

Suicidal ideation in LGBT youth: a literature review.

Ideación suicida en jóvenes LGBT: una revisión de la literatura.

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Abstract:

A review of the literature on experiences and meanings surrounding suicide ideation in LGBT youth was conducted. It was found that a large part of the studies were carried out in Anglo-Saxon populations that tended to compare "heteronormative" with "non-heteronormative" populations. Through eminently quantitative designs, the main results were greater vulnerability than the heterosexual population, internalized homophobia, and rejection of one's sexual orientation. Social and family vulnerability that fed the experience of diverse violence in different areas of their lives. In addition, alcohol and drugs were predictors of suicidal ideation. These living conditions favored mood disturbances and affected mental health and a tendency to develop self-injurious behaviors. However, family and social support were protective against suicidal ideation. Few authors used the recognized categories within the LGBT community to describe their participants. The category most commonly used was "non-heteronormative population," tending to reproduce heterosexist models. Most of the papers on experiences and meanings did not give their participants a voice.

Keywords:

Suicidal risk, protective factors, risk factors, sexual minorities

Resumen:

Se realizó una revisión de la literatura sobre experiencias y significados en torno a la ideación suicida en jóvenes LGBT. Se identificó que gran parte de los estudios fueron realizados en poblaciones anglosajonas tendientes a comparar poblaciones "heteronormativas" con "no heteronormativas", a través de diseños eminentemente cuantitativos, donde los principales resultados fueron una mayor vulnerabilidad en comparación a población heterosexual, homofobia internalizada y rechazo a la propia orientación sexual. Vulnerabilidad social y familiar que alimentó la vivencia de diversas violencias en diferentes ámbitos de sus vidas. Además, el alcohol y las drogas fueron predictores de la ideación suicida. Estas condiciones de vida favorecieron las alteraciones del estado de ánimo y afectaron la salud mental, así como una tendencia a desarrollar conductas autolesivas. Sin embargo, el apoyo familiar y social fueron protectores ante la ideación suicida. Pocos autores emplearon las categorías reconocidas dentro de la comunidad LGBT para describir a sus participantes, la categoría más usada fue "población no heteronormativa", tendiente a reproducir modelos heterosexistas. La mayoría de los trabajos sobre experiencias y significados no dieron voz a sus participantes.

Palabras Clave:

Riesgo suicida, factores protectores, factores de riesgo, minorías sexuales

INTRODUCTION

The concept of suicidal ideation consists of recurring thoughts and ideas that a subject presents regarding taking their own life. On the other hand, the suicide attempt is a failed suicide action, where its objective is to end one's own life; however, it cannot be completed (Tomicic et al., 2016).

When talking about suicidal ideation and suicide attempt, other mental health problems present in the subjects will also have to be considered, such as depression, anxiety, and low self-esteem. Those are important to consider since suicidal ideation and the

attempt are phenomena that are not exclusive of other mental health problems (Pineda-Roa, 2019).

Various authors identify a set of situations that put individuals in the LGBT community at greater risk of presenting suicidal ideations or carrying out one or more suicide attempts (Binder, 2016; Organización Mundial de la Salud [OMS], 2019; Russell & Joyner, 2001; Taliaferro & Muehlenhamp, 2017).

In recent years, suicide has been positioned as a public health problem due to its high mortality rate, where approximately 800,000 people commit suicide each year, which places suicide as one of the three leading causes of death within the population between 15 and 44 years of age (OMS, 2012, 2019). The statistics show the number of suicide cases in the general

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population, but the number of instances by populations with specific characteristics, such as the LGBT community, is not counted. Gay, lesbian, bisexual, and transsexual people are ranked as one of the communities with the highest risk due to the high prevalence of this mental health problem compared to the heteronormative population (Eisenberg & Resnick, 2006; Teixeira-Filho & Rondini, 2012), with adolescents and young adults being the most vulnerable (Cedillo, 2017; Lagazzi, 2016; Van Bergen et al., 2013).

Given the above, it is of utmost importance to have an in-depth knowledge of this phenomenon to understand the various dimensions of this problem.

Next, elements of analysis are presented around the experiences and meanings of suicidal ideation and attempts, which is why publications whose participants were gay, lesbian, bisexual, and transgender (LGBT) youths were retrieved. So the question that guided this work was: What is the empirical evidence that revolves around the experiences and meanings of suicidal intent in young people from the LGBT community?

METHOD

A narrative synthesis type review was carried out, following the perspective of Popay et al. (2006), which consists of the construction of elements of analysis, i.e., categories, from various systematization processes, which began with a preliminary synthesis, transferring in textual form the results of the research included, tabulating the essential data of each analysis, allowing the transformation and construction of common themes, exploring the relationship in terms of concepts and data found based on empirical references, including thesis works, scientific journal articles, and summaries of empirical research.

The procedure consisted of the development of different stages found in Mendieta, Ramirez, and Perez (2015), consisting of 1) the formulation of the search question; 2) the identification of search engines; 3) the making of a list of inclusion and exclusion criteria; 4) the literature search; 5) a first reading of the articles found, 6) subsequent discrimination of those articles that did not fall within the inclusion criteria; 7) the systematization of the selected articles through a matrix.

