



SUICIDE RISK

Parents navigating the world of “gender-affirming care” are often presented with a harrowing ultimatum from gender clinicians, often in the presence of their children — that the choice is stark: a “dead son or a live daughter” or a “dead daughter or a live son.” They are advised to consent to the “gender-affirming” medical pathway of puberty blockers and/or cross-sex hormones and/or cosmetic mastectomy, or willingly place their beloved, unstable child on a likely path to suicide. The implied threat heightens the emotional stakes and pressures parents into making rapid, fear-based medical decisions for their child that carry monumental, life-changing consequences, and compromises the integrity of informed consent.

Dubious or even questioning parents are seen as misguided and misinformed. They’re given false assurances that there is overwhelming evidence to support the interventions and that there is universal consensus amongst medical experts on the treatment pathway. Detransitioners and desisters report that teens are coached in online chat rooms and forums to threaten suicide if parents don’t affirm their new gender. This strategy is effective with both parents and clinicians.

Adding to the pressure, clinicians, media, and social justice organizations make dire claims that suicide among “LGBTQ+” youth is common — claims that are unsubstantiated and unchallenged.

THE SUICIDE NARRATIVE IS NOT SUPPORTED BY EVIDENCE

Despite the compelling, and successful suicide narrative, the claims are not backed by evidence — sex-trait modification interventions are not suicide prevention and trans-identified youth are not more at risk because of their identity.

- The UK’s Cass Review (2024) (<https://cass.independent-review.uk/home/publications/final-report/>) found that gender-distressed youth overwhelmingly suffer from other mental health issues and neurocognitive challenges — trauma from abuse, depression, eating disorders, cutting, drug/alcohol addiction, ADHD, autism, etc. — and have about the same risk for suicidal ideation/suicide as youth with these mental health challenges without gender distress.
- A landmark study from Finland (2024) (<https://mentalhealth.bmj.com/content/ebmental/27/1/e300940.full.pdf>) found that the main predictor of suicide in this population is anxiety and depression, and that sex-trait modification interventions do not have an impact on suicide risk.
- Oxford Professor Michael Biggs’ 2022 study (<https://doi.org/10.1007/s10508-022-02287-7>) found that from 2010-2020, of trans-identified youth treated at the UK’s Gender Identity Development Service, only 4 out of 15,000 (<1%) minors treated or on the waitlist and unable to access services committed suicide.
- In Sweden, a country with a long history of tolerance, the longest (40-year) study of sex-reassigned adults (www.ncbi.nlm.nih.gov/pmc/articles/PMC3043071/) found that compared to others of the same sex, completed suicides were 19.1 times higher, suicide attempts 4.9 times higher, and psychiatric inpatient care 2.8 times higher. Surgical interventions appear to increase, not reduce, suicide risk.
- A widely anticipated 2023 National Institutes of Health/Health and Human Services-funded study of youth receiving opposite-sex hormones (<https://pubmed.ncbi.nlm.nih.gov/36652355>) not only showed essentially no meaningful improvements in psychological functioning, but even under the highly affirming environment, resulted in two tragic suicides at 6 and 12 months of followup.

THE SUICIDE NARRATIVE INCREASES THE RISK OF HARM TO CHILDREN

- Medicalization itself introduces illness and increases the risk of a range of serious health problems — some of which have been linked to increased suicidality ([www.ajpmonline.org/article/S0749-3797\(17\)30222-2/abstract](http://www.ajpmonline.org/article/S0749-3797(17)30222-2/abstract)).
- Exploratory psychotherapy — an intervention that could identify and address the comorbid mental health issues that lead to suicidal ideation — has been vilified as “conversion therapy.” This therapeutic option has been effectively removed from practice in some states, and replaced broadly with affirmation-only therapy.

THE WIDESPREAD PROMOTION OF THE SUICIDE NARRATIVE IS DANGEROUS

When medical professionals and other activists exaggerate the risk of suicide among adolescents with gender-related distress or oversimplify the cause of suicide, they act in defiance of the accumulated evidence of decades of research.

- Emphasis on suicide puts kids at a higher risk of taking their own lives because the suggestion of suicide itself is known to be contagious (see “Suicide Clusters” (www.cdc.gov/suicide/resources/suicide-clusters.html) and “The Contagion of Suicidal Behavior” (www.ncbi.nlm.nih.gov/books/NBK207262/)).
- Best practice in suicide prevention emphasizes that suicide isn’t monocausal, yet clinicians promote “untreated” gender distress, or mistreatment and stigmatization, as a single cause of suicidality.
- Despite the HHS-funded Suicide Prevention Resource Center recommendations, messaging from activists and others promoting medical interventions promote the idea that suicide is an expected or reasonable response to not receiving “gender-affirming care.”

Threats of suicide should always be taken seriously, but there is nothing remarkable about suicidality in those with gender distress that warrants abandoning best practices for intervention or allowing a child or adult to leverage their threats to get what they want.

LEARN MORE

The 41% trans suicide attempt rate: A tale of flawed data and lazy journalists (<https://4thwavenow.com/2015/08/03/the-41-trans-suicide-rate-a-tale-of-flawed-data-and-lazy-journalists>)

The facts about: Gender-distressed youth and suicide risk (Sex Matters, 2024, <https://sex-matters.org/wp-content/uploads/2024/05/Suicide-factsheet.pdf>)

Reckless and Irresponsible: The ACLU pushes the potent but misleading “affirm or suicide” narrative (City Journal, 2023, www.city-journal.org/article/reckless-and-irresponsible)

Suicide by Clinic-Referred Transgender Adolescents in the United Kingdom (Archives of Sexual Behavior, 2022, www.ncbi.nlm.nih.gov/pmc/articles/PMC8888486/)

The Emotional Blackmail of ‘Gender-Affirming Care’ (Reality’s Last Stand, 2024, [/p/the-emotional-blackmail-of-gender](https://p/the-emotional-blackmail-of-gender))

Pediatric Gender Medicine and the Moral Panic Over Suicide (Reality’s Last Stand, 2022, www.realityslaststand.com/p/pediatric-gender-medicine-and-the)

To learn more, visit di-ag.org/suicide-risk

