Substance Use: SGM* Populations

*Sexual and Gender Minority

Leah Post (She/They), LICSW, MSW, MPH

About Leah

(She/They)

- Queer, Cis, White, Midwestern
- LICSW and WA state approved clinical supervisor
- Founder of Perfectly Queer Counseling
- MSW and MPH from University of Minnesota

Disclaimers:

I am not an SUDP and do not specialize in the treatment of substance-related disorders. I specialize in working with queer populations and from a public health harm reduction approach.

This is a very broad, complex and important body of work that deserves more than this webinar can cover.

Poll - Who is in the room?

Learning Objectives

- ★ Define SGM Populations and Substance Use
- ★ Identify disparities for SGM populations and substance use
- ★ Understand gaps in research
- ★ Reframe to resiliency for SGM populations
- ★ Local and National Resources for SGM populations and substance use support

Sexual and Gender Minority Definition

“Sexual and gender minority (SGM) populations include, but are not limited to, individuals who identify as lesbian, gay, bisexual, asexual, transgender, Two-Spirit, queer, and/or intersex. Individuals with same-sex or -gender attractions or behaviors and those with a difference in sex development are also included. These populations also encompass those who do not self-identify with one of these terms but whose sexual orientation, gender identity or expression, or reproductive development is characterized by non-binary constructs of sexual orientation, gender, and/or sex.”

National Institutes of Health - Sexual and Gender Minority Research Office

but about that definition…

- SGM is not intended to assume all individuals who may fall within that umbrella term have the same experiences
- Variations exist between all individuals regardless of SGM “category”
- Individuals have intersecting identities: race, ethnicity, socioeconomic status, immigration status, religion, etc.

Defining Substance Use

The DSM-5 considers 10 separate classes of drugs that could contribute to a diagnosable* disorder

• Alcohol	• Caffeine
• Cannabis	• Hallucinogens
• Inhalants	• Opioids
• Sedatives, hypnotics & anxiolytics	• Stimulants
• Tobacco	• Other (or unknown) substances

There are also a number of “substance-induced” disorders that are outside of the Substance-Related disorders category

* It’s important to consider who the DSM-5 was written by and for

Addressing Disparities for SGM Populations

People who identify as gay or lesbian
are **more than twice** as likely
as those who identify as heterosexual
to have a severe alcohol or tobacco use disorder.

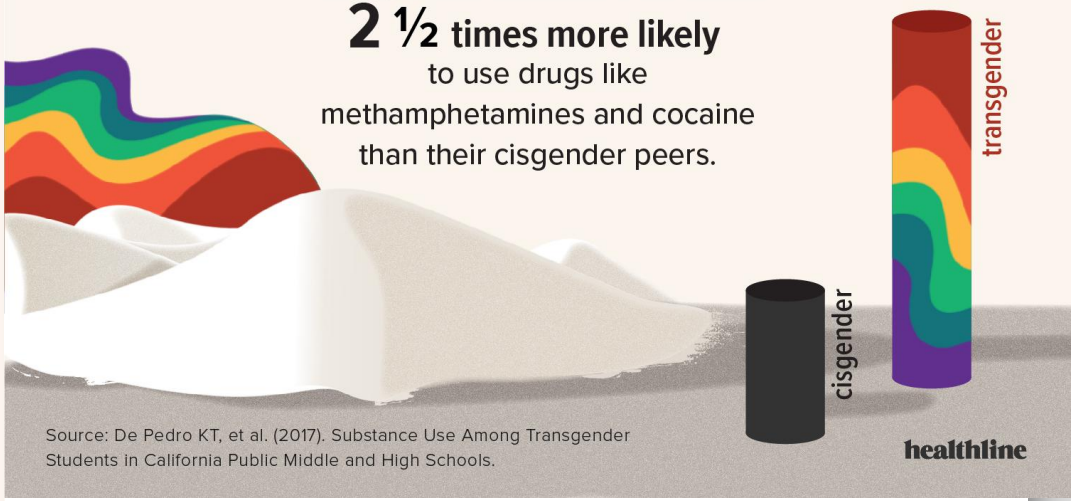
People who identify as bisexual
are **three times** as likely
to have a substance use disorder.

Those who are unsure how to identify their
sexual identity are **five times** as likely
to have a substance use disorder
than heterosexual people.

The National Survey on Drug Use and Health: 2017
Boyd CJ, et al. (2019). Severity of Alcohol, Tobacco, and Drug Use Disorders Among Sexual Minority Individuals and Their "Not Sure" Counterparts.

healthline

Transgender students were about
2 ½ times more likely
to use drugs like
methamphetamines and cocaine
than their cisgender peers.



Source: De Pedro KT, et al. (2017). Substance Use Among Transgender Students in California Public Middle and High Schools.

healthline

https://www.healthline.com/health/why-is-substance-abuse-worse-in-lgbtq-community

LGBTQ+ SUBSTANCE ABUSE STATISTICS

LGBTQ+ adults are
nearly 2X as likely
as heterosexual adults
to experience a substance use disorder.

12.9%

LGBTQ+ people aged 18 or older had both a **substance use disorder** and a **mental illness** in 2019.

1.4 million

LGBTQ+ adults **have misused opioids.**

96.9%

of total opioid users in the LGBTQ+ community **misused prescription medication.**

10.3%

of total opioid users in the LGBTQ+ community used **heroin.**

https://www.alternativetomeds.com/blog/lgbtq-substance-abuse-statistics-and-resources/

LGBTQ+ MENTAL HEALTH STATISTICS

28%

of **LGBTQ+ youth** said they felt **depressed** most or all of the time.

Transgender youth are **almost 4 times** more likely to experience **depression.**

1 in 3

LGBTQ+ adults experienced mental illness in 2015.

LGBTQ+ youth and young adults have a **120%** **higher risk of experiencing homelessness.**

40%

of **transgender adults have attempted suicide** during their lifetime.

https://www.alternativetomeds.com/blog/lgbtq-substance-abuse-statistics-and-resources/

WHY IS THE LGBTQ+ COMMUNITY TURNING TO DRUGS?

