



All Right? An Exploration of Wellbeing in the Ōtautahi LGBTQIA+ Community



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About the research

All Right? was set up after the earthquakes to help the population recover from the 2010-11 Canterbury earthquakes, recognising psychosocial recovery can take at least a decade. The campaign has been consistently positively received with 84.7% of survey respondents seeing or hearing about the campaign and 90.7% agreeing the messages are helpful. The team behind *All Right?* regularly conduct research such as this to understand the hurdles to people's health in Christchurch and how they might best support the community's path to positive wellbeing. *All Right?* also commissions reports into smaller groups within Christchurch to ensure all voices are being well represented and to understand where wellbeing outcomes diverge due to ethnicity, sexuality, age, language or gender identity.

This research sets out to understand how the rainbow community views Christchurch as a place to work, love and play; both its limitations as a city and its standout features. It also hopes to understand how queer people define their strengths and rate their wellbeing, to understand their concerns when it comes to wellbeing and what people wish they could change. Additionally, it was an exciting opportunity to speak to LGBTQIA+ parents to learn more about their context, along with the journeys of transgender people in Ōtautahi Christchurch and our rangatahi to hear more about the current state of play for the younger generation.

As time goes on and as life has returned to 'normal' in post- earthquake Ōtautahi Christchurch, it is important to continue assessing and challenging barriers to equality. Talking to the rainbow community of Christchurch about their lives post-earthquake gives a rounded view of such barriers, in addition to helping the community glean a thorough understanding as to how their peers are faring and whether there are additional ways they can support each other.

Note on Labels

'LGBTQIA+', 'Queer' and 'Rainbow' are used in this report as umbrella terms to describe people who do not ascribe to typical gender norms, do not identify as heterosexual/straight, and/or were born with bodies that do not match common biological definitions of male or female. We recognise these terms might not suit everyone, nor do some ascribe to any label at all.

These terms include a range of identities, expressions and experiences, including but not limited to:

- Sexual orientation other than heterosexual (for example, gay, lesbian, bisexual, takatāpui, queer, pansexual)
- Diverse gender identity (for example, trans, transgender, transsexual, takatāpui, whakawahine, tangata ira tane, fa'afafine, fa'afatama, genderqueer, fakaleiti, leiti, akava'ine, fakafifine, vakasalewa, FtM, MtF, non-binary)
- Diversity of sex characteristics including genitals, gonads or chromosome patterns (for example, intersex)

Introduction

1985

'Go back into the sewers where you come from... let all the normal people stand up... we do not want homosexuality legalised. We don't want our children contaminated by those people.' Norman Jones MP

2017

'Today we are putting on the record that this house deeply regrets the hurt and stigma suffered by the many hundreds of New Zealand men who were turned into criminals by a law that was profoundly wrong, and for that, we are sorry.' Amy Adams, Justice Minister

Homosexuality was illegal in New Zealand 32 years ago. It would be challenging to find a similar minority group in society who have experienced such a rapid and significant rate of social and legislative change in such a short period of time. Accordingly, the experiences of a 15-year-old transgender male can be assumed to be vastly different to a 65-year-old gay man who lived through homosexual law reform. The experiences of a coming-of-age lesbian who has legal access to IVF and the potential to parent in a relatively more accepting society cannot be swept up in the experiences of all lesbians. It is a significant task to summarise the experiences of such a diverse group, with men, women, transgender people, ethnic minorities and those at various points of the age spectrum having different social contexts in which to define the issues, along with their strengths and sense of wellbeing.

Hearing the inner most thoughts, fears, hopes and experiences of members of Ōtautahi Christchurch's rainbow community has been a privilege. Through the course of key informant interviews and focus groups, many hours of rich qualitative data were collected. There were wide ranging and, at times, disparate opinions, along with some clear ideas as to the gaps in Ōtautahi Christchurch for queer people. Testing these opinions via the online survey aided understanding as to whether the early findings were the thoughts of the many or the few; not that views held by a minority are unimportant, but it was a priority to register the strength of opinion around

matters such as safety or services. This report records people's thoughts and common themes, and can be used to raise awareness, to educate, to influence and, for some, to reassure.

There was a sense of appreciation from most participants about their opinion being sought and valued. Equally, participants seemed to enjoy the opportunity to hear others from their own community deliver their thoughts so honestly. Whilst there were enthusiastic and committed contributions from participants once they were in the room, it wasn't always easy to get adequate numbers to some of the focus groups. The Takatāpui/Pasifika group was cancelled due to low numbers, although low numbers may have also been influenced by the engagement timeframes.

Twenty-six people gave their time to speak with researchers; eleven men, eleven women and four participants who identified as non-binary. The majority of participants were Pākehā white European, however there were participants from the Asian, Pasifika and Māori communities, along with migrants to New Zealand from Germany, Australia and the United Kingdom. 263 people participated in the online survey; they were asked over 40 questions which took around 30 minutes to complete. Participants were given a range of options to respond to, usually ranging from 'totally disagree' to 'totally agree' with opportunity to comment with greater clarification if needed. There were sections solely for transgender people, for under 26-year olds and for parents in order to test some of the specific findings from the focus groups. Given our sampling methods, findings are not representative, but the methodology produced a useful snapshot.

Overall, the research pointed to a mostly optimistic community, for those who felt they belonged to one at all. It seems there is an underlying energy to converse, to give back and to overcome the challenges, with visibility and ensuing awareness plus social opportunities potentially being key catalysts to changing the playing field for many. Whilst there was general agreement that mental health issues are a significant concern, there was a feeling that there are signs of progress on safety and inclusion in Christchurch.

The response to the wellbeing questions (WHO-5 questionnaire) was encouraging. The average scores among survey participants were similar to those of the general population scores from the Canterbury Wellbeing Survey. Still, about a third of respondents' scores indicated poor emotional wellbeing and a possible risk of poor

mental health. It was also noteworthy that 75.7% actively look after their mental health and that music, books, talking and exercise were the most selected options in terms of stress management. 61.7% agreed or strongly agreed they had a robust support network to turn to although 59.4% wished they had healthier techniques to manage stress.

The experiences of lesbians, gay men, transgender and gender non-conforming people are disparate. The responses from the online survey and the focus groups around gender stereotypes, the 'rules' of femininity/masculinity, along with the internal prejudices that can be ascribed to hierarchies of gender, demonstrate we are bound to oft invisible norms and biases that pervade much of our lives; research participants suggested these norms and biases are detrimentally limiting.

Key Findings

On the whole, findings demonstrated Ōtautahi Christchurch has a thriving population of thoughtful, diverse and good hearted individuals, some of whom feel happy and safe, others less-so. The LGBTQIA+ community have some unique strengths and also faces some challenges. In particular, for key areas of education, health, and workplace wellbeing there are things going well—and things that need to change.

Whānau

A theme for focus group members was ensuring they have a support network in the form of both family and friends – for most, it was a mixture of the two. However, more respondents would turn to friends rather than family if they were ill. However, it seems more respondents would turn to friends rather than family if they were sick (39.0% agreed they would turn to friends, 31.1% to family).

Some struggled with familial relationships in the past but made a kind of peace with their parents over time as the latter had grown to understand or accept their sexuality or gender identity. 77.7% of respondents agreed that having at least one person in the family support their sexual orientation or gender identity has made things easier.

Within the focus groups, no apparent differences between age groups appeared; some younger people had very accepting parents, some didn't, and the same pattern occurred in the over 40-year-old groups. One young transgender man's grandmother had paid for his top surgery – a touching example of how age isn't necessarily a barrier to acceptance. Survey results, however, showed a tendency to find younger family members more accepting than older generations.

Many of the participants reported that their experiences coming out to their whānau were positive, however, there were also narratives highlighting how negative attitudes towards gender and sexual diversity could create long periods of separation in family networks. Common narratives included that many family members became more accepting over time, and that there was sometimes a disconnect between supportive attitudes and supportive actions within families. Some commented that they would have benefitted from family support before they came out, for instance, if parents had been explicitly supportive of LGBTQIA+ people.

For many, it was understood that being out to and accepted by one's whanau was valuable in its own right. For some, this was also a protective factor in the face of adversity.

'I went to a Catholic school... They tried to kick me out when I came out, and lots of teachers and classmates were really mean with me, but I have the opportunity of having an amazing family support through those days.' –Online respondent

Overall, a strength that emerged through the research was the ability of the queer community to build strong kinship networks that included friendships.

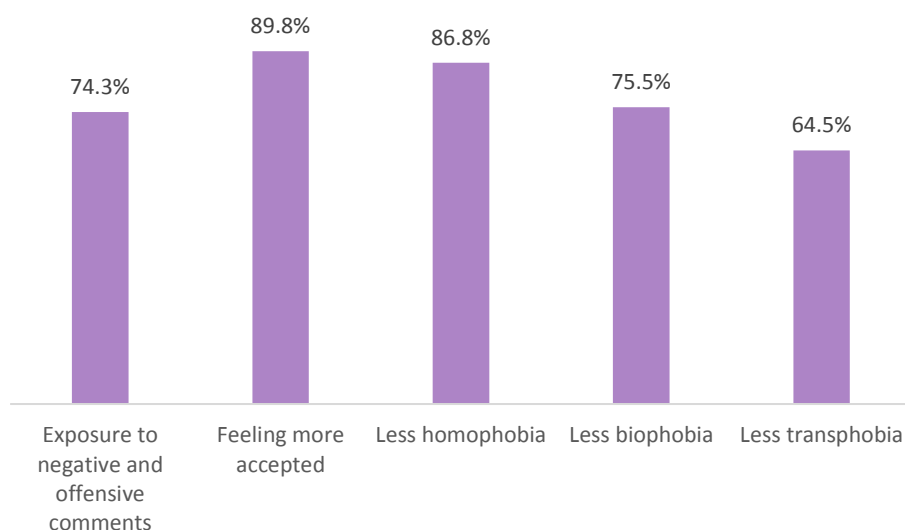
Safety and prejudice

Some people find Christchurch an unsafe and at times aggressive city, while others felt it was a safe place to call home.

In general, progress has been made in safety and inclusion—89.8% have felt more publically accepted in the last three years. 86.8% felt there has been less homophobia in public spaces, 75.5% less biphobia and 64.5% less transphobia.

However, 74.3% of survey respondents had experienced negative or offensive comments in public over the last three years.

Figure 1. Safety and Prejudice - Reflections on Previous Three Years



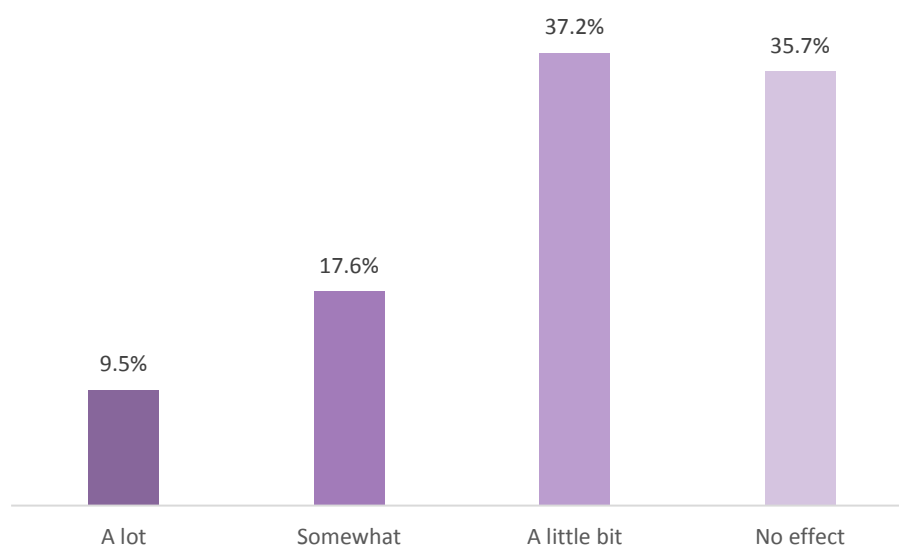
Respondents reported that while homophobia might be decreasing, transphobia is a key issue.

'I'm more worried about transphobia than homophobia' -Survey respondent

The portion of the survey devoted to transgender participants revealed a relationship between transphobia, conformity, and safety. 91.7% of respondents agreed that Christchurch is a safe place to be transgender if you 'pass' as cisgender; if you do not 'pass' as cisgender, the figure drops to 0.0%.

The rainbow community continues to overcome prejudice. Over all time, 64.3% believed prejudice had interfered with their living a fulfilling and productive life - within this, 9.5% chose 'a lot' and 17.6% chose 'somewhat', whilst 37.2% selected 'a little bit'. 35.7% felt it had no hampering effect at all.

Figure 2. Effects of Prejudice on Living a Fulfilling and Productive Life



Some parts of the community may face multiple forms of prejudice.

- 51.2% believed racism is an issue in the rainbow community
- 47.7% believed misogyny is an issue in the rainbow community
- 66.7% felt that 'straight acting' (a term used in the focus groups) guys fared better than 'camp' men in the rainbow community.

These experiences may make the community more compassionate. 80.9% of online respondents said due to their own sexuality or gender identity, they had greater empathy for those who were different or marginalised.

When asked about their most pressing concerns, 22.2% referred to bullying and safety.

In workplaces

- 53.1% of people agreed their workplaces were inclusive and they felt comfortable being out at work
- 55.3% felt no need to be out as they were there 'just to do a job'—whether as a personal preference or for their own protection. Others felt it was beneficial to be able to bring their 'whole self' to work.
- Homophobic, biphobic and transphobic language was still considered an issue, although some participants felt that disparaging language wasn't always intended to be hurtful or homophobic.

While 67.1% would like to see their work environment display a rainbow friendly emblem such as a poster, there was also some scepticism.

'Being LGBTQIA supportive should be the norm and a legal requirement, not something to be praised for.' –Online respondent

'My place of work received the Rainbow Tick, but I felt it was underwhelming and far more of a marketing incentive than a true desire for inclusivity. If businesses undertake this sort of training, they should not seek market benefit from it. It's just the right thing to do.' – Online respondent

A theme in feedback was that a lack of visibility felt difficult, and compelled many to be 'out and proud' - without visibility, how would those who harbour prejudice get to know queer people and therefore become less fearful?

In schools

There is a common understanding that with more LGBTQIA+ orientated groups in schools and universities now, visibility of the community has improved and had a significant impact on safety and inclusion. However, there is still a ways to go.

- School didn't feel particularly safe for lesbians or young gay men, even less so for other groups. About half of respondents disagreed that school was a safe place to be gay or lesbian, and disagreement jumped to 63.6% for queer or 'non-conforming' people and 75.0% for transgender people.
- Participants didn't believe the sex and relationships education offered at schools was of a high enough standard for anyone, let alone LGBTQIA+ young people. 49.7% of respondents expressed the need for a higher quality of

sexual education in schools and 24.2% believed the need to challenge binary gender ideals in schools as key concerns for the community.

- There were common accounts of troubling levels of homophobia in single-sex schools, including hyper-masculine behaviour at all boys' schools, lack of inclusion, and avoidance of queer issues in sex and relationships education.
- The majority of the participants responded that their teachers were not well-versed or able to challenge homophobia (57.6%), biphobia (78.4%), and transphobia (64.8%) in schools, contributing to feeling a lack of safety and inclusion in school environments.

With age

'Gay people get old too!'

Another aspect of diversity within the LGBTQIA+ community is age. The experiences of a 15-year old transgender male can be assumed to be different to a 65-year old gay man who lived through homosexual law reform. Yet there was interest in inter-generational connection and the issues for older members of the LGBTQIA+ community.

- There is concern that once people become less articulate or their voices less heard as they age, their sexuality or gender identity might be less respected.
- 45.6% of the respondents agreed with the statement, 'I am worried about not being looked after or respected as an LGBTQIA+ person when I am at retirement age', with another 25.6% neither agreeing nor disagreeing. The additional statement of 'I am confident I can find an LGBTQIA+ friendly rest home in the city' showed 22.2% agreed, with another 37.3% neither agreeing nor disagreeing.
- Lack of information about social opportunities for older people might be an issue.

Rainbow community

Across the qualitative research, there was a clear sense that kinship and connection were vital to wellbeing. The rainbow community is one potential source of kinship

and community, however, the online survey indicated 44.3% of recipients felt they didn't have enough connection to the rainbow community.

'I have some queer friends but I don't feel like I am part of the Christchurch queer community. I would love to meet other fellow queers but I don't know where to start looking' - Online respondent

The gay community has to be one of the most judgmental communities known to mankind. If you don't fit into one of the cliques or "tribes" then you're an outcast.' – Online respondent

'Is there even a community anymore? Even ten years ago I'd say yes, but being gay isn't enough anymore - there are so many of us that it often feels like some are desperately hanging onto the notion of community and it feels forced. By continuing to push the notion of a community it perpetuates the idea that we are different. The only thing that makes us different is who we are attracted to.' – Online respondent

But some felt safe, connected and involved.

'Christchurch has recently started more events for our community and I have found a group of fabulous queers' - online respondent

'We look out for each other, it's a tight knit community' – over-40-year-old female

Lack of queer venues was a popular topic – participants thought a suitable space would increase visibility, connection, opportunities to be 'seen' and to support others who were in need.

Lack of toilets was also raised in the section of the survey devoted to transgender participants – 64.0% of respondents said that going out to do in anything Christchurch is a major challenge due to lack of gender neutral bathrooms.

Allyship

Particularly in the reflect-back session, participants spoke of the importance of strong allies and becoming a good ally. Some talked about supportive friends and acquaintances who wanted to demonstrate support but needed some guidance around how to do so. Taking responsibility to educate oneself, especially around language, was one important aspect of allyship mentioned by several. Taking steps to help people feel a sense of belonging was at the heart of allyship; for organisations, this could include messages of visibility and positivity.

Health

- Mental ill-health is a significant concern and is felt to have the greatest impact on wellbeing and sense of community for the LGBTQIA+ community. Themes of previous experiences of stigma and a lack of dedicated and competent mental health services to support the LGBTQIA+ community all emerged through the research.
- The online survey asked how participants actively looked after their own mental health. This was one of the most-answered free-text responses, where participants demonstrated a strong degree of emotional literacy and a wide range of strategies for keeping themselves well.
- Although not identified among the top issues for the LGBTQIA+ community in Christchurch, 20.4% responded that drug and alcohol abuse were a concern. Contributors feelings were that drugs weren't as a big a problem as in other big cities and whilst alcohol is a significant problem, probably no more so than for the rest of the NZ population (although some pointed to research that alcohol abuse is an issue disproportionately for the LGBTQIA+ population).
- One of the findings from the focus groups was lack of knowledge as to what services exist, how safe they are and where someone in need might find support. For young people, Qtopia, Kindred and Youth Hub 298 were mentioned, however there seemed to be a dearth of support options for older people. Fertility services were considered to be ill-equipped to respond to the needs of rainbow people.
- Just over half of contributors had a GP and were out to them. Strong themes emerged regarding the importance of inclusive language and practice, appropriate cultural training and engagement and fewer assumptions about heterosexual practices and cisgender identities as the default.

