Suicidality among lesbian, gay, bisexual and transgender youth

Report by ILGA-Europe to the
Social, Health and Family Affairs Committee
of the
Parliamentary Assembly of the Council of Europe

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Summary

1. Nearly three decades of research have repeatedly demonstrated that lesbian, gay, bisexual and transgender (“LGBT”) youth are significantly more likely to attempt suicide than their heterosexual peers.

2. Many surveys have documented the marginalisation, stigmatisation and discrimination which numerous young LGBT people face -- whether in the family, at school, amongst their peer group, in religious institutions, or in society more widely.

3. Detailed research has shown that a social environment that excludes and stigmatises LGBT youth causes many of them to turn to suicide as an escape from depression, isolation and hopelessness.

4. Where governments and educational authorities take specific measures to combat exclusion and discrimination faced by LGBT youth and to address the roots of a hostile social environment, significant improvements can be achieved.

5. The necessary measures are well understood, relatively straightforward to implement, and not unduly resource intensive. The main barriers to their implementation are likely to be lack of information or misinformation about LGBT people, and in some instances, opposition from social forces and institutions who are hostile to LGBT people and contribute to an environment which stigmatizes and excludes LGBT youth in the first place.

6. The key to eliminating the tragedy of LGBT youth suicide is therefore one of political will – the will to address the marginalisation of, and hostility towards LGBT people which is widespread in many countries. A major programme of awareness raising and education is essential if the necessary transformation of social attitudes is to take place.

I. The incidence of suicide attempts among LGBT youth

7. Research conducted since the 1990s using large-scale representative samples of adolescents has confirmed findings in earlier research of the strong link between sexual minority status and suicidality. For example, a 1999 survey of 3365 high school students in the US found that gay, lesbian, and bisexual youth were 3.4 times more likely to report a suicide attempt, while a Norwegian review in 2001 of several studies judged to be well

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2 This earlier research was reflected in a report which included an estimate that lesbian and gay adolescents were two to three times more likely than other young people to attempt suicide. (US Department of Health and Human Services Report of the Secretary’s Task Force on Youth Suicide – chapter on “Gay Male and Lesbian Youth Suicide” (Gibson, 1989))

3 Sexual Minority Youth and Suicide Risk - Stephen T. Russell - University of California, Davis Published in American Behavioral Scientist, Vol. 46 No. 9, May 2003 1241-1257

documented found that these reported the risk of suicide attempts by young gay, lesbian and bisexual persons as between two to six times higher than for heterosexuals. Research on transgender youth has also shown a significantly above-average incidence of suicide attempts.

II Factors resulting in increased suicidality among LGBT youth

8. Empirical research clearly refutes a correlation between homosexuality and bisexuality per se and mental health problems, including suicidal thoughts and attempts. On the other hand, international research has highlighted the negative impact that marginalisation, stigmatisation and discrimination can have on the mental health and well-being of LGBT youth.

9. One recent study has concluded that:

“Identifying as an LGB person is not genetically or biologically perilous to an individual's physical or psychological health. However, much research indicates that homophobia increases a host of risk factors associated with psychological, psychosocial, psychiatric and social and health problems and that homophobia is a major health hazard to those who identify as an LGB person.”

10. A recent large-scale survey into suicidality among gay, lesbian and bisexual school students confirms the relevance of this finding concluding that "sexual orientation alone accounts for only a small portion of variability in suicidal ideation and attempts [by LGB school students]."

11. Like members of other minorities, young LGBT people are subject to chronic and acute stress caused by their stigmatised social position, which is often called “minority stress”. The link between minority stress and internalised homophobia on one hand, and mental health problems, including suicidal thoughts and attempts, on the other hand, has been demonstrated by numerous studies.

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6 See, for example: Clements-Nolle K, Marx R, Katz M: Attempted suicide among transgender persons: the influence of gender-based discrimination and victimisation – 2006 - Department of Health Ecology, University of Nevada, Reno, USA; or Fitzpatrick KK, Euton SJ, Jones JN, Schmidt NB: Gender role, sexual orientation and suicide risk - 2005 -- The Ohio State University, USA
7 Out on your own -- An examination of the mental health of young same-sex attracted men -- Helen McNamee - The Rainbow Project -- March 2006
8 Suicidality among gay, lesbian and bisexual youth: the role of protective factors – Eisenberg ME, Resnick MD - November 2006 -- Healthy Youth Development Prevention Research Centre, Division of General Paediatrics and Adolescent Health, Department of Paediatrics, University of Minnesota, Minneapolis USA. The survey was based on 21,927 school students, of whom 2255 reported same-gender sexual experience.
9 Internalised homophobia is when an LGB person has learned to accept heterosexuality as the only correct way to be, resulting in low self-esteem and even self-hatred. Hearing and seeing negative depictions of homosexuality may lead LGB people to internalise these negative notions.
12. One Flemish research project concluded, “the mental health problems that may appear among lesbian and gay young adults tend to be explained in social or socio-political rather than psychological terms, [and a] potential range of psychologically demanding situations arising largely from the social context, including negative social representations of lesbian and gay sexuality [which] translate into a heightened psychological vulnerability of young lesbians and gay males as a sexual minority”.

