

2025

**Giving Voices to
LGBTQ+ People with IDD
in Ohio**

Plain Language Report



**Developmental
Disabilities Council**



Authors

Cory Gilden, *Research and Evaluation Manager*, NLCDD

Monica Mesa-Alvarez, *Research and Development Associate*, NLCDD

Caitlin Bailey, *Co-Director*, NLCDD

Suggested Citation:

Gilden, C., Mesa-Alvarez, M., & Bailey, C. (2025). *Giving Voices to LGBTQ+ People with IDD in Ohio*. The National Leadership Consortium on Developmental Disabilities.

<https://www.natleadership.org/reports.html>

Special Thanks to Key Advisors for the Project:

Sam Crane, *Crane Advocacy Consulting*

Amanda Rich, *Open Road Inclusive Community Counseling LLC*

Nicole LeBlanc, *National Policy & Advocacy Consultant*

Michael Denlinger II, *Self Advocate*

Special Thanks to Advisory Committee Members for the Project:

Bekhym Applegate

Capitrita Bell

Katie Carman

Li Nguyen



Project funded by the Ohio Developmental Disabilities Council and led by the National Leadership Consortium on Developmental Disabilities

© National Leadership Consortium on Developmental Disabilities 2025

Table of Contents

| | |
|---|-----------|
| Plain Language Summary of the Project..... | 5 |
| About the Study..... | 7 |
| Survey and Interviews..... | 9 |
| Statewide Survey | 9 |
| Interviews | 9 |
| LGBTQ+ Experience..... | 11 |
| Survey Results..... | 11 |
| Interview and Survey Open Response Question Results... | 12 |
| Service Accessibility | 14 |
| Getting Connected to Services — Survey Results..... | 14 |
| Getting Connected to Services — Interview and Survey Open Response Question Results..... | 16 |
| For All People with IDD | 16 |
| Specific to LGBTQ+ Identity..... | 18 |
| Access to Services — Survey Results | 20 |
| Access to Services — Interview and Survey Open Response Question Results | 21 |
| For All People with IDD | 21 |
| IDD and LGBTQ+ Support Systems | 24 |
| Support for Disability-Related Needs | 24 |
| Support for LGBTQ+-Related Needs | 25 |
| Interview and Survey Open Response Question Results... | 26 |
| For All People with IDD | 26 |
| Specific to LGBTQ+ Identity..... | 27 |

| | |
|--|-----------|
| Recommendations | 29 |
| Improve System Navigation and Access..... | 29 |
| Improve Service Provider Quality | 30 |
| Workforce Development | 31 |
| Developing Informal and Formal Supports | 32 |
| Conclusion | 33 |

Plain Language Summary of the Project

About the Project

LGBTQ+ people with intellectual and developmental disabilities (IDD) in Ohio have extra challenges getting and keeping services. Some people are treated unfairly and are not accepted because of their disability, gender, or who they love. Fear of rejection or mistreatment can make it hard to share who they are and get the support they need.

The project aimed to learn more about:

- Barriers to getting services
- Experience with service providers
- Current support systems
- What support is needed in the future

An Advisory Committee of LGBTQ+ people with IDD, service providers, and advocates helped guide the project. The Ohio Developmental Disabilities Council funded the project, and research was led by the National Leadership Consortium on Developmental Disabilities.

Who Participated

- **Survey:** 122 people, including LGBTQ+ people with IDD, family members, and professionals
- **Interviews:** 3 people, including two LGBTQ+ people with IDD and one family member

Key Findings

- About half of the participants thought that being LGBTQ+ made it harder to find a good service provider.
- About half of the participants had stopped using a provider or had a negative experience because of their LGBTQ+ identity.
- Positive experiences happened when providers listened, respected identities, and created safe spaces.

- Friends and family are very important support systems for LGBTQ+ people with IDD.
- Professional support is less consistent for supporting LGBTQ+ needs.
- Only about one-third of participants felt that providers understood or supported their LGBTQ+ needs.

Recommendations

- **Make services easier to use**

Do more to help people get the right support, keep their information private, and make it easy to update names and gender in paperwork.

- **Improve service provider quality**

Train staff to understand and respect LGBTQ+ people, use the right names and pronouns, and make services safe and welcoming.

- **Workforce development**

Hire staff who have lived experience, keep teaching staff about LGBTQ+ issues, and host support groups where people can meet and share their experiences.

- **Build supports**

Offer safe ways to meet people and make friends, give help when people feel unsafe, improve transportation, and provide emergency housing if needed.