Electronic databases were explored in Google Scholar, EBSCO, SciELO, REDALYC, Science Direct, Emerald, WEB OF SCIENCE, Global Issues, Pro-Quest Central, Sage, Science in Context, Springer, Jstor, Ingenta Connect, and National Center for Biotechnology Information.

The search criteria were: suicidal ideation, suicide attempt, sexual and gender minorities in English, Spanish, and Portuguese, to describe the literature surrounding the experiences and meanings of suicide attempt in this group of young people.

The first literature search yielded 86 bibliographic references, which were chosen in the first instance based on their general title; once downloaded, they were checked to ensure that they met the inclusion criteria of the research. If the title didn't provide sufficient information for the selection, the abstract of the papers was read. At the end of the discrimination and selection of articles, 54 bibliographic references were obtained (See Figure 1).

Empirical studies addressing suicidal ideation or attempt in the LGBT population were included. Studies that did not focus on or include LGBT subjects and works that were not the result of empirical research were excluded.

At the end of the literature search stage, a thematic analysis was carried out, in which bibliographic references were grouped by categories (Popay et al., 2006).

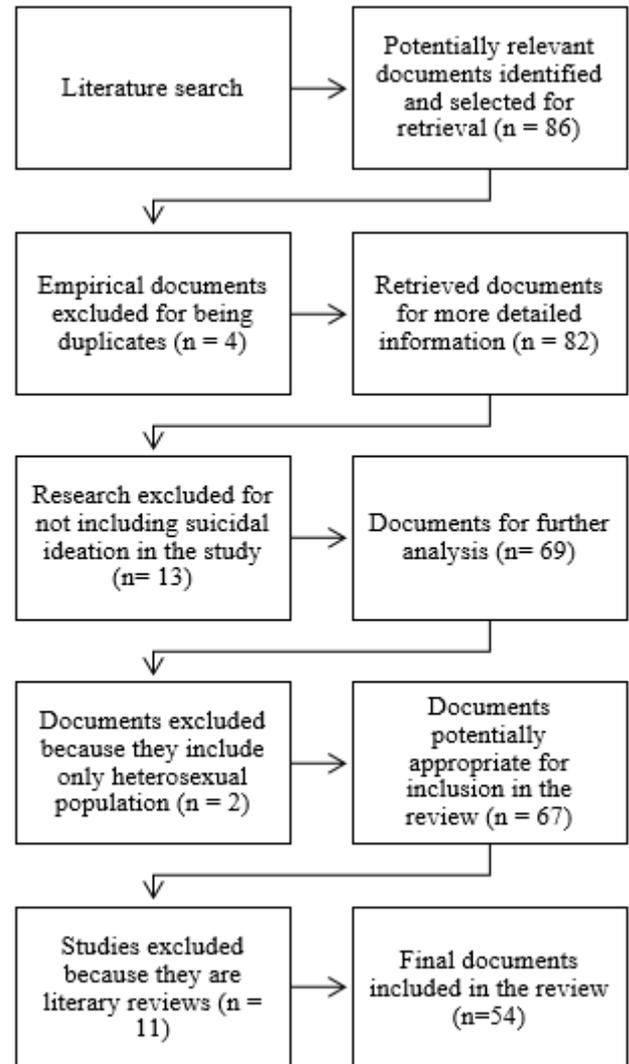


Figure 1. Flowchart. Document selection and discrimination process

RESULTS

Forty-one quantitative articles were identified, seven qualitative, and six did not specify the design; however, from the characteristics of their works, it can be inferred that their design is quantitative. There were 29 studies conducted in the United States, four in Mexico, three in Chile, and two in Brazil, England, and Spain. At the same time, Colombia, Costa Rica, Australia, France, Denmark, Guatemala, China, Holland, New Zealand, Puerto Rico, United Kingdom, and Canada presented one study.

In 12 studies, information was obtained through samples of broader epidemiological studies where data on the topic were extracted. In six studies, the sampling process was carried out using the snowball technique. Regarding the sampling process, in six studies, contact was made through schools; in five through social organizations; seven through calls via the Internet and-or in local places, and the same number of studies

used various strategies; and finally, 11 studies did not mention their contact methods.

Regarding intervention, which refers to whether the authors carried out some type of strategy with the participants or made proposals for a future intervention taking into account their results, 45 did not carry out any type of intervention, and eight made intervention proposals. Only one carried out an intervention with the participants.

Among the articles analyzed, 23 described their population as heterosexual and not heterosexual; nine were based on the LGB population; five articles studied LGBT population; four LG; four GB; four G; four papers worked with Trans population and one only with lesbians.

The following themes were identified: 1. Greater vulnerability than the heterosexual population; 2. Internalized homophobia and rejection of one's sexual orientation; 3. Victimization; experience of various types of violence; 4. Alcohol and drugs predictors of suicidal ideation; 5. Mood disturbances and mental health impairment; 6. The younger the age, the greater the suicidal risk; 7. Social and family vulnerability; 8. Social and family support was protective against suicidal ideation; and finally, 9. Tendency to develop self-injurious behaviors.

