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Attitudes Towards Alcohol and Drug Use within the LGBTQ Community

Erica Boudette

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fulfillment of the requirements for the degree of Bachelor of Arts

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Introduction

Although the American population is continuing to become more accepting of the gay, lesbian, bisexual, transgender and queer (LGBTQ) population, the LGBTQ community still faces widespread discrimination across the country, and many of the issues affecting LGBTQ individuals have not been adequately addressed. One of these issues is the greater percentage of substance use and abuse found within the LGBTQ community as opposed to the straight community. Although many studies have cited this problem (Van Voorhis 2003, Hughes 2003, Gruskin 2006, Rosario 2008, McCabe 2009, Bergmark 1999, Orenstein 2001), few have tried to discover why there are such elevated rates of substance use within the LGBTQ community. Of the studies that have probed this question, most have adapted theories that were developed for the heterosexual community to fit the LGBTQ community instead. Very rarely have studies looked at specific LGBTQ responses or reactions to this phenomenon, and almost none actually ask LGBTQ individuals what they see as the role of alcohol and drugs within their community.

The purpose of this study, therefore, is to find out the perceptions the LGBTQ individuals have of alcohol and drug use as it relates to their communities and also themselves, using the framework set up by previous scholars in order to analyze some of the challenges that the LGBTQ community faces. By surveying 49 LGBTQ college students, and recent college graduates, I have found that alcohol use is accepted and normalized within the LGBTQ community, and when individuals become a part of that community they adopt the norms and practices already in place within the LGBTQ

community, including those that involve alcohol, even if they have no specific reasons, such as homophobia, or early exposure to the bar scene, to drink.

Literature Review

There is still much debate among scholars over the exact rate of drinking in the LGBTQ community as compared to the heterosexual community, but overall studies across all different age groups, ethnicities, nationalities, and socioeconomic statuses in many Western nations show that LGBTQ individuals drink and use drugs more, report more problems with drug and alcohol abuse, and are less likely to refrain from drinking and using drugs than their heterosexual counterparts (Van Voorhis 2003, Hughes 2003, Gruskin 2006, Rosario 2008, McCabe 2009, Bergmark 1999, Orenstein 2001). The levels of use differ among different sexual orientations and genders; gay men are more likely to use drugs (Stall 2001, Bruce 2008) lesbians are more likely to drink (McCabe 2009, Gruskin 2006, Rosario 2008, Bergmark 1999), and in most studies bisexuals have the highest rates of drinking of all (Rosario 2008, McCabe 2009), however, there has been little research done into the reason for these differences. Also, unlike most heterosexuals, drinking usually does not decline with age (Bergmark 1999). Even taking this fact into account, the biggest difference in rates and alcohol and drug use can be seen in adolescents (Orenstein 2001). This difference has been attributed to many different things, but the most documented reason for this is that many LGBTQ youth start drinking at younger ages than the majority of heterosexual youth. Significantly more LGBTQ youth have tried alcohol before the age of 13 than heterosexual youth (Van Voorhis 2003), and studies have shown that an earlier initial drinking age tends to result in more lifetime drug and alcohol use (Lo 2000, Tucker 2005, Duan 2009).

There are many theories purporting to explain why LGBTQ youth are more likely than heterosexual youth to drink. One of the most widely studied phenomenon is the role played by homophobia. There is a large amount of evidence that homophobia and heterosexism are still widely present in our society today (Aguinaldo 2008, Hegarty 2004), and that these things still cause huge problems in the lives of not only adolescents, but adults as well (Aguinaldo 2008, Harmon 2008, van Wormer 2003). It is still often seen as completely acceptable and even normal for heterosexuals to be uncomfortable around homosexuals, and homosexuals are supposed to cater to heterosexuals, and be cautious not to 'throw their sexual orientation in their face' (Hegarty 2004). Trying to reconcile a positive self identity with the negative attitudes towards the LGBTQ community can cause a lot of stress, and in general people who are under a lot of stress tend to drink alcohol and use drugs far more often (Aguinaldo 2008, Harmon 2008, Gruskin 2006, McCabe 2009). Further, because of the stigmas attached to being LGBTQ, youth often feel isolated, or that they don't fit in, situations which also can lead to drinking (Crosnoe 2004, Rostosky 2003). LGBTQ youth have to try and construct their self-identity while dealing with this stress, isolation, and the shame they are often made to feel about their sexual identity if it is know by others. Youth, as well as adults, adopt several different measures to deal with this shame. Many use alcohol and drugs as a coping strategy to help them get by (McDermott 2008, Lashbrook 2000, Preston 2006, Bauermeister 2007, Bruce 2008), and, in general, people who use alcohol or drugs as a coping mechanism tend to drink or use more than those who use them to enhance their lives (Goldstein 2009). Other ways that LGBTQ youth try and avoid shame is by constructing adult identities, as well as by taking pride in their sexual orientation. These

strategies often involve creating connections with the LGBTQ community, which in turn can lead to more exposure to drugs and alcohol (McDermott 2008).

LGBTQ youth tend to have a harder time developing a positive and healthy sexual identity (Van Voorhis 2003), but one thing that greatly helps in this process is connections to the LGBTQ community. These connections often prove to be a vital factor not only in identity formation, but in the coming out process as well (Gruskin 2006). However there are not always very many places that are accepting of the LGBTQ community, or that tend to attract a lot of the LGBTQ community, so the easiest and most common place to find members is at bars (Orenstein 2001, Thorlindsson 2006). Many larger communities have established gay or lesbian bars, and these bars are generally considered an important space, as LGBTQ individuals tend to congregate there because they know they will be accepted, (Gruskin 2006.) Some scholars have theorized that LGBTQ individuals often go to bars in order to meet other members of the community when they are first coming out (Van Voorhis 2003, Orenstein 2001, Gruskin 2006, Bauermeister 2007). This early exposure to the bar scene can lead to later elevated use of alcohol in many ways; first, LGBTQ youth often have a very fast immersion in the drug, alcohol and sex scene instead of the gradual entry that other teens tend to get (Orenstein 2001), and they build their community around a space like a bar or a club that encourages alcohol and drug use (Slavin 2004). This trend continues among adults, with LGBTQ individuals often using bars as a way not only to become involved in the community, but to meet potential sexual or romantic partners as well. Single lesbians report higher bar attendance than most lesbians who are in a relationship (Gruskin 2006), and, unsurprisingly, drinking rates are higher among individuals who frequent bars or other

common drinking venues (Gruskin 2006, Stall 200, Bruce 2008). LGBTQ bars allow for freer expressions of sexuality, and give many, especially just coming out, or recently out individuals a catalyst, in drug or alcohol use, as well as a safer environment to explore their sexual identity (Peralta 2008, Bauermeister 2007). Hooking up while under the influence of drugs or alcohol makes youth more comfortable in breaking gender or sexual norms or stereotypes, and can give them the excuse they feel they might need later, if they or others have a hard time accepting their behavior (Peralta 2008).

The tendency to create community and social spaces around drinking venues does not tell the complete picture as to how alcohol plays an important part in LGBTQ communities however. Many studies have found a positive correlation between associations with almost any kind of LGBTQ community and alcohol or drug use, (Stall 2001, Eisenberg 2003,) even when the venues or organizations involved no alcohol or drug use. This has been partially explained by findings that heterosexual individuals who had more friends, then had more chances for socializing, and thus tended to have more chances to drink as well (Eisenberg 2003, Reifman 2006), and it is likely that the same holds true for LGBTQ individuals. Many scholars also explain LGBTQ drinking patterns through social learning theory, which is the theory that individuals learn how to behave from others within their community, and if a few influential members of a group do something, the rest of the group is likely to follow, (Van Voorhis 2003, Druskin 2005). In this case influential group members are likely to be individuals that have been out and active in the LGBTQ community for a long time, and therefore are more likely to be older, or to have been drinking from a young age due to early connection with the community. Social learning theory has rarely actually been studied in the LGBTQ

community specifically, but among heterosexuals peer substance use or nonuse is the most important factor in whether or not an individual will choose to drink or use drugs (Maxwell 2002, Durkin 2005, Nation 2006, Preston 2006). Once peer groups are set up around particular drinking or drug practices, other members who join those groups tend to already have similar practices, or quickly conform to them (Talbot 2008, Link 2008, Crosnoe 2004, Duan 2009). For example studies have shown that heavy drinkers tend to be part of a heavy drinking social network, whose members, in turn, encourage each other to drink more, and are also more likely to attend events, or be part of organizations that often endorse heavy drinking (Orford 2004, Reifman 2006). Overall LGBTQ drinking patterns are often similar to people who are considered heavy drinkers. Heavy drinkers tend to report more positive as well as more negative affects on their life due to alcohol or drug consumption, and the same is true for many members of the LGBTQ community (de Visser 2007, Orford 2004), highlighting the relative importance and prevalence of alcohol and drug use in the community as whole.

There are also many other factors that may help explain the high rates of substance use. For example some scholars have noted that there is less stigma about drug and alcohol use today, especially among young adults (McCabe 2009, Lyons 2008,) and as equality is increasing there are new spaces being created for people of all minorities to get together openly as well as drink, (Lyons 2008.) Also many LGBTQ individuals don't have the same responsibilities as straight individuals do, such as marriage and childcare, which may help to explain why LGBTQ individuals are more likely to continue drinking in contrast to their heterosexual counterparts (McCabe 2009), and even for individuals

who do have families, it is becoming more acceptable to have children at a later age when individuals are more likely to be independent and financially successful (Lyons 2008).

Despite the magnitude of the role of alcohol, very little research has looked at self-perceptions in the LGBTQ community itself to see what the general attitudes towards alcohol are. Studies done in the general population have shown that attitudes towards alcohol are changing, and many young adults believe that moderate to heavy, and even binge drinking are just part of everyday life, and something that is positive and fun (Lyons 2008). There are no studies that show whether LGBTQ individuals think that alcohol and drug use are higher in their own community as opposed to other communities. There are, however, a few studies that have found that LGBTQ individuals are more likely to worry that they have a drinking problem, even when they drink the same amount as heterosexual individuals, but there is no explanation as to why this might be. In conclusion, the most popular and studied theories are the ideas of using drinking as coping mechanism for managing stress and shame, often starting at a young age, and the idea of social learning theory, in which youth learn from other members of the community how to behave. However very few of these studies have actually taken into account how individuals perceive their own drinking habits and whether they relate to these theories. Therefore the purpose of this study is to look at why individuals within the community feel that they drink and use drugs, what they think the role of alcohol and drugs are within their community, and how their self-reported behavior matches up with their perceptions of alcohol and drug use in the community.

Methods

A number of college students as well as recent college graduates were surveyed anonymously online, and asked questions about their own drinking patterns, as well as what they saw as drinking patterns in other members of the LGBTQ community. College students were used as a sample population for several reasons. First the transition between adolescence and young adulthood is the second most habit-forming time after early adolescence, (Tucker 2005.) Binge drinking in college consistently leads to alcohol problems later in life, as well as to more drug use, (Jennison 2004.) College is also often a transitional time, during which many individuals discover or come out about their sexual orientation, and it's also a time when students tend to try out different things, such as excessive drinking, drug experimentation, dating different or more people, and sexual experimentation, (Ravert 2009, Vander Ven 2009, Crawford 2006.) Additionally, for some, it is the first time they have easy or any access to the LGBTQ community, and is therefore an ideal time in many ways to get their perceptions on the LGBTQ community.

The survey was sent out to many different e-mail lists, which were known to have large numbers of LGBTQ students on them, such as the Queer-Straight Alliance, the women's rugby team, and the only co-ed fraternity on campus, which has a reputation for consistently having a lot of LGBTQ members. It was also sent out to the researchers' recently graduated openly LGBTQ friends in an effort to increase the sample size due to the small LGBTQ population at Occidental College, and to get the perspective of some individuals who were no longer in college. The survey consisted of approximately 40 questions, the complete list can be found in the Appendix, the first couple of which were to get the demographics of the subjects: age, graduation year, gender, sexual orientation,

and whether they were in a sorority or fraternity or played a sport, as both those activities have been correlated with increased amount of drinking, (Dawkins 2006, Reifman 2006, Talbott 2008.) The next questions related to how much the subject drank, when they started drinking and why. For how much they drank subjects were only asked to input numbers, and the numbers were not associated with any level of drinking, i.e. light, moderate, heavy, unlike in other surveys, first because I didn't want number of drinks to be associated with any potentially negative terms, and second because heavy drinkers often tend to classify themselves as light drinkers (Orford 2004). The rest of the questions were about their reasons for drinking, their affiliation with the LGBTQ community, the perceptions they had of substance use within the LGBTQ community, and several relating to the explanations that other scholars have theorized. In order to try and get as honest as answers as possible from this survey the students were advised at the beginning that their answers would be completely anonymous.

Limitations

The broad range of questions that the survey asked helped to get the general ideas concerning LGBTQ perceptions about the role of alcohol within their community, but did not allow for going into depth about any particular aspect. Also, although using an online survey meant that I was more likely to get more honest answers, as well as a greater number of responses overall, it meant there was no way to follow up on differences in answers. The subjects of the survey were also fairly limited. Therefore the results of this study cannot be generalized across the general population. All subjects attended, or had just graduated from a small very liberal college, which is comprised of mostly upper-

middle class students. Because they attended this liberal school, it is more likely that subjects were able to be open about their sexuality without a lot of negative repercussions, at least from their peers here. Also, as the subjects were recruited through being openly LGBTQ, or through groups known to have LGBTQ members, it is likely that they are more comfortable with and open about their sexual orientation than others in the community who were not part of these groups. Another limitation with using college students and recent college graduates is that college students tend to be more open about drinking, and think that it is more appropriate than individuals at other points in their life, so their drinking behavior may be exaggerated due to the increase in drinking that often occurs at college. The analysis of the results was also limited because the sample size was small, and it was not randomly selected. Therefore most of the results were analyzed qualitatively, and cannot be generalized beyond the subject pool.

Results & Discussion

GENERAL

Overall 49 individuals completed the online survey. Twice as many females (33), responded as males (16). The individuals were fairly evenly spread out between gay, lesbian, and bisexual, and five individuals identified as questioning/unsure. Almost all males identified as gay, one as bisexual and one as questioning/unsure, making almost all of the bisexual and questioning respondents female. This is possibly due to the fact that same gender experimentation is more accepted among women, especially during college, so males may be less likely to come out when they are not positive of their sexual identity. Fifty percent of the respondents were athletes, and forty percent were involved in a Greek organization on campus. Women were much more likely to play sports, (70%

to 25%), especially women who were questioning and bisexual. This could be a survey bias since the survey was sent out to the women's rugby team, and rugby is a sport that tends to be associated with lesbians, and therefore is likely to attract a lot of the LGBTQ population. This is supported by the results that individuals who played organized sports were more likely to report having mostly LGBTQ friends. Overall the majority of respondents had both LGBTQ and straight friends, and most reported drinking with a mixed group of people.

Men and women drank roughly the same amount, which is consistent to findings in other studies done of the LGBTQ community (Hughes 2003), but differs with result to the heterosexual population. However unlike some other studies, which found that bisexuals drank the most, in this study bisexuals drank much less than gays and lesbians, although the few individuals who were questioning drank the most of all. Also, in contrast to the theories other studies postulate, the average drinking age of the respondents was not significantly lower than the general population, and drinking age had no significant effect on the amount that individuals drink now. Therefore, in this small sample, it seems unlikely that early immersion into the drinking scene is a main factor in explaining the elevated LGBTQ drinking rates.

When asked what about their perceptions on drinking in several populations, the answers were evenly divided between whether or not the LGBTQ population drank more, and most, about 40%, answered that they were not sure. The majority said that they based their answer on their personal experiences of themselves as well as their friends. Comparing this to respondents' perceptions about other populations, 75% of respondents thought that people involved in Greek organizations drank more, which, taking this

question as a control question, implies that many LGBTQ individuals do not think that drinking is particularly high in their community. Also, in contrast to the recent research that shows that LGBTQ individuals are less likely to abstain from alcohol than heterosexual individuals, this is again not reflected in the perceptions of the gay community, as the majority of respondents felt that the number of LGBTQ individuals they knew who did not drink were proportionately similar to the number of heterosexuals they knew who abstained. However, in spite of the results that the majority of respondents did not think that drinking was higher in their community, 75% of individuals worried that LGBTQ individuals that they knew had a drinking problem, and another 30% worried that they themselves did, which seems somewhat contradictory to their community perceptions. Additionally, many individuals cited specific reasons, such as the coming out process, why they might drink, that would not apply to the heterosexual community.

HOMOPHOBIA

One of the most discussed theories by others scholars is that LGBTQ individuals are more likely to drink due to internal and external homophobia, and general minority stress, therefore several questions were designed to look at this theory. However, overall very few individuals cited negativity associated with their sexual orientation as reasons why they drank. When asked outright why they drank several respondents stated to relieve stress or anxiety, but no one related this to their sexual orientation and those who did name a cause attributed it to work and school. Only 22% of individuals said that they occasionally or often drank due to being uncomfortable with their sexual orientation, and only 20% said that they often or occasionally explained excessive drinking by themselves

or others due to difficulties faced because of their sexual orientation. Most of these individuals overlapped, reporting both that they drank due to sexual orientation discomfort, and also explained excessive drinking as related to their sexual orientation. Women, and in particular lesbians and bisexuals, were more likely than other groups to drink due to sexual orientation discomfort. See Charts 1 and 2.

