

Understanding LGBTQ+ youth; Preventing Suicide

American Foundation for Suicide Prevention
Maryland and Delaware Area

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Overview

- Scientific consensus on suicide and LGBTQ+ populations
- Understanding contemporary LGBTQ+ youth
- Strategies for safe and supportive communities – and preventing suicide

Scientific Consensus:

Suicide and Suicide Risk in LGBT Populations:

Review and Recommendations

Journal of Homosexuality, 2011

(*LGBT Health*, 2015)

- Scientific consensus regarding LGBT suicide risk
- Strategies for Prevention and Intervention

Scientific Consensus:

Death by suicide:

- Two (**now several**) population-based psychological autopsy interview studies conclude no difference (but there are methodological limitations) (McDaniel et al., 2001; **Plöderl et al., 2013**)
- Danish mortality data of registered partners: same-sex were 4 times more likely to die by suicide (Qin et al., 2003)
- **U.S. sexual orientation disparity in death by suicide is strongest at younger ages** (Ream, 2018)
- **U.S. mortality data of adults: WSW evidence higher mortality (no differences for MSM)** (Cochran & Mays, 2015)

Scientific Consensus:

Prevalence of Ideation and Behaviors:

- Consistent findings: 2-6 times higher rates of suicidal thoughts, intent, or behaviors – *among youth* – based on same-sex sexual orientation, identity, or behavior
- Strongest results: youth; bisexual people; gender?

Scientific Consensus:

Youth:

- Several studies show that suicide behaviors:
 - Reflect a desire to die
 - Are moderate to severe in lethality
 - Require medical care

Adults:

- Findings generally consistent with youth studies
- Stronger results for lifetime (compared to recent) behaviors (consistent with youth studies)

Scientific Consensus:

Transgender people:

- Community samples show exceptionally high rates of suicidal ideation and behavior
- Two new European clinical studies show disproportionate number of suicide deaths among people who have been received medical intervention for gender transition
- ~~No population-based studies~~
 - 2017 study: Transgender youth had 3 times higher odds of suicidal thoughts – *largely explained by victimization*

Scientific Consensus:

- There is consensus that there is risk for suicide in LGBT communities.
- What predicts that risk, and what can we do about it?
- **Risk** and Protective Factors:
 - Typical for all people, but disproportionate among LGBT people
 - Unique to LGBT people

Scientific Consensus:

Typical Risk Factors:

- Age
- Education and income
- **Ethnicity**
- Depression / psychiatric illness
- Substance ab/use
- Occupation

Scientific Consensus:

Unique Risk Factors: “Minority Stress”

- Disclosure / coming out
- Gender non-conformity
- Experiences of discrimination
- Experiences of victimization
- Homophobic bullying
- Parental rejection / abuse
 - Experiences of sexual orientation / gender identity change therapy
- Conservative religious community affiliation

Scientific Consensus:

Unique Protective Factor:

- LGBT peer support
- LGBT-related social support
 - Support from parents **and straight friends**
- Supporting social transition for transgender youth
- *Structural conditions:*
 - *Presence of LGBT-supportive policies (e.g., school gay-straight alliance clubs)*
 - *LGBT supportive contexts (% same-sex couples; democrats)*
 - *Government-funded mental health care*

Scientific Consensus: What we need to know...

- Subpopulation differences:
 - Sexual identity (LGB)
 - Queer, questioning unsure
 - Trans/gender
- Intersectional differences
- Much more about protective factors
- Strategies for prevention and intervention

Scientific Consensus: Recommendations for Treatment

- Physicians should routinely elicit suicide and mental health information – and sexual orientation / gender identity information
- Detailed, accurate (continuing) education is needed for clinicians
- Clarity that the risk is based on typical as well as unique minority stressors: not all LGBT people are at risk

