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1. Foreword

Throughout the consultation process for this paper, our priority as a team was to develop our existing policy to meet the challenges of the current, challenging, political environment.

We have sought to do this while emphasising our core commitment to protect the rights and freedoms of every individual.

Our aim was to establish means (or policies) to protect vulnerable individuals and to overcome recognised challenges faced by LGBTQ+ communities and shortcomings in everything from the health care to housing provided, to young people addressing their sexuality or gender.

Critical to our approach was a commitment to avoid the damaging and divisive language which has been instrumental in the toxic debate of recent years which has served nobody well, only creating widespread anxiety for the LGBTQ+ community and beyond.

To do that I was determined to consult as widely and comprehensively as possible, to listen to the full range of views within the party and to take into account, wherever possible, all genuine concerns.

In pursuing that end I am hugely grateful not just to the Women and Equalities team, particularly Carey Roach, who collated the many responses we received and met, with me, our associated organisations, but also to those groups themselves.

Our interactions including those with Associated Organisations like Plus, Young Liberals, Liberal Democrat Disability Association, Liberal Democrat Women and Liberal Democrat Campaign for Racial Equality proved vital in understanding the challenges and discriminations still prevalent in society, despite the progress of recent decades.

They also highlighted growing issues associated with an aging LGBTQ+ population who, having overcome the homophobia and AIDS crisis of previous decades, now find themselves in social care facing renewed hostility.

We met representatives of Liberal Voice for Women whose concerns over increased abuse on social media encountered by many lesbians shone a light on new issues being faced by many.

Similarly it was vital to reassure them of our party's unequivocal continued commitment to the protection of women against all forms of violence and abuse.

I was also grateful to the Health team for inviting us to join their discussions with Dr Hillary Cass to clarify the aims and recommendations of her report "The Cass Review: Independent Gender Identity Services for Children and Young People" which provoked much of the recent debate.

The result is a policy paper which is, I believe, in the best progressive and reforming traditions of our party, reflects our commitment to supporting the vulnerable in society, and above all, protects the rights and freedoms of all to achieve their own potential.

Christine Jardine MP
Liberal Democrat Spokesperson for Women & Equalities



2. Introduction

Everyone deserves the freedom to live their lives as the person that they are, secure in the knowledge that their fundamental rights will be protected. That commitment is fundamental to Liberal Democrats.

This paper sets out how we believe these fundamental liberal principles can be delivered for the LGBTQ + community, by protecting people's rights, improving their opportunities and treating everyone with dignity and respect.

This includes defending fundamental human rights like the right to privacy, bodily integrity and self-expression.

But it is also about restating our core belief in the individual's right to make their own decisions, to live their lives as they choose as long as they do not harm others. For without equality for all, there is no true liberty.

It is clear that fighting for LGBTQ+ rights is not a choice Liberals make. It is who we are.

The policies we propose will aim to improve all aspects of LGBTQ+ peoples' lives, from tackling anti-LGBTQ+ bullying in schools, to breaking down barriers to accessing healthcare. We will ensure that when LGBTQ+ people face challenges in life, they receive the tailored, inclusive support they deserve - whether that is help for survivors of hate crime or domestic abuse, housing support services, or mental health support.

Liberal Democrats have been instrumental in each of the great strides the UK has made towards LGBTQ+ equality. It was Ed Davey in 2003 who proposed the clause which finally repealed "Section 28", the Conservatives' law which prohibited the "promotion of homosexuality" by local authorities.

We were the first party to take a stand in favour of legalising same-sex marriage, and it was Lynne Featherstone – the first ever Liberal Democrat Equalities Minister – who was the driving force behind the legislation that made it happen. Thanks to the Marriage (Same Sex Couples) Act, more than 55,000 same-sex couples across England and Wales have been able to tie the knot.

It was the former Liberal Democrat MP John Leech who spearheaded the campaign to pardon Alan Turing. Lib Dem peer Lord Sharkey continued the

campaign, tabling the amendment to the Policing and Crime Act 2017 which posthumously pardoned thousands of gay men who had been criminalised for their sexuality.

Our party had been pushing to lift the ban on men who have sex with men's ability to donate blood for over 15 years by the time it finally happened in 2021. While there is still progress to be made in regards to discriminatory restrictions on blood donation, this was a huge leap forward, and one which the Lib Dems have long campaigned for.

However, too many LGBTQ+ people still face prejudice and discrimination simply because of who they are. A recent Galop survey found that among its LGBTQ+ respondents, two-thirds had experienced anti-LGBTQ+ violence or abuse ([Galop, 2021](#)). This unacceptable reality is particularly acute for trans people, and has been made worse by years of damaging, divisive culture wars. The number of hate crimes recorded against trans people has more than doubled in the last five years, with the Home Office itself recognising that comments by politicians and the media may have contributed to the increase. Given that hate crimes are massively underreported, the true extent is expected to be even higher.

On top of this hostility, the LGBTQ+ community still faces deeply entrenched structural inequalities in many aspects of life. They are more likely to experience disproportionately poor health outcomes, workplace conflict, homelessness and difficulties accessing public services - all circumstances that have a significant detrimental impact on an individual's wellbeing. Intersectional discrimination results in additional and particular disadvantages, for example among those LGBTQ+ people who are Black, members of ethnic minority communities or who have a disability.

As liberals, we believe that true equality is achieved when individuals are not only free from prejudice and discrimination, but also free to fulfil their potential.

Liberal Democrats are committed to ensuring that nobody's life chances are limited because of their sexual orientation or gender identity. We want to see comprehensive and holistic work across governmental departments to tackle structural inequalities. But we also need to work to ensure increased acceptance and understanding reflected in public life, in the media, in healthcare, at work, and at home.

There is much to do.

3. Tackling Hate, Abuse and Discrimination

3.1 Introduction

Everybody should feel safe and free to be themselves without fear of hostility or violence. Yet sadly, this is still not the case for too many LGBTQ+ people in our society.

Hate, abuse and discrimination are far too common realities for the LGBTQ+ community. The statistics paint a sobering picture. Two-thirds of LGBTQ+ people report that they have experienced anti-LGBTQ+ violence or abuse ([Galop, 2021](#)).

This can have devastating consequences. The brutal and sadistic murders of 16-year-old Brianna Ghey, in part because she was trans, and of Dr. Gary Jenkins because of his sexuality, are a heartbreaking reminder of the very real impacts that hate can have on the LGBTQ+ community.

The Liberal Democrats are clear that there is no place for homophobia, transphobia, biphobia or hate of any kind in society. We are fully committed to stamping out anti-LGBTQ+ prejudice and hate in all its forms.

3.2 Hate Crime

Hate crime encompasses any form of violence or abuse that is motivated by prejudice or hostility against the victim's identity - or perceived identity.

In the year ending March 2024, there were 27,619 hate crimes recorded that targeted the victim's sexual orientation or trans identity. While that is a slight reduction from the previous year it is more than double the number recorded in 2017-18 ([Home Office, 2024](#)).

Moreover the actual annual number is likely to be much higher than official Home Office figures suggest - the Government's own statistics suggest that fewer than one in ten serious anti-LGBTQ+ hate incidents are reported to the police ([Government Equalities Office, 2018](#)).

