Alcohol, tobacco and illicit drug use among lesbian, bisexual and queer women in Sydney: Insights from the SWASH survey

Presented by

Dr Julie Mooney-Somers Sydney Health Ethics, Faculty of Medicine & Health, University of Sydney **Co-author** Dr Rachel Deacon The Langton Centre, SESLHD Central Clinical School, University of Sydney



@JMooneySomers

Women and HIV risk behaviour – the early concern



Mardi Gras Parade 1996

How dose SWASH run?

Every 2 years since 1996 Events and venues during Mardi Gras season <u>TWO</u> page survey Peer recruiters

2018 n=1272

Paper survey + peer recruiters at 20 venues/events during MG

Online survey for 1 month post MG; recruitment via Facebook and ACON networks









SWASH is about more than sexual health

Community engagement

Sexual practice, sexual partners, relationships

Alcohol and other drug use, help seeking

Screening: Cervical cancer/breast cancer/STI/HIV + HPV vaccine and CCS preferences

General health and GP satisfaction

Mental health: access, diagnosis, acute distress, suicidal ideation, self harm

Experience of DV and anti-LGBT violence & abuse

Critical health indicators

2018 SWASH sample: demographics

Median **age** 34

Highly educated 77% post high school qual

Majority FT **employ** 56%

Income (60k+) 45%

Dependent children 16%

Anglo-Aust 63% + European 15% + Asian 4%

Aboriginal and Torres Strait Islander 7%

'Gay Sydney' 3%

Eastern suburbs 5%

City + inner west 43%

Western suburbs + BM 17%

Is the SWASH sample representative?

2018 SWASH sample: community connection

Very/mostly community connected ~50%

Most/all friends L&G/LGBTQ ~50%

Attended

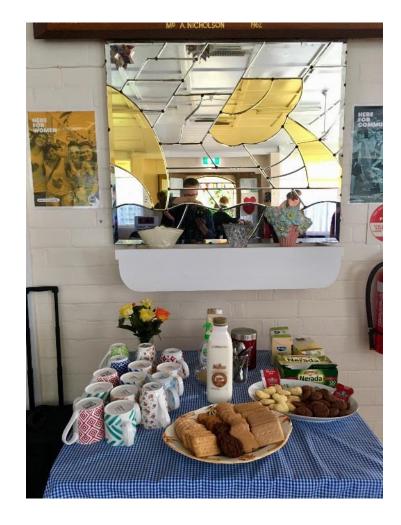
L&G/LGBTQ event 2006 85% \rightarrow 2018 72%

Lesbian/queer women's night 2006 72% \rightarrow 2018 45%

Gay night 2006 $61\% \rightarrow 2018 35\%$

LGBTQ group meeting 2006 $35\% \rightarrow 2018 23\%$

LGBTQ community event 2008 56% \rightarrow 2018 55% [#]

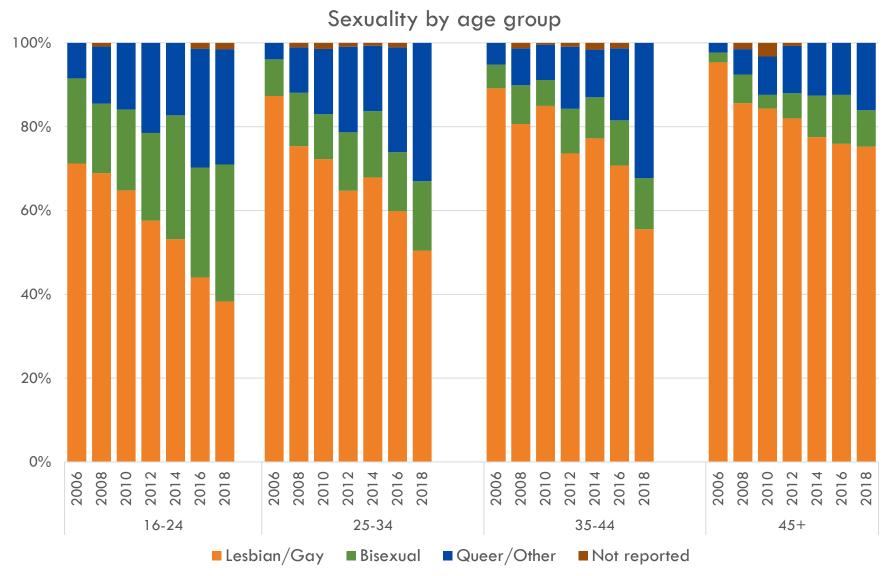


Gender identity indicators

New 2-step gender questions in 2018

- Which of the following best describes your gender identity: female, male, nonbinary, other (please specify)
- What gender were you assigned at birth: female, male

