



A Gender Agenda  
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**A Gender Agenda**

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# **ACT Budget Submission**

**2011-2012**

17<sup>th</sup> December 2010

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## **Introduction**

A Gender Agenda welcomes the opportunity to provide a Submission in relation to the 2011-2012 ACT Budget.

A Gender Agenda is an ACT based organisation providing information, community education, support and advocacy services in relation to issues affecting transgender and intersex communities.

We work collaboratively and inclusively with other organisations on a local, national and international basis.

In preparing this submission we have consulted widely within our own membership, the broader sex and gender diverse communities within the ACT, interstate and national transgender and intersex organisations, as well as a number of 'mainstream' community organisations within the ACT.

If you require any further information, we can be contacted via Peter Hyndal by email on peter@genderrights.org.au or on 0419 471 756. We consent to any part of this submission being made public.

## **Key Recommendations**

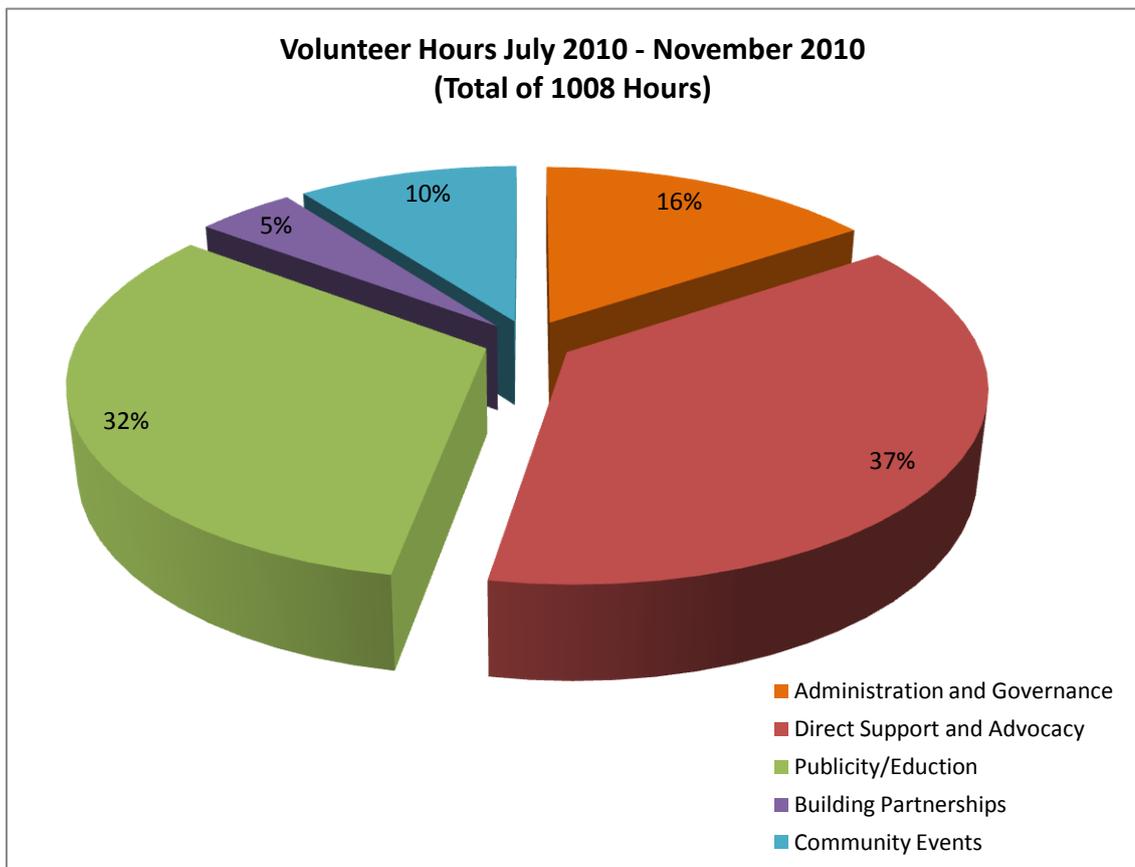
- 1) That the 2011-2012 ACT budget provides between \$300,000 and \$400,000 towards the establishment and core funding of an ACT based community run "Gender Centre" which would provide much needed support services to transgender and intersex individuals, their family, other service providers and workplaces. This funding level is equitable with the funds dedicated to organisations working with other specific population groups.
- 2) That the 2011-2012 ACT budget provides between \$100,000 and \$150,000 towards the establishment and core funding of an ACT based community run gender counselling and training service which would provide much needed counselling services to transgender and intersex individuals, their family, other service providers and workplaces.
- 3) That the 2011-2012 ACT budget provides additional funds to the ACT Human Rights Commission in order to employ an additional supported staff position dedicated to addressing the underreporting of discrimination against transgender and intersex people, and to support employers and service providers with information about their legal obligations under the Discrimination Act and the Human Rights Act.

