



# NALGAP

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National Association of Lesbian and Gay Addiction Professionals ■ Serving the Lesbian, Gay, Bisexual and Transgender Communities Since 1979

## **ALCOHOL, TOBACCO & OTHER DRUG PROBLEMS & LESBIAN, GAY, BISEXUAL, TRANSGENDER (LGBT) INDIVIDUALS**

Reliable information about the size of the LGBT population is not available for a number of reasons: lack of research, fear of LGBT people to self-identify, variances in the acceptance of the LGBT labels. This also makes it difficult to determine the extent of LGBT substance abuse problems. But available studies indicate that LGBT people are more likely to use alcohol, tobacco and other drugs than the general population, are less likely to abstain, report higher rates of substance abuse problems, and are more likely to continue heavy drinking into later life.

LGBT's use alcohol, tobacco and other drugs for the same reasons as others, but their likelihood for doing so is heightened by personal and cultural stresses resulting from anti-gay bias. Reliance on bars for socialization, stress caused by discrimination, and targeted advertising by tobacco and alcohol businesses in gay and lesbian publications are all believed to contribute to increased pressures on LGBT individuals to engage in substance abuse. Education, prevention, intervention and treatment efforts for LGBT's are further complicated by the LGBT community's dependence upon alcohol and tobacco funding sources to support basic community services and cultural activities. Annual "gay pride" events, for example, are frequently sponsored by these businesses, as are a great many HIV/AIDS organizations and AIDS awareness-raising projects in which members of this culture are likely to participate.

"Homophobia" was coined in 1972 to describe fear and loathing of LGBT people by others. Internalized homophobia is a form of self-limiting, self-loathing— an important concept to understand in developing substance abuse services for this population. Anti-gay bias also results in frequent hate crimes aimed at LGBT youths, adding further to the stress of homophobia and heterosexism (an assumption that heterosexuality is the preferred norm for everyone.) Since the early 1980s "AIDS-phobia"—from both the outside world and as another form of internalized negative self-perception— causes added stress for many LGBT individuals.

*Preventing Alcohol and Other Drug Problems in the Lesbian and Gay Community* (published in 1995 for "Alive With Pleasure," a SAMHSA/CSAP-funded conference on the topic) lists five substance abuse-specific risk factors for LGBT adolescents:

- Sense of self as worthless or bad.
- Lack of connectedness to supportive adults and peers.
- Lack of alternative ways to view "differentness"
- Lack of access to role models.
- Lack of opportunities to socialize with other gays/lesbians except bars.
- The risk of contracting HIV.

Recommendations for prevention strategies specific to LGBT individuals and communities include:

- Public education and policy advocacy aimed at eliminating heterosexism and homophobia.
- LGBT cultural competency training for community-based agencies, programs and services, including those focused on substance abuse (e.g., police, health and social services, education, faith community, families, and foster care).
- Safer, alternative venues for LGBT youth and those in the process of forming their sexual identities to “come out.”

Like other communities, the LGBT community is typified by its own history, customs, values, and social and behavioral norms. It has clearly identified festivals, holidays, rituals, symbols, heroes, language, art, music, and literature. Effective substance abuse prevention, intervention, treatment, and recovery must both reflect and mobilize LGBT culture.

Prevention and treatment that are not affirming of LGBT people are not only nonproductive, they may increase problems.

## **References**

*National Association of Lesbian & Gay Addiction Professionals (NALGAP)*  
[www.nalgap.org](http://www.nalgap.org) - see homepage link to NALGAP Prevention Policy Statement & Guidelines  
 ([http://www.nalgap.org/NALGAP\\_94\\_Prev\\_Policy\\_Guidelines.pdf](http://www.nalgap.org/NALGAP_94_Prev_Policy_Guidelines.pdf))

*NCADI's PREVLINe Celebrating LGBT Pride & Diversity Section:*  
[www.ncadi.samhsa.gov/features/lgbt/index.htm](http://www.ncadi.samhsa.gov/features/lgbt/index.htm)  
 (or select “Lesbian, Gay, Bisexual, Transgender from the Audience menu at  
[www.ncadi.samhsa.gov](http://www.ncadi.samhsa.gov))

*CSAP Substance Abuse Resource Guide: Lesbian, Gay, Bisexual and Transgender Populations* (rev. 2000, SAMHSA/CSAP) MS489:  
<http://www.health.org/referrals/resguides.asp?InvNum=MS489>

*A Provider's Introduction to Substance Abuse Treatment for Lesbian, Gay, Bisexual, & Transgender Individuals* (2001, SAMHSA/CSAT) BKD392:  
<http://www.health.org/govpubs/BKD392/index.pdf>

*Healthy People 2010: Companion Document for Lesbian, Gay, Bisexual, and Transgender (LGBT) Health* (2001, Gay and Lesbian Medical Association):  
<http://www.glma.org/policy/hp2010/index.html>

*Preventing Alcohol and Other Drug Problems in the Lesbian and Gay Community*  
 (available in printed form only via [www.ppta.com](http://www.ppta.com))

*CSAP Cultural Competence Series #4: Cultural Competence for Social Workers Chapter 6: Gay and Lesbian Persons* 1995, BKD189