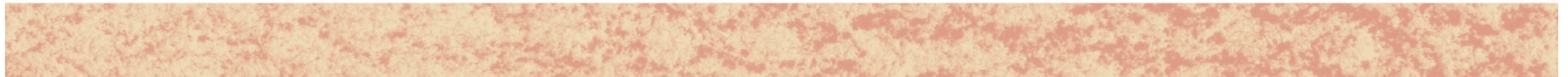# Suicide Prevention
among LGBT Youth

Suicide Prevention among Lesbian, Gay, Bisexual, and Transgender Youth:

A Workshop for Professionals Who Serve Youth

Developed by the Suicide Prevention Resource Center

Insert Leader 1 name and Organization here
**&**
Insert Leader 2 name and Organization here

This training is available at http://www.sprc.org/LGBTYouthWorkshopKit.asp.
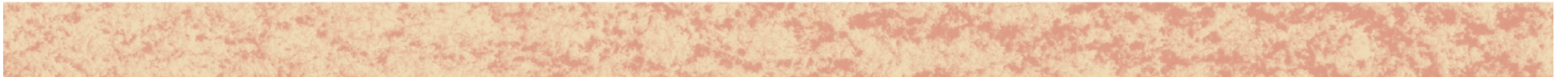
History

- *National Strategy for Suicide Prevention* listed LGBT youth as a special population at risk in 2001.[1]

- SPRC published *Suicide Risk and Prevention for LGBT Youth* in 2008. It is available online at www.sprc.org/library/SPRC_LGBT_Youth.pdf.

1. U.S. Department of Health and Human Services, 2001
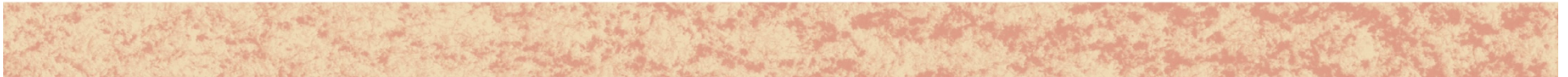
Rationale for this Workshop

- More suicidal behavior in LGBT youth

- Opportunity to modify risk and protective factors

- Opportunity to develop/adapt interventions to be culturally competent with LGBT youth

Workshop Objectives

At the end of this training, you will be able to:

1. Use terminology for suicidal behavior and LGBT issues correctly

2. Describe research related to suicidal behavior among LGBT youth

3. Discuss risk and protective factors for LGBT youth and the implications

4. Assess your school's or agency's cultural competence with LGBT youth and plan next steps

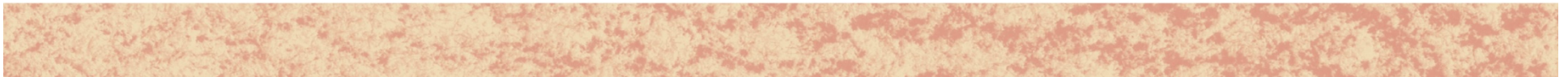5. Describe strategies to reduce suicidal behavior among LGBT youth
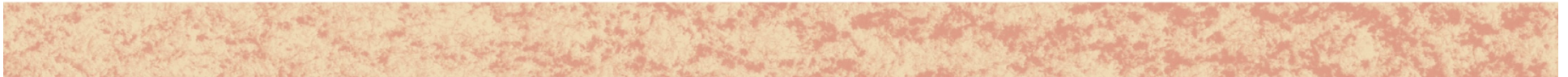
Suicide

Suicide is a major public health issue, meaning:

- Suicide affects large numbers of people.

- Prevention is based on research that is mostly related to risk factors.

*Most importantly, suicide can often be prevented.*

Suicide

- Suicide is the 11th leading cause of death in the United States.[1]

- Close to 35,000 people die by suicide each year.[1]

- 678,000 adults received medical attention and 500,000 adults reported spending at least one night in the hospital for suicide attempts in 2008.[2]

- 1.1 million adults reported attempting suicide in the past year.[2]

1. Centers for Disease Control and Prevention, 2007 (retrieved 2010).
2. Substance Abuse and Mental Health Services Administration, Office of Applied Studies, 2009.
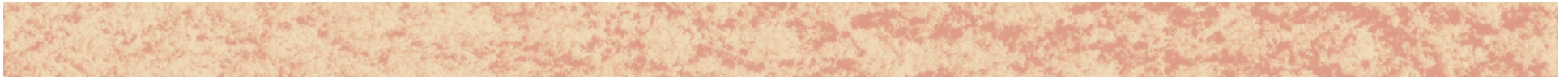
Youth and Young Adult Suicide

- Suicide is the 3rd leading cause of death for youths and young adults in the United States.[1]

- Over 4,000 youths and young adults die by suicide each year.[1]

- About 1 out of every 15 high school students attempts suicide each year.[2]

1. Centers for Disease Control and Prevention, 2007 (retrieved 2010).
2. Centers for Disease Control and Prevention, 2010.
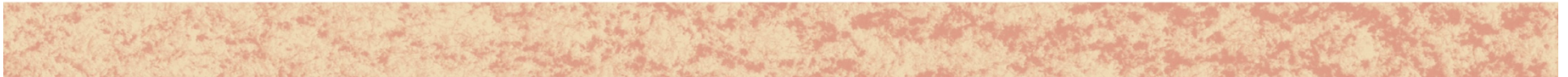
What causes suicide?

