



March 2022

**Submission on reform of the *Anti-Discrimination Act 1991***

**Queensland Council for LGBTI Health**

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## 2. Acknowledgement

We acknowledge and pay our respects to the Traditional Owners of Country across these lands, oceans and waterways now known as Queensland. We acknowledge that your sovereignty of these lands was never ceded, and that for us to do our work with integrity, that you, your ancestors and your Elders, and the ways of knowing, being and doing, must be central to how we work, live, walk and play.

## 3. Introduction

The Queensland Human Rights Commission (the Commission) is working with partner organisations and Queensland communities in consulting for the review of the Anti-Discrimination Act.

Discrimination may mean different things for many people in our communities, and is important to address for many reasons, such as improving safety and lives of our communities and people, and the act is being reviewed for the first time since 1991. This is our opportunity to tell our communities' stories and talk about this important piece of legislation which affects our lives in many different ways, when speaking about diverse bodies, genders and relationships, and doing so as our authentic selves, safely.

As partners who are invested in this piece of work, Queensland Council for LGBTI Health (QC) and Queensland Positive People (QPP) are working together to listen and gather your stories, lived experience and voices, and we would like to invite our Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, Sistergirl and Brotherboy communities to share those stories with us in many different ways, safely, confidentially. The Queensland Council for LGBTI Health (QC) has been a home for Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, Sistergirl and Brotherboy people and communities in Queensland for over 35 years. We are proud to be a community led and community owned health and wellbeing service, representing the diversity of our communities.

Our vision and the reason for our work, and this submission is for Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, Sistergirl and Brotherboy Queenslanders live longer and happier lives, and have access to the services and supports they need.

By working to this mission, we will achieve our purpose which will drive change within systems and services and empower communities and individuals to improve social, emotional and physical wellbeing.

## 4. Why action is needed

### 4.1 Our communities and people

Our communities live with the expectation of continual stress and crisis when it comes to discrimination based on our bodies, relationships, feelings and identities. There are many different ways in which our Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, (LGBTIQ+) Sistergirl and Brotherboy people are targeted and harmed on a regular basis because of who they are, and how they live their lives as people with diverse genders, bodies and relationships. This has been happening for as long as histories have been being recorded and it is only in our more recent past, that we are starting to see the possibilities of what meaningful systemic change could bring.

Governments have not kept up with the need to address these very real and serious issues. This is only reflected strongly by our communities' stories, outlined in this submission. Our communities have shared examples with us about experiencing discrimination in many settings, with the current evidence showing it occurs mostly in the workplace, in education settings like universities and schools and when accessing services, like accommodation and vital needs like healthcare [ref 7.2].

This review is vital to our LGBTIQ+ Sistergirl and Brotherboy communities and people because it directly affects the ways that we are treated, can access essential services without fear of discrimination, remove fears around the many societal structures that other members of our communities safely interact with and can in fact take for granted in ways that we can't. This is also about affirmation of our authentic selves. During community conversations about serious vilification and hate crimes in 2021, we found people were discriminated against in a range of settings, one person telling us they were accused of 'having sex with animals' in university, one person telling us they were encouraged to 'desist' from their gender identity in a mental health service setting, and a teacher outlining their students talking about 'lynching' them for being gay. These are just a few examples. All of these examples are recent [ref QC vilification & hate crimes].

Historically, discrimination of our communities in a healthcare setting is experienced as 'heterosexist' along with other forms of discrimination. According to 'Private Lives 2' data from 2015, LGBT people have a complex relationship with accessing healthcare, identifying heterosexist discrimination as a huge problem for our communities accessing mainstream services. Comparing that to more recent data in PL3 in 2020, we find that our communities continue to feel more respected with their identities at LGBTIQ+ specialised services rather than mainstream services, and of a range of health services, mainstream medical clinics had the lowest proportion of participants who felt that their sexual orientation or gender identity was very or extremely respected (58.6% and 37.7% respectively) [ref PL3, PL2]. This clearly demonstrates our communities have been experiencing this landscape of unsafety and missed opportunities to engage with services, often compounding issues for people, as a direct result of discrimination and safety.

Our communities tell us stories during this process about discrimination that happens in many different ways, relating to many different intersecting identities and settings and point out how complex it can be. Stories like a mother being continually 'harassed' when picking up their child from day care, because 'is that their real mother' comments being made, jokes about lesbians and sex when meeting doctors about a hysterectomy procedure and more extreme cases like being 'spat on', being called 'faggots' for dressing a certain way in public and comments like 'I'm sick of all this PC crap' when trying to simply update forms in a workplace and the employee is made to feel as though they cannot 'be their authentic self'. Examples like this are just some of the stories outlined in our findings in this document which clearly outline the kinds of discrimination occurring in our communities now and illustrate just how important it is to strengthen The Act, broaden protections and securely wrap around these rights for our communities.

Supporting the health and wellbeing of our people and communities connects understanding and the reduction of factors that increase the risk, such as protective factors including characteristics, conditions, and behaviours that directly improve positive health outcomes or reduce the effects of stressful life events and other risk factors. Our communities are in need of protection and the improvement of our systems.

It affects our everyday lives, our ability to work, achieve good health outcomes and achieve a healthy life with our families, friends, allies and chosen families. The longer this takes to achieve, the longer our communities will continue to experience discrimination through the mechanisms that have an obligation to be designed to protect them.

In the stories outlined in our community conversations and survey included in this submission, people tell us about experiences of discrimination, harm, sexual abuse and the failures of accessing essential services like healthcare. Someone described their employer cutting their shifts and intimidating them, another their GP used inappropriate language and was described as transphobic and, in another setting, a person experienced and described their neighbour's abuse based on their sexuality, forcing them to sell their house and move. It is clear our communities are experiencing abuse, harm and discrimination and it is clear that they require better protections to reduce harm.

#### 4.2 Living with protections

Attributes, language and definitions are so important to our communities and people when talking about identities, diverse genders, bodies and relationships. Our LGBTIQ+ Sistergirl and Brotherboy communities and people are experiencing gaps in protection because language is out of date in the current Anti-Discrimination Act and protections must be expanded to include definitions of sex characteristics, people living with HIV, all sexual identities, gender expressions, gender identities and genders including gender diverse and non-binary identities. Our people and communities are telling us it is vital to include these definitions to be directly protected under the act which is designed to protect victims of discrimination.

Our communities have a long history of discrimination and systemic oppression. The toll that it takes to remain resilient is a heavy one, leading to increasing isolation and loneliness, as folks choose to live their authentic lives. In one recent enquiry into social isolation and loneliness, it was found that 90% of people experienced loneliness at some point in their life, and 45% experience social isolation and loneliness on a daily basis [ref QC Social isolation and loneliness submission]. QC Social Isolation and Loneliness submission]. Our communities tell us there are many contributing factors to poor mental health outcomes including social isolation from families, friends and connection points all around society. At worst it signals that people are 'othered' and excluded, unwanted and discriminated against. At best we are 'not the norm.'

#### 4.3 Intersectionality, combined attributes

The Victorian Government website about Intersectionality, 'refers to the ways in which different aspects of a person's identity can expose them to overlapping forms of discrimination and marginalisation.'

A person's identity includes many different aspects, with that person existing with different identities simultaneously, such as age, race, gender, gender expression, sex characteristics, sexuality, HIV status.

Kimberle Crenshaw, is an African-American feminist scholar who is most frequently cited as coining the term "intersectionality". Crenshaw said: "If you can't name a problem, you can't see a problem and if you can't see a problem, you can't solve it".

When speaking with our communities about this review, people strongly agreed that attributes, or aspects of people's identities, should include in the Anti-Discrimination Act to be combined [ref 5.5].

People have described as being possibly discriminated against, but on multiple basis, such as for their sexuality and gender, or combined discrimination and harm based on their HIV status and sexuality, to name a few [ref 5.5].

We recommend protections be expanded to include discrimination based on combined attributes, as our communities are experiencing discrimination which targets different facets of their lives, sometimes simultaneously. People should be able to address these attributes on a combined basis with The Commission, when speaking about their diverse genders, gender identities, bodies and relationships.

#### 4.4 Determinants of health

The World Health Organisation describes the social determinants of health as “The social determinants of health (SDH) are the non-medical factors that influence health outcomes. They are the conditions in which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life. These forces and systems include economic policies and systems, development agendas, social norms, social policies and political systems.” [Ref 8. WHO]

Experiences of discrimination for our LGBTIQ+ Sistergirl and Brotherboy communities and people can have an effect on one's life that affects other facets of their life quality, human experiences and health and wellbeing. One person told us during a recent survey; “The experience was traumatic, and the impacts were broad. The impacts included self-isolation, fear of engagement in public, increased anxiety and this impacted my finances, which then impacted paying my rent. And then I have to prove that I am being discriminated against because of race and identity.”

Another person says they we're “Denied job interviews on the basis of my gender identity and being transgender. This has kept me unemployed for longer struggling with bills. And struggling with affording to transition safely.”

Addressing discrimination, expanding attributes and assisting people and communities with diverse bodies, genders and relationships with protections can have a vital role in the outcomes for our communities' health, lives, work and wider set of roles with their community, friends, families and chosen families.

#### 4.5 Health, mental health and wellbeing

Our communities are experiencing a mental health emergency and discrimination, abuse, harm and barriers to accessing services are only compounding these issues. Systemic failures to protect our communities means the bigger the toll on our communities' health, mental health, wellbeing and harm that continues, especially for our younger people and people who are trans, gender diverse and non-binary.

Over 2 fifths of LGBTIQ+ people report having attempted suicide in the past 12 months, and over half of LGBTIQ+ people reported high or very high levels of psychological distress during the past four weeks [2. Private Lives 3 Study 2020; LaTrobe University, PL3]. In particular, experiences for our Trans, Gender-Diverse and Non-Binary communities are showing even worse outcomes, with numbers being one in seven. These statistics bring to light the crisis we are in and reflects the experience of many, including the people that we see at our service and communities we speak to.



It was also found in the Private Lives 3 study of a range of health services, mainstream medical clinics had the lowest proportion of participants who felt that their sexual orientation or gender identity was very or extremely respected (58.6% and 37.7% respectively). Over three quarters (75.3%; n = 5,133) of participants reported that they would be more likely to use a service if it has been accredited as LGBTIQ-inclusive [ref PL3]. When in need, because they did not feel safe to do so, only adding to the already compounding poor mental health outcomes that people live every day. That only goes up for people who are trans, gender diverse and non-binary, with Private Lives 3 study finding that less than half of trans women (49.5%; n = 142) and trans men (49.5%; n = 136), and one quarter (25.8%; n = 154) of non-binary participants, agreed or strongly agreed with the statement, 'I have been easily able to access gender affirming care when I have needed to.' [ref 8, WHO].

During a survey in 2021 when speaking to the Queensland Parliament's Legal Affairs and Safety Committee about Serious Vilification and Hate Crimes, people told us in their responses and stories, it is clear that the experience of vilification, hate speech and discrimination experienced affected mental health, increased stigma and discrimination and affected their social and emotional wellbeing (respondents from the survey reported feeling depressed, anxious and having thoughts of suicide).

Our LGBTIQ+ Sistergirl and Brotherboy communities, and people who are living with a disability experience barriers to accessing a range of services, from vital services such as mental health, social services and other accommodation, workplace and education services. Improving accessibility can range from resources being created in alternative formats (such as plaintext or Auslan), adequate disability support and client assistance around buildings and the use of the correct language. Our communities are telling us services lack knowledge and practise in this area, leading to further stigma for people and increased anxiety, discouraging people from accessing vital mental health services.

Current access to supports need to be improved and strengthened to ensure folks and communities have adequate access to support for them, their families, friends and chosen families.

## 5. Recommendations for The Commission

### 5.1 Sex characteristics

Sex characteristics is not currently covered under the Anti-Discrimination Act but is covered in some other states. 'Intersex status' is covered under federal discrimination laws that apply across Australia.

An intersex variation can include variations in chromosomes, gonads, sex hormones, or genitals that do not fit the gender binary definitions of male or female.

The definition of 'gender identity' currently conflates transgender people with intersex people. Intersex people do not 'identify' as having a 'gender identity' but rather have biological characteristics and bodies that fall outside a strict male/female binary. The definition currently refers to 'being of indeterminate sex', which is a term that is offensive to many people with variations of sex characteristics as it reinforces a myth that they are a 'third gender'.

QC recommends expanding the protected attributes referred to in the Anti-Discrimination Act 1991 (Qld) to specifically refer to, a person's sex characteristics, in support of recommendations from



Intersex Human Rights Australia (IHRA) and their submission, in particular discrimination against people with innate variations of sex characteristics should start from a clean slate. A new attribute of 'sex characteristics' and other provisions should not inherit exemptions or regulations from prior versions of the Act.

QC supports all recommendations made by IHRA during this submission process.

## 5.2 Gender

QC is deeply concerned that the entirety of our LGBTIQ+, Sistergirl and Brotherboy communities are not currently covered by protections in Queensland. This is because of the narrow definition of 'gender identity' and 'sexuality' in The Act.

In particular, 'gender identity' under The Act has a binary definition of gender, [The Trevor Project, a survey conducted between Oct and Dec 2020] which excludes people who live outside the binary. A recent US study found that one in four young people who are LGBTIQ+ now identify as non-binary, and experiences of young people are likely to be similar in Australia [The Trevor Project online survey in the U.S.] This means that coverage for the youngest cohort of LGBTIQ+ Queenslanders is seriously lacking.

QC recommends expanding the definition of gender to include all genders, including gender diverse and non-binary status.

## 5.3 Gender identity

QC recommends expanding the protected attributes referred to in the Anti-Discrimination Act 1991 (Qld) to specifically refer to, a person's gender identity and gender expression, while also expanding the definition of gender identity to clearly include non-binary and gender diverse people.

QC supports IHRA in their submission to the definition of 'gender identity' amended to be in line with the Yogyakarta Principles (2007), or adopt the Queensland Public Health Act definition, which is based on international human rights principles:

- (1) Gender identity, of a person, is the person's internal and individual experience of gender, whether or not it corresponds with the sex assigned to the person at birth.
- (2) Without limiting subsection (1), the gender identity, of a person, includes—
  - (a) the person's personal sense of the body; and
  - (b) if freely chosen modification of the person's bodily appearance or functions by medical, surgical or other means; and
  - (c) other expressions of the person's gender, including name, dress, speech and behaviour. [Ref 9. Queensland Public Health Act 2005].

## 5.4 Sexuality

Sexuality as defined in The Act is also confined to 'heterosexuality, bisexuality or homosexuality' which does not reflect the full spectrum of sexual orientation and expression.

QC recommends expanding the protected attributes referred to in the Anti-Discrimination Act 1991 (Qld) to specifically refer to a person's sexual expression, including all identities, or adopting the

Queensland Public Health Act definition of sexual orientation that is based on international human rights principles:

Sexual orientation, of a person, means the person's capacity for emotional, affectional and sexual attraction to, and intimate and sexual relations with, persons of a different gender, the same gender or more than 1 gender. [Ref 9. Queensland Public Health Act 2005].

### 5.5 Combined grounds

Our communities are telling us that they experience discrimination because of a combination of attributes, such as if they are living with a disability and are gay, or because of their diverse bodies and gender identity for example. Sometimes it is hard for people to say if it was their 'sexuality' or 'race' alone that caused the poor treatment. This is sometimes called 'intersectional discrimination'.

Our communities tell us overwhelmingly that discrimination should be considered on combined grounds. QC recommends The Act include discrimination based on combined grounds, because our communities are telling us they are experiencing discrimination based on a combination of attributes.

### 5.6 Complaints

QC recommends introducing the power for organisations or bodies to make complaints on behalf of someone being discriminated against. Our communities have identified barriers to making complaints to the commission and this will assist in helping address discrimination for our communities.

### 5.7 Positive duty

QC recommends introducing positive duty, for organisations to take reasonable and proportionate measures to eliminate discrimination and sexual harassment, as well as vilification, and where an organisation or employer are required to do everything in their power not to discriminate, whether they have a complaint or not. Our communities have told us stories where they feel they may be discriminated against in different settings, as this will assist our communities to feel more secure at their workplaces, services and organisations that they attend.

We support Queensland Positive People (QPP)'s submission where it says, 'The inclusion of a positive duty within the Act will provide an opportunity for employers and service providers to educate themselves about impairment discrimination within their organisations.'

### 5.8 Exemptions

QC does not recommend exemptions to religious bodies, beliefs or groups from The Act. QC believes that one person's rights should not be prioritised over anyone else. Our communities are concerned they may continue to be discriminated against if there are exemptions to discriminate.

QC does not support sport-based exemptions and believes a person's ability to participate in sport should be encouraged and equal. QC believes more consultation is needed with our communities for this topic.

### 5.9 Working with children

QC recommends removing exemptions relating to people who identify as transgender and intersex working with children and creates harmful stereotypes and in some cases our communities tell us

creates a space for further discrimination towards them. Some of our communities tell us that this creates fear of losing their jobs, perpetuates anxiety and depression.

### 5.10 Assisted reproductive technology

QC is concerned about stories from our communities about discrimination to people who are offered In vitro fertilization (IVF) and artificial insemination, based on sexuality or relationship status. Our communities recall stories of discrimination based on this and other status, such as those in diverse relationships, with diverse bodies and associations with their families and chosen families. QC recommends removing exemptions that discriminate against people based on their gender, sexuality, gender identity and sex characteristics when accessing all assisted reproductive technology.

### 5.11 People living with HIV

QC recommends expanding protected attributes to those referred to in the Anti-Discrimination Act 1991 (Qld) to specifically refer to a person's HIV/AIDS status.

We support QPP in their submission that neither the term impairment nor disability were deemed appropriate for PLHIV.

Further to that, we support the terms that are more appropriate for PLHIV include: 'a person living with HIV'; 'a person living with a Blood Borne Virus (BBV)'; and 'a person living with a chronic health condition.'

We support QPP's recommendation that if the term 'impairment' is replaced with 'disability' that HIV be categorised under a separate attribute such as those recommended above. Alternatively, if the term 'impairment' is to remain, that the definition of impairment includes 'a person living with HIV' or 'a person living with a BBV'.

QC supports all recommendations made by QPP during this submission process.

### 5.12 Sex workers

Our communities have spoken to us about a number of different settings that affect them, their safety, their rights and their overall wellbeing. QC is concerned about the rights of sex workers and their safety, rights, health and wellbeing, in particular those who are transgender, gender diverse, non-binary and people who identify as women. Some of these settings make it possible to discriminate and remove safety, such as accommodation. From a recent survey Respect Inc. Conducted, it found that 72.5% of sex workers experienced discrimination and a further 14.2% were not sure if their experience would count as discrimination [ref. Respect. Inc survey 2022].

From the Respect Inc. Discrimination survey, 95% of people surveyed agreed that repeal of accommodation discrimination was very important. For this reason, QC supports Respect and our communities in the repeal of the exemption for sex worker accommodation.

