

WALKERN KATATDJIN ROADMAP REPORT

**Working together to support Aboriginal and Torres Strait Islander
LGBTQIA+ young people to thrive**

Liddelow-Hunt, S., Hayward, L., Hill, B., Perry, Y., Wilson, M., Stretton, N., Anderson-Hyde, M.J.,
Andrews, L., Bagshaw, D., Baptist, R., Bassett-Bokic, N., Berry, M., Blow, T., Cameron, D., Cox, L.,
Daglas, K., Dau, D., Devezey, Y., Eddy, S., Fowler, J.A., Henderson, C., Hill, B., Hill, J.H.L., Hunt, A.,
James, J., Lee, T., Makuru, K., McGillivray, B., Morrison, J., Riley, N., Storey, D., Strobel, N.,
Thorne, S., Wade, A., Waples-Crowe, P., Weir, V., Wells, K., Wishart, E., Uink, B.* & Lin, A.*



ILLUSTRATIONS BY KAEYA MILTON

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We acknowledge that this research has taken place on the lands of the Whadjuk Noongar people, who have been custodians of this boodjar since time immemorial. We pay respect to Whadjuk Traditional Owners past and present. We further acknowledge the Aboriginal and Torres Strait Islander people from Country across Australia who have contributed to this report, bringing with them their stories, knowledge and connections.



What is Walkern Katatdjin?

Walkern Katatdjin (Rainbow Knowledge) is a national research project that aims to understand and promote the mental health and social and emotional wellbeing of Aboriginal and Torres Strait Islander lesbian, gay, bisexual, trans, queer/questioning, intersex and asexual (LGBTQIA+) young people. The project consists of 3 phases: 1) interviews and yarning groups in Boorloo (Perth); 2) a national survey; 3) co-designing a Roadmap.

What is this Roadmap Report?

This report details a Roadmap to work together to support Aboriginal and Torres Strait Islander LGBTQIA+ young people to thrive. This report is intended to be used by Aboriginal and Torres Strait Islander LGBTQIA+ young people’s family and community, services, government and the wider community. Each chapter of this report is dedicated to the actions that these groups can take to support the wellbeing of Aboriginal and Torres Strait Islander LGBTQIA+ young people.

Contributors

Liddelow-Hunt, Shakara; Hayward, Lily; Hill, Braden; Perry, Yael; Wilson, Mirella; Stretton, Natasha; Anderson-Hyde, MJ; Andrews, Lindey; Bagshaw, Dorothy; Baptist, Rhubarb; Bassett-Bokic, Natalie; Berry, Michael; Blow, Tahlia; Cameron, Danielle; Cox, Lynette; Daglas, Kate; Dau, Duc; Devezy, Yohann; Eddy, Shania; Fowler, James; Henderson, Cheyeanne; Hill, Brenda; Hill, James; Hunt, Alana; James, Jakob; Lee, Tony; Makuru, Kurtis; McGillivray, Barbara; Morrison, Jim; Riley, Nathan; Storey, Dion; Strobel, Natalie; Thorne, Shirley; Wade, Anom; Waples-Crowe, Peter; Weir, Vivienne; Wells, Kirsten; Wishart, Emery; Uink, Bep* & Lin, Ashleigh*

**Shared last authorship (authorship contributed equally)*

Contributing organisations

Blak Pride WA; Kimberley Blak Pride Ltd.; North Metropolitan Health Service Youth Mental Health; Sexual Health and Blood-borne Virus Program; Western Australian Department of Health; Sexual Health Quarters; Transfolk WA; The University of Queensland Poche Centre for Indigenous Health; Victorian Aboriginal Community Controlled Health Organisation (VACCHO); Wungening Aboriginal Corporation; Yorgum Healing Services; Youth Pride Network

About the artist



Kaeya Milton (they/them) [@kaeangelwings](#)
Kae is a strong believer in equality and does their best to show this in their art. They are Aboriginal and wish to learn more about their culture from their mum and the people in their life. They do commissions in hopes to become a full-time artist and possibly go to uni to study art and character design.

Ethics and funding

This project is funded by the National Health & Medical Research Council (NHMRC)(1157377). This research has ethical approval from the Western Australian Aboriginal and Torres Strait Islander Health Ethics Committee (WAAHEC); (HREC1000).

Contact

(08) 6319 1062 / Rainbow.Knowledge@thekids.org.au

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1. THE ROADMAP



Summary

There's no better time to start than now.

This Roadmap report sets out a plan to work together to empower individuals, families, communities, and services to ensure that all Aboriginal and Torres Strait Islander LGBTQIA+ young people (14-25 years) are safe, healthy and thriving.

While we acknowledge the immense diversity of Aboriginal and Torres Strait Islander LGBTQIA+ young people, a common thread is the importance of acceptance and celebration of their identities, opportunities to connect with culture and diverse communities, and the ability to be their 'full selves', free from harm and discrimination, in all settings and situations. This is what thriving 'looks like' for Aboriginal and Torres Strait Islander LGBTQIA+ young people.

This Roadmap was co-designed with Aboriginal and Torres Strait Islander LGBTQIA+ young people, families, community, Elders and services. This report is intended to be used by 4 key groups:

- Aboriginal and Torres Strait Islander LGBTQIA+ young people's [family and community](#) (Family and Community)
- [Health and wellbeing services](#) and [other services and systems](#) (Services)
- [Local, state and federal government](#) (Government)
- The [wider community](#)

In the Roadmap, each of these groups is assigned a set of flexible actions to support Aboriginal and Torres Strait Islander LGBTQIA+ young people. These actions are supported by [evidence](#) provided by researchers, services and government. All of the actions are informed by ten [principles](#) required to work successfully together in this space. Together these key groups, actions and principles form the Walkern Katatdjil Roadmap model.

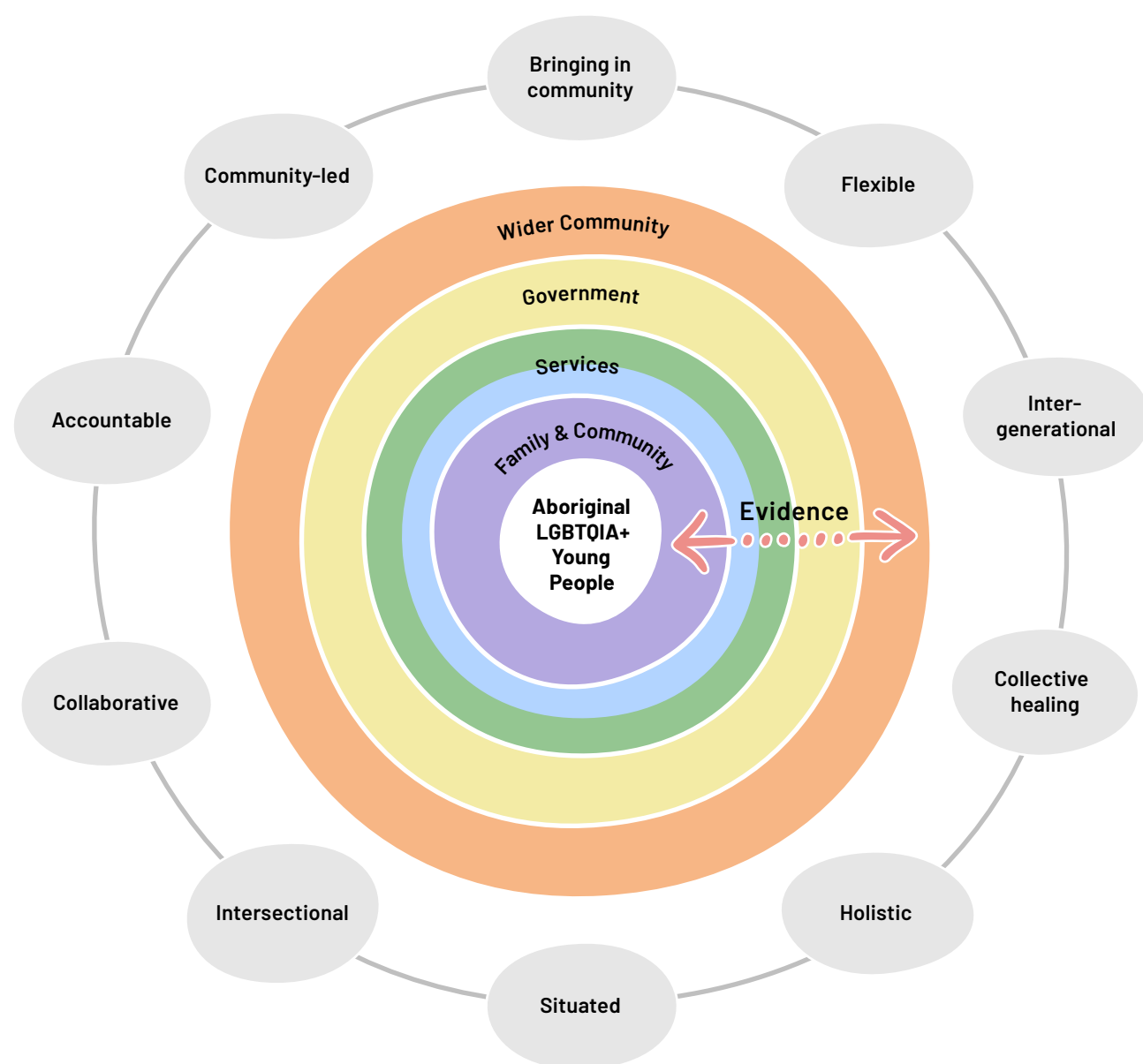


Figure 1. The Walkern Katatdjijin Roadmap Model.

At the centre of the model is the Aboriginal and Torres Strait Islander LGBTQIA+ young person. The young person is deliberately centred to guarantee actions are focused on ensuring that Aboriginal and Torres Strait Islander LGBTQIA+ young people are safe, healthy and thriving. Aboriginal and Torres Strait Islander LGBTQIA+ young people also belong to other key groups and may play multiple roles in this Roadmap model.

Those key groups within circles that are closer to the young person are likely to have a direct influence on Aboriginal and Torres Strait Islander LGBTQIA+ young people's social and emotional wellbeing and mental health. Those groups further away from the young person in the model also have an important role to play, albeit in a more indirect way, through shaping the systems and cultures young people live in. The model also demonstrates the interconnectedness between each level and the influence they have on each other. Evidence cuts across each key group, reflecting the role that it plays in informing actions. On the outside of the model are the ten Principles which will enable empowering and effective approaches for supporting Aboriginal and Torres Strait Islander LGBTQIA+ young people.

Using this Roadmap

This Roadmap is for the people who support Aboriginal and Torres Strait Islander LGBTQIA+ young people, in the many roles they may hold. For ease of reading, we have broken these roles down into key groups, however, we acknowledge that individuals can play many roles within and across their lifetime. You might belong to multiple key groups and have multiple roles to play. For example, if you're an Aboriginal nurse with an LGBTQIA+ child, then you are a part of family and community and services so you can support Aboriginal and Torres Strait Islander LGBTQIA+ young people through any or all of those roles.



Figure 2. Finding the right chapter in this report.



Go to the chapter for your key group(s) to find specific actions. You can also read the [Context](#) to understand more about Aboriginal and Torres Strait Islander LGBTQIA+ young people's wellbeing or go to the [Design](#) chapter to read more about how and why we've created this Roadmap.

While this Roadmap has been designed specifically to benefit young people, it may also be relevant to Aboriginal and Torres Strait Islander LGBTQIA+ adults of all ages.

What can each group do?

Family and community (chapter 5)

...can support Aboriginal and Torres Strait Islander LGBTQIA+ young people through creating visibility, education and safe places.

Family and community also have a responsibility to provide input into services and demonstrate that Aboriginal and Torres Strait Islander LGBTQIA+ inclusion is a priority for their communities.

Services (chapters 6 & 7)

...can support Aboriginal and Torres Strait Islander LGBTQIA+ young people through providing inclusive care which is sustainably embedded into their practice. The goal of inclusive care is for Aboriginal and Torres Strait Islander LGBTQIA+ young people to feel safe from the moment they enter a service and to receive the care that's right for *them*.

Services also have a role in empowering families and communities to achieve their actions and advocating to government.

This Roadmap focuses on actions for **health and wellbeing services**, but we also consider how these actions might apply to **other services and systems** that support Aboriginal and Torres Strait Islander LGBTQIA+ young people's wellbeing.

Government (chapter 8)

...can support Aboriginal and Torres Strait Islander LGBTQIA+ young people through changes to policies and strategies, establishing and maintaining strong relationships with advocates, identifying Aboriginal and Torres Strait Islander LGBTQIA+ people in data, employing Aboriginal and Torres Strait Islander LGBTQIA+ people, and providing targeted funding.

Governments also play their part by empowering services and maintaining their responsibility to community.

Wider community (chapter 9)

...can support Aboriginal and Torres Strait Islander LGBTQIA+ young people through shaping the broader culture and seeking out opportunities for allyship in their everyday lives. Additionally, everyone has a role to play in ensuring that local, state and federal governments are aware of the importance of supporting Aboriginal and Torres Strait Islander LGBTQIA+ young people and are held accountable for doing so.

Evidence (chapter 10)

Ongoing action should be informed by evidence collected by **researchers** (e.g., research projects, papers, reports, guidelines, interventions), **services** (e.g., client data, monitoring and evaluation), and **governments** (e.g., census and ABS data, government agency data, reporting against progress). Evidence about Aboriginal and Torres Strait Islander LGBTQIA+ young people must be driven by communities' data needs and supported by Indigenous Data Sovereignty (IDS).



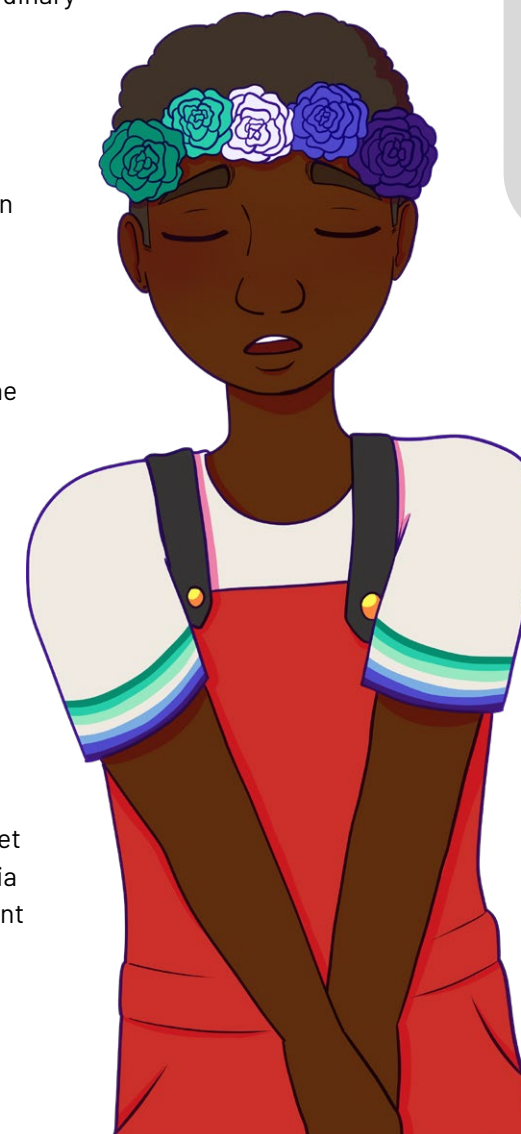
2.

CONTEXT: WHERE ARE WE NOW?

Understanding mental health and wellbeing among Aboriginal and Torres Strait Islander LGBTQIA+ young people

Our communities have made it clear that there is a need to better support Aboriginal and Torres Strait Islander¹ LGBTQIA+² young³ people. Aboriginal and Torres Strait Islander LGBTQIA+ young people have been decolonising ideas about sexuality and gender, creating community, becoming role models, fostering connections to family and kinship, sustaining a rich culture, and redefining the world through their unique perspectives (Liddel-Hunt et al., 2023). Aboriginal and Torres Strait Islander LGBTQIA+ people have likely been doing this since time immemorial, but many of those stories have been lost. What we know for sure is that in recent generations Aboriginal and Torres Strait Islander LGBTQIA+ people across Australia have been doing extraordinary work standing up for each other and their broader communities.

However, despite these strengths, the Walkern Katatdjin National Survey found that most Aboriginal and Torres Strait Islander LGBTQIA+ young people experienced low to moderate levels of social and emotional wellbeing (SEWB), in particular low Connection to Spirit, Spirituality and Ancestors, Connection to Culture and Connection to Mind and Emotions. Most participants (91.9%) were experiencing high or very high levels of psychological distress. We found that almost half (45.4%) of participants had ever attempted suicide in their life and one in five (19%) had attempted suicide in the past year (Liddel-Hunt et al., 2023), indicating a real and urgent need for better mental health support. Findings from another national survey of LGBTQIA+ young people (*Writing Themselves In 4*) showed that Aboriginal and Torres Strait Islander young people were more likely to report ever thinking about suicide, ever attempting suicide or ever self-harming compared to non-Indigenous LGBTQIA+ young people. Aboriginal and Torres Strait Islander LGBTQIA+ young people were also more likely than non-Indigenous LGBTQIA+ young people to report experiencing verbal, sexual or physical harassment because of their sexuality or gender in the past 12 months, and these factors were associated with a recent suicide attempt or self-harm (Amos et al., 2023). These results show that racism, homophobia, transphobia and suicide are intertwined. These findings have prompted an urgent [Call to Action](#) from Aboriginal and Torres Strait Islander LGBTQIA+ scholars and advocates to immediately address the risk factors for suicide among Aboriginal and Torres Strait Islander peoples.



¹ This Roadmap primarily reflects the perspectives of Aboriginal people. We recognise that Torres Strait Islander peoples' have a unique culture and experience, but that many Aboriginal and Torres Strait Islander peoples also have a shared history and shared aspirations. As such, many of the recommendations in this Roadmap may be relevant to Torres Strait Islander peoples but are not co-designed by and for Torres Strait Islander peoples.

² We have chosen to use the acronym LGBTQIA+ (lesbian, gay, bisexual, trans, queer/questioning, intersex, asexual, +) but acknowledge that there are many ways of being sexuality and gender diverse. We especially acknowledge Sistersgirls and Brotherboys, many of whom are important leaders and have shaped the history of rainbow mob communities. This Roadmap exists for the entire rainbow community, but the needs and perspectives of some people may not be as well represented here.

³ This Roadmap Report is about young people aged 14-25 years old, but we recognise that 'young' is a culturally determined term and that some communities view people up to the age of 30 as young people.

Contexts that impact on Aboriginal and Torres Strait Islander LGBTQIA+ young people's mental health and wellbeing

Contributors to this Roadmap came together in November 2023 for the Walkern Katatdjin Roadmap Co-Design Forum held in Boorloo (Perth). Notably, the forum took place a month after the Voice to Parliament referendum. The disheartening outcome of the referendum, along with the bad faith way in which much of the debate played out, forced many of us to re-evaluate our relationship with a country disinterested in reconciliation. The Co-Design Forum also occurred in the wake of an Aboriginal boy's death in Boorloo as a result of a violent hate crime. Since the forum, there have been two Aboriginal child deaths in custody in WA. These events encapsulate the persistent and systemic racism weighing on our young people, which further includes:

- 1 Disconnection and grief resulting from the removal of Aboriginal and Torres Strait Islander children into out-of-home care.** We continue to face a high rate of removal of Aboriginal and Torres Strait Islander children (SNAICC et al., 2023), who are frequently placed in non-Indigenous families contrary to the recommendations of the Aboriginal and Torres Strait Islander Child Placement Principle (SNAICC, n.d.). Disconnection from family and kinship networks, along with neglect and abuse, create a pathway for too many young people from out-of-home care to detention or death. All of these factors contribute to a high number of suicide deaths among Aboriginal and Torres Strait Islander young people (Australian Institute of Health and Welfare, 2024; Australian Institute of Health and Welfare, 2022). This adds up to a heavy burden of collective grief.
- 2 Inappropriate, insufficient and inaccessible wellbeing care.** At present, the mental health system falls drastically short in trying to address Aboriginal and Torres Strait Islander LGBTQIA+ young peoples' needs, in part because of an inability to treat health as environmental and intersectional or to provide cultural connection. The current disjointedness of the health system often requires people to re-tell their stories over and over, contributing to re-traumatisation. For trans and gender diverse Aboriginal and Torres Strait Islander young people, access to gender affirming care is inaccessible for many due to its cost, long waitlists, and limited availability in regional areas (Youth Pride Network, 2025). Additionally, few services in Australia are properly equipped to provide culturally safe care for Aboriginal and Torres Strait Islander LGBTQIA+ people (Uink, Dodd, et al., 2023; Uink, Liddel-Hunt, et al., 2023).
- 3 Staff in health services are facing pressure and turnover is frequent due to burnout.** As a consequence of this, the revolving door of clinicians and support workers can be re-traumatising to young people, who are constantly required to build trust with new people. This ultimately contributes to worse outcomes. Add to this a generally low level of knowledge among health service staff about caring for Aboriginal and Torres Strait Islander LGBTQIA+ young people (Liddel-Hunt et al., 2024) and the burden on young people to educate their clinicians, and it is unsurprising that young people are themselves often a primary source of support for their peers during crisis (Worrell et al., 2021).
- 4 Colonial ideas about Aboriginal and Torres Strait Islander LGBTQIA+ people, especially within education systems.** Colonisation and Christianisation have reshaped our understandings of gender and sexuality in ways that need to be further interrogated by Aboriginal and Torres Strait Islander people (Hodge, 2015; O'Sullivan, 2021). Because of this,

religion is being used within and outside of Aboriginal and Torres Strait Islander communities to demonise LGBTQIA+ people. More broadly, Aboriginal and Torres Strait Islander LGBTQIA+ young people find themselves at odds with a settler-colonial perception of 'real' Aboriginal and Torres Strait Islander people as always dark-skinned, living in remote communities, and straight and cisgender (Hodge, 2015). These restrictive ideas are baked into the education system, which is additionally ableist and not trauma-informed, and as such unable to accommodate the intersectionality Aboriginal and Torres Strait Islander LGBTQIA+ young people carry with them in their everyday lives. Added to this is a general lack of understanding of Aboriginal and Torres Strait Islander Culture in the school curriculum. As a system with which young people have frequent contact, the impact schools can have on young people's wellbeing, for better or worse, is profound (Amos et al., 2023; Wallis et al., 2024).

- 5 Disruption of intergenerational relationships and support.** The wellbeing of our young people is tied to their relationships with their carers, community leaders and Elders; however, we know that older community members are already under considerable burden and struggle to support others while not receiving the help they themselves need. For some Aboriginal and Torres Strait Islander young people, these intergenerational relationships don't exist; they have been severed by colonial policies like forced removal, Stolen Generations, and ongoing child removal, or there may be no people available for young people to connect with. Additionally, these relationships are sometimes destroyed by homophobic and transphobic attitudes held by older community members.
- 6 Fatigue with consultation that is not supported by action.** Too much consultation and research has occurred without resulting in substantial change, and solid recommendations made by community have been ignored. There is a clear sense of frustration and distrust of governments, universities and other institutions. It is difficult to continue working towards positive change when our communities are undervalued and exhausted.

Moving towards better social and emotional wellbeing

By taking a social and emotional wellbeing (SEWB) approach to this Roadmap, we can understand all of the above factors as the social, cultural, political and historical determinants that shape Aboriginal and Torres Strait Islander LGBTQIA+ young people's wellbeing, through influencing their connections to their mind, body, family, community, Country, Culture and spirit (Gee et al., 2014).

We also know that there has been an appetite among Aboriginal Community Controlled Organisations (ACCOS) and LGBTQIA+ community-controlled organisations for resources, training, accreditation and interventions to meet the unique needs of Aboriginal and Torres Strait Islander LGBTQIA+ young people (Hill et al., 2021; Uink, Liddel-Hunt, et al., 2023; Wilson et al., 2023). Specific training programs targeting awareness of the SEWB and mental health needs of Aboriginal and Torres Strait Islander LGBTQIA+ young people have grown. However, the need for localised resources and training and fluctuating interest from organisations means that improvements in inclusive practice have been unevenly achieved.

