

## **The Courageous Community: How LGBT+ people have developed resilience through extreme adversity.**

At the ICAAD conference in Paris in June this year I was asked to talk on the topic:

**“The Courageous LGBT+ Community. A Journey from Stigma to Identity and from Pain to Hope.” - Could it well be that a minority is actually leading the majority by example of self discovery and self introspection?”**

The talk was to touch on the below quote from the Berlin Chemsex conference from March 2018.

**“Surely gay culture is not something depressing? It is also about self discovery, adventure, relating to a group of peers, having meaningful relations, reaching out to others in order to lift each other up and having all sorts of primal instincts satisfied.**

Exploring this topic I decided to look at the adverse triggers and events that helped us as a community grow stronger and to explore how these triggers and events shaped us.

One of the things that really stood out to me as I began this task was how through my studies and career I had been searching the internet for the wounding and the negative impacts that had happened to LGBT+ people and for the first time I was exploring phrases like ‘resilience’ and ‘courage’ and ‘positive impacts’ and I was quite excited by what I discovered.

There are so many significant oppressions that we have experienced that have allowed us collectively look at ourselves and to become stronger.

The three I discussed were Minority stress, the AIDS crisis and most recently Chemsex.

### **HIV/AIDS**

LGBT+ people were affected by the AIDS epidemic on many levels.

We had to become resilient.

Due to the lack of resources to address this specific need, gay men learned several important things:

- To develop supportive networks
- To work through the guilt and sorrow that was a result of surviving.
- To learn to create community events in order to share experiences and emotionally support one another around grief and loss.
- Social ignorance and aggression was challenged in regard to AIDS which we discovered was mostly based on heterosexism & homophobia.
- We fought for access to affordable healthcare and other human services.
- We faced stigma and a moralistic majority who believed that we deserved HIV and AIDS.
- We challenged our own internalised homophobia.
- We developed new ways of honouring queer lives.
- We re-examined the manner in which a holistic authentic and inclusive community can be built.

- We learned a great deal about queer health & we developed an infrastructure and delivery template for queer health and the importance of valuing healthy LGBT+ people and difference as a community concern.

The LGBT+ community forged a sense of community, emotional support, and well-being that facilitated efforts to resist and transcend discrimination.

In many ways we are fortunate as it is a lot of this learning from the HIV era that we bring with us as we face the Chemsex problem and apply a holistic authentic and supportive template to it.

The most profound displays of resilience came in the form of collective efforts. Many grassroots movements began and combated the complacency around HIV service development. Gay men not only fought discrimination but fought for care, services, and resources. Being part of these movements helped LGBT+ people alleviate the sense of helplessness that was heavily felt at that time. Some LGBT+ people described how, in moving to action, healing ensued. The community came together during this time and created meaning, purpose and belonging.

### **Minority Stress**

For gay men and lesbians, the minority stress model (Meyer,2003) conceptualizes the impact of stigmatization on their experiences of stress. In this model, negative psychological symptoms increase as a result of experiences of discrimination, the anticipation of rejection, hiding or concealing the sexual minority identity, and the internalization of the negative societal views of gay men and lesbians. The final factor in the minority stress model is the coping efforts expended in efforts to ameliorate these stresses.

Minority Stress incorporates family rejection and marginalisation, bullying & homophobia, stigma, the transgender movement, the struggle to establish identity safely and HIV / AIDS.

In the work of Rostosky, Riggle, Gray and Hatton, (2007) they found that LGBT+ plus people utilised several main coping strategies to avoid dealing with negative rejection experiences. Examples of these coping strategies included positive reframing around identity and prejudice. Another one included an increased capacity to make meaning out of negative experiences particularly during the AIDS crisis. A third study of lesbians discovered that these women had an increased ability to understand and differentiate the contextual influences of their lives and were therefore better able to navigate cognitive complexity better and to author and steer their own lives

But one of the most notable positives that has come from minority stress is the development of community health hubs all over the world especially in large LGBT+ cities and which still exist today that include the GMHC in NYC, The Gay and Lesbian Centre in LA and ACON in Sydney and many more.

### **Chemsex**

Chemsex is the combination of crystal methamphetamine GHB methadone problematic sexual behaviour and online dating apps for gay men. The negative consequences of this include: drug and

sex addiction, drug induced psychosis, increased rates of HIV transmission and STI transmission, legal implications as sexual violation rape, physical abuse and theft.

Chemsex has been with us for over 20 years now. It started in the USA in the early to mid 1990's. We have had some time now to mobilise. Organisations like Crystal Meth Anonymous and community health care and holistic centres are in full swing providing specific treatments for the LGBT+ community. Those people in our community that are recovering from Chemsex are successfully completing addiction treatment inpatient and outpatient and are often returning to communities and find safe spaces and other LGBT+ plus people who support their recoveries. They are linked into LGBT+ supportive networks and community spaces and are engaging in activities that do not involve the use of substances as key elements. Cultural competence within many of these organisations is key and this in turn means that LGBT+ clients are having access to LGBT+ professionals who themselves have a lived experience of being LGBT+ or having been a Chemsex engager or addict or having had a mental health concern and are then finding not only identification but incredible amounts of understanding, empathy and support.

Perhaps we can't say for sure whether LGBT+ people are the minority leading the majority in terms of becoming more skilled at self introspection and self-awareness, developing the skills we need to function better, be more empathic, more courageous and more empowered human beings but what studies have shown and what is clearly evident as the world evolves is that LGBT+ people have experienced an enormous amount of adversity and in many cases have developed certain unique abilities and skills that our heterosexual counterparts may not have.

**Ilan H. Meyer**, "Prejudice as Stress: Conceptual and Measurement Problems", *American Journal of Public Health* 93, no. 2 (February 1, 2003): pp. 262-265.

<https://doi.org/10.2105/AJPH.93.2.262>

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**Rostosky, S. S., Riggle, E. D. B., Gray, B. E., & Hatton, R. L.** (2007). Minority stress experiences in committed same-sex couple relationships. *Professional Psychology: Research and Practice*, 38(4), 392-400.

<http://dx.doi.org/10.1037/0735-7028.38.4.392>