Primary Prevention of Sexual Violence in First Nations LGBTIQA+SB Communities: A Literature Review

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Context and positionality

In June 2022, the Department of Social Services (DSS), Commonwealth Government, funded a program of work focused on the prevention of sexual violence in LGBTIQA+ communities. This literature review was undertaken as part of one of three pilot projects, with this project focusing specifically on First Nations LGBTIQA+SB communities in Australia.

Melinda Hickey is a white, queer, cisgender woman and ally to First Nations LGBTIQA+SB communities. In approaching this work, she recognises the long-standing and continuing impacts of colonialism, systemic racism, and cisheteronormativity as structural conditions that impact the lives of First Nations LGBTIQA+SB people. She acknowledges the strength and knowledges of First Nations LGBTIQA+SB people, who are part of one of the longest running movements resisting colonialism. She acknowledges the limitations of her positionality and of the published literature which does not capture the full extent or diversity of the lived experiences of First Nations LGBTIQA+SB communities.

Madi Day is a trans Murri who was raised on Dharug Ngurra and who lives and works in the First Nations LGBTQIA+SB community in Sydney. First Nations LGBTIQA+SB people continue the longest running protest to colonialism and carry an unbroken legacy of resistance to attacks on Aboriginal and Torres Strait Islander people, lives and systems of governance and kinship. They acknowledge the immeasurable complexity of First Nations LGBTQIA+SB people and communities, and recognise the limitations of existing literature and particularly, available data to capture this.

Terminology

Cisgender/Cis	A term for people whose gender aligns with the sex assigned to them at birth (e.g., someone assigned female at birth who identifies as a woman). It contrasts with transgender and other gender-diverse people (ACON, 2021a; Australian Institute of Family Studies, 2022; Salter et al., 2024).
Cisnormativity	The assumption that all people are cisgender and will continue to identify with the gender they were assigned at birth. This erases and marginalises trans and gender-diverse people. (Australian Institute of Family Studies, 2022; Salter et al., 2024)
Colonialism	Colonialism refers to the ongoing systems of domination in which one group asserts control over another's land, culture, and sovereignty. Colonialism is not a historical event but a continuing structure that sustains inequality through legal, political, economic, and cultural means. Settler colonialism in Australia is an ongoing process aimed at eliminating First Nations people, not only through physical means but also through discursive and institutional erasure and selective forgetting of historic and ongoing harms against First Nations people (Blagg et al., 2020; Carlson & Frazer, 2021; Guthrie et al., 2020; Moreton-Robinson, 2015; Wolfe, 2006).
Cultural safety	An environment that is spiritually, socially, emotionally, and physically safe for First Nations people; where there is no assault, challenge, or denial of their identity, of who they are and what they need. It is determined by First Nations individuals, families, and communities, and involves ongoing critical reflection of power imbalances, institutional discrimination, and colonialism (Joint Council on Closing the Gap, 2020; Our Watch, 2018b).
Family violence	A preferred term in First Nations contexts that refers to the violence that occurs across extended kinship and community networks. In contrast to Western concepts of domestic violence, First Nations people experience family violence as resulting from various impacts of colonialism and oppression (Carlson et al., 2021; Olsen & Lovett, 2016; Our Watch, 2018b).
First Nations	Refers to Aboriginal and Torres Strait Islander peoples, the First Peoples of the Australian continent and surrounding islands. The term acknowledges the hundreds of diverse Nations with distinct cultural, linguistic and spiritual traditions in Australia, and recognises their continuing connection to land, culture, and community (Barnes et al., 2024; Campbell et al., 2020).

Gender	The socially constructed and hierarchical categories assigned to individuals based on their assigned sex at birth. It comprises the economic, social, political, and cultural attributes, expectations, and opportunities associated with being women, men, or other genders, that vary across cultures and over time. (ABS, 2020; Carman et al., 2020).
Gender diverse	An umbrella term for people whose gender and/or gender expression sits outside the binary of man or woman. This can include non-binary, transgender, genderqueer, genderfluid, agender, and culturally specific identities (ACON, 2021; Salter et al., 2024).
Intersectionality	A framework for understanding how various forms of inequality (e.g., racism, sexism, colonialism, cisnormativity) intersect to produce compounded forms of disadvantage. It is essential in recognising how violence disproportionately impacts marginalised people, not because of their identities but because of the cumulative oppressions they face (Our Watch, 2018b).
Heteronormativity	The assumption that heterosexuality is the default, natural, or preferred sexual orientation. This also necessitates the belief that all people are cisgender. Heteronormativity reinforces systemic privilege for heterosexual people and contributes to the marginalisation of LGBTIQA+ individuals by rendering their identities and relationships as less legitimate or acceptable (ACON, 2025; Australian Institute of Family Studies, 2022).
Homophobia	Refers to fear, hatred, prejudice or negative beliefs toward same gender attracted people. It can include offensive language, bullying, abuse, and physical violence, as well as systemic discrimination, e.g., exclusion from services or opportunities (ACON, 2025; Australian Institute of Family Studies, 2022).
Intersex	An umbrella term for people who have sex characteristics (chromosomal, hormonal, or anatomical) that do not conform to medically assigned definitions of male or female bodies. Intersex people are diverse and may identify with various terms including having an intersex condition or naming specific traits (Carpenter, 2024).
Intimate partner violence (IPV)	Violent, abusive, or intimidating behaviours committed by a current or former intimate partner, including dating relationships. It includes physical, emotional, psychological, sexual, spiritual, and technology-facilitated abuse, and is often characterised by coercive control (Australian Institute of Health and Welfare, 2024; Salter et al., 2024).

LGBTIQA+	An inclusive acronym representing Lesbian, Gay, Bisexual, Transgender, Intersex, Queer, and Asexual people. The '+' represents other minority sexualities and genders not explicitly named (ACON, 2021a).
LGBTIQA+SB	A term used to centre the unique and intersecting identities of First Nations people who are lesbian, gay, bisexual, transgender or gender-diverse, queer, intersex, asexual, and Sistergirl or Brotherboy (Barnes et al., 2024; Carlson et al., 2024; KPMG & Black Rainbow, 2022). Sistergirl is an Aboriginal English term for an Aboriginal and/or Torres Strait Islander transgender woman or transfeminine person while Brotherboy is typically used for an Aboriginal and/or Torres Strait Islander transgender man or transmasculine person (Barnes et al. 2024; KPMG & Black Rainbow, 2022; Sullivan & Day, 2019). The 'SB' inclusion recognises culturally specific terms, the '+' symbol signals respect for the diversity beyond listed identities.
Perpetrator of sexual violence	An individual who uses force, coercion, power inequalities or other forms of abuse to engage another person in sexual activity without their consent. This term is used regardless of whether the person has been charged with a crime (Our Watch, 2021). It must be noted that many perpetrators are victim-survivors of violence themselves and this must be considered in context of the violent misuse and over-criminalisation of First Nations peoples (Carlson et al., 2024).
Non-binary	An umbrella term describing genders or gender expressions that are not exclusively man or woman. Non-binary people may identify as genderfluid, agender, bigender, or another term outside the male/female binary. Some non-binary people identify as trans, others do not (ACON, 2021a, 2025).
Queer	A reclaimed term used by some people with marginalised genders and sexualities. It is intentionally fluid and typically rejects cisheteronormativity. Queer is also used by many First Nations people in a decolonising context to describe their experience of gender and sexuality outside colonial norms (ACON, 2025; Australian Institute of Family Studies, 2022; Barnes et al., 2024).
Queerphobia	An umbrella term encompassing a range of negative attitudes and feelings toward individuals who are queer. This includes homophobia, biphobia, transphobia, and other forms of discrimination against those who do not conform to heterosexual and cisgender norms (ACON, 2024; Salter et al., 2024).

Racism	A system of advantage and oppression based on race. In Australia, it manifests as structural, institutional, and interpersonal discrimination against First Nations Peoples and other racialised groups (Campbell et al., 2020; Our Watch, 2018b).
Sexual violence	A broad term encompassing sexual assault, coercion, harassment, image-based abuse, and other non-consensual sexual acts. It includes any sexual act committed without freely given consent that makes the victim feel uncomfortable, frightened, or threatened. It is recognised as a violation of human rights (Australian Institute of Health and Welfare, 2024; Our Watch, 2018b, 2021; Queensland Centre for Domestic and Family Violence Research, 2019).
Sexual assault	A specific form of sexual violence involving physical acts carried out against a person's will through force, coercion, or threat, including unwanted touching, penetration, and attempts thereof (ABS, 2022; Queensland Centre for Domestic and Family Violence Research, 2019).
Self-determination	Self-determination is the fundamental right of people to shape their own lives. For First Nations peoples this means having choice and control in governance, cultural expression, and the economic, social, and cultural systems that affect them. (Australian Human Rights Commission, n.d.).
Structural violence	A form of violence wherein social structures or institutions harm people by preventing them from meeting their basic needs or achieving equitable outcomes. It is often invisible and embedded in longstanding social, economic, and political systems, leading to disparities in health, education, and justice (Campbell et al., 2020; Commonwealth of Australia, 2023; Our Watch, 2018b).
Technology-facilitated abuse (TFA)	A broad category of abuse occurring through internet enabled devices and platforms. It includes online harassment, monitoring, stalking, impersonation, threats, punishment, and image-based abuse (eSafety Commissioner, 2023).
Transgender/Trans	An umbrella term for people whose gender does not align with the sex assigned to them at birth. This can include trans men, trans women, and non-binary people. Some trans people may pursue legal, social, or medical transition. (ACON, 2021a).
Transphobia	Negative beliefs, stereotypes, fear or hatred toward transgender people. It includes individual acts of discrimination or violence, as well as systemic

	barriers and exclusion from services, rights, or recognition (Australian Institute of Family Studies, 2022).
Trauma-informed	A practice approach that recognises the widespread impact of trauma and seeks to avoid re-traumatisation. Trauma-informed care centres safety, trust, collaboration, autonomy, and empowerment. It is critical for engaging First Nations LGBTIQA+SB people who have experienced cumulative and intergenerational trauma (Day et al., 2022; Our Watch, 2018a).
Victim/Survivor of sexual violence	A person who has experienced any form of sexual violence. The dual term is used to respect the different ways people may describe or relate to their experience. Victim may emphasise the harm, injustice, or need for legal recognition and support. Survivor may reflect resilience, agency, and a journey of recovery. Some individuals relate to both terms; others prefer one, or neither. This term is not an identity label and does not define an individual but rather reflects a lived experience (Carlson et al., 2024; Our Watch, 2021).

1. Introduction

Existing sexual violence prevention frameworks and policies do not adequately address the experiences and needs of First Nations LGBTQIA+SB people in Australia. This literature review aims to report on the drivers and dynamics of sexual violence for this community, drawing on emerging academic and community-led research, to inform primary prevention approaches. It responds to a critical gap in both academic and policy discourse, where the unique experiences of queer and gender diverse First Nations peoples, and Brotherboys and Sistergirls, remain largely underacknowledged or overlooked.

The review is guided by three main questions: 1) what is known about the prevalence and nature of sexual violence; 2) what is known about the unique and intersecting drivers of sexual violence; and 3) what works for the prevention of sexual violence, in First Nations LGBTIQA+SB communities? This review highlights the compounding impacts of colonialism, systemic racism, cisheteronormativity, and intergenerational trauma as structural enablers of gendered violence, and centres the lived expertise, strengths, and cultural resilience of

First Nations LGBTIQA+SB communities. It aims to inform primary prevention strategies that are culturally safe, trauma-informed, and community-led, building upon the existing works of First Nations experts, researchers, survivors, and grassroots collectives. This work aligns with national commitments to end gender-based violence and upholds the principle that no prevention strategy is effective unless it is inclusive of the most marginalised.

Sexual violence is defined here as any sexual act committed without freely given consent, including sexual assault, coercion, harassment, image-based abuse, and other non-consensual sexual acts. The significant crossover between sexual violence and other forms of violence such as domestic and/or family violence must also be acknowledged – particularly for First Nations LGBTIQA+SB people whose experiences of violence occur within and outside intimate and family relationships, across various communities, and within all social, economic, and political systems in Australia.

While the acronym LGBTIQA+SB is commonly used in research, it encompasses a broad range of identities, bodies, and lived experiences that are often conflated into a single category. The significant diversity within these communities must be acknowledged, including but not limited to Sistergirls, Brotherboys, Two Spirit, non-binary, and intersex people, and prevention strategies must be responsive to these differences. The + in LGBTIQA+SB acknowledges that the community is larger than and not limited to those included in this acronym.

Structure of this report

Section one outlines the methodology of the literature review.

Section two reports on the documented prevalence and impacts of sexual violence in First Nations, LGBTIQA+, and then First Nations LGBTIQA+SB populations in Australia.

Section three describes the key drivers of sexual violence, exploring the historical, social, and structural factors that uniquely shape risk in First Nations and LGBTIQA+ populations, and then discusses the compounded impacts of these factors on First Nations LGBTIQA+SB people.

Section four reviews the evidence for effective primary prevention strategies, drawing from existing literature and promising practices in First Nations and LGBTIQA+ communities.

Section five integrates this with insights from First Nations LGBTIQA+SB-led research and actions in the broader suicide prevention, well-being, and human rights fields to recommend tailored, community-led approaches to the prevention of sexual violence in First Nations LGBTIQA+SB communities.

1.1. Methodology

This report is based on a narrative literature review of both academic and grey literature. The review aimed to synthesise existing knowledge on the prevalence and drivers of sexual violence and primary prevention strategies relevant to First Nations LGBTIQA+SB communities in Australia. Sources included peer-reviewed journal articles, government reports, community-led research reports, policy documents, and submissions to national inquiries.

The first step was a systematic search of the academic literature via the following databases: Informit, PsycINFO, PubMed, ProQuest, Web of Science, and Scopus. This allowed for broad coverage across disciplines such as public health, social sciences, public policy, gender studies, criminology, and Indigenous research.

Search terms included combinations of:

1. 'First Nations' OR 'Aboriginal' OR 'Torres Strait Islander' OR 'Indigenous'
2. 'LGBT*' OR 'queer' OR 'trans*' OR 'Brotherboy' OR 'Sistergirl'
3. 'Sexual violence' OR 'sexual assault' OR 'family violence' OR 'domestic violence' OR 'gendered violence'
4. 'Primary prevention' OR 'violence prevention'
5. Australia

Boolean operators (e.g. AND, OR) and truncations (*) were used where possible to capture the diversity of terminology used across sources. The initial search focused on literature published between 2013 and 2024. This revealed very limited literature of the topic of sexual violence in First Nations LGBTIQA+SB in Australia. A broader search strategy was then employed using the same key terms to identify grey literature through Google searches and targeted searches of national research bodies (ANROWS, Our Watch, AIHW, AIATSIS, Lowitja Institute, Australian Indigenous HealthInfoNet), as well as citation tracking from relevant reports and publications. Grey literature was drawn from government reports, policy documents, advocacy publications, community-led research, and submissions to national inquiries.

Initial screening was based on titles and abstracts. Full texts were then reviewed to assess relevance and alignment with the focus of the review. Thematic synthesis was used to organise findings across key domains including prevalence, drivers, and responses to sexual violence, as well as prevention and healing strategies. The review was structured thematically to reflect both established evidence and emerging insights, with an emphasis on identifying culturally safe, community-led, and structurally responsive approaches to sexual violence prevention for First Nations LGBTIQA+SB communities.

Grey literature was particularly important in ensuring the inclusion of community knowledge and lived experience, given the limited academic peer-reviewed research specific to First Nations LGBTIQA+SB people. Over the timeline of this project (between initial literature search in June 2024 to completion in May 2025) some new, relevant research was published and this was subsequently included in the review. This review was guided by a commitment to privileging the leadership of First Nations LGBTIQA+SB people by emphasising research that has been conducted by the community and/or elevated their voices.