QC supports Respect Inc. In their submission to the protected attribute to change from 'lawful sexual activity' to both 'sex worker' and 'sex work' in order to protect sex workers in status and in practice.

Further to that QC supports Respect Inc. in their submission to the attributes to include protections for 'someone assumed to be a sex worker', and 'associates, past, present and assumed'.

QC supports Respect in removing barriers to making complaints, such as anonymity, protection and financial barriers when accessing services like the Queensland Civil and Administrative Tribunal (QCAT) and protection from discrimination on the basis of their sex work criminal records.

QC supports all recommendations made by Respect Inc. during this submission process.

## **6. Conversations with our communities, key findings**

### **6.1 Discrimination**

The survey was completed anonymously by 74 respondents, with an average time of 45 minutes to complete. The respondents told us that 55 of them said discrimination happens in the workplace the most, 43 say in schools or universities and 46 told us that it occurs in a healthcare setting. Alarming 68% of people say they have experienced discrimination in the past 5 years, and 29% of respondents chose to share their responses with us.

### **6.2 Including more attributes**

Around half of respondents agree more attributes need to be added to the act to prohibit discrimination, and of those around 30% say 'gender' should be added. Around 30% of people believe that 'HIV' should be added to definitions of attributes in the act, with 55% agreeing sexuality should be added and around half believing the definition of sexuality in the Public Health Act should be updated. A vast majority (90%) of respondents say that gender should be included as an attribute, and 83% agreeing there should be an additional attribute around 'sex characteristics'.

### **6.3 Grounds of discrimination**

Respondents were asked about expunged homosexual convictions and whether there was a need for further protections, with 84% agreeing and 88% saying they think that discrimination should be considered on combined grounds.

### **6.4 Action**

83% of respondents say that the commission should have more powers to take action without a person having made a complaint to the commission, and 84% say that bodies and organisations should be included in positive duty to eliminate discrimination, sexual harassment and unfair conduct.

### **6.5 Exemptions**

Respondents were asked about exemptions, including religious exemptions, with 85% saying that they should not be able to discriminate when providing goods or services, 80% saying they should not be able to discriminate based on employers' belief and as high as 90% saying they should not be able to discriminate based on religious beliefs when providing accommodation. 64% combined respondents are unsure or believe that the sports exemption, which excludes people such as with a transgender background, from participating in sport, should be removed from the act.

## 7. Surveying LGBTIQ+ Sistergirl and Brotherboy communities & people living with HIV

### 7.1 Attributes

The survey includes questions about experiences of discrimination and how the laws could be improved in Queensland – but you don't need to know anything about what the law says now to be able to answer the survey.

You are welcome to answer all the questions, or only those relevant to you.

**Question 1:** Would you like to answer questions about?

#### Results:

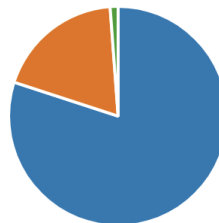
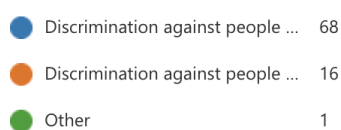
Discrimination against people who are LGBTIQ+ – 80%

Discrimination against people living with HIV – 19%

Other – 1%

Would you like to answer questions about?

[More Details](#)



### 7.2 Experiences in discrimination

The Queensland Human Rights Commission only receives a few complaints every year on the basis of gender identity, sexuality and lawful sexual activity. Nearly half of complaints are made on the basis of impairment discrimination (which includes HIV status). But we know that these complaints only represent some of the issues happening in our communities.

**Question 2:** What are the areas in which discrimination happens the most?

[Select the three most common]

#### Results:

Workplaces: 55

Schools or universities: 43

Shops and restaurants: 15

Health services: 46

Renting or holiday accommodation: 11

Government services: 17

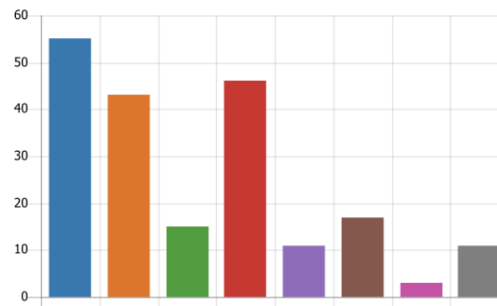
Council services: 3

Other: 11

[Select the three most common]

[More Details](#)

● Workplaces	55
● Schools or universities	43
● Shops and restaurants	15
● Health services	46
● Renting or holiday accommod...	11
● Government services	17
● Council services	3
● Other	11



**Question 3:** Have you experienced discrimination in the last 5 years?

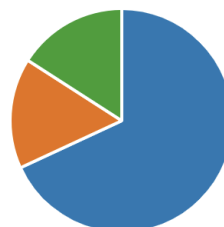
Yes: 68%

No: 16%

Unsure: 16%

[More Details](#)

● Yes	47
● No	11
● Unsure	11



**Question 4:** If yes, can you tell us a bit about your experience and the impact of discrimination or sexual harassment on you?

1 anonymous When my workplace hired a new manager, I discovered the hard way that she was homophobic. I hadn't intended on coming out, but my partner introduced himself as such, at which point she began to glare at me when she saw me and drastically cut my shifts. I ended up having to leave the position because she would not give me more than one shift a week after discovering I was gay.

2 anonymous I experienced discrimination in the form of outdated government policy while actively serving in the army. I was required to get a diagnosis for Gender Dysphoria by a psychiatrist to be recognized as transgender, and to legally change my name well before I was ready to be able to legally change my gender in the and to comply with policies that were non inclusive of trans people. One of my separating conditions they listed down to medically terminate my service was gender dysphoria. On IDAHOT day 2021, Defence Minister Peter Dutton made a statement prohibiting diversity gatherings of the LGBTIQ community within defence, which no other cultural, etc group was subject to. There is an extremely negative and toxic culture within veteran spaces that breeds hate and discrimination to the LGBTIQ community. This left me unable to continue serving

and had led to a diagnosis of borderline personality disorder, dysthymia anxiety disorder and last year lead to a suicide attempt in April.

3 anonymous As a person with chronic illness, I have experienced transphobia in medical settings. I had a GP who used inappropriate language. I have had to fill out forms where I have to tick a box for "Sex at birth". And I have experienced misgendering by nurses in a hospital after surgery. The impact is that I feel "othered" and my needs minimised. I have anxiety about meeting new doctors or specialists. I wonder if they treat me differently because they know I'm trans.

4 anonymous I had to move house due to a homophobic neighbour who made continuous complaints to council which required my partner and I to always "prove" we hadn't done anything wrong. Though we knew our gender and sexuality were the driving factors based on implicit gestures and behaviours, our neighbour didn't explicitly demonstrate this until one day we woke up to 3 pictures of a hand giving the middle finger painted in rainbow colours, pinned to the neighbour's lounge window directly facing our window. This was the final straw and we had to leave, sacrificing income while moving and the \$100k it costs to get a house ready to sell and moving costs at the moment (late 2021).

5 anonymous I've been spat on and urinated on by members of public, had rubbish thrown at me, been beaten and raped. Had security demand I leave while shopping for underwear and been told to leave restrooms, been told I'm a man and not allowed in the women's section. The funny part, I have hirsutism PCOS - I am very much a biological woman, people only assume I'm transgender and I am treated like dog poop for it. I have tried to take my life; my tendons are damaged in my wrists as a result, and I cannot hold anything for more than a few minutes without dropping it unintentionally. I have anxiety so bad I cannot even think about going to new or crowded places. All because of discrimination. I cannot work anymore after years of customers snide remarks and management abusing me by demanding I either wax my body and wear make-up every day or dress as a man. Every female doctor I've seen has told me I must wax or have hair removal if I want to be a woman (remember I'm xx a biological woman with hirsutism) I've had nurses change my gender marker in files and documents to match what they personally think my gender should be. I've been kicked out of a hospital after being raped by 7 men because I was upset (not angry or abusive just crying) the nurse said I was asking for it being a man in a dress, I was 17 years old. I've had police tell me it's my fault that I've been beaten and had rubbish thrown on me because they thought I looked like a cross dresser. Turned away by police after being raped when I was 17 because apparently, I was lying. Sent to mental health and put in a padded room at [REDACTED] hospital after attempting to run away from my x husband who was trying to kill me because he said I was making him gay, and the police sided with him and decided I was mentally ill because they thought I was confused about my gender.

6 anonymous Not discrimination, but definitely harassed on the grounds of my child's primary school by a grandparent who asked me who the other woman was that sometimes collects my kid when she was advised it was my kid's other mother. Her commentary was extremely distressing, although ignorant. I notified the school and suggested resources for kids about diverse families.

7 anonymous Having to have meetings to talk about my complaint- very traumatic.

8 anonymous Discrimination every second time I leave the house.



9 anonymous The experience was traumatic, and the impacts were broad. The impacts included self-isolation, fear of engagement in public, increased anxiety and this impacted my finance, which then impacted paying my rent. And then I have to prove that I am being discriminated against because of race and identity.

10 anonymous In trying to make our forms more diverse, a colleague said 'I'm sick of all this PC crap'... It has made me feel uncomfortable to come out at work and be my authentic self

11 anonymous Medical - my surgeon for my hysterectomy made disparaging comments about lesbians using dildos on my check-up. I had the surgery because of endometriosis and was too terrified to even think about sex. His remarks made me feel awful and angry. And afraid.

12 anonymous Being a queer migrant woman, the instances that come to mind first are those during the marriage equality debate. The amount of hatred I heard daily when all we wanted was to be treated equally is very traumatising. I was attacked on the basis of who I love, how my family is seen, just by being in the minority, etc, questioning my ability as a parent... I still live with those scars.

13 anonymous Misogyny and discrimination against sexuality

14 anonymous in clothing stores, shoes hop stores under ware shops I just never went back to them again

15 anonymous Was sexually assaulted and the police brushed it off and made it out to be a joke due to myself being Bi

16 anonymous Filling out registration forms at GP clinic to get child's COVID immunisation. Mother and father listed as NOK, rather than a simple fix like Name and relationship which would make the forms relevant to more families and not make me out myself and my child as a different family structure all the time

17 anonymous Assuming I was straight. Discomfort and less friendly tones and actions when I said I was not. In a workplace. I was also sexually harassed by the male owner of an [REDACTED] that I worked in (only staff was me, him and his wife who bullied me). During that time, he made crude comments consistently about women's bodies and female customers. When I expressed a liking for one artist's work, he said that the artist "made your pussy wet". He mimed someone having sex with someone else from behind in front of me and the 15-year-old work experience female student from the local school. I reported this to the Office of Human Rights however to move forward with my complaint, I had to relinquish my anonymity in order for them to be disciplined or alerted to their behaviour. I live in regional Victoria, and I know that if he knew I had made that complaint, I would be gossiped about to the whole of Victorian and interstate art scene, including high end public galleries and my career would be severely jeopardised anyway, but especially in my hometown and region. Local councils would also relate my name to this. I see what happens to women and queer people when something like this happens and they get blamed, the perpetrator doesn't. I would be ruined in an industry which I have a Master's degree in and which I still have a \$55K HECS debt for. My only other alternative in continuing with the complaint was to stay anonymous but then the complaint would be logged but he would never know I had made a complaint about it, and it would only become a concern if someone else complained in future. None of this would stop him harassing me or anyone else in the future obviously and he

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would create consequences for me if I tried to stop him. Ultimately, I dropped the complaint and did nothing and quit working in the arts industry.

18 anonymous Anti-LGBT psychiatrist being suggestive of conversion therapy methods. This was before it became illegal.

19 anonymous It's made me very self-aware and hyper aware of my surroundings whenever I am out on my own.

20 anonymous When working in a university society, I found that my male Social Officer took issue with how I ran the club and used that to talk incorrectly about me to other members, which he also repeated about a few, strong female friends of mine. It felt that it was purely on the fact that I was a woman in a position of power. I also was sexually harassed by my manager's fiancée.

21 anonymous I was told I should be put in a concentration camp for being LGBT, among many other things. My parents told me I was wrong. I hear discrimination aimed at customers at work; my colleagues don't know that they are also talking about me. I don't feel safe sharing my gender with people. My openly trans friends get called slurs down the street, they get deadnamed, they get physically and sexually harassed and intimidated. It scares me. I developed anxiety.

22 anonymous Denied job interviews on the basis of my gender identity and being transgender. This has kept me unemployed for longer struggling with bills. And struggling with affording to transition safely.

23 anonymous When I was suicidal and self-harming, at university away from all my family and friends. I tried to reach out to a mental health service, and someone told me that using they/them pronouns was offensive to the LGBTQ+ community and that I could not expect the staff to use the correct pronouns. During that time, I was also having my identity ignored by fellow students and teachers. It denied me access to the help I needed and made me feel even more isolated. My self-harming continued to get worse and eventually I dropped out of uni. Before this, while in high school, I attempted to start up a GSA of sorts. And got told by the school it wasn't allowed, it was safe to be ourselves during recess (and therefore not needed), and that I was not allowed to push further. I had not felt safe or connected to my community at that school. I felt surrounded by those not like me and afraid. Alone. The only thing that kept me pushing was that uni would be better. And, well, that didn't turn out well. After leaving uni, I sought help and experienced having to explain my identity over and over again to doctors and therapists. I had doctors assume I thought I was multiple people or insist that I was genderfluid despite having explained multiple times that I was not. I had therapists ask invasive questions about my transition and sexuality when it didn't relate to the conversation or help, I was looking for. I tried to get help to stop my periods as they were causing me dysphoria and had to explain trans hormone replacement therapy. I was then constantly misgendered and assumed to be dating a man with a penis. I had shaved hair and wore pride pins everywhere I went. To this day, I don't understand how someone thought I was a cisgender heterosexual girl dating a man. And the possibility of it being on purpose isn't non-existent. I was also not told how much the procedure I had would cost or given more than one alternative option. Which I don't think is from my gender or sexuality, but it added to the negative experience. I have since tried to have the procedure reversed and experienced more misgendering. To the point that I almost attempted suicide. Almost every GP I have seen for help with my mental

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health or pain I'm in, has misgendered me or invalidated my identity in some way. Leaving me hesitant to go to the doctor, and in the past more willing to attempt suicide than risk the experience being bad.

24 anonymous I have been judged for being trans - stares, misgendering, slurs. It has made me less likely to be outside and social.

25 anonymous I regularly experience discrimination and bullying because of my sexuality. Perpetrators have included my school (systematic, calculated, deliberate discrimination and bullying from teachers and the school administration), employers, colleagues' strangers, clients. The effect has been devastating and nearly lethal damage to my mental health and self-esteem.

26 anonymous My partner and I were targeted by a neighbour with ongoing nightly verbal abuse outside our home including threats to burn us down, vandalism with hate symbols, harassment at my partner's workplace, it was almost impossible to get the [REDACTED] Police to take it seriously. Once the harassment followed my partner to her workplace, we decided to take out a Peace and Good Behaviour Order. Her workplace passed security footage of the incident at her work, and they promised to create an incident report number we could use when applying for our Order. [REDACTED] Police then stonewalled us for a month, kept passing it off as needing to speak to a particular officer, who was never on the shifts they said he would be / never return our calls. The day before the court case, we went down to the station and begged them to provide us with the incident report number - we were told there was no incident report and they have lost the security footage. After that, the abuse continued for 3 years - when the harasser was in our yard one night screaming and yelling, we called 000. The police did not attend. We were entirely unprotected until another neighbour (not LGBTIQ) got sick of listening to the abuse and made a complaint. [REDACTED] Police started to respond and were then instrumental in getting the person evicted. The only difference between us as the targets for abuse and the neighbour complainant was that we were LGBTQ, and they were not. They got service for being upset at witnessing the abuse happening to us. We could not get service for the actual abuse at all.

27 anonymous Was in the workplace. My line manager was professional and friendly, she was then asked if she was gay and refused to speak to me. It made working under her impossible. When I asked her about it, she said that it was the easiest way to deal with the situation - to ignore me and reduce and contact within the staffroom or any other location, rather than confront the issue of her being asked if she were gay. Investigation was undertaken and she denied any conversation or behaviour towards me that would have been deemed homophobic. It was my word against hers. No proof = Insufficient evidence. I transferred school as soon as possible. This had a massive impact on me emotionally and psychologically. It caused physical reactions and I still have difficulty sleeping.

28 anonymous I was refused a job on the basis of my sexual orientation

29 anonymous Just a lot of people laughing and shit, very common to be vilified in public. Lot of people sexual harass trans people due to them being trans, e.g., assumptions of trans people being inherently sluts or some crap

30 anonymous In terms of discrimination usually it wasn't too big, but I was uncomfortable. People side eyeing me and my feelings being dismissed by people I trust when I spoke about

discrimination. Sexual harassment happened to me by someone at work who work just let them get away with it and didn't do anything about it. They creeped everyone out regardless of who you were.

31 anonymous Against my religion and medical choices

32 anonymous Experiences. In most cases it is constant and minor, a constant dripping that wears you down but no single incident bad enough where any action would be taken on a complaint. It's having them cite cost as a reason to not change a system they created without input that makes your life hell. In a pretty staggering instance, it was mental health acute care, telling me to "suck it up" while I was in suicidal distress because I was talking about trans issues. It's sitting down in an intake session unrelated to being trans, but having the nurse consistently bring up past transgender clients and misgender them before she tells you all their horrific opinions on transgender children. It's being afraid to go to the emergency department at hospital because of all the past mistreatment there, weighing up whether the symptoms are bad enough to risk the inevitable psychic damage of such a hostile environment. It's being openly harassed on the street in broad daylight in front of other people and nobody else bats an eye. It's having proposed legal action being determined not worth it due to the cost. There is nothing I could have done differently. I was powerless and alone as others determined what was "best" or even worth doing. It almost killed me. I cannot trust any emergency service in Queensland to actually help and support me. I know that if I ask for help, I will only get harmed.

33 anonymous Jokes made in the workplace at me for being a gay man (people putting on feminine voices at me). My boss only seems to seek females to employ. I am the only male manager in the region and see no effort from her to diversify. A member of staff complained to her that you clearly need to be female to get anywhere. Rather than deal with that, my boss transferred him to me saying he will work better with a male manager. At times when I have been mocked for my gay voice or reference is made that I am the 'token male' at work, it makes me feel upset that I am in a position I can't do anything about because my boss will always make it about something else and cite development is needed and leaves it up to me to fix. I just learn to ignore it now so I can keep going as unemployment would be worse.

34 anonymous Multiple times because I'm trans, non-binary. Harassment because of the clothes that I wear and how I look and sound, and discrimination because of the lack of access to appropriate bathrooms in public spaces (which I manage, but it's still difficult).

35 anonymous A lot of discrimination occurs online as these spaces and social media platforms provide a space for people to be their true selves. You can be out as LGBTQI+, or other minority group, without the need for showing your face, or only showing your face to a select few like you. I have friends in online spaces who are closeted LGBTQI+ (with one in particular who is pagan) in real life due to the fascist beliefs their immediate circle has (family, community members, colleagues). This hiding is also utilised by abusers. Humans naturally dislike face to face confrontation. Any psychology article can tell you that. Being behind a screen removes that discomfort, and a smart abuser won't display any information that can be used to trace the account back to their personal self. As such, this grants discriminators full reign to spew their hate without risk of consequence.

