

July 2020

## **LGBTQI2S+ Campaign on Tobacco and Its Culture**

### **Background**

The Ontario Tobacco Research Unit has been awarded funding to develop a theory- and evidence-informed social marketing campaign to address LGBTQI2S+ young adult tobacco use. The Canadian Cancer Society is a senior partner on this campaign to change the social norms around smoking within these communities. Other project partners include the Centre for Addiction and Mental Health, Toronto Public Health, and Egale Canada. The project is being conducted in three pilot cities: Toronto, Thunder Bay and Montreal, and is funded by the Public Health Agency of Canada from October 2019 to September 2023.

#### **Preliminary Findings**

- Factors affecting LGBTQI2S+ young adults' tobacco use include stress, stigma, and normative behaviours within the community
- Smoking rates differ across different LGBTQI2S+ communities
- Intersectoral factors include mental health, socioeconomic variables, culture and ethnicity

Through ongoing community outreach, each phase of the project is guided by an advisory committee, collaborative working groups and a young adult advisory committee with representation from across LGBTQI2S+ organizations and individuals from each pilot city. The lead partner agencies collaborating with and guiding OTRU on the project are: The 519 in Toronto, NorWest Community Health Centre in Thunder Bay and The LGBTQ+ Community Centre in Montreal.

### **Project Rationale**

Members of LGBTQI2S+ communities continue to have high rates of tobacco use. The prevalence of cigarette smoking was 35% for LGBTQI2S+ young adults aged 18 to 24 compared to just 23% for the same aged cisgender heterosexual individuals in Canada in 2014.<sup>1</sup>

Research has suggested a number of reasons why smoking rates are high among LGBTQI2S+ communities: stigma and discrimination, victimization, targeted marketing by the tobacco industry, normative behaviours within the communities, and higher rates of personal stress.<sup>2</sup>



Existing literature indicates that tobacco use is generally socially acceptable in many LGBTQI2S+ communities and that LGBTQI2S+ smokers may require a mix of supports to quit smoking, including counselling and pharmacotherapy. Importantly, many LGBTQI2S+ young adult smokers have limited access to NRT or cannot afford it.<sup>3,4</sup> Some LGBTQI2S+ young adults report working multiple jobs making it challenging to find time to attend quit smoking clinics. They also report poor experiences in receiving appropriate health care from health providers and are less likely to seek help for quitting through those channels.<sup>5</sup>

## **Project Overview**

The design of the campaign will be based on detailed input from young adults who identify as LGBTQI2S+ in Toronto, Thunder Bay and Montreal. Virtual focus groups in the pilot cities have been completed and a draft online survey is being developed. Key informant interviews with researchers in the field of LGBTQI2S+ health were conducted in winter 2020. In this early phase of the project, the team is striving to build a community of young adults who can engage in the project even prior to the campaign launch. Depending on results of market analysis and input from working groups and advisory committees, the main components of the project will include:

### **Paid Marketing Campaign**

The project will have a strong social media strategy using platforms such as Instagram, Facebook, Twitter, and YouTube depending on input from LGBTQI2S+ young adults. Social media will serve as a primary communication platform for the program. It will include messaging and calls to action about: the burden of smoking in LGBTQI2S+ communities; relationship among stigma, stress and smoking; changing the social climate; increasing intentions to quit and tips on overcoming barriers to accessing quit smoking supports.

### **Experiential Events**

Opportunities to promote the social marketing campaign at existing local events will be identified by connecting with LGBTQI2S+ partner agencies, networks and event organizers. Opportunities may include PRIDE events, film festivals, concerts, etc. Materials developed for the events will include branded event assets and giveaways that drive people to the project website and social media channels.

#### Website

The website will focus on improving LGBTQI2S+ young adults' knowledge on smoking burden; the relationship among stigma, stress and smoking; changing the social climate; and increasing intentions to quit smoking (and vaping). Shaped by market analysis findings, the website will provide a place to connect with others, share experiences through use of relevant design, images, videos of personal testimonies and social influencers among other elements. Based on the previous success with other cessation initiatives, a quit and win contest will be developed and housed on the website.

#### **LGBTQI2S+ Safe Cessation Services**

The project team, together with LGBTQI2S+ young adults and organizations, will develop LGBTQI2S+ safe cessation services using for example, the Canadian Cancer Society's Smoker's Helpline (SHL) infrastructure, the final makeup of which will be determined by the market analysis. Tentative options for LGBTQI2S+ safe cessation services include a combination of adapted SHL services, and custom LGBTQI2S+ safe digital cessation resources. If a custom tool is determined to be needed by the target population, features that will be explored include (but are not limited to): a login portal for tracking cessation progress, customized quit plans, and an interactive online chat/forum feature.