2. Why is it important?

2.1. Prevalence of sexual violence

2.1.1. First Nations communities

The prevalence of sexual violence for First Nations peoples is difficult to estimate due to non-disclosure of many victim-survivors (Commonwealth of Australia, 2023; Queensland Centre for Domestic and Family Violence Research, 2019) and sexual violence rates are typically combined with family and domestic violence rates in datasets (Salter et al., 2024b). From the available data, rates of sexual assault are about 3.5 times higher for First Nations people than non-Indigenous people in Australia (Australian Institute of Health and Welfare, 2024a). Consistent with the gendered nature of sexual violence, First Nations women are between 4 and 8.5 times more likely to experience sexual assault than First Nations men, and perpetrators are more likely to be male (Australian Bureau of Statistics, 2017; Australian Institute of Health and Welfare, 2024a).

Sexual violence commonly takes place in the woman's home and the majority (between 66-87%) of First Nations victim-survivors (between 66-87%) know and/or have a relationship with the offender (Australian Institute of Health and Welfare, 2024a). There is no data available on the cultural backgrounds of men who perpetrate sexual violence against First Nations women, however anecdotal published evidence suggests that non-Indigenous men (both within and outside the family) make up a significant proportion of perpetrators (Aboriginal Family Violence Prevention and Legal Service Victoria, 2015; Filev et al., 2022; Our Watch, 2018b). Relevant to family violence, the majority of First Nations women living in capital cities are partnered with non-Indigenous men (Our Watch, 2018).

Technology-facilitated abuse

First Nations women are among the groups most at risk of technology-facilitated abuse (TFA) in Australia (eSafety Commissioner, 2020, 2023; Powell et al., 2022). Seventy percent of First Nations respondents to a national TFA survey reported at least one lifetime TFA victimisation experience, compared to 50% of non-First Nations respondents (Powell et al., 2022). They report image-based abuse (e.g. sharing a nude or sexual image of them without consent) at rates twice as high as the non-First Nations community (eSafety Commissioner, 2017; Henry et al., 2017). First Nations women who use dating apps have reported experiencing 'sexual racism' - sexism and misogyny accompanied by racism and threats of

violence (Carlson, 2020). First Nations women in regional and remote areas face heightened risks of TFA due to close-knit social networks that make it easier to target them, the importance of online community connection due to geographical isolation, and low access to digital and TFA education (Brown et al., 2021; Woodlock et al., 2020).

Disclosure

It is estimated that around 90% of violence (including sexual violence) against First Nations women goes undisclosed (Taylor & Putt, 2007; Willis, 2011). Reasons for non-disclosure by First Nations people are complex and include a lack of culturally safe services, distrust and fear of racist and punitive responses from police and mainstream authorities (including over-incarceration or child removal), shame, fear of ostracism or retribution or backlash from perpetrators or other people in their networks (Fiolet et al., 2021; Langton et al., 2020; Prentice et al., 2017; Willis, 2011).

2.1.2. LGBTIQA+ communities

Until recently, population-based data on sexual violence within LGBTIQA+ communities in Australia was limited. Data collection has been limited by under-reporting, and by the focus on cisgender, heterosexual populations within binary gender frameworks (Lusby et al., 2022). Distrust of police and other hesitations around reporting to social and medical services impact recorded rates (Salter et al., 2024a). Transgender women, particularly transgender women of colour, are highly criminalised, incarcerated and targeted by police violence which is also likely to impact rates of disclosure (Stanley & Smith, 2015).

The first large-scale national survey specifically addressing the experiences of sexual violence among LGBTIQA+ Australians was conducted in 2023-24 by the Gendered Violence Research Network (GVRN) (Salter et al., 2024a, 2024b), contributing significantly to a smaller evidence base established by earlier studies on LGBTIQA+ health and wellbeing (Amos et al., 2023; A. O. Hill et al., 2020; Layard et al., 2022; Strauss et al., 2020).

Findings indicate that LGBTIQA+ people experience sexual violence at higher rates than the general population. Approximately 50% of LGBTIQA+ survey participants report lifetime experiences of sexual violence - nearly four times higher than the rate for the general population and twice the rate reported by women in Australia (Callander et al., 2019; Simpson et al., 2024).

Gender is a key factor in LGBTIQA+ people's lifetime experiences of sexual violence. Cisgender women (54.5-64.8%) and non-binary people (61.1-64.3%) have reported the highest rates, followed by trans men (54.5-56.2%), trans women (41.8-43.2%), and cisgender men (30.1-34.7%) (Amos et al., 2023; Salter et al., 2024a). Cisgender women, non-binary, and trans participants were more likely to report experiences of sexual violence in both childhood and adulthood, compared to cisgender men who more often reported violence in adulthood only (Salter et al., 2024a). For trans and gender diverse participants, those assigned female at birth reported higher rates of sexual violence (61.8%) than those assigned male (39.3%) (Callander et al., 2019).

Sexuality is also significantly associated with rates of lifetime sexual violence. Queer people reported the highest rates (66.5-67.6%), followed by bi/pansexual (59.6-62.0%), lesbian (46.2%), a/demisexual (44.7-54%), and homosexual participants (44%) (Amos et al., 2023; Salter et al., 2024b). Lesbians reported higher rates than gay-identifying individuals (46.2 vs. 34.4%) (Amos et al., 2023). Queer participants were the most likely to report experiences of sexual violence in both childhood and adulthood (Salter et al., 2024a).

Patterns of perpetration also vary by gender. For cisgender women, trans men, and non-binary people, perpetrators were most often friends or acquaintances, followed by strangers, and then current or former partners (Salter et al., 2024a). Cisgender men and trans women were least likely to report a partner or ex-partner as a perpetrator. Trans men were more likely than others to report sexual violence by an extended family member. Across participants, the most impactful incident was typically sexual assault, followed by sexual harassment, and most commonly occurred in a private residence - except for cisgender men, whose most impactful experiences often occurred in venues such as pubs, clubs, or sex-on-premises locations (Salter et al., 2024a).

Cisgender men were identified as perpetrators in the vast majority of cases: 84.3% in the most recent incident (Amos et al., 2023), and between 82-86% for the most impactful incident (Layard et al., 2022; Salter et al., 2024b). Cisgender women were identified as perpetrators in 13% of (most impactful) incidents, followed by trans men (3%), trans women (2%), and non-binary people (2%) (Layard et al., 2022). Cisgender women were most likely to report cisgender men as perpetrators (86.4%) (Salter et al., 2024b).

Between 50-75% of participants who knew the perpetrator's identity reported that the perpetrator was not part of the LGBTIQA+ community (Layard et al., 2022; Salter et al., 2024b). Cisgender men were more likely to report that the perpetrator was LGBTIQA+ identifying (77%) compared to other genders (31-54%) (Layard et al., 2022).

A third of respondents believed sexism was the main motivator of the most impactful incident, while 28% cited other identity-based discrimination (e.g. homophobia, transphobia, ableism, and racism) (Layard et al., 2022). Furthermore, 11.8% attributed sexual assault experienced in the past year to heterosexist violence targeting them due to their gender or sexuality (A. O. Hill et al., 2020).

Technology-facilitated abuse

LGBTIQA+ people are among the groups most at risk of technology-facilitated abuse (TFA) in Australia (eSafety Commissioner, 2023; Powell et al., 2022; Wolbers et al., 2022). In a 2022 national survey, over 72% of sexuality-diverse respondents and over 90% of gender-diverse participants reported a lifetime experience of TFA victimisation (Powell et al., 2022).

Several studies have shown rates of image-based abuse significantly higher than in non-LGBTIQA+ communities (eSafety Commissioner, 2017; Henry et al., 2017, 2020; Wolbers et al., 2022). One in five LGBTIQA+ respondents in the GVRN survey reported image-based victimisation, and some subgroups, particularly trans women, reported significantly higher lifetime and past-year prevalence (Salter et al., 2024a). Trans women experienced higher frequencies of non-consensual image making and distribution and reported being targeted due to their gender more commonly than trans men. Non-binary people and trans men also

reported younger average ages at first occurrence, often under 18, compared to cisgender people. Contexts for TFA included verbal coercion, exploitation of power imbalances, and targeted gender and sexuality-based harassment (Salter et al., 2024a).

Rates of dating app facilitated sexual violence (DAFSV) are also significantly higher in LGBTIQA+ people than in the cisheterosexual population. In a large national survey, Wolbers et al., (2022) found that experiences of online and in person DAFSV were highest for queer women, followed by non-binary people, queer men, and then heterosexual women and men.

Intersex people's experiences of sexual violence and medical abuse

Intersex people's experiences are rarely disaggregated in data collected from LGBTIQA+ populations. Small sample sizes due to recruitment challenges are frequently cited, in part because not all people with intersex variations identify with LGBTIQA+ or 'intersex' labels (Carpenter, 2024; A. O. Hill et al., 2020). Further, LGBTIQA+ specific research is likely reaching a limited pool of LGBTIQA+ intersex people, leading to a sense of survey fatigue particularly when the content of the research is related to difficult aspects of their lived experiences (A. O. Hill et al., 2020).

The Private Lives studies demonstrate the challenge of recruiting and representing intersex participants in LGBTIQA+ research. While the first Private Lives study reported high rates of lifetime sexual coercion within intimate relationships (25%) and sexual assault (42.9-63.6%) for intersex participants, these participants made up only 0.33% of the total sample (Pitts et al., 2006). Authors of the Private Lives 2 report acknowledged that small participant numbers in the first study precluded meaningful statistical comparisons, and without resourcing for a targeted recruitment strategy they did not include intersex as an identity category in the second survey (Leonard et al., 2012).

Private Lives 3 engaged targeted recruitment strategies and recruited 47 intersex participants, a sample size that was still too small to make statistical comparisons (A. O. Hill et al., 2020). They did however include a supplementary section on the well-being and medical intervention experiences of intersex participants. More than half of the intersex

participants in Private Lives 3 reported invasive medical examinations they did not consent to, and a third reported non-consensual invasive medical interventions. Over 60% reported experiencing a lack of autonomy in medical decisions made about them, and more than half reported experiencing medical interventions related to intersex variations during childhood (A. O. Hill et al., 2020).

It is increasingly well-known that people with intersex variations are commonly subjected to non-consensual, coerced, and unnecessary medical procedures, from early childhood onwards, in attempts to 'normalise' their bodies to fit a framework of compulsory binary sex (Carpenter, 2016, 2021). Consultation with intersex people as part of the 2024 GVRN project highlighted that violations of consent and bodily autonomy in medical contexts contribute to the continuum of sexual violence that they experience (Salter et al., 2024a). Compared to the rest of the GVRN survey respondents, intersex participants (n = 148) were over five times more likely to have experienced sexually suggestive comments, nearly seven times more likely to be subjected to unnecessary medical examinations, over 12 times more likely to experience medically unnecessary photography, around five times more likely to experience unnecessary touching or treatments, and nearly 10 times more likely to be coerced into surgery (Salter et al., 2024a).

Overall, these findings confirm that sexual violence within LGBTIQA+ communities is highly gendered and driven by other expressions of power and oppression including heterosexism, homophobia, transphobia and racism. Non-binary and trans people face heightened risk. Cisgender men are more likely to perpetrate sexual violence, while perpetrators are frequently outside the LGBTIQA+ community and may be committing heterosexist or gendered violence.

2.1.3. First Nations LGBTIQA+SB communities

We know that both First Nations people and LGBTIQA+ people are at heightened risk of experiencing sexual violence compared to the general population in Australia (Australian Bureau of Statistics, 2019), and this means that risk compounds for First Nations LGBTIQA+SB people (Day et al. 2023; Our Watch, 2024). Until very recently, no national

data specifically addressed the experiences of sexual violence among First Nations LGBTIQA+SB people. In 2023, the Gendered Violence Research Network (GVRN) was funded by the Australian Government Department of Social Services to conduct the first large-scale national survey of LGBTIQA+SB peoples experiences of sexual violence (Salter et al., 2024a, 2024b). Of the 3,192 participants, 416 identified as First Nations.

Among First Nations LGBTIQA+SB participants, 69% reported having experienced sexual violence in their lifetime. Most commonly, they reported having experienced violence in both childhood and adulthood (42.8%), compared to childhood (6.7%) or adulthood (19.5%) alone. In childhood cases, perpetrators were most commonly friends or acquaintances (36.7%), followed by immediate or extended family members (33.0% each). For those who reported sexual violence only in adulthood, the most frequently identified perpetrators were friends or acquaintances (54.3%) and strangers (49.4%). For those who experienced violence across both childhood and adulthood, perpetrators were most often friends or acquaintances (54.7%), strangers (51.65%), or a partner or ex-partner (52.1%).

The majority of First Nations LGBTIQA+SB participants reported that their most impactful experience occurred more than five years ago or before the age of 18. The most common types of violence were sexual assault and sexual harassment. These incidents took place primarily in private residences, particularly among cisgender and transgender women. The most impactful experiences for cisgender men were more likely to occur in social settings such as pubs, clubs, or parties. Perpetrators were most commonly friends, followed by strangers and romantic partners.

Among First Nations LGBTIQA+SB cisgender men, the most impactful incident was more likely to involve a friend as perpetrator - differing from the overall survey sample where cisgender men more commonly identified perpetrators as strangers. First Nations trans women and non-binary participants were significantly more likely than cisgender women to identify a romantic partner as the perpetrator. In contrast, within the total sample, these groups reported partner perpetrators at comparably high rates. Over two-thirds of perpetrators were cisgender men, and 43.9% were identified as members of the LGBTIQA+

community. Cisgender men and non-binary participants were more likely than cisgender women to identify a LGBTIQA+ perpetrator.

A smaller survey involving 25 First Nations LGBTIQA+SB participants supported the GVRN findings and highlighted distinctions between First Nations and non-First Nations LGBTIQA+ experiences (Barnes et al., 2024). First Nations respondents more often reported their most impactful experience as occurring over 10 years ago, taking place in a private residence, and involving a stranger or acquaintance, compared to the overall sample. They also reported higher rates of sexually offensive behaviours, threats, pressure to engage in sex, and physical violence (e.g., choking or strangulation). First Nations participants were less likely to report being assaulted by an LGBTIQA+ person and more likely to be unsure of the perpetrator's community affiliation. They were also less likely than the overall sample to report the presence of a bystander who intervened.

Technology-facilitated abuse

The GVRN study found high rates of technology-facilitated sexual violence targeting First Nations LGBTIQA+SB people, with trans women most affected (Salter et al., 2024a). Over half experienced non-consensual image/video making, and over 40% reported distribution, often repeatedly. Between 25-50% of participants reported being targeted based on their gender or sexuality, and this was particularly so for trans men. Common contexts included exploitation of power, verbal coercion, and threats or use of force. There was no survey question about being targeted based on race.

Disclosure

Rates of disclosure were lower among First Nations participants compared to the overall LGBTIQA+ sample - only 41.9% had disclosed their most impactful experience in the GVRN survey (Salter et al., 2024a, 2024b). When they did disclose, it was most commonly to a friend or family member, and least commonly to a support service or police. Cisgender First Nations men had the lowest disclosure rate, with less than one in five disclosing. Key barriers to disclosure included shame, fear of being blamed, and not recognising the experience as abuse at the time. Those who experienced childhood victimisation were

more likely to report non-disclosure due to not recognising the experience as abuse or thinking they would not be believed.

Findings from the smaller Barnes et al. (2024) study mirrored these patterns. None of the First Nations respondents reported their experiences to a crisis or sexual assault service or the police, in contrast with the 12% of non-First Nations participants who reported it to the police. First Nations participants were more likely to report shame, fear of getting in trouble, being blamed, or experiencing discrimination (homophobia, biphobia, or transphobia) as barriers to disclosure.