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36 anonymous Feeling like I had to hide who I am at uni, previously at high school, and also at work, takes a toll. Having to pretend everything is fine, that I'm 'normal' takes a toll, emotionally and mentally.

37 anonymous I was bullied in my previous work as I was too out supposedly as I would talk about my partner like everyone else the matter went to hr regarding one particular person, and she stated she was a non-practicing lesbian and my openly displaying my sexuality offended her and she felt bullied or pressured to come out the mediating was a waste of time and she got away with it.

38 anonymous Hearing people speak about LGBTQ people during the plebiscite and religious discrimination bill.

39 anonymous three times by senior management in education of children. All very serious, all required change of school. Once the police were called on us as parents. Our cat was murdered by a neighbour due to our sexuality. Once by a dog breeder refused to sell a pup. Refused treatment medically based on sexuality. Not seen by specialists due to sexuality. Colleague stopped speaking to me for three months on finding out my sexuality. I became increasingly withdrawn, sad and isolated. The isolation effected professional development and safety of my work without collegial support. I lost confidence and developed a form of PTSD against the "universe and humanity". Almost no one was able to endorse any of these experiences. Those who can clearly see the severity of this treatment have left. The denial from everyone was further isolating and saddening.

40 anonymous Can't have a birth certificate that reflects my gender without invasive surgery. GP denied service because he 'felt uncomfortable' when I commenced my hormone therapy. Health professional at hospital purposefully misgendered me, using my dead name, when asked not to.

41 anonymous My partner and I were abused by a carload of young men as we walked back to the hotel, we were staying in Brisbane CBD. We had been to my nephew' engagement party, so we were well-dressed. The young men drive alongside us and repeatedly screamed fucking faggots'.

42 anonymous Early in m2f transition it was difficult to be taken seriously as a person in everyday life inc. services in shops, private and public facilities, transport, automotive services (inc. fuel) and public ridicule was at every step. Although today I 'pass' much better, that very notion (needing to pass) is a loud indicator of societies ongoing fixation on gender binary. Now I am undertaking name and gender change, both the process of, and post-processing of institutions accounts is unnecessarily difficult. I am again viewed as a 'freak', and it is happening all over again. This feeds my gender dysphoria in ways that have negative impacts on my mental, physical and spiritual health.

43 anonymous I have been rejected from income protection insurance and a home loan

44 anonymous I have felt unsafe and unwelcome, I have felt that my very existence is up for debate and that other people have a "right" to tell me who I am or how I should feel about things. Even when bringing my concerns up or reporting instances of harassment I have felt "othered" or made to feel that I am "lees than" others.

45 anonymous I live with complex disabilities that include functional impacts from complex trauma, eating disorders, systemic lupus, sjogrens, arthritis, and these conditions cause debilitating,

disabling and life-threatening chronic illness. I own an apartment in [REDACTED]. I have experienced horrific bullying, defamation, and discrimination from the body corporate manager, committee and building manager. I have engaged in self resolution processes constructively, and engaged lawyers to provide advice on the building, compliance and cultural issues. I have lodged motions, all rejected. Because of my disabilities and my non binary status, these people have treated me differently from other owners and residents in the building and used these attributes to defame me and discredit the advice from leading lawyers, engineers, builders, waterproofing experts, fire safety, WHS experts, building and strata compliance and management specialists - costs I have borne myself to help our strata community to make our building and homes safe. I cannot use the common property. I am subjected to ridicule and verbal abuse, threats of physical assault, defamation, public harassment, stalking, breaches of by-laws but no foundation or evidence that supports breach notices. My home has been damaged by water ingress and negligent works commissioned by the body corporate and building management scheme. This damage and the distress, financial and emotional burdens have caused me to feel unsafe in my own home, suicidal, physically at risk, increased disability and my privacy and emotional well-being violated. I have been denied access to medical care which has resulted in further decline in my condition, emergency surgeries, emergency admissions, increased disability, crisis, severe medical and chronic illness trauma now (on top of cptsd and ptsd) and crisis fatigue, loss of services and supports from the NDIS and community services. I have been house bound and isolated for the past decade. I am struggling to get safe consistent support now that I have lost supports under my NDIS plan because I disclosed my non binary and bisexual status last year for the purposes of forms to be completed. A new ssc and OT changed their behaviour towards me, were degrading and abusive, I suffered neglect and offensive comments were made about me. They made defamatory reports to the NDIS and my plan has now been impacted. I am too traumatised to go on and file a complaint, to correct the record or seek to even engage with anyone now.

46 anonymous My child who identifies as gender fluid was not able to express their gender fluidity at their school. The principal stated that the school was unable to 'journey with us'. It was made clear that no concessions would be made to accept my child's preferred name, pronouns or amenities needs.



**Question 5:** Do you have anything about own experience of discrimination, sexual harassment and/or unfair treatment that you would like to share?

1 anonymous As someone with chronic illness and disability I already feel vulnerable. But I also have a lot of fear for my future as a trans person with medical needs. I would rather take my own life than end up in a care facility where I was daily discriminated against.



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- 2 anonymous As above
- 3 anonymous As above
- 4 anonymous I struggled to be heard in the Family Court as a fit and safe parent to my 3 children, with my ex-husbands Barrister using my sexuality against me.
- 5 anonymous I feel like I have enough confidence and support to recover from hurtful experiences based on my sexuality, but I'd rather not go through the hurtful experiences... Life is tough enough and many people aren't as ok as me after these negative experiences.
- 6 anonymous Intersex Status often challenged by doctors, even after Internal exam. After they have felt up the labia and vagina within my anus.
- 7 anonymous The hardest part was that the manager didn't address it, despite me telling her how it made feel!
- 8 anonymous My director at a university was fascinated by me being a lesbian and simultaneously expecting me to remain in the closet. He escalated by inappropriate touching, kissing and making threats about my tenure chances. When I got tenure, I made a complaint against him. Though he's retired he continues to stalk me. The religious discrimination bill will only support people like him in getting away with their harassment
- 9 anonymous I have been fortunate to not receive a lot of discrimination throughout my transition, however, I pass fairly well, and for those not as fortunate, it could be more difficult.
- 10 anonymous Getting a psychiatrist report from a straight guy who vented out in his report who discriminated about a gay man. Got a second report from a gay Psychiatrist who didn't discriminate against.
- 11 anonymous n/a
- 12 anonymous I work with a transwoman who has only felt comfortable to affirm their gender after 7 years in the same workplace
- 13 anonymous Police not doing taking harassment, sexual assaults, abuse etc seriously
- 14 anonymous When I came out to my mum, which took a very long time... she is catholic, she won't accept it, nor my partner. We have two children and have gone down every legal route to make sure all her rights are protected as my partner and mother of our children. We have also done this to protect our family as much as we can in light of laws.
- 15 anonymous It depletes your sense of self every time
- 16 anonymous The psychiatrist I saw had an impact on my mental health: 1. Trying to diagnose me with OCD to deflect any gender affirming treatment 2. He told my parent that my trans identity was her fault as he thinks I became trans through bad parenting to fit his weird transphobic narrative/theory of why I am trans. 3. He told me how he is traditional by inserting his own personal beliefs into the mix which has nothing to do with his job or to provide care 4. On another appointment he thinks I could be intersex, suggesting what would happen if he had found out



(mentions of surgery) 5. Saying I might have low testosterone and was being suggestive of conversion therapy methods which after the appointment I was nearly driven to suicide.

17 anonymous At my previous job (2019) I had a male colleague tell me a mutual client had made comments about my breasts. He thought it was funny and was laughing a bit as he told me. He made me extremely uncomfortable. This has not been the only incident in the last 5 years.

18 anonymous I reported my own case of sexual assault and found that the result was inconclusive as determined by lawyers. To me, it made me feel I created a huge mess, that didn't end up getting resolved and left me feeling more down about having to go through the whole process.

19 anonymous I just want to be able to exist without fearing people won't understand. Intrusive questions at health appointments about my sex life are some of the worst, it seems there's never a right answer. You never know whether the doctor will understand or know what to do with you.

20 anonymous Transitioning has certainly had its fair share of unwarranted harassment from former friends and family. Its left me feeling isolated and alone. Getting denied jobs and being explicitly told it was because, I am transgender, makes me feel more isolated and alone from society in general.

21 anonymous Telling a student that they cannot start and run a support group for vulnerable people, tells that student that they are not welcome. Insisting that someone's pronouns are offensive and will not be used (especially when singular they/them is a pronoun set that has been used in the English language for centuries), tells that person that they cannot exist in this world and be themselves at the same time. Medical discrimination and ignorance are appalling and should be taken more seriously. I should never have been made to feel so alone and unwelcome in this world while seeking mental health assistance and support. And I consider myself lucky. I consider my experiences to be mild. And I still almost lost my life due to them.

22 anonymous Back at school I was bullied over being a lesbian from grade 9 till I left school. The more recent incident I described above brought a lot of that back. The school was not responsive either, only when the bullies targeted my friends, who reported it to the school counsellor. She called me in and blamed me for "getting my friends labelled" because I'd been open about my sexual orientation

23 anonymous I am happy to share my story.

24 anonymous I think there's a big culture issue at my work where some of the people there would go online and say the most disgustingly hateful stuff or at workday and do things to make people uncomfortable. And that was either from people at work (higher up's) not knowing how to deal with the issue or not caring enough to deal with the issue or both.

25 anonymous None.

26 anonymous QLD would be a lot better if it recognised my gender. Because it doesn't, it means that I worry all the time about what will happen when I die, and I am easily misgendered by the state. I also worry about what happens when I go into hospitals and in aged care for the same reason (though it'll directly affect me more, obviously). Not having my gender marker available to

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me legally poses massive problems and results in discrimination (like the issue of bathrooms) but it also means that I am constantly misgendered. The fact that the ADA prohibits discrimination on the basis of gender identity is ridiculous when the state itself does most of this discrimination.

27 anonymous In the real world, I've had to travel to Brisbane from the Fraser Coast to see trans friendly medical specialists willing to treat and manage my disability. This is because one local specialist straight out refused to see me on the grounds of being trans, and another one couldn't be done with me quick enough, literally saying they couldn't help me after squeezing enough money out of me for some rudimentary tests. Online, I've had people tell me I'm going to hell for "disfiguring the body God gave me" and have had multiple people tell me I'm mentally ill and that all the psychologists/psychiatrists I've seen (a minimum of FIVE) shouldn't have their jobs because they're "enabling me". I even had one fool compare being transgender (and guiding questioning people) to encouraging anorexia.

28 anonymous I am 'straight passing' and feel that protects me

29 anonymous The history of powerful police with extra judicial violence, and spurious laws to "trip people up", [REDACTED]. In means the ultimate cost of a life is never entirely out of one's mind. The level of paranoia increases with each incident. Professionally the management were terribly homophobic in a number of workplaces (not all, some were excellent) so

30 anonymous The previous experiences made me feel less important and degraded.

31 anonymous Discrimination in the provision of services or in the workplace is often based on baseless assumptions. For instance, I was refused a rental property, after the agent asked enough questions to establish, I was gay, on the basis that a 'family' would care for the property better. I was told that I had come first in order-of-merit in a selection process for promotion, but that the position would be given to the second placed candidate, as they had a family and needed the money more. At that time, my partner and I were primary carers for one of his sister's children, we really could've done with the money, but I guess we didn't for the stereo you of what makes a 'family'.

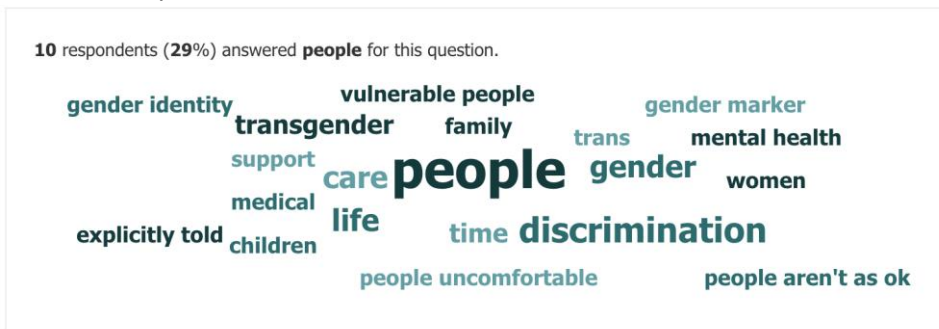
32 anonymous To add: Particularly in the health sector where Medicare is involved, some providers insist on using 'Deadname' when calling in waiting rooms, appointment setting and other references until Medicare records eventually match my person. Very few will actually use a Preferred Name. This is not ok and again feeds all the negative dysphoria issues for me and public perceptions about Trans folks. Sourcing truly LGBTIQ+ 'friendly' medical services is very difficult broadly. Finding a GP who could understand or even be bothered caring for differences in Cis and Trans health matters is scarce. Being on HRT as Trans woman for example is an alien concept to many GP's who simply refuse care on the basis they do not know (and not prepared to learn). This is compounded in remote and regional areas (e.g., In my population area of 170k people, I have located 2 only knowledgeable GPs and that is after inquiring within the health care sector !!). Getting onto their limited patient list (books) is problematic due to provider shortages. Whilst I am now (in passing as a woman) treated well by most front-line staff, organizational processes behind the scenes are appalling. Examples are forms and processes offering only 2 gender options, salutations based on age, Photo ID required on accounts where transactions are only ever online (bizarre) and (as mentioned before), refusal to use/acknowledge/provide for preferred name over 'Deadnames'. I respect the legal requirements but not the processes beyond that. A huge issue for Transgender folks is the No Access to GRS on the public system. As a person who has and pays taxes in this

country, I can receive very little support on gender related medical services when compared to cis folks. The divide is huge and seems little real movement to level that. This is discrimination at the lowest level of all - base health care!!

33 anonymous I have had situations where I have felt unsafe to present as my gender due to fear of being harassed, abused, and/or made subject to violence. I have been made to feel that my gender means that I have a mental illness or that I am a threat to others, particularly women and children. This characterisation is wrong and damaging. Transgender people are disproportionately more likely to be victims of violence themselves than perpetrators yet the commonly held and promoted beliefs are the opposite.

34 anonymous As above

35 anonymous See above



### 7.3 Attributes

There are currently 16 protected attributes under the Anti-Discrimination Act. If a person is treated badly but it is not because of a protected attribute, then it isn't discrimination according to the law.

The Act prohibits discrimination based on the following attributes:

Sex

Relationship status

Pregnancy

Breastfeeding

Age

Race

Impairment

Religious belief or religious activity

Political belief or activity

Trade union activity

Lawful sexual activity

Gender identity

Sexuality

Family responsibilities

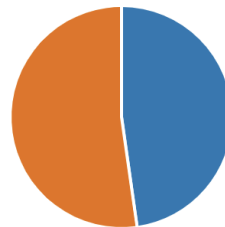
Association with, or relation to, a person identified on the basis of any of the above attributes.

**Question 6:** Do you think there are other attributes that should be protected in the Anti-Discrimination Act?

Yes: 48%

No: 52%

[More Details](#)



**Question 7:** If yes, which attribute would you add and why?

- 1 anonymous 1. Perception that a person is a member of one of the above groups.
- 2 anonymous Intersex. Because It's not an impairment and it's not a gender identity or a sex. It is various conditions that make someone appear to be a mix of genders naturally. They could be XX, XXY's etc. Or they might be like me, hormones gone haywire and now I have low SHBG and high testosterone leading to hirsutism and me looking like a man but being a woman.
- 3 anonymous sex characteristics
- 4 anonymous Cultural / First Nation Financial Emotional Employment Entertainment Homelessness Mental Health Students Disability (is different from impairment) Domestic Violence Child support Child Protection Legal Representation All of these because they are life aspects and need to be recognised as well.
- 5 anonymous Religious indifference/neutrality.
- 6 anonymous Intersex Status, there is a wave of class actions on the horizon which is going to cost each State of Australia Trillions of dollars.
- 7 anonymous Having no religious belief. Humanist belief. Neither atheism nor antitheism is a religious belief.
- 8 anonymous Disability and or cognitive difference (i.e., neurodiversity). Impairment is too vague

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- 9 anonymous Gender presentation, as this can often be incongruous with gender identity for many trans folks who haven't reached their ideal transition stage.
- 10 anonymous Physical & Mental Health
- 11 anonymous Sex Workers
- 12 anonymous HIV positive status
- 13 anonymous Taste in clothing Health status Gender Family planning / fertility treatment
- 14 anonymous Childlessness
- 15 anonymous Intersex status.
- 16 anonymous Physical appreciate attributes such as tattoos, body modification, hair colour, makeup/lack thereof and piercings (where there's no safety hazard). These attributes are something LGBT+ people use a lot to perform our gender and feel like ourselves, but many of us can't get these things because of conservative dress codes in workplaces even when it would not impact our work in any way.
- 17 anonymous Transness, intersex status.
- 18 anonymous Intersex people should also be protected though I'm unsure of what terminology they would prefer to describe. I think intersex people should be actively consulted about this
- 19 anonymous Health status - just because you have an underlying health concern doesn't mean you can't do your job.
- 20 anonymous It all seems pretty good but unless it says otherwise maybe more elaboration on impairment and to hopefully include people on all end's whether physical or mental. Also, class should be something on the list to not discriminate people based on upbringing or financial troubles from their class structure
- 21 anonymous Medical choices
- 22 anonymous Neurodiversity. Just as sexuality and gender was medicalised and attempts were made to eradicate or "fix" these differences, there are differences in the way our brain's function and experience the world that are pathologised, even if the issues are primarily from social causes and discrimination.
- 23 anonymous Organisations should be allowed to freely employ people (or not) dependent on their value system. For example, an independent Christian school that is founded upon specific beliefs should be freely allowed decline certain employees if their values do not align with the organisation. In essence this would dilute the premise and essence upon which the organisation is founded. Additionally, an Islamic school for example is most likely to hire employees who live, practice and express their Islamic faith.
- 24 anonymous On the basis of incarceration status.
- 25 anonymous Gender expression and diverse bodies

- 26 anonymous Different types of relationship status like poly
- 27 anonymous Ability to change gender through law without surgery.
- 28 anonymous Firstly, all many attributes need significant overhaul and/or community education as they are not applied or not applied correctly (e.g., Sexuality, gender, age, sex and others). To add: Mental Health conditions; Income levels; Social status.
- 29 anonymous Should specifically include psychosocial, intellectual, sensory, and physical disability, chronic illness and health conditions.



### 7.4 Definitions of attributes

Some of the definitions of attributes under the Anti-Discrimination Act have been around for up to 30 years. They may no longer reflect community understanding and expectations in some cases. Their Review is also looking at whether additional attributes should be protected.

