

DEFINITIONS

- **TRANSGENDER:** Umbrella term covering the variety of unconventional gender expressions – Some transgender people may call themselves transgenderists
- **TRANSSEXUAL:** Person who believes their anatomical sex is not their true sex and seeks to medically/surgically align the two
- **TRANSITION/ING:** The process of coming to recognize, accept, and express one's particular gender identity – most often referring to medical and legal changes that take place when altering the natal sex.
- **SEX REASSIGNMENT SURGERY/GENDER REASSIGNMENT SURGERY (SRS/GRS):** The surgical alteration of one's sex to that of the opposite natal sex – may or may not include genital reconstruction – this varies by group, country, and ability



FOR MORE INFORMATION ON TRANSGENDER ISSUES:

World Professional Association of Transgender Health (WPATH):
<http://www.wpath.org>

International Foundation for Gender Education (IFGE):
<http://ifge.org>

Vancouver Coastal Health:
<http://www.vch.ca/transhealth/resources/careguidelines.html>

LGBT Health Channel:
<http://lgbthealth.healthcommunities.com/transgender/index.shtml>

National Association of Social Workers (NASW):
<http://www.socialworkers.org/diversity/new/glb.asp>

American Psychological Association (APA):
<http://www.apa.org/pi/lgbctransgender/homepage.html>

Lev, A. I. (2000). *Transgender emergence: Understanding diverse gender identities and expressions*. New York: The Haworth Clinical Practice Press.

REFERENCES

¹ *An overview of the top trans health priorities. A Report by the Eliminating Disparities Working Group August 2004 Update. Contributors and Reviewers: Xavier, J, Hitchcock, D, et al.*



www.fenwayhealth.org



www.masstpc.org



www.mass.gov/dph



www.masspreventsuicide.org



www.samaritanshope.org

Adapted from the Samaritans brochure,
"Taking Care of You & Others in Your Life."

PREVENTING TRANSGENDER SUICIDE



AN INTRODUCTION FOR PROVIDERS

WARNING SIGNS OF ACUTE RISK

- Threatening to hurt or kill him or herself, or talking of wanting to hurt or kill him/herself; and/or,
- Looking for ways to kill him/herself by seeking access to firearms, available pills, or other means; and/or,
- Talking or writing about death, dying or suicide, when these actions are out of the ordinary.

ADDITIONAL WARNING SIGNS:

- Increased SUBSTANCE (alcohol or drug) use
- Expressing there is no reason for living; no sense of PURPOSE in life
- Increased ANXIETY, agitation, unable to sleep or sleeping all the time
- Feeling TRAPPED - like there's no way out
- Sense of HOPELESSNESS
- WITHDRAWING from friends, family and social activities
- Rage, uncontrolled ANGER, seeking revenge
- Acting RECKLESS or engaging in risky activities – if a change from regular behavior
- Dramatic MOOD changes – either mood increase or decrease
- PURGING of any items connected to being transgender (e.g. cross-sex clothing)

If observed, take appropriate action to protect the individual and/or refer for help as soon as possible by contacting a mental health professional with knowledge of transgender issues or calling **911**, the GLBT Helpline **1-888-240-GLBT (4528)**, the Samaritans **1-877-870-HOPE (4673)** or the Gay and Lesbian National Hotline **1-888-843-4564** for help.

FREQUENCY OF MENTAL HEALTH PROBLEMS IN TRANSGENDER PEOPLE

While research is scant, transgender people appear to be at similar risk for mental health problems as other people who experience major life changes, relationship difficulties, chronic medical conditions, or significant discrimination on the basis of minority status.

- **VICTIMIZATION AND POST TRAUMATIC STRESS SYNDROME (PTSD)**

Many transgender people experience some form of victimization as a direct result of their gender identity or variant gender presentation.

Victimization ranges from subtle forms of harassment and discrimination to blatant verbal, physical, and sexual assault, including beatings, rape and homicide. The majority of assaults against transgender people are never reported to the police. Mental (and physical) health can be directly impacted by experiencing violent victimization.

- **SYSTEMIC 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 the social disapproval and the higher the risk of violence. Day to day experiences of social disapproval combined with experiences of being incorrectly identified for who one is may lead to feelings of fear, anger, and invisibility. These oppressive experiences lead to a disintegration of self-image and self-worth often resulting in depression and social isolation.

- **SUICIDE AND SELF-HARM**

Studies report higher rates of suicide attempts in pre-transition transgender populations (16-38% of adults) than in the general population (1.3% of adults in Massachusetts), with transgender women being more likely to attempt



suicide than transgender men.¹ There is some evidence that transsexual people are less likely to attempt suicide once they have completed medical/surgical transition.

- **DEPRESSION**

There is some evidence that transgender 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 will be judged negatively.

FACTS & FIGURES

The incidence of suicide ideation and suicide attempts in the transgender adult population are significantly higher than the non-transgender population. Some studies of transgender population have shown rates of suicide ideation as high as 64% and suicide attempts as high as 38% as compared to non-transgender populations.¹

FACTORS THAT PROTECT AGAINST SUICIDE

The following protective factors have been identified by the U.S. Department of Health and Human Services:

- Effective clinical care for mental, physical and substance use disorders*
- Easy access to a variety of clinical interventions and support for seeking help
- Restricted access to highly lethal means of suicide
- Strong connections to family
- Community support
- Support through ongoing medical and mental health care relationships
- Skills in problem solving, conflict resolution and nonviolent handling of disputes
- Cultural and religious beliefs that discourage suicide and support self preservation

*Suicidality may be increased in transgender populations as a result of unnecessary delays in referrals to medical or surgical transition services and/or by experiencing transphobia in health care.