The need for change is clear, and this change must come in the form of a sustained, coordinated approach to providing opportunities and environments for Aboriginal and Torres Strait Islander LGBTQIA+ young people to thrive. We see the conditions for change present in the collective determination and strength of everyone involved with this project to date, as well as the generations of Aboriginal and Torres Strait Islander LGBTQIA+ people who came before us. **This Roadmap exists to show a possible path forward.**

3. DESIGN

What is this Roadmap trying to achieve?

The end goal of this Roadmap is simple: to empower individuals, families, communities, services, and governments to ensure that Aboriginal and Torres Strait Islander LGBTQIA+ young people are safe, healthy, and thriving.

Why this Roadmap?

Five years ago, there was little published research about the mental health and SEWB experiences and needs of Aboriginal and Torres Strait Islander LGBTQIA+ young people. As such, knowledge of how to best support this group of young people was mostly limited to Aboriginal and Torres Strait Islander LGBTQIA+ people themselves and their close allies. The scene has now drastically changed, and we know a lot more about the challenges faced by Aboriginal and Torres Strait Islander LGBTQIA+ young people. **What we need now is action.**

We also understand that Aboriginal and Torres Strait Islander LGBTQIA+ people are the only ones with the expertise required to lead meaningful change. This change needs to be supported by a commitment from families, communities, services, and governments to actively champion initiatives within their sphere of influence and seek out opportunities to meaningfully work with Aboriginal and Torres Strait Islander LGBTQIA+ young people. This Roadmap exists to lay out a coordinated response designed by and for Aboriginal and Torres Strait Islander LGBTQIA+ young people and their families, communities, supporters and allies.

How was this Roadmap created?

Methods

About Walkern Katatdjin

This Roadmap was developed as the final stage of the [Walkern Katatdjin](#) project. Walkern Katatdjin is a mixed-methods national research project that aims to understand and promote the mental health and SEWB of Aboriginal and Torres Strait Islander LGBTQIA+ young people. Phase 1 of the project consisted of qualitative interviews and yarning groups in Boorloo, and Phase 2 was a national survey of mental health and SEWB.

The project is led by Aboriginal and Torres Strait Islander LGBTQIA+ investigators. It has been ongoing since 2018 and has built and maintained strong relationships with Aboriginal and Torres Strait Islander and LGBTQIA+ communities throughout. This has included a strong network of Aboriginal and Torres Strait Islander LGBTQIA+ community leaders and advocates, organisations, and Elders. This Roadmap is the culmination of these relationships built throughout the project's life.

Walkern Katatdjin is overseen by a Governance Committee consisting of respected Aboriginal and Torres Strait Islander LGBTQIA+ community members over the age of 25, and a Youth Advisory Group made up of Aboriginal and Torres Strait Islander LGBTQIA+ young people. Walkern Katatdjin operates according to an Indigenous Data Sovereignty protocol which is publicly available at www.rainbowknowledge.org/data-governance.

More information about Walkern Katatdjin can be found at www.rainbowknowledge.org.

Roadmap contributors

This Roadmap was designed during a Co-Design Forum in November 2023. It was further refined through two iterative rounds of review and a second Roadmap Forum. Everyone who participated in the Co-Design Forum, review, or Roadmap Forum played an important part in the creation of this Roadmap and is considered a contributor.

Contributors were both Aboriginal and Torres Strait Islander and non-Indigenous people from Boorloo (Perth), Naarm (Melbourne), Meanjin (Brisbane), Bundjalung Country (Lismore), and Rubibi (Broome). Contributors were also both sexuality and/or gender diverse people and cisgender and heterosexual people. Aboriginal and Torres Strait Islander contributors included people from Noongar, Yuibera, Koori, Ngarrindjeri, Gunditjmara, Palawa, Kabi Kabi, Ngarigu, Gomeroi, Wajarri, Mununjali, and Yawuru mob. Nearly half of all contributors were Aboriginal and Torres Strait Islander LGBTQIA+ people. All contributors were over the age of 18 years and provided informed consent to participate in the Co-Design Forum.

The majority of the contributors were from Western Australia, and specifically Boorloo (Perth). This was because the Walkern Katatdjinn project is based in Boorloo and had closer reach to WA communities. However, there were also contributors from other states and territories, and the conversation was not specific to WA. As such, this Roadmap was designed to be used by people across Australia but may reflect a stronger WA perspective and should be localised to meet the needs of communities in different areas.

1) IDEA GENERATION AND CONSENSUS GATHERING

The first stage of Roadmap development consisted of a 1-day Co-Design Forum in Boorloo (Perth). Participation in the Roadmap Co-Design Forum was via invite-only to individuals and organisations that had expressed a commitment to supporting the wellbeing of Aboriginal and Torres Strait Islander LGBTQIA+ young people. This included Aboriginal and Torres Strait Islander LGBTQIA+ young people, Western Australian Aboriginal Elders and community leaders, and representatives from Aboriginal Community Controlled Organisations (ACCOs), LGBTQIA+ community-controlled organisations, mainstream health services, and Aboriginal and/or LGBTQIA+ community groups.

In total, 35 participants and 7 researchers contributed to the development of the Roadmap through the Forum.

Formal proceedings started with all contributors agreeing on expectations of each other. The research team began by outlining the findings from previous phases of Walkern Katatdjinn. Contributors split into 5 breakout groups, organised around 5 themes from previous research: 1) Visibility, pride, self; 2) Family, community, culture, connections; 3) Healthcare and services; 4) Suicide and mental health; and 5) Discrimination, stigma, navigating. Each group consisted of 6-8 people with a member of the research team as a facilitator. The facilitators led a semi-structured discussion about each theme with the prompt *"What needs to be done to improve [theme] for Aboriginal and Torres Strait Islander LGBTQIA+ young people?"* The Co-Design Forum concluded with an open discussion between all contributors.

MEMBER-CHECKING

Breakout groups and the final discussion were audio-recorded and transcribed. Notes from each breakout group and the final discussion were shared with all contributors. No contributors raised any concerns with the notes.

2) DATA ANALYSIS

The data was analysed using qualitative analysis. Multiple iterative rounds of analysis occurred, where the proposed Roadmap structure and content was checked against transcripts, notes and other investigator interpretations.

3) REVIEW

Drafts of the Roadmap were reviewed by Co-Design Forum participants, the Walkern Katatdjinn Youth Advisory Group and Governance Committee, representatives from Aboriginal Community Controlled Organisations, LGBTQIA+ community-controlled organisations, mainstream services, and other researchers specialising in Aboriginal and Torres Strait Islander LGBTQIA+ health. Their feedback has been integrated into this final Roadmap Report.

4) ROADMAP FORUM

In February 2025, we met again with the people who participated in the first Co-Design Forum. In total 21 participants and 7 researchers attended the second Roadmap Forum. We confirmed that the Roadmap Report created was a reflection of everyone's contributions and discussed plans for implementation and individual commitments to carry out the Roadmap actions.



Whose responsibility is it to support Aboriginal and Torres Strait Islander LGBTQIA+ young people?

In short, everybody has a responsibility for ensuring that Aboriginal and Torres Strait Islander LGBTQIA+ young people are supported to be safe, healthy, and thriving.

The Roadmap model is underpinned by Aboriginal principles of caring and responsibility for kin. Each of us has a duty and obligation to care for the Aboriginal and Torres Strait Islander LGBTQIA+ young people in our lives, those who access our services, and in our communities. To help provide practical solutions on how to do this, this Roadmap is comprised of actions for family and community, services, government, and the wider community.



Figure 3. Key groups responsible for supporting Aboriginal and Torres Strait Islander LGBTQIA+ young people.

This responsibility for care does not negate the strength and self-determination of Aboriginal and Torres Strait Islander LGBTQIA+ young people. A significant portion of the Roadmap has been informed by the strength and care practices of Aboriginal and Torres Strait Islander LGBTQIA+ people themselves. There are many Aboriginal and Torres Strait Islander LGBTQIA+ young people who have been doing incredible work to empower themselves, each other and their broader communities. They are included in this report as both people who should receive support *and* as community members who provide support to each other.



CASE STUDY CAMP

CAMP (@camp4mob) is a passion project by Queer Mob for Queer Mob, bringing community and culture together on and around Noongar Boodja. CAMP gathers together queer mob in Boorloo to attend camps out on Noongar Boodja away from day-to-day life. This provides space and time for queer mob to relax, heal and connect to Country and Culture. The camps include cultural activities like arts and crafts, solar dyeing, weaving, and cooking with traditional ingredients. For queer mob, this is a unique opportunity to learn about Culture and connect with Aboriginal and queer community while being affirmed in their identity.



4.

PRINCIPLES

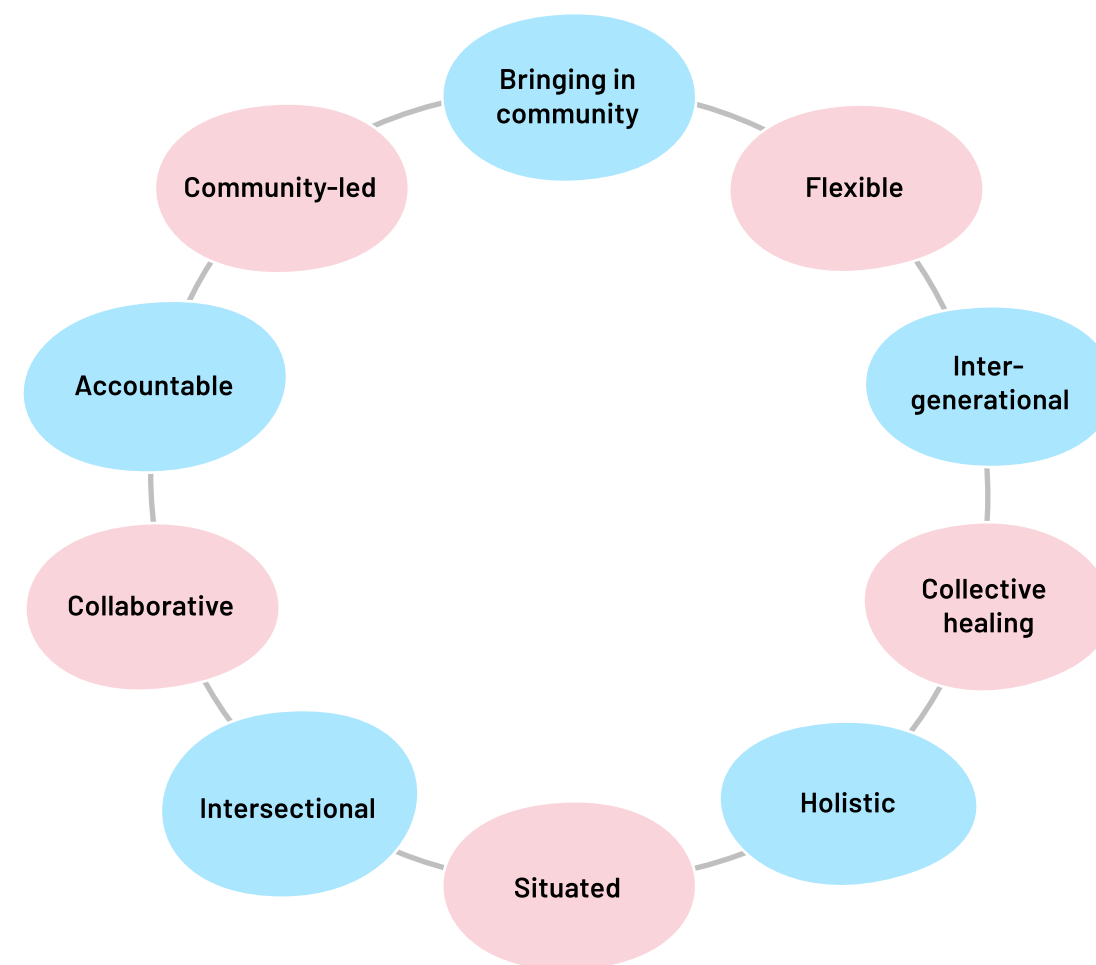


Figure 4. Principles informing the Walkern Katatdjijin Roadmap.

Bringing in community

"...we didn't say that it's just for queer blak mob, we want also our Elders to be part of that and the rest of the community, because it is that visibility that also then changes people's attitudes... we deliberately gave free tickets to that to our Elders, and we had about 30 or more... they just loved it, and that's the thing is that they become the ambassadors as well, and so you're breaking up that fear, that stigma, all of that thing."

—Walkern Katatdjijin Roadmap Co-Design Forum participant, reflecting on how they ran an Aboriginal and Torres Strait Islander LGBTQIA+ event.

This principle focuses on inviting in other community members to build allies through education. Achieving the actions outlined in the Roadmap will require inviting Aboriginal and Torres Strait Islander and LGBTQIA+ communities into lives of Aboriginal and Torres Strait Islander LGBTQIA+ young people in a way that is safe, welcoming, non-judgemental, and joyful. Education and relationship-building will create the incremental generational change required to promote community-wide acceptance and celebration of Aboriginal and Torres Strait Islander LGBTQIA+ people. Additionally, ensuring that conversations, community events, forums, gatherings, and Pride celebrations are open to LGBTQIA+ and non-LGBTQIA+ people will help to ensure people who are questioning their sexuality/gender or not 'out' can engage. Many of the actions proposed in the [Family and Community](#) chapter of this Roadmap are appropriate for bringing in community to Aboriginal and Torres Strait Islander LGBTQIA+ young peoples' lives, but the best actions will depend on each community in line with a *flexible* approach.

Flexible

"And I think different situations and different communities, different ways, so I think we need to understand that diversity as well across the spectrum of our communities."

—Walkern Katatdjin Roadmap Co-Design Forum participant.

The Roadmap actions need to be carried out flexibly to meet the differing needs of local communities. This approach recognises the cultural diversity of Aboriginal and Torres Strait Islander peoples; the differing historical, political and spiritual contexts; and differences created by size and location of communities. Importantly for everyone, Aboriginal and Torres Strait Islander LGBTQIA+ inclusion is an ongoing journey that works best when it is flexibly tailored to the needs, current knowledge, and practices of services and communities.

Intergenerational

"...when you think about how are we gonna help our young people, it's like, "Oh, well, the older people need to do that," you know? But people think of the Elders and it's like: but they're not getting these services as well. It needs to be a wraparound approach, like reciprocal, you know, helping our old people to help our young people..."

—Walkern Katatdjin Roadmap Co-Design Forum participant.

Taking an intergenerational approach recognises that for meaningful and lasting change to occur, support must be available for all generations, and all generations have a responsibility to care for each other. Ensuring Aboriginal and Torres Strait Islander LGBTQIA+ young people thrive will require the care and cultural knowledge of older generations, but older generations require the support of younger generations too. As such, achieving wellness for one generation necessarily requires embedding support for all generations; this is consistent with Aboriginal ways of being. An intergenerational approach is achieved by facilitating strong reciprocal relationships between generations. Implementation of this Roadmap therefore requires multiple generations to come together to yarn, support each other, resolve community issues, and engage in *collective healing*.



Collective healing

"So, safe spaces for us to yarn to resolve our issues. It's called collective healing, about our mob coming together and just simply talking and feeling good about yarning with each other."

—Walkern Katatdjin Roadmap Co-Design Forum participant.

Collective healing is achieved by bringing community together for healing to overcome the hurt caused by systemic racism, historical abuse, and ongoing discrimination. This also means healing from the hurt caused by prejudice against LGBTQIA+ people within the Aboriginal and Torres Strait Islander community and racism within the LGBTQIA+ community. Similar to an intergenerational approach, collective healing recognises that individualistic approaches to health are not enough. For collective and spiritual healing to occur, cultural safety must be guaranteed (e.g., through the choice of a culturally appropriate location for gatherings). Approaching wellbeing collectively and giving voice to environmental and historical harms forms part of *holistic and situated care*.

Holistic

"...for me the word – and it's been thrown around a lot but I feel like it still hasn't freaking been done – and that's looking at mental health and these issues holistically... Like, mental health is connected to your spiritual health and to your physical health and all of that... their whole being is looked at, their whole place and sense of self and physical aspects..."

—Walkern Katatdjin Roadmap Co-Design Forum participant.

All efforts to improve Aboriginal and Torres Strait Islander LGBTQIA+ young people's wellbeing must account for their physical, cultural, and spiritual wellbeing. This requires seeing the 'whole person', as well as the environments within which they exist. As such, the holistic principle creates a bridge between the actions for [Family and Community](#) and the actions for Services, by recognising the need to build strong ongoing relationships between these key groups to provide holistic care. Holistic care also recognises the need to provide space for the complexity and nuance of many Aboriginal and Torres Strait Islander LGBTQIA+ young peoples' stories. A holistic approach will hold these interacting physical, cultural and environmental influences throughout young people's relationships with supporters.

Situated

"...there could be some of these recommendations that could cope and address some of the issues we're concerned about. So, Bringing Them Home, for example, was how long ago? 97? That talked about healing centres. We've never – we still haven't got one. Talked about compensation, still haven't got compensation. So, what I'm saying is there's work that's already been done that we need to highlight that could overcome these issues."

—Walkern Katatdjin Roadmap Co-Design Forum participant.

Aboriginal and Torres Strait Islander LGBTQIA+ young people's wellbeing can't be achieved unless we address other key issues that affect other young people's wellbeing (e.g., incarceration, child removal, housing, climate justice). Further, Aboriginal and Torres Strait Islander LGBTQIA+ young people's wellbeing is linked to the wellbeing of their families and communities; progressing the rights of the whole community matters to them too. This principle is pragmatic and recognises that not all members of the Aboriginal and Torres Strait Islander community take LGBTQIA+ issues seriously or prioritise them. When needed, we can retain community buy-in by doing work that is designed to benefit the whole Aboriginal and Torres Strait Islander community and, if it holds enough space for intersectionality, know that it will also benefit Aboriginal and Torres Strait Islander LGBTQIA+ young people. Efforts to support Aboriginal and Torres Strait Islander LGBTQIA+ young people must also champion the implementation of other existing recommendations and resistance movements.

Intersectional

"So if there's a way especially for, like, queer mob – because those are such like deep-rooted journeys and issues and identities, that are not only delicate but very complex – is there a way that that can be put into their own thing that they can hold and share easily instead of having to go through that such a deep journey every single time?"

–Walkern Katatdjijin Roadmap Co-Design Forum 1 participant, talking about navigating the mental health system.

Related to a holistic and situated approach, intersectional approaches recognise that people hold multiple overlapping identities which shape their wellbeing (Crenshaw, 1989). Taking an intersectional approach requires the places Aboriginal and Torres Strait Islander LGBTQIA+ young people go for support to be both culturally safe and LGBTQIA+ inclusive. Additionally, these supports must be able to specifically address and engage with the unique experiences of Aboriginal and Torres Strait Islander LGBTQIA+ people (i.e., those at the intersection). This requires a dialogue between intersectional and situated approaches, to balance where actions need to be specific to Aboriginal and Torres Strait Islander LGBTQIA+ young people or embedded in broader resistance. Further, support aimed at Aboriginal and Torres Strait Islander LGBTQIA+ young people must also be disability inclusive, neuro-affirming, trauma-informed, and sensitive to other identities. It follows that, by recognising the many unique overlapping factors that shape young people's lives, we realise that a one-size-fits all approach isn't good enough.

Collaborative

"So commitment from organisations, collaboration of organisations. So rather than everyone competing, trying to do the same thing, like work out who does what best and work together."

–Walkern Katatdjijin Roadmap Co-Design Forum 1 participant.

Taking a holistic, situated and intersectional approach to enact the actions outlined in this Roadmap will not be possible without collaboration. Collaboration will assist with advocacy, Aboriginal and Torres Strait Islander LGBTQIA+ community governance, and knowledge-sharing. Aboriginal and Torres Strait Islander LGBTQIA+ young people's wellbeing is of interest across Aboriginal and Torres Strait Islander, LGBTQIA+, youth, and generalist services, sectors, and communities. This means that there are many groups and individuals working in this space, often with limited coordination. With the understanding that our communities and services are already overburdened, there is no need to be replicating work. Real collaboration is respectful and relational, not transactional, and builds in *accountability*.

Accountable

"...our communities and services, they need to take it seriously, what we're talking about. It's serious. It's not nothing to just go over your head and forget about it. It's for us to make sure the actions are being followed and done."

–Walkern Katatdjijin Roadmap Co-Design Forum 1 participant, talking about suicide among Aboriginal and Torres Strait Islander LGBTQIA+ young people.

Family members, community members, services, governments, and researchers working to support Aboriginal and Torres Strait Islander LGBTQIA+ young people have a responsibility to hold each other accountable for action. During the Forum, contributors raised the possibility that this work would culminate in a report that sits on a shelf gathering dust with no further action, as with so much previous consultation. There is no one mechanism for accountability in this space, but leveraging

existing mechanisms (for example, services' Annual General Meetings) will assist in progressing this work. Everyone should be accountable to Aboriginal and Torres Strait Islander LGBTQIA+ young people and should check in regularly to ensure they remain led by the young people they're trying to champion. Accountability to Aboriginal and Torres Strait Islander LGBTQIA+ young people and their communities can help to make sure actions remain *community-led*.

Community-led

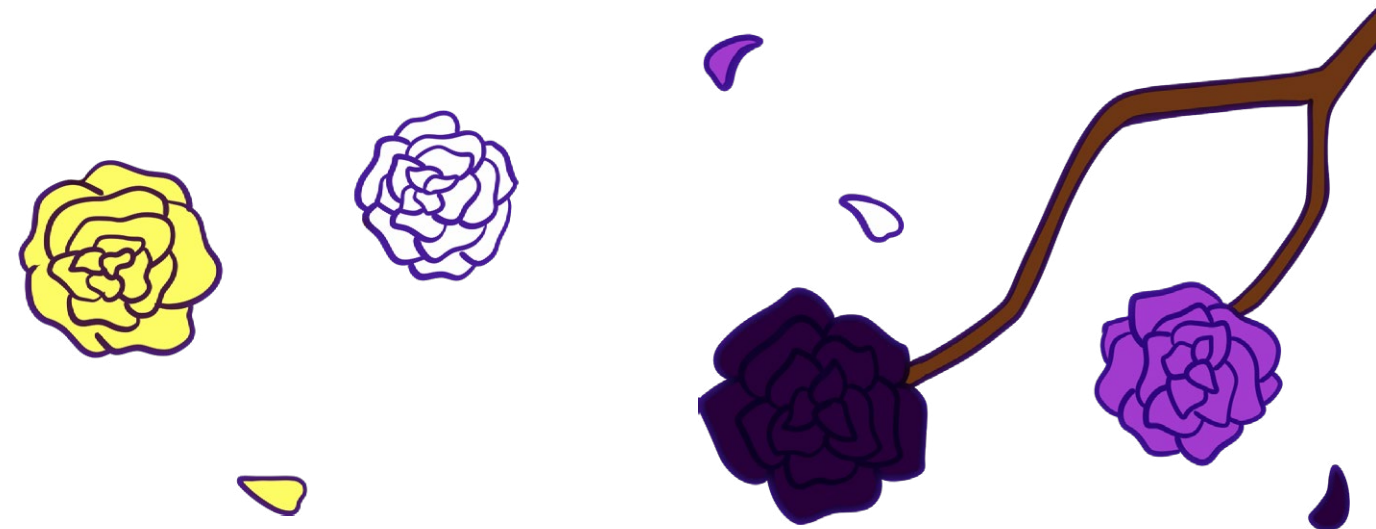
"...but it has to be run by identified mob who really understand and who have the strength to come together and really do that."

–Walkern Katatdjijin Roadmap Co-Design Forum 1 participant.

Actions must be led by Aboriginal and Torres Strait Islander LGBTQIA+ people and their families and communities, supported by structures and processes for governance that are consistent with Aboriginal and Torres Strait Islander ways of working. When consultation occurs, it must take seriously Aboriginal and Torres Strait Islander LGBTQIA+ community voices and the issues they raise, and act on the advice given. Community should be fairly reimbursed for their contributions and other meaningful ways of recognising and supporting the work of community can be identified to ensure relationships aren't transactional. Being community-led is tied to collaboration, through establishing networks of community members to lead and guide work together. This approach also requires that the leadership of services and local, state, and federal governments show up to events, forums and celebrations, and respectfully participate in conversations that are being led by community.

