

NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

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Title

Multiple-Minority Stress and Polysubstance Abuse in a BIPOC TGNC Pilot Study

Priority 1 (Research Category)

Population health and epidemiology

Presenters

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Abstract

CONTEXT: Minority stress theory posits that individuals belonging to stigmatized minority groups experience increased levels of proximal and distal stressors that can lead to negative physical and behavioral health outcomes, including higher odds of substance abuse. This pilot study aims to analyze the compounding effect of multiple-minority stress on Polysubstance Abuse in the BIPOC Sexual and Gender Minority community. OBJECTIVE: Analyze the prevalence of substance and polysubstance use and abuse in this community. STUDY DESIGN: Cross-sectional survey. SETTING: Self-administered online survey. POPULATION: Eligible participants were adults living in the United States who identify as both racial minorities and transgender or gender non-conforming. INSTRUMENT: Demographics collected include age, race, ethnicity, educational attainment, income, religious identity, relationship status, sex assigned at birth, and current gender identity. Additional measures included level of transition, history with HRT, proximal and distal stressors, family and social support, current and past alcohol use, and previous year recreational drug use. OUTCOME MEASURES: AUDIT-C scores and endorsement of previous-year recreational drug use. RESULTS: The 149 respondents had a mean age of 27.19 years (SD = 5.31). 86.4% were Black and 12.2% were Hispanic or Latinx. 59.5% were Assigned Male at Birth compared to 39.2% Female. 28.9% had ever received Hormone Replacement Therapy, 73.8% of which was current. Mean AUDIT-C score was 4.09 (SD=2.51) with 46.5% scoring in the moderate risk drinker range and 25.6% in the high or severe risk range. Previous year recreational drug use ranged from a high of 25.4% (Uppers/Stimulants) to a low of 14.6% (Cocaine/Crack). 50.5% of respondents had used at least one recreational drug in the previous year. 84% of respondents have at least one substance use risk, with a mean of 1.81 positive substance abuse endorsements (SD=1.61). 40% had multiple substance abuse endorsements. CONCLUSIONS: The above findings highlight the heightened substance use risk that BIPOC transgender adults face, in-line with previous findings of high rates of polysubstance use and hazardous alcohol use. Our findings suggest that providers should assess for polysubstance risk inclusive

of alcohol when working with BIPOC TGNC adults. The heightened risk of substance abuse in our sample will be further explored by relationships with distal and proximal stressors and protective factors.

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