Summary of the Consultations Undertaken to Inform the Development of a successor Strategy to the National LGBTI+ Inclusion Strategy

Kathy Walsh, Grainne Healy and Jane Finn 9th September 2024

Table of Contents

Introduction	
Methodology	3
Pillar 1 Safety	
Pillar 2 Health and Well-being	
Pillar 3 Participation and Access	17
Pillar 4 Equality and Non-Discrimination	22
Conclusions	26
Appendix 1 Organisations who made submissions	27

List of Tables and Figures

- Table 1 Overall Numbers Engaging in the Consultation Process
- Table 2 Regional Workshop Attendance
- Table 3 Focus Group Schedule and Format
- Table 4 Headline Priority Actions to Address Safety
- Table 5 Headline Priority Actions to Address Health and Wellbeing
- Table 6 Headline Priority Actions to Address Participation and Access
- Table 7 Headline Priority Actions to Address Equality and Non-Discrimination
- Figure 1 Identities of the Individuals who made Submission via the Online Portal

Introduction

The Department of Children, Equality, Disability, Integration and Youth (DCEDIY) sought the professional services of a facilitator to design and run a series of Public Consultations over a period of 8 to 12 weeks from the start of April to early July 2024, on priority issues/themes to support the development of a successor Strategy to the National LGBTI+ Inclusion Strategy. Following a competitive tendering process, they awarded the tender to Dr Grainne Healy and Dr Kathy Walsh (with the support of LGBT Ireland).

Methodology

Overview

It is envisaged that the successor to the National LGBTI+ Inclusion Strategy will adopt a whole of lifecycle approach in addressing the needs of LGBTIQ+ people. A robust consultation process was therefore designed to inform this approach. Two separate processes were employed; one which was open to participants aged 18 and over and a separate process involving the participation of children and young people, which was undertaken by the National Participation Office, in DCEDIY. This report refers to the consultation with those aged 18 and over.

Consultations were undertaken using four discrete methods. In person workshops, small focus groups, interviews and, through an online submission portal for both individuals and organisations. A total of 550 individuals were consulted and there were engagements with almost 50 organisations.

This report represents a summary of the consultations undertaken with key priority actions included for consideration as part of the development of a successor Strategy to the National LGBTI+ Inclusion Strategy. A more detailed report on the consultation process is available here.

Table 1 Overall Nur	nbers Engaging in the Co	nsultation Process	
Individuals	Regional Workshops	116	550
	Focus Groups	64	
	Submissions	370 ¹	

¹ 416 was the total number of online submissions received. 11 of this total number were variations of duplicated returns from either individuals or organisations submissions.

Organisations	Submissions	35 ¹	59 ²
	Interviews	8	
	Departmental	16	
	representation at the		
	consultation with		
	members of Steering		
	Committee for the first		
	National LGBTI+		
	Inclusion Strategy		

The Regional Workshops

Regional workshops were advertised via www.gov.ie, through Gay Community News (GCN) and by LGBTIQ+ support organisations around the country. Five of the six regional workshops were organised in community venues. The sixth and final workshop was held online with sign language interpreters provided. See Table 2 for details.

Table 2 Reg	Table 2 Regional Workshops Attendance							
Location	Date	Numbers LGBTIQ+ groups represented						
		attending	Lesbian	Gay	Bisexual	Trans	Intersex	Other Queer
								identities
Dublin City	13 th	20	V	$\sqrt{}$	V	V	V	$\sqrt{}$
	June							
Galway City	15 th	10	V	V		V	V	
	June							
Cork City	17 th	29	V	V	V	V	V	V
	June							
Dundalk	24th	35	V	V	V	V	V	V
	June							
Portlaoise	25 th	10	V	V		V	V	
	June							
Online with	2 nd	10	V	V		V		$\sqrt{}$
signers	July							

² Some larger organisations (e.g. the HSE) engaged more than once in the consultation process, with different sections of the organisation involved in different aspects of the consultation.

Online with	2 nd	12	$\sqrt{}$	$\sqrt{}$	$\sqrt{}$	$\sqrt{}$	\checkmark
ISL	July						
interpretation							
Total		116					

Attendees at the workshops were divided into small groups where they were facilitated to conduct conversations about 1) Safety, 2) Health and Wellbeing, 3) Participation and Access and 4) Equality and Non-Discrimination. Each group was asked to focus on key issues of concern that needed to be addressed, actions that could be suggested to address issues most effectively and where possible to identify priority actions. The data from across the consultations was reviewed and actions were prioritised based on their ability to effect change; their ability to address the scale and depth of the concerns raised by the LGBTIQ+ community; and the relative importance of the concerns to one another, to the wider LGBTIQ+ community and to the specific groups within that community. The four themes were informed by the European Commission LGBTIQ Equality Strategy 2020-2025, the review of the National LGBTI+ Inclusion Strategy, implementation of the LGBTI+ National Youth Strategy, and international and national research. The themes were identified in advance of the consultations. Participants also had an opportunity at the end of the workshop to raise any additional issues. The thematic structure of the workshops was validated across all sessions, as few issues were highlighted outside of these thematic areas as priority issues for consideration.

First National LGBTI+ Inclusion Strategy Steering Committee Workshop

An additional workshop was organised online with members of the Steering Committee for the first National LGBTI+ Inclusion Strategy. The group is made up of representatives of Government departments, State agencies and a range of LGBTIQ+ support organisations. This group was responsible for monitoring the implementation of the first Strategy.

Focus groups

Focus groups were organised with specific groups within the wider LGBTIQ+ community. These groups were organised with the support of a range of LGBTIQ+ specific support organisations as well as other organisations who work with these individuals.³ See Table 3 for details of the focus groups that were organised.

³ While most of these organisations are funded through various means to support their work, it is noted that a small number of the support groups and stakeholders offering support to these communities do so on an entirely voluntary basis, with no funded supports.

