

Example by StudyDriver

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Suicide in LGBTQ Youth Example

When you open up your phone or turn on that TV and you hear that a young child has committed suicide because of bullying and not being accepted breaks your heart. Suicide in youth happens a lot more than you expect, it is actually the leading cause of death in LGBTQ youth. To prevent suicide in LGBTQ youth the world needs to be better educated on what goes on in an LGBTQ person's life and think before they discriminate just because that person doesn't fit their ideals of what a person should be. In this paper, I will talk about the history of LGBTQ persons, what forms of treatment they receive and do these treatments come with disadvantages and discrimination for the LGBTQ community, and what are the efforts we as a society can make to address LGBTQ youth suicide.

The history of LGBTQ persons of later societies and today have drastically changed. LGBTQ stands for lesbian, gay, bisexual, transgender, queer. The National Alliance on Mental Health Illness website (2018) states in the 1950s and 1960s, many psychiatrists believed that homosexuality, as well as bisexuality, was a mental illness (National Alliance on Mental Illness, 2018, para. 17). This led to gay men and lesbians being often subjected to treatment against their will, including forced hospitalizations, aversion therapy, and electroshock therapy. These gay and

lesbian's families are the ones that would turn them in and force them to have treatment for what was then thought of as a mental illness to be gay or anything but straight. The NAMI website (2018) also states that in the last 35 years there have been great strides since the American Psychiatric Association removed homosexuality as a mental illness from the Diagnostic and Statistical Manual of Mental Disorders, or the DSM (National Alliance on Mental Illness, 2018, para. 18). Even though more psychiatrists and therapists today have more positive attitudes toward the LGBTQ community, some people still face unequal care due to a lack of training and understanding. Health care providers still do not always have up-to-date knowledge of the unique needs of the LGBTQ community or training on LGBT mental health issues. This leads to health care providers who don't have the right knowledge or understanding focusing more on the persons sexual orientation than the persons mental health condition. Even though the LGBTQ community has been accepted by some they still face a lot of discrimination in treatment and have a lot more disadvantages in the society than someone who is straight and the most who struggle are LGBTQ youth.

In schools, today LGBTQ youth face a lot of discrimination and this leads to lower school performance and suicidal tendencies. McGovern (2012) notes that some schools have a No-Promo-Homo policy that states teachers are prohibited from discussing LGBTQ lives and histories to students even if they need to address bullying (p.465). This policy is in action in seven states. Despite increasing acceptance of LGBTQ people, the rate of bullying has stayed constant. McGovern (2012) also states that LGTBQ students who are a different race than white have to face an even harder battle with bullying and substance abuse (p.470). This No-Promo-Homo policy has been mostly created by conservative people who feel that if their kids see a same-sex or different gender person they will want to become them. Getting rid of the No-Promo-Homo policy could save many lives of the students who identify as LGBTQ. Ducharme (2018) wrote the story in Time magazine on when a 9-year-old was found dead Jamel Myles was found dead of suicide just days after his mom said he came out as gay to his classmates. He began to have significant bullying from his classmates as he began the new school year (Time, 2018, para. 2). Also from Time magazine John Ackerman, a clinical psychologist and the suicide prevention coordinator for the Center for Suicide Prevention and Research at Nationwide Children's Hospital states an estimated 34% of gay, lesbian or bisexual kids face bullying at school, which may make them especially susceptible to suicidal behavior (Time,

2018, para. 4). The intense bullying leads to them not being able to receive an adequate education. Mental Health America (2018) states that the bullying is the second most important problem in their lives (Mental Health America, 2018, para.5). The Mental Health America (2018) website also states that one-third of LGBT say that they had to miss entire days because they felt unsafe (Mental Health America, 2018, para. 7) and this leads to LGBT youth who are frequently harassed in school had lower grade point averages (Mental Health America, 2018, para. 6).

