

Remarks on the launch of the LGBT Helpline Connaught Guide, 2 December 2016

Professor Brian Hughes

Recent years have seen enormous positive changes in the way LGBT diversity has become welcomed and accepted as a core part of Irish society. As well as changing attitudes, we have seen society itself, through its laws and policies, increasingly recognize and protect important progressive norms.

We have seen legislation on same sex-parenting rights and on gender recognition. We have seen the removal of discriminatory clauses from the Employment Equality Acts. And of course we have seen the recognition of Marriage Equality within our constitution, as the result of a direct vote by the Irish people just last year.

To say that the Marriage Equality referendum was an important milestone is guaranteed to be something of an understatement. Words can barely describe its significance, in both legal and human terms. Not only did it result in the legal recognition of all marriages, but the entire referendum experience changed the way Irish people think and talk about LGBT diversity forever. It was an overwhelming period, and one which was moving and emotionally draining for many.

Living through such moments in cultural history, while historic and profound, can also be intensely anxiety-provoking and stressful. We can note for example that last year, the year of the referendum, traffic to the LGBT Helpline website grew by over 65%. We can hardly be surprised that such a period, when people's experiences and even their very existence is a matter of daily public argument, much of it vitriolic and deliberately demeaning, will place upon them a significant emotional load.

I am a professor of psychology and my expertise ostensibly is in the experience of stress and anxiety. Most of this expertise has been built up professionally through my research and study, but like others my understanding of stress and anxiety is clearly intertwined within my own experience of life itself. From my point of view, all lives are to some degree stressful. But that is not to deny that some are more stressful than others.

In the few moments I have here, I would like to say a few words about why I believe the LGBT Helpline Connaught Guide that we launch here today is so important and welcome, and why such supports are not just laudable as humanitarian initiatives, but why they should be seen as part and parcel of a society in which life is lived well.

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First of all, positive social change often serves to reorganize the experiences of its beneficiaries. For example, as social acceptance for LGBT diversity increases, more people are willing to come out. But coming out can be a very challenging thing to do, all the more so as life goes by and people find themselves embedded in situations that may not reflect their true personalities, and so it can appear to carry significant costs as well as benefits.

Also, positive social attitudes lead people to come out at younger and younger ages. One consequence of this is that, nowadays, more and more LGBT youth come out at precisely those life stages in which young people struggle most with social identity, friendships, peer influence and opinion, and peer victimization.

Social acceptance has made coming out more possible, but for many the age of coming out now frequently coincides with periods of intense interpersonal stress and anxiety.

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I would like to give some facts and figures to explain why I believe supports and services like LGBT Helpline are so important. Much of them come from research conducted by psychologists. But before I do I want to acknowledge that, believe it or not, psychologists do not know everything.

In fact, psychology has not always been sensitive or rational about LGBT issues. Up until the 1980s, psychology listed 'homosexuality' as a mental pathology in its lists of clinical disorders. In my own undergraduate education, 'homosexuality' was covered in a textbook on human abnormality, and in a section of that textbook placed just after the topic of rape.

Psychology likes to congratulate itself on having moved forward on LGBT issues since the 1980s and 1990s. But a legacy remains. Even in the most recent clinical guidelines, controversy surrounds the way psychology depicts transvestic disorder and gender dysphoria. Transvestic disorder is defined in terms of the distress a person feels when harassed by others. But to suggest that a person who is victimized by others has a mental disorder, rather than to challenge and blame those around them who do the victimizing, seems to me very unfortunate indeed. Gender dysphoria is defined as when biological gender as classified (by others) at birth is contrary to one's own self-identity. But why is this considered a psychiatric problem as opposed to a physical one? To me this reflects a heteronormative legacy bias within the psychological professions.

In short I believe that psychology still has some way to go on these matters.

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Nonetheless, it is worthwhile to consider what the psychological research has revealed about LGBT experiences, both negative and positive.

By way of a preview, I can tell you that the research consistently shows us that LGBT persons benefit clearly from supports unique to their circumstances and experiences, not because they are somehow 'mentally disordered' or at particular biological or intrinsic risk of mental health problems -- but rather, because LGBT persons face largely extrinsic challenges associated with environmental, social, and community factors, such as isolation, victimization, discrimination, and a range of adverse social attitudes many of which are held and communicated unintentionally by those around them.

The biggest challenges flow from something we now call "minority stress" – the distinct stress associated with minority identities. Usually we find three risks: the risk of facing actual hostility and rejection; the expectation that one will be treated this way (which is often as powerful as the reality); and, on occasion, the internalizing of other people's expressed negative attitudes about you.