Feelings of loneliness and lack of intimacy or someone to confide in
38.46%

Other
28.82%

Rejection or shame from family or friends
24.59%

Frustration from an inability to pursue a love interest
17.33%

Loss of employment or not receiving promotions
13.65%

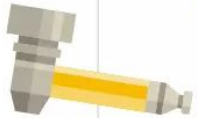
Isolation that arises from public ridicule and rejection
13.54%

Internalized homophobia or self-hatred
13.43%

Discrimination or stigmatization based on sexual orientation
13.22%

Hate crimes; emotional abuse, threats, public humiliation or ridicule
9.53%

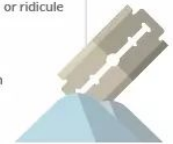
Religious intolerance and inability to join a particular faith
6.50%



Do you or have you ever had problems with drug addiction?

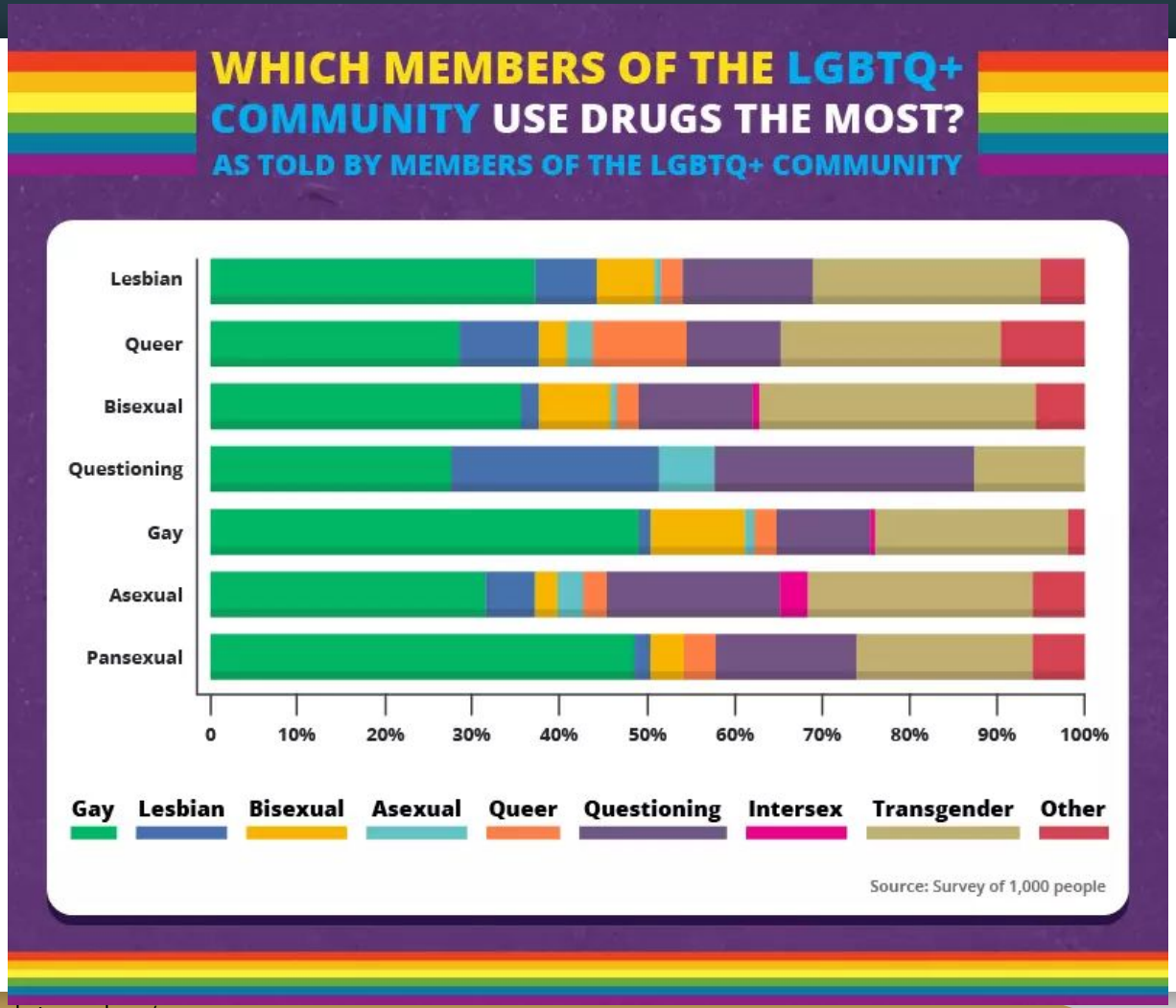
Yes 32.50%

No 67.50%



Source: Survey of 1,000 people

https://fherehab.com/news/lgbtq-substance-abuse/



https://fherehab.com/news/lgbtq-substance-abuse/

Marijuana use (adults), King County (average: 2015-2019)