Why This Project Matters

Learning about the experiences of LGBTQ+ people with IDD and what support they want will help remove barriers, make services welcoming, and support diversity. This will help LGBTQ+ people with IDD live safely, independently, and with dignity.

About the Study

The 2020 Behavioral Risk Factor survey found that one-third (36%) of LGBTQ+ adults self-reported having a disability¹. LGBTQ+ people with IDD in Ohio may face more challenges than other people that limit their access to services and wellbeing. Along with ableism, LGBTQ people with IDD may face stigma related to sexual orientation or gender identity, like discrimination or lack of acceptance in care settings. Fear of rejection plays a big part in people not disclosing their full Identities to service providers and getting affirming care. Service Providers may lack training or awareness on how to support people with LGBTQ+ and IDD identities. These things result in inaccessible services. But little is known about this for people in Ohio.

This research project was funded by the Ohio Developmental Disabilities Council. It was led by the National Leadership Consortium on Developmental Disabilities.

The goal of this project was to learn more about the experiences of LGBTQ+ people with IDD across Ohio by investigating:

- Service access barriers
- Treatment by and impressions of service providers
- Support systems that are currently used
- What is needed in the future

An Advisory Committee that helped guide the project met four times in 2025. The committee was made up of LGBTQ+ people with IDD, service providers, people with IDD, and other advocates. The

¹ Human Rights Campaign. (2022, August 12). *Understanding disability in the LGBTQ+ community*. HRC. Retrieved from <https://www.hrc.org/resources/understanding-disabled-lgbtq-people>

committee helped create survey, interview, and focus group questions, recruit participants, and give recommendations based on study results.

Survey and Interviews

Statewide Survey

A web-based survey was used to find out the service needs, gaps in current services, and things that discourage use of services by LGBTQ+ people with IDD.

There were 122 LGBTQ+ people with IDD, people with IDD, family members of people with IDD, and service provider professionals who took the survey. Sixty-three (63%) of survey participants identified as LGBTQ+, and 39% said they were transgender. A little more than half (51%) were male, 43% were female, 5% were non-binary or third gender, and 1% were unknown. More than one-quarter of participants (27%) lived in Southeast Ohio, 22% lived in Northeast Ohio, 23% lived in Central Ohio, 14% lived in Southwest Ohio, and the remaining 14% lived in the West and Northwest regions of Ohio.

Many survey participants identified as belonging to underserved communities:

- 24% lived in rural areas
- 41% were BIPOC
- 55% were low-income
- 11% were non-native English speakers
- 32% had a physical disability

Interviews

Interviews were done with LGBTQ+ people with IDD and their family members. The goal was to learn about their experiences and the challenges they experience when getting services and support. The

interview questions were based on the same topics as the survey. These questions helped gather stories and personal experiences in people's own words.

A total of three people from Ohio took part in interviews: two LGBTQ+ people with IDD and one family member of an LGBTQ+ person with IDD. Their stories provided important, real-life insights from people with lived experience.

The number of interviews was smaller than expected. Even though information was shared that personal details would stay private, some people may have felt unsafe sharing their identities or opinions because of what is happening in politics right now.

Because only a few LGBTQ+ people with IDD and family members participated, the study was expanded halfway through to invite service providers (staff from agencies that support people with IDD). Some providers agreed to take part, but in the end, no service providers were interviewed.

LGBTQ+ Experience

Survey Results

The goal of this project was to understand the experiences of LGBTQ+ people with IDD with their service providers and services, including:

- Views on how welcomed LGBTQ+ people feel by service providers
- How they think being LGBTQ+ has impacted their services
- What they think providers could do to make LGBTQ+ people with IDD feel more comfortable

About two-thirds of participants (68.6%) thought their service providers were knowledgeable about their LGBTQ+-related needs. The rest (31.4%) said that their service providers were only *“a little bit”* or *“not at all”* knowledgeable about their LGBTQ+ needs.

About one-third (32.4% of participants) felt that their service providers were only *“a little bit”* or *“not at all”* responsive to their LGBTQ+ needs.

About one out of three people (32.8%) also said their service providers were not good allies to the LGBTQ+ community and did not make them feel comfortable being themselves (37.6% of participants).

About half (52.1% of participants) reported they thought being LGBTQ+ makes it harder to find a disability service provider that fits their needs.

A little less than half (47.9%) said they have stopped going to a service provider because they did not feel comfortable with them because they are LGBTQ+.

