'I just want to feel equal to others'



Hearing from trans and gender diverse children and young people in WA





Acknowledgement of Country

The Commissioner for Children and Young People proudly acknowledges and pays respects to the Traditional Custodians of the lands across Western Australia and acknowledges the Whadjuk people of the Noongar nation upon whose lands the Commissioner's office is located. She recognises the continuing connection to culture, lands, skies and waters, families and communities for all the Aboriginal peoples. The Commissioner and her team also pay their respects to all Elders, past, present and emerging leaders. The Commissioner and her team recognise the knowledge, insights and capabilities of Aboriginal people, and pay respect to Aboriginal ways of knowing, being and doing.

A note about language

For the purposes of this report, the term 'Aboriginal' encompasses Western Australia's diverse language groups and recognises Torres Strait Islanders who live in Western Australia. The use of the term 'Aboriginal' in this way is not intended to imply equivalence between Aboriginal and Torres Strait Islander cultures, although similarities do exist.

Disclaimer

This report has been prepared by the Commissioner for Children and Young People and is intended to provide the views of the children and young people who participated in the consultations and other projects of the Commissioner. Any errors of omission or commission are the responsibility of the Commissioner for Children and Young People.

A selection of quotations is included in this report on the relevant topics. The quotations are generally unedited to ensure the voice of the child or young person is authentically represented. Editing has only been done where necessary for clarity, understanding or for confidentiality. In this instance any changes or omissions have been marked with square brackets or an ellipsis (...).

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Warning: This report contains words directly spoken by trans and gender diverse children and young people, who are sharing their own experiences. Some parts of the report may be upsetting or cause strong emotions for some readers. If you need help, there is a list of resources on page 63 that can provide support and assistance.



Message from the Commissioner

All children and young people have the right to be loved, to belong, to feel safe and to be recognised and respected for who they are.

They have the right to be healthy and educated, to be able to access the services they need to thrive, to live a life free from discrimination and harassment, and to be able to have their views and opinions heard in the decisions that affect them.

These rights are supported by the United Nations Convention on the Rights of the Child. According to this convention, it is acknowledged that every child or young person, irrespective of their gender identity or other forms of diversity, should have equal access to these fundamental rights.

However, the recognition and enforcement of these rights for the trans and gender diverse community have been long delayed. This has caused significant problems and hardship for many individuals.

This report shares the stories and solutions of trans and gender diverse children and young people in Western Australia.

By doing so, I hope there can be better understanding of the issues they face. By documenting their experiences and the solutions they have identified, we can all become better allies and take the necessary action to uphold their rights.

As a caring society, we should go beyond tolerating and accepting gender diversity. We need to demonstrate to trans and gender diverse children and young people that we not only acknowledge them, but also wholeheartedly support, respect and celebrate them for who they are. They deserve nothing less from us.

To achieve this, it is essential that we genuinely listen to and take action based on what trans and gender diverse children and young people are telling us.

I express my gratitude and appreciation to each child and young individual who graciously shared their wisdom and insights. Despite the difficulties they described, these young individuals displayed remarkable resilience and introspection. They passionately advocated for their peers and harbour a strong sense of hope for improvement.

I would also like to thank the reference group, comprised of representatives from TransFolk of WA, the Freedom Centre, Perth Inner City Youth Service and the Youth Pride Network, whose invaluable support and co-facilitation has been instrumental in this important work.

Jacqueline McGowan-Jones Commissioner for Children and Young People WA

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Executive summary

This report presents the views and experiences of 20 trans and gender diverse children and young people from Western Australia. These individuals aged 11 to 18, expressed their views to the Commissioner in 2022. The report also includes relevant findings from the Commissioner's Speaking Out Survey 2021 (SOS21) for students who selected 'in another way' (rather than male or female), as well as data from the Girls' Wellbeing Survey 2022.

This project highlights the perspective of trans and gender diverse children and young people. It focuses on their experiences in accessing support for their emotional wellbeing and their sense of safety, belonging and support within their families, schools and their communities.

Based on these experiences, the Commissioner has identified a range of actions to be undertaken to improve the wellbeing, experiences and outcomes for trans and gender diverse children and young people.

Experiences accessing support for their emotional wellbeing

The trans and gender diverse children and young people that were consulted had varying knowledge about emotional wellbeing or mental health support services available. They faced challenges in accessing these services due to limited awareness of where to go, doubts about which services were trustworthy for their needs, service capacity issues and high costs. Negative experiences were reported when accessing certain services, including encounters with staff who had limited knowledge or experience working with trans and gender diverse individuals. An important concern raised was the lack of confidentiality and privacy, with fears and experiences of their gender identity being disclosed ('outed') to their parents and others without their consent.

SOS21 findings confirmed these challenges, indicating that students who selected 'in another way' were more likely than their peers to report instances where they wanted or needed to seek health support but were unable to do so.

The participants highlighted several factors that would improve access to services. These factors include the presence of inclusive practices and processes that cater to trans and gender diverse individuals, peer support models where support is provided by other

trans and gender diverse people, and the availability of more youth-oriented supports and personalised approaches.

Experiences of safety and belonging

Many participants expressed concerns about their safety in various settings, including public spaces, schools and even their own homes. They shared experiences of bullying, discrimination and fear of violence due to their gender identity. Accessing public toilets was a particular concern for their safety. Participants emphasised the need for better reporting systems for discrimination and abuse, with assurance that reports would be taken seriously and appropriate action would be taken.

The SOS21 findings reinforced these concerns about safety and belonging. Students who selected as 'in another way' were significantly more likely than their peers to feel a lack of belonging within their community, to only feel safe at home and in their local area 'sometimes or less', and to have experienced intentional physical harm or assault.

During the consultations, participants stressed the importance of increased representation and visibility of trans and gender diverse individuals in the community. They believed that this would foster greater understanding and awareness of diverse gender identities. Visibility was also seen as validation for their existence and identities, both for themselves and the wider community. Having access to safe spaces where they could meet and socialise with other trans and gender diverse children and young people was also considered vital for promoting safety and a sense of belonging.

Critical role of parents

Parents, along with guardians and carers, play a crucial role in supporting the wellbeing of trans and gender diverse children and young people. Their love, care and support form the foundation for the child's journey. Participants emphasised the significance of parents and parental figures in supporting and validating their child's gender identity, helping them to access services and gender-affirming support, and advocating for them with schools and other institutions.

However, some participants shared experiences of parental and family rejection, which had a detrimental impact on their mental health and overall wellbeing. In SOS21, students who selected 'in another way' were less likely to feel supported or listened to by their parents or other adults.

Many participants expressed the need for greater education and support for parents and carers. They emphasised the importance of equipping parents, carers and family members with the knowledge and sensitivity to appropriately support their trans or gender diverse child. Additionally, they highlighted the importance of providing parents and carers with a safe outlet to express their emotions and concerns without negatively impacting their child.

The role of schools

The participants shared the challenges they face in schools. These challenges include their gender identity not being acknowledged or taken seriously, a lack of inclusive practices and processes, insufficient education about gender diversity, bullying from peers and a lack of response from teachers and school staff regarding transphobic bullying.

These challenges were consistent with the findings from SOS21. Students who selected as 'in another way' were more likely to experience bullying, feel a lack of belonging at school and have difficulty getting along with their classmates.

The participants believed that schools could play a much larger role in supporting trans and gender diverse students. They suggested that schools should demonstrate stronger leadership and commitment, implement more

Executive summary

inclusive policies and curriculum content, and provide peer connections and other forms of support. Since trans and gender diverse students may not receive support from their families or communities, the availability of support at the school level was seen as particularly important.

Regional challenges

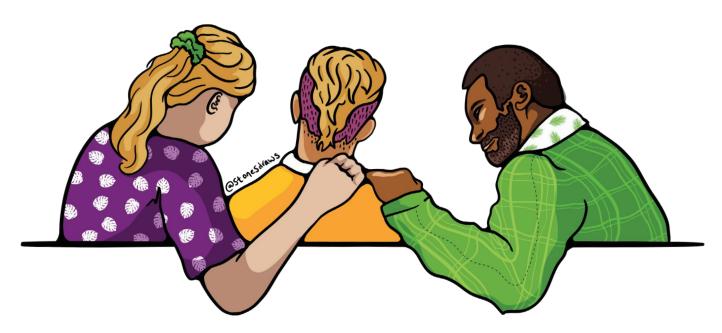
Trans and gender diverse young people living in regional areas faced specific challenges, as highlighted in the consultations. These challenges included limited availability of services and face-to-face support, difficulties maintaining privacy and anonymity in small towns, and a lack of awareness regarding state-based supports for young people in regional areas.

They emphasised the need to address the isolation experienced by many trans and gender diverse children and young people in these regions. They called for the expansion of local support services to better meet the needs of individuals in regional areas.

Discussion and key areas for action

Based on the experiences and feedback from trans and gender diverse children and young people, as well as the findings from our previous work, it is clear that action is necessary to protect the rights of trans and gender diverse children and young people and provide them with the necessary support and opportunities to thrive. Key areas for action include:

- Improving recognition and support of trans and gender diverse children and young people.
- Reducing discrimination and harassment of trans and gender diverse children and young people.
- Improving service provision and access for trans and gender diverse children and young people.
- Strengthening the capacity of parents and the community to support trans and gender diverse children and young people.
- Strengthening the education sectors support and inclusion of trans and gender diverse students.



I just want to feel equal to others

Introduction 7

Introduction

The Commissioner for Children and Young People works closely with children and young people, families, communities and government to enhance the wellbeing of individuals under 18 years old. This involves conducting consultations, projects, research, and publishing reports and resources to positively influence legislation, policies, services and attitudes impacting young people. Throughout this work, the Commissioner upholds the United Nations Convention on the Rights of the Child and prioritises the needs of vulnerable or disadvantaged groups.

One vital responsibility of the Commissioner is to directly listen to children and young people, ensuring their participation in decisions that affects their lives.

Trans and gender diverse children and young people

People may use various terms and definitions to describe their gender identity. Gender identity refers to how someone defines their internal sense of being male, female or another gender. When somebody's gender identity doesn't align with the sex they were assigned at birth, they may identify as transgender, trans, a trans man or trans woman, non-binary, gender diverse or another term that reflects their gender identity. If their gender identity matches the sex assigned at birth (male or female), they are considered 'cisgender'.

It is important to understand that gender identity is separate from sexuality. Sexuality, or sexual orientation, refers to a person's romantic, emotional or physical attraction to others. It can include being heterosexual, homosexual, bisexual, pansexual, asexual or identifying with another sexual identity.

Determining the exact number of trans and gender diverse individuals in Australia is challenging due to limited data collection at a state or national level. However, the existence of trans and gender diverse people can be traced back to early human civilisations. Many cultures and societies have recognised diverse gender identities, such as Aboriginal and Torres Strait Islander Sistergirls and Brotherboys. Children and young people often become aware of their gender identity at a young age, which becomes more solidified during puberty and adolescence.²³

Despite increasing acknowledgement and awareness, trans and gender diverse people in Australia still face various challenges that affect their wellbeing and rights. Bullying, rejection from peers and family, discrimination, difficulties in education and accessing services, and housing instability and homelessness are commonly reported by trans and diverse individuals, including children and young people. These experiences contribute to 'minority stress', which refers to the additional stress faced by marginalised groups due to discrimination, stigma and prejudice. This, in turn, negatively impacts their mental health and wellbeing.

The mental health outcomes for trans and gender diverse children and young people are troubling. They face significantly higher rates of mental health disorders, psychological distress, self-harm and suicidal thoughts or attempts compared to their cisgender peers.¹¹

Terminology

This report uses various terms to capture the diversity of gender identities based on the information collected by the Commissioner's office. A person's gender identity is unique to them, and the language they use to describe it may change over time as they better understand themselves.

In this report, the term 'trans and gender diverse' is used to be inclusive of all children and young people who are transgender or have a gender diverse identity. This includes individuals who identify as trans, non-binary, genderfluid, genderqueer, agender or who are questioning their gender.

All quotes in this report reflect the voices of children and young people who identify as trans or gender diverse. When specific gender identities are known, they are used accordingly. Readers are encouraged to use they/them pronouns when referring to all participants in the Commissioner's projects mentioned in this report.

For participants in the consultations, their quotes are provided without specifying their gender identity since it was not requested. Students who selected 'in another way' in SOS21 will be referred to as such, following the language suggested by the reference group that advised the Commissioner's office during this project.

In the Girls' Wellbeing Survey, gender identities are included if participants described them in their responses.

For further clarification of terminology, a glossary is provided at page 60 of this document.

Project overview

This project aimed to gather insights from trans and gender diverse children and young people in Western Australia. Their perspectives were sought to ensure that the Commissioner's advocacy about the rights, needs and experiences of trans and gender diverse individuals remains informed.

This project involved:

- Direct consultation with trans and gender diverse children and young people.
- Reviewing quantitative and qualitative data from the Commissioner's other projects, such as the Speaking Out Survey and responses from the Girls' Wellbeing Survey, to provide additional context.
- Consulting with a reference group consisting of trans and gender diverse individuals working in professional and peer support roles within the community.

Other related work undertaken by this office

The Speaking Out Survey 2021 (SOS21) collected the opinions of 16,532 children and young people in Western Australia, from Year 4 to 12, regarding their wellbeing. When asked to describe themselves as a girl, a boy or 'in another way', approximately around 3 per cent of students selected 'in another way', representing just over 500 children and young people.

An initial analysis of the SOS21 data revealed that students who selected 'in another way' experienced significantly lower wellbeing in various areas compared to their peers who identified with binary gender options (that is, boy or girl). They also reported comparatively worse wellbeing than some other vulnerable groups.

