

UNDERSTANDING AND ADDRESSING ALCOHOL HARM

among Rainbow youth at secondary school

SUMMARY

- A wide range of historical and current contexts shape alcohol use among Rainbow young people, including, New Zealand's wider drinking culture, Rainbow-specific norms around alcohol, the impact of stigma and discrimination, and ability to access inclusive alcohol treatment services
- In 2019, almost one-half of Rainbow students did not drink any alcohol at all and almost one-half of drinkers reported binge drinking at least once in the last month
- In 2012, Rainbow young people reported high levels of harm from their drinking, including injuries and sexual harm (having unsafe sex without a condom and/or having unwanted sex)
- Parents were the most common source of alcohol, followed by friends
- Factors that protected Rainbow young people from high-risk drinking were: high parental monitoring, feeling safe at home, and having a sense of belonging at school
- Factors that increased the likelihood of high-risk drinking were: having had past or present Oranga Tamariki (OT) / Child, Youth and Family Services (CYFS) involvement and reporting previous experience of sexual abuse

WHO ARE RAINBOW YOUNG PEOPLE?

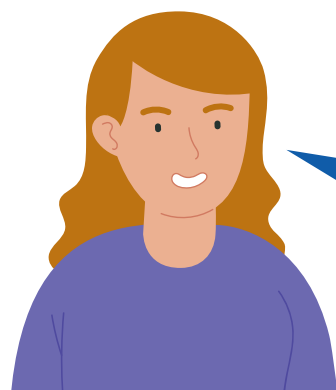
This factsheet uses the term 'Rainbow' as a blanket term for persons who identify as LGBTIQ+ and Takatāpui – meaning Lesbian, Bisexual, Gay, Transgender, Intersex, Queer (or Questioning), and + (the plus indicates that the Rainbow community is diverse and goes well beyond LGBTIQI). Takatāpui is a traditional Māori term meaning 'intimate companion of the same sex.' It has been reclaimed to embrace all Māori who identify with diverse genders, sexualities and sex characteristics.¹

THE YOUTH19 SURVEY

The Youth19 Rangatahi Smart Survey (Youth19) is the fourth health and wellbeing survey in the Youth2000 series, following surveys in 2001, 2007 and 2012. Details about surveys and the research methods behind this factsheet are available in the technical report.²

Rainbow young people in this factsheet include students who identified as transgender or gender diverse or were not sure of their gender, and/or were attracted to the same or multiple sexes, and/or (in 2019 only) described their sexual orientation as bisexual, pansexual, takatāpui, gay or lesbian, or something else that was not heterosexual. In the Youth19 survey, 12% of secondary school students reported being LGBTIQ+ or Takatāpui.

Due to the differences across the Youth2000 surveys in the questions asked around gender diversity, sexual orientation and attraction, trends over time in alcohol use and harm are not reported in this factsheet.



What do you think are the biggest problems for young people today?

“Being accepted and heard by society”

– European female, 14 years, NZDep 5



In 2019, the demographic make-up of Rainbow young people differed from that of non-Rainbow.³ For example, among the Rainbow young people surveyed in 2019, about two-thirds identified as female, compared to about half in the non-Rainbow sample. Interpretation of unadjusted results requires these differences to be taken into consideration.

Furthermore, it is important to note that only young people attending secondary school participated in the surveys. Research shows that Rainbow young people in New Zealand are more likely to leave school early and not go into further education or work.⁴ As such, the findings are not representative of all Rainbow young people in New Zealand, and focuses on young people who have been able to stay connected to education, who may have more supports than young people who have been excluded from these settings.

WHY DOES ADOLESCENT DRINKING MATTER?

For several reasons, young people experience more harm per drink than older age groups.⁵ Drinking alcohol at a young age can cause severe short and long-term harm, such as injuries, depression, suicidality, unwanted sex, and performance at school affected.^{6,7} Some alcohol-related harms, such as negative impacts on brain development, are irreversible.⁸

For these and many other reasons, preventing alcohol harm in Rainbow young people is essential.

THE CONTEXT FOR ALCOHOL USE

To prevent alcohol harm among Rainbow young people, it is crucial to understand the historical and current factors that influence alcohol use. Experience of higher rates of marginalisation, discrimination, structural disadvantage, violence, as well as poorer mental health than their cisheterosexual peers⁹⁻¹³ may result in alcohol being used as a coping mechanism by Rainbow young people. Of further concern, heavy alcohol use can exacerbate poor mental health or mental distress.¹⁴

Alcohol may also be used as a social lubricant, aiding personal courage to mix and socialise with others in the Rainbow community.⁹ The lack of inclusive and alcohol-free settings that provide opportunities for socialising and building community may further enable alcohol use.⁹

It is also recognised that Rainbow young people are diverse and belong to many other communities (e.g. ethnic groups), and so drinking patterns and harm will be influenced by a wide range of factors and settings.

DRINKING PATTERNS IN 2019

The Ministry of Health recommends that children and young people under 18 do not drink alcohol. Those under 15 years of age are at the most significant risk of harm from drinking alcohol, and not drinking in this age group is especially important. If 15 to 17-year-olds drink alcohol, they should be supervised, drink infrequently and at levels below and never exceeding the adult daily limits (no more than 3 drinks per day for males and 2 drinks for females).¹⁵

Non-drinking. Among Rainbow young people, 40% had never used alcohol (more than a few sips). Among non-Rainbow, the prevalence was 46%.

Current drinking. Over one-half (52%) of all Rainbow young people reported currently using alcohol. Among non-Rainbow, the prevalence was 47%.

Regular drinking. Over one-third (36%) of Rainbow young people reported drinking in the past month and 9% reported drinking at least weekly. In comparison, 34% and 9% of non-Rainbow students reported past-month and weekly drinking.

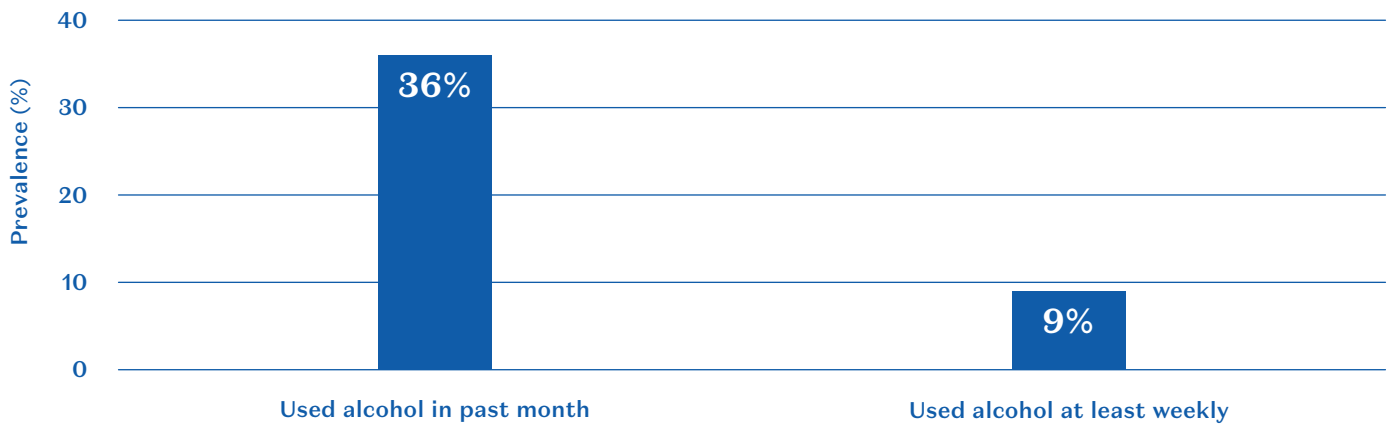
What do you think are the biggest problems for young people today?

“Being accepted as someone from the Rainbow community”

