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Office of the Advocate for  
Children & Young People

# The Voices of LGBTQIA+ Young People in NSW

2022

*“We don’t owe  
anyone queerness  
or straightness...  
I just want to exist,  
you know?”*

We acknowledge the Traditional Owners of Country throughout Australia and recognise their continuing connection to lands, waters and cultures.

We pay our respects to their Elders past, present and emerging.

We would also like to acknowledge the important role of Aboriginal people and culture within the NSW community.

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We also acknowledge the young people who participated in the development of this report for sharing their experiences bravely. ACYP extends its gratitude and thanks to those young people.

ACYP notes that some of the content of this report may be difficult for some people with lived experience of bullying, harassment and violence and some of the quotes included throughout this report may be distressing.

If you or someone you know requires support, there is always hope and there is always help available. For support, contact QLife on 1800 184 527 (3pm-midnight every day) or go to [qlife.org.au](http://qlife.org.au); visit Twenty10 at [twenty10.org.au](http://twenty10.org.au); or call Lifeline on 13 11 14 (at any time, 24/7) or visit [lifeline.org](http://lifeline.org).

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# **A Message from the Advocate**



**Every report we write at ACYP teaches us how important it is to continually listen to and lift up the voices of children and young people. This report is no different, and in fact, made me realise that children and young people are each experiencing life in New South Wales differently, and whilst we have made progress there is a lot, still, to achieve.**

All young people should feel safe and should always be encouraged to be themselves – and to be their whole self. There are confronting findings in this report that talk about the violence some young people have experienced. The safety of young people is above politics; it is a right and it is one we must enforce in all places where young people live, work, learn and play.

The brave young people who participated in this report were honest, thoughtful and kind in their words. They acknowledged the need for us to work as community to ensure young people feel safe and have provided very clear recommendations as to how that can happen.

It is now for us to work with government, business and community to implement the recommendations in this report. We know that we have supporters across all of these spaces – people who champion and lift up the young people in the LGBTQIA+ community. Thank you for continuing this important work.

Thank you to the young people who shared, and to the allies who supported young people to share. If we lead with love and grace, we can create an incredible space for all young people to be themselves, without fear. I also encourage you to read this report with love and grace. Together we can ensure that young people who are part of the LGBTQIA+ community are heard and that their voices are elevated, and ultimately that the recommendations are implemented. ■

Yours sincerely,

A handwritten signature in black ink, which appears to read 'Zoe Robinson'. The signature is fluid and cursive.

Zöe Robinson  
**Advocate for Children and Young People**

# Executive Summary

This report has found that while many young people who identify as LGBTQIA+ were great supports to one another and sought out opportunities to celebrate their identity, they also faced difficulties in navigating communities that did not always accept them. While they have seen positive changes in recent years, LGBTQIA+ young people continue to face bullying, homophobia, and in some cases violence. Others spoke about lack of access to information and health care. All young people have a right to health, a right to education, a right to be respected and a right to be safe.

## ■ Background

Throughout the Advocate for Children and Young People's (ACYP) ongoing consultations with young people in NSW and through regular, quantitative research, ACYP recognised that LGBTQIA+ young people experience particular vulnerabilities and poorer outcomes across a variety of measures.

This report includes findings from a large-scale qualitative consultation focused on the experiences of LGBTQIA+ young people. It reflects their voices and their articulated needs. The report also compares outcomes for LGBTQIA+ young people to their non-LGBTQIA+ peers within the findings of ACYP's annual quantitative Strategic Plan Tracking Survey 2022.

ACYP consulted with 233 LGBTQIA+ identifying young people aged 12-24 years across 37 focus groups. Consultations were held both face-to-face and online across Sydney and rural and regional NSW.

Young people were asked a series of questions about their experiences in education and work and with health and mental health services; their 'coming out' experiences, whether they had experienced stigma, discrimination and violence and what advice they had for NSW Government to improve the lives of LGBTQIA+ young people.

The quantitative study involved n=1005 young people aged 10-24 across NSW. Of these, 185 identified as LGBTQIA+ and 820 did not. The study was conducted by SEC Newgate Research, which is a member of The Research Society and the Australian Polling Council.



## ■ Key findings

### Experiences in the community

LGBTQIA+ young people raised some positive experiences in engaging with their local communities, including pride celebrations and physical displays of support; good support networks; and in some instances, affirmative ‘coming out’ experiences. When asked for a rating during consultations 78% reported feeling a connection to the LGBTQIA+ community.<sup>1</sup>

- Young people enjoyed participating in pride marches and celebrations in their local communities. They reported being happy that many educational institutions, workplaces and local councils were recognising these events and exhibiting public displays of support in the form of posters, signs, flags and use of preferred pronouns. However, they expressed a desire for these events to be equally accessible across NSW and for public displays of support to be evident all year round, not just during certain times of the year, such as Pride Month.
- Due to shared experiences, other LGBTQIA+ friends were young people’s most common form of support. Other good support networks included non-LGBTQIA+ friends and allies, older LGBTQIA+ people, local pride groups and online communities. Notably, while some young people did report positive experiences with their parents and relatives, families were not frequently mentioned as a key source of support. This was also reflected in quantitative findings, which noted LGBTQIA+ young people were less likely to feel they could confide in a family member (45% vs 62% of non-LGBTQIA+ young people), however they were more likely to have a friend they could confide in (64% vs. 53% of non-LGBTQIA+ young people).

- Access to reliable information online was seen as a necessity for young people exploring their gender and sexual identities. Young people reported using a wide range of online sources including Google searches, TikTok, YouTube and Reddit. They recommended that NSW Health, develop a single website that could include and refer to trustworthy information about LGBTQIA+ concepts.

Despite some optimism, young people reported more negative than positive experiences associated with the way people responded to their identity. Most notably, they raised a lack of understanding and support from family, friends and peers; adverse reactions to ‘coming out’; discriminatory practices and legislation; negative media representations and, in some cases, violence.

- When asked during consultations to rate their feelings of safety and support as LGBTQIA+ young people, 45% reported not feeling safe or supported, while 24% said they felt somewhat or very safe and supported.<sup>2</sup>
- From the quantitative study, LGBTQIA+ young people were statistically less likely to report high quality relationships with their families (72% giving a positive rating compared to 83% for their non-LGBTQIA+ peers).

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<sup>1</sup> Participants were asked to complete individual response questions throughout the consultations. Base: n=164, noting some participants chose not to respond.

<sup>2</sup> Consultation-based individual response question. Base: n=157, noting some participants chose not to respond.

- Experiences of homophobia and transphobia –both online and in person –were widespread among young people who participated in consultations, causing them to feel unsafe, impacting their mental health and in some cases resulting in young people concealing their identities as a protective mechanism. In extreme cases, young people reported having been physically and sexually assaulted.<sup>3</sup>
- Some young people spoke about the need to have a safety plan in place and recommended that young people should be able to access a safe space after hours in the event of crisis.
- The quantitative findings, which asked about experiences in the prior 12 months, found that around 4 in 10 LGBTQIA+ young people had experienced bullying or discrimination recently.
- Young people from diverse backgrounds reported facing additional challenges in both identifying as LGBTQIA+ and being from a culturally and linguistically diverse background, Aboriginal, living in a rural or regional area or living with disability.
- While young people acknowledged that an increase in media representations of LGBTQIA+ people is useful for normalisation and acceptance, many reported that the nature of these representations often serve to perpetuate negative stereotypes of the community. In addition, the increase in LGBTQIA+ media during Pride Month was seen by some young people as tokenistic.
- Young people were frustrated and angered by current and proposed legislation that would make it more difficult for them to navigate legal and administrative processes, such as changing their name or gender marker.

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<sup>3</sup> When young people disclosed information about assault or abuse, ACYP staff contacted the participant after the discussion to ensure these had been appropriately reported. In all cases, reporting processes had already been underway.

## Experiences of education

Connection to and support from LGBTQIA+ friends was by far the most positive school-related experience reported by young people. The solidarity and camaraderie in finding one another was a strong protective factor in mostly unsupportive school environments.

- Young people spoke about the benefits of LGBTQIA+ support groups in schools, as well as the support they felt from some teachers. They valued seeing LGBTQIA+ teachers at the school.
- Young people also appreciated seeing physical displays of support in schools, such as posters and stickers.

While young people reported feeling supported by some friends and teachers at school, many were faced with bullying and harassment by peers and some had experienced physical violence while at school. Young people said they felt these situations were made worse by a lack of teacher intervention.

- Experiences of bullying, homophobia, transphobia and harassment were prevalent across schools, causing some LGBTQIA+ young people to feel unsafe. It was not uncommon for young people to report having changed school as a result.
- In over 1 in 4 group discussions, young people reported having experienced some kind of physical violence at school, ranging from having food and other objects thrown at them to being kicked or beaten by their peers.
- Trans and gender diverse young people described an additional layer of bullying and harassment related to the misuse of their name and pronouns and their use of bathrooms not aligned with their gender identity.

- Most young people reported that most teachers did little if anything to address homophobic and transphobic bullying in their school. When efforts were made, some schools responded by asking the LGBTQIA+ students to change their behaviour (e.g. not to display a pride flag, or sit elsewhere in the playground) rather than by holding the wrong-doer accountable.
- In other cases, young people reported homophobic and transphobic comments made by teachers themselves.
- While 69% of LGBTQIA+ young people in the quantitative study said they felt safe at school (rating 7 or more out of 10), 31% gave a lower rating and within that, 9% a very negative rating (4 or less).
- Young people recommended mandatory LGBTQIA+ education for teachers to create safe and welcoming school environments.

Other difficulties encountered at school included a lack of LGBTQIA+ sex education, challenging school policies, and the fear or experience of being outed.

- Across all consultations, young people called for the need for greater education about LGBTQIA+ concepts, most notably in relation to sex education, but also incorporating concepts into other relevant subjects such as History. They discussed both including this in the syllabus and having external guests providing this education in schools. This was a key recommendation raised by many young people, which they felt would address both their education and information needs, as well as normalise LGBTQIA+ concepts, which would hopefully address the culture of bullying they experienced.

- In asking about where they sought information about sexual consent and respectful relationships, the quantitative study found that LGBTQIA+ young people were more likely than their non-LGBTQIA+ peers to rely on social media, their own experiences, TV shows and movies, search engines, online forums and support groups.
- Transgender, non-binary and gender diverse students expressed frustrations regarding practices at their schools which they viewed as non-inclusive. These included teachers not using their preferred names and pronouns – both in official documentation and conversationally; decisions related to sharing bathrooms and change rooms with their aligned gender identity; and, to a lesser extent, wearing the aspects of school uniforms they were most comfortable with.
- Students recommended they should have access to a gender-neutral bathroom and not be reliant on accessible bathrooms or staff facilities – particularly those that required a key.
- Young people also reported instances of schools ‘outing’ them to their parents. This most commonly occurred when students had requested to have their preferred names and pronouns used, which requires parental approval.

Experiences of tertiary education were more positive, though some young people still faced challenges in finding a place to fit in.

In the quantitative study, young people were asked about the extent to which they felt hopeful about the future.

While 61% of LGBTQIA+ young people gave very positive scores (7 or more out of 10), 16% gave very negative scores (4 or less) indicating a sense they were not hopeful. They were twice as likely to say they felt hopeless compared to their non-LGBTQIA+ peers.

- While 70% were hopeful about their ability to get the education they needed to achieve their goals, only 59% were hopeful about their ability to get a job in their field of interest. There was no significant difference between LGBTQIA+ young people and their peers on these two measures.

## Experiences of work

While positive experiences in the workplace were more prevalent than negative, a number of young people reported that they were not open about their sexual orientation or gender identity at work due to fear of negative consequences.

- Positive work-related experiences included receiving support from managers and colleagues; name badges with preferred pronouns; and flags or posters in the workplace.
- Negative experiences in the work environment were also reported, such as colleagues and customers making dismissive comments about LGBTQIA+ people and, in some cases, overt harassment and threats.
- Trans and gender diverse young people faced additional work-related challenges including being required to use their deadname in formal documentation, being misgendered and in a few cases being asked to limit their self-expression at work.

Young people also reported a degree of tokenism in some workplaces, where they appeared to be celebrating diversity through hiring choices however this did not always translate to a supportive, inclusive environment.

## Experiences of healthcare

LGBTQIA+ young people discussed a range of barriers to accessing healthcare, largely related to their concerns about confidentiality and privacy. When they were able to access care, they were sometimes met with practitioners who lacked understanding of LGBTQIA+ health care, negative attitudes, uncomfortable intake experiences and a lack of LGBTQIA+ specific support services. These issues were most notable for trans and gender diverse young people. Other young people were largely neutral about their experiences with healthcare providers – noting they had not discussed any concepts related to identifying as LGBTQIA+ with them.

- In the quantitative study, young people who identified as LGBTQIA+ were statistically less likely to report positive ratings for their physical and mental health compared with non-LGBTQIA+ young people.
- Regarding their physical health, just 50% gave a positive rating (7 or more out of 10) compared to 70% of non-LGBTQIA+ young people.
- Regarding their mental health, 43% of LGBTQIA+ young people gave a positive rating and 25% gave a negative rating (4 or less out of 10), this compares to 62% of non-LGBTQIA+ young people giving a positive rating and 15% giving a negative rating.
- During consultations, young people reported facing several barriers to accessing healthcare. These included their difficulty in navigating healthcare while maintaining privacy from their parents, concerns about confidentiality (particularly with school counsellors) and a discomfort in disclosing their gender identity or sexuality.

- In line with other young people ACYP has heard from, LGBTQIA+ young people reported facing long wait times for appointments and concerns about the cost of specialist services. However, these issues appear compounded for LGBTQIA+ young people who spoke about needing greater access to specialist care.
- Qualitative findings indicated that 56% of LGBTQIA+ young people had sought support from a mental health provider in the prior 12 months, compared to 27% of non-LGBTQIA+ young people.
- As a result of these barriers and the stigma of accessing healthcare related to their identity, LGBTQIA+ young people preferred to access online sources to obtain health-related information, despite their concerns about misinformation on the internet.

While some young people reported positive experiences with health practitioners, others recounted negative occurrences including clinicians being uninformed about LGBTQIA+ concepts and health care needs; being dismissive of their identity, names and pronouns; and making comments that young people perceived as discriminatory.

- Young people spoke about difficulty in finding a doctor or provider who was inclusive, and mentioned visiting multiple services before finding one that provided appropriate support.

Mental health was reported as a priority area to address for LGBTQIA+ young people. Young people highlighted the lack of crisis mental health support, particularly in regional areas.

- In relation to LGBTQIA+ specific support services, young people spoke positively about support obtained through Twenty10, ACON and The Gender Centre. Young people said it was important to have more health professionals that identify as LGBTQIA+ and that staff who do not identify should receive training in LGBTQIA+ concepts and issues.
- Trans and gender diverse young people highlighted the need for more gender specific support services as well as their frustration at not being able to obtain gender affirming treatment due to their age. ■

# Recommendations

Recommendation	Responsibility
<p>1. Local councils across NSW should provide funding to promote the needs of LGBTQIA+ young people through events and training.</p>	<p>Local councils across NSW</p>
<p>2. NSW Government should provide safe spaces for LGBTQIA+ young people to access support after hours and should provide inclusion training to frontline workers.</p>	<p>NSW Government in collaboration with NSW Ministry of Health</p>
<p>3. All levels of government should ensure that legislative and policy changes include the rights and perspectives of LGBTQIA+ young people. Based on the findings of this consultation, ACYP also recommends that the NSW Government undertake legislative reform to:</p> <ul style="list-style-type: none"> <li>• Ensure that NSW legislation protects LGBTQIA+ students’ rights regarding education and schooling; and</li> <li>• Remove the requirement for surgery to be a prerequisite to change a person’s gender marker on their Birth Certificate in NSW, in line with other jurisdictions in Australia.</li> </ul>	<p>NSW Government</p>
<p>A. ACYP will consult with local councils across NSW to increase the number of councils hosting LGBTQIA+ pride events for young people.</p>	<p>ACYP</p>
<p>B. ACYP will host a series of forums with local leaders to support the elimination of violence against LGBTQIA+ young people.</p>	<p>ACYP</p>
<p>4. NSW Department of Education to provide funding for teachers to complete LGBTQIA+ inclusion training to promote wellbeing and inclusion of LGBTQIA+ students.</p>	<p>NSW Department of Education</p>
<p>5. NSW Department of Education should develop a specific Anti-Homophobia, Biphobia and Transphobia policy to address mistreatment and bullying of LGBTQIA+ students. This policy should be accompanied by associated resources.</p>	<p>NSW Department of Education</p>
<p>6. NSW Education Standards Authority should include specific reference to diverse genders and sexualities in the PDHPE syllabus in instances of education about sexual behaviours.</p>	<p>NSW Education Standards Authority</p>

Recommendation	Responsibility
7. NSW Department of Education should ensure every school has an all-gendered bathroom option that all students, of all genders, are able to use, alongside a single-sex bathroom option.	NSW Department of Education
C. ACYP will support the NSW Department of Education in including student voice in the development of policies and educational resources.	ACYP
8. Anti-Discrimination NSW should receive funding to improve access for LGBTQIA+ young people to the complaints process, both in terms of awareness and the process itself.	NSW Government with Anti-Discrimination NSW
9. NSW Ministry of Health should continue to fund and expand initiatives in the NSW LGBTIQ+ Health Strategy 2022-2027, keeping young people’s needs and voices at the centre of decision-making and co-design opportunities.	NSW Ministry of Health
10. NSW Ministry of Health should develop an accreditation framework for LGBTQIA+ inclusive health services and link training delivered through the NSW LGBTIQ+ Health Strategy to this.	NSW Ministry of Health
11. NSW Ministry of Health should increase public-facing information on the NSW Ministry of Health webpage for ‘LGBTIQ+ Health’, including links to helpful resources.	NSW Ministry of Health
D. ACYP will design and develop a ‘helpful resources’ factsheet with state-wide resources.	ACYP



## ■ Support in the community

1. **Local councils across NSW should provide funding to promote the needs of LGBTQIA+ young people through events and training.**

Funding should be used to host LGBTQIA+ celebration events specifically for young people. Ideally, events would be run annually and would provide an opportunity for young people to connect with peers who identify as LGBTQIA+. As a secondary benefit, events could highlight LGBTQIA+ services to young people and those who work with them – such as teachers and community leaders.

During the consultations, young people across several schools pointed to an event run by the Blue Mountains City Council to mark ‘International Day Against Homophobia, Biphobia, Interphobia and Transphobia’ and said this was an event that connected them to one another and boosted their sense of belonging.

Funding could also be used to provide LGBTQIA+ inclusion training for Youth Development Officers (YDOs), noting that YDOs are likely the organisers of these events.

NSW Government should consider establishing a grants program aimed at supporting these initiatives.

2. **NSW Government should provide a safe space for LGBTQIA+ young people to access support after hours and should provide inclusion training to frontline workers.**

The NSW Government should provide young people with access to safe spaces to attend if they need to leave their home after hours as a result of conflict.

ACYP welcomes the recent establishment of 20 Safe Havens across NSW for crisis mental health support and recommends these services or a similar model be further funded and expanded to support young people in distress. At present, it appears not all of these services operate during evenings or on all days throughout the week. Further funding could be used to both expand opening hours and provide access to an after-hours on-call support, so that if a young person needed access to a safe space after 10pm, a safe space could be opened temporarily to meet that need on an ad-hoc basis. This recommendation is not intended to meet needs associated with crisis accommodation.

Specialist LGBTQIA+ inclusion and support training should also be provided to domestic violence and crisis support services. Crisis services should consider hiring practices to promote gender and sexual diversity. Police should be provided similar training, including a focus on building understanding of appropriate referral pathways for LGBTQIA+ people experiencing domestic or family violence.

3. **All levels of government should ensure that legislative and policy changes include the rights and perspectives of LGBTQIA+ young people.**

When considering legislative and policy changes related to the LGBTQIA+ community, the NSW Government should consult widely with LGBTQIA+ young people about how potential changes can protect and uphold their rights, safety and wellbeing.

Based on the findings of this consultation, ACYP recommends that the NSW Government undertake legislative reform to ensure that NSW legislation protects LGBTQIA+ students' rights regarding education and schooling. Schools should not be permitted to make decisions about a student's position at the school or exclusion from it based on their gender identity or sexual orientation.

ACYP also recommends that reform should be undertaken to remove the requirement that surgery is a prerequisite to change a person's gender marker on their Birth Certificate in NSW. This change would bring NSW in line with other jurisdictions in Australia.

## ■ ACYP commits to

### A. Consult with local councils across NSW to increase the number of councils hosting LGBTQIA+ pride events for young people.

ACYP will work with local councils to understand how many of the 128 local government areas currently host LGBTQIA+ pride events and how many do so specifically for young people. Throughout this process, ACYP will support more local councils to host those events, working towards the aim of each local council hosting an annual celebration for LGBTQIA+ young people.

### B. Host a series of forums with local leaders to support the elimination of violence against LGBTQIA+ young people.

ACYP will work with relevant government agencies and local services to host discussions with community leaders about how to address violence against LGBTQIA+ young people in their communities.

This would involve sharing insights from the report and hosting a deliberative conversation about what support community leaders would need to shift attitudes among people in their local areas.

Key groups could include leaders across schools, regional and rural areas, multicultural community leaders and faith leaders.

## ■ Education

### 4. NSW Department of Education to provide funding for teachers to complete LGBTQIA+ inclusion training to promote wellbeing and inclusion of LGBTQIA+ students.

The findings of this report indicate a lack of awareness among many teachers of LGBTQIA+ concepts, as well as a lack of acceptance among some. In rolling out this training, the Department should prioritise school leaders, year advisors, and teachers who may be interested in establishing an LGBTQIA+ support group, but ACYP notes training is important for all education staff. ACYP recommends the Association of Independent Schools and Catholic Schools NSW also take up training for all staff.

Within this training, staff should be encouraged to maintain confidentiality when a student chooses to disclose their sexuality or gender to teachers, wellbeing staff and school leaders. This will protect students' wellbeing in that it may not be safe for the student if the staff member were to mention their disclosed identity to parents or carers.

Where students choose to disclose a desire to affirm their gender identity through their name, pronouns or uniform, staff should:

- Make clear to the student the requirements for parental consent before those changes can be made; and
- Work with the student to understand their home context before contacting their parents or carers about such requests.

**5. NSW Department of Education should develop a specific Anti-Homophobia, Biphobia and Transphobia policy to address mistreatment and bullying of LGBTQIA+ students. This policy should be accompanied by associated resources.**

Developing an Anti-Homophobia, Biphobia and Transphobia Policy would highlight the need to directly address homophobic, biphobic and transphobic behaviours in schools. This would address both overt behaviours and more subtle behaviours that reinforce cultural norms – such as students’ perception that teachers do not take homophobic jokes seriously. The Department of Education currently has an Anti-Racism policy that sits alongside the existing Bullying Prevention and Response Policy and the Student Behaviour Strategy. Development of this policy could be analogous to the Anti-Racism policy.

Development of this policy should include accompanying implementation papers and resources, as well as clearly outlining responsibilities of all school employees.

**6. NSW Education Standards Authority should include specific reference to diverse genders and sexualities in the PDHPE syllabus in instances of education about sexual behaviours.**

In current PDHPE Stage 4 and 5 syllabus materials, students learn about a number of topics, including: sexual relationships; how to engage in sexual behaviours safely; how to understand contraception and preventative health practices; and understanding consent. ACYP acknowledges the syllabus does not specify references to heterosexual behaviours or health information, and that sample resources developed for classroom teachers already include some references to LGBTQIA+ concepts in sexual education.

However, findings from this consultation indicate sexual health education for LGBTQIA+ young people is limited. ACYP recommends the syllabus should overtly highlight the need to include LGBTQIA+ concepts in education about sexual behaviours.

This information should be applicable to a range of sexual behaviours. In the same way that students who may not currently be sexually active need to understand sexual health, it is important for all students to learn about safe sexual practices that reflect the diversity of genders and sexualities represented across society.

**7. NSW Department of Education should ensure every school has an all-gendered bathroom option that all students, of all genders, are able to use, alongside a single-sex bathroom option.**

All schools should provide an option for an all-gendered bathroom that any student would be able to use if they choose to. Students should still be able to choose to use a single-sex bathroom. ACYP envisages that this would involve converting one set of bathrooms to an all-gendered bathroom and constructing new schools with all-gendered bathrooms.

An accessible bathroom would not meet the needs articulated by young people in this report, as it would require that a trans or gender diverse young person come out to the school before using it and implies a link between diverse gender identities and disability. Young people in this report also mentioned discomfort in taking the place of a person with disability by using the accessible bathroom.

All students should have access to a bathroom at all times, and bathrooms should not be locked during class times.

## ■ ACYP commits to

- C. Support the NSW Department of Education in including student voice in the development of policies and educational resources.**

Where the NSW Department of Education agrees to develop the policies and syllabus guides as outlined above, ACYP will support the Department in incorporating student perspectives into those documents and materials.

## ■ Work

- 8. Anti-Discrimination NSW should receive funding to improve access for LGBTQIA+ young people to the complaints process, both in terms of awareness and the process itself.**

The NSW Government should provide funding to Anti-Discrimination NSW to support the development of targeted information and advertising campaigns to LGBTQIA+ young people, including a focus on highlighting their eligibility to make complaints.

LGBTQIA+ young people should also be involved in reviewing the process of making a complaint to determine whether there are opportunities to make the process more accessible and youth friendly.

## ■ Health

- 9. NSW Ministry of Health should continue to fund and expand initiatives in the NSW LGBTQIA+ Health Strategy 2022-2027, keeping young people’s needs and voices at the centre of decision-making and co-design opportunities.**

ACYP welcomes and is eager to see the implementation of the NSW LGBTQIA+ Health Strategy.

The initiatives outlined in the Strategy begin to address the issues raised by young people in this report, including the need for more LGBTQIA+ specific services, the need for those services in regional and rural areas, and the need to upskill medical and health practitioners.

Funding for these initiatives should be continued and expanded to provide more young people with more access to appropriate services across NSW.

Where co-design is mentioned throughout the Strategy, young people’s voices should be included in that process. ACYP would be happy to assist in this process.

Training for health practitioners should reiterate the need to maintain patient confidentiality and privacy.

- 10. NSW Ministry of Health should develop an accreditation framework for LGBTQIA+ inclusive health services and link training delivered through the NSW LGBTQIA+ Health Strategy to this.**

As the NSW LGBTQIA+ Health Strategy notes, “75% of LGBTQIA+ people nationally would be more likely to use a service if it has been accredited as LGBTQIA+ inclusive.”<sup>4</sup> This is consistent with the qualitative findings of this report where young people struggled to identify inclusive services.

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<sup>4</sup> NSW Health, (2022) *NSW LGBTQIA+ Health Strategy 2022-2027: For people of diverse sexualities and genders, and intersex people, to achieve health outcomes that matter to them* accessed via: <https://www.health.nsw.gov.au/lgbtiq-health/Publications/lgbtiq-health-strategy.pdf>.

An accreditation framework for LGBTQIA+ inclusive health services should be rolled out, in tandem with the training program already proposed under the NSW LGBTIQ+ Health Strategy. The development of this accreditation framework should include an opportunity for young people to provide feedback on whether the health service was inclusive.

ACYP recommends accreditation include assessing whether the health practitioner was appropriately informed about LGBTQIA+ concepts and whether health staff use the correct name and pronoun for the young person.

ACYP also recommends the NSW Ministry of Health develop, in partnership with relevant bodies (e.g. RACGP), sample new-patient intake forms that allow, but do not require, young people to indicate their preferred name alongside their legal name, and their sexuality and gender identity alongside their sex assigned at birth. The use of key elements of this intake form could also contribute to accreditation.

**11. NSW Ministry of Health should increase public-facing information on the NSW Health webpage for LGBTIQ health, including links to helpful resources.**

Currently the NSW Health webpage 'LGBTIQ+ Health' –under the heading of 'Find information by health topic' –simply links to the NSW LGBTIQ+ Health Strategy rather than providing helpful information and resources as per other health topics.<sup>5</sup>

Updating this webpage is an opportunity to provide high-level information about LGBTQIA+ concepts, information about sexual health for LGBTQIA+ people and direct users to reliable sources of further information, including where to find an LGBTQIA+ inclusive health service or specialist.

**■ ACYP commits to**

**D. Design and develop a 'helpful resources' factsheet with state-wide resources.**

ACYP will develop a helpful resources fact-sheet that can point users to crisis and support services. This page will direct to resources appropriate for all young people, including those who identify as LGBTQIA+, as well as culturally specific and other generalist support services. This document will be developed in youth-friendly language and could be easily adopted and utilised by both Government and non-government sector agencies. This resource will be distributed across ACYP's networks, including to government agencies and government and non-government schools. ■

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<sup>5</sup> NSW Health (2022) LGBTIQ+ Health accessed via <https://www.health.nsw.gov.au/lgbtiq-health/Pages/default.aspx>. By way of comparison, see detail provided for instance on [Men's Health](#), [Child and Family Health](#), or [Sexual Health](#).

# Introduction

The LGBTQIA+ young people whose views are captured in this report were optimistic that progress in their rights had been made, and that progress would continue. However, some challenges remain. The LGBTQIA+ young people that ACYP spoke to described living in a society which frequently rejects them, belittles their experiences, marginalises them and in some cases, meets them with harassment and physical violence. Despite this, LGBTQIA+ young people consistently come together to celebrate each other, promote inclusion and fight for equality. They are resilient and hopeful, against all the odds.

The NSW Advocate for Children and Young People (ACYP) is an independent statutory appointment overseen by the NSW Parliamentary Joint Committee on Children and Young People. ACYP advocates for and promotes the safety, welfare, wellbeing and voice of all children and young people aged 0-24 years in NSW.

ACYP works to create space for children and young peoples' views and experiences to be heard and considered by decision-makers across government, community and business sectors.

ACYP's mandate, under the *Advocate for Children and Young People Act (2014)* is to consult with children and young people from a broad range of backgrounds and experiences, as well as to give priority to the interests and needs of vulnerable and disadvantaged children and young people.

Throughout ACYP's ongoing consultations with children and young people, it became clear that young people who identify as LGBTQIA+ experience particular vulnerabilities, and ACYP's research in development of the *NSW Strategic Plan for Children and Young People 2022-2024* revealed this group experienced poorer outcomes across a variety of measures.