- Suicide is a complex behavior, driven by multiple factors-- individual, family, and social--that are more prevalent in people who die by suicide.
- Although risk factors related to suicide have been identified, there are no identified causes of suicide.
- Most people who die by suicide have mental illness and/or a substance use disorder.
- There are other risk factors associated with suicide, including:
  - Previous suicide attempt(s)
  - Firearm ownership
  - Isolation
  - Hopelessness
  - Impulsivity and recklessness
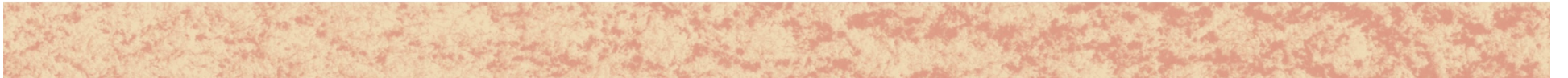 - Family discord and dysfunction
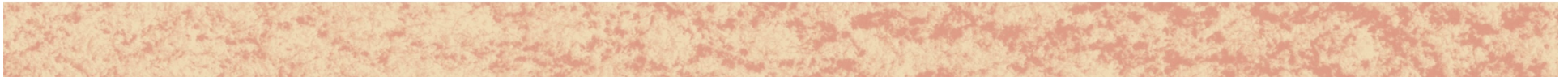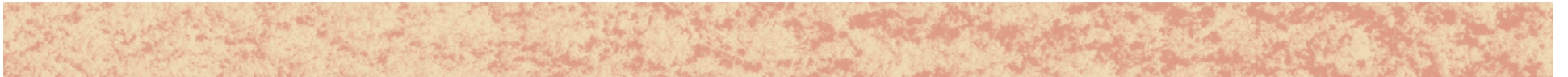
Participant Introductions

Ground Rules
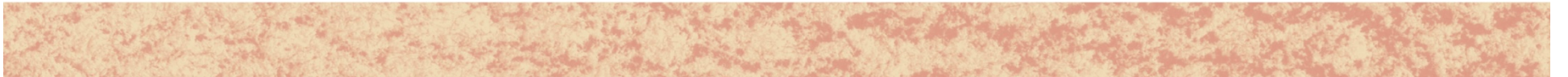
Icebreaker

Terms – LGBT Issues

Important distinction –
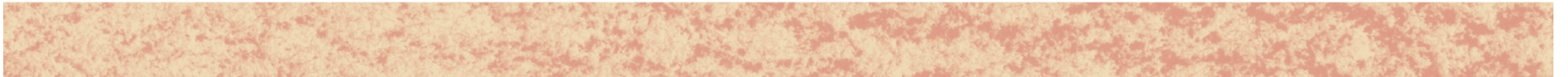gender identity and sexual orientation

See handout –
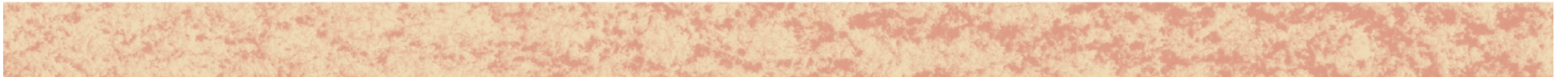
"LGBT Glossary"

Terms – Suicidology

- Suicide death
- Attempted suicide
- Suicide ideation
- Suicidal behavior

See handout –
"Suicidology Glossary"

Research Challenges

- Most hospital and vital records – no information on sexual orientation or gender identity

- Sexual orientation or gender identity hard to know for psychological autopsies

- Respondents do not identify with these terms

- Convenience sampling and small samples

- Few studies include racial/ethnic data

- Lack of longitudinal studies

Suicide Data
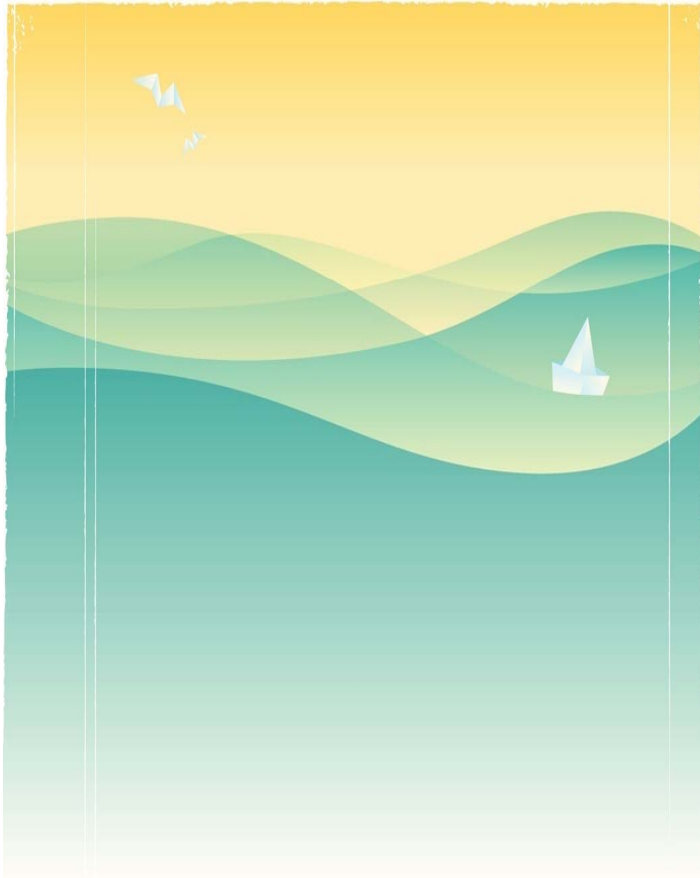
A moment to remember…

Behind the data are *individuals* who thought about suicide, attempted suicide, or died by suicide, as well as survivors.

Suicide Ideation in LGB Youth

LGB youth are 1½ to 3 times more likely to report suicide ideation than non-LGB youth.

Suicide Prevention Resource Center, 2008

Suicide Ideation in LGB Youth

- 31.2% of GB male high school students vs. 20.1% of heterosexual male high school students (past month)[1]

- 36.4% of LB female high school students vs. 34.3% of heterosexual female high school students (past month)[1]

- 47.3% of GB adolescent boys vs. 34.7% of non-GB adolescent boys (lifetime)[2]

- 72.9% of LB adolescent girls vs. 53% of non-LB adolescent girls (lifetime)[2]
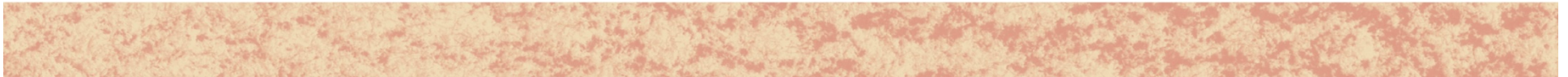
1. Remafedi et al., 1998
2. Eisenberg & Resnick, 2006
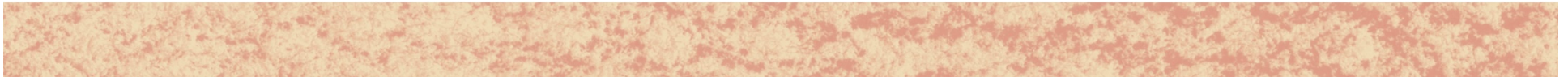
Suicide Ideation in LGB Youth

- 42% of LGB youths said they sometimes or often thought of killing themselves.

