

# Supporting LGBT Lives

**Odhrán Allen**

**Director of Mental Health**

**Gay & Lesbian Equality Network**



# OVERVIEW

- Background to study
- *Supporting LGBT Lives* – key findings
- Recommendations and implementation

# Background

- **Minority stress** = stresses created by stigmatisation, discrimination and marginalisation ↑ risk of psychological distress among minorities such as LGBTs
- **'Reach Out'** = Irish suicide prevention strategy identifies LGBTs as 'at risk' group
- **National Office for Suicide Prevention** funding to identify suicide *risk* and *resilience* factors among Irish LGBTs and make recommendations for action

# The Study

- Commissioned by BeLonG To and GLEN
- Research carried out by Children's Research Centre, Trinity College Dublin and School of Education, University College Dublin
- Researchers: Dr. Paula Mayock, Dr. Audrey Bryan, Nicola Carr & Karl Kitching
- Most comprehensive study of LGBT people in Ireland – mental health, coming out, bullying
- Online survey: 1,110 LGBT people
- In-depth interviews: 40 LGBT people
- Report launched by Minister for Health in February

# SUPPORTING LGBT LIVES

A STUDY OF THE MENTAL HEALTH AND WELL-BEING OF  
LESBIAN, GAY, BISEXUAL AND TRANSGENDER PEOPLE

# Demographics

- 14 – 73: age range of survey participants
- 64% identified as male, 34% identified as female and 2% 'something else (e.g. gender queer)
- 81% lesbian or gay, 11% bisexual, 4% transgender, 4% questioning/not sure
- 96% 'out' to at least one person
- 40% in committed relationship
- 70% had 3<sup>rd</sup> level degree

# Key Findings

- Coming Out
- School Experiences
- Victimisation Experiences
- Mental Health Risks
- Mental Health Resilience

# Well-Being & Good Mental Health

- 80% of LGB and 60% of T participants *now* comfortable with their LGBT identity and the majority have good self-esteem and are satisfied with their lives
- Over 2/3 have come out to all their immediate family, friends and colleagues
- Given adequate support most LGBT people develop resilience to minority stress and live happy and satisfying lives

# Mental Health Resilience Was Linked To:

- Acceptance and support from family and friends
- A positive turnabout or life event, e.g. finishing secondary school, relationship
- Support from LGBT community organisations and services
- Developing good coping strategies, good self-esteem and positive LGBT identity
- Positive experiences in school or work

*"I am proud to be a lesbian but it took me a long time to accept my sexuality and it would have been easier to accept if society was a little more understanding" (Lesbian, Female, 26)*

*"I am happy to conclude by saying that I am now a very content, confident, well-adjusted gay man, fully out and very happy to be gay. I have grown and thrived with the love and support of my friends and two of my sisters ... being gay was never my problem but how people reacted to me being gay was certainly part of what made life very hard in the past" (Gay, Male, 35)*

# Coming Out

- **Age 12:** most common age to know you are LGBT (average is 14)
- **Age 17:** most common age to start coming out as LGBT (average is 21)
- **5 - 7 years between 'knowing' and first 'disclosing' LGBT identity**
- This period coincides with puberty and critical years of psychological, social and vocational development
- The period prior to coming out was particularly stressful for the majority because of isolation and fear of rejection

*"Coming out is probably one of the most extreme and difficult things you can do. Before you come out you have to deal with it all yourself and it took me six years to. And I couldn't be myself for those six years and it is, again, it's called in the closet because you are in the closet. No one can see you; they see this door because no one's ever opened up the closet to look inside" (Gay, Male, 17)*

- *... my mother doesn't get my body yet and she was, she was very shocked at first, then she tried to convince herself that it was just a phase and then she was trying to tell me like that there are some women who are feeling masculine but they are fine with it and I'm, even again when I told her I maybe going on to, like actually going through the hormone therapy, she was like, 'If you're doing that then you're not living here anymore' (Female-to-Male Trans, 20).*

# School Experiences

- 60% reported homophobic bullying in their schools
- >50% had been called abusive names related to their LGBT identity by fellow students
- 40% verbally threatened by school peers
- 35% reported homophobic comments by teachers
- 25% physically threatened by fellow students
- 20% missed or skipped school because they felt threatened or were afraid of getting hurt
- 10% called homophobic names by teachers
- 5% left school early because of homophobic bullying

*"I lost a close friend to suicide earlier this year as he couldn't face coming out and the jeering he was getting for being suspected of being gay. Yet the school he was in did NOTHING in the way of policy afterwards so it could potentially and probably will be repeated. I was also sent to a counsellor in the hope it would "talk me out of being bisexual" and got a warning that if I dated girls in college or had gay friends my parents will not pay for my education" (Bisexual, Female, 18).*

*"I left school because of the hurt and suffering I got in school, and the teachers didn't care, as I think it was a case of "well they call him gay and he probably is gay, so why should we step in, cos they aren't saying anything wrong" attitude towards gay people... even though I wasn't out at school. I was forced to leave at my junior cert, due to the abuse I got ... jumped on, called puff, queer etc" (Gay, Male, 23).*

# Victimisation Experiences Because of LGBT Identity

- 80% had been verbally abused
- 40% had been threatened with physical violence
- 25% had been punched, kicked or beaten
- 25% of those who had ever worked had been called abusive names at work
- 15% had been verbally and physically threatened by work colleagues
- 10% missed work because they were afraid of being hurt or felt threatened

*"I'm sure people knew I was gay you know, I did walk up through (rural village) and people would be calling faggot and stuff like that. It did kill me a lot hearing you know the words and stuff and I was afraid as well, I felt very alone inside and the drink was my best friend" (Gay, Male, 24).*

