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The Application of Social Learning Theory To Understanding Smoking Behavior Among LGBTQ Individuals

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Keywords: LGBTQ Smoking Behavior, Social Learning Theory, sexual orientation, tobacco.

Abstract: This study sought to understand the disproportionately higher smoking rates among LGBTQ individuals by employing social learning theory as a tool to analyze the findings from four focus groups conducted among this population in one metro area. The findings indicate that LGBTQ individuals often start smoking after “coming out” in direct response to social stresses and gay culture which seems to be supportive of smoking behavior.

Introduction

The literature in adult education has rarely addressed how and why LGBTQ (Lesbian, Gay, Bisexual, Transgendered, & Queer) individuals learn to smoke at such an alarmingly high rate. In data reported by the U.S. Centers for Disease Control and Prevention’s Office on Smoking and Health and the University of California at San Francisco, rates of smoking among LGBTQ youth ranged from 38% to 59%, compared to a prevalence rate among the total youth population ranging from 28% to 35%. Some studies even show the smoking rates for LGBTQ youth to be much higher (Rosario & Schrimshaw, 2010). Adult LGBTQ smoking rates ranged as high as 50% according to some studies, compared to 28% among the general population of adults (Ryan, Wortley, Easton, Pederson, & Greenwood, 2001). Why are LGBTQ smoking rates so high in comparison to the general population? The research literature does not offer exact reasons for this phenomenon. The high rates of tobacco use should make LGBTQ populations a priority for smoking cessation programs and funding, but this has not happened historically. The research literature reveals that the tobacco industry targets the LGBTQ community while holding lesbians and gays in contempt (Washington, 2002). An in depth understanding of the higher smoking rates will require the same levels of extensive research and attention to LGBTQ populations as have been devoted to other populations. We propose starting by examining how smoking behavior is learned and modeled in the LGBTQ community.

Methodology

This paper utilizes social learning theory as a lens to understand smoking behavior in the LGBTQ community. Specifically, we employ the social learning theory proposed by Alan Bandura (1977). This theory has arguably become an influential theory of learning and development. Bandura (1977) believed that direct reinforcement could not account for all types of learning. His theory added a social element. In his

theory people can learn new behaviors by watching others. Known as observational learning (or modeling), this type of learning can be used to explain a wide variety of behaviors. Social learning theory “admits that birds of a feather do flock together, but it also admits that if the birds are humans, they also will influence one another’s behavior, in both conforming and deviant directions” (Akers, 1991, p. 210).

The data used in this paper resulted from a research project that the authors conducted in conjunction with the Atlanta Lesbian Health Initiative, entitled “Assessment for a Better Understanding of Tobacco Use by LGBTQ Metro-Atlantans.”

The research effort was funded by the Dekalb County, Georgia Board of Health. Focus groups were conducted with LGBTQ individuals living in the metropolitan Atlanta area. Participants were recruited via an advertisement campaign (using flyers & posters) which targeted LGBTQ community based organizations (CBOs). The flyers and posters made it clear that participants must self-identify as LGBTQ. The participants were given a \$25 stipend after participation in the focus groups.

During the month October, 2010, four focus group sessions were conducted comprised of different LGBTQ individuals. A focus group was conducted with LGBTQ individuals who identified as former smokers, another one was conducted with LGBTQ individuals who identified as non-smokers, and two focus groups were conducted with LGBTQ individuals who identified as current smokers. Two sessions were held for current smokers because the research team was particularly interested in analyzing the factors which support the continuation of smoking in the LGBTQ community. The chart below summarizes the makeup of each of the focus groups. The group leader for each focus group was responsible for facilitating discussion and capturing the data. The group leader followed a focus group guide in order to make sure that each group was asked the same questions. An additional person was utilized to observe and document group dynamics as well as non-verbal interactions. The focus groups discussions were audio recorded and later transcribed verbatim. Additionally, the group leader used a flip chart to capture the essence of the group’s discussion and kept field notes. The research team analyzed and coded the transcripts until common themes emerged across all of the focus groups.