Also, according to the Mental Health America (2018) website these students don't feel like they can go to school officials because one third of them don't do anything so 60% of students don't tell anyone (Mental Health America, 2018, para. 8). Espelage (2011) noted that if school climate is perceived as positive, it may serve to buffer against the experience of negative psychological and social concerns among sexual minority youth (p.316). Most of the bullying that does occur include homophobic slurs and teasing. Espelage noted that 91.4% of students in an LGBT middle and high school sample reported that they sometimes or frequently heard homophobic remarks in school, such as faggot, dyke, or queer. Of these students, 99.4% said they heard remarks from students and 63% said they heard remarks from faculty or school staff (p.316-317). This suggests that not all schools have a safe and positive environment for LGBTQ students. There is a large number of students who don't go to school because they feel unsafe and would rather miss school and stay at home. There should be more support for middle school LGBTQ kids because they have higher rates of suicidal tendencies. To help decrease the feeling of not belonging because you are LGBTQ the school needs to incorporate more discussions about sexual identity and bullying prevention programs. LGBTQ youth spend most of their times in school so it is very important that the school environment that they are in is very supportive and that supportiveness allows these kids to feel safe and welcomed. The LGBTQ youth community face a lot of discrimination and disadvantages in society but there are solutions.

When LGBTQ youth have a hard time with school that leads to psychological problems like depression and suicide. The National Alliance on Mental Health Illness (2018) website states that for LGBTQ people aged ten to twenty-four, suicide is one of the leading causes of death (National Alliance on Mental Health Illness, 2018, para.

9). The NAMI website also states that someone who faces rejection after coming out to their families were more than 8 times more likely to have attempted suicide than someone who was accepted by their family after revealing their sexual orientation (National Alliance on Mental Health Illness, 2018, para. 10). LGBTQ youth face fear, hatred, and prejudice in school, with friends, in the community and at home, which can lead to higher risks of self-harm and thoughts of suicide. The NAMI website notes that LGBTQ teens are six times more likely to experience symptoms of depression than the general population (National Alliance on Mental Health Illness, 2018, para. 14). According to the Trevor Project (2018) website LGB youth who come from highly rejecting families are 8.4 times as likely to have attempted suicide as LGB peers who reported no or low levels of family rejection (The Trevor Project, 2018, para.7). The Trevor Project website (2018) states that this leads to 1 out of 6 students nationwide (grades 9-12) seriously considered suicide in the past year (The Trevor Project, 2018, para. 8). With feeling rejection at home, and at school it can lead to harmful coping skills.

LGBTQ youth have a hard time dealing with who they are and all the rejection they receive and that leads to harmful coping skills. Mental Health America website (2018) states that LGBT youth are more than twice as likely to try drugs and alcohol and when there is an instance of verbal or physical harassment, the risk of self-harm among LGBT youth is 2.5 times more likely (Mental Health America, 2018, para.1-3). Linhares (2016) from NBC News writes that some use self-medication for anxiety and depression with marijuana, and it can have unpredictable negative effects on the developing brain when used regularly in adolescence (NBC News, 2016, para. 10). The Trevor Project states that with each episode of LGBT victimization, such as physical or verbal harassment or abuse, increases the likelihood of self-harming behavior by 2.5 times on average (The Trevor Project, 2018, para. 9). Some find harmful coping as a way to help but there are efforts out there to support and help LGBTQ youth.

Some efforts that are out there begin with schools. The schools are the place that the most support can be applied to. There is a club called Gay Straight Alliances that are safe and supportive environments for LGBT students. Mental Health America states that students with supportive educators are reported to have higher gpas (Mental Health America, 2018, para. 10). Also, according to Mental Health America supportive environments can

prevent bullying but also bullying policies and laws that teachers can use increases the help of teachers to intervene in bullying cases (Mental Health America, 2018, para.11). Teachers should learn the warning signs of depression, anxiety, and bullying so kids can get the help they need before anything bad happens.