#### Impairment

People who live with HIV are currently protected under the attribute of ‘impairment’. The words currently used in the law are:

“The presence in the body of organisms capable of causing illness or disease.”

#### Question 8: Should HIV status be separately protected under the Act?

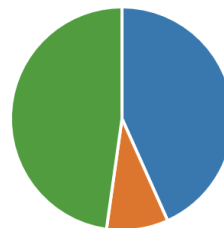
Yes: 43%

No: 9%

Unsure: 48%

[More Details](#)

<span style="color: blue;">●</span> Yes	29
<span style="color: orange;">●</span> No	6
<span style="color: green;">●</span> Unsure	32



#### Question 9: Why/why not?

Queensland Council for LGBTI Health

- 1 anonymous HIV carries with it a specific stigma and specific set of discriminations unique among other diseases.
- 2 anonymous Because, in first-world western society, HIV+ status is also associated with intravenous drug use and same-sex attraction. As both of these groups are vulnerable minorities anyone with HIV potentially has multiple layers of discrimination linked to their HIV status, especially when shared out-of-context or without consent.
- 3 anonymous Because it is an illness that can cause serious impairment and death.
- 4 anonymous HIV AIDS has been waiting 40 years for solid recognition. It is more than an impairment, it was, and can still be a death sentence, like Covid is. It has not been recognised as a major killer of 30 million folk worldwide. It has not been advanced like other diseases have been and it's time it was.
- 5 anonymous Or seems to be covered, and if it is, it seems ok. It seems different to other health conditions like obesity or diabetes.
- 6 anonymous HIV isn't an impairment
- 7 anonymous To protect against discrimination of persons HIV +
- 8 anonymous U=U
- 9 anonymous Would this then apply to Hep B being under the act? Unsure on this one.
- 10 anonymous Because I feel the specificity would make it clear that people with + HIV status cannot be discriminated against, but that is only a guess.
- 11 anonymous There's so much stigma around HIV. I can only imagine what people will face and how opinions will change if someone's status is found out. A lot of it is still seen as linked to the "homosexual lifestyle" so if that's the case then it should be protected if that's people's perception? I mean I know it's not the case but perceptions matter.
- 12 anonymous Just makes sense
- 13 anonymous Maybe included under a 'medical diagnosis' rather than impairment as impairment indicates a problem and a person living with HIV can be well managed and healthy with no functional impairment.
- 14 anonymous Public understanding of this virus and disease is based on media interpretation alone in most cases and media interpretations which are now over 35 years old. They are unaware of the reality and risk, and thus discriminate in a false sense of need to protect themselves or judge other people.
- 15 anonymous Because of the social stigma and negative associations which may impact LGBT people yet not exclusively. Ensuring some afforded protections that protect people with HIV would be helpful.
- 16 anonymous I don't know enough about the topic to make a judgement - for example are people with mental health conditions also classes under impairment? Maybe it should be considered an impairment, but not about an organism being present. But I'm unsure.



Queensland Council for LGBTI Health

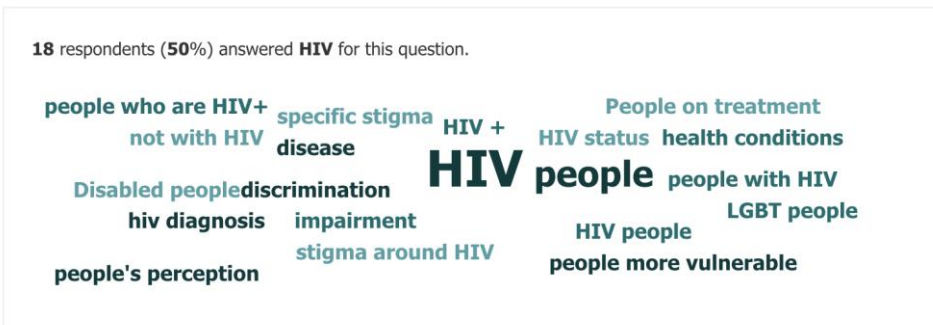
- 17 anonymous I don't know enough about HIV, but I believe they should be given more protections.
- 18 anonymous While I believe the statement used should be protected under the law, I also know that discrimination on HIV status itself has to do with more than that. I am unsure as I am not someone who is HIV positive and do not know enough about what they might want to make a choice either way.
- 19 anonymous To make it explicit
- 20 anonymous Because the discrimination that can occur alongside a HIV diagnosis is very specific to the stigma historically associated with HIV
- 21 anonymous In cases where the employee (HIV pos) is at high risk of injury there needs to be protection of the client as well as the employee to ensure that any fluid that is spilt in an accident does not infect another person.
- 22 anonymous There is still significant misunderstanding in the community about people who are HIV+
- 23 anonymous Should be protected but like, certain reasonable things like association or hiring should be outlined. It seems reasonable to discriminate against HIV people if it's in an industry where them having HIV would increase the likelihood of spread
- 24 anonymous Not too sure because I don't think I know enough to speak in HIV and people should be protected with it and especially if it falls under impairment.
- 25 anonymous It's covered already, but should be added as an 'including' measure.
- 26 anonymous Because people see it as something separate.
- 27 anonymous I'm unsure. HIV, as an autoimmune disease, is classified as a disability. I am disabled, but not with HIV. Disabled people already suffer enough discrimination, we're basically the bum end of the minority groups with even other minorities seeing us as less than human. Add on top of that the association with being LGBTQI+, the AIDS epidemic was literally called "The Gay Plague", and it's a nasty cocktail of ableism and homophobia. I suggest taking especial note of answers given by HIV positive responders.
- 28 anonymous Yes, due to it being something that is stigmatised, it's separate to a bigger class of medical issues
- 29 anonymous People living with HIV should be able to access understanding and specialised services such as when experiencing discrimination or possible discrimination
- 30 anonymous Sounds like it's covered so would need to understand the additional benefits to it being separate
- 31 anonymous Just in case
- 32 anonymous Because the statement is correct. Yes, the organism can be made undetectable by drug treatment but it is still there, it hasn't been eradicated.

33 anonymous I'm not sure if a separate category is required for HIV (any more than say, Corona Viruses) but absolutely the definition need updating, broadening and educated out to the community.

34 anonymous If on treatment health outcome are the same for someone without. People on treatment should be seen as not capable of causing illness or disease and cannot pass on the virus.

35 anonymous I don't not know enough about the specifics to have a relevant opinion.

36 anonymous Breach of privacy makes people more vulnerable to bullying, harassment, stigma, abuse, menacing and threatening behaviour, abuses of power, withdrawal or denial of treatment.



**Question 10:** Do you have any other suggestions about how people who live with HIV should be recognised by the law?

1 anonymous Those who live with HIV AIDS are folk who took cocktails of drugs, were guinea pigs to find an answer, a cure. The adverse effects have been long lasting and life altering. Many live a life of death. Look into this, please address this. Many lost so much more than just their health. Provide health and mental health services for these folk along with social interactive groups, support services, and recognition for their service to communities that followed.

2 anonymous Health status

3 anonymous No

4 anonymous PEP and PREP should be covered by Medicare, and be made available at all health services, not just GP and ED.

5 anonymous No

6 anonymous I think the covid pandemic has brought this back into the spotlight. PWHIV should not have to disclose their status, nor should it be a factor in visa/immigration applications

7 anonymous Like with most things' health related, privacy should be maintained, and people should be protected.

8 anonymous Blood donation should be allowed and all other applicable medical treatments for undetectable positive HIV people

- 9 anonymous None since I can only offer limited suggestions.
- 10 anonymous I don't know enough about the topic.
- 11 anonymous No
- 12 anonymous No.
- 13 anonymous I can't think of anymore at this time
- 14 anonymous Refer to answer in question 9
- 15 anonymous no
- 16 anonymous Their overall rights as a human ought be no different to any other human (this concept of course ought to apply to ALL people regardless) so Law Reform needs to look closely at areas where ambiguity (grey areas) and shortfall exist.
- 17 anonymous With treatment life expectancy is the same, WHY are we still treated like we are an insurance risk. This makes it harder to get loans and the fear stops people from moving forward in life
- 18 anonymous Recognise treatment and yes, we still have the virus but U=U
- 19 anonymous No
- 20 anonymous Like any other chronic illness and complex disability. We need to give investigative and stronger powers to the commission and make it easier for vulnerable people to lodge complaints rather than violating people's privacy more.



### 7.5 Sexuality

The words currently used in the law to explain sexuality are:

‘Heterosexuality, homosexuality or bisexuality.’

**Question 11:** Should the definition of sexuality change?

Yes: 75%

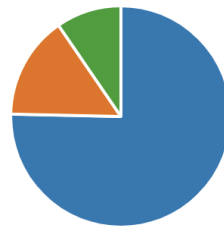
No: 15%

Unsure: 10%

[More Details](#)

 Insights

<span style="color: blue;">●</span> Yes	55
<span style="color: orange;">●</span> No	11
<span style="color: green;">●</span> Unsure	7



The Public Health Act in Queensland has a definition of sexual orientation that is based on international human rights principles:

Sexual orientation, of a person, means the person’s capacity for emotional, affectional and sexual attraction to, and intimate and sexual relations with, persons of a different gender, the same gender or more than 1 gender.

**Question 12:** Do you think that this definition of sexual orientation is appropriate?

Yes: 64%

No: 16%

Unsure: 19%

[More Details](#)

<span style="color: blue;">●</span> Yes	47
<span style="color: orange;">●</span> No	12
<span style="color: green;">●</span> Unsure	14



**Question 13:** do you have any other suggested wording?

- 1 anonymous This doesn't seem to cover asexuals. Also, instead of the long-winded description of the genders why not just say "with persons regardless of gender"?
- 2 anonymous To remove all the jargon at the end to simply state "... and/or intimate and sexual relations with another person". Adding an and/or includes asexual people whose sexuality is otherwise dismissed (if they do not have intimate or sexual relation), thus would currently exclude them from anti-discrimination protection
- 3 anonymous emotional, affectional OR sexual attraction to, OR intimate and sexual relations with, persons of a different gender, the same gender or more than 1 gender.
- 4 anonymous This does not fully represent Intersex folk, or Asexual folk. Please consult with Queensland Council for LGBTI Health for better wording.
- 5 anonymous Sexual orientation of a person means the person’s capacity for emotional, affectional, intimate, romantic and/or sexual attraction to people of any gender, many genders, one gender, or none.

- 6 anonymous As above but 'person's capacity for any combination of...' (as it reads above that orientation is all of these things where it's often an and/or situation)
- 7 anonymous What about asexuals for instance? Doesn't the above definition leave them out?
- 8 anonymous Sexuality definition should incorporate the word 'non binary' in terms of gender definition so as to embed the notion that gender is not binary.
- 9 anonymous Sexual orientation only covers a certain identity/attraction you could say sexual or romantic orientation or gender attraction to be fully comprehensive.
- 10 anonymous Sexual orientation, of a person, means the person's capacity for emotional, affectional and sexual attraction to, and intimate and sexual relations with other people, recognising that some people experience little to no sexual attraction but may still identify with an LGBT+ orientation. (E.g., being asexual is the A in LGBTQIA+, but they person may ALSO be gay/homoromantic)
- 11 anonymous Sexual orientation of a person means a person's emotional, affectional or sexual attraction, intimate or sexual relationship with another consenting person regardless of the gender or sexual identity of that person or persons.
- 12 anonymous Possibly trying to include lack of sexual attraction and romantic attraction
- 13 anonymous Sexual orientation, of a person, means the person's capacity, or lack thereof, for emotional, affectional and sexual attraction to, and intimate and sexual relations with, persons of a different gender, the same gender, more than 1 gender or lack thereof.
- 14 anonymous genders rather than gender.
- 15 anonymous I think this sounds better. "Sexual orientation, of a person, means the person's capacity for emotional, affectional and sexual attraction to, and intimate and sexual relations with, 1 or more persons of a different binary or non-binary gender, or the same gender." The original definition of "more than 1 gender" is too open to interpretation. Does it mean multiple genders as in multiple people? Or people identifying with multiple genders? My definition clears this up by specifying sexuality can include an attraction to one or more people. This is known as Polyamory, which there is still a lot of stigma surrounding. Polygamy and Polyamory are often mixed up. Polyamory is being in multiple relationships with different people, while polygamy is the act of marrying multiple people which is illegal due to the legal and financial benefits of marriage (it's essentially double dipping). Seeing as Polyamory has no legal benefits, polyamorous people should at least be protected under anti-discrimination laws. My second change of "a different binary or non-binary gender" is to overall simplify yet keep the definition specific. Gender falls under two umbrellas - the binary male/female, masculine/feminine identity, and non-binary "other" identity. Using colour as an analogy, the binary masculine/feminine is black and white, while non-binary is the spectrum of colour existing outside of those two shades. This benefits all as it includes ALL genders in the definition of sexuality
- 16 anonymous Need to mention non binary

17 anonymous more nuance in the description that doesn't seem to imply the exclusion of asexual/aromantic peoples

18 anonymous Hetero, homo and bi only excludes multiple other sexualities. It should be changed to reflect that spectrum

19 anonymous No, but it should include pansexual as there are people who are attracted to others on the basis of their personal qualities unrelated to their gender.

20 anonymous Closer consider (and possible word changes) to cater for folks on the Asexual spectrum, Non-Binary and Intersex. Polling these folks will yield more acceptable alterations to definition.



## 7.6 Gender identity

The words currently used in the law to explain gender identity are:

‘A person who seeks to live as a member of the opposite sex.’

This definition of gender identity only protects binary trans people, and not gender diverse people, and does not clearly include gender expression.

**Question 14:** Should the definition of gender identity change?

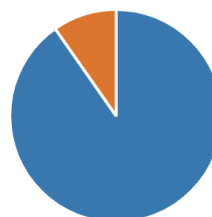
Yes: 90%

No: 10%

Unsure: 0%

[More Details](#)

Yes	65
No	7
Unsure	0



The Public Health Act in Queensland has a definition of gender identity that is based on international human rights principles:

(1) Gender identity, of a person, is the person’s internal and individual experience of gender, whether or not it corresponds with the sex assigned to the person at birth.

(2) Without limiting subsection (1), the gender identity, of a person, includes—

(a) the person’s personal sense of the body; and

(b) if freely chosen modification of the person’s bodily appearance or functions by medical, surgical or other means; and

(c) other expressions of the person’s gender, including name, dress, speech and behaviour.

**Question 15:** Do you think that this definition of gender identity is appropriate?

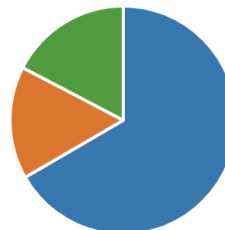
Yes: 67%

No: 16%

Unsure: 17%

[More Details](#)

● Yes	46
● No	11
● Unsure	12



**Question 16:** Do you have any other suggested wording?

1 anonymous It needs to explicitly state that it includes gender identities outside the binary of male or female

2 anonymous Please consult with Queensland Council for LGBTI Health for more correct wording.

3 anonymous It may need to include something about a lack of expression of a gender identity.

4 anonymous (1) Gender identity, of a person, is the person’s internal and individual experience of gender, whether or not it corresponds with the sex assigned to the person at birth. (2) Without limiting subsection (1), the gender identity, of a person, DOES NOT include— (a) the person’s personal sense of the body; and (b) other expressions of the person’s gender, including name, dress, speech and behaviour. (3) Gender Identity can be confirmed, if freely chosen, to the modification of the person’s bodily appearance or functions by medical, surgical or other means- (a) from a time deemed appropriate by suitably qualified medical professionals, such as Endocrinologists, or GPs with relevant experience. (b) Such decisions should not be made by Paediatricians who have a conflict of interest. (c) Courts of law should not have the power to determine the minimum age individual treatments are applicable to individuals, due to stigmatisation and lack of experience. (4) Media should be censored from debating these questions,



which is equivalent to discussing if Jews should be interned in concentration camps. Media and Politicians debating these issues is a serious abuse of Human Rights.

5 anonymous Include reference to one's experience of gender having capacity for changes

6 anonymous I think some inclusion of gender fluidity or non-binary expression needs to be spelled out. I am non-binary/gender fluid but present mostly as female

7 anonymous Incorporate the word 'non binary' in terms of gender definition so as to embed the notion that gender is not binary.

8 anonymous No that's pretty good definition on 15.

9 anonymous No

10 anonymous Gender expression, without the gender identity not aligning with their sex/gender assigned at birth, should also be protected. For example, cisgender men who wear dresses should be protected under the Anti-discrimination Act as well. In other words, gender nonconforming people, cis, trans, or otherwise, should be protected against discrimination based on their gender expression.

11 anonymous be careful with "(b) if freely chosen—modification of the person's bodily appearance or functions by medical, surgical or other means; and" If someone wants their eyes removed idk if we should allow that in good conscience.

12 anonymous I can't think of anything right now, but this is otherwise a really good definition

13 anonymous Since our society is so entrenched in science, this should not move into a grey area that is feelings-dominated, but rather stick to sex assigned by chromosomes.

14 anonymous Scrap gender identity and stick to biological sex

15 anonymous The current wording does not comply with the further definition. It's ridiculous and open to bad interpretation. It currently says: 'A person who seeks to live as a member of the opposite sex.' - but sex and gender are different things (as identified by the Office) and so it should read: 'a gender not assigned at birth'.

16 anonymous The definition is to the point and allows little to no room for malicious interpretation. I love it.

17 anonymous Include that it can change over the course of a lifetime and not just a one-time eureka moment

18 anonymous It needs to include explicit acknowledgment that some people don't identify in a binary way and that gender identity can be fluid and change over time.

19 anonymous Whilst reasonable encompassing, boosting coverage of Gender Fluidity is required as all of the current defined elements should be acknowledged as not being fixed and may alter frequently, periodically or from time to time as the individual senses their needs. Importantly also, neuro-diverse people need recognition that they may present as multiple genders concurrently and/or switch between them on the basis of who they choose to 'front' as at any time.



### 7.7 Potential additional attributes, gender

All Anti-discrimination laws in Australia include the attribute of 'sex', except for Tasmania which has the term 'gender' instead. Recently, there has been increased recognition and understanding that sex and gender are different concepts.

**Question 17:** Should there be an additional attribute of 'gender'?

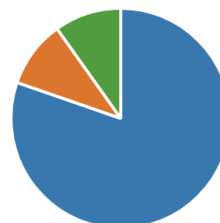
Yes: 80%

No: 10%

Unsure: 10%

[More Details](#)

<span style="color: blue;">●</span> Yes	57
<span style="color: orange;">●</span> No	7
<span style="color: green;">●</span> Unsure	7



### 7.8 Sex characteristics

Sex characteristics is not currently covered under the Anti-Discrimination Act but is covered in some other states. 'Intersex status' is covered under federal discrimination laws that apply across Australia.

An intersex variation can include variations in chromosomes, gonads, sex hormones, or genitals that do not fit the gender binary definitions of male or female.

The only protection currently available under Queensland law is for people of 'indeterminate sex' as a part of 'gender identity'. We understand that this term is not generally used by people who have variations of sex characteristics.