# Mental Health Findings

- **46%** had hazardous drinking (AUDIT-C)
- **27%** had **self-harmed** at least once
  - 85% more than once
  - 16 years = average start age
  - 40% female and 20% male
- **17.7%** had **attempted suicide** at least once
  - 60% more than once
  - 17.5 = average start age
  - 24% female and 15% male
  - Younger more likely - 1/3 under 25s had seriously contemplated suicide in past year

*"So the Leaving Certificate was coming up and pressure and all that. It was just getting worse and bad and shitty and all that and I didn't really know what was going on in my head. I felt crappy and depressed the whole time ... I'd go to class and go home and I'd cut and I'd do my homework and that was kind of my routine for three or four months in the middle of Leaving Certificate" (Male-to-Female Trans, 20).*

*"I've been suicidal many times...It's not because I'm a lesbian but because of how I've been treated in my life as a lesbian. School was terrible and then to get bullied badly in work was horrible" (Lesbian, Female, 28)*

# **History of Attempted Suicide Was Linked to:**

- Younger age
- Homophobic bullying in school
- Fear of refection or actual rejection by family and friends
- LGBT victimisation experiences
- Higher alcohol consumption

# HEALTHCARE PROVIDERS

- 76.9% felt healthcare providers need to have more knowledge and sensitivity to LGBT issues
- Healthcare providers were only aware of respondents LGBT identity in 44% of cases
- Healthcare providers typically presumed that their patients were heterosexual, leading to reluctance on the part of respondents to disclose their LGBT identity
- Only 40% felt respected as an LGBT person by their healthcare provider
- 45% of respondents actively seek out LGBT-friendly healthcare professionals because of bad experiences they had with providers in the past

- *"My current doctor didn't really understand what I was trying to say and I was trying to be discrete about it, not because I felt ashamed ... And in the end I had to, you know, just say it very clearly, 'Look my partner is female, you don't seem to be picking up on that. I'm you know, sexually active with another female. And so, you know, he was a bit shocked'" (Lesbian, Female, 29)*

# HELPFUL SERVICES

1. Acceptance and open-mindedness of the practitioner towards the LGBT person
2. Unbiased, sensitive practice (i.e. LGBT-affirmative)
3. The provision of constructive and meaningful support
4. Confidence of the LGBT person that they were understood by the professional

# SERVICE BARRIERS

1. Presumption of heterosexuality
2. Lack of understanding of LGBT issues
3. A lack of meaningful connection between the LGBT person and the practitioner
4. A lack of willingness or ability on the part of the practitioner to engage with or respond to LGBT people's specific concerns or needs
5. Anti-gay bias among professionals

- *"I've been suicidal many times since my breakdown. It's not because I'm a lesbian but because of how I've been treated in my life as a lesbian. School was terrible and then to get bullied badly in work was horrible. The psychiatrist didn't seem to care that these experiences had hurt me so much and he told me I shouldn't come out to my family [because] they'd probably react badly, so that made me more scared. He just gave me medication"*  
*(Lesbian, Female, 28)*

# Recommendations

The report made recommendations for a comprehensive approach to LGBT mental health promotion and suicide prevention across a number of sectors and areas, including:

- Resourcing LGBT Groups for SP/MH work
- Health and mental health policy
- Health professionals
- Programme & service development and delivery
- LGBT young people and education
- LGBT young people in the community
- LGBT people in the workplace
- Future research

# Resourcing LGBT Group

- Relevant partners, including the Health Service Executive and National Office for Suicide Prevention, should further resource LGBT-specific groups and organisations nationally to engage in mental health promotion and suicide prevention work.

# Health Professionals

- The HSE should specifically target health professionals (e.g. GPs, A&E doctors and nurses, and hospital liaison psychiatrists) to increase their understanding of LGBT identity as a potential risk factor for self-harm, suicidal behaviour and depression.

# Implementation of Recommendations

- BeLonG To and GLEN funded by National Office for Suicide Prevention to work on implementing study recommendations
- Key activities include:
  - Support services for LGBT youth/parents (BeLonG To)
  - Targeting SP resources at LGBTs (BeLonG To/GLEN)
  - LGBT resources for MH professionals (GLEN)
  - LGBT training for voluntary & statutory SP and MH agencies (GLEN/BeLonG To)
  - National LGBT Helpline Project (GLEN)
  - *LGBT-Inclusive Practice* training for HSE staff (GLEN)
  - Tackling homophobia in schools (BeLonG To/GLEN)
  - Advocacy – LGBT status & visibility (GLEN/BeLonG To)

**THANK YOU**

**odhranallen@glen.ie**

- Most of the information in this presentation was extracted from *Supporting LGBT Lives: A Study of the Mental Health and Well-Being of Lesbian, Gay, Bisexual and Transgender People*, which is an Irish study funded by the National Office for Suicide Prevention (NOSP)
- The research was conducted by the Children's Research Centre, Trinity College Dublin and the School of Education, University College Dublin and authored by **Dr. Paula Mayock, Dr. Audrey Bryan, Nicola Carr and Karl Kitching.**
- The researchers can be contacted at [pmayock@tcd.ie](mailto:pmayock@tcd.ie)
- This research was commissioned by the Gay & Lesbian Equality Network (GLEN) and BeLonG To Youth Service
- GLEN can be contacted at [admin@glen.ie](mailto:admin@glen.ie)
- BeLonG To can be contacted at [info@belongto.org](mailto:info@belongto.org)