Another effort out there is to identify triggers and get psychological help. To start it would be helpful for others to identify triggers of substance abuse and when in therapy to help find that person find what their goals are for life. Some triggers are just unique to the LGBTQ youth community and this leads to higher rates of substance abuse. One trigger that LGBTQ students face more than straight students is their stress. Going to therapy and learning coping skills will improve their stress levels. According to Baams and Russell (2015) some of the main stressors that LGB youth feel are that they are a burden to others, and they do not belong anywhere (p.688). Also, Baams and Russell state that the stress of coming out is large because they are worried about what their friends and family are going to say (p.689). The coming out stress is worse and is most common in girls. Rapaport from the Huffington Post writes that there is an increased risk of depression in LGBTQ youth and this can be explained by lower satisfaction with family relationships, greater exposure to cyberbullying and peer victimization, and more unmet medical needs (Huffington Post, 2018, para. 14). Dr. Stanley Ray Vance of the Child and Adolescent Gender Center at the University of California states that LGBTQ childhood environments and experiences matter and reducing rejection, abuse and other adverse events could potentially make a difference (Huffington Post, 2018, para. 16). According to Baams and Russell social isolation is one of the largest contributions to suicidal risk (p.689). We can relate this back to the John Witt piece we read in class that states that we need to be surround by other and submersed into a community or our risk for depression and suicide increases. Dr. Stanley Ray Vance notes that It should be emphasized that LGBTQ youth are incredibly resilient, but they, unfortunately, face poor mental health outcomes and adversity (Huffington Post, 2018, para. 16). By identifying triggers and getting psychological help LGBTQ youth will have a better life.

The last effort that can help LGBTQ youth is having early intervention and supportive environments. The NAMI website (2018) states that early intervention, comprehensive treatment and family support are the key to helping LGBTQ youth get onto the road to recovery from a mental health condition (National Alliance Mental Health

Illness, 2018, para. 9). The Youth.gov website (2018) notes that to improve mental health there needs to be a strong community awareness and these people need the capacity to understand what stresses LGBT youth and how to prevent that stress (Youth.gov, 2018, para. 3). The Youth.gov website (2018) also states that there also needs to be positive child and youth development in schools and at home (Youth.gov, 2018, para. 4). The Trevor Project is a place where LGBTQ youth can go to where they can get help and it has helped so many. Teeman (2017) the day after Trump was elected president the Trevor hotline doubled in calls and young kids are calling the hotline everyday terrified of Trump and the policies that are going into place that tell kids that they are not worthy (p.16). The Trevor project is run by volunteers who are a great resource for anybody who is thinking about taking their own life. There are resources out there that will save LGBTQ youth lives.

In conclusion, there still is discrimination against LGBTQ youth in schools, healthcare, and in their families. But with time the discrimination will decrease and acceptance will be among all. I think everybody in schools, healthcare, and families need to be educated on the LGBTQ community. Schools need to incorporate clubs or support groups where if a student feels unsafe or just needs someone to talk to there will be somebody there for them. If teachers were legally able to intervene when there are bullying problems there would be a decrease in depression and suicidal thoughts in LGBTQ youth. When health care providers become more educated LGBTQ youth will be able to get the help they need for their mental health and be able to see psychiatrists who can help them learn to cope and deal with their not supporting families. I think families need to learn to accept their children for who they are and if they don't right away they can learn how to. We need to strike down the social culture that being gay or being who you are is a bad thing. Having supportive families will make their home a safe place. I don't think discrimination will end right away but the more the world is educated the better it will be for LGBTQ youth. Jason Cianciotto, executive director of the Tyler Clementi Foundation (2017) states that Too little is changing, and for too long, our society has put Band-Aids on this problem (LGBQ teens, 2017), Ciancitto also states that While Band-Aids are good, we need to help by better addressing the root causes of these problems (LGBQ teens, 2017)

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