



BACKGROUND PAPER

City of Monash LGBTIQA+ Background Paper

Introduction

Monash Council is committed to ensure a welcoming, safe and inclusive city for all. In recognition of the barriers that the LGBTQIA+ community faces, Council has resolved to develop an LGBTIQA+ Action Plan to be considered in 2022. This background paper has been undertaken to inform the Action Plan.

It consists of:

- An introduction setting the context for the development of the City of Monash LGBTIQA+
 Action Plan
- Demographic and health and wellbeing information about the City of Monash community
- An overview of LGBTIQA+ people and families who live, work and play in the City of Monash
- An overview of broader LGBTIQA+ community needs and expectations, including local and state government
- Legislative and policy context
- Related Monash policies, strategies, and plans.

Community Profile of Monash

The estimated population of the City of Monash for 2022 is 206,868 and is forecast to grow to 249,287 by 2041.¹

Age profile

Overall, the population is slightly older than the Greater Melbourne average with a median age of 37 years compared to 36 for Metropolitan Melbourne.

While we have a slightly larger percentage of seniors' (65+ years) compared with Greater Melbourne (17.2 compared to 14.1%), we also have a higher proportion of young people categorised as 'tertiary education and independence' (18 - 24 years) compared to Greater Melbourne (13.3% compared to 10.0%)²

Traditional owners

The City of Monash is on the traditional lands of the Wurundjeri Woi Wurrung and Bunurong People.

As of 2016, 0.2% of Monash population identified as Aboriginal or Torres Strait Islander (below the Victorian average of 0.8%).³

Cultural diversity

Monash has a high level of cultural diversity, with half of our residents born in another country. The 2016 census indicated that Monash residents are more likely to have been born overseas compared

¹ Australian Bureau of Statistics Census of Population and Housing 2016 compiled and presented by .id The population experts (2018) City of Monash Community Profile Population Summary, City of Monash, retrieved 12/05/2022, https://profile.id.com.au/monash/population ² Australian Bureau of Statistics Census of Population and Housing 2016 compiled and presented by .id The population experts (2018) City of Monash Community Profile Population Highlights, retrieved 12/05/2022, https://profile.id.com.au/monash/highlights-2016

³ Aboriginal & Torres Strait Islander origin | City of Monash | atlas.id

to other Melbournians (48.9% compared to 33.8%) ⁴and speak languages other than English at home (50.1% compared to 32.3%). The top three overseas countries of birth are China (12.5%), India (5.3%), and Sri Lanka (3.6%) and the most frequently spoken languages are Mandarin, Greek, Cantonese and Sinhalese.⁵

People with a Disability and Carers

In 2016, 8,836 people or 4.8% of the population in the City of Monash reported needing help in their day-to-day lives due to a disability. This figure is close to the Metropolitan Melbourne average of 4.9%. With 16,996 carers providing unpaid assistance in the 2016 census, City of Monash residents were as likely as other Melbournians to provide unpaid care to a person with a disability, long term illness or old age.

Housing tenure

In the City of Monash, households are more likely to be purchasing or fully own their home (65%), when compared to renting privately (25.5%) or living in social housing (2.2%) in 2016⁷.

LGBTIQA+ Population Demographics

LGBTIQA+ people are valued members of our community who add to our diversity and make Monash a better place to live.

Diversity in sexual orientation, gender identity and sex characteristics is prevalent across the community. However, due to a lack of available and reliable population data for Victoria or nationally, very little is known about the demographic profile of LGBTIQA+ people and communities in Monash. The challenge of understanding the makeup of LGBTIQA+ communities is further reinforced by the fact that LGBTIQA+ people remain relatively hidden within mainstream community settings in Monash. This is similar to other outer metropolitan, rural and regional areas, where research has indicated that LGBTIQA+ people living more than 10km from the city experience higher levels of discrimination, social isolation and street-based harassment.⁸

2016 census data on same sex families indicates at least 219 of Monash families are same-sex couples. It should be noted that this represents only a fraction of the total LGBTIQA+ community. This is because census data fails to identify LGBTIQA+ people that are not in a relationship, people who are not out to their families, or the whole spectrum of the LGBTIQA+ community. The census numbers should therefore be seen as a considerable under-count of the LGBTIQA+ community in Monash.

