Implications of COVID-19 for LGBTQ Youth Mental Health and Suicide Prevention

INTRODUCTION

About The Trevor Project

The Trevor Project is the world's largest suicide prevention and crisis intervention organization for lesbian, gay, bisexual, transgender, queer, & questioning (LGBTQ) young people. The Trevor Project offers a suite of 24/7 crisis intervention and suicide prevention programs, including TrevorLifeline, TrevorText, and TrevorChat as well as the world's largest safe space social networking site for LGBTQ youth, TrevorSpace. Trevor also operates an education program with resources for youth-serving adults and organizations, an advocacy department fighting for pro-LGBTQ legislation and against anti-LGBTQ policies, and a research team to examine the most effective means to help young LGBTQ people in crisis and end suicide. If you or someone you know is feeling hopeless or suicidal, our trained crisis counselors are available 24/7 at 1-866-488-7386, via chat www.TheTrevorProject.org/Help, or by texting START to 678-678.

COVID-19 and LGBTQ Youth

COVID-19 has serious implications for the mental health of LGBTQ youth. Although youth and young adults are estimated to have the lowest mortality rates from COVID-19 (Centers for Disease Control and Prevention, 2020), they are not immune to its consequences, including as it relates to mental health and well-being. Even prior to the pandemic, LGBTQ youth have been found to be at significant increased risk for depression, anxiety, substance use, and suicidality (Russell & Fish, 2016). These risks are even more pronounced among youth who are transgender and/or nonbinary (Price-Feeney, Green, Dorison, 2020). Thus, LGBTQ youth may be particularly vulnerable to negative mental health impacts associated with the COVID-19 pandemic.

This research report: (1) outlines ways that physical distancing, economic strain, and increased anxiety related to COVID-19 may impact LGBTQ youth; and (2) explains how The Trevor Project and others can work to support LGBTQ youth during this time. Although existing research points to concerns about the impact of the COVID-19 pandemic on LGBTQ youth mental health and well-being, it also suggests ways these impacts can be minimized. Now more than ever, it is imperative that we increase LGBTQ youth access to a wide range of support and life-saving resources. The Trevor Project is committed to ensuring that LGBTQ youth are supported throughout this pandemic, and we hope others will join us working to protect the lives of LGBTQ youth.

CONSEQUENCES OF PHYSICAL DISTANCING

Physical distancing (commonly referred to as "social distancing"), the practice of avoiding close physical contact with others, is a crucial part of the public health approach to minimizing the impact of COVID-19 on the health of the U.S. population. However, physical distancing can impact LGBTQ youth by decreasing their access to positive social interactions and increasing negative social interactions.

Decrease in Positive Social Interactions

An unintended consequence of physical distancing is potential loss of the social connections that protect LGBTQ youth from suicidality. Social connections have been found to buffer stress, reduce depression, and improve well-being (Cohen, 2004). Durkheim's seminal research on suicide highlighted the importance of social connections in promoting individual well-being as well as how disruptions in social connections can increase overall risk for suicide at a societal level (Durkheim, 1951). The public health impact of loneliness should not be underestimated, particularly among youth (Goosby, Bellatorre, Walsemann, & Cheadle, 2013). From a developmental perspective, loneliness is especially relevant to youth populations, as the need for social acceptance and belongingness is prominent during adolescence and young adulthood. Although it is too early to fully understand the impact of physical distancing due to COVID-19 on health and mental health, existing research has found that people who do not feel connected to others are more likely to suffer from respiratory illness (Cohen et al., 1997), report depression and anxiety (Kawachi & Berkman, 2001), and experience suicidality (Stravynski & Boyer, 2001). In line with the Interpersonal Theory of Suicide, connection to others can fulfill youths' need to belong, thereby reducing risk for suicidality (Joiner et al., 2009). Thus, social connection has become a crucial component of suicide prevention. Among LGBTQ individuals in particular, connection to the LGBTQ community has been found to buffer the impact of stigma on depression and suicidality (Kaniuka et al., 2019).