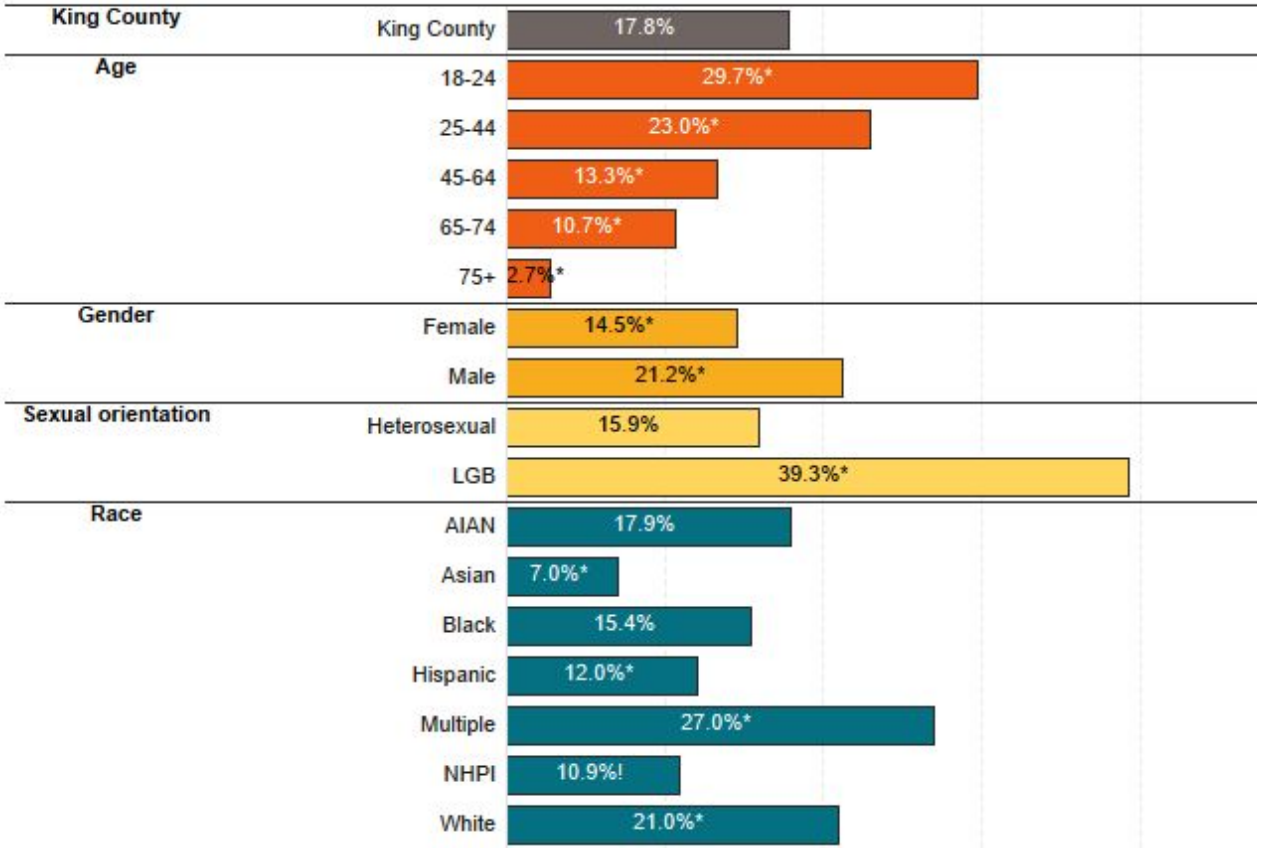
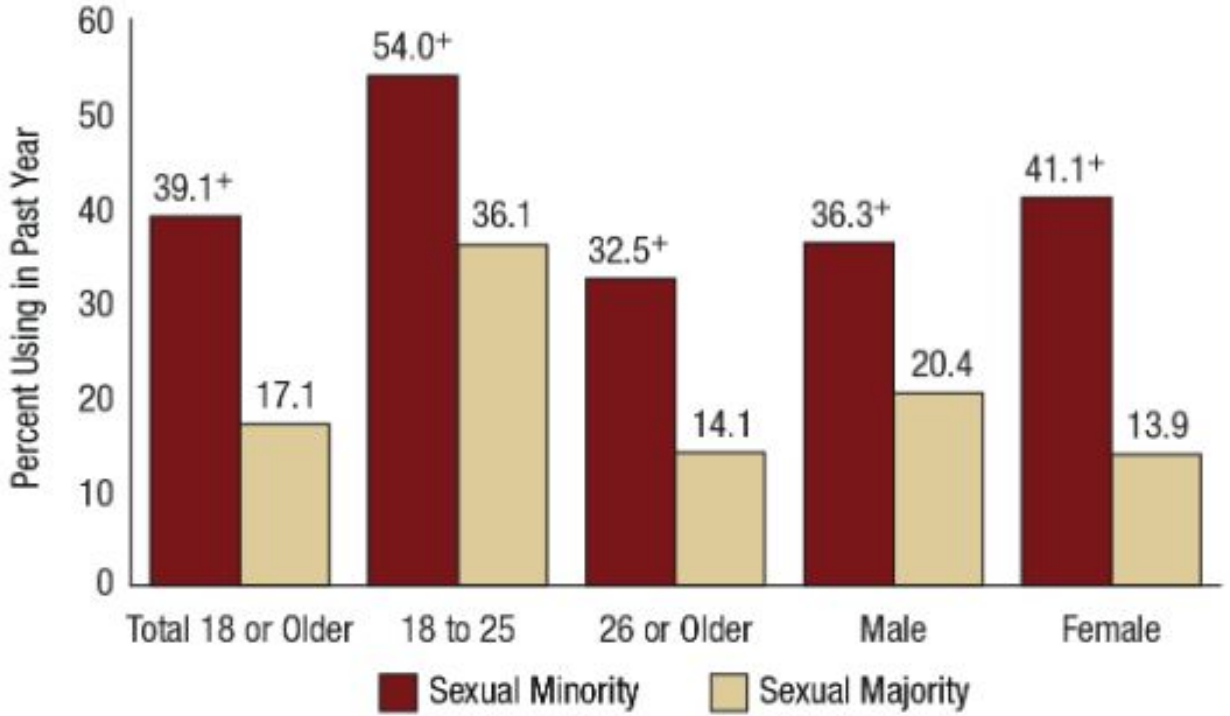


Figure 3. Past Year Illicit Drug Use among Sexual Minority and Sexual Majority Adults Aged 18 or Older, by Age Group and Sex: Percentages, 2015