Certain groups within the broader LGBTQ+ community are particularly

vulnerable to hate crime. Trans people are disproportionately targeted, while Black and ethnic minority LGBTQ+ people are nearly twice as likely to be victims of hate crime as other LGBTQ+ people ([Stonewall](#), 2017).

Far more needs to be done to tackle the growing threat of LGBTQ+ hate crime. It requires a three-pronged approach that takes steps to support victims while also bringing perpetrators to justice and preventing these terrible crimes from happening in the first place.

Too often, LGBTQ+ victims of hate crime do not get the support services they need. The needs of each individual will, of course, vary - some people might need emotional support, while others might need practical support with moving house or seeking medical attention. But according to Galop, only one third of LGBTQ+ victims who wanted or needed support were able to access it ([Galop](#), 2021).

Existing support services should be given specialised training to ensure that they are meeting the specific needs of LGBTQ+ victims. At the same time, access to specialist 'by and for' services need to be improved, particularly for trans victims.

To ensure that all equalities issues get the focus they deserve, we are committed to creating a dedicated Secretary of State to lead the Women & Equalities Unit. One of their responsibilities would be coordinating work across government to ensure the right steps are being taken to address hate crime and support LGBTQ+ victims.

Special attention should also be paid to how intersectional discrimination can make some LGBTQ+ people more vulnerable to hate crime, and more likely to face barriers when accessing support services.

Bringing perpetrators to justice is also crucial to keeping LGBTQ+ people safe. Hate crimes must be tackled with equal severity, regardless of who they are targeting. The Liberal Democrats are committed to making the necessary legal provisions so that hate crimes against LGBTQ+ people are counted as an aggravated offence, allowing stronger sentences for perpetrators.

Police and prosecutors must also be given the resources and training they need to better prevent and prosecute hate crimes against LGBTQ+ people - something the Liberal Democrats have campaigned for. This should include guidance on how to record hate crimes that may be targeting an individual's multiple protected characteristics, for example if the victim is both Black and LGBTQ+.

Of course, it is better to prevent hate crimes from happening in the first place. That starts with education. It is vital that relationships and sex education includes a focus on understanding differences - to show young people that our differences should be celebrated, rather than a source of hostility. This will be explored further in Chapter 5 of this paper.

3.3 Domestic Abuse

Anyone can suffer domestic abuse, but too often LGBTQ+ survivors slip through the net when it comes to support. This is caused by a combination of factors such as general domestic abuse support services not being equipped to meet the specific needs of LGBTQ+ survivors. Meanwhile, the provision of specialist support has been described as “patchwork” by the Domestic Abuse Commissioner ([2021](#)).

The 2018 LGBT Action Plan, published by the previous Conservative government, outlined steps to improve support for LGBTQ+ survivors of domestic abuse. This included the promise that the Government Equalities Office (now the Women and Equalities Unit) and Home Office would closely work together to provide a package of support that fully considered the needs of LGBTQ+ survivors. These proposals were welcome. However, the LGBT Action Plan was scrapped in 2019 by then-Equalities Minister Liz Truss, and no progress has been made since.

One recent study found that around 6 in 10 LGBTQ+ survivors did not seek out support from services. The same study pointed to unequal access to support across the country, with a higher proportion of LGBTQ+ people living in villages reporting they did not know of any available support services, compared to their counterparts in major cities. It also found that trans and non-binary people were more likely to avoid accessing support because of fears about how they might be treated at the service ([Galop, 2023](#)).

As a result, many LGBTQ+ survivors of domestic abuse are left feeling isolated - something that in itself can further increase a person's risk of experiencing abuse. The lack of accessible support services also means that we are missing opportunities to identify and stop perpetrators as soon as possible.

To change that the Liberal Democrat policy calls for sustainable funding for specialist ‘by and for’ domestic abuse support services, to include specific LGBTQ+ ‘by and for’ services, with special attention paid to ensuring that these services are available across the country, and are not overly concentrated in urban centres. These services should also strive to recognise that some members of the LGBTQ+ community, particularly those from ethnic minority

communities, are more vulnerable to and likely to suffer abuse within the home than their white peers ([LGBT Foundation](#), 2020).

At the same time, more steps should be taken to address barriers that LGBTQ+ people may face when accessing general domestic abuse support services. This includes training for statutory agencies to improve their understanding of the experience of domestic abuse for LGBTQ+ people.

3.4 Abuse in Social Care

One emerging issue that was raised time and again throughout the consultation process is the discrimination and abuse faced by LGBTQ+ people when navigating care settings. Research has shown, for example, that over a third of LGBTQ+ disabled people have experienced discrimination or poor treatment from their personal assistants ([School for Social Care Research](#)).

Similarly, an increasing number of incidents of homophobic abuse in care homes have been reported across the UK in recent years.

This issue is coming to the forefront as the generation of LGBTQ+ people who survived the AIDS epidemic in the 1980s are now reaching the age where they need more care. Many older and disabled LGBTQ+ people are facing the reality of being pushed back into the closet - unable to live as who they are, for fear of being abused by the very people who are meant to care for them.

The story of Noel Glynn is just one example. Noel, a gay man with dementia, experienced homophobic abuse at his care home in London. He faced taunts, mistreatment and physical abuse that resulted in bruising and cigarette burns. Despite whistleblowers coming forward, the staff allegedly responsible for the abuse were returned to work on another floor of the home following a two week suspension ([The Guardian](#), 2023).

Ted, Noel's partner of more than 45 years, found he was shut out of aspects of Noel's care, despite them being in a civil partnership and having his power of attorney. It is vital that family members of LGBTQ+ people in social care are given the same respect as we would expect for all families.

As Compassion in Care's findings have shown, Noel's story is not an anomaly. They have received more than 423 reports of homophobic abuse in care homes through their helpline service. However, the full number of cases is expected to be much higher.

Some concerning themes emerge through Compassion in Care's case studies - particularly the lack of action taken in response to whistleblowers raising concerns about individual staff members ([Compassion in Care](#)). There is a serious risk of the same type of abuse occurring in domiciliary care settings, too.

Noel, and all vulnerable LGBTQ+ people, deserve far better than this. Organisations like Compassion in Care and Not Going Into the Care Closet do excellent work in supporting victims of anti-LGBTQ+ abuse in social care settings. But clearly, urgent action is needed from government to both prevent this awful abuse from happening in the first place, and to ensure that the proper steps are taken if abuse does happen.

Training is crucial to prevention. Case studies show that the abuse can be driven by homophobic beliefs held by the care worker. We call for mandatory training for all care workers on LGBTQ+ acceptance and the particularities of caring for LGBTQ+ people.

But it is also vital to ensure that when homophobic abuse does occur in the care sector, it is treated seriously. Several case studies have highlighted that care workers who were believed to have committed homophobic abuse were simply moved to different care homes or floors. That is not enough. Complaints must be properly investigated or acted upon.

The Liberal Democrats are campaigning to professionalise the care workforce, namely by establishing a Royal College of Carers and creating a national register of care workers. A national register would include transparent records of abuse and prevent abusive care workers who have been struck off from their previous job from simply moving to another job.