- 48% of LGB youth said suicidal thoughts were clearly or at least somewhat related to their sexual orientation (lifetime).
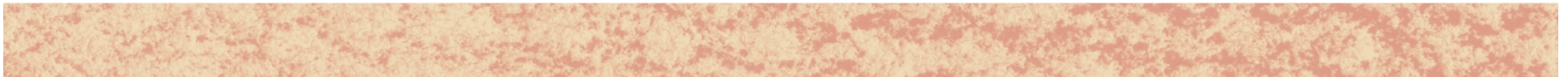
D'Augelli et al., 2001

Suicide Attempts in LGB Youth

- LGB youth are 1½ to 7 times more likely to have attempted suicide than non-LGB youth.[1]

- LGB youth attempts may be more serious, based on some initial findings about:

  - Intent to end their lives[2]
  - Lethality[3]

1. Suicide Prevention Resource Center, 2008
2. Safren & Heimberg, 1999
3. Remafedi et al., 1991

Suicide Attempts in LGB Youth

- LGB youth were more than 2 times more likely to attempt suicide than their heterosexual peers (past year). [1]

- Bisexual and homosexual male high school students were 7 times more likely to attempt suicide than heterosexual counterparts (lifetime).[2]

- 30% of LGB youth vs. 13% of heterosexual youth (median age of 18) had attempted suicide (lifetime).[3]

- 52.4% of LB females vs. 24.8% of non-LB females and 29.0% of GB males vs. 12.6% of non-GB males had attempted suicide (lifetime).[4]

1. Russell & Joyner, 2001
2. Remafedi et al., 1998
3. Safren & Heimberg, 1999
4. Eisenberg & Resnick, 2006
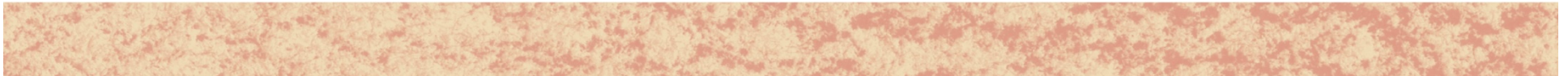
Suicide among LGB Individuals

LGB youth and young adults:

- Two psychological autopsy studies did not find a higher rate of suicide for LGB individuals.[1,2]

- Although these two studies are important, both have methodological issues that make their conclusions questionable.[3]
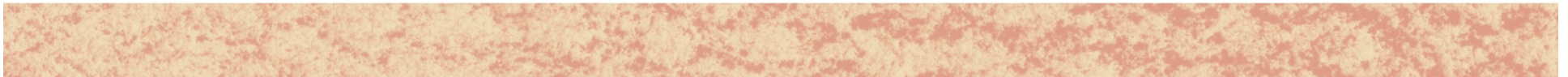
2003 analysis of Danish data:[4]

- Found "elevated suicide risk for homosexuals"
- Does not apply specifically to youth

1. Rich et al., 1986
2. Shaffer et al., 1995
3. McDaniel et al., 2001
4. Qin et al., 2003

Suicide among LGB Youth

- Compared to non-LGB youth:
  - LGB youth have higher rates of suicide attempts.
 - LGB youth suicide attempts *may* be more serious.

The higher rate of suicide attempts, as well as the possibility that attempts among LGB youth are more serious, *may* mean that this group of youth has a higher rate of suicide. However, additional research is needed before we can draw that conclusion.
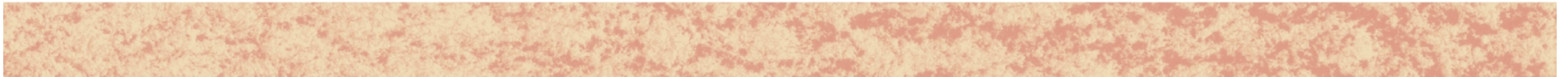
# Suicidal Behavior and Transgender Youth

Transgender youth:

- Limited research exists.

- Studies show higher rates of suicidal ideation and suicide attempts.

- Risk factors: Which ones are in common with those for LGB youth?
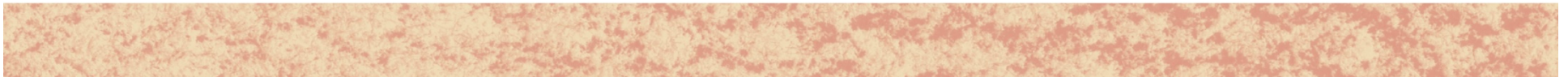
Using the Research – Exercise

A. You want to bring a gay-straight alliance to your school, but the principal maintains there is only one gay student at the school, and there is no problem.

B. You want to add information about LGBT suicide risk to your training, but your funder says they don't need special attention.

C. A journalist calls you because he has just read that research has *not* shown LGBT youth die by suicide at a higher rate. He wants to know why LGBT youth are a focus of your suicide prevention program.
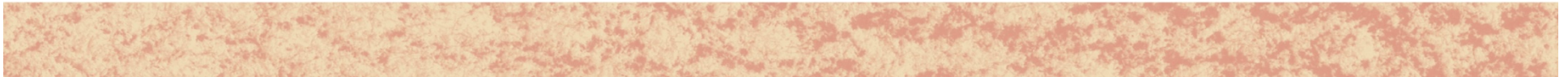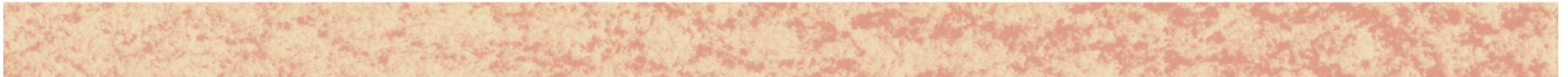
Break
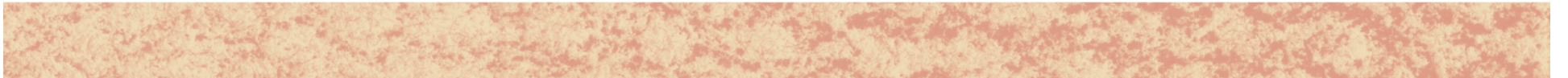
LGB Developmental Models