1. Greater vulnerability than the heterosexual population.

Several authors (Binder, 2016; Cochran et al., 2007; Lian et al., 2015; Mathy et al., 2011; Plöderl et al., 2010; Saewyc et al., 2007; Shield et al., 2012; Silenzio et al., 2007; Swannell et al., 2016; Taliaferro & Muehlenhamp, 2017; Zhao et al., 2010) assessed suicidal risk, comparing the prevalence in their results between heterosexual and sexual minority populations. Through their results, it was shown that sexual minorities present a higher suicidal risk. Some authors mention that there is up to triple the risk of attempting suicide or presenting suicidal ideation in this population than their heterosexual peers (Bolton & Sareen, 2011; Caputi, Smith, & Ayers, 2017; Hatzenbuehler, 2011). An example of this is the research conducted by Teixeira-Filho and Rondini (2012), who ran a quantitative study with a population of 2,282 adolescents in Western São Paulo Brazil, to determine the associations between sexual orientation and suicidal ideation and attempts. Among their results, it was found that sexual minorities have a higher suicide risk than the heterosexual population. The prevalence of suicidal ideation found among heterosexuals was 20.7% and among non-heterosexuals was 38.6%, obtaining that the ratio of the prevalence of suicidal ideation related to heterosexuals concerning non-heterosexuals was 1.87 (CI (95%): [1.44 to 2.42]) with a significance level of $p < 0.0001$. Sexual minorities present approximately twice the risk of suicidal ideation. And about attempts, a triple risk was found, since the prevalence ratio concerning heterosexuals with respect to non-heterosexuals was 2.74 (95% CI: [1.81 to 4.14]) with a significance level of $p < 0.0001$.

Similarly, the increase in suicidal risk by gender orientation was mediated by the lack of protective factors (Eisenberg & Resnick, 2006; Hatzenbuehler, 2011) such as family and social support and by the presence of other risks, such as substance abuse, close losses, self-harming behaviors, and presence of mental disorders (Blosnich & Bossarte, 2012; Bostwick et al., 2014; Duffy et al., 2019; Russell & Joyner, 2001).

2. Internalized homophobia and rejection of one's sexual orientation.

The category that emerged through the findings of various authors (Baams et al., 2015; Baiocco et al., 2014; Calvo, 2018; Castillo, 2010; Charbonnier et al., 2018; Granados-Cosme & Delgado-Sánchez, 2008; Lagazzi, 2016; Ortiz-Hernández, 2005; Ortiz-Hernández & García, 2005; Pineda-Roa, 2019; Pinto-Cortez et al., 2018) who identified in their participants, victims of homophobic aggressions (gays, lesbians, bisexuals, transsexuals, and transgender) the presence of mental disorders, such as anxiety or depression, also found behaviors oriented to self-harm, from the assimilation of all these prejudices around one's sexual orientation (Calvo, 2018).

Other authors (Calvo, 2018; Ortiz-Hernández & García, 2005) focused on exploring participant's social representations that revolved around their sexual orientation, even rejecting it and, showing homophobic behaviors, this process they called Internalized Homophobia, characterized by a dislike for one's self, feelings regarding that there was something wrong with them, that their feelings were unnatural; and even, that they should be punished (Lagazzi, 2016; Pinto-Cortez et al., 2018), they perceived themselves as a burden, or a disappointment to their loved ones (Charbonnier et al., 2018).

A relevant finding was the relationship between internalized homophobia and suicidal ideation and attempt, as it implied the contradiction between "wanting to be" and "should be," which hindered the participants' experience of "coming out" (Baiocco et al., 2014; Charbonnier et al., 2018; Pineda-Roa, 2019), the feelings that emerged were fear, uncertainty, stress and anxiety of being rejected or stigmatized (Baams et al., 2015; Ortiz-Hernández, 2005).

3. Victimization: experience of various types of violence.

The findings suggest the experience of violence such as discrimination in the family, school, neighborhood, and public and private institutions (Baiocco et al., 2014; Calvo, 2018; Hershberger et al., 1997; Irwin et al., 2014). Victimization suffered at school and in their nuclear family was the most common, leaving significant adverse sequelae in their mental state (Castillo, 2010; Grossman & D'Augelli, 2007; McCutcheon, 2017; Van Bergen et al., 2013). A recurrent scenario was school, where they habitually suffered bullying, which led to a need for flight or social isolation (Rivers et al., 2018). Other types of victimization were physical and psychological violence (Barboza et al., 2016; Granados-Cosme & Delgado-Sánchez, 2008; Ortiz-Hernández and García, 2005). The effects of victimization produced the need to isolate or hide (Martínez et al., 2019), which eventually caused feelings of sadness and belongingness because they considered themselves different (McCutcheon, 2017). In turn, subjects who were exposed to victimization experiences were more likely to present suicidal ideation or attempts (Baams et al., 2015; Barboza et al., 2016; Liu & Mustanski, 2012; Ortiz-Hernández & García, 2005; Russell & Joyner, 2001; Shield et al., 2012; Ybarra et al., 2015) and depression compared to those who have not experienced various violence (Baams et al., 2015; Burton et al., 2013; