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*Queensland*



LGBTQIA+ ALLIANCE

**Queensland LGBTQIA+  
Specific Health and  
Wellbeing Services  
Directory Report**



## **Acknowledgement of Country**

We acknowledge and pay our respects to the Traditional Custodians of the lands, oceans, skies and waterways now known as Queensland. We acknowledge and pay respect to Elders past and present. The sovereignty of these lands was never ceded. For us to do the work with integrity, respect and purposeful reconciliation, we acknowledge the oldest continuous culture in the world.

We acknowledge Aboriginal and Torres Strait Islander LGBTQIA+ people, including Sistergirl and Brotherboy communities throughout Queensland, and recognise their continued contributions to culture, community and advocacy.

## **Report Preparation**

This report was prepared by Project Officer Zoë Nano.



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## Executive Summary

**Background:** To date, no consolidated, statewide overview exists of the availability of LGBTQIA+ specific health and wellbeing services in Queensland. This lack of comprehensive data restricts the assessment of service coverage, geographic distribution, target populations, funding arrangements, and system gaps. This report addresses this deficiency by providing a comprehensive mapping and analysis of LGBTQIA+ specific health and wellbeing services operating across Queensland.

**Methods:** A desktop mapping exercise was conducted to identify LGBTQIA+ specific, community-led health and wellbeing services operating in Queensland. Publicly available information was collected through online searches and compiled into a structured dataset. Services were classified by geographic location, remoteness area, service provision type, target demographic, and funding source. 61 active services met the inclusion criteria and were included in the analysis.

Anecdotally, the Alliance knows of several small support groups operating throughout the state to connect communities; however, many of these groups operate by word of mouth or on local bulletin boards and, as such, did not meet the online search criteria. A further sweep could be conducted to collect the breadth of these services, but it is beyond the scope of current funding.

**Results:** A total of fifty-one LGBTQIA+ specific health and wellbeing services were identified across Queensland. These services were concentrated in major cities (44%) and inner and outer regional areas (56%), with none identified in remote or very remote areas. The service system primarily consisted of peer support, community connection, and social wellbeing services (88%), while substantially fewer services provided cultural safety and cultural protective factors, including frameworks (10%) or other specialist and statutory support. No alcohol and other drug services were identified. Nearly half of the services targeted the general LGBTQIA+ population (46%), with limited and uneven availability of targeted services for specific population groups. No LGBTQIA+ specific services were identified for people living with disabilities or culturally and linguistically diverse communities. While approximately half of the services received Queensland Government funding (45%), a substantial proportion operated as unfunded, volunteer-run organisations (37%)

**Implications for Policy and Investment:** Geographic gaps, limited availability of specialist services, uneven population coverage, and funding instability negatively impact access, service capacity, and the sustainability of LGBTQIA+ specific health and wellbeing services across Queensland.

**Recommendations:** Address geographic inequities in service availability through targeted community investment; Strengthen access to specialist and statutory services through locally tailored service system responses; Improve equity of access for underserved population groups through structured capacity building; Enhance funding stability and sustainability; and resource the Alliance to maintain a statewide evidence base on service availability.

**Conclusion:** This report establishes the first statewide baseline of LGBTQIA+ specific health and wellbeing services in Queensland. It identifies significant gaps in geographic coverage, service mix, population reach, and funding stability, and offers an evidence base to inform future planning and investment. The Key Recommendation of this report is that the Alliance undertake mapping annually as an ongoing sector monitoring exercise. An annual mapping process would enable systematic updates to the dataset, capture changes in service availability and participation, and support longitudinal analysis of trends in service coverage, accessibility, and sector development.



## Background

***Equitable access to safe, inclusive and culturally responsive support services is essential to the health and wellbeing of LGBTQIA+ communities in Queensland and helps ensure people can access the right support early—before needs escalate—consistent with the Queensland Government’s Pride in Our Communities Action Plan.***

LGBTQIA+ individuals have distinct health and wellbeing needs shaped by a complex interplay of social, cultural, and historical determinants (1-4). These needs are not uniform and may vary considerably across individuals, communities, and settings, particularly where sexual orientation and gender identity intersect with other factors such as First Nations status, cultural and ethnic background, disability, socioeconomic status, or geographical location (5, 6, 7, 8). In Australia, mainstream or universal healthcare and wellbeing models frequently fail to address the diverse needs of LGBTQIA+ individuals (9, 10). National evidence demonstrates that many LGBTQIA+ Australians underutilise health and wellbeing services, often delaying or foregoing necessary care due to previous negative experiences or anticipated discrimination (7, 12). These challenges are further intensified for those with intersecting identities, such as Aboriginal and Torres Strait Islander people, individuals with disabilities, or those residing in regional and remote areas, who face additional context-specific barriers (6, 12, 13).

Community-controlled, peer-led health and wellbeing services are increasingly recognised as effective approaches for meeting the health and wellbeing needs of diverse populations. The success of Aboriginal and Torres Strait Islander Community-controlled Health Services across Australia demonstrates the value of models grounded in lived experiences, community knowledge, and strong local networks. These approaches deliver care and support that is culturally safe, responsive and locally relevant. Consistent with this, national evidence indicates a strong preference among LGBTQIA+ communities for peer-led services, with approximately 80% of respondents favouring these models over mainstream due to perceived safety, inclusivity, cultural competence and personalised care (14). This preference provides important context for understanding the role of peer-led, community-controlled services in supporting LGBTQIA+ people to access care and support that enables healthy, safe, and fulfilling lives (6,9,14).

In Queensland, LGBTQIA+ communities and peer-led organisations play a critical role in delivering responsive health and wellbeing care and support. Drawing on lived experience and trusted local networks, these organisations provide community-informed services that often address gaps within mainstream systems and contribute to more equitable outcomes across the state (7). This report establishes a baseline, statewide picture of LGBTQIA+ specific health and wellbeing service availability in Queensland, supporting more consistent assessment of access, coverage and priority areas for service improvement.

These community-led responses are particularly critical in regional and remote settings, where LGBTQIA+ specific services are limited or absent. In such contexts, mainstream services may lack the cultural capability, training, or trusted relationships required to deliver inclusive and affirming care (13). As a result, people may wait until issues escalate or rely on informal networks rather than accessing early support when they are uncertain which services are safe, inclusive, and confidential (13). In the absence of accessible mainstream options, peer-led organisations frequently function as the primary, and sometimes only, point of care and support, despite often operating without stable funding, infrastructure, or formal recognition.



Stable, long-term investment strengthens the operational capability of community-led organisations and supports consistent, safe service delivery. In the absence of sustained resourcing, services may experience workforce pressures, limited geographic coverage and reduced capacity to maintain continuity. Ongoing support enables place-based solutions, strengthens culturally secure and inclusive care, and improves statewide access. This investment contributes to health equity, community resilience and long-term sector capacity.

## Methodology

### Objectives

1. To identify and map LGBTQIA+ specific health and wellbeing services available across Queensland, detailing their precise geographical locations.
2. To examine the types of LGBTQIA+ specific health and wellbeing services offered across Queensland.
3. To identify existing opportunities and gaps to strengthen the Queensland LGBTQIA+ sector
4. To analyse gaps in the availability and distribution of LGBTQIA+ specific health and wellbeing services in Queensland, with a focus on regional and demographic disparities.

