

A ROADMAP AN AUDITING TOOL AN ENGAGEMENT SURVEY

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prideinhealth +wellbeing

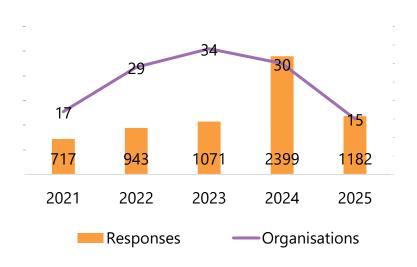
PRACTICE POINTS

2025 HWEI Employee Survey

- Overall, support for organisational inclusion initiatives is high, with a perceived high understanding of unique needs of LGBTQ+ people.
- Frontline staff overall expressed confidence in speaking to LGBTQ+ clients and LGBTQ+ being welcome at their organisation.
- Differences between LGBTQ+ and non-LGBTQ+ respondents highlight areas where further awareness and understanding may be required.
- A small and decreasing proportion of respondents, particularly non-LGBTQ+ employees, perceived not being able to look after LGBTQ+ clients due to their personal beliefs.
- LGBTQ+ respondents are more likely than non-LGBTQ+ respondents to believe there are more than two genders and that their organisation should put more effort into LGBTQ+ inclusion.
- Non-LGBTQ+ respondents are less likely than LGBTQ+ respondents to believe LGBTQ+ clients face barriers to accessing services and to being treated equally.
- Respondents would be influenced in becoming active allies through more information on how to be an ally, rather than why it is important, suggesting practical guidance is required.
- There is high agreement from all respondents that mandatory training be made available to front-line staff and their supervisors or manager.

Key Insights

2025 year marks the fifth anniversary of the annual Health + Wellbeing Workplace Equality Index (HWEI) Employee Survey. The survey helps organisations evaluate the ability of their organisation and employees to deliver inclusive services for LGTBQ+ clients and service users.



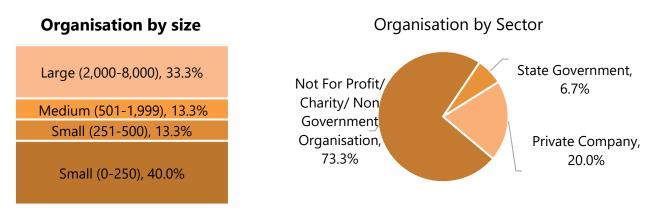
This year, 15 organisations participated, with a combined reach of over 8 million service users and over 20,000 employees.

Between 2% and 93% of employees across participating organisations responded, for a total of 1182 responses.

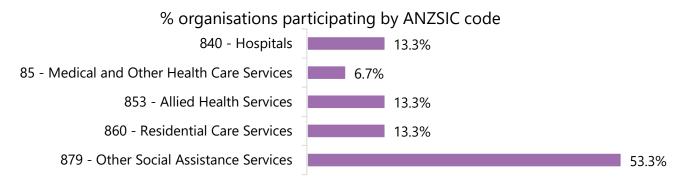
60% of organisations engaged over 10% of their employees to participate in the survey, a fantastic achievement!

Organisation Demographics

53.0% of participating organisations are small organisations with under 500 employees, and 73.3% of organisations operate in the non-profit or charity sector.



This year's participating organisations all classify themselves within the ANZSIC code of Q) Health Care and Social Assistance. These organisations were primarily classified as other social services within the Primary industry group classification.ⁱ



While we saw strong growth in the number of organisations participating in the survey in 2022 and 2023, the number reduced in 2024 and again in 2025. Some organisations have reported that they have encountered internal barriers to participation, including 'survey fatigue', lack of staff capacity to run the survey, and a desire to engage in the Australian Workplace Equality Index (AWEI) survey instead (designed to measure the impacts of internal employee inclusion initiatives, rather than impacts of initiatives to support LGBTQ+ inclusive service delivery). Member organisations who would like advice on navigating internal barriers, or maximising engagement of employees, may refer to the HWEI Employee Survey Participation Toolkit, or speak to their Relationship Manager.

Respondent Demographics

In the workplace

In 2025, we have seen a significant shift in the location of organisations participating in the survey. Nine of the 15 organisations have their head office based in NSW, four in Victoria, and one each in South Australia and Western Australia. However, we are receiving responses from all states and territories, showing an increase in the number of multi-state organisations participating.



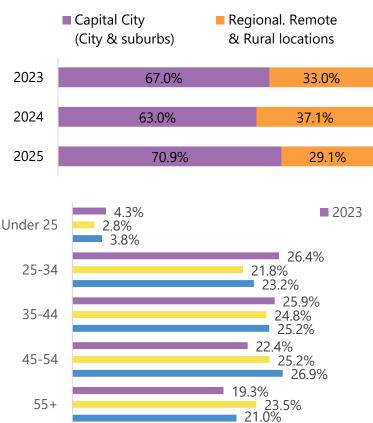
This year, more than three-quarters of respondents work within city/metropolitan areas, 12.6% more than last year.

The combined proportion of responses from regional, rural, and remote areas decreased overall by 21.5%.

Age

Respondents under 25 have increased 35.0% this year but remain the lowest-represented cohort. The number of those over 55 responding to the survey has reduced by 10.8%.