Sexuality indicators



Alcohol use indicators

Table 30: Frequency of drinking alcohol					
	2014	2016	2018		
	2012.2				

NHMRC: drinking no more than two standard drinks on any day reduces the lifetime risk of harm from alcohol-related disease or injury. **48.7% exceeding**

NHMRC: drinking no more than four standard drinks on a single occasion reduces the risk of alcohol-related injury arising from that occasion. 16.9% exceeding

38.8% 5+ drinks monthly or more often

Total	1100 (100)	623 (100)	1272 (100)
Non-drinker	94 (8.5)	83 (13.3)	138 (10.8)
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Illicit drug use indicators



Any illicit drug in past 6 months: 46.7%

Ever injected: 7%

Any of the above	524 (47.6)	280 (44.9)	595 (46.8)
Other drugs	41 (3.7)	19 (3.0)	47 (3.7)
New/emerging psychostimulants ³	121. 	4 (0.6)	17 (1.3)
GHB	32 (2.9)	13 (2.1)	33 (2.6)
Special K/ ketamine	49 (4.5)	28 (4.5)	89 (7.0)
LSD / trips	78 (7.1)	35 (5.6)	82 (6.4)
Amyl / poppers	106 (9.6)	50 (8.0)	122 (9.6)

NOTE: Summary table; adds up to more than 100% because respondents could be in more than one category.

¹ From 2016 respondents were asked separately about natural and synthetic cannabis; in 2014 we have assumed all use to be natural form.

²Use of speed and crystalline forms of methamphetamine no longer asked separately from 2016; we have collapsed 2014 responses for this report.

³ New question in 2016.

AOD treatment seeking

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11% ever sought help for AOD issue
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Treatment underutilisation? Treatment effectiveness?

GP (53%)

self-help groups (36%)

friends/relatives (35%)

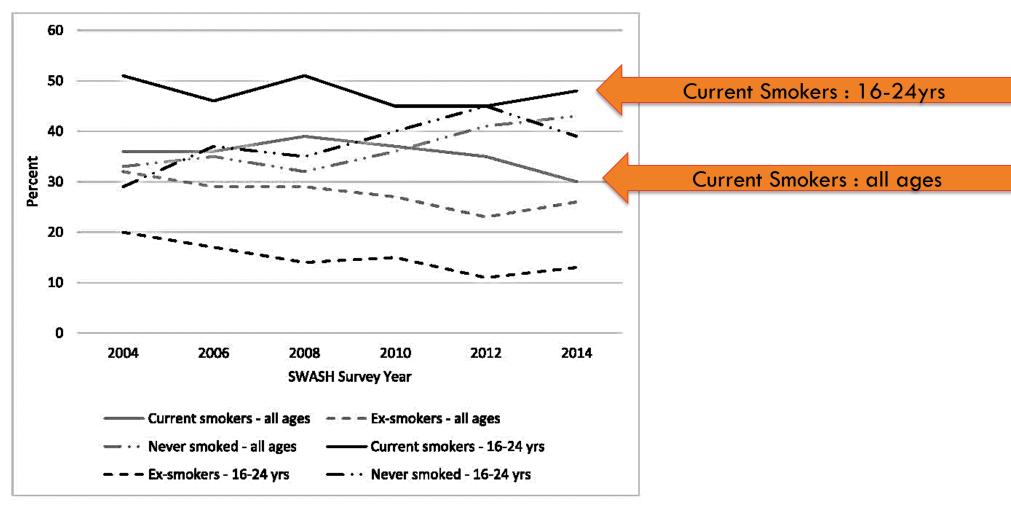
specialist drug and alcohol services (23%)

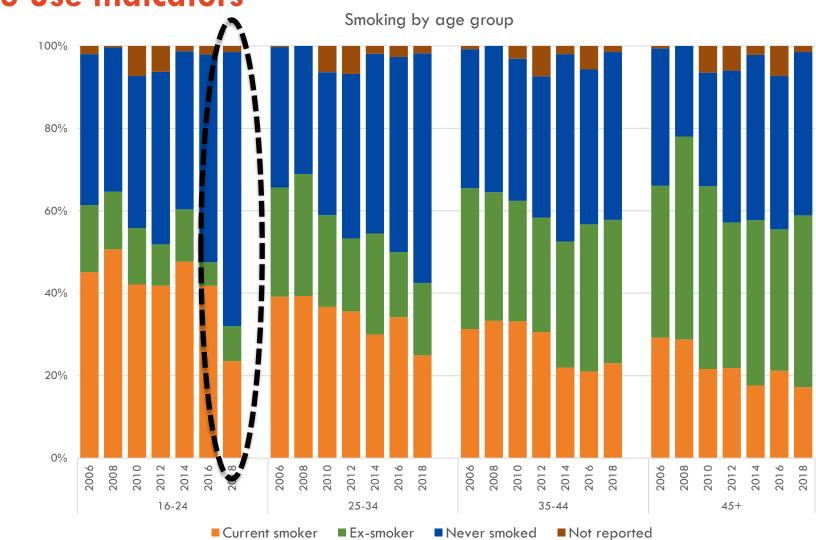
Most helpful support: counsellor/psychologist (26%), self-help groups (13%), friends/relatives (10%), GP (9%), and specialist drug and alcohol services (9%)