Chart 1

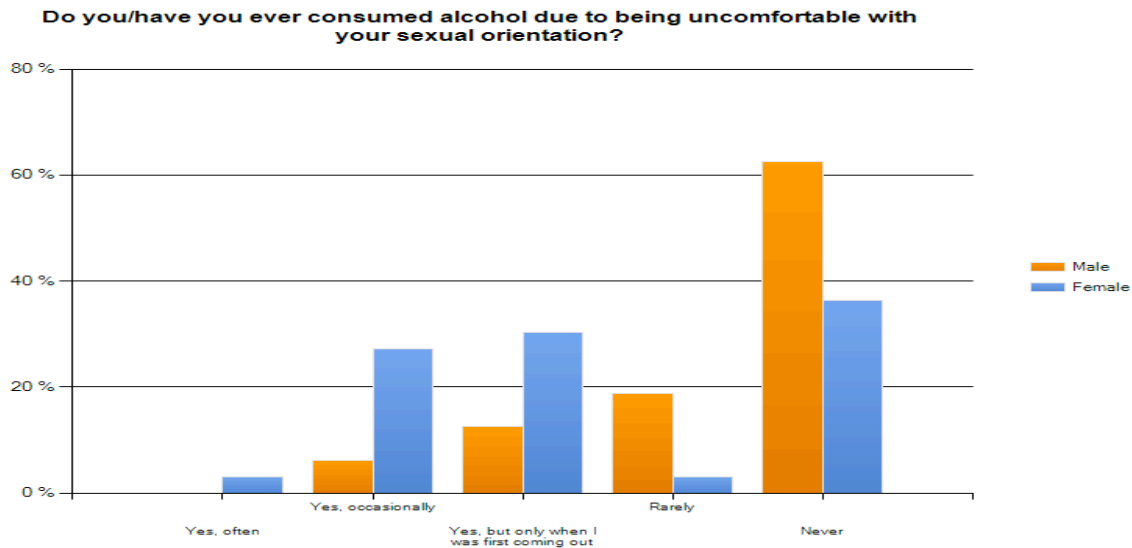
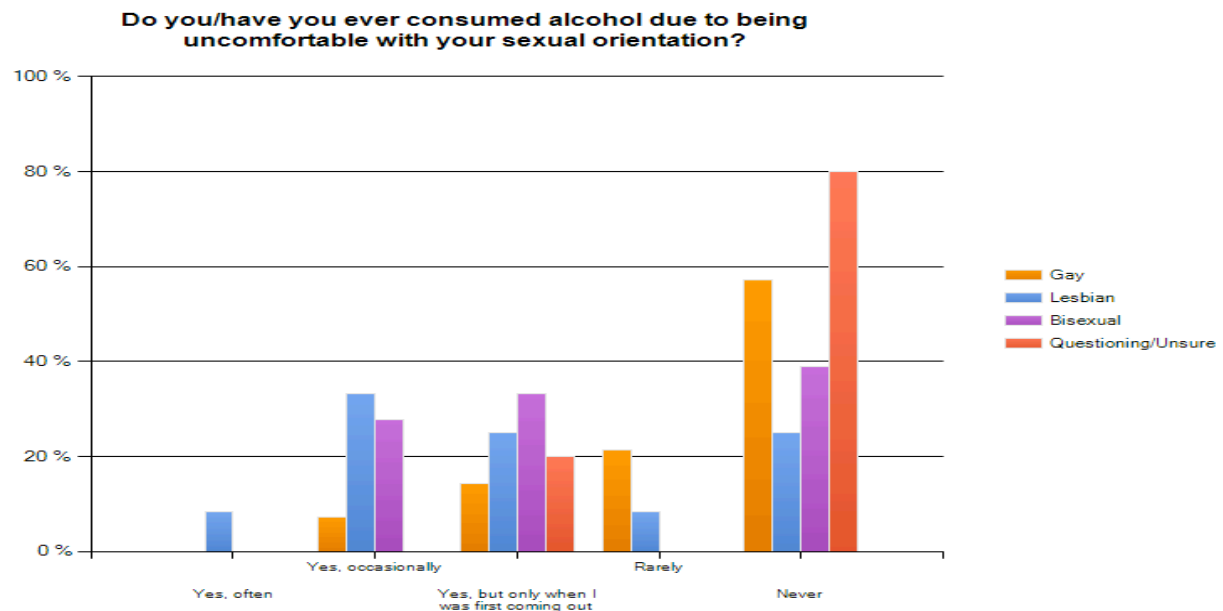


Chart 2



This could help to explain why women's drinking is more elevated than men's in comparison with the heterosexual population, especially considering that individuals who drink due to stress or anxiety are more likely to drink more (Aguinaldo 2008, Gruskin 2006, McCabe 2009), and my results also show that individuals who said they often or occasionally drank due to discomfort with their sexual orientation were more also likely to worry that they had a drinking problem. However, as the majority, almost 80%, of respondents did not experience discomfort or stress due to sexual orientation, internal and/or external homophobia does not sufficiently explain the higher rate of drinking in the LGBTQ community.

COMING OUT

Although most respondents did not report using alcohol due to sexual orientation discomfort currently, many respondents said that they had during the coming out process, or recognized that alcohol played that role for many others. When asked specifically what role alcohol played a role in the coming out process, 31% of males and 61% of females said that it was important, and another 25% of men and 20% of women felt it was at least semi-involved. Again, it is possible that the gender difference is partially due to the greater flexibility that women have to experiment with their sexual orientation in college, and alcohol is one possible way they can do that. As one respondent said, “[alcohol] gives the individual a social[ly] accepted rationale during their exploratory process,” and others talked about how alcohol can be blamed later on if the individual is uncomfortable disclosing their sexual orientation. Other common reasons cited as to why alcohol can be important during the coming out process is that it made people less nervous and more confident in themselves and in feelings and experiences that they weren't necessarily

used to, as well as helped to relieve their inhibitions. One respondent explained “regardless of the ‘regular’ substance use of any particular person, every person I know who has come out has had some sort of ‘binge’ experience in relation to the feelings, emotions, or situations related to the coming out process,” and many individuals reported that their first same-sex sexual experience occurred while they were intoxicated. In addition, respondents felt that alcohol allowed them to talk more openly about their sexuality in general, and often came out to others when intoxicated. However, at least half of the respondents who said that alcohol was important to the coming out process, explained that although alcohol could be helpful at the beginning of the process, in order to truly come out and be comfortable with one’s sexual orientation, individuals needed to accept themselves and their sexuality, as well as disclose this to others, while sober, otherwise they could not really be out and comfortable with themselves.

This issue was interestingly split, because although many of the respondents felt that alcohol was involved, and often even in positive ways, those that absolutely did not, which was 44% of men, and 19% of women, tended to give very strong negative answers. Examples of these answers are: “Um, I don’t think it does. At all. Or it shouldn’t,” “No. Coming out is a personal affair and alcohol only makes it worse,” and “No! I would never come out to someone drunk, and no one has ever come out to me drunk. Honestly, I think coming out is best handled when sober.” These, and many of the other individuals who said no, seemed not only to think that alcohol wasn’t important, but that it actually was negative when involved in the coming out experience. There are several possible reasons for this. First, individuals may not want more stigma to be attached to the LGBTQ community, which it generally is when the LGBTQ community is associated

with high rates of alcohol use, but what seems more likely, based on the tone of these responses, and other literature, is that part of the coming out process is developing pride in one's LGBTQ identity, despite the stigma it often still carries (McDermott 2008).

