

On Mental Health & Suicide Awareness for LGBTQIA+ People





I. Introduction

The issue of mental health difficulties among LGBTQIA+ youth is complex and urgent. These young people often face more challenges than their cisgender and heterosexual counterparts, especially when it comes to severe mental health conditions and a higher risk of suicidal thoughts¹. There are many factors that make this issue complicated, which means finding solutions isn't straightforward. Given the range of societal and structural level factors at play, this places this specific population in an even more delicate position, it's crucial to quickly identify and address the elements that worsen their mental health struggles.

This toolkit is meant as a resource for everyone. Whether you identify as LGBTQIA+ or are an ally looking to learn more about the specific issues within, you can hopefully find some answers here.

II. Methodology

This research employed a structured methodology involving two interconnected online workshops held on 11 and 27 July 2023. Conceived in collaboration with The Global Alliance of Mental Illness Advocacy Networks (GAMIAN-Europe), The International Lesbian, Gay, Bisexual, Transgender, Queer & Intersex Youth and Student Organisation (IGLYO), and the International Association for Suicide Prevention (IASP) LGBTQIA+ Special Interest Group, the workshops aimed to elicit comprehensive insights into the experiences of LGBTQIA+ individuals grappling with severe mental ill health and history of suicidality.

Designed as two-hour interactive sessions, the workshops engaged participants to share their personal perspectives and experiences. Selection criteria ensured a diverse representation, encompassing individuals aged 18 and above who identify as LGBTQIA+, possess firsthand knowledge of suicidality, and carry a diagnosis or self-reported diagnosis of mental ill-health.

The workshops pursued four primary research objectives: an in-depth exploration of mental health challenges faced by LGBTQIA+ individuals with mental health conditions, an analysis of external factors influencing suicidal ideation, strategies to combat stigma, and an identification of potential policy initiatives. Participants, upon expressing interest, completed an application form detailing their experiences and availability.

¹di Giacomo E, Krausz M, Colmegna F, Aspesi F, Clerici M. Estimating the Risk of Attempted Suicide Among Sexual Minority Youths: A Systematic Review and Meta-analysis. JAMA Pediatr. 2018;172(12):1145–1152. doi:10.1001/jamapediatrics.2018.2732

²Andrzej Duda says LGBT 'ideology' worse than communism - https://www.bbc.com/news/world-europe-53039864

³The UK is moving to ban conversion therapy. Where in Europe is the practice still legal? -

III. Understanding Serious Mental Health Challenges within the LGBTOIA+ Communities

LGBTQIA+ individuals face unique mental health challenges that are heightened by societal, political, and medical biases across Europe. While every individual's experience is personal, there exists a common thread of discrimination, lack of proper medical care, and societal ostracization, which impacts their mental well-being. In diverse European landscapes, these challenges manifest in varying intensities, influenced by local politics and societal norms. The following section is broken down into subtopics based on the main themes that came up during the workshops.

A. Stigma and Discrimination

Growing up with diverse sexualities and gender identities that do not conform to binary norms or heterosexual orientations in societies that label such variations as wrong, immoral, illegal, and punishable results in a range of profound psychological and emotional responses. These reactions quickly give rise to feelings of shame, anxiety, depression, and a loss of hope or will to continue living. Consequently, the non-recognition of an individual's LGBTQIA+ identity, the absence of acknowledgement or promotion of gender-affirming behaviour, care, or treatment, coupled with persistent acts of belittling, rejection, criminalization, and shaming of LGBTQIA+ identities, collectively contribute to elevated levels of psychological distress and negative mental health outcomes.



Across Europe, there are governmental actions that either overtly or subtly look to discriminate against LGBTQIA+ Individuals. An example includes situations such as in Hungary where legal gender recognition has been banned, meaning that those identifying as gender different from their sex at birth are banned from legally doing so. This potentially exposes them to different degrees of harassment and even violence when forced to do everyday tasks that require the use of an ID card such as setting up bank accounts, applying for jobs and many more. Naturally, this takes a large toll on the mental health of LGBTQIA+ individuals. Another example is in Poland where there is discrimination by police when LGBTQIA+ individuals go to protest their rights. An institution that should help keep the queer community safe is doing exactly the opposite. In some cases, Polish politicians explain that being queer is an ideology and LGBTQIA+ people are pushing this as an agenda². This leads to feeling unwanted in your own country which can foster suicidality.