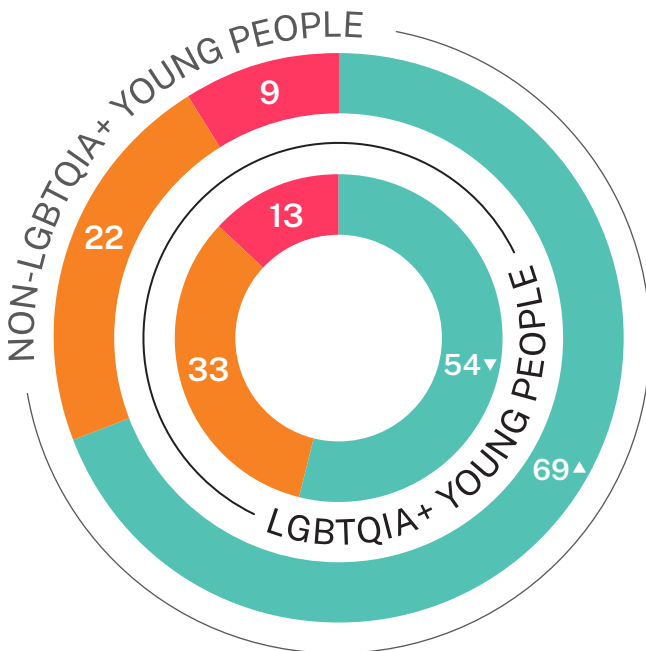
As a result, in 2022, ACYP conducted a large consultation exercise to understand the experiences of LGBTQIA+ young people across NSW. This report reflects their voices and their articulated needs.

The participants represented by this report spoke earnestly and passionately about their experiences and the changes they hoped to see in the world. ACYP is grateful for the insights they have shared. ■

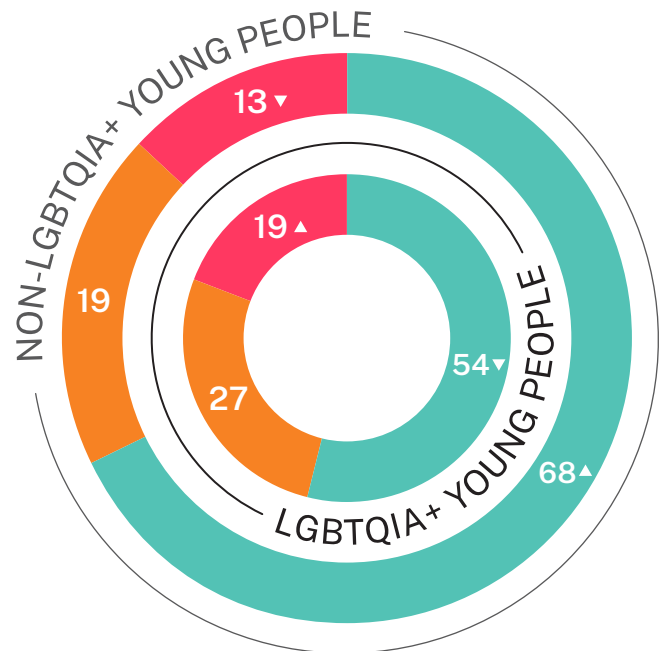


Findings from ACYP’s annual Strategic Plan Tracking Survey 2022 (the 2022 Tracking Survey) have been included as an additional layer of analysis throughout this report. These findings compare the results of LGBTQIA+ young people to those who do not identify as LGBTQIA+. For instance, LGBTQIA+ young people were statistically less likely to give a positive rating for how they felt about their life as a whole, as well as how they felt about their life ‘these days’.

How do you feel about your life as a whole? (%)



How do you feel about your life these days? (%)



● Net 7-10    ● Net 5-6    ● Net 0-4

Q. How do you feel about your life as a whole? Please think about all aspects of your life – e.g. school, work, friends, family, your health and the activities you take part in, as well as your hopes and plans for the future – and answer using a scale of 0 to 10, where 0 means very negative and 10 means very positive. Q. And how do you feel about your life these days?

Base: LGBTQIA+ n=185, Non-LGBTQIA+ n=820.

▲▼ Indicates a statistically significant difference



# Methodology

This report includes findings from a large-scale qualitative consultation focused on the experiences of LGBTQIA+ young people. It also incorporates findings from ACYP's annual Strategic Plan Tracking Survey 2022, a quantitative study of young people's experiences across NSW used to track sentiment across the six overarching commitment areas in the *NSW Strategic Plan for Children and Young People 2022-2024*. This report compares relevant results for young people who identify as LGBTQIA+ to young people who do not.

## ■ Qualitative consultations

ACYP spoke to 233 young people aged between 12 and 24<sup>6</sup> years across a series of 37 small group discussions, including 14 in Sydney; 15 across Regional and Rural NSW; and 8 online groups which included participants from both metropolitan and regional areas. Discussions were conducted by ACYP staff and lasted approximately one hour. Consultations ran between March and September 2022. Discussions were conducted both face-to-face and via video-conference.

During group consultations, young people were asked a series of questions about their experiences related to:

- Education;
- Work;
- Health and mental health services; their 'coming out' or 'inviting others in' experiences;
- The extent to which they had experienced stigma, discrimination and violence; and
- What advice they had for NSW Government to improve the lives of LGBTQIA+ identifying young people.

Prior to developing the discussion guide, ACYP, with the support of Twenty10, held an online workshop for 25 LGBTQIA+ young people. Young people were recruited through ACYP networks and youth services.

The purpose of the workshop was to ensure the project was aligned with the interests and needs of young people who identify as LGBTQIA+. During the workshop, young people were asked questions relating to their own experiences of being LGBTQIA+. Their feedback was used to identify key topics of concern and to develop the group discussion questions for the consultation project.

## ■ Recruitment

Young people were invited to participate through a variety of channels:

- The project was advertised on ACYP's communication channels including its website, email lists and social media platforms;
- NSW schools across all three education sectors, TAFEs and universities were sent email invitations;
- Youth services across NSW were sent email invitations;
- ACYP attended the 2022 Fair Day to advertise the project and encourage young people to participate.

ACYP intentionally sought engagement from a variety of stakeholders to ensure diverse social and demographic representation. The consultation was open to any LGBTQIA+ young person or group who contacted ACYP during the consultation period.

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<sup>6</sup> One young person who participated was aged 25 years.

## ■ Considerations

Throughout the project ACYP was cognisant of the need to understand the experiences of those who identify as LGBTQIA+, whilst also being aware that discussing those experiences could be traumatic for some. All consultations were conducted by trained ACYP facilitators with an understanding of trauma-informed consultation practices. ACYP staff also underwent LGBTQIA+ awareness and support training prior to conducting this research. This training was provided by Twenty10.

At the conclusion of each consultation, young people were provided with information and resources to seek support if required.

It is important to note that experiences of physical and sexual assault were disclosed during some group discussions. In these instances, ACYP staff contacted the young person after the discussion to ascertain whether police had been informed of the incident and if a child protection report had been made. In all cases, appropriate investigation and reporting processes had commenced and so it was not necessary for ACYP to make any additional reports.

## ■ Sample

The sample frame below details the types of groups participating.



	Government high school	Non-government high school*	Other LGBTQIA+ support group^	Online groups°
Sydney	9	3	2	8
Regional and Rural NSW	8	4	3	
Total	17	7	5	8

\*While a smaller number of non-government schools were represented in the final sample, a number of participants spoke about their previous experiences in non-government schools, including where they had changed schools part-way through their education.

^Community groups included headspace groups and other local support groups.

°Online groups brought together those young people who were not part of an established group. Participants were drawn from across NSW.

At the close of each discussion, participants were invited to complete a demographic form to capture the diversity of experiences represented. It was not compulsory for participants to complete this form and therefore the summary below reflects the demographics of 210 young people, of the 233 who participated. In addition, some participants completed some but not all the questions below.



**Gender**



Cisgender male.....	29
Cisgender female.....	50
Cisgender (no further specified).....	2
Transgender.....	23
Non-binary and other gender fluid identities <sup>8</sup>	81
Unsure or questioning.....	7
Prefer not to say.....	2

**Sexuality**



Gay.....	20
Lesbian.....	18
Bisexual.....	54
Pansexual.....	24
Asexual.....	19
Queer.....	50
Unsure.....	6
Prefer not to say.....	2

<sup>7</sup> One young person of the group of 29 was aged 25 years.

<sup>8</sup> This category includes some gender identities that were listed less frequently but are commonly included under non-binary and gender fluid as umbrella terms. These include young people who identified as agender, bigender, demigender, queer, demi girl, demi boy, gender fluid, gender non-conforming.

ACYP notes that participation from the intersex community is not included in this report. We did not require young people to declare their intersex status, nor did we ask specific questions about the experience of intersex people. Therefore, while there may have been some participants who were intersex, they did not declare this on their demographic forms and did not discuss this in the groups.

## ■ Quantitative survey

This report incorporates a sub-set of findings from the 2022 Tracking Survey. As part of ACYP's ongoing work in the *NSW Strategic Plan for Children and Young People 2022-2024*, ACYP will publish annual results from a quantitative survey that tracks the experiences and perceptions of young people in NSW across six key commitment areas. The benchmark results for this survey were incorporated in the *NSW Strategic Plan for Children and Young People 2022-2024*.

Findings drawn from the 2022 survey have been incorporated throughout this report, comparing the results for the general population of young people in NSW to that of LGBTQIA+ young people.

This was an online, quantitative survey of n=1005 young people aged 10-24. Of these, n=185 indicated they identified as LGBTQIA+. Throughout the report, these will be compared to those who did not identify as LGBTQIA+, n=820.

Quota targets were set to ensure a good cross section of the population across demographic subgroups. Data were weighted to ABS population data for age, gender and location. At an overall level, the margin of error at a 95% confidence interval was +/-3.1%. We note the margin of error will be larger for LGBTQIA+ participants.

The survey was conducted for ACYP by professional research firm, SEC Newgate Research, which is a member of The Research Society and the Australian Polling Council. ■

# 1: Experiences in the Community

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*“A little sticker saying  
‘LGBT welcome’ goes  
a long way.”*

**Young people raised both positive and negative aspects of belonging to the LGBTQIA+ community in NSW. On the positive side, community-wide celebrations and displays of support were enjoyed and appreciated. Young people with good support systems also spoke favourably about friends, family, allies, support groups and online communities.**

Young people had mixed experiences regarding their journey towards expressing their LGBTQIA+ identity. They discussed access to information, their 'coming out' experiences, cultural differences and issues in relation to official documentation.

On the negative side, young people also discussed the many difficulties that come with being part of the LGBTQIA+ community. These included lack of understanding and support by family, friends and peers, discriminatory practices and legislation, negative media representations, and violence both against and within the LGBTQIA+ community.

It is important to note that while a mix of good and bad experiences were reported in relation to belonging to the LGBTQIA+ community, on the whole, young people reported more negative encounters in their day to day lives.

## ■ **Community-wide celebrations and displays of support**

A sense of belonging and feeling supported are key factors related to positive wellbeing for all young people.

LGBTQIA+ young people spoke favourably about participating in community-wide events such as Mardi Gras and other pride marches, Pride Month, Wear it Purple Day and International Day Against Homophobia, Biphobia and Transphobia (IDAHO-BIT). Specifically, young people reported that such events promote a sense of belonging and inclusion, acknowledge the successes and progress made and spread awareness. This was particularly beneficial where young people had experienced exclusion or rejection in other parts of their lives.



*"Mardi Gras and celebrations and the whole parade is a really uplifting thing. I've marched in it a couple of times and it's just been a really good experience."*

*"I just think something that does work well is definitely having Wear It Purple days and things like that within schools."*

They also reported that over the years these events have become less about political fights for LGBTQIA+ rights and are now really just celebrations where they can be themselves.



*"It's more of a fun event than a protest, which is good."*

Linked to this, young people said that in some ways there is more acceptance of the LGBTQIA+ community than in the previous generation. They acknowledged the significance of key people participating in Pride celebrations and events, such as mayors and some politicians.

Young people appreciated that many educational institutions and workplaces were also starting to recognise and support these special events.



*“Some major institutions ... I’m in university ... I’d say beyond Pride month, there is definitely some level of action beyond you know change in profile photos to rainbows for a month. Like I know at UTS, obviously we’ve got Queer Collective, specific queer societies for queer events ... and even in other jobs that I had, like I also work for Coles ... and they celebrate, encourage people to celebrate World Purple Day and Pride month, so there is more effort, or at least more awareness around these opportunities for awareness, I feel from these major institutions.”*

However, while these community-wide celebrations were enjoyed by many young people, there was discussion that such events were not equally accessible, particularly for those living outside of Sydney.



*“I’m three hours away from Sydney and like just that distance has like stopped me from going to a lot of things.”*

*“Having stuff like that ... that’s easily accessible so we don’t have to go all the way to Sydney would be nice to have.”*

During the consultation, young people were asked how connected they felt to the LGBTQIA+ community and 78% reported feeling connected or very connected.

### Level of connection to the LGBTQIA+ community (%)



● Not at all connected ● Not very connected  
● Neither ● Connected ● Very connected

In addition to celebrations and events, young people identified public displays of support in the community as an important factor in creating a feeling of safety and inclusion. They reported that posters, signs, flags, stickers and use of pronouns in schools, workplaces, services, cafes and other public settings acknowledge that society is becoming more accepting of the LGBTQIA+ community.



*“So yesterday when I was at Coles right, I saw their name badges and their like little pronouns at the top. So it’s a very simple thing and I know it’s not just Broken Hill based, but I just think regularly having pronouns on things just so you don’t accidentally misgender anyone is really important.”*

*“Just general posters that say things that are kind of inclusive of trans people.”*

Consultation-based individual response question.  
Base: n=164 – some participants chose not to respond.



Similarly, some young people reported that their schools had visual displays of support for LGBTQIA+ students in the form of posters with the words “this is a safe space”. They said that this made them feel supported in their classrooms and by the school overall.

Young people also expressed a desire for more pride stickers and displays of support across the community. They also raised that these displays of support should be visible all year round and not just during certain times of the year such as Pride Month, as this gave the impression of tokenism which itself undermined the intended support.



*“We deserve more than a month like of people supporting us, I don’t want to see people like businesses especially like we support the LGBTQ+ blah, blah, blah, blah for a month and then they just totally scrap it and then everything goes back to normal.”*

*“I think having it [pride displays] not year around [or] all the time also just increases the stigma as well, because people that are homophobic, they see it for like a month or a week or a day sometimes and that’s when the homophobia is like, massively, just spikes because they don’t see it anywhere else, they don’t have to even think about it. It doesn’t bother them because they never see it, but then for a month it just goes vroom.”*

## ■ Support systems for LGBTQIA+ identifying young people

Young people identified several support systems including friends and allies, older LGBTQIA+ people, pride groups in schools and local services, safe spaces and online communities.

Overwhelmingly, young people identified other LGBTQIA+ friends as their most common form of support. They reported that their shared experiences and similarities help them to feel respected, understood and included. In addition, young people were able to support each other through their journeys of coming to understand their gender identities.

**Young Person (YP):** *Friends respect you.*

**YP:** *Yeah, they just get you.*

**YP:** *They’re on the same level.*

**YP:** *They’ve been through similar experiences, they respect who you are.*

**YP:** *We just have a bit of a pension [penchant] for coming together. I don’t know if it’s just a ...*

**YP:** *We call it “Gay Gravity”.*

**YP:** *All the LGBT kids sort of just end up gravitating.*



*“LGBT community is my only place to feel like I belong. Twenty10 helps us connect and I can be myself and be who I actually am. All our mutual experience helps a lot –these people are like me.”*

*“My friends have been really helpful. There’s a lot of us in my personal group that identify within the community and it’s just nice to kind of figure things out at the same time as other people, so even though we don’t know what’s going on, we don’t know what’s going on together and we’ve kind of just got each other to toddle along with.”*

Non-LGBTQIA+ friends and allies were also good support networks for some young people. Specifically, young people reported that they especially appreciated when their friends did not make a big deal of them coming out, tried to use their correct pronouns and wanted to help them and make them feel comfortable.



*“They accept you and still love you, they still want to hang out with you no matter what you identify as ... they still want to have a relationship with you, it doesn’t define you.”*

Young people expressed that older LGBTQIA+ people were an additional source of support for them. They appreciated learning from their experiences and saw them as useful for providing information as well.



*“I’ve had some really nice experiences with older LGBTQI people. People who are 25 or something and they just ... they have been through what we’ve been through and they can understand.”*

*“It [Reddit] was originally supposed to be an anonymous platform for people to talk, which is why I think it’s become a helpful place for members of the queer community of all ages. Something that I’ve seen a lot of people use it for, is for younger people discovering their sexuality, asking older people who are more comfortable in their sexuality for advice or support, because that anonymity is there and there’s a level of safety there.”*

Some young people that did not have older LGBTQIA+ people in their support networks expressed a desire for this.



*“The only LGBT people I know are in school. I want to hear from other people who are older.”*

Pride groups run by schools, local councils and services were another widely mentioned form of support. Young people reported that these groups enable them to connect with and support each other in a safe and inclusive way. They also liked that these groups were often run by LGBTQIA+ staff.



*“A lot of schools they’re making clubs like teachers are organising clubs for LGBTQIA+ youth to kind of get to know each other and to have that support in place.”*

*“I’m part of a queer group and I’m starting to take over / facilitate inside and mentor inside that group which meets once a month. It’s funded I think through a government grant with a youth worker and that works really well. It’s a safe space and we kind of vote on what we want to talk about.”*

Young people in the Blue Mountains reported that their local council had organised a day for all the LGBTQIA+ support groups from schools in the area to get together. They engaged in fun activities, had lunch and heard from a panel of LGBTQIA+ speakers about their experiences. The day was received so positively by young people that it has now become an annual event.

Apart from pride groups in schools and services, young people reported a lack of safe spaces for them to access. Headspace was spoken about very favourably, although they expressed a desire for additional LGBTQIA+ safe spaces that were not mental health based.

**YP:** *It's great to have them and like the headspace has been amazing but like there should just be other places that aren't only mental health facilities.*

**YP:** *Yeah, not everyone that is part of the community is mentally ill.*

Young people across all ages and locations agreed that online communities had become an increasingly common form of support, advice and connection for them. They mentioned a wide range of platforms and Apps including Spectrum on Discord, Amino, TikTok, Twitter, and Reddit.



*"I am actually in this one group chat ... it's got four other people in it ... and we are all part of LGBT and we're all supportive of each other. It's just like 'Hey, I've had a bad day,' 'Oh it's alright.'"*

*"Well, there is this app called Amino and you go on it and you search up LGBT or something and it shows up several community stuff. You click on it and it's like many people on it and you can talk and chat."*

*"I'm just entering into a more adult area of interacting with my community and a lot of the way that I connect with my community is through dating apps not necessarily for dating, it's through dating apps that I find people to become friends with."*

Many of these platforms have sexuality and gender specific chats, which young people found extremely useful.

Young people reported that often these platforms had security features that were effective at preventing homophobic behaviour.

Even without the extra security, young people said they were able to find pockets of communities where they felt extremely supported and were not subjected to discrimination or harassment.

However, there were also examples given of young people having experienced bullying through online communities. This was especially common on gaming platforms.



*"I have had things like cyber bullying and harassment targeted towards me and my online friends directly, through things like infiltrating those safe spaces and things like that and I definitely think that it's a big issue."*

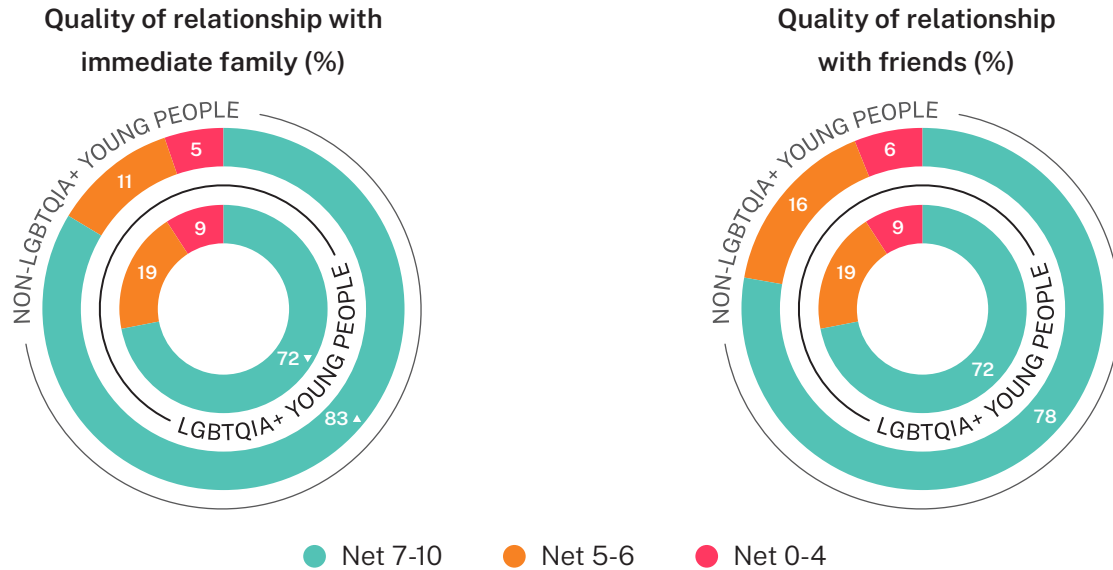
Notably, families were not frequently mentioned as a key source of support. While some raised that their parents were supportive – or were trying to be – they were not characterised as key sources of support for most. This is explored in greater detail below. ACYP notes that adolescence is characterised by a natural, gradual independence from parents<sup>9</sup>, however it is notable that they did not feature prominently as a central source of encouragement.

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<sup>9</sup>Australian Institute of Family Studies, (2006) *Young people and their parents: Supporting families through changes that occur in adolescence*, accessed via: <https://aifs.gov.au/resources/practice-guides/young-people-and-their-parents-supporting-families-through-changes-occur>.

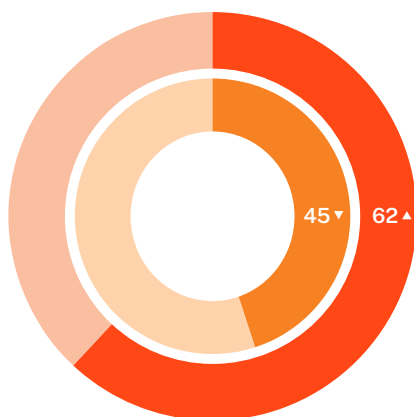
## Quantitative findings

The idea that young people are more likely to go to their friends than their family for support is reflected in survey data which found LGBTQIA+ young people were less likely to report high quality relationships with their family compared to non-LGBTQIA+ young people. There was no significant difference when it came to the quality of their friendships.

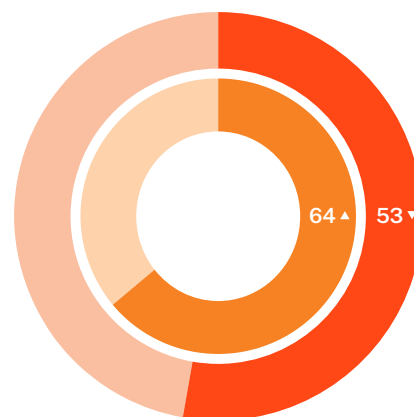


However, survey findings also showed LGBTQIA+ young people were more likely than non-LGBTQIA+ young people to say they could confide in their friends and less likely to say they could confide in a family member.

**Do you feel you have someone you can confide in? Yes - a family member (%)**



**Do you feel you have someone you can confide in? Yes - a friend (%)**



● Non-LGBTQIA+ Young People    ● LGBTQIA+ Young People

Q. How would you rate the quality of your relationship with... your immediate family? ... your friends?

Please answer using a scale of 0 to 10, where 0 means very poor and 10 means excellent. Base: LGBTQIA+ n=185, Non-LGBTQIA+ n=820.

Q. Do you have someone –either a friend, family member or someone else– who you feel you can confide in? Base: LGBTQIA+ n=185, Non-LGBTQIA+ n=820.

▲ ▼ Indicates a statistically significant difference

## ■ Journey towards identifying as part of the LGBTQIA+ community

Young people reported mixed experiences in their journey to expressing their gender and sexual identities. For many of young people, identifying as LGBTQIA+ was described as a very difficult and isolating experience. They also reported feeling disrespected on a regular basis.



*“I would say it’s a very lonely experience, despite any program that can come to us, it is very lonely and it’s something that you can’t understand unless you are queer, as much as you want to.”*

*“I just feel like they are not respecting who I am as a person, but like it matters on the day, because sometimes I’m fine with whatever, but then some days, it just really hurts. It’s just like poking an open wound kind of.”*

Young people talked about navigating many difficulties while learning about, understanding and eventually expressing their identities. These included access to information, reactions from family, friends and the wider community, cultural experiences and legal and administrative barriers.

## ■ Access to information

Online sources were used by all young people when exploring and expressing their gender and sexual identities. These included Google searches, YouTube, Ted Talks, TikTok, Wattpad, Instagram, Discord and Reddit.



*“When I was younger, I took a lot of ‘Am I Gay?’ quizzes. I did some research on like what all the different names mean and stuff like that, to see if I could pinpoint it.”*

*“Reddit and stuff, you can anonymously look for information that you wouldn’t get, so it’s like we don’t get gay sex-ed, so you kind of have to like teach yourself and I don’t want to get like any STDs or something so I have to like go on Reddit and be like ‘how to not get STDs ... gay’. Yeah, so it’s like you educate yourself by the internet.”*

YouTube and TikTok videos were raised as a primary information sources for young people. They reported listening to many different people to see what they most identified with.

While young people found online information invaluable in their journeys, they also acknowledged the dangers associated with this ease of access. They spoke about this in terms of exposure to information that may not be age appropriate, as well as difficulties in navigating reliable versus unreliable information sources.



*“A lot of what we like I guess as the youth or whatever have to learn about queer stuff, is online and there are a lot of great resources, but there’s also stuff that isn’t necessarily for a 12 year old to be viewing or like it’s really hard to navigate through those spaces, because while there are good resources, it’s hard to distinguish, especially when you are trying to figure yourself out and that means that a lot of people end up consuming misinformation or being exposed to content that is way too much mature for someone their age, because that’s where they get their information from.”*

As explored later in this report, young people said they hoped this gap would be met by quality sex-education and accessible healthcare services. In two separate groups, the idea was raised for the NSW Government to create a website where there is access to reliable information from trusted sources that includes resources for young people and parents as well.



*“The main thing, even for like kids and adults just in general ... we just need like a stable and like reliable like website that we can go to for that information, like a New South Wales Health Organisation, like other stuff we just need reliable help.”*

*“I feel like having a government like run website ... something that’s like got the stamp of approval.”*

## ■ Reactions from family, friends and community

Perhaps the most difficult aspect of young people’s journeys to identifying as LGBTQIA+ was making the decision to “come out” or “invite in” family and friends. Young people reported that this decision was impacted by a variety of factors including societal attitudes, uncertainty of what reactions would be, cultural and religious expectations and general fear.



*“If you are trying to work it out and you are surrounded in an environment in which some people make those off the cuff comment remarks about queer identifying people, then it can make the decision to come out harder and while like ... you always know who you can and can’t trust to some extent, it just sort of makes the eventual decision to do so, less easy I guess.”*

*“Sometimes, people don’t have that privilege of going to their parents, because their parents aren’t understanding.”*

*“I’m often trying to navigate, like I feel it’s difficult to exist as an Aboriginal person in LGBTQIA+ spaces, but then also as an LGBTQIA+ person in Aboriginal spaces, and so often I feel a kind of sense of disconnect from two parts of my identity.”*

*“I haven’t come out ... my family, my mum I don’t think she’d be supportive, it’s hard culturally and also just generally, it’s a bit awkward and I don’t know how she would react ... I’ll stay in the closet until I move out as a safety precaution.”*

As a result, young people had mixed experiences when coming out to family. For some, the experience was positive and supportive, others were met with a lack of acceptance and understanding. In extreme cases, young people reported experiencing emotional and physical violence from family members.



Young people described the pain and anguish they experienced when family members were not accepting and supportive.



*“Coming out to someone whose opinion you value so much, it’s a big thing, especially when they don’t support it, because it just makes everything ten times worse, because you think that this person’s supposed to love you unconditionally or help you through things.”*

*“And also how much it hurts when you don’t get that respect at home.”*

In four group consultations, young people discussed the need for safe places in communities where they can go at any time of the day or night. This was raised in response to their family members not responding well to them coming out.



*“There are really simple solutions to this sort of stuff... just like even having local libraries open 24/7. I know it’s like in some ways, it’s a bit hard, you know we’ve got all this stuff here, but if you could just have a place where everyone knows there’s somewhere local that they could go at night, to be safe, that would be really beneficial.*

*“You’re going to have arguments at night when you are at home with your family. If there’s a place at night where kids or teens can go when they are feeling unsafe, that would be really beneficial.”*

*“There are some people who have things like emergency housing planned ... it’s not something you just gloss over, it’s important.”*

Young people also expressed their frustration when parents and other family members either dismissed their identity as a passing phase or claimed that they were not mature enough to know who they were.



*“I just kind of wish for someone to just drill it into my parents’ heads how much it means to me. Like, it’s not just a little phase ... like this is who I am and I wish they would like truly respect that.”*

*“I realised I was bisexual when I was in Year 8 and then I told my parents straight away, because I felt like that would be the best thing to do ... their immediate response was like, ‘oh, you’re really young and it’s just a phase.’”*

*“It’s someone’s personal journey and one of the main things I would probably tell parents or whatever, is that even if something is a phase, that’s for the kid to work out and I think being told that is quite invalidating.”*

Other young people reported that their families were accepting of them yet did not really want to talk about it again afterwards. Others still said their families were great supports from the very beginning, and for others, the support and acceptance grew over time.



