

# THE HEALTH & WELLBEING OF LGBTIQ+ PEOPLE IN RURAL AUSTRALIA

A DETAILED REVIEW AND  
RECOMMENDATIONS FOR CHANGE

# AUTHORS

## **Ian Gould Community Researcher**

Ian worked professionally in agri-food research and research management, with the Dept of Agriculture, Victoria, the Australian Food Industry Science Centre and the CSIRO. For over 40 years he has volunteered with many Melbourne based LGBTIQ+ community organisations and government advisory committees. He is a Life Member of Thorne Harbour Health and the Mid Summa Festival and was a board member of Pride Foundation Australia for over 10 years. Now living near Castlemaine his current volunteer roles include Community Member, Dhelkaya Health 'Health Equity & Community Wellbeing Committee'; Community Member, Mt Alexander Shire LGBTIQ+ Steering Group and Community Member of the Central Victorian Community Advisory Committee of the Murray Primary Health Network.

## **Ruth McNair AM Chairperson Pride Foundation Australia**

Ruth is a practicing GP and owner at an inner-Melbourne general practice. She is also an Honorary Associate Professor at the University of Melbourne. She has clinical and research interests in lesbian and bisexual women's health, trans and gender diverse affirmation, LGBTQ health care and homelessness. She is a life member of the Victorian Gay and Lesbian Rights Lobby, Thorne Harbour Health and was inducted into the Victorian Honour Roll of Women in 2017 for her academic, clinical and advocacy work. She became a Member of the Order of Australia in 2019 for significant service to medicine and as an advocate for the LGBTI community.

## **Pride Foundation Australia**

Pride Foundation Australia (PFA) is a national philanthropic foundation run by and for the LGBTQIA+ community in Australia. PFA enables advocacy for systemic change to advance LGBTQIA+ equity and inclusion and provides support to affected communities and individuals. They raise awareness of LGBTQIA+ disadvantage and work to increase philanthropic support for the LGBTQIA+ communities in Australia through fundraising, grant giving, collaboration and commissioning projects.

Pride Foundation Australia website - <https://pridefoundation.org.au>

## **Author Contact details:**

Ian Gould  
PO Box 179, Castlemaine, Vic 3450  
E: [ian.gould@iosphere.net.au](mailto:ian.gould@iosphere.net.au)

## **Authors acknowledgement:**

The authors thank Matthew Parsons of Maropa Production and Consultancy ([www.maropa.com.au](http://www.maropa.com.au)) for their valued feedback on this manuscript.

## **Suggested Citation:**

Gould, I. and McNair, R. (June 2025) The Health and Wellbeing of LGBTIQ+ People in Rural Australia - a detailed review and recommendations for change. Melbourne, Australia: Pride Foundation Australia

This report can be downloaded from the Pride Foundation Australia at:  
<https://pridefoundation.org.au>



# EXECUTIVE SUMMARY

## Background

Lesbian, gay, bisexual, trans & gender diverse, intersex, queer and asexual (LGBTIQA+) people are often challenged by significant levels of minority stress, structural stigma and discrimination, which impact their health and wellbeing in many negative ways. Research reviewed here shows these challenges are greater for the approximately 340,000 LGBTQA+ people living in regional, rural and remote Australia<sup>[01]</sup> than their counterparts in Australia's capital cities. In recent years, a small number of regional and rural health services have initiated LGBTQA+ specialist services or adapted mainstream services to be LGBTQA+ inclusive, however most have not, and none have included people with intersex variations. One reason for this lack of action is that data sources currently used in evidence-based planning by rural health services do not include data on LGBTIQA+ health.

This report fills this gap by reviewing recent Australian literature on the health status of LGBTIQA+ people living in rural areas compared with their urban counterparts and with non-LGBTIQA+ people in their local areas. The review should be used by rural health services to inform their strategic, operational and budgetary planning to improve their LGBTIQA+ inclusion. It is hoped such inclusion will reduce the health disadvantages experienced by many LGBTIQA+ people in rural Australia.

## Data sources

The report presents secondary data analysis from a range of Australian primary data sources:

- Private Lives 3<sup>[02]</sup> (PL3)

This national study was conducted by a team at La Trobe University from July to October 2019. The survey is Australia's largest national survey of the health and wellbeing of lesbian, gay, bisexual, transgender, intersex and queer (LGBTIQ) people to date. It provides a comprehensive snapshot of the LGBTIQ Australians' everyday lives, based on data covering a wide range of topics including households, mental health, use of health services, intimate partner and family violence, experiences of stigma and discrimination. The findings summarised here relate to health differences found between LGBTIQA+ people living in urban or regional and rural areas.

- Writing Themselves In 4<sup>[03]</sup> (WTI4)

Conducted by a team at La Trobe University between September and October 2019. This national study is a survey of health and wellbeing among self-identifying LGBTQA+ young people (ages 14 to 21 years). Findings relating to area of residence in regional, rural or remote Australia are summarised here.

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[01] In this report regional, rural and remote is abbreviated to 'rural'.

[02] [https://www.latrobe.edu.au/\\_\\_data/assets/pdf\\_file/0009/1185885/Private-Lives-3.pdf](https://www.latrobe.edu.au/__data/assets/pdf_file/0009/1185885/Private-Lives-3.pdf) Hill, A. O., Bourne, A., McNair, R., Carman, M. & Lyons, A. (2020). Private Lives 3: The health and wellbeing of LGBTIQ people in Australia. ARCSHS Monograph Series No. 122. Melbourne, Australia: Australian Research Centre in Sex, Health and Society, La Trobe University

[03] <https://www.latrobe.edu.au/arcshs/work/writing-themselves-in-4> Hill AO, Lyons A, Jones J, McGowan I, Carman M, Parsons M, Power J, Bourne A (2021) Writing Themselves In 4: The health and wellbeing of LGBTQA+ young people in Australia. National report, monograph series number 124. Australian Research Centre in Sex, Health and Society, La Trobe University: Melbourne. ARCSHS.



- The Rainbow Realities report<sup>[04]</sup>  
This was completed in 2023 for the Commonwealth Department of Health and Aged Care to inform development of the Australian government's 10-year LGBTIQ+ Health and Wellbeing Action Plan. Rainbow Realities provides a synthesis of pre-existing mainly national research plus more than 50 new analyses derived from the data of six surveys of LGBTQA+ populations in Australia: Private Lives 3, Writing Themselves In 4, SWASH (Sydney women's health report 2020); Trans Pathways (2017); Walkern Katatdjinn (Reports 1 & 2; Rainbow Knowledge) and Pride and Pandemic (2022). This report summarises new data comparing health and wellbeing outcomes of LGBTIQ+ people living in Australian inner capital city, outer capital city, regional, rural and remote areas.
- The health and wellbeing of the LGBTIQ+ populations in Victoria, findings from the 2017 Victorian Population Health Survey (VPHS)<sup>[05]</sup>  
A secondary analysis of the health and socio-economic status of LGBTIQ+ people living in rural Victoria compared with non-LGBTIQ+ rural dwellers is presented.
- A study by Thorne Harbour Health and Cobaw Community Health<sup>[06]</sup> in ~2019  
Explored barriers to better physical and mental health for the lesbian, gay, bisexual, transgender, intersex, queer, asexual, and people with other gender and sexuality identities (LGBTIQ+) across the Loddon Mallee region, Victoria.
- The Pathways to Pride report, Victoria<sup>[07]</sup>  
This examined systemic barriers for LGBTI+ young people in accessing appropriate, safe, and current evidence-based health and wellbeing services through General Practitioners (GPs) across the Loddon sub-region, the southern half of the Loddon Malle Region of northwest Victoria.

Data are also presented from a West Australian LGBTIQ+ health care priorities report, an LGBTIQ+ AOD (alcohol and other drugs) study, studies on the health impact of natural disaster and disaster recovery on LGBTI people and LGBTIQ+ resources published by three rural Primary Health Networks (PHN's).

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- [04] Amos, N., Lim, G., Buckingham, P., Lin, A., Liddel-Hunt, S., Mooney-Somers, J., Bourne, A., on behalf of the Private Lives 3, Writing Themselves In 4, SWASH, Trans Pathways, Walkern Katatdjinn, and Pride and Pandemic teams (2023). Rainbow Realities: In-depth analyses of large-scale LGBTQA+ health and wellbeing data in Australia. Melbourne, Australia: Australian Research Centre in Sex, Health and Society, La Trobe University. ISBN: 978-0-6458786-0-8 <https://www.latrobe.edu.au/arcshs/work/rainbow-realities>
- [05] <https://vahi.vic.gov.au/reports/population-health/health-and-wellbeing-lgbtq-population-victoria> . Citation: Victorian Agency for Health Information 2020, The health and wellbeing of the lesbian, gay, bisexual, transgender, intersex and queer population in Victoria: Findings from the Victorian Population Health Survey 2017, State of Victoria, Melbourne
- [06] GP Medical Clinics and the provision of equitable LGBTIQ+ healthcare across the Loddon Mallee Region, Claudia Validum, Program Coordinator, Thorne Harbour Country and Belinda Brain Country LGBTIQ+ Inclusion Program Cobaw Community Health. Occasional publication, Sunbury Cobaw Community Health, 12-28 Macedon Street, Kyneton, Vic, 3444, Australia.
- [07] 'Pathways to Pride' Author: Kate Phillips, Project Lead, Thorne Harbour Country, Published: May 2022. Available from Thorne Harbour Country, 58 Mundy St, Bendigo VIC 3550; E: [thcountry@thorneharbour.org](mailto:thcountry@thorneharbour.org). NB: The participants involved in this report gave permission to include their views or opinions for the purpose of system improvement. This report is to be used for this purpose and this purpose ONLY.