13. Factors that contribute to creating a social environment that stigmatises, marginalises and discriminates against LGBT people, include:
   - Homophobia, and the parallel conditions of bi-phobia and transphobia: an irrational fear of, or anger towards homosexuality and bisexuality, and towards lesbian, gay, bisexual and transgender people
   - Heterosexism: the belief, stated or implied, that heterosexuality is superior (theologically, morally, socially, emotionally) to homosexuality; it often finds expression in the presumption (conscious or unconscious) that all people are or should be heterosexual, or in ignoring (consciously or unconsciously) the existence and needs of people who are not heterosexual

III What constitutes a “hostile social environment” for LGBT youth

12 published the results of a survey into the way mechanisms of social exclusion affect young LGBT people in Europe. 754 LGBT people in 37 countries took part in the survey.

15. Respondents were asked to identify the most important causes of social exclusion of LGBT youth in their country. Some of the general themes identified were:
   - ignorance, misinformation, fear of the unknown
   - homophobia, bi-phobia and transphobia
   - lack of full community membership, equal rights, respect and recognition
   - distorted representation or invisibility in media and all spheres of life
   - lack of public awareness and debate
   - stigmatisation and marginalisation
   - patriarchy and heterosexism

16. In some countries concern was expressed about the policies and practices of governments, political parties and churches.

17. While these factors were seen to explain social exclusion of LGBT people in general, LGBT youth was shown to be especially vulnerable because of additional, age-specific reasons including:
   - economic as well as emotional dependence on parents and other adults
   - lack of positive role models
   - lack of support in “coming out” and lack of groups to belong to

12 Social exclusion of young lesbian, gay, bisexual and transgender (LGBT) people in Europe – Judit Takács for ILGA-Europe and IGLYO (The International Gay, Bisexual, Transgender, Queer Youth and Student Organisation) – April 2006. Available at http://www.ilga-europe.org/europe/publications/non_periodical/social_exclusion_of_young_lesbian_gay_bisexual_and_transgender_people_lgbt_in_europe_april_2006
• "heterosexist socialisation" - the experience that heterosexuality guarantees social inclusion, whereas non-heterosexuality leads to marginalisation
• being silenced and isolated
• rejection by family and friends
• parents' disappointment and feelings of failure
• schools: invisibility of LGBT issues both in the curriculum and more generally; lack of training for teachers and parents; and failure to acknowledge bullying of LGBT people as a problem

18. The survey demonstrated that young LGBT people experience many problems with key agents of socialisation: family, school, peer group, the media, and religious institutions.

III (i) Family

19. More than half of respondents reported experiences of prejudice and/or discrimination in their family. Specific findings were:

• Typical reactions to revealing one’s LGBT identity to close family were disbelief, denial and demands for "changing back to normal"
• Stereotyped misconceptions of what it means to be gay, lesbian, bisexual or transsexual greatly contributed to non-acceptance
• Rejection as an LGBT person by close family members was shown to force young persons into self-denial and/or constructing a double life strategy
• In some cases, coming out to parents could pose the threat of or actually lead to being forced to leave the family home
• Rejection by family members often reflected fear of social stigmatisation affecting the parents and the family as a whole.
• Transgender respondents mentioned that they had to go through a double coming out with a double burden: since before identifying as a trans-person, most of them believed themselves to be gay or lesbian.
• Many respondents were unable or unwilling to reveal their LGBT identity within the family because of the discouraging homophobic environment of the family itself

20. The report notes that, in contrast with other vulnerable youth groups such as minority ethnic youth who generally do not face problems of racism and religious intolerance within their own families, "for gays and lesbians abuse often begins at home".  

21. Research from other sources emphasise the problems parents face when their children come out to them.

"They do not know how to cope with the news. Parental reactions tend to be similar to those of the grieving process, as the parents tend to react as if they have suffered a loss -- the loss of a child they thought they knew and the loss of the future they expected for a child".  

