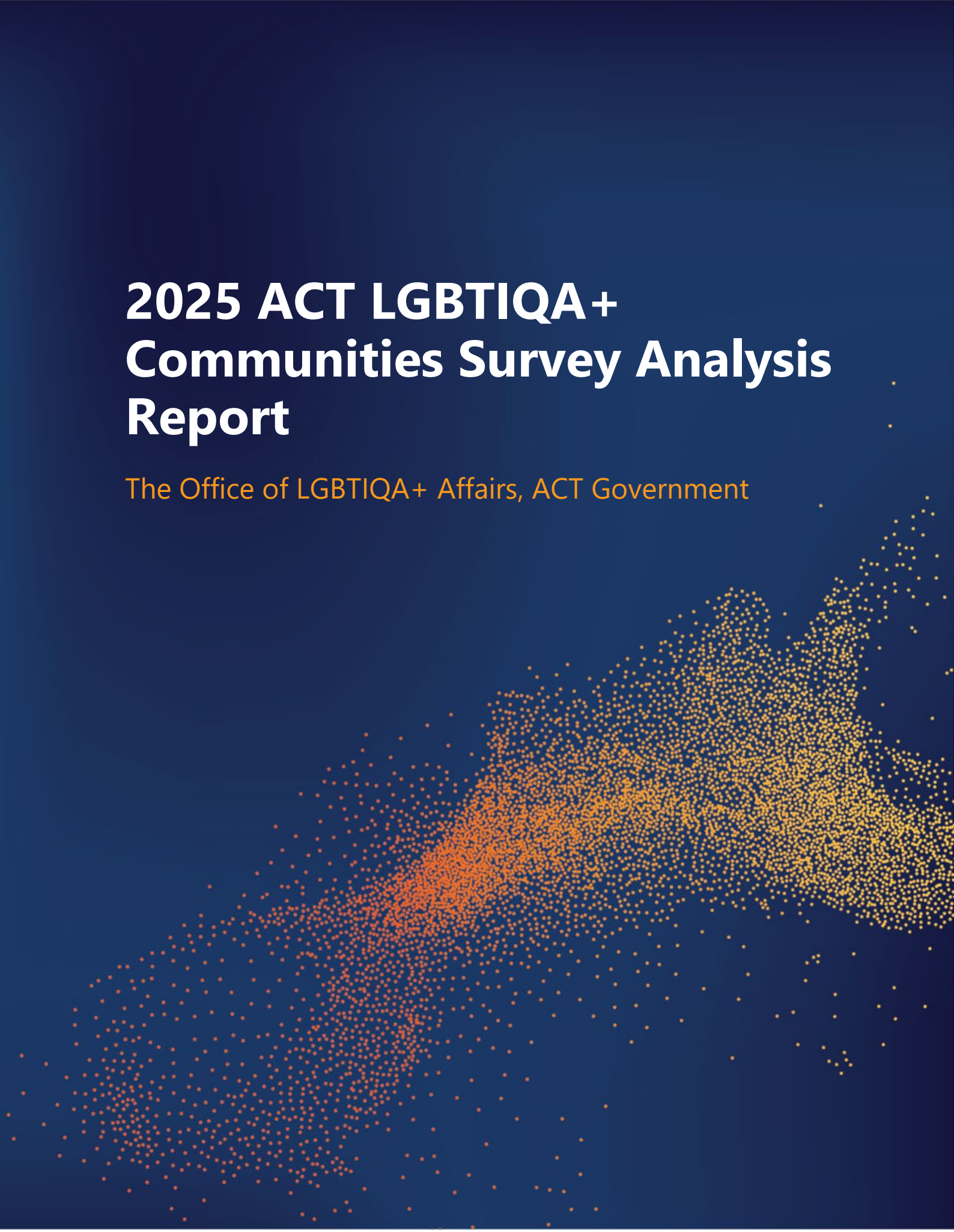
2025 ACT LGBTIQA+ Communities Survey Analysis Report

The Office of LGBTIQA+ Affairs, ACT Government



nous

Nous Group acknowledges Aboriginal and Torres Strait Islander peoples as the First Australians and the Traditional Custodians of Country throughout Australia. We pay our respect to Elders past and present, who maintain their culture, Country and spiritual connection to the land, sea and community.

This artwork was developed by Marcus Lee Design to reflect Nous Group's Reconciliation Action Plan and our aspirations for respectful and productive engagement with Aboriginal and Torres Strait Islander peoples and communities.

Contents

Glossary of acronyms

This report references several acronyms and key terms which are defined in Table 1.

Table 1 | Acronyms used in this report

Acronym	Definition
ACCO	Aboriginal Community-Controlled Organisation
ACT	Australian Capital Territory
ART	Assisted reproductive technology
DFSV	Domestic, family and sexual violence
DPO	Disabled People's Organisation
GBV	Gender-based violence
GP	General practitioners
IVF	In vitro fertilisation
LGBTIQA+	People who are lesbian, gay, bisexual, transgender, intersex, queer, asexual, aromantic or agender
NDIS	National Disability Insurance Scheme
POC	People of colour or person of colour
SOGIESC	Sexual orientation, gender identity and expression, and sex characteristics

Note on terminology

When reading this report, there are some important things to remember about how it is written:

- **Gender or gender identity:** This report references findings about women, men and non-binary people. Women and men are used to include both trans and cisgender women and men. Where findings specifically refer to transgender or cisgender women and men, this is stated.
- **Gender experience:** The report uses the term trans and gender diverse to describe respondents who identified as having a trans or gender-diverse identity or history, regardless of their current gender identity. This includes transgender women, men and in most cases, non-binary people.
- **LGBTIQA+:** The term LGBTIQA+ is used throughout this report as an umbrella term to refer to people with diverse gender, sex, sexuality, relationship or bodily experiences.

Executive Summary

About this report

The Office of LGBTIQA+ Affairs (the Office) coordinates and supports strategic government projects and policy to promote Canberra as the most LGBTIQA+ welcoming and inclusive city in Australia. To support implementation of the Capital of Equality Strategy (2024-2029) (the Strategy),[1] the Office commissioned a second iteration of the LGBTIQA+ Communities Survey. The first survey was conducted in 2022 and informed the development of both the Strategy and the First Action Plan 2024–2026 (the Plan).[2] Building on this foundation, the Office engaged Nous Group (Nous) to deliver the second survey, which was launched in October 2025. This report shares the findings of the LGBTIQA+ Communities Survey.

The survey was developed by the Office of LGBTIQA+ Affairs with assistance from Nous. The survey intended to capture the diverse experiences of LGBTIQA+ people living in the ACT to inform policy, program and service development. The survey was open between October 2025 and January 2026. The survey received 330 responses; 280 respondents completed the full survey.

Policy implications of the survey findings

Based on the data collected through this survey, Nous has identified 7 focus areas that the ACT Government may consider as it continues to implement the Strategy.

Though the focus areas illustrate where there is potentially greater need, there were many positive sentiments expressed through the survey. Most respondents said they felt safe or very safe in all six settings surveyed (for example, 94% felt mostly or very safe at home) and a range of qualitative free-text responses expressed positive sentiment about living in the ACT as an LGBTIQA+ person. Comparing the 2022 to 2025 surveys, 2025 respondents were more likely to report feeling very safe across various settings and less likely to report being treated unfairly, potentially demonstrating progress against these issues.

Focus areas derived from survey findings include:

1. **Findings underscore the need for policy responses that are intersectional in design and implementation.** The LGBTIQA+ community is not a homogenous group defined solely by different sexual orientations, gender identities and expressions, or sex characteristics (SOGIESC), but a diverse cohort. For example, the survey included representation of LGBTIQA+ Aboriginal and Torres Strait Islander respondents (4%), people from multi-faith backgrounds (16%) and people with disability and/or chronic health conditions (54%). While in smaller numbers, the survey also included representation from people of colour and those on a range of permanent and temporary visas. Thirty-three per cent of survey respondents had children and dependents. Policy work addressing LGBTIQA+ issues must therefore move beyond SOGIESC-only considerations, and social policy in areas such as disability, health, justice,

[1] ACT Government. "Capital of Equality Strategy (2024-2029)", available via: Capital of Equality Strategy 2024 - 2029

[2] ACT Government, "First Action Plan (2024-2026) of the Capital of Equality Strategy", available via: First Action Plan 2024 - 2026

migration, and racial equity must also be developed and implemented with a LGBTIQA+ lens to ensure no communities are rendered invisible.

2. **There is a need to undertake targeted approaches to meet the needs of specific cohorts within LGBTIQA+ communities who report much poorer outcomes. Based on this survey, this includes trans and gender diverse people, people of colour, Aboriginal and Torres Strait Islander people, and people living with disability and/or chronic conditions.** These cohorts reported poorer outcomes or experiences compared to the broader sample. This is evidenced across many areas of the survey:

    a. In relation to experiences of violence: Trans and gender diverse respondents reported higher prevalence of all forms of violence and people of colour reported higher prevalence of most forms of violence (10 out of 14 surveyed).[3]

    b. In relation to safety: Trans and gender diverse respondents felt less safe in all settings than cisgender respondents. The largest disparity was in public settings, where 31% of trans and gender diverse respondents reported feeling a little unsafe or not safe at all compared to 16% of cisgender respondents. Respondents living with disability or chronic health condition(s) felt less safe in four of six settings and people of colour felt less safe in all settings apart from school and education settings. Aboriginal and Torres Strait Islander respondents felt less safe in public facing settings and their workplaces.

    c. In relation to experiences of discrimination and unfair treatment: Trans and gender diverse respondents were more likely to say they had been treated unfairly or excluded than cisgender respondents. Two fifths (40%) of respondents with disability or chronic condition felt they had been treated unfairly in the last 12 months because of their disability or chronic condition. Thirty-four per cent of people of colour had experienced unfair treatment because of their race in the last 12 months. Twenty per cent of Aboriginal and Torres Strait Islander respondents had experienced unfair treatment on the basis of their race and 40% on the basis of ethnicity.

    d. In relation to service accessibility: Trans and gender diverse respondents reported lower perceived access to general practitioners and mental health services.

    e. In relation to policing: Most trans and gender diverse respondents, Aboriginal and Torres Strait Islander respondents and previous migrant and refugee visa holders felt the police do not understand the needs of LGBTIQA+ people much or at all.

3. **There is a need to focus on targeted prevention of and responses to sexual and gender-based violence (GBV) in both public and domestic settings.** Many respondents (74%) reported having experienced at least one form of GBV in a setting. The most commonly reported forms of GBV experienced were emotional abuse, verbal abuse, LGBTIQA+ related abuse, sexual violence and physical violence. Intimate partners were the most frequently identified perpetrators across 5 forms of GBV.[4] Respondents also identified strangers as the most common perpetrators of LGBTIQA+ related abuse, which would presumably be most

[3] Types of gender-based violence include emotional abuse, verbal abuse, LGBTIQA+ abuse, sexual violence, physical violence, financial abuse, social isolation, threats of self-harm and suicide, stalking and sexuality and gender identity conversion practices.
[4] The five forms of GBV were emotional abuse, financial abuse, social isolation, threats of self-harm or suicide, and stalking.

likely to occur in public settings. It would be beneficial to target the prevention and response efforts broadly in the ACT as well as within LGBTIQA+ communities.

4. **Exclusion of and discrimination towards LGBTIQA+ people remains an issue to be addressed**. Twenty-three per cent of respondents reported they had been treated unfairly or excluded in the last 12 months in Canberra on the basis of being an LGBTIQA+ person. Feelings of exclusion were also common when accessing services. Through qualitative free-text responses, respondents who reported challenges accessing a service commonly explained that they felt the service was not safe/welcoming for LGBTIQA+ people.
5. **Equality and fairness under the law need continued review and improvement.** This was a consistent issue survey respondents raised across both the 2022 survey and 2025, particularly in relation to the need for stronger protections from hate crimes and vilification. Between 50 and 70% of 2025 respondents felt a lot or some things need to be fixed in every area of law on which they were surveyed.[5] The areas that appear to require the most attention (where respondents reported that a lot needs to change) include: justice system fairness (44% of respondents), protection from hate crimes and vilification (42%), legal rights and protections for sex workers (41%), fair access to and treatment in healthcare and support for victims of crime (41% to both options). These findings also highlight that the law reform needs to be accompanied by awareness raising and access to support services.
6. **There is work to do to improve the way the police interact with LGBTIQA+ communities in Canberra.** Just 5% of survey respondents said the police understand the needs and experiences of LGBTIQA+ people really well. Those from further marginalised groups – such as trans and gender diverse respondents, respondents who previously held a migrant or refugee visa and Aboriginal and Torres Strait Islander respondents – were more likely to feel that the police do not understand the needs of the LGBTIQA+ communities much or at all. This suggests that while improvements can be made for all cross-sections of Canberra's LGBTIQA+ communities, there are certain cohorts where targeted efforts are needed to build trust in policing. Through free-text responses, survey respondents suggested the police could work better with LGBTIQA+ communities by undertaking more community outreach and engagement, training and education for police staff, increased accountability and acknowledgement of actions, and employing more LGBTIQA+ staff or staff with experiences of marginalisation.
7. **There is a need for improved data collection and targeted engagement with groups under-represented in this survey to ensure future policy and law reform reflect the lived experiences of those most at risk of exclusion**. This includes LGBTIQA+ people experiencing homelessness, children and young people, particularly those aged 12 to 16, LGBTIQA+ people aged over 60, people of colour and individuals on temporary and permanent visas.

[5] Areas of law include justice system fairness, protections from hate crimes and vilifications, legal rights and protections for sex workers, fair access to and treatment in healthcare, support for victims of crime, protection of private information and data, ban on sexuality and gender conversion, protection from unnecessary procedures on intersex people, family law, legal rights for parents, anti-discrimination protections, legal recognition of identity.

1 Background and survey approach

This section outlines the role of the Office of LGBTIQA+ Affairs, background to the biennial survey the Office deploys, and the methodology and scope of the survey analysed for this report.

1.1 About the Office of LGBTIQA+ Affairs

The Office of LGBTIQA+ Affairs (the Office) was established in 2017 to lead strategic policy development aimed at improving equality, wellbeing and inclusion for LGBTIQA+ communities in the ACT. Since 2025, it is located within the Health and Community Services Directorate.[6]

The Office:

- provides evidence-based advice to the ACT Government on issues affecting LGBTIQA+ communities;
- develops and coordinates the implementation of a whole-of-government approach to LGBTIQA+ equality through the Capital of Equality Strategy (2024-2029);
- leads legislative reforms and works on improving service systems for LGBTIQA+ people;
- supports and engages with the LGBTIQA+ Ministerial Advisory Council on matters where the government is seeking advice and guidance;
- manages funding for LGBTIQA+ community-controlled organisations, events and a grants program; and
- contributes to national policy making on issues relevant to LGBTIQA+ communities.

1.2 Background to the survey

The ACT Government launched the Capital of Equality Strategy (2024-2029) in 2024.[7] The Strategy builds on the achievements of the 2019–2023 iteration to achieve meaningful and lasting change towards LGBTIQA+ equality in Canberra. The Strategy is structured around four objectives:

- Objective 1: promote awareness and understanding to eliminate barriers to equality for LGBTIQA+ communities.
- Objective 2: enhance systems and services availability and their competencies.
- Objective 3: advance legal and policy reforms to ensure equal rights.
- Objective 4: empower safe, resilient and sustainable LGBTIQA+ communities.

[6] ACT Government, "Office of LGBTIQA+ Affairs", available via: https://www.act.gov.au/directorates-and-agencies/health-and-community-services-directorate/office-of-lgbtiqa-affairs

[7] ACT Government, "Capital of Equality Strategy 2024-2029", available via: Capital of Equality Strategy 2024-2029

One of the key commitments under the Strategy is improving the quality of data about LGBTIQA+ communities in the ACT. This is particularly reflected in Objective 1.

The first LGBTIQA+ Communities survey was conducted in 2022 and informed the development of both the Strategy and its First Action Plan (2024–2026).[8] In 2024, the Chief Minister Andrew Barr made a commitment to establish and run a periodic ACT LGBTIQA+ Communities Survey. The 2025 LGBTIQA+ Communities Survey was conducted to track progress against the Strategy, and strengthen the evidence base for policy, program and service design. The Office commissioned Nous to analyse the survey data.

1.3 Survey scope, methodology and limitations

1.3.1 Scope and methodology

The survey was developed by the Office with assistance from Nous. Survey questions are included in Appendix A. The 2025 survey broadly mirrors the questions asked in the 2022 iteration. Its questions were drafted in an accessible format to improve comprehension. Table 2 below provides key details about the purpose, distribution method and analysis method of the survey.

The survey questions covered 6 themes:

1. Demographic questions (detailed in Section 2.1 of this report)
2. Views on safety and fair treatment (Section 2.2 of this report)
3. Views on service accessibility in different settings (Section 2.3 of this report)
4. Views on laws and policing (Section 2.4 of this report)
5. Views on the ACT Government and the Office (Section 2.5 of this report)
6. Views on the marriage equality anniversary[9].

Additionally, this report includes:

7. Findings from the under 16s survey (Section 2.6 of this report). This was a supplementary survey deployed to parents and carers of LGBTIQA+ people under 16 to complete collaboratively with their child. This component of the survey received nine responses, of which 6 completed the full survey. This report presents only high level and aggregate narrative-form findings for the under 16s survey.

Where relevant, this report compares findings from the 2022 survey with the 2025 survey.

