

Accounts of gender diverse university students who abstain from alcohol use

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Gender diverse and transgender people report elevated alcohol use compared with the general population yet no studies have examined motives to abstain or limit alcohol consumption within this vulnerable population. A thematic analysis of interviews with seven gender diverse people identified two overarching themes: Awareness of the safety implications of alcohol and Access to non-drinking spaces. Participants acknowledged that drinking alcohol was a social norm yet were hesitant to drink, especially in public places, due to safety concerns and highlighted a need for non-drinking, LGBTI-friendly spaces. These findings have implications for promoting non-drinking strategies of benefit to gender diverse communities.

Keywords: *Gender diverse; trans; LGBTI; non-drinking; alcohol use.*

Introduction

Along the increased visibility and representation of gender diverse and trans people, a growing body of studies have explored the lived experiences of this heterogeneous group. The terms gender diverse, transgender, non-binary, and queer refer to people whose gender differs from that normatively expected of the sex they were assigned at birth (Bao & Swaab, 2011). Whilst research findings have clearly identified that gender diverse and trans people may experience distress when their gender expression is oppressed, invalidated, or disrespected (Bilodeau, 2007; Dwyer, 2008; Winter et al., 2016), less attention has been paid to some of the potential sequelae of such distress.

One area requiring attention is with regard to the relationship between alcohol use, marginalisation, and poor health and wellbeing. What literature does exist suggests that the high prevalence of alcohol use in gender diverse communities may contribute to the poor health and wellbeing of such communities (Consolacion, Russell & Sue, 2004), and specifically that young people who identify as gender diverse may be more likely to develop unhealthy drinking behaviours (Reavley, Jorm, McCann & Lubman, 2011; Singh, Hays & Watson, 2011). Little research, however, has investigated the motives of gender diverse and trans people who abstain from alcohol use or drink alcohol lightly (Trevor & Boddy, 2013).

In gender diverse communities, motives to consume alcohol may also in part arise from the effects of marginalisation and discrimination. For example, Nuttbrock

and colleagues (2014) found that gender nonconformity and experiences of stigma were associated with substance use in a sample of US trans and gender diverse people. Experiences of stigma, stress and abuse (rooted in experiences of gender identity discrimination) were associated with three to four times higher odds of alcohol use among the sample. Similarly, Garofalo and colleagues (2006) investigated the experiences of 51 US trans women aged between 16 and 25 years old, and found that use of alcohol was highly correlated with experiences of environmental stressors, and challenges to health, wellbeing and overall survival. Environmental stressors included rejection, stigmatisation, social isolation, challenged gender identity, hostile family interactions, and homelessness.

Additionally, data from the largest survey of transgender adults in the United States ($n=4115$) indicated that the rates of engaging in health-harming behaviours, including risk of suicide, drug/ alcohol abuse and smoking were considerably higher among this sample in comparison to the cisgender population (Miller & Grollman, 2015). The results also suggest that gender nonconforming transgender adults experience more types of major and everyday discrimination and, consequently, were more likely to engage in these health-harming behaviours than transgender adults who are gender conforming. In the Australian context, Kerry's (2014) analysis of the experiences of Indigenous sistergirls revealed an extremely high prevalence of risky behaviour and poor mental health correlated with experiences of exclusion. Kerry's analysis also indicates a relationship between prejudice, poverty, social isolation and alcohol abuse.

Research with gender diverse students has also reported that such students experience a heightened risk of alcohol use in comparison to their cisgender and heterosexual peers (Consolacion et al., 2004; Finger, 2010). Research by Finger (2010), for example, indicates that universities often operate on the assumption that gender identity is a binary and static concept. This assumption is contradictory to the lived experiences of gender diverse students, and may potentially result in them feeling distressed or unable to seek help because of this assumption, which may lead to compensatory alcohol consumption (Bilodeau, 2007). Exploring motives to abstain from alcohol use is important in terms of identifying factors that contribute to positive health and behaviour in this marginalised group. As such, this paper reports on an Australian qualitative study that sought to identify how gender diverse people account for their avoidance of high alcohol use. The research questions were: (1) what are the motives to not drink supported by gender diverse Australian university students; and (2) why and how do gender diverse Australian university students come to endorse these motives?

