

# LGBTQ+ Living with dementia



Alzheimer's  
Society

It will take a society to beat dementia



We are reviewing this publication. If you would like to give us any feedback, you can email us at **[publications@alzheimers.org.uk](mailto:publications@alzheimers.org.uk)** or call us on **020 7423 7455**.

# About this booklet

If you are LGBTQ+ and have dementia, this booklet is for you. It includes guidance on getting emotional and practical support that's right for you.

If you are supporting an LGBTQ+ person with dementia, you will find more advice in factsheet 480 **Supporting an LGBTQ+ person with dementia.**

## Definitions

The term 'LGBTQ+' can mean different things. In this booklet it refers to people with a range of identities, including:

- **Lesbian** – a woman who has an emotional, romantic or sexual attraction towards women.
- **Gay** – a man who has an emotional, romantic or sexual attraction towards men.
- **Bisexual** – a person who has an emotional, romantic or sexual attraction towards men and women.
- **Transgender (trans)** – someone who doesn't identify with their assigned gender at birth, or who sees themselves as between, beyond or outside of being male or female.
- **Queer** – a term that some people use to describe their sexual orientation or gender identity. This can include, but is not limited to, lesbian, gay, bisexual and trans people.

The booklet will also use the following terms:

- **Heterosexual** – a person who has an emotional, romantic or sexual attraction towards people of the opposite sex or gender.
- **Cisgender** – a person whose gender identity is the same as the sex they were assigned at birth.

The plus sign at the end of LGBTQ+ is to show that different people define themselves differently. Some people do not identify with any of the terms on pages 1–2. For example, some people identify as intersex, asexual or non-binary. We include these and other groups when we use the term LGBTQ+.

## Recent changes to the Equality Act 2010

In April 2025, the UK Supreme Court ruled on how a woman is defined in the Equality Act 2010. This has significant implications for LGBTQ+ rights, particularly for trans and non-binary people.

The ruling means that someone with a gender recognition certificate can be excluded from single-sex spaces, such as toilets or changing areas. This affects public spaces, like hospitals and care homes.

The Equality and Human Rights Commission will provide further guidance on this ruling. It has consulted individuals and groups affected by the ruling.

We are committed to providing information and services for trans and non-binary people affected by dementia. Our support remains firm for the whole LGBTQ+ community.

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# LGBTQ+: Living with dementia

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Everyone experiences the challenges of dementia in their own individual way. Being LGBTQ+ and having dementia can bring other additional challenges. It can help to be aware of and prepared for these issues.

You may feel that lots of the information, advice and support you are offered isn't right for you. You may have, or feel you have, different circumstances to heterosexual or cisgender people. This could be because of your experiences or living arrangements, the support you receive and who you have around you.

Some of the symptoms of dementia can have particular implications for LGBTQ+ people. For example, memory problems might make it harder for you to remember who you have told about your sexual orientation or gender identity.

Dementia is a progressive condition. This means that the symptoms get worse over time. As your condition progresses, you will find it harder to manage day-to-day things and you will need more help and support. Planning ahead can help you prepare for this, and there may be specific things to think about if you are LGBTQ+. This might include getting a Gender Recognition Certificate or ensuring that your partner has the ability to make decisions on your behalf.



You may also want different things from the services and support you access. For example, you may want services that are LGBTQ+ inclusive and who understand how important your gender identity and sexual orientation are to you.

It's important to know that you aren't alone. Support and advice are available, there are services and care settings designed to support you, and the law protects your rights to equal treatment and privacy. By knowing your rights, finding the right support, and planning for your future, it can be possible to live well with dementia.



If you've recently found out you have dementia, see booklet 872 **The dementia guide** for more information on a range of topics.



# Memory problems and reminiscence

Memory problems are common in dementia. If you identify as lesbian, gay, bisexual or trans, they may cause particular difficulties. For example, you may have trouble remembering whether you have 'come out' (told people about your sexual orientation or gender identity).

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Issues related to your identity are sensitive and you may find difficulties caused by dementia distressing. You may feel worried about problems developing in the later stages of your condition, for example needing help with personal care. This might be something you don't want to think about now. Take things at a pace you feel comfortable with.