Further AOD research, interventions, KT

- Clinical staff and LGBTI service users experiences of substance use and mental health treatment. Funded by USyd-UNSW
- → LBQ women and non-binary people cohort study on the epidemiology of substance use and related harms. NDARC seed funding
- →Community action plan: alcohol messaging for LBQ women and non-binary people. Local Drug Action Teams (ADF)

Tobacco use indicators





Tobacco use indicators

Further smoking research, interventions, KT

→ SWASH smoking co-factors (Deacon 2016)

 \rightarrow Cancer Institute NSW funding with ACON:

Systematic Review of LGBTQ smoking interventions (Berger 2017) Changes in social networks of smokers vs recent quitters (Kolstee 2018)

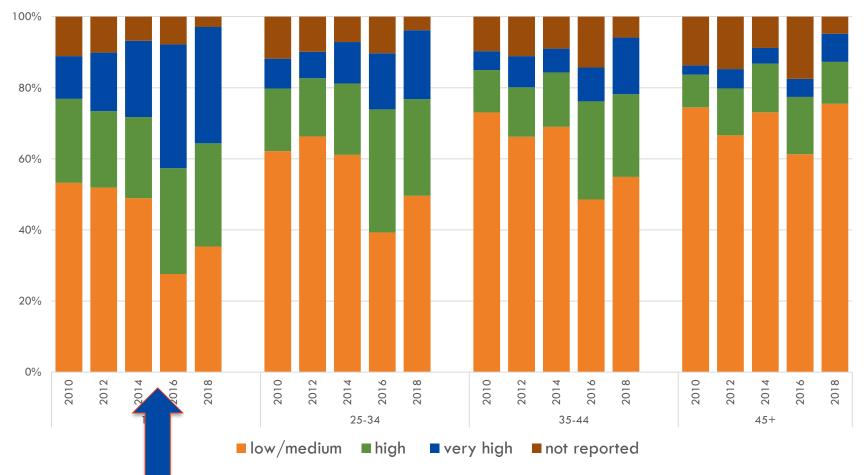
How mass media campaigns have failed (prep) Smoke Free Still Fierce campaign

→ MPhil project
 NDSHS smoking co-factors (Praeger, 2019)
 Systematic review of smoking factors (prep)

ightarrow Quit Victoria



Mental health indicators



Psychological distress (K6) by age group

Mental health indicators

Have you ever felt that life was not worth living? (2018)

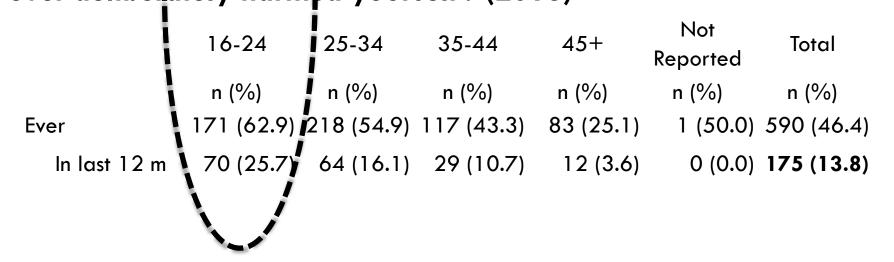
 16-24
 25-34
 35-44
 45+
 Not Reported
 Total

 n (%)
 n (%)

 Ever
 189 (69.5)
 269 (67.8)
 170 (63.0)
 176 (53.2)
 1 (50.0)
 805 (63.3)

 In last 12m
 121 (44.5)
 34 (33.8)
 80 (26.9)
 56 (19.6)
 0 (0.0)
 391 (30.7)

Have you ever deliberately harmed yourself? (2018)



What do the critical indicators tell us?

Alcohol use remains high Illicit drug use remains high Tobacco use may be reducing Psychological distress rising

LBQ women and non-binary people's AOD use looks different to heterosexual women's AOD use

Specific concern for young LBQ women and non-binary people

Are you including sexuality and gender identity indicators in your research?

Lots of local expertise on how to consult, measure, analyse, interpret, and disseminate findings related to sexuality and gender identity...