### Search Strategy

A desktop search was conducted to identify and synthesise publicly available LGBTQIA+ specific services, organisations and groups across Queensland. The search aimed to map existing supports to inform the development of a comprehensive directory and to identify service gaps.

Searches were performed across three platforms: Google, Facebook, and Instagram. Key search terms utilised included, but were not limited to, *LGBTQIA+ (including variations such as LGBT, LGBTI), Queer\*, Gender Diverse, Transgender, Intersex, Pride, Proud, and Rainbow*. To improve relevance, these search terms were combined with names of specific towns, cities or regions across Queensland (e.g. "Cairns LGBTQIA+ group" or "Townsville transgender support"). To be included, entities were required to meet all of the following criteria: LGBTQIA+ led or community-controlled by LGBTQIA+ people; have a primary focus on delivering LGBTQIA+-specific health and wellbeing support, recognising health and wellbeing as a holistic concept that includes not only clinical care but also social, legal, safety, and systems-level supports that directly affect people's ability to live safely, access care, and maintain wellbeing; operates as a not-for-profit or volunteer and or community-led (including incorporated associations, charities, grassroots groups, or social support networks with a health and wellbeing focus); based and operating within Queensland. Through this process, 66 services, organisations, and groups were initially identified. Following verification of service activity status, one service was confirmed as no longer operating and was excluded, resulting in a final sample of 51 active services included in the analysis.

Anecdotally, the Queensland LGBTQIA+ Alliance knows of several small support groups operating throughout the state to connect communities; however, many of these groups operate by word of mouth or on local bulletin boards and, as such, did not meet the online search criteria. A further sweep could be conducted to collect the breadth of these services, but it is beyond the scope of current funding.



## Data Extraction

Information on identified services was extracted and entered into a pre-developed Excel spreadsheet (Appendix A). Extracted data included: service name and logo; organisational description or bio; address; email and phone contact; opening hours; relevant websites or social media links; type of services provided; information on available health and wellbeing support services; funding status; location; local government area; remoteness area; and region.

## Geographical Classifications

The State of Queensland was grouped into eleven regions, according to the Queensland Government's Department of State Development, Infrastructure and Planning and regional boundaries: South-East Queensland; Darling Downs; Southern Downs; Southwest Queensland; Wide Bay Burnett; Central Queensland; Western Queensland, Mackay Whitsundays, North Queensland, Northwest Queensland and Far North Queensland. (Appendix B). Within each region, data were further grouped by local government areas according to the Queensland Government's Local Government Areas Map (current as of May 2025), as shown in Appendix C. Each location was then grouped by remoteness area according to the Australian Bureau of Statistics Rural and Remote Areas of Queensland classification: major city, inner regional, outer regional, remote, and very remote (Appendix D and E).

## Service Provision Classifications

Health and wellbeing services, viewed through a holistic lens that recognises the social, legal, safety, and systems-level determinants of health and wellbeing, were grouped into the following service types: Healthcare (physical, mental, sexual, or reproductive); peer support, community connection, or social wellbeing, including the delivery of events, festivals, gatherings, or community activations; legal services or advocacy related to health, safety, access, or rights; navigation, support, or care to access health, disability, aged care, or social services; family and domestic violence prevention, response, and recovery; cultural safety and cultural protective factors, including frameworks; support and care for parents, carers, or guardians of LGBTQIA+ people; housing, safety, crisis, or wellbeing-related support and care; and capacity building, workforce development, training, or sector development that improves the safety, accessibility, or responsiveness of workplaces, clinics, or systems for LGBTQIA+ people. Services may be represented in more than one category where multiple types of support are provided.

## Target Demographic Classifications

Target demographic groups of the health and wellbeing services were grouped into General LGBTQIA+ People; Aboriginal, Torres Strait Islander and Australian South Sea Islander people; People with Innate Variations of Sex Characteristics; Transgender, Gender Diverse and Non-Binary People; Young People; Rainbow Families; Older People, Parents, Guardians or Caregivers of LGBTQIA+ People; and Bisexual or Multi Gender Attracted People; People living with Disabilities and People from a Culturally and Linguistically Diverse (CALD) background.

## Funding Classifications

Funding sources for identified health and wellbeing services were categorised to support analysis of sector resourcing. Services were classified according to federally funded where they received direct Commonwealth funding; state funded where they received direct Queensland Government funding; philanthropic or corporate-sponsored where funding was provided through philanthropic grants or corporate sponsorship; partnership-based where services were supported through auspicing or partnership arrangements (including funding administered by another organisation to support program delivery); and unfunded (volunteer-run) where services operated without direct funding and relied primarily on volunteer or unpaid labour. Services may be represented in more than one funding category where multiple funding sources were identified.



## Inclusion in Analysis and Public Directory

All services that met the inclusion criteria were included in the analysis presented in this report. Consent was sought separately for inclusion in the interactive directory that will be published on the Peak Alliance website. Services that did not provide consent or elected not to participate in the public directory at this stage remain included in the aggregate analysis to ensure a comprehensive and accurate representation of LGBTQIA+ specific health and wellbeing service availability across Queensland.

## Data Validation

Data validation was undertaken to support the development of the public-facing Queensland LGBTQIA+ Specific Health and Wellbeing Service Interactive Directory. Service profiles were extracted and compiled into individual Word documents, which were then provided to each organisation for review and confirmation. Organisations were asked to validate only the information that will be publicly displayed in the directory, including organisational name, service descriptions, contact details, operating hours, locations, service types offered and website and social media links. Variables used for analysis purposes in this report, such as funding source, geographic classification, remoteness category and service typologies, were not validated by organisations. These were assigned by the project team using publicly available information and consistent classification frameworks. This approach supports accurate, up-to-date public information in the directory, while maintaining consistency across the dataset used for reporting and analysis.

## Development of an Interactive Directory

The verified data for participating services, excluding funding status, were used to develop an interactive online map using Genially, a web-based software platform (Appendix F). Each service location was marked with a pin that users could select to expand into a dedicated page containing detailed information, including contact details, service descriptions, and relevant links (Appendix F).

\*We acknowledge that while some individuals and communities embrace and take pride in the anti-assimilationist and transgressive nature of the word *queer*, it also carries a history of being used as a derogatory and stigmatised term. Its use in this research has been both thoughtful and intentional, with respect for the diverse ways people relate to the term. Many organisations, services, and community groups use *queer* in their names and identities, and its inclusion here is intended to ensure that all relevant entities are recognised and represented.

## Results

### Geographical Distribution

A total of 61 active LGBTQIA+ specific health and well-being services were identified in Queensland; of these, 43% were in major cities, 29% in outer regional areas, 27% in inner regional areas and 0% in remote and very remote areas (Table 1).

Table 1. Geographical Location of LGBTQIA+ Health and Wellbeing Services in Queensland by Remoteness

Region Type	Total number of services n (%)
Major City	22 (44)
Inner Regional	14 (27)
Outer Regional	15 (29)



Remote	0 (0)
Very Remote	0 (0)
<b>Total</b>	<b>51 (100)</b>

### Service Provision

Peer support, community connection, or social wellbeing services comprised the majority of identified LGBTQIA+ specific health and wellbeing services (88%) (Table 2). A notable proportion of services also delivered capacity building, workforce development, training, or sector development (33%), and navigation, support, or care to assist access to health, disability, aged care, or social services (23%). Smaller proportions of services provided support and care for parents, carers, or guardians of LGBTQIA+ people (8%), or cultural safety and cultural protective factors, including frameworks (10%). In contrast, healthcare, legal services or advocacy, housing, safety, crisis or wellbeing-related support, and family and domestic violence prevention, response, and recovery services were limited, each representing fewer than 5% of identified services.