Method

Participants

Participants were gender diverse and trans adults recruited using convenience sampling. The participants were recruited from the first author's networks of people who identify as gender diverse and through snow-ball sampling. The identification as gender diverse was self-defined, as was drinking behaviours. That is, we did not impose an operational definition of abstaining or moderation because we wanted this to be determined by the participants (see Herring et al., 2014).

Initially participants were eligible if they were aged between the ages of 18 and 25; however, the upper age limit was expanded to promote recruitment. As expected, recruitment of gender diverse and trans students who limited or abstained from alcohol use proved very difficult, and the information from the older participants was used to contextualise the themes prevalent in the younger participants. Eight people were interviewed; however, one participant withdrew from the study shortly after their interview. This participant was going through a relationship break-up and reflected that they had potentially shared personal information in the interview that they did not want included in the study. In the final sample of seven, ages ranged from 19 to 36 years and all participants identified across a spectrum of gender identifications (Female=1; Male=1; Non-binary=3; Demigirl=1; Gender-fluid or Genderqueer=1). Throughout this paper, our use of terms is consistent with the participants' gender identities and the terms outlined in the National LGBTI Health Alliance's (n.d.) Inclusive Language Guide.

Materials

A semi-structured interview guide was developed by the authors. The interview guide comprised two sections of open-ended questions; Part A focused on participant experiences regarding alcohol consumption, and part B explored motives for not drinking alcohol. Questions from Part A included: 'Can you describe what your experiences of drinking alcohol have been like?' and 'Is there anything you liked about experiences of drinking alcohol?'. Part B questions explored the participants' social circles, experiences of not drinking, and what they may have liked or disliked about said experiences, factors that may have influenced them not to drink alcohol, as well as exploring the advantages, disadvantages, or consequences encountered when not drinking alcohol, and attitudes they would like others to hold towards alcohol use. Questions from Part B included: 'Has there been anything that has helped you stick to your decision not to drink heavily?' and 'Do you think that there are any disadvantages to not drinking alcohol?'

Procedure

The project was approved by the Curtin University Human Research Ethics Committee. After consulting with university Queer Officers, flyers advertising the research project were posted in Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) and diverse sexuality and gender-friendly spaces in Western Australian universities. Flyers were also posted in LGBTI gender and sexuality diverse spaces including but not limited to the Freedom Centre, and Transmen of WA. Participants contacted researchers through the email address provided on the recruitment flyers. A \$15 shopping voucher was offered to participants to compensate for the time they volunteered in the study; however, they declined the voucher. Gender diverse people who emailed received an electronic copy of an information sheet and were encouraged to ask questions about the study before determining a mutually convenient time to conduct a face to face interview with the first author. Each participant signed a consent form, and consented to an audio recording prior to the interview commencing. The interviews ranged from 45 to 120 minutes ($M=71.71$, $SD=31.61$).

Analytic Approach

Data collection and analysis occurred simultaneously using thematic analysis techniques (Braun & Clarke, 2007). The first author transcribed the interviews and documented the research process through reflexive journaling. Each interview was transcribed verbatim as soon as possible after each interview. Each transcript was read and re-read before coding took place. Once we were familiar with the transcripts, we recorded unique and frequent codes and key themes from the data on the transcript margins. Thematic information was prompted by the research questions; 1) what are the motives to not drink supported by gender diverse Australian university students?; and 2) why and how do gender diverse Australian university students come to endorse these motives?

After coding every transcript, themes that were not relevant to the research question were disregarded, and overarching, meaningful themes were reworded using participant language to create a list of endorsed motives not to drink. Subthemes include why and how participants had come to endorse said motives. The overarching themes and subthemes were illustrated in a thematic map. To protect the participants' identities pseudonyms were used and gender neutral pronouns (e.g. 'their') are used in place of 'he,' 'she,' 'his' and 'her'.

Findings

The analysis indicates that motives endorsed by gender diverse and trans Australian university students comprised two overarching themes: (1) Awareness of the safety implications of alcohol; and (2) Access to non-drinking spaces.

Safety comprised two subthemes: (1) Immediate safety; and (2) Understanding the adverse effects of alcohol. Access to non-drinking spaces also comprised two subthemes: (1) Support networks of likeminded non-drinking people; and (2) Participant age and maturity. The two themes and their subthemes are each explored in turn, with indicative extracts presented and discussed.

