

From: Ian Purcell [<mailto:ipurcell@senet.com.au>]

Sent: Friday, 30 January 2015 6:50 PM

To: Health:Transforming Health

Cc: Health:Minister for Health

Subject: The omission of LGBTIQ South Australians from Transforming Health SA documentaion

To Whom It May Concern

I attended the Transforming Health SA Summit on Friday 28 November 2014 in my role as Chair of the Gay & Lesbian Health Alliance of SA.

At the Feedback Session in the afternoon, I was the second person to address a question to the panel.

I asked why the LGBTIQ community was not included in the list of 'vulnerable South Australians' in the Transforming Health SA Discussion Paper, given the overwhelming amount of research that clearly shows that LGBTIQ people are at higher risk of poor outcomes in many areas of health and wellbeing than the public in general.

I said I was particularly concerned about the omission because the SA Government had released its Strategy for the Inclusion of Lesbian, Gay, Bisexual, Transgender, Intersex and Queer People in February 2014.

Professor Dorothy O'Keefe PSM, who chaired the session, answered on behalf of the panel of medical practitioners who wrote the Discussion Paper. She apologised for the omission and said it would be rectified in the second draft. I thanked her.

So it was with interest that I read the Transforming Health SA Communique on 'Feedback about the Draft'.

I note that the recording of the feedback was thorough, the report being 17 pages long, containing 170 detailed notes of feedback. All except any mention of my question and Professor O'Keefe's response.

The only point in the whole document that even bears a vague reference to my question is this: "13. Please add SA Health commitment to meeting the needs of our most vulnerable people." Except that it doesn't mention to **add** LGBTIQ people to the list.

It appears to be an omission of a note about the previous omission. Anyone reading the communiqué would not know the issue of the health of LGBTIQ people in SA had been discussed and their omission from the Transforming Health document had been noted by the panel, an oversight which Professor O'Keefe assured me would be rectified by the panel in the second draft.

Further, if the notes from the communiqué are to be used by the panel to assist them to write the second draft, what guarantee is there that there won't be a further omission?

I was pleased to read in the overview communiqué that:

‘The Summit affirmed that evidence-based high quality patient-centred services are required across primary and secondary care, that consider the needs of all health consumers, regardless of background and individual circumstances’, and

‘In particular, the Summit notes the gap in outcomes for vulnerable South Australians, mental health consumers, Aboriginal consumers and country communities.’

Pleas add LGBTIQ people to the list of ‘vulnerable South Australians’.

My main point in writing this letter however is to point out how the existence, let alone the specific issues and needs, of LGBTIQ people in South Australia continue to be ‘erased’ in government documentation.

I suggest that all SA Government directors, managers and policy writers read the *South Australian Strategy for the Inclusion of Lesbian, Gay, Bisexual, Transgender, Intersex and Queer People 2014-2016*.

Yours sincerely

Ian Purcell AM

Chair

Gay & Lesbian Health Alliance SA

From: Health:Transforming Health [<mailto:Health.TransformingHealth@health.sa.gov.au>]

Sent: Monday, 2 February 2015 9:26 AM

To: Ian Purcell

Cc: Health:Minister for Health

Subject: RE: The omission of LGBTIQ South Australians from Transforming Health SA documentaion

Dear Ian

Thank you for your email regarding the Transforming Health Summit communique and LGBTIQ people.

Your email is receiving attention and a response will be provided in due course.

Thank you

SA Health

From: Ian Purcell [<mailto:ipurcell@senet.com.au>]
Sent: Friday, 13 February 2015 1:52 PM
To: Health:Transforming Health
Cc: Health:Minister for Health
Subject: Professor Keefe on ABC Radio Breakfast Adelaide

Dear Transforming Health Project Director

Please note that this is not a response to the Transforming Health Proposals Paper. I do not wish to receive a reply which states: *Thank you for providing feedback on the Delivering Transforming Health proposals paper. This feedback is valuable and it will be considered as part of the consultation process.*

I would like a reply which addresses the issues I have raised in this email.

Yesterday morning on the ABC Radio show Breakfast Adelaide Professor Keefe was asked by a listener why LGBTIQ people were not included in the list of vulnerable communities in the Transforming Health Proposals Paper: Meeting the Clinical Standards.

Professor Keefe replied that LGBTIQ people *were* considered a vulnerable group in terms of health outcomes, but then said that 'vulnerable groups were not individually named in the paper.'

This is patently not the case unless Professor Keefe asserts that an Appendix is not part of a paper?