**Question 19:** Should there be an additional attribute of 'sex characteristics'?

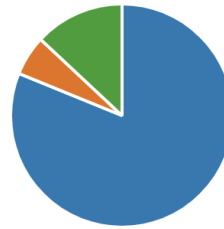
Yes: 81%

No: 6%

Unsure: 13%

[More Details](#)

● Yes	56
● No	4
● Unsure	9



**Question 20:** Do you have any other suggested wording:

- 1 anonymous Your question makes no sense. It is a definition of "sex characteristics" yet you ask if it's an appropriate definition of "gender"??
- 2 anonymous I think question 19. was worded incorrectly- and should read do you think that this definition of sex characteristics is appropriate? In which case, I am unsure.
- 3 anonymous The definition was sex characteristic not gender identity.
- 4 anonymous QC for LGBTI Health can assist with wording.
- 5 anonymous Each person's physical features relating to sex, including genitalia and other sexual and reproductive anatomy, chromosomes, hormones and secondary physical features emerging from conception'. (a) variations of genitalia which are illegally and forcibly normalised in the first 90 days after birth. (b) variations of sexual characteristics which cause the inability to engage in normal sexual activity as a young adult. (c) variations of sexual characteristics which cause Infertility during attempts at achieving pregnancy. (d) variations of sexual characteristics which lead to secondary sexual problems later in life, such as Cancer, Endometriosis, Poly Cystic Ovary Syndrome, and S.L.O Syndrome. (e) variations which cause serious health complications if the individual commences HRT as part of Transition, Birth Control, or treatment of Menopause.
- 6 anonymous I don't believe this is an expression of Gender identity in any way! It says this is a definition of sex characteristics, and I believe that to be accurate. It is not about gender. I'm not sure why the question doesn't match the definition given???
- 7 anonymous re 19 it describes sex bit not gender
- 8 anonymous None.
- 9 anonymous 'Emerging from puberty' excludes non biological gender affirming changes to the body.
- 10 anonymous This is the definition of sex. This is NOT the definition of gender identity.
- 11 anonymous Because not everyone's sex characteristics are clear and trans and non-binary people may have sex characteristic that have nothing to do with their gender
- 12 anonymous I don't know enough to speak on this but if I am thinking of this correctly it could also include physical features that are before puberty
- 13 anonymous I think this question is mis-worded. If you meant "Do you think that this definition of SEX identity is appropriate", then my answer is yes. If you meant it as it was written,

then my answer is no given gender and sex is different. Sex is biological, which you arrest as the body's characteristics, genitals, reproductive anatomy, chromosomes, etc. While gender is psychological and social, an expression of identity and self.

14 anonymous A person who has an intersex variation/s can include variations in chromosomes, gonads, sex hormones, or genitals that do not fit the gender binary definitions of male or female.

15 anonymous This only relates to what your given at birth and not identity.

16 anonymous Get advice from intersex advocates with lived experience of the nuances of living with variant sex characteristics.

17 anonymous specifically: "...hormones and PRIMARY AND secondary physical features emerging from puberty AND ANY MEDICAL INTERVENTIONS INCLUDING GRS, HORMONE THERAPY AND NEUROLOGICAL CHANGES" (CAPS used only to signify alterations). There are studies underway around the world (inc. but not limited to Standford Uni and some European universities) into neurological changes that occur or exist pre or post hormone treatments for Transgender folks. I can find no references to the outcomes of these evidence-based sciences at law in Australia at the current time.



### Expunged homosexual conviction

Until 1991, people were criminalised for homosexuality, and since 2017 people in Queensland can apply to have these records removed. The review is considering whether expunged homosexual conviction should be a protected attribute.

**Question 21:** Is there a need to protect people from discrimination on the basis of expunged homosexual conviction?

Yes: 84%

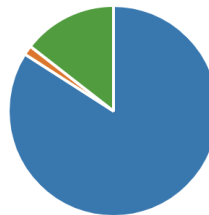
No: 1%

Unsure: 14%

[More Details](#)

Insights

● Yes	58
● No	1
● Unsure	10



**Question 22:** Do you have any examples of this kind of discrimination still occurring?

- 1 anonymous Not recently
- 2 anonymous Those who have passed cannot clear their name. this should be automatically done, so families can feel the relief for their loved ones. They led a life of pain and shame. It should be rectified. These folk couldn't get a bank loan to buy a house, a job to support their family. They were seen as criminals. this is not acceptable.
- 3 anonymous I was raped by two older boys when I was twelve. Many people still see me as consenting and thereby equally at fault. The current law is quite clear that I was not able to consent, despite my rapists being minors, due to being threatened, coerced and manipulated. I am also intellectually disabled. Even though I was never convicted, I did not receive therapy until 2017.
- 4 anonymous People lost careers in education and other areas. These gaps in their work history need to be protected from judgement
- 5 anonymous Gay panic/hate crimes still being ignored/excused
- 6 anonymous Not personally
- 7 anonymous None, I never experienced this, perhaps older generations before me did.
- 8 anonymous I don't have any personally.
- 9 anonymous I do not, but if there is the possibility it is, should we not have it protected anyway?
- 10 anonymous I know that extensive background checks can find an "Expunged conviction" and that has been enough to cause issues with people getting work
- 11 anonymous I was actually unaware of this kind of thing so hopefully it doesn't happen but if it does then yes there should be extended protections of people who have dealt with this
- 12 anonymous How many trans women were forced onto the sex offender list in order to access anti-androgens? It seems this practice ceased only a few years ago for things like cyproterone acetate.
- 13 anonymous No.
- 14 anonymous People live with the fear of past convictions. Sometimes overt protections can increase trust, improve confidence and reduce self-discrimination or people choosing not to act/engage due to past shame.

- 15 anonymous That people still have to apply
- 16 anonymous Not personally, only anecdotally (conversation with others, generally older generation)
- 17 anonymous No first-hand accounts but I am aware of older members of the LGBTIQAP+ community experiencing this.



### 7.9 Discrimination on combined grounds

We have heard that often people experience discrimination because of a combination of attributes – e.g., sex, age, race, disability. Sometimes it is hard for people to say if it was their ‘race’ or ‘age’ alone that caused the poor treatment. This is sometimes called ‘intersectional discrimination’.

**Question 23:** Should the law include discrimination on combined grounds?

Yes: 88%

No: 4%

Unsure: 4%

[More Details](#)

<span style="color: blue;">●</span> Yes	61
<span style="color: orange;">●</span> No	4
<span style="color: green;">●</span> Unsure	4



**Question 24:** Do you have any examples of how intersectional discrimination is experienced?

- 1 anonymous I am a transgender person who also has a chronic mental illness. I have been asked if I am trans because of my mental illness. A person could discriminate against me because of my being trans AND having a disability.
- 2 anonymous A queer person was targeted at a peaceful political protest, assaulted by police officers during the arrest causing long term physical damage. This was an intersection of discrimination against gender, sexuality, and political belief or activity. After a few years of legal proceedings, the police officers were found guilty, but the individual since had lost their capacity to work due to PTSD and their whole life trajectory had changed.

Queensland Council for LGBTI Health

3 anonymous I was formally cautioned at work for hugging my wife while she cried on my shoulder during a lunch break, after her dad died. I believe I was cautioned, not because I had done anything wrong, because I hadn't, I believe I was discriminated against for my sexuality and relationship status.

4 anonymous I am Pansexual, Asexual, Transgender, and Intersex. Which makes an outlier in my own communities, and a special snowflake who won the genetic lottery. I am also a non-black POC, which simultaneously make me the target of racism by white people and treated as Whyte by BIPOC people. I am intellectually disabled, which makes me a special target by Transgender Gatekeepers, who still proclaim that pre-existing mental health conditions should prevent me from receiving Transgender health care, while statistically a larger percentage of the Autistic Community are Gender Diverse.

5 anonymous Yes, I have trans and bisexual friends who are Aboriginal, one with mental health issues, and one with a disability. The burden of multiple discriminations is heavy on them.

6 anonymous My age, gender and sexual orientation has prevented me from media work

7 anonymous people of colour who are diverse in gender are at extremely high risk of discrimination and laws currently do not protect them

8 anonymous A lesbian in paid workforce Mom-gestational mother Denied paternity leave days at time of birth of baby.

9 anonymous I have friends who are not Caucasian and are frequently subjected to a combination of sexist, racist tropes by strangers which make them fearful or feel judged in situations where I as a Caucasian cis-het woman do not face the same treatment. This has been consistent throughout my life (45 years).

10 anonymous Gender identity and disability example: Transgender who have a disability or impairment whether may experience increased risk barriers seeking gender affirming hormonal treatment or outright refusal in seeking or affording healthcare, accommodation/shelter and access to goods and other services that would usually be provided to someone else without issue. Age, gender identity and sexual orientation example: Someone that's a minor (under 18) and LGBT+ where they could experience discrimination/abuse by a parent or guardian who may subject them to conversion therapy whether legally practiced, some ban yet not comprehensive enough or where illegally practiced. Many LGBT+ children have been traumatised by the possibility of being sent to a psychiatric facility due to potential hostility if they come out to their parents/guardians making it an isolating experience with negative consequences.

11 anonymous I am a young, genderqueer person with a solid degree behind me and a professional career. I am sometimes unsure if I am dismissed because of my age or gender identity or sexuality.

12 anonymous Woman who has long term health conditions can be discriminated against on both grounds - their disability, and the fact that they are a woman.

13 anonymous Transmisogyny - being discriminated against for being a trans woman specifically. Also disabled queer people get a lot of hate for being both of those things, e.g., an Autistic person being told they wouldn't know if they were LGBT+. Black & brown queer people also

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get a lot of intersectional hate that I cannot speak on as a white person. Write the new legislation with the people who actually experience the discrimination.

14 anonymous Yes. During high school my opinions were looked down upon due to me being young. And me being perceived as a girl. I wasn't someone fighting for change. I was a naive little girl. And I would never be able to tell people if it was more being perceived a girl or more being perceived and young and naive that made them dismiss me.

15 anonymous I suspect that the unwillingness of Police to assist may have also been linked to me having a health record whereby my existing diagnosis of cptsd was recorded. I'm not sure if they check those records, it's just a hunch

16 anonymous It could be from ignorance and people thinking one or the other attributes is for attention or to gain something. Or someone may have a prejudice to multiple attributes which is very common.

17 anonymous I don't even know where to start. It alienates you from people who should be in community with you. In terms of transmisogyny it makes me less-than a woman or other-than a woman. We are hyper visible yet not included. Always an object and never a subject. We are easily painted as a predator but are most often the victim. People will despise us because we cherish our femininity and punish us because of how we reject assumed masculinity. They target us as a woman but hit us as a man. I am cast as either a dangerous predator or sexual fetish; I am not even seen as someone's daughter. I do not get to be a woman by default. UK anti-trans activists specifically refer to us as "transwomen" in order to make us other to women. It happens when people separate sex and gender in order to justify that they treat us as if we were men. Our inclusion in women's shelters, women's groups, lesbian groups, feminist groups is always conditional and held at risk - never assumed as obvious. People such as Ray Blanchard saw fit to create an entire model that essentially treated femininity as being necessarily for the sexual consumption of men and therefore transfeminine lesbians must actually be men sexually attracted to the idea of themselves as women. Wearing feminine clothing is therefore pathologised as paraphilia whereas wearing masculine clothing is seen as "normal." This is what justified a psychiatrist in his mind to do conversion therapy to me. This destroyed my mental health and sense of self for over a decade, and I am still recovering from it. In trans communities it leads to other trans people denying us the closet, insisting that we are "male socialised" despite the reality of our actual experiences, where if we ever dare to stand up for ourselves, we are dismissed as a noisy male taking up space, claiming that we our femininity is inauthentic or that it somehow undermines trans liberation, harassing us if we ever talk about our very clear and regular period. It means that, in my experience, trans women are included for spectacle but not for positions of influence. Masculine defaults or insistence that masculine terms are gender neutral are a miasma when everywhere you go your womanhood is conditional. In terms of our plurality, it results in doctors withholding HRT for "mental health" reasons. It results in psychotherapists devaluing and undermining our experience, doing things "in my best interest" despite those things resulting in very clear harm.

18 anonymous I experience it frequently as an older Aboriginal trans person. It's not getting those accommodations made (and it's always about 'accommodations') for older Aboriginal people are not separate to support for trans people.



19 anonymous Disabled and trans people not having their gender correctly identified in hospital.

20 anonymous I think there is definitely a "layering" effect that needs to be taken into consideration. I'll use disability as I am disabled. Openly gay disabled people definitely receive a lot more discrimination than their able-bodied counterparts. Things like racism and ableism can definitely magnify intended homophobia.

21 anonymous Race and LGBTQ+ issues are a big one that still happens

22 anonymous Just that the complexity of it and compounding negative impact on life outcomes is great enough to warrant it being listed

23 anonymous So many - where to being, heavens, indigenous women, poor indigenous women, poor indigenous women who survived violent sexual crimes, poor indigenous women with mental health symptoms. Gay people of colour etc

24 anonymous As a gay man I would often get told I should have an HIV test by a doctor when visiting a particular Health Clinic. This happened regardless of what I went to the clinic for; an in-grown toenail for instance. I am 63, in a 20 yearlong committed monogamous relationship. I lived through the 'AIDS crisis' and lost a lot of friends. I know and avoid the risks.

25 anonymous I have personally experienced discrimination on the basis of age and gender combined. Other factors could be involved - it is often difficult to determine per incident. Most obvious is workplace and applying for jobs.

26 anonymous I have clients who are experiencing discrimination both on the grounds of their age and their gender. They find it difficult to find employers who are willing to employ them despite their qualifications and experience. The problem is that the discrimination is rarely overt, that is never the reason given but when they are rejected time and time again it is not a large logical leap to see that this is a factor.

27 anonymous As outlined above gender, sexuality plus complex disabilities and chronic illness



### 7.10 Complaints

At the moment the law requires individual people to make complaints about discrimination. If people don't make complaints, then there are no consequences under the law.

**Question 25:** Do you think a complaints model is effective in eliminating discrimination to the greatest extent possible in the community?

Yes: 13%

No: 68%

Unsure: 19%

[More Details](#)

[Insights](#)

<span style="color: blue;">●</span> Yes	9
<span style="color: orange;">●</span> No	47
<span style="color: green;">●</span> Unsure	13



**Question 26:** What makes it hard for people who have experienced discrimination, sexual harassment and/or unfair treatment to make a complaint?

- 1 anonymous While retaliation isn't meant to be legal it often happens anyway. Regardless, reporting discrimination often results in a loss of employment or other backlash based on the scenario and/or community setting.
- 2 anonymous The current governments anti LGBTIQ stance E. G. Religious discrimination bill
- 3 anonymous There are so many barriers to making a complaint. Most people won't because they don't know how or don't have the time and energy. Many disabled and chronically ill people, for example, simply don't have the energy to go through a complaint process.
- 4 anonymous Learned helplessness - that they assume it will go nowhere, or that they will have to endure the arduous process of proving the discrimination, thus reliving it over and over again.
- 5 anonymous After making a complaint your life always gets far worse. Because then you are a narc. Everyone gangs up and they destroy your life. People remember who you are, and discrimination always continues.
- 6 anonymous Hard to trust that it will achieve anything, puts it all on the individual person, fear of backlash e.g., losing job, making it worse
- 7 anonymous Shame. Fear. No Hope. Loss. Misogyny. Cultural issues, Not being believed... as recently exposed in Parliament House with Brittany Higgins.
- 8 anonymous Fear of further issues with the perpetrators, reduced employment opportunities, being too tired or hurt to pour more energy into complaining, not thinking the complaint will lead to a meaningful outcome, feeling like there is not enough evidence for or support from others for the complaint.
- 9 anonymous Proving it

- 10 anonymous The investigation process is very traumatic. Not getting regular updates on what is happening with the complaint.
- 11 anonymous If an organisation commits illegal discrimination, and a complaint is made. If the complainant is upheld by the discrimination commission, I still personally need to fund a civil case against said organisation and prove to a court of law that discrimination has taken place. The outcome is usually the party at fault is required to make a token apology. Which does little to repair the damage done, at great financial risk to the person making the complaint. I personally have made several complaints which have not curtailed discriminatory behaviour, in fact since 2017, discriminatory behaviour towards Transgender people has spiralled out of control, due to the lack of justice.
- 12 anonymous The process, the lack of targeted support to step through the process safely.
- 13 anonymous Fear of repercussions, uneducated or ineffective management
- 14 anonymous They fear exposure and the consequences of it. Also, in my own experience, I have felt that making a complaint turns one into a sort of pariah
- 15 anonymous Fear of reprisal (especially from family members or work colleagues), fear of pushback (from the community at large), and a fear of being seen as ungrateful, entitled or "like a snowflake" (Due to negative impressions of LGBT+ people pushed particularly by right wing media)
- 16 anonymous The feeling of shame, depression, anxiety, if they still require the ex-employer to be a job referee and don't want to rock the boat, sometimes it's a language/cultural barrier of not knowing where to go to make a complaint, whether they can even make one. Some cultures might think it's the woman's fault for getting sexually harassed. the list is long.
- 17 anonymous vulnerable people/populations are put at risk to have to make a complaint. Sometimes this may mean 'outing' oneself and becoming higher risk/target for discrimination
- 18 anonymous Stigma and fallout concerns
- 19 anonymous Fear of abuse
- 20 anonymous Trust in systems Too many layers/ barriers Power imbalances and lack of advocates Access to cheap legal advice
- 21 anonymous Often the process requires them to identify themselves, and particularly be known to their perpetrator and this absolutely turns people away from reporting due to trauma and/or fear of consequences.
- 22 anonymous The person being discriminated, sexually harassed or subjected to unfair treatment may feel in a position where the person who's is actively discriminating against, committing sexual harassment and/or unfair treatment has more authority or seen as an authority figure thus more like to be believed (e.g., a doctor).
- 23 anonymous Fear. Fear of not being believed. Fear of retaliation or humiliation. Fear of losing a job and the flow on effect of that. Fear.

