



ADVICE TO THE COMMISSIONER FOR MENTAL HEALTH

Inclusive language and the LGBTI community

2 April 2020

BACKGROUND:

At the most recent meeting the Mental Health Advisory Council (Council) received a presentation on the importance of inclusive language, delivered by Council member Emily Wilding. The presentation tied into the overarching goal of the Mental Health Commission (MHC) to better engage with, and in turn support, LGBTI Western Australians in accessing mental health support.

LGBTI people face unique structural challenges when accessing mental health services, ranging from prejudice in the workforce, a lack of sensitive, appropriate, and knowledgeable services, and omissions in policy, service contracts, and data collection.

The Western Australian (WA) LGBTI Health Strategy released in 2019 outlines six key priorities for supporting this cohort in the broader health system. These are:

- **Priority 1:** LGBTI populations' experience of health services is LGBTI inclusive and meets all physical and mental health and wellbeing needs;
- **Priority 2:** The WA health system provides leadership and promotes affirmative practices for the health and wellbeing needs of LGBTI populations;
- **Priority 3:** The WA health system promotes and strengthens data collection, evaluation and monitoring of the health and wellbeing needs of WA LGBTI populations;
- **Priority 4:** The WA health system and health services collaborate with non-government organisations to build research knowledge on the health and wellbeing needs of LGBTI populations living in WA;
- **Priority 5:** The WA health system, health services, healthcare professionals and support staff are equipped with the knowledge, skills and understanding to meet the health and wellbeing needs of LGBTI populations; and
- **Priority 6:** Access to LGBTI specific health services.

The presentation to Council covered the importance of priorities 1 and 3. Particular gaps in service delivery as a result of omissions in contractual language include a total absence of funded services for non-binary Western Australians, while poor methodology in data collection for transgender and gender diverse populations has meant that neither services nor the MHC fully understand how well they are engaging with this cohort.



ADVICE:

Given the above, Council recommends that the MHC:

- Receives the same, or a similar, presentation on inclusive language;
- Reviews language in tenders and other service funding agreements to include non-binary people; and
- Reviews strategies for engaging with LGBTI communities to ensure that the correct language and terminology is used in engagement and communication strategies.

Sincerely



Margaret Doherty

CHAIR

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