It should be noted that students who selected 'in another way' in SOS21 may have selected as a different gender (such as non-binary, gender diverse or genderfluid). However, the survey question did not explicitly capture their diverse gender identity. It is important to acknowledge that these students may not necessarily represent individuals with a binary transgender identity who would likely have chosen the male or female options based on their biological sex or binary trans identity. This understanding was confirmed by the reference group and consultation participants during the early stages of the project.

The SOS21 survey results therefore cannot provide definitive conclusions about the experiences of trans and gender diverse children and young people. However, the survey did show significant differences for students who selected 'in another way' compared to their peers in areas consistent with other research on safety, belonging, school experiences and access to services for trans and gender diverse children and young people. To gain a better understanding of these findings, the Commissioner decided to conduct further research by directly engaging trans and gender diverse children and young people. This additional work aims to provide context to the survey results.

In 2022, the Commissioner also conducted a Girls' Wellbeing Survey to explore girls' wellbeing and gender inequality. Out of the 938 respondents aged between 12 and 24 years, 104 (6.6%) selected 'in another way' to describe their gender. Of the participants who selected 'male' or 'female', 74 indicated they did not always identify themselves in that way, potentially including individuals who are trans, and 36 participants preferred not to say. Those who selected 'in another way' had the opportunity to describe their gender identity in an open text box, resulting in a variety of responses, including genderfluid, nonbinary, gender non-conforming, genderqueer, demiboy, demigirl/female, transmasculine, feminine-neutral, gender questioning and gender diverse.

This project also builds upon previous work by the Commissioner's office advocating for the needs and experiences of lesbian, gay, bisexual, trans, queer/questioning, intersex, agender/asexual and Sistergirl and Brotherboy (LGBTQIA+SB) children and young people, including trans and gender diverse children and young people. Past efforts included the LGBTQIA+SB Advisory Committees in 2018, the release of an issues paper, and various policy and legislative submissions concerning LGBTQIA+SB children and young people.

Methodology

Reference group

The Commissioner formed a reference group consisting of individuals with lived or professional experience working with trans and gender diverse young people. This group included adult representatives from the Youth Pride Network, TransFolk of WA, the Freedom Centre and Perth Inner City Youth Service.

The reference group contributed in the following ways:

- Reviewed and provided context on key findings from the SOS21 survey regarding students who selected 'in another way'.
- Advised on the best approaches to consulting with trans and gender diverse children and young people, emphasising the importance of co-facilitators with lived experience of being trans or gender diverse.
- Provided feedback on the consultation questions.
- Promoted the consultation sessions and managed participant recruitment.
- Co-facilitated the consultation sessions.
- Offered feedback on significant consultation themes and areas for focus for the report.
- Advised the Commissioner on reporting approaches for SOS21 data in the report and the selection of key data.
- Provided input on other important research to be included in the final report.
- Reviewed and provided feedback on draft reports.

The Commissioner also sought the guidance and input of a young person who provided advice and feedback on the report's content, as well as a youth-friendly version of the report. Their valuable feedback helped enhance the report's relevance and accessibility for young readers.

Ethical considerations

In consultation with the reference group, the Commissioner's team developed a set of questions based on important concerns regarding the wellbeing of students who selected 'in another way' in SOS21. These questions were designed to be broad, focused on finding solutions, and framed in a way that respected participants' privacy and did not require them to share sensitive personal information. The questions included:

- What does 'in another way' mean to you?
- What different types of professionals and services do trans and gender diverse young people access for emotional wellbeing and mental health?
- How are these services helpful or unhelpful for trans and gender diverse young people?
- What do you need to feel accepted/ welcomed and like you belong in your community as a trans or gender diverse young person?
- What do you need to feel safe as a trans or gender diverse young person in your local area or at home?

On the advice of the reference group, the consultation sessions were promoted and cofacilitated by trans and gender diverse people from the organisations within the reference group. These organisations were trusted within the trans and gender diverse community. Promotion of the consultations took place in October 2022 through various channels such as direct emails and social media posts, led by the co-facilitating organisations and reference group members.

To be eligible for participation, individuals had to be between the ages of 11 and 18 and selfidentify as trans or gender diverse. Information sheets and consent forms were provided to potential participants and their parents or carers. Consent was obtained before the consultations took place. In certain cases, the Commissioner's team waived the requirement for parental or guardian consent for young people aged 16 and older, acknowledging that some individuals may not be able to obtain consent. In such cases, a nominated support adult was designated to ensure the young person had appropriate support if needed.

The consultation project and its associated questions were subjected to an internal ethics review process conducted within the Commissioner's office. In addition, an external review was carried out by Dr Yael Perry, Co-Head, Youth Mental Health and Senior Research Fellow at the Telethon Kids Institute.

Overview of the consultation sessions and participants

Twenty trans and gender diverse children and young people aged 11 to 18 took part in the consultations. The sessions were conducted in five different settings: three face-to-face focus groups, one online focus group and one individual interview with a participant who had previously attended a focus group (this person has only been counted once). Four participants lived in regional Western Australia, specifically in the Peel, Great Southern and Mid West regions.

Three sessions were facilitated by TransFolk of WA, one by Perth Inner City Youth Service and one by the Freedom Centre.

During the consultations, all participants identified as trans and gender diverse, but they were not required to provide specific details about their gender identity. Instead, they were asked to provide their preferred pronouns. Participants were given the option to use a question and answer sheet as an alternative way to provide feedback, and some respondents chose to answer an

optional question about their gender identity. Out of the nine participants who completed the question and answer sheets, a variety of gender identities were described, including genderfluid male non-binary, genderfaun, trans male, feel like gender leans towards male but changes sometimes, transfemme, trans masculine/transmasc, transgender X FTM, he/they, transmasc/genderfaun, transmasculine he/they, he/him.

The participants in the consultations do not represent the full diversity of trans and gender diverse children and young people. For instance, there were no participants who identified explicitly as Aboriginal or culturally and linguistically diverse (CaLD), and only a small number of participants were from regional areas. It's important to note that as the participants were recruited through support organisations, it is more likely that they had access to supportive parents or carers and trans services.

The information presented in this report does not aim to capture the experiences of all trans and gender diverse children and young people. It solely reflects the perspectives and experiences of the children and young people who participated in the consultations or other projects.

Key themes

The report focuses on key themes identified during the consultations, which are categorised according to the Commissioner's Indicators of Wellbeing.^a These indicators are aligned with the United Nations Convention on the Rights of the Child (structured across the life course of children and young people) and are grouped into three domains.

Healthy and connected

This domain emphasises that physical and mental health, engaging in healthy behaviours and fostering connections to culture and community are critical for the wellbeing of children and young people.

Safe and supported

This domain recognises the significance of feeling safe and supported, which includes positive family relationships, connections with supportive adults, and personal and community safety.

Learning and participating

This domain acknowledges that children and young people's learning experiences and the level of autonomy they have during childhood and adolescence are critical determinants of their lifetime wellbeing.

^a Commissioner for Children and Young People, Indicators of Wellbeing, https://www.ccyp.wa.gov.au/our-work/indicators-of-wellbeing/

The report also includes sections highlighting specific challenges faced by trans and gender diverse children and young people in regional Western Australia, as well as feedback provided by consultation participants regarding students who selected 'in another way' in the SOS21 survey.



Hearing from trans and gender diverse children and young people in WA

Healthy and connected

The wellbeing of children and young people relies on being connected to their community, having access to support and maintaining positive physical and mental health. All children and young people have the right to be supported in their physical and mental health, as well as to feel connected and respected within their community.

'I just want to feel equal to others and not feel ... isolated because that's how it can feel at times.' (17 year-old)

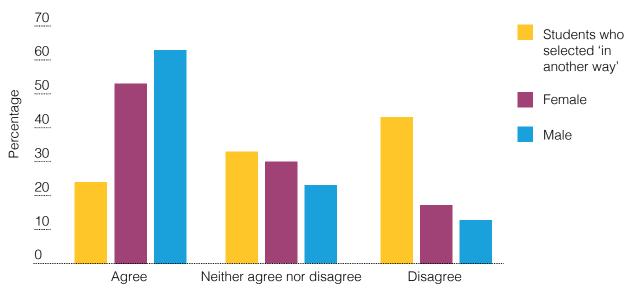
Connection to community

Sense of belonging within the community

Being connected to the community is important for children and young people as it gives them a sense of identity and belonging and positively impacts their health and wellbeing.

The data from SOS21 highlights gaps between students who selected 'in another way' and their peers in their sense of belonging in their community. Secondary students who selected 'in another way' in SOS21 were significantly more likely to not feel like they belong in their community, with only one-quarter of students agreeing they feel like they belong in their community (Figure 1).

Figure 1: Proportion of Year 12 students reporting that they feel like they belong in their community



The SOS21 data may not fully represent trans and gender diverse children and young people, but it aligns with the experiences shared by the participants in the consultations.

They emphasised the need for an inclusive, supportive and fair community that would enhance their sense of wellbeing.

'Proof that I am supported, I need evidence this is learnt, I don't feel accepted/welcomed because I haven't been accepted or treated with kindness or respect.' (Anonymous)

'[I want to feel] ... recognised, and I know some people are going to be like "It's just a fad they'll grow out of it", but to belong I feel like we just need education and mutual respect to each other.'

(17 year-old)

During the consultations, young people expressed their concerns about the societal belief in a binary view of gender, where people are categorised as either male or female. They discussed the expectations associated with specific gender roles and how this negatively affects trans and gender diverse children and young people.

'Society kind of told me, you were born this way so you have to be a girl you have to be these things.'

(16 year-old)

'I came out as non-binary ... and it was really uncomfortable because you don't realise how binary gendered society is until you don't fit into it well.'

(16 year-old)

'Gender neutral terms are more validating and like I'm a person, and not subjected to a gender role and the expectations. More just being human, instead of an expectation.' (18 year-old)

This was also highlighted by some of the young people who took part in the Girls' Wellbeing Survey.

'[Something that influences how you feel about yourself?] Society's expectations – feeling constricted by gender norms.'

(16 year-old, genderqueer)

'I'm a non-binary, pansexual 15 yearold. The expectation that I'll grow up and suddenly want a husband, children and no job disgusts me. These assumptions are completely based on my birth sex and not at all on who I am as a person, and I'm fed up with it.'

(15 year-old, non-binary)

'Girls are expected to look a certain way and that brings on a ton of mental and physical health issues, like eating disorders, depression, anxiety and general body dysmorphia ... We are expected to look soft, and pretty, and skinny, with a certain figure and way of speaking.'

(15 year-old, demigirl)

'[You're] worried about your appearance because other people bullied you about your appearance.' (13 year-old)

Young people also spoke about the pressure of 'passing' – that is, being perceived as cisgender rather than trans¹², or more masculine or feminine. This included worrying about how they looked and a fear of being misgendered.

'I was like, ah. I have to be this. I tried really hard to fit myself into that box.' (18 year-old)

'Pressure of passing, especially when you are young and early in transition.' (Anonymous)

'Fear of being misgendered, especially early in transitions.' (Anonymous)

'All I do is stay home and not go out, was too anxious to even go out in the slightest.'

(18 year-old)

'Up until last week I had long hair like down to my waist, and I was dressing in a very masculine way ... people are definitely looking at me because I am dressing like I am a dude but my hair makes it look like I am a girl ... I was really happy when I got my hair cut, I feel like appearance really matters to me.'

(13 year-old)

The young people shared how their physical appearance affected how others treated them. They mentioned being visibly trans often led to receiving negative attention. This had a direct impact on their sense of belonging within their peer groups and community.

'I have not had a single thing (bullying) from any students ... because I generally present more masculine ... because I don't look trans, I didn't get that same slander.' (17 year-old)

'I would pick and try to present as what is it that I am going to let people perceive me as, am I going to be more alternative instead ... so it distracts away from the fact that I am trans ... so you get pegged as the weird kid for liking that, instead of the weird kid for being trans.' (18 year-old)

One participant in the Girls' Wellbeing Survey made a similar comment.

'I've found it easier to let people assume that I'm female, as I experience less discrimination and less condescension. I hope that as people become more aware, I can be truly me and express my gender as I wish and be addressed with the right name and pronouns instead of hiding to make life easier.'

(21 year-old, non-binary/gender non-conforming)

Another mentioned the importance of recognising that all young people experience a period of self-discovery and identity expression.

'... through the ages of 13 and [your] 20s ... the main crisis in that time is identity and who you are and where you fit in society. What labels and groups do you want to be a part of, and being allowed to just try things on to see if they fit ... I think that should be encouraged and it's really important - young people are just trying to figure out who they are and where they fit in the world.'

(18 year-old)

Children and young people emphasised the significance of having positive role models, representation and visibility of trans and gender diverse people. This was crucial for their own self-understanding, feeling supported by the community, and having inspiring examples of others who have successfully navigated life as trans individuals.

'I think back to the times ... and occasions which helped me the most with my journey with being trans, and the times that were the most helpful ... were hearing some support and seeing myself somewhere.'

(18 year-old)

'Being able to see yourself is really important - nothing quite helps in the way as being seen.'

(18 year-old)

'It is really exciting and encouraging to see other people who are trans who are further along in their journey than you are ... just having representation and seeing someone who has been through what they have gone through but have come out the other side.'

(16 year-old)

'If I had learnt about what it was to be trans and learnt that it was okay at like a younger age ... that would have, I think, helped me to come to terms with my identity.' (16 year-old)

'If you don't see yourself represented in the media or the people around you it can be really hard.'