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- 24 anonymous Worry about retaliation, how emotionally draining the process of a complaint can be, the risk of having to deal with the law, bad previous experiences.
- 25 anonymous The thought no one will believe us (there's usually not much evidence), that it won't change anything, and/or that the people we complain to will also be discriminatory or won't care or do anything. Also, the fear of not being able to make an anonymous complaint and in turn facing further discrimination from the person we complained about.
- 26 anonymous Processes aren't made clear. It also feels like there's no point if there isn't any written evidence, audio evidence or video evidence. Most of the time discrimination happens it done unexpectedly.
- 27 anonymous Being unsure if what they experienced was discrimination. Victims often gaslight themselves or place blame on themselves for things happening that it can be hard to know if what they did experience was discrimination or sexual harassment or unfair treatment. I don't even know when something counts as discrimination under the law or when it's just someone being transphobic that I'll just have to put up with. The lines are unclear from the point of view of someone like me. When is something bad enough? Fear of it causing more or different pain. Not wanting to go through all the hassle every time it happens.
- 28 anonymous Power dynamics; financial inaccessibility.
- 29 anonymous Unfamiliarity with the process; fear of being re-traumatised by the process; fear of being told that it wasn't a big deal; fear of drawing attention to protected attributes in potentially hostile circumstances.
- 30 anonymous Because discrimination usually occur in context of vastly unequal power. To use my example of Qld Police above - they not only have access to legal advice etc which our financial situation precluded, we are also not naive to the ways that institution can make a whistleblower's life hell, including constant vehicle stops with fines for minor defects. They can destroy you financially and make your life hell should you be considered a thorn in their side.
- 31 anonymous In order for an investigation to be successful on the part of the complainant, there needs to be witnesses to the incident, evidence of the incident or the accused needs to admit that they did the wrong thing. Due to the insidious nature of discrimination, rarely does the accused admit they did the wrong thing, rarely is there a witness to the behaviour or language and rarely is there evidence further than anecdotal. It makes it increasingly difficult to prove.
- 32 anonymous Generally, people experiencing discrimination are already marginalised; this often means they have limited access to the financial and emotional resources required to make a complaint. This is particularly true for disabled and neurodivergent people who also make up a significant number of the LGBTQIA+ community.
- 33 anonymous If you're in fear of your life because someone in the street attacked, you for being trans then you're unlikely to put yourself at risk submitting a complaint.
- 34 anonymous Reliving trauma, stigma, fear of retaliation, anxiety around the process
- 35 anonymous Probably with how they may be treated if they will face further discrimination and/or they're complaint will be completely disregarded and overlooked

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- 36 anonymous Clear avenues for making their complaint in a way that is efficient.
- 37 anonymous Lack of self-confidence and dependence on the discriminator e.g., partner or employer
- 38 anonymous There is an intrinsic asymmetry in feedback regarding discrimination and harassment. Not only does it simply require more time, energy, and support to give feedback after a harmful or traumatic experience, you're also often trying to explain your pain to someone who simply cannot connect to the reality of the situation. You are forced to relive your trauma over and over and over again without support to even get a chance for it to change. In addition, the people at fault have a position of power relative to the victim and a vested interest in maintaining their self-image as a good person, which makes it far easier for them to dismiss any feedback or criticism as catastrophising and permits them to continue the harm. It takes more resources to make a genuine complaint than it does to dismiss it.
- 39 anonymous Believing if it is reported that it jeopardises your employment or will do so through other ways. This already happens when you speak up internally. Twist it back on you and how I am going to build better peer relationships or how I am going to help bring in more males. There has to be a way to be anonymous if choosing to be without dire consequences if reporting it.
- 40 anonymous Knowing that nothing will change. Knowing that it's a lengthy process that often results in gaslighting from those who you make complaints against. The often-subtle way that discrimination mounts over time in the workplace or in places that are frequented.
- 41 anonymous It's an exhausting process that puts it on the victim to speak out potentially putting them at risk of retaliation even in anonymous situations.
- 42 anonymous Firstly, there isn't a lot of insight into what qualifies as a complaint. Secondly, social media platforms and the internet are the WORST offenders, with many of these companies simply not caring. You're more likely to get punished for REPORTING the abuse.
- 43 anonymous Feeling like they aren't respected, that they aren't heard, or that it will get back to the perpetrator and that they will be harmed, physically or mentally.
- 44 anonymous Fear of getting involved and not trusting the process which they don't know much about.
- 45 anonymous Because if it's happening in the workplace fear of losing it, your work policies and procedures and heaps more
- 46 anonymous Fear that they are making a fuss, won't be believed
- 47 anonymous The entire state is entirely corrupt (in pockets). There is no safety in complaining.
- 48 anonymous Trauma
- 49 anonymous Past experiences of being judged, condemned, disbelieved or vilified. Having to relive the trauma of assault and harassment without access to gay/lesbian-identifying counselling.

50 anonymous The very nature of a complaints process negates its value when either the complaint is about the organisation who actions the complaint or is politically connected. True independent arbitration is near impossible, thus fundamentally flawed.

51 anonymous Fear and the need to mediate with the other party

52 anonymous There are large systemic barriers to people making complaints in regard to effort, fear of the very systems they are forced to interact with to make the complaint, to beliefs that the systems will not believe or validate their experience, to fears of cost and time and facing further humiliation and/or harm.

53 anonymous Making the complaint and investing so much time, energy, personal resources and money into making a complaint and the commission has no power to do anything. You then have to take further action. It is exhausting and inaccessible for vulnerable people.

54 anonymous Fear of further discrimination. This should be a criminal matter, witnesses to discrimination should be able to bring complaints forward.



**Question 27:** Do you have any suggestions about how the complaints process could be improved?

1 anonymous I just looked at your website. 1) I would suggest making videos with closed captions and subtitles explaining how to make a complaint and the process etc. There is too much reading involved as it is now. I imagine some people would be put off by that because they don't understand English well, or they have issues with reading, or they are too tired to get through it. 2) Currently all complaints must be in writing. There could be an option where a person is asked questions over the phone which is recorded, and a transcript written.

2 anonymous Assume the person making the complaint is telling the truth.

3 anonymous Ongoing support for those who experience discrimination so they can easily get help if/when discrimination happens again or gets worse.

4 anonymous It should be simplified so folk can understand it, feel supported in their journey through the process. It should be easy to approach.

5 anonymous (a) the burden of proof is placed of the accused perpetrator, to prove no wrongdoing on their part. (b) discrimination is no longer consider illegal; it should become a criminal act. (c) Police, Judges and Politicians are no longer immune from the anti-discrimination act. (d) no matter the seniority of the person accused, once convicted, their names are added to the list of sexual offenders and are no longer permitted to serve in a position of trust. (e) the names,

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addresses, places of employment, of those convicted, should be published, much like what happened to Gay men in the 1970s.

6 anonymous Have a LGBTI Hotline for complaints out of Queensland council for LGBTI health. With a wraparound support for individuals. The complaint process is long and can be emotional. Using a strength-based approach in a well-established org can increase awareness and uptake.

7 anonymous Include an element of training and ongoing protection for the complainant

8 anonymous Possibly create a federal state specific portal where people can anonymously voice complaints and receive resources to assist in their specific situation. Also increasing availability of legal defence to LGBT+ Plaintiffs in workplace discrimination cases and other legal matters.

9 anonymous Is there a point to make it anonymous? If it's against a small company, they would probably know the person who made a complaint? If it's something like sexual harassment, don't have a time limit on reporting? Not sure if there is even one. Sorry I'm no help

10 anonymous Should be able to submit complaints on behalf of people e.g., a worker submitting a claim for a client/patient, teacher for a young person etc

11 anonymous Through trade union efforts

12 anonymous Anonymity to the perpetrator even if no one else.

13 anonymous A system that's designed to reach out to people instead of them feeling that they have to reach out to the system for making complaints, perhaps to make it seem more accessible.

14 anonymous I'm not sure.

15 anonymous No, but it definitely needs to change.

16 anonymous I've never felt I could make a complaint.

17 anonymous I don't know anything about the complaints process. I wouldn't even know where to start if I ever did. So, a good start for you, might be easily accessible information about it. More public education on how to do that or where to find the information. An anonymous webchat or call centre or email where someone can ask questions or be guided through the process.

18 anonymous Anonymous complaints which put the onus on the organisation to respond with systemic solutions, not individual - better training, more accountability to take action equally regardless of victim characteristics, etc

19 anonymous Investigations need to be thorough, place the balance of the complaint to the complainant, use historical support people as witnesses.

20 anonymous Other people could enter complaints on behalf of the person experiencing discrimination



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- 21 anonymous Police and other civil servants should be able to report these things, a crime being committed should be seen by the commission or a court.
- 22 anonymous Provide some kind of counselling or mental health support plan for people making complaints
- 23 anonymous I can't think of too much because I'm unsure of how it actually works now but clearer language. Training to help the person making to complain to help them feel heard have it be as accessible and accepting as possible
- 24 anonymous Support. An advocate to talk to who will actually assist and advocate on my behalf in the complaint process.
- 25 anonymous I don't know what the complaints process is. I have never done one as expect it will be creating the beginning of the end of my career.
- 26 anonymous Having a process of complaint by single email without having to mount a case would be helpful. I think you'd start to see persistent bad actors in the space.
- 27 anonymous Implicate a law where online abuse has in real life consequences. It's possible to track IP addresses and GPS to the abuser's location and devices. I don't think any of the older (Gen X up) generations realise how bad it is. Death threats have become a NORMAL PART of being online, with doxing becoming more frequent, and child as young as EIGHT years old are being victims. Kids who haven't even finished primary school are being told to kill themselves. The government needs to take a stand and let the Australian population know that this is beyond unacceptable. The internet is the future and measures need to be put in place to protect people or it will get worse.
- 28 anonymous Even just for improved record keeping, make it so a complaint can be recorded if not investigated
- 29 anonymous Assertively employ women of colour. Scholarships for indigenous children from birth for academic progress with housing for the whole family if required. (You need to start again with new people who are not the survivors or the perpetrators of the old system).
- 30 anonymous This is tough. It starts with far better community education and awareness followed by a deterrent and policing model. I personally do not have the skills to recommend solutions but awareness to raise the issue for review by those who are armed with solutions.
- 31 anonymous A system that is focused on believing and empowering victims, not forcing them to prove their victimhood and the harm done. One that is humanistic and flexible, with little bureaucracy or "red-tape" at the reporting end.
- 32 anonymous Change the law to specifically capture bullying etc in strata Give commission disciplinary powers Provide support for complaints and going through process – advocates.





### 7.11 A new approach

A possible new way of doing things is called a ‘positive duty’. This means that employers and businesses would have a duty not to discriminate as much as possible, whether a complaint is made against them or not. This might require organisations to do things such as making better policies and providing training on discrimination and sexual harassment.

**Question 28:** Should there be a positive duty on organisations to eliminate discrimination, sexual harassment and other unfair conduct?

Yes: 84%

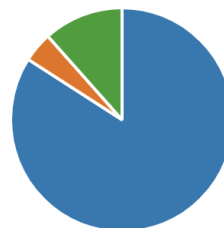
No: 4%

Unsure: 12%

[More Details](#)

 Insights

	Yes	58
	No	3
	Unsure	8



**Question 29:** Do you have any examples of where this could address systemic discrimination?

1 anonymous For one, it would mandate that all businesses include an appropriate gender marker for customers and employees in their database - including Mx. Gender diverse people are forced to put indeterminate in, for example, their health records, are constantly having people incorrectly assume their gender and changing it from “indeterminate” to either male or female. This increases opportunities for misgendering and harm within a health context, including when they attempt to change their gender marker back to indeterminate. Speaking as a Clinical Psychologist this is enormously traumatic and entirely preventable! Please change it!

2 anonymous Systems where gender recording is inflexible - e.g., police, govt. inclusion of LGBTIQ kids in schools especially trans children

3 anonymous All facets of life.

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- 4 anonymous In organisations that feel too big and powerful to make a cultural shift, and in small organizations where one complaint may feel like everyone knows who made it and it would be career limiting.
- 5 anonymous As stated earlier, some of the worse perpetrators of systemic discrimination is in fact Police, Judges and Politicians. Businesses are at the forefront of curtailing discrimination. Even banks are including images of obviously LGBT people in their advertising.
- 6 anonymous Within religious organisations, schools, and those (often male dominated) where misogyny is often rife. such as the Australian parliament or the local car repair garage.
- 7 anonymous Some companies already have anti-discrimination policies, however if this were to be put into law as a 'positive duty' for all companies to adhere to, then LGBT+ people would be able to seek employment without fear of discrimination.
- 8 anonymous There should be training, KPI's and organisations (especially government) and EACH individual staff member should have to agree (per codes of conduct) and show their commitment through continued professional development and actually be held accountable when issues arise. There needs to be several steps - e.g., various people you can submit concerns to within each organisation.
- 9 anonymous Most workplaces I have worked in have encompassed bullying of women in ways or magnitude different to bullying of men, and there are always more men in management and so often the bullying comes from men which then perpetuates that dynamic, especially if it is a toxic environment.
- 10 anonymous None.
- 11 anonymous Proactivity is always better than reactivity, and it doesn't wait for someone to get hurt.
- 12 anonymous The medical and public facing jobs. There needs to be more education in jobs where people will be interacting with the public, especially in vulnerable positions. Such as paramedics or Emergency Department staff. Police Officers or teachers. I should not be afraid of discrimination or misguided ignorance while I'm at my most vulnerable. I should not be worried about educating someone or being told I am wrong about my own identity while I call an ambulance before or after a suicide attempt. Hell, that very fear is one I think will be why I don't call before an attempt. And maybe one that will mean I die. And I should not be educating police or worried about discrimination while I'm reporting something horrible that has happened to me. Hell, I shouldn't have to be worried about that if I'm the one being arrested. But I am. And hell, I have so many other things on my side that would usually prevent discrimination here. Like I'm white, able-bodied, well spoken, a citizen, and come from a reasonably well-off family. So, gods, you know it must be a problem. And a good step would be education in these public positions where they work with vulnerable people.
- 13 anonymous Religious schools would be required proactively to develop a culture that is safe for and inclusive of LGBTIQA+ students and staff. If they refuse, they could be prosecuted.
- 14 anonymous By increasing the visibility of the queer community in a positive light and celebrating individuals that are role models we can break down the barriers that cause

discrimination. By humanizing people and their experiences, showing their families and the loss or harm caused by discrimination we can make queer people recognized as human and worthy of respect. The same goes for females in the workplace. Females need to be seen as worthy of respect, they need to be supported and have senior leaders vocally and visually demonstrate support for us to change the attitudes of the individuals that believe we do not deserve to be respected, that believe we are there for their own pleasure, believe we are there to be abused or raped.

15 anonymous Requiring employers to have policies that promote diversity encourages conversation. It also gives employees opportunities to address discrimination within their workplaces rather than having to make a complaint to the commission.

16 anonymous I want them to try to stop it as much as possible. But I don't want some weird thing where it's like "You have 80% X demographic therefore you've breached the positive duty doctrine"

17 anonymous Protect female teachers against sexist treatment from their students. Students should be held accountable (in an age-appropriate way) for discriminatory behaviour. Teachers should be guaranteed a safe working environment.

18 anonymous It could open up to further talks about subconscious bias and could further our way to eliminating discrimination whether it be intentional or not

19 anonymous It would make the task proactive so that it doesn't rely on the marginalised person being harmed first. It might also give marginalised people leverage to make this paid work to inform instead of exploiting them to educate as an unpaid additional task out of self-defence.

20 anonymous We did something similar at work, but it was optional to attend. Those who clearly needed to go, didn't.

21 anonymous One word: toilets. I mean it's not the only word, but it's a bellwether for what isn't being done. Also making sure if you're doing cultural awareness training of Aboriginal and Torres Strait Islander people that you include/talk about Mob who are trans (and please stop reducing it to brotherboy and sistergirl - yes, these terms are used, but they aren't all encompassing.

22 anonymous The first thing to remember is suppression isn't going to work. The threat of "don't be discriminatory or your jobs on the line" will only cause discriminators to be sneakier and possibly only exasperate their behaviour when out of their workspace. Education is the only way forward and I think it should start in primary school. Workshops and classes need to be held to help undo discriminatory conditioning, with early intervention performed with those that fit the profile of future abusers. Hate is learnt.

23 anonymous Educating people on best practices to use, not making assumptions about people's lives and helping to reduce other microaggressions.

24 anonymous In male dominated industries

25 anonymous no not at all. This sounds fluffy and pointless. Unless the consequence of failing your "duty" meant you were fired.

26 anonymous Possibly health care industry, education (child and adult) and job seeking.

27 anonymous Yes, especially in bodies corporate and building management schemes - no one should feel unsafe in their own home and have their investment jeopardised because of disability, sexuality, gender status. Yes, especially in healthcare and allied health and NDIS, and services provided to NDIS participants.

28 anonymous In ALL schools accessing ANY state or federal funding. In all workplaces.

### 7.12 What the Commission can do

Under the current laws, the Commission can only act if they receive a complaint. If a complaint is accepted, it will try to be resolved through an impartial conciliation process, and if it doesn't resolve then a tribunal decides the outcome. This means that often the law fixes problems for individual people but does not deal with discrimination against people on a wider scale. Sometimes people call this 'systemic discrimination'.

The law may not respond well to systemic discrimination at the moment. For example, if a person was to make a complaint that a government system does not allow a person to update their name and gender marker, a tribunal could compensate the person who complains, but cannot fix the underlying problem that the system is causing discrimination.

The Review is considering whether the Commission, or another body, should have more powers to proactively deal with discrimination – this could include making guidelines or issuing compliance notices to tell organisations to do things to prevent discrimination.

**Question 30:** Do you think that the Commission (or another body) should have more powers to take action without a person having to make a complaint?

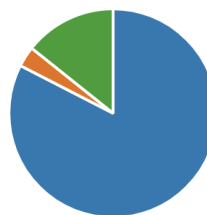
Yes: 83%

No: 3%

Unsure: 14%

[More Details](#)

<span style="color: blue;">●</span> Yes	52
<span style="color: orange;">●</span> No	2
<span style="color: green;">●</span> Unsure	9



**Question 31:** Do you have any suggestions about what the Commission should be able to do to address discrimination?

1 anonymous I like the idea of Guidelines that are made public.

2 anonymous Definitely enforce appropriate gender markers, including that they be required to update as language continues to evolve. Policies are a fall-back for businesses to say they are doing the right thing, but not an actual guarantee that they are being followed. Random interviews with anonymous employees or consumers would help with this.

3 anonymous Put chromosomes on birth certificates instead of male or female.