22. Indeed, those parents who reject their LGBT children are both agents of the hostile social environment faced by their children, and themselves victims of that environment.  

14 Out on your own -- An examination of the mental health of young same-sex attracted men -- Helen McNamee - The Rainbow Project -- March 2006  
15 Support for parents has an important role to play. Parents' groups exist in a number of countries. See, for example, http://www.fflag.org.uk/, where more information on the experience of the parents of LGBT people can also be found.
III (ii) Schools

23. Over 60% of respondents to the Social Exclusion Report survey referred to negative personal experiences at school related to their LGBT status. More than half reported bullying, including a wide spectrum of negative experiences, from name calling and ostracism to physical attacks. Longer term or repeated bullying was shown to have serious consequences for the victims. Some became withdrawn and socially isolated, or dropped out of school.

24. Many feared becoming the victims of discrimination or bullying, leading them to conceal their LGBT identity.

25. Some respondents mentioned teachers as being the source, or a part of their problems. Some used offensive and/or threatening language, or were unreasonably intrusive into the personal lives of students. Others were often described as passive outsiders failing to provide help for the isolated, hurt and/or bullied students.

26. A lack of openly LGBT teachers, acting as potential positive role models for LGBT students, was indicative of a generally homophobic climate in schools.

27. The fact that LGBT issues were not mentioned in the school curriculum was interpreted by many respondents as an institutional tool for maintaining LGBT invisibility in school, and as such, discriminatory in itself.

III (iii) Friends

28. 30% of respondents reported experiences of prejudice and/or discrimination in their close circle of friends. After revealing their LGBT identity, some friends were lost, but some new ones were found, especially within the LGBT community.

III (iv) Religious community

29. More than a quarter of respondents identified themselves as being religious, and one third of them reported encountering prejudice or discrimination in their religious community. Church institutions were often described as inherently homophobic, and consequently contributing to the development of internalised homophobia. Many respondents reported leaving their church because they found the religious teachings to be incompatible with their own life experience.

III (v) Media

30. Three quarters of respondents found that the media expressed prejudice or included discriminatory elements. LGBT people and issues were seen to be excluded from the media in the sense that if they were shown at all, it was generally in a negative or stereotypical setting.
III (vi) Recent research on the situation in schools in the UK

31. A recent study in the UK, *The School Report -- The experiences of young gay people in Britain's schools* ("The UK Schools Report")\(^{16}\), supports the findings of the *Social Exclusion Report*. The *UK Schools Report* surveyed 1145 young lesbian, gay and bisexual people at secondary school in 2006. Relevant findings of this report are:

- 65% of respondents experienced homophobic bullying. For pupils in faith schools, this figure rose to 75%. Of those who had been bullied, 92% experienced verbal bullying, 41% physical bullying, and 17% death threats
- Nearly 100% had heard the use of derogatory phrases such as "dyke" or "poof" in school, or had heard the term "gay" used as a term of abuse
- 30% of lesbian and gay pupils reported that adults were responsible for homophobic incidents in their schools
- Only a quarter of schools opposed homophobic bullying
- Almost three in five (58%) lesbian and gay pupils who experienced bullying never reported it. If they told a teacher, 62% of the time nothing was done
- Half of teachers failed to respond to homophobic language when they heard it
- Half of those who had experienced homophobic bullying skipped school at some point because of it and one in five had skipped school more than six times
- Seven in ten gay pupils had never been taught about lesbian and gay people or issues in class
- Over 60% of young lesbian and gay people felt that there was neither an adult at home nor at school who they could talk to about being gay

32. Other research findings suggest that gender non-conforming youth, both LGBT and heterosexual, are at risk in the school environment. Pupils who do not fit gender stereotypes are typical victims of bullying.\(^{17}\)

IV A hostile social environment and heightened risk of suicidality among LGBT youth

33. The impact of a social environment that marginalises, stigmatises and discriminates LGBT youth can usefully be examined in relation to two key stages in the development of LGBT identity:

- between becoming aware of one’s identity as an LGBT person and before disclosure of this identity to others
- after disclosure of one’s LGBT identity to others

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\(^{17}\) *Psychology's Contribution to Understanding and Managing Bullying within Schools* - Reid P, Monsen J, Rivers I – 2004 - IN: *Educational Psychology in Practice* 20(3): 241 -- 258
IV (i) Between becoming aware of one’s identity as an LGBT person and before disclosure of this identity to others