To address the potential negative social impacts of physical distancing, efforts must be made to ensure that LGBTQ youth know that they are not alone and feel encouraged to seek support and social connections through means that do not rely on physical proximity. First, it is important for LGBTQ youth and those who support them to remember that physical distancing does not equate with social isolation. There is already a thriving online LGBTQ community that allows LGBTQ youth to experience connections with others like them. Further, LGBTQ youth should be encouraged to maintain existing connections through virtual means such as video calls and video conferencing. Youth should also be encouraged to participate in shared activities such as online gaming, watch parties, or physical activity classes. Those in positions to support or serve as role models to LGBTQ youth, including the media and LGBTQ organizations, should encourage them to maintain social connections virtually and practice self-care during COVID-19. Doing so may result in LGBTQ youth actively

seeking and maintaining connections and engaging in wellness activities that will positively impact their mental and physical health.

A Special Note on School Interactions

LGBTQ youth may lose access to positive connections, including extracurricular activities, as a result of school closings. Across the nation, secondary and higher education institutions are closing their physical locations to prevent the spread of COVID-19. In addition to the educational opportunities provided by our nation's schools, these institutions also provide social opportunities, activity involvement such as sports and clubs, and access to supportive adults such as teachers, coaches, and school counselors. For LGBTQ youth, school can also offer access to an LGBTQ community, such as through Gender and Sexualities Alliances (GSAs), as well as connection to counseling and mental health resources. GSAs provide LGBTQ youth and allies with safe environments where they can feel empowered, socialize, and receive support, and the presence of GSAs has been found to significantly reduce the risk for depression and increase well-being among LGBTQ youth and young adults (Toomey et al., 2011). LGBTQ youth who report the presence of trusted adults in their school also have higher levels of self-esteem (Dessel et al., 2017). Further, access to supportive peers is protective against anxiety and depression, including among those who lack support from their family (Parra et al., 2018). Schools also offer youth the ability to participate in extracurricular activities and clubs, which have been found to promote positive youth development (Eccles et al., 2003). LGBTQ youth participate in club and arts-focused activities at comparable levels to their straight/cisgender peers and receive similar positive benefits from extracurricular activity involvement (Toomey & Russell, 2013).

As schools move their academic curriculum to online delivery, there is a need to ensure that protective factors provided by schools such as supportive individuals and extracurricular activities can also be accessed virtually. Given the known benefits of activity involvement, schools should identify and promote activities that may provide similar benefits without jeopardizing physical distancing. LGBTQ youth should be encouraged to seek and take advantage of opportunities that allow them to connect with others in shared activities outside of the walls of their schools. Teachers and health professionals in schools should also make office hours available to provide support to students. Additionally, schools should work to ensure that opportunities, such as GSA involvement, are available to students virtually when schools are in session. School professionals should also attend to ways that school bullying and cyberbullying might be experienced differently in new online school communities and work to monitor and minimize instances of cyberbullying.

Increase in Negative Social Interactions

For LGBTQ youth, physical distancing may have additional unintended negative consequences related to being confined to an environment that may be unsupportive or abusive. Based on existing research on rates of family rejection, many youth will spend their days confined to places that are unsupportive of their sexual orientation and/or gender identity

for an indefinite amount of time. Research suggests that among LGBTQ youth, only one-third experience parental acceptance, with an additional one-third experiencing parental rejection, and the final one-third not disclosing their LGBTQ identity until they are adults (Katz-Wise et al., 2015). Another study found that LGB young adults who report high levels of parental rejection are eight times more likely to report attempting suicide and six times more likely to report high levels of depression (Ryan et al., 2009). Unsupportive environments may result in increased dysphoria, particularly among transgender and/or nonbinary youth, as some may need to hide their authentic selves to maintain safety. Furthermore, LGBTQ youth report greater rates sexual, psychological, and physical abuse than their straight/cisgender peers (Baams, et al., 2018; Friedman et al., 2011). Intimate partner violence is also more prevalent in the LGBTQ community, including among youth and young adults (Calton et al., 2016). As such, some home environments may pose serious risks to LGBTQ youth mental and physical health.