Year after year, we have seen that respondent age has an impact on survey responses; younger respondents tend to be more aware of LGTBQ+ client needs and more comfortable in this space, while, generally speaking, older respondents have



lower levels of understanding of the challenges that LGBTQ+ clients face, and less ability to recognise instances of inappropriate behaviours (workplace incivility or bullying).

Whilst this difference in understanding is not limited to age, understanding the results through this lens is vital for organisations to ensure that training and upskilling is provided to target the specific gaps in knowledge of different cohorts within their organisation.

LGBTQ+ Respondents

This year, the proportion of LGBTQ+ respondents (n349) has increased by 31.2% compared to 2024 and 18.6% compared with 2023, after a reduction last year.

LGBTQ+ respondents include all people of diverse sexuality and those with a trans and/or gender diverse experience.

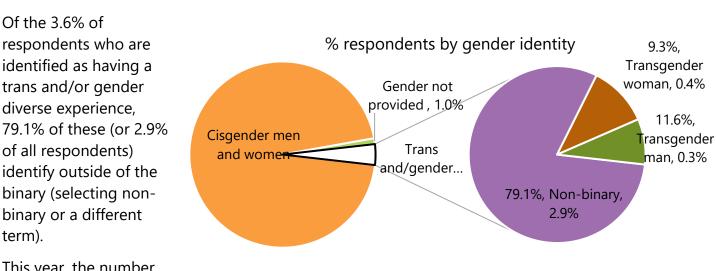


Looking more closely at the 349 LGBTQ+ respondents:

- 12.3% have a diverse gender and/or trans experience (n345)
- 98.9% have a diverse sexuality. (n43)

The above includes 11.2% of respondents who have both a diverse sexuality and a diverse gender and/or trans identity (n39).

Gender Identity



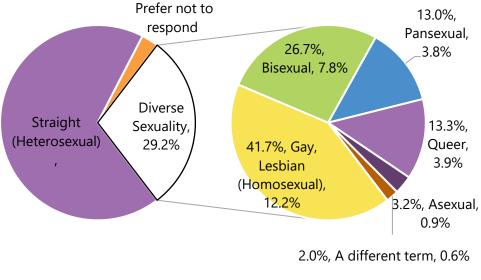
This year, the number of people with non-

binary identities increased further, up 14.8% from 2024 and 256.2% from 2022

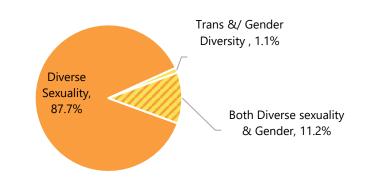
Respondents to the Health + Wellbeing survey are overwhelmingly likely to be cisgender women, though this proportion has shifted this year. (2025: 73.4%, 2024: 76.4%, 2023: 79.1%).

Sexual orientation

This year, nearly threequarters of people of diverse sexuality identify with the terms gay/lesbian, making up 41.7% of all people of diverse sexuality, and 12.2% of all respondents (from 35.6% in 2024), and bisexual or pansexual, making up 39.7% (a decrease from 45.5% in 2024).



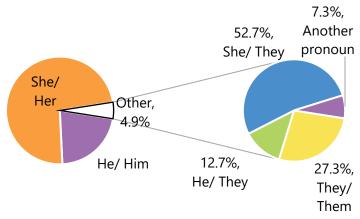
The remaining 18.6% of individuals identified as queer (13.3%), asexual (3.2%) or with another unspecified term (2%).



Pronouns

In 2025, 55 people (4.3% of respondents) have advised using gender-neutral (they/them) pronouns or rolling pronouns (i.e., she/they or he/they). Additionally, 0.3% have stated they use a different pronoun. These statistics show a representation of all pronoun options within the respondent population.

Whilst this may seem a small number, it is representative of the general population as seen in the AWEI Surveyⁱⁱ and is becoming more common. This year, we did see a higher percentage (5.9%) of respondents choosing not to respond to this question, going from 3.3% in 2023 to 5.5% in 2024. 89.1% of these were non-LGBTQ+ individuals.

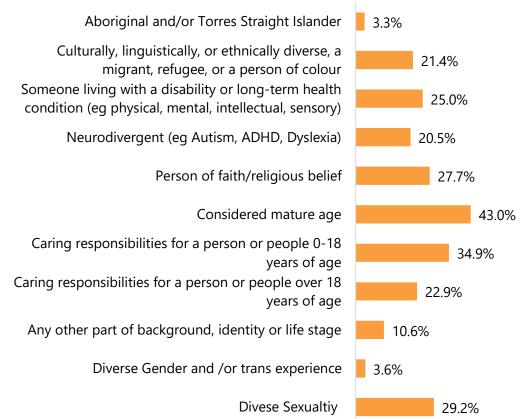


Other diversity elements

This year, we expanded the option for self-identification of other areas of diversity that may also influence or impact a person within their workplace. We do this to acknowledge individuals' multifaceted experiences. In the future, we hope to use this data to understand some of the intersectional experiences that HWEI survey respondents have and how that may impact their views and experiences within their organisation.