[8] ACT Government, "First Action Plan (2024-2026) of the Capital of Equality Strategy", available via: Capital of Equality Strategy 2024-2029

[9] Note that the Office of LGBTIQA+ Affairs has undertaken multiple community engagement activities to capture views on marking the 10th anniversary of marriage equality, with this survey being only one of those. As such, responses to the survey questions on the marriage equality anniversary have not been included in this report, as they do not reflect the full range of views gathered.

Table 2 | About the 2025 ACT LGBTIQA+ Communities Survey

Survey purpose	The survey intended to capture the diverse experiences of LGBTIQA+ people living in the ACT. Its findings inform policy, program and service development aligned with the needs and experiences of LGBTIQA+ people living in the ACT. The 2025 iteration of the survey also intended to track progress since the initial 2022 survey iteration.
Survey eligibility	The survey was open to: • anyone aged 16 years or older with diverse gender, sex, sexuality, relationship or bodily experiences (or LGBTIQA+) who lives in the ACT or travels to the ACT for work or study, or • a parent or a guardian of an LGBTIQA+ young person aged 12-15 who could help them complete the survey.
Distribution method	The Office distributed the survey via: • a range of ACT Government websites • the ACT Government, the Office's and Ministerial social media • the ACT Government newsletters • community partners digital channels The survey was also promoted at the Fair Day held as a part of the 2025 SpringOUT festival. The survey was open between October 2025 and January 2026.
Response numbers	338 people responded to the over 16s survey, of which 330 were analysed: • 282 of these respondents completed the full survey. • 8 of the 338 responses were excluded (creating the sample of 330), as they were from respondents who identified their sexual orientation as heterosexual, were not trans and gender diverse person, and were not born with a variation in sex characteristics. As such, it was not possible to determine that they were LGBTIQA+ people. • Some responses were optional, creating different sample sizes for each question. Sample sizes are noted throughout the report. Nine people responded to the under 16s survey: • Six of these respondents completed the full survey.
Analysis method	**Over 16s survey** The analysis used **descriptive statistics** to examine quantitative data. The analysis used frequencies and percentages to summarise survey responses, and are presented in both narrative and visual formats, including histograms, bar charts, and tables.

	The analysis used **cross-tabulation** to explore relationships between demographic characteristics and respondents' experiences. Qualitative responses were analysed using **framework analysis.**[10] Responses were read in full to identify key themes and then each response was coded (using a numerical value) to these themes. The results were summarised in a table with respondents' demographic characteristics to support comparison across groups. **Under 16s survey** The under 16s survey received limited responses. This constrained the ability to meaningfully analyse this data using descriptive statistics and created ethics issues for privacy. For the under 16s survey, this report only presents high level and aggregate narrative-form findings.

1.3.2 Limitations

There are some limitations of the survey that should be considered when interpreting results:

- The survey sample may not be representative of broader LGBTIQA+ communities in Canberra. Individuals who are more connected to LGBTIQA+ communities and/or more aware of the Office may have been more likely to participate. This is likely because survey distribution channels were primarily linked to the Office and the SpringOUT festival, where more engaged community members were more likely to be reached.
- Some overlap was observed across qualitative responses to different survey questions, resulting in similar themes emerging in some sections of the analysis.
- Some demographic groups may not have been adequately reached through the survey distribution methods. In particular, response rates were low among people experiencing homelessness and among people on migrant, refugee, international student and other visas, which may reflect barriers to access, awareness, or participation. As a result, the findings may not fully capture the experiences of these groups.
- The free-text survey question "What is your cultural background?" was intended to identify respondents' race. However, its wording resulted in a wide range of responses, including race, cultural background and nationality. As a result, it was not possible to determine race conclusively for all respondents. Where race was clearly identified and the used descriptors referred to people from the global majority[11], the Office coded these responses as 'people of colour.' Where differences in outcomes by race were evident across survey areas, these results are highlighted in the report. The Office excluded responses that reported nationality or cultural background without specifying racial identity from the analysis.

[10] Gale NK, Heath G, Cameron E, Rashid S, Redwood S. Using the framework method for the analysis of qualitative data in multi-disciplinary health research. BMC medical research methodology. 2013 Sep 18; 13(1):117.

[11] "Global majority" is a collective term for people of African, Asian, indigenous, Latin American, or mixed-heritage backgrounds, who constitute approximately 85 percent of the global population. It has been used as an alternative to terms that are seen as racialised, such as "ethnic minority" and "person of colour".

2 Survey analysis findings

This section outlines key findings from the 2025 ACT LGBTIQA+ Communities Survey. It is structured into 6 sections:

2.1 Demographics

2.2 Views on safety and fair treatment

2.3 Views on service accessibility in different settings

2.4 Views on laws and policing

2.5 Views on the ACT Government and the Office of LGBTIQA+ Affairs

2.6 Under 16s survey findings.

2.1 Demographics

There were 330 responses to the over 16s survey with a range of demographic characteristics

The sample had a high level of diversity both in term of sexual orientation, gender identity and expression, and sex characteristics (SOGIESC), and other demographic characteristics.

SOGIESC of survey respondents

- **Sexual orientation:** Respondents reported 39 different combinations of sexual orientations.
  - The most common sexual orientation respondents selected was 'queer.' Around 30% of respondents selected this term either on its own or in combinations with other terms. Queer appeared in 18 out of 39 combinations where respondents selected more than one choice.
  - Sixteen respondents used another term to describe their sexual orientation, the most common of which was demisexual (n=6/16). The remaining responses were a diverse range of terms including aromantic and demiromantic.
  - See Table 3 for a full breakdown of responses about which terms respondents use to describe their sexual orientation.

Table 3 | Demographic survey data: sexual orientation

Sexual orientation[12]	Percentage of respondents who use this term to describe their sexuality (n=330)
Queer	31%
Lesbian	30%

[12] Respondents could select multiple options for terms they use to describe their sexual orientation, therefore, proportions do not add to 100.

Gay	25%
Bisexual	22%
Pansexual	14%
Asexual	8%
Straight	2%

- **Gender** (n=330): Most respondents described their gender as woman (51%). Around a quarter described their gender as man and 16% described their gender as non-binary.
    - Around 6% (n=19/330) used another term to describe their gender, the most common of which were trans masculine and trans man (n=8/19), genderfluid (n=3/19) and transfeminine (n=2/19).
- **Gender experience:** 30% of survey respondents were trans or gender diverse persons (n=100/330).
    - The survey achieved strong representation of trans or gender-diverse people relative to the broader population of LGBTIQA+ people in Australia. Around 20% of LGBTIQA+ Australians are trans or gender diverse.[13]
- **Variations in sex characteristics**: 4 respondents reported being born with variations in sex characteristics.

Young respondents were more likely to be non-binary or trans and gender diverse, in line with community patterns

As illustrated in Table 4, younger respondents aged 16-24 were more likely than all other age groups to be non-binary or trans and gender diverse. Respondents aged 25-39 years were also more likely than respondents aged 40-59 years and those over 60 to report their gender as non-binary or that they were trans and gender diverse.

This aligns with data about LGBTIQA+ communities in Australia, where the age structure of the trans and gender diverse population is younger than the cisgender population. Around 30% trans and gender diverse people in Australia are aged between 16 and 24 years and around half of LGBTIQA+ people aged 16-24 are trans or gender diverse.[14]

Youth scholars suggest that younger generations tend to be more open and accepting of gender diversity and place greater emphasis on autonomy and self-determination than older cohorts.[15] This may contribute to higher rates of trans and gender diverse identification among young people in this survey and in Australia more broadly.

[13] Australian Bureau of Statistics, "Estimates and characteristics of LGBTI+ populations in Australia", 2024, available via: Estimates and characteristics of LGBTI+ populations in Australia, 2022 | Australian Bureau of Statistics

[14] Australian Bureau of Statistics, as above.

[15] Allen, K., Cuthbert, K., Hall, J. J., Hines, S., & Elley, S. (2022). Trailblazing the gender revolution? Young people's understandings of gender diversity through generation and social change. *Journal of Youth Studies*, 25(5), 650–666. https://doi.org/10.1080/13676261.2021.1923674

At the same time, health services and researchers note that broader social awareness and improved understanding of trans and gender diverse experiences have increased visibility and reduced stigma (to a certain extent). Together, these shifts may mean that young people feel safer and more supported to express their gender identities than previous generations.[16]

Table 4 | Proportion of respondents who are non-binary, and trans and gender diverse by age[17]

	16-24 years (n=38)	25-39 years (n=162)	40-59 years (n=108)	Over 60 years (n=19)
Proportion non-binary people	24%	20%	7%	11%
Proportion transgender women	13%	7%	6%	5%
Proportion transgender men	11%	5%	4%	0%
Proportion cisgender people	39%	59%	75%	68%

Other demographic characteristics

- **Age:** Almost half of survey respondents were 25-39 years old. There were few responses from people aged over 60 and under 25 (See Table 5).

Table 5 | Demographic survey data: age

Age	Percentage of respondents from this age group (n=330)
16-24	11%
25-39	49%
40-59	33%
Over 60 years	6%

- **Aboriginal and Torres Strait Islander people:** Around 4% of respondents were Aboriginal and/or Torres Strait Islander people. Aboriginal and Torres Strait Islander people were also represented at a slightly higher proportion in the survey than in the general ACT population (4% compared to 2%).[18]

[16] Transcend, "Fact Sheet: Trans, Gender Divers & Non-Binary Young People & Gender Affirming Healthcare", 2023, available via: Fact-Sheet_Trans-Gender-Diverse-and-Non-Binary-Young-People-and-Gender-Affirming-Healthcare-V2-2.pdf

[17] The proportions in each age category do not add to 100% as there were some respondents who selected that they 'don't know' if they are trans or gender diverse and also selected 'man' or 'woman' as their gender. In these cases, it was not appropriate to determine whether the respondent was transgender or cisgender.

[18] Australian Bureau of Statistics, "ACT 2021 Census Aboriginal and/or Torres Strait Islander people QuickStats", 2021, available via: 2021 ACT, Census Aboriginal and/or Torres Strait Islander people QuickStats | Australian Bureau of Statistics

- **Race:** Where cultural background responses specifically identified respondent's race (n=177), one-third of the those (n=58) were people of colour.
- **Religion and spirituality:** 51 respondents identified with a religion or spiritual tradition (16% of 330 respondents).
    - Around half of these 51 respondents identified with a denomination of Christianity (n=24/51).
    - Buddhism was the second most common religion or spiritual tradition (n=9/51).
- **Migration status:** Most respondents were citizens, either born in Australia (84%) or previously on a migrant or refugee visa (10%). The remaining 19 respondents (6%) were people currently on migrant, refugee, international student or other visas.
- **Living with disability and/or chronic health condition:** Around 54% of respondents reported disability and/or a chronic health condition.
    - Population-level data indicates that around half of the ACT population was living with a chronic condition in 2022,[19] while approximately 20% of adults aged 18 years and over reported having a disability in 2021.[20] The higher proportion of respondents living with disability and/or chronic health condition in the survey is likely explained by the framing of the question. The question did not allow responses to be differentiated between disability and chronic health conditions (i.e. it is not possible to disaggregate between the two because respondents who selected yes to this question could have had either a disability or a chronic health condition, or both).

Young, trans and gender-diverse and Aboriginal and Torres Strait Islander respondents were more likely to report living with disability or chronic health condition

Cross-tabulation of the data highlights 5 groups who were more likely to report living with disability or chronic condition:

- **Aboriginal and Torres Strait Islander respondents:** 13 out of 15 Aboriginal and Torres Strait Islander respondents reported living with disability or chronic condition (80%) compared with 53% of the broader survey respondents.
- **Respondents aged 16-24 years**: 62% of respondents aged 16-24 years stated they had a disability or chronic condition (n=38). This compares with 51% of those aged 25–39 (n=156), 56% of those aged 40–59 (n=107), and 47% of respondents aged 60 and over (n=19).
- **Non-binary respondents**: 80% of non-binary respondents (n=51) were people with disability or chronic condition, compared with 51% of women (n=167) and 40% of men (n=92).

[19] ACT PHN, "Chapter 3: Chronic Health Conditions", 2022, available via: https://www.chnact.org.au/wp-content/uploads/2025/01/3.-Chronic-conditions.pdf

[20] ACT Government, "2021 ACT General Health Survey Statistical Report", 2021, available via: https://www.act.gov.au/open/epidemiology-publications/2021-act-general-health-survey-statistical-report

- **Trans and gender diverse respondents**: 71% of trans and gender diverse respondents (n=99) were people with disability or chronic health condition compared with 46% of cisgender respondents (n=209).
- **Respondents with variations in sex characteristics**: All 4 respondents with variations in sex characteristics also live with disability and/or chronic condition.

Additional demographic data reported

- **Children and dependents:** 32% of respondents had children or dependents (n=101/309).
  - Of these 101 respondents, 31% used assisted reproductive technologies (ART) to conceive their children.
  - Most respondents with children had either one or 2 children (38% and 37% respectively).
- **Pet ownership and its impact on mental health outcomes:** 71% of respondents had a pet and most of these respondents said this helped their mental health a lot (73% of the 211 respondents who had a pet).
- **Living arrangements:** The most common living arrangement was living with a partner/s (33%). There was relatively strong diversity in people's living arrangements (see Table 6).

Table 6 | Demographic survey data: living arrangements

Living arrangement	Percentage of respondents who selected this best describes who they live with (n=298)
I live with my partner/s	33%
I live by myself	20%
I live with my partner/s and child/ren	13%
I live with roommates/housemates	13%
I live with my parents/siblings	10%
I live with my children, but no partner	8%
I live in a different situation	3%

There were limited responses from people experiencing housing instability and homelessness

There were few respondents who had been homeless, had problems paying for housing or been discriminated against when trying to find housing in the last 12 months or 5 years:

- **Experiences of homelessness**:
  - Three respondents had been homeless in the last 12 months
  - Eight had been homeless in the last 5 years
- **Housing affordability:**

- Nine had problems paying for housing or finding a safe place to live in the last 12 months
- Twenty-four had problems paying for housing or finding a safe place to live in the last 5 years

- **Housing discrimination:**
  - One had experienced discrimination when trying when trying to find a safe place to live in the last 12 months
  - Eight had experienced discrimination when trying when trying to find a safe place to live in the last 5 years.

2.1.1 Comparison to 2022: demographics

The 2025 survey received fewer responses than the 2022 survey

The 2025 survey had 331 demographic responses compared to 427 in 2022.

The demographic profiles of respondents to the 2022 and 2025 surveys were largely similar

Both surveys received a similar or identical proportion of responses from:

- women, men, and non-binary people
- Aboriginal and Torres Strait Islander people
- people born with variations in sex characteristics
- people based on their migration and citizenship status
- people aged 25–39 and those aged over 60.

There were demographic differences in some age groups, terms used to describe sexual orientation and in the proportion of respondents living with disability

While not directly comparable due to slightly different age categories between the two surveys, young people were less represented in 2025, with 21% of respondents aged 18–25 in 2022 compared with 11% aged 16–24 in 2025. In contrast, representation increased among people aged 40–49, from 24% in 2022 to 33% in 2025.

There were also differences in the terms respondents used to describe their sexualities. In 2022, 33% of respondents used the term gay, compared with 25% in 2025. Similarly, 27% of respondents used bisexual in 2022, compared with 22% in 2025. These differences most likely reflect changes in the sample composition between the two survey years more than any broader shift in the ACT's changing demographics or evolving language preferences.

There may also have been a higher proportion of respondents living with disability in 2025. In 2022, around one third of respondents reported living with disability. In 2025, this question was asked differently to explicitly include chronic conditions. As a result, just over half of respondents lived with disability and/or a chronic condition. It is not possible to separate disability from chronic condition responses in the 2025 data, and therefore not possible to conclusively determine whether a higher proportion of people with disability completed the 2025 survey.

See Table 7 for a full demographic comparison between the 2022 and 2025 survey cohorts.

Table 7 | Demographic comparison table 2022 and 2025 surveys

Demographic category	Specific demographic	2022	2025
Gender identity	Woman	49%	51%
	Man	30%	28%
	Non-binary	15%	15%
	Another term	4%	6%
Trans and gender diverse respondents	N/A	28%	30%
Sexual orientation	Lesbian	26%	30%
	Gay	33%	25%
	Bisexual	27%	22%
	Pansexual	13%	14%
	Queer	33%	31%
	Asexual	8%	8%
	Straight	1%	2%
Respondents born with variations in sex characteristics	N/A	2%	1%
Age	18-25 years (2022) 16-24 years (2025)	21%	11%
	25-39 years	49%	49%
	40-59 years	24%	33%
	Over 60	5%	6%
Aboriginal and Torres Strait Islander respondents	N/A	3%	4%
Disability and/or chronic health condition	Living with disability (2022)	32%	N/A
	Living with disability and/or a chronic condition (2025)	N/A	54%
Migration status	Citizen (born in Australia)	83%	84%

	Citizen (previously on a migrant or refugee visa)	10%	10%
	Currently on a migrant visa	3%	2%
	Currently on a refugee visa	1%	1%
	Currently an international student	1%	1%
	Currently on a bridging visa or another visa	1%	2%

2.2 Views on safety and fair treatment

Survey questions relevant to this section

Respondents were asked 4 questions about safety and fair treatment:

- Have you ever experienced any of the following types of gender-based violence?
- How safe do you feel as an LGBTIQA+ person in the following settings?
- Have you been treated unfairly or couldn't participate in something in Canberra because of who you are?
- If you answered yes to any of the options above [unfair treatment question], did you report these experiences and what were the outcomes?

