

2014-2016

# South Australian Strategy

for the Inclusion of Lesbian, Gay,  
Bisexual, Transgender, Intersex  
and Queer People



**Government  
of South Australia**

Department for Communities  
and Social Inclusion

# Acknowledgments

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**Author:** Policy and Community Development Division

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Jay Weatherill

**Hon Jay Weatherill MP**  
Premier of South Australia

## Premier's Statement

As the Premier of South Australia, I am proud to present the *South Australian Strategy for the Inclusion of Lesbian, Gay, Bisexual, Transgender, Intersex and Queer People 2014-2016*.

Social inclusion impacts on us all. All South Australians deserve a fair go – to feel valued and have the opportunity to actively participate and to prosper in our community.

Improving outcomes and increasing opportunities for Lesbian, Gay, Bisexual, Transgender, Intersex and Queer people is critical: it not only benefits them but is important to the wellbeing and prosperity of the whole community.

The *South Australian Strategy for the Inclusion of Lesbian, Gay, Bisexual, Transgender, Intersex and Queer People 2014-2016* aims to enable full and safe participation in culturally inclusive services and programs. It aims to increase the awareness and education in the broader community about their issues.

The strategy is also intended to support State Government departments to include a focus on Lesbian, Gay, Bisexual, Transgender, Intersex and Queer people when developing and implementing policies and strategies and to respond to and eliminate acts of discrimination.

We should value every South Australian and respect the contributions that each person makes to our community.



A handwritten signature in black ink that reads "Zoe Bettison". The signature is fluid and cursive.

**Hon Zoe Bettison MP**  
Minister for Communities and Social Inclusion

## Minister's Foreword

As Minister for Communities and Social Inclusion, I am pleased to support the *South Australian Strategy for the Inclusion of Lesbian, Gay, Bisexual, Transgender, Intersex and Queer People 2014-2016*.

I am committed to working towards an inclusive South Australia: a community where diversity is both valued and celebrated. Unfortunately Lesbian, Gay, Bisexual, Transgender, Intersex and Queer South Australians can experience discrimination, harassment, violence, homophobia and transphobia in a range of settings and in various ways.

The State government is strongly committed to creating a society in which all people feel safe and valued, and to put an end to such negative experiences through practical and positive action informed by consultation with the LGBTIQ communities. The strategy reflects this spirit of listening and practical action, and has been developed in partnership with community members to address the issues they face. The priorities identified in the strategy are: social and emotional health and wellbeing; employment and opportunities; education and awareness; inclusive service delivery and engagement.

The strategy is to be used by State Government departments to identify and develop appropriate responses to the needs of LGBTIQ South Australians.

I thank members of the LGBTIQ communities who have contributed to the development of this important strategy and look forward to an ongoing and productive partnership.







# 1. Introduction

## 1.1 Vision Statement

The State Government's vision is for a South Australia where the presence and contributions of Lesbian, Gay, Bisexual, Transgender, Intersex and Queer people are welcomed and celebrated and where their ability to participate fully in all aspects of social and economic life, free from discrimination and prejudice, is maximised.

## 1.2 Background

The State Government is committed to building a socially inclusive community that values all of its citizens, encourages their participation in every aspect of community life and builds their confidence and capacity.

On 24 August 2012, in recognition of the levels of social exclusion experienced by those in the Lesbian, Gay, Bisexual, Transgender Intersex and Queer (LGBTIQ) communities, the State Government announced that it would develop a South Australian LGBTIQ Inclusion Strategy.

The development of the *South Australian Strategy for the Inclusion of Lesbian, Gay, Bisexual, Transgender, Intersex and Queer People 2014-2016* (LGBTIQ Inclusion Strategy) was led by the Department for Communities and Social Inclusion (DCSI) in partnership with the LGBTIQ communities.

From 24 August - 21 September 2012, the online *South Australian Rainbow Survey* was conducted seeking the views of the LGBTIQ communities on the LGBTIQ Inclusion Strategy. It was promoted widely using posters, postcards, the internet, magazines and newspapers. The results provided valuable insights and assisted the Rainbow Advisory Council and the South Australian Government to determine priority actions for the strategy.

In February 2013, the Rainbow Advisory Council was established in order to:

- inform the development of the LGBTIQ Inclusion Strategy
- provide advice to State Government agencies regarding policies, programs, services and processes, in order to assist them to create and embed LGBTIQ inclusion strategies in their business
- provide advice and recommendations to the Chief Executive of DCSI on current and emerging issues affecting LGBTIQ people.

LGBTIQ community forums were held in Port Lincoln, Port Augusta, Mount Gambier, Salisbury, Noarlunga and the Adelaide Central Business District. The forums provided an opportunity for LGBTIQ people to provide advice on what was important to them and the content of an LGBTIQ Inclusion Strategy.

In November 2013, a phone-in was held to solicit the views of LGBTIQ South Australians about the five priority areas for the strategy identified by the RAC and in previous consultations. The RAC also held a forum entitled *What does Social Inclusion mean to you?* during the 2013 Feast Festival<sup>1</sup>. DCSI facilitated opportunities for members of the transgender community, Aboriginal and Torres Strait Islander communities, and LGBTIQ people from culturally and linguistically diverse backgrounds to express their points of view.

While attempts have been made to solicit the views of Intersex people in South Australia, it must be noted that by and large their voices have been silent. The State Government recognises this and will continue to seek their views and ideas as the LGBTIQ Inclusion Strategy evolves over coming years.

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<sup>1</sup> The Feast Festival is a major Festival on South Australia's arts calendar that celebrates the cultural diversity in the Queer community and is held in November of each year.

### 1.3 Terminology<sup>2</sup>

Definitions and the terms used to describe sexual orientation, sex and gender identity are often disputed and can be the subject of strong views by members of LGBTIQ communities and others. The meanings of particular words can also be interpreted differently depending on the time, context and culture in which they are used.

While there is no perfect solution, the acronym LGBTIQ is used throughout this document in an effort to be as inclusive as possible of the diverse sex, sexuality and gender identities represented in the South Australian community.

**Bisexual:** A person who is sexually and emotionally attracted to men and women.

**Coming out:** The process through which a LGBTIQ person comes to recognise and acknowledge, both to self and to others, his or her sexual orientation, gender identity or intersex status.

**Gay:** A person whose primary emotional and sexual attraction is toward people of the same sex. The term is most commonly applied to men, although some women use this term.