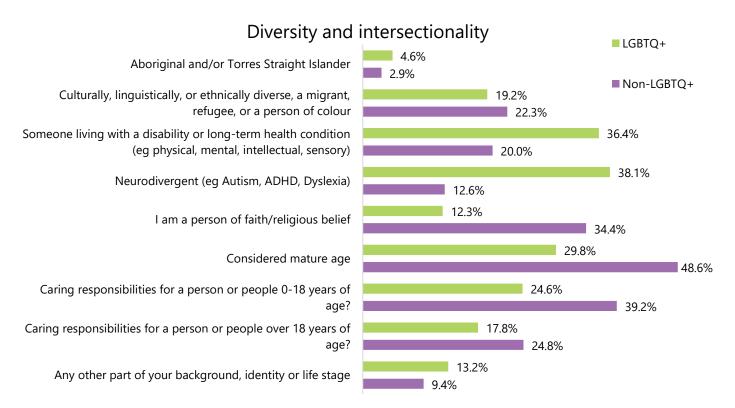
This year, 90.2% of respondents identified with one or more diversity provided (LGBTQ+ included).

Diversity of all respondents



When we look at the intersectionality of people with an LGBTQ+ experience and the other diversity options provided, we can see that significant proportions of LGBTQ+ individuals also have one or more other diversity aspects that may impact their work experiences.

LGBTQ+ respondents are more likely to also be living with a disability or being neurodivergent, whilst non-LGBTQ+ respondents are more likely to advise being a person of faith/religious belief, having caring responsibilities, and being considered mature age.



This intersectional analysis is important for organisations to undertake when considering internal staff support initiatives, and it is also important because these aspects of diversity may impact how employees provide care to consumers.

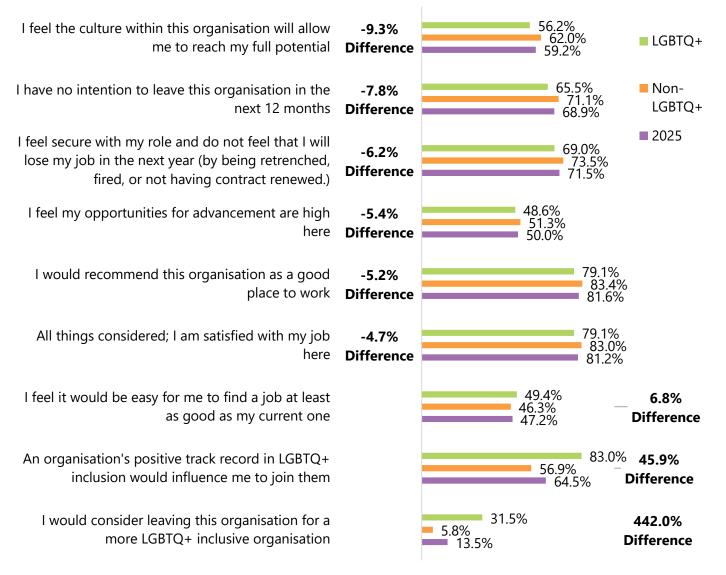
General Views

Work outcomes

For the first time in 2025, we looked at respondents' views relating to work outcomes within their organisations. This section was introduced to enable organisations to understand how their employees feel about their place in the organisation and their satisfaction with their work and role.

Overall, we see less than a 10% difference between LGBTQ+ and non-LGBTQ+ respondents in most areas other than when looking to attract or retain diverse talent.

LGBTQ+ respondents are more than 4 times more likely (442.0%) to agree that they would consider moving to a more inclusive organisation, and 45.9% more likely to agree that a positive track record of LGBTQ+ inclusion would be an influential factor in joining an organisation.



It is vital for organisations to consider and reflect on this data, as it shows that organisations that actively promote their actions and beliefs are more likely to attract and retain LGBTQ+ employees. However, LGBTQ+ people are less likely to believe their organisation will enable them to reach their full potential or feel security within their roles.

Individual organisations can review their data, cross-referencing with views on organisational inclusion and bullying and harassment data to determine what factors may influence their results.

Personal beliefs on organisation inclusion

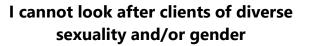
A high proportion of respondents agree that this inclusion for people of diverse sexuality and gender is important within the health and wellbeing sector and within their organisation. Over 90% of respondents personally agree that work in this aspect of diversity and inclusion has a positive influence on person-centred care. They believe they understand some of the unique challenges that LGBTQ+ clients face within healthcare experiences and that a client's diverse sexuality and/or gender may impact how they navigate the healthcare system, their healthcare needs, and/or their experiences.

Of respondents, 87.3% support the work their organisation does for the inclusion of LGBTQ+ clients, which is down slightly (3.4%) from last year.

Differences begin to show when looking at specific areas.

This year, 28.4% fewer respondents felt that their personal beliefs meant they could not look after LGBTQ+ clients, going from 2.0% in 2024 to 1.4% in 2025, with the vast majority of this change attributed to respondents who are non-LGBTQ+.

Respondents agreeing that it is important for services in the care and health sectors to be active in LGBTQ+ inclusion stayed steady at 91.3%, though only 89.9% of non-LGBTQ+ respondents agreed, compared to 97.1% of LGBTQ+ respondents.

