

**Submission
No 54**

**INQUIRY INTO EDUCATION LEGISLATION
AMENDMENT (PARENTAL RIGHTS) BILL 2020**

Organisation: LGBTIQ Health Australia

Date Received: 28 February 2021



Health and wellbeing for
lesbian, gay, bisexual, trans, intersex [LGBTI]
people and sexuality, genders, and bodily
diverse people and communities
throughout Australia

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28 February 2021

To the Portfolio Committee 3

Education Legislation Amendment (Parental Rights) Bill 2020

I write in my capacity as CEO of LGBTIQ+ Health Australia (formerly known as the National LGBTI Health Alliance) in response to the *Education Legislation Amendment (Parental Rights) Bill 2020* (the Bill). We have serious concerns that both the public debate surrounding this Bill and especially its implementation will compound the significant stigma and isolation that leads to poor mental health outcomes among trans and gender diverse young people. **We would also like to take this opportunity to formally endorse the submission provided by our member organisation ACON.**

LGBTIQ+ Health Australia (LHA) is the largest national peak organisation working to promote the health and wellbeing of LGBTIQ+ people and communities. LHA is uniquely placed with a diverse membership that spans across states and territories, and includes LGBTIQ+ community-controlled health organisations, LGBTIQ+ community groups and state and territory peak bodies, service providers, researchers, and individuals. LHA is strategically positioned to provide a national focus to improving the health and wellbeing of LGBTIQ+ people through policy, advocacy, representation, research evidence, and capacity building across all of the health portfolios that are of significance to our communities. We recognise that people's genders, bodies, relationships, and sexualities affect their health and wellbeing in every domain of their life.

LHA has serious concerns with the Bill, including:

- **Fostering an unsafe and non-inclusive learning environment for trans and gender diverse students.** It will prohibit schools from teaching that trans and gender diverse people exist and should be treated with respect. It will also prohibit school counsellors from affirming a trans or gender diverse student or providing them with a referral to gender affirming support and care.
- **Placing teachers at risk of having their employment terminated** if they provide a trans or gender student with support that affirms their gender identity.
- **Describing intersex variations as “disordered”**, reinforcing harmful stereotypes that variations of sex characteristics need to be “corrected”, which will increase the stigmatisation of intersex children. This will potentially lead to further medical and surgical interventions being conducted without their fully informed and freely given consent, which is a violation of their rights to bodily autonomy, physical integrity and self-determination.
- **Allowing parents to deny their children access to lessons in public schools**, which may contradict their political, social or personal values, including their views on LGBTIQ+ people.
- **The Bill is unnecessary.** Existing legislation and frameworks (*Education Act 1990*) already recognise parents as having primary responsibility for their child's education (s 4(b)) and



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have choices about how and where their children are educated (s 22). Also, religious parents can already object to their children being taught particular content (s 26).

Due to the above concerns, LGBTIQ+ Health Australia opposes the Bill in its entirety and urges the Portfolio Committee No. 3 to reject any further consideration of the Bill.

All schools have a duty to provide supportive and inclusive environments for our young people – including LGBTIQ+ young people. And it is by fostering these environments in all schools and ensuring that the best interests of the child are of primary consideration that we have a chance of reducing minority stress and improving the overall health and wellbeing of LGBTIQ+ people.

Please do not hesitate to contact me to discuss LHA's endorsement of ACON's submission.

Yours sincerely

Nicky Bath, Chief Executive Officer
LGBTIQ+ Health Australia



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Latest Trans and Gender Diverse Health and Wellbeing Research Evidence

Mental health disparities

Research evidence has consistently demonstrated that trans and gender young people are at an increased risk of poor mental health and wellbeing outcomes because of discrimination, social exclusion, bullying, physical assault, and abuse.

We reject the notion that “being trans” is in of itself a mental health condition. This is not supported by the evidence and only continues to perpetuate the pathologisation and medicalisation of the trans experience.

The ongoing public debate and politicisation of the lives and experiences of trans and gender diverse people, only seek to cause further harm and is particularly concerning considering that people are experiencing higher levels of stress and anxiety during the ongoing COVID-19 pandemic.

The Writing Themselves in 4 National Report, the largest ever national survey of the health and wellbeing of LGBTQA+ young people aged 14-21, found that almost two-fifths (37.9%) of trans and gender diverse respondents have attempted suicide in their lifetime, and almost nine-tenths (88.8%) have ever experienced suicidal ideation.

The Trans Pathways study, which investigated the mental health of trans young people in Australia, reported high rates of depression (74.6%), anxiety (72.2%), post-traumatic stress disorder (25.1%), a personality disorder (20.1%), psychosis (16.2%) or an eating disorder (22.7%). Furthermore, the study found that 79.7% reported ever self-harming and 48.1% ever attempting suicide.

Unnecessary barriers within the medical system when accessing gender affirming care

We also acknowledge that trans and gender diverse people face unnecessary barriers within the health system when accessing medical care to affirm their gender. We strongly support expert clinical care that is non-judgmental, supportive and welcoming of trans and gender diverse people.



The Trans Pathways study found that 42.1% of trans young people encountered mental health and other medical services who “did not understand, respect or have previous experience with gender diverse people.” Further, 60.1% of study participants experienced feelings of isolation from these services, which was found to be linked to higher rates of self-harm, suicidal thoughts, suicide attempts, and diagnoses of PTSD and anxiety.

Additionally, the From Blues to Rainbows report asked 188 trans and gender diverse young people their reasons for not seeing a health care professional. Among the reasons were fears that they would not be understood (33%), the language used by health professionals made them feel uncomfortable or angry (23%), and negative past experiences (30%).

Evidence of affirmation model as best practice

We strongly believe that adopting a person-centred care approach that ensures that decision-making is driven by the child or adolescent is fundamental when exploring options regarding medical, legal, and social affirmation of an individual’s gender identity. Gender affirming care encourages clinicians to listen to trans and gender diverse children or adolescents, and their families and support them to make decisions to express their gender identity. Also, in the absence of best practice studies, human rights approaches and community perspectives need to be used.

Research evidence demonstrates that following social transition, children experience a decrease in psychological distress and an increase in emotional functioning and self-worth. Social and medical transitioning among adolescents has also shown to result in improved mental health outcomes as well as equivalent attainment rates of educational and vocational qualifications to their cisgender peers.

Psychological practices to change an individual’s gender identity to be more aligned with their sex assigned at birth (also known as conversion or reparative therapies), are unethical, lack efficacy and compound the already negative mental health outcomes of trans and gender diverse people. Organisations and individuals that continue to promote harmful practices that deny an individual’s right to affirm and express their gender identity to improve their overall health and wellbeing should not be supported nor their practices condoned (The Australian Professional Association for Trans Health, 2018).