34. The age at which an individual becomes aware of her/his identity as a lesbian, gay, bisexual or transgender person is usually during early adolescence.\(^*\)

35. The general level of homophobic and transphobic attitudes in many European countries, and the absence of positive role models, as documented above, is such that young LGBT persons are likely to have learned profoundly negative attitudes about “gays” before they really understand what “gays” are, and certainly before they understand that they are lesbian, gay, bisexual or transgender themselves.\(^{19}\) The resulting profound internalisation of society’s negative attitudes leads to low self-esteem and often makes the process of self-recognition and self-acceptance very difficult.\(^{20}\)

36. Thus, many young LGBT people face the double challenge of overcoming their own self-hatred, and dealing with the potential hostility of family, friends and wider society. Too often, they face this challenge alone, without the support of family, friends or the caring professions.

37. As a result, they tend to withdraw into a period of extreme isolation rather than confront the challenge. At a time when their heterosexual peers are developing their identity and learning to express themselves socially, they are putting all their energy into hiding their own, thus inhibiting their own development:

"Researchers have emphasised that if the social environment is disapproving of their emerging sexual orientation, LGBT adolescents experience profound isolation and fear of discovery, which then interferes with achieving the main development tasks of adolescence related to self-esteem, identity and intimacy ….. The majority of young LGBT people think that coming out would endanger their physical and emotional well-being and therefore they choose to manage their identities by hiding, a practice which can result in suicidal ideation, depression, dysfunctional peer group and family relationships, alcohol and drug use".\(^{21}\)

38. Research has shown this period of extreme vulnerability -- between becoming aware of their LGBT identity and before disclosure of their LGBT identity to others – to be that when suicide attempts are most common.\(^{22}\)

\(^{18}\) Out on your own -- An examination of the mental health of young same-sex attracted men -- Helen McNamee - The Rainbow Project -- March 2006

\(^{19}\) The use of homophobic insults start young -- in the UK, for example, “any person who spends time with young people today will realise that the in-vogue playground insult is to call someone ‘gay’. Out on your own -- An examination of the mental health of young same-sex attracted men -- Helen McNamee - The Rainbow Project -- March 2006; McNamee also quotes a finding by Thurlow (2001) that homophobic pejoratives are the most predominant categories of abusive language among adolescents.

\(^{20}\) Helen McNamee reports in Out on your own -- An examination of the mental health of young same-sex attracted men that “unconscious anti-homosexual attitudes are so common among gay and lesbian patients that some therapists believe they are universal”, citing the Group for the Advancement of Psychiatry.

\(^{21}\) Social exclusion of young lesbian, gay, bisexual and transgender (LGBT) people in Europe -- Judit Takács for ILGA-Europe and IGLYO (The International Gay, Bisexual, Transgender, Queer Youth and Student Organisation) -- April 2006

\(^{22}\) Suicidality patterns and sexual orientation-related factors among lesbian, gay and bisexual youths - D’Augelli AR, Herschberger SL, Pilkington NW - Department of Human Development and Family Studies, Pennsylvania State University, USA - 2001
39. Moreover, this period of vulnerability typically extends over a number of years: A recent study of 190 young same-sex attracted men in Northern Ireland, *Out on your own -- An examination of the mental health of young same-sex attracted men* ("Out on your own") found that the average age when they first became aware of their same-sex attraction was 12, the average age when they understood that this meant they were gay or bisexual was 14, and the average age when they first "came out" was 17.23

40. The fact that the young person is desperate to conceal their LGBT identity makes it more or less impossible for others to gain awareness of their critical situation, let alone provide suitable help. At this moment of great vulnerability, the possibility for supportive intervention by others is therefore very limited.

41. This makes it essential that measures to reduce suicidality amongst LGBT youth go beyond those targeted at individuals, such as counselling, and extend to wider measures designed to address the hostile social environment faced by these young people.

**IV (ii) After disclosure of one’s LGBT identity to others**

42. Disclosure of LGBT identity to others does not by any means bring to an end the risk of suicide for many young LGBT persons. The *Out on Your Own* study found that the loneliness and isolation experienced by the young men before coming out often continued after the revelation of their sexual orientation. One in five of those surveyed rarely or never had someone to talk to, while a further quarter only sometimes had someone to talk to.