Although research remains limited, emerging evidence highlights the unique and complex experiences of sexual violence among First Nations LGBTIQA+SB people. These findings point to the serious need for better understanding of the compounding impacts of colonialism, queerphobia, transphobia and racism as drivers of risk in order to prevent of sexual violence against this community.

2.2. Impacts of sexual violence

2.2.1. First Nations communities

While the harmful impacts of sexual violence on victim-survivors are widely recognised, the specific impact on First Nations people's experiences of sexual violence remains less well researched and understood (Boyd, 2011; Cripps, 2023; Moulding et al., 2021). This is in part due to sexual violence in First Nations communities being researched predominantly in the context of, and conflated with, family violence, which limits understanding of the impacts of sexual violence outside of family and intimate relationships (Salter et al., 2024b).
We do know however, that for First Nations women sexual violence is inextricably linked to gendered colonial violence (Cripps, 2023; Gregoire, 2022; Guggisberg, 2019; Langton et al., 2020; Willis, 2011). Sexual violence also compounds the effects of intergenerational trauma and internalised racism caused by colonialism, undermining individual, community, and cultural well-being (J. Atkinson et al., 2010; Olsen & Lovett, 2016). Existing research shows

associations between sexual violence and adverse outcomes in the domains of physical and mental health, social emotional well-being, relationships and identity, incarceration, reduced life opportunities and limited self-determination among First Nations women and children (Cripps, 2023).

Sexual violence contributes significantly to the gap in burden of disease for First Nations people in Australia. Intimate partner physical and sexual violence accounts for 10.9% of the burden of disease among First Nations women aged 18-44 years - more than any other health risk and 6.3 times the rate for non-Indigenous women (Webster, 2016). Intimate partner violence contributed most to the burden of depressive and anxiety disorders (55.5%), followed by suicide and self-harm (23.5%), homicide and injury (15.6%), alcohol use disorders (4.8%) and early pregnancy loss (0.5%) (Webster, 2016). Sexual violence can have lethal consequences: First Nations women face higher risk of suicide, are 34 times more likely to be hospitalised due to intimate partner violence (Australian Institute of Health and Welfare, 2024b), and five times more likely to be killed by a current or former intimate partner than non-First Nations women (Miles & Bricknell, 2024a, 2024b).

Sexual violence is also a contributing factor to the over-representations of First Nations women in prison (Our Watch, 2018b). There is evidence that the majority of incarcerated First Nations women are survivors of sexual violence, with many being convicted for actions of self-defence against violent partners (Bartels, 2012; Nancarrow, 2016; Sherwood & Kendall, 2013; Wilson et al., 2017). Violence by First Nations women is very often a reaction to the violence used against them - often after they have endured the violence against them for years, tried unsuccessfully to access safe supports, and received inappropriate or harmful responses from police and mainstream services (Guggisberg, 2019; Wilson et al., 2017).

First Nations women are likely to be misidentified as perpetrators by police when they call for assistance with family violence (Longbottom et al. 2024). Police and social services also cite family violence as grounds to disproportionately remove First Nations children from their families and place them in out-of-home care (Our Watch, 2018b; SNAICC, 2017). In this context, fear of child removal is understandably a key barrier to disclosing family and

sexual violence for First Nations women (Australian Institute of Health and Welfare, 2024a; Langton et al., 2020; SNAICC, 2017). The impacts on First Nations children removed from their families and communities are profound and lifelong. These include greater risk of further interpersonal and institutional violence, low social and emotional well-being, disconnection from family, community, and culture, contact with the justice system, and socioeconomic disadvantage (Australian Institute of Health and Welfare, 2024a; Healing Foundation, 2013; Our Watch, 2018b; SNAICC, 2017). The continuing overrepresentation of First Nations children in out-of-home care perpetuates cycles of violence, intergenerational trauma, family and cultural destruction, and grief and loss stemming from colonialism.

2.2.2. LGBTIQA+ communities

Sexual violence has far-reaching and significant impacts on LGBTIQA+ people's lives (Amos et al., 2023; Layard et al., 2022; Salter et al., 2024a). In a recent national survey, 83% of LGBTIQA+ respondents reported that their mental health had been negatively impacted by experiences of sexual violence, 75% said their feelings of safety had been impacted, 61% their relationships, 40% their identity, 27% their connection to the LGBTIQA+ community, and 25% their physical health (Layard et al., 2022). Some also reported negative impacts on their financial and housing security. Trans and gender diverse participants reported these impacts at even higher rates: 92% on mental health, 83% on safety, 81% on sex life, 74% on relationships, and 51% on identity (Parker et al., 2024).

Findings from the GVRN survey supported the associations between sexual violence and poor mental health (particularly depression, anxiety, and complex PTSD), as well as negative effects on education and employment (Salter et al., 2024a). These effects were particularly pronounced for those with childhood experiences of violence. Substance misuse was more commonly reported among those who experienced sexual violence in adulthood.

The Layard et al. (2022) study also found that nearly half of respondents attributed thoughts of self-harm or suicide to experiences of sexual violence. Forty-two percent reported self-harm, and 21% reported suicide attempts linked to these experiences. Those who experienced sexual violence before the age of 18 were three times more likely to report

suicidal ideation or self-harm compared to those who experienced violence in adulthood only. Trans and gender diverse individuals reported significantly higher rates of these impacts compared to cisgender participants.

The impact of sexual violence on suicidality and self-harm is particularly concerning in the context of pre-existing mental health disparities between LGBTIQA+ people and the general population of Australia, a result of stigma, discrimination, and prejudice (Amos et al., 2023). LGBTIQA+ people are four times more likely to experience high psychological distress, ten times more likely to have attempted suicide in the past year, and eight times more likely to have attempted suicide in their lifetime (A. O. Hill et al., 2020). The disparities for trans and gender diverse people are even more extreme: they are 5.6 times more likely to experience high psychological distress, over 20 times more likely to have attempted suicide in the past year, and over 13 times more likely to have done so in their lifetime (A. O. Hill et al., 2020). These statistics reflect the cumulative impact of interpersonal, systemic, and institutional violence (of which sexual violence is a critical component) on this community (Parker et al., 2024).

2.2.3. First Nations LGBTIQA+SB communities

Research on the impacts of sexual violence on First Nations LGBTIQA+SB people is emerging but remains extremely limited. Supplementary analysis of data from the *Private Lives 3* (A. O. Hill et al., 2020) and *Writing Themselves In 4* (A. O. Hill et al., 2021) studies showed that First Nations LGBTIQA+SB participants who had experienced sexual assault in the last year were more likely to report high psychological distress, suicidal ideation, and suicide attempt in the past 12 months, than those who had not (Amos et al., 2023).

A small survey including 25 First Nations LGBTIQA+SB people showed that these participants were more likely than non-First Nations respondents to report sexual violence had impacted their sex life (84%), connection to LGBTIQA+ community (84%), and physical health (37%) (Barnes et al., 2024). They reported impacts on mental health (84%) and relationships (58%) at similar rates to non-First Nations respondents; and impacts on feelings of safety (68%) and identity (32%) at lower but still significant rates.

In addition, findings from the GVRN survey (Salter et al., 2024a) showed associations between lifetime experiences of sexual violence and substance misuse, specific mental health issues (depression, anxiety, complex trauma, bipolar disorder, personality disorder), disability or chronic illness, unemployment, and low income for First Nations LGBTIQA+SB respondents. Mental health issues, disability or chronic illness, and low income were more prevalent for those who experienced sexual violence in childhood compared to adulthood only or not at all.

These findings are even more alarming given the already elevated rates of psychological distress and suicidality among First Nations LGBTIQA+SB people. Compared to non-Indigenous LGBTIQA+ people (who already face disproportionately high levels of mental health issues, discrimination, and violence), First Nations people are more likely to report suicidal ideation or attempts, verbal abuse, sexual assault, and social exclusion based on their gender or sexuality (Amos et al., 2023). First Nations trans and gender diverse people report even higher levels of distress, suicidality, racist or cisheterosexist microaggressions, and poorer social-emotional wellbeing than cisgender people (Amos et al., 2023; Liddelow-Hunt et al., 2021, 2023). This is all compounded by the fact that many do not feel that Aboriginal community-controlled organisations, LGBTIQA+ services, or mainstream support systems provide culturally safe or affirming care that adequately addresses their intersecting experiences (Liddelow-Hunt et al., 2023; Salter et al., 2024b).

3. The drivers of sexual violence

3.1. First Nations communities

There is limited literature on the specific drivers of sexual violence in First Nations communities. However, as a form of gendered violence, sexual violence cannot be separated from broader patterns of interpersonal and structural violence. These forms of violence share common drivers, particularly in the context of colonialism. There is emerging evidence from many First Nations communities across Canada, Aotearoa - New Zealand, the USA and Australia that sexual and gendered violence are common strategies used by

colonialism to harm and displace First Nations communities, and that First Nations LGBTIQA+SB people bear the brunt of this violence (Holmes et al., 2015; Hunt 2010; 2015; Day 2021; O'Sullivan 2021b).

Sexual violence is not an inherent aspect of First Nations culture (though this harmful myth has been used to justify it) (Blagg et al., 2020; Cripps & Adams, 2014). Its high prevalence rates are the result of colonialism, racism, intergenerational trauma, and introduced cycles of violence that shape the lives of First Nations peoples in Australia. Colonialism is characterised by ongoing systems of oppression that disrupt cultural, social, and family structures for First Nations peoples, perpetuating trauma across generations (J. Atkinson, 1990; Cripps & Davis, 2012). In this context, gender inequality is not a stand-alone driver but a consequence of colonialism, intersecting with racism and trauma to increase risk of sexual violence against First Nations communities (Blagg et al., 2020, 2022; Keddie et al., 2024; The Healing Foundation, 2017).

3.1.1. Legacies and ongoing impacts of colonialism

Colonialism is inherently and systemically violent. In Australia, initial stages of colonisation involved massacres, dispossession, forced removal of children, brutal sexual violence, and mass displacement and containment of First Nations peoples (Carlson et al., 2024; Our Watch, 2018b; The Healing Foundation, 2017). This violence was a deliberate and systematic attempt to eradicate First Nations Peoples and to dismantle First Nations Lore, Culture, governance, and kinship systems that regulate community wellbeing, manage conflict, and prevent violence (Carlson et al., 2024; A. Day et al., 2012; Guthrie et al., 2020; Olsen & Lovett, 2016; Our Watch, 2018b; The Healing Foundation, 2017).

While often treated as historical, colonialism is an ongoing structure of racial discrimination, violence and marginalisation that continues to displace and harm First Nations communities. Government responses continue to prioritise policing and incarceration over healing and prevention for First Nations communities, ensuring that First Nations peoples are overexposed to cycles of violence and disadvantage (Filev et al., 2022). First Nations children continue to be stolen from families and institutionalised - they remain

overrepresented in out-of-home care, and youth incarceration rates remain disproportionately high (Davis, 2019; Productivity Commission, 2024). First Nations women are still Missing and Murdered at alarming rates across so-called Australia, often with little investigation or support for justice for their families and there is currently no data on Missing and Murdered cases for First Nations LGBTIQA+SB people in Australia in the same way there is in Canada, for instance (Carlson, 2021; Day et.al., 2022).

Colonialism and systemic racism are deeply entrenched in Australian cultures and structures. These continue to manifest in racialised structural inequalities, racist social norms and attitudes, perpetration of racist violence, and tolerance or condoning of violence against First Nations people by non-Indigenous people (Our Watch, 2018b). The Australian government continues to deprioritise and exclude First Nations people, limiting access to the resources, services, and self-determination that would address and prevent violence against them (Olsen & Lovett, 2016), and perpetuating the social conditions that devalues their lives and makes violence against them more likely (The Healing Foundation, 2017).

3.1.2. Intergenerational, historical, and collective trauma

The cumulative historic and ongoing effects of colonialism result in transgenerational and collective trauma characterised by loss, disempowerment, cultural erosion, and severe chronic stress in the day to day lives of First Nations people (J. Atkinson, 2002a; Our Watch, 2018b; The Healing Foundation, 2017). This trauma is passed down and accumulates through generations of individuals and communities, causing high rates of mortality, physical and mental illness, substance abuse, relationship difficulties, and cycles of disadvantage and violence (J. Atkinson, 2002a; A. Day et al., 2012; Guthrie et al., 2020; Our Watch, 2018b).

Intergenerational trauma is both a driver and consequence of violence. The deep harm committed against First Nations communities can lead to the internalisation of oppression/victimisation and internalised racism against one's own people and communities, and to the externalisation of violence to assert power (with men more likely to externalise) (J. Atkinson, 2002a; The Healing Foundation, 2017; Langton et.al 2020). Community research highlights the cycle, showing a link between high exposure to trauma

and increased likelihood of both experiencing and using violence, particularly when families have been disrupted by forced removal (Guthrie et al., 2020). Intergenerational trauma is linked to the normalisation and learning of violence (Memmott, 2010; Our Watch, 2018b; Willis, 2011) and histories of institutional gendered violence have intergenerational impacts on First Nations people (Soldatic et al., 2023). Early exposure to violence is associated with both the use of gender-based violence and with the attitudes that support it (Memmott, 2010; Our Watch, 2018b; Willis, 2011). Punitive responses such as incarceration and child removal further perpetuate cycles of trauma and violence in First Nations communities (Filev et al., 2022; Keddie et al., 2024).

3.1.3. Racism

Colonialism entrenches systemic racism in Australian institutions and culture. First Nations people continue to experience structural discrimination and profound inequalities in healthcare, housing, education, justice, and employment (Our Watch, 2018b; Thurber et al., 2022). In a 2020 survey, 36% of First Nations respondents reported experiencing racist verbal abuse, and 18% reported racist physical violence, in the last six months - three and six times the rate of non-First Nations respondents, respectively (Reconciliation Australia, 2020).

Systemic racism from non-Indigenous people is a major cause of harm and homicide against First Nations peoples in Australia (Bevan et al. 2024; Cripps, 2022). The flow on effects of racism are significant and cumulative for First Nations people, fuelling anger, trauma, and powerlessness, which can increase the risk of victimisation and use of violence (Guthrie et al., 2020; Our Watch, 2018b). In a study of 18 First Nations communities, individuals who experienced high levels of discrimination were four times more likely to use violence (Guthrie et al., 2020). Experiences of racism from authorities, including police, are a key trigger for anger and violent responses for First Nations men in custody (A. Day et al., 2006). Internalised racism can lead to lateral violence, where anger and disempowerment are directed inward within communities (C. Atkinson, 2008; Paradies, 2018) and gendered, homophobic and transphobic violence which targets less powerful members of communities (Langton et al. 2020; Soldatic et al. 2022). Racist media narratives and public discourses

reinforce harmful stereotypes, framing violence as a cultural issue rather than a consequence of systemic oppression, and contributing to societal apathy, condoning, and blaming First Nations people for the violence committed against them (Cripps, 2021; Guthrie et al., 2020; McQuire 2024). Racism also undermines self-governance, self-determination, and healing, which are protective against violence (Blagg et al., 2022; Filev et al., 2022).

3.1.4. Intersection of gender

Colonial patriarchy shapes experiences of gender, power, and control within First Nations communities (Aboriginal Health Council of South Australia, 2019; Filev et al., 2022; Guthrie et al., 2020). First Nations people's attitudes towards gender inequality and violence against women are comparable to the whole Australian population (Coumarelos et al., 2023, 2024). However, in the context of colonialism gender inequalities overlaps with racial inequalities to create compounding discrimination and disadvantage against First Nations women and transgender and gender diverse people.

