

Tobacco Use Among LGBQQ College Students

It is commonly recognized that marginalized groups, such as LGBQQ (Lesbian, Gay, Bisexual, Queer, and Questioning) individuals, tend to have a higher rate of substance use². However, relatively little empirical research has been conducted specifically regarding tobacco use among LGBQQ individuals. This brief will focus on tobacco use of college students, primarily those whom identify as LGBQQ. Students whom identify as transgender are not included in this brief, unless they also reported their sexual orientation as LGBQQ. As sexual orientation and gender are different constructs, the stressors and experiences of the transgender student population cannot be conflated with those of the LGBQQ student population.

Tobacco Use Rates

According to Kerr, Ding, and Chaya (2014), ever-in-lifetime tobacco use among a large sample of U.S. college students demonstrated significant differences dependent upon sexual orientation. For example, among heterosexual males, lifetime tobacco use was 50%, whereas gay and bisexual men indicated 53% and 60%, respectively. Even larger discrepancies were demonstrated among women; with heterosexual women indicating 39%, lesbian women reporting 56%, and bisexual women with 63% ever-in-lifetime tobacco use.

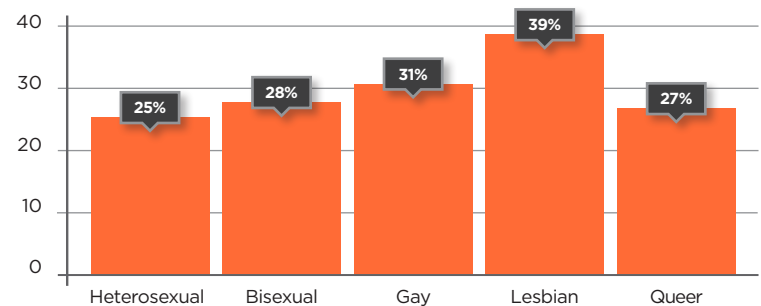
There are several reasons that may account for tobacco use differences between heterosexual and LGBQQ individuals. For instance, stressors related to discrimination, actual and perceived anti-LGBT violence, and lack of social support may influence higher rates of tobacco use².

Additionally, there may be barriers to receiving cessation services. Dependent on location, there may be limited access to culturally informed tobacco cessation programs and quality health care that can properly address LGBQQ-specific concerns². It is important to note that LGBQQ individuals who are low-income, racial/ethnic minorities, residents of rural areas, younger in age, and/or have lower education levels are at a heightened risk of previously stated risks and barriers.

Missouri Assessment of College Health Behaviors (MACHB) Results

According to the MACHB, use of tobacco products is typically higher among LGBQQ students. For example, 16% of heterosexual students indicated using a cigarette within the past year, whereas bisexual (29%), gay (25%), lesbian (32%), queer (21%), and questioning (20%) students reported higher rates. When focusing on frequency of use, 25% of heterosexual students who have used tobacco in the past year indicated smoking cigarettes on a daily basis. However, bisexual, gay, lesbian, and queer students indicated an overall higher rate of daily cigarette use (28%, 31%, 39%, and 27%, respectively).

Frequency of Heterosexual, Bisexual, Gay, Lesbian, & Queer Student Daily Cigarette Use



Another emerging tobacco product is electronic cigarettes (E-cigarettes/E-cigs). E-cigs are battery-powered handheld devices that vaporize a flavored aerosol³. They typically contain nicotine, propylene glycol, and a variety of other flavorings (they can come without nicotine as well). Due to the novelty of these new products, there is more to learn about

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possible short-and long-term health effects. As a result of the uncertainty of the chemical consumption in each product, the U.S. Surgeon General has determined that E-cigarettes can expose users to several possibly harmful chemicals³. Students in the LGBTQ community are utilizing E-cigs at higher rates than their heteronormative student counterparts. For instance, 10% of heterosexual tobacco users reported using an E-cig in the past year, whereas bisexual (16%), gay (13%), lesbian (17%), queer (18%), and questioning (17%) Missouri students are reporting significantly higher use.

Stress and discrimination are strongly correlated in LGBTQ members utilizing tobacco². Thus, it is important to note that LGBTQ students indicated that they do not feel like members of their campus at the same level as heterosexual individuals. For instance, 65% of heterosexual students reported feeling as though they are a member of campus, whereas lesbian (54%), bisexual (60%), and questioning (50%) students reported lower rates of belonging. Further, on the 2016 MACHB, 46% of heterosexual students reported having anxiety, whereas bisexual (64%), gay (63%), lesbian (55%), queer (75%), and questioning (61%) students indicated higher levels of anxiety. This is similar for major depression; bisexual (46%), gay (43%), lesbian (41%), queer (59%), and questioning (48%) students reported more than double the rate of heterosexual students (20%). Therefore, it is important to provide adequate resources to LGBTQ individuals, create safe spaces on our campuses, and train campus employees in cultural competency.

Resources for Smoking Cessation

There are several resources across Missouri to address smoking cessation on college campuses. For example, Partners in Prevention (PIP) and the Wellness Resource Center at the University of Missouri, with support from the Department of Mental Health (Division of Alcohol and Drug Abuse), are able to support PIP schools that wish to participate with the following services:

Cessation Training

PIP provides a 3-4 hour training for cessation coaches. It covers paperwork, dosing of nicotine replacement therapy, and coaching strategies for cessation

consumers. The training also provides a copy of the Tobacco Dependence Treatment handbook if a campus is interested in implementing cessation services.

Nicotine Replacement Therapy

NRT (nicotine gum, lozenges, and patches) can be provided to campuses to assist individuals whom are interested in cessation.

Brochures

There are quitting brochures which can be provided and customized for specific campuses. They include cessation information, locations for services, and contact information for tobacco cessation options on campus. If interested in ordering a brochure, order forms can be found at pip.missouri.edu/brochures.html



Quit Kits

Quit kits are utilized to assist clients when attempting cessation. They include sugar-free gum, stress balls, lip balm, sunflower seeds, and come in a nylon drawstring backpack. All items include some type of cessation messaging, such as the 4 D's of quitting (Delay, Distract, Drink water, and Deep breathing).

Other Resources

The state quitline, 1-800-QUIT-NOW, is a free resource that is currently providing two weeks of free nicotine patches to callers. Additionally, there is phone or text support that can provide to individuals who would appreciate weekly messages related to cessation.

¹ Kerr, D. L., Ding, K., & Chaya, J. (2014). Substance use of lesbian, gay, bisexual and heterosexual college students. *American journal of health behavior*, 38(6), 951-962.

² Sell, R. L., & Dunn, P. M. (2008). Inclusion of lesbian, gay, bisexual and transgender people in tobacco use-related surveillance and epidemiological research. *Journal of LGBT Health Research*, 4(1), 27-42.

³ U.S. Department of Health and Human Services. (2016). E-cigarette use among youth and young adults: A report of the surgeon general

Contact Partners in Prevention at (573) 884-7551. Reported prepared by Shannon N. Braid, Wellness Resource Center Evaluation Staff. Data prepared by Dong Ding.

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