*Table 2. Service Provision Classification of LGBTQIA+ Health and Wellbeing Service in Queensland\**

Services Provided	Total number of services n (%)
Peer support, community connection, or social wellbeing	45 (88)
Capacity building, workforce development, training, or sector development	17 (33)
Legal services or advocacy related to health, safety, access, or rights	2 (4)
Healthcare (physical, mental, sexual, reproductive)	1 (2)
Cultural Safety and Cultural protective factors, including frameworks	5 (10)
Navigation, support, or care to access health, disability, aged care, or social services	9 (18)
Family and domestic violence prevention, response, and recovery	1 (2)
Housing, safety, crisis or wellbeing-related support and care	2 (4)
Alcohol and other drugs service	0 (0)
Support and care for parents, carers or guardians of LGBTQIA+ people	4 (8)

\*The health and well-being service may provide more than one type of service (refer to Appendix A).

### Target Demographic

Approximately half of the services (45%) targeted the General LGBTQIA+ population (Table 3). Targeted services for specific groups included Rainbow Families (16%) and Aboriginal, Torres Strait Islander and Australian South Sea Islander communities (14%). Smaller proportions of services focused on Transgender, Gender Diverse and Non-Binary people (8%), Parents, Guardians or Caregivers of LGBTQIA+ People (8%), Young People (6%), Older People (2%), People with Innate Variations of Sex Characteristics (2%), and Bisexual or Multigender Attracted People (2%). No dedicated services were identified for People living with Disabilities or for LGBTQIA+ people from CALD backgrounds.



Table 3. Target Demographic of LGBTQIA+ Health and Wellbeing Service in Queensland

Target Demographic	Total number of services n (%)
General LGBTQIA+ people	23 (45)
Transgender, Gender Diverse and Non-Binary people	4 (8)
Rainbow Families	8 (16)
Aboriginal, Torres Strait Islander and Australian South Sea Islander people	7 (14)
Parents, Guardians, Caregivers of LGBTQIA+ people	4 (8)
Young People	3 (6)
Older people	1 (2)
People with Innate Variations of Sex Characteristics	1 (2)
Bisexual and Multigendered Attracted people	1 (2)
People Living with a Disability/s	0 (0)
People from a Culturally and Linguistically Diverse Background	0 (0)
<b>Total</b>	<b>51 (100)</b>

### Funding

The majority of identified LGBTQIA+ specific health and wellbeing services received Queensland Government funding (47%) (Table 4). A smaller proportion received Commonwealth funding (16%). Partnership-based funding, including auspicing or funding administered through another organisation, was also common, supporting approximately one-quarter (24%) of services. In contrast, philanthropic or corporate-sponsored funding was limited, identified for only 4% of services. Notably, a substantial proportion of services operated as unfunded, volunteer-run organisations (37%).

Table 4. Funding Status of LGBTQIA+ Health and Wellbeing Services in Queensland\*

Region Type	Total number of services n (%)
Federally (Commonwealth Government)	10 (20)
State (Queensland Government)	24 (47)
Philanthropic/Corporate-sponsored	2 (4)
Partnership	12 (24)
Unfunded	19 (37)

\*The health and well-being service may receive funding from one or more funding source categories (refer to Appendix A)



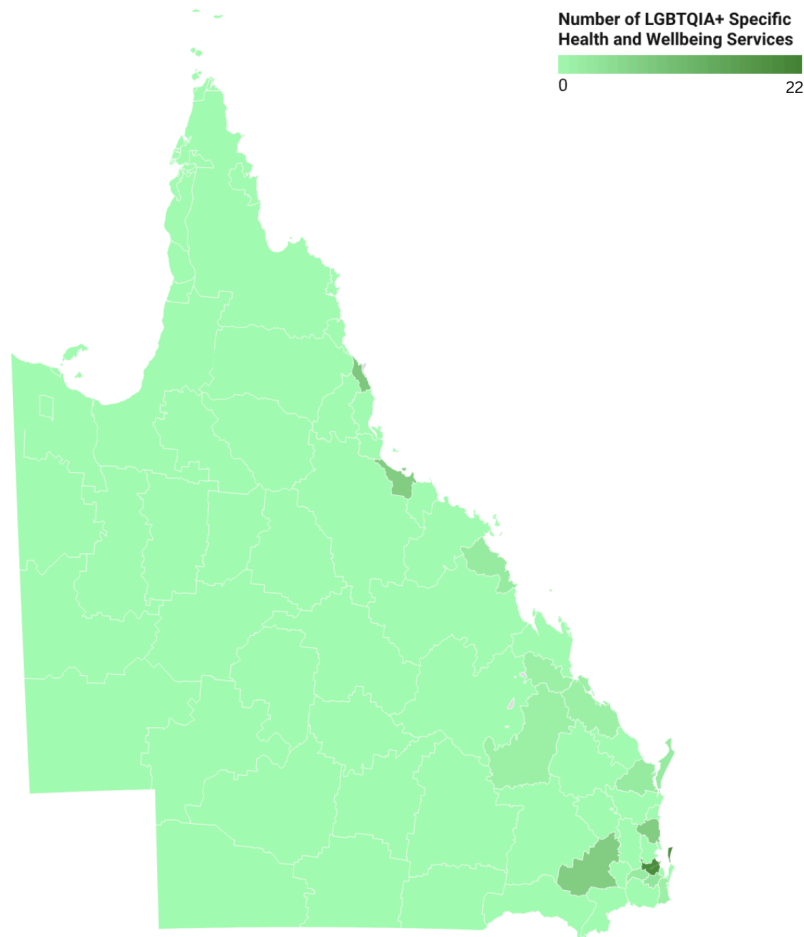
## Key Findings

This report identifies the current landscape of LGBTQIA+ specific health and wellbeing services across Queensland, highlighting areas of strength, service gaps, and opportunities for policy and funding support. The findings demonstrate the critical role of community-led organisations and services while also underscoring significant inequities in access to, coverage of, and sustainability of services.

### Service Availability is Uneven Across Queensland

Mapping of LGBTQIA+ specific health and wellbeing services across Queensland demonstrates uneven service availability across the state. Identified services are concentrated in major cities and regional centres, with no services operating in remote or very remote areas (Figure 1). This indicates that access to LGBTQIA+ specific services varies geographically and is closely aligned with population density and existing service infrastructure, rather than with statewide coverage.