Table 3 Focus Group Schedule and Format			
Group	Date	Location	
Migrants	11 th May	In person	
Trans people	20 th June	In person	
Disabled people ⁴	26 th June	Online	
Older people	1 st July	Online	
Intersex people	1 st July	Online	
Bisexual people	4 th July	Online	
Travellers and Roma	5 th July	Online	
Total Number of Individuals	64		
who attended			

Attendance at the groups varied from 1 to 20 people, with no individuals attending the Traveller and Roma workshop. A small number of interviews were conducted with organisations working with Traveller and Roma communities in lieu of the focus group. Efforts were also made to organise a focus group with prisoners. However, a decision was ultimately made not to pursue this option given that it had the potential to expose those attending the group to unnecessary risk due to their LGBTIQ+ identity. The consultation organisers also reached out to several organisations who provide support to ex-prisoners to see if they could assist in the organisation of a focus group with ex-prisoners. However, few of the support organisations were aware of how many of the individuals they supported were members of the LGBTIQ+ community, so it was not possible to organise a group via this means.

Interviews

Consultations with the Traveller and Roma community took the form of interviews. One interview with an organisation working with Traveller and Roma communities, a second with an organisation working with the Traveller community. Further efforts to engage LGBTIQ+ Travellers and Roma with the consultation were attempted through individual interviews, however this was not successful. An interview was also conducted with a staff member from an LGBTIQ+ support organisation who had worked with an LGBTIQ+ prisoner at the invitation of a prison Social Worker. Exploratory discussions were also held with Inclusion Ireland and

_

⁴ We use the term 'disabled people' throughout this document. Some people prefer the term 'disabled people', and others prefer 'people with a disability'. In this instance, the consultation organisers were asked by the disabled persons support organisations to use the term 'disabled people' in preparation for this focus group. For further advice on disability language and terminology see National Disability Authority (2022) NDA Advice Paper on Disability Language and Terminology (Available here: https://nda.ie/uploads/publications/NDA-Advice-Paper-on-Disability-Language-and-Terminology.docx)

with the Health Service Executive (HSE) to see if it might be possible to organise a consultation with LGBTIQ+ individuals with an intellectual disability. However, this did not prove feasible.

Online submissions

The online submission portal opened at the end of May 2024 and closed in early July 2024. It was promoted via www.gov.ie., by LGBTIQ+ support organisations around the country as well as at through the various in-person and online consultation events. A total of 416 submissions were received.¹

Individual submissions

Of the 370 individuals who responded, approximately 87% of the individuals chose to describe themselves were members of the LGBTIQ+ community. The remainder were either family or friends of members of the LGBTIQ+ community. Two hundred and thirty-six (236) individual respondents provided details of which LGBTIQ+ group they identified with, with some individuals falling into more than one group. For example, one individual identified themselves as a 'disabled older trans person', while another described themselves as a 'non-binary migrant' effectively demonstrating the fact that many members of the LGBTIQ+ community have multiple identities and proposed actions to include all LGBTIQ+ people may well require intersectional approaches.

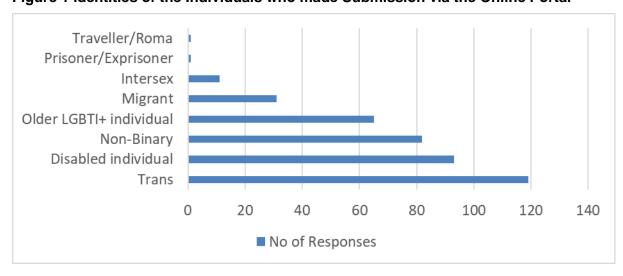


Figure 1 Identities of the Individuals who made Submission via the Online Portal

Organisational submissions

Responses were received from 35 named organisations.⁵

⁵ See Appendix 1 for details of the organisations who made a submission. Intersex Ireland made two distinct submissions.

Pillar 1 Safety

All the Individuals who attended the in-person and online consultations and the majority of those who made online submissions reported experiencing increased incidences of homophobia, lesbophobia and transphobia both in their everyday lives and indeed online over the last 18 months.

The view across all the consultations was that the situation for members of the LGBTIQ+ community had become less safe than it had been in previous years. In addition, there was a clear consensus that both LGBTIQ+ individuals and the LGBTIQ+ community had become more fearful, with the rise of the far right, as well as increasing levels of misinformation being spread online and via social media. The view expressed across all the consultations was that the 'more different you looked' the more likely you were to experience violence and discrimination. This in turn filtered down into community members' decisions about how they dressed in public and what events they went to, and with whom. For example, some of those attending the in-person events spoke about having to think more about what they wear in public, in order not to draw unwelcome attention to themselves, while others admitted that they no longer felt safe to attend a Pride parade alone, but instead made plans to travel and attend with others, which felt safer.

It was also clear from the various in-person and online consultations and submissions that relationships between many LGBTIQ+ individuals and An Garda Síochána (AGS) is marked by a significant lack of trust, which may in turn prevent people from reporting a crime. This is a significant concern in terms of the safety of the community.

The LGBTIQ+ support organisations (quoting the An Garda Síochána (AGS) – 2022 Hate Crime Data⁶) noted a 29% increase in reported hate crimes and hate related (non-crime) incidents, with sexual orientation (22%) the second most prevalent discriminatory motive (behind race at 32%) and nationality (21%). They also noted that hate motives were increasingly evident in a range of incidents in 2022, the largest percentage being public order (30%), minor assaults (20%), assault causing harm (9%) and criminal damage (8%). Concerns about safety were seen to affect all the different LGBTIQ+ groups and all ages with Belong To

⁻

⁶ An Garda Síochána (2022) Hate Crime Data and Related Discriminatory Motives (Available here: <a href="https://www.garda.ie/en/about-us/our-departments/office-of-corporate-communications/press-releases/2023/march/an-garda-siochana-2022-hate-crime-data-and-related-discriminatory-motives.html accessed 24th July 2024)

Youth Services and others quoting recent research⁷, which found that young LGBTIQ+ people were also experiencing violence and abuse and feeling unsafe both in public and, perhaps even more worryingly, in the school environment.