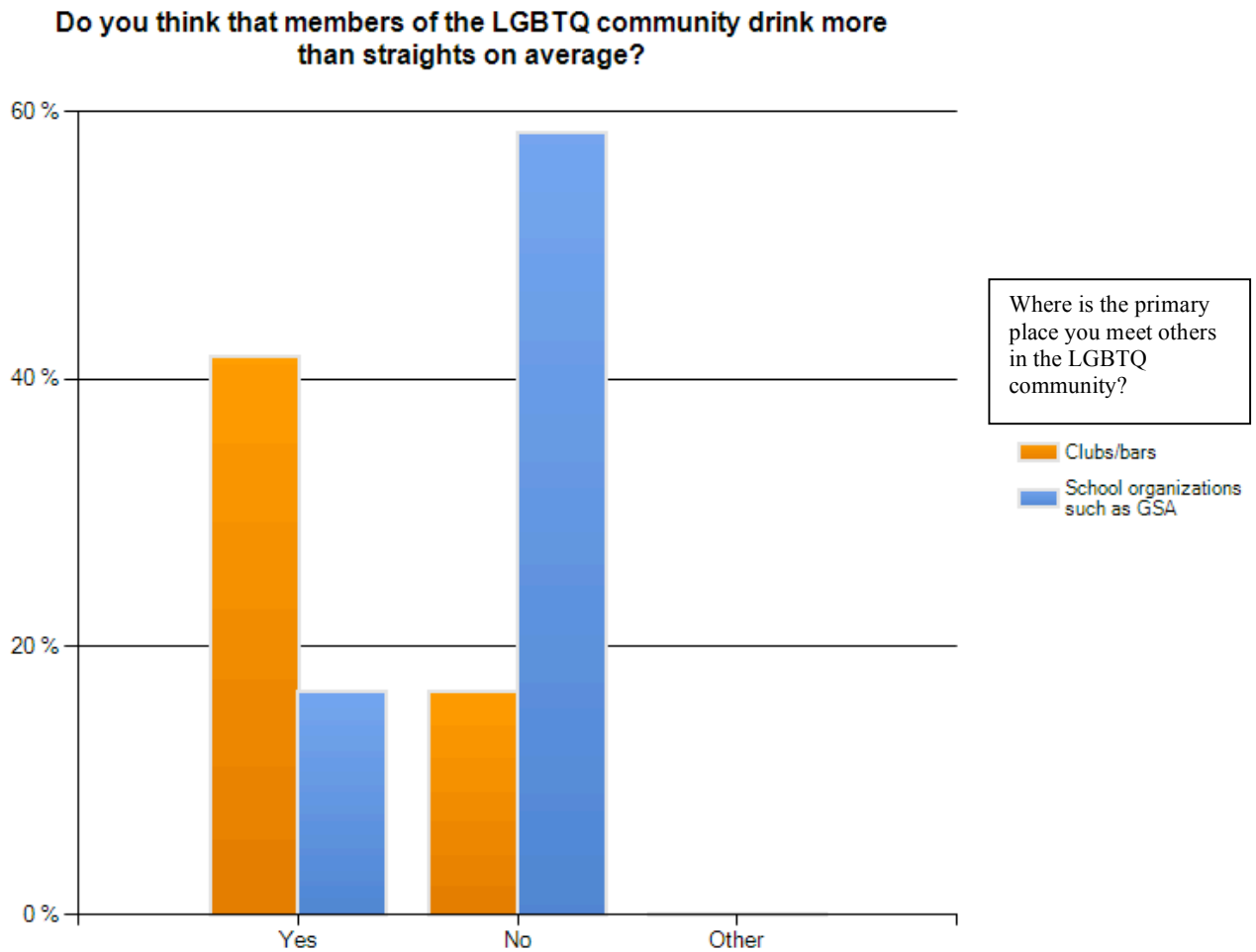
Using alcohol as a way to come out can be seen as trivializing the coming out process, and accepting the negative stigmas associated with the LGBTQ community, instead of being proud of your LGBTQ identity.

SOCIAL SCENE & SOCIAL LEARNING THEORY

Scholars have also theorized that one of the reasons LGBTQ individuals drink so much is due to the fact that the most visible places for LGBTQ adults to congregate are bars and clubs, and that when LGBTQ youth are coming out, they may enter into these more adult spaces to find role models and support, and as such be thrust into the drinking scene, and start consuming alcohol at a younger age. However I found no significant correlation between the age of an individual's first drink, and the amount they drink now, or the age they started drinking regularly and the amount they drink now. In addition, the average age of both first drink and regular drinking was no younger than is seen in the general population. Individuals were also asked what the primary place they meet people in the LGBTQ community is, and only 25% of respondents said bars and clubs. Another 25% said that they met people through school organizations such as GSA, which is a non-drinking space, and the majority of the rest met others through friends, which may or may not involve alcohol. There was some correlation to drinking with those whose primary meeting place was clubs or bars, as they were more likely to think that the LGBTQ community drank more than the heterosexual community, and those whose primary

meeting place was school organizations were more likely to think they did not. (See Chart 3 below)

Chart 3



This perception that the LGBTQ community drank more, did not, however translate into the individuals drinking more. Interestingly the majority of individuals whose primary meeting place was bars and clubs were men, 43% of all men, and only 13% of women cited bars and clubs as their primary meeting place; women were much more likely to say through friends. There were no significant differences in between the groups in terms of thinking that their drinking patterns changed due to their introduction

to the LGBTQ community, and men were less likely than women to think that older members of the community influenced younger members to drink, or that they themselves were influenced by older members. However, overall those whose primary meeting place was clubs and bars were more likely to think that older LGBTQ community members influenced younger members to drink, although not necessarily them specifically, over individuals whose primary meeting place was GSA, who mostly did not think older members influenced younger members to drink.

Based on my research I do not think that early introduction to drinking, especially through bars and clubs, explains the majority of the elevated drinking levels within the LGBTQ community. However, my research does suggest that the central role of bars and clubs, and alcohol in general, in the LGBTQ social scene is an important factor. 46% of respondents felt that alcohol plays a more central role in the LGBTQ community than in the heterosexual community, and only 27% felt that there was no difference in the role of alcohol between the two communities. One of the main reasons that individuals cited for the importance of alcohol was the fact that almost all LGBTQ spaces and events revolve around alcohol, not only just the prevalence of LGBTQ clubs and bars, but also Pride, and The Halloween Costume Carnival in West Hollywood, which are two of the most visible LGBTQ events in this area. Therefore it is likely that a large majority of people associate the LGBTQ community with alcohol, even if they don't primarily meet people through alcohol based spaces, or drink due to discomfort with their sexual orientation.

The theory that best explained the majority of the results of my survey was social learning theory, which is the idea that all behavior, deviant and normative, is learned from other members of the community. In the case of LGBTQ individuals, younger or

newer members look to other, often more out and comfortable members when they are coming out, which helps them to establish a positive identity. Other scholars have remarked on the importance of other LGBTQ people for youth, and how younger members will look to them in terms of how to behave because they see them as the most knowledgeable about the LGBTQ community (Wright 2006). Because so many LGBTQ social spaces do revolve around drinking, older members of the community may treat drinking as a more positive and central part of their lives than heterosexuals might, and even if younger LGBTQ individuals don't go to clubs with them, or they don't encourage younger members to drink, their attitudes towards alcohol may be passed down and emulated by those who look to them to learn how to behave.

This theory would explain the conclusions of earlier authors who have also found that the more LGBTQ friends individuals have, no matter how or where they met them, the more they drank overall. The results of my survey also corroborated this; people who said that the majority of their friends were LGBTQ were more likely to say that they started drinking more with their introduction to the LGBTQ community, that the LGBTQ community as a whole drank more than the heterosexual community, and that alcohol was an important part of the LGBTQ social scene. It is also significant that almost all of the individuals with mostly LGBTQ friends felt that older members of the community had influenced younger members to drink, and specifically had influenced them. See Charts 4 and 5 respectively.