### **Preliminary Results**

The project team interviewed 10 key informants including researchers and program leads from across Canada, the U.S., and Australia. Minority stress was discussed by almost every key informant as explanation of higher smoking rates among LGBTQI2S+ young adults. Stress was discussed as various forms impacting young adults from the communities for example:

- Violence and discrimination
- The experience of "othering"
- Family unacceptance
- Marginalization, ostracization

Broader social determinants of health and intersectionality of other issues related to mental health, insufficient housing and employment were also identified as factors affecting smoking

rates among young adults. These factors were identified as upstream harms that take different forms and impact coping mechanisms that include smoking and other substance use. They were also considered intertwined with social norms and who young adults associate within the community.

Normative behaviours in the LGBTQI2S+ communities were also identified as major contributors to higher smoking rates in these populations. Similar to the stigma/stress models, the social norms have several layers that impact smoking. Broad social norms include the neighbourhoods where people live, media people consume, organizational policies surrounding people.

Some individuals in the communities might be "saturated by smoking" if they, for example, share a house with people who smoke, have friends who smoke, smoke in their cars, work with people who take smoke breaks etc. For LGBTQI2S+ youth and young adults, the concept of friendship circles, family of choice is perhaps more important than families in terms of influences on smoking behaviours. Smoking behaviours are considered highly related to social networks, friends' behaviours, events individuals attend.

In terms of vaping, almost all of the key informants felt that vaping was not well documented or well understood within LGBTQI2S+ communities, although some new research is coming out. Some felt that anecdotally, rates of vaping are as high as smoking in the communities.

Preliminary suggestions for cessation services include virtual and in-person support groups and online supports including text-based services.

### **Next Steps**

The project team has recently concluded conducting virtual focus groups with young adults in the pilot cities who currently smoke, don't smoke, have quit, tried quitting in the past or have plans to quit smoking in the future. In September 2020, the first wave of the longitudinal online survey will be launched to ask individuals detailed questions about their smoking behaviours, attitudes and beliefs, and experience within the LGBTQI2S+ communities. The link for the survey will be posted on the temporary webpage. If you would like to be notified once the survey is online, please email us.

### **Project Team**

- Dr. Robert Schwartz, OTRU, University of Toronto, CAMH
- Dr. Michael Chaiton, OTRU, CAMH
- Dr. Bruce Baskerville, Canadian Institutes of Health Research
- Katina Kominos, Canadian Cancer Society
- Jean Luc Blanchard, OTRU
- Lynn Planinac, OTRU

### **Community Collaborators**

### **Thunder Bay**

- NorWest Community Health Centre (lead)
- Canadian Cancer Society Northwestern Region
- Equality Rocks Choir
- Thunder Bay District Health Unit
- Thunder PRIDE

#### **Toronto**

- The 519 (lead)
- Alliance for South Asian AIDS Prevention
- Asian Community AIDS Services
- Black CAP
- Dr. Kris Kuciel Naturopathic Medicine
- Lumenus
- REX Pride

#### Montreal

- Centre Communautaire LGBTQ+ De Montréal (lead)
- Fierté Montréal Pride
- Jeunesse Lambda
- RÉZO



### **Contact Details**

If you have any questions about the project, please don't hesitate to reach out to us or visit the project's temporary landing page.

Authors: Lynn Planinac and Jean Luc Blanchard

#### References

- <sup>1</sup> Health Statistics Division, Statistics Canada. Canadian Community Health Survey (CCHS) Annual Component 2013-2014 Microdata file. Ottawa, ON: Statistics Canada; 2015.
- <sup>2</sup> Blosnich J, Lee JG, Horn K. A systematic review of the aetiology of tobacco disparities for sexual minorities. *Tobacco Control*. 2013 Mar;22(2):66-73.
- <sup>3</sup> Baskerville NB, Dash D, Shuh A, Wong K, Abramowicz A, Yessis J, et al. Tobacco use cessation interventions for lesbian, gay, bisexual, transgender and queer youth and young adults: A scoping review. *Preventive Medicine Reports*. 2017;6:53–62
- <sup>4</sup> Baskerville B, Wong K, Shuh A, Abramowicz A, Dash D, Esmail A, et al. A qualitative study of tobacco interventions for LGBTQ+ youth and young adults: Overarching themes and key learnings. *BMC Public Health*. 2018; 18:155.
- <sup>5</sup> Baskerville NB, Shuh A, Wong-Francq K, Dash D, Abramowicz A. LGBTQ Youth and Young Adult Perspectives on a Culturally Tailored Group Smoking Cessation Program. *Nicotine & Tobacco Research*. 2017 Aug 1;19(8):960–7.