Safety not surprisingly, was identified as an area of major concern in all the various consultations and particularly within the individual online submissions and the LGBTIQ+ support organisation submissions. Those attending the consultations were pleased to see that it was being considered as a key pillar of the new strategy, as addressing safety concerns among the LGBTIQ+ community was seen as key to supporting the inclusion of the community in wider societal activities. Initiatives that were identified as working well across all the consultations included: The establishment of Coimisiún na Meán in relation to regulating hate speech online, as well as the specific recognition of the LGBTIQ+ community within the Third National Domestic Sexual and Gender Based Violence Strategy. Other positive initiatives identified included work done by the National Transport Authority in support of LGBTIQ+ safety on public transport, and examples of the establishment of positive working relationships between An Garda Síochána and LGBTIQ+ support organisations in several locations around the country.

The key concerns across the consultations related to; the rise of the far right and linked to this, the rise in levels of on street violence, as well as online intimidation and targeting of LGBTIQ+ people. Across all the submissions and the consultations, the issue of an individual's safety was linked to their physical identity and their presenting identity with a strong perception among the community that the more an individual presents as visibly queer, the more likely they are to experience violence and discrimination, with some groups (e.g. trans and intersex people) identified as more vulnerable than others by most of the consultees. The priority actions included in this section were the ones most frequently identified by consultees. See Table 2 for details.

⁷Higgins A., Downes C., O'Sullivan K., de Vries J., Molloy R., Monahan M., Keogh B., Doyle L., Begley T., & Corcoran P. (2024) Being LGBTQI+ in Ireland: The National Study on the Mental Health and Wellbeing of the LGBTQI+ Communities in Ireland. Dublin: Trinity College Dublin (Available https://www.belongto.org/app/uploads/2024/04/FINAL-Being-LGBTQI-in-Ireland-Full-Report.pdf) Higgins A., Downes C., O'Sullivan K., de Vries J., Molloy R., Monahan M., Keogh B., Doyle L., Begley T., &

Corcoran P. (2024) Being LGBTQI+ in Ireland: The National Study on the Mental Health and Wellbeing of the LGBTQI+ Dublin: Communities in Ireland. **Trinity** College Dublin (Available https://www.belongto.org/app/uploads/2024/04/FINAL-Being-LGBTQI-in-Ireland-Full-Report.pdf)

Pizmony-Levy, O. (2022). The 2022 Irish National School Climate Survey Report. Research Report. Global Observatory of LGBTQ+ Education and Advocacy. New York: Teachers College, Columbia University (Available here: https://www.belongto.org/app/uploads/2023/07/2022-School-Climate-Survey Full-Report.pdf)

Table 4 Headline	Priority Actions to Address Safety
1.	Resource and equip the Press Ombudsman, Comisiún na Meán
Misinformation	and the Broadcasting Authority of Ireland respectively, to
(Hate crime	challenge misinformation and ensure national standards are
legislation is	maintained.
dealt with under	 Introduce effective regulation of social media platforms with more
Pillar 4)	stringent regulation and control of algorithms (not just guidelines)
	with stronger enforcement of hate speech regulations by all
	social media companies. Introduce significant consequences for
	those who commit these offences.
	 Counteract anti-LGBTIQ+ narratives through positive
	messaging. Specifically implement a public awareness
	campaign to address misinformation in relation intersex and
	transgender people.
2. Domestic	 Increase awareness among the LGBTIQ+ community of the
Sexual and	specialist DSGBV Support organisations that operate locally and
Gender based	ensure the community is aware that these services are
Violence	independent of the state.
(DSGBV)	 Provide staff and volunteers working in Domestic Abuse
	Refuges/Services and Rape Crisis Centres with training in
	relation to sensitivities where domestic abuse and/or sexual
	violence occurs within same-sex relationships.
3. Safety in	Ensure better protection for customer-facing public services staff
public spaces,	and particularly library staff.
night-time	 Develop and deliver LGBTIQ+ bystander training (like that
economy and	developed by University College Cork in relation to DSGBV) for
LGBTIQ spaces	bus/taxi drivers and others working in the night-time economy to
	support them to be able to intervene to call out and stop
	homophobic behaviour.
	 Introduce grants to assist LGBTIQ+ organisations, as well as
	organisations that support LGBTIQ+ individuals to improve their
	security infrastructure.
4. Relationship	 Undertake a campaign targeting the LGBTIQ+ community, which
with An Garda	details how to report a crime. This campaign needs to tell people
Síochána (AGS)	how and to whom to report to in plain English.

- Develop mandatory comprehensive and ongoing Continuous Professional Development (CPD) training programmes for Gardaí on LGBTIQ+ issues, hate crime, and intersectional identities, focusing on building trust and ensuring that law enforcement responses are informed, respectful, and supportive. Monitor and evaluate the effectiveness of this training.
- Reconvene the Garda National Diversity and Integration Forum (following structural reform) to enable dialogue between An Garda Síochána and civil society organisations representing LGBTIQ+ communities.
- Incorporate a requirement for LGBTIQ+ community representatives to be members of Local Community Safety Partnerships (LCSPs) to ensure that the specific safety needs and concerns of LGBTIQ+ individuals are addressed at a local level.

5.Training for greater safety for LGBTIQ+

 Ensure specialist support organisations' input (Lesbian, Gay, Bisexual, Trans and Intersex) is sought and embedded into the development and delivery of LGBTIQ+ awareness training.

