LGBTQ+ Youth ~ experiencing Summer Supports Funded by United Way of Kennebec Valley

United Way
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2021 INNOVATION FUND RECIPIENT

A few things we learned while creating
a Tobacco Needs Assessment

LGBTQ+ Youth
- Risk and Protective Factors
- Impacts of Minority Stress

Following most slides is another that includes the
notes used for the actual presentation.

LGBTQ+ Youth Tobacco Prevention Project

20 years of expertise in tobacco prevention and control
- Focus on LGBTQ+ tobacco use

25 years of direct support for LGBTQ+ youth in Maine
-Focus on systems change as well

HCCA and OUT Maine formed a partnership and engaged in a year-long process to
1. Recruit and engage an Advisory Council
2. Perform extensive research to create an LGBTQ+ Youth Tobacco Prevention Needs Assessment

LGBTQ+ YTPP Community Needs Assessment

Maine Integrated Youth Health Survey (MIYHS):

is a biennial survey of Maine students in grades 5 through 12 that monitors health behaviors and attitudes regarding tobacco, alcohol, substance use, mental health, nutrition, physical activity, and protective factors

- Includes self-identified sexual orientation and gender identity at the high school level

- Needs Assessment included
  - Tobacco use by vaping, smoking, other tobacco products and marijuana use
  - Risk and protective factors

LGBTQ+ Youth Tobacco Prevention Project

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In addition to understanding more about tobacco use
-the research also identified a number of factors that contribute to higher rates of behaviors (risk factors) that negatively impact LGBTQ+ youth overall.

Sexual Orientation and Gender Identity (SOGI)
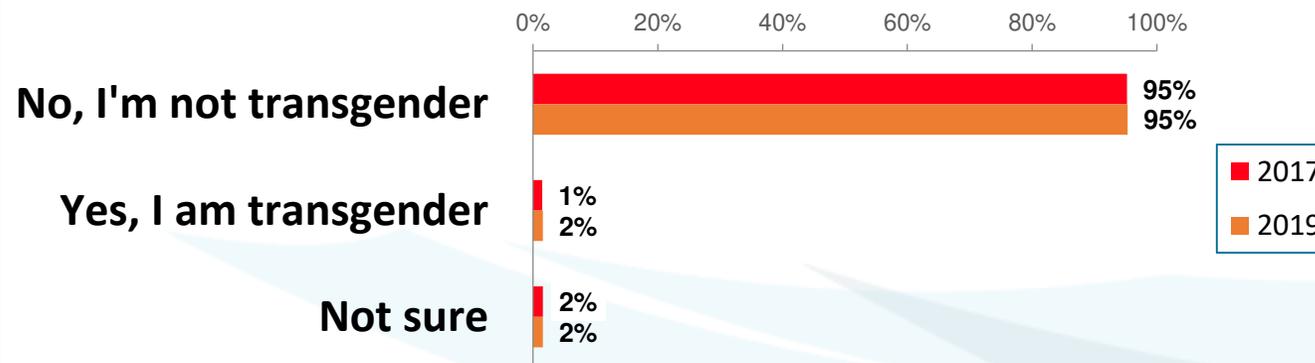## *% among all Maine high school students who participated in MIYHS 2017 and 2019*