D

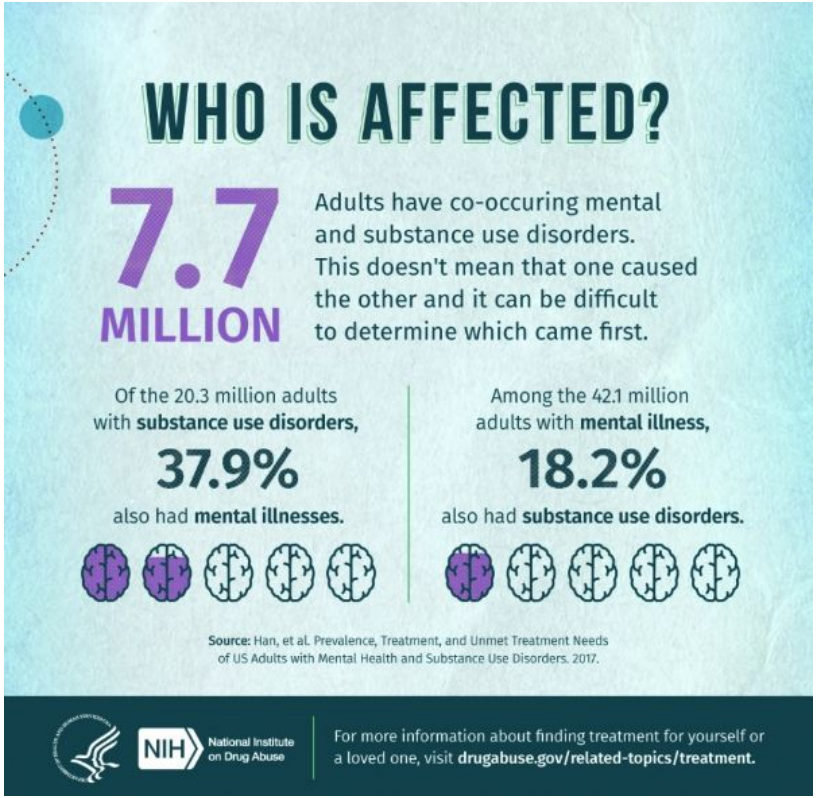
+ Difference between this estimate and the sexual majority estimate is statistically significant at the .05 level.
Note: Sexual minority adults identified as being lesbian, gay, or bisexual. Sexual majority adults identified as being heterosexual or straight.

https://www.samhsa.gov/data/sites/default/files/NSDUH-SexualOrientation-2015/NSDUH-SexualOrientation-2015/NSDUH-SexualOrientation-2015.htm

Co-Occurrence in SGM Populations

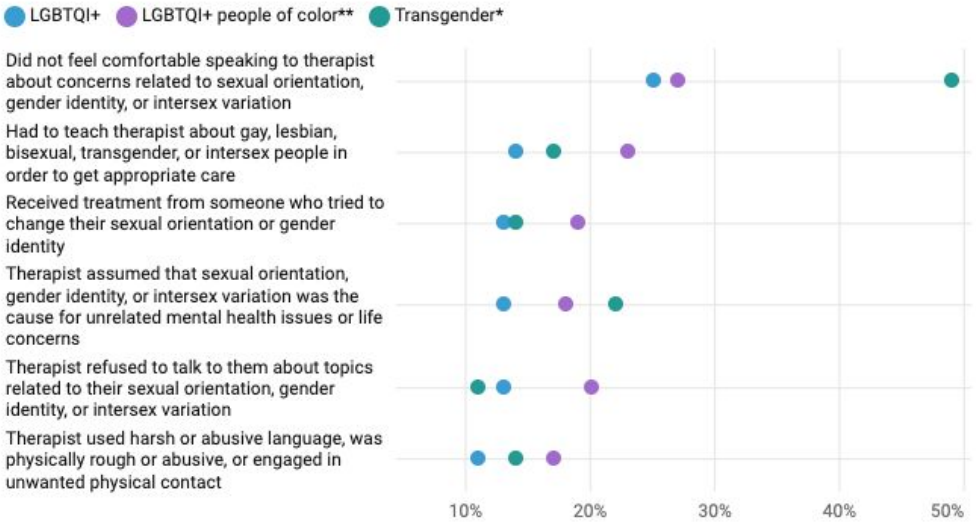
Sexual minorities with SUDs are more likely to have additional (comorbid or co-occurring) psychiatric disorders. For example, gay and bisexual men and lesbian and bisexual women report greater odds of frequent mental distress and depression than their heterosexual counterparts. Transgender children and adolescents have higher levels of depression, suicidality, self-harm, and eating disorders than their non-transgender counterparts.

https://nida.nih.gov/research-topics/substance-use-suds-in-lgbtq-populations



In the past year, 1 in 4 LGBTQI+ individuals did not feel comfortable talking to mental health professionals about their sexual orientation, gender identity, or intersex variation

Share of respondents who reported negative experiences and mistreatment when interacting with a therapist or mental health professional in the past year



Hover or click to see values

Note: Proportions for each individual question exclude respondents who answered "Not applicable" as well as respondents who chose to skip the question. Because respondents reported their experiences from within the past year, these data include experiences spanning 2021 and 2022.

