Factors increasing and decreasing binge-drinking in young people attracted to more than one gender

A qualitative study of focus groups

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Executive summary

Sexual minority young people are binge-drinking at higher rates than sexual majority young people. Binge-drinking is particularly prevalent in sexual minority young people defined by a minority sexual attraction, and especially when sexual attraction is to more than one gender. This study aimed to identify and describe some factors that increase or decrease binge-drinking in more-than-one-gender attracted young people in New Zealand. Health policy makers can use this information when they develop strategies for reducing binge-drinking in young people and for addressing inequalities in binge-drinking by sexual orientation. Alcohol addiction practitioners can use this evidence when they develop interventions for preventing and treating alcohol addiction in more-than-one-gender attracted young people.

Eleven focus groups of 60 to 90 minutes duration with 32 participants were conducted in Auckland, Dunedin, and Wellington between January and March 2012. Participants were recruited purposively through poster advertisements and online social networks to achieve a broad range of more-than-one-gender attracted young people. All participants were 18-25 years old, attracted to more than one gender, and resided in one of three urban centres in New Zealand (Auckland, Dunedin or Wellington). Focus groups were digitally recorded and transcribed verbatim. A data-driven thematic analysis of the transcripts was conducted to identify themes of focus group discussion on factors that increase and on those that decrease binge-drinking in more-than-one-gender attracted young people.

Of the ten themes that the study identified, the following eight identified and described risk factors that increased binge-drinking in more-than-one-gender attracted young people:

- The social inclusion theme argued that more-than-one-gender attracted young people binge-drink to manage social exclusion from lesbian and gay communities and from heterosexual communities.

- The sexual minority stigma and stress theme, which described the effects of experiencing social exclusion, identified the effects of experiencing sexual minority stigma and stress and internalising biphobia as processes that can enhance binge-drinking.

- The coming out theme identified that, as long as coming out to oneself was not conflictual and stressful, it did not impact binge-drinking in young people attracted to more than one gender. However, some more-than-one-gender attracted young people, who experienced sexual attraction uncertainty and confusion, used binge-drinking as a strategy to manage these feelings. The theme also identified that positive reactions to coming out to others generally did not have an effect on binge-drinking, but negative reactions to coming out to others increased binge-drinking.

- The mental health theme identified co-morbid mental health conditions, prominently anxiety, depression, and self-harming behaviours, as interacting and potentially increasing binge-drinking in more-than-one-gender attracted young people.
• The gender expression and norms theme identified that masculine gender expression increased binge-drinking in more-than-one-gender attracted cisgender young women as well as transgender and cisgender young men. Female gender norms were also identified as increasing binge-drinking in some more-than-one-gender attracted cisgender young women.

• The bars and parties theme identified that a majority of more-than-one-gender attracted young people binge-drunk at higher rates in straight bars or at straight events than in lesbian and gay bars or at lesbian and gay events. A minority drank more in or at lesbian and gay bars or events than in or at straight bars or events.

• The romantic relationships theme identified stages of romantic relationships in which binge-drinking can occur in more-than-one-gender attracted young people. It also argued that the gender of a romantic partner can influence binge-drinking.

• The sexual relationships theme identified binge-drinking as a strategy for initiating and justifying same-sex sexual contact (especially among cisgender women).

The study also identified two protective factors, which decreased binge-drinking in young people attracted to more than one gender:

• The access to other more-than-one-gender attracted young people theme, which complemented the social inclusion theme, argued that access to communities of more-than-one-gender attracted people could decrease binge-drinking.

• The positive public representations theme argued that positive representations of, and role models for, more-than-one-gender attracted young people might decrease binge-drinking, though instances of these representations were low.

While the study identified a range of risk factors which lead to an increase in binge-drinking for more-than-one-gender attracted young people, it also yielded a number of reassuring results which suggest these young people are, in many cases, able to identify where alcohol may be a poor choice and manoeuvre themselves into a more positive health behavioural pattern. A number of participants identified situations where they had been disadvantaged by their more-than-one-gender sexual attraction, but were now sharing their experiences from a position of strength and security after making affirmative changes to their behaviour or environment. More widely, the focus group conversations gave an impression of young sexual minority people determined to own their sexual orientation, and to stake out a place for themselves in New Zealand society. This paper primarily identifies factors that increase binge-drinking, and makes recommendations on interventions, which we believe would reduce binge-drinking in the more-than-one-gender attracted population and support the wider sexual minority population into a resilient position against binge-drinking, as demonstrated by some of our study participants.

The study findings point health policy makers and alcohol addiction practitioners towards three types of preventive interventions for reducing binge-drinking in more-than-one-gender attracted young people. The first type are interventions supporting community-building in more-than-one-gender attracted young people such as the building of community spaces
and organisations. The second type of intervention that this study points towards are interventions that decrease stigma associated with more-than-one-gender sexual attraction such as broad anti-stigma campaigns. At the highest level of policy-making, state-level social policy interventions that decrease institutionalised discrimination are the third type of potentially effective interventions. The study also further provides alcohol addiction practitioners with an understanding of the factors that can be addressed in alcohol addiction treatment for more-than-one-gender attracted young people.
Introduction

More-than-one-gender attracted young people

This paper addresses binge-drinking in young people sexually attracted to more than one gender. Examples of this demographic are young people who are attracted to both men and women or who are attracted to people regardless of whether they are cisgender, transgender or gender queer. Cisgender refers to people whose gender identity and biological sex are congruent, while transgender refers to those whose gender identity differs from their biologically assigned sex. Gender queer is best understood as encompassing all alternative gender identities outside of the hegemonic cisgender identities. Our definition of the more-than-one-gender sexual attraction extends common definitions of “both-sex sexual attraction” by prioritizing diverse gender categories to a binary construction of sex and gender.

More-than-one-gender sexual attraction is generally considered the sexual minority defining the largest proportion of all sexual minority populations. It has been estimated that 2.9-3.8% of, or approximately one out of 25, young people attending high school are more-than-one-gender attracted in New Zealand. This means that more-than-one-gender attracted young people constitute a sizeable population in New Zealand.

Alcohol use in more-than-one-gender attracted young people

Sexual minority young people binge-drink at higher rates than their heterosexual peers. There is increasing acknowledgement that different dimensions of sexual orientation (attraction, behaviour, and identity) define different sexual minority populations, and that these different sexual minority population groups have different rates and patterns of binge-drinking. Sexual attraction and sexual behaviour are stronger predictors of substance use than sexual identity in young people. Among groups of young people defined by sexual attraction, those who are more-than-one-gender attracted binge-drink at higher rates than those exclusively attracted to the same gender and those with an exclusively opposite-gender sexual attraction. Data for New Zealand from the Youth 2007 survey showed that 51.1% [95% confidence interval (CI): 44.6%-57.6%] of high-school students attracted to more than one gender reported binge-drinking; in comparison, 35.1% (95% CI: 23.7%-46.5%) of exclusively same-sex attracted high-school students and 35.7% (95% CI: 33.0%-38.4%) of exclusively opposite-sex attracted high-school students binge-drink.

Factors increasing and decreasing binge-drinking in more-than-one-gender attracted young people

Binge-drinking is associated with higher rates of alcohol-related harms. In order to reduce disparities in alcohol-related harms in groups of young people defined by sexual orientation, binge-drinking among young people attracted to more-than-one-gender needs to be reduced. Developing interventions that reduce alcohol-related harm in more-than-one-gender attracted young people requires a more detailed knowledge of the factors that increase and decrease binge-drinking in this population group than is currently the case in New Zealand and internationally.
Research on the underlying risk and protective factors for alcohol use in young sexual minority people has predominantly focused on those with minority sexual identities such as bisexual, lesbian, and gay\textsuperscript{11, 13, 14}, and alcohol use in young people with a minority sexual attraction such as a more-than-one-gender sexual attraction has received relatively little attention. Moreover, research on young people with a sexual minority attraction has often combined distinct minority sexual attraction categories such as same-sex attracted and both-sex attracted, thereby potentially concealing important differences between the subgroups defined by these categories\textsuperscript{11, 13}. Research promoting an understanding of the unique factors affecting young people attracted to more-than-one-gender in their binge-drinking is required.

However, due to the paucity of research that focuses exclusively on more-than-one-gender attracted young people it is necessary to draw on the findings of studies reporting on alcohol use, risk factors, and protective factors for binge-drinking among young people exclusively attracted to members of their own gender and those attracted to more-than-one-gender.

Research has identified several factors determining binge-drinking in young both-sex and same-sex attracted people. It is established that young both-sex and same-sex attracted people use alcohol to manage sexual minority stigma and the stress resulting from this stigma\textsuperscript{12, 15-18}, as well as discrimination from others\textsuperscript{3, 11, 12, 15, 19}. Discrimination from others can also be internalised\textsuperscript{17, 20, 21}, and it is theoretically plausible that this internalised discrimination could increase binge-drinking. More-than-one-gender attracted young people may also experience social exclusion and alienation from both lesbian and gay, and heterosexual communities, which may increase binge-drinking.

