Part of the Picture: Lesbian, gay and bisexual people’s alcohol and drug use in England

Case Studies

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The three case studies presented in this report form part of the data collected during Part of the Picture (POTP). POTP is a five year study exploring drug and alcohol use and dependency among lesbian, gay and bisexual (LGB) people in England.

A report published at the end of the third year of the study, presenting quantitative data collected from 2009-2011 and based on a sample of more than 4000 LGB people, showed four distinct findings in relation to higher likelihood of drug use and binge drinking, higher likelihood of substance dependency and barriers to help-seeking in relation to substance use among LGB people.¹

A report published alongside this one, presenting quantitative data collected in 2012 and based on a further sample of more than 2000 responses concluded that:²

**Last month drug use and frequency of binge drinking remain at relatively high proportions when compared with the general population**

Consistent with previous findings, nearly 3 in 10 respondents had used at least one drug (excluding alcohol) in the last month, and 3 in 10 respondents reported binge drinking at least once or twice a week.

**Over a quarter of respondents scored as substance dependent³**

Findings in relation to substance dependency indicate high levels of potentially problematic drug and alcohol use among LGB people.

**Poly substance users are most likely to indicate substance dependency**

Respondents who reported combining two or more substances in a typical session were more than twice as likely to score as dependent compared with those who typically used only one substance.

**Those scoring as substance dependent are more likely to seek help, although from informal sources rather than specialist services**

Respondents who scored as dependent were more than two and a half times more likely to have sought information, advice or other help than those who did not. However, those who had sought help were more likely to access informal sources such as the internet, friends, family and partners, leaflets and the media, rather than more formal or professional services.

**A third of respondents who scored as substance dependent would not seek information, advice or treatment, even if they were worried about their drug or alcohol use.**

Fears around confidentiality and feelings of shame and embarrassment prevent some people from seeking help, and may prevent those who do seek help from making use of mainstream or specialist substance use services.

The POTP reports so far present compelling evidence about the nature and extent of potentially problematic substance use among LGB people, and are largely quantitative in nature. The three case studies in this report, based on people's lived experience, aim to give insight into the life stories of the LGB people depicted, and of the relationship they have with drugs and alcohol. Of course, these three case studies are only a selection and are not reflective or representative of the lives of the respondents who have been studied as part of the quantitative research to date.

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³ DSM IV criteria has been used to establish dependency. Those who indicated three or more DSM IV criteria for dependency were classified as substance dependent. See American Psychiatric Association (1994) The Diagnostic and Statistical Manual of Mental Health Disorders 4th edition, Washington DC, American Psychiatric Association.
The people whose stories are told here responded either to an advertisement in The Lesbian & Gay Foundation’s weekly e-bulletin throughout October 2012, or to a direct email sent to people who had completed a POTP questionnaire at Pride events that summer and indicated that they would like to take part in further research. They were selected from a pool of twelve respondents on the basis that:

- they were more than thirty years old; and
- they were regular binge drinkers and/or were regular users of other drugs.

These characteristics were deemed to be important because we wanted to follow up on some of the themes raised in the 2009-11 report. In particular we were interested in substance use among people aged over 30, as the data showed that LGB are more likely to continue using substances into later life compared to heterosexual people.

The interviews all took place at The Lesbian & Gay Foundation Community Resource Centre in Manchester in November 2012. They followed a narrative pointed approach designed to elicit life story. Interviews lasted between 30-90 minutes and were tape recorded and fully transcribed. The interviews were analysed by a panel of four researchers from the project team using the Dubrovnic tradition developed for use in analysing qualitative empirical textual data. The availability of different perspectives from the group members provided a form of dynamic and creative engagement with the text. The interviews were then written up as case studies and thematic analysis conducted across the three, presented below.

We invite you to read the case studies below and to reflect on them in your own time in order to extract your own meaning. We hope you enjoy reading them and extend our warmest thanks to Jeff, Robert and Kate for their candor and for allowing us into such intimate areas of their lives. The names of the characters have been changed in order to preserve their anonymity and other identifying features of their stories have also been removed.

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4 Ethical approval for the research was granted by the Psychology and Social Work Ethics Committee at the University of Central Lancashire.
Jeff was in his mid-thirties when the interview took place. He grew up in a rural area with his mother, father and a younger brother. He describes being quite bookish as a child. He was capable academically and did well in school, getting a good set of grades in his GCSEs before going on to sixth-form college. He recalls having a sense of deliberately looking to do something slightly rebellious at this time, saying that he had been quite “straight laced” up until that point. He describes his home life at the time as “a bit mental”. His mother had cancer and he was aware that, unbeknown to her, his father was having an affair. These issues all created quite a lot of pressure for him.