⁴ Australian Bureau of Statistics Census of Population and Housing 2016 compiled and presented by .id the population experts City of Monash Community Profile Birthplace (2018) retrieved 12/05/2022, https://profile.id.com.au/monash/birthplace

⁵ Australian Bureau of Statistics Census of Population and Housing 2016 compiled and presented by .id the population experts City of Monash Community Profile Language (2018) retrieved 12/05/2022 https://profile.id.com.au/monash/language

⁶ .id the population experts (2018), City of Monash Community Profile Need for assistance, retrieved 12/05/2022, https://profile.id.com.au/monash/assistance

⁷ id. the population experts (2018) City of Monash Community Profile Housing tenure, retrieved 12/05/2018, https://profile.id.com.au/monash/tenure

⁸ James Morandini (et al), 'Minority Stress and Community Connectedness among Gay, Lesbian and Bisexual Australians: A Comparison of Rural and Metropolitan Localities' (2015) 39(3) Australian and New Zealand Journal of Public Health 260

⁹ Australian Bureau of Statistics (2018) Same-Sex Couple Indicator by Monash and Male same-sex couple, Female same-sex couple [Census TableBuilder], accessed 16 May 2022

It is generally accepted that people of diverse sexual orientations, sex and gender identity account for around 11% of the population ¹⁰. The Victorian Population Health Survey estimated that 5.7% of Victorian adults are LGBTIQA+ ¹¹. This means that up to 22,540 or more LGBTIQA+ people may be residing in Monash.

Although data regarding LGBTIQA+ people in Monash is limited, anecdotally, we know that there are an increasing number of people in the municipality who identify as part of the LGBTIQA+ community through our connection with the Monash LGBTIQA+ Advisory Committee, as well as participation in the events and celebrations Council holds, such as Pride Swim night and activities held during the International Day Against Homophobia, Biphobia and Transphobia (IDAHOBIT).

It is important to note that this lack of data about LGBTIQA+ communities put this cohort at a significant disadvantage in terms of enabling policy makers and service delivery agencies to resource initiatives to improve the health and wellbeing of LGBTIQA+ individuals and communities.

LGBTIQA+ Barriers

There is increasing acceptance of LGBTIQA+ people in society and greater visibility in the media. LGBTIQA+ people generally live healthy, connected, happy and positive lives. However, despite legislative advancements and changes in community attitudes, many LGBTIQA+ people continue to face higher levels of discrimination, stigma and exclusion. This leads to poorer health, economic, social and mental health outcomes. Across a range of measures, it has been well documented among research in Australia and overseas, that LGBTIQA+ people face a range of barriers that leads to significant health and wellbeing disparities, compared to the broader population, including:

- Higher rates of social exclusion, verbal and physical abuse and sexual assault¹²
- Poorer mental health such as anxiety, depression, psychological distress, self-harm and risk of suicide. The Victorian population health survey for example found 44.8% of LGBTIQA+ adults had been diagnosed with anxiety or depression compared with 26.7% of non-LGBTIQA+ adults and 73.2% have considered suicide compared with 13.2% of the general Australian population11
- Higher rates of isolation and rejection as well as reduced social participation and engagement, whereby LGBTIQA+ adults were more likely to never or not often feel valued by society 11
- Considerably higher rates of alcohol and drug use 12, with research indicating between two to four times more than non-LGBTIQA+ people ¹³

¹⁰ Department of Health. (2019). *Aged Care Diversity Framework, Actions to support Lesbian, Gay, Bisexual, Trans and Gender Diverse and Intersex elders: Consultation Report.* NLH.0001.0001.0043.pdf (royalcommission.gov.au)

¹¹ Victorian Agency for Health Information (VAHI). (2020). The health and wellbeing of the lesbian, gay, bisexual, transgender, intersex and queer population in Victoria: Findings from the Victorian population health survey 2017.

¹² Hill AO, McNair R, Carman M, Bourne A, Lyons A. Private Lives 3: The health and wellbeing of LGBTIQ people in Australia. Melbourne: Australian Research Centre in Sex. Health and Society: 2020.

