

AMLCT/TCDSU Submission to the National LGBTI+ Inclusion Strategy

Contents

Introduction	2
History	2
Note of Concern	4
Recommendations	5
Informed Consent Model for Transgender Healthcare	5
Wide Introduction of Harm Reduction Services for Transgender People	5
A Complete Ban of Conversion Therapy	6
Greater Access to PrEP and HIV Care	7
Increased Legal Protections for LGBTQIA+ People	7
Increased Mental Health Supports for LGBTQIA+ People	8
Inclusion of LGBTQIA+ People Within Homeless Services	9
Student Voices	9
Submission from TCD QSoc	10
Conclusion	12

Introduction

With the rise of the far right and anti-LGBTQIA+ rhetoric, in particular towards the transgender community, the onus is on the government to not only continue, but to strengthen its support for queer people. Our union understands that it may appear optimal electorally to move to the right to follow this trend, but urge the government both presently and in the future to hold the ground in which it stands. TCDSU, as longtime supporters of our LGBTQIA+ students, are submitting to express our deepest concerns on the state of support available, as well as to urge the government to take drastic action to improve the lives of the LGBTQIA+ people it claims to represent. We are concerned over the failure to deliver multiple points in the previous LGBTQI inclusion strategy. However, we are hopeful that more action is taken.

History

The role of Aontas na Mac Léinn Choláiste na Tríonóide/Trinity College Dublin Students' Union has always been one that supports and uplifts our LGBTQIA+ students. Calls to depoliticise the union have always been made in an attempt to decentralise oppressed voices from the union's day-to-day operations. In recent years, with the increased attacks on trans identities, it may appear to current students that the union's

outspokenness is something new or “following a trend”, but this could not be further from the truth.

In the early 1970's, following a conference held in Reagent House, Trinity College Dublin, David Norris and fellow members created the Sexual Liberation Movement (SLM)¹. This provided a space for LGBTQ+ students to discuss their sexualities in a safe environment, something incredibly important in an Ireland so incredibly hostile to gay people. From this, Q Soc (Initially known as Gay Soc) was created.

The role of AMLCT/TCDSU cannot be understated. The Central Societies Committee (CSC) officially recognised Gay Soc in 1983 following action from the students' union, wherein they joined Gay Soc using all of their own names. This action is described by David Norris as what ‘really turned the tide’, a moment that truly broke ‘the boundary’.²

Since then, AMLCT/TCDSU has been dedicated to supporting LGBTQIA+ students and non-students alike. During the Marriage Equality campaign of 2015, a poster for the ‘No’ campaign included a photo of a student outside of Trinity College’s front gate. In response, the Union hung a banner over the front of the college advocating for a Yes vote, reading ‘Trinity gates are open to all’³. In 2024, AMLCT/TCDSU elected its first transgender president with a ‘landslide victory’⁴

¹ McDonald, “Q Soc: A History of Refuge, Rights and Recognition”, <https://trinitynews.ie/2020/03/q-soc-a-history-of-refuge-rights-and-recognition/>.

² Ibid.

³ Baker, “TCDSU Hangs Marriage Equality Banner across Trinity’s College Green Facade”, <https://universitytimes.ie/2015/05/tcdsu-hang-marriage-equality-banner-across-trinitys-college-green-facade/>.

⁴ Lee, “Trans activist Jenny Maguire elected Trinity College Students’ Union president with landslide victory”, <https://gcn.ie/trans-activist-jenny-maguire-trinity-president/>.

Note of Concern:

AMLCT/TCDSU urges the government to recognise the reality of the day to day lives of LGBTQIA+ people. Hate crimes have risen nationally, with anti-sexual orientation accounting for the third most common motive for these crimes⁵. It is important to note also that anti-race and anti-nationality are the two other most cited motives, with queer people of colour and/or from immigrant backgrounds being particularly vulnerable.

As a result of this, AMLCT/TCDSU is incredibly disappointed that the hate crime bill has been delayed due to political pressure on the government. We are also concerned to see a change of support for the bill by some opposition parties.

Furthermore, we wish to acknowledge that transgender students have come to us on numerous occasions seeking support due to government failings in the area of transgender healthcare. We are deeply worried by the wait times and model of care currently provided by the HSE⁶.