Sexual Orientation

	2017	2019
Heterosex...	85%	83%
Gay or...	3%	3%
Bisexual	8%	10%
Not sure	4%	4%
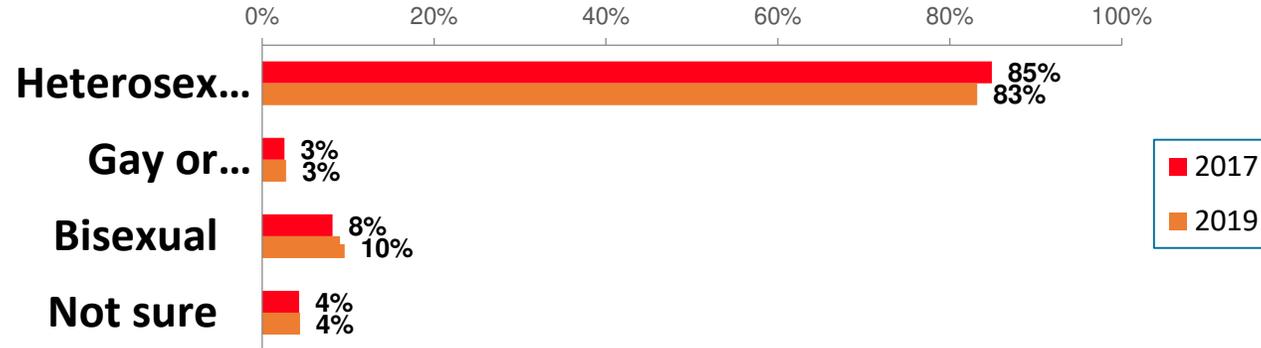
3% Lesbian/Gay
10% Bisexual
4% Not Sure

17%
2019

Gender Identity

	2017	2019
No, I'm not transgender	95%	95%
Yes, I am transgender	1%	2%
Not sure	2%	2%

1.6% Transgender
1.6% Not Sure

3.2%
2019

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The research allowed us to look more closely at the self-reported identities of LGBTQ+ youth

-3% of students self-identified as Gay/Lesbian – which is one category and not divided by the separate identities (Sexual Orientation)
-10% of students self-identified as Bisexual (Sexual Orientation)
-4% of students responded that they were 'not sure' of their sexual orientation (SO).

This may also mean they were unclear about the meaning of the question. Usually 'not sure' is not included in any analysis of the data because the responses are open to a number of interpretations. They are used here because of the anecdotal reports by youth serving organizations that youth use many terms for their sexual orientation that are not just Gay, Lesbian or Bisexual and potentially answer 'not sure'. This is not a precise number however.

-1.6% of students identified as transgender – which was rounded up to 2% in this slide provided by Market Decisions Research
-1.6% of students responded they are 'not sure' if they are transgender. As above, 'not sure' is unclear in its meaning and is not included in any analysis of the data because the responses are open to a number of interpretations. They are used here because of the anecdotal reports by youth serving organizations that youth use more than one term for their gender identity, or may be developing their gender identity. This is not a precise number however.

Statewide Comparisons – Risk Factors
between Maine High School Students and LGBT & "Not Sure" Youth

	Wanted to leave home, even just for a short time due to violence in their home, or the threat of violence, lifetime	Bullied on school property, past 12 months	Sad or hopeless almost daily for 2 or more weeks, past 12 months	Seriously considered suicide, past 12 months	Slept anywhere other than parents/guardians home or school housing, past 30 days	Reported 4 or more Adverse Childhood Experiences (ACES), lifetime
Maine HS Students	21.0%	23.3%	32.1%	16.4%	3.3%	21.3%
Gay/Lesbian	34.0%	37.2%	57.6%	35.1%	8.4%	37.8%
Bisexual	39.6%	36.5%	66.6%	43.3%	5.2%	46.0%
Not Sure - SO	27.4%	26.7%	41.8%	23.6%	10.1%	24.4%
Transgender	49.1%	44.4%	71.7%	52.4%	17.1%	52.5%
Not Sure if transgender - GI	43.7%	42.4%	64.6%	41.6%	17.4%	39.3%

https://data.mainepublichealth.gov/miyhs/2019_reports_results

The research allowed us to also compare risk factors between the various identities

-All Maine High School Students that participated in the Maine Integrated Youth Health Survey in 2019
-the students who self-identified as Gay/Lesbian – which is one category and not divided by the separate identities (Sexual Orientation)
-the students who self-identified as Bisexual (Sexual Orientation)
-the students who responded that they were 'not sure' of their sexual orientation (SO). This may also mean they were unclear about the meaning of the question. Usually 'not sure' is not included in any analysis of the data because the responses are open to a number of interpretations. They are used here because of the anecdotal reports by youth serving organizations that youth use many terms for their orientation that are not just Gay, Lesbian or Bisexual and are likely to answer not sure. This is not a precise number however.