Scientific Consensus: Recommendations for Prevention

- Address LGBT suicide and its causes in state / community suicide prevention plans
- Educate community gatekeepers about risk factors for suicide among LGBT populations
- Educate LGBT community about risks – and resources for treatment and support
- Design LGBT-specific suicide prevention and intervention strategies – to reduce risk and bolster protective factors

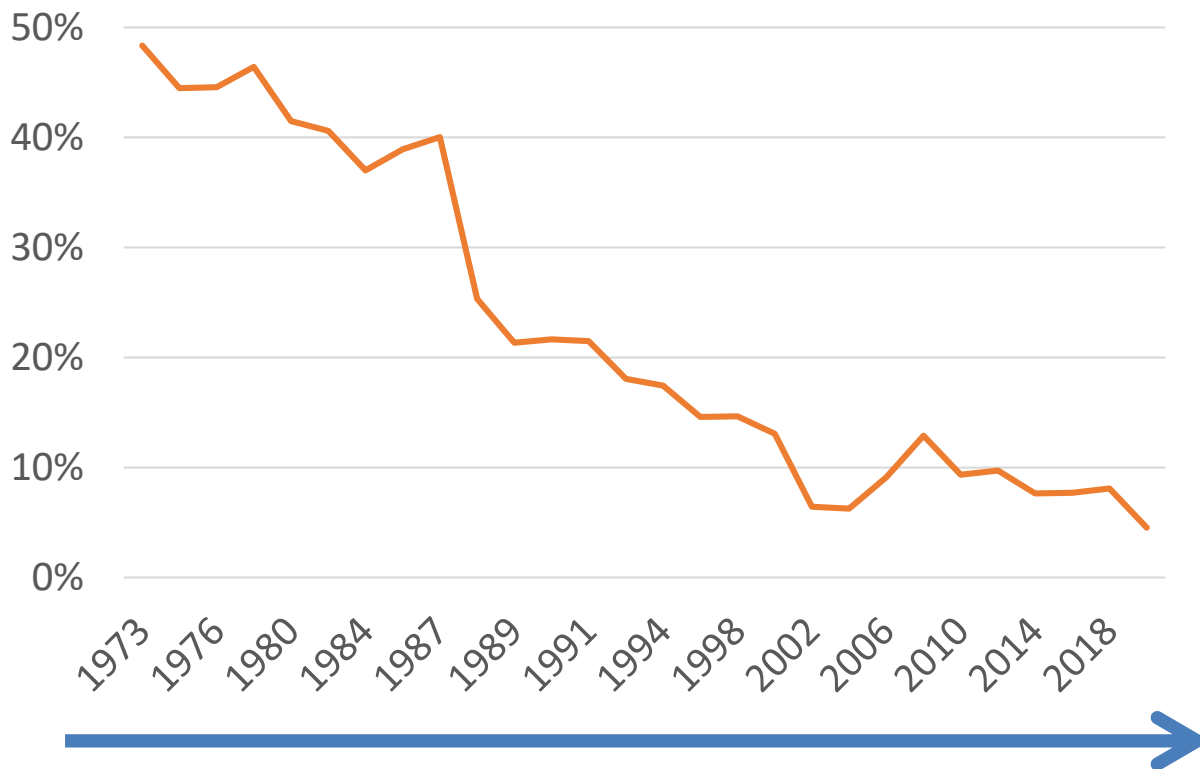
Scientific Consensus:

