



Researching and connecting with
LGBT diversity.

The “States of Mind” Project

Mental Health/Wellbeing
&
Alcohol, Tobacco & other Drugs
in
Lesbian, Gay, Bisexual & Transgender
Communities in QLD

Shane Garvey & David Farrington

qahc
Queensland Association for
Healthy Communities Inc.


'States of Mind' Project

- To develop state-wide action plans to address both Mental Health and Wellbeing & AoD needs of LGBT Queenslanders.
- Plans to be informed by production of :
 - Literature Review
 - Communities Consultations
 - Service Provider Consultations

LGBT ATODS use 2 to 4 fold higher than in the broader heterosexual community.

Studies indicate that when compared with the general population LGBT are more likely to:

- Use alcohol and other drugs
- Have higher rates of substance use
- Are less likely to abstain from use
- Be more likely to continue heavy drinking into older adult life and
- Under represented in access and engagement in AOD services



There is a strong link between an LGBT individual's drug and alcohol misuse and their experiences of discrimination and abuse.

Reasons for use

- Lesbian Gay Bisexual & Transgender people use licit and illicit drugs for a variety of reasons. This can be related to societal reactions to LGBT people, such as homophobia and heterosexism, rather than being caused by sexual orientation or gender identity itself.

Definitions

Homophobia

Is the fear and hatred of LGB people and of their sexual desires and practices.

Heterosexism

Is the belief that everyone is or should be heterosexual, and other types of sexual behaviours are unhealthy, unnatural or a threat to society. Heterosexism also assumes that sex and gender (and the relationship between the two) are fixed and not open to change.

Pathologising: seeing the individual within a scientific/medicalised framework that excludes the LGBT experience of community

Reasons for elevated drug use

- Stress associated with belonging to an often despised minority
- Stress associated with managing a minority identity, such as needing to hide identity to keep job or experiencing harassment/discrimination.

Reasons cont...

- The stress associated with coming out to family, friends and work colleagues
- Confusion around sexual orientation or gender identity
- Greater likelihood of loss of family and community support

Reasons cont..

- The role of gay bars as a major (and sometime only) social outlet, leading to finding friends and partners in bar settings, thus increasing the likelihood of adopting a “heavy drinking”/using peer group
- Non-acceptance of self or internalised homophobia: leading to low self esteem, depression, anxiety and feelings of guilt and paranoia.

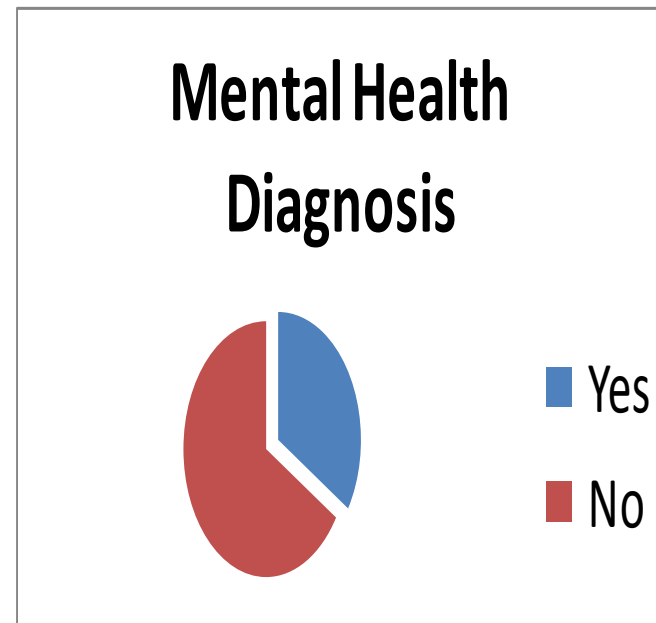
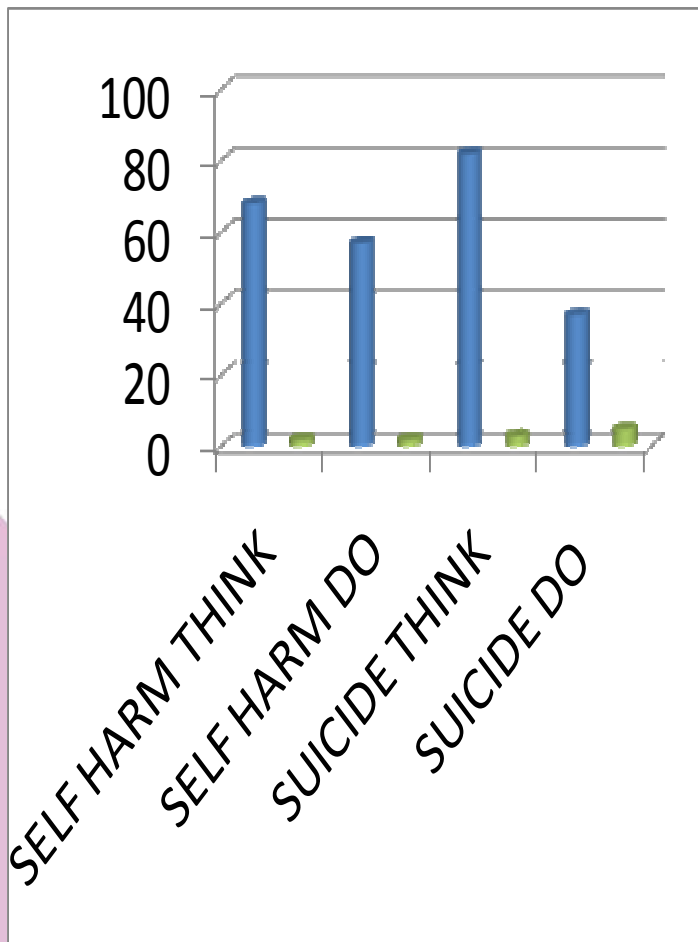
Mental Health & Wellbeing

