

Binge drinking and internalised sexual stigma among Italian lesbian, gay and bisexual young adults

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ABSTRACT

BACKGROUND – Literature has studied the relation between youth alcohol consumption and sexual orientation, showing that lesbian, gay and bisexual (LGB) young people are at increased risk to develop alcohol-related problems compared to heterosexuals. **AIM** – Our study aims to describe alcohol use patterns in relation to alcohol expectancies, internalised sexual stigma and sensation seeking and to highlight the specific risk factors that sexual minority subgroups face. **DESIGN** – A survey was administered in order to examine drinking habits, background information and levels of internalised sexual stigma and of sensation seeking in 468 LGB youths. According to the alcohol consumption, the sample was divided into three groups: social, binge and heavy drinkers. **RESULTS** – Data showed that bisexual youths were at most risk of heavy drinking compared to lesbian and gay participants. Moreover, LGB heavy drinkers reported higher levels of sensation seeking, earlier age of first alcohol consumption and more positive drinking expectancies compared to binge and social drinkers. Bisexual male heavy drinkers also showed more social confidence alcohol expectancies while bisexual female heavy drinkers showed more sensation seeking. **CONCLUSION** – Bisexual youths are at most risk of alcohol abuse. It is conceivable that these findings are related to the peculiar discrimination to which bisexual people are subject. Practical implications for the present study are discussed.

KEYWORDS – alcohol, binge drinking, lesbian people, gay men, bisexual people, sexual stigma

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Introduction

Several studies have explored the relation between alcohol consumption and sexual orientation (Baiocco, D'Alessio, & Laghi, 2010; Lea, Reynolds, & de Wit, 2012; Newcomb, Heinz, & Mustanski, 2012; Sarchiapone et al., 2014). Results have shown that lesbian, gay and bisexual (LGB) young people are at increased risk to develop alcohol-related problems compared to heterosexual people due to psychological and social stressors. These include high levels of internalised sexual stigma, which refers to the sexual minorities' personal accept-

ance of negative stereotypes about non-heterosexual identities (Baiocco et al., 2014a; Baiocco et al., 2010; Lingiardi et al., 2015; Willoughby, 2009); lack of family and peer support (Ryan, Huebner, Diaz, & Sanchez, 2009; Walker, Kribs, Christopher, Shewach, & Wieth, 2014; Willoughby, 2009); and isolation and victimisation (Baiocco et al., 2014b; Willoughby, 2009). To cope with these negative states and to avoid social distress, LGB individuals may turn to maladaptive behaviours such as alcohol abuse, with negative consequences (Eisen-

berg & Wechsler, 2003; Kashubeck-West & Szymanski, 2008; Newcomb et al., 2009).

As negative attitudes toward bisexual people are often more widespread than those toward lesbians and gay men (Eliason, 1997), it is conceivable that the impact and the internalisation of widespread bi-negativity and the potential lack of support from the lesbian and gay community that often stigmatises bisexual identities (Mohr & Daly, 2010) could encourage bisexual people to embrace risk behaviours to a greater extent compared to lesbian and gay people (D'Augelli, Grossman, & Starks, 2005).

However, while researchers have found differences in drinking habits based on sexual orientation when comparing heterosexuals to LGB people (Drabble, Midanik, & Trocki, 2005), not many studies have compared LGB subgroups and investigated gender differences among LGB people as such (Amadio, Adam, & Buletza, 2008; Wong, Kipke, & Weiss, 2008).

Further, few studies (Kashubeck-West & Szymanski, 2008) have investigated the role of sensation seeking (a personality trait defined by the search for novel, intense experiences and feelings, and the willingness to take risks) and expectations related to alcohol consumption (e.g. the sexually enhancing effect of substance use) in predicting alcohol-related problems among LGB youths.

Our research seeks to describe alcohol use patterns of LGB youths in Italy, a cultural context where minority sexual stigma in the population is widespread and where LGB adolescents and young adults are at most risk for social exclusion, bullying and family rejection (Baiocco et al., 2014c; Lingiardi et al., 2015; Salvati, Io-

verno, Giacomantonio, & Baiocco, 2016). It is also worth considering that alcohol consumption is a culturally based habit in Italy, and people start drinking at a young age (Ahlström & Österberg, 2004; Beccaria & Prina, 2015).