Stages of sexual identity development:
- Awareness, recognition
- Testing, exploration
- Identity, definition, adoption of a label
- Disclosure ("coming out")
- Acceptance
- Same sex contact, romantic or emotional involvement
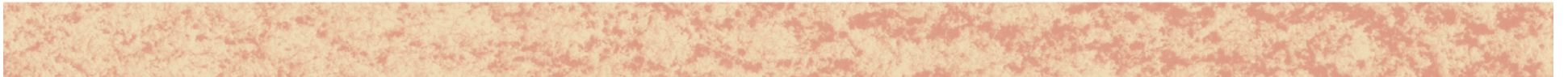- Identity within a group, integration

Transgender Developmental Models

Devor describes stages of transgender identity formation including:

- Anxiety
- Confusion
- Discovery of trans identity
- Tolerance
- Delay before acceptance

- Acceptance
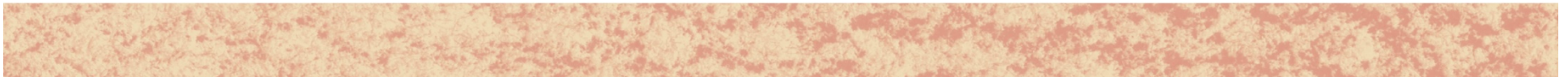- Transition
- Integration
- Pride

Devor, 2004

Nonlinear Model –
Themes for Identity Evolution

- Differences

- Confusion

- Exploration

- Disclosure (coming out)

- Labeling

- Distrust of the oppressor

- Degree of integration

- Internalized oppression

- Managing stigma

- Identity transformation

- Authenticity

- Cultural immersion

Eliason & Schope in Meyer & Northridge, 2007

Stages and Average Ages – LGB

First feeling different: 8 years old[1]
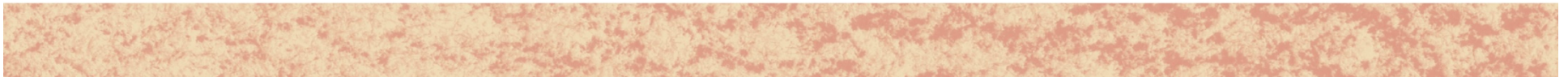
First aware of same-sex attractions:

- Age steadily declining
- Males age 10, females age 11[2]

First disclosure:

- Males and females age 17[2]

1. D'Augelli & Grossman, 2001
2. D'Augelli, 2002

Stages and Average Ages – Transgender

Feel different: 7 ½ years old

Consider self to be transgender:
- FTM – 15 years old
- MTF – 13 years old

First disclosure:
- FTM – 17 years old
- MTF – 14 years old

FTM = female to male;   MTF = male to female

Grossman et al., 2005

LGB Prevalence

Behavior, attraction, or identity

- Same-sex behavior: 1% of students[1]
- Same-sex attraction (some degree of): 10% to 20% of young adults[2]
- Self-identification as gay/bisexual: fewer than 2% of adolescents[3]
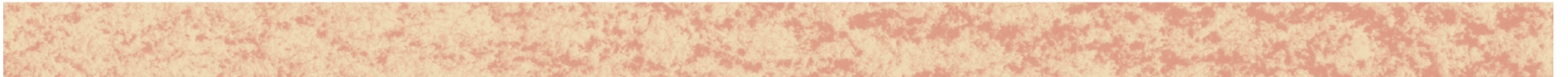- Possibly only 10% of youth who engage in same-sex behavior self-identify as gay[1]

1. Savin-Williams & Cohen in Meyer & Northridge, 2007
2. Savin-Williams, 2005
3. Garofalo et al., 1999

Transgender Prevalence

There is no widely accepted estimate for the prevalence of people who are transgender.
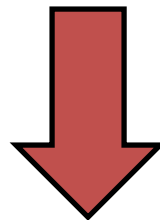
Risk and Protective Factors

Being LGBT is not itself a risk factor for suicidal behavior
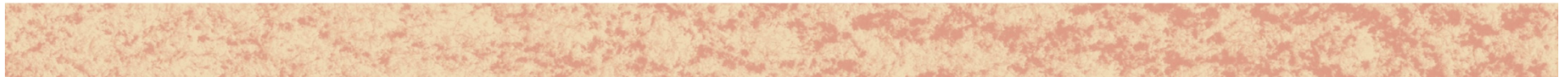
BUT

social stigma and discrimination

unsafe schools

ineffective providers

are associated with mood, anxiety, and substance use disorders, and suicidal behavior.
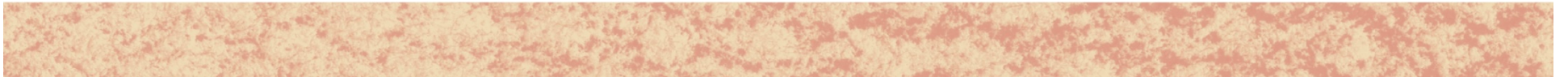
Risk and Protective Factors

Risk factors –

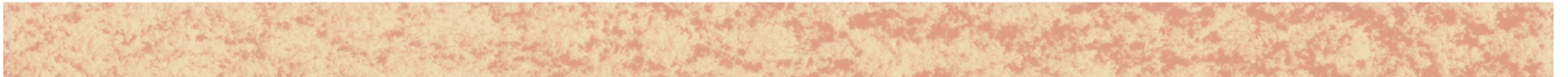Make a disorder or behavior more likely

Protective factors –

Make a disorder or behavior less likely

Risk and Protective Factors

- Synergistic

- Dynamic

- Complex

- Modifiable and non-modifiable

Risk and Protective Factors

Consider:

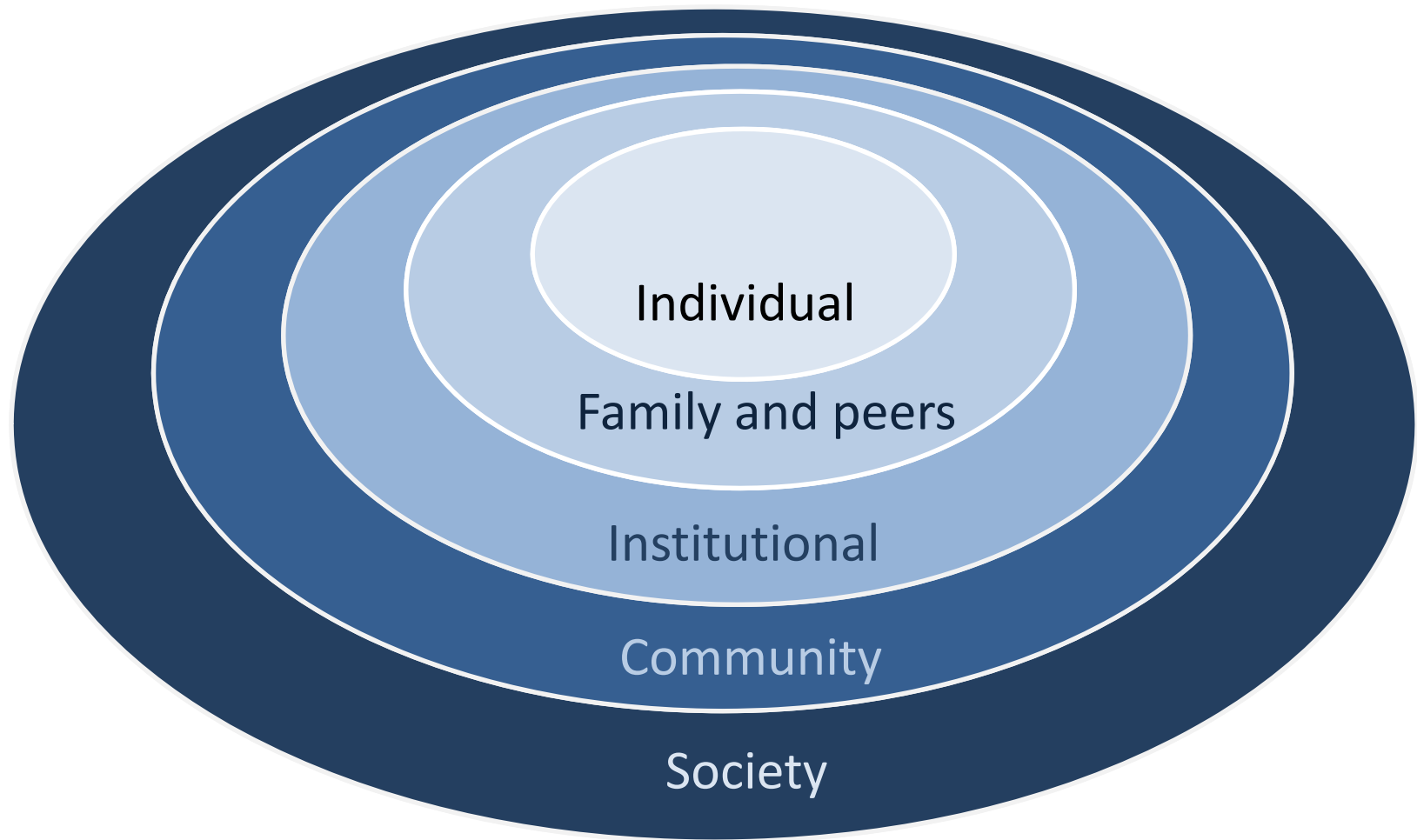- Number of factors

- Severity or strength of factors

Research basis in relation to:

- Suicides, attempts, or ideation

- Specific populations
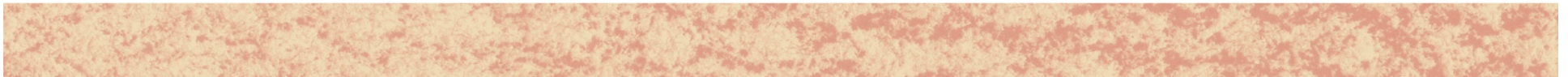
Ecological Model

Protective Factors

- Family connectedness[1]
- Family acceptance[2]
- Safe schools[1]
- Caring adult[1]
- High self-esteem[3]
- Positive role models[3]

1. Eisenberg & Resnick, 2006
2. Ryan et al., 2009
3. Fenaughty & Harre, 2003
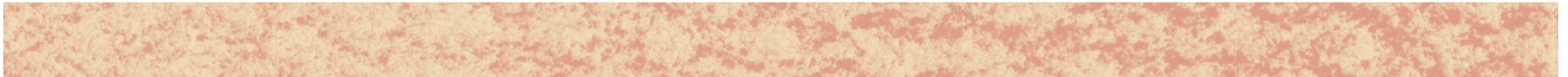
Protective Factors

Family connectedness plays an important role for LGB youth. Youth who are more protected say, My family...

- "cares about my feelings"
- "understands me"
- "has lots of fun together"
- "respects my privacy, and my parents care about me"

Eisenberg & Resnick, 2006

Protective Factors

Family acceptance – parent and caregiver behaviors that help:

- Talk with your child about his/her LGBT identity
- Express affection when you learn that your child is LGB and/or T
- Advocate for child when he/she is mistreated because of his/her LGBT identity
- Bring your child to LGBT events
- Connect your child with an LGB and/or T adult role model
- Welcome your child's LGB and/or T friends and partners into your home
- Believe that your LGB and/or T child can have a happy future

Adapted from Ryan, 2009
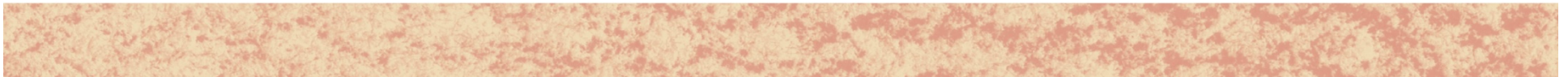
Protective Factors

School safety includes:

- "I feel safe going to and coming from school."

- "I feel safe at school."

- "Bathrooms in this school are a safe place to be."