Awareness of the safety implications of alcohol

Awareness of the safety implications of alcohol was a strong overarching motive endorsed by participants. Recent research suggests that gender diverse populations are more likely to experience threats of physical violence related to gender expression (Dwyer, 2010; Seelman, 2014a, 2014b). Such threats thus render safety a key concern for many gender diverse people. In regards to the participants' accounts of safety, some reported that alcohol consumption led to feeling a loss of control: 'I don't like [alcohol]. It makes me feel very out of control. And I'm the kind of person that needs to feel very in control of everything' (Frankie). For many participants, this loss of control led to a loss of safety. These students thus exercised control and caution to enhance a feeling of safety prior to drinking, with Charlie's experiences illustrating this point well: 'Most of the time when I've been drinking it's been at mates' places. It's a nice, safe area. I know the people there. I know that they can look after me'.

Immediate safety. Immediate safety refers to how safe an individual feels in regards to their physical environment, peers, their presentation, and wellbeing. Due to the high prevalence of violence towards gender diverse individuals and the various ways alcohol can impact mood, gender diverse and trans people may feel unsafe in situations where alcohol is being consumed frequently or heavily. Charlie illustrates the fear and stress many gender diverse and trans people may experience in spaces that are not specifically trans or gender diverse friendly:

Yeah, so it's like you can't go a week without fearing that, one, things get personal, or two, getting raped or murdered. It makes me extremely cautious about who I'm around and how I behave around people. Whereas a lot of people would be able to get really drunk and not worry about what's going to happen – I don't have that luxury.

In terms of the physical environment and influence of peers, participants described controlling factors, including but not limited to the setting in which they consume alcohol, or the peers with which they were surrounded. This behaviour was clear in Gray's lived experiences; they were motivated to avoid consuming alcohol in an environment they were unfamiliar with or found uncomfortable: 'Close friends. I will drink in a public bar if I have to be there. Socially required and all that. But I avoid it in some way if possible'. Dorian connects feelings of safety with the environments they perceive as the safest to consume alcohol in: 'Just a couple of

friends getting and watching movies together, you know like a Saturday night. And that's in a safe environment where we're all staying over the night'.

Motives provided for avoiding drinking alcohol include the environment in which alcohol may be consumed, and the participants' perceptions of safety within the environment, with safer environments some- times limited to their home or the houses of close friends. Frankie explained that the people present affect their level of alcohol consumption: 'And if there are very intoxicated people around then I tend not to drink as much because I want to be aware of my surroundings.' Elliot reported that trust and familiarity affected how comfortable they felt around peers who were drinking alcohol: 'I don't really go drinking with people that I don't really know yet. I feel like that's a bit of a safety issue. I find it hard to trust people in those kind of environments [pubs and night- clubs]'. Participants frequently reported that they limit their alcohol consumption to environments where close friends are present, in an attempt to reduce the likelihood of experiencing threats or violence, and decrease anxiety or stress.

Understanding the adverse effects of alcohol.

Participants also chose to limit or abstain from alcohol due to the impact it has on an individual's body, mind, emotions, and social interactions. This was often based on witnessing family, friends, or loved ones who engaged in frequent or heavy alcohol use. Participants were motivated to limit or moderate their alcohol use because they perceived the heavy or frequent alcohol use of loved ones as dangerous or irresponsible, and hence a risk to personal safety in terms of wellbeing.

All participants stressed the dangers of alcohol on the brain, body, or mental health, and a consideration of these consequences motivated them to consume responsibly: 'Basically health for starters. 'Cause I know that my hormones have slightly raised my risk of liver problems. That is amplified, all that health stuff. It really makes a difference. And also general safety concerns, and mental health' (Charlie). Dorian reported that their motivation for avoiding alcohol consumption was heavily grounded in how their mental health is affected by alcohol use:

It's also important for maintaining my mental health because I have bipolar and my medication. So having alcohol and bipolar medication is stupid. I work hard to control my moods, and having alcohol doesn't help. It comes back to my health.