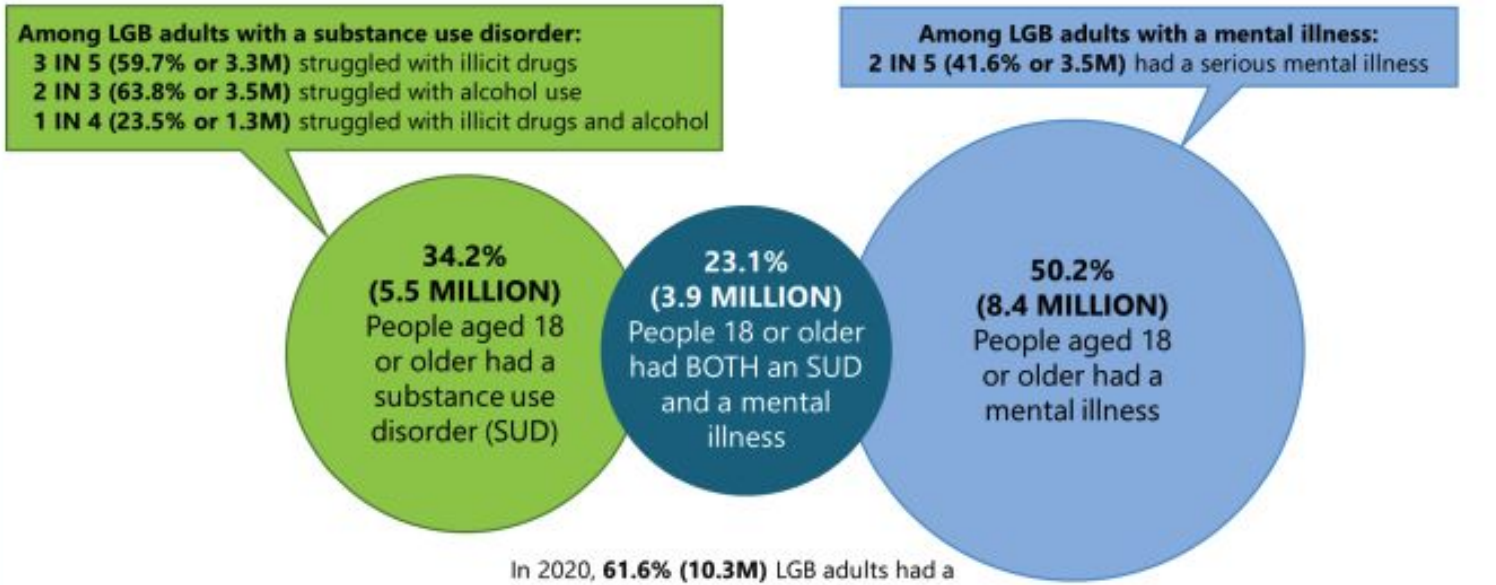
** The statistics for transgender individuals include nonbinary, gender-noncomforming, genderqueer, and agender respondents.*
*** For the purposes of this survey, people of color include Black, Hispanic, Asian, and multiracial individuals, as well as those identifying as "other, non-Hispanic."*

Source: Center for American Progress and NORC at the University of Chicago online survey, June 2022, on file with the authors.
Chart: Center for American Progress

https://www.americanprogress.org/article/discrimination-and-barriers-to-well-being-the-state-of-the-lgbtqi-community-in-2022/

Mental Illness and Substance Use Disorders in America in the Past Year: Among LGB Adults Aged 18+

PAST YEAR, 2020 NSDUH, LGB 18+



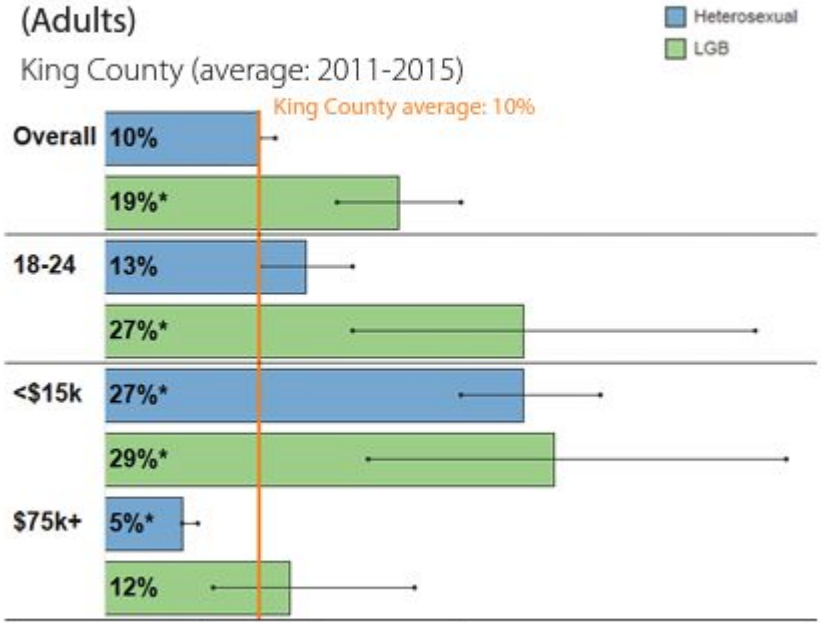
In 2020, **61.6% (10.3M)** LGB adults had a mental illness and/or substance use disorder.

SAMHSA
Substance Abuse and Mental Health Services Administration

Frequent mental distress by sexual orientation, age, & income

(Adults)

King County (average: 2011-2015)



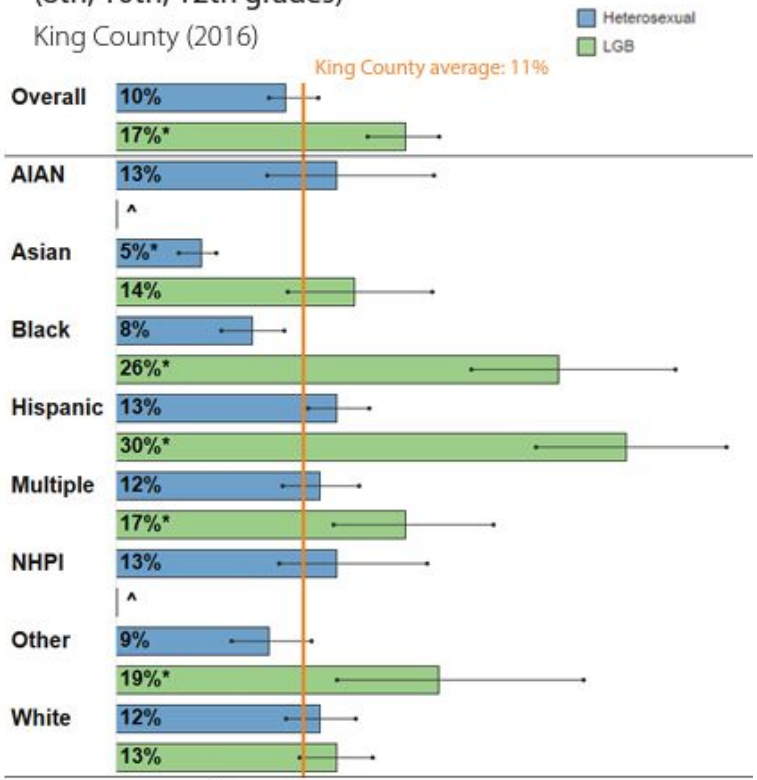
Source: Behavioral Risk Factor Surveillance Survey