Talk to people who can help if you are worried about anything. This could be a partner, friends or a professional, such as a counsellor. There are also things you can do to make sure that any future decisions are based on your wishes.



Examples of memory problems, and ways to manage them, include the following:

- If you are LGBTQ+, you may have to make decisions day-to-day about whether to disclose (tell people about) your sexual orientation or gender identity – whether to be ‘out’. As your dementia progresses, you may lose your ability to make this decision. Some things can make it difficult for you not to disclose aspects of your identity, such as your appearance and medical history. You may also be unable to stop yourself disclosing your sexual orientation or gender identity by mistake. For example, you may refer to your partner without meaning to tell someone their gender. This could mean that you are ‘out’ without choosing to be. You should talk to those close to you about this, and what you would want to happen if this occurred. For example, talk about whether you would be happy to be ‘out’ to staff and other residents in a care home.
- If you are trans, you may have complex physical needs as a result of medical procedures or treatments, such as long-term hormone therapy. Dementia can make it harder to manage these. For example, you may experience memory loss or problems with planning that can make it harder to remember to take medicines and tablets. It can help to find practical strategies, such as automated reminders to cope with these.



For practical help with managing memory loss, including strategies to help you remember things, see booklet 1540 **The memory handbook**.



Call our Dementia Support Line on **0333 150 3456**

- As your dementia progresses, older memories are likely to stay with you longer than newer memories. This means you might remember your childhood better than the past few years. Eventually, you may feel like you are back in an earlier time in your life. This can sometimes cause very distressing symptoms for LGBTQ+ people:
  - If you identify as lesbian, gay or bisexual, you might go back to a time before you came out.
  - If you are trans, you may go back to a time before you transitioned. As well as being distressing, this can make practical day-to-day things such as going to the toilet confusing and difficult. You might find that your ability to remember that you have transitioned comes and goes. Symptoms may vary depending on how recently you transitioned or started the process, as well as how your dementia affects you. In some cases, you might need to access services for both genders. To make sure that your gender identity continues to be recognised and respected as your dementia progresses, it's important to plan ahead. For more information, see 'Planning ahead' on pages 19–23.
  - If you have experienced prejudice, discrimination or harassment (see page 15) earlier in your life, these memories can return and make you feel unsafe.



## Reminiscence

Some therapies aim to help a person's memory through talking about events from their past. These are known as 'reminiscence' therapies, and are often done in a group. This activity can help you to see your life as a whole and recognise your experiences and achievements. Talking about who you are can help you to focus on your skills and interests, not your dementia. It can help to remind you and others that you have an interesting life.

Thinking and talking about your past can be more difficult if you have experienced prejudice, discrimination and rejection. You may want to think carefully about whether this is something you want to do. It's important to think about whether you are comfortable talking about these things in a group situation. 'Finding services that are right for you: tips' on page 27 may be helpful in finding LGBTQ+ aware reminiscence groups.

If you decide reminiscing would be helpful, you may also want to start keeping a memory or life history book. This can include information or keepsakes from your past, your experiences and the memories that are important to you. It can help others to know more about what is important to you.





# Your support

As your dementia progresses you will need more support to be able to live well. It's important to have a good support network around you. This could include people who can help you with day-to-day things you find difficult, like shopping or cooking, or people you can talk to about what you're going through.

As an LGBTQ+ person you may look to a number of different people or groups for support. Some of the following may be true for you:

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- You may get a lot of support from others in the LGBTQ+ community.
- You may no longer be in touch with, or may have a complicated relationship with, your 'family of origin' (the people you grew up with, often a biological or adoptive family). For example, you may have experienced hostility from them.
- You may have what is called a 'family of choice' or 'found family' (a group of people who are not your family of origin, but who support you as family).
- You may experience hostility from your cultural community. For example, you may be from a culture that is less accepting of LGBTQ+ people.



- You may not have disclosed your sexual orientation or gender identity to your family, or even some of your friends.
- You may or may not have children or grandchildren who support you.
- You may have more support from people your own age, rather than people of a different generation to you.
- You may be single, or living alone.

