THEORY OF CHANGE



Outcomes

Improved health & wellbeing

Improved mental health, timely access to mental health support Improved physical health, timely Community connection and social access to appropriate healthcare

Cultural change

Cultural change in social, legal and clinical settings Acceptance and social inclusion of people with diverse bodies

Respect for pluralism and diverse personal values and preferences

Institutional change

Systemic reform in legal, academic, clinical, government and other institutional settings

Comprehension and respect for pluralism and diverse personal values and preferences

Goals

Inclusive medical education

methodologies

New data models

Australian Bureau of Statistics statistical standard for sex, gender, variations of

Extracting intersex from sex/gender

Anti-discrimination, equality & equity

Anti-discrimination protections on arounds of 'sex characteristics', in work, social, sport and clinical settings

Protections from genetic discrimination

Redress for harmful practices

Affirmative education

Inclusive early learning, age appropriate education

Inclusive sex education

Accreditation frameworks Inclusive school curricula Improved research

Regulating medicine Legislative protections

Independent oversight for

Medicare and Pharmaceutical

Standards and guidelines to ensure adherence to reforms

Reform of World Health Organization International Classification of Diseases

New models of service provision IVSC community-designed

Consistent, high standard training

Innate variations of sex characteristics communitycontrolled psychosocial support

healthcare pathways IVSC community-controlled healthcare (e.g. GPs, allied health,

endocrinology, genetic counselling)

Clinical psychosocial suppor

Tools

Frameworks

Human rights Psychosocial model of health and wellbeing

Social model of disability

Respect for plurality (value pluralism) and intersectionality

Lived experience, storytelling,

Norms & standards

Coherent, consistent understandings

- 'Sex characteristics'
- 'Innate variations of sex
- 'Harmful practices'

Institution-building

Employment of staff to deliver

Resource and knowledge development

Allies and partnerships, and champions of change

advocacy and services

Darlington Statement

Common platform

Coherent, consistent shared understanding

Coherent, consistent, shared goals

Yellow Tick & resources

Consistent, high standard training

High standard resources on Intersex Human Rights Australia and InterLink websites

Communities of practice (academic, medicine, psychology and allied health)

Methods

Community development

Face to face events Online events

Collaboration and consortia Darlinaton consortium

Projects, e.g. YOUth&I Webinars, resources, Referral networks and outreach and education

Evidence & research

Research on medicine and psychology, law, ethics, human rights, social policy

Documentation of abuses Crossina silos: interdisciplinary

Capacity building

Psychosocial support Fundraisina Mentoring Project development

Storytelling

Advocacy

Advocating for coherent reforms

Written submissions

Engagement with diverse institutions and stakeholders

Barriers

Misinformation

Prevalence and reliance on tropes

homogeneous third sex

Intersex people as adults with marainalised identity/lesbian/ gay/bisexual/transgender/

Lesbian/Gay/Bisexual/Transgender, anti-LGBT, and clinical misinfor

As babies with bodies or sex markers needing to change for social/familial integration

Disinformation

Politically motivated misinformation "Practices have changed"

Lesbian/Gav/Bisexual/Transaender. anti-LGBT, and clinical disinforr

Stiama and discrimination

Lack of bodily autonomy

Lack of agency

and integrity

Plausible deniability of medical practices

"Intersex activists want to stop all

Education and training

Inappropriate approaches & bad practices Institutional neglect, institutional Constructions of intersex as a third

Laws referring to indeterminate sex Lack of resources/misdirected

Laws facilitating harmful practices

The Problems

Health & education needs

Innate/iatroaenic

Social, commercial and political determinants of health

Biopsychosocial health needs

Intersectionalities including lesbian, gay, bisexual, transgender, disability, First Nations, cultural

diversity, linguistic diversity, migration Developmental/neurodevelopmental Prenatal/genetic, birth, puberty, transition to adult care, ageing

Individual plurality in values and preferences

Harms

Inadequate information provision Inadequate support Human rights abuses in medical

Lack of respect for plurality in population

Impacts of harms Experiences of stigmatisation,

Shame, grief

Epistemic harms, and adverse mpact on self understanding Adverse impacts on family and

isolation

Disengagement, disassociation,

discrimination and harm