Challenges and Opportunities for Supporting Healthy Behaviors Among LGBT Students

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DEFINING THE ISSUE
Challenge:
Increased Risk Well-Documented

**LESBIANS AND BISEXUAL WOMEN**
Compared to heterosexual women:
• More alcohol-related problems\(^1,2\)
• Heavier alcohol use\(^3\)
• Greater lifetime rates of marijuana, cocaine, and other illicit drug use \(^4,5,6\)

**GAY AND BISEXUAL MEN**
Compared to heterosexual men:
• Alcohol use rates are similar\(^7\)
• Greater lifetime rates of cocaine (37%), marijuana (18-37%), MDMA, meth, and poppers\(^4,6,8\)
• Prevalence of anabolic steroid use\(^7\)

**TOBACCO USE**
LGB adult men and women
\(2x\) as likely to smoke as heterosexuals\(^10\)

38-59% LGB youth smoke vs.
28-35% Hetero youth\(^11\)

**TRANSGENDER INDIVIDUALS**
High rates of injection drug use\(^9\)
Injection hormones from “black market”\(^9\)

**MAJORITY ENGAGE IN HEALTHY BEHAVIORS**

Source: \(^1\)McKirnan and Peterson, 1989; \(^2\)Wilsnack et al., 2008; \(^3\)Aaron et al. , 2001; \(^4\)Skinner, 1994; \(^5\)Skinner and Otis, 1996; \(^6\)Cochran et al., 2004; \(^7\)Drabble et al., 2005; \(^8\)Stall et al., 2001; \(^9\)Clements-Noelle et al., 2001; \(^10\)Tang et al., 2004; \(^11\)Ryan et al., 2001
Challenge:
Limitations to Research on LGBT Health

**Sampling**
- Small convenience samples of a hidden population
- Transgender and bisexual-specific research limited
- College LGBT samples not generalizable due to low response rate
- Participants often recruited in bars so overestimate pathology

**Survey/Question Design**
- Terminology used to determine sexual orientation varies
  - Examples:
    - Do you identify as lesbian or bisexual?
    - Have you had at least one female sex partner in the year before the survey?
    - Who are you more attracted to?

**Changing Landscape**
- More recently, larger, population-based studies
- CDC recently announced inclusion of sexual orientation/gender identity questions in Youth Risk Behavior Survey

Source: The Fenway Institute
Source: McCabe et al. (2003).
Challenge:
LGBT-Focused Prevention Efforts Not a Priority

- Limited/non-existent LGBT staff and resources
- Time spent justifying the need for resources
- More immediate needs take precedence:
  - Identity development
  - Sexual health
- Concern that highlighting AOD use will lead to further stigmatization

OTHER POTENTIAL CONTRIBUTORS:
- Limited knowledge of alcohol issue
- Personal history with substance abuse

Source: EverFi Coalition Interviews
## Distinct Challenges, Same Goal

### Developmental Challenges

Same as non-LGBT adolescents

- Need to establish a comfortable sense of their sexual orientation or gender identity
- Dealing with internal & external homo/bi/transphobia
- Limited support from family, peers, other adults
- Limited contact with other LGBTQ youth or role models
- Delay in dating may lead to sex-focused relationships, where alcohol is central

### Risk Behaviors

Same as non-LGBT adolescents

- Increased risk for:
  - Smoking
  - Alcohol & Substance Abuse
  - Anxiety, depression, suicide
  - HIV & STI’s
  - Emotional and physical abuse
  - Eating disorders and obesity
  - Limited access to care
  - Homelessness

### Goals and Considerations for Prevention Efforts for LGBTQ Adolescents

Same as for all adolescents:

- Promote healthy development
- Promote social and emotional well-being
- Promote and ensure physical health

Source: Garofalo & Harper, 2003; Savin-Williams, 1994; Rosario et al., 2001; Corliss et al., 2008)
DRIVERS OF UNHEALTHY BEHAVIOR
Potential Root Causes Identified

**Concern for Safety**
Compared to heterosexual students, LGB students report:
- Harassment
- Fear for safety
- Victimization from violence

**Sexual Violence**
Nearly half of LGBT students report being forced to have sex against their will.

**Significant Risk for Athletes**
2x more likely than their heterosexual teammates to experience harassment.
- 25% feel pressured to stay silent about their sexual identity
- 21% report being targets of derogatory remarks via social media