For the present research, we proposed the following hypotheses: we expected higher percentages of social, binge and heavy drinkers among bisexual youths compared to lesbian and gay youths (Hypothesis 1); we expected that the alcohol consumption in LGB youths is related to a series of risk factors (Hypothesis 2) such as higher levels of internalised sexual stigma (Hypothesis 2.1), higher levels of sensation seeking (Hypothesis 2.2), higher number of drinking friends (Hypothesis 2.3), earlier age of alcohol consumption (Hypothesis 3.4), positive expectations of alcohol effects (Hypothesis 2.4) and not living with parents (Hypothesis 2.5). Finally, we expected that bisexual heavy drinkers would differ on expectancies related to alcohol consumption and sensation seeking (Hypothesis 3).

Methods

Participants and procedures

We administered a survey to 228 gay (48.7%), 181 lesbian (38.7%), 33 bisexual female (7.1%) and 26 bisexual male (5.6%) youths in order to gather information about their attitudes towards alcohol consumption. Mean age in the sample was 20.30 (SD= 2.87). People were eligible to participate in the study if they reported: a) 18–30 age range; b) gay, lesbian or bisexual identity c) Italian citizenship. Participants were recruited from LGB associations and college student organisations in Rome (Italy). Participation in the study was voluntary and anonymous. The

Table 1. Participants' characteristics.

	Lesbians N=181	Gays N=228	Bisexual females N=33	Bisexual males N=26
Age N(DS)	18.66 (.79)	22.01 (3.18)	18.45 (1.48)	18.80 (.86)
Social drinkers N (%)	86 (47.5%)	103 (45.2%)	10 (30.3%)	8 (30.8%)
Binge drinkers N (%)	62 (34.3%)	79 (34.6%)	10 (30.3%)	7 (26.9%)
Heavy drinkers N (%)	33 (18.2%)	46 (20.2%)	13 (39.4%)	11 (42.3%)

study was reviewed and approved by the Ethical Commission of the Department of Developmental and Social Psychology of Sapienza University of Rome.

Measurements

Participants filled out a background information questionnaire in order to provide demographic information. The Kinsey Scale (Kinsey, Pomeroy, Martin, & others, 1948) was used to measure the sexual orientation.

Drinking habits were assessed using an ad hoc questionnaire examining expectancies regarding the use of alcohol, age at first alcohol intoxication and number of drinking friends. Based on the information provided, the respondents were categorised as “binge drinkers” (at least one but fewer than or equal to 8 drinking intoxicating episodes in a month), “social drinkers” (drinking between three/four times a year and three/four times per month) and “heavy drinkers” (more than eight episodes of alcohol intoxication per month) (Baiocco et al., 2010; Vik, Tate, & Carrello, 2000).

Internalised sexual stigma for LGB people was estimated using an adapted short version of MISS-LG (Lingiardi, Baiocco, & Nardelli, 2012), which assesses negative attitudes held by homosexual and bisexu-

al persons on their sexual identity. Higher scores indicated greater internalised sexual stigma. The adapted version of the scale indicated a good internal consistency.

Finally, The Sensation Seeking Scale (Hoyle, Stephenson, Palmgreen, Lorch, & Donohew, 2002) was used to assess sensation seeking.

Pearson correlation coefficients were calculated to assess the relation between the variables.

Chi square analysis and univariate analysis of variance (ANOVA) were used to assess differences between drinking groups, while post hoc analyses following ANOVAs were carried out with a Duncan's test to detect group differences.

Results

Hypothesis 1 predicted that bisexual participants would show higher levels of social drinking, binge drinking and heavy drinking. According to our results, drinking groups (social, binge and heavy) differ on sexual orientation [$\chi^2(6) = 14.46$, $p < .05$]. Lesbian females (47.5%) and gay males (45.2%) were more likely to be classified as social drinkers while bisexual females (39.4%) and bisexual males (42.3%) were more likely to be classified as heavy drinkers (see Table 1). Descriptive data have been reported in Table 1.

Table 2. Correlations between questionnaire scores and variables used in the study.

Variables	1	2	3	4	5	6
1. SS Scale	-	-.075	-.067	-.087	.297**	.091*
2. Age at first alcohol consumption outside the home		-	.975**	.928**	-.078	-.102*
3. Age at starting to drink regularly			-	.957**	-.074	-.109*
4. Age at first alcohol intoxication				-	-.058	-.103*
5. N. drinking friends					-	.187**
6. MISS						-

** . Correlation is significant at the 0.01 level

* . Correlation is significant at the 0.05 level

Hypothesis 2 predicted that consuming alcohol and getting drunk would be associated with higher levels of internalised sexual stigma (Hypothesis 2.1), higher levels of sensation seeking (Hypothesis 2.2), higher number of drinking friends (Hypothesis 2.3), earlier age of alcohol consumption (Hypothesis 2.4), positive expectations on alcohol effects (Hypothesis 2.5) and not living with parents (Hypothesis 2.6).

