

Research shows psychological risks increases for transgender youth at gender identity milestones

July 16 2024, by Elana Gotkine



Transgender youth have an increased risk for attempting suicide or running away from home in association with gender identity milestones, with the association driven by children who live in unsupportive families, according to a study <u>published</u> online July 15 in *JAMA*



Pediatrics.

Travis Campbell, Ph.D., from Southern Oregon University in Ashland, and colleagues conducted a <u>retrospective cohort study</u> to examine changes in mental health outcomes among <u>transgender youth</u> who initiate <u>gender identity</u> milestones stratified by level of family support (supportive, neutral, and adverse).

Milestones included feeling one's gender was different, thinking of oneself as transgender, telling another that one is transgender, and living full-time in one's gender identity. The cohort included 18,303 transgender adults, aged 18 years or older, who had initiated at least one gender identity milestone between ages 4 and 18 years.

The researchers found that among transgender youth, initiating a gender identity milestone was associated with a higher risk for <u>suicide attempt</u> and running away from home, with the finding driven by children living in unsupportive families. For example, there was a meaningful increase seen in the overall probability of attempting suicide among those in adverse families or neutral families in association with thinking of oneself as transgender (estimates, 1.75 and 1.39 percentage points, respectively).

No significant associations were seen between gender identity milestones and adverse <u>mental health outcomes</u> among youth living with supportive families.

"A supportive family environment is associated with much lower risk overall for running away and attempting suicide, and it mitigates the increased risk at gender identity milestone," the authors write.

More information: Travis Campbell et al, Mental Health of Transgender Youth Following Gender Identity Milestones by Level of



Family Support, *JAMA Pediatrics* (2024). DOI: 10.1001/jamapediatrics.2024.2035

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