using single sex spaces such as public toilets or changing rooms.

59 E3_8. I visit my family less often because I don't feel accepted as an LGBTQ+ person.

60 F7. Thinking about your online activity, including using social media, during the last month have you experienced any of the following?

61 Galop, *'Still Not Illegal": Evidence of modern-day conversion practices from Galop's frontline services,* 2026. https://www.galop.org.uk/reports/still-not-illegal-evidence-of-modern-day-conversion-practices.

62 G1. Have you ever been offered, or have you undergone conversion practices in an attempt to change, 'cure' or suppress your sexual orientation and/ or gender identity?

63 G2. Who offered you these conversion practices?

SECTION 4

Health - Services, Mental Health, and Wellbeing

Few policy areas are as fundamental to the wellbeing of our community as healthcare. Yet it is one of the clearest examples of the mixed progress seen in the UK in the last decade, with both meaningful policy improvements in some areas alongside setbacks in others.

In recent years, some government resource has been committed to LGBTQ+-specific policy development. Notably Dr Michael Brady was appointed as the first National Advisor for LGBT+ Health in England in 2019 and led a national LGBT+ health evidence review, commissioned by the Secretary of State for Health and Social Care in 2025, which will report in 2026.[64]

Another positive policy development was the renewal of HIV Action Plans in all four nations during the decade. This comes on the back of targeted HIV policy improvements including the rollout of PrEP – a highly effective HIV prevention drug – e.g. by NHS England in 2020,[65] as well as the relaxation of blood donation rules for men who have sex with men the same year.[66]

At the same time, one of the most contentious policy areas over the last ten years has been trans+ people's access to gender-affirming care, with stricter controls on access implemented in recent years, particularly for younger people.

In 2024, the UK Government implemented recommendations from the Cass Review, including banning access to puberty blockers for under-18s, and the closure of the Gender Identity Development Service operated at the Tavistock Clinic.[67] In 2025, the PATHWAYS Trial was given ethical approval to explore the effects of puberty-suppressing medication in young people who experience 'gender incongruence'.[68] In 2025, the Levy Review into adult NHS gender dysphoria clinics in England was published, making recommendations to improve patient care.[69]

Overall, the picture is mixed, and this ongoing policy struggle is having an impact on both the availability and quality of care provided to LGBTQ+ people, which may be a contributing factor to the experiences shared below.

Few policy areas are as fundamental to the wellbeing of our community as healthcare

“Too often, and in too many settings across the NHS, inequalities pervade and persist for LGBTQ+ communities. The voices of LGBTQ+ communities are still too infrequently heard and the inequalities they experience too rarely addressed. Many of the poor experiences described here that drive LGBTQ+ people to defer or avoid accessing healthcare have relatively simple solutions. We need continued work to ensure the NHS workforce has the knowledge and skills to provide culturally competent care that is kind, respectful and person-centred. This needs to be coupled with leadership across NHS organisations that records and reviews the healthcare experiences and outcomes of LGBTQ+ people and to continuously use that understanding to improve the quality, safety and equity of the care we deliver for LGBTQ+ communities.”

Dr Michael Brady
National Advisor
for LGBT Health,
NHS England



Openness in healthcare settings

Being open about sexual orientation and gender identity can be an important factor in ensuring that healthcare is informed, respectful, and sensitive to LGBTQ+-specific needs. However, a significant number of people are still opting not to reveal their identity to healthcare providers:

- 72% of LGB+ people are open about their sexual orientation, including 46% being ‘fully open’, with 20% being ‘not very open’ or ‘not open at all’.[70]
- Gay men (85%) and lesbians (80%) were more likely than bisexual men (68%) and bisexual women (64%) to be open about their sexual orientation.
- 52% of trans+ people were open about their gender identity, with 30% ‘fully open’. 42% were ‘not very open’ or ‘not open at all’.[71]
- Trans men (77%) and trans women (76%) were around twice as likely to be open as non-binary people (39%).
- 89% of LGB+ people felt accepted by healthcare providers in relation to their sexual orientation,[72] while 74% of trans+ people felt similarly about their gender identity.[73]

Discrimination in healthcare settings

LGBTQ+ people’s access to care can be obstructed due to factors such as lack of understanding of specific needs, unconscious bias, or outright discrimination. We therefore asked our respondents whether they had ever experienced any of these situations in healthcare settings.[74]

Our evidence suggests that some LGBTQ+ people experienced barriers to accessing healthcare:

- 10% of all LGBTQ+ people reported difficulties in gaining access to healthcare which they believe was due to their sexual orientation or gender identity. In our similar research in 2017, 12% reported the same.
- Trans+ people were over five times more likely to report this (33%) than cisgender LGB+ people (6%).
- 4% of LGBTQ+ people have been refused care which they believe was due to their sexual orientation or gender identity. This figure is consistent with our 2017 research.
- This was six times higher among trans+ people (12%) than cisgender LGB+ people (2%).

When LGBTQ+ people can access care, too often they find that healthcare services are not sensitive to specific LGBTQ+ needs:

- 18% of LGB+ people said that healthcare staff lacked understanding of lesbian, gay, and bisexual health needs, including 6% in the last year. This is lower than our finding from 2017 (25%).
- This was almost twice as high among lesbians (29%) as gay men (16%), suggesting that there may be a gendered element to this experience.
- 39% of trans+ people said that healthcare staff lacked understanding of trans+ health needs, including 21% who had experienced this in the last year. Our research from 2017 found this number to be substantially higher (62%).
- Trans men (80%) and trans women (63%) were far more likely than non-binary (26%) people to report this.

Many LGBTQ+ people also reported experiencing negative incidents in healthcare settings which they felt were due to their sexual orientation or gender identity:

- 9% experienced discriminatory remarks by staff and 10% experienced discriminatory treatment. This rises to 24%-26% of trans+ people and 14-15% of people with disabilities.
- 21% experienced questions about their sexual orientation or gender identity which made them feel uncomfortable. This was twice as high among trans+ people (39%) compared with cisgender LGB+ people (18%).
- 7% have been outed without consent in front of others, rising to 15% of trans+ people.
- 5% have been pressured to take medical or psychological tests. Again, this is higher among trans+ people (12%).

To the extent that our similar research from 2017 assessed the incidence of these situations, the rates reported in 2026 are lower. For instance, 25% of trans+ people reported being pressured to take tests in 2017, double the rate reported in 2026.

Against this backdrop, 11% of LGBTQ+ people avoided treatment altogether for fear of discrimination. Trans+ people were almost five times as likely to have avoided treatment (34%) as cisgender LGB+ people (7%), with trans men (61%) especially likely.

These findings make clear that LGBTQ+ people face discriminatory barriers to accessing appropriate healthcare, and the more marginalised are at greater risk. As well as trans+ people, people with disabilities reported consistently higher rates of discrimination compared to those without disabilities. While this may be partly explained by greater usage of healthcare services, it is likely that intersectional discrimination may also be an influence, resulting in their needs and experiences being more likely to be discounted.

18%
of LGB+ people said that healthcare staff lacked understanding of their health needs

39%
of trans+ people said that healthcare staff lacked understanding of their health needs

LGBTQ+ people report lower levels of life satisfaction, worthwhileness, and happiness compared with the general population

Personal wellbeing

The Office for National Statistics (ONS) regularly measures personal wellbeing through the Annual Population Survey against four metrics on a 0-10 scale: life satisfaction, worthwhileness, happiness, and anxiety.[75] We included these same questions within our survey to assess the wellbeing of LGBTQ+ people against the general population.

As visualised in Chart 7, on average, LGBTQ+ people report lower levels of life satisfaction,[76] worthwhileness,[77] and happiness[78] within a range of 1.5–1.9 points per metric compared with the general population.

