

Trans and non-binary people's experience of GP care in Kirklees and Calderdale

July 2025



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Introduction

In July 2025, Healthwatch England published their report [What trans and non-binary people told us about GP care |](#)

[Healthwatch](#), which captured the experience of over 1,300 people nationally. They asked trans and non-binary people about their experiences at their GP surgery. The aim was to understand how well GP services are working for people who need general healthcare and gender-affirming support, like hormone prescriptions or referrals to gender clinics

Healthwatch Kirklees and Healthwatch Calderdale are now able to publish the findings from local data which was shared with

Healthwatch England. We received 36 responses: 18 from Kirklees and 18 from Calderdale. By comparing national themes with local insight, we aim to highlight what's working well in Kirklees and Calderdale, where challenges remain, and how services might improve.

Who we heard from

Respondents spanned a range of age groups, with the majority aged between 25 and 54. Most identified as trans masculine, trans feminine, or non-binary.

- 50% said they are neurodivergent (autistic, ADHD, dyslexic, etc.)
- Around 30% said they have a disability or long-term condition
- Just under half described their financial situation as 'not at all comfortable'

Findings

1. At the GP front door

Many respondents told us that everyday tasks like booking an appointment, talking to reception, or sitting in the waiting room can be uncomfortable or upsetting.

Some people described being misgendered or having their name or identity disrespected when checking in or being called for appointments.

"Accessing appointments is stressful but attending has been okay once past reception." – Calderdale

"Reception staff wouldn't make eye contact. I felt like I wasn't welcome there." – Kirklees

2. Updating your NHS record

Changing names or gender markers at the GP is a key step for some trans and non-binary people, but it often comes with challenges.

People mentioned delays, staff not knowing how to help, or worries about losing access to screening or medical history.

"It wasn't clear who to speak to, and I didn't want to have that conversation in front of a queue of people." – Kirklees

"Even after updating my records, I still get letters with the wrong name and gender." – Calderdale

3. General GP care

Only 4 out of 36 respondents rated their general GP care as poor, but most responses were neutral.

"They were respectful but clearly didn't know how to help – I had to explain what to do." – Kirklees

"I needed mental health support and felt like they didn't take me seriously once I mentioned I was trans." – Calderdale

4. Gender-affirming care

Gender-affirming care was rated more negatively: 10 people rated it as 'poor', 3 were refused HRT, and 11 accessed HRT privately or DIY.

*"Shared care agreement was denied despite hormone recommendation from the gender clinic."
– Calderdale*

"I had to go private. The GP said they weren't trained and couldn't help me." – Kirklees

5. Impact of poor GP care

People told us that poor GP experiences affected their health, confidence and wellbeing.

"I avoid the GP now unless it's urgent – I don't feel safe going in." – Kirklees

"I've skipped treatment because I don't want to go through being misgendered again." – Calderdale

Overall themes

1. Trans people often feel they must educate GPs about their care.
2. Reception and admin staff play a big role in patient experience.
3. Access to HRT is a major concern for many respondents.

Conclusion

The feedback we received in Kirklees and Calderdale echoes many of the national themes seen in Healthwatch England's July 2025 report. Locally, people also described needing to educate their GP, struggling to access HRT, and facing misgendering or stigma at the GP front door.

Compared to the national findings, local respondents appear to report similar levels of dissatisfaction with gender-affirming care but gave more neutral or moderate ratings for general care. However, the burden of 'transmin'—the admin and self-

advocacy work trans and non-binary people do to access care—remains significant.

This reinforces the need for consistent, respectful and informed care across GP services in both areas.

Recommendations

1. Provide all GP practice staff – including receptionists – with annual training on gender identity, respectful communication, and the Equality Act 2010.
2. Introduce a simple, private process for patients to update their name, pronouns or gender marker at reception or online.
3. Add a standard field for pronouns and preferred name on patient records, visible to all staff.
4. Display visible statements of inclusion in waiting areas (e.g. Pride in Practice status, posters, or rainbow lanyards).
5. Establish a named GP lead for gender-affirming care within each practice, supported with clear guidance on shared care and bridging prescriptions.
6. Work with local ICBs to map and promote practices with trans-inclusive services and identify where additional support or peer learning is needed.
7. Monitor trans and non-binary patient satisfaction annually to track progress and identify areas for improvement.

West Yorkshire Integrated Care Board's response to our report and recommendations

The following response is from the Senior Primary Care Manager from West Yorkshire Integrated Care Board:

"Thank you for sharing your recent report and recommendations regarding the experiences of trans and non-binary people accessing GP care. We fully recognise the importance of creating inclusive, respectful, and accessible services for all patients and appreciate the insight your findings provide.

I am pleased to confirm the following actions are planned across our practices and at ICB level:

- 1. Annual Training for All Staff**

We will explore annual training for all GP practice staff, including reception teams, covering gender identity awareness, respectful communication, and compliance with the Equality Act 2010.

- 2. Updating Patient Details**

A confidential process for patients to update their name, pronouns, or gender marker either at reception or via online service is available to all patients.

- 3. Visible Inclusion Statements**

Practices have been encouraged to display inclusion statements in waiting areas, including posters, and rainbow lanyards for staff.

- 4. Named GP Lead for Gender-Affirming Care**

We aim for each practice to identify a named GP lead for gender-affirming care. These leads would be supported

with guidance on shared care arrangements and bridging prescriptions.

5. **Mapping and Peer Support**

We are working with local ICB teams to map practices offering trans-inclusive services and identify areas requiring additional support or peer learning.

6. **Monitoring Patient Satisfaction**

We are committed to annual monitoring of trans and non-binary patient satisfaction to track progress and inform continuous improvement.

We remain committed to working collaboratively with Healthwatch and our communities to ensure equitable access and positive experiences for all patients.”