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Department for Health and Wellbeing  
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By email

**Submission re: Women's Child and Youth Health Plan 2021 - 2031**

To whom it may concern,

Thank you for the opportunity to make this submission regarding the Women's Child and Youth Health Plan 2021 - 2031. This submission is being made on behalf of the South Australian Rainbow Advocacy Alliance (SARAA).

SARAA is a community led organisation that advocates for the rights and wellbeing of lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ+) South Australians.

SARAA is encouraged to see that trans and gender diverse (TGD) people are included in the opening section under the heading of 'Young People', however the first note on language where the term 'Women's health' is explained was concerning to us. The plan is silent on whether it includes trans and gender diverse adults, and the definition of women's health that is given to encompass "*sexual and reproductive health, wellbeing and safety to optimal conception, pregnancy, infancy and child development*" should absolutely include trans and gender diverse people. There are trans and gender diverse men and non-binary people who experience pregnancy, who menstruate, who need abortion care, etc. and have a right to the same standards of inclusion, care and respect afforded to cisgender women.

A recent report on the first Australian study of Trans and Gender Diverse Sexual Health<sup>1</sup> provides compelling evidence outlining the disparities, challenges and needs of TGD people in Australia. The report states there is an urgent need to prioritise resources and services to improve the sexual health and wellbeing of Australia's TGD populations. The report further outlines the unique experiences of TGD people regarding their sexual health. TGD people reported experiencing very high rates of marginalisation in sexual and reproductive healthcare

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<sup>1</sup> Callander D, Wiggins J, Rosenberg S, Cornelisse VJ, Duck-Chong E, Holt M, Pony M, Vlahakis E, MacGibbon J, Cook T. (2019). The 2018 Australian Trans and Gender Diverse Sexual Health Survey: Report of Findings. Sydney, NSW: The Kirby Institute, UNSW Sydney.  
[https://kirby.unsw.edu.au/sites/default/files/kirby/report/ATGD-Sexual-Health-Survey-Report\\_2018.pdf](https://kirby.unsw.edu.au/sites/default/files/kirby/report/ATGD-Sexual-Health-Survey-Report_2018.pdf)

because of their gender. We strongly encourage your project team to read and incorporate the findings of this study in your plan.

The Plan is also silent of the needs and experiences of same-sex parented families, and LGBTIQ+ families broadly. We suggest you explicitly mention LGBTIQ+ families in your 'note on language' section, where you acknowledge the diversity of families that exists.

The Plan's 'setting the scene' section does not include any information about or reference to LGBTIQ+ people. There is an opportunity to include content regarding LGBTIQ+ populations, and in particular under the 'Morbidity and Mortality for Children and Young People' section about the huge disparities that are experienced by LGBTIQ+ young people when it comes to mental health and suicide.

LGBTIQ+ people are overrepresented in suicide statistics, as seen in recent studies that indicate that 75 percent of LGBTIQ+ people have experienced suicidal ideation<sup>2</sup> with over 60 percent of LGBTIQ+ youth aged 16-17 in South Australia considering suicide in the last 12 months alone<sup>3</sup>. LGBTIQ+ people are also overrepresented in statistics relating to suicide attempts and self-harm, with all of these rates far exceeding those experienced by the general population. A snapshot of LGBTIQ+ mental health statistics can be accessed from National LGBTI Health Australia's website<sup>4</sup>.

Under the section of the Plan 'How Can We Improve', SARAA strongly encourages the addition of content regarding the importance of providing safe and inclusive health services for LGBTIQ+ people. We know that many LGBTIQ+ people have experienced discrimination in healthcare settings, and that these experiences prevent people in our communities from accessing care when they need it, including sexual and reproductive healthcare and important preventative health services.

In terms of the plan priorities, we broadly support these and were heartened to see the explicit mention of LGBTIQ+ people in this section. We think this is a great starting point but there is a need to further integrate across the plan priorities and actions the needs of our communities, in becomes most evident in the language used to discuss abortion care that TGD people in particular those who are not currently included in the Plan. We strongly advocate for a change to the language in this section to make it more inclusive for TGD people. This can be achieved very simply by adding TGD throughout the section, and acknowledging that TGD people need access to abortion care and other reproductive health services such as gynaecology, etc. As an example, where you have referenced 'women' throughout the document, you could say 'women and gender diverse people'.

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<sup>2</sup> Hill, A., Bourne, A., McNair, R., Carman, M., & Lyons, A. (2020). *Private Lives 3*. La Trobe University. [https://www.latrobe.edu.au/\\_data/assets/pdf\\_file/0009/1185885/Private-Lives-3.pdf](https://www.latrobe.edu.au/_data/assets/pdf_file/0009/1185885/Private-Lives-3.pdf)

<sup>3</sup> Hill, A., Lyons, A., Jones, J., McGowan, I., Carman, M., Parsons, M., Power, J., Franklin, J., & Bourne, A. (2021). *Writing Themselves In 4: South Australian summary*. La Trobe University.

<sup>4</sup>[https://d3n8a8pro7vhmx.cloudfront.net/lgbtihealth/pages/549/attachments/original/1595492235/2020-Sn apshot\\_mental\\_health\\_%281%29.pdf?1595492235](https://d3n8a8pro7vhmx.cloudfront.net/lgbtihealth/pages/549/attachments/original/1595492235/2020-Sn apshot_mental_health_%281%29.pdf?1595492235)

SARAA notes that while the Plan references intersex people as a subset of the LGBTIQ+ acronym, there are no further or specific mentions of the health needs of intersex people. Intersex Human Rights Australia<sup>5</sup> reports one of the number one issues affecting intersex people is the practice of doctors performing deferrable medical interventions, including surgical and hormonal interventions, that alter the sex characteristics of infants and children without personal consent. We encourage the authors of the Plan to consider how the needs and rights of intersex people are included in the Plan.

We note also that disabled women's unique needs and experiences are not mentioned in any substantial way throughout the Plan. According to the Australian Institute of Health and Welfare<sup>6</sup>, 1 in 4 (25%) women with disability have experienced sexual violence after the age of 15.

Noting these opportunities to strengthen and build on the great foundations you have laid regarding the inclusion of LGBTIQ+ people in the Plan, we strongly encourage you to hold further targeted consultations with LGBTIQ+ and disability communities on the Plan. This will ensure that the Plan is robustly reviewed by people with lived experience and unique needs.

Thank you for the opportunity to provide this submission.

Kind regards,

Matthew Morris & Varo L.E.  
Co-Chairs, South Australian Rainbow Advocacy Alliance

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<sup>5</sup> <https://ihra.org.au/wp-content/uploads/key/Darlington-Statement.pdf>

<sup>6</sup> <https://www.aihw.gov.au/reports/disability/people-with-disability-in-australia/contents/justice-and-safety/violence-against-people-with-disability>