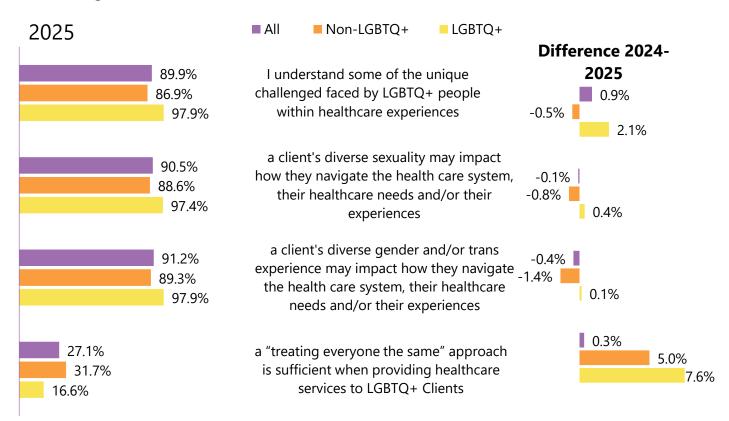




This year's data on employees' understanding of the healthcare needs and experiences of LGBTQ+ clients has not changed significantly in most instances when looking at the overall percentages. However, the agreement within the LGBTQ+ and non-LGBTQ+ cohorts does show some movement when comparing responses from 2024 to those in 2025.

While it seems that more respondents feel that the same approach is sufficient, it is important to note that only 27.1% of all respondents agree with this statement, with only 16.6% of LGBTQ+ respondents agreeing.

When more data is available, we suspect this statistic will be lower in clinical settings than in nonclinical settings. When comparing this data for your organisation, it is important to consider the service being delivered.



Awareness and Visibility of LGBTQ+ Inclusion

When examining awareness and visibility for LGBTQ+ diversity and inclusion within the organisation, 91.2% of all respondents agreed they understand why their organisation puts effort into this area.

4.7% more respondents agreed they have heard their executive leaders speak positively about LGBTQ+ inclusion (2025: 68.3% vs 2024: 65.2%), but this has fallen to under 60.0% of LGBTQ+ respondents. 8.2% more agree that work or related initiatives concerning LGBTQ+ inclusion had been communicated throughout the year (2025: 72.5% vs. 2024: 67.0%); though there is a 10.7% difference between LGBTQ+ respondents & non-LGBTQ+ (LGBTQ+: 67.3% vs non-LGBTQ+: 75.3%)

Overall, there have been positive shifts this year relating to LGBTQ+ training with:

- 17.3% more agreeing that awareness or ally training for this aspect of diversity & inclusion has been made available throughout the year; again (2025: 68.0% vs. 2024: 58.0%);
- 10.9% more attended awareness or ally training in the past year (2025: 47.9% vs. 2024: 43.2%); non-LGBTQ+ respondents are 9.1% more likely to agree

When considering the need for training, however, there has been a slight downward shift in agreement overall:

- 82.0% agree LGBTQ+ training should be mandatory for managers or employees who supervise other staff in client-facing roles, with a 13.0% difference (LGBTQ+: 90.0% vs non-LGBTQ+: 79.6%)
- 82.7% agree LGBTQ+ training should be mandatory for anyone in client-facing roles, with a 10.5% difference (LGBTQ+: 90.3% vs non-LGBTQ+: 80.5%)

All respondents were asked if they believe their organisation should put more effort into LGBTQ+ inclusion for clients. This year, we asked respondents to clarify their responses to this statement through free-text comments.

44.7% of respondents agreed their organisation should put more effort into LGBTQ+ inclusion for clients, 28.5% fewer than last year (62.6%). 62.8% of LGBTQ+ respondents agreed, compared to 27.4% of non-LGBTQ+.

A review of the comments of respondents who felt their organisation should put in more effort suggests that, for the most part, it was not based on a belief that their organisation was doing "badly". The most common themes for respondents believing their organisation needs to do more are:

- Room for development and knowledge enhancement of LGBTQ+ needs within the healthcare sector –e.g.
 - "I believe the organisation is doing well, but more effort is required because there's still a gap in LGBTQ+ healthcare, so we can't say 'job done.' There's more to do!"
 - "There is always the need to upskill and evolve in this area."
 - "It is very important to educate everyone, so the more the better."
 - "I feel that our organisation does make excellent efforts with regard to diversity and inclusion, however there is always room to do more and become more involved."
- To create better understanding of LGBTQ+ inclusion
 - "Some personnel believe including the 'Rainbow' symbol should not be included in signature blocks, training, etc... as it 'encourages' young people. This suggests there is still a lot of work to be done within the organisation around LGBTQ+ inclusion."

- "To help shift bias, Having the conversations around inclusion and challenging bias provides opportunity for growth."
- To provide specific organisation purpose education and skills training
 - "The queer community in rural and regional areas face so much more difficulty in accessing care, knowing somewhere is safe for them is half the battle"
 - "My organisation cares for older people who may have experienced more discrimination throughout their lives and can be more vulnerable."
 - "Front line reception staff need more support and training to ensure better outcomes for clients."
 - "Statistics surrounding domestic and family violence show the increased rates of DFV and the unique and complex presentations and needs of the LGBTIQA+ community including the stigma surrounding the community and accessing DFV supports."
- Increase executive support
 - "Nothing is coming from the top. No public statements. Services on the ground are being open but"
 - "They are doing well, but there is more to be done at the top level."
 - "Within senior leadership there is a lack of diversity and a lack of awareness regarding the need for assertive work from leaders to challenge non-inclusive (and discriminatory) practice. Diversity is often disregarded as "something I do... I am not discriminatory!!" rather than the constant work that is required for individuals and collectives to do better and dismantle oppressive systems."