It is clear that the Health Secretary should commission an urgent CQC investigation into the unique risks that LGBTQ+ people face in social care settings, which must include understanding the prevalence of homophobic abuse in care homes. This independent investigation should culminate in a series of recommendations to the CQC and Department for Health and Social Care on how they can prevent such abuse from happening in the future.

At the same time, new guidance should be issued for police and prosecutors on dealing with abuse of vulnerable people, particularly within the social care sector.

3.5 Equality Act

The 2010 Equality Act is an important piece of legislation that has been working well for more than a decade in protecting the hard-won rights of LGBTQ+ people, women and many others. It makes it unlawful to discriminate against an individual on the basis of any of a list of protected characteristics, including sexual orientation, sex and gender reassignment.

In 2015, the House of Commons Women and Equalities Committee concluded that “the use of the terms ‘gender reassignment’ and ‘transsexual’ in the Act is outdated and misleading”, and recommended that the list of protected characteristics be amended to “gender identity” ([House of Commons](#), 2015). The Liberal Democrats continue to support this change.

The Act also contains specific exceptions to allow the provision of single-sex services, or separate services for men and women, as long as it is “a proportionate means of achieving a legitimate aim”. Under the Act, excluding or restricting access to trans people from these services can be lawful in certain cases, as long as “the conduct in question is a proportionate means of achieving a legitimate aim.”

There is, however, some confusion for individuals and service providers about how to apply these provisions in practice, in situations that are often very difficult and sensitive. The Liberal Democrats have long called on the government to publish clear and comprehensive guidance on the use of any single-sex and separate-sex exceptions under the Act, using worked examples and case studies from organisations providing these services.

The aim of that guidance should be to ensure everyone who needs single-sex services – such as survivors of sexual violence or domestic abuse – can access them safely, and feels comfortable and secure. But we also have to ensure that nobody faces discrimination on the basis of being trans, as the Equality Act makes clear. To do that it is vital to provide clarity and certainty to service providers and the public.

That guidance should be produced in consultation with those most likely to be affected, including women who have experienced sexual violence or domestic abuse, trans people and providers of single-sex services.

4. Housing

The Liberal Democrats know that a safe home is a necessity and the base on which people build their lives. Yet despite this, nearly one in five (18%) LGBTQ+ people have experienced homelessness at some stage of their life – including 28% of LGBTQ+ disabled people. ([Stonewall](#), 2018).

Many factors contribute to this, including experiencing anti-LGBTQ+ discrimination or harassment, relationship breakdown and mental ill-health. A recent government survey found that familial conflict or abuse was the most common reason reported for why LGBTQ+ people had become homeless ([Government Equalities Office](#), 2024).

Young LGBTQ+ people are particularly vulnerable to experiencing homelessness, with studies showing that trans people experience the highest rates of homelessness among LGBTQ+ youth ([Government Equalities Office](#), 2024).

Homelessness can have a profound and enduring impact on wellbeing. Figures show that 92% of young LGBTQ+ survey respondents reported that being homeless has a negative impact on their mental health. Nearly half said it had a negative impact on their ability to stay in their job or search for a job, while more than a fifth had taken drugs for the first time because of being homeless ([AKT](#), 2021).

LGBTQ+ people also face disproportionate barriers when trying to rent in the private sector. Nearly 1 in 5 private LGBTQ+ renters have experienced discrimination from a landlord or letting agent because of their gender identity or sexual orientation, and are 48% more likely to live in unsuitable accommodation compared to their non-LGBTQ+ peers ([Generation Rent](#), 2022).

Sadly, LGBTQ+ people often receive inappropriate or insensitive support when dealing with housing support services. This includes bullying in hostels and being asked invasive questions by staff. Worryingly, these negative experiences prompt many LGBTQ+ people to disengage from support services ([Government Equalities Office](#), 2024). The government should urgently commission a review to better understand the prevalence and nature of discrimination faced by LGBTQ+ people across the housing sector, as a first step to tackling this problem.

The Liberal Democrats believe that everybody should have access to a safe and

secure home. It is clear that specific steps are needed to make this a reality for all LGBTQ+ people.

To do this, we will campaign for the government to urgently publish a cross-Whitehall plan to end all forms of homelessness. This must include specific provisions to tackle LGBTQ+ homelessness - both to tackle the root causes of LGBTQ+ homelessness, and ensure that inclusive housing support services are available for LGBTQ+ people in every part of the country.



5. Education

5.1 Introduction

As Liberal Democrats, we believe that every child should have the best possible start in life. A strong foundation in those formative years is crucial for ensuring that everyone is free to fulfil their full potential.

Unfortunately, LGBTQ+ children face many challenges. An estimated 43% do not feel able to be themselves at school, while anti-LGBTQ+ bullying remains a significant concern in both primary and secondary education ([LGBT Foundation, 2023](#)).

This is on top of the struggles that many LGBTQ+ children are already facing. LGBTQ+ young people are three times more likely to self-harm and twice as likely to have depression, anxiety and panic attacks. 1 in 4 LGBTQ+ young people face daily tension at home ([Just Like Us, 2021](#)).

For too long, these realities have been ignored. Section 28 - which Liberal Democrats opposed - prohibited schools from teaching about same-sex relationships until 2003. Now, we must build an education system where every child is free to be themselves and reach their full potential, while receiving the support they need to thrive.

5.2 Anti-LGBTQ+ Bullying

Bullying in any form is wrong and must not be tolerated. But sadly, LGBTQ+ children are twice as likely to have been bullied in the past year compared to their non-LGBTQ+ peers. Trans children are particularly likely to face bullying ([Just Like Us, 2021](#)).

The impacts of being bullied at school are significant, complex and wide-reaching. It can lead to poor mental health and can even limit a child's access to education. 40% of LGBTQ+ children who are bullied at school for their identity are truanting as a result, while 52% feel that the bullying has a negative impact on their plans for future education ([LGBT Foundation, 2023](#)). Too many LGBTQ+ pupils are facing this challenge in isolation - with 1 in 5 LGBTQ+ young people who have been bullied not telling anyone ([Just Like Us, 2021](#)).

This is unacceptable. While Liberal Democrats applaud organisations such as

Just Like Us, No Outsiders, and Glitch in fighting against discrimination in education, more needs to be done to ensure that all LGBTQ+ pupils can feel safe and able to be themselves at school.

Preventing this bullying from happening in the first place should be the priority. In 2016, the Government launched the Anti-Homophobic, Biphobic and Transphobic (HBT) Bullying programme, which piloted programmes in primary and secondary schools across England aimed at helping schools to prevent and respond to HBT [Homophobic, Biphobic and Transphobic] bullying, and build more inclusive environments for LGBTQ+ pupils and their families ([Government Equalities Office](#), 2024).

The programme ran from December 2016 to March 2019, and ultimately found that “with support, schools can make significant steps towards HBT bullying prevention and LGBT inclusion” ([Government Equalities Office](#), 2024). Now, the Department for Education should consider the merits of rolling out a permanent country-wide programme with the same aims.

This should be supported by a curriculum that celebrates differences and challenges harmful gender stereotypes, which can often fuel anti-LGBTQ+ bullying.