*“My parents are very heteronormative ... they’re okay with me being queer but they’re not okay with showing that. They’re ‘Okay, you just stay in your own space, you do your own things.’”*

*"I would say my family is my biggest support, because my family's also really, really inclusive and as soon as I came out, everybody accepted me and said that they loved me either way, and that they really didn't care and they don't mind, yeah. So, I would say they are my biggest support."*

*"I have my parents who are pretty big supports for me. At first when I came out 5 years ago, it was a bit of a different story, but now, recently I've been able to start testosterone and all that, so my parents are a pretty big support. My dad's still learning but my mum is supportive of me, so if I have problems, I usually go to her."*

It was also common for young people with LGBTQIA+ family members to report feeling more accepted.



*"My sister is trans as well and she came out a lot earlier on than me, so my parents kind of had already been through it so it wasn't that big a deal to them."*

*"Like my extended family, because a lot of the family on my dad's side is queer, so it's like really like good because like in a room, like everyone's gay and then there's like my dad and then like it's really funny watching his reactions, but like I think that's really helpful to have like so many people around me."*

They reported that for parents to be more understanding, many need to disconnect from preconceived notions they have about who their children are and will become.



*"I wish it didn't matter. I wish I could tell my parents and it would be like the same day as it was yesterday and Dad wouldn't lie on the floor thinking about it as if I'd just told him like I was a terrorist or something."*

Young people discussed their thought processes on whether to come out to peers at school and to work colleagues. They reported being selective on who they told in these contexts and often concealing their identities as a protective mechanism.



*"I guess I feel safe, but I feel that's just because it's not something I am as open about ... I mean if you ask me I'll tell you, but it's not something I let a lot of people know and I feel like that's just for protection I would say."*

*"I don't hide it to people I'm close with, people I'm close with know that I'm gay ... it's not like people outside my friend group won't know that I'm gay, but I don't ... I've not made a public announcement. The vast majority of the year won't know I'm gay, probably."*

Young people that had come out to friends and peers were met with a mix of positive, negative and neutral reactions. Of those that had experienced negative responses, these included friends distancing themselves and peers making rude and discriminatory remarks as well as more extreme bullying and harassment.





*“When I started coming out in school ... the majority of my friends who I was really, really open with just slowly started kind of stepping away stepping back ... that was a really negative experience to me and that’s why I don’t, I’m not as open about it anymore, because in my life I lost all my friends.”*

*“Also bullying from other students if they you know found they found out that I was LGBTQ+ you know I received, you know I received anonymous phone calls calling me... I won’t say.”*

*“I basically told people effectively as soon as I knew, and I didn’t realise that kind of a lot of the reactions I would have were ... a lot of the boys in my year saying things that would, I feel, potentially constitute sexual harassment, specifically in relation to my sexuality, and I feel like a lot of them just didn’t realise that made me incredibly uncomfortable.”*

Young people reported that negative reactions from family, friends, peers and wider society cause them to feel alone, unaccepted and that they are not normal. As a result, they expressed a desire for a time when there was no need for a “coming out” announcement, but rather they could just exist alongside everyone else without there having to be a separate LGBTQIA+ community.



*“There doesn’t have to be a queer community, like we can’t just be bunched up as one separate group from the rest of people, because that just enforces that we’re not normal and we’re just other people.”*

*“Like we don’t owe anyone queerness or straightness, it’s ... we are just ... I just want to exist you know.”*

*“I don’t want to come out to anyone. I just want them to already be accepting of the fact that someone could be gay.”*

## ■ Legal and administrative issues

Young people expressed frustration and disappointment with the difficulties they faced in changing their names and pronouns. This was most commonly experienced in school settings where schools were unable to allow name changes on class rolls and report cards without parental approval.



*“My report card still has my deadname on it, which is one thing that I spent a long time talking to the Deputy Principal and the welfare teachers about, and they said that they can’t change that and that’s something I thought I would note, is really annoying, because I get my report card and I’m always really proud of my report card because I work hard in school, but then always at the top, is just right there, huge letters, my deadname.”*

In one school, young people reported that to change their name on the roll call they needed to re-enroll and have a legal certificate. Young people said they find these restrictions “annoying and frustrating because some parents won’t consent”.

Young people reported similar experiences with some health services and this issue is explored in greater detail in the education and health sections of this report.



*“It [health record] would have my deadname on there and I would be like ‘I really want to change that’ but I can’t because I need my mum to do it and she’s like, ‘no, you’re not doing that, do it yourself when you are 18.’”*

Young people also expressed great concern at proposed legislation that would impact LGBTQIA+ identifying people. They said that such proposals only make it more difficult to navigate legal and administrative issues such as changes to their name or gender marker. In addition, young people highlighted that these laws would take away the advancements in LGBTQIA+ rights that have been achieved.



*“There’s bills to take away what we’ve fought for.”*

*“In Australia, there’s a lot of bills coming in too from education, which is the like one that’s against trans people and stuff like that.”*

While young people did not necessarily recount all details of these legislative changes accurately, ACYP observed that this group had strong views, and were extremely passionate about their rights as LGBTQIA+ young people.



*“I think a couple of months ago they passed the Religious Discrimination Act, which lets Catholic Schools or religious schools kind of discriminate ... I think that was a huge step back for Australia ... it reinforces the idea that LGBTQIA people aren’t normal and therefore, should be excluded from normalised society.”*

*“I want my sexuality, gender or whatever not be looked not as politics, I just want to be a person.”*

As a result, young people reported that there is a need for more diversity in Government, with more LGBTQIA+ politicians to advocate for change.



*“Obviously it’s everyone’s responsibility to push for equality, but it’s especially important that we get those cishet [heterosexual] white men on board, on our side, because real change won’t happen until those people are willing to accept what is abnormal to them, because they are the ones with all the power in society generally.”*

## ■ Media representations of the LGBTQIA+ community

Young people reported that media and popular culture is filled with representations of the LGBTQIA+ community, including social media, television and film, magazines and news articles. Their feelings about these representations were mixed. On the one hand, they said that the increase of LGBTQIA+ identifying people being represented across all media sources can help with normalisation and acceptance across society.



*“With the media, the normalisation and showing of same sex relationships, seems to be slightly more normalised. Like even health insurance ads, they’ll casually slip in same couples and stuff like that ... so I think that normalisation in the media does help.”*

*“When the show Heartstopper came out there was such a big explosion about it because it was the first positive gay show.”*

*“I felt so represented when I watched that show [Heartstopper], I was so happy.”*

However, there was also discussion that much of the media and popular culture is either tokenistic or stereotypes the LGBTQIA+ community. In terms of tokenism, young people reported that there is typically an increase in LGBTQIA+ representation during Pride Month and then it disappears. They also noted that there is a sentiment that the media are simply engaging in a tick the box process of LGBTQIA+ representation.



*“I feel like basically more representation is good, but not the token representation, not all the like ‘oh look, its Disney’s first gay characters’ which has happened like four or five times.”*

*“You see a lot of representation now in like TV shows and ads and clothing stuff, and sometimes it just feels like really forced. Like they’re trying to meet a quota for queer people.”*

Young people also reported that media stereotypes of LGBTQIA+ people typically involve making a “big deal” of the fact that there is this representation; or the representation often involved a dramatic episode. These stereotypes then serve to perpetuate negative attitudes that can lead to further discrimination and harassment.



*“It’s like seen as a big deal, but it would be better if it was just like, that’s just what it is this time, it’s not like, ‘whoa look at this queer person in an ad, amazing’, it’s just like this person happens to be queer.”*

*“So a lot of movies right now have throw away gay lines, which are one or two lines that they can cut out for international release. But I feel like what needs to happen is to not make a big hubba about it, be like ‘this is normal’ by not being like ‘look at this gay character’ it’s the only characteristics of it, is that it’s gay and there’s no actual storyline of this character.”*

*“So, in shows when there are queer relationships, I find that it’s never implied in the same way that it is with straight relationships, like there can never be a casual queer relationship in a show, it always has to be implied by a huge coming out story ... Or huge drama, like someone cheats on their boyfriend for a girl. It’s always just so dramatic, it’s never casual.”*

## ■ Discrimination and violence against and within the LGBTQIA+ community

### Against the LGBTQIA+ community

Experiences of humiliation, rejection, homophobia and transphobia against the LGBTQIA+ community were widespread among the young people who participated in consultations. Schools and online forums were the major settings in which this occurred, as well as in the general community. Young people expressed that these experiences had resulted in them feeling unsafe, limiting their movements and had impacted their mental health and wellbeing. Most alarmingly, across many focus groups, young people reported having been told to kill themselves by peers; and in some extreme cases, young people had been physically and sexually assaulted. These incidents had been reported and become police matters.

“I’ve experienced a lot of violence with being trans. I’ve almost got thrown off the second balcony of school and [I was] called a ‘tranny fag’ as they were trying to pick me up, yeah, so even though our school is small in numbers I guess, there’s still a lot of discrimination.”

*“I used to post photos of me and my girlfriend on Instagram and I have a public account, so anyone that saw it and didn’t like it, they would direct message me and call me slurs. Tell me to off myself, tell me that like I’m disgusting and that I shouldn’t be living and things like that.”*

*“I’ve been called a slur a lot of times ... just a car passing by on the street ... you don’t really feel safe in everyday life when you know there are people out there that want to hurt you, for just being yourself.”*

*“I had the bi flag, and I was down walking to the beach and someone just ... some guy ripped it off me and lit it on fire and said I was disgusting.”*

*“I’ve been told not to associate with people because I might spread the gay; people have accused me of spreading the gay, apparently it’s a disease now.”*

As a result, young people reported feeling the need to make sure that they were careful with what they wear in public, avoid certain areas in their communities and hide their relationships in public places due to fear of being harassed.

“

*“I had a girlfriend about six months ago and we couldn’t even be like out in public, it couldn’t really be shown in anyway, otherwise something bad could have happened to either one of us. We were just scared and it was like a big thing in our relationship, it was bad.”*

*"I feel like I wouldn't feel entirely comfortable with like if I had a girlfriend, just kissing in public or holding hands. It would ... people would either only see it as like a kind of fetishisation kind of thing, or something that's completely wrong and shouldn't be happening. It doesn't feel safe enough. There are not enough people out there that are going to be accepting that I wouldn't feel safe to do that stuff in public, because you don't know."*

*"When I go out in public and dress feminine - I look masculine even with the clothes on - I always have a lot of fear even with friends that I could be beaten and harassed or just generally hate crimed."*

To avoid further episodes of violence and discrimination, young people had either been told by their families and educators to be less obvious about their identity or had made the decision themselves to conceal it.



*"I was handing out pride flags at school and got rocks thrown at me ... one of the teachers told us we had put that on ourselves by giving out the flags."*

*"I don't want to tell my workplace. I had like ... I know they're joking, but they come up to me and are like 'do you have a girlfriend yet?' and I'm like, 'no, not yet', because I don't feel safe telling them I'm gay. I know it's not a right thing, because possibly it would never happen, but what if I got fired or I could get discriminated in the workplace because I am open about who I am."*

*"I've been told by my mother to tone my gayness down, because they are not accepting."*

*"You can never be open about it, because there's always somebody who wants to make trouble and just hurt you in general."*

Others were able to avoid being targeted due to their peers not recognising that they identified as LGBTQIA+.



*"In my experience, 'cause I think I've been very privileged when it comes to this kind of thing, the way I act, the way I speak, stuff like that, a lot of people can't really tell ... like I don't fit the stereotypes of what people assume gay people to be like. So, I've never had to deal with kind of really much persecution whatsoever."*

Young people spoke at great lengths about online discrimination against LGBTQIA+ people. This was reported as occurring both generally in media feeds as well as personal, targeted attacks.



*“As a trans person, online and on social media, I constantly even if it’s not being directed to me, see a constant flow of transphobic stuff and that has in general, a pretty big negative impact on young trans people’s mental health. And I have had things like cyberbullying and harassment targeted towards me and my online friends directly, through things like infiltrating those safe spaces and things like that and I definitely think that it’s a big issue.”*

*“I have had candid photos of me, not even knowing who has taken photos of me and post it with like slurs over it, and like rubbing at my face kind of thing. It’s horrible.”*



*“TikTok especially, because it’s like the main like social media platform nowadays that everyone is on, I just think they need to get better with banning accounts.”*

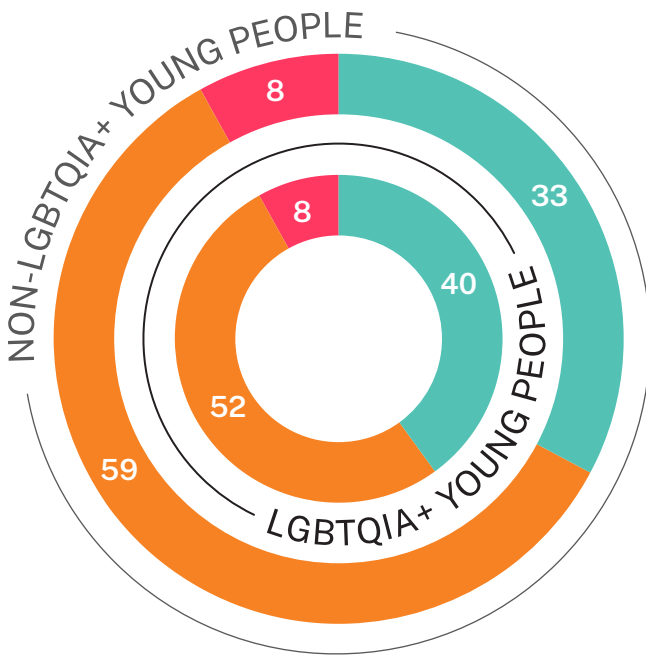
*“I think all social media platforms ... need to have checkboxes that you can tick in your interest and stuff like that so how Twitter does it at the start ... and that’s the only things you will see and I also think like in conjunction with that, they need to have things you definitely do not want to see and they will automatically block you from ever seeing it again.”*

As a result, young people highlighted the need for social media platforms to better monitor and intervene when LGBTQIA+ discriminatory accounts surface. A suggestion was also made for users to be able to filter certain topics they do not want to have appear in their feed. In this way, LGBTQIA+ young people would be protected from being exposed to discriminatory materials.

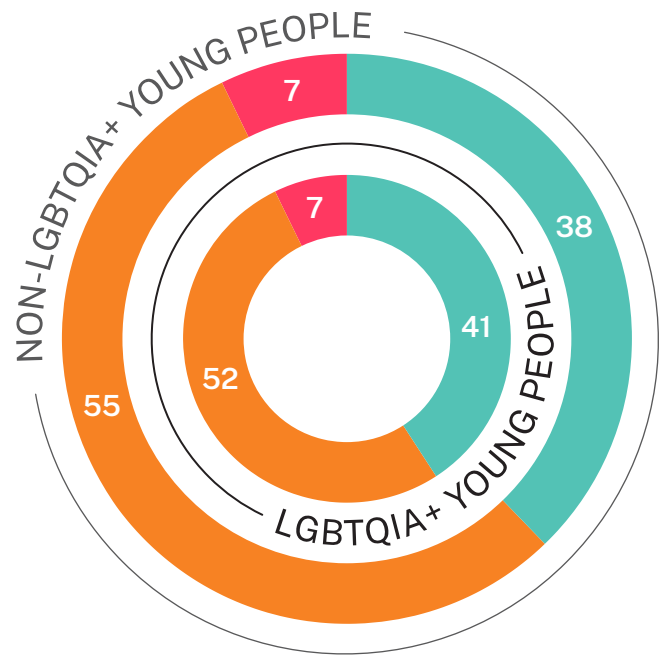
## Quantitative findings

Consultation data indicated young people who identify as LGBTQIA+ had ongoing, negative experiences with their peers and adults in their community. The quantitative survey found roughly 4 in 10 LGBTQIA+ young people had experienced bullying or discrimination in the prior 12 months.

**Experienced discrimination or have been treated unfairly in the past 12 months (%)**



**Experienced bullying in the past 12 months (%)**



● Yes ● No ● Unsure

We note that survey data asked young people about experiences in the prior 12 months, while consultation conversations were not limited by this time period. Conversations from the focus groups indicated a high prevalence of bullying experiences among LGBTQIA+ young people. This is consistent with feedback from some LGBTQIA+ young people during the consultations, who noted their bullying experiences were worse at school than they were more recently at university or in the workplace, or who noted their peers in younger grades had been more aggressive than recently in older grades.

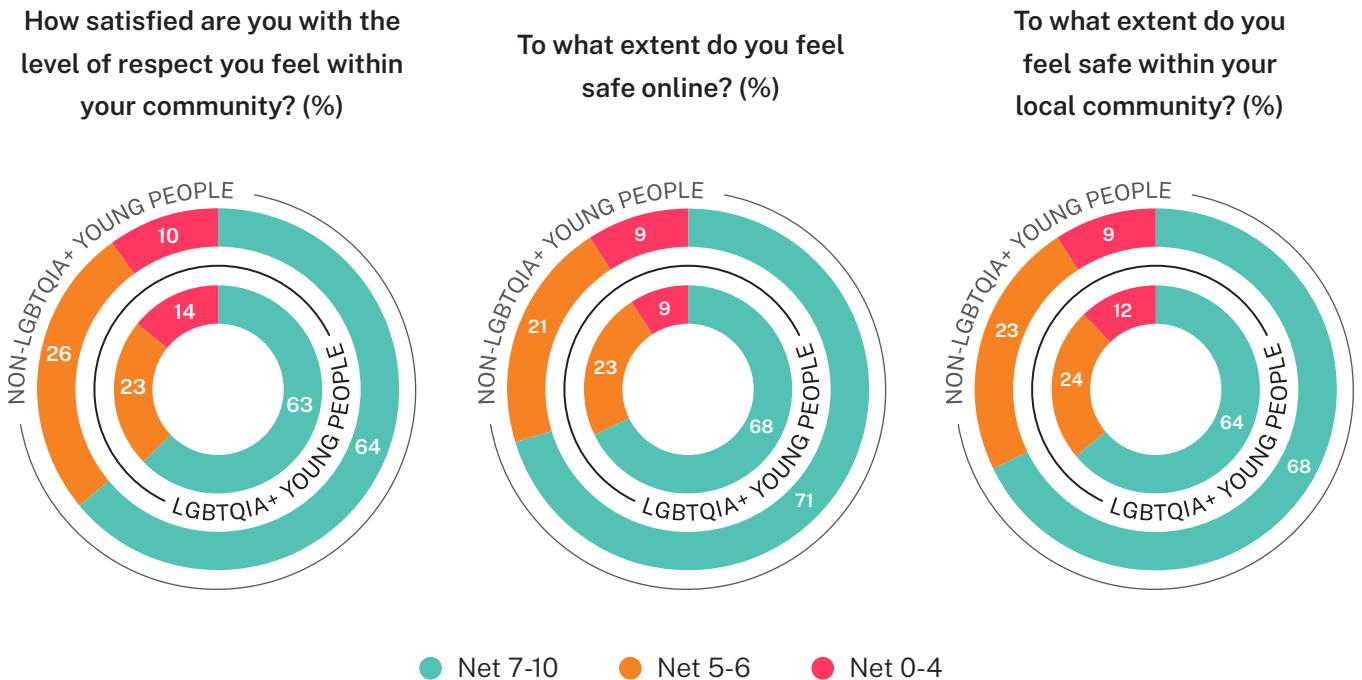
Q. Discrimination is when a person is treated differently (not in a good way) because of some aspect of their identity. In the last 12 months, do you feel that you have experienced discrimination or have been treated unfairly by others? Base: LGBTQIA+ n=156, non-LGBTQIA+ n=660 –participants were given an opportunity to skip this question if they did not feel comfortable responding.

Q. Bullying is more than just a fight or disliking someone. It's being mean to someone over and over again. Bullying is an ongoing or repeated misuse of power in relationships, with the intention to cause harm. Bullying behaviours can be verbal, physical or social. In the last 12 months, have you personally experienced bullying? Base: LGBTQIA+ n=151, non-LGBTQIA+ n=683 –participants were given an opportunity to skip this question if they did not feel comfortable responding.



When asked about their feelings of respect in different settings, 14% of LGBTQIA+ young people gave very negative ratings of 0-4 out of 10, indicating they do not feel respected in their local community. Further, 12% indicated they did not feel safe in their local community. Results were slightly poorer for LGBTQIA+ young people compared to non-LGBTQIA+ young people, however we note at an overall level these are not statistically significant differences. Similarly, there was no significant difference between the experiences of LGBTQIA+ young people and non-LGBTQIA+ young people online. This is consistent with consultation findings that while some LGBTQIA+ young people have experienced harassment or bullying online, others have found online communities that act as a source of friendship and support.

Further findings about experiences in education and at work are included later in this report.



Q. How satisfied are you with the level of respect you feel in your local community? Please answer using a scale of 0 to 10, where 0 means you feel very dissatisfied, and 10 means you feel very satisfied.

Q. To what extent do you feel safe when you are in these different situations? Please answer using a scale of 0 to 10, where 0 means you don't feel safe at all, and 10 means you feel completely safe. Base: LGBTQIA+ n=185, non-LGBTQIA+ n=820.



## ■ Within the LGBTQIA+ community

To a lesser extent, young people reported experiences of rejection within the LGBTQIA+ community. In these instances, they reported being targeted for their gender identification or not being seen as 'queer enough.'



*"I've had videos and posts made about me, by other trans people and I feel like it should be more talked about. The amount of LGBT phobia within our own community..."*

*"It's people outside, I call it the queer community, don't mind me, outside the community. There's lots of people inside, like I'm a non-dysphoric trans person and bisexual, and I feel kind of scared to tell other you know gay or lesbian people that or trans people that, because so often you see like discourse online, particularly like groups like radical feminists or TERFs, and/or like half cis, half straight or just full cis, full straight and pretending, trending. So yeah, there's a lot of that sort of thing within the groups as well, because I don't feel comfortable [with] my sexuality or gender expression around other people, because I feel like I'm going to get judged as not queer enough."*

A few other young people raised concerns about the potential vulnerabilities young gay males faced if they were targeted by older men. In these instances, younger males lacked the awareness at the time of the potential dangers and disclosed negative experiences as a result.



*"While you're in the closet and you're a young vulnerable child obviously you want to seek out people who identify similarly to you, which I think is a big issue especially for gay men is when you're young you really want to find other men who identify as gay and there's a lot of vulnerabilities there for sexual assault or things like that ... I do think there's a lot of safety issues around and it's not addressed ... when you are queer and young ... it's very normalised in the LGBTQIA+ space, when you're young you usually have a partner that's much older ... and there's not many safety precautions ... looking back now it's really alarming because I didn't have anyone to stop me, because when you are in the closet you're not talking to adults about that so it's a very vulnerable time."*

The issue of domestic violence in same sex couples was also raised in a few focus groups. Young people expressed concern that this is an area that is not often spoken about or addressed.

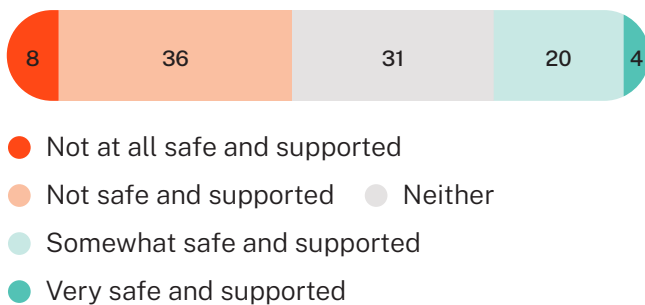


*"When you're in a 'typical' relationship if you see your father hitting your mother you can easily conceptualise as a child that it's bad stereotypically... but when it's a woman hitting another woman and there's seemingly equal power balances you don't know what's right and wrong ... it's harder to recognise it properly as abuse I guess."*

*"Domestic abuse happens in same sex couples more than we talk about ... there is confusion because it's not a 'typical' relationship, it's not what you'd expect."*

When asked to rate their feelings of safety and support as an LGBTQIA+ young person during the consultations, 24% said they felt somewhat or very safe and supported, while 45% said they did not.

### Feelings of safety and support as an LGBTQIA+ young person



Consultation-based individual response question. Base: n=157 – some participants chose not to respond.

### Intersectionality

Throughout the consultations, young people emphasised that LGBTQIA+ people are not a homogenous group; they are as diverse as any other group of young people.

“Not every person in the community has the same experiences and the fact that these experiences can be amplified by the fact that you’re from a different culture or the fact that you’re from a different race ... intersectionality is a very important thing when it comes to experiences and discrimination.”

Young people from diverse backgrounds spoke about the additional challenges they faced identifying as LGBTQIA+ and also being from a culturally and linguistically diverse background, identifying as Aboriginal, living with disability or living in a regional or rural area.

The pressures faced by many young people going against their cultural beliefs has been mentioned above. Young people from culturally and ethnically diverse backgrounds reported a fear of rejection by their own families and communities and in a few cases this led to violence, rejection and being “kicked out” of home, resulting in homelessness. Others had not come out at all due to fear of the consequences. ACYP cautions these findings should not be used to make generalisations about all cultures or faith groups but notes these experiences were reported in discussions about the tension between LGBTQIA+ identity and culture.

“I come from a very conservative Chinese family and there’s just ... like my parents, like they are not like openly like aggressively homophobic, but it’s a lot of casual homophobias and like if it comes up in a conversation or if I say something, they’ll say, ‘you’re not gay right?’ and I’ll be like ‘yeah, no’ ... in a sense, it’s not really their fault, because yeah, like their parents and the communities in which they emigrated from, like LGBTQ issues aren’t something that’s discussed, it’s not ... it doesn’t exist essentially, and yes, like almost unthinkable for someone.”

“In a more multicultural community there’s still a lot of stigma around being queer ... and it’s just not talked about at all.”

*“Coming from a Middle Eastern like background, everyone was kind of like [gesture implied negative experience] ... so I left school, I didn’t even finish Year 10 at that point and I have just been a hermit since then. And it’s been very slow because I keep pushing for my identity to be shown and it is very hard for my family.”*

*“It really depends on what your parents do and how they are. Like for some of my friends with immigrant parents, they find it a lot harder or their parents aren’t as accepting.”*

*“In Chinese culture you have children for your parents and obviously if you’re gay that’s not really applicable.”*

Young people also reported experiences of racial discrimination and alienation within the LGBTQIA+ community. They discussed additional pressures they faced to conform to a westernised concept of queerness that is “out loud and proud” and highlighted that this might not be compatible with certain cultures and beliefs.

*“They [Muslim LGBTQIA+ young people] don’t feel as if they belong in public queer spaces that are predominantly around the city, because they are really white or they don’t really have the nuances of culture.”*

As a result, culturally and ethnically diverse young people reported feeling a lack of belonging to the LGBTQIA+ community as well as their broader cultural communities.

Young people living outside of metropolitan Sydney also discussed facing additional pressures in identifying as a LGBTQIA+ young person. In addition to having limited access to specialised services, they also reported experiencing greater discrimination and harassment than their city counterparts – with the exception of those in some culturally and linguistically diverse communities. Young people reported that traditional gender stereotypes remain prominent in small towns.

*“I think it is again quite important to note that our town is very small and it is very conservative ... there is just no leeway, I suppose, and they’re quite ingrained in their thoughts ... a lot of these attitudes and opinions are intergenerational for sure.”*

There was also some discussion around the lack of understanding and support for the increasing number of LGBTQIA+ neurodivergent young people.

*“I’d like to say that there is a huge crossover between the LGBTQIA+ community and the neurodivergent community as well ... neurodivergency also looks at a spectrum, autism spectrum ... but you’re looking at two different sections and they’re using the same language, we’re talking about spectrums, we’re talking about having to come out to people as being neurodivergent if you can’t guess us. It’s something that people don’t understand ... it does amplify it.”*

ACYP notes that while there were a large number of LGBTQIA+ young people with a disability in the consultation, the impact of this did not feature prominently in discussions. ■

# How to support LGBTQIA+ young people in your community

This guide has been developed based on the feedback and recommendations of LGBTQIA+ young people. It should not be considered an exhaustive list of ways to help and ACYP would recommend that if any person wants to support the LGBTQIA+ young people in their lives, they should have a conversation with those young people about how best to do so.

## DO:

- Promote and support young people to get involved in LGBTQIA+ celebrations and events such as Mardi Gras, Pride Month, Wear it Purple and International Day Against Homophobia, Biphobia, Interphobia and Transphobia.
- Point and help connect LGBTQIA+ young people to local and online peer-based support groups.

*Young people reported that they felt a sense of belonging, inclusion and connection to the LGBTQIA+ community when they participated in these activities.*

- Use gender neutral and inclusive language, recognising the diversity of all people.
- Put public displays of support in your workplaces, on your cars and in your homes including stickers, flags, signs and posters to show your support for the LGBTQIA+ community.

*Young people identified public displays of support in the community as important for creating a sense of safety and inclusion.*



### Remember:

Be genuine. Any efforts to be supportive of the LGBTQIA+ community must be genuine to support inclusivity and not a tokenistic gesture.

## When a young person comes out to you:



- **Don't** make a big deal of it.
- **Don't** tell them "it's just a phase".



- Take the time to learn the facts – teach yourself about LGBTQIA+ concepts.
- Ask them what their preferred pronouns are and make an effort to use them.
- Respect their confidentiality – it is not your story to tell.

*Young people reported that negative reactions to their 'coming out' caused them to feel alone and unaccepted. They expressed a desire for a time when there was no need for such an announcement, because of the normalisation of LGBTQIA+ identities.*

## If you witness or know that a young person is being bullied, harassed or discriminated against (either in person or online) based on their gender or sexuality:



- **Don't** tell the young person to change their behaviour or appearance to avoid being a target.



- Call out discrimination, bullying and harassment.
- Encourage the young person to make a complaint to the eSafety Commissioner (if incident occurred online), to Anti-Discrimination NSW (if the incident involves discrimination, harassment or vilification) or to the Australian Human Rights Commission (if discrimination is related to a breach of your Human Rights).
- Encourage the young person to seek legal advice if they have experienced discrimination, such as reaching out to a community legal centre.

