



## reasons why asian american and pacific islander lesbian, gay, bisexual, transgender, questioning, intersex communities should care about tobacco use...



With so many issues affecting Asian American and Pacific Islander (AAPI) Lesbian, Gay, Bisexual, Transgender, Questioning, Intersex (LGBTQI)\* communities like: homophobia, racism, transphobia, marriage rights, violence, employment discrimination, domestic violence and HIV/AIDS, one issue is often left on the back burner—tobacco use. Is tobacco use really a problem? While tobacco use may be a social norm, it is also a silent killer, responsible for lung cancer and multiple other cancers, cardiovascular disease, and furthering HIV/AIDS complications.

Furthermore, tobacco is not just a health issue; it is a social justice issue. For years the tobacco industry has been marketing its harmful product directly to LGBTQI populations and communities of color through advertisements and sponsorship of community events. As a result, AAPI LGBTQIs are getting a double dose of tobacco industry targeting.

### What can we do? Get involved!

AAPI LGBTQI groups have been instrumental in organizing communities around equal rights for LGBTQIs, countering hate crimes, and raising awareness of health issues such as HIV/AIDS. They are leaders in their communities because they address cultural needs in terms of race/ethnicity, sexual orientation, and gender identity. By addressing tobacco use, AAPI LGBTQI organizations can further their work in promoting health, wellness and social justice within their communities.

#### Here are some facts...

- **Tobacco use kills more people each year than AIDS, alcohol and drug abuse, car crashes, injuries, murders, and suicides combined.** An estimated 15,000 to 20,000 AAPIs may die each year from tobacco-related illnesses.\*\*
- **There is very little data on smoking rates for AAPI LGBTQI populations,** but issues of ethnic and racial discrimination compounded by other stressors affecting LGBTQI populations can lead to even higher rates of tobacco use for AAPI LGBTQI communities.
- A 1999 study found that **41.5 percent of Gay adults were identified as smokers<sup>1</sup>**—almost twice the rate of men in the general population (23.2 percent)<sup>2</sup>.
- **Smoking rates for LGB youth (38 to 59 percent)** are found to be significantly higher than youth in the general population (28 to 35 percent).<sup>3</sup> LGB youth are at higher risk to initiate tobacco use because of stress related to lack of support from family and friends, depression, low self-esteem, and stressful life events related to “coming out”.<sup>1</sup>

CONTINUED ON REVERSE

\* **Intersex:** a term used to describe individuals born with both female and male characteristics and who possess bodies that doctors cannot neatly classify as male or female. This includes people who have chromosomal sex other than XX (female) or XY (male). **Questioning:** a term used to describe those who aren't quite sure of their sexual orientation and are trying to figure it out. **Transgender:** an umbrella term used to refer to a community of individuals whose sex is not entirely congruent with their gender identity and who identify as neither female nor male.

\*\* This figure is roughly calculated based on AAPIs representing 4% of the U.S. population in the 2000 census.

- **There is very little data on smoking rates among Transgender, Intersex, and Questioning communities.** Risk factors such as stress related to discrimination, transphobia, and homophobia (internalized and external) suggest that smoking prevalence is higher in these populations.<sup>1,4</sup> In addition, hormone therapy combined with tobacco use increases the risks for medical problems.<sup>4</sup>
- **Smoking has been identified as a means of initiating and maintaining social connections within the AAPI LGBT community;** it is perceived to improve one's appearance, acts as a mechanism to control weight and display masculinity.<sup>5</sup> The lack of social spaces other than bars and clubs where smoking is prevalent and closely associated with alcohol places the LGBT community at greater risk of tobacco use and secondhand smoke exposure.<sup>4</sup>
- **The tobacco industry directly targets LGBTQI communities.** Tobacco industry documents highlight

R.J. Reynolds' Project SCUM (Sub Culture Urban Marketing), a tobacco marketing strategy geared toward Gay males and the homeless community in San Francisco.<sup>6</sup>

- **In an attempt to buy community members' silence, the tobacco industry continues to contribute to AIDS related charities, Pride Celebrations and other LGBTQI causes.** In May 2001, Brown & Williamson Tobacco Corporation sponsored a smoking lounge and gave away free cigarettes at the Gay and Lesbian Alliance Against Defamation 12th Annual Media Awards in San Francisco.
- AAPI LGBTQI communities have struggled against many forms of discrimination such as racism, homophobia, transphobia, and sexism. **If AAPI LGBTQI communities have the strength to endure these challenges, they have the strength to overcome tobacco use.**

1 Gay and Lesbian Medical Association and LGBT health experts. *Healthy People 2010 Companion Document for Lesbian, Gay, Bisexual, and Transgender (LGBT) Health*. San Francisco, CA: Gay and Lesbian Medical Association; 2001.

2 Centers for Disease Control and Prevention (CDC). *Behavioral Risk Factor Surveillance System Survey Data*. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention; 2000.

3 Ryan H, Wortley PM, Easton A, Pederson L, Greenwood G. Smoking among lesbians, gays, and bisexuals: A review of literature. *American Journal of Preventative Medicine*. 2001; 21(2): 142-9.

4 National Association of Lesbian, Gay, Bisexual & Transgender Community Centers (NALGBTCC). *The National Association of Lesbian, Gay, Bisexual & Transgender Community Centers Tobacco Control Program Final Report*. Garden Grove, CA: NALGBTCC; 2003.

5 Asian & Pacific Islander American Health Forum. *Silent Voices Speak Out Poster Presentation*. San Francisco, CA: National Conference on Tobacco or Health; 2002.

6 University of California, San Francisco, Legacy Tobacco Documents Library. Project SCUM. Available at: <http://legacy.library.ucsf.edu/tid/mum76d00>. Accessed February 2, 2005.

To learn more, here are some helpful resources:

	AAPI Specific	Equal Rights / Advocacy	Other Health Issues	Tobacco Use Education & Resources	Youth
<b>Asian Pacific Partners for Empowerment, Advocacy and Leadership</b> www.appealforcommunities.org 510.272.9536	●	●	●	●	●
<b>Asian &amp; Pacific Islander American Health Forum</b> www.apiahf.org   415.954.9988	●	●	●	●	
<b>The Center</b> , serving LGBTIQ communities www.thecenterhawaii.org   808.951.7000	●	●	●	●	
<b>National Association of LGBT Community Centers</b> www.lgbtcenters.org   714.534.0862		●	●	●	

This publication was written collaboratively by:



Asian Pacific Partners for Empowerment, Advocacy and Leadership



Asian & Pacific Islander American Health Forum



National Association of LGBT Community Centers

Special thanks to Jonathan Flojo, Kevin Fong and Karen Lee for reviewing this publication and providing helpful comments and guidance. This publication was supported by Centers for Disease Control and Prevention Cooperative Agreement #U1ACCU919192. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of Centers for Disease Control and Prevention. Graphic Design: Christine Wong.