## Key findings

LGBTIQA+ people in rural Australia experience significant disadvantage and have poorer health and wellbeing when compared to (i) non-LGBTQA+ rural community members, and (ii) LGBTQA+ people living in metropolitan areas. In rural areas LGBTQA+ people are significantly more likely to experience health inequalities including:

- two or more chronic illnesses
- poorer life satisfaction
- lower acceptance rates in the community and at health care services, particularly when visiting a GP
- mental health conditions (including anxiety or depression)
- higher psychological stress (including youth and during the COVID pandemic)
- greater difficulty accessing inclusive mental health services
- higher suicide risk, with both LGBTQA+ adults and youth experiencing significantly higher suicide ideation and suicide attempts
- higher tobacco smoking, alcohol and illicit drug consumption rates, and alcohol and other drug (AOD) harm reduction campaigns are less likely to be LGBTQA+ inclusive
- poorer dental health.

Socio-economic status of LGBTQA+ people in rural areas is also more likely to be poorer when compared to their non-LGBTQA+ counterparts, a factor known to be associated with health inequalities. LGBTIQA+ people in rural areas generally experience:

- greater feelings of isolation
- being unsafe
- feel less valued
- have less trust
- feel greater isolation from friends and neighbours
- higher levels of verbal or physical discrimination or harassment and assault
- higher levels of family and intimate partner violence
- lower levels of support in educational institutions for LGBTQA+ young people
- lower household incomes and higher unemployment
- a greater likelihood of experiencing homelessness
- twice the likelihood of experiencing food insecurity.

During a natural disaster and recovery LGBTIQA+ people feel greater marginalisation and exclusion due to heteronormative assumptions by government agencies. The involvement of faith-based organisations can lead to fears of or actual discrimination and trigger past traumas. LGBTIQA+ people also feel invisible due to lack of inclusion in official and media reporting.



# Recommendations

A series of recommendations arise from this analysis for key health service stakeholders: rural health service providers; rural Shire Councils; State and national LGBTIQ+ led health and wellbeing organisations; State governments; Commonwealth government; arts and culture, and philanthropy. There are also areas suggested for further research.

## **For Rural Health Service Providers (including Shire Council health and aged care services)**

1. Acknowledge the problem is real, and in your catchment. LGBTIQ+ health data at the LGA or SA3 is not needed for local health care planning, given the well documented, consistent and significant LGBTIQ+ health disparities found in this review.
2. LGBTIQ+ inclusion in strategic and operational/project planning.
3. Create an LGBTIQ+ welcoming environment.
4. Act on the priority health issues shown for LGBTIQ+ people: mental health; self-harm / suicide; AOD (alcohol, cigarette, vaping and other drug use); needle exchange; family violence; housing; and social connection.
5. Initiate novel ways to provide specialist LGBTIQ+ services.
6. Ensure data collection is inclusive of LGBTIQ+ people.
7. Adopt LGBTIQ+ inclusive governance.
8. Convene a specialist LGBTIQ+ advisory committee / reference group.
9. Share experiences amongst other regional, rural and remote healthcare providers.
10. Participate in Regional Pride activities.

## **For LGBTIQ+ Community led health & wellbeing organisations**

11. Be visible leaders of LGBTIQ+ health and wellbeing in rural areas
12. Include rural LGBTIQ+ people in governance and senior management.
13. LGBTIQ+ Health Australia provide a national voice for LGBTIQ+ regional rural and remote people.

## **For State Governments**

14. Include people with rural lived experience / expertise on State government LGBTIQ+ advisory committees.
15. Health datasets be 'fit-for-purpose' by including LGBTIQ+ rural health and wellbeing data.
16. Improve LGBTIQ+ health practitioner training for rural practitioners
17. Establish State based LGBTIQ+ rural Communities of Practice
18. Fund State based natural disaster support and recovery organisations to become LGBTIQ+ inclusive



### **For Commonwealth Government**

19. Ensure the voice of rural LGBTIQ+ Australians is heard in the implementation of the 'National Action Plan for the Health and Wellbeing of LGBTIQ+ People 2025-35'
20. Establish and fund a National Regional, Rural and Remote LGBTIQ+ Health Advisory Council
21. Direct the Australian Institute of Health and Welfare (AIHW) to include rural LGBTIQ+ health and wellbeing indicators in their 'Australian Burden of Disease' reports.
22. Initiate and fund development and delivery of rural LGBTIQ+ health assessment, regional LGBTIQ+ referral guides and training packages by rural Primary Health Networks

### **For Arts and Culture**

23. Recognize and fund the positive health benefits from mainstream cultural and specialist Pride events in regional, rural and remote communities.

### **For Philanthropy**

24. Continue and grow LGBTIQ+ led philanthropy granting to rural LGBTIQ+ health.
25. Grow reach of mainstream philanthropy to be inclusive of LGBTIQ+ health and wellbeing in their rural granting programs.

### **Further research**

26. Further research is needed to better understand the lived experiences and health needs of trans, bi, asexual and people with intersex variation, and LGBTIQ+ people of Aboriginal and Torres Strait Islander heritage, living with disability and cultural/religious diversity living in rural settings.
27. A review is needed of Australian and international literature of effective LGBTIQ+ targeted rural health promotion initiatives and their evaluation
28. The GBQ+ Community Periodic Surveys (GCPS) be extended to rural areas
29. Involvement of LGBTIQ+ not-for-profit groups in research data collection.