Specific concerns for/of particular groups

6. Migrants

- Ensure the gender identity and sexual orientation of International Protection Applicants is considered in relation to their placement in Emergency Accommodation and Direct Provision.
- Provide training around issues of gender identity and sexual orientation of International Protection Applicants for Emergency Accommodation and Direct Provision managers, including development of and training on policies on zero tolerance of homophobia. Monitor and evaluate the impact of this training on residents in the centres, including LGBTIQ+ and other vulnerable and marginalised residents.
- Provide LGBTIQ+ organisations with access to International Protection Accommodation Service (IPAS) centres and adequate resourcing to enable them to engage with and provide supports to LGBTIQ+ applicants.

7. Prisoners	 Irish Prison Service to ratify policies which accommodate
	LGBTIQ+ prisoners, and trans prisoners' safely.8
8. Traveller and	 Resource Traveller organisations sufficiently to enable them to
Roma	increase the supports available to LGBTIQ+ Traveller and Roma
	individuals and their families, thereby creating the conditions for
	more open discussions around LGBTIQ+ identity within the
	Traveller and Roma communities (Both as a prioritisation of
	safety and of health and wellbeing).
	 Develop joint LGBTIQ+ and Traveller awareness training for
	mainstream statutory services (covering health, education, social
	welfare) to enable appropriate support for individual LGBTIQ+
	Travellers.

⁸ Office of the Inspector of Prisons (2021) COVID-19 Thematic Inspection of Limerick Prison

Pillar 2 Health and Well-being

Most individuals who attended the in person and online consultations, and many of the individuals and organisations who made online submissions reported experiencing challenges associated with accessing both the general and the LGBTIQ+ specific health and wellbeing services and supports they required. This section mainly focuses on exploring LGBTIQ+ specific health needs, although some reference is made to challenges related to accessing wider general health services.

Areas that were seen by the majority of those involved in the consultations as working well in relation to health and wellbeing included: access to vaccines, access to home STI testing as well as expansion of the community sexual health information programmes. Some individuals also reported very positive engagements with their GPs and GP practice nurses. The LGBT Champions Programme was identified as a positive development in the provision of care for older LGBTIQ+ people, while numerous individuals reported that finding and engaging with a local LGBTIQ+ support organisation was a valuable support in relation to their overall wellbeing. Finally, the growth in autism awareness generally, and the growing recognition of the prevalence of high levels of autism within the LGBTIQ+ community was also seen as a very positive development.

The LGBTIQ+ support organisations who made submissions highlighted the fact that members of the LGBTIQ+ community have worse health outcomes than members of the cisgender community, with higher rates of some cancers within the LGBTIQ+ community. These organisations also highlighted the lack of LGBTIQ+ patient voices being included or sought in relation to ongoing health services provision and reform. Among individual members of the community who attended the consultations and who made submissions there was a strong view that the LGBTIQ+ experience of healthcare had worsened since the development of the first LGBTI+ Inclusion Strategy.

There was a general recognition across the consultations that mental health services are under resourced and under pressure. It was also widely recognised that members of the LGBTIQ+ community can be fearful to open up about their mental health due to the stigma and fear of blaming their mental health issues on being LGBTIQ+. Individuals attending the consultations also drew attention to the fact that often, when they do finally get to a mental health professional, the professional does not know 'how to deal' with or provide care to LGBTIQ+ people, and all too often assume being LGBTIQ+ is the problem, when it is not. According to the submissions and inputs of various LGBTIQ+ support organisations to the

consultations the lack of mental health resources means that individuals with complex mental health care issues are increasingly looking to the LGBTIQ+ organisations for support/s.

Key concerns consultees highlighted in relation to accessing to high quality LGBTIQ+ specific healthcare supports that conform with international standards included: the need for training and awareness among health professionals and care staff in relation to LGBTIQ+ specific health issues, access to appropriate mental health supports; as well as dealing with the challenges of being HIV positive and concerns related to substance abuse. Concern was expressed that the roll out of Pre-exposure prophylaxis (PrEP) had stalled.

Interestingly, the healthcare issue most frequently identified across all the consultations by members of the trans community and members all the other LGBTIQ+ groups was the issue of trans healthcare. The fact that Ireland has been identified⁹ as having the worst healthcare for transgender people among the 27 EU member-states and that the National Gender Service (NGS) does not currently abide by the World Professional Association for Transgender Health (WPATH) global health guidelines for trans healthcare in relation to the application of an informed consent model were frequently cited by LGBTIQ+ support organisations. Long waiting lists to access these services were another key concern.

Key intersex community concerns related to the provision of specialist health care for the intersex community, the ending of unnecessary surgeries for intersex babies, as well the provision of better mental healthcare and the development of an appropriate mechanism to bring intersex persons with lived experience together with health care professionals to enhance the health care provision for the intersex community.

Other concerns related to the extent and nature of disability within the LGBTIQ+ community, as well as the various challenges faced by disabled LGBTIQ+ individuals in terms of accessing a range of LGBTIQ+ specific and other wider health supports. Older LGBTIQ+ people had concerns in relation to access to LGBTIQ+ friendly care in residential settings. The key health and wellbeing concerns of bisexual people consulted were linked to the fact that bisexuality is too often confused with promiscuity and the assumption of heterosexuality by health professionals and those working in the healthcare sector. LGBTIQ+ migrants were most exercised about their ability to access primary care and to access LGBTIQ+ specific health care in a timely fashion. Prisoners' concerns were linked to the negative health impacts of

⁹ Adams, N. and Ganesan, D. (2023) *The State of Trans-Specific Healthcare in the EU: Looking Beyond the Trans Health Map 2022*. Transgender Europe (TGEU) (Available here: https://www.tgeu.org/files/uploads/2023/11/TGEU-Trans-Health-Map-Report.pdf)

solitary incarceration, the need for confidentiality in relation to accessing LGBTIQ+ specific health care, as well as a need for a multiagency approach to supporting LGBTIQ+ prisoners. See Table 5 for details of the actions that were identified as priority areas of action.