- Social exclusions are the major risk factor
- Multiple isolations & trauma
- Operation of complex stigma's
- Impact on identity & multiple relationships
- Early intervention & prevention limited

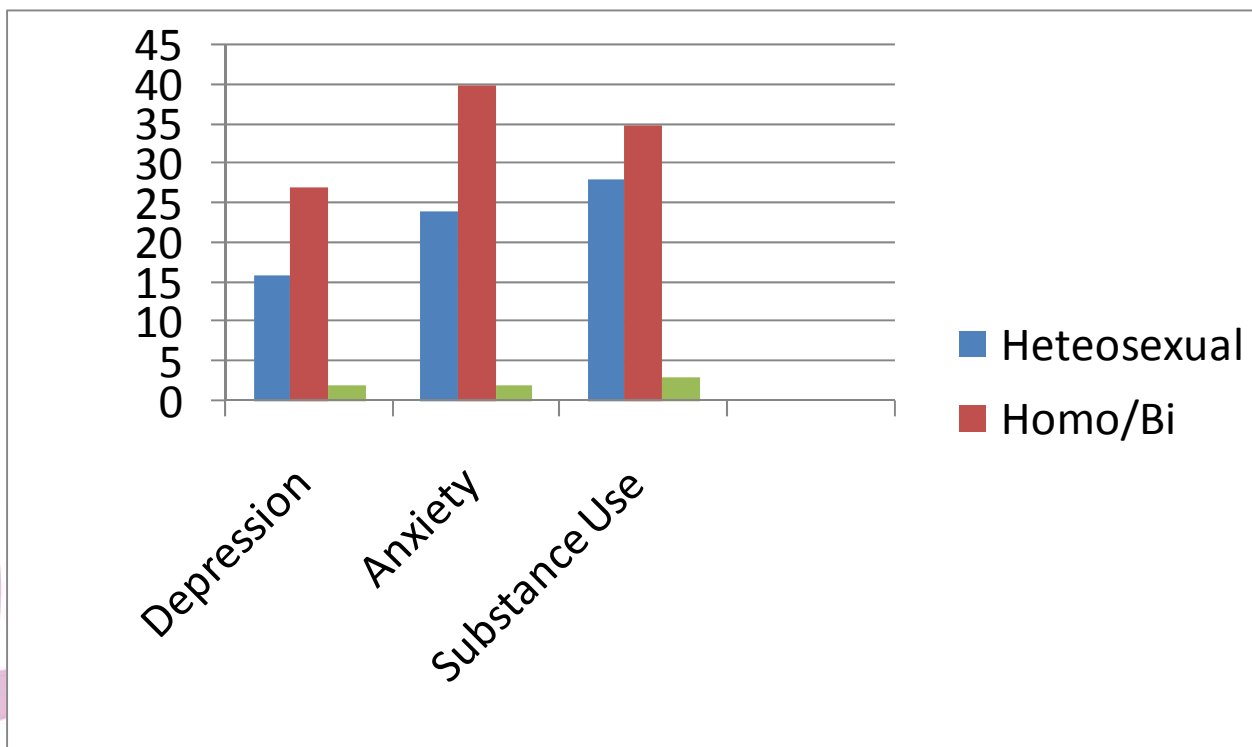
Mental Health & Wellbeing

- Hetero-normative services
- Loss of community attachment
- Suicide, self harm, psychiatric diagnosis and stress 2-5 times greater than heterosexual averages
- Little focus on positive mental health

'Young Lesbian Gay Bisexual Transgender Queenslanders (Open Doors 2008)



**Anxiety , Depression & Substance Use
in Adult Lesbian Gay Bisexual Transgender Queenslanders
Queensland National Mental Health & Well Being Survey
(ABS, 2007)**



Our approach to the research..

- **Combining Conventional & Action Research & Cultural Interventions (pilot)**
- **Consulting communities by having Dinner Parties**
 - Tribes/subcultures rather than “one community” approach
 - Going to communities rather than asking them to come to us
- **We’re supporting our Queer Artists to talk about our findings and what this means for us and LGBT communities.**

Why this approach?

- **Re-new community engagement, mobilisation & citizenship**
- **Pilot new research dissemination & health promotion techniques focused on diversity**
- **Develop multi-D evidence-base & picture**
- **Pilot low cost cultural interventions for health & well being**
- **Strengthen our research capacity with universities**

Limitations of 'Health Promotion' and 'Research Methods'

- Exponential diversity in 'LGBT' cultures
- Creative expression as a 'common language'
- limitations of 'traditional health promotion' (passive, anti-marketing, high cost)
- limitations of traditional research (community disengagement, research fatigue)
- Art as Research - Research as Art

Themes from dinner parties: Gender Queer

‘there is a strong culture around creative stuff in the Gender Queer community.