Forty-five percent of participants (45.1%) said they had a negative experience with a service provider that they thought was because they were LGBTQ+.

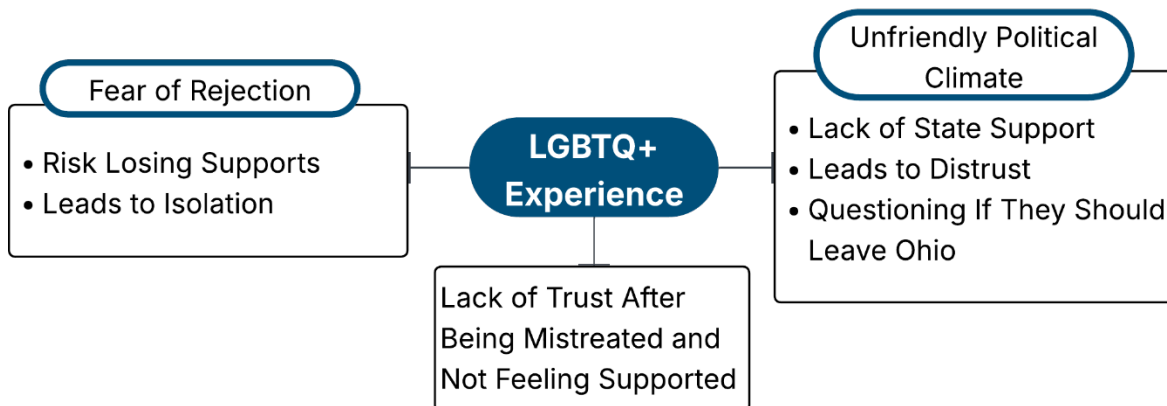
Figure 1 Average LGBTQ+ Person with IDD's Negative Experiences with Service Providers



Interview and Survey Open Response Question Results

LGBTQ+ people with IDD and their family members shared big concerns about their safety and well-being because of their identities, both at home and in the community.

Figure 2 Interview Themes about the LGBTQ+ Experience with Service Providers



People talked about their fears of sharing their LGBTQ+ identities because of what is happening in politics right now. One *person* said, *“Ohio hates me. If it could unalive me as a disabled nonbinary person, the state government would have already done it.”*

Another participant shared how possible changes in the law made stress and mistrust worse. *“[My daughter] has basically zero trust in the people in Ohio actually having her best interests at heart. We have had the conversation about, ‘Do we stay, or do we go?’ And ‘When do we stay, or do we go?’ Because we’re both trans. We’re both also autistic, and it is not a comfortable time to be hearing about the possibility of federal autism registries and seeing Ohio try and put definitions that are counter to our experience in a budget bill.”*

Changing laws and discrimination create barriers to safety, trust, and service access.

People shared that they live in constant fear of rejection and harm due to being LGBTQ. *“[My daughter] really does not go outside at this point, except for she makes it to her doctor’s appointments. We’ll go out for a walk occasionally, but it must be late in the day, or otherwise relatively dark, because she doesn’t want to risk encountering people.”*

Stories of losing trust and being mistreated or not being supported were also shared. A lack of respect for their identities by providers worsened trust. It also led to more barriers to meaningful support.

Service Accessibility

Getting Connected to Services — Survey Results

Finding services and navigating the service system is a well-known challenge for people with IDD. Study participants were asked how they got connected to services, like how they find out about services, apply to services, the services they have currently, and why they cannot access services.

When asked what services they currently had, the most reported supports used by LGBTQ+ people with IDD were:

- *Community Inclusion & Engagement* (54.4% of participants)
- *Medicaid* (35.3% of participants)
- *Employment* (35.3% of participants)

The services used the least were:

- *Support Brokering* (2.9% of participants)
- *Guardianship* (4.4% of participants)
- *Respite Services* (4.4% of participants)
- *Day Programs* (5.9% of participants)

Low use of Support Brokers is an area to be improved in the future, given that 23.4% of survey participants said they did not know how to get the services they wanted.

When asked which services they would like to participate in, but are not right now, the top choices of LGBTQ+ people with IDD were:

- *Employment services* (54.4% of participants),
- *Therapies* (41.2% of participants),
- *Residential services* (32.4% of participants)

- *Medicaid* (20.6% of participants)
- *Other family services* (19.1% of participants)

TANF/SNAP, transportation, guardianship, and Medicare services had low interest from survey participants. This is either because they already had these services or did not want these services.