Youth who find themselves in an environment that does not affirm their identity, or places them at risk for abuse and victimization, can benefit from access to supportive individuals to help them maintain their own safety while also providing an outlet for them to be their authentic selves. LGBTQ youth should seek affirming connections either through existing support networks or by joining safe online spaces for LGBTQ youth. These connections can allow them space to talk about their experiences at home as well as affirmations that they are valued and loved as their authentic self. An unintended consequence of physical distancing is that it may provide less opportunities for mandated reporters and other concerned individuals to observe signs of potential abuse and domestic violence. Those in direct contact with LGBTQ youth can ask them directly about whether or not they feel safe and supported in their current living situation. Further, public communications about COVID-19 should include contact information for the National Domestic Violence Hotline (1-800-799-7233) as well information on how to access to [state child abuse and neglect hotlines](). Efforts to proactively support youth in non-supportive environments can help youth problem-solve to promote physical and emotional safety and allow them to see that they are not alone.

ECONOMIC STRAIN

Economic strain is characterized by how difficult individuals find it to live on their current income. LGBTQ individuals have significantly worse economic strain compared to the broader U.S. population, marked by increased rates of underemployment or unemployment as well as increased rates of housing instability (Hunter et al., 2018). Experts predict that COVID-19 will result in substantial negative economic impacts around the world (Anderson et al., 2020). For LGBTQ populations, these impacts may be felt more intensely as they are already more likely to lack economic resources.

Unemployment Concerns

Increased unemployment rates are occurring across the country as a result of COVID-19, with concerns about the impacts this will have on mental health and suicidality,

particularly among vulnerable populations such as LGBTQ youth. Experts from the United Nations' International Labour Organization are predicting a rise in global unemployment due to COVID-19, which may compare or exceed that experienced during the global financial crisis of 2008 (International Labour Organization, 2020; Martin, 2020). Studies on the impact of the 2008 "Great Recession" revealed accelerated increases in rates of suicide mortality across Europe and the U.S., with rates rising by 60% in Greece which was most heavily impacted by the 2008 financial crisis (Chang et al., 2013; Reeves et al., 2012). Between 2007 and 2010, the rates of unemployment in the U.S. increased from 5.8% to 9.6%, with these rising unemployment rates accounting for a significant increase in nation's suicide deaths during this time (Reeves et al., 2012). Youth are included among the populations who have experienced negative mental health and suicidality outcomes related to economic downturns and recessions (Frasquiho et al, 2015). These impacts may be especially pronounced among LGBTQ populations who experience both higher rates of unemployment (Hunter, McGovern, & Sutherland, 2018) and higher rates of suicidality (Green, Price-Feeney, Dorison, 2020; Johns et al., 2019), particularly among those who identify as transgender and/or nonbinary (Leppel, 2019; Price-Feeney, Green, & Dorison, 2020) and/or LGBTQ people of color (Movement Advancement Project et al., 2013; The Trevor Project, 2019a).

Unemployment resources and mental health services can help reduce risk for suicidality, even during times of global economic strain. During the "Great Recession," not all countries experienced significant increases in suicide deaths, despite experiencing negative economic impacts of a recession. Countries who did not experience significant increased in suicide deaths had implemented programs that helped those who were unemployed find resources and social support and had strong mental health prevention programs (Reeves et al., 2012). There is a need to ensure that LGBTQ individuals have support in applying for and accessing unemployment funds. Further, non-discrimination policies related to sexual orientation and gender identity can also facilitate employment opportunities for LGBTQ youth. LGBTQ organizations can also work to create and identify professional development opportunities to assist LGBTQ youth seeking employment.

