

Gendered Violence Research Network

National Survey of LGBTIQ+SB Experiences of Sexual Violence



Report 1

Prevalence, attitudes
and lifetime
experiences



For further information

Michael Salter
michael.salter@unsw.edu.au
 Professor
 School of Social Sciences
 148 Morven Brown
 UNSW SYDNEY NSW 2052 AUSTRALIA

Jan Breckenridge
j.breckenridge@unsw.edu.au
 Professor and Co-Convenor
 Gendered Violence
 Research Network
 School of Social Sciences
 UNSW SYDNEY NSW 2052 AUSTRALIA
 t +61 (2) 9385 2991
arts.unsw.edu.au/gvrn

Suggested citation

Salter M; Breckenridge J; Lee- Ah
 Mat V; Whitten T; Kaladelfos
 A; Suchting M; Breckenridge
 V; Dubler N; Griffin A (2024)
 National Survey of LGBTQIA+SB
 Experiences of Sexual Violence
 – Report 1, Gendered Violence
 Research Network, UNSW Sydney

Artist Justin Sayarath and
First Nations Artist Lisa Caruana

The Gendered Violence Research
 Network is based in the Faculty
 of Arts, Design and Architecture
 at UNSW Sydney.

The legal entity for the contract
 is the University of New South
 Wales (ABN: 5719873179). The UNSW
 is a GST-registered organisation.
 Provider CRICOS
 Code 00098G.

This document has been prepared
 for the sole purpose of our
 services provided to the
 Australian Government Department
 of Social Services.

Contents

Content warning	4	Experiences of sexual violence	66
Finding help and support	4	a. Lifetime experiences of sexual violence according to gender identity, sexual orientation and social location	66
The project team	4	b. Unwanted sexual request or comment	69
People with lived and living experience	5	c. Unwanted fondling, kissing or rubbing	74
Acknowledgements	5	d. Oral rape	77
Glossary	6	e. Attempted oral rape	81
Introduction	9	f. Vaginal or anal rape	84
Key terms used in this report	10	g. Attempted vaginal or anal rape	87
The research process	11	h. Non-consensual image or video making	91
2021 co-design and consultation	11	i. Non-consensual distribution of nude or sexual images or videos	95
2021 First Nations co-design	12	j. Medical abuse of intersex people	99
2023 National Survey development	13	k. Perpetrator identity	101
1. Project governance, survey design and pilot (May 2023-June 2023)	13	Sexual violence impacts	105
2. Recruitment strategy	14	a. Substance misuse	105
3. First Nations recruitment strategy	15	b. Depression and anxiety	107
4. Survey implementation (September 2023-February 2024)	17	c. Mental health	108
5. Data analysis and reporting	18	d. Disability	111
Findings	21	e. HIV status	113
Demographics	21	f. Educational attainment	115
Total sample – all participants	21	g. Employment status	117
First Nations participants	29	h. Income	118
Sex and relationships	34	i. Attitudes	120
Total sample – all participants	34	Conclusion	122
First Nations participants	40	Appendix A – First Nations co-design governance	123
Health and wellbeing	45	Appendix B – Project Advisory Group	125
Total sample – all participants	45	Appendix C – Promotional summary and artworks	126
First Nations participants	52	Appendix D – Media release	127
Attitudes and norms	60	Appendix E – Detailed organisational and influencer promotion	129
Total sample – all participants	60	Appendix F – LGBTQIA+ survey template	137
First Nations participants	63	Appendix G – Tables and figures	171
		a. List of figures	171
		b. List of tables	175
		References	179

Content warning

Sexual violence is a challenging issue. Reading this document may create strong feelings for some people. Please take care of yourself and ask for help if you need it. You might want to talk to your family and friends, or your counsellor, doctor, or First Nations health service.

Finding help and support

Discussion of sexual violence and violence against the LGBTIQ+SB community can be difficult to read. If you feel upset or distressed during or after reading this report, please reach out for help.

You can contact:

QLife

1800 184 527

qlife.org.au

Lifeline

13 11 14

lifeline.org.au

Say It Out Loud

sayitoutloud.org.au/?state=all

1800 RESPECT

1800 737 732

1800respect.org.au

13YARN

(for First Nations Australians)

13 92 76

13yarn.org.au

The project team

Professor Michael Salter	Lead Chief Investigator
Professor Jan Breckenridge	Chief Investigator
Adjunct Associate Professor Vanessa Lee-Ah Mat	Chief Investigator – First Nations lead
Dr Andy Kaladelfos	Chief Investigator
Mailin Suchting	Project Manager
Dr Tyson Whitten	Research Associate
Angela Griffin	Research Assistant
Vincent Breckenridge	Research Assistant
Natasha Dubler	Research Assistant

Acknowledgements

Aboriginal & Torres Strait Islander Peoples

We acknowledge Aboriginal and Torres Strait Islander peoples as Australia's Traditional Owners and custodians of Country. We acknowledge that sovereignty was never ceded and recognise Aboriginal and Torres Strait Islander peoples' continuing connection to land, waters, and culture. We pay our respects to Elders past and present and thank them for their wisdom, guidance, and support in this project.

We acknowledge that sexual violence can especially impact Aboriginal and Torres Strait Islander people including LGBTIQ+ and Sistergirl and Brotherboy (LGBTIQ+SB) communities, and the effects can be amplified by the impacts of colonisation, social categorisation and subsequent government policies.

We acknowledge the dedicated work of Aboriginal and Torres Strait Islander peoples over many decades in Australia to both align with and challenge governments and services about the relationship between colonisation, intergenerational trauma and current high rates of sexual and gendered violence affecting LGBTIQ+SB people in Aboriginal and Torres Strait Islander communities.

We recognise the strength of culture in responding to sexual violence and the capacity of cultural practices to offer Aboriginal and Torres Strait Islander people healing and recovery.

People with lived and living experience

We recognise that there is a real person impacted by each act of violence and abuse represented in any research evidence used in this report. We value, as the foundation of best-practice responses, the lived and living experiences of the LGBTIQ+SB community who have experienced sexual violence.

We acknowledge that LGBTIQ+SB victims' and survivors' experiences may be impacted by discrimination on the basis of gender identity, gender expression or sexuality. Responses to LGBTIQ+SB communities need to listen and attend to these intersectional experiences of victimisation.

We note that statistics are an important tool for understanding; however, the figures can seem depersonalised and do not always convey the pain and suffering experienced by victims and survivors and the families, friends, workplaces and communities who have supported them. We recognise the tragedy of those who have lost their lives. We equally recognise the strength and courage of victims and survivors, and their stories of survival, hope and resistance.

Glossary

ACCHO

Aboriginal Community Controlled Health Organisation.

ACE

Adverse Childhood Experiences.

AMS

Aboriginal Medical Service.

Asexual

A term used to describe someone who does not experience sexual attraction.

Attempted oral rape

A perpetrator attempted to perform non-consensual stimulation of a person's external genitals but was not able to.

Attempted rape

A perpetrator attempted to penetrate a person's body without their consent but was not able to.

Bi, bisexual

A term used to describe someone who experiences attraction towards more than one gender. Distinct from pansexual, which describes attraction towards people regardless of gender.

Bystander

A bystander is a person who is present and witnesses something but is not directly involved in it, whereas an active bystander is someone who not only witnesses a situation but also takes action to keep a situation from escalating or to disrupt a problematic situation.

CALD

An acronym used to refer to culturally and linguistically diverse communities.

Child sexual abuse

The involvement of a child in sexual activity that they do not fully comprehend or are unable to give informed consent to, or for which they are not developmentally prepared, or else that violates the laws or social taboos of society. Children can be sexually abused by both adults and other children who are – by virtue of their age or stage of development – in a position of responsibility, trust or power over the victim.

Cisgender/cis

A term used to describe people whose gender corresponds to the sex they were assigned at birth, for example someone who is assigned female at birth and identifies as a woman is a cisgender woman. Conversely, someone who is assigned male at birth and identifies as a man is a cisgender man.

Demisexual

An identity term within asexuality that is often defined as someone who experiences sexual attraction only after a significant emotional bond has been built. This is distinctly different from those who want to engage in sexual activity only after building a connection with other people, as it pertains to attraction and not the desire to engage in sexual activity.

Disability

A person is considered to be living with disability if they have one (or more than one) limitation, restriction or impairment that has lasted (or will last) for at least six months and which places restrictions on their everyday

life. For example physical, intellectual and psychological disabilities; disabilities resulting from injury, stroke or traumatic brain injury; and sight, hearing and speech disabilities. There are varying degrees of disability, which range from having no or very little impairment or limitation, to a complete loss of functioning.

First Nations

First Nations or Aboriginal and Torres Strait Islander people are the Indigenous people of Australia. They are not one group but comprise hundreds of groups that have their own distinct set of languages, histories and cultural traditions.

Gay

A term used to describe someone who has an enduring emotional, romantic or sexual orientation towards someone of the same sex.

Gender

A term that refers to the socially constructed and hierarchical categories assigned to individuals on the basis of their apparent sex at birth.

Gender diverse

An umbrella term that is used to describe gender identities that demonstrate a diversity of expression beyond the binary framework.

Gender identity

A person's internal sense of their own gender, which may or may not align to their sex or gender assigned at birth. One's gender identity is not necessarily perceived by or visible to others.

Gender expression

A person's outward expression of their gender. This may differ from their gender identity, or it may reflect it.

Gender fluid

Refers to someone who prefers to be flexible about their gender identity. They may fluctuate between genders or express multiple gender identities at the same time.

Heterosexual

A term used to describe someone who is attracted to members of the opposite gender. Also referred to as straight.

Homophobia

Refers to negative beliefs, prejudices, stereotypes and fears that exist towards same-sex-attracted people. It can range from the use of offensive language to bullying, abuse and physical violence; and can include systemic barriers, such as being denied housing or being fired due to a person's sexual orientation.

Homosexual

A term used to describe someone who has an emotional, romantic or sexual orientation towards someone of the same sex or gender. The term 'gay' is now generally more used.

Indecent assault

Indecent assault is defined by legislation in each state and territory. It occurs where one person touches another person in a sexual manner without the other person's consent.

Intersectionality

The interconnected nature of social categorisations, such as race, class and gender as they apply to a given individual or group, regarded as creating overlapping and interdependent systems of discrimination or disadvantage. Taking an inter-sectional approach means looking beyond a person's individual identities and focusing on the points of intersection that their multiple identities create.

Intersex

An umbrella term used to describe a variety of bodies whose sex characteristics, whether physical, chromosomal or hormonal, do not conform to medical norms for female or male bodies. Intersex people are a diverse population with many different intersex traits and other characteristics.

Individual people with intersex variations use a variety of different terms, including being intersex, having an intersex variation or condition or having an innate variation. They may also name specific intersex traits.

Intimate partner violence

Violent, abusive or intimidating behaviours perpetrated by a current or former partner, boyfriend, girlfriend or date.

Lesbian

A term used to describe a woman who is attracted to other women. Some lesbians may prefer to identify as gay.

LGBTIQ+

An acronym used to refer to lesbian, gay, bisexual, transgender, intersex and asexual/aromantic people. These categories often incorporate other identity terms. Used in this report to refer to all people who identify as lesbian, gay, bisexual, transgender, intersex and asexual or aromantic, or as having any other minority sexual orientation or gender identity.

Non-binary

An umbrella term used to describe gender identities where the individual does not identify exclusively as a man or a woman. There are many identities included within this, such as agender, genderqueer and gender fluid. Non-binary individuals may or may not identify as transgender and may or may not physically transition.

Oral rape

Unwanted and non-consensual stimulation of a person's external genitals by another person's mouth.

Pansexual

A term used to describe someone who has an attraction towards people regardless of gender or sex.

Queer

A term used mainly by people who identify with a minority sexual orientation or gender identity. In the past, 'queer' was used as derogatory term for LGBTIQ+ individuals.



Rape

Penetration of a person's body without their consent. Penetration may have involved the perpetrator's body parts or an object.

Sex

Sex refers to a set of biological attributes in humans and animals. It is primarily associated with physical and physiological features including chromosomes, gene expression, hormone levels and function, and reproductive and/or sexual anatomy. Sex is usually categorised as female or male but there is variation in the biological attributes that comprise sex and how those attributes are expressed.

Sexual assault

Unwanted touching of a sexual nature.

Sexual harassment

Unwanted sexual advances, requests or comments that could make a reasonable person feel uncomfortable or scared.

Sexual orientation

Describes who a person is emotionally, romantically or sexually attracted to.

Sexual violence

Sexual violence covers a wide spectrum of behaviours that are perpetrated against adults and children, including sexual harassment; stalking; forced or deceptive sexual exploitation (such as having images taken and/or distributed without freely given consent); using false promises, insistent pressure, abusive comments or reputational threats to coerce sex acts; unwanted exposure of genitals; indecent assault and rape.

Stalking

Persistent course of conduct or actions by a person that is intended to maintain contact with or exercise power and control over another person. These actions cause distress, loss of control, fear or harassment to another person and occur more than once.

Sistergirl/Brotherboy

First Nations people who identify with a trans lived experience. The words Sistergirl and Brotherboy can be used differently between locations, countries and nations. Sistergirls and Brotherboys have distinct cultural identities and roles. Sistergirls are First Nations people assigned male at birth who have a female spirit, and in some circumstances, take on a female role. Brotherboys are First Nations people assigned female at birth who have a male spirit, and in some circumstances take on a male role. This report refers to LGBTIQ+SB with the exception of where an acronym is specified differently in an original study or where Sistergirls and Brotherboys are not included in questions or responses.

Straight

A term used to describe someone who is attracted to members of the opposite sex or gender. Also referred to as heterosexual.

Trans, transgender

Umbrella terms used to describe individuals who have a gender identity that is different to the sex recorded at birth. This might lead to gender dysphoria. Non-binary people may or may not consider themselves to be trans.

Trans women

A trans woman is someone who is a woman, or has a present experience of womanhood, and who was presumed to be male at birth. This can include trans women, trans feminine people, and more. Some trans women may socially, legally and medically affirm their gender while others may choose not to.

Trans men

A trans man is someone who is a man, or has a present experience of manhood, and who was presumed to be female at birth. This can include trans men, trans masculine people, and more. Some trans men may socially, legally and medically affirm their gender while others may choose not to.

Transphobia

Refers to negative beliefs, prejudices and stereotypes that exist about trans people.

Violation of human rights (healthcare)

Examples of violations of human rights are when individuals who are – or who are perceived to be – lesbian, gay, transgender or intersex are discriminated against and ill-treated by medical providers; are deprived of, or unable to access, information and services related to sexuality and sexual health; are coerced and forced to undergo certain procedures; are subjected to compulsory medical interventions; or cannot live according to their self-identified gender.

Introduction

In 2023, the Gendered Violence Research Network (GVRN) was commissioned by the Department of Social Services (DSS) to implement a LGBTIQ National Sexual Violence Prevention Survey (The National Survey). It was agreed with DSS that one National Survey would be implemented, including a separately funded, comprehensive co-designed recruitment strategy to encourage the participation of First Nations LGBTIQ+ people and Sistergirls and Brotherboys (LGBTIQ+SB), particularly those living in rural and remote communities across Australia.

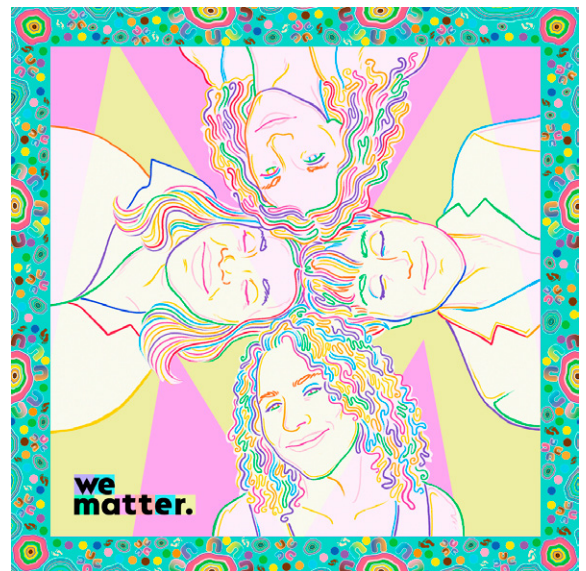
The National Survey was designed to gather data on experiences of sexual violence among LGBTIQ+SB adults in Australia. This data includes prevalence, social norms, attitudes, beliefs, bystander actions and help-seeking behaviours to inform LGBTIQ+SB sexual violence prevention and service delivery.

The National Survey provides benchmarked quantitative and qualitative data presented in two separate reports.

- > **Report One** focuses on a description of the survey sample and the prevalence, characteristics and effects of experiences of sexual violence in childhood, adulthood or both.
- > **Report Two** focuses on the most impactful sexual violence event reported by participants, their experiences of help-seeking following sexual violence, and their attitudes and experiences relating to bystander intervention when witnessing incidents of sexual violence.

An accompanying plain English summary presents a snapshot of the methods, key findings and recommendations.

This project is funded by the Australian Government under the Fourth Action Plan of the former National Plan to reduce Violence against Women and their Children 2010-2022. This project continues to align with the current National Plan to End Violence against Women and Children 2022-2032, which acknowledges that sexual violence is disproportionately experienced by the LGBTIQ+SB community and is therefore a key focus area for further research and response.



Key terms used in this report

LGBTIQA+ is the preferred term used by DSS which refers to lesbian, gay, bisexual, trans, intersex and asexual people. Plus (+) indicates other sexual orientation or gender identities. Much of the literature refers to different versions of this acronym.

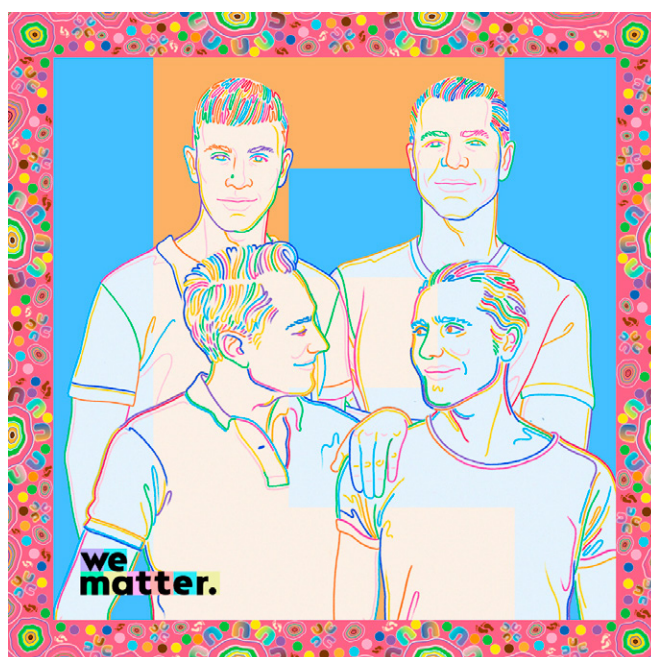
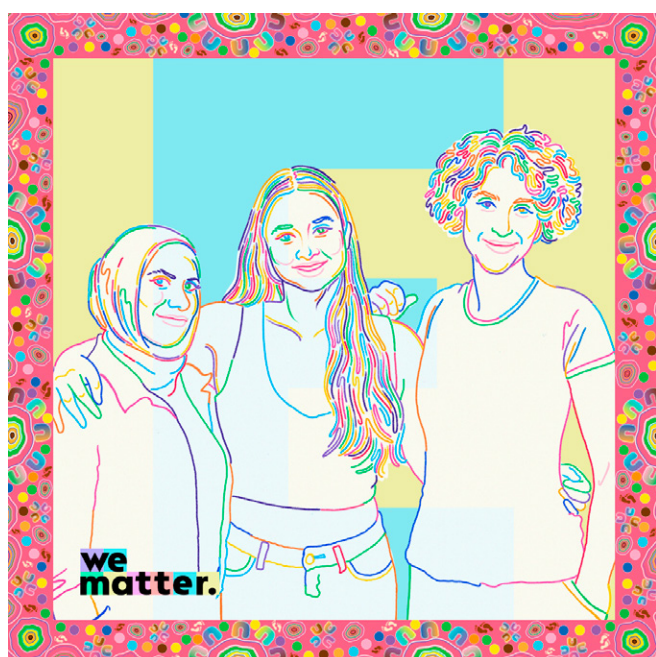
Sistergirls and **Brotherboys (SB)** identify as First Nations people with a trans lived experience. The definitions of Sistergirl and Brotherboy can differ between locations, countries, and nations. This report refers to **LGBTIQA+SB** with the exception of where an acronym is specified differently in an original study or where Sistergirls and Brotherboys are not included in questions or responses.

This report defines **sexual violence** as a wide spectrum of behaviours that are perpetrated against adults and children,

including sexual harassment; stalking; forced or deceptive sexual exploitation (such as having images taken or distributed without freely given consent); using false promises, insistent pressure, abusive comments or reputational threats to coerce sex acts; unwanted exposure of genitals; indecent assault; and rape. The UNSW team recognises that sexual violence is a violation of human rights.

Throughout this report we will be using the term **First Nations** to represent the Indigenous, or Aboriginal and Torres Strait Islander, people of Australia.

All key terms used in this report are defined in the Glossary on pages 7-11.



The research process

2021 co-design and consultation

The original design of the National Survey was informed by a co-design and consultation process funded by DSS in 2021. Co-design and consultation are key means of engaging and evaluating specific population groups through a community-based participation research model. The literature suggests a co-design model should be implemented across all phases of program or project development, evaluation and reporting. A best practice co-design strategy involves the engagement of representatives from the community from the initial phase

of the planning process, through to implementation and evaluation, with the aim of establishing basic agreements on how the program and its evaluation will address a priority need in the community.

The UNSW team identified and adopted a best practice approach to co-design and consultation throughout the 2021 project. A Project Advisory Group (PAG) was established, and we identified key stakeholders for separate consultations. We designed a structured consultation process to invite community engagement and buy-in and the co-planning and co-funding of the Think Tank gatherings.



Figure 1: What is important to you in a National LGBTIQ+SB Sexual Violence Survey?

The 2 outputs for this project, the draft National Survey and LGBTIQ+ Prevention Evaluation Toolkit, were provided to DSS in December 2021.

A significant component of the LGBTIQA+SB Sexual Violence Survey Project was a First Nations led co-design process. This ensured the National Survey design occurred with First Nations people, not for them. The principles on First Nations governance in suicide prevention (Dudgeon et al., 2017) and First Nations

This process was necessary to align with First Nations cultural values (First Nations ways of being, knowing and doing) and the 'Western' research framework requirements for this project.

- > identify what's already being done – SurveyMonkey was used to identify what has been achieved in this space. The SurveyMonkey survey was distributed through First Nations and non-First Nations LGBTIQ+SB services and allies.
- > set the scene and explore survey design – Identification of the 6 priorities to be developed were discussed over 3 closed workshops with First Nations and non-First Nations LGBTIQ+SB services and allies.

A Project Advisory Group consisting of First Nations and non-First Nations LGBTIQA+SB community and service providers was established to oversee survey development. A group of First Nations LGBTIQA+SB elders were also involved in discussions about the brokering between First Nations culture and Western culture throughout the whole process.



2023 National Survey development

In 2023, the UNSW team was commissioned by DSS to revise, extend and conduct a National LGBTIQ+SB Sexual Violence Survey leveraging the earlier 2021 co-design work. The National LGBTIQ+SB Sexual Violence Survey design and implementation has been undertaken in the following stages:

1	Project governance, survey design and pilot
2	Recruitment strategy
3	First Nations recruitment strategy
4	Survey implementation
5	Data analysis and reporting.

1. Project governance, survey design and pilot (May 2023-June 2023)

Project governance

A second Project Advisory Group (PAG) was established and included major LGBTIQ+SB national organisations, select community groups, a representative from the Department and other organisations identified in consultation with the Department. The key role of the PAG was to provide input on survey design and recruitment strategies and assist with promotion of the survey.

The survey instrument was reviewed by members of the PAG, many of whom were involved in the original co-design process in 2021. Their comprehensive feedback was then implemented to establish the final survey instrument, which was built in Qualtrics and is available as a Word version document in Appendix F.

Survey design

The LGBTIQ+SB Sexual Violence survey is a mixed-methods survey that included multiple-choice questions and a small number of open-text response options. This integration of quantitative and qualitative response options generated a broad data set based on standardised questions while allowing respondents to communicate the diversity of their backgrounds, identities, behaviours and experiences.

The National Survey was open to all LGBTIQ+SB people who are over 18 and reside in Australia. There was no requirement to have had a personal experience of sexual violence, as the survey sought to also examine attitudes and beliefs about sexual violence and bystander response.

The UNSW team implemented a trauma-informed response to survey development. Support and referral information was

repeated at regular intervals, and the survey was built to allow participants to take breaks without losing their progress. Participants were able to choose not to respond to some questions. The survey did not require participants to list every experience of sexual violence, but rather only asked about their most impactful experience of sexual violence. At no time were participants asked to provide details about this particular instance of sexual violence or name the perpetrator.

This survey asked questions about:

- > demographics
- > symptoms of anxiety and depression, frequency of substance misuse, mental health disorder diagnosis and treatment, HIV status and testing, disability, friendships and community networks, experiences of childhood including trauma screening, family relationships and sex and relationships
- > sexual victimisation and abuse
- > attitudes to sexual assault and harassment
- > help-seeking experiences and their effectiveness
- > bystander behaviour.

Human research ethics approval

The following steps were taken to ensure compliance with ethical standards:

- > Researchers applied for ethics approval to ACON's Research Ethics Committee. This application was approved in August 2023 (RERC Reference Number 202319). Research ethics approval from ACON ensured credible and rigorous oversight of the survey instrument and research process.
- > Ethics approval was granted by UNSW Human Research Ethics Committee in May 2023, and an ethics modification application post the survey pilot, was approved in September 2023 (HREC Approval Number HC2301345).

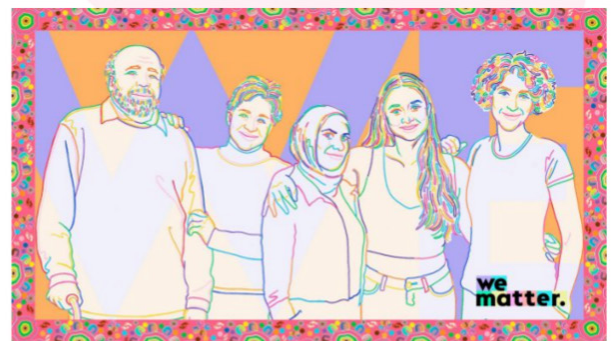
Survey pilot

The survey was piloted through small focus groups of LGBTIQ+SB people to garner feedback on the readability and logic of the survey. This was promoted through the Queer Collectives of 3 Sydney-based universities. Two focus groups were held at UNSW, Sydney University and Macquarie University, co-facilitated by GVRN research assistants. Participants contributed extensive feedback, which was incorporated into the survey design.

Following approval of this initial ethics application, the team received feedback on the survey instrument design from the pilot, as well as from our Project Advisory Group. This combined feedback informed the final revision of the survey instrument.

Welcome to the National Survey of LGBTIQA+ Experiences of Sexual Violence

Fill out the survey >



Illustrations & designs: Justin Sayarath | First Nations artist: Lisa Anne Caruana

Figure 3. National Survey of LGBTIQA+SB Experiences of Sexual Violence – website landing page

2. Recruitment strategy

The UNSW team reviewed best practice recruitment strategies from current Australian and international LGBTIQA+ surveys and built a recruitment plan. This included:

> Ensuring a clear and recognisable recruitment brand design and website

Two graphic design artists, Justin Sayarath and First Nations artist Lisa Caruana were engaged to prepare design artwork for promotional materials. Justin and Lisa are artists who represent LGBTIQA+SB communities and Lisa is a First Nations artist.

Using graphic design skills, a recruitment brand was developed to deliver images and video to facilitate engagement and participation in the survey. This included specific images that depicted diverse men, women, non-binary and trans people, people from diverse cultures and people with visible disabilities.

The UNSW team developed a specific project webpage, including information about the survey, referral options and active links. Appendix C provides examples of the promotional artwork designs and Appendix D shows the media release used for promotion.

> Promotion via stakeholders (LGBTIQA+SB organisations, affiliated professional networks and organisations)

Information, including links to the survey and project website about the survey, was delivered to over 200 organisations engaging with LGBTIQA+SB communities or addressing gendered violence. These organisations were asked to promote the survey through their networks and social media accounts. A full list of organisations can be found in Appendix E.

The PAG also supported the project by disseminating recruitment materials through their social media accounts, via newsletters and other communication channels and circulated recruitment materials to other community organisations and influential people for further dissemination.

> Social Media Recruitment (Facebook and Instagram), including paid targeted advertising

In October 2023, the research team created a project social media account on Meta and on Facebook. Due to the link between Facebook and Instagram, posts made to Facebook were also promoted on Instagram. From this account, the research team posted a series of static images with captions, as well as reels designed to drive awareness of and participation in the survey. We paid to have these posts and stories promoted to target demographics.

> CloudResearch

In October 2023, the UNSW team contacted online research and participant recruitment service CloudResearch to recruit additional participants to fill out the survey. This service uses a pre-survey vetting instrument which implements advanced brief behavioural and technological assessment. Online participant recruitment is increasingly used to target hard to reach population groups or where the survey focus is controversial or challenging. Participants are paid a small stipend if their data are able to be included in a study. From CloudResearch we gained 1,615 participants.

> Promotion at LGBTIQA+SB events

The UNSW team identified LGBTIQA+SB events occurring throughout Australia. Organisations were contacted and asked to promote the survey to members and volunteers and on their social media. Members of the UNSW team visited LGBTIQA+SB venues in Sydney during Mardi Gras

and supplied flyers and other promotional information for distribution.

> **Spotlight on culturally and linguistically diverse engagement**

The UNSW team identified a need for increased engagement from culturally and linguistically diverse communities. In order to increase engagement with these communities, organisations supporting culturally and linguistically diverse people were contacted by phone and email and asked to promote the survey by posting to their social media, to newsletters, to members and via other available communication platforms. These organisations are listed in Appendix D.

> **National media coverage**

Prominent journalists and media influencers were contacted and asked to promote the survey listed in Appendix E.

> **Publicity via government and government organisations**

DSS supported promotion by publishing the survey information to both LinkedIn and Facebook and encouraging LGBTQIA+SB employees to complete a survey.

3. First Nations recruitment strategy

The 2023 National Survey co-design process implemented a tailored First Nations recruitment strategy to maximise the best possible local community and cultural fit for this project. First Nations lead for the project, Adjunct Associate Professor Vanessa Lee-Ah Mat, began the process of identifying the appropriate services to include for the optimal recruitment of First Nations participants. The PAG were provided with a set criterion for discussion, and wherever possible the feedback from these discussions was included into the ethics application.

Upon ethics approval from UNSW HREC and ACON HREC, AA/Prof Lee-Ah Mat began introducing herself (by genealogy) and the project across First Nations radio and community communiques so that families could contact her with questions and be prepared for her arrival within their communities.

First Nations services (i.e. health, employment, land councils, social emotional wellbeing, youth, law, families, domestic violence, etc) within communities across urban, regional and remote Australia were contacted and arrangements were made to meet with First Nations LGBTQIA+SB individuals and families to discuss the survey and the best way to share the QR code within their communities. These discussions involved the sharing of genealogy and various cultural knowledges to ensure relationship connections were secured.

Each First Nations community has different environments, totems, kinship connections and ways of yarning or talking, making each communication process different. To ensure cultural safety and local ownership, visits to communities ensured members had the time to participate and that discussions were culturally appropriate (Bessarab and Ngandu, 2010).

Explaining the rationale for the survey was paramount and linking back to the First Nations community cultural norms was equally as important. When First Nations people across Australia can't see how the outcome culturally fits into their community, they may struggle to understand the importance of the outcome regardless of how needed the services are.

At each meeting, First Nations communities came up with their own solutions to administer the LGBTQIA+SB sexual violence survey so as to keep the First Nations LGBTQIA+SB individuals safe.



Some organisations including the flyer with the QR code into their **family packs, newsletters, postings at supermarkets and community noticeboards.**

In the Torres Strait and Cape York, an **online news article** was released explaining Vanessa Lee-Ah Mat's genealogy, kinship line and involvement in the project, as well as the **QR code** to the survey.

Different generations had different solutions to sharing the flyer with the QR code and how communities wanted to discuss the project. **Some generations across communities wanted all age groups at the meetings while others wanted various age groups or families individually.**

The findings for the First Nations component of this report were developed by the First Nations lead in discussions with the non-identified First Nations LGBTIQ+SB elders. This was necessary to ensure that the reporting was user-friendly for First Nations services.

In conjunction with the First Nations governance co-design methodology, the C.A.R.E principles to First Nations data governance were applied. 'CARE' principles stand for Collective

Benefit, Authority to Control, Responsibility and Ethics (Carroll et al., 2020). CARE principles enable researchers to demonstrate the project's respect for First Nations² data governance approaches by shifting the focus from regulated data collection to value-based relationships positioning within First Nations people's cultures and knowledge systems (Carroll et al., 2020). This approach recognises the importance of treating First Nations people and their private information fairly and with dignity.

CARE Principles to Indigenous data governance Carroll et al., (2020)	Indigenous data governance process for First Nations LGBTIQ+SB experiences of sexual violence survey
Collective Benefit	The means of applying the C.A.R.E principles to this Indigenous LGBTIQ+SB experiences with sexual violence project, including designing the data ecosystem with the PAG about the type of data that would be collected and the importance of this data to First Nations communities, how the data would be analysed and what the process was to provide outcomes of the survey back to the First Nations LGBTIQ+SB services and allies within communities. Parallel to the PAG, a group of non-identified First Nations LGBTIQ+SB elders were involved in the community ecosystem. This was necessary to ensure First Nations cultural protocols and values were upheld during data collection across urban, regional and remote Local Government Areas (LGA).
Authority to Control	The First Nations LGBTIQ+SB elders consisted of a gay man from Far North Queensland; a lesbian from Southeast QLD and Torres Strait; a Sistergirl from Darwin, Alice Springs and Tiwi region; a trans woman from SA and WA; and a trans person from Vic and NSW. They were not available to oversee the data analysis. The First Nations LGBTIQ+SB elders were able to confirm aspects of cultural nuances and protocols to enable the collective benefits of the survey to be communicated across and within cultures.
Responsibility	This process of including the First Nations LGBTIQ+SB elders gave self-determination to the First Nations services across the different LGAs. It allowed First Nations families, sometimes individuals and services, across urban, regional and remote LGAs to control where and if the survey was advertised, and who could or could not be approached to participate.
Ethics	This Indigenous data governance approach gave the First Nations communities the ability to assess the benefits or harm, and determine whether the future potential of the outcomes of the project would enable them to apply for resources to reduce sexual violence for the population group. The report of the project provides First Nations services within regional and remote communities with analysed data and recommendations that can be used by First Nations services to apply for future funding to increase service delivery for this population group.

² We use the term Indigenous here as this was the term used by Carroll et al. (2020).

This is the largest known sample size of First Nations LGBTIQ+SB pertaining to sexual violence within Australia. Four hundred and sixteen First Nations LGBTIQ+SB adults were recruited from Western Australia, Northern Territory, Queensland, ACT, Victoria, Tasmania, New South Wales, and South Australia. The sites are represented in blue in Figure 4: Recruitment Map and the black lines represent the travel to those sites. Travel was achieved by plane, bus, car and public transport. Following ethics approval, the survey was marketed across National First Nations radio, Close the Gap Newsletter and First Nations stakeholders and their allies. First Nations survey recruitment was delayed by floods, cyclones, bush fires, road works, flight delays and related logistical issues.

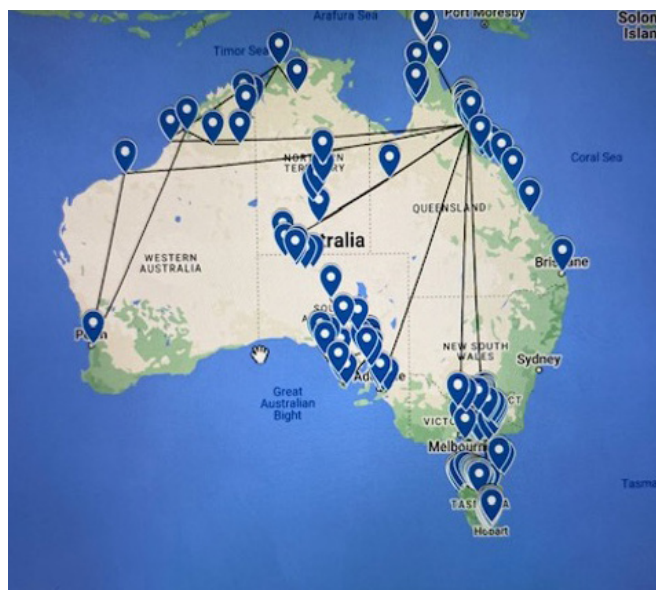


Figure 4. First Nations face-to-face recruitment map

4. Survey implementation (September 2023-February 2024)

Survey go-live

The survey went live on 11 September 2023. The Final Survey was available as a link on the project website and on other promotional materials developed specifically to provide information about the survey.

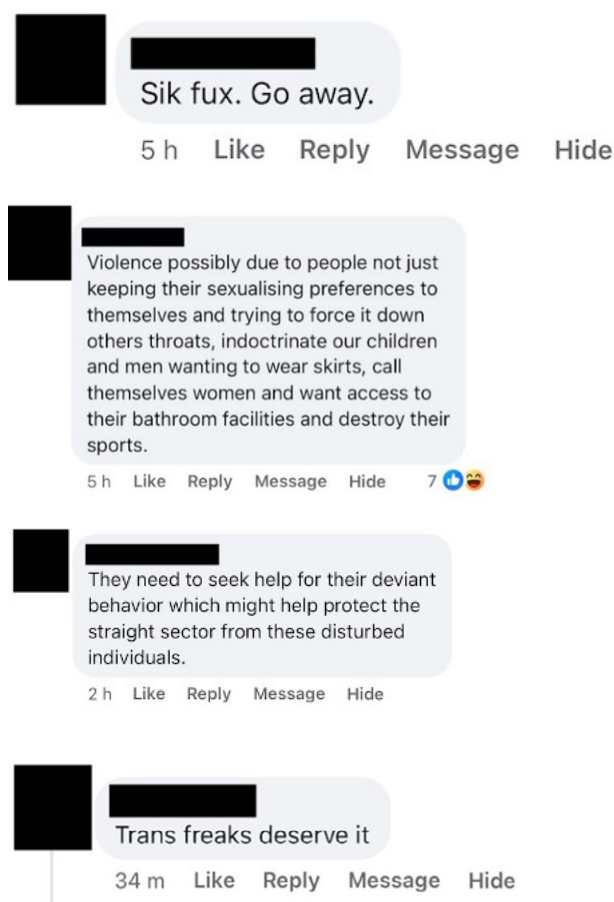
A media pack was developed for each of the 130 organisations we contacted with text and graphics provided for Facebook, Instagram and X(Twitter) promotion. In addition, a Meta social media business account was created for the Gendered Violence Research Network, through which paid advertisements for the survey were promoted on Meta platforms, including Facebook and Instagram. All LGBTIQ+SB stakeholders, including PAG members, were engaged and asked to distribute information about the study via their social media channels.

Recent changes to social media algorithms have reduced the visibility of social media posts that include links to outside websites such as Qualtrics, where the project survey was hosted. These changes have reduced the utility of social media for the purpose of research recruitment. To counteract this, the research team created a number of paid targeted advertisements to increase the reach of the recruitment efforts.

It is not possible to specifically target LGBTIQ+SB people as a group through Facebook and Instagram advertisements. Instead, Meta's targeting options are limited to hobbies and interests, such as social media users who join the fan sites of particular celebrities. The research team narrowed the target audience for the advertising campaign by focusing the project advertisements on social media audiences who displayed an interest in LGBTIQ+SB-themed music and activities. However, the imprecise nature of Meta's targeting options resulted in the survey advertisement being seen by a wide audience.

From early 2024, the research team began receiving a significant amount of homophobic and transphobic abuse through Facebook in particular. A small sample of this abuse is presented below. The research team actively monitored and removed these comments at several points during each day and over the weekend to ensure that they did not deter LGBTIQ+SB respondents from the survey. Debriefing and team discussion was available to all team members engaged in the monitoring and removal of this content.

³ Meta Platforms, Inc., doing business as Meta, and formerly named Facebook, Inc., and The Facebook, Inc., is an American multinational technology conglomerate. The company owns and operates Facebook, Instagram, Threads, and WhatsApp, among other products and services.



The survey remained online from 11 September 2023 to 29 February 2024, hosted on the survey platform Qualtrics. During this period, the survey was repeatedly promoted via social media. The response rate was actively monitored by the research team, and the characteristics of respondents were analysed to identify any groups who appeared to be under-represented. For example, by the close of 2023, it was evident that most respondents were women or gender diverse. Accordingly, in early 2024, the research team sought to increase men's participation through purposive methods, including an advertising campaign with artwork depicting men. Professor Michael Salter also produced and distributed promotional reels for social media.

The team also undertook a comprehensive email and direct contact strategy of over 200 organisations and individuals and contacted key social media influencers.

5. Data analysis and reporting

The survey sample

The intended sample was a non-probability purposive sample, meaning the sample would be gathered from LGBTIQ+SB organisations, as well as other key community stakeholders, to reach the largest number of potential participants. The focus of recruitment was on obtaining a large sample, intended to provide the best representation of the Australian LGBTIQ+SB population.

A total of 4,334 people accessed the survey through social media convenience sampling ($n = 2,719$) or CloudResearch ($n = 1,615$). The social media convenience sample includes those First Nations participants recruited via our First Nations recruitment strategy ($n = 205$). The CloudResearch sample also included a cohort of First Nations participants ($n = 402$).

The following data cleaning process was undertaken to ensure the integrity of the data. Participants were excluded from any subsequent analyses if they:

- > identified as a heterosexual cisgender female or male ($n = 681$)
- > did not acknowledge their consent to participate in the survey ($n = 8$)
- > were under 18 years of age ($n = 14$)
- > completed the survey in under 2 minutes ($n = 571$)
- > did not disclose their gender identity ($n = 393$).

Twelve participants completed the survey 68 times, detected by duplicate IP addresses, dates of birth, and sex assigned at birth. In such instances, the earliest record was retained, excluding 56 subsequent surveys.

The cleaned analytical sample comprised of 3,192 participants who provided complete ($n = 2,556$) or partially complete ($n = 636$) survey responses. After the data cleaning process of the First Nations participants, the total number included from the social media convenience sample was 163, and from the CloudResearch sample was 253, making the total First Nations participants sample size 416.

Total Sample size

3,192 participants (all LGBTIQ+SB participants)

Total First Nations sample size

416

Throughout the report, and where relevant, data on the entire sample is presented alongside data on First Nations participants. This data is not comparative, since the entire sample includes First Nations people, and the intention of the

analysis is not to facilitate or promote a comparison between First Nations and non-First Nations people. Instead, the responses of First Nations participants are analysed separately where this might facilitate insight into their experiences and needs, and implications for service provision. Similarly, where relevant, information on other groups has been presented separately to ensure that their distinct experiences and needs are contextualised within the overall findings of the study.

Analytic strategy

The report presents two analytic approaches.

1 Gender identity categories

Participants answered the question "how do you describe your gender?" by selecting one of the following responses: man or male, woman or female, non-binary, Sistergirl, Brotherboy, I use a different term, and prefer not to answer. Those who selected "I use a different term" had the opportunity to specify their gender identity in free-form text. It was necessary to merge some categories of gender identity to ensure group sizes were suitable for statistical analysis. Therefore, 5 categories of gender identity were created based on coding schemes used in other Australian surveys on gender diverse people (Hill et al., 2020).

- > Cisgender female: assigned female at birth and chose female as their gender identity (n = 1,312)
- > Cisgender male: assigned male at birth and chose male as their gender identity (n = 987)
- > Trans woman: assigned male at birth and chose female, trans or Sistergirl as their gender identity (n = 139)
- > Trans man: assigned female at birth and chose male, trans or Brotherboy as their gender identity (n = 178)
- > Non-binary: chose a gender identity that was not a binary identity (n = 576)

2 Sexual violence categories

Eight types of sexual violence were measured through the following items:

- > someone made a sexual request or comment to me (face-to-face, on the phone or online) that was unwelcome and made me feel offended, humiliated, or intimidated
- > someone fondled, kissed, or rubbed up against the private areas of my body (lips, breast, chest, crotch or butt) against my will
- > someone had oral sex with me or made me have oral sex with them against my will
- > someone put their penis, finger(s) or object(s) into my vagina or anus against my will

- > someone took nude or sexual images or videos of me against my will
- > someone shared nude or sexual pictures or videos of me with other people against my will
- > even though it didn't happen, someone tried to have oral sex with me, or make me have oral sex with them against my will, and
- > even though it didn't happen, someone tried to put their penis, finger(s) or object(s) into my vagina or anus against my will.

For each type of sexual violence, participants reported the age at which it first occurred, as well as if it had ever happened when they were over the age of 18 years. Based on survey questions 41 to 88, four categories were created that indicated if participants had experienced one or more types of sexual violence during childhood, adulthood or both. These categories were designated as:

- > no experience of sexual violence (n = 775, 24.3%)
- > sexual violence during childhood only (before age 18 only) (n = 220, 6.9%)
- > sexual violence during adulthood only (at or after age 18 only) (n = 538, 16.9%)
- > sexual violence during childhood and adulthood (before and at or after age 18) (n = 1,659, 52.0%).

Analytical strategy – the quantitative data

Analyses were limited to descriptive statistics (e.g., counts, proportions, and means) and univariate comparisons of cross tabulations stratified by categories of gender identity and exposure to sexual violence.

Analyses were conducted for the entire sample (n = 3,192) and separately for the sub-group of participants who identified as Aboriginal and/or Torres Strait Islander (n = 416).

Univariate associations were examined using chi-square tests (x²) and one-way Analyses of Variance (F) (Welch's test was used instead when the homogeneity of variance assumption was not met). It was necessary on occasion to combine some categories to ensure that no more than 20% of cells had an expected value of less than five.

Results are presented in tables, with p-values noting where results are statistically significant.⁴ Post hoc analyses were based on Bonferroni corrected pairwise comparisons of proportions and means with superscripts denoting significant (p < .05) pairwise differences between categories of gender identity or sexual violence. This means that our reporting of the data makes specific note of significant differences between the following chosen groups:

⁴ A statistically significant result means a result that is not likely to be due to chance or some other factor. Statistical significance is recorded as a p-value. A p-value less than .05 (p < .05) means that a result is statistically significant. A p-value greater than .05 is not statistically significant (p > .05).

Gender Identity Categories

- ^a significantly different from cisgender women
- ^b significantly different from cisgender men
- ^c significantly different from trans women
- ^d significantly different from trans men
- ^e significantly different from non-binary.

Sexual Violence Categories

- ^a significantly different from no sexual violence group
- ^b significantly different from childhood exposure group
- ^c significantly different from adult exposure group
- ^d significantly different from childhood and adult exposure group.

First Nations LGBTIQ+SB Identification

First Nations participants were identified by their response to the following question.

Are you of Aboriginal and/or Torres Strait Islander origin or descent?

No

Yes, Australian Aboriginal

Yes, Torres Strait Islander

Yes, both Australian Aboriginal and Torres Strait Islander

Analyses were conducted using SPSS v.29.

Qualitative data

Only limited qualitative data analyses were undertaken for this report and is confined to analysis of 'Other' categories, attached to the quantitative multiple choice and forced choice survey questions. The analytic methods implemented for the qualitative data will be detailed in Report Two.

Data Limitations

This is the first national survey of its kind in Australia making this data the baseline for future research and policy development with reference to LGBTIQ+SB population, and the First Nations LGBTIQ+SB population, experiences with sexual violence.

It should be noted that this is a convenience sample, and the results cannot be generalised to the whole LGBTIQ+SB population.

First Nations

There are well documented reports on the problems with the quality, identification, and availability of data for First Nations Australian research. When focusing on a small cohort within a First Nations population such as the LGBTIQ+SB cohort, the availability of data is substantially affected. While there has been a comparatively large response rate from the First Nations LGBTIQ+SB population, the sample is not sufficient to provide statistically significant results and there is a high degree of variability across response rates.

In addition, despite the survey being available Australia wide, there is no separation of data by state or territory and participants only identify their geographic data by urban, regional, and remote categories. The findings may not be able to contribute to recommendations about service responses by geographic regions or First Nation communities.

Findings

Demographics

Total sample – all participants

Table 1. All participants: descriptive statistics (N = 3,192)

Variable	n (%) / m (sd)
Mean age	35.52 (13.24) years
18-24 years	691 (21.6%)
25 – 34 years	1,119 (35.1%)
35 – 44 years	655 (20.5%)
45 – 54 years	347 (10.9%)
55 – 64 years	217 (6.8%)
65 years and older	125 (3.9%)
<i>Missing</i>	38 (1.2%)
Sexual orientation	
Gay/Lesbian	1,416 (44.4%)
Bi/pansexual	1,210 (37.9%)
A/demisexual	202 (6.3%)
Queer	278 (8.7%)
Unsure / prefer not to answer	63 (2.0%)
<i>Missing</i>	23 (0.7%)
Sex recorded at birth	
Male	1,259 (39.4%)
Female	1,924 (60.3%)
Prefer not to answer	9 (0.3%)

Variable	n (%) / m (sd)
Gender identity	
Cisgender woman	1,312 (41.1%)
Cisgender man	987 (30.9%)
Trans woman	139 (4.4%)
Trans man	178 (5.6%)
Non-binary	576 (18.0%)
Intersex condition	
Yes	148 (4.6%)
No	2,805 (87.9%)
Unsure	225 (7.0%)
Prefer not to answer	14 (0.4%)
Experience of sexual violence	
No sexual violence	775 (24.3%)
Childhood only	220 (6.9%)
Adulthood only	538 (16.9%)
Both childhood and adulthood	1,659 (52.0%)

The report is based on the survey responses of 3,192 individuals. Their mean age was 35.53 (see Table 2), slightly younger than the mean Australian age of 38.5 years (ABS, 2023).

Substantially more participants were recorded as female (60.3%) than male (39.4%) at birth. Nine participants indicated that they used a different term to describe their sex recorded at birth, all of whom wrote that they would prefer not to disclose their sex at birth. All 9 also had a non-binary gender identity.

The largest gender category of respondents were cisgender women (41.1%) followed by cisgender men (30.9%), non-binary people (18%), trans men (5.6%) and trans women (4.4%). There were 193 participants who initially indicated that they used a different term to describe their gender identity, which they disclosed in an open-text response. These responses were then matched to the most appropriate category, of which 6.2% (n = 12) were designated cisgender woman, 1.0% (n = 2) cisgender man, 14.5% (n = 28) trans woman, 24.4% (n = 47) trans man, and 53.9% (n = 104) non-binary.

Of the 566 people who identified as non-binary, 133 (23.5%) stated they were recorded male at birth and 433 (76.5%) stated they were recorded female at birth.

Regarding sexual orientation, 44.4% of participants identified as gay/lesbian, followed by 37.9% bi/pansexual, 8.7% queer, 6.35% a/demisexual and 2% were unsure or prefer not to answer. Of the 544 who originally indicated that they used a different term to describe their sexual orientation, 5.0% (n = 27) were categorised as gay/lesbian, 36.4% (n = 198) as bi/pansexual, 7.5% (n = 41) as a/demi sexual, and 51.1% (n = 278) as queer.

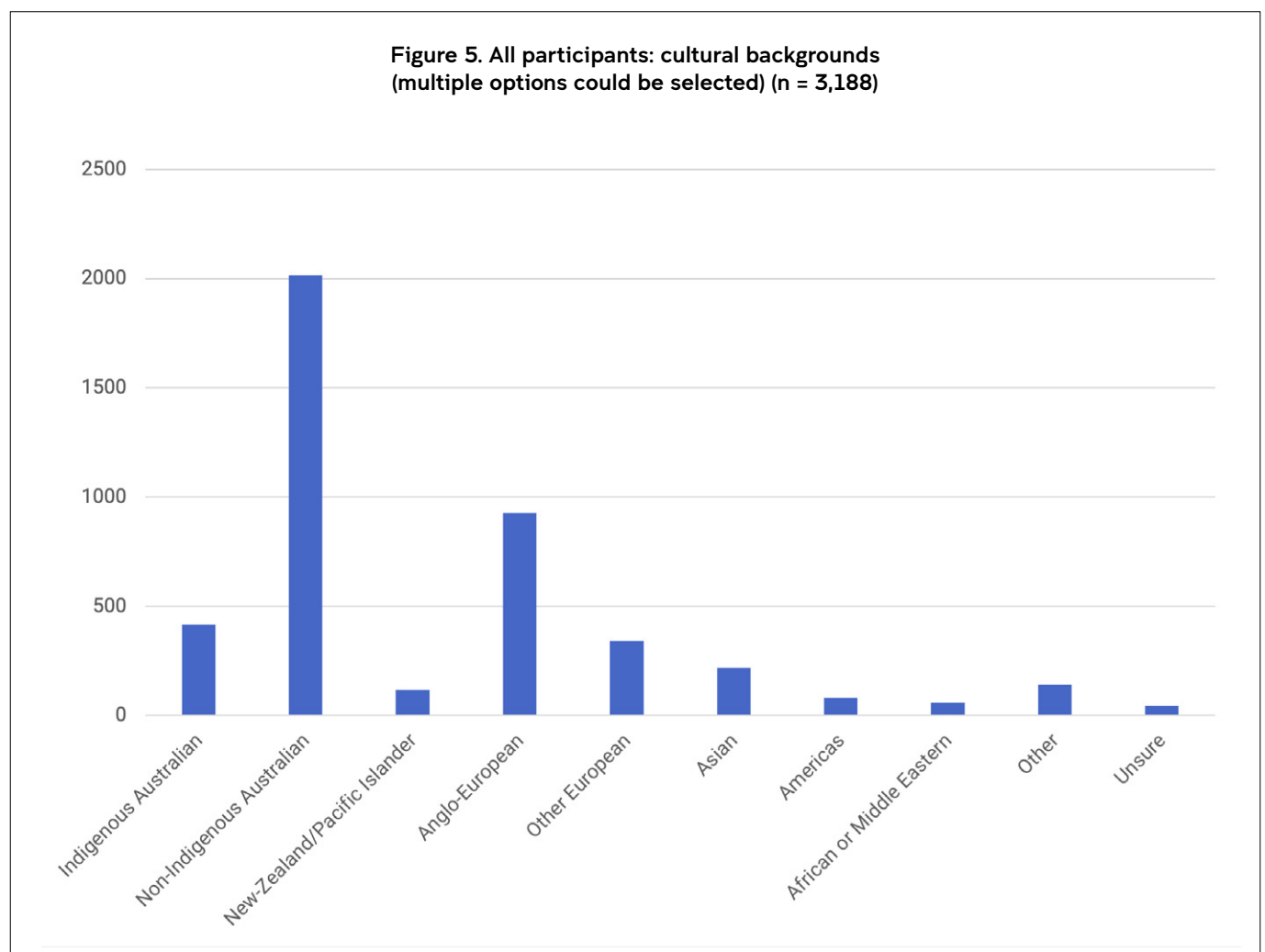
Around one-in-twenty (4.6%, n = 146) participants reportedly had a variation of sex characteristics (sometimes called "intersex" or "differences of sex development"), while 7% of participants stated they were "unsure", reflecting a degree of uncertainty about this question. Of those with a variation in sex characteristics, most (78.8%) were recorded male at birth and identified as a cisgender man (63.5%).

Most participants (52%) described sexual violence occurring in both childhood and adulthood, whereas around one-quarter (24.3%) of the sample reported no history of sexual violence. Almost one-in-six (16.9%) reported that sexual violence occurred in adulthood only, while only 6.9% reported that it occurred in childhood only.

Table 2. All participants: mean (sd) age (n = 3,154)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,304	n = 962	n = 137	n = 177	n = 574	
Age in years	34.47 (12.22) ^{bde}	40.71 (14.42) ^{acde}	36.67 (15.69) ^{bde}	28.80 (9.84) ^{abc}	30.99 (10.27) ^{abc}	76.55, p < .001

The mean age of cisgender men (40.71 years old) was significantly older than all other gender categories. Trans men and non-binary people were significantly younger than cisgender women, cisgender men and trans women.



Most (85.8%) participants were born in Australia. In terms of cultural background, 13.0% identified as First Nations Australian, 63.2% identified as non-First Nations Australian, 25.9% identified as Anglo-European, 10.7% identified as Other European, 6.8% identified as Asian, 3.7% as New Zealander or Pacific Islander, 2.5% from the Americas and 1.8% from Africa or the Middle East. Participants could select multiple options for their cultural backgrounds.

Table 3 examines cultural identity across the 5 gender categories. The survey found that cisgender men in the study were significantly more likely to identify as First Nations Australian compared to cisgender women and non-binary people. Cisgender men were significantly less likely to identify as Anglo-European compared to trans men and non-binary people. Non-binary people were significantly more likely to identify as Anglo-European compared to cisgender men and women.

Table 3. All participants: cultural background (multiple can be selected) (n = 3,188)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 1,311	n = 986	n = 139	n = 177	n = 575	
First Nations Australian	130 (9.9%) ^b	206 (20.9%) ^{ae}	17 (12.2%)	22 (12.4%)	41 (7.1%) ^b	82.70, p < .001
Non-First Nations Australian	896 (69.1%) ^b	560 (57.2%) ^{ae}	90 (67.2%)	109 (63.4%)	360 (64.7%) ^b	32.25, p < .001
New Zealand or Pacific Islander	61 (4.7%) ^b	23 (2.4%) ^a	2 (1.5%)	6 (3.5%)	26 (4.7%)	11.98, p = .02
Anglo-European	367 (28.4%) ^e	242 (24.7%) ^{de}	45 (33.6%)	61 (35.7%) ^b	210 (37.8%) ^{ab}	33.80, p < .001
Other European	140 (10.9%)	96 (9.8%)	17 (12.7%)	26 (15.2%)	62 (11.3%)	4.98, p = .29
Asian	78 (6.0%)	66 (6.7%)	11 (8.2%)	12 (7.0%)	52 (9.4%)	7.16, p = .13
North or South American	28 (2.2%)	24 (2.5%)	2 (1.5%)	6 (3.5%)	19 (3.4%)	3.83, p = .43
African or Middle Eastern	22 (1.7%)	14 (1.4%)	3 (2.2%)	3 (1.8%)	16 (2.9%)	4.57, p = .34
Other	57 (4.4%)	25 (2.6%) ^{de}	6 (4.5%)	12 (7.0%) ^b	40 (7.2%) ^b	20.86, p < .001
Unsure	18 (1.4%) ^b	1 (0.1%) ^{acde}	3 (2.2%) ^b	5 (2.8%) ^b	18 (3.2%) ^b	27.64, p < .001

Figure 6. All participants: residential locations of participants (n = 3,153)

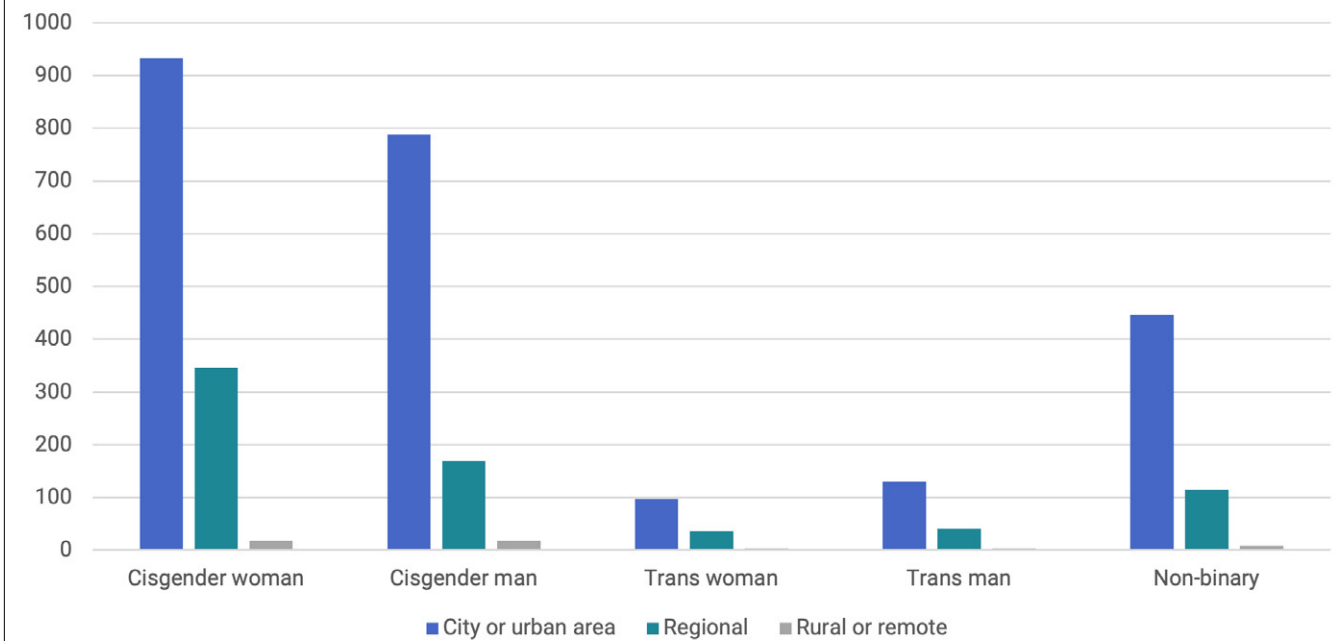


Figure 6 presents the residential location of participants according to their gender identity. In total, 76% of the sample lived in a city or urban area, 29.5% lived in a regional area and 7.2% lived in a rural or remote area. The survey found that cisgender women were significantly less likely than cisgender men and non-binary people to live in a city or urban area, but significantly more likely to live in a regional area.

Table 4. All participants: residential location (n = 3,153)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,297	n = 975	n = 137	n = 174	n = 570	
City or urban area	933 (71.9%) ^{bd}	788 (80.8%) ^a	98 (71.5%)	130 (74.7%)	446 (78.2%) ^a	31.64, $p < .001$
Regional	346 (26.7%) ^{bd}	169 (17.3%) ^a	36 (26.3%)	41 (23.6%)	115 (20.2%) ^a	
Rural or remote	18 (1.4%)	18 (1.8%)	3 (2.2%)	3 (1.7%)	9 (1.6%)	

Regarding educational attainment, 5.5% of participants had less than a secondary school education, 45% had a high school certificate, 28.9% had a bachelor's degree and 20.6% had postgraduate qualifications. Table 5 found that trans men were significantly more likely to report less than a secondary school education compared to cisgender women, significantly more likely to have only a secondary school education and significantly less likely to have a bachelor's degree compared to cisgender men and women and non-binary people.

Figure 7. All participants: educational attainment (n = 3,140)

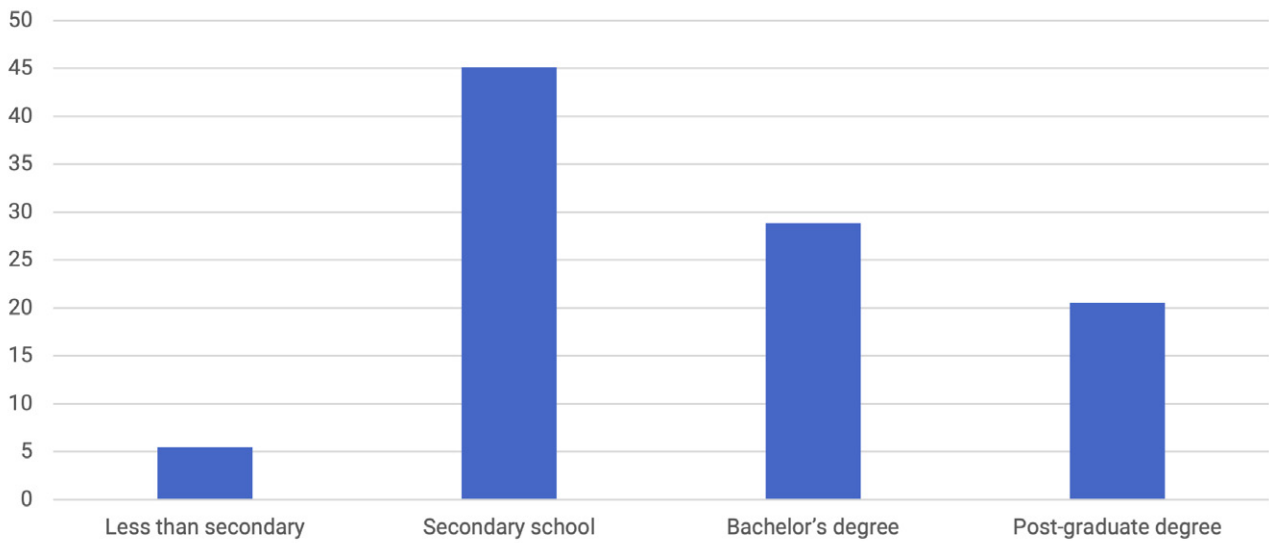


Table 5. All participants: educational attainment (n = 3,140)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 1,296	n = 971	n = 135	n = 173	n = 565	
Less than secondary	59 (4.6%) ^d	53 (5.5%)	9 (6.7%)	17 (9.8%) ^a	33 (5.8%)	37.72, p < .001
Secondary school	576 (44.4%) ^d	416 (42.8%) ^d	72 (53.3%)	101 (58.4%) ^{abe}	251 (44.4%) ^d	
Bachelor's degree	373 (28.8%) ^d	292 (30.1%) ^d	36 (26.7%)	31 (17.9%) ^{abe}	175 (31.0%) ^d	
Postgraduate degree	288 (22.2%)	210 (21.6%)	18 (13.3%)	24 (13.9%)	106 (18.8%)	

Employment status over the last 3 months is varied across the 5 gender categories. The majority of cisgender men were in full-time employment (65.1%), however less than half of cisgender women were working full time (45.8%). One-third of trans women and non-binary people were employed full time,

and less than one-quarter of trans men. Cisgender men were significantly more likely to be working full time, and significantly less likely to be working part time or be casual or unemployed and not looking for work, compared to all other gender categories.