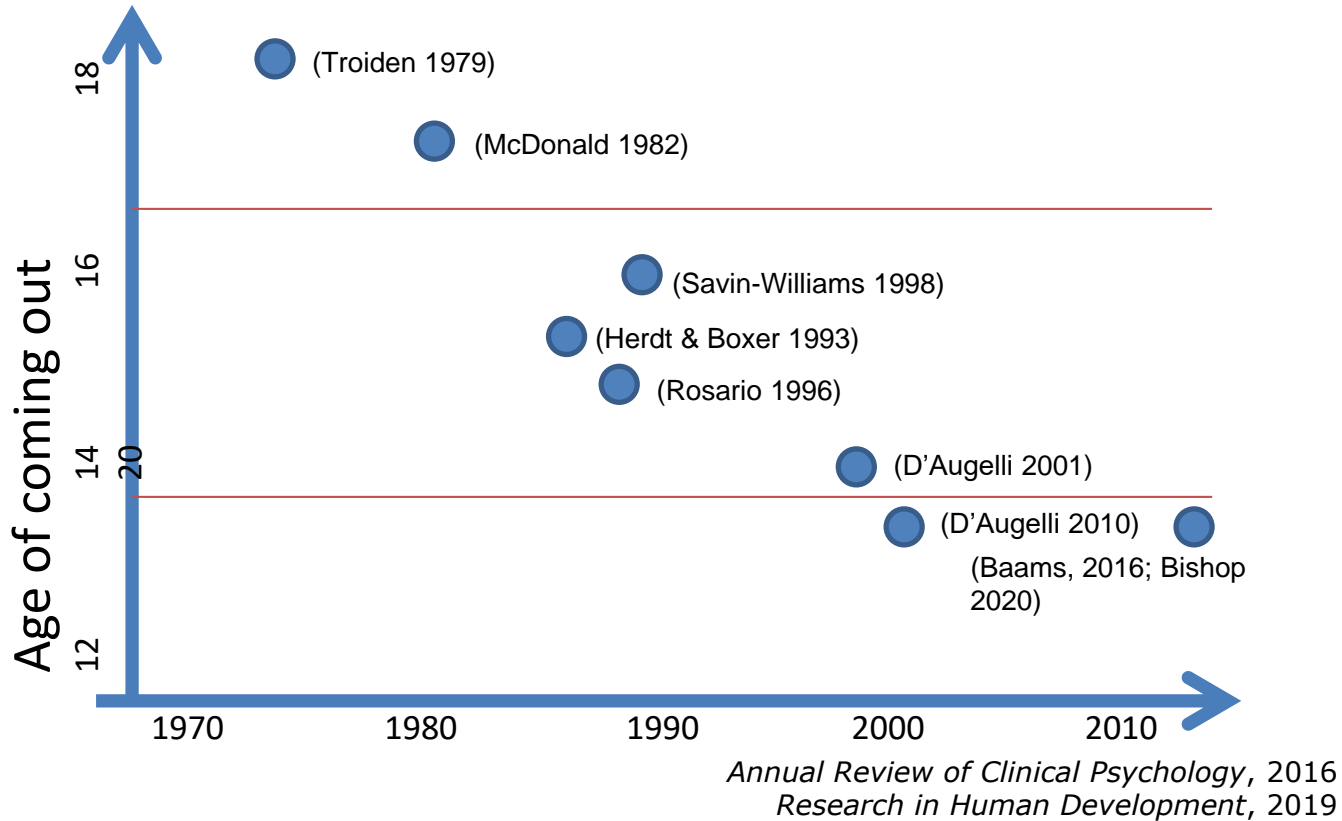
Recommendations for Public Policy

- Decrease stigma and negative mental health effects through laws and policies to eliminate discrimination /differential treatment: education, employment, housing, **marriage** and family, and health and mental health care
- Improve access to mental health services through nondiscrimination policies **and** ~~expanded health coverage to same-sex partners*~~
- Amend protective legislation include LGBT individuals*

