Research Matters: Why do we need LGBTIQ-inclusive services?

A fact sheet by
Rainbow Health Victoria

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1. Introduction

There is increasing recognition by health and community services and policy-makers in Australia that LGBTIQ* communities have unique health and wellbeing needs, and that addressing these should be a priority. This paper argues that continuing to develop LGBTIQ-inclusive services is important, and has been shown to improve service access and acceptability for LGBTIQ communities.

A large body of international and Australian research has established significant disparities in health and wellbeing for LGBTIQ communities, compared to the general population. This is likely attributable to experiences of stigma and discrimination, violence and abuse driven by homophobia, biphobia, transphobia and intersexphobia. These experiences have also contributed to barriers in accessing health and community services, due to actual or anticipated experiences of stigma and discrimination.

2. LGBTIQ health and wellbeing

People from LGBTIQ communities generally report a lower rating of self-perceived health than the general population. Data from the Household, Income and Labour Dynamics in Australia (HILDA) survey show comparatively poorer life satisfaction, general health, mental health and health behaviours among LGB people compared to heterosexual people.[1] In Private Lives 3, a recent large national survey of LGBTIQ health and wellbeing, participants reported lower self-rated health than the general population.[2]

There are indications of poorer health outcomes for LGBT people in areas such as HIV and STI prevalence, and others including obesity, risk for certain cancers, asthma and cardiovascular disease.[3–5] Some studies have found that rates of alcohol and other drug use are higher among LGBT people than the general population.[6,7] Within this, some individuals may struggle to manage their use of alcohol or other drugs to the point where this has a negative impact on their lives.[2]

Rainbow Health Victoria: Evidence + Advocacy + Action

Rainbow Health Victoria is a program that supports lesbian, gay, bisexual, trans and gender diverse, intersex and queer (LGBTIQ) health and wellbeing through research and knowledge translation, training, resources, policy advice and service accreditation through the Rainbow Tick. We're located within the Australian Research Centre in Sex, Health and Society at La Trobe University and are funded by the Victorian government.

Research Matters is a series of information resources produced by Rainbow Health Victoria that:

- draws together the latest research on LGBTIQ health and wellbeing
- promotes knowledge on the key issues involved in LGBTIQ inclusion
- assists communities, organisations, service providers and government in implementing policies and programs to improve health, wellbeing and inclusion

This issue outlines why LGBTIQ inclusion is important in the delivery of health and community services.

There is a significant body of evidence to suggest that LGB people experience anxiety and depression at higher rates than their heterosexual peers and are at greater risk of suicide and self-harm.[2,8–10] Young people and bisexual people in particular are at a particularly higher risk according to some studies.[11,12] Trans and gender diverse people have been found to have comparatively higher rates of diagnosis or treatment for mental health issues.[2] A recent study of trans and gender diverse young people found significant levels of depression, anxiety, self-harm and suicidality, many times higher than are observed in the general population.[13]

* Variations of the acronym LGBTIQ will be used throughout, depending on which communities are included in particular studies or discussions.

There is less available data on the mental health of people with an intersex variation, but some studies have found significant levels of self-harm and suicidality. In many cases, participants identified unnecessary medical interventions and experiences of stigma and discrimination as drivers of poor mental health and wellbeing, rather than the intersex variation itself.[14]

Unfortunately, gaining a more detailed view of LGBTIQ health and wellbeing in Australia is limited by the failure of larger population-level studies to include adequate questions about sex, gender and sexuality. Specifically, questions currently in the national Census do not allow for an accurate estimate of LGBTIQ population size or an assessment of LGBTIQ experiences within other health and wellbeing measures. Similar issues have been identified in Australia and internationally with data collection at health service system level[15–17] and in coronial reporting.[18]

3. Why are outcomes different?

In Australia, legal recognition and protections for LGBTIQ people have improved significantly in the last decade, although important gaps remain for trans and gender diverse people, and people with intersex variations. However, LGBTIQ people still regularly experience inequality and devaluing of their identities and relationships, and systemic and institutional failures to protect bodily autonomy. LGBTQ people also report high levels of harassment, verbal and physical abuse, violence and sexual assault. This occurs in public and in all areas of their lives.[5,19,20] These experiences are known to impact health outcomes in a variety of ways.

There is also significant association between poor mental health for LGBTQ people and rejection from family or communities and experiences of discrimination and harassment.[1,21,22,23] In the recent debate around marriage equality, research showed that more frequent exposure to negative media messages was associated with greater psychological distress.[24] In contrast, family acceptance has been shown to have a significant positive impact on mental health and wellbeing for LGBTQ young people.[25–28] More broadly, connections with friends, peers and 'families of choice' have been shown to be important protective factors for health and wellbeing.[2,13,29,30]

4. Accessing services

Australian and international studies show that LGBTIQ people under-utilise health services and delay seeking treatment due to actual or anticipated experiences of stigma and discrimination from service providers.[31,32] This can lead to reduced screening for a range of physical and mental health conditions and an escalation of health issues and poorer prognosis. It can also mean that LGBTIQ people do not fully disclose relevant information about themselves and their health or support needs. Similar barriers are relevant to accessing social and community services.