-The students who identified as transgender
- The students responded they are 'not sure' if they are transgender. . As above, 'not sure' is unclear in its meaning and is not included in any analysis of the data because the responses are open to a number of interpretations. They are used here because of the anecdotal reports by youth serving organizations that youth use more than one term for their gender identity, or may be developing their gender identity. This is not a precise number however.

The six categories of Risk Factors vary considerably between the total number of high school students, and within the identities captured by MIYHS questions.
More information about these questions can be found in the 2019 MIYHS High School full report – which can be found at this link 2019 Results | miyhs (maine.gov) or at https://www.maine.gov/miyhs/2019-results

Minority Stress

Unique - directly related to LGBTQ+ identity or perceived identity

Chronic – the negative responses to LGBTQ+ people is not specific to one person, place, experience, or time period

Socially Based – not based on the individual person

Experienced as - stigma, discrimination, violence, homophobia, biphobia, transphobia, etc.

The literature reviews included a search on LGBTQ+ youth and young adults and what else contributes to the disparate health outcomes and health risks of this population.
As early as 1974, a body of research was being developed to try to answer the questions about LGBTQ+ risks and outcomes.
The term 'minority stress' was used extensively first for this population, and later adopted to describe impacts on all populations that experience systemic, interpersonal, and personal discrimination on an ongoing basis.

The minority stress factors pile on additional stressors to adolescents who are already experiencing the usual stress of being an adolescent!

Maine HS Students, SOGI and Tobacco
MIYHS 2019

	Smoked at least 1 day: past 30 days	Started before age 13: Of those who smoked: past 30 days	Used chew, snuff, dip, etc. at least 1 day: past 30 days (not vaping)	Smoked cigars, cigarillos, little cigars at least 1 day: past 30 days	In same room with someone smoking: past 7 days	In same car with someone smoking: past 7 days
Maine HS Students	7.1%	32.6%	4.5%	5.7%	27.0%	19.6%
Gay/Lesbian	12.5%	36.9%	7.6%	9.4%	35.4%	26.1%
Bisexual	12.9%	32.3%	3.7%	5.9%	39.5%	30.4%
Not Sure SO	11.1%	55.2%	8.7%	10.0%	30.3%	22.1%
Transgender	20.3%	61.1%	11.8%	14.5%	41.5%	32.6%
Not Sure GI	20.1%	57.1%	14.3%	16.8%	44.5%	37.2%

Note: SO=Sexual Orientation, GI=Gender Identity
2019 MIYHS High School Detailed Report
https://data.mainepublichealth.gov/miyhs/2019_reports_results

The differences in tobacco/nicotine use and exposure are an excellent example of the higher rates of risky behaviors among the LGBTQ+ Youth – which research suggests are influenced by Minority Stress as well as other factors.

     -Another area of concern is that tobacco use – and other behaviors that may negatively impact our health – are greatly influenced by our social networks. Social network behavior has more impact on behavior than either knowledge or intention.

     -A social network is any group that you spend time with. They can be family, neighborhood members, and other LGBTQ+ youth, for instance. An example that you may identify with - if you wanted to reduce your chocolate consumption, but eating chocolate was a shared activity among friends and family – you baked brownies for each other, brought chocolates for a hostess gift, or because it had been a long day, etc., then you would be less likely to eat less chocolate than if chocolate was not a shared or common behavior.