When he was 17 he started smoking “weed” (cannabis) with friends from college. He describes how they used to go to each other’s houses and “just chill and have good conversations”. He says it was “fun”, an “escape from home” and says that “nothing bad happened”. He saw cannabis as different to other drugs, more acceptable, less risky and “more natural”.

“And I think I’d always had a bit of fear of other drugs. I think maybe things through the videos at school where they showed you the extremes of what taking e [ecstasy] does, I think that stuck with me and that scared me a bit. … I went to college after that and just met more and more people who were doing drugs or had done drugs … and some of it sounded a bit scary and some of it sounded as if it wasn’t for me, but it was just in the back of my mind I think that I wanted to try it, I wanted to give it a go…”

Still at sixth-form college, Jeff had not yet come out to his parents about his sexual orientation. He had a very close friendship with a young woman of the same age and they spent a lot of time socialising together, hanging out, smoking cannabis, talking and having fun. Later, Jeff went to university to study. He got a good degree but had to move back home afterwards for financial reasons. This was a difficult time for him: he was still not out to his parents and he was less interested in socialising with the friends that he had before he went to university, feeling that he had moved on.

At the age of 24 he came out to his parents and talked to them about a sense that he was still searching for himself. His parents were quite supportive although his mother adjusted more easily than his father. They both encouraged him to go travelling, which he did. When he was in Australia he became friends with another young woman. She was into taking ecstasy and they began to talk about going out partying together.

“… and then [I] just decided to give that a go really. But I was … quite aware what I was doing and wanted to make sure I was with people that I could trust in case anything went wrong and so I approached it quite sensibly … again I had a really good time and loved it and enjoyed it… I think … the point when I took ecstasy, I think it changes you, I think it really does. It makes you see things so differently, and e, I think you can achieve closeness with people that is so rare and I think, that you can’t normally get, and I think it is an amazing feeling and not many people tell you about that. I mean it’s normally the bad things that you [hear], dehydration and you know you can kill yourself with water, and I think as long as you are sensible about it, it is absolutely fine.”

After travelling, Jeff returned to live with his parents again because he had “no money”. He still felt isolated at home and describes feeling a little stuck, not enjoying his life very much. He had quite a few friends in another city nearby and started going there at weekends.
“...so I think yeah I was seeing drugs as a bit of escapism, I mean I didn’t really have any friends in my home town, I had come back from travelling and I didn’t really want the friends I had when I got back… and we’d take ecstasy and go clubbing all night and have a really good time. And then it sort of shifted from ecstasy to experimenting with other things as well; so uh, MDMA came on the scene, um, which I much preferred, it felt a lot cleaner … it was a nicer, high, … So MDMA became, I think it still is, my favourite really.”

Jeff also tried ketamine in his mid-twenties, but says he was “never a big fan”. He says he liked drug experiences which heightened his pleasure in certain situations or heightened his enjoyment of certain relationships.

“So that’s all quite interesting and I think that’s why I lean more towards MDMA, is that friendship and feeling close to people. If you are in a room and everyone is on MDMA it is a lot more friendly and people do want to listen to you and talk to you and it’s more about a group of people rather than single people.”

He describes feeling in control on MDMA and ecstasy but not with ketamine. For similar reasons he generally chose not to drink alcohol when he was using other drugs. Jeff also tried cocaine when he was in his late twenties and describes an ambivalent relationship with the drug which he describes as having a different pharmacological “personality” to ecstasy:

“I am not a big fan of coke. It gives you a nice buzz and makes you feel quite confident and sometimes I think I lack in confidence and it’s nice to have that boost, and to think actually I am really good, but it doesn’t last. It’s short lived, it’s very expensive, and yeah, and plus I don’t really like meeting people on coke, it is a very arrogant drug, I mean people can be quite pretentious and people do think they are quite special and quite irritating and talk quite a lot.”

Jeff eventually chose to move to the city he had been going to for weekends and has built a successful career there in a challenging field. He feels that when he first visited, ecstasy in particular gave him access to fun, escapism and a friendship network which he still has today. Now in his early thirties he takes drugs much less frequently. There are two main reasons for this: firstly, he has a demanding job which comes with responsibilities and he finds that this doesn’t work alongside regular recreational drug use. Secondly, he finds that the come downs from drug use are much worse now that he is older. He also describes how the spaces in which he uses drugs have altered over time, now tending to use at house parties rather than in clubs.
Robert was in his late fifties when the interview took place and he describes the changing nature of the gay scene and what it was like to be gay forty years ago. In reflecting on his early life he describes how he had “always known that I was gay”, but “wasn’t very happy about it”. He was referred to a psychiatric hospital but decided that, “if that was the cure, as it were, I would make the best of the status quo”.

He describes how his alcohol and drug use developed. He talks about these completely separately seeing the two as fulfilling very different functions.

Robert describes how he started to drink as a way of trying to meet someone and recalls how he has sat in straight bars and felt very alone, unable to approach anyone for a conversation because he had no way of knowing whether they were gay or not. He suggests that the only safe spaces for gay men were in gay bars. Although the situation has improved over recent years, for example with the advent of the internet, gay walking groups and gay coffee bars, in the past the only places where he could meet other gay men, unless he wanted to go cottaging or to saunas, were gay bars.

“…and I suppose really there are, or there were, this was before the internet, very few ways of meeting other gay men. Erm…you either went cottaging, or you went cruising, or you went to a bar and that was it. So I suppose in a way it was very easy for gay men to have a social life or life that revolves around bars and drinking.”

He describes how his relationship with alcohol developed as a way of trying to meet people and how he really wanted a long-term, committed relationship with someone that wasn’t simply about sex. He used to go out to a gay bar after work and start drinking at 5.30pm and would often drink until 2.00am. At one time in his life he recalls the fact that he might drink 12-15 pints of lager a night “not particularly because I wanted to, but because I wanted to meet someone.” He recalls times when he woke up with people or in places that he didn’t know and wondering “did I really do that?”

Now in his mid-fifties, Robert doesn’t currently have a partner and says his relationship with alcohol has changed. He doesn’t go out as much anymore but tends to drink on his own at home, saying that it helps to pass the time.

“…so it’s got to the point where I am drinking far too much on my own and not particularly enjoying it and falling asleep on the sofa at 2am and going to bed.”

Apart from his use of poppers, which he dismisses as “not really using drugs” and an early experience with cannabis in Amsterdam which put him off drugs, Robert did not use any substances other than alcohol until he was in his mid-fifties. He says that he had always been frightened of drugs, having heard stories about how addictive they were and how they could change people. In his mid-fifties however, two things occurred at the same time that appeared to change his view of drug use. Firstly, he was offered drugs by someone who he knew quite well and whom he admired because he was thought of as respectable, with a good job and a nice house. This led Robert to question some of his beliefs about drug use. At the same time, he started to reflect on his own aging process, looking at his father, who is thirty years older than him and still alive, and deciding that he didn’t want to be like him.
“...having got to this age, I am not sort of...the thought of living to ninety doesn’t, isn’t something that I am looking forward to at all...the thought of living...existing for another thirty years...doesn’t really hold any great pleasure or prospect...I suppose I’ve got to a point where I don’t particularly enjoy life and don’t have any great reason to want it to go on for a long time.”

Robert’s sense of isolation and fears about the future have led him to want to experiment; to “do more things” and “take things slightly further”. He describes how his use of drugs is “definitely connected with sex” and has allowed him to enhance his sexual experiences. Hence in his mid-fifties, Robert began not only using but injecting Class A drugs. He has also recently started to inject other people. He describes his drug taking as occurring in a private environment with “like-minded people” to enhance his experiences of sex.
Kate was in her early thirties when the interview took place. She talks about drinking and smoking (tobacco) in the park with friends as a teenager, describing this as motivated by a desire to fit in with her peers and to be popular. At this age she was beginning to be aware that she might be gay, but she didn’t want to admit it to herself yet. Kate didn’t get on well with her mother, who she describes as “disapproving.” They had a difficult relationship and Kate moved out and into a series of flats with other young people. People in Kate’s shared house were experimenting with drugs and drinking a lot and she started to experiment with other substances.

Kate subsequently decided that she needed to “get out of the country”, to meet some different people and do something different. She went to work abroad for a few months and says she really benefited from this experience. When she came back to England, she decided to enrol at college, and then go to university.

She moved back to live with her mother and got a temporary job before college started. She remembers not being very happy at this time and says she had low self-esteem. She says she went out a lot at weekends, drinking and taking ecstasy for the first time.

“I went to college but I was still in [my home city] then and that’s when I started trying different things like mushrooms and things like that. I just, I just don’t think I was very happy [laughs], at all really… mushrooms, and still smoking and still drinking. Erm… and then… I think ‘cause I might have had back then, obviously not now, quite low self-esteem as well.”

