Research Matters: Why do we need LGBTIQA+ inclusive youth services?

A fact sheet by Rainbow Health Australia

RAINBOW NETWORK

Olivia Brozecki, Jen Johnson,
En Wong, Bel O'Connor, Jami Jones

T: (03) 9479 8700
E: rainbowhealthaus@latrobe.edu.au
W: rainbowhealthaustralia.org.au

Rainbow Health Australia

Introduction

LGBTIQA+* people have the right to access safe and inclusive care in Australia, yet they continue to face real barriers when accessing health and human services. Research consistently tells us that experiences of stigma, discrimination, and prior negative encounters with service providers can mean that many LGBTIQA+ people delay seeking support, disengage from services, or avoid seeking support altogether.[1] [2] [3]

Youth services can play a key role in supporting LGBTIQA+ young people to feel safe, affirmed, and supported.

This resource is designed to help staff, service users, and leadership at all levels within youth services to understand the available and relevant evidence and identify opportunities to implement LGBTIQA+ inclusive practices.

Rainbow Health Australia: Evidence + Advocacy + Action

Rainbow Health Australia (RHA) 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. RHA is a program of the Australian Research Centre in Sex, Health and Society at La Trobe University.

Australia's largest national survey of LGBTIQ+ health and wellbeing, Private Lives 3, found that LGBTIQ+ people continue to experience significant health disparities compared to the general population, and fewer than half feel accepted when accessing general health or support services. Health and human services can take action to design services that reduce discrimination and ensure LGBTIQA+ people have access to safe and affirming care and service systems.

This series of sector briefing papers:

- draws together the latest research on LGBTIQA+ health and wellbeing
- contextualises the research for particular health and human services
- promotes knowledge on the key issues involved in LGBTIQA+ inclusion
- assists communities, organisations, service providers and government in implementing policies and programs to improve health, wellbeing and inclusion

LGBTIQA+ young people in Australia – risk and protective factors

LGBTIQA+ young people should feel safe and affirmed in their families and communities. However research tells us that LGBTQA+ people 14-21 face worse mental health and wellbeing outcomes than their peers.[4] And for young people with innate variations of sex characteristics (IVSC), also known as intersex, Australian data is still limited. What international research does tell us, including from a large US study, is that young people with IVSC who also identify as LGBTQ+ face particularly elevated risks with high rates of depression and suicidal ideation, compared to LGBTQ+ young people without IVSC.[5]

Research consistently shows that these experiences take a real toll. In Writing Themselves In 4 (WTI4), the largest ever survey of LGBTQA+ young Australians, LGBTQA+ young people reported high levels of psychological distress,[6] and for trans and gender diverse people, these rates were even higher. Many had also experienced harassment or abuse, and rates of depression, self-harm, and suicidal thoughts

* LGBTIQA+ stands for lesbian, gay, bisexual, transgender, intersex (or people with innate variations of sex characteristics), queer/questioning, and asexual/aromantic. Acronyms in this resource follow the terminology of the source being cited; You will see LGBTIQ+, LGBTQA+, and similar variations throughout. LGBTIQA+ is used when Rainbow Health Australia is speaking generally, or making particular advocacy claims.

were much higher than those seen in the general population.[7]

Due to the burden of stigma, family rejection and family-of-origin violence, discrimination, and structural exclusion, sometimes called minority stress, LGBTQA+ young people are more likely than their non- LGBTQA+ peers to experience significant challenges to their mental health and wellbeing.[8] [9]LGBTIQA+ young people who experience multiple and intersecting forms of marginalisation, including young LGBTIQA+ people from Aboriginal and/or Torres Strait Islander backgrounds, disabled young people, and young people from racialised and/or culturally and linguistically diverse backgrounds, face unique and compounded risks that mainstream providers may fail to holistically address.[10] [11]

It is important to hold this information carefully, as these outcomes are not inevitable, nor are they caused by being LGBTIQA+. These outcomes are the result of environments that young people navigate, including rigid gender norms, experiences of rejection, and social exclusion. When these environments change, outcomes also change. Youth services can play a direct role in creating conditions where LGBTIQA+ young people can feel safe, affirmed,and supported to flourish.

Supporting LGBTIQA+ young people

When and how do youth services encounter LGBTIQA+ young people?

Youth, child, and family services encounter LGBTIQA+ young people and their families at the same critical times as with their peers, such as during child protection involvement, family reconciliation, out-of-home care, youth homelessness, family support, and early childhood programs. Some LGBTIQA+ young people may also experience challenges related to family rejection, identity-based abuse or family violence that shape how and when they engage with services. However, LGBTIQA+ young people may present with additional challenges and need to access health services more frequently.