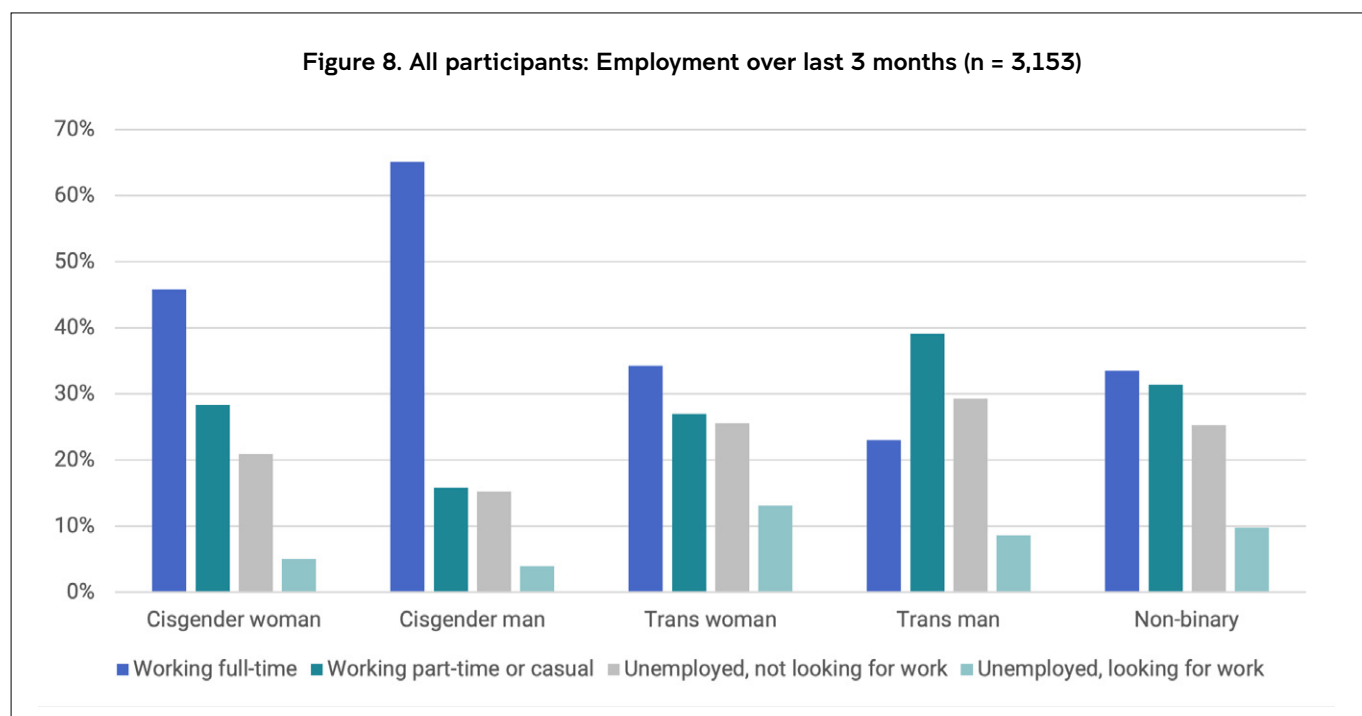


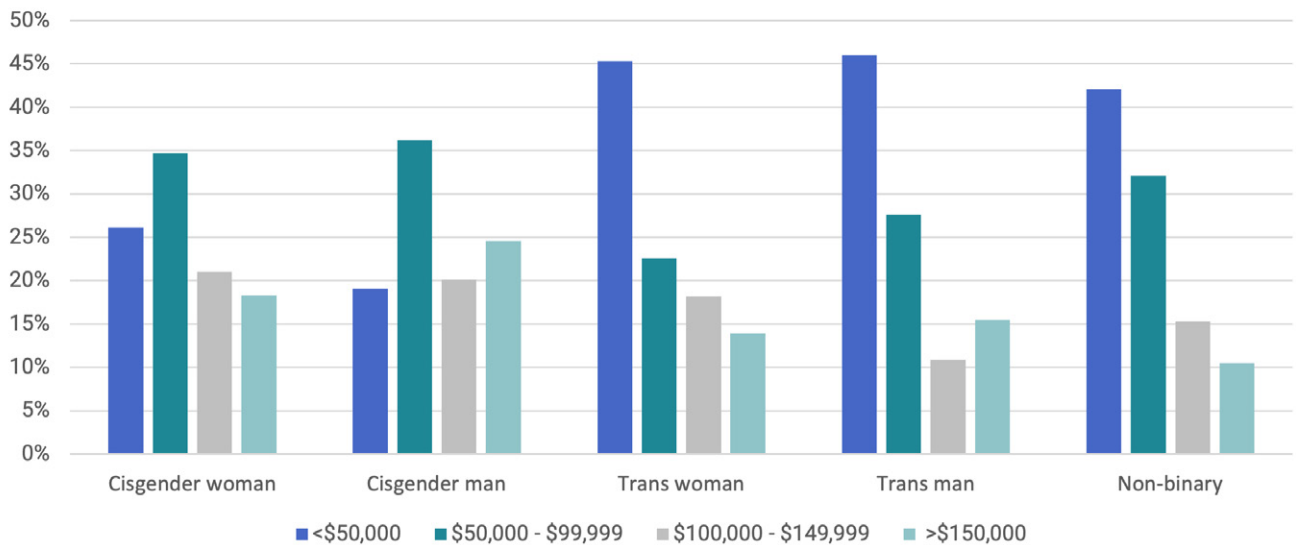
Table 6. All participants: employment over last 3 months (n = 3,153)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,297	n = 975	n = 137	n = 174	n = 570	
Working full time	594 (45.8%) ^{bde}	635 (65.1%) ^{acde}	47 (34.3%) ^b	40 (23.0%) ^{ab}	191 (33.5%) ^{ab}	239.01, p < .001
Working part time or casual	367 (28.3%) ^{bd}	154 (15.8%) ^{acde}	37 (27.0%) ^b	68 (39.1%) ^{ab}	179 (31.4%) ^b	
Unemployed, not looking for work	271 (20.9%) ^b	148 (15.2%) ^{acde}	35 (25.5%) ^b	51 (29.3%) ^b	144 (25.3%) ^b	
Unemployed, looking for work	65 (5.0%) ^{ce}	38 (3.9%) ^{ce}	18 (13.1%) ^{ab}	15 (8.6%)	56 (9.8%) ^{ab}	

These differences in employment status were evident in participants' total annual household income before taxes. As Figure 9 demonstrates, almost half (44.6%) of cisgender men had a household income of over \$100,000 annually, compared to 39.3% of cisgender women. One-third of trans women (31.1%) had a household income of over \$100,000 per annum and this dropped to approximately one-quarter of trans men (26.4%) and non-binary people (25.8%).

Disparities in household income between gender categories are particularly apparent in relation to low-income brackets. One-quarter (27.0%) of Australian households in the 2021-22 financial year had an annual income under \$51,948 (ABS, 2022). However, 46% of trans men, 45.3% of trans women and 42.1% of non-binary people had an annual household income of less than \$50,000; these proportions were significantly greater than for cisgender men (19.1%) and women (26.1%).

Figure 9. All participants: Total annual household income before tax (n = 3,153)



In relation to higher household incomes, trans men were significantly less likely to be earning between \$100,000-\$149,000 compared to cisgender people, and non-binary people were significantly less likely to be earning this amount compared to cisgender women. Cisgender women were

significantly less likely to be earning over \$150,000 per year compared to cisgender men, and non-binary people were significantly less likely to be earning this amount compared to cisgender men and women.

Table 7. All participants: total annual household income before taxes (n = 3,153)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 1,297	n = 975	n = 137	n = 174	n = 570	
<\$50,000	338 (26.1%) ^{cde}	186 (19.1%) ^{cde}	62 (45.3%) ^{ab}	80 (46.0%) ^{ab}	240 (42.1%) ^{ab}	166.14, p < .001
\$50,000-\$99,999	450 (34.7%) ^c	353 (36.2%) ^c	31 (22.6%) ^{ab}	48 (27.6%)	183 (32.1%)	
\$100,000-\$149,999	272 (21.0%) ^{de}	196 (20.1%) ^d	25 (18.2%)	19 (10.9%) ^{ab}	87 (15.3%) ^a	
>\$150,000	237 (18.3%) ^{be}	240 (24.6%) ^{ae}	19 (13.9%)	27 (15.5%)	60 (10.5%) ^{ab}	

First Nations participants

Table 8. First Nations participants: descriptive statistics (n = 416)

Variable	n (%) / m (sd)
Mean age	35.25 (11.68) years
18-24 years	65 (15.6%)
25 – 34 years	171 (41.1%)
35 – 44 years	87 (20.9%)
45 – 54 years	44 (10.6%)
55 – 64 years	25 (6.0%)
65 years and older	8 (1.9%)
<i>Missing</i>	16 (3.8%)
Sexual orientation	
Gay/Lesbian	208 (50.0%)
Bi/pansexual	159 (38.2%)
A/demisexual	19 (4.6%)
Queer	14 (3.4%)
Unsure / prefer not to answer	11 (2.6%)
<i>Missing</i>	5 (1.2%)
Sex recorded at birth	
Male	238 (57.2%)
Female	177 (42.5%)
Prefer not to answer	1 (0.2%)
Gender identity	
Cisgender woman	130 (31.3%)
Cisgender man	206 (49.5%)
Trans woman	17 (4.1%)
Trans man	22 (5.3%)
Non-binary	41 (9.9%)
Intersex condition	
Yes	98 (23.6%)
No	280 (67.3%)
Unsure	36 (8.7%)
Prefer not to answer	2 (0.5%)
Experience of sexual violence	
No sexual violence	129 (31.0%)
Childhood only	28 (6.7%)
Adulthood only	81 (19.5%)
Both childhood and adulthood	178 (42.8%)

Participants identifying as First Nations Australian comprised 13% (n = 416) of the analytical sample, compared to 3.8% of the total Australian population (ABS, 2023). The mean age for First Nations participants (35.25 years) was comparable to the overall sample (35.52 years).

The majority (57.2%) of First Nations participants were recorded male at birth. One participant indicated that they used a different term for their sex recorded at birth, and that they would prefer not to disclose their sex at birth. The most common gender identity among First Nations participants was cisgender man (49.5%), followed by cisgender women (31.3%), non-binary person (9.9%), trans man (5.3%) and trans woman (4.1%). A small proportion (n = 23) initially indicated that they used a different term to describe their gender identity, of which 4.3% (n = 1) were designated cisgender women, 17.4% (n = 4) trans women, 21.7% (n = 5) trans men, and 56.5% (n = 13) non-binary people.

Of the 40 First Nations non-binary participants, 15 (36.5%) stated they were recorded male at birth and 25 (62.5%) stated they were recorded female at birth.

Half (49.5%) of First Nations participants identified as gay/lesbian, followed by 38.2% who identified as bi/pansexual. This was followed by 5.6% who identified as a/demisexual, 3.4% who identified as queer and 2.6% who responded unsure/prefer not to answer. Of the 41 who indicated that they used a different term to describe their sexual orientation, 9.8% (n = 4) were categorised as gay/lesbian, 53.7% (n = 22) as bi/pansexual, 2.4% (n = 1) as a/demi sexual, and 34.1% (n = 14) as queer.

Comparatively high numbers of First Nations participants identified as intersex or having a difference of sexual development at almost one-quarter of the sample (23.6%) with 8.7% unsure. Of those with a variation in sex characteristics, 83.7% were recorded male at birth and 74.5% identified as a cisgender man.

Almost one-third of First Nations participants reported no history of sexual violence (31%). Relatively few (6.7%) reported sexual violence in childhood only, and one-in-five (19.5%) reported sexual violence in adulthood only. Sexual violence in both childhood and adulthood was common, affecting almost half (42.8%) of all First Nations participants.

Table 9. First Nations participants: mean (sd) age (n = 400)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 129	n = 193	n = 15	n = 22	n = 41	
Age in years	34.34 (11.41)	36.52 (10.59) ^d	42.53 (16.47) ^d	28.32 (8.32) ^{bc}	33.20 (14.62)	5.41, p < .001

The mean age of First Nations trans women was the highest in the First Nations sample (42.53 years old) followed by cisgender men (36.52 years old).

The study found that most First Nations participants lived in a city or urban area, although there was significant variation between gender identity groups. Cisgender men were significantly more likely to live in a city or urban area compared to cisgender women, trans women and non-binary people.



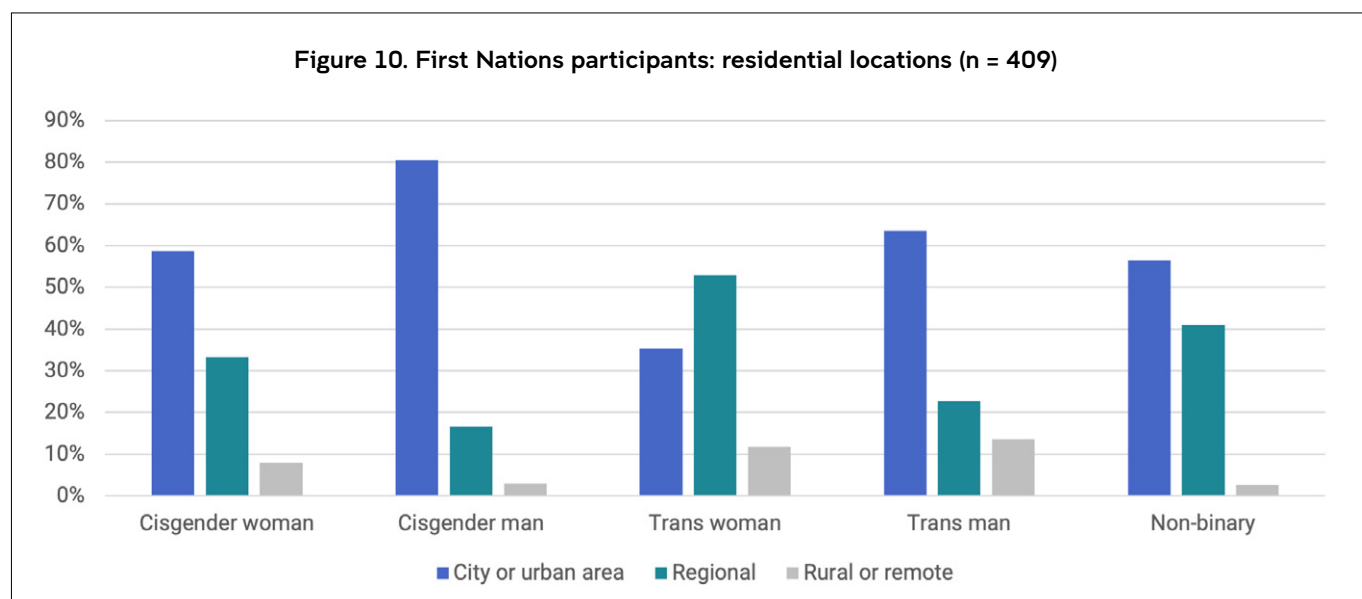


Table 10. First Nations participants: residential location (n = 409)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 126	n = 205	n = 17	n = 22	n = 39	
City or urban area	74 (58.7%) ^b	165 (80.5%) ^{ace}	6 (35.3%) ^b	14 (63.6%)	22 (56.4%) ^b	30.90, p < .001
Regional, rural or remote	52 (41.3%) ^b	40 (19.5%) ^{ace}	11 (64.7%) ^b	8 (36.4%)	17 (43.6%) ^b	

A secondary school qualification was the most common level of educational attainment recorded by First Nations participants in the survey, ranging from 41.2% (trans women) to 59.1% (trans men). A bachelor's degree or higher was reported by between 27.3% (trans men) to 38% (cis men) of First Nations participants.

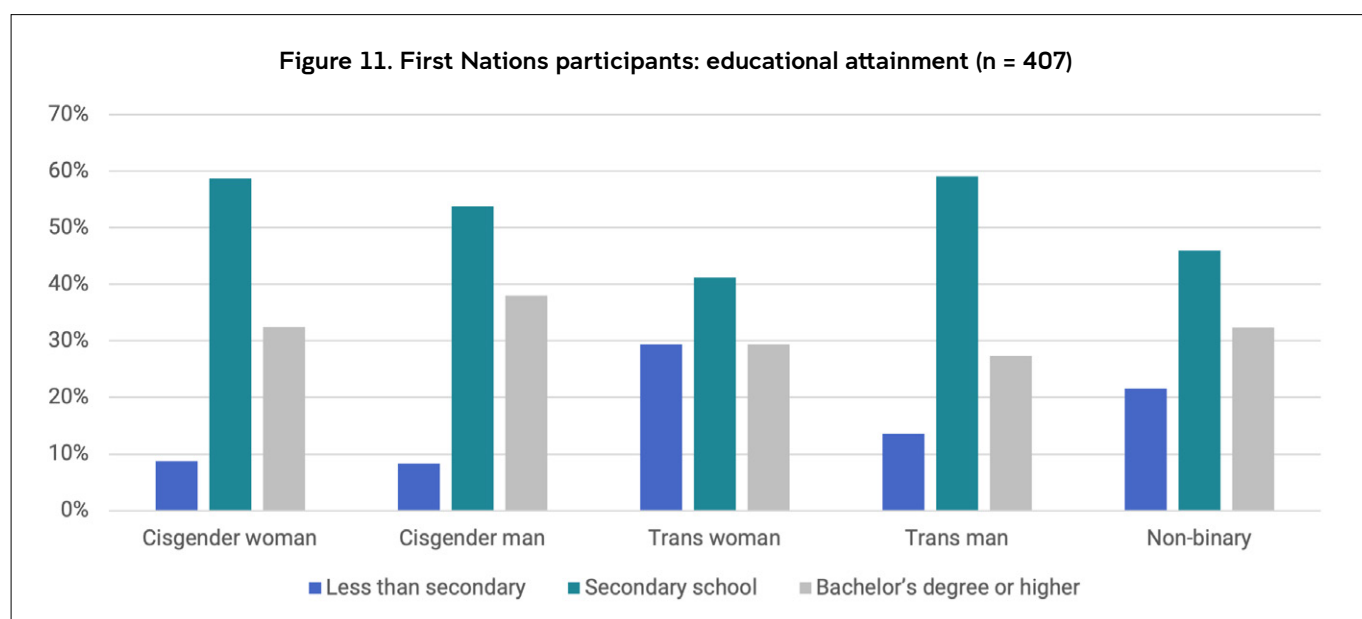


Table 11. First Nations participants: educational attainment (n = 407)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 126	n = 205	n = 17	n = 22	n = 37	
Less than secondary	11 (8.7%)	17 (8.3%)	5 (29.4%)	3 (13.6%)	8 (21.6%)	14.25, p = .08
Secondary school	74 (58.7%)	110 (53.7%)	7 (41.2%)	13 (59.1%)	17 (45.9%)	
Bachelor's degree or higher	41 (32.5%)	78 (38.0%)	5 (29.4%)	6 (27.3%)	12 (32.4%)	

First Nations cisgender men were significantly more likely to be employed over the past 3 months compared to all other gender identity categories, with 81.5% working full time. Comparatively, trans men, trans women and non-binary people had higher rates of unemployment (including not looking for work or looking for work) compared to cisgender women and men.

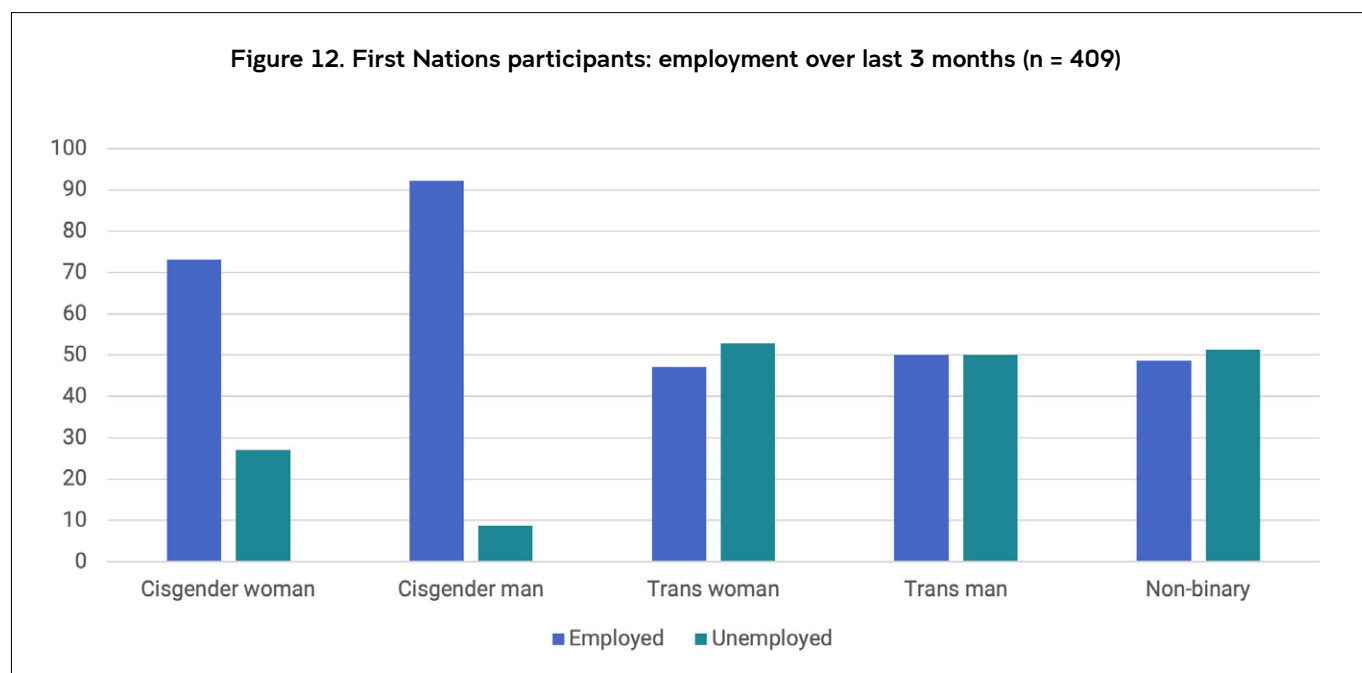


Table 12. First Nations participants: employment over last 3 months (n = 409)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 126	n = 205	n = 17	n = 22	n = 39	
Employed	92 (73.0%) ^{be}	187 (91.2%) ^{acde}	8 (47.1%) ^b	11 (50.0%) ^b	19 (48.7%) ^b	60.70, p < .001
Unemployed	34 (27.0%) ^{be}	18 (8.8%) ^{acde}	9 (52.9%) ^b	11 (50.0%) ^b	20 (51.3%) ^{ab}	

Our study found that one-quarter (26.2%) of First Nations LGBTIQ+SB participants had an annual household income below \$50,000, making their weekly earning at or below \$960. Over half of trans women (52.9%) and non-binary people (56.4%) had an annual household income below \$50,000. First Nations cisgender men were significantly less likely to have an annual household income below \$50,000 compared to all other gender identities and were significantly more likely to have a household income of \$100,000 or more compared to cisgender women.

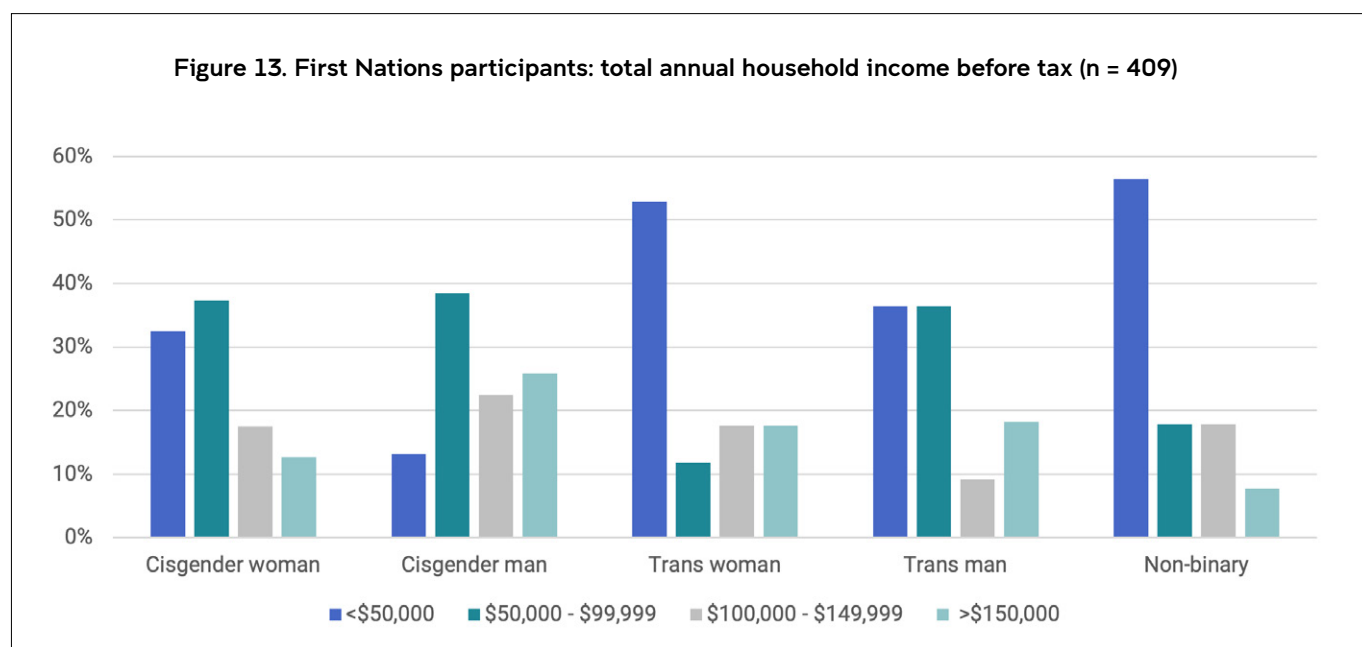


Table 13. First Nations participants: total annual household income before taxes (n = 409)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 126	n = 205	n = 17	n = 22	n = 39	
<\$50,000	41 (32.5%) ^b	27 (13.2%) ^{acde}	9 (52.9%) ^b	8 (36.4%) ^b	22 (56.4%) ^b	50.88, p < .001
\$50,000-\$99,999	47 (37.3%)	79 (38.5%)	2 (11.8%)	8 (36.4%)	7 (17.9%)	
\$100,000 or more	38 (30.2%) ^b	99 (48.3%) ^a	6 (35.3%)	6 (27.3%)	10 (25.6%)	

Sex and relationships

Total sample – all participants

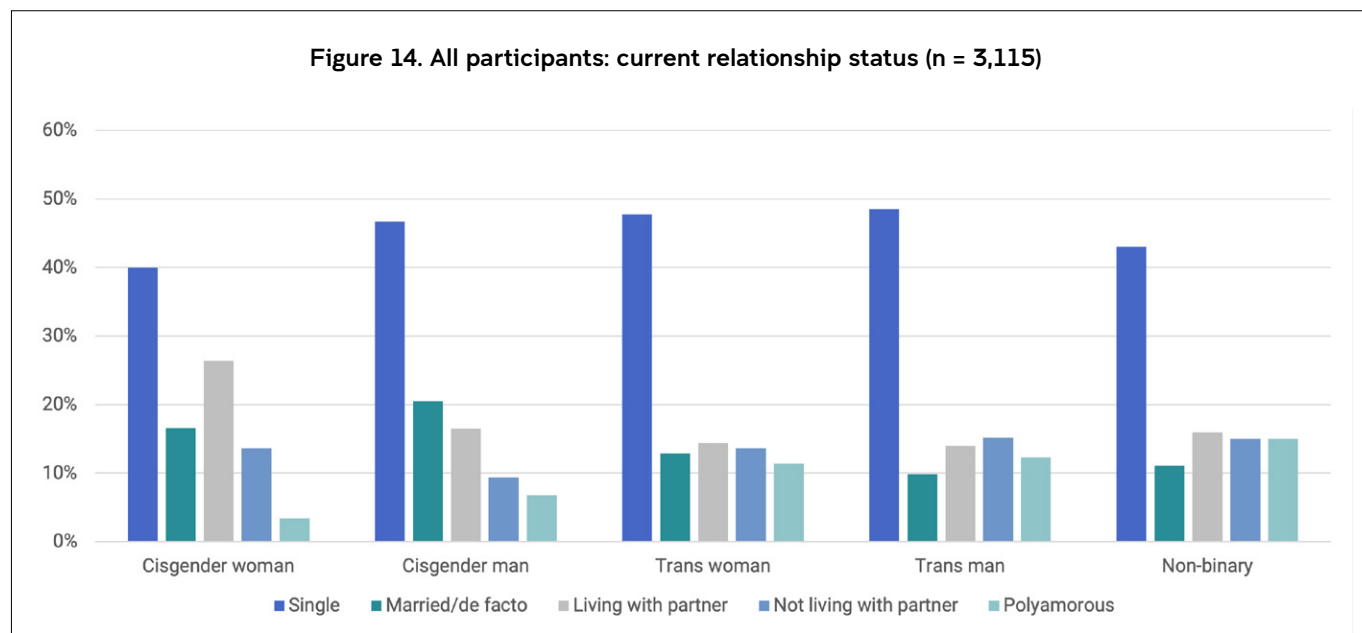


Table 14. All participants: current relationship status (n = 3,115)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,297	n = 975	n = 137	n = 174	n = 570	
Single	514 (40.0%) ^b	451 (46.7%) ^a	63 (47.7%)	83 (48.5%)	241 (43.0%)	165.87, p < .001
Married/de facto	214 (16.6%) ^e	198 (20.5%) ^{de}	17 (12.9%)	17 (9.9%) ^b	62 (11.1%) ^{ab}	
Living with partner	339 (26.4%) ^{bcde}	159 (16.5%) ^a	19 (14.4%) ^a	24 (14.0%) ^a	90 (16.0%) ^a	
Not living with partner	175 (13.6%) ^b	91 (9.4%) ^{ae}	18 (13.6%)	26 (15.2%)	84 (15.0%) ^b	
Polyamorous	44 (3.4%) ^{bcde}	66 (6.8%) ^{ae}	15 (11.4%) ^a	21 (12.3%) ^a	84 (15.0%) ^{ab}	

On average, 43% of the sample were single, 16.3% were married or in a de facto relationship, 20% were living with their partner, 12% were in a relationship but not living with their partner, and 7% were in polyamorous relationships. Cisgender men were significantly more likely to be married or in a de facto relationship than trans men and non-binary people. Cisgender women were significantly more likely to be living with their partner, and significantly less likely to be in a polyamorous relationship, compared to all other gender identity categories.

Furthermore, non-binary people were significantly more likely to be in a polyamorous relationship than cisgender women and men.

Figure 14 presents data on current relationship length for those in a relationship, with 'more than 5 years' the most endorsed response across all gender categories. Notably, cisgender men and women were significantly more likely than trans men and non-binary people to currently be in a relationship spanning over 5 years.

Table 15. All participants: current relationship length (n = 1,894)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 832	n = 551	n = 79	n = 92	n = 340	
Less than 6 months	55 (6.6%) ^c	25 (4.5%) ^{ce}	16 (20.3%) ^{ab}	10 (10.9%)	34 (10.0%) ^b	57.57, p < .001
6-11 months	73 (8.8%)	52 (9.4%)	7 (8.9%)	13 (14.1%)	43 (12.6%)	
1-2 years	150 (18.0%)	99 (18.0%)	11 (13.9%)	18 (19.6%)	67 (19.7%)	
3-5 years	172 (20.7%)	95 (17.2%)	15 (19.0%)	24 (26.1%)	75 (22.1%)	
More than 5 years	382 (45.9%) ^{de}	280 (50.8%) ^{de}	30 (38.0%)	27 (29.3%) ^{ab}	121 (35.6%) ^{ab}	

Partner gender was generally concordant with participant gender, with most cisgender women and trans women reporting female partners, and cisgender men and trans men reporting male partners. Non-binary people had a comparatively equal distribution of partner gender, with one-third non-binary, 37.1% male and 39.6% female.

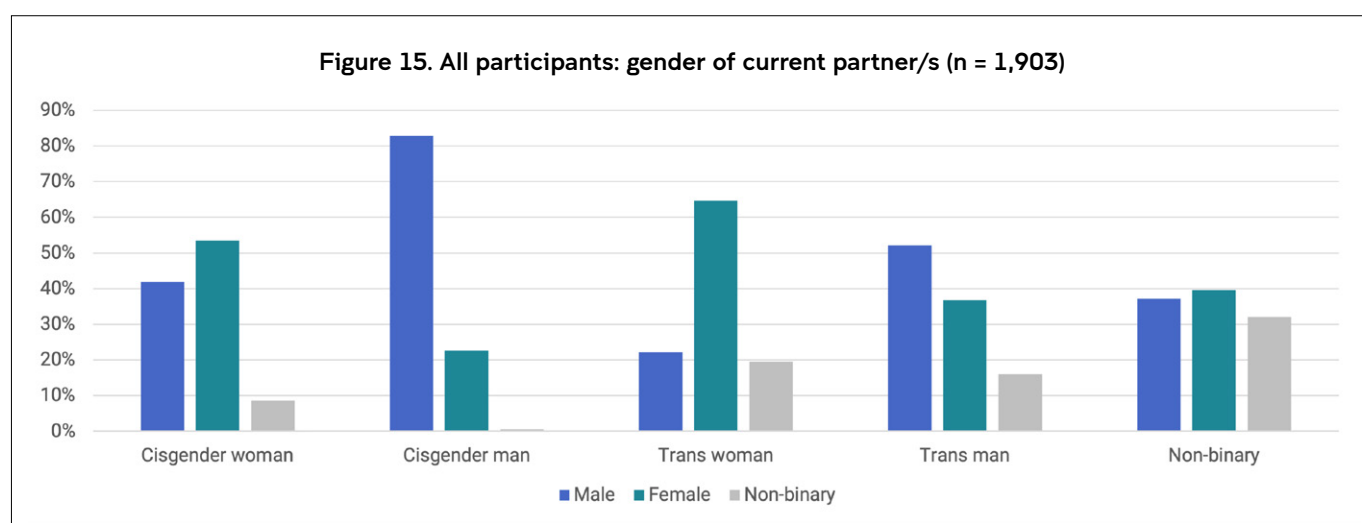


Table 16. All participants: gender of current partner/s (n = 1,894)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 828	n = 553	n = 77	n = 95	n = 341	
Male	347 (41.9%) ^{bc}	459 (82.9%) ^{acde}	17 (22.1%) ^{abd}	50 (52.1%) ^{bc}	127 (37.1%) ^b	304.09, p < .001
Female	440 (53.5%) ^{bde}	124 (22.6%) ^{acde}	53 (64.6%) ^{bde}	35 (36.8%) ^{abc}	134 (39.6%) ^{abc}	148.29, p < .001
Non-binary	69 (8.6%) ^{bce}	3 (0.6%) ^{acde}	15 (19.5%) ^{ab}	15 (16.0%) ^{bd}	107 (32.0%) ^{abd}	217.09, p < .001

This pattern of concordance continues in relation to the transgender status of partners. Trans men, women and non-binary people reported significantly higher rates of transgender partners than cisgender people.

Figure 16: All participants: current partner is transgender (n = 1,865)

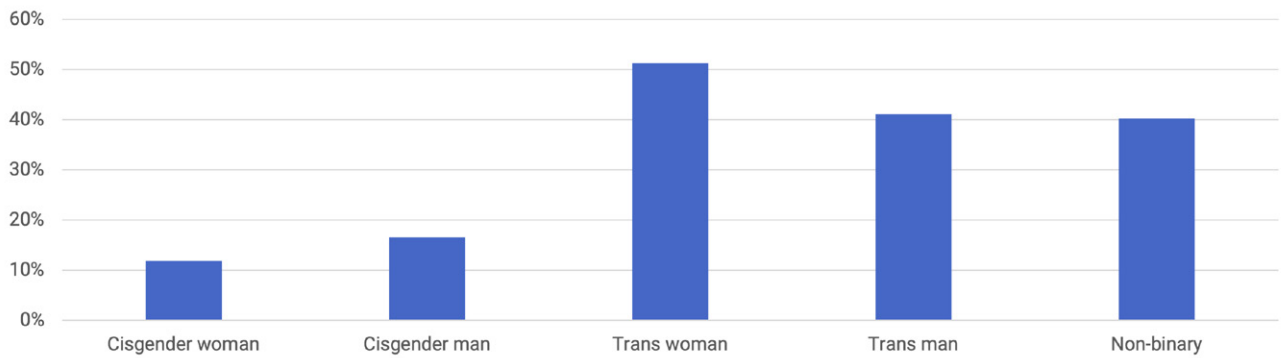


Table 17. All participants: current partner is transgender (n = 1,865)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 820	n = 546	n = 78	n = 90	n = 331	
Partner is transgender	97 (11.8%) ^{cde}	90 (16.5%) ^{cde}	40 (51.3%) ^{ab}	37 (41.1%) ^{ab}	133 (40.2%) ^{ab}	184.81, p < .001

Figure 17. All participants: number of times had sex in last year (n = 2,372)

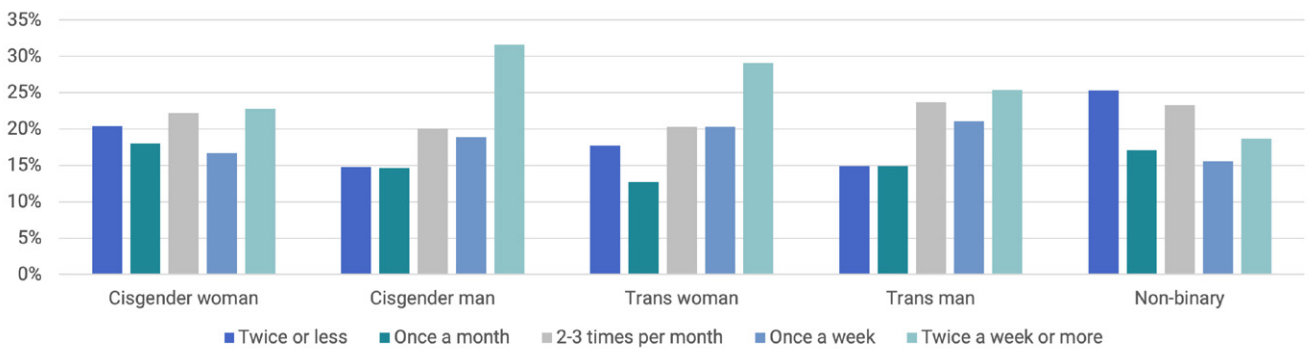


Table 18. All participants: number of times had sex in last year (n = 2,372)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 957	n = 831	n = 79	n = 114	n = 391	
Twice or less	195 (20.4%) ^b	123 (14.8%) ^{ae}	14 (17.7%)	17 (14.9%)	99 (25.3%) ^b	49.77, p < .001
Once a month	172 (18.0%)	121 (14.6%)	10 (12.7%)	17 (14.9%)	67 (17.1%)	
2-3 times per month	212 (22.2%)	167 (20.1%)	16 (20.3%)	27 (23.7%)	91 (23.3%)	
Once a week	160 (16.7%)	157 (18.9%)	16 (20.3%)	24 (21.1%)	61 (15.6%)	
Twice a week or more	218 (22.8%) ^b	263 (31.6%) ^{ae}	23 (29.1%)	29 (25.4%)	73 (18.7%) ^b	

Figure 17 presents the number of times that participants had sex in the previous 12 months, and Figure 18 depicts the number of sexual partners in the previous 12 months. Cisgender men were the most sexually active demographic; they were significantly more likely to have sex twice a week or more than cisgender women and non-binary people, and

were significantly more likely to have had 11 or more sexual partners in the past year compared to cisgender women, trans men and non-binary people. Notably, cisgender women were significantly more likely to have one or no sexual partners in the past year compared to cisgender men, trans women, and non-binary people.

Figure 18. All participants: number of sexual partners in last year (n = 2,410)

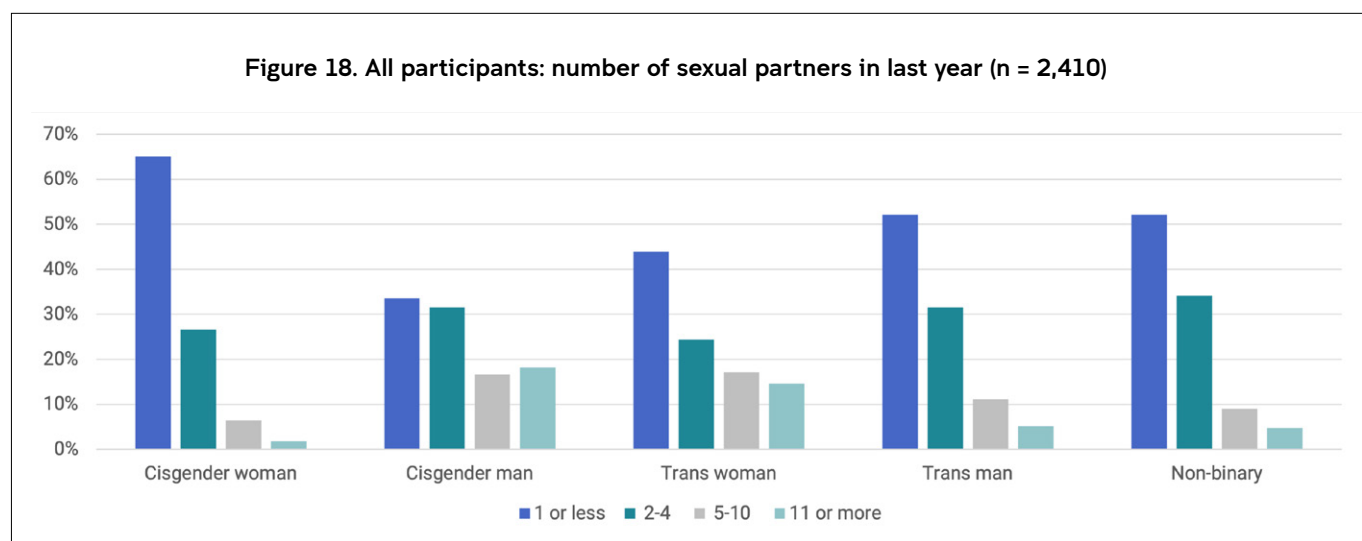


Table 19. All participants: number of sexual partners in last year (n = 2,410)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 981	n = 831	n = 82	n = 117	n = 399	
1 or less	639 (65.1%) ^{bce}	279 (33.6%) ^{ade}	36 (43.9%) ^a	61 (52.1%) ^b	208 (52.1%) ^{ab}	297.38, p < .001
2-4	261 (26.6%)	263 (31.6%)	20 (24.4%)	37 (31.6%)	136 (34.1%)	
5-10	63 (6.4%) ^{bc}	138 (16.6%) ^{ae}	14 (17.1%) ^a	13 (11.1%)	36 (9.0%) ^b	
11 or more	18 (1.8%) ^{bce}	151 (18.2%) ^{ade}	12 (14.6%) ^{ae}	6 (5.1%) ^b	19 (4.8%) ^{abc}	

Figure 19. All participants: number of LGBTIQ+ friends (n = 2,992)

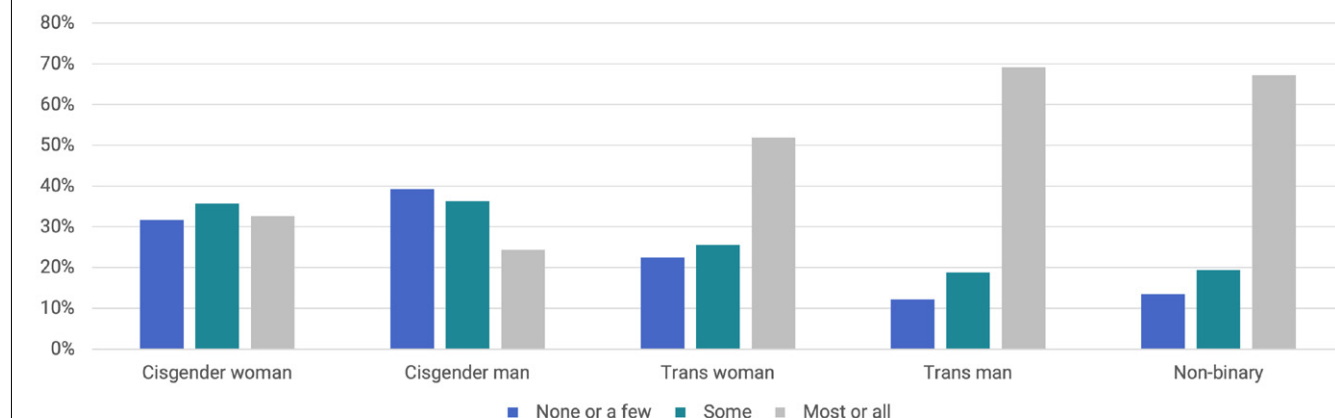
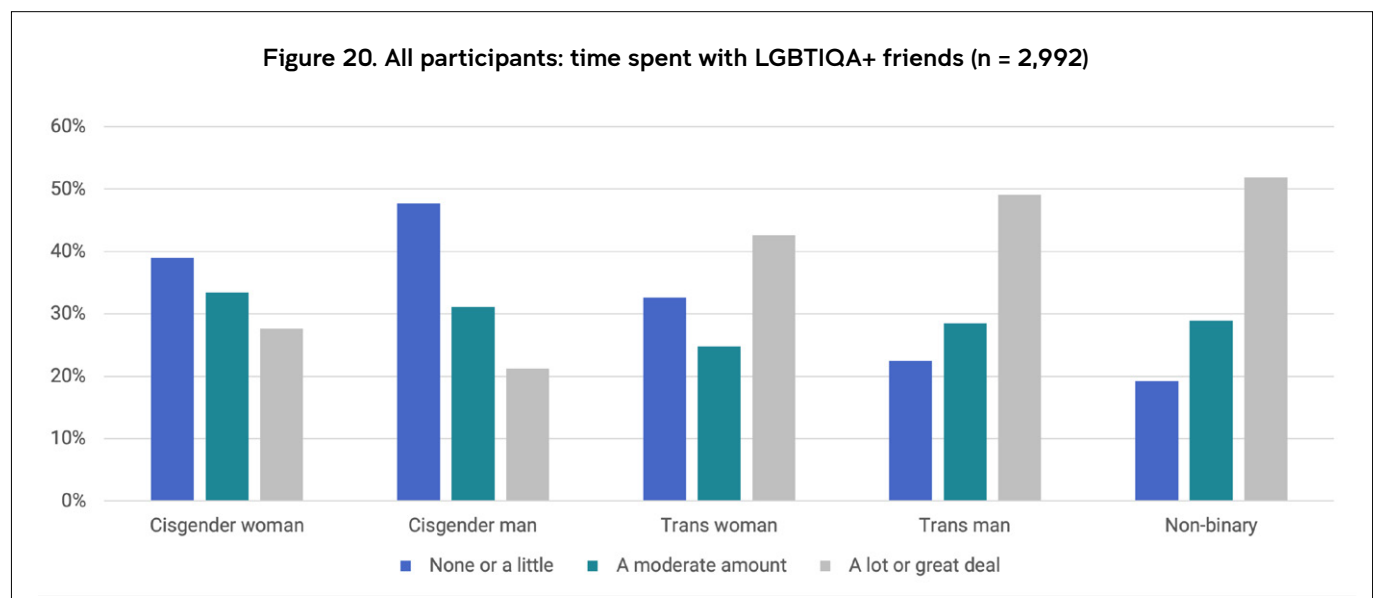


Table 20. All participants: LGBTIQ+ friends (n = 2,992)

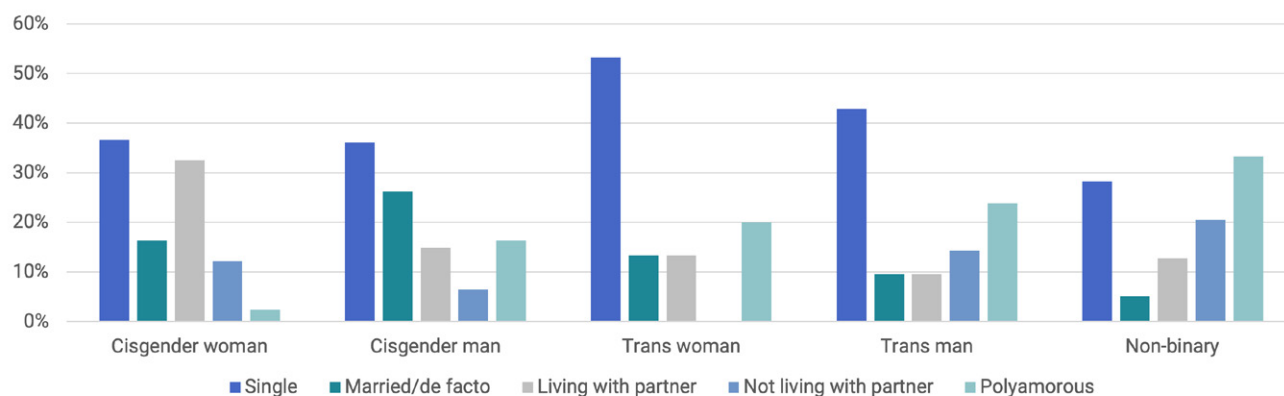
	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,237	n = 925	n = 129	n = 165	n = 536	
Number of LGBTIQ+ friends						
None or a few	392 (31.7%) ^b	363 (39.2%) ^{acde}	29 (22.5%) ^b	20 (12.1%) ^{ab}	72 (13.4%) ^{ab}	362.58, p < .001
Some	442 (35.7%) ^{de}	336 (36.3%) ^{de}	33 (25.6%)	31 (18.8%) ^{ab}	104 (19.4%) ^{ab}	
Most or all	403 (32.6%) ^{bcde}	226 (24.4%) ^{acde}	67 (51.9%) ^{abde}	114 (69.1%) ^{abc}	360 (67.2%) ^{abc}	
Time with LGBTIQ+ friends						
None or a little	483 (39.0%) ^{bde}	441 (47.7%) ^{acde}	42 (32.6%) ^{be}	37 (22.4%) ^{ab}	103 (19.2%) ^{abc}	218.73, p < .001
A moderate amount	413 (33.4%)	288 (31.1%)	32 (24.8%)	47 (28.5%)	155 (28.9%)	
A lot or great deal	341 (27.6%) ^{bcde}	196 (21.2%) ^{acde}	55 (42.6%) ^{ab}	81 (49.1%) ^{ab}	278 (51.9%) ^{ab}	

Participants were asked how many of their friends are LGBTIQ+ (Figure 19) and how much time they spent with LGBTIQ+ people (Figure 20) in order to measure their degree of connection to the LGBTIQ+ community. A finding across both measures was that trans women, trans men and non-binary people were significantly more likely to report that most or all of their friends are LGBTIQ+ and they spent a lot or great deal of their time with LGBTIQ+ friends compared to cisgender people.



First Nations participants

Figure 21. First Nations participants: current relationship status (n = 400)



The study found that 53.3% of trans women were single, compared to 42.9% of trans men and 36% of cisgender women and cisgender men. One-third (33%) of non-binary participants identified as polyamorous compared to 23% of trans men and 20% of trans women. Compared to all other gender categories, cisgender women were the least likely to be in a polyamorous relationship/s.

Table 21. First Nations participants: current relationship status (n = 400)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 123	n = 202	n = 15	n = 21	n = 39	
Single	45 (36.6%)	73 (36.1%)	8 (53.3%)	9 (42.9%)	11 (28.2%)	33.57, $p < .001$
In a monogamous relationship	75 (61.0%)	96 (47.5%)	4 (26.7%)	7 (33.3%)	15 (38.5%)	
In a polyamorous relationship/s	3 (2.4%) ^{bcde}	33 (16.3%) ^a	3 (20.0%) ^a	5 (23.8%) ^a	13 (33.3%) ^a	

Figure 22. First Nations participants: current relationship length (n = 271)

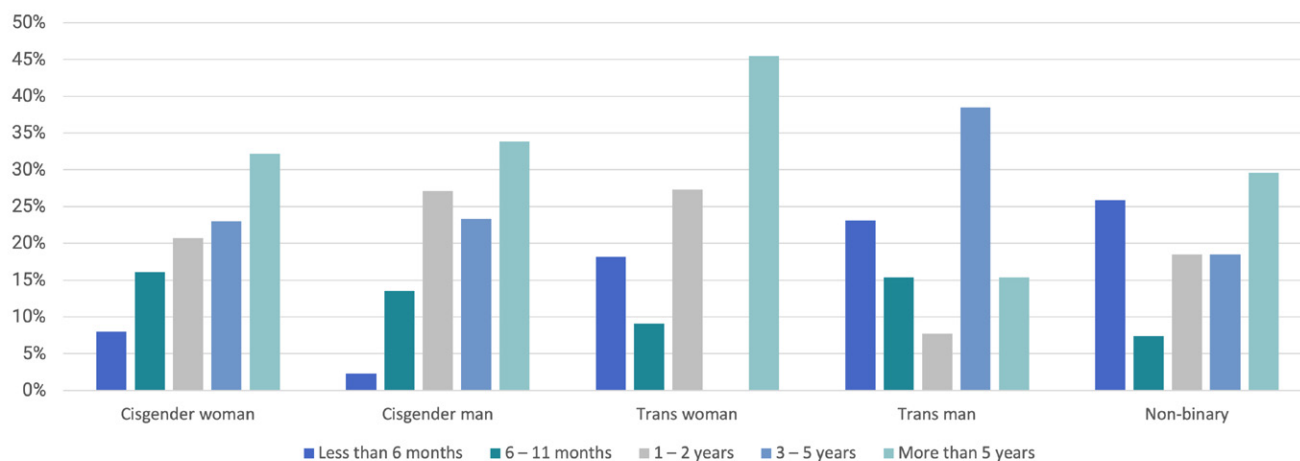


Table 22. First Nations participants: current relationship length (n = 271)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary
	n = 87	n = 133	n = 11	n = 13	n = 27
Less than 6 months	7 (8.0%)	3 (2.3%)	2 (18.2%)	3 (23.1%)	7 (25.9%)
6-11 months	14 (16.1%)	18 (13.5%)	1 (9.1%)	2 (15.4%)	2 (7.4%)
1-2 years	18 (20.7%)	36 (27.1%)	3 (27.3%)	1 (7.7%)	5 (18.5%)
3-5 years	20 (23.0%)	31 (23.3%)	0	5 (38.5%)	5 (18.5%)
More than 5 years	28 (32.2%)	45 (33.8%)	5 (45.5%)	2 (15.4%)	8 (29.6%)

One-third of cisgender men (33.8%), cisgender women (32.2%) and non-binary people (29.6%), as well as almost half of trans women (45.5%), had been in their current relationship for more than 5 years. By comparison, one-fifth of trans women (18.2%) and a quarter of trans men (23.1%) and non-binary people (25.9%) had a current relationship of less than 6 months.

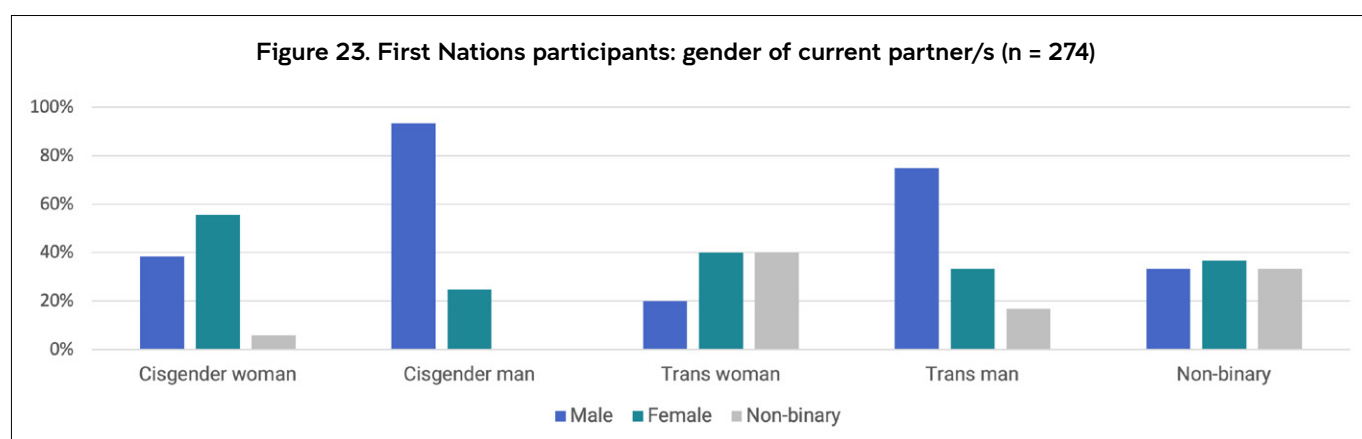


Table 23. First Nations participants: gender of current partner/s (n = 274)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 86	n = 136	n = 10	n = 12	n = 30	
Male	33 (38.4%) ^b	127 (93.4%) ^{ace}	2 (20.0%) ^b	9 (75.0%)	10 (33.3%) ^b	98.91, p < .001
Female	50 (55.6%) ^b	33 (24.8%) ^a	4 (40.0%)	4 (33.3%)	11 (36.7%)	21.86, p < .001
Non-binary	5 (5.9%)	0	4 (40.0%)	2 (16.7%)	10 (33.3%)	n/a

There was broad concordance across the gender of the partners of participants. The majority of cis and trans men had male partners, while the majority of cis women had female partners, and 40% of trans women had a female partner. Non-binary people reported a generally equal distribution of male, female and non-binary partners at approximately one-third

of each. Participants were also asked "is your current partner transgender, gender diverse, a Sistergirl or a Brotherboy?" This question was answered by 270 participants and was endorsed by 72.7% of trans women and 61.5% of trans men, followed by cisgender men (40.6%), non-binary people (37%) and cisgender women (20.9%)

Table 24. First Nations participants: current partner is transgender, gender diverse, a Sistergirl or a Brotherboy (n = 270)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 86	n = 133	n = 11	n = 13	n = 27	
Partner is or was transgender, gender diverse, a Sistergirl or a Brotherboy	18 (20.9%) ^{bcd}	54 (40.6%) ^a	8 (72.7%) ^a	8 (61.5%) ^a	10 (37.0%)	19.75, p < .001

Figure 24. First Nations participants: current partner is transgender (n = 270)

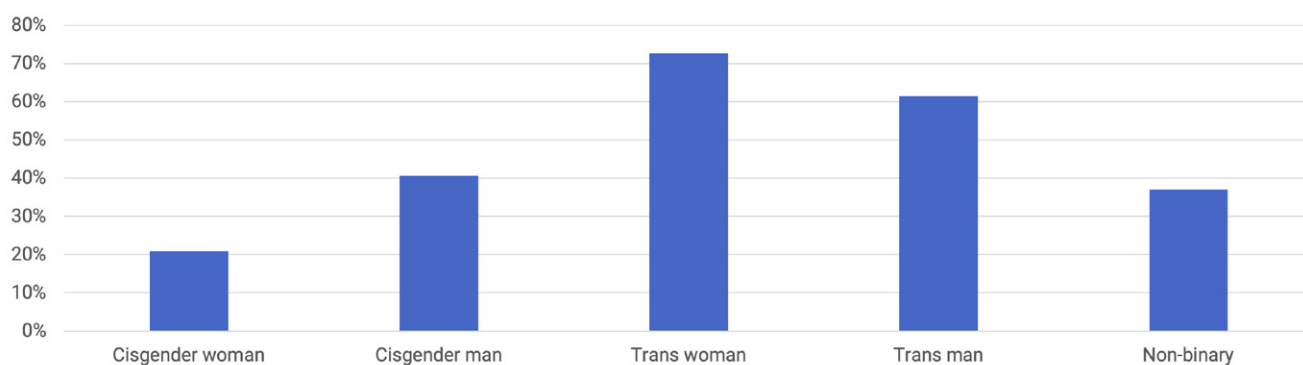


Figure 25. First Nations participants: number of times had sex in last year (n = 346)

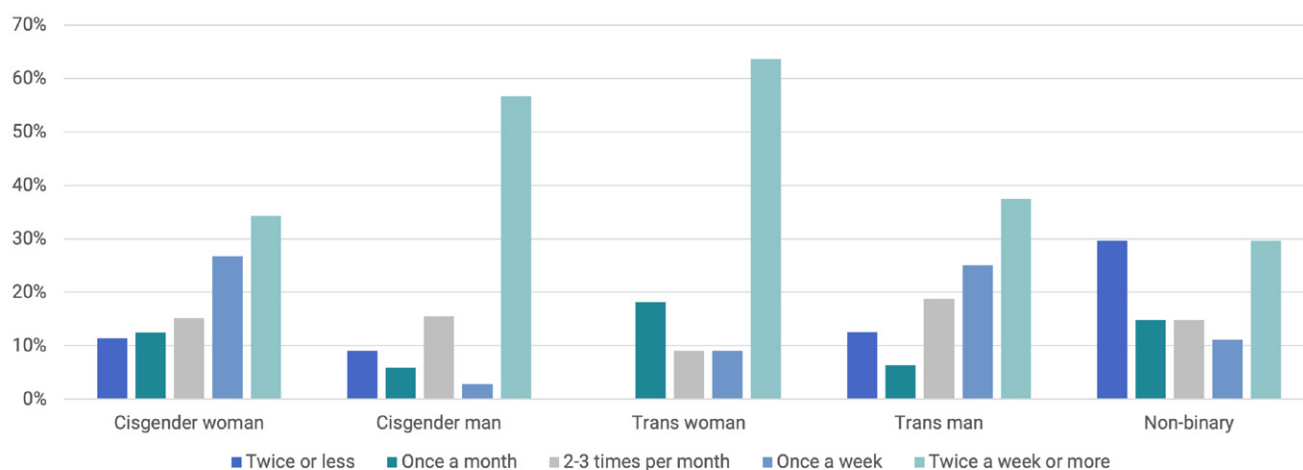


Table 25. First Nations participants: number of times had sex in last year (n = 346)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary
	n = 105	n = 187	n = 11	n = 16	n = 27
Twice or less	12 (11.4%)	17 (9.1%)	0	2 (12.5%)	8 (29.6%)
Once a month	13 (12.4%)	11 (5.9%)	2 (18.2%)	1 (6.3%)	4 (14.8%)
2-3 times per month	16 (15.2%)	29 (15.5%)	1 (9.1%)	3 (18.8%)	4 (14.8%)
Once a week	28 (26.7%)	24 (12.8%)	1 (9.1%)	4 (25.0%)	3 (11.1%)
Twice a week or more	36 (34.3%)	106 (56.7%)	7 (63.6%)	6 (37.5%)	8 (29.6%)

Over half of cis men (56.7%) and two thirds of trans women (63.6%) reported having sex at least twice a week or more, compared to approximately one third of other gender categories.

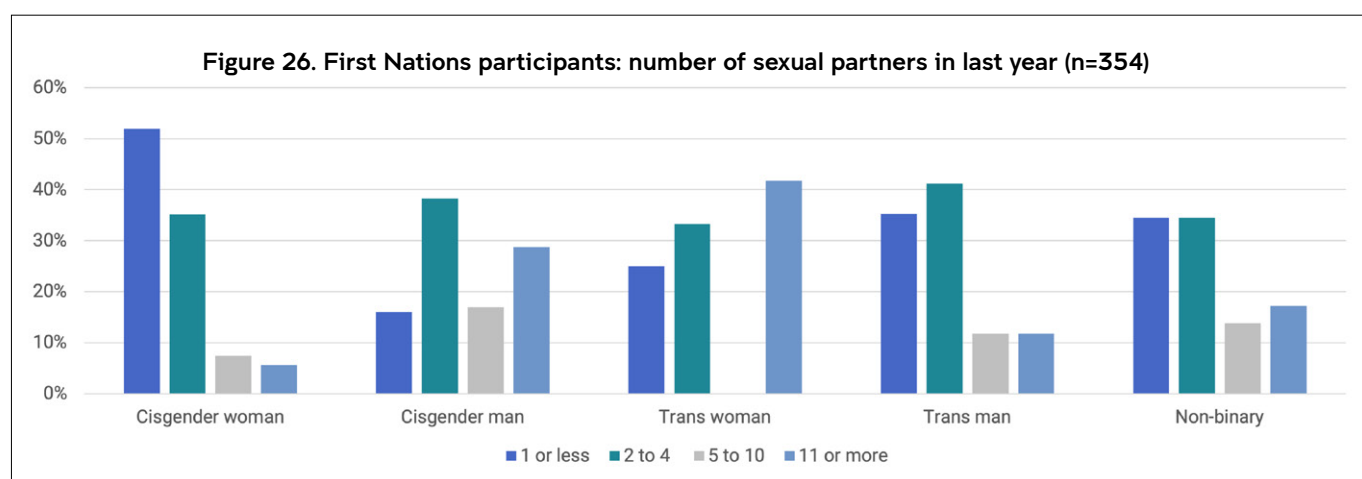


Table 26. First Nations participants: number of sexual partners in last year (n = 354)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary
	n = 108	n = 188	n = 12	n = 17	n = 29
1 or less	56 (51.9%)	30 (16.0%)	3 (25.0%)	6 (35.3%)	10 (34.5%)
2-4	38 (35.2%)	72 (38.3%)	4 (33.3%)	7 (41.2%)	10 (34.5%)
5-10	8 (7.4%)	32 (17.0%)	0	2 (11.8%)	4 (13.8%)
11 or more	6 (5.6%)	54 (28.7%)	5 (41.7%)	2 (11.8%)	5 (17.2%)

Cisgender women were the highest proportion reporting one or less sexual partners (51.9%) and the lowest proportion reporting 11 or more sexual partners (5.6%). In comparison, cisgender men (16%) and trans women (25%) were the lowest proportion reporting that they had one or less sexual partners, and the highest proportion reporting that they had 11 or more sexual partners (28.7% and 41.7%).

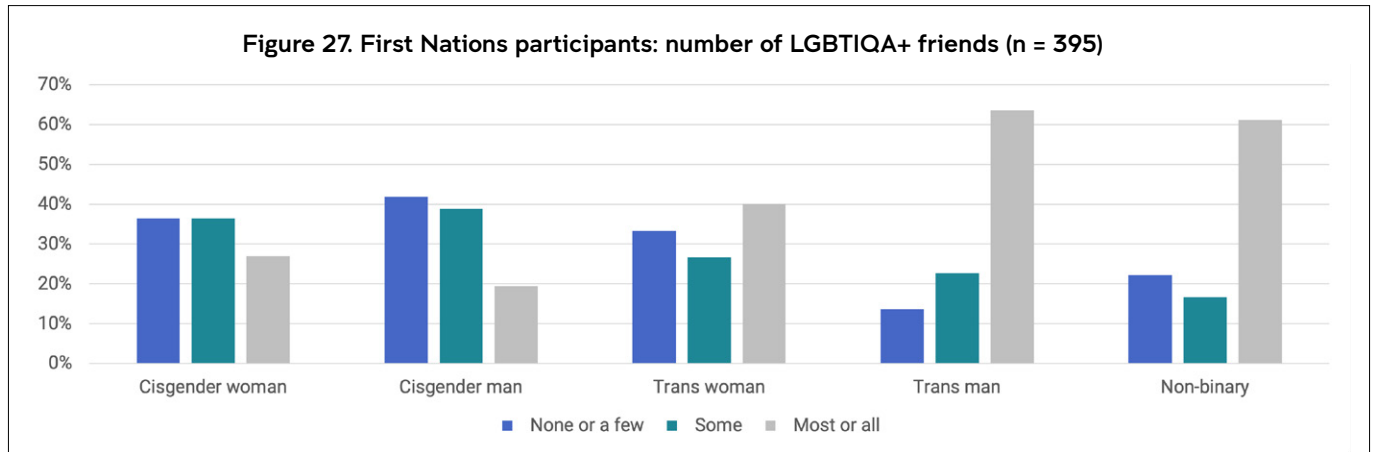
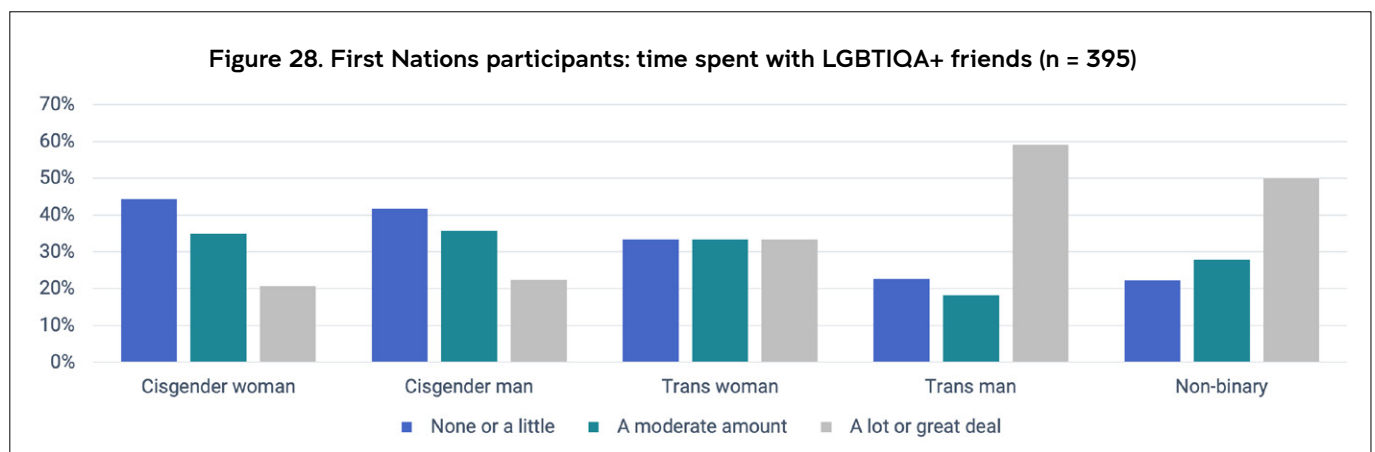


Table 27. First Nations participants: LGBTIQ+ friends (n = 395)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 126	n = 196	n = 15	n = 22	n = 36	
Number of LGBTIQ+ friends						
None or a few	46 (36.5%)	82 (41.8%)	5 (33.3%)	3 (13.6%)	8 (22.2%)	41.45, $p < .001$
Some	46 (36.5%)	76 (38.8%)	4 (26.7%)	5 (22.7%)	6 (16.7%)	
Most or all	34 (27.0%) ^{de}	38 (19.4%) ^{de}	6 (40.0%)	14 (63.6%) ^{ab}	22 (61.1%) ^{ab}	
Time with LGBTIQ+ friends						
None or a little	56 (44.4%)	82 (41.8%)	5 (33.3%)	5 (22.7%)	8 (22.2%)	26.90, $p < .001$
A moderate amount	44 (34.9%)	70 (35.7%)	5 (33.3%)	4 (18.2%)	10 (27.8%)	
A lot or great deal	26 (20.6%) ^{de}	44 (22.4%) ^{de}	5 (33.3%)	13 (59.1%) ^{ab}	18 (50.0%) ^{ab}	

Consistent with the general sample, trans men and non-binary people were significantly more likely than cisgender men and women to report that most or all of their friends are LGBTIQ+, and that they spent a lot or a great deal of their time with those friends.



