



Health on your own terms

A gentle resource handbook for
neurodivergent and/or LGBTQ+ adults,
community groups, and organisations

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Welcome

This handbook is a private, pressure-free space to explore health in ways that make sense for you.

It can be used alone, in a workshop, with a trusted person, or by organisations supporting neurodivergent and/or LGBTQ+ adults.

There are no right answers here. You are invited to write, draw, map, scribble, skip, pause, return, and adapt anything that helps.

- Write, draw, scribble — use words, doodles, arrows, whatever helps you think.
- Skip anything that doesn't fit — every prompt is an invitation, never an obligation.
- Take your time — pause, move, stim or step out. Come back whenever you like.
- It's yours to keep — return to these pages.

Reflection space: How I would like to use this handbook

How this handbook can support you

- Explore your own meaning of health, beyond pressure, shame or one-size-fits-all expectations.
- Notice sensory, emotional, social, physical and practical needs.
- Prepare for appointments, referrals, forms, phone calls and follow-up.
- Think about advocacy, reasonable adjustments and support people.
- Create language that feels useful when talking to healthcare professionals.

Thought space: What I hope this handbook will help me with

Before you begin

Access, comfort, and choice.

You are allowed to take part in the way your body and mind can manage today. You can stim, move, lie down, use fidgets, pause, ask for help, avoid eye contact, take breaks, or come back later. If a prompt feels too much, you can leave it blank or change it.

Body check-in: One thing my body or nervous system needs right now

Access check: Anything that would help me use this handbook

1. What health means to me

Health is not a test of worth

- a moral obligation
- a standardised checklist
- proof that you are trying hard enough
- something defined only by ableist, cisnormative or heteronormative systems
- the same every day, or the same for everyone

Many of us carry grief, anger, confusion or tiredness about systems that have not understood us. Those responses make sense. You do not have to make your relationship with health neat or positive for it to be valid.

Reflection space: What comes up for me when I read this?

My definition of health

Words, images, feelings, memories — anything goes. Write it, draw it, or both.

Reflection space: What comes up for me when I read this?

Health can be layered

In the workshop we explore health as something layered. What does each of these bring up for you?

- Personal: not one-size-fits-all.
- Relational: shaped by access, environment, connection, care, oppression and safety.
- Sensory: connected to what supports, soothes, overwhelms or drains your system.
- Dynamic: something that can shift by day, context, hormone cycle, stress, support, season, disability, medication or life stage.
- Practical: affected by money, housing, transport, food, work, benefits, appointments and paperwork.

Reflection space: Which layers matter most for me right now?

Gentle prompts

1. When I hear the word “health”, what feelings, images, memories or body sensations come up?
2. Whose definition of health have I been taught to follow?
3. What parts of those definitions do I want to keep, question, change or refuse?
4. What would it be like to define health on my own terms?

Notes, doodles or words that feel important

2. What supports my wellbeing?

This section is for noticing what helps, not for creating a perfect routine. You may already be doing many things to survive and stay connected to yourself.

1. What are the signs that I am doing well enough?
2. What helps my body or nervous system feel safer, steadier or more regulated?
3. What sensory needs support my wellbeing?
4. What kinds of rest, movement, food, medication, routine, connection or solitude help?

Notes, doodles or words that feel important

When things are harder

Noticing difficulty is not failure. It can be information. You may want to look for early signs, patterns, barriers and support needs without blaming yourself.

1. What early signs of overwhelm, shutdown, burnout, pain, fatigue or dysregulation do I notice?
2. What gets in the way of meeting my needs?
3. How do ableist, cisnormative, heteronormative or productivity-based expectations shape how I judge my health?
4. What helps me ask for support before crisis point?

Reflection space: My early signs and what might help

3. Health, identity & belonging

1. How have my neurodivergent and/or LGBTQ+ identities shaped my relationship with health?
2. What messages have I received about my body, needs, communication, gender, sexuality, relationships or worth?
3. Where have I experienced affirmation, understanding or good care?
4. What would a more affirming version of health look, sound or feel like?

Reflection space: What affirming care means to me

4. Understanding healthcare systems

- Primary care: often the first point of contact, such as GP practices, community pharmacy, dentistry and optometry.
- Secondary care: services such as hospital clinics, planned care, urgent and emergency care, mental health services and specialist assessment.
- Tertiary care: highly specialist care for more complex needs.
- Community health: services delivered closer to home, such as community nursing, sexual health services, rehabilitation or other local support.
- Social care and local authority services: support connected to daily living, safeguarding, housing, public health, transport, education and wider wellbeing.
- Voluntary, community, faith and social enterprise organisations: community-led support, peer groups, advocacy, information, wellbeing activities and practical help.