2.2.1 Experiences of gender-based violence

The most common forms of gender-based violence reported were emotional abuse, verbal abuse and LGBTIQA+-related abuse[21]

The survey question about experiences of gender-based violence (GBV) was asked within the additional optional subsection comprising several questions. Respondents were given a table listing different forms of GBV. If they had experienced any of these, they were asked to indicate who was the perpetrator.

Of the 311 respondents who opted into the additional section, 227 selected at least one type of gender-based violence (Table 8). If considered within the total survey sample, this number of reports represents 69% of the total survey sample.

Note, as the question did not include a "no experience of violence" option, it is not possible to determine whether respondents who agreed to answer it but did not select any forms of GBV had not experienced violence or rather chose not to respond. Similarly, the proportion of who reported this experience from the total sample, should be understood as reports rather than the total prevalence of GBV in the sample.

Table 8 | Percentage of respondents who experienced each form of GBV surveyed[22]

Form of GBV	Percentage of respondents who reported they had experienced this form of GBV (n=227)
Emotional abuse	72%
Verbal abuse	58%

[21] Emotional abuse is defined as a form of gender-based violence where a person is being regularly manipulated, humiliated in front of others, gaslighted, bullied, or blamed for abuse. Verbal abuse is defined as regular criticism, insults or demeaning language. LGBTIQA-related abuse is defined as being shamed about being an LGBTIQA+ person, threatened to 'out' a person or their HIV status, withheld hormones or medication, or blackmail.

[22] Note that aside from LGBTIQA+ abuse and sexuality and gender identity conversion practices, respondents' LGBTIQA+ status was not necessarily a driver behind reported forms of GBV.

LGBTIQA+-related abuse	50%
Sexual violence	49%
Physical violence	32%
Financial abuse	30%
Social isolation	30%
Threats of self-harm and suicide	28%
Stalking	26%
Technology-facilitated abuse	20%
Sexuality and gender identity conversion practices	7%
Reproductive coercion	6%
Spiritual abuse	6%
Forced marriage	1%
Non-consensual and unnecessary medical treatments on people born with variations in sex characteristics[23]	Less than 1% (n=2)
Other forms reported were coercive control and medical violence	2%

The prevalence of sexual violence reported by the survey cohort is substantially higher than that reported for the broader Australian population

Nationally, around 14% of people aged 18 and over have experienced sexual violence since the age of 18.[24] In contrast, 49% of respondents to this question reported having experienced sexual violence. This higher prevalence is consistent with established evidence showing that LGBTIQA+ people experience sexual violence at higher rates than non-LGBTIQA+ peers. This was reported in *Private Lives 3*, where around one in two respondents indicated they had experienced sexual assault at some point in their lives.[25]

[23] No respondents who indicated earlier in the survey that they were born with variations in sex characteristics reported experiencing this form of GBV. Of the two respondents who did report this experience, one indicated they did not know whether they were born with variations in sex characteristics, and the other indicated they were not. This inconsistency may reflect response error across questions and should therefore be interpreted with caution. It is possible that respondents reported these experiences on behalf of their children or other family members (noting this was not intended with this question).

[24] AIHW, "Family, domestic and sexual violence", 2026, available via: https://www.aihw.gov.au/family-domestic-and-sexual-violence/types-of-violence/sexual-violence#everyone

[25] Australian Research Centre in Sex, Health and Society, "Private Lives 3: The Health and Wellbeing of LGBTIQ People in Australia", 2021, available via: Private Lives 3, Australian Research Centre in Sex, Health and Society, Our work, LGBTIQ+ health and wellbeing, La Trobe University

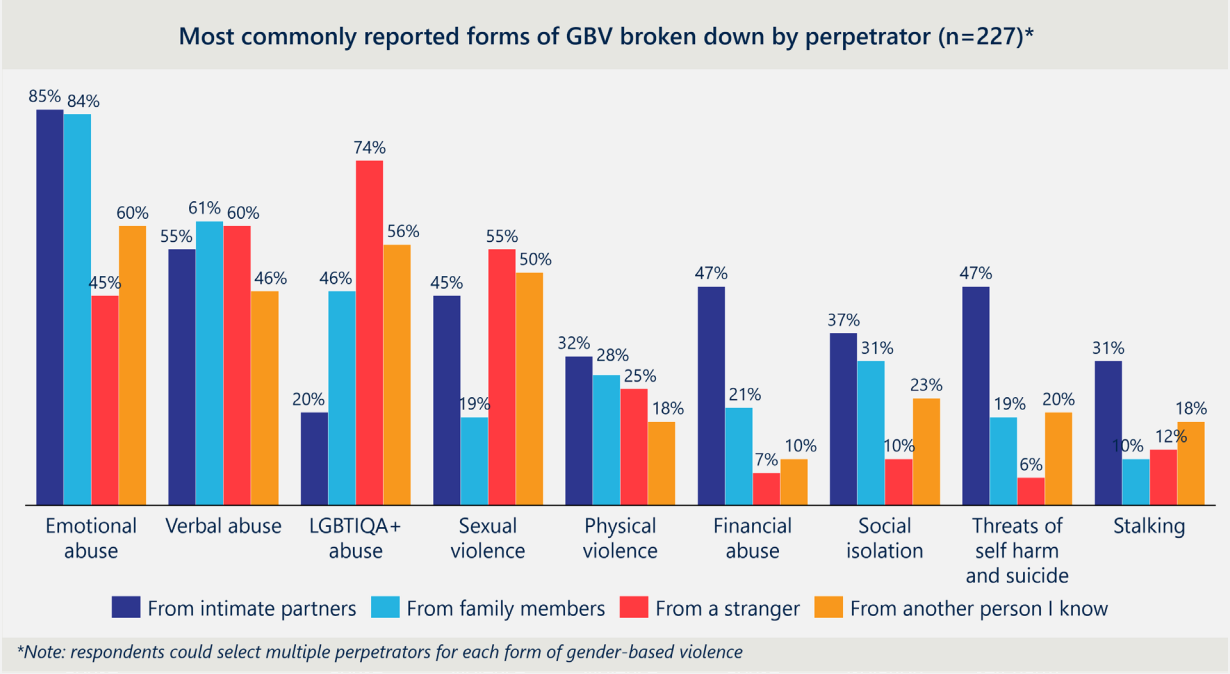
Intimate partners were the most frequently identified perpetrators across 5 of the 9 most reported forms of GBV

Respondents were asked to identify who they had experienced GBV from, selecting from strangers, family members, intimate partners, or another person they know (such as a friend or housemate). Patterns varied depending on the type of violence:

- **Intimate partners** were the most commonly identified perpetrators of emotional abuse (approximately equal to family members), financial abuse, social isolation, threats of self-harm or suicide, and stalking.
- **Strangers** were the most commonly identified perpetrators of LGBTIQA+ abuse, sexual violence and verbal abuse (only one response less than family members).
- **Family members** were the most commonly identified perpetrators of emotional abuse (equal to intimate partners) and verbal abuse.

Figure 1 presents a breakdown of the percentage of total respondents who reported experiencing the 9 most common forms of GBV, by perpetrator type.

Figure 1 | Most commonly reported forms of GBV broken down by perpetrator



**Note: respondents could select multiple perpetrators for each form of gender-based violence*

Long description: The chart reports the 9 most commonly reported forms of GBV by respondents who had experienced a form of violence (n=227), disaggregated by perpetrator. Respondents could select multiple perpetrators for each form of GBV.

- **Emotional abuse**: intimate partners 85%, family members 84%, stranger 45%, another person I know 60%.
- **Verbal abuse**: intimate partners 55%, family members 61%, stranger 60%, another person I know 46%.

- **LGBTIQA+ abuse**: intimate partners 20%, family members 46%, stranger 74%, another person I know 56%.
- **Sexual violence**: intimate partners 45%, family members 19%, stranger 55%, another person I know 50%.
- **Physical violence**: intimate partners 32%, family members 28%, stranger 25%, another person I know 18%.
- **Financial abuse:** intimate partners 47%, family members 21%, stranger 7%, another person I know 10%.
- **Social isolation:** intimate partners 37%, family members 31%, stranger 10%, another person I know 23%.
- **Threats of self-harm and suicide**: intimate partners 47%, family members 19%, stranger 6%, another person I know 20%.
- **Stalking**: intimate partners 31%, family members 10%, stranger 12%, another person I know 18%.

Prevalence of all forms of GBV was higher among trans and gender diverse respondents and mostly higher among non-binary people, though not universally

As shown in Table 9, trans and gender diverse respondents reported higher rates of all forms of GBV than cisgender respondents. The largest disparity was in experiences of LGBTIQA+ abuse, which were reported by 62% of trans and gender-diverse respondents compared to 44% of cisgender respondents.

Table 9 | Demographic disaggregation - experiences of GBV by gender experience

Form of GBV	Trans and gender diverse respondents (n=76)	Cisgender respondents (n=149)
Emotional abuse	**76%**	69%
Verbal abuse	**63%**	55%
LGBTIQA+-related abuse	**62%**	44%
Sexual violence	**50%**	49%
Financial abuse	33%	28%
Social isolation	33%	28%
Threats of self-harm and suicide	33%	25%
Physical violence	32%	32%
Stalking	30%	22%
Technology facilitated abuse	28%	16%

Sexuality and gender identity conversion practices	13%	4%
Reproductive coercion	5%	5%
Spiritual abuse	11%	4%
Forced marriage	1% (1 respondent)	1% (2 respondents)
Nonconsensual and unnecessary medical treatments on people born with variations in sex characteristics	2%	0%

Patterns by gender identity were more varied (see Table 10).

- **Women** (n=116) in comparison with non-binary people and men reported the highest prevalence for emotional abuse (73%), financial abuse (33%), receiving threats of self-harm and suicide and physical violence (both at 32%) and stalking (28%).
    - Experiences of sexual violence were broadly comparable with those reported by non-binary people.
- **Men** (n=57) in comparison with women and non-binary people reported the highest prevalence for LGBTIQA+ -related abuse (63%), technology-facilitated abuse (23%), and spiritual abuse (9%).
- **Non-binary respondents** (n=41) in comparison with women and men, reported the highest prevalence for verbal abuse (61%), sexual violence (51%), social isolation (34%), sexuality and gender identity conversion practices (12%) and reproductive coercion (10%).
    - Experiences of technology-facilitated abuse were broadly comparable with those reported by men.

Table 10 | Demographic disaggregation - experiences of GBV by gender

Form of GBV	Women (n=116)	Non-binary people (n=41)	Men (n=57)
Emotional abuse	**73%**	66%	68%
Verbal abuse	59%	**61%**	53%
LGBTIQA+-related abuse	45%	44%	**63%**
Sexual violence	50%	**51%**	46%
Physical violence	**32%**	27%	30%
Financial abuse	**33%**	24%	25%
Social isolation	31%	**34%**	26%
Threats of self-harm and suicide	**32%**	22%	19%
Stalking	**28%**	22%	21%

Technology-facilitated abuse	16%	22%	**23%**
Sexuality and gender identity conversion practices	4%	**12%**	7%
Reproductive coercion	6%	**10%**	0%
Spiritual abuse	5%	5%	**9%**
Forced marriage	2% (n=2)	2% (n=1)	0%
Nonconsensual and unnecessary medical treatments on people born with variations in sex characteristics	0%	2% (n=1)	1% (n=1)

People of colour were more likely than their counterparts to have experienced 10 of the 14 forms of GBV in the survey

Prevalence of emotional abuse, physical violence and stalking was particularly high for people of colour compared to their counterparts (see Table 11).

Table 11 | Experiences of GBV among people of colour and non-POC respondents

Form of GBV	People of colour respondents (n=50)	Non-POC respondents (n=112)
Emotional abuse	**62%**	45%
Verbal abuse	**50%**	41%
LGBTIQA+-related abuse	32%	33%
Sexual violence	30%	37%
Physical violence	**30%**	19%
Financial abuse	24%	16%
Social isolation	34%	25%
Threats of self-harm and suicide	20%	16%
Stalking	**24%**	12%
Technology facilitated abuse	12%	13%
Sexuality and gender identity conversion practices	4%	5%
Reproductive coercion	4%	3%
Spiritual abuse	6%	4%
Forced marriage	2%	0%
Nonconsensual and unnecessary medical treatments on people born with variations in sex characteristics	0%	0%

2.2.2 Perceptions of safety in Canberra

Most respondents felt very or mostly safe in all 6 surveyed settings

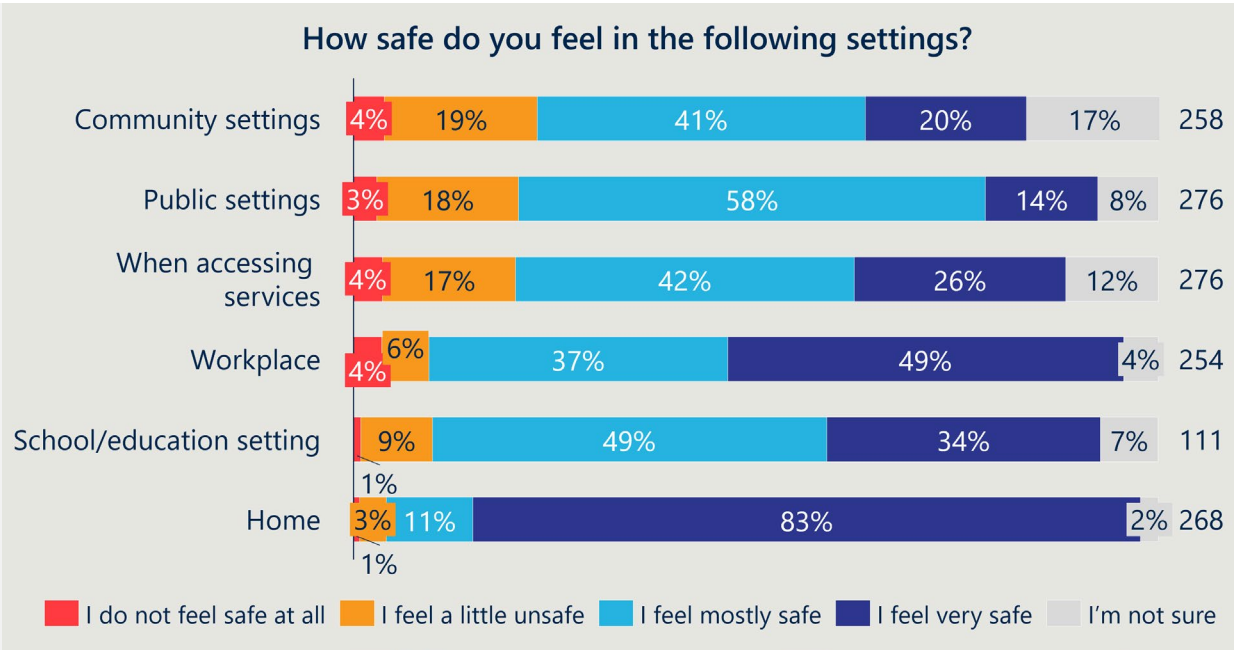
Respondents were asked to report their perceptions of safety across 6 settings: community (including sporting clubs, faith settings etc), public (including in public transport and streets), when accessing services, workplaces, school or education settings, and home. Respondents reported they **felt the safest** in their home, workplace and school/education setting:

- 94% felt mostly or very safe at home
- 86% felt mostly or very safe in their workplace
- 83% felt mostly or very safe in their school or education setting.

The high proportion of respondents who reported feeling safe in their home should not be interpreted as an absence of GBV experienced by LGBTIQA+ people in Canberra. This is particularly important when considered alongside survey findings that identify intimate partners and family members as common perpetrators of violence (see Figure 1 in the previous section). Rather, this result may reflect the realities of the survey's distribution and its limited ability to reach individuals currently experiencing GBV.

Perceptions of safety were lower in community settings, public settings and when accessing services (see Figure 2).

Figure 2 | Perceptions of safety across various settings



Long description: The chart shows how safe respondents feel in different settings. Each bar represents one setting and is divided into five response categories: "I do not feel safe at all," "I feel a little unsafe," "I feel mostly safe," "I feel very safe," and "I'm not sure." Percentages are shown for each response, along with the number of respondents for each setting.

- **Community settings** (n=258): 4% do not feel safe at all, 19% feel a little unsafe, 41% feel mostly safe, 20% feel very safe, and 17% are not sure.
- **Public settings** (n=276): 3% do not feel safe at all, 18% feel a little unsafe, 58% feel mostly safe, 14% feel very safe, and 8% are not sure.
- **When accessing services** (n=276): 4% do not feel safe at all, 17% feel a little unsafe, 42% feel mostly safe, 26% feel very safe, and 12% are not sure.
- **Workplace** (n=254): 4% do not feel safe at all, 6% feel a little unsafe, 37% feel mostly safe, 49% feel very safe, and 4% are not sure.
- **School or education setting**s (n=111): 1% do not feel safe at all, 9% feel a little unsafe, 49% feel mostly safe, 34% feel very safe, and 7% are not sure.
- **Home** (n=268): 1% do not feel safe at all, 3% feel a little unsafe, 11% feel mostly safe, 83% feel very safe, and 2% are not sure.

