

Prevention and Treatment of Depression and Suicidality among Gender Minority Youth: An Introduction and Review of the Health Sciences Literature

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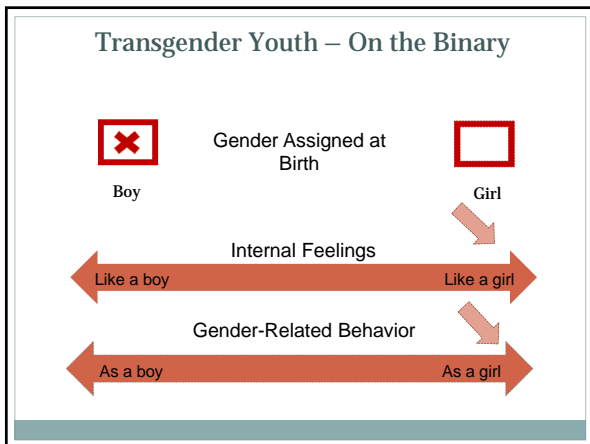
**Special thanks to NIDA: DA026312, DA030385
And especially DA037958**

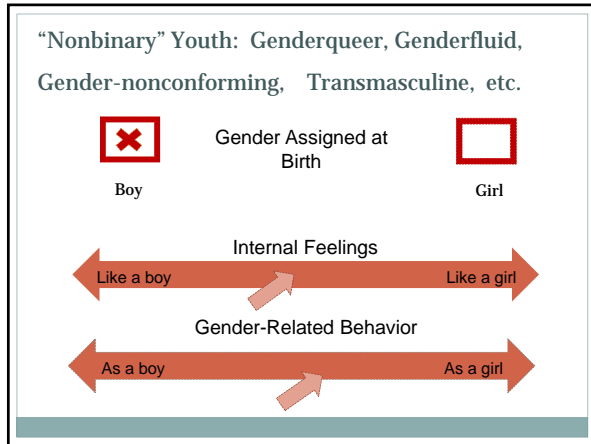
Terms and Definitions

Sexual and Gender Minority Youth (SGM)

Sexual Minority Youth:
Youth who have a same sex sexual orientation (attraction, behavior, identity)

Gender Minority Youth:
Youth whose true gender identity is different than gender "assigned at birth" (e.g., transgender youth)





Terms and Definitions

Transgender is an umbrella term for people whose gender identity, gender expression, or behavior *differs from the gender they were assigned at birth...*

Gender Identity: If a person feels or considers themselves to be “female” then their **gender identity** is female, *regardless of the gender assigned at birth...*

Gender Expression: External manifestations of one’s gender, expressed through one’s name, pronouns, clothing, haircut, behavior, voice or body characteristics

Definition of Disparities

“Health disparities refers to the variation in rates of disease occurrence and disabilities between socioeconomic and/or geographically defined population groups.”

National Library of Medicine

Three Major Goals of Disparities Research among Adolescents

1. To “Detect” disparities by conducting research that compares groups on health outcomes.
2. To “Explain” disparities by using research to identify the causal mechanism that “drive” the disparities.
3. To determine whether disparities “persist” over time as youth transition to young adulthood.

Three Major Goals of Disparities Research among Adolescents

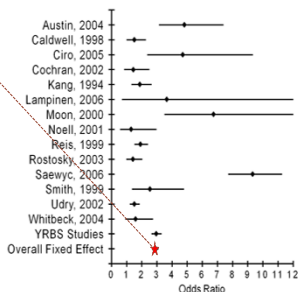
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Substance use disparities

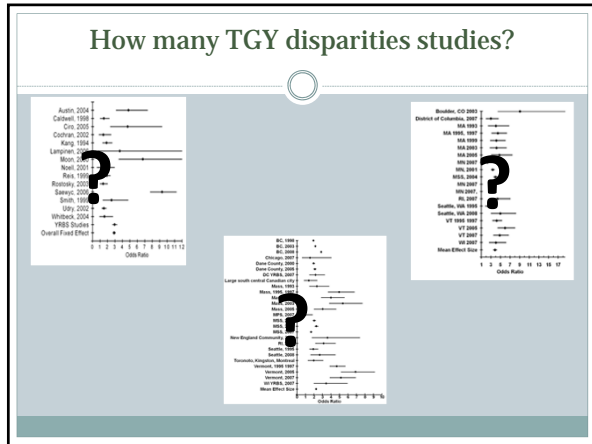
Overall Odds Ratio: 2.89

Girls: 5.02

Bisexual Youth: 4.42



Mirshahi, M. P., Friedman, M. S., Stall, R., King, K. M., Miles, J., Gold, M. A., Bukstein, O. G., & Morise, J. G. (2008). Sexual orientation and adolescent substance use: A meta-analysis and methodological review. *Addiction, 103*, 546-556.