(18 year-old)

Increased representation and public support for trans and gender diverse people in the community was seen as crucial for enhancing community understanding, attitudes, respect and sensitivity towards their lived experiences.

'I remember when there was the American election, Joe Biden ... he was like, "I am going to make it a better place for these people and these people and gay people and trans people", that is such a big deal. Just to have I guess someone of authority acknowledge that we exist and we are people, and we are not an enemy or a prisoner of society.'

(16 year-old)

'We need ... the queer celebration days to be more widespread and more louder.'

(17 year-old)

'I think it would be nice if just like the general public had a bit more education on what it is to be trans, because like a lack of education in that field, is like one of the biggest things, that can contribute to the negative experiences.'

(16 year-old)

'All the time when I say to people that I am trans they ask like "Do you have a dick?" and I am like, "That is the first question you ask?"... They need to be more respectful ... you wouldn't ask a cisperson that.'

(16 year-old)

'Being treated like a human being and not being deadnamed or misgendered.'

(Anonymous)

In the Girls' Wellbeing Survey, some participants shared their experiences of how gender diverse children and young people are treated, along with their concerns about their future treatment.

'Many gender diverse kids aren't treated as I think they should be, with many people avoiding using correct pronouns, going out of their way to be rude and disrespectful and being outright obnoxious when it comes to sensitive topics regarding someone's previous identity.'

(15 year-old, demigirl)

'I do feel that as a gender diverse person, things will be difficult in getting jobs and staying safe on public transportation.'

(13 year-old, demigirl)

'I'm non-binary and I have been misgendered, judged and denied opportunities by bosses, medical practitioners, lecturers etc. because of my gender. I also feel that I am taken less seriously, as someone who appears to be female, and am often talked over or dismissed. I am fearful of the impact my gender will have on my career in the future, and whether I will have to hide it in order to get anywhere in life.'

(19 year-old, non-binary)

'There is a huge difference between the equality of people within the binary and those outside. Non-binary and other gender non conforming people are ignored and berated for being who they are.'

(16 year-old, genderfluid/assigned female at birth)

'Being non gender conforming will impact my future, no matter what I pursue. Even if I am not open about my identity, it will still impact my personal life.'

(15 year-old, genderfluid)

Having members of the public use genderneutral and inclusive language helped young people to feel they belonged and were accepted in the community.

'People that I didn't know came up to me and they asked me for my pronouns and they gave me their pronouns ... it was so nice to be validated in that way.'

(16 year-old)

(16 year-old)

'People don't understand how important it is to normalise asking and giving pronouns, even if you are cis ... it means if everyone even cis people do it, then it means you can say your pronouns without outing yourself as trans. I want to tell people that my pronouns are he him, I don't want to be like hey by the way I am trans, and I don't want to necessarily disclose that information.'

'If you meet someone and they haven't disclosed their pronouns or someone else hasn't told you their pronouns you either ask for their pronouns or you use they/they until you do, a blanket rule, because assuming is not a great idea at all.' (16 year-old)

Several participants expressed the challenges they faced in obtaining formal and legal recognition of their gender identify, which included changing their name and other official documents.

'Changing your name, like legally changing your name when you are under 18 and you need both parents' signatures to change it and there's always one parent that's super transphobic.'

(13 year-old)

'So you have to all your ID before changing your name, so that means you have to pay for a photo ID and all that stuff, and then after you change your name you've got to get that done all again because you have legally changed your name, so you got to pay like \$40 for a photo ID, and then \$40 again after and then a new birth certificate and all that, and then \$200 to actually change your name.'

(18 year-old)

Accessing support for emotional wellbeing and mental health

Access to mental health and emotional wellbeing services is crucial, especially considering the findings of the SOS21 study. The study revealed that over half (56.8%) of Year 7 to Year 12 students who selected as 'in another way' reported low life satisfaction (Figure 2), which was significantly worse than their peers. Although this data does not represent all trans and gender diverse children and young people, it raises concerns about the emotional wellbeing of this group of students.

During the consultations, the children and young people did not specifically discuss their own mental health and wellbeing. However, they highlighted various challenges that can adversely affect the emotional wellbeing of trans and gender diverse children and young people, including:

- Bullying.
- Harassment and discrimination experiences.
- Pressure to conform to societal expectations (to 'pass').
- Negative self-image and self-perception.
- Feelings of not belonging or fitting in.
- Difficulties in relationships with friends and family.
- General identity crises facing children and young people.

When asked about the support they sought for their mental health and emotional wellbeing, the participants reported a range of sources of support, including:

- General practitioners and doctors.
- Medical specialists (paediatricians, psychiatrists, endocrinologists, occupational therapists and pharmacists).
- Counselling and therapy (psychologists and counsellors).

- Mental health service providers (Child and Adolescent Mental Health Service (CAMHS), headspace, Kids Helpline, Mental Health Emergency Response Line and psychiatric facilities).
- Friends.
- Online support services.
- Parents and family.
- School-based supports (school psychologists or counsellors, nurses and chaplains).
- Trans and gender diverse or queer specific services (Gender Diversity Service, TransFolk of WA, Perth Inner City Youth Service, the Freedom Centre, Gender Pathways at Youth Link, QLife and WAAC counselling).
- Online forums (Discord, the Trevor Project and online counselling).
- Personal strategies to improve their mental health and wellbeing.

Service barriers and unhelpful service features

The participants mentioned several barriers they encountered when seeking help for their emotional wellbeing and mental health, as well as aspects of services they found unhelpful. These barriers included a lack of awareness about available services, limited service availability, issues with service capacity and high costs associated with accessing support.

'[Unhelpful features of a service are] ... staff have a lack of education, long waiting lists, expensive, inaccessible to minors living with unsupportive guardians.'

(Anonymous)

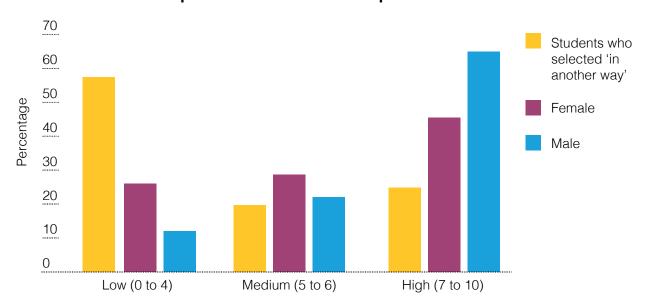


Figure 2: Proportion of Year 7 to 12 students rating their life satisfaction, where '0' is the worst possible and '10' the best possible life

Many of the children and young people were not aware of the services and supports available to help them with their emotional wellbeing and mental health, and they felt that these resources were not effectively promoted.

Despite being connected to the co-facilitating organisations in the trans and gender diverse community, many participants lacked awareness of other trans and gender diverse services and supports specifically tailored for children and young people.

'I got referred to the Perth gender clinic ... ended up being like kind of too late for me, for them to actually really do much for me like I didn't even know that existed until I was like 15, so that like wasn't great ... not knowing about ... there's no place for both information, that kind of has all the services and how to access them.'

(16 year-old)

Participants also said that when they did come across information about services, they felt overwhelmed when trying to determine which ones would be beneficial for them. They also had concerns about identifying trustworthy organisations that would be understanding and responsive to their specific needs as a trans or gender diverse person.

'I think making services more known and easier to find, because a lot of the time, to find good services that are available, if they are available, you have to really, really dig through them ... It's a bit hard to read and find and comprehend. It's too much information, and none of its useful to me.'

(18 year-old)

'A way to tell if they're supportive or not would be good.'

(13 year-old)

Healthy and connected

One young person shared that their regional GP lacked understanding about how to complete a mental health plan, creating a barrier that hindered them from seeking additional support.

'... I went to my GP to get a mental health plan and then she didn't even know how to fill it out ... she asked me how to fill out this mental health plan. I was like, I don't know. And then I got that mental health plan, and then trying to see someone for it and online. It took forever.'

(17 year-old)

Some participants mentioned that services had limited capacity to offer support, resulting in long waitlists and young people only receiving assistance in emergency situations.

'In [my regional town] a lot of the psychologists are overbooked we have way too many people and we have to wait months just to see one, it's just like really, really packed.'
(13 year-old)

'[Unhelpful things are] Waiting lists ... not getting help unless it's an emergency.'

(Anonymous)

'Gender Diversity Service takes forever to get through.' (16 year-old) 'I've not had a great kind of history with help for mental health, I've always been told I am either too complicated or not complicated enough to get into the service.'

(16 year-old)

Some of the young people expressed feeling neglected by services because of strict criteria regarding who they could support, the specific issues they addressed, and the type of assistance they could provide. As a result, these young people felt like they fell through the gaps and were unable to access the support they needed.

'Getting rejected from lots of places coz you don't fit the conformities, but also when they do that, they don't tell you where you should go instead. So you are left wondering by yourself.'
(17 year-old)

'I knew about the Kids Helpline and Lifeline and all of that, but I was considered too high risk for most places.'

(18 year-old)

'My issues were too queer for not queer specific spaces, but then too "not specific to queer things" for queer spaces. Just have a bit more blended between the two. They're not separate from each other.'

(18 year-old)

Many participants were unable to seek help due to a lack of parental consent or a desire to keep their parents unaware of their intention to seek assistance. 'I've never actually been able to use any mental health services, because then I would have to talk to like my mum or dad about it ... I don't want my parents to know, I want to be able to do it by myself without having to have parental permission.'

(13 year-old)

'Getting things like counselling and GPs should be more accessible to youth without the need for parental permission.'

(18 year-old)

'Or you can't access them ... you can't access safe places because you've got family who won't let you do that.'

(17 year-old)

'The younger you are, a lot of what you can and can't do and where you can go and talk to is determined by your parents, which can be very difficult if they are not supportive.'
(16 year-old)

The costs associated with accessing genderaffirming care served as a significant barrier, especially for young people who lacked parental or guardian support.

'Finding LGBT friendly GPs and things like that that are bulk billed, the majority are private.' (18 year-old)

'Most services are also very expensive and waitlists are astronomical.'

(18 year-old)

One young person highlighted personal barriers that young people might encounter when trying to access services.

'I think a lot of people are nervous to access those services and it's a bit more difficult for them to access ... they could be in denial ... or not be able to deal ... sort of invalidating their own struggles ... they might not feel like there is anyone they can talk to, they might feel like they are going to be a burden to the people around them.'

(16 year-old)

The SOS21 results indicate that students identifying as 'in another way' faced various challenges in accessing supports for their mental health and emotional wellbeing, including as follows:

- 51.7 per cent sought help for stress, anxiety, depression or other emotional health concerns in the past year (female 40.2%, male 30.2%).
- 45.1 per cent experienced a time in the previous year when they wanted or needed to see a healthcare professional but couldn't (female 31.9%, male 16.2%).
- Among those unable to seek help, 66.5 per cent cited embarrassment or shame as the reason, 36.6 per cent were unsure about who to see, and 23.1 per cent could not get an appointment.

When young people accessed services, they often encountered unhelpful aspects and had negative experiences. Some common issues included staff lacking the necessary skills and knowledge, unhelpful and insensitive responses from staff, and inflexible services that did not accommodate their individual needs.

Healthy and connected

The participants reported that many health and mental health professionals were not adequately educated or experienced in working with trans and gender diverse children and young people, which negatively impacted the quality of support they received.

'[There can be] A lack of knowledge or a lack of understanding, especially if you go to like a psychologist who hasn't ever seen it before or has a very baseline level. And then while you're trying to receive like mental health help for whatever reason, it's really difficult for them to be sympathetic or empathetic towards you.'

(17 year-old)

Several participants shared instances where professionals were dismissive or unsupportive of their trans or gender diverse identity. These professionals minimised the mental health challenges they were facing, disregarding their experiences and needs.

In one case, the lack of understanding about gender diversity resulted in a practitioner incorrectly diagnosing a young person with a personality disorder.

'I got given [a diagnosis of] borderline personality disorder, and it made more sense for them to think I was delusional than for me being trans.' (18 year-old)

'You are so suicidal that you're being forced to go to therapy by your school and then the therapist is transphobic and goes "It's just a phase" "You'll grow out of it" "Go for a walk".'

(13 year-old)

'I've come across psych or two that wasn't really supportive of [me being trans].'

(13 year-old)

'I had a psychologist tell me to join the army once, like I am not even kidding you, it was terrible and he's like "Your suicide ideation is just passive so you should join the army to help it". I was in the ER and he just told me that like after waiting for like ten hours for someone to talk to.' (18 year-old)

Young people felt their concerns and issues were ignored due to their age, and the services did not prioritise their personal needs.

'Services for youth seem to talk down to [young people] ... childish.' (Anonymous)

'It felt a little bit like the people that were working there, it was just going through the motions, like I am going to do this, because that's what I have to do, because that's what is in the criteria, but they don't really care.' (16 year-old)

Participants were worried that services didn't adequately respect the privacy and confidentiality of young people. They felt that services shared information about a child or young person's gender identity with parents and carers ('outed' them) without considering the child's best interests or the potential negative consequences and risks involved.

'Most services immediately go to telling the parents, which I know is important, and in some cases can be really helpful ... but sometimes [the young person] is just not ready to tell you yet, and you need to give them time to think about it and talk about it and process it because telling you will take a lot of labour.'