Focus Group	Black Gay Males	White Gay Males	Black Lesbians	White Lesbians	Transgendered
Former Smokers (10)	3	2	2	2	1 (White/M2F)
Current Smokers (8)	4	2	–	1	1 (Black/M2F)
Current Smokers (8)	1	4	–	3	–
Non Smokers (10)	3	2	1	4	–

The participants were asked a number of questions as a part of the larger study. These questions included:

1. How aware do you think the LGBTQ communities are about our own smoking disparity?
2. How do you think LGBTQ people learn to smoke?
3. What do you think can be done to help activate the LGBTQ communities to fight

against tobacco use?

Findings

After analysis of the data using social learning theory, the following findings emerged: Most of the participants across all of the focus groups were unaware of the disparity between the rate of smoking in the LGBTQ community and the larger society. Many expressed “shock.” However, the current smokers were somewhat more reserved in their reaction. One current smoker noted that “I’m surprised . . . but at the same time you know I think there’s other things more important.” Another current smoker noted that “I’m really not surprised at all.” Another one noted that he wasn’t “surprised” “because I think it is a way for youth to band together . . . when they are dealing with . . . sexuality.” Among non-smokers, one participant noted “I find it very surprising . . . this is total news to me.” Other non-smokers had a similar reaction. The former smokers seemed to have the greatest degree of awareness. One noted “it doesn’t really surprise me. Most of the former smokers offered explanations for why they had smoked rather than to express surprise or shock. Current smokers noted that they’d grown up with “a lot of peer pressure.” One participant noted that the commercials were influential. Another participant noted that she did not start smoking until she was 21 years old and started to go to “bars and everybody was smoking you know.” Several other current smokers made note of the images projected in advertisements that made smoking look “cool.” Others noted that they associated smoking with rebellion and as such it was consistent with their lifestyles. A consistent response throughout all groups was that smoking is a part of the LGBTQ culture and as such “there’s a lot more tolerance for smokers in our community just because everyone is used to being around it.” Several of the current smokers noted that their parents smoked or that they had family members who smoked while growing up. One participant noted that he had come from a family of smokers. Surprisingly many associated smoking with freedom. One participant noted that he did not start smoking until he “came out” and “started going to gay clubs.” Thus, for this group, smoking was associated with gay identity, fitting in and relating to peers. The Former smokers also noted that they had seen smoking behavior modeled as kids – many of their parents and family members also smoked. However, again for many in this group it was the peer pressure after coming out that made many of them start smoking. After coming out, one participant noted that smoking “represents rebellion.” Others in this group agreed. This group also agreed that the gay bar culture encouraged them to smoke. They started smoking in order “to fit in with” friends and to be “cool.” The Former smoker’s decision to quit was typically fueled by having watched a loved one die from a smoking related illness or from becoming sick themselves. The decision to quit was almost always the result of a strong internal resolve. Smoking was seen as a “coping mechanism for a lot of gays and lesbians. That’s how they managed to cope, to calm down from their anxieties, from all of the pressure.” The non smokers all surmised that LGBTQ individuals “learn to smoke by what’s around” them. Such as “advertisements, watching the movies,” noting that the “old movies . . . glamorized smoking.” Several noted the role of peer pressure and the motivation to smoke just to “fit in.” One participant noted that the bar culture “reinforces” smoking. Several of the participants indicated that cigarette manufacturers often distribute free packs of cigarettes in the gay bars. When asked about techniques that could be employed to activate the LGBTQ

