



Submission cover sheet

Inquiry into men's suicide rates

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Submission to the ACT Legislative Assembly's Inquiry into Men's Suicide Rates

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ABOUT MERIDIAN

Meridian is the ACT's leading peer-led, community-controlled organisation supporting the health and wellbeing of people living with and impacted with HIV, people of diverse sexualities and sexual identities, people of diverse gender identities (including people who are trans, gender diverse and non-binary), sex workers and people and communities disproportionately affected by blood borne viruses and sexually transmitted infections.

Our work is grounded in human rights, social justice, and health equity. We celebrate the rich diversity within our communities which helps us strengthen our collective resilience against the adverse effects of stigma, discrimination, and marginalisation.

We deliver a range of services including mental health and psychosocial support, service navigation, health promotion, community development initiatives and training.

Meridian makes this submission to highlight the experiences of the communities it serves and represents that are applicable to this enquiry. These communities include:

- men living with HIV (cisgender and transgender)
- gay, bisexual and queer men (cisgender and transgender) and other men who have sex with men
- people of diverse sexualities and genders who were assigned male at birth

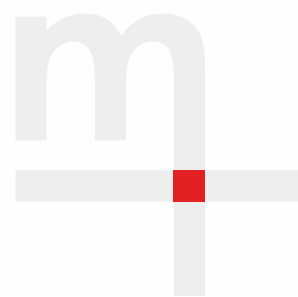
The following acronyms are used in this submission:

PLHIV: People living with Human Immunodeficiency Virus (HIV)

GBTQ+: gay, bisexual and queer men (cisgender and transgender) and people of diverse sexualities and genders who were assigned male at birth.

LGBTIQA+: lesbian, gay, bisexual, trans, intersex, queer, asexual, aromantic and agender people. This includes people who are pansexual, non-binary and gender diverse.

Meridian notes the submission made by A Gender Agenda and acknowledges A Gender Agenda's expertise and experience in supporting the goals and needs of intersex, transgender and gender diverse communities of the ACT and region. As a peer-led organisation, A Gender Agenda plays a vital and unique role in suicide prevention for the communities it serves and represents.



AVAILABLE DATA ON SUICIDALITY FOR PLHIV AND GBTQ+ INDIVIDUALS

The lack of nationally consistent or reliable data on suicide or self-harm for LGBTIQ+ people in Australia means the experiences of PLHIV and GBTQ+ individuals are invisible in men's suicide rates. This is despite these communities being disproportionately affected by poor mental health outcomes and facing unique drivers of suicidality.

Men Living with HIV

Running since 1997, [HIV Futures](#) is a study of the quality of life among PLHIV in Australia. Data listed below was collected for HIV Futures 10¹ from May 2021 until July 2022.

- 88.7% of participants identified as men/male with 86.5% identified as cisgender gay men and 1.4% identified as non-binary or gender fluid
- Over a third of respondents (35.9%) reported having ever experienced thoughts about suicide, wanting to die or end their life.
- 23.3% of participants reported having ever attempted suicide, with 3.8% having attempted within the last 12 months

GBTQ+ Men and Individuals

[Private Lives](#) and [Writing Themselves In](#) are Australia's two largest surveys on the experiences of lesbian, gay, bisexual, transgender, intersex and queer communities. The Australian Research Centre in Sex, Health and Society (ARCSHS) at La Trobe University conducts both studies. The most recent iterations of the surveys, Private Lives 3 (PL3) and Writing Themselves In 4 (WTI4) were conducted in 2019.

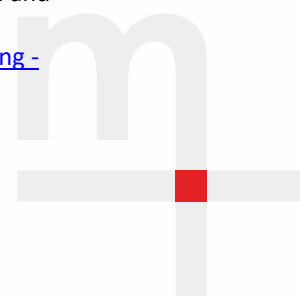
Analysis of survey data from PL3 and WTI4 has been conducted by ARCSHS and the Australian Institute of Health and Welfare (AIHW)².

