Curtin University

Gender Research Network

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Submission to Australian Human Rights Commission project mapping threats to trans and gender diverse (TGD) human rights in Australia

The Gender Research Network (GRN) welcome this opportunity to provide a response to the Australian Human Rights Commission's project concerning threats to trans and gender diverse (TGD) human rights in Australia.

The GRN recognises the severe and pressing concerns raised by the *Fuelling Hate* report (2023) conducted and released by the Trans Justice Project and Victorian Pride Lobby and endorses its recommendations in this area. This project found a marked increase in anti-trans hate since 2020, largely evident in and driven by pervasive online abuse. As well as affirming the recommendation that funding be allocated towards research into the causes, consequences, and possible countermeasures for this, we wish to particularly emphasise the ongoing value of supporting community-led organisations and approaches to reducing anti-trans abuse, harassment, vilification and violence as noted in this report. In relation to this submission, we've been in contact with Western Australian organisations that work with and assist TGD youth and communities, including Freedom (WAAC) and Rainbow Community House. In addition to the contents of this submission, we draw the committee's attention to the collaborative submission from Freedom (WAAC), Youth Pride Network, and TransFolk. We support their submission as key stakeholders and community networks in WA.

Further, Rainbow Community House has underscored in our discussions with them the substantial gap between the demand for safe mental health service provision for TGD young people and the services available, as well as the prohibitive cost of mental health services for TGD young people in need of such. We emphasise that this requires critical and urgent government intervention.

The following submission has been drafted by Dr Jacqueline Hendriks, responding to the key areas of education and health, based on the research of Dr Hendriks and other key scholars working in this area and in collaboration Curtin's school of Curtin School of Population Health and Collaboration for Evidence, Research and Impact in Public Health (CERIPH). We hope the expertise and evidence prepared here by Dr Hendriks helps towards the committee's goals.

Sincerely,

Amy Dobson, Samantha Owen, Katie Ellis, and Lilly Heseltine; Curtin GRN

Dr Jacqueline Hendriks

Jacqueline Hendriks (she/her) is a Senior Research Fellow and Lecturer at Curtin University, and Courses Coordinator of the Postgraduate Sexology Program. She holds managerial roles with The RSE Project, SiREN and CERIPH; and is currently Vice President of the Australian Association for Adolescent Health. She is a mixed methods researcher with a desire to learn from 'hardly reached' populations regarding sensitive issues. This includes work with trans and gender diverse individuals regarding intimate partner violence and health service provision. Jacqui is particularly focused on evidence-based delivery of comprehensive sexuality education across the lifespan, and associated workforce development for the education and health sectors.

Educational Institutions

Educational institutions across Australia, including primary, secondary, and tertiary levels, play a crucial role in shaping individuals' identities and experiences (Jones & Smith, 2018). However, trans and gender diverse (TGD) students often encounter hostility, discrimination, and a lack of affirmation in these environments (Grey et al., 2020). These students are disproportionately affected by bullying, harassment, and exclusion in schools (Grey et al., 2020) and the absence of inclusive curricula, gender-neutral facilities, and supportive staff exacerbates their marginalisation (Taylor et al., 2017).

Existing policies and practices in Australian schools fail to adequately address the specific needs of TGD students, resulting in adverse educational outcomes and psychological distress (Riggs et al., 2019). In the primary and secondary school context, whilst some jurisdictions provide comprehensive policies and guidance (e.g. see https://www.education.sa.gov.au/schools-and-educators/health-safety-and-wellbeing/gender-diverse-intersex-and-sexually-diverse-children-and-young-people) this is not universal across the country. Similarly, at the tertiary level, although some universities have implemented gender-affirming policies and support services, inconsistencies persist across campuses (Jones et al., 2022). Furthermore, access to appropriate healthcare, housing, and campus facilities remains a challenge for TGD students in Australian universities, impacting their academic success and well-being (Smith & Brown, 2020).

The educational workforce is also poorly supported to affirm TGD students, as minimal training or support is provided at both the pre-service and in-service stages (Burns et al. 2023, Burns et al. 2018, Grey et al., 2020 & O'Brien et al. 2021). As outlined by Ullman (2022), school climate and teacher support are integral to TGD students' sense of belonging.

Recommendations for improvement:

- **Comprehensive policies and support services:** Educational institutions should prioritise the development and implementation of comprehensive policies and guidance to support TGD students at all levels of education. While some jurisdictions provide such policies, a national approach is needed to ensure consistency and inclusivity across the country. Appropriate support services to address the specific needs of TGD students should also be easily accessible at each educational site. For tertiary institutions this would also include access to appropriate healthcare, housing, and campus facilities, as well as fostering a supportive and inclusive campus culture.
- **Inclusive curricula and facilities:** Educational institutions should review and revise their curricula to ensure inclusivity and representation of diverse gender identities and

experiences. Additionally, they should work towards providing gender-neutral facilities and safe spaces to create a more supportive environment for TGD students.

- **Professional development for the educational workforce:** Both pre-service and in-service training programs for educators should include comprehensive modules on gender diversity, inclusive teaching practices, and strategies for creating affirming classroom environments. This training should be mandatory and ongoing to ensure that educators are equipped with the knowledge and skills to support TGD students effectively.
- **Collaboration and engagement:** Educational institutions should actively engage with TGD communities and organisations to co-design policies, programs, and support services. This collaboration will ensure that the voices and experiences of TGD students are central to decision-making processes and that initiatives are tailored to meet their unique needs.
- **Research and evaluation:** Continued research and evaluation are essential to assess the effectiveness of existing policies and practices and identify areas for improvement. Educational institutions should invest in research initiatives to better understand the experiences and challenges faced by TGD students and to inform evidence-based interventions.

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Health Workforce

The Australian health workforce often lacks sufficient training and competency in addressing the unique healthcare needs of the TGD population (Winter et al., 2016). Limited awareness and understanding of gender diversity among healthcare professionals often lead to misgendering, discrimination, and inadequate care for TGD patients (Poteat et al., 2013).

Many healthcare professionals receive minimal education on gender diversity during their training, leading to gaps in knowledge and competency (Bauer et al., 2014). This deficiency is particularly pronounced in areas such as transgender healthcare, hormone therapy, mental health support, and surgical interventions. Many TGD individuals report negative experiences when seeking healthcare, including encountering judgmental attitudes, refusal of care, and inappropriate questioning about their gender identity (Grant et al., 2011).

These inadequacies have tangible consequences on the health outcomes of TGD individuals. Delayed or substandard healthcare can lead to worsened physical and mental health outcomes, increased risk of adverse reactions to hormone therapy, and exacerbation of gender dysphoria (Rowe et al., 2015).

Recommendations for improvement:

- **Inclusion of comprehensive curriculum:** Integrate education on gender diversity and TGD health issues into the curricula of medical, nursing, and allied health programs. This would include training on cultural competency, sensitivity, and inclusive language to healthcare professionals to foster a welcoming and respectful healthcare environment for TGD patients. Both pre-service and in-service professional learning programs are required.
- **Clinical guidelines and best practices:** Develop and disseminate clinical guidelines and best practices for the provision of gender-affirming care, including hormone therapy, mental health support, and surgical interventions.
- **Collaboration and engagement:** The health workforce should actively engage with TGD communities and organisations to co-design policies, programs, and support services. This collaboration will ensure that the voices and experiences of TGD students are central to decision-making processes and that initiatives are tailored to meet their unique needs.

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