

**Exploring perceptions of Alcohol and Other Drug (AOD) service workers regarding the inclusion of Transgender, non-binary and/or Gender Diverse (TGD) clients in accessing public residential treatment in Victoria.**

Nic Robinson-Griffith  
(They/He)

## Acknowledgement of Country



# Background



There are increasing rates of TGD people accessing healthcare services in Australia (Zwickl et al., 2019).

Limited information on the prevalence of TGD people in Australia. N= .1% - 2.0%; 8% (Cheung et al., 2019; Royal Australian College of General Practitioners, 2023).

What does this mean for public, residential AOD services?

## Victorian State Based Policy

Victorian Equal  
Opportunity Act  
(2010)

Pride in our future:  
Victoria's LGBTIQ+  
strategy 2022-32  
(2022)

Victorian  
Charter of  
Human Rights  
and  
Responsibilities  
(2006)

# Objective



Due to the rise in number of TGD people accessing health services within Australia, it is more important than it has ever been to ensure health services and workers are equip to provide inclusive care.

1. To gather information on residential AOD workers' perspectives of their services ability to provide TGD-inclusive care.
2. To develop insights into the levels of TGD inclusive behaviour exhibited by AOD workers, working in residential AOD programs.

# Method



## **Qualtrics Survey designed, taking the format of:**

- Mixed Methods study
- Quantitative Survey:
  - Worker and Service demographic information
  - Trans Inclusive Provider Scale (TIPS)
  - Trans Inclusive Behaviour Scale (TIBS)
- Qualitative
  - Key informant interviews with service professionals

## **Recruitment:**

- A total of 27 separate residential AOD programs, operated by 15 service providers were identified as being eligible to participate in the study.
- Key contacts were established at each organisation, and were asked to distribute the survey to relevant workers

# The TIPS Survey:

(Kattari, et. al, 2020)



Category	Example Question
Passive trans-inclusive marketing	<i>Your service has a rainbow pride flag on the website</i>
Provider name and pronoun usage	<i>Front-line workers use correct pronouns for their clients</i>
Proactive trans-inclusive marketing	<i>Your service advertise at pride events</i>
Internalized trans-inclusive knowledge and actions	<i>Your service has a gender-inclusive bathroom at the office/s</i>
Comfort with trans-affirming referrals	<i>Worker at your service feel comfortable referring out to trans-inclusive provider for trans-related surgery</i>
Intake forms	<i>Your service has a space on intake forms to share your pronouns</i>



# The TIBS Survey:

(Kattari, et. al, 2020)



## Questions from the TIBS

*I use gender neutral language to refer to people whose pronouns I do not know*

*I share my pronouns when I introduce myself to someone new*

*I have asked my friends, co-workers, and/or family members what their pronouns are*

*I read books/blogs/articles by transgender women, transgender men, and gender diverse individuals.*

*I am aware of local resources that offer support to transgender people*

*I speak out against 'womyn born womyn or transgender exclusive policies.*



# Results: Population Description



## Age:

Range: 21 - 67  
Mean Age: 40



## Gender:

Male: 27  
Female: 47  
Gender Diverse: 5



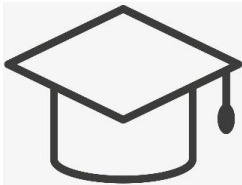
## First Nations Status:

Aboriginal Australian: 7  
Non- Indigenous: 71



## LGBTIQ+ Status:

Queer: 21  
Non-Queer: 55  
Undisclosed: 2



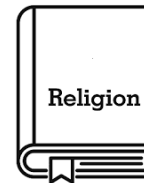
## Educational Status:

University  
Educated: 50  
Non-U/E: 28



## Job Role:

Clinical: 20  
Non- Clinical: 41  
Leadership: 12  
Other: 5



## Religious Status:

Religious: 36  
Not Religious: 42



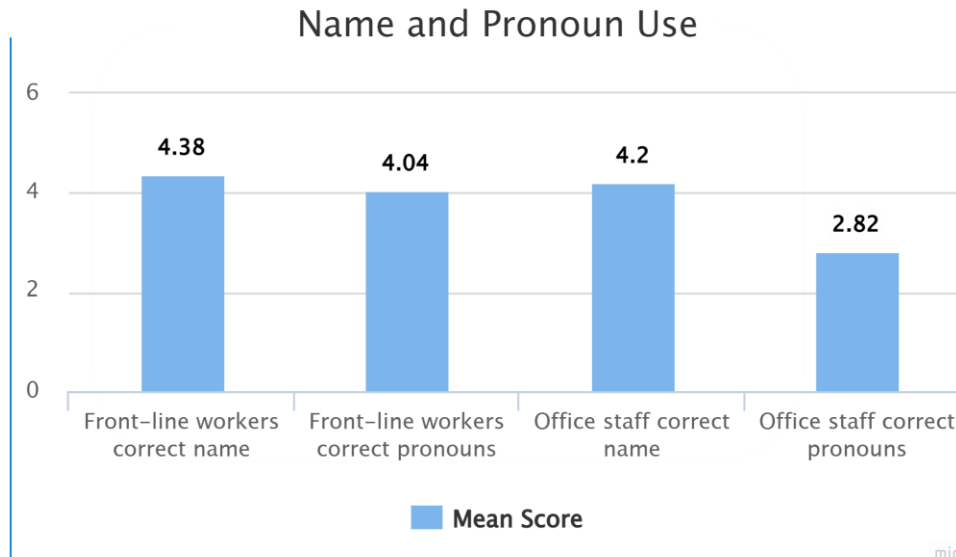
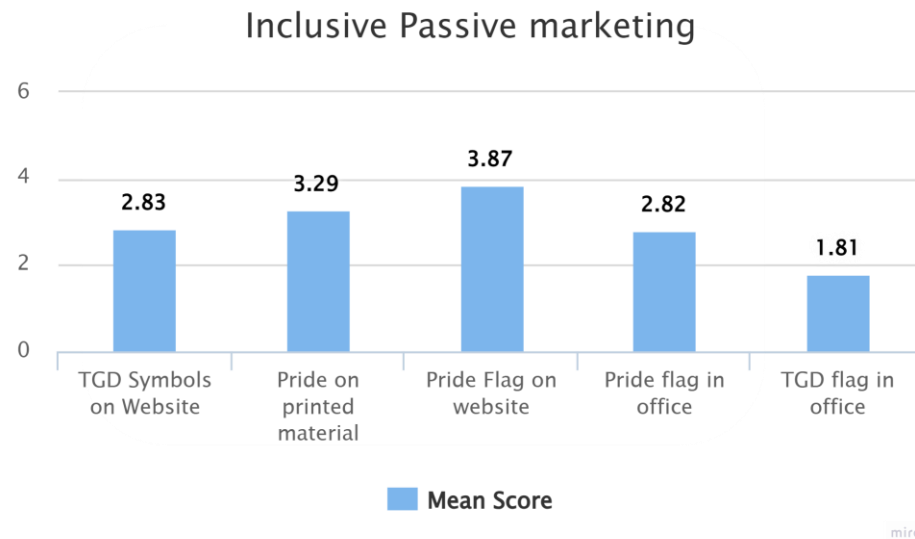
## TGD Friend/Family:

Yes: 28  
No: 50





# Results: Trans-Inclusive Provider Scale (TIPS)



# Results: Trans-Inclusive Behaviour Scale (TIBS)



Participant Demographic and TIBS total	Asymmetric Differential	Pearson Correlation
Binary Genders	.216	-
University Educated	.865	-
Religion	.002	-
Having a TGD friend/family		
Age	-	-.334

## Limited correlation between:

- TIBS totals and the binary genders;
- TIBS totals and being university educated

## Correlations between:

- TIBS total and Religion;
- TIBS total and having a TGD friend/family member
- Correlation between TIBS score and Age



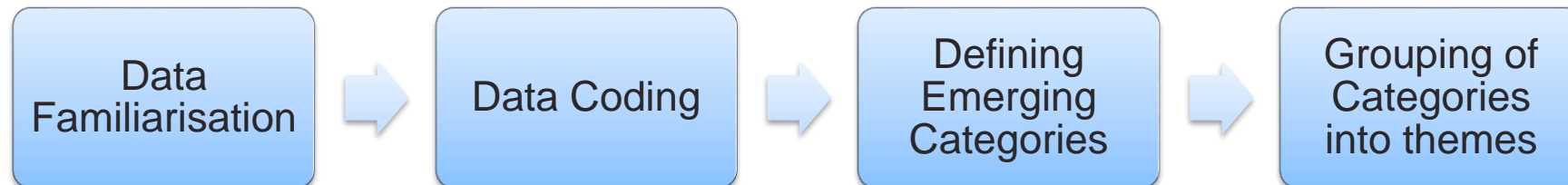
# Methods: Qualitative Data



## Semi-structured key informant interviews

- Selection of key informants: Selective sampling technique.
- Aim to gather real-world examples around supporting TGD people to access, and some of the experiences they have witnessed.

## Data analysis method



# Methods: Qualitative Data



## Service Selection Phase

*“A lot of the reputational implications of a TGD person having a bad experience in a detox.....will be talked about in queer community”.*

## Intake Phase

*“And a way risk is likely to be attributed to certain people. That one behaviour from a cis-man may be labelled 'assertive' while it might be labelled 'aggressive' if it's from a transwoman of colour”.*

## Treatment Phase

*“Make sure that there is plenty of room for gender diverse people who don't identify within the gender binary.....whether that means that there need to be some consideration for a women's only space that includes transgender women and not gender diverse people.”*



## What does this tell us?



In response to a closing question, two out of three AOD workers supported the idea of allowing TGD clients to choose a service or area within mixed-gender facilities that aligns with their gender identity, as well as permitting TGD clients to access single-gender services that match their gender identity.

This means that 1 out of 3 workers don't.

Although many services and individual workers are committed to providing inclusive care for TGD people, gaps in knowledge and skills present a significant barrier to achieving this.



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# Thank You

Nic.Robinson-  
Griffith@thorneharbour.org



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**harbour**  
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