



DIVERSITY IN HEALTH:

Improving the health and well-being
of transgender, intersex and other
sex and gender diverse Australians

Acknowledgements

- ▶ The National LGBTI Health Alliance is the national peak health organisation for organisations and individuals across Australia that work in a range of ways to improve the health and well-being of lesbian, gay, bisexual, trans/transgender, intersex and other sexuality, sex and gender diverse (LGBTI) people and communities.
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- ▶ The Alliance acknowledges the traditional owners of country throughout Australia, their diversity, histories and knowledge and their continuing connections to land and community. We pay our respect to all Australian Indigenous peoples and their cultures, and to elders of past, present and future generations.

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Foreword:

A solid foundation for improved health

In April 2012, individuals and organisations from across Australia were invited to participate in a ground breaking National Health Roundtable organised by the National LGBTI Health Alliance (the Alliance) to address the collective priorities for transgender, intersex and other people of diverse sex and gender (DSG). The Roundtable was held in Sydney over two days in June 2012 with a secretariat provided by the Alliance. Seventeen people attended, representing a wide range of organisations from every State and Territory.

This is the first time that such a comprehensive group of people, from all around the country and representing much of the DSG community, have come together to discuss the most critical health areas for national reform.

Our discussions at the Roundtable were informed by research, expertise and knowledge that each participant brought about the issues affecting their local communities.

DSG people and organisations have demonstrated incredible resilience and personal responsibility over many years. Individuals have and do participate actively in many broad areas of community life, such as workplaces, sporting clubs, community groups and religious organisations.

Right around Australia, however, DSG people continue to encounter high levels of stigma, violence, discrimination, and prejudice and as a result experience social isolation, unemployment, depression and suicide. Our ability to access appropriate health and other mainstream services is often hampered by a lack of organisational and staff knowledge. Meanwhile, DSG organisations, who do have the knowledge and skills to provide constructive support and advocacy services, lack the capacity to engage effectively due to the fact that they are predominately unsupported by the appropriate health authorities.

The recommendations made in this Report reflect the priorities that were agreed to by all participants at the National Roundtable. They are by no means a complete work plan, but they do provide a solid foundation from which to commence this important work in practical ways – to improve the health of transgender, intersex and other sex and gender diverse Australians.

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Executive Summary

In June 2012 a group of people representing Australia's transgender, intersex and other sex and gender diverse communities (DSG) met under the auspices of the National LGBTI Health Alliance to participate in a ground-breaking National Health Roundtable.

The Roundtable was held in Sydney over two days in June 2012 with a secretariat provided by the Alliance. Seventeen people attended, representing a range of organisations from every State and Territory.

The main Guiding Principle of the DSG Health Roundtable was that transgender, intersex and other diverse sex and gender (DSG) people, have the same personal responsibilities and rights with regard to the delivery of health and social services as all Australians.

Key Recommendations:



Medical and pharmaceutical benefits:

Effective and equitable MBS and PBS coverage for transgender, intersex and other DSG people.



Regulation of medical interventions:

Removal of interventions on intersex people, and removal of current Family Court requirements for transgender people under 18 to access hormone blockers.



Sex and gender information:

Consistency across all Commonwealth and State agencies in relation to the way sex and gender information is collected, changed and used. The criteria for changing legal sex should be no more onerous than the current Passport policy requirements.



Discrimination:

Commonwealth discrimination protection on the basis of gender identity, presentation and biological sex characteristics.



Health information:

Inclusion of sex and gender diversity in ABS Census and other health and social surveys including by the Australian Institute of Health and Welfare.

Diversity in Health:

Health, Education and Community Services

Aspiration

Access to health, education, community and government services which are provided in a manner that is inclusive, accountable, knowledgeable and respectful of Recommendations and issues of people of diverse sex and gender.

Current situation

There is general ignorance, misinformation, prejudice and discrimination within Australian society, at both the individual and institutional level, regarding people of diverse sex and gender, their human rights, and how to provide inclusive and respectful services.

Many people of diverse sex and gender experience social isolation and lack information and resources about forms of support available.