Health and wellbeing

Total sample – all participants

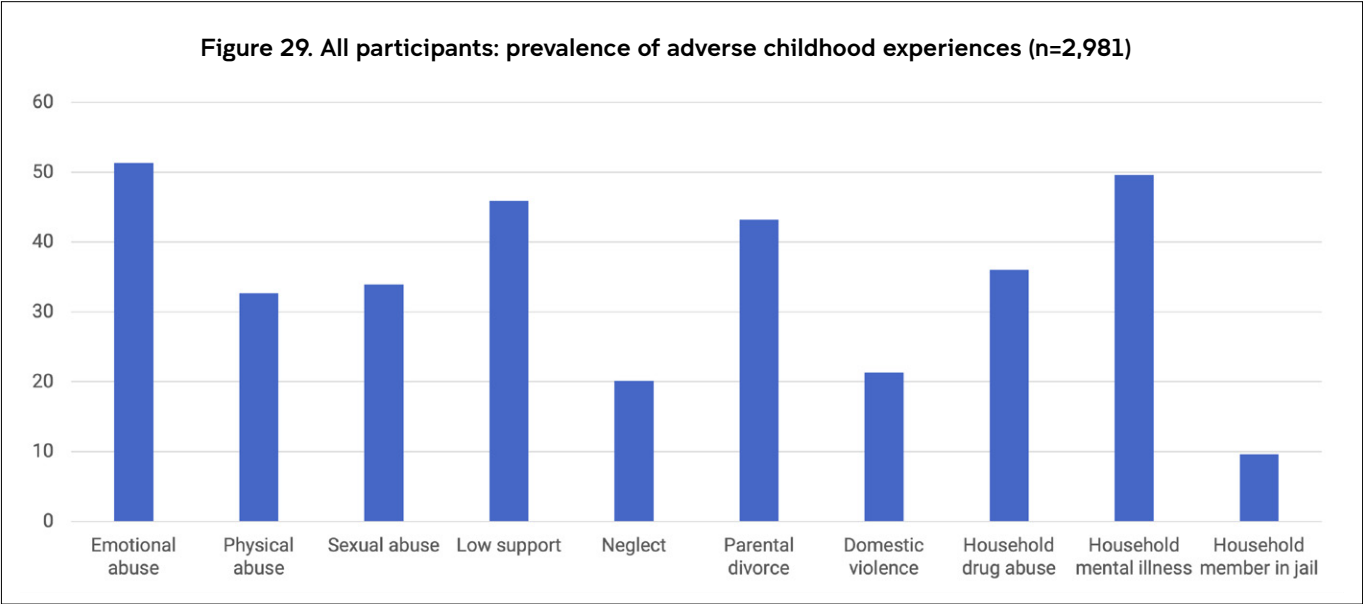


Table 28. All participants: prevalence of adverse childhood experiences (n = 2,981)

Emotional abuse	1,530 (51.3%)
Physical abuse	975 (32.7%)
Sexual abuse	1,010 (33.9%)
Low support	1,369 (45.9%)
Neglect	599 (20.1%)
Parental divorce	1,288 (43.2%)
Domestic violence	636 (21.3%)
Household drug abuse	1,073 (36.0%)
Household mental illness	1,478 (49.6%)
Household member in jail	287 (9.6%)
Mean (sd) ACEs	3.44 (2.66)

Survey participants were administered the Adverse Childhood Experiences questionnaire (Felitti et al., 1998), which assesses ten types of childhood adversity and trauma. It’s important to remember that this project is based on a convenience sample of LGBTIQ+SB Australians and is not representative of LGBTIQ+SB Australians as a group. As the focus of the survey is sexual violence, it is likely that the survey differentially

appealed to LGBTIQ+SB survivors of sexual violence, resulting in a probable over-representation of sexual violence survivors in our sample. Nonetheless, it is notable that the percent of people in our sample reporting childhood sexual abuse (33.9%) is very similar to a nationally representative survey of Australians, which found that 28.5% of Australians aged 16 and above had been sexually abused in childhood (Mathews et al., 2023).

Furthermore, the proportion of our sample who identified that they were recorded female at birth was higher than the national average, and girl children are at increased risk of child

sexual abuse compared to boys. On this basis, reporting of child sexual abuse in our survey was not notably higher than the national average.

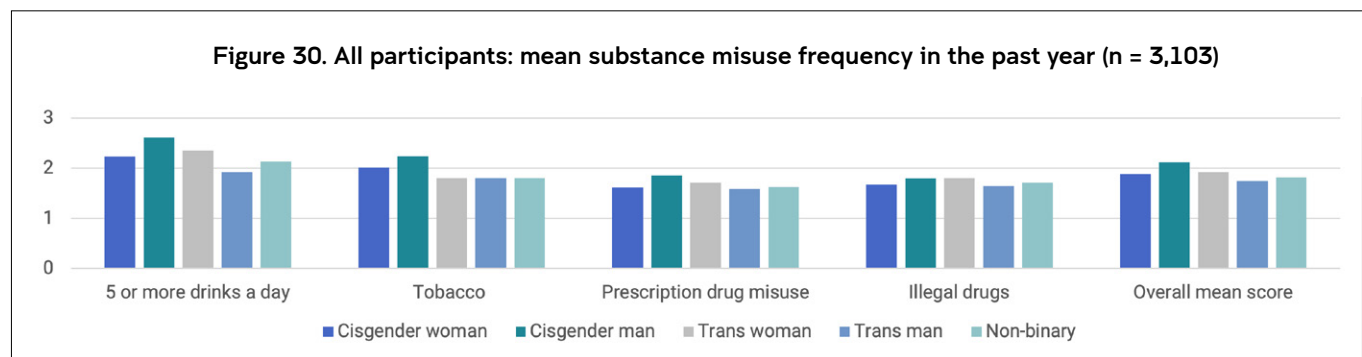


Table 29. All participants: substance misuse mean (sd) frequency in the past year (range 1 = never to 5 = daily or almost daily) (n = 3,013)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,242	n = 930	n = 131	n = 168	n = 542	
5 or more drinks a day	2.23 (1.13) ^{bd}	2.61 (1.32) ^{ade}	2.35 (1.40) ^d	1.92 (1.03) ^{abc}	2.13 (1.16) ^b	22.32, p < .001
Tobacco	2.01 (1.53) ^b	2.24 (1.57) ^{acde}	1.80 (1.43) ^b	1.80 (1.42) ^b	1.80 (1.36) ^b	9.69, p < .001
Prescription drug misuse	1.61 (1.17) ^b	1.86 (1.31) ^{ae}	1.71 (1.30)	1.59 (1.17)	1.62 (1.21) ^b	5.79, p < .001
Illegal drugs	1.67 (1.11)	1.79 (1.18)	1.80 (1.27)	1.65 (1.15)	1.71 (1.13)	1.71, p = .15
Overall mean score	1.88 (0.84) ^b	2.12 (0.97) ^{ade}	1.92 (0.92)	1.74 (0.86) ^b	1.82 (0.83) ^b	14.81, p < .001

Substance misuse frequency was measured using the 4-item National Institute on Drug Abuse (NIDA) Quick Screen v1.0 (<http://www.drugabuse.gov/nmassist/>). Participants indicated how often (1 = never; 2 = once or twice; 3 = monthly; 4 = weekly; 5 = daily or almost daily) over the past year they (i) drank 5 or more alcoholic drinks a day; (ii) used tobacco products; (iii) used prescription drugs for non-medical reasons; and (iv) used illicit drugs. Scores from the 4 items were averaged to indicate the overall frequency of substance misuse ($\alpha = .64$).

Substance misuse frequency significantly differed across categories of gender identity and was generally more frequent among cisgender men. Indeed, overall substance misuse was significantly more frequent for cisgender men than cisgender

women, trans men, and non-binary participants. Regarding the misuse of specific substances:

- > Consuming 5 or more drinks in a day was significantly more frequent for cisgender men than for all other gender identities except trans women, and significantly more frequent for cisgender women and trans women than trans men.
- > Tobacco use was significantly more frequent for cisgender men than for all other gender identities.
- > Prescription drug misuse was significantly more frequent for cisgender men than for cisgender women and non-binary people.
- > The frequency of illegal drug use was not significantly associated with gender identity.

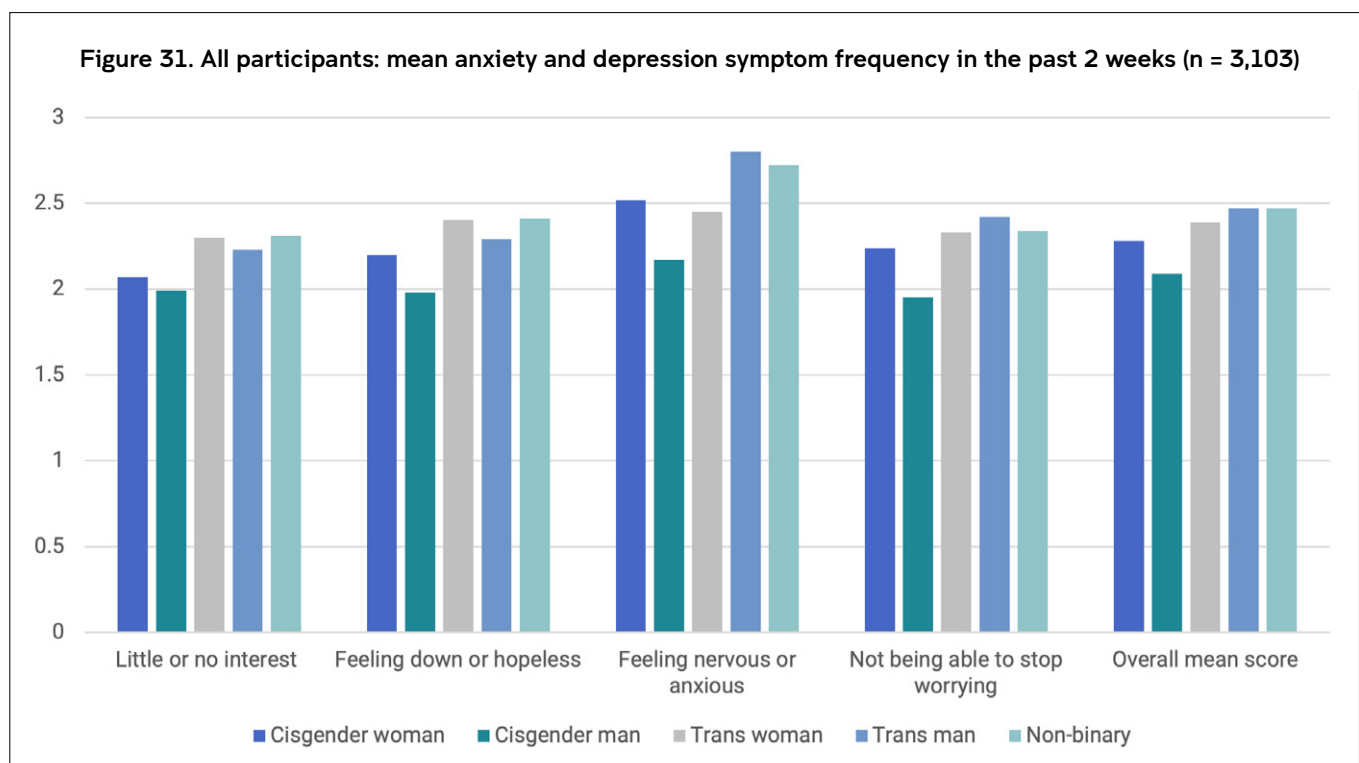


Table 30. All participants: anxiety and depression symptom mean (sd) frequency in past 2 weeks (range 1 = none to 4 = 12-14 days) (n = 3,013)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 1,242	n = 930	n = 131	n = 168	n = 542	
Little or no interest	2.07 (0.91) ^e	1.99 (0.95) ^{cde}	2.30 (0.93) ^b	2.23 (0.97) ^b	2.31 (0.96) ^{ab}	11.91, p < .001
Feeling down or hopeless	2.20 (0.94) ^{be}	1.98 (0.90) ^{acde}	2.40 (0.93) ^b	2.29 (0.98) ^b	2.41 (0.96) ^{ab}	21.69, p < .001
Feeling nervous or anxious	2.52 (0.99) ^{bde}	2.17 (0.99) ^{acde}	2.45 (0.95) ^{bde}	2.80 (0.97) ^{abc}	2.72 (0.94) ^{abc}	35.80, p < .001
Not being able to stop worrying	2.24 (1.03) ^b	1.95 (0.98) ^{acde}	2.33 (1.06) ^b	2.42 (1.04) ^b	2.34 (0.98) ^b	20.01, p < .001
Overall mean score	2.28 (0.83) ^{be}	2.09 (0.90) ^{acde}	2.39 (0.79) ^b	2.47 (0.84) ^b	2.47 (0.81) ^{ab}	20.51, p < .001

Symptoms of anxiety and depression were measured using 4 items from the Patient Health Questionnaire 4 (PHQ-4) (Löwe et al., 2010). The PHQ-4 asks respondents how often (1 = not at all; 2 = 1-7 days; 3 = 8-11 days; 4 = 12-14 days) over the past two weeks had they been bothered by (i) little interest or pleasure in doing things; (ii) feeling down, depressed, or hopeless; (iii) feeling nervous, anxious, or on edge; and (iv) not being able to stop or control worrying. Scores were averaged so that higher values reflect greater frequency of potential symptoms of anxiety and depression ($\alpha = .86$).

Gender identity was significantly associated with anxiety and depression symptoms. Overall and specific symptoms of anxiety and depression were significantly less frequent for cisgender men than for any other gender identity (apart from cisgender women for the symptom of 'little or no interest'). Trans men, trans women and non-binary people were significantly more likely to experience overall and specific anxiety and depression symptoms (especially feeling nervous or anxious) more frequently than cisgender men, and on occasion, cisgender women.

Table 31. All participants: diagnosis or treatment for mental disorder in past year (n = 3,192)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,312	n = 987	n = 139	n = 178	n = 576	
Any mental health disorder	870 (66.3%) ^{bde}	531 (53.8%) ^{ade}	87 (62.6%) ^d	138 (77.5%) ^{abc}	423 (73.4%) ^{ab}	93.94, p < .001
Depression	583 (44.4%) ^{bde}	271 (27.5%) ^{acde}	55 (39.6%) ^{bde}	100 (56.2%) ^{abc}	313 (54.3%) ^{abc}	140.81, p < .001
Anxiety	678 (51.7%) ^{bd}	355 (36.0%) ^{ade}	63 (45.3%) ^d	114 (64.0%) ^{abc}	331 (57.5%) ^b	104.47, p < .001
PTSD	292 (22.3%) ^{be}	104 (10.5%) ^{acde}	28 (20.1%) ^b	56 (31.5%) ^b	165 (28.6%) ^{ab}	100.48, p < .001
Complex trauma disorder	215 (16.4%) ^{bde}	88 (8.9%) ^{acde}	27 (19.4%) ^b	51 (28.7%) ^{ab}	161 (28.0%) ^{ab}	113.29, p < .001
Dissociative disorder	54 (4.1%) ^{de}	55 (5.6%) ^d	11 (7.9%)	23 (12.9%) ^{ab}	51 (8.9%) ^a	32.71, p < .001
Eating disorder	116 (8.8%) ^d	71 (7.2%) ^{ade}	13 (9.4%)	28 (15.7%) ^{ab}	73 (12.7%) ^b	21.87, p < .001
Social phobia	72 (5.5%)	63 (6.4%)	10 (7.2%)	17 (9.6%)	39 (6.8%)	5.15, p = .27
Panic disorder	73 (5.6%)	45 (4.6%)	6 (4.3%)	14 (7.9%)	44 (7.6%)	8.58, p = .07
OCD	76 (5.8%)	48 (4.9%)	6 (4.3%)	14 (7.9%)	36 (6.3%)	3.75 p = .44
Bipolar disorder	59 (4.5%)	47 (4.8%)	7 (5.0%)	9 (5.1%)	31 (5.4%)	0.75, p = .95
Agoraphobia	18 (1.4%) ^d	22 (2.2%)	3 (2.2%)	8 (4.5%) ^a	14 (2.4%)	9.01, p = .06
Schizophrenia	14 (1.1%)	17 (1.7%)	4 (2.9%)	3 (1.7%)	8 (1.4%)	3.95, p = .41
Personality disorder	67 (5.1%) ^e	28 (2.8%) ^{cde}	11 (7.9%) ^b	13 (7.3%) ^b	57 (9.9%) ^{ab}	37.93, p < .001
Other	26 (2.0%)	15 (1.5%) ^c	8 (5.8%) ^b	8 (4.5%)	17 (3.0%)	15.47, p = .004
Autism (coded from text)	23 (1.8%) ^{cde}	7 (0.7%) ^{cde}	8 (5.8%) ^{ab}	9 (5.1%) ^{ab}	34 (5.9%) ^{ab}	53.46, p < .001
ADHD (coded from text)	55 (4.2%) ^{bde}	17 (1.7%) ^{ade}	8 (5.8%) ^b	17 (9.6%) ^{ab}	49 (8.5%) ^{ab}	49.96, p < .001

Participants indicated if they were diagnosed or treated for one or more of thirteen mental health disorders in the past year; additional disorders not listed could be disclosed by the participant through free-form text.

The proportion of participants diagnosed or treated for any mental health disorder in the past year significantly

differed across categories of gender identity. Trans men had significantly higher rates of diagnosis or treatment than trans women, cisgender women and cisgender men. Proportions were also significantly higher for non-binary people than for cisgender women and men, while cisgender women had significantly higher rates than cisgender men. This general pattern – that rates of mental health disorder were highest

for trans men and lowest for cisgender men – was somewhat consistent for most mental health disorders associated with gender identity, which, in order of effect size, were:

- > depression
- > complex trauma disorder
- > anxiety
- > PTSD
- > autism
- > ADHD
- > personality disorder
- > dissociative disorder
- > eating disorder, and
- > other disorder not specified.

Figure 32. All participants: diagnosed with or treated for any mental health disorder in the past year (n = 3,192)

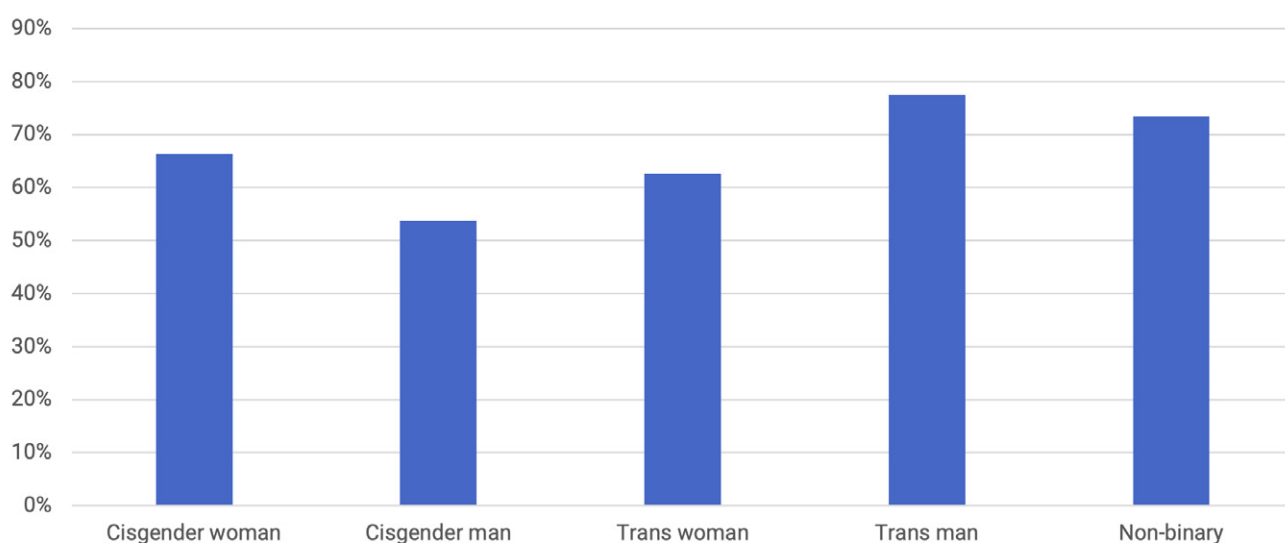


Figure 33. All participants: prevalence of a diagnosis of disability or chronic illness (n = 3,013)

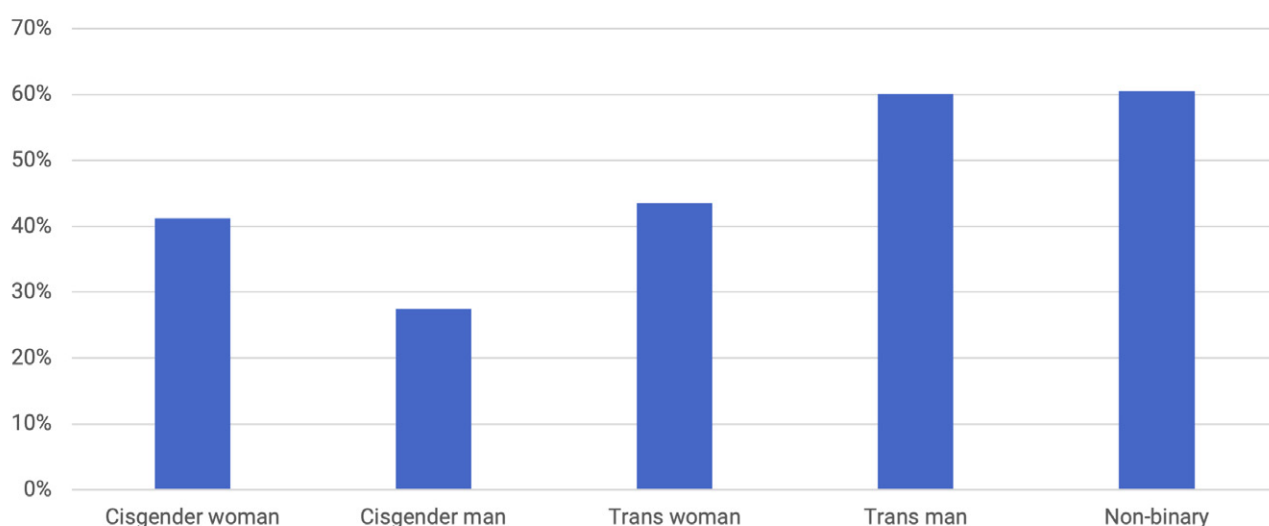
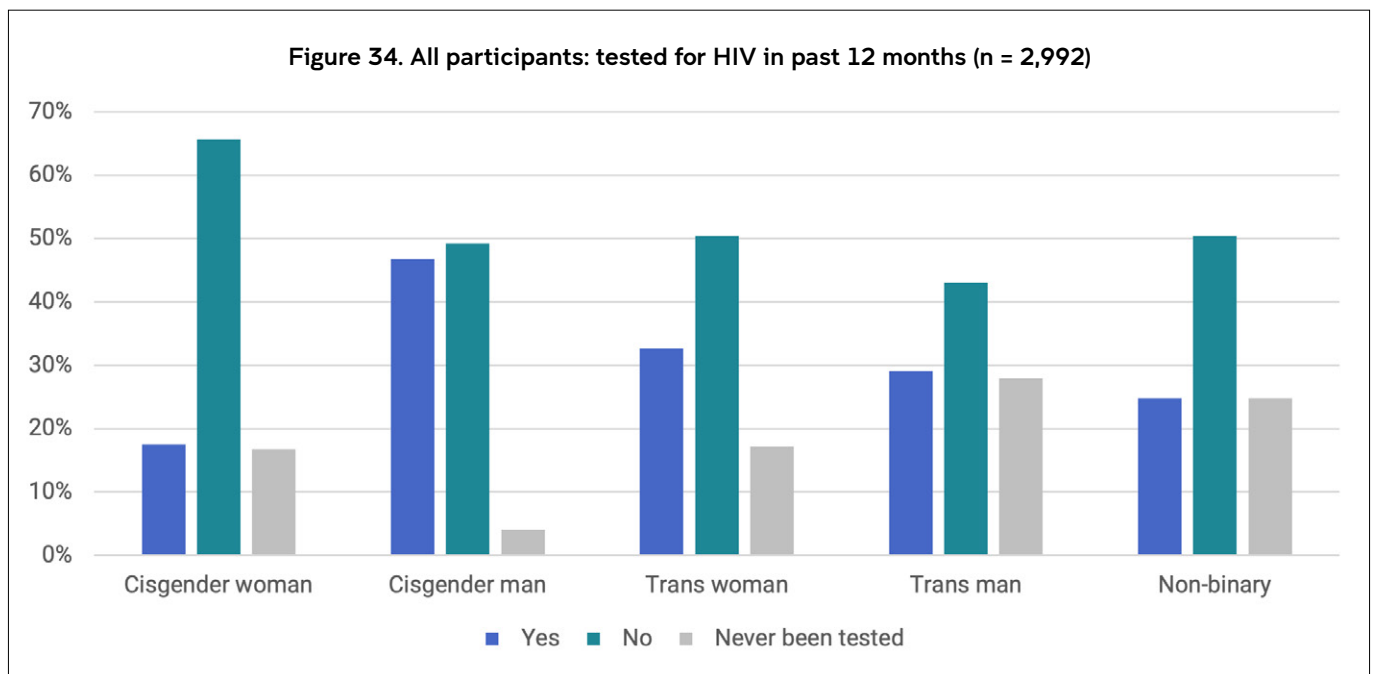


Table 32. All participants: prevalence of a diagnosis of a disability or chronic illness (n = 3,013)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 1,242	n = 930	n = 131	n = 168	n = 542	
Disability or chronic illness	512 (41.2%) ^{bde}	255 (27.4%) ^{acde}	57 (43.5%) ^{bde}	101 (60.1%) ^{abc}	328 (60.5%) ^{abc}	180.81, p < .001
Mean (sd) days in past week unable to carry out usual duties due to disability	2.43 (2.18)	2.40 (2.48)	2.61 (2.12)	2.63 (2.08)	2.87 (2.14)	2.36, p = .05
Mean (sd) days in past week stay in bed most or all day due to disability	1.54 (1.84)	1.50 (1.90)	1.73 (1.93)	1.62 (1.81)	1.68 (1.88)	0.50, p = .74

The proportion of participants ever diagnosed with a disability or chronic illness was significantly higher for trans men and non-binary people compared with trans women and cisgender men and women. Furthermore, a significantly lower proportion of cisgender men were diagnosed with a disability or chronic illness than any other gender identity. Despite

these differences, of those ever diagnosed with a disability or chronic illness, gender identity was not significantly associated with the average number of days in the past week a participant was unable to carry out usual duties or unable to leave bed due to impairment.



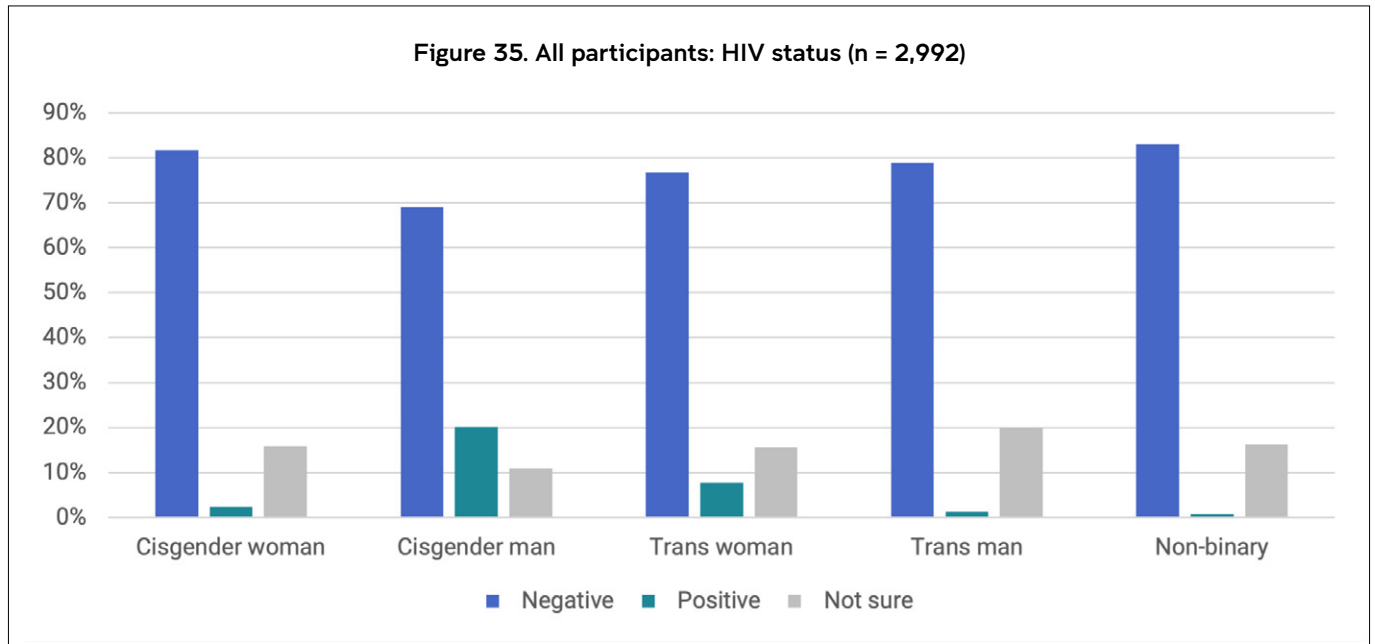


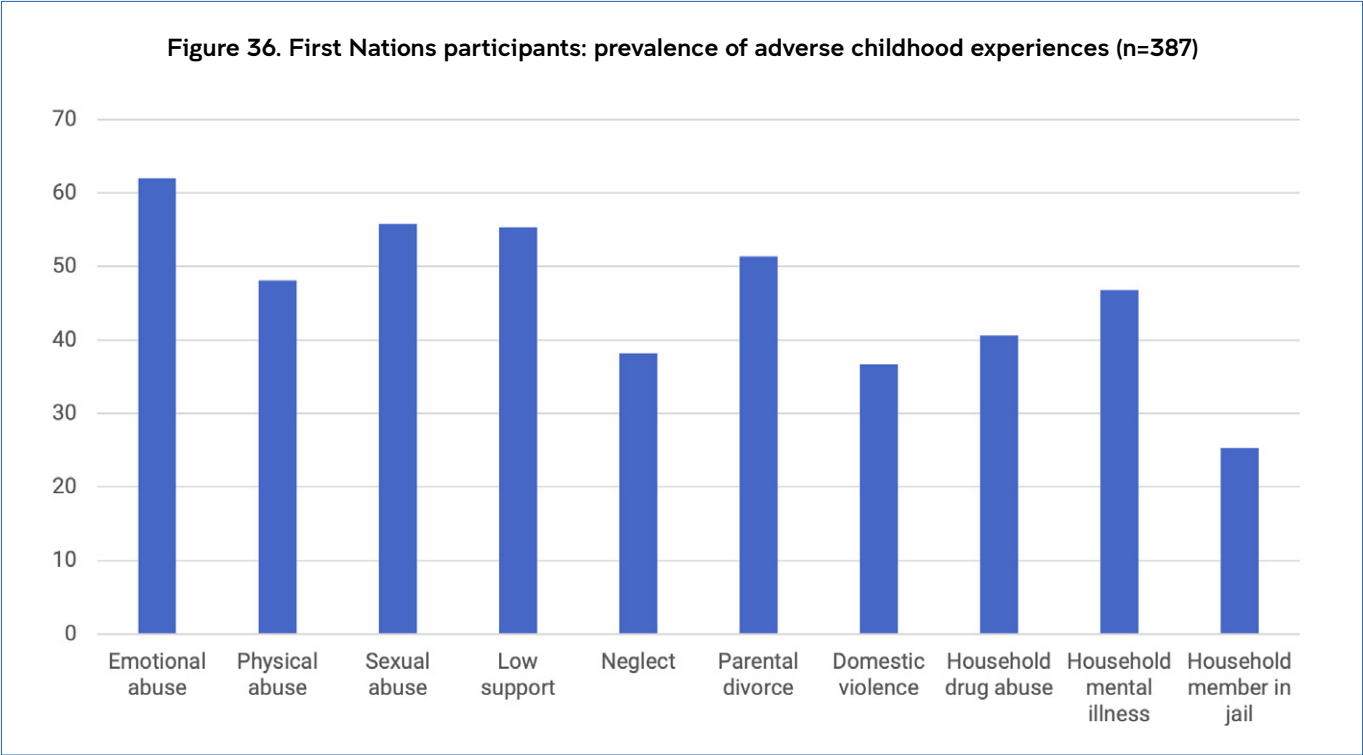
Table 33. All participants: tested for HIV in past 12 months and HIV status (n = 2,992)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 1,237	n = 925	n = 129	n = 165	n = 536	
Tested for HIV in past year						
Yes	217 (17.5%) ^{bcd}	432 (46.7%) ^{acde}	42 (32.6%) ^{ab}	48 (29.1%) ^{ab}	133 (24.8%) ^{ab}	325.32, p < .001
No	812 (65.6%) ^{bcd}	455 (49.2%) ^a	65 (50.4%) ^a	71 (43.0%) ^a	270 (50.4%) ^a	
Never been tested	208 (16.8%) ^{bde}	38 (4.1%) ^{acde}	22 (17.1%) ^b	46 (27.9%) ^{ab}	133 (24.8%) ^{ab}	
HIV status						
Negative	1,011 (81.7%) ^b	638 (69.0%) ^{ae}	99 (76.7%)	130 (78.8%)	445 (83.0%)	301.01, p < .001
Positive	29 (2.3%) ^{bc}	186 (20.1%) ^{acde}	10 (7.8%) ^{abde}	2 (1.2%) ^{bc}	4 (0.7%) ^{bc}	
Not sure	197 (15.9%) ^b	101 (10.9%) ^{ade}	20 (15.5%)	33 (20.0%) ^b	87 (16.2%) ^b	

The proportion of participants who had been tested for HIV in the past 12 months significantly differed according to gender identity. Cisgender men were significantly more likely to have been tested, whereas cisgender women were significantly more likely to have not been tested, compared to all other gender identities. The proportion who had never been tested for HIV was significantly higher for trans men and non-binary people than for cisgender men and women. A similar pattern of association emerged for HIV status and gender identity. Specifically, cisgender men were significantly more likely than

any other gender identity to report being HIV-positive and were also significantly less likely to not be sure about their HIV status (most cisgender men who were HIV positive were also tested in the past year (63.4%)). Furthermore, the proportion of participants who were HIV-positive was significantly greater for trans women than cisgender women, trans men and non-binary people. It is possible that the higher prevalence of HIV among cisgender men and trans women may be partly due to these demographics having higher rates of testing.

First Nations participants



First Nations Australians are twice as likely to experience multiple ACEs compared to other Australians (Thapa et al., 2024), and the increased prevalence of ACEs was evident in our sample, where the mean number of ACEs reported by First Nations participants was 4.6 compared to 3.44 for

the entire sample. It is important to remember that ACEs for First Nations children may also be the result of adverse experiences perpetrated in care or detention and/or by a non-First Nations perpetrator.

Table 34. First Nations participants: prevalence of adverse childhood experiences (n = 387)

Emotional abuse	240 (62.0%)
Physical abuse	186 (48.1%)
Sexual abuse	216 (55.8%)
Low support	214 (55.3%)
Neglect	148 (38.2%)
Parental divorce	199 (51.4%)
Domestic violence	142 (36.7%)
Household drug abuse	157 (40.6%)
Household mental illness	181 (46.8%)
Household member in jail	98 (25.3%)
Mean (sd) ACEs	4.60 (2.95)

Figure 37. First Nations participants: substance misuse frequency in past year (n = 396)

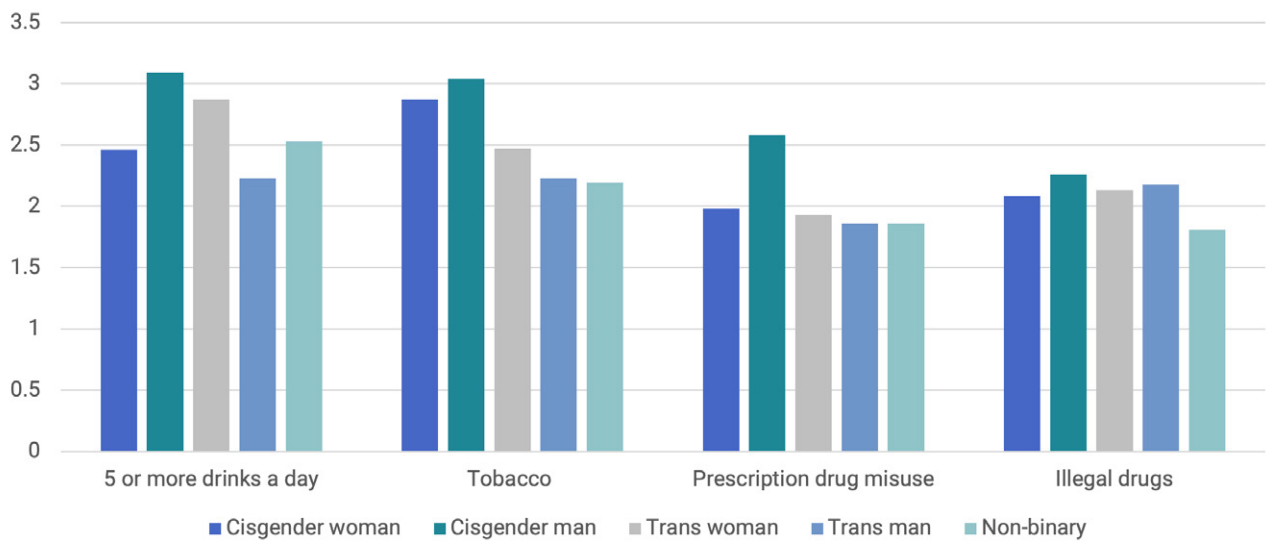


Table 35. First Nations participants: substance misuse mean (sd) frequency in the past year (range 1 = never to 5 = daily or almost daily) (n = 396)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 126	n = 197	n = 15	n = 22	n = 36	
5 or more drinks a day	2.46 (1.13) ^b	3.09 (1.33) ^{ad}	2.87 (1.55)	2.23 (1.23) ^b	2.53 (1.50)	6.29, p < .001
Tobacco	2.87 (1.79)	3.04 (1.60)	2.47 (1.60)	2.23 (1.72)	2.19 (1.60)	3.01, p = .03
Prescription drug misuse	1.98 (1.38) ^b	2.58 (1.40) ^{ae}	1.93 (1.28)	1.86 (1.32)	1.86 (1.48) ^b	5.36, p < .001
Illegal drugs	2.08 (1.39)	2.26 (1.43)	2.13 (1.60)	2.18 (1.68)	1.81 (1.22)	1.05, p = .39
Overall mean score	2.35 (0.97) ^b	2.74 (1.11) ^{ae}	2.35 (1.19)	2.13 (1.15)	2.10 (0.91) ^b	5.33, p < .001

Substance misuse frequency significantly differed across categories of gender identity among First Nations participants, although the magnitude of these differences was lower compared to the full sample. Overall substance misuse and prescription drug misuse was significantly more frequent for cisgender men than for cisgender women and non-binary people. Furthermore, consuming 5 or more drinks in a day was

significantly more frequent for cisgender men than cisgender women and trans men. Substance misuse was also less frequent for trans women and trans men compared to cisgender men, although these differences were not statistically significant due to the low number of Aboriginal and/or First Nations trans people.

Figure 38. First Nations participants: anxiety and depression symptom mean frequency past 2 weeks (n = 396)

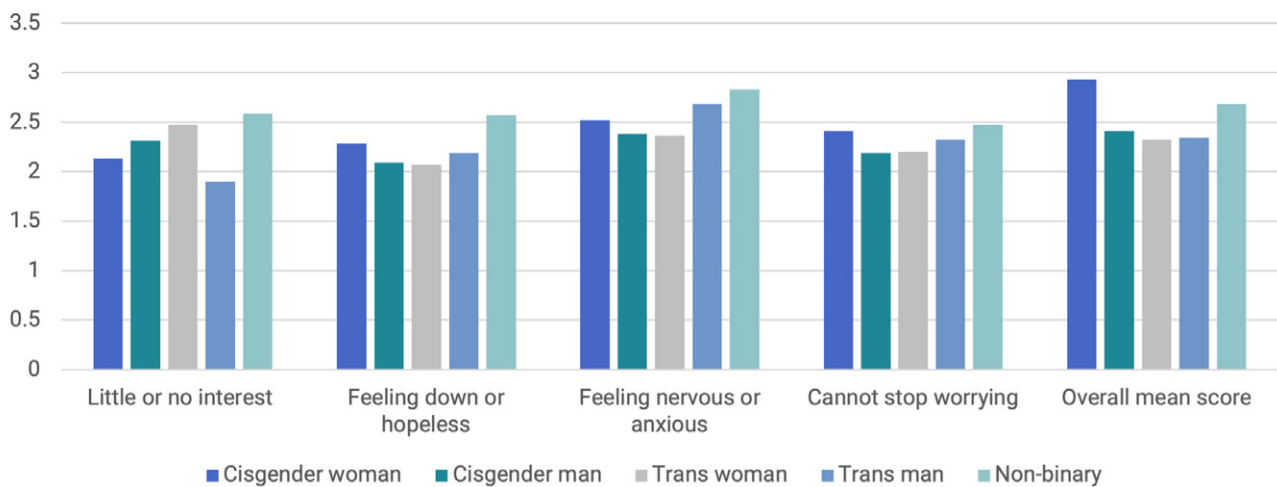


Table 36. First Nations participants: anxiety and depression symptom mean (sd) frequency in past 2 weeks (range 1 = none to 4 = 12-14 days) (n = 396)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 126	n = 197	n = 15	n = 22	n = 36	
Little or no interest	2.13 (0.94)	2.31 (0.97)	2.47 (0.99)	1.90 (0.89)	2.58 (1.11)	2.49, p = .04
Feeling down or hopeless	2.28 (1.01)	2.09 (0.87)	2.07 (0.96)	2.19 (1.03)	2.57 (1.09)	1.09, p = .12
Feeling nervous or anxious	2.52 (1.04)	2.38 (1.03)	2.36 (1.15)	2.68 (1.09)	2.83 (1.07)	1.71, p = .15
Not being able to stop worrying	2.41 (1.07)	2.19 (1.07)	2.20 (1.08)	2.32 (1.04)	2.47 (1.13)	1.09, p = .36
Overall mean score	2.39 (0.87)	2.41 (0.97)	2.32 (0.85)	2.34 (0.93)	2.68 (0.96)	0.82, p = .52

Although gender identity was significantly associated with anxiety and depression symptoms in the full sample, this relationship did not emerge when limited to First Nations participants. There was a significant main effect for little or no interest, but pairwise differences were non-significant

after adjusting for multiple comparisons. Additional analyses combining the trans women, trans men, and non-binary categories to increase statistical power also produced non-significant results.

Figure 39. First Nations participants: diagnosed with or treated for any mental health disorder in the past year (n = 416)

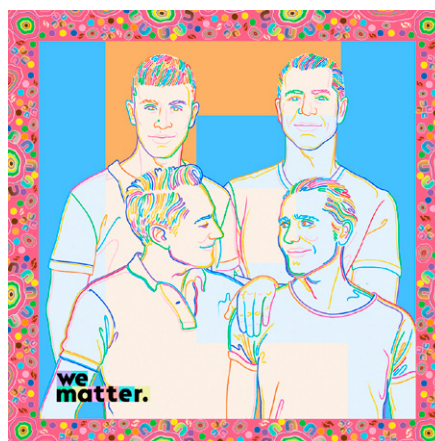
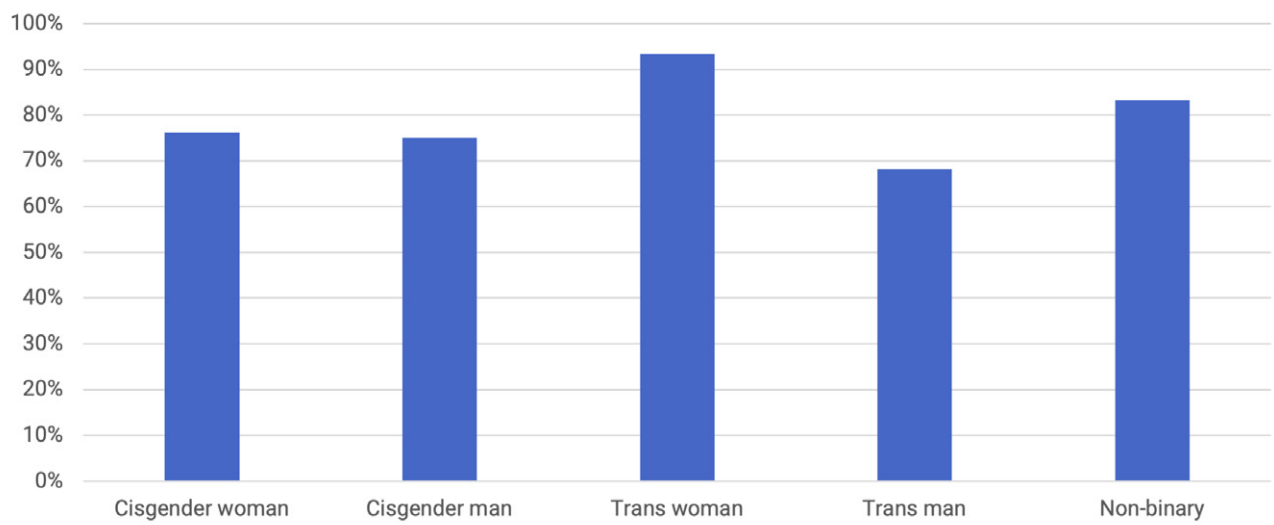


Table 37. First Nations participants: diagnosis or treatment for mental disorder in past year (n = 416)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 130	n = 206	n = 17	n = 22	n = 41	
Any mental health disorder	96 (76.2%)	148 (75.1%)	14 (93.3%)	15 (68.2%)	30 (83.3%)	4.36, p = .36
Depression	60 (46.2%) ^b	56 (27.2%) ^{ae}	6 (35.3%)	8 (36.4%)	21 (51.2%) ^b	16.82, p = .002
Anxiety	76 (58.5%) ^b	81 (39.3%) ^a	8 (47.1%)	13 (59.1%)	22 (53.7%)	13.53, p = .009
PTSD	48 (36.9%) ^b	31 (15.0%) ^{ae}	6 (35.3%)	7 (31.8%)	16 (39.0%) ^b	25.69, p < .001
Complex trauma disorder	31 (23.8%)	34 (16.5%)	5 (29.4%)	9 (40.9%)	13 (31.7%)	11.22, p = .02
Dissociative disorder	16 (12.3%)	35 (17.0%)	2 (11.8%)	3 (13.6%)	6 (14.6%)	1.56, p = .82
Eating disorder	17 (13.1%)	42 (20.4%)	4 (23.5%)	4 (18.2%)	9 (22.0%)	3.65, p = .46
Social phobia	12 (9.2%)	29 (14.1%)	3 (17.6%)	2 (9.1%)	9 (22.0%)	5.28, p = .26
Panic disorder	11 (8.5%)	24 (11.7%)	2 (11.8%)	1 (4.5%)	5 (12.2%)	1.86, p = .76
OCD	11 (8.5%)	27 (13.1%)	3 (17.6%)	1 (4.5%)	4 (9.8%)	n/a
Bipolar disorder	14 (10.8%)	21 (10.2%)	2 (11.8%)	0	9 (22.0%)	n/a
Agoraphobia	4 (3.1%)	12 (5.8%)	2 (11.8%)	1 (4.5%)	4 (9.8%)	n/a
Schizophrenia	5 (3.8%)	10 (4.9%)	1 (5.9%)	0	3 (7.3%)	n/a
Personality disorder	8 (6.2%)	13 (6.3%)	2 (11.8%)	2 99.1%)	8 (19.5%)	n/a
Other	5 (3.8%)	1 (0.5%)	1 (5.9%)	1 (4.5%)	2 (4.9%)	n/a
Autism (coded from text)	1 (0.8%)	0	0	1 (4.5%)	2 (4.9%)	n/a
ADHD (coded from text)	1 (0.8%)	1 (0.5%)	0	1 (4.5%)	1 (2.4%)	n/a

Past year prevalence of any mental health disorder diagnosis or treatment did not significantly differ by gender identity for First Nations participants (sensitivity analyses combining the trans women, trans men and non-binary categories also produced null results). However, some specific disorders did significantly differ across gender identities: rates of depression and PTSD were significantly higher for cisgender women and non-binary people than for cisgender men, and rates of anxiety were significantly higher for cisgender women than cisgender

men. Participants were asked about treatment or diagnosis for conditions that have been found to be more prevalent among victims and survivors of sexual violence. Tellingly, participants were not asked specifically about autism spectrum disorders or ADHD, but these conditions were frequently added to participant responses in the open-text option. Of the 3,192 participants, 9.02% (n = 288) specified another mental health challenge, including 103 who identified ADHD, 47 who identified ASD and ADHD, and 37 who identified ASD or autism.

Figure 40. First Nations participants: prevalence of disability (n = 396)

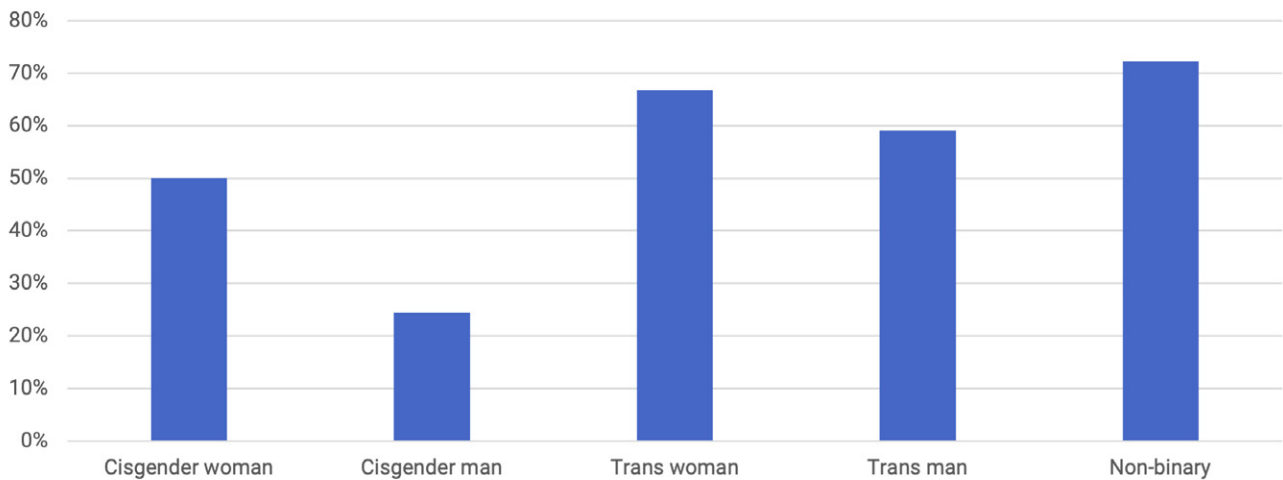


Table 38. First Nations participants: disability (n = 396)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 126	n = 197	n = 15	n = 22	n = 36	
Disability or chronic illness	63 (50.0%) ^b	48 (24.4%) ^{acde}	10 (66.7%) ^b	13 (59.1%) ^b	26 (72.2%) ^b	48.49, p < .001
Mean (sd) days in past week unable to carry out usual duties due to disability	2.51 (1.79) ^b	3.83 (2.19) ^a	3.50 (2.51)	2.92 (2.14)	2.62 (2.24)	3.16, p = .02
Mean (sd) days in past week stay in bed most or all day due to disability	2.14 (1.90)	2.87 (1.84)	2.60 (2.01)	2.15 (2.27)	2.27 (1.82)	1.12, p = .35

Consistent with other findings on health and wellbeing in the study, First Nations cisgender men were significantly less likely to have ever been diagnosed with a disability or chronic illness than any other gender identity. However, of those ever diagnosed with a disability or chronic illness, the average number of days the participant was unable to carry out usual

duties due to impairment in the last week was significantly higher for cisgender men than for cisgender women. In other words, although fewer cisgender men than cisgender women had a disability or chronic illness, it appears that the severity of that disability or illness was greater for these men.

Figure 41. First Nations participants: tested for HIV in past 12 months (n = 395)

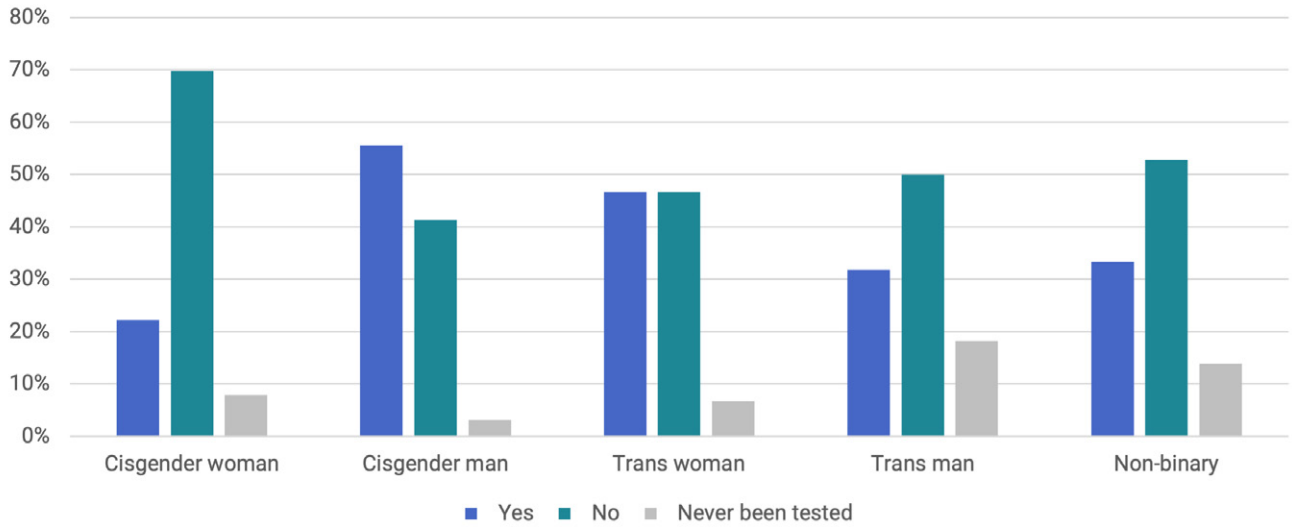


Figure 42. First Nations participants: HIV status (n = 395)

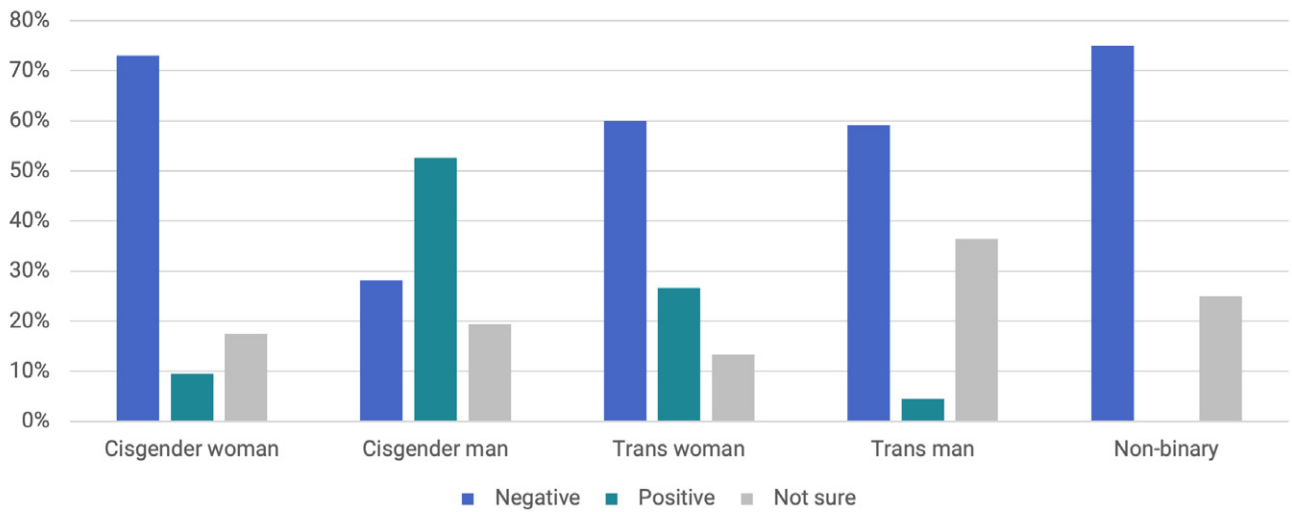


Table 39. First Nations participants: HIV (n = 395)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 126	n = 196	n = 15	n = 22	n = 36	
Tested for HIV in past year						
Yes	28 (22.2%) ^b	109 (55.6%) ^a	7 (46.7%)	7 (31.8%)	12 (33.3%)	45.51, p < .001
No	88 (69.8%) ^a	81 (41.3%) ^b	7 (46.7%)	11 (50.0%)	19 (52.8%)	
Never been tested	10 (7.9%)	6 (3.1%) ^{de}	1 (6.7%)	4 (18.2%) ^b	5 (13.9%) ^b	
HIV status						
Negative	92 (73.0%) ^b	55 (28.1%) ^{ade}	9 (60.0%)	13 (59.1%) ^b	27 (75.0%) ^b	107.42, p < .001
Positive	12 (9.5%) ^b	103 (52.6%) ^{ade}	4 (26.7%) ^e	1 (4.5%) ^b	0 ^{bc}	
Not sure	22 (17.5%)	38 (19.4%)	2 (13.3%)	8 (36.4%)	9 (25.0%)	

As observed in the full sample, First Nations participants' gender identity was significantly associated with having been tested for HIV as well as HIV status. Cisgender men were significantly more likely than cisgender women to have been tested for HIV in the past 12 months, while trans men and non-binary people were significantly more likely than cisgender

men to have never been tested. Cisgender men were also significantly more likely to be HIV-positive than cisgender women, trans women, and non-binary people. Trans women were also significantly more likely to be HIV-positive than non-binary people. Higher rates of testing may partly explain the prevalence of HIV among cisgender men and trans women.

Attitudes and norms

Total sample – all participants

The survey asked participants a series of 21 questions about their attitudes and norms relating to sexual violence, with responses scaled from 1 = strongly disagree to 5 = strongly agree. Figure 41 presents the overall average score for each gender identity category, finding significantly higher overall

mean endorsement of these myths and norms for cisgender men, and to a slightly lower degree trans women, compared to all other gender identities. Findings pertaining to each question can be found in Table 38.

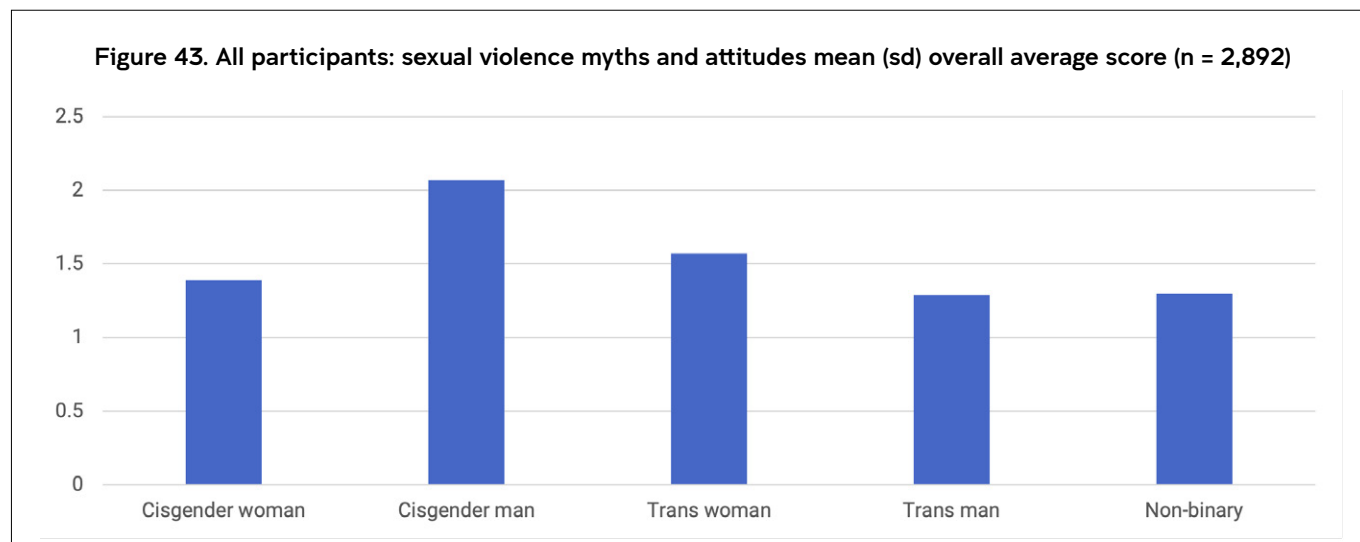


Table 40. All participants: sexual violence myths and attitudes mean (sd) score (range 1 = strongly disagree to 5 = strongly agree) (n = 2,892)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,205	n = 980	n = 126	n = 157	n = 514	
Overall average score	1.39 (0.51) ^{bc}	2.07 (0.93) ^{acde}	1.57 (0.74) ^{abde}	1.29 (0.54) ^{bc}	1.30 (0.46) ^{bc}	119.10, p < .001
Sexual assault accusations are often used to get back at someone.	1.77 (1.11) ^{bce}	2.61 (1.30) ^{acde}	2.15 (1.40) ^{abde}	1.61 (1.04) ^{bc}	1.57 (0.99) ^{abc}	88.08, p < .001
A lot of people lead someone on and then cry rape.	1.49 (0.94) ^{be}	2.32 (1.30) ^{acde}	1.75 (1.25) ^{be}	1.39 (0.90) ^b	1.32 (0.81) ^{abc}	89.13, p < .001
Rape happens when a person's sex drive gets out of control.	1.52 (1.02) ^{bc}	2.36 (1.34) ^{acde}	1.95 (1.31) ^{abde}	1.38 (0.86) ^{bc}	1.46 (0.99) ^{bc}	77.72, p < .001
Sometimes no means yes.	1.24 (0.67) ^{bc}	2.02 (1.30) ^{acde}	1.48 (1.03) ^{ab}	1.22 (0.75) ^b	1.26 (0.71) ^b	71.75, p < .001
Women cannot rape.	1.24 (0.73) ^b	1.78 (1.21) ^{acde}	1.43 (0.99) ^{bd}	1.08 (0.48) ^{bc}	1.18 (0.68) ^b	48.81, p < .001
Men cannot be raped.	1.17 (0.63) ^b	1.67 (1.18) ^{acde}	1.31 (0.86) ^b	1.06 (0.42) ^b	1.12 (0.59) ^b	42.47, p < .001
If both people are high or drunk, you can never know if someone was sexually assaulted.	1.81 (1.05) ^b	2.52 (1.25) ^{acde}	2.00 (1.27) ^b	1.81 (1.03) ^b	1.78 (0.99) ^b	56.45, p < .001
Trans women are more likely to be sexual predators.	1.44 (0.97) ^{be}	1.96 (1.24) ^{acde}	1.36 (0.89) ^b	1.21 (0.72) ^b	1.24 (0.82) ^{ab}	50.50, p < .001

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,205	n = 980	n = 126	n = 157	n = 514	
Someone has already consented to sex if they are at a sex-on-premises venue.	1.25 (0.69) ^{bc}	1.99 (1.26) ^{acde}	1.51 (1.00) ^{abde}	1.20 (0.68) ^{bc}	1.20 (0.64) ^{bc}	72.12, p < .001
It's OK to touch a stranger at an LGBTIQ+ venue or event.	1.19 (0.61) ^b	1.96 (1.20) ^{acde}	1.31 (0.82) ^b	1.20 (0.64) ^b	1.18 (0.62) ^b	81.93, p < .001
Removing a condom during sex without telling your partner is OK if it feels good.	1.12 (0.54) ^b	1.70 (1.19) ^{acde}	1.22 (0.78) ^b	1.06 (0.46) ^b	1.07 (0.43) ^b	53.40, p < .001
It is sexual assault if a transgender person doesn't disclose their gender before sex.	1.89 (1.21) ^{bde}	2.37 (1.35) ^{acde}	1.61 (1.17) ^b	1.41 (0.89) ^{ab}	1.42 (0.94) ^{ab}	70.07, p < .001
It's OK to make a sexual comment to a stranger at a LGBTIQ+ venue.	1.38 (0.75) ^b	2.30 (1.21) ^{acde}	1.60 (1.02) ^b	1.36 (0.84) ^b	1.40 (0.77) ^b	107.45, p < .001
Respecting 'safe words' is optional during BDSM play.	1.34 (0.94) ^{be}	2.02 (1.34) ^{acde}	1.55 (1.18) ^{be}	1.21 (0.83) ^b	1.15 (0.60) ^{abc}	70.49, p < .001
Lesbian relationships are the least likely to be abusive.	1.81 (1.07) ^b	2.11 (1.16) ^{ade}	2.08 (1.09) ^{de}	1.62 (0.87) ^{bc}	1.73 (0.99) ^{bc}	17.83, p < .001
Bisexual people owe their partner a threesome.	1.15 (0.56) ^b	1.79 (1.19) ^{acde}	1.31 (0.91) ^b	1.13 (0.63) ^b	1.10 (0.48) ^b	62.87, p < .001
Asexual people just need to be taught to have better sex.	1.20 (0.67) ^b	1.90 (1.24) ^{acde}	1.36 (0.90) ^b	1.15 (0.68) ^b	1.15 (0.58) ^b	67.42, p < .001
Real men fight back when being raped.	1.25 (0.75) ^{bc}	2.03 (1.33) ^{acde}	1.52 (1.14) ^{abde}	1.13 (0.61) ^{bc}	1.19 (0.63) ^{bc}	76.68, p < .001
Asking for consent kills the mood.	1.25 (0.70) ^b	2.05 (1.28) ^{acde}	1.48 (0.94) ^{bde}	1.15 (0.61) ^{bc}	1.17 (0.59) ^{bc}	87.61, p < .001
If someone orgasms during sex, then you know they wanted it.	1.26 (0.70) ^b	2.00 (1.26) ^{acde}	1.46 (1.09) ^{bde}	1.15 (0.63) ^{bc}	1.18 (0.60) ^{bc}	77.52, p < .001
It's OK for religious, cultural and initiation ceremonies to involve sexual behaviours.	1.36 (0.78) ^b	1.98 (1.28) ^{acde}	1.54 (1.06) ^b	1.56 (1.00) ^b	1.45 (0.87) ^b	41.02, p < .001

Differences in levels of endorsement of the norms and attitudes questions are particularly evident in Figure 43 and Table 40, which presents the proportion of respondents who endorsed 'agree' or 'strongly agree' in their responses. Two-thirds (65.3%) of cisgender men endorsed one or more myths or norms, a

significantly greater proportion than for all other categories of gender identity. Cisgender women and trans women were also significantly more likely to endorse one or more myths or attitudes compared to trans men and non-binary people.