(18 year-old)

'A lot of people assume when there is an issue with a child they need to talk to the parents, and a lot of the time that will escalate the situation.' (16 year-old)

'I told [my teacher] ... that I was gay at the time ... and then she called my dad and then he was like I am disowning you. My history at least is that they definitely care more about what your gender is ... or who you wanna be in bed with or not bed with than your safety.' (13 year-old)

'It just like seems to them that [a young person's gender identity] is something that parents have to know ... some of the dangers of doing that could even be homelessness for this young person ... it's breaking confidentiality ... [the services] don't really understand the danger that they put some of these young people in.' (17 year-old)

'I stopped talking to school psychs for like the longest time, you know coz they contact like DCP [the former Department for Child Protection] and DCP will contact my mum and that would just always happen, so I just stopped talking to the psychs.'

(18 year-old)

One young person expressed concern about their physical safety while receiving psychiatric care, as they experienced physical violence from other service users.

'Last year ... I got admitted into a psych ward and then in the psych ward I got beat up and bullied, and told to my face that people didn't like me because I was overweight and stuff and I would have to lock myself in my room while they banged on my door.'

(16 year-old)

Improving service experiences

The trans and gender diverse children and young people shared their input on features that were beneficial for them or could enhance the experiences of others seeking help. These included inclusive practices and processes, involvement of trans and gender diverse individuals in support roles, well-trained staff and a youth-centred approach.

Inclusive practices and processes encompassed recording and consistently using young people's correct pronouns and names (as these may not always match the intake forms), showing visible support for trans and gender diverse identities through displays (trans flags, posters or wearing supportive pins) and providing gender-neutral facilities.

'Or even a pin or something like that. Just having something there that you're like this person is not going to scream at me. Or going to tell everyone or just saying something homophobic or transphobic when you are talking about stuff.'

(16 year-old)

'I like services that ask for your preferred name and all that before they even meet you, like even if it is on the form, and they know it, they still ask you when you first meet them ... it is like a lot better than introducing themselves and then not asking it or call you by your deadname.'

(18 year-old)

'When I went to headspace there is like a form at the beginning of each session and part of that has your preferred name and your preferred pronouns and then also what you like identify as like gender and sexuality and there was a lot of options. And there was also like an "other" box you could type in, which is great.'

(16 year-old)

'I would love to see health professionals specifically mental health professionals start by introducing themselves with their pronouns ... because I know when they do that, it like instantly puts most of my transgender best friends including myself at ease, and I'm like, "Well, I see someone who, at least someone knows what they're talking about".'

(17 year-old)

Peer and professional support from other trans and gender diverse individuals was seen as crucial in making services accessible for trans young people.

'Run by trans people – because they have a certain level of understanding that cis people, no matter how accepting they are, will never be able to fully grasp.'

(16 year-old)

'Talking with someone with similar experiences – personal experiences either trans or have experiences dealing with trans and gender diverse family.'

(Anonymous)

'Staff are knowledgeable on the topic, more staff that are gender diverse or neurodivergent.' (Anonymous)

'One of the coolest things was that the manager of the service ... was non-binary, so it was really good.' (17 year-old)

Having well-informed professional staff who understand and are knowledgeable about the experiences and needs of trans and gender diverse individuals was recognised as essential for enhancing the quality of emotional wellbeing support. The young participants felt that the onus should be on the professional and services to educate themselves about trans and gender diverse people and their support needs, rather than placing the burden on the child or young person.

'[They need] proper training that is continual, up to date and regulated.' (Anonymous)

'Everyone has a responsibility to learn.'

(Anonymous)

'I think taking the time to actually do a bit of research, find out the bare minimum so it's more like we're on a similar playing field in terms of what you know. Like, this is a bit more safe, you've taken the time to familiarise yourself with me, and people like me who have similar experiences.' (18 year-old)

'Having a greater amount of people/ services that are specialised (well educated) in gender diversity for people to access.'

(Anonymous)

'Taking the time to go and research something that the person has said ... Actually, taking the time to do that takes a lot of the responsibility and the pressure off of the person, because it makes it less exhausting.' (18 year-old)

A youth-focused and personalised approach was crucial in providing helpful and supportive services, acknowledging that young people are the experts in their own lives.

'Young people know what we're doing.'

(18 year-old)

'I think that in your trans journey, it is very important that the services you are talking to, for them to be able to get excited with you about the change ... I want to be able to have services where I can be like "I am nearly getting testosterone" and they'd be like "yeah I am really excited for you", coz it makes you feel kind of like they are on your side.'

(16 year-old)

'I think more person-centred things, and more of a focus on "how do we keep this person safe, how can we make this person feel more safe", and also have more supports.'

(18 year-old)

Young people also sought greater involvement in the communication between services and parents, ensuring that their wishes and needs were taken into consideration while balancing their safety requirements.

'Be specific about what you're going to say to the parents, like we're going to tell your parents about this - like "What is ok for us to say" ... "Is there a way, or a specific thing you would like to be conveyed?" or "Is there something you want us to keep out of it?" Have a bit more of a discussion and a plan about what you're going to say.'

(18 year-old)

It was important to have services available for young people without requiring parental or caregiver support.

One young person recommended better regulation and guidance for mental health practitioners regarding the significance of maintaining client confidentiality, and the potential risks faced by young people when their identity is disclosed to their family.

'Think there should be more services for people with parents who aren't supportive ... it is so much easier to access services when you have supportive parents. For example, we wouldn't be able to come here if our parents weren't at least somewhat supportive, we need someone to take us here, we have a parent who is already there and they have to be open to having the discussion about having trans kids, like, and there a lot of people who they just don't have that privilege, and it is like really hard ... they might not even necessarily have their parents allow them to seek psychologists or even that sort of thing, so really all they have is their friends and sometimes like teachers or people at school.' (16 year-old)

'You're like ... breaking your code of ethics as a mental health clinician, and if you do that, they should be reprimanded and also have the real understanding that their licence can be taken out into practice.' (17 year-old)

'If a doctor does something that puts a patient at risk, we have a whole investigation into it. But if a psychologist or counsellor says something that breaks confidentiality, and then that leads to this young person who ends up in the ED, we don't look at that, but it's definitely something we should look at because they have a duty of care towards their clients.'

(17 year-old)

Access to gender-affirming care

During our conversations, trans and gender diverse children and young people frequently spoke about the importance of being able to access gender-affirming care. This included medications like puberty blockers or hormone therapy, treatments such as hormonal treatment and surgery, professional assistance like specialist advice, counselling and referrals, as well as resources to affirm their identity such as binders, packers and legal documents.

'We know that gender-affirming care is a lifesaving treatment, like literally life saver treatment, and I want it to be acknowledged that way ... by society, by the government all that kind of thing ... because it's not just something trans people want, it is so crucially important like we couldn't live without it.'

(16 year-old)

Accessing gender-affirming care and support to help them 'pass' was of utmost importance. However, numerous challenges hindered this access, including lack of parental support, financial constraints and lengthy waitlists.

'What's annoying is that you need both parents [to get hormonal therapy], like my mum hands down will do it, but my dad I don't know if he will, coz he is like kinda iffy on the whole thing.'

(16 year-old)

'Can't ask dad anyway coz he has disowned me ... like what I am going to do message him and then never get a reply.'

(13 year-old)

'I know some people, like my friends, some of them are illegally getting jobs so they can actually work up money to do all that stuff and get surgery because their parents are transphobic.'

(13 year-old)

'I just had the appointment today and they told me I could go get all my bloods done, which is the first step in starting testosterone ... I have been waiting for four years.'

(16 year-old)

'With the hormones thing, like you can't take them to 16, but blockers should be more accessible, because blockers are even more reversible.'
(17 year-old)

'Costs of binders [is a challenge]. Not having access to help you pass.' (Anonymous)

While not specifically emotional support services, the availability of gender-affirming care plays a vital role in the mental health and wellbeing of trans and gender diverse children and young people.

Self-care

Children and young people in the consultations showed remarkable resilience and resourcefulness in facing their personal challenges.

During the conversations, the participants identified a range of self-care strategies they used to support their own mental health and personal resilience, including:

- Engaging in creative pursuits such as art, reading and music.
- Spending time with family, friends and pets.

'Can be really difficult trying to find a trustworthy website that will have, that will be good and helpful and like reliable for both information like counseling [counselling] or like products for gender diverse and transgender those people like packers or binders.'

(16 year-old)

- Staying physically active and going for long walks.
- Spending time in nature.
- Accessing peer support from other trans and gender diverse individuals.

'I for one like to go on a really long walk ... there was a time when I was feeling like really bad for like two months and never feeling good at all, so I just got up for a walk and was feeling better than I was two months afterwards, it helps.'

(18 year-old)

'I used to live next to a really nice creek and what I used to do is go walk through that creek and just sit by a waterfall, just getting away from the scenario that makes you feel worse is a good thing to do.' (18 year-old)

'[I] play instruments and doing that is really good. Because it makes you focus on what you are doing ... it's really good to focus and take my mind off it.'

(16 year-old)

Physical health

Physical health is a basic building block for the present wellbeing and future life outcomes of children and young people. In SOS21, half of the secondary students who selected 'in another way' rated their general health as poor or fair, which was notably worse than their peers who selected male or female (Figure 3).

Although the consultations did not directly delve into the topic of physical health, some participants mentioned issues related to their physical wellbeing, including experiences of disability and concerns about weight.

A few young people identified themselves as having a disability or being neurodivergent, with one individual noting that their gender identity influenced the way they received diagnoses for their conditions.

'My first therapist when she found out I was trans, she gave me a diagnosis for epilepsy, because I kept zoning out and I had ADHD symptoms, and she gave me epilepsy because "No, you are trans so it's different" and then a year later I have ADHD.'

(13 year-old)

The Girls' Wellbeing Survey highlighted challenges in accessing inclusive health services, as raised by one of the participants.

'Being AFAB [assigned female at birth] and gender non-conforming, my choices and opportunities in health (physical, mental and sexual) have definitely been limited or heavily impacted. I've experienced chronic pain since childhood, and I'm never taken seriously ... I'm also in between diagnoses - Borderline Personality Disorder, ADHD and autism, and I can't afford the psychiatrists needed to finalise it. I've been told that I'm faking symptoms ... and had snide, queerphobic and transphobic comments said when I accessed birth control.'

(21 year-old, non-binary/gender non-conforming)

Furthermore, several young people in the consultations expressed concerns about being overweight, specifically regarding the bullying they faced due to their weight. Although this experience is not exclusive to trans and gender diverse children and young people, it underscores another aspect of physical appearance that can lead to unwanted attention and scrutiny.

'I know I am not like overweight or anything, but I've been bullied so much, because everyone at my primary school at least, was so skinny and lanky and athletic and I was not ... I developed an eating disorder and I was working out all the time and nothing was happening, and I got really depressed, like super depressed.'

(13 year-old)

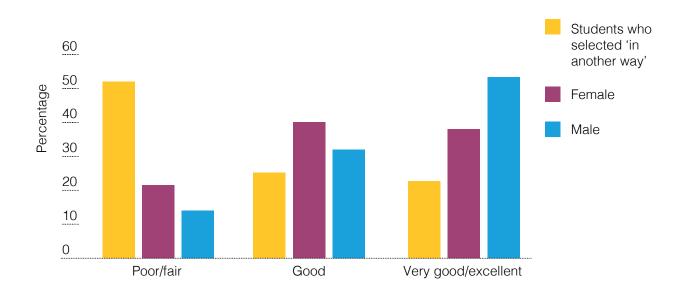


Figure 3: Proportion of Year 7 to 12 students rating their general health

'I got beat up and bullied and told to my face that people didn't like me because I was overweight ... I think something really needs to change for every teenager. I've been bullied since Year 2 and I feel very traumatised by school.'

(16 year-old)

'... I've always been outcast coz I am overweight, I am not overweight because of food, it's because of the medication I take, and people just judge me and say oh they're so lazy so fat and everything, but they don't know my story, so don't judge me before you know me.'

(16 year-old)

'I am not the smallest person in the world, and always was big compared to everyone in most classes, so everyone would just go on about how much I weigh ... and kinda made my mental health ten times worse.'

(18 year-old)

'... people who are over 18 getting gender confirming surgery, and being told that they can't because they are too overweight and they have to work out so they can become a certain size, so they can then go on to months long waitlists, for like months or even years, and just being told no.' (13 year-old)

Safe and supported

All children and young people have the right to experience safety and support in all aspects of their lives. This encompasses nurturing relationships within their family and community, as well as feeling secure at home and in public.

'I have felt like most of my life there isn't a place for me, I feel unsafe and like I don't have a space to just exist.' (18 year-old)

'I can't walk around my local shops because there are a group of teenagers who ... based on my appearance they want to beat me up ... if we do have to go to the shops I won't leave my mum's side because if I run into them again I'll get hit.'

(16 year-old)

'I know there's some (trans) people ... who have gone out in public and have said they got a can thrown at them.'
(18 year-old)

According to SOS21, secondary students who selected as 'in another way' were significantly more likely to feel unsafe both at home and in their local area (Figure 4).

A substantial percentage of secondary students who selected as 'in another way' (58.3%) reported being intentionally hit or physically harmed by someone (Years 9 to 12 only). This figure is comparable to male responses (52%) and higher than female responses (35.5%).

Feeling safe in the community

Trans and gender diverse children and young people in the consultations shared concerns about factors influencing their sense of safety within the community.

They expressed worries about potential physical or verbal abuse, misgendering, discrimination and violence based on their gender identity when in public.

'When I walk around it's really uncomfortable because I feel like there's people constantly watching me and there's like so many dodgy people that ... look like they are about to hurt me, I need to stay by my mum's side.'