Recommendations

- ▶ DoHA and FaCSIA to recognize DSG people as a priority group within funded programs – especially those designed to reduce social isolation, and programs for DSG families and their children.
- ▶ DoHA and FaCSIA to address DSG people's inability to access many funded community services due to their sex segregated service delivery model.
- ▶ DoHA to encourage existing LGBTI organisations to increase the visibility and targeting of DSG people via contractual arrangements.

Diversity in Health:

Identity Recognition

Aspiration

Access to legal recognition of the self-expressed sex and gender of all people born or living in Australia. Such recognition should include not being required to specify sex. Assignments for children should be given as provisional and birth certificates easily alterable when they are able to articulate their sex.

Current situation

Each State and Territory jurisdiction has different requirements defined on the basis of binary notions of sex and gender; most at present require medical treatment, usually consisting of alteration or removal of reproductive organs. Requirements also differ for those born outside Australia. The Attorney-General's Department has already undertaken work on how and why Commonwealth agencies collect and use information and sex and gender.

Recommendations

- ▶ Each State/Territory Government to implement laws, policies and regulations to allow for documents to be amended to match people's lived identity without mandating medical intervention, or other actions such as divorce. Implications for people born overseas to be considered.
- ▶ Commonwealth Government to formally respond to the recommendations of the AHRC "Sex Files" report and the Commonwealth Attorney General to work with representatives from the DSG community to further refine and develop an implementation plan.
- ▶ Australian Human Rights Commission to undertake public education and advocacy concerning the rights of people of diverse sex and gender.
- ▶ The Standing Council on Law and Justice to work for uniformity across all jurisdictions.
- ▶ All State/Territory Commonwealth Government Departments to allow for consistent recognition of change of sex without requiring an altered birth certificate.
- ▶ All Commonwealth Government Departments to allow individuals to a title based on individual preference rather than recorded sex. This applies to both hard copy and online forms (eg: online tax lodgment).

Diversity in Health:

Health Care

Aspiration

All persons should have access to high quality and affordable health care and psycho-social support around issues of sex and gender diversity. Medical care should be based on informed consent and evidence. It should not be driven by approaches which see transgender and intersex individuals as having a “disease” or “illness”, or that seek to “normalise” bodies and reinforce the idea that there are only two categories of sex.

Current situation

There is a lack of appropriate health care for people of diverse sex and gender. Levels of medical knowledge are generally very low, and the model of service delivery mostly not appropriate or sensitive. DSG people are rarely enabled to make informed decisions about their own healthcare, and are often pathologised with the focus of medical intervention aimed at ‘normalising’ rather than addressing health issues.

Both transwomen and transmen can be restricted from receiving Medicare rebates on routine procedures due to the gendering of procedures and rebates within Medicare, such as pap smears for transmen, prostate checks for transwomen, or treatments for intersex males with ovaries.

Recommendations

- ▶ Australian Suicide Prevention Advisory Council (ASPAC) to amend National Suicide Prevention Strategy to specifically include issues for DSG people.
- ▶ DoHA to respond to the significantly higher rates of anxiety, depression and suicide amongst DSG people by funding specifically targeted programs that are developed and delivered in conjunction with representatives of the DSG community.
- ▶ DoHA to encourage the Council of Deans of Medical Schools to develop and include curricula concerning DSG people and their needs, and ensure recognition throughout the entire curricula. Development of curricula needs to take place in consultation with representatives of the DSG community.

Recommendations for Health Care Continued...

- ▶ NHMRC Ethical guidelines to be reviewed concerning applicability for DSG people.
- ▶ The Commonwealth Government to direct Medicare Australia to remove the gendering of medical procedures and rebates, so that people can gain access to rebates for procedures which are appropriate for their bodies, regardless of their gender. This coverage should include, but not be limited to, medically necessary transition processes.
- ▶ Pharmaceutical Benefits Advisory Committee to review its current regulation of particular medications accessed by DSG people, especially with regard to the limitations this places on DSG people's capacity to travel, and for community inclusion on the Pharmaceutical Benefits Advisory Committee on an ongoing basis.
- ▶ The Commonwealth Government to ensure the coverage of prosthetics for DSG people on an equitable basis to the existing coverage of prosthetics to people who require prosthetics on other medical grounds.
- ▶ The Commonwealth Government to replace the "Special Measures" requirement, which currently makes hormone treatment inaccessible for most DSG people under the age of 18. These changes should be developed in consultation with the Royal Colleges, Australian and New Zealand Professional Association for Transgender Health (ANZPATH), and representatives from the DSG community.
- ▶ The Commonwealth Government to provide a mechanism for the regulation of surgery performed on intersex children. These changes should be developed in consultation with the Royal Colleges, the ANZPATH, and representatives from the DSG community.