*Figure 1. Geographic Distribution of LGBTQIA+ Specific Health and Wellbeing Services by Local Government Area in Queensland*



Source: Australian Bureau of Statistics, 2021 estimates • Map data: ABS • Created with Datawrapper

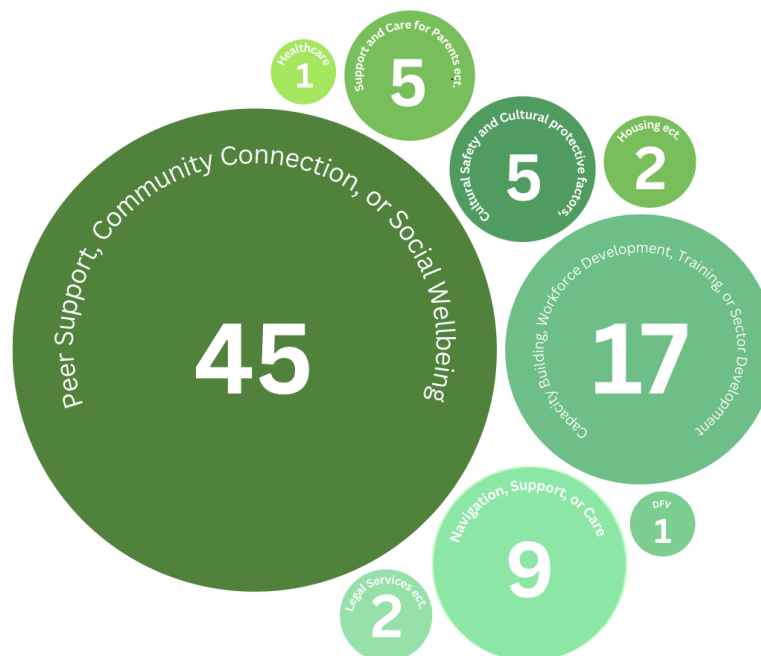


## The Service System is Dominated by Peer Support and Social Wellbeing Provision

The LGBTQIA+ specific service landscape in Queensland is heavily weighted toward peer support, community connection, and social wellbeing services, which comprise the majority of identified provision (Figure 2). These services play a central role in facilitating connection, reducing isolation, and supporting wellbeing, particularly through place-based and community-facing models.

In contrast, services providing specialist, statutory, or crisis-oriented support, including healthcare, legal services, domestic and family violence response, housing-related support, and alcohol and other drug services, represent a small proportion of the identified service system. This indicates a service mix that prioritises social and peer-based support, with comparatively limited availability of formal or specialist services within the LGBTQIA+ specific sector.

Figure 2. Distribution of service provision classifications among LGBTQIA+ specific health and wellbeing services in Queensland

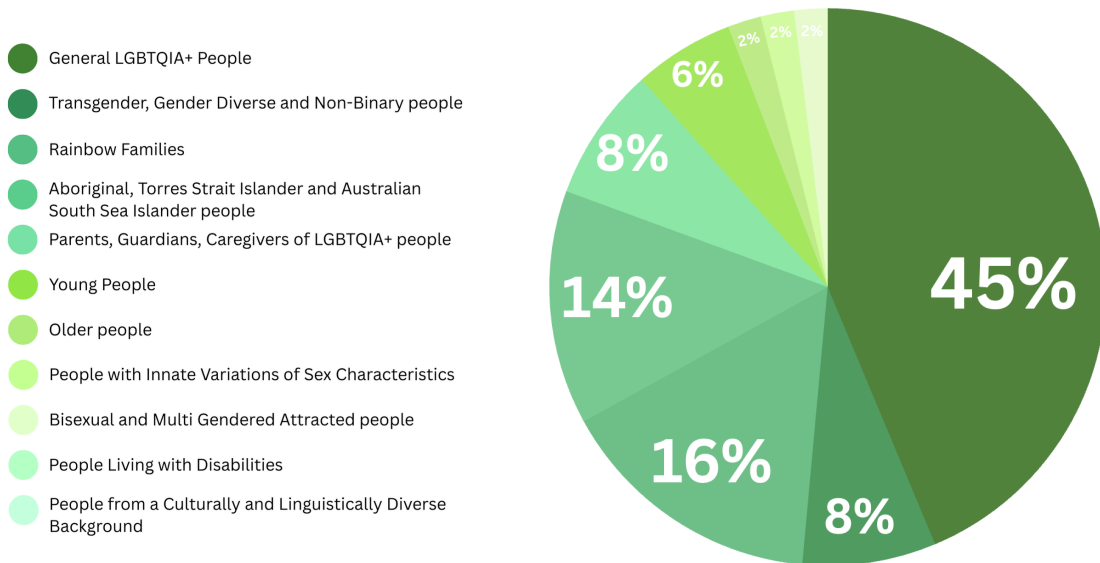


## Targeted Service Coverage Varies Across Population Groups

While some targeted services exist for specific population groups, including Rainbow Families, and Aboriginal, Torres Strait Islander and Australian South Sea Islander communities, coverage is uneven across Queensland. Dedicated services for Older LGBTQIA+ People, Young People, People with Innate Variations of Sex Characteristics, and Bisexual or Multigender Attracted People are limited, and no LGBTQIA+ specific health and wellbeing services were identified for People Living with Disabilities or for CALD communities. This suggests differential access to tailored supports across population groups within the LGBTQIA+ community.

Figure 3. Distribution (%) of LGBTQIA+ Specific Health and Wellbeing Services Service Provision in Queensland

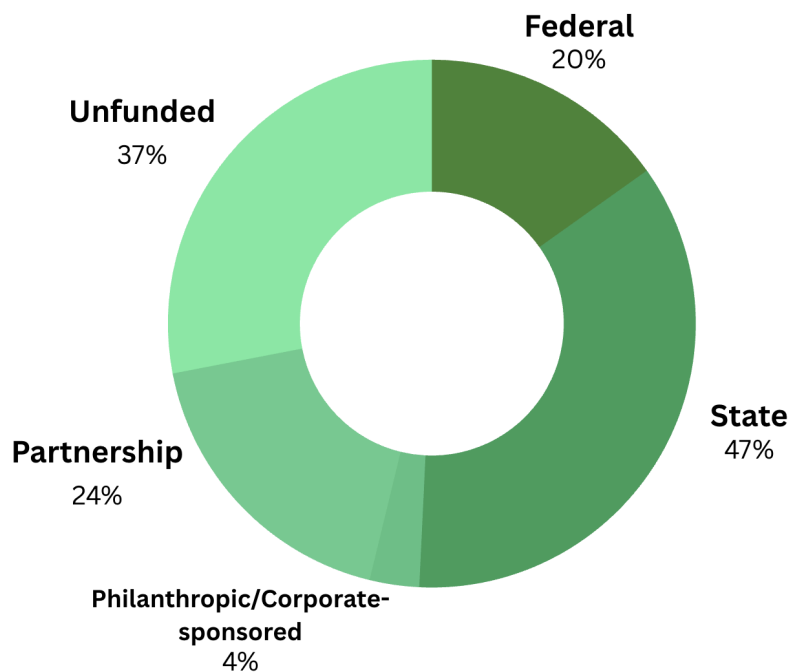




**A significant proportion of services operate with limited or unstable funding**

Although numerous identified LGBTQIA+ specific health and wellbeing services receive some government funding, a significant proportion operate without funding or are managed by volunteers. Many organisations depend on partnership-based or auspiced funding arrangements instead of direct, recurrent funding. Consequently, the service system is marked by inconsistent funding security and a considerable dependence on short-term, indirect, or non-recurrent resources.