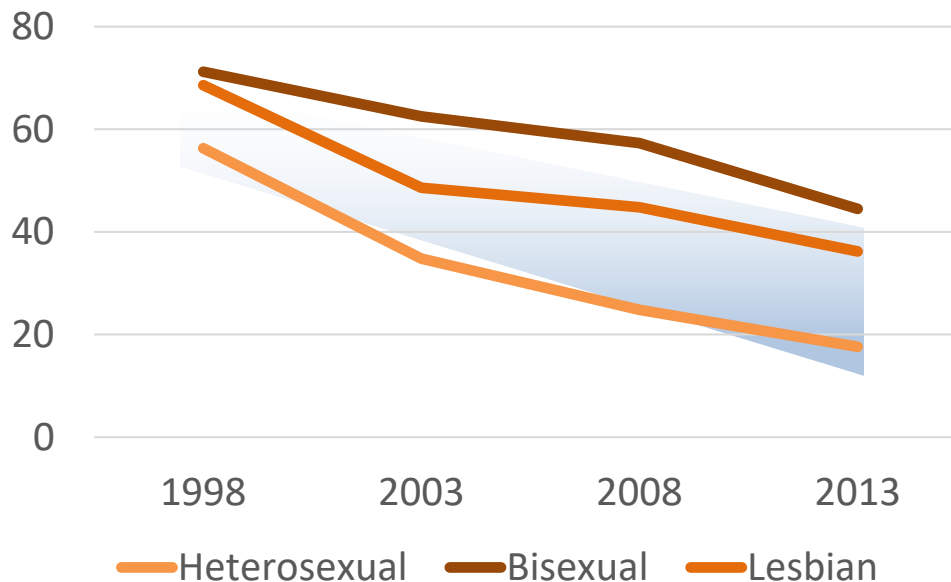
Understanding Contemporary LGBTQ+ Youth

What's going on with LGBTQ+ Youth?