Whether coming out to others is protective or a risk factor for binge-drinking in both-sex and same-sex attracted young people is debated. Those considering it a risk factor argue that young people use alcohol during their coming out to others to ease their anxiety\textsuperscript{22}, and due to increased socialising and sexual networking with other both-sex and same-sex attracted young people, as well as due to having sexual experiences\textsuperscript{23}. Those arguing coming out to others is protective for alcohol use contend that coming out helps to break the social isolation and stress that accompanies hiding one’s sexual attraction, which may lead to binge-drinking in some more-than-one-gender attracted young people\textsuperscript{24}.

Attachment to sexual minority communities could also either decrease or increase binge-drinking. On the one hand, building friendships and socialising with other both-sex and same-sex attracted young people has been found to ease sexual minority stress, and therefore should reduce the need for coping behaviours like binge-drinking\textsuperscript{25}. On the other hand, attachment to sexual minority communities also increases time spent in lesbian and gay bars and social spaces, in which alcohol use is often heavy\textsuperscript{3, 12, 26-28}.

**Study aims and report structure**

This report explores the research question, which factors increase and decrease binge-drinking in more-than-one-gender attracted young people who reside in urban centres in New Zealand.
The report sections following this introduction are structured as follows. The second section presents the methods of this study of focus groups. The third section describes the themes that emerged from the focus groups. The fourth section discusses the findings. The fifth section concludes by discussing the application of these findings for alcohol addiction prevention and treatment policy and practice.
Methods

Participant recruitment

Eligible participants were defined as 18-25 years of age, attracted to more than one gender [e.g., attracted to cisgender women and female-to-male transgender men (hereafter transgender men)], and resided in one of three urban centres in New Zealand (Auckland, Dunedin, Wellington).

To ensure that a broad range of themes would be captured in the focus groups, participant sampling was purposive, meaning that participants were recruited from a broad range of networks and communities with the intention to achieve a sample of participants with known diverse experiences and opinions. The recruitment also aimed to ensure adequate representation from Māori, Pacific, and transgender participants by advertising the study through Māori, Pacific, and transgender young people's networks.

The text used to recruit participants described the topic of the study, provided a rationale for conducting the study, listed the eligibility criteria for participants, and described the study methods. The text also listed contact details (physical address, postal address, land line, cell phone) of the researchers. The recruitment strategy was to distribute the advertisement to more-than-one-gender attracted young people through sexual minority-targeted social and support groups and networks, but also through other sites accessible to those not affiliated with sexual minority groups and networks.

This text was posted in hard copies as posters in both Dunedin and Wellington at multiple sites, including venues for sexual minority people and for young people, sexual minority social and support organisations, university advertisement boards, and supermarkets. Several social and support organisations for bisexuals, young sexual minority people, other sexual minority people, and young people were contacted by email with the request to distribute the text advertisement to their members and other relevant networks by email or through posting the advertisement online. The text was also posted online as an advertisement on the University of Otago, Wellington website and on several Facebook sites, including those of organisations of young sexual and gender minority people, and of Māori and Pacific sexual minorities.

The study recruited a total of 32 participants. All participants were aged between 18 and 25 years (mean age: 21.3 years). Most participants (24) identified their gender as female. Seven participants identified as male. Two participants identified as female-to-male transgender (one of whom also identified as female). Three participants identified as Māori (of whom two also identified as New Zealand European), and one as Pacific (Niuean, and also as New Zealand European). However, the majority of the sample consisted of New Zealand European participants (22), of whom one participant each also identified as English and Irish. Five participants identified solely as: Chinese (2); Japanese (1); New Zealand Indian (1); and South African (1). One participant did not provide information on their ethnicity. Most participants (27) reported their sexual identity as bisexual. Of the bisexual-identified participants, two also identified as gay, and one each as lesbian, queer, and all gender friendly. Two participants solely identified as pansexual and three as lesbian. The majority of participants (27) were students who earned between nil and $10,000 income, but one participant was unem-
ployed, and four participants were in full-time employment, earning between $35,000 and 55,000$.

**Focus groups**

The principal and second study author of this report reviewed literature on the factors that increase and those that decrease alcohol use in more-than-one-gender attracted young people. On the basis of findings from this literature review a list of questions and prompts was developed that asked participants to identify factors that increased and decreased binge-drinking in more-than-one-gender attracted young people, and then also covered questions on the range of risk and protective factors identified by the literature review. This questionnaire was trialled with four experts on questionnaire design for surveying young people and sexual minority people to ensure that the questions covered an appropriate range of topics and used language appropriate for more-than-one-gender attracted young people.

The principal author of this report led the facilitation of all eleven focus groups. The second author co-facilitated ten of the focus groups. Before the focus group commenced, the focus group participants received a detailed briefing in writing and verbally about the study aims and methods, including the collection, analysis, and storage of focus group data. Written informed consent for participation in the focus groups was sought from each participant. Ground rules for the focus groups, such as rules to ensure participant confidentiality, were explained by the researchers and then agreed between focus group participants and researchers to ensure easy and safe participation of each participant in a focus group. The focus groups were semi-structured in that the researchers then facilitated focus group talk along the lines of the prepared questions and prompts. Four focus groups of 60 to 90 minutes duration each were conducted in Auckland, Dunedin, and Wellington between January and March 2012. One focus group was jointly held in Wellington and Dunedin through online-conferencing.

**Thematic analysis**

The second study author along with commercial transcribers transcribed the audio recordings of the focus groups verbatim. To ensure that the transcripts concealed the identity of the participants, the study authors assigned a pseudonym to each participant to the transcripts at this stage and removed any personal information that could have identified study participants from the transcripts. To ensure the quality of the transcripts, the first study author conducted several random checks of each transcript.

The study authors conducted a data-driven thematic analysis of the transcripts, adhering to Braun and Clarke’s guidelines. The first and second study author jointly developed a coding scheme. Transcripts were then coded into ten themes. “A theme captures something important about the data in relation to the research question, and represents some level of patterned response or meaning within the data set.” (p.82) The computer software used for coding the transcript data was NVIVO 9.

All study authors jointly summarised the ten themes. The summary descriptions of the themes include direct excerpts from focus group transcripts. If an excerpt is extracted from the transcript of one participant, then the study participant’s name is provided in parentheses.
directly after the excerpt. If an excerpt is a transcript of a dialogue between two or more participants, then each participant's name precedes the excerpt. At the first appearance of the participant in the text, the participant's age and ethnicity are also provided.
Themes

Theme 1: Social inclusion

This theme argued that more-than-one-gender attracted young people binge-drink to manage social exclusion from lesbian and gay, and heterosexual communities.

Almost all participants reported situations in which they or other more-than-one-gender attracted young people had experienced negative stereotyping from lesbians and gays. The three stereotypes most commonly quoted were that sexual attraction to more than one gender was a stage of sexual orientation confusion; that it was a phase on the way towards sexual attraction exclusively to the same gender; and that more-than-one-gender attracted young people were “greedy” (Oli, 18, New Zealand European). Several participants also reported that lesbians and gays constructed sexual orientation as binary (e.g., same-sex attracted versus opposite-sex attracted), which did not conform with the participants’ understanding of their own sexual orientation as fluid along a continuum. A small number of participants reported biphobic behaviour from gays and lesbians. For example, Arahia (20, Māori) reported that the lesbians she knew had expressed disgust about sexual attraction to more than one gender.

Almost all participants reported experiencing or witnessing other more-than-one-gender attracted young people experiencing negative stereotyping from heterosexuals. The principal negative stereotype that participants quoted was that more-than-one-gender attracted people were sexually promiscuous. Several female participants also expressed their view that heterosexual men viewed sexual encounters between women as “a kinky phase that you can become involved in” (Kate, 21, New Zealand European/Irish). Several participants reported that they were repeatedly questioned about their sexual attraction by heterosexuals. Three participants reported that “gay jokes” left them feeling uneasy. Four participants reported experiencing verbal abuse from heterosexuals. For example, Erik (24, New Zealand European) reported that he had been harassed for his more-than-one-gender sexual attraction by a heterosexual man at a party, and Connie (25, New Zealand European) reported that she was verbally attacked and nearly beaten up by other female students because she socialised with two female students, who held hands on their way home from high-school. Five participants reported experiencing biphobia from heterosexual friends. For example, Luca (19, New Zealand European/English) reported that her heterosexual friends said that nightclubs for sexual minorities were “gross” and refused to accompany her to these. One participant (Ngahuia, 18, Māori/New Zealand European) reported that her heterosexual, male ex-partner had physically abused her and a female friend of hers who was also more-than-one-gender attracted, because of their sexual attraction.