- 4 anonymous Publish guidelines, educate employers, start investigating a situation without needing a complaint
- 5 anonymous Consult with the people in the demographic in question. Saying goes." with me, for me, not against me"
- 6 anonymous Mandate retraining, offer certificates of completion for staff that do training and encourage minimum numbers trained across all levels of employment. Provide resources and funding to support organisations to make schools and businesses more aware, inclusive and accessible and showcase people and organizations doing it well! Maybe have levels of recognition that organisations can apply for annually and have displayed as a commitment to inclusion?
- 7 anonymous The commission should have the power to detain the accused indefinitely, as the federal government has the power to detain illegal immigrants indefinitely.
- 8 anonymous Consult with peak organisations and community groups that represent the vulnerable and discriminated against for appropriate strategies and assistance.
- 9 anonymous The commission should be able to draft and present bills to local and federal members of parliament to progress changes to federal processes that may cause discrimination.
- 10 anonymous More investigative powers and much more funding
- 11 anonymous Overarching issues- e.g., registration details being binary and outdated and discriminatory at all government facilities, adequate care/treatment for people living with HIV and LGBTIQ+ people etc
- 12 anonymous Audits of bigger organisational processes Companies could apply to have their lovelies reviewed
- 13 anonymous None other than to be as comprehensive enough to cover or address the issues that affect protected attributes and to constantly improve.
- 14 anonymous No, but proactive flexible regulation made with the people the discrimination effects is important
- 15 anonymous Present the matter before parliament perhaps? I'm not well versed in how these things work, but I do not that often, while there is a lot of activisms around these things, often it will take a long time before people are even heard. Maybe, this could simply fast track that and put pressure on the government by supporting those trying to dismantle systematic oppression.
- 16 anonymous Direct government, institutions, organisations, religious schools, employers, etc, to implement best practices, require ongoing review of outcomes, and impose penalties for non-compliance or under-performance.
- 17 anonymous Ensure all organisational and govt departments have non-discriminatory information recording, etc. A person should really be able to record a non-binary gender identity at Births, Deaths and Marriages. As it stands if anything happens to me, my death will be recorded in my birth gender, not my gender identity. A lot of non-binary people are in this position. The same as my marriage certificate, health record with Qld Health etc

Queensland Council for LGBTI Health

- 18 anonymous Take advice from people that are either witness to a behaviour or are a confidant of the complainant. If a child comes to a teacher, we have a duty of care to share information. If an employee comes to a co-worker, they should also have a duty of care to make a formal complaint on another person's behalf.
- 19 anonymous There should be significant financial consequences for employers who are found to be violating anti-discrimination.
- 20 anonymous I can't think of anything at this current stage
- 21 anonymous It should only be raised by individuals to avoid shaping a community into one that seeks out offense.
- 22 anonymous Overturn when it makes sense. Culture changes constantly. What was right yesterday is discrimination in a weeks' time.
- 23 anonymous Going back to the toilet issue. Someone shouldn't have to make a complaint if there are these sites of exclusion. All gender toilets or stalled toilets are a solution that can be relatively easily accommodated, but also, they can be identified. In schools, universities, shopping centres, libraries etc.
- 24 anonymous Definitely try and implement consequences for the abuser. 99% of discrimination and abuse occurs because the one carrying it out KNOWS they won't be caught. Like I said in a previous reply, the internet in particular is only going to expand further, and we need to implement safety measures now to protect users. Social media and platforms should be made responsible for the abuse occurring on them by Australian law, instead of ignoring it like it always does.
- 25 anonymous Enforced education (in hours), additions to a code of conduct, firing people who transgress the code of conduct. Mentor system for senior staff wanting to not discriminate to support them in a process of improvement. Moving out people who have been proved to cause harm (not moving the victim). Legislated standards (e.g., names/toilets, change rooms for school etc). (Surely the existence of a large room in the middle of every school where students get naked and staff watch is not actually healthy for anyone. Funding a change and mandating a requirement of unisex cubicles built around open wash space for every single school is reasonable.
- 26 anonymous Refer to my comments above

[More Details](#)

[Insights](#)

26

Responses

Latest Responses



### 7.13 Exemptions

Exemptions can be argued by a person or an organisation to excuse discrimination so that it is not unlawful.

Exemptions recognise that treating someone differently may be justified in some situations. The Review is looking at some of the exemptions to work out whether they are fair and reasonable.

Religious exemptions

There are several exemptions in the Anti-Discrimination Act that can be used by religious bodies. Religious bodies can discriminate:

- When providing goods and services where it is in accordance with the doctrines of the religion and is necessary to avoid offending the religious sensitivities of people of the religion. Services may include aged care, disability services, child and adoption services, social services, accommodation and health services.
- When providing accommodation, including business premises, houses/apartments, boarding houses or hostels, caravan or camping sites. It might be on the commercial market or a non-profit provider.
- In the workplace, including schools, where an employee’s behaviour goes against the employer’s religious beliefs. This would permit for example, a faith-based school to choose not to hire, or to terminate the contract of a teacher because they are open about their sexuality or gender identity at school.

**Question 32:** Should religious bodies be allowed to discriminate when providing goods and services?

Yes: 10%

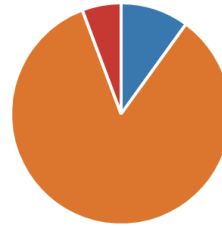
No: 84%

Unsure: 0%

Other: 6%

[More Details](#)

<span style="color: blue;">●</span> Yes	7
<span style="color: orange;">●</span> No	59
<span style="color: green;">●</span> Unsure	0
<span style="color: red;">●</span> Other	4



**Question 33:** Should religious bodies be allowed to discriminate when providing accommodation?

Yes: 8%

No: 90%

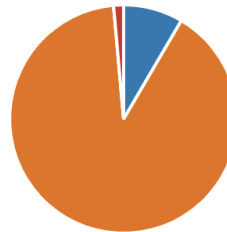
Unsure: 0%

Other: 1%

[More Details](#)

[Insights](#)

<span style="color: blue;">●</span> Yes	6
<span style="color: orange;">●</span> No	64
<span style="color: green;">●</span> Unsure	0
<span style="color: red;">●</span> Other	1



**Question 34:** Should religious bodies be allowed to discriminate against employees because they openly act in a way that is contrary to their employer’s beliefs?

Yes: 13%

No: 80%

Unsure: 4%

Other: 3%

[More Details](#)

[Insights](#)

<span style="color: blue;">●</span> Yes	9
<span style="color: orange;">●</span> No	57
<span style="color: green;">●</span> Unsure	3
<span style="color: red;">●</span> Other	2



**Question 35:** Do you have any examples of where the religious exemptions are creating an unfair situation for people?

1 anonymous The Salvation Army is well known for its transphobia. Transgender people, especially trans women who are homeless and in need get routinely turned away and this should be



illegal. Religious schools should not be able to quote hateful passages from their holy books which cause prejudice to LGBTQIA people.

2 anonymous Religious schools especially should not be allowed to practice discriminatory behaviour. Unfair situations include when one catholic school embraces students and teachers regardless of gender history or sexuality, while a catholic school accepts the enrolment of a non-Catholic student without requiring the student to believe or practice Catholicism but would disallow another student or teacher to study or work at the school because of their sexuality or gender history - even if they were catholic. This is unfair because it legalizes discrimination on individual perception of the religious rules. Where there is not agreement across the faith, there should not be discrimination.

3 anonymous It means that teachers have to hide who they are at school, which becomes impossible at times e.g., if they get married, have a baby etc with their partner. This means there are no role models for the young LGBTIQ in the school to improve their mental health.

4 anonymous Why should Religion be allowed all these exemptions when no other body has these rights? Why should Culture not have these exemptions, or folk with Disability, or LGBTIQ folk? Religion is a chosen activity. it does not dictate people's integral being. It tries to dictate folks lives by their teachings. which is not reflective as a human right.

5 anonymous Religious organizations often work with vulnerable people and can exploit those vulnerable people with threat or actual non-assistance for religious non-compliance. It's not charitable or fair.

6 anonymous In health care; in Victoria [REDACTED] hospital is a "public" hospital but run by a religious order that denies access to some sexual and reproductive health treatments and interventions

7 anonymous [REDACTED]

8 anonymous [REDACTED]

9 anonymous At education institutes

10 anonymous Not in my personal life

11 anonymous Can claim tax-free benefits.

12 anonymous teachers who are excellent at their jobs and their personal lives/identity has nothing to do with the way they work, same with anyone in any role similar. Young people who don't have parents support can be discriminated against in schools if they have no champion. These are so dangerous.

13 anonymous Concern if child will be accepted into faith-based school community because they have two Mums and are not christened. Chaplains (Christian run agencies) being in public

schools. These Laotians should also be open to other faiths such as Muslim or other denominations OR better still scrapped for social workers to conduct these roles and programs

14 anonymous [REDACTED]

15 anonymous See: literally the whole Citipointe College thing that happened recently. Also, in circumstances where religious LGBT+ people are barred from accessing their religion's services, or when someone has no one to turn to but a religious service e.g., the [REDACTED] It's also unfair to terminate employees for existing as an LGBT+ person etc.

16 anonymous I was threatened with expulsion for being trans.

17 anonymous LGBTIQA+ kids and staff can be expelled, fired, bullied, and traduced by religious bigots who run schools. I once had a teacher denounce my sexuality at length in class and there was nothing, I could do to protect myself or punish that individual.

18 anonymous Religious schools can currently discriminate against both students and staff on the basis of their sexual orientation or marriage status

19 anonymous Hospitals.

20 anonymous Many older people who are LBGTQIA+ find aged care a challenging place because it is primarily provided by religious organisations. I've never been willing to work in private religious schools because of the requirement to make "lifestyle declarations" which would force me to deny the existence of my family.

21 anonymous Not many, mostly schools and stuff.

22 anonymous Why don't you have a place to make a positive comment about religious exemptions? Please stop trying to police other people's beliefs.

23 anonymous It is so broad and religious bodies could about consider anything at all that they don't like to be an infringement in their faith, and it has happened and will likely continue to happen

24 anonymous Many charities, private hospitals, and other care services are tied to religious bodies (vast majority Christian in this country) and for some services it is difficult or impossible to access non-Christian alternatives. Most prominent example is homeless shelters.

25 anonymous The fact that they can (and do) dismiss workers because of their gender or sexuality is a key one. But beyond formal dismissal, it's making their work or study impossible.

26 anonymous I've met students, who have attended private religious schools, who have been bullied, screamed at, and over all abused for being LGBTQI+ while teachers WATCHED but refused to intervene.

27 anonymous Schools like [REDACTED]

28 anonymous Catholic schools sacking teachers who identify as same sex relationships

29 anonymous It is sanctioned discrimination based on personal opinion. Religion is protected by law as is sexuality but someone who is sexually diverse cannot refuse service to someone based on them not agreeing with someone of faith so it absolutely should not be allowed the other way around

30 anonymous The entire country. Tax free religious organisation is organised crime. Unaccountable "work" behind closed doors without accountability or description. Causing harm, raping children, oppressing women and taking all the money. More specifically the [REDACTED] state service of antenatal medical care without the need to start a conversation with parents caring for a foetus with a non-life compatible condition is psychological and emotional harm on each and every family they fail to treat. The only option of palliative care for the baby when born increases psychological harm to the other children in the family and many parents.

31 anonymous School students

32 anonymous Across the board on the basis that ANY discrimination is not ok. Religious organisations are NOT above the law. ALL organisations must be treated on a level playing field. We are discussing Human Rights, not Religious Rights and Human does not exclude those people involved in or linked to religious organisations, activities or beliefs.

33 anonymous I avoid religion from fear of discrimination. I had enough rejection.

34 anonymous Religious exemptions essentially say that the rights of a Religious Person are greater than those who do not follow that religion. It essentially the equivalent of saying, "all people are equal, but some are more equal than others." An individual's personal beliefs should not be allowed to affect the wellbeing and safety of another.

35 anonymous See example above - schools



### 7.14 Sport exemption

The law currently allows for people who are transgender or intersex to be restricted when participating in sport where it's a competitive sporting activity.

For example, this can mean that a transwoman athlete might be excluded from participating on a women's team. The restriction will only be allowed where it's 'reasonable', where the strength, stamina or physique of the participants is relevant, so it does not apply to all kinds of sports.

Some international and professional sporting bodies are moving towards a more inclusive approach.

**Question 36:** Should the sport exemption be changed or removed?





Changed: 32%

Removed: 32%

Stay the same: 14%

Unsure: 21%

[More Details](#)

 Changed	23
 Removed	23
 Stay the same	10
 Unsure	15



**Question 37:** Should 'competitive sporting activity' be defined to only include elite sporting activity, to encourage an inclusive approach in community sports?


Yes: 45%

No: 26%

Unsure: 29%

[More Details](#)

 Insights

 Yes	31
 No	18
 Unsure	20



**Question 38:** Is strength, stamina and physique a fair way to measure who should be allowed to participate in sports?


Yes: 16%

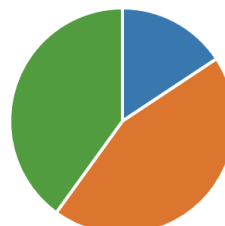
No: 44%

Unsure: 40%

[More Details](#)

 Insights

 Yes	11
 No	31
 Unsure	28



**Question 39:** Do you have any examples of where the sport exemption is creating an unfair situation for people?

Queensland Council for LGBTI Health

- 1 anonymous In the case where levels of hormones are measured to determine “normal range” equivalency for a trans-athlete to compete in their affirmed gender category, those “normal range” levels need to be tested across populations from all racial groups across the world. At present discrimination is present because those levels are mostly tested on white bodies from western cultures. The impact of hormone therapy does more to negatively impact the body and therefore performance than any advantage from the persons sex assigned at birth. Overall, this is still assuming the gender binary and forcing non-binary people to “choose a gender” to compete in. A move to open-gender sports would make more sense.
- 2 anonymous Transwomen who are bigger are more likely to cause injury to cisgender women while playing sports.
- 3 anonymous Please engage in conversation with Peak Transgender appropriate service bodies for education and information around these issues.
- 4 anonymous The exemption plays into a physical definition of a gender binary. It is inappropriate, exclusionary and damaging for those defined by it.
- 5 anonymous Trans Women who are not competitive, due to other reasons, still being banned from competing against women.
- 6 anonymous I resent the testosterone testing of intersex athletes - specifically in female sports. I support trans athletes in all sports.
- 7 anonymous Though I am not and never have been a sporty person, I can imagine how trans folks who are passionate about their sport could feel, being discriminated against and forced to compete against people of their assigned gender at birth, thus segregating them from their true gender in an important way. Sport exemption is fair in certain circumstances (such as in power lifting) and under certain conditions, such as the trans person in question having a very high muscle mass or some other physical advantage. However, in most situations, trans people should be able to compete in leagues that align with their gender identity.
- 8 anonymous Where these attributes may give and “unfair advantage”
- 9 anonymous No but I am not involved in the sporting world.
- 10 anonymous Trans people are forced to compete with their assigned gender at birth, which may prevent them from participating at all for personal reasons. In low stakes community games, this sort of regulation is completely unnecessary.
- 11 anonymous Intersex women who were assigned female at birth but have naturally occurring higher testosterone have been discriminated due to this rule and rules like it. And have been asked to take medication to reduce their hormones. It isn't right to ask someone to take drugs to make them more like the others when their advantage is naturally occurring. Would you ask someone to amputate their limbs, so they have the same size limbs as someone they are competing against because they have a natural height advantage? Would you ask someone to wear a wig because they are naturally bald, and it gives them more aerodynamics? Would you ask someone to take drugs to lower their muscle mass so everyone in weightlifting is at the exact same muscle mass so we can see really who is the best? Sport is full of natural advantages and it's not fair for people to be excluded because their hormones aren't what some silly rule tells them that they're meant to be.

12 anonymous Yes, many trans athletes are unable to play in their chosen sport due to exclusions like this. Research indicates that trans athletes rarely go on to outperform their competitors after transitioning. I have found 2 trans athletes that post transition have been able to perform at an elite level that outstrips the competition. Both of these athletes were world champions in their sport prior to transitioning. Both were skill driven sports rather than physically driven.

13 anonymous A lot of transwomen after 2 year of hormone therapy have lower on average performance and lower mean T scores than women with high Oestrogen scores, despite this they are disallowed from competing and are effectively disallowed from participating meaningfully in the sport

14 anonymous What would be unfair? Robbing biological women from the opportunity to compete in professional sport because transwomen — who have the strength, stamina and physique of a male person — are taking their opportunities.

15 anonymous Sports is not fair to begin with. There should be as little exemptions as possible. This of course doesn't mean have no exemptions but if it's something based on someone's assigned sex and how they identify now that is not good enough. There should be more in elite sports compared to localised sports and only when very specific things affect and cause a disadvantage like hormone levels and weight class.

16 anonymous This is a ridiculous question, asking if strength, stamina and physique should restrict would apply to cis women as well. Just outrageous. There are other issues too for people wanting to participate who are outside of the gender binary.

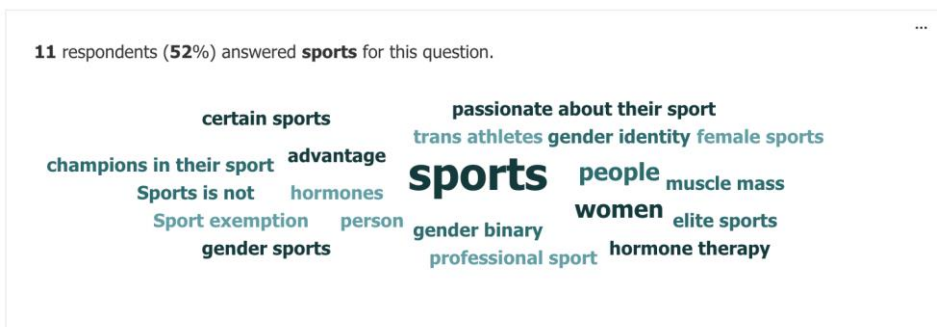
17 anonymous No. I will say that sport should be enjoyed by anyone who wishes to partake in it.

18 anonymous People are all born into different body types that lend itself well to certain sports. Gender identity is part of that spectrum and should not stop people participating

19 anonymous no

20 anonymous Only media references, I am not personally involved in any competitive of team sporting activities.

21 anonymous There are large variations in human ability even within the cisgendered communities. This variance is as large as any perceived variance between a cisgendered person and a transgendered person.



**Question 40:** Do you have any other suggestions about the sport exemption?

- 1 anonymous School and community sport is about participation and inclusion. There need to be clear guidelines to prevent discrimination.
- 2 anonymous Only trans persons who never went through natural puberty should be allowed to participate in sports of their gender identity.
- 3 anonymous See above
- 4 anonymous I don't think anyone takes their gender identity or non-identity lightly, go with how the individual defines themselves, host open (gender non-prescriptive) competitions that don't favour particular physical attributes, but cover a range of different, but equally valued physical attributes, e.g., flexibility, valance, speed, agility, endurance, height, lightness, stamina, tact, intuition, technique, skill, etc.
- 5 anonymous Make a fair rule, then stick to it, rather than keep changing the rule when a prodigy arises. Such changes suggest Trans people are only allowed to complete, as long as they always loose.
- 6 anonymous Base it on (extremes) of Testosterone levels etc if that's the concern - but if it's in comparison with other competitors what difference is it
- 7 anonymous No but I am not involved in the sporting world.
- 8 anonymous No, I don't know enough about transitioning and sports
- 9 anonymous My only suggestion is that people shouldn't be misgendered based on which team they play for. If a transwoman is playing on the men's team. She is a girl on the men's team. And that there should be rules in place that allow her to play on the women's team at some point. And that point shouldn't be one that excludes cis women and intersex people.
- 10 anonymous Athletes already have highly varied hormone levels. Once a person commences hormone therapy, they should be able to compete after a period of time to allow their body to adapt/ change. Some intersex people that identify as women are far more masculine than any trans person I know. Judgement cannot be made on strength and physique alone.
- 11 anonymous So, I think this really should be up to a sport and or medical body. If a trans woman has no benefit outside the norm when compared to other attributes like Race and nationality, then they ought not to be discriminated against.
- 12 anonymous There needs to be more studies in trans sports. And in general sports needs to be more inclusive
- 13 anonymous Male and female only - according to sex at birth.
- 14 anonymous Caster Semenya. Restrictions on trans women impose restrictions on cis women.
- 15 anonymous Yeah, get rid of gender categories for participation, at the very least at an amateur level.