¹³ Green KE, Feinstein BA. Substance use in lesbian, gay, and bisexual populations: an update on empirical research and implications for treatment. Psychol Addict Behav. 2012 Jun;26(2):265-78. doi: 10.1037/a0025424. Epub 2011 Nov 7. PMID: 22061339; PMCID: PMC3288601.

- Poorer life outcomes as a result of structural inequalities and trauma including LGBTIQA+ people being at least twice as likely as non-LGBTIQA+ people to have ever experienced homelessness ¹⁴ and more likely to leave school early
- LGBTIQA+ people often feel the need to hide their sexual orientation or gender identity. The *Private lives 2* report found 44% usually hide their sexuality or gender in public and over one third hide their sexuality or gender when accessing services¹⁵
- Avoidance or delay in help seeking behaviours because of real or feared prejudice within service settings.¹⁶

LGBTIQA+ Intersectionality

It is important to recognise that the LGBTIQA+ community is made up of many distinct groups from across a broad and intersecting spectrum of identities. When considering the barriers and needs of the LGBTIQA+ community, we also need to consider intersectionality. Being LGBTIQA+ is only one aspect of someone's identity. As well as being diverse in their sexuality, gender identity or sex characteristics, LGBTIQA+ people can be diverse in other ways.

Intersectionality is the concept that alongside facing barriers for being LGBTIQA+, other forms of discrimination or disadvantage may exist including those related to age, disability, ethnicity, gender identity, race (including Aboriginal and Torres Strait Islander descent), religion, and/or sexual orientation. When people experience two or more intersecting forms of discrimination or disadvantage, it can be compounded.

For example, an Aboriginal person with a disability may be disadvantaged based on their sexuality or gender identity when trying to use disability or Aboriginal health services. The same person may face ableism or racism when accessing LGBTIQA+ spaces.

When considering the barriers and needs of the LGBTIQA+ community, it is important that the multiple layers of identities, privileges and disadvantages experienced by LGBTIQA+ people is acknowledged.

Aboriginal and Torres Strait Islander people

- Aboriginal and Torres Strait Islander LGBTIQA+ people often feel invisible or marginalised and face discrimination within the LGBTIQA+ community, Indigenous communities and broader society¹⁷
- Compared with the proportion in non-LGBTIQA+ adults in Victoria, a significantly higher proportion of LGBTIQA+ adults are Aboriginal and Torres Strait Islanders¹⁸

¹⁴ McNair, R., Andrews, C., Parkinson, S. & Dempsey, D. 2017. *LGBTQ homelessness: Risks, resilience, and access to services in Victoria. Final report.* Melbourne: University of Melbourne.

¹⁵ Leonard, W., Pitts, M., Mitchell, A., Lyons, A., Smith, A., Patel, S., Couch, M. & Barrett, A. 2012. Private Lives 2. The second national survey of the health and wellbeing of gay, lesbian, bisexual and transgender (GLBT) Australians. Melbourne Australian Research Centre in Sex, Health and Society. La Trobe University

¹⁶ VLGA (2020). Rainbow resource for Victorian councils: Supporting lesbian, gay, bisexual, transgender, intersex and queer diversity and inclusion in local government

¹⁷ Hill, B., Uink, B., Dodd, J., Bonson, D., Eades, A. & S. Bennett (2021) Breaking the Silence: Insights into the Lived Experiences of WA Aboriginal/LGBTIQ+ People, Community Summary Report 2021. Kurongkurl Katitjin, Edith Cowan University. Perth. WA.

¹⁸ Victorian Agency for Health Information 2020. Findings from the 2017 Victorian Population Health Survey, State of Victoria, Melbourne.

- Due to the barriers faced with accessing mainstream health programs, Aboriginal and Torres
 Strait Islander LGBTIQA+ people are more likely to be at risk for violence, sexual abuse, HIV and
 AIDS and experience much higher rates of self-harm and suicide 1920
- Racism is common and widespread, occurring within the LGBTIQA+ community, services, public spaces and health settings and leads to high levels of psychological distress²¹
- There is a historical underrepresentation of Aboriginal and Torres Strait Islander peoples in research on LGBTIQA+ issues²²

People from Multicultural and Multi-faith backgrounds

- Multicultural communities may have a poor understanding of LGBTIQA+ diversity, and LGBTIQA+ communities often do not adequately embrace cultural diversity²³
- LGBTIQA+ people from Culturally and Linguistically Diverse backgrounds often experience additional stressors associated with race-based discrimination and significant conflict between their culture and their gender or sexuality
- LGBTIQA+ people of faith may experience trauma and rejection from within their faith communities, and unique struggles reconciling their sexual or gender identity with their faith²⁴.