- **Family rejection** of LGBTQ+ young people is one of the main reasons LGBTQ+ young people seek support from services. For some, these experiences may also include family-of-origin violence, coercion and attempts to change sexual orientation or gender identity, and identity-based abuse. These young people are at increased risk of homelessness, mental health deterioration, and suicidality.[12] [13]
- **Specialist homelessness services** see an over-representation of LGBTQ+ young people, and evidence shows that family conflict, rejection, and/or violence related to LGBTIQ+ identity are the main drivers of housing insecurity for this group.[14] [15]
- **School-based harassment and exclusion** is a significant issue. Less than half of WTI4 respondents reported feeling safe at school, and verbal harassment, social exclusion, and physical victimisation were all reported at high rates.[16]
- **Importance of cultural safety for LGBTIQA+ First Nations young people:** Aboriginal and/or Torres Strait Islander LGBTIQASB+ young people experience compounded, intersecting disadvantage which layers racism, queer and transphobia, and age-based vulnerabilities that neither LGBTIQ+ specific, First Nations-specific, nor generalist youth services can holistically address.[17]

Why is LGBTIQA+ inclusive practice important for the youth sector?

For LGBTIQA+ young people, youth workers may often be the first adults that they turn to when they need support. A trusted youth worker can end up being the difference between whether or not a young person will end up getting the support they need at all. However, youth services are not always designed with the specific vulnerabilities or service needs of LGBTIQA+ young people in mind. Many youth, child, and family services have adopted child-safe standards frameworks, but have not explicitly integrated LGBTIQA+ inclusive practice standards, despite the volume of LGBTIQA+ young people engaged with youth services.[18]

We know that young people may not immediately disclose being LGBTIQA+ to family, to workers, or even to themselves. Young people may therefore present with anxiety, school refusal, depression, and interpersonal struggles that can be proxies for unresolved, unsupported distress around being marginalised for being LGBTIQA+.[19] This is why the capability of youth workers is so important, as workers who understand LGBTIQA+ experiences are better placed to recognise what might otherwise be missed, and to respond in ways that are genuinely supportive.[20] [21] For LGBTIQA+ young people, youth workers may often be the first adults that they turn to when they need support.

- **Workforce capability:** When workers in family support, early intervention, and child protection services have specific training in LGBTIQA+ youth needs, family rejection dynamics and affirming practice, they are better equipped to respond to the high numbers of LGBTIQA+ young people already using these services, and to ensure safe and appropriate referral pathways.
- **Out-of-home care:** Assessing and supporting foster carers with LGBTIQA+ inclusive training means LGBTIQA+ young people in care may be placed in environments that affirm them, rather than compound harm.[22]
- **Family-facing practice:** Family support and reconciliation programs that actively include sexual orientation, variations of sex characteristics, and gender identity as valid dimensions of a young person's identity or experience are more likely to achieve genuine family wellbeing outcomes.[23]
- **Service data:** When services collect data about sexual orientation, variations of sex characteristics, and gender identity, LGBTIQA+ young people become visible in planning and monitoring systems, which enables services to respond appropriately to their needs.[24] [25] It is important to ensure that there is an option for unsure and prefer not to say. This signals that services know the importance of identity, and that information shared voluntarily will be used to tailor services to individual needs and to support more effective and appropriate referral pathways.

Frameworks for LGBTIQA+ Inclusion

More than 3 in 4 Private Lives 3 respondents said they are more likely to use services that are LGBTIQ+ accredited[26]

We know that LGBTIQA+ young people are more likely to access and benefit from those services that they know to be consistently affirming of their identities and experiences. Inclusive youth services are crucial for providing appropriate care for LGBTIQA+ young people. National policies, legislation and quality standards provide a strong framework to guide actions to embed LGBTIQA+ inclusive practice within youth services and across the youth sector.

- **Equal Opportunity Act 2010 (Vic):** Prohibits discrimination and harassment based on

sexual orientation, gender identity, and sex characteristics. This Act also imposes a positive duty to proactively eliminate discrimination, which means that organisations must go beyond just responding to issues and complaints.[27]