Table 5 Headline F	Priority Actions to Address Health and Wellbeing
1. Addressing	 Enhance and increase access to LGBTIQ+ mental health
Mental Health	support for adults and young people and address the stigma felt
supports for the	by LGBTIQ+ individuals in mental health services by providing
LGBTIQ+	more specialised HSE counsellors trained to work with
community	LGBTIQ+ people. Make this service accessible in the Irish Sign
	language.
	 Provide mental health supports within LGBTIQ+ community
	spaces for LGBTIQ+ individuals to seek supports in spaces they
	consider to be safe.
	 Compile a directory of LGBTIQ+ friendly counselling services.
	 Provide psychological support for LGBTIQ+ children and their
	parents, including supports for trans and non-binary people that
	supports and affirms an individual's gender identity.
2. Inclusive	 Make the healthcare system more inclusive through the
healthcare	provision of an ongoing programme of LGBTIQ+ awareness
system	training for GPs, health care professionals and health care staff
	as part of their foundation training but also as a part of
	continuous professional development.
	 Support the ongoing review, development and enhancement of
	LGBTIQ+ specific health and support services with the
	involvement of both LGBTIQ+ individuals and their
	representative organisations.
3.Trans	 Reform and replacement of the current system of trans
healthcare	healthcare provision with a system that is gender affirming and
	based on an informed consent model that includes GP care and
	that conforms with the best practice World Professional
	Association for Transgender Health (WPATH) guidelines.
4. Accessibility of	 Establish a sexual health website specifically for the LGBTIQ+
sexual health	community, ensure the content is available in Irish and other
services	relevant languages and is of the same quality as the content in
	English; ensure sexual health clinics are accessible and

	inclusive of all LGBTIQ+ people, and broaden the provision	n of
	and access to Pre-exposure prophylaxis (PrEP) and P	ost
	Exposure Prophylaxis (PEP).	
Specific concerns	for/of particular groups	
5. Non-binary and	 Recognise non-binary individuals as a distinct group was a	with
Intersex people	specific health needs.	
	 Create distinct and separate medical pathways for inter- 	sex
	people-informed by their lived experience and developed	d in
	cooperation with representatives from the intersex commun	ity.
	 Create a forum for medical practitioners and intersex supp 	oort
	organisations/activists to work together to enha	nce
	understanding of intersex variations	
6. Disabled	 Provide timely access to neurodivergence assessments with 	thin
people	the public health system.	
	 Develop a publicly available code of conduct / standards as 	s to
	what LGBTIQ+ people can expect from disability services/ho	me
	help.	
	 Breakdown the barriers to accessing mental health server 	/ice
	faced by autistic and disabled LGBTIQ+ people, include	ling
	training more LGBTIQ+ friendly sign language interpreters.	
7. Older people	 Roll out the LGBT Ireland Care Champions Program 	me
	nationally.	
	 Create an LGBTIQ+ friendly nursing home mark of inclusion 	٦.
8. Bisexual	 Develop a reporting mechanism for bisexual people to reporting 	oort
people	microaggressions in the health and care system	
9. Migrants	 Provide easier access to medical cards as the gateway to pu 	blic
	and primary care services for migrants in Internation	nal
	Protection Accommodation Services (IPAS).	
10. Traveller and	 Roll out anti-racism awareness training across all head 	alth
Roma	services to ensure LGBTIQ+ Travellers and Roma can acc	ess
	services safely, ensuring all mainstream health servi	ces
	(general health, mental health, sexual health) offer a safe a	and
	welcoming space for LGBTIQ+ Travellers and Roma.	

Pillar 3 Participation and Access

Participation and access were identified as critically important issues across the consultations and submissions. Consultees identified a range of positive developments that had happened over the last number of years including, the increased visibility of LGBTIQ+ people across society, and the high-quality specialist LGBTIQ+ supports available in several mainly urban locations. The development of partnerships between these organisations and other NGO's and in some cases State agencies from local development organisations and the Gardai to relationships with departments including the Department of Justice and Department of Children, Equality, Disability, Integration and Youth (DCEDIY) were also identified as positive developments. Some significant progress was also evidenced in relation to increased awareness of LGBTIQ+ identities in various educational curricula, with more work to be done. Participants at the consultations also reported that LGBTIQ+ individuals are more visible in the workplace. Several useful research studies were also conducted, which shone a light on the ongoing needs and issues for LGBTIQ+ people. Some positive developments were also evidenced in relation to sports, arts and culture.

The consultations uncovered a significant number of gaps and concerns that included the need for more LGBTIQ+ awareness events throughout the year, as well as the need for the inclusion of LGBTIQ+ individuals who both meet heteronormative ideas of 'LGBTIQness' and those who do not. Numerous concerns were raised in relation to the nature and extent of funding available to support LGBTIQ+ support organisations and the need for the specialist LGBTIQ+ support organisations to have a distinct line of multi-annual funding. Specific LGBTIQ+ groups were keen to ensure that their community would receive funding for a specialist support organisation.

The issue of homophobia and transphobia in sports was an area of particular concern for some consultees. For other consultees the issue was the limited nature of the funding available for LGBTIQ+ arts and cultural celebrations. Numerous challenges were also identified in relation to education, with work to be done with teachers, school and college staff and parents to better support LGBTIQ+ students at all levels. Harassment of LGBTIQ+ individuals in the workplace was also seen to be an area of work that needed to be tackled. Concerns were also raised in relation to housing and accommodation provision for individuals made homeless because of their LGBTIQ+ identity. The fact that LGBTIQ+ individuals are a hidden sub-population in official data was also identified as an issue. The consultees identified various actions designed to tackle both the general and the very specific concerns identified, and the priority actions areas are detailed in Table 6.

Table 6 Headlin	e Priority Actions to Address Participation and Access
1. Visibility	 Expand the number and nature of LGBTIQ+ events throughout
	the year to promote and increase visibility (i.e., not just Pride in
	June).
	Develop and implement targeted initiatives to improve attitudes
	and reduce discrimination against all underrepresented and
	marginalised groups within the LGBTIQ+ community, including
	bisexual people, transgender people, and non-binary people,
	who continue to face more negative attitudes. Raise awareness
	of the recognition of intersex variation as a variation of physical
	characteristics and ensure asexual and aromantic people are
	included in efforts to advance LGBTIQ+ inclusion.
	 Ensure there are gender neutral toilets in public buildings and
	public spaces.
	 Provide training and awareness for all frontline staff in statutory
	service providing bodies (whether in health, education, justice
	services, education etc).
	 Implement the actions outlined in the first national LGBTI+
	Inclusion Strategy to improve intersectional outcomes.
2. Language	 Public services should ensure that official forms and any
	paperwork use gender neutral language to ensure inclusivity.
3. LGBTIQ+	 Ring fenced and multi annual funding are needed for specialist
specific	LGBTIQ+ sector organisations, ensuring a strong, stable network
supports	of fully staffed and resourced LGBTIQ+ organisations that can
	provide support, social outlets, community development,
	outreach, training and capacity building across the country in
	each county. A capital investment programme should be
	established to invest in LGBTIQ+ community infrastructure and
	to assist LGBTIQ+ organisations ensure their premises are fully
	accessible.10
	 LGBTIQ+ organisations need to work together to tackle inter-
	community stigma and discrimination and provide more support

¹⁰ The Arts Council ringfences a portion of annual funding for festivals and institutions specifically for accessibility measures e.g. interpretation. Something similar could be done for LGBTIQ+ organisations.

	for LGBTIQ+ groups including migrants, disabled people and
	Travellers and Roma.
4. Sport	Review the guidelines of all sports bodies to ensure LGBTIQ+
	inclusion in sport in line with international best practice such as
	in countries like Canada. Train volunteers and sports
	professionals on how to address homophobic abuse. Tackle
	misinformation regarding inclusion of trans people in sports.
	 Ensure sports facilities are LGBTIQ+ inclusive/ friendly and
	where possible include family changing rooms.
	Provide opportunities for LGBTIQ+ specific sports events and
	activities.
5. Art / Culture	 Continued support for initiatives to encourage LGBTIQ+
(Media is dealt	participation in Arts and Culture.
with under	Libraries to be protected and provided with necessary support to
Pillar 1)	enable them to fulfil their essential functions.
	 Celebrate the 10-year anniversary of Marriage Equality.
	 Ensure that LGBTIQ+ events are inclusive (including the
	provision of Irish Sign Language interpreters). There is a model
	for this with the Arts Council, who are now ringfencing access
	funding within their events funding programmes.
6. Education	Ensure all educational curricula from early years to higher level
	education includes representations of the different groups within
	the LGBTIQ+ community with schools required to teach about all
	aspects of the community in an age-appropriate way (including
	LGBTIQ+ histories as part of history curricula and other relevant
	curricula to include topics of sexual orientation and gender
	identity).
	 LGBTIQ+ inclusion training for teachers, through continuing
	professional development and initial teacher education, to ensure
	that these curricula are taught in full. Provision of teacher training
	to support the rollout of the Cineáltas anti-bullying plan.
	Additional training is also required for all school staff on
	supporting LGBTIQ+ students within the school environment
	including autistic LGBTIQ+ students. It was noted that some of
	this work could be achieved through increased investment in
	Belong To's LGBTIQ+ Quality Mark. At a national level, develop

	and introduce mandatory guidance, policies and practices that
	support LGBTIQ+ students to affirm their identities, including the
	specific needs of trans, non-binary people, and autistic LGBTIQ+
	people.
7. Employment	Widely disseminate an employers' toolkit/guidelines for use in
	both public and private sectors to promote LGBTIQ+ workplace
	inclusion including the specific needs of trans and non-binary
	people.
	 Develop and deliver LGBTIQ+ awareness and inclusion training
	in organisations to ensure that staff from the LGBTIQ+
	community can bring their authentic self to the workplace without
	fear of discrimination and introduce an accreditation/ re-
	accreditation process within organisations to ensure that
	LGBTIQ+ perspectives are included.
8. Research	 Continue the work of the First National LGBTI+ Inclusion Strategy
and strategy	research sub-committee to undertake research, informed by
development	community needs and identified gaps with a focus on the diversity
	of LGBTIQ+ identities (e.g. trans and intersex people, Travellers,
	migrant community, the needs of LGBTIQ+ people with
	intellectual disabilities, drivers of homophobia and biphobia), and
	using the principles of co-design processes to ensure the
	meaningful inclusion of the LGBTIQ+ people in the research
	process.
	 Census 2027 to include a broader range of questions relating to
	gender, sex characteristics, and sexual orientation.
	 Improve the quantity and quality of the LGBTIQ+ data collected
	by homeless services to show the extent of the problem of
	homelessness amongst the community.
	 Undertake a specific national LGBTIQ+ survey every few years,
	to provide a snapshot of how LGBTIQ+ people are preforming in
	comparison to the rest of the population.
	 Investigate the use of Applied Behaviour Analysis, and its
	experience for those questioning their gender identity.
9. Future	 Expand support for All Island LGBTIQ+ dialogue and community
thinking in	building, ensuring the voices of LGBTIQ+ people are heard in the
relation to the	process.