Figure 44. All participants: endorsement of one or more items relating to sexual myths and attitudes (n = 2,892)

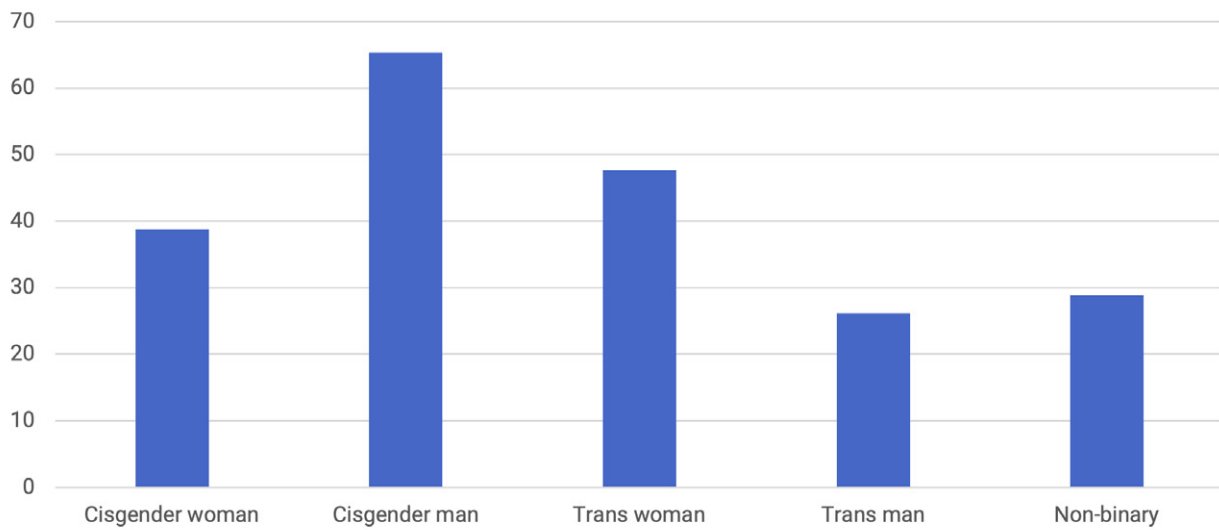
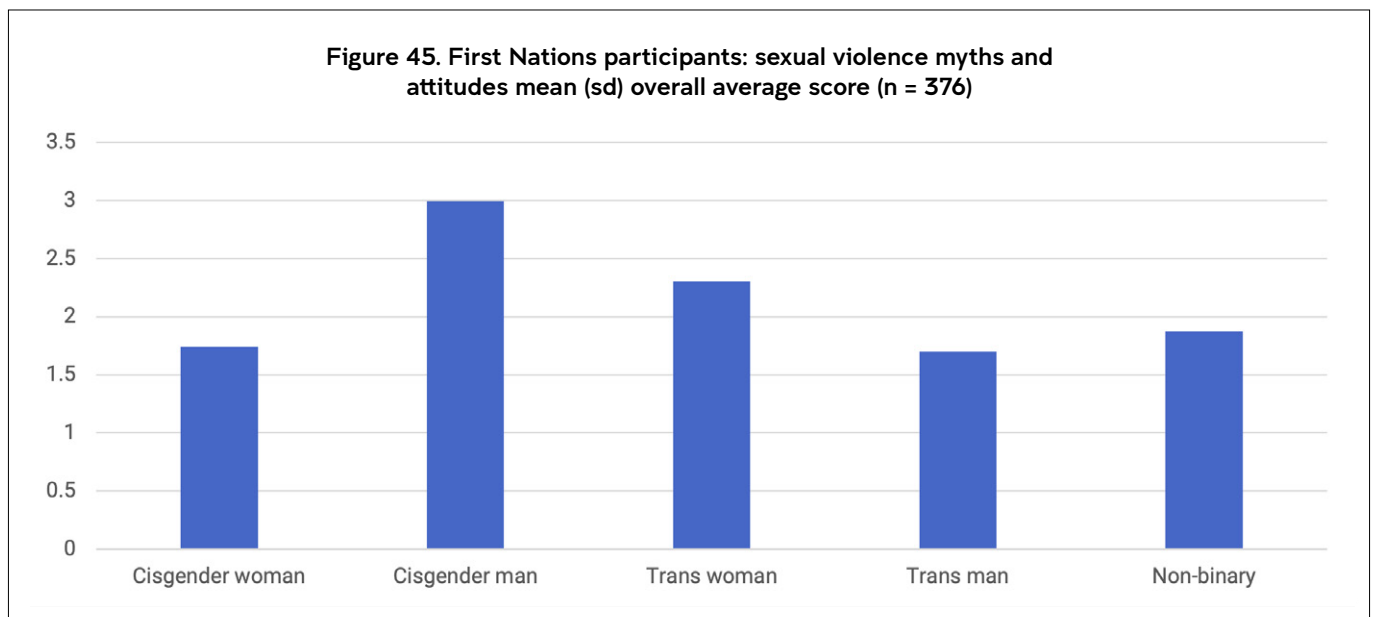


Table 41. All participants: sexual violence myths and attitudes prevalence of endorsement (somewhat agree or strongly agree =1 vs. strongly disagree, disagree or neither agree nor disagree = 0) (n = 2,892)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,205	n = 980	n = 126	n = 157	n = 514	
Endorsement of one or more items.	468 (38.8%) ^{bde}	581 (65.3%) ^{acde}	60 (47.6%) ^{bde}	41 (26.1%) ^{abc}	148 (28.8%) ^{abc}	244.01, $p < .001$
Sexual assault accusations are often used to get back at someone.	135 (11.2%) ^{bc}	264 (29.7%) ^{ade}	31 (24.6%) ^{ade}	17 (10.8%) ^{bc}	40 (7.8%) ^{bc}	171.22, $p < .001$
A lot of people lead someone on and then cry rape.	81 (6.7%) ^{bc}	198 (22.2%) ^{ade}	19 (15.1%) ^{ae}	10 (6.4%) ^b	23 (4.5%) ^{bc}	159.10, $p < .001$
Rape happens when a person's sex drive gets out of control.	106 (8.8%) ^b	220 (24.7%) ^{ade}	20 (15.9%) ^d	6 (3.8%) ^{bc}	41 (8.0%) ^b	144.42, $p < .001$
Sometimes no means yes.	29 (2.4%) ^{bc}	163 (18.3%) ^{ac}	9 (7.1%) ^{ab}	6 (3.8%) ^b	15 (2.9%) ^b	209.10, $p < .001$
Women cannot rape.	37 (3.1%) ^b	114 (12.8%) ^{ade}	9 (7.1%)	3 (1.9%) ^b	15 (2.9%) ^b	102.50, $p < .001$
Men cannot be raped.	30 (2.5%) ^b	102 (11.5%) ^{ade}	6 (4.8%)	2 (1.3%) ^b	11 (2.1%) ^b	102.96, $p < .001$
If both people are high or drunk, you can never know if someone was sexually assaulted.	109 (9.0%) ^b	228 (25.6%) ^{ade}	21 (16.7%) ^e	14 (8.9%) ^b	40 (7.8%) ^{bc}	142.56, $p < .001$
Trans women are more likely to be sexual predators.	75 (6.2%) ^b	115 (12.9%) ^{ade}	7 (5.6%)	5 (3.2%) ^b	23 (4.5%) ^b	50.10, $p < .001$
Someone has already consented to sex if they are at a sex-on-premises venue.	29 (2.4%) ^{bc}	144 (16.2%) ^{ade}	9 (7.1%) ^{ae}	5 (3.2%) ^b	10 (1.9%) ^{bc}	182.20, $p < .001$
It's OK to touch a stranger at a LGBTQIA+ venue or event.	23 (1.9%) ^b	125 (14.0%) ^{ade}	7 (5.6%)	4 (2.5%) ^b	10 (1.9%) ^b	159.91, $p < .001$
Removing a condom during sex without telling your partner is OK if it feels good.	22 (1.8%) ^b	110 (12.4%) ^{ade}	5 (4.0%)	2 (1.3%) ^b	4 (0.8%) ^b	152.69, $p < .001$

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,205	n = 980	n = 126	n = 157	n = 514	
It is sexual assault if a transgender person doesn't disclose their gender before sex.	150 (12.4%) ^{be}	208 (23.4%) ^{acde}	13 (10.3%) ^b	9 (5.7%) ^b	29 (5.7%) ^{ab}	106.35, p < .001
It's OK to make a sexual comment to a stranger at an LGBTIQA+ venue.	31 (2.6%) ^{bc}	159 (17.9%) ^{ade}	10 (7.9%) ^a	6 (3.8%) ^b	15 (2.9%) ^b	195.05, p < .001
Respecting 'safe words' is optional during BDSM play.	68 (5.6%) ^{be}	153 (17.2%) ^{ae}	13 (10.3%) ^e	8 (5.1%) ^b	10 (1.9%) ^{abc}	127.15, p < .001
Lesbian relationships are the least likely to be abusive.	119 (9.9%)	117 (13.1%) ^{de}	13 (10.3%)	5 (3.2%) ^b	34 (6.6%) ^b	24.56, p < .001
Bisexual people owe their partner a threesome.	21 (1.7%) ^{bc}	106 (11.9%) ^{ade}	8 (6.3%) ^{ae}	4 (2.5%) ^b	7 (1.4%) ^{bc}	131.86, p < .001
Asexual people just need to be taught to have better sex.	31 (2.6%) ^b	130 (14.6%) ^{ade}	7 (5.6%) ^e	5 (3.2%) ^b	7 (1.4%) ^{bc}	157.96, p < .001
Real men fight back when being raped.	39 (3.2%) ^b	167 (18.8%) ^{acde}	10 (7.9%) ^{be}	4 (2.5%) ^b	13 (2.5%) ^{bc}	203.18, p < .001
Asking for consent kills the mood.	38 (3.2%) ^b	158 (17.8%) ^{acde}	8 (6.3%) ^b	3 (2.5%) ^b	11 (2.1%) ^b	192.87, p < .001
If someone orgasms during sex, then you know they wanted it.	26 (2.2%) ^{bc}	141 (15.8%) ^{ade}	11 (8.7%) ^{ae}	5 (3.2%) ^b	10 (1.9%) ^{bc}	181.84, p < .001
It's OK for religious, cultural and initiation ceremonies to involve sexual behaviours.	28 (2.3%) ^{bc}	146 (16.5%) ^{ade}	9 (7.1%) ^a	8 (5.1%) ^b	22 (4.3%) ^b	160.64, p < .001

First Nations participants



Consistent with the overall sample, First Nations cisgender men had significantly higher overall mean endorsement of sexual violence myths and attitudes compared to all other gender identity categories. Almost all cisgender men (86.6%)

endorsed one or more myths or attitudes, a significantly greater proportion than cisgender women, trans men, and non-binary people. A similar proportion of trans women (86.7%) also endorsed one or more items.

Table 42. First Nations participants: sexual violence myths and attitudes mean (sd) score (range 1 = strongly disagree to 5 = strongly agree) (n = 376)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 121	n = 186	n = 15	n = 19	n = 35	
Overall average score	1.74 (0.75) ^b	2.99 (0.94) ^{acde}	2.30 (1.05) ^b	1.77 (1.20) ^b	1.87 (0.90) ^b	43.18, p < .001
Sexual assault accusations are often used to get back at someone.	2.51 (1.28) ^b	3.18 (1.14) ^{ade}	3.33 (1.50)	2.16 (1.57) ^b	2.29 (1.47) ^b	8.15, p < .001
A lot of people lead someone on and then cry rape.	2.14 (1.27) ^b	3.06 (1.31) ^{ade}	2.87 (1.55)	1.74 (1.37) ^b	2.11 (1.35) ^b	12.79, p < .001
Rape happens when a person's sex drive gets out of control.	1.95 (1.26) ^b	3.10 (1.24) ^{ade}	2.67 (1.29)	1.79 (1.40) ^b	2.14 (1.38) ^b	17.98, p < .001
Sometimes no means yes.	1.58 (1.06) ^b	3.03 (1.36) ^{ade}	2.27 (1.67)	1.68 (1.49) ^b	1.77 (1.22) ^b	28.27, p < .001
Women cannot rape.	1.49 (1.03) ^b	2.87 (1.39) ^{ade}	2.20 (1.42)	1.42 (1.12) ^b	1.57 (1.12) ^b	27.34, p < .001
Men cannot be raped.	1.51 (1.03) ^b	2.78 (1.41) ^{ade}	2.07 (1.53)	1.32 (0.95) ^b	1.37 (0.91) ^b	26.18, p < .001
If both people are high or drunk, you can never know if someone was sexually assaulted.	2.10 (1.21) ^b	3.06 (1.25) ^{ac}	2.00 (1.31) ^b	2.21 (1.32)	2.51 (1.46)	12.22, p < .001
Trans women are more likely to be sexual predators.	1.64 (1.04) ^b	2.80 (1.37) ^{ace}	1.80 (1.21) ^b	2.00 (1.49)	2.11 (1.61) ^b	17.39, p < .001
Someone has already consented to sex if they are at a sex-on-premises venue.	1.62 (0.99) ^b	3.06 (1.25) ^{ade}	2.53 (1.60)	1.84 (1.39) ^b	1.94 (1.45) ^b	31.31, p < .001
It's OK to touch a stranger at an LGBTIQ+ venue or event.	1.57 (1.11) ^b	2.91 (1.28) ^{ade}	2.13 (1.60)	1.63 (1.21) ^b	1.60 (1.12) ^b	26.55, p < .001
Removing a condom during sex without telling your partner is OK if it feels good.	1.50 (1.07) ^b	2.91 (1.33) ^{ade}	2.00 (1.41)	1.47 (1.26) ^b	1.34 (1.00) ^b	31.55, p < .001
It is sexual assault if a transgender person doesn't disclose their gender before sex.	2.13 (1.20) ^b	3.22 (1.33) ^{ade}	2.27 (1.39)	1.89 (1.20) ^b	2.11 (1.49) ^b	16.77, p < .001
It's OK to make a sexual comment to a stranger at an LGBTIQ+ venue.	1.57 (0.91) ^b	3.00 (1.27) ^{ade}	2.13 (1.30)	1.84 (1.54) ^b	1.74 (1.15) ^b	33.30, p < .001
Respecting 'safe words' is optional during BDSM play.	1.72 (1.21) ^b	2.85 (1.34) ^{ade}	2.60 (1.72)	1.79 (1.48) ^b	1.77 (1.29) ^b	16.35, p < .001
Lesbian relationships are the least likely to be abusive.	1.81 (1.11) ^b	2.88 (1.28) ^{ade}	2.33 (1.29)	1.95 (1.22) ^b	1.94 (1.06) ^b	16.21, p < .001
Bisexual people owe their partner a threesome.	1.53 (0.97) ^b	2.88 (1.31) ^{acde}	1.93 (1.39) ^b	1.79 (1.51) ^b	1.57 (1.07) ^b	28.29, p < .001
Asexual people just need to be taught to have better sex.	1.64 (1.14) ^b	3.02 (1.29) ^{acde}	1.80 (1.27) ^b	1.79 (1.58) ^b	1.80 (1.05) ^b	26.71, p < .001
Real men fight back when being raped.	1.68 (1.18) ^b	3.12 (1.37) ^{ade}	2.40 (1.45)	1.68 (1.42) ^b	1.97 (1.18) ^b	25.42, p < .001
Asking for consent kills the mood.	1.50 (0.96) ^b	2.97 (1.28) ^{ade}	2.27 (1.49)	1.68 (1.38) ^b	1.77 (1.26) ^b	33.24, p < .001
If someone orgasms during sex, then you know they wanted it.	1.56 (0.95) ^{bc}	2.88 (1.33) ^{ade}	2.53 (1.69) ^a	1.63 (1.38) ^b	1.89 (1.28) ^b	25.87, p < .001
It's OK for religious, cultural and initiation ceremonies to involve sexual behaviours.	1.79 (1.16) ^b	3.17 (1.37) ^{acde}	2.13 (1.46) ^b	1.95 (1.27) ^b	1.91 (1.34) ^b	24.03, p < .001

Table 43. First Nations participants: rape myths and attitudes prevalence of endorsement (somewhat agree or strongly agree = 1 vs. strongly disagree, disagree or neither agree nor disagree = 0) (n = 376)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 121	n = 186	n = 15	n = 19	n = 35	
Endorsement of one or more items.	67 (55.4%) ^b	161 (86.6%) ^{ade}	13 (86.7%) ^d	7 (36.8%) ^{bc}	22 (62.9%) ^b	50.64, $p < .001$
Sexual assault accusations are often used to get back at someone.	26 (21.5%) ^b	78 (41.9%) ^a	8 (53.3%)	6 (31.6%)	9 (25.7%)	17.33, $p = .002$
A lot of people lead someone on and then cry rape.	21 (17.4%) ^b	70 (37.6%) ^a	6 (40.0%)	3 (15.8%)	6 (17.1%)	19.80, $p < .001$
Rape happens when a person's sex drive gets out of control.	21 (17.4%) ^b	78 (41.9%) ^a	3 (20.0%)	3 (15.8%)	8 (22.9%)	25.20, $p < .001$
Sometimes no means yes.	11 (9.1%) ^b	83 (44.6%) ^{ae}	4 (26.7%)	3 (15.8%)	5 (14.3%) ^b	51.42, $p < .001$
Women cannot rape.	8 (6.6%) ^b	67 (36.0%) ^{ae}	3 (20.0%)	2 (10.5%)	3 (8.6%) ^b	43.07, $p < .001$
Men cannot be raped.	9 (7.4%) ^b	63 (33.9%) ^{ae}	3 (20.0%)	1 (5.3%)	2 (5.7%) ^b	40.11, $p < .001$
If both people are high or drunk, you can never know if someone was sexually assaulted.	15 (12.4%) ^b	74 (39.8%) ^a	2 (13.3%)	3 (15.8%)	9 (25.7%)	30.87, $p < .001$
Trans women are more likely to be sexual predators.	7 (5.8%) ^{be}	58 (31.2%) ^a	1 (6.7%)	4 (21.1%)	8 (22.9%) ^a	30.70, $p < .001$
Someone has already consented to sex if they are at a sex-on-premises venue.	8 (6.6%) ^b	72 (38.7%) ^a	4 (26.7%)	3 (15.8%)	6 (17.1%)	42.79, $p < .001$
It's OK to touch a stranger at an LGBTIQ+ venue or event.	11 (9.1%) ^b	65 (34.9%) ^a	4 (26.7%)	2 (10.5%)	4 (11.4%)	32.76, $p < .001$
Removing a condom during sex without telling your partner is OK if it feels good.	11 (9.1%) ^b	70 (37.6%) ^{ae}	3 (20.0%)	2 (10.5%)	2 (5.7%) ^b	42.80, $p < .001$
It is sexual assault if a transgender person doesn't disclose their gender before sex.	18 (14.9%) ^b	83 (44.6%) ^{ad}	3 (20.0%)	2 (10.5%) ^b	8 (22.9%)	36.88, $p < .001$
It's OK to make a sexual comment to a stranger at an LGBTIQ+ venue.	7 (5.8%) ^b	71 (38.2%) ^{ae}	2 (13.3%)	3 (15.8%)	4 (11.4%) ^b	48.21, $p < .001$
Respecting 'safe words' is optional during BDSM play.	13 (10.7%) ^{bc}	60 (32.3%) ^a	6 (40.0%) ^a	4 (21.1%)	5 (14.3%)	22.94, $p < .001$
Lesbian relationships are the least likely to be abusive.	13 (10.7%) ^b	67 (36.0%) ^{ae}	3 (20.0%)	2 (10.5%)	3 (8.6%) ^b	33.49, $p < .001$
Bisexual people owe their partner a threesome.	6 (5.0%) ^b	65 (34.9%) ^a	3 (20.0%)	3 (15.8%)	4 (11.4%)	41.97, $p < .001$
Asexual people just need to be taught to have better sex.	13 (10.7%) ^b	73 (39.2%) ^{ae}	2 (13.3%)	4 (21.1%)	2 (5.7%) ^b	41.44, $p < .001$
Real men fight back when being raped.	14 (11.6%) ^b	87 (46.8%) ^{ae}	3 (20.0%)	3 (15.8%)	5 (14.3%) ^b	51.35, $p < .001$
Asking for consent kills the mood.	10 (8.3%) ^b	66 (35.5%) ^a	3 (20.0%)	3 (15.8%)	4 (11.4%)	34.62, $p < .001$
If someone orgasms during sex, then you know they wanted it.	6 (5.0%) ^{bc}	70 (37.6%) ^{ae}	5 (33.3%) ^a	3 (15.8%)	4 (11.4%) ^b	48.22, $p < .001$
It's OK for religious, cultural and initiation ceremonies to involve sexual behaviours.	10 (8.3%) ^b	88 (47.3%) ^{ae}	2 (13.3%)	3 (15.8%)	6 (17.1%) ^b	61.36, $p < .001$

Experiences of sexual violence

Survey participants were asked 6 questions about experiences of sexual violence pertaining to: unwanted sexual requests and comments; unwanted fondling, kissing or rubbing; oral rape; vaginal or anal rape; non-consensual intimate image or video making; non-consensual intimate image or video distribution, attempted oral rape and attempted vaginal or anal rape. For each type of sexual violence, participants were asked about age at first occurrence, whether it happened in childhood, adulthood or both and the context of the incident, and they could also provide more information in an open-text box. They were also asked a question about the identity of any perpetrator of sexual violence against them (e.g. acquaintance, partner, or family member).

This section presents 3 forms of analysis based on these questions. The first describes and compares participant responses to each of the 6 questions based on categories of gender identity, including a focus on First Nations participants. The second describes and compares health and demographic characteristics across 4 mutually exclusive categories of exposure to sexual violence: participants reporting no sexual violence, participants reporting sexual violence in childhood, participants reporting sexual violence in adulthood, and participants reporting both child and adult experiences of sexual violence. This analysis further particularises the relative risk of sexual violence to different genders and sexual minorities across their lifespan. Finally, qualitative responses to questions about each of the 6 forms are presented as a thematic analysis.

a. Lifetime experiences of sexual violence according to gender identity, sexual orientation and social location

Table 44. All participants: gender identity (n = 3,192)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,312	n = 987	n = 139	n = 178	n = 576	
No sexual violence	240 (18.3%) ^b	353 (35.8%) ^{acde}	33 (23.7%)	32 (18.0%) ^b	117 (20.3%) ^b	362.43, p < .001
Child only	85 (6.5%) ^d	61 (6.2%) ^d	9 (6.5%)	25 (14.0%) ^{abe}	40 (6.9%) ^d	
Adult only	137 (10.4%) ^{bc}	276 (28.0%) ^{ade}	37 (26.6%) ^{ade}	21 (11.8%) ^{bc}	67 (11.6%) ^{bc}	
Child and adult	850 (64.8%) ^{bc}	297 (30.1%) ^{acde}	60 (43.2%) ^{abe}	100 (56.2%) ^b	352 (61.1%) ^{bc}	

The proportion of participants who experienced sexual violence before and during adulthood significantly differed by gender identity. A significantly greater proportion of cisgender men (35.8%) experienced no sexual violence compared to all other gender identities (18.0%-23.7%). A significantly greater proportion of trans men (14.0%) than cisgender women (6.5%), cisgender men (6.2%), and non-binary people (6.9%) only experienced sexual violence during childhood. Cisgender men (28.0%) and trans women (26.6%) were significantly more

likely than cisgender women (10.4%), trans men (11.8%), and non-binary people (11.6%) to experience sexual violence during adulthood only. Sexual violence during childhood and adulthood was significantly more likely to have been experienced by cisgender women (64.8%) and non-binary people (61.1%) than cisgender men (30.1%) and trans women (43.2%), while trans men (56.2%) and trans women (43.2%) were significantly more likely to have experienced it than cisgender men (30.1%).

Figure 46. All participants: sexual violence across lifespan by sexual orientation (n = 3,106)

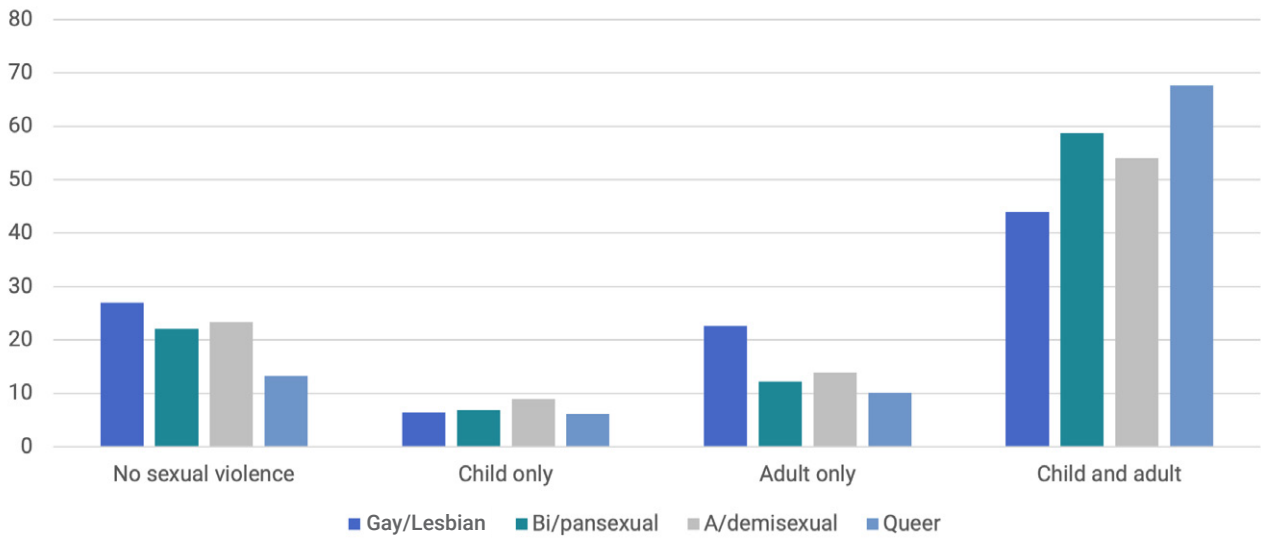


Table 45. All participants: sexual orientation (n = 3,106)

	Gay/Lesbian	Bi/pansexual	A/demisexual	Queer	χ^2 / F
	n = 1,416	n = 1,210	n = 202	n = 278	
No sexual violence	382 (27.0%) ^{bd}	267 (22.1%) ^a	47 (23.3%)	45 (16.2%) ^a	108.71, $p < .001$
Child only	91 (6.4%)	83 (6.9%)	18 (8.9%)	17 (6.1%)	
Adult only	320 (22.6%) ^{bcd}	148 (12.2%) ^a	28 (13.9%) ^a	28 (10.1%) ^a	
Child and adult	623 (44.0%) ^{bcd}	712 (58.8%) ^{ad}	109 (54.0%) ^{ad}	188 (67.6%) ^{abc}	

Sexual orientation was significantly associated with experiences of sexual violence. Homosexual participants were significantly more likely to not experience sexual violence (27.0%) than bi/pansexual (22.1%) or queer (16.2%) participants and were also more likely to experience sexual violence during adulthood only (22.6%) than all other categories of sexual orientation (10.1%-13.9%). By contrast,

queer identifying people were significantly more likely to experience sexual violence during both childhood and adulthood (67.6%) compared to all other sexual orientations (44.0%-58.8%), while people who identified as bi/pansexual (58.8%) or a/demisexual (54.0%) were more likely than those identifying as gay/Lesbian (44.0%) to experience sexual violence during both childhood and adulthood

Figure 47. All participants: sexual violence across lifespan by sexual orientation (n = 3,106)

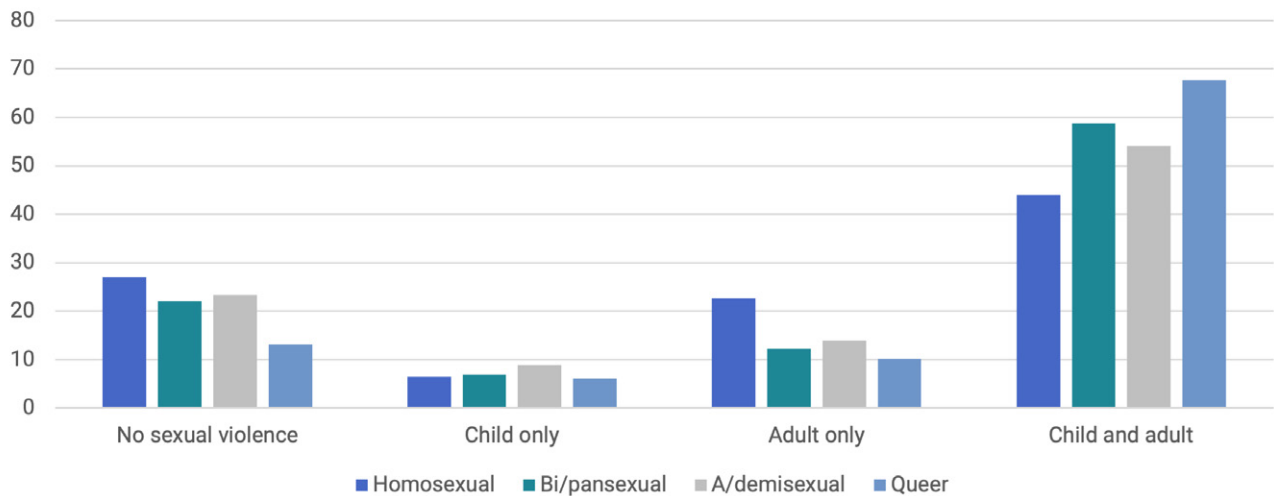


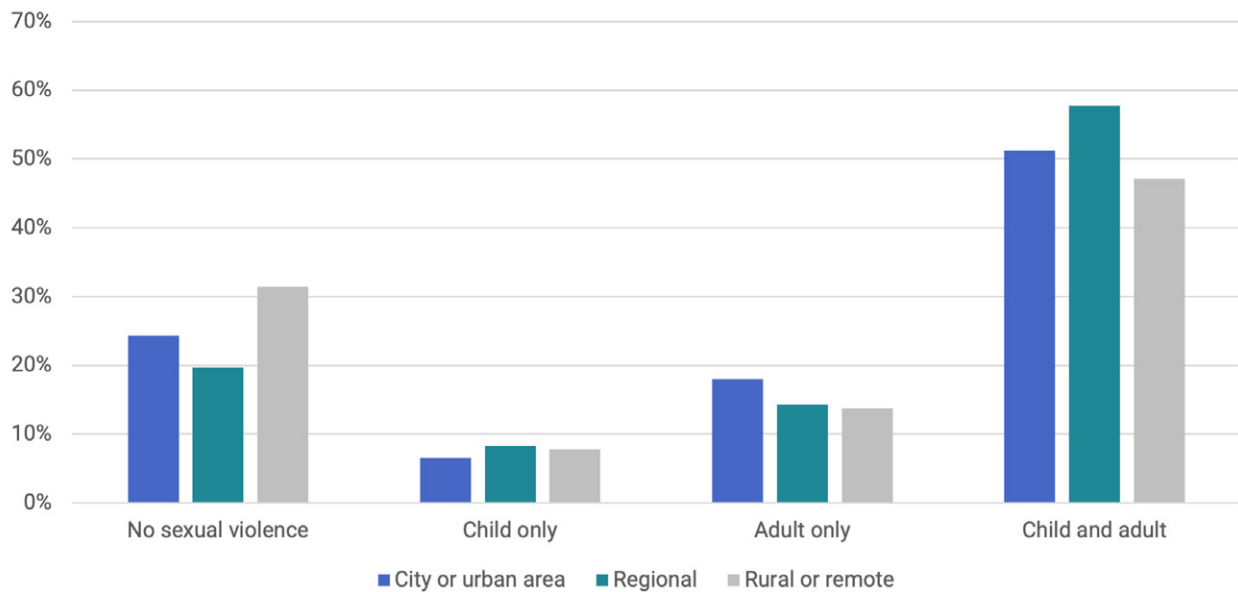
Table 46. All participants: residential location (n = 3,153)

	City or urban area	Regional	Rural or remote	χ^2 / F
	n = 2,395	n = 707	n = 51	
No sexual violence	581 (24.3%) ^b	139 (19.7%) ^a	16 (31.4%)	18.24, p = .006
Child only	157 (6.6%)	59 (8.3%)	4 (7.8%)	
Adult only	430 (18.0%)	101 (14.3%)	7 (13.7%)	
Child and adult	1,227 (51.2%) ^b	408 (57.7%) ^a	24 (47.1%)	

The proportion of participants who experienced sexual violence significantly differed across categories of residential location. Those who resided in city or urban areas (24.3%) were significantly more likely than those in regional areas (19.7%) to

not experience sexual violence, whereas those who resided in regional areas (57.7%) were significantly more likely than those in city or urban areas (51.2%) to experience sexual violence during both childhood and adulthood.

Figure 48. All participants: experience of lifetime sexual violence by residential location (n = 3,153)



b. Unwanted sexual request or comment

Table 47. All participants: someone made a sexual request or comment that was unwelcome, offensive, humiliating, or intimidating (n = 2,883)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,202	n = 885	n = 126	n = 157	n = 513	
Lifetime prevalence	1,002 (83.4%) ^b	476 (53.8%) ^{acde}	93 (73.8%) ^b	134 (85.4%) ^b	432 (84.2%) ^b	281.87, p < .001
Lifetime frequency mean (sd)	8.44 (5.20) ^b	7.10 (4.74) ^{ae}	6.95 (5.61)	8.40 (5.73)	8.60 (5.53) ^b	5.48, p < .001
Past-year prevalence	625 (62.6%) ^b	285 (34.5%) ^{acde}	56 (49.1%) ^b	82 (59.9%) ^b	271 (60.0%) ^b	161.18, p < .001
Past-year frequency mean (sd)	4.37 (4.03)	4.68 (3.89)	5.68 (4.83)	4.29 (3.63)	4.41 (3.77)	1.17, p = .32
Mean (sd) age at first occurrence	12.82 (5.23) ^{bc}	16.99 (6.87) ^{ade}	18.23 (12.29) ^{ade}	12.42 (5.12) ^{bc}	12.65 (4.98) ^{bc}	42.06, p < .001
Incident context						
Verbal pressure	518 (51.7%)	213 (44.7%) ^e	36 (38.7%) ^e	71 (53.0%)	237 (54.9%) ^{bc}	15.63, p = .004
Comment from stranger	629 (62.8%) ^{be}	237 (49.8%) ^{ae}	52 (55.9%) ^e	90 (67.2%) ^b	310 (71.8%) ^{abc}	50.56, p < .001
Exploiting position of power	399 (39.8%)	164 (34.5%)	27 (29.0%)	57 (42.5%)	180 (41.7%)	10.25, p = .04
Targeted due to gender or sexuality	264 (26.3%) ^{bcd}	165 (34.7%) ^{acd}	50 (53.8%) ^{ab}	70 (52.2%) ^{ab}	177 (41.0%) ^a	71.68, p < .001

Three-quarters of the sample (74.1%) indicated that at some point in their life they had experienced an unwanted sexual request or comment, although prevalence and frequency significantly differed across gender identities. Just over half (53.8%) of cisgender men reported ever experiencing an unwanted sexual request or comment, and over one-third (34.5%) in the previous year. The prevalence of cisgender men's experiences was significantly lower than for all other gender categories.

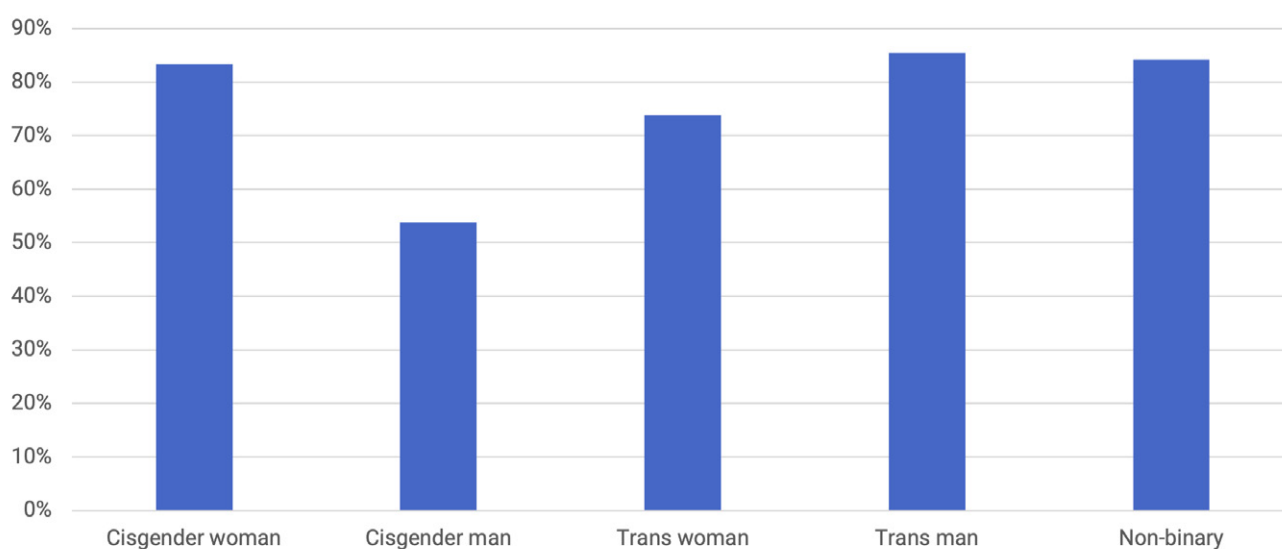
In comparison, almost three-quarters of trans women (73.8%), and approximately 85% of the rest of the sample, reported experiencing at least one unwanted sexual request or comment in their lifetime.

This form of sexual violence was frequent, with 68.2% of those who had ever experienced it reporting that it had occurred 5 or more times. The average life-time frequency was significantly higher for cisgender women (8.44 times) and non-binary people

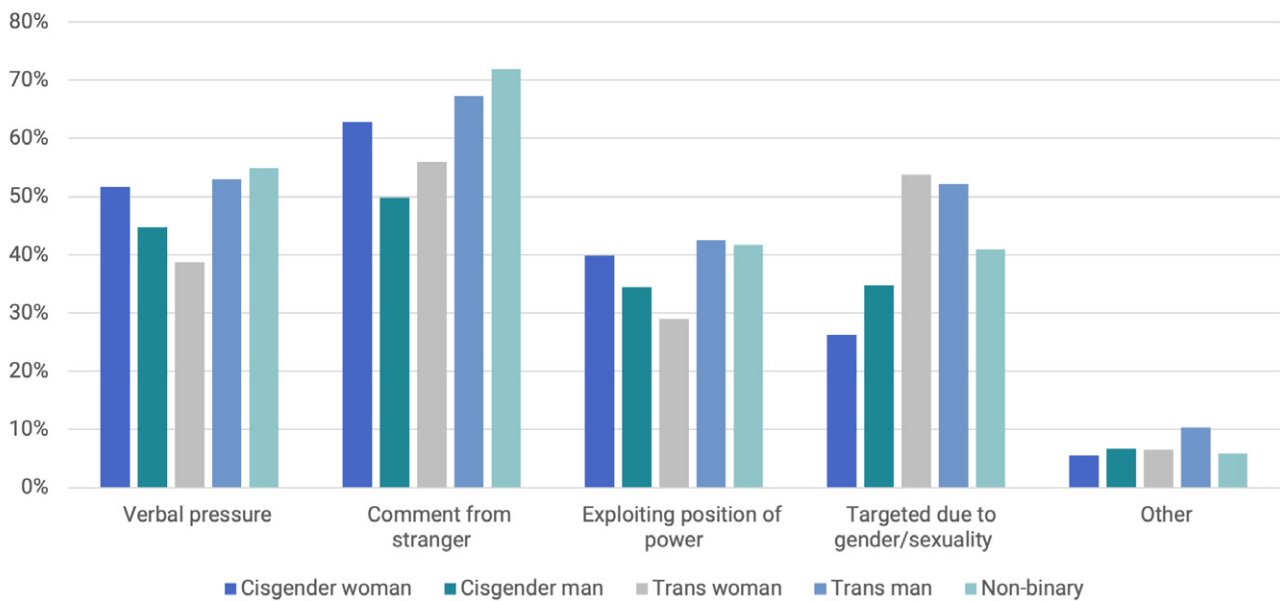
(8.60 times) than for cisgender men. Half of trans women (49.1%) and almost two thirds of cisgender women (62.6%), trans men (59.9%) and non-binary people (60%) reported experiencing an unwanted sexual request or comment in the previous year. The average frequency during the past year was high, between 3.19-4.51 times, although this did not significantly differ across gender identity.

The mean age at first occurrence was under 18 for all gender categories except trans women (18.23), who had a significantly older age of first occurrence than cisgender women (12.82), trans men (12.42), and non-binary people (12.65). Across the sample, of those reporting this form of sexual violence, 7.3% reported that they experienced an unwanted sexual request or comment in childhood (but not adulthood), 17.2% reported that they had experienced this only in adulthood, and three-quarters (75.5%) reported that they had experienced an unwanted sexual comment or remark in childhood and adulthood.

Figure 49. All participants: lifetime prevalence of unwanted sexual remark/s (n = 2,883)



**Figure 50. All participants: contexts of unwanted sexual remarks (n = 2,883)
(participants could select multiple answers)**



Across all gender categories, the most common circumstance for an unwanted sexual comment or request was from a stranger, followed by 'verbal pressure' (e.g. telling lies, threatening to end the relationship or embarrass you, making false promises, or continually pressuring you after you said 'no'). However, being targeted on the basis of gender identity or sexual orientation was also a common experience and reported by between 25% to over 50% of the sample. Trans women and trans men were significantly more likely to report that they had been targeted due to their gender or sexuality compared to cisgender men and women.

In open-text responses, participants provided further details about the incidents they were reporting. The largest category of response (21 responses) related to comments made by

family members or family friends, followed by comments made at school (13 responses), and comments made by friends, partners or dates (11 responses). Some examples are below:

- > "Started having family members comment on my breasts/ looks at age 10."
- > "Person at school repeatedly, loudly and publicly made suggestive and explicitly sexual comments and sounds directed at me, as well as unwelcome touching of my hair, back and arms. We didn't know each other very well but we did know each other."
- > "Friend who knew I had a crush on started sexting out of the blue."

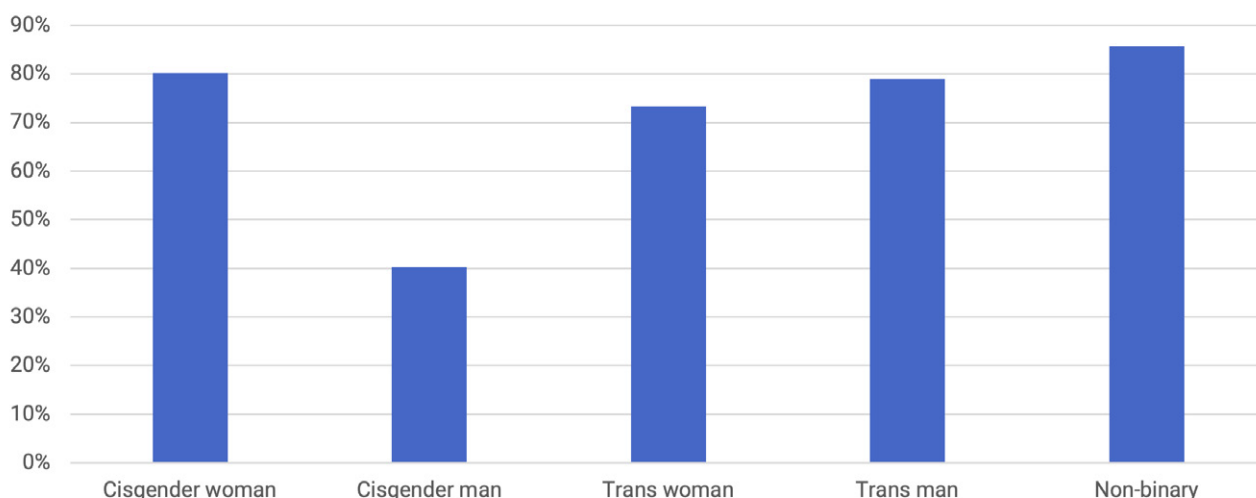
Table 48. First Nations participants: someone made a sexual request or comment that was unwelcome, offensive, humiliating, or intimidating (n = 376)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 121	n = 186	n = 15	n = 19	n = 35	
Lifetime prevalence	97 (80.2%) ^b	75 (40.3%) ^{ade}	11 (73.3%)	15 (78.9%) ^b	30 (85.7%) ^b	64.40, p < .001
Lifetime frequency mean (sd)	9.97 (5.74)	8.98 (5.13)	9.40 (7.73)	8.86 (5.84)	10.18 (5.29)	0.30, p = .88
Past-year prevalence	67 (62.0%) ^{be}	63 (31.8%) ^a	7 (43.8%)	9 (47.4%)	12 (33.3%) ^a	27.60, p < .001
Past-year frequency mean (sd)	5.43 (4.82)	7.03 (4.64)	7.57 (5.13)	5.89 (3.59)	6.58 (5.12)	1.09, p = .36
Mean (sd) age at first occurrence	11.65 (5.53) ^b	16.68 (6.27) ^{ade}	14.20 (7.30)	11.20 (5.57) ^b	12.57 (5.28) ^b	8.76, p < .001
Incident context						
Verbal pressure	58 (59.8%)	37 (49.3%)	5 (45.5%)	10 (66.7%)	19 (63.3%)	3.74, p = .44
Comment from stranger	49 (50.5%)	38 (50.7%)	5 (45.5%)	9 (60.0%)	19 (63.3%)	2.22, p = .70
Exploiting position of power	46 (47.4%)	31 (41.3%)	4 (36.4%)	11 (73.3%)	13 (43.3%)	5.74, p = .22
Targeted due to gender or sexuality	20 (20.6%) ^{ce}	19 (25.3%)	7 (63.6%) ^a	8 (53.3%)	16 (53.3%) ^a	22.09, p < .001

An unwanted sexual remark was also relatively common for First Nations participants, reported by 85.7% of non-binary people, four-fifths of trans men (78.9%) and cisgender women (80.2%), and almost three quarters of trans women (73.3%) in their lifetimes. An unwanted sexual remark was reported by 40.3% of cisgender men, which was significantly lower than cisgender women, trans men and non-binary people. Such experiences were typically repeated, occurring five or more

times for 79.6% of First Nations participants who had ever experienced it. Two-thirds of cisgender women (62%) reported this experience in the previous year, compared to approximately one-third of cisgender men (31.8%) and non-binary people (33.3%), and under half of trans women (43.8%) and trans men (47.4%). Average age at first occurrence was below 18 across the sample, ranging from 11.36 years for trans men to 16.22 years for cisgender men.

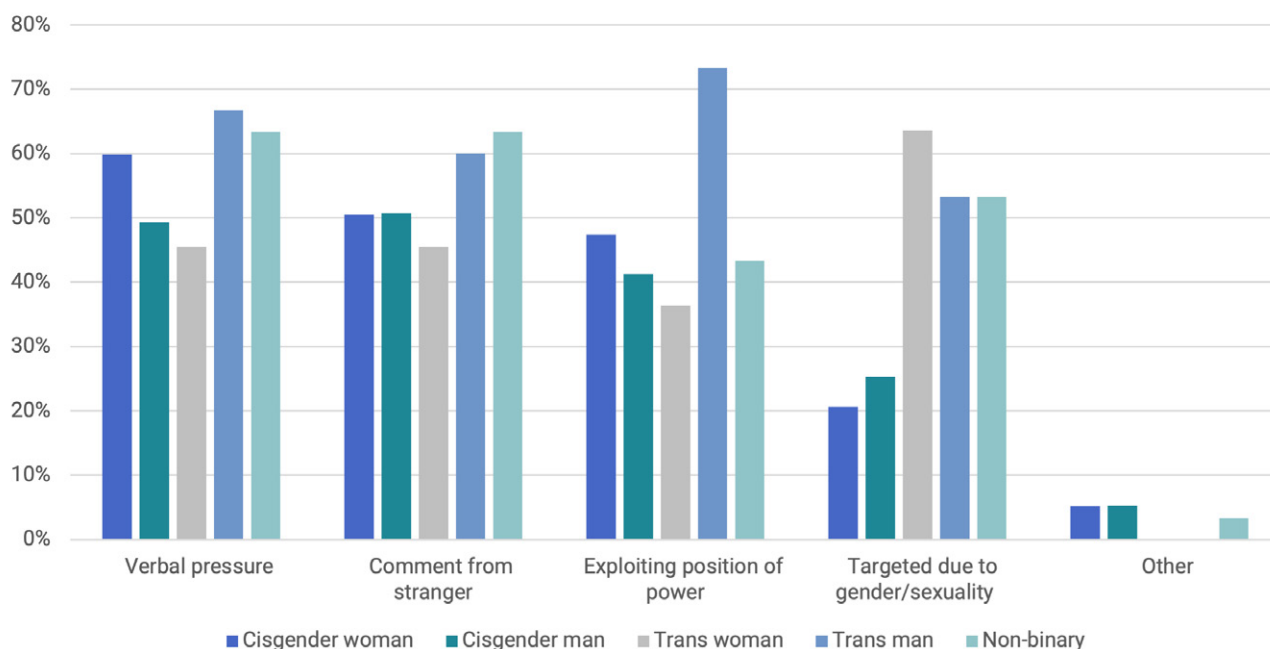
Figure 51. First Nations participants: lifetime prevalence of unwanted sexual remark/s (n = 376)



Across First Nations participants, 'verbal pressure' was a common context for an unwanted sexual remark, followed by a comment from a stranger. Trans women and non-binary people were significantly more likely than cisgender women to

report that they were targeted due to their gender or sexuality. Exploitation of a position of power was reported in high numbers by trans men (73.3%).

Figure 52. First Nations participants: circumstances in which the unwanted sexual remarks occurred (n = 376)



Ten First Nations participants provided further information on this form of victimisation via open-text responses, referring to 2 scenarios: comments made by family members, friends or neighbours, and comments made in the workplace. These included responses such as:

- > "I was a child, it was a trusted family member."
- > "Inappropriately touched by a colleague."

c. Unwanted fondling, kissing or rubbing

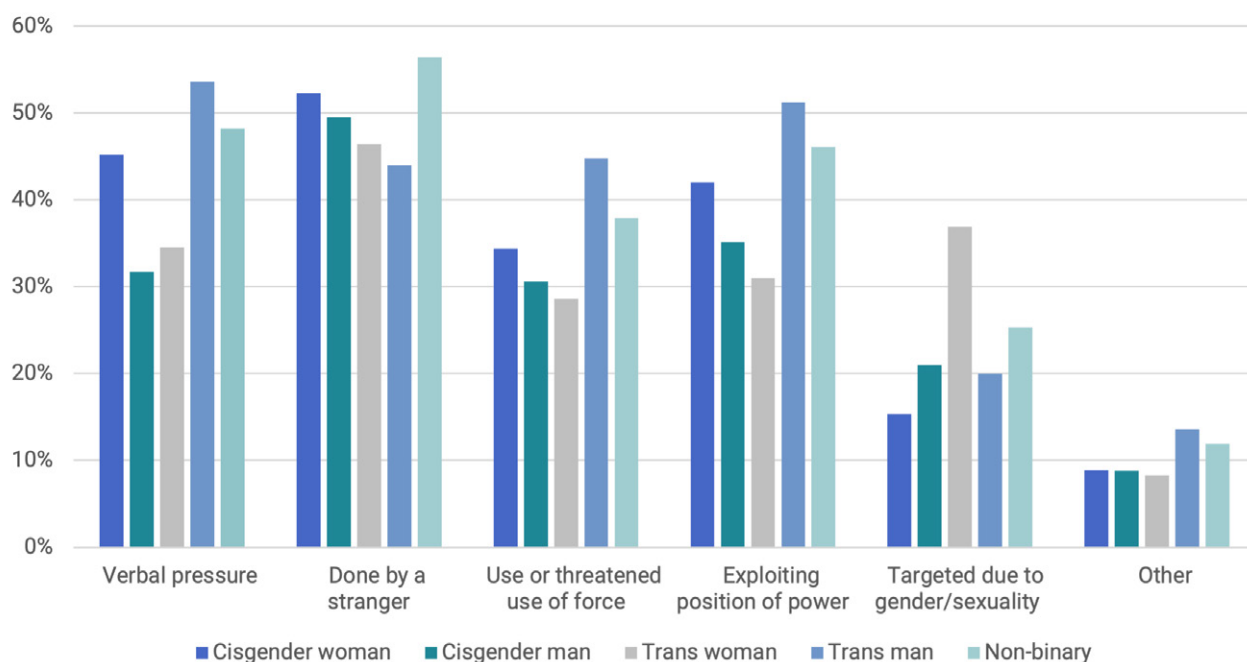
Table 49. All participants: someone fondled, kissed, or rubbed up against private areas of body (n = 2,827)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,183	n = 869	n = 124	n = 153	n = 498	
Lifetime prevalence	877 (74.1%) ^b	467 (53.7%) ^{acde}	84 (67.7%) ^b	125 (81.7%) ^b	388 (77.9%) ^b	138.32, p < .001
Lifetime frequency mean (sd)	6.19 (4.84)	6.38 (5.01)	5.36 (5.30)	5.77 (4.37)	6.13 (4.92)	0.77, p = .55
Past-year prevalence	319 (40.6%) ^b	225 (29.6%) ^{ad}	35 (36.8%)	43 (44.3%) ^b	117 (36.6%)	24.10, p < .001
Past-year frequency mean (sd)	3.51 (3.78) ^b	4.51 (4.22) ^a	3.51 (2.97)	3.19 (3.55)	3.36 (3.16)	2.83, p = .03
Mean (sd) age at first occurrence	14.07 (5.95) ^{bc}	17.85 (7.18) ^{ade}	16.28 (7.83) ^{ad}	12.78 (5.69) ^{bc}	14.07 (6.66) ^b	29.66, p < .001
Incident context						
Verbal pressure	396 (45.2%) ^b	148 (31.7%) ^{ade}	29 (34.5%)	67 (53.6%) ^b	187 (48.2%) ^b	38.46, p < .001
Done by a stranger	459 (52.3%)	231 (49.5%)	39 (46.4%)	55 (44.0%)	219 (56.4%)	8.48, p = .08
Use or threatened use of force	302 (34.4%)	143 (30.6%) ^d	24 (28.6%)	56 (44.8%) ^b	147 (37.9%)	12.22, p = .016
Exploiting position of power	368 (42.0%)	164 (35.1%) ^{de}	26 (31.0%) ^d	64 (51.2%) ^{bc}	179 (46.1%) ^b	20.03, p < .001
Targeted due to gender or sexuality	134 (15.3%) ^{ce}	98 (21.0%) ^c	31 (36.9%) ^{ab}	25 (20.0%)	98 (25.3%) ^a	34.34, p < .001

The prevalence of unwanted fondling, kissing or rubbing was broadly comparable with patterns of unwanted sexual comments or requests. This experience was reported by over half of cisgender men (53.7%) and this prevalence was significantly lower than for all other gender categories. Unwanted fondling, kissing or rubbing was reported by two-thirds of trans women (67.7%), three-quarters of cisgender women (74.1%) and approximately four-fifths of trans men (81.7%) and non-binary people (77.9%). This form of sexual violence was recurrent, occurring five or more times among

half (49.6%) of those who experienced it. Unwanted fondling, kissing or rubbing was comparatively less common in the past year compared to unwanted sexual comments and requests, reported by between 29.6%-40.6% in the previous 12 months. Mean age at first occurrence was under 18 for all gender categories, as low as 12.78 years old for trans men and 14.07 years old for non-binary people and cisgender women. Cisgender men had a significantly older average age of first occurrence compared with cisgender women, trans men, and non-binary people.

Figure 53. All participants: circumstances in which unwanted fondling, kissing or rubbing occurred (n = 2,827)



For almost all gender categories, unwanted fondling, kissing or rubbing was most often committed by a stranger, with the exception of for trans men, who identified 'verbal pressure' as the most common victimisation scenario (53.6%). Cisgender men were statistically less likely to report that unwanted fondling, kissing or rubbing occurred due to verbal pressure (31.7%) compared to cisgender women (45.2%), trans men (53.6%) and non-binary people (48.2%). Cisgender men most often reported that this form of victimisation was done by a stranger (49.5%). Trans men reported the highest frequency of this form of sexual violence, and over 50% reported that this occurred due to the exploitation of a position of power, and over 40% reported use or threats of force. Being targeted due to gender or sexuality was significantly higher for trans women compared to cisgender men and women. Non-binary people reported being targeted for their gender and/or sexuality by

unwanted fondling, kissing or rubbing at significantly higher rates than cisgender women.

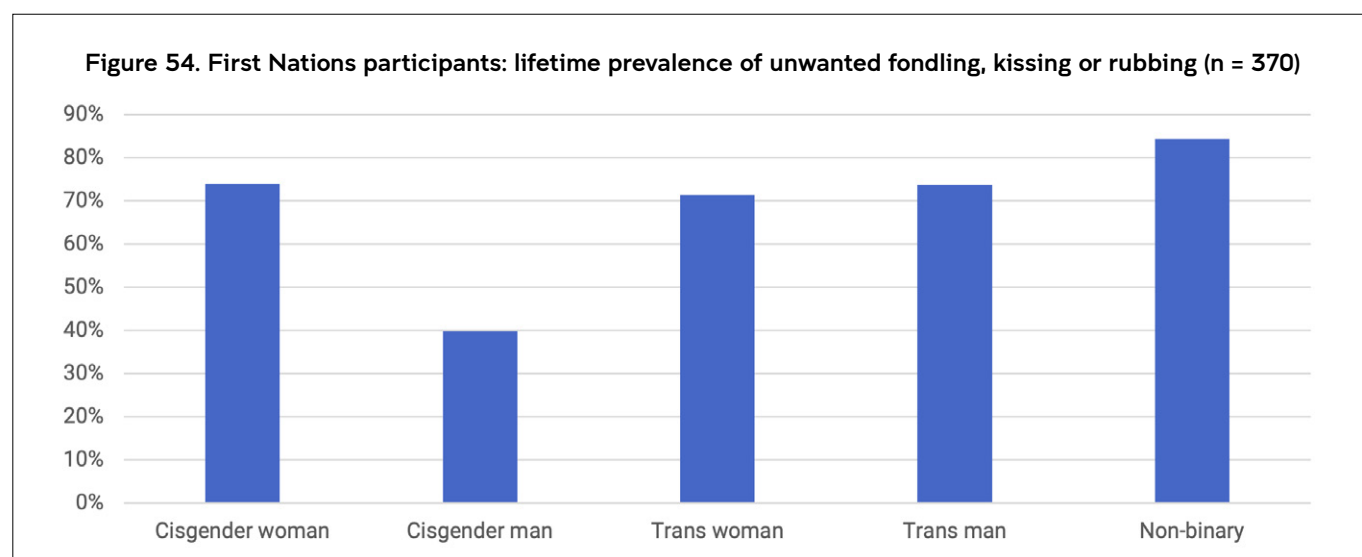
In open-text responses, the 3 most common themes were that the unwanted fondling, kissing or rubbing was perpetrated by a family member or family friend (n = 35), perpetrated by a friend, date or partner (n = 24), or that the incident occurred when the participant was intoxicated (n = 23). These open-text responses included statements such as:

- > "My brother sexually abused me for 12 months when I was 13 - he was 2 years older than me."
- > "My partner did it at an uncomfortable time without asking for consent, and I was extremely uncomfortable with it."
- > "Getting me purposely drunk so I couldn't push back."

Table 50. First Nations participants: someone fondled, kissed, or rubbed up against private areas of body (n = 370)

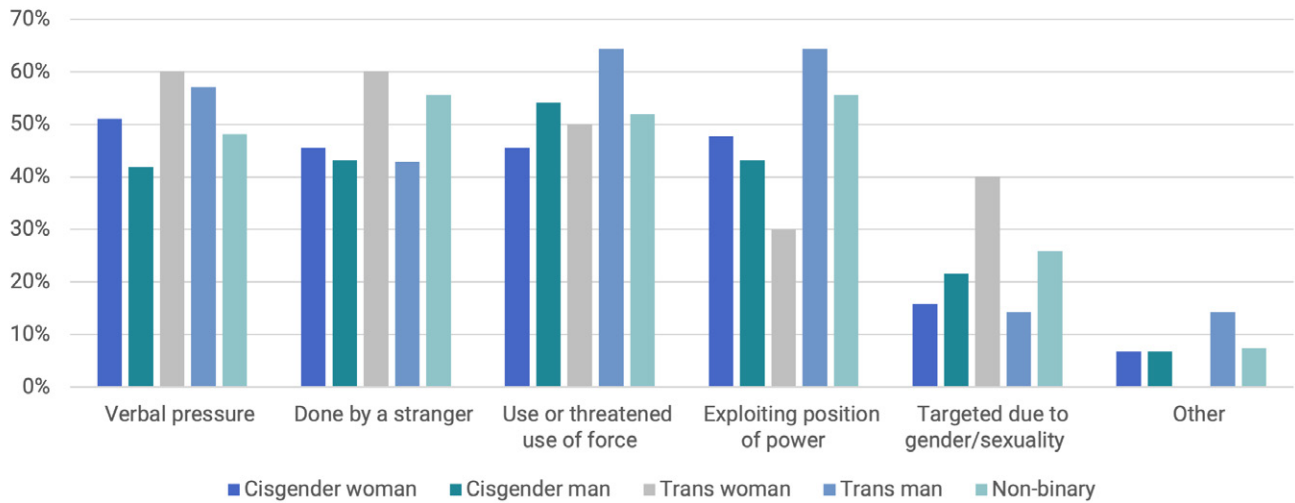
	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 119	n = 186	n = 14	n = 19	n = 32	
Lifetime prevalence	88 (73.9%) ^b	74 (39.8%) ^{ade}	10 (71.4%)	14 (73.7%) ^b	27 (84.4%) ^b	49.69, p < .001
Lifetime frequency mean (sd)	7.08 (5.89)	9.15 (5.57)	5.00 (4.43)	6.89 (4.01)	9.53 (5.90)	1.83, p = .13
Past-year prevalence	42 (47.2%)	58 (30.1%)	6 (42.9%)	8 (50.0%)	9 (32.1%)	9.60, p = .048
Past-year frequency mean (sd)	4.07 (4.46)	6.48 (4.99)	4.50 (4.28)	5.50 (4.93)	5.00 (3.28)	1.70, p = .16
Mean (sd) age at first occurrence	12.57 (6.53) ^b	16.22 (6.19) ^a	12.80 (9.30)	11.36 (7.27)	12.41 (4.38)	4.46, p = .005
Incident context						
Verbal pressure	45 (51.1%)	31 (41.9%)	6 (60.0%)	8 (57.1%)	13 (48.1%)	2.49, p = .65
Done by a stranger	40 (45.5%)	32 (43.2%)	6 (60.0%)	6 (42.9%)	15 (55.6%)	2.05, p = .73
Use or threatened use of force	40 (45.5%)	40 (54.1%)	5 (50.0%)	9 (64.3%)	14 (51.9%)	2.35, p = .67
Exploiting position of power	42 (47.7%)	32 (43.2%)	3 (30.0%)	9 (64.3%)	15 (55.6%)	4.05, p = .40
Targeted due to gender or sexuality	14 (15.9%)	16 (21.6%)	4 (40.0%)	2 (14.3%)	7 (25.9%)	4.39, p = .36

The experience of unwanted kissing or touching was common for First Nations participants, although the reporting varied from 39.8% for cisgender men to 84.4% for non-binary people. Cisgender men reported a significantly lower lifetime prevalence compared to cisgender women and trans men. Such experiences were reported five or more times for 61.4% of participants who experienced it. One third of cis men and non-binary people reported unwanted kissing or touching in the last year, compared to higher rates for trans women (42.9%), cisgender women (47.2%) and half of trans men (50%). Mean age at first occurrence was under 18 for all categories, ranging from 11.36 years old for trans men to 16.22 years old for cis men.



The circumstances of such victimisation varied across the sample. Verbal pressure, perpetration by strangers and use of force and threats were commonly reported, followed by being targeted on the basis of gender or sexuality, which was particularly elevated for trans women.

Figure 55. First Nations participants: circumstances in which unwanted fondling, kissing or rubbing occurred (n = 370)



The most common themes provided by First Nations participants in open-text responses pertained to violence by a family member or family friend (n = 6), violence at school (n = 2), followed by descriptions of violence in the workplace (n = 1) or by a friend (n = 1).

- > "I was a kid it was the guy who lived behind us."
- > "Two boys in my grade made some comments and grabbed my ass as they ran past me in a cross-country race. I reported it but nothing was ever done."
- > "Was a friend that did it out of nowhere and it made me uncomfortable."

d. Oral rape

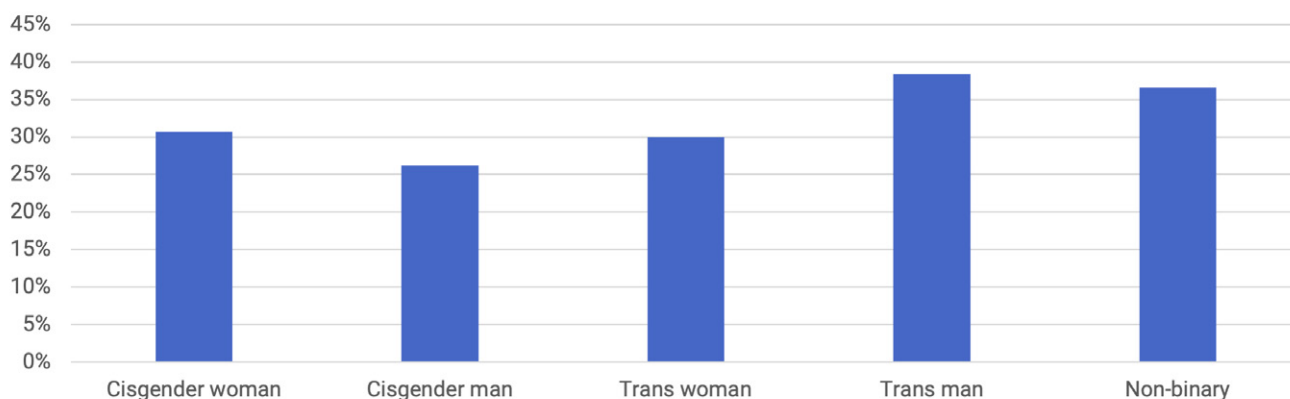
Table 51. All participants: someone had oral sex with me or made me have oral sex against my will (n = 2,791)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 1,171	n = 860	n = 120	n = 151	n = 489	
Lifetime prevalence	360 (30.7%)	225 (26.2%) ^{de}	36 (30.0%)	58 (38.4%) ^b	179 (36.6%) ^b	20.57, p < .001
Lifetime frequency mean (sd)	4.80 (4.48)	5.88 (4.86) ^e	4.71 (5.04)	4.30 (4.18)	4.16 (3.88) ^b	3.29, p = .01
Past-year prevalence	90 (8.5%)	84 (9.8%)	13 (11.2%)	14 (10.4%)	34 (7.7%)	2.82, p = .59
Past-year frequency mean (sd)	3.89 (4.41) ^b	5.85 (4.87) ^{ae}	4.38 (3.86)	3.57 (4.26)	2.44 (2.29) ^b	6.52, p = .001
Mean (sd) age at first occurrence	15.99 (7.45)	16.78 (7.89)	16.67 (9.14)	13.95 (5.47)	16.16 (5.84)	2.59, p = .04
Incident context						
Verbal pressure	227 (63.1%) ^b	94 (41.8%) ^{ade}	19 (52.8%)	39 (67.2%) ^b	119 (66.5%) ^b	35.81, p < .001
Use or threatened use of force	194 (53.9%)	108 (48.0%)	17 (47.2%)	32 (55.2%)	85 (47.5%)	3.50, p = .48
Exploiting position of power	181 (50.3%)	121 (53.8%)	18 (50.0%)	26 (44.8%)	89 (49.7%)	1.75, p = .78
Targeted due to gender/sexuality	54 (15.0%) ^c	47 (20.9%)	13 (36.1%) ^{ae}	12 (20.7%)	27 (15.1%) ^c	12.86, p = .01

Lifetime prevalence of oral rape ranged from just over one-quarter for cisgender men (26.2%) to 38.4% for trans men. Trans men and non-binary people were significantly more likely to report oral rape compared to cisgender men. For those reporting oral rape, 38.8% had it occur five or more times. Past-year prevalence was between 8.5% for cisgender women to

11.2% for trans women. Cisgender men reported a significantly higher past-year frequency mean compared to cisgender women and non-binary people. Mean age at first occurrence was under 18 across all categories, ranging from between 13.95 for trans men to 16.78 for cisgender men.