**Resulting Emotional Trauma:**
Psychological effects of victimization include anxiety, depression, low self-esteem, behavioral problems including substance abuse

Source: Fenway Institute

Sources:
- Rankin (2002); Garcia et al. (2002); Williams et al. (2003).
- NSVRC Research Brief 2012
- Campus Pride 2012 LGBTQ National College Athlete Report
Additional Risks Factor In for College Students

**EMOTIONAL**

- To cope with stress from victimization, homophobia, “coming out”
- To escape loneliness/depression

**SOCIAL**

- To “build courage” to approach a potential partner
- To meet other LGBT people – marginalization makes bars and clubs primary social outlets

**COMMUNITY**

- Unwelcoming campus environment a contributing factor
- LGBT Community Norms
  - Focus on individual rights overshadows concern for health (Eliason, 2010)
  - Resistance to mainstream norms may lead to glorification of ATOD use and abuse (Crossley, 2004)

Source: Trock et al. (2005); Heffernan (1998); Rosario et al. (2004); Russell et al. (2002); Amadio (2006); Ross et al. (2001).
Marketing Efforts A Significant Contributor to Risk

“Educational systems, biomedicine, and health and human services have often neglected LGBT communities, but alcohol and tobacco industries have not (Northridge, McGrath, & Krueger, 2007).”

Targeted marketing efforts:

- Exploit the connection to bars and clubs as safe spaces for socializing
- Exploit LGBT community values of freedom, choice, and pride
- Event and Organization Sponsorship (e.g. Pride weeks, parades)
- Outreach Efforts and Community Promotions

Negative health implications for LGBT community.

Source: TobaccoFreeCA.org

Project SCUM (Sub-Culture Urban Marketing)
- Internal Tobacco industry marketing strategy
- Sub-culture = Gays, Lesbians, Racial minorities
- Objective: Penetrate non-traditional outlets in San Francisco proper – Haight, Castro, S.F. Metro
Potential Impact of GLB Resources on Drinking

GLB RESOURCES INDEX

Presence of GLB student organization, frequency of meetings
Paid staff focused on GLB programming
Policy includes sexual orientation as a protected class
Formal GLB studies program and/or GLB-focused academic courses
GLB-friendly housing options
SafeZone/Allies program
GLB-specific Counseling, resource library, etc.

GLB resource score was a significant predictor of substance-use behavior.

At schools with extensive GLB resources compared to those with minimal resources:

- GLB MEN: 2x MORE LIKELY TO BINGE DRINK
- GLB WOMEN: 1/2 AS LIKELY TO SMOKE

Time spent socializing had a significant positive association with binge drinking (for both sexes) and women’s smoking.

School-wide prevalence of substance use did not appear to have an association with the substance-use behaviors of students with same-sex experience.

Source: Eisenberg & Wechsler (2003).
WHAT SHOULD INFORM PROGRAMMATIC DECISIONS?
# Identity Development Models: One Size Doesn’t Fit All

<table>
<thead>
<tr>
<th>CHARACTERISTICS</th>
<th>STAGE MODELS (e.g., Cass)</th>
<th>LIFESPAN OR OTHER NONLINEAR MODELS* (e.g., D’Augelli)</th>
<th>DIVERSE PERSPECTIVES* (e.g., Boykin)</th>
<th>MEDICAL and PSYCHIATRIC (DSM IV)</th>
<th>FEMINIST, POSTMODERN, QUEER PERSPECTIVES (e.g., Butler)</th>
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</thead>
<tbody>
<tr>
<td>Progression from lack of awareness through immersion to integration</td>
<td>Focus on specific processes within sociocultural and life span</td>
<td>Identity development in relation to other psychosocial identities (gender, race, culture, class, so on)</td>
<td>“Normal” gender identity corresponds to biological sex; transgender and transsexual are psychiatric disorders</td>
<td>Gender identity is socially constructed within a system of power based on gender, race, class, ability, so on</td>
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<tr>
<td>STRENGTHS FOR HIGHER EDUCATION</td>
<td>• Parallel to theories of human development (e.g., Erikson), so can be easily understood and applied in campus settings</td>
<td>• Accounts for context of identity development</td>
<td>• Supports the development of programs and services that meet needs of diverse student populations</td>
<td>• Provides legal basis for provision of services to transgender individuals under the Americans with Disabilities Act</td>
<td>• Accounts for context and psychosocial elements of college environment that may influence gender identity</td>
</tr>
<tr>
<td>CRITICISMS</td>
<td>• Implies an endpoint, values achievement of that endpoint. Ignores individual differences that may influence or interact with sexual orientation identity</td>
<td>• Many not specific to college environment or experience</td>
<td>• Some assume fixed notions of socially constructed categories (gender, race, class, and so on) and universality of experience of LGBT people within those categories</td>
<td>• Ignores social contexts of gender identity development and enactment</td>
<td>• Do not provide theoretical background on identity development, per se</td>
</tr>
</tbody>
</table>