‘..it feels like you have got as full life....you can go to an event and there’s a performance you can identify with...it feels like there’s a culture, a strong enough culture where you are connected to things...’

‘I feel the community is strong because it has in some ways thru creative practice identified itself, staked its territory and communicated its meaning..’

‘for someone expressing depression, creativity can be a way of addressing, externally coping with that sort of stuff....and when someone says your identity is not an identity, you can thru creative practice refute that...’

‘Lino art has been very popular in lesbian and gender queer communities at the moment...as therapy I look at this in the rubric of scarring, cutting, so it’s been like physicalising pain, gorging out the flesh of the material...and creating something beautiful..a beautiful result from violence..’

The Community Artist as...

- **A Research Communicator & Community Developer (tribe specific & sustainable)**
- **A participatory, citizenship-driven form of health promotion (effective communication)**
- **A 'Cultural Therapist' (a 'social includer', counter hetero-normative images & culture)**
- **An Artist Citizen ! A social commentator of queer human rights**
- **An 'Economic Stimulator' (The Artists Bonus – Stimulus Package, The Creative Index-Pink Index)**

Mentored, Commissioned Micro-Projects

- **Established Q-Arts collective**
- **Theatre Short play (Same Sex Relationships)**
- **Harness Exhibition (Gender Queer)**
- **Cabaret**

What now??

- Embarking on state-wide tour talking to service providers and communities
- Rolling out service provider and community surveys
- Analyse data
- Write reports/recommendations
- Launch findings at Community Cabaret

Contacts

Shane Garvey

Alcohol, Tobacco & Other Drugs Co-ordinator

sgarvey@qahc.org.au

David Farrington

Mental Health & Wellbeing Co-ordinator

dfarrington@qahc.org.au

Resources @ [qahc.org.au/mental health](http://qahc.org.au/mental%20health)

Or [/drugs](http://qahc.org.au/drugs)