Tobacco and Marijuana Use

Questions	2019			
	Non-LGBT	**LGBT**	**LGBT tobacco users**	**LGBT marijuana users**
Past 30 days smoked cigarettes	6%	13%	53%	32%
Past 30 days used an electronic vapor product	28%	31%	93%	71%
Any tobacco use in the past 30 days	37%	44%	100%	83%
Past 30 days used marijuana	21%	30%	70%	100%
Definitely would, probably would smoke if one of their best friends offered them a cigarette^	32%	45%	92%	70%
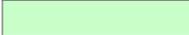
Significantly higher than the non-LGBT percentage (at 95% confidence)

^ *This response is taken verbatim from MIYHS. Lower number is better as only a "definitely will not" response is considered a positive risk.*

The comparisons here are all non-LGBT to LGBT/ Additional comparisons are between tobacco users and marijuana users.
These comparisons continue to highlight the higher risks for LGBTQ+ youth.
The comparison with tobacco and marijuana is used because there has been co-use with some youth smoking tobacco and smoking marijuana for many, many years. With vaping being common now, the co-use of the two products continues.

Please note that 83% of tobacco users who used tobacco in the past 30 days also used marijuana in the past 30 days – more than 8 out of 10!

Another interesting point is the 45% of LGBT youth would smoke if given a cigarette by a friend – a very high percentage!

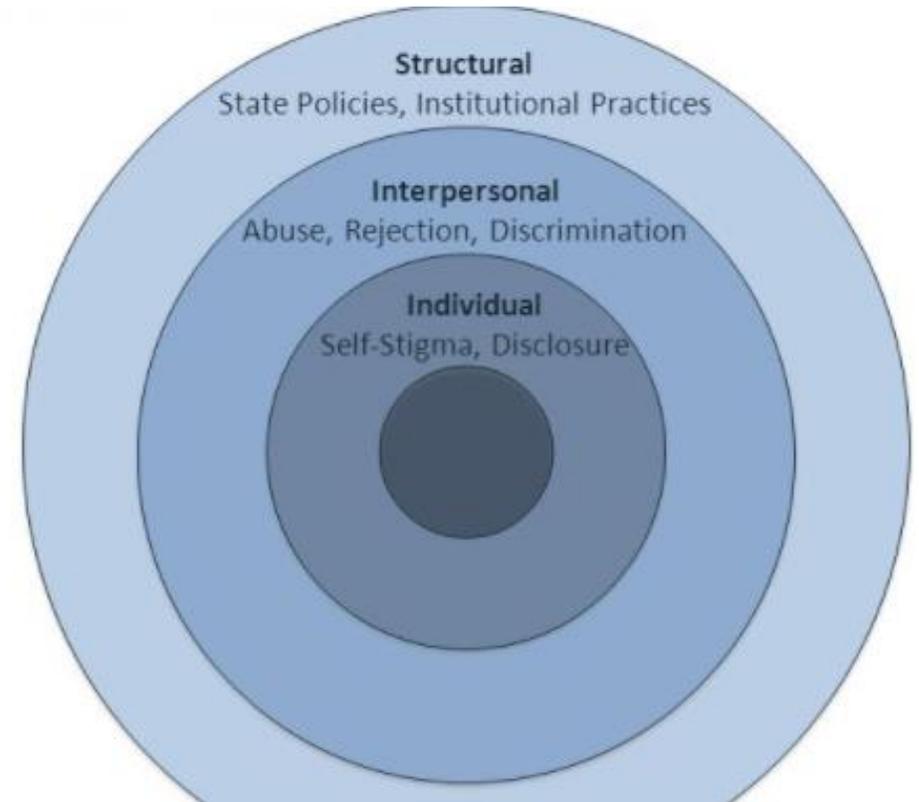# Building Resilience – Three General Levels of Influence

Individual

- Characteristics of the individual
- Learned skills, knowledge, as well as positive experiences

Interpersonal relationships

- Identify strategies to improve relationships with family members, friends, peers, mentors, teachers, etc.

External / Structural Factors

- Identify school policies, elements of school climate, community resources, social media, and other external factors that are supportive, and ways to impact others.