Bringing it all together

Situated, intergenerational and collective healing approaches all recognise that individual support is not enough, and young people can only really thrive when the community around them is thriving. However, this means nothing if community are being exclusionary – bringing in community provides a path for Aboriginal and Torres Strait Islander LGBTQIA+ young people to be embraced by their communities. This can only happen by taking a flexible, collaborative and locally responsive approach. Working with an intersectional lens will assist in ensuring that all facets of young people's lives are seen in the support they receive. The holistic approach additionally ties these principles into healthcare and SEWB, which recognises that community and culture need to be built into health systems. Finally, our recommendations are meaningless without accountability. Each of these principles are required to enact the goal of all Aboriginal and Torres Strait Islander LGBTQIA+ young people having opportunities to be safe, healthy, and thriving.



5.

FAMILY & COMMUNITY

WHO ARE FAMILY AND COMMUNITY?

- People who directly interact with Aboriginal and Torres Strait Islander LGBTQIA+ young people as part of their family or community.
- This includes Aboriginal and Torres Strait Islander LGBTQIA+ people, parents and caregivers, Elders, community leaders, friends of Aboriginal and Torres Strait Islander LGBTQIA+ young people, other family members, Aboriginal and Torres Strait Islander people, and non-Indigenous LGBTQIA+ people.
- This also includes Aboriginal and Torres Strait Islander and/or LGBTQIA+ community groups and small community organisations (e.g., local advocacy groups, local cultural dance groups, local organisations who provide Cultural Awareness or cultural immersion experiences).
- This does NOT include people who only interact with Aboriginal and Torres Strait Islander LGBTQIA+ young people through their work (e.g., clinicians, social workers, educators, researchers).
- Individuals might be family and community and also part of services, government, and/or wider community.

FAMILY AND COMMUNITY ROLES:

- Taking action to create visibility, education and safe places for and about Aboriginal and Torres Strait Islander LGBTQIA+ young people
- Advocating to services

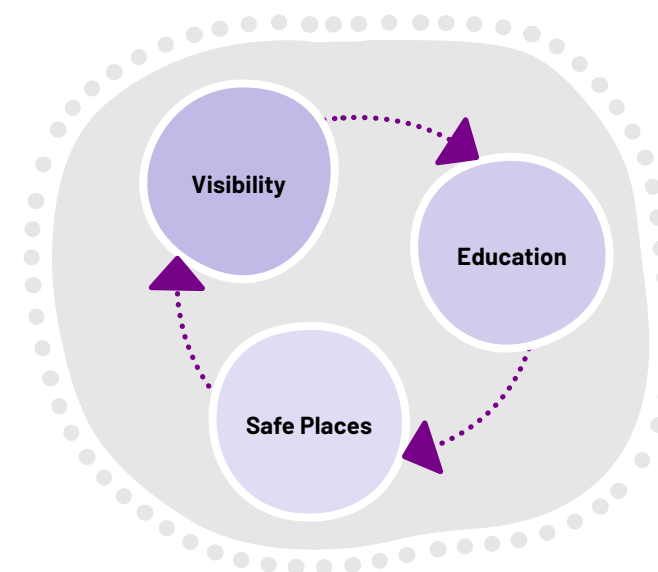
Visibility, education and safe places

Aims

The actions for family and community have three interlocking and iterative aims: increasing the visibility of Aboriginal and Torres Strait Islander LGBTQIA+ young people, making available education for and about Aboriginal and Torres Strait Islander LGBTQIA+ young people, and creating safe places for Aboriginal and Torres Strait Islander LGBTQIA+ young people.

Both family and community and Aboriginal and Torres Strait Islander LGBTQIA+ young people themselves need to *receive* visibility, education and safe places, and be part of *creating* them. This creates a process of change where support and celebration of Aboriginal and Torres Strait Islander LGBTQIA+ young people snowballs into wider community spaces.

These are local-level ways to enact change and will have the most immediate effect on Aboriginal and Torres Strait Islander LGBTQIA+ young people's lives. For family and community-led change to be effective, it must incorporate all three aims.



Visibility

"And this is where everything needs to be looked at holistically because: visibility... you're feeling a certain way that you don't know that there's anyone else in the world feeling that way or that it's even a thing and internalising all of that."

—Walkern Katatdjin Roadmap Co-Design Forum participant.

Improving the visibility of Aboriginal and Torres Strait Islander LGBTQIA+ people will have a positive impact on Aboriginal and Torres Strait Islander LGBTQIA+ young people's self-esteem, self-understanding, comfort, and pride. There is a need to share and celebrate positive stories, including both individual's stories and examples of good work being done by communities and services. Visibility of Aboriginal and Torres Strait Islander LGBTQIA+ young people's supporters is also a way to role model behaviour to other friends, family and community members. Visibility further promotes allyship and inclusion by making it clear to community leaders, Elders and services that there are Aboriginal and Torres Strait Islander LGBTQIA+ young people within their communities and therefore these issues are highly relevant to them. Visibility can *create* pride for Aboriginal and Torres Strait Islander LGBTQIA+ young people, but this pride must be *maintained* through strong support networks.

Education

"...we're talking about incremental generational changes, and I think that's why particularly, if I can say, the mainstream education that each of us participates in is extremely important because you would hope that the future Elders that are coming through will have a different perspective..."

—Walkern Katatdjin Roadmap Co-Design Forum participant.

Creating access to education about Aboriginal and Torres Strait Islander LGBTQIA+ people will help Aboriginal and Torres Strait Islander LGBTQIA+ young people themselves to conceptualise their own feelings and experiences, understand their own needs, know how to seek appropriate help, and locate themselves within a strong and proud community. By educating family and community members, we can create systemic change because upcoming generations and future leaders will have more informed perspectives that promote inclusion. Education should also challenge colonial depictions of Aboriginal and Torres Strait Islander people, which homogenise Aboriginal and Torres Strait Islander people and exclude Aboriginal and Torres Strait Islander LGBTQIA+ people. We recognise that all education must be localised, tailored to meet the knowledge of each community, and must form part of an ongoing learning journey.



Safe places

"A safe place where they yarn and they will feel safe about talking to old people. They're not gonna be... what's the word? Judgmental. So the safe place is, perhaps, I think it's a priority because it addresses a range of issues."

—Walkern Katatdjin Roadmap Co-Design Forum participant.

Safe places will give Aboriginal and Torres Strait Islander LGBTQIA+ young people space to proudly be themselves without being expected to compartmentalise parts of their identity. These should be opportunities for Aboriginal and Torres Strait Islander LGBTQIA+ young people to connect and yarn with each other and other supportive community members. They should further provide space for collective healing and opportunities for cultural learning. Contributors to this Roadmap formulated the need for safe places partially as a response to the high risk of suicide among Aboriginal and Torres Strait Islander LGBTQIA+ young people, with the understanding that isolation and cultural disconnection lead to poor mental health. Safe places will be created during events and yarns or embedded within Healing Centres. Safe places necessarily require family and community to be supportive, which may require education and visibility first. This goal acknowledges the power of Aboriginal and Torres Strait Islander LGBTQIA+ young people having community spaces where all parts of their identity feel held and seen.

CASE STUDY

KIMBERLEY BLAK PRIDE FESTIVAL 2024

Kimberley Blak Pride aims to bring visibility to First Nations First Nations Sistagirl, Brothaboy, Lesbian, Gay, Bisexual, Transgender, Intersex, Queer/Questioning, Asexual and Gender Diverse Plus (SBLGBTIQ+) mob in the Kimberley, to empower them, provide voice and safe spaces to celebrate and be who we want to be without stigma and prejudice, together with our families, friends and allies.

For nine days, Kimberley Blak Pride (KBP) put on an historic SBLGBTIQ+ Festival in Rubibi (Broome).

Goolarri Media Enterprises (GME) partnered with Kimberley Blak Pride and provided help to events manage and auspice the festival. The volunteer Festival Director planned and developed the Festival, including all of the fund raising and negotiations with potential funders, sponsors, fashion designers, DJs, drag artists, dancers, performers, set designers, lighting, sound and stage, politicians as well as organising a volunteer festival working committee. The Festival Working Group co-ordinated all of the events, months and months before the festival actually took place. Over 50 community volunteers gave their time and effort freely leading up to the festival and during the festival. Without the many volunteers, the festival would not have been possible.

The festival featured blak queer Kimberley talent across 11 festival events, including the Out and Proud Blak Pride Parade, Writing Blak and Queer panel, Queerlode Karaoke, Still Here Still Queer Fashion Show, Queer Movies Under the Stars, Blak Balls Drag Bingo, Out and Proud Symposium, and the Kimberley Blak Pride Extravaganza Dance Party.

The festival was open to Elders, families, friends and allies. Complimentary tickets were given to Elders, young people, volunteers, unwaged and sponsors. The festival was supported by a large number of sponsors, who provided funding, donated prizes, and provided in-kind support. Attendees said the festival made them feel safe, proud, comfortable, respected, included and happy.

Using these actions

These actions are a set of options, not a linear path. The Family and Community actions are sorted by how many people are involved. You may need to start small – at the individual level – to create the conditions where Aboriginal and Torres Strait Islander LGBTQIA+ will be safe and supported.

Most importantly, start somewhere.

All these actions are continual. You should be *flexible* and decide where to start and what actions to do based on the needs of your family and community. Some communities are more ready to support Aboriginal and Torres Strait Islander LGBTQIA+ young people than others. Be ready to work with community in whatever stage they're at, taking the time required to *bring in community*. Additionally, actions will have different requirements in terms of their expense and expertise required to run (e.g., organising events can be costly and labour-intensive, whereas kitchen table yarns can be done by anyone).

ACTIONS FOR FAMILY AND COMMUNITY

In this section, we expand on the points below to provide advice and guidance on how you can take action in your family and community:

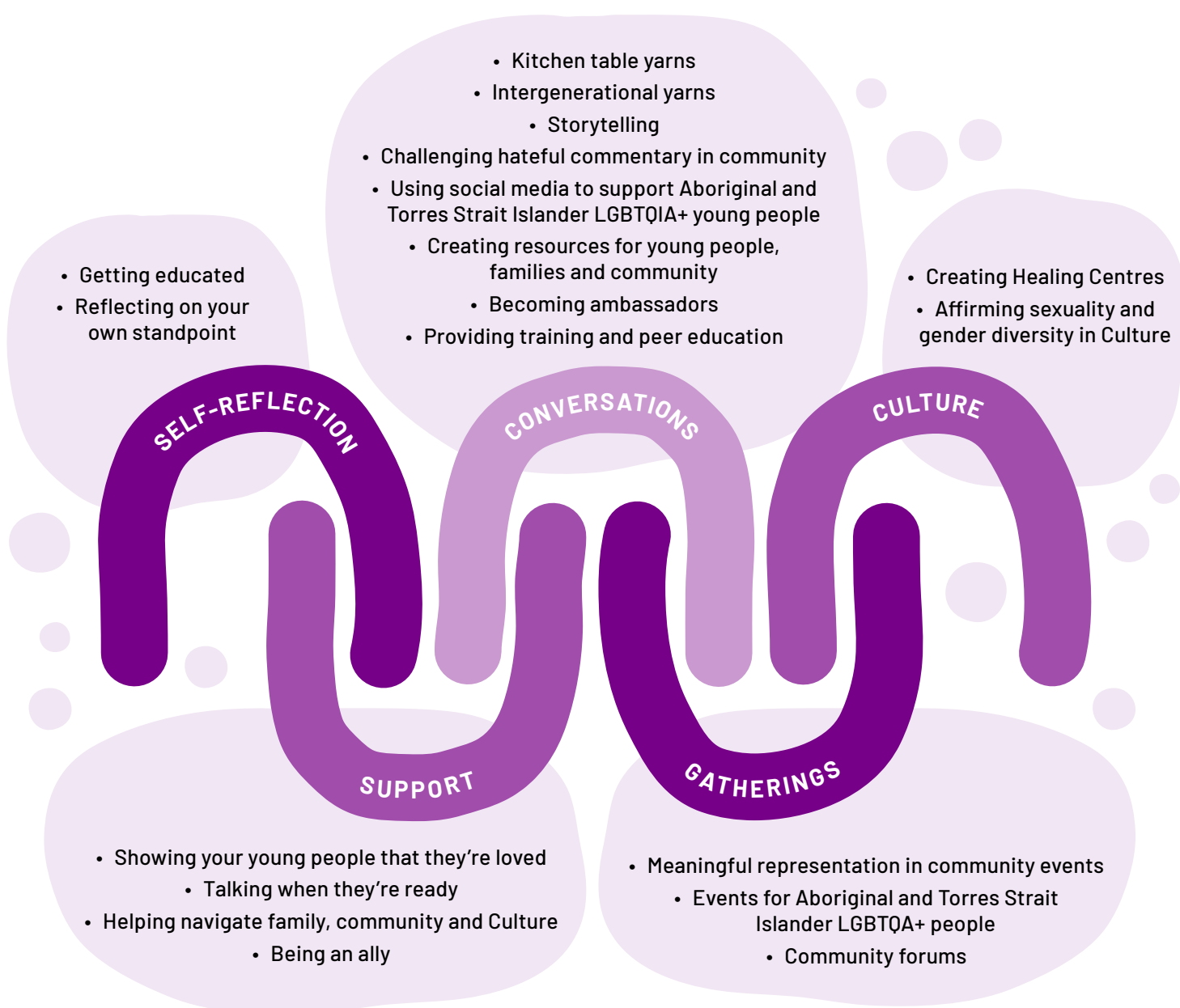


Figure 5. Actions for Family and Community.

Self-reflection

Individual self-reflection actions are about learning to be more supportive and advocating for Aboriginal and Torres Strait Islander LGBTQIA+ young people. Self-reflection alone isn't enough – it *must* be followed by support, conversations, gatherings and culture.

GETTING EDUCATED

Seek education about Aboriginal and Torres Strait Islander LGBTQIA+ young people and the issues they face. Be curious and open-minded. If you don't know/understand something: ask, investigate and learn. Learn about what language and behaviour is and isn't ok. As you learn, talk to others about how you're feeling and what it's made you think about. You can learn from many different sources, including formal training, resources, books, documentaries, movies, and TV shows. It's good to check your understanding with the Aboriginal and Torres Strait Islander LGBTQIA+ people in your life but remember that there is plenty of information available online.

REFLECTING ON YOUR STANDPOINT

The identities we hold and the experiences we've had shape the way we see the world. This is called a standpoint. **Interrogate how your standpoint informs your feelings and assumptions about Aboriginal and Torres Strait Islander LGBTQIA+ young people and influences the relationships you have.** Additionally, everyone experiences both privilege and disadvantage. As family members and community of Aboriginal and Torres Strait Islander LGBTQIA+ young people, you may hold one or multiple marginalised identities. Sometimes this can make it challenging to see how you might have privilege. But research tells us that both Aboriginal and Torres Strait Islander people who are straight and cisgender and LGBTQIA+ people who are non-Indigenous tend to have higher overall wellbeing and face less barriers than Aboriginal and Torres Strait Islander LGBTQIA+ people. Reflect on how your experiences differ from Aboriginal and Torres Strait Islander LGBTQIA+ young people and how they might experience challenges that you do not face. Also think about how you could use your privilege to help Aboriginal and Torres Strait Islander LGBTQIA+ young people. Identify the things you say and do that make it seem like everyone should be straight and cisgender. This is called *heteronormativity* and *cisnormativity*. For most of us, these are deeply embedded assumptions, values and norms that will take time and practice to unlearn. Most times, we do not even know that we are spreading this belief. Be patient. Find education and resources to help you learn. Once you've started to reflect on your own heteronormativity and cisnormativity, carry this awareness with you as you work on support, conversations and gatherings.

For Aboriginal and Torres Strait Islander people: through conversations and gatherings, we can begin to talk as a community about how some of the things we do as Aboriginal and Torres Strait Islander people and ways we practice Culture can be heteronormative and cisnormative. We can also interrogate how our beliefs have been influenced by colonisation. We need to yarn together, including with Elders and knowledge holders, about the right approach to including and celebrating LGBTQIA+ identities for each of our communities.

HERE ARE SOME RESOURCES FOR LEARNING AND REFLECTING:

- [Walkern Katatdjin](#) resource page
- [First Nations and Queer Yarning Panels](#)
- [History of First Peoples Entries in the Sydney Mardi Gras Parade](#)
- [VACCA LGBTQIA+ Resources](#) and [Pride Month](#) resources
- [VACCO Rainbow Mob](#) resources
- [Transblack](#) TV show
- [Rob's Real Life Story](#) and [Simone and Rosalina's Story](#) videos
- [Wellmob Gender Identity](#) resources
- [Trans Mob](#) webpage
- [Aboriginal and Torres Strait Islander LGBTQIASGBB+](#) archive and portal
- [Young Deadly Free](#) sexual health resources for mob of all sexualities and genders



Support

There are many ways that you can personally make Aboriginal and Torres Strait Islander LGBTQIA+ young people feel safe and supported in your day-to-day life. Support actions are about ensuring the Aboriginal and Torres Strait Islander LGBTQIA+ young people know that you'll be there for them when they need you.

LETTING YOUR YOUNG PEOPLE KNOW THEY'RE LOVED

Let the young people in your life know they're loved and celebrated and that you're there to support them. Aboriginal and Torres Strait Islander LGBTQIA+ young people may often hear hateful things, from their peers, from adults, in the media and on the internet. This can make it easy to assume that all people think like that. It might seem obvious to you, but telling your young people that you love and accept them for who they are will help them feel supported.

TALKING WHEN THEY'RE READY

Speak to young people when they come to you ready to talk, not when you feel ready. It can sometimes take a lot of courage for Aboriginal and Torres Strait Islander LGBTQIA+ young people to ask for help or share how they're feeling. If you turn them away, they might not want to try talk again, and you might miss the chance to have an important conversation. If you are not sure of what language to use when talking about sexuality and gender with young people, please see our [guide](#).

HELPING NAVIGATE FAMILY, COMMUNITY AND CULTURE

Young people may be unsure if the rest of their family and community accepts their LGBTQIA+ identity, or they might know for sure that they're not accepted. This can be difficult to deal with. **Ask young people if you can help them navigate their relationships with family and community or find ways to take part in their Culture safely as an LGBTQIA+ person.** This could include letting your whole family know that inclusion is important to you, coming out to other people for them *with their permission*, speaking to your Elders about how LGBTQIA+ young people can take part in cultural activities safely and respectfully, or finding community events that are inclusive.

BEING AN ALLY

Stand up for Aboriginal and Torres Strait Islander LGBTQIA+ young people. Be prepared to advocate for Aboriginal and Torres Strait Islander LGBTQIA+ people and call out bigoted behaviour when you see it (for example, using the bystander intervention strategies [here](#)). Not only is this important to change other people's behaviour, but it lets the Aboriginal and Torres Strait Islander LGBTQIA+ young people in your life know that you have their back.

Conversations

These actions are about connecting to others and opening up dialogue in community. Some of these actions are conversations *with* Aboriginal and Torres Strait Islander LGBTQIA+ young people, and others are about conversations *advocating for* Aboriginal and Torres Strait Islander LGBTQIA+ young people. Create opportunities for Aboriginal and Torres Strait Islander LGBTQIA+ young people to connect with people who can understand and inspire them. Work together to understand how you can support LGBTQIA+ mob in your community and challenge harmful thinking. Through conversations you can foster belonging and pride, help educate others, call out discriminatory behaviour, normalise diversity, and celebrate the achievements of Aboriginal and Torres Strait Islander LGBTQIA+ people.

KITCHEN TABLE YARNS

Have a yarn with someone at the kitchen table. This is a way to educate community members by yarning one-on-one in their own space, allowing them to ask questions, and for both people to “*slowly start opening their lives for other people*”. This is something small that we all know how to do and is usually a safe way to start conversations.

INTERGENERATIONAL YARNS

Bring together older and younger Aboriginal and Torres Strait Islander LGBTQIA+ people to connect, share stories and learn from each other. Some young people may not have met an older Aboriginal and Torres Strait Islander LGBTQIA+ person, especially one who shares their specific identity, and it can be reassuring for them to see for themselves that Aboriginal and Torres Strait Islander LGBTQIA+ people can live long and fulfilling lives. For older Aboriginal and Torres Strait Islander LGBTQIA+ people, this can help with the loneliness some older people experience and let them understand what it's like being a young Aboriginal and Torres Strait Islander LGBTQIA+ person now. This is also a way of preserving the history of Aboriginal and Torres Strait Islander LGBTQIA+ communities through oral tradition.

STORYTELLING

As a culturally relevant practice, storytelling can be a stand-alone action or incorporated into the other actions in this Roadmap. This could **include Aboriginal and Torres Strait Islander LGBTQIA+ people sharing their personal stories and talking about identity, connections to community and Culture, coming out or good experiences accessing care.** It could also include positive stories from family members and friends. It can be face-to-face or use technology for a wide reach (e.g., podcasts, videos). Be mindful that the people sharing their stories are safe and supported, especially in communities that are homophobic or transphobic.

USING SOCIAL MEDIA TO SUPPORT ABORIGINAL AND TORRES STRAIT ISLANDER LGBTQIA+ PEOPLE

Create social media posts or campaigns to share Aboriginal and Torres Strait Islander LGBTQIA+ people's stories and achievements. Also highlight family members who are modelling support and allyship, for example through their stories about caring for their Aboriginal and Torres Strait Islander LGBTQIA+ young person. Social media can also be used to share health promotion messages to help Aboriginal and Torres Strait Islander LGBTQIA+ young people feel empowered when accessing services. Stories from different Countries and language groups are

important to make sure that there is representation that feels relevant to different communities. Social media can have a very wide reach, but it is helpful to have a plan in place for [dealing with hateful comments](#). Help keep social media safe by reporting harmful content. Invite Aboriginal and Torres Strait Islander LGBTQIA+ young people into safe online community spaces to help them build their own networks.

CREATING RESOURCES FOR YOUNG PEOPLE, FAMILIES AND COMMUNITY

Develop and share resources for young people, families, and community members based on the needs of your community. Services or researchers can help to provide information and evidence you can use (see the [Evidence](#) chapter). Depending on how you create and share resources, this may require funding to your local community. Resources for young people could include: Aboriginal and Torres Strait Islander LGBTQIA+ people to look up to, how to talk about being LGBTQIA+ with family, or how to deal with returning to Country or community as an LGBTQIA+ person. Resources for family and community members could include: how to support Aboriginal and Torres Strait Islander LGBTQIA+ young people when they come out, or how to navigate the attitudes of extended family and other community members.

BECOMING AMBASSADORS

Supportive leaders in the community can become ambassadors to educate other community members on Aboriginal and Torres Strait Islander LGBTQIA+ issues and/or advocate within broader systems such as out-of-home care. **Consider how the recommendations for [other services and systems](#) might be relevant to your community.**

PROVIDING TRAINING AND PEER EDUCATION

Aboriginal and Torres Strait Islander and/or LGBTQIA+ community groups could **provide peer education and training to help family members and other community members understand how to best support Aboriginal and Torres Strait Islander LGBTQIA+ young people.** This should include building a basic understanding of who Aboriginal and Torres Strait Islander LGBTQIA+ young people are, the strengths they have and the issues they face, how to use inclusive language, and how to provide young person-led support. Training should help family and community members to feel empowered and reassured that they won't say or do something wrong. Training could operate similarly to programs like Mental Health First Aid, which provides people from diverse backgrounds with everyday skills and resources. Services or researchers could assist in providing evidence, resources, and professional expertise to develop peer education and training.

WHAT ELSE ARE WE DOING?

PRIDE YARNS

SEWB through yarning. Pride Yarns is a partnership between Edith Cowan University, The Kids Research Institute Australia, the University of Western Australia, Murdoch University, Youth Pride Network (YPN), Wungening Aboriginal and Torres Strait Islander Corporation and Yorgum Healing Services.

The Pride Yarns program toolkit is scheduled to be available for public use in 2026. Contact prideyarns@ecu.edu.au for more information.

This project will develop and test an Elder-led, intergenerational support intervention, known as [Pride Yarns](#), which aims to bring together Aboriginal and Torres Strait Islander LGBTQIA+ youth and supportive Elders to improve Aboriginal and Torres Strait Islander LGBTQIA+ young people's

Gatherings

Gathering actions are about coming together to celebrate, shift attitudes as a whole community, and **make space where Aboriginal and Torres Strait Islander LGBTQIA+ young people are seen and celebrated**. Many family and community members of Aboriginal and Torres Strait Islander LGBTQIA+ young people are on organising committees for local events and gatherings. Ensure your community is ready, so that these gatherings will be safe for Aboriginal and Torres Strait Islander LGBTQIA+ people. ACON's [Guide To Hosting LGBTQ+ Events Safely](#) has some helpful advice to consider when planning gatherings.