Figure 4. Distribution (%) of Funding Type Received by LGBTQIA+ Specific Health and Wellbeing Services in Queensland



## Implications for Policy and Investment

### Alignment of Service Availability with Documented Patterns of Need

Limited availability of LGBTQIA+ specific health and wellbeing services outside major cities influences how, where and when people access care across Queensland. Where dedicated services are not available, LGBTQIA+ people are more likely to rely on mainstream health and wellbeing systems. However, mainstream services may not consistently have the cultural capability, workforce training or community trust required to provide safe, inclusive and affirming care for LGBTQIA+ people (7). These barriers can be heightened in smaller communities, where reduced anonymity can increase concerns about privacy, confidentiality and personal safety. National survey evidence indicates that, in these contexts, some LGBTQIA+ people delay or avoid seeking support due to fear of discrimination or prior negative experiences in mainstream settings (7). Taken together, these factors suggest geographic disparities in LGBTQIA+ specific service availability may contribute to unmet need, delayed care and continuing health and wellbeing inequities for people living outside major metropolitan and regional centres. Over time, this misalignment affects equity of access, system efficiency, and the capacity of existing services to respond to LGBTQIA+ community needs across the state.

This highlights an investment opportunity to strengthen service navigation and culturally competent pathways in areas with limited LGBTQIA+ specific provision, so people can access the right support earlier and closer to home, and to better equip mainstream services when they are the primary point of care. From a system-planning perspective, the key question is not only where services exist but also whether the current mix of service types matches the complexity of need.

### Capacity to Respond to Complex and Statutory Needs

The findings indicate a mismatch between the types of services most widely available and the complexity of needs experienced within LGBTQIA+ communities. Peer support, community connection, and social wellbeing services account for the majority of LGBTQIA+ specific provision in Queensland and play an important role in strengthening community wellbeing. However, dedicated services that respond to complex, statutory or crisis-related needs—such as housing insecurity, domestic and family violence, alcohol and other drug use, and specialist healthcare—remain limited. National evidence suggests LGBTQIA+ people experience higher rates of homelessness, domestic and family violence and substance use than the general population (7). Yet the current service landscape is largely made up of peer-based models that are not always designed, resourced or mandated to respond to statutory obligations or clinically complex presentations. This can place pressure on community organisations, create risks to workforce sustainability, and reduce the likelihood that people receive the right support at the right time. Where specialist and statutory options are limited, individuals may experience delays, rely on informal or non-specialist pathways, or disengage altogether (7). Over time, this gap between need and service capacity is likely to reinforce inequities—particularly for people facing multiple and intersecting barriers to care.

Targeted investment could focus on strengthening referral pathways and expanding specialist and statutory response capability—either through dedicated services where demand is concentrated, or through commissioned partnerships that support consistent statewide coverage and safe escalation from peer-based supports. Alongside geographic coverage, equitable access also depends on whether people with distinct needs can access tailored, culturally secure supports that reflect documented patterns of disadvantage.



## **Equitable Access for Distinct Population Groups**

Uneven distribution of targeted services also limits equitable access within LGBTQIA+ communities. National evidence indicates that LGBTQIA+ people from culturally and linguistically diverse (CALD) backgrounds, people with innate variations of sex characteristics, and people living with disabilities experience poorer health outcomes and face greater barriers to care and support (7). However, no dedicated LGBTQIA+ specific services were identified for people with disabilities or CALD communities, and only limited services were identified for people with innate variations of sex characteristics. National research also identifies transgender, gender diverse and non-binary people as experiencing significant inequities and barriers to care (7). While a small number of targeted services were identified, their limited availability and geographic concentration suggest access to tailored support remains inconsistent across Queensland. Overall, the findings point to a gap between documented need and the availability, coverage and reach of targeted services, with implications for equitable access and health outcomes.

A focused investment approach could prioritise low-coverage cohorts and build capability through a combination of targeted service models, workforce development and partnerships with mainstream providers—supported by clear service standards and consistent statewide referral pathways. Finally, the effectiveness of any service mix depends on whether it is sustainable—able to retain workforce, maintain continuity and respond to growth in demand.

## **Sustainability and System Resilience**

The high prevalence of unfunded, volunteer-run and partnership-dependent services presents a material risk to sustainability and system resilience. Approximately half of the identified services operate without direct funding, and many others rely on short-term, indirect or auspiced arrangements. This creates a service system that depends heavily on volunteer labour and informal resourcing. These conditions undermine continuity, workforce stability, and organisational capacity—particularly in regional and outer regional areas, where services are often small, locally based, and constrained by infrastructure. Services operating with insecure funding can struggle to maintain consistent delivery, meet increasing demand, retain skilled staff and plan for longer-term development. At a system level, a sector characterised by funding instability and workforce pressures is less able to provide reliable support, respond to emerging needs or adapt to policy and demographic change over time. This threatens the durability and effectiveness of LGBTQIA+ specific service provision across Queensland, particularly where alternative supports are scarce.

From an investment perspective, greater stability can be achieved through longer-term funding arrangements, clearer commissioning expectations, and minimum service sustainability requirements—reducing reliance on volunteer labour and enabling services to plan, retain staff, and deliver safely over time. Collectively, these findings provide a practical evidence base to support targeted, place-based investment decisions that improve access, strengthen service capability and build a more resilient statewide system.

## **Recommendations**

### **1. Address geographic inequities in LGBTQIA+ specific health and wellbeing service availability**

The findings indicate the need to ensure a more equitable distribution of LGBTQIA+ specific health and wellbeing services across Queensland, especially in regional, outer regional, and remote areas where dedicated services are currently lacking.



## **2. Strengthen access to specialist and statutory supports within the LGBTQIA+ health and wellbeing service system**

The evidence demonstrates limited availability of LGBTQIA+ specific specialist, statutory, and crisis-oriented services, including healthcare, legal assistance, domestic and family violence response, housing, and alcohol and other drug support. Policy intervention is recommended to ensure the service mix aligns more closely with documented patterns of need.

## **3. Improve equity of access for underserved population groups**

The findings highlight gaps in targeted services for several population groups experiencing documented health inequities, including People Living with Disabilities, CALD communities, People with Innate Variations of Sex Characteristics, Older LGBTQIA+ people, and Bisexual or Multigender Attracted individuals. Targeted, culturally responsive support should be strengthened for these groups.

## **4. Enhance funding stability and system sustainability**

The high proportion of unfunded, volunteer-run, and partnership-dependent services creates vulnerabilities in service continuity, workforce stability, and long-term capacity. Adoption of funding models that promote greater stability and sustainability across the sector is recommended.

## **5. Support the capacity and role of peer-based services within the appropriate scope**

Peer support and community connection services constitute the foundation of LGBTQIA+ specific provision in Queensland. Supporting these services to operate sustainably and within an appropriate scope, while ensuring accessible pathways to specialist and statutory supports, is essential.

## **6. Maintain and build a statewide evidence base on LGBTQIA+ health and wellbeing service availability through annual sector mapping**

This mapping establishes a baseline for LGBTQIA+ specific health and wellbeing services in Queensland. It is recommended that the Alliance undertake this mapping annually as an ongoing sector monitoring exercise. An annual mapping process would enable systematic updates to the dataset, capture changes in service availability and participation, and support longitudinal analysis of trends in service coverage, accessibility, and sector development. Continued annual mapping will support improved planning, investment decisions, and assessment of progress in addressing identified gaps and inequities.