* = Significantly different from King County average

Binge drinking by sexual orientation & race/ethnicity

(8th, 10th, 12th grades)

King County (2016)



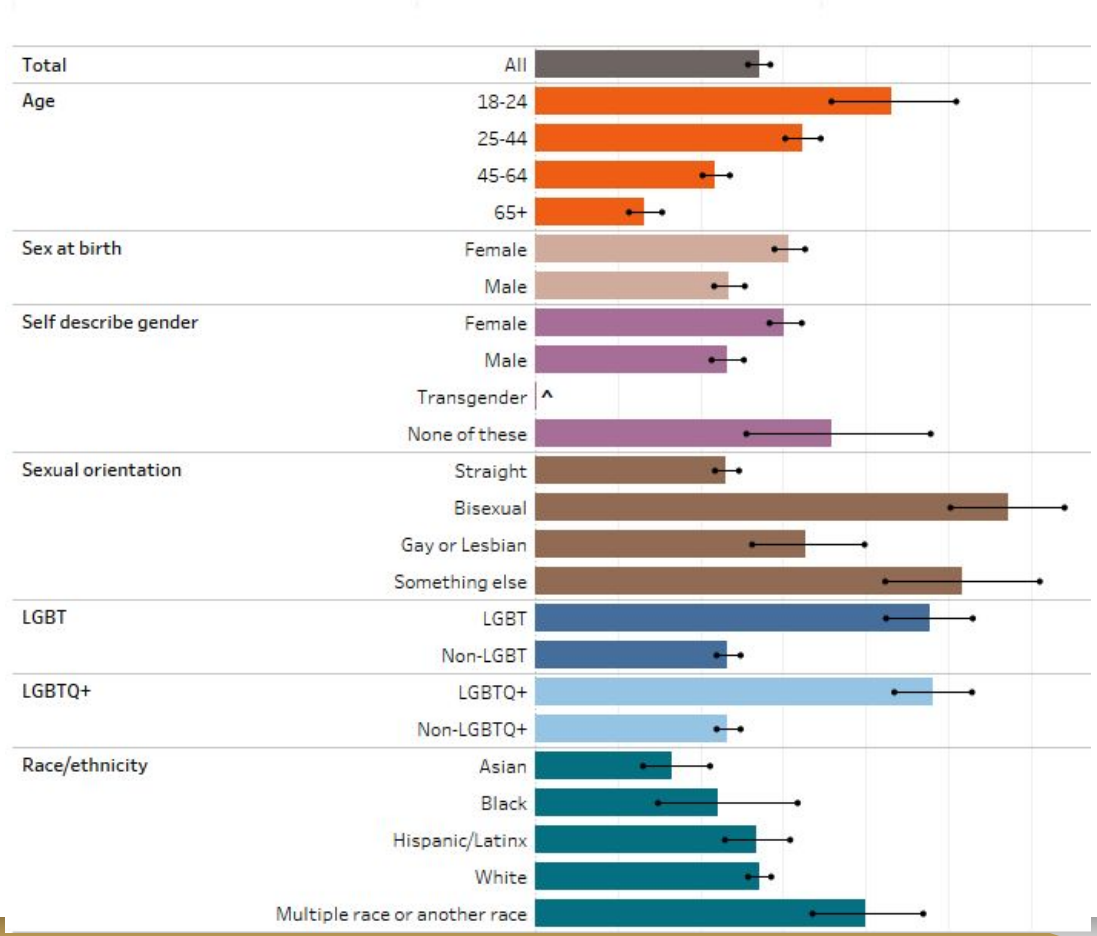
Source: Healthy Youth Survey

^ = Data suppressed if too few cases to protect confidentiality and/or report reliable rates

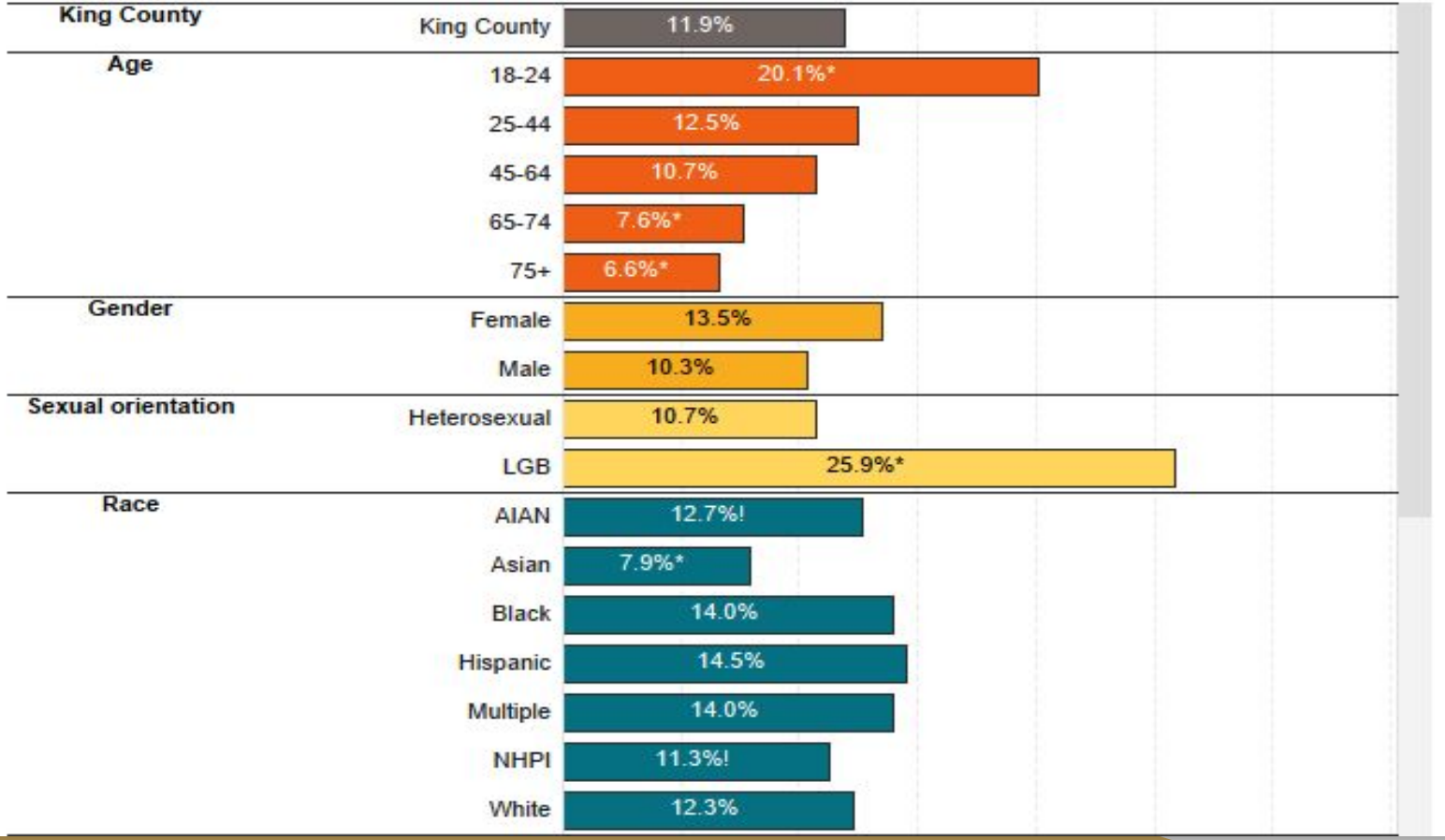
* = Significantly different from King County average