MEANINGFUL REPRESENTATION IN COMMUNITY EVENTS

Ensure Aboriginal and Torres Strait Islander LGBTQIA+ people are meaningfully included and visible in events like NAIDOC, Pride, Wear if Purple, or Sorry Day to actively ensure they feel welcome. This could include having Aboriginal and Torres Strait Islander LGBTQIA+ art or posters as decoration, providing Aboriginal and Torres Strait Islander LGBTQIA+ resources, or including Aboriginal and Torres Strait Islander LGBTQIA+ performers and/or speakers.

EVENTS FOR ABORIGINAL AND TORRES STRAIT ISLANDER LGBTQIA+ PEOPLE

Host events that are specifically about celebrating Aboriginal and Torres Strait Islander LGBTQIA+ people. These events should be spaces for Aboriginal and Torres Strait Islander LGBTQIA+ young people to loudly and proudly be themselves and be together as an Aboriginal and Torres Strait Islander LGBTQIA+ community. While these events focus on Aboriginal and Torres Strait Islander LGBTQIA+ people, they should be open to everyone and emphasise bringing in community. There are many different types of events that can be run for Aboriginal and Torres Strait Islander LGBTQIA+ people. These should include events that are accessible and appropriate for Aboriginal and Torres Strait Islander LGBTQIA+ young people under the age of 18 years.

COMMUNITY FORUMS

Community forums are a way to **bring together stakeholders from all parts of the community to discuss important matters**. This could include opportunities for Aboriginal and Torres Strait Islander LGBTQIA+ people to share their stories and educate other community members on how to be supportive, for example through acting out scenarios with accepting language. Community forums are a great way to start talking as a community about how to be more supportive, but ensure your community is ready first.

How Do I Know When My Community is Ready?

Talk with Aboriginal and Torres Strait Islander LGBTQIA+ people to understand how they're currently being treated in community, partner with Aboriginal and Torres Strait Islander and/or LGBTQIA+ organisations in your area and speak with other community members to gauge their attitudes towards Aboriginal and Torres Strait Islander LGBTQIA+ people. Be aware of any discriminatory violence, threats or public demonstrations that have been happening locally. The goal is to avoid young people feeling pushback against your event, ensure violence or verbal abuse does not occur, and reduce the likelihood that community members will later be targeted for attending inclusive events.



Culture

These are transformative actions focused on self-determination, collective healing, and a shift to make sure LGBTQIA+ mob are connected to and embraced in Culture. These actions are grounded in Aboriginal and Torres Strait Islander ways of being and doing and will take conversations, gatherings, and sustained advocacy first.

CREATING HEALING CENTRES

Based on 1996 *Stolen Generations National Conference* and organisation recommendations (Commonwealth of Australia, 1997), Healing Centres should be multi-functional and intergenerational safe places to facilitate collective healing. This may include **connecting young people with Elders, providing support for older and younger community members, or providing opportunities to upskill emerging leaders**. Healing Centres are a possible ongoing model for safe places, which will provide young people the opportunity to be heard without judgement when they need to talk. Practices and policies must ensure that Healing Centres are welcoming to Aboriginal and Torres Strait Islander LGBTQIA+ people. Healing Centres are continual sources of support but will require considerable resourcing.

"Therefore, there's so many needs required in our community that it can be a multifunctional centre... I think the biggest [issue] was suicide and how community is impacted by that. But where do we go? Some people go to the casino, of course, but, you know. Where do we go to share the grief and loss? Where do we go to share information?... Where we go when we bury someone, which is every Friday? We sit and yarn around the graveside. Shame! We should have our own place to go to."

-Walkern Katatdjinn Roadmap Co-Design Forum participant.

AFFIRMING SEXUALITY AND GENDER IN CULTURE

Find ways to ensure cultural education in your community is accessible and safe for LGBTQIA+ young people. There is real danger of young people losing their cultural connection because they cannot safely participate in cultural practices or are driven out of community by discriminatory Elders, knowledge holders, and community leaders. We also know that young people may be disconnected from their Culture for many other reasons. As such, there is a need to create more opportunities to connect Aboriginal and Torres Strait Islander LGBTQIA+ young people with Culture in a way they know will embrace them for who they are. This includes creating spaces for LGBTQIA+ people in community, teaching about LGBTQIA+ identities when presenting Cultural Awareness training, finding ways to respectfully figure out trans and non-binary people's roles in Culture (including participation in men's/women's business), or determining how rules and practices apply to same-sex couples. Genuine inclusion requires Elders and other cultural leaders to be educated about LGBTQIA+ people first, so they can then talk with young people about appropriate ways of participating in Culture.

"I guess it would be a combination of non-binary mob and Elders who know culture and stuff, and having them sit down and discuss and go on Country and stuff, and see how those two can fit and where both can compromise and come out. Because myself, personally, I felt that I can't participate in some cultural things because I am non-binary and I don't feel like I fit into either a women's or men's business or stuff like that. So being able to see tangibly where I fit and where I can participate and stuff like that and knowing that I am fully accepted by my culture, I think is really important."

-Walkern Katatdjinn Roadmap Co-Design Forum participant.

Advocating to services

Family and community also have a role to play in letting services know that Aboriginal and Torres Strait Islander LGBTQIA+ inclusive care is a priority for them. This can be done through:

- Inviting services to attend/support/sponsor the community-led actions above.
- Submitting feedback about inclusive practice through services' feedback/complaints forms. This could include complaints about hurtful behaviour, requests for greater visibility in the service, or requests for specific resources or programs.
- Attending your local services' Annual General Meetings and advocating for inclusive practice as a priority.
- Speaking about Aboriginal and Torres Strait Islander LGBTQIA+ inclusion with your friends and family who work at services and helping them get educated.
- Seeking out and participating in other opportunities for community to inform services' practices (e.g., on advisory groups, workshops, or surveys) and using these platforms to speak about the importance of supporting Aboriginal and Torres Strait Islander LGBTQIA+ young people. Where possible, push for Aboriginal and Torres Strait Islander LGBTQIA+ young people to be included in wider community consultations.



6.

HEALTH & WELLBEING SERVICES

This chapter focuses on services that aim to improve people's physical health, mental health, or social and emotional wellbeing. However, we know that there are many different types of services and systems that Aboriginal and Torres Strait Islander LGBTQIA+ young people interact with. For services without a health and wellbeing focus, please see the chapter on [Other Services and Systems](#).

We know from previous phases of the Walkern Katatdjinn project (Liddelow-Hunt et al. 2023) that Aboriginal and Torres Strait Islander LGBTQIA+ young people use many types of health and wellbeing services, and we believe that they should have option of safely accessing whichever service they want. While it would be ideal to see more specific services and programs for Aboriginal and Torres Strait Islander LGBTQIA+ young people, we know that those are generally not yet available. Likewise, even if targeted services were available, some Aboriginal and Torres Strait Islander LGBTQIA+ young people may still choose to access mainstream services for other reasons. As such, *all* services should be working towards providing inclusive and appropriate care for Aboriginal and Torres Strait Islander LGBTQIA+ people.

WHO ARE HEALTH AND WELLBEING SERVICES?

- Services whose clients include Aboriginal and Torres Strait Islander LGBTQIA+ young people, and all staff employed there (e.g., clinicians, social workers, reception staff, etc.).
- This includes Aboriginal Community Controlled Organisations (ACCOs) with a health and wellbeing focus, Aboriginal Community Controlled Health Organisations (ACCHOs), LGBTQIA+ community-controlled organisations, youth health services, mainstream health services, hospitals, etc.
- This also includes registered training organisations who providing training to health and wellbeing services.
- This *does not* include small-scale community organisations or community groups (e.g., those who do not provide a clinical service). These are considered part of [family and community](#).
- Individuals may be part of services *and also* family and community, government, and/or wider community.

SERVICES' ROLES:

- Empowering families and community
- Engaging in inclusive practice
- Advocating to government



Empowering family and community

Health and Wellbeing Services can empower family and community by assisting them to carry out the actions listed in the [Family and Community](#) chapter of this Roadmap. Practical ways to support these actions include:

- Providing and advertising resources (e.g., venues, equipment, sponsorship) for family and community-led initiatives.
- Assisting community to access resources and funding (e.g., through community grants).
- Hosting family and community days through your service.
- Hosting community forums at your service.
- Hosting forums to facilitate Aboriginal and Torres Strait Islander LGBTQIA+ young people and community leaders connecting with each other.
- Providing education for Aboriginal and Torres Strait Islander LGBTQIA+ young people to increase their health literacy and empower them to advocate for themselves in health settings.
- Providing education and support for families (e.g., peer-support groups for carers of Aboriginal and Torres Strait Islander LGBTQIA+ young people).
- Providing education and support for Elders and community leaders to better understand the needs of LGBTQIA+ young people.

Even though these actions can be supported by services, they must remain [community-led](#). Services should make sure that they are listening and letting community members lead the conversation. However, services can prompt these actions by actively asking community how they can be empowered to support Aboriginal and Torres Strait Islander LGBTQIA+ young people.

WHO CAN I CONNECT WITH?

- [Blak Pride WA](#) (WA)*
- [Camp4Mob](#) (WA)
- [Kimberley Blak Pride](#) (WA)
- [Black Rainbow](#) (NT)*
- [2Spirits](#) (QLD)
- [BlaQ Aboriginal Corporation](#) (NSW)
- [Rainbow Mob](#) (ACT)
- [Koorie Pride Victoria](#) (VIC)*

*These organisations are inactive at the time of printing this Roadmap report but services should regularly check for updates.

Engaging in inclusive practice

Given that Aboriginal and Torres Strait Islander LGBTQIA+ young people experience poorer social and emotional wellbeing and mental health outcomes, it is extremely important that they have access to appropriate and inclusive healthcare. Doing this properly will mean transforming our systems for health and wellbeing care.

"I think for me, it's about creating an atmosphere from the time a young person comes into the clinic or to the health service, they know that it's a safe place and that their healthcare needs are going to be respected."

—Walkern Katatdjijin Roadmap Co-Design Forum 1 participant.

The actions for services outlined in this chapter are designed to be sustainable, not fast. Starting with small changes, inclusion can be embedded into services' way of working. This will necessarily require **slow steady progress** over a long period of time.

Starting point

As a first step, reflect on your reasons for supporting Aboriginal and Torres Strait Islander LGBTQIA+ young people. Why does it matter to your service? Why does it matter to your community? How does it align with your service's values and mission? When you're ready to move forward, start the conversation with your manager/team/service about how to implement the actions below.

Using these actions

The Health and Wellbeing Service actions are sorted into phases that reflect where your service is at and what you're currently trying to achieve. However, we know that change is never linear.

Start by identifying what is possible and needed. Not all actions will be applicable to each service – it will depend on the size of your service, what you offer, and who your clients are. All actions commence in one phase but should be continuous and may need to be refreshed regularly. Some actions might need to be happen before others to ensure clients and staff are safe and supported. For this reason, [finding strengths](#) and [learning, building, growing](#) actions should be done before the [embedding](#) and [transforming the system](#) actions.

ACTIONS FOR HEALTH AND WELLBEING SERVICES

In this section, we expand on the points below to provide advice and guidance on how you can take action for health and wellbeing services:

- Transparency and truth-telling
- Defining and identifying resourcing
- Representation in decision-making
- Policy and commitment mapping
 - Stakeholder mapping to build relationships with Aboriginal and Torres Strait Islander LGBTQIA+ young people, community, and other services
- Employing Aboriginal and Torres Strait Islander LGBTQIA+ people
- Creating communities of practice

- Employing an Inclusion Specialist
 - Updating externally managed information systems
- Monitoring and evaluating inclusion practice
 - Embedding inclusion into Continuous Quality Improvement (CQI)
- Developing a trainee-to-trainer program
- Seeking accreditation for Aboriginal and Torres Strait Islander LGBTQIA+ inclusive practice

- Embedding inclusion in Strategic and Operational plans
 - Embedding inclusion in Reconciliation Action Plan (RAP)
 - Undertaking ongoing training
- Updating in-house information systems
 - Making bathrooms accessible
- Developing strengths-based resources
- Developing tools, measures, interventions, and therapies
 - Developing tiered training
- Workplace policy to ensure inclusion

- Culturally responsive practice
- Culturally responsive workforce
 - Improved systems to record mental health story
 - Wrap-around care

FINDING STRENGTHS

EMBEDDING

LEARNING, BUILDING, GROWING

TRANSFORMING THE SYSTEM

These actions should occur in conjunction with other work being done to improve healthcare access and quality for the broader community. For example, reducing costs or waitlists to receiving care will make services more accessible to many people, including Aboriginal and Torres Strait Islander LGBTQIA+ people. This can also incorporate changes addressing other intersecting identities Aboriginal and Torres Strait Islander LGBTQIA+ young people may hold, such as having a disability, chronic illness, or being neurodiverse.

Finding strengths

Finding strengths actions exist to identify your service's current strengths, build a strong foundation and understand what needs to be done and who should be involved. These actions focus on reflection and relationship building.

TRANSPARENCY AND TRUTH-TELLING

Providing visible signs of inclusion helps young people to feel safe and encourages them to engage with your service. To translate other actions into better service access and engagement for Aboriginal and Torres Strait Islander LGBTQIA+ young people, services must transparently communicate improvements and their commitment to inclusion to the community.

- Seek Aboriginal and Torres Strait Islander LGBTQIA+ young people's perspectives and understand why they may feel uncomfortable or unwelcome accessing your service. This is particularly important for services where previous unacceptable practice has occurred, which may still have a reputation for exclusionary practice among community members. In these instances, services would benefit from engaging in a process of truth-telling. Services should be aware that Aboriginal and Torres Strait Islander LGBTQIA+ young people may be hesitant to engage or disclose that they are Aboriginal and Torres Strait Islander and/or LGBTQIA+ due to previous negative experiences. Ensure that you're bringing in community through this action, so you can reconcile the past and plan for the future together. A proper process of truth-telling should include a commitment to change that your service is held accountable to.
- Actively work to make your service feel welcoming to Aboriginal and Torres Strait Islander LGBTQIA+ young people through the use of visible signs such as pride flags, Aboriginal and Torres Strait Islander flags, posters and pamphlets. This should include signs and statements of support on your service's website and social media.
- Develop a Statement of Inclusion based on your service's organisational values and policies, and ensure this is visible to clients. This could be co-developed with a diverse range of people, including Aboriginal and Torres Strait Islander LGBTQIA+ people, to reflect what inclusion means to the people who use your service.
- Engage in outreach (e.g., into schools), events, social media, and other promotion to attract Aboriginal and Torres Strait Islander LGBTQIA+ young people. Identifying ways to 'meet people where they're at' may be enhanced by collaboration and stakeholder mapping.
- Ensure that you let community know what actions your service has taken to support Aboriginal and Torres Strait Islander LGBTQIA+ young people. Celebrate the work you have done.

Figure 6: Actions for Health and Wellbeing Services.

Transparency is not just marketing; it requires honesty about your service's limitations. Remember that signs, promotion and outreach must be backed by good practice. Do not promise inclusive care that your service is not ready to deliver.

HERE ARE SOME RESOURCES AND POSTERS YOU CAN USE FREE OF CHARGE IN YOUR SERVICE:

- [Walkern Katatjdjin](#) mental health and [SEWB](#) resources
- [Jay Kulbardi x VACCHO](#) Rainbow Mob posters
- [Charlotte Allingham x Zoe Belle](#) Gender Collective, [Thorne Harbour Health & Elizabeth Morgan House](#) Celebrate LGBTI+ Blakfullas posters
- [Young Deadly Free](#) sexual health resources
- [Butterfly Foundation](#) EveryBODY is Deadly body image poster

You can find more resources on [HealthInfoNet](#) or [WellMob](#).

DEFINING AND IDENTIFYING RESOURCING

Determine what resources you already have and what resources you will need. Be creative about how these actions fit with existing funding and what can be done for free.

- Make use of existing resources effectively. What resources do you already have access to and how can they be reconfigured?
- Identify what existing funding your service has that could support improved Aboriginal and Torres Strait Islander LGBTQIA+ inclusive practice. For example, funding for workforce development may be appropriate to support inclusive practice training or hiring and retaining Aboriginal and Torres Strait Islander LGBTQIA+ staff.
- Seek out additional funding as required.
- Identify what actions can be completed in-house versus what will need to be outsourced.

REPRESENTATION IN DECISION-MAKING

Improved inclusivity should be both bottom-up and top-down. As such, **identify and ensure that Aboriginal and Torres Strait Islander LGBTQIA+ young people remain involved in decision-making for your service.**

- Reflect on the perspectives present in your services' board, executive, and management committees. Ensure Aboriginal and Torres Strait Islander LGBTQIA+ perspectives are represented and supported in these roles. This may require providing training for your service's board, executive or management committees, to ensure Aboriginal and Torres Strait Islander LGBTQIA+ people feel supported in these positions.

- Ensure Aboriginal and Torres Strait Islander LGBTQIA+ people are represented and supported in any existing community reference groups your organisation has. Members should be able to voice their opinions and be treated with respect by all other members and staff. Members of your existing community reference groups can be drawn on when you need specific expertise or input (e.g., for other representation in decision-making points below). If your service does not already have a community reference group, consider forming one.
- Ensure Aboriginal and Torres Strait Islander LGBTQIA+ perspectives are represented in the design and oversight of specific programs that your service offers. New programs should not commence without input into whether they are accessible to and inclusive of Aboriginal and Torres Strait Islander LGBTQIA+ young people.
- Establish or diversify ways of receiving community input (e.g., feedback forms) and actively seek input from Aboriginal and Torres Strait Islander LGBTQIA+ young people. Continue to engage with community throughout all the actions your service takes, to remain community-led and accountable. Make sure you have solid processes in place for acting on community advice. Where possible, set up your service's feedback platforms so that LGBTQIA+ related feedback can be categorised, tracked and reported on.

POLICY AND COMMITMENT MAPPING

Map your existing policies, commitments, accreditation, and funding. Be aware of what your service is already expected to do and how improving inclusive practice can help deliver on your service's commitments.

- Identify where inclusivity is currently included in your services' accreditation and funding agreement(s). This may be implied within expectations to support diversity, equity, and/or inclusion. For example, supporting equity will be required for services that receive state or federal funding. Similarly, any service with RACGP accreditation is required to deliver patient healthcare that '[considers and respects patients' rights, identity, body diversity, beliefs, and their religious and cultural backgrounds](#)'. Be prepared to discuss and address inclusivity requirements well ahead of applying for or renewing accreditation.
- Identify how supporting Aboriginal and Torres Strait Islander LGBTQIA+ young people aligns with your service's existing Strategic Plan, mission, values, and policies.
- Identify how supporting Aboriginal and Torres Strait Islander LGBTQIA+ young people aligns with external policies and laws that your service is required to follow.

STAKEHOLDER MAPPING TO BUILD RELATIONSHIPS WITH ABORIGINAL AND TORRES STRAIT ISLANDER LGBTQIA+ YOUNG PEOPLE, COMMUNITY, AND OTHER SERVICES

Map existing and potential stakeholders. This includes identifying potential collaborators.

- Identify other relevant services. This could include other local services that your clients access, state/national peak bodies that provide support and resources, or training organisations. Establish relationships and determine how your services can collaborate, how you can avoid duplicating work, how you can share resources and expertise, and which services you can include in your referral pathways.
- Through your relationships with other relevant services, help staff to know when your service is the right one to support an Aboriginal and Torres Strait Islander LGBTQIA+

client, and when you need to refer out. Use your stakeholder mapping to build a thorough understanding of what other services are available, if your client will be able to access them, and how long the waitlist is. Refer out when you know there is a better option; do not bounce young people between services unnecessarily.

- Identify relevant stakeholders within the community you service. This might include connecting with local Elders and community leaders who support LGBTQIA+ people and seeking further input from Aboriginal and Torres Strait Islander LGBTQIA+ young people themselves. Establish strong relationships early on and make sure you bring them with you on the journey. Ensure relationships are reciprocal and community members are appropriately reimbursed for their contributions and receive other kinds of recognition and development.

EMPLOYING ABORIGINAL AND TORRES STRAIT ISLANDER LGBTQIA+ PEOPLE

Aboriginal and Torres Strait Islander LGBTQIA+ young people consistently say that seeing other people like them working in services helps them to feel welcome and understood.

- **Attract and retain Aboriginal and Torres Strait Islander LGBTQIA+ staff.** Where possible, employ multiple Aboriginal and Torres Strait Islander LGBTQIA+ people from diverse experiences to avoid making staff feel like the 'token' diverse staff member. Where possible, employ young people in appropriate roles.
- **Ensure Aboriginal and Torres Strait Islander LGBTQIA+ staff are properly supported at work.** Later actions in the Roadmap will help to guarantee a safe workplace for Aboriginal and Torres Strait Islander LGBTQIA+ employees, but ensure you're listening to their feedback about workplace safety from the moment they start working with you. Creating an inclusive workplace will assist with staff retention.

CREATING COMMUNITIES OF PRACTICE

Based on the findings of your stakeholder and policy mapping, we encourage **ongoing learning about Aboriginal and Torres Strait Islander LGBTQIA+ inclusion through a community of practice, to provide a forum to share learnings within and between services.** A community of practice is a group of people with a shared interest who learn through cooperating with each other and sharing their way of doing things (Wenger, 1998).

- Identify who will be responsible for coordinating the community of practice (e.g., scheduling meetings, sending regular updates, inviting new members).
- Identify what is required to ensure the community of practice can be sustained if the responsible person leaves.

These actions may be further embedded in your service's operation through [learning, building and growing](#), which will assist sustainability. Reassess and reconfigure these actions as required.



CASE STUDY

WUNGENING ABORIGINAL CORPORATION

[Wungening](#) engages and empowers staff, and ultimately their clients, through knowledge translation, information sessions, training opportunities, and Pride visibility.

- Wungening is an active partner of Walkern Katatdj in order to understand and promote the mental health and wellbeing of LGBTQIA+ Aboriginal youth, and to help the Walkern Katatdj team develop appropriate service interventions.
 - » Wungening has shared Walkern Katatdj resources to its staff on how to support young LGBTQIA+ mob, along with self-care guides for LGBTQIA+ Aboriginal youth. These resources are made available to staff through the intranet.
 - » Wungening is committed to knowledge translation. The Research and Evaluation team summarise Walkern Katatdj research deliverables such as the project's reports and peer-reviewed papers, and email them to the rest of the organisation.
 - » Wungening's Dabakarn provides research-related learning opportunities through Dabakarn Kadadjiny (slow steady learning), an online series of research presentations from Wungening's research partners. The purpose of the series is to facilitate conversation between staff and researchers, so that each might learn from the other. In 2023 and 2024, we hosted the Walkern Katatdj team who talked about their projects.
- Wungening appointed SHQ to provide LGBTQIA+ awareness training to interested staff in 2023.
- Wungening was the first ACCO to have its own float in the Pride Parade. They have marched the past two years.
- Wungening flies the rainbow flag at our main East Perth hub.
- At the same time, Wungening are engaged in continuous improvement and see areas that could be strengthened, e.g., having a sexuality and gender diversity policy, enabling staff pronouns on email signatures, and consistent LGBTQIA+ mob training for staff. Moreover, Wungening only have limited data on the extent to which they are perceived as inclusive by LGBTQIA+ clients and staff.

Learning, building, growing

‘Learning, building, growing’ actions seek to embed a commitment to Aboriginal and Torres Strait Islander LGBTQIA+ inclusion to ensure that it is sustainable. These actions focus on concrete changes you can make in your service.

EMBEDDING INCLUSION IN STRATEGIC AND OPERATIONAL PLANS

Clearly and explicitly embed a commitment to care for Aboriginal and Torres Strait Islander LGBTQIA+ young people in your service’s Strategic and Operational Plans.

- When your service’s Strategic plan is due for renewal, include performance indicators about delivering appropriate care to Aboriginal and Torres Strait Islander LGBTQIA+ young people within the plan.
- Add the changes needed to improve Aboriginal and Torres Strait Islander LGBTQIA+ inclusive care (i.e., these actions) into your service’s Operational Plan as appropriate.
- Operational Plans and policies should include a requirement for staff to undergo inclusion training (see below).
- Consider co-designing the inclusion items in your strategic and operational plans with Aboriginal and Torres Strait Islander LGBTQIA+ young people, community, staff and other relevant stakeholders.