*Episodes of bullying and discrimination are unacceptable and cause LGBTQIA+ young people to feel unsafe. Young people recounted either being told by others to be less obvious about their identity to avoid further incidences or made the decision themselves to conceal their identity.*

# 2: Experiences of Education

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*“The main challenge  
in school is I can’t  
be myself.”*



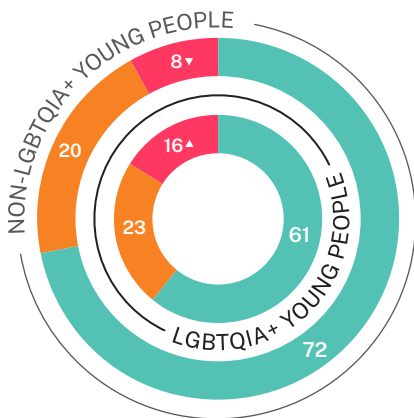


## Quantitative findings

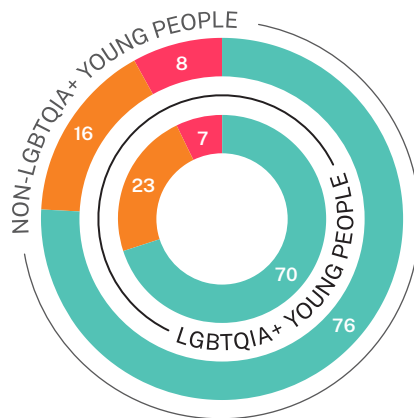
In the quantitative survey, young people were asked about their hopes for the future – both generally and in the context of education and work aspirations. While 61% of LGBTQIA+ young people were hopeful about their future in general, with a score of 7 or more out of 10, 16% were not, rating 0-4 out of 10. LGBTQIA+ young people were more hopeful about their ability to get the education they needed, with 70% giving a positive score, but less hopeful about their career prospects, with 59% giving a positive score and 18% giving a negative score.

At a general level, LGBTQIA+ young people were statistically more likely to give a negative rating compared to their non-LGBTQIA+ peers. Differences for LGBTQIA+ young people were not statistically significant for the questions about education and work aspirations, though we note that outcomes were slightly poorer across both.

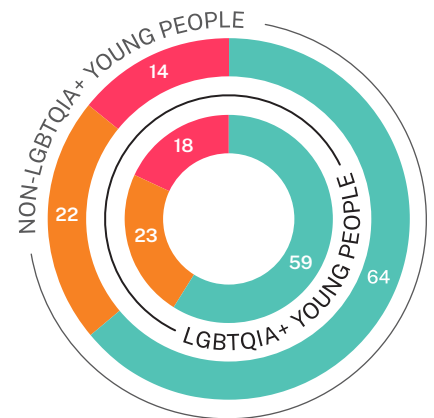
How hopeful do you feel about your future in general? (%)



How hopeful do you feel about your ability to get the education and training you need to achieve your goals? (%)



How hopeful do you feel about your ability to get a job in a field that you are interested in? (%)



● Net 7-10    ● Net 5-6    ● Net 0-4

Q. How hopeful do you feel about... your future in general? ... your ability to get the education and training you need to achieve your goals? ... your ability to get a job in a field that you are interested in? Please answer using a scale of 0 to 10, where 0 means you don't feel hopeful at all, and 10 means you feel very hopeful. Base: LGBTQIA+ n=185, non-LGBTQIA+ n=820.

▲ ▼ Indicates a statistically significant difference

## ■ Experiences with peers

### Positive, supportive experiences

Where students described positive experiences at school, by far the biggest factor was their connection to their peers and, as noted elsewhere in this report, friends were their key source of support.

Some students discussed the idea they were drawn to each other, sometimes without necessarily knowing ahead of time that their friends would eventually identify as LGBTQIA+. There was a sense of solidarity and camaraderie in finding one another and this was a strong protective factor for them against the difficulties associated with bullying.



*“At this school, I feel like I can be myself, without being discriminated against. It’s always been like a very welcoming community here.”*

*“I wasn’t as queer at school and [there were] not many out, queer kids at school so we all kinda grouped together. Created a community with those who were out. That was quite nice that we could all be ourselves with each other.”*

Other students first met their LGBTQIA+ peers through support groups set up by teachers or other school staff. As mentioned earlier in this report, these groups were highly valued by students – students in at least a third of the focus groups mentioned having a support group at school and of the groups that did not, several groups mentioned a desire to see one set up.

Students who attended these groups were overwhelmingly positive about the support provided by their peers but also by the teachers or student support officers (SSOs) who facilitated them. Some groups met weekly, others fortnightly, and students appreciated the opportunity to connect with LGBTQIA+ peers on a regular basis – even if they were unable to attend every meeting.



*“There’s no fear of people going up to you or like just disagreeing with a core aspect of your identity or something. It’s a safe place and there’s no tensions around. Everyone’s themselves and everyone’s having a good time.”*

As noted earlier, some students also spoke about feeling supported when seeing posters advertising LGBTQIA+ support groups around the school. Others were frustrated that the groups were not promoted more – such as through regular notices when other extra-curricular activities were advertised.



*“It’s really good to see support around you, not just you know have like a friend tell you, ‘oh this is okay’ but also like everywhere seeing it.”*

### Negative experiences with peers: Bullying, harassment and violence

Despite the support students felt from their friends, the main issues students reported facing in schools were bullying, homophobia, transphobia, harassment and in some cases, physical violence.



This was compounded by a lack of what young people felt was an appropriate response from their teachers and school leaders, some of whom young people felt were also disrespectful, homophobic or transphobic.



*“Personally I definitely experience a lot of people at the school being shit to say the least, especially there’s a lot with teacher’s discrimination at times too, which isn’t good, because of personal bullying I’ve found from other peers and students, that makes it a really unsafe place to go to a teacher and be like, ‘hey this is happening’ because, you know, I know that it won’t be important or like ... I don’t know, it won’t be like a thing that will be like ‘oh we need to go fix that’ because they won’t, because they also have similar views to that.”*

It is important to note that not all students described this as the main issue they faced, however it was by far the most prevalent issue raised throughout the consultation. Even among those who reported that it was not their chief concern, some offered that this was only because they had changed schools and that their experiences of homophobia or transphobia were encounters from a previous school.



*“Yeah, this is my third school, so I moved away from that school because of those people [peers at school], pretty much entirely and when I transitioned, because I’m transgender, so when I transitioned, I left that school and moved to a new one.”*

Still others reported they had not experienced direct bullying at school because they were too afraid to come out to their peers. Students who had been open about their LGBTQIA+ identity at school and who had not experienced bullying were in the minority.



*“There haven’t been any - that I know of - incidences in my high school time where I have felt really unsafe, but I think the fact that I’m not completely out is giving me a chance to spectate on the behaviour that is posed on people that are out and proud.”*

The following section details some of the experiences young people reported. They have been included in this report to indicate the breadth and severity of students’ experiences to the reader and describes a spectrum of abuse. ACYP notes that bullying, harassment or violence of any form should not be tolerated, in or outside the school gates, and that the acute violence some students experienced, does not make casual homophobia or transphobia permissible by comparison.

The cumulative impact of these experiences was that many LGBTQIA+ young people did not feel safe at school. It was not uncommon for students to mention having changed schools as a result of bullying or harassment.

Many students described the impact of homophobic slurs either being directed at them or occurring in class. The term ‘gay’ was used by their peers as a negative, in the phrase ‘that’s so gay’ meaning ‘that is unpleasant or undesirable’. This had a negative impact on young people whether or not it was directed at them. It was a common refrain among the students that their teachers did not take this homophobic statement seriously and did not address it as inappropriate. Some noted this was difficult while they were still struggling internally with their identity and sexuality.



*“You hear people in the corridor saying, ‘that’s so gay’ and other macroaggressions like that, and it tears you down a bit.”*

*“I know for me personally, I’m not comfortable being out or anything like that at school. I present myself as straight, but it’s not always like ... and I’m not saying that all students are like this, but it’s just like the other day, kids were talking about being lesbian was a disease and you know, I’ve heard so many slurs, that it’s not even funny at this point. You know, and it’s just the fact that it’s so casual that no one even blinks an eye at it, and you just kind of have to deal with it, because it’s like you know ... you can’t exactly always ... as much as I want to be like, ‘you can’t say that’, it’s like a lot of the time you can’t, so you just have to kind of sit there and deal with it.”*

*“A lot of the teachers seem to ignore like most of the ‘that’s so gay’ jokes.”*

In one group, students noted that teachers may not intervene or respond to that statement due to a mistaken belief that it did not impact anyone in the class. They drew comparisons to racism where a teacher might act more decisively if a racist comment was made in front of a student from a different ethnic background. In this instance, the teacher may or may not be aware that a student in their class may identify as LGBTQIA+ and therefore the teacher may not recognise the full impact of the homophobic statement. ACYP notes that homophobic comments should not be dismissed as harmless in any context – regardless of whether an LGBTQIA+ young person is in the room.

However, we have included this example as it may be helpful for educators to understand the true impact of permitting casual, homophobic statements in a school context.

By contrast, some young people spoke about the positive impact of having their teachers intervene when this phrase was used. They spoke about the cultural shift that took place as their peers began to realise these comments were inappropriate and slowly changed their behaviour over time.



*“I feel safe at school, but there have been times, where I haven’t necessarily. But I think that it’s good, because my year advisor is ... she’s really good for kind of like stopping this sort of stuff and I think most of the kids are at a place now, where, in my grade they understand that that’s not acceptable. In year seven, however, it was very different, when I was first starting high school. It was like a very different kind of vibe that we got from everyone, kids thought that it was acceptable to come to school and call people, those sorts of slurs and stuff.”*

Students often spoke about the impact of having slurs yelled at them, and in a few schools, being barked at like a dog as they were walking by. Across the young people who participated, most had experienced peers yelling slurs at them and this was a strong factor in young people’s expression that school was not a safe place for them.



*“I had like a group of students who were harassing me and they’d call me a slur, it wasn’t the F slur, but it was still a queer related slur and they’d throw food at me a lot of the time and I didn’t feel comfortable, and none of the teachers who were patrolling did anything about it.”*

*“I will get called slurs, like the whole class, you’ll just hear slurs, like just going around the whole classroom and it can be anything from like the T slur or like the F slur to like racial slurs and like calling people the N word and things like that and our teachers don’t do anything about it.”*

Unfortunately, homophobic and transphobic slurs were so common for most of the young people who participated, that a distinct language about the use of slurs was common across groups - that is, the use of the phrase ‘[letter]-slur’. For instance, young people referred to routinely being called the ‘F-slur’ – a homophobic slur – and the ‘T-slur’ – a transphobic slur. A few young people also referred to the ‘R-slur’ – a slur related to disability. The use of these abbreviations was frequent across all groups.

Students at religious schools or in single-sex schools would often reference facing difficulty in the school environment. Some spoke about bullying and slurs, while others limited their comments to the fact that they attended a religious school as though it were self-evident that this would be difficult.



*“I went to a religious country town school – obviously not the most ideal environment.”*

*“The main challenge in school [Student described it as a religious conservative school] is I can’t be myself because of the fear I will get bullied or beat because everyone at that school is homophobic and the school says they’re taking steps when they’re not and it just feels like they don’t care about me and its always tiring to put on a boy mask and it’s always hard to hear all the comments and not being able to do anything.”*

Regardless of the school sector, some students were also keenly aware of the school’s culture, including behaviour the school permitted but also how the school treated members of staff who identified as LGBTQIA+. In one all-boys school, students spoke about an engrained culture of misogyny and homophobia among the student cohort that expressed itself in slurs, homophobic comments and was linked to issues of consent. They referenced peers who were connected to students in another jurisdiction who were filmed chanting on public transport and felt those students were able to get away with publicly degrading behaviour, while still being honoured in positions of leadership in the school.

Another common form of bullying reported – though less frequent than hearing slurs or homophobic comments – was to ask LGBTQIA+ students invasive questions or make sexual comments. For example, for students who identified as trans or gender diverse, this often related to invasive or derogatory questions about their genitals. For students with diverse sexuality, this was largely related to invasive questions or suggestive comments about sexual acts.

While gay, lesbian and bisexual young people all reported experiencing this, it was most commonly raised by lesbians and bisexual girls and remarks often came from heterosexual boys.



*"I still get a lot of really just invasive questions, like every now and then, like and I know that people kind of like talk behind my back and all that and I've kind of stopped caring, but still it's just a bit annoying just to know that some people that know me as the trans [person]."*

Some students related this to their peers' overreliance on pornography for sexual education, which fetishised lesbian sexuality, or cultural influences that framed lesbian relationships in the context of straight male desire.



*"Boys do sexual pickup lines to people they know were gay. They were calling out really sexual pickup lines. We went to the teacher, and they said, 'boys will be boys.'"*

An insult directed to some pansexual students was derogatory comments about being sexually attracted to cooking pans or other inanimate objects.

Other students experienced more subtle forms of bullying, describing "weird looks" from their peers or a desire from their peers to relate any topic back to their gender or sexuality. Students discussed ways this could be sometimes more, and sometimes less respectful, noting that a genuine question about their identity can feel very different in tone to an invasive or repeated question. Some young people felt harassed when their peers made a 'big deal' about their sexuality or gender. This included over-the-top or melodramatic reactions to seeing minor displays of physical affection between LGBTQIA+ couples.



*"It's been normalised as well. Like, I've experienced stuff in class, like during PE, I wouldn't pass someone a frisbee, and I got called a slur."*

*"Well, I mean in the school, they would do it secretly, like maybe sometimes they will talk about you behind your back and they give you weird looks."*

*"So, we'll hold hands or something, and someone will pass and say, 'Hey you start having lesbian-you-know-what', or like we'll kiss on the cheek or something and everyone will turn around and go 'Oh my God they're making out! Somebody stop them - they're making out!' even though it's barely even a peck."*

*"There was this group of guys who were very rude, and they kept drilling on about my sexuality ... When I told them that I wasn't comfortable, they were like 'oh, I support', but I'm bi and I didn't tell them and they ended up going from my sexuality and my gender to straight up asking if I cut myself, and I got up and I took my friends and we left, and I told my teacher when I got back to the classroom and he did nothing."*

Less subtly, some students were told overtly by their peers that being LGBTQIA+ was a barrier to their friendship. They were excluded from friendship groups or told that they would be if they came out.



*"If you're gay you are not allowed in the friend group, if you're gay you might as well hide it because like, you're not allowed, like we'll kick you out anyway."*

Damaging property – particularly pride flags – was a common complaint in schools. Students would bring pride flags, pins or stickers to school and display them, particularly during Pride Month in June, as an expression and celebration of their identity. For some young people this made them feel positive about themselves and increased their feeling of belonging in the school and connection to the LGBTQIA+ community. However, those positive feelings were undermined when flags were stolen, thrown in bins, destroyed, or removed. Students were frustrated when teachers did not respond proportionately to this behaviour, particularly when destroying flags was a more tangible example of their harassment within the context of broader, ongoing, verbal bullying.



*“I was holding up a pride flag, but someone came and grabbed it and we found it in a bin after class.”*

Destruction of property was not specific to pride flags and stickers, as students in several groups reported having their bags stolen or thrown about and items removed from their bags and destroyed. One student reported having their bike attacked and destroyed on their journey to school.



*“I didn’t go to school for a week because I don’t feel safe. I used to ride my bike to school. I didn’t ride my bike anymore. They used to puncture my tyres, they would break my handlebars, they used to like to scratch my bike, and even when I’d put it in [a safe space], they’d always find it again [crying] and nothing was done.”*

*“I’ve been punched, I’ve had my bag thrown against walls, some of my stuff has been stolen. I had a drink bottle taken and then thrown off the third balcony and so the bottom was busted out of it.”*

Students reported being threatened by their peers or being told to kill themselves. Students also spoke about a worrying level of physical violence at school related to their identity. While not an experience shared by all students, physical violence was raised by students in over a quarter of group discussions. We note that not all young people may have felt comfortable to detail their experiences and so this should be considered a conservative indication.

**YP:** *We get called slurs every day.*

**YP:** *Every day.*

**YP:** *We have lots thrown at us.*

**YP:** *One of the people in my class, compared me to some racist person.*

**YP:** *I’ve been threatened to be stabbed.*

**YP:** *Someone tried to burn me one time.*

**YP:** *Had shit thrown at us*

...

**YP:** *Some of us have had people bark at us.*



*“I think one of the biggest challenges is the bullying that me and my partner have experienced over the past three years. We both got quite badly beaten up in year seven for being gay - we’ve had water poured on us. We’ve again been really badly hurt, and we get cat called in a way, quite often.”*

By way of example, students spoke about being beaten, bashed, being stepped on, being thrown against the wall, having a door slammed on them (preventing them from entering a classroom), being spat at and having food, rocks and other objects thrown at them.

In one school, students had made a list of the different objects that had been thrown at them. Another student recounted being picked up on a second-story balcony with peers indicating they would throw the student over the railing.



*[In the context of teacher intervention]*

*“Yeah, nothing really gets done unless someone gets bashed.”*

*“I have a friend down in [regional area] and he came out as trans and like he was very open about it and at first, the bullying didn’t do anything towards him, because it was more like you know wipe it off or whatever and then it got to the point where the school had to bring officers on site, because people were constantly bashing him and everything.”*

In one school, students said they needed to be careful about being seen together as a group – noting this could make them a target for bullies. Indeed, they were concerned that participating in the discussion with ACYP would make them vulnerable – as the reason for meeting together would be obvious to their peers. When the group discussion finished prior to the end of the lunch break, the organising teacher recommended students stay inside to prevent being targeted for participating and offered to escort students back to their classroom for their safety.

### Trans and gender diverse young people

Some trans and gender diverse young people described being subject to an additional layer of bullying or harassment related to the use or misuse of their name and pronouns, and feeling bullied by peers related to their use of specific bathrooms.

Young people reported they did not always feel safe to use the bathroom aligned with their gender identity. This is explored in greater detail later in this report.

## ■ Quantitative findings

While 69% of LGBTQIA+ young people who participated in the 2022 Tracking Survey gave a positive rating (7 or more out of 10) for their current feeling of safety at school; 31% gave a lower rating. Further, 9% gave a very negative rating (4 or less) – indicating they do not feel safe at school.

Similarly, while 59% felt positive about the respect they feel at school (7 or more out of 10), 41% gave lower scores, and within that, 20% felt very negative – indicating they do not feel respected at school.

As noted earlier in this report, the survey found there was no statistically significant difference in feelings of safety or respect between LGBTQIA+ and non-LGBTQIA+ young people at an overall level, however indicatively there were fewer positive ratings and more negative ratings among the cohort surveyed.

Similar to the note earlier in this report, the survey data focused on current or recent experiences, rather than students’ experiences across their schooling career. Therefore, if a student had changed schools to avoid bullying, or had experienced more intense bullying in younger grades than more recently, their experience would not be captured in the data shown below, which asks about their current feelings of safety and respect, and recent experiences of bullying.



Also consistent with qualitative findings – as described in the section titled ‘Life After School’ – feelings of safety for LGBTQIA+ students were higher in tertiary education compared to school. Positive ratings of safety jumped from 69% in school to 80% in tertiary education.

This increase of 11% is greater than that experienced by non-LGBTQIA+ students where 78% felt safe at school compared to 86% in tertiary education.

This increase is mirrored in feelings of respect where 59% felt respected at school but this jumped to 69% feeling respected in tertiary education.



Q. To what extent do you feel safe when you are in these different situations? Please answer using a scale of 0 to 10, where 0 means you don't feel safe at all, and 10 means you feel completely safe. Base: LGBTQIA+ n=185, Non-LGBTQIA+ n=820.

Q. How satisfied are you with the level of respect you feel... at school? ...at uni, TAFE or college? Please answer using a scale of 0 to 10, where 0 means you feel very dissatisfied, and 10 means you feel very satisfied. Base: LGBTQIA+ n=185, Non-LGBTQIA+ n=820.



## ■ Teacher intervention in bullying

As noted above, a common frustration from students was that they did not feel the teachers took their experiences seriously or intervened appropriately, which served to emphasise their experiences of homophobia and transphobia. This frustration applied to the whole spectrum of harassment outlined above, from general homophobic comments that were not directed to anyone, through to ongoing bullying and violence. Most students across the consultations reported that most teachers did little to address homophobic and transphobic bullying in their school.



*“You go to those teachers who have that hate, they don’t do anything about it, they don’t see it as a problem, and it just continues constantly.”*

ACYP acknowledges the methodology in this report does not provide scope to understand teachers’ decision making in behavioural support and discipline. ACYP recognises some LGBTQIA+ students may expect the teachers’ response should automatically include formal and visible punishment and that a broader context may indicate this is not always appropriate. However, in reporting on LGBTQIA+ students’ experiences, it is evident that, on balance, a culture of homophobia and transphobia is pervasive and ongoing, and that LGBTQIA+ students have seen little done to address this.



*“Two boys just won’t stop harassing us and we go to the deputies, like the deputy principals every time it happens, and they just haven’t done anything about it. They say there’s nothing they can do about it, but there’s been 6 or 7 of us putting it in reports almost every week.”*

*“One time we were talking to one of the deputies about how we kept getting stuff thrown at us and people were bullying us and he called us ... I think he called us like, ‘snowflake sensitive’ and just like, ‘ignore it.’”*

Indeed, students were keenly aware of the difference in teachers’ responses to other disciplinary matters compared to their response to homophobia or transphobia. Some of these matters, students deemed to be either equally offensive or trivial. For example, some students spoke about teachers taking racism or swearing seriously and addressing it when it occurred but ignoring homophobic comments or slurs. Other students spoke about teachers suspending students for violations related to phone use, but that ongoing bullying and harassment did not result in a similar consequence.



*“Because in history, because they make tons of Nazi jokes or love to be like ‘the Nazis were so cool’, but our modern history teacher basically like hit them with everything they did and had a detention where they went over that and shocked the kids out of it. Like, I’m not saying that it would do wonders, but if they get the significance of ‘oh I’m using a slur that led to this’ or ‘I’m purging a prejudice thing against a group’ and ‘this is why it’s horrible’, it might shock them into behaving slightly better or at least, taking it more seriously.”*

In one overt example, quoted below, a group of students were being harassed for being LGBTQIA+ and, seeing no intervention from their classroom teacher, left class as a group to report this to their school leader.

Their deputy appeared more concerned with the fact that the group has left class, rather than the content of their report. Others reported similar concerns.

**YP:** *One time when we left class because we felt unsafe, we went up to the principal's office ... not the principal's, the deputy's and he didn't care about the fact that we felt unsafe and we were being bullied, he just cared about the fact that we were out of class.*

**YP:** *And he also said, 'why do you have to bring your entire group up here, a couple of you could come up,' like we were just going to leave some of them there where they felt unsafe and a couple of people are going to tell about it.*

**YP:** *He only cared about the fact that we had left class without permission.*



*"I had my shirt unbuttoned when we went up to the principal's office, because my shirt was too tight for me at that point, and he made me leave and button my shirt up before talking to us about the fact that we were getting attacked."*

**YP:** *I notice a lot of teachers will just kind of ignore it, like when we were getting bullied, like especially in PDHPE, like the teachers just ignored it and then ...*

**YP:** *Getting angry at us for leaving the class, because we didn't feel safe.*

**YP:** *... Or like retaliating.*

In another group, students noted that some of their peers who were rewarded for being exemplary students were the same students who engaged in homophobic behaviour.



*"A lot of prefects and a lot of boys who play important roles in the school, are involved in homophobia and are involved with misogyny and I think the school actually knows, and I think they just don't care because it looks good, and they've got a good sporting record and whatever it is."*

The impact for LGBTQIA+ students is that they are left feeling unseen, alienated and harassed without a sense of justice. As noted elsewhere in this report, many felt unsafe at school.

In a few groups, students spoke about teachers running workshops or speaking with the students who were engaging in bullying, but that this did not solve the issue. In those instances, the LGBTQIA+ students had the impression teachers were not doing enough to prevent the behaviour, and that even when the issue was escalated to school deputies or principals, that nothing was being done and that the issue was not being taken seriously.



*"I think one of the main things, like getting harassed at school for something like gender or sexuality, nothing is done about it and as much as the teachers, they will say they are going to do something and they will do workshops with the students, nothing ever works and there's no like extra provision or extra supervision that helps us. It's always just like 'we'll deal with it one time and let it go.' And they undermine the extremity of the harassment as well."*

In some instances, teachers appeared to hold the LGBTQIA+ students responsible for their own bullying, such as by recommending they do not display flags. In a few instances, the schools' attempts to address bullying resulted in the LGBTQIA+ students feeling more isolated.

For instance, in one school young LGBTQIA+ students were permitted access to a 'seniors' area to keep them away from the bullying behaviour of their peers. This simply served to further alienate the LGBTQIA+ students, who felt their movements were more restricted rather than the bully's behaviour being addressed.

**YP:** *So now we have to sit down in the senior area, because they don't have an excuse to go past there...*

**YP:** *It's annoying.*

**YP:** *Really hurtful.*

**YP:** *It makes us feel like almost victim blaming.*

**YP:** *Like we're the problem...*

**YP:** *We have to adapt because of what they're doing...*

**YP:** *And we are so far away from the canteen and to go anywhere, it's further away.*

**YP:** *You feel really detached from everyone else, because you are not involved in anything else, because you have been moved.*

Some students did say they had a few teachers they could trust to take bullying seriously and to address it when it occurred. At times, this was when they had teachers who themselves identified as part of the LGBTQIA+ community. Others worked hard to be allies, as explored in greater detail below. However, as noted elsewhere in this report, some teachers themselves engaged in bullying and homophobic behaviour.

On balance, the overarching perception of young people who participated in the consultation is that many teachers do not respond to homophobic or transphobic comments, and at times, are also dismissive of more overt and targeted behaviour.



*"There's a select amount of teachers that can defend us, [that we] can tell and know what to do about it and others that are completely - they don't want to be involved ... they don't want the connotation of being part of it - like, 'Why are you defending a gay kid?'"*

## ■ Experiences with teachers

### Positive experiences with teachers and school staff

Students were able to easily articulate what made some of their teachers supportive and others not, and noted that supportive teachers could make all the difference to their experience. They spoke about the benefit of teachers who would display pride flags, signs and stickers in their classroom and that when this was genuine – rather than tokenistic – it made a significant impact on students feeling welcome and was highly valued.



*"This is very small, but we actually have a really good librarian at our school, like it's not a lot, but she really wanted to set up a Pride [display] ... like all the books that are Pride for like as a display in our school and the school [which is a religious school] said they would think about it, halfway through June, but what she did do, is she printed out all the little 'heart stop believes', and she put them around the library to try and be like, 'I'm an ally and even if we can't have like a really big display ...' she still wanted to let people know that they are included down there.*

*As someone who's not openly out at school, just to have like even just that little kind of thing being like you know ... even if none of the other teachers would really accept it, at least you have like one teacher who's at least trying to do something."*

As noted above, students were also grateful for those teachers who went out of their way to support LGBTQIA+ students by establishing peer support groups. In one group setting, students were asked who their main supports were and all students in the room pointed simultaneously to the SSO who had coordinated their support group. Other teachers and school leaders helped to coordinate LGBTQIA+ pride celebrations, either during Pride Month, for Wear it Purple Day or IDAHOBIT celebrations and facilitated students' engagement in local council events.



*"They would get them to play things like Lady Gaga over the sound system each morning and just do more things like that, as that really helps."*

Across a smaller number of schools, students pointed to examples of teachers who introduced themselves using their own pronouns. Students noted this made them feel safe and welcome, and appreciated opportunities to be able to share their own pronouns if they chose – noting that not all students may be out as LGBTQIA+ or feel comfortable to share in that environment. Students also pointed to the benefits of having teachers who themselves identified as LGBTQIA+, noting they were not only good allies but a positive example of what their lives might look like as adults.



*"Some of them introduced themselves by their pronouns and I thought that was really good. It wasn't like forcing students to give their pronouns if they weren't ready to do that, but it was kind of opening it up so if you wanted to say your pronouns you could do that as well, that's probably like ... I thought that was good."*

*Mr. [name] is a very big support and we can go to him if anything is happening and he will actually act on it. He understands us and is also a part of the community".*

*"[Seeing] trans teachers I think is really good, because a lot of trans people don't get to see trans older people and I think that it's really important for a lot of trans youth to see just older trans people and know that they can ... because a lot of people find it hard to visualise what their life is going to be like when they become an adult, so it's hard ... yeah, so it's good."*

Across the consultations, students noted their experience was shaped by the individual approaches of different teachers. For instance, two groups separately referenced teachers in their schools who had provided opportunities for students to share their pronouns confidentially via a Google-Doc and indicate whether they wanted those to be used in group settings, so that the teacher could address them the correct way. Another group referred to a teacher who overheard a student's peers using different pronouns and followed suit.

These positive interactions were incredibly meaningful to young people, however, as mentioned throughout this report, not all experiences with teachers were positive. For some young people, a ‘positive’ relationship with a teacher was simply one that was neutral – where the teacher may not be overtly supportive but was not actively disparaging.

**YP:** *They treat you normally.*

**YP:** *They don’t attack you.*

## Negative experiences with teachers and school staff

Throughout the consultations it was not always clear whether students’ perceptions of their teachers’ attitudes were a result of overt statements their teacher had made, or whether they felt their teacher was inactive in responding to homophobic bullying in the classroom. By permitting that culture or doing little to address it, students felt the teachers themselves were condoning it to some degree.

However, there were instances where students felt the teacher themselves were the source of bullying or discrimination. At times, this related to homophobic or transphobic comments, or dismissive statements about the LGBTQIA+ acronym – such as adding letters or referring to it as the alphabet. Often this was in the context of sex-education, which young people described as limited or non-existent. This will be explored in greater detail later in this report.



*“There was a teacher who straight up compared gay people to paedophiles in my year class.”*

Students felt mandatory LGBTQIA+ education for teachers was essential to create a more welcoming environment. This included general information about LGBTQIA+ concepts and how to support LGBTQIA+ students.



*“I think education for teachers is important as well ... how they handle scenarios and correct their own biases ... they need that sort of anti-discrimination training.”*

*“Incorporating some gender diverse information into already existing teacher courses.”*

## Experiences of trans and gender diverse students

Trans and gender diverse students reported some teachers dismissing their names and pronouns, and at times making homophobic or transphobic remarks. Some detail about the complexity of this is included later in the report. While some students could understand there may be other factors that might prevent a teacher from using their new name in formal documentation, the experience of being deadnamed by teachers or teachers using the incorrect pronouns in class felt to the student like bullying and discrimination.

A few young people also spoke about a few of their teachers reacting dramatically when students tried to correct their use of pronouns. Their teachers appeared to attempt to frame themselves as an ally, but in over-emphasising the struggle to use the correct pronouns, made the students feel alienated.