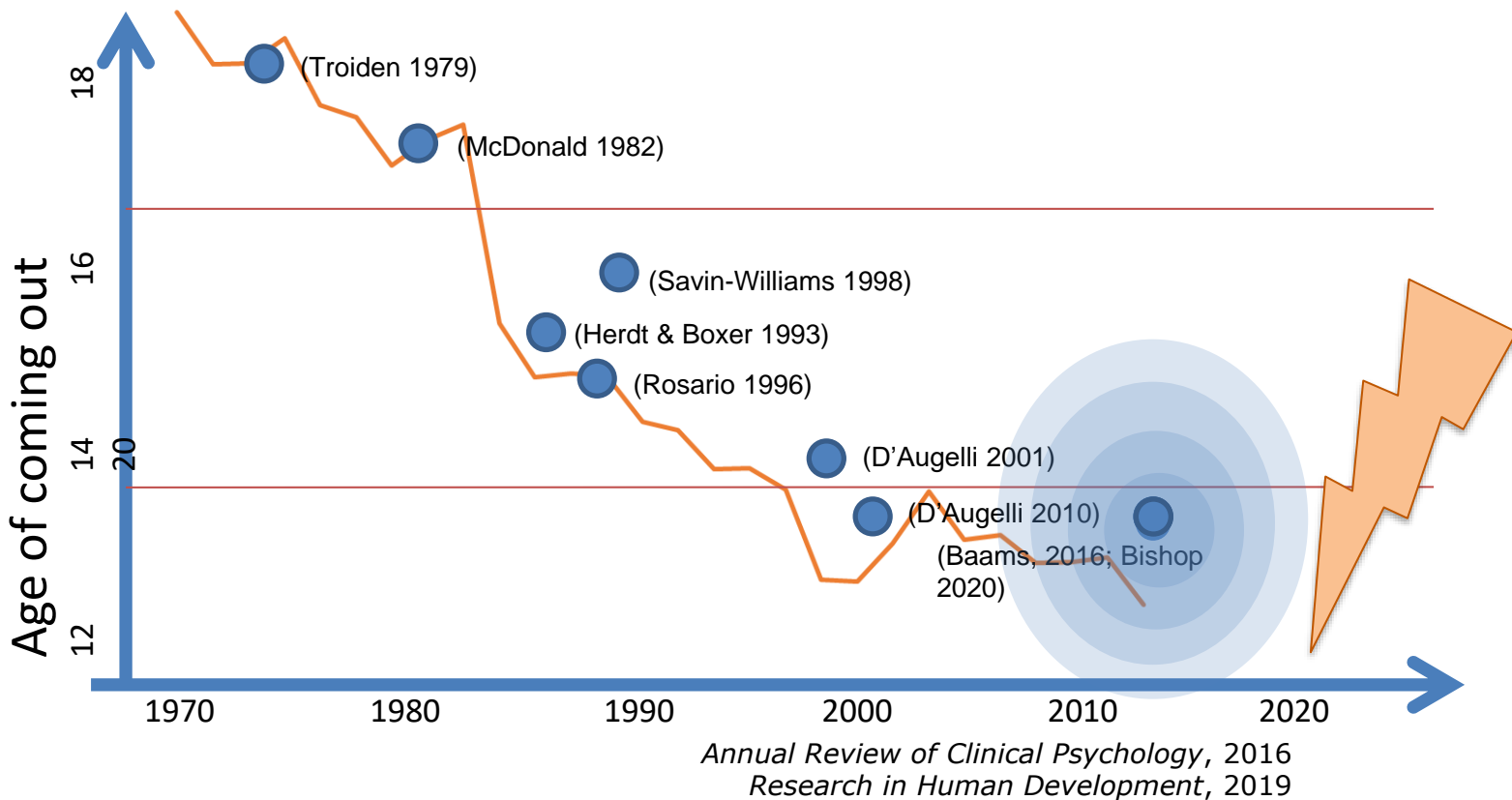




LGBTQ Youth Disparities are Stable or Widening Adolescent Girls' Lifetime Cigarette Use



Drug and Alcohol Review, 2018



STRATEGY 1

Inclusive,
**Enumerated
Policies**

STRATEGY 2

School Personnel
**Support and
Training**

STRATEGY 3

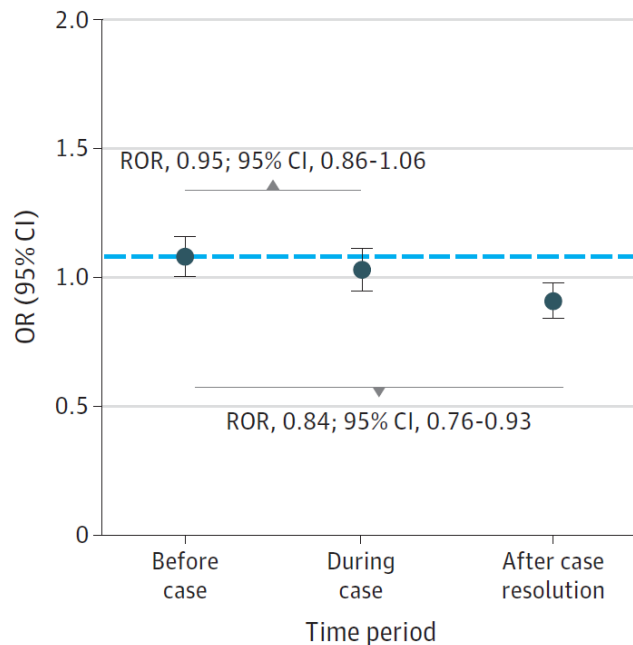
Student-Led Clubs
(GSAs)