Participants were also asked to name disability services or programs that they have tried to participate in but could not. LGBTQ+ people with IDD most often reported being unable to take part in:

- *Therapies* (17.7% of participants)
- *Medicaid* (16.2% of participants)
- *Services to Adapt the Environment* (10.3% of participants)
- *Residential Services* (7.4% of participants)

When asked how they find the disability services they need, the top answers from the survey were:

- *My Own Search (online, books, or other resources)* (45.5% of participants)
- *Service providers* (39.0% of participants)
- *Friends* (37.7% of participants)

It makes sense that people search online at their own pace because the Internet is full of endless sources. This shows an opportunity for disability organizations to grow outreach efforts and create more accessible and accurate materials.

Very few (1.5-2.9% of participants) said they had barriers to accessing *employment services, advocacy groups, transportation, or respite care*. No survey participants said they had unsuccessful

attempts to access *Medicare, Personal care services, Family services, or Support brokering.*

“No” or low responses may also mean that LGBTQ+ people with IDD never attempted to get these services because they did not know how or did not need those services.

People were asked why they could not get these services. The top three responses were:

1. *“I did not qualify for the service”* (31.1% of participants)
2. *“I did not know how to get services”* (23.4% of participants)
3. *“Service was not covered by my waiver”* (16.9% of participants)

These survey results show a need for wider eligibility criteria, easier system navigation guidance, and more service options.

Getting Connected to Services — Interview and Survey Open Response Question Results

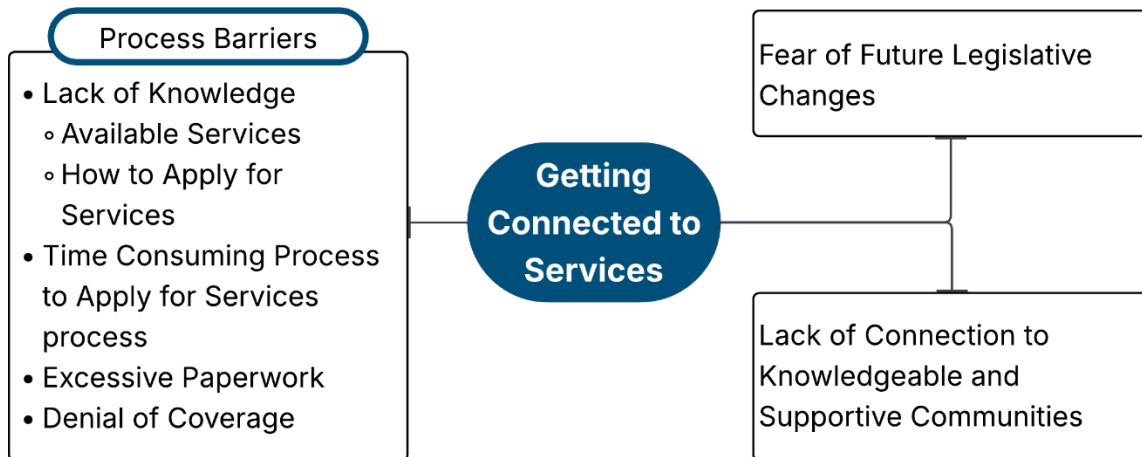
For All People with IDD

Interview participants answered open response survey questions and interview questions to explain their experiences with getting connected to services.

People shared that even though they were in the service system for a while, they were *“Still not entirely clear with what services are available, or [my daughter] would be eligible for.”*

Losing health insurance resulted in people not being able to access services. Getting back on insurance was hard.

Figure 3 Interview Themes about Getting Connected to Services



A big barrier to getting services was completing the large amount of paperwork. Not knowing how to complete paperwork correctly led to being denied services or money to pay for services.

As one person said, *“It should not be a full-time job trying to find services for your kid... If we both manage to survive as sane as we went into it, I'll be glad.”*

People said in the interviews that they used or wanted a lot of different types of paid and unpaid support to help them or their loved ones live a life of their choosing.

Unpaid supports included family and friends.

Paid supports that were used by study participants include:

- Special Education (IEP's, 504 Plans)
- Job Supports
- Home and Community Based Services (HCBS)
- Assistive Technology

- Medical Devices

Access to good health insurance and knowledgeable case managers made getting services easier. One person said, “A *knowledgeable case manager makes a big difference.*”

Paid supports that people wanted but were not currently used included:

- Support Groups for Survivors of Sexual Assault
- Respite Services
- Some types of Medical Devices

One person said, “*I don’t think there are any respite services for me. Ohio is hesitant to even give me SNAP.*”

Specific to LGBTQ+ Identity

People said that accessing services that could support them live full lives required truth about who they were and what they wanted.