Methodology

There were four elements to the process which enabled us to hear a wide range of voices, as well as collect both qualitative and quantitative data. The agreed format was as follows:

1. Interview a range of key informants to gather a broad-brush picture of what is currently happening in Christchurch and to guide the focus group direction;
2. Run focus groups with a diverse range of community members to gather qualitative evidence and feedback;
3. Engage the community with an online survey to compile quantitative evidence to further inform and test our findings.
4. Reflect findings back to the community with opportunity for input.

Key informant interviewees were selected with the help of the *All Right?* team, each being well-connected in the Ōtautahi Christchurch Rainbow communities, to help give a general picture of issues, highlights, hopes and concerns. To ensure we collected opinions from varying demographics, our key informants came from a range of ethnicities, ages, sexualities and with diverse expressions of gender identity. The interviews took place in August and September 2018.

Interview questions were a guide for interviewers; whilst all groups were asked the same questions, the discussion segued into different areas in each focus group, for example, the younger people talked more about their school experiences. However, the parent specific group spoke more about general queer issues, rather than their children or parenting. The guiding questions were based on the following:

- The positive experiences of being LGBTQIA+
- The challenges of being LGBTQIA+
- Whānau and support networks
- Safety in Christchurch
- The key issues in Christchurch for LGBTQIA+ people
- Wellbeing
- Services

Focus groups and the online survey were advertised through a range of online channels: social media, wide ranging email invitations, and of course, word of mouth.

The focus groups took place over September and October 2018. The online survey was available for response during the month of December 2018.

The advertised focus groups were as follows:

- LGBTQIA+ parents
- 40+ women and those who identify as non-binary
- 40+ men and those who identify as non-binary
- 14 – 25 year olds
- Takatāpui, Pasifika rainbow community
- Anyone who couldn't make the proposed dates or doesn't identify with those groupings.

The survey was constructed from the qualitative data pulled from the focus groups and interviews to further understand whether those views were widely held across Ōtautahi Christchurch. Some of the statements tested were direct quotes from focus group participants, and therefore the language or sentiment don't necessarily reflect those of the researchers or the *All Right?* campaign. Additionally, some generic questions used by the *All Right?* team in their broader surveys have been included to compare populations.

263 participants began completing the online survey. Not all participants finished the survey, and not all participants answered every question (including because not all sections were relevant for each participant, such as the questions relating to parenting, youth-based experiences, and older age). Percentages appearing in the report are calculated based on the total number of answers to the specific questions (i.e. omitting skips and 'N/A' responses). The data from sections which were not completed by all participants has been used to draw attention to the experiences of specific cohorts, and in the report the number of completed responses for cohort-specific sub-sections is explicitly stated.

Findings were compiled into a report and a set of one-pagers on thematic topics. These were shared at a rainbow community gathering in order to reflect back the research to the community and provide an opportunity for any clarifying input or adjustments. The gathering was a regular meeting of queer young people through the group 'Qtopia,' with an extended invitation to those who had participated in the

research any others interested in hearing about the research and sharing their feedback. About sixty people participated.

The methodology provides a snapshot and is not representative of the LGBTQIA+ population in greater Christchurch.

Online survey participant demographics

Age

The survey offered nine categories for participants to select their age. The ages between 15 and 29 were broken into smaller groups in order to highlight the range of younger participants in the survey. The largest cohort was in the 20 to 24 age range, with 23.0% of the participants. The smallest cohorts were participants 70 and above with 2.6%, the 60 to 69 range with 4.6%, followed closely by the 15 to 17 and 18 to 19 with 6.6% and 7.2% respectively.

Figure 3. Age of Participants - 15 to 29 Cohort

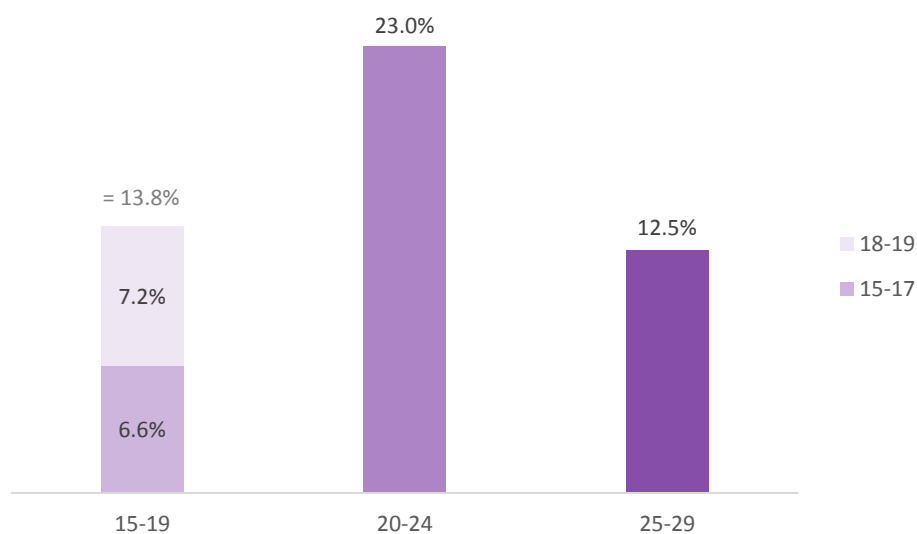
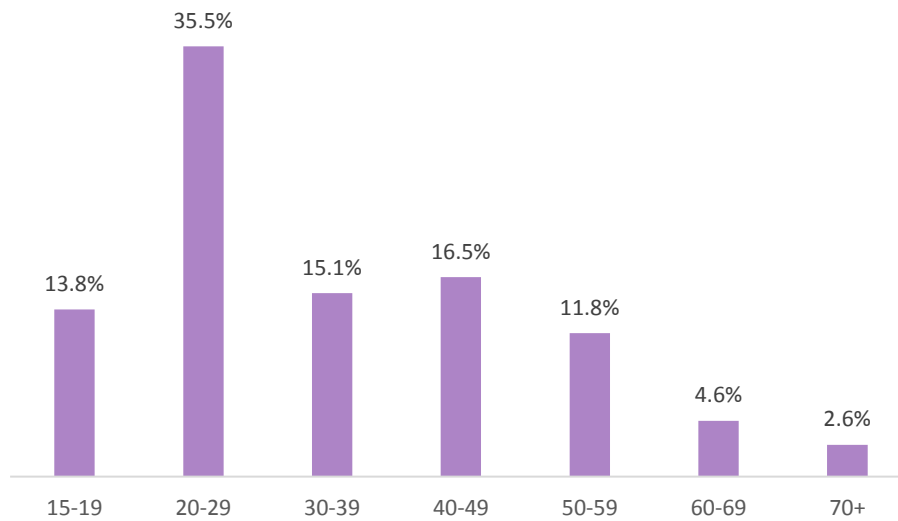


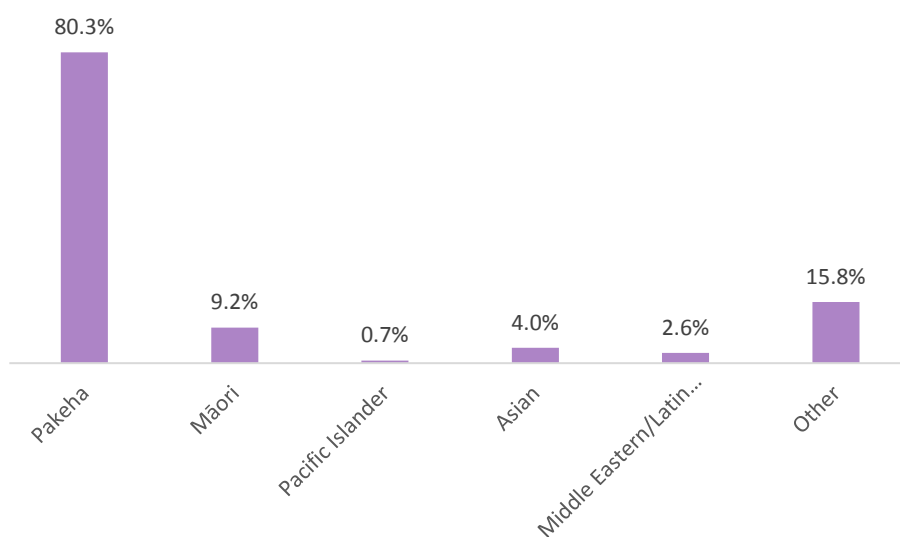
Figure 4. Age of Participants - Overall



Ethnicity

The ethnicity of the participants was primarily identified as Pākehā; 80.3% of the participants. Māori made up 9.2% of the participants, with significantly smaller numbers of participants identifying as either Pacific Islander, Asian, or Middle Eastern/Latin American/African. 15.8% of the participants stated 'other' as their ethnicity, with the primary responses being English, American, or Chinese. Participants could select more than one box.

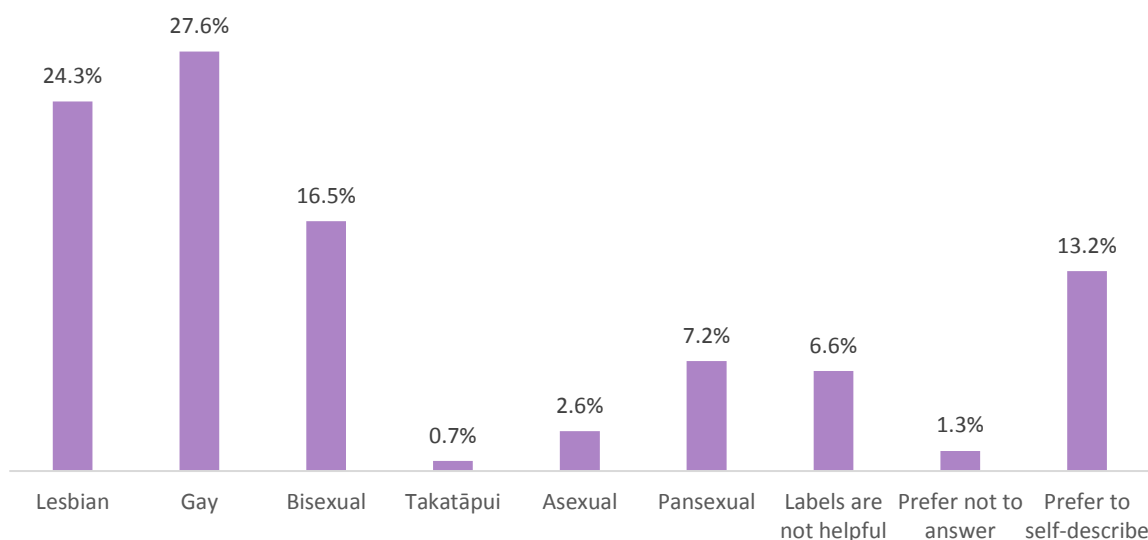
Figure 5. Ethnicity



Identity

The participants in the survey were asked to describe their sexual and gender identity through two separate survey questions. The question of sexual identity, as represented below, shows how the survey participants chose to represent their sexual identity.

Figure 6. Sexual Orientation



The largest cohorts in the survey were gay men at 27.6% of the participants, lesbian at 24.3%, and bisexual individuals at 16.5%. The survey reported lower numbers of takatāpui¹, asexual, and pansexual participants. A small but significant number of the participants preferred to state that labels are not helpful or necessary for their sexual identity, with 6.6% choosing this option, 1.3% preferring not to answer, and 13.2% chose to self-describe. The participants who chose to self-describe articulated a variety of sexual identities, queer being the most popular description, whilst also acknowledging the complexity of articulating fluid and varied sexual experiences alongside restrictive labels.

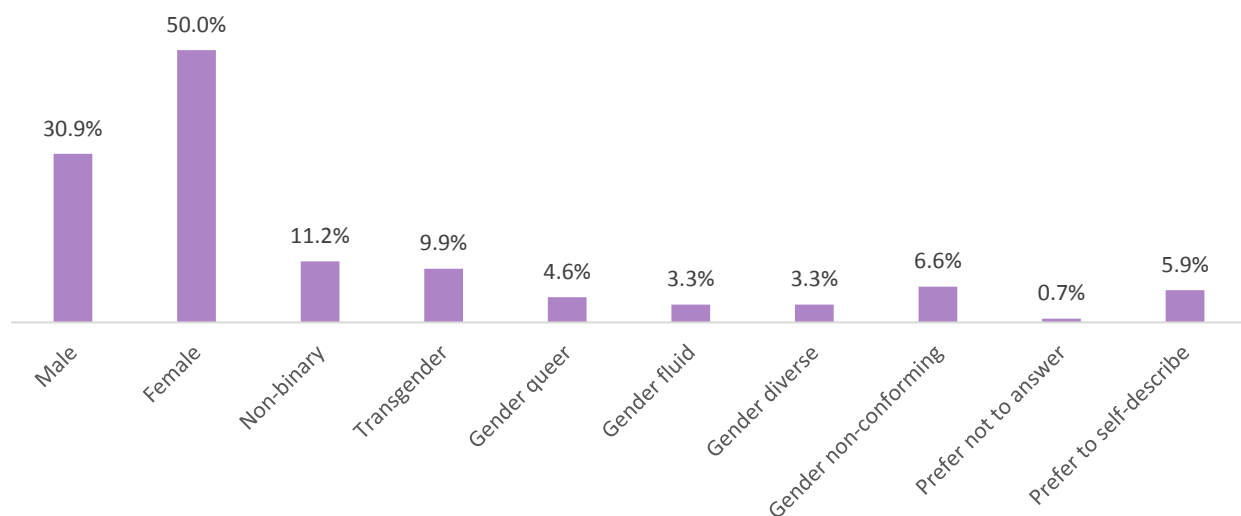
Similarly to sexual identity, the participants in the survey were asked to state their gender identity. As the diagram below indicates the largest two cohorts were female with 50.0% of the total number of responses, and male at 30.9%

Both non-binary and transgender identities were reported with similar response rates of 11.2% and 9.9%, while a smaller number of participants responded to a variety of

¹ Māori who identify with diverse sexes, genders and sexualities of all responses.

gender diverse and gender fluid categories. As with the question on sexual identity participants were offered the option of preferring not to answer, which a small percentage chose, while 5.9% preferred to self-describe. Of those responses the key theme that emerged was a frustration with gender binaries and gender systems of categorisation in society.

Figure 7. Gender Identity



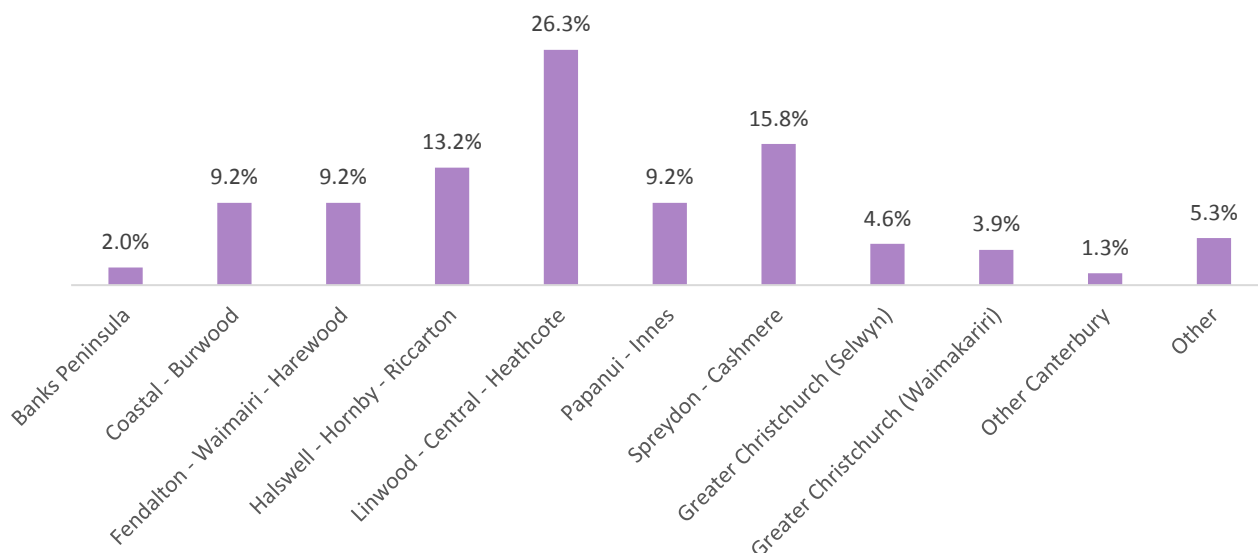
In an embarrassing oversight, ‘intersex’ was not listed as an option in the survey. In theory, an ‘intersex’ gender identity option could have been recorded in the ‘prefer to self-describe’ category; none of the participants who selected this option self-described as ‘intersex.’

Note that outside of the demographic questions, participants answered other survey questions demonstrating that the majority would like to be able to record their sexual orientation on their Census form and would like a non-binary gender identity option on the Census form, and the majority of those for whom the question applied would like to be able to report that they are transgender on their Census form. In general, people wanted to see more inclusive forms. Of course, as is presumably the case with many Census categories, it can be difficult to find options to suit all – for example, one person responded that they would not want to select a non-binary option as trans women are women and trans men are men; for this person, being trans was private medical information. At least one person was reluctant to be out, e.g. in the census, out of concern that the information might be used against them in some way.

Location

The participants came from a diverse range of locations across Ōtautahi Christchurch and slightly further afield in Canterbury, based on the locations provided by 57.8% of respondents.

Figure 8. Location of Participants



Research ethics

Researchers have been guided by research ethics appropriate to working with LGBTQIA+ communities. The purpose of the research was communicated to each participant. Written information and consent forms were provided at the beginning of each focus group, which included permission to record interviews and take notes. Participants were informed that they were free to refrain from comment at any time or retract anything they felt uncomfortable about having disclosed. In keeping with standard research practice, the researchers assured participants of their priority to maintain anonymity. Information for those seeking help was made available with the online survey.

Background

Health inequities for the LGBTQIA+ community have long been documented and oft presented as a deficit to try to stimulate change; this presentation has led to message rejection, lack of self-efficacy, and the perpetuation of stigma (Lee et al., 2017; Niederdeppe et al., 2013; Niederdeppe et al., 2008; Gates & Kelly, 2012).

From Sara Epperson's 2018 literature review in this arena, 'to improve health equity, health promotion needs to shift away from deficits and towards strengths-based health promotion approaches, including for LGBTQI+ populations' (Cahill et al., 2013; Colpitts & Gahagan, 2016; Craig et al, 2015; Douglas et al., 2017; Gates & Kelly, 2012; Glynn et al., 2016; Goins & Pye, 2013; McGlashan & Fitzpatrick, 2017; Moody & Smith, 2013).

Also from Epperson, the 'positive psychology' and 'resilience' approaches both have merit and have factors which enhance resilience and wellbeing, along with providing a framework which conceptualises strengths across three pillars: positive experiences, positive individual traits, and positive institutions (Vaughan et al., 2014).

Her review states 'strong characteristics of openly LGBTQ people may include greater confidence, positive self-regard, and empathy (Horne, Puckett, Apter, & Levitt, 2014). The positive psychology literature is beginning to identify 'signature strengths' of LGBT populations, including love, integrity, vitality, and citizenship (Vaughan et al., 2014), although these strengths are discerned from aggregated literature rather than in-depth study of an LGBTQI+ population'.

In a study specific to New Zealand LGBTI individuals, Adams and Dickinson (2013) found that this community have additional issues to other comparable groups when it comes to mental health. They recommended building sector capacity, allocating sufficient funding, ensuring adequate research and information is available, and reducing stigma, enhancing young people's safety, and supporting practitioners through training and resources.

Whilst we don't wish to focus on bullying and suicide, it would be disingenuous to avoid mention of the New Zealand context. In 2017, fifteen-year-old New Zealanders reported the second highest rate of bullying of 51 countries (Pisa 2015 Results, Volume III). A Netsafe study found that one in ten New Zealanders had been

personally targeted by online hate speech. Minority groups, such as the LGBTQIA+ community, were more likely to be targeted (Netsafe, 2018).

From annual provisional suicide statistics, the suicide rate from July 2017 to June 2018 was 13.67 per 100,000 people (Coronial Services of New Zealand, 2018), with the highest rate among those in the 20-24 year old age bracket. The Suicide Prevention Outcome Framework, developed under the Action Plan 2013-2016, noted the Rainbow population for a 'significantly higher rate of suicide than the general New Zealand population' (Mental Health Foundation, 2017). Youth'12 showed that 18.3% of same/both-sex attracted secondary school students had attempted suicide in the past year compared with 3.8% of their opposite-sex attracted peers. The same study found that one in five transgender students had attempted suicide in the previous year. Rainbow students had the highest rates of suicidality of any demographic population identified in this study (Clark, Fleming et al, 2012).

In the United Kingdom, a recent piece of research around mental health and young people found that 12.9% of participants were either gay or bisexual and they were four times more likely to report feeling depressed, self-harming or having suicidal ideation. Of particular note, the increase in depressive symptoms compared to their peers started at age ten (Irish, Solmi et al, 2018). In a study of aging LGBTQIA+ populations, it was noted that some queer people face stigma from their own community when they talked about their compromised mental health (Betts, 2018); an undesirable situation with a statistical greater likelihood of increased mental health issues and potentially less support from one's own community.

In light of such challenging statistics, the importance of speaking to the local LGBTQIA+ community and understanding where their strengths lie and what the gaps are cannot be underestimated. Drawing on Epperson's literature review, perhaps focussing on the strengths of the LGBTQIA+ community could indeed serve to diminish those gaps and increase health equity. Ōtautahi Christchurch has the potential to create a safe, mentally healthy and well supported Rainbow community – this report will delve into how we might achieve this – to do so could enable us to act as a beacon for other cities both in New Zealand and globally.

Findings and Discussion

Key themes: Interview and online reflections

- I. Wellbeing and strengths
- II. Whānau
- III. Community and connection
- IV. Perceived issues
 - a) Safety
 - b) In-house bullying
 - c) Mental health
 - d) Drug and alcohol abuse
- V. Services
- VI. Aging
- VII. Young people's experiences
- VIII. Aspirational Ōtautahi Christchurch
- IX. Parenting
- X. Allyship

I. Wellbeing and strengths

Interview reflections

'I love being queer'

As one would expect with any large cohort of people, there were varying reports of personal wellbeing and happiness. The over 40-year-old men's group seemed particularly buoyant and upbeat about their own lives and Ōtautahi Christchurch as a city, however, many of them were from the same friendship group so it would be ill-advised to assume all men over 40 feel the same way. However, the common theme in their group was social connection: opportunities for fun social gatherings, along with the support of their friendship group. All groups were similarly positive about the links between a friendship group and a sense of positive wellbeing.

'We take pride in ourselves, our strength, we are all part of a community' –over 30-year-old male

Many participants spoke of possessing a greater sense of empathy for those who might be considered 'different', a desire to understand those differences and a willingness to reach out to people who were struggling or being isolated by others.

'We've been there and we know how it feels' – over 30-year-old male

'I'd be a very different person if I'd been straight (not as compassionate)' – over 40-year-old male

For others, being a member of the rainbow community has entailed some self-examination and awareness, which means higher levels of comfort with being 'different'.

'It made me more clear on who I am and where I fit – it was a long journey to get here and to feel like me' – over 40-year-old female

'I struggled with discrimination early on; this led to a profound learning experience which I treasure, my life isn't controlled by social norms' – focus group parent

Most people, when asked, spoke of the strength of the community in general, rather than personal strengths as a result of being LGBTQIA+; perhaps a reflection on participants not feeling that strengths have developed from being queer, but also potentially linked to New Zealand's renowned humility – we'd rather talk of the strengths of others than of our own.

'If anyone needed looking after, we'd all pitch in, others have done it for us in the past so we kind of pay it forward' – over 50-year-old male

Online response

The WHO-5 is a self-rated measure of emotional wellbeing. Respondents are asked to rate the extent to which each of five wellbeing indicators has been present or absent in their lives over the previous two-week period, using a six-point scale ranging from 'all of the time' to 'at no time'. The five wellbeing indicators are:

- I have felt cheerful and in good spirits
- I have felt calm and relaxed
- I have felt active and vigorous
- I woke up feeling fresh and rested
- My daily life has been filled with things that interest me

The WHO-5 is scored out of a total of 25, with 0 being the lowest level of emotional wellbeing and 25 being the highest level of emotional wellbeing. Scores below 13 (between 0 and 12) are considered indicative of poor emotional wellbeing and may indicate risk of poor mental health.

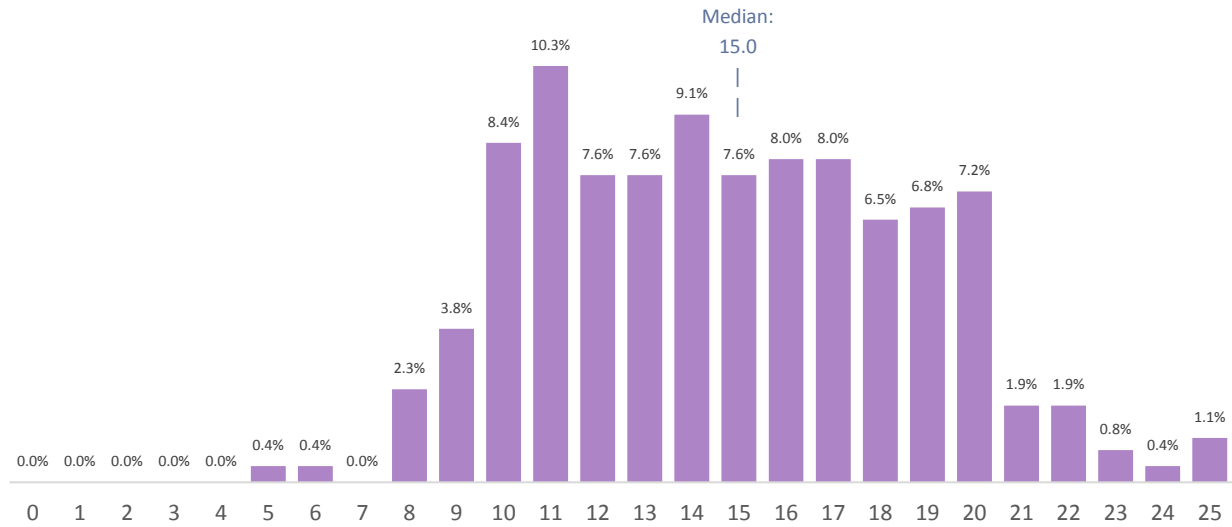
The figure below shows the distribution of scores across the survey respondents (263 out of the total of 263 respondents completed the WHO-5). The mean result for all survey respondents is 14.8, and the median result is 15.0. About a third (33.1%) of respondents scored below 13.

The representative data from the Canterbury Wellbeing Survey (CWS)² can be used as a population-level comparator for these findings. In the 2018 CWS, the mean WHO-5 score for all respondents was 15.4 (± 0.10). The mean WHO-5 score in the CWS has shown a statistically significant upward trend from a score of 13.8 (± 0.22) in April 2013, the first time the WHO-5 was included in the survey. Just over a quarter (26.8%) of 2018 CWS respondents scored below 13.

The comparison of these findings highlights the mean score for survey respondents is similar, at face value, to that of the greater Christchurch population (as measured by the CWS). However, the scores from the present survey show a different pattern of distribution, which will reflect - at least in part - the self-selected nature of the sample.

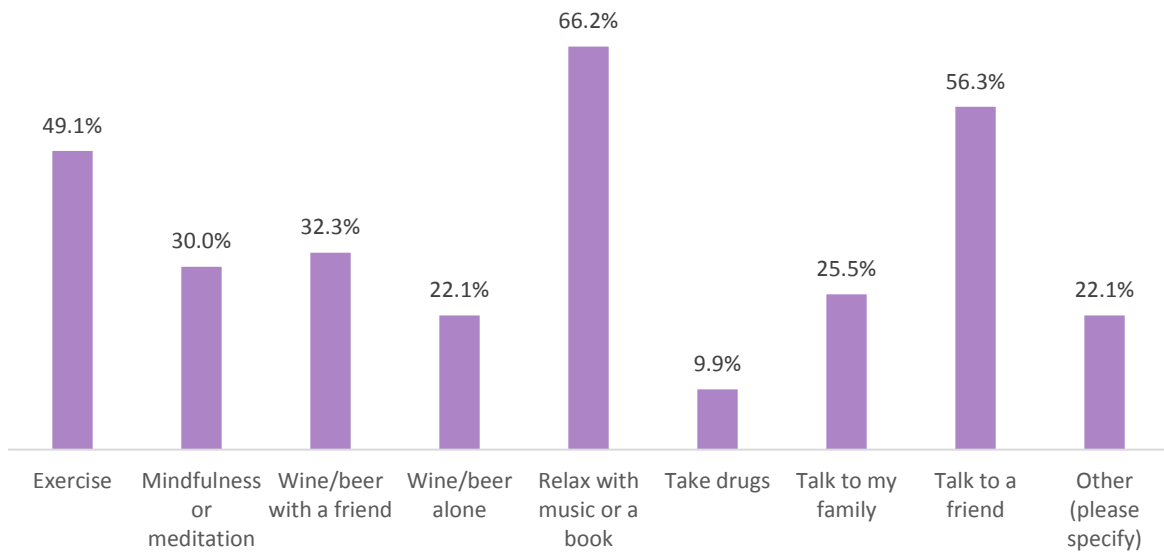
² The Canterbury Wellbeing Survey is an annual survey of over 2,500 adults in greater Christchurch, conducted 11 times since being developed following the Canterbury earthquakes of 2010 and 2011. Survey respondents are aged 18 years and above and are selected via the electoral roll. The response rate for the latest survey (May 2018) was 39%.

Figure 9. WHO-5 raw score distribution for survey respondents (total n=263)



Participants were asked how they manage stress. Many selected options presented in the survey, but the free-text box associated with this topic was one of the most-used free-text boxes in the survey. The wide range of responses included interacting with pets, eating, socialising, sleeping, and hobbies; some referred to professional support, as well. Of note, 75.7% of respondents said they actively look after their mental health.

Figure 10. Managing Stress



Also in the open-text section where respondents talked about how they look after their mental health, 13.7% of people volunteered that they were on medication(s) and 21.4% volunteered that they are in counselling/therapy.

Reflect-back

In the reflect-back session, participants largely affirmed the strengths that came through in the research, especially around the strength of developing kinship groups.

One new concept emerged – the strength of knowledge-gathering and critical thinking. Some participants, particularly transgender participants, talked about needing to sift through misinformation about health and educate people around them – both personal contacts, like family, and professional contacts, like GPs. These participants were astute about identifying trusted resources, e.g. online information sources, but also trusted resources in terms of wise, local people.

II. Whānau

Interview reflections

‘We huddle together like penguins in a cold hetero world’

Whilst the above quote was intended to be tongue in cheek, it certainly resonated with a few of the focus group attendees. Across the board there were varying opinions on how close participants are to their families – a response reasonably expected from any societal group as many people have challenging relationships with their kin. A general theme emerged of focus group members ensuring they have a support network in the form of both family and friends – for most, it was a mixture of the two. Some had struggled with familial relationships in the past but made a kind of peace with their parents over time as the latter had grown to understand or accept their gender identity. Within the focus groups, no apparent differences between age groups appeared; some younger people had very accepting parents, some didn’t, the same pattern occurred in the over 40-year-old groups. One young transgender person’s grandmother had paid for his top surgery – a touching example of how age isn’t necessarily a barrier to acceptance.

‘I have a thriving queer family - my own Mum hasn’t been as accepting as she could have been’ – focus group parent

'I'm in touch with my family but they don't accept me. My family are out of their comfort zone and don't have anything to go by – they have no experience with this difference' - over 40-year-old male

'Mum and Dad raised me with boys' and girls' clothes, which was cool! My parents really don't mind that I am gay, they just don't care' – under 26-year-old male

I had no such thing as a support network as a teenager...I considered suicide' –20-year-old male

'The older generation are more accepting than the baby boomers' – under 26-year-old transgender male

Another theme emerged of having a closer relationship with one parent, particularly if the other parent was still grappling with their child's sexual orientation or gender identity:

'Dad is a dick and doesn't want to learn but my Mum is willing to learn, I teach my Mum' – non-binary 18-year-old

And there was positive mention of equal marriage, the fact that it often affords greater respect along with the additional support of an extended whānau;

'I rely on the support of my husband and his family' – over 30-year-old male

'It's exposure to difference that changes how people manage (their prejudice), there is lots more visibility now and being able to get married was really cool!' – focus group parent

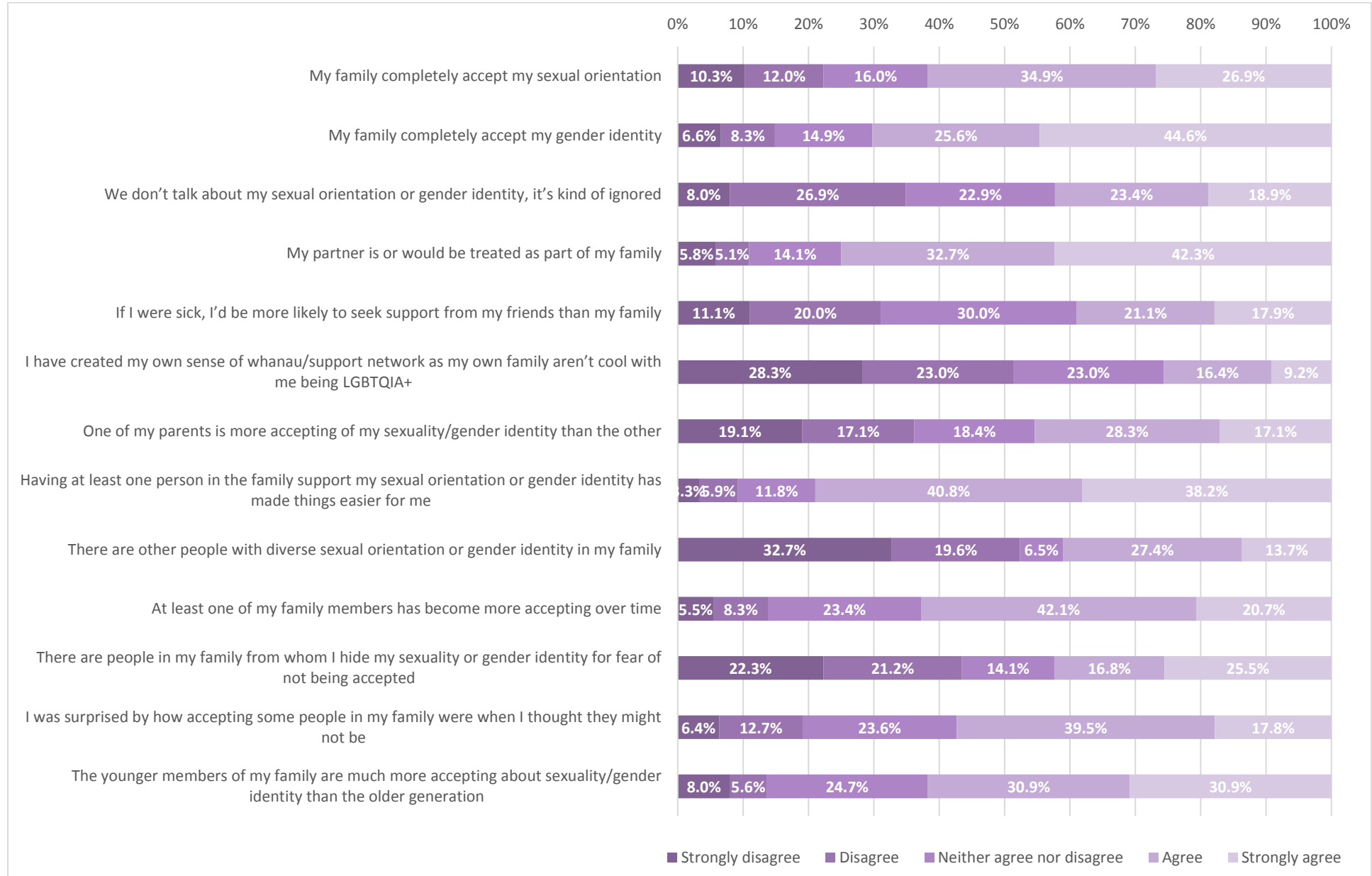
Online response

The online survey provided thirteen statements to the participants about their relationship with whānau and family. For each statement the participants were asked to respond with either; strongly disagree, disagree, neither disagree or agree, agree, strongly agree, or not applicable. In total 192 participants responded to these statements, the results of which are displayed below on the following page.