For respondents who feel that their organisation is doing enough, the themes are:

- feeling that the organisation is doing well and should continue with the current effort level,
 - "Effort to remain an inclusive workplace and LGBTQI+ safe and inclusive provider of services should always be made. MY ORGANISATION is currently doing a lot to train and educate staff, and support LQBTQI+ clients. So, I don't think they should make MORE effort currently, but continue to have these initiatives at the forefront for both staff and clients."
 - "They already put a lot of effort into LGBTQI+ training and inclusion. Very extensive and inclusive practices already exist"
 - "They do not need to put in more effort; the organisation is already recognised as inclusive - they just need to maintain awareness around inclusivity"
- Feeling that other areas of diversity also need support
 - "my organisation is doing a good job, but needs to consider other areas of diversity too"
 - "there are many competing areas that need attention, refugee, AOD, homelessness etc our org cannot fulfil it's obligations to other areas of need while constantly focusing on one. It sounds harsh but we are treated well here and others are not given the same treatment ie people of colour. So I guess I feel that all folks should be given air time and we get enough."

Many respondents in this area are also not client-facing and have advised that they are not aware of the level of activity their organisation is undertaking in this space. Some comments expressed that effort in this area was unnecessary and that "everyone should be treated the same regardless of any diversity."

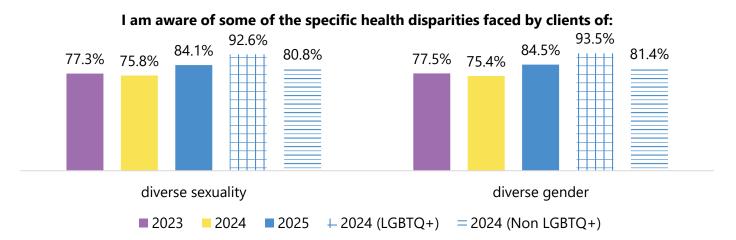
Individually, organisations can use these comments to investigate their employees' opinions more closely and understand some of the limitations being felt. This can also increase their 2025 HWEI Practice Point - Key Insights Page | 10 of 18

understanding of whether their organisations need to implement more or similar amounts of effort into LGBTQ+ inclusion activity.

Understanding the health disparities of LGBTQ+ clients

Encouragingly, after a reduction last year, this year, there has been an 11.0% increase in respondents who agree they are aware of some of the specific health disparities faced by people of diverse sexuality (2025: 84.1%, 2024: 75.8%, 2023: 77.3%, 2022: 78.0%) and a 12.1% increase for diverse gender (2024: 84.5%, 2024: 75.4%, 2023: 77.5%, 2022: 76.1%).

The difference between LGBTQ+ and non-LGBTQ+ respondents still shows the importance of all employees undertaking specific training and education as it relates to their specific health service.



This includes employees who are not working in a frontline capacity, so they are more able to understand the importance of specific training and education to increase inclusion.

Creating LGBTQ+ inclusive environments

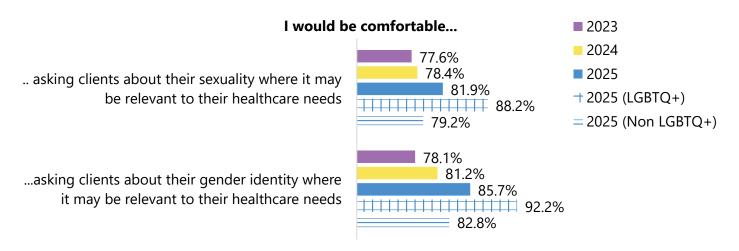
77.8% of our respondents are employed in a capacity where they work directly with individuals accessing their service or organisation. These respondents are asked to provide insight into working with clients and their understanding of specific LGBTQ+ needs.

After some reductions in agreement last year, all areas have increased in agreement this year. Most significantly, this year:

- 17.0% more agreed they "know the process to follow if a client wished to be called by a different name than that listed on their official documentation" (2025: 83.8%, 2024: 71.6%, 2023: 71.2%),
- 25.4% more agreed they know how to refer clients to other services that provide LGBTQ+ specific support for people of diverse sexuality and/or gender (2025: 70.4%, 2024: 56.1%, 2023: 56.9%),
- 8.8% more believe a client of diverse sexuality would be welcome in this service and treated with the same respect as everyone else (2025: 90.9%, 2024: 83.5%)
- 8.7% more believe a client of diverse gender would be welcome in this service and treated with the same respect as everyone else (2025: 87.8%, 2024: 80.8%)

We note that 3.5% more respondents believe clients of diverse sexuality would be welcome compared to trans and gender diverse clients.

When it comes to speaking to clients about sexuality and gender within relevant healthcare contexts, a significantly higher proportion of respondents report being comfortable than in prior years. 11.0% more LGBTQ+ respondents report being comfortable than non-LGBTQ+ respondents, further showing that having diverse employees may impact clients' experiences within an organisation.