First Nations women face the "dual oppressions" of sexism and racism, placing them at higher risk of sexual violence than both non-First Nations women and First Nations men (Our Watch, 2018). The imposition of colonial patriarchy intentionally disrupted the social structures, laws, practices, and norms that governed appropriate and equitable relationships between First Nations peoples (Guthrie et al., 2020; Olsen & Lovett, 2016; O'Sullivan 2021b). This diminished the roles, authorities, and protections that all First Nations peoples had in their communities (Filev et al., 2022; Olsen & Lovett, 2016; O'Sullivan 2022). Furthermore, in a colonial context First Nations women are positioned against white women, leading to objectification, devaluation, and dehumanisation that enables and excuses violence against them (Moreton-Robinson, 2019).

Colonial gender norms also disempower First Nations men, imposing standards of masculine dominance while simultaneously denying access to cultural authority, social status and connection (J. Atkinson, 2002a; A. Day et al., 2012; The Healing Foundation, 2017). This disempowerment, compounded by racism and trauma, has been linked to violence (Filev et

al., 2022; The Healing Foundation, 2017). Three-quarters of First Nations participants in the 2017 National Community Attitudes Survey believed that the disruption of masculine roles contributes to family violence (Cripps et al., 2019).

First Nations LGBTIQA+SB people face additional layers of homophobic and transphobic violence both within and outside their communities (Aboriginal Health Council of South Australia, 2019). The colonial imposition of binary gender and nuclear families disrupted the ways of life for First Nations peoples where all people had a role and place in their communities as part of complex, intricate kinship networks (ACON, 2021; Hodge, 2015; A. Phelan, 2020; O'Sullivan, 2022). As a result of institutional gendered violence in boys and girls homes and the influence of Christian missions and missionaries, many First Nations LGBTIQA+SB people face intercommunity and intergenerational violence (Blagg et al., 2018; Clancy, 2015; Day, 2020; Day et al., 2022; Johnson, 2015; Kerry, 2014; Riggs & Toone, 2017; Soldatic et al. 2023), and transphobic, homophobic, and racist violence from wider society (Filev et al., 2022; Kerry, 2014; Riggs & Toone, 2017).

Mainstream violence prevention frameworks, which focus on gender equality and justice, do not align with First Nations worldviews. For First Nations people, gender justice is grounded in restoring cultural systems of connection, respect, and inclusion - not individual rights and access to resources within colonial institutions (Filev et al., 2022; Fitz-Gibbon et al., 2022). Gender equity is built into First Nations culture (J. Atkinson, 2002a; Guthrie et al., 2020). Therefore, violence prevention necessitates challenging colonialism and its current hierarchical and exclusionary structures and restoring First Nations systems of governance, equity, justice and community well-being.

3.1.5. Reinforcing and contextual factors

In addition to structural drivers, contextual factors exacerbate the risk of sexual violence in First Nations communities. In a survey conducted by Black Rainbow and researchers at Macquarie University ascertaining the impact of the COVID-19 pandemic on First Nations LGBTIQA+SB people, more than 60% of 112 participants said they were concerned about housing security and more than 50% said they felt unsafe where they lived because they

were LGBTIQA+SB (Day et al., 2022). Poverty, poor housing, limited access to healthcare and education stem from historic and current systemic disadvantage, and the compounding impacts of discrimination (Day et al., 2022; Carlson et al., 2024; Olsen & Lovett, 2016). Unstable income, employment, and housing, as well as poor health and well-being all contribute significantly to increased risk of violence victimisation and perpetration in First Nations communities (Guthrie et al., 2020). Geographical isolation further compounds these issues, contributing to marginalisation and limiting access to protective supports and resources for rural and remote communities (Our Watch, 2018b).

Drug and alcohol misuse exacerbates the risk of violence. Higher rates of substance misuse in First Nations communities are a symptom of colonial trauma, grief and loss, racism, and socio-economic disadvantage (Olsen & Lovett, 2016; The Healing Foundation, 2017). While substance use is often present in cases of family violence (Carlson et al., 2024), it is less predictive of violence than disempowerment, intergenerational trauma, and internalised racism in First Nations communities (Langton et al., 2020; Queensland Centre for Domestic and Family Violence Research, 2019; The Healing Foundation, 2017).

3.2. LGBTIQA+ communities

Sexual violence in LGBTIQA+ communities is a pressing yet underrepresented issue in Australia. While the drivers of gendered violence are well-documented in heterosexual contexts, much less is understood about the unique experiences and drivers within LGBTIQA+ populations. These communities face intersecting challenges, including structural inequalities, systemic discrimination, and entrenched societal norms that marginalise non-heterosexual and non-cisgender people. This invisibility limits not only the awareness of violence but also the development of effective preventative strategies tailored to LGBTIQA+ communities.

3.2.1. Inequality, power, and control

Sexual violence functions as a mechanism for exerting power and control over individuals perceived as vulnerable. Unequal gendered power dynamics are key drivers of violence

perpetuated by cisgender men against cisgender women. Research suggests that the same gender power dynamics intersect with cisnormativity, heteronormativity and other structural inequalities to drive violence against LGBTIQA+ people (Lusby et al., 2022; Our Watch & GLHV, 2017; The Equality Institute, 2016).

Within LGBTIQA+ relationships, power inequalities can stem from 'social currencies' that mirror broader patriarchal hierarchies, such as race, income, education, citizenship, access to social networks, community status, degree of 'outness', adherence to gender norms or binary identities (Carman et al., 2020; Our Watch & GLHV, 2017). These inequalities can be exploited by perpetrators, particularly in the context of the societal discrimination, lack of appropriate supports services, and lack of legal protections that silences victims (Lim et al., 2024).

At a broader level, perpetrators often exploit intersecting axes of oppression, including homophobia, transphobia, racism, ableism, and ageism to exert control (Layard et al., 2022; Leonard et al., 2008; Lusby et al., 2022). These factors not only influence how violence is enacted but also how it is recognised, understood, and responded to by victims - affecting their ability to seek or access support (Bourne et al., 2023; Lusby et al., 2022; The Equality Institute, 2016).

3.2.2. Gender norms, roles, and relations

Violence against LGBTIQA+ people is inherently gendered. Patriarchal and rigid binary gender norms reinforce power hierarchies that legitimise violence, not only to assert dominance over women, but also over those whose gender does not fit the prevailing norms (Calton et al., 2016). The available data corroborates this: LGBTIQA+ cis and trans women, as well as trans and non-binary people are disproportionately victimised and least likely to perpetrate violence. Like the rest of the population, LGBTIQA+ people exist in a patriarchal society where gender is a source of power and marginalisation - they too experience the pressure to meet gender expectations and the consequences of challenging them - though the specific and nuanced dynamics of this still needs better understanding (Carman et al., 2020; Lusby et al., 2022; The Equality Institute, 2016).

One way that gender stereotypes perpetuate sexual violence in LGBTIQA+ communities is by designating who can be a legitimate victim or perpetrator of sexual violence. Many LGBTIQA+ and non-LGBTIQA+ people hold beliefs that sexism, patriarchal values, and power imbalances do not exist in LGBTIQA+ relationships, that violence does not occur in lesbian relationships, or that violence between gay men should be tolerated as a normal expression of masculinity (Cannon, 2015; Gray et al., 2020; Hassouneh & Glass, 2008; Salter et al., 2024a). These myths minimise the visibility, recognition, and appropriate response to sexual violence against LGBTIQA+ people.

Trans and gender-diverse people face heightened risk, as patriarchal structures sanction violence against people whose genders digress from prescribed binary gender norms. Since transgender and gender diverse peoples are perceived as threatening to the maintenance of systemic power and marginalisation, perpetrators and enablers justify sexual violence motivated by objectification and fetishisation, transphobia, or 'corrective acts' as a natural consequence of challenging the dominant social order (Our Watch & GLHV, 2017; Parker et al., 2024; Perry & Dyck, 2014).

3.2.3. Cisheteronormativity, homophobia, and transphobia

Cisnormativity and heteronormativity are pervasive cultural, legal, and institutional frameworks that position cisgender people and heterosexual relationships as the default and marginalise all others. Homophobia and transphobia are manifestations of cisheteronormativity that frame non-normative genders and sexualities as wrong or inferior. This creates environments where violence is justified as a means of enforcing social norms (Carman et al., 2020; Layard et al., 2022; Leonard et al., 2008), such as acts of "corrective" violence, intended to 'normalise' or punish gender and sexuality diverse individuals (Layard et al., 2022; Our Watch & GLHV, 2017; Parker et al., 2024).

Homophobic and transphobic beliefs and acts of violence are legitimised by cis-heteronormative structures, such as discriminatory laws, exclusionary practices, and under-resourced services for LGBTIQA+ victim-survivors of sexual violence (Gray et al., 2020; Lusby

et al., 2022; The Equality Institute, 2016). LGBTIQA+ service users have reported that heteronormative assumptions of service providers cause further harm, leading them to feel unsafe and not taken seriously (Lusby et al., 2022).

The homophobic and transphobic discrimination that LGBTIQA+ people experience in their daily lives contributes to a broader climate of 'minority stress' (Frost & Meyer, 2023; A. O. Hill et al., 2020; Meyer, 2003). Aspects of LGBTIQA+ minority stress such as stigma consciousness, degree of outness, and experiences of sexuality-based discrimination significantly increase the risk of intimate partner violence (Blackburn et al., 2024; Blayney et al., 2023; Grove & Johnson, 2022). Internalised homophobia and transphobia (products of cisheteronormativity) are also associated with both victimisation and perpetration. Internalisation can undermine self-worth, reduce relationship satisfaction, and lead to lateral violence or tolerance of abusive behaviour for LGBTIQA+ people (Badenes-Ribera et al., 2019; Parker et al., 2024; The Equality Institute, 2016). The fear of exacerbating stigma and hostility towards the community can also deter disclosure or help-seeking (Fileborn, 2012; Gray et al., 2020; Layard et al., 2022).

3.2.4. Invisibility of violence in LGBTIQA+ communities

The dominant framing of sexual violence as cisheterosexual male violence against cisheterosexual women, obscures the experiences of LGBTIQA+ people (Cannon, 2015; Lim et al., 2024). LGBTIQA+ people have been overlooked by research, advocacy, policy, service provision, and prevention efforts, leaving the community without a clear understanding of what constitutes violence or how to access supports to address it (Bourne et al., 2023; Gray et al., 2020; Lim et al., 2024; QTWAV and LGBTI Legal Service, 2024).

This invisibility contributes to under-reporting and reduced help-seeking. Victims may remain in abusive relationships, avoid disclosure, or be forced to draw on supports that are discriminatory, exclusionary, and re-traumatising (Lim et al., 2023; Lusby et al., 2022). Large proportions of LGBTIQA+ people do not disclose sexual or other gendered violence for fear that police or service providers will dismiss them or subject them to further harm (Layard et

al., 2022; Leonard et al., 2008; Parker et al., 2024). This contributes to a sustained cycle of under-recognition and under-resourcing of the LGBTIQA+ community's needs.

3.2.5. Reinforcing and contextual factors

LGBTIQA+ people are disproportionately affected by factors that increase risk of sexual violence across the broader population. These include substance use, social isolation and exclusion, homelessness, poor mental health, and trauma - all of which arise in a sociopolitical context characterised by discrimination and marginalisation (Amos et al., 2023; A. O. Hill et al., 2020).

There is evidence that LGBTIQA+ children are more likely to experience abuse from caregivers than their non-LGBTIQA+ siblings and are at greater risk of revictimisation in adulthood (Balsam et al., 2005; Classen et al., 2005; Corey et al., 2023). Exclusion from family and community support can limit their ability to recognise or escape violence (A. O. Hill et al., 2020; Leonard et al., 2008, 2012). Isolation compounds risks where perpetrators use threats of "outing" to leverage control (Our Watch & GLHV, 2017).
First same-gender relationships can present unique risks, including lack of healthy relationship role models, investment in the relationship to validate one's identity, and limited support networks (Donovan & Barnes, 2020; McDonald, 2012). A lack of LGBTIQA+ inclusive sex education limits knowledge of consent and healthy relationships and has been linked to increased risk of victimisation (Bloom et al., 2022). Gender-diverse people face increased risk in environments lacking safe, affirming spaces. For example, a lack of gender-affirming bathrooms is associated with increased risk of sexual assault for gender-diverse young people (Murchison et al., 2019).

3.3. Compounding drivers of sexual violence: First Nations LGBTIQA+SB communities

3.3.1. First Nations LGBTIQA+SB people's experiences of sexual violence

There is a significant lack of published literature on the drivers of sexual violence against First Nations LGBTIQA+ people (Our Watch, 2024; Salter et al., 2024b; Soldatic, Sullivan, Briskman, et al., 2023; The Equality Institute, 2016). Their experiences are rarely disaggregated in research or datasets. Although there is emerging mainstream recognition of the diversity of genders and sexualities, and interest in the lived experiences, of First Nations LGBTIQA+SB people, references to sexual violence are minimal, other than to name them as a priority group for violence prevention (QTWAV and LGBTI Legal Service, 2024; Salter et al., 2024b).

Heteronormative and binary framings of gendered violence contribute to these gaps, obscuring the multiple and compounding oppressions that drive sexual violence against First Nations LGBTIQA+SB people. These communities experience multiple, overlapping sources of oppression – including colonialism, racism, cissexism, and queerphobia - which interact in ways that cannot be understood in isolation or through additive models of risk (Maddison & Partridge, 2014; Our Watch, 2024).

The concept of intersectionality explains how multiple forms of systemic oppression are connected and overlapping for women of colour (Crenshaw, 1989, 1991). Importantly, intersectionality should be used to shift the analytical focus away from marginalised people and toward the power structures that exploit and oppress them. The drivers of sexual violence affecting First Nations and LGBTIQA+ communities individually - outlined in earlier sections - are all relevant. However, for First Nations LGBTIQA+SB people, these drivers are overlapping and cumulative in ways that amplify both exposure to violence and barriers to safety and support.

3.3.2. The weight of colonialism

First Nations LGBTIQA+SB people experience some of the heaviest cumulative harms of colonialism - both as First Nations peoples and as individuals whose gender and sexuality diverge from colonial, patriarchal norms (P. Phelan, 2023). These communities face discrimination from multiple directions: homophobia, transphobia, cissexism, cultural alienation, and violence within First Nations communities; and racism and social exclusion

within predominantly white LGBTIQA+ spaces, and all of the above from non-Indigenous society in Australia (M. Day et al., 2022; Farrell, 2015; B. Hill et al., 2024; International Work Group for Indigenous Affairs & Bassani, 2023; P. Phelan, 2023; Soldatic, Sullivan, Briskman, et al., 2023). This is sometimes referred to as 'compounded colonisation' and results in invisibility in terms of representation, community support, and cultural inclusion, as well as hypervisibility that exposes First Nations LGBTIQA+SB people to racialised, gendered, and sexualised scrutiny and violence (International Work Group for Indigenous Affairs & Bassani, 2023).

Many First Nations LGBTIQA+SB individuals describe the tension of holding both cultural and queer identities in environments that do not fully accept one or the other, navigating misconceptions that LGBTIQA+ people do not exist in First Nations culture (Farrell, 2021; Henningham, 2019). Many describe having to keep their identities separate but wishing they could co-exist (Carlson, 2020; B. Hill et al., 2024; Liddelow-Hunt et al., 2021). Some feel they must choose between remaining on their lands with their communities while hiding their sexuality or gender, or alternatively, minimising their cultural identity and navigating racism without community support (M. Day et al., 2022; B. Hill et al., 2021; International Work Group for Indigenous Affairs & Bassani, 2023). While the concept of 'chosen family' is a positive experience of belonging for non-Indigenous LGBTIQA+ people, for First Nations LGBTIQA+SB individuals, loss of family connection can result in loss of access to culture and full political participation in First Nations communities. Some maintain relationships with family and community members who are homophobic or transphobic so they can retain their access to Culture and Country (Dudgeon et al., 2015; Liddelow-Hunt et al., 2021).

