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## Suicidality among Transgender Youth:

An Introduction to the Health Sciences  
Literature and Recommendations for  
Validating Care

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## Suicidality among Transgender Adolescents

1. Review of terms and concepts
2. Suicidality disparities
3. Recommendations for validating care

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# Suicidality among Transgender Adolescents

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## Terms and Concepts: Sexual and Gender Minority Adolescents

- Sexual minority adolescents: adolescents who have a same-sex sexual orientation (attraction, behavior, or identity)
  - Lesbian, gay, and bisexual adolescents
- Gender minority adolescents: adolescents whose true gender identity is different than gender assigned at birth
  - Transgender adolescents

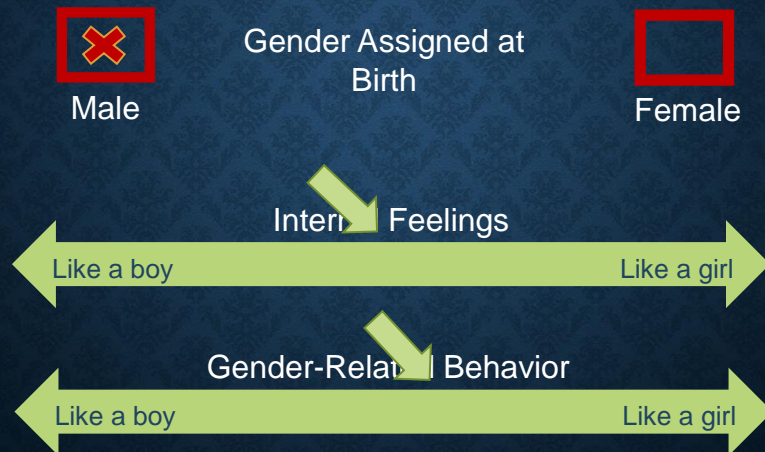
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# Transgender Adolescents – On the Binary



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# Transgender Adolescents – Nonbinary (genderqueer, gender fluid, etc.)



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## Terms and Concepts

- Transgender: umbrella term for people whose gender identity differs from the gender they were assigned at birth
- Cisgender: a person whose gender identity is the same as gender assigned at birth
- Gender Identity: If a person feels or considers themselves to be “female,” then their gender identity is female, regardless of gender assigned at birth.

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## Suicidality among Transgender Adolescents

- Second leading cause of death among all adolescents
- Emerging evidence of high risk for suicidality among transgender adolescents
- Likely related to disproportionate amounts of stress

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## Suicidality among Transgender Adolescents

- Small clinical samples
- Increasingly examined in large datasets – subgroup differences underexplored
- Some evidence of higher risk among youth assigned female at birth
- Limited measures of gender identity in prior research

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### Example of prior measure of gender identity

Which of the following best describes you?

- Heterosexual
- Gay, lesbian, or bisexual
- Transgender
- Not sure

California Healthy Kids Survey, 2015

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## Recommended Measurement of Gender Identity

- Assess gender assigned at birth
- Assess current gender identity
- Accurate identification of transgender individuals
- Examine transgender subgroup differences that go beyond simple gender assigned at birth differences

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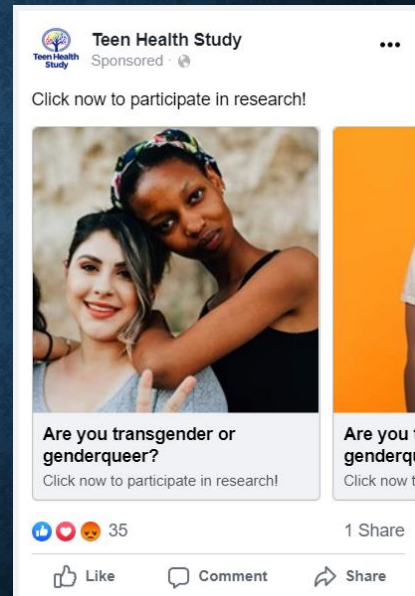
## Gender Minority Youth Study

- First to use to comprehensive measures of gender identity within large, nationwide adolescent survey of suicidality
- Assessed full spectrum of lifetime suicidality

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## Gender Minority Youth Study

- Cross-sectional online survey of adolescents ages 14 - 18 in the United States
- Advertisements on Facebook and Instagram
- Oversampled transgender adolescents



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## Gender Minority Youth Study

- Waiver of parental permission
- Screened participants to ensure safety:

This survey takes about 30 minutes to complete. We want to make sure you're doing it in a place that is private and in which you feel comfortable. Think about where you are now and who will be around in the next 30 minutes. Do you have any concerns that completing the survey here for the next 30 minutes might reveal something personal about you (e.g., gender identity, sexual orientation) to someone important who doesn't already know?

- Incentivized participation with a lottery

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## Suicidality Analysis

- 2020 participants, including 1148 transgender youth
- Diverse with regard to race/ethnicity and location
- Cisgender participants disproportionately female and sexual minority
- Assessed 6 domains of lifetime suicidality: passive death wish, suicidal ideation, suicidal ideation with a plan, suicide attempt, suicide attempt requiring medical care, and non-suicidal self injury
- Created seven category gender identity variable

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### Gender identity categories

- Cisgender males (n = 218)
- Cisgender females (n = 654)
- Transgender males (n = 616)
- Transgender females (n = 63)
- Nonbinary – female at birth (n = 375)
- Nonbinary – male at birth (n = 43)
- Questioning gender identity (n = 51)

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## Analysis Plan

- Coded gender identity two different ways:
  - Transgender v. Cisgender
  - Seven category variable
- All suicidality variables dichotomized
- Two sets of logistic regression models examining odds of suicidality outcome for gender identity groups
  - Adjusted for age, race/ethnicity, sexual orientation, and subjective social status

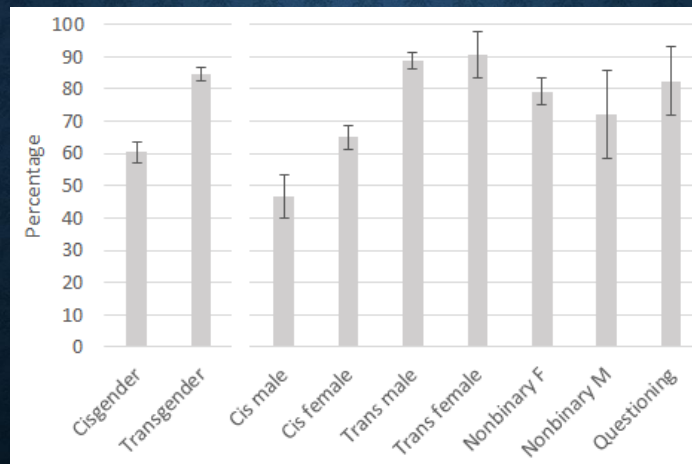
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## Results – Transgender vs. Cisgender

- Transgender adolescents had higher odds of each outcome when compared to cisgender adolescents:
- Passive death wish: OR = 2.6
- Suicidal ideation: OR = 2.2
- Making a suicide plan: OR = 1.8
- Suicide attempt: OR = 1.7
- Suicide attempt requiring medical care: OR = 2.0
- Non-suicidal self-injury: OR = 2.9

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## Results – Prevalence of Lifetime Ideation



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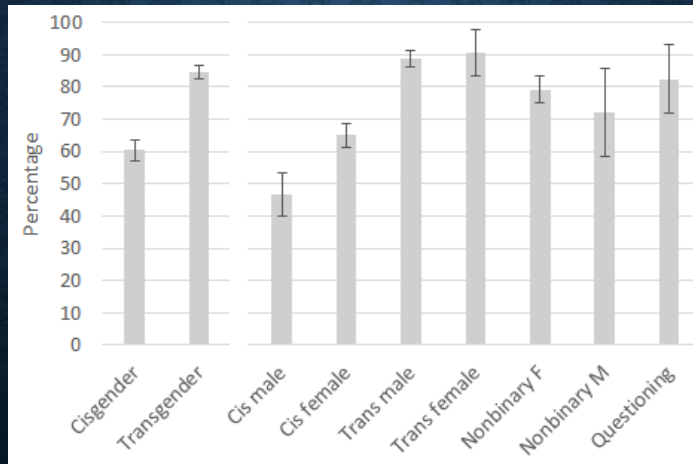
## Why high rates among cisgender youth?

- Used a lifetime timeframe
- High proportion of female and sexual minority
- Anonymous and confidential data collection – known to result in 2X endorsement of suicidality

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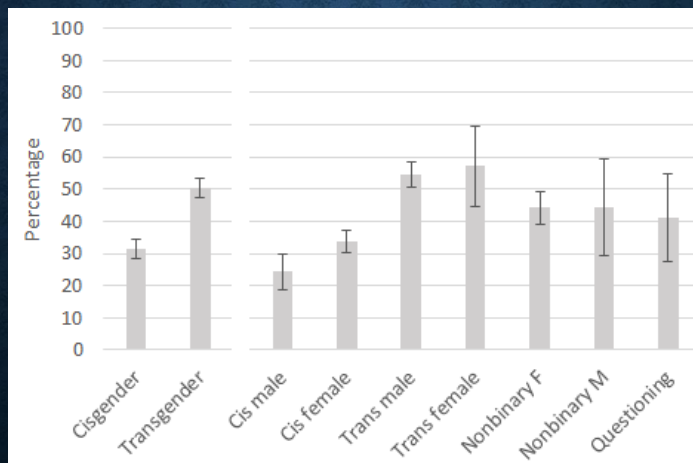


