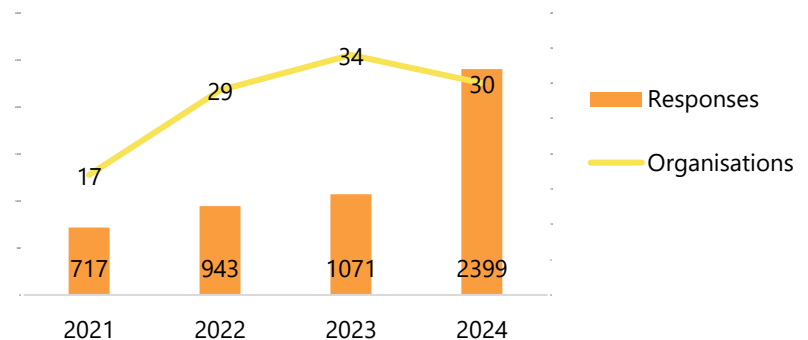


PRACTICE POINTS • 2024 HWEI SURVEY

- + Significant growth in participation of the Survey in 2024 indicates that employees are increasingly engaging in LGBTQ+ inclusion initiatives.
- + Overall, support for organisational inclusion initiatives is high, although there are some key differences between responses of LGBTQ+ employees and non-LGBTQ+ employees, showing a potential gap in a deep understanding of the barriers that LGBTQ+ service users may face.
- + There has been a decline in understanding of health disparities experienced by LGBTQ+ people, and awareness of organisational communications about inclusion initiatives and the availability of training and other resources is significantly lower, showing work needs to be done in this area.
- + Fewer respondents are comfortable with inclusive actions for trans or gender diverse clients, such as the process to use when someone's name does not match their Medicare information, or the use of affirming pronouns. But more people are comfortable asking about sexuality and gender within relevant healthcare contexts.
- + Fewer respondents are active allies, although about half would become more active with the provision of information.

Key Insights

This year marks the fourth annual Health + Wellbeing Workplace Equality Index (HWEI) Employee Survey. The survey helps organisations to evaluate the inclusivity of their services for LGBTQ+ clients and service users.



In 2024, the purpose of and content of the survey was redesigned, resulting in a reduction to the number of questions asked, and a greater focus on inclusive service provision.

30 organisations participated, with a combined reach of over 20 million clients, and over 60,000 full time equivalent (FTE) employees.

On average just over 40% of employees responded from each organisation, (ranging from 1% through to 100% of FTE) with a total of 2,399 responses received, a 124.0% increase on 2023, and a 234.6% increase in respondents since 2021.

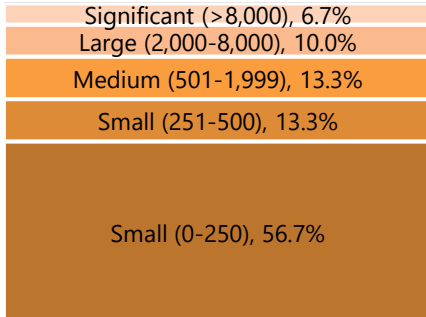
Two thirds of organisations were able to engage over 10% of their employees to participate in the survey, an amazing achievement!

We note a slight drop in the number of organisations taking part between 2023 and 2024; this is due to some health and wellbeing organisations opting to participate in the annual AWEI survey (measuring the impacts of internal employee inclusion initiatives) in alternating years.

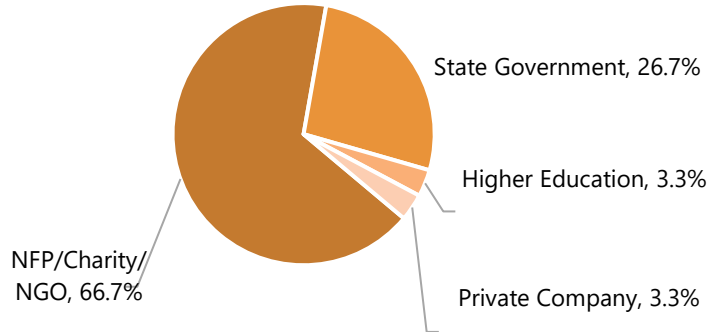
Organisation Demographics

70.0% of participating organisations are small organisations with under 500 employees, and the 66.7% of organisations operate in the non-profit or charity sector.

Organisation by size



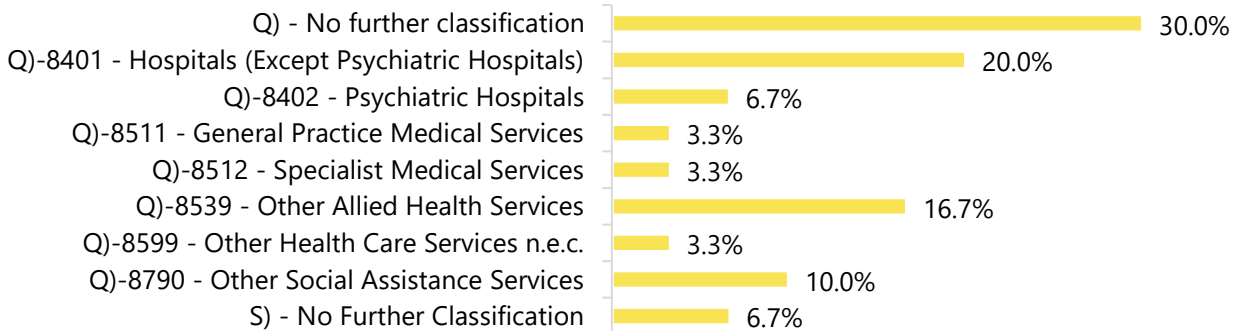
Organisation by Sector



93.3%, 28 of the 30 organisations, identified their primary Australian and New Zealand Standard Industrial Classification (ANZSIC)ⁱ as within the Q) Health Care and Social Assistance category while the remaining 2 classified themselves primarily as S) Other services.

Of the 28 there was a reasonable spread across the Health Care and Social Assistance subcategories, though 30.0% did not advise a subdivision.

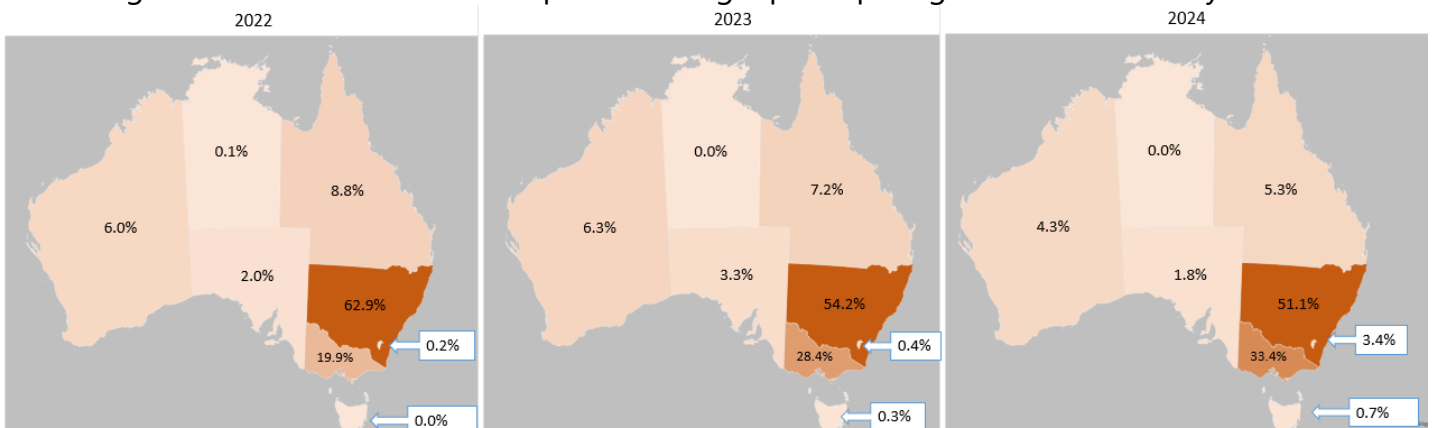
% organisations participating by ANZSIC subdivision



Respondent Demographics

In the workplace

In 2024, we continued to see the trend of the proportion of NSW respondents lowering as other states begin to be more active in this space and begin participating in the HWEI survey.



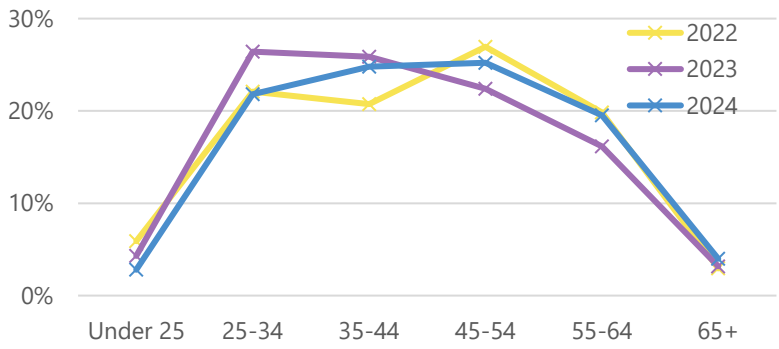
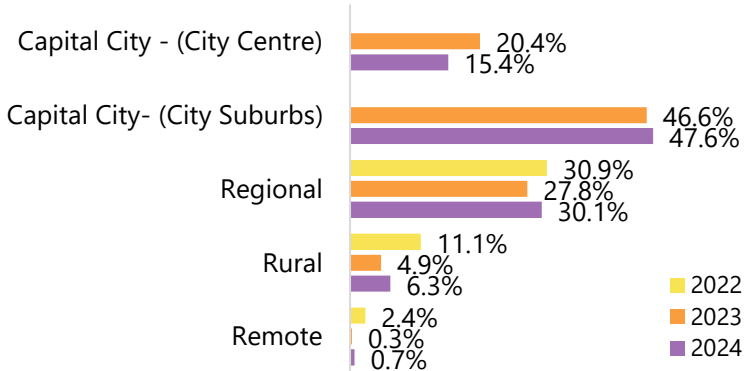
Health sector organisations with employees in the Northern Territory have not yet participated in the survey.

In 2024, 62.9% of responses were received from individuals working within city/metropolitan areas, 6.1% fewer than last year.

The combined responses from regional, rural, and remote areas increased participation overall by 12.4%.

Age

Age demographics of respondents have shifted to a more even spread within the 25–54-year groups though the proportion of respondents under 25 has continued to drop. Those over 55 has risen, with the 65+ cohort having the greatest increase, 21.9% from 2023.



LGBTQ+ Respondents

In 2024, 124.0% more responses were received compared to 2023. Along with the significant growth of respondents we have seen a higher proportion of individual responses from non-LGBTQ+ employees. Encouragingly, we see an increase in the number of employees in the health and wellbeing sector who can be identified as LGBTQ+ and are taking part in the survey.

Of the 2399 responses, 540 respondents are LGBTQ+, an increase of 273 respondents, though a proportional reduction of 9.7%. The flow on effect is that the proportion of individuals identifying with gender neutral pronouns or being LGBTQ+ has declined, which has an impact on some of the data we will present in the rest of this Practice Point.

	% respondents in 2024 v 2023	% change	# Change
LGBTQ+	22.5% vs 24.9%	- 9.7%	+ 273
Non-LGBTQ+	76.5% vs 72.5%	+ 5.5%	+ 1059
Unknown	1.0% vs 2.5%	- 62.0%	- 4
Total			+ 1328

Gender Identity

In 2024, 12.8% of LGBTQ+ respondents are of diverse gender.

2.5% of respondents identify outside of the binary (Non-Binary or A different term). The proportion of respondents who did not answer this question rose from 0.8% to 1.2%.

Over the past three years, the number of respondents with non-binary identities has increased 210.3%.

Respondents to the Health + Wellbeing survey are overwhelmingly most likely to be cisgender women though this percentage has dropped from 79.1% to 76.4% in the past 12 months.

Sexual orientation

People of diverse sexuality make up 22.3% (n534) of all respondents, and 98.9% of all LGBTQ+ respondents.

Of those, the greatest proportion of individuals identify as bi/pansexual, 45.5%, with gay/lesbian individuals making up 35.6%.

The remaining 18.9% individuals identifying as Queer (11.8%), Asexual (2.6%) or with another unspecified term (4.5%).

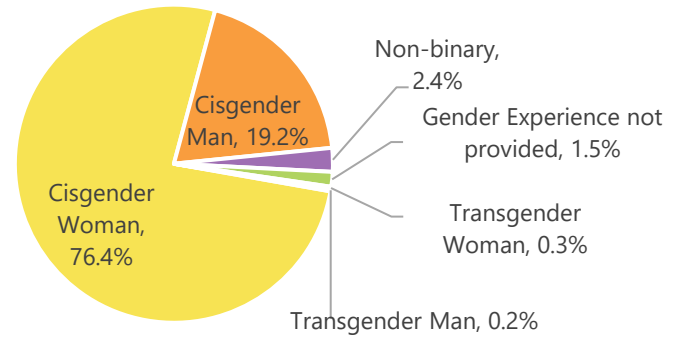
Pronouns

In 2024, 69 people (3.2% of respondents) have advised using gender-neutral (they/them) pronouns, or rolling pronouns (i.e., she/they or he/they). Additionally, 0.7% have stated they use a different pronoun.

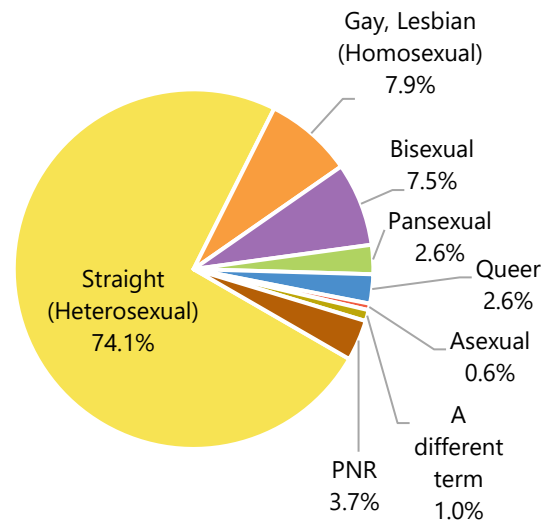
Whilst this may seem a small number, this is reflective of the general population seen within the AWEI Survey¹, and is becoming more common. This year we did see a greater percentage of respondent choosing not to respond to this question, going from 3.3% in 2023 to 5.5% in 2024. This may be related to the significant increase in responses received this year from non-LGBTQ+ individuals.

These statistics show there is a good spread of diversity within the respondent population.

% respondents by Gender identity

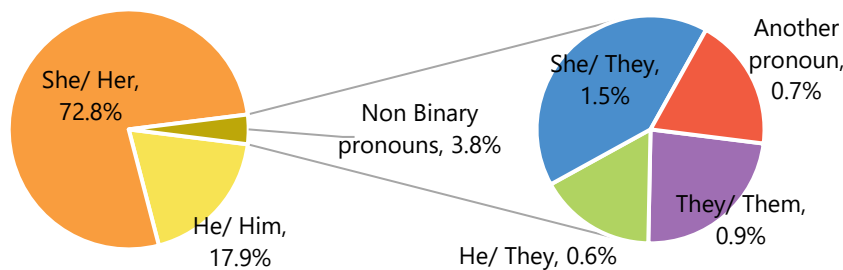


Respondents by Sexuality



¹ Australian Workplace Equality Index Employee survey <https://www.pid-awei.com.au/data-analysis/>
2024 HWEI Practice Point - Key Insights

With the remainder of the practice point we will highlight where there is a greater than 10% discrepancy between the LGBTQ+ and non-LGBTQ+ populations, suggesting LGBTQ+ employees may be more aware of the barriers faced by LGBTQ+ clients.



General Views

Personal beliefs on organisation inclusion

A high proportion of respondents agree that this aspect of diversity and inclusion is important both within the health and wellbeing sector and within their organisation. Of all respondents:

- 90.4% personally support the work their organisation does for the inclusion of clients of diverse sexuality and/or gender.
- 89.1% believe they understand some of the unique challenges that clients of diverse sexuality and/or gender face within healthcare experiences.
- 92.4% believe work in this aspect of diversity & inclusion has a positive influence on person-centred care.
- 90.6% believe a client's diverse sexuality may impact how they navigate the health care system, their healthcare needs and/or their experiences.
- 91.6% believe a client's diverse gender and/or trans experience may impact how they navigate the health care system, their healthcare needs and/or their experiences, and

Differences begin to show when looking at specific areas with LGBTQ+ respondents more likely by:

- 28.7% to believe there are more than two genders (LGBTQ+: 85.0% vs non-LGBTQ+: 66.0%)
- 30.3% to believe their organisation should put more effort into this aspect of diversity & inclusion for clients (LGBTQ+: 76.5% vs non-LGBTQ+: 58.7%)

Additionally, LGBTQ+ respondents are less likely by 58.4% to agree their personal beliefs mean they cannot look after clients of diverse sexuality and/or gender (LGBTQ+: 0.9% vs non-LGBTQ+: 2.2%)

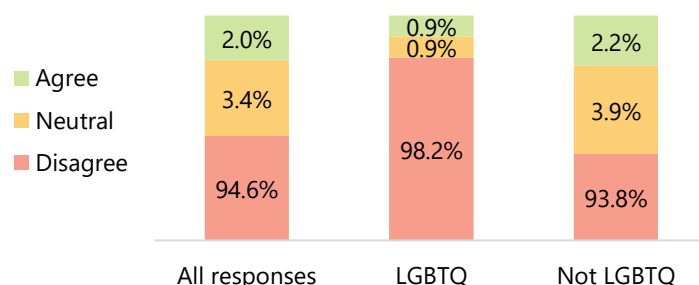
This year we saw a 3.1% decline in respondents agreeing that it is important that "services in the care and health sectors be active in LGBTQ+ inclusion" (2024: 91.4%, 2023: 94.4%, 2021: 92.8%).

2024 saw the introduction of a series of questions to examine employee's understanding of the health care experiences of LGBTQ+ Clients may have compared to the general public.

Overall:

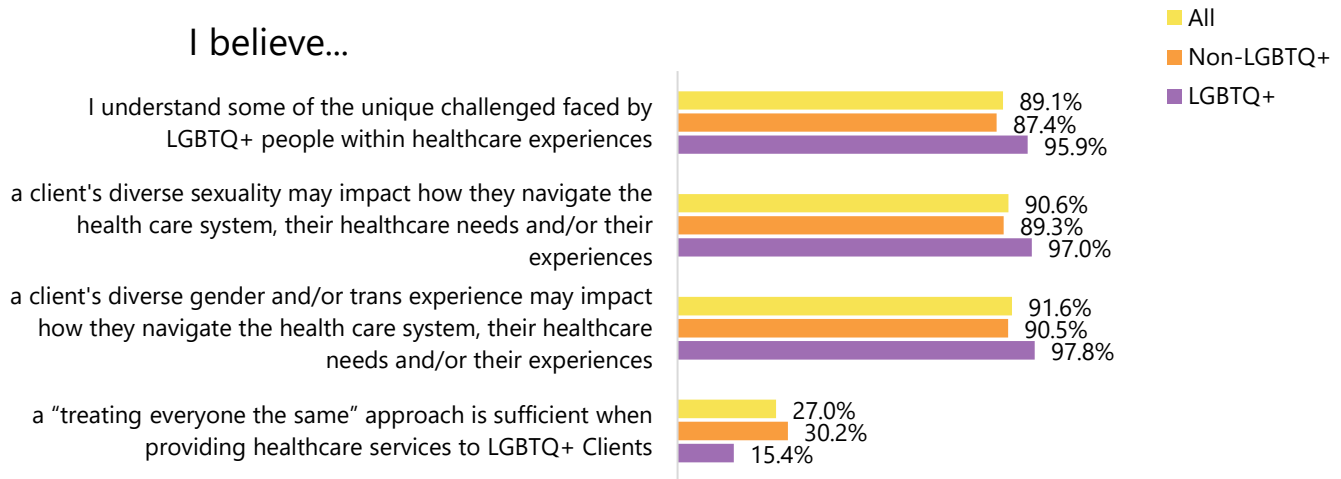
- 89.1% of respondents believe they understand some of the unique challenges that LGBTQ+ clients face within healthcare experiences.

I cannot look after clients of diverse sexuality and/or gender



- 90.6% agreed that a client’s diverse sexuality may impact navigation the health care system, their needs, and their experiences.
- 91.6% agreed that a client’s diverse gender and/or trans experience may have an impact.

Comparing all data, with the responses of those known to be LGBTQ+, their agreement is understandably higher.



The exception to this is those who feel that the approach of treating “everyone the same” is sufficient within the health care area. Overall, only 27% of respondents have agreed to this which shows that the majority of healthcare employees believe in individualised healthcare experiences though non-LGBTQ+ respondents are 96.4% more likely to agree to this statement (non-LGBTQ+ 30.2% vs LGBTQ+: 15.4%).

Awareness and Visibility of LGBTQ+ inclusion

When looking at awareness and visibility for LGBTQ+ diversity and inclusion within the organisation, 91.9% of all respondents agreed they understand why their organisation puts effort into this area, though only 65.2% of respondents agree they have heard their executive leaders speak positively about it, which drops to 60.4% of LGBTQ+ respondents.

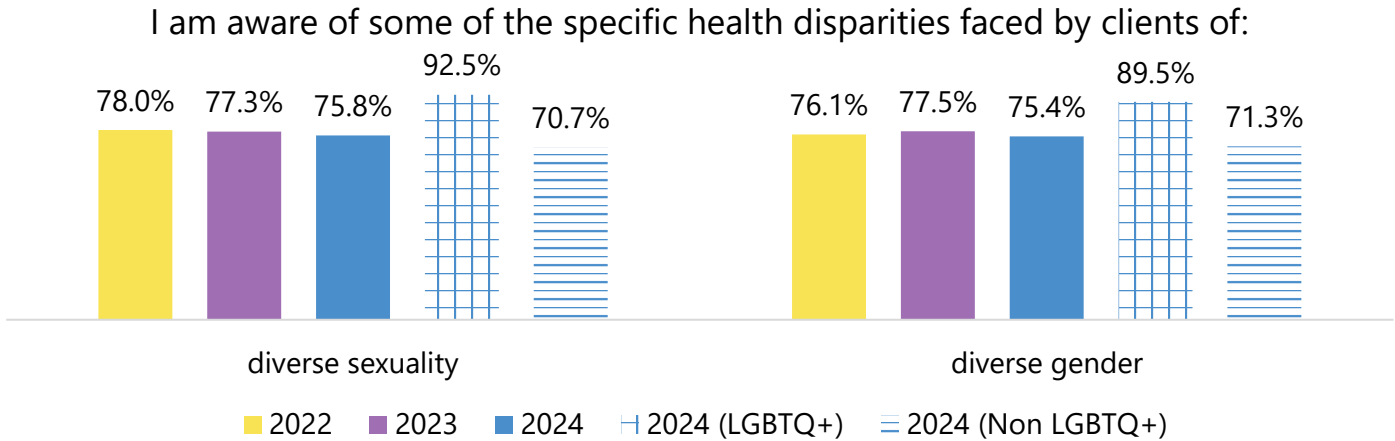
Overall:

- 67.0% agree work or related initiatives concerning this aspect of diversity & inclusion has been communicated throughout the year; 11.4% fewer LGBTQ+ respondents agreed compared to non-LGBTQ+ (LGBTQ+: 61.1% vs non-LGBTQ+: :69.0%)
- 58% agree awareness or ally training for this aspect of diversity & inclusion has been made available throughout the year; again, there is a 15% difference in agreement. (LGBTQ+: 51.0% vs non-LGBTQ+: :60.0%)
- 83.4% agree LGBTQ+ training should be mandatory for employees who managers or supervise other staff in in client facing roles, with a 11.1% difference (LGBTQ+: 90.9% vs non-LGBTQ+: :81.9%)
- 83.6% agree LGBTQ+ training should be mandatory for anyone in client facing roles with a 10.5% difference (LGBTQ+: 91.1% vs non-LGBTQ+: 82.5%)

10.2% more non-LGBTQ+ respondents have attended training in the past year (LGBTQ+: 39.9% vs non-LGBTQ+: 44.0%)

Understanding health disparities of LGBTQ+ clients

There has been a small decline in the proportion of respondents who agree to being aware of some of the specific health disparities faced by people of diverse sexuality (2024: 75.8%, 2023: 77.3%, 2022: 78.0%) or diverse gender (2024: 75.4%, 2023: 77.5%, 2022: 76.1%).



The difference between LGBTQ+ and non-LGBTQ+ respondents shows the importance of training for all employees on these elements of practice as it relates to health services. This can include LGBTQ+ clients preferring to speak to someone they are more easily able to relate to, the ability for employees to discuss health services as related to sexuality and gender and to be able to discuss or refer to appropriate services where an employee with this knowledge is not available in-house.

Creating LGBTQ+ inclusive environments

When looking at the inclusive environment of an organisation, the level of understanding and comfort speaking about LGBTQ+ issues within a health context is imperative to ensuring good outcomes for clients. A worker who is uncomfortable with LGBTQ+ issues may not ask important questions required to provide appropriate care, or may come across as distant or unwelcoming, and impact likelihood of disclosure.

Whilst agreement remains high, this year we have seen a reduction in knowledge and comfort levels which can be attributed to the larger proportion of non-LGBTQ+ respondents.

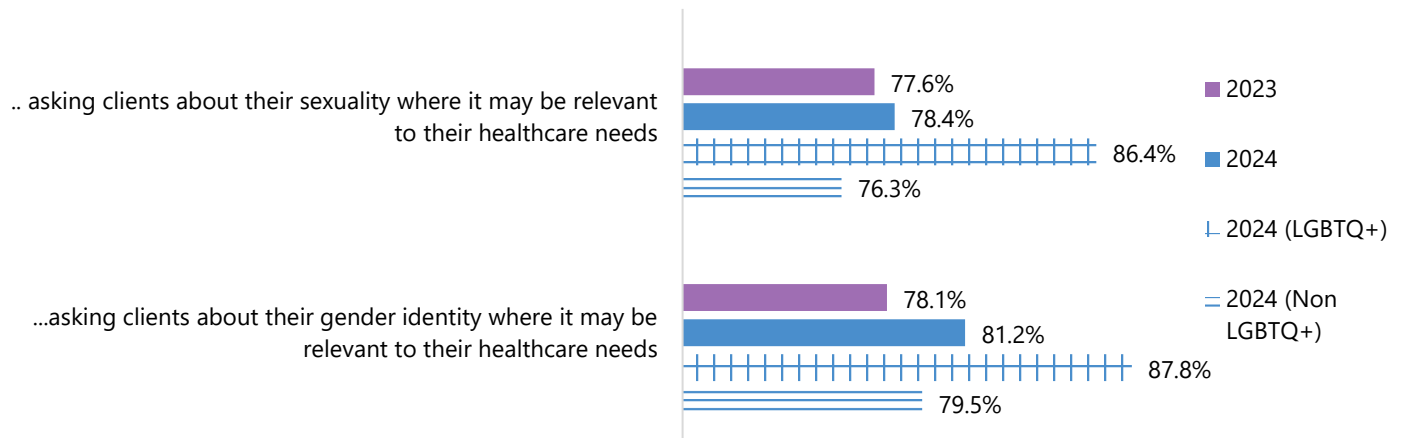
This year:

- 15.3% of respondents (20.8% higher than 2023) disagreed that they “know the process to follow if a client wished to be called by a different name than that listed on their official documentation” (2024: 15.3% v 2023: 12.6%),
- 3.8% fewer respondents agree they are comfortable using personal pronouns which affirm their client’s gender (2024: 90.4% v 2023: 93.9%), LGBTQ+ respondents are 11.8% more likely to be comfortable.
- 2.6% fewer agree they would be comfortable with clients talking about their same-gender or gender diverse partners (2024: 94.1% v 2023: 96.6%), LGBTQ+ respondents are 7.3% more likely to be comfortable.

When it comes to discussing and asking about sexuality and gender within relevant healthcare contexts, comfort levels have increased from previous years. 78.4% of respondents are comfortable asking clients about their sexuality, and 82.1% are comfortable asking about gender.

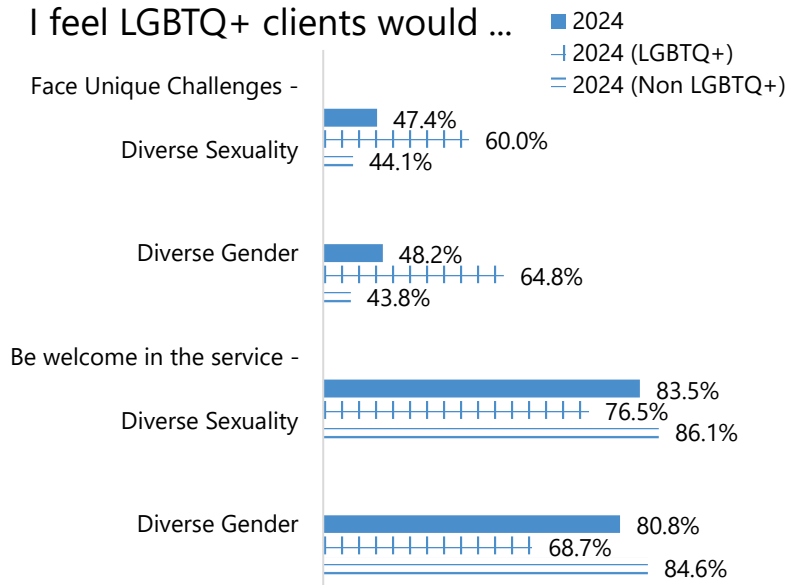
LGBTQ+ respondents are agreeing to being comfortable 13.2% and 10.4% more than non-LGBTQ+ respondents, further showing that having a diversity of employees may impact on the experiences of clients within an organisation.

I would be comfortable...



This year we asked respondents to consider how an LGBTQ+ client would feel accessing or using services provided by their organisation. Non-LGBTQ+ respondents are 26.6% and 32.4% less likely to feel that clients of diverse sexuality or diverse gender (respectively) would face unique challenges or barriers to accessing services.

I feel LGBTQ+ clients would ...



These differences are further seen when discussing LGBTQ+ people feeling welcome at the service. Non-LGBTQ+ respondents are more likely to feel that LGBTQ+ clients would be welcomed by 12.5% (diverse sexuality) and 23.0% (diverse gender).

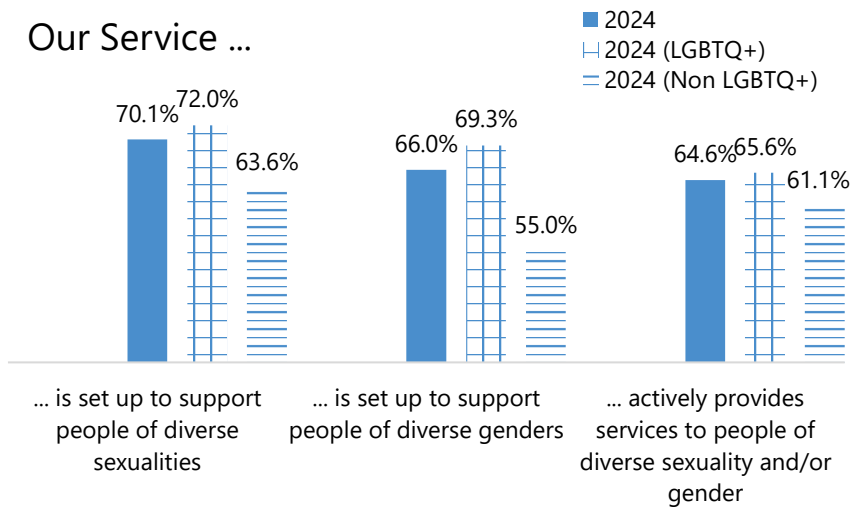
22.1% more LGBTQ+ respondents agree they know how to refer clients to other services who provide LGBTQ+ specific support (LGBTQ+: 65.0% vs non-LGBTQ+: 53.2%), and 14.6% less LGBTQ+ Employees feel that a client affirming their gender would be fully supported by the service (LGBTQ+: 72.4% vs non-LGBTQ+: 84.8%).

Only 46.6% of all respondents are aware of 'all-gender' or gender-neutral facilities being available for client use.

Regarding service provision, LGBTQ+ respondents are less likely across the board to agree that their service is set up for clients of diverse sexuality or gender, or that they actively provide services to LGBTQ+ clients.

Ensuring a client is supported by an employee comfortable discussing LGBTQ+ related matters will impact client outcomes and make it easier for clients to seek health.

Our Service ...



Alongside the opinions of respondents to the accessibility of their organisation, and potential feelings of clients, is the availability of resources to support LGBTQ+ service provision.

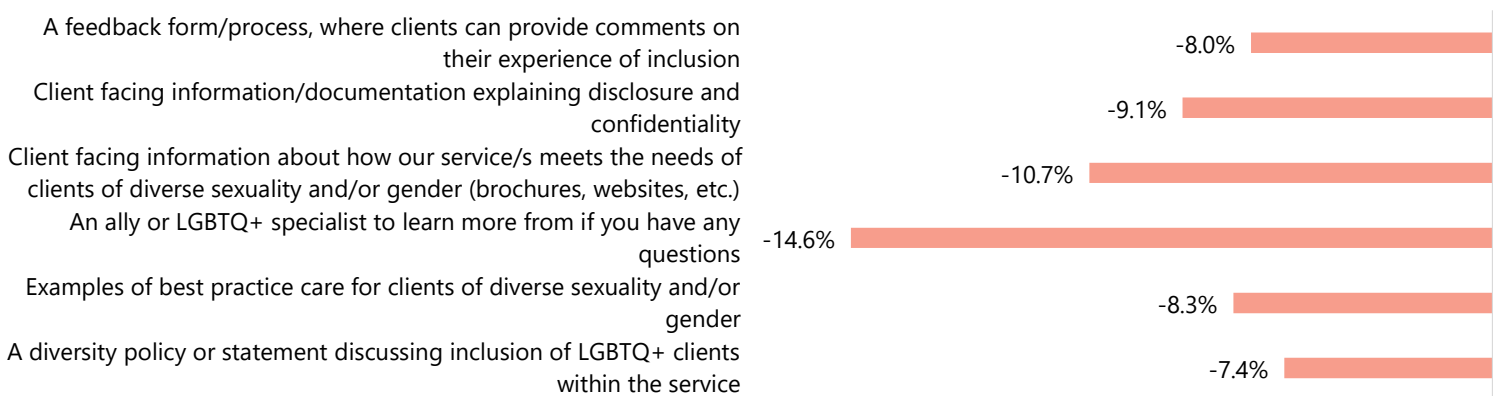
Since last year, there was small increases (less than 5%), of respondents being able to find some resources including a diversity policy or statement (2024: 61.8% vs 2023: 60.9%), an ally or LGBTQ+ speciality to ask questions of (2024: 60.8% vs 2023: 60.5%).

9.4% more respondents can find educational resources to learn more about working with LGBTQ+ clients (2024: 66.2% vs 2023: 60.5%), and 5.0% more are able to find examples of best practice care for clients of diverse sexuality and/or gender though this is still less than half of all respondents (2024: 46.5% vs 2023: 44.3%).

Concerningly:

- 8.6% fewer respondents can find client facing information/documentation explaining disclosure and confidentiality (2024: 61.2% vs 2023: 67.0%),
- Only 48.8% of respondents can find client facing information about how the service meets the needs of LGBTQ+ clients (2024: 48.8% vs 2023: 60.5%), and
- the availability of feedback forms for clients to provide comments on their inclusion experiences has slightly decreased (2024: 61.8% vs 2023: 62.5%)

Non-LGBTQ+ respondents are less likely to find:



Non-LGBTQ+ respondents are generally less likely to be able to find these resources with between 8.0% and 14.6% fewer agreeing across all statements except the ability to find educational resources, which is 2.4% higher in non-LGBTQ+ respondents.

Addressing bullying and harassment behaviour towards clients

Following on from the increased focus on bullying and harassment behaviours in 2023, this year we are seeing significantly greater negative responses related to negative behaviours by staff targeting LGBTQ+ clients. Respondents were asked to consider workplace incivility behaviours such as negative commentary, jokes and/or innuendo, and more serious behaviours within their organisation.

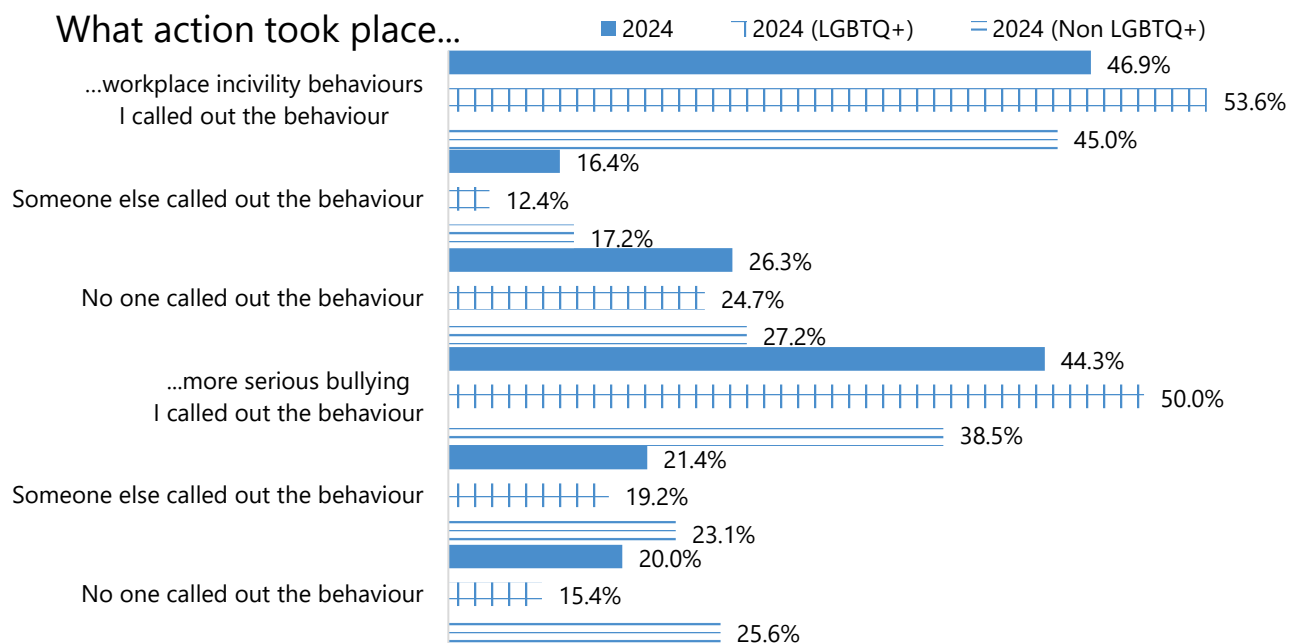
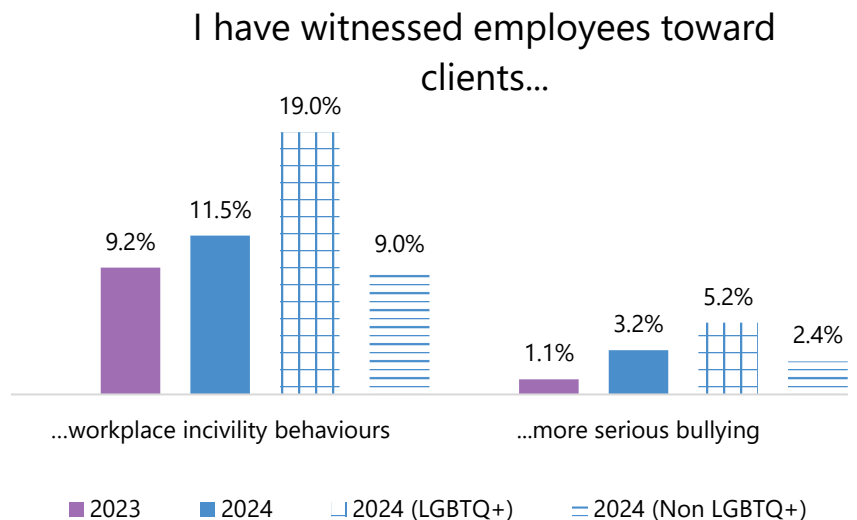
8.3% fewer respondents agree that there are identified confidential avenues to safely report bullying/ harassment related to a client's diverse sexuality and/or gender (2024: 71.1% vs 2023: 77.5%)

26.1% more respondents agreed to witnessing workplace incivility and 178.4% more have witnessed serious bullying.

LGBTQ+ respondents are significantly more likely to agree to witnessing these behaviours.

When workplace incivility was witnessed, 14.9% more respondents in 2024 agreed that no one called out the behaviour, and this rises to 140% more respondents advising that no one called out more serious bullying.

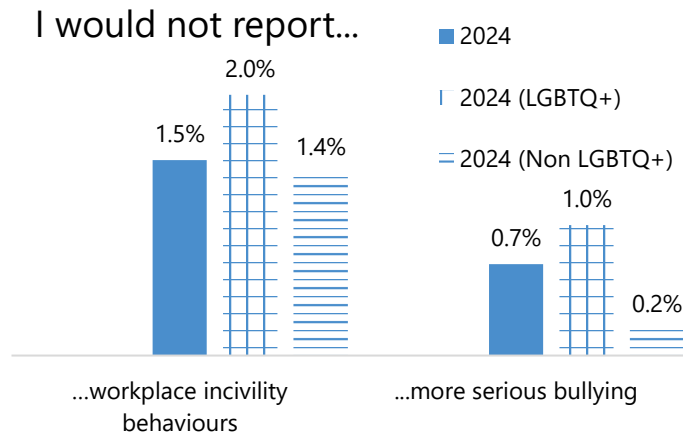
LGBTQ+ respondents were 19.0% more likely to call out workplace incivility, and 30.0% more likely to call out more serious behaviours.



Respondents were also asked who they would report behaviours to. 1.5% of respondents advised they would not report workplace incivility behaviours, and 0.7% of respondents would not report more serious behaviours towards clients.

Interestingly LGBTQ+ respondents are 35.3% more likely to advise they would not report workplace incivility and 79.7% more likely to not report more serious behaviours

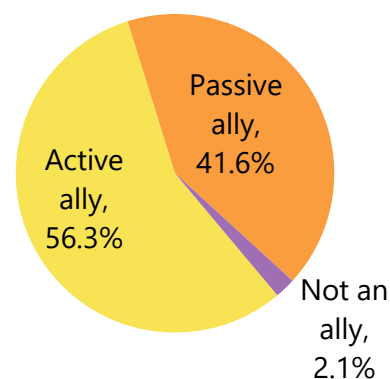
I would not report...



Allyship

An ally is any person who is willing to support LGBTQ+ people, regardless of if they identify as LGBTQ+ or not.

7.3% fewer respondents this year consider themselves active allies, (2024: 56.3%, 2023: 60.7%). The number who advised they were not any ally (and do not support LGBTQ+ inclusion) rose from 1.2% to 2.1%, an increase of 71.9%.



Of the 43.7%, who are not active allies, there have been significant shifts in respondents' reasons for this:

- 118.4% more respondents feel being an active ally would be frowned upon by someone/people with influence over their career,
- 57.9% more respondents agree they do NOT have a personal interest in LGBTQ+ inclusion or allyship,
- 41.5% more respondents fear being ridiculed or the target of jokes, and
- 20% more agreed that people thinking that they are of diverse sexuality or gender stops them from being an active ally.

Being too busy is the most consistent reason across all cohorts sitting between 32.4% and 33.3%, for all other reasons we are seeing significant discrepancies between LGBTQ+ and non-LGBTQ+ respondents.

LGBTQ+ respondents are more likely by:

- 257.7% to be concerned that others will think they are of diverse sexuality/ gender,
- 385.1% to be concerned about being ridiculed or the target of jokes, and
- 319.5% to feel it would have an impact on their career.

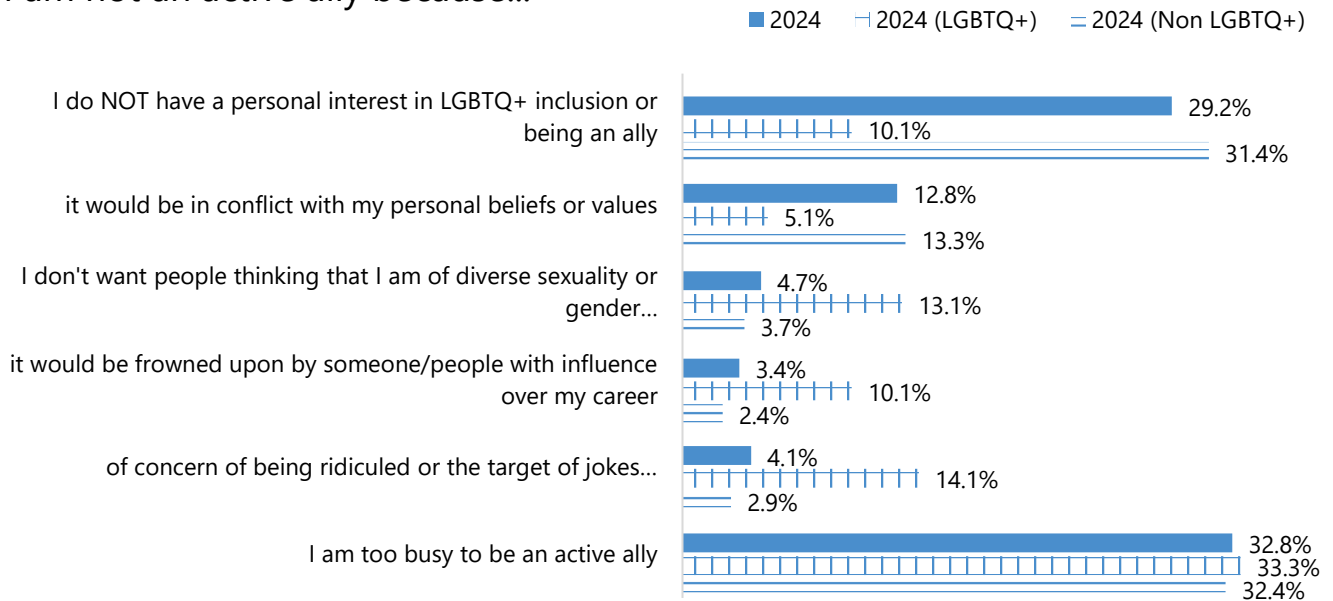
Non-LGBTQ+ respondents are more likely by:

- 163.8% to agree that being an active ally would be in conflict with their beliefs and
- 210.8% to advise they have no personal interest in LGBTQ+ inclusion.

In terms of information that could influence someone to becoming more active in their allyship, unfortunately, there was a 52.1% increase in the proportion of respondents who advised that nothing would influence them, which equates to 17.7% of all responses, and 18.1% of all non-LGBTQ+ respondents.

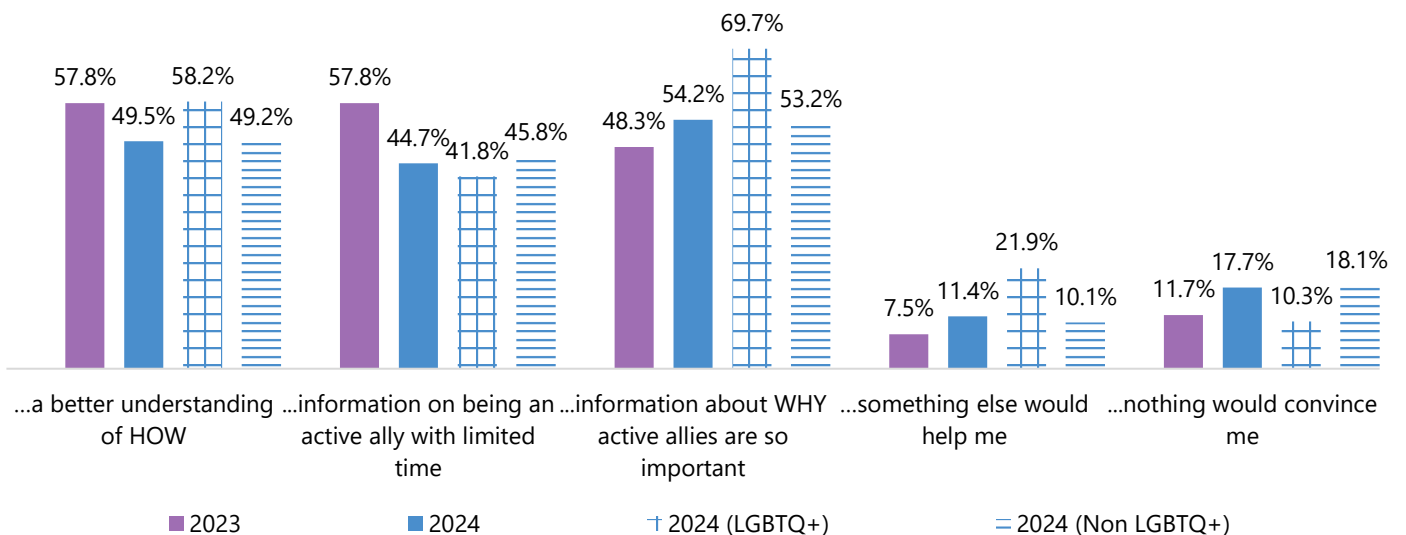
However, around half of non-active allies still agree they could be influenced to be more active via the provision of information on how to be an ally, why it is important, and how to be an ally with limited time.

I am not an active ally because...



There was a 53.1% increase in respondents advising there was something else that could influence them, and which is important for organisations explore further.

Is there anything that could influence you to be an active ally?



ACTION POINTS – WHAT CAN YOU DO?

1. Ensure you have a clear strategy and action plan to drive your LGBTQ+ inclusion initiatives, with appropriate people, structures, and governance in place, and have access to knowledge and expertise to help inform your strategy.
2. Ensure you have a plan to measure the success of your initiatives, and be prepared to change as necessary, and as leading practice develops.
3. Ensure your Senior Leaders visibly support the provision of LGBTQ+ inclusive service, and can role-model inclusive behaviours.
4. Develop resources to support all employees understand the barriers for LGBTQ+ clients, and how to support them, and ensure they are well communicated and easy to locate. Pay particular attention to addressing health disparities, and identifying and dealing with negative behaviours that are often experienced by LGBTQ+ clients.
5. Ensure people in critical functions within your organisation have role-specific knowledge required to perform their roles inclusively.
6. Review your intake documentation and other forms and data collections processes to ensure they are inclusive of LGBTQ+ people, and communicate this to all employees.
7. Develop a privacy and confidentiality policy and staff guidelines, regarding the collection and management of LGBTQ+ sensitive data, and communicate this to all employees.
8. Review your service processes to check they are inclusive of LGBTQ+ people, and communicate this to all employees.
9. Develop a network or other health services, wellbeing providers, professional associations, or communities of practice on the topic of LGBTQ+ inclusive service provision. Provide referrals information to all employees.
10. Organisations who participated in the survey, compare your organisation's results to all results summaries, to see how your organisation is measuring up.
11. If your organisation is not yet participating, sign up to the HWEI Employee survey. There are over 1 million employees working in the Health Care and Social Assistance sector in Australia; the more organisations and employees who participate, the more beneficial it is for everyone.
12. HWEI members - please speak to your Relationship Manager regarding how to use this information to influence your activities and promote a more inclusive workplace and environment for your staff and clients.

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Permission is given to cite any of the data within this factsheet providing the following reference is utilised.

Pride in Health + Wellbeing (2023). Health + Wellbeing Equality Index (HWEI) Employee and Client Surveys. ACON's Pride Inclusion Programs

¹[Australian and New Zealand Standard Industrial Classification \(ANZSIC\), 2006 \(Revision 2.0\) | Australian Bureau of Statistics \(abs.gov.au\)](#)