



State Disability Inclusion Plan

Submission by SARAA

South Australian Rainbow Advocacy Alliance





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8 December 2023

By email

SUBMISSION re: Consultation on the State Disability Inclusion Plan

To Natalie,

Thank you for the opportunity to make this submission regarding the State Disability Inclusion Plan.

This submission is being made on behalf of the SA Rainbow Advocacy Alliance (SARAA), the peak representative body for LGBTIQIA+ (lesbian, gay, bisexual, transgender, intersex, queer and asexual/aromantic) South Australians.

SARAA's mission is to advocate for and strengthen the health, wellbeing, inclusion and rights of our community. Our work is informed by the [Vision for SA Pride 2030](#), developed in consultation with over 600 LGBTIQIA+ South Australians, which sets out key priorities to create a LGBTIQIA+ healthy, safe and inclusive South Australia. Of the 600+ community members who contributed towards this work, over a third (39%) of them identified as having a disability¹.

The Vision for SA Pride 2030 calls for the government to:

- Protect our equality and safety under the law
- Include and support us in our education systems
- Improve our health and wellbeing
- Represent and lead for our communities

¹ Vision for SA Pride, 2030. (2021). South Australian Rainbow Advocacy Alliance.
<https://www.saraa.org.au/advocacy/vision-for-sa-pride/>

Recognition & Prioritisation of LGBTQIA+ South Australians living with disability

Unfortunately at the current time, members of the LGBTQIA+ community are not a priority target of the state disability inclusion plan. This results in a lack of explicit consideration of our communities' needs within the design, development and evaluation of services, policies and programs supporting LGBTQIA+ South Australians living with disability.

Minority stress is a phenomenon in which individuals who are marginalised, excluded and discriminated against develop higher rates of physical and mental illness as a result of the stress which this discrimination causes². While the inverse care law demonstrates that individuals the most in need of appropriate care are the less likely to obtain that care³.

LGBTQIA+ individuals living with disability face double discrimination which further increases the burden of minority stress and the likelihood that they will not receive appropriate care.

LGBTQIA+ people are significantly more likely to live with physical and psychosocial disabilities than the general population, with 37.1% of South Australian respondents to the 2021 Writing Themselves In study of LGBTQIA+ youth (14-21) living with a disability or long term health condition⁴. This number is in alignment with the 39% of (over 600) contributors to our own Vision of Pride 2030 who live with disability¹.

Compared to the broader LGBTQIA+ community, which already faces disproportionately rates of discrimination and exclusion, the 2022 Violence, Abuse, Neglect and Exploitation of LGBTQIA+ People with Disability report (developed as part of the Royal Commission into Violence, abuse, Neglect and Exploitation of People with Disability) found that LGBTQIA+ people living with disability are:

- **25.7%** more likely to feel unsafe or uncomfortable in educational settings
- **50.1%** more likely to face verbal and physical harassment due to their sexuality or gender identity
- **71%** more likely to face sexual harassment and assault,
- **23.2%** more likely to experience intimate partner violence
- **150%** more likely to have attempted suicide

² McConnell, E. A., Janulis, P., Phillips, G., 2nd, Truong, R., & Birkett, M. (2018). Multiple Minority Stress and LGBT Community Resilience among Sexual Minority Men. *Psychology of sexual orientation and gender diversity*, 5(1), 1–12. <https://doi.org/10.1037/sgd0000265>

³ Watt G. (2018). The inverse care law revisited: a continuing blot on the record of the National Health Service. *The British journal of General Practice*, 68(677), 562–563. <https://doi.org/10.3399/bjgp18X699893>

⁴ Hill AO, Lyons A, Jones J, McGowan I, Carman M, Parsons M, Power J, Franklin JD, Bourne A (2021) *Writing Themselves In 4: the health and wellbeing of LGBTQIA+ young people in Australia. South Australia summary report*. Australian Research Centre in Sex, Health and Society, La Trobe University

Perhaps most relevant to this submission is that, over three quarters (78.5%) of LGBTQIA+ people accessing NDIS and Disability Support Services did not feel that their identity as an LGBTQIA+ person was supported⁵.

