

Preventing Suicide Among Veterans with Lesbian, Gay, Bisexual, Transgender (LGBT) and Related Identities



From Science to Practice

Using Research to Promote Safety and Prevent Suicide

Issue

LGBT people (those who have a sexual and/or gender minority identity) are more likely than their cisgender and heterosexual peers to experience suicidal ideation and behavior.^{1,2,3,4,5,6,7,8} They may also be more likely to die by suicide, but mortality data for the LGBT population are limited.^{9,10} Reasons for greater rates of suicidal ideation and suicide attempts within the LGBT population include the stigma, discrimination, and minority stress that this population continues to face — all of which contribute to chronic psychological distress.^{11,12,13,14,15}

To inclusively recognize the full range of sexual orientation and gender identity minorities, VA uses the term “LGBT and related identities.” In instances where specific subgroups were studied, the nomenclature used by the researchers is preserved (i.e., LGB, sexual minority).

Key Findings

Risk factors for suicide in the LGBT population

- Several risk factors for suicide — such as psychological distress, substance use, anxiety and mood disorders (e.g., depression), and stressful life events (e.g., homelessness, sexual assault, intimate partner violence) — are more prevalent in the LGBT population than in the non-LGBT population.^{16,17,18,19,20,21}
- Risk patterns differ within subgroups of the LGBT population, as well as between this population and the non-LGBT population. For example, lesbian and bisexual women are at greater risk for substance use disorders than are gay and bisexual men and heterosexual women, while gay and bisexual men have a greater risk for lifetime prevalence of suicide attempts than do lesbian and bisexual women and heterosexual men.²⁰ Black transgender Veterans are more likely than white transgender Veterans to experience housing instability.²²
- A meta-analysis of studies on the prevalence of suicidal ideation and behavior within LGB subgroups

found that study participants who identified as bisexual had higher rates of past-year suicidal ideation, past-year suicide attempts, and lifetime suicide attempts than did participants who identified as lesbian or gay.²³ These rates were highest among bisexual women.

- The transgender population may be more at risk for suicide than any other subgroup of the LGBT population as well as the general population. A systematic review of studies found that nearly half of transgender adults had experienced suicidal ideation and more than a quarter had attempted suicide in their lifetime.²⁴ Stigma, social injustice, minority stress, and lack of employment opportunities are factors that contribute to the disproportionate rate of suicidal ideation within the transgender and gender-diverse populations.^{8,25}

Risk factors for suicide in the LGBT Veteran population

- Victimization and decreased social support were found to be particularly relevant suicide risk factors for LGBT Veterans.²⁶
- Sexual minority Veterans are twice as likely as sexual minority non-Veterans in the general population to own firearms — a significant independent risk factor for suicide.^{27,28}

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- Suicidal ideation may be more prevalent among LGBT Veterans than among heterosexual Veterans.^{1,26} One study found that, while there was no difference between LGB and heterosexual Veterans in rates of suicidal ideation or suicide attempts in the past 12 months, LGB Veterans had significantly higher odds for lifetime suicidal ideation than heterosexual Veterans did.¹
- Transgender Veterans who access Veterans Health Administration (VHA) care have more than 20 times the rate of lifetime suicidal ideation and suicide attempts than does the general VHA patient population.⁹ In a national survey of 212 transgender Veterans, 57% reported past-year suicidal ideation and 66% reported a history of suicide planning or attempts.⁵ Among completed suicides, transgender Veterans are dying at younger age (average age = 49.4) as compared with other studies of Veteran suicide (age 59.6).²⁹
- Transgender Veterans are more likely than cisgender Veterans to have a history of homelessness,³⁰ to experience housing and employment discrimination, and to experience shame related to being transgender while serving in the military. Homelessness, stigma experienced in the military, posttraumatic stress disorder, depressive symptoms, older age, and transgender male identity (being assigned female sex at birth and identifying as male or masculine) are associated with suicide planning and attempts.⁵
- A study of 298 transgender Veterans found that discrimination was positively associated with suicidal ideation and that social support from other LGBT Veterans helped moderate the relationship between discrimination and suicidal ideation, possibly serving as a protective factor.³¹

Implications

Veterans with LGBT and related identities are more likely to be victims of violence and have higher rates of suicidal ideation and behavior. Different subgroups within the LGBT population are at higher risk for various physical and mental health challenges and adverse social determinants of health. Not all LGBT Veterans experience these health concerns and conditions; however, clinicians can help LGBT Veterans who may be at increased risk for suicidal ideation and behavior by providing an inclusive and safe environment.

Ways You Can Help

- Promote affirming environments to facilitate open discussion of sexual orientation, gender identity, stigma, and needs.³² Examples of this include asking every patient about their gender identity, preferred name, pronouns, and sexual orientation identity as part of routine assessment and using a Veteran's preferred name and pronouns in conversation and documentation.
- Provide care that incorporates a person-in-context perspective and addresses mental health, mental health-related stigma, and psychosocial stressors.³³
- Offer inclusive fact sheets and helpful information for Veterans with LGBT and related identities to show that you understand the association of identity and health. Examples can be downloaded here: <https://www.patientcare.va.gov/LGBT/index.asp>
- Support Veterans in accessing gender-affirming medical care and establishing connections within the Veteran and LGBT community, as these efforts are salient protective factors against suicide risk for transgender Veterans.³⁴
- Familiarize yourself with required standards of care for LGBT Veterans, including VHA directives 1340(2) and 1341(2), available at www.va.gov/vhapublications/publications.cfm?pub=1&order=asc&orderby=pub_Number.



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- Avoid assumptions about people being straight and/or cisgender. Get in the habit of using inclusive language, such as “they/them” pronouns when a person’s identity isn’t known to you; ask if someone has “important people in their life” rather than asking if they have “a wife” or “a husband.”
- Consider participating in the VHA LGBT Health Program’s ongoing educational opportunities, which inform VHA staff members about best practices in LGBT health care.
For more information, [visit www.patientcare.va.gov/LGBT/LGBT_Veteran_Training.asp](http://www.patientcare.va.gov/LGBT/LGBT_Veteran_Training.asp).
- If you are a VHA provider, consider seeking brief, nonurgent consultation on caring for transgender patients from an interdisciplinary team of experts through the computerized patient record system’s e-consultation service.³⁵
- Contact your facility’s LGBT Veteran Care Coordinator (VCC) if you have any questions about sexual orientation and gender identity issues in providing care to Veterans.

There is no single cause of suicide. It is often the result of a complex interaction of risk and protective factors at the individual, interpersonal, community, and societal levels. To prevent Veteran suicide, we must maximize protective factors and minimize risk factors at all these levels.

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