People with Disabilities

- LGBTIQA+ people with a disability may experience ableism by LGBTIQA+ communities and discrimination or prejudice based on their sexual orientation or gender identity by other people living with a disability
- A lack of inclusive supports and services has been seen to result in isolation and vulnerability, bullying, mental health issues and legal issues, and risk-taking behaviour or self-harm²⁵
- People who are LGBTIQA+ with disabilities are often treated as heterosexual or non-sexual and, due to discrimination and fear of losing vital support, are often reluctant to 'come out' and express their sexual orientation, gender identity or intersex status among service providers and carers²⁶.
- LGBTIQA+ people with a disability often experience lower levels of education, lower income and self-rated health, as well as higher rates of violence, abuse and neglect than LGBTIQA+

¹⁹ NITV (2017) New Report Shows Need For Indigenous LGBTQI Suicide Prevention Measures', National Indigenous Television, https://www.sbs.com.au/nitv/nitv-news/article/2017/02/16/new-report-highlights-need-indigenous-lgbqti-suicide-prevention-strategies, retrieved 12/05/2022

²⁰ Creative Spirits (2021) LGBTI Aboriginal people – diversity at the margins - Creative Spirits, retrieved 12/05/2022 https://www.creativespirits.info/aboriginalculture/people/lgbti-aboriginal-people-diversity-at-the-margins#fn5

²¹ Ferdinand, A., Paradies, Y. & Ma, K. 2012. Mental health impacts of racial discrimination in Victorian Aboriginal communities: the Localities Embracing and Accepting Diversity (LEAD) Experiences of Racism Survey. Melbourne: The Lowitja Institute

²² Australian Human Rights Commission (n.d) *Brotherboys, sistergirls and LGBT Aboriginal and Torres Strait Islander peoples*. Retrieved 12/05/2022, https://humanrights.gov.au/our-work/lgbti/brotherboys-sistergirls-and-lgbt-aboriginal-and-torres-strait-islander-peoples

²³ Pallotta-Chiarolli, M. (2016) Supporting Same-Sex Attracted and Gender Diverse Young People of Multicultural and Multifaith Backgrounds. Melbourne Deakin University.

²⁴ Pallotta-Chiarolli, M. (2018). Safe Spaces, Inclusive Services: Support service access and engagement by LGBTIQ+ Muslims. Melbourne Muslim Collective

²⁵ Victorian department of Health (2015) *Working with LGBTI people with disabilities*, Victorian Government, retrieved 12/05/2022, https://www.health.vic.gov.au/populations/working-with-lgbti-people-with-disabilities

²⁶ Noonan, A., and Taylor Gomez, M., 2010, Who's Missing? Awareness of Lesbian, Gay, Bisexual and Transgender People with Intellectual Disability, Sexuality & Disability 29(2):175-180

people without a disability²⁷

 LGBTIQA+ people may be more reliant on unpaid carers because of their fear of discrimination in services. ²⁸

Older People

- Many older LGBTI²⁹ people have lived through a time when disclosing their sexual orientation or gender identity could result in imprisonment, forced medical 'cures', loss of employment, family and friends
- Past experiences of discrimination, social stigma and legislative inequality mean LGBTI+ older people often have a fear or lack of trust in support services and a reluctance to turn to these services for support ³⁰
- LGBTI elders are more likely to live in poverty and experience homelessness, compared to the mainstream population, due to both the complexity of their experiences and difficulty accessing services³¹
- The fear of or actual experience of discrimination by service providers, based on sexual orientation or gender identity, may result in LGBTI people 'going back in the closet' or hiding their LGBTI+ identities when accessing aged care.³²

Young People

- LGBTIQA+ young people are more likely to experience social exclusion, isolation, rejection, bullying, discrimination, inequality, harassment and violence than other young people³³
- LGBTIQA+ young people are high risk for a range of associated outcomes, such as disengagement from school, alcohol and drug use, housing stress and homelessness and

²⁷ Leonard, W. & Mann, R. 2018. The everyday experiences of lesbian, gay, bisexual, transgender and intersex (LGBTI) people living with disability. No. 111. Melbourne GLHV@ARCSHS, La Trobe University.