Chart 4

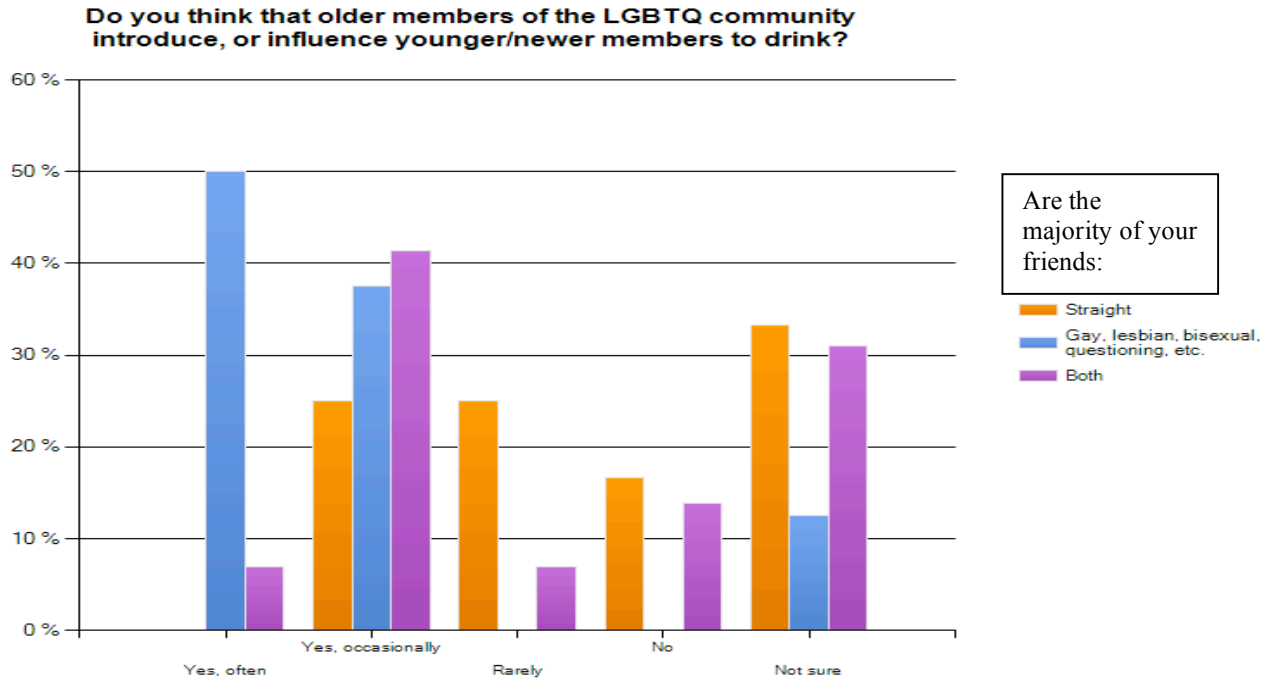
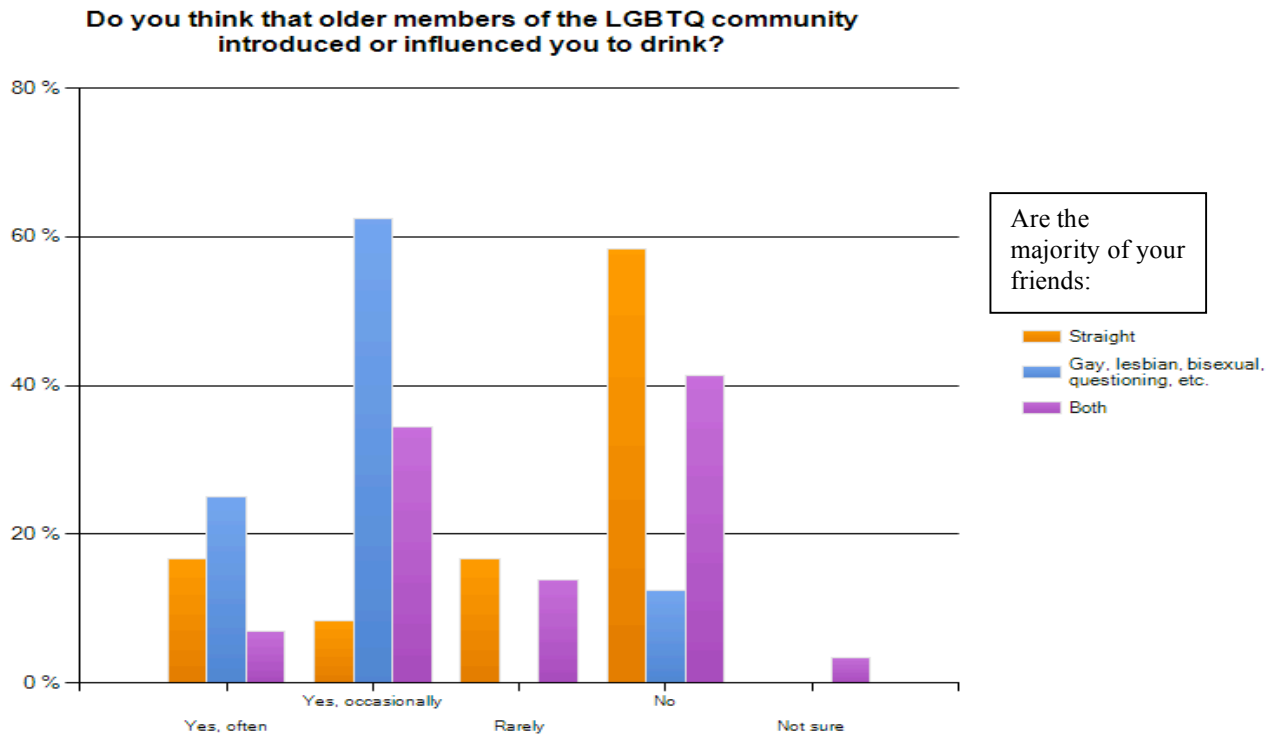
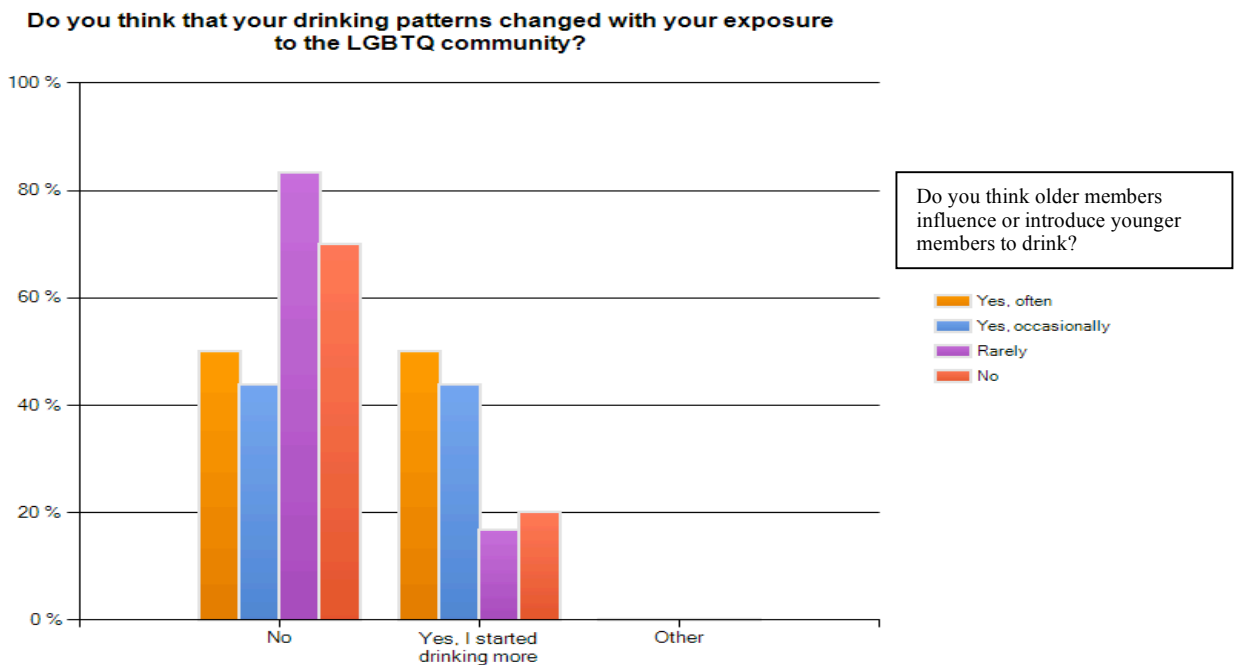


Chart 5



In contrast, people with mostly straight friends, were least likely to say they changed their drinking patterns, and least likely to think that older members introduced others to alcohol, or that older members had influenced them. It is also interesting to note that of those who felt they had been influenced to drink by older LGBTQ individuals, only half of those individuals felt that they started drinking more with their introduction to the gay community. This suggests that although older influence is obviously a factor in how much individuals drink, (as those who felt that older members had rarely or never influenced them to drink were much more likely to say that their drinking patterns had not changed), (See Chart 6) the primary friend group, or, in other words, the amount which an individual was immersed or active in the LGBTQ community, was more significant. This can also be seen by the fact that 45% of individuals felt that older members had influenced them to drink, but only 30% thought that they started drinking more.

Chart 6



In general alcohol use is normalized within the LGBTQ community for many reasons, such as its role during the coming out process, and its role in LGBTQ social spaces. Younger members inherit this attitude from the older members that they meet and look up to. Also, although most LGBTQ individuals did not report using alcohol to deal with minority stress, or discomfort with their sexual orientation, there was a general perception among the majority of the respondents that others often did. For example 75% of respondents felt others drank due to being uncomfortable with their sexual orientation, 20% thought only when first coming out, 5% thought rarely, and not a single person said never. However when asked about their own behavior, only 25% thought that they had consumed alcohol due to sexual orientation discomfort, another 25% only when first coming out, and the majority, 45%, thought never. See Charts 7 and 8. The same pattern can be seen when asked if respondents felt others or they themselves had ever excused excessive drinking due to minority stress. See Charts 9 and 10.

Even though most individuals did not drink due to sexual orientation discomfort, the fact that it is so commonly thought to occur among others might make alcohol use seem more prevalent within the community. Not only could this increase drinking due to the fact that drinking may often be seen as appropriate within the LGBTQ community, but also other studies have shown that individuals tend to drink more when they believe others are drinking more, even if there is no evidence that they are (Durkin 2005). The perception that others often or occasionally are drinking for these reasons might lead individuals who are not, to drink more as well, especially since individuals who use drinking as a coping mechanism are likely to drink more.