43. The study also found that **homophobic responses by family members** impacted significantly upon whether a respondent had considered suicide. Leaving home because of negative attitudes to their sexual orientation was a key predictor for suicidal thoughts. No fewer than two-fifths of respondents had moved out for this reason. One in 10 of respondents had been homeless because of their sexual orientation. The study quotes other research findings that "stress over coming out to families was significantly associated with suicide attempts." 24

44. **Negative experiences in school following disclosure of LGBT identity** also had a crucial impact on suicide and self harm. Experience of bullying was a key factor in predicting whether the respondents had attempted suicide25, and homophobia from other pupils was a key factor in whether the respondent had considered suicide.26 Homophobia from teaching staff was an important indicator of a higher risk of mental health problems.

45. Respondents who suffered from **internalised homophobia** to a significant degree were found to be more likely to have lower self-esteem, show signs of mental health difficulty and consider suicide.

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25 Research in the general population has also shown that bullying gives rise to an increased risk of depression and suicide -- see for example *Bullying, depression and suicidal ideation in Finnish adolescents: School survey* – Kaltiala-Heino R, Rimpela M., Marttunen M., Rimpela A, Rantanen P, School of Public Health, Tampere, Finland

26 The *Out on Your Own* study also quotes a report by Rivers, I. (1996) - *Young, Gay and Bullied* - in *Young People Now* Vol.81 pp18-19 that 40% of those who experienced homophobic bullying reported attempting suicide on more than one occasion.
Reducing the incidence of suicidality among young LGBT people

46. There is strong evidence that the incidence of suicidality among young LGBT people can be reduced if measures are taken to counter the homophobia, bi-phobia, transphobia and heterosexism which they face in society, and if specific measures are taken to support them.

47. The Netherlands is a country which, for at least three decades, has put in place policies and educational programmes to support LGBT people. While the situation there is still far from perfect, comparison of The Social Exclusion Report survey results for the Netherlands with the results for all 37 countries yields some instructive findings:

- In the case of schools, only 8.7% of Dutch respondents found discriminatory elements in the curriculum, compared to 42.9% for the whole survey; while 39.4% had experienced bullying, compared to 53% for the whole survey.
- In the case of family relationships, 31.2% of Dutch respondents reported experiences of prejudice and/or discrimination, compared to 51.2% for the whole survey.
- Experience of discrimination in the general community was also lower, at 24.6% for Dutch respondents, compared to 37.7% for the whole survey.

48. The UK schools report found significant benefits in schools where positive actions were taken:

- In those which had a specific policy against homophobic bullying, young LGB people were 60% more likely not to have been bullied, and 70% more likely to feel safe at school
- Pupils who went to schools where teachers responded to homophobic incidents were more than three times as likely to feel that their school was an accepting, tolerant place where they felt welcome
- Pupils who were taught positively about lesbian and gay issues were 60% more likely to be happy at school and 40% more likely to feel respected

49. These findings are supported by a US study, which found that young LGB people who had positive feelings about their teachers were significantly less likely than their peers to experience a wide range of difficulties within school. It showed that supportive teachers could help prevent the dilemmas that LGB youth face.27

50. There is also evidence that supportive family relationships can do much to alleviate the difficulties faced by LGBT youth. The Out on Your Own study reported:

“One of the interviewees spoke of his liberal upbringing and how he did not experience negativity surrounding his homosexuality. Mark described how his mother taught him about different sexual orientations and was very accepting of his sexuality. He also was educated at school about sexual orientation and when he came out in school he did not experience homophobia. Mark did not have any difficulty accepting his sexuality and it never caused any emotional turmoil. Mark attributed never having experienced mental health difficulties to his positive outlook and upbringing.”28

51. These conclusions are supported by research studies specifically linked to suicidality.

28 Out on Your Own - Page 38.
52. One examined factors related to depression, hopelessness and suicidality in gay, lesbian and bisexual adolescents, compared with heterosexual adolescents. The results suggested that environmental factors associated with sexual orientation, which could be targeted and changed through prevention and intervention efforts, played a major role in predicting distress in this population.  

53. Another study examined four protective factors (family connectedness, teacher caring, other adult caring, and school safety) and their association with suicidal ideation and suicide attempts among adolescents with same-gender experience.  

54. The survey was based on a sample of 21,927 school students, of whom 2,255 reported same-gender experience. Over half of the LGB students had thought about suicide and 37.4% reported a suicide attempt.  

55. LGB youth reported significantly lower levels of each protective factor than their non-LGB peers. Family connectedness, adult caring, and school safety were found to be significantly protective against suicidal ideation and attempts. The study concluded that if protective factors were enhanced among LGB youth, suicide in this population could be expected to be considerably lower.  