https://kingcounty.gov/depts/health/data/community-health-indicators/~/media/depts/health/data/documents/CHNA-LGBTQ-Community-Spotlight.ashx

Percent of adults with symptoms of anxiety disorder , Washington State, Phase 3.7: 12/09 - 02/13/23



Frequent mental distress (adults), King County (average: 2016-202



Where's the research?

- Many federally funded surveys have only recently started to ask about sexual orientation and gender identification in their data collections. Surveys thus far have found that sexual minorities have higher rates of substance misuse and substance use disorders (SUDs) than people who identify as heterosexual. Therefore, it is not yet possible to establish long-term trends about substance use and SUD prevalence in LGBTQ populations.
- Individual states, counties and communities have conducted localized surveys for many years - this data isn't as easily extrapolated to larger populations
- Quantitative health disparities research is working on employing more intersectionality in their work, yet its unable to appropriately or accurately predict, identify or quantify health disparities[i]

i. https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8119321/

We're not asking the right questions

Table 2. Sexual Identity Questions in the National Survey on Drug Use and Health (NSDUH), National Health Interview Survey (NHIS), General Social Survey (GSS), and National Survey of Family Growth (NSFG)

NSDUH, 2015	NHIS, 2014	GSS, 2014	NSFG, 2011-2013
Which one of the following do you consider yourself to be? - Heterosexual, that is, straight - (If female respondent) Lesbian or Gay - (If male respondent) Gay - Bisexual	*Which of the following best represents how you think of yourself?* - (If male) Gay - (If female) Lesbian or gay - (If male) Straight, that is, not gay - (If female) Straight, that is, not lesbian or gay - Bisexual - Something else[1]	*Which of the following best describes you?* - Gay, lesbian, or homosexual - Bisexual - Heterosexual or straight	*Do you think of yourself as…* - Heterosexual or straight - (If female) Homosexual, gay, or lesbian - (If male) Homosexual or gay - Bisexual

[1] NHIS respondents who answered "Something else" were asked a follow-up question to clarify what they meant by "something else." Response choices in this question (in addition to "Refused" or "Don't know") were (1) You are not straight, but identify with another label such as queer, trisexual, omnisexual or pansexual; (2) You are transgender, transsexual or gender variant; (3) You have not figured out or are in the process of figuring out your sexuality; (4) You do not think of yourself as having sexuality; (5) You do not use labels to identity yourself; or (6) You mean something else.

Sources: SAMHSA, Center for Behavioral Health Statistics and Quality, National Survey on Drug Use and Health, 2002-2015.
Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), National Health Interview Survey, 2014.
NORC at the University of Chicago, General Social Survey, 1972-2014.
CDC, NCHS, National Survey of Family Growth, 2011-2013.

