

# Tobacco and Cannabis Use Among California Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ+) Youth

Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ+) youth are disproportionately impacted by tobacco use, which could lead to higher risk of preventable tobacco-related diseases and illnesses (such as cardiovascular disease, chronic obstructive pulmonary disease, and lung cancer)<sup>1,2</sup>. LGBTQ+ youth are at risk of increased substance use due to experiencing minority stress, discrimination, hostility, rejection, victimization, sexuality, and gender-based harassment<sup>3,4</sup>.

Using data from the 2023 California Youth Tobacco Survey (CYTS), this factsheet demonstrates LGBTQ+ youth disparities in tobacco and cannabis\* use, and tobaccorelated behaviors, attitudes, home rules, and secondhand smoke exposure. The CYTS is a representative, annual, statewide tobacco survey of California middle and high school students (8th, 10th, and 12th grade). This factsheet focuses specifically on high school (10th, and 12th grade) students.

<sup>&</sup>lt;sup>1</sup> U.S. Centers for Disease Control and Prevention. <u>Health effects of secondhand smoke</u>. <u>Smoking and Tobacco Use</u>. https://www.cdc.gov/tobacco/secondhand-smoke/health.html. Published May 15, 2024. Accessed June 12, 2024. <sup>2</sup> Garfield, J. L., Piper, M. E., Bauer, S. E., Kathuria, H., & Eakin, M. N. (2023). <u>The Greatest LGBTQ+ Health Issue of All Time: Commercial Tobacco</u>. Annals of the American Thoracic Society, 20(9), 1227–1228. https://doi.org/10.1513/AnnalsATS.202303-268VP.

<sup>&</sup>lt;sup>3</sup> Mann, I., Jenzer, T., Miranda, R., Jr, & Mereish, E. H. (2021). <u>Minority Stress and Nicotine Use and Dependence among Sexual Minority Youth</u>. Substance use & misuse, 56(14),2264–2268. https://doi.org/10.1080/10826084.2021.1972315.

<sup>&</sup>lt;sup>4</sup> Meyer I. H. (2003). <u>Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: conceptual issues and research evidence</u>. Psychological bulletin, 129(5), 674–697. https://doi.org/10.1037/0033-2909.129.5.674.

<sup>\*</sup> The term "marijuana" was used in the CYTS when asking youth about their cannabis use. This is a term recognizable and most often used by youth.

# **LGBTQ+CLASSIFICATION**

LGBTQ+ classification was determined using student responses to questions about current gender identity and sexual orientation, and were categorized as follows:

- LGBTQ+ as students identifying as lesbian, gay, bisexual, transgender, or those that reported "something else" when asked about their sexual orientation and/or gender identity.
- Non-LGBTQ+ as students identifying as either male or female (not transgender) and straight.
- Unclear LGBTQ+ Status as students who could not be classified due to missing data, choosing not to disclose information, or not knowing their sexual orientation (this category was not included in this factsheet).

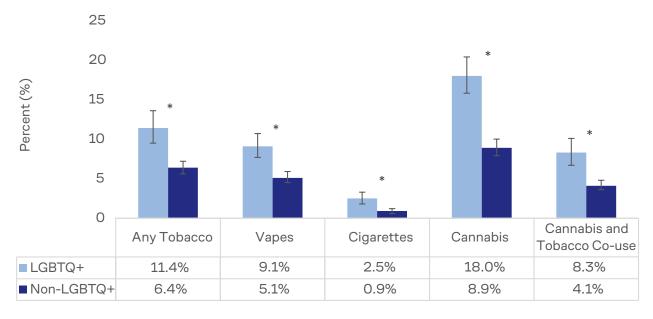
Most California high school students were classified as non-LGBTQ+ (82.3%), with 17.6% of students identifying as LGBTQ+.

### **PREVALENCE**

In 2023, 7.3% of California high school students reported current use (past 30-day use) of at least one tobacco product, and 10.4% of students reported current cannabis use. Vapes were the most common currently used tobacco product (5.9%), followed by cigarettes (1.2%).

• LGBTQ+ students had a significantly higher prevalence of any tobacco, vape, cigarette, and cannabis use in comparison to non-LGBTQ+ students. Cannabis and tobacco co-use was significantly higher among LGBTQ+ students compared to non-LGBTQ+ students (Figure 1).

**Figure 1**. California high school student current (past-30 day) tobacco and cannabis use prevalence by LGBTQ+ status.



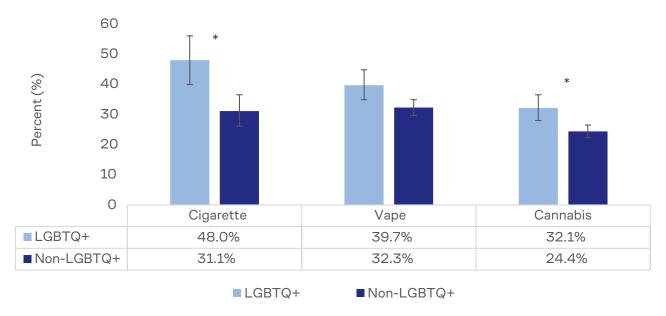
Note. Any tobacco product use includes students who reported using cigarettes, little cigars or cigarillos, big cigars, hookah, vapes, smokeless tobacco, or heated tobacco products in the past 30 days. An asterisk (\*) indicates that the difference between LGBTQ+ and non-LGBTQ+ youth was statistically significant.

### PRODUCT INITIATION BY THE AGE OF 13

As youth get older, their environment and social circumstances can increase risk of starting to use tobacco<sup>5</sup>. Youth who start using tobacco at an earlier age are at a higher risk of nicotine dependence<sup>6,7</sup> and have a lower likelihood of quitting<sup>8</sup>.

• LGBTQ+ youth had a significantly higher prevalence of initiating cigarettes and cannabis by the age of 13 compared to non-LGBTQ+ youth (Figure 2)

**Figure 2**. California high school student prevalence of initiation by the age of 13 by product type and LGBTQ+ status.



*Note*. An asterisk (\*) indicates that the difference between LGBTQ+ and non-LGBTQ+ youth was statistically significant.

<sup>&</sup>lt;sup>5</sup> Wellman R.J., Dugas E.N., Dutczak H., O'Loughlin E.K., Datta G.D., Lauzon B., O'Loughlin J. (2016). Predictors of the onset of cigarette smoking: a systematic review of longitudinal population-based studies in youth. American Journal of Preventive Medicine, 51(5) 767-778.

<sup>&</sup>lt;sup>6</sup> Vogel E.A., Ramo D.E., Rubinstein M.L. (2018). <u>Prevalence and correlates of adolescents' e-cigarette use frequency and dependence</u>. Drug and Alcohol Dependence, 188, 109-112. https://doi.org/10.1016/j.drugalcdep.2018.03.051.

<sup>&</sup>lt;sup>7</sup> Breslau N., Fenn N., Peterson E.L. (1993). <u>Early smoking initiation and nicotine dependence in a cohort of young adults</u>. Drug and Alcohol Dependence, 33(2),129-37. https://doi.org/10.1016/0376-8716(93)90054-T.

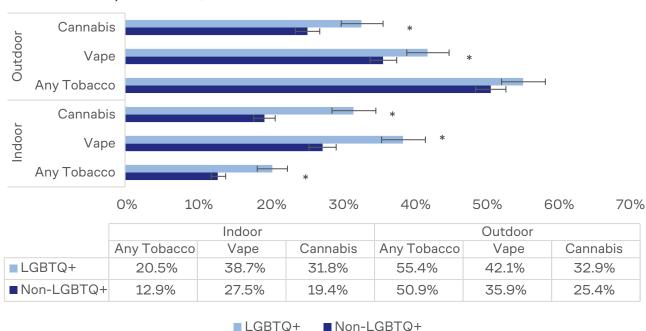
<sup>&</sup>lt;sup>8</sup> Breslau N., Peterson E.L. (1996). Smoking cessation in young adults: Age at initiation of cigarette smoking and other suspected influences. American Journal of Public Health, 86:214–30.

# **SECONDHAND EXPOSURE**

Secondhand smoke exposure has been associated with immediate and long-term health effects such as coronary heart disease, stroke, lung cancer and other diseases<sup>9, 10.</sup> Secondhand vape exposure increases the risk of respiratory symptoms<sup>11, 12</sup>.

• LGBTQ+ youth had a higher prevalence of being exposed to both indoor and outdoor secondhand cannabis smoke and vapor and indoor any tobacco smoke compared to non-LGBTQ+ youth (Figure 3).

**Figure 3**. California high school student secondhand exposure by product type, exposure location, and LGBTQ+ status.



Note. An asterisk (\*) indicates that the difference between LGBTQ+ and non-LGBTQ+ youth was statistically significant.

<sup>&</sup>lt;sup>9</sup> U.S. Centers for Disease Control and Prevention. <u>Health effects of secondhand smoke</u>. <u>Smoking and Tobacco Use</u>. https://www.cdc.gov/tobacco/secondhand-smoke/health.html. Published May 15, 2024. Accessed June 12, 2024. <sup>10</sup> U.S. Centers for Disease Control and Prevention. <u>Cannabis and secondhand smoke</u>. Cannabis and Public Health. https://www.cdc.gov/cannabis/health-effects/secondhand-smoke.html. Published February 15, 2024. Accessed June 24, 2024.

<sup>&</sup>lt;sup>11</sup> Islam T., Braymiller J., Eckel S.P., Liu F., Tackett A.P., Rebuli M.E., Barrington-Trimis J., McConnel, R. (2022). <u>Secondhand nicotine vaping at home and respiratory symptoms in young adults</u>. Thorax, 77(7):663-668. https://doi.org/10.1136/thoraxjnl-2021-217041.

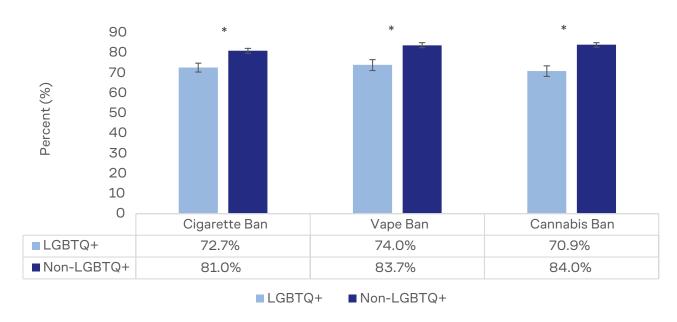
<sup>&</sup>lt;sup>12</sup> Costantino S., Torre A., Randazzese S.F., Mollica S.A., Motta F., Busceti D., Ferrante F., Caminiti L., Crisafulli G., Manti S. (2024). <u>Association between Second-Hand Exposure to E-Cigarettes at Home and Exacerbations in Children with Asthma</u>. Children, 11(3),356. https://doi.org/10.3390/children11030356.

### **PRODUCT BANS AT HOME**

Home smoking rules can help deter adolescents from smoking and promote cessation<sup>13</sup>. Research suggests that by setting rules around tobacco product use at home, parents can help shape their children's attitudes toward tobacco products and future use. While social norms and susceptibility to tobacco use are also influenced by their peers and broader youth culture, parents may be able to help protect their children from the harms of tobacco use by setting rules around tobacco use at home<sup>14</sup>.

• LGBTQ+ youth had significantly less cigarette, vape, and cannabis bans at home compared to non-LGBTQ+ youth (Figure 4).

Figure 4. California high school student complete home bans by product type and LGBTQ+ status.



Note. An asterisk (\*) indicates that the difference between LGBTQ+ and non-LGBTQ+ youth was statistically significant.

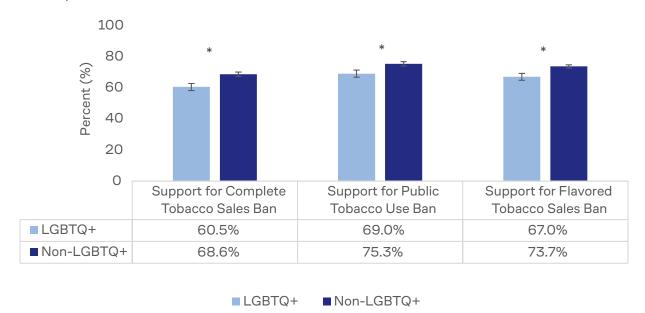
<sup>&</sup>lt;sup>13</sup> Clark P.I., Schooley M.W., Pierce B., Schulman J., Hartman A.M., Schmitt C.L. (2006). Impact of home smoking rules on smoking patterns among adolescents and young adults. Preventing Chronic Disease,3(2):A41. 
<sup>14</sup> Buu A., Nam J. K., Yang M., Su W. C., Lin H. C. (2022). <u>Home e-cigarette rules and youth's vulnerability to initiate and sustain e-cigarette use</u>. Preventive medicine, 164, 107334. https://doi.org/10.1016/j.ypmed.2022.107334.

# YOUTH SUPPORT FOR POLICIES RELATED TO ENDING THE TOBACCO EPIDEMIC

As part of the CYTS survey, respondents were asked their opinions about several tobacco-related policies. Specifically, they were asked to indicate how much they disagreed or agreed with a **Complete Tobacco Sales Ban** (the sale of all tobacco products [e.g., cigarettes, cigars, chew, vapes] should not be allowed), a **Public Tobacco Use Ban** (smoking cigarettes, little cigars, or cigarillos in all public places should not be allowed), and a **Flavored Tobacco Sales Ban** (the sale of flavored tobacco [e.g., cigarettes, chew, cigars, and vapes that taste like menthol or mint, fruit, or candy]). Response options were "strongly agree," "agree," "disagree," and "strongly disagree."

 Policy support was high regardless of LGBTQ+ status. However, LGBTQ+ youth were less supportive of policies completely banning tobacco sales, banning tobacco use in public, or banning flavored tobacco sales compared to non-LGBTQ+ youth (Figure 5).

**Figure 5**. California high school student support for policies related to ending the tobacco epidemic LGBTQ+ status.



Note. Respondents were considered supporting these policies if they responded, "strongly agree" or "agree." An asterisk (\*) indicates that the difference between LGBTQ+ and non-LGBTQ+ youth was statistically significant.