As discussed in previous sections, colonialism and systemic discrimination are key drivers of sexual violence. First Nations LGBTIQA+SB people experience high levels of violence, including sexual violence, driven by both racism and queerphobia and perpetrated by individuals from both inside and outside their communities (Soldatic, Sullivan, Briskman, et al., 2023). This compounded marginalisation further increases risk factors such as trauma, homelessness, substance use, and poor physical and mental health, while also limiting access to culturally safe supports and protections (M. Day et al., 2022; Dudgeon & Walker, 2015; Filev et al., 2022; International Work Group for Indigenous Affairs & Bassani, 2023; Soldatic, Sullivan, Briskman, et al., 2023).

Furthermore, navigating support systems is difficult. LGBTIQA+ services typically centre whiteness and can expose clients to racism, while Aboriginal Community Controlled Health Organisations (ACCHOs) may lack the capacity or willingness to meet the needs of gender and sexuality diverse people and can pose privacy concerns in smaller communities (Carlson et al., 2024; M. Day et al., 2022; Lusby et al., 2022; Spurway et al., 2023). To access care, First Nations LGBTIQA+SB people report engaging in 'shape-shifting', i.e. modifying their presentation to navigate and mitigate potential harm (M. Day et al., 2022; Sullivan et al., 2022). This constant negotiation undermines their bodily autonomy, self-determination, and affirmation of their culture, gender, and sexuality (International Work Group for Indigenous Affairs & Bassani, 2023).

Experiences of discrimination differ geographically. Some young First Nations LGBTIQA+SB people report higher levels of queerphobia in rural communities, and while some find urban queer communities safe and supportive, others often report experiencing racism in these spaces (Soldatic et al., 2021). Social media spaces offer community connection and cultural expression, particularly for those who are geographically or socially isolated (Carlson, 2020; Farrell, 2021). However, online spaces also mirror the racism and trans/homophobia of offline environments (Carlson & Day, 2022; T. Kennedy, 2020). In the *Breaking the Silence* study over 40% of First Nations LGBTIQA+SB participants in Western Australia reported withholding their cultural identity on dating apps due to fear of racism (B. Hill et al., 2021).

3.3.3. Strength, resistance, resilience

Despite the challenges of navigating the compounding impacts of colonialism, racism, and queerphobia, First Nations LGBTIQA+SB people express pride in their identities and demonstrate unique strengths, resilience, and resistance. Many feel proud that their lived experience contributes to disrupting dominant narratives about what it means to be both First Nations and LGBTIQA+SB in Australia (Farrell, 2021; Henningham, 2019). Many are active in challenging community attitudes, advocating for others, and driving cultural change within families, communities, and broader society (B. Hill et al., 2021). First Nations

LGBTIQA+SB people actively create culturally affirming spaces of belonging, independent of mainstream systems, to foster safety and inclusion, and resist colonial structures (Farrell, 2021; Soldatic, Sullivan, Coe, et al., 2023). Their resilience is grounded not only in individual strength, but in culture, kinship, collective care, and intergenerational knowledge.

Connection to culture is frequently cited as a key source of strength and resilience against the impacts of racism and queerphobia (Soldatic et al., 2020, 2021). Some participants in the Walkern Katatdjin study described how reconnecting with cultural understandings of sexuality and gender diversity - including historical roles in kinship systems, caregiving, and ceremony - provided affirmation (Liddelow-Hunt et al., 2021). Despite colonialism's ongoing disruption of these cultural frameworks many First Nations LGBTIQA+SB people continue to navigate respectful and innovative ways to connect with culture while living in an affirming way. Some participants identified the challenges of navigating cultural spaces, such as how to apply avoidance rules (kinship-based protocols governing contact and communications between relatives) to same-gender relationships, or how to access men's and women's spaces as trans or non-binary people. But many described receiving support from family, Elders, and community in negotiating these complexities, and some expressed a desire to become Elders themselves to strengthen community understanding and acceptance (Liddelow-Hunt et al., 2021).

Importantly, First Nations LGBTIQA+SB people have highlighted that acceptance, norms, and cultural practices, such as gender roles in community and ceremony, vary across communities and Countries (Carlson et al., 2024). These differences reinforce the need for localised, culturally specific approaches to supporting gender and sexuality diversity. First Nations LGBTIQA+SB people have emphasised the importance of learning and respecting the cultural views of sexuality and gender diversity that are specific to Country and community (Liddelow-Hunt et al., 2021).

An intersectional approach to preventing sexual violence must centre not only the compounding effects colonialism, but also the unique strengths, agency, and knowledge of First Nations LGBTIQA+SB people. Supporting this community's leadership, self-

determination, and cultural connection is not only essential to the prevention of violence, but to their overall social and emotional well-being.

4. What works in primary prevention of sexual violence

Preventing sexual violence in First Nations LGBTIQA+ communities requires addressing the intersecting and compounding drivers and reinforcing factors that underpin it. However, as highlighted in preceding sections, there is limited formally published literature about how the unique drivers affecting First Nations and LGBTIQA+ people compound to increase risk of violence. Despite both groups being consistently recognised as priority populations in this area (Commonwealth of Australia, 2023; QTWAV and LGBTI Legal Service, 2024), there remains no published evidence base or best practice framework for primary prevention specific to First Nations LGBTIQA+SB communities in Australia (Carlson et al., 2024; Filev et al., 2022; Queensland Centre for Domestic and Family Violence Research, 2019).

Mainstream primary prevention strategies demonstrate the effectiveness of a strong gender-transformative approach implemented across relational, family, community, and institutional levels (The Equality Institute, 2016). However, these approaches fail to recognise or respond to the structural, cultural, and historical factors that compound to uniquely affect First Nations LGBTIQA+SB people. Mainstream prevention frameworks overlook the impacts of colonialism, systemic racism, and trauma that drive violence against First Nations communities. This has resulted in underinvestment in culturally specific, community-led prevention initiatives that address these foundational issues (Filev et al., 2022; Keddie et al., 2024). Likewise, LGBTIQA+ people are often excluded from mainstream prevention strategies due to heteronormative assumptions that frame violence only as perpetrated by cisgender men against cisgender women (The Equality Institute, 2016). These frameworks rarely, if ever, account for the complex ways violence is experienced by First Nations, LGBTIQA+, and First Nations LGBTIQA+ people.

The evidence base tailored to First Nations LGBTIQA+SB communities is still in very early stages. This report set out to review the existing literature on what works for primary

prevention of sexual violence in First Nations, LGBTIQA+, and First Nations LGBTIQA+SB communities. During the review it became apparent that there was little published evidence of widely implemented or rigorously evaluated primary prevention initiatives for these communities. Where reference to prevention initiatives did exist in the published literature they were either not specific to sexual violence, not specific to these communities, or not formally evaluated. Crucially, this does not mean that prevention work is not happening - it is – however existing work is grassroots, community-led, under-resourced and not formally documented or evaluated in ways that mainstream systems recognise (2Spirits, 2024; Carlson et al., 2024; Carman et al., 2020; Filev et al., 2022; KPMG & Black Rainbow, 2022; Lusby et al., 2022).

What was available in the published literature was agreement on the guiding principles for sexual violence prevention work, drawn from the knowledge of communities, professionals and academics. The following sections outline these principles in First Nations and LGBTIQA+ contexts, aiming to inform the development of culturally responsive, inclusive, and effective sexual violence prevention frameworks and strategies for First Nations LGBTIQA+SB communities.

4.1. First Nations communities

4.1.1. Community owned, driven, and led

Community ownership, control, and self-determination are essential to the success of primary prevention initiatives in First Nations communities (Closing the Gap Clearinghouse, 2016; Keddie et al., 2024; Our Watch, 2018). Prevention strategies should be driven by local communities; address community-identified needs, priorities, and solutions; and be delivered by community-controlled organisations (Cripps & Adams, 2014; Our Watch, 2018a; The Healing Foundation, 2017). These community organisations are best positioned to deliver culturally safe, strengths-based, and trauma-informed prevention responses (Our Watch, 2018a; The Equality Institute, 2016). Where no suitable organisations exist yet, building the capacity of existing community structures and establishing partnerships is a priority.

Community-led prevention recognises that First Nations people are the experts in their own lives and respects their knowledge, authority, and capacity to lead transformative change (Tangentyere Council, 2019). This approach must be prioritised over externally imposed models that often fail to reflect community realities, needs, or values.

It is critical to acknowledge that First Nations communities are already engaged in substantial violence prevention work, often unsupported by funding or partnerships (Carlson et al., 2024; Filev et al., 2022; Guthrie et al., 2020; Morley, 2015). These grassroots and informal initiatives have far greater success than what is reported, evaluated, or funded (Carlson et al., 2024). Many communities maintain cultural governance systems that actively challenge the normalisation of violence and offer holistic, community-led approaches to healing and prevention (Keddie et al., 2024).

Australian governments must acknowledge their role in the violence caused and perpetuated by colonialism and prioritise supporting the self-determined prevention efforts already underway in First Nations communities. This includes investing in local initiatives, strengthening existing governance structures, and ensuring the genuine involvement of First Nations people, especially women and LGBTIQA+SB people, in decision making and development of national and regional prevention policy (Carlson et al., 2024; Keddie et al., 2024; Our Watch, 2018a).

4.1.2. Whole of system approach

While community-driven prevention is essential, the responsibility for preventing sexual violence in First Nations communities must not rest solely with First Nations people and organisations. Given the central roles of colonialism, racism, and systemic inequality in driving sexual violence, prevention must involve coordinated efforts from all levels of government, non-government organisations, and non-Indigenous communities and organisations (Our Watch, 2018a).

There is a need to fundamentally transform how mainstream and government sectors engage with First Nations peoples to do prevention work (Commonwealth of Australia, 2023; Filev et al., 2022; Our Watch, 2018). Without significant reform, mainstream sexual violence prevention strategies, from policy to service delivery, risk perpetuating harm. These approaches fail to address the root causes of violence and instead reproduce the systems and structures that perpetuate it (Commonwealth of Australia, 2023; Filev et al., 2022).

Effective prevention work has been hindered by systemic barriers including 'siloed' approaches among mainstream agencies (Blagg et al., 2018; Cripps & Adams, 2014), cultural mismatches between government frameworks and First Nations worldviews (Keddie et al., 2024), and the chronic lack of long-term, flexible, and responsive funding (Blagg et al., 2020; Filev et al., 2022; Vukovic, 2023). These limitations fail to account for the holistic nature of First Nations prevention and healing and First Nations ways of knowing what works and restrict the ability of organisations to respond in ways that are locally relevant and culturally safe.

Transformative change must occur at every level of the system. This includes eliminating institutional racism, embedding cultural safety across all sectors, and forming genuine partnerships with First Nations people and organisations (Carlson et al., 2024; Closing the Gap, 2020; The Healing Foundation, 2017). It begins with recognition of the unique drivers of sexual violence in First Nations communities, deep listening to community voices, accountability and transparency, and commitment to privileging First Nations knowledge systems in both evidence and practice (Carlson et al., 2024; Guthrie et al., 2020; Keddie et al., 2024).

4.1.3. Address the compounding systemic drivers through a decolonising approach

Preventing sexual violence in First Nations communities requires moving beyond Western-centric frameworks of gendered violence and addressing the compounding systemic drivers that underpin violence. These include the ongoing impacts of colonialism, systemic racism

and discrimination, intergenerational trauma, and overlapping and accumulative forms of oppression that collectively increase vulnerability to violence.

A decolonising approach recognises colonialism is an ongoing structure not a historical event (McKinnon, 2020). It calls for active efforts to dismantle the racist, gendered attitudes, social norms, laws, and institutional practices that drive and condone violence against First Nations people (Carlson et al., 2024; Dudgeon et al., 2010; Our Watch, 2018a). This approach requires all people - especially white Australians - to critically examine their worldviews, interrogate assumptions, and reflect on how colonialism continues to shape societal structures and individual beliefs (Dudgeon & Walker, 2015; Sherwood & Edwards, 2006).

Central to a decolonising approach is the elevation of First Nations knowledge systems, cultural strengths, and the diverse voices and experiences of communities across the country and dismantling of harmful structures that embed cycles of violence including carceral systems and punitive responses (Carlson et al., 2024; Our Watch, 2018a; Tangentyere Council, 2019). This approach also requires rethinking and re-educating the public on the true drivers of sexual violence and challenging harmful myths and stereotypes that pathologise and blame First Nations communities.

4.1.4. Culturally appropriate design and implementation

The design and implementation of prevention strategies must be culturally safe - this means creating 'an environment that is safe for people, where there is no assault, challenge or denial of their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience, of learning, living and working together with dignity, and truly listening' (Williams, 1999). First Nations people must be prioritised as authorities on their own lives and experiences throughout the prevention process.

Integral to preventing violence is prioritising and strengthening First Nations capacity to lead and care for their own communities including facilitating intergenerational transfer of culture and traditions of governance. Stronger connections to Country and community

foster stronger individual and collective identities, self-esteem, resilience, and improved outcomes across various determinants of health - including community safety (State of Victoria, 2017). A strengths-based approach recognises both the trauma and marginalisation faced by First Nations peoples and the protective factors and strengths within their cultures and communities, their profound knowledge of healing, and their capacity to lead transformative change (Dudgeon et al., 2014; Keddie et al., 2024).

Effective, strengths-based prevention activities should defer to First Nations peoples, support community-led initiatives, centre cultural knowledge and practices, honour kinship systems, and address systemic inequities (Fogarty et al., 2018; Guthrie et al., 2020; Keddie et al., 2024). Genuine relationships with communities must be prioritised and built over time.

Non-First Nations organisations engaged in prevention must also build their own cultural competence. Providing cultural safety means recognising that its meaning and application vary for each individual and community, and that its definition must be determined by First Nations people themselves (Our Watch, 2018a).

4.1.5. Primary prevention is trauma-informed, healing-informed, and holistic

First Nations approaches to preventing sexual violence differ from mainstream models that primarily focus on gender inequality and treat individuals, women, men, and young people, in isolation. Instead, First Nations frameworks address the holistic impacts of colonialism, systemic racism, and intergenerational and collective trauma on individuals, families, and communities. Healing from these compounding drivers of violence is critical to breaking the cycle.

Prevention strategies based on First Nations worldviews are holistic - they recognise the interconnectedness of social, emotional, and cultural well-being, and acknowledge that individual well-being cannot be separated from community well-being (The Healing Foundation, 2017). As such, prevention must extend beyond violence-specific interventions

to address the broader determinants of healing and wellbeing for First Nations people (Our Watch, 2018a).

The knowledge and practices for healing lay with First Nations peoples themselves (Guthrie et al., 2020; The Healing Foundation, 2017). Culturally based, community-led healing programs have demonstrated good outcomes (Dudgeon et al., 2014). Sexual violence prevention strategies that are strengths-based and owned and led by community, are more likely to support healing and break cycles of trauma and violence (The Healing Foundation, 2017).

In contrast to Western, individualised models of trauma recovery, First Nations healing is collective - rooted in the reconnection of individuals, families, and communities with cultural values and practices, kinship roles, and community responsibilities. These are vital protective factors against violence (J. Atkinson & Woods, 2008; The Healing Foundation, 2017). First Nations women express different needs than mainstream services provide - many do not want to leave their family or community, and many seek healing for the perpetrator rather than exclusion or punishment (Olsen & Lovett, 2016). Therefore, prevention should aim to strengthen connections to culture, Country, and community in locally relevant and meaningful ways them (Cripps & Davis, 2012; Keddie et al., 2024; Our Watch, 2018a; The Healing Foundation, 2017). This necessitates a shift away from punitive, criminal justice-focused responses to violence, towards healing-centred, community-based approaches that prioritise violence prevention (Blagg et al., 2020; The Healing Foundation, 2017).