STRATEGY 4

Access to LGBTQ-
Related **Resources and
Curricula**

Litigation as a strategy to address bias-based bullying

A Case schools vs control schools

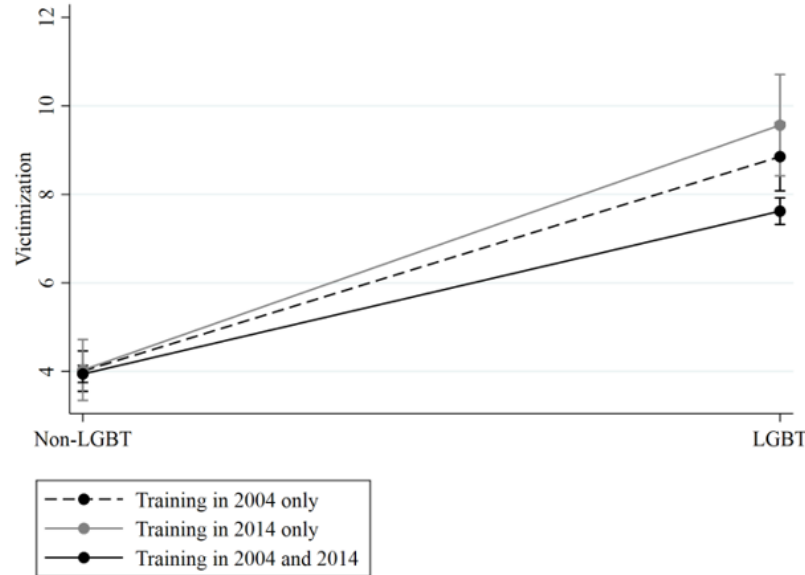


STRATEGY 1

Inclusive,
Enumerated Policies

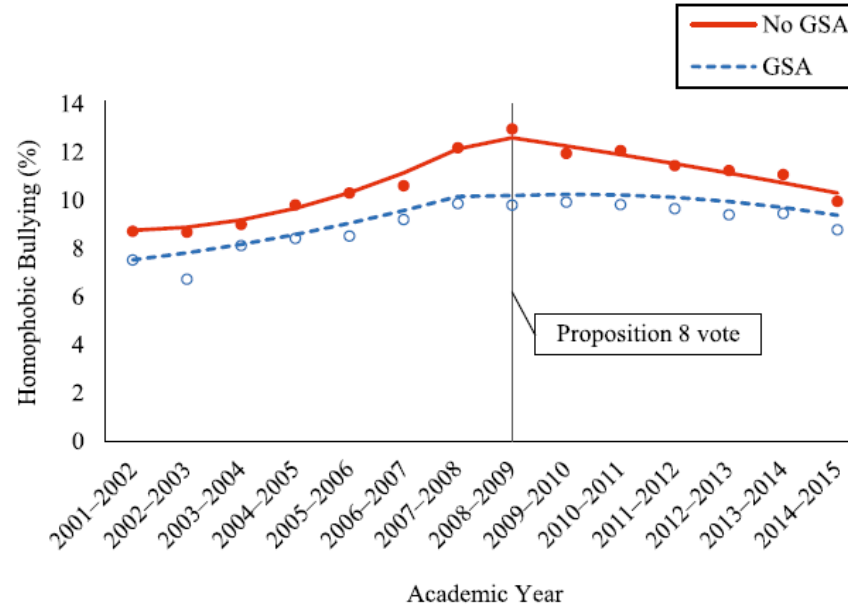
JAMA Pediatrics, 2021

SOGI training for teachers predicts less school victimization for LGBT students a decade later