*“Teachers definitely need to all be given some education, like obviously some teachers already know what they’re talking about, but we had a teacher last year, who was covering for our design and tech class and ... she was very disrespectful to me. Whenever she messed up my pronouns – which was always – I would, say, I’d correct that and she would get upset at me and she would say, ‘you know I’m trying my best’ ... And she would just you know, make a whole big deal about it.”*

For trans and gender diverse students, some of their negative experiences were unique to their situation and the same behaviour that would have been suitable for heterosexual, cis-gendered students was alienating and felt harmful to them. For instance, teachers at single-sex schools – and a few co-educational schools – would use gendered collective nouns such as ‘ladies’ or ‘boys’, which made trans and gender diverse students feel uncomfortable and unseen. Students at single-sex schools also reacted to the way the school was described or branded, such as ‘Empowering young women’.



*“I don’t think she really gets the ‘they/them’, because she often says, ‘you ladies’ to us three, which is an experience and it’s not great.”*

Students at co-educational schools were frustrated when teachers used gender to arbitrarily divide or organise the class. Examples might include grouping students by gender for sporting activities or games (e.g. girls vs. boys), school photos, or group work.

In these situations, students felt uncomfortable aligning with the gender they were assigned at birth, but either felt fearful of aligning with their gender identity or were not yet out and did not want to be exposed. Non-binary students were similarly alienated by that process in not aligning with either male or female genders.

### Religious schools

Students who attended, or had previously attended, religious schools spoke about the difficulty being in classes where LGBTQIA+ concepts were discussed or taught as being sinful. At times this was taught by religious leaders in the school, but at other times regular teachers. One young person recounted their experience of having their geography teacher lecture them about why same sex marriage should not be legalised.



*“I do recall at one of the private Anglican schools, I went for a year, there was an anti-trans lesson when it came to the religion class, because I remember them talking about ... teacher talking about transgender people, comparing them to people who said they identified as a different age or different race and like trying to say that it was crazy and unrealistic.”*

*“At this school, I feel like I can be myself without being discriminated against, like it [has] always been like a very welcoming community here. But at my previous school, that was not the case. You have to be careful, you don’t let the teachers know - definitely not the priest.”*



Students pointed to these experiences as evidence of “*internal hate*” among the teaching staff. It was common for students at religious schools to raise concerns about their teachers’ views of homosexuality. For example, one student discussed their feeling that their teachers were secretly hoping to ‘fix’ their LGBTQIA+ identity. A few also raised fear about being expelled if their school found out about their gender identity or sexual orientation and one noted this had happened to them in their first year of high school.



*“I went to a Catholic school for not even half a term and one of the kids found out that I had a girlfriend and then went and told the principal, and they actually expelled me from the school.”*

*“My rule used to be for like teachers at school, as long as they weren’t like openly homophobic, then they are at least a decent person. That was like ... the bar was so god damn low, because there was a teacher who literally went on a rant about how anyone that was any kind of not straight or cis deserved to burn in hell and was like meant to experience a great deal of pain and then a week later, one of the girls in our class came out as trans and like saying that she had transitioned but the school knew that and the teachers would have had to have known that and the teacher said that with the girl in the class, knowing exactly how that would affect her.”*

*“The school signed a thing saying that schools should be able to discriminate based on orientation and gender.”*

*“They weren’t supportive of it, and they, they were quite fearful of it, it was almost like it was an issue that they wanted to fix.”*

## ■ Education about LGBTQIA+ concepts

Across all consultations, alongside concerns about bullying, the need for greater education about LGBTQIA+ concepts was the most prominent piece of advice young people gave about how Government could make a difference for them.

Students reported that the sex-education they had received was insufficient, often with no more than a passing reference to LGBTQIA+ concepts, if at all. This was particularly frustrating when it came to education about contraception and safe sex, which students note is essential and is currently included for heterosexual couples.



*“Say sex-ed class, we get like five lessons on contraception and one lesson where they brushed over like, ‘Hey LGBTQ+ people exist -respect them.’”*

*“Generally having education, also including in sex-ed, because when we learn sex-ed, we did not learn about contraception for people that weren’t straight.”*

*“[They] don’t know how to use protection safely and that’s like probably one of our biggest problems is that ... `the school board is not inclusive with telling us how to be safe in more intimacy. And, I’ll fight this to my death, I don’t care if the teachers feel uncomfortable teaching this, it needs, it’s something that needs to be learned, like if they can teach me at my Catholic school that being gay is wrong, they can teach me at least how to do it right.”*



*“Last year in like PDHPE, we were doing sex-ed and I asked about same sex relationships and she just shut me down. She told me that she doesn’t want to speak about that.”*

Others mentioned that they had received some LGBTQIA+ sex education but that the information they received was outdated or incorrect. Some mentioned materials that included terms now considered offensive such as ‘transvestite’ or ‘hermaphrodite’. Others saw materials with incorrect explanations of the acronym, such as claiming the A was for ‘ally’.

*“I was looking at the curriculum and just like looking at it and I was like, ‘this is really great, you know they are actively going to be teaching students about this and this will be great’ and then I looked at it and noticed that a lot of the terminology was not only outdated, but some of it was just blatantly incorrect.”*

*“What I did learn at school, it felt shallow. Like the teachers are only doing it because they knew they had queer kids in their class and didn’t want to seem homophobic, but like they didn’t actually care so it was really awkward.”*

There was a sense among many young people that their teachers were poorly informed about LGBTQIA+ concepts and that they needed greater education. Young people recommended that all teachers need mandatory training in order to be inclusive of LGBTQIA+ students, and also specifically highlighted the importance of this training for PDHPE teachers who are responsible for teaching sex-education and gender.

Some students also felt teachers did not take the subject seriously – either permitting other students to make homophobic and transphobic jokes or making jokes themselves. This undermined the information being provided and served to make LGBTQIA+ students feel alienated.

*“Some health teachers treat it as a joke and then students talk about it that way too.”*

*“They act as though it’s not a normal part of the curriculum – it’s some other ‘special’ [derogatory] thing.”*

As noted earlier in this report, many students relied on word-of-mouth information or were themselves a source of information for their peers in a more casual format – outside the classroom.

*“When I was in Year 12 – and most of the school knew that I was gay by then – I had a Year 10 boy come up to me, and not only asked about how gay sex worked but genuinely was like, ‘I have a boyfriend, we don’t need to use condoms, right? He says we don’t need to’ which is very concerning.”*

Across at least four groups, students recounted experiences of stepping in to provide more accurate information where their teacher did not have it or teaching their friends who were curious and wanted to know more. While most stepped into this opportunity willingly, the sense was that they should not be required to provide that information, and they were frustrated that their teachers did not know enough.



*“It [the lesson plan] just had the word queer on it and my teacher was like ‘oh queer, that’s for like weirdos’ or something really not PC so I felt the need to just overtake the class and I did.”*

In one group, two students did speak about a positive experience with a history teacher who, when they suggested classes should be learning about an important period in queer history, suggested they could assist in leading students through a workshop. However, on balance, most other students did not appear to find this experience empowering.

In another group, students spoke positively about a teacher who tried to incorporate LGBTQIA+ concepts into the broader topic of sex-education but said that they were constrained by the requirements of the curriculum which meant they already had limited time to teach each subject.

Some students felt it would be helpful to hear from a guest speaker, ideally someone who themselves identified as LGBTQIA+. In part, some liked the idea of being able to meet an older person who was LGBTQIA+ as many had limited interactions with the broader community. One group mentioned having had a presentation from Twenty10 at their school, which they had found helpful. However, students also noted that education about LGBTQIA+ concepts should not be a one-off event and should be ongoing.



*“[We need] education –having people who are LGBT to come in and speak. The health teachers don’t know what they’re talking about. A lot of sex-education is just about having babies. And you don’t learn about anything else.”*

Many students noted they gleaned most of the information they needed from the internet or by learning from peers. As discussed elsewhere in this report, reliance on the internet made young people feel uncomfortable, noting that reliable information could be hard to find and that searching for these concepts can expose young people to harmful or inappropriate content.

As noted above, a key recommendation was that students should be provided with more education – particularly sex-education. Young people felt it was important to learn in PDHPE about safe sex; protection; and information about HIV –all in the same way non-LGBTQIA+ students have a right to relevant information to keep themselves safe. Students also felt PDHPE classes should teach students about how to use pronouns correctly; how to be a good ally; what slurs mean and the impact they have; and the support services that are available to LGBTQIA+ young people.



*“[We need] more education in like schools, because I didn’t know about LGBTQ people until like maybe year 6 or 7, because my parents are Christian, so they’re not ... I wouldn’t say they are homophobic, but they just didn’t tell me anything, so I was just like uneducated, so I thought ... so as a young child, I didn’t know why.”*

Outside of PDHPE, students felt LGBTQIA+ concepts should be incorporated into History –mentioned most commonly –as well as in English, Art and Biology lessons.

**YP:** *I think in terms of the curriculum, the best place to add more queer stuff is in history, because it's so engaging and interesting, but I also think if people had a deeper understanding, it would just, you know –*

**YP:** *–Follow along with respect as well.*



*[After reading a text with a gay character]  
“It just changed my whole way of understanding ... I always thought of it as something that was kind of disgusting and a little bit deceitful and in that instance, it was kind of actually seen as a strength and beauty and it really made my life a lot better after reading that. I think, if you want to change a culture and ideas you gotta start with the art that is circulated. And I think English texts is a good place to start.”*

Students felt it was important for this to begin at an earlier age to normalise LGBTQIA+ concepts. In making this recommendation, students were nuanced in noting it may not be appropriate to teach primary school students about sex, but that LGBTQIA+ concepts are not limited to sex. They felt that non-sexual relationships and LGBTQIA+ history could be portrayed to children earlier, without sexualising the topic.



*“No one is too young to have an understanding of gender identity – you don't have to be a certain level of maturity.”*

On the whole, young people felt education was key - for young people, for teachers and for the broader community.

Many felt education about LGBTQIA+ community should be mandatory for teachers and that this would go some way to addressing the negative culture they experienced.

Some felt this should be part of their initial teacher training. Trans and gender diverse students felt teachers should receive training to understand how to use their pronouns and names respectfully. As noted above, the need for PDHPE teachers to have a good understanding of LGBTQIA+ sex and sexuality was seen to be essential.

Young people also noted the important role that parents play and felt there should be avenues for parents to receive education and support. Some felt the school could be a helpful site for this, while others referenced parent support groups run in the local community.



*“More education on it, especially parents who are like older. Like, my mum is in her 40s, she was brought up with a lot of homophobia, she wasn't brought up with gendered neutral terms and stuff like that. She doesn't have the education that I do on the topic.”*

However, there were a few students who raised concerns that even with more education, there were some members of the broader community who would be unwilling to change their thinking about LGBTQIA+ young people.



*“Homophobia is systemic and generational, so it's being taught all throughout society ... Something needs to happen with a new generation, the next generation who are going to teach people to be better.”*

*[In discussing whether more education was needed] “I think it's lack of willingness to accept, because these ... I'm going to generalise here and say that it's the straight, cis gendered, white men who are not willing to accept anything new that are kind of holding us back from moving forward.”*

## Quantitative findings

Consistent with the findings outlined above, LGBTQIA+ young people seeking information about sexual consent and respectful relationships were more likely than their peers to rely on online sources, their own experiences, TV shows or movies, and a counsellor or support group. They were less likely than their non-LGBTQIA+ peers to rely on religious leaders.

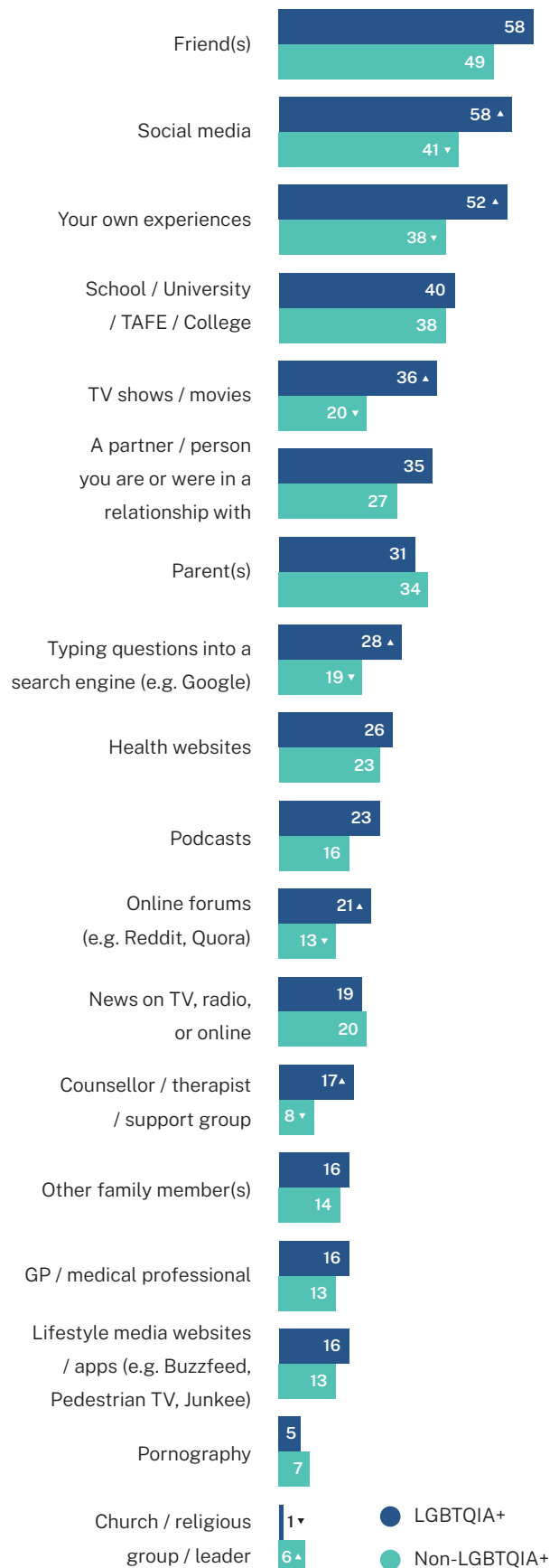
Their most common source of information was through their friends – though statistically no more so than non-LGBTQIA+ young people.

Notably, most of the sources LGBTQIA+ young people are more likely to rely on are informal and also likely subject to incorrect information. ACYP notes that a greater reliance on social media and their own experiences to understand consent and respectful relationships may result in LGBTQIA+ young people having a poorer understanding of healthy relationships compared to their non-LGBTQIA+ peers.

Q. Where do you get information about sexual consent or respectful relationships from? Base: LGBTQIA+ n=185, Non-LGBTQIA+ n=820.

▲ ▼ Indicates a statistically significant difference

## Sources of information about sexual consent and respectful relationships



## ■ School policies

One mediating factor of a young person's experience of school was the extent to which they felt supported or excluded by policies within the school.

There are some aspects of regular school life that impacted transgender, non-binary and gender diverse students in ways that did not impact students with diverse sexual orientations. These include decisions around uniforms, bathrooms, the names and pronouns that are used conversationally and the names and pronouns that are used on formal school documentation.

Across all of these issues, there was variation in students' understanding of the NSW Department of Education's policies, as well as the way those policies were implemented at a school level.

### Recorded name and gender

Preferred names and pronouns are incredibly important to trans and gender diverse young people in helping them to feel safe, welcome and seen. In instances where teachers used the student's name and pronouns to align with their gender identity, students reported strong, positive connections with those teachers. However, this was seen to be a basic step in supporting young people, and some noted on reflection that 'the bar is low'.



*"She apparently used they/them for my report card, which was a step forward, like because I think the only person who used they/them previously was my English teacher in my report cards."*

*"I feel like people don't get it and they kind of treat it like a joke or they don't take it seriously and it's really hard to feel respected."*

There was mixed understanding about what schools were able to do when it came to using the students' name and pronouns that aligned with their gender identity.



*"I came out maybe a month ... at school a month before I came out to my parents and I got sat down by like some other teachers and they told me pretty much, 'We can't do anything as long as you tell your parents' and we get like a note and all that stuff, so ... nothing got changed until my parents knew."*

According to the NSW Department of Education, students can change their name on their enrolment with the signature of both parents. In the instance where one parent agrees and the other does not, it is at the discretion of the principal as to what would be in the best interests of the student. The NSW Department of Education does not require the student to have legally changed their name or gender on a birth certificate to do this.<sup>10</sup> In order to change gender on a birth certificate in NSW, a person must have had gender affirmation surgery,<sup>11</sup> which is generally not available until the age of 18.<sup>12</sup>

However, in practice, it does not appear this has prevented supportive teachers from using a students' name and pronouns in casual conversation where the student has communicated their preference for this to the teacher – similar to the way a teacher may use a students' nickname in the classroom but will use the formal name on their school report or official documents. Some students reported their teachers had said this casual usage was not possible and said their teachers had refused to use their name or pronouns. It was unclear whether there were instances of teachers refusing to use a name or pronouns where these had been formally changed on the school roll.



*“I had to go through the entire process of like telling my parents about it, when I just tried to change like ... I didn't even want it on the report cards, I just wanted it in general / casual conversation. I didn't care about the report cards, but even saying like, 'they', they would have to go through an entire process, so everybody refused to do it for at least a solid month before I got it done.”*

*“Like most of the teachers, they use the right name, but they don't really care about the pronouns I guess.”*

*“We've had an issue here with our teachers, not knowing if they're allowed to use like trans students' preferred names ... like trying to get teachers to understand that and then like a lot of an admin staff said that that he just wasn't allowed to use that name and it's pretty ... yeah so we had a lot of issues with many teachers not like knowing if they were allowed to use [the students' preferred names].”*

Others spoke about the difficulty in navigating situations where teachers and school staff either intentionally or unintentionally 'outed' them to their parents. For some this was when a teacher used their preferred name rather than their legal name in documentation or over the phone where the student had come out to the teacher but not their parents. ACYP recognises the tension schools hold in listening to students' needs, communicating clearly with them about their policies, and maintaining an approach that works in their best interests.

<sup>10</sup>NSW Department of Education (2014) Legal Issues Bulletin 55, Transgender students in schools, accessed via [https://education.nsw.gov.au/about-us/rights-and-accountability/legal-issues-bulletins/transgender-students-in-schools#Name\\_2](https://education.nsw.gov.au/about-us/rights-and-accountability/legal-issues-bulletins/transgender-students-in-schools#Name_2).

<sup>11</sup>NSW Registry of Births, Deaths and marriages Name changes and corrections: Change of sex accessed via: <https://www.nsw.gov.au/family-and-relationships/name-changes-and-corrections/change-of-sex>.

<sup>12</sup>TransHub Under 18s accessed via: <https://www.transhub.org.au/under-18s>.





*“Yeah, I got outed. I was in a class and one of my friends was helping me talk to a teacher and the next day we went up to the office and she told the entire office and then the office told everyone else, and I wasn’t even ready to tell my mum ... they called up my mum and I asked to go home because I was so annoyed, and they were like ... they said my preferred name and then my mum was like, what?’ and I was like, ‘shit.”*

*“The school called my parents, but they accidentally outed me, because they mentioned that I was non-binary to my parents. It was just about the name and the pronouns, that was it, not the actual non-binary bit, because I knew my parents were not going to react well, and I got home that night and oooohhhh...”*

By contrast, some students were aware of this tension, particularly where they had asked a teacher to use a different name or pronouns to that on the class roll and the teacher had informed them they would only be able to use that name in legal documentation if it were formally changed on the roll and therefore required their parents’ permission. Some students would have requested this formal change but did not pursue it due to fear of their parents’ reactions.



*“It’s really hard to, at the moment, to change pronouns and stuff. For example, in school, I mean to be honest, I haven’t tried that hard, but it’s like not very accessible for me to change my pronouns and get anyone to you know call me what I would like to be called.”*

In a few instances, students reported that they were unable to change their name or gender on the school roll without a legal change to their birth certificate. They were aware they were unable to change their birth certificate until they had surgery beyond the age 18, and so believed it was not possible for their gender to be changed on the school roll. It is unclear whether this misunderstanding was on the part of the student or whether the error was in the way the school was implementing or communicating the Department’s policy.



*“In order to use preferred names or pronouns you have to legally change your name which means you need to have gender surgery and for that you need to be over 18.”*

Whatever the underlying cause, students reported that when teachers were aware of their correct pronouns but did not use them, they felt disrespected and discriminated against.

## Bathrooms

Trans and gender diverse students had mixed experiences to access to bathrooms.

The NSW Department of Education policy permits students to use the toilets and change rooms associated with their gender identity, but the policy notes that a risk assessment should be undertaken first to ensure it is safe for the gender diverse student to do so.



In the event the risk assessment shows the student would not be safe to use the toilets of their identified gender, they should be permitted to use a unisex toilet or a staff toilet<sup>13</sup>. In most schools ACYP visited, the unisex toilet option was often an accessible bathroom.

Notably, the Department policy highlights that if other students are uncomfortable with the trans or gender diverse student sharing facilities with their aligned gender identity, that the school's learning and support team should assist these other students. This aspect of the policy does not appear to be widely known.



*"I had to use the staff bathrooms because it would make people uncomfortable if we used certain gendered bathrooms."*

However, for many students using the bathrooms of their identified gender was not a straightforward decision. While some noted they used the bathroom they identified with, they felt the need to do so secretly – avoiding other students. In line with feeling unsafe at school, some noted they did not feel safe to use the boys' toilets for fear of harassment. One student noted they would prefer to use the boys' toilets but that they do not have access to menstrual bins. However, if they were to use the girls' toilets, they were worried their peers would take this as a reversal of their stated gender.

<sup>13</sup>NSW Department of Education (2014) Legal Issues Bulletin 55, Transgender students in schools: Use of toilets and change room facilities, accessed via [https://education.nsw.gov.au/about-us/rights-and-accountability/legal-issues-bulletins/transgender-students-in-schools#Use\\_5](https://education.nsw.gov.au/about-us/rights-and-accountability/legal-issues-bulletins/transgender-students-in-schools#Use_5).

Another young person described their discomfort with bathrooms generally and mentioned they would often become dehydrated, that they tended to avoid drinking during the day to prevent the need to use the bathroom.



*"I mean, a lot of the times you just use whatever bathroom you feel comfortable using, but if anyone saw you going into like the male bathroom when you are not a male or female bathroom when you're not a female, it would cause issues. Like, it's something that would have to be done in secret or like being sneaky about it or something, when it should just be ... I don't know. Bathrooms shouldn't even have a gender anyways. It's stupid."*

There was a strong preference for access to gender neutral bathrooms – both to use the toilet and as change rooms. Students recommended individual cubicles would prevent some of the concerns they had heard others raise.



*"Bathrooms are not good - we need a unisex bathroom."*

Across many schools, trans and gender diverse students were permitted to use an accessible toilet – though some were required to seek permission from a staff member (such as attending the administration office) or seek an official pass or key each time for access. In some schools, the policy around this was unclear to students and during the consultation they discussed the different responses they had received from different teachers.



*“I think we have one all gender bathroom, but I didn’t know it existed until about two weeks ago, because it’s like ... so we have the different blocks, and it’s right up the very end. It’s kind of tucked away in a corner and it’s also like a disabled bathroom I think, so all genders is the disabled.”*

*“Yeah, we have a unisex bathroom, but now it’s locked and you have to get a key, like ... and no one knows how to like do that. There’s only one person I know who has a key to it.”*

ACYP notes the additional barriers this creates for students –not only in seeking additional layers of permission to use the bathroom compared to their peers, but also the confusion for a student who may be in the process of discovering or exploring their identity, or who has not yet come out to their peers or school staff.

Students who were permitted to use the accessible bathroom felt this option was preferable to using the gendered bathrooms –for reasons described above –but was still not their preferred option. Some students felt the designation of the accessible toilet indicated that they were somehow experiencing a disability, which aligned with discriminatory comments. A few also described feelings of guilt in using an accessible toilet when they were able-bodied.

## Uniforms

While raised slightly less frequently across the groups, uniforms remain an issue of concern for trans and gender diverse students.

The NSW Department of Education policy states that students who identify as transgender should be allowed to choose from the uniform options available to them at the school.<sup>14</sup>

Most noted they were permitted to use the uniform of the gender they identified with or were able to use a sporting uniform, however some reported being unable to make that choice, or being reprimanded for using the sporting uniform.



*“I didn’t face much scrutiny being cisgender –but especially for my trans best friend, trying to advocate and organise for them to have a comfortable bathroom and another friend was realising she was trans and wanted the school skirt and they said, ‘no, no, no’ and just brought out female pants. It was a very closed-minded environment –it’s only when you connect with similar people that you find some sort of relief or support at school. It was me being at school and being like F this, having kids navigate and congregate towards me that there was a bit more support.”*

*“The old sports uniform was great, but then they kept telling us, ‘You can’t wear sports uniform on days you don’t have sport,’ and then you keep saying, ‘Oh yeah, I have sport today.’”*

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<sup>14</sup> NSW Department of Education (2014) Legal Issues Bulletin 55, Transgender students in schools: Uniform for transgender students, accessed via [https://education.nsw.gov.au/about-us/rights-and-accountability/legal-issues-bulletins/transgender-students-in-schools#Uniform\\_3](https://education.nsw.gov.au/about-us/rights-and-accountability/legal-issues-bulletins/transgender-students-in-schools#Uniform_3).

Non-binary students in one discussion raised their concerns that each of the uniforms was labelled as gendered rather than a simple description of the clothing pieces. For instance, they noted that a skirt and top was designated as the girls' uniform and pants and shirt were designated as the boys' uniform. They felt it would be more inclusive if students were simply permitted to use the pieces of clothing that felt most comfortable for them – whether that be skirts or pants – and that these did not need to be attributed to a specific gender.

One school group noted there had been a recent change in the design of their uniform that had made it more overtly gendered, and they were frustrated that the options for androgyny had been removed.

**YP:** *They've got a new uniform and they made it more gendered and more tailored to the biological sex. I'm actually going to cry...*

**YP:** *It's so bad.*

**YP:** *No one asked for these changes either, they just happened.*

**YP:** *Yeah. It was like if you are going to change the uniform, make a good change.*

In one discussion, students noted there had been a school rule (not a Departmental policy) against students using a uniform that did not align with their gender. This had come about in response to a group of students wearing a uniform that did not align with their gender as a joke. These students had started this trend and used a transphobic slur to describe it. While students were glad that the trend had been ended, they noted teachers continued to refer to that rule as a reason transgender students could not wear the uniform aligning with their gender identity.

## ■ Life after school

Some of the older young people who participated in the consultations spoke about their experiences after school in going on to further education. Most noted their experiences at university had been more positive as an educational institution compared to school. They pointed to progress being made in accessing gender neutral bathrooms and a greater sense of respect from educators.



*“At uni I've found things to be a lot better than high school. I went to an all-girls catholic high school in which I could absolutely not come out for fear of being expelled, but it can be hard finding a more specific LGBT safe space at uni.”*

However, not all experiences of higher education were positive, and some students outlined difficulties they faced.



*“I have been to TAFE and other places, and I am always relentlessly misgendered. When we are doing introductions, we should just do pronouns. But I wouldn't do pronouns [introduce themselves with current pronouns] in places I don't know.”*

A few spoke about only coming out after high school, and that this had seemed like the easiest option. One participant noted it seemed as though young people were encouraged to wait until they had finished school because a university environment would be more accepting. Those who raised this often also noted they had attended religious schools and had feared the reaction if they were to come out earlier. However, some also noted it was not always easy to navigate the university space and LGBTQIA+ groups were not always easy to find and join.



*“When I started at university, I didn’t really know whether or not to go and I didn’t go because it just didn’t feel that comfortable to enter. And yeah, you don’t really have any particular guidance or experience or training or all of that, you don’t have anyone to talk to about those issues when you come out of high school. And yeah, so when I was at high school, so there is the same sex marriage debate and yeah, it’s kind of ... you pick up the pieces of where and what is evidence of what, whether is or is it not safe to say.”*

*“We tell young queer kids particularly in Western Sydney, ‘you have to wait till university to have your safe space, in university you will get your safe space and you can meet people there but until then, good luck.’”*

*“The queer community, I think it’s like, you find a queer person, you are like ‘where do I go’ and they are like ‘just wait for university and you can go to queer safe spaces at university’ and then that’s where salvation awaits at university right, this idea.”*

One young person raised concerns they felt the LGBTQIA+ community at their university had little room for people to express differing opinions and noted a degree of conflict and an inability to share their views.



*“It’s highly politicised. They expect you to like follow their exact politics, and I feel like there’s a big issue with that with the whole LGBTQ+ community like if you don’t if you don’t go along with the group think you’re you can get really isolated and alienated.”*

One young person who worked in a university setting spoke about their frustration when they saw the university promoting LGBTQIA+ rights and diversity, but that after the university ran a training day their non-LGBTQIA+ colleagues felt they could make decisions on behalf of the LGBTQIA+ community.



*“In the university setting, there were diversity inclusion like committees or there were networks within that institution that says, ‘Well, we should focus and prioritise LGBTQIA+ peoples and rights’ and essentially what had happened is that, they had provided training to people who wanted to know more but as a result that felt as if there was performative, because you would get a certificate by the end of it. What ended up happening that was much more onerous or much more serious was that these purported allies would make decisions on behalf of the queer community within that institution without consultation with un-lived experiences or the people that would be directly affected by those policies, which I think were quite interesting because that’s kind of counterintuitive.” ■*

# How to support LGBTQIA+ young people in education

This guide has been developed based on the feedback and recommendations of LGBTQIA+ young people. It should not be considered an exhaustive list of ways to help and ACYP would recommend that if any person wants to support the LGBTQIA+ young people in their lives, they should have a conversation with those young people about how best to do so.

## LGBTQIA+ inclusive schools and classrooms

- Put public displays of support around your school or campus, including stickers, flags, signs and posters to show the school is LGBTQIA+ inclusive and supportive.
- Highlight local LGBTQIA+ celebrations and events such as Pride Month, Wear it Purple Day and International Day Against Homophobia, Biphobia, Interphobia and Transphobia.

- **Don't** use gender as an arbitrary way to group students, such as for class work or team activities.

*Young people identified public displays of support in school as important for creating a sense of safety and inclusion.*

## Creating LGBTQIA+ support groups

- Create space for student-run LGBTQIA+ groups where students can connect and support each other.