Figure 56. All participants: lifetime prevalence of oral rape (n = 2,791)



Verbal pressure was the most common oral rape scenario for cisgender women (63.1%), trans men (67.2%) and non-binary people (66.5%), followed by use or threats of force and exploitation of positions of power. Cisgender men were significantly less likely to describe verbal pressure as a context for oral rape in comparison to cisgender women, trans men and non-binary people.

Trans women reported verbal pressure, use of force or threats and exploitation of power at roughly equal rates (47.2%-52.8%), whereas cisgender men were most likely to report exploitation of power (52.8%) followed by use of force or threat (48%) and verbal pressure (41.8%) respectively. Trans women were particularly likely to report oral rape in the context of being targeted due to their gender identity and/or sexual orientation (36.1%). They were significantly more likely to report being targeted due to gender identity and/or sexuality compared to cisgender women or non-binary people.

Figure 57. All participants: circumstances of oral rape (n = 2,791)

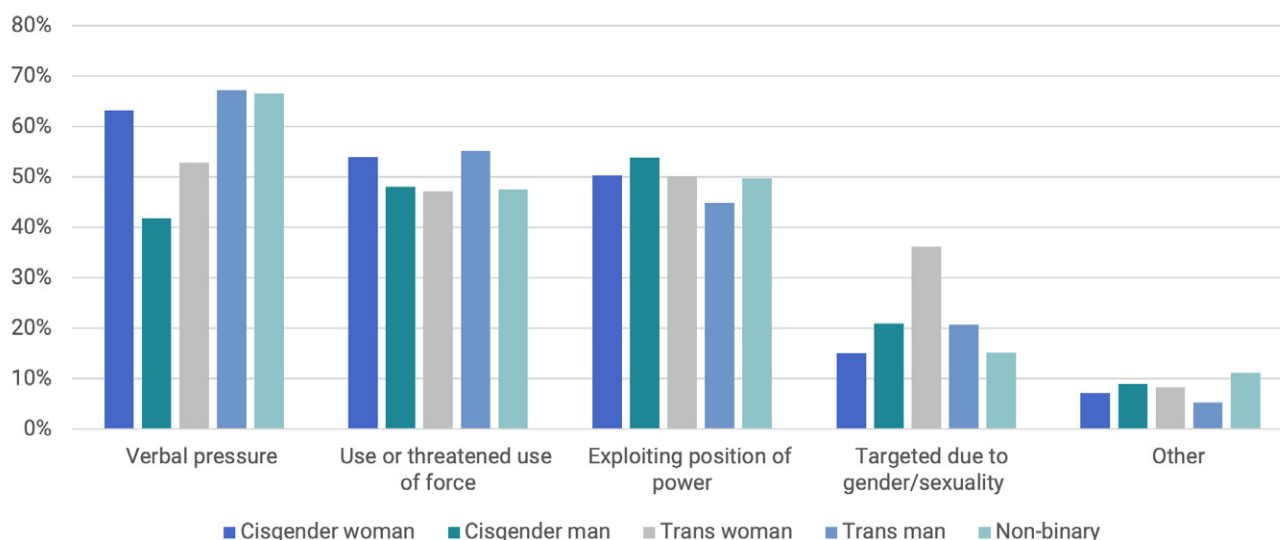


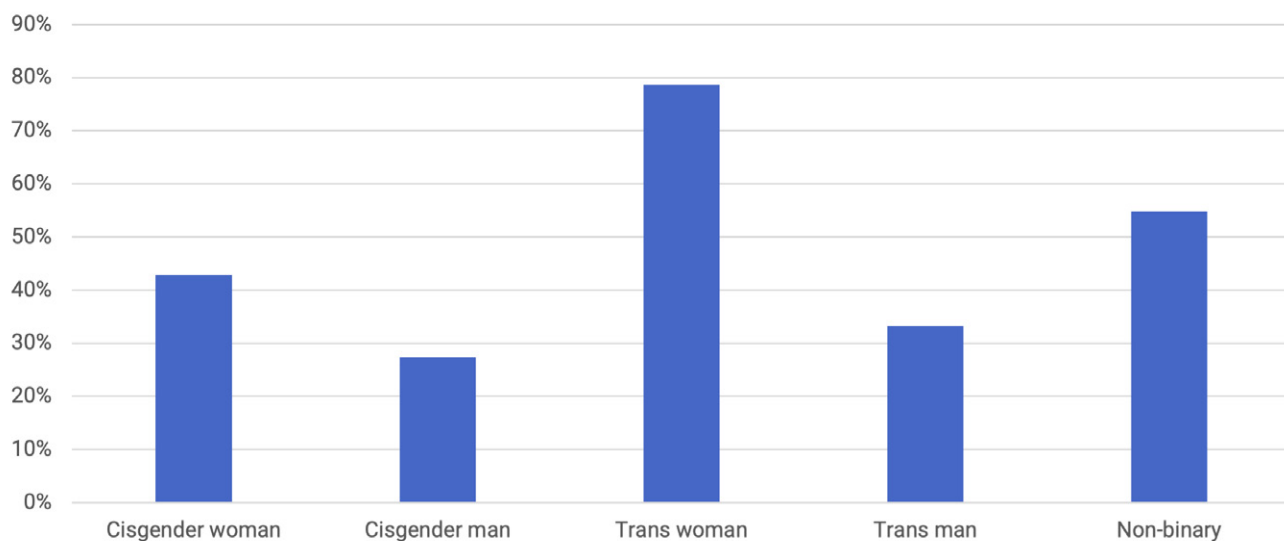
Table 52. First Nations participants: someone had oral sex with me or made me have oral sex against my will (n = 368)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 119	n = 186	n = 14	n = 18	n = 31	
Lifetime prevalence	51 (42.9%)	51 (27.4%) ^{ce}	11 (78.6%) ^b	6 (33.3%)	17 (54.8%) ^b	23.80, p < .001
Lifetime frequency mean (sd)	6.03 (5.02) ^b	9.48 (5.01) ^a	5.54 (5.87)	2.38 (0.93)	5.33 (4.52)	4.30, p = .003
Past-year prevalence	13 (13.7%) ^c	34 (17.8%) ^c	7 (53.8%) ^{ab}	3 (15.8%)	7 (21.9%)	12.73, p = .01
Past-year frequency mean (sd)	4.00 (5.51)	8.41 (5.01)	5.29 (4.92)	4.67 (4.04)	3.43 (3.82)	2.95, p = .03
Mean (sd) age at first occurrence	14.14 (7.30)	15.25 (6.22)	16.82 (11.82)	13.33 (5.75)	15.06 (6.38)	0.44, p = .78
Incident context						
Verbal pressure	31 (60.8%)	26 (51.0%)	5 (45.5%)	4 (66.7%)	12 (70.6%)	3.16, p = .53
Use or threatened use of force	32 (62.7%)	30 (58.8%)	8 (72.7%)	6 (100.0%)	8 (47.1%)	6.04, p = .20
Exploiting position of power	30 (58.8%)	29 (56.9%)	6 (54.5%)	2 (33.3%)	7 (41.2%)	2.80, p = .59
Targeted due to gender or sexuality	10 (19.6%)	13 (25.5%)	4 (36.4%)	1 (16.7%)	2 (11.8%)	n/a

Oral rape was reported by over three-quarters of First Nations trans women (78.6%), over half of non-binary people (54.8%), 42.9% of cisgender women, one third of trans men and over a quarter (27.4%) of cisgender men. Cisgender men reported significantly lower lifetime prevalence of oral rape compared to trans women and non-binary people. More than half (61.6%) of those who experienced oral rape reported that it occurred five or more times, and cisgender men reported a significantly

higher lifetime frequency mean compared to cisgender women. Past-year prevalence for trans women was high with over half (53.8%) reporting oral rape in the last 12 months, which was significantly higher than for cisgender women or men. Mean age at first occurrence was under 18 across the First Nations sample, from 13.33 years old for trans men up to 16.82 for trans women.

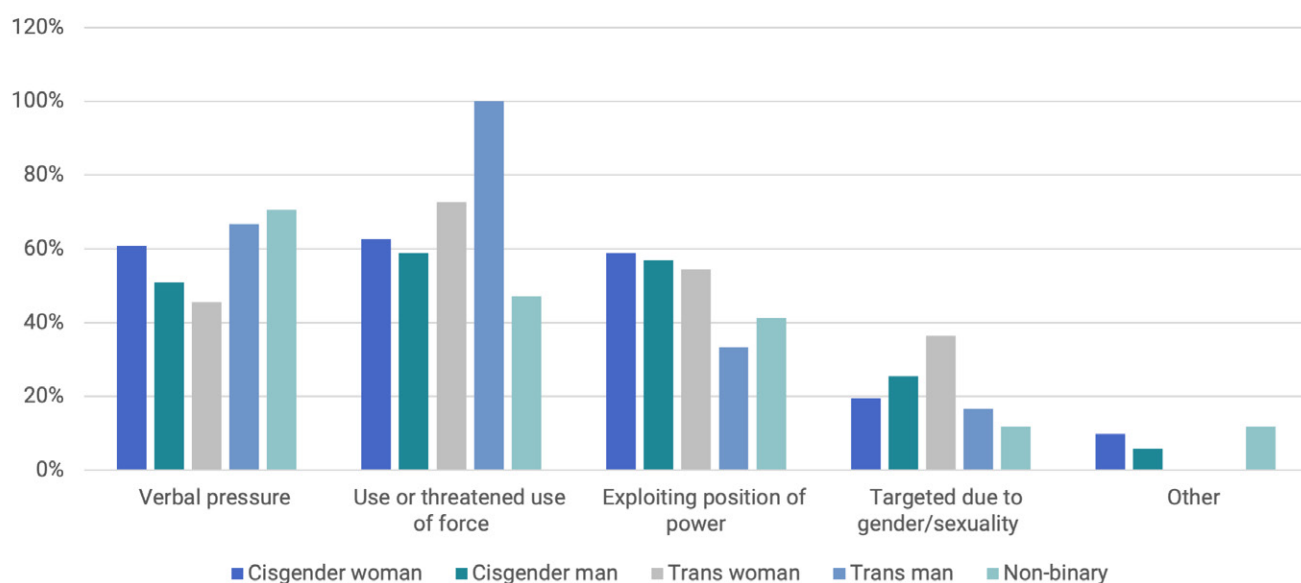
Figure 58. First Nations participants: lifetime prevalence of oral rape (n = 368)



Use of force or threat was the most common circumstance of oral rape reported by all categories of participants except non-binary people, for whom verbal pressure was most common (70.6%). Verbal pressure was also frequently reported across

the sample alongside exploitation of power. Being targeted due to gender and sexuality was the least commonly reported context for oral rape but was elevated for trans women (36.4%).

Figure 59. First Nations participants: circumstances of attempted oral rape (n = 368)



e. Attempted oral rape

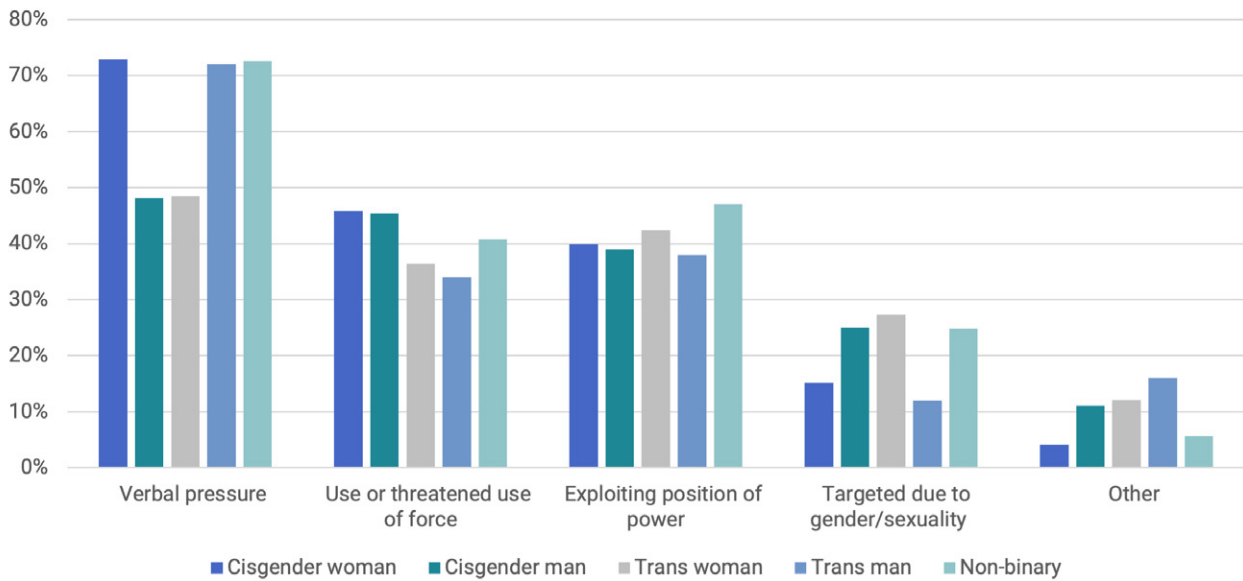
Table 53. All participants: someone tried to have oral sex with me or make me have oral sex against my will (n = 2,765)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,155	n = 866	n = 122	n = 148	n = 474	
Lifetime prevalence	343 (29.7%)	216 (25.5%) ^e	33 (28.0%)	50 (33.8%)	157 (33.1%) ^b	10.77, p = .03
Lifetime frequency mean (sd)	4.50 (3.90)	5.47 (4.86)	4.10 (3.62)	4.05 (3.87)	4.31 (3.72)	1.98, p = .10
Past-year prevalence	73 (6.9%)	89 (10.3%)	16 (13.1%)	17 (11.6%)	29 (6.4%)	14.59, p = .006
Past-year frequency mean (sd)	3.05 (3.43)	4.18 (3.98)	3.31 (4.59)	2.94 (2.73)	2.93 (2.84)	1.31, p = .28
Mean (sd) age at first occurrence	16.65 (6.51) ^b	19.69 (7.91) ^{ade}	19.00 (9.03) ^d	14.04 (6.08) ^{bc}	16.12 (5.26) ^b	10.71, p < .001
Incident context						
Verbal pressure	250 (72.9%) ^{bc}	104 (48.1%) ^{ade}	16 (48.5%) ^a	36 (72.0%) ^b	114 (72.6%) ^b	45.42, p < .001
Use or threatened use of force	157 (45.8%)	98 (45.4%)	12 (36.4%)	17 (34.0%)	63 (40.8%)	4.02, p = .40
Exploiting position of power	137 (39.9%)	84 (38.9%)	14 (42.4%)	19 (38.0%)	74 (47.1%)	3.21, p = .52
Targeted due to gender/sexuality	52 (15.2%) ^b	54 (25.0%) ^a	9 (27.3%)	6 (12.0%)	39 (24.8%)	13.77, p = .008

Lifetime prevalence for attempted oral rape was between a quarter for cisgender men (25.5%) to one third for trans men (33.8%) and non-binary people (33.1%). Non-binary people reported significantly higher lifetime prevalence of attempted oral rape compared to cisgender men. This form of victimisation was experienced five or more times by 37.9% of those who experienced it. Past-year prevalence was highest for trans women (13.1%) followed by trans men (11.6%), cisgender

men (10.3%) and then cisgender women (6.9%) and non-binary people (6.4%). Mean age at first occurrence was under 18 for trans men (14.08), non-binary people (16.12) and cisgender women (16.65) and over 18 for trans women (19) and cisgender men (19.69). Mean age at first occurrence was significantly higher for cisgender men compared to cisgender women, trans men and non-binary people, and significantly higher for trans women compared to non-binary people.

Figure 60. All participants: context of attempted oral rape (n = 2,765)



Verbal pressure was consistently identified across the sample as the most common context for attempted oral rape, albeit at different levels, ranging from 48.1% for cisgender men to 72.9% for cisgender women. Cisgender women, trans men and non-binary people were significantly more likely to report verbal pressure as a context for attempted oral rape compared to cisgender men. Trans women were significantly less likely to report verbal pressure as a context for attempted oral rape compared to cisgender women.

Contexts of use of force or threat ranged from 34% for trans men to 45.8% for cisgender women, and reports of exploitation of power ranged from 38% for trans men to 47.1% for non-binary people. Attempted oral rape in the context of being targeted on the basis of gender or sexuality was reported by approximately one-quarter of cisgender men (25%), trans

women (27.3%) and non-binary people (24.8%), and by 15.2% of cisgender women and 12% of trans men. Cisgender men were significantly more likely to report attempted oral rape due to being targeted for their gender or sexuality compared to cisgender women.

In open-text responses, the most common themes described by participants relating to attempted oral rape were manipulation, force or threats of violence (n = 16), attempted oral rape while intoxicated or drunk (n = 7), or at an LGBTIQA+ venue (n = 7).

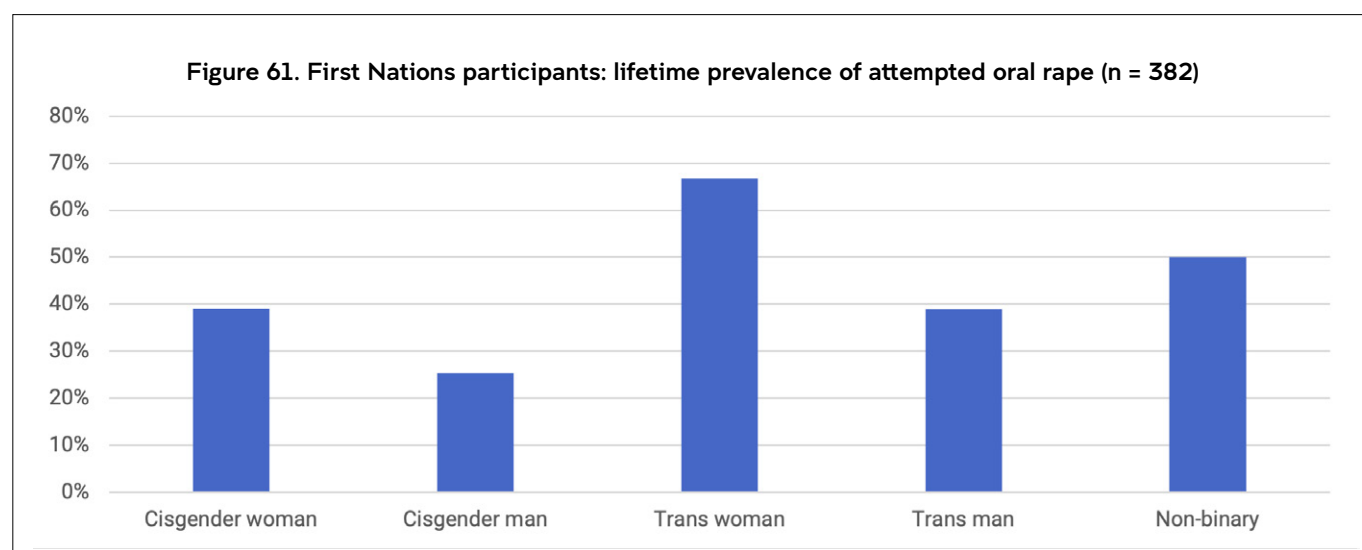
- > "Pressure to let them engage with me sexually when I didn't want to."
- > "Trying to take advantage while I was drunk."
- > "At SOPV attempting it against my explicit request not to."

Table 54. First Nations participants: someone tried to have oral sex with me or make me have oral sex against my will (n = 382)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 118	n = 194	n = 16	n = 19	n = 35	
Lifetime prevalence	46 (39.0%)	47 (25.4%) ^c	8 (66.7%) ^b	7 (38.9%)	15 (50.0%)	16.74, p = .002
Lifetime frequency mean (sd)	6.00 (5.81)	7.19 (4.89)	6.50 (4.55)	4.67 (3.56)	4.63 (3.53)	0.82, p = .52
Past-year prevalence	10 (10.3%) ^c	34 (17.5%)	7 (43.8%) ^a	4 (21.1%)	7 (20.0%)	11.57, p = .02
Past-year frequency mean (sd)	3.50 (5.89)	5.82 (4.44)	6.14 (5.98)	4.25 (3.30)	3.43 (1.81)	0.85, p = .50
Mean (sd) age at first occurrence	14.33 (6.50)	18.02 (5.93) ^d	21.25 (8.53) ^d	8.86 (5.08) ^{bc}	13.67 (6.31)	6.07, p < .001
Incident context						
Verbal pressure	34 (73.9%)	24 (51.1%)	6 (75.0%)	5 (71.4%)	7 (46.7%)	n/a
Use or threatened use of force	24 (52.2%)	29 (61.7%)	3 (37.5%)	6 (85.7%)	6 (40.0%)	n/a
Exploiting position of power	26 (56.5%)	22 (46.8%)	4 (50.0%)	3 (42.9%)	5 (33.3%)	n/a
Targeted due to gender/sexuality	12 (26.1%)	11 (23.4%)	1 (12.5%)	0	4 (26.7%)	n/a

Just as oral rape was comparatively high for First Nations trans women, so was attempted oral rape, which was reported by two-thirds of this group (66.7%). Attempted oral rape was reported by half (50%) of non-binary people, by just under 40% cisgender women (39%) and trans men (38.9%) and by one-quarter (25.4%) of cisgender men. Slightly more than half (54.5%) of those who experienced attempted oral rape reported that it had occurred five or more times. Trans women reported a

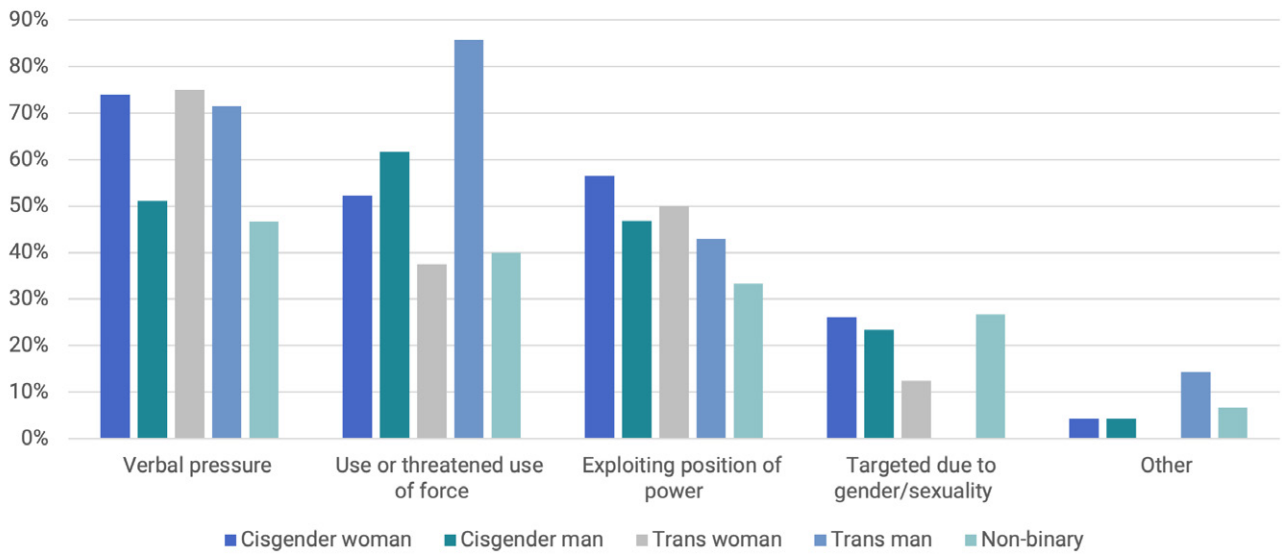
relatively high rate of past-year victimisation at 43.8% compared to approximately one-in-five cisgender men, trans men and non-binary people, and 10.3% of cis women. Mean age at first occurrence was under 18 for cisgender women, trans men and non-binary people, with trans men reporting a particularly low mean age at 8.86 years old. Cisgender men and trans women reported a mean age at first occurrence of 18.02 and 21.25 years old respectively.



Verbal pressure, use or threat of force and exploitation of positions of power were the 3 most common contexts in for attempted oral rape. Eighty five point seven percent of trans

men who experienced attempted oral rape reported use of threat or force. This was also the most common context of attempted oral rape for cisgender men (61.7%).

Figure 62. First Nations participants: Context of attempted oral rape (n = 382)



In open-text responses, First Nations respondents identified a number of scenarios of attempted oral rape, including:

> their workplace ("in my workplace at the time")

> at school ("classmate at young age")

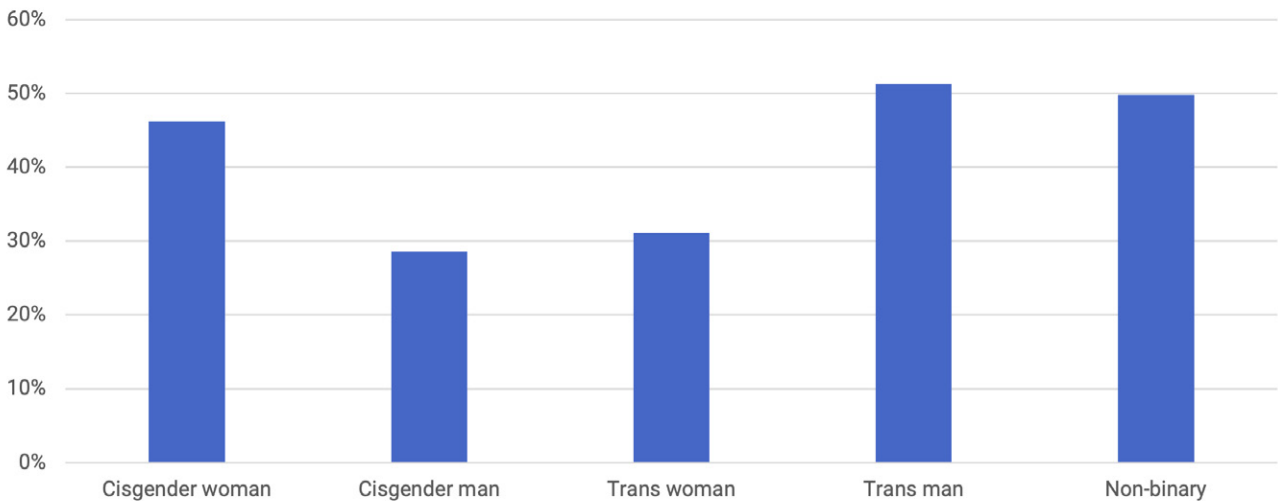
> while asleep ("Once when I was asleep and I woke up to stop it in time").

f. Vaginal or anal rape

Table 55. All participants: someone put their fingers, penis, or objects inside my vagina or anus against my will (n = 2,767)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	x ² / F
	n = 1,165	n = 853	n = 119	n = 150	n = 480	
Lifetime prevalence	538 (46.2%) ^{bc}	244 (28.6%) ^{ade}	37 (31.1%) ^{ade}	77 (51.3%) ^{bc}	239 (49.8%) ^{bc}	93.87, p < .001
Lifetime frequency mean (sd)	4.27 (4.49)	4.62 (4.35)	4.66 (5.23)	4.62 (4.48)	3.76 (3.66)	1.36, p = .25
Past-year prevalence	90 (10.3%)	86 (10.3%)	11 (9.7%)	14 (12.1%)	32 (8.6%)	1.60, p = .81
Past-year frequency mean (sd)	3.29 (4.04)	5.06 (4.89) ^e	3.18 (3.92)	4.64 (4.75)	2.41 (2.23) ^b	4.13, p = .006
Mean (sd) age at first occurrence	15.51 (7.45) ^{ac}	18.90 (8.90) ^{ade}	19.23 (12.12) ^{ad}	13.46 (7.05) ^{bc}	15.85 (6.72) ^b	10.11, p < .001
Incident context						
Verbal pressure	300 (55.8%) ^b	93 (38.1%) ^{ade}	16 (43.2%)	46 (59.7%) ^b	142 (59.4%) ^b	30.02, p < .001
Use or threatened use of force	274 (50.9%)	140 (57.4%)	20 (54.1%)	44 (57.1%)	126 (52.7%)	3.34, p = .50
Exploiting position of power	263 (48.9%)	117 (48.0%)	20 (54.1%)	35 (45.5%)	122 (51.0%)	1.27, p = .87
Targeted due to gender/sexuality	63 (11.7%) ^b	48 (19.7%) ^a	9 (24.3%)	15 (19.5%)	41 (17.2%)	12.77, p = .01

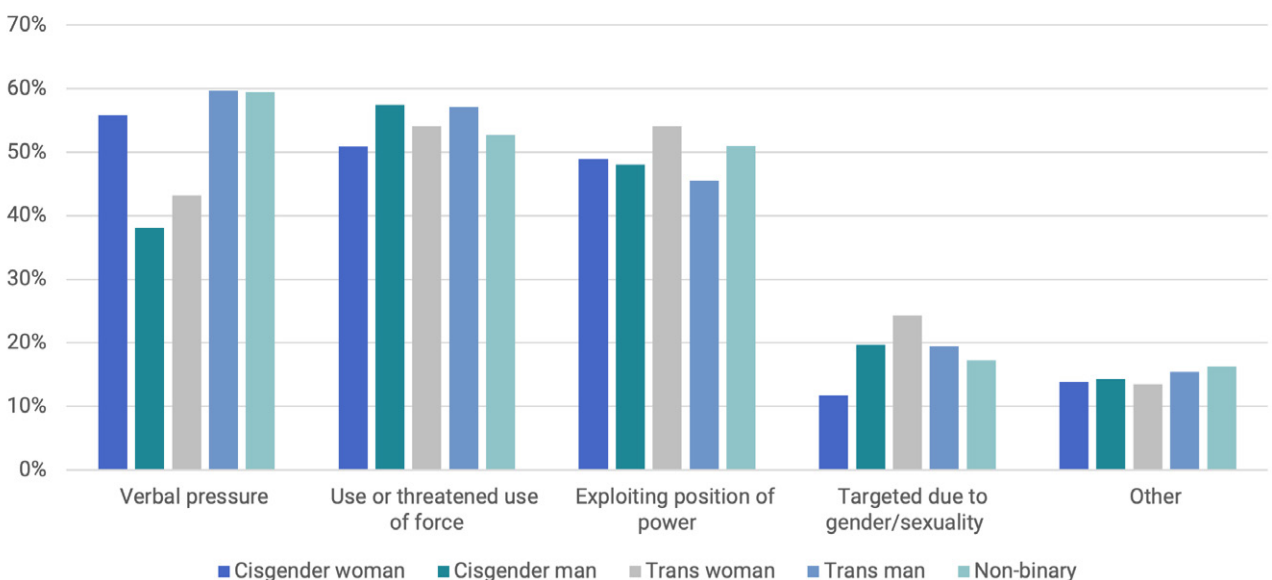
Figure 63. All participants: lifetime prevalence of vaginal or anal rape (n = 2,767)



Significantly fewer cisgender men (28.6%) and trans women (31.1%) ever experienced vaginal or anal rape compared to cisgender women (46.2%), trans men (51.3%), and non-binary people (49.8%). Almost one-in-three (30.7%) of those who were ever raped reported that this had happened five times or more. Past-year prevalence ranged between 8.6%-12.1%, with trans men reporting the highest rates of recent victimisation. Mean

age at first occurrence was below 18 for trans men (13.46), non-binary people (15.85) and cisgender women (15.51), and over 18 for cisgender men (18.9) and trans women (19.23). Mean age at first occurrence for cisgender men was significantly older compared to cisgender women, trans men and non-binary people, and mean age at first occurrence was significantly older for trans women compared to cisgender women and trans men.

Figure 64. All participants: context of vaginal or anal rape (n = 2,767)



For cisgender women, trans men and non-binary people, verbal pressure was the most common context for vaginal or anal rape, followed by use or threats of force and exploiting positions of power. Cisgender men were significantly less likely to describe rape in the context of verbal pressure compared to cisgender women, trans men and non-binary people.

Use or threats of force was the most common context of anal rape for cisgender men (57.4%) followed by exploitation of power (48%). Cisgender men were significantly more likely to report rape in the context of being targeted due to their gender or sexual identity in comparison to cisgender women. Use or threat of force and exploitation of power was reported at equal rates by trans women.

Table 56. First Nations participants: someone put their fingers, penis or objects inside my vagina or anus against my will (n = 365)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ ² / F
	n = 118	n = 186	n = 13	n = 18	n = 30	
Lifetime prevalence	60 (50.8%) ^b	51 (27.4%) ^{ade}	8 (61.5%)	12 (66.7%) ^b	19 (63.3%) ^b	32.24, p < .001
Lifetime frequency mean (sd)	6.67 (6.48)	6.74 (4.88)	5.40 (5.13)	5.11 (4.51)	3.55 (4.32)	0.92, p = .45
Past-year prevalence	13 (15.1%)	31 (16.5%)	4 (30.8%)	4 (28.6%)	4 (13.8%)	3.54, p = .47
Past-year frequency mean (sd)	3.46 (5.17)	6.26 (5.07)	4.50 (6.35)	7.75 (4.03)	2.50 (2.38)	1.30, p = .28
Mean (sd) age at first occurrence	13.18 (7.22)	17.23 (8.92)	18.88 (13.23)	11.08 (8.06)	12.74 (6.51)	3.10, p = .02
Incident context						
Verbal pressure	37 (61.7%)	23 (45.1%)	4 (50.0%)	7 (58.3%)	9 (47.4%)	3.49, p = .48
Use or threatened use of force	41 (68.3%)	23 (45.1%)	5 (62.5%)	9 (75.0%)	10 (52.6%)	7.84, p = .10
Exploiting position of power	38 (63.3%)	26 (51.0%)	4 (50.0%)	8 (66.7%)	9 (47.4%)	3.06, p = .55
Targeted due to gender/sexuality	8 (13.3%)	14 (27.5%)	2 (25.0%)	3 (25.0%)	4 (21.1%)	3.63, p = .46

Vaginal or anal rape was reported by two-thirds of First Nations trans men (66.7%), non-binary people (63.3%) and trans women (61.5%), and half of cisgender women (50.8%). Over one-quarter (27.4%) of cisgender men reported anal rape. Slightly less than half (46.4%) of those who were ever raped reported that this had happened five times or more. Rape during the past 12 months was reported by 30.8% of trans women and 28.6%

of trans men, and between 13.8-16.5% of cisgender women, cisgender men and non-binary people. Mean age at first occurrence was under 18 for all groups except trans women, for whom mean age at first occurrence was 18.88. Cisgender women, trans men and non-binary people all reported a mean age at first occurrence in their early teens, while cisgender men reported a mean age of onset at 17.23 years.

Figure 65. First Nations participants: lifetime prevalence of vaginal or anal rape (n = 365)

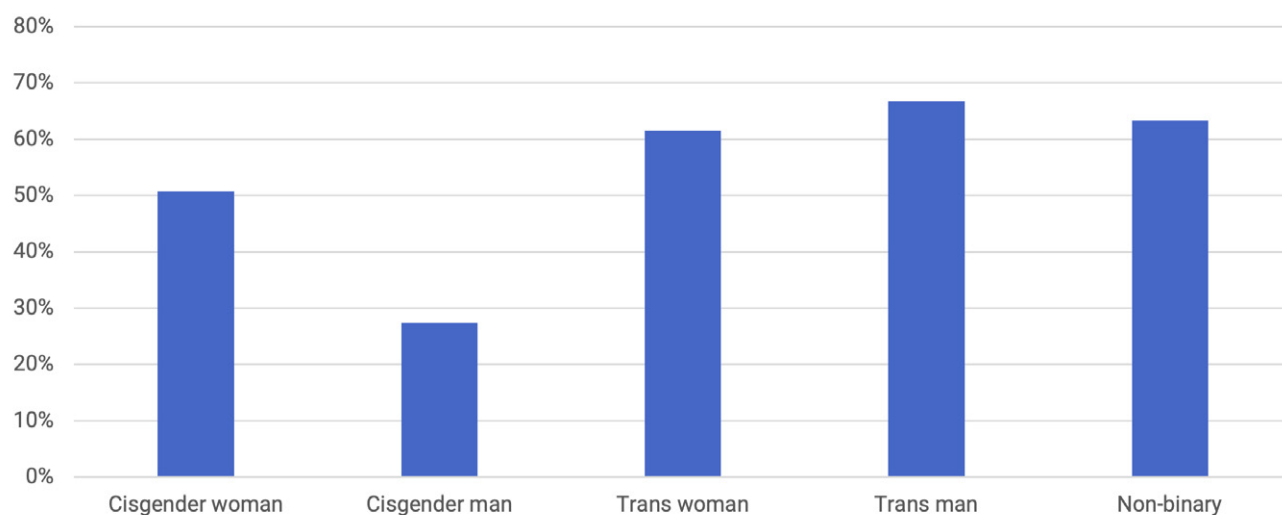
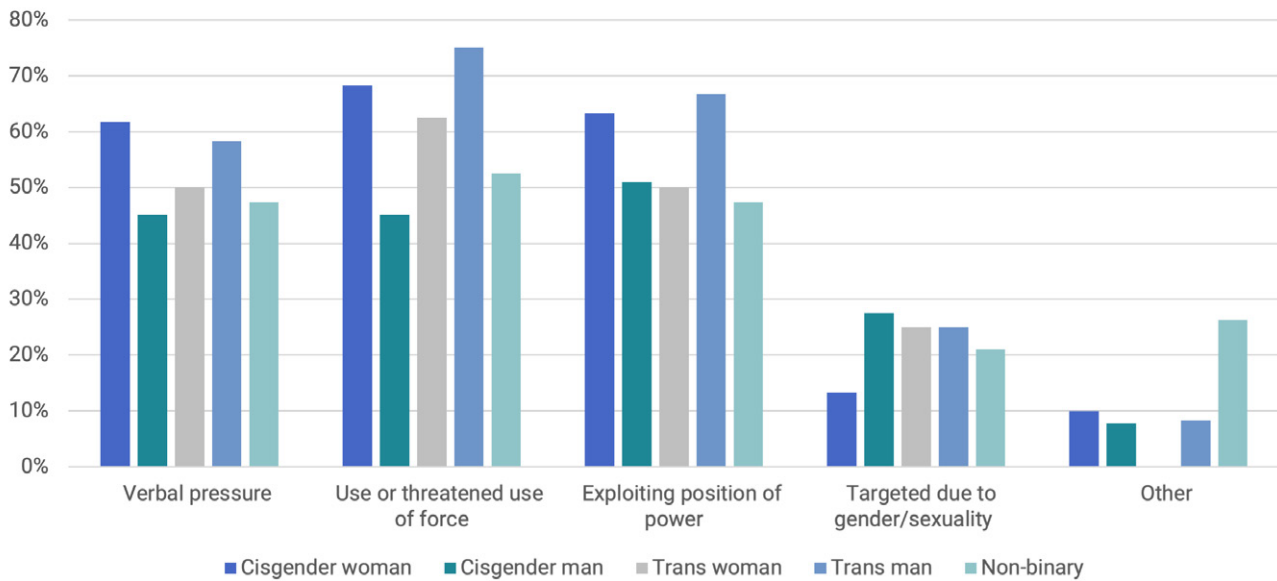


Figure 66. First Nations participants: context of vaginal or anal rape (n = 365)



Most categories of participants except cisgender men reported that the use of threatened use or force was the most common context for vaginal or anal rape, followed by exploitation of a position of power and verbal pressure. Cisgender men reported

exploitation of a position of power as a slightly more common context for anal rape compared to verbal pressure and use or threatened use of force.

g. Attempted vaginal or anal rape

Table 57. All participants: someone tried to put their fingers, penis, or objects inside my vagina or anus against my will (n = 2,727)

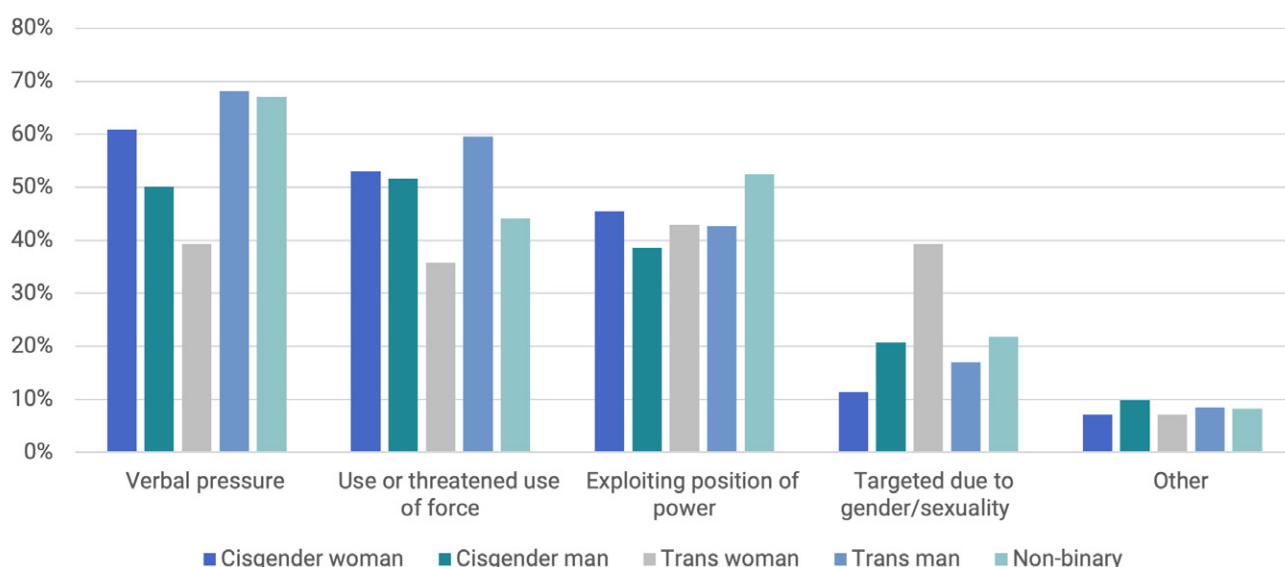
	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,152	n = 838	n = 118	n = 148	n = 471	
Lifetime prevalence	396 (34.4%) ^b	184 (22.0%) ^{ae}	28 (23.7%)	47 (31.8%)	170 (36.1%) ^b	46.76, p < .001
Lifetime frequency mean (sd)	4.49 (4.12) ^b	5.86 (4.97) ^a	4.10 (4.02)	4.10 (4.36)	4.42 (4.13)	2.76, p = .03
Past-year prevalence	77 (7.7%)	84 (9.4%)	12 (9.5%)	12 (8.3%)	28 (6.3%)	4.46, p = .35
Past-year frequency mean (sd)	3.39 (4.20)	4.83 (4.34)	6.00 (6.25)	3.25 (3.25)	2.82 (2.61)	2.66, p = .046
Mean (sd) age at first occurrence	15.80 (6.06) ^b	20.11 (7.96) ^{ade}	18.96 (12.16) ^d	13.85 (7.26) ^{bc}	15.93 (5.96) ^b	12.64, p < .001
Incident context						
Verbal pressure	241 (60.9%)	92 (50.0%) ^e	11 (39.3%) ^e	32 (68.1%)	114 (67.1%) ^{bc}	17.39, p = .002
Use or threatened use of force	210 (53.0%)	95 (51.6%)	10 (35.7%)	28 (59.6%)	75 (44.1%)	7.87, p = .10
Exploiting position of power	180 (45.5%)	71 (38.6%)	12 (42.9%)	20 (42.6%)	89 (52.4%)	6.97, p = .14
Targeted due to gender/sexuality	45 (11.4%) ^{bce}	38 (20.7%) ^a	11 (39.3%) ^a	8 (17.0%)	37 (21.8%) ^a	23.40, p < .001

Prevalence of attempted vaginal or anal rape ranged from 22% for cisgender men to 36.1% for non-binary people. Lifetime prevalence of attempted rape was significantly lower amongst cisgender men compared to cisgender women and non-binary people. One-third (36.8%) of people who experienced attempted rape indicated that this had happened five or more times. Trans women and cisgender men reported the highest proportions of attempted vaginal or anal rape in the last year (9.5% and 9.4% respectively), followed by trans men (8.3%), cisgender women (7.7%) and non-binary people (6.3%). Mean age at first occurrence was under 18 for trans men (13.85), non-binary people (15.93) and cisgender women (15.8), and over 18 for trans women (18.96) and cisgender men (20.11). Mean age at

first occurrence was significantly older for cisgender men than cisgender women, trans men, and non-binary people.

Verbal pressure as a context for attempted anal or vaginal rape was reported at significantly higher rates by non-binary people compared to cisgender men or trans men. Cisgender women were significantly less likely to report attempted rape due to being targeted for their gender or sexuality in comparison to cisgender men, trans men and trans women. Non-binary people were more likely to report being targeted for attempted anal or vaginal rape due to their gender or sexuality compared to cisgender women.

Figure 67. All participants: context of attempted vaginal or anal rape (n = 2,790)



In open-text response, the most common themes were attempted vaginal or anal rape in the context of an intimate relationship (n = 16), when the participant was drugged or intoxicated (n = 13), or at a club, party or sex on premises venue (n = 10). Responses included:

- > *"I would wake to find him rubbing himself on me, pre-ejaculating on me, pulling down my underpants, and sometimes I'd be able to get him to stop by moving away, pulling up my underwear, saying I was tired, or moving to another room."*
- > *"Taking advantage while drunk."*
- > *"Wearing a jockstrap in a club and a stranger tried to get in there without any consent."*

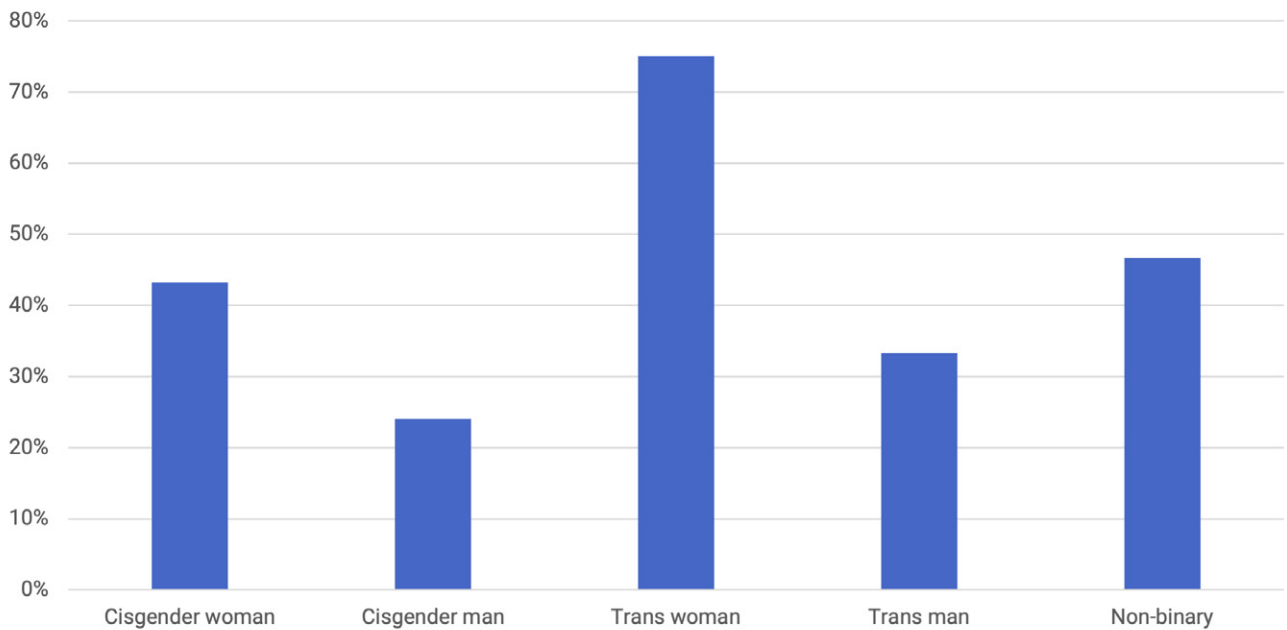
Table 58. First Nations participants: someone tried to put their fingers, penis or objects inside my vagina or anus against my will (n = 361)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 118	n = 183	n = 12	n = 18	n = 30	
Lifetime prevalence	51 (43.2%) ^b	44 (24.0%) ^{ac}	9 (75.0%) ^b	6 (33.3%)	14 (46.7%)	23.56, p < .001
Lifetime frequency mean (sd)	6.23 (5.98)	7.75 (5.11)	6.50 (5.89)	6.00 (4.36)	6.00 (4.14)	0.48, p = .75
Past-year prevalence	13 (13.5%)	33 (16.6%)	5 (35.7%)	3 (15.8%)	4 (12.1%)	4.88, p = .30
Past-year frequency mean (sd)	5.00 (6.81)	6.79 (4.68)	7.60 (5.98)	5.67 (5.03)	4.25 (1.50)	0.51, p = .73
Mean (sd) age at first occurrence	14.86 (7.60) ^b	19.51 (7.24) ^{ade}	18.75 (13.51)	7.33 (4.03) ^b	12.43 (3.41) ^b	10.47, p < .001
Incident context						
Verbal pressure	33 (64.7%)	21 (47.7%)	5 (55.6%)	5 (83.3%)	8 (57.1%)	4.46, p = .35
Use or threatened use of force	34 (66.7%)	30 (68.2%)	4 (44.4%)	6 (100.0%)	7 (50.0%)	n/a
Exploiting position of power	30 (58.8%)	20 (45.5%)	4 (44.4%)	3 (50.0%)	10 (71.4%)	n/a
Targeted due to gender/sexuality	10 (19.6%)	9 (20.5%)	2 (22.2%)	1 (16.7%)	4 (28.6%)	n/a

Attempted rape was reported by three-quarters (75%) of First Nations trans women, followed by just under half of non-binary people (46.7%), 43% of cisgender women, one-third of trans men (33.3%) and just under one-quarter of cisgender men (24%). Slightly more than half (55.7%) of those who had ever experienced attempted rape reported that this had happened five or more times. Past-year prevalence was high for trans

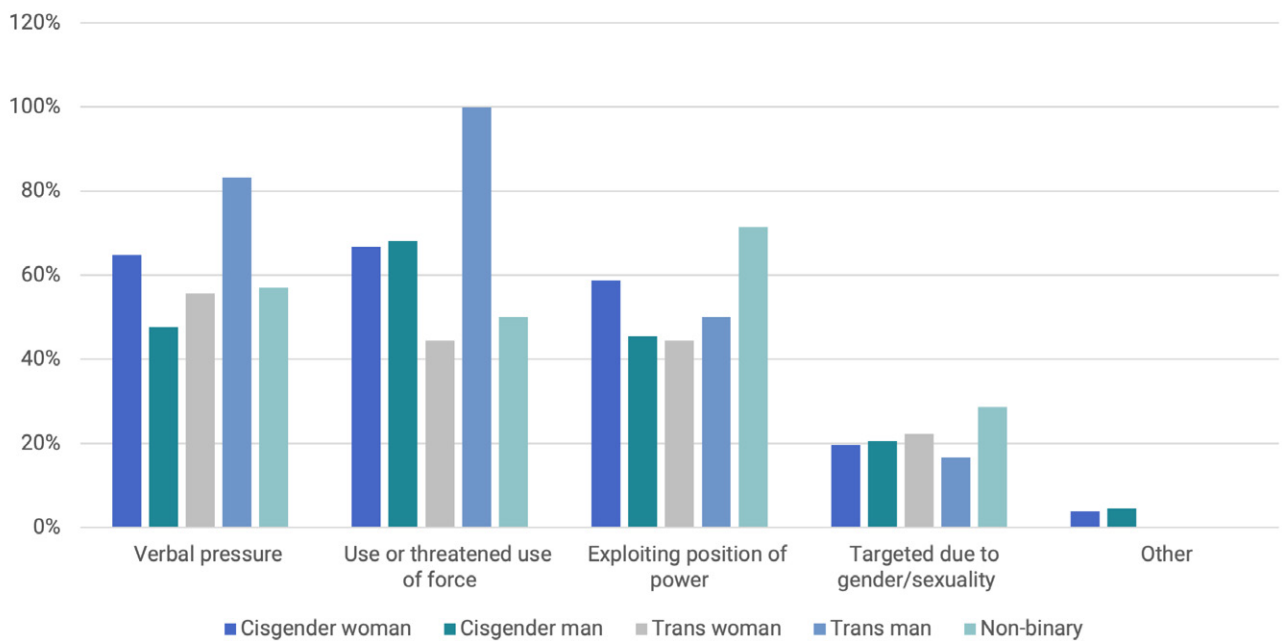
women over one-third (35.7%) reported attempted rape in the previous 12 months, followed by between 12.1%-16.6% of the other participant categories. Mean age at first occurrence was under 18 for cisgender women (14.86 years), trans men (7.33 years) and non-binary people (12.43 years). Mean age at first occurrence was significantly older for cisgender men compared to cisgender women, trans men and non-binary people.

Figure 68. First Nations participants: lifetime prevalence of attempted vaginal or anal rape (n = 383)



All First Nations trans men reporting attempted rape described the use or threat of force, followed by high rates of verbal pressure (83.3%) and exploitation of positions of power (50%). These 3 contexts were also reported at high, although varying, rates by the other 4 participant categories.

Figure 69. First Nations participants: context of attempted vaginal or anal rape (n = 383)



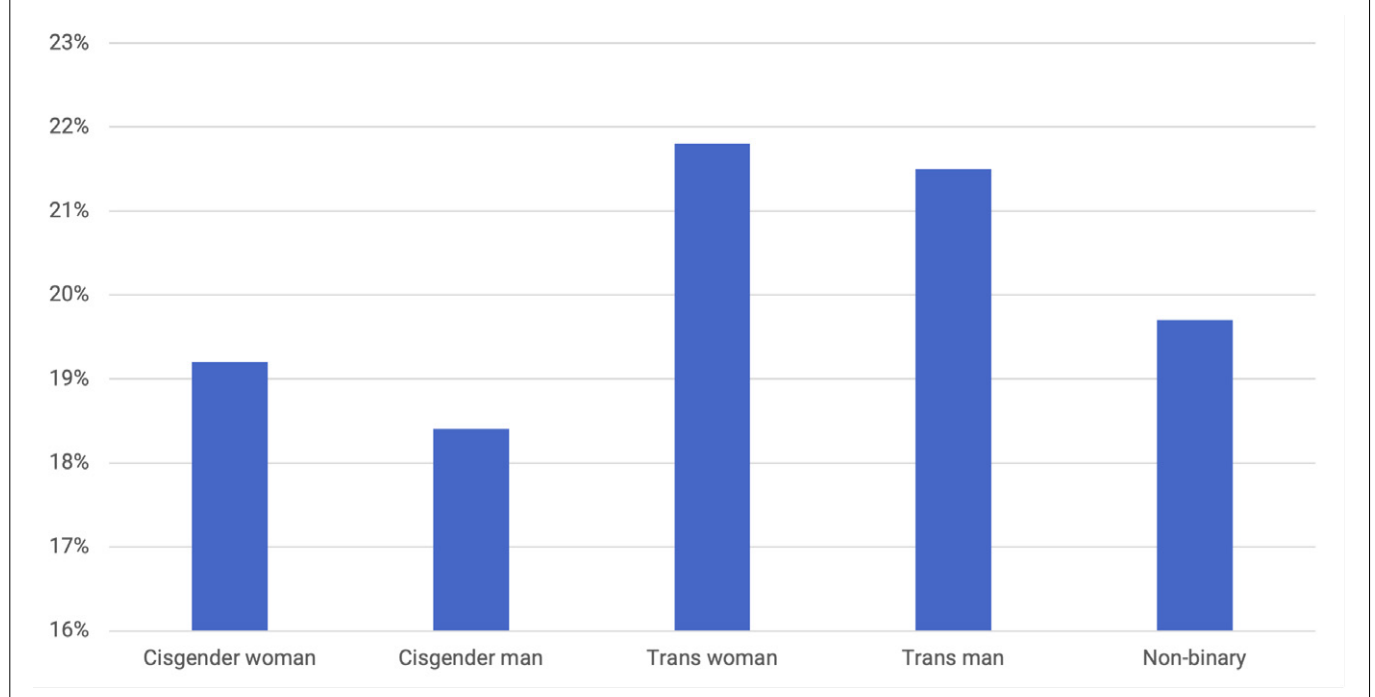
First Nations participants provided some comment in open-text when reporting attempted vaginal or anal rape, including 'family member', 'I was asleep' and 'I was a child'.

h. Non-consensual image or video making

Table 59. All participants: someone took nude or sexual images or videos against my will (n = 2,851)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,162	n = 905	n = 128	n = 154	n = 502	
Lifetime prevalence	222 (19.2%)	157 (18.4%)	26 (21.8%)	32 (21.5%)	94 (19.7%)	1.45, p = .84
Lifetime frequency mean (sd)	3.68 (4.19)	4.68 (4.49) ^e	5.14 (4.23)	3.70 (3.21)	2.94 (3.10) ^b	3.52, p = .01
Past-year prevalence	67 (5.8%)	69 (7.6%) ^e	14 (10.9%) ^e	7 (4.5%)	18 (3.6%) ^{bc}	15.16, p = .004
Past-year frequency mean (sd)	4.40 (4.94)	5.23 (4.51)	4.57 (4.27)	2.43 (1.13)	2.61 (2.50)	1.68, p = .16
Mean (sd) age at first occurrence	18.71 (8.63) ^b	23.59 (9.76) ^{ade}	20.96 (8.58)	15.19 (5.81) ^b	17.79 (5.89) ^b	13.13, p < .001
Incident context						
Verbal pressure	110 (49.5%)	66 (42.0%)	11 (42.3%)	15 (46.9%)	53 (56.4%)	5.45, p = .24
Use or threatened use of force	55 (24.8%)	51 (32.5%)	2 (7.7%)	12 (37.5%)	26 (27.7%)	9.51, p = .05
Exploiting position of power	78 (35.1%)	61 (38.9%)	13 (50.0%)	18 (56.3%)	33 (35.1%)	7.24, p = .12
Targeted due to gender/sexuality	32 (14.4%) ^c	36 (22.9%)	10 (38.5%) ^a	10 (31.3%)	22 (23.4%)	13.40, p = .009

Figure 70. All participants: lifetime prevalence of non-consensual intimate image or video making (n = 2,851)

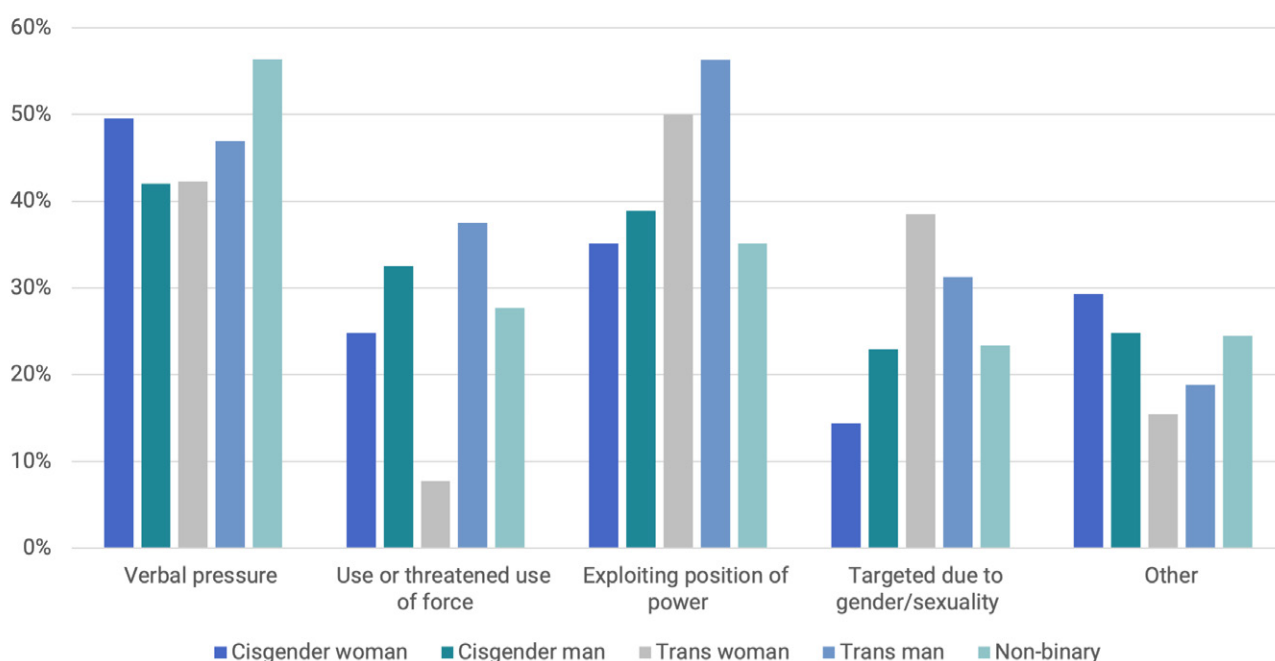


Compared to the other forms of sexual violence described so far, the prevalence of non-consensual image making was comparatively low, and reported by approximately one-in-five participants at broadly equal rates across the gender categories. Around one-in-four (27.9%) of those who had experienced non-consensual image making reported that it had happened five or more times. Lifetime frequency for trans women was comparatively high at 5.14 times compared to other categories, such as non-binary people (2.94). Past-year prevalence varied from 3.6% for non-binary people to 10.9% for trans women and was significantly lower for non-binary people compared to cisgender men and trans women. For those

reporting non-consensual image making, cisgender people and trans women reported past-year frequency means of between 4.4–5.23 times, compared to 2.43 and 2.61 for trans men and non-binary people respectively.

For this form of sexual violence, trans men and non-binary people reported a mean age at first occurrence that was under the age of 18 (15.19 and 17.79) whereas cisgender women, trans women and cisgender men reported that the mean age at first occurrence was in adulthood. Mean age at first occurrence was significantly older amongst cisgender men compared to cisgender women, trans men and non-binary people.

Figure 71. All participants: context of non-consensual image or video making (n = 2,851)



Reports of the context of non-consensual sexual image or video making varied significantly across gender identity groups. Verbal pressure was consistently reported at high rates, although exploitation of power was more common for trans women and trans men. Being targeted for gender identity or sexual orientation was also more commonly reported amongst trans women and trans men. Trans women were significantly more likely to report being targeted on the basis of gender identity or sexual orientation compared to cisgender women. Use or threats of force was reported by participants at rates of between 24.8% for cisgender men and 37.5% for trans men, with the exception of 7.7% for trans women. It is worth noting that the relatively small numbers of trans women endorsing this item may explain this variation.

In open-text options, participants described a variety of scenarios in which nude or sexual images or videos were produced without their consent, including secret recordings by intimate partners, recordings made while they slept, and being manipulated as a child on a webcam site. •

- > "Partner secretly took video while having sex and I found out later."
- > "Done while sleeping without permission."
- > "Manipulation on omegle or chat roulette."