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Whatever your social group and support you have, it's important to get the help you need. Try to make the most of whatever help those close to you can provide, and know where to get the support that's available.

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**Friends and family are so important but there is also a time when you might need to think about getting paid help too.**

Carer of a person living with dementia

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## How people can help: tips

- Talk to those close to you about what they can do for you – for example, helping you out with shopping or tasks around the house. You may also like to talk to them about accessing services and what you want others to know. This could include whether or not you want to be ‘out’. For more information, see ‘Accessing services’ on pages 24–29.
- Talk to friends and family about how you feel and any worries you have. They may have their own experiences to share or may be able to provide support, so you don’t have to do things alone, if you don’t want to.
- Talk to the people close to you about the future, and any wishes you have. This might include the care you want to receive, or where you want to live. You may want to put things in place now, to help people know your wishes if you are unable to make decisions for yourself in the future. For more information, see ‘Planning ahead’ on pages 19–23.
- Talk to people who are in a similar situation to you. They might understand what you are going through and give emotional support. It can be harder to find other lesbian, gay, bisexual or trans people with dementia. Online communities and forums are a good place to look, such as our Dementia Support Forum, which has a group for LGBTQ+ people and their families and carers. For more information, see ‘LGBTQ+ specific services and support’ on page 29.



- Have a look at what support options there are for people with dementia where you live. These may not be specific to LGBTQ+ people, but you may want to try them. For example, you may want to go along to a memory cafe or a support group to meet other people with dementia who you can talk to. You can use the dementia directory to search for groups and social activities in your local area at **[alzheimers.org.uk/dementiadirectory](https://alzheimers.org.uk/dementiadirectory)**
- If you don't have a support network, or need more support, you may need to think about getting professional help and support. For more information, see 'Accessing services' on pages 24–29.

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For more information on staying safe and independent at home, see booklet 819 **Making your home dementia friendly**.



# Your rights

The law protects your rights as an LGBTQ+ person – to equal treatment, to not be discriminated against, and to privacy. It's important to know the laws that exist, as well as your rights and what to do if they are not being respected.

## Prejudice and discrimination

Many LGBTQ+ people will have experienced negative attitudes and some will have experienced hostility, rejection and abuse. You may have encountered:

- prejudice – people making judgements about you because of your sexual orientation or gender identity
- discrimination – being treated differently to other people because of your sexual orientation or gender identity
- a hate crime – experiencing verbal or physical aggression because of your sexual orientation or gender identity.

You may have had previous negative experiences with services including police and protection, or health and social care services. After a diagnosis of dementia, you may be worried about how health and social care professionals will treat you.

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However, the law protects your rights and those of the people you support in the following ways:

- It is illegal for someone to be treated differently or be discriminated against because of their sexual orientation or gender identity. This applies to areas like health and social care, meaning all service providers including GP surgeries and hospitals must treat you equally. In England and Wales, this law is called the Equality Act 2010. In Northern Ireland, it is a combination of the Equality Act (Sexual Orientation) Regulations (Northern Ireland) 2006 and the Sex Discrimination (NI) Order 1976.
- These laws also apply to the people close to you. It can reassure you to know that they cannot be discriminated against in relation to things like visiting rights, should you need to go into a care home or hospital.
- If you are trans and choose not to disclose this, then organisations are not allowed to tell people about this under General Data Protection Regulation (GDPR). This is because, like sexual orientation, a trans status is classed as sensitive personal data. If you have or have applied for a Gender Recognition Certificate and choose not to disclose that you are trans, then your right to privacy is also protected by the Gender Recognition Act 2004. This applies throughout the UK. It means that someone providing care or medical services to you – for example, a doctor or care worker – cannot tell other people about your trans status without your permission. If they do, they can face a criminal prosecution.



- It can be helpful to know that the term ‘next of kin’ has very little meaning in law. People often think it has to be a blood relative or a husband or wife, but this is not true. If a hospital or care home asks for details of next of kin to be contacted in an emergency, you can choose whoever you want. You don’t have to be married to them – they can be a partner of any gender, a friend or someone else you want to be contacted.
- Those closest to you have the right to be consulted about your treatment and care. They don’t have to be blood relations or married partners. For example, if you are in a same sex relationship and not married, this would apply to your partner.