²⁸ Barrett, C. & Crameri, P. 2015. An extra degree of difficulty: An evidence based resource exploring the experiences and needs of older LGBTI carers and the carers of older LGBTI people. Melbourne: Australian Research Centre in Sex, Health and Society, La Trobe University, Melbourne Australia

²⁹ Multiple acronyms are used among the community. We use 'LGBTI' here to recognise that historically 'queer' was used in a derogatory manner and can be offensive to some older people in the community

³⁰ Romero, A., Goldberg, S., & Vasquez, L. (2020). "LGBT People and Housing Affordability, Discrimination, and Homelessness". The Williams Institute

³¹ Walton, R & York, F 'Out of the closet out of Options: Older LGBTI People at risk of homelessness, Housing for the Aged Action Group, retrieved 12/05/2022, https://www.oldertenants.org.au/publications/out-the-closet-out-options-older-lgbti-people-risk-homelessness

³² Barrett, C., Whyte, C., Leonard, W. & Comfort, J. 2014. No Need to Straighten Up: Discrimination, depression and anxiety in older lesbian, gay, bisexual, transgender and intersex Australians. Melbourne: Australian Research Centre in Sex, Health and Society, La Trobe University, Melbourne.

³³Hillier L et al. 2010, Writing Themselves in 3: The third national study on the sexual health and wellbeing of same sex attracted and gender questioning young people, Australian Research Centre in Sex, Health and Society: La Trobe University

increased rates of mental health issues, including self-harm and suicide³⁴

- The school environment can be a particularly challenging experience for LGBTIQA+ young people. High levels of homophobia, bullying and discrimination lead to feeling unsafe or uncomfortable at school or education settings and this has a profound impact on their wellbeing and education³⁵
- Abuse and discrimination has been shown to increase the risk of suicidal thoughts, suicide attempts and forms of self-harm among LGBTIQA+ young people. LGBTIQA+ young people are three times as likely as young people in the general Australian population to report high/very high levels of psychological distress (83.3% compared to 27.3%) and more likely to have seriously considered suicide in the past 12 months (59.1% compared to 11.2%) or to have attempted suicide in the past 12 months (11.0% compared to 3.8%).34

Women

- LGBTIQA+ women are disproportionately affected by depression and anxiety and experience higher rates of mental health problems, due to experiences of sexuality and gender-based discrimination³⁶
- The prevalence of substance use among lesbian, bisexual and queer (LBQ) women in Australia is significantly higher than in the general community, which is associated with mental health problems, both as a risk and causative factor ³⁷
- Notably higher numbers of LBQ women have experienced physical or sexual assault compared to gay, bisexual and queer (GBQ) and heterosexual men³⁸
- Many LBQ women face barriers when accessing health care services, including assumptions
 of heterosexuality, general ignorance by healthcare staff of relevant issues (i.e. sexual
 health), issues around whether to come out or not and deliberate silencing (whereby the
 provider was aware of the person's sexual identity but did not acknowledge this
 information in subsequent interactions).³⁹,40

Trans and Gender Diverse people

 Trans and gender diverse (TGD) people report significant experiences of stigma and discrimination, along with higher levels of abuse compared with their LGB counterparts 12

³⁴ Hillier L et al. 2021, Writing Themselves in 4: The Health and Wellbeing of LGBTQA+ Young People in Australia, National Report, , Australian Research Centre in Sex, Health and Society: La Trobe University

³⁵ United Nations 2016, Living Free & Equal: What States are doing to tackle violence and discrimination against lesbian, gay, bisexual, transgender and intersex people, United Nations. Retrieved from http://www.ohchr.org/Documents/Publications/LivingFreeAndEqual.pdf
³⁶ McNair, R.P., Bush, R. Mental health help seeking patterns and associations among Australian same sex attracted women, trans and gender diverse people: a survey-based study. *BMC Psychiatry* 16, 209 (2016). https://doi.org/10.1186/s12888-016-0916-4