Additonally, LGBTQ+ people were much more likely to assess their wellbeing at the low end of the scale for each of these metrics. Around a quarter reported low levels (0-4) compared with 4-8% of the general population. Similarly, they reported very high levels (9-10) of happiness at around a third of the rate of the general population.

For comparison, our similar research in 2017 also included the happiness measure and found that the mean happiness score was 6.6, 0.7 points higher than in 2026. Moreover, 18% reported very high levels of happiness (11% in 2026) and another 18% reported low levels (25% in 2026). In the same period, the mean score in the general population was 7.5, near consistent with 2026.

In terms of the fourth metric, the mean score for anxiety within our sample was 4.8, considerably higher than the 3.2 mean reported in the general population.[79] 43% of LGBTQ+ people reported high levels (6-10) of anxiety, compared with 23.6% of the general population. People who had experienced anti-LGBTQ+ hate crimes were more likely to report high levels of anxiety (55%).

Trans+ people consistently reported worse personal wellbeing outcomes compared with the overall LGBTQ+ population (at an average of 0.4 per metric), as did people with disabilities (at an average of 0.6 per metric). Personal wellbeing among LGBTQ+ people in Scotland was stronger than the UK as a whole by an average of 0.4 per metric.

5.7
Life satisfaction among LGBTQ+ people
General population = 7.5

5.9
Worthwhileness among LGBTQ+ people
General population = 7.8

5.9
Happiness among LGBTQ+ people
General population = 7.4

Chart 7. Personal wellbeing in the general population and LGBTQ+ community (0-10)

Impact of LGBTQ+ identity on mental health

We asked respondents whether they believed that experiences related to their sexual orientation and gender identity had an impact on their mental health in the last year.

There was a relatively even split among those who believed experiences related to their sexual orientation had a positive (19%), negative (15%), or equally positive/negative impact (20%). More interestingly, almost half believed there was no impact during the last year (45%, net +4%).[80]

There was a clear age dynamic to these results, with those 65 and above most likely to report no impact on their mental health (60%), and just 8% reporting a negative impact. Conversely, the youngest group, 18-24-year-olds, were almost half as likely to report no impact (36%), and over two and a half times as likely to report a negative impact (21%).

In relation to gender identity, the data suggests a more complex picture: just 18% of trans+ people said experiences related to their gender identity had no impact on their mental health. 18% believed the impact was positive, and 41% believed it was negative (net -23%).[81]

People of faith were more likely to report a negative mental health impact for both sexual orientation (19% v 13% non-religious) and gender identity (52% v 37% non-religious). Lower levels of openness and acceptance in faith communities (see Section 2) may be a factor in this finding.

People in Scotland were less likely to say that experiences related to their gender identity had a negative impact on their mental health (36%), and more likely to say there was no impact (25%) than the UK average.



There is a significantly heightened risk of suicide for the LGBTQ+ population

Suicidal ideation and attempts

Elevated rates of suicidal ideation and attempts within the LGBTQ+ community are well-documented. Population-level analysis by the ONS has found that risk of suicide for LGB+ people in England and Wales is more than double that for straight people, while risk of intentional self-harm is two and a half times higher.[82]

Our data shows that 54% of all LGBTQ+ people report ever having considered suicide,[83] with 22% ever having attempted suicide.[84] Comparable data from NHS England shows that in the general population, a quarter of all adults have had thoughts of taking their own life, and around 8% have ever attempted suicide.[85] Our findings therefore add to existing evidence which suggests there is a significantly heightened risk of suicide for the LGBTQ+ population.

Bisexual women were most likely to report suicidal ideation (62%) and attempts (25%) among LGB+ people. As many as seven in ten trans+ people had considered suicide (71%), and a third had attempted it in their lifetimes (32%). Additionally, people with disabilities are at a much greater risk of suicidal ideation (72%) and attempts (37%). Suicidal ideation in Scotland is comparable to the UK average (53%), however attempts were lower (18%).

54% Suicidal ideation – all LGBTQ+ people

51% Suicidal ideation – cisgender LGB+

71% Suicidal ideation – Trans+

22% Suicide attempts – all LGBTQ+ people

20% Suicide attempts – cisgender LGB+

32% Suicide attempts – Trans+

Chart 8. Lifetime suicidal ideation and attempts among LGBTQ+ people

Access to mental health services

This data points to a significant issue with mental health and wellbeing in the LGBTQ+ community, and a clear case for accessible mental health support. However, our findings suggest that many are struggling to access appropriate care.

We asked respondents whether they had accessed mental health services during the last year, either through the NHS, private health, or community services. 21% had accessed mental health services through the NHS, 14% privately, and 11% through community pathways.[86]

A significant number of people had attempted to access mental health support but were unsuccessful, including one in ten via the NHS (10%). This was higher among trans+ people (13%) and people with disabilities (15%). When removing those who did not attempt to access services, the pathways where the highest proportion of people were not able to access support were community (33%) and NHS (32%) services, with private services around half of this (16%).

In terms of the NHS, there is a perception that mental health services are challenging to access: half of those who accessed or attempted to access services said it was difficult (54%), double the number who said it was easy (27%). Trans+ people (63%) and people with disabilities (59%) were more likely to find accessing NHS services difficult. Seven in ten of respondents in Wales who tried to access NHS services found it difficult (70%).[87]

Asked why it was difficult to access services, the reasons given were mostly systemic: 72% said 'I had to wait too long to access the services'. The next most common reasons were that 'my GP was not supportive' (24%), 'I was worried, anxious or embarrassed about going' (22%), and 'my GP did not know where to refer me' (18%).[88] Some qualitative responses provide more detail on the challenges people experience:

> ***Regarding mental health services, I think we need to remember that mental health issues don't pause just because you're on a waiting list for support - there needs to be something available in the interim***
>
> bisexual cisgender woman, 18-24

> ***Please make it so you don't have to be actively suicidal to access support, give people help before they're at breaking point***
>
> bisexual cisgender woman, 25-34

> ***Mental health issues were practically dismissed by my GP as someone else's issue to deal with. Being restricted to my GP, and the difficulty of finding and then switching to a different GP leaves you feeling trapped with no recourse***
>
> gay cisgender man, 35-44

"These findings are a stark reminder that access to mental health support is not equal. Long waiting times, overstretched services and difficulties in accessing and navigating care affect many people, but for LGBTQ+ communities these barriers can be compounded by discrimination, stigma and a lack of understanding of their experiences. Mental health support must be timely, accessible and culturally responsive, ensuring people feel safe, respected and understood when seeking help. We must move beyond responding only when people reach crisis point towards prevention and early intervention. Employers also have a vital role to play. Creating inclusive, psychologically safe workplaces, where people can be themselves and access appropriate support, is essential for protecting wellbeing, enabling people to thrive and supporting sustainable performance."

Sarah McIntosh
Chief Executive,
MHFA England



Some challenges are more LGBTQ+-specific, however, and 22% of trans+ people stated that accessing mental health services was difficult because 'I was worried about discrimination or a lack of understanding about my gender identity'. The corresponding number for LGB+ people was 6%. As one respondent noted:

> ***Mental health services arnot fit for purpose especially for lgbtq+ people. They have not been funded at a level that meets demand and what is provided is appropriate for individual need [sic]. Training for practitioners is not up to date and does not meet the needs of diverse people***
>
> bisexual cisgender woman, 55-64

More positively, our findings reveal that when people can access mental health services, they are more likely to report them to be helpful: 53% reported NHS services as helpful compared with 24% unhelpful (net +29%). However, these numbers were higher for private services (net +75%) and community-based services (net +54%), suggesting there is still scope for improvement.[89]

Summary

This data demonstrates that LGBTQ+ people continue to experience significant levels of perceived discrimination in healthcare settings, as well as an insensitivity to LGBTQ+ health needs. Significant numbers of LGBTQ+ people report avoiding healthcare for fear of discrimination, exacerbating the risk of health inequalities.