## Background: A Gender Agenda

A Gender Agenda is an incorporated health promotion charity and was established in 2004 to provide a range of services to the transgender and intersex communities in the ACT. Demand for our services has grown exponentially since then.

Services we currently provide on a voluntary basis include:

- Awareness training and other support to funded community organisations
- Information (including a library) for trans/intersex people and their families
- A variety of active email lists for 'peer support' and information exchange
- A variety of safe and confidential social events
- Support and advocacy services on a one-to-one basis



Key (and active) partnerships we have developed within the community sector

- ACTCOSS
- AIDS Action Council of the ACT
- Canberra Men's Centre
- Canberra Rape Crisis Centre
- Canberra Transgender Network
- Connections
- Mental Illness Education ACT
- Mental Illness Fellowship of the ACT
- Sexual Health and Family Planning ACT
- YWCA Canberra

## 1. Number of transgender and intersex people in the ACT

Prevalence rates for the incidence of transsexuals are often quoted around the 1:100,000 rate, which would suggest only 3 or 4 transsexual people live in the ACT. These statistics are clearly wrong as we have had direct contact with more than 150 transsexual individuals.

References for prevalence which appear more realistic to us are that 4% of the population is intersex<sup>1</sup>, and “approximately 8% of the population experience... ‘gender identity conflict’ issues at some stage in their lifetime”<sup>2</sup>.

## 2. Key issues affecting transgender and intersex people in the ACT

### 2.1. High rates of unemployment

A study undertaken in Sydney that compared the employment status of transgender people before and after their transition showed that there was a 25% to 50% reduction in people’s engagement in work experiences after their transition. Anecdotal evidence suggests unemployment rates as high as 50% in the sex and gender diverse population<sup>3</sup>.

*Last Thursday I happened to mention to a co-worker that I was Intersex, as I was concerned that by participating in a work fitness program that it would become obvious. Well barely two and a half hours later I was called into the office and told that my work was not being performed to the standard that was expected, and that they would have to let me go.*

*Posted to email support list October 2010*

### 2.2. Disproportionately low income levels

The recent Tranznation report on the health and wellbeing of transgender people states that, although the sex and gender diverse respondents were more highly educated than the general population (35% with university degrees compared to only 18% of the general population), only 15% of respondents earned more than \$60,000 and 35% earned less than \$20,000. According to the same report, 59% of the Australian sex/gender diverse community earn less than \$40,000 per annum<sup>4</sup>.

<sup>1</sup> Professor Peter Koopman cited in “Intersex –a challenge to conventional binary gender – construction, de-construction or re-construction?” Ann Stewart, University of QLD, 2004.

<sup>2</sup> *Transgender Lifestyles and HIV-AIDS Risk* (1994), Roberta Perkins, School of Sociology University of NSW, p19.

<sup>3</sup> Gender Centre, assorted reports and publications. Contact point: Elizabeth Riley (02) 9569 2366.

<sup>4</sup> *Tranznation – a report on the health and wellbeing of transgender people in Australia and New Zealand* Australian Research Centre in Sex, Health and Society, Melbourne, 2007. Page 19 Table 4.

### 2.3. *High rates of homelessness*

A study of transgender people living in Sydney found that, at the time of the survey, 10% were living in a refuge, boarding house or other temporary accommodation. The same report noted that while more than 75% of the general population own (or are in the process of owning) their own home, less than 20% of transgender people fell into this category<sup>5</sup>.

There are currently no services in the ACT that offer accommodation services to transgender or intersex people. The Sydney Gender Centre operates a residential program comprising 4026 bed days which in 2009-2010 had occupancy rates of 95.6% (2008-09 was 93.7%)<sup>6</sup>.