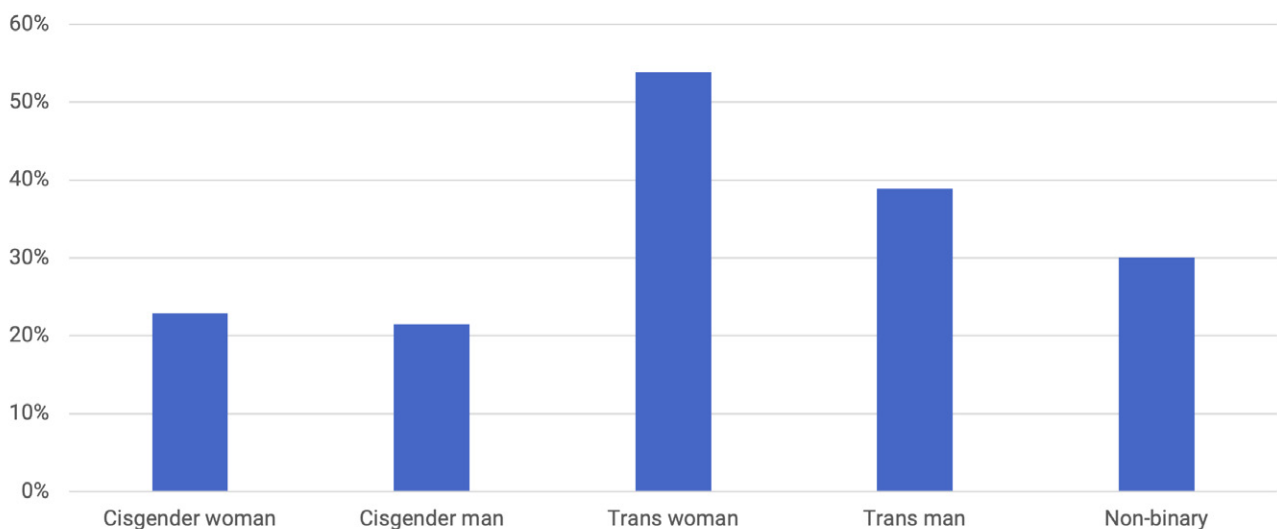
Table 60. First Nations participants: someone took nude or sexual images or videos against my will (n = 391)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 118	n = 202	n = 16	n = 18	n = 37	
Lifetime prevalence	27 (22.9%)	40 (21.5%)	7 (53.8%)	7 (38.9%)	9 (30.0%)	9.58, p = .048
Lifetime frequency mean (sd)	5.78 (5.82)	8.89 (5.16)	8.80 (6.30)	4.17 (4.02)	3.40 (2.51)	2.64, p = .04
Past-year prevalence	10 (8.8%)	32 (15.8%)	5 (31.3%)	2 (11.8%)	3 (8.1%)	8.32, p = .08
Past-year frequency mean (sd)	5.90 (7.28)	7.00 (4.59)	6.40 (5.46)	2.00 (1.41)	4.00 (4.36)	0.64, p = .64
Mean (sd) age at first occurrence	16.33 (5.37)	19.13 (7.81)	21.17 (7.25)	15.57 (5.68)	15.44 (3.78)	1.60, p = .18
Incident context						
Verbal pressure	16 (59.3%)	18 (45.0%)	4 (57.1%)	1 (14.3%)	5 (55.6%)	n/a
Use or threatened use of force	11 (40.7%)	22 (55.0%)	0	2 (28.6%)	4 (44.4%)	n/a
Exploiting position of power	17 (63.0%)	27 (67.5%)	3 (42.9%)	4 (57.1%)	5 (55.6%)	n/a
Targeted due to gender/sexuality	8 (29.6%)	13 (32.5%)	2 (28.6%)	2 (28.6%)	3 (33.3%)	n/a

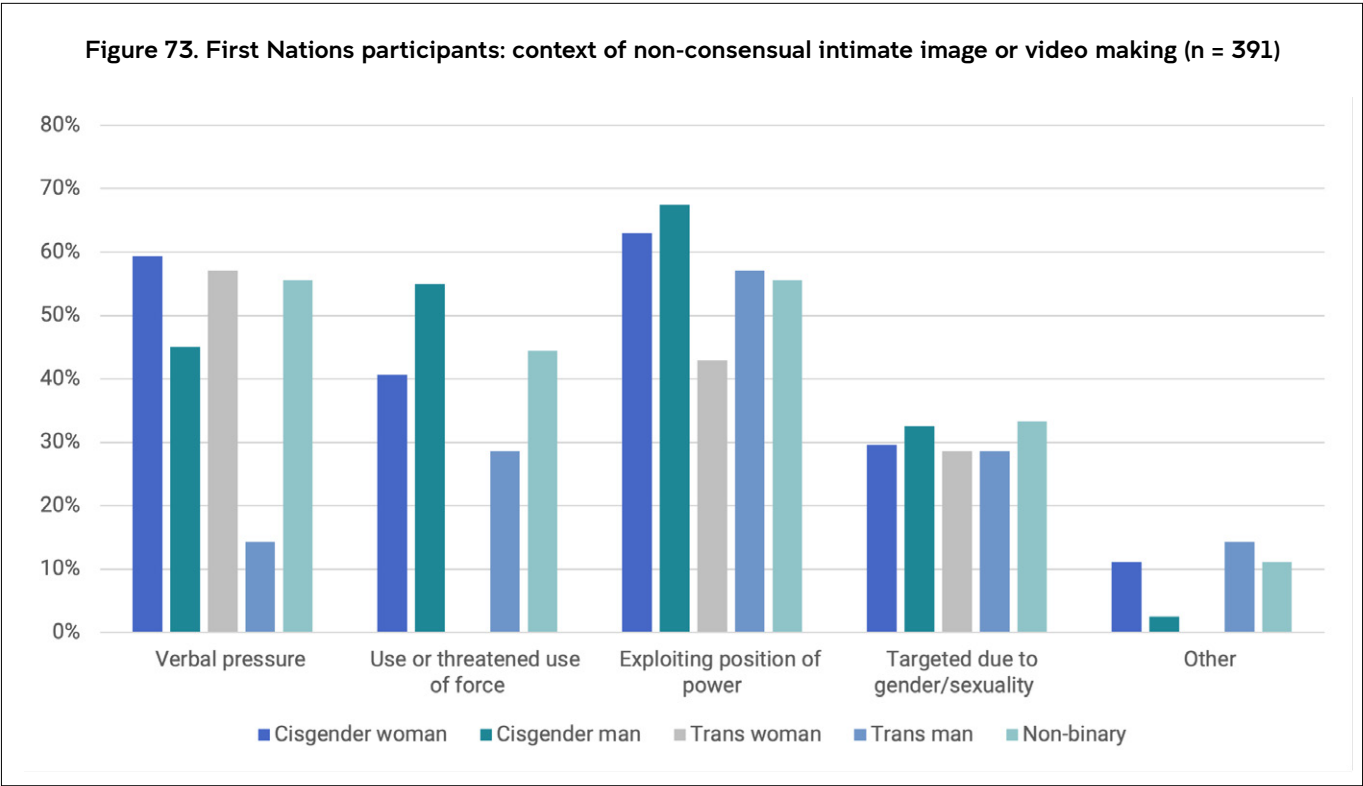
The prevalence of abusive image or video making was approximately one-in-five for cisgender men and women but reported at elevated rates for other participants. Fifty-three point eight per cent of trans women reported abusive image or video making, followed by 38.9% of trans men and 30% of non-binary people. These incidents among First Nations participants were relatively frequent, with 57.9% of those who had ever

experienced this form of sexual violence indicating that it had occurred five or more times. Past-year prevalence was highest for trans women at 31.3%, followed by 15.8% of trans men, and between 8.1% and 11.8% of other participants. Mean age at first occurrence was under 18 for cisgender women (16.33), trans men (15.57) and non-binary people (15.44) and reported in adulthood by cisgender men (19.13) and trans women (21.17).

Figure 72. First Nations participants: lifetime prevalence of non-consensual intimate image or video making (n = 391)



Exploitation of a position of power was consistently reported as a key context for non-consensual intimate image or video making by all participants, followed by varying levels of verbal pressure and use or threat of force. Being targeted on the basis of gender or sexuality was reported by approximately one-third of all participants.



In open-text responses, some First Nations participants provided additional information about the circumstances in which intimate images or videos were produced without their consent. These responses included:

- > *"Drugging me against my will."*
- > *"Place of work. Secretly filming."*

i. Non-consensual distribution of nude or sexual images or videos

Table 61. All participants: someone shared nude or sexual images or videos against my will (n = 2,851)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,158	n = 913	n = 118	n = 158	n = 504	
Lifetime prevalence	232 (20.0%)	153 (18.0%)	24 (20.3%)	25 (16.9%)	92 (19.4%)	1.89, p = .76
Lifetime frequency mean (sd)	3.33 (3.93) ^b	4.85 (4.21) ^a	4.15 (3.59)	3.43 (4.27)	3.75 (3.60)	3.00, p = .02
Past-year prevalence	55 (4.8%) ^c	71 (7.8%) ^e	15 (11.5%) ^{ae}	5 (3.2%)	15 (3.0%) ^{bc}	26.02, p < .001
Past-year frequency mean (sd)	3.73 (4.65)	4.87 (4.31)	3.60 (4.07)	5.60 (7.09)	2.53 (1.96)	1.33, p = .26
Mean (sd) age at first occurrence	18.07 (7.66) ^b	23.30 (9.95) ^{ade}	22.58 (7.64) ^d	14.40 (5.12) ^{bc}	18.00 (6.08) ^b	14.49, p < .001
Incident context						
Verbal pressure	117 (50.4%)	60 (39.2%)	12 (50.0%)	9 (36.0%)	41 (44.6%)	5.85, p = .21
Use or threatened use of force	46 (19.8%)	45 (29.4%)	3 (12.5%)	4 (16.0%)	13 (14.1%)	10.72, p = .03
Exploiting position of power	79 (34.1%)	48 (31.4%)	8 (33.3%)	9 (36.0%)	26 (28.3%)	1.24, p = .87
Targeted due to gender/sexuality	51 (22.0%) ^d	49 (32.0%)	10 (41.7%)	13 (52.0%) ^{ae}	19 (20.7%) ^d	17.35, p = .002

The prevalence of non-consensual intimate image or video distribution was approximately one-in-five across the sample, with lower lifetime prevalence rates for trans men (16.9%). One-in-four (27.4%) of those who experienced this reported that it had occurred five or more times. Around one-in-ten (11.5%) of trans women reported that it had occurred in the previous 12 months; this was significantly higher compared to cisgender women (4.8%) and non-binary people (3%). Endorsement of past-year victimisation was comparatively low amongst trans

men and non-binary people, at 3.2% and 3% respectively. Mean age at first occurrence was 14.4 for trans men and 18 for non-binary people. Cisgender women reported that it first occurred for them when they were 18 years old, and cisgender men and trans women reported a mean age at first occurrence in their early 20s. Cisgender men reported a significantly higher mean age at first occurrence in comparison with cisgender women, trans men and non-binary people.

Figure 74. All participants: lifetime prevalence of non-consensual image or video distribution (n = 2,851)

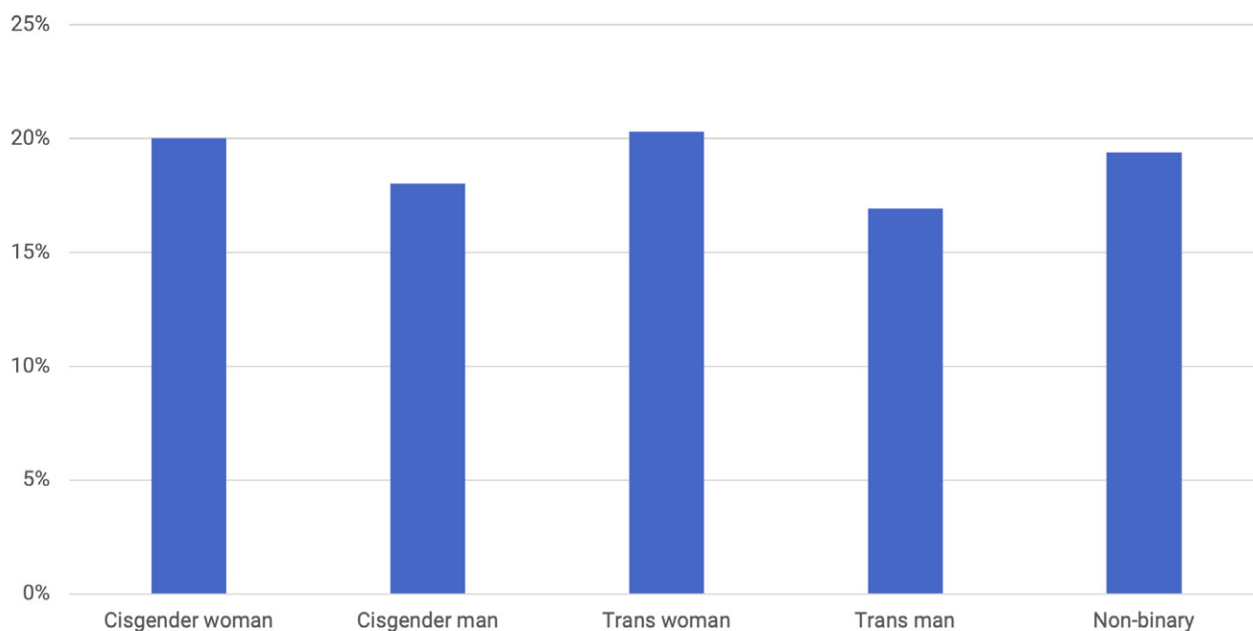
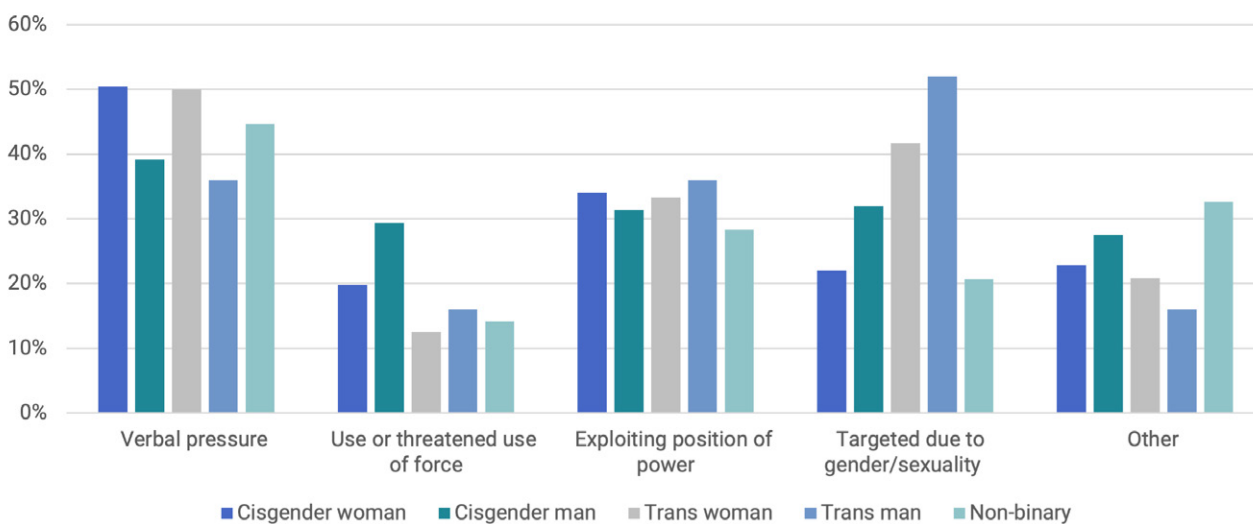


Figure 75. All participants: context of non-consensual intimate image or video distribution (n = 2,851)



The reported context for non-consensual image or video distribution included situations that were common across the sample, including verbal pressure and exploitation of a position of power. Trans men were significantly more likely to report that they had images or videos of them distributed without their consent because they were being targeted for their gender or sexuality in comparison to cisgender women and non-binary people.

In open-text responses, the 3 most common themes provided by participants for this form of victimisation were the sharing

of intimate images with trusted individuals who broke that trust (n = 75), the distribution of material that was recorded without consent (n = 31), and distribution to larger online audiences and networks (n = 26). These included responses such as:

- > *"Hookup shared my nudes with others."*
- > *"They recorded an online video chat that I thought was private, and then secretly distributed it without my consent."*
- > *"Peer at school sharing intimate photos with others and uploading the images to a dark web site."*

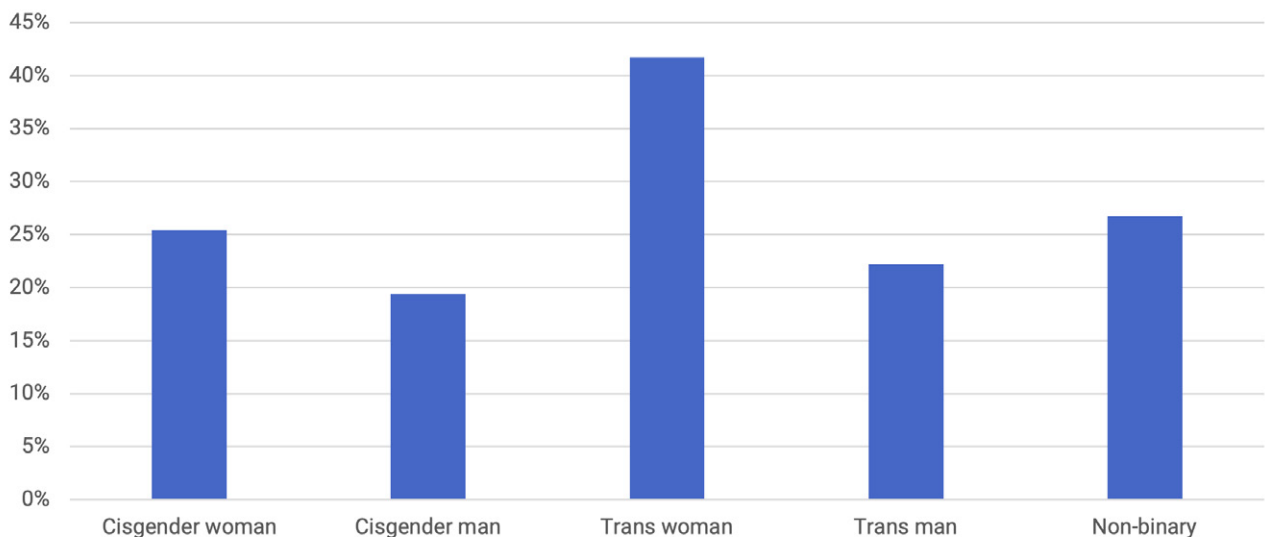
Table 62. First Nations participants: someone shared nude or sexual images or videos against my will (n = 388)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 118	n = 198	n = 16	n = 18	n = 38	
Lifetime prevalence	30 (25.4%)	36 (19.4%)	5 (41.7%)	4 (22.2%)	8 (26.7%)	4.40, p = .36
Lifetime frequency mean (sd)	4.26 (5.43)	7.10 (4.12)	7.50 (5.07)	1.33 (0.58)	3.50 (1.29)	2.23, p = .08
Past-year prevalence	6 (5.6%)	26 (13.1%)	4 (25.0%)	0	3 (7.9%)	n/a
Past-year frequency mean (sd)	5.67 (7.42)	6.12 (4.44)	7.00 (5.60)	-	4.33 (3.51)	n/a
Mean (sd) age at first occurrence	17.60 (6.25)	18.25 (7.11)	23.20 (5.81)	15.25 (2.87)	15.00 (2.27)	1.53, p = .20
Incident context						
Verbal pressure	16 (53.3%)	18 (50.0%)	4 (80.0%)	1 (25.0%)	4 (50.0%)	n/a
Use or threatened use of force	12 (40.0%)	24 (66.7%)	1 (20.0%)	0	4 (50.0%)	n/a
Exploiting position of power	18 (60.0%)	18 (50.0%)	2 (40.0%)	1 (25.0%)	4 (50.0%)	n/a
Targeted due to gender/sexuality	10 (33.3%)	11 (30.6%)	2 (40.0%)	2 (50.0%)	2 (25.0%)	n/a

First Nations trans women reported much higher rates of non-consensual image or video distribution (41.7%) compared to other First Nations participants. Such experiences were reported by approximately one-quarter of cisgender women (25.4%) and non-binary people (26.7%) and one-fifth of cisgender men (19.4%) and trans men (22.2%). Of those who experienced non-consensual image or video sharing, 42.2%

indicated that it had occurred five or more times. Trans men reported the lowest lifetime frequency (1.33). Past-year prevalence was 25% for trans women and 13.1% for cisgender men, followed by 7.9% for non-binary people and 5.6% for cisgender women. The mean age at first occurrence was under 18 years for non-binary people (15), trans men (15.25), and cisgender women (17.60).

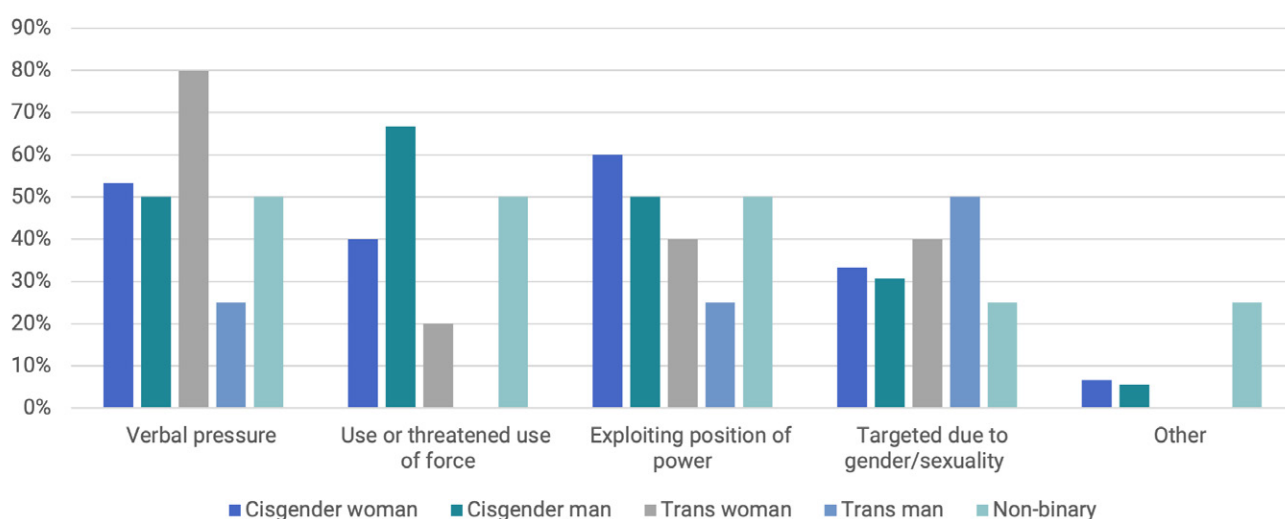
Figure 76. First Nations participants: lifetime prevalence of non-consensual intimate image or video distribution (n = 388)



First Nations trans women reported that verbal pressure was the primary context of non-consensual image or video distribution followed by being targeted due to gender or sexuality, and use of threat or force. Being targeted due to gender or sexuality was described as a context of non-consensual intimate image or video distribution by between 25% to 50% of the sample. This was the primary context

reported by trans men (50%). For cisgender men, use of threat or force was the dominant context for non-consensual distribution and was reported by 66.7% of men. Verbal pressure, use of threat or force and exploitation of a position of power were important contexts for cisgender women's and non-binary people's experiences.

Figure 77. First Nations participants: context of non-consensual intimate image or video distribution (n = 388)



In open-text responses, First Nations respondents provided some details about the circumstances in which they experienced non-consensual distribution, including:

- > *"Stupidly sent a photo to someone I thought I could trust. Turns out I couldn't trust them and they sent it to their friends."*
- > *"Shared them through 'pedo' chat websites."*

j. Medical abuse of intersex people

The survey included 6 questions on medical abuse; that is, sexually abusive or coercive conduct by professionals during health or welfare appointments. These questions related to: sexually suggestive comments, medically unnecessary examinations of the body, medically unnecessary examinations of the body to access hormones, medically unnecessary photography of the body, medically unnecessary touching or treatment of the body (such as dilation with an instrument or hands), and being coerced into surgery. These questions were included in the survey following consultation with people living with intersex conditions, who explained that notions of consent and bodily autonomy for them were complex since many had been subject to early and non-consensual medical and surgical intervention.

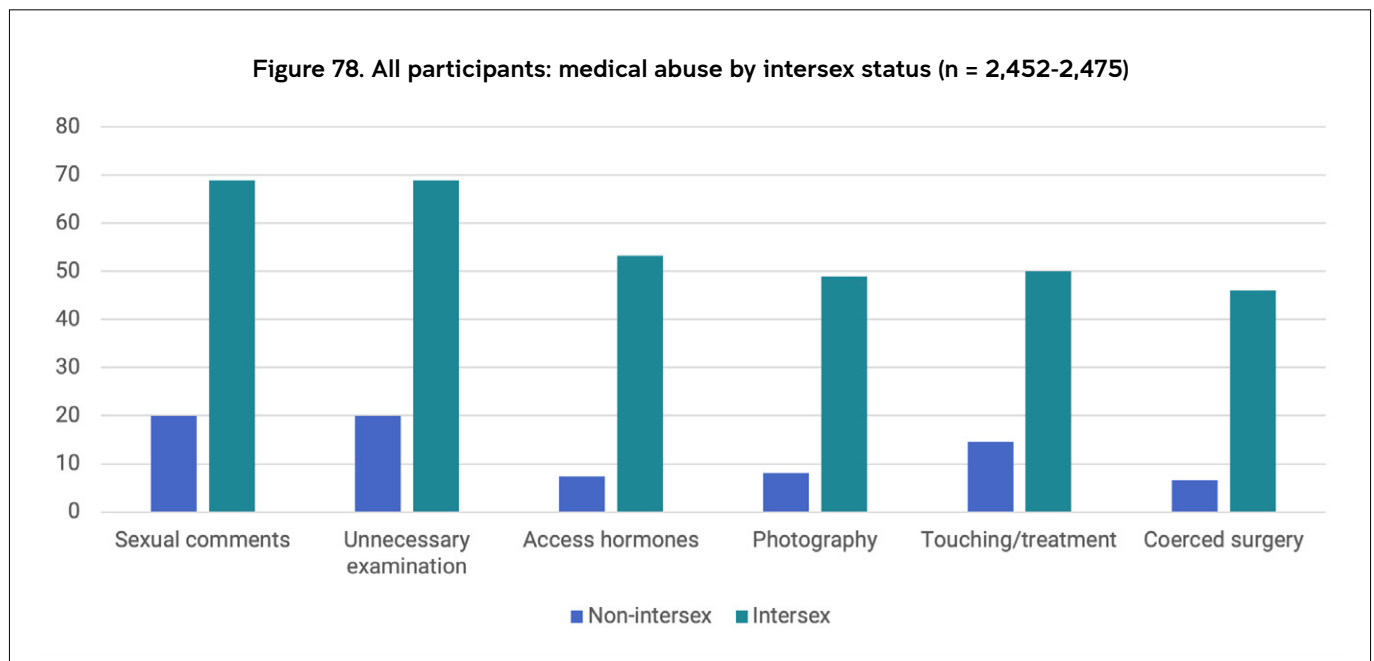


Table 66 presents descriptive statistics for experiences of medical abuse for all participants, comparing the non-intersex group to the intersex group. Intersex people were significantly more likely to report any of these 6 experiences compared to the non-intersex group, as evident in Table 66. Specifically, intersex people were 5.4 times more likely to ever experience sexually suggestive comments, 6.9 times

more likely to ever be subjected to unnecessary medical examinations, 12.4 times more likely to ever be subjected to medically unnecessary examinations to access hormones, 8.4 times more likely to ever experience medically unnecessary photography, 5.1 times more likely to ever experience medically unnecessary touching or treatment, and 9.9 times more likely to ever be coerced into surgery.

Table 63. All participants: medically unnecessary examination descriptive statistics (n = 2,452-2,475)

	Non-intersex	Intersex	x ² / F
	n = 2,321 – 2,343	n = 120 - 135	
Sexual comments			
Never	1,861 (80.0%) ^b	42 (31.1%) ^a	148.63***
Before age 18	204 (8.8%) ^b	34 (25.2%) ^a	
Since age 18	210 (9.0%) ^b	50 (37.0%) ^a	
Before and since age 18	51 (2.2%)	9 (6.7%)	
Past-year prevalence	152 (5.5%) ^b	35 (18.5%) ^a	50.88***

	Non-intersex	Intersex	x ² / F
Unnecessary examination			
Never	1,861 (80.0%) ^b	42 (31.1%) ^a	180.22***
Before age 18	204 (8.8%) ^b	34 (25.2%) ^a	
Since age 18	210 (9.0%) ^b	50 (37.0%) ^a	
Before and since age 18	51 (2.2%) ^b	9 (6.7%) ^a	
Past-year prevalence	89 (3.2%) ^b	36 (19.0%) ^a	250.88***
Access hormones			
Never	2,154 (92.6%) ^b	56 (46.7%) ^a	281.59***
Before age 18	68 (2.9%) ^b	20 (16.7%) ^a	
Since age 18	87 (3.7%) ^b	38 (31.7%) ^a	
Before and since age 18	18 (0.8%) ^b	6 (5.0%) ^a	
Past-year prevalence	77 (2.8%) ^b	51 (27.0%) ^a	109.86***
Photography			
Never	2,133 (91.9%) ^b	67 (51.1%) ^a	240.53***
Before age 18	81 (3.5%) ^b	20 (15.3%) ^a	
Since age 18	95 (4.1%) ^b	42 (32.1%) ^a	
Before and since age 18	12 (0.5%)	2 (1.5%)	
Past-year prevalence	80 (2.9%) ^b	37 (19.6%) ^a	130.00***
Touching or treatment			
Never	1,996 (85.4%) ^b	60 (50.0%) ^a	106.53***
Before age 18	135 (5.8%) ^b	21 (17.5%) ^a	
Since age 18	170 (7.3%) ^b	32 (26.7%) ^a	
Before and since age 18	35 (1.5%) ^b	7 (5.8%) ^a	
Past-year prevalence	80 (2.9%) ^b	51 (27.0%) ^a	243.21***
Coerced surgery			
Never	2,189 (93.4%) ^b	68 (54.0%) ^a	239.53***
Before age 18	49 (2.1%) ^b	16 (12.7%) ^a	
Since age 18	95 (4.1%) ^b	39 (31.0%) ^a	
Before and since age 18	10 (0.4%) ^b	3 (2.4%) ^a	
Past-year prevalence	55 (2.0%) ^b	42 (22.2%) ^a	228.90***
NOTE: Percentages and means exclude missing responses. Between-group comparisons Bonferroni corrected. *p < .05; ** p< .01; *** p< .001			

k. Perpetrator identity

Table 64. All participants: person/s responsible for any unwanted, coercive, or frightening sexual experiences (n = 3,188)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 1,311	n = 986	n = 139	n = 177	n = 575	
Partner/ex-partner	483 (36.8%) ^{bc}	164 (16.6%) ^{ade}	33 (23.7%) ^{ade}	69 (38.8%) ^{bc}	223 (38.7%) ^{bc}	141.96, p < .001
Friend or acquaintance	591 (45.0%) ^b	283 (28.7%) ^{ade}	50 (36.0%)	72 (40.4%) ^b	254 (44.1%) ^b	71.35, p < .001
Stranger	550 (41.9%) ^b	346 (35.1%) ^{ae}	56 (40.3%)	71 (39.9%)	254 (44.1%) ^b	16.15, p = .003
Immediate family member	164 (12.5%) ^b	68 (6.9%) ^a	11 (7.9%)	23 (12.9%)	60 (10.4%)	21.67, p < .001
Extended family member	180 (13.7%) ^b	76 (7.7%) ^{ad}	13 (9.4%)	37 (20.8%) ^{be}	66 (11.5%) ^d	35.80, p < .001
Other	162 (12.3%) ^b	62 (6.3%) ^{ae}	11 (7.9%)	21 (11.9%)	68 (11.8%) ^b	26.20, p < .001

Cisgender women, trans men and non-binary people reported a similar profile of perpetrator identity, where 40.5%-45% identified friends or acquaintances as perpetrators, 39.9%–44.1% identified a stranger, and 36.8%-38.8% identified partners or ex-partners as perpetrators. Cisgender men and trans women were significantly less likely than all other gender identity categories to report partners or ex-partners as offenders. Reports of

sexual violence perpetration by immediate family members ranged from 6.9% (cisgender men) to 12.9% (trans men). One-in-five trans men (20.8%) reported sexual violence by an extended family member, compared to between 7.7%-13.7% for the other gender categories. Trans men were significantly more likely to report sexual violence by an extended family member compared to cisgender men and non-binary people.

Figure 79. All participants: person/s responsible for any unwanted, coercive or frightening sexual experiences (n = 3,192)

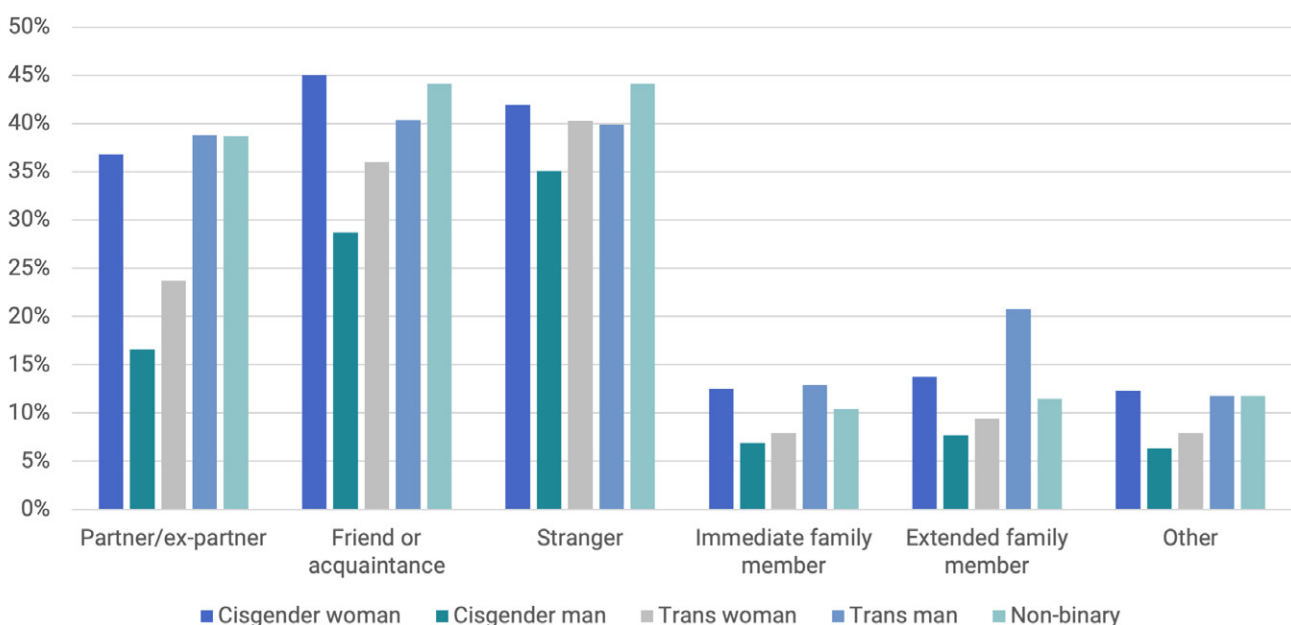


Table 65. First Nations participants: person/s responsible for any unwanted, coercive, or frightening sexual experiences (n = 416)

	Cisgender woman	Cisgender man	Trans woman	Trans man	Non-binary	χ^2 / F
	n = 130	n = 206	n = 17	n = 22	n = 41	
Partner/ex-partner	50 (38.5%) ^b	42 (20.4%) ^a	6 (35.3%)	9 (40.9%)	14 (34.1%)	15.41, p = .004
Friend or acquaintance	55 (42.3%)	66 (32.0%)	7 (41.2%)	10 (45.5%)	16 (39.0%)	4.62, p = .33
Stranger	47 (36.2%)	65 (31.6%)	3 (17.6%)	8 (36.4%)	15 (36.6%)	2.93, p = .57
Immediate family member	36 (27.7%) ^b	30 (14.6%) ^a	2 (11.8%)	5 (22.7%)	5 (12.2%)	11.12, p = .03
Extended family member	43 (33.1%) ^b	31 (15.0%) ^a	3 (17.6%)	6 (27.3%)	6 (14.6%)	17.19, p = .002
Other	8 (6.2%)	6 (2.9%) ^{de}	0	4 (18.2%) ^b	7 (17.1%) ^b	19.25, p < .001

Across First Nations participants, cisgender men were significantly less likely to identify a partner or ex/partner as a perpetrator of sexual violence compared to cisgender women. Perpetration by a partner or ex-partner was reported by between approximately one-third to 40% of trans women, trans men and non-binary people. Cisgender women were

significantly more likely to report sexual violence by an immediate family member (27.7%) or an extended family member (33.1%) compared to cisgender men (14.6% and 15.0%). Over one-fifth of trans men (22.7%) reported sexual violence by an immediate family member and over one-quarter (27.3%) by an extended family member.

Figure 80. First Nations participants: person/s responsible for any unwanted, coercive or frightening sexual experiences (n = 416)

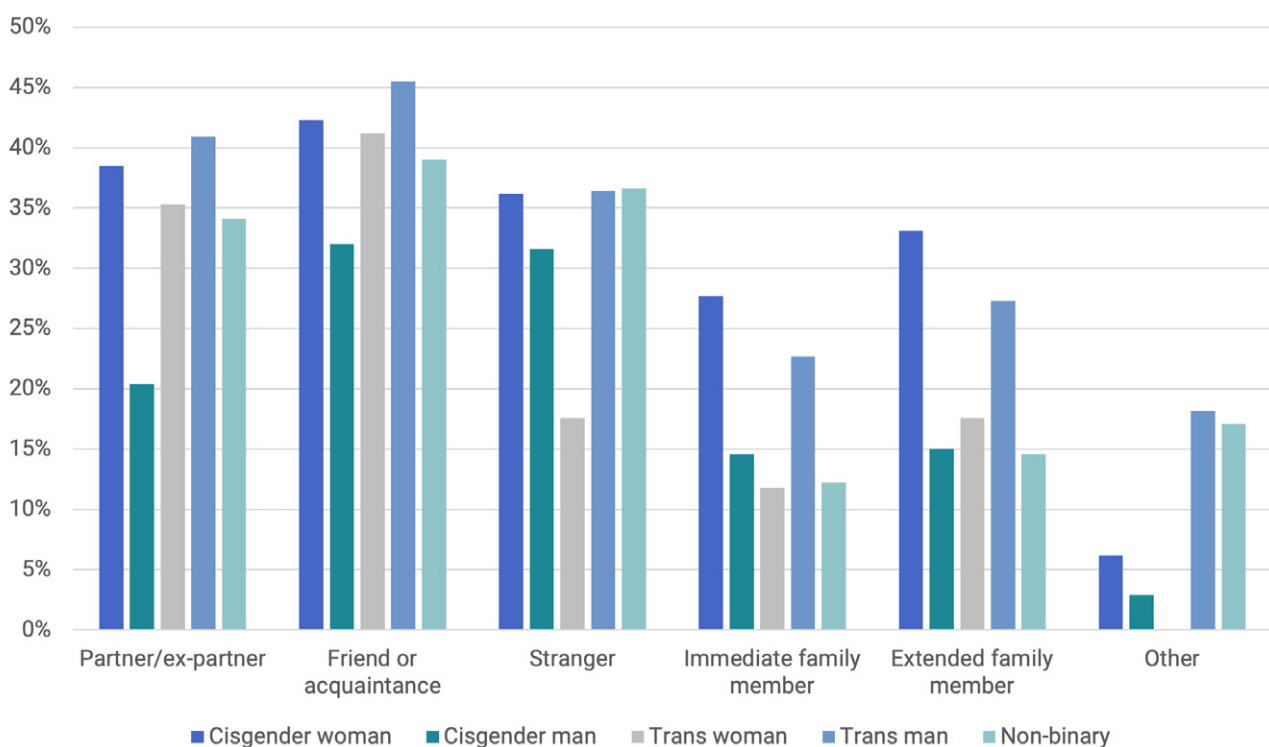


Table 66. All participants: person/s responsible for any unwanted, coercive, or frightening sexual experiences (n = 2,417)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
		n = 220	n = 538	n = 1,659	
Partner/ex-partner	–	30 (13.4%) ^{cd}	157 (28.9%) ^{bd}	804 (47.7%) ^{bc}	134.79, p < .001
Friend or acquaintance	–	71 (31.7%) ^d	221 (40.7%) ^d	976 (57.9%) ^{bc}	88.06, p < .001
Stranger	–	56 (25.0%) ^{cd}	284 (52.3%) ^b	951 (56.4%) ^b	78.26, p < .001
Immediate family member	–	33 (14.7%) ^c	28 (5.2%) ^{bd}	275 (16.3%) ^c	43.45, p < .001
Extended family member	–	35 (15.6%) ^c	25 (4.6%) ^{bd}	322 (19.1%) ^c	65.63, p < .001
Other	–	33 (14.7%)	53 (9.8%) ^d	244 (14.5%) ^c	8.18, p = .02

Comparisons between categories of experiencing sexual violence during childhood only, adulthood only, and childhood and adulthood identified shifts in perpetrator identity depending on the phase of life that sexual violence occurs within. Participants who experienced sexual violence as both a child and adult were significantly more likely to experience perpetration by a partner or ex-partner, as well as a friend or acquaintance, compared to those who experienced sexual violence during childhood or adulthood only. Those who

experienced sexual violence during childhood only or during both childhood and adulthood were significantly more likely to be perpetrated against by an immediate or extended family member, compared to those only exposed to sexual violence during adulthood. However, those exposed to sexual violence during adulthood or both childhood and adulthood were significantly more likely than those exposed in childhood only to experience perpetration by a stranger.

Figure 81. All participants: person/s responsible for any unwanted, coercive or frightening sexual experiences (n=2,417)

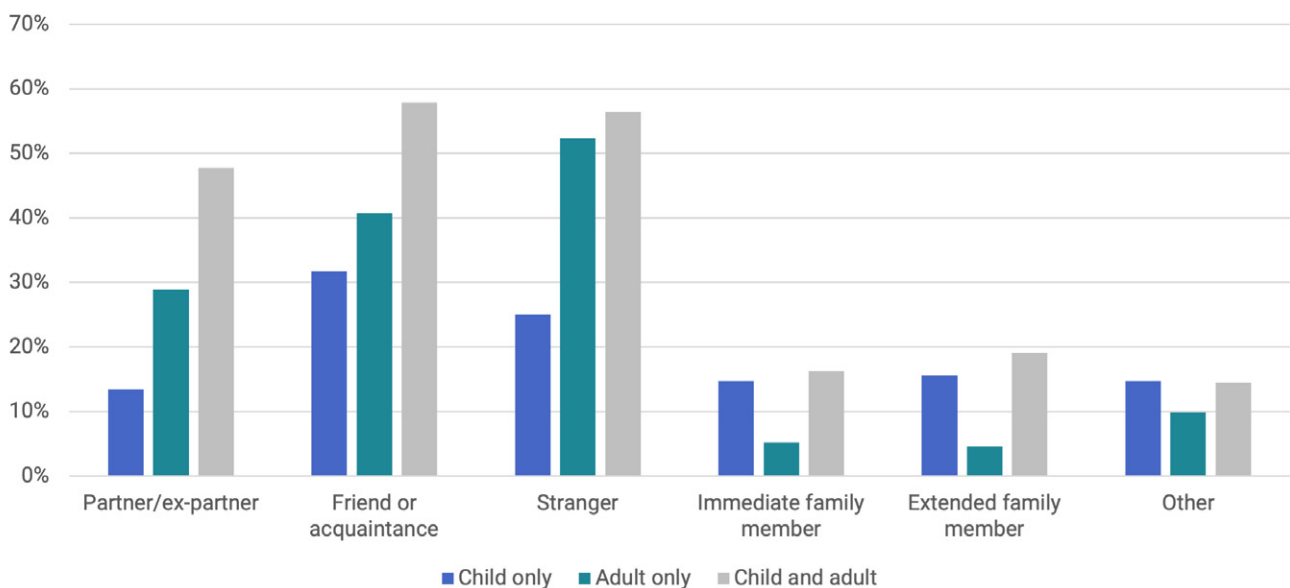


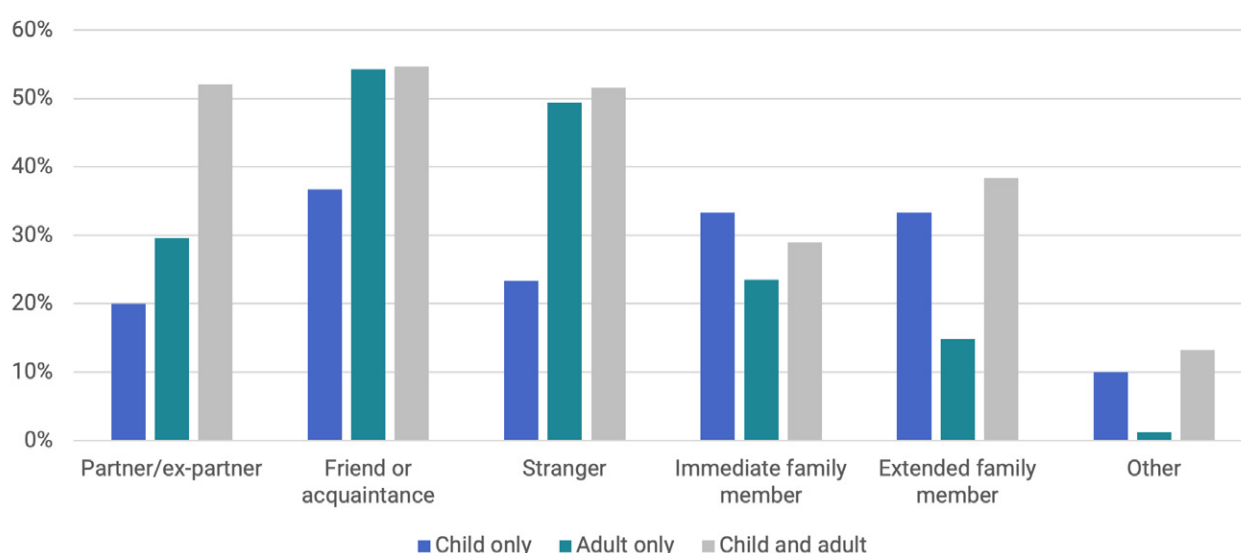
Table 67. First Nations participants: person/s responsible for any unwanted, coercive or frightening sexual experiences (n = 301)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
		n = 28	n = 81	n = 178	
Partner/ex-partner	–	6 (20.0%) ^d	24 (29.6%) ^d	99 (52.1%) ^{bc}	18.82, p < .001
Friend or acquaintance	–	11 (36.7%)	44 (54.3%)	104 (54.7%)	3.50, p = .17
Stranger	–	7 (23.3%) ^{cd}	40 (49.4%) ^b	98 (51.6%) ^b	8.34, p = .02
Immediate family member	–	10 (33.3%)	19 (23.5%)	55 (28.9%)	1.34, p = .51
Extended family member	–	10 (33.3%)	12 (14.8%) ^d	73 (38.4%) ^c	14.70, p < .001
Other	–	3 (10.0%)	1 (1.2%) ^d	25 (13.2%) ^c	9.28, p = .01

For First Nations participants, those reporting sexual violence only in childhood were significantly less likely to report abuse by a partner or ex-partner compared to those reporting abuse in childhood and adulthood, and significantly less likely to report abuse by a stranger compared to the other 2 categories. The most common perpetrator identity group reported for the child-only category was friend or acquaintance (36.7%), followed by reports of an immediate (33.0%) or extended (33.0%) family member. For participants reporting sexual violence in adulthood only, the most common perpetrator identity categories were friend or acquaintance (54.3%) and stranger (49.4%). Those describing sexual violence in childhood and adulthood endorsed all perpetrator identity categories at the highest rates, especially friend or acquaintance (54.7%), stranger (51.65%) and partner or ex-partner (52.1%).

First Nations participants exposed to sexual violence in both childhood and adulthood (52.1%) were significantly more likely to experience sexual violence from a partner or ex-partner compared to those who reported experiencing sexual violence in childhood (20.0%) or adulthood (29.6%) only. Furthermore, those who experienced sexual violence during childhood only (23.3%) were significantly less likely to be perpetrated against by a stranger compared to those who had experienced sexual violence during adulthood only (49.4%) or both childhood and adulthood (51.6%). Perpetration by an extended family member or other person was significantly more common among participants who had experienced sexual violence during both childhood and adulthood (38.4% and 13.2%) compared to those who had experienced sexual violence in adulthood only (14.8% and 1.2%).

Figure 82: First Nations participants: person/s responsible for any unwanted, coercive or frightening sexual experiences (n = 301)



Sexual violence impacts

a. Substance misuse

Substance misuse was measured using the 4-item National Institute on Drug Abuse (NIDA) Quick Screen. The timing of exposure to sexual violence was significantly associated with the frequency of consuming 5 or more drinks in a day and illegal drug use. Specifically:

- > Consuming 5 or more drinks in a day was significantly more frequent for participants who experienced sexual violence during adulthood only compared to those who only experienced sexual violence during childhood or did not experience it at all.

- > Consuming 5 or more drinks in a day was also more frequent for participants who experienced sexual violence in both childhood and adulthood compared to those who only experienced it during childhood.
- > Illegal drug use was significantly more frequent for participants who experienced sexual violence during adulthood only or during both childhood and adulthood, compared to those who did not experience any sexual violence.

The frequency of tobacco or prescription drug misuse was not significantly associated with exposure to sexual violence.

Figure 83. All participants: substance misuse mean (sd) frequency in past year (range 1 = never to 5 = daily or almost daily) (n = 3,013)

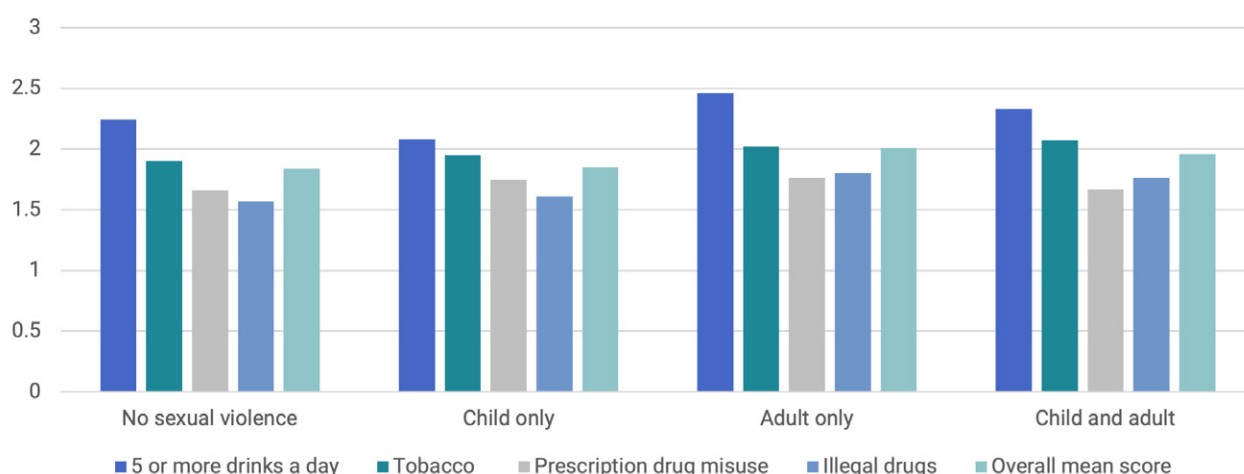


Table 68. All participants: substance misuse mean (sd) frequency in the past year (range 1 = never to 5 = daily or almost daily) (n = 3,013)

	No sexual violence	Child only	Adult only	Child and adult	x ² / F
	n = 596	n = 220	n = 538	n = 1,659	
5 or more drinks a day	2.24 (1.26) ^c	2.08 (1.22) ^{cd}	2.46 (1.27) ^{ab}	2.33 (1.19) ^b	5.77, p < .001
Tobacco	1.90 (1.38)	1.95 (1.49)	2.02 (1.47)	2.07 (1.57)	2.36, p = .07
Prescription drug misuse	1.66 (1.19)	1.75 (1.33)	1.76 (1.26)	1.67 (1.23)	0.88, p = .54
Illegal drugs	1.57 (1.11) ^{cd}	1.61 (1.09)	1.80 (1.15) ^a	1.76 (1.16) ^a	5.50, p < .001
Overall mean score	1.84 (0.92) ^{cd}	1.85 (0.92)	2.01 (0.93) ^a	1.96 (0.86) ^a	4.12, p = .007

Among First Nations participants (n = 396), the timing of exposure to sexual violence was significantly associated with the frequency of consuming 5 or more drinks in a day, tobacco use and prescription drug misuse. Specifically:

- > Consuming 5 or more drinks in a day was significantly more frequent among participants who experienced sexual violence during adulthood only compared to those who did not experience sexual violence.

- > The frequency of prescription drug misuse was significantly greater for those who experienced sexual violence during adulthood only compared to participants who experienced sexual violence during both childhood and adulthood.

Despite a significant main effect for tobacco use, between-group differences were non-significant after adjusting for multiple comparisons.

Figure 84. First Nations participants: substance misuse mean (sd) frequency in past year (range 1 = never to 5 = daily or almost daily) (n = 396)

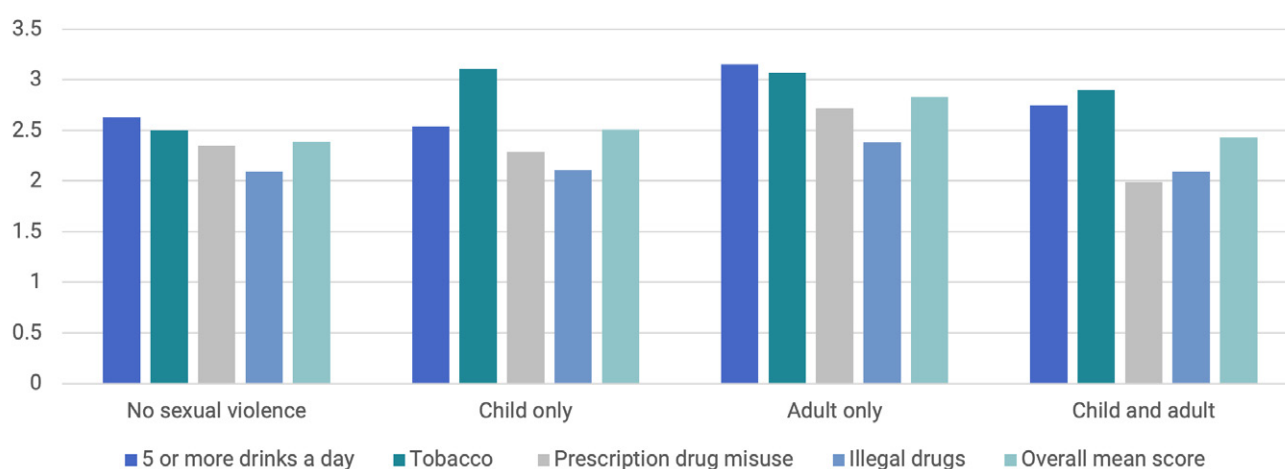


Table 69. First Nations participants: substance misuse mean (sd) frequency in the past year (range 1 = never to 5 = daily or almost daily) (n = 396)

	No sexual violence	Child only	Adult only	Child and adult	x ² / F
	n = 109	n = 28	n = 81	n = 178	
5 or more drinks a day	2.63 (1.33) ^c	2.54 (1.50)	3.15 (1.27) ^a	2.75 (1.30)	2.96, p = .036
Tobacco	2.50 (1.53)	3.11 (1.77)	3.07 (1.53)	2.90 (1.80)	2.70, p = .049
Prescription drug misuse	2.35 (1.48)	2.29 (1.58)	2.72 (1.36) ^d	1.99 (1.34) ^c	5.42, p = .002
Illegal drugs	2.09 (1.57)	2.11 (1.34)	2.38 (1.32)	2.09 (1.37)	0.90, p = .44
Overall mean score	2.39 (1.22) ^c	2.51 (1.17)	2.83 (0.96) ^{ad}	2.43 (1.00) ^c	3.61, p = .016

b. Depression and anxiety

Symptoms of anxiety and depression were measured using 4 items from the Patient Health Questionnaire 4 (PHQ-4). The average score for the 4 items ($\alpha = .86$) significantly differed across the categories of exposure to sexual violence. Scores were significantly higher for participants exposed to sexual

violence during childhood only or during both childhood and adulthood than those who did not experience sexual violence or were only exposed during adulthood. A similar pattern of association was observed for the individual items comprising the scale.

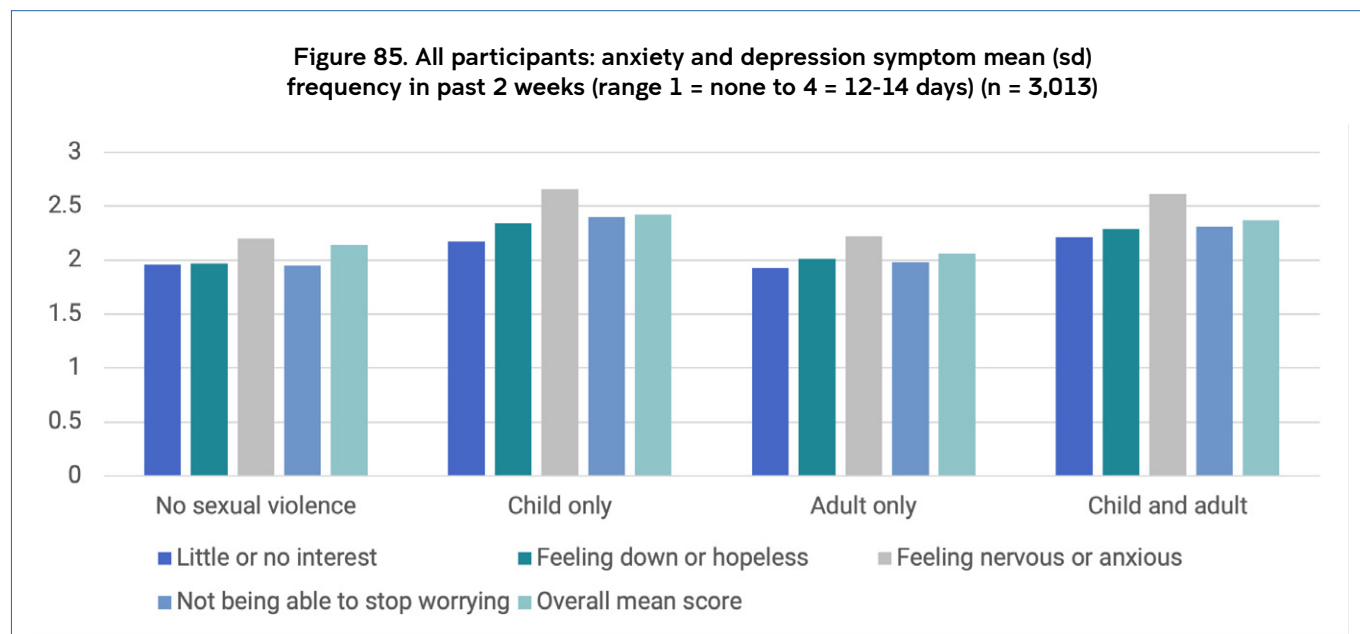


Table 70. All participants: anxiety and depression symptom mean (sd) frequency in past 2 weeks (range 1 = none to 4 = 12-14 days) (n = 3,013)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 596	n = 220	n = 538	n = 1,659	
Little or no interest	1.96 (0.94) ^{bd}	2.17 (0.97) ^{ac}	1.93 (0.86) ^{bd}	2.21 (0.95) ^{ac}	18.45, p < .001
Feeling down or hopeless	1.97 (0.94) ^{bd}	2.34 (0.95) ^{ac}	2.01 (0.88) ^{bd}	2.29 (0.95) ^{ac}	26.12, p < .001
Feeling nervous or anxious	2.20 (1.01) ^{bd}	2.66 (1.02) ^{ac}	2.22 (0.92) ^{bd}	2.61 (0.99) ^{ac}	39.46, p < .001
Not being able to stop worrying	1.95 (1.02) ^{bd}	2.40 (1.00) ^{ac}	1.98 (0.95) ^{bd}	2.31 (1.02) ^{ac}	29.58, p < .001
Overall mean score	2.14 (0.97) ^{bd}	2.42 (0.84) ^{ac}	2.06 (0.75) ^{bd}	2.37 (0.84) ^{ac}	27.43, p < .001

The average overall PHQ-4 score was not significantly associated with experiences of sexual violence among First Nations participants. However, significant between-group differences were evident among most of the individual items comprising the PHQ-4. Feeling down or hopeless and feeling nervous or anxious were significantly more frequent among First Nations participants who experienced sexual violence

during childhood only, or during both childhood and adulthood, than among those who did not experience sexual violence. Not being able to stop worrying was also significantly more frequent for those who experienced sexual violence during both childhood and adulthood than for those who did not experience any sexual violence.

Figure 86. First Nations participants: anxiety and depression symptom mean (sd) frequency in past 2 weeks (range 1 = none to 4 = 12-14 days) (n = 396)

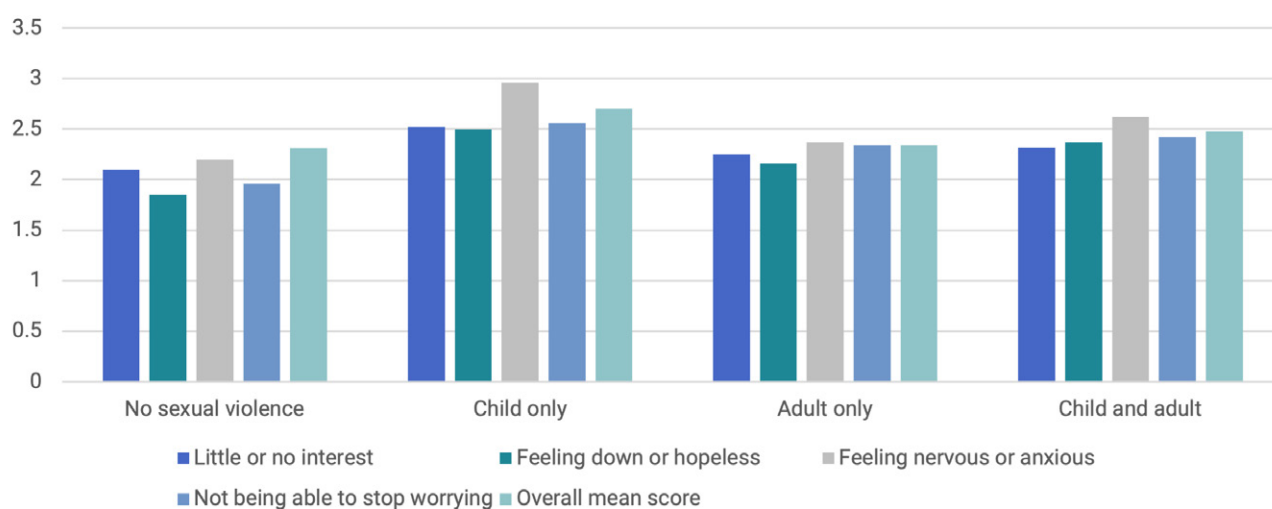


Table 71. First Nations participants: anxiety and depression symptom mean (sd) frequency in past 2 weeks (range 1 = none to 4 = 12-14 days) (n = 396)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 109	n = 28	n = 81	n = 178	
Little or no interest	2.10 (1.10)	2.52 (1.05)	2.25 (0.88)	2.32 (0.92)	1.82, p = .14
Feeling down or hopeless	1.85 (0.95) ^{bd}	2.50 (0.92) ^a	2.16 (0.82)	2.37 (0.97) ^a	7.56, p < .001
Feeling nervous or anxious	2.20 (1.08) ^{bd}	2.96 (1.02) ^a	2.37 (0.99)	2.62 (1.02) ^a	5.80, p < .001
Not being able to stop worrying	1.96 (1.16) ^d	2.56 (0.93)	2.34 (0.98)	2.42 (1.05) ^a	4.75, p = .003
Overall mean score	2.31 (1.20)	2.70 (0.76)	2.34 (0.71)	2.48 (0.86)	2.15, p = .10

c. Mental health

There were significant differences between categories of exposure to sexual violence and the proportion of participants who in the past year received a diagnosis or treatment for any mental health disorder. The specific mental health disorders associated with exposure to sexual violence, in order of the strength of the association, were:

- > depression
- > anxiety
- > complex trauma disorder
- > personality disorder
- > panic disorder

- > autism spectrum disorder
- > dissociative disorder
- > eating disorder
- > bipolar disorder
- > other disorder not specified.

Participants who experienced sexual violence during both childhood and adulthood, and on occasion those who only experienced it during childhood, generally had significantly higher rates of mental health disorder diagnosis or treatment than those who had not experienced any sexual violence or had only experienced it during adulthood.

Figure 87. All participants: diagnosis or treatment for mental disorder in past year (n = 3,188)

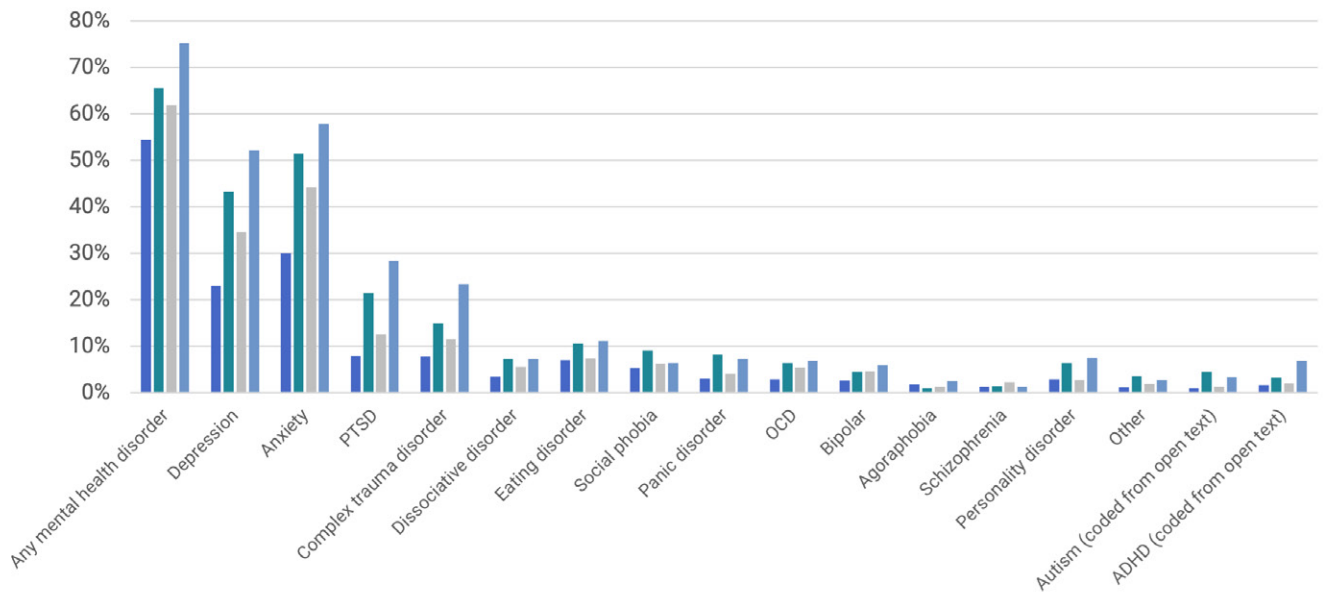


Table 72. All participants: diagnosis or treatment for mental disorder in past year (n = 3,188)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 771	n = 220	n = 538	n = 1,659	
Any mental health disorder	325 (54.5%) ^{bd}	144 (65.5%) ^{ad}	333 (61.9%) ^d	1,247 (75.2%) ^{abc}	98.72, p < .001
Depression	177 (23.0%) ^{cd}	95 (43.2%) ^a	186 (34.6%) ^{ad}	864 (52.1%) ^{ac}	196.61, p < .001
Anxiety	231 (30.0%) ^{bcd}	113 (51.4%) ^a	238 (44.2%) ^{ad}	959 (57.8%) ^{ac}	168.25, p < .001
PTSD	61 (7.9%) ^{bcd}	47 (21.4%) ^{ac}	67 (12.5%) ^{abd}	470 (28.3%) ^{ac}	160.28, p < .001
Complex trauma disorder	59 (7.7%) ^{bd}	33 (15.0%) ^{ad}	62 (11.5%) ^d	388 (23.4%) ^{abc}	107.77, p < .001
Dissociative disorder	27 (3.5%) ^d	16 (7.3%)	30 (5.6%)	121 (7.3%) ^a	14.03, p = .003
Eating disorder	54 (7.0%) ^d	23 (10.5%)	40 (7.4%)	184 (11.1%) ^a	13.44, p = .004
Social phobia	41 (5.3%)	20 (9.1%)	34 (6.3%)	106 (6.4%)	4.18, p = .24
Panic disorder	23 (3.0%) ^{bd}	18 (8.2%) ^a	22 (4.1%)	119 (7.2%) ^a	22.37, p < .001
OCD	22 (2.9%) ^d	14 (6.4%)	29 (5.4%)	115 (6.9%) ^a	16.71, p < .001
Bipolar disorder	20 (2.6%) ^d	10 (4.5%)	25 (4.6%)	98 (5.9%) ^a	12.72, p = .005
Agoraphobia	14 (1.8%)	2 (0.9%)	7 (1.3%)	42 (2.5%)	5.08, p = .17
Schizophrenia	10 (1.3%)	3 (1.4%)	12 (2.2%)	21 (1.3%)	2.84, p = .42
Personality disorder	22 (2.9%) ^d	14 (6.4%)	15 (2.8%) ^d	125 (7.5%) ^{ac}	31.42, p < .001
Other	9 (1.2%)	8 (3.6%)	10 (1.9%)	47 (2.8%)	8.63, p = .035
Autism (coded from open text)	7 (0.9%) ^{bd}	10 (4.5%) ^{ac}	7 (1.3%) ^b	57 (3.4%) ^a	20.58, p < .001
ADHD (coded from open text)	13 (1.7%) ^d	7 (3.2%)	11 (2.0%) ^d	115 (6.9%) ^{ac}	44.67, p < .001

The proportion of First Nations participants who had any mental health disorder diagnosis or treatment in the past year did not significantly differ across categories of exposure to sexual violence. However, several specific mental health disorders were significantly associated with exposure to sexual violence:

- > depression
- > anxiety

- > complex trauma disorder
- > bipolar disorder
- > personality disorder.