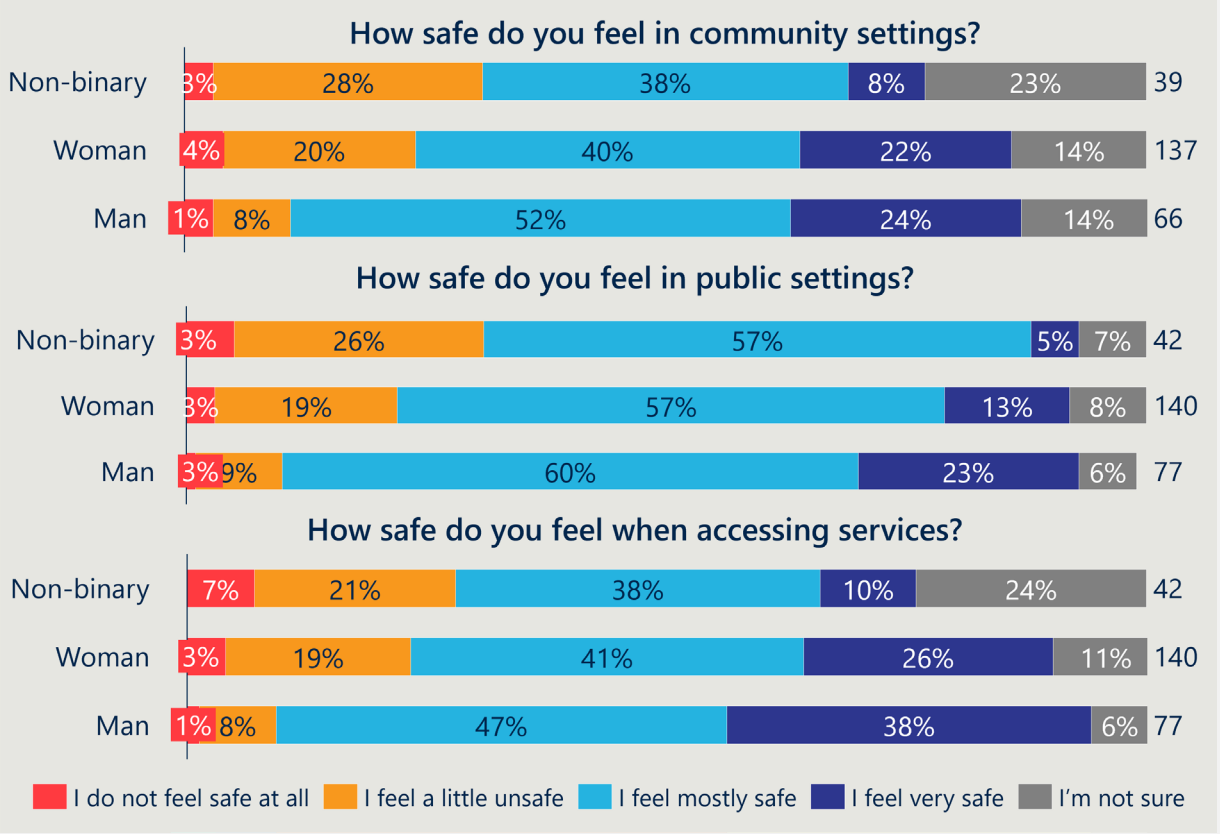
Non-binary respondents felt less safe than women and men in community settings, public settings and when accessing services

As illustrated in Figure 3, non-binary people (n=39 to 42) **felt less safe** than women and much less safe than men in more public-facing settings. Women also felt less safe than men in each of these settings:[26]

- **Community settings:** 31% of non-binary people felt a little or very unsafe, compared to 24% of women and 9% of men.
- **Public settings:** 29% of non-binary people felt a little or very unsafe compared to 22% of women and 11% of men
- **When accessing services:** 28% of non-binary respondents felt a little or very unsafe compared to 22% of women and 9% of men.

[26] The total number of non-binary respondents is small, which means results comparing this cohort should be interpreted with caution.

Figure 3 | Disaggregation of reports of feelings of safety across settings by gender



Long description: The image contains three stacked bar charts showing how safe respondents feel in community settings, public settings, and when accessing services. Responses are broken down by gender identity: non-binary, woman, and man. Each bar shows the percentage of respondents who feel "not safe at all," "a little unsafe," "mostly safe," "very safe," or "not sure." Percentages and respondent counts are shown for each group.

Community settings:

- Among non-binary respondents (n=39), 3% do not feel safe at all, 28% feel a little unsafe, 38% feel mostly safe, 8% feel very safe, and 23% are not sure.
- Among women (n=137), 4% do not feel safe at all, 20% feel a little unsafe, 40% feel mostly safe, 22% feel very safe, and 14% are not sure.
- Among men (n=66), 1% do not feel safe at all, 8% feel a little unsafe, 52% feel mostly safe, 24% feel very safe, and 14% are not sure.

Public settings:

- Among non-binary respondents (n=42), 3% do not feel safe at all, 26% feel a little unsafe, 57% feel mostly safe, 5% feel very safe, and 7% are not sure.
- Among women (n=140), 3% do not feel safe at all, 19% feel a little unsafe, 57% feel mostly safe, 13% feel very safe, and 8% are not sure.
- Among men (n=77), 3% do not feel safe at all, 9% feel a little unsafe, 60% feel mostly safe, 23% feel very safe, and 6% are not sure.

When accessing services:

- Among non-binary respondents (n=42), 7% do not feel safe at all, 21% feel a little unsafe, 38% feel mostly safe, 10% feel very safe, and 24% are not sure.
- Among women (n=140), 3% do not feel safe at all, 19% feel a little unsafe, 41% feel mostly safe, 26% feel very safe, and 11% are not sure.
- Among men (n=77), 1% do not feel safe at all, 8% feel a little unsafe, 47% feel mostly safe, 38% feel very safe, and 6% are not sure.

Trans and gender diverse respondents felt less safe in all settings than cisgender respondents

Table 12 highlights the disparity between perceptions of safety between trans and gender diverse and cisgender respondents. The largest disparity was in public settings, where 31% of trans and gender diverse respondents reported **feeling a little unsafe or not safe at all** compared to 16% of cisgender respondents.

Table 12 | Disaggregation of reports of feeling a little unsafe or not safe at all in various settings by gender experience

Setting	Cisgender respondents	Trans and gender diverse respondents
Community settings	18% (n=164)	29% (n=78)
Public settings	16% (n=174)	31% (n=86)
When accessing services	16% (n=174)	29% (n=86)
Workplace	7% (n=169)	14% (n=72)
School/education setting	6% (n=67)	17% (n=36)
Home	1% (n=169)	6% (n=83)

Queer, asexual and lesbian respondents were generally less likely to report feeling safe, however, this pattern was not consistent across all settings

Respondents who used the terms queer, asexual, and lesbian to describe their sexual orientation were generally more likely to report **feeling unsafe** across the settings surveyed. In contrast, respondents who used the terms gay and bisexual were generally less likely to report feeling unsafe, although this pattern was not observed uniformly across all settings (see Table 13).

Table 13 | Percentage of respondents who do not feel safe at all or feel a little unsafe in various settings disaggregated by sexual orientation[27]

Setting	Lesbian	Gay	Bisexual	Pansexual	Queer	Asexual
Community settings	26% (n=80)	15% (n=67)	19% (n=58)	24% (n=37)	31% (n=83)	30% (n=20)
Public settings	25% (n=80)	18% (n=74)	13% (n=61)	18% (n=39)	28% (n=89)	38% (n=24)
When accessing services	23% (n=80)	15% (n=74)	13% (n=61)	28% (n=39)	27% (n=89)	29% (n=24)
Workplace	9% (n=75)	4% (n=69)	9% (n=58)	16% (n=38)	18% (n=76)	11% (n=18)
School/education setting	13% (n=30)	15% (n=26)	7% (n=29)	7% (n=15)	9% (n=44)	N/A (insufficient data)
Home	5% (n=78)	4% (n=70)	5% (n=62)	0% (n=39)	1% (n=85)	0% (n=24)

Aboriginal and Torres Strait Islander respondents felt less safe in public facing settings and their workplaces

Aboriginal and Torres Strait Islander respondents **felt less safe** in:

- **Their workplace:** 4 out of 13 did not feel safe at all or felt a little unsafe (31% compared to 8% of non-Indigenous respondents).
- **Public settings:** 4 out of 13 did not feel safe at all or felt a little unsafe (31% compared to 21% of non-Indigenous respondents).
- **When accessing services**: 3 out of13 did not feel safe at all or felt a little unsafe (23% compared to 20% of non-Indigenous respondents).
- **In community settings:** 3 out of 12 did not feel safe at all or felt a little unsafe (33% compared to 22% of non-Indigenous respondents).

There were similar response patterns to the broader survey cohort for feelings of safety at home and in school or education settings. Given the small number of Aboriginal and Torres Strait Islander respondents, these comparisons should be read with caution.

[27] Respondents were able to select multiple sexual orientations. As a result, this table presents the proportion of respondents who selected each sexual orientation and reported feeling not at all safe or a little unsafe across the 6 surveyed settings. Due to the multiple-response design of the question, there is overlap and double counting between sexual orientation categories, and proportions should be interpreted accordingly. There were only 3 respondents who were straight; these respondents have not been included in the analysis in this table.

People of colour felt less safe in all settings apart from schools and education settings than non-POC respondents

People of colour **felt the least safe** in:

- **Public settings:** 33% felt very or a little unsafe (n=46) compared to 22% of non-POC respondents (n=96)
- **Community settings:** 30% felt very or a little unsafe (n=44) compared to 24% of non-POC respondents (n=93)
- **When accessing services:** 28% felt very or a little unsafe (n=46) compared to 21% of non-POC respondents, (n=97).

A greater proportion of people of colour also **felt very or a little unsafe** compared to non-POC respondents in their workplaces (13% compared to 6%) and at home (9% compared to 4%).

People of colour **felt much safer** in their school or education setting than non-POC respondents (93% felt very or mostly safe compared to 79%).

Respondents living with disability or chronic health condition felt less safe than those without disability or chronic health condition in 4 of 6 settings

Respondents living with disability and/or chronic health condition **felt the least safe** in:

- **Community settings:** 29% did not feel safe at all or felt a little unsafe (n=143) compared to 16% of respondents without a disability or chronic health condition (n=110)
- **Public settings:** 16% did not feel safe at all or felt a little unsafe (n=153) compared to 15% of respondents without a disability or chronic health condition (n=117)
- **When accessing services**: 25% did not feel safe at all or felt a little unsafe (n=153) compared to 16% of respondents without a disability or chronic health condition, (n=117)
- **In their workplace:** 13% did not feel safe at all or felt a little unsafe (n=137), compared to 6% of respondents without a disability or chronic health condition, (n=111).

Respondents living with disability and/or chronic health condition reported **feeling safer** than those without a disability or chronic health condition in school or education settings (88% reported feeling very or mostly safe (n=57), compared with 77% (n=52)). Feelings of safety at home were high for both groups, with only a small difference between respondents with disability or chronic condition (94%, n=151) and those without (93%, n=111).

2.2.3 Experiences of discrimination and unfair treatment

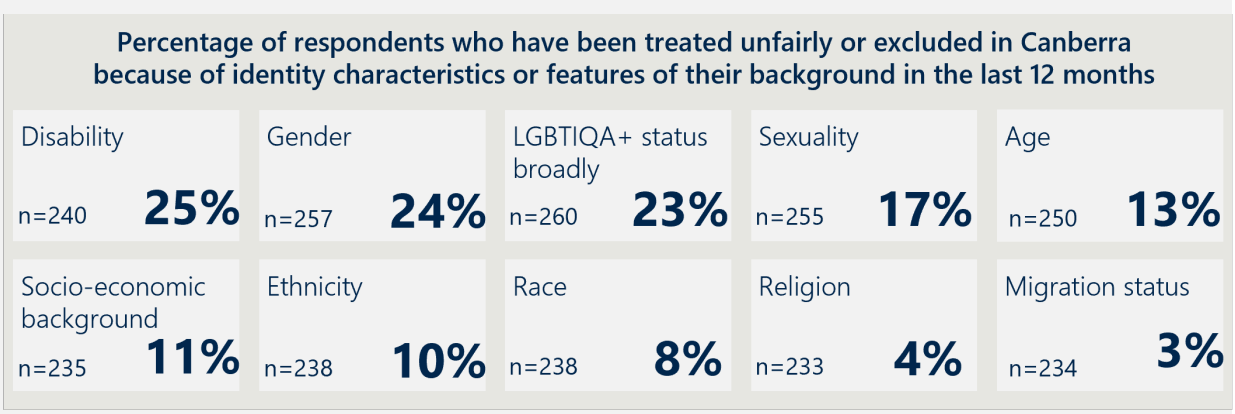
Respondents were asked if they had been treated unfairly or could not participate in something they enjoy on the basis of 11 listed characteristics or features of their background. Respondents were encouraged to only answer if the characteristic was relevant to them, however all respondents could answer if they wished.

General findings

Most respondents said they had been treated unfairly or excluded in the last 12 months because of a feature of their background or an identity characteristic

Of the total surveyed cohort, 75% said they had been treated unfairly because of at least one feature of their background or an identity characteristic. Only 25% of respondents said they had not been treated unfairly at all. Among the 11 demographic characteristics surveyed, LGBTIQA+ status, gender and disability were most frequently cited as reasons for feeling discriminated against. For each of the characteristics, at least one respondent reported experiencing discrimination or exclusion; none had zero instances. A summary of all diversity characteristics and reports of unfair treatment is provided in Figure 4.

Figure 4 | Percentage of respondents who have been treated unfairly or excluded in Canberra by grounds for such treatment in the last 12 months[28]



Long description: The image presents a grid of summary tiles showing the percentage of respondents in Canberra who reported being treated unfairly or excluded in the last 12 months disaggregated by the grounds of such treatment. Each tile includes the characteristic, the number of respondents, and the percentage who reported unfair treatment or exclusion.

- **Disability**: 25% reported unfair treatment or exclusion (n=59/240).
- **Gender**: 24% of respondents reported unfair treatment or exclusion (n=61/257).
- **LGBTIQA+ status broadly**: 23% reported unfair treatment or exclusion (n=59/260).
- **Sexuality**: 17% reported unfair treatment or exclusion (n=43/255).
- **Age**: 13% reported unfair treatment or exclusion (n=32/250).
- **Socio-economic background**: 11% reported unfair treatment or exclusion (n=26/235).
- **Ethnicity**: 10% reported unfair treatment or exclusion (n=23/238).
- **Race**: 8% reported unfair treatment or exclusion (n=20/238).
- **Religion**: 4% reported unfair treatment or exclusion (n=9/233).

[28] Responses about unfair treatment or exclusion because of variations in sex characteristics were excluded due to a lack of data.

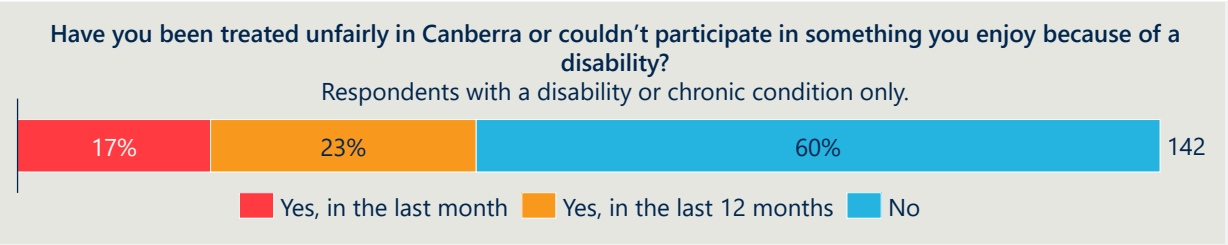
- **Migration status**: 3% reported unfair treatment or exclusion (n=8/234).

Unfair treatment on the grounds of disability and/or chronic health condition

Forty per cent of respondents with disability or chronic health condition felt they had been treated unfairly in the last 12 months on the grounds of their disability

Of respondents who had previously identified that they had a disability or chronic health condition, 40% said that they had been treated unfairly in the last 12 months on the grounds of their disability. Almost 20% said that this occurred in the last month (Figure 5).

Figure 5 | Experiences of unfair treatment on the grounds of disability



Long description: The chart shows responses from people with disability and/or chronic health condition to the question of whether they have been treated unfairly in Canberra or could not participate in something they enjoy because of disability. Responses are grouped into three categories: "Yes, in the last month," "Yes, in the last 12 months", and "No". Percentages are shown for each response, along with the total number of respondents.

Among respondents with disability and/or chronic health condition (n=142), 17% reported being treated unfairly or excluded in the last month, 23% reported being treated unfairly or excluded in the last 12 months, and 60% reported no such experiences.

Experiences of unfair treatment among disabled LGBTIQA+ people were also common in the *Private Lives 3* survey

More than 30% of respondents to *Private Lives 3* with disability and/or chronic health condition reported experiencing severe unfair treatment often or all of the time in the past 12 months. More than half experienced severe unfair treatment at least sometimes during the same period. These rates are higher than those observed in the ACT survey cohort, where 40% reported experiencing unfair treatment in the previous 12 months.