## **Conclusion**

This report presents the first comprehensive, statewide overview of LGBTQIA+ specific health and wellbeing services in Queensland. The findings underscore the essential role of peer-based and community-led services in supporting LGBTQIA+ communities, while also revealing substantial inequities in service availability, coverage, and sustainability.

Service provision is geographically concentrated in major cities and regional centres, with no identified services operating in remote or very remote areas. The current service landscape is primarily composed of peer support and social wellbeing models, while specialist, statutory, and crisis-oriented services remain comparatively scarce. Targeted supports are inconsistently distributed across population groups, and several communities with documented health inequities, such as



people with disabilities, CALD communities, and People with Innate Variations of Sex Characteristics, have minimal or no access to dedicated LGBTQIA+ specific health and wellbeing services. Furthermore, a significant proportion of services operate with limited or unstable funding, raising concerns regarding long-term sustainability and system resilience.

Collectively, these findings indicate a misalignment between the distribution and composition of LGBTQIA+ specific health and wellbeing services and the documented health and wellbeing needs of LGBTQIA+ communities across Queensland. The mapping identifies both the strengths of the current service system and the areas where targeted policy attention and investment are necessary to promote equitable access, system sustainability, and improved health and wellbeing outcomes for LGBTQIA+ people statewide. The recommendations outlined in this report provide a framework for strengthening sector oversight, addressing identified gaps, and supporting more equitable and sustainable LGBTQIA+ health and wellbeing service delivery across Queensland over time.

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## Appendices

Appendix A. LGBTQIA+ Specific Health and Wellbeing Service Information by Local Government Area, Location, Remoteness Area, Service Classification, Target Demographic and Funding Classification

### South-East Queensland

Organisation/Group	Local Government Area	Location	Remoteness Area	Service/s	Target Demographic	Funding
Rainbow Families Queensland Play Group	Gold Coast Regional	Gold Coast	Major City	Peer	Rainbow Families	Partnership
Diverse Voices	Logan City	Springwood	Major City	Peer, Sector	General LGBTQIA+ people	Federal, State, P/C
Logan Loud and Proud	Logan City	Logan City	Major City	Peer	General LGBTQIA+ people	State, P/C
Open Doors Youth Services	Logan City	Springwood	Major City	Peer, Navigation, Housing/safety/crisis	Young People	State
Queerswich	Ipswich City	Ipswich	Major City	Peer	General LGBTQIA+ people	Unfunded
Rainbow Families Queensland Play Group	Ipswich City	Ipswich	Major City	Peer	Rainbow Families	Partnership
Brisbane Bi+ Network	Brisbane City	Brisbane	Major City	Peer	Bisexual and Multigender Attracted people	Unfunded
Brisbane Pride	Brisbane City	Fortitude Valley	Major City	Peer	General LGBTQIA+ people	State
Diverse Voices	Brisbane City	Woolloongabba	Major City	Peer, Sector	General LGBTQIA+ people	Federal, State, P/C
Gar'ban'djee'lum Network	Brisbane City	Brisbane	Major City	Peer	Aboriginal, Torres Strait Islander and Australian South Sea Islander People	Unfunded
Indigilez	Brisbane City	Fortitude Valley	Major City	Peer	Aboriginal, Torres Strait Islander and Australian South Sea Islander People	Unfunded
InterAction for Health and Human Rights	Brisbane City	Eagle Farm	Major City	Peer & Sector	People with Innate Variations of Sex Characteristics	Federal, State
LGBTI Legal Services	Brisbane City	Westend	Major City	Legal service/advocacy	General LGBTQIA+ people	State
Many Genders One Voice	Brisbane City	Fortitude Valley	Major City	Peer	Trans, Gender Diverse and Non-binary people	Unfunded, Partnership
Open Doors Youth Service	Brisbane City	Fortitude Valley	Major City	Peer, Navigation, Housing/safety/crisis	Young People	State
PFlag Brisbane	Brisbane City	Brisbane	Major City	Parents/ carers/guardians	Parents, Care Givers or Guardians	Unfunded



Queer and Trans Workers Against Violence	Brisbane City	Fortitude Valley	Major City	DFV & Sector	Trans, Gender Diverse and Non-binary people	State, Partnership
Queensland Council for LGBTI Health Clinic	Brisbane City	Fortitude Valley	Major City	Healthcare	General LGBTIQIA+ people	Federal, State
Queensland Council for LGBTI Health	Brisbane City	Fortitude Valley	Major City	Peer, Sector, Navigation	General LGBTIQIA+ people	Federal, State
Qtrans	Brisbane City	Woolloongabba	Major City	Peer, Navigation, Sector	Trans, Gender Diverse and Non-binary people	Unfunded
Rainbow Families Queensland	Brisbane City	Brisbane	Major City	Peer, Sector	Rainbow Families	State
2Spirits	Brisbane City	Fortitude Valley	Major City	Peer, Sector, Cultural	Aboriginal, Torres Strait Islander and Australian South Sea Islander People	Federal, State, Partnership
LGBTI Community Ageing Network	Sunshine Coast Regional	Sunshine Coast	Inner Regional	Peer, Sector, Navigation	Older people	Unfunded, Partnership
Queensland Council for LGBTI Health	Sunshine Coast Regional	Nambour	Inner Regional	Peer, Sector, Navigation	General LGBTIQIA+ people	Federal, State
Rainbow Families Queensland Playgroup	Sunshine Coast Regional	Sunshine Coast	Inner Regional	Peer	Rainbow Families	Partnership
Sunshine Coast Pride Network	Sunshine Coast Regional	Sunshine Coast	Inner Regional	Peer	General LGBTIQIA+ people	State, Partnership
2Spirits	Sunshine Coast Regional	Nambour	Inner Regional	Peer, Sector, Cultural	Aboriginal, Torres Strait Islander and Australian South Sea Islander People	Federal, State, Partnership

## Darling Downs

Organisation/Group	Local Government Area	Location	Remoteness Area	Service/s	Target Demographic	Funding Status
Mosaic Pride	Toowoomba Regional	Toowoomba	Inner Regional	Peer	Young People	Unfunded
PFlag	Toowoomba Regional	Toowoomba	Inner Regional	Peer	Parents, Care Givers or Guardians	Unfunded
Queensland Council for LGBTI Health	Toowoomba Regional	Toowoomba	Inner Regional	Peer, Sector, Navigation	General LGBTIQIA+ people	Federal, State
Rainbow Families Queensland Play Group	Toowoomba Regional	Toowoomba	Inner Regional	Peer	Rainbow Families	Partnership
2Spirits	Toowoomba Regional	Toowoomba	Inner Regional	Peer, Sector, Cultural	Aboriginal, Torres Strait Islander and Australian South Sea Islander People	Federal, State, Partnership



## Wide Bay Burnett

Organisation/Group	Local Government Area	Location	Remoteness Area	Service/s	Target Demographic	Funding Status
PFlag	Fraser Coast Regional	Fraser Coast	Inner Regional	Peer	Parents, Care Givers or Guardians	Unfunded
Rainbow Fraser Coast (Fraser Gays)	Fraser Coast Regional	Fraser Coast	Inner Regional	Peer	General LGBTQIA+ people	Unfunded