Challenges to getting services that people talked about in the interviews were:

- Do not know what services are available
- Do not know how to apply for services
- Paperwork that is confusing or takes a long time to fill out
- Too many rules and steps to get services
- Denial of services or payment for services

People interviewed feared changes in laws, like work requirements for Medicaid, would worsen the amount of paperwork and make it harder to get services.

People sometimes had challenges disclosing their full identity when finding and getting services. Some participants talked about how they were scared to tell people their gender identities and sexual orientations. One person said, *“For someone with IDD, coming out is doubly hard — you risk losing the lifeline you depend on.”*

People were afraid of sharing their identities due to family rejection that may lead to a loss of housing or essential care. *“Though I wasn’t worried my family member hurting me [physically] if they found out [I was gay], I was worried about my safety. I rely on my family for a lot of my care. What would happen if they kicked me out?”*

They talked about the lack of privacy during meetings with case managers or service providers caused that fear.

Some participants noted that they knew very few, if any, LGBTQ+ people who were also disabled. Lack of visibility made shame and fear worse. *“People need to know that nothing is wrong with them—that they are good people.”*

One person noted many non-disability specific community services were segregated or separated into groups of people. This leaves nonbinary people unable to access needed supports.

One participant talked about this challenge in the context of supports for survivors of sexual violence. *“For example, yoga for survivors of R/SA [rape/sexual assault] is either for women or men, no trans or nonbinary groups and I fear triggering a fellow survivor.”*

For one trans identifying person, changing their name caused paperwork errors and denial of services and benefits. *“Even after her legal name change, official notices kept coming with the wrong name. We sent the court order multiple times, but they ignored it. That may have been why we were denied SSI.”*

Interview participants shared that supportive community organizations like faith-based groups and advocacy groups made access to services easier.

Access to Services — Survey Results

Access to services is a big factor in improving and maintaining health, independence, and the quality of life of LGBTQ+ people with IDD.

When people were asked in the survey how easy it was to access services, they had mixed experiences.

Making appointments was generally easy, with 63.4% finding it *“very easy”* or *“somewhat easy.”* About 37% of participants still found it *“somewhat hard”* or *“very hard.”*

Finding information about services and eligibility or help getting services was slightly easier overall. Two-thirds of participants rated these tasks *“very easy”* or *“somewhat easy.”* But, about 37% still said it was *“somewhat hard”* or *“very hard.”*

Distance, transportation, cost, and insurance coverage were barriers for a large portion of respondents. About 40-45% of survey participants found these issues *“somewhat hard”* or *“very hard”* to manage.

Most people reported transportation as the biggest challenge, with more than half (56.4% of participants) reporting it was “*somewhat hard*” or “*very hard*” to get transportation to services.

The following would help fix these accessibility issues:

- Clearer communication
- More user-friendly information resources
- Help with service navigation
- Expanding transportation supports
- Reducing cost burdens
- Providing clearer insurance coverage guidance

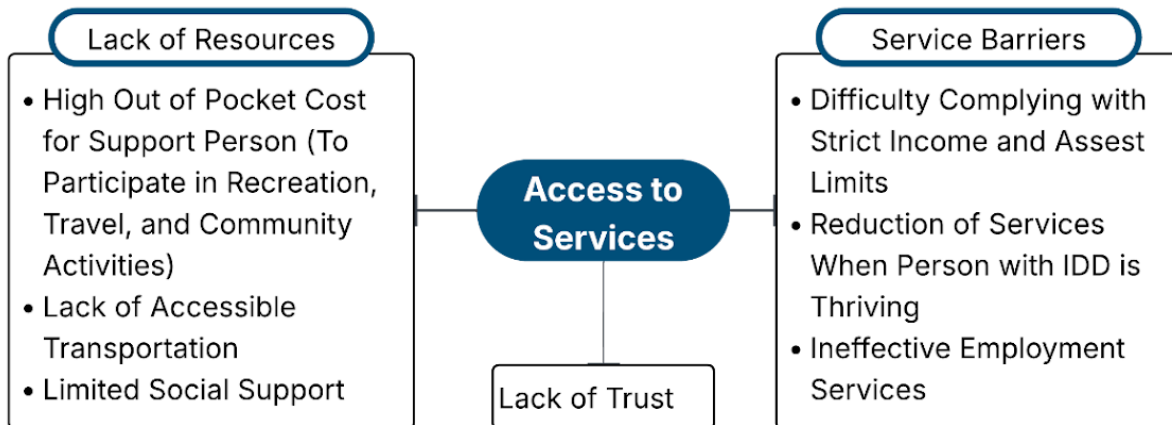
Access to Services — Interview and Survey Open Response Question Results