Participants who reported having experienced and having witnessed other more-than-one-gender attracted young people experiencing these multiple forms of social exclusion reported that these experiences made them feel stigmatised, and caused them stress or unease (see Theme 2: Sexual minority stigma and stress).

Several participants reported that they or other more-than-one-gender attracted young people had increased binge-drinking to manage the stress from experiencing negative
stereotyping, harassment, biphobia, and other forms of social exclusion from lesbian and gay, and heterosexual communities.

My old best friend, she drinks a lot of alcohol. [...] She is bisexual as well, but I pick her up sometimes and we just go for a drive to chill out. [...] But she will be talking about it and then next thing I know she'll pull a bottle of beer or something out of her bag and it's just like: “Seriously?” I was talking to her about this when she was sober. She said she actually gets so much shit from some other people, she just wants to just sit back with a bottle of beer and not give a fuck. (Connie)

The things that drive like both-sex or same-sex attracted people to drinking in specific occasions would definitely be either celebrations obviously but most people who drink, drink at celebrations, but a negative experience associated with their sexuality.[...] They've been stereotyped against, and then they go and have a few drinks. (Fiona, 18, English)

I have kind of got negatives from all sides so it's kind of, I mean, I probably do drink more because of it. [...] It's just become probably a part of how I drink I guess. Yeah. Because I do get a lot of like, not put downs, like sort of subtle snarky remarks from friends. [...] They just don't take me seriously I feel. (Luca)

Almost all participants argued that reducing social exclusion from lesbian and gay, and heterosexual communities, for instance by means of anti-stigmatisation and education campaigns, would reduce binge-drinking in more-than-one-gender attracted young people.

Part of the reason that I think, especially in my group of same or both-sex attracted people, people drink is because of a negative reception to their sexuality. If it was more accepted, more out there, anti-stigma campaigns, then that they'd be less driven to feel they need to drink because of it. (Fiona)

Educate the rest of the population, non-same-sex attracted population, so they know more about you know bisexual people and who they are, what they are, how they operate, and what they think and stuff like that. I think that would be useful so young both-sex attracted people have a more understanding environment and can find it easier to hook up as it were without alcohol, without the clichês and other stuff like that, stereotypes are gone. (Steve, 22, New Zealand European)

I would change the gene that says that being straight is normal and take that whole equation out of history. [...] Just make it that people didn't have those prejudices. That sexuality could be whatever you wanted it to be and that was normal. (Nicola, 23, New Zealand European)

We note that the above participants, while discussing the way in which their more-than-one-gender sexual attraction was socially excluded by lesbian and gay as well as heterosexual communities, were relatively secure and confident in their sexuality and their right to be integrated members of New Zealand society. That more-than-one-gender attracted young people are able to acknowledge the normality of their sexuality within an adverse
environment and are identifying strategies that can modify adverse environments demonstrates this community’s significant resiliency.

**Theme 2: Sexual minority stigma and stress**

This theme identified the effects of experiencing sexual minority stigma and stress and internalising biphobia as processes that can enhance binge-drinking. Biphobia refers to an irrational fear and aversion towards and/or discriminatory action against more-than-one-gender attracted people. We refer to internalised bi-phobia as the product of an internalisation by more-than-one-gender attracted people of this fear, aversion, or discrimination, which can be directed against oneself or against other more-than-one-gender attracted people. The theme was linked to the social inclusion theme in that it described the psychological effects of experiencing social exclusion or witnessing other more-than-one-gender attracted young people experiencing such social exclusion (see Theme 1: Social inclusion).

Several participants argued that social exclusion from lesbian and gay communities and heterosexual communities resulted in sexual minority stigma and stress. Three participants argued that social stigma towards more-than-one-gender attracted young people was a greater issue for men than for women. For example, Nicola expressed the belief that “It would be a lot harder to be a bisexual guy than it is to be a bisexual girl, because there is a lot of stigma around that.” And Nicola and Kate expressed the belief that whereas more-than-one-gender attracted young women were “trivialised and sexualised” (Kate), more-than-one-gender attracted young men were perceived as a “threat to the system” that “must be destroyed” (Kate).

Several participants reported that sexual minority stigma and stress had increased their binge-drinking and/or reported the belief that such stigma and stress had increased binge-drinking in other more-than-one-gender attracted young people.

*I drink more when I’m under high stress, when I’m stressed out, and maybe sometimes at parties when, after conversations with people, where they want to know, no one gets the bi thing. It’s really hard to explain. Quite a bit because you get people who want to know why you are not lesbian, why you are not straight, and I kind of feel that, it’s slightly easier to be one or the other, like I envy some of my friends who are gay, I’m like you know who, you know you’re there and no one questions it. But I get questioned all the time, and I find that frustrating sometimes. (Ruth, 23, New Zealand European)*

*I can imagine, for other people, if they don’t feel accepted for their like bisexual, gay or lesbian [identity], if there wasn’t that stress, you wouldn’t need to drink obviously. (Natsuki, 21, Japanese)*

One sign of significant resilience in more-than-one-gender attracted young people was that no participant reported having internalised biphobia that they had experienced or had witnessed. This suggests that more-than-one-gender attracted young people have developed effective strategies preventing them from the potentially negative effects of binge-drinking that can arise from internalising biphobia.
However, four participants identified cases of internalised biphobia in other more-than-one-gender attracted young people. Of these participants, one participant reported a case in which they thought internalised biphobia had caused a more-than-one-gender attracted young person to drink alcohol and another reported the belief that internalised biphobia increased binge-drinking in young people attracted to more than one gender.

One of my close friend's family is very anti-gay, anti-bi kind of thing, and she was in a relationship with this girl for three years and her parents never found out, but as soon as she left that relationship, like we all knew she was still attracted to females and males and everything like that but she would always go home and have to tell her parents, “No, no, no. I’m straight,” or whatever and then she’d start telling us that she was straight, and I get like you can change your sexuality, but then she was also turning round to us and being like, “Oh no, I’m attracted to this girl,” and whatever and then she would start drinking whenever she had to pretend that she was straight to her parents even though she’d been in this relationship with this girl for so long - they were like so in love and everything like that - because it was just like the kind of stigma that her family put on it she felt like she had to drink sometimes just like fuck it kind of mentality. (Fiona)

I think that it is a big factor in depression among people who like the same-sex, the opposite and both you know. Obviously if someone was telling me I was wrong about all the things I had been thinking, it is going to make me feel pretty crap and I’m gonna start doubting myself and then I am going to start getting depression and hiding away in my room and not talking to anyone and possibly start drinking. (Jack, 19, New Zealand European)

**Theme 3: Coming out**

This theme identified that, as long as coming out to oneself was not conflictual and stressful, it did not impact binge-drinking in more-than-one-gender attracted young people. However, some more-than-one-gender attracted young people, who experienced sexual attraction uncertainty and confusion, used binge-drinking as a strategy to manage these feelings. The theme also identified that positive reactions to coming out to others generally did not have an effect on binge-drinking, but negative reactions to coming out to others increased binge-drinking.

The majority of participants reported that coming out to themselves had not been stressful, and had not been connected with binge-drinking. Two participants reported that accepting their more-than-one-gender sexual attraction increased their self-esteem, which meant that they stood up to harassment that may have led to binge-drinking previously. However, a small number of participants reported that coming out to themselves or that of other more-than-one-gender attracted young people was dominated by a sense of sexual attraction uncertainty and confusion, and that drinking alcohol was a strategy they or others used to ease these feelings.

I did go through a long time thinking: “Am I straight? Am I gay?”. And you are like: “Neither kind of fits.” And I mean the only context where alcohol kind of comes into
this is when drunk is one of the kind of times where the kind of technical label does matter less and you can be like: “Oh whatever”. You know. But that was just for a period, and now I’m like that all the time anyway. (Luke, 25, South African)

I think the inability to choose either camp is less of an issue, when there’s alcohol involved. So I actually find a lot of my friends can kind of deal with the bi factor better when they stop thinking about it, which is normally when they are drinking. (Erik)

Ten participants reported that coming out to family and friends was not at all stressful. Several of these participants argued that having other family members who were sexual minority persons was the reason for the positive reception of their coming-out to their families. However, five participants reported that coming out to their family or friends was stressful, and several others reported avoiding coming out to others to avoid potential negative consequences. Five participants reported that negative responses to their coming out had increased their binge-drinking or reported cases where such negative responses had increased binge-drinking in other more-than-one-gender attracted young people.