– Pacific female, 15 years, NZDep 4

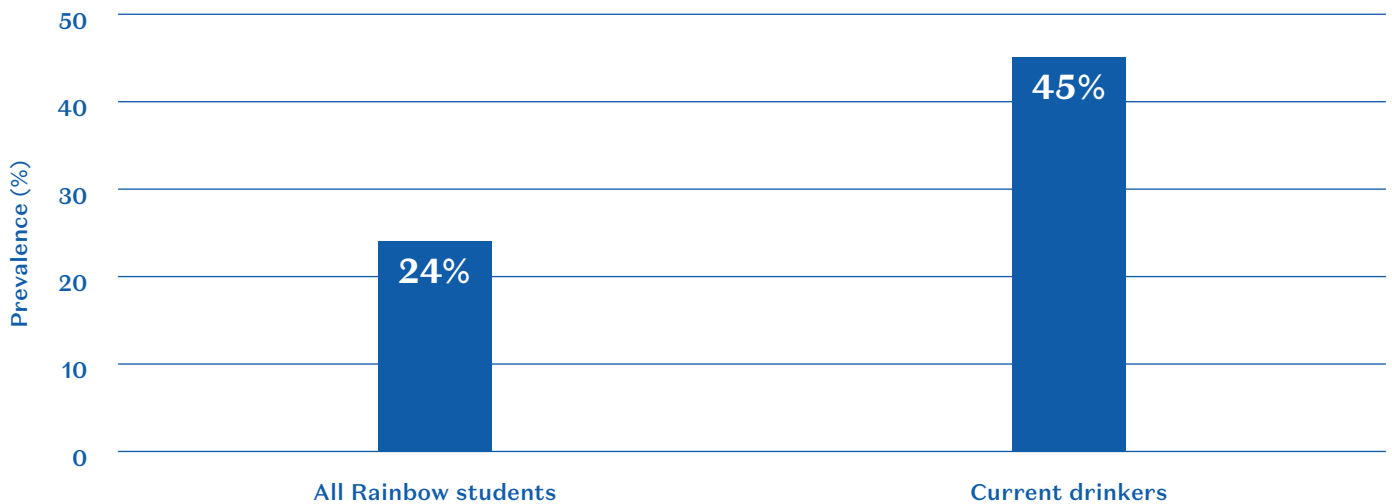


Figure 1. Prevalence of regular alcohol use, Rainbow secondary school students, 2019.



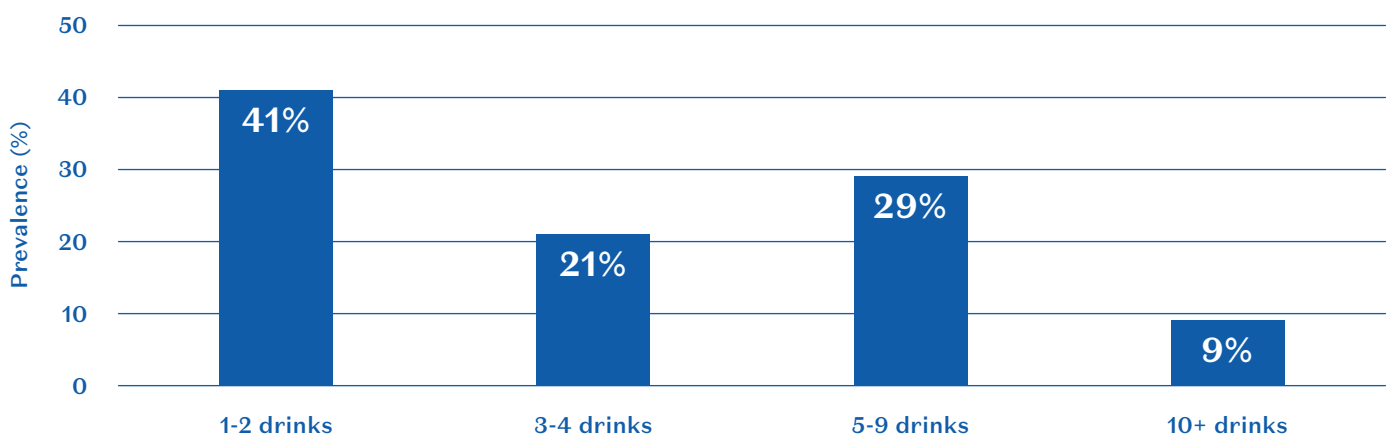
Binge drinking. Having five or more alcoholic drinks in a session was considered binge drinking. Among Rainbow current drinkers, 45% reported binge drinking in the last month. Among non-Rainbow students, the prevalence was 47%. There was no significant difference between Rainbow and non-Rainbow young people in binge drinking prevalence (adjusted for age, ethnicity, deprivation, and assigned male or female at birth).

Figure 2. Past month binge drinking, Rainbow secondary school students, 2019.