Diversity in Health:

Legal Protection

Aspiration

Comprehensive protection in Australian law from discrimination on the basis of sexual orientation; gender identity and expression; and sexual/biological characteristics. Comprehensive protection of an individual's right to privacy and confidentiality in relation to their past or present gender identity and sexual/biological characteristics.

Current Situation

There is a lack of protection from discrimination on the basis of gender identity, gender expression, sex and sex characteristics, and sexual orientation at a Commonwealth level. There are inconsistencies between state and territory protection from discrimination on the basis of sexual orientation, gender identity, gender expression, and sex and sex characteristics; significant gaps in state/territory protection (e.g. only people who have registered a legal change of sex are covered by anti-discrimination legislation in some jurisdictions). Current exemptions from Anti-Discrimination legislation are easily obtained, too extensive in their scope, and do not have to be justified on a case-by-case basis.

Recommendations

- ▶ Commonwealth to expedite the introduction of anti-discrimination legislation to include gender identity and gender presentation, biological sex characteristics, and sexual orientation, with a minimum allowance for exemptions.
- ▶ Commonwealth to fund programs that seek to reduce stigma and discrimination against DSG people and to increase DSG people's awareness of relevant protection from discrimination, vilification, harassment and violence.
- ▶ Commonwealth to review Privacy Act and related legislation for any adverse implications for DSG people, and so that a person's previous sex or gender is never revealed.
- ▶ States/Territories to review legislation covering privacy and confidentiality, including for employment background checks, and anti-discrimination legislation which may impact on DSG people.
- ▶ State/Territory police authorities, and the Australian Federal Police to train select staff in awareness of issues faced by DSG people including violence.
- ▶ State/Territories to review legislation and policy relating to DSG prison detainees. Specific issues to be addressed include the basis upon which detainees are allocated to a particular gendered facility, the mechanisms in place for ensuring their safety while detained, as well as procedures which allow DSG detainees access to appropriate health care.
- ▶ States/Territories to establish community-based anti-violence projects.

Diversity in Health:

Research and Evidence

Aspiration

Access to good evidence regarding the health, Recommendations and experiences of Australian people of diverse sex and gender, including medical, health and wellbeing research, DSG inclusion in broad population data sets, and effective service delivery models for DSG people.

Current Situation

There is a lack of comprehensive, valid and reliable data about people of diverse sex and gender (especially Intersex people), their health and wellbeing, in the Australian context. Research does not acknowledge differences based on locale (such as different states and territories; and rural, regional and remote areas, including remote indigenous communities) and intersecting areas of potential disadvantage such as sexual orientation, ATSI, CALD, economic status, disability and ageing.

Recommendations

- ▶ NHMRC, ARC and other public and private research institutions to be encouraged to establish clinical and other research concerning DSG people to be a priority for commissioned research and funding.
- ▶ Existing research and data collections (eg by the AIHW) to include gender identity in addition to sexual orientation. Commonwealth to request the Australian Institute of Health and Welfare to lead a national project on sex and gender data definition and collection, including all States/ Territories, and all collection agencies. This project should be undertaken in consultation with representatives of the DSG community.
- ▶ ABS to be requested to develop ways to identify and capture data about DSG people as part of consultations in preparation for the 2016 Census.
- ▶ Commonwealth to fund a national clearinghouse for DSG research, resources and services.



Special thanks to everyone who participated in the Roundtable, including the following organisations:



gender rights are human rights

A Gender Agenda



Rainbow Communities Tasmania Inc.



The AIDS Council of SA Inc



www.freedomgender.org.au

Freedom Gender Centre (WA)



Androgen Insensitivity Support Group Australia (AISSGA)



Trans Project (SA)



Changeling Aspects



TransGender Victoria (TGV)



Organisation Intersex International Australia Limited

Organisation Intersex International Australia



tasmania's gender and sexuality support and education service

Working it Out (WIO)



Zoe Belle Gender Centre