Negative experiences in accessing services can include:

- overt homophobia, biphobia or transphobia
- abuse or discrimination from staff or other clients
- incorrect assumptions being made by staff about sex, gender or sexuality
- problems with language, terminology and misgendering/misnaming of clients
- lack of community-specific knowledge and sensitivity

In some cases, anticipation of experiencing stigma or discrimination has been found to have a greater negative impact on people than actual experiences.[31] This is a likely a reflection of broader experiences of discrimination, and is a significant barrier to services access.[32]

Discrimination can lead to social isolation and economic disadvantage, which in turn impacts on access to health and community services. For instance, higher levels of homelessness for LGBT people is associated with experiences of discrimination and family rejection, and compounded

for many by experiences of abuse and negative attitudes when accessing housing and welfare services.[33] Discrimination can also lead to lower incomes and higher unemployment, particularly for trans and gender diverse people.[34,35] This makes it less likely that LGBTIQ people are able to afford the care they choose and need.

There are specific barriers for trans and gender diverse people seeking mental health and other health services. In Australian research, this includes encountering inexperienced or transphobic service providers, and long waiting lists to see 'trans-friendly' providers. Feeling isolated from services was found to have a significant negative impact on mental health.[13]

More generally, a major barrier for LGBT people seeking mental health care has been found to be the lack of an affirmative provider.[8,32] This means feeling safe and supported by staff and other clients, but also being valued and affirmed as LGBT by the service.[31]

People with intersex variations also face unique barriers, with many having experienced medical interventions at an early age. Some studies have found that many report trauma and anxiety related to medical settings as a result.[14] Intersex advocates argue strongly against interventions to 'normalise' intersex bodies on the grounds that they lack medical necessity and there is no meaningful consent on the part of the child.[36,37]

Unfortunately, there is recent evidence in Australia that the health and mental health services LGBTIQ people reported accessing most frequently were those they reported least likely to respect their gender and sexuality. In Private Lives 3, mainstream health services were accessed by 82% of participants but they reported the lowest levels of feeling respected. Meanwhile, medical services that were known to be LGBTIQ-inclusive were accessed by 25% and services that cater only to LGBTIQ people were accessed by 5.7%. Participants accessing these services reported high levels of feeling their gender and sexuality had been respected, though this was notably lower for gender being respected when accessing mainstream services.[2]

It is crucial that health and community services are targeting and tailoring their work to address the needs of LGBTIQ communities in a way that is affirming of sexuality and gender identity, and are attentive to the particular pressures and health concerns experienced by LGBTIQ people.

5. Service preferences

Many LGBTIQ people want to be cared for and supported by practitioners and services that have a deep understanding of their lived experiences. Community-controlled organisations are governed and operated by and for affected communities. This enables such organisations to deliver trusted and culturally-appropriate services.[38] However, many LGBTIQ people also want access to mainstream services, particularly if they are known to be LGBTIQ-inclusive.

In Private Lives 3, over one in five participants said that they would prefer to access services in future from a service that caters only to LGBTIQ people, while nearly half indicated they would prefer to access a mainstream medical or support service that is known to be LGBTIQ-inclusive.[2] There are a range of possible reasons for this, including:

- limited availability of LGBTIQ-community-controlled services (e.g. waiting lists or residency outside of major urban centres)
- the range and type of health and community services required
- preference for mainstream services that specialise in a particular issue
- wanting a greater degree of anonymity outside of an LGBTIQ community-controlled service
- wanting to be able to equitably access all services like anyone else

It is also important to note that LGBTIQ communities are diverse, and will have different needs and service preferences. For instance, trans and gender diverse people or people with intersex variations

may require specialised and integrated affirmative medical, psychological and social services. In Private Lives 3, trans and gender diverse participants had a stronger preference for LGBTIQ-community controlled services, in comparison to other LGB people.[2]

Overall, there is increasing recognition that LGBTIQ people are more likely to access and benefit from those services that they know to be consistently affirming of their identities and experiences. In Private Lives 3, more than three quarters of people said they would be more likely to use a service that had been accredited as LGBTIQ-inclusive.[2] This suggests that the way forward is a focus on 'cultural safety' in service delivery.

6. The way forward

The concept of 'cultural safety' was originally developed to apply to health service delivery for Maori communities, and for Aboriginal and Torres Strait Islander communities in Australia. The Australian Human Rights Commission defines cultural safety as 'an environment that is safe for people: where there is no assault, challenge or denial of identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience of learning, living and working together with dignity and true listening'.[39] Cultural safety was put forward in opposition to the more narrow and limited concept of 'cultural competency'.[40]

Over time, the concept has been expanded to apply to inclusive and affirmative health and community service delivery for LGBTIQ communities. Cultural safety in this context is built on the idea that providers cannot rely on recognising someone as LGBTIQ and tailoring their service to them on the spot. It is not obvious from looking at someone that they are LGBTIQ, and people will often not 'come out' or disclose to services providers unless they feel safe to do so.[41] LGBTIQ inclusion therefore requires health and community services to establish universal policies, systems and processes that establish and demonstrate cultural safety.

There is increasing recognition that LGBTIQ inclusion means more than base level awareness or competency training; it requires a comprehensive strategy for systemic change and service system re-design. Cultural safety for LGBTIQ communities also needs to be applied across the entire service system to ensure consistency, as one poor episode along a client journey can result in a client dropping out of care entirely.

The benefits of embarking on this journey can be profound for LGBTIQ people accessing services, as well as for LGBTIQ staff within organisations delivering services. In Australia, there are a growing list of programs and resources to help organisations on this path. Rainbow Health Victoria provides a variety of training programs and tailored supports, including for those organisations wanting to pursue accreditation through the Rainbow Tick.

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Rainbow Health Victoria acknowledges that our work is conducted on the lands of traditional custodians in Victoria and in other areas. We recognise the ongoing connection of traditional custodians to the land and value their unique contribution to our work and wider society.