TGY Disparities Studies

Original article
The Health and Well-Being of Transgender High School Students: Results From the New Zealand Adolescent Health Survey (Youth12)
 Terryann C. Clark, Ph.D., M.P.H., N.Z.R.N.^{1,2}, Mathijs F. G. Lucassen, Ph.D., N.Z.R.O.T.³, Pat Bullen, Ph.D.⁴, Simon J. Denny, Ph.D., F.R.A.C.P.⁵, Theresa M. Fleming, Ph.D.^{1,6}, Elizabeth M. Robinson, M.Sc.⁷, and Fiona V. Rossen, Ph.D.⁷

Original article
Mental Health of Transgender Youth in Care at an Adolescent Urban Community Health Center: A Matched Retrospective Cohort Study
 Sari L. Reisner, Sc.D., M.A.^{1,2,3,4}, Ralph Vetter, M.D., M.P.H.⁵, M. Leclerc, M.P.H.⁶, Shayne Zaslou, M.A., M.S.⁷, Sarah Wofford, M.P.H.⁷, Daniel Shumer, M.D.⁷, and Matthew J. Mimiaga, Sc.D., M.P.H.^{1,2,3,4}

Gender Minority Social Stress in Adolescence: Disparities in Adolescent Bullying and Substance Use by Gender Identity
 Sari L. Reisner
 Department of Epidemiology, Harvard School of Public Health and Center for Innovative Public Health Research

Summary of Results

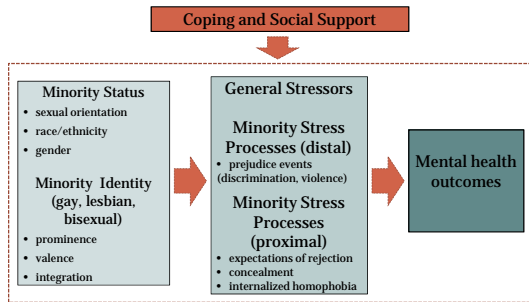
Compared with Cis-Gender Youth, TGY:

1. Reported 2-3 times higher rates of alcohol, marijuana, and other illicit drug use.
2. Depression and anxiety diagnoses, suicidal ideation and attempts, and non-suicidal self-harm.

Three Major Goals of Disparities Research among Adolescents

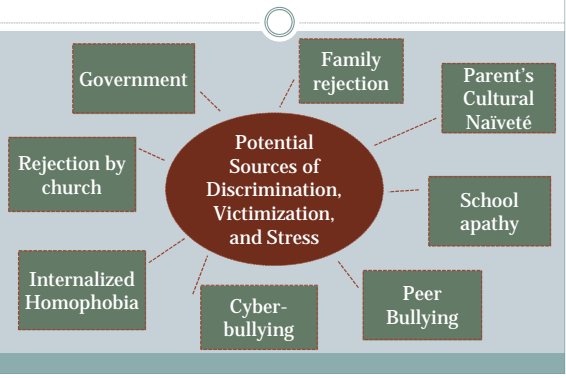
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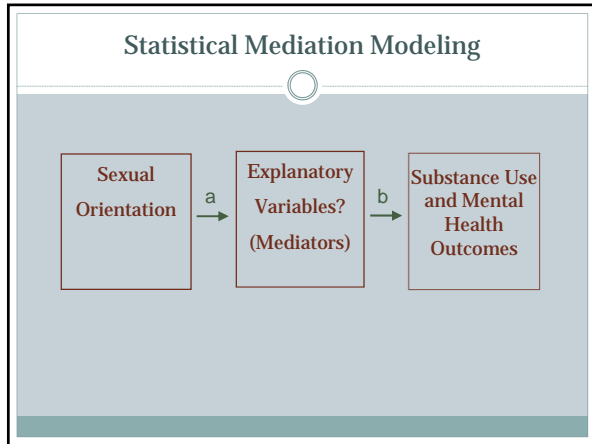
Minority Stress Hypothesis

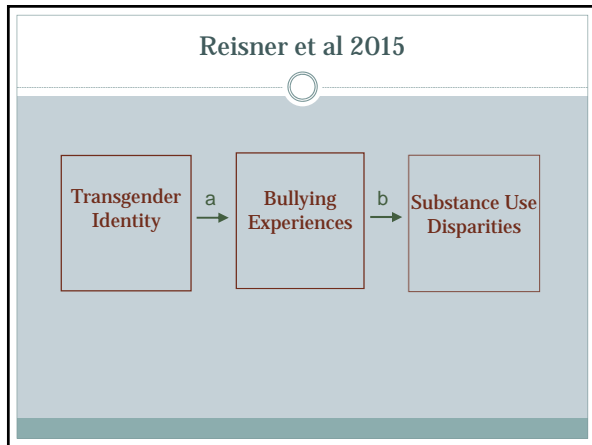


Meyer, I. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin*, 129(5), 674-697.