Island of					
Ireland					
Specific concer	Specific concerns for/of particular groups				
10. Bisexual	 Provide more spaces for the bisexual community to meet 				
people	particularly outside of Dublin.				
11. Inclusion of	 Promote greater awareness, understanding and empathy for 				
people with	autistic communities within the broader LGBTIQ+ community and				
autism	LGBTIQ+ services. Ensure autistic people and the LGBTIQ+				
	community are represented in all consultative forums and				
	processes which affect them.				
12. Older	 Provide more support and safe meeting places for older 				
people	LGBTIQ+ individuals.				
	 Find ways to consult and engage with older LGBTIQ+ individuals, 				
	including developing a New National Positive Aging Strategy that				
	includes consideration of the needs of older LGBTIQ+				
	individuals.				
13. Prisoners	 Develop specific resources and services for LGBTIQ+ prisoners, 				
	involving the 'in-reach' of LGBTIQ+ organisations – and where				
	these services already exist in certain prisons, expand and roll				
	them out across the prison service.				
14. Travellers	 Recognise LGBTIQ+ Travellers as a vulnerable group of 				
and Roma	individuals who may require additional and tailored employment,				
	education and housing supports as they come out as LGBTIQ+.				
	 Continue to provide anti-racism training for LGBTIQ+ 				
	organisations and develop good practice guidelines tailored for				
	engaging with the Traveller community.				

Pillar 4 Equality and Non-Discrimination

Participants across the consultations reported that Ireland had made some progress in promoting and advancing LGBTIQ+ rights, with the publication of the First LGBTI+ National Youth Strategy and the first National LGBTI+ Inclusion strategy. Positive initiatives recognised across the consultations included the introduction and development of various pieces of legislation, longer sentencing periods in the courts for violence against the LGBTIQ+ community, the work of the Workplace Relations Commission, the ready availability of Gender Recognition Certificates as well as the work being done at national level to support LGBTIQ+ rights globally.

Notwithstanding this progress, in 2024 International Lesbian, Gay, Bisexual, Trans and Intersex Association (ILGA) Europe¹¹ ranked Ireland 14th in the European Union in terms of human rights and policy protections. This ranking is linked to the absence of laws, which particularly impact the LGBTIQ+ community such as hate crimes, conversion therapy, the provision of more protection in areas such as gender recognition, and in employment and social inclusion.

Concerns identified across the consultations include delays in the advancements of and amendments to various pieces of legislation including the Criminal Justice (Incitement to Violence or Hatred and Hate Offences) Bill 2022; the Gender Recognition Act, the Equal Status Act, the Employment Equality Act, the Assisted Human Reproduction Act and the Children and Family Relationships Act; the banning of conversion therapy; the banning of non-consensual operations on intersex babies and delays in the establishment of a disregard scheme to expunge historical convictions made against gay and bisexual men in Ireland. Concerns were also raised about the need for equal access for LGBTIQ+ families to In vitro fertilisation (IVF) changes to the International Protection Accommodation Services (IPAS) system. Consultees identified a range of actions designed to tackle these concerns. There were differing views in relation to the introduction of hate crime legislation. See Table 7 for details of the actions prioritised under this Pillar.

¹¹ ILGA-Europe is an independent, international non-governmental umbrella organisation uniting over 700 organisations from 54 countries across Europe and Central Asia.

Table 7 Headline Priority Actions to Address Equality and Non-Discrimination 1. Enhance Ensure key LGBTIQ+ related legislation is accompanied by the access to justice development of accessible, easy to read plain English guides, helping readers understand what is intended by the proposed legislation. Fund Free Legal Advice Centres (FLAC) to support LGBTIQ+ people to challenge discriminatory practices and legislation. Develop a legal website and legal information service specifically for the LGBTIQ+ community to provide access to helpful information resources. Create an LGBTIQ+ legal fund through the Legal Aid Board or other suitable body, so that individuals can apply seeking assistance in covering their legal costs to challenge discrimination. Ensure that the diversity of lived experiences of LGBTIQ+ individuals inform the design and implementation of legislation and policy relevant to the community through co-design. 2. Hate Crime Enact hate crime legislation inclusive of all LGBTIQ+ groups Legislation and accompanied by a National Action Plan on Hate Crime that includes education and prevention measures, to ensure the prosecution of individuals who incite hatred. Undertake work with the court services and the judiciary regarding sentencing in relation to LGBTIQ+ hate crimes. This includes crimes against advocates of LGBTIQ+ rights and the introduction of harsher sentencing powers and minimum sentencing guidelines in relation to hate crime/s. Equip An Garda Síochána with the knowledge and skills to better handle hate-related incidents effectively and empathetically. Introduce restorative justice programmes within affected communities for individuals convicted of hate crimes and hate

speech to promote rehabilitation and understanding.

	Fund dedicated victim support services for LGBTIQ+ victims of
	crime ensuring LGBTIQ+ people are supported at each stage
	of engaging with the criminal justice system.
3. Conversion	
	Legislate to ban conversion practices especially in therapeutic
Therapy	spaces (with no exemptions).
4 Review of the	 Implement remaining recommendations from the 2018 review
Gender	of the Gender Recognition Act for non-binary and young people
Recognition Act	in consultation with the transgender community.
5 Review the	 Complete and publish the Review of the Equality Acts and
Equality Acts	based on this review develop and provide resources and
(Equal Status Act	guidance for employers, service providers, schools, sporting
and Employment	organisations, and other relevant bodies.
Equality Act)	 Update and expand the Equality Acts to include protections
	based on sex characteristics, gender expression, gender
	identity and socio-economic class. A public information and
	awareness campaign should follow to educate the public on
	these new protected grounds.
6. Disregard of	Act on the report of the Disregard of Convictions for Certain
Convictions	Qualifying Offences Related to Consensual Sexual Activity
	between Men and expunge convictions which took place prior
	to the change in the law.
7. Public Sector	Introduce more meaningful and measurable requirements for
Duty	reporting under public sector duty requirements and ensure all
	public bodies have a policy on LGBTIQ+ inclusion (similar to
	the requirement to have a Child Safeguarding policy).
8. Equality Proof	 Ensure all national strategies, policies and action plans are
all National	equality-proofed to ensure the representation and inclusion of
Strategies from	vulnerable, marginalised and/or underrepresented
an LGBTIQ+	communities, including LGBTIQ+ people.
perspective	
9. Ireland's Role	 Establish a Special Envoy for LGBTIQ+ rights whose role it is
Internationally on	to promote rights, protections, and non-discrimination for
LGBTIQ+ Rights	LGBTIQ+ people globally, supported by a dedicated team and
	an annual budget.
10. Rainbow	Amend the Assisted Human Reproduction Act and Children
Families	and Family Relationships Act to ensure equality for children of
	<u> </u>

