PREVENTING TRANS SUICIDE
An Introduction for Health and Services Providers

DEFINITIONS & KEY TERMS

1. **TRANSGENDER/TRANS & GENDER DIVERSE**
   Umbrella terms covering individuals whose gender identity is opposite of or not congruent with their sex assigned at birth.

2. **TRANSITION/ING & AFFIRMATION**
   The process of coming to recognize, accept, and express one’s internal gender identity - most often referring to medical, social, and legal changes observable to others that may include hormones and/or surgeries.

3. **NON-BINARY, GENDERQUEER, & NON-CONFORMING**
   Encompassing term(s) for individuals who do not identify or express within a gender binary (female/male). Not everyone who identifies with these terms identifies as trans or with other labels in this group.

4. **GENDER AFFIRMATION SURGERY & GENITAL RECONSTRUCTION SURGERY**
   The surgical alteration of one’s primary or secondary sex characteristics, including genitals, to more accurately reflect the person’s gender identity. Not all people want or need GAS/GRS.

5. **STEALTH & BLENDING**
   A person who does not disclose their gender affirmation history to others, or they ‘blend into’ society in their correct gender. This is not the same as closeted.
If the following are observed, take action ASAP to protect the individual, refer to a mental health professional experienced in working with a range of gender identities. For further guidance, contact the GLBT Helpline (1-888-240-4528), Samaritans (1-877-870-4673), Trevor Project (1-866-488-7386), and/or call 911.

**Signs of Acute Risk**
- Threatening to hurt/kill oneself or thinking/expressing desire to hurt/kill oneself, or better off dead. Excessive focus on death or suicide.
- Current access or seeking access to firearms, pills/substances, or other lethal means.
- Purging personal items, especially those connected to trans identity (wigs, dresses, packers, binders, etc.).

**Additional Warning Signs**
- Marked changes in mood, sleeping, and/or eating (increase or decrease).
- Expressing there is no reason for living, no sense of purpose in life, or feeling hopeless.
- Withdrawing from friends, family, and social activities - isolation.
- Risk taking and reckless behavior, particularly if a change from regular behavior.
- New or increased substance use.
- Lost interest in things previously enjoyed.

**PROTECTIVE FACTORS AGAINST SUICIDE**
- Effective clinical care for mental, physical and substance use disorders. Regular attendance in appointments.
- Easy access to a variety of clinical interventions and support for seeking help.
- Restricted access to highly lethal means.
- Strong connections to family, and family support of gender identity.
- Others using and respecting chosen name and pronouns.
- Community support.
- Support through ongoing medical and mental health care relationships.
- Skills in problem solving, conflict resolution, and emotional intelligence.
- Cultural and religious beliefs that discourage suicide and support self-preservation.

**PREVALENCE OF MENTAL HEALTH CONDITIONS**

While literature is limited, trans individuals report greater negative physical health outcomes and mental health concerns than non-trans individuals, greatly due to discrimination and stigma.

**Systematic Stressors**
Pressure is exerted by others to conform to social gender norms of behavior and appearance. The more a person varies from gender-specific roles, dress, and behaviors, the greater risk of social disapproval and violence. In efforts to reduce this stigma, some people work to conceal their gender variance or history. Combined, these experiences contribute to feelings of fear, anger, not belonging, and invisibility. Due to these experiences, nearly 40% of trans individuals report experiencing serious psychological distress.

**Depression & Anxiety**
There is some evidence that trans people may be less likely to seek treatment for depression - fearing that their gender issues will be assumed to be the cause of their symptoms, and that they’ll be negatively judged.

**Suicide & Self-Harm**
Studies report higher rates of suicidal ideation (45-77% vs. 14%) and lifetime suicide attempts (40% vs. 4.6%) in trans adults compared to non-trans adults, with transwomen being more likely to attempt suicide than transmen. Anecdotally, trans persons are less likely to complete suicide once they have medically/surgically transitioned.

**Experiencing Violence & PTSD**
Many trans people experience violence in relation to their gender identity or gender expression. These range from harassment and discrimination to verbal, physical, and sexual assault (including rape and homicide). As with other populations, violence is rarely reported to police. Experiencing violence or discrimination based on gender identity and transition status significantly predicts suicide ideation.