For All People with IDD

High costs for services and supports while staying within strict income and asset limits and trying to meet basic needs was a barrier shared by people in the interviews. *“Income is a barrier, because legally, if I want to make extra money, I can only make \$65 a month before my benefits are affected.”*

One participant talked about how it was hard to cover costs for staff. *“I always need to consider the cost of bringing staff along. I can’t go on vacation without my staff, but then I need to think about the cost not just of my ticket but theirs as well.”*

Figure 4 Interview Themes about Access to Services



Communication issues with state departments and providers were also a barrier to services. One person said, *“The lack of effective communication channels prevented me from obtaining information or help in a timely manner,”* while another added, *“Definitely, the phone call wait times for certain providers makes it hard. The anxiety I have with phone calls doesn’t help.”*

Transportation challenges and how far away providers are also issues. *“The distance of my providers being in Cleveland or Westlake most of the time, when we already have transportation issues.”*

For some people, transportation issues meant they could not take part fully in community activities. As one person said, *“My roommate has a wheelchair accessible van, but it only can accommodate one wheelchair. That means if we both get invited somewhere for advocacy work or something else, only one of us can go.”*

Funding or service cuts when someone is seen as doing too well were also a problem mentioned in the interviews. It leaves people feeling unsupported. One family member said, *“You can't just take*

accommodations and supports away from her just because she's doing well. She's doing well, so let's keep doing the things that let her do well."

People also spoke about weak employment support. *"The vocational services that we did get were not very helpful. There was not much conversation around 'What really drives you? What motivates you? What are you aiming for in life?'"*

People in the study also stressed the importance of social connections. In addition to feeling respected by providers. Some shared experiences of not being taken seriously by doctors or support staff. Others highlighted the crucial role of friendship and community. *"Without friends, you have nothing."*

The experiences shared during the interviews highlight many barriers that people face in trying to get and keep the services they need, including financial, logistical, relational, and systemic challenges.

IDD and LGBTQ+ Support Systems

Support systems help LGBTQ+ people with IDD. They support their ability to live safely, independently, and with dignity. Service providers, service coordinators, therapists, and DSPs give important support in getting needs met. They are key to systems navigation. Friends and family often serve as a bridge to emotional, social, and basic support.

LGBTQ+ people with IDD often face extra barriers like discrimination, feeling left out, and trouble finding supportive services.

Support for Disability-Related Needs

Participants were asked if they have friends or family and professionals who support their disability-related needs. Most LGBTQ+ people with IDD reported having some level of support from both friends or family and professionals.

A majority (71.7%) agreed, either “*strongly agree*” (35.0%) or “*somewhat agree*” (36.7%), that they have support from friends or family for their disability-related needs. But 28.3% of participants said they did not have support from their friends or family for disability-related needs.

Professional support was not as strong. Only 10.0% said they “*strongly agree*” and 48.3% said they “*somewhat agree*” that professionals supported their disability-related needs.

Many LGBTQ+ people with IDD have weaker or inconsistent support from formal systems, like disability or mental health professionals.

When asked who helps support their disability-related needs, most (56.6%) said that “*therapists*” helped, 51.7% said that “*doctors*” and “*psychologists*” helped them with disability-related needs.

Support for LGBTQ+-Related Needs

People were asked about the amount of support they get from friends or family for their LGBTQ+-related needs. Most reported having some level of support, but there are still gaps. For friends or family, more than 70% agreed that they have support. But, one out of four (22.1% “*somewhat disagree*” and 2.9% “*strongly disagree*”) indicated they did not have support from friends or family.

Professional support was less. Only 14.4% said they “*strongly agree*” say they have professionals who support their LGBTQ+-related needs. A little less than half (46.4%) said they “*somewhat agree*” that they have support. Nearly 40% of people said that professionals did not support their LGBTQ+-related needs (33.3% “*somewhat disagree*” and 5.8% “*strongly disagree*”).

The results show that friends, family, and other personal connections are still a strong source of support for LGBTQ needs.

Service system professionals may not consistently provide the support that is needed. This is an area that needs to be strengthened.