At the same time, we must ensure that all LGBTQ+ students who are dealing with bullying can access the support they deserve. The Liberal Democrats are calling for a dedicated, qualified mental health professional in every school - to make sure that all students have somewhere they can turn for help. As part of their remit, the dedicated mental health professional should pay particular attention to the detriment that anti-LGBTQ+ bullying can have on a student's mental health, as well as the mental health challenges faced by LGBTQ+ students more generally.

5.3 Relationships and sex education

It is vital that all children learn what they need to know to have safe and healthy relationships. Age-appropriate relationships and sex education (RSE) at school has a crucial role to play, alongside the role of parents and carers.

More than two decades after the repeal of Section 28, too many young people are still not getting the information and advice they need about healthy LGBTQ+ relationships. Too often, this can lead to unhealthy or unsafe relationships being seen as “normal”, and can push children to seek information from adult groups

that are inappropriate and unsafe for them, including online. That can heighten the risk of abuse and sexual exploitation for LGBTQ+ young people.

Age-appropriate, LGBTQ+-inclusive RSE is also particularly important to combat the harmful stereotypes that children and young people may be exposed to outside the classroom – for example, the objectified, highly sexualised portrayal of lesbians in pornography made for men, which can be very alienating and harmful to actual lesbians.

All sex and relationship education must include age-appropriate education about LGBTQ+ relationships, inclusive of asexual and nonbinary identities, delivered by trained teachers in a safe, non-judgemental setting.

5.4 Safeguarding and supporting children

Teachers and other staff in schools and colleges have a crucial role to play in safeguarding children and promoting their wellbeing. That includes supporting children who are struggling with issues related to their sexual orientation or gender identity, and the core focus should always be the best interests of the child.

Whenever possible, decisions about how to ensure a child's safety and wellbeing should be taken by children, parents or carers, and teachers together. However, there may be cases where the family learning of a child's sexual orientation or gender identity would put the child at risk. It is therefore critical that teachers are given the training and support they need to perform their pastoral role and safeguarding duties with care.



6. Healthcare

6.1 Introduction

Evidence has shown that LGBTQ+ people have disproportionately poor experiences of the healthcare system ([Government Equalities Office](#), 2017). There are a number of reasons for this, from the lack of provision of appropriate specialist services, to experiencing stigma or discrimination when engaging with healthcare staff. A survey from Stonewall, for example, found that one in eight LGBTQ+ people (13%) “have experienced some form of unequal treatment from healthcare staff because they’re LGBT” ([Stonewall](#), 2018). Even one person experiencing discrimination of any sort is too much. And this is on top of the universal challenges that far too many people face within the NHS, like long wait times.

Ultimately, this can lead to poorer health outcomes. LGBTQ+ people are more likely to experience mental ill health and substance abuse problems. Barriers to accessing healthcare services also makes late diagnosis of serious conditions more common for LGBTQ+ people, having a negative impact on their physical health ([LGBT Foundation](#), 2020).

At the same time, we understand that some LGBTQ+ people - including trans, non-binary, intersex and asexual people in particular - are unnecessarily medicalised, with their entire identities or physical characteristics being treated as a “disorder” or “disease”. This not only puts undue pressures on the healthcare system, but also increases the risk of social stigma, isolation and discrimination.

The Liberal Democrats are committed to ensuring that everyone has access to the high-quality healthcare they deserve in a timely manner. This requires swift action to improve not only the provision of specialist LGBTQ+ healthcare, like transition-related healthcare, but also to ensure that mainstream NHS services are equipped to provide every LGBTQ+ person with the compassionate, comprehensive care they deserve.

6.2 Mental Healthcare

Studies show that LGBTQ+ people disproportionately experience mental ill-health, including depression, substance abuse and suicidal ideation. The figures are stark. Half of LGBTQ+ people have experienced depression in the last year,



while one in eight LGBTQ+ people aged 18-24 have attempted to take their own life in the last year ([Stonewall](#), 2018).

Some groups within the LGBTQ+ community are particularly vulnerable. A recent study has shown that two thirds of trans people experience depression, with nearly half of trans people thinking about taking their own life ([Stonewall](#), 2018). Disabled LGBTQ+ people and LGBTQ+ people from ethnic minority communities are also particularly likely to experience mental ill-health ([LGBT Foundation](#), 2020). Older LGBTQ+ people experience higher levels of loneliness and isolation, due to weakened kinship networks ([AHSN Network](#), 2021).

There are a number of factors contributing to these unacceptable trends - including LGBTQ+ people's higher likelihood of experiencing harassment or abuse in their daily lives, and lower likelihood of receiving support from their families and wider society ([Silveri et al](#), 2022). Ultimately, this comes down to a phenomenon known as 'minority stress', which recognises that marginalised groups including the LGBTQ+ community "experience stress stemming from experiences of stigma and discrimination, which in turn places them at risk for a number of negative physical and mental health outcomes" ([McConnell et al](#), 2018).

Yet despite this, too many LGBTQ+ people face barriers when trying to access mental health support, including discrimination or a lack of understanding when engaging with healthcare staff. LGBTQ+ people from ethnic minority communities also face unique challenges when it comes to accessing mental health services ([Khanolkar et al](#), 2022).

The Liberal Democrats are committed to ensuring that all mental ill-health is responded to urgently and with the seriousness it deserves. This must be the reality for all LGBTQ+ people as with all other communities.

To do this, we must ensure that people have swift access to the mental health support services they deserve, and that these services are responsive and sensitive to the specific needs of the LGBTQ+ community.

It is vital that all mental health services are inclusive and welcoming for all LGBTQ+ people. The Liberal Democrats are calling for mandatory training for mental health professionals, including frontline CAMHS staff, on supporting LGBTQ+ people. Mental health and suicide prevention training delivered to NHS staff should also be LGBTQ+ inclusive.

However, it is clear that new services are needed to address the tremendous

need for mental health support in our communities. The Liberal Democrats are campaigning to introduce regular mental health check-ups at key points in people's lives when they are most vulnerable to mental ill-health. These would recognise and respond to the specific challenges that LGBTQ+ people face. Similarly, we are committed to cutting suicide rates with a focus on community-based suicide prevention services, which should also take the specific needs of LGBTQ+ people into account.

We would also establish a statutory, independent Mental Health Commissioner to oversee the provision of mental health services and ensure that LGBTQ+ inclusivity is at the heart of these services.

6.3 Intersex Healthcare

Intersex is an umbrella term used to describe anyone who has physical sex characteristics which differ from what is typically expected of males or females. These variations are typically genetic, or otherwise present at birth.

Sadly, intersex people still face many challenges when accessing healthcare. This is acutely true for intersex infants. Although clinical research suggests that as many as 1 in 300 infants are born with "atypical genitalia", there are no official statistics collected on the number of intersex people in the UK, or intersex-presenting infants born in the UK each year ([Government Equalities Office](#), 2019).

What we do know, however, is that infants and children with variations in their sex characteristics are routinely subjected to unnecessary medical interventions which they are not able to consent to. This is despite the fact that the majority of intersex traits pose no medical risk. These treatments can have devastating consequences, including psychological trauma, sterility and incontinence ([Durham University](#), 2022).