In addition, access to PrEP for those at a higher risk of contracting HIV is an issue often raised with us. Wait times are a huge barrier, with those unable to access PrEP in urban centres forced to travel across the country⁷.

⁵ Press Association, "Rise in hate crime nationally with Dublin accounting for 44% of race-related incidents", <https://www.thejournal.ie/hate-crime-ireland-6373725-May2024/>

⁶ Linehan, "Ireland ranks worse in EU for Transgender Healthcare", <https://gcn.ie/ireland-worst-eu-trans-healthcare/>

⁷ Moore, "PrEP: Irish Patients Stuck on Waiting Lists for HIV Prevention Drugs", <https://www.thetimes.com/uk/healthcare/article/prep-irish-patients-stuck-waiting-lists-hiv-prevention-drug-k8rzwx8xb>

Our Recommendations:

Informed Consent Model for Transgender Healthcare.

Though there was a promise of reforms to transgender healthcare within the last LGBT strategy, we still fail to meet international best practice standards. We join the call from transgender service users of the National Gender Service that transgender care must be provided at the primary level on an informed consent model. We are shocked by the ongoing service, especially in regard to the waiting times, and the overall pathologisation of transgender people. AMLCT/TCDSU calls on the government for urgent action on this, and for a shift in focus towards those who have to access the service.

Wide Introduction of Harm Reduction Services for Transgender People

Harm reduction in all of its forms must underlie any plan to reform transgender healthcare in Ireland. With wait times of up to ten years, and an inhumane service provided, it is vital that the government recognise reality and provide measures to support transgender patients in the meantime of any review. Grassroots groups with no funding, including Trans Harm Reduction, provide an essential service to the transgender community who are currently forced to self medicate whilst left without

appropriate care. Some trans people choose to self medicate also on their own volition, and this should be accounted for. Provisions must be put in place to support transgender people while the ongoing crisis continues.

A Complete Ban of Conversion Therapy

Trinity College Dublin's School of Nursing had conducted a study on the effects of Conversion Therapy and practices had on the people that were exposed to them. It was found that many of the participants of the survey had not consented or were forced into undergoing conversion therapies, with five participants being exposed to them as late as 2022.⁸

Results of these practices often leave a lasting negative impact on the people subjected to them. Nearly all participants of the study expressed feelings of repression and shame around same-sex relationships. Furthermore, it was also found that people that had undergone conversion practices had taken blows on their mental health, affecting their quality of life. Such effects included a greater risk of depression, anxiety, psychological distress, suicide ideation and attempts of suicide.

With all the information presented, it is imperative that the government moves to pass and implement a ban on conversion therapy that is trans inclusive.

⁸Keogh, p.31,
<https://www.tara.tcd.ie/bitstream/handle/2262/102251/TCD%20Conversion%20Practice%20Full%20Report.pdf?sequence=1&isAllowed=y>

Greater Access to PrEP and HIV Care

The HSE boasts their free STI testing service which involves free screening clinics across the country alongside self-testing kits that are delivered to one's door. Not only do they screen for HIV but they also screen for the most common STI's such as chlamydia and gonorrhoea.

Yet, with all the free testing, there has been an average 25% increase of transmission of the common STI's across the state, with HIV showing a 5.57% increase of transmission between 2022 and 2023.

This is a failure of the HSE. We need to see an increase in the access of PrEP (pre-exposure prophylaxis) across the State. University students must be accounted for within any scheme, with students being at a increased risk of contracting HIV⁹. We need to see a bigger push from the government for HIV and STI awareness instead of treating it as taboo.

Increased Legal Protections for LGBTQIA+ People

TCDSU is very worried about the stalling of hate crime legislation by the government. It sends a clear message that outside agitators that wish to stoke fear and harm against the LGBTQIA+ community have legitimate reasoning to do so. With rising hate crime

⁹ Health Protection Surveillance Centre, p. 3, <https://www.hpsc.ie/a-z/sexuallytransmittedinfections/publications/stireports/stireports/Weekly%20HIV%20Mpox%20&%20STI%20Report%20Week%2052%202023.pdf>

figures, the government must put protections in place for the LGBTQIA+ community and other marginalised peoples to achieve the justice they so deserve.

