

## Legislative Council

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### SAME-SEX DISCRIMINATION

**The Hon. A. BRESSINGTON (18:08):**

I rise briefly to indicate my support also for this motion. There are a couple of points I will make. I agree with the comments of the Hon. Ian Hunter when he said being a member of the LGBTI group does not necessarily meet the criteria for a mental illness, suicide or whatever, but this gets back to the point of how we as a society deal with, relate to, communicate with and accept people who are different—well, different to us but not different to them. I have not prepared anything for this, so if I put my foot in my mouth I apologise for it beforehand. The political correctness of it all sometimes is a bit much.

The point I am making, though, is that I have experienced this in my own family with a niece and nephews who have been same-sex attracted and have not been able to come out and tell their parents that this is the direction that they thought they were going in. One of my nieces—and I will use another name—named Sharon shared her feelings with one of her friends at school, and was not as great a friend as she thought.

A week after she shared the fact that she thought that she may be lesbian she was gang raped by four of the boys in the school, with the message going to her during the rape that she needed to know what she was missing out on. She never spoke of that experience when it happened. As I said, she had not been able to talk about this with her parents, so she carried that around with her for six years. She actually ended up a heroin addict and was in gaol by the time she was 21, with two children, I might add, and her life was in tatters.

If as a society we can prepare families for the fact that this may happen, and we can put information into schools that is effectively accepted by other members of the school community (namely, other students), we can go a long way in preventing lives being destroyed and people contemplating suicide as the only answer.

We ran a group to accommodate same-sex attracted people in our Drug Beat program. The reason those people were there was, first, they could not talk to their family and, secondly, they had been abused and bullied at school and it had affected their entire life. They were using drugs to forget that pain and to try the best they could to cope with their life as it was because of those traumas.

I can tell you that working with the families of these young people and getting the families to accept that, no matter what, they were still their children and that they still had feelings and ambitions, and they wanted to have the right to a good existence just like every other person in the community, went a long way to allowing repair of family relationships and a shift in dynamics that was forgiving. That is something that is quite often ignored in this debate—the fact that forgiveness by family members and how they treat the messages they send is so very important to full acceptance. For gay, lesbian, bisexual people, gender-questioning people, who they are is not their sexuality; it is their values and beliefs and the way in which they aspire to live their life.

I know for a fact that group counselling is very therapeutic and very effective. Not only is it a way of a person sharing their life experiences and their traumas but it is also a way of hearing that their life experiences and traumas sometimes are not that much different from those of

other people, that they are not a one-off, one-only person who has been treated in a discriminatory, unkind or abusive way. Group therapy is very good for helping young people or any person to reconcile trauma and put it in its place, and that is that it is the ignorance of other people that has caused their trauma, not actions, sexuality or anything else. This is about society's way of coping with what it does not understand.

I am the first one to admit that I do not understand homosexuality. I do not know why it happens, but I do not have to know. I do not have to go into the genealogy of it, whether it is nature or nurture or all of that. The fact is that so many young people are coming to the conclusion that they are gay, lesbian, bisexual, or whatever. If it is real to them, it is real, and we just have to learn to accept that. We have to learn to integrate people, as best we can, into our society and give them all the help we can when they are vulnerable.

One thing that was highlighted, or is of concern to me, is that the Hon. Ian Hunter said, in his response, that the funding has not been cut. I do not think that is the issue with this motion. The issue is that the criteria for people to access these services are going to be tailored down, if you like, and that will mean that some people who need these services are not going to fit the criteria and therefore are going to be left without the support they need.

I have a huge problem with the government approach—not just this government, but governments in general—where we try to turn human conditions into clinical conditions. It has always been the view of myself and counsellors from the organisation Drug Beat, that if you continually tell people that they are broken then eventually they will believe it.

There is nothing that will indicate to a person that they are broken any more than having them go for clinical assessments for a condition that needs nothing more than a little tender loving care, an ability to share and care with other people and an ability to connect. They are not clinical conditions and do not require clinical assessment.

In closing, I would like to say that we are constantly told that a one-size-fits-all approach does not work, yet with the streamlining by this government of services to vulnerable groups in our community, it is an indication that it does believe that one size fits all and that: it is our way or the highway. I think that needs to be changed within this government.

As I have said before, the Hon. Mike Rann promised to reconnect and re-engage with the community. These vulnerable groups are where we need to start, and let community groups do what community groups do best, that is, deal with their target groups with best practice. If they can show outcomes and they are saving lives then why does the government believe that it needs to micro-manage every aspect of what is going on out there in the community and, frankly, stick its nose in where it is not wanted and where it is not needed?

With those few remarks, I indicate my full support for this motion and I hope that Second Story is allowed to continue to offer the services that it has been offering to the target groups and achieving those successes, and that the government will just keep out of it.