Housing Instability

Economic strains can lead to substantial increases in housing instability, with LGBTQ youth disproportionally impacted by housing instability. Even before the spread of coronavirus, LGBTQ youth are represented at over twice the overall youth rate in reports of unstable housing (Baams, Wilson, & Russell, 2019). And LGBTQ youth who experienced housing instability were twice as likely to report seriously considering suicide and three times as likely to report attempting suicide compared to LGBTQ youth who had not (The Trevor Project, 2019b). Individuals who experience unemployment due to COVID-19, may subsequently be at increased risk for housing instability and homelessness. During the "Great Recession," housing instability was found to account for a significant amount of the accelerated increases in suicide deaths in the U.S. (Fowler et al., 2015). This connection is especially concerning for LGBTQ youth, who may be less able to rely on family support (Rhoades et al.,

2018), as a previous study found that perceived family support buffered the impact between housing instability and negative outcomes during the "Great Recession" (Murphy, 2014).

Policy changes, social support, and attention to mental health may mitigate the impacts of housing instability related to COVID-19 on LGBTQ youth. From a policy perspective, moratoriums on evictions and rent freezes during this pandemic can help those experiencing economic strain to maintain safe shelter and, in turn, reduce risk for suicidality. Organizations serving LGBTQ youth should be cognizant of the impact housing instability can have on youth well-being and ensure that LGBTQ youth are supported now more than ever. There is also a need for organizations providing services to individuals who may be experiencing housing instability to ensure that their staff and services are LGBTQ-affirming to reduce barriers for LGBTQ youth in accessing needed services and resources.

WORRIES ABOUT PRESENT AND FUTURE

Uncertainties surrounding the impact COVID-19 may have at an individual and societal level can lead to anxiety about an individual's day-to-day life as well as anxiety related to what the future may hold for them. This increased anxiety can negatively impact LGBTQ youth's mental and physical health.

Struggles in the Present

COVID-19 may cause increases in youth anxiety related to the health of themselves and their loved ones, potential interactions with the U.S. healthcare system, and continued ability to meet basic needs. Youth may experience increased anxiety related to oneself or a loved one contracting the virus, particularly among those with pre-existing conditions such as asthma or those who are immunocompromised. Health anxiety–fear of, or preoccupation with, serious illness–was already presumed to have been on the rise in recent decades due to a combination of rises in rates of both general anxiety and access to health information over the Internet (Kosic, Lindholm, Järvholm, & Hedman-Lagerlöf, 2020). A pandemic health event, such as the current spread of COVID-19, likely further exacerbates health anxiety in people. Although access to constantly updated information has potential benefits, health anxious individuals actually experience more negative consequences from online health information (Baumgartner & Hartmann, 2011). Further, due to high rates of discrimination in the healthcare system (Lambda Legal, 2010) and experiences with non-affirming care (Rossman, Salamanca, Macapagal, 2017), LGBTQ individuals may also experience anxiety about having to seek medical attention if they are experiencing symptoms of COVID-19.

There is a need for services that allow LGBTQ youth to discuss their anxieties with individuals who can provide them with social support and assist them in exploring ways they may be able to access additional resources. Given the significant physical risks associated with pandemics, it is often not until well after disease containment that mental health and psychological support programs begin to be prioritized; however, it is important to act early in the prevention of lasting mental health outcomes. With LGBTQ youth already being

at increased risk for anxiety disorders (Borgogna, McDermott, Aita, Kridel, 2018; Russell & Rish, 2016), it is imperative to work to prevent an increase in mental health conditions resulting from this pandemic. The COVID-19 pandemic is likely to result in decreased physical access to individuals training in mental health and suicide prevention, as such, LGBTQ youth need to be able to access remote support through telehealth as well as phone and digital based crisis services. Further, given anticipated economic strains, it is important that LGBTQ youth have 24/7 access to support that is provided at no cost to them.