(13 year-old)

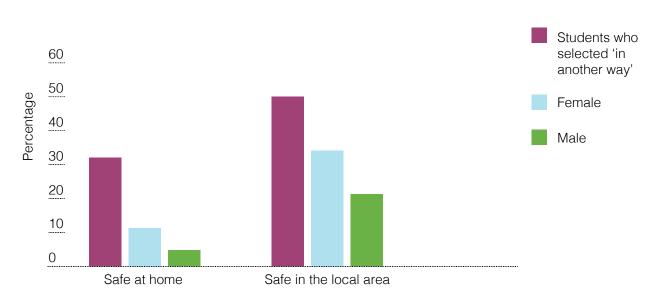


Figure 4: Proportion of Year 7 to 12 students reporting they feel safe at home or in their local area 'only sometimes or less'

The lack of both physical and emotional safety in public bathrooms was a recurring topic of discussion.

'I will go into the men's toilets if that's the only option but I actually fear for my safety in them which is not fun.'

(16 year-old)

'I think one of trans people's biggest fears is like going into the bathroom of their actual gender and having someone be like "oh you're in the wrong bathroom", because that is like so invalidating and it will cause to much dysphoria.'

(16 year-old)

'If I went into the females they would be like "oh get out why you in here?" But then if I go in the males I get beat up, so I have trauma.'

(16 year-old)

'I said to my mum, "Hey you know I am trans can I please use the male toilets", and she said like "No, I do not feel comfortable letting you in there, you are using the female toilets"... I could feel everyone was staring at me ... they're like "Why is a guy in the females' bathrooms".'

(13 year-old)

Some participants even resorted to avoiding public restrooms altogether and restricted their food and water intake to prevent the need for using public bathrooms.

'I don't drink water at school because I know I'll probably end up needing to go to the toilet and I am like I can't do this.'

(13 year-old)



'... about holding til the end of the day, I did that because of my story and now I don't pee at all, like I pee once in the morning and at night.'

(16 year-old)

'Also people with like weaker bladders they realise if I have to, if I am drinking water then I am going to have to pee and they stop drinking.'
(13 year-old)

Improving safety in public

During the consultations, participants emphasised the importance of having separate gender-neutral bathrooms specifically for trans and gender diverse individuals, distinct from accessible or disabled toilets.

'Accessible toilets should not be for people who are gender nonconforming, that is for people who need the accessibility of the accessible toilets. Give us our own toilets.'

(17 year-old)

'My primary school had a gender neutral bathroom but also had a disabled sign on it.'

(16 year-old)

'The bathrooms that are downstairs make me feel like so happy, there's urinals but in the stalls there's also tampons.'

(16 year-old)

They also highlighted the need for others to take a stand against transphobic behaviour, including discrimination, violence and harassment.

'I think laws should be put in place for like if you are discriminated against.' (18 year-old)

'Out in public, I am just in some like public area, I get really scared, well, pretty much anything can happen, and there's nothing really I can do about it. So having systems in place to make it feel like a safe place for trans people, that would be great.' (16 year-old)

'The other thing is how to feel safe in areas and home, we need more adults who like obviously support us, but aggressively support us, who will do something if something happened, just people who will fight for you.'

(17 year-old)

'Like other people might see stuff as well and not even say a single thing.' (18 year-old)

'My best friend ... was very transphobic/homophobic towards me ... my mum did nothing about it she like ... "Oh well ... she was such a nice girl, like your most favourite friend," and I was like "Mum she called me the f slur, and you want me to still be friends with her", and my mum was like "Is it that bad though?" ' (13 year-old)

Creating trusted and safe organisations and spaces where trans and gender diverse children and young people can connect with others was deemed crucial by the participants.

'A lot of the time you're just trying to meet up with random people off the internet - and there isn't much safety in that. Having an organisation going "Hey, there's this event" - something that if the young person showed it to their parents, they won't say no." (18 year-old)

'Visibility and I think that comes with like being able to meet other people who are similar to you.' (17 year-old)

'Having a bit of a social safe space ... where you can just be yourself for 30 minutes.'

(18 year-old)

This sentiment was echoed by a participant in the Girls' Wellbeing Survey.

'I feel safest in a community of LGBTQ+ people as I know that they are some of the most accepting people and are very unlikely to judge you or make fun of you because they have experienced the same and they know that they don't like it.'

(13 year-old, demigirl)

Feeling safe at home

Participants emphasised the crucial role of parents and carers in affirming their children's gender identity and providing a secure and supportive environment at home and in all other areas of their lives.

'I am very lucky because my mum is a social worker ... so she is very understanding ... but I know people that if their parents disowned them they wouldn't have a fallback system.' (13 year-old)

Some children and young people shared their experiences of their parents' negative reactions when they came out, the emotional strain it caused, and their worries about safety when their parents were unsupportive.

'My dad is very transphobic and he literally disowned me when he find out that I was trans, he blocked my number and everything.'

(13 year-old)

'I came out [to] them like eight times with the same thing, because it didn't go well. Each time, I wouldn't bring it up unless I knew I had somewhere else to go that night ... I know that the fear I felt was very real. I was like, if I say something, I may need to find somewhere else, I might not be able to come back home. And that was really scary. I think if you didn't have a friend you could stay with that night, it's like 'where would I go?'. (18 year-old)

'At the time I told my mum, and I was asking her to respect my preferred name and everything and she was just going on about not doing that, because I killed her son and everything like that, and I was like that is not how that works, I am still the same person there is nothing I'd change.'

(18 year-old)

'Not feeling safe in family at Christmas, fear of being misgendered and relationship questions.'

(Anonymous)

'It's not ok to push your grief of your losing, or perceiving of losing something, on to the child, because that is not their fault, and to them, they haven't changed. You're seeing them as changed, you're noticing as a change, but ... this is them, this is who they've always been, and they're now just finding the words to tell you.'

(18 year-old)

SOS21 participants who chose the option in another way also faced challenges in receiving support from their families and were less likely to feel supported or heard by their parents or other adults. Here are some key findings:

• More than half of Year 7 to Year 12 students who selected 'in another way' s aid that it was not at all true or only a little true that there is a parent or another adult who listens to them when they have something to say. Specifically, 24.8 per cent said it was not at all true, and 28.8 per cent said it was only a little true. Among females, 8.3 per cent and 21.9 per cent expressed these sentiments, while among males, the percentages were 4 per cent and 13.3 per cent, respectively.

- Two in five (39.7%) young people who selected 'in another way' said they did not have a parent or another adult they could talk to about their problems. Among females, the percentage was 16.7 per cent, and among males, it was 8 per cent.
- More than one-third (36.1%) of Year 7 to Year 12 students felt that if they were facing serious problems, there was no adult they would feel comfortable talking to. Among females, the percentage was 15.8 per cent, and among males, it was 11.8 per cent.

Participants expressed the need for unconditional love, support and respect from their parents and families in relation to their gender identity. They also highlighted the importance of improved education and professional support for families when their child comes out.

'To have spaces where they can vent about their feelings would be quite helpful, so that we're not getting the venting. We don't need to know about how much this hurts you, we don't need to know about the grief because you lost your child. You didn't, I'm still here, I haven't changed.'

(18 year-old)

'I'm aware and understand that some parents really really struggle with their child not being who they thought that they were going to be ... I think it is vital that the parent engages in some community supports ... Validating their fears, and validating their emotions, so they don't feel like they shouldn't be feeling those things, because that's not helpful. But working and showing healthier ways of working through those emotions.'

(18 year-old)

'I think kind of like give parents interviews, give them more of an understanding about the gender and sex and all that, just more information, and how to support them ... have examples of what happens when you don't.'

(18 year-old)

'I feel like [parents] might need more of support in [when someone comes out], a bit of a transition, a bit more education, so they don't get more aggravated and push against you.'
(17 year-old)

Learning and participating

Students' school experiences and the level of autonomy they have during childhood and adolescence have a profound impact on their overall wellbeing throughout their lives. It is vital for children and young people to feel engaged and supported in their learning, have a positive outlook on their future, and have their voices heard.

'School is not great.
And they are a place that could be so supportive and could be helpful with this sort of thing, or even just as ... a middle person for information and they aren't.'

(16 year-old)

In the consultations, schools were frequently identified as environments where children and young people encountered difficulties related to their gender identity. However, schools were also acknowledged as places where enhanced support for trans and gender diverse children and young people could be offered.

Safety and belonging at school

Feeling safe and secure at school is crucial for students to fully engage in their learning.

Challenges at school

In the consultations, schools were frequently identified as settings where children and young people encountered challenges regarding their gender identity.

'Schools will be like oh you can always talk to us we'll always be supportive, but they don't actually show that when you need it.'

(16 year-old)

Transphobic bullying, as well as bullying towards other LGBTQIA+SB students, was frequently mentioned in the consultations and in the Girls' Wellbeing Survey.

'On the first day of Pride, some students in Year 8 printed off some Pride flags, and stuck them on their lockers, and on the communal Year 8 noticeboard ... And these girls in their year ... ripped some of the Pride flags down, someone brought a lighter to school and burnt some of them.'

'Blatant transphobia in the classroom ... people calling me by my deadname and just blatant harassment.'

(14 year-old, non-binary – Girls' Wellbeing Survey)

'At my school, boys and girls are treated fairly equally but the gender diverse people are not treated with respect as people use their dead names and refuse they/them pronouns and rip down posters saying we should all support ... I don't see what is so amusing about denying someone their rights as a human being to be respected and treated equally.'

(13 year-old, demigirl – Girls' Wellbeing Survey)

'Being lgbt was really scary in the first year of high school; it was a really toxic environment.'

(15 year-old, non-binary – Girls' Wellbeing Survey)

Participants expressed frustration and distress as their concerns about transphobic behaviours were disregarded by teachers.

'Someone outed me and then I would tell most of the teachers they wouldn't do anything ... they would say like oh we will talk to them, we will talk to their parents and then they never did.'

(12 year-old)

'Like I have had a few incidents there was a teacher who effectively told me that I was being an inconvenience for being trans and they didn't do anything about it in fact they kind of just let it (bullying) run its course.'

(16 year-old)

'I had a kid who called me a slur at ... the school bus stop, and my mum reported it ... and what happened is they talked to him and were like "apparently you did this", and he was like "No, I didn't," and they were "Well, he said he didn't" so like let it go.' (16 year-old)

'This girl was openly homophobic to me and I told a teacher and I got told to be opened minded, like the audacity.'

(12 year-old, non-binary – Girls' Wellbeing Survey)

One young person noted that increased visibility of trans and gender diversity brought about additional challenges in the form of more open transphobic and homophobic behaviour from others.

'Unfortunately having more space for Pride, and some students feeling more brave, it also fuelled to match, with the same amount of energy, hate. So there were more public instances of homophobia.'

(18 year-old)

Difficulties in having their gender identity recognised and respected were discussed.

'I can't even get like the staff, I can't get anyone at my school to call me [my name], because my dad doesn't know that I am trans so it would be really awkward if they had to call him.'

'[In my school documents] my name right, it's like deadname, then my last name, then in brackets my preferred name on everything, and then you also still have to log in with your deadname as well, they don't change it ... it all has your deadname, no matter if you change it or anything because it's not legally changed. It's really dumb.'

(18 year-old)

'When I was like filling a form in to be able to go the high school I go to now it was either boy or girl, and at that time I hadn't come out to my mum and there was no other option, so I had to put female, and it really sucked.'

(13 year-old)

Participants discussed challenges with gender divisions in classes for various activities, which made it difficult for them.

'I find it really annoying like when we are having a sports lesson and we decide we are going to dodgeball or something, and like everyone wants to do a boys vs girls, and I'm just like, I go over to the boys and all the boys are like wait why aren't you on that side, and then I'm like, and all the girls are like you should be, and then all the boys are like you should be on that side, and I'm like no I shouldn't.' (11 year-old)

'It can cause a lot of discomfort and it's kinda just scary ... the teacher will be like ... girls in this line, boys in this line, and you're just kinda like standing there coz you don't want to make a big deal about it coz that ... creating unnecessarily so anxiety inducing situations.'



Participants called for greater visibility and representation of trans and gender diverse individuals in the curriculum, especially in health and sex education.

'I am in Year 11 so I have finished with classes and that kind of education, and I've never heard anything about trans people or queer people anything like that.'

(16 year-old)

'Teach it in schools, definitely ... there's obviously going to be people who are curious about it and want to learn more, but then they use you like a queer dictionary, it's not my job to educate you on what you don't know.' (13 year-old)

The outing of students by school staff to their families and colleagues was also mentioned as a concern.

'Also, I know a lot of people who have school counsellors and then them telling their school counsellors that their trans or they're queer and then the counsellors outed them to their parents.'

(13 year-old)

(16 year-old)

'... I've got friends ... who've had chaplains and other school admin out them to their parents and teachers out them to their parents, which has suddenly all been like, not very safe. Like they hadn't checked with this young person beforehand.'

SOS21 results further highlighted the issues faced by students who selected 'in another way':

- More than half (58.6%) of high school students who chose 'in another way' disagreed with the idea that school was a place where they belonged (female 34.1%, male 21.2%).
- 15.4 per cent of students in Years 7 to 12 reported they hardly ever or never get along with their classmates (female 4.4%, male 3%).
- One in five (21.7%) Year 7 to Year 12 students who selected 'in another way' said there was no teacher or adult who listened to them (female 10.4%, male 8.4%).
- These students not only experienced higher rates of bullying but also reported more frequent occurrences of bullying, such as several times a week or more.
- More than a quarter (29.3%) of high school students who chose 'in another way' had skipped school due to fear of bullying (female 20.2%, male 8.9%).