WTI4, focused on young people aged 14-21 years, surveyed participant experiences of suicidal thoughts, suicide plan, suicide attempt, or engaged in self-harm, during their lifetime and over the last 12 months.

Points of note from the PL3:

¹ Norman, T., Power, J., Rule, J., Chen, J., & Bourne., A. (2022). HIV Futures 10: Quality of life among people living with HIV in Australia (monograph series number 134). Australian Research Centre in Sex, Health and Society, La Trobe University. doi: 10.26181/21397641

² [LGBTIQ+ Australians: Suicidal thoughts and behaviours and self-harm - Suicide & self-harm monitoring - AIHW](#)



- Among participants, prevalence of lifetime suicidal thoughts for cisgender men was 64% and transmen 91%
- 53% of transmen reported lifetime suicide attempts
- 22% of cisgender men reported lifetime suicide attempts
- Among all survey participants, ACT had the highest percentage nationally of lifetime suicidal thoughts at 80.6%, with 30.7% having reported a lifetime suicide attempt.

FACTORS CONTRIBUTING TO SUICIDE RATES

Engagement with medical and health services

PLHIV and LGBTQ+ individuals often encounter stigma, discrimination, or a lack of understanding from health professionals, including in mental health settings. This creates barriers to early intervention and ongoing care. Trans men may also face structural barriers, including gatekeeping practices and misgendering, when accessing gender-affirming care, which is strongly associated with mental health outcomes.

PLHIV and LGBTQ+ individuals who do not disclose their HIV status or sexuality will often either delay access to medical or health services or not access services at all due to fear or experiences of stigma and discrimination related to their identity.

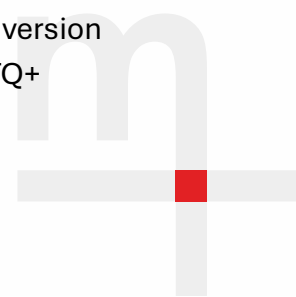
Risk-taking behaviours, including alcohol and substance use

PLHIV and LGBTQ+ individuals have higher rates of alcohol and other drug use including polydrug use, often as a coping mechanism in response to minority stress, exclusion, or trauma. Syndemic factors, such as co-occurring substance use, mental ill-health, social marginalisation and experiences of violence amplify suicide risk.

Social and emotional development

PLHIV and LGBTQ+ individuals often experience social isolation, family rejection, or lack of safe environments which can result in trauma and its resulting impact during critical developmental stages. These experiences can result from intentional actions against individuals as well as socially reinforced concepts of heteronormativity and unhealthy masculinities. These experiences can impair emotional regulation, contribute to shame or self-stigma, and limit help-seeking behaviours later in life. It is well understood trauma impacts both the body and the mind.

In 2020, the ACT's nation-leading prohibition of sexuality and gender identity conversion practices 2020 recognised the harmful impacts of such practices. However, LGBTQ+



individuals still experience harm due to cultural and social beliefs that stigmatise, marginalise and exclude people based on their sexual and gender diversity. These experiences which often occur in the family home at a young age increase suicide risk.

Education outcomes and participation rates

Bullying and harassment in education settings negatively impact the educational participation and attainment of many LGBTQ+ students, particularly those who are perceived to be gender or sexuality diverse. These experiences can contribute to long-term disengagement from institutions, including education, health and employment systems. This bullying and harassment can extend beyond educational settings to online spaces.

Other factors

Loneliness and social isolation are pivotal determinants of mental and physical health, profoundly impacting the holistic wellbeing of individuals. In both Australia and the ACT, these issues command immediate attention, reflecting a critical juncture where the nexus between loneliness and rising suicide rates necessitates concerted and nuanced strategies.

PLHIV and LGBTQ+ individuals experience intersecting forms of discrimination such as racism, ableism, and class-based stigma. This compounds suicide risk for LGBTQ+ individuals from marginalised backgrounds. Additionally, limited access to safe housing, income support, and employment can exacerbate stress and undermine protective factors.