EMBEDDING INCLUSION IN RECONCILIATION ACTION PLAN (RAP)

If you work at a service that has a RAP, consider how recognition and support for diversity among Aboriginal and Torres Strait Islander people can be built into your workplace’s commitment to reconciliation.

- Which of the actions in this Roadmap can be incorporated into your service’s RAP?
- Consider how your RAP’s commitment to anti-racism can also support LGBTQIA+ inclusion.

If you service does not have a RAP, consider developing one. [Reconciliation Australia](#) provides comprehensive information and support for organisations interested in creating a RAP.

UNDERTAKING ONGOING TRAINING

All staff at your service should receive training specific to supporting Aboriginal and Torres Strait Islander LGBTQIA+ young people. Given that staff at services also belong to various communities, this may have a flow-on effect in educating the wider community.

- Identify an appropriate training to upskill your staff in providing care for Aboriginal and Torres Strait Islander LGBTQIA+ people (see some options below). Stakeholder mapping will help you do this.
- Training should be required for *all* staff members, including administrative and executive staff.
- Embed the training within your onboarding processes for all new staff.

- Depending on your service’s remit and capacity, consider further upskilling clinical staff in providing gender-affirming care. There are currently too few clinicians providing gender-affirming care, especially in Aboriginal and Torres Strait Islander services and regional and remote areas. Building clinical staff’s knowledge and confidence in the provision of gender-affirming care can help fill this gap. This training does not need to be specific to Aboriginal and Torres Strait Islander LGBTQIA+ people, but you should reflect on how gender-affirming care can be delivered in a culturally secure way and seek input from Aboriginal and Torres Strait Islander trans and gender diverse people where appropriate.
- Accurately collect data about how many of your staff have undertaken training and, if possible, evaluate whether training has resulted in improved care and staff confidence.
- Staff should complete a brief refresher training every few years.

WHAT ELSE IS AVAILABLE?

Other existing training about providing care for Aboriginal and Torres Strait Islander LGBTQIA+ people includes:

VACCHO: RAINBOW MOB TRAINING

- 2-3 hours, RACGP CPD accredited, online-only, designed for Victoria
- Free for VACCHO members, fee to access for non-members

CONTACT

2Spirits, QC & Yarns Heal: Aboriginal and Torres Strait Islander & Torres Strait Islander LGBTIQ+SB Inclusion & Diversity Training (only available in Queensland)

- Inclusive Services Training Package for professionals to improve their ability to appropriately support Aboriginal and Torres Strait Islander LGBTIQ+ Sistergirl and Brotherboy people.
- Email: 2Spirits@qc.org.au

UPDATING IN-HOUSE INFORMATION SYSTEMS

Update your service’s information systems (e.g., patient records, intake forms) to accurately and appropriately capture information about Aboriginal and Torres Strait Islander and LGBTQIA+ clients and staff. For the information systems your service has control over, update as required ensuring compliance with relevant laws and fundings agreements.

- Locate the expertise that already exists in your service. Who currently knows how to use and update your information systems? Where will you need to access further resources and support?
- Identify issues with the current information systems. Your service’s information systems should capture accurate data about gender and sex assigned at birth, intersex variations, chosen names, pronouns, emergency contacts, parents/guardians (including same-sex parents/guardians and other non-nuclear family), children (including non-nuclear family),

and other chosen family, as appropriate. Allow open field responses where possible and appropriate. The [RACGP Standards for general practice](#) provide useful guidelines.

- Only record information that clients and staff are happy to provide, and never pressure clients or staff to provide information about their sexuality or gender. It is important that people determine when the right time and place is for them to state their gender and sexuality, if at all.
- Support reception and administrative staff to learn about recording and sharing information safely (e.g., through training and supervision). For example, it may be unsafe to use a young person's chosen name and pronouns in the waiting room where other community members can hear. Reception staff are often a young person's first point of contact with your service and are incredibly important in shaping their experience.
- Upskill all staff to have conversations with clients about when and where it is appropriate to mention/imply sexuality and gender.

20% of Aboriginal and Torres Strait Islander LGBTQIA+ adults in WA reported being 'outed' at work (Hill et al., 2021). Never disclose or imply your colleagues' sexuality or gender without their permission. For example, avoid accidentally outing someone by asking about their boyfriend/girlfriend and instead ask about their partner or refer to the partner by name if you know it.

MAKING BATHROOMS ACCESSIBLE

Provide clients and staff access to a bathroom that is accessible and appropriate to their needs. For many people, including trans and gender diverse people, male/female bathrooms alone are often insufficient.

- Ensure that there is an [all-gender bathroom](#) that is safe, private, comfortable and clearly identifiable available to clients and staff. This is not the same as a unisex accessible bathroom. Find further tips for making bathrooms feel [inclusive](#) or [inc-loo-sive](#) here.
- Ensure that all clients and staff have access to a bathroom that affirms their gender.
- Ensure you remain compliant with the [National Construction Code](#) and other laws, including the Sex Discrimination Act and anti-discrimination legislation in your state/territory.

DEVELOPING STRENGTHS-BASED RESOURCES

If your organisation is identified as having the expertise and capacity (e.g., during stakeholder mapping), develop resources specifically for Aboriginal and Torres Strait Islander LGBTQIA+ young people. This could include pamphlets, factsheets, posters, videos, webpages, apps, storybooks, stickers, etc.

- Develop strengths-based resources that provide accurate and up-to-date information about LGBTQIA+ identities, health, and wellbeing. These resources may be based on evidence specific to Aboriginal and Torres Strait Islander LGBTQIA+ people, evidence about LGBTQIA+ people in the general population presented in a culturally appropriate way, or evidence about Aboriginal and Torres Strait Islander people presented in an LGBTQIA+ inclusive way.
- Develop strengths-based resources and information for family and community about Aboriginal and Torres Strait Islander LGBTQIA+ people, identities, wellbeing and allyship.
- Develop resources with information for young people about their right to confidentiality when accessing services, and the situations in which staff may have to disclose confidential information.
- Ensure accurate and up-to-date information is available online (if your service has an online presence). This should be accessible to young people and community through marketing to promote your online resources and/or improving search engine optimisation (SEO) to ensure your resources are easily found through a non-specific Google search.

DEVELOPING TOOLS, MEASURES, INTERVENTIONS, AND THERAPIES

If your organisation is identified as having the expertise and capacity (e.g., during stakeholder mapping), develop options for care that meet the needs of Aboriginal and Torres Strait Islander LGBTQIA+ young people. Currently, there is very little available specifically for this cohort. Interventions or tools that were designed specifically for Aboriginal and Torres Strait Islander or LGBTQIA+ people may not capture important parts of Aboriginal and Torres Strait Islander LGBTQIA+ young people's wellbeing.

- Develop and implement meaningful clinical tools, measures, interventions, therapies and/or ways of working that are [intersectional](#), [holistic](#) and realistic. Current tools are too frequently performative or 'tick-box' and do not adequately meet the needs of diverse young people.
- Consider developing programs that take holistic and collective healing approaches. Programs for Aboriginal and Torres Strait Islander LGBTQIA+ young people might include providing an opportunity for them to yarn with other Aboriginal and Torres Strait Islander LGBTQIA+ people (e.g., peer support), or inclusive ways of connecting with Culture. Pride Yarns ([see page 37](#)) is an example of a program that may support Aboriginal and Torres Strait Islander LGBTQIA+ young people's pride and cultural connection through intergenerational yarning.
- Similarly consider how your service could develop programs or counselling to support family and carers of Aboriginal and Torres Strait Islander LGBTQIA+ young people.

- Consider how existing promotion and programs/interventions could be adapted to better suit to Aboriginal and Torres Strait Islander LGBTQIA+ young people. For example, men's programs and women's programs are culturally relevant practice but may not be accessible to gender diverse young people – can you adapt your programs or offer something else to Aboriginal and Torres Strait Islander gender diverse young people?
- Where possible, determine the efficacy of the tools and interventions you've developed through regular monitoring and evaluation.
- Where possible and appropriate, share these tools with other services.

DEVELOPING TRAINING

If your service is identified as having the expertise and capacity (e.g., if your service is a registered training organisation), develop a tiered Aboriginal and Torres Strait Islander LGBTQIA+ inclusion training that is tailored to your local community needs. Alternatively, determine whether your organisation can access and deliver an existing training package (see some options below).

- Training should also be localised and culturally specific, recognising that one-size-fits-all approaches do not create space for people to engage with learning.
- Training should help staff to:
 - » Develop deeper understandings of Aboriginal and Torres Strait Islander LGBTQIA+ young people's experience and engage with sociohistorical context.
 - » Understand the importance of respecting confidentiality and communicating rights to confidentiality to Aboriginal and Torres Strait Islander LGBTQIA+ young people, especially those under the age of 18.
 - » Provide safe referral pathways to Aboriginal and Torres Strait Islander LGBTQIA+ young people.
 - » Take a strengths-based approach to working with Aboriginal and Torres Strait Islander LGBTQIA+ young people.
 - » Build core competencies for working with Aboriginal and Torres Strait Islander LGBTQIA+ young people.
 - » Understand how relevant policies, laws and legislation apply to their role.
- Training should be tiered to meet staff member's varying levels of knowledge, differentiate steps on the awareness-to-competency journey, and recognise that training should reflect an ongoing commitment to improved practice. This will include providing training specifically for clinicians, and training for more involved staff about promotion, advocacy and collaboration.
- Where possible, share this training with other services. You may need to consider the potential for sharing your training early in the design process. A community of practice can help you do this.
- There must be support in place for training facilitators. Ensure debriefing is in place after each training session and facilitators have access to mentorship and an appropriate Employee Assistance Program (EAP). Work with facilitators to determine what other support can be put in place to reduce burnout.

WORKPLACE POLICY TO ENSURE INCLUSION

Ensure that your service's workplace policies support the wellbeing and continued engagement of Aboriginal and Torres Strait Islander LGBTQIA+ staff and clients. Services that do not support diverse staff can quickly gain a reputation for exclusivity or lose valuable knowledge as staff choose to leave. Ensuring staff feel respected and supported is key to sustainability.

- Update existing inclusion and/or anti-discrimination or Cultural Safety policies as needed to explicitly reference Aboriginal and Torres Strait Islander and LGBTQIA+ clients and staff.
- Develop and introduce new policies as required, for example *a gender affirmation in the workplace* policy, through collaboration with Aboriginal and Torres Strait Islander and/or LGBTQIA+ clients and staff.
- Invest in organisational policies for attracting and retaining Aboriginal and Torres Strait Islander LGBTQIA+ staff, including through peer support networks and mentorship. Consider embedding this in your service's Operational Plan.
- Ensure that staff are up to date with your service's inclusion policy and understand that discriminatory behaviour is unacceptable in your service.
- Be prepared to act when unacceptable behaviour occurs.

WHAT ELSE ARE WE DOING?

The *Training health providers to work with Aboriginal and Torres Strait Islander LGBTQIA+ young people* research project arose from the needs identified by Aboriginal and Torres Strait Islander Community Controlled Organisations (ACCOs) while discussing initial findings from Walkern Katatdj. This project aims to strengthen the capacity of staff working in ACCOs to deliver support to Aboriginal and Torres Strait Islander youth (14–25 years) who are lesbian, gay, bisexual, transgender, queer/questioning, and asexual (LGBTQIA+) by co-designing, implementing, and evaluating a culturally sensitive inclusive practice training. The [Needs Assessment Report](#) identifies ACCOs' current training needs and considerations for the design of a training package, including core competencies for staff.

The training will be available as a free package for ACCOs in 2026. For more information, please contact Rainbow.Knowledge@thekids.org.au.





CASE STUDY

VICTORIAN ABORIGINAL COMMUNITY CONTROLLED HEALTH ORGANISATION

Victorian Aboriginal Community Controlled Health Organisation (VACCHO) is the peak body for Aboriginal and Torres Strait Islander health and wellbeing in Victoria. VACCHO's vision of vibrant, healthy, self-determining Aboriginal communities includes all LGBTQIASB+ community members. They welcome and embrace the diversity of Rainbow Mob and actively work to increase inclusive practices across the sector. VACCHO is a Rainbow Tick Accredited organisation.

VACCHO supports their member ACCOs with Rainbow Mob inclusion support by building their capacity and providing them with resources to deliver safer services to Rainbow Mob. They do this with Rainbow Tick Accreditation support, delivering online or onsite workshops to map organisations against the Rainbow Tick standards in a VACCHO developed Rainbow Tick Vital Signs tool, and providing ACCOs with an action plan to implement improvements to be Rainbow Tick ready.

VACCHO facilitates a bi-monthly Rainbow Mob Community of Practice with ACCOs and other Rainbow Mob stakeholders. This builds the capacity of the sector to safely support Rainbow Mob and supports ACCOs to make inclusive improvements to their systems. VACCHO hosts Rainbow Mob Gatherings with First Nations drag performers for metro and regional Mob to gain Community feedback and celebrate Rainbow Mob pride.

VACCHO has developed an online Rainbow Mob Health training course for members that is RACGP CPD accredited and includes lived experience videos from Rainbow Mob. VACCHO has a Rainbow Mob webpage that houses Rainbow Mob resources, including their recently developed Rainbow Mob posters for Community settings and staff capacity building. VACCHO also distributes Rainbow Mob T-shirts, tote bags and Rainbow Mob are Welcome Here stickers to increase visual awareness of inclusion and pride in their Communities.

Embedding

'Embedding' actions push beyond day-to-day inclusion into systems and evaluation. These actions focus on sustainability.

EMPLOYING AN INCLUSION SPECIALIST

Employ a dedicated Aboriginal and Torres Strait Islander LGBTQIA+ Inclusion Officer, who will be responsible for the day-to-day activities required to improve and maintain Aboriginal and Torres Strait Islander LGBTQIA+ inclusive practice.

- Their role and responsibilities will depend on your service's remit, but could include:
 - » Being visible to other staff members and available to provide trustworthy information and guidance.
 - » Championing the continued success of actions already taken (as above).
 - » Monitoring and evaluation of actions already taken (as above).
 - » Championing future actions (as below).
- There must be appropriate support in place for your inclusion officer. Ensure regular debriefing is in place and that they have access to mentorship and an appropriate Employee Assistance Program (EAP). Determine what other support can be embedded to reduce burnout.
- Provide additional support through the formation of a working group across the organisation to share expertise, responsibility and workload. Ownership from staff across your service will also assist in effectively embedding inclusion across all programs and units.

If your service is unable to access funding for a full-time inclusion officer, consider:

- Allocating a portion of an existing staff member's FTE to inclusion. Consider who is best placed to conduct this role – is it someone in People & Culture/Human Resources, Continuous Quality Improvement, or another team? Ensure your expectations are proportionate to the FTE your inclusion officer has.
- Forming an internal working group. Support staff to participate in the working group, e.g., by counting participation towards their paid work, running meetings during work hours, or finding meaningful ways to recognise their contributions.

UPDATING EXTERNALLY MANAGED INFORMATION SYSTEMS

Ensure your service's information systems (e.g., patient records, intake forms) accurately and appropriately capture information about Aboriginal and Torres Strait Islander LGBTQIA+ clients and staff. *If systems are externally managed, these can be slow to change, but without effort the systems will never change.*

- Identify issues with the current information systems. Seek input from Aboriginal and Torres Strait Islander LGBTQIA+ young people and other community members as appropriate. Your service's information systems should capture accurate data about gender and sex assigned at birth, intersex variations, chosen names, pronouns, emergency contacts, parents/guardians (including same-sex parents/guardians and other non-nuclear family), children (including non-nuclear family), and other chosen family, as appropriate.
- Determine what action is required for the external party to update the system and who is the appropriate person from your service to champion that. This will likely require a sustained and collaborative effort from services.
- Only record information that clients and staff are happy to provide, and never pressure clients or staff to provide information about their sexuality or gender.
- Support reception and administrative staff to learn about recording and sharing information safely (e.g., through training and supervision).
- Identify ways in which information storage can meet the principles of [Indigenous Data Sovereignty](#).

MONITORING AND EVALUATING INCLUSIVE PRACTICE

Regularly monitor and evaluate the actions you've taken to improve Aboriginal and Torres Strait Islander LGBTQIA+ inclusive practice to determine whether they are appropriate and effective for your service. Be prepared to be responsive and make changes when things are not working.

- This may be undertaken by an Inclusion Officer (as above) or another staff member. This will require appropriate time and resourcing for the evaluation and to implement improvements as required.
- Consider how you can incorporate community feedback into your evaluation, especially feedback from Aboriginal and Torres Strait Islander LGBTQIA+ young people, to ensure your practice remains community led.
- Evaluation will require data about the number of Aboriginal and Torres Strait Islander LGBTQIA+ people using your service, the number of Aboriginal and Torres Strait Islander LGBTQIA+ staff employed, and whether all programs are experienced as safe and inclusive for Aboriginal and Torres Strait Islander LGBTQIA+ young people from the perspectives of service-users themselves.

EMBEDDING INCLUSION INTO CONTINUOUS QUALITY IMPROVEMENT (CQI)

Ensure the actions your service has taken/plan to take are captured in your service's CQI and update how you use this Roadmap accordingly.

- There may be considerable overlap between this Roadmap and the CQI framework your service uses. Alternatively, your CQI framework may suggest other actions for inclusive care that you could consider.

For example: NACCHO's [National Framework for Continuous Quality Improvement in Primary Health Care for Aboriginal and Torres Strait Islander People 2018-2023](#) is used by many ACCHOs. Domain 2 (Doing CQI) includes the focus areas: 'organisational governance' and 'patient information management systems are used to support CQI'. [Representation in decision-making](#) actions can be incorporated into organisational governance to ensure Aboriginal and Torres Strait Islander LGBTQIA+ people have an active role in CQI. [Updating in-house information systems](#) actions will assist with providing information about Aboriginal and Torres Strait Islander LGBTQIA+ clients that can support CQI planning and evaluation. The focus area 'everyone in the organisation understands their role in CQI and is supported and resourced to do it' is not well represented in this Roadmap – services could consider how they can better support and resource all staff to contribute to improved care for Aboriginal and Torres Strait Islander LGBTQIA+ young people.

DEVELOPING A TRAINEE-TO-TRAINER PROGRAM

One reason for the limited training available is the lack of appropriate facilitators to deliver training according to an Aboriginal and Torres Strait Islander way of working. ***If your organisation is identified as responsible for delivering training (e.g., during stakeholder mapping), the sustainability of a training package should be supported by a trainee program that will upskill Aboriginal and Torres Strait Islander young people to become facilitators.***

- If your service is a registered training organisation, determine how a trainee program fits within your existing professional development and accreditation.
- Attract and retain multiple Aboriginal and Torres Strait Islander trainees. If possible, prioritise recruiting Aboriginal and Torres Strait Islander LGBTQIA+ young people or those with other relevant lived experience. This will be more successful if you have developed strong relationships with community during earlier actions.
- Ensure Aboriginal and Torres Strait Islander trainees are properly trained, supervised and supported at work. The goal is to recruit empathetic young people who are welcomed into an environment where they can flourish.
- If you're unable to recruit multiple Aboriginal and Torres Strait Islander young people who meet the requirements of the role, consider additionally recruiting older Aboriginal and Torres Strait Islander people or non-Indigenous people. Training should always be facilitated by at least one Aboriginal and Torres Strait Islander person accompanied by a second facilitator.

SEEKING ACCREDITATION FOR ABORIGINAL AND TORRES STRAIT ISLANDER LGBTQIA+ INCLUSIVE PRACTICE

Achieving accreditation for Aboriginal and Torres Strait Islander LGBTQIA+ inclusive practice will assist in making services' efforts at improving inclusion transparent to the wider community. Currently, there is no existing accreditation available to demonstrate services' capability to support Aboriginal and Torres Strait Islander LGBTQIA+ people, however this may change in the future.

- Consider how accreditations for LGBTQIA+ inclusive practice, such as Rainbow Tick, may or may not be appropriate for your service.
- Once your service has determined which accreditation(s) is best suited for your service, identify and allocate the time and resources required to achieve accreditation. This could be led by an Inclusion Officer or another staff member.
- All of the actions taken already will assist in achieving accreditation.
- *If your organisation is identified as having the expertise and capacity, develop an accreditation for Aboriginal and Torres Strait Islander LGBTQIA+ inclusive practice.*

WHAT ELSE IS AVAILABLE?

Currently, there is no existing accreditation available to demonstrate services' capability to support Aboriginal and Torres Strait Islander LGBTQIA+ people.

Rainbow Tick accreditation is currently being re-developed with Aboriginal and Torres Strait Islander consultation, and in the future a culturally appropriate training for ACCOs will be released to complement the How2 training for organisations seeking Rainbow Tick.

BLAK PRIDE Certification is currently being developed by the Blak and Proud research team for Aboriginal and Torres Strait Islander Medical Services that provide inclusive and affirming care, alongside a BLAK PRIDE Model of Care. See further details below.

Transforming the system

'Transforming the system' actions imagine the best possible care for Aboriginal and Torres Strait Islander LGBTQIA+ young people. Excellent care for Aboriginal and Torres Strait Islander LGBTQIA+ young people is likely to be excellent care for a wide range of people. These actions focus on working together to radically reshape service provision.

CULTURALLY RESPONSIVE PRACTICE

A culturally inclusive service will ensure **Aboriginal and Torres Strait Islander LGBTQIA+ young people feel completely supported from the moment they enter a service and receive the care that is appropriate to them.**

- Culturally inclusive practice requires delivering 'whole-of-self' care in which all aspects of young people's selves can be seen and supported when they want, but at the same time respects that young people's Aboriginal and Torres Strait Islander and LGBTQIA+ identities are not always relevant to the help they are seeking.
- Culturally inclusive practice should deliver on the [Principles](#) discussed in this Roadmap. This may require introducing new programs or outreach activities and strengthening relationships with community to deliver care holistically. For example, services may consider how their healing practices could incorporate intergenerational approaches or be more localised to the needs of their community.
- Incorporate Aboriginal and Torres Strait Islander knowledges into your service's practice. For example, engage Traditional Healers as an option for care.

CULTURALLY RESPONSIVE WORKFORCE

All service staff should be able to deliver inclusive practice as appropriate to their role.

- All staff should have completed training and engage in continuous learning in how to support Aboriginal and Torres Strait Islander LGBTQIA+ people.
- Staff should be responsive to the needs of each individual young person.
- Aboriginal and Torres Strait Islander LGBTQIA+ staff should be safe and supported in the workplace.
- All staff should have access to the care and support they need to stay well while working in their role.

IMPROVED SYSTEMS TO RECORD MENTAL HEALTH STORY

Contributors to this Roadmap discussed that for many young people the current mental health system requires them to continuously re-tell their story to new people as they are bounced around the health system or cycle through clinicians due to staff burnout. This can be re-traumatising, erodes trust, and is additionally burdensome for Aboriginal and Torres Strait Islander LGBTQIA+ young people given that their intersectionality requires explaining multiple overlapping contexts that may be unfamiliar to clinicians.

Accessing care would be easier and less traumatic for young people if they only had to share their story once. Young people should be able to develop their individual story, store it in a safe place, and give permission to share it with others in their care network

- All staff should have completed training and engage in continuous learning in how to support Aboriginal and Torres Strait Islander LGBTQIA+ people.

WRAP-AROUND CARE

Consider how your service can provide holistic care. Wrap-around care is holistic, situated and intersectional. Current delineations between types of services (e.g., ACCHOs, LGBTQIA+ services, youth services) make young people feel that only certain parts of themselves are acceptable in particular settings. This can also make it necessary for young people to access multiple different services and thus exacerbates the need for young people to re-tell their stories and build trust with multiple clinicians.

- Consider how formal partnerships might be leveraged to provide more holistic care through the streamlined provision of diverse types of care from different specialist services. This could be achieved either:
 - » through building referral and information-sharing networks to facilitate a no-wrong-door approach, or
 - » creating a one-stop-shop for care.
- Additionally, in line with a holistic approach, wrap-around care should be responsive and able to address the many different things Aboriginal and Torres Strait Islander LGBTQIA+ young people and their loved ones need help with. This might include providing meals, a venue for wakes, or help navigating systems such as Centrelink and banking.

WHAT ELSE IS AVAILABLE?