## Central Queensland

Organisation/Group	Local Government Area	Location	Remoteness Area	Service/s	Target Demographic	Funding Status
Bilo Rainbow	Banana Shire	Biloela	Outer Regional	Peer	General LGBTQIA+ people	Unfunded
LGBTI Legal Service	Rockhampton Regional	Rockhampton	Inner Regional	Legal, Sector	General LGBTQIA+ people	State
Rainbow on the Reef	Gladstone Regional	Gladstone	Inner Regional	Peer	General LGBTQIA+ people	State, Unfunded

## Mackay, Isaac and Whitsundays

Organisation/Group	Local Government Area	Location	Remoteness Area	Service/s	Target Demographic	Funding Status
Mackay Rainbow Pride	Mackay Regional	Mackay	Outer Regional	Peer	General LGBTQIA+ people	Unfunded
Rainbow Families Queensland Playgroup	Mackay Regional	Mackay	Outer Regional	Peer	Rainbow Families	Partnership
Moranbah Rainbow Collective	Isaac Regional	Moranbah	Outer Regional	Peer	General LGBTQIA+ people	Unfunded

## North Queensland

Organisation/Group	Local Government Area	Location	Remoteness Area	Service/s	Target Demographic	Funding Status
Queerly Beloved	Townsville City	Townsville	Outer Regional	Peer	General LGBTQIA+ people	Unfunded
Queensland Council for LGBTI Health	Townsville City	Townsville	Outer Regional	Peer, Sector, Navigation	General LGBTQIA+ people	Federal, State
Rainbow Families Playgroup	Townsville City	Townsville	Outer Regional	Peer	Rainbow Families	Partnership



Gurambilbarra Townsville Pride Collective	Townsville City	Townsville	Outer Regional	Peer	General LGBTQIA+ people	State, Partnership
2Spirits	Townsville City	Townsville	Outer Regional	Peer, Sector, Cultural	Aboriginal, Torres Strait Islander and Australian South Sea Islander People	Federal, State, Partnership

## Far North Queensland

Organisation/Group	Local Government Area	Location	Remoteness Area	Service/s	Target Demographic	Funding Status
Cairns Pride Festival	Cairns Regional	Cairns	Outer Regional	Peer	General LGBTQIA+ people	State, Partnership
Gimuy Queer Collective	Cairns Regional	Cairns	Outer Regional	Peer	General LGBTQIA+ people	Unfunded
PFlag Cairns	Cairns Regional	Cairns	Outer Regional	Peer	Parents, Care Givers or Guardians	Unfunded
Queensland Council for LGBTI Health	Cairns Regional	Cairns	Outer Regional	Peer, Sector, Navigation	General LGBTQIA+ people	Federal, State
Rainbow Families Playgroup	Cairns Regional	Cairns	Outer Regional	Peer	Rainbow Families	Partnership
2Spirits	Cairns Regional	Cairns	Outer Regional	Peer, Sector, Cultural	Aboriginal, Torres Strait Islander and Australian South Sea Islander People	Federal, State, Partnership



