SUBMISSION ON A NEW COMMONWEALTH INDIVIDUAL DISABILITY ADVOCACY PROGRAM

About the contributors to this submission

Inclusive Rainbow Voices

Inclusive Rainbow Voices (IRV) is a community led, intersectional Disabled People's Organisation, by and for LGBTIQA+ people with disability. It is the only national advocacy organisation dedicated to representing LGBTIQA+ people with disability.

IRV was founded in 2021 by a group of LGBTIQA+ people with disability to address the lack of representation and understanding of LGBTIQA+ people with disability. Its vision is equity and justice for all LGBTIQA+ people with disability.

IRV's work focuses on advocacy, peer support, education, research and movement building to achieve its goals.

IRV provides a platform for lived experience leadership, supporting community members to shape decisions that affect their lives. The organisation delivers training, resources, and expert advice to help services, governments and institutions understand and address the intersectional needs and challenges of LGBTIQA+ people with disability.

Through partnerships with LGBTIQ+ Health Australia (LHA), community organisations, and government, IRV promotes culturally responsive approaches to human rights, health and social inclusion, ensuring that all LGBTIQA+ people with disability - regardless of background - can live with safety, dignity, and pride.

LGBTIQ+ Health Australia

LHA is the national peak health organisation for LGBTIQ+ people. LHA works to improve health outcomes through research, advocacy, and capacity building.

Its work includes national advocacy and policy development aimed at addressing systemic inequities and promoting health equity. LHA supports LGBTIQ+ organisations and services to build capacity and deliver inclusive, community-led programs that respond to the specific needs of LGBTIQ+ populations. The organisation also provides training and resources to help health professionals deliver culturally safe and competent care for LGBTIQ+ people.

LHA's research and evidence-based initiatives inform best practices and guide effective policy development, ensuring that decision-making is grounded in robust data and lived experience. Through partnerships with community organisations, government, and other stakeholders, LHA works to advance the health and wellbeing of LGBTIQ+ people across Australia.

Introduction

Inclusive Rainbow Voices (IRV) and LGBTIQ+ Health Australia (LHA) welcome the opportunity to provide this joint submission to the consultation on a new Commonwealth individual disability advocacy program.

Overview and position

IRV and LHA strongly support the Australian Government's commitment to establishing a new Commonwealth individual disability advocacy program in response to the Disability Royal Commission. We welcome the proposed move toward longer-term funding, a stronger focus on people most at risk of harm, and explicit recognition of intersectional disadvantage.

Individual disability advocacy plays a critical safeguarding role. Many LGBTIQA+ people with disability experience layered exclusion across health, disability, housing, education, justice and social service systems. Advocacy is often the mechanism through which people can assert their rights, access appropriate services, and be safe from harm.

IRV and LHA support the broad direction of the proposed program. However, we consider there are important opportunities to strengthen the design, implementation and evaluation of the program to ensure it delivers equitable outcomes for LGBTIQA+ people with disability and meaningfully supports LGBTIQA+ community-controlled organisations and specialist Disabled Persons Organisations as partners within the advocacy ecosystem.

Alignment with the National Action Plan for the Health and Wellbeing of LGBTIQA+ People 2025–2035

The proposed program aligns well with the intent of the National Action Plan for the Health and Wellbeing of LGBTIQA+ People 2025–2035, particularly its emphasis on accessible, inclusive services, workforce capability, leadership and accountability, and improved data and evidence.

IRV and LHA encourage the department to explicitly reference the National Action Plan as a complementary policy framework, particularly when considering intersectionality, culturally safe practice, and partnerships with community-controlled organisations. Doing so would strengthen coherence across national reforms and reinforce the government's commitment to addressing entrenched health and wellbeing inequities experienced by LGBTIQA+ people with disability.

Intersectionality and priority populations

IRV and LHA strongly support the program's recognition that people with disability often experience intersecting forms of disadvantage, including those related to gender, sexual orientation and variations of sex characteristics.

LGBTIQA+ people with disability are more likely to report experiences of discrimination, violence, abuse and neglect, including within service systems that are intended to provide care

and support[1]. Many experience exclusion from both disability-specific services that lack LGBTIQA+ cultural safety, and LGBTIQA+ services that are not resourced or equipped to support people with disability.

We encourage the department to strengthen the program's intersectional focus by:

- Explicitly recognising LGBTIQA+ people with disability as a priority population across program guidance, not only within examples.
- Supporting outreach and referral pathways through trusted LGBTIQA+ community-controlled organisations and specialist Disabled Persons Organisations.
- Ensuring that advocacy models are responsive to the specific risks faced by trans and gender-diverse people with disability, people with variations of sex characteristics, and LGBTIQA+ people living in institutional or segregated settings.
- Addressing the compounded barriers and heightened risks faced by LGBTIQA+ people with intellectual or cognitive disability in accessing advocacy support.

