

Internalized homophobia and suicidality in youth: review

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ABSTRACT

The Lesbian Gay Bisexual Transgender (LGBT) community at large is considered a subgroup vulnerable to depression and suicidality. The prevalence is also found to be higher in homosexuals than heterosexual individuals. Despite people becoming more open about their sexuality there are people at large who are having difficulty and the fear is still there to admit their sexual status in the society. This internalized phobia is leading to major issues like suicide on the basis of the literature present this study tries to review the relationship between the homophobia as a casual factor of suicide in the Western Culture and Indian Culture. The conclusion drawn from this review has given the idea where work needs to be done to make findings and data more concrete.

Keywords: *Internalized Homophobia and Suicidality*

When children reach the age of puberty, parents teach them the values of the society we live in. The Indian culture comprises an attitude in which homophobic or attraction towards the same sex is discriminatory and not normal which tends to make individuals or adolescents form negative ideas about the same. Even though an individual who has an inclination towards the same sex might be forced to think that is “insane”, “bad” or immoral. This tendency is very potent in developing feelings of self-disgust and self-hatred. The feelings of self-hatred and self-disgust are the leading factors of “internalized homophobia or internalized oppression”. (The Rainbow Project 2012).

Internalized homophobia is a phenomenon which takes place in gay, lesbians or bisexuals who have been taught that heterosexuality is a societal norm and homosexuality is a crime or a taboo.

Some common manifestations of internalized homophobia can be

1. Trying to alter the sexual orientation
2. Involving in obsessive thinking and compulsive behaviour.
3. A feeling of being a failure
4. A tendency to have a negative body image and lowered self-esteem.

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5. A constant denial of homophobia, heterosexism and biphobia are serious social problems.
6. A tendency to be in an abusive relationship for reassurance.
7. In some instances acting out or showing aggression towards LGB people.
8. Engaging in sexual behaviour which is risky and unsafe along with fear of intimacy in few cases.
9. Substance abuse, thinking about death or suicide to hide their problems from society.

Suicidality

The term suicidality is very much self-explanatory, in common words can be defined as thoughts, plans or suicidal attempts. It is very common or rather high in gay men. There can be various risk factors in the LGB people; it can be due to depression, previous suicide, and problems with relationships, as well as factors like victimization, rejection and conflict with their own sexual identity (Hans et al., 2011).

There have been many instances where prejudice events, came forward to contribute as suicidal risk factors, they were, threats or insults in public or person, when individuals are physically or socially assaulted, destruction to their property and personal belonging (Ferlatte et al., 2015).

REVIEW OF LITERATURE

Lack of support from the family members can also be considered a strong predictor of suicidal behaviour. Gay men who have faced rejection from their parents when revealing their sexual orientation have a greater risk for suicide attempts. In a study of 224 gay, lesbian, and bisexual youths which was conducted came with the results that individuals who experienced rejection by their family were 8.4 times more likely to report having attempted suicide. In contrast support from family was a protective factor in lowering the risk for suicide. As previously described, gay men may have difficulties in accepting their gay identity because of the society's negative views on homosexuality, and they feel forced to hide their sexual identity and experience the inner conflict in despising their true sexual orientation. These thoughts of internalized oppression have been known to be increasing the risk of self-harm among gay men and lesbians. Suicide among gay men and lesbian women who are HIV positive is associated with a recent experience of HIV stigma such as rejection, harassment, and physical violence. Gay men who suicide embody diverse complex identities beyond their sexual orientation, and intersectionality research has argued the need to account for multiple social influences in apprehending insights to gay men's suicide. In a study where 8,000 gay Canadian-based men highlighted education, income levels, and ethnicity as factors implicated in respondents' depression and suicidality. In this risk for a suicide attempt was five times higher among men with low income (under \$30,000 per annum) and no formal education; suicide attempts were twice as likely for First Nations males compared to white men. This study highlights the value of studying and addressing the multiple intersecting social factors on the health disparities experienced by gay men (Ferlatte et al., 2012).

Homosexual young adults as a group experience more suicidal behavior than other groups or heterosexual individuals. A wide variety of studies show that LGB youth are nearly one and a half to three times more likely to have reported suicidal ideation than heterosexual youth. Literature across different sources also revealed that LGB youth are nearly one and a half to seven times more likely than non-Lesbian Gay Bisexual youth to have reported attempting suicide. For various reasons, little can be commented with certainty about suicidal deaths among the group in consideration. The problem is that the mortality data does not demand or

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include the sexual orientation of the deceased so there is no clarity as such. However, based on the higher rate of suicide attempts among Lesbian Gay Bisexual youth and the relative seriousness of their suicidal attempts, it can be commented that Lesbian Gay Bisexual youth experience higher rates of suicidal deaths than heterosexual peers. While there is still limited information is available on suicidal behaviour among transgender youth, it can be hypothesize that transgender youth, in common with LGB youth, have greater risk and lower protective factors and higher rates of suicidal behavior. Risk and protective factors help explain suicidal behavior and inform program and practitioner approaches to reducing suicidal behavior. LGB youth generally have more risk factors, more severe risk factors, and fewer protective factors than heterosexual youth. For example, LGB youth often lack important protective factors such as family support and safe schools, and more LGB young people appear to experience depression and substance abuse. In addition, there is risk unique to LGB youth related to the development of sexual orientation, for example, disclosure at an early age raises risks.