Structural
State Policies, Institutional Practices

Interpersonal
Abuse, Rejection, Discrimination

Individual
Self-Stigma, Disclosure

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The Cambridge dictionary defines resilience as *the ability to be happy, successful, etc. again after something difficult or bad has happened.*
The Merriam-Webster dictionary defines resilience as *an ability to recover from or adjust easily to misfortune or change.*
While the Oxford Dictionary of English defines resilience as *being able to withstand or recover quickly from difficult conditions.*

The YeSS project will help build resilience
1. Teach skills, increase knowledge, contribute to positive experiences for the individual –
•the YeSS project will contribute here
2. There are also lots of reasons to help adults and other youth to be more supportive in their relationships. Trainings for school personnel, for librarians, leaders of youth-serving organizations and others can help improve relationships. It is interesting how using the correct pronouns, or eliminating stigmatizing words from a vocabulary can change interpersonal relationships.
•Another goal of the YeSS project.
3. Maybe, overtime, there may be some changes here that we have impacted.   Systems usually take a long time to change!

LGBTQ+
Community, Identity, Pride, Out-ness, & Social Supports

- Counteracts lack of support and acceptance in other areas such as family, school, the greater community
- Appears to support positive
- Mental and physical health
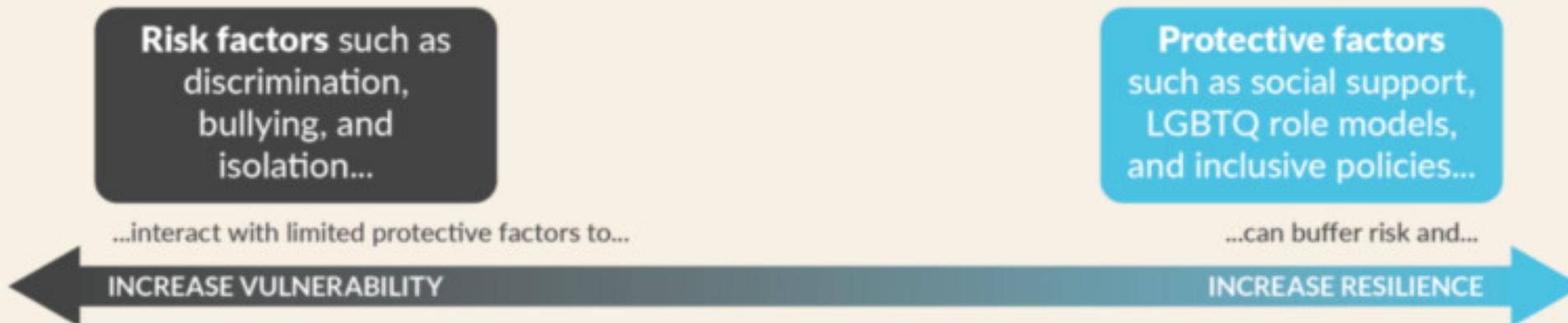- Increase receptivity to health promotion

Even in the absence of other social supports

- Need more research
- The peer reviewed research is quantitative
- The recruitment has been among individuals with some level of involvement in the LGBTQ+ community

Guiding Principles and Recommendations

1. Combine increasing resilience with evidence-based prevention and/or treatment strategies
2. Engage LGBTQ+ youth in planning and use peer messages and peer messengers
3. Create an 'at-a-glance' model to highlight the need for increased resilience as core to any prevention project – Trevor Project example

Understanding Resilience

Risk factors such as discrimination, bullying, and isolation...

...interact with limited protective factors to...

INCREASE VULNERABILITY

Protective factors such as social support, LGBTQ role models, and inclusive policies...

...can buffer risk and...

INCREASE RESILIENCE

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The Trevor Project (The Trevor Project | For Young LGBTQ Lives) is an online and telephonic suicide prevention project.

This visual was a part of a mental health research brief created by the Trevor Project.

It is useful in visualizing the direct link between risk factors increasing the vulnerability of youth on one end, and increasing protective factors also increasing resilience on the other end of the spectrum.

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Improving Outcomes!

1. The kids don't disappear in the summer

2. More LGBTQ+ youth feel supported in the community

3. Mental health concerns and risky behaviors are reduced

4. Minority Stress is acknowledged and addressed

Questions? Contact Joanne Joy, j.joy@hccame.org or 207 446-6569