As recently as this year, PLHIV and LGBTQ+ individuals in the ACT have been targeted through online apps and subject to multiple, horrific incidents of homophobic and transphobic violence. International research suggests that enactment of specific hate crime laws can lead to reductions in suicide among populations protected by such laws.

PROMOTION OF POSITIVE HEALTH BEHAVIOURS

Meridian supports the promotion of mental wellbeing through strengths-based, peer-led initiatives that centre community connection, self-determination, and identity affirmation. Specific strategies to promote positive health behaviours among LGBTQ+ individuals should include:



- **Increased access to culturally safe, affirming mental health services** that are informed by the lived experience of PLHIV and LGBTQ+ individuals.
- **Investment in suicide aftercare services** that respond to the needs and experiences of all LGBTQIA+ people.
- **Investment in LGBTQIA+ community-controlled organisations**, which have demonstrated expertise in engaging with people who may not access mainstream services.
- **Programs that promote connection, belonging and reduce social isolation and loneliness** including peer support, community events, and targeted social initiatives.
- **Training and capacity building for healthcare professionals** to ensure inclusive practice and reduce structural stigma in service delivery.
- **Strengthening the ACT Safe and Inclusive Schools Initiative** to support schools to establish and maintain safe, inclusive and affirming environments for all students regardless of LGBTQIA+ identity.

OTHER RELATED ISSUES

Meridian encourages the Inquiry to consider how the **Human Rights Act 2004** can guide reform to ensure the dignity, autonomy, and participation of PLHIV and LGBTQ+ individuals are upheld in all suicide prevention efforts.

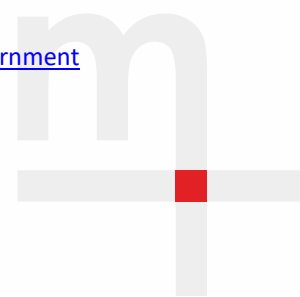
It is also essential to **improve data collection** using the Australian Bureau of Statistics' *2020 Standard for Sex, Gender, Variations of Sex Characteristics and Sexual Orientation Variables*³ and the ACT Government *Sex, Gender, Variations of Sex Characteristics and Sexual Orientation Common Dataset*⁴ to better understand and address disparities.

CONCLUSION

The risk of suicide and self-harm remains alarmingly high, reflecting the impact of societal discrimination, stigma, and the struggle for acceptance experienced by PLHIV, LGBTQ+ individuals and across the broader LGBTQIA+ community. A community that faces a confluence of risk factors that increase their vulnerability to suicide. These factors are compounded for those whose intersectional experiences result in increased stigma, marginalisation and discrimination including Aboriginal and Torres Strait

³ [Standard for Sex, Gender, Variations of Sex Characteristics and Sexual Orientation Variables, 2020 | Australian Bureau of Statistics](#)

⁴ [Sex, Gender, Variations of Sex Characteristics and Sexual Orientation Common Dataset - Open Government Information](#)



Islander people, people with disability and/or long-term health conditions and people from multicultural communities.

Suicide is not inevitable; it is preventable. When services are safe, accessible, and informed by lived experience, PLHIV and LGBTQ+ individuals engage - and thrive. Addressing the high rates of suicide must include tailored strategies and investment in specialist programs and services that respond to the needs of PLHIV and LGBTQ+ individuals and uphold their rights.

Specialist expertise and peer community knowledge is critical to suicide prevention for LGBTIQ+ people and across the community more broadly. Meridian has demonstrated experience in identifying and responding to the health and wellbeing needs of the communities it serves, informed by the expertise of peers and lived experience. Meridian is uniquely positioned to design and deliver new initiatives that prevent suicide and address its drivers.

Meridian welcomes further engagement with the Committee and the opportunity to share case studies which demonstrate the impact of community-based, peer-led responses to suicide prevention. We are deeply committed to solutions that save lives and build a more inclusive Canberra.