Appendix B. Queensland Government Regional Breakdown Map

**Regional Breakdown: Queensland**



DPC9861 - JUNE 2025

Source: Queensland Government, Delivering Queensland

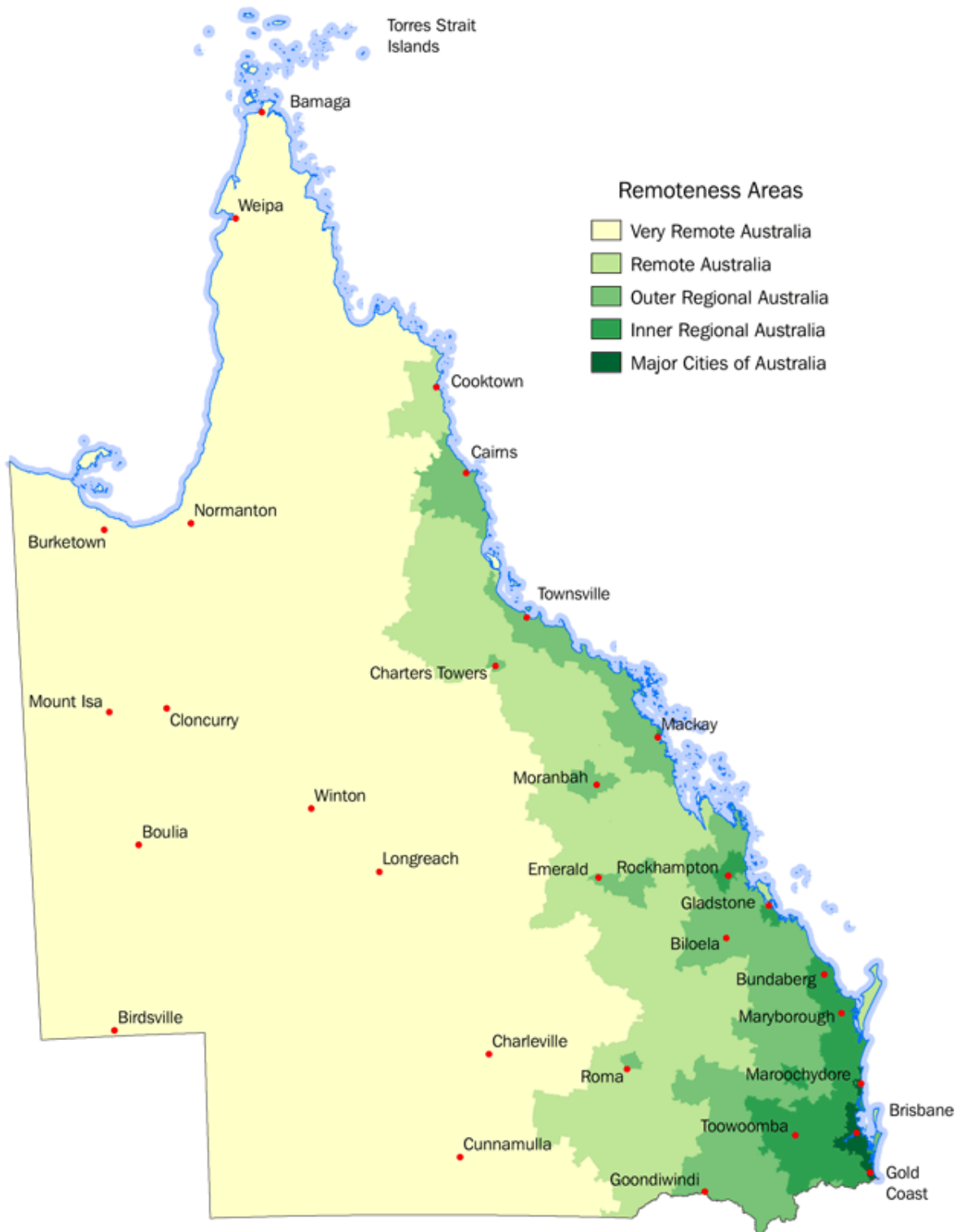


## Appendix C. Local Government Areas Boundaries



Source: Queensland Government, State Development, Infrastructure and Planning

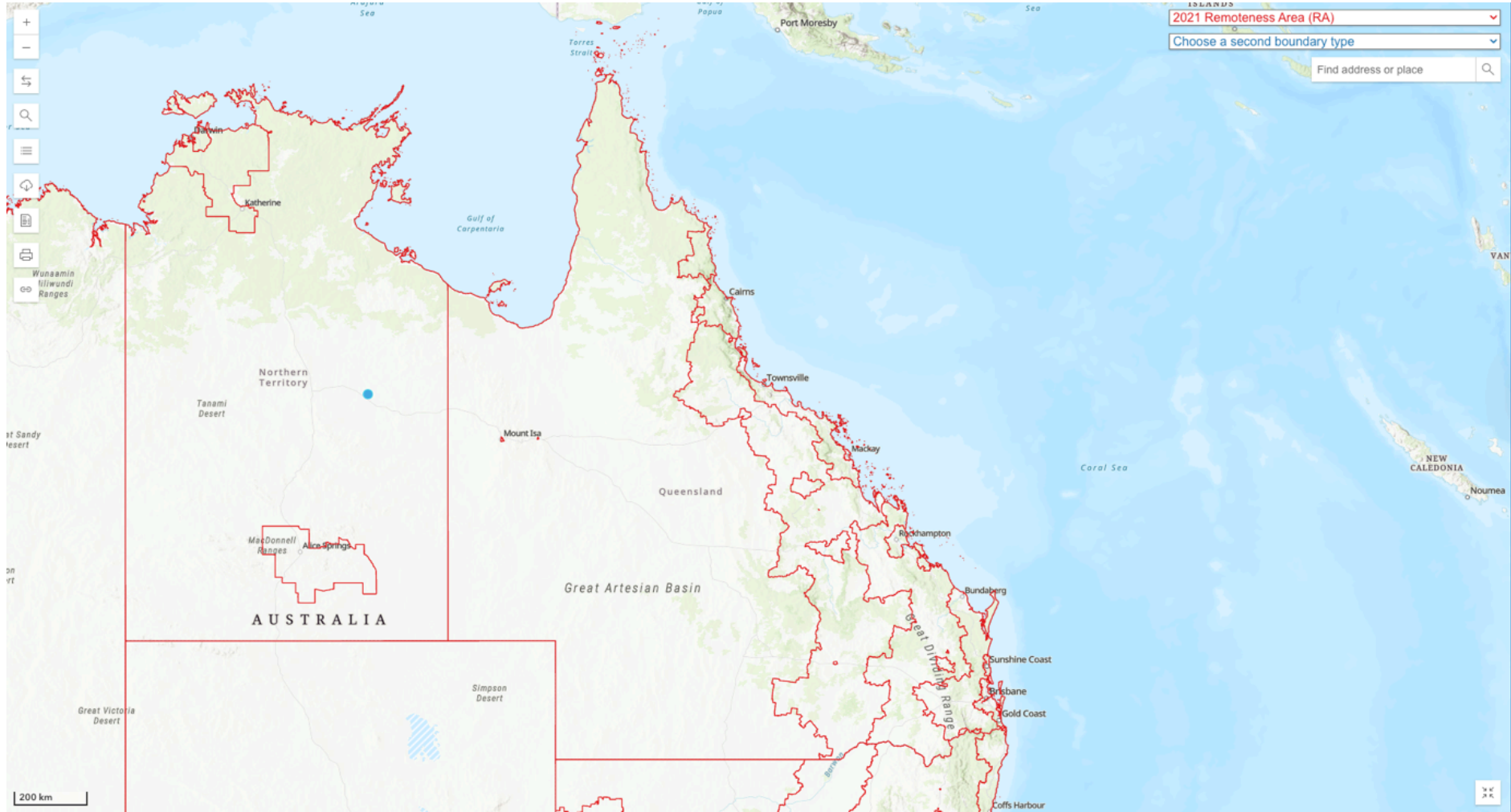
Appendix D. Queensland Government Rural and Remote Areas Map



Source: Queensland Government, Queensland Health



Appendix E. Australian Bureau of Statistics Queensland Remoteness Map



Source: Australian Bureau of Statistics



## Mapping Visibly Queensland



### Cairns - Gimuy

Gimuy Walubarra Yidinji and Yirrganydji Country

**QUEENSLAND COUNCIL FOR LGBTI HEALTH**

A home for Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, Sistergirl and Brotherboy people and communities in Queensland.

**Available Services**

290 Draper St, Parramatta Park QLD 4870

(07) 4041 5451

gimuy@qc.org.au

Open Hours: Monday to Friday 9 am to 5 pm

**2SPIRITS**

PROMOTING HEALTHY ABORIGINAL & TORRES STRAIT ISLANDER COMMUNITIES

2Spirits aims to improve the health and wellbeing of Aboriginal and Torres Strait Islander lesbian, gay, bisexual, trans, intersex, queer, sistergirl and brotherboy folks across Queensland.

**Available Services**

290 Draper St, Parramatta Park, QLD 4870

2spirits@qc.org.au

**rainbow families Queensland**

connecting • supporting • empowering

A group for LGBTQIAP families and prospective families in Townsville and surrounds to connect, organise monthly meet-ups (and possibly also a weekly playgroup), and make new friends.

**Cairns Playgroup**

Gimuy Cairns, QLD, Australia






rainbow.families.qld@outlook.com

Powered by genially



The Queensland Council for LGBTI Health (QC) is a community-led health and wellbeing service for LGBTIQ+ Sistergirl and Brotherboy people in Queensland.

### Health and Wellbeing Services and Programs

 <p><b>GAYAWUR RAINBOW</b></p> <p>Creating spaces where our LGBTIQ+ Sistergirl and Brotherboy communities can belong and can be supported to live as health and well beings in Queensland. Gayawur Rainbow stands as a model for affirming, holistic, and culturally grounded support. Gayawur Rainbow Model: Affirming Care for LGBTI Well-Beings</p> <p><a href="#">+ Info</a></p>	 <p><b>Aged Care Navigation</b></p> <p>A free and confidential service for our Elders and Senior Lesbian, Gay, Bisexual, Transgender, Intersex, Sistergirl and Brotherboy (LGBTI+SB) people in Mearjin Brisbane North, Gimuy Cairns or Yarrabah.</p> <p><a href="#">+ Info</a></p>	 <p><b>LGBTI Seniors Visiting Service</b></p> <p>Matches trained volunteer visitors with LGBTIQ+ Sistergirl and Brotherboy, senior and elder clients who feel alone or isolated due to health, mobility or other issues. The service supports clients to stay connected with others through regular contact with their visitors.</p> <p><a href="#">+ Info</a></p>	 <p><b>Our health MATTERS</b></p> <p>Launched in 2023, is created by and owned by our Trans, Gender Diverse, Non-Binary, Sistergirl and Brotherboy communities and people in Queensland to champion health priorities and support, inform, and advocate for TGDNBSB folks right across Queensland.</p> <p><a href="#">+ Info</a></p>	 <p><b>comePrepd .info</b></p> <p>PrEP is a prevention strategy where HIV negative people take medication to prevent HIV infection. Taking PrEP is as simple as taking one oral pill a day. ComePrepd is a community-driven HIV prevention campaign by QC to increase awareness of PrEP</p> <p><a href="#">+ Info</a></p>
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