The Blak and Proud team at UQ Poche Centre for Indigenous Health are currently developing a Service Model for Aboriginal and Torres Strait Islander LGBTQIA+ people.

The Blak and Proud project is focused on creating more affirming and safe healthcare experiences for Aboriginal and Torres Strait Islander LGBTQIA+ Brotherboy and Sistergirl folk within Aboriginal and Torres Strait Islander Medical Services. A primary aim of this project is the development of the 'BLAK PRIDE Model of Care'. This will be co-designed with Aboriginal and Torres Strait Islander LGBTQIA+ Brotherboy and Sistergirls and Healthcare Providers. The BLAK PRIDE Model of Care will be trialled in 'Aboriginal and Torres Strait Islander Community Health Service Brisbane' and continually refined to create an effective and scalable Model of Care that can be implemented across multiple health sectors. Alongside the BLAK PRIDE Model of Care, a tiered certification program will also be developed called the 'BLAK PRIDE Certification', also built alongside community. This certification will be used to identify Aboriginal and Torres Strait Islander Medical Services that provide inclusive and affirming care as well as provide guidance on how services can provide a high standard of care for LGBTQIA+ Brotherboy and Sistergirl clients.

CONTACT

For more information about the BLAK PRIDE project including the BLAK PRIDE Model of Care and the BLAK PRIDE Certification, contact the lead investigator Professor James Ward (james.ward@uq.edu.au) or the Project Coordinator James Fowler (james.fowler@uq.edu.au)

Advocating to government

Use your position of power to advocate for the needs of Aboriginal and Torres Strait Islander LGBTQIA+ young people. Services are in a unique position to speak from their professional expertise to government about the needs of their service and the communities they serve. This is especially true for community-controlled organisations (Aboriginal and Torres Strait Islander and LGBTQIA+), who represent the collective voice of their community.

Services should ensure that all advocacy is community-led and intersectional. This could be achieved by seeking, as relevant, the input of:

- Aboriginal and Torres Strait Islander LGBTQIA+ young people
- Parents and caregivers of Aboriginal and Torres Strait Islander LGBTQIA+ young people
- Elders and community leaders
- Other community members
- Other services
- Researchers

This may be facilitated by structures such as:

- Ensuring the Board and any Governance structures of your service include Aboriginal and Torres Strait Islander LGBTQIA+ people, including young people.
- Establishing strong networks between services. This could include a community of practice or governance group.
- Establishing strong networks within each service, so all staff are aware of what is happening and can provide input as appropriate.
- A commitment to collaboration among services. This could be a formalised agreement that includes individual services' roles and an estimated timeline.
- Establishing of a Governance Group of Aboriginal and Torres Strait Islander LGBTQIA+ leaders and organisations.
- Leveraging existing peak bodies.

Specific actions:

- Advocate to peak bodies and commissioners relevant to your service.
- Advocate through contracting negotiations.
- Get involved in the development of sector wide monitoring and evaluation frameworks. This can mean advocating for the development of outcomes that hold government and systems to account.
- Get involved with government advisory groups or find the people who are and speak to them about supporting Aboriginal and Torres Strait Islander LGBTQIA+ young people.
- Identify supportive ministers, members of parliament and local councillors and bring them into the journey.

THIS TOOLKIT FROM WACOSS CAN HELP YOU AND YOUR COMMUNITY OR SERVICE TO ADVOCATE TO GOVERNMENT.

<https://www.wacoss.org.au/wp-content/uploads/2024/02/advocacy-toolkit-2023.pdf>

THE TOOLKIT WILL HELP YOU TO:

1. Identify the level of government responsible for the issue you want to raise
2. Find the representative for your electorate
3. Decide how you're going to communicate (i.e., what type of submission?)
4. Prepare a submission

The [Government](#) and [Evidence](#) chapters of this Roadmap include several recommendations for policies, strategies and funding to support Aboriginal and Torres Strait Islander LGBTQIA+ young people that your service could champion. Additionally consider the needs raised by your community, and those you identify while implementing the actions to support Aboriginal and Torres Strait Islander LGBTQIA+ young people's wellbeing through inclusive practice.

FOR PEAK BODIES AND COMMISSIONERS

Peak Bodies and Commissioners have a special role to play in acting as a crucial link between community, services and government, and have an important role in advocating. At a national level, relevant peaks and commissions include:

- National Aboriginal and Torres Strait Islander Community Controlled Health Organisation (NACCHO)
- LGBTIQ+ Health Australia (LHA)
- Australian Human Rights Commission, including the:
 - » Aboriginal and Torres Strait Islander Social Justice Commissioner
 - » Sex Discrimination Commissioner
 - » National Children's Commissioner

Some recommendations for specific peak bodies and Commissioners include:

ALL

Advocate to government for the development of an action plan for Aboriginal and Torres Strait Islander LGBTQIA+ people's wellbeing. This may be a state or national plan and could be supplementary to existing plans, for example the *National Action Plan for the Health and Wellbeing of LGBTIQ+ People 2025–2035*. If successful, assist government to develop and implement the plan through co-design with communities.

NACCHO

There is a need for *The National Framework for Continuous Quality Improvement in Primary Health Care for Aboriginal and Torres Strait Islander people* to include an expectation of LGBTQIA+ inclusive practice. As the national peak body for Aboriginal and Torres Strait Islander Community Controlled Health Organisations, NACCHO's standards for practice should support delivery of inclusive care across all ACCHOs in Australia. Additionally, prioritisation from NACCHO will help to lobby for inclusion in other national strategies.

COALITION OF PEAKS AND THE ABORIGINAL AND TORRES STRAIT ISLANDER SOCIAL JUSTICE COMMISSIONER

Advocate for explicit and meaningful inclusion of Aboriginal and Torres Strait Islander LGBTQIA+ people in the next *National Agreement on Closing the Gap*, beyond the data development plan. Specific deliverables concerning LGBTQIA+ people may be determined from existing research.

THE ABORIGINAL AND TORRES STRAIT ISLANDER CHILDREN AND YOUNG PEOPLES' COMMISSIONER

Aboriginal and Torres Strait Islander LGBTQIA+ young people should be considered in all policy and strategies related to Aboriginal and Torres Strait Islander people, including all state and national Aboriginal and Torres Strait Islander Suicide Prevention strategies. Existing work to address the concerns of overrepresentation of Aboriginal and Torres Strait Islander youth in Child Protection should be inclusive of the experiences of Aboriginal and Torres Strait Islander LGBTQIA+ young people in state care. Our recommendations for [out-of-home care](#) may be relevant.

LGBTIQ+ HEALTH AUSTRALIA (LHA), AUSTRALIAN PROFESSIONALS ASSOCIATION FOR TRANS HEALTH (AUSPATH) AND THE SEX DISCRIMINATION COMMISSIONER

Aboriginal and Torres Strait Islander LGBTQIA+ young people should be considered in all policy and strategies related to LGBTQIA+ people. LHA member organisations should be supported in improving cultural safety and anti-racist practice. LHA should advocate for funding to go to Aboriginal and Torres Strait Islander LGBTQIA+ organisations and community-led initiatives to support Aboriginal and Torres Strait Islander LGBTQIA+ young people.

7.

OTHER SERVICES & SYSTEMS

The focus of this Roadmap has been on health and wellbeing services; however we know that there are many different types of services and systems that Aboriginal and Torres Strait Islander LGBTQIA+ young people interact with, which can have a profound impact on their wellbeing.

This includes, but is not limited to:

- The education system
- The justice system
- Out-of-home care
- Housing and homelessness services
- Other social services
- Recreational youth programs

Many of the actions recommended in the Health and Wellbeing Services chapter will apply to other types of services and systems. Consider how those actions may need to be adapted to be relevant to your context and the service you provide.

Some considerations for specific types of services and systems discussed during the Roadmap Co-Design Forum include:

For primary and secondary education

Most Aboriginal and Torres Strait Islander LGBTQIA+ young people under the age of 18 spend the majority of their time at school and, as such, their school environment has a huge influence on their wellbeing (Wallis et al., 2024). For example, Aboriginal and Torres Strait Islander LGBTQIA+ young people who feel a sense of belonging to their school are less likely to report a recent suicide attempt or self-harm (Amos et al., 2023).

"How do we stop making a child fit into the system when the system should be trying to fit around the child?"

—Walkern Katatdjijin Roadmap Co-Design Forum participant.

As such, all young people, including Aboriginal and Torres Strait Islander LGBTQIA+ young people, would benefit from:

- Having access to mental health support through school. There are multiple ways this could be implemented, depending on the students' needs. This should be supported by increasing mental health literacy taught in schools (e.g., inclusion in the curriculum). The mental health support available through schools should be culturally centred and affirming for Aboriginal and Torres Strait Islander LGBTQIA+ young people.
- Making the education system more trauma-informed would help all students, particularly those most at risk.



At present, the expectations in primary and secondary education are not appropriate for students experiencing adverse life events, and this presents a risk for inequity in educational achievement and long-term wellbeing.

- There remains a need for improved education about Aboriginal and Torres Strait Islander people's Culture in the Australian curriculum to build a more nuanced and truthful understanding in the wider community of the diversity of contemporary Aboriginal and Torres Strait Islander peoples. This should include education about Aboriginal and Torres Strait Islander LGBTQIA+ peoples.
- There is a need for better protection for LGBTQIA+ young people in schools. This includes introducing appropriate avenues of support for LGBTQIA+ students in religious schools and policy preventing conversion ideology. This also includes enforced anti-bullying policies and upskilling staff in LGBTQIA+ students' rights to confidentiality.

This will additionally require better training for teachers about mental health, Aboriginal and Torres Strait Islander people, and Aboriginal and Torres Strait Islander LGBTQIA+ people.

For higher education (i.e., universities, TAFES, other educational institutions)

In addition to interacting directly with Aboriginal and Torres Strait Islander LGBTQIA+ young people, educational institutions are also responsible for training the professionals that will engage with Aboriginal and Torres Strait Islander LGBTQIA+ young people in the future.

- Ensure Aboriginal and Torres Strait Islander LGBTQIA+ students are supported to thrive. This may include building intersectionality into existing initiatives for diversity, equity and inclusion for Aboriginal and Torres Strait Islander student success.
- Ensure university mental health and wellbeing supports are engaging in inclusive practice (e.g., following the actions in the [health and wellbeing services](#) chapter of this roadmap) and that counsellors are upskilled to provide affirming and inclusive support to Aboriginal and Torres Strait Islander LGBTQIA+ students.
- Incorporate Aboriginal and Torres Strait Islander LGBTQIA+ content into university/TAFE ally training programs, to ensure staff are upskilled to create an inclusive environment for Aboriginal and Torres Strait Islander LGBTQIA+ staff and students.
- Incorporate evidence-based Aboriginal and Torres Strait Islander LGBTQIA+ content into the curriculum for health and social service professions. Higher education has a role to play in creating future generations of inclusive health workers.

For out-of-home care

Aboriginal and Torres Strait Islander young people remain over-represented in out-of-home care, and there is currently no evidence about experiences of out-of-home care for Aboriginal and Torres Strait Islander LGBTQIA+ young people.

- We would like to reiterate the importance the Aboriginal and Torres Strait Islander Child Placement Principle (SNAICC, n.d.). Improving adherence to the Principle should be a priority for everyone who aims to support Aboriginal and Torres Strait Islander LGBTQIA+ young people.

- Further consider consistently providing a mentorship or brother-sister program to give children in care an opportunity to engage in Culture through a relationship with an Aboriginal and Torres Strait Islander leader/cultural authority/trusted community member. This can be a chance for young people to understand and develop their own relationship to Culture and discuss how this relates to their LGBTQIA+ identity.
- Cultural care plans need to be developed more meaningfully and flexibly. Culture should be specific to that young person's language group. Different forms and ways of practicing Culture should be on offer, to meet the diverse personalities and strengths of Aboriginal and Torres Strait Islander LGBTQIA+ young people.
- Additionally, there is a need to improve the screening and training for foster carers. This should include carers having access to training and information about caring for Aboriginal and Torres Strait Islander LGBTQIA+ young people.
- Placements should take into account young people's sexuality and gender, to ensure that Aboriginal and Torres Strait Islander LGBTQIA+ young people are placed with carers that are safe and affirming.

EXISTING RECOMMENDATIONS

Further consider how in your role you can advance the following relevant reports, principles, and recommendations:

- [Bringing Them Home: Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families](#)
- [The Royal Commission into Aboriginal and Torres Strait Islander Deaths in Custody](#)
- [The Royal Commission into Aged Care](#)
- [The Royal Commission into Child Sexual Abuse](#)
- [The Aboriginal and Torres Strait Islander Child Placement Principle](#)

The recommendations made in these documents are significant to the wellbeing not just of Aboriginal and Torres Strait Islander LGBTQIA+ people, but of the communities within which they are situated. In line with the [principles](#) outlined in this Roadmap, high level action should support the implementation of these recommendations to ensure collective and intergenerational wellness.



8.

GOVERNMENT

The localised actions proposed for family, community and services should be supported by broader systemic and structural change. This includes the development of policies, strategies, and funding to support the wellbeing of Aboriginal and Torres Strait Islander LGBTQIA+ young people, along with considering how this work ties into existing recommendations.

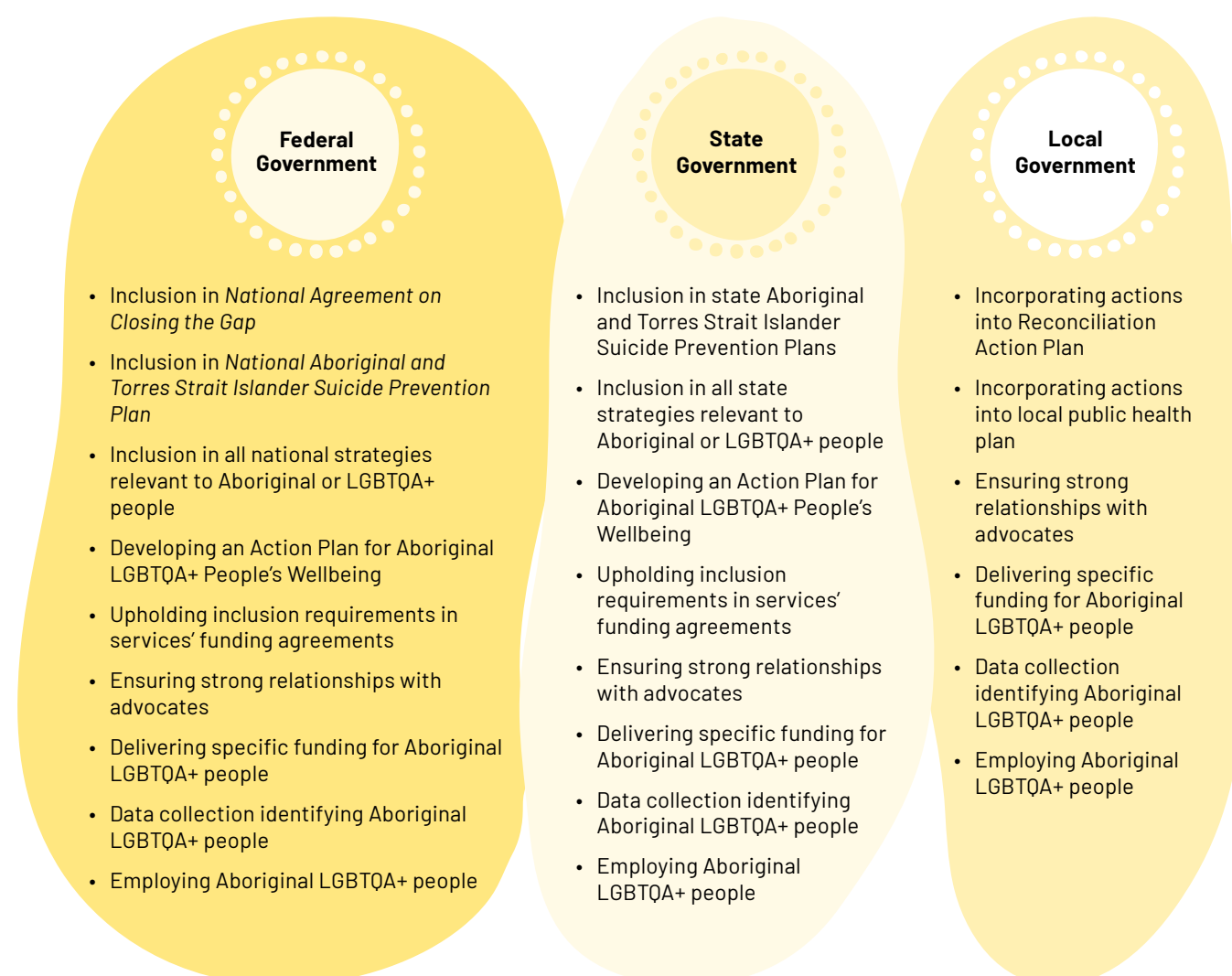
Government roles:

- Empowering services, families and communities
- Updating or developing policies, strategies and funding to support Aboriginal and Torres Strait Islander LGBTQIA+ young people
- Maintaining responsibilities to the wider community

Policies, strategies, funding and data to support Aboriginal and Torres Strait Islander LGBTQIA+ young people

Overarchingly, government action should address the factors that contribute to poor mental health. These include racism and other forms of discrimination, disempowerment, and other social determinants of health. Solutions should be strengths-based and community led.

ACTIONS FOR GOVERNMENT



FEDERAL

Ensure explicit and meaningful inclusion of Aboriginal and Torres Strait Islander LGBTQIA+ people in the next National Agreement on Closing the Gap, beyond the data development plan. Specific deliverables concerning LGBTQIA+ people may be determined through co-design with Aboriginal and Torres Strait Islander LGBTQIA+ communities and drawn from existing research.

FEDERAL AND STATE

Aboriginal and Torres Strait Islander LGBTQIA+ targets should be comprehensively included in all national and state Aboriginal and Torres Strait Islander Suicide Prevention Plans. This should be done through genuine co-design with Aboriginal and Torres Strait Islander LGBTQIA+ people and based on the existing evidence and best practice. We wish to acknowledge the recent *National Aboriginal and Torres Strait Islander Suicide Prevention Strategy 2025-2035* for including actions specifically concerning Aboriginal and Torres Strait Islander LGBTQIA+ people. We welcome this change as a step in the right direction, and hope that future iterations will continue to draw on the growing evidence base.

FEDERAL AND STATE

Aboriginal and Torres Strait Islander LGBTQIA+ young people should be considered in all policy and strategies related to Aboriginal and Torres Strait Islander or LGBTQIA+ people’s health and wellbeing. Content specific to Aboriginal and Torres Strait Islander LGBTQIA+ people should be developed through meaningful co-design to keep the policies and strategies relevant to their needs. We recognise that the recent the *National Action Plan for the Health and Wellbeing of LGBTIQ+ People 2025-2035* includes actions specifically concerning Aboriginal and Torres Strait Islander LGBTQIA+ people. We welcome this change as a step in the right direction but urge that future iterations should be supported by improved consultation with Aboriginal and Torres Strait Islander LGBTQIA+ communities across Australia and draw on the growing evidence base.

FEDERAL AND STATE

Develop and implement an action plan for Aboriginal and Torres Strait Islander LGBTQIA+ people’s wellbeing in partnership with relevant peak bodies. This action plan should be created through high quality co-design with Aboriginal and Torres Strait Islander LGBTQIA+ communities, representing the diversity of identities, experiences, cultures and geographies.

WHAT IS MEANINGFUL CO-DESIGN?

Done properly, co-design requires shared decision-making between those with lived experience, those with professional/technical expertise, and those making the policies, plans and strategies. It is a higher level of commitment than consultation or engagement. This [guide](#) can help you understand what does (and does not) count as co-design. Co-design for policies and strategies should not be focused on identifying the experiences, aspirations or issues faced by Aboriginal and Torres Strait Islander LGBTQIA+ people, which are documented in existing research. Rather, co-design facilitators should arrive equipped with a thorough understanding of the evidence base that provides the jumping off point for creating the policy or strategy together. Co-design facilitators should be transparent when ideas are unrealistic or out of scope, in order to set expectations and work together to develop realistic solutions.

FEDERAL AND STATE

Ensure that services receiving state and federal funding adhere to the equity and inclusion and Aboriginal and Torres Strait Islander workforce requirements in their funding agreements and are supported to do so. Funding rollout should be tied to reporting responsibilities and evidence of compliance. Governments should lead sector development and capacity building to address current gaps in the training, workforce and evidence required for Aboriginal and Torres Strait Islander LGBTQIA+ inclusion across all services. This could include governments initiating and funding the development and roll-out of Aboriginal and Torres Strait Islander LGBTQIA+ inclusion training or wellbeing interventions for Aboriginal and Torres Strait Islander LGBTQIA+ young people.

FEDERAL, STATE AND LOCAL

Build engaged and responsive relationships with advocacy groups. These should be maintained through regular contact. This may also include setting up your own Aboriginal and Torres Strait Islander and/or LGBTQIA+ advisory bodies. Strengthen engagement with Peak Bodies and Commissioners.

FEDERAL, STATE AND LOCAL

Specific health funding should be set aside for community-driven initiatives to address social and emotional wellbeing and suicide prevention among Aboriginal and Torres Strait Islander LGBTQIA+ young people. This includes Federal, State and Local Government funding for:

- Community-based local mental health support organisations that are managed and led by Aboriginal and Torres Strait Islander LGBTQIA+ people
- Community-led initiatives, for example through small grants
- Collaboration with Aboriginal and Torres Strait Islander LGBTQIA+ people and organisations (Hill et al., 2021)

Also, consider incorporating Aboriginal and Torres Strait Islander LGBTQIA+ inclusion into funding agreements with services.

FEDERAL, STATE AND LOCAL

Ensure the identification of Aboriginal and Torres Strait Islander LGBTQIA+ people in national, state and local data. Refer to the [Evidence](#) chapter of this report for further details.

FEDERAL, STATE AND LOCAL

Ensure that Aboriginal and Torres Strait Islander LGBTQIA+ people are employed at all levels of government and are supported to contribute to the actions outlined in this Roadmap chapter. Ensure that Aboriginal and Torres Strait Islander LGBTQIA+ staff are safe and supported in the workplace.

LOCAL

If your council has a Reconciliation Action Plan (RAP), consider how recognition and support for Aboriginal and Torres Strait Islander LGBTQIA+ people can be built into your council's commitment to reconciliation. Actions from the [Health and Wellbeing Services](#) chapter (e.g., transparency and truth-telling or undertaking training) may be relevant to your council.

LOCAL

Consider how recognition and support for Aboriginal and Torres Strait Islander LGBTQIA+ young people's wellbeing can be built into your local public health plan (also called a regional public health plan, municipal public health and wellbeing plan, etc.) Actions from the [Health and Wellbeing Services](#) chapter may be adapted to meet the objectives outlined by each plan. For example, the actions in this Roadmap could be applied to the [State Public Health Plan for Western Australia 2024-2029 Objectives and priorities](#) to explore how the objectives of 'Equity and Inclusion' and 'Improving Aboriginal and Torres Strait Islander Health and Wellbeing' can be implemented in a way that is intersectional. The priority to 'attract, develop and retain a public health workforce for the future' could include [workplace policy that ensures inclusion](#) and [undertaking training](#) so that diverse public health professionals, including Aboriginal and Torres Strait Islander LGBTQIA+ people, are supported and therefore retained. [Developing strengths-based resources](#) in partnership with services or community can 'improve health literacy by ensuring accessible and appropriate health information is effectively communicated' to diverse and intersectional communities including Aboriginal and Torres Strait Islander LGBTQIA+ people.



9. WIDER COMMUNITY

The wider community plays a role in shifting the broader Australian culture that impacts on Aboriginal and Torres Strait Islander LGBTQIA+ young people's wellbeing. They also play a part in holding governments accountable for delivering funding and policy that supports Aboriginal and Torres Strait Islander LGBTQIA+ people.

Who are the wider community?

- Everyone belongs to the wider community, but some people are only part of the wider community, whereas others might also be family and community, services, and/or government.
- People who only belong to the wider community are those who do not directly interact with Aboriginal and Torres Strait Islander LGBTQIA+ young people in their day-to-day life.