- **Child Wellbeing and Safety Act 2005 (Vic):** Child Safe Standard 5 requires that "Equity is upheld and diverse needs respected in policy and practice." Regulation of the 11 Child Safe Standards are now sector-based: the Social Services Regulator (SSR) regulates the Child Safe Standards for social services and organisations. Boards should be able to demonstrate that equity and inclusion are embedded systematically—not managed on an ad hoc basis—through governance, policy oversight, risk management and organisational culture.
- **National Action Plan for the Health and Wellbeing of LGBTIQA+ People 2025–2035**: Australia's first dedicated national LGBTIQ+ health strategy, which identifies young people among its priority populations, and commits to systemic workforce capability building and culturally responsive services across funded service systems.[28]
- **National Action Plan for the Health of Children Young People 2020–2030:** Identifies LGBTI+ young people as a priority population and embeds their needs within its priorities of health equity, tackling mental health challenges, and enabling inclusive, responsive health systems for all children and young people.[29]
- **National Suicide Prevention Strategy 2025 – 2035:** Identifies LGBTIQ+ people and young people as priority groups, with a particular emphasis on increasing support for LGBTIQ+ young people and their families, for culturally responsive suicide prevention pathways.[30]
- **National Plan to End Violence against Women and Children 2022–2032 and Change the Story:** Australia's national approach to primary prevention recognises that violence is shaped by gender inequality, rigid gender norms and other forms of discrimination. [31] [32] Creating environments that are safe, equitable and inclusive of LGBTIQA+ people aligns with broader efforts to promote respectful relationships, challenge discrimination and prevent violence before it occurs.
- **National Safety and Quality Health Service (NSQHS) Standards:** Under Standard 1 (Clinical Governance) and Standard 2 (Partnering with Consumers), boards carry governance accountability for health equity, including for priority populations.[33] LGBTIQA+ inclusion is a non-negotiable component of this obligation in youth services that fall within the scope of NSQHS accreditation.

How can youth services meet the needs of LGBTIQA+ young people?

Rainbow Health Australia provides a variety of training programs and tailored supports, including for those organisations wanting to pursue accreditation through Rainbow Tick.

- Sign up to receive the **Rainbow Network newsletter or join the Rainbow Network Community of Practice**
- Have a look at **RHA's training offerings**
- Find out if you are eligible for subsidies for the **Rainbow Tick**