### 2.4. *High experiences of discrimination*

Evidence shows that sex and gender diverse individuals experience extremely high rates of discrimination. Beyond Blue states that 90% of transgender people experience discrimination. This is consistent with the findings of Tranznation. A Sydney based study tells us that 37% of transgender people experience discrimination on at least a weekly basis and found that “not only does it seem that everyone practices discrimination against transgender people, but also this discrimination occurs just about everywhere”<sup>7</sup>. In 2009 the ACT Human Rights Commission conducted a survey in relation to an unrelated topic where 80% of respondents identified transsexuality as the attribute most likely to result in unfavourable treatment.

### 2.5. *High incidence of depression and suicide*

While the link between discrimination, depression and suicide is well documented in psychological literature, the invisibility of transgender and intersex members of the community means that specific data is not widely available. The Tranznation report showed exceptionally high levels of discrimination against transgender people, and also confirmed a direct casual link between the experience of discrimination and the incidence of depression. Tranznation also shows that the level of suicidal ideation among transgender populations is very high, with 20 per cent of Australia’s transgender population reporting current feelings of suicidal ideation.

A recent Suicide Prevention Australia position statement cites a range of studies conducted over last decade showing that the prevalence of attempted suicides among transgender people ranges between 16 and 47

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<sup>5</sup> *Transgender Lifestyles and HIV-AIDS Risk (1994), Roberta Perkins, School of Sociology University of NSW, p23.*

<sup>6</sup> *Gender Centre Annual Report 2009-2010, <http://www.gendercentre.org.au/2010-Annual-Report.htm>, accessed December 16<sup>th</sup> 2010.*

<sup>7</sup> *Transgender Lifestyles and HIV-AIDS Risk (1994), Roberta Perkins, School of Sociology University of NSW*

per cent of that population. The paper concluded that it was indisputably clear that younger transgender people are at an elevated risk of suicide and self-harm. Evidence clearly links these health outcomes to experience of discrimination and social exclusion<sup>8</sup>.

## 2.6. *Poor interactions with health services*

Tranznation and many other studies have consistently shown health outcomes for transgender and intersex people are poorer than those for the general population. They also indicate that transgender and intersex people in the ACT under-utilise existing health and community services for several reasons, including fear of discrimination and a lack of knowledge in the medical and community sector about the needs of transgender and intersex people.

In a recent survey undertaken in the ACT<sup>9</sup>, less than 10% of transgender people sought advice about medical issues from a health professional, with the vast majority of respondents instead relying on information from the internet in order to avoid contact with health professionals. The resulting lack of contact between transgender and intersex people and GP's in particular mean that many community health messages (physical activity, healthy eating etc) are not effectively reaching the transgender and intersex community.

*A number of participants said... they were often reluctant to disclose their transgender status with practitioners when being treated for health problems. Fear of being "stereotyped and boxed", pathologised, labelled, judged, stigmatised, met with hostility and ignorance, were some of the reasons that people gave... One woman explained her reluctance to use a health service, saying: Fear of the health system. After bad experiences I'm scared to use it because I know it's not really there for me.*

*Tranznation – a report on the health and wellbeing of transgender people in Australia and New Zealand Australian Research Centre in Sex, Health and Society, Melbourne, 2007, p33.*

## 2.7. *Experiences of violence*

Transgender and intersex people experience violence at far greater rates than the general population – and more often than not the violence is more extreme. We were recently advised that 46% of trans women in Queensland have been physically assaulted, and that 38% have been assaulted with a weapon. Tranznation found that 40% of all transgender people had been assaulted (including sexual assault), and that 35% of transgender people reported having received hate mail or obscene phone

<sup>8</sup> *Suicide and self-harm among Gay, Lesbian, Bisexual and Transgender communities, Suicide Prevention Australia, August 2009*

<sup>9</sup> *Community Health Survey undertaken by A Gender Agenda November 2008*

calls and/or having had objects thrown at them. Partner violence was reported by 16% of respondents in Tranznation.

## 2.8. *Low rates of social inclusion and participation*

Many transgender and intersex people respond to these experiences by avoiding social interactions. Tranznation found that 65% of transgender people consciously modified their behaviour in certain settings due to their fear of stigma and discrimination. Tranznation also found “that the greater the number of places in which a person reported that they modified their behaviour, the higher the likelihood they were currently experiencing depression”.

