

28 JULY 2026



GROUP SESSION 1

LGBTIQA+SB communities

Second Action Plan consultation report



Purpose of the session

The Domestic, Family and Sexual Violence (DFSV) Commission convened this consultation in Sydney for people and organisations who work with LGBTIQ+SB communities to inform the development of the Second Action Plan under the National Plan. The session's agenda was shaped in partnership with LGBTQ Health Australia (LHA), drawing on LHA's network of community organisations to bring participants together.

Discussion questions included:

- What are the most significant opportunities to strengthen the inclusion and safety of LGBTIQ+SB communities within the Second Action Plan, and in broader efforts to prevent and respond to DFSV?
- What practical actions should be prioritised over the next five years to achieve the greatest impact in preventing and responding to DFSV affecting LGBTIQ+SB communities?

A second online roundtable focused on LGBTIQ+SB communities was convened on Thursday 6 August.

Executive summary

The roundtable highlighted the importance of recognising and responding to violence impacting on LGBTIQ+SB communities through the Second Action Plan under the *National Plan to End Violence against Women and Children 2022–2032* (National Plan). Participants called for action that combines specialist service investment, mainstream capability uplift, better evidence and data systems, and greater accountability across government systems, including police, child protection, and courts. Technology-facilitated abuse, access to refuges, and gender-affirming care were identified as specific issues relevant to LGBTIQ+SB communities.

What we heard

Overarching themes

- Terminology and the conceptual framing underpinning the National Plan were highlighted throughout the discussion, particularly in relation to how violence against women and children (VAWC) and gender-based violence (GBV) are defined and applied to LGBTIQ+SB experiences.
- There was support for the Second Action Plan setting concrete and accountable actions relevant to LGBTIQ+SB, including sustainable investment for specialist LGBTIQ+SB services and capacity building for the broader DFSV sector.
- Participants noted that safety for LGBTIQ+SB accessing non-specialist services very often depends on a small number of trusted individuals working within the service.
- There was broad support for stronger national collaboration among specialist LGBTIQ+SB services, formal partnership infrastructure, and mechanisms that allow specialist expertise and practice to be shared across jurisdictions.
- Participants raised data and evidence gaps, while also stressing that enough is already known about barriers, risks and service failures to justify immediate action.
- Relevant research insights were identified relating to experiences of violence across the life-course and patterns of service-seeking within LGBTIQ+SB communities. A key insight was the importance of considering the distinct experiences, dynamics and risks faced by groups within the LGBTIQ+SB community.
- The discussion highlighted the need to recognise forms of violence and risk that are particularly salient for LGBTIQ+SB communities, including technology-facilitated abuse, denial of gender-affirming care, exclusion from refuges, and misidentification of perpetrators (especially as it impacts on trans women).
- Children and young people were repeatedly identified as victim-survivors in their own right, with particular attention to experiences of family violence, harm occurring in education and online contexts, and access to safe services, especially in remote and regional areas.
- Participants consistently linked meaningful inclusion with funding, workforce sustainability, housing, legal supports, accountability across government systems, and the ability to scale what is already working.

Conceptual framing and terminology for LGBTIQ+SB communities within national frameworks

What participants told us

- The current national policy architecture was seen as treating LGBTIQ+SB communities as an 'add-on' rather than a core focus, partly impacted by the decision to frame the National Plan around 'violence against women and children' (VAWC) rather than gender-based violence (GBV).
- Participants identified a need for more nuanced definitions and conceptual framing that can recognise the drivers of violence in and against LGBTIQ+SB communities, including rigid attitudes towards gender identity and sexuality.
- Despite this, there was also a view that classifying violence against LGBTIQ+SB communities as DFSV may reinforce the seriousness of the harm, with an example being denial of gender-affirming care as potential family violence.
- Participants said shared language is needed to explain how VAWC and GBV relate to LGBTIQ+SB communities without losing strong community language about men's violence against women.
- Participants raised the importance of recognising children and young people in their own right and the specific needs of LGBTIQ+SB young people, particularly housing and access to refuges.
- Some participants noted the impact of funding categories on the willingness of the broader system to accept terminology shifts.

What participants said needs to change

- The National Plan and associated policy frameworks need to move beyond treating LGBTIQ+SB communities as an add-on and instead embed their experiences within the core conceptual architecture of violence prevention and response.
- Definitions and language need to better capture the specific drivers and forms of violence experienced by LGBTIQ+SB communities, while maintaining language that remains meaningful and usable across the broader violence prevention sector.