Amount of alcohol typically consumed. Many Rainbow drinkers reported consuming one to two drinks in a typical occasion. Almost one in ten (9%) Rainbow drinkers reported typically consuming 10+ drinks in a drinking occasion; significantly lower than the non-Rainbow prevalence among drinkers of 14% (comparison adjusted for age, ethnicity, deprivation and assigned male or female at birth).

Figure 3. Quantity consumed on a typical drinking occasion by current drinkers, 2019.

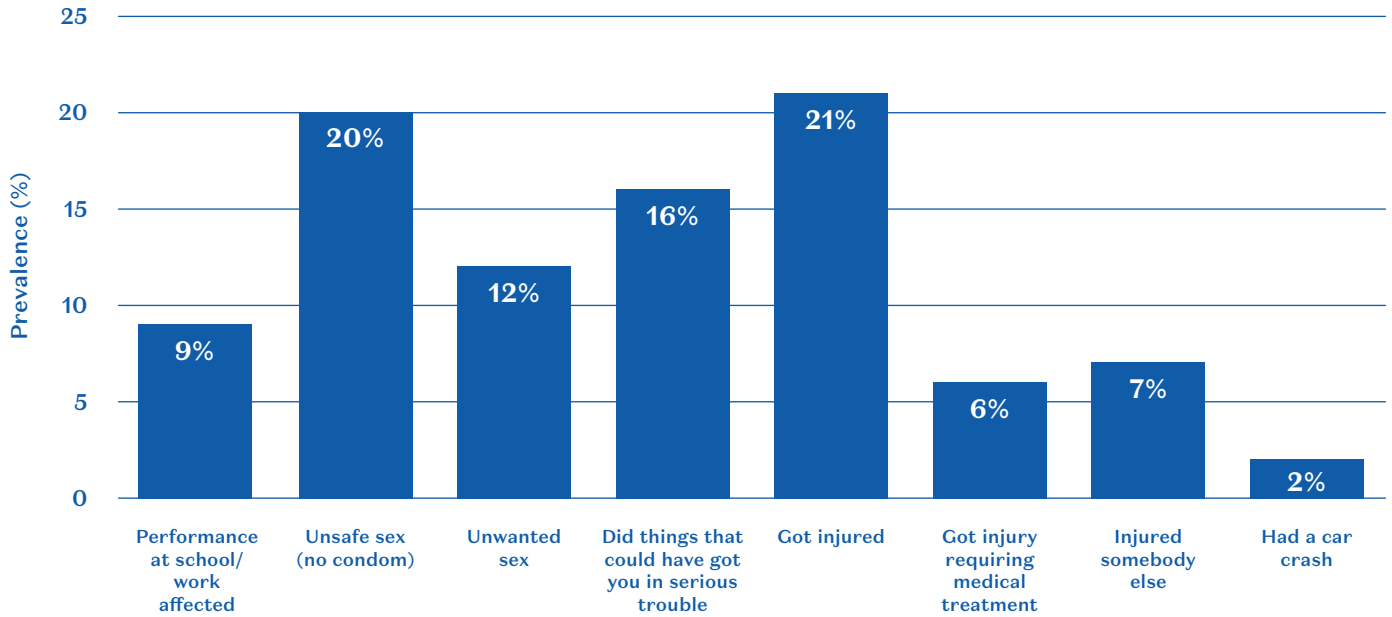


ALCOHOL HARM

Due to changes in the survey, young people were not asked about their experiences of alcohol harm in 2019. Figure 4 presents the findings from 2012.

As Figure 4 shows, the harms most commonly reported from drinking alcohol in 2012 were getting injured (21%), having unsafe sex (sex without a condom) (20%) and doing things that could have gotten them in serious trouble (16%).

Figure 4. Prevalence of self-reported alcohol harm indicators, past 12 months, current drinkers, 2012.



ALCOHOL HARM SCORE

For current drinkers in 2012, an alcohol harm score (range 0-27) was created based on the harm indicators above, plus the response to the question of having “friends or family tell you to cut down your alcohol drinking”. A score of one was given if the harm indicator was experienced more than a year ago, a score of two if the harm had been experienced once or twice in the past year, and three if it had been experienced three or more times in the past year.

Rainbow young people were found to have an average harm score of 2.9. This score was significantly higher than the average harm score among non-Rainbow young people (1.8), and remained higher after adjusting for age, ethnicity, deprivation and assigned male or female at birth. After further taking into account any differences in drinking patterns, harm scores still remained significantly higher among Rainbow than non-Rainbow young people.



What would help young people today?

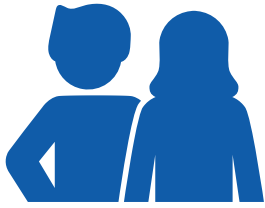
“More LGBT groups and mental health supporters”

– Asian female, 13 years, NZDep 5

SOURCES OF ALCOHOL

In 2019, young people were asked where they usually got alcohol. This analysis was restricted to those aged under 18 years. As shown below, just over half (51%) of Rainbow young people who were current drinkers reported getting alcohol from their parents, and 45% said friends gave them alcohol. These were the most common sources.

Despite being under the legal age to be sold alcohol (i.e. 18 years), 8% of current drinkers reported buying it themselves.



51%

My parents give it to me



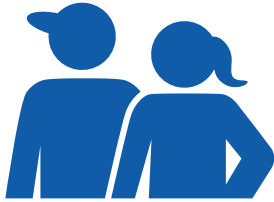
45%

Friends give it to me



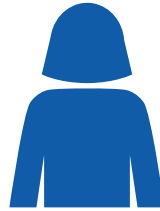
22%

I get someone else to buy it for me



14%

My sibling gives it to me



16%

Another adult I know gives it to me



22%

I get it from home without permission



8%

I buy it myself



4%

None of these



4%

I take or steal it from somewhere else (not home)

* Note students could choose as many sources as were relevant. Hence, percentages add up to over 100%.

How can we reduce alcohol harm to Rainbow students?

“Implementing strong alcohol policies that target the pro-drinking environment will benefit all young people, including Rainbow students”

– Pākehā, Health Promotion Advisor





RISK AND PROTECTIVE FACTORS

Protective factors. Protective factors make it more likely that young people will be non-drinkers or low-risk drinkers rather than high-risk drinkers. The majority of Rainbow young people had a wide range of protective factors in their lives in 2019:

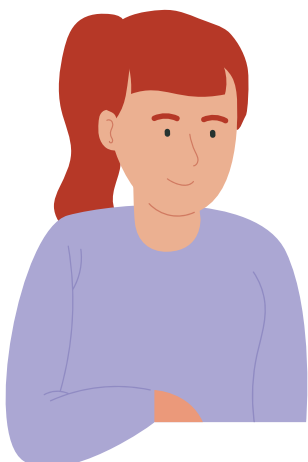
- 87% felt that their family usually or always wants to know where they are and who they are with (non-Rainbow 92%)
- 93% felt that their mum cares about them a lot or some (non-Rainbow 98%)
- 82% felt that their dad cares about them a lot or some (non-Rainbow 92%)
- 56% felt that they get enough quality time with their family (non-Rainbow 74%)
- 83% felt safe at home all or most of the time (non-Rainbow 94%)
- 75% felt the teachers at school cared about them (non-Rainbow 80%)
- 78% felt a sense of belonging at school (non-Rainbow 86%)
- 67% felt their school was supportive of people who are or might be sexuality or gender diverse (non-Rainbow 66%)
- 77% felt that all or most of their school teachers are supportive of people who are sexuality or gender diverse
- 77% felt that all or most of the students at school are supportive of people who are sexuality or gender diverse
- 48% always felt safe in their neighbourhood (non-Rainbow 60%)

The factors most strongly related to non-drinking/low-risk drinking were (in order) high parental monitoring, feeling safe at home, and having a sense of belonging at school. Whilst some of the factors we tested did not turn out to be protective against high-risk drinking (e.g. having close friends), they are likely to bring about other benefits to a young person. As shown in Table 1, young people who lacked the protective factors analysed were more likely to report high-risk or very-high-risk drinking. Only statistically significant factors are shown below.

Table 1: Odds of high-risk or very-high-risk drinking, comparing Rainbow young people with and without protective factor present.

		Odds of high risk or very high-risk drinking*
Family 	Feeling that their family only sometimes or almost never wants to know where they are and who they are with (i.e. low parental monitoring)	2.6
	Not feeling like they get enough quality time with their family	1.4
	Only sometimes, or not at all, feeling safe at home	2.3
School 	Not feeling that their teachers cared about them	1.5
	Not feeling a sense of belonging at school	1.9
	Not feeling their school was supportive of people who are or might be sexuality diverse or gender diverse	1.7
	Not feeling that all or most of the students at school are supportive of people who are sexuality or gender diverse	1.7

*Models are adjusted for age, ethnicity, deprivation, and assigned male or female at birth.