Although prevalence is lower in the ACT cohort, it remains high relative to other reported experiences of unfair treatment or exclusion. This aligns with research presented to the Royal Commission into Violence, Abuse, Neglect and Exploitation of People with Disability highlighting the compounding and intersectional nature of discrimination faced by people who are both disabled and LGBTIQA+.[29] The research also indicates that relatively few LGBTIQA+ people who experience abuse or harassment seek help or support, often due to limited accessible services or

[29] Australian Research Centre in Sex, Health and Society and Living with Disability Research Centre, "Research report: Violence abuse, neglect and exploitation of LGBTQA+ people with disability", 2022, available via: Research Report - Violence, abuse, neglect and exploitation of LGBTQA+ people with disability

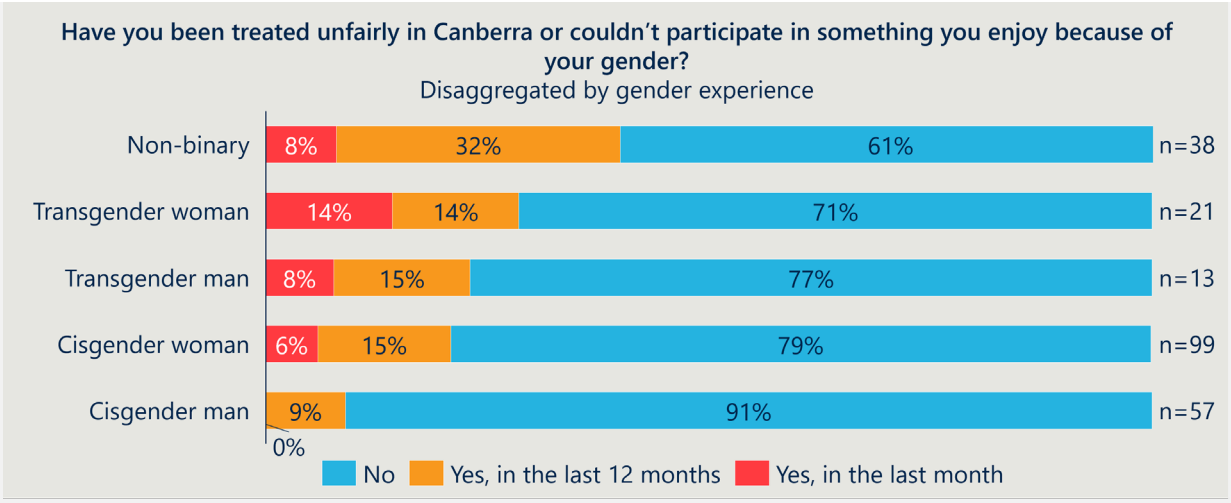
concerns about safety and acceptance if they disclose their sexual orientation, gender identity or variations in sex characteristics.

Unfair treatment on the grounds of one's gender identity and experience

Trans and gender diverse respondents were more likely to report they had been treated unfairly in the last 12 months on the grounds of their gender than cisgender respondents

Around 45% of trans and gender diverse respondents reported they had been treated unfairly in the last 12 months on the grounds of their gender. Trans and gender diverse people were also more likely to report they had been treated unfairly than their cisgender counterparts (Figure 6).

Figure 6 | Experiences of unfair treatment on the grounds of gender - broken down by gender experience



Long description: The chart shows whether respondents in Canberra have been treated unfairly or were unable to participate in something they enjoy on the grounds of their gender. Results are disaggregated by gender experience. Responses are grouped into three categories: "Yes, in the last month," "Yes, in the last 12 months", and "No". Percentages are shown for each response, along with the number of respondents in each group.

- **Non-binary respondents** (n=38): 8% reported being treated unfairly or excluded in the last month, 32% reported this in the last 12 months, and 61% reported no such experiences.
- **Transgender women** (n=21): 14% reported unfair treatment in the last month, 14% in the last 12 months, and 71% reported no unfair treatment.
- **Transgender men** (n=13): 8% reported unfair treatment in the last month, 15% in the last 12 months, and 77% reported no unfair treatment.
- **Cisgender women** (n=99): 6% reported unfair treatment in the last month, 15% in the last 12 months, and 79% reported no unfair treatment.
- **Cisgender men** (n=57): 9% reported unfair treatment in the last 12 months, and 91% reported no unfair treatment.

Anti-trans hate is prevalent in Australia and reportedly increasing

Anti-trans hate is prevalent in Australia and appears to be increasing. In 2023, the Trans Justice Project and the Victorian Pride Lobby released Fuelling Hate,[30] a report examining the prevalence and escalation of transphobia nationwide through a survey of trans and gender diverse Australians. The research found that one in two trans respondents had experienced anti-trans hate (including abuse, harassment, vilification, or violence) within the previous 12 months. Around a third (32%) of survey respondents said they had experienced or seen more or significantly more anti-trans hate since 2020. The authors linked this to a broader climate in which transphobia has gained political and social licence, including during periods of heightened public campaigning by anti-trans figures.

In the ACT LGBTIQA+ Communities Survey, there were 4 respondents who expressed sentiments that could be considered transphobic through free-text responses. Responses tended to suggest that trans issues are preferenced to the detriment of others in the community. While not prevalent, this highlights that the addressing these harmful views may need to occur within LGBTIQA+ communities as well.

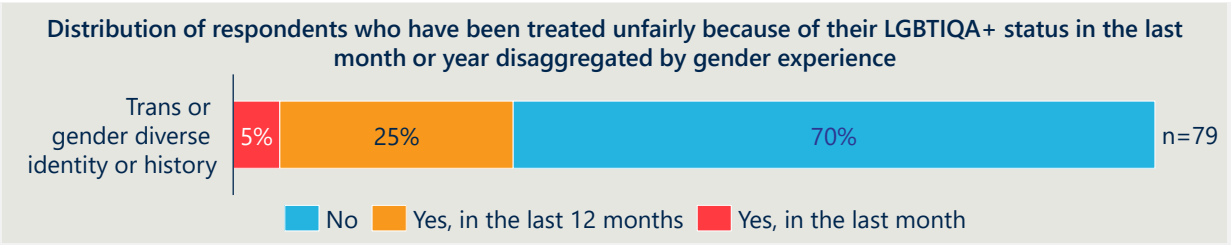
Taken together, these results underscore the risks trans and gender diverse communities face and highlight the need for stronger prevention measures and legal protections.

Unfair treatment on the basis of being an LGBTIQA+ person

Around 22% of respondents (n=269) reported that they had been treated unfairly or excluded in the last 12 months in Canberra because they were an LGBTIQA+ person

Trans and gender diverse respondents and respondents who use the term queer to describe their sexual orientation were most likely to say they had been treated unfairly or excluded. Among trans and gender diverse respondents, 30% said they had been treated unfairly because of their LGBTIQA+ status (Figure 7) and among queer respondents, 28% said they had been treated unfairly because of their LGBTIQA+ status.

Figure 7 | Unfair treatment because of LGBTIQA+ status separated by gender experience



Long description: The chart shows the distribution of trans or gender diverse respondents who reported being treated unfairly because of their LGBTIQA+ status. Responses are grouped into three categories: "Yes, in the last month," "Yes, in the last 12 months", and "No". Percentages and the total number of respondents are shown.

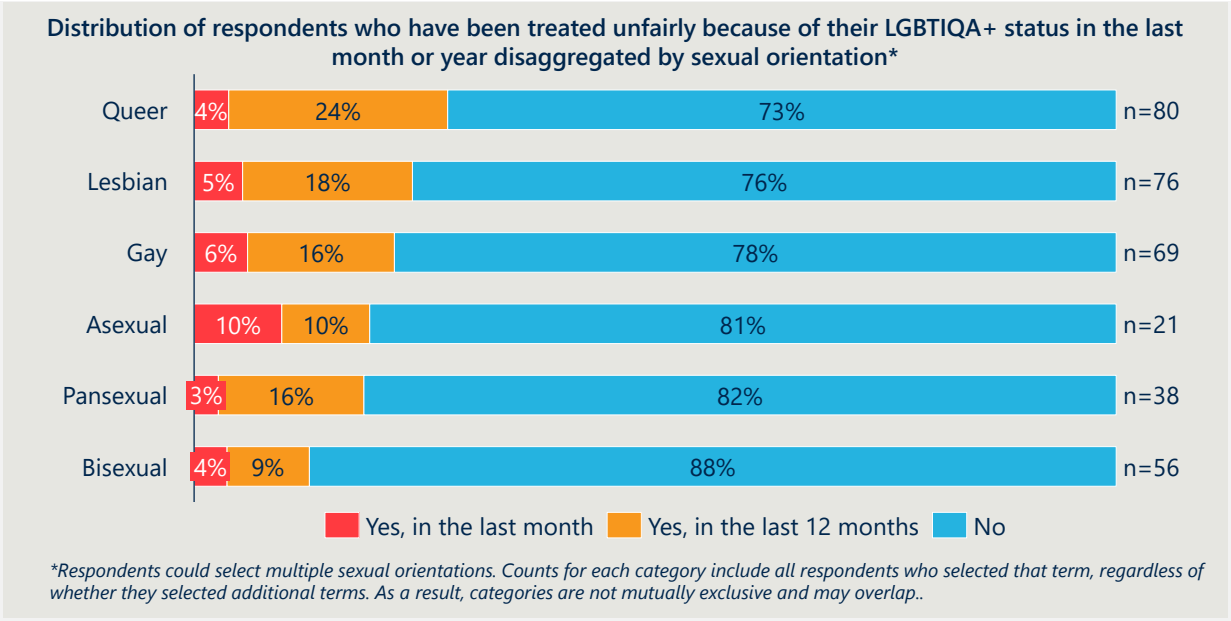
[30] Hiero Badge, Jackie Turner, Austin Fabry-Jenkins, Nevena Spirovska, "Fuelling Hate: Abuse, Harassment, Vilification and Violence Against Trans People in Australia", 2023, available via: Fuelling-Hate-Anti-Trans-Abuse-Harassment-and-Vilification-WEB-SINGLES-1-1.pdf

- Among respondents with a trans or gender diverse identity or history (n=79), 5% reported being treated unfairly in the last month, 25% reported being treated unfairly in the last 12 months, and 70% reported no unfair treatment.

Sixteen per cent of all respondents (n=42/264) said they had been treated unfairly or excluded on the grounds of their sexual orientation

Respondents who used the terms queer and gay to describe their sexual orientation were most likely to say they had been discriminated against on the grounds of their sexuality. Respondents who used the terms bisexual and pansexual to describe their sexual orientation were the least likely to report these experiences (see Figure 8).

Figure 8 | Experiences of unfair treatment on the grounds of sexual orientation



Long description: The chart shows the distribution of respondents who reported being treated unfairly because of their LGBTIQA+ status in the last month or the last 12 months, disaggregated by sexual orientation. Response options are "Yes, in the last month," "Yes, in the last 12 months", and "No". Percentages are shown for each response, along with the number of respondents. Respondents could select multiple sexual orientations, so categories are not mutually exclusive and may overlap.

- **Queer respondents** (n=80): 4% reported unfair treatment in the last month, 24% reported unfair treatment in the last 12 months, and 73% reported no unfair treatment.
- **Lesbian respondents** (n=76): 5% reported unfair treatment in the last month, 18% in the last 12 months, and 76% reported no unfair treatment.
- **Gay respondents** (n=69): 6% reported unfair treatment in the last month, 16% in the last 12 months, and 78% reported no unfair treatment.
- **Asexual respondents** (n=21): 10% reported unfair treatment in the last month, 10% in the last 12 months, and 81% reported no unfair treatment.

- **Pansexual respondents** (n=38): 3% reported unfair treatment in the last month, 16% in the last 12 months, and 82% reported no unfair treatment.
- **Bisexual respondents** (n=56): 4% reported unfair treatment in the last month, 9% in the last 12 months, and 88% reported no unfair treatment.

Reports of unfair treatment on the grounds of sexual orientation were slightly higher in *Private Lives 3* than the ACT LGBTIQA+ Communities Survey

In *Private Lives 3*, around 5% of respondents said they were treated unfairly often or always in the past 12 months because of their sexuality, and a further 17% said they were treated unfairly some of the time. This is slightly higher than the ACT Communities Survey in which 16% of total respondents (n=264) reported that they had experienced unfair treatment or exclusion in the last 12 months on the basis of their sexual orientation.

The lower proportion reported in the ACT survey is consistent with the ACT's long-standing efforts to promote LGBTIQA+ equality. Regardless, the survey findings still show that unfair treatment continues to affect a meaningful proportion of LGBTIQA+ people in the ACT.

Unfair treatment on the grounds of race and ethnicity

Around 10% of all respondents felt they had been treated unfairly on the basis of their ethnicity and 8% felt they had been treated unfairly on the basis of their race. This was higher for people of colour, respondents currently holding a visa and Aboriginal and Torres Strait Islander respondents.

Aboriginal and Torres Strait Islander people

- 20% Aboriginal and/or Torres Strait Islander respondents said they had been treated unfairly on the basis of their **race** (n=2/10).
- 40% Aboriginal and/or Torres Strait Islander respondents felt they had been treated unfairly because of their **ethnicity** (n=4/10).

People of colour

- 34% of people of colour said they had been treated unfairly on the basis of their **race**, including 10% in the past month (n=14/41).
- 36% of people of colour said they had been treated unfairly on the basis of their **ethnicity**, with 12% experiencing this in the past month (=15/42).

Current visa-holders (i.e. people who are not yet citizens)

- 33% of respondents on a refugee, migrant, bridging, international student or other visa said they had been treated unfairly on the basis of their **race** (n=5/15).
- 30% of respondents on a refugee, migrant, bridging, international student or other visa said they had been treated unfairly on the basis of their **ethnicity** (n=5/17).

Previous migrant, refugee or other visa holders

- 17% of respondents previously on a migrant, refugee or other visa said they had been treated unfairly on the basis of their **race** (n=4/23).

- 25% of respondents previously on a migrant, refugee or other visa said they had been treated unfairly on the basis of their **ethnicity** (n=6/24).

Unfair treatment on the grounds of migration status

- 24% of respondents on a range of visas[31] felt they had been treated unfairly because of their migration status.

Unfair treatment on the grounds of religion

- Around 17% of respondents reported they had been treated unfairly on the basis of their religion (n=41).

Unfair treatment on the basis of one's socio-economic status

- Eleven per cent of all respondents (n=238) reported they had been treated unfairly because of their socio-economic status.

Disclosure of unfair treatment often led to little or no outcome for survey respondents

Fifty-one respondents shared more information about whether they reported unfair treatment and what happened as a result. Just over half of these 51 respondents said they did report their experience, while around 33% did not. It was unclear whether the remaining respondents had made a report.

Among those who did report, most said that little or nothing happened afterward. For people who chose not to report and explained why, the most common reason was that there was no clear or accessible way to make a report. There were no clear differences between who chose to report and who did not based on demographic factors.

2.2.4 Comparison to 2022: views on safety and fair treatment

Comparisons between 2022 and 2025 data about perceptions of safety should be interpreted with caution due to differences in response options. In 2022, respondents selected how safe they felt in each setting from a five-point scale: *not at all safe, quite unsafe, neutral, quite safe, extremely safe*.

By comparison, in 2025, respondents selected from a five-point scale with an 'I'm not sure' option: *I do not feel safe at all, I feel a little unsafe, I'm not sure, I feel mostly safe, I feel very safe*. The 'I am not sure' option could be interpreted as both a neutral option, and a response where a respondent had no set view.

Given the differences in response options, comparisons should be treated with caution.

A greater proportion of 2025 respondents appear to feel very unsafe or a little unsafe across all settings compared to 2022 respondents

Across all settings, the proportion of respondents who reported feeling *not safe at all* or *a little unsafe* was higher in 2025 than the proportion who reported feeling *not at all safe* or *quite unsafe* in the same settings in 2022.

[31] Includes respondents who reported as being currently on a refugee, migrant, bridging, international student or other visa.

At the same time, a greater proportion of respondents feel very safe across all settings in 2025 compared to 2022

At least 10 percentage points more respondents reported feeling very safe across all settings except public settings, compared with those who reported feeling extremely safe in each setting in 2022. See Table for a full breakdown of responses to this question across survey years.

Table 14 | Perceptions of safety across settings comparison between 2022 and 2025

Setting	2022					2025				
	Not at all safe	Quite unsafe	Neutral	Quite safe	Extremely safe	I do not feel safe at all	I feel a little unsafe	I' m not sure	I feel mostly safe	I feel very safe
Com-munity settings	3%	12%	34%	44%	7%	4%	19%	17%	41%	20%
Public settings	1%	11%	26%	51%	11%	3%	18%	8%	58%	14%
Accessing services	2%	9%	27%	50%	11%	4%	17%	12%	42%	26%
Work-place	1%	5%	14%	45%	34%	4%	6%	4%	37%	49%
Education setting	2%	5%	24%	48%	21%	1%	9%	7%	49%	34%
Home	0%	3%	7%	21%	69%	1%	3%	2%	11%	83%

Fewer respondents reported being treated unfairly or not able to participate in things they enjoyed because they are LGBTIQA+ persons in 2025 than in 2022

In 2022, 38% of respondents felt unable to participate in things they enjoyed because they were LGBTIQA+ persons. This reduced to 22% in the 2025 survey. Trans and gender diverse respondents were more likely than the broader survey cohort to report being unable to participate in things they enjoyed in both years; however, this proportion decreased from 47% in 2022 to 30% in 2025.

These findings should be interpreted as indicative of potential progress and treated with caution, as the questions differed between survey years. The 2022 survey asked respondents to reflect on experiences since 2019 (a three-year period), while the 2025 survey asked about experiences in the past 12 months only.

2.3 Views on service accessibility and availability

Survey questions relevant to this section

Respondents were asked 2 questions about service accessibility:

- In the past year, did you have trouble getting access to any of the services listed below?
- For any service you marked above, can you give us one example of the troubles you had accessing the service?