- 16 anonymous More study needs to be done. There is no evidence saying that transwomen outperform their cis counterparts, but there is also no evidence supporting they perform the same.
- 17 anonymous Base it on hormone levels if needed
- 18 anonymous consider the physiological differences of trans people the same as any other physiological variation among athletes such as height, high red blood cell count, large lung capacity, low levels of lactic acid, etc. Trans people should not be punished and/or excluded from sports for possessing different physical characteristics, when physical variance is a normal component of sport and competition.
- 19 anonymous no
- 20 anonymous People should be allowed to compete in their gender regardless if this was their gender at birth or not. This should include allowances for non-binary individuals who do not conform to the gender binary.



### 7.15 Work with children

This exemption permits discrimination where people who are transgender and or intersex are to work with children. The exemption perpetuates offensive stereotypes about risk to children from people from these groups and is not aligned with contemporary community attitudes.

**Question 41:** Do you have any examples of where the work with children exemption is creating an unfair situation for people?

- 1 anonymous The beautiful, open-minded attitudes and life experiences of these individuals would do wonders to educate children they work with. This is discriminatory against trans and intersex people as they are systematically prohibited from working certain jobs, which goes against aforementioned anti-discrimination policy.
- 2 anonymous It is unfair to say intersex people should not work with children. Intersex people did not choose to change their bodies. Intersex is NOT transgender and should never be lumped in with transgender. It causes so much more discrimination against intersex individuals because many people believe they are the same which is absolutely not true.
- 3 anonymous How dare anyone deem another unfit, based on some outdated rubbish that is a so-called protection. Religion is the worst for having children affected by their own kind. That needs to be examined.

- 4 anonymous Trans Men, Gay Men, and Lesbian Women are very successful in the social services industry, Transwomen and Intersex folk are regarded as a paedophiles, for any small excuse. I wear pink, or purple, they are girl's colours, therefore I (must) be a paedophile. I allowed myself to be raped as a child, therefore I (must) be a paedophile. I am way stronger than most Cis Men, therefore I (must) be a violent person. I have a sharp tongue for those who sprout ignorant trash talk, so I must be an SJW, (which incidentally I am since I work with suicidal adults.)
- 5 anonymous Anywhere where this occurs is toxically abhorrent!
- 6 anonymous Trans people and those in the LGBT+ group are NOT inherently dangerous to children, despite decades of right-wing propaganda to paint them as otherwise. To disqualify trans and gender diverse people from working with children is to deny them a significant portion of the workforce, one which some trans folks may be passionate about. It may also result in the further ostracization of individuals from their cisgender peers, creating additional room for dysphoria and the myriad of problems that come as a result of said dysphoria.
- 7 anonymous EVERY situation. This is outrageous. WHAT GROUNDS!
- 8 anonymous Trans and intersex people should be allowed to work with children
- 9 anonymous People might be missing out on volunteer or paid work opportunities and children may be missing out in wonderful role models
- 10 anonymous No but I am not involved in the childcare industry.
- 11 anonymous Disallowing trans and intersex people from working with kids because they are trans/intersex just is discrimination and unfair no matter how you look at it.
- 12 anonymous My partner is transgender, she is worried she could lose her job if she doesn't pass well enough.
- 13 anonymous Yes. It means that my younger sibling, someone on their own gender discovery journey, could lose teachers that understand and support them. Could lose teachers that are like them. And leave them feeling alone and afraid. It means that trans and intersex children have less access to trans and intersex adults. And may even not be able to imagine themselves as adults and see no future for someone like them, like I did once I realised, I was trans.
- 14 anonymous Trans and intersex people should be able to work with children provided they have no other criminal records that prevent them from doing so.
- 15 anonymous This is the dumbest thing in the world. Calling trans people and gay people pedos has been a horrible thing that has happened to many of my friends despite them being in long term meaningful relationships with people the same age as them. The exemption should be stripped.
- 16 anonymous It will exclude an already discriminated group in society and there's always the possibility that there is a trans child. The more exclusion there is the easier it is for people to be outwardly offensive then that leads down a dark path where trans and intersex people are seen as other and further discrimination will reign

17 anonymous It was certainly on my mind as I tutored high school aged children at a university science experience program. If one of those kids told their parents that a trans woman was teaching them physics and the parent had a problem with that, then they could have caused me a lot of trouble. It has a chilling effect on the inclusion of transgender and intersex people (and sex workers).

18 anonymous I don't have a personal example, except to say that I am probably unreasonably cautious in this regard, which is annoying given that I, of all people, am aware I do not pose a risk to children. I'd also say that I think it's mostly religious orgs that restrict in this way. Given the child abuse that they exerted on our people, this is outrageous.

19 anonymous No. I will say though that this is only projecting transphobia onto children. In fact, have a gender diverse mentor can have its benefits as it can encourage children to break gender stereotypes without ridicule from the adults, they seek validation from.

20 anonymous never see anyone trans working with children, so arguably always. This means trans children grow up never seeing a role model, perpetuating isolation and shame which may contribute to high rate of suicide.

21 anonymous Yes, I was specifically told Not to apply for job positions in a public primary school as I am a Transgender woman - point blank I hold a BlueCard in my Deadname and gender. I am currently in the process of changing details. The outcome is unknown. If the results, is I can no longer hold this card, it will kill off 75% of my business revenue and I will not rest on that outcome - I will be happy to lead legal action against the state.

22 anonymous There is no evidence to suggest that transgender people are any more of a risk to children and others than cisgendered people. There should be no difference in approach. As long as any person can fulfil the requirements to obtain a positive notice blue card as part of the working with children check they should be considered a safe and fit person to work with that community.



7.16 Assisted reproductive technology (ART)

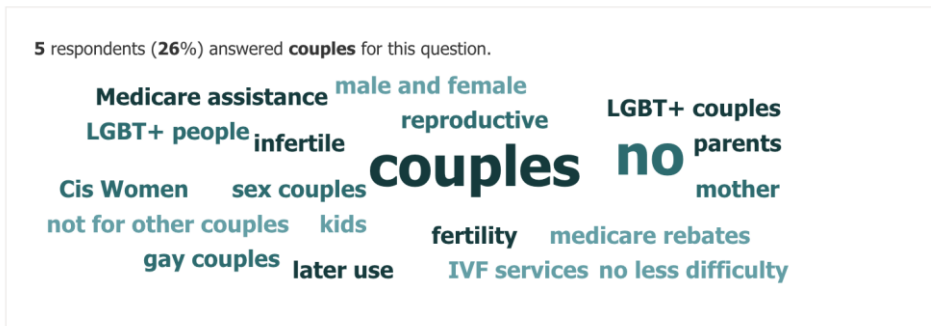
This exemption allows for discrimination in who is offered IVF and artificial insemination, based on sexuality or relationship status. The exemption is also not aligned with modern community attitudes and the Review is not aware of this exemption being used in practice.

**Question 42:** Do you have any examples of where the ART exemption is being relied on to deny fertility services?

Queensland Council for LGBTI Health

- 1 anonymous I understand that you can get Medicare to help cover costs when you're having difficulty conceiving when you're a cisgender male and female couple, but not for other couples, who have no less difficulty conceiving no matter how much they may try! It makes it feel like the system is punishing you for being queer when it has the perfect solution to creating a family kept behind closed doors.
- 2 anonymous I understand that the fertility services get offered to everyone, this is really out of date
- 3 anonymous IVF services to gay couples in private practices
- 4 anonymous Same-sex couples cannot apply for Medicare assistance without being classified as "socially infertile", which is painfully offensive. Same sex couples are also prevented from accessing bulk bill IVF services, even if they have their donor situations sorted, because they're only available to heterosexual married couples!!
- 5 anonymous Doctors are quite keen to remove my female reproductive organs, despite the fact I am a Trans Woman and Intersex. Meanwhile my desire is to have any viable eggs harvested, so I can be a mother via a willing surrogate in future. Many Barren Cis Women have given birth via Uterus transplant, although the technology has not yet been tested on Transwomen.
- 6 anonymous My wife was told she needed a good man
- 7 anonymous Fertility groups could possibly attempt to deny reproductive assistance to LGBT+ couples and this can create a stressful, and terrifying situation for potential parents who are seeking a fertility provider. This may cause undue stress and/or mental health issues in couples seeking to have a child.
- 8 anonymous "SOCIALY Infertile" Medicare rebates as opposed to 'medically infertile' rebates being twice the amount of money
- 9 anonymous We were never offered Medicare rebates for infertility treatment even though it clearly wasn't working
- 10 anonymous No but I am not involved in this industry.
- 11 anonymous The government should not be able to regulate who gets to have kids, this often leads to eugenics and the fear of LGBT+ people "forcing" their kids to be LGBT+ etc
- 12 anonymous Same sex couples cannot choose to use the umbilical cord blood to store cells for later use according to the [REDACTED] hospital QLD
- 13 anonymous Remove it. Everyone has the right to kids and these services.
- 14 anonymous I'm not too familiar with this exemption but as long as they are seen as a fit parent and want it there is no need for it
- 15 anonymous I know some people (that I'm close to) who were directly affected by this, but it hasn't happened to me.
- 16 anonymous Not personally.

- 17 anonymous no
- 18 anonymous Nil
- 19 anonymous No



### 7.17 Other information

**Question 43:** Is there anything else you would like to tell us?

- 1 anonymous Thank you for doing this.
- 2 anonymous Intersex is not transgender. If is insulting to say they are similar in any way. Transgender people who change their bodies choose to do so knowing the risk and knowing the world view. Intersex people have no say whatsoever.
- 3 anonymous Discrimination of any kind is life effecting; life altering and holds a person back from their best potential. No one body should hold the right to discriminate against another, this is not for debate. Human Rights belong to each individual and should never be withheld.
- 4 anonymous This Religious Discrimination Bill is fucked and needs to be squashed back into the vile, hateful place from which it has emerged.
- 5 anonymous The number of Intersex forced sterilisation surgeries in Queensland has rumoured to have increased since the 2006 report suggesting the procedure be banned.
- 6 anonymous The religious discrimination cannot go ahead. If it does, then LGBT+ and other highly marginalised members of society will be put at risk every day by partaking in basic and essential tasks such as work, shopping, accommodation, etc. Additionally, while the religious anti-discrimination bill is supposed to protect religious rights and beliefs, it will also lead to further division and antagonisation from members of society who claim that due to their faith, they can discriminate against religious bodies (especially Christian discrimination against Muslim minorities). Ultimately, this bill is not a religious protection bill, it's a Christian protection bill.
- 7 anonymous Hope this helps in whatever way its intended to
- 8 anonymous No.
- 9 anonymous Abolish legal gender markers. They aren't useful.
- 10 anonymous I appreciate this being looked over and look forward to seeing the changes. I have been attempting to advocate for increased education of LGBTQ+ people in public facing jobs

Queensland Council for LGBTI Health

and the medical industry for a while now. Bringing it up with Senator Amanda Stoker during Local and Vocal in 2020. I am excited to see that this may encourage an increase in that.

11 anonymous Religious ideologies that promote discrimination are abhorrent. To the extent that religious ideologies promote discrimination and harm against people, the government should protect the victims and suppress the religious ideology.

12 anonymous I was told that due to using a donor I could not use the umbilical cord blood and store it as I did not have the donor's consent. This is completely ridiculous. As the mother and legal guardian of the baby I should have the right to store the cells of the child I have birth to.

13 anonymous These upgrades are all well and good but hopefully the reform to gender/sex on documents rolls in way before this.

14 anonymous If the person is seen as a fit parent in terms of, they want this child and seem loving then there isn't really a reason that I see

15 anonymous Stay away from gender quotas

16 anonymous I strongly suggest you reconsider the use of "transwoman," it's almost invariably a term used by transmisogynist.

17 anonymous I'll just put some suggestions here that I don't think were bought up. • I think that person identification, such as drivers' licence, should have the option to include biological sex and gender, or the option to remove biological sex completely and only list gender. • I think birth certificates should have the option to list a gender as well as sex and focus more on gender than sex. It is my personal opinion that trans individuals be able to list their sex as "male to female" or "female to male" instead of just having "male", "female" or "intersex". • Speaking of which, an intersex option should be available for birth certificates and all other identification. • All applications, whether application to new doctors' office, job application, government benefits, should have gender instead of sex, or have sex indication listed as optional. I personally get confused when filling out applications, especially medical ones, as I identify as male and look male, but am still female; a piece of information that could be important to a doctor as well as give them a greater understanding as to who I am.

18 anonymous no

19 anonymous Although I now live in NSW, I was born and lived in Central QLD until the age of 22, when I moved to Sydney out of fear of being bashed or killed for being gay. I returned to visit my parents in the early 2000s and was told by one of their neighbours that 'the only good poof, is a dead poof', so I guess things haven't changed too much there. I relocated from Sydney to Lismore 24 years ago. Lismore, probably because of the Aquarius festival and subsequently attracting alternative thinkers is a safe and respectful rural community in which to be gay.

20 anonymous I feel PLWHIV are still discriminated against, treatment has come so far but the stigma is still strong, which was from the fear and highly stigmatising campaigns. Insurance and other personal protection policies are impossible to get, if we do we pay 100% loading on them.



### 7.18 Demographics

#### 'About you'

These questions help us to understand more about who we are hearing from. Most of these questions are optional, so you can choose not to answer them.

Question 44. What is your postcode?

55 Responses

Latest Responses. "4505". "4101"

Latest Responses

"4505"

"4101"

3 respondents (6%) answered 4030 for this question.

4030 4152 4502 4019 4170 4655 4670 4870 3556 4032 4053 4064 4103 4120 4121 4151 4304 4570  
4720 5074

Question 45. What is your age range?

Under 18	2
18-24	14
25-34	23
35-44	16
45-54	9
55-64	6
65 and over	1
Prefer not to say	0

Question 46. Which of the following best describes your gender?

## Queensland Council for LGBTI Health

Female	40
Male	20
Non-binary	11
Prefer not to say	0

Question 47. Is your gender different to what was presumed for you at birth?

Yes	22
No	46
Prefer not to say	3

Question 48. Were you born with an intersex variation? An intersex variation can include variations in chromosomes, gonads, sex hormones, or genitals that do not fit the gender binary definitions of male or female.

Yes	3
No	65
Prefer not to say	2

Question 49. Which of the following best describes your sexual identity?

Lesbian	17
Gay or homosexual	11
Straight or heterosexual	11
Bisexual	9
Queer	8
Asexual	5
Pansexual	8
Prefer not to say	2

Question 50. What is your HIV status?

Positive	1
Negative	60



Unknown	9
Prefer not to say	0

Question 51. Do you identify as Aboriginal, Torres Strait Islander, or South Sea Islander?

Yes, Aboriginal	5
Yes, Torres Strait Islander	0
Yes, South Sea Islander	0
Prefer not to say	3
No	62

Question 52. Do you identify as a person with a disability?

Yes	27
No	41
Prefer not to say	2

Question 53. Do you identify as a person who is blind or has low vision?

Yes	6
No	64
Prefer not to say	0

Question 54. Do you speak a language other than English at home?

Yes	5
No	65

## 8. Conclusion

### 8.1 Community partner organisations

The Queensland Human Rights Commission (the Commission) is working with partner organisations and Queensland communities in consulting for the review of the Anti-Discrimination Act.

Discrimination may mean different things for many people in our communities, and is important to address for many reasons, such as improving safety and lives of our communities and people, and

the act is being reviewed for the first time since 1991. This is our opportunity with you to tell our stories and talk about this important piece of legislation which affects our lives in many ways.

## 8.2 Thanks and acknowledgements

We acknowledge and thank Aboriginal, Torres Strait and South Sea Islander people who told their stories here, as they, their histories, elders and customs are the first story tellers of this land. We thank our community organisation partners Queensland Positive People (QPP) and Respect Inc. The work they do for our communities is vital in shaping a world for its members and communities to live healthy lives, and equally, free from discrimination. We would like to thank all communities, people and their friends, families allies and support people who assisted in making this submission possible. Their stories are precious, rich and so important to shaping the future of our laws and protections. We would like to acknowledge the lived experiences, struggles, adversity and resilience of our story tellers. Experiences shared here will go on to help improve protections and the wellbeing of our communities and people.

## 9. References

### 9.1

1. Anti-Discrimination Act Survey 2022, QC
2. Respect. Inc discrimination survey 2022
3. Private Lives 3 [PL3], The Health and Wellbeing of LGBTIQ People in Australia, A. O. Hill, A. Bourne, R. Mcnair, M. Carman, A. Lyons.
4. Australian Research Centre, in Sex, Health and Society, A Closer Look at Private Lives 2 [PL2], Addressing the mental health and well-being of lesbian, gay, bisexual and transgender, LGBT Australians. W. Leonard, A. Lyons and E. Bariola
5. Inquiry into Social isolation and Loneliness, QC submission 2021
6. Inquiry into Serious Vilification and Hate Crimes, QC submission 2021
7. From an online survey conducted Oct.–Dec. 2020 of 34,7591 LGBTQ youth between the ages of 13–24 across the U.S.
8. World Health Organisation, <https://www.who.int/health-topics/social-determinants-of-health>
9. Queensland Public Health Act 2005.

## 10. Document definitions

<b>LGBTI</b>	Lesbian, Gay, Bisexual, Transgender, Intersex
<b>HIV</b>	Human Immunodeficiency Virus
<b>PLHIV</b>	People living with HIV
<b>QC</b>	Queensland Council for LGBTI Health
<b>QPP</b>	Queensland Positive People
<b>Respect Inc.</b>	Respect Incorporated
<b>Sexuality</b>	sexual feelings, thoughts, attractions and behaviours towards other people.
<b>Gender</b>	the state of being male or female in the context of cultural and social values.
<b>Gender identity</b>	A person's sense of being male or female, both or neither resulting from a combination of genetic and environmental influences.

<b>Intersex</b>	an umbrella term for naturally occurring variances in sex characteristics, such as external genitalia, internal reproductive organs, hormones, chromosomes and DNA. There are over 200 different variances including AIS, Klinefelters and Turners Syndrome
<b>IHRA</b>	Intersex Human Rights Australia
<b>Sex characteristics</b>	the division of male and female on the basis of reproductive organs.
<b>Respondents</b>	A person or persons who have responded to the survey referenced in this document.
<b>ref</b>	Reference

Thank you for the chance to provide you a submission in response to the Queensland Human Rights Commission (QHRC) or 'The Commission' into your review of the Queensland Anti-Discrimination Act 1991 ('the Act'). QC hopes to be a part of consultations into the future with the Commission so that more voices can be heard. To get in touch with us, please feel free to contact us via email at [info@qc.org.au](mailto:info@qc.org.au), phone 3017 1777 or our website info [www.qc.org.au](http://www.qc.org.au)

Yours sincerely



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