### Family and Friends:

Many trans and intersex people are ostracised by family and friends. Anecdotal evidence suggests that the vast majority of trans people are single, having often lost their partners as a result of “coming out”.

### Workplaces:

Documented high levels of discrimination exist in a whole range of areas, but are particularly notable in relation to employment.

### Sporting Activities:

Feedback we have received indicates that transsexuals, intersex and gender diverse people often feel that they are unable to participate in sporting activities due to the difficulties involved.

*Since I joined AGA three months ago, I've had more social interactions than I've had in the last 10 years.*

*Verbal conversation with a trans-woman in September 2010*

### **3. Rationale for funding a new service**

#### *3.1. Needs are not being met by existing services*

It is clear that trans and intersex individuals are not accessing mainstream services. On the odd occasion that they do, organisations often feel that they need to seek assistance in order to provide appropriate services. This is demonstrated in the high number of requests we are receiving from organisations for training and support.

Many mainstream services (especially those that are related to complex needs, health or housing services) are segregated into “mens” and “womens” services. This division is highly problematic for trans and intersex people.

#### *3.2. Specific unmet counselling needs*

Until recently, many trans and intersex people accessed counselling services from AIDS Action Council of the ACT<sup>10</sup>. This was a free service but it is currently unavailable. During the last two weeks we have been approached by 8 individuals who are seeking counselling services. We have a registered psychologist who is happy to work with us, but we don't have the financial capacity to provide the service.

#### *3.3. Similar services exist in other jurisdictions – proven delivery models*

In Sydney, the need for a dedicated Gender Centre has been recognised since 1982. The successful operation of this centre has shown that a dedicated service delivery model is the most effective way to work with marginalised communities of trans and intersex individuals.

In 2009-2010 the Sydney Gender Centre provided services to 2699 individuals, and 805 community organisations<sup>11</sup>.

#### *3.4. We do not currently have the capacity to meet existing demand*

Demand for our services far exceeds our capacity to deliver without operational funding. In the last two months (from October 2010) we have been approached by more than 10 funded organisations and asked to provide support or training.

Over the same time period, we have been approached by 8 individuals who are seeking counselling services that we are currently unable to provide. We have been approached by an additional 13 individuals seeking support or advocacy services.

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<sup>10</sup> AIDS Action Council of the ACT Annual Report 2010, page 21

<sup>11</sup> Gender Centre Annual Report 2009-2010, <http://www.gendercentre.org.au/2010-Annual-Report.htm>, accessed December 16<sup>th</sup> 2010.

## 4. Alignment with ACT Social Plan

### 4.1. *Commitments in 2004 Social Plan*

We are aware that the ACT Government is in the process of updating the 2004 Social Plan, however in relation to transgender and intersex people, we do not believe that the undertakings made in the original 2004 Social Plan have yet been met.

### 4.2. *Legislative Discrimination*

The 2004 plan states that “we are already implementing legislation to remove discrimination against gay, lesbian, bisexual, transgender and intersex people”<sup>12</sup>.

Unfortunately, although gay and lesbian law reform was progressed, transgender and intersex law reform was not. Discrimination against transgender and intersex people is still enshrined in ACT law. This view is supported by recent reports released by both the Australian Human Rights Commission and the ACT Human Rights Commission.

Until legislative discrimination is removed, the capacity for transgender and intersex people to “reach their potential, make a contribution and share the benefits of our community”<sup>13</sup> is severely limited.

### 4.3. *Living a life of dignity and value?*

The 2004 Social Plan “capture(d) the government’s... belief that we must:

- value and invest in our people as the ACT’s most precious asset;
- ensure that every citizen has a decent standard of living; and
- safeguard the freedoms necessary to allow all to live a life of dignity and value.”<sup>14</sup>

Given the evidence provided in the earlier part of this submission, it is hard to see how the transgender and intersex citizens of the ACT are able to live a life of dignity and value.

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<sup>12</sup> “Building our Community: The Canberra Social Plan, 2004, p34.

<sup>13</sup> Quotation from front cover of “Building our Community: The Canberra Social Plan, 2004.

<sup>14</sup> “Building our Community: The Canberra Social Plan, 2004, p3.