The proportion of those with a mental health disorder was significantly greater for participants who experienced sexual violence during both childhood and adulthood, and sometimes childhood only, than those who had not experienced any sexual violence or had only experienced it during adulthood.

Figure 88. First Nations participants: diagnosis or treatment for mental disorder in past year (n = 416)

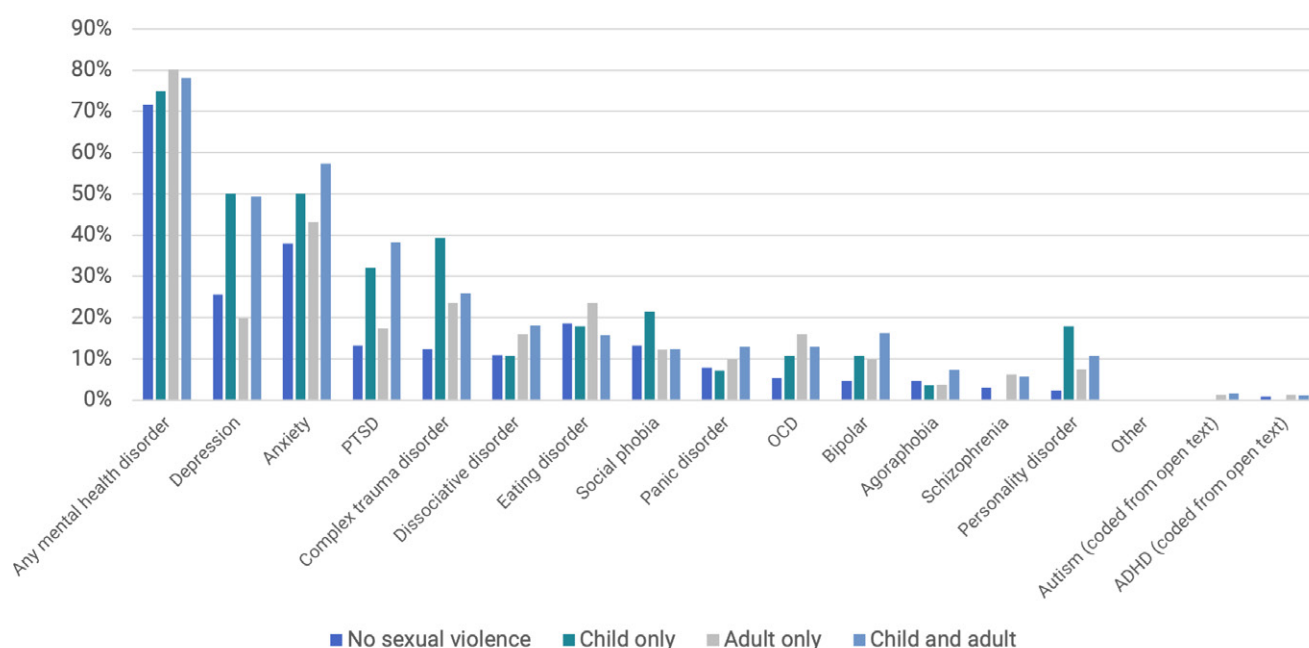


Table 73. First Nations participants: diagnosis or treatment for mental disorder in past year (n = 416)

	No sexual violence	Child only	Adult only	Child and adult	x ² / F
	n = 129	n = 28	n = 81	n = 178	
Any mental health disorder	78 (71.6%)	21 (75.0%)	65 (80.2%)	139 (78.1%)	2.40, p = .49
Depression	33 (25.6%) ^d	14 (50.0%) ^c	16 (19.8%) ^{bd}	88 (49.4%) ^{ac}	31.56, p < .001
Anxiety	49 (38.0%) ^d	14 (50.0%)	35 (43.2%)	102 (57.3%) ^a	12.14, p = .007
PTSD	17 (13.2%) ^d	9 (32.1%)	14 (17.3%) ^d	68 (38.2%) ^{ac}	28.57, p < .001
Complex trauma disorder	16 (12.4%) ^{bd}	11 (39.3%) ^a	19 (23.5%)	46 (25.8%) ^a	13.38, p = .004
Dissociative disorder	14 (10.9%)	3 (10.7%)	13 (16.0%)	32 (18.0%)	3.47, p = .33

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 129	n = 28	n = 81	n = 178	
Eating disorder	24 (18.6%)	5 (17.9%)	19 (23.5%)	28 (15.7%)	2.24, p = .52
Social phobia	17 (13.2%)	6 (21.4%)	10 (12.3%)	22 (12.4%)	1.81, p = .61
Panic disorder	10 (7.8%)	2 (7.1%)	8 (9.9%)	23 (12.9%)	2.54, p = .47
OCD	7 (5.4%)	3 (10.7%)	13 (16.0%)	23 (12.9%)	6.84, p = .08
Bipolar disorder	6 (4.7%)	3 (10.7%)	8 (9.9%)	29 (16.3%)	10.46, p = .02
Agoraphobia	6 (4.7%)	1 (3.6%)	3 (3.7%)	13 (7.3%)	1.99, p = .58
Schizophrenia	4 (3.1%)	0	5 (6.2%)	10 (5.6%)	n/a
Personality disorder	3 (2.3%) ^{bd}	5 (17.9%) ^a	6 (7.4%)	19 (10.7%) ^a	11.19, p = .011
Other	0	0	0	0	n/a
Autism (coded from open text)	0	0	1 (1.2%)	3 (1.7%)	n/a
ADHD (coded from open text)	1 (0.8%)	0	1 (1.2%)	2 (1.1%)	n/a

d. Disability

The proportion of participants who had ever been diagnosed with a disability or chronic illness was significantly higher for those who experienced sexual violence during both childhood and adulthood (49.7%) than for any other category, whereas the proportion who experienced sexual violence during

childhood only (40.0%) was significantly greater than those who experienced sexual violence during adulthood only (32.0%) or not at all (28.4%). However, exposure to sexual violence was not significantly associated with the average days of impairment in the last week.

Figure 89. All participants: prevalence of disability or chronic illness among victims of sexual violence (n = 3,013)

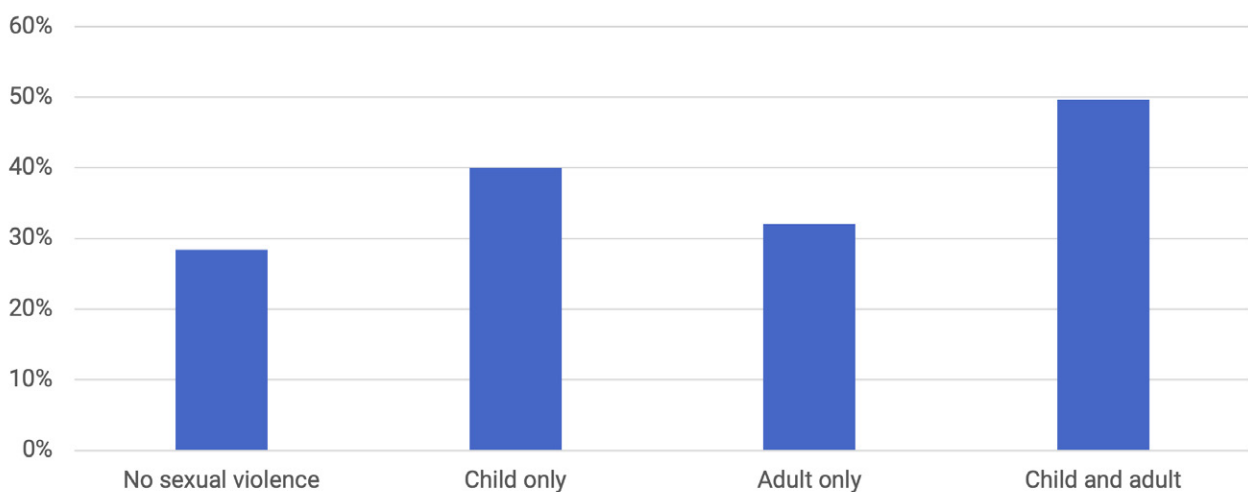


Figure 90. All participants: mean (sd) effects of disability or chronic illness among victims of sexual violence (n = 3,013)

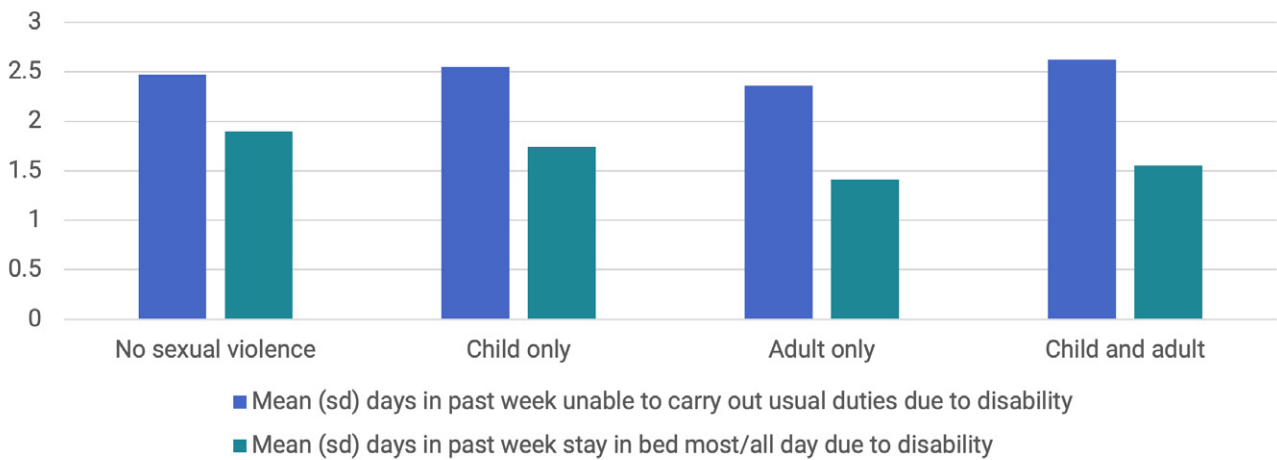


Table 74. All participants: disability (n = 3,013)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 596	n = 220	n = 538	n = 1,659	
Disability or chronic illness	169 (28.4%) ^{bd}	88 (40.0%) ^{ad}	172 (32.0%) ^c	824 (49.7%) ^{abc}	108.27, p < .001
Mean (sd) days in past week unable to carry out usual duties due to disability	2.47 (2.18)	2.55 (2.26)	2.36 (2.34)	2.62 (2.21)	0.77, p = .51
Mean (sd) days in past week stayed in bed most or all day due to disability	1.90 (2.04)	1.74 (2.02)	1.41 (1.87)	1.55 (1.80)	2.00, p = .11

The proportion of First Nations participants who had ever been diagnosed with a disability or chronic illness was significantly higher for those who experienced sexual violence during both childhood and adulthood (52.2%) than for those who had experienced sexual violence during adulthood only (40.0%) or did not experience it at all (27.2%). The average days spent in

bed most or all of the day due to disability was also significantly associated with experiences of sexual violence, with days impaired significantly greater for those who never experienced sexual violence compared to those who experienced sexual violence during childhood and adulthood.

Figure 91. First Nations participants: prevalence of disability or chronic illness among First Nations victims of sexual violence (n = 396)

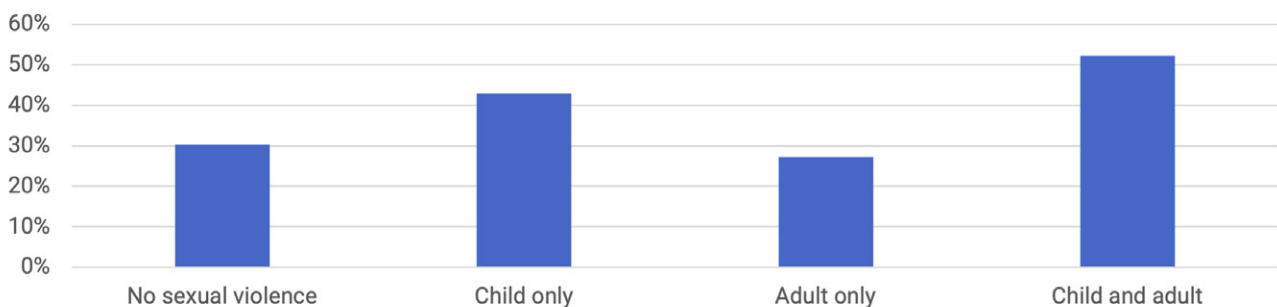


Figure 92. All participants: mean (sd) effects of disability or chronic illness among victims of sexual violence (n = 396)

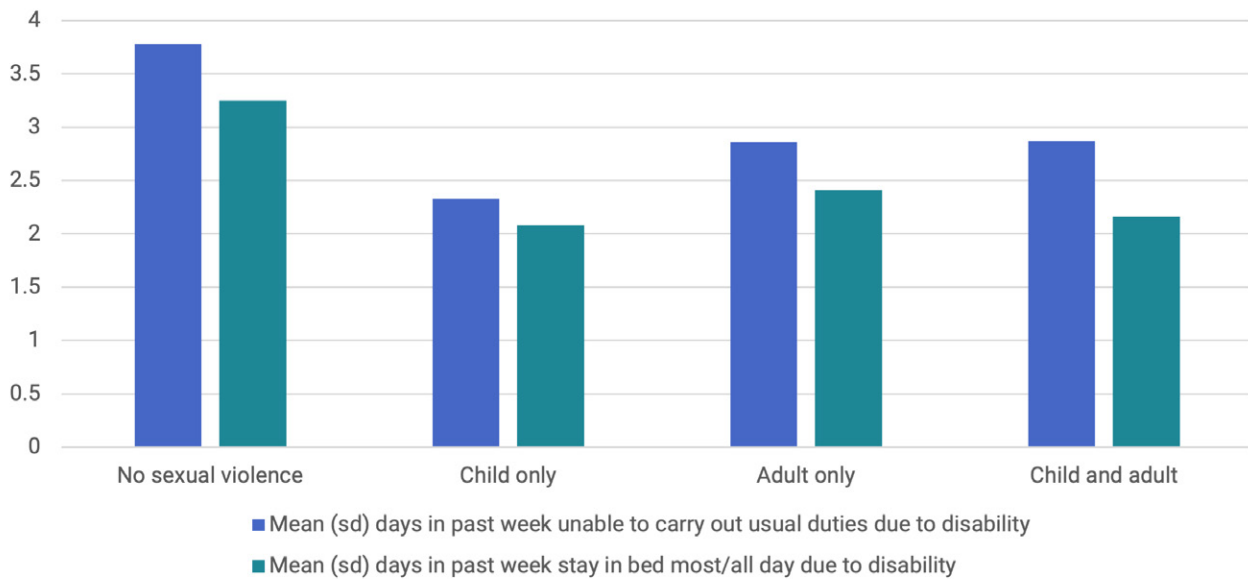


Table 75. First Nations participants: disability (n = 396)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 109	n = 28	n = 81	n = 178	
Disability or chronic illness	33 (30.3%) ^d	12 (42.9%)	22 (27.2%) ^d	93 (52.2%) ^{ac}	20.98, p < .001
Mean (sd) days in past week unable to carry out usual duties due to disability	3.78 (1.83)	2.33 (2.57)	2.86 (1.91)	2.87 (2.17)	2.02, p = .11
Mean (sd) days in past week stayed in bed most or all day due to disability	3.25 (1.68) ^d	2.08 (1.98)	2.41 (1.89)	2.16 (1.92) ^a	2.80, p = .042

e. HIV status

Experiencing sexual violence was significantly associated with having been tested for HIV in the past year. Participants who experienced sexual violence during adulthood only (42.9%) were significantly more likely to have been tested for HIV in the past year than those who never experienced sexual violence (23.3%), experienced it during both childhood and adulthood (27.8%), or experienced it during childhood only (20.9%). The proportion of participants who had never been tested for HIV was significantly greater for those who had only experienced sexual violence during childhood (27.7%) than for all other categories (7.4%-18.1%).

HIV status was also significantly associated with having experienced sexual violence. Specifically, the proportion of participants who were HIV-positive was significantly greater for those who never experienced sexual violence (11.8%) or experienced it during adulthood only (17.3%) compared to those who experienced it during childhood only (5.0%) or during both childhood and adulthood (3.6%). Participants who were unsure about their HIV status were significantly more likely to have never experienced sexual violence (21.2%) or have only experienced it during childhood (23.2%) than those who experienced sexual violence during adulthood only (8.9%) or during both childhood and adulthood (13.1%).

Figure 93. All participants: victims of sexual violence: tested for HIV in past year (n = 2,992)

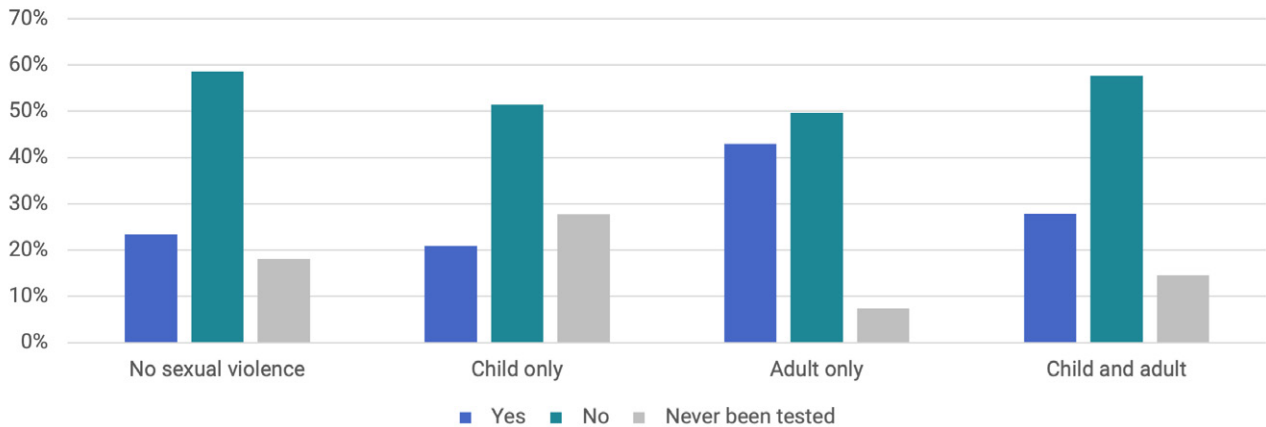


Figure 94. All participants: victims of sexual violence HIV status (n = 2,992)

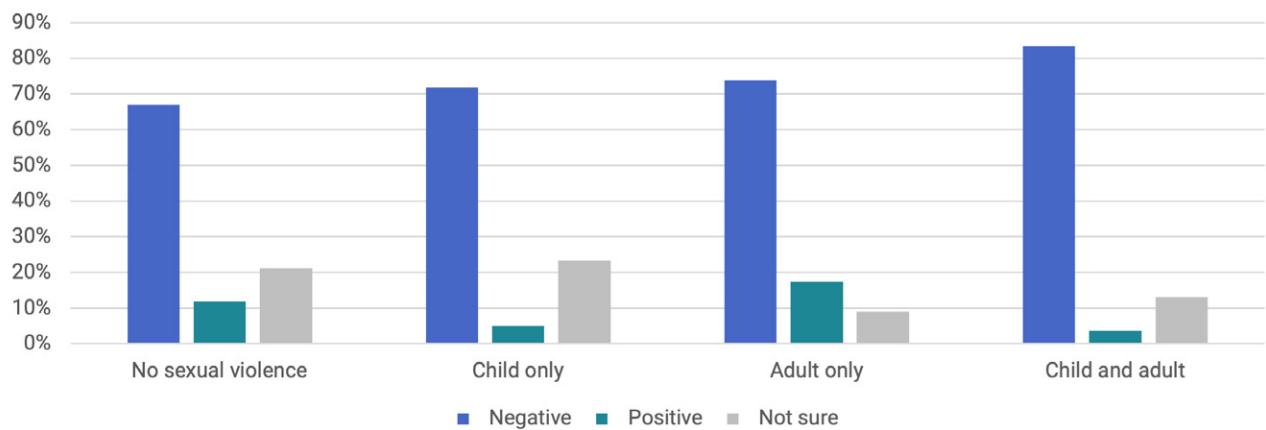


Table 76. All participants: HIV (n = 2,992)

	No sexual violence	Child only	Adult only	Child and adult	x ² / F
	n = 575	n = 220	n = 538	n = 1,659	
Tested for HIV in past year					
Yes	134 (23.3%) ^c	46 (20.9%) ^c	231 (42.9%) ^{abd}	461 (27.8%) ^c	102.56, p < .001
No	337 (58.6%) ^c	113 (51.4%)	267 (49.6%) ^{ad}	956 (57.6%) ^c	
Never been tested	104 (18.1%) ^{bc}	61 (27.7%) ^{acd}	40 (7.4%) ^{abd}	242 (14.6%) ^{bc}	
HIV status					
Negative	385 (67.0%) ^d	158 (71.8%) ^d	397 (73.8%) ^d	1,383 (83.4%) ^{abc}	175.86, p < .001
Positive	68 (11.8%) ^{bd}	11 (5.0%) ^{ac}	93 (17.3%) ^{bd}	59 (3.6%) ^{ac}	
Not sure	122 (21.2%) ^{cd}	51 (23.2%) ^{cd}	48 (8.9%) ^{ab}	217 (13.1%) ^{ab}	

First Nations participants who experienced sexual violence during adulthood only (60.5%) were significantly more likely to have been tested for HIV in the past year than those who had not experienced sexual violence (38.0%), had experienced it

during childhood only (32.1%), and during both childhood and adulthood (36.0%). Note that the 'no' and 'never been tested' categories were combined due to multiple categories having smaller-than-expected cell counts.

Figure 95. First Nations victims of sexual violence tested for HIV in past year (n = 395)

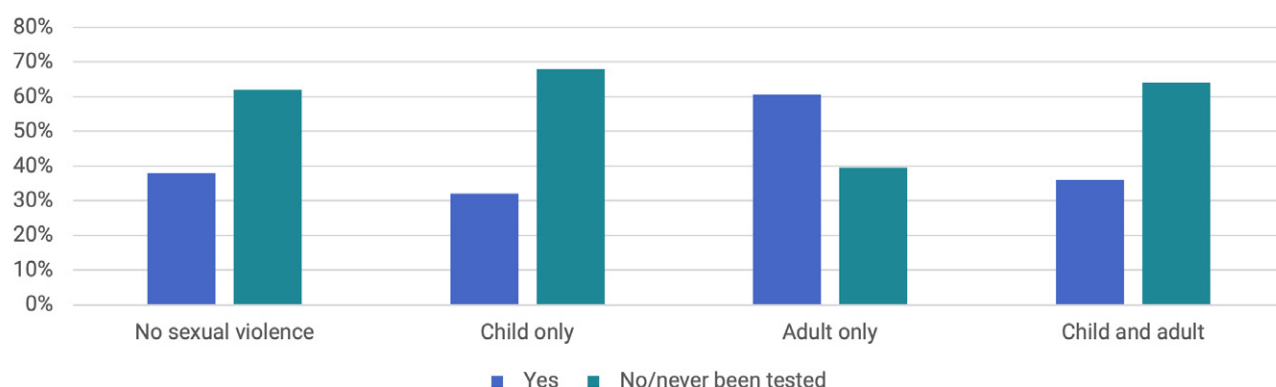


Table 77. First Nations participants: HIV (n = 395)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 109	n = 28	n = 81	n = 178	
Tested for HIV in past year					
Yes	41 (38.0%) ^c	9 (32.1%)	49 (60.5%) ^{ad}	64 (36.0%) ^c	15.88, p = .001
No or never been tested	67 (62.0%) ^c	19 (67.9%)	32 (39.5%) ^{ad}	114 (64.0%) ^c	

f. Educational attainment

Exposure to sexual violence was significantly associated with educational attainment. In particular, the proportion of participants who had a bachelor's degree or higher was significantly greater for those exposed to sexual violence during

adulthood only (60.9%) compared to those not exposed to sexual violence (44.2%), or those exposed during childhood only (37.0%) or during both childhood and adulthood (49.7%).

Figure 96. All participants: educational attainment (n = 3,140)

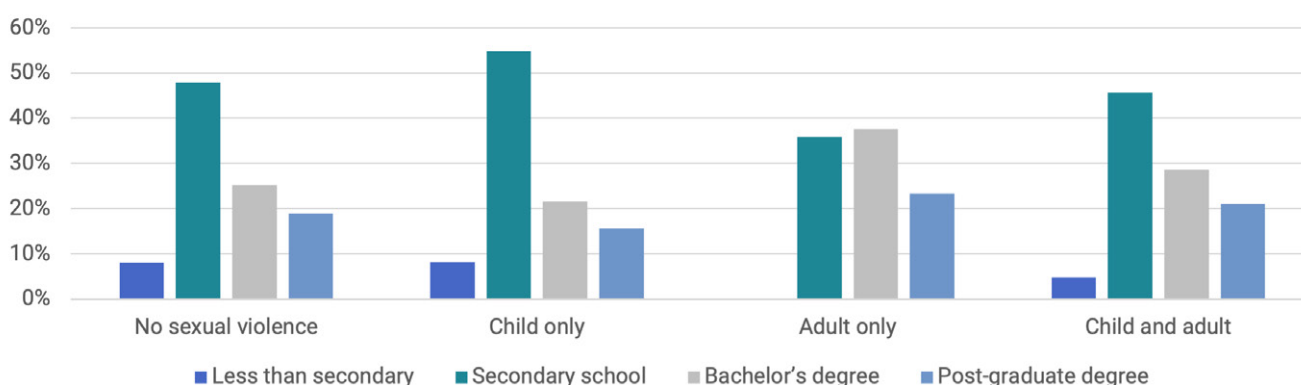


Table 78. All participants: educational attainment (n = 3,140)

	No sexual violence	Child only	Adult only	Child and adult	x ² / F
	n = 729	n = 219	n = 537	n = 1,655	
Less than secondary	58 (8.0%) ^{cd}	18 (8.2%) ^{cd}	17 (3.2%) ^{ab}	78 (4.7%) ^a	61.69, p < .001
Secondary school	349 (47.9%) ^c	120 (54.8%) ^c	193 (35.9%) ^{abd}	754 (45.6%) ^c	
Bachelor's degree	184 (25.2%) ^c	47 (21.5%) ^c	202 (37.6%) ^{abd}	474 (28.6%) ^c	
Postgraduate degree	138 (18.9%)	34 (15.5%)	125 (23.3%)	349 (21.1%)	

Educational attainment did not significantly differ across categories of exposure to sexual violence for First Nations participants. The bachelor's degree and postgraduate degree categories were combined due to smaller-than-expected cell sizes.

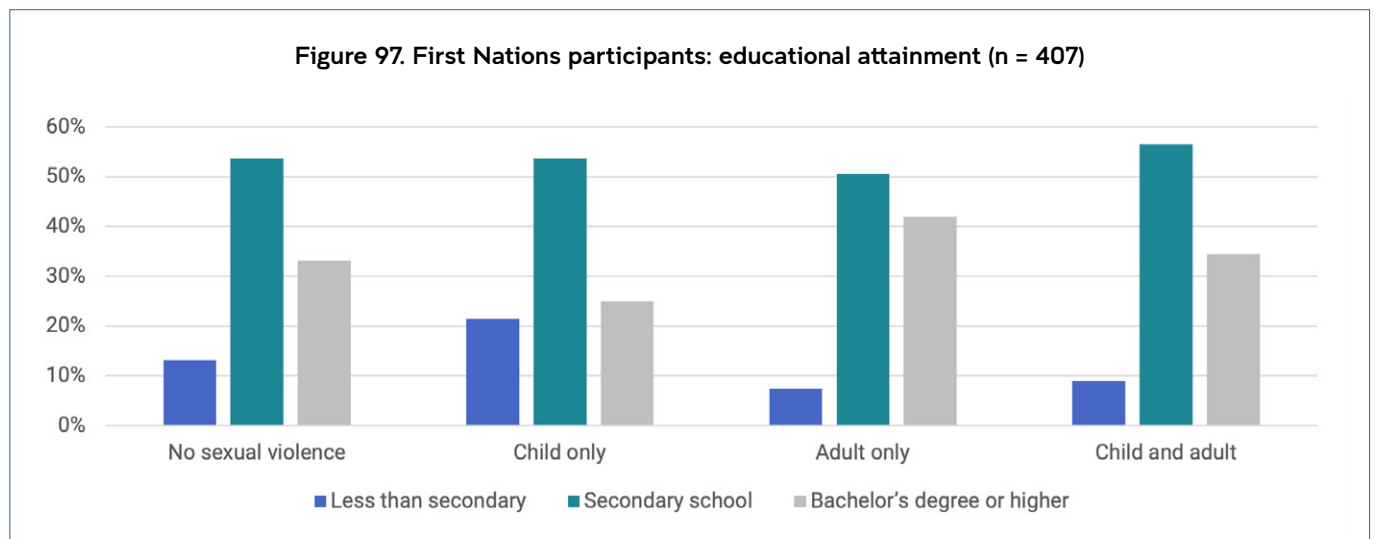


Table 79. First Nations participants: educational attainment (n = 407)

	No sexual violence	Child only	Adult only	Child and adult	x ² / F
	n = 121	n = 28	n = 81	n = 177	
Less than secondary	16 (13.2%)	6 (21.4%)	6 (7.4%)	16 (9.0%)	7.40, p = .29
Secondary school	65 (53.7%)	15 (53.6%)	41 (50.6%)	100 (56.5%)	
Bachelor's degree or higher	40 (33.1%)	7 (25.0%)	34 (42.0%)	61 (34.5%)	

g. Employment status

The proportion of participants employed in the past 3 months significantly differed across the categories of exposure to sexual violence. Participants exposed to sexual violence during adulthood only were significantly more likely to work full time (61.3%) than all other categories of sexual violence exposure (40.0%-50.5%), while participants who did not ever experience sexual violence (50.5%) were significantly more likely to work full time than those exposed to sexual violence during

childhood only (40.0%) or during both childhood and adulthood (43.2%). Likewise, participants who experienced sexual violence during adulthood only (14.5%) were significantly less likely to be unemployed and not looking for work compared to those who had never experienced sexual violence (20.8%), or had experienced it during childhood only (25.5%), or during both childhood and adulthood (21.8%).

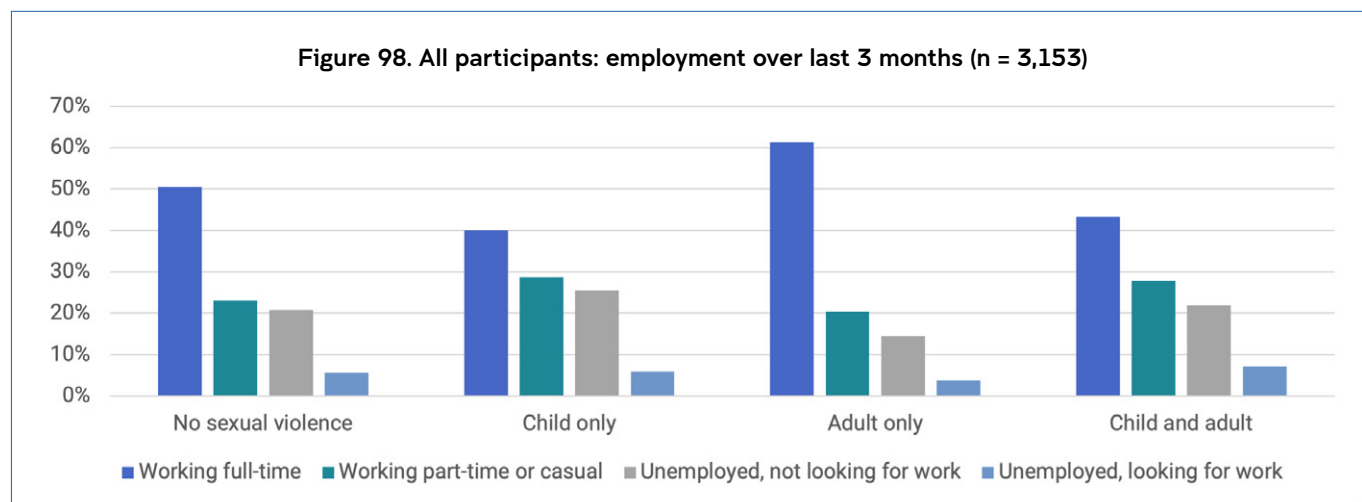


Table 80. All participants: employment over last 3 months (n = 3,153)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 736	n = 220	n = 538	n = 1,659	
Working full time	372 (50.5%) ^{bcd}	88 (40.0%) ^{ac}	330 (61.3%) ^{abd}	717 (43.2%) ^{ac}	64.97, p < .001
Working part time or casual	170 (23.1%)	63 (28.6%)	110 (20.4%) ^d	462 (27.8%) ^c	
Unemployed, not looking for work	153 (20.8%) ^c	56 (25.5%) ^c	78 (14.5%) ^{abd}	362 (21.8%) ^c	
Unemployed, looking for work	41 (5.6%)	13 (5.9%)	20 (3.7%) ^d	118 (7.1%) ^c	

The proportion of First Nations participants employed in the past 3 months significantly differed across the categories of exposure to sexual violence. The proportion of participants working full time was significantly greater for those who were not exposed to sexual violence (75.4%) or exposed during adulthood only (86.4%) compared to those exposed during childhood only (57.1%) or during both childhood and adulthood (42.7%). The inverse was true for participants who

were unemployed (unemployed looking for work and not looking for work were combined due to multiple categories having smaller-than-expected cell counts). The proportion working part time or as casual employees was significantly greater for those who experienced sexual violence during childhood and adulthood only (24.7%) compared to those who experienced it during adulthood only (7.4%) or did not experience sexual violence (8.2%).

Figure 99. First Nations participants: employment over last 3 months (n = 409)

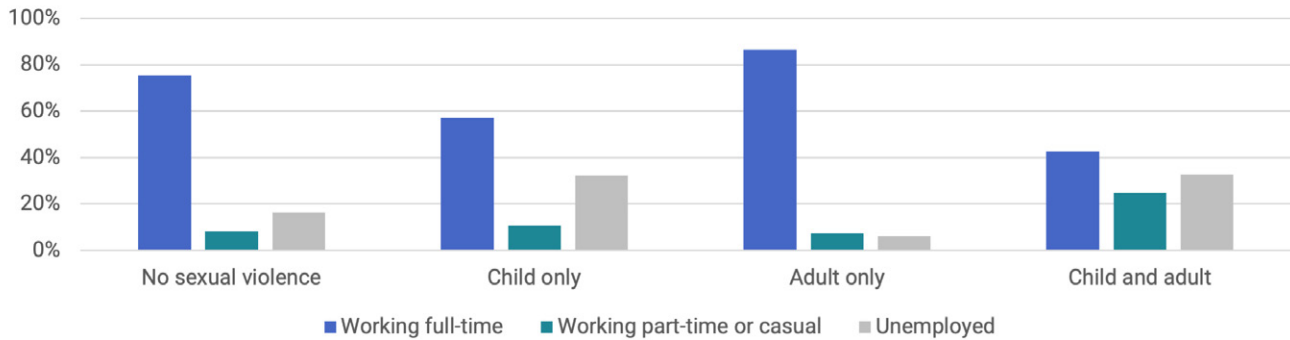


Table 81. First Nations participants: employment over last 3 months (n = 409)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 122	n = 28	n = 81	n = 178	
Working full time	92 (75.4%) ^d	16 (57.1%) ^{ac}	70 (86.4%) ^{bd}	76 (42.7%) ^{ac}	60.83, p < .001
Working part time or casual	10 (8.2%) ^d	3 (10.7%)	6 (7.4%) ^d	44 (24.7%) ^{ac}	
Unemployed	20 (16.4%) ^d	9 (32.1%) ^{ac}	5 (6.2%) ^{bd}	58 (32.6%) ^{ac}	

h. Income

There were significant differences in the proportions of participants who experienced sexual violence and categories of total annual household income, with much of the difference limited to the lowest income band. Specifically, the proportion of participants whose household income was less than \$50,000 was significantly lower for those who experienced sexual violence during adulthood only (20.1%) than for those not

exposed to sexual violence (28.0%), exposed during childhood only (30.0%), or exposed during both childhood and adulthood (31.7%). Furthermore, those who experienced sexual violence during adulthood only were significantly more likely than those who experienced sexual violence during both childhood and adulthood to have an annual household income of \$150,000 or greater (23.8% vs. 16.6%).

Figure 100. All participants: total annual household income before taxes (n = 3,153)

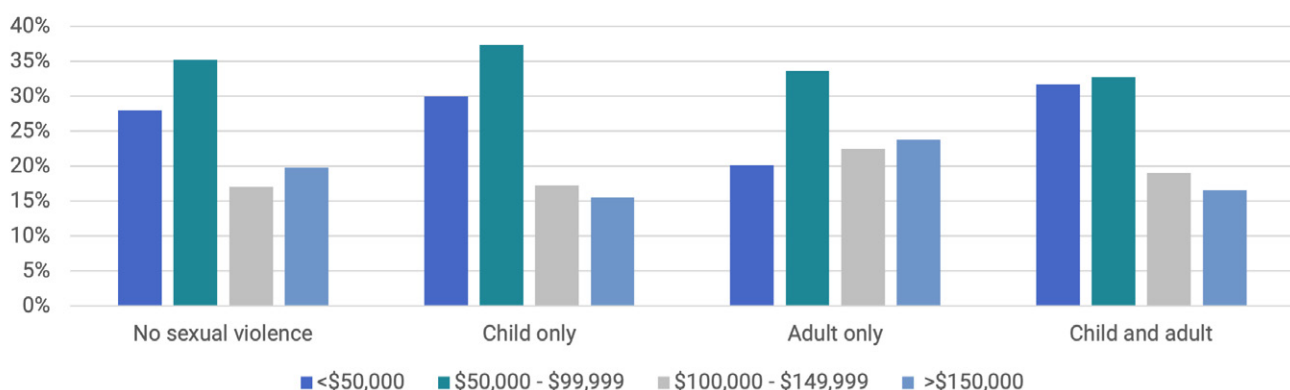


Table 82. All participants: total annual household income before taxes (n = 3,153)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 736	n = 220	n = 538	n = 1,659	
<\$50,000	206 (28.0%)c	66 (30.0%)c	108 (20.1%)abd	526 (31.7%)c	39.83, p < .001
\$50,000-\$99,999	259 (35.2%)	82 (37.3%)	181 (33.6%)	543 (32.7%)	
\$100,000-\$149,999	125 (17.0%)	38 (17.3%)	121 (22.5%)	315 (19.0%)	
>\$150,000	146 (19.8%)	34 (15.5%)	128 (23.8%)d	275 (16.6%)c	

Total annual household income was also significantly associated with First Nations participants' experiences of sexual violence. Specifically, the proportion of participants whose household income was less than \$50,000 was

significantly higher for those who experienced sexual violence during both childhood and adulthood (38.8%) than for those not exposed to sexual violence (17.2%) or exposed during adulthood only (12.3%).

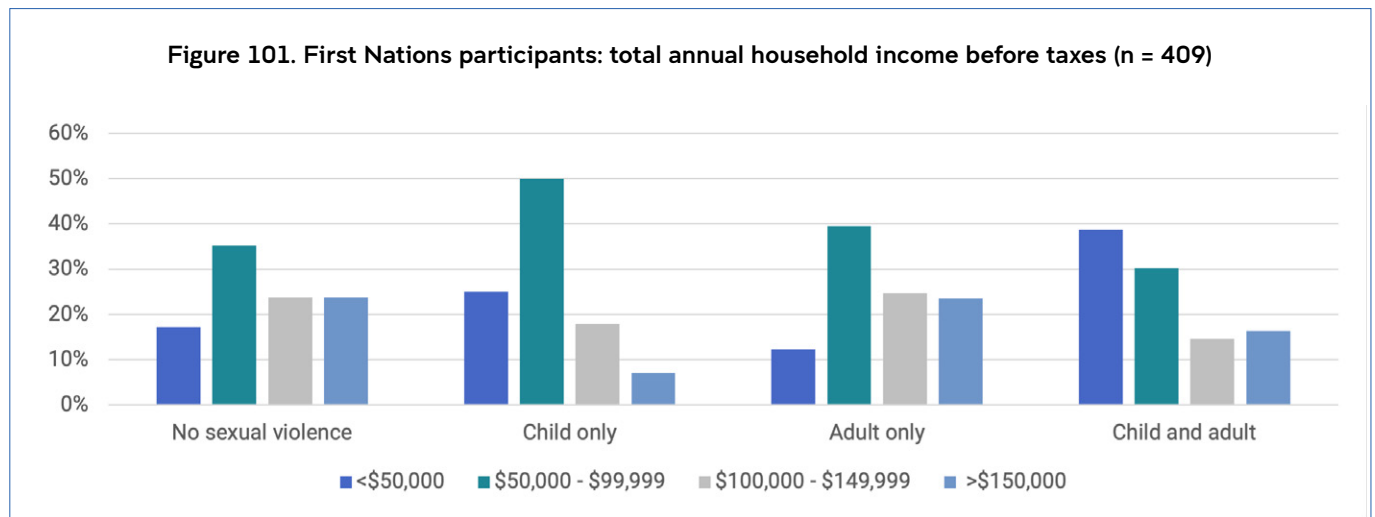


Table 83. First Nations participants: total annual household income before taxes (n = 409)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 122	n = 28	n = 81	n = 178	
<\$50,000	21 (17.2%)d	7 (25.0%)	10 (12.3%)d	69 (38.8%)ac	33.28, p < .001
\$50,000-\$99,999	43 (35.2%)	14 (50.0%)	32 (39.5%)	54 (30.3%)	
\$100,000-\$149,999	29 (23.8%)	5 (17.9%)	20 (24.7%)	26 (14.6%)	
>\$150,000	29 (23.8%)	2 (7.1%)	19 (23.5%)	29 (16.3%)	

i. Attitudes

The extent of participants' endorsement of various sexual violence myths and attitudes was measured using 21 questions, with the average score across these 21 items significantly associated with exposure to sexual violence. The average overall score differed significantly for each category of exposure to sexual violence. In other words, those who never experienced sexual violence had significantly higher scores, and therefore greater overall endorsement of rape myths and attitudes, than those who experienced sexual violence:

- > during adulthood only
- > during childhood only
- > during both childhood and adulthood.

Participants who had experienced sexual violence during adulthood only had significantly greater scores than those who had experienced it during childhood only, or during both childhood and adulthood. Those who had experienced sexual violence during childhood only had significantly greater scores than those who had experienced it during both childhood and adulthood. A similar pattern of association was present when examining the average scores for the 21 items separately.

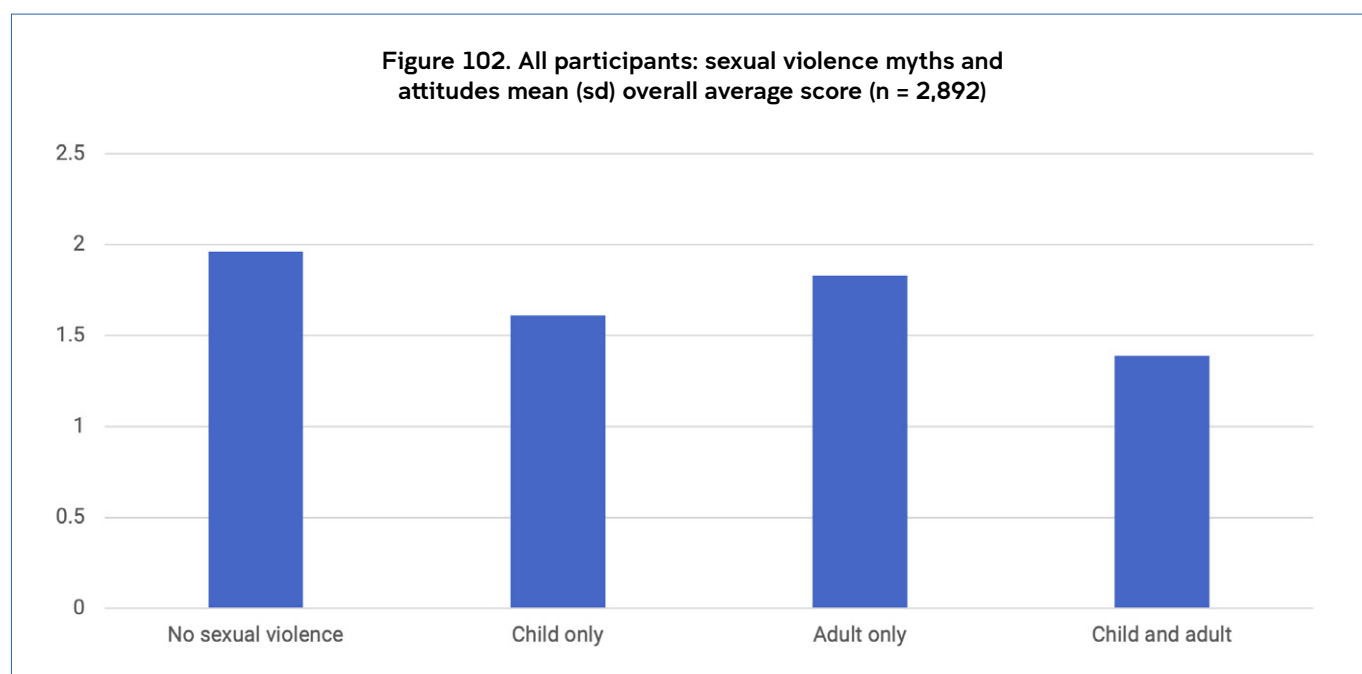


Table 84. All participants: rape myths and attitudes mean (sd) score (range 1 = strongly disagree to 5 = strongly agree) (n = 2,892)

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 475	n = 220	n = 538	n = 1,659	
Overall average score	1.96 (0.86) ^{bcd}	1.61 (0.73) ^{acd}	1.83 (0.94) ^{abd}	1.39 (0.56) ^{abc}	91.23, p < .001
Sexual assault accusations are often used to get back at someone	2.38 (1.27) ^d	2.18 (1.31) ^d	2.29 (1.34) ^d	1.78 (1.13) ^{abc}	44.76, p < .001
A lot of people lead someone on and then cry rape	2.23 (1.29) ^{bcd}	1.91 (1.26) ^{ad}	1.92 (1.24) ^{ad}	1.48 (0.96) ^{abc}	60.06, p < .001
Rape happens when a person's sex drive gets out of control	2.23 (1.28) ^{bd}	1.92 (1.25) ^{ad}	2.06 (1.34) ^d	1.54 (1.05) ^{abc}	55.00, p < .001

	No sexual violence	Child only	Adult only	Child and adult	χ^2 / F
	n = 475	n = 220	n = 538	n = 1,659	
Sometimes no means yes.	1.87 (1.16) ^{bd}	1.51 (1.06) ^{acd}	1.76 (1.25) ^{bd}	1.29 (0.77) ^{abc}	52.01, p < .001
Women cannot rape.	1.73 (1.12) ^{bd}	1.39 (0.91) ^{acd}	1.65 (1.19) ^{bd}	1.22 (0.72) ^{abc}	47.25, p < .001
Men cannot be raped.	1.64 (1.07) ^{bd}	1.27 (0.80) ^{ac}	1.58 (1.17) ^{bd}	1.14 (0.61) ^{ad}	50.82, p < .001
If both people are high or drunk, you can never know if someone was sexually assaulted.	2.36 (1.14) ^{bd}	2.12 (1.22) ^{ad}	2.32 (1.29) ^d	1.83 (1.07) ^{abc}	41.59, p < .001
Trans women are more likely to be sexual predators.	1.91 (1.17) ^{bd}	1.59 (1.07) ^{ad}	1.76 (1.22) ^d	1.37 (0.92) ^{abc}	38.32, p < .001
Someone has already consented to sex if they are at a sex-on-premises venue.	1.94 (1.18) ^{bcd}	1.51 (0.97) ^{acd}	1.73 (1.19) ^{abd}	1.26 (0.74) ^{abc}	66.96, p < .001
It's OK to touch a stranger at an LGBTIQA+ venue or event.	1.83 (1.14) ^{bd}	1.39 (0.83) ^{ac}	1.70 (1.15) ^{bd}	1.24 (0.69) ^{ac}	59.33, p < .001
Removing a condom during sex without telling your partner is OK if it feels good.	1.61 (1.08) ^{bd}	1.25 (0.73) ^{ac}	1.52 (1.13) ^{bd}	1.13 (0.58) ^{ac}	47.78, p < .001
It is sexual assault if a transgender person doesn't disclose their gender before sex.	2.24 (1.27) ^{bd}	1.92 (1.20) ^a	2.09 (1.36) ^d	1.77 (1.18) ^{ac}	21.38, p < .001
It's OK to make a sexual comment to a stranger at an LGBTIQA+ venue.	1.99 (1.10) ^{bd}	1.58 (0.94) ^{ac}	1.97 (1.24) ^{bd}	1.50 (0.88) ^{ac}	42.24, p < .001
Respecting 'safe words' is optional during BDSM play.	1.94 (1.27) ^{bcd}	1.54 (1.03) ^{ad}	1.76 (1.26) ^{ad}	1.31 (0.93) ^{abc}	46.62, p < .001
Lesbian relationships are the least likely to be abusive.	2.13 (1.11) ^d	1.98 (1.08) ^d	2.06 (1.18) ^d	1.75 (1.04) ^{abc}	21.53, p < .001
Bisexual people owe their partner a threesome.	1.75 (1.14) ^{bcd}	1.32 (0.79) ^{acd}	1.57 (1.14) ^{abd}	1.16 (0.59) ^{abc}	58.68, p < .001
Asexual people just need to be taught to have better sex.	1.84 (1.16) ^{bd}	1.40 (0.92) ^{acd}	1.71 (1.22) ^{cd}	1.19 (0.66) ^{abc}	70.06, p < .001
Real men fight back when being raped.	1.95 (1.23) ^{bcd}	1.49 (1.00) ^{acd}	1.77 (1.27) ^{abd}	1.26 (0.79) ^{abc}	63.91, p < .001
Asking for consent kills the mood.	1.86 (1.17) ^{bd}	1.41 (0.89) ^{ac}	1.75 (1.18) ^{bd}	1.31 (0.82) ^{ad}	46.59, p < .001
If someone orgasms during sex, then you know they wanted it.	1.90 (1.18) ^{bcd}	1.48 (0.98) ^{acd}	1.71 (1.17) ^{abd}	1.27 (0.76) ^{abd}	56.69, p < .001
It's OK for religious, cultural and initiation ceremonies to involve sexual behaviours.	1.91 (1.20) ^{bd}	1.70 (1.03) ^{ad}	1.80 (1.22) ^d	1.40 (0.86) ^{abc}	38.72, p < .001

Conclusion

This report has presented the first large-scale study of LGBTIQ+SB experiences of sexual violence in Australia or internationally. While other large health surveys of LGBTIQ+SB people have provided important data on their experiences and impacts of family, domestic and sexual violence, our study focused specifically on experiences of sexual violence over the lifespan, distinguishing between different forms and contexts of sexual violence in childhood and adulthood for different gender categories, with particular attention to the experience of First Nations LGBTIQ+SB peoples. Survey recruitment strategies include online but also face-to-face recruitment in regional and rural areas to maximise participation from First Nations people who might otherwise not have the opportunity to contribute to the study.

The findings of the project have emphasised the importance of examining experiences of sexual violence based on gender identity and sexual orientation. The proportion of participants who experienced sexual violence in childhood, adulthood, or both, differed significantly by gender identity and sexual orientation. Gender identity and sexual orientation impacted the risk of experiencing different types of sexual violence, age of first onset, the risk of revictimisation, the context or reason for this violence, and the identity of perpetrator/s. While First

Nations participant experiences were often concordant with the experiences of other participants, the study identified distinct patterns and circumstances of victimisation for some First Nations communities.

Sexual violence victimisation was associated with significant impacts on health, wellbeing, financial security, and workforce participation, particularly where sexual violence occurred or began in childhood. As a result, LGBTIQ+SB people most impacted by sexual violence are less likely to have the financial resources to pay for specialised or private health care and other supports. LGBTIQ+SB peoples with the least exposure to sexual violence were also the most likely to hold negative attitudes and myths about sexual violence. The findings of the study underscore the long-term and cumulative impacts of sexual violence for LGBTIQ+SB peoples and the intersectional impacts of sexual violence by gender identity and sexual orientation, including for First Nations peoples.

We are grateful to everyone who shared their experiences and views with us by participating in the study, as well as the many organisations and individuals who have supported the project by helping us to recruit participants and providing us with advice and support.

Appendix A

First Nations co-design governance

Co-design governance process (Dudgeon et al., 2017: 27)	Co-design governance process for First Nations participants – LGBTQIA+SB sexual violence survey
Co-design processes are inclusive and draw on many perspectives, people, experts, disciplines, and sectors. The idea is to find real, workable solutions to complex issues, so it is important to draw on many perspectives, to challenge entrenched thinking and to draw in other possibilities.	The first stage of co-design for this project began in September to October 2021, when a number of round tables (consisting of First Nations and non-First Nations LGBTQIA+SB community and services) were conducted to: > Part one – Identify what’s already being done. Through SurveyMonkey, the round tables worked to identify what has been achieved in this space. The SurveyMonkey survey was distributed through First Nations and non-First Nations LGBTQIA+SB services and allies. > Part two – Set the scene and exploring survey design. Identification of the 6 priorities to be developed were discussed over 3 closed workshops with First Nations and non-First Nations LGBTQIA+SB services and allies. > Part three – The Gathering A larger group of First Nations and non-First Nations LGBTQIA+SB service providers, contributed to refining the pilots and presented them in a final closing session with the Minister and Department. This first stage of co-design, and subsequent round table discussions, led to the resourcing of this first LGBTQIA+SB experiences of sexual violence research project. During this period, a Participatory Action Advisory Group (PAG) consisting of First Nations and non-First Nations LGBTQIA+SB community and service providers, was established to oversee the project. Parallel to the PAG, a group of non-identified First Nations LGBTQIA+SB elders were involved in discussions about brokering between First Nations culture and Western culture throughout the whole study.
Co-design is person-centred and aims to understand the experience of a service, program or activity from the consumer’s or client’s point of view. Co-design asks service providers and service users to walk in the shoes of each other and to use these experiences as the basis of designing changes. This can include using diagrams, telling stories, and so on. Co-design processes thrive when boundaries are flexible and silos are broken down, when real listening and dialogue can occur across what were previously divides.	The First Nations lead of the project, Dr Vanessa Lee-Ah Mat, began introducing herself (by genealogy) and the project across National Indigenous Radio Service so that families could contact her with questions and be prepared for her arrival within their communities. First Nations services (i.e. health, employment, land councils, social emotional wellbeing, youth, law, families and domestic violence etc) within communities across urban, regional and remote Australia were contacted and arrangements were made to meet with First Nations LGBTQIA+SB individuals and/or families to discuss the survey and the best way to share the QR code within their communities. These discussions involved the sharing of genealogy and various cultural knowledges to ensure relationship connections were secured.

Co-design governance process (Dudgeon et al., 2017: 27)	Co-design governance process for First Nations participants – LGBTQIA+SB sexual violence survey
Co-design starts with a desired end, rather than with what is wrong with the present service. It builds backwards from the outcomes being sought. It stresses positive, open relationships among co-designers, and avoids potential conflict by taking focus off the negative.	Each First Nations community has different environments, totems, kinship connections, and ways of yarning or talking, making each communication process different. For culturally safe purposes and local ownership, it is essential to choose tools that the community will have the time to participate in and that are culturally appropriate. This made explaining the reason behind the survey paramount and linking back to the First Nations communities' cultural norms equally as important. Often, if First Nations people across Australia can't see how the outcome culturally fits into their community, they struggle to understand the importance of the outcome regardless of how needed the services are.
Co-design is focused on developing practical, real-world solutions to issues facing individuals, families and communities.	At each meeting, First Nations communities came up with their own solutions to administer the LGBTQIA+SB sexual violence survey so as to keep the First Nations LGBTQIA+SB individuals safe. Some organisations included the flyer with the QR code into their family packs, newsletters, postings at supermarkets and community noticeboards. In the Torres Strait and Cape York, an online news article was released explaining Vanessa Lee-Ah Mat's genealogy, kinship line and involvement in the project, as well as the QR Code to the survey. Dr Lee-Ah Mat found that different generations had different solutions to sharing the flyer with the QR code and to how communities wanted to discuss the project. Some generations across communities wanted all age groups at the meetings, while others wanted various age groups or families individually.
In co-design processes, service users should also have access to the information, skills, capacities and support to participate effectively in co-designing services. This can include support to attend co-design processes and even training if required.	The findings for the First Nations component of this report were developed by the First Nations lead in discussions with the non-identified First Nations LGBTQIA+SB elders. This was necessary to ensure that the reporting was user-friendly for First Nations services.

Appendix B

Project Advisory Group

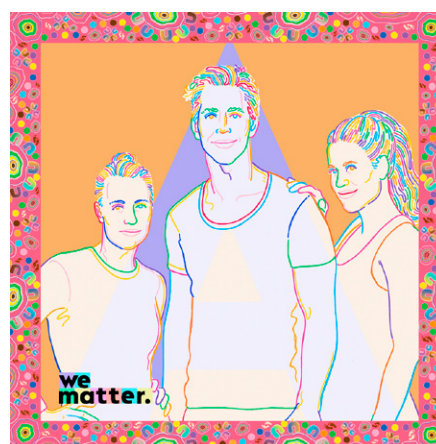
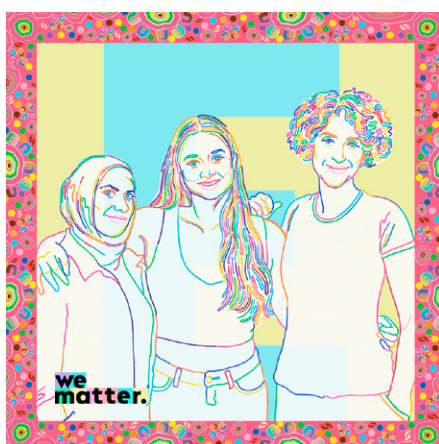
Name	Organisation	Position	State
Moo Baulch	Consultant	PAG Chair and consultant	NSW
Joe Ball	Switchboard	CEO	VIC
Rochelle Byrne		First Nations Community Advocate	QLD
Sel Cooper	University of Canberra	Academic	ACT
Margherita Coppolino	Margherita Coppolino & Associates	Consultant	VIC
Vik Fraser	A Gender Agenda (AGA)	Executive Director	National
Kathryn Fordyce	National Association of Services Against Sexual Violence (NASASV)	Board member	National
Jen Hamer	Relationships Australia South Australia (RASA)	Executive Manager Education & Trauma Services	SA
James Holland	Health Equity Matters (Formerly AFAO)	Policy Manager	National
Jessica Ison	La Trobe University	Academic	VIC
Eloise Layard	ACON	Manager, LGBTQ+ Health Programs	NSW
Peter Pilot-Wakaisu		First Nations Community Liaison and Advocate	Torres Strait
Mish Pony	Scarlet Alliance	CEO	National
Kai Noonan	LGBTIQ+ Health Alliance (LHA)	Director	National
Chantel Denison/Allan Ball/ James Eastburn/Daniel Weightman	Department of Social Services	Observers – Prevention and Diversity Section, Response and Behaviour Change Branch	National

Appendix C

Promotional summary and artworks

In order to promote the survey to organisations and on social media, the research team engaged a team of designers to produce assets, including posters, social media tiles. Designers Justin Sayarath and Lisa Anne Caruana represented LGBTIQ+SB, culturally and linguistically diverse and First Nations communities and produced materials that spoke directly to these communities.

Examples of assets include:



Appendix D – Media release



MEDIA RELEASE

National Survey of LGBTIQ+ Experiences of Sexual Violence

Survey open now, closes 28th February.
Conducted by a team of researchers at UNSW, Sydney
Funded by Commonwealth Department of Social Services (DSS)

The University of New South Wales is asking LGBTIQ+ and Brotherboy & Sistergirl community members about their views and/or experiences of sexual violence.

Research shows that LGBTIQ+ and Brotherboy & Sistergirl people experience sexual violence at a higher rate and in different ways than the broader Australian population. **However, until now, there has never been national-level research into how LGBTIQ+ and Brotherboy & Sistergirl Australians experience sexual violence.**

The survey will collect important information on both the lived experiences of sexual violence amongst LGBTIQ+ and Brotherboy & Sistergirl people, including prevalence, social norms and help-seeking behaviours as well as broader community attitudes, beliefs, bystander actions, and practices relating to LGBTIQ+ sexual violence prevention for people of diverse sexual orientation and gender identity.

Survey results will be used to make sure that services and support are available and accessible for everyone who needs it.

“This survey is the first of its kind in Australia and globally. It will provide benchmark data helping us to better understand the unique experiences of LGBTIQ+ people as well as the attitudes and beliefs of different LGBTIQ+ communities. The results of this survey will provide landmark information to help guide prevention and ensure sensitive and tailored responses to those who experience sexual violence.”

Professor Jan Breckenridge

WHO IS ELIGIBLE

We welcome anyone who identifies as part of the LGBTIQ+ community and/or a Brotherboy or Sistergirl. Participants must be over the age of 18 and must live in Australia. **You do not have to have had an experience of sexual violence to participate in the survey.**

WHAT WE NEED FROM YOU

- Share the survey link and promotional images with your network via social media, email, or newsletters (see media link below).
- Put a poster up in your office, reception or waiting room.
- Forward survey information on to any relevant organisations.
- Contact us for interview or comment, contact information is below.

- Get in touch with us for more information.

WHERE TO ACCESS THE SURVEY

The survey is available [here](#)

MEDIA

For artwork, posters and flyers see:

<https://www.dropbox.com/scl/fo/tfe0yp5s2ggae93j18clr/h?rlkey=pcqmigcs2c0xc2xmvjb3w15fb&dl=0>

Artwork by Justin Sayarath and First Nations Artist Lisa Anne Caruana.

ABOUT THE RESEARCHERS

Our research team is representative of and deeply committed to the communities surveyed. This ensures that we can capture information from all diversities of the LGBTIQ+, Brotherboy and Sistergirl communities. For more information on each member of our research team is available on the survey page

CONTACT

Professor Jan Breckenridge j.breckenridge@unsw.edu.au

Professor Michael Salter Michael.salter@unsw.edu.au

Dr Vanessa Lee-Ah Mat vanessa.lee1@unsw.edu.au

Mailin Suchting (Manager) mailin.suchting@unsw.edu.au

Appendix E

Detailed organisational and influencer promotion

Jurisdiction	Organisation
National	QLife
	1800Respect
	Full Stop Australia
	Intersex Peer Support Australia
	National Indigenous Radio Service
	Forcibly Displaced People Network
	Minus18
	PFLAG Australia
	Transcend
	Health Equity Matters
	LGBTIQ+ Health Australia
	Equality Australia
	End Rape on Campus (EROC) Australia
	What Were You Wearing? Australia
	She's A Crowd
	The Grace Tame Foundation
	Learning Consent
	The National Union of Students
	Scarlet Alliance
	Our Watch
	National Association of Services Against Sexual Violence (NASASV)
	Suicide Prevention Australia
	The Black Dog Institute
	Australia's National Research Association for Women's Safety (ANROWS)
	Champions of Change Coalition
	Movember

Jurisdiction	Organisation
National (continued)	Commonwealth Bank Australia
	Australia & New Zealand Tongzhi Rainbow Alliance
	Australian Asexuals
	Bi+ Australia
	Bobby Goldsmith Foundation
	Dayenu
	Dykes on Bikes
	First Mardi Gras
	First Nations Rainbow
	Gay and Lesbian Rights Lobby
	Rainbow WISE
	Order of Perpetual Indulgence
	Black Rainbow
	Queer Screen
	Queers in Science
	Rainbodhi LGBTQIA+ Buddhist Community
	SheQu
	Trikone
	Trans Pride Australia
	Delphi Training & Consulting
	Diversity Council Australia
	Medical Women's Society
	ALMA
	Headspace
	Hey Fella
	No Milk in my T
	R U OK
	Rainbow Fertility
	The George Institute for Global Health
	Wellspace Australia
	Aboriginal Legal Service (NSW/ACT)
	Aspect (Autism Spectrum Australia)
	Australia for UNHCR
	Australian Library and Information Association
	Australian Rainbow Vets & Allies
	Barnardos Australia
	batyr Australia
	Cerebral Palsy Alliance

Jurisdiction	Organisation
National (continued)	Family Planning Alliance Australia
	Free Mum Hugs Australia
	LGBTQ Domestic Violence Awareness Foundation
	Life Without Barriers
	Out For Australia
	People with Disability Australia
	Seniors Rights Service
	A Beautiful Weirdo™
	Alejandro Lauren
	Australian Queer Archives Inc
	Indifferent Avocado
	JXK Creations
	Society of Australian Sexologists
	The Benevolent Society
	The Benevolent Society – Carer Gateway
	The Pinnacle Foundation
	The TLR Foundation
	Trans Justice Project LTD.
	BRACKS Indigenous Clothing Pty Ltd
	Proudkind
	Rainbow Store
	Rising Violet Press
	Sock Drawer Heroes Pty Limited
	Wigged Out
	BuildingPride
	Fetish Australia
	Girl Guides NSW, ACT & NT
	The National Centre of Indigenous Excellence
	Multicultural Australia
NSW	Queer Collectives and other office bearers at: UNSW, University of Sydney, Macquarie University, University of Technology Sydney, University of Newcastle, Western Sydney University, University of Wollongong.
	Regional community centres: Community SOS Central Coast, Berkeley Neighbourhood Centre, Maitland Region Community Support, Springwood Neighbourhood Centre, Glenecho Community Centre, Mirambeena Community Centre, Hastings Neighbourhood Services, Dubbo Neighbourhood Centre, Shoalhaven Neighbourhood Services, Bathurst Neighbourhood Centre
	UNSW Faculties and Divisions: Law Faculty, Arts, Design & Architecture, Kirby Institute, Inside UNSW
	Twenty10
	ACON
	ACON Northern Rivers

Jurisdiction	Organisation
NSW (continued)	ACON Hunter
	ACON Regional Outreach
	Mardi Gras
	Mardi Gras Fair Day
	TransHub
	The Gender Centre
	The Inner City Legal Centre
	Lemons with a Twist
	Rainbow Recovery Club
	Sydney Gay and Lesbian Business Association
	Team Sydney
	The Aurora Group
	Sydney Queer Irish
	Wagga Wagga Mardi Gras
	Broken Heel Festival Broken Hill
	Tropical Fruits Lismore
	bentArt Festival
	The Imperial Hotel Erskineville
	Universal Hotel Darlinghurst
	The Beresford Hotel Darlinghurst
	The Bearded Tit Redfern
	Kinselas Bar Darlinghurst
	The Oxford Hotel Darlinghurst
	The Colombian Hotel Darlinghurst
	Palms on Oxford Darlinghurst
	Stonewall Hotel Darlinghurst
	The Marlborough Hotel Newtown
	The Red Rattler Marrickville
	Ruby Lonesome Café Marrickville
	Newtown Neighbourhood Centre
	The Newtown Hotel
	Rigpa Sydney
	Counterpoint Community Services
	NSW Nurses & Widwives' Association
	One Door Mental Health
	Positive Life NSW
	St John Ambulance NSW
	Acceptance

Jurisdiction	Organisation
NSW (continued)	Arc @ UNSW
	The Centre for Social Justice and Inclusion
	Deaf Rainbow NSW
	The Greens NSW
	Harbour City Bears
	Metropolitan Community Church Sydney
	NSW Service for the Treatment and Rehabilitations of Torture and Trauma Survivors
	Refugee Advice and Casework Service
	Bloomin Unique
	Tranby
	Coastal Twist LGBTQIA festival
	Nungala Creative
	Planetdwellers Travel
	Qtopia Sydney
	Spunky Bruiser
	Sydney Gay & Lesbian Choir
	Studio Flos
	The Pollys Club Inc
	AEU NSW Teachers Federation
	Bush Lemons – Blue Mountains Lesbian Bushwalking Group
	Dykes On Bikes
	Mature Age Gays Sydney
	Pride History Group Inc
	Pride in Law (NSW Chapter)
	Rainbow Racquets Squash Club
	Sydney Quiet Queers
	Sydney Rams Tenpin Bowling Club Inc
	Sydney Silverbacks Wrestling Club
	The Religious Society of Friends (Quakers) New South Wales Regional Meeting Incorporated
	Basketball NSW
	Bentstix Hockey Club
	Different Strokes Dragon Boat Club Inc
	Eastern Suburbs Football Association
	Emerald City Kickball
	Harbour Lights Ice Hockey Club
	Lifesavers with Pride
	Newtown Breakaways FC Inc
	Shuttle Swingers

Jurisdiction	Organisation
NSW (continued)	Sydney Convicts
	Sydney Equality Dance
	Sydney Frontrunners
	Sydney Outfielders Softball Association
	Sydney Rangers FC
	Sydney Spokes Inc
	Sydney Stingers
	Sydney Women's Baseball League
	Tennis Sydney
	Australian Sailing and Cruising Club Inc
	ClimbingQTs Inc
	Inner West Roller Derby League
	Sydney Roller Derby League
	The Flying Bats FC
	Wett Ones Swimming Club Inc
	Sydney Queer Muslims
Victoria	Queer Collectives and other office bearers: Deakin University, La Trobe University, Monash University, RMIT, Swinburne University, University of Melbourne, Victoria University.
	Regional community centres: Geelong West Neighbourhood House, Ballarat Neighbourhood Centre, Bendigo Neighbourhood Hub, North Shepparton Community & Learning Centre, Shepparton South Community Centre, Living and Learning Pakenham, Djerriwarrh Neighbourhood House, Subury Neighbourhood House, Felltimber Community House (Wodonga), Muldura Community House
	Switchboard
	Rainbow Door
	Thorne Harbour Health
	Transgender Victoria
	Equinox
	La Trobe University ReGeN: Reducing Gender-based Violence Network
	Queerspace
	Midsumma Festival
	Queerthentic Regional Art Exhibition
	Wangaratta Pride Fair Day
	Ballarat Frolic Festival
	Gaytimes Festival
	ChillOut Festival
	Bendigo PRIDE Festival
	Geelong Pride Film Festival
	Castlemaine Pride
	Better Together Conference
	Koori Pride Victoria

Jurisdiction	Organisation
WA	Queer Collectives and other office bearers: Curtin University, Edith Cowan University, Murdoch University, University of Western Australia.
	Regional community centres: Milligan (Bunbury), Rainbow Coast Neighbourhood Centre
	Living Proud
	The WA AIDS Council
	M Clinic
	The Freedom Centre
	TransFolk of WA
	Albany Pride Festival
	Broome Mardi Gras
	Pride WA
	GLBTI Rights in Aging Inc (GRAI)
Queensland	Queer Collectives and other office bearers: Bond University, Griffith University, Queensland University of Technology, University of Queensland.
	Regional community centres: Southport Community, Maroochy Neighbourhood Centre, North Townsville Community Hub, Women's Centre FNQ, Marlin Coast Neighbourhood Centre, East Creek Community Centre, The Neighbourhood Hub (Mackay), Rockhampton Inclusion Centre, Hervey Bay Neighbourhood Centre, Bundaberg & District Neighbourhood Centre
	Diverse Voices
	Queensland Council for LGBTI Health
	Open Doors Youth Service
	Sunshine Coast Mardi Gras
	Gold Coast Pride Festival
	Moreton Bay Pride Festival
	Brisbane Pride Festival
	LGBTI Legal Service
SA	Queer Collectives and other office bearers: Flinders University, University of Adelaide, University of South Australia
	Regional community centres: Gawler Community House, Mount Gambier Community Centre, Mount Baker Community Centre
	Relationships Australia South Australia (RASA)
	SHINE SA
	Trans Health South Australia
	South Australian Rainbow Advocacy Alliance
	Bfriend
ACT	Queer Collectives and other office bearers: Australian National University, University of Canberra.
	A Gender Agenda
	Canberra Rape Crisis Centre
	Meridian

Jurisdiction	Organisation
Tasmania	Queer Collectives and other office bearers: University of Tasmania
	Regional community centres: Northern Suburbs Community Centre (Launceston), Devonport Community House, Burnie Community House
	TasPride Festival
	Working it Out
Northern Territory	Regional community centres: Alice Springs Youth & Community Centre
	fabALICE Festival
	Darwin Pride Festival
	Northern Territory AIDS and Hepatitis Council
Individual Influencers	Julie McCrossin
	Magda Szubanski
	Somali Cerise
	Georgia Flynn
	Jess Hill
	Grace Tame
	Vanessa Turnbull-Roberts
	Chanel Contos

Appendix F

LGBTQIA+ survey template

Participant information statement

The National Survey of LGBTQIA+ Attitudes and Experiences of Sexual Violence

This survey aims to identify the prevalence of sexual victimisation amongst LGBTQIA+ Australians as well as attitudes and behaviours relating to sexual violence. This survey will help us understand how common sexual violence is amongst LGBTQIA+ Australians, beliefs and attitudes about sexual violence in LGBTQIA+ communities, and ways of preventing sexual violence and improving care and support to survivors.