Eisenberg & Resnick, 2006

Protective Factors

Other adult caring includes:

- How much youth felt that other adults in their community, faith leaders, and other adult relatives cared about them.
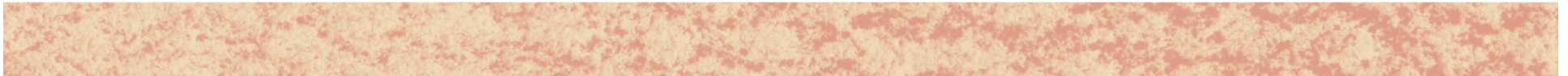
Eisenberg & Resnick, 2006

Risk Factors – Youth

- Previous attempt(s)
- Mental illness
- Substance use disorder
- Significant negative personality traits
- Mentally ill parents

- Stress (rejection, feared punishment)
- Isolation
- Hopelessness
- Method availability

Berman et al., Adolescent Suicide, 2006

Risk Factors – LGB Youth

- Gender nonconformity[1]
- Internal conflict about sexual orientation[2]
- Time of coming out[3]
- Early coming out[4]
- Low family connectedness[5]

- Lack of adult caring[5]
- Unsafe school[5]
- Family rejection[6]
- Victimization[7]
- Stigma and discrimination[8]

1. Fitzpatrick et al. 2005; Remafedi et al. 1991
2. Savin-Williams 1990
3. D'Augelli et al. 2001
4. Remafedi 1991

5. Eisenberg & Resnick, 2006
6. Ryan et al., 2009
7. Bontempo & D'Augelli 2002; Russell & Joyner 2001
8. Meyer 1995

Risk factors – What's different for LGBT youth?
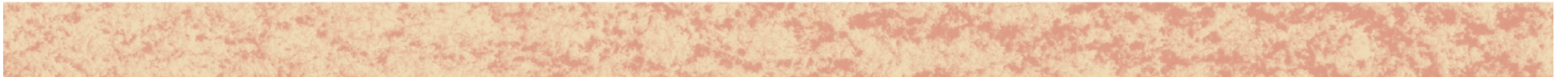
More risk factors or more severe ones:

- Unsafe school
- Rejection/abuse within family
- Victimization
- Previous attempt(s)
- Exposure to suicide loss
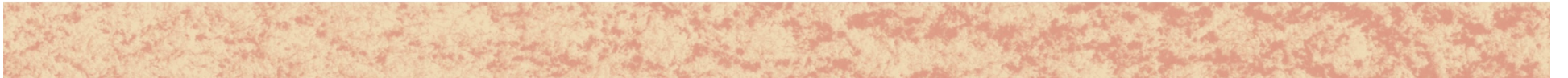
Specific to or mostly relevant to LGBT youth:

- Gay-related stress and minority stress
- Gender nonconformity
- Internal conflict regarding sexual orientation

Discussion

Small group discussions:

Risk and protective factors

Break

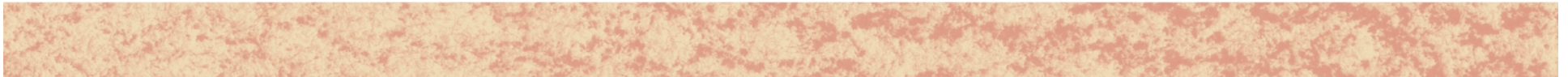# Cultural Competence – LGBT

Description:
LGBT cultural competence applies to sexual and gender minorities.

Behaviors, attitudes, and policies for a professional, agency, or system to work in cross-cultural situations

"a tandem process of personal and professional transformation… the journey towards cultural competency… an ongoing process"

Turner, Wilson, & Shirah in Shankle, 2006 (p. 62)

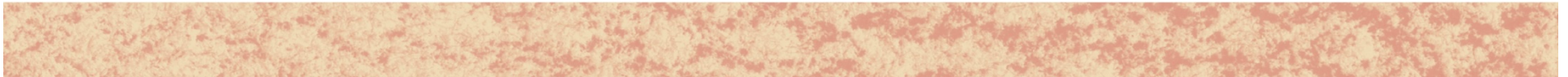# Cultural Competence – LGBT

Key elements:

- Defined set of values
- Effective cross-cultural work
- Involvement of consumers and community
- Capacity to manage the dynamics of difference

Incorporate these elements into policies, administration, practice, and service delivery.

Dunne, C. et al., 2004

Cultural Competence – LGBT

LGBT cultural competence standards for agencies:

- Make accurate information easily available

- Train staff, volunteers, and board

- Have staff and board reflect diversity

- Have job descriptions, supervision, and performance review all reinforce cultural competence

- Include diverse clients in program decisions

- Make sure agency environment and policies are inclusive

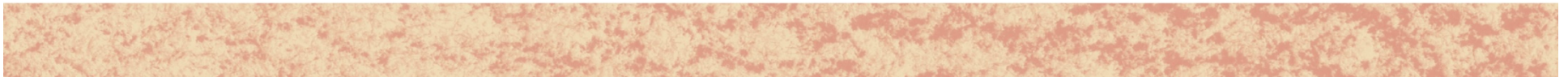- Conduct ongoing agency self-assessments

Small Group Exercise – Assessment and Next Steps

See handout

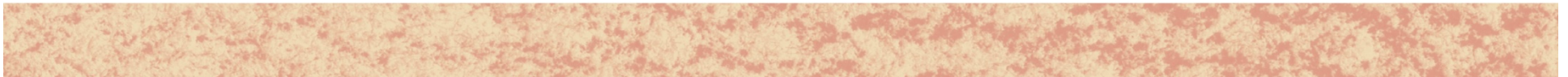"Developing LGBT Cultural Competence: Agency Assessment and School Assessment"

- Identify one or two steps you could take.
- Identify one or two steps your agency or school could take.
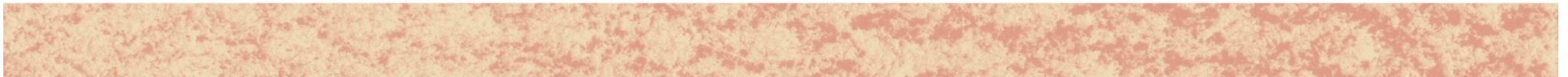
GLSEN Video
Available from www.thinkb4youspeak.com
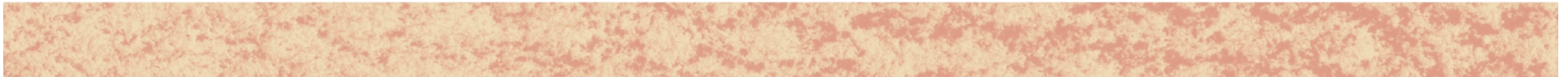(click image to play)