My mum and my brother they have a problem with it. They have a problem with me being it. […] As soon as she found out that I was attracted to both sexes like males and females, she completely flipped out. She didn’t want to hear about it. In her eyes I was not allowed to be attracted to both sexes, so it’s kind of just like I live with my dad so whenever I go see her it’s just like I can’t tell, I can’t have a talk with my mum about any relationship problems I’m having or I can’t ask advice to do anything like that because she doesn't want to hear anything about it. My brother just blatantly turns round to me and says, “No, you’re straight.”, as if I don’t have a choice in the matter. So sometimes after encounters like that with my mum and my brother it will be like fuck it, I’m just gonna go and have a drink, like, whatever, and then that way I can be me. When I’m with them I don’t feel like I’m being me. (Fiona)

I had a couple of guy friends who said they were bi during high school and since have come out as gay, but during that time they got much more drunk than the rest of us. I suppose I was with them because I was a bit unsure of my sexuality, so I was drinking slightly more. When I was living in Wellington, which is when I came out, I definitely got drunk more than I do now. (Ruth)

When you come out to your family or haven’t come out to your family, there is always that big pressure on you to be someone who you are not. […] You know how to act like a different person […] and this obviously brings yourself down because you are lying to yourself and it makes it harder on yourself to have a good time so you turn to alcohol. (Jack)

**Theme 4: Mental health**

This theme identified co-morbid mental health conditions prominently anxiety and depression and self-harming behaviours, as increasing binge-drinking in young people attracted to more than one gender.
The majority of participants reported that when they felt ‘low’ or ‘down’, they avoided binge-drinking, suggesting that more-than-one-gender attracted young people generally make positive choices regarding alcohol use when experiencing mental health issues. These participants reported that moderate alcohol-drinking relieved negative emotions, but that they avoided binge-drinking, because binge-drinking exacerbated their feeling down and could have negative repercussions such as depression and alcohol addiction.

*I am much more careful with my drinking if I am feeling a bit morose, because it can be a trigger for depression. So, yeah, if I am feeling not great, then I will stay away from alcohol, or try to.* (Erik)

*I actively avoid alcohol when I’m unhappy. I've seen more than my fair share of alcoholics, working in a bar. There is always at least one hanging around. And also people get really down and do stupid things when they’re drunk and abuse their family members here and there. And yeah I don’t want that to happen to me, so yeah I do keep an eye on alcohol.* (Mark, 22, New Zealand European)

However, a minority of participants reported that they binge-drinked to manage feeling emotionally ‘down’ or ‘low’.

*Other times I will be in a bad mood. I will have a glass, still be in a bad mood. Have another glass, still be in a bad mood. Have another glass, and eventually the bottle is gone.* (Fiona)

One participant linked the theme of binge-drinking to manage feeling down after coming out to himself (see Theme 3: Coming out).

*The times that get me down the most are those to do with the whole label thing, I’m someone who quite likes labels. As much as I say I don’t want to be labelled, I do quite like to be able to put a finger on something, and so the kind of amorphous blob that is bi and kind of flitting up and down the spectrum, where your preference is not at any one kind of point is innately problematic because you can't put a label on it, so I guess to tie that back to alcohol, would it drive me to drink more? Probably not. But where it is relevant is both for me, but also for my friends, I think the inability to choose either camp is less of an issue when there’s alcohol involved. So I actually find a lot of my friends can kind of deal with the bi factor better when they stop thinking about it, which is normally when they're drinking.* (Erik)

Two participants reported that they, or other young people attracted to more than one gender, used binge-drinking to overcome feeling down after a relationship break-up (see Theme 7: Romantic relationship).

*With my best friend, when she broke up with her boyfriend, I was like: “Put your nice dress on, get your nice dress on. We are gonna go out and just get really slashed and sleep wherever we fall.” Pretty much it is kind of like just, it’s better than sitting at home and crying about it. Yeah, just go out and have fun. But because you are quite sad about it, you do get really, really drunk.* (Oli)
The majority of participants reported the belief, that for them and for most other more-than-one-gender attracted young people, mental health conditions such as depression and self-harm were not a risk factor for binge-drinking. However, five participants argued that depression and self-harming behaviour was more prevalent in young people attracted to more than one gender, and had observed a link between depression, self-harming, and binge-drinking in themselves or other more-than-one-gender attracted young people. Whereas some participants reported that their mental health conditions had increased their binge-drinking or coincided with binge-drinking, other participants reported stopping alcohol-drinking to manage their mental health conditions.

I drank a lot when I did have mental health problems, and I’ve drunken less and less, and stopped now that I’m well. (Brendon, 21, New Zealand European)

I moved out of home at the beginning of last year umm and came to university and moved here. I went to an all girls’ school boarding school it was an Anglican boarding school and my family, we are like hard-line Catholics. Like mass every Sunday and stuff. So moving out of that kind of environment, my mental health has improved a lot, and I think I have actually, I haven’t actually thought about it before, but I think I have been drinking a lot less than I usually do. I would usually go out every weekend and get quite hammered with my mates but I don’t get really drunk anymore really. (Ruth)

A lot of gay or bi people I know have had mental health problems and a lot of them and it kind of divides them. And a lot of people turn to drink and drugs. And a lot of them will turn to prescription, like actually going to a doctor doing it the right way or completely go off any drugs and alcohol because they’re doing it the sensible way. (Rebecca, 22, New Zealand European)

Because I have had mental health difficulties, I stopped drinking then as well I guess. I just made that connection, which should be really obvious. But like because I didn’t want to worsen it you know, like I wanted to have a bit of control or, I don’t know, just keep myself a bit safer. And yeah being on medication for things as well, like depression and mental health stuff, I know it makes it even stronger and umm I’m a light weight so yeah. (Ivy, 22, New Zealand European)

Two participants described the dynamics that they had observed in other more-than-one-gender attracted young people between alcohol-drinking, depression, and self-harm.

People drink and get really depressed and it will affect them more and more and then they will hurt themselves. […] When you’re depressed, you will start drinking thinking it will be good for you, but it can make you more and more depressed. Especially people who drink by themselves that would be a time when they are more likely to self-harm. (Isobel, 19, English)

I had a bisexual friend who self-harmed. He suffered from depression though the cause of which I wouldn’t like to speculate on, but besides drinking he also did a lot of drugs of one sort or another. […] That was in high school when I was about 16 I
first noticed it and he was probably an alcoholic the last time I saw him, which was probably two years ago. (Mark)

**Theme 5: Gender expression and norms**

This theme identified that masculine gender expression increased binge-drinking in cisgender young women as well as transgender and cisgender young men attracted to more than one gender. Female gender norms increased binge-drinking in more-than-one-gender attracted cisgender young women.

Several cisgender women as well as one transgender man, who also identified as cisgender woman, reported that their gender expression was related to the amount and type of alcohol they drank. The relationship they reported was that when these participants felt more masculine they then drank larger amounts of alcohol and, for some, drinks with a higher percentage of alcohol.

Connie: *When I do feel more masculine, I am more likely to drink more harder drinks.*
Nicola: *You can't have your little like bright blue Vodka, because that's too girly.*
Ngahuia: *I am so the other way around. If I'm feeling really guy-like, I just have a few beers or a box of beers, or I am doing spirits, hot shots, it is like: “Girls let's do this”. It is crazy.*
Nicola: *I drink [names drink] when I feel like a girl, and I drink beer out of the bottle when I feel like a guy or straight spirits.*

I either become really blokey when I drink or really camp depending on who I am with and it probably would change the habits of what I would drink, because if I am around a lot of guys and I am in kind of a blokey space, I will drink a lot of beer or horrible shots. (Luke)

*When I feel more like a girl, I don't drink as much. And when I feel more like a guy, I drink more. I feel, I don't know, sometimes I feel if I, sometimes I feel more like a gay guy, sometimes I feel more like a girl, sometimes I feel like a really masculine person, and when I feel like the gay guy I drink quite a lot, when I feel like, this is probably really weird, because when I feel like the masculine guy, I have the ability to drink the world away, you know. But when I feel like really feminine I don't drink as much.* (Jack)

Jack: *A lot of the more masculine looking people, I am not saying what gender they are, they are just more masculine, they will drink beer. Yeah, definitely. And then the more feminine people would drink nice creamy shots or* Rebecca: *Cocktails.*

Two participants reported that they had observed that more-than-one-gender attracted transgender young men increased binge-drinking in response to pressure within the transgender male community to drink heavily to consolidate masculinity.
Ivy: Most of the trans men I know are like, it is important to get drunk for them socially, as a group to confirm their masculinity and their maleness and they tend to drink really hard, and yeah to make them sick.

Brendon: [...] That’s a really huge thing for trans guys and butch lesbians as a social thing. [...] You have to go to these big beer drinking things and get really pissed, the most pissed and prove that you’re the most strongest, and like most heavy weight and I always failed, but yeah.

Four cisgender women reported that normative codes of femininity had increased their binge-drinking. This included normative dressing codes and gender-specific expectations around sexual networking.

