Public Health Association of Australia submission on The Way Forward – LGBTIQ Report (South Australia)

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Introduction

The Public Health Association of Australia

The Public Health Association of Australia (PHAA) is recognised as the principal non-government organisation for public health in Australia working to promote the health and well-being of all Australians. It is the pre-eminent voice for the public’s health in Australia. The PHAA works to ensure that the public’s health is improved through sustained and determined efforts of the Board, the National Office, the State and Territory Branches, the Special Interest Groups and members.

The efforts of the PHAA are enhanced by our vision for a healthy Australia and by engaging with like-minded stakeholders in order to build coalitions of interest that influence public opinion, the media, political parties and governments.

Health is a human right, a vital resource for everyday life, and key factor in sustainability. Health equity and inequity do not exist in isolation from the conditions that underpin people’s health. The health status of all people is impacted by the social, cultural, political, environmental and economic determinants of health. Specific focus on these determinants is necessary to reduce the unfair and unjust effects of conditions of living that cause poor health and disease. These determinants underpin the strategic direction of the Association.

All members of the Association are committed to better health outcomes based on these principles.

Vision for a healthy population

A healthy region, a healthy nation, healthy people: living in an equitable society underpinned by a well-functioning ecosystem and a healthy environment, improving and promoting health for all.

Mission for the Public Health Association of Australia

As the leading national peak body for public health representation and advocacy, to drive better health outcomes through increased knowledge, better access and equity, evidence informed policy and effective population-based practice in public health.

Preamble

PHAA welcomes the opportunity to provide input to the consultation on The Way Forward: LGBTIQ Report in South Australia. The reduction of social and health inequities should be an over-arching goal of national policy and recognised as a key measure of our progress as a society. The Australian Government, in collaboration with the States/Territories, should outline a comprehensive national cross-government framework on promoting a healthy ecosystem and reducing social and health inequities. All public health activities and related government policy should be directed towards reducing social and health inequity nationally and, where possible, internationally.
PHAA Response to the consultation paper

The stated key objectives of the strategy are to improve:

- Social and emotional wellbeing through improving policy and service delivery to ensure that LGBTIQ South Australians lead safe, healthy and active lives; have their priority health and safety issues identified and addressed; and have access to inclusive, comprehensive, high-quality health care services.
- Employment and opportunities through fair and inclusive government workplaces that increase opportunities for full participation in paid and unpaid work; and a State Government workforce that is representative of the diversity contained in the South Australian community.
- Awareness and education through the contribution of LGBTIQ South Australians to the civil, economic and political life of the state being recognised and celebrated; and the strength and diversity of the LGBTIQ communities in South Australia being acknowledged and valued by all.
- Inclusive service delivery through State Government services that are accessible to, and inclusive of, LGBTIQ communities in South Australia; and the State Government workforce being sensitive and aware of the needs of LGBTIQ South Australians and providing culturally competent services.
- Continued engagement with LGBTIQ communities.

What do you think the Government should focus on?

The PHAA supports the key objectives of the strategy – LGBTIQ inclusion and equity is a public health issue at all ages. As a social determinant of health, it is a particular issue for those LGBTIQ people who are simultaneously part of another minority population – Aboriginal and Torres Strait Islanders, culturally and linguistically diverse groups, and those with disabilities.

PHAA has some suggestions for further detail which may be included in the strategy. With rates of mental health issues, and suicidal thoughts and behaviour being higher among LGBTIQ young people than the general community, the issues to be addressed by the strategy are serious and concerning. There are known risk factors such as stigma, discrimination, fear of and experience of violence, bullying, rejection by family and friends, internalised homophobia from past experiences, homelessness, alcohol and other drug misuse and suicidality among friends. The strategy must address these risk factors, in order to achieve its aims.

The Government should be looking for improvements in actual health outcomes for LGBTIQ communities, especially vulnerable groups such as youth and elderly. Specific targets to address risk factors may be useful in providing measureable aims. Anecdotally, LGBTIQ people in South Australia are travelling to Victoria to access transgender services. There is a perceived lack of availability of services and health practitioners in South Australia, and practitioners are ageing without being replaced in the workforce. This needs to be addressed through training and development of the next generation of the workforce.