To clarify, a significant number of students from Year 7 to Year 12 who selected 'in another way' stated that they frequently feel unsafe in their school environment and have encountered instances of bullying. Specifically, over half of these students (54.4%) have been subjected to bullying or cyberbullying by their fellow students at school. The breakdown of this statistic shows 38.1 per cent of females in this group and 31.5 per cent of males in this group have experienced bullying or cyberbullying. (Figure 5).

These results, while not fully representative of trans and gender diverse students, do underscore the concerns expressed by this group regarding their school experiences.

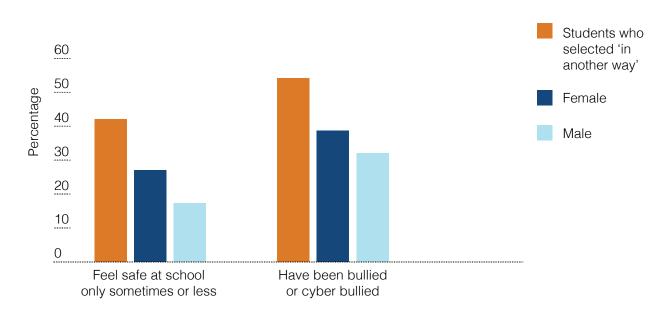


Figure 5: Proportion of students who feel safe at school only sometimes or less or are bullied by students from school

Improving school experiences

During focus group discussions, children and young people suggested several ways schools could enhance inclusion, support and respect for trans and gender diverse students. These ideas encompassed having dedicated leadership and a firm commitment to supporting these students, providing gender-affirming support within the school, and improving education for both staff and students on gender diversity.

Some participants acknowledged the crucial role schools play for trans and gender diverse students who lack support from their parents or carers.

'Schools are a good place to get help as some parents don't support kids.' (Anonymous) The participants expressed a desire for schools to not only acknowledge trans and gender diverse students but also take tangible actions to support them.

'There will be other trans people there, you won't be the only one. You might be the only one who has discovered, or isn't heavily closeted, but the chances you are the only trans person in your school is like, very very slim.'

(18 years-old)

Participants emphasised the need for school anti-bullying policies to address transphobic behaviour and for schools and teachers to respond appropriately to incidents of bullying, including involving the responsible students and their parents or guardians.

'I'd love to see like transphobic and homophobic [behaviour] put in antibullying policies.'

'I would also like to see teachers being more proactive when hearing those things specifically like using t slurs or the f slur.'

(17 year-old)

'At my high school as soon as I say it, like this person has been homophobic, the next day it is like gone, and that person who was like homophobic to me like is not even talking to me anymore.'

(12 year-old)

The importance of school-based support was also highlighted in the Girls' Wellbeing Survey.

'In terms of LGBT+, transgender, non-binary and other gender diverse students need a lot more support, even at my schools which have progressive LGBT policies. I can imagine LGBT students in particular need protecting at private/religious schools.'

(17 year-old), non-binary (Girls' Wellbeing Survey)

To foster a sense of acknowledgment and support for trans and gender diverse students, participants suggested various improvements schools could make, such as increasing visibility and representation of trans and gender diverse individuals, providing genderneutral facilities and activities, implementing processes that recognise names and gender identity and enhancing the support systems for these students.

The children and young people stressed the significance of visibility and representation of trans and gender diverse individuals in schools, with teachers and staff openly demonstrating support and inclusion. This could involve celebrating special days for the trans and broader LGBTQIA+SB community, displaying inclusive posters,

using correct pronouns, wearing a rainbow flag or pronoun pin, and incorporating discussions about trans and diverse gender identities into the curriculum. Such actions would signal to students that these teachers are safe individuals to confide in, validate their existence as trans or gender diverse individuals, increase visibility, raise self-awareness of their own identity, and promote a broader understanding of gender diversity.

'If I have an email from the teacher and it has their pronouns in it, I am like oh ok, it kind of flags on my radar that this person might be good to talk to.'

(16 year-old)

'In health at the beginning of every lesson my teacher is always like "if you are trans or gay or whatever and you want to tell me or tell someone, you should always like talk to me"... all my teachers are accepting, most of them in their classroom actually have like Pride flags in their room ... so I know that all of them are accepting.'

(12 year-old)

'I know that they're really accepting ... because they are always like celebrating like Wear it Purple day ... they like go all out, like they decorate the entire team in purple ... there is like massive paintings on the wall with like Pride flags hidden in all of them and I think that's really cool.' (12 year-old)

Learning and participating

'At our primary school the music teacher he also wears different Pride flag colours in his outfit, and he always talks to us about it and ... I see him shoot me a look every time he talks about it ... he talks a lot about how we can trust him and talk to him if we need to ... and he shows visible support which is actually quite nice.'

(11 year-old)

'I didn't actually know what it was to be transgender either before [the principal] came in, put up the posters and I was like well now I know that it's okay, I am going to come out.' (11 year-old)

Participants also suggested that schools establish processes that affirm and support a person's gender identity. This includes allowing gender identity and preferred names to be reflected in enrolment forms, administrative documents (reports and certificates) and classrooms.

Respecting students' wishes regarding how they want to be addressed and with whom was also emphasised, considering that students may not be out to their peers, other teachers or family members.

'Being more inclusive. Asking your name, how you want to be referred to in the classroom. Is there a name for being at home, is it different to here? What name do you want on your reports/certificates? ... So you're not making as many assumptions.'

(18 year-old)

Additionally, participants stressed the importance of having gender-neutral facilities and avoiding activities that separate students based on traditional male and female gender identities.

Children and young people also highlighted the significance of school counsellors, teachers and staff not outing students to their parents or carers and the importance of seeking consent before discussing sensitive matters with them.

'Making sure like school counsellors or chaplains are respecting confidentiality, if they're worried about a young person, they check in with the young person first and stuff like that.'

(16 year-old)

Participants called for enhanced emotional wellbeing support for trans and gender diverse students at school. This could include the presence of youth workers or counsellors to provide individual support and the establishment of peer support groups to foster connections with others.

'What really helped was a queer person running the [peer support] group, someone in Year 12, who was older than them, so that they could see themselves, someone who had come out, who was at least perceived to be proud, and vocal, and safe, and ok ... being able to see yourself is really important - nothing quite helps in the way as being seen.'

'The discussions, having a bit of a social safe space with fun topics you're interested in, where you can just be yourself for 30 minutes. Even if you're masking all the way out there, or not out fully ... there's community right there without even trying.'

(18 year-old)

The significance of peer support groups for students was also highlighted in the Girls' Wellbeing Survey.

'In my school we have GSA [Gender and Sexuality Alliance] that helps significantly in making people feel seen and respected.'

(15 year-old, non-binary

The participants underscored the importance of educating both students and staff about trans and gender diverse individuals. They believed that such education would not only help students in understanding their own identities but also promote understanding, awareness and respect for diverse gender identities within the broader school community.

'I think all teachers should get LGBT training.'

(18 year-old)

'Having it be more normalised when you're younger, and it being safe when you're younger – it's going to make people feel more accepted and more ok with themselves.'

(18 year-old)

'Seeing/hearing stories or history about trans people in the curriculum. It should be mandatory.'

(Anonymous)

'My biggest my first step would be in schools, about having good teachers and having them have to go through a training about how to treat gender. Like transgender young people, and not just going up and being like, "Hey, what is your name? What is your pronouns? Why is this?" or you know outing them, and how to be considerate like what to say if you mess up.'

(16 year-old)

'Definitely in high school and having in the health curriculum that ... [trans and gender diverse people] exist and that's important for everyone to know, because that can help young people who might be questioning their gender identity to know that they're not alone, but also for other people to know that they aren't the only group of people and how to be respectful of others.'

Regional differences

The consultations included four trans and gender diverse young people from different regions in Western Australia: the Mid West, Great Southern, Pilbara and Peel. It became apparent during the discussions that there were many similarities in the experiences of young people in both metropolitan and regional areas.

'We have a good amount of services comparatively, but then you go up to Perth and it like doubles or triples in the amount of services available and a lot of these services ... advertise online counselling or they advertise again like these focus groups or support groups, but then when you're in regional WA you don't have access to any of those.'

(16 year-old)

However, regional young people faced additional challenges, such as limited regional services and a lack of in-person support, difficulties with privacy and anonymity, and a lack of awareness about available support options in regional areas. It's important to note that there were no participants from remote areas of Western Australia, and these young people may have their own unique challenges and experiences.

Accessing support for emotional wellbeing and mental health

Service availability and face-to-face support

Regional participants expressed concerns about the lack of both general mental health services and specific support services for trans and gender diverse individuals, especially in comparison to the support available in metropolitan areas.

'While there is some good community resources ... that isn't really available for a lot of young people.' (16 year-old)

'... other services have to pick up the slack for the lack of specific services out there. So, you know, this service may be mostly for mental health, but they need to do more engagement or maybe more education and then they don't have much time for more clinical work. And it just starts all those problems, again, with waitlists and then not having enough services out there.'

'Just a deficit of people also wanting to come to run events and services.' (17 year-old)

Similar to their metropolitan counterparts, regional trans and gender diverse children and young people had to navigate various online resources and mainstream services to find suitable emotional wellbeing support. However, they found it particularly challenging to access quality support in regional areas

"... I feel like most of the mental health services that you can access in regional Western Australia are pretty limited. And with that comes like a lack of knowledge or a lack of understanding."

(17 year-old)

'... we have headspace which is good and a bunch of other psychologists scattered around. But the problem with that is, no one really knows who's kind of good for the whole gender diverse thing.'

(13 year-old)

'... there's not really like a good one place with information and so for me wanting to get a binder or something like ... it's really difficult. And then not having somewhere to go to like look at them (in person) or having to go up to Perth ... That means going online and that can be really difficult trying to find a trustworthy website.' (16 year-old)

Participants highlighted the difficulty in finding support options outside of metropolitan areas. They felt that regional support services primarily focused on promoting their services in metropolitan areas, making it challenging to identify available support for young people in regional areas.

'I now know that the health service sends up an endocrinologist to [regional town] like a once a month and I was like "Why was that never told to anyone" and then there's also online counselling specifically for LGBTQ plus young people or any age, and I guess all of these services are there, but they're mostly advertised to metropolitan people, or, you know, they just write off the regions completely.' (17 year-old)

'... the thing with groups for LGBTQ+ here is that the one that I did know about, I'm pretty sure it fizzled out, never really got anywhere. And well, now let's just kind of know where to go ... I have no idea what happened to it. I just haven't heard about it in a long time.'

(13 year-old)

Face-to-face support was often unavailable for trans and gender diverse children and young people in regional areas. They had to rely on online or telephone services, or travel to Perth, which was time-consuming and expensive.

'We have all the services that do online spaces, but not having that physical, safe space, and some young people can feel like they're just being isolated 24/7.'

'The services I need are in Perth, and we kinda have to constantly go back and forth, back and forth. To get services that I need to access like more specific services like a gender clinic ... [you're] generally coming down there for one appointment ... it just takes so long to get down there and back.'

(13 year-old)

The costs associated with travel for appointments were a significant barrier, and although some subsidies for regional patient travel were available, navigating them was complicated.

'You have to become somewhat of your own accountant because I know that you get PATS the Patient Assistance Travel Scheme ... If they denied that you're ... out of pocket plus ... it doesn't cover all the hotel fees ... it's really expensive. And even if you can get even if you could get some of those [costs] back, you still have to heavily advocate and make sure that your GP is competent.' (17 year-old)

Online and telephone services were seen as presenting their own challenges, including limited access due to internet connection issues, difficulty in building rapport and a lack of safe and confidential spaces for engaging with professionals.

'In some places ... the internet is not good enough, like for online counselling or phone calls.' (16 year-old) 'A counsellor ... when you're online, you can't meet them, sometimes you're like, not quite sure what they're like.'

(16 year-old)

'I did online counselling for not too long, but ... I didn't have like a safe space where I could go because it was online so there's no way I can get anywhere in my town ... wasn't like you go to library because that's public ... So that's ... a reality where some young people wouldn't access it because you know, they're in their room, their parents barge in and now they're out[ed].'

(17 year-old)

Anonymity challenges in regional towns

In smaller communities, regional participants faced challenges regarding anonymity and privacy. Even if there were trans and gender-specific supports in their community, accessing them without revealing their trans or gender diverse identity was difficult, especially for individuals who were children or young people.

'... some my friends [in regional areas] have that issue with lack of anonymity ... Some people have no filter and will just be like, Oh, hey "preferred name", how did you enjoy that LGBTQ plus thing last night?' (17 year-old)

'There was 17 young people first showed up [at a community event] and then out of the 17 young people, three of them had to be outed because their parents were like, "Why do you want to go?" And then they outed themselves ...'

'I know other towns don't have [support groups for queer young people] or services have tried to stop them, but nobody comes because such small towns don't really have the ability to be anonymous among people. Like you walk into this place where it's advertised, people are going to be like, "Oh, now we know that they are gay or whatever".'

(17 year-old)

'... being anonymous, is definitely a big thing. Because in small towns ... one of the counsellors at headspace just said I'm not going to see anyone from [this town], because he was living there at the time and you just know everybody and you know their parents and you see them every week and then being like, knowing about them, so that's definitely an issue.'

(16 year-old)

This issue was particularly pronounced in regional towns with strong religious communities.

'... I know some towns have like the religious cliques and those ones can be really really hurtful ... I could only imagine being in those towns with some really like religious people, and you go to the same school and then they start like belittling you or spreading rumours or you know, it's just becomes a whole thing.'

(17 year-old)

Improving regional supports for trans and gender diverse children and young people

Regional participants called for improved support for trans and gender diverse children and young people in their areas, including visible services and opportunities to connect with peers who have similar experiences.