**Gender identity:** A person's sense of identity defined in relation to the categories male and female. Some people may identify as both male and female, while others may identify as male in one setting and female in other. Others identify as androgynous or intersex without identifying as female or male.

**Gender questioning:** Refers to the process whereby an individual comes to question the usefulness or validity of their current biological sex and/or assigned gender. This includes people who see the binary categories of male and female/masculine and feminine as meaningless or unduly restrictive, and those who feel that their gender does not align with the sex assigned to them at birth.

**Homophobia:** The fear and hatred of lesbians, gay men, bisexual people and of their sexual desires and practices.

**Intersex:** The presence of intermediate or atypical combinations of physical features that are usually seen to distinguish female from male. This may include variations in chromosomes, hormones, reproductive organs, genitals and other bodily features. Many dislike the term 'condition' as pathologising, preferring to see intersex differences as naturally occurring human variations. The term 'disorders of sex development' (DSD) is not generally favoured; nor is the term 'hermaphrodite', which has sometimes been inappropriately used to describe intersex people.

**Lesbian:** A woman whose primary emotional and sexual attraction is toward other women.

**Queer:** An umbrella term that includes a range of alternative sexual and gender identities, including gay, lesbian, bisexual and transgender.

<sup>2</sup> These definitions have been sourced from the following publications:

Australian Human Rights Commission, *Addressing Sexual Orientation and Sex and /or Gender Identity Discrimination*, Consultation Report, 2011, p.6 Australian Government, *National Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Ageing and Aged Care Strategy*, Department of Health and Ageing, 2012, p18.

C Barrett & K Stephens, *Beyond: 'We treat everyone the same'* A report on the 2010 – 2011 program: *How2 create a gay*,

*lesbian, bisexual, transgender and intersex inclusive service*, Gay and Lesbian Health, Victoria, 2012,p6.

L T Hillier et al, *Writing themselves in 3, the third national study on the sexual health and wellbeing of same sex attracted and gender questioning young people*, Australian Research Centre in Sex, Health and Society, La Trobe University, 2010 pp.vii and vii.

W D Leonard et al., 2010, *'Beyond Homophobia meeting the needs of same sex attracted and gender questioning young people in Victoria'*. A Policy Blueprint, Australian Research Centre for Health Sex and Society pp. I and ii.



**Sex:** The term ‘sex’ refers to a person’s biological characteristics. A person’s sex is usually described as being male or female. Some people may not be exclusively male or female (the term ‘intersex’ is explained earlier). Some people identify as neither male nor female.

**Sexual orientation:** The self-concept, direction of interest, or emotional, romantic and sexual, attraction toward others.

**Transgender:** A person who does not identify with their gender of upbringing. The terms male- to-female and female to-male are used to refer to individuals who are undergoing or have undergone a process of gender affirmation (see transsexual). ‘Transgender’ can also be used as an umbrella term that can incorporate a multitude of people including transsexual and androgynous people, or those who identify as a cross dresser.

**Transphobia:** Fear and hatred of people who are transgender that often leads to discriminatory behavior or abuse.

**Transsexual:** A person, who is making, intends to make, or has made the transition to the gender with which they identify.

**“The existence of LGBTIQ Australians is often ignored in terms of data collection and monitoring processes.”**

## 1.4 Why do we need an LGBTIQ Inclusion Strategy?

Results of the South Australian Rainbow Survey, conducted by DCSI during August and September 2012, found that 80% of respondents identified stigma and discrimination as major barriers to their participation in the wider community and 51.5% identified feeling unsafe. Over 90% of respondents to the survey identified freedom from discrimination, feeling safe, and freedom from bullying and harassment as issues of importance to them<sup>3</sup>.

The existence of LGBTIQ Australians is often ignored in terms of data collection and monitoring processes. For example, while counts of same-sex couples living together in the same household have been compiled by the Australian Bureau of Statistics since 1996, it does not collect information regarding the sexuality or gender identity of individuals who are not in a relationship. A significant proportion of national population research provides no opportunity for individuals to identify diverse sex, sexual orientation, or gender identity.

While there are no definitive figures on the size of the LGBTIQ population, it is estimated to range from 2% to 11% of the Australian population<sup>4</sup>. Recent international estimates suggest that between 1 in 500 and 1 in 11,500 people identify as transgender<sup>5</sup> and it is estimated that between 1 in 200 and 1 in 500 people are born with physical variations that meet the definition for various intersex conditions.

<sup>3</sup> Department for Communities and Social Inclusion, *South Australian Rainbow Survey*, 2012, p.9

<sup>4</sup> Australian Government, *National Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Ageing and Aged Care Strategy*, Department of Health and Ageing, 2012, p.4 and G Rosenstreich, *LGBTI People Mental Health and Suicide*, Briefing Paper, National LGBTI Health Alliance, 2011, p. 3.

<sup>5</sup> Rosenstreich, *ibid.* p.2.

LGBTIQ people are part of all population groups, including those living in rural, regional and remote areas, Aboriginal and Torres Strait Islander people, people with disability and those from culturally and linguistically diverse backgrounds. They are also represented across all age groups and in families across the state. In the 2011 Census, 1,929 same sex couples were recorded as resident in South Australia<sup>6</sup>. Same sex couples, both in numbers and as a proportion of all couples, have increased in every Census since 1996, when first recorded. While generally speaking, same sex couples are less likely to have children compared to opposite sex couples, Australia-wide, 22% of female same sex couples and 2.9% of male same sex couples reported having one or more children<sup>7</sup>. It is important to note that these figures may underestimate the number of same sex couples, given that not all same sex couples are willing to identify as such.

It is necessary to consider the needs of LGBTIQ people as distinct individuals, while also considering the diversity within the groups to which they belong. For example, the concerns and needs of lesbian women may be quite different from those of Aboriginal gay men or transgender women.

Research conducted in Victoria in 2006 describes the concept of ‘multiple identity’ which recognises that a person’s life experience is characterised by overlapping memberships of multiple social groups<sup>8</sup>. This can result in an individual experiencing multiple disadvantages, reducing the likelihood of social inclusion and equality. Multiple identity can also result in a mix of advantaged and disadvantaged experiences. The experience of someone who identifies as a gay man with disability can be more complex than a person who identifies as a gay man from the dominant culture. There is very little Australian research into the effect of what has been described as ‘being a minority within a minority’.