Nicola: I’m not a heavy drinker, but if I was going straight clubbing I would get my high heels on and my little dress once in a while and then I would just drink lots, because I just get really uncomfortable in high heels and so I just get drunk so I don’t think about it. It was about once but I was just and dammit we were going to this like, nice, like I don’t know where we were going, some really nice straight club and I was just like fuck it I’m just going to drink as much as I can so forget these shoes are killing me, but I stopped going out in dresses and shit because I am just sick of it, it’s not what I wear any more.

Connie: I can’t wear a skirt. A short thing? No way. I would drink more if I was wearing a short skirt, because I would feel so unpractical.

When you are hitting on a guy there is a lot of expectations that are sort of set up in heteronormative relationships that the girl has got to be alluring and the guy has got to be like this. I almost feel like I have to drink to be in a certain way, to fit that or feel attractive because you have got to seduce him. That’s the rule. With girls it is more, it usually starts off as a friendship and then develops. I usually don’t have that pressure to like I am going to go and conquer that person. (Kate)

Theme 6: Bars and parties

This theme identified that the majority of more-than-one-gender attracted young people binge-drunk at higher rates in straight bars or events than in lesbian and gay bars or events, but that some drank more in lesbian and gay bars or events than in or at straight bars or events. As a result, we would expect that if more-than-one-gender attracted young people are able to identify spaces where they will drink more or less alcohol, then they are well-positioned to identify healthier spaces (in terms of alcohol) and control binge-drinking.

The majority of participants reported that they or other more-than-one-gender attracted young people engaged in more binge-drinking in straight bars or events than in or at lesbian and gay bars or events, because they felt more comfortable and had more opportunities for socialising and meeting others for romantic and sexual relationships in the latter, which required a greater degree of sobriety.

Luca: I drink less when I’m at [names lesbian and gay bar]. Like [names straight bar] and stuff, I will be like through this, I don’t know, I don’t feel like, those are places to go to are really kind of gross I find. Like I just don’t like them at all because they’re
just, duh, the music is not very good and the people aren’t very nice. So yeah, usually I drink more. But when I go to [names lesbian and gay bar], I will engage in conversation, the people are much more friendly and I am talking and drinking less and dancing more and stuff.
Maria (23, New Zealand European): Yeah. I would agree with that.

On the other hand, a minority of participants reported that they drank more in or at lesbian and gay bars or events than at straight bars or events. Several participants in one focus group reported that one specific gay bar did not comply with alcohol policy by serving alcohol to underage and intoxicated people.

I drink more when I am going to a gay bar, because if I am going to a straight bar, like I have just given up on getting guys in town it’s just a terrible idea, like if you want a guy, meet them somewhere that is not in town. Like meet them in any other kind of social situation that isn’t town, like even house parties or whatever. So like, I just don’t drink because if I am straight clubbing, it is just to dance. Like I am not there to meet anyone. I am not there to hook up, because the guys who you do end up hooking up with are sleazy as and like you can meet way better guys like not at clubs. Whereas if I am going to a gay bar there is a quite higher chance that there will be someone there that you can hook up and therefore you go and have a drink, so that’s just me. I have been straight clubbing a few times over the last year and I just went sober because I didn’t see any point in drinking. (Nicola)

A small number of participants argued that because organisations and activities for sexual minority young people are primarily centred on bars or involve alcohol, more-than-one-gender attracted young people engage in more binge-drinking.

At [names university] we recently just got a [lesbian and gay student] club. And like they haven’t actually done a lot, but I think in [names city] they do quite a few parties and stuff. I mean just having those environments for drinking maybe encourages them to drink more. I don’t know, I am not sure, but it could be in a situation that’s just about alcohol and whether you are gay or bi or whatever you can just yeah drink a lot. (Xue, 20, Chinese)

Five participants suggested that organisations for more-than-one-gender attracted young people needed to provide a “supportive space” (Isobel) by hosting alcohol-free social events to reduce binge-drinking. Two participants saw socialising around activities not involving alcohol as one successful strategy for lessening heavy alcohol consumption in young people attracted to more than one gender.

I work […] at a queer youth drop-in centre in [names city] and so people, and it’s a straight alliance as well and you can come along with your straight friends and not drink and it is a smoke free space as well. So that’s good because you can’t have alcohol there and you can hang out and it is a supportive space and you can talk about things that are going on for you and just hang out. There is none of that sort of risk stuff. (Isobel)
Theme 7: Romantic relationships

This theme identified stages of romantic relationships in which binge-drinking can occur in more-than-one-gender attracted young people. It also argued that the gender of a romantic partner can influence binge-drinking.

Nine participants commented that binge-drinking sometime accompanied the beginning and end of romantic relationships. Five participants reported that binge-drinking was a method for managing the anxiety involved in meeting a potential new romantic partner.

Amanda (22, New Zealand European): *We both drank beforehand.*
Jenny (22, New Zealand European): *Like you can click over a computer screen. You can click on the phone. Sometimes you don't click in person. So you factor alcohol into everything.*
Amanda: *We both drank lots beforehand. I think we were both wasted.*

*If there was someone I knew would be in town and I was kind of interested in them and I thought they were kind of interested in me, then it would probably just be easier to get wasted and see what happens as opposed to like just worrying about it the whole night.* (Nicola)

Four participants also framed binge-drinking as a strategy for coping with the negative emotions following a relationship break-up.

*I was actually dating a girl and in the relationship we never actually went very far and it kind of puzzles me a bit but then we kind of, like I stepped back and we broke up, and then a week later I found out she actually had slept with a mutual friend, a guy, a mutual friend. And I was really kind of pissed off, because we’d been together for about eight months, but of course she was very, like I was totally open with my friends about my sexuality and she was very tentative. She wasn’t sure. So, it was tentative. It was like hooking up, we never actually slept together but she kind of just pushed me away from time to time. I’m like: “Give her time, give her time.” But then, when we did break up, I think it was two weeks later and she went and slept with this guy and I was just really, really angry and, of course, I know that after that, that was a bad binge-drinking night.* (Luca)

*A couple of years ago I went through a period of like a month or two where I just got wasted. I had just broken up with my ex and I was like in a state and I just wasted every weekend.* (Nicola)

A small number of participants differentiated alcohol use in romantic relationships with same-gender partners and in relationships with opposite-gender partners. Two participants reported that being in a same-gender relationship could have a number of stressors attached, which increased binge-drinking. Xue identified the stress from different needs regarding being out about the relationship as one crucial stressor:

*My partner she didn't really want anyone to know that we were going out just because we were both girls and because it just feels, well I was okay with it, but*
because she didn’t want to, there was like a whole battle with being out and not kind of thing. [...] I wanted to be out about the whole thing, but because she didn’t want to, want anyone else to know kind of thing except for a couple of our closest friends, yeah, it was just annoying. [...] I guess if I drank more I’d stop thinking about it so much.

Two participants identified being in opposite-sex relationships as less stressful than being in same-sex relationships, but identified a different set of stressors in opposite-sex relationships. The main stressor identified was that participants felt that their more-than-one-gender sexual attraction became invisible and was not sufficiently acknowledged.

Xue: When I started [dating] the guy I’m dating now, it just felt so much easier, because [if] someone would just ask me if I was in a relationship they assumed that it was a guy. Like it annoyed me that they would assume it was a guy, but it kind of meant I didn’t have to explain anything and it was kind of easier and that annoyed me quite a bit, that it is just easier.

Sylvia (23, New Zealand European): Yeah I have that as well, that I have a boyfriend, but I want to add: “But I like girls, too”. But otherwise it just never comes up. And I am in a relationship and I am not going to be hooking up with people. But I’ve known people at uni for a few years and they don’t know. It’s not something I would, I don’t know how to bring it up. I don’t know it feels weird.

Theme 8: Sexual relationships

This theme identified binge-drinking as a strategy for initiating and justifying same-gender sexual contact (especially among cisgender women). This theme was linked with the sexual minority stigma and stress theme, in that participants binge-drinked in the context of sexual relationship-building to manage the stigma and stress associated with a minority sexual attraction (see Theme 2: Sexual minority stigma and stress).

The majority of participants (especially the cisgender young women) reported that they or other more-than-one-gender attracted young people binge-drank to facilitate approaching others for same-gender sexual encounters. The majority of participants reported that pursuing sex with members of other genders was easy, but were anxious about identifying, flirting with, and initiating sexual contact with others of the same gender. These participants identified their and others' binge-drinking as a strategy for easing anxiety around initiating sexual contact with same-gender partners.

Nicola: It [alcohol] doesn’t get rid of the anxiety. It just makes the hooking up happen sooner, so you don’t have to be anxious anymore.
Ngahuia: Like when you blink and you are talking and you blink again and suddenly Nicola: You are kissing them and you like don’t know how this happened, but this is good. Whereas if you were sober, you would be quite aware of the proximity of their face to your face.

