

This tip sheet focuses on intersections within the lived experience of LGBTIQ+ people with disabilities. Intersectionality is the way in which multiple aspects of a person's lived experience interact to produce specific experiences of privilege and/or discrimination.

This specific intersection has only recently started to be explored within studies such as:

- [Leonard, W. and Mann, R. \(2018\) The everyday experience of lesbian, gay, bisexual, transgender and intersex \(LGBTI\) people living with disability, No.111 GLHV@ARCSHS, La Trobe University: Melbourne.](#) A study undertaken in Melbourne on the effects of systemic discrimination on the health and wellbeing of LGBTI people with disability
- [O'Shea, A., Latham, J., Beaver, S., Lewis, J., Mountford, R., Rose, M, Trezona, A., Frawley, P. \(2020\). More than Ticking a Box: LGBTIQ+ People With Disability Talking About Their Lives. Geelong: Deakin University.](#) A Victorian research project exploring barriers to LGBTIQ+ people with disability in fully participating in Australian society.

THESE STUDIES NOTE:

- Higher rates of discrimination and reduced service access among LGBTIQ+ people with disability when compared against heterosexual people with disability, and LGBTIQ+ people without disability; (Leonard and Mann 2018)
- Trans and gender diverse people with disability experience even greater discrimination when accessing services than LGB people with disability; (O'Shea, Latham et al 2020)
- Greater restrictions on freedom of sexual expression (particularly for LGBTIQ+ people with intellectual disability); (Leonard and Mann 2018)
- Reduced social support from, and connection with both LGBTIQ+ and disability communities; (O'Shea, Latham et al 2020)
- Many disability services and workers are unwilling to address the sexual and gender identity rights and freedoms of LGBTIQ+ people with disability; (Leonard and Mann 2018)
- Many participants experienced mistreatment within their own communities, including homophobia, biphobia and transphobia within disability communities, and ableism in LGBTIQ+ communities. (O'Shea, Latham et al 2020)

LGBTIQ+ PEOPLE WITH A DISABILITY

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LGBTI+ PEOPLE WITH A DISABILITY

LGBTIQ+ PEOPLE AND NEURODIVERSITY

Evidence suggests that neurodiverse people are more likely to be diverse in their sexuality and/or gender (George R, Stokes MA. Sexual orientation in autism spectrum disorder. *Autism Res.* 2018;11:133-141.). The reasons for this are not currently well understood, but one possibility is that neurodiverse people tend to experience societal pressures and gender norms in alternative ways to neurotypical people.

STEREOTYPING OF LGBTIQ+ PEOPLE WITH DISABILITY

People with disability are sometimes perceived to lack capacity in relation to their sexual needs or desires. Sometimes it is assumed that disabled people have no sexual desires at all, and sometimes people with disabilities are thought to lack control over their sexuality or not understand what constitutes appropriate sexual behaviour. If people do accept that people with disability have sexuality, they are assumed to be heterosexual.

When a person with disability - especially cognitive disability - comes out as being of diverse sexuality and/or gender they are often not believed, as it is assumed they do not have an understanding of sexuality/gender and therefore cannot truly know if they are LGBTIQ+. Alternatively, it may be assumed that someone's sexuality is somehow a result of, or accommodation of, their disability, i.e. the disability makes them less attractive to the opposite gender, and therefore unable to get heterosexual sex, so they turn to others of the same gender.

When people with disability tell you who they are, believe them.

MENTAL HEALTH AND SERVICE PROVIDERS

There is an ongoing narrative that disability is a bad thing in and of itself. This is reinforced by representations in the media, for example:

- Public health advice often uses the possibility of becoming disabled as a threat for people who drive too fast or don't wear helmets.
- People without disability often centre people with disability in their conversations about assisted dying.
- The narrative around COVID-19 only seriously affecting older people or people with underlying conditions implies that the lives of people with disability are worth less than other people.

These narratives often do not include people with disability in the conversation or consider the negative impact of such discussions happening in a public forum.

Like LGBTIQ+ people, people with disability have poorer mental health outcomes than people without disability ([Disability and public health in Australia, Kavanaugh 2020](#)). This is not inherent to having disability, but due to experiences of stigma and discrimination. Intersectionality helps us understand how this might be compounded for LGBTIQ+ people with disability.

People with disability are made to navigate multiple systems in order to access the support they need. These systems often suffer from inherent bias and discriminatory practices, including ableist assumptions often made by the people who staff disability services. Dealing with these practises becomes an additional burden for people with disability. When compounded with ignorance about LGBTIQ+ specific supports, Queer people with disabilities may face even more significant setbacks to receiving care.

Service providers can help reduce this labour by creating safer spaces, where staff are trained, and policies are in place that protect marginalised people and acknowledge intersectionality.

SEXUAL HEALTH & RELATIONSHIPS EDUCATION

People with disability are often infantilised and/or seen as sexless or sterile. When a person with disability communicates their sexuality as Queer, Gay, Lesbian, or Bisexual, they're sometimes met with people saying that they couldn't possibly identify that way since they don't have sex (Myth Busting: Disabilities and Sex, <https://www.independenceaustralia.com.au/health-articles/health-disabilities-and-sex/>).

The assumptions around the sexuality of people with disability plays into how sexual education is designed or, more accurately, not designed. When a minority is seen to not have sex, why educate them? Mainstream resources tend to assume people are cisgender, heterosexual and without disability, however there are specific organisations and resources - like the [SECCA app](#) - which facilitate access to inclusive relationships and sexuality education for people with disability.

Some people with disability may also require support to access sexual services and information, for example with the assistance of professional sex workers: a concept which can be contentious, thus limiting people's human right to have the relationships and sex that they want.

PEOPLE WITH DISABILITY AND COVID-19

Within public discourse, the effects of COVID-19 are often downplayed. The phrase "underlying conditions" is very commonly used within pandemic discourse to imply that healthy people do not have to worry as much about the consequences of contracting COVID-19, yet for people with disability, these words can signify a lack of consideration about them. A disproportionate amount of people with disability are considered to have "underlying conditions" and may choose to disengage with more traditional social interactions and supports to reduce their risk of getting COVID-19 (Improving outcomes for people with disability in COVID-19, https://ozsage.org/wp-content/uploads/2021/10/disability-guidelines_online.pdf). This increases the need for flexible options to access events and supports, so we are all working together to protect all members of our society. This could include holding virtual events, livestreaming physical events or telehealth services.

TIPS

- Acknowledge the intersection of LGBTIQ+ communities and disability in imagery, language, etc.
- When working with people with disability, do not make assumptions about their sexuality and gender.
- Service providers need to be respectful and knowledgeable with talking about sexuality and sexual health in an LGBTIQ+ context.
- Ensure disability spaces are LGBTIQ+ friendly and LGBTIQ+ spaces are accessible for people with disability.
- Bring in voices of LGBTIQ+ people with disability in conversations when creating programs and spaces as consultation is key, nothing for the community without the community.
- Ensure that the voices of First Nations, as well as other culturally and linguistically diverse LGBTIQ+ people, are consulted and represented.

RESOURCES

- [Leonard, W. and Mann, R. \(2018\) The everyday experience of lesbian, gay, bisexual, transgender and intersex \(LGBTI\) people living with disability, No.111 GLHV@ARCSHS, La Trobe University: Melbourne.](#)
- [O'Shea, A., Latham, J., Beaver, S., Lewis, J., Mountford, R., Rose, M, Trezona, A., Frawley, P. \(2020\). More than Ticking a Box: LGBTIQ+ People With Disability Talking About Their Lives. Geelong: Deakin University.](#)
- [Working with LGBTI people with disabilities \(VicHealth\)](#)
- [Outing Disability Project](#)



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