Employee beliefs relating to organisation structure

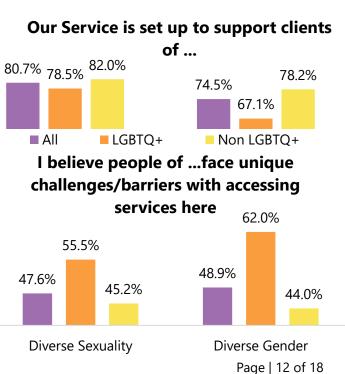
When considering how their organisation is set up to provide services, respondents are asked if their service actively provides services to LGBTQ+ people. Compared to last year, 12.6% more respondents agreed with this statement (2025: 72.7% vs. 2024: 64.6%).

It should be noted that this is not a longitudinal study, and different organisations participate each year. Therefore, year-by-year comparison data may be impacted by the mix of organisations that participated in a particular year.

Compared to last year's data results, 15.1% more respondents believe their service is set up for people of diverse sexuality, and 12.9% feel they are set up for trans and /or gender diverse clients. Again, this may reflect the change in services that participated in this year's survey.

LGBTQ+ respondents are less likely across the board to believe that their service is set up for LGBTQ+ clients.

Employees' feelings toward the challenges LGBTQ+ individuals have accessing services have stayed steady compared to last year's responses. However, there are significant differences between the opinions of LGBTQ+ and non-LGBTQ+ respondents, with 4.1% more LGBTQ+ respondents believing there are access barriers for clients with a trans and/or gender diverse experience and 22.9% more believing clients of diverse sexuality face access challenges and barriers.

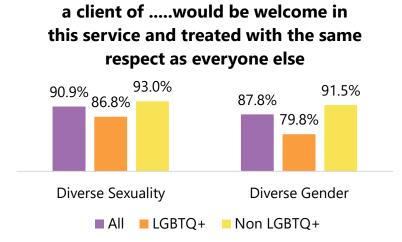


Active service provision not only reflects the outward promotion of being an LGBTQ+ welcoming service but can also be impacted by employees' understanding of the community's needs and ability to provide a comfortable and welcoming space.

When considering employees' beliefs about whether LGBTQ+ clients would be welcomed within their service, there has been an overall increase. However, employees still feel that clients with a diverse gender and/or trans experience would not be as welcomed as clients with a diverse sexuality.

Individual organisations should investigate these differences and use their findings to develop policies and practices. They should also ensure that accurate, up-to-date, and targeted training is provided to staff to ensure that employees are able to ensure that all clients and consumers are comfortable accessing services.

Other areas that can impact client comfort levels include bathroom facilities. In 2025, 77.3% of respondents agreed that they would be comfortable having 'all-gender' or 'gender-neutral' toilets on their floor/area (over and above specific facilities for men and women); non-LGBTQ+ respondents are 22.0% less likely to agree than LGBTQ+ respondents (71.6% vs 91.9%).



This year, 6.0% more respondents agreed that their service would fully support a client who was affirming their gender (2025: 86.7% vs. 2024: 81.8%)

We also ask respondents to rate the availability of resources to support LGBTQ+ service provision. Again, we are seeing significant changes in this area, which may reflect the difference in participating organisations.

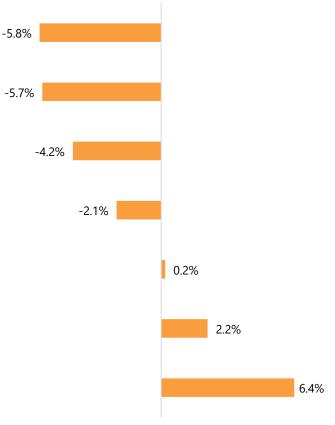
This year, respondents are more aware by:

- 21.8% examples of best practice care for clients of diverse sexuality and/or gender (2025:56.7%, 2024: 46.5%, 2023: 44.3%)
- 20.3% of a diversity policy or statement discussing the inclusion of LGBTQ+ clients within the service (2025: 71.3%, 2024: 61.8%,2023: 60.9%),
- 14.8% of client-facing information and documentation explaining disclosure and confidentiality (2025: 70.2%, 2024: 61.2%, 2023: 67.0%)
- 14.2% of A feedback form/process, where clients can provide comments on their experience of inclusion (2025: 70.6%, 2024: 61.8%, 2023: 62.5%)

Of note is the gap in respondents' belief that their organisation is inclusive and welcoming and their specific knowledge about the availability of resources to support the delivery of LGBTQ+ inclusive care.

LGBTQ+ respondents are more likely to be aware of allies and other specialists to gain further information from but are less likely to agree that they can find physical forms and brochures and also know of examples of best practice care for LGBTQ+ clients

Organisations can support each other by sharing their policies and practices with other organisations during interagency meetings and the like. Their relationship manager can also support them to access best practice documents.



Difference in agreement - LGBTQ+ vs. non-LGBTQ+

Examples of best practice care for clients of diverse sexuality and/or gender

Client facing information about how our service/s meets the needs of clients of diverse sexuality and/or gender (brochures, websites, etc.)