Please note different terms are used to represent our communities. The International Gay and Lesbian Association (ILGA) uses LGBT and the term used for this survey is LGBTQIA+. The terms Sistergirl and Brotherboy are also used in the body of the survey.

If you are over the age of 18, identify as LGBTQIA+ and live in Australia, you are invited to fill out this survey. The survey includes questions about your background, health and wellbeing, experiences of sexual violence, and attitudes and behaviours relating to sexual violence. It will also ask for detailed information about the type/s of abuse you have encountered, details of the perpetrator/s and the context of the violence. It should take approximately 25 minutes to complete.

The study is being carried out by a team of researchers at the University of New South Wales: A/Prof Michael Salter, Prof Jan Breckenridge, Mailin Suchting, A/Prof Vanessa Lee-Ah Mat and Dr Andy Kaladelfos. This research is being funded by the Commonwealth Department of Social Services.

For information about this research, including data privacy, please see our [participant information statement](#).

If you ever feel upset or distressed during or after the survey, please reach out for help. You can contact:

QLife

1800 184 527

<https://qlife.org.au/>

1800 RESPECT

1800 737 732

<https://www.1800respect.org.au/>

Lifeline

13 11 14

<https://www.lifeline.org.au/>

13YARN (for Indigenous Australians)

13 92 76

<https://www.13yarn.org.au/>

Consent form

By clicking the box below I agree that:

- I understand I am being asked to provide consent to participate in this research study.
- I have read the Participant Information Sheet, or it has been provided to me in a language that I understand.
- I provide my consent for the information collected about me to be used for the purpose of this research study only.
- I understand that if necessary, I can ask questions and the research team will respond to my questions.
- I freely agree to participate in this research study as described and understand that I am free to withdraw at any time during the study and withdrawal will not affect my relationship with any of the named organisations and/or research team members.

☐ I agree, start questionnaire

Demographics

These questions relate to your personal life and background.

What year were you born in?

How do you describe your gender?

- ☐ Man or male
- ☐ Woman or female
- ☐ Non-binary
- ☐ Sistergirl
- ☐ Brotherboy
- ☐ I use a different term (please specify)
- ☐ Prefer not to answer

What was your sex recorded at birth?

- ☐ Male
- ☐ Female
- ☐ Another term (please specify)

Were you born with a variation of sex characteristics (sometimes called 'intersex' or 'DSD')?

- ☐ Yes
- ☐ No
- ☐ Don't know
- ☐ Prefer not to answer

How do you describe your sexual orientation?

- ☐ Straight (heterosexual)
- ☐ Gay
- ☐ Lesbian
- ☐ Bisexual
- ☐ Asexual
- ☐ I use a different term (please specify)
- ☐ Don't know
- ☐ Prefer not to answer

These questions relate to your personal life and background.

Are you of Aboriginal and/or Torres Strait Islander origin or descent?

- ☐ No
- ☐ Yes, Australian Aboriginal
- ☐ Yes, Torres Strait Islander
- ☐ Yes, both Australian Aboriginal and Torres Strait Islander

How would you describe your cultural background?

(Please select up to 2 cultural backgrounds). Your cultural background is the cultural/ethnic group(s) to which you feel you belong or identify. This background may be the same as your parents, grandparents, or your heritage, or it may be the country you were born in or have spent a great amount of time in, or you feel more closely tied to.

- ☐ Indigenous Australian
- ☐ Australian (excl. Indigenous Australian)
- ☐ New Zealander and Pacific Islander
- ☐ Anglo-European
- ☐ Other European (excl. Anglo-European)
- ☐ Asian
- ☐ Americas
- ☐ African or Middle Eastern
- ☐ Unsure
- ☐ Prefer not to say
- ☐ Other

Were you born in Australia?

- ☐ Yes
- ☐ No (what country?)

These questions relate to your personal life and background.

Where do you live?

- ☐ I live in a city or urban area
- ☐ I live in a regional town or country area
- ☐ I live remotely, far away from a regional town or major city

What is the highest level of education you have completed?

- ☐ Less than Primary
- ☐ Primary
- ☐ Some Secondary
- ☐ Secondary
- ☐ Vocational (TAFE) or Similar
- ☐ Some University but no degree
- ☐ University - Bachelors Degree
- ☐ Graduate or professional degree (MA, MS, MBA, PhD, Law Degree, Medical Degree etc)
- ☐ Prefer not to say

What best describes your employment status over the last three months?

- ☐ Working full-time
- ☐ Working part-time
- ☐ Working casually
- ☐ Unemployed and looking for work
- ☐ A homemaker or stay-at-home parent
- ☐ Student
- ☐ Retired
- ☐ Other

What was your total household income before taxes during the past 12 months?

- ☐ Less than AUD \$30,000
- ☐ Between AUD \$30,000 - \$49,000
- ☐ Between AUD \$50,000 - \$79,999
- ☐ Between AUD \$80,000 - \$99,999
- ☐ Between AUD \$100,000 - \$149,999
- ☐ Between AUD \$150,000 - \$199,999
- ☐ More than AUD \$200,000

Take a breath

We are moving into a survey section that will ask about sex and relationships, then another section that will ask specific questions about health, wellbeing, and your childhood.

Thank you for your responses so far. Your information is really helpful for us.

Feel free to take a breather if you need to, otherwise **please click on the arrow below to continue.**

Sexuality and relationships

These questions relate to your sexual activity and relationships.

How would you describe your current relationship status? (select multiple options if relevant)

- ☐ Single
- ☐ Married/Civil partnership
- ☐ Living with partner(s)
- ☐ In a relationship but not living together
- ☐ Divorced/Separated
- ☐ Widowed
- ☐ Polyamorous/Multiple relationships
- ☐ Prefer not to say

These questions relate to your sexual activity and relationships.

How long is/was this relationship? (if multiple, answer for longest relationship)

- ☐ Less than 6 months
- ☐ 6-11 months
- ☐ 1-2 years
- ☐ 3-5 years
- ☐ More than 5 years

Which of the following best describes/d your partner(s)?

- ☐ Man or male
- ☐ Woman or female
- ☐ Non-binary
- ☐ They use a different term (please specify)
- ☐ Prefer not to answer

Is/was your partner transgender, gender diverse, a Sistergirl or a Brotherboy?

- ☐ Yes
- ☐ No
- ☐ Prefer not to answer

In the past 12 months, who have you had sex with? (check all that apply)

- ☐ Man
- ☐ Woman
- ☐ Non-binary person
- ☐ Another gender (please specify)
- ☐ Don't know
- ☐ Decline to state
- ☐ No one (I haven't had sex in the last twelve months)

About how often did you have sex during the last 12 months?

- ☐ Not at all
- ☐ Once or twice
- ☐ Once a month
- ☐ 2-3 times per month
- ☐ Weekly
- ☐ 2-3 times per week
- ☐ More than 4 times per week
- ☐ Don't know

How many sexual partners have you had in the past 12 months?

- ☐ No partners
- ☐ 1 partner
- ☐ 2 partners
- ☐ 3 partners
- ☐ 4 partners
- ☐ 5 - 10 partners
- ☐ 11 - 20 partners
- ☐ 21 - 100 partners
- ☐ More than 100 partners
- ☐ Don't know

Health and wellbeing

These questions relate to your health and wellbeing.

Over the past 2 weeks, how many days have you been bothered by any of the following problems?

	Not at all	1-7 days	8-11 days	12-14 days	Prefer not to say
1. Little interest or pleasure in doing things	☐	☐	☐	☐	☐
2. Feeling down, depressed or hopeless	☐	☐	☐	☐	☐
3. Feeling nervous, anxious or on edge	☐	☐	☐	☐	☐
4. Not being able to stop or control worrying	☐	☐	☐	☐	☐

Have you been diagnosed or treated in the past 12 months with one of the following mental health conditions? (check all that apply)

- ☐ Depression
- ☐ Anxiety
- ☐ Post-traumatic stress disorder
- ☐ Complex trauma
- ☐ Dissociative disorder
- ☐ Eating disorder
- ☐ Social phobia
- ☐ Panic disorder
- ☐ Obsessive-compulsive disorder
- ☐ Bipolar disorder
- ☐ Agoraphobia
- ☐ Schizophrenia
- ☐ Personality disorder
- ☐ Other mental health challenge (please specify)
- ☐ None of these options

In the past year, how often have you used the following?

	Never	Once or twice	Monthly	Weekly	Daily or almost daily
1. Alcohol (5 or more drinks a day)	☐	☐	☐	☐	☐
2. Tobacco products	☐	☐	☐	☐	☐
4. Prescription drugs for non-medical reasons (including prescribed CBD)	☐	☐	☐	☐	☐
5. Illegal drugs	☐	☐	☐	☐	☐

Have you ever been diagnosed with a disability or chronic illness?

- ☐ Yes
☐ No

During the past week how many days in total were you unable to carry out your usual daily activities fully due to a disability or illness?

0 1 2 3 4 5 6 7
Days

During the past week how many days in total did you stay in bed all or most of the day because of your disability or illness?

0 1 2 3 4 5 6 7
Days

These questions relate to your health and wellbeing.

Have you been tested for HIV in the past 12 months?

- ☐ Yes
☐ No
☐ Never been tested

What is your HIV status?

- ☐ Negative
- ☐ Positive
- ☐ Not sure

How many of your friends are LGBTIQA+?

- ☐ None
- ☐ A few
- ☐ Some
- ☐ Most
- ☐ All

How much of your free time is spent with LGBTIQA+ people?

- ☐ None at all
- ☐ A little
- ☐ A moderate amount
- ☐ A lot
- ☐ A great deal

These questions relate to your experiences of family, kinship family, and abuse when you were a child. Your answers will help us to understand your background and life experiences.

While you were growing up, during your first 18 years of life:

Did a parent or other adult in the household **often or very often...**

Swear at you, insult you, put you down, or humiliate you? **or**

Act in a way that made you afraid that you might be physically hurt?

- ☐ Yes
- ☐ No

Did an adult or person at least five years older than you ever...

Touch or fondle you or have you touch their body in a sexual way? **or**

Attempt or actually have oral, anal, or vaginal intercourse with you?

☐ Yes

☐ No

Did you often or very often feel that...

No one in your immediate, kinship, or extended family loved you or thought you were important or special? **or**

Your immediate, kinship or extended family didn't look out for each other, feel close to each other, or support each other?

☐ Yes

☐ No

Did you often or very often feel that ...

You didn't have enough to eat, had to wear unclean clothes, and had no one to protect you? **or**

Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?

☐ Yes

☐ No

Were your parents ever separated or divorced?

☐ Yes

☐ No

Was your parent, step-parent or another care giver:

Often or very often pushed, grabbed, slapped, or had something thrown at them? **or**

Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? **or**

Ever repeatedly hit at least a few minutes or threatened with a gun or knife?

☐ Yes

☐ No

Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?

- ☐ Yes
- ☐ No

Was a household member depressed or mentally ill, or did a household member attempt suicide?

- ☐ Yes
- ☐ No

Did a household member go to prison?

- ☐ Yes
- ☐ No

Take a breath

The next section will ask you questions about sexual victimisation and abuse.

Thanks for sticking with us. Take care of yourself as you go through the survey, and don't forget to reach out for help if you need to - referrals are on our [website](#).

Please click on the arrow below to continue.

LGBTIQA+ norms and attitudes

These questions are about your attitudes towards sexual assault and harassment.

Please indicate how much you agree with the following statements:

	Strongly disagree	Somewhat disagree	Neutral	Somewhat agree	Strongly agree
1. Sexual assault accusations are often used as a way of getting back at someone.	☐	☐	☐	☐	☐
2. A lot of people lead someone on and then cry rape.	☐	☐	☐	☐	☐
3. Rape happens when a person's sex drive gets out of control.	☐	☐	☐	☐	☐
4. Sometimes no means yes.	☐	☐	☐	☐	☐
5. Women cannot rape.	☐	☐	☐	☐	☐
6. Men cannot be raped.	☐	☐	☐	☐	☐
	Strongly disagree	Somewhat disagree	Neutral	Somewhat agree	Strongly agree
7. If both people are high or drunk, you can never truly know if someone was sexually assaulted.	☐	☐	☐	☐	☐
8. Trans women are more likely to be sexual predators.	☐	☐	☐	☐	☐
9. Someone has already consented to sex if they are at a sex-on-premises venue.	☐	☐	☐	☐	☐
10. It's OK to touch a stranger at a LGBTIQA+ venue or event.	☐	☐	☐	☐	☐

	Strongly disagree	Somewhat disagree	Neutral	Somewhat agree	Strongly agree
11. Removing a condom during sex without telling your partner is ok if it feels good.	☐	☐	☐	☐	☐
12. If a transgender person doesn't disclose their gender before sex, they have	☐	☐	☐	☐	☐
13. It's OK to make a sexual comment to a stranger at a LGBTQIA+ venue.	☐	☐	☐	☐	☐
14. Respecting "safe words" is optional during BDSM play.	☐	☐	☐	☐	☐
15. Lesbian relationships are the least likely to be abusive.	☐	☐	☐	☐	☐
16. Bisexual people owe their partner a threesome.	☐	☐	☐	☐	☐
17. Asexual people just need to be taught to have better sex.	☐	☐	☐	☐	☐
18. Real men fight back when being raped.	☐	☐	☐	☐	☐
19. Asking for consent kills the mood.	☐	☐	☐	☐	☐
20. If someone orgasms during sex, then you know they wanted it.	☐	☐	☐	☐	☐
21. It's OK for religious, cultural and initiation ceremonies to involve sexual behaviours.	☐	☐	☐	☐	☐

Experiences of sexual violence across lifetime

This section asks about any unwanted, coercive or frightening sexual experiences that may have happened to you. NOTE: Coercion can include individual or family control over your behaviour or emotions.

Someone made a sexual request or comment to me (face-to-face, on the phone or online) that was unwelcome and made me feel offended, humiliated or intimidated.

Has this ever happened to you?

☐ Yes

☐ No

Using the sliding scale, please select how many times this has happened in your life.

0 2 4 6 8 10 12 14 16 18 20 More than 20 times

This many times ☐

Using the sliding scale, please select how many times this has happened in the last 12 months.

0 2 4 6 8 10 12 14 16 18 20 More than 20 times

This many times ☐

How old were you (approximately) when this happened to you for the first time?

Which of the following circumstances describe best how this happened? (You may indicate multiple answers)

- ☐ Putting verbal pressure on you (e.g. telling lies, threatening to end the relationship or embarrass you, making false promises, or continually pressuring you after you said 'no')
- ☐ It was a comment from someone you didn't know (eg a comment online from a stranger, or on public transport).
- ☐ Exploiting a position of power or authority over you (e.g. they were your boss, they were physically stronger, they had some control over your life)
- ☐ Targeting or humiliating you because of your gender identity and/or sexual orientation
- ☐ None of the above (please explain)

Has this ever happened to you over the age of 18?

- ☐ Yes
- ☐ No

This section asks about any unwanted, coercive or frightening sexual experiences that may have happened to you. NOTE: Coercion can include individual or family control over your behaviour or emotions.

Someone fondled, kissed, or rubbed up against the private areas of my body (lips, breast/chest, crotch or butt) against my will.

Has this ever happened to you?

- ☐ Yes
- ☐ No

Using the sliding scale, please select how many times this has happened in your life.

0 2 4 6 8 10 12 14 16 18 20 More than 20 times

This many times ☐

Using the sliding scale, please select how many times this has happened in the last 12 months.

0 2 4 6 8 10 12 14 16 18 20 More than 20 times

This many times ☐

How old were you (approximately) when this happened to you for the first time?

Which of the following circumstances describe best how this happened? (You may indicate multiple answers)

- ☐ Putting verbal pressure on you (e.g. telling lies, threatening to end the relationship or embarrass you, making false promises, or continually pressuring you after you said 'no')
- ☐ It was done by somebody you didn't know (e.g. in a club or on public transport)
- ☐ Using force or threatening to use force (e.g. holding you down with body weight, pinning your arms, having a weapon, threatening to hurt you or others)
- ☐ Exploiting a position of power or authority over you (e.g. they were your boss, they were physically stronger, they had some control over your life)
- ☐ Targeting or humiliating you because of your gender identity and/or sexual orientation
- ☐ None of the above (please explain)

Has this ever happened to you over the age of 18?

- ☐ Yes
- ☐ No

Using the sliding scale, please select how many times this has happened in the last 12 months.

More than 20 times

0 2 4 6 8 10 12 14 16 18 20

This many times ☐

How old were you (approximately) when this happened to you for the first time?

Which of the following circumstances describe best how this happened? (You may indicate multiple answers)

- ☐ Putting verbal pressure on you (e.g. telling lies, threatening to end the relationship or embarrass you, making false promises, or continually pressuring you after you said 'no')
- ☐ Using force or threatening to use force (e.g. holding you down with body weight, pinning your arms, having a weapon, threatening to hurt you or others)
- ☐ Exploiting a position of power or authority over you (e.g. they were your boss, they were physically stronger, they had some control over your life)
- ☐ Targeting or humiliating you because of your gender identity and/or sexual orientation
- ☐ None of the above (please explain)

Has this ever happened to you over the age of 18?

- ☐ Yes
- ☐ No

This section asks about any unwanted, coercive or frightening sexual experiences that may have happened to you. NOTE: Coercion can include individual or family control over your behaviour or emotions.

Someone put their penis, finger(s) or object(s) into my vagina or anus against my will.

Has this ever happened to you?

- ☐ Yes
☐ No

Using the sliding scale, please select how many times this has happened in your life.

0 2 4 6 8 10 12 14 16 18 20 More than 20 times

This many times ☐

Using the sliding scale, please select how many times this has happened in the last 12 months.

0 2 4 6 8 10 12 14 16 18 20 More than 20 times

This many times ☐

How old were you (approximately) when this happened to you for the first time?

This section asks about any unwanted, coercive or frightening sexual experiences that may have happened to you. NOTE: Coercion can include individual or family control over your behaviour or emotions.

Someone took nude or sexual images/videos of me against my will.

Has this ever happened to you?

- ☐ Yes
☐ No

Using the sliding scale, please select how many times this has happened in your life

0 2 4 6 8 10 12 14 16 18 20 More than 20 times

This many times ☐

Using the sliding scale, please select how many times this has happened in the last 12 months.

0 2 4 6 8 10 12 14 16 18 20 More than 20 times

This many times ☐

How old were you (approximately) when this happened to you for the first time?

Which of the following circumstances describe best how this happened? (You may indicate multiple answers)

- ☐ Putting verbal pressure on you (e.g. telling lies, threatening to end the relationship or embarrass you, making false promises, or continually pressuring you after you said 'no')
- ☐ Using force or threatening to use force (e.g. holding you down with body weight, pinning your arms, having a weapon, threatening to hurt you or others)
- ☐ Exploiting a position of power or authority over you (e.g. they were your boss, they were physically stronger, they had some control over your life)
- ☐ Targeting or humiliating you because of your gender identity and/or sexual orientation
- ☐ None of the above (please explain)

Has this ever happened to you over the age of 18?

- ☐ Yes
- ☐ No

This section asks about any unwanted, coercive or frightening sexual experiences that may have happened to you. NOTE: Coercion can include individual or family control over your behaviour or emotions.

Someone shared nude or sexual pictures or videos of me with other people against my will.

Has this ever happened to you?

- ☐ Yes
- ☐ No

Using the sliding scale, please select how many times this has happened in your life.

0 2 4 6 8 10 12 14 16 18 20

This many times More than 20 times

☐

Using the sliding scale, please select how many times this has happened in the last 12 months.

More than 20 times

0 2 4 6 8 10 12 14 16 18 20

This many times ☐

How old were you (approximately) when this happened to you for the first time?

Which of the following circumstances describe best how this happened? (You may indicate multiple answers)

- ☐ Putting verbal pressure on you (e.g. telling lies, threatening to end the relationship or embarrass you, making false promises, or continually pressuring you after you said 'no')
- ☐ Using force or threatening to use force (e.g. holding you down with body weight, pinning your arms, having a weapon, threatening to hurt you or others)
- ☐ Exploiting a position of power or authority over you (e.g. they were your boss, they were physically stronger, they had some control over your life)
- ☐ Targeting or humiliating you because of your gender identity and/or sexual orientation
- ☐ None of the above (please explain)

Has this ever happened to you over the age of 18?

- ☐ Yes
- ☐ No

This section asks about any unwanted, coercive or frightening sexual experiences that may have happened to you. NOTE: Coercion can include individual or family control over your behaviour or emotions.

Even though it didn't happen, someone TRIED to have oral sex with me, or make me have oral sex with them against my will.

Has this ever happened to you?

- ☐ Yes
☐ No

Using the sliding scale, please select how many times this has happened in your life.

0 2 4 6 8 10 12 14 16 18 20 More than 20 times

This many times

Using the sliding scale, please select how many times this has happened in the last 12 months.

0 2 4 6 8 10 12 14 16 18 20 More than 20 times

This many times

How old were you (approximately) when this happened to you for the first time?

Which of the following circumstances describe best how this happened? (You may indicate multiple answers)

- ☐ Putting verbal pressure on you (e.g. telling lies, threatening to end the relationship or embarrass you, making false promises, or continually pressuring you after you said 'no')
- ☐ Using force or threatening to use force (e.g. holding you down with body weight, pinning your arms, having a weapon, threatening to hurt you or others)
- ☐ Exploiting a position of power or authority over you (e.g. they were your boss, they were physically stronger, they had some control over your life)
- ☐ Targeting or humiliating you because of your gender identity and/or sexual orientation
- ☐ None of the above (please explain)

Has this ever happened to you over the age of 18?

- ☐ Yes
- ☐ No

This section asks about any unwanted, coercive or frightening sexual experiences that may have happened to you. NOTE: Coercion can include individual or family control over your behaviour or emotions.

Even though it didn't happen, someone TRIED to put their penis, finger(s) or object(s) into my vagina or anus against my will.

Has this ever happened to you?

- ☐ Yes
- ☐ No

Using the sliding scale, please select how many times this has happened in your life.

0 2 4 6 8 10 12 14 16 18 20

This many times More than 20 times

☐

Using the sliding scale, please select how many times this has happened in the last 12 months.

More than 20 times

0 2 4 6 8 10 12 14 16 18 20

This many times ☐

How old were you (approximately) when this happened to you for the first time?

Which of the following circumstances describe best how this happened? (You may indicate multiple answers)

- ☐ Putting verbal pressure on you (e.g. telling lies, threatening to end the relationship or embarrass you, making false promises, or continually pressuring you after you said 'no')
- ☐ Using force or threatening to use force (e.g. holding you down with body weight, pinning your arms, having a weapon, threatening to hurt you or others)
- ☐ Exploiting a position of power or authority over you (e.g. they were your boss, they were physically stronger, they had some control over your life)
- ☐ Targeting or humiliating you because of your gender identity and/or sexual orientation
- ☐ None of the above (please explain)

Has this ever happened to you over the age of 18?

- ☐ Yes
- ☐ No

Thinking of any of the unwanted, coercive or frightening sexual experiences that have happened to you - who was the person or the people who did this to you?

No names, but please select as many of the below categories as you need to.

- ☐ A partner or ex-partner
- ☐ A friend or acquaintance
- ☐ A stranger
- ☐ An immediate family member
- ☐ A kinship or extended family member
- ☐ Other (please specify as many people as you need to)

Medical abuse questions

These questions relate to medical abuse by healthcare professionals.

During any health and/or welfare appointments, have you:

	Before I turned 18	Since I turned 18	In the last 12 months	Never
1. Been subject to sexually suggestive comments	☐	☐	☐	☐
2. Been subject to medically unnecessary examination of your body	☐	☐	☐	☐
3. Been subject to medically unnecessary examination of your body in order to access hormones	☐	☐	☐	☐
4. Been subject to medically unnecessary photography of your body	☐	☐	☐	☐
5. Been subject to medically unnecessary touching/treatment of your body (such as dilation with an instrument or hands)	☐	☐	☐	☐
6. Been coerced into having surgery	☐	☐	☐	☐

Is there anything else you want to tell us about your experiences?

Thinking about the experience of sexual violence that most impacted you, when did this happen?

- ☐ In the last six months
- ☐ In the last year
- ☐ In the last five years
- ☐ Over five years ago
- ☐ I was younger than 18

What happened to you during that incident? Please tick all that apply.

- ☐ I was sexually harassed (someone made a sexual advance or request that made me uncomfortable or scared)
- ☐ I was sexually assaulted (someone touched me in a sexual way that I didn't want)
- ☐ I was raped (someone penetrated my body sexually without my consent)
- ☐ Sexual or nude images or videos of me were taken or shared without my consent
- ☐ Other (please explain briefly)

Please tell us about the experience of sexual violence that most impacted you or that stands out in your mind the most.

Where did this happen? Please tick all that apply.

- ☐ A private house or residence
- ☐ A public place
- ☐ At a club or pub
- ☐ At a party
- ☐ At a workplace
- ☐ At a sex-on-premises venue
- ☐ Online or using technology
- ☐ At a religious, cultural or initiation event
- ☐ Other (please explain)

Who was the person or people who did this to you? Please tick all that apply.

- ☐ Stranger
- ☐ Friend
- ☐ Romantic or intimate partner
- ☐ A date, hook-up or casual sexual partner
- ☐ A family member
- ☐ A kinship or extended family member
- ☐ A family friend
- ☐ Other

What was the gender/s of the person or people who did this to you? Please tick all that apply.

- ☐ Cis man
- ☐ Cis woman
- ☐ Trans man
- ☐ Trans woman
- ☐ Non-binary person
- ☐ Sistergirl
- ☐ Brotherboy
- ☐ Not sure/don't want to say

Please tell us about the experience of sexual violence that most impacted you or that stands out in your mind the most.

Was the perpetrator (or any of the perpetrators) LGBTIQA+?

- ☐ Yes
- ☐ No
- ☐ Don't know

Did you tell anyone about this experience?

- ☐ Yes
- ☐ No
- ☐ I'm not sure
- ☐ Prefer not to say

Who did you first tell about this experience?

- ☐ Friend
- ☐ Counsellor or psychologist
- ☐ Partner
- ☐ Family member, kinship or extended family member
- ☐ Police
- ☐ LGBTIQ+ service
- ☐ Other (please specify)

When you told someone about your experience of sexual violence, was their response helpful or unhelpful?

- ☐ Helpful (please tell us why)
- ☐ Unhelpful (please tell us why)
- ☐ Neither helpful nor unhelpful (please tell us why)
- ☐ Prefer not to say

What were the reasons that you didn't tell anyone about this experience?

Please select all that apply.

- ☐ I felt ashamed or embarrassed
- ☐ I didn't think it was serious enough to tell anyone
- ☐ I dealt with the experience myself
- ☐ I didn't realise at the time that it was wrong or wasn't my fault
- ☐ I was worried I would be blamed or get into trouble
- ☐ I was worried the perpetrator would retaliate
- ☐ I didn't think I would be believed
- ☐ It happened at a religious, initiation or cultural event
- ☐ Other (please explain)

Please tell us about the experience of sexual violence that most impacted you or that stands out in your mind the most.

Is there anything else you'd like to share with us about this experience?

Disclosure and help-seeking after sexual violence

Have you ever contacted any organisations seeking help or support due to sexual violence? Please tick all that apply.

- ☐ No, I've never contacted an organisation about this
- ☐ Mental health service or professional
- ☐ Sexual assault service
- ☐ LGBTIQA+ organisation
- ☐ Police
- ☐ Aboriginal Community Controlled Health Organisation (ACCHO)
- ☐ Aboriginal Medical Service (AMS)
- ☐ Other (please specify)

Were you satisfied with the help or support that you recieved?

- ☐ Very satisfied
- ☐ Mostly satisfied
- ☐ Neither satisfied nor unsatisfied
- ☐ Mostly unsatisfied
- ☐ Very unsatisfied

Did you feel that the organisation or organisations you contacted understood your needs as a LGBTIQA+ person?

- ☐ Very much
- ☐ Mostly
- ☐ Somewhat
- ☐ Not really
- ☐ Not at all

Can you tell us what was most helpful about the response that you received?

Can you tell us what was less helpful about the response you received? How could it have been improved?

Bystander behaviour in the LGBTIQA+ Community

These questions relate to instances where you may have intervened in any unwanted or abusive sexual situations in the LGBTIQA+ community.

Please indicate whether you have taken any of these actions:

	Yes	No	Not sure	No opportunity to do so
1. When I saw a LGBTIQA+ friend who looked very intoxicated leaving a party/room with someone they just met, I stopped and checked in with my friend.	☐	☐	☐	☐
2. I expressed concern to a LGBTIQA+ friend when I saw their partner being very jealous and trying to control them.	☐	☐	☐	☐
3. When I saw a LGBTIQA+ friend leaving a party/room with a very intoxicated person, I asked what they were doing.	☐	☐	☐	☐
4. I expressed disagreement with a LGBTIQA+ friend who said having sex with someone who is passed out or very intoxicated is okay.	☐	☐	☐	☐
5. I called emergency when a LGBTIQA+ friend needed help because they had been hurt sexually or physically.	☐	☐	☐	☐
6. I went with a LGBTIQA+ friend to talk with someone (community resource, police, crisis centre) about an unwanted sexual experience.	☐	☐	☐	☐
7. I got advice from others about how to help a LGBTIQA+ friend who has experienced sexual abuse.	☐	☐	☐	☐
8. I educated myself about sexual abuse in the LGBTIQA+ community and what I can do about it.	☐	☐	☐	☐
9. I talk with my LGBTIQA+ friends about practices of sexual consent.	☐	☐	☐	☐
10. I encouraged my LGBTIQA+ friends to learn more and get involved in preventing sexual abuse.	☐	☐	☐	☐

	Yes	No	Not sure	No opportunity to do so
11. I made sure an intoxicated LGBTIQA+ friend didn't get left behind at a party.	☐	☐	☐	☐
12. I refused to remain silent when a LGBTIQA+ friend asked me to keep quiet about an instance of sexual abuse that I knew about.	☐	☐	☐	☐
13. I spoke out when I heard a sexist/racist/homophobic/transphobic joke made by a LGBTIQA+ friend.	☐	☐	☐	☐
14. I watched a LGBTIQA+ friend's drink at a party.	☐	☐	☐	☐
15. I physically defended a LGBTIQA+ friend from an unwanted sexual experience.	☐	☐	☐	☐
16. I physically defended a LGBTIQA+ friend from a sexist/racist/homophobic/transphobic act.	☐	☐	☐	☐

Thinking back, what would you say were the main reasons you decided to do or say something? Please describe:

Thinking back, what would you say were the main reasons you decided not to do or say something? Please describe:

Appendix G

Tables and figures

a. List of figures

Figure number	Figure title	Page number
Figure 1	What is important to you in a National LGBTIQ+SB Sexual Violence Survey?	11
Figure 2	The gathering journey	12
Figure 3	National Survey of LGBTIQ+ Experiences of Sexual Violence – website landing page	14
Figure 4	First Nations face-to-face recruitment map	17
Figure 5	All participants: cultural backgrounds (multiple options could be selected) (n = 3,188)	23
Figure 6	All participants: residential locations of participants (n = 3,153)	26
Figure 7	All participants: educational attainment (n = 3,140)	27
Figure 8	All participants: employment over last 3 months (n = 3,153)	28
Figure 9	All participants: Total annual household income before tax (n = 3,153)	29
Figure 10	First Nations participants: residential locations (n = 409)	31
Figure 11	First Nations participants: educational attainment (n = 407)	31
Figure 12	First Nations participants: employment over last 3 months (n = 409)	32
Figure 13	First Nations participants: total annual household income before tax (n = 409)	33
Figure 14	All participants: current relationship status (n = 3,115)	34
Figure 15	All participants: gender of current partner/s (n = 1,903)	35
Figure 16	All participants: current partner is transgender (n = 1,865)	36
Figure 17	All participants: number of times had sex in last year (n = 2,372)	36
Figure 18	All participants: number of sexual partners in last year (n = 2,410)	37
Figure 19	All participants: number of LGBTIQ+ friends (n = 2,992)	38
Figure 20	All participants: time spent with LGBTIQ+ friends (n = 2,992)	39

Figure number	Figure title	Page number
Figure 21	First Nations participants: current relationship status (n = 400)	40
Figure 22	First Nations participants: current relationship length (n = 271)	40
Figure 23	First Nations participants: gender of current partner/s (n = 274)	41
Figure 24	First Nations participants: current partner is transgender (n = 270)	42
Figure 25	First Nations participants: number of times had sex in last year (n = 346)	42
Figure 26	First Nations participants: number of sexual partners in last year (n = 354)	43
Figure 27	First Nations participants: number of LGBTIQA+ friends (n = 395)	44
Figure 28	First Nations participants: time spent with LGBTIQA+ friends (n = 395)	44
Figure 29	All participants: prevalence of adverse childhood experiences (n = 2,981)	45
Figure 30	All participants: mean substance misuse frequency in the past year (n = 3,103)	46
Figure 31	All participants: mean anxiety and depression symptom frequency in the past 2 weeks (n = 3,103)	47
Figure 32	All participants: diagnosed with or treated for any mental health disorder in the past year (n = 3,192)	49
Figure 33	All participants: prevalence of a diagnosis of disability or chronic illness (n = 3013)	49
Figure 34	All participants: tested for HIV in past 12 months (n = 2,992)	50
Figure 35	All participants: HIV status (n = 2,992)	51
Figure 36	First Nations participants: prevalence of adverse childhood experiences (n = 387)	52
Figure 37	First Nations participants: substance misuse frequency in past year (n = 396)	53
Figure 38	First Nations participants: anxiety and depression symptom mean frequency past 2 weeks (n = 396)	54
Figure 39	First Nations participants: diagnosed with or treated for any mental health disorder in the past year (n = 416)	55
Figure 40	First Nations participants: prevalence of disability (n = 396)	57
Figure 41	First Nations participants: tested for HIV in past 12 months (n = 395)	58
Figure 42	First Nations participants: HIV status (n = 395)	58
Figure 43	All participants: sexual violence myths and attitudes mean (sd) overall average score (n = 2,892)	60
Figure 44	All participants: endorsement of one or more items relating to sexual myths and attitudes (n = 2,892)	62
Figure 45	First Nations participants: sexual violence myths and attitudes mean (sd) overall average score (n = 376)	63
Figure 46	All participants: sexual violence across lifespan by sexual orientation (n = 3,106)	67
Figure 47	All participants: sexual violence across lifespan by sexual orientation (n = 3,106)	68
Figure 48	All participants: experience of lifetime sexual violence by residential location (n = 3,153)	69
Figure 49	All participants: lifetime prevalence of unwanted sexual remark/s (n = 2,883)	70
Figure 50	All participants: contexts of unwanted sexual remarks (n = 2,883) (participants could select multiple answers)	71
Figure 51	First Nations participants: lifetime prevalence of unwanted sexual remark/s (n = 376)	73

Figure number	Figure title	Page number
Figure 52	First Nations participants: circumstances in which the unwanted sexual remarks occurred (n = 376)	73
Figure 53	All participants: circumstances in which unwanted fondling, kissing or rubbing occurred (n = 2,827)	75
Figure 54	First Nations participants: lifetime prevalence of unwanted fondling, kissing or rubbing (n = 370)	76
Figure 55	First Nations participants: circumstances in which unwanted fondling, kissing or rubbing occurred (n = 370)	77
Figure 56	All participants: lifetime prevalence of oral rape (n = 2,791)	78
Figure 57	All participants: circumstances of oral rape (n = 2,791)	78
Figure 58	First Nations participants: lifetime prevalence of oral rape (n = 368)	80
Figure 59	First Nations participants: circumstances of attempted oral rape (n = 368)	80
Figure 60	All participants: context of attempted oral rape (n = 2,765)	82
Figure 61	First Nations participants: lifetime prevalence of attempted oral rape (n = 382)	83
Figure 62	First Nations participants: context of attempted oral rape (n = 382)	84
Figure 63	All participants: lifetime prevalence of vaginal or anal rape (n = 2,767)	85
Figure 64	All participants: contexts of vaginal or anal rape (n = 2,767)	85
Figure 65	First Nations participants: lifetime prevalence of vaginal or anal rape (n = 365)	86
Figure 66	First Nations participants: context of vaginal or anal rape (n = 365)	87
Figure 67	All participants: context of attempted vaginal or anal rape (n = 2,790)	88
Figure 68	First Nations participants: lifetime prevalence of attempted vaginal or anal rape (n = 383)	90
Figure 69	First Nations participants: context of attempted vaginal or anal rape (n = 383)	90
Figure 70	All participants: lifetime prevalence of non-consensual intimate image or video making (n = 2,851)	91
Figure 71	All participants: context of non-consensual image or video making (n = 2,851)	92
Figure 72	First Nations participants: lifetime prevalence of non-consensual intimate image or video making (n = 391)	93
Figure 73	First Nations participants: context of non-consensual intimate image or video making (n = 391)	94
Figure 74	All participants: lifetime prevalence of non-consensual image or video distribution (n = 2,851)	96
Figure 75	All participants: context of non-consensual intimate image or video distribution (n = 2,851)	96
Figure 76	First Nations participants: lifetime prevalence of non-consensual intimate image or video distribution (n = 388)	97
Figure 77	First Nations participants: context of non-consensual intimate image or video distribution (n = 388)	98
Figure 78	All participants: medical abuse by intersex status (n = 2,452-2,475)	99
Figure 79	All participants: person/s responsible for any unwanted, coercive or frightening sexual experiences (n = 3,192)	117
Figure 80	First Nations participants: person/s responsible for any unwanted, coercive, or frightening sexual experiences (n = 416)	118

Figure number	Figure title	Page number
Figure 81	All participants: person/s responsible for any unwanted, coercive or frightening sexual experiences (n = 2,417)	103
Figure 82	First Nations participants: person/s responsible for any unwanted, coercive or frightening sexual experiences (n = 301)	104
Figure 83	All participants: substance misuse mean (sd) frequency in past year (range 1 = never to 5 = daily or almost daily) (n = 3,013)	105
Figure 84	First Nations participants: substance misuse mean (sd) frequency in past year (range 1 = never to 5 = daily or almost daily) (n = 396)	106
Figure 85	All participants: anxiety and depression symptom mean (sd) frequency in past 2 weeks (range 1 = none to 4 = 12-14 days) (n = 3,013)	107
Figure 86	First Nations participants: anxiety and depression symptom mean (sd) frequency in past 2 weeks (range 1 = none to 4 = 12-14 days) (n = 396)	108
Figure 87	All participants: diagnosis or treatment for mental disorder in past year (n = 3,188)	109
Figure 88	First Nations participants: diagnosis or treatment for mental disorder in past year (n = 416)	110
Figure 89	All participants: prevalence of disability or chronic illness among victims of sexual violence (n = 3,013)	111
Figure 90	All participants: mean (sd) effects of disability or chronic illness among victims of sexual violence (n = 3,013)	112
Figure 91	First Nations participants: prevalence of disability or chronic illness among First Nations victims of sexual violence (n = 396)	112
Figure 92	All participants: mean (sd) effects of disability or chronic illness among victims of sexual violence (n = 396)	113
Figure 93	All participants: victims of sexual violence: tested for HIV in past year (n = 2,992)	114
Figure 94	All participants: victims of sexual violence HIV status (n = 2,992)	114
Figure 95	First Nations victims of sexual violence tested for HIV in past year (n = 395)	115
Figure 96	All participants: educational attainment (n = 3,140)	115
Figure 97	First Nations participants: educational attainment (n = 407)	116
Figure 98	All participants: employment over last 3 months (n = 3,153)	117
Figure 99	First Nations participants: employment over last 3 months (n = 409)	118
Figure 100	All participants: total annual household income before taxes (n = 3153)	118
Figure 101	First Nations participants: total annual household income before taxes (n = 409)	119
Figure 102	All participants: sexual violence myths and attitudes mean (sd) overall average score (n = 2,892)	120

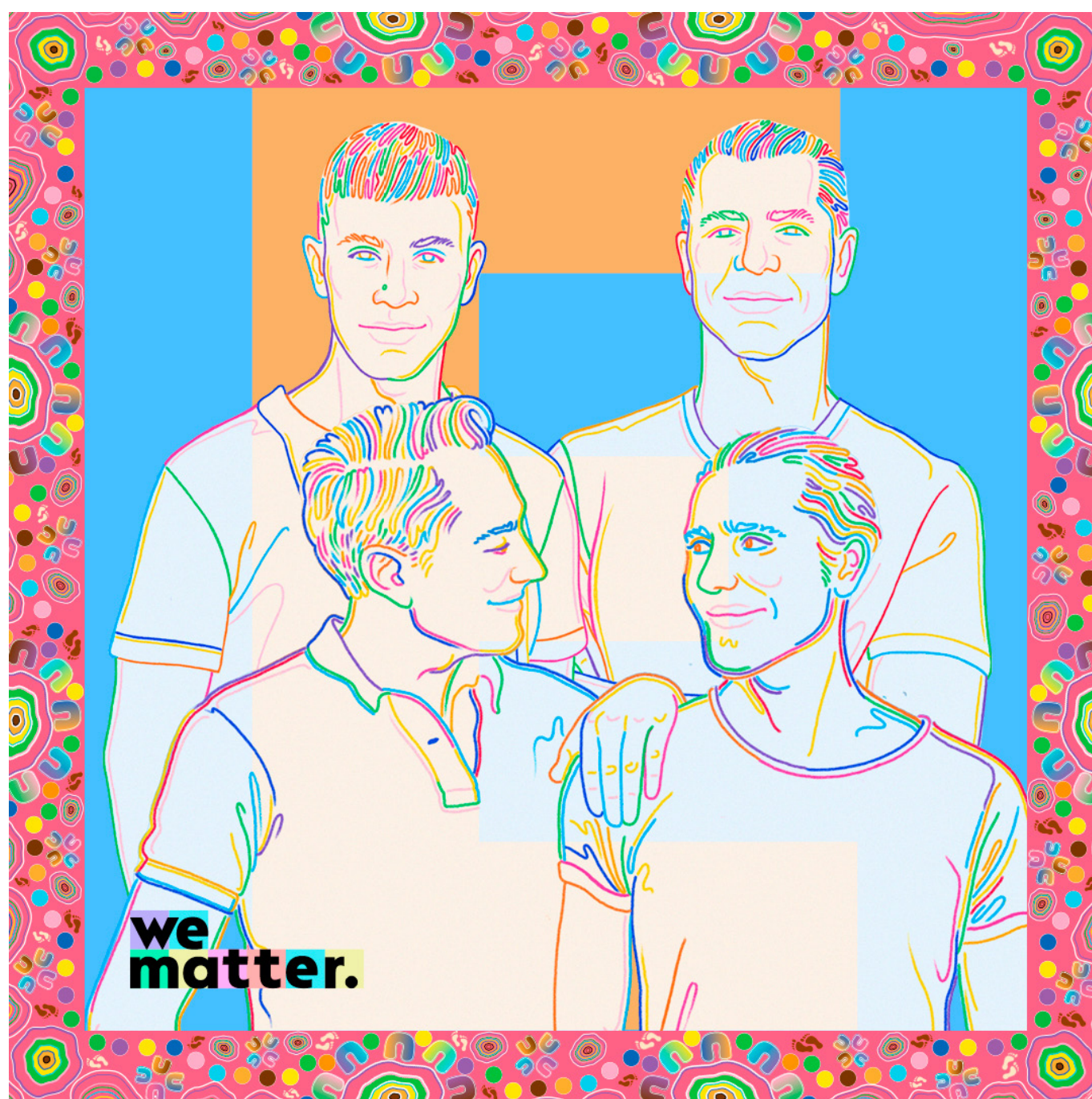
b. List of tables

Table number	Table title	Page number
Table 1	All participants: descriptive statistics (n = 3,192)	21-22
Table 2	All participants: mean (sd) age (n = 3,154)	23
Table 3	All participants: cultural background (multiple can be selected) (n = 3,188)	24
Table 4	All participants: residential location (n = 3,153)	25
Table 5	All participants: educational attainment (n = 3,140)	26
Table 6	All participants: employment over last 3 months (n = 3,153)	27
Table 7	All participants: total annual household income before taxes (n = 3,153)	28
Table 8	First Nations participants: descriptive statistics (n = 416)	29
Table 9	First Nations participants: mean (sd) age (n = 400)	30
Table 10	First Nations participants: residential location (n = 409)	31
Table 11	First Nations participants: educational attainment (n = 407)	32
Table 12	First Nations participants: employment over last 3 months (n = 409)	32
Table 13	First Nations participants: total annual household income before taxes (n = 409)	33
Table 14	All participants: current relationship status (n = 3,115)	34
Table 15	All participants: current relationship length (n = 1,894)	35
Table 16	All participants: gender of current partner/s (n = 1,894)	35
Table 17	All participants: current partner is transgender (n = 1,865)	36
Table 18	All participants: number of times had sex in last year (n = 2,372)	37
Table 19	All participants: number of sexual partners in last year (n = 2,410)	38
Table 20	All participants: LGBTIQ+ friends (n = 2,992)	39
Table 21	First Nations participants: current relationship status (n = 400)	40
Table 22	First Nations participants: current relationship length (n = 271)	41
Table 23	First Nations participants: gender of current partner/s (n = 274)	41
Table 24	First Nations participants: current partner is transgender, gender diverse, a Sistergirl or a Brotherboy (n = 270)	42
Table 25	First Nations participants: number of times had sex in last year (n = 346)	43
Table 26	First Nations participants: number of sexual partners in last year (n = 354)	43
Table 27	First Nations participants: LGBTIQ+ friends (n = 395)	44
Table 28	All participants: prevalence of adverse childhood experiences (n = 2,981)	45
Table 29	All participants: substance misuse mean (sd) frequency in the past year (range 1 = never to 5 = daily or almost daily) (n = 3,013)	46

Table number	Table title	Page number
Table 30	All participants: anxiety and depression symptom mean (sd) frequency in past 2 weeks (range 1 = none to 4 = 12-14 days) (n = 3,013)	47
Table 31	All participants: diagnosis or treatment for mental disorder in past year (n = 3,192)	48
Table 32	All participants: prevalence of a diagnosis of a disability or chronic illness (n = 3,013)	50
Table 33	All participants: tested for HIV in past 12 months and HIV status (n = 2,992)	51
Table 34	First Nations participants: prevalence of adverse childhood experiences (n = 387)	52
Table 35	First Nations participants: substance misuse mean (sd) frequency in the past year (range 1 = never to 5 = daily or almost daily) (n = 396)	53
Table 36	First Nations participants: anxiety and depression symptom mean (sd) frequency in past 2 weeks (range 1 = none to 4 = 12-14 days) (n = 396)	54
Table 37	First Nations participants: diagnosis or treatment for mental disorder in past year (n = 416)	56
Table 38	First Nations participants: disability (n = 396)	57
Table 39	First Nations participants: HIV (n = 395)	59
Table 40	All participants: sexual violence myths and attitudes mean (sd) score (range 1 = strongly disagree to 5 = strongly agree) (n = 2,892)	60-61
Table 41	All participants: sexual violence myths and attitudes prevalence of endorsement (somewhat agree or strongly agree = 1 vs. strongly disagree, disagree, or neither agree nor disagree = 0) (n = 2,892)	62-63
Table 42	First Nations participants: sexual violence myths and attitudes mean (sd) score (range 1 = strongly disagree to 5 = strongly agree) (n = 376)	64
Table 43	First Nations participants: rape myths and attitudes prevalence of endorsement (somewhat agree or strongly agree = 1 vs. strongly disagree, disagree, or neither agree nor disagree = 0) (n = 376)	65
Table 44	All participants: gender identity (n = 3,192)	66
Table 45	All participants: sexual orientation (n = 3,106)	67
Table 46	All participants: residential location (n = 3,153)	68
Table 47	All participants: someone made a sexual request or comment that was unwelcome, offensive, humiliating or intimidating (n = 2,883)	69
Table 48	First Nations participants: someone made a sexual request or comment that was unwelcome, offensive, humiliating, or intimidating (n = 376)	72
Table 49	All participants: someone fondled, kissed, or rubbed up against private areas of body (n = 2,827)	74
Table 50	First Nations participants: someone fondled, kissed, or rubbed up against private areas of body (n = 370)	76
Table 51	All participants: someone had oral sex with me or made me have oral sex against my will (n = 2,791)	77
Table 52	First Nations participants: someone had oral sex with me or made me have oral sex against my will (n = 368)	79
Table 53	All participants: someone tried to have oral sex with me or make me have oral sex against my will (n = 2,765)	81
Table 54	First Nations participants: someone tried to have oral sex with me or make me have oral sex against my will (n = 382)	83

Table number	Table title	Page number
Table 55	All participants: someone put their fingers, penis, or objects inside my vagina or anus against my will (n = 2,767)	84
Table 56	First Nations participants: someone put their fingers, penis, or objects inside my vagina or anus against my will (n = 365)	86
Table 57	All participants: someone tried to put their fingers, penis, or objects inside my vagina or anus against my will (n = 2,727)	87
Table 58	First Nations participants: someone tried to put their fingers, penis, or objects inside my vagina or anus against my will (n = 361)	89
Table 59	All participants: someone took nude or sexual images or videos against my will (n = 2,851)	91
Table 60	First Nations participants: someone took nude or sexual images or videos against my will (n = 391)	93
Table 61	All participants: someone shared nude or sexual images or videos against my will (n = 2,851)	95
Table 62	First Nations participants: someone shared nude or sexual images or videos against my will (n = 388)	97
Table 63	All participants: medically unnecessary examination descriptive statistics (n = 2,452-2,475)	99-100
Table 64	All participants: person/s responsible for any unwanted, coercive or frightening sexual experiences (n = 3,188)	101
Table 65	First Nations participants: person/s responsible for any unwanted, coercive or frightening sexual experiences (n = 416)	102
Table 66	All participants: person/s responsible for any unwanted, coercive or frightening sexual experiences (n = 2,417)	103
Table 67	First Nations participants: person/s responsible for any unwanted, coercive or frightening sexual experiences (n = 301)	104
Table 68	All participants: substance misuse mean (sd) frequency in the past year (range 1 = never to 5 = daily or almost daily) (n = 3,013)	105
Table 69	First Nations participants: substance misuse mean (sd) frequency in the past year (range 1 = never to 5 = daily or almost daily) (n = 396)	106
Table 70	All participants: anxiety and depression symptom mean (sd) frequency in past 2 weeks (range 1 = none to 4 = 12-14 days) (n = 3,013)	107
Table 71	First Nations participants: anxiety and depression symptom mean (sd) frequency in past 2 weeks (range 1 = none to 4 = 12-14 days) (n = 396)	108
Table 72	All participants: diagnosis or treatment for mental disorder in past year (n = 3,188)	109
Table 73	First Nations participants: diagnosis or treatment for mental disorder in past year (n = 416)	110-111
Table 74	All participants: disability (n = 3,013)	112
Table 75	First Nations participants: disability (n = 396)	113
Table 76	All participants: HIV (n = 2,992)	114
Table 77	First Nations participants: HIV (n = 395)	115
Table 78	All participants: educational attainment (n = 3,140)	116
Table 79	First Nations participants: educational attainment (n = 407)	116

Table number	Table title	Page number
Table 80	All participants: employment over last 3 months (n = 3,153)	117
Table 81	First Nations participants: employment over last 3 months (n = 409)	118
Table 82	All participants: total annual household income before taxes (n = 3,153)	119
Table 83	First Nations participants: total annual household income before taxes (n = 409)	119
Table 84	All participants: rape myths and attitudes mean (sd) score (range 1 = strongly disagree to 5 = strongly agree) (n = 2,892)	120-121



References

- ABS (2020). *Education Statistics for Aboriginal and Torres Strait Islander Peoples*. Australian Bureau of Statistics. Retrieved 10 May 2024, <https://www.abs.gov.au/statistics/people/aboriginal-and-torres-strait-islander-peoples/education-statistics-aboriginal-and-torres-strait-islander-peoples/latest-release#secondary-education>
- ABS (2022). *Income and Work: Census*. Australian Bureau of Statistics. Retrieved 10 May 2024, <https://www.abs.gov.au/statistics/labour/earnings-and-working-conditions/income-and-work-census/latest-release#data-downloads>
- ABS (2023). *Estimates of Aboriginal and Torres Strait Islander Australians*. Australian Bureau of Statistics. Retrieved 10 May 2024, <https://www.abs.gov.au/statistics/people/aboriginal-and-torres-strait-islander-peoples/estimates-aboriginal-and-torres-strait-islander-australians/latest-release>
- AIHW. (2018). *Family, Domestic and Sexual Violence in Australia*. Canberra. Retrieved 26 November 2021, <https://www.aihw.gov.au/reports/domestic-violence/family-domestic-sexual-violence-in-australia-2018/summary>
- AIHW (2024). *Higher Education, Vocational Education and Training*. Australian Institute of Health and Welfare. Retrieved 10 May 2024, <https://www.aihw.gov.au/reports/australias-welfare/higher-education-and-vocational-education#Attainment%20of%20non-school%20qualifications>
- AIHW (2024). *Rural and Remote Health*. Australian Institute of Health and Welfare. Retrieved 1- May 2024, <https://www.aihw.gov.au/reports/rural-remote-australians/rural-and-remote-health>
- Butchart, A., Garcia-Moreno, C., & Mikton, C. (2010). *Preventing Intimate Partner and Sexual Violence Against Women: Taking Action and Generating Evidence*. World Health Organization. Geneva. Retrieved 26 November 2021, https://www.who.int/violence_injury_prevention/publications/violence/9789241564007_eng.pdf
- Callander, D., Wiggins, J., Rosenberg, S., Cornelisse, V., Duck-Chong, E., Holt, M., & Cook, T. (2019). *The 2018 Australian Trans and Gender Diverse Sexual Health Survey: Report of Findings*. Kirby Institute: Sydney. Retrieved 26 November 2021, <https://kirby.unsw.edu.au/report/2018-australian-trans-and-gender-diverse-sexual-health-survey-report-findings>
- Carman, M., Fairchild, J., Parsons, M., Farrugia, C., Power, J., & Bourne, A. (2021). *Pride in Prevention: A Guide to Primary Prevention of Family Violence Experienced by LGBTIQ Communities*. La Trobe. Melbourne. Retrieved 26 November 2021, <https://www.rainbowhealthvic.org.au/news/launch-pride-in-prevention-evidence-guide>
- Commonwealth of Australia (2022). *National Plan to End Violence against Women and Children 2022-2032* <https://www.dss.gov.au/the-national-plan-to-end-violence-against-women-and-children/the-national-plan-to-end-violence-against-women-and-children-2022-2032>
- Cox, P. (2016). *Violence Against Women: Additional Analysis of the Australian Bureau of Statistics' Personal Safety Survey, 2012*. Australia's National Research Organisation for Women's Safety (ANROWS). Sydney, NSW. Retrieved 26 November 2021, <https://www.anrows.org.au/publication/violence-against-women-in-australia-additional-analysis-of-the-australian-bureau-of-statistics-personal-safety-survey-2012/>
- De Visser, R. O., Smith, A. M., Rissel, C. E., Richters, J., & Grulich, A. E. (2003). Sex in Australia: Experiences of sexual coercion among a representative sample of adults. *Australian and New Zealand Journal of Public Health*, 27(2), 198-203.
- Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P. & Marks, J. S. 1998. Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventive Medicine*, 14: 245-258.

- Hill, A., Bourne, A., McNair, R., Carman, M., & Lyons, A. (2020). *Private Lives 3: The Health and Wellbeing of LGBTIQ People in Australia*. ARCSHS: Melbourne. Retrieved 26 November 2021, https://www.latrobe.edu.au/_data/assets/pdf_file/0009/1185885/Private-Lives-3.pdf.
- Hill, A., 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*. ARCSHS: Melbourne. Retrieved 26 November 2021, https://www.latrobe.edu.au/_data/assets/pdf_file/0010/1198945/Writing-Themselves-In-4-National-report.pdf.
- Hillier, L., Jones, T., Monagle, M., Overton, N., Gahan, L., Blackman, J., & Mitchell, A. (2010). *Writing Themselves In 3: The Third National Study on the Sexual Health and Wellbeing of Same Sex Attracted and Gender Questioning Young People*. ARCSHS: Melbourne. Retrieved 26 November 2021, <https://www.acon.org.au/wp-content/uploads/2015/04/Writing-Themselves-In-3-2010.pdf>.
- Layard, E., Parker, J., Cook, T., Murray, J., Asquith, N., Fileborn, B., Mason, R., Barnes, A., Dwyer, A., Mortimer, S. (2022). *LGBTQ+ People's Experiences and Perceptions of Sexual Violence*. ACON Health. Retrieved 10 May 2024, https://www.utas.edu.au/_data/assets/pdf_file/0004/1622272/22178_Sexual-Violence-Report_v1a.pdf.
- Leonard, W., Pitts, M., Mitchell, A., Lyons, A., Smith, A., Patel, S., Couch, M., & Barrett, A. (2012). *Private Lives 2: The Second National Survey of the Health and Wellbeing of Gay, Lesbian, Bisexual and Transgender (GLBT) Australians*. ARCSHS: Melbourne. Retrieved 26 November 2021, <https://www.acon.org.au/wp-content/uploads/2015/04/PrivateLives2-report-2012.pdf>.
- Mathews, B., Pacella, R., Scott, J., Finkelhor, D., Meinck, F., Higgins, D., Erskine, H., Thomas, H., Lawrence, D. & Haslam, D. (2023). The prevalence of child maltreatment in Australia: Findings from a national survey. *The Medical journal of Australia*, 218: S1-S51.
- McCalman, J., Bridge, F., Whiteside, M., Bainbridge, R., Tsey, K. & Jongen, C. (2014). 'Responding to Indigenous Australian Sexual Assault: A Systematic Review of the Literature', *SAGE Open*, p.1-13.
- Messinger, A. M. (2017). *LGBTQ Intimate Partner Violence: Lessons for Policy, Practice, and Research*. University of California Press.
- Messinger, A. M., & Koon-Magnin, S. (2019). *Sexual Violence in LGBTQ Communities*. In O'Donohue, W.T. & Schewe, P.A. (Eds.), *Handbook of Sexual Assault and Sexual Assault Prevention* (pp. 661-674). Springer.
- Mittleman, J. (2022). Intersecting the academic gender gap: The education of lesbian, gay, and bisexual America. *American Sociological Review*, 87(2): 303-335.
- Our Watch. (2017). *Primary Prevention of Family Violence Against People from LGBTI Communities*. Retrieved 26 November 2021, <https://www.ourwatch.org.au/resource/primary-prevention-of-family-violence-against-people-from-lgbtqi-communities-an-analysis-of-existing-research/>.
- Our Watch, Victorian Health Promotion Foundation, & Australia's National Research Organisation for Women's Safety. (2015). *Change The Story: A Shared Framework for the Primary Prevention of Violence Against Women and their Children in Australia*. <https://www.ourwatch.org.au/change-the-story/>.
- Ovenden, G., Salter, M., Ullman, J., Denson, N., Robinson, K. H., Noonan, K., Bansel, P., & Huppertz, K. E. (2019). *Sorting it Out: Gay, Bisexual, Transgender, Intersex and Queer (GBTIQ) Men's Attitudes and Experiences of Intimate Partner Violence and Sexual Assault*. Western Sydney University, ACON: Sydney. Retrieved 26 November 2021, <https://apo.org.au/sites/default/files/resource-files/2019-05/apo-nid239816.pdf>.
- Ports, K. A., Ford, D. C., & Merrick, M. T. (2016). Adverse childhood experiences and sexual victimization in adulthood. *Child abuse & neglect*, 51, 313-322.
- Rogers, M. (2020). Domestic Violence and Abuse and Hidden Groups. In Ali, P. & McGarry, J. (Eds.) *Domestic Violence in Health Contexts: A Guide for Healthcare Professions* (pp. 109-122): Springer.
- Russell, B., & Torres, C. (2020). Identifying and Responding to LGBT+ Intimate Partner Violence from a Criminal Justice Perspective. In Russell, B. (Ed.), *Intimate Partner Violence and the LGBT+ Community: Understanding Power Dynamics* (pp. 257-280). Cham: Springer International Publishing.
- Salter, M., Robinson, K., Ullman, J., Denson, N., Ovenden, G., Noonan, K., Bansel, P., & Huppertz, K. (2021). Gay, Bisexual, and Queer Men's Attitudes and Understandings of Intimate Partner Violence and Sexual Assault. *Journal of interpersonal violence*, 36(23-24), 11630-11657.
- Seymour, K. (2019). (In) Visibility and recognition: Australian policy responses to 'domestic violence'. *Sexualities*, 22(5-6), 751-766.
- Smith, A. M., Rissel, C. E., Richters, J., Grulich, A. E., & de Visser, R. O. (2003). Sex in Australia: sexual identity, sexual attraction and sexual experience among a representative sample of adults. *Australian and New Zealand Journal of Public Health*, 27(2), 138-145.
- State of Victoria. (2016). *Royal Commission into Family Violence: Summary and Recommendations*. Parl Paper No 132 (2014-16). Victorian Government. Retrieved 26 November 2021, http://rcfv.archive.royalcommission.vic.gov.au/MediaLibraries/RCFamilyViolence/Reports/RCFV_Full_Report_Interactive.pdf.

Thapa, S., Gibbs, P., Ross, N., Newman, J., Allan, J., Dalton, H., Mahmood, S., Kalinna, B. H. & Ross, A. G. 2024. Are adverse childhood experiences (ACEs) the root cause of the Aboriginal health gap in Australia? *BMJ Global Health* 9: e014901.

Ussher, J. M., Hawkey, A., Perz, J., Liamputtong, P., Marjadi, B., Schmied, V., Dune, T., Sekar, J. A., Ryan, S., & Charter, R. (2020). *Crossing The Line: Lived Experience of Sexual Violence Among Trans Women of Colour from Culturally and Linguistically Diverse (CALD) Backgrounds in Australia*. Sydney: Australia's National Research Organisation for Women's Safety Limited (ANROWS). Retrieved 26 November 2021, <https://www.anrows.org.au/publication/crossing-the-line-lived-experience-of-sexual-violence-among-trans-women-of-colour-from-culturally-and-linguistically-diverse-cald-backgrounds-in-australia/>

Webster, K., Diemer, K., Honey, N., Mannix, S., Mickle, J., Morgan, J., Parkes, A., Politoff, V., Powell, A., Stubbs, J., & Ward, A. (2018). *Australians' attitudes to violence against women and gender equality: Findings from the 2017 National Community Attitudes towards Violence against Women Survey (NCAS)* ANROWS. Sydney, NSW. Retrieved 26 November 2021, <https://www.anrows.org.au/research-program/ncas/>