Research in the United Kingdom has found that lesbians and bisexual women who have a disability were twice as likely to have attempted to take their own life and are more likely to have deliberately harmed themselves than lesbians and bisexual women without a disability<sup>9</sup>.

Similarly, research also conducted in the United Kingdom confirmed that people who have experienced discrimination because of their race are reluctant to disclose their sexual orientation as it generates another layer of discriminatory behaviour for them to deal with in their lives<sup>10</sup>.

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<sup>6</sup> Australian Bureau of Statistics, *Same-sex couple families, Reflecting a Nation Stories from the 2011 census* retrieved 22 October 2013, <http://bit.ly/1g6MReq>.

<sup>7</sup> National Centre for Social and Economic Modeling, ‘*The Changing Shape of Australian Families, Income and Wealth Report*’, Issue 34, October 2013.

<sup>8</sup> R Mann, et al, ‘*Swimming Upstream: Making Places Welcoming, A Report on the Needs of Gay, Lesbian and Bisexual People in ‘Hard to Reach’ Groups*’, Australian Research Centre in Sex, Health and Society, La Trobe University, Melbourne, 2006,p5.

<sup>9</sup> *Disability; Stonewall Health Briefing*, November 2012, p5 viewed at <http://www.healthylives.stonewall.org.uk/lgb-health/briefings/default.aspx> on 16 August 2013.

<sup>10</sup> A Guasp & H Kibirige, *One minority at a time – being black and gay*, interviews by Runnymede, 2012, p5.

**“Despite significant legal progress, there is a lot of evidence that people who identify as LGBTIQ are still subjected to many forms of stigma, discrimination and exclusion.”**

## 1.5 What does exclusion look like for LGBTIQ people?

Stigma and exclusion have been recurring themes in the history of LGBTIQ communities. In Australia, until the 1860s, sex between men (or sodomy as it was known) was a criminal act punishable by death as it was considered unnatural and evil. In the 19th century, the punishment for male homosexuality was reduced but the scope for conviction widened to include any type of sexual contact between men. There was no acknowledgement at this time of the existence of lesbians, bisexuals, transgender and intersex people and therefore no laws that prohibited their sexual activities.

There are many definitions and examples of 'social inclusion'. Most of these suggest that to be socially included, opportunities must be available to secure employment, access services and connect with others in our lives, through family, friends, work, personal interests and our local community. Being socially included improves the capability of an individual to deal with personal challenges such as ill health, the loss of a job, or bereavement and have their voice heard when decisions are made about issues that affect their lives<sup>11</sup>.

While social inclusion is most often linked with economic opportunity, it also has political, social and cultural dimensions. In other words, social exclusion can occur not only as a result of poverty but because of a combination of factors including a denial of rights, goods and services and an inability to participate in the relationships and activities available to the majority of people in society<sup>12</sup>. A society cannot be considered to be inclusive unless the majority are aware of LGBTIQ issues and are inclusive of LGBTIQ people.

Despite significant legal progress, there is a lot of evidence that people who identify as LGBTIQ are still subjected to many forms of stigma, discrimination and exclusion.



<sup>11</sup> J Gillard, Federal government social inclusion agenda, *Impact*, Autumn, 2008, pp. 12 – 15.

<sup>12</sup> Z Morrison, *On dignity social inclusion and the politics of recognition*, Social Policy Working Paper No. 12, the Centre for Public Policy, Brotherhood of St Laurence, 2010.



## Health Impacts

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The World Health Organisation's social determinants of health framework identifies social exclusion as a contributing factor to poor health outcomes. It is not surprising therefore that significant evidence exists to suggest that the discrimination and violence experienced as a result of a person's sex, sexuality or gender identity have a detrimental affect on their physical and mental health<sup>13</sup>.

As with other population groups, there are patterns of health and illness more common in LGBTIQ communities than others. For example, specific cancers and sexually transmitted infections in the case of gay men; cervical and ovarian cancers in the case of lesbians; and in the case of transgendered people, issues relating to hormone therapy and surgical intervention<sup>14</sup>.

Older LGBTIQ people may delay seeking care when required, resulting in poorer health outcomes, due to a history of discrimination. 'The growing numbers of lesbian, gay, bisexual, transgender and intersex people accessing aged care services represents an emerging and potentially challenging area for aged care service providers'<sup>15</sup>. They may also hide their sexual identity due to fear of discrimination and sub-standard care, if staff are made aware of their sexuality and/or gender identity<sup>16</sup>.

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<sup>13</sup> G Rosenstreich, J Comfort & P Martin, 'Primary health care and equity: the case of lesbian, gay, bisexual, trans and intersex Australians', *Australian Journal of Primary Health* Vol 17 2011, pp. 302 – 308.

<sup>14</sup> N J Mule et al, 'Promoting LGBT health and wellbeing through inclusive policy development', *International Journal for Equity in Health*, 2009, p.4.

<sup>15</sup> Australian Government, *ibid.*, p.3.

<sup>16</sup> M Hughes, 2008, 'Imagined futures and communities: older lesbian and gay people's narratives on health and aged care', *Journal of Gay & Lesbian Social Services*, vol. 20, no. 1/2, pp. 167-186.



The second *National Survey of the Health and Wellbeing of Gay, Lesbian, Bisexual, and Transgender (GLBT) Australians Private Lives 2 (PL2)* found that the general health of males in the sample was lower than the national average but the health of females was lower still. The lowest levels of general health were seen in transgender males and females<sup>17</sup>. PL2 also revealed inferior mental health outcomes for gay, lesbian, bisexual and transgender people compared to the general population; with transgender males and females reporting poorer mental health than bisexuals and those who were same sex attracted<sup>18</sup>. PL2 noted that, compared to the general population; gay, lesbian, bisexual and transgender people are at increased risk of a range of mental health problems, including depression, anxiety disorders, self-harm and suicide<sup>19</sup>. In fact, the National Lesbian, Gay, Bisexual, Transgender, Intersex Health Alliance notes that LGBTIQ people have the highest rates of suicide and suicidal ideation of any group in Australia<sup>20</sup>. This figure may also be exacerbated by membership of more than one marginalised group.

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<sup>17</sup> W M Leonard et al, *Private lives 2, The second national survey of the health and wellbeing of gay, lesbian, bisexual and transgender (GLBT) Australians*, Australian Research Centre in Sex Health and Society 2012 p. vi.

<sup>18</sup> *Ibid.*, p. vi.

<sup>19</sup> *Ibid.*, pp 27-29,35.