Results from Pearson's correlation analysis showed that the age of first consumption of alcohol outside home, the age of beginning regular drinking and the age of first alcohol intoxication were negatively correlated to higher levels of internalised sexual stigma, in line with previous evidence (Amadio, 2006; Ortiz-Hernández, Tello, & Valdés, 2009; Dermody, Marhal, Cheong & others, 2014) the results of the research have been mixed. The purpose of the current study was to examine internalized heterosexism in relation to alcohol use and alcohol-related problems among a sample of 335 lesbians and gay men recruited through lesbian and gay events, listerves, and friendship networks. Females completed the Lesbian Internalized Homophobia Scale [Szymanski, D. M., & Chung, Y. B. (2001. It should be noted that higher scores

in Sensation Seeking questionnaire were positively related to the number of drinking friends and to higher scores of internalised sexual stigma. Table 2 shows the correlations between questionnaire scores and variables used in the study.

Contrary to our expectations, no significant differences were found on internalised sexual stigma among drinking groups, $F_{(2,468)} = .72; p = .805$. On the contrary, drinking groups differed on Sensation Seeking Scale scores, $F_{(2,468)} = 48.82; p < .01$; number of drinking friends, $F_{(2,468)} = 6.52; p < .01$; and age at first alcohol intoxication, $F_{(2,468)} = 4.34; p < .05$. The groups differed also on expectations about the effects of alcohol on lowering inhibition, $F_{(2,468)} = 7.49; p < .001$, and gaining social confidence, $F_{(2,468)} = 4.15; p < .05$. ANOVA results are shown in Table 3. Post hoc analyses revealed that heavy drinkers showed higher scores on the Sensation Seeking Scale (Hypothesis 2.2), higher number of drinking friends (Hypothesis 2.3), an earlier age of alcohol consumption (Hypothesis 2.4) and higher positive expectancies from alcohol consumption (inhibition and social confidence) (Hypothesis 2.5), compared to social and binge drinkers. Social drinkers showed significantly lower scores ($M = 31.70; SD = 7.52$) on the Sensation

Table 3. Differences among drinking groups on the key variables used in the study.

	Binge drinkers N=158	Social drinkers N=207	Heavy drinkers N=103	F/ χ^2
Sensation Seeking Scale	36.02(7.71)a	31.69(7.52)b	40.50(7.28)c	48.82*
MISS-LG	2.02(.74)	2.06(.86)	2.11(.73)	.72
Number of drinking friends	4.36(1.54)a	4.27(1.38)a	4.90(1.58)b	6.52*
Early alcohol experiences				
Age at first alcohol consumption outside the home	13.18(2.48)	12.91(2.39)	12.62(2.45)	1.90
Age at starting to drink regularly	14.37(2.37)	14.67(2.57)	13.99(2.46)	2.66
Age at first alcohol intoxication	15.30(2.47)a/b	15.57(2.60)a	14.66(2.49)b	4.34*
Expectancies				
Disinhibition	10.72(4.92)a/b	9.54(4.67)a	11.74(5.13)b	7.49*
Relief from pain	7.29(2.74)	7.04(2.80)	7.22(2.75)	.907
Social confidence	3.78(2.09)a/b	3.28(1.87)a	3.90(2.36)b	4.15*
Not living with parents	84.2%	73.9%	85.4%	8.39*

Note: * $p < .05$ Standard deviations are in parenthesis. Means having the same subscript are not significantly different at $p < .05$ using Duncan post hoc comparison.

Seeking Scale compared to binge drinkers ($M = 36.02$; $SD = 7.71$) and heavy drinkers ($M = 40.50$, $SD = 7.29$), in line with other studies (Wong et al., 2008) ethnically diverse sample of young men who have sex with men (YMSM).

Finally, according to our hypotheses (Hypothesis 2.6), youths not living in their parental home [$\chi^2 (2) = 8.39$, $p < .05$] were more likely to be classified as heavy drinkers (85.4% living on their own vs. 14.7% living with family) and binge drinkers (84.2% living on their own vs. 15.8% living with family).

Hypothesis 3 predicted that bisexual heavy drinkers would differ on expectancies related to alcohol consumption and sensation seeking compared to gay and lesbian heavy drinkers.