Unless there is specific acknowledgement, recognition and prioritisation of LGBTQIA+ people living with disability, members of our community will continue to be unsafe, unsupported, and unaccepted when accessing necessary disability support services.

Ensuring the health, safety, inclusion and wellbeing of LGBTQIA+ South Australians who live with disability

Members of our community who live with disabilities face significant barriers to participating in society due to the multiple forms of marginalisation they experience. This often leads to community members feeling as though they can *either* express their needs and identity as a person with disability or as a member of the LGBTQIA+ community, but not both. This means that our community members do not receive holistic support.

To address this significant barrier, raised in question one of the discussion paper, as recommended within 'More Than Ticking a Box: LGBTQIA+ People With Disability Talking About Their Lives':

- All healthcare, community and disability services should be required to presume that LGBTQIA+ people with disability both need and use their services. These services should proactively develop inclusive reforms through action plans or similar approaches which demonstrate the ways they act in order to be inclusive to everyone, and acknowledge that it is not the responsibility of the individual to educate services on how to be inclusive⁶. Therefore:
- Recipients of public funding for disability services should be required to create and publish plans for equal access for LGBTQIA+ people with disability⁶. We would like to recommend that the state government ensure that this is a requirement of any new or renewed contracts funding disability services.

⁵ Hill, A. O., Amos, N., Bourne, A., Parsons, M., Bigby, C., Carman, M., & Lyons, A. (2022). *Violence, abuse, neglect and exploitation of LGBTQIA+ people with disability: a secondary analysis of data from two national surveys*. Australian Research Centre in Sex, Health and Society, La Trobe University

⁶ O'Shea, A., Latham, J., Beaver, S., Lewis, J., Mountford, R., Rose, M., Trezona, A., Frawley, P. (2020). *More than Ticking a Box: LGBTQIA+ People With Disability Talking About Their Lives*. Deakin University

As per the recommendations from the Violence, Abuse, Neglect and Exploitation of LGBTQA+ People with Disability, development of appropriate plans to ensure inclusion and safety require:

- Capacity building strategies and resourcing to improve the disability support services sectors' capabilities for providing inclusive and culturally safe environments for LGBTQA+ people with disability. These need to be co-designed with lead government agencies, LGBTQA+ capacity building experts from these communities and LGBTQA+ people with disability and be underpinned by key standards and/or accreditation for inclusivity and cultural safety as well as transparency and accountability at every stage⁵

It's important that these plans, trainings, reforms and capacity building come with recognition that relationships and families are diverse (eg not all relationships have a partner of the 'opposite' gender, not all service users are in monogamous relationships, parents or carers families do not always consist of husband and wife).

The need for investment into communities to support inclusion & participation, as per question three, goes both ways, particularly as the LGBTQIA+ health & wellbeing sector is notably under-resourced. Alongside disability services recognising that our community members need & access their services, investment in LGBTQIA+ services to increase capacity to support members of our community with disability is necessary.

- Drop In Care Space is a unique, community led service explicitly for people who are "LGBTQIA+, neurodivergent and/or disabled" which promotes social wellbeing and community connection. The unique purpose of the Drop In Care Space makes it a particularly important service (question 8) for our community. As a volunteer ran, non-government organisation, the funding and sustainability of this important community hub is precarious, and SARAA strongly recommend investment into their sustainability, governance & leadership capacity (as recognised in Drop In Care Space's 2023-24 strategic plan).
- As an under-resourced sector which frequently encounter and work with individuals living with disability, investment is necessary to enable LGBTQIA+ services to provide their staff and volunteers with targeted disability inclusion training.

SARAA hope that investment into this training sits alongside investment into development of guidelines and grant funding programs for LGBTQIA+ venues to improving their accessibility for people with physical, sensory and intellectual disability⁵, noted within the recommendations from the Violence, Abuse, Neglect and Exploitation of LGBTQA+ People with Disability.