<sup>20</sup> Rosenstreich , *loc. cit.*





## Young People

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Young people can be particularly vulnerable. The 2010 national report *Writing Themselves in 3*, indicated that 61% of young LGBTIQ and gender questioning young Australians reported verbal abuse because of homophobia, 18% reported physical abuse and 26% reported 'other' forms of homophobia<sup>21</sup>. This research also identified strong links between homophobic abuse and feeling unsafe, excessive drug use, self harm and attempts at suicide.

It is worth noting the importance of the school environment, expressed by the young people who participated in the research project *Writing Themselves In 3*:

- 40% of participants wanted sex education to be more inclusive of same sex attraction and gender diversity
- 19% described the need for initiatives such as queer/straight alliances, support workers or non-homophobic counselling staff
- 12% wanted their school to simply become aware that same sex attracted and gender diverse people exist and form part of the community
- 11% called for schools to enforce disciplinary procedures that punish homophobic verbal abuse, physical abuse and other kinds of bullying<sup>22</sup>.

Australian research indicates that homophobic and transphobic abuse and discrimination can not only have adverse health outcomes on young people, but increase the likelihood of social exclusion and isolation, as well as limiting their ability to form social, personal and intimate relationships<sup>23</sup>. Young people who are same sex attracted or gender questioning are also at increased risk of attempting suicide, contracting sexually transmitted infections and using illicit drugs due to the discrimination and vilification they are subjected to because of their sexuality or gender identity.

## Employment

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The 1999 report, *The Pink Ceiling is too Low*, produced by the University of Sydney indicated that 59% of LGBTIQ workers surveyed had experienced homophobia or transphobia in the workplace<sup>24</sup>.

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<sup>21</sup> Hillier, op.cit. p. xi 22 *ibid.*, pp. 88 – 89 .

<sup>23</sup> W M Leonard et al, *Beyond Homophobia* *ibid.*, p.4

<sup>24</sup> J Irwin, *The Pink Ceiling is Too Low: Workplace Experiences of Lesbians, Gay Men and Transgender People*, Australian Centre for Lesbian and Gay Research, University of Sydney, Sydney, p.28 as cited at <http://www.lgbthealth.org.au/violence> on 13 September 2013.

## Harassment and Violence

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Stigma, discrimination and exclusion can range from subtle or implied disapproval to incidents of serious harassment, verbal abuse, violence and homicide<sup>25</sup>. The report, *You shouldn't have to hide to be safe*, produced by the NSW Attorney General's Department in 2003, found that 56% of gay men and lesbians had experienced one or more forms of homophobia including abuse, harassment or violence during a twelve month period and 85% had experienced homophobic behaviours during their lifetime<sup>26</sup>.

While discrimination, violence and aggression directed toward LGBTIQ people can occur in a variety of settings, the same study identified the two most common locations as the street, or near their home. It found that the three types of abuse most commonly experienced were verbal abuse, harassment, and threatened or attempted physical attack/assault<sup>27</sup>. In regards to reporting incidents of serious crime, harassment, abuse and/or violence, a report of a survey of the experiences of lesbian and gay men with the South Australian Police conducted in 1993 highlighted three principal points. These were: non-contact with police by victims of crime; the poor image of SA Police held by many respondents; and homophobic behaviour by some police<sup>28</sup>.

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<sup>25</sup> S Tomsen & K Markwell, *When the glitter settles: safety and hostility at and around gay and lesbian public events*, Australian Institute of Criminology (AIC), AIC Research and Public Policy Series, 2009, p.100.

<sup>26</sup> NSW Attorney General's Department, *You Shouldn't Have to Hide to Be Safe: A Report on Homophobic Hostilities and Violence Against Gay Men and Lesbians in NSW*, Sydney, p i 2003.

<sup>27</sup> *ibid.*

<sup>28</sup> B Baird, K Mason & I Purcell, *The Police & You, A Survey of Lesbians and Gay Men in South Australia*, Lesbian & Gay Community Action, Adelaide, 1994.

## Homelessness

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Research released in June 2013 by the University of Adelaide noted that LGBTIQ people are also over represented in homeless populations<sup>29</sup>. This correlated with work carried out in the United Kingdom and the United States of America<sup>30</sup>. They concluded that they are more likely to experience a higher incidence of negative outcomes associated with homelessness and that homophobia and transphobia are commonly experienced in accommodation services.

While sexuality and gender identity may not be direct causes of homelessness among LGBTIQ young people, family conflict and homophobic and/or transphobic violence experienced in settings outside of the home can play a direct or indirect role in the decision of a young person to leave home<sup>31</sup>.

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<sup>29</sup> S Oakley & A Bletsas, *Understanding the circumstances and experiences of young lesbian, gay, bisexual, transgender, intersex and gender questioning people who are homeless in Australia: a scoping study*, University of Adelaide, 2013 p. 17.

<sup>30</sup> *ibid.*

<sup>31</sup> *ibid.*, p.19.



## 1.6 Gains on the legal front

The 1970s saw the rise of the gay liberation movement in Australia and the beginning of organised activism which has contributed to significant law reform over the past thirty years. The ensuing debate has also facilitated greater recognition by the general population of the diversity of LGBTIQ people and the circumstances experienced by them.

This sub-section provides a snapshot of major legal and policy reforms from the 1970s to the present that relate to LGBTIQ people. The information provided below in no way constitutes legal advice.

### 1970s

- **1975:** South Australia was the first state to decriminalise sexual conduct between males.

### 1980s

- **1986:** The Human Rights and Equal Opportunity Commission (now the Australian Human Rights Commission) is established and empowered to investigate complaints of discrimination in employment and occupation on various grounds, including sexual preference.
- **1988:** *The Sexual Reassignment Act 1988* (South Australia) came into effect.

### 1990s

- **1990:** The World Health Organisation removed homosexuality from its International Classification of Diseases.
- **1992:** Gay and Lesbian people allowed to openly serve in the military.
- **1997:** Tasmania became the last place in Australia to decriminalise same-sex sexual activity between men.

