

Victimization and Suicidality Among Dutch Lesbian, Gay, and Bisexual Youths

Diana D. van Bergen, PhD, Henry M. W. Bos, PhD, Jantine van Lisdonk, MSc, Saskia Keuzenkamp, PhD, and Theo G. M. Sandfort, PhD

We examined Netherlands Institute for Social Research data, collected between May and August 2009, on 274 Dutch lesbian, gay, and bisexual youths. The data showed that victimization at school was associated with suicidal ideation and actual suicide attempts. Homophobic rejection by parents was also associated with actual suicide attempts. Suicidality in this population could be reduced by supporting coping strategies of lesbian, gay, and bisexual youths who are confronted with stigmatization by peers and parents, and by schools actively promoting acceptance of same-sex sexuality. (*Am J Public Health*. 2013;103:70–72. doi:10.2105/AJPH.2012.300797)

Studies have shown that rates of suicidal ideation and suicide attempts among lesbian, gay, and bisexual (LGB) youths are higher than among heterosexually identified youths.¹ Also, suicide attempts in LGB adolescents are positively associated with the parents' negative responses to their offspring's sexual orientation.² Furthermore, victimization at school is positively related to lifetime suicide attempts and to suicidal ideation in the previous year.^{3,4} Although LGB adolescents experience victimization in various social contexts, it is not clear which social context (parents, family members outside the nuclear family, school, or neighborhood) is most crucial in determining suicidality. The present study is one of the first studies to examine this issue.

METHODS

Data for this analysis, collected between May and August 2009, came from a broader study of LGB youths conducted by the Netherlands Institute for Social Research. Participants for this survey were recruited with various strategies, including banners on Web sites and flyers handed out at LGB parties across the Netherlands. The target group was addressed as “boys who (also) feel attracted to boys” and “girls who (also) feel attracted to girls.” For the present analysis we included youths who were enrolled in secondary education because of our interest in the relative importance of victimization in the school environment. This resulted in a sample of 274 participants (Table 1). Ethnicity was classified by the investigators as Dutch/Western or non-Western, based on the country of birth of the parents.

With this Internet survey, lifetime suicidal ideation and suicide attempts were each measured with 1 item (1 = no; 2 = yes). Experiences of homophobic victimization in the preceding 12 months by parents, family members outside the nuclear family, at school, and by people in the neighborhood were measured with 1-item questions; for example, “Have you in the preceding 12 months been victimized at your school due to your same-sex attraction?” (1 = never to 5 = very often). We combined values 3, 4, and 5 because preliminary analyses showed that they were used relatively infrequently.

RESULTS

Of the participants, 63.9% and 12.8% reported suicidal ideation and suicide attempts, respectively (no significant gender differences; Table 1). These percentages are much higher than those found in a representative study among 18- to 24-year-old individuals in the Dutch population, which showed that 10.3% had ever “felt so down that they had thought about killing themselves,” and 2.2% had attempted suicide.⁵

In our study, boys were more likely than girls to report victimization at school and in the neighborhood. We found no significant gender differences in experiences of victimization by parents and by family members outside the nuclear family (Table 1).

Logistic regression analyses showed that after control for gender, age, education, and ethnicity, victimization at school and victimization in the neighborhood were associated with suicidal ideation. For suicide attempts, there were significant associations with victimization by parents and victimization at school (Table 2). The Wald test showed that experience with victimization at school was the strongest predictor for both suicidal ideation and suicide attempts. Participants who reported more victimization at school also reported more often suicidal ideation and attempts; however, for victimization in the neighborhood, the odds ratio was lower than 1.00 for suicidal ideation indicating a reverse effect.

DISCUSSION

Despite the relatively positive attitude toward gay and lesbian people in the Netherlands,⁶ this study suggests that suicidality among Dutch LGB youths is significantly higher than among heterosexual youths. This is in line with the findings of studies both among LGB youths in other countries¹ and among Dutch LGB adults.⁷

Our findings furthermore suggest that the impact of victimization on suicidality depends on the context in which the victimization takes place. Negative reactions at school (probably by peers) were related to both suicidal ideation and suicide attempts, whereas negative reactions by parents were only related to suicide attempts. Victimization in the neighborhood was only related to suicidal ideation; however, on the basis of our study, it is not clear why a reverse effect was found. Although negative reactions from parents were related to suicidality among LGB youths, it should be noted that victimization at school was the strongest predictor. This is an important finding because school is one of the primary settings in which social interactions between adolescents occur.

The relatively less important role of the parents might indicate the increasing importance of peers in this particular stage of life⁸; future research should explore potential explanations for this differential impact.

