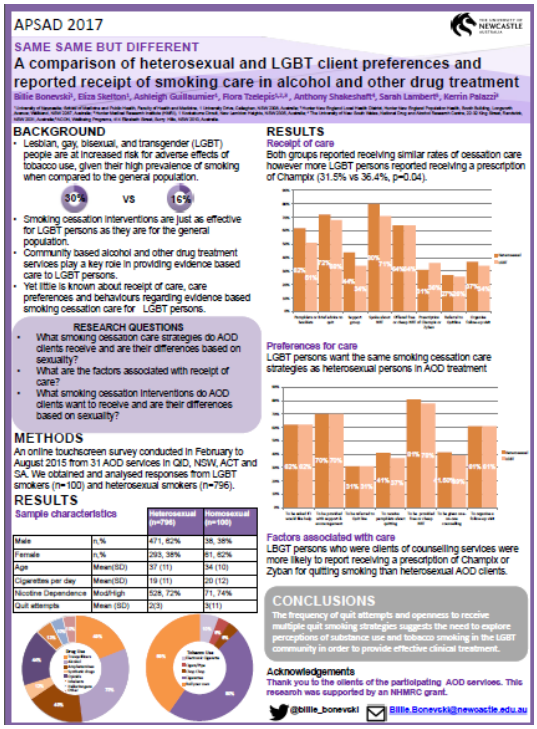

APSAD 2017

SAME SAME BUT DIFFERENT

A comparison of heterosexual and LGBT client preferences and reported receipt of smoking care in alcohol and other drug treatment

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BACKGROUND

- Lesbian, gay, bisexual, and transgender (LGBT) people are at increased risk for adverse effects of tobacco use, given their high prevalence of smoking when compared to the general population.

30% vs 16%

- Smoking cessation interventions are just as effective for LGBT persons as they are for the general population.
- Community based alcohol and other drug treatment services play a key role in providing evidence based care to LGBT persons.
- Yet little is known about receipt of care, care preferences and behaviours regarding evidence based smoking cessation care for LGBT persons.

RESEARCH QUESTIONS

- What smoking cessation care strategies do AOD clients receive and are their differences based on sexuality?
- What are the factors associated with receipt of care?
- What smoking cessation interventions do AOD clients want to receive and are their differences based on sexuality?

METHODS

An online touchscreen survey conducted in February to August 2015 from 31 AOD services in QID, NSW, ACT and SA. We obtained and analysed responses from LGBT smokers (n=100) and heterosexual smokers (n=796).

RESULTS

Sample characteristics

		Heterosexual (n=796)	Homosexual (n=100)
Male	n,%	471, 62%	38, 38%
Female	n,%	293, 38%	61, 62%
Age	Mean(SD)	37 (11)	34 (10)
Cigarettes per day	Mean(SD)	19 (11)	20 (12)
Nicotine Dependence	Mod/High	528, 72%	71, 74%
Quit attempts	Mean (SD)	2(3)	3(11)

RESULTS

Receipt of care

Both groups reported receiving similar rates of cessation care however more LGBT persons reported receiving a prescription of Champix (31.5% vs 36.4%, p=0.04).

Preferences for care

LGBT persons want the same smoking cessation care strategies as heterosexual persons in AOD treatment

Factors associated with care

LBGT persons who were clients of counselling services were more likely to report receiving a prescription of Champix or Zyban for quitting smoking than heterosexual AOD clients.

CONCLUSIONS

The frequency of quit attempts and openness to receive multiple quit smoking strategies suggests the need to explore perceptions of substance use and tobacco smoking in the LGBT community in order to provide effective clinical treatment.

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