LGBTQ+ wellbeing trails far behind the general population, and our data adds to existing evidence which shows an elevated rate of suicidal ideation and attempts, especially among trans+ people. More positively, reported levels of discrimination are lower than comparable data from 2017, there are relatively high levels of perceived acceptance by healthcare providers, and mental health services are generally considered to be helpful when accessed.

Nonetheless, these findings demonstrate that there are notable LGBTQ+ health and wellbeing inequalities, especially for the most marginalised. There is a clear need for action to improve these outcomes, as poor health and wellbeing can compound challenges in other areas, limiting overall quality of life and potential for LGBTQ+ people to thrive.

64 NHS England, *LGBT+ health evidence review,* accessed 2026. https://www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/lgbt-health/lgbt-health-evidence-review/.

65 Department of Health and Social Care, *HIV drug PrEP to be available across England,* 2020. https://www.gov.uk/government/news/hiv-drug-prep-to-be-available-across-england.

66 Department of Health and Social Care, *Landmark change to blood donation criteria,* 2020. https://www.gov.uk/government/news/landmark-change-to-blood-donation-criteria.

67 The National Archives, *Independent review of gender identity services for children and young people,* accessed 2026. https://webarchive.nationalarchives.gov.uk/ukgwa/20250310143642/https://cass.independent-review.uk/.

68 NHS Health Research Authority, *An update on the PATHWAYS TRIAL,* 2026. https://www.hra.nhs.uk/about-us/news-updates/an-update-on-the-pathways-trial/.

69 NHS England, *Operational and delivery review of NHS adult gender dysphoria clinics in England,* 2025. https://www.england.nhs.uk/publication/operational-and-delivery-review-of-nhs-adult-gender-dysphoria-clinics-in-england/.

70 D1. To what extent, if at all, are you open about your sexual orientation among… D1_6. Healthcare providers.

71 D2. To what extent, if at all, are you open about your gender identity among… D2_6. Healthcare providers.

72 D3. Thinking about the people you are open to about your sexual orientation among these groups…To what extent, if at all, do you feel accepted by them in relation to your sexual orientation? D3_6. Healthcare providers.

73 D4. Thinking about the people you are open to about your gender identity among these groups…To what extent, if at all, do you feel accepted by them in relation to your gender identity? D4_6. Healthcare providers.

74 H1. Have you ever experienced any of the following situations when using or trying to access healthcare services, which you felt was because of your sexual orientation and/ or gender identity?

75 Office for National Statistics, *Personal well-being in the UK QMI*, 2025. https://www.ons.gov.uk/peoplepopulationandcommunity/wellbeing/methodologies/personalwellbeingintheukqmi.

76 I8_1. Overall, how satisfied are you with your life nowadays?

77 I8_2. Overall, to what extent do you feel that the things you do in your life are worthwhile?

78 I8_3. Overall, how happy did you feel yesterday?

79 I8_4. Overall, how anxious did you feel yesterday?

80 I1. On balance, during the last year, to what extent, if at all, has your mental health been affected by experiences relating to your… I1_1. Sexual orientation.

81 I1. On balance, during the last year, to what extent, if at all, has your mental health been affected by experiences relating to your… I1_2. Gender identity.

82 Office for National Statistics, *Self-harm and suicide by sexual orientation, England and Wales: March 2021 to December 2023,* 2025. https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/mentalhealth/bulletins/selfharmandsuicidebysexualorientationenglandandwales/march2021todecember2023.

83 I2. Have you ever considered attempting suicide?

84 I3. Have you ever attempted suicide?

85 NHS England, *Adult Psychiatric Morbidity Survey: Survey of Mental Health and Wellbeing, England, 2023/4*, 2025. https://digital.nhs.uk/data-and-information/publications/statistical/adult-psychiatric-morbidity-survey/survey-of-mental-health-and-wellbeing-england-2023-24/suicidal-thoughts-suicide-attempts-and-self-harm.

86 I4. During the last year, have you accessed, or tried to access, any mental health services for any reason, for example, talking treatments such as counselling or therapy, or other specialist mental health services, through any of the following pathways?

87 I5. How easy or difficult was it for you to access NHS mental health services?

88 I6. Why was accessing NHS mental health services difficult in the last year?

89 I7. How helpful or unhelpful was the support you received from these mental health services?

SECTION 5

Work - Inclusion, Discrimination, and Finances

For many LGBTQ+ people, deciding where to work involves considerations beyond just pay and conditions: they may also need to think about whether they will be safe, respected, and able to thrive as an LGBTQ+ person in the workplace.

Strong employment laws are therefore vital to ensure that LGBTQ+ people are protected from discrimination at work. While introduced over a decade ago, the *Equality Act 2010* was a landmark piece of legislation which built on existing employment law to prohibit discrimination on the basis of sexual orientation and 'gender reassignment' in employment.

While the impact of this law is significant, its interpretation has been the subject of legal challenge. The April 2025 Supreme Court ruling in the case of *For Women Scotland vs The Scottish Ministers* and subsequent updates to statutory and non-statutory guidance have created challenges for organisations who want to operate in an inclusive way. More recently, the *Employment Rights Act 2025* strengthened workplace rights for LGBTQ+ people, including greater protections against third-party harassment.[90]

However, inclusion is about far more than preventing outwardly discriminatory behaviour. Truly inclusive workplaces go beyond legal minimums, embedding diversity and inclusion in their culture and practice to ensure employees feel safe and empowered to be their full selves at work.

Yet, our data shows that some are still experiencing barriers to finding work on the basis of their sexual orientation and gender identity, and too many of those in work are experiencing discrimination in the workplace. This is not only an issue in itself – it has a broader impact on financial security and ability to plan for the future, meaning that LGBTQ+ people are disadvantaged compared with the general population.

Inclusion is about far more than preventing outwardly discriminatory behaviour

Looking for work

We asked respondents to identify which factors related to being LGBTQ+ are important to them when deciding where to work. In total, 69% of all LGBTQ+ people we surveyed selected at least one factor as an important consideration when deciding where to work.[91] The factors most frequently selected were:

- Feeling able to be open about my sexual orientation (49%);
- Transparent workplace equality policies (49%);
- Seeing examples of LGBTQ+ inclusion on the organisation's website, published materials, and communications (35%);
- Seeing senior management who are LGBTQ+ (30%);
- Seeing senior management represented on diversity, equality, and inclusion networks, groups and sub-committees (30%).

Many respondents highlighted the importance of representation, visibility, and inclusion policies when taking up jobs

Younger people were especially likely to value workplace inclusion, with 73% of those in the 18-24 and 25-34 cohorts selecting at least one factor. Those working in the third or voluntary (77%) and public (71%) sectors were more likely than average to select at least one of these factors.

Almost nine in ten trans+ people also selected at least one factor (87%). The factors most commonly selected as important by trans+ people were:

- Being addressed with the correct name and pronouns (70%);
- Feeling able to be open about my gender identity (68%);
- Transparent workplace equality policies (67%);
- Feeling able to wear work attire representing my gender identity (63%);
- Feeling able to be open about my sexual orientation (60%).

As well as placing more value on workplace inclusion overall, the factors most frequently selected by trans+ people suggest that they are most concerned about having their personal identity and gender expression respected.

When invited to reflect on their experiences as an LGBTQ+ person in the workplace, many respondents highlighted the importance of representation, visibility, and inclusion policies when taking up jobs:[92]

> *When interviewing for my current job I learned that my line manager is LGBTQ+ which was a major factor in accepting the job offer*

bisexual genderfluid person, 18-24

> *I work for a local council with strong Diversity, Equality & Inclusion policies. My employer has an Equalities Allies group, puts on events during Pride month and actively works to promote an inclusive and anti discriminatory workplace*

gay cisgender man, 35-44

> *Before retirement I chose to work in places with a published equal opportunities policy because that gave me confidence to be myself*

lesbian cisgender woman, 55-64

However, as the response below suggests, having workplace inclusion policies in place is in itself not sufficient if diversity and inclusion is not integrated into organisational culture and bought into by senior management:

> ***Although my employer believed they were fully inclusive, the senior leaders did not reflect this value or lead by example. Misogyny and homophobia was accepted as the norm and although there were polices in place, as the senior leaders were the problem nothing would change. It was wholly a tick box exercise***

gay cisgender man, 45-54

We also asked those who were unemployed whether they were experiencing any barriers in finding a job. The most commonly experienced barriers were structural, such as 'a lack of jobs in general in my area' (44%), 'a lack of jobs in my chosen profession in my area' (31%), a 'lack of sufficient skills' (31%), and a 'lack of sufficient qualifications' (29%).

To the extent that personal factors were being experienced as a barrier to finding work, the most common were 'a mental illness or disability' (40%) and 'a physical illness or disability' (20%).[93]

There was also some indication that attitudes towards LGBTQ+ identity were perceived to be a barrier: 8% indicated that 'discrimination because of my sexual orientation and/or gender identity' was an obstacle to finding work, while 14% said that 'fears of discrimination or harassment at work due to my sexual orientation and/or gender identity' were a barrier. Our similar research in 2017 found these numbers to be much higher: 18% had experienced discrimination as a barrier, while 35% reported fears of discrimination or harassment as an obstacle to finding work.

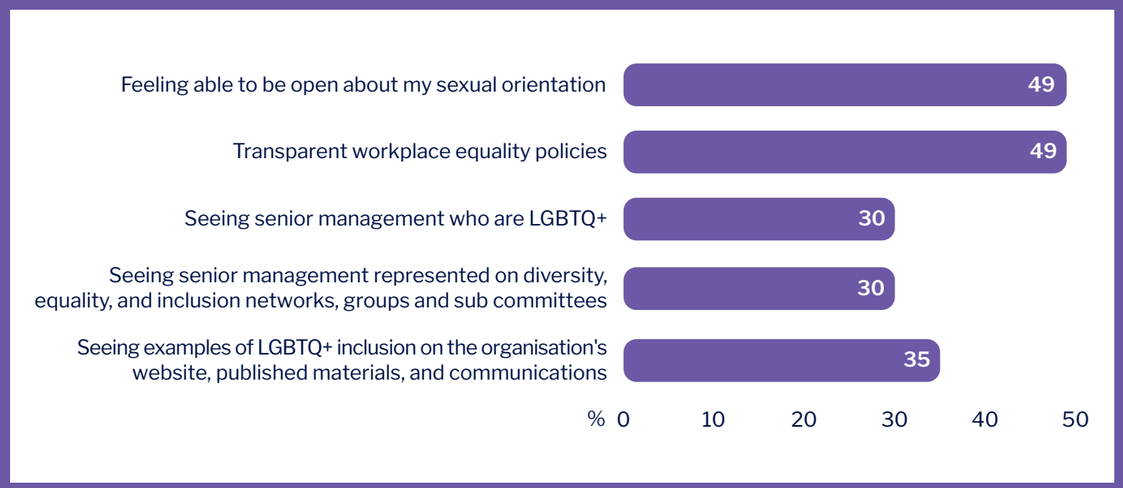

Chart 9. Importance of LGBTQ+ inclusion when deciding where to work

“Being an inclusive workplace is so much more than having the right policies in place or making statements about your perceived principles or culture. The experiences reflected in this report are consistent with those of people from other underrepresented groups and it is critical now more than ever for organisations to walk the talk. Building trust and safety takes time but the benefits to both employees and companies are well documented and significant. This is less about big bang initiatives and more about consistently taking care of the details. Challenge discriminatory behaviour in the moment (and be aware it is likely to be subtle), normalise pronoun use, create safe spaces that enable colleagues to open up and share and then be supportive and respectful when they do. It goes beyond policy; it cuts to how you show up each and every day.”

Tiger de Souza
Chief People and Culture Officer, MacMillan Cancer Support



Openness at work

Our findings on openness about sexual orientation and gender identity in the workplace reveal that there is significant variation in how open different subgroups of LGBTQ+ people are.

Two-thirds of all LGB+ people are open about their sexual orientation in their workplace (65%), but just a third report that they are ‘fully open’ about their identity (36%). Much of this openness is driven by gay men (79%) and lesbians (84%) who are significantly more likely than bisexual men (47%) and women (56%) to be open in the workplace.[94]

When it comes to gender identity, trans+ people are less likely to be open in the workplace: 49% are open, with just one in five being ‘fully open’ (22%). A third of trans+ people are ‘not open at all’ about their identity (33%), substantially higher than the 17% of LGB+ people who said the same about their sexual orientation.[95]

When people are open about their identities in the workplace they report very high levels of acceptance by their colleagues; 97% of LGB+ people open about their sexual orientation feel some level of acceptance, with two-thirds feeling ‘fully accepted’ (64%).[96]

The number of trans+ people feeling accepted by those they are open to about their gender identity is lower but remains high (86%). The strength of feeling here is also lower, with half as many trans+ people feeling ‘fully accepted’ (37%) as LGB+ people.[97]

When asked directly whether they had hidden or disguised their identity at work due to fear of discrimination, 30% of LGB+ people said they had done so for their sexual orientation, while 46% of trans+ people had done so for their gender identity. Our similar research from 2017 found these figures to be 37% and 51%, respectively.

Taken together, this data shows that openness at work is not simply a matter of personal preference, but a reflection on whether workplaces feel safe and inclusive. The qualitative responses below demonstrate the fear of discrimination or negative reactions that many LGBTQ+ people have, sometimes based on previous experiences, which can contribute to a choice to hide or disguise their identity in the workplace:

I’ve heard negative comments from colleagues who are unaware of my sexuality, which has then stopped me disclosing my sexuality openly. I’ve also not been open about my sexuality as I don’t want to risk a negative reaction

bisexual cisgender woman, 25-34

In my last employment I did not feel able to be open about my gender identity, as there was a hostile atmosphere to trans peopleheterosexual

transgender woman, 55-64

I have previously been discriminated against as a bisexual woman. My grievance was upheld. I have been less open about my sexual orientation in subsequent jobs as raising a grievance is stressful

bisexual cisgender woman, 45-54

Discrimination at work

We asked all those currently in work whether they had experienced any incidents based on their sexual orientation or gender identity in the workplace in the last year.[98]

As Chart 10 illustrates, as many as 20% of respondents reported experiencing negative comments or conduct. While these rates are lower than those found in our similar research in 2017 where as many as 32% of respondents reported the same, anti-LGBTQ+ behaviour in the workplace remains too common.

The data shows that the most marginalised are most affected, with incidence among trans+ people consistently higher.

As many as 30% of trans+ people report being asked inappropriate questions in the workplace in the last year, for example.

Some respondents reported experiencing obstacles to career progression based on their identity: 6% of respondents felt that they did not get a job or promotion because they were LGBTQ+, rising to 11% of trans+ people. Meanwhile, 2% believed that they lost a job because of being LGBTQ+ during the last year, rising to 3% of trans+ people. Our similar research in 2017 reported these figures as 10% and 4%, around twice as high as those reported in 2026.