Despite the UN calling these medical interventions a human rights violation, the UK Government has taken no steps to provide intersex people with medical safeguards. Other countries, like Malta, have already taken steps to legislate for these protections. The Liberal Democrats believe that nobody should be subjected to unnecessary medical interventions without their consent. These rights must be enshrined in law, so we will push for legislation that protects intersex infants and children from any medically unnecessary treatments or surgeries without their consent.

6.4 Trans Healthcare

This area has been perhaps the most contentious and controversial LGBTQ+ issue of recent years. However, in discussion with various groups it became clear that there is more consensus on this issue than perhaps originally anticipated.

All those we spoke to agreed that the provision of healthcare for trans people in the UK has long failed to live up to the standards of what everyone deserves.

Shocking delays have become commonplace. A staggering 90% of trans people have reported experiencing delays when it comes to seeking transition-related healthcare - a figure that is even higher for trans men (94%) and non-binary people (96%) specifically ([Trans Actual](#), 2021).

If a trans person is considering whether they should transition, they will usually be referred to a Gender identity clinic (GIC) by their GP. GICs are specialised NHS services for people with gender dysphoria – which the NHS describes as “a sense of unease that a person may have because of a mismatch between their biological sex and their gender identity” ([NHS](#)).

Currently, there are only 8 GICs for adults in England, 4 in Scotland and just one in Wales, established in 2019. As of 2023, the average wait time for a patient to receive their first appointment was 382 weeks - longer than seven years ([NHS](#), 2024). These long waiting times can have devastating consequences for vulnerable people who need care. Alice Litman, a 20 year old trans woman from Brighton, tragically took her own life while stuck on a GIC waiting list for nearly 3 years.

Moving forward, we need to ensure that all trans people have access to high-quality healthcare on the same basis we should expect for all patients, on the basis of an informed consent model of care. The Liberal Democrats believe that the Government should expand provision of transition-related services so that trans people can access the appropriate healthcare they need. This should include the recruitment and training of more specialist clinicians. Doing this will be crucial for getting waiting times down.

We also believe that primary care providers have a crucial role to play in providing high-quality healthcare to all young people questioning their gender identity and easing the pressures on specialist services. This is particularly true when someone has already transitioned but will require lifelong monitoring of their hormone levels. During the consultation we heard that in recent months,

there have been a growing number of anecdotal reports from trans adults who say their GPs are refusing to prescribe hormones, even in cases when they have already been discharged from a GIC and have a letter from that GIC asking their GP to make the prescription ([Trans Actual](#), 2024). The NHS should issue clear guidance informing GPs on how to safely prescribe hormones, other trans-related medications and other pathways of care.

At the same time, we want to ensure that trans people have access to all the medical care they need. This includes ensuring that relevant medical interventions - like mammograms, cervical cancer and prostate cancer screenings - are available to those who need them. The NHS should work with medical professionals to develop a policy to ensure that this is facilitated through medical records, while always protecting the confidentiality of trans patients.

Sadly, similar issues are seen when it comes to young trans people's access to healthcare. Since long before the Cass Review, Liberal Democrats have been arguing for far better specialist gender-related healthcare services for children and young people who need them.

The old system – a single clinic with a shockingly long waiting list, rated “inadequate” by the Care Quality Commission – was clearly failing vulnerable young people at a very difficult time in their lives. Before GIDS closed, more than 5,000 young people were stuck on the list, left waiting almost three years on average for a first appointment.

For young people going through what are often incredibly difficult experiences, three years is an eternity. We campaign strongly against appallingly long wait times across the NHS – whether for cancer treatment or mental health – and it's right that we do so for gender identity services too. The Liberal Democrats have long been pressing the Government to establish new specialist services – and recruit and train more specialist clinicians – so that children and young people can access the appropriate, high-quality healthcare they need in a timely manner.

The NHS's move to create multiple new regional centres is therefore a welcome one. But the first two have only just started taking on existing patients from GIDS, leaving those who've already been stuck on waiting lists for years to wait even longer. Delays are still commonplace when getting these centres set up. The third clinic was expected to be operational by November 2024, yet this did not happen.

Unless the Government shows far more urgency in getting these centres

properly up and running, more and more children will be denied the care they need as they languish on long waiting lists. Liberal Democrats will keep pushing for this to happen as quickly as possible.

It is also important that we ensure that all young people who are seen at these centres get the individualised, high-quality healthcare they deserve. It is right that treatment is largely based around talking therapies for both the child and their parents or carers – to give all gender-questioning young people the time and space to make clear and informed decisions about their future. But that has got to mean young people start talking therapy when they need it, not after years of delay.

It is usually best for decisions about medical treatments to be made by young people and their families together. However, it has long been established in law that young people aged 16 or over have the right to consent to their own treatment in the same way as adults, and young people under 16 can consent if they have “sufficient intelligence and understanding” to know what the treatment involves (if they are “Gillick competent”). These are important legal safeguards to protect young people’s safety while respecting their autonomy.

In March 2024, the NHS stopped prescribing puberty blockers as a treatment for young people with gender incongruence or dysphoria, having concluded that there was “not enough evidence to support... [making] the treatment routinely available at this time” ([NHS](#), 2024). In May 2024, the then-Conservative Government issued an emergency order banning private providers from prescribing puberty blockers as well. The ban on private and overseas prescriptions of puberty blockers has been indefinitely extended by the new government, and is due to be reviewed in 2027.

Understandably, these developments have caused fear and anxiety for many young trans people and their families. The Liberal Democrats have called on the government to publish all the evidence behind this decision, including the results of its consultation. Transparency around why these decisions have been made - and what will happen next - will be crucial to start rebuilding young trans people’s trust.

The NHS will also be conducting a clinical trial on the impacts of puberty blockers, due to begin in early 2025. Numerous organisations including the Council of Europe have also raised concerns about the potential ethical implications of only offering a treatment to a small group of patients on a clinical trial ([Council of Europe](#), 2024). These concerns must be properly considered by NHS England.

When it comes to any individual medical interventions, Liberal Democrats believe it is right that these decisions are made by clinicians and patients together, informed by the best possible evidence - as is the case in all areas of healthcare. The government should support research to improve evidence on the safety and efficacy of potential treatments. That research must take into account the direct, personal experiences of those who have used these services in the past.

6.5 Reproductive Healthcare

All LGBTQ+ people deserve equitable access to the reproductive healthcare services they need - but some inequalities persist and must be addressed urgently.

One example is the difficulty that lesbian couples face in accessing in-vitro fertilisation. According to NICE guidelines, NHS-funded access to IVF is only available to women in England “who have not conceived after two years of regular unprotected intercourse or 12 cycles of artificial insemination.” In practice, this requires all lesbians to pay for artificial insemination cycles before being eligible to access NHS-funded IVF - an insurmountable financial barrier for many couples.

Although the Government’s 2022 Women’s Health Strategy pledged to remove the requirement for lesbian couples to pay for artificial insemination before accessing NHS-funded IVF services, rollout of this new policy has been painfully slow. As of April 2024, only four of the 42 integrated care bodies in England have actually made this change.

Liberal Democrats will push for all integrated care bodies to make this change as a priority, to ensure equitable access to IVF for all lesbian couples who are looking to start a family.