And then there are people who are really scared about what they think of them. So they just get really drunk and use alcohol as an excuse for whatever they do, for
people to sort of get over the fact that, well, a guy is kissing another guy kind of thing. If no one actually cared, then they wouldn’t get so drunk and do it. (Oli)

The majority of participants also reported that they or other more-than-one-gender attracted young people had binge-drunk in order to excuse approaching others of the same gender in case their approach was rejected.

A lot of bisexuals, if they’re females, they’ll get drunk with a girl that they’re not sure if she’s bi or if she’s straight and they figure the best thing to do is get drunk, have a soppy drunk kiss and if they’re okay with it, then fine, and if they’re not, then you were just drunk and it’s all good. (Anne, age and ethnicity not reported)

A lot of bisexual people would drink, too, while they are figuring things out, because it is more socially acceptable to kiss someone of the same-sex while you are drunk, whereas if you did it normally, your friends would be like: “What?”. But that’s another stereotype that happens when you’re drinking, so maybe that is the problem, because it is not so socially acceptable to do it normally. (Isobel)

Arahia: You kind of drink more so you can say the next day: “Oh, I was just drunk, you know. It didn’t mean anything really.” Sometimes it does, sometimes. But if you wake up the next morning with a huge hangover, you can say to the person: “Oh god, it didn’t mean anything. I was just so wasted.”
Fiona: “Didn’t mean to grope you. I was just drunk.”
Arahia: It is such a good excuse.
Fiona: And I think bi people definitely use it as more of an excuse than any other sexual orientation.

Several cisgender male participants reported drinking some alcohol, but not binge-drinking, to ease their anxiety during same-sex sexual networking.

I haven’t had sex with that many people. So when I have, it has tended to be that happy awkwardness but I have had lots and lots and lots of close calls, where I have thought this is going somewhere, he is definitely keen, but either the situation or they will freak out somehow and it will not happen and that is my major stigma around pre-sexual situations. Like so close, but this is gonna probably fall apart and not going to happen for some reason. […] A little bit of alcohol does help as well with that for me, just because both of us first of all do feel physiologically horny so I know they are not going to be quite as judgemental, because I fear judgement as well. And it helps me be a little more forward and a little less inhibited basically. […] It would for me be a moderate amount not very much, so it would be a few beers or a few glasses of whiskey or something like that and by a few I mean two or three maximum basically over the course of an evening, so it doesn’t need to be a huge amount. (Keith, 25, New Zealand Indian)

I don’t tend to go for and usually try and get to know someone first. Usually I have to get to know them enough to put up with them the next day. I don’t think I have got really drunk and seduced anyone. (Mark)
Two participants argued that initiating sexual contact when drunk was an accepted practice for women, but remained stigmatised for guys.

It's not a big deal these days if two straight girls get drunk and hook up like and no one will say: “Oh, they are obviously gay or bi.” Or something. It is just that they are having a bit of fun, whereas it is completely different with teenage guys. If a guy hooks up with another guy on occasion, then all his friends, not all the time, but I think they are a very small minded community and all his friends: “You are gay.” And there is not bi or straight or wondering about it. You are just gay. That is it. You see, I think it is easier for chicks to drink and throw their sexuality into the wind and do whatever they want. (Rebecca)

Two participants reported that they or other more-than-one-gender attracted young people had binge-drunk and started questioning their sexual attraction in a reaction to being rejected from a potential same-sex sexual partner.

There is such a stigma and there is so much stuff going on, when you do get rejected, if you are drinking when it happens, you tend to just drink more and a lot quicker. Yeah, just because if you get rejected, if you are straight or you get rejected by a guy it is just like: “Oh well, shit happens.”. But if you get rejected by a girl, it is kind of like: “Am I even bi?”. And you have this massive freak out and maybe girls just don’t like you and you should just try and like boys and only boys. And you get horribly drunk and then you end up trying to make out with another of your female friends that you don’t have a crush on. And then you get even more drunk and it just, phew. I don’t know. I think when you combine alcohol with being unsure about your sexuality or defensive about it, it just ends up being a really explosive situation and that's kind of the problem. (Anne)

The minority of participants, who had used online dating sites for sexual networking, reported that they did not use alcohol when meeting people for sex.

I used to be on [names online dating site]. It is a horrible website, but if ever I met anyone, I was sober. I never met anyone, when I was drunk, because I figured, if you are going to meet a stranger, you might as well be sober, because then you have got two problems, being drunk and meeting a stranger. (Ruth)

Four participants suggested that interventions reducing heteronormativity would reduce the anxiety of same-gender sexual networking and, in turn, the associated binge-drinking.

Get rid of any perception of what's normal, like normative relationships and like how people should go about finding a partner and who that partner should be. You wouldn’t be able to go: “Right. I've had six drinks and I'm going over to kiss them and they'll like me.” You can’t do that anymore. (Vera)
Theme 9: Access to other more-than-one-gender attracted young people

This theme argued that access, and lack of access, to communities of more-than-one-gender attracted young people could decrease and increase binge-drinking, respectively. This theme complemented the social inclusion theme, which argued that prejudices, stereotyping, harassment, and discrimination from lesbian and gay communities and heterosexual communities made more-than-one-gender attracted young people feel socially excluded and lonely, and, in turn, increased their binge-drinking (see Theme 1: Social inclusion).

Four participants said that having few or no more-than-one-gender attracted young people as friends, who understood them and with whom they could identify, was isolating and lonely.

I would say I wanted to go to a gay bar. A) no one would go with me, and B) most of them have already got guys and buggered off. So it’s more the frustration that you are basically stuck alone in that situation, because you cannot be bothered with that sort of situation. You want to bugger off and go try a gay bar and see if you can pick up a girl. It’s kind of not fair. I constantly go to straight bars, where you pick up boys. (Luca)

Several participants reported that for them or other more-than-one-gender attracted young people, when they were with more-than-one-gender attracted friends, this eased loneliness, was empowering, put them at ease, and enabled them to be themselves. Other benefits of socialising with other young people attracted to more than one gender were a sense of being understood, accepted, and supported, and not being exposed to biphobia and homophobia and their negative effects.

I have got one friend who is bi in my group who knows my big deep secret and you can make secret jokes with them that nobody understands like make eyes. It’s almost like it is empowering, because you don’t usually feel lonely. (Kate)

Sylvia: To all the straights, definitely males, I do need to explain what I am, which is just tiring.
Natsuki: Over and over and over.
Sylvia: Yeah. And then with gay girls, instead of being something else, I am half gay which is not how I feel like. I don’t feel like half a person. So again, it is like I don’t really, yeah like I am not normal in that group. So I think yeah, definitely, in a group of bisexual people I would definitely feel more comfortable.

Ngahuia: When I’m around my friends that are bisexual it’s like: “Oh, he’s hot.”, “Oh, she’s hot.”. You just kind of identify. It feels a lot more comfortable because you’re on the same wavelength.
Luca: Yeah.
Ngahuia: Yeah, so they get it. You don’t have to be exclusively one way or exclusively the other way and it’s really nice to have that.
Ngahuia: Yeah. You don’t have to feel guilty for like, you don’t have to feel bad for having, for liking both sexes.
I feel a lot more comfortable with [names partner], if I am around gay, bi people in that community. I was always more comfortable, because I am from a small town originally, full of straight people. I was one of two, three gay people I knew of my age in the whole like district and so I always felt really uncomfortable around straight people because I am used to them being quite homophobic and I am not used to here, where there are a lot of straight people who like going to the gay bars, and there’s not a problem, and they have no homophobia at all. That is why I am generally more comfortable around gay bi people, because I know they’re going to be more accepting. (Rebecca)

Several participants reported lacking access to communities of more-than-one-gender attracted young people. This included five participants, who critically noted that they lacked access to community organisations and support networks for more-than-one-gender attracted young people. Several participants explicitly linked not having access to communities of more-than-one-gender attracted young people to binge-drinking.

I guess what was perhaps, could have been linked to drinking was when I was kind of in your situation where I was the only both-sex attracted person in my group of friends and it was really hard to find other people that I identified with. So, I remember one night, I’ve lived in lots of different flats, and one night my flatmates and I came out and I was like, to my flatmate, who was a guy, I was like: “Find me a girl.” or something, because I just didn’t know what to do. I didn’t know, and so I was just drinking, I was like: “I am gonna go to this gay bar by myself and try.”. And just because I wanted to feel some kind of connection with other people that might identify. (Nicola)

When you feel accepted, welcome and happy, I am not going to get anxious or nervous and drink to feel accepted. (Vera, 24, New Zealand European)

**Theme 10: Positive public representations**

This theme argued that positive representations of and role models for young people attracted to more than one gender reduced binge-drinking, though instances of these representations were low.