She describes going out most nights to other people’s houses or out drinking. Her friends were mainly from a part-time job and were people who she could take drugs with, including cannabis, mushrooms and occasionally ecstasy; she says they were “people who could get things that I wanted.”

After college, Kate went to university. Her alcohol and drug use continued, with whatever was available. She says she felt much more in control of it, however, and describes her attitude to substance use as being, “as long as I made sure I did really well then I didn’t have a problem with doing anything else that I wanted to do.” Kate also says that living away from her family influenced her relationship with substances, because she could behave how she wanted to without their disapproval. Kate came across cocaine while at university, but only took it for the first time when she met up with friends from a temping job at home in the university holidays. Meeting up with these friends to take cocaine became a regular feature of the holidays. Using it made her feel more confident and good about herself. Kate says it is the drug she would choose to take over any others.

After graduating, Kate moved again, this time to study for a post-graduate qualification. Her substance use reduced during this period, as the demands of the course made her feel tired a lot of the time. Kate passed the course but didn’t manage to get a job at the end of it, which she says “sent me back a little bit” and back to her old habits. At this time, a close friend of hers began a relationship with someone who was dealing cocaine and Kate and her friend started taking a lot of cocaine together. Kate describes this situation as continuing for a long time, as she remained unemployed and the relationship she was in broke down. She witnessed her friend becoming obsessed with cocaine however, to the detriment of other areas of his life, and eventually they stopped speaking.

Later on, Kate did get a job in the profession she wanted, but was unhappy in it. She was not able to be out about her sexuality and she didn’t get on with the other people at work. Some of her colleagues discovered details of Kate’s personal life through social media, and had a problem with her being gay. Kate didn’t feel supported in her work, or settled in her
role. She says she used substances as an outlet, taking ecstasy or cocaine and alcohol at weekends, and drinking alcohol and occasionally taking drugs in the evenings. On one occasion, she coaxed some work colleagues into taking cocaine with her on a work night out, an episode she now regrets.

Kate managed to get a new job, and was much happier there. It was a much more supportive environment, she got on with her colleagues, and was able to be out about her sexuality. She describes everything in her life falling into place:

“I don’t know, I think it was because it’s a permanent job, erm, and I met my partner, and obviously came out to my mum, and regardless of her reaction to that, I think, erm, maybe I could finally be myself. Like I said, I’m very well respected at work and I’m doing really well, and… I think I feel a lot more confident. I don’t know, I feel a lot more in control of things.”

Kate says her substance use has now reduced, and she associates her current use with enjoying herself. Kate uses cocaine and alcohol on nights out with friends at the weekend and on holidays, when it’s available. She sometimes smokes cannabis with her partner at home at the weekends.

“I feel very much in control of the situation, if I want to do something I will, and I still will and I still do. Erm, it doesn’t affect my life at all, doesn’t affect my relationship.

… So yes, I will go out at the weekend and yes I will have a good time, erm… and I think that’s use, not abuse. I don’t, it doesn’t affect anything, I’ve just recently, erm I’ve recently finished my [second post-graduate qualification] so it doesn’t… affect me anymore, maybe it did in the past, but… I don’t know.”

Kate feels more confident in herself now, and is feeling positive about the future. She has lots of plans for professional development. She enjoys using substances recreationally, but is aware that her use of them and attitude towards them could change in the future:

“I think the problem is, once you’ve opened Pandora’s box, you can’t close it again. I don’t think, I think if you’ve done something and you know how it feels, and you know… and you know that you can have that again, I don’t think you’d say, “I will never ever do that again”

… I don’t know what the relationship is there between work and the being in control of things, but… then if something really terrible happened and obviously, if all this went wrong, then I probably would go back to doing that again.”
The three case studies have a number of differences and at first glance, one might wonder what such different stories might tell us about the attitudes and behaviours of the wider LGB population with regard to substance use. We argue that it is through the analysis of these three cases that we have understood the self-reflection, decision making and actions of these three lives. In contrast to the survey data which forms the main Part of the Picture study, the stories offer important biographical detail about the life processes and issues that laid the foundations for subsequent decisions and actions around substance use.

A man in his fifties, Robert’s story of growing up gay forty years ago appears very different to Jeff and Kate’s stories of growing up gay in the 1980s, perhaps because of the significant changes in gay culture and the wider context of substance use between the 1960s and 1980s. At the beginning of the 1960s homosexual acts were still proscribed by law and the only safe places for gay men to meet were in specific licensed venues. By the 1980s and 1990s cities like Manchester had established gay communities and Pride events which offered a public facing celebration of LGB identities. This said, the centrality of licensed venues and the wider night time economy to gay culture have continued to predominate, perpetuating the centrality of substance use in many of the visible centres of gay culture in England. By the 1990s, patterns of substance use were changing amongst many groups of young people, with recreational drug use becoming increasingly normalised as part of the ecstasy generation. The LGB clubbing fraternity have often been early adopters of new drugs, tending to be at the centre of changing patterns of substance use in club environments.