Chart 7

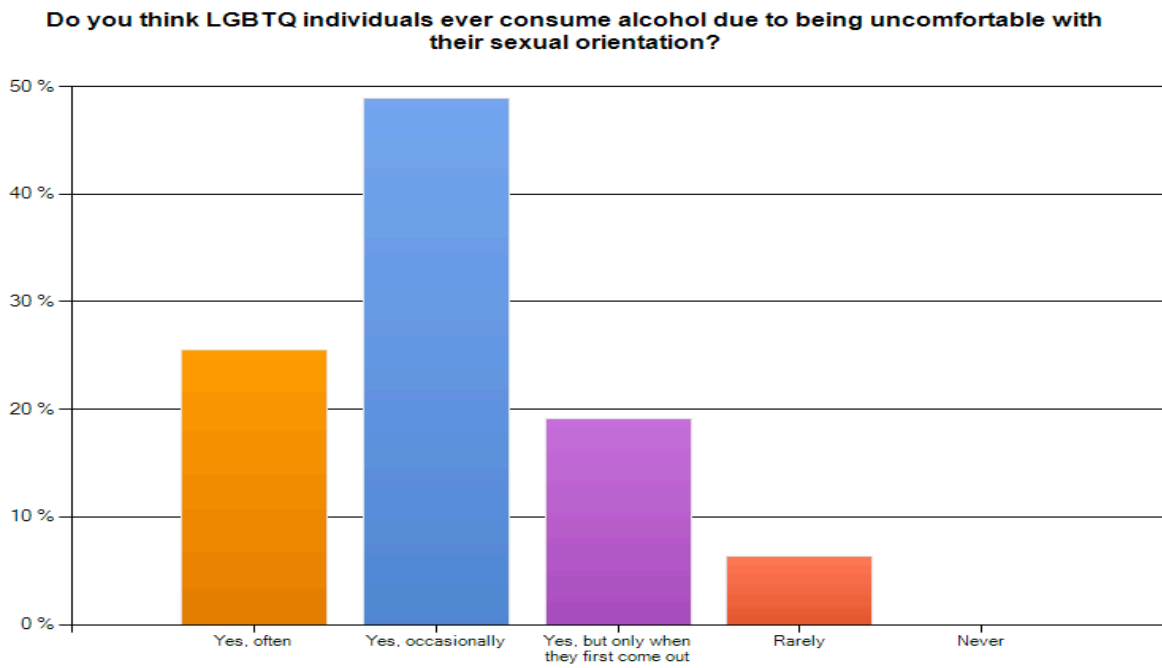


Chart 8

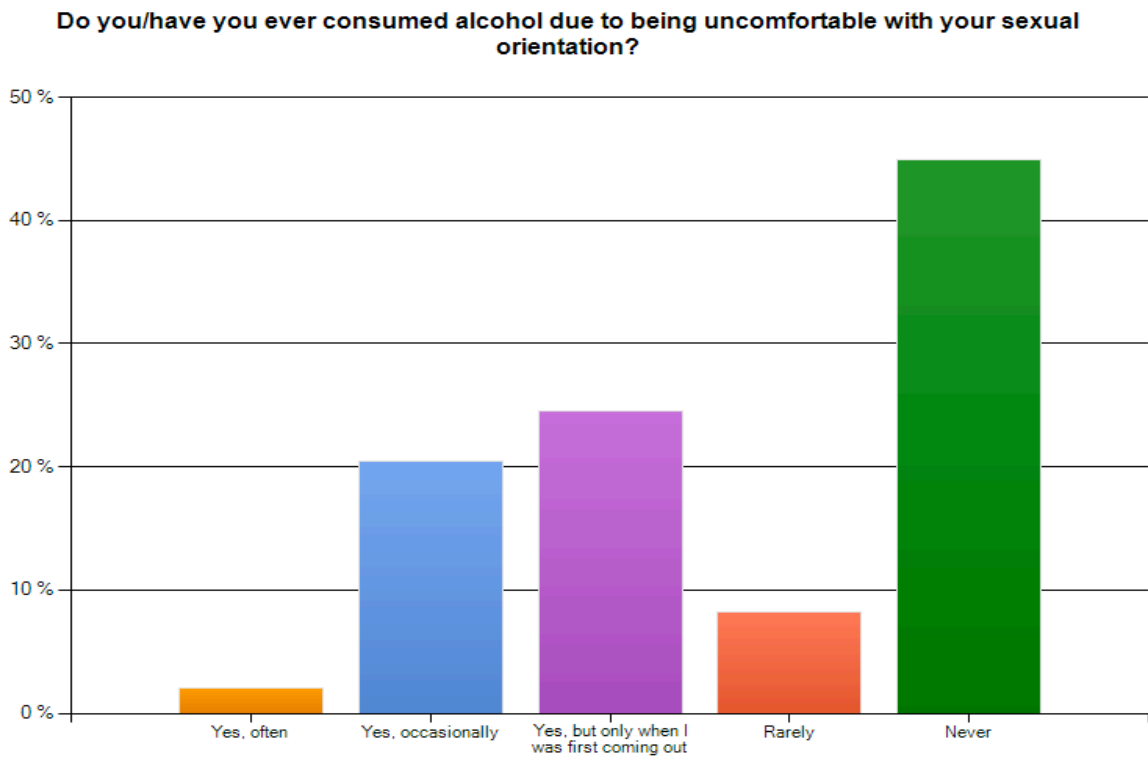


Chart 9

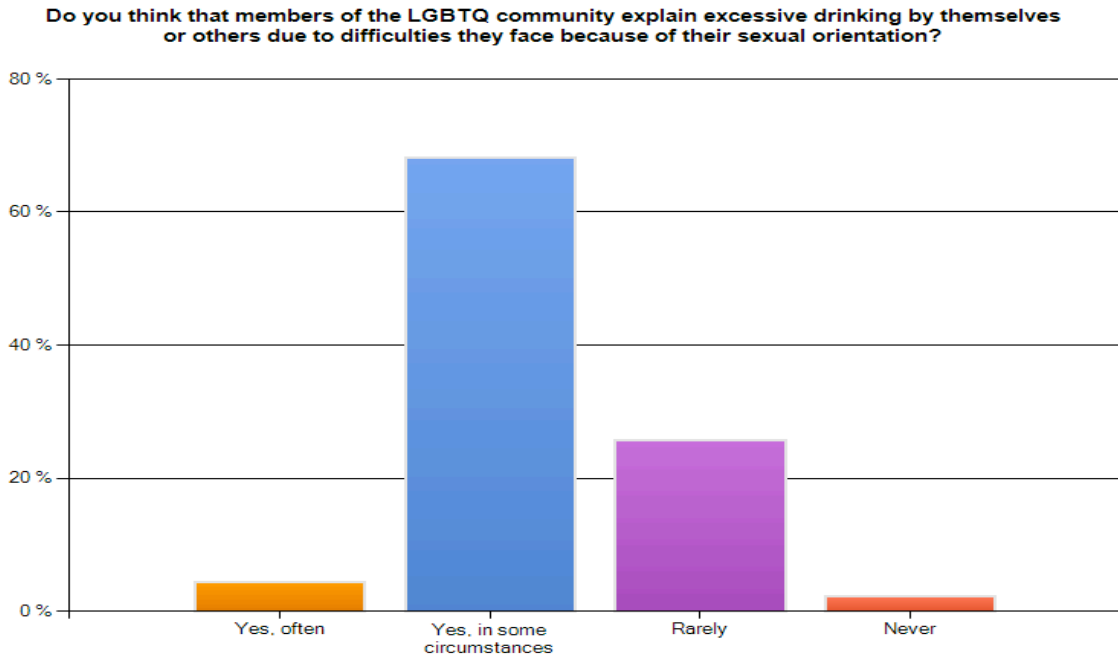
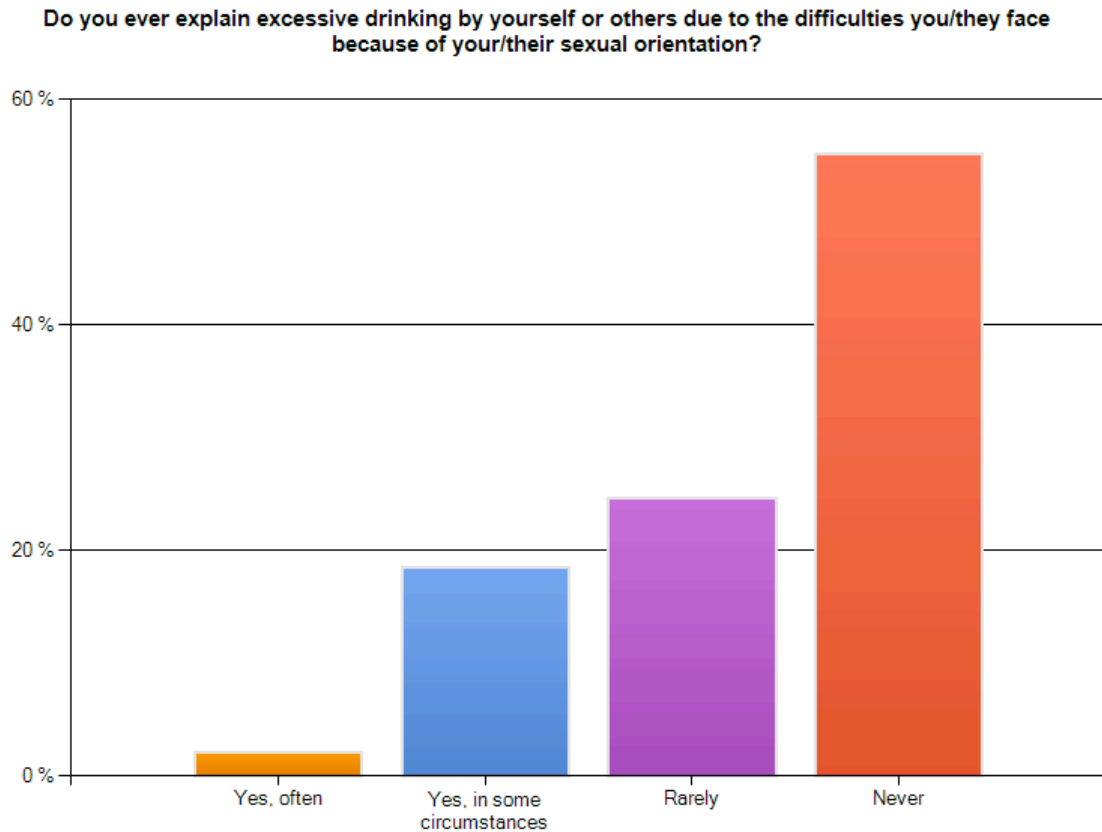


Chart 10



It is also likely, that since many individuals do discuss using alcohol as a coping mechanism during the coming out process, that they establish their drinking patterns then, and continue to drink a lot even when they no longer feel they need alcohol. One individual summed this up by saying “I believe heavy drinking starts as escapism from not being comfortable in one’s skin...I think heavy drinking continues even after individuals have ‘come out’ mostly because of habit.” It is also quite possible that older members of the LGBTQ community did drink more due to sexual orientation discomfort, which may account for higher drinking levels in past years, but now, as the LGBTQ community is more accepted, younger members do not feel sexual orientation discomfort to the same extent, but still drink at higher levels because drinking has now become established within the LGBTQ community.