Wider community roles:

- Creating a supportive culture
- Advocating to government

ACTIONS FOR WIDER COMMUNITY

Foundation: Build relationships with Aboriginal and Torres Strait Islander LGBTQIA+ people. The foundation for good allyship is genuine relationships. In all of your actions, be led by Aboriginal and Torres Strait Islander LGBTQIA+ people. Learn when to listen, when to share, and how to receive feedback with humility.

Critical self-reflection. The identities we hold and the experiences we've had shape the way we see the world. For most of us, these are deeply embedded assumptions, values and norms that will take time and practice to unlearn. Interrogate how your positionality informs your feelings and assumptions about Aboriginal and Torres Strait Islander LGBTQIA+ young people and influences the relationships you have. Additionally, everyone experiences both privilege and disadvantage. Reflect on how your experiences differ from Aboriginal and Torres Strait Islander LGBTQIA+ young people and how they might experience challenges that you do not face. Consider how you could use your privilege to help Aboriginal and Torres Strait Islander LGBTQIA+ young people. Consider settler colonial privilege through an anti-colonial lens.

Education. Get educated about Aboriginal and Torres Strait Islander LGBTQIA+ people and the issues they face. Be curious and open-minded. If you don't know/understand something: ask, investigate and learn. Learn about what language and behaviour is and isn't ok. Use existing resources to educate yourself so that you're not over-burdening Aboriginal and Torres Strait Islander and LGBTQIA+ people. You can learn from many different sources, including formal training, resources, books, documentaries, movies, and TV shows. Be ready to educate others who don't know much about Aboriginal and Torres Strait Islander LGBTQIA+ people.

Be vocal and visible about your support of Aboriginal and Torres Strait Islander LGBTQIA+ people. Talk about the things you've done and learned with other people. Put up posters that show Aboriginal and Torres Strait Islander LGBTQIA+ people. Attend events or rallies organised by Aboriginal and Torres Strait Islander and/or LGBTQIA+ people.

HERE ARE SOME RESOURCES AND POSTERS YOU CAN USE

- [Walkern Katatdjin](#) resources
- [VACCHO x Jay Kulbardi](#) posters
- [Charlotte Allingham \(@coffinbirth\)](#) posters

You can find more resources on [HealthInfoNet](#) or [WellMob](#)

Learn more about how to be an upstander. Be prepared to advocate for Aboriginal and Torres Strait Islander LGBTQIA+ people and call out discriminatory behaviour when you see it. This is sometimes called ‘bystander intervention’. When you see unacceptable behaviour occurring, you can use one of the ‘5 Ds’: distract, delegate, document, delay, or take direct action. You can learn more about bystander intervention [here](#).

Normalise and celebrate diversity. Sometimes it’s good to be loud and proud, and other times it’s better not to make a big deal about it – be led by Aboriginal and Torres Strait Islander and LGBTQIA+ people about whether celebrating or normalising makes them feel most supported, remembering this could change depending on the time and place. Celebrate the achievements of Aboriginal and Torres Strait Islander LGBTQIA+ people. Get comfortable with diversity and help other people to feel like diversity is normal and ok. For example, you can easily normalise diversity by putting up posters that show Aboriginal and Torres Strait Islander LGBTQIA+ people.

Make a donation. Financially support local Aboriginal and Torres Strait Islander LGBTQIA+ community groups and events. You can make a donation, encourage others to make a donation, consider Aboriginal and Torres Strait Islander LGBTQIA+ groups as recipients of proceeds from events you’re hosting, or participate in fundraisers.

Volunteer your time. Give your time to causes that support Aboriginal and Torres Strait Islander LGBTQIA+ people. This could include volunteering for services and community groups, assisting with community events, or sharing fundraisers.

Figure out what can you do in your job. Identify ways you can support Aboriginal and Torres Strait Islander LGBTQIA+ people in your professional life. This will differ from role to role but could include: making sure your workplace is safe for your Aboriginal and Torres Strait Islander and LGBTQIA+ colleagues, making sure your work is welcoming for Aboriginal and Torres Strait Islander and LGBTQIA+ people as users/customers/contractors, finding ways your work can empower Aboriginal and Torres Strait Islander and LGBTQIA+ communities. If you work at an organisation that has a RAP, get involved and consider how recognition and support for diversity among Aboriginal and Torres Strait Islander people can be built into your workplace’s commitment to reconciliation.

If you own/run a business find opportunities to provide in-kind support for community-led initiatives. This could include providing a venue for events, providing donations of food or equipment, or providing consultation or support.

Advocate to government. Make it clear to your local, state and federal representatives that you expect them to implement funding and policy to support Aboriginal and Torres Strait Islander LGBTQIA+ people. This can include writing a letter to your local representative, signing petitions led by Aboriginal and Torres Strait Islander and LGBTQIA+ people, or attending protests led by Aboriginal and Torres Strait Islander and LGBTQIA+ people.

Be an educated voter. During local, state and federal elections make sure to find out which parties are promising to support Aboriginal and Torres Strait Islander and LGBTQIA+ people and which are proposing policies that would be harmful to Aboriginal and Torres Strait Islander LGBTQIA+ young people. Be led by what Aboriginal and Torres Strait Islander LGBTQIA+ people have to say, while remembering that all communities have diversity of opinion.

THIS TOOLKIT FROM WACOSS CAN HELP YOU ADVOCATE TO GOVERNMENT.

[Find the toolkit here](#)

THE TOOLKIT WILL HELP YOU TO:

1. Identify the level of government responsible for the issue you want to raise
2. Find the representative for your electorate
3. Decide how you’re going to communicate (i.e. what type of submission?)
4. Prepare a submission



10. EVIDENCE

Responses to support Aboriginal and Torres Strait Islander LGBTQIA+ young people need to be driven by reliable evidence, not assumptions about their needs. This is currently made difficult by the scarcity of data about Aboriginal and Torres Strait Islander LGBTQIA+ people of any age, although there has been a significant increase in research about Aboriginal and Torres Strait Islander LGBTQIA+ people in recent years.

For evidence about Aboriginal and Torres Strait Islander LGBTQIA+ young people to be reliable it needs to be supported by a rigorous process for Indigenous Data Sovereignty (IDS, Walter, 2018). IDS refers to:

"...the right of Indigenous peoples to exercise ownership over Indigenous data. Ownership of data can be expressed through the creation, collection, access, analysis, interpretation, management, dissemination and reuse of Indigenous data."

—(Kukutai & Taylor, 2016)

When done properly, IDS ensures that research is controlled by Aboriginal and Torres Strait Islander people at every point in its lifecycle. This additionally means that data is relevant to communities' needs, reflects Aboriginal and Torres Strait Islander worldviews, and is collected according to Aboriginal and Torres Strait Islander ways of working. In practice, this requires establishing strong Indigenous Data Governance processes. [Maia n nayri Wingara](#) and [Lowitja Institute](#) provide guidance on IDS for researchers, services and governments.

Those responsible for evidence should be directed by the data needs of Aboriginal and Torres Strait Islander LGBTQIA+ communities, which form part of the broader project of self-determination.

Who is responsible for providing evidence?

- Researchers (e.g., research projects resulting in papers, reports, guidelines and interventions)
- Services (e.g., client data, evaluation)
- Governments (e.g., Census and ABS data, government agency data, reporting against progress)

This chapter includes recommendations from other research projects.

RESEARCHER ACTIONS

- **Investigate SEWB, mental health and suicide among Aboriginal and Torres Strait Islander LGBTQIA+ young people.** Specifically:
 - » Investigate causal mechanisms for suicide and ill health among Aboriginal and Torres Strait Islander LGBTQIA+ young people.
 - » Conduct longitudinal studies to establish causal links between risk factors, distress, and suicide behaviour, as well as factors that promote SEWB.
 - » Investigate social, cultural and emotional wellbeing, including "connection to community, Culture and Country: how these connections are disrupted, restored, fostered, maintained, nurtured, and how these impact wellbeing" (Day et al., 2023).
 - » Investigate experiences accessing healthcare and health information, and care needs (Day et al., 2023).
 - » Study resilience and resistance to discrimination, colonial violence, trauma and grief (Day et al., 2023).
- **Co-design and evaluate tailored interventions to support the mental health and SEWB of Aboriginal and Torres Strait Islander LGBTQIA+ young people.**

- **Ensure intersectionality in research with Aboriginal and Torres Strait Islander and LGBTQIA+ populations.** All research with these populations should include a question to identify Aboriginal and Torres Strait Islander LGBTQIA+ people.
 - » The [ABS Standard](#) provides guidelines for asking about sex, sexuality and gender in research. Consult with Aboriginal and Torres Strait Islander LGBTQIA+ people to determine if these questions work for them.
- **Ensure that all research about Aboriginal and Torres Strait Islander LGBTQIA+ people is consistent with Aboriginal ways of working.**
 - » Research should be community-led, reciprocal, relational and grounded on Country. Safety and comfort for Aboriginal and Torres Strait Islander LGBTQIA+ participants should be the priority, fostered through meaningful relationships between researchers and community. All members of the research team should receive cultural awareness training as part of an ongoing learning journey. Aboriginal and Torres Strait Islander researchers should be empowered to lead research that aligns with Aboriginal ways of being and doing. Overall, a paradigm shift in research is required.
- **Ensure that all research about Aboriginal and Torres Strait Islander LGBTQIA+ people is consistent with best practice in Indigenous research and LGBTQIA+ research.**
 - » Aboriginal and Torres Strait Islander LGBTQIA+ young people should be engaged during the conceptualisation of research projects, not after funding and/or ethics approval has already been received. They should remain engaged through all stages of the research project.
 - » Ensure research projects have appropriate funding and time for community governance, Aboriginal and Torres Strait Islander LGBTQIA+ staff, Aboriginal and Torres Strait Islander ethical approval, and Indigenous Data Sovereignty.
 - » Promote best practice to institutions and funding bodies. Requirements for best practice research with Aboriginal and Torres Strait Islander and LGBTQIA+ people should be built into the processes of research institutions and research fundings bodies.
- **Translate research knowledge back to community in a way that is appropriate, accessible and meaningful.** Tie research practice into community-led action, for example through educating family and community.
- **Translate research findings to services and government, either directly or through peak bodies, so that research can contribute to systems change.**
- **Form and resource a national Aboriginal and Torres Strait Islander LGBTQIA+ research advisory group.** Currently advisory groups are formed based on the needs, capacity, and funding of individual research projects, limiting long-term oversight and placing additional burden on community members. One standing advisory group of respected Aboriginal and Torres Strait Islander LGBTQIA+ people could provide better governance and improve knowledge-sharing.
- **Partner with services to assist in evaluating the efficacy of actions from this Roadmap that have been implemented or piloting actions that are planned.**

SERVICE EVALUATION ACTIONS

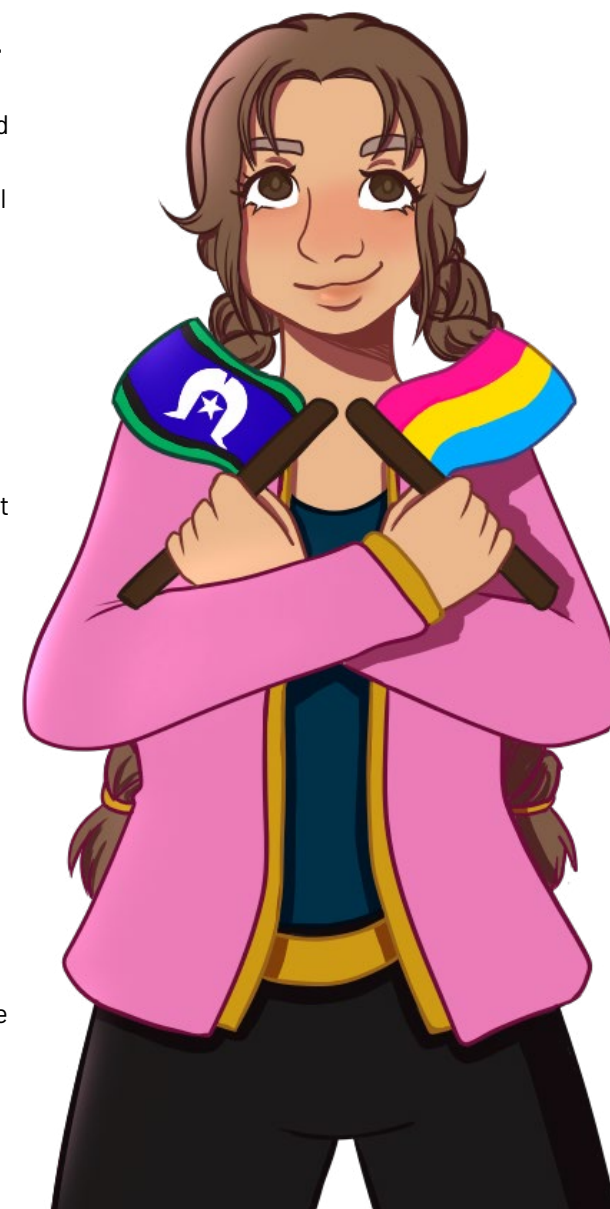
Services should consider the types of information they collect and whether it reflects the evidence needs of the communities they serve. **Consider collecting data about:**

- The number of Aboriginal and Torres Strait Islander LGBTQIA+ people using your service.
- The number of Aboriginal and Torres Strait Islander LGBTQIA+ staff employed.
- Whether all programs are safe and inclusive for Aboriginal and Torres Strait Islander LGBTQIA+ young people, as part of program evaluation.

This may require updates to your information systems, as discussed in the [Health and Wellbeing Services](#) chapter.

GOVERNMENT DATA COLLECTION ACTIONS

- **Accurately collecting information about LGBTQIA+ people in the Census and identifying the number of Aboriginal and Torres Strait Islander LGBTQIA+ people in Australia.** This should include identification of intersex people, including intersex Aboriginal and Torres Strait Islander people.
- **Australian Bureau of Statistics should include data collection of Aboriginal and Torres Strait Islander LGBTQIA+ individuals** in all National, State and Territory population, health and social statistics, through the use of consistent and common definitions and increasing the use of data linkage with different government and non-government agencies (Hill et al., 2021).
- **Federal, State and Local Governments to collect and share data on proportion of Aboriginal and Torres Strait Islander LGBTQIA+ people who are represented as victims of crime, violence and in homelessness statistics (Hill et al., 2021).**
- Federal, State and Local Government to **develop tender documents** that require health, mental health, ACCHO and not for profit community social support organisations applying for funding to include key performance indicators and evaluations that reflect how they have met the needs of Aboriginal and Torres Strait Islander people, including those who identify as LGBTQIA+ (Hill et al., 2021).
- **Federal and State Government research grant bodies (including NHMRC, ARC and Healthway) allocate appropriate funding and resources through research and community project grants** to enable researchers to properly resource community engagement when conducting research to ensure that the diverse views, experiences and perspectives of Aboriginal and Torres Strait Islander LGBTQIA+ people, including those who live in rural and remote areas, are captured and reflected in research data and findings (Hill et al., 2021).



II.

SUMMARY
& CALL TO
ACTION

Our communities have made it clear that there is a need to better support Aboriginal and Torres Strait Islander LGBTQIA+ young people. This Roadmap outlines a possible path to ensuring that Aboriginal and Torres Strait Islander LGBTQIA+ young people are safe, healthy and thriving: through empowering individuals, families, communities, and services. The model used in the Roadmap is underpinned by the Aboriginal and Torres Strait Islander principles of caring and responsibility for kin. A significant portion of the Roadmap has been informed by the strength and care practices of Aboriginal and Torres Strait Islander LGBTQIA+ people themselves, who have been working to empower each other and their communities for generations. In constructing this Roadmap, we acknowledge that we can all support Aboriginal and Torres Strait Islander LGBTQIA+ young people in the many roles we hold throughout our lives.

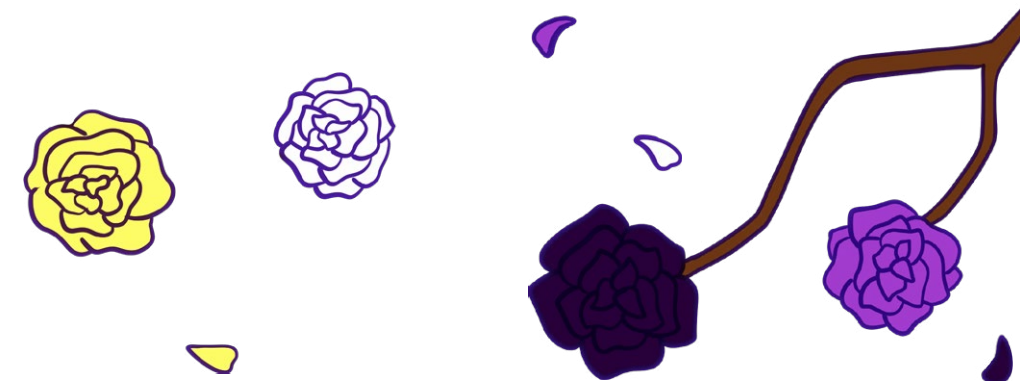
By every one of us engaging in the actions in this Roadmap, we can work together to **empower individuals, families, communities, services, and governments to ensure that Aboriginal and Torres Strait Islander LGBTQIA+ young people are safe, healthy, and thriving.**



References

- Amos, N., Lim, G., Buckingham, P., Lin, A., Liddel-Hunt, S., Mooney-Somers, J., Bourne, A., & on behalf of the Writing Themselves In 4, P. L., SWASH, Trans Pathways, Walkern Katatdjinn and Pride and Pandemic Teams. (2023). *Rainbow Realities: In-depth analyses of large-scale LGBTQIA+ health and wellbeing data in Australia*.
- Australian Institute of Health and Welfare. (2024, 01/08/2024 v12.0). *Suicide among First Nations people* Retrieved 28 Aug 2024 from <https://www.aihw.gov.au/suicide-self-harm-monitoring/data/populations-age-groups/suicide-indigenous-australians>
- Australian Institute of Health and Welfare, A. G. (2022). *Protective and risk factors for suicide among Indigenous Australians*. <https://www.indigenoumhspsc.gov.au/getattachment/2a25cdd8-d8a7-4373-938f-2aa51a0b4128/aihw-2022-protective-and-risk-factors.pdf?v=1260>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101. <https://doi.org/10.1191/1478088706qp063oa>
- Crenshaw, K. (1989) Demarginalizing the intersection of race and sex: A black feminist critique of antidiscrimination doctrine, feminist theory, and antiracist politics. *The University of Chicago Legal Forum* 140: 139-167.
- Commonwealth of Australia. (1997). *Bringing Them Home: Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families*. Human Rights and Equal Opportunity Commission.
- Day, M., Carlson, B., Bonson, D., & Farrelly, T. (2023). *Aboriginal and Torres Strait Islander LGBTQIASB+ people and mental health and wellbeing* (Catalogue number IMH 15). https://gecko.healthinfor.net.org.au/uploads/resources/46689_46689.pdf
- Gee, G., Dudgeon, P., Schultz, C., Hart, A., & Kelly, K. (2014). Aboriginal and Torres Strait Islander social and emotional wellbeing. In P. Dudgeon, H. Milroy, & R. Walker (Eds.), *Working together: Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principles and Practice* (2 ed., pp. 55-68). Telethon Kids Institute, Kulunga Aboriginal and Torres Strait Islander Research Development Unit, Department of the Prime Minister and Cabinet.
- Hill, B., Uink, B., Dodd, J., Bonson, D., Eades, A.-M., & Bennett, S. (2021). *Breaking the Silence: Insights from WA Services Working with Aboriginal and Torres Strait Islander/LGBTIQ+ People, Organisations Summary Report 2021*.
- Hodge, D. e. (2015). *Colouring the Rainbow: Blak Queer and Trans Perspectives* (D. Hodge, Ed.). Wakefield Press.
- Kukutai, T., & Taylor, J. (2016). *Indigenous Data Sovereignty : Toward an agenda* (1 ed., Vol. no. 38.). ANU Press. <https://doi.org/10.22459/CAEPR38.11.2016>
- Liddel-Hunt, S., Uink, B., Daglas, K., Hill, J. H. L., Hayward, L., Stretton, N., Perry, Y., Hill, B., & Lin, A. (2023). *Walkern Katatdjinn (Rainbow Knowledge) Phase 2 National Survey Community Report*.

- SNAICC. (n.d.). *Aboriginal and Torres Strait Islander Child Placement Principle*. Retrieved 28 Aug 2024 from <https://www.snaicc.org.au/our-work/child-and-family-wellbeing/child-placement-principle/>
- SNAICC, Liddle, C., Gray, P., Burton, J., Taylor, M., Young, G., Kumar, R., Turner, L., Hutchins, L., French, B., Jones, L. A., Holt, R., Marlais, R., Armstrong, E., Harris, L., Hill, D., Cronin, N., LaSalle, D., Corrales, T., & Schlesinger, N. (2023). *Family Matters Report 2023*. <https://www.snaicc.org.au/wp-content/uploads/2024/07/20240731-Family-Matters-Report-2023.pdf>
- Uink, B., Dodd, J., Bennett, S., Bonson, D., Eades, A.-M., & Hill, B. (2023). Confidence, practices and training needs of people working with Aboriginal and Torres Strait Islander LGBTQ+ clients. *Culture, Health & Sexuality*, 25(2), 206-222. <https://doi.org/10.1080/13691058.2022.2031298>
- Uink, B., Liddel-Hunt, S., Wilson, M., Hill, B., Waples-Crowe, P., Davis, K., Clinch-Moore, S., Cameron, D., & Lin, A. (2023). *Needs Assessment Report: Training health providers to work with Aboriginal and Torres Strait Islander LGBTQIA+ young people* (Volume 1).
- Walter, M. (2018). The voice of indigenous data: Beyond the markers of disadvantage. *Griffith REVIEW*(60), 256-263. <https://search.informit.org/doi/10.3316/ielapa.586241932732209>
- Wilson, M., Liddel-Hunt, S., Lin, A., Hill, B., Waples-Crowe, P., Davis, K., Clinch-Moore, S., Cameron, D., & Uink, B. (2023). *Needs Assessment Report: Training health providers to work with Aboriginal and Torres Strait Islander LGBTQIA+ young people* (Volume 2).
- Wenger 1998 *Communities of practice : learning, meaning, and identity*. Cambridge University Press.
- Worrell, S., Waling, A., Anderson, J., Fairchild, J., Lyons, A., Pepping, C., & Bourne, A. (2021). *Lean on Me: Exploring suicide prevention and mental health-related peer support in Melbourne's LGBTQ communities*. Australian Research Centre in Sex, Health and Society, La Trobe University. <https://doi.org/10.26181/60AC728CDB7EF>
- Youth Pride Network, Glance, C., Henderson-Watkins, C., Bruce-Truglio, S., Maximo, A., & Sorenson, H. (2023). *State of Play Report II: LGBTQIA+ Young People's Experiences of High School*.
- Youth Pride Network, Clements, C. (2025) *State of Play Report III: LGBTQIA+ Young People's Experiences of Healthcare in Western Australia*.



Further reading

Recommendations for supporting the mental health and wellbeing of Aboriginal and Torres Strait Islander LGBTQIA+ people:

Amos, N., Lim, G., Buckingham, P., Lin, A., Liddel-Hunt, S., Mooney-Somers, J., Bourne, A., & on behalf of the Writing Themselves In 4, Private Lives 3., SWASH, Trans Pathways, Walkern Katatdjín and Pride and Pandemic Teams. (2023). *Rainbow Realities: In-depth analyses of large-scale LGBTQIA+ health and wellbeing data in Australia*.

Day, M., Carlson, B., Bonson, D., & Farrelly, T. (2023). *Aboriginal and Torres Strait Islander LGBTQIASB+ people and mental health and wellbeing* (Catalogue number IMH 15). https://gecko.healthinfor.net.org.au/uploads/resources/46689_46689.pdf

Dudgeon, P., Bonson, D., Cox, A., Georgatos, G., & Rouhani, L. (2015). *Sexuality and Gender Diverse Populations Roundtable Report (Lesbian, Gay, Bisexual, Transsexual, Queer & Intersex—LGBTQI)*.

Hill, B., Uink, B., Dodd, J., Bonson, D., Eades, A.-M., & Bennett, S. (2021). *Breaking the Silence: Insights into the Lived Experiences of WA Aboriginal and Torres Strait Islander/LGBTIQ+ People, Community Summary Report 2021*.