*Young people reported feeling a sense of belonging and connection when schools provided a safe space for LGBTQIA+ students to come together.*

## Referrals to support

- Incorporate LGBTQIA+ specific services (such as QLife and Twenty10) and local LGBTQIA+ youth support groups when highlighting general supports to all students -for example, on flyers pointing to headspace or Lifeline. Encourage your school to build partnerships with these services.

*LGBTQIA+ young people noted they had limited awareness of the supports and services available to them.*

## Language

- Use gender neutral and inclusive language, recognising the diversity of all people. This can include introducing yourself by using your pronouns and by providing students the option to do the same if they choose.
- Use the young person's preferred name and pronouns.

*Young people highlighted the importance of using gender neutral and inclusive language to make them feel safe, respected and included at school.*

## Bullying and harassment

- Call out bullying and homophobic behaviour and language:
  - Hold students accountable for homophobic, transphobic and biphobic behaviour
  - Support the implementation of anti-homophobic, transphobic and biphobic initiatives and policies in your school.

- **Don't** tell the young person to change their behaviour or appearance to avoid being a target.

*Episodes of bullying and harassment are unacceptable and cause LGBTQIA+ young people to feel unsafe at school. Young people wanted to see teachers take action and intervene when they observed or were the recipient of homophobic, transphobic or biphobic behaviour.*



### Remember:

Be genuine. Any efforts to be supportive of the LGBTQIA+ community must be genuine to support inclusivity and not a tokenistic gesture.

# 3: Experiences of Work

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*“We would love a diverse team, but you still have to fit in.”*



Young people had mixed experiences of the workplace, and while positive experiences in the workplace were more common, young people met these with a sense of being pleasantly surprised, noting they are often navigating spaces with a sense of uncertainty and caution.

Across the consultation, there were roughly an even number of positive experiences and those who had either negative experiences or were not out at work due to fear of negative consequences. Notably, negative experiences were quite varied and while they mirrored existing themes from students' experiences in schools, among the participants who described their work environment there were a wide range of different experiences.



*"I haven't really faced many issues with it, but that is because I am super selective about when I do come out. I would never do it in a place I don't know. I generally work in creative spaces and those people then [tend] to be more liberal and accepting."*

## ■ Positive experiences at work

Several young people spoke about working in environments they felt were fairly progressive and accepting. Some pointed to their LGBTQIA+ identity as being a neutral fact about them, and that it had little bearing on their interactions with colleagues. Others spoke about the support they received from their managers and appreciated working with older members of the LGBTQIA+ community.



*"And my manager, like she's very open about her being gay and like I feel like, she's our biggest supporter there, because if anything was to happen with a customer, she would be the first one to stand up for you."*

*"I've always been sort of afraid of coming out to my co-workers at first, but then ... I just let slip something about my girlfriend and no one's made a big deal of it yet which I'm really happily surprised about."*

*"I can [be open] like at work, like that's pretty like okay. No one's kind of mean or anything."*

Among participants who worked in retail settings, name badges that included pronouns or pronoun pins were seen as positive step. These badges prevented them from being misgendered at work but also gave them a sense of being welcomed in the workplace. Even young people who were customers at these workplaces said they appreciated seeing the pronouns on workers' name badges. Young people also appreciated seeing flags or posters in the workplace—particularly during pride month.



*"I feel like a strong sense of camaraderie at work when it comes to LGBTQ+ issues."*

## ■ Negative experiences at work

Other young people spoke about not being out at work as they were unsure how their employers would react. A few mentioned being in workplaces where older workers or customers would occasionally make dismissive comments about LGBTQIA+ young people.



One young person attributed this to living in a conservative, regional area. They felt uncomfortable knowing that their colleagues or customers felt this way and wondered what the reaction would be if they were to come out.



*“Some people just have straight up homophobic stuff just on the back of their office or on their cars, when I’ve wanted to go and apply for jobs and stuff like that ... like magnets and stuff like that and in the office, it’s like little signs.*

*“Volunteering at aged care is pretty rough, because they are more in favour in humouring people’s beliefs instead of say trying to challenge any ... so you hear really vile, transphobic, homophobic stuff, just coming out of people’s mouths and you just have to stare at a wall.”*

Several young people noted experiences of coming out to one colleague, only to find that the news had spread quickly to the remainder of the workplace. While these young people were pleasantly surprised that this did not result in a negative reaction from their peers, there appears to be a sense of hesitancy and caution, which one young person related back to their experiences of rumours being spread among peers when they were younger.

## Harassment in the workplace

A few young people spoke about experiences of overt harassment, either from co-workers or customers.

In line with experiences other young people recounted in a school context, one young person who was bisexual said they were subject to invasive questions that constituted sexual harassment. This young person wore a headscarf and felt their colleagues were more interested in her sexual activity because of the visible indication of her culture.



*“It might fall into sexual harassment. I think it’s rude to ask about your personal relationships with other people ... they say, ‘You don’t look like someone who dates women,’ then they ask questions.”*

Another said they had received threats from a customer – who they knew outside of work – while working in a fast-food restaurant.



*“I heard someone say that they were going to rape me until I knocked off to like bash me.”*

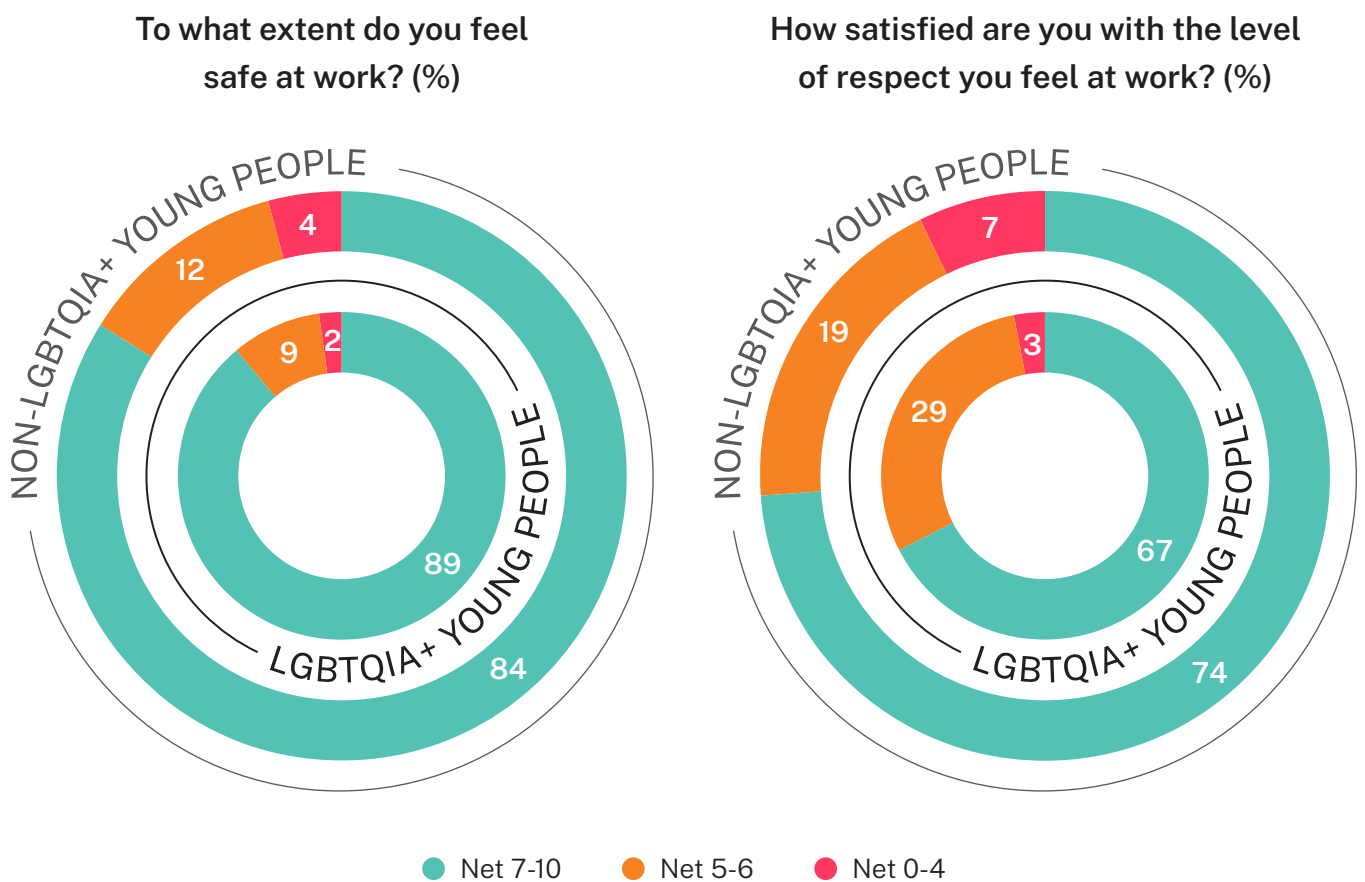
The same young person had received a pronoun pin from their manager and when a different customer saw it, they “weren’t very nice.”

Another young person spoke about working in a hospitality space and where they or other colleagues would make a mistake, the head chef would yell at them using slurs. Looking back, they regretted not trying harder to speak up against this behaviour.

## Quantitative findings

Most LGBTQIA+ young people (89%) feel safe at work, and this was the only space where LGBTQIA+ results were slightly more positive than for non-LGBTQIA+ young people (84%) – though the difference is not statistically significant.

Similarly, there were no significant differences for LGBTQIA+ young people when it came to the level of respect they felt at work (67% vs 74%).



Q. To what extent do you feel safe when you are in these different situations? Please answer using a scale of 0 to 10, where 0 means you don't feel safe at all, and 10 means you feel completely safe. Base: LGBTQIA+ n=185, non-LGBTQIA+ n=820.

Q. How satisfied are you with the level of respect you feel at work? Please answer using a scale of 0 to 10, where 0 means you feel very dissatisfied, and 10 means you feel very satisfied. Base: LGBTQIA+ n=185, non-LGBTQIA+ n=820.

## Experience of trans and gender diverse young people

Young people spoke about being misgendered at work and the difficulty and discomfort they felt in being required to use their deadname in formal, legal documents. One young person noted this caused problems when they were not given an opportunity to share their preferred name and pronouns. Several recommended this could be an easy way to make workplaces more inclusive – to introduce all staff with pronouns and provide space for new staff to do this.

**YP:** *They don't ask about preferred names or preferred pronouns in job interviews.*

**YP:** *Then introducing yourself to the team you don't get an opportunity to say your preferred name, then it can be weeks and it gets tricky.*

Some wear pins or badges to aim to avoid this, though noted this is not always successful. Another young person noted they have begun to include their preferred name and pronouns on their resume. Even with this approach, they noted their direct manager may not be aware of their identity and that this requires additional conversations each time they are misgendered.



*"I make sure that I put my pronouns on my resume because I wouldn't want to be hired somewhere if they wouldn't accept me, knowing that I'm non-binary. So, I make sure they know as soon as they meet me - I am non-binary, this is who I am, and just so that's that. But that also means that my supervisor isn't always the person who reads my resume, so, they don't always know and ... getting misgendered at work is [takes a breath] not great to say the least, but yeah.*

*It has gotten a lot better recently and it has gotten to the point where I can say, 'Hey, I would appreciate if you actually called me 'they' instead of 'she' because that upsets me,' and they will be like, 'Yep, sorry, no worries,' and it will be okay."*

Two young people noted they had been asked to limit their self-expression at work.



*"The place I work has been known for telling people to be less gay because it scares away customers. So, it's kind of hard for me to express myself in my place of work and it's very hard to feel accepted in the town I'm in."*

One young person spoke about working as a peer mental health worker, and that the feedback they received from younger clients was that it was helpful for them to see someone who was a few years ahead of them who was open about being non-binary. Despite positive comments from the young clients, this participant was told that complaints had been made against them by colleagues.

The complaints were:



*“That I was talking about too much personal information and I was like, ‘What do you mean?’ and they were like, ‘Particularly around gender and sexuality,’ and I am like, ‘Oh, was I talking like my sexual exploits and my sex life at work or was it something else?’ because I know I didn’t do that and they were like, ‘No, you more, like talking around you, like, you know,’ and I am like ‘No, like, what are you talking about?’ and she is like, ‘You know, being so, like, explicit,’ and I am like, ‘I am so sorry, would you like me to go back to the closet at work?’ she was like ‘No, no, no.”*

This young person then detailed a situation where their more senior colleagues in healthcare had felt it was inappropriate for the young person to be open about their pronouns and gender identity in the workplace. While the HR manager had, as an individual, been an ally to this young person, when their colleagues made complaints, the HR manager asked the young person to compromise and not openly reference their gender identity.



*“Like she said, ‘Let’s just find a way to bring them to the table because maybe this level of self-expression is too much in the work-place’ and I was like, ‘This isn’t middle ground conversation, it’s a [question of], can you support your staff who are queer to make it feel safe in the space?’”*

This young person spoke about the burden of being required not only to compromise on their self-expression but teach their colleagues about what it meant to be non-binary, a common experience for other young people as noted elsewhere in this report.

In their words *“I left that job because as a queer person, I did not feel safe there.”*

## Tokenism in the workplace

Young people were sensitive to tokenistic expressions of LGBTQIA+ support and efforts at diversity. A few young people noted their workplaces were actively trying to promote and celebrate diversity through their hiring choices. However, there were concerns that this did not necessarily translate to a change in culture or a supportive environment.



*“The cafe that I work at is, like, my boss literally tries to get like the people that he employs he tries to like have a lot of diversity in the people that he employs and that’s really nice, so I think that there’s some support but there’s no like, ‘Community’ if that makes sense.”*

*“I think coming to the city is empowering because it’s so inclusive – they definitely see it as a spectrum – but even now in training in that kind of workforce I am seeing it shifted beyond into tokenism, and it’s very tokenistic or nominal diversity equity and diversity and inclusivity, based on that, ‘We would love a diverse team, but you still have to fit in to all of these cultural boxes and be a cultural fit’ and it’s the way that, you know, they want as many people from as many distinct groups to still fall into a box, and as a white passing [but CALD] cisgendered person, I am capable of doing that, but I still see where other people who are more, who are queer in different ways than I am experience different hardships in finding work in the private sector.”*

One group discussed in detail instances where they were happy to see positive action to support LGBTQIA+ people but felt this was not always as genuine or sincere as it could be or felt that while their colleagues might be accepting of LGBTQIA+ people as individuals, they were not willing to make changes as an organisation.



*“It’s just a whole ordeal that is so problematic, especially in like society and the professional sphere, in professional things and then in government programs and government advertising, they seem to be like, ‘OH MY GOD LOOK, I’M DIVERSE’ but it’s like what are you actually doing with that diversity? Are you supporting them? Are you giving them avenues to show you are supporting them and not just using them for show? ... I’m very passionate about that stuff.”*

*“There’s the people and then there’s the management ... I found that management doesn’t really want to be associated with the LGBTQ community. Like they’re more than happy to say that they’re okay with it, ‘It’s completely fine, be whoever you want to be at uni [where the young person works], but just don’t put the flag near us.’ It’s really weird. And when we start asking for things that we want to facilitate -so bathrooms, trying to distance the disability bathroom with gender queer bathroom, apparently is such a big issue for this university, which is crazy -so while I’ve found the people who I interact with and the people who are more happy to be involved with allyship and stuff like that is really, really good, they really want to push things through, they’re more than happy to use pronouns that you want and stuff like that, um, management is a ... bundle of blah.”*

Another young person spoke about their frustration when a manager at their workplace joined a diversity and inclusion initiative but themselves did not have inclusive views of the LGBTQIA+ community. The young person reported there was an expectation their manager would join the initiative due to their role, but that the managers’ personal beliefs undermined the value of the work being done.



*“She was manager [so] there was expectations for her to do it and she was not open minded, but she had to go for it because that’s what the policy ... I don’t know what happened, but she had to go do it even though it didn’t align with her values, but she did it anyway and the diversity inclusion group did this event, she was supposed to do it but she didn’t, she really undermined the effect on other people of the group.”*

They also noted that it was easier to join those groups if you were more senior in your role, but that as a junior, you were reliant on the support of a manager.



*“A lot of companies now have a diversity and inclusion group which is great but that’s for more like executive and leadership positions, but like if you are a worker then like it’s going to be tough for you ... Because I feel like unless you have the support of a manager or your direct supervisor like for you to participate in those kind of things is going to create a barrier for you.” ■*

# How to support LGBTQIA+ young people in your workplace

This guide has been developed based on the feedback and recommendations of LGBTQIA+ young people. It should not be considered an exhaustive list of ways to help and ACYP would recommend that if any person wants to support the LGBTQIA+ young people in their lives, they should have a conversation with those young people about how best to do so.



## Harassment and discrimination



Call out harassment and discrimination, and hold employees accountable for homophobic, transphobic and biphobic behaviour.



**Don't** tell the LGBTQIA+ employee to change their behaviour or appearance to avoid being a target.

*Episodes of bullying, harassment and discrimination are unacceptable and cause LGBTQIA+ young people to feel unsafe.*



## Inclusive language



- Introduce yourself using your pronouns and provide scope for employees to do the same.
- Use young people's preferred names and pronouns.
- Provide name badges for all staff with pronouns displayed.
- Use gender neutral and inclusive language, recognising the diversity in all people.

*Young people highlighted the importance of using gender neutral and inclusive language to make them feel safe, respected and included in the workplace.*



## Signs of inclusivity



- Put public displays of support around your workspace, including stickers, flags, signs and posters to show that your workplace is LGBTQIA+ inclusive and supportive.
- Promote and support all employees to get involved in LGBTQIA+ celebrations and events such as Mardi Gras, Pride Month, Wear it Purple Day and International Day Against Homophobia, Biphobia, Interphobia and Transphobia.
- Provide access to all-gender bathrooms.

*Episodes of bullying, harassment and discrimination are unacceptable and cause LGBTQIA+ young people to feel unsafe.*



### Remember:

Be genuine. Any efforts to be supportive of the LGBTQIA+ community must be genuine to support inclusivity and not a tokenistic gesture.

# 4: Experiences of Healthcare

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*“I would ask other  
GPs, just be nice to  
queer people.”*



**Many young people raised concerns when trying to navigate the health system including barriers related to parental consent, confidentiality, discomfort in discussing sexual health and difficulty accessing timely, LGBTQIA+ specific health support in an area near them.**

They also reported negative experiences with practitioners who they felt had poor understanding of LGBTQIA+ concepts.

Other young people reported that their experience of health system had been positive - feeling informed, respected and empowered to manage their own health and wellbeing, and feeling well supported to address health issues and concerns.

## ■ Health services

Throughout the consultations, young people discussed the different types of health services they interacted with, what good services looked like, what poorer healthcare looked like and some of the barriers they faced in seeking care.

Some experiences varied based on the age and identity of the participant.

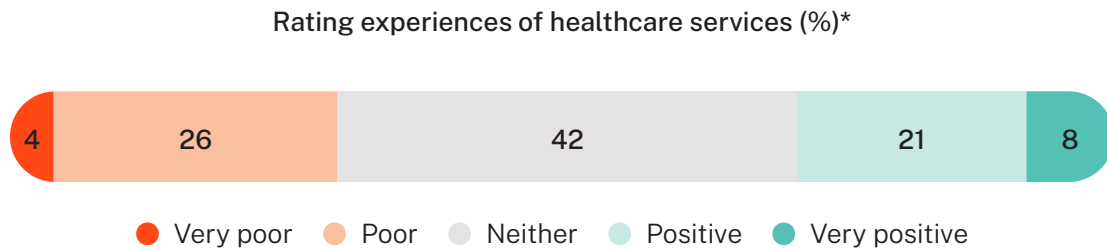
- Many younger participants had not had conversations with their general practitioners (GPs) about their sexual health – likely as a function of their age and maturity, meaning whether or not they were sexually active. This group were relatively neutral about their experiences of engaging with healthcare services and had little to say about how identifying as LGBTQIA+ impacted the healthcare they received.

- Other younger participants described difficulties in accessing healthcare and so had less feedback on the services themselves, with a greater focus on the barriers they faced in speaking to a clinician in the first place.
- Older participants were more likely to speak about the conversations they had or would like to have had with practitioners about their sexual health, whether through GPs, sexual health clinics or specialists.
- Participants who identified as trans or gender diverse were more likely to have had conversations with a GP and potentially a subsequent specialist about their options for gender affirmation.

Across the board participants spoke about their experiences with mental health professionals – some had sought support for ongoing conditions, others as a result of the bullying and harassment they had faced, and other young people sought support as they explored their identity and faced challenges associated with coming out.

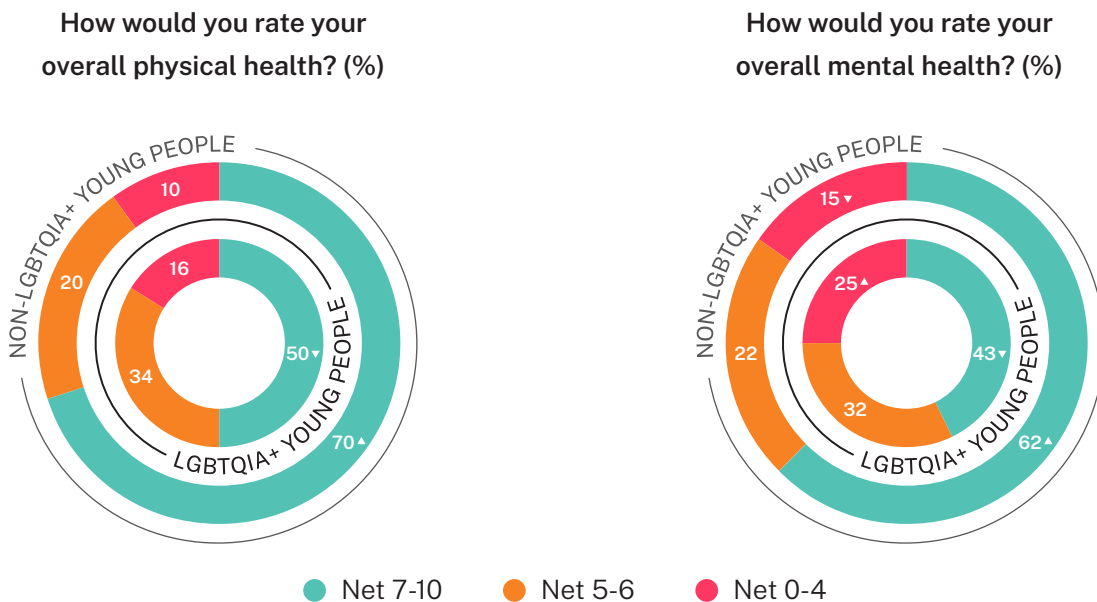
The following section outlines the barriers young people faced in seeking care in the first place, followed by an exploration of their positive and negative experiences of healthcare.

During the consultations, students were asked how they would rate their experiences of healthcare services. In line with the findings outlined above, experiences were mixed with 29% giving a positive rating, 30% giving a negative rating and 42% saying neither.



### Quantitative findings

LGBTQIA+ young people were statistically less likely to report positive ratings for their physical and mental health compared to non-LGBTQIA+ young people. While 70% of non-LGBTQIA+ young people rated their physical health as 7 or more out of 10, just 50% of LGBTQIA+ young people gave this positive rating. For contrast, 62% of non-LGBTQIA+ young people gave a positive rating of their own mental health compared to just 43% of LGBTQIA+ young people. ACYP notes this is a self-reported measure rather than a clinical measure.



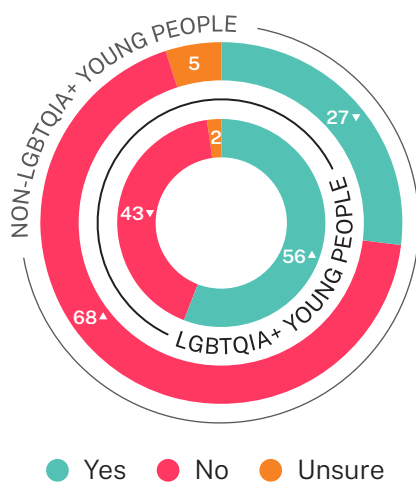
\*Consultation-based individual response question. Base: n=164 –some participants chose not to respond.

Q. How would you rate your overall physical and mental health? Please answer using a scale of 0 to 10, where 0 means very poor, and 10 means excellent. Base: LGBTQIA+ n=185, Non-LGBTQIA+ n=820.

▲▼ Indicates a statistically significant difference

Consistent with this, LGBTQIA+ young people were statistically more likely to have sought help for their mental health, with more than half –56%– seeking support in the past 12 months compared to just 27% of non-LGBTQIA+ young people.

**Sought support for mental health in the past 12 months (%)**



- A lack of accessible LGBTQIA+ appropriate services –particularly the disparity between access in regional areas.

These are in addition to common issues faced by many other young people related to wait times and cost of care, which are again exacerbated by fewer services and a greater reliance on specialist care.



*“I think it’s the perception of safety that comes with a young person and then how we’re socialised and how we are brought up, like we get it, you know mental health is stigmatised but in practice it’s actually quite hard to have that conversation and then especially if the person that’s across [from] you is either one that looks like you but doesn’t relate or doesn’t understand or has the cultural assumptions that is quite daunting, so it’s difficult.”*

Q. Have you sought support for your mental health in the past 12 months? Base: LGBTQIA+ n=185, Non-LGBTQIA+ n=820.

## ■ Barriers and challenges to healthcare

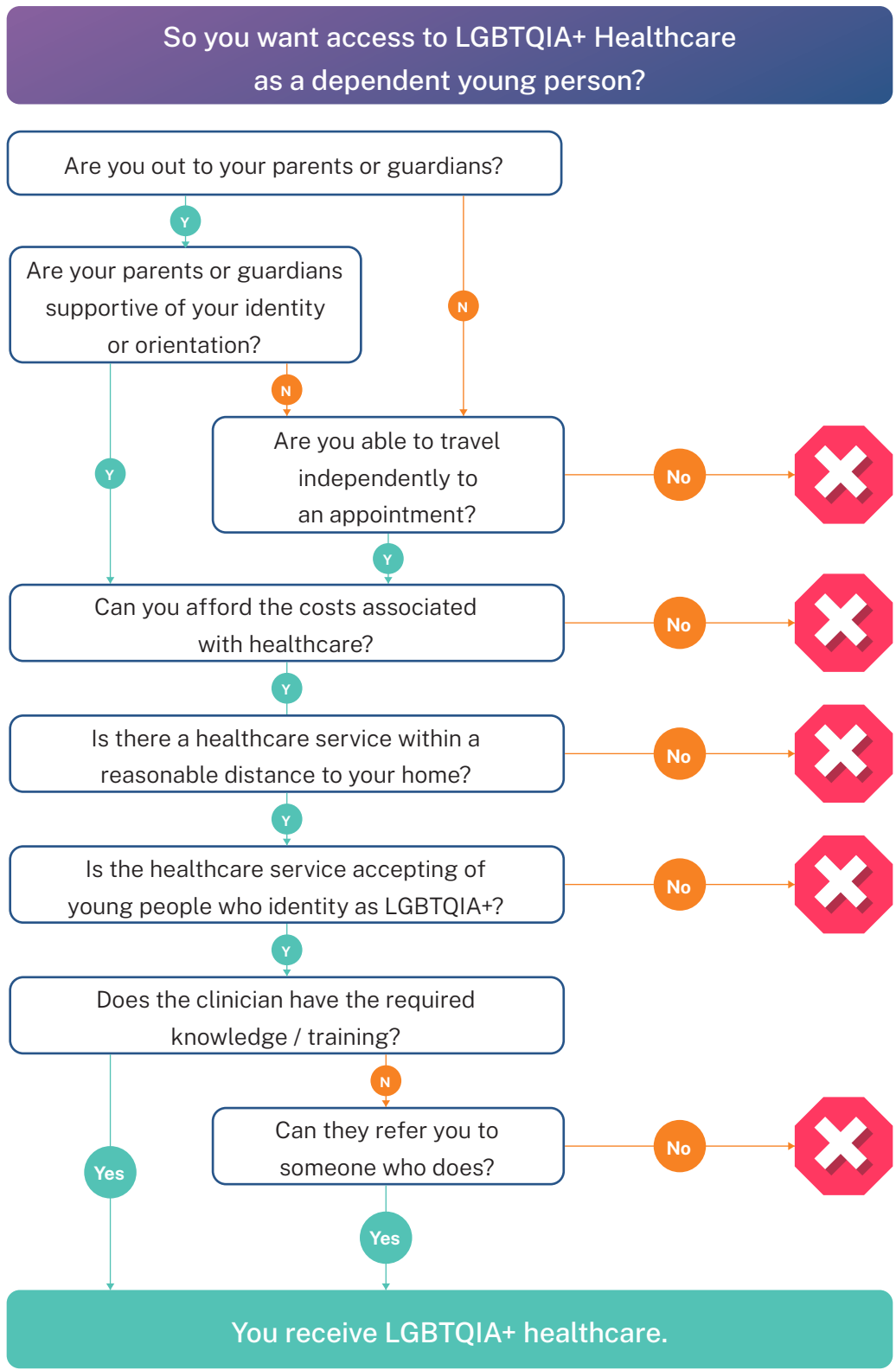
Young people face unique and sometimes complex barriers to accessing appropriate services and health supports –many of these are more acute for young people who identify as LGBTQIA+.

The two main frustrations raised by LGBTQIA+ young people were:

- The potential barrier caused by their reliance on their parents to access care –particularly those from a culturally and linguistically diverse background or a religious background; and

The following graphic outlines the process many young people are required to go through to receive healthcare that meets their needs as a person who identifies as LGBTQIA+. These ideas will be explored in greater detail below.

Y Yes   
 N No   
 ✗ Unlikely to seek or receive healthcare



## ■ Parental consent

Parental consent was a barrier to seeking health support for many young people – particularly those who were younger. They reported that the health system is often impossible to navigate without having supportive parents or guardians.

Young people can choose to get their own Medicare card, and therefore have greater autonomy over making medical appointments, from the age of 15. They may choose to remain on their parent or guardians' cards as well as have their own copy, or to have a separate card.<sup>15</sup> In practice, this means young people under 15 require their parent or guardians' formal permission to see a health practitioner.