DRUG USE

Along with alcohol consumption, drug use has also been documented as higher in the LGBTQ community, so although this study was mainly focused on alcohol, respondents were asked several questions about drug use at the end of the survey. 40% of respondents reported using drugs on a regular basis (three times or more per month,) and another 20% reported that they sometimes used drugs. Many other studies have found that drug use is significantly higher in males than females, although in this study, male drug use was only slightly higher than females, 50% to 40% said they used drugs on a regular basis, and by including those who said that they sometimes use drugs, the percent of men and women who use drugs becomes even. Men were slightly more likely to say that they more often used drugs than drank however, 36% to 20%. When asked why they chose to do one over the other men were most likely to cite the fact that using drugs did

not give them a hangover as their main reason, while very few women mentioned that. Women said they preferred drinking because it was more social, less risky, both in terms of their health and because they knew the effects, and because it is legal as well as more socially acceptable. Because the questions on drugs were limited in this survey, it is hard to say why there is this gender difference in attitudes towards drug use, but this is potentially an important area for further research as it could help to illuminate not only why gay men's drug use is so high, but also why lesbians are much more likely to drink when compared to not only heterosexual women, but gay men as well.

Other than the gender differences, drug use seemed to follow a similar pattern as alcohol use; in particular, that the people with mostly LGBTQ friends were more likely to use drugs on a regular basis. In fact all people who had mostly LGBTQ friends reported that they at least sometimes used drugs, whereas the majority of people who had both straight and LGBTQ friends, or mostly straight friends were most likely not to use drugs at all. See Chart 11. Also, those with mostly LGBTQ friends were significantly more likely to report using drugs over drinking, while the other groups were much more likely to drink over using drugs. See Chart 12. More research is needed to determine if the reasons for higher drug use in individuals with LGBTQ friends are the same as the reasons for increased alcohol use, although I would theorize that they are very similar.

Chart 11

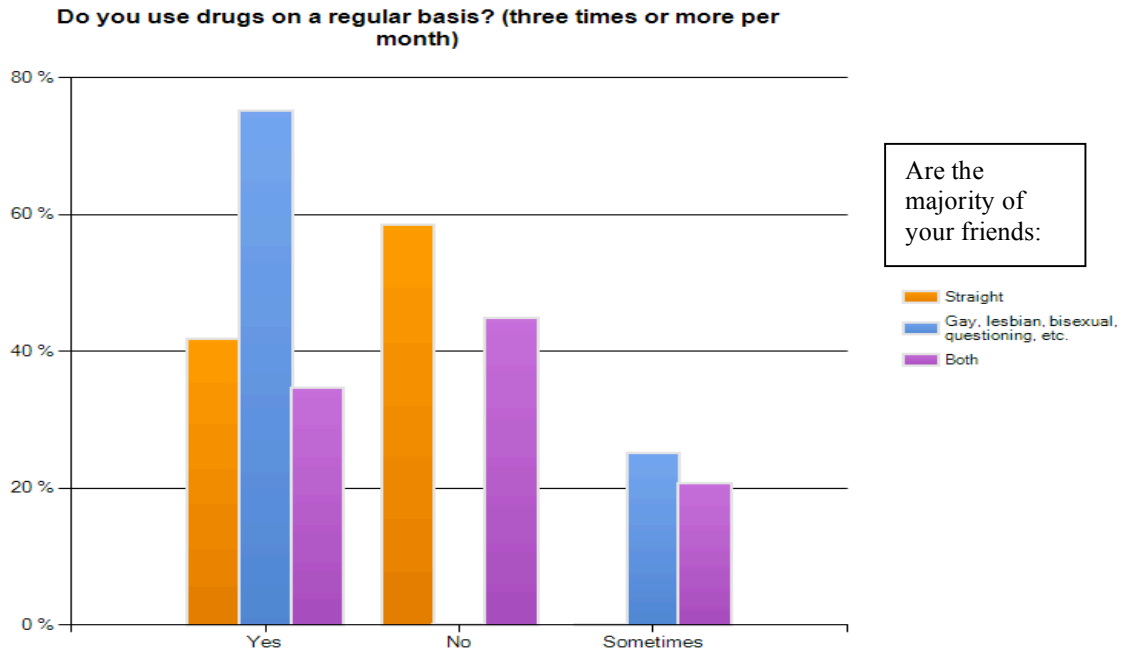
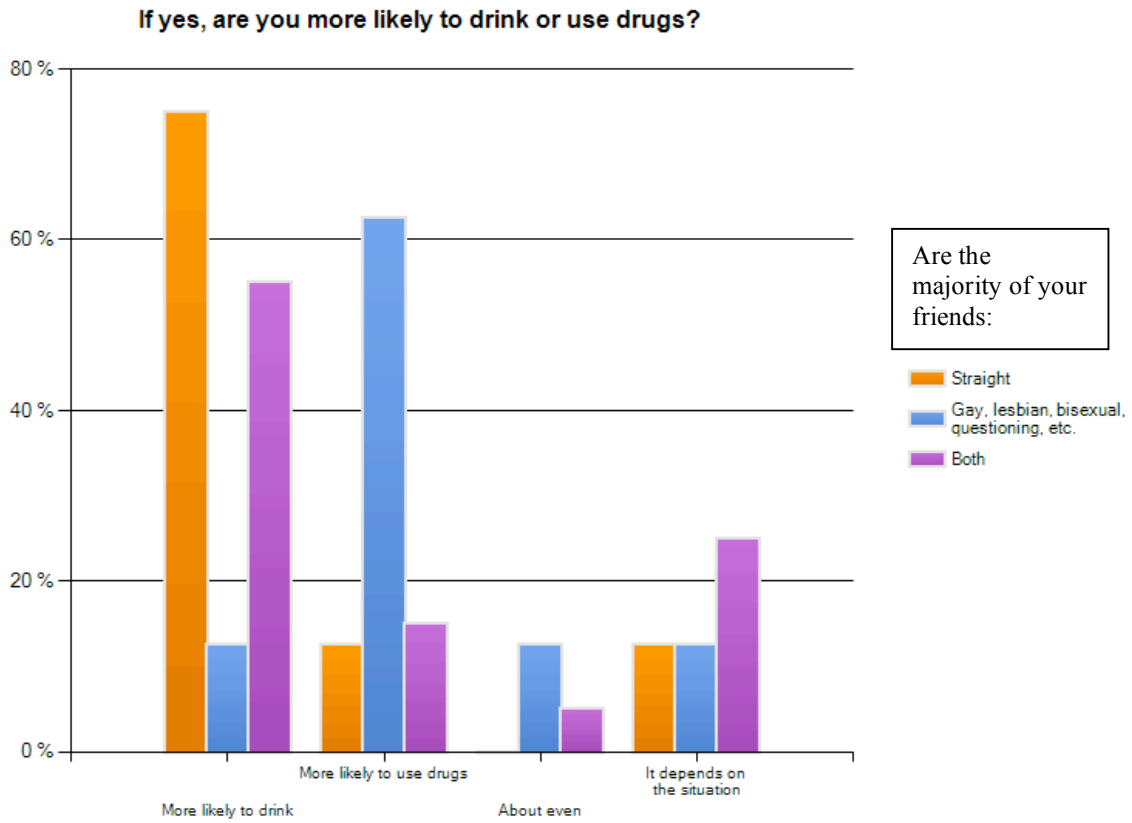


Chart 12



AGE

Another area where the LGBTQ community differed from the heterosexual community was that among heterosexuals, drinking tends to decline with age, but that trend is not found in the LGBTQ community. As only college students and recent college graduates were studied for this research, it is impossible to say whether or not their alcohol use will decline. However, respondents were asked whether they thought they would drink less in the future. Although it is quite possible that individuals may think they are going to drink less now, but this may not actually occur, this question at least gives a good idea whether LGBTQ individuals expect to drink less as they age or not. Overall 60% of respondents felt that they would drink less. The main reasons they cited for this were: a decrease in binge drinking when they get out of college and it is no longer a common and accepted practice, an increase in responsibilities, such as jobs, that will cut back on the time they have to drink, and a worry about the health effects that alcohol consumption may cause over time. 10% of individuals did not think that they would drink less, but most of those respondents said this was due to the fact that they already drank very little. The rest were unsure, but most felt that at the very least their binge drinking would decrease. Responses to this question were fairly similar across both gender and sexual orientation; all groups were most likely to say that they would drink less, except for lesbians, who were unsure, but their responses as to why were similar to others. Also, in general, individuals who felt that the LGBTQ community drank more than the heterosexual community, or were not sure, were more likely to report being unsure of their future drinking habits, which may reflect that those who think that alcohol is an

important aspect in their community are less likely to think that they will need to give it up.