The responses to these statements on whānau show a diverse and varied set of experiences from the participants who responded to the online survey, indicating relationships with family and whānau vary. To support this exploration in the online survey, participants were invited to add comments on this section about their personal experiences. Common narratives included that many family members

became more accepting over time; that age was not necessarily a predictive factor in whether family members would be supportive (although participants reported skew towards younger generations being more supportive); and that there was on occasion a disconnect between supportive attitudes and supportive actions within families. Many of the participants reported that their experiences coming out to their whānau were positive, however, there were also narratives highlighting how negative attitudes towards gender and sexual diversity could create long periods of separation in family networks.

Figure 10. Responses to statements on Whānau



Reflect-back

Participants in the reflect-back echoed the findings from the interviews and online surveys, and elaborated a bit more on family supportiveness. For many, the idea of family supportiveness improving over time resonated. However, participants also introduced a new concept – how family (especially parents) could demonstrate support proactively.

‘Parents shouldn’t leave their support unspoken – they need to be explicit and outspoken so their kids never question that they are supported.’ –Report-back participant

‘My mother probably doesn’t remember all the dodgy comments [she made] about lesbians while I was closeted, but I sure do.’ – Report-back participant

There was also some talk about parents’ role not only in supporting a queer child, but in explaining or setting an example for siblings and others in the family. At the darker end of the spectrum, participants noted that without family support – or in the case of outright rejection – some queer youth become homeless and need support.

III. Community and connection

Interview reflections

‘We’re a small group and therefore we look out for each other’

The above was a common statement heard across focus groups and key informant interviews. Some felt their queer friendship group was a strong source of support post-earthquake and that the bond has remained, others were less definitive about the role of the earthquake in bringing people together and just felt it to be a natural and ongoing connection.

‘We all live quite close together...our community can be a lifesaver’ – over 40- year-old female

‘Our community is a source of strength, we take pride in ourselves’ – focus group parent’

‘There was a sense of power in coming out! I am here, I am home, these people accept me.’

Across the focus groups, the lack of a venue specific to queer people post-earthquake was a common theme. However, many participants mentioned the work of Christchurch Pride in bringing people together through a range of events and by providing information about current issues, some enjoying the 'non-drinking' options over Pride week and most agreeing that having a range of venues at which to attend social events was a plus. Whilst most agreed Pride events were fully inclusive with drag queens, transgender people, gay men and lesbians all mixing together positively, there was a sense that some non-binary people might also enjoy spaces and events specifically focused on their safety and connection. Mention was also made of a lack of provision for older people, however, within the focus groups, participants were telling each other about social opportunities for older people so a lack of clear information might be more the problem. To further emphasise this point, some transgender young people didn't know about key support groups. This may be a consequence of not having a well-known, concise and accessible single source of information.

'It's harder for older people, I'm too old for bars so it's tricky accessing the community' – over 40-year-old female

'There is lots for young people, nothing for the mature aged' – over 40-year-old female

A couple in the men's group explained how they had been helped and cared for by an older gay male couple when they were young; they now took on that mantle themselves and supported younger gay people where needed. It seemed participants who had struggled in the past, were now more than willing to support others who were having a hard time. An interesting point for further exploration – there are people within the community who seem very much in need according to statistics and anecdotal evidence, however, also within the community exist people who are very willing to help others. How do we enable the two to meet in the middle and utilise the good will, energy and care available to improve health outcomes? Adding further complexity, some younger contributors reported they sometimes felt 'overwhelmed' by the constant need to support their peers who were struggling; without family or robust support networks, it sometimes falls to those who are fighting their own battles to act as a crutch.

'There is more drama, more financial strife, on top of dealing with your own stuff' – over 30-year-old female

Some older participants felt there isn't the same sense of 'fight' as existed when they were young – perhaps to be expected as legislation has changed in our favour so rapidly, as a result of the 'fight' undertaken by older members of the LGBTQIA+ community. This could be construed as less of a sense of community for some, however those who made that comment also explained that their queer social groupings remained robust.

In summary, most were comfortable with the sense of community around them, however all groups mentioned the lack of venue or space for connecting with others.

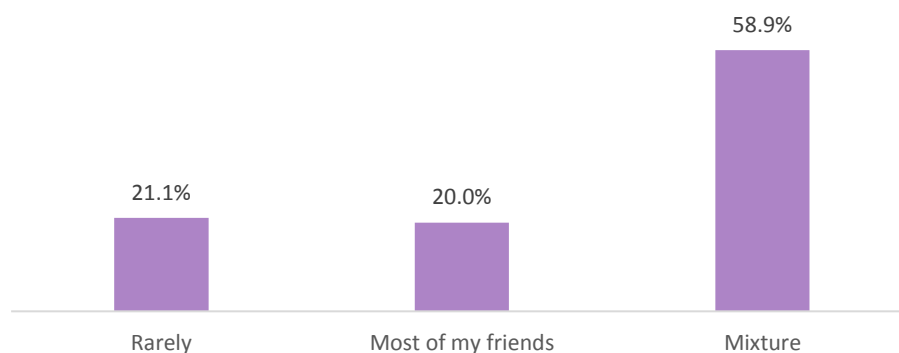
Online response

One way participants demonstrated a sense of community and connectivity was simply through the act of being 'out'. 67.1% of LGBTQIA+ people believing it was important for them to be out and therefore act as a role model for younger people.

'I believe it is important to be out and show the younger generation that there is a positive life to be lived' –Online respondent

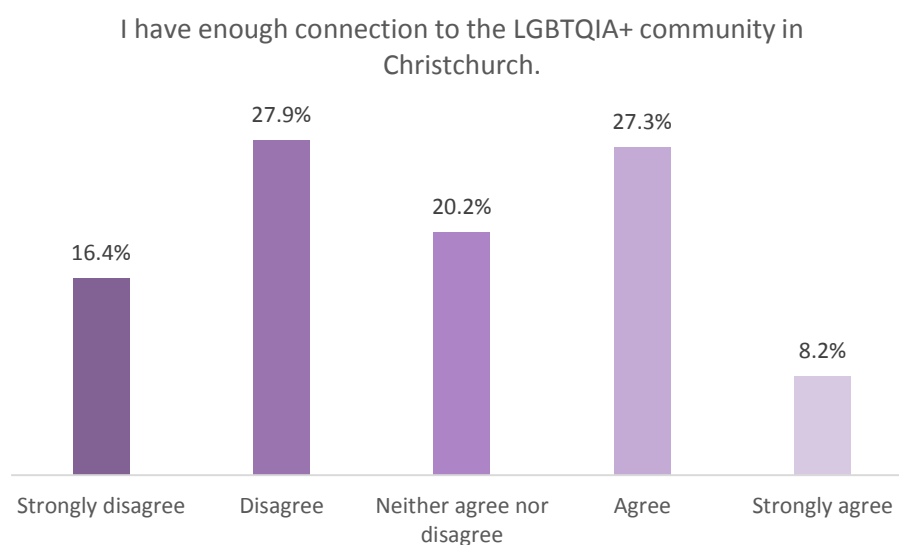
To support this exploration of community spaces and community cohesion, the online survey contained a few questions on how the participants interacted in different community networks. Initially the survey asked the participants to select whether they rarely associated with people in the LGBTQIA+ community, if their primary connections came from within the LGBTQIA+ community, or if they maintained relationships from a diverse network. Nearly 60% of participants indicated they associated with a diverse range of people, with 21.1% indicating they rarely spent time with other individuals in the LGBTQIA+ community, and 20.0% that they primarily associated with the LGBTQIA+ community.

Figure 11. Association with the LGBTQIA+ Community



To understand how the participants perceived the LGBTQIA+ community in Christchurch, they were asked to respond to a variety of statements exploring different attitudes and behaviours within LGBTQIA+ networks. When asked if the participants felt they had enough of a connection to the LGBTQIA+ community, the two largest responses of disagree and agree at 27.9% and 27.3% respectively, indicated mixed feelings. However, with 16.4% of participants strongly disagreeing it does reflect similar findings from the focus groups about certain demographics not having access to the same level of social participation.

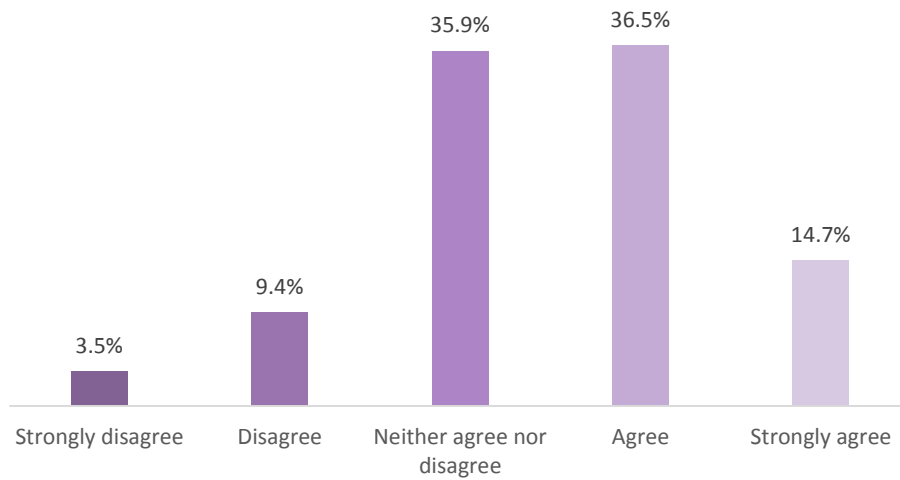
Figure 12. Connection to LGBTQIA+ Community in Christchurch



Participants were asked to respond to follow up statements about wider attitudes in the LGBTQIA+ community to gauge why some individuals may feel less engaged. One statement queried whether racism was an issue in the LGBTQIA+ community in Christchurch, and the majority of the responses agreed at 33.5%, while only 11.8% gave a combined response to strongly disagree and disagree.

Figure 13. Racism within the LGBTQIA+ Community

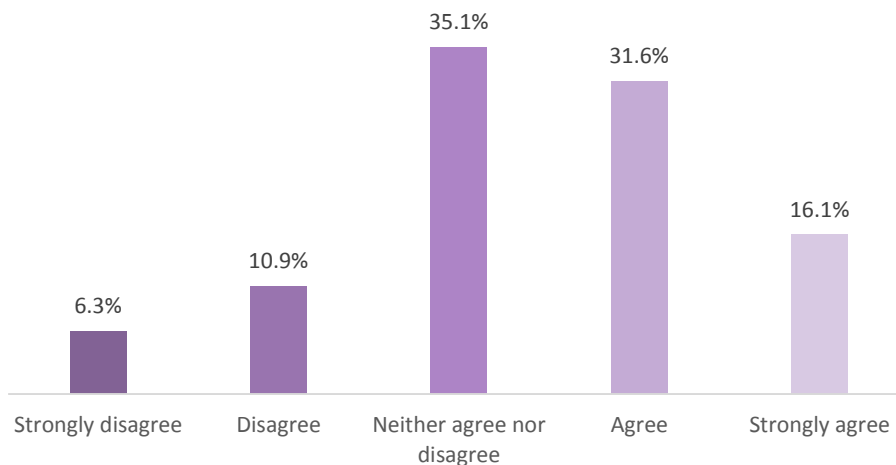
I believe racism is an issue in the LGBTQIA+ community.



This may indicate that intersectional relationships and identities may create barriers for social participation for certain individuals in the LGBTQIA+ community in Christchurch. A similar response rate was returned when the participants were asked if misogyny was an issue within LGBTQIA+ scene spaces.

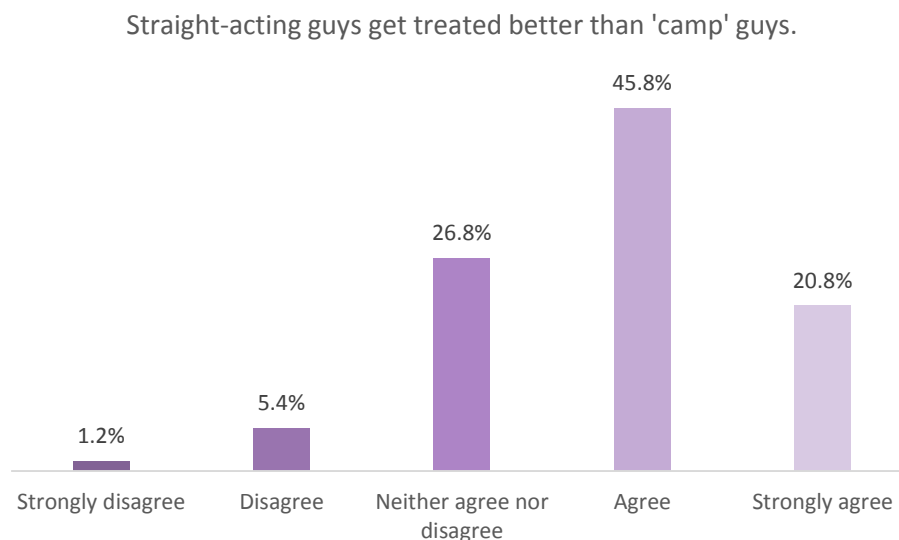
Figure 14. Misogyny in the LGBTQIA+ Community

I believe misogyny is an issue in the LGBTQIA+ community.



While another interesting gender dynamic emerged when the majority of participants responded positively to the statement that 'straight' acting guys get treated better than those with a 'camp'³ demeanour.

Figure 15. Impact of 'Camp' Behaviour



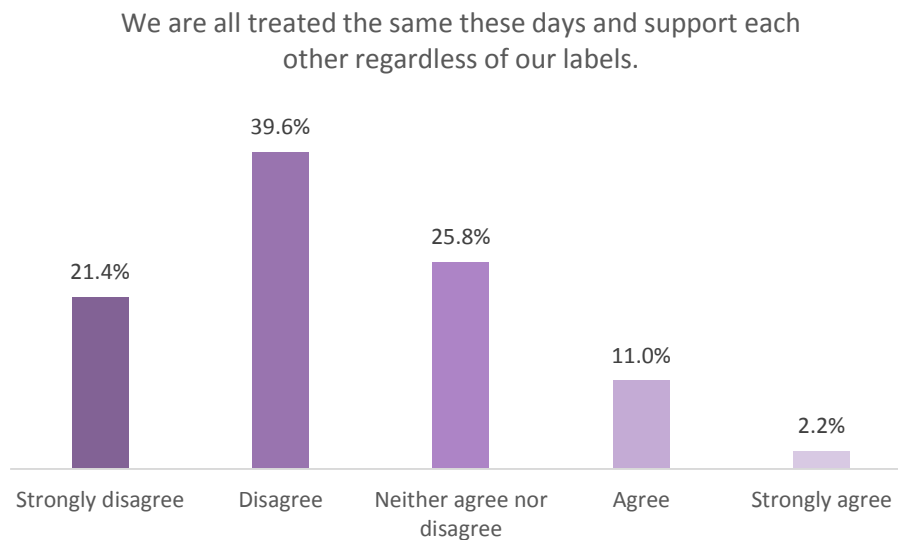
If there were a belief that beneath the better treatment of said 'straight acting' guys is a socialised construct that femininity is inferior, it could be inferred that with a more in-depth understanding of unconscious bias, the numbers who believe misogyny is an issue would indeed be higher. However, the comments in the online survey and focus groups made it clear many feel gender stereotypes are detrimentally limiting.

'...the question about straight acting pisses me off it suggests there is a mould to what us as gay men have to be like. I could be considered straight acting, but Im just me' –Online respondent

Responses such as these perhaps indicate why participants responded with a combined 61.0% for strongly disagree and disagree when responding to the statement of 'we are all treated the same these days and support each other regardless of our labels.

³ 'Camp' and 'straight acting' are terms used by focus group participants which have then been further examined via the online survey. It is not the language of choice by researchers or the *All Right?* team.

Figure 16. Discrimination within the LGBTQIA+ Community



While the online survey participants did value their sense of community and social participation, they were acutely aware of the fact that not all members of the LGBTQIA+ community were provided with equal opportunities for accessing these spaces, and that inclusivity was still an issue for certain aspects of the Christchurch LGBTQIA+ scene.

The section of the survey devoted to transgender participants suggested one potential barrier to getting out and about was toilets – 64.0% of respondents said that going out to do anything in Christchurch is a major challenge due to lack of gender neutral bathrooms.

Reflect-back

The participants discussed a desire for more venues or places/spaces devoted to queer people. The participants brought up a new idea – the desire for more inter-generational connection. Venues were seen as one means of facilitating this.

IV. Perceived Issues

a). Bullying and safety-related concerns

Interview reflections

This is one of the trickiest topics to summarise as some people find Ōtautahi Christchurch an unsafe and at times aggressive city, others noting it to be ‘the safest place in New Zealand to be gay’. The central city was definitely felt to be the safest place to hold hands with a same sex partner, or for some, to be out in drag – the latter being considered a good indicator as to how accepting a place might be, especially in areas where groups of heterosexual men might be drinking alcohol. It was noted by many participants that there is a sense of aggression in the heterosexual male demographic, not necessarily aimed at LGBTQIA+ people, but at each other, particularly when drinking in bars. This was considered part of New Zealand’s drinking culture and the sense of machismo in groups of young men at night was cause for at least caution if not concern when in the central city. Some spoke of not wanting to leave venues alone for fear of abuse, and a few participants mentioned having been verbally or physically abused in recent years.

‘I get more people yelling at me because I am fat (than due to my sexuality/gender identity)’ – non-binary 25-year-old

One gay male couple who have no qualms showing affection in public had suffered occasional verbal abuse, however they felt that for the most part, nobody ‘really cares anymore’. It was interesting to note that some people had lived through periods of time, perhaps at school, where homophobic bullying was the norm and they now felt scarred by such behaviour - their fear of a similar response stopped them from showing affection in public. They weren’t sure if they would actually be treated badly or abused but have no interest in finding out.