### 2000s

- **2006:** *The Statutes Amendment (Domestic Partners) Act 2006* amended 97 Acts, dispensing with the term 'de facto' and categorising couples as 'domestic partners'. This meant same-sex couples who lived together were now covered by the same laws. Same-sex couples may make a written agreement called a Domestic Partnership Agreement about their living arrangements. This may be prepared at any time and is legal from the time it is made, but people must meet other requirements, such as joint commitments, before being recognised as domestic partners.
- **2007:** The Australian Human Rights and Equal Opportunity Commission released its *Same-Sex, Same Entitlements Report* on financial and workplace discrimination against same-sex couples. It was the first national inquiry and consultation directly on the issue of same-sex equality.
- **2008:** Based on Human Rights and Equal Opportunity Commission's 2007 report recommendations, the Federal Government changed 85 different laws so that same-sex couples were recognised as having many of the same rights and obligations as different-sex de-facto couples. The reforms eliminate discrimination against same-sex couples and their children in a wide range of areas, including social security, taxation, Medicare, veterans' affairs, workers' compensation, educational assistance, superannuation, family law and child support.
- **2009:** *The Fair Work Act 2009* (Commonwealth) was enacted prohibiting discrimination on the basis of 'sexual preference' in relation to all aspects of employment, although it does not prohibit discrimination on the basis of gender identity.

- **2009:** *The Equal Opportunity Act 1984* was amended to reflect more closely Commonwealth statutes of a similar nature. The amendments made it unlawful for people to be discriminated against on the grounds of their sexuality or chosen gender. These amendments included repealing laws that allowed discrimination on the basis of sexuality or gender identity when joining a club or association, entering a small business partnership, or as an employee, prospective employee, customer or client. The amendments also removed exemptions for religious-based service providers, such as hospitals and aged care, to discriminate in employment, based on a person's sexuality or marital status. However, exemptions still allow faith-based schools to refuse employment on the basis of a person's sexuality or chosen gender where this is relevant to the school's religious beliefs<sup>32</sup>, although they are prohibited from discriminating against students on the same basis.
- **2009:** The Human Rights and Equal Opportunity Commission released the *Sex Files: the legal recognition of sex in documents and government records* report, highlighting the difficulty many sex and gender diverse people experience in changing sex markers in official documents, for example birth certificates.

<sup>32</sup> *Equal Opportunity Changes 2009*, South Australian Equal Opportunity Commission, viewed at <http://www.eoc.sa.gov.au/sites/eoc.sa.gov.au/files/attachments/Summary%20of%20Equal%20Opportunity%20Changes%202009.doc> on 25 September 2013

## 2010 onwards

- **2010:** *The Family Relationships Act 1978* was amended to allow de facto lesbian partners with a child conceived by assisted reproductive technology to register as co-parents on their child's birth certificate.
- **2011:** *The Statutes Amendment (De Facto Relationships) Bill 2011* that recognises same sex couples in asset forfeiture, property and stamp duty became law.
- **2011:** The Australian Human Rights Commission released its consultation report, *Addressing sexual orientation and sex and/or gender identity discrimination*, which provides evidence and support for strengthening human rights for LGBTIQ Australians.
- **2011:** The Foreign Minister and Federal Attorney-General announced new guidelines under which sex reassignment surgery will no longer be a prerequisite for issuing a passport in a person's preferred gender. This makes it easier for transgender, genderqueer, and other gender-variant people to obtain a passport that reflects their gender identity and physical appearance.
- **2013:** The Australian Government Guidelines on the recognition of sex and gender were released. The Guidelines standardise the evidence required for a person to establish or change their sex and gender in personal information held by Commonwealth Government departments and agencies.
- **2013:** *The Sex Discrimination Act 1984 (Cth)*, now makes it unlawful to discriminate against a person on the basis of sexual orientation, gender identity and intersex status.

In South Australia it is still not legally possible for same sex couples to adopt children, for fertile lesbian women to access assisted reproductive technology, or for same sex couples to marry.



## 2. South Australian Strategy for the Inclusion of LGBTIQ people

The development of the South Australian Strategy for the Inclusion of LGBTIQ people recognises that sex, sexual orientation, and gender identity are integral to every person's sense of dignity and wellbeing and should not be the basis for any form of discrimination or abuse. The strategy provides an overarching strategic approach to identifying and addressing a range of issues specific to LGBTIQ South Australians.

The South Australian Strategy for the Inclusion of LGBTIQ people will require both a whole-of-government and individual department commitment and response. It can be used by departments to develop and implement action plans, relevant to their portfolio responsibilities, which address LGBTIQ exclusion.

While it focuses on the State Government in the first instance, the ideas, strategies and tools contained in it can also be applied across local government and the community and private sectors.

The South Australian Strategy for the Inclusion of LGBTIQ people will be in place from 2014 to 2016. It will then be evaluated to determine its effectiveness.

A companion to this document entitled *Including You: A Practical Guide to Engaging With Lesbian, Gay, Bisexual, Transgender, Intersex and Queer (LGBTIQ) Communities and Developing LGBTIQ Inclusive Services*, has been produced to provide practical information and ideas about engaging with and understanding the needs of LGBTIQ South Australians.

### 2.1 Priority Areas for Action

The South Australian LGBTIQ community is diverse and has varying needs that require differing responses. Consultation with LGBTIQ communities has resulted in the identification of the following five priority areas for action:

- Social and Emotional Health and Wellbeing
- Employment and Opportunities
- Awareness and Education
- Inclusive Service Delivery
- Engagement with LGBTIQ Communities.

The five key priority areas encompass a wide range of issues which can affect LGBTIQ people and their respective communities. The following pages provide a summary of the priority areas with their key objectives and criteria.

## 3. Social and Emotional Health and Wellbeing

The State Government has committed to providing a safe and welcoming environment in which people can live active and healthy lives and feel part of their community<sup>33</sup>, and every effort must be made to ensure this commitment includes LGBTIQ South Australians.

While many LGBTIQ people lead safe, healthy, active lives, others experience marginalisation, stigma, discrimination and social exclusion, leading to negative health and wellbeing outcomes. Reducing health disparities and promoting efforts to improve LGBTIQ health are necessary to ensure that all LGBTIQ people have the opportunity to lead healthy and prosperous lives.

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<sup>33</sup> *South Australia's Strategic Plan, Seven Strategic Priorities, Safe communities, healthy neighbourhoods* viewed at <http://www.priorities.sa.gov.au/content/safe-communities-healthy-neighbourhoods> on 15 October 2013.

The social determinants of health framework, developed by the World Health Organisation, recognises the significant effect on physical and mental health of the circumstances in which people are born, grow up, live, work and age<sup>34</sup>. Influences such as their level of education, culture, income, early childhood development, housing and social connections all contribute to their health.