While any incident of harassment is deleterious to individuals' mental health, what really wears people down is the constant discrimination and harassment day after day. These can often come in the form of either intentional or unintentional microaggressions towards sexual identity and/or gender



Only 8 European Countries have imposed bans on conversion therapy.³

B. Shortage of Access and Inaccessibility to Care

Another central issue for the mental health of those identifying as LGBTQIA+ is the problem of getting access to proper care. The unavailability of essential mental health resources has a significantly detrimental impact on the mental well-being of LGBTQIA+ people. This is particularly evident when crucial support systems, such as gender-affirming care for transgender youth or general therapy for LGBTQIA+ individuals, remain out of reach. Long wait times and expensive care are common issues in society in general, however, for LGBTQIA+ individuals there is also a lack of professionals with specific training for their unique mental health care needs. In some cases, the only way in which LGBTQIA+ individuals feel they can receive help is by checking themselves into psychiatric hospitals where they are vulnerable, and in many cases subject to, coercion and overuse of medication.

C. Isolation and Lack of Support

Isolation among LGBTQIA+ Individuals is an ongoing issue that is more or less prevalent depending on cultural and country-specific situations. In smaller towns or villages in Romania, for example, there is often a lack of any support systems due to stigma surrounding the topic. This leads to detrimental mental health as those identifying as LGBTQIA+ struggle to access support networks to help them deal with the stigma they face daily.

Another cause of concern for mental health is the lack of safe social spaces. In many countries, the absence of either physical or virtual safe spaces can cause LGBTQIA+ individuals to detach and further self-isolate. It has been shown that when people continually isolate themselves this can further deteriorate their mental health and increase suicidality⁴.

IV. The Specific Roles of Stigma in Mental Health and Suicidality for LGBTQIA+ Individuals

As previously mentioned, stigma towards LGBTQIA+ individuals causes significant detriment to their mental health. The next section will look at the different roles that stigma can play.



⁴Motillon-Toudic C, Walter M, Séguin M, Carrier JD, Berrouiguet S, Lemey C. Social isolation and suicide risk: Literature review and perspectives. Eur Psychiatry. 2022 Oct 11;65

⁵State-of-the-art study focusing on the health inequalities faced by LGBTI people - https://health.ec.europa.eu/system/files/2020-02/stateofart_report_en_0.pdf

A. Compounded and Multiple Stigma(s)

Stigma becomes compounded when various identities intersect. For instance, being LGBTQIA+ is already a stigmatised experience within itself. However, when this intersects with other stigmatised experiences, such as mental ill-health, the effects can be magnified.

A common source of stigma toward LGBTQIA+ people is ignorantly assuming that you have a mental health condition because of your status as an LGBTQIA+ person rather than simply because of the mental health condition. This confusion can lead to the assumption that all those identifying as LGBTQIA+ are living with mental ill-health. If this misconception compounds the stigma faced by LGBTQIA+ people, it may not only negatively impact their mental health, but may also increase suicidality, as people may not feel comfortable talking about their suicidality through fear that it will be reduced to their being LGBTQIA+.

B. Stigma within the LGBTQIA+ Communities

Stigma does not always come from society at large and can be particularly difficult when it originates from within the LGBTQIA+ community itself. This rejection can stem from a myriad of reasons, such as not conforming to certain body ideals, not adhering strictly to expected gender expressions within the community, or possessing other identities such as being of a particular race, ethnicity, socioeconomic background, educational level, or any combination thereof.

This heightened layer of complexity can drastically intensify the impact and danger of stigmatization. Consequently, it gives rise to profound and harmful thoughts, ideation, and a distorted sense of self, leading to feelings of hopelessness, depression, and anxiety. This alarming progression can culminate in a heightened risk of suicide..

C. Stigma in and around Mental Health Support Services

When it comes to mental health support services, access alone is often not enough to ensure proper support is being given. There are many cases where a lack of understanding of the specific narrative(s) of LGBTQIA+ individuals results in a lack of empathy by the professionals providing the resources. LGBTQIA+ individuals may finally decide to seek help for their mental health conditions only to find that their personal experiences are not understood by support service staff. They can become fatigued by constantly being misunderstood, and years of stigma from ill-equipped support services can lead to them abandoning the help they sought. Consequently, the risk of suicidality may increase. For example, for some non-binary individuals, therapists or psychologists/psychiatrists assume that they are just questioning their gender identity, and will brush aside the fact that they are in fact comfortable with identifying as non-binary and their mental health condition is linked to other issues. Overall, the complete spectrum of sexuality and gender identity is not understood within many mental health support services⁵.