6.6 Sexual Healthcare

Equal access to testing and treatment is vital for ensuring that all LGBTQ+ people get access to the sexual healthcare they need. However, a postcode lottery of LGBTQ+ sexual health services exists that must be urgently addressed.

HIV Pre-Exposure Prophylaxis (PrEP) is a medicine that significantly reduces the user’s risk of getting HIV. PrEP is most commonly used by people who do not currently have HIV but are at a higher risk of getting it, including gay and



bisexual men as well as some trans and nonbinary people. Studies show it is highly effective, expected to reduce the risk of getting HIV from sex by 99% when taken daily. Following a three-year trial, PrEP was made freely available on the NHS in 2020 to anyone at high risk of HIV.

The Terrence Higgins Trust has pointed to issues with inconsistent access to PrEP across the country ([2022](#)). Liberal Democrats remain committed to ending HIV transmission in the UK by 2030, and it is clear that an effective and equitable rollout of PrEP will be critical for achieving this.

Similar access issues have been reported with HIV and sexually transmitted infection (STI) home testing services. These tests, which individuals administer themselves at home before posting samples to a lab, can be crucial for removing barriers to access for some LGBTQ+ people like stigma. However, a mystery shopper exercise revealed that postal STI services were less likely to be offered in rural and semi-rural areas ([Terrence Higgins Trust, 2023](#)). On the other hand, in-person testing options for STI testing may be the most accessible option for other LGBTQ+ people - for example, if someone shares a home with family members who are not aware of their sexuality. It is for this reason that all local areas should have both postal and face-to-face services available.

Liberal Democrats are committed to ending the postcode lottery for home-based sexual health testing. We would do this by establishing a national online portal to provide HIV and STI home testing and posting services to everyone who needs them across England, similar to the Sexual Health Wales online service. This would be coupled with a long-term aim to roll out PrEP prescriptions onto the same national online portal.

Routine HIV testing will also be crucial to hitting the 2030 target. That is why Liberal Democrats would look to expand opt-out HIV testing to GPs. Opt-out HIV testing is already in place in emergency departments, under which all blood tests are screened for HIV, Hepatitis B and Hepatitis C, unless the patient decides they do not want it. The opt-out approach to testing has long been supported by public health specialists because it helps destigmatise and normalise HIV testing, while also reaching those who are less likely to access sexual health services, including some ethnic minority communities ([Lancet, 2022](#)).

Sexual health education services should also strive to provide tailored advice and support for all groups within the LGBTQ+ community, including bisexual and trans people.

7. Conversion Practices

Conversion “therapy” is an abhorrent practice which seeks to suppress or change a person’s sexual orientation or gender identity. These can include psychological treatments and spiritual counselling, which are currently legal in the UK, but also sexual violence and electric shock therapy, which are illegal.

The harms that conversion practices cause are profound, having been described by the UN Independent Forensic Expert Group as “inherently humiliating, demeaning and discriminatory” ([United Nations General Assembly](#), 2020). One 2020 study found that people who had undergone conversion practices were twice as likely to have suicidal thoughts, and 75% more likely to plan a suicide attempt ([American Journal of Public Health](#), 2020).

The Government’s own research has suggested that 7% of LGBTQ+ people had undergone or been offered conversion practices. This is an archaic practice that should be consigned to history. Sexual orientation or gender identity is not a problem to be treated and ‘cured’ - which is why Liberal Democrats are proud to have called for a ban on conversion practices since 2015.

The previous Conservative Government recognised its importance in 2018 when they committed to banning conversion practices, yet they failed to ever bring legislation forward. In November 2023, Liberal Democrat peer Lorely Burt introduced a private members’ bill, which passed second reading in the House of Lords in February 2024 but fell when Parliament was dissolved for the general election. The new Labour Government has also pledged to ban conversion practices, and the King’s Speech promised a draft bill to do so, but at the time of writing it has not yet been published.

Liberal Democrats are committed to legislating for a full, comprehensive ban on conversion practices. It is crucial that this ban is fully inclusive of trans, non-binary and asexual people.

As health professionals have made clear, a ban on conversion practices would not prevent people from receiving specialist healthcare, including talking therapy, from qualified providers if they are struggling with their sexual orientation or gender identity. All major psychological therapy professional bodies in England - alongside the Royal College of Psychiatrists, Royal College of GPs, NHS England, NHS Scotland and Public Health Wales among others - have adopted a definition that differentiates between genuine medical practice that has no predetermined goal to change or suppress an individual’s sexual orientation or gender identity, and conversion practices.





8. Public Life

8.1 Introduction

Everybody deserves to be able to participate freely and fully in public life. That means ensuring everyone can be themselves in public - secure in the knowledge that their identity and fundamental rights will be respected and that they will be treated with dignity.

The Liberal Democrats are committed to ensuring that everyone can enjoy this freedom, including all members of the LGBTQ+ community.

To do this, we must identify and tackle barriers facing LGBTQ+ people to participation in public life, including issues with accessibility and negative public attitudes.

At the same time, we must work to improve LGBTQ+ representation in public spheres. Having people with diverse life experiences and perspectives in positions of power benefits everyone - and that needs to include LGBTQ+ people. It will make our institutions more responsive to issues facing marginalised groups like the LGBTQ+ community, and it will also inspire young LGBTQ+ people to know that no aspect of public life is out of bounds.

8.2 Diversity in public appointments

It is crucial that our public services reflect the diverse communities they represent. Not only is it the morally right thing to strive for, but diversity in public appointments can have a myriad of benefits for our society. It ensures that a wide range of perspectives are brought to our public services, ultimately improving their effectiveness and ability to support the communities they serve. Diversity in public roles can also play a key role in addressing the negative stereotypes and prejudice that some members of our communities hold.

Yet despite this, the government currently has no targets when it comes to LGBTQ+ representation in public appointments. It also does not publish any data on current levels of LGBTQ+ diversity in these appointments.

The Liberal Democrats have long been committed to improving diversity in public appointments by setting ambitious targets and requiring progress reports to Parliament with explanations when targets are not met. This must include LGBTQ+ diversity.

This includes bringing section 106 of the Equality Act into force, which would require all political parties to publish diversity data on their candidates standing in House of Commons, Scottish Parliament, and Welsh Senedd elections. Transparency is vital for understanding where work still needs to be done to improve diversity in public appointments.

The government should also finally deliver the actions that were promised on this in the 2018 LGBT Action Plan. This would see the Women and Equalities Unit coordinating work across the public, private and voluntary sectors to improve the representation of LGBTQ+ people in public life.

8.3 Employment

In the workplace, LGBTQ+ people deserve the same treatment and opportunities as their non-LGBTQ+ colleagues. Despite this, more than 1 in 3 LGBTQ+ people have faced bullying or harassment at work ([TUC](#), 2017). Moreover, one survey found that nearly half of employers were “not sure” if they would hire a trans person, and more than 1 in 3 said they would be less likely to do so ([Crosland](#), 2017).

More needs to be done to ensure all LGBTQ+ people can thrive in the workplace. That includes tackling workplace discrimination, but also improving diversity across different sectors. That's why Liberal Democrats are committed to requiring large employers to monitor and publish data on LGBTQ+ employment levels, pay gaps and progression, as well as five-year aspirational targets on diversity.