It is essential to engage with the LGBTIQ community when developing policies and services in order to identify the range of issues which impact on them and to ensure the responses are appropriate.

Evidence shows that LGBTIQ people can be subjected to homophobic and transphobic abuse and/or violence as a result of their sex, sexuality or gender identity. It is important that effective reporting mechanisms are in place to support LGBTIQ victims of crime. In addition, police need to be provided with appropriate training and education regarding issues which impact on LGBTIQ people.

Health care promotion provides proactive opportunities to increase healthy lifestyle choices and can lead to increased health and wellbeing and a decrease in overall health care costs<sup>35</sup>. Currently LGBTIQ people are not included in health care promotion but including them is necessary to ensure that they are encouraged, like other South Australians, to make healthy lifestyle choices and seek diagnosis and treatment when necessary.

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<sup>34</sup> World Health Organisation, 'What are social determinates of health?' viewed at [http://www.who.int/social\\_determinants/thecommission/finalreport/key\\_concepts/en/index.html](http://www.who.int/social_determinants/thecommission/finalreport/key_concepts/en/index.html) on 11 October 2013.

<sup>35</sup> M C Dursi, *Can Health Promotion Programs Effectively Reduce Health Care Costs, Increase Productivity And Retain Qualified Employees?* University of Rhode Island, 2008 p.3.

### 3.1 Key Objectives

LGBTIQ South Australians:

- lead safe, healthy, active lives
- have their priority health and safety issues identified and addressed
- have access to inclusive, comprehensive, high-quality health care services.

### 3.2 Key Criteria

- Health services:
  - have key policies, strategies and initiatives that ensure the diverse health needs and circumstances of LGBTIQ South Australians are taken into consideration
  - include LGBTIQ people and their families in health care promotion
  - have appropriate mechanisms to actively consult with LGBTIQ people on relevant health issues.
- There are appropriate strategies in place to reduce crime directed at LGBTIQ people as a result of their sex, sexuality or gender identity.



## 4. Employment and Opportunities

Increasing work opportunities for LGBTIQ people can lead to increased health and wellbeing, economic status and opportunities for community participation and to increased productivity for the community as a whole.

LGBTIQ people can experience discrimination, homophobia and transphobia in a range of settings, including the workplace. Workplaces must strive to be fair, inclusive, supportive, and to value the contribution of all employees including those with diverse sex, sexuality or gender identities.

Workforce participation of LGBTIQ people in the state public sector has a number of distinct advantages, including providing the State Government with exposure to a broader range of ideas and insights and a closer connection with the diverse clients we serve. LGBTIQ people report positive experiences, including feeling safe, when the workplace culture promotes diversity and their contribution as employees and colleagues is acknowledged and valued<sup>36</sup>.

While mechanisms are in place to collect, analyse and report on diversity within the public sector, there is no formal collection of data to determine the number of LGBTIQ people. Relevant and effective workforce data collection can be used to address issues, measure progress and maximise opportunities.

Attention to these issues can create a more efficient and effective public sector by increasing productivity and reducing stress and absenteeism. It can also minimise unnecessary resignations which can result in the loss of valuable skills<sup>37</sup> and additional recruitment costs.



### 4.1 Key Objectives

- Fair and inclusive government workplaces that increase opportunities for full participation in paid and unpaid work
- A State Government workforce that is representative of the diversity contained in the South Australian community.

### 4.2 Key Criteria

- State Government departments:
  - have attraction, recruitment and retention strategies that are inclusive of LGBTIQ people
  - have mechanisms in place to increase the sensitivity to and awareness of homophobia and transphobia in the workplace and the consequences of this behaviour
  - acknowledge the discrimination that can be experienced by LGBTIQ employees because of their sex, sexuality and gender identity in anti-discrimination, harassment and bullying policies
  - have mechanisms to include LGBTIQ information in workforce data collections.

<sup>36</sup> Irwin, op.cit., p7.

<sup>37</sup> C Burns, KC Graham & S Menefee-Libey, 2012, *Gay and Transgender Discrimination in the Public Sector – Why It's a problem for State and Local Governments*, Centre for American Progress, p8.



## 5. Awareness and Education

One of the State Government's seven strategic priorities emphasises the importance of safe, welcoming neighborhoods in which people can live active and healthy lives and feel part of their community.

LGBTIQ people contribute significantly to the civil, economic and political life of the state. They exist in all of South Australia's geographic communities, are employed in all industry sectors and are represented amongst our poorest to our most affluent citizens. However, LGBTIQ people are often 'invisible' members of the community. There is little acknowledgement or awareness of LGBTIQ people in the wider South Australian community or references to their existence in government priorities, plans and publications.

This 'invisibility' or lack of recognition contributes to the social exclusion of LGBTIQ people and communities and can be conceptualised in two ways. Firstly, it involves issues of individual identity and sense of self. Visibility or recognition is not just about courtesy and politeness but has been described as a 'vital human need'. Secondly, misrecognition is characterised by a degrading of cultural value, treating some as less than full members of the society and preventing them from participating with others in the community as peers<sup>38</sup>. For some, this exclusion contributes to their isolation. People who are repeatedly stigmatised, degraded or insulted internalise this negativity which can lead to crippling self hatred.

As a significant service provider and the largest employer in South Australia, the state public sector is well placed to be proactive, lead by example and influence and shape positive community attitudes and understanding about LGBTIQ identity.

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<sup>38</sup> Z Morrison, *On dignity social inclusion and the politics of recognition*, Centre for public policy, Brotherhood of St Laurence, June 2010, p.9-10

The education system plays a pivotal role in a child's cognitive development and an individual's progression from childhood through to adulthood. Schools have a responsibility to ensure that all students receive a quality education in a safe environment, free from bullying and harassment. However, ample evidence suggests that schools can be a place where young people experience homophobic and transphobic abuse because of their sexuality and/or gender identity.

The inclusion of an LGBTIQ perspective in relevant parts of school life would reduce the level of invisibility experienced by this community and over time, increase the awareness and understanding in the general population about LGBTIQ people, their concerns and circumstances. It would also contribute to positive acknowledgment of LGBTIQ students and staff.

### 5.1 Key Objectives

- The contribution of LGBTIQ South Australians to the civil, economic and political life of the state is recognised and celebrated
- The strength and diversity of the LGBTIQ communities in South Australia is acknowledged and valued by all.

