ASHES, Vol. 21(6) - To smoke or not to smoke: Is complete abstinence the better goal for young adult LGBTQ smokers?

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Editor's note: Today's review is part of our month-long <u>Special Series on</u> <u>Education to Promote Lower-risk Drinking, Gambling, and Substance Use</u>. Throughout May, The BASIS investigates the public's awareness of, perceptions toward, and adherence to low-risk guidelines for alcohol and substance use and gambling.

We'd love to hear from you! Please consider taking our brief **Reader Survey**. Your feedback will help us enhance and improve our content. You will receive a \$5 virtual gift card for taking the survey (rules and eligibility requirements apply).

The <u>risks of tobacco use</u> are well known, yet many people continue to smoke. In the U.S., smoking rates are <u>disproportionately high</u> among sexual and gender minorities. Traditionally, efforts to reduce tobacco harm have focused on abstinence. However, most people who use cigarettes struggle to quit, and not everyone is ready or wants to stop. Though divisive, some public health advocates <u>argue</u> for tobacco harm reduction (THR) approaches, which emphasize moderation <u>rather than</u> abstinence. This week, as part of our Special Series on Education to Promote Lower-risk Drinking, Gambling, and Substance Use, ASHES reviews a <u>study by Tamar Antin and colleagues</u> that explored how sexual and gender minority young adults perceive and engage in THR.

What was the research question?

How do sexual and gender minority young adults perceive and engage in THR strategies?

What did the researchers do?

The researchers completed <u>qualitative interviews</u> with 100 sexual and gender minority young adults (aged 18-25) living in the San Francisco Bay Area. All participants were current or former users of combustible cigarettes. They were

asked questions about their tobacco use, including reasons for use, perceptions of risk, strategies they used to reduce harm, and future intentions of tobacco use. The research team transcribed the interviews and performed <u>thematic analysis</u> to identify key themes relating to participants' perceptions and engagement in THR.

What did they find?

Four broad themes emerged (see Figure). First, participants indicated a number of *individual strategies used to reduce tobacco-related harms*. These included substituting cigarettes with non-combustible nicotine products perceived as less harmful (e.g., vapes) and reducing cigarette use, such as by cutting cigarettes shorter or rationing them. Participants also referenced their *tobacco use as a part of a broader spectrum of societal harms*. For example, some participants felt that factors like social marginalization and discrimination contribute to their tobacco use, and that THR approaches should recognize these underlying broader harms. They also emphasized the *pragmatism and non-judgmental framing* of THR. Finally, participants described *THR as a person-centered approach* that meets the individual where they are and respects individual autonomy.

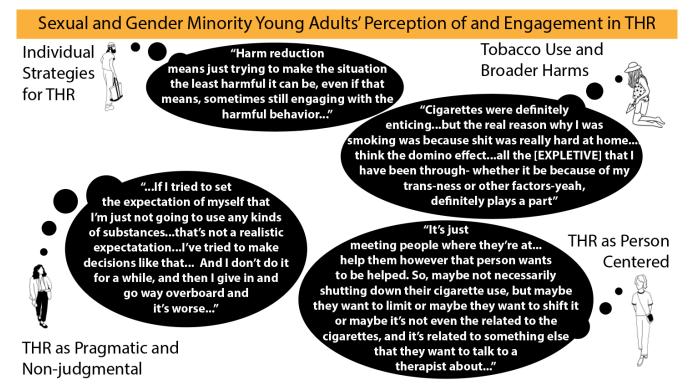


Figure. Selected quotes from participants representative of the four themes relating to sexual and gender minority young adults' perceptions of and engagement in THR. Click image to enlarge.

Why do these findings matter?

These findings emphasize the importance of taking a broad approach to reducing

harms associated with tobacco use. For sexual and gender minorities, tobacco use is often situated within a larger constellation of harms. Addressing stigma, discrimination, and social and structural inequities that contribute to tobacco use among sexual and gender minorities may reduce harms. Furthermore, while abstinence-based approaches work for some, many participants experienced rebound effects when attempting to quit altogether. Previous research has identified similar issues in abstinence-only approaches, underscoring the importance of THR as an alternative. Sexual and gender minority smokers may benefit from THR education that is person-centered, reflects their unique experiences, and prioritizes autonomy.

Every study has limitations. What are the limitations in this study?

This study was conducted with sexual and gender minority young adults, whose perceptions of and engagement in THR may be shaped by experiences unique to their population. Therefore, these results may not be generalizable to the broader population of cigarette smokers. Additionally, this study recruited participants from the San Francisco Bay Area, a historically pro-LGBTQ area, which may further limit the generalizability of this study.

For more information:

The CDC provides <u>information</u> about smoking for LGBTQ+ people. To learn about harm reduction more generally, visit the <u>National Harm Reduction Coalition</u> website. Additional tools and resources are available on our <u>Addiction Resources</u> webpage.

—John Slabczynski

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