8.4 Data Collection

To achieve equality for all LGBTQ+ people, we need to know where inequalities persist - which is where data collection comes into play. Good data is an important tool for policy making. It helps us understand the scale of an issue and who is impacted by it. However, not nearly enough comprehensive data on LGBTQ+ people is routinely collected in the UK.

In 2017, the Government began conducting the National LGBT Survey. Takeup was incredible. Over 108,000 people responded, making it the largest national survey of LGBTQ+ people in the world to date. The survey provided invaluable insight into the nature and prevalence of inequalities facing the LGBTQ+ community across the UK. The findings paved the way for the Government's 2018 LGBT Action Plan, which outlined priority areas for government action to improve the lives of LGBTQ+ people.

However, the exercise has not been repeated since and the Action Plan was quickly scrapped by the Conservative Government. This type of data collection should not be a once in a generation occurrence. Liberal Democrats will push the government to facilitate another National LGBTQ+ Survey over the course of this Parliament. It is vital that the questions included in the survey are intersectional in nature, acknowledging the different experiences that LGBTQ+ face depending on not only their sexual orientation or gender identity, but also their race, ethnicity, socioeconomic status, and whether they have a disability, to name a few.

In order to gain meaningful results, the government should also work hard to regain the trust of LGBTQ+ people - particularly trans and non-binary people. Given the lack of action since the last survey, such rebuilding of trust is essential.

At the same time, the Government should begin a review into how to best collect data that can be used to set policy priorities for achieving LGBTQ+ equality. Questions the review should consider include the potential merits of having a National LGBTQ+ Survey repeated at regular intervals, the role that civil society organisations could play in data collection, and how to apply any recommendations arising from this data in a timely fashion.

8.5 Gender Recognition

For over two decades, since the passage of the Gender Recognition Act in 2004, we have had a process for trans people to gain legal recognition of their affirmed gender, in the form of a gender recognition certificate (GRC). A GRC is required for a trans person's legal documents - including birth and marriage certificates - to reflect their identity. Many other countries have similar laws, from France and Canada to Pakistan and Brazil.

However, the process for obtaining a GRC has long been criticised for being too bureaucratic and intrusive. Only 9,055 people have been granted a GRC since the Act came into force 19 years ago. ([Ministry of Justice](#), 2024) In the Government's 2017 National LGBT Survey, 39% of trans people who were aware of the gender recognition process but hadn't applied for a GRC yet said it was because the process is too bureaucratic, while 34% said it was because the process is too expensive ([UK Government](#), 2017).

The previous Conservative government recognised these shortcomings in 2018, when they introduced proposals to reform the gender recognition process. However, these were largely scrapped by the then-Equalities Minister Liz Truss in 2020. The only changes that went ahead at the time were digitising the application process, and reducing the application fee from £140 to £5.

Liberal Democrats remain committed to implementing the proposals put forward by the Government in 2018 to reform the gender recognition process, which we first endorsed in 2014. Under these proposals, the requirement to provide medical reports confirming a gender dysphoria diagnosis would be removed, as well as the “spousal veto”, which requires the person applying for a GRC to provide a statutory declaration of consent from their spouse if they are married. Applicants would still have to prove that they have lived in their affirmed gender for at least 2 years, and make a legal declaration that they intend to live permanently in that gender for the rest of their life. We would also enable non-binary and intersex people to gain legal recognition of their identities. None of these changes to the gender recognition process would change the Equality Act protections for single-sex services, as the Equality and Human Rights Commission has made clear.

Ministers from all four nations of the UK should work together to agree reforms that ensure there are no cross-border barriers to mutual acceptance.

Apart from birth certificates, the other commonly-held official document that records a person's sex is their passport. Trans people can change the sex on their passport to their affirmed gender, whether or not they have obtained a GRC. If they do not have a GRC, they must normally provide a letter from a doctor or medical consultants stating that their affirmed gender is likely to be permanent. However, unlike many other countries, the Government currently only allows the sex on passports to be male ('M' or 'F'). This means that non-binary and intersex people cannot get a passport reflecting their gender identity. Liberal Democrats believe that the Government should introduce an 'X' gender option on passports, so that non-binary people can have their identities recognised, their dignity respected and international alignment with global standards maintained. Several other countries have already successfully introduced similar measures, including Germany, the Netherlands, Australia and Canada.

8.6 Accessibility

All LGBTQ+ people deserve to be able to access public life and public spaces without limitations. However, accessibility issues persist - particularly for some groups within the wider LGBTQ+ community.

This includes LGBTQ+-focused spaces. A 2018 survey found, for example, that 80% of d/Deaf or disabled LGBTQ+ people were put off attending Pride or a LGBTQ+ venue due to access concerns. A number of reasons were behind this shocking statistic - including a lack of venue accessibility information being available online, dismissive attitudes from staff or members of the public, a lack

of accessible facilities, and no access to performance provision like BSL interpreters or audio description ([Attitude is Everything](#), 2018).

Similarly, LGBTQ+ people from ethnic minority backgrounds can also experience barriers when accessing LGBTQ+ spaces. Multiple ethnic minority LGBTQ+ respondents to a recent UCL survey reported that they had experienced racism and exclusion within LGBTQ+ spaces, including physical attacks and being unfairly denied entrance to gay bars ([Khanolkar et al](#), 2022).

Being unable to access what is meant to be an inclusive space for LGBTQ+ people can be a particularly distressing and isolating experience that nobody should have to face. Improving the accessibility of LGBTQ+ spaces must be a priority. Multiple steps should be taken to achieve this, which could include awareness training for venue staff and more central government funding for community spaces and events that are seeking to improve accessibility.



9. Asylum

Our country should be doing all it can to help people who are forced to flee violence and persecution simply for who they are or who they love. But for too long, LGBTQ+ refugees have faced hostility when navigating the UK's asylum system. In 2023, the Home Office refused more than 700 LGBTQ+ asylum claims from nationals of countries where consensual same-sex acts are criminalised ([Home Office](#), 2024).

This needs to change - starting with ending the culture of disbelief for LGBTQ+ asylum seekers in the Home Office. Too often, asylum seekers who are making claims on the grounds of their sexual orientation or gender identity see their claims rejected due to the increasingly high burden of proof. The Liberal Democrats believe that an LGBTQ+ applicant should never be refused refugee status on the basis that they could be discreet.

Under the previous Government, a number of countries including India and Georgia were added to the UK's list of 'safe countries' for asylum seekers. Although this may be a fair assessment for the majority of cases, it ignores widespread evidence of human rights abuses against LGBTQ+ people in those countries ([Rainbow Migration & Asylos](#), 2024). This means that LGBTQ+ asylum seekers from these countries can be sent back to their country of origin without proper consideration of their claim, despite the very real threats they will face.

The Liberal Democrats believe that the UK Government should continue to give sanctuary to refugees who have fled the risk of violence because of their sexual orientation or gender identity.

We remain concerned about the detrimental impacts that the Illegal Migration Act and certain provisions in the Nationality and Borders Act have on LGBTQ+ asylum seekers in particular. We are committed to repealing the Illegal Migration Act and provisions from the Nationality and Borders Act that make it harder for LGBTQ+ refugees to claim asylum in the UK.