³⁷ Pennay, Amy, McNair, Ruth, Hughes, Tonda L, Leonard, William, Brown, Rhonda and Lubman, Dan I 2018, Improving alcohol and mental health treatment for lesbian, bisexual and queer women: identity matters, Australian and New Zealand journal of public health, vol. 42, no. 1, pp. 35-42

³⁸ Wilson, B., (2021) Health and Socioeconomic Well-Being of LBQ Women in the US, The Williams Institute

³⁹ McNair, R.P., Bush, R. Mental health help seeking patterns and associations among Australian same sex attracted women, trans and gender diverse people: a survey-based study. *BMC Psychiatry* **16,** 209 (2016). https://doi.org/10.1186/s12888-016-0916-4

- Rates of sexual violence or coercion are nearly four times higher for TGD people than in the general population⁴⁰
- High rates of diagnoses with anxiety and depression, psychological distress, self-harm and suicidality have been reported among a high number of studies, with a survey of young TGD and non-binary people reporting 75% had been diagnosed with depression and an alarming 48% had attempted suicide⁴¹
- Trans and gender diverse people are high risk for a range of associated outcomes related to stigma and discrimination, including family rejection, adverse childhood experiences such as abuse or neglect, unemployment or underemployment, lower education and homelessness⁴²
- Stigmatising and discriminatory behaviour in healthcare contexts has been found to be a significant barrier to accessing health-related services.

LGBTIQA+ Community Needs

Victorian Whole of Government Strategy findings

Victoria's first Whole of Government LGBTIQ Strategy, provided an opportunity for LGBTIQA+ communities and their supporters in Victoria to identify the issues at a state level that need to be addressed in order to improve the lives of LGBTIQA+ communities.

Through extensive consultation with more than 800 people and organisations across Victoria, seven themes for improving the lives of LGBTIQA+ people were identified:

- Protecting human rights and access to justice
- o Intersectionality and inclusion
- o Representation and participation
- LGBTIQA+ inclusive and accessible services and community
- o Connecting within and between LGBTIQA+ communities
- Data, research and evidence
- o Targets, monitoring and reporting.

VLGA survey

Findings from the Victorian Local Governance Association (VLGA) and Victorian Gay and Lesbian Rights Lobby (VGLRL) 2016 community survey show that these themes also align with perspectives specifically in relation to the role of local government.

The survey found that LGBTIQA+ communities want and expect local councils to:

- o Advocate for and publicly support LGBTIQA+ residents
- o Provide inclusive health and community services
- Consult LGBTIQA+ people on the issues that affect them
- Increase representation and engagement initiatives.

⁴⁰ Callander, D., Wiggins, J., Rosenberg, S., Cornelisse, V., Duck-Chong, E., Holt, M., Pony, M., Vlahakis, E., Macgibbon, J. & T., C. 2018. Australian trans and gender diverse sexual health survey. Report of findings. Sydney: The Kirby Institute, UNSW.

⁴¹ Strauss, P., Cook, A., Winter, S., Watson, V., Wright Toussaint, D. & Lin, A. 2017. *The mental health experiences and care pathways of trans young people*. Perth: Telethon Kids Institute, Perth, Australia.

⁴² Rosenberg, S., Carman, M., Bourne, A., Starlady & Cook., T (2021) *Research Matters: Trans and gender diverse health and Wellbeing: fact sheet*, Rainbow Health Victoria

City of Monash 2018 needs analysis

In 2018, Monash Council undertook an LGBTIQA+ needs assessment. The key themes gathered through community consultations as part of this process are consistent with the themes addressed above and include:

- o Increased representation and engagement
- Access to high quality and inclusive services and facilities
- Increased community awareness and understanding (especially regarding intersectionality)
- o Increased opportunities to provide feedback.

Legislative and Policy Context

The development of Council's first LGBTIQA+ Action Plan is a significant commitment that will not only meet legal requirements but also deliver on a number of key strategies to promote community health, wellbeing and inclusion.