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## Equality

Equality doesn’t necessarily mean being treated ‘the same as everyone else’. Equality means that you have the right to be who you are and express your sexual orientation, gender identity and relationships, just like anyone else.

You shouldn’t feel you have to pretend to have a different sexual orientation or gender identity in order to get the care and support you need.

Everyone should be treated and respected as an individual, and encouraged to express their identity. People shouldn’t assume that your gender identity or sexual orientation is not important to you, or that it doesn’t make a difference to the care and support you need. Friends, family and professionals should support you to be the way you are.



## What to do if your rights are not respected

If you feel you've been treated unfairly because of your sexual orientation or gender identity – for example, by a service or a professional – you may want to make a complaint.

If this happens, you should go through the following process:

1. Try to resolve the complaint locally. For example, if you have a complaint about the care you have received, ask the organisation for their complaints procedure and follow the steps listed.
2. If you follow this procedure and still don't feel your complaint has been properly addressed, you can take the complaint further. The complaints procedure should explain what to do next. If not, you can contact the relevant Ombudsman to make a formal complaint. These are listed on pages 38–40. Which one you talk to will depend on what the complaint is about and where you live.
3. If you need advice or support when making a complaint, there are lots of organisations that can help and support you through the process. For more information, see 'Other useful organisations' on pages 34–40.
4. In some cases, if you feel you need more help with the process, you might need to talk to a solicitor to get legal advice.



# Planning ahead

It can be hard to think about the future, but it's important to do it as soon as you feel ready. It can also be reassuring to get things in place early.

It's important that you are supported to make your own decisions wherever possible and for as long as possible. However, as your dementia progresses, there will come a time when you no longer have the ability (known as 'mental capacity') to make certain decisions for yourself. Thinking about what you want to happen in the future means your wishes will be taken into account when this time comes.

Planning ahead is important for everyone with dementia. As an LGBTQ+ person it can be particularly important for the following reasons:

- If you don't say who you want to make decisions for you, it is likely to be left to, or influenced by, health professionals or your family of origin. This may or may not be what you want to happen.
- If you are trans, the law may not recognise your gender identity unless you go through a formal process to have it recognised.
- If you don't make a will, your partner or family of choice may not be entitled to the things you own when you die. They may also not be involved in arrangements after your death, such as your funeral.





By making your wishes clear now, you can avoid these problems in the future. This means that you can live the way you want to and get the care you want, and that the people involved in making these decisions will be those you have chosen.

Advocacy services may also be able to support you if you are unable to make your own decisions. For more information about organisations who may be able to help with this, such as Galop and Stonewall, see 'Other useful organisations' on pages 34–40.



For more information visit [alzheimers.org.uk](https://www.alzheimers.org.uk)

## Planning ahead: tips

- **Lasting power of attorney (LPA) or Enduring power of attorney (EPA)** – these are legal documents that give someone the authority to make decisions for you, when you can't make them yourself. If you don't think your family or a health or social care professional will know what you want, or will contradict you, you can choose someone else to make some of these decisions on your behalf. This can be anyone you choose – for example, your partner or a close friend.

In England and Wales, you can give someone the right to make decisions about your health and welfare, or your property and financial affairs (or both) using a Lasting power of attorney. In Northern Ireland, the system is called Enduring power of attorney and only applies to property and financial decisions.

- **Gender Recognition Certificate** – if you are trans, you may want to get a Gender Recognition Certificate. This legally recognises the gender you identify as, if you meet certain criteria. For more information on the current process for this, go to the **GOV.UK** website (see 'Other useful organisations' on pages 34–40).

It's important to remember that you don't need to have a Gender Recognition Certificate to have your gender identity respected by others. You also don't need to have a Gender Recognition Certificate to be legally protected from discrimination.