Health practitioners must also decide on a case-by-case basis whether a minor has capacity to provide full and informed consent for any given medical intervention. Different interventions will require a different degree of maturity to consent. As such, there is no set age at which a young person is able to consent.<sup>16</sup> The Adolescent Health GP Resource Kit recommends GPs provide adolescent patients with an opportunity to speak without their parents, but recognises many GPs feel more comfortable doing this when the young person has reached 14-16 years old and is based on the patient's emerging maturity, culture and family context.<sup>17</sup>

Many young people reported they were unable to access services confidentially, either because their parents were in the room, or because they were unable to articulate their need for specific services in the first place without speaking about their LGBTQIA+ identity.



*“I didn't really know how to navigate the system, you know, like I didn't know what a rebate was, you know that that kind of thing. It really becomes impossible to navigate without parents or support.”*

Other young people who were open with their parents and guardians about their identity, said their parents' lack of acceptance was the key barrier they faced in accessing healthcare. Many reported their parents were not allowing them to seek LGBTQIA+ care. This was particularly challenging for those who were affected by their parent's cultural and religious beliefs. Those who had unsupportive parents reported feeling alone and isolated.



*“Children under 16 years of age cannot attend their own appointments without consent from their parent or guardian. The issue with this is that some young people do not want to have to go through their parents. They would prefer to engage with services directly themselves.”*

<sup>15</sup> Services Australia, Teenage years: What happens when your child turns 15, accessed via: <https://www.servicesaustralia.gov.au/what-happens-when-your-child-turns-15?context=60007>.

<sup>16</sup> NSW Health (2020), Consent to Medical and Healthcare Treatment Manual: Section 8 Minors, accessed via: <https://www.health.nsw.gov.au/policies/manuals/Documents/consent-section-8.pdf>.

<sup>17</sup> NSW Centre for the Advancement of Adolescent Health and Transcultural Mental Health Centre (2008) Adolescent Health GP Resource Kit: Conducting a Youth-Friendly Consultation <https://www.health.nsw.gov.au/kidsfamilies/youth/Documents/gp-resources-kit/gp-resource-kit-sect2-chap1.pdf>.



*“My parents aren’t supportive and if you don’t have your parents’ consent, it’s even harder, and so I just, you know, it’s a really, it’s a challenge.”*

*“So, the difficulty of getting a mental health plan also depends on your parents, because my parents they had a share of their own mental health illnesses, so they kept trying to discourage me from getting a mental health plan saying that’s kind of like a sign of weakness, like, ‘You shouldn’t really have that.’ So, when I was 16, I found out that I could apply for my own Medicare card and because I had my own bank account, I did the process myself on days when I was going to work, I would just go a couple of hours early to see the GP and try and get that plan, but it’s kind of like the extra step that you have to take. Firstly, you have to pay for the GP consultation, then you had to figure out how to do claims on Medicare by yourself and then you actually have to go to the psychologist ... and there was only one psychologist that I ... there was a couple, but the first couple I didn’t like on the first go, so I just kind of stopped, but like he’s really far away, it’s an hour’s train ride and that kind of process of having to first [see a] GP, and then going there and just to get help at a time when you really need it, it’s hard to get quick help.”*

However, others reported having supportive parents who were able to help them find appropriate and suitable support.



*“My mum has looked into stuff and apparently in [the local area] in that new apartment complex, there are a few like trained doctors that have like certificates for like gender central stuff. You would have to look into it yourself, because I can’t really remember, but basically what I had is I went to a psychologist that then referred me to the Gender Centre, which then referred me to another psychologist, which I still have, but then he left the Gender Centre, so we followed him to his own practice.”*

A few young people spoke about technically being able to seek support from a healthcare provider without the consent of their parents, but facing additional challenges. For instance, one young person in their early 20s spoke about their anxiety in making and attending appointments. They were awaiting confirmation of a diagnosis of autism and, related to this, said they found it difficult to articulate their experiences without the emotional support of their parent.

### **Confidentiality and privacy**

The combination of parental consent and confidentiality were overwhelmingly the greatest barrier that young people faced in accessing healthcare, and both experiences and fears of breaches in privacy left young people feeling disrespected, deflated and frustrated by the lack of concern and care demonstrated by these health professionals. Young people reported breaches in privacy and confidentiality occurring with their school counsellors but also with other medical and health professionals.

As a result of these experiences – or the fear of it – some young people avoided accessing healthcare altogether.



*“You have no medical privacy, and lots of people under the age of 16 really want that privacy. Like, I didn’t choose to come out to my dad, but my dad was the last person in the family who knew, and I came out at the age of 17 right, so obviously I couldn’t ... I spent my entire age up to then, if I wanted to talk to a professional outside a school environment, about how I am gay, then I would have had to come out to my parents first.”*

*“More privacy when it comes especially to younger people. I think there is an inability for younger people to go out and receive the help that they need in many different ways, because until you are 16, your parents have to know everything, they need to be informed, and when you are older than that, they still ... for example, to pay for these services and things, children can’t pay to get like proper mental health services usually, especially in their local area, or even physical health services. Like, if you have issues, you should be able to go to a doctor and get them sorted out and I think that the idea that ... say for example, two Medicare cards is the maximum they are allowed in a family. I have a family of five, so there’s one that floats around. For us to receive medical help even in the public system, we would either need to talk to each other, or if the parents have both the cards, we would need to talk to them to get the card, and need to talk to them to book the appointment in, There’s no privacy whatsoever.”*

In a school setting, some students spoke about being outed to their parents as a result of sharing information with a school counsellor or wellbeing staff. In some, but not all instances, it appears this was accidental – such as mentioning a girlfriend or boyfriend – rather than an intentional conversation about their LGBTQIA+ identity.

Others struggled with the tension between wanting confidentiality and the boundaries of mandatory reporting. A few recounted being outed as a result of their counsellor reporting potential risk to their parents.

In general, young people noted that practitioners disclosing information about their sexual orientation or gender identity to their parents may put them at risk of harm. In particular, they recommended counsellors should understand their household dynamics before including information about a young person’s LGBTQIA+ identity in their communication with families.



*“Even if they have like a trusted adult that may not be like their parents, like your uncle perhaps, or like instead if they don’t feel safe having their parents contacted about it, ask them who they trust and if they have the contact number for that trusted adult to come and get them, to make sure that they are safe.”*





*“I came out to a counsellor in high school and at the time I was going to an all-girls school, so everyone was like ... but I came out to my counsellor and she had like assured me that the notes were you know confidential and she wouldn't share them to anyone, but one morning I woke up and I found this thick maybe package at my door and I was like, 'Okay, what is this' but it was addressed to my mum so I was like, 'Here you go.' She opens it and it's every single thing I have ever said to my counsellor, so my mum was like reading through it and says you know, 'I am trans, I don't feel like a girl, I am like 100% like I have felt male since I was a kid' and my mum read that and she was like ... I actually had to be hospitalised for three days because I was in such a like shock, I ran away from home.”*

*“You need to open your eyes and they need to see that sometimes calling the parents isn't the best option and maybe they should instead actually talk to the child and work through it with them and then see at the end if they are okay with contacting the parents, and if not, that's okay, maybe still work with them and if it is desperately needed, then contact the parents.”*

## Uncomfortable conversations

Separate, but related to the consent or support of their parents, young people also raised hesitation in providing sensitive information to medical professionals. This was exacerbated by previous experiences of confidentiality breaches.

Some young people reported feeling uncomfortable revealing information about their sexual orientation, sexual activity, or gender identity to health care professionals – even if those professionals needed that information to provide healthcare.

Where and how young people would seek support was dependent on several other factors such as their perception of privacy and their relationship and level of comfort with the professional. Young people agreed that for many, gender, sexuality, mental health and identity issues were topics they could only talk about to friends. Some young people shared they may delay or avoid seeking services because of their experiences of past discrimination or perceived homophobia within the health care system. This left many feeling isolated and without professional support.

For some young people who had a regular GP, although they felt supported and respected by their doctor regarding physical health, they shared that they did not always feel comfortable disclosing their sexuality, gender and identity with their GP. This was due to concerns about the GP's relationship with their family, and potentially disclosing their private information. This issue was a particular concern for those who attended a family GP or who lived in a small town or tight-knit community.

Young people were also less likely to feel comfortable to talk to a medical professional when they felt the professional had a poor understanding of LGBTQIA+ concepts.

## Wait times and cost

As noted above, young people reported that the financial cost and wait times associated with many services can make it impossible for some to have access to the specialist support services they may need.

While ACYP acknowledges this is a common issue felt by young people across the healthcare system, the issue appears to be exacerbated by a lack of LGBTQIA+ specific services – particularly in regional areas.

Young people also raised that many specialist services were not available through Medicare, and therefore incurred private billing costs which were unaffordable. This, paired with long waitlist times, made it very difficult for young people to access specialist services. They felt that the financial cost associated with many services can make it impossible for some to have access to specialist support services they may need. ACYP notes that LGBTQIA+ young people, particularly trans and gender diverse young people are likely to require additional specialist services, whether for gender affirmation, sexual health or mental health. As a result they are particularly vulnerable to the impact of high costs and long wait times.



*“Help people under 22 financially and otherwise access necessary things like health services/medication – [that] would be a massive help for most young people.”*

*“Access to mental health services can be very expensive particularly if seeking a specialist service or support e.g. psychologists and psychiatrists.”*



*“People don’t want to reach out for help because they know the waitlist is so long – waitlist is a barrier to asking for help.”*

*“We have two community health services here the waitlist for the recommended counsellor is six months. And yet, it took me two years to get an appointment.”*

As a result, young people made a series of recommendations, including that counselling should be available for free, that more LGBTQIA+ services should be established across NSW, and that Medicare should subsidise supports for LGBTQIA+ young people.

## ■ Seeking health information and advice

Young people strongly agreed that being educated, and understanding their own health needs, health issues or medical conditions are an important part of managing both their physical health and mental well-being.

Seeking health information was particularly important to LGBTQIA+ young people as sex, sexual orientation, and gender identity are deeply personal and can be complex. Young people reported that a stigma remains around accessing health services and supports as a LGBTQIA+ young person, and that seeking information plays a key role in helping them to manage their health, address health issues and access the right support systems.



*“For different reasons, the healthcare system is very painful, finding resources and accessing LGBTQIA friendly services is way too hard.”*

Throughout the consultations young people discussed that taking the initial step of seeking help is extremely “hard” and “scary” for them, and that better information about services will assist with this. Young people raised a range of barriers and challenges to accessing healthcare services such as a lack of access and discrimination, often they used words such as “confused”, “lost”, “embarrassed” and “scared”.

They raised an element of fear regarding their privacy and confidentiality being disrespected, being judged, or not being able to relate to professionals who could understand and provide support.



*“Fear due to stigma and discrimination.”*

*“The pursuit of finding knowledge is a challenge.”*

Young people reported that gender-related health information was again difficult to access due to age, parental consent and fear of being judged.

Young people spoke about the significant role played by family and friends relating to health and wellbeing issues, however many young people reported not feeling comfortable disclosing sexuality, gender and identity with family, friends or health professionals. As a result, many young people reported seeking health information through other means.

Young people raised that they seek health information to:

- Ask health related questions;
- Access expertise; and
- Gain access to services and supports.



*“It’s hard to find out about it unless you already are like [connected or have] something to do with a service.”*

*“The Gender Centre. They have a trans [group] as well, they have websites that we can go to an access whatever information we need that is quite useful, especially transferred because it’s based on New South Wales information.”*

*“Gender Dysphoria Bible [is] very useful for me.”*

Young people reported seeking and accessing health information through a wide range of mediums and platforms. The type of platforms that young people accessed often depended on the issue or concern and several other factors such as their age, level of privacy, relationships, and level of comfort. Young people agreed that for many, gender, sexuality, mental health, sexual health were not topics they were comfortable to discuss with parents, GP, or even counsellors.



*“I would go to the GP if I was sick, but not for anything else.”*

In order to access accurate and timely information and referral options, some of the information sources that young people mentioned included:

- Friends;
- Peer support groups, such as those run in schools;
- Formal LGBTQIA+ support groups – e.g. Gender Centre, Twenty10, headspace and ACON;
- Google and other websites;
- Online platforms and groups;
- Social media;
- Parents and family;
- School counsellors and staff;
- Doctors (GP);
- Health centres and professionals; and
- Specialist support services.

A number of young people said that friends were often the first place they would go to seek support and highlighted the importance of “word of mouth” when navigating and accessing health supports and services.



*“Trying to figure out which provider is going to be kind of thoughtful, and like aware of the issues affecting you is hard.”*

*“Word of mouth, that’s the best way to find out, knowing that someone else’s psychologists is really good.”*

*“I think there are some places we can search for doctors. They say what they are specialised in and sometimes little tags is like ‘LGBT friendly’. Otherwise, it’s word of mouth.”*

*“It’s word of mouth, literally.”*

Some young people mentioned information pamphlets and resources available in schools and services, which they said were helpful in finding out about local services.



*“Headspace have huge pamphlets that are on like cardboard paper and they talk about different stuff, like mental health, gender identity, all stuff to do with drug abuse and stuff like that, so there’s a lot of different pamphlets that are in the hub for different situations as well.”*

*“We have these little cards that basically have numbers on them, so Kids Helpline, Beyond Blue, headspace. There are a couple of other ones there for things like drugs. Yeah, we have about like 10 of them.”*

Young people appreciated and recognised that educating themselves and utilising a range of supports and online information was extremely important in making informed choices regarding their health care.

## ■ Online information and advice

Overall young people were mostly positive about the use of technology in seeking and providing health advice and supports. They reported it to be a fundamental part of how they accessed all health services.

Young people identified and reported using a wide range of technologies, online platforms, tools and mechanisms including apps, social media, telehealth and websites for a number of reasons relating to their health and wellbeing. This included gaining health information, chat rooms to connect with other LGBTQIA+ people, and looking for suitable or LGBTQIA+ specific support.

As well as accessing these platforms for health advice, young people shared that they searched for health information using a range of websites to seek health information. These included: Twenty10, ACON, Gender Centre, QLife, Minus 18, and Kids Helpline online resources.



*“It’s called Spectrum, it’s a place where you get advice, and they have sexuality, and gender spaces where you’re able to talk to people about how you are feeling, look for health support, it’s a really good place.”*

*“Before then and since then though, it’s really been Reddit and created my own like supported structures, but Reddit’s always been a fallback for me for asking those questions, whether that’s relationship advice, sexual health advice. Just quickly, something that doesn’t work ... I was trying to bring it up before, but the taboo of queer health and particularly sexual health is terrible in my opinion, but yeah, Reddit has always been, ever since I discovered it in Year 9, it’s always been my fallback when I can’t find immediate help.”*

*“The only reason we know what it is, is because of the internet. I learnt about it through TikTok, that’s how I learnt about it.”*

Some young people reported that using technology or online platforms was their preferred way to access information in that it mitigated their concerns about privacy and confidentiality. They reported feeling less vulnerable to judgment and discrimination in welcoming, online spaces.



*“It’s like yeah, you don’t really know if it’s safe to talk about it, so you can’t get the help you need and it’s like, I don’t know ... most of the stuff that I find is on the internet, because that’s like the only place where I can like feel safe about it.”*

*“It’s the environment that makes me feel comfortable, is where I can just talk about it, and there doesn’t have to be any coming out. It’s not ‘I am queer’, it’s just, this is me talking about something that like mentions me being true.”*

*“I know a group on YouTube, it’s like all these sort of TikTok’s of LGBT people and they are like ... and there’s so much support there and I came out on that channel and I just had all this support.”*

*“There’s a sub-Reddit called ‘Ask Gay Bros’ and it’s literally you post questions and people will try and give you their answers, and sometimes you will filter through the crap, but every time I’ve posted on there, I’ve kind of got something out of it.”*

*“I have to like go on Reddit and be like ‘how to not get STDs ... gay.’ Yeah, so it’s like you educate yourself by the internet and you can also like find your community, but I’m not like on like queer internet as much, but on education sites on the internet.”*

However, some felt this process could be overwhelming due to the amount of differing and confusing information available online. Issues raised included misinformation and exposure to material they did not feel was appropriate for their age and maturity.



*“There needs to be more openly supportive resources on google which are approved and safe.”*

*“All the good stuff is riddled with all the bad stuff. So, for every good article you find, there’s two transphobic articles.”*

*“I just don’t feel safe in any site, I’ll be honest. Yeah, just kind of seen too much discourse I guess, you could say, yeah. I guess a lot of bisexuals feel the same way you know. Kind of just don’t belong anywhere.”*

Young people strongly agreed that online health information should be reviewed and regulated constantly, as they are often directed to misleading and incorrect information. They felt that there should be more safeguards to protect young people as this can cause significant issues and be detrimental to their health and wellbeing. However, other young people spoke about trusting the information they found online.

As outlined earlier in this report, young people suggested that there should be a single government website or list of reliable websites providing credible, accurate and up-to-date information as they felt overwhelmed by the amount of information available on the internet and did not always know which sites were trustworthy.

Young people also discussed wanting more information about what support services are available in their area, what they do, and how to make a decision about which one will best suit them and their needs.



*“One website that has all the information that you can trust, like a Wikipedia for gay struggles.”*

*“Want a website where all the reliable, accurate information can be found in one place – all LGBTQIA+ resources – run by a government department like NSW Health so it is trusted.”*

## ■ Common experiences across health services

While some young people reported positive experiences across health care settings, the majority of young people shared examples of negative experiences.

### Positive experiences

Those with positive experiences pointed to clinicians who were polite, experienced, and acknowledged their identity. They found the use of their name and pronouns helpful and affirming, even where they acknowledged their deadname and sex at birth were still listed on a medical practice’s files.



Many young people also shared the importance and value of creating an environment in which sensitive conversations were comfortable and used inclusive language. Indeed, their GP's use of the young person's pronouns and correct name could sometimes be the difference between a young person feeling confident to open up about sensitive issues and having a very negative experience.

Young people were also positive about clinicians who, where they lacked expertise, were willing to refer patients on to specialist services. Unsurprisingly, young people were particularly positive about services specific to LGBTQIA+ young people; these will be explored in greater detail later in this report.



*"She was very good about you know, using the correct pronouns in every single occasion and stuff like that, and you know she was very good at navigating the like you know very outdated medical system."*

Young people were eager to see health practices that advertised their acceptance of LGBTQIA+ young people through the use of stickers, posters and overt statements of support for LGBTQIA+ people – both on their websites and in their offices.



*"Have symbols or posters in their clinic to show they are safe, asking pronouns is a subtle way of showing support ... openly asking if GPs are LGBT friendly can feel dangerous / you don't know if they will be receptive and hurt you it's so hard to ask yourself [if the GP is LGBT friendly] but if the GP begins the conversation, it feels easier."*

## Negative experiences

Those with negative experiences mentioned clinicians who were not well informed about LGBTQIA+ concepts or healthcare needs, who were dismissive of their identity, name or pronouns, or who may have made healthcare recommendations that they felt were homophobic or transphobic.

Again, ACYP notes the methodology of this consultation does not provide scope to understand healthcare practitioner's perspectives, and that ACYP staff do not claim medical expertise in this space.

### Poor understanding of LGBTQIA+ health care

While not universal, a common issue raised in each of the groups was quality of service provided by health care professionals, with some raising concerns that health care professionals appeared to lack basic knowledge of LGBTQIA+ young people's health care needs.



*"There seems to be a lack of baseline foundation of queer health for medical professionals."*



Regarding mental health professionals, some young people felt they had to ‘teach’ their psychologist about LGBTQIA+ concepts. This led to frustration and some young people reported seeing multiple clinicians before finding a good fit.



*“The irony is that you are there educating your therapist who is there to support you and you are seeking support.”*

*“I remember an experience with a therapist who just had like, really just the most basic understanding of these issues and it just yeah it wasn’t helpful.”*

*“She claims to have had training by an LGBT person and I actually had to send her like links upon links of this is what trans is, this is what gay people are, this is what ... and she goes, ‘Yeah, yeah, I have watched them all. I found one of them quite funny’, because it was like a comedy act and he was kind of like saying the irony of how like not progressive our world is and she was like, ‘Yeah, I found it quite funny, anyways, here is our next session’ and I was like, ‘Did you listen to anything?’”*

Regarding GPs, some young people gave examples of practitioners who were unaware of health needs of LGBTQIA+ groups, including complications associated with gender affirmation and hormone treatment. Others noted their GP made repeated recommendations about contraceptives (to prevent pregnancy) for young people who, based on their sexuality, had no concern about pregnancy. As with mental health professionals, young people reported difficulty in finding a GP who could meet their healthcare needs with what they felt was reliable advice.



*“I have been trying to find one GP, because I want to start to transition. I went to one near me and I feel he did not know a thing I was talking about.”*

*“Yeah, I was discriminated against at a mental health service] for being gay by my counsellor ... the worker who I had, she didn’t work through coping mechanisms with me, she just told me that I’m overreacting and told me how worse other people had it.”*

*“Actually, my counsellor probably wasn’t even trained, because the first day she had, she was like, ‘Oh you are my first ever person. I usually do intakes.’ I don’t think she was ever trained, because the techniques she like taught me were really bad breathing techniques that didn’t work or mindfulness, where we just sat in that little like congregation room for a whole hour in silence and that was the support I got.”*

Trans and gender diverse young people discussed health professionals not understanding either their physical or psychological transition complexities, and the challenges they face.



*“I have just a GP that doesn’t really get it.”*

*“Most of the time I have to teach the doctor about my identity and trans services.”*



*“With access to good medical support for trans stuff, it’s kind of frustrating, because you kind of need to look for GPs and doctors and specialists that like have ... do that kind of stuff and those people are usually around the city, so travelling is like an hour or so every time I want to see them.”*

*“The provider had never spoken to a transgender person before, so not very helpful for dealing with transitions.”*

One young person described their difficulty in seeking preventative HIV medication and another noted they began receiving additional STI screening tests at an LGBTQIA+ specific service, compared to the screening done at their regular GP. These are explored in greater detail later in the report.

When young people perceived the medical professional lacked knowledge or experience, this presented significant challenges for young people making them feel uncomfortable in revealing sensitive information, as noted above.

Young people suggested better training and awareness for health professionals and recommended that there should be compulsory training for counsellors and psychologists to know about LGBTQIA+ issues. They presumed this should already be the case for GPs and other medical specialists.



*“There are very few providers that are like trained properly to deal with these issues, whether it’s general LGBTQ issue, or trans and gender diverse issues.”*



*“I need a referral to The Gender Centre and he types, ‘She would like to transform her gender’ on a piece of paper and I was like ‘okay’ but yeah, general practitioners are supposed to know.”*

### Misuse of names and pronouns

Many young people reported feeling disrespected or even feeling discriminated against when health professionals did not acknowledge their identity, name or pronouns, even where they had stated these multiple times. For some, this was about the use of their name or pronouns in conversation or on medical documents, while others felt their clinician had simply dismissed their identity or did not acknowledge their feelings.



*“People just discredit our identities, because we are minors, because we are not big, grown-up adults, that we don’t ... that we are not certain of what we want in our identities because we are not old enough.”*

*“They are always calling me by my deadname. They are not getting my pronouns right, no matter how many times I tell them, they put it on the preferred name thing, but they still don’t use it and it’s just ... and I haven’t gone under any medical treatment or anything like that. I’m planning to, but after I’m 18.”*

Some referred to frustration that bureaucratic processes were often required in order for medical documents to be updated. Currently, Medicare's records are limited to male and female, however non-binary people can request to have their gender identity noted on their record.<sup>18</sup>

In line with earlier comments in this report, ACYP notes that some young people raised positive experiences where practitioners would use preferred names and pronouns conversationally and where possible, even if the legally required documentation retained the young person's deadname and sex at birth. ACYP recognises there may be reasons a medical professional would need to know the young person's sex at birth, but notes it is also possible to record their gender identity.



*“Well, back when I used to go to therapy, they would let you change your name on the file, which was really helpful, but like because like obviously medical services, they are affiliated with the government, so they have to have like all your legal information on it.”*

*“It's kind of a pain going to most medical services because I am not able to get my legal documents changed yet. So, it's just always a really uncomfortable experience going there, because like obviously there's like my medical forms, it has like female, my deadname on it and stuff like that.”*

*“Well, I can't change my main name with Medicare until I change my name legally so that that's always fun because I get my prescriptions and may still say my legal name and that's weird because I go to the pharmacy and I give it in there, like is this is someone else because I look masculine.”*

*“With a feminine name it doesn't feel right to many people, but because the dentist isn't with Medicare my prescriptions can say whatever I want on them so that's actually quite nice.”*

*“I just wanted to say I've found it really annoying when we've been deadnamed in the past by hospital people. Police have also done it with us before ... It would be nice if people just respected names and pronouns.”*

Young people recommended that the correct use of their name and pronouns and the use of gender-neutral language was a straightforward way that medical practices could demonstrate that they are inclusive, safe spaces.

### Negative attitudes towards LGBTQIA+ young people

Some young people also spoke about health professionals who appeared to have negative attitudes towards LGBTQIA+ young people. They mentioned needing to visit multiple GPs or psychologists before finding one who was welcoming, accepting and had the ability to support them. At times, they also recounted hearing what they felt were homophobic or transphobic comments or suggestions from medical professionals.

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<sup>18</sup> Services Australia, Updating your gender details with us, accessed via: <https://www.servicesaustralia.gov.au/updating-your-gender-details-with-us>.



*"I was basically ... well, my parents brought me to a lot of like GPs that they had experience with, and they didn't turn out to be good."*

*"Sometimes, there is a lot of judgment when you go to a doctor, because sometimes they are against the community itself or they just don't have a great understanding of it."*

*"I went to like my local GP and we told him and he kind of just looked at me and was kind of like, 'Oh sorry, I don't know what to do about that.' It was like a lack of education with GPs, so I had to go on like a four year journey of trying to find a gender clinic."*

*"I don't know one accessible queer friendly GP in Western Sydney."*

Others reported having to visit multiple counsellors and psychologists before they were able to access a professional who could help, and who made them feel included, accepted and comfortable to talk openly about their health issues and mental wellbeing.



*"I got through four before I found one that I connected with."*

*"I went to headspace a while back, but they didn't do much. There wasn't much they could do. It was mainly just giving us breathing techniques to help us manage our fears and anxiety about it, but it doesn't change anything, it doesn't help us, it doesn't automatically make me feel less depressed, yeah."*

As a result, young people shared that their past experiences of perceived discrimination or homophobia may delay or affect their willingness to seek healthcare from services. They suggested that having a directory of LGBTQIA+ friendly GPs and medical practitioners would be useful and could help young people to avoid being judged or having negative experiences.



*"So, I think a directory of people particularly medical officers like GPs would be great."*

## ■ Experiences with specific health services

### General Practitioners

Young people strongly agreed that GPs play an important role in managing all health and wellbeing related issues, as well as being critical in gaining access to specialist support services. GPs were commonly the first point of contact for young people when accessing their health issues and concerns.

Young people reported accessing their GP for a broad range of reasons – from managing health conditions to seeking support when feeling stressed, anxious or depressed, or seeking advice about sex and relationships, sexuality, gender and identity issues. Young people reported having both positive and negative experiences with their GP, some of which have been outlined above.

Some young people spoke about their positive experiences of accessing their GP for general health and LGBTQIA+ related health issues, and reported being provided with health advice and support without feeling judged. They expressed that GPs listened to and helped them to feel comfortable. In a few instances, young people reported that the GP was able to acknowledge their needs and did everything they could to be helpful by providing referrals across the healthcare system, making them feel safe and included, and providing information about their health care options.

“But my GP he doesn’t know a lot about being queer trans but as soon as I told him, he said, ‘Yes, let’s get you an endocrinologist, let’s get you a psychologist, let’s get you the best that we can get you,’ and that was absolutely amazing, so I am really fortunate to have that in [my] life.”

However, young people also shared their experiences of booking and visiting their GP, and although young people agreed that GPs play a very important role in every aspect of health care, they also agreed that GPs can be the greatest barrier to accessing support. Young people reported that negative encounters had occurred at times before even getting to see the GP. This included difficulty in filling out forms that did not provide an opportunity to clearly express their gender identity as separate to their sex assigned at birth. Some also mentioned feeling disrespected by reception staff, for instance, while making a booking.

“To actually get to see a medical professional, you have to firstly deal with the [reception] staff.”

“When I’m ticking the box of male or female, I just go with my assigned at birth gender, because I don’t want to have that conversation ... where I can be discriminated against ... if they give me the option [boxes other than male or female] that means they are open to it.”

As noted earlier in this report, some young people raised that they had experienced homophobic comments from GPs, or GPs who were inconsiderate of their feelings, gender, sexuality and identity. This left them feeling disrespected and discriminated against.

“At my doctor’s, I had to actually change doctors, because I mentioned that like I’m gay and I’m gender fluid, and the doctor started like not saying slurs, but saying like ‘it’s wrong’ and I shouldn’t be seen as anything other than a straight woman, and being with another woman is extremely wrong, so I had to change doctors, yeah.”

“I would ask other GPs just be nice to queer people, sorry.”

“There’s like there’s a couple of GPs, that I know that are really just rude I’m in a town that is actually quite like inclusive that’s just like, for instance, like one of my friends tried to go and like get a referral to go to a psychologist and this one GP was like, ‘You don’t have anything wrong with you.’”

Some young people raised that the GP referral, intake and access to specialist support services can be a very challenging and daunting process. To be asked about sensitive information by administrative staff, who they did not have relationships with, could deter young people from attending appointments or accessing a service. For many young people, the GP was/is their first point of contact to obtain a mental health plan, or gain access to LGBTQIA+ services and gender supports.



*“It just seems difficult because if you are having mental health issues, such as depression, you already feel like a burden and like you are just so much work to the world around you and having to go through that process of getting a whole plan, just so that you can be looked after by someone else. It just kind of makes you feel worse.”*

*“And it’s just like annoying having to repeat the same thing, over and over again.”*

A few young people also raised that GPs occasionally make assumptions related to their health. They reported GPs making referrals to mental health services when they were seeking support for other health related needs. One young person with a disability spoke about the GP’s assumption that they did not understand their identity because they had autism.



*“Usually, my identity gets discarded because I’m neurodiverse, so it’s kind of like the idea, like, ‘Yeah, you are autistic, you can’t make that decision for yourself. You don’t know yourself’ and it’s kind of that quick dismissal of doctors and especially when people who already have a disability...”*

*...they usually get discarded because their disability comes first and identifies them first and as a result, your personal voice on what you identify as sexually or by your gender, gets discarded by medical professionals and it just isn’t becoming an option.”*

*“Yeah, not everyone that is part of the community is mentally ill.”*

## Mental health services

While they noted generalisations and assumptions were unhelpful, there was a strong focus on mental health across all group discussions as young people reported this as being a priority issue to address for LGBTQIA+ young people across NSW. The groups discussed a lack of accessible resources and supports, and that therefore the current health system is “not geared” to provide the support needed to ensure young people can thrive.



*“A lot of LGBTQIA+ youth are mentally ill because of the discrimination that they are faced.”*

*“Yeah, it’s like whether has someone has blue eyes or brown eyes, it’s the same level of care, so psychologists are good because they understand humans, but I think it’s just normally they are apathetic about your sexuality or gender.”*

Participants also reported that there remains a general stigma around all young people accessing mental health services and supports, but that this is elevated for young people when discussing sometimes sensitive and complex LGBTQIA+ issues, including diverse sexualities and gender identities.





*“Young people are unable to deal with their trauma and often keep it in and hide it.”*

The importance of addressing issues early was commonly raised, and how access to the right supports can either prevent or delay the onset of health problems. This was particularly true in relation to mental health and LGBTQIA+ related health issues.



*“Just making these services more easily accessible, also outlining that you can seek these services whenever, because these need to be preventative, so that the like physical health system isn’t overwhelmed with mental health patients. Yeah, they need to be preventative, because if something gets to the point where you are like having like self-destructive thoughts, you aren’t in the right state to be making decisions to try and go help yourself. So, we just need these things to be more accessible.”*

*“I just think preventative healthcare and just advertising that it is there and that it’s accessible to anyone and that it is important. Like if you feel like you are not doing great, but you are not doing terribly, like it’s still an option for you, just yeah to prevent things from going bad.”*

However, a few young people were concerned about admitting they were experiencing mental health concerns, as they felt their need for support reinforced stereotypes and harmful rhetoric linking their LGBTQIA+ identity with a mental illness.



*“We don’t want to be put into mental health places because we don’t want to be like, ‘Oh, you are part of the [LGBTQIA+] community so that means you have a mental illness.’ We don’t want to be treated as if being queer is a mental illness.”*

One young person spoke about their frustration when their psychologist related all of their mental health concerns back to their LGBTQIA+ identity, which they did not feel was appropriate or necessary.



*“A lot of the things that, like for example, I go see my doctor about, it’s very mental health related and then she will relate mental health to my identity, or like the stuff that I have been through and then she will be like, ‘Oh, you have been through this stuff which means you want to be a boy now’ you know and she doesn’t get that and I haven’t brought it up with her anymore, but she brings it up herself and she is like ‘Okay, well, how do you feel now that I have talked to you and we have worked through this problem, do you feel more like yourself?’”*

### Crisis support and acute mental health

The lack of crisis mental health support was a concern for some – particularly young people living in regional areas, as noted earlier in this report. Young people reported that there were no services in these areas to access during crisis, and as a result, when young people were experiencing a mental health crisis their only option was to visit the hospital’s emergency room. They reported that hospital emergency rooms were often not trained or equipped to help and support in these situations.





*“I was admitted to hospital upon the advice of two psychologists and my GP. I stayed in the ER for six hours and then I was told that I wasn’t physically sick enough to be given a bed for something that was an eating disorder, which is a mental illness, and I was still very physically ill, but I still wasn’t being seen, because I wasn’t physically ill enough. So, it just makes me so angry.”*

*“If someone goes to the emergency room, you know it takes hours.”*

ACYP acknowledges recent investment from the NSW Government to address this issue, such as through the recent establishment of Safe Havens across NSW. We note this disconnect for some young people may be either due to a lack of awareness of the services, or a need to expand programs like this to more areas of NSW.<sup>19</sup>

Although many young people found crisis support lines – such as the Kids Helpline or Suicide Call Back Service – to be helpful and accessible resources, many who had utilised these supports during crisis faced issues, including a lack of, or a delayed response, unhelpful advice, and automated and irrelevant responses through a text chat.



*“So, my first partner who had very serious mental health issues, tried using them, like their suicide hotline, and I think he called it three times on three different occasions and not once did he actually get an answer.”*

<sup>19</sup> NSW Health (2022), Towards Zero Suicides: Safe Haven accessed via: <https://www.health.nsw.gov.au/towardszerosuicides/Pages/safe-haven.aspx#help>.

*“They take one week to respond to text messages.”*

*“I went to a Kids Helpline and then I talked to a counsellor there, but it was the same, they couldn’t do much. They were just like, ‘Okay, you can download an App for your calmness, you can like do some meditation.’”*

### LGBTQIA+ specific support services

Young people who had accessed specific LGBTQIA+ support services such as Twenty10, ACON, and The Gender Centre were extremely positive about the support they provided. These services offered counselling, advice and support, sexual health clinics and screening, as well as support groups both in person and online.



*“The Gender Centre is great for us, they understand.”*

*“Pretty well. I mean, there’s headspace and mostly based queer psychologists and therapists, which are very accepting and you can go in and go there and they are not going to force you away, which is good.”*

Most of those who had not accessed these services were eager to be able to do so. Consistent with other services, young people also discussed the disparity in the provision of LGBTQIA+ supports between metro and regional and rural areas. They discussed the disadvantage they felt regional and rural young people experience, due to their geography and a lack of specific supports. This led to young people reporting further social isolation and exclusion.



*“Gender clinics are very sparse where we live. We live on the Central Coast and the closest one is either Newcastle or Sydney.”*

*“Other health services, I go to Maple Leaf House Clinic in Newcastle and they ... so I go to Maple Leaf House Clinic, which is a clinic for transgender people to go to, although it would be better if there was more of those services around, because getting to Newcastle is a trek, and also a very long waiting period.”*

*“There is nothing like that in our area.”*

*“Like having a service dedicated to like queer issues, I think it would be helpful.”*

Overwhelmingly young people agreed it was important to have health professionals and staff who identified as part of the LGBTQIA+ community, as they have a lived experience, as well as a greater understanding of the system and the rights and needs of queer young people. Young people expressed a desire for more LGBTQIA+ staff to work in organisations across both health and youth services. They reported that this was fundamental to increase the level of comfort in accessing a service, and improving the inclusivity of services. Second to that would be a preference for more training of staff who do not identify as LGBTQIA+.



*“I mean, they have queer people working there is definitely a big plus, because personally, I would like ... say if it was like a therapist, I would personally want to be around someone who is LGBT, because that makes me really comfortable to be in that environment to not ... but even if I know for sure those people are educated, that's always good.”*

*“When I say it's a lonely experience, I mean that you just can't understand, like you really can't understand unless it's you in the situation. That's why their own experience is so important.”*

*“A lot more queer psychologists and psychiatrists are starting to pop up, because like ... so that will probably be helpful for most of the teens in the school.”*

### Trans and gender diverse support

Young people reported a lack of gender specific support services to meet the needs of trans and gender diverse young people. Transgender young people disclosed having unique and sometimes complex healthcare needs that relate to addressing their gender identity concerns, and facing significant levels of stigma, discrimination and social exclusion.

Young people highlighted and recommended that health services should consider likely comorbidities associated with transitioning, or with being LGBTQIA+.

In line with other comments in this report, trans and gender diverse young people often raised concerns that their identity was being dismissed by health professionals, who spoke to the potential risks associated with transitioning, including the risk that the young person may be making a decision about transitioning before fully understanding their identity. While ACYP acknowledges medical professionals have a duty to outline risks and explore all potential options with young people, participants reported feeling discriminated against.



*“Pretty much understanding and treating the person as though they are actually going to go through with this, because the entire time, she was just doubting me, ‘Oh yeah, but this will happen, but this will happen...’ It was the actual doctor who was telling me that. She actually gave me like a book of people who just regretted it.”*

## School counsellors

School counsellors were identified as a key position within the school, and who would deal with issues of mental health, although responses about the effectiveness of school counsellors were mixed.

ACYP acknowledges that a school wellbeing team in government and non-government schools may include psychologists, counsellors, social workers and nurses, and that students may not differentiate between the disciplines when referring to the person who gave them ‘counselling’. Some schools may also have chaplains, priests or pastoral care workers who provide similar supports. Throughout the report, we have used the words ‘school counsellor’ except in instances where the young people have specified their discipline.

As noted elsewhere in this report, the broader wellbeing teams at schools were a significant source of support for students. Some schools also provided students with additional information such as cards with information about services, posters displayed across the schools, and online school intranet pages, where local service information is displayed.

Some young people saw their school counsellors as a great support and reported that they felt confident and comfortable in sharing issues and concerns.

Among those who had positive relationships, they noted that the school counsellor strengthened their connections at home and at school and was able to offer advice and referrals to community and specialist support services when possible.



*“For me, when I was looking for psychologists outside of school, I did have the guidance of getting very lucky with the school counsellor and she was able to recommend a couple of people and that kind of started me help[ing] my mental health issues, that did stem from sexuality.”*

*“The counsellor I am seeing at the school, she seems to be accepting and open minded, yeah.”*

*“At my school, we have onsite counsellors and psychologists and one of our counsellors he’s really good he used to help.”*

*“I was really lucky that I found her [school counsellor] I think, she’s one of the only ones [who were helpful and supportive].”*

Young people highlighted the importance of building a strong relationship with their counsellor before they felt comfortable in disclosing private and personal information relating to their sexuality, gender and identity. They also reported that gaining their trust could sometimes take some time.



*“Just because, it depends who your counsellor is and you might not know their ideologies surrounding the LGBT community. Like, I’ve been seeing my school counsellor for over a year and I haven’t directly come out to her, but I probably would feel comfortable to coming out to her now, because I think she’s kind of assumed at this point, but just iffy around who you might or might not, because obviously that person is very close to you, like sharing very detailed and personal thoughts with, so you might not feel safe I guess confiding in that person.”*

At one school, the school counsellor went out of their way to support trans and gender diverse students as there was a need in the school to support those students as a group.



*“Specifically trying to work and prioritise trans and gender diverse peoples, and ... I really appreciate that, I appreciate about her.”*

Often school groups reported that there was a lack of school counsellors available across schools, particularly in regional areas, sharing resources with other schools, a lack of availability and waitlists for appointments.

## Telehealth

Some young provided positive feedback relating to their experiences of accessing telehealth supports and liked the fact that it was discreet, convenient and could fit into their busy schedules without having to drive or use public transportation.



*“I probably want to add one thing I mentioned before, like just mental health accessibility. In general, especially during the pandemic most things like switch to sort of telehealth and that was good.”*

*“Accessing psychologist via Zoom works well – very understanding, inclusive and supportive.”*

*“He’s in Newtown, so instead of going to Newtown every time I want to see him, we do like a Telehealth thing, where we video call, because it’s just a pain to get to Newtown, like after school and stuff.”*

However, others found it hard to connect with a therapist or professional over the phone or via an online platform and, as noted earlier, faced delays in receiving support through call back services or hotlines.



*“I think it’s really hard for people to you know build a connection with someone over Zoom you know, like in that mental health place you know yeah.”*

*“Talking about these issues on a call is difficult, so I guess a lack of in person mental health services and just the waitlist being so long.”*

## ■ Groups and safe spaces

Young people identified services in their local areas such as headspace centres and youth services where they could access support. They named specific programs and community initiatives that provided safe spaces, meet ups, workshops, and group catch ups where they had the opportunity to connect with other LGBTQIA+ young people. This made young people feel safe to discuss their concerns and gain a better knowledge and understanding of health services and supports available in their local areas. Young people spoke favourably about services that were inclusive, and which felt more relaxed and youth-friendly than larger general health services. Young people reported that these services provided soft entry points into accessing further services and supports.



*“I remember when hearing about the development of a new like safe space in Western Sydney ... I sort of felt that a lot of the safe spaces are really clinical when you are in them ... I guess sometimes like for me I just want to like, chill with some other queer people and just like kind of, just relax and ... sometimes, just not engage with like government policy and that ... It is important to do that at some spaces but I feel like if we want to expand queer spaces as well, we should give, make them spaces that we can just go in and just not really have much of an expectation around the clinical side of that.”*

*“People just need community connection, just want to meet other queer people, sort of just like feeling isolated and alone and it would actually benefit their health to meet other queer people and I think what we look at is we keep waiting for.”*

*“Access to peer support groups outside of therapists connecting with other queer people, especially your own age is really important as well.”*

Young people spoke about some of the services that provided LGBTQIA+ Pride and rainbow groups, including ACON, headspace, Gender Centre, Twenty10, local councils and youth services.



*“We have access to services like the Gender Centre, in Twenty10 that we know exists in QLife that we can go and talk to her if we need any support.”*

*“Well I go to one it’s operated by the Gender Centre. My GP recommended it, it’s great.”*

While most young people valued these support groups, a few had negative experiences due to services not thinking through the needs and vulnerabilities of LGBTQIA+ young people. A few young people spoke about feeling unsafe to attend an LGBTQIA+ group in one area as they felt that the group would create an opportunity for others to target them with homophobic behaviour, putting them at risk.



*“Because it’s just so unorganised. You go in there and they don’t even have a set room for you. It’s just this random meeting room and they don’t actually have anything for you to do.”*

*“If you don’t know anyone in that group, you’re on your own. The person who runs it just sits there and doesn’t try and get the group to talk to each other, it’s just so bad.”*

*“It creates a hotspot for targeting with homophobia and stuff, because people know that’s where an LGBTQIA+ group is going on, when it starts and when it ends, they know that’s where they can go to take advantage of these vulnerable individuals.”*

## ■ Healthcare

The following section of the report focuses on the advice and medical care young people received – rather than the systems and services that deliver healthcare. Again, ACYP staff do not claim to have medical expertise in this space, and this report details young people’s experiences rather than an assessment of the health advice they were provided.

As outlined earlier in this report, some young people expressed frustration that their health professionals were either ill-equipped to provide advice and care, or that they held negative personal views about LGBTQIA+ concepts, which undermined the quality of care young people received.

### Sexual health services and support

Young people provided feedback relating to their experiences of sexual health care and services. A few young people spoke about their experiences of specialist sexual health services where health workers screened sexually transmissible infections (STIs) and provided advice and the opportunity to ask questions about any sexual health issues and safe sex practice. They highly valued services that were inclusive and considered their needs as someone who identified as LGBTQIA+.

*“Clinic 16 is free, because they do ... predominantly they work with LGBTQI+ people and sex workers, so they are more orientated towards people with specific sexual health needs.”*

However, some young people reported a lack of access to sexual health services which catered to and were inclusive of LGBTQIA+ young people. In mainstream health services they reported that professionals had made assumptions that they were in heterosexual relationships and therefore it was difficult for them to be comfortable stating their sexual orientation. As noted earlier, one young person found upon accessing an LGBTQIA+ friendly sexual health clinic, that there were additional STI tests they should have received.



*“Actually, another thing that healthcare professionals often ask is, ‘Are you sexually active?’ and the presumption is that you’ve been sexually active with someone of the opposite gender and that’s not great for LGBTQI people in general, especially if they are same sex attracted, because technically, yes, but maybe technically no, according to that professional standard, and it’s not very clear. You don’t really want to out yourself to some random doctor suddenly, but it’s also like ‘What are you asking me by that?’ With that, there’s different ways to do sexual health tests, but whenever I get a sexual health test, the doctor would always assume that I was heterosexual, so cut out three different tests that I have since been offered since saying, ‘Oh no, I have same sex partners.’ So, that’s like a whole range of different STIs that they weren’t testing for, because they assumed that I was with opposite, in a heterosexual relationship, so it definitely has its issues there.”*



In some of the groups, older aged participants shared their experiences of accessing the medication PrEP (Pre-Exposure Prophylaxis), which is a medication used to lower the chances of getting HIV.

Some expressed the discomfort in requesting this medication from their GP, and frustration about the general lack of understanding from health professionals regarding the medication and its use.



*“You know, certain questions about, ‘Should you be using PrEP?’ for example or forcing me to explain really uncomfortably about that kind of situation when I don’t think it was necessary.”*

*“You can’t get PrEP without your parents’ knowing.”*

*“I now have a regular GP, but when I have been out of state or have been on holiday and had to you know get a referral, they are like ‘What is that?’ and the frequent conversation where you almost build a description of GPs and it’s like ‘You studied a long time, you should really know this kind of thing.’”*

*“Yeah, it’s the base. And actually this is also a good point, when I ... so I found out about PrEP through Reddit and through ACON and the work that I do, and when I bought it up with my GP, she had no idea what it was and nobody in the doctor’s office that I went to knew what it was. And then the chemist that I went to, has to order it in because nobody gets it, so it’s definitely a lack of awareness from people that don’t immediately seem to need it. It’s quite surprising even in the medical community, people who don’t know what PrEP is, because it’s huge in the gay community.”*

In two of the group consultations young people raised their frustrations that PrEP was no longer available through Medicare, which has made the treatment inaccessible.



*“I was livid when they took PrEP off Medicare that drove me up the wall ... so it’s a pill that all people are being encouraged to take now that HIV and AIDS isn’t considered a gay disease, but it’s something that predominantly homosexual couples do take, and you take it once a day, it’s a pill and it was on Medicare. Now I pay \$120 for a pack every time.”*

*“So PrEP is kind of the new medication to take, and it now costs young people a lot of money, since it’s come off Medicare.”*

## Trans and gender diverse young people’s healthcare

Trans and gender diverse young people spoke about their experiences of medical treatment they received, but also about the fact that they were not able to receive health treatment they desired due to their age.

There are many complexities around parental consent and a young person’s ability to consent to gender affirming treatments. The use of puberty or hormone blockers and access to hormone replacement therapy (HRT) for those under 18 requires parental consent. Where parental consent is not provided, but HRT is sought, the case may appear before the Family Court.



Generally, gender affirming surgeries are not available to people under the age of 18.<sup>20</sup> For trans and gender diverse young people under 18 whose parents, carers or guardians did not consent to treatment, they felt there was no option.

This left young people feeling frustrated, disappointed, and isolated, feeling that they did not have the right to be themselves, and that there was a law in place that prohibited them from doing so.



*“Yeah, because you have got to be 18 or something or like ... to start hormones without your parents.”*

*“Yeah, maybe if you can ... if the legal age of consent is 16 and so you can like have sex at 16 and stuff, but you can't consent to having hormones, which is kind of unfair.”*

In cases where parents, carers or guardians did not consent, transgender young people reported they were simply waiting until they are 18 to access puberty blockers and hormones. One young person detailed their experience of attempting to access this medication without the support of a medical professional. While they claimed to be aware of risks associated with this, they also made recommendations about the ability to access other forms of medical care without the supervision of a medical professional. This young person reported they had friends who had engaged in the same behaviour.

Trans and gender diverse young people also shared their frustrations about gender affirming surgeries not being available to people under the age of 18 in NSW.

Cost of gender surgery in NSW is also very expensive and not accessible.



*“Treat it like it's a necessary decision, you know when people go in for life saving surgery, treat it like that and then there are these side effects, but you know ‘This is what's going to happen’ sort of thing, rather than a ... it is lifesaving surgery though ... Yeah, it is.”*

*“It's at 16, you can do it, you can go to a GP by yourself and they ask at 16, if you want your parent to be in the room with you, but the problem is that since you are still technically a minor, you can't medically consent fully without having parents' signature for it, so for stuff like top surgery, you have to get both your parents and I think ... I'm not sure, because I haven't looked into it, because it was like, ‘No, I'm not going to...’ I want to do it, and I know I've wanted to do it for a third of my life, but it's just too complicated to do when you are younger.”*

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<sup>20</sup> TransHub Under 18s accessed via:  
<https://www.transhub.org.au/under-18s>.

In several groups young people spoke about binding, that is, finding a way to temporarily make their chest look flatter in an effort to relieve gender dysphoria. Many raised concerns relating to a lack of education and information being available about how to bind safely. They noted there are risks associated with binding -including the materials used for binding, using a binder that is too small, or using a binder for extended periods of time.



*“Educate people about safe chest binding, because, I know lots of people who are [redacted]<sup>21</sup> that can cause damage to your breast tissue and other health issues.”*

*“Google said to use [redacted] to bind and that was really bad for them.”*

*“Not allowing children to get and use proper binders is what will cause them to use [redacted] and cause them harm. We need to shift people’s perspectives, you may find it uncomfortable but it’s a better attitude to what else can happen. They will feel more comfortable in their bodies and will not want to hurt themselves or anything like that.”*

One young person spoke about a health condition related to binding, but felt unable to access the care they needed as they were afraid to disclose their gender identity out of fear of being judged.



*“I had an issue that was related to being trans, it was like a health issue that came from like binding, and like I went to the doctor for it, but I was too scared to come out in case they were like transphobic and I didn’t want to get discrimination in healthcare, because that would be bad. So it was really difficult, because it was then a weird situation, like I didn’t get the help that I needed, so it’s very hard to actually get help.” ■*

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<sup>21</sup> These quotes have been redacted to prevent the spread of information about unhelpful practices.

# How to support LGBTQIA+ young people in health services

This guide has been developed based on the feedback and recommendations of LGBTQIA+ young people. It should not be considered an exhaustive list of ways to help and ACYP would recommend that if any person wants to support the LGBTQIA+ young people in their lives, they should have a conversation with those young people about how best to do so.

## Privacy and confidentiality

Consider the additional privacy and confidentiality needs of LGBTQIA+ young people:

- Offer opportunities to see the young person without their parent or carer in the room.
- Where they make disclosures about their sexuality or gender identity, speak with them about how open they are with their parents or carers before referring to their identity in front of their family.
- Consult with the young person if any information will be shared with their parents.
- Remember that a young person may face risks to their safety and wellbeing if they are 'outed' as LGBTQIA+.

- **Don't** make assumptions about what the young person may have shared with their parents or carers, or about the openness of their relationship.

*Parental consent and confidentiality were the greatest barrier that young people faced in accessing healthcare. Experiences and fears of breaches in privacy left young people feeling disrespected, deflated and frustrated by the lack of concern and care by some health professionals.*



### Remember:

Be genuine. Any efforts to be supportive of the LGBTQIA+ community must be genuine to support inclusivity and not a tokenistic gesture.

## Signs of inclusivity

- Clearly display that you are an LGBTQIA+ inclusive organisation by displaying flags, stickers and posters in your services and on your website.
- Provide access to all-gender bathrooms.
- Use gender neutral and inclusive language, recognising the diversity of all people.

*Young people reported negative experiences with some health services, which led to them feeling uncomfortable or reluctant to access healthcare services in future. Clear displays of LGBTQIA+ inclusion helped them find inclusive and supportive services.*

## Referrals

Provide referrals to information about LGBTQIA+ concepts and specialist LGBTQIA+ services:

- Provide links to factual websites with health information.
- Connect young people with local support groups for both social connection and wellbeing.
- Connect with local specialist supports to provide informed referrals to inclusive services.

- **Don't** assume a young person is aware of LGBTQIA+ concepts or has knowledge about services and supports they may be able to access.

*LGBTQIA+ young people reported feeling respected and supported by health professionals who listened and acknowledged their identity and feelings. They also highlighted the importance of staff who were able to support them in gaining access to specialist LGBTQIA+ supports.*

**Thank You**

The experiences of the young people included throughout this report could only be published as a result of the young people's bravery to share them.

ACYP thanks the young people who participated for their willingness to share so many deeply personal aspects of their lives – from discovering their identity, to their experiences sharing it with family and friends, and the consequences when that journey was not a peaceful one.

Thank you for sharing your stories with us.

The artwork depicted below was gifted to the Advocate after a consultation.



A most honourable battle!

# Glossary

Throughout the consultation, it was clear that language was incredibly important to the young people who participated – whether it was how they were addressed by others, how they expressed themselves, or how education and medical professionals spoke about the LGBTQIA+ community. Language was also important because it could be very hurtful and young people shared experiences of slurs, being misgendered and people in their communities demonstrating a poor understanding of LGBTQIA+ concepts.

The following table outlines key definitions or explains common phrases used by ACYP and young people throughout this report. Most definitions have been drawn from the Australian Institute of Family Studies, Kids Helpline, and Minus 18. In instances of slang, ACYP has included an explanation in line with usage throughout the consultations.

## Sexuality

<b>Asexual / Ace and Aromantic / Aro</b>	Asexual/Aromantic are terms that describe the sexuality of someone who doesn't feel sexual or romantic attraction, or may only feel it rarely (e.g. gray-asexual) or in some situations -like after developing a strong emotional bond (e.g. demisexual). <sup>^</sup>  Ace and Aro are common abbreviations for Asexual and Aromantic. Some people use 'Ace' as an umbrella term for people who are asexual, aromantic or identify with a similar sexuality. <sup>o</sup>
<b>Bisexual / Bi</b>	A person who is sexually and/or romantically attracted to people of the same gender and people of another gender. Bisexuality does not necessarily assume there are only two genders.*
<b>Demisexual / Demiromantic</b>	Demisexual or Demiromantic means only experiencing sexual or romantic attraction towards people when there's an emotional bond with the other person already. <sup>o</sup>
<b>Gay</b>	A person who identifies as a man and is sexually and/or romantically attracted to other people who identify as men. The term gay can also be used in relation to women who are sexually and romantically attracted to other women.*
<b>Heterosexual</b>	A person who is sexually and/or romantically attracted to the opposite gender.*
<b>Lesbian</b>	A person who identifies as a woman and is sexually and/or romantically attracted to other people who identify as women.*
<b>Pansexual</b>	Pansexual means attracted to (or having the potential to be attracted to) people of any or all genders. Simply put, it means that someone's sex or gender doesn't factor into whether you find someone attractive or not. <sup>^</sup>
<b>Queer</b>	A word that originally meant 'strange' or 'peculiar' and became an insult against non-heterosexual people. More recently, the word has been reclaimed by some people in the LGBTQIA+ community and may be used as an umbrella term for people who identify as sexually or gender diverse. Because 'queer' is an ambiguous word and can mean different things for different people, it is important to explore its meaning with someone before using it. <sup>^</sup>



## Gender

<b>Cis-gender</b>	A term used to describe people whose gender corresponds to what they were assigned at birth.*
<b>Gender diverse</b>	A term that describes a person who feels that their gender identity doesn't fit the categories associated with their assigned sex. For example, someone raised as a girl may feel as though the categories of female/feminine are restrictive or don't apply to them. Questioning how gender stereotypes affect you is normal - and some people identify as genders other than male or female.*
<b>Gender fluid</b>	A term used to describe a person with shifting or changing gender.*
<b>Intersex</b>	Intersex person or person with an intersex variation means a person is born with chromosomes, reproductive organs or genitals that don't fit the narrow medical or social expectations for what it means to have a male or female body. There are many different intersex variations.^
<b>Non-binary</b>	Non-binary is a label that describes someone's understanding and experience of their gender as being outside of the common belief that there are only two genders, either male or female. Some people also have a legal non-binary sex.^
<b>Transgender / Trans</b>	Trans/Transgender is a label that describes people whose gender identity is different to their assigned sex/gender at birth. A transgender person may use different words to describe their identity, like trans/transman/transwoman, or may prefer to use male, female or other non-binary labels. There are also culture-specific words that some people may use because they are more appropriate or make more sense to them (e.g. Brotherboy and Sistergirl).^

## Common terms

<b>Ally</b>	A word that means a person who is part of a privileged group (e.g. heterosexual, cisgender, endosex) that is a friend, advocate or supporter for LGBTQIA+ people and their rights.^
<b>Coming out</b>	A term used by a lot of people to describe when they tell others about their sexuality and/or gender.^
<b>Inviting others in</b>	Inviting others in is a phrase that means telling people about one's sexuality and/or gender, similar to 'coming out'. Some people think that this word is more culturally appropriate for people who see their sexuality and/or gender as only one part of their identity that doesn't need to be shared with everyone. Some people might choose who to tell and 'invite them in' to a private part about their identity.^
<b>Pronouns</b>	Pronouns are words that describe someone's gender. There are many different pronouns that can be used. The most common are female (she/her/hers), male (he/him/his) and gender neutral pronouns (they/them/theirs).^

## Common terms cont.

<b>Cisnormative</b>	Assumes that everyone is cisgender and that all people will continue to identify with the gender they were assigned at birth. Cisnormativity erases the existence of trans people.*
<b>Deadname</b>	An informal way to describe the former name a person no longer uses because it does not align with their current experience in the world or their gender. Some people may experience distress when this name is used.*
<b>Hate-crimed (as a verb)</b>	<p>A hate crime is a criminal offence motivated against persons, associates of persons, property or society that is motivated, in whole or in part, by an offender's hate against an individual's or group's actual or perceived; race, religion, ethnic/national origin, sex/gender, gender identity, age, disability status, sexual orientation or homeless status.*</p> <p>Throughout conversations, young people used the term 'hate-crimed' as a verb to describe violence directed at them as a result of their gender identity or sexual orientation. At times, though not always, it appears it was used as an exaggeration. However, even in these cases it was used to emphasise the level of underlying fear participants lived with of being subject to violence.</p>
<b>Heteronormative</b>	The view that heterosexual relationships are the natural and normal expression of sexual orientation and relationships.*
<b>Outed</b>	A word that describes when someone (other than the person who is gender or sexually diverse) tells others either accidentally or purposely about someone's sexuality and/or gender.^

\*Australian Institute of Family Studies (2022) *LGBTIQ+ glossary of common terms*, accessed via

<https://aifs.gov.au/resources/resource-sheets/lgbtqa-glossary-common-terms>.

^Kids Helpline (2019) *LGBTIQ+: The Ultimate Dictionary*, accessed via <https://kidshelpline.com.au/teens/issues/lgbtiq-ultimate-dictionary>.

°Minus18 (2021) Your guide to words and definitions in the LGBTQIA+ community, accessed via <https://www.minus18.org.au/articles/your-guide-to-words-and-definitions-in-the-lgbtqi+-community>.

\*NSW Police Force (2022) Hate crimes, accessed via [https://www.police.nsw.gov.au/crime/hate\\_crimes](https://www.police.nsw.gov.au/crime/hate_crimes).

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