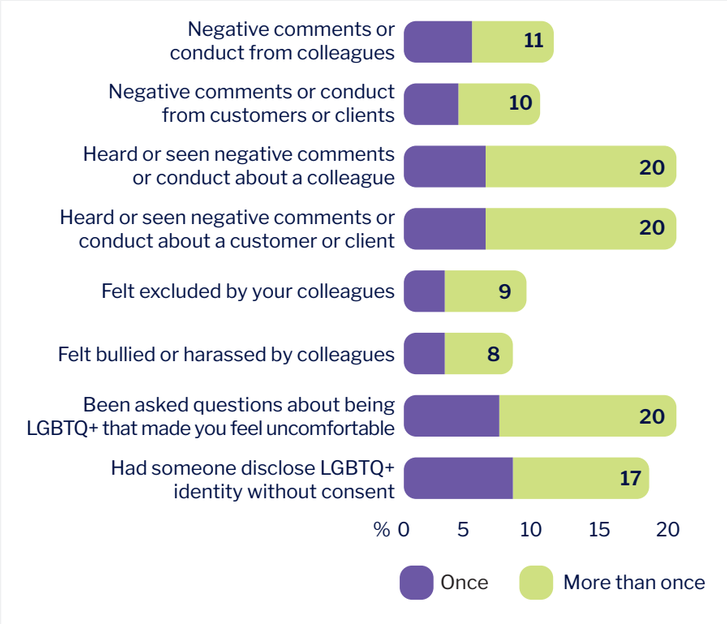

Chart 10. Experiences of discrimination, exclusion, and harassment in the workplace

A significant number of people opted not to report due to a desire to keep their LGBTQ+ identity private

We asked those who have experienced discrimination in the workplace whether they reported incidents, and half said they did not take any action at all (52%). When asked why they didn't report their most recent incident, the most common reasons given were: 'I felt it wasn't worth it or nothing would happen or change' (35%) and 'I thought it was too minor, not serious enough or happens all the time' (29%). Other popular responses included 'it did not occur to me' (17%) and 'I dealt with it myself or with help from family or friends' (15%).[99]

While this suggests that many who didn't report downplayed the severity of the incident and/or had a lack of faith in reporting processes, a significant number of people opted not to report due to a desire to keep their LGBTQ+ identity private. Around one in seven (15%) of those who did not report their most recent incident to their employer said it was because 'I didn't want to reveal my sexual orientation and/or gender identity', rising to a quarter of trans+ people (24%).

Just 8% of respondents reported their most recent incident to a line manager, 6% to senior management, and 3% to human resources, while 2% of people raised a formal grievance. Trans+ people were more likely to report incidents than the general LGBTQ+ population.[100]

When people do report incidents of discrimination in the workplace to their employers, they are more likely to be satisfied than dissatisfied with the handling of incidents: 21% reported being 'very satisfied', with a further 24% being 'fairly satisfied' (45% satisfied), while 18% were 'very dissatisfied' and 19% were 'fairly dissatisfied' (net satisfaction +9%). This is a relatively even response spread, suggesting that the perceived strength of reporting systems may vary considerably between organisations.[101]

When invited to share fuller accounts of their experiences of being LGBTQ+ in the workplace, some responses such as the one below reflected on discrimination and poor handling of incidents by employers:

> *I witnessed a text message on a company phone whilst at a bar with serious homophobic content. I was shocked and reported it. Management tried to brush [it] under the carpet but I was not having any of it. The person could not bring themselves to apologise, saying I was overreacting I would not let it go and threatened to take it further. I was not supported by any of my managers and felt completely isolated. This happened some years ago but it has stayed with me*
>
> gay cisgender man, 55-64

Financial security

For most, finding stable work is central to becoming financially secure, meaning that barriers to finding a job and a lack of safety and comfort in the workplace may contribute to LGBTQ+ people experiencing greater economic insecurity, especially among the most marginalised.

Against this backdrop, 86% of respondents said that they were worried about the cost of living, with 49% of these saying they strongly agreed with the statement (net +81%). Agreement was higher among trans+ people (net +89%), LB+ women (net +86%), and people with disabilities (net +88%).[102]

We also asked respondents whether they had enough money to make ends meet: 55% agreed, while 27% disagreed (net +28%). Trans+ people were less likely to agree (net +16%), while people with disabilities were also more likely to struggle to make ends meet (net +8%) than those without disabilities (net +45%).[103]

More LGBTQ+ people said their rent or mortgage payments were affordable (43%) than those who said they weren't (20%, net +23%). Again, trans+ people were less likely to agree with this statement (net +14%), as were people with disabilities (net +13%) compared with those without (net +32%).[104]

There is also a regional variance, with affordability being lowest in London (net +12%). Financial insecurity appears to be slightly lower in Scotland than the UK average; 61% said they had enough to make ends meet (net +41%), while 48% said their rent/mortgage payments were affordable (net +32%). In Wales, respondents were less likely to say they could make ends meet (52%, net +20%), but most likely to say that their rent/mortgage was affordable (49%, net +30%).

"These findings underline the close relationship between fair treatment at work, confidence in the workplace and financial security. The persistence of negative conduct, and the fact that many incidents go unreported, shows how important it is that legal protections are supported by effective workplace practice and confidence in reporting mechanisms within and beyond employers. Employers have an important role in setting clear standards, building confidence in reporting arrangements and responding consistently when concerns are raised. Barriers to recruitment, retention or progression can affect earnings, job security and longer-term financial resilience, particularly where disadvantages overlap. The central principle is clear: fair, safe and inclusive workplaces benefit workers, responsible employers and the wider economy."

Lisa Pinney OBE
Chief Executive,
Fair Work Agency



Summary

Our latest workplace data shows that a significant proportion of LGBTQ+ people value inclusion when deciding where to work, including respect for their individual identity, as well as visibility and representation. This suggests there is a benefit to employers in ensuring workplaces are inclusive, both in terms of recruitment and employee wellbeing, which is likely to positively impact business performance.

Yet our findings demonstrate that far too many LGBTQ+ people still do not feel able to be open about their identities at work. Incidence of workplace discrimination is lower than reported in our similar research in 2017, which is a highly positive finding, however far too many cases of harassment, exclusion, and intrusive behaviour remain, with as many as 20% of respondents experiencing certain types of discriminatory conduct in the previous year, and much of this goes unreported to employers.

Some LGBTQ+ people are also experiencing barriers to finding work based on their identity. While much of the challenge in finding work appears to be based on market conditions possibly due to difficult economic circumstances in recent years, fear of discrimination is preventing some LGBTQ+ people from finding suitable work.

Finally, the evidence suggests many LGBTQ+ people are experiencing economic strain against rising costs of living, particularly the most marginalised. This reinforces the need to ensure that workplaces are safe and inclusive for LGBTQ+ people so they can invest in their futures and live comfortably into later life.



90 *Employment Rights Act 2025*, https://www.legislation.gov.uk/ukpga/2025/36.

91 M1. Which, if any, of the following factors related to being LGBTQ+ are important to you when deciding where to work? If you are retired/not looking to work, please imagine that you were. (Please select all that apply).

92 M7. Please can you tell us anything else you'd like to share about your experience as an LGBTQ+ person in the workplace, including any experience you have of being discriminated against due to your sexual orientation and/or gender identity, or any positive examples of LGBTQ+ inclusion by your employer?

93 M2. Which, if any, of the following barriers are you experiencing when trying to get a job?

94 D1. To what extent, if at all, are you open about your sexual orientation among... D1_3. People at your workplace.

95 D2. To what extent, if at all, are you open about your gender identity among... D2_3. People at your workplace.

96 D3. Thinking about the people you are open to about your sexual orientation among these groups...To what extent, if at all, do you feel accepted by them in relation to your sexual orientation? D3_3. People at your workplace.