- **Advance decision** – this is a legal document that sets out in advance your decision about medical treatments you don't want to receive in certain situations. For example you may decide not to have a blood transfusion or that you don't want to be resuscitated in certain circumstances.
- **Advance statement** – this is a tool you can use to record your wishes and preferences for the care you want to receive in the future. It is not legally binding but should be taken into account in decision-making as far as possible. It's a good idea for all people with dementia to make one, but there may be some extra things for you to think about. You might want to specify:
  - how you wish to be dressed
  - any prostheses you use
  - the pronoun you want to be referred to by (for example 'he', 'she' or 'they').

You might also want to specify the kind of care home or setting you would feel comfortable in, so this is taken into account when you need it.



- **Make a will** – everyone should make a will, but this is especially true after a diagnosis of dementia. Making a will ensures that the people close to you will be able to receive the things you want them to. This is particularly important if you aren't close to your family of origin, or have a 'family of choice'. This is because, if you don't make a will, your possessions would pass to your family of origin unless you are married or in a civil partnership. Even if you are, there may be circumstances where your family of origin may benefit – even if it's against your wishes.

In your will you can record what sort of funeral you would like to have. You can also do this using a 'letter of wishes'. A letter of wishes is not legally binding, but it is a good way of setting out what you want to happen when you die.

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For more general information and guidance on planning ahead, see booklet 1510 **Planning ahead**.

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**Please enjoy and live in the moment but don't think that something cannot or will not happen to you. Plan for the worst and hope it doesn't happen.**

Person living with dementia

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Call our Dementia Support Line on **0333 150 3456**

# Accessing services

Following a diagnosis of dementia and, as your condition progresses, you are likely to need more help and support to live well. This may come from a partner, friends, your family of origin or your family of choice. However, you will probably need to think about other forms of support as well.

For example:

- You might want to think about accessing local services for people with dementia and speaking to a dementia adviser or dementia support worker. They can provide information and support to help you understand your diagnosis and plan for the future. They should also know about any local services, such as activity groups, that might be of interest.
- If you are finding it hard to come to terms with your diagnosis, or you are experiencing apathy, depression or anxiety, speak to your GP. They can suggest ways to help you manage this, such as counselling and other therapies.
- You might want to think about getting help at home – for example, from adult social services or a private homecare agency. They can help with things that you find difficult and help you to manage at home.



- If you have a partner or someone who is supporting you, you might want to talk to them about getting support for themselves. This can be from a support worker or a local carer's group.
- As your condition progresses, you may not be able to get the help and support you need at home, and may need to think about moving into supported living or a care home. For more information, see 'Care settings' on pages 31–33.



## Worried about accessing services?

Getting professional help and support can enable you to live well with dementia. However, as an LGBTQ+ person, you may feel reluctant to access services. You may be worried about having to disclose your sexual orientation or gender identity, or having to hide it. You may value your privacy and feel that professional care is an intrusion into your personal life. For example, you may feel uncomfortable about strangers coming into your home if it is normally a safe space for you. Or the idea of revealing your body to professionals during personal care may be daunting.

You may worry about stigma and discrimination, or that your identity and needs will not be properly understood. You may feel that you will become isolated from the things that are important to you, and you may worry about being lonely because your experiences are different to other people's.

These feelings are all understandable, and you won't be the only one who feels this way. However, when you have dementia, it's really important to get the right help and support to enable you to live well. You might look to those close to you, but you may need to access services too. Try to find services that are inclusive and LGBTQ+ aware, that understand your needs, identity and past experiences and that you would feel comfortable with. This might take a bit of time, but it will be worthwhile to find the right help.

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## Finding services that are right for you: tips

- Personal recommendations are a good starting point. Ask any LGBTQ+ friends if they have used any services and whether they would recommend them.
- Ask other people in the LGBTQ+ community to see if they have any suggestions for services. Joining LGBTQ+ groups on social media can be a good way of finding out.
- Look for services and care settings that are LGBTQ+ aware. They may have a sign (usually the rainbow flag) that shows this.
- If there is a website or brochure, do they suggest the service is LGBTQ+ aware? For example, do they show pictures of lesbian or gay couples? You can also search for reviews of the service online for more information.
- What kind of words do they use to refer to people? This is usually a good way of seeing if they are LGBTQ+ aware. For example, they may use 'they' pronouns instead of 'he' or 'she'.
- Ask them if they have any LGBTQ+ awareness training or how staff support LGBTQ+ people to access their services.
- Ask them how they would deal with any discrimination, if it occurred.