‘I don’t want to be brought back to a state of feeling shit about myself’ – focus group parent

‘We are really comfortable holding hands and only rarely is anything said...we did get called ‘faggots’ recently though’ – over 40-year-old male

A transgender contributor said, 'The central city isn't safe for trans people at night' and that public response depended on the 'femininity of the woman I'm dating at the time – if people can't put us into a box, there will be comments or looks'. Regarding gender, many women said they felt their safety related to being a woman, rather than being a lesbian, whilst men felt their safety related to how 'out there' they were, i.e. how effeminate; each of these seeming to underline the perceived importance of fulfilling gender stereotypes. The comments in the online survey and focus groups made it clear many feel gender stereotypes are detrimentally limiting.

'I feel more unsafe when I present as femme; I'm over sexualised as a woman' –non-binary 18-year-old

To summarise, more contributors than not felt Ōtautahi Christchurch to be a safe place to live and felt comfortable being out in most circumstances, however almost all felt greater visibility would further increase general society's understanding and therefore help the LGBTQIA+ community feel safer.

Online response

The online survey returned similar results to the focus groups. When asked what some of the most pressing issues for the LGBTQIA+ community in Christchurch were, 36.3% reported a lack of appropriate social venues, 24.8% a lack of visibility, and 22.3% bullying and safety related concerns. These responses often intersected, with some participants indicating all three in response to the question. When asked if the participants received a positive public response to holding their partner's hand, the largest response rate was 'not at all' (32.7%), followed by 'somewhat' (27.6%). While a slight majority of respondents felt comfortable holding their partner's hand during the day in the city or in their own neighbourhood (50.9% and 51.3% respectively), respondents felt less safe at night.

The participants were also asked if they had noticed a reduction in the public levels of homophobia, biphobia, and transphobia. For the questions on homophobia and biphobia the participants primarily responded with 'somewhat' and 'a little bit,' with only a small percentage indicating 'a lot' and 'not at all.' However, for the question on transphobia the participants reported less of a reduction in public spaces. This reflects findings from the focus groups where aspects of gender and gender identity

may be more impactful on feelings of safety in Christchurch than components of sexuality.

The portion of the survey devoted to transgender participants also revealed how safety and conformity intersect. 91.7% of respondents agreed that Christchurch is a safe place to be transgender if 'pass' as cisgender; if you do not 'pass' as cisgender, the figure drops to 0.0%.

Reflect-back

Participants were satisfied with some of the optimism expressed in the research but were reluctant to see it stand untempered.

'It's not fine. Shit still sucks.' –Reflect-back participant

Some participants were also sceptical about Christchurch being the safest place to be gay in New Zealand. They echoed survey findings that while some were comfortable holding hands with a partner in public, others wanted to see discomfort acknowledged, such as concern that a homophobic or transphobic person would approach them.

b) In-house bullying

Interview reflections

'I see, 'no fats, no femmes, no Asians' loads on Grindr, it's like people don't think that's offensive at all'.

There was mention of bullying within the community itself, often online and often dressed up as people stating their preferences for dating or a sexual hook up. Racism was mentioned as an issue, especially online where people might be less concerned about appearing prejudiced.

Some younger people spoke of the very clear belief that 'straight acting guys' were 'superior' to effeminate guys with one young man believing it to be the 'biggest problem we have'. Women didn't mention the same nuances around expressions of gender, however, that's not to assume it doesn't exist.

‘For example, ‘I only date straight acting, I only date tops’’ - over 20- year old male

There was mention of predatory behaviour; a small number of participants spoke of incidents where older men had hit on younger men in a way they assessed as being ‘predatory’. However, a larger number felt that with Ōtautahi Christchurch having such a small community, people looked out for each other and such behaviour would be nipped in the bud quickly.

Young men were less likely to be out than young women, according to a contributor who works with young LGBTQIA+ people and there was a sense from some that lesbians don’t have the same level of societal rejection, however as mentioned in other parts of this report, that tended to depend on whether someone was gender conforming. A young man spoke of his belief that gay men sometimes target women that they wanted to ‘deligitimise [sic] lesbians’.

Reflect-back

Participants echoed some of the comments made in the interviews. Some raised with concern the ‘inter-hate’ that can emerge between different groupings of the LGBTQIA+ community, as well as ‘intra-hate’ within groupings. Some talked about the need to embrace intersectionality and appreciate the experiences of different genders, sexualities, ethnicities, socioeconomic statuses, religion, etc. within the rainbow community.

‘Remember the diversity within diversity!’ –Reflect-back participant

c) Drug and alcohol abuse

Interview response

‘It’s a Kiwi thing, not a gay thing’

The majority of participants in the focus groups felt alcohol was a ‘New Zealand issue’ rather than being specific to the LGBTQIA+ community. There was certainly mention of alcohol being a tool for stress release, along with one stereotype of the rainbow community being ‘all about parties; we’re renowned for drinking and dancing and having fun’. Only one of the focus groups expressed a belief that alcohol and drugs

were more problematic in our community with mention of marijuana and meth being commonly talked about on Grindr. More than one person spoke about the earthquake causing a greater intake of alcohol due to stress at the time. However, for the most part, contributors stated drugs weren't as a big a problem here as in other big cities and whilst alcohol is a significant problem, probably no more so than the rest of the New Zealand population.

'I associate gayness with party times, drugs and alcohol' – 40's male

'Lots of people on Grindr take meth' – over 40's male

'Young people in New Zealand drink until they vomit' – 20's male

Online response

When asked about issues facing the LGBTQIA+ community in Christchurch, 20.4% responded that drug and alcohol abuse were a concern for the community. These responses came through both pre-allocated options, and in open-ended questions that allowed the participants to write their own responses. These findings, combined with the fact that 9.9% of the participants indicated they used drugs and 22.1% reported drinking alone to manage their stress, support the focus groups findings that substance abuse may be a concern for the LGBTQIA+ community. However as reported in the focus groups this factor is potentially just as likely to reflect other elements within New Zealand's culture, and further exploration would be beneficial in this area.

Reflect-back

Participants did not comment much on this area, but the views they did express were consistent with findings from the interview and survey. However, some with backgrounds in the health sector stressed that there are unique challenges for the LGBTQIA+ community around drugs and alcohol, regardless of New Zealand's overall drinking culture.

d) Mental health

Interview reflections

Similarly to drug and alcohol abuse, participants felt mental health to be a major problem across New Zealand but there wasn't a cohesive opinion that it is worse in the rainbow community.

Some contributors believed there used to be specifically LGBTQIA+ mental health services and these are no longer available.

'Self harm and suicide are a big deal' – over 20-year-old female

'It's not just a gay issue, it (mental health issues) is everywhere' – over 30-year-old female

'There is an absence of safe places for recovery' – over 40-year-old female

'It gets inward, no one is available, we're all too busy treading water' – under 26-year-old

'It's hard to tell if people have mental health problems, a lot of people are on antidepressants' – over 40-year-old male

'Girls are good at talking, boys aren't so much' – focus group parent

Online response

In the online survey, the largest single response to ongoing concerns in the LGBTQIA+ community in Christchurch was the issue of mental health issues. 59.2% of participants affirmed this pre-allocated option, however in the opened-ended responses many narratives described the impact mental health concerns had on the community. In these responses the themes of previous experiences of stigma and a lack of dedicated and competent mental health services to support the LGBTQIA+ community emerged to suggest what the participants felt was most impactful on their wellbeing and sense of community. These findings also related to the 22.9% of the participants in the online survey who saw the need for information regarding safe/trusted professional services (e.g. counsellors, GPs, etc.).

However, as previously described in the section on wellbeing and strengths, respondents appeared well-versed in ways they actively look after their own mental health, and were enthusiastic about volunteering a range of responses detailing strategies for this.

Reflect-back

Participants talked more about mental health services than mental health, per se. Similarly to the online response, participants wanted better promotion of rainbow mental health support providers.

e) Services

Interview reflections

‘Finding a good counsellor or GP is a lottery’

‘What services?’ sums up the response from focus group participants. The focus groups revealed a notable lack of knowledge as to what services exist, how safe they are and where someone in need might find support. The New Zealand AIDS Foundation was mentioned as a commendable service by some participants, including the opportunity for volunteers to undertake condom packing which increases the sense of connection and community. There were generally blank faces all round when contributors were asked where someone might go for gender related counselling or indeed for relationship counselling which was LGBTQIA+ inclusive.

For young people, Qtopia, Kindred and Youth Hub 298 were mentioned as avenues for support, however there seemed to be a dearth of options for support for older rainbow people and some felt the need for this support. Participants spoke of turning to others in the community for lack of other clear options, however at times, this meant asking people for support who were already embattled with their own struggles.

‘As a sick person you shouldn’t be going to seek advice from a sick person’ –non-binary 25-year-old

‘There is an overflow at (Youth Hub) 298, no one can get in’ – over 30-year-old female

Just under half of contributors weren't out to their GPs, a potentially concerning situation if patients don't feel comfortable being themselves.

'We've just been at the funeral of a friend who died of pneumonia; he had undiagnosed HIV and I doubt he was out to his GP' - over 40-year-old male

'I get asked massively stupid questions about sex. Nurses can be real shit, doctors are a bit better' - 20-year-old male

'Doctors shouldn't assume we are hetero, they need better training' - over 30- year-old female

'I came out to my GP today (as non binary). He was educated to call trans people 'it' - non-binary 25-year-old

'Half the GPs don't know about gay STIs and treatments' – over 40-year-old male

Fertility services were considered to be ill-equipped to respond sensitively to the needs of LGBTQIA+ people.

'It was a fraught experience' – focus group parent

'The forms are all hetero focussed...I found the whole thing quite rude' – focus group parent

In summary, it would appear there isn't a well-known source of information whereby members of the queer community might access information regarding fertility, LGBTQIA+ inclusive counsellors or GPs. Training for the aforementioned services is also lacking along with any publicity/knowledge sharing that such training has been undertaken – GPs could be confident and knowledgeable regarding queer issues but service users wouldn't know.

'I haven't been to a counsellor because I have LGBT related worries, I wouldn't know where to go' – 17-year-old male

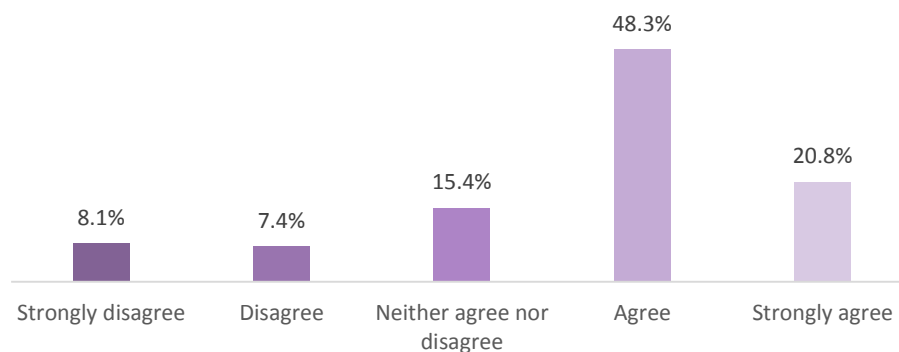
Online response

The topic of engaging with well-informed and appropriate medical professionals was equally covered in the online survey. While the majority of participants reported that they were out about their sexual and gender identity to their GP, at 54.7% compared to 37.1% who were not, 8.2% of the participants reported not having a current GP. The participants were then asked to respond to a variety of statements regarding

their GP or their perceptions on how GPs in Ōtautahi Christchurch operate. The statement that elicited the strongest response was ‘their medical forms and/or language are heteronormative (the belief people fall into distinct and complementary genders i.e. male and female), and only have two gender options’ with the largest responses being agree at 48.3% and strongly agree at 20.8%.

Figure 17. Heteronormativity⁴ in Medical Forms and Language

Their medical forms and/or language are heteronormative (the belief that people fall into distinct and complementary genders, i.e. male and female), and only have two gender options.

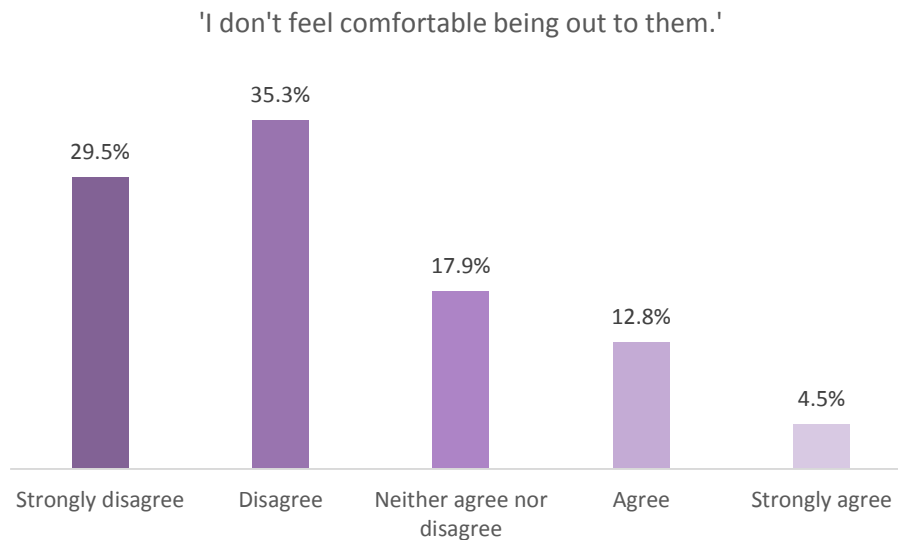


There were findings specific for the trans community in the survey, as well. Of the 26 respondents to this part of the survey, 75.0% found the lack of anything other than ‘male/female’ on forms upsetting; many did not feel recognised.

At an interpersonal level, things were more positive in interactions with GPs. The primary response from the participants was to the statement ‘I don’t feel comfortable being out to them,’ with 29.5% and 35.3% of participants choosing strongly disagree and disagree respectively – suggesting 64.8% are comfortable being out to their GPs. Of the 26 responses to a question in the section specifically for transgender participants, 79.6% felt comfortable talking with their GP about their gender expression.

⁴ Heteronormativity is based on the attitude that heterosexuality is the only normal and natural expression of sexuality.

Figure 18. Lack of comfort being out to medical professionals



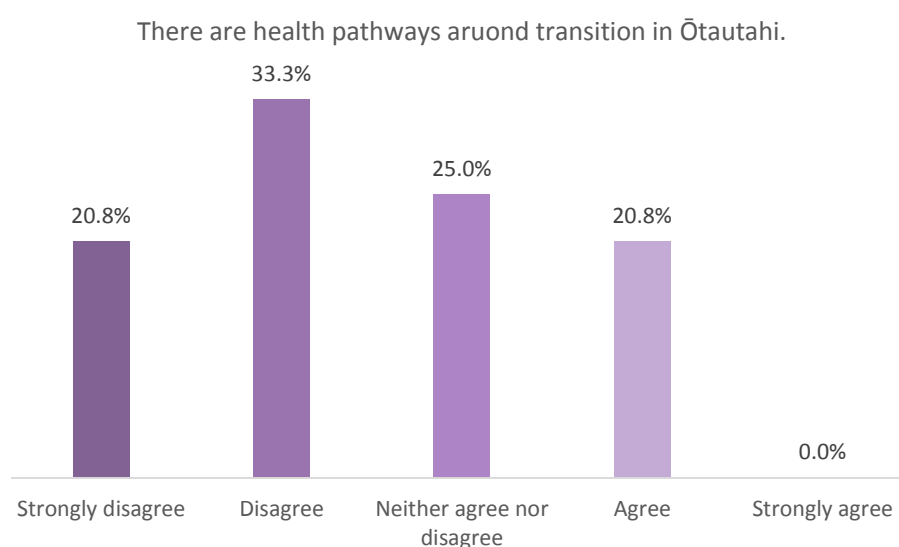
The participants were asked whether they would feel more comfortable with a medical practitioner that displayed an LGBTQIA+ friendly sign or accreditation. 46.7% responded that they would feel more comfortable and 29.7% that they would feel safer, however 12.4% of participants would be sceptical of such a display. This scepticism may be a result of previous negative experiences with medical professionals, such as the narratives highlighted in the focus groups.

All I ask for is acceptance and openness and not feeling like my sexuality causes them discomfort. –Online respondent

We should not have to find LGBTQIA+ friendly doctors, they should all be trained to deal with all people from all walks of life. –Online respondent

The sub-group of people responding to the section of the survey for transgender people also shared their perspectives on health pathways for transition. Of the 24 respondents in this section, participants mostly disagreed that there are health pathways around transition in Ōtautahi.

Figure 19. Health Pathways around transition



Finally, the participants were given the opportunity to state what factors might make them feel safer in accessing medical services. The strong themes that emerged focused on the importance of inclusive language and practice, appropriate cultural training and engagement, and fewer assumptions about heterosexual practices and cisgender identities as the default.

Reflect-back

This was a popular topic area, reflecting and amplifying the findings from the interviews and online surveys. Participants talked about wanting better relationships with – and better accountability from – GPs. Some wanted some kind of indication that their GP was a safe and knowledgeable person to discuss health with, such as a certification or rainbow tick. Ideas shared about improvements included better communication (e.g. listening to the patient and what they want), ditching assumptions, and co-design (e.g. including transgender people at every level of service development).

Participants wanted to know how to find supportive services, or services like relationships support that would be appropriate for them. Someone else flagged insufficient information about fertility service pathways. One person suggested accessing the Pink Pages.

Participants briefly mentioned a few other barriers to service access, including cost, location, and convenience (e.g. health services not available at schools).

Aging

'Gay people get old too!'

Interview reflections

Understandably, aging was mentioned more by older participants of the focus groups. There is concern that if people become less articulate or their voices less heard as they age, their sexuality or gender identity might become less respected. Knowing that staff within retirement complexes or palliative care had training on diversity issues would ensure LGBTQIA+ people felt safe and respected and that their relationships weren't treated any differently to their heterosexual peers.