Mental Health Supports

Today, the Student Counselling Service of Trinity College Dublin boasts a weekly drop-in support group known as the 'Rainbow Group' which is tailored towards members of the LGBTQIA+ community which is facilitated by counsellors that belong to said community. LGBT Ireland also has a helpline which is dedicated to listening, supporting and signposting members of the LGBTQ+ community.

However, even with the range of supports listed, we still see members of the community subjected to higher risks of mental illness. A study conducted by Professor Agnes Higgins of the School of Nursing of Trinity College Dublin found that 52% of people surveyed had self-harmed, 64% suffering with suicidal thoughts with 26% of participants attempted suicide with 14 and 15 years being the common ages of which self-harm/suicidal thoughts manifest and suicide attempts are made respectively.

AMLCT/TCDSU is incredibly concerned with the lack of concern from the government for the LGBTQIA+ community's need for adequate mental health support. We need steps taken to ensure that LGBTQIA+ people are recognised as a high priority within mental health services, that they have access to safe, industry standard mental-health services which are tailored to their needs. These should also extend to educational settings and in youth services as they are in a more vulnerable position.

Ensuring Inclusion of LGBTQIA+ People Within Homeless Services and Preventative Measures.

With the ongoing housing crises, students are facing an unprecedented struggle to find accommodation. AMLCT/TCDSU has received an increased number of students presenting to the union facing homelessness. This has included queer students, who are presenting increasingly frequently. The specific risks and pathways into homelessness as experienced by queer young people must be addressed within any preventative action for homelessness. Furthermore, increased research funding must be allocated to higher level institutions to research the specific needs of LGBTQIA+ homeless people as it is an incredibly under-researched area of study within an Irish context.

Student Voices:

“GPs need to be informed about their ability to bridge HRT prescriptions and provide blood tests for trans people, the NGS has been scaring them and so they’re refusing to fulfil their duties as doctors and leave trans people to treat themselves” - A student, Trinity College Dublin

“There needs to be more information and education for doctors, GP’s and specialists, about the medical needs and realities of trans patients, because right now the lack of information means very few of them are properly doing their job”. - Nathan, Trinity College Dublin

“...refusal to do blood tests is also not really aligned with any sort of principles of harm reduction, let alone equitable treatment. What this means for me is sometimes I have to book a quick ryanair flight over to [the UK] in order to repeat a blood test” - Kyara, Trinity College Dublin

Submission from TCD QSoc:

- *Investment into creating and maintaining community-based resources and groups needs to be prioritised, especially in rural areas and for intersectional groups (i.e. disabled and neurodivergent queer people, queer Travellers, queer ethnic minorities); funding queer businesses that double as community spaces is an important facet of this*
- *Abolish the NGS and replace it immediately with an informed-consent, GP-administered system of gender-affirming healthcare and guaranteed access to gender-affirming healthcare for minors; on this point, public information campaigns countering misinformation about gender-affirming care are also important*
- *Make accessible bureaucratic pathways for refugees fleeing homophobic and transphobic violence internationally and support the integration of all queer refugees and migrants into their local queer communities*

- *Address the growing threat of far-right violence to queer organisations, especially those working with youth, and assure their security and safety as local and national priorities*
- *Create measures that allow larger queer community gatherings to be secured by trusted stewards instead of An Garda Síochána units*
- *Pass and mandate enforcement of legislation addressing hate crimes and gender-based violence*
- *Expand funding for the development of arts spaces and creative projects across the board*
- *Develop and expand public information campaigns on harm-reduction measures especially for DIY HRT and chemsex as well as overall substance use; make drug testing kits publicly and freely available and fund the free supply of safe injection kits*
- *Develop and expand public information campaigns and RSE curriculum material on safe queer sex, especially on sexual health and pleasure for transgender people and queer women*
- *Expand free access to PrEP and PEP nationwide*

- *Eliminate legislation criminalising the safe practice of sex work, especially for non-EU citizens, and support creative and community-building projects led by sex workers*

Conclusion

It is important that all areas of Irish life are inclusive of queer people, as queer people exist in every area of Irish life. The strategy must be not only inclusive, but far reaching and intersectional. True inclusion of queer people can only be achieved through comprehensive, radical housing and economic reform. Politics is becoming increasingly ugly due to successive failures by successive governments. All people have been left behind in favour of profit and multinational companies. It is time the government responds appropriately to the issues we face at the degree in which we experience them.