STRATEGY 2
School Personnel
Support and Training

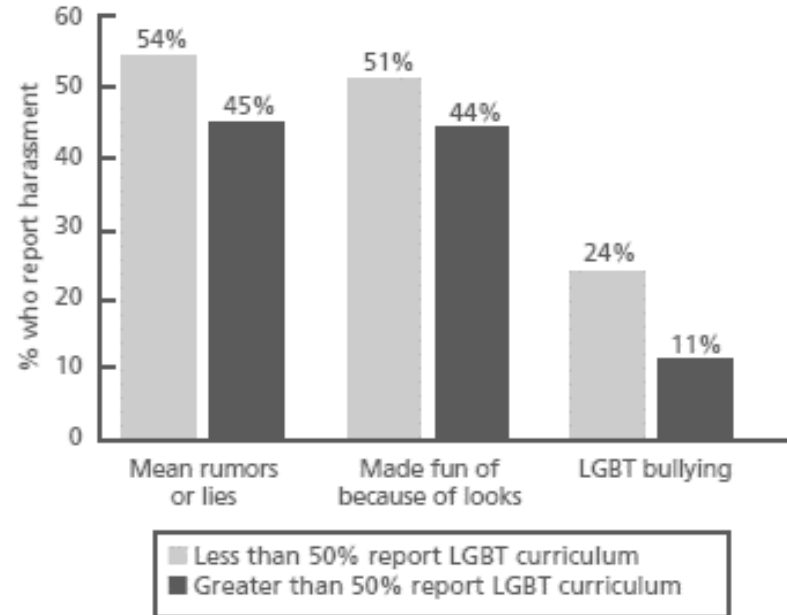
CA Prop 8, Homophobic Bullying & GSAs



STRATEGY 3

Student-Led Clubs
(GSAs)

Bullying is less common in schools where more students learn about LGBT issues



STRATEGY 4

LGBTQ-Related
Resources &
Curricula

Sex Education, 2015

STRATEGY 1

Inclusive,
**Enumerated
Policies**

STRATEGY 2

School Personnel
**Support and
Training**

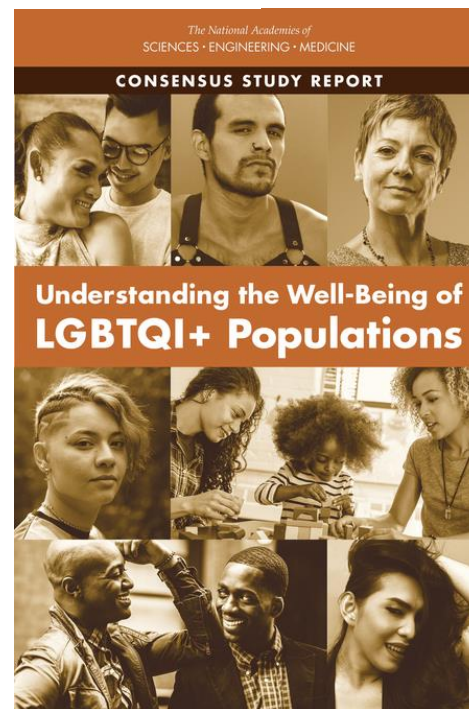
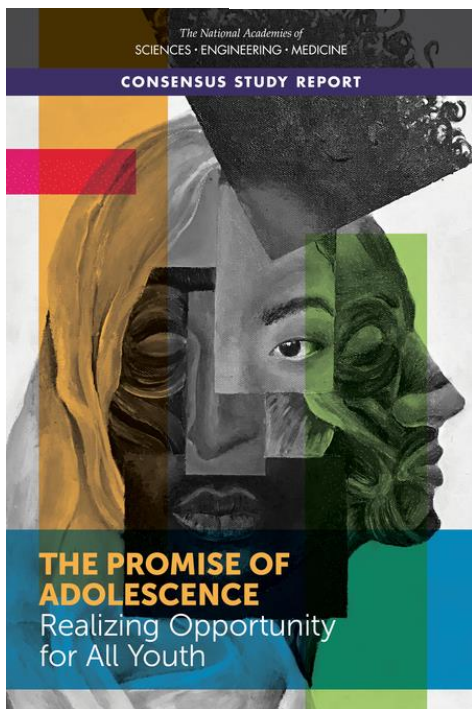
STRATEGY 3

Student-Led Clubs
(GSAs)

STRATEGY 4

Access to LGBTQ-
Related **Resources and
Curricula**

NATIONAL ACADEMIES *Sciences
Engineering
Medicine*



Summary

- We have scientific consensus on suicidality and LGBTQ+ populations
- LGBTQ+ youth have possibilities like never before – and face distinct challenges
- We have strong evidence for strategies to create safe and supportive communities – and prevent suicide

Gratitude

- Collaborators
 - Laura Baams, University of Groningen
 - Meg Bishop, University of Maryland
 - Jack Day, Central Michigan University
 - Jessica Fish, University of Maryland
 - Mark Hatzenbuehler, Harvard University
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 - Victoria Saba, University of Texas at Austin
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 - Ryan Watson, University of Connecticut
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