When asked which types of people or groups are supportive of you as an LGBTQ+ person, most said (61.8%) that “*psychologists*” were helpful for LGBTQ needs. The second most selected support was “*family members*” (32.4%), with “*doctors*” being the 3rd most popular with 30.9% of participants. Close fourth and fifth supporters that were named were “*friends*” and “*social media.*”

Figure 5 *Top 3 Survey Responses for Who LGBTQ+ People with IDD Say Helps with Their LGBTQ+-Related Needs*



A takeaway from these results is that we need to strengthen natural support systems like peer education programs and opportunities for people to connect with affirming groups.

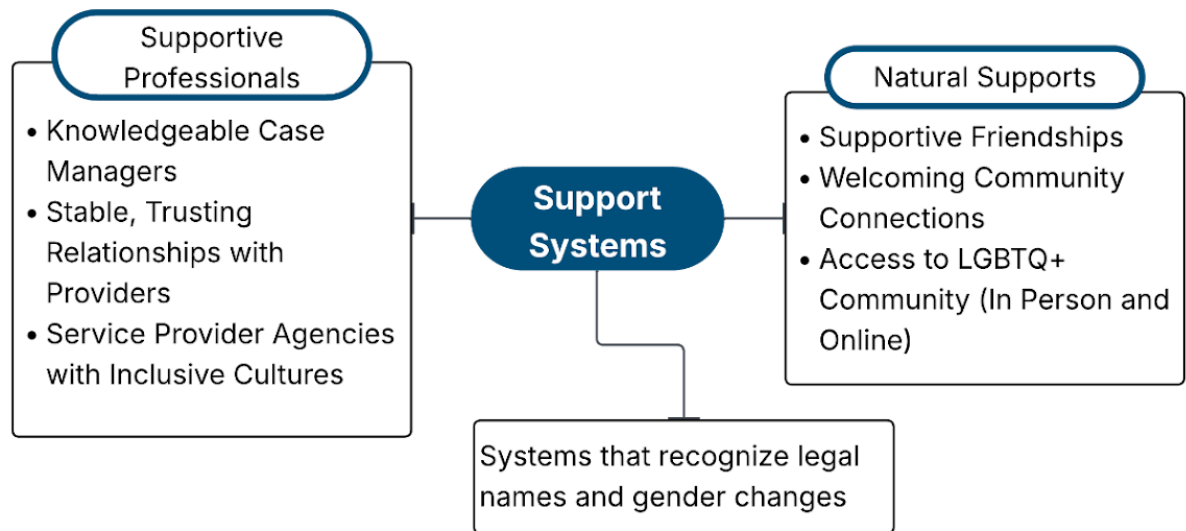
Interview and Survey Open Response Question Results

Supports create a foundation for stability, continued access to care, and a sense of belonging in the community.

For All People with IDD

A key support was having case managers who understood the system well. They help people and families find their way through complex services and stay connected to the support they need. One person said, *“Our case manager helps us stay connected and navigate things.”* Another shared that the Ohio Developmental Disability Council had been a big support.

Figure 6 Interview Themes about Support Systems



Participants shared how insurance provided access to healthcare and helped them stay healthy. *“I believe being enrolled in insurance like CareSource helps me keep much-needed healthcare, along with other benefits.”*

Social connections are very important. People said that having welcoming community places and friendships helped them feel less alone and get emotional support during hard times. *“My friends have been wonderful, and it makes a big difference with everything.”*

When people felt respected and understood by their providers, they were more likely to engage in services and advocate for their needs.

Specific to LGBTQ+ Identity

Support that helped LGBTQ+ people with IDD to access services and live full, meaningful lives included being included and feeling safe.

People in the interviews wanted to be connected to agencies where staff and the people being supported were accepted. They wanted places where everyone can be open about who they are. *“People who work at agencies need to feel comfortable being out too for the people they support to feel comfortable.”* A sense of safety is needed for trust and belonging.

Some people who were interviewed said their positive experiences sharing their identities made them feel safe.

“When I actually did finally tell some people at the agency, who I'm close to, that I am gay, and that I was worried about telling them, in all frank honesty, they were incredibly supportive. They did all that they could to make sure that they were supportive of me.”

Access to stable, affirming relationships with providers that respect people’s identities is vital to making people feel comfortable. *“There needs to be a system where we are not always correcting people.”*

Many people found strength and connection through the broader LGBTQ+ community, both in person and online. Virtual communities can be a lifeline when face-to-face relationships feel unsafe or not accessible.

