

LGB individuals use stimulants at higher rates than heterosexuals

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Lesbian, gay and bisexual (LGB) individuals report higher rates of medical, non-medical, and illegal stimulant use compared to heterosexuals, mirroring patterns seen in other substance use. The study by Columbia University Mailman School of Public Health researchers provides the most detailed picture to date on stimulant use by LGB subgroups and gender. Findings are published in the *American Journal of Preventive Medicine*.

The researchers analyzed data from the 2015-2017 National Survey on Drug Use and Health to examine associations between sexual identity and past-year use of medical and non-medical stimulants (i.e., Adderall, Ritalin) and illegal stimulants (i.e., cocaine, crack, methamphetamine). They found that [bisexual women](#)'s illegal stimulant use in the past year was fivefold that of [heterosexual women](#) (7.8% vs. 1.5%), while gay men's use was threefold that of [heterosexual men](#) (9.2% vs. 3.2%). Non-medical use of prescription stimulants was higher among gay and bisexual men than heterosexual men (5.4% and 6.6% vs. 2.4%) and among gay/lesbian and bisexual women versus heterosexual women (3.3% and 6.8% vs. 1.6%). Past-year medical use of prescription stimulants was higher among gay men than heterosexual men (6.6% vs. 4.1%) and bisexual women than heterosexual women (7.9% vs. 4.9%). There were no differences between bisexual men and women compared to their gay/lesbian counterparts.

Potential consequences of stimulant include [substance use](#) disorder and overdose, particularly given increases in fentanyl contamination in illegally produced pills and cocaine and methamphetamine. As many as half of LGB individuals who reported nonmedical and illegal stimulant use also reported nonmedical prescription opioid use.

"This study highlights the need for future interventions to target stimulant use among LGB

populations, with a particular focus on harm reduction approaches," says first author Morgan Philbin, Ph.D., assistant professor of sociomedical sciences. "The findings have important implications across sexual identities, and demonstrate the need to disaggregate stimulant use by subgroup and gender, particularly related to polysubstance use."

Higher drug use among LGB individuals is likely a result of minority stress—that is, the fact that exposure to stigma and discrimination based on sexual orientation results in health disparities. Structural stigma (e.g., employment or housing discrimination) drives psychological and physical health morbidities among LGB populations, and perceived stigma is associated with cocaine use. Bisexuals can also experience "double discrimination" from heterosexuals and lesbian and gay communities, which the researchers say may account for the particularly high substance use among bisexual individuals.

The paper outlines several avenues to address [stimulant](#) use, including by educating [healthcare providers](#) who focus on LGB communities to screen for and discuss substance use, including stimulants. Communities and providers can also scale-up access to medication disposal and harm reduction services.

The researchers note that their dataset started assessing sexual identity among adults in 2015, so these relationships could not be examined in earlier years or among adolescents. The options for gender included only "male" or "female" and thus did not allow researchers to differentiate between transgender and cis-gender individuals. The dataset does not assess sexual behavior, so this study only captured associations based on individuals' [sexual identity](#).

More information: Morgan M. Philbin et al, Medical, Nonmedical, and Illegal Stimulant Use by Sexual Identity and Gender, *American Journal of*

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