Building stronger partnerships, service integration and national collaboration

What participants told us

- Participants said partnerships between LGBTIQ+SB services and the DFSV sector are essential, particularly in low-resource jurisdictions where no single service system can meet community needs alone. However, this requires capacity building for LGBTIQ+SB services due to resourcing disparities.
- Participants emphasised that effective partnerships require values alignment, shared frameworks, information sharing and sustained opportunities for services to come together across jurisdictional boundaries.
- A consistent theme in the discussion was the need for stronger national collaboration between LGBTIQ+SB organisations.
- Participants noted that regional integration structures (such as the Family Violence Integration Committee in Victoria) can help build relationships and improve coordination, while also warning that funding and resource allocation models based on area-level police call-out data can fail to reflect LGBTIQ+SB need.
- Participants said risk assessment, referral pathways and escalation decisions need to recognise the specificity of LGBTIQ+SB experiences rather than treating the category as a generic inclusion measure.
- Participants described mainstream and specialist services as uneven in their safety and capability for LGBTIQ+SB people, with some services relying on trusted individuals rather than organisational safety.
- Participants raised concerns that reporting to funders can fail to align with program realities and can make partnership work and in-kind contributions invisible.
- Research indicates that LGBTIQ+SB people may prefer one-to-one health care if they can afford it. Once community members have a dedicated health provider or counsellor they trust, they will tend to continue going to that person for all needs. This reinforces the need for DFSV capacity building in adjacent health workforces.

What participants said needs to change

- Stronger and more formalised partnerships are needed between LGBTIQ+SB specialist services and mainstream DFSV services, particularly in jurisdictions where specialist service capacity is limited.
- Specialist organisations should be better resourced to participate as equal partners within service systems.

Strengthening evidence and data collection for LGBTIQ+SB communities

What participants told us

- Participants identified a continuing need for better data on violence experienced by LGBTIQ+SB communities.
- Participants said national surveillance tools, including the National Community Attitudes Survey (NCAS), have limited capacity to surface LGBTIQ+SB experiences, which makes these experiences less visible in primary DFSV frameworks.
- Participants acknowledged major data and evidence gaps but also noted that enough is already known about barriers, service gaps and intersecting needs to justify action.
- Participants noted that new national framework to prevent gender-based violence against LGBTIQ+ people and communities, being developed by Rainbow Health Australia and Our Watch, could significantly strengthen the evidence base.
- Participants identified an opportunity to standardise data, reporting and evaluation across services, including LGBTIQ+SB specialist services.
- Participants identified workforce data as a gap, including the need to understand how many workers are themselves from LGBTIQ+SB communities and what this means for the risk of harm and workforce sustainability.

What participants said needs to change

- National data collections, surveys and monitoring systems need to include questions and measures that can properly identify and capture LGBTIQ+SB experiences of violence. One participant proposed a national attitudes survey focused on the drivers of violence against LGBTIQ+SB people.
- Data collection, reporting and evaluation approaches should be standardised across services to improve consistency, comparability and evidence for decision-making.

Recognising and responding to violence experienced by LGBTIQ+SB communities

What participants told us

- Participants highlighted concerns about the availability of specialist legal, housing and support services that are responsive to LGBTIQ+SB communities. Concerns were raised about the safety of DFSV services for members of LGBTIQ+SB communities.
- Participants said technology-facilitated abuse (TFA) is a major issue and that violence against LGBTIQ+SB people can be driven by rigid attitudes towards gender and sexuality.
- Participants highlighted that trans and gender diverse people may face exclusion from refuges even where services are more receptive to LGB people.
- Participants said many trans and gender diverse people may not identify their experiences as DFSV, or may internalise the idea that they deserve violence because of their identities.
- Research indicates cumulative health impacts for people who experience violence in both childhood and adulthood, leading to more complex needs.
- Participants said one-to-one trusted health care or counselling is often preferred where people can afford it, creating hidden workforce and out-of-pocket cost issues.
- Questions were raised about the availability of men's behaviour change programs that are responsive to the needs of LGBTIQ+SB communities.
- Participants noted that LGBTIQ+SB communities are often experienced in community-led education and health promotion, creating opportunities for effective violence prevention initiatives in future.

What participants said needs to change

- There needs to be a recognition of the forms of violence relevant to LGBTIQ+SB communities, such as denial of access to gender-affirming care and TFA.
- Services, including refuges and crisis responses, need to become genuinely safe and accessible for trans and gender diverse people.

Sustaining and uplifting specialist LGBTIQ+SB services

What participants told us

- Participants said meaningful inclusion requires investment in workforce capacity, infrastructure and mechanisms for sharing LGBTIQ+SB expertise.
- Participants said the 500 Workers initiative is important but does not cover all relevant services and may equate to very small workforce increases at a service level.
- Participants said comprehensive mapping and resourcing plans would help address workforce sustainability and service capacity.
- Participants said sustainable funding is needed to support long-term outcomes rather than short-term or misaligned reporting requirements. Five-year funding terms were proposed as an ideal length.
- Participants described specialist LGBTQ+ services as essential, while also identifying a need to improve mainstream capability so that people are not dependent on a small number of trusted individuals.
- Participants said cultural change and capacity building are slow, ongoing processes and can be lost if training is optional, not embedded or undermined by political and social backlash.
- Participants said specialist services need investment alongside mainstream capability uplift.

What participants said needs to change

- Long-term and sustainable investment is needed in both specialist LGBTIQ+SB services and mainstream capability-building, rather than relying on short-term funding cycles.
- Funding models need to better recognise workforce sustainability, service demand and the significant in-kind contributions currently made by specialist organisations to support partnerships and system capacity.

We sincerely thank everyone who generously shared their time and insights with us.

