

# Nicotine/tobacco use among gender-fluid and gender-stable adolescents and adults in the U.S.

Luisa Kcomt, PhD<sup>ab</sup>; Rebecca J. Evans-Polce, PhD<sup>b</sup>; Curtiss W. Engstrom, MS<sup>bc</sup>; Carol J. Boyd, PhD<sup>b</sup>, Philip T. Veliz, PhD<sup>b</sup>; Brady T. West, PhD<sup>bc</sup>; Sean Esteban McCabe, PhD<sup>bc</sup>

<sup>a</sup>School of Social Work, Wayne State University; <sup>b</sup>Center for the Study of Drugs, Alcohol, Smoking and Health, University of Michigan; <sup>c</sup>Institute for Social Research, University of Michigan

## Introduction

- Nicotine/tobacco use is more prevalent among transgender populations (i.e., individuals whose gender identity differs from their assigned sex at birth) relative to cisgender populations (i.e., non-transgender individuals).
- There remains a paucity of information on gender-fluid individuals (i.e., persons who experience changes in their gender identity over time) and nicotine/tobacco use.

## Study Aim

- Estimate the prevalence of nicotine/tobacco use among U.S. adolescents and adults who are fluid versus stable in their gender identities over time.

## Materials and Methods

- Waves 2 to 4 (2014/15 to 2016/18) of the Population Assessment of Tobacco and Health (PATH) Study (N = 33,197 U.S. individuals aged ≥14 years).
- Multivariable logistic regression models to examine associations of gender stability/fluidity over three waves with nicotine/tobacco use at wave 4.
- Differences in any past 30-day tobacco, cigarette, e-cigarette, other tobacco, and poly-tobacco use were assessed among cisgender-stable, transgender-stable, and gender-fluid participants.
- All models adjusted for sex, age, race/ethnicity, geographic region, sexual stability/fluidity, and past-year psychological distress.

This longitudinal study found **gender-fluid individuals are at higher risk for nicotine/tobacco use, placing them at greater risk for smoking-related health consequences.**

## Results

- Prevalence of any past 30-day tobacco use was significantly higher among gender-fluid individuals relative to cisgender-stable individuals.
- Gender-fluid individuals had significantly increased odds of all past 30-day tobacco use outcomes compared with cisgender-stable individuals.

## Conclusion

- Healthcare providers and tobacco cessation specialists should develop an awareness of gender diversity and understand changes over time to create a welcoming, inclusive environment for individuals who do not subscribe to a fixed, binary conceptualization of gender.

## Conflict of Interest Statement

The authors have no financial or any other conflicts of interest to report.

## Financial Support

This work was supported by the National Cancer Institute (R01CA212517 and R01CA203809) and the US Food and Drug Administration (FDA) Center for Tobacco Products (U54CA229974), National Institute on Drug Abuse (R01DA44157, R01DA043696, and R21DA051388). The content is solely the responsibility of the authors and does not necessarily represent the official views of the NIH or the FDA.

## Corresponding Author

Luisa Kcomt, PhD, MSW  
Kcomt@wayne.edu