Struggles About the Future

For many LGBTQ youth, their futures may burn brighter than their present; however, COVID-19 can make the future less certain and more distant. In addition to feeling concerned about the present, youth may also be experiencing anxiety related to expectations for the future, including those related to school, future relationships, and the path to their future goals and aspirations. While feelings of anxiety related to these changes might already be present for youth, the COVID-19 pandemic has the potential to exacerbate what is already present or introduce new concerns for youth. Concerns about being able to achieve independence, a normative part of development at this age (Cohen, 1980), is likely to impact youth due to uncertainty regarding when the country will return to normal. Specific to LGBTQ youth, oftentimes leaving home might be an adaptive way to cope with conflict and/or maltreatment at home (Bidell, 2014). LGBTQ youth may also be waiting until they are adults to disclose their identity to their parents (Katz-Wise et al., 2015). LGBTQ minors who are not in supportive environments and have been waiting until they were able to graduate high school or become the legal age to move to a more supportive environment, perhaps for school and/or work, might feel as though the pandemic is halting or postponing their ability to live as, and embrace, their true selves.

Access to supportive individuals and online communities might help alleviate anxiety about the future and provide an outlet for identity support and expression for LGBTQ youth. It is important that LGBTQ youth who are experiencing increased levels of anxiety during this time have access to supportive individuals with whom they can discuss their concerns and consider strategies that may help alleviate some of this anxiety for them. These individuals can support youth not only in helping with adjusting to the possibility of new timeframes and what that may mean, but also in their LGBTQ identity. LGBTQ youth may find it particularly helpful to utilize online communities through which they may feel more open to trying out their LGBTQ identity if they are not able to do so in their current environment. One study found that LGTBQ youth were able to find increased comfort with their identities, even through just watching others' journeys, and that the Internet supported their coming out process by often being the first place they do so (Craig & McInroy, 2014). Access to such resources can help provide LGBTQ youth with outside support and hope to allow them to get through the current crisis while looking forward to a future with increased autonomy and the ability to live authentically.

TREVOR'S ROLE

The Trevor Project is uniquely positioned to provide a range of support to LGBTQ youth throughout this pandemic. We have worked to ensure that we are able to maintain all of our services 24/7. We also offer an array of options for youth ranging from our LGBTQ peer support community [TrevorSpace](#), to our trained [crisis service counselors](#), and our [support resources](#) for LGBTQ youth on topics relevant to them such as [coming out](#) and [being an ally to transgender and nonbinary youth](#).

LGBTQ youth seeking community while physically distant from usual support can join TrevorSpace, the world's largest safe space social networking site for LGBTQ youth. It provides LGBTQ youth and allies with a safe, affirming community and the opportunity to connect with people who might be going through similar experiences. Finding a safe community online can be a powerful way to deal with physical isolation, receive support, and explore their identity.

TrevorText, TrevorChat, and TrevorLifeline, provide 24/7 support to youth in crisis. LGBTQ youth who experience anxiety and concerns over their physical or mental health or their economic situation can find a trained adult ready to listen and support them. Our research shows that LGBTQ youth who have one or more accepting adults are 40% less likely to attempt suicide (The Trevor Project, 2019c). In an external evaluation of Trevor's crisis services, over 90% of youth with with suicide risk during their interaction with Trevor were successfully de-escalated. Now more than ever, it's important to take action to support the needs of LGBTQ youth. Even when practicing physical distancing, LGBTQ youth should know that they are not alone.

CONCLUSION

This research paper brought together a wide range of academic literature to consider how the current global pandemic may impact LGBTQ youth. In particular, it focused on social interactions resulting from physical distancing, increases in economic strain, and struggles with worries about the present and future.

The Trevor Project is committed to ensuring that LGBTQ youth are supported throughout this pandemic by providing 24/7 access to an affirming international community for LGBTQ young people and trained crisis counselors to talk directly with youth with youth in crisis. We hope others will join us in helping LGBTQ youth know that they are not alone and provide the social, economic, and mental health support they need during these unprecedented times.