Specific actions that the state government and local councils could take, as raised in question five, include

- Ensuring that, as a priority group, any funded project connected to disability or LGBTIQ+ topics should expressly aim to include LGBTIQ+ participants, and report against this outcome⁶. And;
- Create working groups (potentially through leveraging the Disability & LGBTQIA+ Ministerial Advisory Council's) to bring together health service providers, LGBTIQ+ organisations, disability services and LGBTIQ+ people with disability to learn from each and share ideas on inclusive practice. These groups should; (1) Establish clear channels for policy reform across all levels of government; (2) Create connection and peer development for LGBTIQ+ people with disability, (3) Advise services and departments on inclusive practices for LGBTIQ+ people with disability; (4) Promote opportunities in collaborative research development, including grant funding support, and; (5) Organise workshops, seminars and other events to develop ideas and share resources more broadly⁶.

The development of a federal and state government/level LGBTIQ+ people with disability strategy to articulate a whole of government approach that specifically highlights the needs of LGBTIQ+ people with disability to address the issues of access and services described in this report (Modified Recommendation from More Than Ticking A Box)

As groups with historical trauma due to negative experiences including abuse, neglect and negligence at the hands of law enforcement, front line services & the criminal justice system (question 6/7), with negative experiences only more likely for those of us who face multiple marginalisation.

- Engagement with our communities needs to begin with recognition of the historic & ongoing trauma and victimisation we face at the hands of these institutions. To create positive experiences intentional engagement needs to be facilitated by these institutions but led by our communities. Training in working with LGBTQIA+ people with disabilities is necessary and these training must include creating an understanding that our community members have intersectional identities.
- In creating positive immediate/emergency care for members of our community it is important that individuals working with our community recognise that having communication, intellectual or other disabilities does not delegitimize an individual's identity as LGBTQIA+.

There's a significant lack of knowledge about the experiences of LGBTQIA+ people living with disabilities which impacts our community creating misunderstandings and misconceptions. The first of these is that there's currently, as demonstrated by our lack of recognition as a priority group, a lack of understanding about how many LGBTQIA+ people access disability services. To resolve this, we believe it's necessary that going forward there is:

- Routine capture of LGBTQIA+ related data in the disability sector. Mandating LGBTQIA+ inclusive questions on gender, pronouns, sexuality, and intersex status is necessary across data gathering and reporting in the disability sector. This requires capacity building to ensure cultural competence in the staff gathering this information and systems and processes enabling cultural safety for the clients providing this information. This action should be required of all organisations and services, including those delivered by faith-based organisations⁵.

One known impact of the misunderstandings & misconceptions our communities face is that we face Infantilization and are seen as having an inability to make decisions about ourselves/express our bodily autonomy. This leads to significant delays in accessing many important forms of healthcare including life saving gender affirming care.

Thank you for considering our recommendations and the needs of our community. We would like to thank the input of our community members in developing this submission, and acknowledge the influence & value of the *More than Ticking a Box: LGBTQIA+ People With Disability Talking About Their Lives*, and *Violence, abuse, neglect and exploitation of LGBTQIA+ people with disability: a secondary analysis of data from two national surveys* reports. It would be remiss not to note that, unfortunately, at this time there are no South Australian specific reports which detail the experiences of LGBTQIA+ people living with disability.

If you wish to discuss these matters further, please contact Leeann, Chair of the South Australian Rainbow Advocacy Alliance, at chair@saraa.org.au. We will also make this feedback publicly available to ensure our members and supporters are aware of our position.

Kind regards,

Leeann Friday

she/her

Chairperson

SA Rainbow Advocacy Alliance (SARAA)

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SARAA acknowledges and pays respects to the Kurna, Nukunu and Ngarrindjeri people, whose land we operate and live on. Aboriginal land was stolen, never ceded, and we stand in solidarity with First Nations people, especially those who are also members of the LGBTQIA+, Brotherboy and Sistergirl communities.