In some cases even with adequate access to services and a tailored understanding of LGBTQIA+ individuals' mental healthcare needs the act of help-seeking itself may be seen as "weak" or only for "crazy people" and cause LGBTQIA+ individuals to refrain from accessing them. Those identifying as LGBTQIA+ may be tired of already being seen as unwell due to their identity and not want to give further credence to this idea.

V. The Role of External Factors in Mental Health and Suicidality

A. Wars and Armed Conflicts

The eruption of conflicts and wars has far-reaching impacts and gives rise to immense horrors and suffering that fractures social and communal bonds. These events result in the loss of loved ones, homes, and schools, while also inducing feelings of alienation in new environments. The resultant hopelessness, injustice, grief, and other distressing factors worsen mental health and impede one's sense of purpose and prospects for a better future.

For LGBTQIA+ individuals, conflicts, such as the war in Ukraine, have seen specific challenges arise such as a lack of access to care. For those living in conflict zones or refugee camps, access to hormonal and gender-affirming medications is often limited or non-existent. This not only exacerbates an already stressful situation but has serious consequences on people's mental health, as stopping hormone treatment has been associated with anxiety and depression⁶.

In some cases, it is not the direct conflict that causes issues but secondary problems that come about as a result of it. For example, since the Ukraine war, a state of emergency has been declared in Hungary, allowing the government to rule by decree rather than the normal parliamentary process. They used this to ban new gender recognition applications⁷.

B. Public Health Pandemics and Crises, Isolation, Restriction of Movements

The emergence of public health crises, exemplified by the COVID-19 pandemic and the potential for future disease outbreaks, as well as other factors such as security concerns and emergency laws, can lead to restricted movements and placements.

For LGBQIA+ people in places that may rely heavily on their own support networks and communities – particularly in countries where they are persecuted by governments – this often means isolation. This was often coupled with having to move back in with family due to loss of income as many were self-employed and due to restrictions, were unable to work. For those who have not expressed their LGBTQIA+ identity to their families this meant potentially returning to hostile familial environments.

While there were LGBTQIA+ events that went online, due to the shared accommodation that many of them found themselves in, LGBTQIA+ individuals could not readily engage with virtual events or support services. A lot of them relied on these services for their mental well-being and not being able to access these services meant increased issues with their mental health as well as increased suicidality.

C. Cost of Living Crisis

Escalating inflation, unemployment rates, and economic hardships have substantial ramifications on the mental health of LGBTQIA+ individuals. The heightened cost of living affects the ability to afford housing, recreational activities, and essential supplies, placing increased strain on daily life. For example, those from the transgender community saw increased prices in hormone treatment which, coupled with the stigma toward them and increased difficulty in finding employment (and in many countries a lack of social protection), led to increasingly poor mental health outcomes and, in some cases, suicidal distress.

In general, many of those identifying as LGBTQIA+ found that their already expensive treatment and therapy continued to increase across the board, making them particularly vulnerable to the cost of living crisis. Similarly to how the pandemic resulted in people losing income due to governmental restrictions, the cost of living crisis caused many members of the LGBTQIA+ community to have to move back in with family due to unaffordable rent commodities. For many of the same reasons as above, this led to worsening mental health and the potential for increased suicidality.



VI. An Action Plan for Suicide Prevention: Recommendations

There can sometimes be a general fear that talking about suicidality can trigger the very phenomena it's trying to prevent. However, studies show that making use of personal stories and talking about them head-on can reduce suicidality rather than increase it⁸. The visibility and awareness must be done in a safe environment with professionals who are properly trained and knowledgeable in LGBTQIA+ mental healthcare. While LGBTQIA+ individuals are certainly the best tellers of their own stories, engaging allies in the discussions may best bridge the gap between the LGBTQIA+ community and mainstream society. Getting the perspectives of allies may help LGBTQIA+ individuals navigate through certain situations.

