Suicide

by Nadine M. Jernewall

Most of the literature concerning glbtq people and suicide focuses on lesbian, gay, and bisexual youth. Studies indicate that they are at significantly greater risk for suicidal thoughts and behaviors than heterosexual youth. Gay and lesbian adults also report a history of more suicidal ideation and attempts than their heterosexual counterparts. Transgender people, regardless of their sexual orientation, are also at greater risk for suicidal thoughts and attempts.

In addition to the general risk factors for suicide, such as depression and substance abuse, glbtq people also face additional stressors, such as discrimination, which put them at an increased risk for suicidal behavior.

Lesbian, Gay, and Bisexual Youth

In 1989, the Department of Health and Human Services published a report on youth suicide that sparked a great deal of controversy. This report estimated that lesbian, gay, and bisexual youth are at two to three times greater risk for suicide than heterosexual youth and that they may account for 30% of all youth suicides. This report, like others reaching similar conclusions, became a center of controversy, prompting charges from many conservative groups that the findings promote an “agenda” that they do not agree with. Some valid critiques of the report concerning methodology have prompted other researchers to continue to try to improve our understanding about suicide and lesbian, gay, and bisexual youth.

Since the 1989 report, many other studies have been conducted on the topic of lesbian, gay, and bisexual youth suicide. Findings generally support the contention that lgb youth report more suicide attempts than heterosexual youth. However, studies of completed youth suicides often find that very few lgb youth commit suicide.

For example, Shaffer and colleagues (1995) conducted a psychological autopsy study and reported that only 3 of the youth of their sample of 120 were lesbian, gay, or bisexual. Compared to reported suicide attempts by this population of youth, 2.5% seems rather low. This discrepancy has raised questions about the accuracy of either set of findings.

It has been argued, for example, that suicide attempts among lgb youths have been overestimated. But it is much more likely that lgb youth suicides are underreported than that lgb suicide attempts are overestimated. The underreporting occurs because many youth have not disclosed their sexual orientation or family members may not be willing to offer this information postmortem.

Methodological Issues

Research on glbtq suicide is often criticized for methodological problems. It is true that most studies have relied on convenience samples, such as members of glbtq organizations. While this is not the most representative sample, it is difficult to obtain reliable estimates of suicide among glbtq people because it is impossible to get a random, representative sample of them.
Another problem lies with the way that sexual orientation is defined. Are we asking about people who self-identify as gay, lesbian, or bisexual? Or are we asking about people who engage in same-sex behaviors? Many people engage in behavior that does not conform to their identity. These methodological difficulties have made it impossible for us to have a reliable national frequency of suicide attempts or completed suicides by LGBTQ people.

Researchers have recognized the limitations of past studies and have attempted to attain more representative samples. For example, Bagley and Tremblay (1997) conducted a study of young men (ages 18-27) in Canada. They used stratified random sampling, which resulted in a sub-sample of about 13% gay and bisexual men. Gay and bisexual men were 14 times more likely to report suicide attempts than heterosexual men.

Several more recent studies have sampled high school students. Russell and Joyner (2001), for example, conducted the first national study on sexual orientation and suicide risk among youth. Their sample consisted of high school students throughout the United States. Of the 11,940 youth surveyed, 7% reported same-sex attraction or relationships. Lesbian, gay, and bisexual youth in this sample were twice as likely as their heterosexual peers to attempt suicide. Fifteen percent of youth who reported suicide attempts were lesbian, gay, or bisexual. However, it is still possible that many suicidal youth were not captured by these studies since the most troubled youth may drop out of school.

Gay, Lesbian, and Bisexual Adults

The findings of increased suicide risk among lesbian, gay, and bisexual youth also hold true for gay male adults. Herrell and colleagues (1999) conducted a large twin study on suicide and military veterans. They examined twin pairs of which one twin reported having had sexual relations with men and the other did not. Gay twins were two times more likely to report thoughts of death, more than four times as likely to report suicidal ideation, and more than six times as likely to report attempted suicide than their heterosexual twin brothers. These high rates of suicidal thoughts and attempts could not be explained by substance abuse or mental health problems.

Lesbian adults are also more likely to report a history of suicidal ideation. For example, Matthews and colleagues (2002) found that 52% of lesbians compared to 38% of heterosexual women in their sample had seriously considered suicide in the past. The National Lesbian Health Care Survey also found that lesbians were at an increased risk of suicide. Over half of the women in this study reported having thought about committing suicide, and 18% had attempted suicide. African-American and Latino women were more likely to have attempted suicide than White women.

Transgender

Transgender individuals have also been found to have high rates of suicidal ideation. In a study by Mathy (2002), transgender men and women were actually more likely to have suicidal thoughts and make suicide attempts than non-transgender heterosexual women and both non-transgender heterosexual and gay men. These findings held true for all transgender participants regardless of their sexual orientation.

Risk Factors

Gay, lesbian, bisexual, transgender, and queer people face many additional risk factors for suicide besides those that are typically cited for suicide in the general population, such as depression and substance abuse. Social inequality is a source of stress for many LGBTQ people, who are not afforded the same rights and protections as heterosexuals.

Not only are discriminatory practices against LGBTQ people routine both institutionally and individually, but
Glbtq people also frequently experience verbal and physical harassment. Lesbian, gay, bisexual, and transgender youth in particular often face victimization at school and at home for their sexual orientation and/or gender expression. Glbtq people of color may be at greater risk than others, as they have a “double” or “triple-minority” status for their race/ethnicity, sexual orientation, and, for some, gender.

In addition, “coming out” at an earlier age can put glbtq youth at increased risk for suicide, as they are more likely to be rejected by friends at an age where their support is especially valued. Internalized homophobia is another possible risk factor, as many glbtq people internalize the negative messages that they get from society and come to hate themselves.

When glbtq youth do not have support, they are at an elevated risk for suicidal thoughts and behaviors. Access to support groups can help youth decrease the isolation that they may feel and can give them alternative ways to deal with stressors. Support from peers and family members can also be very helpful.

Obviously, not all glbtq individuals are suicidal. Quite the opposite is true. Most glbtq people find the strength to cope with the additional stressors in their lives and lead successful lives despite the discrimination that they face from society.

Interestingly, however, a study by Jesdale and Zierler (2002) actually found that in states that enacted gay rights laws, there was a decrease in adolescent suicide for Caucasian males. While a definitive causational link cannot be made, this study offers hope that by creating a more accepting climate for glbtq people, we can decrease the rate of suicidal thoughts and behaviors among this population.

Bibliography


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