

Substance use in trans and gender diverse Australian adults: a secondary analysis of the Private Lives 3 survey

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Introduction

Trans and gender diverse (trans) people experience substantial health and social inequities, yet limited data exist regarding substance use patterns within this population in Australia. This study will examine patterns of, and factors associated with, 'at risk' substance use.

Methods

Data were sourced from *Private Lives 3*, a large, national, community-based survey of Australian LGBTIQ adults. Trans participants self-reported sociodemographic characteristics, experiences of minority stress and affirmation, psychological distress, history of sexual assault, and substance use behaviours. Substance use outcomes included hazardous drinking (AUDIT-C ≥ 3), at-risk illicit drug use (DAST-10 ≥ 3), and daily smoking. Multivariable logistic regression identified factors associated with each of these outcomes.

Results

Of 1506 trans participants, 49.8% screened positive for hazardous alcohol use, 23.7% for at-risk illicit drug use and 8.5% smoked daily. Housing instability (aOR=1.75, 95% CI=1.29-2.37), psychological distress (aOR=1.57, 95% CI=1.08-2.30), and a history of sexual assault (aOR=1.73, 95% CI=1.24-2.40) were significantly associated with greater odds of at-risk illicit drug use. Affirming partners (aOR=0.62, 95% CI=0.47-0.82) and asexual identity (aOR=0.50, 95% CI=0.29-0.85) were protective against hazardous alcohol use, while those with a history of sexual assault (aOR=1.38, 95% CI=1.08-1.76) had higher odds of hazardous alcohol use. Sexual assault history (aOR=2.25, 95% CI=1.36-3.74) and housing instability (aOR=1.97, 95% CI=1.30-2.98) were associated with greater odds of daily smoking. Minority stress experiences and gender identity were not consistently associated with substance use outcomes.

Discussion and Conclusions

At-risk substance use was more strongly associated with sociodemographic disadvantage, psychological distress, and sexual trauma than to experiences of minority stress. This contrasts with U.S. studies, where substance use is more prominently associated with minority stress.

Implications for Practice or Policy

Addressing the underlying social determinants of health, including housing instability, trauma, and mental health, must be prioritised. Expansion of trauma-informed harm reduction and treatment services co-designed with trans communities is needed.

Disclosure of Interest Statement

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