community, the former smokers noted that it would help to make it a “health issue.” They believed that it would be effective to get the message out to the community that we’d live longer if we stopped smoking. Similarly, the other groups agreed that education and campaigns designed to raise awareness would be effective. One current smoker noted that when he became “aware that the rates were significantly higher,” “it sort of pissed me off . . . that’s when I started trying to quit. Social learning theory proposes that the same process is involved in both conforming and deviant behavior (Akers & Lee, 1996). The difference lies in the direction of the process and the nature of the behavior. It is not an “either-or, all-or nothing process” (Akers & Lee, 1996, p. 318). The principal behavioral effects come from interaction in or under the influence of those with which one is in direct or indirect association and which control sources and patterns of reinforcement. Interactions with such individuals also communicate social norms for group interaction. These interactions expose individuals to acceptable behavioral models within a group. “Deviant behavior can be expected to the extent that it has been differentially reinforced over alternative behavior (conforming or other deviant behavior) and is defined as desirable or justified when the individual is in a situation discriminative for the behavior” (Akers, 1985, p.57). The participants in this study all mentioned the impact of peer influence on their smoking behavior. After smoking had begun and its consequences experienced, the associational patterns may themselves be altered so that the fact that one is drawn to or chooses further interaction with others is based, at least in part, on whether they too are smokers. Indeed, birds of a feather do flock together. Thus, it is no surprise that smoking LGTBQ participants usually associated with other smoking LGBTQ individuals. Several of the non smokers noted that they quit smoking because they started dating a non smoking partner. Further, several of the smokers noted that they smoked as a way to rebel and be themselves since they were viewed as different by society as LGBTQ individuals. Thus, for some participants, smoking behavior was deviant and for others, the behavior was seen as conforming to the social norms of LGBTQ culture. The former smoking and current smoking groups had seen smoking behavior modeled as they grew up by parents and peers. After “coming out,” the norms of gay culture and gay peer pressure made smoking “attractive” as a way to a “fit in.”

Significance to Adult Education

These findings have significant implications for adult educators who are concerned about social justice. The LGBTQ community has historically been marginalized and relegated to the fringes of society. In the wake of a national campaign to educate all Americans about the dangers of tobacco use and smoking in particular, it is no coincident that the LGBTQ community has been overlooked. Indeed, the data indicates that the Tobacco companies have targeted LGBTQ communities across the country. It has been discovered that the Tobacco Industry targeted LGBTQ youth in its advertising and marketing efforts. Between 1995 and 1997, R. J. Reynolds planned to engage in a campaign targeting the young LGBTQ community. Without doubt, this must be one of the least flattering targeted marketing plans in history. “In “Project SCUM,” R. J. Reynolds tried to market Camel and Red Kamel cigarettes to San Francisco area “consumer subcultures” of “alternative life style.” R. J. Reynold’s special targets were gay people in the Castro district, where the company noted, “The opportunity exists for a cigarette manufacturer to dominate” (Washington, 2002, p. 1093). The gay Castro targets

were described as “rebellious, Generation X-ers,” and “street people.” Both the coded labeling of targets as Generation X-ers” in the mid-1990s and as “rebellious” indicates their youth. Project SCUM also planned to exploit the high rates of drug use in the “subculture” target group by saturating nontraditional retail outlets with the Camel brand. In one copy of the plan, “the word “scum” is crossed out and the word “Sourdough” substituted by a cautious executive. After such careful sanitizing, the final document was to emerge as Project Sourdough with no clear written evidence that young LGBTQ individuals had even been targeted” (Washington, 2002, p. 1093). The clear goal of the Tobacco Industry is to maintain the disproportionately higher smoking rates within the LGBTQ community by targeting young LGBTQ individuals. Raising awareness about this reality is critical to reducing the smoking rates in the LGBTQ community.

Further, this research provides insight into the process by which LGBTQ individuals learn smoking behavior within their communities. This information provides adult educators with knowledge that can be used to decrease the smoking behavior among the LGBTQ population in the future. Most importantly, this research should serve to galvanize adult educators to develop effective educational intervention strategies to raise awareness and advocate funding for smoking cessation programs which target the LGBTQ community.

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