'Some people go back in the closet when they go to a retirement village' – over 40-year-old female

'My godfather is gay; he was dying in hospital and his partner wasn't allowed to sleep in the same room' – over 40-year-old male

'My mum started introducing (my partner) as 'my friend' at the retirement village' – over 40-year-old male

'You'd have to come out again in a rest home or not be out' – over 40-year-old male

Online response

On the topic of LGBTQIA+ friendly services in Christchurch, the online survey asked the participants to respond to statements about aged based care facilities. 170 participants completed this section of the survey and responded to these statements. One statement asked participants to reflect on 'I am worried about not being looked after or respected as an LGBTQIA+ person when I am at retirement age.' In response to this statement the largest categories were agree, and neither agree or disagree, with 30.0% and 25.6% respectively. An additional statement of 'I am confident I can find an LGBTQIA+ friendly rest home in the city' returned similar results. Due to the relatively small proportion of participants in the online survey over the age of 60, 7.2% in total, it is possible these responses reflect the views and attitudes of younger and middle-aged adults who may not be contemplating the process of accessing aged

care services. While these results do reflect a broad cultural and social view about the expectations of aged care services in the Christchurch LGBTQIA+ community, a participant pool with a higher number of older adults might return different results.

Reflect-back

This proved to be a topic of interest even among young people at the reflect-back.

There was a great deal of interest in rest homes, where participants raised concerns that either queerness would be rendered invisible by the assumption that all older people are cisgender and heterosexual, or that older queer people would be more vulnerable or isolated by virtue of their difference. Many of the participants thought a framework for care of LGBTQIA+ people would be beneficial, with training for staff and possibly education and 'house rules' for other rest home residents, as well. It was believed this would benefit rest homes residents as well as LGBTQIA+ staff. Some commented on the need for particular sensitivity around mental health, sexual health and HIV/AIDS status.

Some participants were also interested in the kinds of social support available to older members of the LGBTQIA+ community. There were concerns about less access to resources at the end of a lifetime, for example, given that some will have not enjoyed the financial privileges of a state-sanctioned relationship or family. Some of the ideas shared to help address this were investment in social housing for LGBTQIA+ elderly, and programmes either devoted to older LGBTQIA+ people or to cross-generational interactions between LGBTQIA+ elders and others.

Young people's experiences

Interview reflections

'I learned about gay sex from porn. It's very much not the same as real life'

In the young people's focus group, the key issue discussed was sex and relationships education; participants wanted to spend time focussing on this topic and had strong views. These were backed up by younger people in other focus groups. It was clear that participants didn't believe the sex and relationships education offered at their schools was of a high enough standard for anyone, let alone LGBTQIA+ young people.

Pornography and consent came up as topics that weren't adequately covered. When discussing sexuality education for queer young people, contributors reported a dire level of inclusion and at times, outright homophobia by teachers. Same sex activity was either covered in a one-off lesson or not covered at all.

'There was one lesson on homosexuality instead of it being talked about within all the other lessons, they were relevant to us too but we were ignored in those' – 17-year-old male

'My teacher told us a weird story about how his friend came out to him and how shocked he was about it. There was no other talk about gay issues' – over 30-year-old male

'Schools portray porn as a really bad thing to do' – 17-year-old female

'A weird sex ed thing happened at school – the girls (went to one room) and talked about endometriosis and the boys went off and talked about pornography' – 17-year-old male

'I had no education re STIs then got chlamydia and learned that way!' - 20- year-old male

'I had to talk to my cousin about consent, she had no idea!' – 18-year-old male

Sexuality and relationships education aside, amongst younger participants across the groups, there was a sense that school or university didn't feel particularly safe.

'I was badly bullied as a teenager' – over 20-year-old female

'I 'butched up' as a reaction against it [bullying]' – over 30-year-old male

'Physical violence occurs at my university towards LGBT people' – over 20-year-old male

'There is lots of bullying in changing rooms' – over 20-year-old male

'I see young people get beaten up because they are perceived as gay' – over 20-year-old male

A positive trend emerging across the focus groups was the common understanding that there are many LGBTQIA+ oriented groups in schools and universities now. Many said these groups had a significant impact on how safe they would feel in school or university due to the increased visibility – even if they didn't attend, the fact such groups existed meant their school/university had their queer students on the radar

and wanted them to have a safe space. There were reports of one school in Ōtautahi Christchurch which has an allies group with over 30 members. Counter to such positive stories were troubling stories of high levels of homophobia in boys-only schools. Three participants spoke of attending the same boys' school in Ōtautahi Christchurch at different times but with common accounts of hyper-masculine behaviour, lack of intervention from teachers around homophobia and no mention of LGBTQIA+ issues in sex and relationships education. Other boys-only schools from around the country were cited as feeling unsafe, lacking inclusion and avoiding covering queer issues within sex and relationships education.

'There were no out gay kids. If you were out in an all boys' school you would've been bullied' - over 20-year-old male

'I didn't feel comfortable being out at an all-boys school in Christchurch as a teacher, I was out at other schools' - over 30-year-old female

'I would only go to a university with an LGBT group' - over 20-year-old male

Homophobic, biphobic and transphobic language was still considered an issue, however there was some debate around intent versus outcome of people's words; some felt disparaging language that referenced sexuality wasn't intended to be hurtful or homophobic, but the outcome of poor word choices often was. Upon further exploration as to how this challenge should be met, contributors agreed both visibility and education would prevent their peers making unwitting language choices which could hurt others.

'I see homophobia all the time, people don't really know they are doing it' –over 20-year-old female

Teachers were felt to have a significant impact on safety with some participants believing their teachers had more discomfort with LGBTQIA+ issues than students and others believing teachers' confidence in challenging discriminatory language had a huge impact on the school culture.

'My teachers didn't challenge it (homophobic language) so other kids just knew they could get away with it' – over 20-year-old female

'Teachers created a sense of fear, not the students' – 18-year-old female

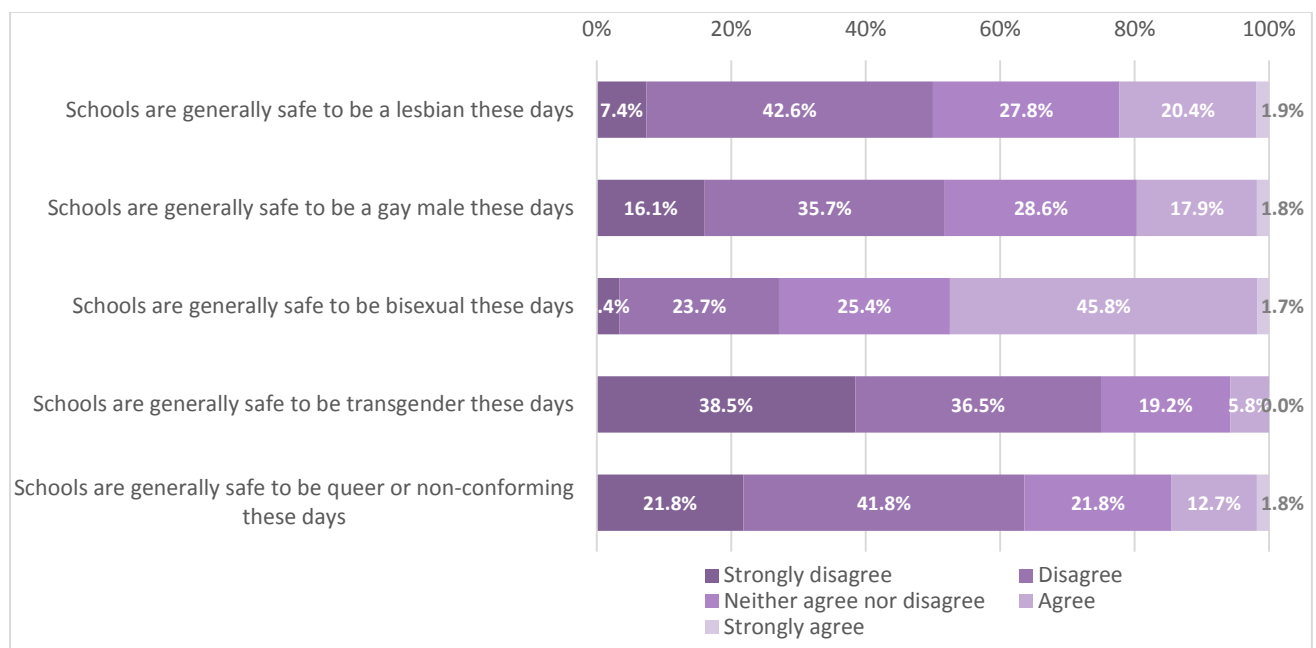
Although most of the discussion focussed on school, one twenty-year-old said he would 'never be out at work' in his future career, believing it to be an unaccepting

field (agriculture); a possible indicator of the work needed by some industries to ensure they not only attract the best young talent but create accepting cultures in which staff can bring their whole selves to work.

Online response

The online survey contained specific questions for participants under the age of 26. 67 participants responded to these questions in total. Initially the participants were asked if they were out at school, with 56.7% indicating no. The majority of the questions focused on the nature of schooling, and how accepting schools in Ōtautahi Christchurch were of students with diverse sexual and gender identities. A lot of these questions focused on the nature of safety in school environment.

Figure 20. Schools as Safe Places based on Sexuality or Gender Identity



For the majority of these statements the primary response was strongly disagree or disagree. In particular for transgender and 'non-conforming' identities. These results indicate that for members of the LGBTQIA+ community in Ōtautahi Christchurch school-based environments are not particularly safe or welcoming. Related to these statements, participants were asked to respond to how they believed their teachers responded to homophobia, biphobia, and transphobia. Across the board the majority of the participants responded that their teachers were not particularly well-versed or able to challenge homophobia, biphobia, and transphobia in schools, contributing to feeling a lack of safety in school environments.

Another common concern that emerged was the lack of education on diverse sexual and gender experiences in schools. When asked to highlight the key concerns for the LGBTQIA+ community in Ōtautahi Christchurch, 24.2% acknowledged the need to challenge binary gender ideals in schools, while 49.7% expressed the need for a higher quality of sexual education in school settings. In the section on the experiences of transgender participants, the majority of responses to the statement of 'If you are at school or left in the last ten years; I think my school was/is a safe place for transgender people' were disagree or strongly disagree.

When the participants were given the option of adding their own responses and comments on the nature of schools in Ōtautahi Christchurch, many were quick to point out that improvements have been made. However, it was still strongly advised that further work and advocacy is required in these environments in order to support diverse sexual and gender identities in schools.

Note that although not answered exclusively by young people, the survey investigated participants' possible reactions to a young person telling them they would never be out in their workplace. This was the most answered open-text question. Respondents were understanding and respectful of the young person's wishes, but many wanted to gently explore the subject further. Some expressed curiosity or concern about the safety of the persons' workplace, real or perceived. Some expressed encouragement about being out, both for one's own sense of self and potentially to support and environment where other LGBTQIA+ people, especially young people, feel safer and more able to be themselves. Others affirmed the young person's decision, either for safety reasons, the stance that people should be entitled to privacy, or the belief that LGBTQIA+ people shouldn't have to 'come out'.

'Be out, you don't know whose life you can change for the better just by being visible... that won't happen unless we expect it to and we set the example' – Survey respondent

'I would ask why, and determine if they are simply a private person, or if there is some inherent threat in their workplace' – Online respondent

'That's their choice. We've got to stop with this notion that being gay is such a huge deal. It's just one part of who they are and entirely unnecessary for anyone else to know if they don't want it to be a deal' – Online respondent

Reflect-back

Participants strongly reinforced feedback about schools from interviews and the online survey. There was agreement that bullying at single-sex schools is worse and that teachers are ill-equipped to deal with homophobia, biphobia, and transphobia, or else they just don't care. Participants reiterated the need for gender neutral toilets and changing rooms, and also challenged the gendered code of school uniforms. Some school-aged participants were heartened to know at least some teachers or school officials who were understanding but also raised concerns about feeling unsafe or unwelcome, or being treated with mistrust when complaining about how they were treated.

Schools ignore harassment unless it's physical. Verbal hurts, too! –Reflect-back participant

Participants also strongly reinforced the need for better sex education, and that this should be inclusive of all sexualities and sex-drives. Gender education that challenges binary ideals was also recommended. However, a 'curriculum' wasn't enough. Participants explained that the attitude of a person delivering a programme makes a powerful difference to how people engage with and use the material.

Participants picked up on the quote from a young person about not ever wanting to be 'out' at work, and commented in response that visibility was good for customers and staff, acknowledging that corporate 'ignorance' of issues for staff/customers was often a problem and could make being 'out' difficult. However, the participants wanted to highlight the benefits of bringing your 'whole self' to work. Suggestions for more welcoming workplace environments included sensitivity training, anti-bullying policies, encouraging people to define their pronouns, and other indications of 'rainbow friendliness' (e.g. pins/badges, posters, etc.).

Aspirational Ōtautahi Christchurch

Interview reflections

'I don't want to have to be brave – I just want to hold hands like everyone else'

We asked contributors how Ōtautahi Christchurch could become a kind of utopia for the queer community, a place people would thrive, not just survive. There was some robust conversation as to whether Ōtautahi Christchurch really does live up to its

conservative label or whether this is simply an oft repeated stereotype and therefore a self-fulfilling prophecy. Whilst Ōtautahi Christchurch is perceived to have become more ethnically diverse post-earthquake, with the lack of venues and a focus on city and home restoration, the LGBTQIA+ community has lost some visibility. This potentially means less acceptance as without connecting with and learning about people from minority groups, fear-based prejudice is more likely.

‘We don’t have a Pride parade, but we could have a rainbow (pedestrian) crossing, like Wellington does’ – over 30-year-old male

Beneath the need for a venue is more than just a place to drink or meet a potential mate however. Both safety and the need for social connection have been over-riding themes across the focus groups and a venue would be a vehicle to provide both. For some, it is a place to dance and have fun. For others, it is a place to talk to others, share problems and expand their social network. Either way, the lack of a queer space has been keenly felt by many since the earthquake.

‘There is nowhere distinct to go, not many places you can safely be gay’ – over 40-year-old male

‘(We need) more visibility that we are here – two boys or girls holding hands on the pedestrian crossing sign’ – over 40-year-old male

‘We need a venue!’ – 18-year-old male

‘More gender-neutral toilets; the bus exchange toilets are awesome’ – over 40-year-old female

‘An LGBT+ parents group would be great’ – focus group parent

‘Queer people going into schools for sexuality education would be cool!’ – non-binary 25-year-old

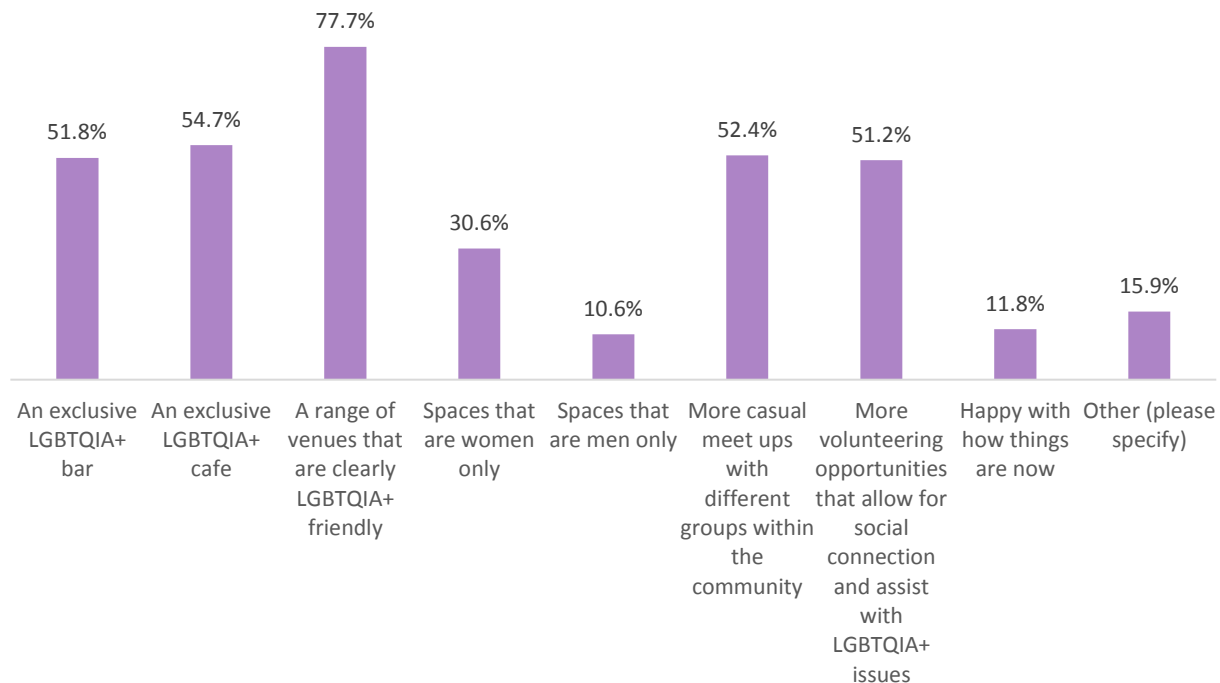
‘Homelessness is a problem – community-based housing would be good’ – non-binary 18-year-old

Online response

Participants in the online survey were also invited to suggest areas they would like to see developed for the LGBTQIA+ community in Christchurch. The participants were

given a series of nine options developed from the focus groups and asked to select all that applied.

Figure 21. 'I would love to see in Christchurch...'



Of the 15.9% who selected 'other' suggestions included events aimed at teenagers, an Ōtautahi Christchurch based pride parade, sporting teams, events for families, and specific places for non-binary and gender diverse individuals to feel safe and supported.

Reflect-back

Participants agreed with feedback from interviews and the online survey about a lack of LGBTQIA+ venues being a challenge. This was an area a lot of consideration went into; participants brainstormed a stock-take of 'assets' available to people over 18 and under 18. The group concluded that a particular issue is not only a lack of LGBTQIA+ venues, but the lack of venue for people under and over 18.

Participants also discussed the benefits of LGBTQIA+ places and spaces. For example, LGBTQIA+ venues allow people to relax from either the daily stress of being aware of where you are and whether it is safe to be out or the stress of being noticed as different (if you can't be 'stealthy'). It can also be a great place to connect with others and find community, especially for older adults coming out, who may feel isolated.

Parenting

Interview reflections

The parent specific focus group did not spend much time discussing parenting or children, their conversation was more based around queer issues in general. Parents expressed both concerns their children might be bullied at school due to their parents' sexuality or gender identity – and pride in the composition of their families.