- If you feel comfortable, talk to the people who run the group or service. Tell them about your needs as an LGBTQ+ person and what you're looking for. Even if they don't state that they are LGBTQ+ aware, they might be able to help make the service work for you.
- It can be harder to find LGBTQ+ aware services. This means it can be good to think ahead and look around for what is available even if you don't feel like going to anything yet.
- You may need to try a few services until you find one that works for you. Try not to be disheartened by this.
- If you are eligible for support from your local authority, you may choose to receive this in the form of a 'direct payment'. This can give you more flexibility and choice over your care.

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See factsheet 473 **Personal budgets** (in England and Wales) or factsheet NI431 **Direct payments** (in Northern Ireland) for more information.



## **LGBTQ+ specific services and support**

You may be used to being within LGBTQ+ social groups, and they may understand what you are going through better. This can also mean you feel more comfortable accessing services within the LGBTQ+ community, as they are likely to have a better understanding of, and be more tailored to, your needs.

Consortium has a directory that might be useful. It includes LGBTQ+ services and support groups for older people. You might want to check if there is anything in your area. For more information, see ‘Other useful organisations’ on pages 34–40.

You may also want to contact a local LGBTQ+ organisation in your area. They may know about any groups or services that are available locally for LGBTQ+ people with dementia.

Organisations such as Age UK run LGBTQ+ support groups in some areas.





# Care settings

With the right support, it is possible for people with dementia to live in their own homes for longer. However, as your condition progresses, you will need more support. Eventually there may come a time when you need to think about moving into supported living or a care home.

This may be difficult for you. Your home may be where you feel safest and the idea of having to move may be distressing. You may be worried about having to move into supported living or a care home for many reasons – see ‘Worried about accessing services?’ on page 26.

As an LGBTQ+ person with dementia, it can be difficult to find suitable housing, but options are available. It may help to look into this as soon as you feel able. It might feel very early to think about this now, but it will help you to be ready if the time comes.

It can also help to talk to those close to you, where appropriate, about what you want in the future. You might also want to record your wishes about the kind of care setting you would want, if the time comes. For more information, see ‘Planning ahead’ on pages 19–23.

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## Finding care settings that are right for you: tips

The tips on pages 27–28 about choosing a service will apply to supported living or a care home as well. Some other things to think about include:

- Does the culture of the home make you confident that your sexual orientation or gender identity will be respected?
- Will you be able to express your relationships without threat and be given the same respect as others?
- Are there private areas for visitors to talk to residents?
- Is there space for you to be intimate with your partner if you want to be?
- If you have LGBTQ+ friends, ask them if they know anything about the home you are considering.  
For example:
  - Has anyone they know or anyone you know been a resident?
  - Do you know of any LGBTQ+ members of staff who work at the home? Although this does not guarantee an LGBTQ+ friendly environment, it might give you some confidence.

- You could ask if you can choose who supports you or provides certain types of care. You may feel more comfortable with a certain person, or you may want to have one or two people who know you and your needs well.
- When looking for supported living or a care home, it's a good idea to look into as many options as possible. You may want to contact or visit a variety of places to see if they seem suitable.
- First impressions are often a good guide – if you don't feel comfortable and safe then it is unlikely to be the right place for you.

For advice about housing options, including for older LGBTQ+ people, CQC or Stonewall Housing may be able to help. For contact details, see 'Other useful organisations' on pages 34–40.