Programs and Practice – A Start

- Suggest that sexual and gender minority issues be added to diversity or cultural competence training
- Post a rainbow on your office door
- Check your school or agency anti-discrimination policies for both sexual orientation and gender identity
- Review with LGBT youth your confidentiality safeguards and how staff are trained to implement them
- Review availability of information on LGBT youth issues in local libraries (e.g., staff, school, or community libraries) and on the Internet
- Distribute the SPRC white paper on LGBT youth suicide prevention and lead a discussion about it at a staff meeting

Programs and Practice – Doing More

- Interrupt a student who says "that's so gay"
- Lead a revision of agency forms to use more inclusive terms
- Organize a LGBT consumer group to give feedback on the service space, forms, policies and procedures, and outreach materials
- Attend a gay-straight alliance meeting at the school or help get a group started
- Expand services to younger teens and families
- Develop resources and attend training for your profession related to serving LGBT youth

Youth Suicide Prevention

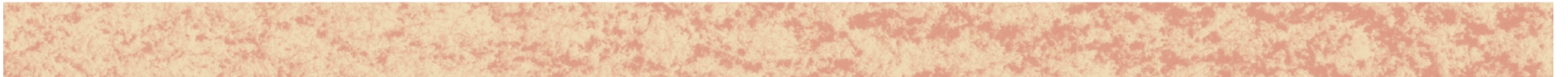What is youth suicide prevention?

- Case-finding of at-risk youth with referral for assessment or services
  - Gatekeeper programs
  - Screening
  - Crisis lines

- Reduction of risk factors, increase in protective factors
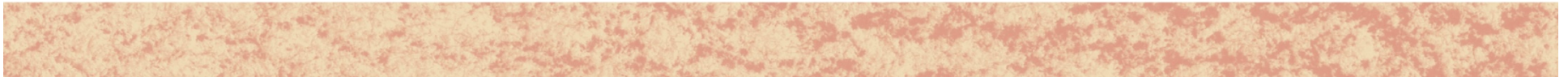
Gould, M. S. et al., 2003

Suicide Prevention –
Case-Finding with Referral

- Promote LGBT cultural competence through staff training

- Refer LGBT youth to mental health services that are culturally competent

- Reach out to providers and organizations who serve LGBT youth, particularly those at greatest risk

Suicide Prevention – Addressing Risk and Protective Factors

- Include the topic of LGBT youth risk in awareness materials, conferences, and state and local prevention plans

- Provide training for all staff about LGBT issues

- Include the topics of dealing with discrimination and victimization in life-skills training for youth

- Institute protocols for when youth are identified at risk, youth have attempted suicide, or youth have died by suicide
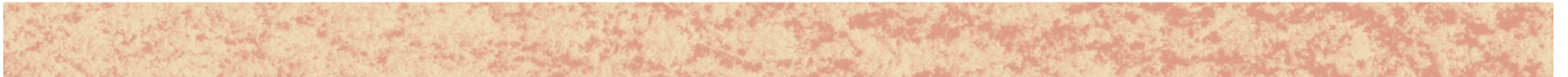
Suicide Ideation – Resources

LEARN THE WARNING SIGNS AND WHAT TO DO

You can find the best practices warning signs at the American Association of Suicidology:

http://www2.sprc.org/sites/sprc.org/files/AASWarningSigns_factsheet.pdf

See handout –

"Warning Signs for Suicide Prevention"

Suicide Ideation – Resources

- Take gatekeeper training (e.g., QPR, ASIST, Connect) to learn how to identify youth who may be having suicidal thoughts
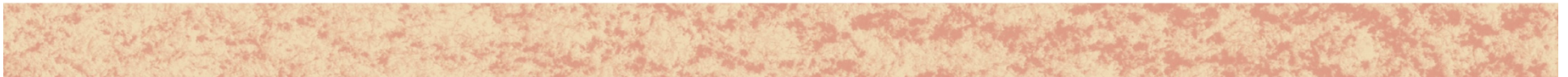 http://www.sprc.org/featured_resources/bpr/standards.asp

- Contact your state suicide prevention coalition to find gatekeeper training in your area
  http://www.sprc.org/stateinformation/index.asp

- Encourage your local referral network to be trained in assessing and managing suicide risk
  http://www.sprc.org/traininginstitute/amsr/clincomp.asp

Suicide Attempts – Resources

- National Suicide Prevention Lifeline brochure "After an Attempt: Guide to Taking Care of Your Family Member after Treatment in the Emergency Department" http://www.suicidepreventionlifeline.org/App_Files/Media/PDF/Lifeline_AfterAnAttempt_ForFamilyMembers.pdf

- Feeling Blue Suicide Prevention Council booklet

  "After an Attempt: The Emotional Impact of a Suicide Attempt on Families" http://feelingblue.org/docs/AFTER_AN_ATTEMPT_BOOKLET_rev.pdf
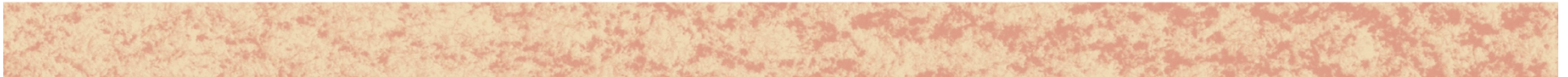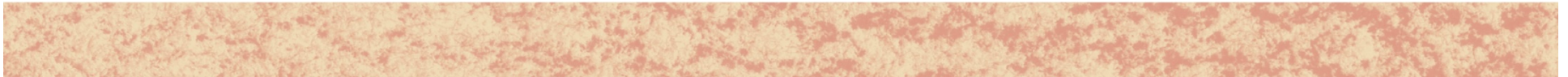
Suicide Attempts – Resources

What you can do for a youth after an attempt:

- Let him or her know you care. Try:
  - "I'm sorry you hurt that badly. I wish I could have helped you."
  - "I want to help you. Tell me what I can do to help you now."
- Provide information on suicide and mental illness
- Ask the family to remove guns from their home and reduce access to lethal means
- Arrange a therapy session for the youth and family before the youth returns home from the hospital if possible
- Help find support and services: consider mental health or faith-based services

Adapted from "After an Attempt: The Emotional Impact of a Suicide Attempt on Families"

Suicide Attempts – Resources

- To help his or her recovery after getting out of the hospital, an individual who attempted suicide needs to:
  - Identify triggers for suicidal thoughts and plan to minimize their effects
  - Build a support system
  - Try to follow a routine
- You can be an important support for LGBT youth who attempted suicide.