'There are lots of prejudiced and bigoted people about...it could lead to bullying' – focus group parent

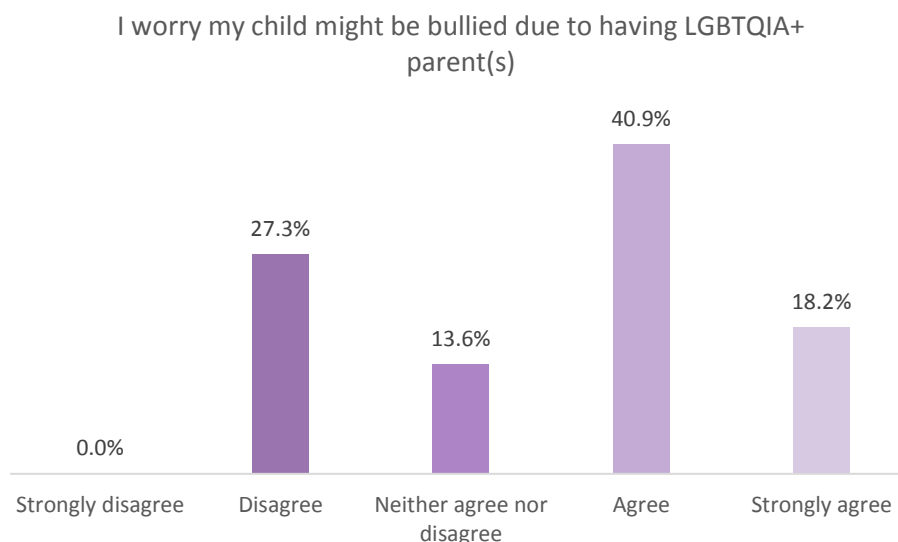
'I feel it's a huge strength to have me and my partner as parents. We are a loving family unit. Coming from diversity is a strength'

'Other kids don't think it's weird and strange that my children have two mums, they think it's cool'

Online response

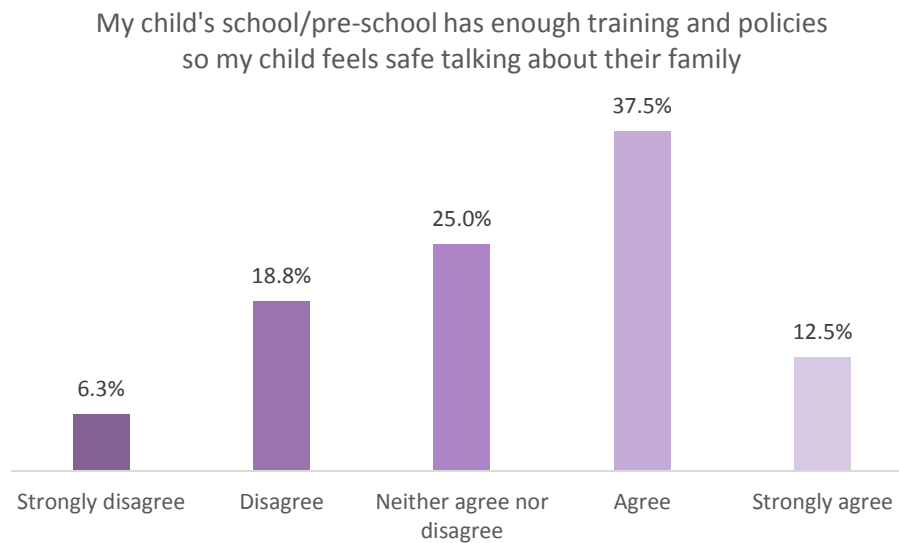
The online survey had 23 respondents and it showed 59.1% of that group were concerned their child might be bullied due to their parents' sexuality or gender identity.

Figure 22. Concerns about Bullying



4 participants said their child had been bullied due to their parents being from the LGBTQIA+ community. 34.8% believed their pre-school or school had sufficient policies and training to help their child feel safe talking about their family set up.

Figure 28. School Policies and Training



Reflect-back

The conversations among participants on the topic of parenting tended to link more closely with the subject of family/whanau support in general. However, two new parenting related matters were briefly introduced. One was more of a question wondering about differentiating between parents of rainbow children and children of rainbow parents, and perhaps even rainbow children of rainbow parents. The other matter was around parenthood and building awareness and understanding of pathways to parenthood for rainbow families.

Allyship

During the reflect-back, a new theme strongly emerged: allyship – the active, consistent, and arduous practice of unlearning and re-evaluating, in which a person of privilege seeks to operate in solidarity with a marginalised group of people.⁵ Participants talked about nurturing allyship as a way of creating a healthier, more supportive environment for LGBTQIA+ people – and a more enlightened social environment in general.

⁵ British Columbia Teachers' Federation (2016). A Guide to Allyship. N.p: BCTF Summer Session. Retrieved from <https://bctf.ca/uploadedFiles/Public/SocialJustice/EquityInclusion/Allyship%20handout.pdf>

For many of the participants who had supportive people in their networks, it seemed some of those supportive people had wonderful intentions but did not always know how to express their support. Participants shared stories about friends and acquaintances so enthusiastic about being supportive that they would connect mundane topics back to a person's LGBTQIA+ identity.

'There's, like, the uncomfortable homophobia of trying too hard.' –Reflect-back participant

'Awareness of one part of your identity shouldn't be all people see about you.' – Reflect-back participant

Others described supportive friends and acquaintances who wanted to, for example, use the correct pronouns but were nervous about it, awkwardly avoiding use of pronouns altogether. Participants felt the 'discomfort of other people's discomfort'.

Participants could think of a number of ways that people could demonstrate allyship. Taking responsibility to educate oneself was one important aspect of allyship, which could extend into advocacy. Participants also talked about what individuals, groups, and organisations could do to make their allyship visible - a significant aspect of 'allyship' for many was respectful language. Taking steps to help people feel a sense of belonging was at the heart of allyship; for organisations, this could include messages of visibility and positivity.

Participants acknowledged the mix of feelings around allyship. Some did not like being made to feel like they had a responsibility to educate others, while others were happy to do so, at least to an extent. There was also the sensitive matter around reactions when allies got things wrong – at worst, becoming adversarial or defensive; at best, making the most of an important learning opportunity, but one that may have still come at someone else's expense. One participant observed that the patience, tolerance, and resilience of the LGBTQIA+ community was a real strength in these situations.

'It's hard sometimes, but we can give people time to learn.' –Reflect-back participant

Looking ahead

There are two fairly well trodden paths to enhancing wellbeing/diminishing the impact of prejudice on minority groups – reducing stigma and enhancing self-esteem, with one being the reduction of prejudice, the other building up the resilience to resist it. The recommendations below encompass both methods with a view to increasing visibility and education which would therefore, hopefully, reduce discrimination and enhance self-esteem.

There is potential for Ōtautahi Christchurch to project itself as a beacon city for positive wellbeing in response to recent challenging statistics – the work of the *All Right?* campaign amongst other impactful ventures could be used to support activity in other regions. This means clear information is needed about where LGBTQIA+ people could turn when life is challenging; who provides a safe pair of ears, who is qualified to work with gender diverse people, where to go to find social connection and how to help others who might be in need. If Ōtautahi Christchurch's narrative focussed on being an accepting and innovative city, there is the potential to attract progressive and diverse thinkers who might otherwise be tempted by Wellington or Auckland.

Visibility and inclusion of the rainbow community is an obvious response to how Ōtautahi Christchurch could become a great place to be LGBTQIA+. Clear indications by the Council, businesses, schools and services that the LGBTQIA+ community is not just tolerated but embraced as part of our vibrant, changing and diverse city would diminish the voices of the prejudiced, enhance self-worth of the queer community and therefore potentially improve mental health outcomes.

References

Coronial Service of New Zealand, Annual Suicide Statistics, Provisional Figures, 2018

Mental Health Foundation, a Strategy to Prevent Suicide in New Zealand, Draft for Public Consultation, 2017

Netsafe, Online Hate Speech, A survey on personal experiences and exposure among adult New Zealanders, 2018

PISA 2015 Results, Students' Wellbeing, Volume III

Adams, J., Dickinson P., & Asiasiga. L. (2013) Mental health promotion for gay, lesbian, bisexual, transgender and intersex New Zealanders.

Betts, D. (2018) Social Work with Older Sexual and Gender Minorities in New Zealand (Doctoral dissertation). University of Canterbury, New Zealand.

Cahill, S., Valadéz, R., & Ibarrola, S. (2013). Community-based HIV prevention interventions that combat anti-gay stigma for men who have sex with men and for transgender women. *Journal of Public Health Policy*, 34(1), 69-81.

Clark, T. C., Fleming, T., Bullen, P., Denny, S., Crengle, S., Dyson, B., Fortune, S., Lucassen, M., Peiris-John, R., Robinson, E., Rossen, F., Sheridan, J., Teevale, T., Utter, J. (2013). Youth'12 Overview: The health and wellbeing of New Zealand secondary school students in 2012.

Craig, S.L., Dentato, M.P., & Iacovino, G.E. (2015). Patching holes and integrating community: A strengths-based continuum of care for lesbian, gay, bisexual, transgender and questioning youth. *Journal of Gay & Lesbian Social Services*, 27(1), 100-115.

Colpitts, E., & Gahagan, J. (2016). The utility of resilience as a conceptual framework for understanding and measuring LGBTQ health. *International Journal for Equity in Health*, 15(60).

Douglas, R.P., Conlin, S.E., Ryan, D., & Allan, B.A. (2017). Examining moderators of discrimination and subjective well-being among LGB individuals. *Journal of Counseling Psychology*, 64(1), 1-11.

Gates, T.G., & Kelly, B.L. (2012). LGB cultural phenomena and the social work research enterprise: Toward a strengths-based, culturally anchored methodology. *Journal of Homosexuality*, 60(1), 69-82.

Glynn, T.R., Gamarel, K.E., Kahler, C.W., Iwamoto, M., Operario, D., & Nemoto, T. (2016). The role of gender affirmation in psychological well-being among transgender women. *Psychology of Sexual Orientation and Gender Diversity*, 3(3), 336-344.

Goins, E.S., & Pye, D. (2012). Check the box that best describes you: Reflexively managing theory and practice in LGBTQ health communication research. *Health Communication*, 28(4), 397-407.

Horne S.G., Puckett J.A., Apter R., Levitt H.M. (2014) Positive psychology and LGBTQ populations. In J.T. Pedrotti & L. Edwards (Eds.), *Perspectives on the intersection of multiculturalism and positive psychology*.

Irish, M., Solmi, F., Mars, B., King, M., Lewis, G., Pearson, R. (2018) Depression and self-harm from adolescence to young adulthood in sexual minorities compared with heterosexuals in the UK: a population-based cohort study

Lee, J.G.L., Landrine, H., Martin, R.J., Matthews, D.D., Averett, P.E., & Niederdeppe, J. (2017).

Reasons for caution when emphasizing health disparities for sexual and gender minority adults in public health campaigns. *American Journal of Public Health*, 107(8), 1223-1225.

McGlashan, H., & Fitzpatrick, K. (2017). LGBTQ youth activism and school: challenging sexuality and gender norms. *Health Education* 17(5), 485-497.

Moody, C. & Smith, N.G. (2013). Suicide protective factors among trans adults [Abstract]. *Archives of Sexual Behaviour*, 42, 739-752.

Niederdeppe, J., Bigman, C.A., Gonzales, A.L., & Gollust, S.E. (2013). Communication about healthdisparities in the mass media [Abstract]. *Journal of Communication*, 63(1), 8-30.

Niederdeppe, J., Kuang, X., Crock, B., & Skelton, A. (2008). Media campaigns to promote smoking cessation among socioeconomically disadvantaged

populations: What do we know, what do we need to learn, and what should we do now? [Abstract]. *Social Science & Medicine*, 67(9), 1343-1355.

Vaughan, M.D., Miles, J., Parent, M.C., Lee, H.S., Tilghman, J.D., & Prokhorets, S. (2014). A content analysis of LGBT-themed positive psychology articles. *Psychology of Sexual Orientation and Gender Diversity*, 1(4), 313-324.

Yang, C., Boen, C., Gerken, K., Ting, L., Schorpp, L., Harris, K., (2016) Social relationships and physiological determinants of longevity across the human life span

Appendix 1: Information for Focus Group Participants



INFORMATION SHEET

All Right? Rainbow Community Resilience Research

Tēnā koe,

All Right? is a Healthy Christchurch initiative led by the Canterbury District Health Board and the Mental Health Foundation of New Zealand. They are funded by the Ministry of Health and have also had support from the Ministry of Social Development and many other organisations including the Red Cross, SKIP, the Christchurch City Council and the Waimakariri District Council.

All Right? completes regular, in-depth research into how Cantabrians are doing. This gives them a wealth of up-to-date knowledge about how people are feeling and the hurdles they are facing. This research informs everything All Right? does – from raising awareness among community groups, organisations and businesses, to creating tools that promote the things we can do to improve our well-being.

We are running a series of focus groups to capture the views of the rainbow community of Christchurch. These will run for up to two hours across a number of evenings in September and October. They will be recorded and notes taken to ensure we accurately represent your views. These recordings will be confidential and only be listened to by the research team. They will be destroyed, along with the notes, within a year of the report being completed.

You are under no obligation to accept this invitation to participate in this research. If you do choose to participate, you have the right to:

- Decline to answer any particular question/s;
- Withdraw at any time;
- Ask any questions about the study at any time during the participation;
- Provide any information on the understanding that your name will not be used.

The information you provide will be analysed and included into the final report.

We appreciate your time and consideration in participating in this important work. If you have any questions or concerns, please do not hesitate to contact us.

Ngā mihi nui,

Suran Dickson
Flipside Consulting

Appendix 2: Consent Form



CONSENT FORM

All Right? Rainbow Community Resilience Research

Full name – Printed: _____

I have read the Information Sheet and had the research explained to me.

I am aware that participation in this research is voluntary and I understand the information will be kept confidential. Any questions that I have asked have been answered and I understand that I may ask further questions at any time. All information will be stored for a period of 1 year and will then be destroyed.

When the report is completed and has been accepted by All Right? a summary of the findings will be sent to me if I would like.

Please tick the boxes if you agree;

I agree to participate in this study under the conditions set out in the information sheet. I give consent for my interview to be audio taped.

I give consent for my comments to be included in the research. My identity will not be revealed in any part of the research.

Please sign and date this consent form.

Signature: _____ Date: _____

Please provide an address/e-mail for a copy of the report to be sent to you:

Appendix 3: Draft Questions for Focus Groups

Guide Questions for Focus Groups

What are the good things being LGBTI+?

What does whānau mean to you? Who supports you? Who helped you when you came out? Who accepted you and made your journey easier?

What are the challenges of being LGBTI+?

What are the greatest issues facing LGBT+ people in 2018 Christchurch? How does Ch Ch make you feel when it comes to safety as an LGBT+ person? How could safety be improved?

Are you out in most areas of your life? Workplace safety? Has anything changed for you post EQ?

What do you find most useful to help you manage stress or look after your wellbeing?

Do services meet your needs as an LGBTI person? What's the most LGBT friendly service in Christchurch?

How could Christchurch become the best city in the world for LGBTI people?

What would you change if you could to make life better for you as an LGBT+ person or for our community?

Parents only questions:

Greatest hope for your children?

Greatest concern for children?

Do you think you answer those 2 questions differently because you are LGBTQI+?

Young people only questions:

Are there places that feel more safe? Or less safe?

Are there enough services for your needs? What would you like to see more/less of?

Appendix 4: All Right Campaign Responses

As part of the online survey the participants were asked a series of questions to assess their awareness of the All Right? Campaign In Christchurch, and to gauge how successful the participants had found the campaign strategies. The majority of the participants reported being aware of the All Right? Campaign over the last few years, with 84.71% positively responding.

Appendix Item 1. Awareness of the All Right? Campaign

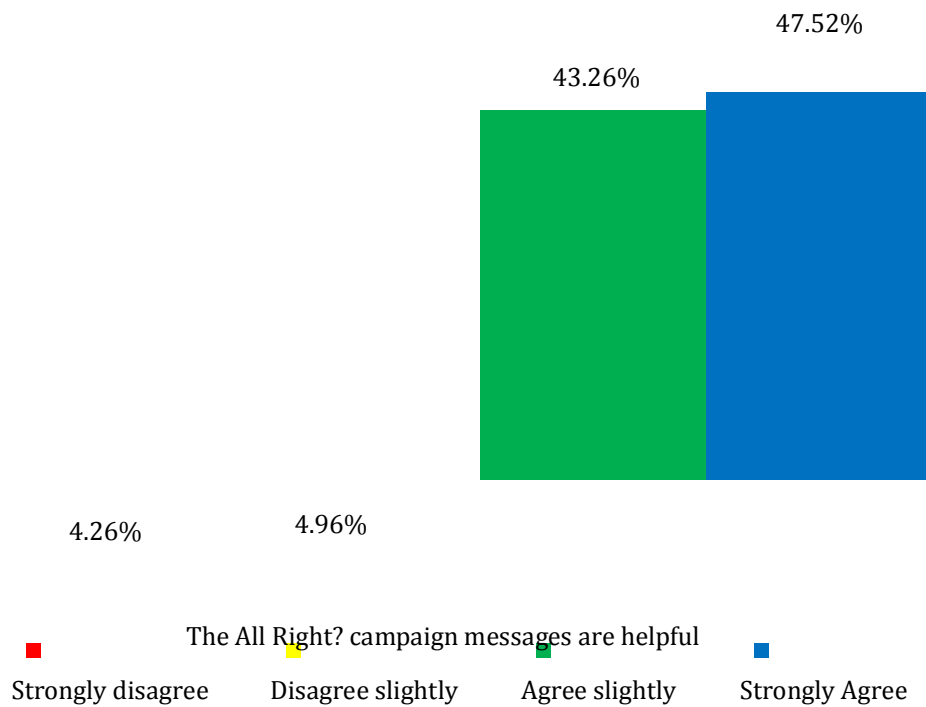
**Do you remember seeing or hearing any of the
"All Right?" campaign wellbeing messages in
or around Christchurch?**



The participants were then asked to respond to a series of statements assessing the quality and uptake of the All Right? Campaign.