Employment and career opportunities should aim to go beyond government workplaces, to achieve a goal of all South Australian workplaces being fair and inclusive.

What would you like to tell specific government agencies?

The LGBTIQ community is diverse, with complex variation in the needs of individuals. Levels of public awareness are lacking especially of some of the diversity. In common is the level of discrimination and disadvantage the community faces, with even health care providers and counsellors perpetuating stereotypes and misconceptions.
The health impacts and experiences of lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ) healthcare consumers has been documented over the past decades and it is now generally acknowledged that non-heterosexual identity, attraction, and behaviour are associated with social determinants of health (e.g. social inclusion). By comparison, the experiences of LGBTIQ health personnel have been researched sparsely. Understanding LGBTIQ workplace experiences, acceptance and inclusion is important to improve health system efficiency.

The discrimination reported by LGBTIQ health personnel has decreased over the decades but it still exists. Implications of such discrimination include increased levels of stress and anxiety, denied training, employment and promotion. To cope with workplace discrimination, LGBTIQ health personnel have reported leading a “double life” by being “closeted” at work. Positive experiences were also reported. “Out” LGBTIQ health personnel served as successful role model for “closeted” colleagues and healthcare consumers, and fostered better understanding of LGBTIQ issues. An inclusive workplace policy is needed to effectively engage LGBTIQ health personnel and healthcare consumers. Such a policy may improve workforce retention, enhance an organisation’s public image, reach new client groups and be responsive to legislative and societal change.

The strategy currently lacks a focus on trans and gender diverse populations, who are particularly marginalised. The ‘Informed consent’ model of treatment used in the US (and used in Victoria in some gender transition services, and proposed for wider use) is positive and may provide a model suitable for South Australia. This model of treatment seeks to acknowledge and better support the patient’s right to, and capability for, personal autonomy in choosing care options without the required involvement of a mental health professional. Clinician’s use of the informed consent model would enable them both to attain a richer understanding of transgender and gender-nonconforming patients and to deliver patient care in general.

The Cultural Competency Framework is another guide to practice for mental health and suicide prevention services for LGBTIQ communities which may be a useful reference for the strategy. This framework recognises that cultural competency requires development of an understanding and awareness of your own culture, beliefs and values; knowledge of cultural practices and world views within the LGBTIQ community and acquiring skills in working with LGBTIQ communities as a cultural group.

PHAA also supports the inclusion of The Safe Schools Anti-bullying Initiative in the strategy. The Government should seek to minimise any risk posed to that position by the upcoming State election.

What are we doing well?

The audit of policies and procedures has provided a good foundation for estimating the size of the task involved in removing discrimination against LGBTIQ communities.

The South Australian government has demonstrated public support for the LGBTIQ community through the official apology, Pride march and Equal Opportunity Commission events, LGBTIQ inclusive statements across policies.

The recognition of further vulnerable groups with the LGBTIQ communities such as youth and the elderly is an important element in recognising and addressing risk. However, there is a lack of detail in the strategy about what this intersection of risk and oppressions means and how it will be addressed. Specified and accessible services are required. Similarly, few services are available for LGBTIQ people in regional and remote areas of South Australia.

The South Australian government demonstrated leadership during the Commonwealth postal vote on marriage by establishing a dedicated LGBTIQ counselling service.
The LGBTIQ ageing well alliance is a very positive step, recognising that older LGBTIQ people are a high risk group. It would be beneficial for this group to diversify its membership to include greater representation of cultural and linguistically diverse people.

The commitment of the South Australian government to changing discriminatory legislation is clear, and the PHAA is strongly supportive of this process. The momentum gained during this process must be maintained to ensure the current efforts of the Human Rights Law Centre and politicians to remove the ‘gay panic’ murder defence.5

Conclusion

PHAA supports the broad directions of the strategy. We are particularly keen that the following points are highlighted:

• LGBTIQ inclusion and equity is a social determinant of health and a public health issue at all ages
• The strategy needs to address known risk factors for LGBTIQ people
• The strategy should include detail about service models, accessibility and availability

The PHAA appreciates the opportunity to make this submission and the opportunity to contribute to the strategy for LGBTIQ people in South Australia.

Please do not hesitate to contact me should you require additional information or have any queries in relation to this submission.

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16 February 2018
References