Recommendations

Everyone involved in the project offered ideas to make the disability service system better. Four major themes of recommendations were:

1. Improve system navigation and access
2. Improve service provider quality
3. Workforce development
4. Develop formal and informal supports

Improve System Navigation and Access

The study showed that LGBTQ+ people with IDD need better support and easier access to services. These recommendations suggest ways to make services safer, more welcoming, and easier to use for LGBTQ+ people with IDD.

- **Connect people to knowledgeable case managers**

Case managers should know the rules, benefits, and how to help people apply for services. Giving people the right information and help will make it easier and faster to sign up for important services.

- **Protect privacy**

People should feel safe talking to case managers privately, even if they have a guardian.

- **Make it easier to update names and gender information**

The state could improve their computer systems so people can change their names and gender information across different platforms at the same time. This would save time and help keep people's information correct.

- **Give higher pay to doctors who take Medicaid**
Paying doctors more could encourage more doctors to accept Medicaid so people can get care more easily.
- **Create a list of LGBTQ-friendly provider agencies**
- **Share LGBTQ+ resources**
Make sure people know about national hotlines and other helpful resources.
- **Support self-advocacy groups**
Help groups where LGBTQ+ people with IDD can speak up for themselves, make friends, and get support.

Improve Service Provider Quality

These recommendations focus on making service providers more welcoming, knowledgeable, and supportive of LGBTQ+ people with IDD.

- **Train and support staff**
Use peer mentoring and training so staff understand LGBTQ+ needs and IDD support. Use trauma-informed methods when working with people. Encourage staff to stand up for people's rights and give support when harmful laws affect them.
- **Use inclusive language**
Avoid prejudice, judgment, or harmful assumptions in all materials, communication, and daily conversations. Do not guess someone's gender or who they like. Ask questions about sexuality or gender only when it helps provide better support. Use the names and pronouns that people choose for themselves and remove old or "dead" names from files.
- **Create safe and welcoming spaces**

Make spaces feel safe, open, and accepting for everyone. Have all-gender, accessible bathrooms. Let people decide when it feels safe to talk about who they are. They should never be forced to do it.

- **Care about the whole person**

Support people in ways that match who they are and their unique needs. Listen to what people want and need and let them make choices about their own supports and services. Make services work by fixing barriers in the world, not by trying to “fix” the person.

Workforce Development

These ideas focus on helping staff learn how to understand, respect, and support LGBTQ+ people with IDD. Staff who support all identities make services safer, more inclusive, and easier to use.

- **Provide staff training**

Offer special training on LGBTQ+ topics, including language, trauma-informed care, and best practices. Teach staff how to respectfully listen, communicate acceptance, and support people when they share their identities. Training should be ongoing, so staff keep learning and improving.

- **Promote cultural competency**

Offer or support training to help staff understand and respect people from different backgrounds. Training should include LGBTQ+ topics, inclusive language, history, current issues, and trauma-informed care.

- **Hire people with lived experience**

Hire more LGBTQ+ people and people with IDD to bring real-life experience to the work. This helps agencies understand and meet people's needs better.

- **Support community connection**

Create or support groups where LGBTQ+ people with IDD can meet, talk, and support each other. These groups help people make friends and gain confidence.

Developing Informal and Formal Supports

These recommendations focus on building stronger supports and safer spaces for LGBTQ+ people with IDD.

- **Create safe dating and relationship opportunities**

Build programs for and with LGBTQ+ people so they can meet other people and form healthy relationships.

- **Use personalized approaches**

Help each person feel safe and supported by understanding their individual fears and safety concerns.

- **Improve transportation**

Make it easier for people to get where they need to go, including social activities and support services.

- **Provide crisis housing and support**

Offer safe housing and help for people who lose their homes or support after sharing their LGBTQ+ identity.

Conclusion

This project confirms that LGBTQ+ people with IDD in Ohio face more challenges in:

- Accessing services
- Getting appropriate and supportive services
- Feeling included in IDD spaces and the world as a whole

Recommendations in this report create a vision for a more inclusive system and community where LGBTQ+ people with IDD are respected, validated, and fully supported in their identities.

LGBTQ+ people with IDD need safe spaces and inclusive practices that respect disability & LGBTQ identities.

Real fairness means changing the laws and policies at the state and national levels and making service agencies more welcoming. Professionals need more training on LGBTQ+ issues, and organizations should create safe spaces where people are comfortable being themselves. Doing this will help all LGBTQ+ people in Ohio feel safe, respected, and supported.

By putting the changes from this report into practice, Ohio can create a system that removes barriers and welcomes everyone. It will be a system that celebrates diversity so that no one is left behind.