There is strong advocacy in the literature that in order to break the cycle of intergenerational trauma and violence, healing must occur not only for victim-survivors, but also for those who have used violence (Blagg et al., 2018; Carlson et al., 2021, 2024; Closing the Gap Clearinghouse, 2016; Cripps & Davis, 2012; Our Watch, 2018b; The Healing Foundation, 2017). Prevention must engage entire communities, including adults, young people, and children of all genders, and requires participation from broader society in Australia (Our Watch, 2018a). A healing-based approach to sexual violence prevention

addresses root causes, not just symptoms, by confronting structural drivers such as racism, sexism, and colonialism in the whole population (Filev et al., 2022).

Trauma-informed, healing based, holistic prevention acknowledges that healing is a long-term, dynamic process that varies across individuals and communities (Cripps & Davis, 2012; Keddie, 2023; Our Watch, 2018a; The Healing Foundation, 2017). Place-based strategies must respect the varied cultural protocols, relationship dynamics, meanings and experiences, and localised drivers and manifestations of violence of each community (Blagg et al., 2018; Our Watch, 2018a).

4.1.6. Improved data collection and evaluation

The National Aboriginal and Torres Strait Islander Action Plan calls for greater investment and improved methodologies to understand the compounding drivers of sexual violence, and to evaluate the programs, policies, and legislation that aim to prevent and respond to sexual violence in First Nations communities (Commonwealth of Australia, 2023). Supporting First Nations organisations to lead research and evaluation requires long-term, flexible funding that can sustain holistic, community-led approaches and enable tracking of progress over time (Filev et al., 2022; The Equality Institute, 2016). Central to this work is the principle of First Nations data sovereignty and governance, which is critical for self-determination and for developing effective, culturally appropriate prevention strategies (Filev et al., 2022).

Mainstream organisations that partner with First Nations communities and organisations must build their competence in research methodologies that reflect First Nations ways of knowing, doing, and being (Bowrey et al., 2022; Sharmil et al., 2021). Western research frameworks - where (typically white) 'expert' researchers determine what data is collected and prioritised - reinforce harmful power differentials and perpetuate colonial dynamics (Rigney, 1999; Sherwood, 2010). Such approaches have historically caused harm and continue to do so when they fail to recognise First Nations people as the experts in their own experiences. Further, mainstream evaluation methods often overlook the holistic dimensions of healing and wellbeing for First Nations peoples, including connection to

Country, community, self-determination, and empowerment (Filev et al., 2022). Evaluations must shift from deficit-based frameworks to measure culturally grounded, locally meaningful, holistic, and strengths-based outcomes.

Indigenous methodologies such as *yarning* have been identified as effective in First Nations research. Yarning prioritises relationship-building and cultural protocols, providing the flexibility needed to engage meaningfully with diverse and unique communities (Bessarab & Ng'andu, 2010; D'Antoine et al., 2019; M. Kennedy et al., 2022). *Dadirri*, the practice of deep listening and respectful, reciprocal communication embedded in First Nations cultures, is also valuable to facilitate genuine understanding of community experiences and priorities (J. Atkinson, 2002b). However, these are only two possible methodologies and where possible, it is always preferred that research is conducted by First Nations peoples themselves.

Cultural diversity across First Nations communities should be respected through place-based data collection. Aggregated data can then be used to strengthen the national evidence base for best practice while maintaining the integrity and distinctiveness of local experiences (Our Watch, 2018a; The Equality Institute, 2016). First Nations LGBTIQA+SB and people with disability are underrepresented in current datasets. Greater inclusion of First Nations LGBTIQA+SB people, people with disability, and other minority groups is essential to improving understanding of how compounding drivers shape experiences of sexual violence (Filev et al., 2022).

4.2. LGBTIQA+ communities

4.2.1. Address the systemic and intersecting drivers of sexual violence

Preventing sexual violence against LGBTIQA+ people requires sustained and systemic transformation across all levels of society. This includes challenging cisnormativity, heteronormativity, and the structural conditions that perpetuate harmful stereotypes, condone violence, and marginalise LGBTIQA+ people (Carman et al., 2020; Our Watch & GLHV, 2017). Structural reforms to policy, legislation, and institutions, along with public

campaigns promoting acceptance and celebrating sexual and gender diversity, are critical (Layard et al., 2022; Our Watch & GLHV, 2017).

Prevention strategies must go beyond inclusion to actively dismantle systems of oppression. This can include anti-oppression education and campaigns that challenge the norms and attitudes that contribute to stigma and violence. Integrating these efforts into mainstream prevention strategies that address gender inequality offers a pathway for immediate action (Blackburn et al., 2024; Carman et al., 2020; Lusby et al., 2022). Evidence for effective anti-homophobia and anti-transphobia prevention programs in Australia are limited, however international examples demonstrate promising outcomes and highlight the need for political will, investment, and community support to develop and evaluate such programs in Australia (Blackburn et al., 2024; Carman et al., 2020; Our Watch & GLHV, 2017).

Prevention efforts must change attitudes within the broader Australian population and within the LGBTIQA+ community. National surveys show that while LGBTIQA+ communities tend to reject gender inequality and violence at higher rates than the broader population, recognition of violence within LGBTIQA+ relationships remains low (Bourne et al., 2023; Coumarelos et al., 2023). Initiatives must also address the underlying determinants of vulnerability, such as disparities in health, safety, economic security, and social and emotional wellbeing, which heighten risk of violence for LGBTIQA+ people (Simpson et al., 2024).

Prevention initiatives must acknowledge and respond to the diversity within the LGBTIQA+ community, recognising the additional layers of oppression faced by people who are also impacted by racism, ableism, ageism, or other forms of discrimination (Gray et al., 2020; Lusby et al., 2022; Our Watch & GLHV, 2017). Rather than focusing solely on identities, prevention work must target the structural and systemic forces that oppress and exclude (Our Watch & GLHV, 2017). While tailoring prevention activities to different subgroups within LGBTIQA+ communities is important, community members have made clear that immediate, targeted action must not be delayed (Gray et al., 2020). Initial prevention efforts should create spaces that amplify the diverse voices and strengths within LGBTIQA+ communities.

4.2.2. Community led and driven

Primary prevention strategies must be community-driven, co-designed, and foster the leadership of LGBTIQA+ people throughout all stages of planning, implementation, and evaluation (Our Watch & GLHV, 2017; The Equality Institute, 2016). Embedding the voices, experiences, and leadership of LGBTIQA+ communities will ensure that prevention efforts reflect their lived experience, are culturally relevant, and build awareness and capacity within the community (Carman et al., 2022; Our Watch & GLHV, 2017). Co-design is critical to protect against unintended harms in government-funded or mainstream prevention activities, contexts in which LGBTIQA+ communities have historically experienced power imbalances, exclusion, and discrimination (Carman et al., 2022).

Building strong partnerships between LGBTIQA+ organisations and mainstream organisations working on prevention of violence against women is essential (Carman et al., 2022). There is significant expertise within the community and LGBTIQA+ organisations have already been highly successful in transforming community attitudes around health, human rights, myths, and stigma (Carman et al., 2022; Gray et al., 2020). Combining this expertise with the reach, resources, and momentum of mainstream prevention efforts will maximise the effectiveness, inclusiveness, and sustainability of violence prevention for LGBTIQA+ communities (Our Watch & GLHV, 2017).

4.2.3. Expand existing gender-transformative approaches

Partnerships and inclusion of LGBTIQA+ people's needs in gender-transformative prevention requires an expansion and broadening of the 'gender-lens' (Carman et al., 2020; Lusby et al., 2022). Mainstream framings of sexual violence as violence by men against women exclude the lived experiences of sexuality and gender-diverse people. An inclusive gender-transformative approach acknowledges the connection between rigid gender norms, cisnormativity, and heteronormativity, and gendered violence, and recognises the need to address homophobia, biphobia, transphobia and endosexism (Carman et al., 2020).

In practice, this requires partnerships between LGBTIQA+ and mainstream organisations to co-develop shared messaging, resources, and initiatives (Carman et al., 2020). Existing prevention initiatives such as respectful relationships education, bystander intervention training, and community mobilisation efforts, are well positioned for expansion to include healthy relationships between people of all genders and sexualities, and to include recognition of heterosexism, homophobia, and transphobia as violence (Our Watch & GLHV, 2017; The Equality Institute, 2016).

Expanding and collaborating on these initiatives must also involve thoughtful management of potential sources of resistance. Common concerns about LGBTIQA+ inclusion from mainstream organisations include - diluting the focus on gendered drivers of violence against women; undermining the experiences of women or work of women's movements; or competing for resources (Lusby et al., 2022). Addressing these concerns requires broadening awareness beyond the binary gender framework and highlighting the common drivers of gendered power dynamics and cisheteronormativity in violence against both women and gender- and sexuality-diverse people (Lusby et al., 2022). It also requires direct and targeted funding for LGBTIQA+ inclusion to address the current competition for resources.

4.2.4. Inclusion and visibility

Heteronormative biases in research, advocacy, policy, and service provision are a driver of sexual violence in LGBTIQA+ communities and a target for primary prevention. While a number of policy and legislative changes at state and federal levels have been made over recent years, vague policy recognition and direction regarding LGBTIQA+ inclusivity persists in the violence prevention field and limits resourcing and prioritisation of services for the community (Lim et al., 2024; Lusby et al., 2022; Our Watch & GLHV, 2017).

Despite superficial recognition of the LGBTIQA+ community as a priority cohort in recent policies and plans to prevent violence, service providers report a lack of clarity to make funding decisions and uncertainty about whether LGBTIQA+ people fit within their scope (Lim et al., 2024; Lusby et al., 2022; Our Watch & GLHV, 2017; QTWAV and LGBTI Legal

Service, 2024; Queensland Council for LGBTI Health, 2020). The lack of consistent, standardised, and inclusive language across government's policies contributes to this - it is often unclear whether LGBTIQA+ people (particularly those who do not identify as women) will be included in service resourcing and provision (Queensland Council for LGBTI Health, 2020). It has been recommended that prevention of sexual violence in LGBTIQA+ requires clear and specific inclusion within national violence prevention frameworks (Carman et al., 2020; QTWAV and LGBTI Legal Service, 2024) and/or a dedicated national plan for the prevention of violence in LGBTQIA+ communities in Australia (Lusby et al., 2022).

4.2.5. Culturally safe and trauma-informed

The lack of visibility, inclusivity, and clarity regarding LGBTIQA+ communities in policy creates confusion and conflict in the sexual violence service sector. As a result, LGBTIQA+ people continue to experience discrimination, misunderstanding, and missed opportunities to recognise or address violence when they access services (Lusby et al., 2022). There is a persistent and systemic exclusion of transgender women from sexual and family violence services (Calton et al., 2015; Lusby et al., 2022). Access is frequently denied due to discriminatory judgements based on appearance, cisnormative expectations of femininity, and medical transition, and this disproportionately affects Sistergirls (Carlson et al. 2024).

Sexual violence prevention organisations need resourcing to increase their capacity, skills, awareness, and willingness to address sexual violence in LGBTIQA+ communities. This must involve prevention operations being trauma-informed and culturally safe for LGBTIQA+ people, recognising the significant harm that discrimination has already caused, and prevent re-enacting these harms (Lusby et al., 2022). Trauma-informed care means creating systems, environments, and relationships that makes LGBTIQA+ people feel safe and empowered, support their autonomy, and build trust (Lusby et al., 2022).

Cultural safety is a concept expanded from its origins in Maori communities, then First Nations Peoples of Australia, to application in the LGBTIQA+ community (Jones et al., 2020). Conceptualising LGBTIQA+ experiences as culture recognises that sexuality and gender permeate every aspect of LGBTIQA+ people's lives (Crameri et al., 2015). Culturally safe

prevention should be sensitive to and build awareness of how LGBTIQA+ histories, inequalities, and ongoing power imbalances impact the well-being of the community (Queensland Council for LGBTI Health, 2020). This necessitates prevention workers reflecting on their own values, beliefs, and privilege and how that impacts the work they do (Crameri et al., 2015).

LGBTIQA+ people have reported that a culturally safe environment is one where their identity is affirmed; they do not feel pressured to explain or educate others on their lived experiences; and their sexuality or gender does not negatively impact their care (Lusby et al., 2022). Cultural safety for LGBTIQA+ people must involve the recognition of intersecting identities, compounding inequalities and discrimination, in understanding the unique needs and strengths of individuals and communities (Jones et al., 2020).

4.2.6. Time and space for reflection, responsivity, and sustainability

Primary prevention of sexual violence in LGBTIQA+ communities is a long-term undertaking. The social conditions that drive sexual violence against these communities are deeply and systemically entrenched (Kwok et al., 2024). A key barrier to effective prevention for LGBTIQA+ communities is the under-resourcing for meaningful and effective long-term work to occur. Service providers have pointed out that funding for this area has been limited to small, token, and time-limited quantities, which do not allow adequate time to engage and consult with LGBTIQA+ community members, develop organisational partnerships, evaluate initiatives, engage in critical reflection, or address resistance from organisations or the wider community (Gray et al., 2020; Lim et al., 2024; Our Watch & GLHV, 2017).

Resistance against inclusion of LGBTIQA+ communities is in part, driven by the limited resourcing in the broader DFVS sector, with concerns from service providers that much-needed funding will be diverted away from women and children. Increasing resourcing for both mainstream and LGBTIQA+ sectors will alleviate some of the tension (Carman et al., 2022; Lim et al., 2024; Lusby et al., 2022).

4.2.7. Evidence-based and evidence-building

If there is a genuine will to prevent sexual violence in LGBTIQA+ communities in Australia, research on the experiences of sexual violence and evaluation of prevention initiatives needs significant investment. The cisheteronormative face of sexual violence research and services limits understanding of how sexual violence manifests in LGBTIQA+ communities. Only very recently has some population level data about the prevalence of sexual violence in LGBTIQA+ communities been available and there are significant missed opportunities in population level surveys that use binary frameworks for data collection on gender and sexuality that need to be addressed (Lusby et al., 2022). Empirical data is needed to facilitate deeper understanding of the common and unique drivers, risk, and protective factors for LGBTIQA+ communities compared to women and their children (Our Watch & GLHV, 2017). Particular attention to the role of intersecting forms of oppression such as racism and ableism, and to the experiences of trans, gender diverse, and intersex people is needed (Lusby et al., 2022).

This research will inform the development of evidence-based prevention initiatives, however the need for these initiatives is pressing and action should be taken now through collaboration between the LGBTIQA+ and mainstream sector whom both hold significant knowledge (Carman et al., 2020). Evidence can be built upon through reflexive prevention efforts and ongoing evaluation. LGBTIQA+ people must be included and involved planning, implementation, and evaluation prevention initiatives to maximise potential for success and minimise the potential for harm that has been caused by exclusion (Lusby et al., 2022; Our Watch & GLHV, 2017). Kwok et al., (2024) provide the following principles in the *Pride in Prevention Evaluation Guide*:

- Evaluations are framed in appropriate ways - recognising the long-term nature of this work, evaluations should measure the incremental contributors to long-term change.
- Evaluations are authentic collaborations between evaluators and those involved in the work.
- Evaluations are informed by histories - recognising the unique experiences and expertise of those engaged in the LGBTIQA+ rights movements as well as mainstream violence prevention.