'I would love to see the government fund more services like what Western Australian Aids Council are doing at the moment with the Freedom State project. I know that they have someone in Geraldton, Kalgoorlie, Bunbury, and I'd love to see that extended.'

(17 year-old)

'... there are definitely starting to be more services especially in headspace ... I know that it's getting better there. And one of the coolest things was that the manager of the [regional] service ... was non-binary, so it was really good and they educated a lot of the clinicians around that.'

(17 year-old)

'... Probably just a way to meet other people kinda like me. Just a way to meet them really and I can probably take it from there.'

Feedback about students who selected 'in another way'

During the consultations, trans and gender diverse children and young people were given an overview of the Commissioner's SOS21 project, which involved selecting one of three options to describe themselves: boy, girl, or 'in another way'.

'They could've been scared that someone was like watching them fill in the question, or they could've been questioning their gender.'

(13 year-old)

Participants interpreted the term 'in another way' as including people who identified beyond the cisgender^b binary, such as non-binary individuals or those questioning their gender identity.

'... people who are non-binary.'
(16 year-old)

'Someone who isn't cisgender/doesn't conform with their assigned sex at birth.'

(Anonymous)

'They are probably non-binary, they could be binary trans/questioning.'

(Anonymous)

'Anyone really questioning their gender as well.' (17 year-old)

Most trans children and young people, according to the participants, would have selected the gender they identify with (boy or girl).

'I am a trans guy and if I were doing the survey and it had options male female other, I wouldn't tick other because I am a boy, just because I am a trans boy doesn't mean I am not a boy.'

^b Cisgender refers to someone whose gender identity aligns with the sex that they were registered with at birth.

'[In another way is] not a trans option.'
(Anonymous)

'Or they could have just put [their gender identity] and you wouldn't even realise there was another gender diverse person.'

(13 year-old)

However, they believed a small number of students might have chosen 'in another way' as a novelty or as a joke.

'... people just will mess around and put anything like, oh having a laugh, I'm just gonna put something. So obviously won't be the majority because why would you bother?
But I think there will be like a small margin of people who are just kind of wanting to mess it up.'

(16 year-old)

'To be different ... or just to have a laugh with their friends.'

(13 year-old)

The feedback gathered from focus group discussions aligned with input from the lived-experience reference group, suggesting that those who selected 'in another way' would likely be gender diverse individuals, while trans children and young people who identified as male or female would likely choose boy or girl.

Participants provided suggestions on how the Commissioner could improve future inquiries about gender identity. Common recommendations included directly asking about trans identity, providing open text boxes for individuals to describe their gender identity, or offering various gender identity options to choose from. 'Needs a second follow up question ask the question are you trans?' (18 year-old)

'... where you can just put in your own gender and stuff like that is really good.'

(18 year-old)

'I think it would be helpful to put even just some of the non-binary genders ... it's a bit alienating to have it as other or prefer not to say, because often people don't mind saying especially if it's anonymous.'

(16 year-old)

'Having a section to ask specifically if they're trans rather than relying on trans people to tick other because a lot of them won't because it's actually a little bit invalidating.'

(16 year-old)

'You can't fit my gender in a box.' (Anonymous)



Conclusion and key areas for action

This report stresses the importance of prioritising the rights, needs and wellbeing of trans and gender diverse children and young people in Western Australia.

'I think it would be nice if just like the general public had a bit more education on what it is to be trans, because like a lack of education in that field, is like one of the biggest things, that can contribute to the negative experiences.' (16 year-old)

While there has been progress in acknowledging and supporting the broader LGBTQIA+SB community, it is crucial to extend this support to ensure the protection, assistance and celebration of trans and gender diverse children and young people within their families, schools and communities. Addressing this support through laws and services is also vital.

The following section discusses key issues raised in the report and proposes actions to enhance support, recognition and care for this group of individuals in Western Australia.

Accessing support for mental health and emotional wellbeing

The United Nations Convention on the Rights of the Child recognises the fundamental right of children and young people to the highest standard of health and access to quality healthcare services to support this.¹³ It is crucial that trans and gender diverse children and young people have inclusive support for their mental health and emotional wellbeing.

Until 2021, international medical standards classified gender diversity as a disorder, which pathologised it as a mental illness. This has impacted the care received by trans and gender diverse individuals, as practitioners often mistakenly associate gender identity with mental health issues. This, in turn, prevents the acknowledgement of the impact of social and environmental challenges such as transphobic discrimination, family rejection and safety concerns about their mental health and wellbeing. ¹⁵

The barriers identified by participants in accessing support align with existing research on trans and gender diverse individuals. These include limited understanding and experience of organisations and professionals in working with this group, difficulty finding a trusted service, fear of mistreatment based on gender identity, and obstacles such as requiring parental or guardian consent, financial costs, embarrassment and concerns about privacy and confidentiality. ¹⁶ ¹⁷ ¹⁸ ¹⁹ Children and young people also struggle to navigate information about available services and trusted information regarding health, wellbeing and services. ²⁰ ²¹

Participants' suggestions for improving services align with broader recommendations for children and young people, including the need for:

- holistic, youth-focused approaches
- well-educated, non-judgemental and skilled staff

- unaccompanied visits (that is, without parents or carers) that are confidential
- a greater emphasis on maintaining anonymity, privacy and confidentiality, particularly for young people who are LGBTQIA+SB and those in regional and rural areas.²² ²³

Concerns about confidentiality and the risk of being 'outed' without consent are valid among trans and gender diverse children and young people, with research showing that more than half of them have experienced this.²⁴ It is crucial for everyone, including peers, family members, classmates and professionals, to prioritise the right to privacy for these individuals and respect their wishes.

Key areas for action:

Improving service provision and access for trans and gender diverse children and young people

- Increase service capacity:
 - Implement best practice standards, such as The Australian Standards of Care and Treatment Guidelines for Trans and Gender Diverse Children and Adolescents.
 - Provide professional development and training for staff.
 - Adopt inclusive policies, processes and practices that respect correct names, gender identities, which should be recorded and used, and ensure confidentiality.
 - Offer lived experience and peer support roles.
 - Conduct regular reviews and monitoring to ensure trans and diverse gender inclusiveness, with direct input from trans and gender diverse children and young people.
 - Improve information sharing processes and protocols to protect privacy and prevent 'outing'.

- Address financial barriers by improving subsidies for regional patients who need to travel for support.
- Increase targeted funding:
 - Consult with the trans and gender diverse community to allocate additional funding to organisations supporting children and young people in order to reduce waiting lists, meet demand, and enhance capacity across specialist services, peer and family support, and regional services in Western Australia.
- Enhance support services:
 - Improve the capacity of other support services, including those addressing family and domestic violence, homelessness, and general health services, to provide appropriate support to trans and gender diverse children and young people.

Specialist experience and peer support are particularly important for trans and gender diverse children and young people, as evidenced by other research highlighting the effectiveness of LGBTQIA+SB specific services with specialised knowledge.²⁵

In regional and remote areas, limited resources and services, especially specialised ones, coupled with reliance on online support, create ongoing barriers. ²⁶ Finding creative ways to provide support and improving access to services in these areas is crucial to ensure that trans and gender diverse children and young people can access the timely support they need.

The Australian Standards of Care and Treatment Guidelines for Trans and Gender Diverse Children and Adolescents ²⁷ provide an outline of best practices for health care. However, there is a need to enhance the capacity of organisations and professionals to implement and adhere to these guidelines. In addition, other best practice guidelines, such as Suicide prevention in LGBTQIA+ young people: Best practice guidelines for clinical and community service providers ²⁸ address support for at-risk trans and gender diverse young people.

Considering the high prevalence of mental health issues and minority stress among trans and gender diverse children and young people, it is crucial to prioritise improving accessibility and inclusiveness in the mental health and wellbeing services available to young people in Western Australia.

Experiences of safety and belonging

The United Nations Convention on the Rights of the Child emphasises the rights of all children and young people to live freely, with equality, dignity and protection from discrimination of any kind.²⁹ Having a sense of community connection and positive relationships is beneficial for their wellbeing.³⁰

Unfortunately, trans and gender diverse children and young people frequently experience bullying, harassment and discrimination in various settings, including schools, communities, public transport and even at home. Studies reveal that they are more likely to report verbal, physical or sexual harassment or assault compared to their cisgender peers, often occurring in secondary schools.³¹ These experiences greatly impact their wellbeing, affecting their sense of safety, belonging and inclusion. Discrimination and bullying contribute to poorer wellbeing, including increased rates of self-harm and suicidal thoughts.³²

The pressure to conform to traditional gender norms is particularly harmful to the mental health and wellbeing of trans and gender diverse individuals. They may face expectations to pass as cisgender, adhere to binary gender expression³³ or prove their validity as trans if they identify as non-binary or gender diverse. Are they 'trans enough' or 'really trans'?³⁴

To address these issues, it is crucial to promote greater education, awareness and recognition of gender diversity in society. Challenging stereotypes about binary gender and gender expression is essential. Initiatives that foster a sense of belonging and connectedness for trans and gender diverse individuals within the community are also important.

Key areas for action:

Reducing discrimination and harassment of trans and gender diverse children and young people

- Strengthen State and Commonwealth antidiscrimination laws, policies and strategies to safeguard trans and gender diverse children and young people from discrimination and harassment.
- Implement widespread community education programs and initiatives to foster better understanding and support for trans and gender diverse children and young people, focusing on parents, families, children, young people, organisations, schools and the general community.
- Improve the accessibility and responsiveness of legal channels and complaints mechanisms for trans and gender diverse children and young people who encounter harassment, abuse or discrimination. This involves offering various reporting options through services, different media platforms (including online platforms), the police, as well as ensuring prompt followup on complaints by oversight and human rights bodies.

Although progress has been made in raising awareness and accepting diverse sexualities, acceptance of diverse gender identities still lags behind.³⁵ It is crucial to make concerted efforts to improve the sense of belonging and connection for trans and gender diverse individuals and take action to reduce the discrimination, violence and harassment they face. This includes implementing dedicated anti-discrimination and education strategies for children, young people, families and the broader community to foster understanding and celebrate diversity.

Moreover, there should be responsive recourse measures for trans and gender diverse children and young people who experience discrimination and abuse, ensuring clear actions are taken and holding perpetrators accountable for their actions.

Parental support

The United Nation Convention of the Rights of the Child recognises that every child has the right to a standard of living that supports their overall development, including physical, mental, spiritual, moral and social aspects.

It emphasises the importance of a loving and understanding family environment and acknowledges the role of parents in supporting their child's development.³⁶

Supportive parents or parental figures are crucial for the mental health and wellbeing of trans and gender diverse children and young people.³⁷ They can help mitigate challenges these individuals may face in various areas of their lives. Parents, guardians or carers play a vital role in helping them navigate relationships with peers, family, schools and the healthcare system, and advocating for the support and care they need.

Conversely, rejection by parents or parental figures can be extremely harmful to the wellbeing of trans and gender diverse children and young people. It increases the risk of self-harm, suicidality and mental health issues, and their vulnerability to homelessness, sexual exploitation and care systems. 38 39 Unsupportive reactions from parents or carers can make these young people feel unsafe or uncomfortable at home, isolated from their families and negatively impact their emotional wellbeing and mental health. 40 In cases where

living with parents or carers is not possible, it is important to have inclusive accommodation services available that remove barriers and cater to the specific needs of these individuals.⁴¹

It is crucial to empower parents and carers to support and accept their trans or gender diverse child. They should have access to reliable information about trans and gender diversity, opportunities for peer support and connections with other families in similar situations, as well as positive representation of trans individuals.^{42 43}

Schools

The United Nations Convention on the Rights of the Child outlines that all children and young people have the right to education that promotes respect for human rights and freedoms.⁴⁴

It is well documented that trans and gender diverse children and young people, as well as other LGBTQIA+SB students, often face challenges in schools. They frequently experience verbal and physical harassment⁴⁵, leading to many missing

school days due to feeling unsafe or uncomfortable. 46 Discrimination and abuse in schools have a negative impact on their educational outcomes, engagement, concentration, perceived safety, attendance and performance. It also increases the risk of poor mental health, including suicidal thoughts, attempts and self-harm. 47

Schools have a duty of care to ensure the emotional safety of all students. Supportive and inclusive school environments, policies and practices are crucial for the wellbeing, connectedness and academic success of students with diverse gender identities or sexualities.⁴⁸

However, there is currently a lack of comprehensive guidance and policies at both the state and national level to consistently support trans and gender diverse students in primary and secondary schools. Moreover, the specialist support and advice available to the education sector regarding LGBTQIA+SB student inclusion is insufficient. In 2020, funding was cut from Inclusive Education, an organisation that provided support to schools, students and families regarding LGBTQIA+SB school inclusion in Western Australia.

Key areas for action: Strengthening the capacity of parents to support trans and gender diverse children and young people

- Parent education: provide dedicated programs and initiatives to educate parents, carers and guardians about the needs and experiences of trans and gender diverse children and young people.
- Support for parents: improve the availability of specialised counselling and support for parents, carers and family members of trans and gender diverse children and young people.
- Inclusive emergency accommodation: increase the availability of safe and inclusive emergency accommodation options for trans and gender diverse children and young people who face unsafe situations at home.

Recognition and support for diverse gender identities

All children and young people have the right to express their identity and views, as stated in the United Nations Convention on the Rights of the Child.⁴⁹ However, many trans and gender diverse children and young people face challenges in having their gender identity recognised and supported.⁵⁰

The lack of legal recognition and appropriate identity documents, such as birth certificates or passports, that reflect their gender and name can prevent them from accessing necessary support services, financial assistance or concessions, and opportunities in education, training and employment.