Suggestions for Further Research

As this research was only given to college students and recent graduates at a liberal college in an urban area, it would be incredibly beneficial to widen the range of respondents to students in other regions, settings and differing political views across the United States, as well as in other countries, to see if these results are applicable to the majority of LGBTQ students. Also, college students are a population that already tends to drink a lot, so it would be important to see if people of different ages and at different stages in life have different reasoning for their drinking, as most respondents reported drinking for similar reasons as the majority of other college students. This could be especially important in light of the changing political climate, as older and younger people may have had drastically different experiences, especially with regards to internal and external homophobia. If a similar survey is administered to other groups, I would suggest adding questions to find out when the respondent came out, or started coming out, and where they feel they are now in the coming out process, since it is clear that those currently or recently involved in the coming out process, or who are not yet out, may have very different attitudes towards alcohol than those who have been out for a long time. I would also suggest adding more specific questions, similar to the ones about alcohol, about drug use, as only three questions was not sufficient to determine the attitudes towards drug use, nor the reasons for the differences in use between genders. Additionally, it would be helpful to give a similar survey to heterosexuals as a control

group in order to be able to completely discern which results and attitudes are specific to the LGBTQ community in particular.

Conclusion

In conclusion, although this study was clearly very limited, and there is much more research that needs to be done, the elevated rates of alcohol consumption that we currently see among college aged LGBTQ youth seems to be partially due to the fact that alcohol consumption has been normalized within the LGBTQ community. As proposed by social learning theory, individuals learn how to behave by observing and imitating others in their community, and as a large majority of members within the LGBTQ community believe that alcohol plays a role in coming out, how other LGBTQ individuals may deal with sexual orientation discomfort, and is a central part of many LGBTQ social spaces, new LGBTQ individuals also come to feel that alcohol is a normal and accepted part of life as a member of the LGBTQ community. Even though they may never drink to deal with sexual orientation discomfort, or spend a lot time in bars and clubs, alcohol has become another part of the LGBTQ identity.

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Appendix

Human Subjects Consent Form

OCCIDENTAL COLLEGE
INFORMED CONSENT FORM FOR ADULT SUBJECTS

Faculty Supervisor/Principal Investigator: Dolores Trevizo

Student Investigator(s)/Research Assistant(s): Erica Boudette

Title of research project: Attitudes towards alcohol and drug use within the gay and lesbian community.

I acknowledge that on _____, I was informed by Erica Boudette of Occidental College of the following research project, the way it will be conducted and the conditions of my participation in it:

The purpose of this research project is to discover attitudes that members of LGBTQ community have towards drug use and alcohol, in order to try and help explain the findings of numerous studies on the rate of alcohol and drug use within the LGBTQ community. Participation in this study is completely voluntary, and if at any time you are uncomfortable, you may skip the question, or terminate the survey. The survey consists of approximately 40 multiple choice, yes/no and some short answer questions, and will probably take between 30 minutes to an hour to complete. This survey is completely confidential, and although you will have to sign a consent form, your name will not be linked to your answers, and in the thesis any identifying features will be changed. This survey deals with some potentially sensitive topics, such as sexual orientation, and drug and alcohol use, so if participating in this survey has caused you to feel uncomfortable in any way please contact Emmons health center at 323-259-2657, and they can set you up with a counseling appointment, or if you are no longer in school, refer you to a local counselor. If you have any questions, feel free to e-mail me at eboudette@oxy.edu or Professor Trevizo at dtrevizo@oxy.edu. There is no compensation for participation in this survey but if you would like a copy of my thesis, please e-mail me and let me know.

In order to participate in this survey you must sign the consent form below. Your participation in this survey will be kept completely confidential.

I am at least eighteen years of age. I am fully aware of the nature and extent of my participation in this research project and the possible risks as outlined above. I understand that I may withdraw my participation on this project at any time without prejudice or penalty of any kind. I hereby agree to participate in this research project.

Name (print): _____

Signature: _____ Date: _____

Address: _____

Survey Questions

Note: If the question was multiple choice, the answer choices are given underneath, if there are no answer choices then it was an open-ended question.

- 1) What is your age?
- 2) What year will you, or did you graduate college?
- 3) What is your gender?
 - male
 - female
- 4) What is your sexual orientation?
 - gay
 - lesbian
 - bisexual
 - questioning/unsure
- 5) Are/Were you a member of an organized sports team?
- 6) Are/Were you a member of a Greek Organization on Campus?
- 7) How many days per week do you drink on average?
- 8) On average, approximately how many drinks do you consume each time you drink?
- 9) At what age did you have your first drink?
- 10) At what age did you start drinking regularly? (3 times or more per month)
- 11) Are the majority of your friends:
 - straight
 - gay, lesbian, bisexual, questioning, etc.
 - both
- 12) Do you drink most often:
 - by yourself
 - with mostly straight friends
 - with mostly LGBTQ friends
 - with a mixed group
 - other (please specify)
- 13) What are the main reasons why you drink? For example, when, for what purpose, what are the benefits, etc.

14) Do you think these reasons are similar to other LGBTQ individuals?

- yes
- no
- not sure

15) Do you think that alcohol plays an important role in the LGBTQ social scene? And why or why not?

16) Do you think that alcohol plays an important part in the coming out process, and if so, in what ways?

17) Do you think that members of the LGBTQ community drink more than straights on average?

- yes
- no
- not sure

18) Why do you think this?

- based on personal experiences of you and/or your friends
- based on observations of the LGBTQ community as a whole
- based on things you have heard/seen for example in the media
- other (please specify)

19) Do think that members of Greek Organizations drink more than non-Greeks on average?

20) Do you think that athletes drink more than non-athletes on average?

21) What is the primary place where you meet other members of the LGBTQ community?

- clubs/bars
- school organizations, such as GSA
- political activities
- other community organizations
- other (please specify)

22) Do you think that your drinking patterns changed with your exposure to the LGBTQ community?

- no
- yes, I started drinking more
- yes, I started drinking less
- not sure

23) Do you think your experience is typical of LGBTQ individuals?

- yes
- no

-not sure

24) Do you think that older members of the LGBTQ community introduce, or influence younger/newer members to drink?

- yes, often
- yes, occasionally
- rarely
- no
- not sure

25) Do you think you have ever introduced or influenced younger/newer members of the LGBTQ community to drink?

- yes, often
- yes, occasionally
- rarely
- no
- not sure

26) Do you think that older members of the LGBTQ community introduced or influenced you to drink?

- yes, often
- yes, occasionally
- rarely
- no
- not sure

27) Do you think LGBTQ individuals ever consume alcohol due to being uncomfortable with their sexual orientation?

- yes, often
- yes, occasionally
- yes, but only when they first come out
- rarely
- never

28) Do you/have you ever consumed alcohol due to being uncomfortable with your sexual orientation?

- yes, often
- yes, occasionally
- yes, but only when they first come out
- rarely
- never

29) Do you think that members of the LGBTQ community explain excessive drinking by themselves or others due to difficulties they face because of their sexual orientation?

- yes, often
- yes, in some circumstances

- rarely
- never

30) Do you ever explain excessive drinking by yourself or others due to the difficulties you/they face because of your/their sexual orientation?

- yes, often
- yes, in some circumstances
- rarely
- never

31) Do you think you will drink less as you get older?

- yes
- no
- not sure

32) Why or why not?

33) Do you know and LGBTQ individuals who do not drink?

- no
- yes, 1-2
- yes, 3-5
- yes, 6 or more

34) Proportionately, would you estimate this is similar or different than straight individuals you know?

- same
- different, more straight individuals than LGBTQ individuals drink
- different, more LGBTQ individuals than straight individuals drink
- not sure

35) Do you ever worry that other LGBTQ individuals that you know have a drinking problem?

- yes, often
- yes, occasionally
- rarely
- never

36) Do you ever worry that you have a drinking problem?

- yes, often
- yes, occasionally
- rarely
- never

37) Do you use drugs on a regular basis? (three times or more per month)

- yes
- no

-sometimes

38) If yes, are you more likely to drink or use drugs?

-more likely to drink

-more likely to use drugs

-about even

-it depends on the situation

39) Why do you choose to do one over the other?