Much data now suggest that LGBT persons are at elevated risk of stress, anxiety and depression. Recent US studies report past-year prevalence among LGBT adolescents as 25% for anxiety disorders, and 10% for mood disorders, much higher than in the rest of the population. Studies also show elevated rates of PTSD, alcohol abuse, and suicide ideation and attempts among LGBT communities.

Studies have also implied distinct measurable health disparities, such as elevated risk of physical health problems, most likely resulting as secondary consequences of stress (due to low mood, poor diet, alcohol use, and so on).

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The research also tells us much about what makes stress worse, but in so doing it tells us what protects us against this kind of stress.

The interesting point is that the research points primarily to risk factors relating to institutional and community issues, rather than issues concerning the specific person themselves.

For example, where there is a lack of support from life-relevant institutions – schools, faith communities, even families – we find elevated risk of problems with anxiety, depression, and stress. A logical conclusion is that we can enhance lives by intervening to change these institutions to make them more supportive. A specific example relates to antibullying laws. In the US, LGBT youth living in counties with weaker LGBT-specific antibullying policies are twice as likely to report past-year suicide attempts that other youth. It stands to reason therefore that such laws enhance the public good and should be the norm and not the exception.

Family repudiation, where a person's family reacts negatively toward an LGBT family member, is another risk factor, and one which highlights the benefit of supporting families and LGBT persons through the coming out process.

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But the research also shows us clearly that, just like people in general, the vast majority of LGBT persons live full lives as healthy and productive adults. In fact there is nothing in the research to suggest that LGBT persons are any less likely to do so than anyone else alive.

The research picture suggests that the a number of factors are particularly effective in promoting good mental health:

- Affirmative and protective environments
- Explicit inclusion of LGBT experiences in mainstream contexts (such as inclusive school curricula)
- Parental and peer support -- many studies show that having sexual minority friends is associated with good mental health, for *both* LGBT *and* non-LGBT persons
- And romantic relationships -- but note the challenge here that people will face when there are social and cultural restrictions on same-sex romantic behaviour.

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Finally I want to make a few brief points about the other dimension of the LGBT Helpline Connaught Guide, one that may not otherwise be referred to. This is the fact that it is a guide for Connacht in particular.

So why is this important? Well, let's face it. As cool as Connacht is, it is distinct in some ways in which we may wish it were different. For example, even though the Marriage Equality referendum was overwhelmingly carried and euphorically welcomed, you might recall that the only county in which a majority voted against marriage equality was, in fact, located in Connacht.

By and large, there can often be differences between urban centres like Dublin and the largely non-urban and small town environments we have here in the west. These differences are well known to psychologists and mental health professionals.

Non-urban places afford less anonymity, and can present relatively fewer peers and role models to whom you can look to for tangible consolation and validation.

Non-urban places also tend to show greater levels of religious and cultural conservatism, no matter how these influences diminish over time at the national level. In the days before the Marriage Referendum, I read in one local newspaper in the west (not in Galway city) that it was not interested in the outcome, because none of its readers cared about LGBT issues. According to this paper, the Marriage Referendum was a politically correct concern solely of well-to-do arty-farty celebrity snobs in Dun Laoghaire and Dublin 4.

Although this might seem benign, such formal denial of what was an issue of mass public interest – to be assumed given the turnout in the west as everywhere else – has the effect of subtly excluding the LGBT experience from mainstream consideration. The newspaper might consider respect for LGBT diversity to be an urban affectation. In psychology we consider this type of attitude a ‘micro-aggression’.

So it matters that we give attention to the fact that the LGBT experience in Connacht has its own features and realities.

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I want to congratulate the National LGBT Helpline in producing this Connaught Guide, and indeed on all its work. As you now, the LGBT Helpline was established in 2010 and provides a network of local helplines, and latterly online instant messaging services, where trained volunteers offer support and advice to thousands of callers of all ages across Ireland.

The Connaught Guide is very comprehensive, providing information on services offering social support, groups and events, family support, support to people young and old, help with coming out, advice on sexual health, trans support, and practical guidance on dealing with negative experiences with other people.

The Connaught Guide is not just a useful resource. It is good for the soul! It is just so gratifying to see listed on its pages the activists and supportive services who work in this area right here in Connacht. It is not just a bibliography of services, it is a beacon of hope, part of the fabric of the new Ireland that we are simply privileged to see unfolding before us.

Thank you very much for asking me here today. It is my honour to be here, to congratulate all involved, and to formally declare the LGBT Helpline Connaught Guide launched!

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