The consequences of irresponsible alcohol use and its impact on the body were mentioned by the majority of participants. Ash was motivated to avoid drinking alcohol after researching the negative impact alcohol can have on the body and brain:

The effect it has on the brain, the effect it has on the digestive system, on the liver, on the heart, and the body in general. The, you know, long term effect on people's memory, their sensitivity to anything. For some people, their ability to feel any emotion.

In addition to these physical and mental effects, participants reported that seeing a family member, close friend, or partner use alcohol often or irresponsibly motivated them to not drink alcohol, or encouraged them to monitor the amount of alcohol they consumed and how often they drank. Bailey referred to friends as 'functioning alcoholics' and was motivated not to drink alcohol excessively after seeing how it had impacted their lives socially, emotionally, and financially:

I tend to go out of my way to avoid getting really drunk. I know, and I do know people, who abuse alcohol. And I don't want to end up in that place. I've definitely seen it cost them a lot – you know, friends, and any kind of job, or education.

In all of these examples, personal safety was broadly construed in terms of wellbeing in general, and the potential consequences of high levels of alcohol consumption. As such, these responses differed from the previous subtheme, in that they were focused on longer term potential implications, rather than necessarily immediate threats to safety.

Access to non-drinking spaces

This second theme focuses on the impact of the availability (or not) of non-drinking socialising spaces upon decision making about alcohol consumption. Bailey, for example, reflected on the prevalence of alcohol availability in many spaces welcoming of gender diverse people, and how they found it difficult to think of non-drinking spaces: 'I can't think of any place I've ever been where alcohol is not available, or the first option of something to do'. This point from Bailey echoes one made by all participants, namely that there are not enough LGBTI-friendly spaces in Western Australia that do not serve alcohol. As can be seen in the two subthemes below, the lack of availability of non-drinking spaces meant that participants had to draw on other resources and factors in order to avoid excessive drinking.

Support networks. Participants reported feeling a strong pressure to drink alcohol, and that not drinking behaviour was viewed unfavourably due to the presence of a drinking bias. Participants felt that they were socially excluded if they did not drink alcohol. Gray directly states the tensions they faced when they did not want to drink alcohol, yet at the same time did not want to be socially excluded:

There's a disadvantage as far as social events and things because quite

frankly, all your mates want to go to the bar or the pub or go out to a nightclub and when it's not something you do then you risk being somewhat socially isolated for not drinking.

Frankie also recognised this norm within the LGBTI community:

Often, disapproval from within the queer community is something that I've noticed. Like because there is such a big drinking culture within the queer community. And I'll say I don't want to and people are like – that's cool, just have one drink though.

Despite the push towards alcohol consumption, both within the wider community and gender diverse community, some participants viewed this as positive for their health, as it encouraged them to endorse non-drinking behaviour and seek out non-drinking networks to avoid social groups that drink heavily or frequently. Echoing previous research on gender diverse people's experiences more broadly, then, this subtheme highlights the importance of supportive networks that facilitate and support individual decisions, rather than requiring compliance to broader group norms.

Participant age and maturity. The lived experiences of older participants strengthened the themes from the younger participants. Older participants associated their transition from adolescence or young adult to older adult with feelings of increased self-confidence, maturity and comfort. For example, Dorian connected their experiences of drinking frequently as a young adult to low self-confidence: 'And mostly a lot of [drinking] happened when I was a lot younger. When you weren't confident with yourself, and there wasn't actually much to talk about because there's not many life stories.'

Bailey expanded on this relationship between age and alcohol consumption, suggesting that young adults in the LGBTI community are likely to use alcohol to reduce anxiety: 'Maybe it's a self-medicating anxiety sort of thing, that's like something that exists on a broad scale in the queer community, especially among young people'. By contrast, Gray reported that they were more successful in establishing non-drinking social interactions with their older peers, who were more critical of the expectation of alcohol consumption:

That's one of the reasons I'm thankful that I'm no longer in that twenties zone where that was what all of my friends were wanting to do. Now they actually want to get together and do things that are more casual and the issue of not being in that environment is less problematic – there's a bias but it's not that same level of social isolation.

Similarly, Bailey reported that developing non-drinking networks become easier

with age:

I guess what's influenced me to stick to my decision is just getting older, being able to make new social networks where you don't start with that expectation of like, 'we go out to drink.' So you can meet new people that you don't want to go out to drinking locations with and there's no previous expectation.