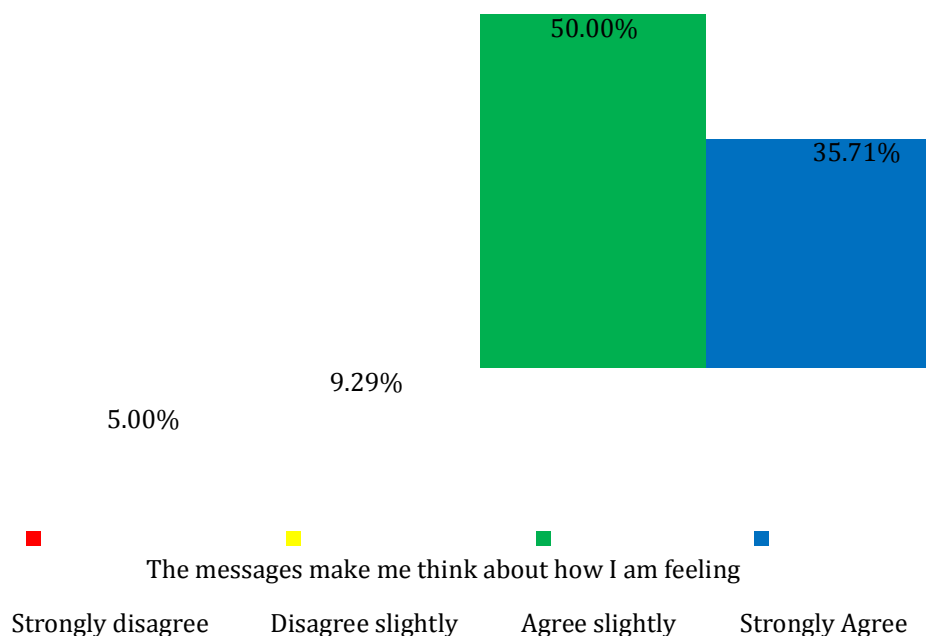
When asked if the messages from the All Right? Campaign were helpful nearly all of the participants responded either strongly agree or agree slightly.

Appendix Item 2. The All Right? Campaign messages are helpful

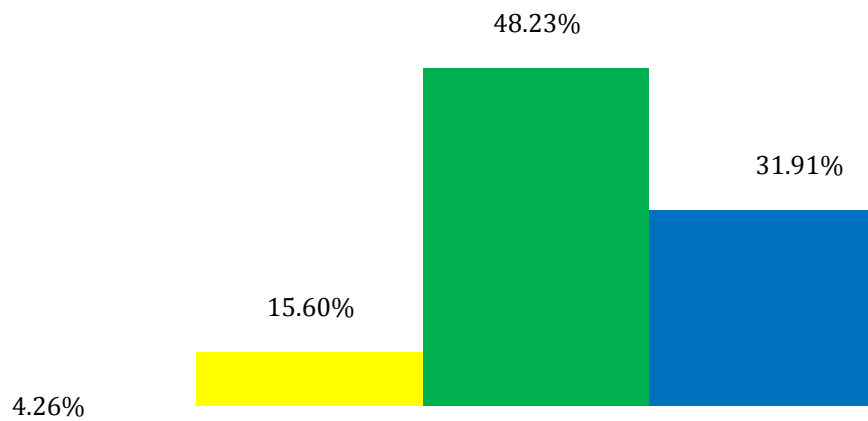


Similar results were returned when the participants were asked "the messages make me think about how I feeling," "the messages give me ideas of things I can do to help myself or those around me to feel better," and "The way the All Right? messages are delivered is helpful."

Appendix Item 3. The messages make me think about how I am feeling



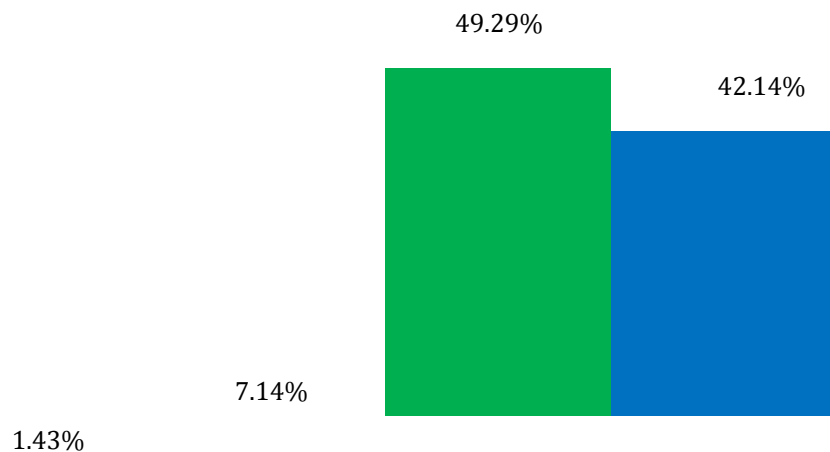
Appendix Item 4. The messages give me Ideas of things I can do to help myself or those around me to feel better



The messages give me ideas of things I can do to help myself or those around me to feel better

Strongly disagree Disagree slightly Agree slightly Strongly Agree

Appendix Item 5. The way the All Right? messages are delivered is helpful



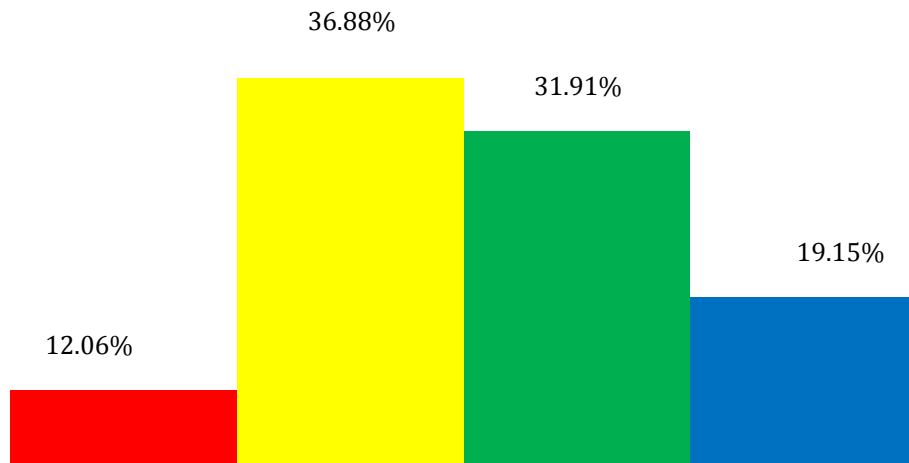
The way the All Right? messages are delivered is helpful

Strongly disagree Disagree slightly Agree slightly Strongly Agree

A

slightly more mixed response was returned when the participants were asked to respond to "I have done activities or things as result of what I have seen or heard."

Appendix Item 6. I have done activities or things as result of what I have seen or heard



I have done activities or things as result of what I have seen or heard

Strongly disagree

Disagree slightly

Agree slightly

Strongly Agree

However these results, compared with the responses to how the All Right? Campaign's messages are being received and interpreted by the participants in the online survey, indicate that the All Right? Campaign is having a positive impact on the wellbeing of the LGBTQIA+ community in Christchurch.

Appendix 5: Key quotes

Most of the quotes below were included in the main body of the report, illustrating some of the key themes that came across. Some other relevant quotes have also been included below.

Wellbeing and strengths

'I love being queer'

'We take pride in ourselves, our strength, we are all part of a community'

'We've been there and we know how it feels'

'I'd be a very different person if I'd been straight (not as compassionate)'

'It made me more clear on who I am and where I fit – it was a long journey to get here and to feel like me'

'I struggled with discrimination early on; this led to a profound learning experience which I treasure, my life isn't controlled by social norms'

'If anyone needed looking after, we'd all pitch in, others have done it for us in the past so we kind of pay it forward'

Whānau

'We huddle together like penguins in a cold hetero world'

'I have a thriving queer family - my own Mum hasn't been as accepting as she could have been'

'I'm in touch with my family but they don't accept me. My family are out of their comfort zone and don't have anything to go by – they have no experience with this difference'

'Mum and Dad raised me with boys' and girls' clothes, which was cool! My parents really don't mind that I am gay, they just don't care'

'I had no such thing as a support network as a teenager...I considered suicide'

'The older generation are more accepting than the baby boomers'

'Dad is a dick and doesn't want to learn but my Mum is willing to learn, I teach my Mum'

'I rely on the support of my husband and his family'

'It's exposure to difference that changes how people manage (their prejudice), there is lots more visibility now and being able to get married was really cool!'

'I feel it's a huge strength to have me and my partner as parents. We are a loving family unit. Coming from diversity is a strength'

'Parents shouldn't leave their support unspoken – they need to be explicit and outspoken so their kids never question that they are supported.'

'My mother probably doesn't remember all the dodgy comments [she made] about lesbians while I was closeted, but I sure do.'

'I went to a Catholic school... They tried to kick me out when I came out, and lots of teachers and classmates were really mean with me, but I have the opportunity of having an amazing family support through those days.'

Not appearing in body of report:

'My cousin is my support; he is gay and has a homophobic father so understands the difficulties and challenges'

Community and connection

'We're a small group and therefore we look out for each other'

'We all live quite close together...our community can be a lifesaver'

'Our community is a source of strength, we take pride in ourselves'

'It's harder for older people, I'm too old for bars so it's tricky accessing the community'

'There is lots for young people, nothing for the mature aged'

'There is more drama, more financial strife, on top of dealing with your own stuff'

'There was a sense of power in coming out! I am here, I am home, these people accept me.'

'I believe it is important to be out and show the younger generation that there is a positive life to be lived'

'...the question about straight acting pisses me off it suggests there is a mould to what us as gay men have to be like. I could be considered straight acting, but Im just me'

'I have some queer friends but I don't feel like I am part of the Christchurch queer community. I would love to meet other fellow queers but I don't know where to start looking'

'The gay community has to be one of the most judgmental communities known to mankind. If you dont fit into one of the cliques or "tribes" then you're an outcast.'

'Is there even a community anymore? Even ten years ago I'd say yes, but being gay isn't enough anymore - there are so many of us that it often feels like some are desperately hanging onto the notion of community and it feels forced. By continuing to push the notion of a community it perpetuates the idea that we are different. The only thing that makes us different is who we are attracted to.'

'Christchurch has recently started more events for our community and I have found a group of fabulous queers'

'We look out for each other, it's a tight knit community'

Not appearing in body of report:

'There is a strong community which is supportive'

'The social scene is growing at a healthy rate'

'When meeting up with people from my past I feel a bit self-conscious about being married and gay'

'I wish there was specific gay friendly support visibly offered in Christchurch. I was moved to tears when I saw the poster that was captioned Manly As, and something about "whoever you love", with a man with a tattoo of a man's name. That helped a lot'

Perceived issues

'I get more people yelling at me because I am fat (than due to my sexuality/gender identity)'

'I don't want to be brought back to a state of feeling shit about myself'

'We are really comfortable holding hands and only rarely is anything said...we did get called 'faggots' recently though'

'I feel more unsafe when I present as femme; I'm over sexualised as a woman'

'I see, 'no fats, no femmes, no Asians' loads on Grindr, it's like people don't think that's offensive at all'.

'For example, 'I only date straight acting, I only date tops''

'It's a Kiwi thing, not a gay thing'

'I associate gayness with party times, drugs and alcohol'

'Lots of people on Grindr take meth'

'Young people in New Zealand drink until they vomit'

'Self-harm and suicide are a big deal'

'It's not just a gay issue, it (mental health issues) is everywhere'

'There is an absence of safe places for recovery'

'It gets inward, no one is available, we're all too busy treading water'

'It's hard to tell if people have mental health problems, a lot of people are on anti-depressants'

'Girls are good at talking, boys aren't so much'

'Finding a good counsellor or GP is a lottery'

'As a sick person you shouldn't be going to seek advice from a sick person'

'There is an overflow at (Youth Hub) 298, no one can get in'

'We've just been at the funeral of a friend who died of pneumonia; he had undiagnosed HIV and I doubt he was out to his GP'

'I get asked massively stupid questions about sex. Nurses can be real shit, doctors are a bit better'

'Doctors shouldn't assume we are hetero, they need better training'

'I came out to my GP today (as non binary). He was educated to call trans people 'it''

'Half the GPs don't know about gay STIs and treatments'

'The forms are all hetero focussed...I found the whole thing quite rude'

'I haven't been to a counsellor because I have LGBT related worries, I wouldn't know where to go'

'All I ask for is acceptance and openness and not feeling like my sexuality causes them discomfort.'

'We should not have to find LGBTQIA+ friendly doctors, they should all be trained to deal with all people from all walks of life.'

'Being LGBTQIA supportive should be the norm and a legal requirement, not something to be praised for.'

'My place of work received the Rainbow Tick, but I felt it was underwhelming and far more of a marketing incentive than a true desire for inclusivity. If businesses undertake this sort of training, they should not seek market benefit from it. It's just the right thing to do.'

'It's not fine. Shit still sucks.'

'Remember the diversity within diversity!'

'It (IVF) was a fraught experience'

'I'm more worried about transphobia than homophobia'

Not appearing in body of report:

'Where are friendly services for someone visibly different, like trans women?'

'My nurse assumed I was heterosexual, didn't give me all the tests I needed, so I had to educate her'

'Having to bind my chest is tiring and painful but they're doing no transgender surgeries at Christchurch Hospital's plastics department and I wouldn't get in with my weight being as it is. When I'm stressed I eat more. Sigh. I wish they'd understand how important this surgery is to trans men'

'I have never held hands with my partner in public. People pick up that I am gay and it's just not worth it. I don't feel comfortable'

'There seems to be more hostility towards men being in relationships with men'

'It's easy being gay as opposed to being intersex or trans. Other groups have a tougher time'

'Small town New Zealand is unsafe'

'I have been yelled at, chased, had things thrown at me, I don't feel comfortable holding hands with my partner. It hasn't changed heaps, there are lots of people out there whose attitudes haven't changed'

'Is it really worse? When I came here ages ago I had the same fears as I do now?'

'I feel safe in my community'

'People don't know understand mental health issues, which can be isolating for the person'

'Meeting my partner at a particularly dangerous time in my journey meant that she quite literally saved my life. To this day, we check in and manage each other's wellbeing frequently to ensure that we are doing the most for each other that we possibly can. She is the biggest blessing.'

'My whānau and partner and friends are all equally valued to me, however having my partner by my side - and mine at hers - every day, has created a level of safety and stability that leaves me no time to slip into harmful thinking'

'I could do with better anxiety management that works every time not just I'll try this and then this and hopefully one of these works'

'I do have some issues with binge eating and purging when I have let stress build up - ex bulimia but it 'flares up' on occasion'

'Would be great to have more events or groups that are alcohol free. More social events for young people wanting to meet up instead of grindr for those coming out. Groups for older guys coming out or exploring their sexuality e.g married but bisexual. a group for rainbow people with mental health issues. eg I'm newly diagnosed bipolar but there are no support groups to join'

'Going to rehab and getting off drugs and alcohol has dramatically changed my life, people pleasing was also a drug of choice for me and learning where that came from has probably saved my life after several suicide attempts I no longer wake up disappointed and wanting to die, I wake up grateful and I want to live'

'I think there needs to be more Queer spaces that don't involve alcohol as there are some people in the community that don't drink or don't feel comfortable in that environment'

Aging

'Gay people get old too!'

'Some people go back in the closet when they go to a retirement village'

'My godfather is gay; he was dying in hospital and his partner wasn't allowed to sleep in the same room'

'My mum started introducing (my partner) as 'my friend' at the retirement village'

'You'd have to come out again in a rest home or not be out'

'I learned about gay sex from porn. It's very much not the same as real life'

'There was one lesson on homosexuality instead of it being talked about within all the other lessons, they were relevant to us too but we were ignored in those'

'My teacher told us a weird story about how his friend came out to him and how shocked he was about it. There was no other talk about gay issues'

'Schools portray porn as a really bad thing to do'

'A weird sex ed thing happened at school – the girls (went to one room) and talked about endometriosis and the boys went off and talked about pornography'

'I had no education re STIs then got chlamydia and learned that way!'

'I had to talk to my cousin about consent, she had no idea!'

'I was badly bullied as a teenager'

'I 'butched up' as a reaction against it (bullying)'

'Physical violence occurs at my university towards LGBT people'

'There is lots of bullying in changing rooms'

'I see young people get beaten up because they are perceived as gay'

'There were no out gay kids. If you were out in an all boys' school you would've been bullied'

*'I didn't feel comfortable being out at *all boys school in Christchurch* as a teacher, I was out at other schools'*

'I would only go to a university with an LGBT group'

'I see homophobia all the time, people don't really know they are doing it'

'My teachers didn't challenge it (homophobic language) so other kids just knew they could get away with it'

'Teachers created a sense of fear, not the students'

'Be out, you don't know whose life you can change for the better just by being visible... that won't happen unless we expect it to and we set the example'

'I would ask why, and determine if they are simply a private person, or if there is some inherent threat in their workplace'

'That's their choice. We've got to stop with this notion that being gay is such a huge deal. It's just one part of who they are and entirely unnecessary for anyone else to know if they don't want it to be a deal'

'Schools ignore harassment unless it's physical. Verbal hurts, too!'

Not appearing in report:

'I face a lot of racism online'

'(There is) the possibility of being lured by a bigoted person'

'I had a pretty bad cyber bullying experience when I was younger so now I'm pretty careful about the information I give out'

Aspirational Ōtautahi

'I don't want to have to be brave – I just want to hold hands like everyone else'

'We don't have a Pride parade but we could have a rainbow (pedestrian) crossing, like Wellington does'

'There is nowhere distinct to go, not many places you can safely be gay'

'(We need) more visibility that we are here – two boys or girls holding hands on the pedestrian crossing sign'

'We need a venue!'

'More gender neutral toilets; the bus exchange toilets are awesome'

'An LGBT+ parents group would be great'

'Queer people going into schools for sexuality education would be cool!'

'Homelessness is a problem – community based housing would be good'

Not appearing in report:

‘Challenging the narrative of "male/female" especially in universities. The "boy's club" idea dominates and is not only toxic and damaging to LGBT communities, but to women and people of colour as well!’

‘Housing in Christchurch for the LGBTI community can be a problem.’

‘I think we need overall better mental health support, and of course the safety and bullying of kids (and adults) is super important’

‘If we had more visibility and connection in the community we could be more inclusive and LGBT friendly than Auckland and Wellington. Christchurch is known as a conservative city’

Parenting

‘There are lots of prejudiced and bigoted people about...it could lead to bullying’

‘I feel it’s a huge strength to have me and my partner as parents. We are a loving family unit. Coming from diversity is a strength’

‘Other kids don’t think it’s weird and strange that my children have two mums, they think it’s cool’

Allyship

‘There’s, like, the uncomfortable homophobia of trying too hard.’

‘Awareness of one part of your identity shouldn’t be all people see about you.’

‘It’s hard sometimes, but we can give people time to learn.’

‘It's not enough to not be homophobic/transphobic. You need to actively learn and listen to be a good ally.’