Because of the cross-sectional design of the study and the fact that stigmatization was assessed regarding the previous year and suicidality on a lifetime basis, it is impossible to establish causality. Notwithstanding these

TABLE 1—Sample Demographics, Perceived Experiences of Stigmatization in Diverse Social Contexts, Suicidal Ideation, and Suicidal Attempts Among 274 Dutch Lesbian, Gay, and Bisexual Youths, Separately for Girls and Boys: Netherlands Institute for Social Research, May to August 2009

Characteristic	Girls (n = 168), No. (%) or Mean ±SD	Boys (n = 106), No. (%) or Mean ±SD	Total (n = 274), No. (%) or Mean ±SD	χ^2/F	P
Age	16.80 ±0.81	16.72 ±0.79	16.77 ±0.80	0.66	.418
Education				2.86	.239
Vocational education	22 (13.1)	22 (20.8)	44 (16.1)		
Higher intermediate education	59 (35.1)	35 (33.0)	94 (34.3)		
Preuniversity education	87 (51.8)	49 (46.2)	136 (49.6)		
Ethnicity				8.16	.004
Dutch/Western	164 (97.6)	94 (89.5)	258 (94.5)		
Non-Western	004 (02.4)	11 (10.5)	015 (05.5)		
Experienced stigmatization by parents	1.25 ±0.60	1.19 ±0.46	1.23 ±0.55	0.81	.368
Experienced stigmatization by other family members (outside the nuclear family)	1.13 ±0.42	1.09 ±0.33	1.12 ±0.38	0.59	.443
Experienced stigmatization in school context	1.54 ±0.70	1.81 ±0.81	1.64 ±0.75	8.95	.003
Experienced stigmatization in neighborhood	1.35 ±0.56	1.63 ±0.72	1.46 ±0.64	12.15	.001
Suicidal ideation				0.19	.661
No	059 (35.1)	40 (37.7)	99 (36.1)		
Yes	109 (64.9)	66 (62.3)	175 (63.9)		
Suicide attempts				2.85	.092
No	142 (84.5)	97 (91.5)	239 (87.2)		
Yes	026 (15.5)	09 (08.5)	035 (12.8)		

TABLE 2—Logistic Regression Results of Perceived Experiences of Victimization in Different Social Contexts as Predictors of Suicidal Ideation and Suicide Attempts Among 274 Dutch Lesbian, Gay, and Bisexual Youths: Netherlands Institute for Social Research, May to August 2009

Social Contexts	Adjusted OR ^a (95% CI)	Wald	P
Suicidal ideation^b			
Victimization by parents	1.28 (0.74, 2.22)	0.78	.378
Victimization by other family members	1.90 (0.77, 4.69)	1.95	.162
Victimization in school context	1.66 (1.06, 2.60)	4.96	.026
Victimization in the neighborhood	0.59 (0.35, 0.97)	4.35	.037
Suicide attempts^c			
Victimization by parents	1.78 (1.00, 3.17)	3.80	.051
Victimization by other family members	0.82 (0.33, 2.03)	0.18	.673
Victimization in school context	1.98 (1.08, 3.62)	4.94	.026
Victimization in the neighborhood	0.93 (0.46, 1.85)	0.05	.831

Note. CI = confidence interval; OR = odds ratio.

^aAdjusted ORs are controlled for gender, age, education, and ethnicity.

^b χ^2 (df = 8) = 19.23; P = .014; Nagelkerke R² = 0.09.

^c χ^2 (df = 8) = 29.44; P < .001; Nagelkerke R² = 0.19.

limitations, it can be concluded that preventive measures against suicidality should be focused on the impact of victimization by peers, parents, and other people in the broader environment of LGB youths. This would reduce the heightened suicide risk in this population. ■

About the Authors

Diana D. van Bergen is with the Department of Theory and Research in Education, Faculty of Psychology and Education, VU University Amsterdam, The Netherlands. Henny M. W. Bos is with the Research Institute of Child Development and Education, University of Amsterdam, The Netherlands. Jantine van Lisdonk and Saskia Keuzenkamp are with the research group of Emancipation, Youth and Family Affairs, Netherlands Institute for Social Research, The Hague, and the Department of Sociology, VU University Amsterdam. Theo G. M. Sandfort is with the HIV Center for Clinical and Behavioral Studies, Columbia University, New York, NY.

Correspondence should be sent to Diana D. van Bergen, VU University Amsterdam, Department of Theory and Research in Education, Faculty of Psychology and Education, Van der Boechorststraat 1, 1081 BT Amsterdam, The Netherlands (e-mail: d.d.van.bergen@vu.nl). Reprints can be ordered at <http://www.ajph.org> by clicking the "Reprints" link.

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Contributors

D. D. van Bergen designed the study and the questionnaire, conducted participant recruitment and data collection, helped with analyses, and did the writing and interpretation. H. M. W. Bos helped with design of the study, conducted analyses, and did the writing and interpretation. J. van Lisdonk designed the questionnaire, conducted participant recruitment, and commented on drafts. S. Keuzenkamp oversaw the project design, helped with the questionnaire and interpretation of data, and commented on drafts. T. G. M. Sandfort commented on the analyses and the draft, and the interpretation of data.

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Human Participant Protection

The study was approved by the internal review board of the Netherlands Institute for Social Research. According to Dutch law, no approval is required from an ethics committee. Youths were given information about the study, its aims, and contents online before participating in the survey. All participants were offered a list of resources in case they needed information or help.

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