

TALKING ABOUT SUICIDE AND LGBT POPULATIONS

It is critical to remember that the large majority of LGBT individuals, including LGBT youth, who experience stressful external factors like discrimination, bullying, or family rejection do not become suicidal. When media suggest that suicide is a natural response to such external factors, it can lead at-risk people to see their own experiences of discrimination, bullying, or rejection reflected in stories of those who have died, and they may be more likely to think of suicide as a solution to their problems.

We do not know suicide rates for LGBT individuals because we do not have data on how many LGBT people die by suicide, or any other cause of death. Data about suicide rates often rely on death records which identify a person's age, sex, race, and other personal characteristics, however, do not include information about a person's sexual orientation or gender identity.

Suicide rates cannot be determined by looking at suicide attempts, as the frequency of deaths and attempts in various groups can be quite different. For example, in the U.S. population, four out of five people (80%) who die by suicide are male, while the majority of those who make a non-fatal suicide attempt (60-75%) are female. However, making a non-fatal suicide attempt significantly increases the likelihood of an eventual suicide death.

Studies have indicated a higher prevalence of suicide attempts among

lesbian, gay, bisexual, and transgender people.

Compared to straight people, gay and lesbian people are more likely, and bisexual adults are more likely still, to report a suicide attempt in the past year and/or over their lifetime.

Transgender people report higher prevalence of suicide attempts in the past year, and over their lifetime, than LGB or straight people. However, direct comparisons for these populations are limited because no single study has surveyed and reported findings for all of these populations.

Studies have identified a number of factors associated with the higher prevalence of suicidal behavior in LGBT individuals. These include: social isolation, low self-esteem, substance abuse, depression, anxiety, and other mental health issues, often resulting from or worsened by stigma and discrimination. Additional factors include experiences of prejudice and discrimination, including family rejection, bullying, cyberbullying, harassment, and mistreatment. Please check out the following resources for additional information.

RESOURCES

www.thetrevorproject.org

www.itgetsbetter.org/Resources

www.suicidology.org/resources/lgbt

www.sprc.org/populations/lgbt

www.988lifeline.org

National Suicide Prevention Lifeline
1-800-273-8255

SUICIDE PREVENTION FOR THE

LGBT COMMUNITY



www.pathways-ky.org

988

PATHWAYS 24/7 CRISIS LINE

606-324-1141 or
800-562-8909

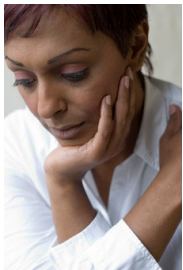
WARNING SIGNS FOR SUICIDE

Some behaviors may indicate that a person is at immediate risk for suicide. The following three should prompt you to immediately seek help:

- Talking about wanting to die or to kill oneself
- Looking for a way to kill oneself, such as searching online or obtaining a gun
- Talking about feeling hopeless or having no reason to live

Other behaviors may also indicate a serious risk — especially if the behavior is new; has increased; and/or seems related to a painful event, loss or change. Please seek help if any of these warning signs are present:

- Talking about feeling trapped or in unbearable pain
- Talking about being a burden to others
- Increasing the use of alcohol or drugs
- Acting anxious or agitated; behaving recklessly
- Sleeping too little or too much
- Withdrawing or feeling isolated
- Showing rage or talking about seeking revenge
- Displaying extreme mood swings



RISK and PROTECTIVE FACTORS

Risk factors are often confused as warning signs of suicide.

It is important to note, however, that factors identified as “increasing risk” are not factors that cause or predict a suicide attempt. Risk factors are characteristics that make it more likely that an individual will consider, attempt, or die by suicide. Protective factors are characteristics that make it less likely that individuals will consider, attempt, or die by suicide.

Risk Factors for Suicide

- Mental disorders, particularly mood disorders, schizophrenia, anxiety disorders, and certain personality disorders
- Alcohol and other substance use disorders
- Hopelessness
- Impulsive and/or aggressive tendencies
- History of trauma or abuse
- Major physical illnesses
- Previous suicide attempt
- Family history of suicide
- Job or financial loss
- Loss of relationship
- Easy access to lethal means



- Local clusters of suicide
- Lack of social support and sense of isolation
- Stigma associated with asking for help
- Lack of healthcare, especially mental health and substance abuse treatment
- Cultural and religious beliefs, such as the belief that suicide is a noble resolution of a personal dilemma
- Exposure to others who have died by suicide (in real life or via the media and internet)

Protective Factors for Suicide

- Effective care for mental, physical, and substance use disorders
- Easy access to a variety of clinical interventions
- Restricted access to highly lethal means of suicide
- Strong connections to family and community support
- Support through ongoing medical and mental health care relationships
- Skills in problem solving, conflict resolution and handling problems in a non-violent way
- Cultural and religious beliefs that discourage suicide and support self-preservation