Several participants expressed the belief and argued that positive public representations and role models would decrease the stigmatisation of more-than-one-gender sexual attraction. Several participants referred to a number of television programmes, which they viewed as portraying negative or lacking public representations of more-than-one-gender attracted people. A small number of these participants reported the belief that negative public representations of more-than-one-gender attracted people increased binge-drinking in more-than-one-gender attracted young people.

Having something like that [positive public representations and more-than-one-gender attracted role models] would be a huge confidence boost and get rid, and help get rid of some of the question marks for themselves in that way, because I would say a lot of people drink a lot more when they are uncomfortable with
something in their lives and they try to block it out. You get alcoholics, you get drug takers, all that sort of thing. (Cathy, 20, New Zealand European)
Discussion

Summary of findings
This study identified and described ten themes that emerged during discussions by eleven focus groups of 32 more-than-one-gender attracted young people on factors that increase and decrease binge-drinking in more-than-one-gender attracted young people in urban centres in New Zealand.

The study identified eight risk factors that increased binge-drinking in more-than-one-gender attracted young people. The social inclusion theme argued that more-than-one-gender attracted young people binge-drink to manage social exclusion from lesbian and gay, and heterosexual communities. The sexual minority stigma and stress theme, which described the effects of experiencing social exclusion, identified sexual minority stigma and stress and internalising biphobia as factors and processes that increase binge-drinking. The coming out theme identified that, as long as coming out to oneself was not conflictual and stressful, it did not impact binge-drinking in more-than-one-gender attracted young people, but some more-than-one-gender attracted young people, who experienced sexual attraction uncertainty and confusion, used binge-drinking as a strategy to manage these feelings. The theme also identified that positive reactions to coming out to others generally did not have an effect on binge-drinking, but negative reactions to coming out to others increased binge-drinking. The mental health theme identified co-morbid mental health conditions, prominently anxiety, depression, and self-harming behaviours, as increasing binge-drinking in more-than-one-gender attracted young people. The gender expression and norms theme identified that masculine gender expression increased binge-drinking in cisgender young women as well as transgender and cisgender young men attracted to more than one gender, and that female gender norms increased binge-drinking in more-than-on-gender attracted cisgender young women. The bars and parties theme identified that the majority of more-than-one-gender attracted young people binge-drank at higher rates in or at straight bars or events than in or at lesbian and gay bars or events, but that some drank more in or at lesbian and gay bars or events than in or at straight bars or events. The romantic relationships theme identified stages of romantic relationships in which binge-drinking can occur, namely the beginning of the relationship, to move past an awkward situation, or at the end of a relationship to cope with hurt, betrayal or loss. It also argued that the gender of a romantic partner can influence binge-drinking. The sexual relationships theme identified binge-drinking as a strategy for initiating and justifying same-gender sexual contact (especially among more-than-one-gender attracted cisgender young women).

The study also identified two protective factors, which could decrease binge-drinking in more-than-one-gender attracted young people. The access to other more-than-one-gender attracted young people theme, which complemented the social inclusion theme, argued that access to communities of more-than-one-gender attracted young people could decrease binge-drinking. The positive public representations theme argued that positive representations of, and role models for, more-than-one-gender attracted young people might decrease binge-drinking, though instances of these representations were low.
Relationship to the literature

This study confirms for New Zealand previous international study findings\textsuperscript{3, 11, 12, 15-19} that social exclusion (negative stereotyping, verbal harassment, physical abuse) from lesbian and gay communities and heterosexual communities is a key factor that increases binge-drinking in more-than-one-gender attracted young people. In comparison, it is plausible that exclusively same-gender attracted young people will not face social exclusion from lesbian and gay communities to the same extent as more-than-one-gender attracted young people do. Also exclusively opposite-gender attracted young people will not be socially excluded to the same degree from lesbian and gay communities as well as heterosexual communities based on their sexual attraction, which could provide a partial explanation for the observed higher rates of binge-drinking among more-than-one-gender attracted young people. Participants of this study described social exclusion from lesbian and gay communities and heterosexual communities in its various forms and with its multiple consequences as one of, if not \textit{the}, principal factor that increases binge-drinking in more-than-one-gender attracted young people. We note that several participants reported using other strategies than binge-drinking for managing their experiences of social exclusion such as engaging in political activism against social exclusion of sexual minorities, highlighting significant community resiliency.

The study contributes to the international literature on sexual minority stigma and stress by providing perspectives on a sexual minority group (more-than-one-gender attracted young people), in whom these factors, and their impact on binge-drinking, have rarely been studied and also by providing insights into how sexual minority stigma and stress act to increase binge-drinking. The study confirms the previous finding\textsuperscript{13} that some more-than-one-gender attracted young people binge-drink to ease the effects of social exclusion, namely sexual minority stigma and stress, and internalised homophobia. Similarly, exclusively same-gender attracted young people will also experience sexual minority stigma and stress, as well as internalised homophobia due to their experience of social exclusion. However exclusively opposite-gender attracted young people would not have to manage the stigma and stress arising from being a sexual minority person, which would explain the higher prevalence of binge-drinking in more-than-one-gender attracted young people, compared to young people attracted exclusively to the opposite gender. Another contribution of the study to the literature on sexual minority stigma and stress is that the study contextualises the multiple effects of sexual minority stigma and stress in relation to binge-drinking by linking sexual minority stigma and stress to other factors such as social exclusion and sexual relationship-building.

The international literature debates whether coming out to others increases\textsuperscript{22, 23} or decreases\textsuperscript{24} binge-drinking in more-than-one-gender attracted young people. This literature has mainly focused on exclusively same-gender attracted young people, but our study investigates this debate for more-than-one-gender attracted young people. Our study suggests that it is the negative reactions to coming out that increase the chances of binge-drinking in more-than-one-gender attracted young people, whereas positive reactions do not impact binge-drinking.

Furthermore, several cisgender young women as well as transgender and cisgender young men attracted to more than one gender reported in this study that they had drunk more heavily, when they felt more masculine. We argue that such behaviour references normative societal gender codes, in which binge-drinking is constituted as desirable for consolidating a
legitimate masculine identity\textsuperscript{30, 31}, but is an unacceptable behaviour in women\textsuperscript{32} in New Zealand. However, female participants also stated that they binge-drunk to manage the discomfort they felt when wearing clothes conventionally constructed as feminine, such as dresses and high-heels. Consequently, conventional gender codes act as a risk factor for binge-drinking in more-than-one-gender attracted young people in New Zealand, and therefore need to be acknowledged. That some unique factors emerged for more-than-one-gender attracted transgender young people highlights the inter-relationship between more-than-one-gender sexual attraction, binge-drinking, and gender identity, which emphasizes the need for targeted alcohol research for this sub-group of more-than-one-gender attracted young people.

This study supports a previous study finding\textsuperscript{25} that having other more-than-one-gender attracted young people as friends decreases binge-drinking. We further argue that access to communities of young people attracted to more than one gender decreases binge-drinking by increasing a sense of belonging and social inclusion and by reducing exposure to, or buffering the negative effects of, sexual minority stigma and stress.

This study identified the binary construction of heterosexuality/homosexuality which serves to present heterosexuality and homosexuality as the only two forms of sexuality that exist in society\textsuperscript{33} as problematic, as it caused some participants to question their sexual attraction and also caused significant stress in some more-than-one-gender attracted young people, which some participants reported managing through binge-drinking. Therefore the findings highlight that the societal pressure placed on more-than-one-gender attracted young people to identify exclusively as lesbian/gay, or heterosexual respectively\textsuperscript{33, 34}, needs to be disrupted to reduce binge-drinking in more-than-one-gender attracted young people.

A number of researchers have argued that the higher prevalence of co-morbidities such as depression, anxiety disorder, and self-harming behaviours in young sexual minority people are directly linked with binge-drinking. Considering that several of the factors identified in this study such as social exclusion and sexual minority stigma and stress are also a cause for these other mental health conditions, and that these mental health conditions are also linked to binge-drinking, then it is not surprising that they are factors that influence (increase) binge-drinking.

Several studies suggest that more-than-one-gender attracted young people are more likely to binge-drink than exclusively opposite-gender attracted young people, because they socialise more in or at lesbian and gay bars or events, where binge-drinking may be more common\textsuperscript{3, 12, 26-28}. However, the majority of participants in this study reported being more likely to binge-drink in or at straight bars or events than in or at lesbian and gay bars or events, arguing that they were bored in straight bars or at straight events and felt that these places lacked opportunities for socialising and networking for romantic and sexual relationships.