- Evaluations (and evaluators) support social transformation and do not perpetuate harmful and rigid constructions of gender and sexuality that drive violence.
- Evaluations must affirm 'nothing about us without us' - LGBTIQA+ peoples voices and experiences must be centred throughout the process.

5. Prevention of sexual violence in First Nations LGBTIQA+SB communities

Unsurprisingly, there is no academically or governmentally published evidence base for what works for preventing sexual violence in First Nations LGBTIQA+SB communities. However, a growing body of academic and grey literature documents how First Nations LGBTIQA+SB people leverage culture, community support, and activism to resist the compounding impacts of colonialism, racism, and queerphobia. These communities are not just surviving but they are leading one of the longest-running movements resisting colonialism (KPMG & Black Rainbow, 2022). Their unique strengths and resilience are essential resources in preventing sexual violence and promoting community safety. Initiatives that strengthen the community's leadership, self-determination, well-being, and human rights is essential.

The following principles for prevention are based on the literature on suicide prevention, social emotional well-being, and human rights for First Nations LGBTIQA+SB communities, as well the literature on sexual violence prevention in First Nations and LGBTIQA+ communities.

5.1. Prevention approaches are owned, led, and driven by community

One of the clearest themes in the literature is the importance and power of community-led action. Sexual violence prevention must be informed, owned, and driven by First Nations LGBTIQA+SB people. These communities have long been at the forefront of designing solutions grounded in their lived experience and demonstrating a unique capacity for challenging discrimination and advocating for inclusion (B. Hill et al., 2021b, 2021a).

Community-led interventions are effective because they are guided by the deep expertise of lived experience and the mechanisms for surviving and thriving that inform effective solutions (KPMG & Black Rainbow, 2022). The suicide prevention and well-being literature reinforces the need for First Nations LGBTIQA+SB people to lead conversations on their communities' issues and needs, and to be meaningfully involved in design, implementation, and evaluation of research, policy, and programs (M. Day et al., 2022; KPMG & Black Rainbow, 2022). Community-led sexual violence prevention should aim to foster trust, relevance, and cultural safety, which can improve disclosure, early intervention, and community accountability, all critical to reducing sexual violence and its impacts (Barnes et al., 2024; Day et al., 2022; KPMG & Black Rainbow, 2022).

Despite being rendered invisible in policy, strategy, and population-based research, First Nations LGBTIQA+SB people refuse to be invisible in community or society (KPMG & Black Rainbow, 2022). They have a long history of successful, community-led advocacy work, promoting acceptance within their communities and wider society, and working with decision-makers to recognise their needs (Carlson et al., 2017; Farrell, 2021; KPMG & Black Rainbow, 2022). Examples of effective, community-led research demonstrate what is possible when community leadership is recognised and resourced (e.g. 2Spirits, 2024; Bonson, 2021b; B. Hill et al., 2021a, 2021b; KPMG & Black Rainbow, 2022; Liddelow-Hunt et al., 2021; C. Sullivan et al., 2021, 2023).

It is crucial that First Nations LGBTIQA+SB leaders, advocates, and activists are embedded across all levels of decision-making, from grassroots service delivery to policy and sector leadership (KPMG & Black Rainbow, 2022). This requires more First Nations LGBTIQA+SB people in government and policy roles, and within community controlled and LGBTIQA+ organisations. It also requires greater government commitment to resourcing culturally safe and inclusive services and organisations services across all sectors (Barnes et al., 2024; KPMG & Black Rainbow, 2022). Black Rainbow (2022) emphasises the importance of a two-way dialogue between First Nations LGBTIQA+SB communities and broader First Nations communities (including current and emerging elders), as well as the LGBTIQA+ community, to foster more widespread recognition and expand collective and cultural expertise.

5.2. Address the compounding systemic drivers of violence: Policy and structural change

Political will and visibility

Political will is a foundational precondition for the development and sustainability of violence prevention. Without meaningful recognition of First Nations LGBTIQA+SB people in national, state, and local policy frameworks, prevention efforts will remain underfunded, fragmented, and vulnerable to resistance from institutions and broader society (Fitz-Gibbon et al., 2022; Lim et al., 2024).

Political will must move beyond tokenistic recognition and translate into directed resourcing, research, strategic planning, and accountability mechanisms that explicitly address the compounding impacts of colonialism, racism, and cisheteronormativity on First Nations LGBTIQA+SB people's experiences of sexual violence (Carlson et al., 2024; Lim et al., 2024; QTWAV and LGBTI Legal Service, 2024). A genuine commitment to prevention requires centring self-determined leadership, embedding First Nations LGBTIQA+SB voices in decision-making, and resourcing long-term genuine partnerships. Without commitment to structural reforms, primary prevention efforts risk replicating the systemic marginalisation that enables sexual violence against First Nations LGBTIQA+SB people to persist.

The need for a specific and co-ordinated national response, involving all tiers of government and relevant agencies has been emphasised in suicide prevention, social and emotional well-being, and human rights contexts for First Nations LGBTIQA+SB people (M. Day et al., 2022; M. Day & Bonson, 2023; Filev et al., 2022; KPMG & Black Rainbow, 2022). This literature suggests a national framework for First Nations LGBTIQA+SB communities must:

- Be informed by a complex and nuanced understanding of the community's needs, including factors such as age, disability, incarceration, and geographical location.
- Include holistic and culturally grounded strategies that promote emotional wellbeing, cultural safety, and connection to community, culture, and Country.
- Include strategies to target racism, queerphobia, exclusion, and invisibility.

A dedicated national action plan, or at least more meaningful and directed inclusion in existing national frameworks, is essential to ensure long-term, consistent investment in culturally appropriate, trauma-informed, and effective violence prevention for First Nations LGBTIQA+SB communities.

Enhance governance and funding structures

First Nations LGBTIQA+SB people have tirelessly advocated and consulted with governments, and this must now be reciprocated with active investment in strategies that meet their needs (Carlson et al., 2024). First Nations LGBTIQA+SB people need to be embedded at all levels of decision-making to uphold self-determination and unsure that violence prevention initiatives culturally safe and community informed. Dedicated roles for the First Nations LGBTIQA+SB leaders must be created within advisory groups and steering committees for all policies and programs that impact them, ensuring that their expertise makes a material impact on policy and funding decisions (KPMG & Black Rainbow, 2022). Consistent and sustainable funding is required to build trust within the community, sustain effective partnerships, and evaluate initiatives in culturally relevant ways (2Spirits, 2024).

Improve culturally-safe service provision

There is a critical lack of culturally safe and inclusive services for First Nations LGBTIQA+SB people impacted by sexual violence (Barnes et al., 2024; Fitz-Gibbon et al., 2022). When services are culturally safe and affirming, First Nations LGBTIQA+SB people are more likely to report violence early and seek help and healing which can prevent further violence before it occurs (M. Day et al., 2022; KPMG & Black Rainbow, 2022). Increased resourcing must be directed to existing First Nations LGBTQSB+ organisations, and to the development of new organisations, programs, services, and partnerships (Barnes et al., 2024; B. Hill et al., 2021b, 2021a).

Across sectors, services must be resourced and trained to support First Nations LGBTIQA+SB clients and partner with community-controlled organisations. This includes a) building capacity of First Nations organisations to support LGBTIQA+SB clients; b) building capacity of LGBTIQA+ and mainstream services to support First Nations clients; c) employing First Nations LGBTIQA+SB staff and d) embedding community leadership (M. Day et al., 2022).

First Nations LGBTIQA+SB specific cultural competency training should be made mandatory across the service sector (Hill et al., 2021b). Training should provide practical guidance on respectful communication and identity affirmation, be delivered in multiple accessible formats, and address colonial violence, racism, and queerphobia (Carlson et al., 2024; B. Hill et al., 2021a). Furthermore, services must be resourced and incentivised to reflect on and adopt policies and procedures that challenge discriminatory structures to enable support of First Nations LGBTIQA+SB clients (Uink et al., 2020, 2024).

5.3. Address the compounding systemic drivers of violence: Changing discriminatory attitudes

Sexual violence prevention requires educational and social awareness initiatives that address the compounded colonialism that affects First Nations LGBTIQA+SB people. This means addressing and transforming racist, homophobic, and transphobic discrimination, attitudes, and norms across all communities in Australia.

Within First Nations communities

First Nations LGBTIQA+SB people frequently experience homophobia and transphobia within First Nations communities (Amos et al., 2023). First Nations communities endorse cisheteronormative beliefs and gender stereotypes at rates at least on par with the general Australian population (Coumarelos et al., 2023, 2024; Cripps et al., 2019) but negative narratives about LGBTIQA+SB people in First Nations communities are a direct result of colonialism.

A decolonising and expansive anti-racist approach recognises that colonial violence aimed to delegitimise and erase diverse First Nations LGBTIQA+SB people to maintain gender norms and a racial hierarchy (Uink et al., 2024). Resistance to colonial cisheteronormative structures through LGBTIQA+ inclusion and anti-discrimination is key to protecting First Nations LGBTIQA+SB from violence. This approach should include education on how colonialism impacts gender roles, especially masculinities, and the ways that this drives violence (The Healing Foundation, 2017). Importantly, this approach is likely to be highly

ineffective and potentially harmful unless it is developed, led, and delivered by First Nations peoples and organisations at every stage.

The *Dalarinji: Your Story* project provides a strong community-led model for culturally and sexuality/gender-appropriate social change initiatives (Soldatic et al., 2020; C. Sullivan et al., 2021). The First Nations LGBTIQA+SB participants in this project expressed a need for:

- Community-led education initiatives that acknowledge and celebrate the historical presence of gender and sexuality diversity within First Nations cultures.
- Co-designed community-based programs to build understanding, acceptance, and pride of diverse identities.
- The establishment of visible, culturally affirming spaces and events for First Nations LGBTIQA+ peoples.
- Strengthening the role of Elders, families, and community organisations in fostering intergenerational dialogue, healing, and support systems.
- Strong partnerships between Elders, First Nations LGBTIQA+SB subject matter experts, and community leaders.

These strategies both challenge discrimination and reinforce protective factors such as belonging, culture, and community connectedness, all factors associated with reduced vulnerability to violence (Carlson et al., 2024; KPMG & Black Rainbow, 2022). Strong, informed communities can challenge harmful behaviours, build localised responses, and intervene in violence early. The involvement of Elders and community leaders ensures that programs are grounded in cultural knowledge and community values, enhancing their effectiveness and sustainability (KPMG & Black Rainbow, 2022; C. Sullivan et al., 2021).

Across non-First Nations and LGBTIQA+ communities

First Nations LGBTIQA+SB people also experience cisheteronormative and racist discrimination from the wider Australian community and within LGBTIQA+ communities. While First Nations LGBTIQA+SB people are fierce advocates and protectors of their communities, they have reported instances of being deterred from intervening in violence due to fears for their own safety (Salter et al., 2024b). This underscores the need for broader anti-racism and anti-discrimination campaigns as well as social awareness

campaigns that promote visibility, acceptance, and celebration of First Nations LGBTIQA+SB people (B. Hill et al., 2021b; Liddelow-Hunt et al., 2021; Soldatic et al., 2020; C. T. Sullivan et al., 2022). These campaigns must be informed and co-designed by First Nations LGBTIQA+SB people and prioritised in national policy and funding for violence prevention (M. Day & Bonson, 2023).

Educational campaigns and school-based programs must be co-designed with First Nations LGBTIQA+SB people and target all levels of society. Research shows that school and university-based gendered violence prevention programs are both effective (Crooks et al., 2019; Flood et al., 2009; Gleeson et al., 2015; Queensland Centre for Domestic and Family Violence Research, 2019; Urbis & Milward, 2023), and welcomed by First Nations LGBTIQA+SB young people (C. Sullivan et al., 2021; C. T. Sullivan et al., 2022). However, there remains a critical gap in culturally and sexuality/gender-appropriate resources and education for First Nations LGBTIQA+SB students (2Spirits, 2024; Liddelow-Hunt et al., 2021).

Educational strategies must address myths about sexual violence, promote bystander action, increase recognition of abuse, and foster understanding of healthy and respectful relationships as they specifically apply to First Nations LGBTIQA+SB people (2Spirits, 2024; B. Hill et al., 2021a; Salter et al., 2024b). These strategies need to be designed by and for First Nations LGBTIQA+SB people and their broader communities (C. Sullivan et al., 2021) and must offer alternatives to incarceration and criminalisation and promote community restoration (Carlson et al 2022).

5.4. Culturally safe design and implementation

Culturally safe prevention initiatives are vital to building trust, access, and meaningful engagement with community. Themes from the literature on cultural safety as defined by First Nations LGBTIQA+SB follow:

Holistic identity recognition

First Nations LGBTIQA+SB people have described cultural safety as being recognised and respected for the whole of their intersecting identity: 'where you can be your whole self, with no kind of like, holding back or no shame' (Soldatic, Sullivan, Coe, et al., 2023, p. 8). This means initiatives must not compartmentalise identities but affirm and celebrate members of the community as their whole selves (Briskman et al., 2022; C. Sullivan et al., 2021)

Cultural humility: Address compounding structural oppression

Sexual violence prevention must go beyond superficial inclusion and address compounding oppression from colonialism, racism, cisheteronormativity, that increase the risk of sexual violence for First Nations LGBTIQA+SB people. Dalarinji participants suggest 'cultural humility' - an approach that actively challenges the imbalance of privilege and power associated with 'cultural competence' (Bennett & Gates, 2019; Briskman et al., 2022). Cultural humility requires workers to 'critically interrogate & proactively engage with institutionalised white privilege, fragility & white supremacy,' and set up policies, processes, and accountability mechanisms to address it (C. Sullivan et al., 2021, p. 27). Dalarinji participants suggested rethinking Western worldviews, labels, and concepts such as 'coming out' and emphasised the need for understanding that the difficulties they experience are not because of their identities, but because of the accumulative oppressions they face (C. Sullivan et al., 2021). Fostering cultural humility and allyship involves workers being open to discomfort, making mistakes, giving and receiving feedback, and honest reflection about bias and privilege (2Spirits, 2024).

Connection to Culture, Country, and Community

Culturally safe approaches are those grounded in First Nations worldviews, which centre kinship, Country, cultural protocols, and connection to Elders. Services and programs that are led by community, based on local knowledges, respect local cultural protocols, and engage Elders are seen as inherently safer and more accessible (M. Day et al., 2022; KPMG & Black Rainbow, 2022; Liddelow-Hunt et al., 2021; Spurway et al., 2023; C. Sullivan et al., 2021; C. T. Sullivan et al., 2022).

Protection from shame and intercommunity violence

A common barrier to feeling culturally safe identified by First Nations LGBTIQA+SB participants was the presence of shame, judgement, and intercommunity violence (Carlson et al., 2021; Soldatic et al., 2020). The concept of shame is culturally specific for First Nations people and can often be associated with breaking cultural norms or protocols (Louth, 2017). Prevention programs must be sensitive to cultural norms around community privacy, fears of 'shaming the community' when speaking to outsiders, and the shame of engaging with formal systems which have historically caused further violence and injustice when harm is disclosed (Carlson et al., 2021; Filev et al., 2022; Queensland Centre for Domestic and Family Violence Research, 2019; Soldatic, Sullivan, Briskman, et al., 2023).

Self-determination

Self-determination is fundamental to cultural safety (KPMG & Black Rainbow, 2022). Prevention initiatives must be designed, delivered, and evaluated by First Nations LGBTIQA+SB people where possible and done in collaboration as equal partners if necessary (Bonson, 2021a; M. Day et al., 2022). Programs that are externally imposed without meaningful representation or shared decision-making perpetuate colonial harms.