This report is a collaborative effort from the following individuals at The Trevor Project:

Amy Green, PhD
Director of Research

Myeshia Price-Feeney, PhD
Research Scientist

Samuel Dorison, LLM, MSc
Chief Strategy & Innovation Officer

Media inquiries, please contact:
Kevin Wong
Head of Communications
Kevin.Wong@TheTrevorProject.org
212.695.8650 x407

For research-related inquiries, please contact:
Amy Green, PhD
Director of Research
Amy.Green@TheTrevorProject.org
310.271.8845 x242

References

Anderson, R. M., Heesterbeek, H., Klinkenberg, D., & Hollingsworth, T. D. (2020). How will country-based mitigation measures influence the course of the COVID-19 epidemic?. *The Lancet, 395*(10228), 931-934.

Baams, L. (2018). Disparities for LGBTQ and gender nonconforming adolescents. *Pediatrics*, *141*(5), e20173004.

Baams, L., Wilson, B.D.M, Russell, S.T. (2019). LGBTQ youth in unstable housing and foster care. *Pediatrics*, *143*(3).e20174211.

Baumgartner, S.E. & Hartmann, T. (2011). The role of health anxiety in online health information search. *Cyberpsychology, Behavior, and Social Networking, 14* (10), 613-618.

Bidell, M.P. (2014). Is there an emotional cost of completing high school? Ecological factors and psychological distress among LGBT homeless youth. *Journal of Homosexuality, 61*(3), 366-381.

Borgogna, N. C., McDermott, R. C., Aita, S. L., & Kridel, M. M. (2019). Anxiety and depression across gender and sexual minorities: Implications for transgender, gender nonconforming, pansexual, demisexual, asexual, queer, and questioning individuals. *Psychology of Sexual Orientation and Gender Diversity, 6*(1), 54–63.

Calton, J. M., Cattaneo, L. B., & Gebhard, K. T. (2016). Barriers to help seeking for lesbian, gay, bisexual, transgender, and queer survivors of intimate partner violence. *Trauma, Violence, & Abuse, 17*(5), 585-600.

Centers for Disease Control and Prevention (2020). *Severe Outcomes Among Patients with Coronavirus Disease 2019 (COVID-19)* — United States, February 12–March 16, 2020. MMWR Morb Mortal Wkly Rep. DOI: http://dx.doi.org/10.15585/mmwr.mm6912e2

Chang, S., Stuckler, D., Yip, P. S. F., & Gunnell, D. (2013). Impact of 2008 global economic crisis on suicide: time trend. *The BMJ, 347*, f5239-f5239.

Cohen, J. (1980). Adolescent independence and adolescent change. *Youth & Society, 12* (1); 107-124.

Cohen, S. (2004). Social Relationships and Health. *American Psychologist, 59*(8), 676-684.

Cohen, S., Doyle, W. J., Skoner, D. P., Rabin, B. S., & Gwaltney, J. M. (1997). Social Ties and Susceptibility to the Common Cold. *Journal of the American Medical Association, 277*(24), 1940-1944.

Craig, S. L., & Lauren McInroy, L. (2014) You can form a part of yourself online: The influence of new media on identity development and coming out for LGBTQ youth. *Journal of Gay & Lesbian Mental Health, 18*(1), 95-109.

Dessel, A. B., Kulick, A., Wernick, L. J., & Sullivan, D. (2017). The importance of teacher support: Differential impacts by gender and sexuality. *Journal of Adolescence, 56*, 136-144.

Diamond, K. K., Stebleton, M. J., & delMas, R. C. (2019). Exploring the relationship between food insecurity and mental health in an undergraduate student population. *Journal of Student Affairs Research and Practic*e, DOI: 10.1080/19496591.2019.1679158

Durkheim, E. (1951) In: *Suicide*. Spaulding J, Simpson G, editors. New York: Free Press.

Eccles, J. S., Barber, B. L., Stone, M., & Hunt, J. (2003). Extracurricular activities and adolescent development. *Journal of Social Issues, 59*(4), 865-889.