*Models based on samples that include college students and/or adolescents.

Source: Bilodeau & Renn (2005).
Revisiting the Socio-Ecological Framework

Source: Adapted from McKee, Manoncourt, Chin, and Carnegie (2000).
The IOM Model: The “Who” of Prevention

**CAMPUS-WIDE EFFORTS**

**UNIVERSAL**
Addresses entire population; deters onset of risky behavior

**SELECTIVE**
Targets sub-sets considered to be at-risk

**INDICATED**
Targets individuals with early signs of alcohol problems

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**GREEKS**
EX: Small group social norms
Adaptations of BASICS

**ATHLETES**

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**LGBT STUDENTS**

**UNIVERSAL** (Climate)
Efforts must be realistic and correspond to prevailing drinking patterns, circumstances, and cultural needs.

**SELECTIVE** (Social Mktg)

**INDICATED** (BASICS)
Compared to their heterosexual peers, GLBT students:

- More likely to report threats or experience physical **violence**
- Less likely to report **feeling safe** on campus
- Report greater **perceived stress**

Variables significantly and positively associated with AOD use and consequences (p<.05).

Findings suggest a need for colleges and universities to address aspects of campus life that may contribute to an unwelcoming environment for GLB students which, in turn, may contribute to increased AOD use behavior and related consequences among GLB students (Reed et al., 2009).
Exploring the Connection Between Incivility and Substance Use

INCIVILITY e.g., rude or disrespectful remarks

PSYCHOLOGICAL AND ACADEMIC WELLBEING

AMBIENT INCIVILITY Witnessing/overhearing incivility

For both heterosexual and sexual minority students:
Witnessing ambient heterosexist harassment is positively correlated with substance abuse problems.

Campus climate interventions that address subtle discrimination, in addition to harassment and violence, may help reduce problematic drinking.

Peer leadership programs that address such behavior should include debriefing opportunities.

Efforts Focus on Civility at Georgetown

Student-on-student gay hate crime results in student protests, creation of the Student Commission for Unity (SCUNITY).

SCUNITY final report and recommendations issued, including the creation of an LGBTQ Resource Center.

Georgetown’s first LGBTQ Resource Center opens with full-time director.

Nate Tisa becomes Georgetown’s first openly gay student body president.

2007 2008 2009 2013

Georgetown Initiatives:
• Gender Liberation Week
• Gay Pride Month (OUTober)
• Genderfunk (drag ball)
• Lavender graduation ceremony, attended by the university president
EXAMPLES FROM PUBLIC HEALTH HOLD PROMISE FOR CAMPUS-BASED EFFORTS
WINNING PROPOSAL: Georgetown University

Students from medicine, business, public policy, health care management

Curriculum and social media campaign “to empower bystanders to speak out against violence committed towards LGBT youth.”

INSTITUTE OF MEDICINE
2013 DC REGIONAL PUBLIC HEALTH CASE CHALLENGE

Mock grant proposals addressing the challenges of violence against LGBT youth in the District.

INTERDISCIPLINARY INNOVATIVE EQUITABLE JUSTIFIABLE FINANCIALLY SOUND

88% of bullying takes place in front of an audience.

Bystanders intervene 20% of the time.

Bullying stops 50% of the time when bystanders step forward.

Source: Kärnä et al. (2011).
LGBT-Focused Social Marketing Campaigns

- Emphasis on community
- Distinctions between sub-populations noted
- Linkages to other LGBT health risks
Lack of LGBT-specific data leads to inaccurate conclusions and assumptions about risk factors and effective interventions.