It is crucial to ensure trans and gender diverse children and young people can access the resources and support they need to affirm their gender and identity – physically, legally and socially. This includes providing gender-affirming care, such as hormonal therapy, puberty blockers and binders, as well as legal recognition and affirmation of their gender and name in official documents and records.

It is important to acknowledge and support the specific experiences and needs of trans and gender diverse individuals within mainstream services and systems. This involves implementing safe data collection processes to gather information about the experiences of trans and gender diverse children and young people. Population-level surveys and capturing service user experiences can help fill the gaps in evidence regarding the experiences of this community. However, it is also important to recognise that some individuals may not feel comfortable or confident self-identifying through these processes.

Key areas for action:

Strengthening the education sectors support and inclusion of trans and gender diverse students

- Create supportive environments: develop and implement consistent sectorwide policies, processes and practices that recognise and affirm trans and gender diverse identities. This includes students' names and genders to be reflected accurately in school roles and forms and supporting self-determination when dividing groups based on gender (for example, in sports or accessing specific facilities).
- Provide specialist support: offer specialist advice, support and professional development for schools and staff to ensure inclusiveness for trans and gender diverse identities.
- Increase visibility and representation: improve visibility of trans and gender diverse individuals within schools through dedicated peer support groups, inclusion in the curriculum, representation in staff and student groups, and visual cues like posters and using correct pronouns in emails and other communications.
- Address transphobia and bullying: establish anti-bullying policies and strategies that specifically address transphobia and provide appropriate complaint and recourse avenues for trans and gender diverse students.
- Education and awareness: enhance education and awareness about trans and gender diverse identities for both students and school staff.

Physical health

During the consultations, participants raised concerns about the physical health of trans and gender diverse children and young people. These concerns included challenges in accessing disability diagnoses and worries about their physical appearance, such as weight issues.

Research shows that trans and gender diverse individuals are more likely to report having a disability compared to cisgender individuals. ⁵¹ ⁵² There are also associations between gender diversity and certain conditions, including Autism Spectrum Disorder and disordered eating. ⁵³ The minority stress experienced by trans and gender diverse individuals contributes to a higher prevalence of mental health issues and chronic disease. Discrimination in accessing health care can hinder timely diagnosis and treatment for disabilities, which negatively affects their overall wellbeing. ⁵⁴

These findings highlight the need for greater sensitivity and support in health care and other services for trans and gender diverse individuals with diverse needs. It is crucial to address the unique challenges they face in order to promote their overall wellbeing and ensure equitable access to health care.

Access to toilets

Access to safe and inclusive toilets is a recurring issue for trans and gender diverse individuals, as highlighted in various research studies. A 2020 project found that a majority of trans young people faced challenges related to toilet access within the past year. These challenges include feeling uncomfortable and unsafe, avoiding restroom use and restricting food and water intake to minimise the need for toilet use.⁵⁵

It is crucial for them to have unrestricted access to toilets without fearing for their safety.

Key areas for action: Improved recognition and support of trans and gender diverse children and young people

- Policy recognition: recognise the specific needs, rights and experiences of trans and gender diverse individuals, including children and young people, in public policies and government strategies.
- Education on rights: ensure that trans children and young people are educated and informed about their rights.
- Priority population: recognise trans and gender diverse children and young people as a priority population for service provision in areas such as health, mental health, housing, homelessness, and education.
 Access to timely and appropriate support and care should be reflected in government strategies and contracting.
- Improved gender recognition: enhance gender recognition and affirmation processes for trans and gender diverse children and young people. This includes making processes for legal name changes and identity documentation more accessible and addressing any financial barriers for children, young people, and families.
- Inclusive data collection: include diverse gender identities in data collection processes, both in service provision and population studies (for example, child and youth population studies). This involves asking direct questions about being trans, giving people space to provide for legal and chosen names and pronouns, and provide open options to describe their gender identity.

To improve accessibility, builders, developers and architects can take specific actions, such as providing gender-neutral toilets. Additionally, promoting community understanding and awareness about gender diversity, including anti-discrimination posters and educational materials in bathrooms, can help reduce instances of harassment and confrontation experienced by trans and gender diverse individuals when using restrooms.

Regional young people

Trans and gender diverse children and young people in regional and remote areas face additional challenges due to limited service availability, lack of expertise in working with their specific needs, limited confidentiality and anonymity, and isolation from in-person support. During regional consultations, participants also expressed a lack of information about statewide supports tailored to regional or remote areas.

Recent research, while not specific to trans and gender diverse individuals, indicates that LGBTQIA+SB young people in regional and remote areas of Australia receive less support in schools, experience more harassment or assault based on their sexuality or gender identity, and have poorer mental health compared to their peers in metropolitan areas.⁵⁶

This underscores the need to invest in regional services specifically for trans and gender diverse children and young people. In cases where dedicated services are not feasible, it is crucial to enhance the capacity of mainstream services in these communities to effectively support trans and gender diverse young people.

Other groups of trans and gender diverse children and young people

It is important to note that this project did not specifically examine the experiences of trans and gender diverse children and young people who belong to other distinct groups or backgrounds, such as being Aboriginal, from culturally and linguistically diverse (CaLD) backgrounds, having a disability or coming from religious faith communities.

These additional identities and experiences can introduce further challenges, including heightened discrimination and stigma due to multiple factors (such as being trans or gender diverse and Aboriginal or having a disability), limited access to services and increased isolation from their communities.^{57 58}

To ensure that the needs of these specific groups of children and young people are addressed, further research is crucial. It is essential to gain a deeper understanding of their unique needs and experiences, in order to develop inclusive and comprehensive support systems that account for their intersecting identities.

Glossary*

AFAB: Assigned or presumed female at birth. See 'Sex assigned at birth'.

Agender: Someone who does not identify with any gender.

Binary gender identity: A gender identity that is either male or female.

Binder: A tight-fitting top that is designed to flatten the appearance of one's chest.

Biological sex: See 'Sex assigned at birth'.

Blockers/puberty blockers: Medications that temporarily suppress the onset of puberty hormones and bodily changes.

Brotherboy and Sistergirl: Terms used by some Aboriginal and Torres Strait Islander communities to describe trans people.

Brotherboy typically refers to masculine spirit people who may be assigned female at birth, and Sistergirl typically refers to feminine spirit people who may be assigned male at birth.

Cisgender (or cis): A person who identifies as the sex they were assigned at birth, and who is not transgender or gender diverse.

Coming out: A personal journey of self-acceptance, by which a person comes to understand their own identity themselves and may then reveal it to others.

Deadname: (Noun) The name that a trans or gender diverse person was formerly known by, but no longer uses. (Verb) To speak or address someone by their deadname.

Demiboy/demigirl: Demiboy is a gender identity where a person partially identifies as man or boy, and partially another gender(s), and demigirl is a gender identity where a person partially identifies as a woman or girl, and partially with another gender(s).

Gender affirmation: (also known as transition) The personal process or processes that a trans or gender diverse person chooses in order to live in alignment with their identified gender and be recognised as such. This can involve various aspects, such as social affirmation (such as coming out to others, using a different name and pronouns, and adopting different clothing styles), legal affirmation (such as changing names or gender markers on legal and identity documents), and medical affirmation (such as undergoing hormonal therapy or surgical procedures). It is important to note that gender affirmation is an individual decision, and not all individuals will pursue all aspects of affirmation.

Gender diverse: A term used to describe individuals whose gender identity does not align with the sex they were assigned at birth. It is an umbrella term that includes people who identify as trans, non-binary, gender questioning, gender fluid or with other gender identities.

Gender dysphoria: The distress that trans or gender diverse people can feel because of the incongruence of their gender identity and sex assigned at birth or sex characteristics.

Gender expression: How a person outwardly expresses their gender or how they are seen by others.

Genderfaun: A form of genderfluidity where an individual may identify across a variety of masculine, non-binary or other gender identities, but never with any feminine or female gender identities.

Genderfluid: A person whose gender identity is not fixed and may shift and change over time.

Gender identity: A person's deeply held knowledge of their own gender and concept of self – as male, female, a blend or both or neither. A person's gender identity can be the same or different from their sex assigned at birth.

Gender non-conforming: Describes people whose gender expression differs from conventional expectations of masculinity and femininity. This gender expression is distinctly different from a person's gender identity.

Genderqueer: Individuals who do not identify with or express their gender within the traditional binary categories of male and female. They may see themselves as existing outside of or in between these binary gender labels, or they may feel restricted by gender norms and labels. It is important to understand that not all genderqueer individuals identify as trans or non-binary.

Gender questioning: Term used by individuals who are in the process of exploring and understanding their own gender identity. It describes a stage where individuals may have questions or uncertainties about their gender and are seeking greater clarity and self-discovery.

Homophobia: Refers to negative emotions or behaviours directed towards individuals who are attracted to the same sex or to more than one gender.

Hormone therapy: Gender-affirming medical therapy, including the use or hormone blockers (or puberty blockers) to prevent the release of hormones, masculising hormones (testosterone) and feminising hormones (oestrogen and progesterone).

Intersex person: Someone who is born with sexual anatomy, reproductive organs or chromosomes that do not align with the typical definitions of male or female. There are various intersex variations, and individuals who are intersex can have diverse gender identities, including identifying as male, female or another gender identity.

LGBTQIA+SB: Lesbian, gay, bisexual, transgender, intersex, queer or questioning and Sistergirls and Brotherboys.

Misgender: Term used to describe accidentally or intentionally using incorrect pronouns that do not align with a person's gender identity or body.

Neurodivergent: Refers to natural variations in how people's brains work and develop, including conditions such as attention deficit hyperactivity disorder (ADHD), autism and dyslexia.

Non-binary: An umbrella term used to describe genders that don't fit strictly into male or female. It can encompass a mix of both, be fluid or something entirely different.

Out: A person who self-identifies as LGBTQIA+SB in their personal, public or professional lives.

Outing/outed: The act of revealing someone's sexual orientation or gender identity to others without their permission or consent.

Packer: A prosthetic used in underwear to create a realistic bulge.

Passing: Being seen or perceived by others as cisgender or conforming to societal expectations of masculinity or femininity, rather than being recognised as trans or gender diverse.

Pronouns: Words used instead of someone's name. They can be gendered (like he or she) or gender neutral (like they, them or their). Gender-neutral pronouns do not assume someone's gender as male or female.

Queer: An inclusive term for various sexual orientations and gender identities, representing the diverse LGBTQIA+SB community.

Queerphobic: Refers to negative attitudes, stereotypes and fears towards queer individuals.

Questioning: See 'Gender questioning'.

Glossary

Sex assigned at birth: The sex designated to a person based on physical characteristics at the time of birth, recorded on legal documents like birth certificates.

Sexuality: Refers to a person's emotional, romantic or physical attraction to others. It is separate from gender identity.

Top surgery: A surgical procedure to remove breast tissue and create a more masculine chest appearance.

Transfem: Term used for someone who was assigned male at birth but identifies as a girl, female or woman.

Transgender: Individuals whose gender identity differs from the sex assigned at birth. This includes people who identify as transgender, non-binary, agender, genderqueer, and more.

Transition: See 'Gender affirmation'.

Transmasc: Used to describe someone who was assigned female at birth but identifies as a boy, male or man.

Transphobia: Refers to acts, behaviours and beliefs that are intentionally hostile or violent towards individuals who are perceived to be transgender or trans.

^{*} For the sources used to develop this glossary, see 'Glossary references'.

Resource list

Support services

For immediate or urgent help, please call 000 for emergency services.

24 hour services

Kids Helpline provides 24/7 free online and phone counselling for children and young people aged 5 to 25.

Ph: 1800 551 800

https://kidshelpline.com.au/

Lifeline offers suicide prevention support by phone or online chat.

Ph: 13 11 14

http://www.lifeline.org.au/

Mental Health Emergency Response Line provides a rapid response to mental health emergencies.

Ph: 1300 555 788 (Metro) Ph: 1800 676 822 (Country)

LGBTQIA+SB / Youth-friendly services

Living Proud/QLife provides LGBTI support services in WA, including the QLife Counselling and Info Line.

Ph: 1800 184 527 (3pm to midnight, 7 days

a week)

http://www.livingproud.org.au

National/IM chat: glife.org.au

Freedom Centre (WAAC) offers support for LGBTQIA+ young people, providing free faceto-face and online/phone counselling across WA, as well as other supports such as drop-in sessions.

Ph: 08 9482 0000

https://www.waac.com.au/what-we-do/

freedom-centre/

TransFolk of WA is a support service for trans and gender diverse people and their loved ones in Western Australia, offering peer support and services for young people, adults and families.

https://www.transfolkofwa.org/

headspace provides free mental health support and counselling for young people, offering face-to-face and online or phone support.

Ph: 1800 650 890 Online support at

https://www.eheadspace.org.au/

Youth Focus operates a free face-to-face and online counselling service for young people aged 12 to 25 who are experiencing suicidal thoughts, depression, anxiety and self-harm.

Ph: 6266 4333

http://www.youthfocus.com.au

The **Gender Diversity Service** is a specialist outpatient service for the assessment and care of children and adolescents up to the age of 18 experiencing gender diversity issues in WA.

Ph: 6456 0202

https://pch.health.wa.gov.au/Our-services/ Mental-Health/Gender-Diversity-Service

Youth Pride Network is a group of young LGBTIQA+ people from across Western Australia who are working to improve the lives of all young LGBTIQA+ people through advocacy, education and community events. www.youthpridenetwork.net

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