Just under half of all respondents struggled to access at least one service in the past year

The survey included a list of community, government (including ACT and Commonwealth), and private services (such as psychiatry). Respondents were asked to identify whether they had experienced barriers to accessing any of these services. Additional response options allowed respondents to indicate that they did not require services, had no difficulty accessing the support they needed, or did not attempt to access services due to negative past experiences.

Of the 282 respondents to this question, 135 (48%) struggled to access at least one service. See Table 15 for the percentage of respondents who selected that they struggled to access each of the listed services. Respondents could select multiple services.

There were 61 respondents who had no trouble getting the support they needed (22%). There were no Aboriginal and Torres Strait Islanders in this cohort. All 12 Aboriginal and Torres Strait Islander respondents who answered this question reported that they struggled accessing at least one service. There were no other clear patterns observed.

There were 13 respondents who said they did not try to access services due to past poor experiences.

Table 15 | Percentage of respondents who reported access barriers, broken down by service

Service	Percentage of total respondents who selected a service (n=282)
General practitioners	25%
Mental health services (non-crisis counselling)	25%
Psychiatrist	16%
LGBTIQA+ peer-support services	9%
National Disability Insurance Scheme (NDIS) services	8%
Gender-affirming healthcare	8%
Sexual health services	6%

Service	Percentage of total respondents who selected a service (n=282)
Disability services and/or disabled people's organisations (DPOs)	6%
Legal services	4%
Domestic, family and sexual violence (DFSV) services	4%
Assisted reproductive technology treatments	2%
Aboriginal Community-Controlled Organisations (ACCOs)	2%
Housing and homelessness services	2%
Services for people of colour and/or those from migrant or refugee backgrounds	1%
Abortion services	0%

The most difficult services to access were health services

Nearly 90% of respondents who reported difficulties with service access, struggled to access a health service (n=119/135).[32]

Just over half of these respondents (n=71/135) reported difficulty accessing both general practitioners (GPs) and mental health services. This was more difficult for:

- **Trans and gender diverse respondents**: 48% of trans and gender diverse respondents who reported difficulty accessing any service reported difficulty accessing GPs and 48% reported difficulty accessing mental health services (n=30/63).

> "GPs are unaffordable due to the lack of bulk billing, and it is hard to find ones with expertise on diverse services."
>
> *Survey respondent*

- **Aboriginal and Torres Strait Islander respondents**: over half who experienced barriers to service access reported difficulty accessing mental health services (n=7/12).

Beyond this, no other clear demographic patterns were observed.

Other health services that respondents were surveyed on included psychiatry, gender-affirming healthcare and assisted reproductive technology (ART):

- Around 34% of respondents who experienced barriers to accessing any services struggled to access **psychiatry** services (n=135).

[32] This includes general practitioners, mental health services, psychiatrists, gender affirming healthcare, assisted reproductive technology and sexual health services.

- Around 30% of trans and gender diverse respondents who experienced barriers to accessing any services struggled to access **gender-affirming healthcare** (n=19/63).
- Six respondents struggled to access **ART** treatments. These respondents were all women or non-binary people aged 25–39 years old.

Around 10% of respondents had challenges accessing LGBTIQA+ peer-led support services

There was no clear pattern in sexual orientation, gender identity, migration status, age or disability status in respondents who struggled to access LGBTIQA+ peer-led services.

> "While we have great community orgs in the ACT not everyone can go there for a range of reasons including that we are a small town."
>
> *Survey respondent*

Some respondents with disability or chronic condition struggled to access NDIS services and disabled people's organisations (DPOs)

Of the 178 people living with disability or chronic conditions, 16% (n=28) struggled to access NDIS services and 11% (n=20) struggled to access DPOs.

Two respondents with disability or chronic conditions described challenges accessing LGBTIQA+ peer-led support services linked to physical accessibility

These respondents said:

- *"I Couldn't access queer community orgs due to physical inaccessibility (I use a wheelchair)"*
- *"[The main troubles I've had accessing services is] primarily location. everything is in the city I'm [sic] disabled and can't go that far so I'm entirely isolated from other trans people. needs to be things consistently [sic] in Belconnen or further north"*

Five out of 15 Aboriginal and Torres Strait Islander respondents had trouble accessing Aboriginal Community Controlled Organisations (ACCOs)

Two respondents elaborated on the challenges they had accessing ACCOs, mainly that they are not safe for LGBTIQA+ Aboriginal and Torres Strait Islander people. These respondents said:

- *"ACCOs don't feel safe for rainbow mob cause they are delivered by heteronormative ideologies. There are no specific units within the services let alone workers for our people to engage with."*
- *"[de-identified] Aboriginal [de-identified] service is anti trans. They say they are supportive but their actions prove otherwise."*

Forty per cent of respondents who had trouble accessing services and elaborated on their experiences said it was because the services were not LGBTIQA+ -friendly

Seventy-nine respondents chose to provide more detail through a free-text response about the challenges they had accessing services. Respondents identified 3 key barriers to accessing services through free-text responses, with the most common being that the service was not appropriate or inclusive for LGBTIQA+ communities (Table 16).

> "When accessing services, regular (incorrect) assumptions being made about gender identity, pronouns, and sexuality based on appearance alone - it makes services feel hostile and harder to use."
>
> *Survey respondent*

Table 16 | Framework analysis - why respondents struggled to access services

Theme[33]	Number and proportion of responses[34] (n=79)	Description of theme	Example quote
The service was not safe or welcoming for LGBTIQA+ people, particularly those from diverse backgrounds	32 responses 40% 3 responses specifically related to how challenges accessing safe services for LGBTIQA+ people intersected with challenges finding culturally safe services.	Respondents described challenges in finding services that were LGBTIQA+ inclusive or had appropriate expertise in LGBTIQA+ issues. Several respondents reported experiences where their identity was questioned or not respected when accessing services. Aboriginal and Torres Strait Islander and non-citizen respondents also highlighted that difficulties accessing services that felt safe and welcoming for LGBTIQA+ people intersected with broader challenges in accessing culturally safe services (see example quote).	*"I need a mental healthcare plan from my GP to access services at Meridian, but my GP thinks I'll change my mind about my sexual orientation and I haven't met the right person yet."* *"An important issue to explore is the lack of culturally safe mental health support for LGBTQIA+ [sic] people from multicultural backgrounds, including international students."*
Wait times were too long	24 responses 30%	Respondents described the challenge of getting timely access to services they	*"It was just a really long wait and lots of work that ended up*

[33] Note this is not an exhaustive list of themes in response to this question, rather the three most common themes which appeared in nearly 100% of responses.

[34] Note that some responses have been coded to more than one theme. For example, where a respondents said services were both unaffordable and wait times were too long.

Theme[33]	Number and proportion of responses[34] (n=79)	Description of theme	Example quote
		needed. Some responses highlighted that this was reflective of broader challenges with services accessibility unrelated to being an LGBTIQA+ service user. This was particularly the case for health services.	*not getting anywhere really. But I understand why mental health support is hard to get and this is unrelated to being LGBTQIA+[sic] anyway."*
The service was unaffordable	20 responses 25%	Respondents described cost as a significant barrier to accessing several services. These were primarily health services, but also included legal services.	*"Financial difficulties- I am unable to afford treatment (medical and psychological) due to the costs; I am unable to afford the medical bills and treatments required to get on top of my chronic health conditions nor access IVF"*

2.3.2 Comparison to 2022: service access

Fewer respondents feel they have access to the services they need in 2025 compared to 2022

In 2022, 69% of respondents reported that they had access to the services they needed. In 2025, 48% of respondents said they struggled to access at least one service, 22% said they had no trouble getting the support they needed, 22% said they did not need any services and 2% did not try to access any services because of poor past experiences.[35] Based on this data, fewer people had access to the services they needed in 2025 than 2022.

Challenges accessing health services was a common theme across both surveys

Healthcare services, mental health support and targeted and inclusive services for LGBTIQA+ people were the most common services respondents required but could not access in 2022. This was similar in the 2025 survey cohort. Over half of 2025 respondents who struggled to access any service reported difficulties accessing both general practitioners and mental health services.

[35] Remaining respondents chose not to answer.

Around one third (34%) of the cohort also struggled to access psychiatry services. For trans and gender diverse respondents who faced barriers accessing services, 30% struggled to access gender affirming care.

There were also common barriers to accessing healthcare between surveys including cost, wait times, and discrimination or lack of inclusion for LGBTIQA+ people.

2.4 Views on laws and policing

Survey questions relevant to this section

Respondents were asked 3 questions about laws and policing:

- What laws need to change to give LGBTIQA+ people in Canberra equal rights and protections?
- How well do you think the police understand the needs and experiences of LGBTIQA+ people?
- What could the police do to build better relationships with LGBTIQA+ communities?

2.4.1 Views on laws that need to change to give LGBTIQA+ people in Canberra equal rights and protections

Survey respondents were provided with 12 areas of law including a free text additional response and were asked to identify the need for law reform based on 3 response options: "Everything is fine", "Some things could be better" and "A lot needs to be fixed". Each listed area of law also had a response option "This does not apply to me". Four respondents provided additional areas of law they felt changes were required:

- *"Sexual harassment needs to be criminalised [sic] and HR should not be able to self investigate and hide it."*
- *"Social infertility needs [sic] to be recognised so lesbians can have the same access to ART without having economic issues."*
- *"Protection for young people who are queer"*
- *"There are still bigoted [sic] practices in the medical/science risks of how Australia's blood services work. Although the changes on 14 July are progress, there is still unscientific bigotry against trans donors."*

Between 50 and 70% of respondents said that a lot or some things need to be fixed in every area of law on which they were surveyed

The most common areas of law with the highest number of responses "A lot needs to be fixed" were:

- justice system fairness (45% of respondents)
- protection from hate crimes and vilification (43% of respondents)
- legal rights and protections for sex workers (42% of respondents)
- fair access to and treatment in healthcare (42% of respondents)
- support for victims of crime (38% of respondents).

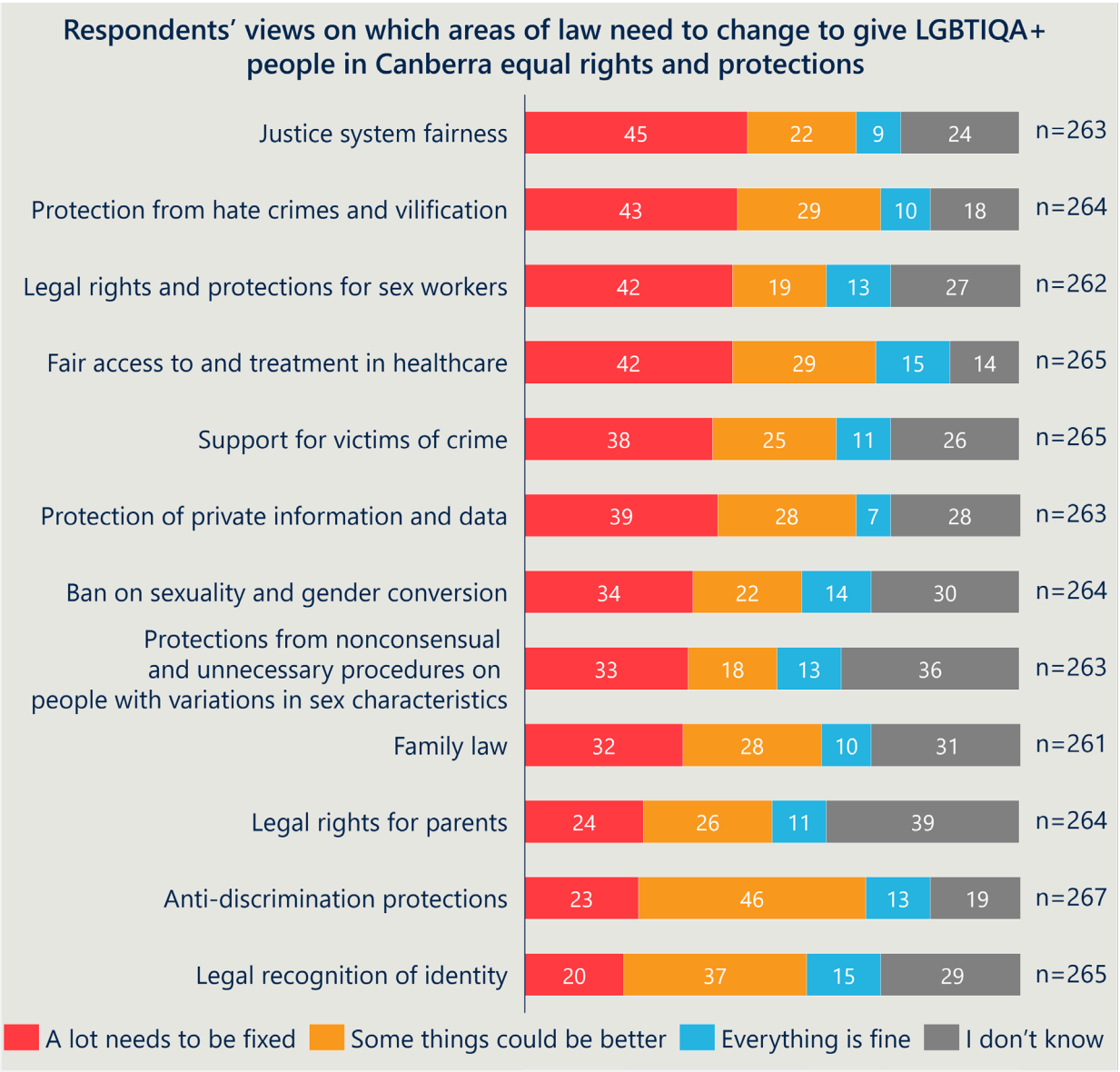
Table 17 includes the percentage of respondents who stated that a change was needed in each area of law surveyed, combining response options "some things could be better" and "a lot needs to be fixed".

Table 17 | Percentage of respondents who said changes to the laws were required

Area of law	Percentage of respondents who reported a lot or some things need to be fixed
Protection from hate crimes and vilification	72% (n=264)
Fair access to and treatment in healthcare	71% (n=265)
Anti-discrimination protections	69% (n=267)
Justice system fairness	67% (n=263)
Support for victims of crime	66% (n=265)
Protection of private information and data	63% (n=263)
Legal rights and protections for sex workers	61% (n=262)
Family law	60% (n=261)
Legal recognition of identity	57% (n=265)
Ban on sexuality and gender identity conversion practices	56% (n=264)
Protections from unnecessary and non-consensual medical interventions on people with variations in sex characteristics	51% (n=263)
Legal rights for parents	50% (n=264)

See Figure 9 for a breakdown of respondents' views on all areas of law.

Figure 9 | Respondents' views on areas of law that need to change to give LGBTIQA+ people equal rights and protections



Long description: The chart shows respondents' views on which areas of law need to change to give LGBTIQA+ people in Canberra equal rights and protections. Each bar represents a different area of law and is divided into four response options: "A lot needs to be fixed," "Some things could be better," "Everything is fine," and "I don't know." Percentages are shown for each response, along with the number of respondents for each item.

- **Justice system fairness** (n=263): 45% say a lot needs to be fixed, 22% say some things could be better, 9% say everything is fine, and 24% say they don't know.
- **Protection from hate crimes and vilification** (n=264): 43% say a lot needs to be fixed, 29% say some things could be better, 10% say everything is fine, and 18% say they don't know.
- **Legal rights and protections for sex workers** (n=262): 42% say a lot needs to be fixed, 19% say some things could be better, 13% say everything is fine, and 27% say they don't know.

- **Fair access to and treatment in healthcare** (n=265): 42% say a lot needs to be fixed, 29% say some things could be better, 15% say everything is fine, and 14% say they don't know.
- **Support for victims of crime** (n=265): 38% say a lot needs to be fixed, 25% say some things could be better, 11% say everything is fine, and 26% say they don't know.
- **Protection of private information and data** (n=263): 39% say a lot needs to be fixed, 28% say some things could be better, 7% say everything is fine, and 28% say they don't know.
- **Ban on sexuality and gender identity conversion practices** (n=264): 34% say a lot needs to be fixed, 22% say some things could be better, 14% say everything is fine, and 30% say they don't know.
- **Protections from non-consensual and unnecessary procedures on people with variations in sex characteristics** (n=263): 33% say a lot needs to be fixed, 18% say some things could be better, 13% say everything is fine, and 36% say they don't know.
- **Family law** (n=261): 32% say a lot needs to be fixed, 28% say some things could be better, 10% say everything is fine, and 31% say they don't know.
- **Legal rights for parents** (n=264): 24% say a lot needs to be fixed, 26% say some things could be better, 11% say everything is fine, and 39% say they don't know.
- **Anti-discrimination protections** (n=267): 23% say a lot needs to be fixed, 46% say some things could be better, 13% say everything is fine, and 19% say they don't know.
- **Legal recognition of identity (**n=265): 20% say a lot needs to be fixed, 37% say some things could be better, 15% say everything is fine, and 29% say they don't know.

Women and non-binary people were more likely than men to recommend that a lot needs to change in all areas of law surveyed

Non-binary people were the most likely to report that a lot needed to be fixed in 5 of the 12 legal areas, while women recorded the highest proportion in 6 of the 12 areas (highest proportion shown bolded in Table 18).