The majority of literature reviews on this sensitive issue of suicide attempts conclude that homosexual youths have a very high rate of attempting suicide than heterosexual youths in the main stream society. Furthermore, most suicide attempts among this community of people occur during adolescence and young adulthood. Some researchers have managed to compare the seriousness of suicide attempts by homosexual and heterosexual youth by asking people about their intent to end their lives. Safren & Heimberg (1999) found that 58 % of LGB people who had attempted suicide reported that they had really hoped that death is the ultimate solution. On the contrary, only 33% of heterosexuals who had attempted suicide reported that they had really hoped to die. Another important measurement of seriousness is the lethality of the means involved in the attempt of suicide. For example, people who use firearms in a suicide attempt have a higher 16 rate of suicide deaths than people who use other means, simply because firearms are more lethal than other means (Brent et al., 1991) found in interviews with GB males 14 through 21 years of age that 54 % of suicide attempts in this group could be classified as moderately to highly lethal. The study also reported that one fifth of homosexual youths who attempted suicide required hospitalization, and three-fifths were least or moderately rescued). It is necessary to note that all suicide attempts should be taken seriously by the caregivers of young people, including parents, school/college staff, and health care professionals (Bernt et al., 1991).

In India, there is not much of a progressive change that has taken place in regard to social and legal recognition and homosexuals remain victims of violence in different forms supported by the state and society. In India there is a scattered group of a few hundred, homosexuals are at present a strong core group and growing community evolving its own hip and happenings. This community is weaving their way from metropolitan cities into semi urban societies both online as well as offline. The number is gradually increasing with more and more people coming out of the closet and accepting their sexual orientation and talking about it in public. While in major Delhi and Mumbai and, to a lesser extent, Bangalore and Calcutta are the major cities where there is a hub of the Indian gay movement, people from smaller towns in Gujarat, Maharashtra and Bihar are also becoming a part of and accepting homosexuality and their sexual orientation. The homosexuals in India are taking part in talking live in chat rooms, looking for partners to spend their life with, falling in love, forming intimate relationships over the internet and crossing cities to be with each other in real world (Parasher., 2012).

METHODOLOGY

Aim

- To review empirical papers and relevant literature in order to find out if internalized homophobia has an impact or rather a causal factor of suicidality in the youth.

Objectives

The primary objective of this review paper was to find out whether internalized homophobia has an impact on suicidality in the youth. The current study focuses on the relevant literature and empirical studies to find above mentioned cause as most of the studies conducted focus of the Western world and less in the Indian culture.

DISCUSSION

The present study is a review of internalized homophobia and suicidality. The present study has been done considering 4 research articles based on the western culture, Spanish and one specifically for the Indian culture. The studies are, Suicide Risk and Prevention for Lesbian, Gay, Bisexual, and Transgender Youth, Depression and Suicidality in Gay Men: Implications for Health Care Providers, Internalized Homophobia and Suicidal Ideation among LGB Youth and Homosexuality in India – The Invisible Conflict. The literature and findings from the studies indicated that the rate of suicidality is very high in gay men than in lesbian woman. Suicide here is just a manifestation of host of other problems like abuse, depression, substance abuse, bullying etc. Homosexuality has seen a lot of transitory changes like being termed as a disorder by DSM III in the 1980's to being accepted in mainstream society in the western culture. Even though the literature shows acceptance majority of the people have difficulty accepting their sexual identities. Even if they accept it the society at large tries to dominate over this section. Suicidality is considered higher in men because there might be due to their socioeconomic status, understanding of the issue or accepting them at large.

As the literature and research findings suggest the status of suicide is still unknown in terms of concrete date because the mortality report or details never enquire about the sexual preferences or orientation of an individual who has committed suicide. Also it is noteworthy that in other similar cases people who don't commit suicide they have high suicidal ideations and have death wishes because they feel helpless with their current situation and have difficulty in dealing with it. When they seek professional help than only their condition is taken into consideration.

CONCLUSION

Proceeding to Indian culture homosexuality is still considered a taboo by the society at large even though it has been decriminalized under Section 377 by the Supreme Court of India. The acceptance and forming of LGBT communities is seen in major cities in India and not in suburbs and rural parts of the country. Since Indian culture comprises a greater concentration of the Hindu culture and heterosexuality is the main aim, homosexuality is very looked down upon. There is a lack of relevant literature in India because the youth is still ashamed or rather hiding their sexual orientation and sexual preferences. Even though the youth has learnt to accept homosexuality but the parents are still facing difficulty accepting their child when it comes to homosexuality. In many instances when somebody tries to confess in front of family members and peers they are highly looked down upon and they lose their family support making them vulnerable to a host of problems like lowered self- esteem, depression, bullying, abuse and to top it off Suicidality. It is very difficult to remove the issue when it is very deeply engrossed as a stigma in the culture itself. In the recent years the government,

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NGO's, Mental health professionals are trying to fight for the rights and propagate a natural environment for homosexuals like that of other heterosexual individuals.

There is a room for more research in different cultures across the world in the current topic as there is less clarity in the Asian culture regarding homosexuality and implications that follow with it.

Research Implications

The main aim of this study was to review different literatures in the area of Internalized Homophobia and Suicidality. The literature which this current study reviews a good baseline for internalized homophobia and the rate of suicide and suicidal ideation in the age group of 15 to 30 years. Even though there are significant researches available in the western world it is very necessary to give rise to empirical studies and conduct more researches in the Asian and Indian Context where homosexuality is still considered a major taboo and even though the suicide rates are high in the youth, no clarity is available as to why this has occurred.

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Conflict of Interest

The author declared no conflict of interests.

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