Gay, Lesbian, Bisexual, Transgender and Intersex (GLBTI) Health and Wellbeing Plan 2014

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Since 1988, Women’s Health West (WHW) has actively contributed to the health, safety and wellbeing of women in the western region of Melbourne through a combination of direct service delivery, research, health promotion, community development, capacity building, group work and work to influence systems change.

WHW welcomes the opportunity to provide evidence and recommendations to improve health outcomes for same-sex attracted, and sex and gender diverse people. We also commend state government on its commitment to a health and wellbeing plan based on a social determinants of health framework, which prioritises action to redress social and health inequities experienced by lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ) communities. Current research clearly shows that the discrimination, violence and marginalisation LGBTIQ communities experience can trigger or compound risk factors, and undermine health, wellbeing and safety (Victorian Department of Health, 2011a; Leonard et al, 2012).

Settings for action
In Victoria, VicHealth has developed a strong evidence-base to demonstrate the link between discrimination and poor health, and to identify effective settings for primary prevention work (VicHealth, 2009; VicHealth, 2007). Building on this work, it is critical that this plan includes strategies to redress discrimination against LGBTIQ communities and foster inclusive cultural norms and attitudes across different settings and sectors. We recommend that the following settings for action are included in the plan:

- Health, community and women’s services
- Education and training institutions
- Federal, state and local government
- Media, arts and popular culture
- Sports and recreation
- Workplaces
- Prisons
Are there any other health issues specific to people in the GLBTI communities that should be included and addressed?

In your view, what would be the priority health issues for the GLBTI community?

**Sexual and reproductive health**

Sexual and reproductive health is a key area where government, service providers and educators need to recognise and support the diverse needs of LGBTIQ communities in regards to inclusive, appropriate and affordable sexual and reproductive health services and health promotion programs such as respectful relationships and sexuality education. For example, lesbian and bisexual women, and trans men have historically received inaccurate information and support concerning their participation in Pap screening programs (Anderson, McNair and Mitchell, 2001). Prior to the introduction of the *Sex Discrimination Amendment (Sexual Orientation, Gender Identity and Intersex Status) Bill 2013*, Medicare rebates for Pap tests were not available to trans men who had legally changed their sex (National LGBT Health Alliance, 2009). To ensure health equity, health promotion information and training for health providers should be tailored to ensure that all people have access to health promotion programs and services including safe and affordable screening programs, free from stigma and discrimination.

Recognising that ending discrimination is everyone’s responsibility, WHW recommends ongoing commitment to comprehensive sexuality education in schools. In a national study on the health and wellbeing of same-sex attracted young Australians, participants highlighted gaps in sexuality education, with 80 per cent reporting that they found the information they received useless or fairly useless (Hillier, 2005). In 2013, students who participated in WHW’s whole-of-school sexuality program, Girls Talk, Guys Talk, identified homophobia as a key concern in their school. We commend government for its commitment in this area through the Safe Schools Coalition and the *Supporting Sexual Diversity in Schools policy* (2008). However, currently the quality of sexuality education varies greatly between schools. We therefore urge government to provide additional funding to ensure that training, support and the roll out of best practice whole-of-school sexuality education occurs throughout Victoria, particularly in outer metropolitan and rural areas.

Given the complexity of this health priority and the importance of equitable state-wide service delivery, WHW strongly recommends the development of a state-wide sexual and reproductive health strategy with specific regional action plans to improve outcomes for LGBTIQ communities. Without a state-wide framework programs and services have limited capacity to generate meaningful multi-sector collaboration or respond to intersecting experiences of discrimination (Women’s Health Association of Victoria, 2012).

**Mental health**

There is now substantial data available highlighting mental health as a key health concern for LGBTIQ communities. The table below, published in *Private Lives 2*, indicates significantly higher rates of anxiety and depression among LGBTIQ participants compared to the national ABS data, particularly in the 16 to 25 and 25 to 34 age brackets (Figure one).
It is critical when interpreting this data that the social determinants of mental health are considered, and that long-term strategies are developed in consultation with LGBTIQ communities. Key social determinants include:

- Social inclusion
- Freedom from violence and discrimination
- Access to economic resources and secure housing
- Equity in public policy and the law
- Cultural and gender norms (Keleher and Armstrong, 2006; Fisher and Baum, 2010)

LGBTIQ communities have fought hard to overcome stigma and the over medicalisation associated with framing their identity or sexuality as a mental health problem. In this context building trust is critical to the success of strategies to improve mental health outcomes. To support this work, WHW recommend that the state government commits to strengthening partnerships with the LGBTIQ community sector.

**Are there particular areas of the healthcare system that you would like to see influenced to improve their responsiveness to the needs of the GLBTI community?**

Delayed use of healthcare and lower levels of participation in preventative programs has been identified as a significant concern for the health and wellbeing of LGBTIQ communities and is largely attributed to experiences of discrimination and heterosexism (Victorian Department of Health, 2011a). According to Victorian Gay and Lesbian Rights Lobby (VGLRL) report *Enough is Enough*, 23 per cent of GLBT Victorians have experienced discrimination in relation to healthcare (VGLRL, 2000). There are now healthcare providers that are explicitly trained to provide safe and inclusive services for LGBTIQ people. However, these clinics are primarily located in inner metropolitan suburbs (e.g. Fitzroy and Prahran) and there are significant gaps in the data concerning variations in health status and service use across different geographic locations. This includes a lack of research on the experiences of LGBTIQ people living in outer metropolitan regions and there use of local mainstream services.
In Melbourne’s West there is currently a lack of health services that are explicitly LGBTIQ friendly when compared with other metropolitan regions. Specialised sexual and reproductive health services that screen and treat sexually transmissible infections (STIs), HIV S100 prescribers and rapid HIV testings is also a significant gap in the West. We recommend a focus on improving service access in the two outer western growth corridors where the population is forecast to increase by 42 per cent by 2022 (Victorian Department of Health, 2011b), including resources to increase health service capacity to provide responsive services to LGBTIQ communities.

**Recommendations for the Victorian State Government**

- Fund whole-of-school respectful relationships and sexuality education with a strong focus on prevention of homophobia, transphobia and heterosexism
- Fund specialised sexual and reproductive health services that are youth and LGBTIQ friendly, with a particular focus on the western growth corridors
- Fund professional development for mainstream health providers to ensure they are appropriately supported to meet the diverse needs of LGBTIQ people
- Support the LGBTIQ community sector through partnerships and sustainable long-term funding
- Develop a state-wide sexual and reproductive health strategy with specific regional action plans to improve outcomes for LGBTIQ communities

**References**


National LGBT Health Alliance (2009) Submission to the National Women’s Health policy consultation, National LGBT Health Alliance: Newtown

Victorian Department of Health (2011a) *Well proud: a guide to gay, lesbian, bisexual, transgender and intersex inclusive practice for health and human services*, Ministerial Advisory Committee on Gay and Lesbian Health: Melbourne