In England, local partners are expected to work together through integrated care systems. These bring NHS organisations, councils, social care, voluntary sector organisations and other partners together to improve health, care and wellbeing locally.

Drawing space: My map of the healthcare system

You might draw services, people, barriers, doors, loops, bridges, shortcuts, dead ends, trusted places or anything else that helps you make sense of the system.

What can make healthcare harder

Healthcare services often meet us when we are tired, afraid, overwhelmed, in pain or trying to explain something complex quickly.

For neurodivergent and/or LGBTQ+ adults, barriers may include sensory environments, rushed appointments, forms that do not fit, assumptions about bodies or relationships, previous trauma, difficulty using phones, being disbelieved, or needing to repeatedly explain identity, access needs or symptoms.

Reflection space: The parts of healthcare I find hardest

Rights, access needs and reasonable adjustments

Health and social care services should make reasonable adjustments so disabled people can access care more fairly.

Adjustments might include longer appointments, written information, plain English, quieter waiting options, support with communication, accessible appointment letters, allowing a supporter to attend, or recording specific access needs so they can be seen by staff in future.

My access needs for healthcare
Communication:
Environment:
Timing & appointments:
Support person or advocate:
Information format:
Anything staff should know:

5. Preparing for appointments

Preparation can reduce the amount you have to hold in your head during an appointment. It can also make it easier to come back to the point if you feel rushed, frozen, overwhelmed or unsure.

Before the appointment

- Write down the main thing you need help with in one sentence.
- List symptoms, changes, patterns, triggers, dates and what you have already tried.
- Decide what outcome you are hoping for: advice, tests, medication review, referral, letter, fit note, diagnosis, follow-up or reassurance.
- Choose any access needs you want to ask for in advance.
- Ask someone trusted to come with you, wait nearby, help you make notes, or debrief afterwards if that would help.

Appointment prep sheet

What I want help with:

How long this has been happening:

How it affects my daily life, work,
study, care tasks or relationships:

What I have already tried:

What I am hoping will happen next:

Questions I want to ask:

Useful phrases

- “I find it easier to explain things if I use my notes.”
- “This is affecting my ability to work, study, care for myself, sleep, eat, travel or leave the house.”
- “What are my treatment options?”
- “What should I look out for if my symptoms get worse, and where should I go?”
- “After these test results come back, what should I do next?”
- “Can you explain that in plain language or write it down for me?”
- “Can we agree a follow-up plan before I leave?”
- “If you are not referring me or ordering this test, can you please record that I asked and the reason it was not agreed today?”

My phrases to keep close

After the appointment

- Write down what happened as soon as you can.
- Note any medication changes, tests, referrals, safety advice or follow-up dates.
- Ask for written information if you need it.
- If something felt wrong, confusing or dismissive, you can ask for clarification, seek a second opinion, change GP, contact Patient Advice and Liaison Service for hospital care, or ask a trusted organisation for advocacy support.

After-appointment notes

What we agreed:

What I need to do next:

What the service will do next:

When to follow up:

**How I feel now and what
support I need:**

6. My wellbeing wheel

Shade each segment to show how nourished it feels right now — a little or a lot.
There's no ideal shape.

Drawing space: My wellbeing wheel

Draw a circle. Divide it into sections that matter to you. Shade each section to show how nourished it feels right now.

You can use the suggested areas below or rename them:

Emotional · Physical · Sensory · Social · Environmental · Financial · Spiritual · Creative ·
Rest · Identity · Safety · Joy

Which areas feel nourished, steady or supported?

Which areas want gentle attention?

7. Sensory supports and grounding options

Different sensory supports help different people at different times. You might use these ideas to notice what helps you feel more present, anchored, focused, soothed or able to continue.

My sensory support menu

Pressure or weight:

Movement:

Texture or fidgets:

Sound:

Food, drink, or oral sensory support:

Light, smell, or temperature:

One small sensory experiment I might try this week:

8. Taking it with me

You might not leave with everything solved. That is okay. The aim is to leave with a little more language, choice, permission or support than you arrived with.

One thing I am taking away:

One small act of care I can offer myself this week:

Notes, doodles & extra pages

This space is for anything you want to hold on to: words, drawings, appointment notes, questions, reminders, names of services, or things you want to say but are not ready to say out loud.

For organisations & facilitators

This handbook can be shared as a printed workbook, workshop handout, one-to-one conversation tool or take-home reflection resource.

Invite people to use only what feels useful.

Avoid asking anyone to disclose identity, diagnosis, trauma, medical history or personal circumstances unless they choose to.

Build in breaks, sensory options, quiet space, alternative ways to contribute, and clear routes for follow-up support.

Facilitator notes
Access considerations:
Local services or signposting:
Safeguarding or support routes:
Ways participants can give feedback:
Adaptations for this group: