REIMAGINING INCLUSION

Defining ‘community participation’ amongst lesbian, gay, bisexual, queer, and trans people with a diagnosis of schizophrenia or bipolar disorder
This study examined access to community participation for LGBTQ people who had been diagnosed with schizophrenia or bipolar disorder.
Methods

Semi-structured interviews, quantitative surveys, and social mapping exercises were used to interview 16 participants over the course of nine months.

Semi-structured qualitative interviews were completed with two key community informants and 18 social service providers who work in mental health services and LGBTQ organizations.

Participants and researchers created a short animated film to represent some of the participants thoughts, experiences and opinions.
‘Community’ was widely defined by the participants in the study.

In the participants’ communities they found “acceptance”, “connection”, could “feel safe” and share “similar stories, similar background, similar problems”.

Participants named various locations as relevant to the concept of ‘community’, including LGBTQ organizations, mental health agencies, support groups, advocacy groups, community health centers, health care facilities, schools, workplaces, housing, gyms and recreation centers, parks, and religious or spiritual places.
Mad communities were particularly relevant for some of the participants because of historical and current pathologization of marginalized sexual and gender identities.
A case manager at an organization that provides services for youth experiencing psychosis said that services are “segregated and fragmented.” She called for “better engagement with other services” to prevent clients from feeling like “they’re having to go to a million people when everything is one big thing for them. Everything is connected in their mind but all the services they’re getting are not connected so it’s very confusing”.
Reimagining Inclusion
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