### 5.2 Key Criteria

- State Government Departments:
  - include LGBTIQ people in advertising and promotional campaigns
  - promote LGBTIQ events and important dates of interest to the LGBTIQ community across the state public sector and broader South Australian community.
- Education services:
  - have school-based activities that appropriately profile LGBTIQ topics throughout a child's learning
  - have mechanisms in place to reduce and eliminate homophobia and transphobia in schools
  - have teachers who are appropriately trained regarding LGBTIQ issues.



## 6. Inclusive Service Delivery

South Australians rely on the State Government to provide services, many of which impact significantly on their daily lives. For this reason it is important that services are delivered in a way that makes them accessible to everyone in our community.

LGBTIQ people experience barriers to accessing services due to a range of factors. These include past experiences of discrimination and negative attitudes from service providers. An individual's level of self acceptance with issues of sexuality or gender identity, social isolation, and the levels of homophobia and transphobia in the broader community will also affect their willingness to approach a service for assistance.

A LGBTIQ inclusive service exhibits attitudes and behaviors that are respectful of LGBTIQ people. The service ensures staff are equipped with an understanding of the differing impacts that diverse sexual orientation and gender identity might have on the life of a citizen. It includes LGBTIQ communities in promotional material.

It is also important that service providers do not make an assumption that all people accessing their service are heterosexual, so that when developing policy and planning services, services consider the views of LGBTIQ South Australians by engaging with LGBTIQ communities. When there is a need to refer someone to a more appropriate service, it is important that they are aware of the location of LGBTIQ specific services as well as mainstream services that are LGBTIQ sensitive.

*'It's not about the service as such but about the whole organisational culture - from the governance structure to the service interface. It is not just about being sensitive but about being affirming, and actively trying to support rather than just passively trying not to discriminate.'*

Mann et al., 2006 p45<sup>39</sup>

Cultural competence or awareness involves a sensitivity and responsiveness to the beliefs, values and practices of different groups or populations. The term is usually applied to different racial, ethnic and religious groups. However, more recently it has been extended to include LGBTIQ communities whose sexual and gender identities are associated with their own beliefs, values and practices.

There are many ways that service providers can improve the LGBTIQ cultural competency of their workforce. Training and education can take place in a number of ways and at various times during an individual's employment. In the first instance, the induction process provides an ideal time to ensure staff are aware of the legal requirements contained in legislation such as the *South Australian Equal Opportunity Act 1984* and the *Sex Discrimination Act 1984 (Cth)*. It can also offer the opportunity to introduce the importance of using inclusive and non-discriminatory language when referring to LGBTIQ clients.

A companion document to this strategy entitled *Including You: A Practical Guide to Engaging with Lesbian, Gay, Bisexual, Transgender, Intersex, Queer Communities and Developing LGBTIQ Inclusive Services* has been produced by the State Government. This provides practical information and ideas about developing inclusive services.

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<sup>39</sup> Mann, *ibid.*, p 45

## 6.1 Key Objectives

- State Government services are accessible to, and inclusive of, LGBTIQ communities in South Australia
- The State Government workforce is sensitive and aware of the needs of LGBTIQ South Australians and provides culturally competent services.

## 6.2 Key Criteria

- State Government departments implement the LGBTIQ Inclusion Strategy and use the guidelines, standards and training tools developed to improve inclusive service delivery
- On behalf of the State Government, the Department for Communities and Social Inclusion:
  - develops and distributes the *Including You* publication designed to provide State Government and others with practical tips, tools and advice on how to improve service delivery to, and engagement with, LGBTIQ South Australians
  - identifies and leads the development of guidelines and standards for service provision to the LGBTIQ community that address the issues of accessibility, inclusion, responsiveness, respect and consumer participation
  - identifies and leads the development of LGBTIQ awareness raising and training tools for use in State Government departments
  - promotes and distributes such guidelines, standards and training tools across State Government and, where possible, in the Local Government, non-government and private sectors.

# 7. Engagement with LGBTIQ Communities

While the development of the LGBTIQ Inclusion Strategy has involved various forms of engagement, it is important that State Government continue the dialogue with LGBTIQ communities and stakeholders during the implementation of the LGBTIQ Inclusion Strategy and beyond.

Engagement is the practice of actively bringing community voices into decisions that affect or interest them<sup>40</sup>. It can include a range of approaches, ranging from one-way communication or informing, through to consultation and involvement. It can also entail collaboration in decision-making, and/or empowered action, which aims to place final decision-making in the hands of the public.

The State Government has committed to six community engagement principles, which provide an important guide to high quality engagement between State Government and the community.

In summary, the purpose of the engagement process and the target group must be clearly identified. Successful engagement also requires a thorough understanding of the background and history of the issue and the experiences of the community being engaged. Genuine engagement takes time and it is necessary to design engagement strategies that give members of the community ample space to enter into a meaningful dialogue with government about issues they hold dear. There are many creative ways to engage with LGBTIQ communities and it is wise to use a number of methods in recognition of their diversity.

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<sup>40</sup> Government of South Australia, *'Better Together: principles of engagement, a foundation for engagement in the South Australian government'*, Department of the Premier and Cabinet, Adelaide, 2013.

Effective engagement of LGBTIQ people can result in better service delivery, resilient, harmonious communities, improved planning and decision making and cost effectiveness<sup>41</sup>.

There are a range of engagement mechanisms that strengthen opportunities for LGBTIQ inclusion into the development and implementation of policies, strategies and initiatives. They can be whole-of-government, departmental or relate to specific issues. Ongoing advisory committees can be created or focus groups can be brought together to advise on specific issues. Surveys, social media, face-to-face meetings and collaboration with non-government organisations working in the field all provide opportunities for engagement between the State Government and LGBTIQ South Australians.

## 7.1 Key Objective

- Empowered LGBTIQ communities with the capacity to inform decision making processes that impact on their lives.

## 7.2 Key Criteria

- On behalf of the State Government, DCSI:
  - conducts three LGBTIQ roundtables a calendar year to bring together LGBTIQ people, Local, State and Commonwealth Governments and other stakeholders to discuss and recommend appropriate actions that address issues of importance to LGBTIQ people with the topics informed by advice from the LGBTIQ communities
  - conducts an annual online survey of LGBTIQ South Australians and seek advice from the LGBTIQ communities regarding the question set

Photo by Grant Nowell

- maintains an email network of LGBTIQ people and allies in order to disseminate relevant information
- investigates the use of social media as a conduit for service information sharing and engagement with LGBTIQ communities
- produces and distributes *Including You*, a publication designed to provide State Government and others with practical tips, tools and advice on how to improve service delivery to and engagement with LGBTIQ South Australians.