Fowler, K. A., Gladden, R. M., Vagi, K. J., Barnes, J., & Frazier, L. (2015). Increase in suicides associated with home eviction and foreclosure during the US housing crisis: findings from 16 national violent death reporting system states, 2005–2010. *American Journal of Public Health, 105*(2), 311-316.

Frasquilho, D., Matos, M. G., Salonna, F., Guerreiro, D., Storti, C. C., Gaspar, T., & Caldas-de-Almeida, J. M. (2015). Mental health outcomes in times of economic recession: a systematic literature review. *BMC Public Health, 16*(1), 115.

Friedman, M. S., Marshal, M. P., Guadamuz, T. E., Wei, C., Wong, C. F., Saewyc, E. M., & Stall, R. (2011). A meta-analysis of disparities in childhood sexual abuse, parental physical abuse, and peer victimization among sexual minority and sexual nonminority individuals. *American Journal of Public Health, 101*(8), 1481-1494.

Goosby, B. J., Bellatorre, A., Walsemann, K. M., & Cheadle, J. E. (2013). Adolescent loneliness and health in early adulthood. *Sociological Inquiry, 83*(4), 10.1111/soin.12018. https://doi.org/10.1111/soin.12018

Green, A.E., Price-Feeney, M. & Dorison, S.H. (2020). *Suicidality Disparities by Sexual Identity Persist from Adolescence into Young Adulthood*. New York, New York: The Trevor Project.

Hunter, L.A., McGovern, A., & Sutherland, C., (2018). Intersecting Injustice: Addressing LGBTQ Poverty and Economic Justice for All: A National Call to Action. New York: Social Justice Sexuality Project, Graduate Center, City University of New York.

International Labour Organization. (2020). *COVID-19 and world of work: Impacts and responses*. Available at: https://www.ilo.org/wcmsp5/groups/public/---dgreports/---dcomm/documents/briefing note/wcms_738753.pdf. Accessed on March 23, 2020.

Johns, M.M., Lowry, R., Andrzejewski, J., Barrios, L.C., Zewditu, D., McManus, T., et al. (2019). Transgender identity and experiences of violence victimization, substance use, suicide risk, and sexual risk behaviors among high school student–19 states and large urban school districts, 2017. *Morbidity and Mortality Weekly Report, 68*(3), 65-71.

Joiner Jr, T. E., Van Orden, K. A., Witte, T. K., Selby, E. A., Ribeiro, J. D., Lewis, R., & Rudd, M. D. (2009). Main predictions of the interpersonal–psychological theory of suicidal behavior: Empirical tests in two samples of young adults. *Journal of Abnormal Psychology, 118*(3), 634-646.

Kaniuka, A., Pugh, K. C., Jordan, M., Brooks, B., Dodd, J., Mann, A. K., ... & Hirsch, J. K. (2019). Stigma and suicide risk among the LGBTQ population: Are anxiety and depression to blame and can connectedness to the LGBTQ community help? *Journal of Gay & Lesbian Mental Health, 23*(2), 205-220.

Katz-Wise, S. L., Rosario, M., & Tsappis, M. (2016). Lesbian, gay, bisexual, and transgender youth and family acceptance. *Pediatric Clinics of North America, 63*(6), 1011-1025.

Kawachi, I., & Berkman, L. F. (2001). Social ties and mental health. *Journal of Urban Health, 78*, 458–467.

Kosic, A., Lindholm, P, Järvholm, K., Hedman-Lagerlöf, E., Axelsson, E. (2020). Three decades of increase in health anxiety: Systematic review and meta-analysis of birth cohort

changes in university student samples from 1985 to 2017. *Journal of Anxiety Disorders*, 71.

Lambda Legal. (2010). *When health care isn't caring: Lambda Legal's survey of discrimination against LGBT people and people with HIV*. New York: Lambda Legal.

Leppel, K. (2019). Transgender Men and Women in 2015: Employed, Unemployed, or Not in the Labor Force. *Journal of Homosexuality*, 1-27.