Hill, B., Uink, B., Dodd, J., Bonson, D., Eades, A.-M., & Bennett, S. (2021). *Breaking the Silence: Insights from WA Services Working with Aboriginal and Torres Strait Islander/LGBTIQ+ People, Organisations Summary Report 2021*.

Sullivan, C., Spurway, K., Briskman, L., Leha, J., Trewlynn, W., & Soldatic, K. (2021). *Dalarinji: 'Your Story' – Final Report to Community*. <https://researchdirect.westernsydney.edu.au/islandora/object/uws:61700/datastream/PDF/view>

Think Change Resolve. (2023). *National consultation on health care for LGBTQIA+ communities*. https://www.thinkchangeresolve.com/_files/ugd/0245e3_e4f5c6011c0a43cead4d22958558b9a4.pdf

Lived experience and history:

Dunn/Holland, W., Fletcher, M., Hodge, D., Lee, G., Milera, E. J., Saunders, R., & Wafer, J. (1994). *Peopling the Empty Mirror: The Prospects for Lesbian and Gay Aboriginal and Torres Strait Islander History*. In R. Aldritch (Ed.), *Gay Perspectives II: More Essays in Australian Gay Culture*. Department of Economic History & The Australian Centre for Gay and Lesbian Research, University of Sydney. <http://queerarchives.org.au/app/uploads/2020/10/Peopling-the-Empty-Mirror.pdf>

Hodge, D. e. (2015). *Colouring the Rainbow: Blak Queer and Trans Perspectives* (D. Hodge, Ed.). Wakefield Press.

O'Sullivan, S. (2021). The Colonial Project of Gender (and Everything Else). *Genealogy*, 5(3), 67. <https://www.mdpi.com/2313-5778/5/3/67>



Acronyms

ACCHO	Aboriginal and Torres Strait Islander Community Controlled Health Organisation
ACCO	Aboriginal and Torres Strait Islander Community Controlled Organisation
CQI	Continuous Quality Improvement
IDS	Aboriginal and Torres Strait Islander Community Controlled Health Organisation
LGBTQIA+	Aboriginal and Torres Strait Islander Community Controlled Organisation
RACGP	Continuous Quality Improvement
RAP	Reconciliation Action Plan
SEWB	Social and Emotional Wellbeing

Some words used in this Roadmap

Asexual	People who do not experience sexual attraction to others or desire sexual activity. Asexual people may have romantic relationships with other people, or they may also be ‘aromantic’ and not be interested in romantic relationships (Black Rainbow, 2021).
Bisexual / Bi+	A person who is emotionally, romantically and/or sexually attracted to two or more genders, though not necessarily at the same time, in the same way, or to the same degree (Black Rainbow, 2021). Not all people attracted to multiple genders will use the term ‘bisexual’ – they may prefer terms such as bi+, ‘queer’, ‘pansexual’, ‘multi-gender attracted’ or ‘omnisexual’.
Brotherboy	An Aboriginal or Torres Strait Islander gender diverse person who has a masculine spirit and takes on men’s roles within the community. Brotherboys have a strong sense of their cultural identity. Brotherboys may or may not also identify as transgender, and not all Aboriginal and Torres Strait Islander trans men identify as Brotherboys. May also be spelled Brothaboy. How the word Brotherboy is used can differ between locations, countries, and nations. The term Brotherboy may not specifically define who someone is, but instead have an affiliation which is fluid enough to complement their identity. Note: More generally in Aboriginal and Torres Strait Islander communities, the term brotherboy may be used a term of endearment for men, with no reference to gender diversity (Black Rainbow, 2021; Transhub, 2020).

Cisgender	A person whose gender matches the sex they were assigned at birth (Australian Institute of Family Studies [AIFS], 2022; Transhub, 2020).
Cisnormativity	People who do not experience sexual attraction to others or desire sexual activity. Asexual people may have romantic relationships with other people, or they may also be ‘aromantic’ and not be interested in romantic relationships (Black Rainbow, 2021).
Co-design	Meaningful engagement of end-users (e.g., health and wellbeing service providers and consumers) in research design. During this process, end-users reflect on experiences with a phenomenon and work together to identify improvement priorities, and devise, and eventually implement, change (Donetto et al., 2015; Slattery et al., 2020).
Gay	A person who is emotionally, romantically and/or sexually attracted to people of the same gender. Most often used to describe same-gender attracted men but also commonly used by same-gender attracted women and non-binary people. Not all same- gender attracted people will use the term gay – they may prefer to use other language. Note: may also be used by LGBTQA+ people in casual conversation as synonymous with LGBTQA+ or an umbrella term for sexual diversity. This usage is not appropriate in formal/ professional settings (Black Rainbow, 2021).
Gender/gender identity	A person’s sense of whether they are a man, woman, non-binary, agender, genderqueer, genderfluid, or a combination of one or more of these definitions (AIFS, 2022).
Gender-affirming care	Service provision that supports gender-diverse people to be comfortable, safe, healthy, and happy, promoting exploration of gender without expectations of gender identity developmental trajectories (Chen et al., 2016). This approach prioritises flexible, patient-centred, holistic approaches to not only medical and mental health care, but also broader services - such as social or legal support services -that promote wellbeing (Healthline, 2022).
Hetero-normativity	The societal view that heterosexual relationships are the only natural and normal expression of sexual orientation and relationships (ACON, 2025).
Heterosexual	A person who is exclusively attracted (sexually and romantically) to people of the opposite gender (AIFS, 2022), also known as ‘straight’.
Inclusive practice	Inclusive practice seeks to provide equitable care, necessitating recognition and knowledge of diversity, to deliver equal outcomes for all service users (Richardson, 2015; Taket et al., 2009).

Intergenerational trauma	A psychological term which asserts that trauma can be transferred between generations. After a first generation of survivors’ experiences trauma, they may transfer their trauma to their children and further generations of offspring via complex post-traumatic stress disorder mechanisms (Yehuda & Lehrner, 2018). Also known as ‘transgenerational trauma’.
Intersex	People born with sex characteristics that do not fit medical or social norms for female or male bodies (Intersex Human Rights Australia, 2021). Intersex traits are natural manifestations of human bodily diversity. There are many different intersex traits. Not all intersex traits are visible in infancy; intersex variations might become apparent prenatally, at birth, at puberty, in adulthood or when trying to conceive (Intersex Human Rights Australia, 2021).
Lesbian	A woman who is emotionally, romantically and/or sexually attracted to other women (Black Rainbow, 2021). May also be used by non-binary people. Not all same-gender attracted women will use the term lesbian – they may prefer to use other language.
Non-binary	A person who is not exclusively a man or woman. Also used as an umbrella term for any number of gender identities that sit within, outside of, across or between the spectrum of the male and female binary (AIFS, 2022). A non-binary person might identify as genderfluid, trans masculine, trans feminine, agender, bigender, etc. or they may just identify as non-binary (Transhub, 2020).
Pansexual	A person who is (usually romantically and sexually) attracted to people regardless of gender, and/or experiences attraction for all gender identities and expressions (AIFS, 2022).
Queer	Queer may be used as an umbrella term to encompass many people within the LGBTQA+ community, or by an individual to describe their sexuality and/or gender where other terms (e.g., gay, bisexual, transgender) are considered too limited (Australian Institute of Family Studies, 2022; Ratcliffe & Zbukvic, 2021).
Questioning	A person who is questioning or unsure of their sexuality and/or gender (Ratcliffe & Zbukvic, 2021). People who are questioning may or may not choose to identify as part of the LGBTQA+ community.
Sex	A biological concept that relates to a person's physical characteristics including reproductive anatomy, hormones, and chromosomes (AIFS, 2022). These features may align with male or female or a person may have intersex variations. Following a visual inspection at birth, sex markers on a person's birth certificate are determined by a medical professional (AIFS, 2022).
Sexual orientation / sexuality	A person's identity in relation to the gender or genders to which they are sexually attracted to (AIFS, 2022). This can include (but is not limited to) heterosexual, lesbian, gay, bisexual, pansexual, asexual. Sexual orientation may be fluid over time.

Sistergirl / Sistagirl	An Aboriginal or Torres Strait Islander gender diverse person who has a feminine spirit and takes on women’s roles within the community. Sistergirls have a strong sense of their cultural identity. Sistergirls may or may not also identify as transgender, and not all Aboriginal and Torres Strait Islander trans women identify as Sistergirls (Black Rainbow, 2021). May also be spelled Sistagirl. How the word Sistergirl is used can differ between locations, countries, and nations. The term Sistergirl may not specifically define who someone is, but instead have an affiliation which is fluid enough to complement their identity. Note: More generally in Aboriginal and Torres Strait Islander communities, the term Sistergirl may be used a term of endearment for women, with no reference to gender diversity (Black Rainbow, 2021).
Standpoint	A standpoint is the social position someone sees the world from. Feminist standpoint theory argues that the way that everyone knows the world is influenced by their beliefs, social status, and cultural history. Indigenous standpoint theory adds that the way we know the world is also shaped by our relationship to Country, ancestors, and other living things (Moreton-Robinson, 2013).
Strengths-based	Strengths-based approaches seek to move away from the traditional problem-based paradigm and offer a different language and a set of solutions to overcoming an issue. A strengths-based approach is not a set of policies or programs, rather it is a conceptual framework for approaching development and intervention. In an Aboriginal health context, this could include focusing on assets, resilience, empowerment, protective factors, determinants of good health, holistic and culturally appropriate understandings of health, and decolonisation. (Fogarty et al., 2018)
Trans / Transgender / Gender Diverse	People whose gender differs from the sex they were presumed at birth (Transhub, 2020). Not all gender diverse people use the term trans – they may prefer to use different language. People from societies around the world with more than two traditional genders often use culturally specific language e.g., Sistergirl, Brotherboy, two-spirit, fa’afafine, hijra, bissu (Black Rainbow, 2021).
Trauma-informed care	An approach to health care that acknowledges the importance of holistically understanding a patient’s life situation (past and present) to provide effective service oriented towards healing (Centre for Health Care Strategies, 2021).
Truth-telling	Truth-telling enables a fuller and more accurate account of history to recognise the strength and contribution of Aboriginal and Torres Strait Islander peoples and bring to light unrecognised histories of injustice and voices that have been silenced. Truth-telling covers a range of activities that engage with a fuller account of Australia’s history and its ongoing impact on Aboriginal and Torres Strait Islander peoples. It can cover processes involving official apologies, truth and reconciliation or other inquiries and commissions, memorials, ceremonies and public art (Reconciliation Australia, 2024).

Hyperlinks and resources

Chapter 2. Context

Call to Action from Aboriginal and Torres Strait Islander LGBTQIA+ scholars and advocates, article in The Conversation: <https://theconversation.com/aboriginal-and-torres-strait-islander-people-must-be-at-the-centre-not-the-margins-of-lgbtqia-plans-and-policies-209221>

Chapter 3. Design

The Walkern KatatdjIn Project: <http://www.rainbowknowledge.org/>

CAMP (@camp4mob), Instagram page: <https://www.instagram.com/camp4mob>

Chapter 5. Family and Community

Walkern KatatdjIn resource page: <https://www.rainbowknowledge.org/resources>

First Nations and Queer Yarning Panels, Thorne Harbour Health: <https://thorneharbour.org/services/aboriginal-and-torres-strait-islander-health/>

History of First Peoples Entries in the Sydney Mardi Gras Parade: <https://www.tiki-toki.com/timeline/entry/590976/History-of-First-Peoples-entries-in-the-Sydney-Mardi-Gras-Parade/>

VACCA LGBTIQ+ Resources: <https://www.vacca.org/page/resources/LGBTIQ+resources/>

VACCA Pride Month resources: <https://www.youtube.com/playlist?list=PLobdR30VW-N6njgwfx95qYBSXKMhutPnV>

VACCO Rainbow Mob resources: <https://www.vaccho.org.au/rainbowmob/>

Transblack TV show, ABC iview: <https://iview.abc.net.au/show/transblack>

Rob's Real Life Story, Youtube video: <https://www.youtube.com/watch?v=KVHBm-5Qr7g>

Simone and Rosalina's Story, Youtube video: <https://www.youtube.com/watch?v=01P9gmiX0ss>

Wellmob Gender Identity resources: <https://wellmob.org.au/e-health-topics/our-mob/gender-identity/>

Trans Mob webpage: <https://www.transhub.org.au/trans-mob>

Aboriginal and Torres Strait Islander LGBTIQASGBB+ archive and portal: <https://indigblackgold.wordpress.com/>

Young Deadly Free sexual health resources: <https://youngdeadlyfree.org.au/resources-3/>

Yarning about sexuality and gender with young people resource, Walkern KatatdjIn: https://www.rainbowknowledge.org/_files/ugd/7ca884_25f8d1fc56144bba863cdb527b5f1f22.pdf

Dealing with hateful comments on social media, eSafety Commissioner: <https://www.esafety.gov.au/lgbtiq/learning-lounge/building-online-resilience/managing-impacts-online-hate>

Hosting LGBTQ+ events safely, ACON: https://www.acon.org.au/wp-content/uploads/2023/10/23115-Guidance-for-hosting-LGBTQ-events-safely-for-Local-Councils_v4a-22.pdf

Chapter 6. Health and Wellbeing Services

Blak Pride WA, Facebook page: <https://www.facebook.com/profile.php?id=61568274870771>

CAMP (@camp4mob), Instagram page: <https://www.instagram.com/camp4mob>

Kimberley Blak Pride, Facebook page: <https://www.facebook.com/kimberleyblakpride/>

Black Rainbow, Facebook page: <https://www.facebook.com/BlackRainbowAustralia/>

BlaQ Aboriginal Corporation page: <https://blaq.org.au/>

Rainbow Mob, Facebook: <https://www.facebook.com/actindigenouslgbtqi/>

Koorie Pride Victoria, Facebook page: <https://www.facebook.com/kooriepridevictoria/>

Walkern KatatdjIn mental health and SEWB resources: <https://www.rainbowknowledge.org/resources/>

Jay Kulbardi x VACCHO Rainbow Mob posters: <https://www.vaccho.org.au/rainbowmob/>

Charlotte Allingham x Zoe Belle Gender Collective, Thorne Harbour Health & Elizabeth Morgan House Celebrate LGBTI+ Blakfullas posters: <https://zbgc.org.au/resources/zbgc-resources/posters/>

Young Deadly Free sexual health resources: <https://youngdeadlyfree.org.au/resources-3/>

Butterfly Foundation EveryBODY is deadly body image poster: https://butterfly.org.au/wp-content/uploads/2021/03/Butterfly_everyBODY_poster_white-2.pdf

Healthinonet sexuality resources and publications: <https://healthinonet.ecu.edu.au/learn/health-topics/sexual-health/sexuality/>

WellMob gender identity resources: <https://wellmob.org.au/e-health-topics/our-mob/gender-identity/>

RACGP Accreditation Standard 2: <https://www.racgp.org.au/running-a-practice/practice-standards/standards-5th-edition/standards-for-general-practices-5th-ed/core-standards/core-standard-2/criterion-c2-1-respectful-and-culturally-appropriate>

Reconciliation Actions Plans, Reconciliation Australia: <https://www.reconciliation.org.au/reconciliation-action-plans/>

RACGP Standards for recording patient information about sex and gender: <https://www.racgp.org.au/FSDEDEV/media/documents/Running%20a%20practice/Practice%20standards/5th%20edition/Collecting-and-recording-information-about-patient-sex-gender.pdf>

Transhub trans affirming bathroom guide: <https://www.transhub.org.au/allies/bathrooms>

Diversity Council Australia inclusive bathrooms guide: <https://www.dca.org.au/resources/di-planning/inclusive-bathrooms>

Interbuild inc-loo-sive bathrooms guide: https://static1.squarespace.com/static/60c7edcb37b54354d320486b/t/60d2b335192cd04ad00f5277/1624421175890/interbuild_fact_sheet+%281%29.pdf

Core competencies for working with Aboriginal and Torres Strait Islander LGBTQIA+ young people, Walkern Katatdjini: https://www.rainbowknowledge.org/_files/ugd/7ca884_b6b16c2f70534e64ac11f5d2afde1557.pdf

Training health providers to work with Aboriginal and Torres Strait Islander LGBTQIA+ young people, Walkern Katatdjini: <https://www.rainbowknowledge.org/training-health-providers-phase-1>

Taking Control of Our Data, Lowitja Institute Indigenous Data Sovereignty discussion paper: <https://www.lowitja.org.au/wp-content/uploads/2024/01/Taking-Control-of-Our-Data-Discussion-Paper.pdf>

National Framework for Continuous Quality Improvement in Primary Health Care for Aboriginal and Torres Strait Islander People 2018–2023: <https://www.naccho.org.au/app/uploads/2022/03/NACCHO-CQI-Framework-2019-1.pdf>

Advocacy Toolkit, WACOSS: <https://www.wacoss.org.au/wp-content/uploads/2024/02/advocacy-toolkit-2023.pdf>

Chapter 7. Other Services and Systems

Bringing Them Home: Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from Their Families: https://humanrights.gov.au/sites/default/files/content/pdf/social_justice/bringing_them_home_report.pdf

The Royal Commission into Aboriginal and Torres Strait Islander Deaths in Custody: <https://www.austlii.edu.au/au/other/IndigLRes/rciadic/>

The Royal Commission into Aged Care: <https://www.royalcommission.gov.au/aged-care/final-report>

The Royal Commission into Child Sexual Abuse: <https://www.royalcommission.gov.au/child-abuse/final-report>

The Aboriginal and Torres Strait Islander Child Placement Principle: <https://www.snaicc.org.au/our-work/child-and-family-wellbeing/child-placement-principle/>

Chapter 8. Government

What is co-design? Beyond Sticky Notes: <https://www.beyondstickynotes.com/what-is-codesign>

State Public Health Plan for Western Australia 2024–2029 Objectives and priorities: <https://www.health.wa.gov.au/~media/Corp/Documents/About-us/Public-Health-Act/DRAFT-State-Public-Health-Plan-Priorities.pdf>

Chapter 9. Wider Community

5 Ds of bystander intervention, American Psychological Association: <https://www.apa.org/pi/health-equity/bystander-intervention>

Bystander invention basics, Right To Be: <https://righttobe.org/guides/bystander-intervention-training/>

Walkern Katatdjini mental health and SEWB resources: <https://www.rainbowknowledge.org/resources/>

Jay Kulbardi x VACCHO Rainbow Mob posters: <https://www.vaccho.org.au/rainbowmob/>

Charlotte Allingham x Zoe Belle Gender Collective, Thorne Harbour Health & Elizabeth Morgan House Celebrate LGBTI+ Blakfullas posters: <https://zbgc.org.au/resources/zbhc-resources/posters/>

Healthinfonet sexuality resources and publications: <https://healthinfonet.ecu.edu.au/learn/health-topics/sexual-health/sexuality/>

WellMob gender identity resources: <https://wellmob.org.au/e-health-topics/our-mob/gender-identity/>

Advocacy Toolkit, WACOSS: <https://www.wacoss.org.au/wp-content/uploads/2024/02/advocacy-toolkit-2023.pdf>

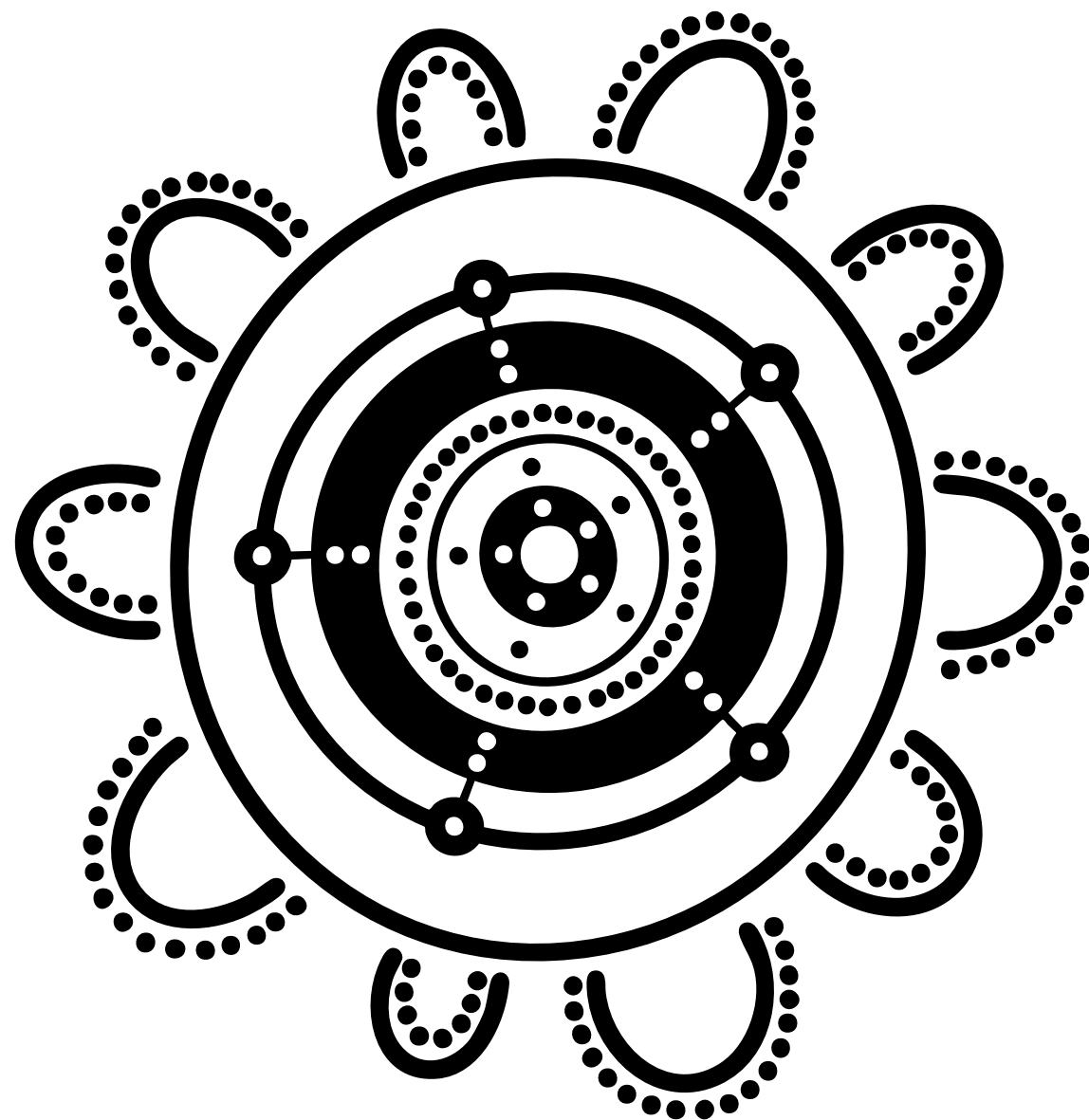
Chapter 10. Evidence

Maia nayri Wingara: <https://www.maiamnayriwingara.org/>

Taking Control of Our Data, Lowitja Institute Indigenous Data Sovereignty discussion paper: <https://www.lowitja.org.au/wp-content/uploads/2024/01/Taking-Control-of-Our-Data-Discussion-Paper.pdf>

ABS Standard for asking about sex, sexuality and gender in research: <https://www.abs.gov.au/statistics/standards/standard-sex-gender-variations-sex-characteristics-and-sexual-orientation-variables/latest-release>





THE ARTWORK STORY

At the centre of the artwork is the **ABORIGINAL AND TORRES STRAIT ISLANDER LGBTQIA+ YOUNG PERSON**.

The five rings around the young person represent the **KEY GROUPS** that influence an Aboriginal and Torres Strait Islander LGBTQIA+ young person ensuring that they are safe, healthy and thriving. Beginning from most direct to indirect, these key groups consist of **Family & Community, Health & Wellbeing Services, Other Services & Systems, Government**, and the **Wider Community**. The artwork also illustrates the interconnectedness between each group and the influence they have on each other. **Evidence** is represented by the five thick rings placed around the outer circle and the small dots that follow into the centre. It cuts across each key group, reflecting the role that it plays in informing actions.

The sixth, most outer ring holds the ten **PRINCIPLES** which enables empowering (depicted by ten large arches) and effective approaches (depicted by the many small dots surrounding the arches) for supporting Aboriginal and Torres Strait Islander LGBTQIA+ young people.

The above artwork and the graphic design of this Report was carried out by Kelli Savietto. She is proudly of Nyikina and Yawuru heritage from the Kimberley of Western Australia. kellisavietto.com



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