- Sexual orientation is a predictor of health and social outcomes.
- Data enables and informs collaborations across multiple campus stakeholders.

Questions about sexual orientation discourage participants from completing the survey.

- Respondents are NOT more likely to break-off their participation on surveys when they encounter a sexual orientation question (Case, et al., 2006).

Respondents don’t answer questions about sexual orientation.

- Response rates on sexual orientation questions are higher than rates for more commonly included questions, such as income. (Conron, Mimiaga, and Landers, 2008).
- Over time, survey respondents have become more likely to indicate that they may have a lesbian, gay, or bisexual sexual orientation (Gates, 2007).

Considerations for Gathering LGBT-Specific Data

When sample size allows, separate sub-populations (e.g. bisexuals should be separated from lesbian and gay respondents, consider men and women separately).

No response, “other” or “I don’t know” should not be considered LGB.

Question placement should enhance privacy and meet the needs and goals of the survey.

Survey items should be culturally appropriate and compatible with the respondent’s understanding of what is being measured.

Multiple opportunities for gathering data on sexual orientation and gender identity

- Custom questions on AEdu, other student surveys
- Intake forms and/or during counseling, health services appointments
- BASICS or other AOD screenings
- Campus climate survey (as required by WHTF)

“I am going to ask you some questions about your sexual health/sexuality that I ask all my patients/students. The answers to these questions are important for me to know how to help you/keep you healthy/support you. Like the rest of this visit, this information is strictly confidential.”

Source: Williams Institute (2009); McCabe et al. (2003); Fenway Institute Policy Focus
### Recommended Questions

**Do you consider yourself to be:**

- Heterosexual or straight;
- Gay or lesbian; or
- Bisexual?

**People are different in their sexual attraction to other people. Which best describes your feelings? Are you:**

- Only attracted to females?
- Mostly attracted to females?
- Equally attracted to females and males?
- Mostly attracted to males?
- Only attracted to males?
- Not sure

### In the past (time period e.g. year) who have you had sex with?

- Men only
- Women only
- Both men and women
- I have not had sex

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IMPLICATIONS FOR PRACTICE
## Final Thoughts and Recommendations

### Traditional Prevention Approaches Still Apply

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<thead>
<tr>
<th>Action</th>
<th>Description</th>
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<tr>
<td>Gather data on prevalence of AOD use by LGBT population</td>
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<td>Assess campus climate, extent to which LGBT students feel/don’t feel supported, identify any connections to AOD use</td>
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<tr>
<td>Environmental efforts can have a significant impact</td>
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<td>Engage multiple stakeholders in the conversation</td>
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<td>Consider evidence-based strategies such as social marketing and bystander intervention</td>
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<td>Highlight that most LGBT students are healthy</td>
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### Identify Opportunities to Create a Welcome Campus Environment

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<tr>
<td>Include questions about sexuality, sexual and gender identity on current surveys, screening forms.</td>
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<tr>
<td>Ask non-judgmental questions about sexuality, sexual and gender identity as part of BASICS or other interventions</td>
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<td>Consider images and language used in program flyers, informational posters or other materials.</td>
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### Seek Out Opportunities to Collaborate with LGBT Faculty, Staff, and Students

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<tr>
<td>Share assessment data on LGBT students</td>
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<td>Recruit LGBT students and staff to assist with data collection</td>
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<tr>
<td>Invite “LGB screening” of prevention efforts</td>
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<td>Help LGBT community members do assessments of LGBT media.</td>
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### Keep Educating Yourself
<table>
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<th><strong>Worth Checking Out</strong></th>
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<tr>
<td><strong>Campus Pride</strong></td>
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<tr>
<td><a href="http://www.campuspride.org">http://www.campuspride.org</a></td>
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<tr>
<td>LGBT-Friendly Campus Climate Index</td>
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<tr>
<td><strong>LGBT Professional Academy for Advisors &amp; Staff</strong></td>
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<tr>
<td><strong>The Fenway Institute: National LGBT Health Education Center</strong></td>
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</table>
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Challenges and Opportunities for Supporting Healthy Behaviors Among LGBT Students

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Source: EverFi Coalition interviews
Contacts wish to remain anonymous

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