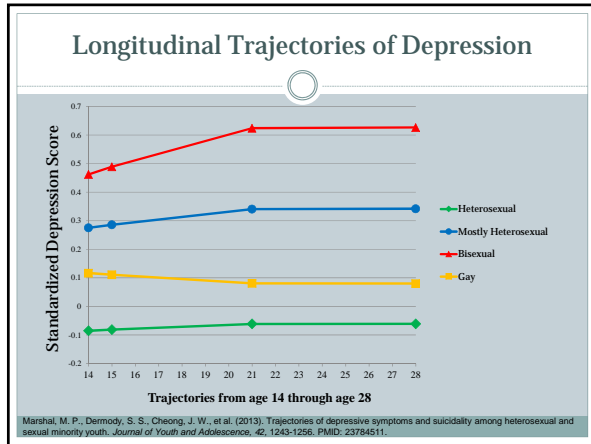
Sources of stress among SMY







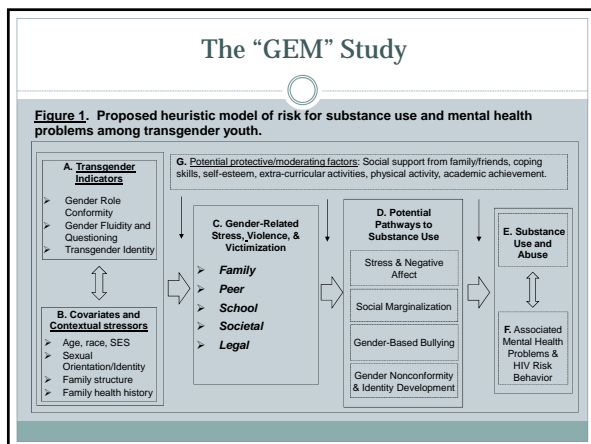
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Gender Expression and Mental Health Study

The “GEM” Study

- **Aim 1.** To identify and describe substance use disparities and associated mental and behavioral health problems (e.g., HIV risk behavior, depression, suicidality) over time among TGY.
- **Aim 2.** To identify and explore potential risk & protective factors (mediators and moderators) of substance use disparities among TGY (e.g., victimization, social isolation, depression, family and friend support).



The "GEM" Study

1. Two-Site Study: Pittsburgh and Columbus
2. Recruitment from adolescent medicine, endocrine, and LGBT venues (GLCC, Persad)
3. Ages 14-20 at baseline; Mean age = 17.0
4. 47 (68%) Assigned female at birth
5. Repeated measures of psychosocial health and wellness measures every 6 months
6. 56% have 2 Waves of data; 36% have 3 Waves

The "GEM" Study

1. Approximately 50% of youth identified "on the binary"
2. Most youth used several different labels to describe their gender identity
3. Some interesting labels/comments youth provided to the identity label question are:
 - "Gender is a social construct"
 - "Transmasculine"
 - "Demiboy"
 - "Androfemme"

Past Six Months Substance Use

| | Non-TGY (N=170) | TGY (N=69) | P-Value |
|----------------------------------|--------------------|---------------|---------|
| Any Cigarette Use | 14% | 20% | n/s |
| Any Alcohol Use | 38% | 39% | n/s |
| 5+ Drinks in One Sitting | 18% | 22% | n/s |
| Gotten "Drunk" on Alcohol | 25% | 28% | n/s |
| Any Marijuana Use | 31% | 28% | n/s |

Mental Health Disparities

| | Non-TGY (N=170) | TGY (N=69) | P-Value |
|--|--------------------|---------------|---------|
| CESD Depression Score 16+ | 20% | 64% | <0.0001 |
| SCARED Anxiety Score 25+ | 25% | 67% | <0.0001 |
| Lifetime Any Suicidality | 24% | 79% | <0.0001 |
| Lifetime Suicide Attempt | 3% | 26% | <0.0001 |
| Past Six Months Suicidal Ideation | 14% | 54% | <0.0001 |

Support and Victimization

| | Effect Size* | P-Value |
|-------------------------------------|--------------|---------|
| Self-Esteem | 1.10 | <0.0001 |
| Gay-Related Victimization | 0.80 | <0.0001 |
| Gender-Related Victimization | 1.06 | <0.0001 |
| Mom Support | 0.53 | <0.0001 |
| Dad Support | 0.60 | <0.0001 |
| "Family" Support | 0.71 | <0.0001 |
| "Friend" Support | 0.22 | n/s |
| "Family" Support | 0.8 | <0.0001 |

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

Validating practice with transgender clients

- 1. **Appropriate assessment of sexual orientation and gender identity**
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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

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

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

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

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

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 would prefer that you use
 - She/her/hers, he/him/his, they/them/their
- If you know your client identifies as transgender, tell them your preferred pronouns when introducing yourself

Take caution when interacting with parents

- If client prefers pronouns/name that do not match 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

What happens when assigned gender does not match gender identity?

Gender dysphoria is defined as distress caused by the incongruence between one's expressed or experienced (affirmed) gender and the gender assigned at birth based on external genital structures.

Vance SR Jr, Ehrensoff D, Rosenthal SM. Pediatrics. 2014;134:1164-92

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

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

Validating practice with transgender clients

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Ensure a welcoming environment

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

Thank you!

- Questions or comments?
- Contact information:

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