Further, a number of disturbing reports on the treatment of LGBTQ+ asylum seekers in immigration detention centres and hotels have come to light. Several LGBTQ+ asylum seekers have reported that they face violence and hostility in asylum accommodation, sometimes even being placed in shared accommodation or detention with members of the same communities they have been forced to flee from in their home countries ([University of Birmingham](#), 2024). Similarly harrowing stories are seen amongst LGBTQ+

people in immigration detention, including being subject to verbal and physical abuse from other people in detention ([Rainbow Migration](#), 2023).

The Home Office can not keep letting these vulnerable people down. The Liberal Democrats will push to ensure that the specific needs of LGBTQ+ asylum seekers are considered at all stages of the asylum system.



10. Supporting LGBTQ+ Veterans

We have witnessed a long and unjust history of discrimination towards LGBTQ+ members of the Armed Forces. Until 2000, the Armed Forces had a ban on LGBTQ+ personnel. This meant that LGBTQ+ people serving in the military could be legally discharged from their duties or even face criminal prosecution just for being who they are. This impacted thousands of LGBTQ+ veterans.

The anti-gay ban had - and continues to have - an enormous impact on people's lives. LGBTQ+ veterans were outed to their friends and family without their consent, facing extreme stigma. They lost their jobs, had their medals removed and were stripped of their pensions. In some cases, a conviction made it impossible for people to move on and rebuild their lives due to the barriers a criminal record creates when trying to find employment.

These injustices continued long past the ban being scrapped in 2000. Stephen Close, for example, lived for thirty years as a convicted sex offender until he was eventually pardoned in 2013. One recent study found that 86% of LGBTQ+ veterans felt their dismissal under the ban affected their mental health, while 75% said their finances had been affected ([Northumbria University](#), 2023).

In 2023, Lord Etherton published the long-awaited LGBT Veterans Independent Review, which made 49 recommendations to address the injustices faced by LGBTQ+ veterans. Although the Ministry of Defence has made progress at implementing more than 32 of the recommendations, the Government's initial decision to cap the amount available for compensation payouts was bitterly disappointing.

The cap meant that average compensation payments are expected to be just £12,500 for each impacted veteran - an amount that veterans charities have overwhelmingly called "inadequate and unacceptably low" ([Help for Heroes](#), 2024).

It is unconscionable that those who put their lives on the line for our country should continue to be treated with disrespect and disregard. Liberal Democrats will fight to ensure that LGBTQ+ veterans get the justice they deserve. It is right that the government has now decided to revisit this and commit to fairer levels of compensation. Moving forward, we will keep pushing the government to ensure that all the Review's recommendations are acted upon as swiftly and comprehensively as possible.

11. Promoting LGBTQ+ Rights Abroad

The Liberal Democrats have always stood up for our fundamental values of equality, liberty and human rights. As proud internationalists, that means promoting these values abroad as well as here in the UK.

Our party strongly believes in fighting for the rights and dignity of all LGBTQ+ people, wherever they live. But sadly, Britain's ability to provide global leadership on this has been tarnished by the previous Conservative Government. The UK had been due to host a major global LGBT conference in London in July 2022, but the Government cancelled it following the backlash to its refusal to ban trans conversion practices and general criticism of its record on LGBTQ+ rights.

In addition, the Conservatives' reckless and counterproductive decision to slash the UK's international development budget has damaged our country's proud reputation as a global leader in humanitarian aid and left vulnerable people without crucial support.

Today, there are still 67 countries that criminalise people for their sexuality, 32 of which are members of the Commonwealth ([FCDO](#), 2023). There are at least 9 countries that formally target trans people by criminalising gender expression, such as "imitating the opposite sex" - although the number of countries in which it is unsafe to be openly trans is far higher ([Human Rights Watch](#)).

Sadly, some countries have even been moving backwards when it comes to LGBTQ+ rights. Uganda, for example, passed new legislation in 2023 that further criminalised homosexuality, including by introducing the death penalty for several acts considered to be so-called "aggravated homosexuality" ([Human Rights Watch](#), 2023). Closer to home in Europe, the Hungarian government has moved to end the legal recognition of trans and intersex people - an attack that was eventually taken to the European Court of Human Rights ([Amnesty International](#), 2023).

The UK has a moral imperative to make clear on the world stage that the rights of all LGBTQ+ people must be respected. The Liberal Democrats will fight to ensure that the UK is playing this vital role.

Many countries with appalling laws and practices on human rights rely on Britain for aid and for trade purposes. In countries where LGBTQ+ people are still



criminalised just for being who they are, there is a clear imperative for the UK to apply more pressure using our economic and aid relationships with them. We will push to ensure this happens.

The Liberal Democrats are committed to developing a comprehensive strategy for promoting the decriminalisation of homosexuality and advancing LGBTQ+ rights abroad, working with our international partners to do so. This should include increasing the amount of Official Development Assistance (ODA) allocated to LGBTQ+-specific projects.

Above all, our work to promote the rights of LGBTQ+ people abroad must be underpinned by a fundamental Liberal Democrat commitment - restoring spending on international aid to 0.7% of national income and re-establishing an independent international development department.

From his first day in office, Trump has made clear that under his leadership, the United States will not stand up for LGBTQ+ rights - and particularly the rights of trans people. Restoring the aid budget is more important than ever. As the US turns more inward, the UK must fill the gap left on the global stage - particularly when it comes to promoting LGBTQ+ rights. And as British politicians like Liz Truss cozy up to American Far Right figureheads at CPAC, we must make clear that there is no place in our society for their brand of extremism and division.

It is crucial that all the UK's global spheres of influence are united in our goals of promoting and defending LGBTQ+ rights - whether it is our foreign policy, international development work, or trade and defence relationships. For example, the Liberal Democrats would introduce a 'presumption of denial' for arms exports to governments listed as human rights priorities in the Foreign Office's annual human rights report, including for abuses of LGBTQ+ rights. Similarly, we will push for the UK to put these priorities at the heart of our foreign policy, including by finally hosting a global LGBTQ+ conference here in the UK.

The Liberal Democrats also remain committed to unequivocally upholding the European Convention on Human Rights, which plays a key role in defending LGBTQ+ rights.

12. Conclusion

The controversies of recent years have undermined the UK's reputation and role as a world leader in protecting the rights of the LGBTQ+ community. Re-establishing that reputation will need both effective policies - as outlined in this paper - and a strong statement of intent from the Government.

To ensure their delivery, we demand a dedicated Secretary of State for Women and Equalities, who will be able to address these priorities in a way that is not possible if the role continues to be that of a junior minister.

We will also push for a new LGBTQ+ Action Plan, building on the one that was scrapped by the previous Conservative government. This will provide the blueprint for coordinating cross-government work to improve the lives of LGBTQ+ people, ensuring that delivering LGBTQ+ equality is at the heart of all government departments.

Our party has a crucial role to play in making the positive case for LGBTQ+ equality. And while public attitudes have become less liberal in some areas of LGBTQ+ acceptance, we shall continue to campaign for positive change ([National Centre for Social Research, 2023](#)).

It is not about the party, it is not just about liberalism. It is about the people at the centre of these issues who need our support.