<sup>41</sup> Queensland Government, 'Engaging Queenslanders: A guide to working with Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) communities', Department of Communities, Child Safety, and Disability Services, 2012





## 8. References

Australian Bureau of Statistics, *Same-sex Couple Families, Reflecting a Nation: Stories from the 2011 Census*, retrieved 22 October 2013, <http://bit.ly/1g6MReq>.

Australian Government, *National Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Ageing and Aged Care Strategy*, Department of Health and Ageing, 2012.

Australian Human Rights Commission, *Addressing Sexual Orientation and Sex and/or Gender Identity Discrimination*, Consultation Report, 2011.

Baird B, K Mason & I Purcell, *The Police & You, A Survey of Lesbians and Gay Men in South Australia*, Lesbian & Gay Community Action, Adelaide, 1994.

Barrett, Dr C & K Stephens, *Beyond: 'We treat everyone the same' A report on the 2010 – 2011 program: How2 create a gay, lesbian, bisexual, transgender and intersex inclusive service*, Gay and Lesbian Health, Victoria, 2012.

Burns, C, K Graham & S Menefee-Libey, *Transgender Discrimination in the Public Sector – Why It's a problem for State and Local Governments, Employees and Taxpayers*, Centre for American Progress, 2012.

Dursi, MC, *Can Health Promotion Programs Effectively Reduce Health Care Costs, Increase Productivity and Retain Qualified Employees?*, University of Rhode Island, 2008.

Gillard, J, *Federal Government social inclusion agenda*, Impact, Autumn, 2008

Government of South Australia, *Better Together: principles of engagement, a foundation for engagement in the South Australian government*, Department of the Premier and Cabinet, Adelaide, 2013.

Government of South Australia, *Results of the South Australian Rainbow Survey 2012*, Department for Communities and Social Inclusion, 2013.

Government of South Australia, 2013, *Seven Strategic Priorities, Safe Communities, Healthy Neighbourhoods*, retrieved October 31 2013, <http://www.priorities.sa.gov.au/content/safe-communities-healthy-neighbourhoods>

Guasp, A & H Kibirige, *One minority at a time – being black and gay, interviews by Runnymede*, 2012.

Hiller, L, T Jones, M Monagle, N Overton, L Gahan, J Blackman & A Mitchell, *Writing themselves In 3, The third national study on the sexual health and wellbeing of same sex attracted and gender questioning young people*, Australian Research Centre in Sex, Health and Society, La Trobe University, Melbourne, 2010.

Hughes, M, *'Imagined futures and communities: older lesbian and gay people's narratives on health and aged care'*, *Journal of Gay & Lesbian Social Services*, Vol 20, no.1 - 2, 2008, pp. 167-186.

Irwin, J, *The pink ceiling is too low', Workplace experiences of Lesbians, Gay Men and Transgender People*, Australian Centre for Lesbian and Gay Research, University of Sydney, 1999.

Leonard, W, D Marshall, L Hillier, A Mitchell & R Ward, *Beyond Homophobia: meeting the needs of same sex attracted and gender questioning young people in Victoria. A Policy Blueprint*, Australian Research Centre for Health Sex and Society, 2010.

Leonard, W, M Pitts, A Mitchell, A Lyons, A Smith, S Patel, M Couch & A Barrett, *Private Lives 2, The second national survey of the health and wellbeing of GLBT Australians*, Australian Research Centre in Sex, Health and Society, La Trobe University, Melbourne, 2012.



- Mann, R, P Horsley, M Saunders, V Briggs & A Mitchell, *Swimming Upstream: Making Places Welcoming, A Report on the Needs of Gay, Lesbian and Bisexual People in 'Hard to Reach' Groups*, Australian Research Centre in Sex, Health and Society, La Trobe University, Melbourne, 2006.
- Morrison, Z, *On dignity, social inclusion and the politics of recognition*, Social Policy Working Paper No 12, The Centre for Public Policy, Brotherhood of St Laurence, 2010.
- Mule, NJ, LE Ross, B Deeprose, BE Jackson, A Daley, A Travers & D Moore, 'Promoting LGBT health and wellbeing through inclusive policy development', *International Journal for Equity in Health*, 2009, p.4.
- National Centre for Social and Economic Modeling, *The Changing Shape of Australian Families, Income and Wealth Report*, Issue 34, October 2013.
- New South Wales Attorney General's Department, *You Shouldn't Have to Hide to Be Safe: A Report on Homophobic Hostilities and Violence Against Gay Men and Lesbians in NSW*, Sydney, 2003.
- Oakley, S & A Bletsas, *Understanding the circumstances and experiences of young lesbian, gay, bisexual, transgender, intersex and gender questioning people who are homeless in Australia: a scoping study*, University of Adelaide, 2013.
- Queensland Government, *Engaging Queenslanders: A guide to working with Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) communities*, Department of Communities, Child Safety, and Disability Services, 2012.
- Rosenstreich, G, *LGBTI People Mental Health and Suicide*, National LGBTI Health Alliance, Sydney, 2011.
- Rosenstreich, G, J Comfort & P Martin, 'Primary health care and equity: the case of lesbian, gay, bisexual, trans and intersex Australians', *Australian Journal of Primary Health*, Vol 17, 2011, pp. 302-308.
- South Australian Equal Opportunity Commission, *Equal Opportunity Changes 2009*, retrieved 25 September 2013, [http://www.eoc.sa.gov.au/sites/eoc.sa.gov.au/files/attachments/factsheet\\_what\\_changed\\_in\\_2009.pdf](http://www.eoc.sa.gov.au/sites/eoc.sa.gov.au/files/attachments/factsheet_what_changed_in_2009.pdf)
- Stonewall, *Disability Health Briefing*, retrieved 16 August 2013, <http://www.healthylives.stonewall.org.uk/lgb-health/briefings/disability.aspx>
- Tomsen, S & K Markwell, *When the glitter settles: safety and hostility at and around gay and lesbian public events*, Australian Institute of Criminology (AIC), AIC Research and Public Policy Series, 2009.
- World Health Organisation, *What are social determinants of health?*, retrieved 31 October 2013, [http://www.who.int/topics/social\\_determinants/en/](http://www.who.int/topics/social_determinants/en/)







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