Client facing information/documentation explaining disclosure and confidentiality

A feedback form/process, where clients can provide comments on their experience of inclusion

A diversity policy or statement discussing inclusion of LGBTQ+ clients within the service

Educational resources to learn more about working with clients of diverse sexuality and/or gender

An ally or LGBTQ+ specialist to learn more from if you have any questions

Addressing bullying and harassment behaviour towards clients

Another important element in inclusion work is understanding what is considered bullying and harassment, including the use of inappropriate language and slurs, and how an organisation addresses instances of this incivility behaviour or more serious bullying behaviours.

In addition to training staff, reporting structures must be in place to identify and correct these behaviours, and staff must feel confident and safe accessing the reporting process.

9.7% more respondents advised that there were confidential avenues to safely report LGBTQ+ (2025: 78.0%, 2024: 71.1% vs 2023: 77.5%).

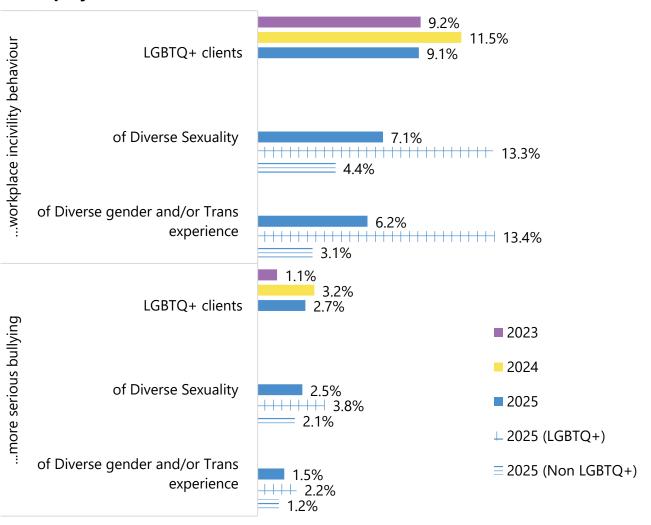
In 2025, the questions were altered to better understand the negative behaviours witnessed in the past year.

By combining the responses, we can compare them to last year's data and see that fewer respondents have agreed they have witnessed workplace incivility or serious bullying behaviours toward clients. Behaviours toward people of diverse sexuality have been witnessed more than toward people of diverse gender.

LGBTQ+ respondents are significantly more likely to have witnessed negative behaviours:

- 204.1% more likely to witness incivility targeting people of diverse sexuality
- 324.9% more likely to witness incivility targeting people of diverse gender
- 85.4% more likely to witness serious bullying targeting people of diverse sexuality
- 81.4% more likely to witness serious bullying targeting people of diverse gender

I have witnessed behaviour by employees toward clients...



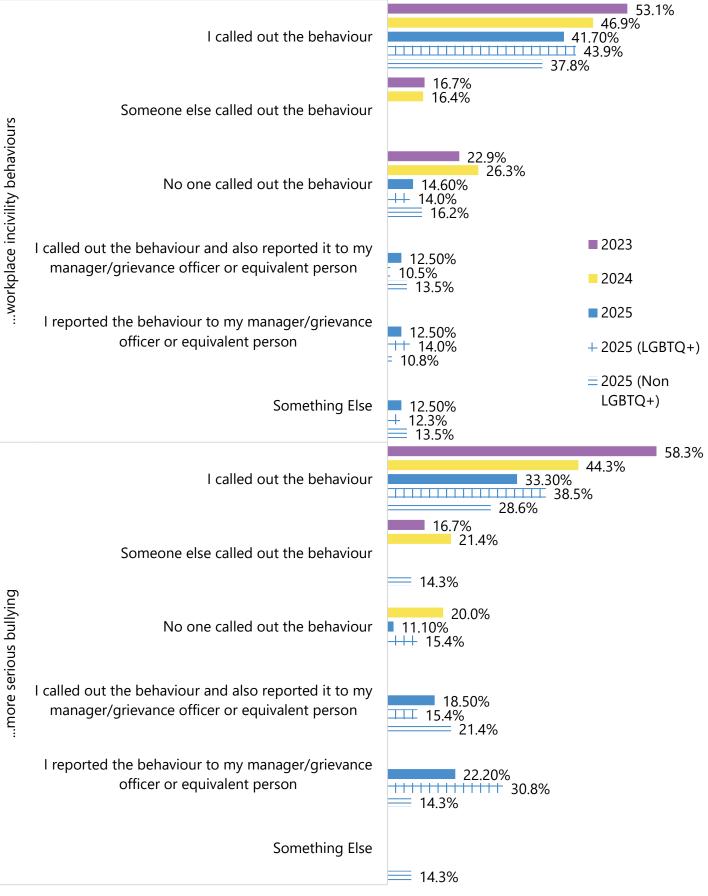
This year, two additional options were provided regarding the action taken when behaviours were witnessed. Respondents could advise if they reported the behaviour to their manager/grievance office or equivalent person in their organisation or if they both called it out and reported it.

When workplace incivility was witnessed, 14.6% of respondents said no one called out the behaviour, and 11.1% said no one called out more serious bullying. LGBTQ+ respondents were 15.9% more likely to call out workplace incivility and 34.6% more likely to call out more serious behaviours.

Respondents were also asked whom they would report behaviours to. 1.1% of respondents advised that they would not report workplace incivility behaviours, and 0.8% of respondents would not report more serious behaviours towards clients. Again this year, LGBTQ+ respondents are more likely to advise that they would not report workplace or more serious behaviours compared to non-LGBTQ+ respondents.