## Results – Prevalence of Lifetime Ideation



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## Results – Prevalence of Lifetime Attempts



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## Results – Examination of Subgroups

- Transgender males and transgender females had higher odds of suicidal ideation and attempt compared to either cisgender group
- Nonbinary adolescents assigned female at birth had higher odds of suicidal ideation and attempt than cisgender males

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## Conclusions

- Transgender adolescents had higher odds of experiencing each suicidality outcome
- Higher risk for suicide attempts requiring medical care, a known predictor of future additional suicidal behavior and death by suicide

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## Conclusions

- Transgender males and transgender females had higher risk for suicidal ideation and attempt
- Limited measures of gender identity in prior work may have obscured subgroup differences
  - Have combined transgender females and nonbinary adolescents assigned male into one group

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## Limitations

- Fewer transgender adolescents assigned male at birth
- Lifetime assessment of suicidality
  - Cannot assess psychosocial predictors of suicidality
- All participants social media users

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## Validating practice with transgender clients

1. Appropriate assessment of sexual orientation and gender identity
2. Addressing gender in a validating way with transgender clients
3. Ensure a welcoming environment for transgender clients

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## Assessment of sexual orientation

- Ask directly about sexual orientation in intake forms or during assessment
- “Are you attracted to boys, girls, or both?”
- Many transgender adolescents identify their orientation as “pansexual”

Do you think of yourself as:

- Lesbian, gay or homosexual
- Straight or heterosexual
- Bisexual
- Something else
- Don't know

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## Assessment of gender identity

- Ask directly about gender identity in intake forms or during assessment
- Ask about both current gender identity and sex assigned at birth

What is your current gender identity?  
(Check all that apply)

- Male
- Female
- Female-to-Male (FTM)/Transgender Male/Trans Man
- Male-to-Female (MTF)/Transgender Female/Trans Woman
- Genderqueer, neither exclusively male nor female
- Additional Gender Category/(or Other), please specify
- Decline to Answer, please explain why

What sex were you assigned at birth on your original birth certificate?  
(Check one)

- Male
- Female
- Decline to Answer, please explain why

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### If assessing in person:

- Indicate this is something that you ask everyone:
  - “Because many teens are affected by gender issues, I ask patients if they have any relevant concerns. Anything you say will be kept confidential. If this topic isn’t relevant to you, tell me and I will move on.”
- Like other sensitive questions, ask after building some rapport

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### Special considerations with adolescents

- LGBT adolescents have known about their gender identity/sexual orientation for longer than their parents, if parents know at all
- Ask questions privately during the assessment, and ask adolescent about parents’ knowledge of their identity

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## First meeting with a client

- Pronoun usage is extremely important, and one of the main ways to validate identity
- Politely ask which pronouns and name the client uses
  - She/her/hers, he/him/his, they/them/their
- If you know your client identifies as transgender, tell them your pronouns when introducing yourself

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## Take caution when interacting with parents

- If client uses pronouns/name that differ from their sex assigned at birth, ask them if their parents are aware of their gender identity
- Also ask teen directly how you should refer to them in the presence of their parents to ensure you don't "out" them abruptly or alienate parents

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## What happens when assigned gender does not match gender identity?

Gender dysphoria is defined as distress caused by the incongruence between one's true gender and their sex assigned at birth based on external genital structures.

Vance SR Jr, Ehrensaft D, Rosenthal SM. Pediatrics. 2014;134:1184-92

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## Assessing for gender dysphoria

- DSM 5 criteria include items about genitalia (primary sex characteristics)
- Can be extremely invalidating for transgender individuals to ask about this directly
- Only assess this if absolutely necessary
- And save this conversation for when you have developed strong rapport

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## Assessing for gender dysphoria

- Also, dysphoria can overlap with other mental health symptoms
- For example, a transgender adolescent might have anxiety about using public restrooms because of their gender
  - Not because of social anxiety more broadly

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## Validating practice with transgender clients

1. Appropriate assessment of sexual orientation and gender identity
2. Addressing client's needs in a validating way with transgender clients
3. Ensure a welcoming environment for transgender clients

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## Ensure a welcoming environment

- All staff should use individuals' correct pronouns and name
- Allow transgender clients to use restroom that aligns with their gender identity
  - Single occupancy, gender neutral restrooms are best option
- Post signs/ads in waiting areas that reflect gender and sexual orientation diversity

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## Thank you!

- Questions?
- Contact information: [thomabc2@upmc.edu](mailto:thomabc2@upmc.edu)