97 D4. Thinking about the people you are open to about your gender identity among these groups...To what extent, if at all, do you feel accepted by them in relation to your gender identity? D4_3. People at your workplace.

98 M3. During your employment in the last year, have you experienced any of the following?

99 M6. You did not say you reported the most recent incident to your employer...Why was this? (Please select all that apply).

100 M4. You said you have experienced at least one of these incidents at work because you are LGBTQ+. Thinking about the most recent incident you experienced, which action(s), if any, did you take? (Please select all that apply).

101 M5. Thinking about the most recent incident you experienced which your employer is aware of, how satisfied or dissatisfied were you with the way your employer handled the incident?

102 L1_1. I am worried about the cost of living.

103 L1_2. I have enough money to make ends meet.

104 L1_3. My current rent or mortgage payments are affordable for me.

SECTION 6

Future - Financial Planning, Family Formation, and Older Age Care

In the context of the significant challenges that LGBTQ+ people often face, many of which have been outlined in this report, making plans for the future may feel like a luxury that some can't afford.

Nevertheless, inclusive policies are important to support LGBTQ+ people to invest in their futures, whether in family formation, financial planning, or older age care. It is positive then that there have been some progressive legislative and policy developments in these areas in recent years to remove barriers faced by LGBTQ+ people.

Law reform in the field of family formation has made it easier for LGBTQ+ people to start families. For instance, the 2024 amendment to the *Human Fertilisation and Embryology Act* modernised processes related to the donation of sperm and eggs, including allowing those living with HIV with an undetectable viral load to make donations to known recipients.[105]

However, eligibility criteria to access some family formation services remain restrictive in other contexts, creating significant barriers to access for same-sex couples not faced by non-LGBTQ+ people.

Same-sex couples have also faced barriers in accessing pension benefits as compared with opposite-sex couples. This included restrictions on LGBTQ+ couples' eligibility for survivor's benefits until a 2017 Supreme Court ruling found this to be discriminatory and equalised access.[106]

In terms of care in older age, in 2025 the UK Government established the Casey Commission, an independent review into adult social care in England, which is tasked with recommending improvements to the care system to make it fit for the nation's changing demographics.[107] Policymakers are also increasingly investing in plans for national care services across the nations, creating a significant opportunity to drive forward equality in access to care and support services, including to meet the needs of older LGBTQ+ people.

Despite these legal and policy reforms, the data in this section reveals that many LGBTQ+ people are experiencing challenges when investing in their future, whether in encountering barriers to accessing family formation services, being financially secure in retirement, or in making plans for their future care needs.

Many LGBTQ+ people are experiencing challenges when investing in their future

“When I became a mother in 2006, despite going through IVF as a couple, I could not simply be recognised as an equal parent to my twins. Because my partner was their biological mother, I had to formally adopt my own children to secure equal parental rights. As publisher of g3 magazine, I heard from countless LGBTQ+ women facing similar barriers. It led my partner and me to establish the Alternative Parenting Show and strengthened my determination to campaign for change. We have made enormous progress, but barriers remain. Fertility treatment should never depend on sexual orientation or gender identity, or on postcode or ability to pay. Everyone deserves an equal opportunity to create the family they long for.”

Linda Riley
Founder,
Lesbian Visibility Week



Family formation

We asked respondents a series of questions about their desire to have children and their use of family formation services. The data reveals that a majority of LGBTQ+ people do not plan to have children in the future: 57% stated that they do not ever want to have children. Of those who are already parents or guardians, 63% do not plan to have any more children.[108]

Around a quarter (27%) of LGBTQ+ people want children at some point: 7% currently want children, while 20% want children in the future.

Breaking down responses by identity, bisexual women (38%) and bisexual men (35%) were most likely to want children at some stage, followed by lesbians (29%). Gay men were the least likely to want children (20%), along with trans+ people (20%), which is driven mostly by low numbers of non-binary people wanting children (18%).

Analysis of the data also found a class element, with those categorised as social grade ABC1 or middle class, more likely to want children at some point (30%), compared with those categorised as C2DE or working class (23%).

For many LGBTQ+ people who wish to have children, family formation services are a route to making that desire a reality. Yet evidence suggests that uptake of services, such as IUI/IVF, surrogacy, adoption, fostering, and fertility preservation is low, and the vast majority of people had not used any service.[109]

The most-used family formation service was IUI/IVF (3%), with higher rates among lesbians (8%). The next most popular service was fertility preservation, including freezing eggs, embryos, ovarian tissue, or sperm (2%), with similarly higher rates among lesbians (5%) as well as trans women (11%) and trans men (7%). Surrogacy (0%), adoption (1%), and fostering (1%) were all reported at lower rates. Uptake of family formation services was higher in Wales across each pathway compared with the UK average.

Finally, we asked respondents who expressed a desire for children but had not yet accessed services about their reasons. Some of these were structural barriers: 24% indicated that services were ‘too expensive’, while 13% said that ‘NHS eligibility requirements are too strict’.[110]

These are considerations often not faced by heterosexual people, even those who do use assisted reproduction services such as IUI/IVF. Many NHS boards require female same-sex couples wishing to access IVF to self-fund six to 12 cycles of IUI before being eligible. In contrast, opposite sex couples need only to try to conceive unassisted for a defined period, meaning that they do not face the same financial burden. As one respondent noted:



Chart 11. Reasons for not accessing family formation services (absolute numbers)

> ***My wife and I were on waiting lists for 5 years. That is too long when your fertility is on a constant downhill with age. It’s this total inequity with straight people who can pop out kids for free and by accident. We had to go to Spain for fertility treatment and spend over £10,000 to have our first child by IUI - the cheapest and easiest option. If we had to have IVF it would be more than double the cost, and if we had to have IVF in the UK it would be more again***
>
> lesbian cisgender woman, 25-34

This economic barrier also varies by class, with those in social grade C2DE more likely to say that services being too expensive was a barrier (27%) compared with those in social grade ABC1 (21%). This is also reflected in the income profiles of family formation service users. Those in the highest income range (£45,000+) reported using IUI/IVF at six times (6%) the rate of those in the lowest range (up to £14,999), and twice the rate in the middle two ranges (3%).

Small numbers indicated their concerns were more directly about the inclusivity of family formation services, with 3% saying that services were not perceived to be LGBTQ+ inclusive, and 5% fearing discrimination.

A significant share simply had not given thought to family formation services (17%) or were unsure of the right pathway (9%). When given an option to write an ‘other’ response, the most common reason given for not currently taking up family formation services was that there was no need due to being in a heterosexual-presenting relationship.

A majority of LGBTQ+ people do not plan to have children in the future

Over half of the LGBTQ+ people we surveyed said that they do not have confidence in being financially secure in retirement

Financial planning

We asked respondents about their confidence in their future financial security. Over half (55%) of the LGBTQ+ people we surveyed said that they do not have confidence in being financially secure in retirement (22% confident, net -33%). Confidence is especially low among LB+ women (net -44%) and trans+ people (net -53%),[111] which may be in part a reflection of the gender pay gap.

One way to boost confidence in financial security might be through accessing professional advice from financial planners, such as advice on tax, inheritance, pensions, or wills. To this end:

- LGBTQ+ people were split on whether they would have confidence in accessing planning advice, with 36% confident and 35% lacking confidence (net +1%). LB+ women (net -9%) and trans+ people (net -18%) were less confident.[112]
- LGBTQ+ people were more likely to say that they would be comfortable seeking advice from professional advisors: almost half (47%) of respondents agreed they would be comfortable (23% disagreed, net +24%). LB+ women (net +19%) and trans+ people (net +10%) were less likely to be comfortable.[113]

This shows that respondents reported greater comfort with the idea of seeking professional advice than in confidence accessing it, suggesting that any barrier here may be about accessibility rather than willingness to discuss personal finances.

We also examined LGBTQ+ retirement expectations to understand how they shape long-term financial planning. Overall, LGBTQ+ people generally expect to live to pension age: 54% agreed, while 19% disagreed (net +35%). Trans+ people were less likely to agree (net +15%). People with disabilities were much less likely to agree (net +18%) than those without (net +46%).[114]

Older age care

With life expectancy gradually increasing in the UK in recent decades, care in older age is an increasingly important aspect of future planning. Yet access to social care services is often a lottery, with many having to cover significant expenses to meet care needs or not being able to access the services they require.

Much of the care provided in the UK is done informally, through existing family and social networks. However, many LGBTQ+ people may be less able to rely on family due to strained relationships, estrangement, or, as seen above, not having children.

A third of LGBTQ+ people felt that they could rely on family, friends, or a partner to support their future care needs (32%). Only 7% strongly agreed, while 27% disagreed (net +5%). Numbers are lower among trans+ people (24% agree, net -9%) and people with disabilities (29% agree, net -5%). Respondents in Wales were more likely to agree than the UK average (36% agree, net +11%).[115]

We asked about preferences for the type of care respondents would like to receive. There is a clear preference for receiving care at home over entering a residential care home; 63% indicated that they would prefer to receive care in their home, just 6% disagreed. This is highest among gay men (74%) as well as older populations (65+: 82%). Seven in ten in Wales felt the same (70%).[116]

There is broad comfort in being open about sexual orientation or gender identity with care providers, with 52% saying they'd be comfortable compared with just 16% saying they'd be uncomfortable (net +36%). Trans+ people have lower comfort in this (net +20%), with trans men more likely to be uncomfortable (net -10%).[117]

However, respondents lacked confidence that care providers would understand their needs as an LGBTQ+ person, with 33% agreeing and 22% disagreeing (net +11%). Gay men have greater confidence (42% agree, net +25%), while confidence for trans+ people is reversed (18% agree, net -30%).[118]

Respondents lacked confidence that care providers would understand their needs as an LGBTQ+ person

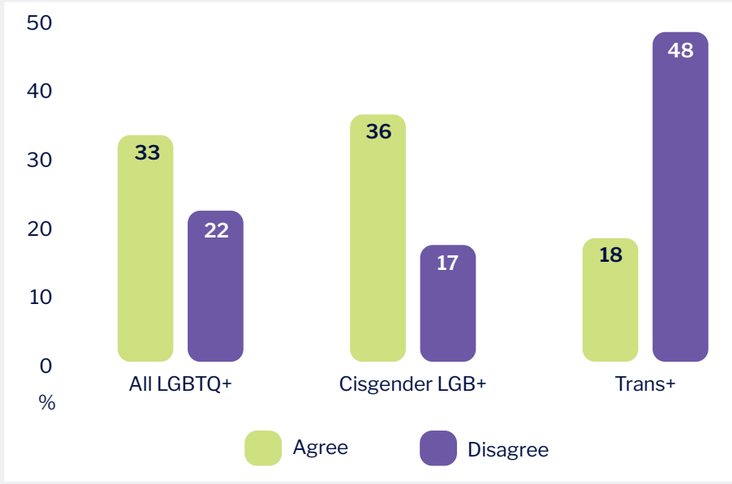

Chart 12. Confidence in carers understanding LGBTQ+ needs among selected groups

> “Good adult social care starts with the individual. It should recognise the whole person – their relationships, identity, history, choices and the people who matter to them – rather than expecting anyone to fit a standard model of care. That principle applies to everyone, but this research shows why it has particular importance for older LGBTQ+ people. When only a third of LGBTQ+ people feel confident that care providers will understand their needs, and confidence is even lower among trans+ people, we should pay attention. Providers, commissioners and policymakers need to build inclusion into the way care is designed, commissioned and delivered, so that people can age with dignity, choice, safety and confidence in the support they receive.”
>
> **Prof Martin Green OBE**
> Chief Executive,
> Care England



If required to receive formal care in a residential home, most people are broadly open to sharing facilities with both LGBTQ+ and non-LGBTQ+ residents:

- 67% indicated they would be comfortable living alongside non-LGBTQ+ people, just 8% would be uncomfortable (net +59%).[119]
- 81% said they would be comfortable living alongside LGBTQ+ people with a different sexual orientation or gender identity to them, only 3% were uncomfortable with the idea (net +78%).[120]

There was a clear age component to these findings, with older respondents expressing lower levels of comfort in sharing a care home with both non-LGBTQ+ people and LGBTQ+ people with a different sexual orientation or gender identity:

- 73% of 18-24 year olds expressed comfort in sharing with non-LGBTQ people, while 61% of those 65+ expressed the same;
- 85% of those 18-24 expressed comfort in sharing with LGBTQ+ people with a different sexual orientation or gender identity, compared with 68% of those 65+.

Trans+ people have a stronger comfort about LGBTQ+-specific care: 54% said they would be comfortable alongside non-LGBTQ+ people (net +38%) compared with 89% being comfortable alongside other LGBTQ+ people (net +87%). Furthermore, trans+ people are twice as likely to say they would be uncomfortable living with non-LGBTQ+ people compared with the overall LGBTQ+ sample (16%).

These findings warrant further exploration of demand for LGBTQ+ specific care, particularly across different demographics. What is clearly important for a large majority of LGBTQ+ people, however, is that the care they receive is LGBTQ+ affirmative and tailored to their needs as an LGBTQ+ person: 67% agreed that this was important to them, with just 7% disagreeing. 19% neither agreed nor disagreed (net +60%). This is especially important for trans+ people (85% agree, net +83%).[121]

Finally, when asked whether they had made plans for future care needs, a majority stated they had not thought about future care needs (58%). Just 4% stated that ‘I have made specific plans for my future care needs (e.g. an advance care plan, power of attorney)’, while a third responded that ‘I have thought about my future care needs, but not made any specific plans’ (35%).[122]

Understandably, older generations were more likely to have made plans than younger generations. However, even among older age ranges, these numbers were relatively low. Just 23% of people aged 65 or over indicated that they had made specific plans, while an almost equal share had not given their future care needs any thought (22%). Among 55-64-year-olds, 12% had made plans and 38% had not thought about it, while among 45-54-year-olds, those figures were 4% and 49%. In both Scotland and Wales, 6% of people reported that they had made advance care plans.

Summary

The ability to plan for a future and to invest in needs in later life is a privilege out of reach for many marginalised people. The data in this section shows that LGBTQ+ people are facing barriers when seeking to start a family, securing their financial futures, and planning for care needs in older age.

There is evidence that many LGBTQ+ people who wish to have children are not accessing family formation services due to structural barriers, including prohibitive costs and NHS eligibility criteria, which are not faced to the same extent by non-LGBTQ+ couples.

As has been seen throughout this report, the most marginalised LGBTQ+ people, notably trans+ people, are often reporting worse outcomes. This section is no exception, with many trans+ people experiencing lower confidence that their financial and care needs will be met in later life.

These findings make clear that there is a need to invest time and resource into care and support systems to ensure they are inclusive, so that LGBTQ+ people can be confident that their futures will be secured, including starting a family where they wish to, investing in their financial future, and ensuring that they are cared for in older age. Only with this investment can LGBTQ+ people thrive into later life.

105 *The Human Fertilisation and Embryology (Amendment) Regulations 2024*. https://www.legislation.gov.uk/ukdsi/2024/9780348261554.