For the older participants in the sample, it appeared that they were able to mediate the impact of drinking-oriented social spaces through their affiliation with other older people who similarly acknowledged that drinking expectations could be exclusionary. This subtheme is different to the previous in the sense that, whilst in the previous subtheme support networks were useful for endorsing an individual's decision not to drink in the context of drink-oriented spaces, in this second subtheme older participants felt more able to engage in social spaces where alcohol consumption was not privileged.

Discussion

To date, previous research has not explored the motives endorsed by gender diverse people to not engage in risky or unsafe drinking. The factors that motivated participants to not engage in heavy, frequent, or irresponsible drinking behaviour included feelings of safety linked to the environment they were in and the peers around them, their understanding of the adverse effects of alcohol, the individual's attitude towards alcohol consumption, the presence of non-drinking support networks, the participants' age and maturity, and the availability of non-drinking spaces. Although there is some overlap with motives identified in samples of young people generally (Conroy & de Visser, 2012, 2014, 2015; Herring et al., 2014; Piacentini & Banister, 2009), the heightened awareness of safety concerns in our sample is a point of difference to previous studies. Additionally, previous studies on the role of gender norms have demonstrated an association between masculine culture and drinking behaviours (Conroy & de Visser, 2012; de Visser & McDonnell, 2012). Our findings from a sample of gender diverse and trans young people (i.e. not conforming to cisgender notions or roles of masculinity or femininity) might provide a counterpoint to those studies.

The findings of this research support the findings of the small body of recent literature showing that gender diverse and trans people are likely to experience negative health and wellbeing, and their experiences of adverse health is likely to involve alcohol use (Nuttbrock et al., 2014; Miller & Grollman, 2015). Previous studies have outlined how many transgender students experience a number of negative mental and physical health outcomes (Finger, 2010; Garofalo et al., 2006; Kerry, 2014). The findings of the present study are similar, with participants expressing feelings of anxiety, depression, frustration, and dysphoria, with these

feelings potentially impacting their decision to engage in alcohol use. A disparity, however, is evident with regard to the findings presented in this paper and recent literature. Whilst it is clear that gender diverse and trans university students experience an elevated risk of marginalisation and hence potentially high alcohol use, the participants in this study staunchly avoided alcohol use if they, in any way, felt that it would negatively impact their mental health or result in them feeling physically or mentally unsafe.

Despite the relatively unique nature of the findings reported here, it is nonetheless important to acknowledge the limitations of the study. A key limitation is the small sample size. It proved quite difficult to recruit gender diverse and trans young adults who abstained from alcohol use or self-identified as people who drank less alcohol than their peers and limited their alcohol consumption. Due to the sample size, the association between age and non-drinking is reported tentatively and could be explored in future studies, but we acknowledge that it has appeared in published studies of cisgender young people (Epler, Sher & Piasecki, 2009). Furthermore, the qualitative nature of the study heavily relied on self-reported data, and by extension the honesty of participants, and we did not impose an operational definition of abstaining or moderation because we wanted this to be self-determined by the participants. As such, it will be important that future studies continue to explore motives to abstain from alcohol use or use alcohol in moderation amongst gender diverse populations. Previous research has not explored, for example, how the accessibility of alcohol-free gender diverse friendly spaces influences the alcohol use of gender diverse and trans people. Participants in the present study stressed the need for gender diverse and trans friendly social environments that either prohibit or do not encourage alcohol use. Research has explored policy making interested in reducing alcohol-related harm and reducing strong associations of alcohol use within young adult communities (Adams, McCreanor & Braun, 2008; Pettigrew, Biagiono, Daub, Jones, Chikritzhs & Kirby, 2015). It is possible that LGBTI young adults are more likely to build non-drinking relationships when they are able to access spaces that discourage alcohol consumption, or encourage socialising without the use of alcohol.

In conclusion, this study is the first to explore the rich and subjective lived experiences of gender diverse and trans young adults who limit their alcohol consumption. Exploring motives to abstain from alcohol use is important in terms of identifying factors that contribute to positive health and behaviour in this marginalised group. The study provides a basis upon which future studies could explore positive experiences of resilience or positive health and wellbeing in the gender diverse and trans population, and how these factors promote non-drinking strategies that could be beneficial to vulnerable communities.

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