# Other useful organisations

## **Age UK**

0800 678 1602 (advice line, 8am–7pm)

[www.ageuk.org.uk](http://www.ageuk.org.uk)

## **Age Cymru**

0300 303 4498 (advice line, 9am–4pm Monday–Friday)

[advice@agecymru.org.uk](mailto:advice@agecymru.org.uk)

[www.ageuk.org.uk/cymru](http://www.ageuk.org.uk/cymru)

## **Age NI**

0808 808 7575 (advice line, 9am–5pm Monday–Friday)

[advice@ageni.org.uk](mailto:advice@ageni.org.uk)

[www.ageuk.org.uk/northern-ireland](http://www.ageuk.org.uk/northern-ireland)

Age UK, Age Cymru and Age NI aim to improve later life for everyone through information and advice, services, campaigns, products, training and research. Some local Age UKs, Age Cymrus and Age NIs run social groups for older LGBTQ+ people.

## **Care Quality Commission (CQC)**

03000 616161 (8.30am–5.30pm Monday–Friday)

[enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

[www.cqc.org.uk](http://www.cqc.org.uk)

CQC are the independent regulator of health and social care in England. They have a database of service providers, including ratings to help people choose care.

**Community Health Councils in Wales**

[www.wales.nhs.uk/ourservices/directory/  
communityhealthcouncils](http://www.wales.nhs.uk/ourservices/directory/communityhealthcouncils)

Community Health Councils are independent bodies who listen to what individuals and the community have to say about the health services provided for them. You can find your local one using the directory on the NHS Wales website.

**Consortium (Consortium of Lesbian, Gay, Bisexual and Transgender Voluntary and Community Organisations)**

020 7064 6500

[admin@consortium.lgbt](mailto:admin@consortium.lgbt)

[www.consortium.lgbt](http://www.consortium.lgbt)

Consortium focuses on the development and support of LGBTQ+ groups, organisations and projects. It has a directory where you can search for LGBTQ+ services by location.

**Dementia Engagement and Empowerment Project (DEEP)**

[www.dementiavoices.org.uk](http://www.dementiavoices.org.uk)

DEEP is network of peer support groups around the UK which provide opportunities for people living with dementia to support each other. They include an online LGBTQ+ group called Speak out with dementia

**Dementia UK**

[www.dementiauk.org](http://www.dementiauk.org)

0800 888 6678

Dementia UK have an Admiral Nurse service for the LGBTQ+ community.

**Equality Advisory and Support Service (EASS)**

0808 800 0082 (advice line, 9am–7pm Monday–Friday, 10am–2pm Saturday)

[www.equalityadvisoryservice.com](http://www.equalityadvisoryservice.com)

EASS provides support and advice about your rights in England, Wales and Scotland.

**Equality Commission for Northern Ireland**

028 90 500 600

[information@equalityni.org](mailto:information@equalityni.org)

[www.equalityni.org](http://www.equalityni.org)

The Equality Commission provides information and advice about your rights in Northern Ireland.

**Galop**

0800 999 5428 (LGBT+ Victims and Survivors of Abuse and Violence helpline)

[help@galop.org.uk](mailto:help@galop.org.uk)

[www.galop.org.uk](http://www.galop.org.uk)

Galop provides advice and support to LGBTQ+ people who have experienced hate crime, domestic abuse or sexual violence.

## **Gender Identity Research and Education Society (GIRES)**

[www.gires.org.uk](http://www.gires.org.uk)

[www.gires.org.uk/tranzwiki](http://www.gires.org.uk/tranzwiki)

GIRES aims to improve the lives of trans and gender non-conforming people, including those who are non-binary and non-gender. It also hosts Tranzwiki, a directory of the groups campaigning for, supporting or assisting trans and gender non-conforming individuals.

## **GOV.UK**

[www.gov.uk](http://www.gov.uk)

[www.gov.uk/apply-gender-recognition-certificate](http://www.gov.uk/apply-gender-recognition-certificate)

GOV.UK is the website of the UK government. It includes information, guidance and links to services and resources for LGBTQ+ people, including Gender Recognition Certificates.

## **Healthwatch**

03000 683000 (8.30am–5.30pm Monday–Friday)

[enquiries@healthwatch.co.uk](mailto:enquiries@healthwatch.co.uk)

[www.healthwatch.co.uk](http://www.healthwatch.co.uk)

Healthwatch is the independent champion for people who use health and social care services in England. They listen to what individuals and the community have to say about local health and care services. You can find your local Healthwatch using the directory on their website.