Table 18 | Demographic comparison - views on law reform, broken down by gender

Area of law	Proportion of men stating a lot needs to change (n=74)	Proportion of women stating a lot needs to change (n=135)	Proportion of non-binary people stating a lot needs to change (n=41)
Anti-discrimination	8%	26%	**39%**
Legal recognition of your identity	8%	22%	**35%**
Legal rights for parents	14%	**31%**	28%
Family law	15%	**40%**	36%

Support for victims of crime	22%	**47%**	45%
Ban on sexuality and gender conversion practices	27%	**40%**	32%
Protection from hate crimes and vilification	**28%**	**52%**	44%
Fair access to and treatment in healthcare	24%	47%	**54%**
Protection from unnecessary and non-consensual medical interventions on people with variations in sex characteristics treatments	19%	39%	39%
Protection of private information and data	24%	42%	**44%**
Legal rights and protections for sex workers	26%	44%	**55%**
Justice system fairness	23%	**55%**	48%

Lesbian respondents, women more generally, people aged 16-24 and trans and gender diverse respondents were more likely to feel a lot needs to be fixed in legal protections from hate crime and vilification

Compared to the broader survey population, people who selected lesbian as their sexual orientation, women (in general, i.e. regardless of sexual orientation or gender experience), those aged 16-24 and trans and gender diverse respondents were more likely to report that a lot needs to be fixed or some things could be better in relation to hate crime and vilification protections (Table 19).

> "I feel that even when the legal system is progressive, people's attitudes don't always evolve at the same pace. In many workplaces, there are policies that respect diverse sexualities and gender identities, but invisible discrimination still exists."
>
> *Survey respondent*

Table 19 | Demographic comparison – views on protections from hate crimes and vilification[36]

Sentiment	Proportion of lesbian respondents (n=76)	Proportion of women (n=135)	Proportion of respondents aged 16-24 years (n=29)	Proportion of trans and gender diverse respondents (n=83)	Whole survey population (n=271)
A lot needs to be fixed	51%	50%	48%	46%	44%
Some things could be better	21%	22%	24%	33%	21%
Everything is fine	11%	5%	14%	8%	9%

Previous migrant and/or refugee visa holders and non-binary people more strongly reported that a lot needs to be fixed in the area of anti-discrimination protections

Although the number of respondents who had previously held a migrant or refugee visa was small, these groups were most likely to respond that substantial improvements are needed in the legal area of anti-discrimination protections (see Table 20).

> "I think there should be more protection towards migrants who identify themselves as queer people. Those people are more likely to be vulnerable because of their migrant status as well as their status as LGBTQ plus people."
>
> *Survey respondent*

Table 20 | Demographic comparison - views on anti-discrimination protections

Sentiment	Proportion of non-binary respondents (n=41)	Proportion of respondents who are previous migrant or refugee visa holders (n=28)	Proportion of respondents who are current migrant, refugee or other visas holders (n=14)	Whole survey population (n=269)
A lot needs to be fixed	39%	36%	36%	22%

[36] Note there is overlap in the cohort of lesbian and women. Around half of the women who answered this question used the term lesbian to describe their sexual orientation and are thus captured in both cohorts (n=67/135). There were also 9 non-binary people who used the term lesbian to describe their sexuality.

Some things could be better	34%	43%	28%	46%
Everything is fine	9%	4%	7%	13%

A key theme in qualitative responses was that legal protections need to be stronger and enforced more consistently

Respondents were able to share additional detail about the legal changes they felt were needed. Responses to this question were very diverse. The four most common themes are presented in Table 21.

Table 21 | Framework analysis – elaboration on what legal changes are needed

Theme	Number and proportion of responses (n=67)	Description of theme	Example quote
Stronger enforcement of legal protections in practice and better access to justice	14 responses 21%	Respondents highlighted that even where laws exist, there are problems with follow-through, system navigation, and fairness. For example, incidents not being treated seriously or not understood, legal processes being slow or difficult to navigate and fear of reporting due to anticipated poor treatment. Respondents also spoke about the need for improving legal responses to victims/survivors of FDSV.	*"Potentially making improvements to anti-discrimination law, but just making sure the existing legislation is enforced would be an improvement. Many public areas and organisations don't follow the rules but get away with it because people don't report it (either because they don't know how, or they don't realise that the way they've been treated is illegal)."*
Better access to and competency in healthcare enacted through law	11 responses 16%	Respondents called for clinician training, safer care and affordable access to healthcare. This was highlighted for a range of health services, including reproductive health services, mental health	*"More training for health practitioners on treating clients who are transgender and gender non-conforming, particularly with regards to providing healthcare to people who are on HRT."*

		services and gender-affirming care.	
Better protections in public and community settings	7 responses 10%	Respondents highlighted harms occurring in everyday settings like sporting clubs, work and schools and wanted stronger safeguards against these behaviours. Respondents raised things like bullying and harassment protections in public spaces and more inclusive practices in workplaces and schools.	*"I think discrimination happens during my workplace especially related to work performance, and when I first join a new team, I can tell people doesn't trust my capability to do my job, which means that I need extra effort to prove myself in a new workplace even though my position level is as same as others."*
Removal of barriers for LGBTIQA+ families and relationships	6 responses 9%	Respondents raised multiple legal and policy barriers that affect LGBTIQA+ people's family pathways. Respondents raised things like recognising 'social infertility' to enable access to ART, making surrogacy and adoption more accessible and having better recognition for polyamorous and non-monogamous people.	*"Firstly, social infertility should be considered [sic] as any other infertility and the government should help us the same way as couple with health infertility."*

2.4.2 Views on policing

Only 5% of respondents say the police understand the needs and experiences of LGBTIQA+ people really well

Of all respondents who answered this question (n=272):

- 19% of respondents said the police don't understand the needs and experiences of LGBTIQA+ people at all
- 34% said the police don't understand much
- 42% said the police understand a bit
- 5% said the police understand really well.

> "There is a lot of suspicion and anger between the queer community and the police, especially for older generations. This anger needs to be properly heard and apologised for, not just saying that things are different now."
>
> *Survey respondent*

Given this distribution, overall sentiment towards police among the survey cohort is largely ambivalent or negative. This reflects longstanding challenges in the relationship between LGBTIQA+ people and police globally, shaped by a history of harassment, violence, and criminalisation that has caused deep and enduring harm to queer communities.[37,38] Although important reforms and periods of improved cooperation have occurred, more recent experiences of aggressive policing in queer spaces – particularly the heavy-handed use of drug enforcement tactics at community events such as Mardi Gras[39] – have reinforced concerns that past patterns continue in different forms.[40] These sentiments may underpin respondents' views in this survey.

Some groups were more likely to report the police lack understanding of LGBTIQA+ needs and experience

The proportion of respondents who reported the police don't understand the needs of LGBTIQA+ people much or at all were higher among the following groups:

- **Non-binary respondents**: 82% (n=32/39)
- **Trans and gender diverse respondents**: 80% (n=65/81)
- **16 to 24-year-olds**: 82% (n=23/28)
- **Aboriginal and Torres Strait Islander respondents**: 69% (n=9)

> "Police as they exist are not well suited to having good relations with marginalised communities. That's ok. I think we need to think about how much of policing can instead be done by community, health and social workers instead."
>
> *Survey respondent*

[37] Museum of Australian Democracy at Old Parliament House, "8 hard-won rights for LGBTI Australians", 2017, available via: 8 Hard-Won Rights For LGBTI Australians - MoAD Stories

[38] Steven Vogler, "LGBTQ people have a troubled relationship with police – new survey shows high rates of harassment, abuse and distrust", 2024, available via: LGBTQ people have a troubled relationship with police – new survey shows high rates of harassment, abuse and distrust

[39] SBS News, "Policing at Mardi Gras events 'intensive and aggressive", report finds, 2024, available via: Policing at Mardi Gras events 'intensive and aggressive', report finds | SBS News

[40] Kane Race, '"No cops at pride': The complex history of police at Mardi Gras", 2024, available via: 'No cops at pride': The complex history of police at Mardi Gras – Australian Academy of the Humanities

- **Previous refugee and migrant visa holders**: 68% (n=19/28)

There were 4 key themes in actions police could take to build better relationships with LGBTIQA+ people

Among respondents who said police do not understand the needs and experiences of LGBTIQA+ people much or at all (n=74), framework analysis identified 4 key themes in suggestions for how police could build better relationships with LGBTIQA+ communities (Table 22).

Table 22 | Framework analysis - what police could do to build better relationships with LGBTIQA+ communities

Theme	Number and proportion of responses (n=74)	Description of theme	Example quote
Community outreach and engagement	17 responses 23%	Respondents highlighted that the police need to do more genuine community outreach and engagement to understand the LGBTIQA+ community's needs. Some respondents highlighted that this must go beyond the police coming to events like SpringOUT where they may not be welcome and engaging in more formalised forums.	*"More community driven work. Move away from tick and flick self-driven online learning and towards actual interactions with people; genuine research on the issues affecting us."*
Training and education	17 responses 23%	Respondents highlighted that the police need to undertake more training and education regarding how to support LGBTIQA+ people and other marginalised groups. Some responses specified that this should be delivered by people with lived experience.	*"Learn the history of systematic abuse [towards] queer people and POC particularly Aboriginal and Torres Strait islander people by [the police] … Implement a proper training among all on these topics, the training should be facilitated by first national people and queer organisations."*
Apologise and take accountability for actions	16 responses 22%	Respondents highlighted the need for police to take accountability and apologise for wrongdoing and harms as a foundation for building trust	*"Police need to address the harm they have caused and make reparations for the decades of violence and*

		with LGBTIQA+ communities. Several respondents also emphasised that this accountability should extend to harm experienced by Aboriginal and Torres Strait Islander communities and people of colour at the hands of police.	*mistreatment of queer people in Australia."*
Employ more LGBTIQA+ staff or staff with experiences of marginalisation	8 responses 11%	These responses highlighted that employing more diverse staff in the police, including as dedicated LGBTIQA+ liaison officers, could build more trust among the community.	*"Employ a few dedicated LGBTIQA+ liaison officers to engage with the community as the community wants, not how the police want."*

2.5 Views on the ACT Government and the Office of LGBTIQA+ Affairs

Survey questions relevant to this section

Respondents were asked 4 questions about the ACT Government and the Office of LGBTIQA+ Affairs:

- What important things do you think the ACT Government is not doing yet to support you or other LGBTIQA+ people?
- Had you heard of the Office of LGBTIQA+ Affairs in the ACT Government before today?
- Do you know what the Office of LGBTIQA+ Affairs does?
- Is there anything else you would like to share about your experiences as an LGBTIQA+ person in Canberra? This can include any good things the ACT Government has done in the last 2-3 years, or anything else you think is important.

2.5.1 Potential future actions and positive feedback for the ACT Government

Respondents described a wide range of actions they felt the ACT Government could take to better support LGBTIQA+ people

Framework analysis of free text responses (n=74 responses) identified 6 key themes in actions respondents felt the ACT Government is not yet taking to support LGBTIQA+ people (Table 23).

Table 23 | Framework analysis - what the ACT Government could be doing to better support LGBTIQA+ communities

Theme	Number and proportion of responses (n=74)	Description of theme	Example quote
Improving access to health services	16 responses 22%	Respondents highlighted that LGBTIQA+ people need more support to access health services, in particular mental health services, gender-affirming care and assisted reproductive technology treatments.	*"I think the high cost of gender affirming procedures represents a real barrier for trans people and our participation in society and the ACT government should be doing what it can to fill the gap caused by the commonwealth government being slow to act on addressing it"*

Better supporting trans and gender diverse people specifically	11 responses 15%	These responses had a specific focus on the importance of improving visible supports for trans and gender diverse people across multiple dimensions including in workplaces, services and policy.	*"More trans and gender diverse support from leaders"*
Providing sustainable funding to LGBTIQA+ peer-led organisations	10 responses 14%	Respondents emphasised the need for more consistent, stable and long-term funding for LGBTIQA+ organisations including for peer-led support services, including with a focus on supporting those within LGBTIQA+ communities with intersectional experiences of marginalisation.	*"There needs to be stable, long-term funding of queer organisations like Meridian, AGA and Diversity ACT."*
Demonstrating a strong public commitment to LGBTIQA+ equality	9 responses 12%	Respondents highlighted the ACT government needed stronger visible leadership support for LGBTIQA+ issues across all levels of government and the public service.	*"Not responding to challenge or contain the nasty untrue defamatory and derogatory slurs in press and by public figures against the queer community"*
Strengthening anti-discrimination, hateful speech and hate crime protections	8 responses 11%	Respondents highlighted the importance of protecting LGBTIQA+ people from hateful speech, hate crimes and discrimination. Some responses called out specific settings like in public and in workplaces. One response (provided in the example column) reflected the growing politicisation of immigration issues globally and how this can filter	*"In recent times, anti-immigration protests and growing social tension have increased stress and fear among LGBTQIA+ [sic] people from migrant communities. Some worry about discrimination or even deportation, similar to what is happening in the U.S. This environment makes it harder for them to feel safe, express themselves openly, or seek help when needed."*

		down into local communities.	
Supporting LGBTIQA+ young people	6 responses 8%	Respondents highlighted the challenges LGBTIQA+ youth face, particularly in schools, and that more work is needed to make public, private including Catholic schools safer for LGBTIQA+ youth.	*"We need to make schools safer. I know so many people who have left public schools after significant violence. both of my children who are trans do not feel safe to be out at school and have to hide who they are for fear of violence."*

Around 40% of respondents who shared a final comment on the survey (n=64) expressed a positive sentiment about living in the ACT as a LGBTIQA+ person

Two themes were identified through framework analysis that received more than 5 responses to the final survey question, which invited respondents to provide additional comments about anything else they wanted to share (see Table 24). There is some overlap in the themes identified in in this question as in the Table 23 above, as respondents could share anything they wished.

"So many things [about living in the ACT] are amazing - I love the recognition of gender diverse people in policy - particularly when other states and countries are going the other way."
Survey respondent

Table 24 | Framework analysis - final survey comment

Theme	Number of responses and proportion (n=63)	Description	Example quote
Positive sentiment about living in the ACT or the ACT Government	25 responses 40%	These respondents highlighted their gratitude for the inclusive community in the ACT and the work of the Office of LGBTIQA+ Affairs. Three respondents specifically called out the *Variations in Sex Characteristics (Restricted Medical Treatment) Act 2023* as a positive thing the ACT Government has done.	*"The Variations in Sex Characteristics legislation was world-leading and an incredible historical moment for intersex Australians. I hope medical practitioners are complaint with this legislation."*

Need for more community spaces & events	9 responses 14%	These respondents emphasised that there needs to be more spaces and events for LGBTIQA+ communities to gather. This included queer friendly bars and venues, peer support services and consistent events throughout the year.	*"Spaces for community are lacking but culturally the community is quite inward looking. Maybe support for bars, venues, or community centre presences for community to go to would help"*

2.5.2 Awareness of the Office of LGBTIQA+ Affairs

Sixty-eight per cent of respondents (n=189/280) had heard of the Office before completing the survey and of these respondents 65% knew what the Office does

Broken down by sexual orientation, the following proportion of respondents had heard of the Office:

- 79% of respondents who are gay (n=73)
- 72% of respondents who are lesbian (n=83)
- 71% of respondents who are asexual (n=17)
- 69% of respondents who are queer (n=89)
- 65% of respondents who are pansexual (n=40)
- 56% of respondents who are bisexual (n=62).

The lower awareness among bisexual people may suggest a greater need to build awareness of the Office among this cohort.

Trans and gender diverse respondents were less likely to have heard of the Office than cisgender respondents, with only 29% having heard of the Office.

Lower awareness was also observed among:

- **People currently holding a visa (i.e. those without citizenships)**: 8 of 18 (around 45%) had heard of the Office.
- **Respondents aged 16-24:** 15 of 29 (52%) had heard of the Office.
- **People of colour:** 55% had heard of the Office (n=47), compared to 75% of non-POC respondents.

2.5.3 Comparison to 2022: awareness of the Office

Comparison of the 2022 and 2025 surveys suggests awareness of the Office has increased since 2022 (see Table 25). Similarly to 2022, respondents who were less likely to be aware of the Office in

2025 were from non-citizen backgrounds. This may suggest ongoing need for raising awareness among this population.

Table 25 | Awareness of the Office – comparison to 2022

	2022	2025
Proportion of people who were aware of the Office	47% (n=388)	68% (n=189/280)
Proportion of people who were aware of what the Office does	35% (of all respondents who were aware of the Office, n=388)	65% (of respondents who were aware of the Office, n=123/189)

2.6 Under 16s survey findings

> The under 16s survey received a small number of responses (between 6 and 9 as questions were optional), which constrained the ability to undertake meaningful quantitative analysis. Most of the non-demographic questions received only 6 responses. Because of the low response rate, and to respect anonymity with a small sample, this section focuses on presenting qualitative narrative findings only. The findings do not draw broader conclusions about young people's experiences or to compare results across demographic groups.

Experiences of safety and inclusion in different settings by young LGBTIQA+ people aged 12 to 15

- All respondents reported feeling either mostly or very safe, welcome, and included when interacting with teachers at school.
- Feelings of safety at home were mixed. Half of all respondents reported feeling a little unsafe, unwelcome, or excluded at home and the other half reported feeling very safe, welcome and included at home.
- Responses varied widely in relation to feelings of safety and inclusion when interacting with friends and classmates at school, in public settings, when receiving care, and in community settings.
- Most respondents indicated that they had felt unable to participate in something they enjoy on the basis of their LGBTIQA+ experience, disability, or gender.