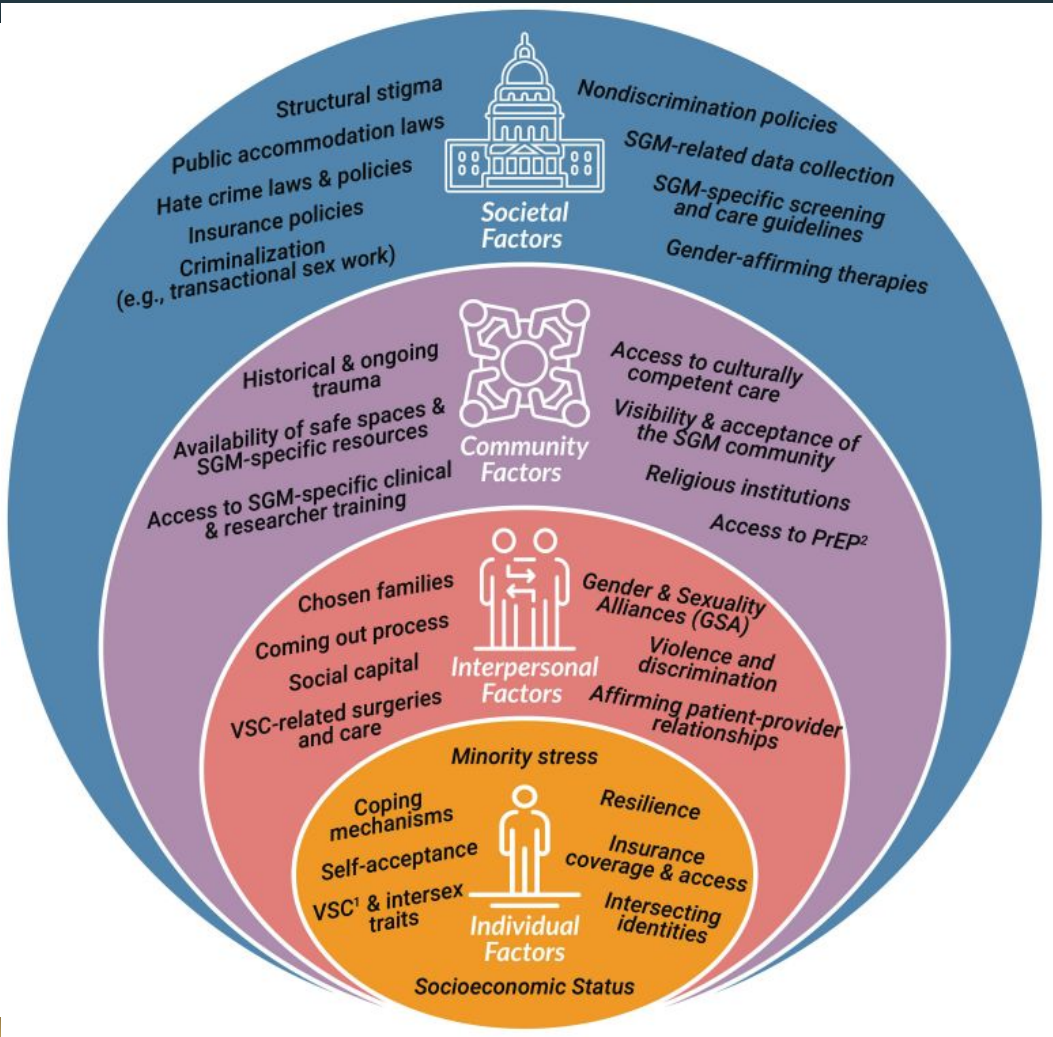
Hot off the press…

- SAMHSA just released its 2023 National Survey on Drug Use and Health results (July 30, 2024)
- The report includes selected estimates by race, ethnicity and age group
  - These are critical AND we're missing so many other identity factors
- Key Findings:
  - Marijuana was the most commonly used illicit drug
  - American Indian or Alaska Native and Multiracial people were more likely than most other racial or ethnic groups to have used substances or have had an SUD in the past year
  - Multiracial adults were more likely than other adults in other racial or ethnic groups to have any mental illness, serious mental illness, and serious thoughts of suicide
  - 12% of adults perceive they have ever had a substance use problem. Among these adults, 73% consider themselves to be in recovery or recovered
  - Among people aged 12 or older who were classified as needing substance use treatment in the past year, about 1 in 4 received treatment

https://www.hhs.gov/about/news/2024/07/30/samhsa-releases-annual-national-survey-drug-use-and-health.html

NIH Sexual and Gender Minority Research Office was created in 2015 and has four specific goals:

1. Advance rigorous research on the health of SGM populations
2. Expand SGM health research by fostering partnerships and collaborations
3. Foster a highly skilled and diverse workforce
4. Encourage data collection relation to SGM populations



Resiliency and the SGM Community

- Most research is going to focus on the “bad”, “negative”, “poor health outcomes”
- 2022-2023 data shows that approximately 70% of LGB individuals do not have a substance use disorder and in a 2015 transgender health survey, 70% of respondents had never used illicit drugs
- Decades of HIV activism has setup the community for expert harm reduction approaches and linkages to care when needed
- Peer-led support groups thrive in LGBTQ+ communities
- Utilization of substance use treatment is higher for LGBTQ+ populations than their heterosexual and cisgender counterparts
- The struggle is real AND the community is thriving
    - Queer-affirming spaces are essential to the health and safety of the community
    - There are an unprecedented number of oppressive and discriminatory policies targeting SGM communities at all levels of government
- While stigma still exists, there is more (visible) SGM representation in media, movies and music than ever before

https://sogiecenter.org/2024/02/02/reframing-the-narrative-of-substance-use-and-risk-among-lgbtq-communities/

Some light reading...

- 2020 SAMHSA National Survey on Drug Use and Health: LGB Adults
- Stress and substance use among sexual and gender minority individuals across the lifespan (2019)
- 2018 LGBTQ Youth Report - Human Rights Campaign
- Substance Use Disparities by Sexual Identity (Ages 18-25) - Trevor Project 2020
- Discrimination and Barriers to Well-Being: The State of the LGBTQI+ Community in 2022
- Gender Minority Social Stress in Adolescence: Disparities in Adolescent Bullying and Substance Use by Gender Identity
- A Systematic Review of Interventions to Reduce Problematic Substance Use Among Transgender Individuals: A Call to Action
- Health Disparities by Sexual Orientation: Results and Implications from the Behavioral Risk Factor Surveillance System
- Sexual and gender minority cigarette smoking disparities: An analysis of 2016 Behavioral Risk Factor Surveillance System Data

Local and National Resources

Local

- Peer Seattle (peerseattle.org)
- Washington Recovery 24 Hour Helpline: 866-789-1511
- King County Needle Exchange
- Telebup Hotline - King County: 206-289-0287
- Harm Reduction Vending Machines in King County (and throughout the country!)

National

- The Center (gaycenter.org) - New York-based resource hub for LGBTQ+ people
- Trevor Project (thetrevorproject.org) - Crisis and suicide prevention for LGBTQ+ community
- Friday/Monday (fridaymonday.org.uk) - Information about sex and drugs for gay and bi men
- Recovery Connection (recoveryconnection.com) - LGBT-friendly treatment facilities
- Dance Safe (dancesafe.org) - Promoting Health & Safety within music and nightlife communities