

Risk for the "At-Risk": Early Findings of an Ongoing Qualitative Exploration of Perceived Risk, Place, and Harm Reduction Behaviour(s) for LGBTQ+ People who Inject Drugs

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Introduction:

LGBTQ+ people who inject drugs (PWID) exist in a complex intersection of stigma and marginalisation [1] [2]. While this population experiences increased risk of injecting-related harms and poor health outcomes (comparative to their cisgender and heterosexual peers) [3] [4] [5], their ability to access harm reduction services and social support is significantly impacted by experiences of stigma and social rejection [6] [7] [8]. This project explores the experiences of a marginalised and largely understudied population, with a particular focus on how LGBTQ+ PWID navigate perceived risk and safety in place. By adopting a novel approach to qualitative data collection, our research aims to understand the multifaceted ways LGBTQ+ PWID perceive and engage with risk in their environment – and how these perceptions impact injecting and harm reduction behaviour.

Methods:

Data collection is ongoing, with a goal of n=30 qualitative “walking” interviews with LGBTQ+ PWID residing in the inner Melbourne area. In contrast to standard interviewing practice, the “walking” interview is conducted while walking together through/to places of meaning to participant, and allows for the collection of rich place-based data [9]. Data is then thematically analysed using the Braun and Clarke method [10] in NVivo.

Key Findings:

Our poster presents a snapshot of the preliminary findings from our ongoing data collection. These early themes demonstrate the importance of inclusive and LGBTQ+ accessible spaces, and also provide insight into the needs and daily risks experienced by LGBTQ+ PWID.

Implications for Practice or Policy:

The findings of this project are an important resource for healthcare and harm reduction providers wanting to improve access to services. This project also contributes to the scarce body of knowledge regarding non-sexualised LGBTQ+ drug use, and demonstrates the potential for further research into LGBTQ+ health and risk behaviour with a specific place-based dimension.

Disclosure of Interest Statement:

None to declare.

References:

1. Deacon RM, Mooney-Somers J, Treloar C, Maher L. At the intersection of marginalised identities: lesbian, gay, bisexual and transgender people's experiences of injecting drug use and hepatitis C seroconversion. Health Soc Care Community. 2013;21(4):402-10. <https://doi.org/10.1111/hsc.12026>

2. Paschen-Wolff MM, DeSousa A, Paine EA, Hughes TL, Campbell ANC. Experiences of and recommendations for LGBTQ+-affirming substance use services: an exploratory qualitative descriptive study with LGBTQ+ people who use opioids and other drugs. *Subst Abuse Treat Prev Policy*. 2024;19(2). <https://doi.org/10.1186/s13011-023-00581-8>
3. Brener L, Cama E, Broady T, Harrod ME, Caruana T, Beadman, K et al. Experiences of stigma and subsequent reduced access to health care among women who inject drugs. *Drug Alcohol Rev*. 2024;43(5):1071-79. DOI: 10.1111/dar.13806
4. Freestone et al., 2022;
5. Iversen J, Dolan K, Ezard N, Maher L. HIV and Hepatitis C Virus Infection and Risk Behaviors Among Heterosexual, Bisexual, and Lesbian Women Who Inject Drugs in Australia. *LGBT Health*. 2015;2(2). DOI: 10.1089/lgbt.2014.0116
6. Xin Y, Schwarting CM, Wasef MR, Davis AK. Exploring the intersectionality of stigma and substance use help-seeking behaviours among lesbian, gay, bisexual, transgender, queer, questioning or otherwise gender or sexuality minority (LGBTQ+) individuals in the United States: A scoping review. *Glob Public Health*. 2023;18(1):2277854. <https://doi.org/10.1080/17441692.2023.2277854>
7. Goodyear T, Mniszak C, Jenkins E et al. "Am I gonna get in trouble for acknowledging my will to be safe?": Identifying the experiences of young sexual minority men and substance use in the context of an opioid overdose crisis. *Harm Reduct J*. 2020;17(23). <https://doi.org/10.1186/s12954-020-00365-4>
8. Schroeder SE, Bourne A, Doyle J, Stoope M, Hellard M, Pedrana A. "It's not just the hit itself": the social practice of injecting drug use among gay and bisexual men in Australia. *Int J Drug Policy*. 2022;103. <https://doi.org/10.1016/j.drugpo.2022.103642>
9. Evans J, Jones P. The Walking interview: Methodology, Mobility and Place. *Appl Geogr*. 2011;31(2):849-58. <https://doi.org/10.1016/j.apgeog.2010.09.005>
10. Braun V, Clarke V. Using thematic analysis in psychology. *Qual Res Psychol*. 2006;3(2):77-101. <https://doi.org/10.1191/1478088706qp063oa>