It is important to acknowledge the role of peer support groups. Peer support groups for LGBTQIA+ can offer a vital sense of community and understanding that professionals might not always provide, serving as a key resource in improving mental health

Concrete action needs to be taken for suicide prevention for LGBTQIA+ individuals and therefore the following recommendations are proposed

- **1. Develop a comprehensive awareness campaign** that harnesses the stories and lived experiences of diverse LGBTQIA+ individuals. This campaign should employ multimedia platforms, including social media, documentaries, and public forums, to foster greater societal understanding, empathy, and allyship.
- **2. Strategically implement a multifaceted approach** to increase the visibility of authentic personal stories and diverse voices within the LGBTQIA+ communities. Collaborate with media outlets, influencers, and advocacy organisations to spotlight relatable role models who have triumphed over adversities related to their sexual orientation and gender identity.
- **3. Prioritize the promotion of narratives that acknowledge the complexities of the LGBTQIA+ experience**, discouraging toxic positivity and unrealistic expectations. Work with content creators, mental health experts, and community members to craft messages that resonate with authenticity, honesty, and a balanced perspective on challenges and successes.
- **4. Establish structured pathways that facilitate the entry of LGBTQIA+ individuals into professions** dedicated to fostering inclusivity and support. Collaborate with educational institutions, industry leaders, and mentorship programs to create targeted pipelines that encourage and enable diverse representation.
- **5. Develop and implement specialized training programmes** designed to equip professionals from diverse fields with the knowledge and skills needed to effectively engage with and support LGBTQIA+ individuals. Collaborate with experts, organizations, and trainers to design comprehensive training modules that address cultural competence, sensitivity, and best practices.

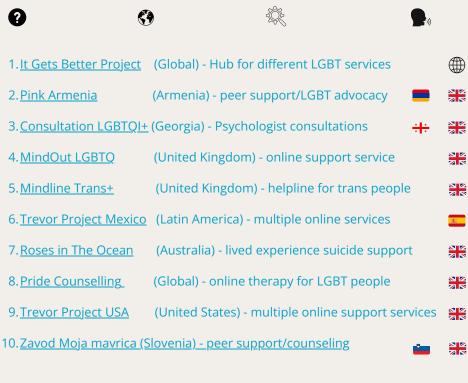
- **6. Design and implement comprehensive training modules tailored for healthcare providers** to effectively address the distinctive challenges encountered by LGBTQIA+ individuals. Collaborate with medical associations, academic institutions, and mental health experts to create evidence-based training that encompasses understanding, diagnosis, treatment, and support.
- **7.** Spearhead advocacy efforts to instil culturally sensitive and inclusive mental healthcare practices within healthcare systems. Engage with policymakers, professional organizations, and advocacy groups to promote guidelines and policies that mandate respectful and affirming care for LGBTQIA+ people.
- **8.** Provide strategic support to facilitate the establishment of safe and inclusive spaces within LGBTQIA+ communities. Collaborate with community organizations, local governments, and businesses to secure resources, locations, and funding for these spaces, ensuring they cater to the diverse needs of LGBTQIA+ people.
- **9.** Promote open dialogue and organise activities that actively work to reduce stigma, cultivate a sense of belonging, and offer peer support within these safe spaces. Collaborate with mental health professionals, community leaders, and youth advocates to design and implement programs that encourage shared experiences, empathy, and empowerment.



⁸Dazzi T, Gribble R, Wessely S, Fear NT. Does asking about suicide and related behaviours induce suicidal ideation? What is the evidence?

VII. Resources and Support

Click on the links below to find out more about different services being offered worldwide for people identifying as LGBTQIA+. The services are mostly free, except in the case of Pride Counselling.





VIII. Conclusion

Rising mental health and suicide risks faced by LGBTQIA+ youth due to discrimination, lack of support, and social issues are revealed by our workshops. The need for policy changes to address these challenges is made clear. Understanding and hope can be fostered by the raising of awareness and the sharing of real stories from LGBTQIA+ youth. A more welcoming environment can be created by better representation in supportive professions.

An overhaul is required by healthcare to be better suited for LGBTQIA+ specific challenges. A huge difference in making people feel like they belong can be made by the creation of safe spaces and community programs. The barriers causing mental health struggles in LGBTQIA+ communities are being broken down by the making of these changes. more compassionate and fair future where everyone's mental well-being is a priority will be led to.

By actively adopting and implementing these recommendations, we can start to break down the numerous barriers affecting mental health and well-being within LGBTQIA+ communities. This action will set the stage for a future defined by greater compassion, resilience, and empowerment, positioning mental health as a priority in our collective efforts and narrowing the existing disparities. In doing so, we open up the possibilities for a brighter and more equitable future for all.



September, 2023



Acknowledgements

A deep and profound thanks to all the wonderful people who participated in the workshops and behind the scenes to make sure that this project was treated with the attention and care it deserves. It was a truly global effort with people from all around the world talking about their different experiences and their respective yet collective challenges.

The project was supported by grants from Boehringer Ingelheim and Novartis. However, the supporters had no influence in the content of this campaign.