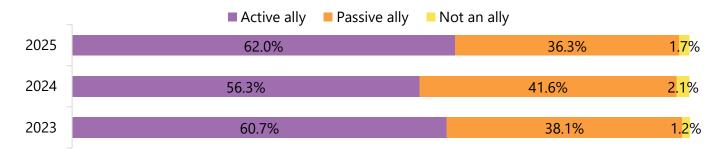
The most common way for respondents to report is to their manager/leader, except for LGBTQ+ respondents reporting incivility, which is most likely to be reported to both their manager and the organisation's grievance officer.

What action took place...



Allyship

An active ally is any person willing to actively support LGBTQ+ people, regardless of whether they identify as LGBTQ+ or not. This year, active allyship returned to above 2023 levels, with 10.2% more respondents active and 21.8% less likely to not be an ally—that is, to not support LGBTQ+ inclusion at all.

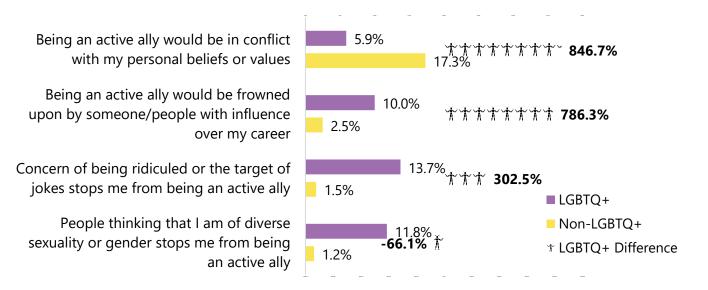


Of the 38.1% who are not active allies (passive + not at all), there have been significant shifts in respondents' reasons for this since last year. Overall:

- 45.1% fewer felt being an active ally would be frowned upon by someone/ people with influence over their career (2025: 2.6%, 2024: 4.7%, 2023: 3.9%)
- 24.1% fewer feared being ridiculed or the target of jokes (2025: 3.1%, 2024: 4.1%, 2023: 2.9%)
- 10.3% fewer agreed they do NOT have a personal interest in LGBTQ+ inclusion or allyship (2025: 26.2%, 2024: 29.2%, 2023: 18.5%)

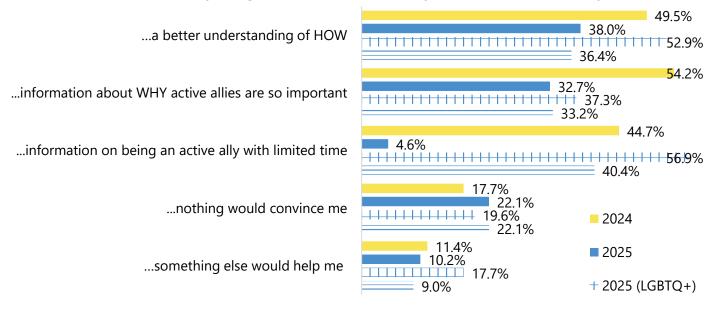
Respondents advising that being an active ally would conflict with their personal beliefs or values increased again this year by 21.1% to 15.6% (2024: 12.8%, 2023: 9.2%).

There is a considerable difference between LGBTQ+ and non-LGBTQ+ cohorts, with LGBTQ+ respondents 4 times more likely to feel it would be frowned upon by someone with influence on their career, 9 times more likely to be concerned of being the target of jokes or ridicule, and almost 12 times more likely to not want people thinking they are LGBTQ+.



Regarding what could influence someone to become more active in their allyship, a further 24.7% of respondents advised that nothing would convince them after a 52.1% increase last year.

This equates to 22.1% of non-LGBTQ+ respondents and 19.6% of LGBTQ+ respondents. All other statements received less agreement. It is recommended that this year's participating organisations explore this further.



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

ACTION POINTS – WHAT CAN YOU DO?

- 1. Build the need and case for LGBTQ+ inclusion into organisational strategic documents and into accessible resources.
- 2. Build the unique challenges and needs of LGBTQ+ people accessing or potentially accessing your services into organisational strategic documents and into accessible resources.
- 3. Acknowledge, celebrate and capitalise on employees' support for LGBTQ+ inclusion.
- 4. Consider mandatory training for front-line staff and their supervisors and managers.
- 5. Develop or share resources on HOW to be inclusive in client-facing roles.
- 6. Develop or share resources on HOW to be an active ally in the workplace.
- 7. Address and clarify that inclusive practices and behaviours can co-exist with personal beliefs and values and need to be upheld by all.
- 8. Reinforce a zero-tolerance approach to incivility, harassment, bullying, and discrimination towards LGBTQ+ people.
- 9. Provide staff with deeper-dive information and resources to ensure inclusion of trans and gender diverse people.
- 10. Consider participation in the Health + Wellbeing Equality Index (HWEI) Submission and Survey.

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ⁱ ANZSIC Classification structure-<u>Australian and New Zealand Standard Industrial Classification (ANZSIC), 2006</u> (Revision 2.0) | Australian Bureau of Statistics

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ⁱⁱ Australian Workplace Equality Index Employee survey https://www.pid-awei.com.au/data-analysis/