Lourdes Ashley Hunter, Ashe McGovern, and Carla Sutherland, eds., Intersecting Injustice: *Addressing LGBTQ Poverty and Economic Justice for All: A National Call to Action*. New York: Social Justice Sexuality Project, Graduate Center, City University of New York, 2018).

Martin, F.M. (2020). Economic realities and consequences of the COVID-19 pandemic—Part II: The economy and fiscal policy. *Economic Synopses*, 11. https://doi.org/10.20955/es.2020.11

Movement Advancement Project, Center for American Progress, Human Rights Campaign, Freedom to Work, and National Black Justice Coalition. (2013). *A Broken Bargain for LGBT Workers of Color.* Available at: https://www.lgbtmap.org/workers-of-color

Murphy, R. D., Zemore, S. E., & Mulia, N. (2014). Housing instability and alcohol problems during the 2007–2009 US recession: the moderating role of perceived family support. *Journal of Urban Health, 91*(1), 17-32.

Parra, L. A., Bell, T. S., Benibgui, M., Helm, J. L., & Hastings, P. D. (2018). The buffering effect of peer support on the links between family rejection and psychosocial adjustment in LGB emerging adults. *Journal of Social and Personal Relationships, 35*(6), 854-871.

Price-Feeney, M., Green, A. E., & Dorison, S. (in press). Understanding the mental health of transgender and nonbinary youth. *Journal of Adolescent Health*.

Reeves, A., Stuckler, D., McKee, M., Gunnell, D., Chang, S. S., & Basu, S. (2012). Increase in state suicide rates in the USA during economic recession. *The Lancet, 380*(9856), 1813-1814.

Rhoades, H., Rusow, J. A., Bond, D., Lanteigne, A., Fulginiti, A., & Goldbach, J. T. (2018). Homelessness, mental health and suicidality among LGBTQ youth accessing crisis services. *Child Psychiatry & Human Development, 49*(4), 643-651.

Rossman K, Salamanca P, Macapagal K. (2017) A qualitative study examining young adults' experiences of disclosure and nondisclosure of LGBTQ identity to health care providers. *Journal of Homosexuality, 64*(10), 1390-1410.

Russell, S. T., & Fish, J. N. (2016). Mental health in lesbian, gay, bisexual, and transgender (LGBT) youth. *Annual Review of Clinical Psychology, 12*, 465-487.

Ryan, C., Huebner, D., Diaz, R. M., & Sanchez, J. (2009). Family rejection as a predictor of negative health outcomes in white and Latino lesbian, gay, and bisexual young adults. *Pediatrics, 123*(1), 346-352.

Stravynski, A., & Boyer, R. (2001). Loneliness in relation to suicide ideation and parasuicide: A population-wide study. *Suicide and Life-Threatening Behavior, 31*(1), 32-40.

The Trevor Project. (2019a). *Research Brief: Suicide Attempts among LGBTQ Youth of Color*. Available at:

https://www.thetrevorproject.org/2019/11/26/research-brief-suicide-attempts-among-lgbtq-youth-of-color/

The Trevor Project (2019b). *Research Brief: Unstable Housing and LGBTQ Youth Suicidality.* Available at:
https://www.thetrevorproject.org/2019/08/28/research-brief-unstable-housing-and-lgbtq-youth-suicidality/

The Trevor Project (2019c). *Research Brief: Accepting Adults Reduce Suicide Attempts Among LGBTQ Youth.* Available at:
https://www.thetrevorproject.org/2019/06/27/research-brief-accepting-adults-reduce-suicide-attempts-among-lgbtq-youth/

Toomey, R. B., & Russell, S. T. (2013). An initial investigation of sexual minority youth involvement in school-based extracurricular activities. *Journal of Research on Adolescence, 23*(2), 304-318.

Toomey, R. B., Ryan, C., Diaz, R. M., & Russell, S. T. (2011). High school gay–straight alliances (GSAs) and young adult well-being: An examination of GSA presence, participation, and perceived effectiveness. *Applied Developmental Science, 15*(4), 175-185.