A number of international, national and state laws and frameworks inform Council's work in the LGBTIQA+ space, including:

International Context

- United Nations 'Discriminatory Laws and Practices and Acts of Violence against Individuals
 Based on their Sexual Orientation and Gender Identity' report
- The Yogyakarta Principles

National Legislation

- Sex Discrimination Act 1984
- Human Rights and Equal Opportunity Act 1986
- Same Sex Relationships (Equal Treatment in Commonwealth Laws General Law Reform) Bill
 2008
- Fair Work Act 2009

State and Local Government Legislation

- The Equal Opportunity Act 2010 (VIC)
- The Victorian Charter of Human Rights and Responsibilities Act 2006
- The Victorian Local Government Act 2020
- The Public Health and Wellbeing Act 2008
- The Gender Equality Act 2020

Relevant Frameworks and Strategies

- Rainbow Tick Accreditation Framework
- Rainbow Ready Roadmap
 - Pride in our future: Victoria's LGBTIQ+ strategy 2022-32
 - Australian Workplace Equality Index
 - Pride in Prevention Evidence Guide

Council Plans and Strategies

In addition to supporting Council to meet its legislative obligations to LGBTIQA+ communities, the Action Plan is reflected in and aligns with a number of key Council plans and strategies. These include for example:

Council Plan 2021-2025	 Strategic objective: Inclusive services Strategy: Fostering an equitable, just and inclusive Monash. Priority Project: Rainbow tick certification. Strategic objective: Good Governance Strategic intent: work broadly to meet community needs including advocacy and partnering with other levels of government, local organisations and community groups. Strategy: Ensure a financially, socially and environmentally sustainable organisation. Strategy: Effectively communicate and engage with the community.
Monash Health and Wellbeing Plan 2021-2025	 Priority 7: Age friendly Action 7.3 - Active inclusion of LGBTIQA+ older people by including positive and supportive themes in programs and events. Priority 11: Active community engagement Action 11.4 - Continue to facilitate local partnership networks and Council's Advisory Committees to ensure Council is actively listening and responding to the public health and wellbeing priorities of the Monash community. Priority 22: Gender Equity Action 22.2 - Actively promote empowerment and dignity, challenge discrimination and respect human rights to advance gender equity. Priority 23: LGBTIQA+ inclusion - Actions: 23.1 - Formalise communication and feedback mechanism between Council and our LGBTIQA+ communities. 23. 2 - Develop and implement the LGBTIQA+ Action Plan in collaboration with the LGBTIQA+ Advisory Committee. 23.3 - Promote and celebrate LGBTIQA+ events and services. Ensure Council's support of our LGBTIQA+ communities is visible. 23.4 - Undertake the Rainbow Tick Accreditation. 23.5 - Provide staff with LGBTIQA+ inclusion training. 23.6 - Continue to develop services and collections for LGBTQIA + community.
Monash Gender Equity Framework	Recommendations: Pilot new and strengthen existing intersectional gender equity activities, particularly in relevant language/s with our multicultural and faith-based communities, and for our LGBTIQA+ communities, people with a disability, and young people and older community members.

Community Safety Framework ***currently in draft** Edit once finalised	 Priority 1: Safe and Respectful Communities Principle 2. Creating safe, accessible and inclusive public spaces for everyone. Priority 2: Partnerships and Leadership Principle 3: A Collaborative, Integrated Approach. Priority 3: Engaged, Confident and Connected Communities Principle 6: Positive Perceptions of Safety in Monash. Principle 7: Education and Innovative Solutions.
Monash Loneliness Framework 2021 – 2025	Guiding Principle: Intersectionality. Acknowledges that discrimination faced by LGBTIQA+ people may exacerbate or lead to chronic loneliness.
Monash social housing framework	Priority: Homelessness Outreach and Consultation - Take a human-centred approach with compassionate responses to homelessness. Housing is a human right, and every single member of our community matters.
Active Monash SPORTS CLUB FRAMEWORK 2022-2027	 Guiding principles: Diversity and respect: support clubs to ensure they meet the needs of our diverse community. Safe environments: Help create welcoming and safe environments for all. Prevent harm from alcohol, tobacco, and other drugs, gambling, and violence. Priority Area: Healthy and Resilient Standard: Gender equity Ensure that Active Monash clubs are welcoming and inclusive to everyone in our community, regardless of age, gender, ability, sexual orientation, cultural background, or socioeconomic status.