106 *Walker (Appellant) v Innospec Limited and others (Respondents)*, [2017] UKSC 47. https://www.sackers.com/publication/walker-v-innospec-supreme-court-judgment/.

107 Casey Commission: Independent Commission on Adult Social Care, *Terms of reference*, accessed 2026. https://caseycommission.co.uk/about/terms-of-reference/.

108 J2. Do you currently or ever want to have children? If you already have children, please think about whether you want any more.

109 J1. Have you accessed services related to any of the following family formation pathways, either personally or supporting a partner?

110 J3. You said that you currently want children but have not accessed any of the family formation pathways listed... What is your reason for not accessing them? (Please select all that apply).

111 L1_4. I am confident about being financially secure in retirement.

112 L1_6. I feel confident accessing financial planning advice (e.g. for tax, inheritance, pensions, wills).

113 L1_7. I would be comfortable seeking financial advice from a professional advisor.

114 L1_5. I expect to live until the age at which I can claim a pension.

115 K2_1. I can rely on family, partner, and/or friends to support my future care needs.

116 K2_2. I would prefer to receive care in my own home than in a residential care setting.

117 K3_3. Being open about my sexual orientation and/or gender identity to care providers (in your own home or in a residential care home).

118 K4_2. I feel confident that care providers would understand my needs as an LGBTQ+ person.

119 K3_1. Living alongside non-LGBTQ+ people in a residential care home.

120 K3_2. Living alongside LGBTQ+ people with a different sexual orientation or gender identity to me in a residential care home.

121 K4_1. It is important to me that the care is LGBTQ+ affirmative (i.e. designed to validate and support the specific needs and experiences of LGBTQ+ people).

122 K1. Thinking about any age-related care needs you may have in the future, which of the following best applies to you?

Conclusion

We need commitment, determination and courage from our leaders

This data supports what we already knew – that there is no singular 'LGBTQ+ experience'. This report shows clearly that the progress made towards greater equality is felt by some but not all LGBTQ+ people – there remain disparities in happiness, in mental health outcomes, in feelings of safety and of belonging across the lesbian, gay, bi, trans+ and queer community.

We know that the path to equality is a long one. When we look at the civil rights and women's movements we see there have been periods of rapid advances and periods where progress has stalled – or things have gone backwards. The same is true of the LGBTQ+ movement. In 2026, Hungarian parliament voted to amend child protection laws, scrapping measures that stigmatise lesbian, gay, bi, trans+ and queer people. Conversely, LGBTQ+ organisations in Türkiye are experiencing brutal government crackdowns.

Here in the UK we need commitment, determination and courage from our leaders – in politics, business, health and culture – as well as investment in prevention, support and services. There is no single piece of legislation or policy solution that will build on the positive momentum or address the disparities identified in this report. Progress will only be made if we collect and use data – the numbers and the stories – and make sure there is a laser-sharp focus on the needs of the LGBTQ+ community in every legislative or policy initiative at national, regional and local level.

At Stonewall we believe strongly in the importance of a community where our shared experience of oppression, whether based on sexual orientation or gender identity, unites us. What binds us together is also our understanding that we are not all the same. While unity and solidarity are important, so too is knowing when to highlight our different experiences.

This is one of those moments. The data is clear – the experience of trans+ people is not one of progress. This report shows clearly the disparities experienced by the trans+ community including in their safety, access to healthcare, acceptance in the workplace, expectations of care in later life and, most disturbingly, in higher rates of suicide attempts.

We must take action to address this. We call on the Government to develop a new LGBTQ+ Strategy to tackle the root causes of inequality and harm for the whole lesbian, gay, bi, trans+ and queer community. That work will require meaningful investment from the Government and the input and effort of civil society, business and others, joining together to create an action plan that enables the UK to once again be a world-leader in LGBTQ+ rights. This report should be the clarion call needed to set about making change a reality.

Methodology

Stonewall commissioned YouGov to administer a survey of LGBTQ+ people on their experiences of life in the UK. This survey was developed in early 2026. It adapts and builds on a survey administered in 2017 which formed the basis of Stonewall's *LGBT in Britain* reports published in 2018-2020.

In this report we refer to the *LGBT in Britain* survey as 'our similar research from 2017', recognising that there are methodological differences which means that the datasets produced are not directly comparable, but comparisons are included for illustrative purposes.

Participants were selected at random through YouGov's online panel of 2.5+ million individuals. Screening questions were used to ensure that participants identified as LGBTQ+. Fieldwork was conducted online from 25th March – 27th April 2026. The total sample size is 3,473 adults. This includes:

- 2,511 people in England, 599 in Scotland, 306 in Wales, and 57 in Northern Ireland;
- 1,600 gay/lesbian people, 1,497 bisexual people, and 358 people with an 'other' sexual orientation;
- 3,047 cisgender LGB+ people and 426 trans+ people, including 61 trans men, 74 trans women, 235 non-binary people, and 56 people with an 'other' gender identity;
- 1,638 men and 1,544 women.

Quotas were set during sampling and the final sample has been weighted to be representative of LGBTQ+ adults in the UK. Cisgender LGB+ adults were weighted to match Census data by sexual orientation, sex assigned at birth, age, region, ethnicity, and education level. Transgender adults were weighted to match Census data by sex assigned at birth, age, and region. The total results were then weighted together by cisgender/transgender identity to reflect LGBTQ+ adults across the UK.

Tables containing quantitative and qualitative data were supplied by YouGov. Additional thematic and sentiment analysis of qualitative data was conducted by Stonewall using NVivo. Qualitative responses are cited verbatim and are not adjusted for grammar, however spelling is corrected where necessary. Quotes may be condensed for brevity.

The terminology used to describe different demographics, including ethnicity and disability, reflects the terms used by YouGov in its data collection.

Figures based on fewer than 50 people are not considered statistically reliable and are not reported. Figures based on more than 50 people are reported, however some caution should be exercised on bases lower than 100. Percentages are rounded to the nearest whole number.

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- Sarah McIntosh – Chief Executive, MHFA England
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Design: Dan Robinson, danrobinson.uk

Glossary

Term	Definition
Cisgender	Someone whose gender is the same as the sex they were assigned at birth
Gender identity	A person's innate sense of their own gender, whether male, female or something else, which may or may not correspond to their sex assigned at birth
Intersex	A term used to describe a person who has biological attributes of both male and female sexes or whose biological attributes do not fit with societal or medical assumptions about what constitutes male or female
LGBTQ+	An acronym commonly used to describe people who are lesbian, gay, bi, trans, queer, questioning and ace
LGB+	We use this acronym to refer to people who are lesbian, gay, bisexual, or have a sexual orientation other than heterosexual
Non-binary	A term for people whose gender doesn't sit comfortably with 'man' or 'woman'. Non-binary identities are varied and can include people who identify with some aspects of binary identities, while others reject them entirely
Sex assigned at birth	The categories of male and female, which are assigned to a person on the basis of their primary sex characteristics (genitalia) and reproductive functions. This may be referred to as assigned male at birth (AMAB) or assigned female at birth (AFAB)
Sexual orientation	A person's sexual attraction to other people, or lack thereof. Along with romantic orientation, this forms a person's orientation identity
Transgender (trans)	A term to describe people whose gender is not the same as, or does not sit comfortably with, the sex they were assigned at birth. Sometimes shortened to trans
Trans+	An umbrella term to describe all people whose gender is not the same as, or does not sit comfortably with, the sex they were assigned at birth. Includes transgender, non-binary, genderqueer, genderfluid, bigender, gender non-conforming and agender people or indeed inclusive of any of the other ways people define their gender. This term is also inclusive of intersex people who have natural diversity in sex characteristics



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