Note: Each group within this larger LGBT category has a culture different from the others, while each of the groups is in turn very diverse. Lifestyles, norms, values and health behaviors among individuals within each of these groups vary greatly. Moreover, gender identity intersects with other aspects of identity, such as ethnicity, race, geographic location, etc. When using the following facts and guidelines in your work with LGBT communities, keep in mind that they are generalizations. Researchers and evaluators must find out what applies and what doesn’t.

1. Smoking Prevalence in California

<table>
<thead>
<tr>
<th>Group</th>
<th>Prevalence</th>
</tr>
</thead>
<tbody>
<tr>
<td>LGBT</td>
<td>27.6%*</td>
</tr>
<tr>
<td>Adults overall</td>
<td>13.3%**</td>
</tr>
</tbody>
</table>

* CHIS 2005
** Behavioral Risk Factor Survey /California Adult Tobacco Survey 2006

2. Known Stressors in the LGBT Population

- Enforced gender norms
- Repression
- Stigmatization
- Isolation
- Prejudice
- Antigay violence

3. Symptoms with High Prevalence in the LGBT Population

- Mental distress
- Substance abuse
- Suicidal thoughts
- Internalized homophobia
- Mental disorders
- Feelings of shame
- Feelings of low self esteem
- Loneliness
- Anxiety
- Depression
4. LGBT’s Low Trust in Medical Community

- History of classifying homosexuality and transgender behavior as mental disorders
- History of substandard care for LGBT population
- Medical forms and formats for medical intake forms are often insensitive to the experience of LGBT population
- Discriminatory treatment following disclosure of sexual orientation in paramedical and auxiliary care settings, including nursing homes, domestic violence centers, senior centers, etc.

5. LGBT Population’s Relationship to Tobacco

- In order to establish and live out their identity, members of the LGBT community often adopt a counter-mainstream, rebellious attitude. Tobacco use, which has been labeled as “bad” by the dominant culture, becomes a symbol of rebellion against repression.
- The tobacco industry “tabs into” the sentiment for freedom and rebellion with its advertisement and through sponsorship.
- Many LGBT publications con only continue to exist with advertisement money from the tobacco industry.
- Public sentiment has driven smokers to an outsider status in a similar way that it has pushed the LGBT population to the margin of society. Smoking comes “naturally” to the outsider.
- Tobacco use is a common denominator among many in the LGBT community.
- Tobacco use is often a point of contact in bars and at events.
- Tobacco has long been a low priority health issue because HIV has been a much more significant health problem. However this is changing: while people who were dying from AIDS saw no reason to quit smoking, medication helps them to live longer, and refraining from tobacco use becomes an incentive.
- More members of the LGBT community are now more trusting of tobacco control programs because they see the benefit of it and they often no longer see these programs as manifestations of a dominant oppressive culture.

6. Do’s and Don’ts in Research and Evaluation with LGBT Communities

The following recommendations relate to some of the most common tobacco control evaluation tasks such as conducting opinion polls and other surveys, interviewing key informants, and doing observations.

- **Gain trust:** Because of the negative experiences with the general public and with health professionals and institutions, evaluators need to gain the trust of the
LGBT community. Evaluators should expect skepticism and mistrust. An anti-discrimination statement that specifically addresses the LGBT community at the point of contact is useful, for instance: “ABC organization does not discriminate on the basis of sexual orientation and strongly condemns discrimination against lesbians, gays, bisexuals, and transgender individuals.”

- **Resistance**: There is a strong possibility that cooperation in tobacco control evaluation will be rejected because it might be interpreted as a means of mainstream/dominant culture’s control effort of the community’s lifestyle. Work with and through established LGBT groups and organizations that agree with your agenda.

- **Find supporters**: Many individuals in the LGBT community are strong supporters of healthy lifestyles. Find individuals and organizations in the community that volunteer to participate in your evaluation efforts.

- **Work with insiders**: Members of the LGBT community are often more likely and willing to talk to one of their own than to someone who might in their eyes represent the very institutions and structures that have excluded and discriminated against them. Have LGBT members on your team; better yet: have your evaluation team come entirely from the community.

- **Avoid stereotyping**: Remember that sexual orientation is only one identifier, and it may or may not play a great role in the person’s life. The person you will be interviewing or surveying might just as much identify with or be influenced by his or her ethnic background, socioeconomic status etc. Members of the LGBT community have a wide range of values, political views, religious backgrounds, etc. Since individuals might belong to the LGBT community and to a community of non-or limited English speakers, make sure your surveys and interviews do not exclude those who do not speak English. Be prepared to recruit a translator and do not phrase questions in a way that they leave room for multiple identifiers.

- **Use the communication tools that the group uses**: Many members of this group network electronically. Using electronic means such as ads on target websites and online surveys work well with this group and bring higher-than-usual results.

- **Locate the population**: Ask insiders to help you determine the real and the virtual places where these communities interact, for instance online discussion boards, community centers, LGBT film festivals, pride events, etc. Keep in mind that individuals belonging to this population are geographically dispersed and cannot easily be “located” in one physical location. Many members of this population do not frequent gay centers, bars, or events. Online network places can be good locations for advertising and looking for volunteer survey participants.

- **Conducting surveys**: Conduct surveys online if possible. If surveys are conducted pen-to-paper in a face-to-face setting, the person asking the questions should come from within the LGBT community. If the person is not trained in conducting surveys, training is needed.
Developing survey questions: Develop your survey questions with members of the LGBT community. They speak the community language and know which questions have high relevance.

Survey questions on gender: Refrain from using gender identifying questions that exclude LGBT members (check standardized instruments and adapt them). Use open-ended questions that allow respondents to identify their own gender identity.

Survey questions on family status: Instead of using the standard “family” questions that often use categories like “married,” “divorced,” “spouse,” etc., ask about household or relationship (“members in your household,” “life partner,” etc.)

Pilot test: Since the LGBT communities are very diverse, pilot testing your instrument is very important. An instrument that works in one setting might not work in another.

Surveys on general population and LGBT community: You might be conducting surveys with people that are not exclusively from the LGBT community, and with people who belong to several communities. Ask your questions in a way that is sensitive to all.

Interviews in the LGBT community: In order for the LGBT community member to open up to an interviewer, trust is essential. A known and trusted member of the community is the most suited person to conduct interviews, but simply being known is not sufficient: if the person is not versed in interviewing techniques, it is important to train him or her beforehand.

Observation: Observations at sites where LGBT members congregate must be conducted with great sensitivity. An outside observer can be seen as an intruder into an already marginalized community, and the observer’s intentions might not be clear.

Analysis: Consult with community members when interpreting the results of your data. Pay attention to multiple identifiers, for instance: How much of your result is based on respondents’ sexual orientation and not on socio-economic status or ethnic background? How do the various identifiers come together in explaining an individuals’ and group’s health behavior?

Report writing: Keep in mind that the LGBT community is your most important stakeholder. Write your report with this community as your audience in mind.
References and Resources

- Tobacco Technical Assistance Consortium. www.ttac.org
- www.gaydata.org

Citation Suggestion:

For more Tips & Tools and other resources, go to our website: http://tobaccoeval.ucdavis.edu