Experiences of LGBTIQA+ visibility

- Most respondents agreed that they see LGBTIQA+ young people like themselves represented in their school or community.
- Responses were evenly split regarding whether respondents learn about LGBTIQA+ experiences at school.
- All respondents agreed that they have friends or peers they can talk to about being an LGBTIQA+ young person.

Experiences of service accessibility and awareness

- Many young people said they were unsure whether they could access gender-affirming healthcare, or felt it was not relevant to them at this time.
- Many young people did not know where to find community services for young LGBTIQA+ people.
- Many young people were unsure how to change their name or gender on official documents.
- Young people gave mixed responses about whether they knew where to get help if they were being mistreated because of who they are.
- Many young people had not heard of the Office before completing the survey.

Key areas respondents would like to see improve for LGBTIQA+ youth over the next 5 years

There were 4 qualitative responses outlining what respondents wanted to see improve for LGBTIQA+ youth. More education about LGBTIQA+ issues was a theme in three responses:

- *"Awareness, accessibility to services, reduced discrimination, advocacy, greater learning opportunities"*
- *"More LGBTQ [sic] education in school and a wider range of places to get gender affirming garments in the city*"
- *"More LGBTIQA+ friendly spaces (e.g. cafes etc), more taught about it in schools, allow being LGBTIQA+ to be just a human trait, rather than something different to the "norm"."*
- *"More action against homophobic people."*

Appendix A Survey questions

Note that this appendix includes only the questions asked in the Survey. The survey had an initial landing page describing the survey, contents and notes on confidentiality, and offering a content note and available supports to respondents. This content is excluded for the purposes of this report.

Over 16 year or age survey version

Section 1: Eligibility to complete the survey

1.1. Are you a person aged 16 years or older with diverse gender, sex, sexuality, relationship or bodily experiences (or LGBTIQA+) who lives in the ACT or travels to the ACT for work or study? *(compulsory, single choice, option 'no' triggers question 1.2)*

- ❑ Yes
- ❑ No

1.2. Are you a parent/guardian of a young person aged 12-15 who lives or studies in the ACT and who has a diverse gender, sex, sexuality, relationship or bodily experiences (or LGBTIQA+), and can you support your young person to complete this survey? *(compulsory, single choice, option 'yes' triggers Under 16s survey, option 'no' disqualifies from completing the survey)*

- ❑ Yes
- ❑ No

Section 2: About you

2.1. What is your age? *(compulsory, single choice, option 'under 16' disqualifies)*

- ❑ Under 16
- ❑ 16 – 24 years
- ❑ 25 - 39 years
- ❑ 40 – 59 years
- ❑ Over 60 years
- ❑ I do not want to answer

2.2. How do you describe your gender?
Gender refers to your current gender, which may be different to sex recorded on your birth certificate or other identity documents. *(compulsory, single choice, option 'I use a different term' permits free text response)*

- ❑ Woman
- ❑ Man
- ❑ Non-binary
- ❑ I use a different term
- ❑ I do not want to answer

2.3. Do you identify as a person with a trans or gender diverse identity or history? *(compulsory, single choice)*

- ❑ Yes
- ❑ No
- ❑ I do not know
- ❑ I do not want to answer

2.4. Were you born with a variation of sex characteristics (sometimes called 'intersex')? *(compulsory, single choice)*

- ❑ Yes
- ❑ No
- ❑ I do not know
- ❑ I do not want to answer

2.5. How do you describe your sexual orientation? *(compulsory, multiple choice, option 'I use a different term' permits free text response)*

- ❑ Lesbian
- ❑ Gay
- ❑ Bisexual
- ❑ Pansexual
- ❑ Queer
- ❑ Asexual
- ❑ Straight (heterosexual)
- ❑ I use a different term
- ❑ I do not want to answer

2.6. Are you of Aboriginal and/or Torres Strait Islander origin? *(compulsory, single choice)*

- ❑ Yes, Aboriginal
- ❑ Yes, Torres Strait Islander
- ❑ Yes, both Aboriginal and Torres Strait Islander
- ❑ No
- ❑ I do not want to answer

2.7. What is your cultural background? *(compulsory, free text)*

2.8. Do you have a religion? *(compulsory, single choice, option 'yes' permits free text)*

- ❑ Yes
- ❑ No
- ❑ I do not want to answer

2.9. What best describes your migration status? *(compulsory, single choice)*

- ❑ I am a citizen (born in Australia)
- ❑ I am a citizen (previously on a migrant or refugee visa)
- ❑ I am an international student
- ❑ I am on a migrant visa (including temporary)
- ❑ I am on a refugee visa (including temporary)
- ❑ I am on a bridging visa or another visa not mentioned here
- ❑ I do not want to answer

2.10. Are you a person with disability and/or chronic health condition?
A person with disability is impacted by a long-term condition that makes it harder to do everyday things or take part in society, because of barriers in the environment or attitudes from others. Chronic health condition means a health issue that lasts a long time, even if it changes over time. This question includes people living with HIV and those living with a mental health condition. *(compulsory, single choice)*

- ❑ Yes
- ❑ No
- ❑ I do not want to answer

Optional sub-section 2

We have some additional questions about children, pets, your housing situation and experiences of violence. Some of these questions may bring up some negative feelings for you. Do you want to answer these questions as well?
You can choose to answer only some of them and skip others. *(optional, single choice, option 'yes' triggers an optional subsection, option 'no' triggers section 3)*

- ❑ Yes
- ❑ No

2.11. Do you have any children or dependents? *(optional, single choice, option 'yes' asks to list a number and triggers a question 2.1.1.a)*

- ❑ No
- ❑ Yes

2.11.a Did you use any assisted reproductive technologies (ART) to conceive your child/ren or have a surrogacy arrangement? *(optional, multiple choice)*

- ❑ No
- ❑ Yes, surrogacy arrangement
- ❑ Yes, ART

2.12 If you have a pet, how much does it help your mental health?
We are asking this question to understand the importance of pet companionship. *(optional, single choice)*

- ❑ A lot
- ❑ A little bit
- ❑ Not at all
- ❑ I don't have a pet

2.13. What answer best describes who you live with? *(optional, single choice, option 'I live in a different situation permits free text response)*

- ❑ I live with my parents or siblings
- ❑ I live with my partner/s and child/ren
- ❑ I live with my child/ren, but no partner
- ❑ I live with roommates/housemates
- ❑ I live with my partner/s
- ❑ I live by myself
- ❑ I do not have a stable place to live
- ❑ I live in a different situation

2.14. Have you found it hard to keep or find a safe place to live?
In this question we are asking about experiences of homelessness, which can include sleeping on the streets, staying in a shelter, living in a car, or staying with friends or family because you have nowhere else to go. We also want to understand if you were treated unfairly as an LGBTIQA+ person when trying to find a place to live. *(optional, multiple choice)*

- ❑ Yes, I have been homeless in the last 12 months
- ❑ Yes, I have been homeless in the last 5 years
- ❑ Yes, I have had problems paying for housing or finding a safe place to live in the last 12 months
- ❑ Yes, I have had problems paying for housing or finding a safe place to live in the last 5 years

- ❑ Yes, I have experienced discrimination when trying to find a safe place to live in the last 12 months
- ❑ Yes, I have experienced discrimination when trying to find a safe place to live in the last 5 years
- ❑ No

2.15. Have you ever experienced any of the following types of gender-based violence?
(optional multiple choice, inapplicable response options could be left blank)

	From intimate partner(s)	From family member(s)	From a stranger(s)	From another person I know (e.g. housemate, colleague)
Emotional abuse (e.g., regularly manipulated, humiliated in front of others, gaslighted, bullied, blamed for abuse)				
Financial abuse (e.g., had money stolen or access controlled, prevented from working or studying, had debts accrued by them in your name)				
Forced marriage (e.g., being coerced into marriage)				
LGBTIQA-related abuse (e.g., shamed you about being LGBTIQA, threatened to 'out' you or your HIV status, withheld hormones or medication, blackmail)				
Nonconsensual medical treatments on intersex people				
Physical violence (incl. property damage, and violence against pets)				
Reproductive coercion (e.g., forced pregnancy, forced sterilisation, withdrawal of contraception)				
Sexual violence (incl. sexual harassment)				
Sexuality and gender identity conversion practices				
Spiritual abuse (e.g., forced to stop practicing your own religious or spiritual practices)				
Social isolation (e.g., made it difficult to see friends, family or community)				
Stalking (e.g., tracking and controlling your movements)				
Technology-facilitated abuse (e.g., sharing your intimate images without your consent, using technology to harass and abuse)				

Threats of self-harm or suicide (e.g., partner or family member threatened self-harm or suicide)				
Verbal abuse (e.g., regular criticism, insults or demeaning language)				
Other forms of violence				

Section 3: Your views on safety, laws, and services for LGBTIQA+ communities in Canberra

3.1. How safe do you feel as an LGBTIQA+ person *(compulsory across each response option)*

	1 – I do not feel safe at all	2 – I feel a little unsafe	3 – I'm not sure	4 – I feel mostly safe	5 – I feel very safe
In your workplace?					
In your school or education setting?					
In your home?					
In public settings (street, transport)?					
When accessing services?					
In community settings (sporting clubs, church etc.)?					

3.2. Have you been treated unfairly in Canberra or couldn't participate in something you enjoy because of who you are? *(optional, a 'yes' response option triggers question 3.2.a)*

	Yes, in the last month	Yes, in the last 12 months	No	This doesn't apply to me
LGBTIQA+ status broadly				
Sexuality				
Gender				
Variations in sex characteristics				
Age				
Race				
Ethnicity				
Migration status				
Disability				
Religion				
Socio-economic background				
Because of something else (please specify)				

3.2a. If yes, did you report these experiences and what were the outcomes? *(optional, free text)*

3.3. Do you think any laws need to change to give LGBTIQA+ people equal rights and protections in Canberra? *(optional, a response indicating a need for change triggers question 3.3.a)*

Legal area	Everything is fine	Some things could be better	A lot needs to be fixed	This doesn't apply to me
Anti-discrimination protections (including at work, school and in community settings)				
Legal recognition of your identity (including changing your name and/or gender on documents, birth and/or death certificates showing correct gender and family details)				
Legal rights for parents (including surrogacy arrangements and access to fertility treatments)				
Family law (including when experiencing domestic, family violence and/or sexual violence)				
Support for victims of crime				
Ban on sexuality and gender identity conversion practices				
Protection from hate crimes and vilification				
Fair access to and treatment in healthcare				
Protection from unnecessary and non-consensual medical interventions on people with variations in sex characteristics				
Protection of private information and data				
Legal rights and protections for sex workers				
Justice system fairness (including in prisons, courts and by police)				
Other legal issues not listed (please write here)				

3.3a Please tell us more about the changes needed. *(optional, free text)*

3.4. Do you think police understand the needs and experiences of LGBTIQA+ communities? *(optional, Likert Scale)*

They understand really well	They understand a bit	They don't understand much	They don't understand at all

3.5. What could the police do to build better relationships with LGBTIQA+ communities? *(optional, free text)*

3.6. In the past year, did you have trouble getting support from any of the services listed below? *(compulsory, multiple choice, optional free text, any chosen service triggers question 3.6.a)*

- ❑ Mental health services (non-crisis counselling)

- ❑ Psychiatrist
- ❑ Gender-affirming healthcare
- ❑ General practitioners (GPs)
- ❑ Abortion services
- ❑ Assisted reproductive technology treatments
- ❑ Sexual health services
- ❑ Domestic, family, and sexual violence (DFSV) services
- ❑ Housing and homelessness services
- ❑ Aboriginal Community-Controlled Organisations (ACCOs)
- ❑ Services for people of colour and/or those from migrant and refugee backgrounds
- ❑ Legal services
- ❑ LGBTIQA+ peer support services
- ❑ Disability services and/or disabled people's organisations (DPOs)
- ❑ NDIS services
- ❑ I did not need any services
- ❑ I did not try to access services because of poor past experiences
- ❑ I had no trouble getting the support I needed
- ❑ Other services (please specify)
- ❑ I do not want to answer

3.6.a For any service you marked above, can you give us one example of the troubles you had accessing the service. *(optional, free text)*

3.7. What important things do you think the ACT Government is not doing yet to support you or other LGBTIQA+ people? *(optional, free text)*

3.8. Had you heard of the Office of LGBTIQA+ Affairs in the ACT Government before today? *(optional, single choice, option 'yes' triggers question 3.8.a)*

- ❑ Yes
- ❑ No

3.8a. Do you know what the Office of LGBTIQA+ Affairs does? *(optional, single choice)*

- ❑ Yes
- ❑ No

3.9. In 2027, it will be 10 years since the results of the national marriage equality postal survey were announced, in which the ACT recorded the highest "Yes" vote in the country. How do you think the ACT Government should mark this anniversary? *(optional, multiple choice, additional free text)*

- ❑ Host a community celebration or event, similar to Yes!Fest
- ❑ Make a documentary or an exhibition about the postal vote
- ❑ Hold a reflection forum that considers progress made and areas for improvement
- ❑ Support community-led projects capturing celebrations, art, storytelling, or oral histories
- ❑ Establish a permanent public memorial or plaque recognising the ACT's leadership in the Yes vote and the resilience of the LGBTIQA+ communities
- ❑ Other (please specify)

3.10. Is there anything else you would like to share about your experiences as an LGBTIQA+ person in Canberra?
This can include any good things the ACT Government has done in the last 2–3 years, or anything else you think is important. *(optional, free text)*

Young people 12-15 years old survey version

Note that all questions in this version of the survey were optional.

Section 2: About you

2.1. Do you identify as an LGBTIQA+ young person? *(single choice, option 'no' disqualifies)*

- ❑ Yes
- ❑ No

2.2. How old are you? *(single choice)*

- ❑ 12-13
- ❑ 14-15

2.3 How do you describe your gender?

Gender refers to your current gender, which may be different to sex recorded on your birth certificate or other identity documents. *(single choice, free text response for 'I use a different term' option)*

- ❑ Man or boy
- ❑ Woman or girl
- ❑ Non-binary
- ❑ I use a different term (please specify)

2.4. Do you identify as having a trans or gender diverse identity or history? *(single choice)*

- ❑ Yes
- ❑ No
- ❑ I do not know

2.5. Were you born with a variation of sex characteristics (sometimes called 'intersex')? *(single choice)*

- ❑ Yes
- ❑ No
- ❑ I do not know

2.6. Are you of Aboriginal and/or Torres Strait Islander origin? *(single choice)*

- ❑ Yes, Aboriginal
- ❑ Yes, Torres Strait Islander
- ❑ Yes, both Aboriginal and Torres Strait Islander
- ❑ No

2.7. What is your cultural background? *(free text)*

2.8. Do you have a disability (including neurodiversity like autism), mental health condition and/or chronic health condition?

A person with a disability has a long-term condition that makes it harder to do everyday things or join in activities. This can be because of things around them (like buildings or transport) or how people treat them. A chronic health condition is a health issue that lasts a long time, even if it changes over time. This includes things like asthma, diabetes, or mental health conditions. *(single choice)*

- ❑ Yes
- ❑ No

2.9. If you have a pet, how much does it help your mental health?

We are asking this question to understand the importance of pet companionship. *(single choice)*

- ❑ A lot

- ❑ A little bit
- ❑ Not at all
- ❑ I don't have a pet

2.10. What answer best describes who you live with? *(single choice, with additional free text)*

- ❑ I live with my parents or siblings
- ❑ I live with an extended or chosen family
- ❑ I live by myself
- ❑ I do not have a stable place to live
- ❑ I live in a different situation (please specify)

Section 3: Your views on safety and services for young LGBTIQA+ people in Canberra

3.1. How safe and included do you feel as a young LGBTIQA+ person in these settings *(optional across each line)*

	I do not feel safe, welcome and included at all	I feel a little unsafe, unwelcome and excluded	I am not sure	I feel mostly safe, welcome and included	I feel very safe, welcome and included
At your school when interacting with your friends and classmates?					
At your school when interacting with your teachers?					
In your home?					
In public settings (street, transport)?					
When receiving care (like going to the doctor or seeing a support worker)?					
In community settings (sporting clubs, church etc.)?					

3.2. Have you ever felt like you couldn't participate in something you enjoy because of *(multiple choice, additional free text, any yes option triggers question 3.2.a)*:

- ❑ your LGBTIQA+ identity/experience
- ❑ your skin colour, ethnicity or culture
- ❑ your religion
- ❑ your disability
- ❑ something else (please specify)
- ❑ no

3.2a If yes, tell us about that. *(free text)*

3.3. How much do you agree with the following statements? *(optional across each line)*

Statement	I really do not agree	I do not agree	I do not know	I agree	I really agree	This is not about me
I see people like me (LGBTIQA+) represented in my school or in my community						
At school, we learn about different sexualities and respectful relationships, including LGBTIQA+ experiences						
I have friends or peers I can talk to about being LGBTIQA+						
I can access the gender-affirming healthcare I need easily						
I know where to access community services for young LGBTIQA+ people like me						
If I wanted to change my name or gender on a document like my birth certificate or passport, I know how to do that						
If someone is not treating me right, because of who I am, I know where to get help						

3.4. Had you heard of the Office of LGBTIQA+ Affairs in the ACT Government before today? *(single choice)*

- ❑ Yes
- ❑ No

The below question is for a parent/carer, to give them an opportunity to contribute their perspectives to this survey.

3.5. As a parent of an LGBTIQA+ young person what are the key things you would like to see improve in the next 5 years for LGBTIQA+ young people in Canberra? *(free text)*