Culturally safe and affirming advocacy

IRV and LHA welcome the program's strong emphasis on culturally safe advocacy. We encourage the department to clarify that cultural safety must include safety and affirmation in relation to sexual orientation, gender, and variations of sex characteristics, alongside First Nations cultural safety and cultural and linguistic diversity.

For LGBTIQA+ people with disability, culturally safe advocacy includes:

- Advocates who are trained and competent in LGBTIQA+ inclusive practice.
- Organisational policies and environments that are explicitly affirming.
- Respect for self-determination, supported decision-making, and bodily autonomy.

IRV and LHA recommend that cultural safety training funded through the sector strengthening stream explicitly include LGBTIQA+ inclusion, developed and delivered in partnership with LGBTIQA+ community-controlled organisations and specialist Disabled Persons Organisations.

Role of LGBTIQA+ community-controlled organisations and specialist Disabled Persons Organisations

IRV and LHA strongly support the program's emphasis on disability-driven and community-led approaches. We note, however, that many LGBTIQA+ community-controlled organisations and specialist Disabled Persons Organisations are significantly under-resourced and may not be positioned to compete effectively in open and competitive grant processes without targeted support.

[1] 1.
O'Shea A, Latham JR, McNair R, et al. Experiences of LGBTIQA+ People with Disability in Healthcare and Community Services: Towards Embracing Multiple Identities. *IJERPH*. 2020;17(21):8080. doi:10.3390/ijerph17218080

We recommend that the department:

- Encourage and resource partnerships between disability advocacy organisations and LGBTIQA+ community-controlled organisations and specialist Disabled Persons Organisations, including through formal networks.
- Recognise the role of specialist LGBTIQA+ organisations as trusted referral partners and cultural experts, even where they are not lead advocacy providers.
- Provide guidance and flexibility to ensure smaller community-controlled organisations are not unintentionally excluded by scale or administrative burden.

Resourcing LGBTIQA+ community-controlled organisations and specialist Disabled Persons Organisations to contribute lived-experience expertise is essential to ensuring the program delivers on its equity objectives.

Funding streams and program design

IRV and LHA support the proposed three-stream model and the move to longer funding periods, which will improve workforce stability and service continuity.

In relation to the service delivery stream, IRV and LHA encourage the department to ensure that network models do not inadvertently centralise services or dilute local expertise. Networks should be designed to enhance, rather than replace, locally grounded and affirming advocacy.

For the national advocacy helpline, IRV and LHA support stronger referral pathways and recommends clear protocols to ensure LGBTIQA+ people with disability are referred to affirming, competent local services wherever possible.

The sector strengthening stream presents a significant opportunity to build advocacy capability nationally. IRV and LHA recommend that its priorities explicitly include intersectionality, LGBTIQA+ inclusion, trauma-informed practice, and managing vicarious trauma associated with discrimination and abuse.

Workforce capability and wellbeing

IRV and LHA welcome the focus on workforce development and advocate wellbeing. Advocacy work with people experiencing multiple forms of marginalisation can carry high levels of emotional labour and vicarious trauma.

We recommend that workforce initiatives include:

- Training on working with LGBTIQA+ people with disability.
- Peer learning and mentoring opportunities that include advocates with lived experience of disability and LGBTIQA+ identities.
- Explicit attention to psychosocial safety and workforce sustainability.

Data, monitoring and evaluation

IRV and LHA support the intention to collect and use data to monitor access, outcomes and unmet demand. We strongly recommend that data collection aligns with the Australian Bureau

of Statistics 2020 Standard for Sex, Gender, Variations of Sex Characteristics and Sexual Orientation.

Consistent, standardised data is essential to understanding whether LGBTIQA+ people with disability are accessing advocacy services equitably and whether the program is achieving its intended outcomes. IRV and LHA encourage the department to provide guidance and support to funded organisations to implement inclusive data practices safely and ethically.

Transition and implementation risks

IRV and LHA acknowledge the department's commitment to careful transition from existing programs. We recommend that particular attention be paid to maintaining continuity of advocacy for people facing acute risk, including LGBTIQA+ people with disability who may already experience mistrust of systems due to prior harm.

Clear communication, adequate transition timeframes, and engagement with community-controlled organisations will be essential to minimising disruption.

Conclusion

IRV and LHA welcome the development of a new Commonwealth individual disability advocacy program and supports its overall direction. With targeted refinements, particularly in relation to intersectionality, cultural safety, data, and resourcing of community-controlled organisations, the program has strong potential to deliver meaningful improvements for LGBTIQA+ people with disability.

We look forward to continuing to work with the department to ensure the program advances equity, dignity and justice for all people with disability.