Consistently with our expectations, homosexual and bisexual heavy drinkers dif-

ferred on the expectancy for social facilitation from drinking, $F_{(3,103)} = 2.84$; $p < .05$, and on the Sensation Seeking Scale scores, $F_{(3,103)} = 8.17$; $p < .01$. Post hoc analyses showed that bisexual males ($M = 5.27$; $SD = 2.00$) had significantly higher scores on expectancies to gain social confidence than bisexual females ($M = 2.53$; $SD = 1.13$), gay males ($M = 3.90$; $SD = 2.42$) and lesbians ($M = 4.00$; $SD = 2.52$). In addition, bisexual females showed higher scores on the Sensation Seeking Scale ($M = 47.84$; $SD = 7.33$) than bisexual males ($M = 42.54$; $SD = 4.74$) and gay males ($M = 40.19$; $SD = 6.41$) and females ($M = 37.36$; $SD = 7.1$).

Discussion and conclusion

This paper seeks to describe drinking habits in young LGB people and the main predictive factors related to their alcohol consumption.

Our results show that there is a difference in drinking habits according to sexual orientation. Bisexuals, in our sample, are more likely to be heavy drinkers than are lesbian and gay people. One possible explanation for this difference is that bisexual people often experience discrimination that is significantly different from gay men and lesbians. According to some studies, homonegativity and binegativity are two different phenomena (Herek, 2002; Worthen, 2013), and bisexual individuals face unique stigma associated with their sexual orientation (Petruccioli, Baiocco, Ioverno, Pistella, & D'Urso, 2015; Roberts, Horne, & Hoyt, 2015; Smalley, Warren, & Barefoot, 2015; Wandrey, Mosack, & Moore, 2015; Yost & Thomas, 2012). The most common stereotypes about bisexuality suggest that it is just a phase and that bisexuals are gay or lesbian people who are confused about their sexuality or lack the courage to come out (Eliason, 1997; 2001). A second common stereotype defines bisexual people as promiscuous, unable to commit to any single person and involved in multiple relationships at a time (Eliason, 2001). Moreover, negative attitudes toward bisexuals are more prevalent than negative attitudes toward lesbian and gay people (Eliason, 1997), and binegativity is even rooted in the gay and lesbian community (Mohr & Daly, 2010).

Notably, while internalised sexual stigma was not associated with heavy drinking, it is correlated to earlier age of consumption. As LGB adolescents are at most risk of discrimination and victimisation, it is conceivable that drinking can be used as a coping strategy to face the sexual identity-related stressors at an earlier age.

The positive expectancies related to the

effects of alcohol, such as social confidence and the consequent reduction of social anxiety, have been found among the main risk factors linked to excessive consumption of alcohol in LGB youth. These results are in line with other studies, suggesting that one of the main reasons for drinking is to *ingest* liquid courage to avoid social anxiety, especially during adolescence (Gilles, Turk, & Fresco, 2006; Laghi, Baiocco, Liga, & Baumgartner, 2014) and to attenuate the severity of youths' sexual identity-related distress (Wong et al., 2008). Another risk factor is the sensation-seeking attitude. As other scholars have found, this is associated with greater expectations about the sexually enhancing effects of substances (Hughes et al., 2010; Kashubeck-West & Szymanski, 2008) the mediating relations of substance use factors (expectations about the sexually enhancing effects of substance use and substance use during sex, especially for lesbian and bisexual girls (Ziyadeh et al., 2007).

Community programmes and health professionals should take into consideration several factors when addressing the specific needs of lesbian, gay and bisexual youths. Prevention programmes need to address the relevance of individual LGB attitudes and the discriminative environmental variables that can encourage alcohol abuse, with a focus on the concrete risks related to alcohol intoxication. Moreover, public health professionals and health practitioners should pay particular attention to the factors highlighted in our study when tackling drinking problems among LGB youths such as the internalised sexual stigma and the level of stigmatisation on grounds of sexual identity.

Limitations

Despite the relevance of the results, our paper suffers from some limitations. First, the bisexual sample size is relatively small, compared to the lesbian and gay ones. Although a large number of studies have focused on the analysis of LG youths' and young adults' psychological and emotional vulnerabilities, very few studies have had as their main subject bisexual individuals, who, in our findings, appear to be the most at-risk group. Future studies should investigate further the relation between bisexual identity and behavioural and psychological variables. Also, due to the nature of the research, it was not easy to engage young LGB people in the study, which is why we used a convenient sample. Future research should involve also participants who are not members of established associations and organisations. Third, we did not investigate psychological and emotional variables connected to at-risk behaviours, such as loneliness, depression or guilt, which could help to describe the relationship between internalised sexual stigma and alcohol consumption. Finally, the research took place in the city of Rome, which gathers a large number of LGB associations. Future studies should include participants from dif-

ferent cultural settings, such as smaller cities in southern or northern Italy.

Declaration of Interest None

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