	LGBTIQ+ people and ensure full legal recognition for all LGBTIQ+ parents. - Provide equal access to publicly funded IVF scheme. - Make provision for timely and affordable retrospective updating/editing of documents following gender recognition of parent/s (children's birth certificates, marriage certificates, driving licences, etc). - Remove the barriers to adoption and fostering for disabled people.		
11. Marriage	Legislate for marriage recognition for non-binary people.		
Equality	 Remove joint means testing in relation to spousal support for 		
Recognition	individuals in receipt of disability allowance.		
12. Non-	 Ban non-consensual operations on intersex babies and 		
consensual	children.		
operations on			
intersex babies			
and children			
13. Changes to	Introduce legal protections for trans and nonbinary people		
the IPAS system	within the Internal Protection Accommodation Services (IPAS)		
	system specifically regarding a right to be placed in spaces congruent with their identity.		
	 Provide Immigration Services and IPAS with LGBTIQ+ 		
	awareness training including training on understanding of why		
	LGBTIQ+ disclosure can happen slowly.		
	 Ensure the Health Information and Quality Authority (HIQA) 		
	conducts publicly reported inspections of all IPAS centres and		
	introduce an ongoing independent complaints system within		
	the IPAS system.		
Specific concerns for/of particular groups			
14. Disabled	Ratify the Optional Protocol to the United Nations Convention		
people	on the Rights of Persons with Disabilities (UNCRPD).		

Conclusions

The facilitated consultations, which engaged with 550 individuals and almost 50 organisations were supplemented with over four hundred submissions and yielded rich data. A detailed report of these discussions and online submissions is available here.

The consultations identified several key areas for action that will be used to inform the work of Government in developing the new whole of life cycle successor National LGBTI+ Inclusion Strategy. Some of the key areas identified included the following:

- Safety: Key issues raised included, the need to address misinformation in relation to LGBTIQ+ people, to improve relationships between the LGBTIQ+ community and An Garda Síochána, to enhance awareness of DSGBV within the LGBTIQ community and to improve safety for LGBTIQ people in public spaces.
- Health and Wellbeing: Key issues prioritised by the LGBTIQ+ community included
 addressing mental health supports for the LGBTIQ+ community, a move to a more
 LGBTIQ+ inclusive healthcare system, the provision of trans healthcare in line with
 best practice guidelines, and the increased roll out of sexual health services.
- Participation and Access: Key issues raised included the need for improved visibility
 and inclusion measures for LGBTIQ+ people in education, employment, sports, arts
 and culture; along with improved funding supports for LGBTIQ+ services and better
 data and research on the needs of LGBTIQ+ people.
- Equality and Non-Discrimination: The consultations raised several key legislative
 priorities including issues related to gender recognition, conversion therapy, hate
 crime/hate speech, equality legislation, recognition of LGBTIQ+ families, and nonconsensual surgeries on intersex children.

In addition, the consultation with the Steering Committee, who review the implementation of the actions contained in the National LGBTI+ Inclusion Strategy, highlighted the need for the Second Strategy to incorporate a stronger outcomes focused approach, a transparent reporting and implementation structure, with achievable actions, clear performance indicators and a robust monitoring system to ensure full and effective implementation of the successor Strategy.

Appendix 1 Organisations who made submissions

- 1. Age Friendly Ireland Shared Service | Meath County Council
- 2. Amach! LGBT+ Galway
- 3. Alzheimer Society of Ireland
- 4. As I Am
- 5. Belong To LGBTQ+ Youth Ireland
- 6. Common Knowledge Centre for Sustainable Living (CLG) / Queer Sheds
- 7. Cork City Council
- 8. Cork Education Training Board
- 9. Conradh na Gaeilge
- 10. End of Life Care Programme at St James's Hospital
- 11. Galway City Community Network
- 12. Gender Rebels Cork
- 13. HSE Community Healthcare West Older Persons Service (OPS)
- 14. National Disability Authority
- 15. Nursing Homes Ireland
- 16. Irish Nurses and Midwives Organisation
- 17. Intersex Ireland
- 18. Irish Cancer Society
- 19. Irish Penal Reform Trust
- 20. Irish Hospice Foundation
- 21. LGBT Staff Network, University College Cork
- 22. LGBT Ireland
- 23. LINC Advocating for Lesbian and Bisexual Women in Ireland
- 24. Ombudsman for Children's Office
- 25. Outhouse LGBTQ+ Centre
- 26. Queer Asian Pride Ireland
- 27. Rehab Group
- 28. Safe Space
- 29. Sexual Health Centre (Cork)
- 30. ShoutOut
- 31. Shannon Family Resource Centre
- 32. St Francis Hospice Dublin
- 33. Transgender Equality Network
- 34. Trinity College Dublin Students' Union
- 35. University College Cork Student's Union