On page 47 in Appendix 2: Clinical Standards of Care, there is the following:

Overarching Standards to apply to the whole health system

1. *Every South Australian has an equal right to access quality healthcare. This means specific groups may need to be targeted for affirmative action to ensure their needs are met, this includes: veterans, frail and elderly, those with mental health needs, the disabled, children, those with eating disorders and Aboriginal and Torres Strait Islanders. All aspects of care should be patient-centred and focus on quality outcomes. This includes service design, delivery and evaluation, supported by research and teaching.*

This is the same list that is referred to as 'vulnerable populations' on page 16 of the first Transforming Health Discussion Paper (under the heading: Our Population Profile).

The Oxford Dictionary defines the word 'vulnerable' as meaning '*in need of special care, support, or protection because of age, disability, or risk of abuse or neglect.*'

- Would you please explain then why Professor Keefe said that vulnerable groups were not individually named in the *Health Proposals Paper: Meeting the Clinical Standards*, when obviously they were?
- Would you please explain then why the LGBTIQ community has not been added to the list of *specific groups* [which] *may need to be targeted for affirmative action to ensure their needs are met* [along with] *veterans, frail and elderly, those with mental health needs, the disabled, children, those with eating disorders and Aboriginal and Torres Strait Islanders.*

- Given that both SA Health and Professor Keefe agree that indeed the LGBTIQ community is a vulnerable group, would you please add 'LGBTIQ people' to the list of *specific groups to be targeted for affirmative action to ensure their needs are met.*
- Would you please note that by doing so you will be acting in accordance with the guidelines set out in the Government's *Strategy for the Inclusion of Lesbian, Gay, Bisexual, Transgender, Intersex and Queer People 2014-2016* from which I quote -

'LGBTIQ people are often 'invisible' members of the community. There is little acknowledgement or awareness of LGBTIQ people in the wider South Australian community or references to their existence in government priorities, plans and publications.'

'This 'invisibility' or lack of recognition contributes to the social exclusion of LGBTIQ people and communities and can be conceptualised in two ways. Firstly, it involves issues of individual identity and sense of self. Visibility or recognition is not just about courtesy and politeness but has been described as a 'vital human need'.

'Secondly, misrecognition is characterised by a degrading of cultural value, treating some as less than full members of the society and preventing them from participating with others in the community as peers [38]. For some, this exclusion contributes to their isolation. People who are repeatedly stigmatised, degraded or insulted internalise this negativity which can lead to crippling self hatred.'

'As a significant service provider and the largest employer in South Australia, the state public sector is well placed to be proactive, lead by example and influence and shape positive community attitudes and understanding about LGBTIQ identity.'

[38] Z Morrison, *On dignity, social inclusion and the politics of recognition*, Centre for public policy, Brotherhood of St Laurence, June 2010, p.9-10.

- Would you please do me the courtesy of appending a name to your response instead of using the bureaucratic anonymity of *'Regards, SA Health'*.

Yours sincerely

Ian Purcell AM
 Chairperson
 Gay & Lesbian Health Alliance SA

From: Keefe, Dorothy (Health) [<mailto:Dorothy.Keefe@health.sa.gov.au>]
Sent: Tuesday, 17 February 2015 2:15 PM
To: ipurcell@senet.com.au
Cc: Health:Transforming Health
Subject: RE: Professor Keefe on ABC Radio Breakfast Adelaide

Dear Ian

Thank you for your email and drawing my attention to this oversight in the current Transforming Health Proposals Paper.

The Clinical Standards of Care are viewed as a stand-alone, living document that will continue to be reviewed, monitored and assessed to ensure they are effective in driving quality.

Clinical Standard 1 is now being rectified to include this important vulnerable group as per:

1. *Every South Australian has an equal right to access quality healthcare. This means specific groups may need to be targeted for affirmative action to ensure their needs are met, this includes: veterans, frail and elderly, those with mental health needs, the disabled, children, those with eating disorders, **LGBTIQ people (lesbian, gay, bisexual, transgender, intersex and questioning)** and Aboriginal and Torres Strait Islanders. All aspects of care should be patient-centred and focus on quality outcomes. This includes service design, delivery and evaluation, supported by research and teaching.*

The Proposals Paper is being updated and this wording will be reflected online as soon as the update is complete. Any future printed documents or reproduction of the standards will include this wording.

LGBTIQ people are certainly important to SA Health as a vulnerable community and I trust this amendment alleviates your concerns.

Kind regards

Dorothy

Dorothy M K Keefe PSM
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