Adapted from "After an Attempt: A Guide for Taking Care of Yourself"
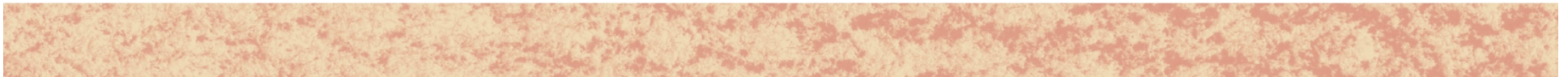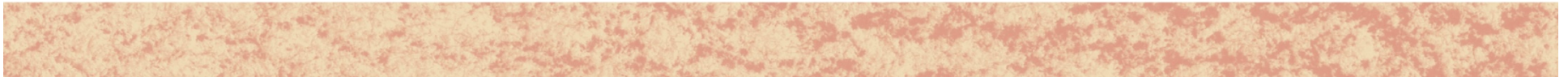
Suicide Postvention – Resources

What You Can Do

- Work with a community group to set up policies and procedures for postvention (interventions following a suicide)
- Remember that the rationale for postvention is to both promote healthy grieving for survivors and limit contagion
- Help to limit contagion by encouraging the media to follow recommended reporting practices, training those with public roles how to respond appropriately, and memorializing the deceased in a way that is safe
- Review resources, including guidance on memorial services, talking to the media, caring for survivors, and data for your state
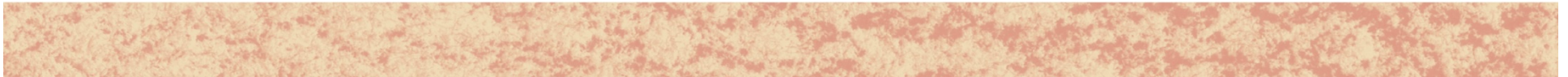
Suicide Postvention – Resources

- At-a-Glance: Safe Reporting on Suicide:
  http://www.sprc.org/library/at_a_glance.pdf

- Youth Suicide Prevention, Intervention, and Postvention
  Guidelines from Maine Youth Suicide Prevention Program:
  http://www.maine.gov/suicide/docs/Guidelines%2010-2009--
  w%20discl.pdf

- After a Suicide: Recommendations for Religious Services and
  Other Public Memorial Observances:
  http://www.sprc.org/library/aftersuicide.pdf

- For data: http://www.cdc.gov/ncipc/wisqars/ and
  http://www.sprc.org/stateinformation/index.asp

LGBT Youth Programs

- Can support suicide prevention by strengthening protective factors and decreasing risk factors

- Can train program staff and board in LGBT youth suicide risk, and risk and protective factors

- Can advocate for LGBT youth leadership in suicide prevention programs

- Can provide accurate information about LGBT youth suicide risk on the Web and in materials
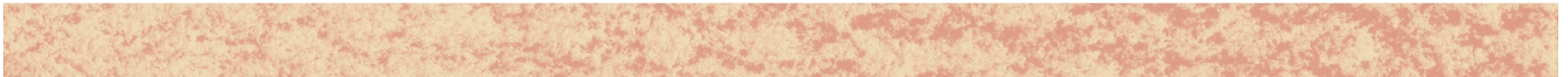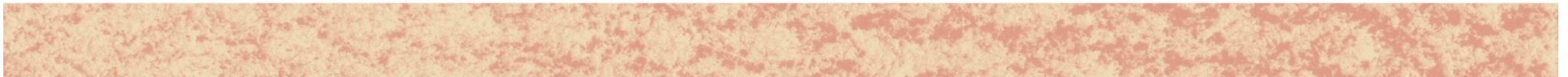
Evaluation of LGBT Youth Programs

Special considerations:

- Respect the sensitivity and confidentiality of data during collection, analysis, and reporting
- Respect group and individual privacy
- Define terms clearly
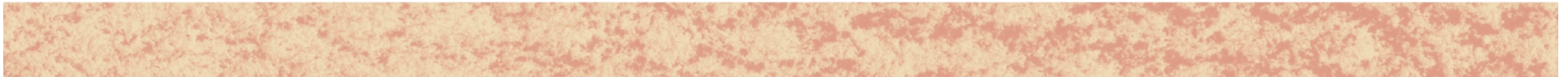- Make the limitations of the findings explicit
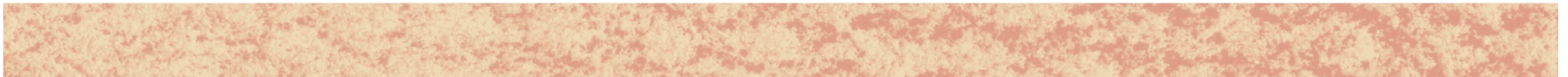
Discussion

- How can we work to create supportive environments for all youth?

- How can we begin to address the barriers facing LGBT youth who need help?

- What can we do to raise awareness about the particular needs of transgender individuals?

- What will you do to help prevent suicide among LGBT youth?

Workshop Summary

- Now that you have completed this training module, you can:

    1. Use terminology for suicide and LGBT issues correctly

    2. Describe research related to suicidal behavior among LGBT youth

    3. Discuss risk and protective factors for LGBT youth and the implications

    4. Assess your school's or agency's cultural competence with LGBT youth and implement next steps

    5. Describe strategies to reduce suicidal behavior among LGBT youth

Contact Information

Leader 1

Job title

Phone number

E-mail

Agency

Website

Leader 2

Job title

Phone number

E-mail

Agency

Website