What would help young people today?

“Make schools a safe space for queer youth and have a strict no bullying policy”

– European female, 14 years, NZDep 5

Risk factors. Risk factors are things that make it more likely that young people will be high-risk drinkers rather than non-drinkers/low-risk drinkers. A substantial minority of Rainbow young people experienced risk factors:

- 11% witnessed and/or had witnessed family violence towards another child in the past 12 months (non-Rainbow 7%)
- 12% witnessed and/or had experienced family violence themselves in the past 12 months (non-Rainbow 10%)
- 8% witnessed and/or had witnessed family violence towards an adult in the past 12 months (non-Rainbow 6%)
- 13% had past or present CYFS/OT involvement (non-Rainbow 8%)
- 34% reported experience of sexual abuse (non-Rainbow 16%)
- 36% reported characteristics of housing deprivation (non-Rainbow 27%)
- 15% reported being bullied at school because they were lesbian, gay, bisexual or gender diverse, or because people thought they were.

Two of these factors were significantly associated with high-risk drinking patterns. Compared to Rainbow students who did not have these risk factors, the odds of having a high/very high-risk drinking pattern (after adjusting for age, ethnicity, deprivation, and assigned male or female at birth) were:

- had past or present CYFS/OT involvement (2.2 times higher odds); and
- reported experience of sexual abuse (2.1 times higher odds).

CONCLUSION

In 2019, the prevalence of binge drinking was similar between Rainbow and non-Rainbow secondary school students. Alcohol harm data from 2012 showed that Rainbow young people experienced high levels of harm, particularly sexual harm, from their drinking. The finding that Rainbow young people experienced more harm from their drinking than non-Rainbow youth (at similar levels of use) requires further research to understand why.

The family environment, especially parental monitoring and feeling safe at home, as well as a sense of belonging at school, provided a supportive environment against high-risk drinking. In contrast, involvement with CYFS/OT and experience of sexual abuse increased the odds of high-risk drinking.

WHAT DO THESE FINDINGS MEAN FOR ACTION?

Whilst the majority of Rainbow young people reported a caring and supportive home and school environment, the absence of these protective factors was linked to a greater likelihood of having a high-risk drinking pattern. These findings may point to the impact of cisheteronormativity in home/school settings on alcohol use by Rainbow young people, and signals the need for further studies to understand the role of these important contexts on drinking outcomes.

The prevalence of sexual harm from drinking is very concerning. Partner violence, as well as homophobic/transphobic attacks – including sexual assault – against sexuality and gender diverse people in New Zealand have been documented.¹⁶ The findings in this survey (e.g. low levels of feeling safe in the neighbourhood and high levels of sexual abuse and unwanted sex among Rainbow youth) may reflect such homophobic/transphobic violence. At a school-level, the findings highlight the on-going need for sex education that is inclusive of sexuality and gender diversity.¹⁷

Whilst Rainbow-specific norms around drinking play an important role in drinking patterns and harm, alcohol use is also heavily influenced by the wider drinking culture in New Zealand. As such, alcohol policies that are effective and equity-promoting for the overall student population are also likely to be effective for Rainbow young people. These include:

- restricting alcohol marketing – the more alcohol advertising a young person is exposed to, the greater the likelihood they will start drinking earlier and drink more heavily.^{18,19;}
- increasing the price of alcohol products – young heavy drinkers are more likely to buy cheap alcohol²⁰ and the low price of alcohol is strongly related to alcohol harm^{21;} and
- Reducing the number of alcohol outlets – the greater the number of alcohol outlets in communities, the more likely a young person will drink larger quantities of alcohol in a drinking occasion.²²
- To prevent further harm among Rainbow student drinkers, health and alcohol treatment services as well as health promotion programmes need to ensure they are designed and delivered appropriately to meet the needs of Rainbow young people.⁹ Increasing the availability of alcohol-free socialising spaces, where appropriate mental health supports and violence prevention services are also accessible, is also important. More broadly, efforts to counter transphobia and homophobia and address the disadvantages faced by Rainbow young people are needed.

ACKNOWLEDGEMENTS

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