References

1. Hill, A. O., Bourne, A., McNair, R., Carman, M., & Lyons, A. (2020). Private Lives 3: The health and wellbeing of LGBTIQ people in Australia (ARCSHS Monograph Series No. 122). Australian Research Centre in Sex, Health and Society, La Trobe University.
2. Department of Health and Aged Care. (2024). National Action Plan for the Health and Wellbeing of LGBTIQA+ People 2025–2035. Australian Government. https://www.health.gov.au/resources/publications/national-action-plan-for-the-health-and-wellbeing-of-lgbtiqa-people-2025-2035
3. Amos, N., Lim, G., Buckingham, P., Lin, A., Liddelow-Hunt, S., Mooney-Somers, J., & Bourne, A. (2023). Rainbow Realities: In-depth analyses of large-scale LGBTQA+ health and wellbeing data in Australia. Australian Research Centre in Sex, Health and Society, La Trobe University.
4. Hill, A. O., et al. (2020).
5. The Trevor Project. (2021). The mental health and well-being of LGBTQ youth who are intersex. https://www.thetrevorproject.org/wp-content/uploads/2021/12/Intersex-Youth-Mental-Health-Report.pdf
6. Hill, A. O., Lyons, A., Jones, J., McGowan, I., Carman, M., Parsons, M., Power, J., & Bourne, A. (2021). Writing Themselves In 4: The health and wellbeing of LGBTIQ+ young people in Australia. Australian Research Centre in Sex, Health and Society, La Trobe University.
7. Hill, A. O., et al. (2020).
8. Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. Psychological Bulletin, 129(5), 674–697. https://doi.org/10.1037/0033-2909.129.5.674
9. Bailey, S., Newton, N., Perry, Y., et al. (2024). Prevalence, distribution, and inequitable co-occurrence of mental ill-health and substance use among gender and sexuality diverse young people in Australia: Epidemiological findings from a population-based cohort study. Social Psychiatry and Psychiatric Epidemiology, 59, 2323–2337. https://doi.org/10.1007/s00127-024-02714-1
10. Day, M., Carlson, B., Bonson, D., & Farrelly, T. (2022). Aboriginal and Torres Strait Islander LGBTQIASB+ people and mental health and wellbeing (Cat. no. IMH 15). Australian Institute of Health and Welfare. https://www.aihw.gov.au/getmedia/58993fae-46e1-4b19-b427-c9197f1bf609/aihw-imh-15-aboriginal-and-torres-strait-islander-lgbtqiasb-people-and-mental-health-and-wellbeing.pdf
11. Hill, A. O., et al. (2020).
12. McNair, R., Andrews, C., Parkinson, S., & Dempsey, D. (2017). LGBTQ Homelessness: Risks, Resilience, and Access to Services in Victoria. Melbourne: University of Melbourne / Gay and Lesbian Foundation of Australia (GALFA).
13. Beckwith, S., Lowe, L., Wall, L., Stevens, E., Carson, R., Kaspiew, R., MacDonald, J. B., McEwen, J., & Willoughby, M. (2023). Coercive control literature review. Australian Institute of Family Studies. https://aifs.gov.au/sites/default/files/2023-07/2304_Coercive-control-literature-review_July2023.pdf
14. Lim, G., Melendez-Torres, G. J., Amos, N., Anderson, J., Norman, T., Power, J., Jones, J., & Bourne, A. (2023). Demographic predictors of experiences of homelessness among lesbian, gay, bisexual, trans, gender-diverse and queer-identifying (LGBTIQ) young people in Australia. Journal of Youth Studies, 28(1), 254–280. https://doi.org/10.1080/13676261.2023.2261864
15. Australian Institute of Health and Welfare. (2025). Specialist homelessness services annual report 2024–25. AIHW. https://www.aihw.gov.au/reports/homelessness-services/specialist-homelessness-services-annual-report/contents/clients-services-and-outcomes
16. Hill, A. O., et al. (2021).
17. Briskman, L., Sullivan, C. T., Spurway, K., Leha, J., Trewlynn, W., & Soldatić, K. (2022). (Re)Claiming health: The human rights of young LGBTIQ+ Indigenous people in Australia. Health and Human Rights, 24(1), 35–47. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9186459/
18. Commission for Children and Young People. (2022). Child Safe Standards. Victorian Government. https://ccyp.vic.gov.au/child-safety/being-a-child-safe-organisation/the-child-safe-standards/
19. Royal Australian and New Zealand College of Psychiatrists. (2021). Recognising and addressing the mental health needs of the LGBTIQ+ population [Position statement]. RANZCP. https://www.ranzcp.org/clinical-guidelines-publications/clinical-guidelines-publications-library/recognising-and-addressing-the-mental-health-needs-of-the-lgbtiq-population
20. Saxby, K. (2022). Australia's LGBTIQ research data landscape. The Australian Economic Review, 55(2), 290–308. https://doi.org/10.1111/1467-8462.12462
21. LGBTIQ+ Health Australia. (2021). Beyond Urgent: National LGBTIQ+ Mental Health and Suicide Prevention Strategy. LGBTIQ+ Health Australia. https://www.lgbtiqhealth.org.au/beyond_urgent
22. Cameron, N., McPherson, L., Gatwiri, K., & Parmenter, N. (2020). The needs of LGBTIQ young people in out-of-home care [Research brief]. Australian Childhood Foundation / Centre for Excellence in Therapeutic Care. https://www.cetc.org.au/wp-content/uploads/2022/07/needs-of-lgbtiq-young-people-research-brief.pdf
23. Hill, A. O., et al. (2021).
24. Australian Institute of Health and Welfare. (2023). LGBTIQ+ communities: Data sources. AIHW. https://www.aihw.gov.au/reports-data/population-groups/lgbtiq/data-sources
25. Saxby, K. (2022).
26. Hill, A. O., et al. (2020).
27. Victorian Government. (2010). Equal Opportunity Act 2010 (Vic). Victorian Register of Legislation. https://www.legislation.vic.gov.au/in-force/acts/equal-opportunity-act-2010
28. Department of Health and Aged Care. (2021). National Action Plan for the Health and Wellbeing of LGBTIQA+ People 2025–2035. Australian Government. https://www.health.gov.au/sites/default/files/2024-12/national-action-plan-for-the-health-and-wellbeing-of-lgbtiqa-people-2025-2035.pdf
29. Australian Government Department of Health. (2020). National Action Plan for the Health of Children and Young People 2020–2030. https://www.health.gov.au/resources/publications/national-action-plan-for-the-health-of-children-and-young-people-2020-2030
30. National Suicide Prevention Office. (2025). The National Suicide Prevention Strategy 2025-2035. Canberra: Australian Government. https://www.health.gov.au/resources/publications/national-suicide-prevention-strategy-2025-2035

31. Department of Social Services. (2022). National Plan to End Violence against Women and Children 2022–2032. Commonwealth of Australia. https://www.dss.gov.au/system/files/resources/national-plan-end-violence-against-women-and-children-2022-2032.pdf

32. Our Watch. (2021). Change the story: A shared framework for the primary prevention of violence against women in Australia (2nd ed.). Our Watch. https://assets.ourwatch.org.au/assets/Key-frameworks/Change-the-story-Our-Watch-AA.pdf

33. Australian Commission on Safety and Quality in Health Care. (2021). National safety and quality health service standards (2nd ed.). https://www.safetyandquality.gov.au/sites/default/files/2021-05/national_safety_and_quality_health_service_nsqhs_standards_second_edition_-_updated_may_2021.pdf

Research Matters: Why do we need LGBTIQA+ inclusive youth services?

Rainbow Health Australia

ISBN: 978-1-7642889-8-9

DOI: 10.26181/33102680

Rainbow Health Australia 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.