Thirty-six percent of high school aged youth who identify as lesbian, gay, bisexual, or transgender (LGBT) have made a suicide plan in the past year, which is significantly higher compared to heterosexual cisgender youth (9%). LGBT youth may be at higher risk for suicide because of how they are mistreated and stigmatized in society. Suicide prevention strategies seek to reduce risk factors and promote protective factors.

Mental Health

Having a mental health diagnosis, or previously attempting suicide is a risk factor for suicide. Vermont data has identified that younger people (less than 24 years) who have died by suicide are more likely to have been in mental health treatment at the time of death, compared to older people who have died by suicide. Vermont data also shows that LGBT youth have more risk factors related to mental health and suicide, compared to heterosexual cisgender youth. LGBT youth with a suicide plan are more likely to feel sad or hopeless for two or more weeks, hurt themselves intentionally, or attempt suicide compared to heterosexual cisgender students with a suicide plan, and youth without a suicide plan.

**KEY POINTS**

- More than a third of LGBT students have made a suicide plan in the past year (36%).
- Compared to heterosexual cisgender youth who have made a suicide plan, and youth without a suicide plan, LGBT youth who have made a suicide plan are more likely to:
  - Hurt themselves purposefully, feel sad or hopeless, or attempt suicide
  - Smoke cigarettes
  - Misuse a prescription medication
  - Experience bullying

**LGBT youth who have made a suicide plan are more likely to experience risk factors related to mental health.**

- Did something to purposely hurt themselves without wanting to die, past year
- Felt sad or hopeless for 2 or more weeks, past year
- Attempted suicide, past year

Source: Vermont Youth Risk Behavior Survey, 2019
*statistically higher than youth without a suicide plan; ^statistically higher than heterosexual cisgender students with plan
Risk Factors Reported for LGBT Youth with a Suicide Plan

Substance Use

Substance use and suicide share many risk factors.\(^2\) Substances can be used to cope, numb or alleviate feelings of stress, unhappiness, and other negative feelings. Having a substance use disorder may contribute to someone making a plan to take their life.\(^3\) Youth who have made a suicide plan are more likely to report current substance use compared to students who have not made a suicide plan in the past year. LGBT youth with a suicide plan are significantly more likely to smoke cigarettes, and misuse prescription medication compared to other students who have made a suicide plan or students who have not made a suicide plan.

Youth who have made a suicide plan are more likely to use substances.

<table>
<thead>
<tr>
<th>Substance</th>
<th>LGBT with suicide plan</th>
<th>Heterosexual cisgender with suicide plan</th>
<th>Youth without a suicide plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marijuana</td>
<td>46%</td>
<td>45%</td>
<td>24%</td>
</tr>
<tr>
<td>Alcohol</td>
<td>48%</td>
<td>47%</td>
<td>28%</td>
</tr>
<tr>
<td>Electronic Vapor Product</td>
<td>44%</td>
<td>48%</td>
<td>23%</td>
</tr>
<tr>
<td>Cigarettes</td>
<td>21%*</td>
<td>14%*</td>
<td>5%*</td>
</tr>
<tr>
<td>Misused Prescription Medication</td>
<td>17%^*</td>
<td>11%^*</td>
<td>3%^*</td>
</tr>
</tbody>
</table>

Source: Vermont Youth Risk Behavior Survey, 2019
*statistically higher than youth without a suicide plan; ^statistically higher than heterosexual cisgender students with a plan

Bullying

Youth who are bullied are at high risk for suicide-related thoughts and behaviors.\(^3\) LGBT youth with a suicide plan are significantly more likely to have been bullied compared to heterosexual cisgender students with a suicide plan, and students without a plan (45% vs. 34% vs. 14%, respectively). Youth who have made a suicide plan are more likely to have bullied someone compared to youth who have not made a suicide plan.

LGBT youth who have made a suicide plan are more likely to experience bullying.

<table>
<thead>
<tr>
<th>Activity</th>
<th>LGBT with suicide plan</th>
<th>Heterosexual cisgender with suicide plan</th>
<th>Youth without a suicide plan</th>
</tr>
</thead>
<tbody>
<tr>
<td>Were bullied, past 30 days</td>
<td>45%^*</td>
<td>34%</td>
<td>14%</td>
</tr>
<tr>
<td>Were electronically bullied, past year</td>
<td>43%^*</td>
<td>34%</td>
<td>12%</td>
</tr>
<tr>
<td>Bullied someone, past 30 days</td>
<td>21%*</td>
<td>20%*</td>
<td>8%*</td>
</tr>
</tbody>
</table>

Source: Vermont Youth Risk Behavior Survey, 2019
*statistically higher than youth without a suicide plan; ^statistically higher than heterosexual cisgender students with a plan
Key Takeaways

Students who identify as LGBT are at high risk for suicide. These data suggest that there may be some risk factors that may be particularly elevated for LGBT youth who have made a suicide plan compared to other students. These risk factors include:

- Intentionally hurting themselves without wanting to die
- Attempting suicide
- Feeling sad or hopeless for 2 or more weeks
- Misusing a medication
- Smoking cigarettes
- Experiencing bullying

There are some evidence-based strategies that reduce suicide-related behaviors. These include:

- Creating safe and supportive environments, like student-led organizations known as gay-straight alliances.\(^5\)
- Ensuring equitable access to mental health treatment.
- Health care providers work with parents to educate about the importance of prescription safe storage.
- Educating youth about mental health and suicide-related behaviors.\(^6\)

References:

1. Youth Risk Behavior Survey Report, 2019
2. The Trevor Project
3. CDC Suicide Webpage
4. Suicide Prevention Recommendations 2020 Report to Legislature

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