Genuine and affirming representation

Cultural safety is supported when community members see themselves reflected in service design, staffing, leadership, and public messaging (Briskman et al., 2022; Liddelow-Hunt et al., 2023; C. Sullivan et al., 2021). First Nations LGBTIQA+SB people must be visible in policy, practice, and communications (Soldatic, Sullivan, Coe, et al., 2023).

Trauma-informed, holistic, and strengths-based

Culturally safe education and prevention programs must be trauma-informed, acknowledging the impact of intergenerational trauma and the protective role of culture (M. Day et al., 2022). They must be strengths-based, celebrating the resilience, leadership, and cultural roles of First Nations LGBTIQA+SB people rather than framing them solely as vulnerable or at risk (KPMG & Black Rainbow, 2022; C. Sullivan et al., 2021; C. T. Sullivan et al., 2022). Initiatives should not just be about sexual violence, but holistically strengthening well-being and resilience of the community, and acceptance and inclusion within the whole-population.

Cultural safety is a dynamic process

First Nations LGBTIQA+SB people have highlighted that cultural safety is not a fixed outcome or tick-box, but a dynamic and relational practice that requires ongoing self-reflection, adaptation, and accountability from individuals, services, and systems (KPMG & Black Rainbow, 2022). Cultural safety must evolve in response to the diversity and changeability of community needs, social conditions, and political contexts. This requires a two-way dialogue, transparent mechanisms for feedback, and active engagement with transforming power imbalances (KPMG & Black Rainbow, 2022; C. Sullivan et al., 2021).

5.5. Visibility and celebration

The importance of visibility has been consistently highlighted across all areas of violence prevention - visibility is crucial to governance, decision-making, education and awareness campaigns, cultural safety, and holistic well-being. A strong theme from community voices in the literature was the importance of going beyond visibility and moving towards *celebration* of First Nations LGBTIQA+SB people (2Spirits, 2024; B. Hill et al., 2021a; KPMG & Black Rainbow, 2022; Liddelow-Hunt et al., 2023; Soldatic et al., 2020; C. Sullivan et al., 2021, 2023; C. T. Sullivan et al., 2022).

First Nations LGBTIQA+SB have described the positive impact of representation in their communities, services, and media on their well-being and identity (KPMG & Black Rainbow, 2022; Liddelow-Hunt et al., 2021; O'Sullivan, 2021a; Soldatic et al., 2020). Even further, they have emphasised visibility as an avenue for awareness and education that can reduce intentional and unintentional homophobia, transphobia, and racism (Liddelow-Hunt et al., 2021). They reported that proud and positive media representations and seeing First Nations LGBTIQA+SB people in community, education, and service settings, helps reduce the work of explaining or educating others, normalises and reduces stigma around First Nations LGBTIQA+SB identities, and promotes acceptance and reassurance for their families (Liddelow-Hunt et al., 2021).

Many First Nations LGBTIQA+SB people value signs and symbols of inclusion such as Aboriginal and Torres Strait Islander and Rainbow flags, LGBTIQA+SB stickers, acknowledgement of Country, and culturally safe and affirming terminology (Briskman et al., 2022; B. Hill et al., 2021a; C. Sullivan et al., 2021). However, it has also been acknowledged that these signs can feel tokenistic unless backed by genuinely culturally safe experiences (2Spirits, 2024; Liddelow-Hunt et al., 2023; Soldatic, Sullivan, Briskman, et al., 2023).

5.6. Strengthen protective factors and community resilience

Strengthen cultural protective factors

Connection to Culture, Country, and kinship is a key source of strength for First Nations LGBTIQA+SB people, and sustains resistance against the harms of colonial, racist, and queerphobic violence (Liddelow-Hunt et al., 2021, 2023; Soldatic et al., 2020, 2021; Soldatic, Sullivan, Briskman, et al., 2023). Cultural acceptance and a sense of belonging in community supports self-esteem and pride which can counteract the isolation, shame, and power imbalances that perpetrators often exploit (Liddelow-Hunt et al., 2021, 2023; Soldatic et al., 2020; C. Sullivan et al., 2021).

Prevention initiatives that facilitate family and community acceptance and allyship support healing and safety, and challenge violence enabling norms and discrimination. Cultural practices have been described by survivors as crucial to healing, safety, and cultural identity (Barnes et al., 2024; Soldatic, Sullivan, Briskman, et al., 2023). Elders and community leaders need to be engaged to guide cultural healing in affirming, inclusive ways (2Spirits, 2024; Liddelow-Hunt et al., 2021). These practices not only support recovery from violence but are essential for breaking intergenerational cycles of harm and preventing future violence (Guthrie et al., 2020; The Healing Foundation, 2017).

Young First Nations LGBTIQA+SB people have expressed the need for more opportunities to connect with each other and build community (Liddelow-Hunt et al., 2021). They have also called for stronger anti-racism initiatives in LGBTIQA+ spaces, greater visibility of First Nations queer people, and explicit inclusion efforts to support positive relationships across all of their communities (Liddelow-Hunt et al., 2021, 2023; C. Sullivan et al., 2021).

Support existing peer networks and community-driven initiatives

Peer networks and chosen families provide vital support for First Nations LGBTIQA+SB, particularly when mainstream services are unsafe or inaccessible (2Spirits, 2024; KPMG & Black Rainbow, 2022). In person or online peer-support groups offer safety, solidarity, community-based education, and advocacy (Coe, 2023; Farrell, 2015, 2021; B. Hill et al., 2021a; KPMG & Black Rainbow, 2022). Research shows that most disclosures of sexual violence occur in these informal networks, often before or instead of contacting formal services (Barnes et al., 2024).

Community norms and values are underutilised strengths and resources for initiatives aimed at preventing sexual violence. The recent GVRN survey revealed that the majority of First Nations LGBTIQA+SB people take a proactive stance in preventing sexual violence, intervening when they witness risk, and promoting collective safety (Salter et al., 2024b). Community-driven initiatives such as the 2Spirits Yarns Heal suicide prevention project demonstrate how culturally grounded, queer-led spaces build safety, connection, and healing (2Spirits, 2024). However, reliance on informal networks and local community-led efforts without adequate funding places an unfair and harmful cultural and emotional load on the community (2Spirits, 2024). These networks and initiatives desperately need formal recognition, long-term funding, and culturally responsive evaluation to be accessible, sustainable, and to reduce the burden on First Nations LGBTIQA+SB people and allies.

Holistic, strengths-based, and healing-centred approaches

Prevention must move beyond deficit-based models. First Nations LGBTIQA+SB people have called for greater focus on visibility, strength, leadership, and pride rather than being framed solely through trauma or risk (Soldatic et al., 2020; C. Sullivan et al., 2023; C. T. Sullivan et al., 2022). Community-led celebrations, gatherings, and cultural events that honour identities are critical to resilience and connection (2Spirits, 2024; Soldatic et al., 2020; C. Sullivan et al., 2023; C. T. Sullivan et al., 2022).

A holistic prevention model must address the broader determinants of safety and well-being for First Nations LGBTIQA+SB people. They must align with First Nations worldviews and

recognise that individual and community healing cannot be separated from social and systemic conditions. Prevention needs to address not only the drivers of sexual violence but also the risk and reinforcing factors, such as physical and mental health, substance use, and housing insecurity (M. Day et al., 2022; Dudgeon et al., 2015; Filev et al., 2022; International Work Group for Indigenous Affairs & Bassani, 2023; Soldatic, Sullivan, Briskman, et al., 2023).

First Nations LGBTIQA+SB people have described healing as holistic and involving caring for their physical, emotional, spiritual, cultural, and collective wellbeing (2Spirits, 2024; Liddelow-Hunt et al., 2021; C. Sullivan et al., 2021). Survivors describe a mix of strategies such as yarning with peers, engaging in movement or ceremony, and accessing culturally safe therapy as effective in their healing journeys (Barnes et al., 2024). Investing in long-term, trauma-informed, culturally safe healing initiatives is essential (2Spirits, 2024; M. Day et al., 2022). This includes peer-led healing programs, and support embedded in First Nations community-controlled, LGBTIQA+SB, and mainstream services.

5.7. Social media and online spaces in prevention

First Nations LGBTIQA+SB people often experience online spaces as sites of racialised, queerphobic, and transphobic violence, mirroring and compounding their experiences of discrimination in the offline world (Carlson & Day, 2022; Kennedy, 2020; Soldatic et al., 2020). The community also face heightened vulnerability to technology-facilitated sexual violence, including verbal and image-based abuse and sexual racism on dating apps (Carlson, 2020; Salter et al., 2024). Despite these risks, few platforms enforce policies that protect against compounding forms of abuse and as a result First Nations LGBTIQA+SB people are self-managing their digital safety without institutional support (Carlson & Day, 2022, 2023).

Simultaneously, social media and online spaces offer community connection, cultural expression, and empowerment, especially for those who are geographically or socially isolated (Carlson, 2020; Farrell, 2021). First Nations LGBTIQA+SB people often utilise social media to form communities of care and movements that challenge colonial

heteropatriarchal values and reclaim sovereignty over their bodies and desires (Carlson et al., 2017; Carlson & Day, 2022; Coe, 2023; Farrell, 2015, 2017, 2021).

Online platforms are therefore a promising avenue for sexual violence prevention campaigns and initiatives. These initiatives should both support positive and celebratory online spaces for First Nations LGBTIQA+SB people and increase protections from online harms. First Nations LGBTIQA+SB voices in the literature suggest:

1. *Community awareness building and education about sexual violence and TFA through online platforms*. These must be culturally and contextually specific and community driven (Carlson & Day, 2023), be supported by federal and state funding, and meet the information needs of organisations, families, and the broader community (Hill et al., 2021).
2. *Positive online spaces and communities of care.* Community co-design with organisations to develop First Nations LGBTIQA+SB positive campaigns to promote visibility and acceptance in online spaces (Sullivan et al., 2021); support existing and new online communities of care to encourage knowledge sharing, solidarity, and help-seeking (Carlson & Frazer, 2021; Coe, 2023).
3. *Increased safeguards and protections.* Community-led collaboration with social media companies, service providers, and law and policy-makers to increase availability of consumer information and safeguards on social media settings and technologies (Carlson & Day, 2023), and establish and implement stronger anti-racism and anti-discrimination policies and regulations for online platforms (Sullivan et al., 2021).
4. *Improve responses from legal and service sector:* Greater resourcing of culturally safe interventions for TFA, including anti-carceral approaches, and education of frontline workers, police, and the criminal justice system on the systemic, cultural, and political factors relevant to TFA for First Nations LGBTIQA+SB people (Carlson & Day, 2023).
5. *Further community-led research:* To improve understanding of the impacts of racism and colonialism on experiences of TFA (Carlson & Day, 2023; Carlson & Frazer, 2018a, 2018b), effective social and legal responses to TFA such as preventative, informal, and healing-based solutions (Carlson & Day, 2023), and recognise the

positive impacts of First Nations LGBTIQA+SB online political activism and communities (Carlson & Frazer, 2018b).

5.8. Research

There is a critical need for research to meaningfully capture the experiences of sexual violence for First Nations LGBTIQA+SB people. This has been acknowledged by the Aboriginal and Torres Strait Islander Action Plan 2023-2025 (Commonwealth of Australia, 2023). However, national datasets frequently fail to collect data on sexuality, gender, or family diversity, and where such data does exist, it lacks the detail needed to inform targeted interventions, particularly for those who are trans, intersex, or living in rural or remote areas (B. Hill et al., 2021a; KPMG & Black Rainbow, 2022). This statistical invisibility hinders policy responses and resource allocation for prevention initiatives.

Improved data collection must include the development of standardised, inclusive demographic measures in national surveys and administrative systems. Governments must invest in protocols that support disaggregation by First Nations identity, gender, and sexuality (M. Day et al., 2022; B. Hill et al., 2021a; KPMG & Black Rainbow, 2022). These reforms must align with existing national frameworks such as the Closing the Gap reform agenda and support First Nations data sovereignty (AIATSIS, 2020; Carroll et al., 2020; Commonwealth of Australia, 2023; Joint Council on Closing the Gap, 2020).

First Nations LGBTIQA+SB people have historically been subject to exploitative research practices that failed to reflect their specific needs or provide mutual benefit. Community-led and co-designed research approaches respect and reflect lived experience, local knowledge, strengths, and solutions to sexual violence. Projects such as *Dalarinji*, *Walkern Katatdjin*, *Breaking the Silence*, and the work of Black Rainbow demonstrate the depth of knowledge that emerges when First Nations LGBTIQA+SB people design and lead research (Bonson, 2017, 2021b; Hill et al., 2021a; Liddelow-Hunt et al., 2021, 2023; Sullivan et al., 2023; and see KPMG & Black Rainbow, 2022 for further examples).

To embed this approach, governments must direct long-term, flexible funding to support culturally safe, holistic research over time (Filev et al., 2022; The Equality Institute, 2016). They must create pathways for First Nations LGBTIQA+SB researchers in academic, policy, and service sectors (KPMG & Black Rainbow, 2022). Funding must extend to include regional, remote, trans, and intersex community members who are often excluded (B. Hill et al., 2021a). An outcomes framework that centres First Nations LGBTIQA+SB wellbeing and safety indicators is also needed, to ensure that research findings translate to policy reform and that interventions are effective in ways that are actually meaningful to communities (KPMG & Black Rainbow, 2022).

Research and training must be funded sustainably to allow adequate time and flexibility to engage and build relationships with communities and facilitate self-determined, Indigenous, and intersectional methodologies. Research must acknowledge the compounding impact of colonialism and reflect the diversity and complexity of lived experience. Research processes must reflect First Nations worldviews, knowledges, and methodologies, which position multiple approaches to knowledge as equally valid, and facilitate safe, inclusive knowledge sharing (Bessarab & Ng'andu, 2010; Carlson et al., 2024; Kennedy et al., 2022; Urbis & Milward, 2023).

6. Conclusion

This literature review highlights the urgent need to support targeted, culturally safe, and community-led approaches to the primary prevention of sexual violence against First Nations LGBTIQA+SB people. While there is growing awareness of the disproportionate rates of violence experienced by this community, the evidence consistently shows that recognition in mainstream, First Nations, or LGBTIQA+SB policies has too often been superficial or fragmented, lacking meaningful integration into funding and service design. The unique and compounded drivers of violence, rooted in colonialism, systemic racism, cisheteronormativity, and intergenerational trauma, require responses that are systemic, multi-faceted, nuanced, decolonising, and above all, self-determined by First Nations LGBTIQA+SB people.

White-centric, heteronormative framings of gendered violence permeate the academic and grey literature and consequently this review was unable to provide 'evidence' for what works in sexual violence prevention in First Nations LGBTIQA+SB communities. However, this does not mean that the evidence does not exist. First Nations LGBTIQA+SB people have always been engaged in violence prevention work, and continue to do so through informal, grassroots, and community-led avenues, which are often not formally documented or evaluated in ways that mainstream systems recognise or resource. If these systems meaningfully privileged First Nations worldviews, knowledges, and methodologies, and listened to community voices – they would find the evidence is already there.

First Nations LGBTIQA+SB people have long voiced their experiences and solutions, yet national and state-level prevention efforts have not adequately respected or resourced this knowledge, nor responded with the urgency and specificity required. Governments must urgently invest in long-term, flexibly resourced, and community-led prevention strategies. This includes embedding First Nations LGBTIQA+SB leadership in all levels of decision-making, enforcing accountability structures to track culturally meaningful progress, and ensuring that all national and jurisdictional plans to prevent sexual violence include explicit, measurable actions determined by and tailored to communities.

Prevention frameworks must shift from tokenistic inclusion to sustained, targeted action that centres First Nations LGBTIQA+SB knowledges, addresses the compounding structural drivers of violence, and supports healing, safety, and justice on their own terms. Anything less risks perpetuating the very systems that allow violence to continue.

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