Study limitations

The study placed significant focus, effort, and resources into recruiting Māori and Pacific participants. This included involving collaborators and advisors with extensive networks of Māori and Pacific sexual minority young women and men. Despite these efforts, the number
of Māori and Pacific participants of this study at three participants, and one participant respectively, was too small to permit distinct thematic analyses for the data from Māori and Pacific participants. We recommend future research into factors increasing and decreasing binge-drinking in Māori and Pacific more-than-one-gender attracted young people.

Similarly, the study attempted to recruit sufficiently large numbers of transgender participants to permit separate analyses of this sub-group, but only two more-than-one-gender attracted transgender young people participated in the study, which meant that separate analyses for this subgroup could not be conducted. Furthermore, no male-to-female transgender women participated in the study, so that themes on factors increasing and decreasing alcohol use in more-than-one-gender attracted transgender women are missing from the study altogether. We recommend future studies that specifically investigate risk and protective factors for binge-drinking in transgender young people attracted to more than one gender.

Furthermore, a small number of participants in this study reported that they rejected binge-drinking altogether. Studying factors that influenced these more-than-one-gender attracted young people to not binge-drink could provide important insights. Studying strategies and mechanisms that this sub-group uses to manage the factors that increase binge-drinking in other more-than-one-gender attracted young people could provide important information on effective coping strategies and mechanisms.

The purposive sample of this study included a disproportionate proportion of tertiary students (84.4% of all focus group participants). According to the latest official statistics on tertiary education, 32% of young people aged 18-24 were enrolled in full time study in New Zealand in 2006 (http://www.stats.govt.nz/browse_for_stats/income-and-work/employment_and_unemployment/young-people-1986-2006-study-work-income/study.aspx). As such, the study may underrepresent themes from the large group of more-than-one-gender attracted young people, who are not in tertiary education. However, it could be argued that if tertiary study environments provide exposure to liberalism around minority sexual attractions and if tertiary student communities are more liberal than non-student communities, then young people not in tertiary study may experience a range of other factors which contribute to binge-drinking, or worse expressions of the factors described in this study such as stigma, social exclusion, and difficulties around entering romantic or sexual relationships.

**Study strengths**

To our knowledge, factors that increase and decrease binge-drinking in more-than-one-gender attracted young people have not previously been studied extensively in New Zealand.

Research investigating factors that increase and decrease binge-drinking in sexual minority young people is usually quantitative in nature. Qualitative research investigating these factors is required to develop an in-depth understanding of these factors and how they interrelate with each other to increase or decrease binge-drinking in sexual minority young people. This study provides such a qualitative research perspective for more-than-one-gender attracted young people.
This study provides information on a sexual minority group for which research is not commonly available. While some studies on risk and protective factors in sexual minority young people have been conducted, these often do not focus on the group defined by sexual attraction to more than one gender, which appears to be a group with significant risk from binge-drinking. Furthermore, studies of young people with a sexual minority attraction generally group more-than-one-gender attracted young people together with those attracted exclusively to their own gender. However, more-than-one-gender attracted young people are likely to face social exclusion from both exclusively same-gender and exclusively opposite-gender attracted people. Therefore, studying minority sexual attractions together glosses over any disparities in societal experiences between these groups, which in turn may result in different risk and protective factors for binge-drinking in these populations. By exclusively focusing on more-than-one-gender attracted young people this study provides a more accurate picture of the risk and protective factors for binge-drinking in more-than-one-gender attracted young people.
Implications

This study has implications for public health and alcohol addiction policy and practice that aims to reduce binge-drinking in more-than-one-gender attracted young people. This includes implications for those public health practitioners aiming to address inequalities in binge-drinking by sexual attraction in young people.

It is important to emphasise at this point again that this study did not only find that binge-drinking was an issue affecting some young people attracted to more than one gender, it also found that many more-than-one-gender attracted young people (both those participating in this study and those that study participants reported about) demonstrated considerable resilience with regards to binge-drinking and its determinants such as stigma and social isolation. Although obviously not the key aim of this study, we have identified throughout this report, wherever feasible, the strategies that study participants reported they or other young more-than-one-gender attracted people used instead of binge-drinking and to avoid binge-drinking. These strategies provide important pointers for public health practitioners (and other practitioners such as social workers) who design population-level interventions to reduce binge-drinking in more-than-one-gender attracted young people, as well as clinical practitioners treating alcohol addiction in more-than-one-gender attracted young people.

Public health policy and practice

Based on the study findings, we recommend three principal types of population-level interventions to address binge-drinking in more-than-one-gender attracted young people. The simple logic for the proposed types of interventions is that they reduce factors increasing binge-drinking and increase factors that decrease binge-drinking.

The first type of intervention are those that support community-building in more-than-one-gender attracted young people. Examples of such interventions include establishing or strengthening community organisations and spaces dedicated for more-than-one-gender attracted young people. By strengthening communities of more-than-one-gender attracted young people, these interventions will prevent exposure to factors identified in this study as increasing binge-drinking in more-than-one-gender attracted young people such as exposure to social environments in which more-than-one-gender sexual attraction is socially excluded and, as a result, stigmatised and stressful. By increasing a sense of social inclusion, these interventions will tackle the determinants of binge-drinking, including perceived stigma, stress, and a sense of loneliness. Furthermore, interventions that strengthen communities of more-than-one-gender attracted young people will provide an opportunity for more-than-one-gender attracted young people to organise against binge-drinking and as a community exchange and develop effective strategies for preventing binge-drinking.

The second type of intervention that this study points towards are interventions that decrease stigma associated with sexual attraction to more than one gender. This could include such interventions as secondary school education and broad anti-stigma campaigns. For example, classroom health and sexuality education provides a valuable opportunity to build resilient sexual minority communities which are seen as a normal part of New Zealand
society. Focussing closely on diversity within sexual orientation and gender identity, on normalising the position of sexual minority populations in society, and on identifying support and information networks, would work to both reinforce the self-esteem of sexual minorities and to address stigma and discrimination from lesbian, gay, and heterosexual populations. Sexuality education in New Zealand schools has been criticised by the Education Review Office in the past for not effectively addressing the needs of students\(^{35}\), and it is worth considering the impact this may have on the lives of sexual minorities. One example of a prominent anti-stigma campaign that has been shown to work is the national ‘Like Minds, Like Mine’ campaign that was successful at raising public debate and social acceptability of depression in New Zealand society. A similar national campaign designed to increase acceptance of sexual minority populations is likely to reduce binge-drinking, as well as a range of other issues falling in the domain of mental health in sexual minority populations, including more-than-one-gender attracted young people.

At the highest level of policy-making, a third type of intervention that have been shown to effectively reduce negative mental health statistics in sexual minority populations are social policies that reduce institutional discrimination by providing equal rights to sexual minority populations. There is evidence\(^{36}\) for the effectiveness of state-level social policies such as human rights legislation protecting from sexual orientation discrimination in reducing the prevalence of mental health issues in sexual minority populations. It is therefore plausible that other state-level policies, which reduce sexual orientation discrimination and, in turn, sexual minority stigma and stress, such as legislation enabling same-gender couples to marry would also have a positive effect on binge-drinking in sexual minority populations, including more-than-one-gender attracted young people.

**Alcohol addiction treatment**

This study provides alcohol addiction practitioners with an understanding of some factors that can be addressed in alcohol addiction treatment with more-than-one-gender attracted young people.

For example, the study identifies negative reactions to coming out to others at a time when some more-than-one-gender attracted young people may require additional support from their counsellor, therapist, or sexual minority support groups in order to prevent binge-drinking being used as a strategy for coping with the stress associated with such, although potentially rare, but likely stressful and emotionally challenging events.

Coping strategies identified throughout the report provide treatment practitioners with an insight as to the types of strategies that more-than-one-gender attracted young people have successfully applied. For example, the fact that some participants described reacting to experiences of social exclusion by organising against such social exclusion in their communities shows that this strategy can be promoted as one possible alternative to coping through drinking alcohol.

This extends and provides further detail to national guidelines for alcohol addiction prevention and treatment in sexual minorities\(^{37}\).
Conclusion

This study identified and described, from focus group talk, factors that increase and decrease binge-drinking in more-than-one-gender attracted young people. It found that many more-than-one-gender attracted young people are making strong and healthy decisions about avoiding or reducing binge-drinking, but more can and must, be done through community and population-level policy interventions and at the individual level through treatment to reduce binge-drinking in more-than-one-gender attracted young people. We proposed, based on the study findings, several interventions that by addressing these factors will reduce binge-drinking in more-than-one-gender attracted young people and will address the observed inequalities in binge-drinking by sexual attraction in young people.
Factors increasing and decreasing binge-drinking in young people attracted to more than one gender

References

2. Rossen FV, Lucassen MFG, Denny S, Robinson E. Youth ‘07 The health and well-being of secondary school students in New Zealand: Results for young people attracted to the same sex or both sexes. Auckland: The University of Auckland; 2009.