

THEORY OF CHANGE

Outcomes

Improved health & wellbeing

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

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

Building respect for lived experience leadership

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

New data models

Australian Bureau of Statistics statistical standard for sex, gender, variations of sex characteristics, sexual orientation

Extracting intersex from sex/gender markers

Anti-discrimination, equality & equity

Anti-discrimination protections on grounds 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 medical education
Inclusive school curricula	Accreditation frameworks
Inclusive sex education	Improved research methodologies

Regulating medicine

Legislative protections	Standards and guidelines to ensure adherence to reforms
Independent oversight for transparency and accountability	Reform of World Health Organization International Classification of Diseases
Medicare and Pharmaceutical Benefits Scheme reform	

New models of service provision

Consistent, high standard training	IVSC community-controlled healthcare (e.g. GPs, allied health, endocrinology, genetic counselling)
Innate variations of sex characteristics community-controlled psychosocial support	IVSC community-controlled and clinical psychosocial support
IVSC community-designed healthcare pathways	

Tools

Frameworks

Human rights	Respect for plurality (value pluralism) and intersectionality
Psychosocial model of health and wellbeing	Lived experience, storytelling, documentation
Social model of disability	

Norms & standards

Coherent, consistent understandings:

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

Institution-building

Employment of staff to deliver advocacy and services

Resource and knowledge development

Allies and partnerships, and champions of change

Darlington Statement

Common platform

Coherent, consistent shared understanding

Coherent, consistent, shared goals and commitments

Yellow Tick & resources

Consistent, high standard training

High standard resources on InterAction, InterLink and Yellow Tick websites

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

Methods

Community development

Face to face events	Collaboration and consortia, Darlington consortium
Online events	Projects, e.g. YOUth&I
Webinars, resources, and education	Referral networks and outreach with stakeholders

Evidence & research

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

Documentation of abuses

Crossing silos: interdisciplinary practice

Capacity building

Mentoring	Storytelling
Fundraising	Education and training
Project development	

Advocacy

Advocating for coherent reforms

Written submissions

Engagement with diverse institutions and stakeholders

Psychosocial & peer support

Psychosocial support

Peer support

Support for individuals, including children, youth and adults

Support for family members

Barriers

Misinformation

Prevalence and reliance on tropes	Lesbian/Gay/Bisexual/Transgender, anti-LGBT, and clinical misinformation
Intersex people as adults with marginalised identity/lesbian/gay/bisexual/transgender/homogeneous third sex	As babies with bodies or sex markers needing to change for social/familial integration

Disinformation

Wilful misinformation	Plausible deniability of medical practices
Politically motivated misinformation	"Practices have changed"
Lesbian/Gay/Bisexual/Transgender, anti-LGBT, and clinical disinformation	"Intersex activists want to stop all medical care"

Inappropriate approaches & bad practices

Constructions of intersex as a third sex/gender	Institutional neglect, institutional practices
Laws referring to indeterminate sex including as gender identity	Lack of resources/misdirected resources
Laws facilitating harmful practices	

The Problems

Unmet health & education needs

Biopsychosocial health needs	Intersectionalities including lesbian, gay, bisexual, transgender, disability, First Nations, cultural diversity, linguistic diversity, migration	Prenatal/genetic, birth, puberty, transition to adult care, ageing
Innate/iatrogenic	Developmental/neurodevelopmental	Individual plurality in values and preferences
Social, commercial and political determinants of health		

Stigma, discrimination, harm

Experiences in social, educational, clinical and workplace settings	Inadequate information provision	Human rights abuses in medical settings
Lack of bodily autonomy and integrity	Inadequate support	Lack of respect for plurality in population
	Lack of agency	

Impacts of harms

Shame, grief	Experiences of stigmatisation, discrimination and harm
Epistemic harms, and adverse impact on self understanding	Disengagement, disassociation, isolation
Adverse impacts on family and intimate relationships	