For Robert, growing up in the late 1960s and 1970s, alcohol was an important vehicle for meeting other gay men in safe places. Robert’s sense of isolation and his desire for an intimate long term relationship first led him to develop a dependent relationship on alcohol. In contrast, Jeff seems more socially integrated, having a natural friendship network through school and college. His cannabis use is a way of enjoying these existing friendships and relaxing with friends. For Kate, there appear to be two main motives for substance use: first, as a means of dealing with unhappiness related to her identity, her low self-esteem and her relationships; and second as a way of having fun. In periods of her life where issues related to her sexuality and her sense of self have been unresolved, she generally seems to feel less secure about her motives for substance use. However, in periods of her life when she feels more secure about her professional and personal identity, she reflects on substance use as something celebratory.

Of the three, Jeff makes the most careful and sophisticated choices about which drugs to use, which people to use them with and on which occasions to use them. Initially fearful of using illegal drugs because of the messages he had received from drugs education, but keen to be slightly rebellious, Jeff began to think seriously about using drugs when he met and talked to lots of other people who were using them at college. Jeff makes clear, careful and informed distinctions between the diverse characteristics and effects of different drugs and the ways in which they enhance or negate certain social situations. His motive for drug use has often been about escapism, but this has always been with a view to having fun and enhancing social situations and friendships.

For Kate, her sense of self, as well as the nature of her relationships, have influenced her patterns of use and her feelings about her own use. She has often chosen substances because they will make her feel more confident, or because they are what members of her social circle are taking, and so may help her to ‘fit in’. In contrast to Jeff, elements of Kate’s substance use seem more about managing negative feelings and emotions than enhancing positive ones.
For Robert, meeting other people has always been a key motive for his substance use. Now in his mid-fifties and not in a relationship he says he often drinks alone at home simply to pass the time. He regards his father as old, unwell and alone, and fears that this is what the future may hold for him. This perpetuating sense of isolation, alongside a feeling that he wants to have fun whilst he can, led to a decision to start using Class A drugs in his mid-fifties as a part of enhancing his experience of sexual encounters.

By looking beyond the substance use to the wider lives of these three people we also see that personal achievement and professional development have been key issues for Jeff and Kate, and are also influencing factors in their decisions about substance use. Jeff is a successful professional in a competitive field, something which gives him an important sense of achievement but which also requires that he makes considered decisions about when to use drugs. As he has got older he has found that the responsibilities and demands of his career have increased and as a result of this he goes out less and uses drugs less frequently. It is significant that Kate has felt more ‘in control’ of her substance use at times in her life when she felt supported in her relationships, supported in her working life, and was achieving in her academic or professional life. When the reverse is true, she has felt less in control. All three have been able to manage their substance use whilst holding down professionally demanding jobs and at times it has been the demands of work that have influenced the boundaries and limits of their use.

What all three stories share in common is that each person has had their own struggle with coming out: Robert was not happy about being gay and was offered psychiatry as a cure; Kate experienced prejudice at work and was worried about how her mother would react to her lesbian identity; and Jeff was unable to tell his parents that he was gay until he was 24. As other research has demonstrated, decisions over substance use are dynamic and reflect important psycho-social processes that are about people’s sense of belonging. Hence in many ways our relationships with drugs and alcohol might reflect our relationships to the communities in which we live. As Frosh asks:

> What is it that allows one to feel part of a social order, able to take up ‘citizenship’, neither excluded nor excluding oneself? … To be a citizen, one not only needs to formally belong somewhere; one has to feel that this belonging is real.

It is in this way that these three stories have some relevance to the substance using issues and behaviours of the wider LGB community. What the stories remind us is that the motives for substance use amongst LGB people mirror those of the mainstream population. That is, most people use drugs (including alcohol) to have fun, to meet other people and to enjoy being with friends. However, we also see that drugs can also be a way of managing negative feelings and mental states related to isolation, confusion about one’s identity or the experience of discrimination. Whilst much has changed for LGB people since the time in which Robert grew up, the persistence of discrimination and prejudice related to sexual orientation, and the persistence of internalised homo- and biphobia, may make LGB people more vulnerable to developing dependent and problematic relationships with drugs and alcohol.

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