WHO WE ARE
A team from University of Melbourne (Ruth McNair, Jodie Valpied, Kelsey Hegarty), Turning Point Alcohol and Drug Centre (Amy Pennay, Dan Lubman), Gay and Lesbian Health Victoria (Liam Leonard), Deakin University (Rhonda Brown) and University of Illinois at Chicago (Tonda Hughes).

WHAT WE AIMED TO FIND OUT
1. The links between drinking and mental health
2. Key influences on drinking, including discrimination and cultural norms
3. Key influences on health care seeking for alcohol and mental health support
4. Develop health provider training regarding drinking and mental health of same-sex attracted women

WHAT WE DID
The study involved three methods of collecting information from same-sex attracted women:

1. an online survey completed by 521 lesbian, bisexual, queer, pansexual and other same-sex attracted women
2. interviews with 25 women
3. observation with 7 women at 10 events that involved drinking, over about 30 hours.

We also piloted a training workshop for health professionals, and received feedback on how to improve the content and format.

WHAT WE FOUND

About drinking and mental health

- Over half of women drank safe levels of alcohol, which was mostly to socialise and relax.
- 40.2% of women were drinking at problem levels, and queer and pansexual women were most likely to be concerned about their drinking.
- Large numbers of women had ever experienced depression (56.2%), anxiety (46.0%); lifetime suicidal thoughts (58.6%), self-harm (50.3%), and suicide attempts (23.7%); childhood abuse (> 75%) and intimate partner violence (almost 50%). There was a strong relationship between problematic drinking and depression/ anxiety.

Discrimination increases alcohol use

- Stress related to sexual orientation was strongly associated with problematic drinking, depression/anxiety and self-harm/suicidality. This related to experiences of discrimination, abuse, family rejection, and social isolation.

I started drinking a lot and... because it helped me with the difficulty I felt in coming out... It [also] helped me in social situations not to feel as anxious... and it helped me to fit in

The culture of drinking at events for same-sex attracted women was generally the same as that within Australia as a whole, although coming out was a particular time for drinking.

Problematic drinking differed with sexual identity

About influences on drinking

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Report available at www.glhv.org.au
About using health services for mental health or alcohol

- 52% women had received treatment for mental health or alcohol-use in the last year, but only 8 (1.5%) had been to a service for alcohol-use alone, 205 (39.3%) for mental health alone, and 58 (11.1%) for both reasons.
- **Bisexual women** were most likely to have used services for mental health care.

Health services used for mental health and/or alcohol over the past year

![Graph showing Health services used for mental health and/or alcohol over the past year.](image)

- Most **women did not feel they needed alcohol services.**
- A large proportion of women were **reluctant to use services for mental health care,** most commonly due to concerns about being judged about their alcohol use or mental health (38.7%) and not being ready to seek help (38%).
- 19% had **experienced discrimination within health services,** and a further 12% suspected discrimination, however this did not prevent women accessing other health services.
- **Connection to LGBT community** increased service use for mental health but not alcohol care. This indicates acceptance of the need for mental health care, but a denial of alcohol as a problem within the LGBT communities.
- **Having a regular GP** and being out to their GP helped women to access mental health and alcohol care.

About health provider training

- While specialist LGBT services were appreciated, most participants wanted general services to be **sensitive and knowledgeable** about their needs.

> They could start by recognising there is a significant difference... The experience of the lesbian woman versus the average heterosexual person is radically different.

- Piloting of the LGBT sensitive care module with a range of health providers indicated a high level of need for the training, and very positive evaluations.

WHAT HAPPENS NOW - PRACTICAL OUTCOMES

**Tell the LGBT community**

Please circulate this report as widely as you can.

**Creation of a tailored alcohol treatment program for same-sex attracted women**

In collaboration with Turning Point Alcohol and Drug Centre and Deakin University, we are developing an **online self-help** activity designed specifically for same-sex attracted women. This will be linked to **telephone counselling** by counsellors trained to be LGBT sensitive.

**Training for health providers**

The module for the training **workshop** is now available for health providers. An **online module** will also be available and will be embedded into curriculum for medical, nursing and other students.

**More research**

The ALICE research team is looking to continue this research through:

- investigating whether alcohol services that are specifically designed for same-sex attracted women are effective.
- developing and testing health promotion specifically for same-sex attracted women to reduce alcohol use and improve mental health.

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