**LGBT Foundation**

03453 303030 (9am–9pm Monday–Friday,  
10am–5.30pm Saturday–Sunday)

[helpline@lgbt.foundation](mailto:helpline@lgbt.foundation)

<https://lgbt.foundation>

LGBT Foundation is a national charity delivering advice, support and information services to lesbian, gay, bisexual and trans communities.

**LGBTQ+ Dementia Advisory Group**

<https://lgbtqdementia.org/>

The Group work to improve the lives of people affected by dementia who identify as LGBTQ+.

**Parliamentary and Health Service Ombudsman (England)**

0345 015 4033 (8.30am–5pm Monday–Thursday,  
8.30am–12pm Friday)

[www.ombudsman.org.uk](http://www.ombudsman.org.uk)

The Parliamentary and Health Service Ombudsman investigates complaints about the NHS in England where local resolution has not been possible.

**Patient Advice and Liaison Service (PALS)**

[www.nhs.uk/nhs-services/hospitals/what-is-pals-patient-advice-and-liaison-service](http://www.nhs.uk/nhs-services/hospitals/what-is-pals-patient-advice-and-liaison-service)

Each hospital in England and Wales has a PALS who can help with complaints and provide advice and information on health-related matters. The NHS website offers a search by location to find your local PALS office.

**Patient and Client Council (Northern Ireland)**

0800 917 0222 (9am–4pm Monday–Friday)

[info.pcc@pcc-ni.net](mailto:info.pcc@pcc-ni.net)

<https://pcc-ni.net>

Patient and Client Council is an independent voice on health and social care issues. It can help people with complaints, and provide advice and information.

**Re-engage**

<https://reengage.org.uk/>

0800 716543

Re-engage offer a Rainbow Call Companion service for LGBTQ+ people aged 75 and over.

**Stonewall**

[info@stonewall.org.uk](mailto:info@stonewall.org.uk)

[www.stonewall.org.uk](http://www.stonewall.org.uk)

Stonewall campaigns for the equality of LGBTQ+ people across Britain. Its website includes information and advice.

**Stonewall Housing**

0800 6 404 404 (advice line, 10am–1pm Monday–Friday)

[info@stonewallhousing.org](mailto:info@stonewallhousing.org)

[www.stonewallhousing.org](http://www.stonewallhousing.org)

Stonewall Housing is the specialist LGBTQ+ housing advice and support provider in England.

**Switchboard**

0300 330 0630 (10am–10pm)

[admin@switchboard.lgbt](mailto:admin@switchboard.lgbt)

[www.switchboard.lgbt](http://www.switchboard.lgbt)

Switchboard provides an information, support and referral phone and online service for LGBTQ+ people.

Reviewed by: Dr Chryssy Hunter, Volunteer Coordinator, Opening Doors London, Sally Knocker, Consultant Trainer, Dementia Care Matters and Allison O’Kelly, Clinical Lead in Dementia, Cornwall Partnership NHS Foundation Trust

This booklet has been reviewed by LGBTQ+ people affected by dementia.

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To give feedback on this booklet, or for a list of sources, please contact **[publications@alzheimers.org.uk](mailto:publications@alzheimers.org.uk)**

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At Alzheimer's Society we're working towards a world where dementia no longer devastates lives. We do this by giving help to everyone who needs it today, and hope for everyone in the future.

We have more information on **Practical arrangements after diagnosis**.

For advice and support on this, or any other aspect of dementia, call us on **0333 150 3456** or visit **[alzheimers.org.uk](http://alzheimers.org.uk)**

Thanks to your donations, we're able to be a vital source of support and a powerful force for change for everyone living with dementia. Help us do even more, call **0330 333 0804**



**Alzheimer's  
Society**

It will take a society to beat dementia

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43-44 Crutched Friars  
London EC3N 2AE

**0330 333 0804**  
**[enquiries@alzheimers.org.uk](mailto:enquiries@alzheimers.org.uk)**  
**[alzheimers.org.uk](http://alzheimers.org.uk)**

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