56. There is now a growing body of experience and best practice in implementing projects and policies in European countries aimed at promoting the social inclusion of LGBT youth, and therefore leading to enhanced “protective factors”. The Social Exclusion Report lists a number of such projects and policies, particularly in the area of education.  

VI Conclusions  

57. Neither the gravity of the mental health problems faced by LGBT youth nor the causes can seriously be disputed:  
  
- Nearly three decades of research have repeatedly demonstrated that LGBT youth are significantly more likely to attempt suicide than their heterosexual peers  
- Many surveys have documented the hostile social environment which they face -- whether in the family, at school, amongst their peer group, in religious institutions, or in society more widely  
- Detailed research has shown that a social environment that excludes and stigmatises LGBT youth causes many of them to turn to suicide as an escape from depression, isolation and hopelessness  

58. Where governments and educational authorities take specific steps to address the exclusion and discrimination faced by LGBT youth, significant improvements in their social environment can be achieved.

29 Depression, hopelessness, suicidality and related factors in sexual minority and heterosexual adolescents – Safren SA and Heimberg RG - 1999 -- Department of Psychiatry, Massachusetts General Hospital/Harvard Medical School, USA  
30 Suicidality among gay, lesbian and bisexual youth: the role of protective factors – Eisenberg ME, Resnick MD - November 2006 -- Healthy Youth Development Prevention Research Center, Division of General Paediatrics and Adolescent Health, Department of Paediatrics, University of Minnesota, Minneapolis, USA  
31 See chapter 6. For recent examples, see the Irish Equality Authority backed anti-bullying campaign Stop Homophobic Bullying in Schools at http://www.belongto.org/; or Spell It Out, a DVD resource for teachers prepared by Stonewall UK and the Greater London Authority - http://www.stonewall.org.uk/education_for_all/default.asp
59. The recommendations which follow identify a range of actions which, if implemented effectively, would, over time, do much to improve the grave situation of so many young LGBT people across Europe. They are practical, common sense, and eminently "do-able". They do not involve unreasonable financial resources, and indeed would be likely to lead to economic benefits through reduced demands on mental health services.

60. The key to eliminating the tragedy of LGBT youth suicide is therefore neither how to do it, nor finding the resources, but one of political will: implementation of the proposed measures is likely to be opposed by exactly those social forces, institutions and individuals whose hostility to LGBT people contributes to an environment which stigmatizes and excludes LGBT youth in the first place.

61. Awareness raising and education to tackle homophobia, bi-phobia and transphobia, including awareness-raising about the potential cost of marginalisation, stigmatisation and discrimination against LGBT youth, will therefore be essential to success.

VII Recommendations for actions by member state governments

Public education campaigns

Undertake awareness-raising and education campaigns aimed at reducing levels of homophobia, bi-phobia and transphobia in society.

Families

Provide support to the parents of young LGBT people, including information, counselling and the establishment of support groups organised by and for the parents of LGBT people.

Schools

Review and revise school curricula, with a view to limiting stereotyping, reflecting diversity of lifestyles and identities, and providing a fair representation of sexual minorities.

Provide training and awareness-raising on sexual diversity to teachers to enable them to talk about homosexuality, bisexuality and gender identity in an inclusive and positive manner, and to prepare them to be understanding and supportive of LGBT students.

Promote the development of diversity policies in schools, including clear anti-bullying rules and practices that specifically address bullying of sexual minorities and of young people who do not conform to ways of behaving that are traditionally associated with being ‘masculine’ or ‘feminine’. Ensure that bullying is dealt with fully in teacher-training programmes.

Put in place general employment protection legislation which covers LGBT teachers; provide specific support for LGBT teachers in dealing with homophobic attitudes of pupils and other staff.

Actively support and protect individuals (students and teachers) that want to promote or address above-mentioned actions within their schools.

Community

Encourage the formation of LGBT youth and student groups, and provide support for them.
Promote the development of a positive approach to diversity, including sexual minorities, in youth groups and sports clubs.

**Health and social services**

Promote the development of diversity policies in health and social services.

Provide training for health and social services staff to raise awareness about the needs of lesbian, gay, bisexual and transgender people, and to challenge existing prejudices and stereotypes about LGBT people.

Encourage health professionals and social providers to create a safe and open environment for LGBT youth, e.g. by making information accessible and demonstrating respect and acceptance.

**Research**

Research into effective suicide risk prevention for sexual minority youth, and into the factors that promote their positive development.

Research into the health and well-being of young transgender people.