

RECOMMENDATIONS FOR MANAGERS & DECISION MAKERS

These recommendations have been produced in response to 'Beyond Babies & Breast Cancer', a wideranging overview of available evidence on the healthcare needs of lesbian and bisexual women.

To read the full report, download a copy from www.lgbt.foundation/womenshealth, email women@lgbt.foundation or call **0345 3 30 30 30** to request a printed version.

COMMUNICATE in a non-discriminatory way, without making assumptions about sexual orientation, to create a safe and respectful environment for everyone.

- Ensure that your staff are trained in communicating in a sensitive and non-discriminatory way and understand how making assumptions about sexual orientation can be damaging to patient/clinician interactions.

MONITOR sexual orientation as part of your equality data and use the findings to inform future plans.

- Questions on sexual orientation should be asked and recorded alongside questions on other protected characteristics (for example gender, disability and ethnic origin) for both patients and staff members. Ensure that your team understands why these questions are important and are trained in sensitive questioning techniques and in encouraging collection of this data.
- Ensure that your systems allow you to adequately record relationship status and sexual orientation.
- Analyse monitoring data across all protected characteristics (including sexual orientation) to identify where there are gaps, trends and differences. Use this data to improve patients' access, outcomes and experience of your services. Refer to the guidance produced by NHS North West and LGBT Foundation: lgbt.foundation/som.

INCLUDE lesbian and bisexual women's needs in mainstream health information, services, policies and strategies.

- Ensure that health information produced or disseminated by your staff is inclusive of lesbian and bisexual women and their families and relationships. Consider using quotes or case studies from lesbian or bisexual women, referring explicitly to lesbian and bisexual women when there is specific information that is relevant to them, and using images of same-sex couples.
- Ensure that staff delivering services are aware of the specific health needs of lesbian and bisexual women and are ready to respond to these as required.

TARGET lesbian and bisexual women with specific health information and campaigns.

- Develop targeted campaigns around key issues, such as alcohol consumption, smoking, self-harm, mental illness and breast health. Targeted communication aimed at lesbian and bisexual women, such as on cervical screening, has been shown to be successful at changing behaviour.
- Consider encouraging specific targeting of patients for health checks/screening. Lesbian and bisexual women may visit their GP less often, especially if they are not parenting or accessing contraception. This means they may miss out on routine screening, such as cervical and breast screens, and may not be exposed to healthy living messages around drinking, smoking and weight gain.

DEVELOP specialist health and support services for lesbian and bisexual women, their partners and families.

- Advise your staff on specialist services (for example, mental health services) for lesbian and bisexual women and ensure they know how to refer to these services.
- Be proactive in raising awareness of local social and support organisations for lesbian and bisexual women and develop simple referral pathways to these services.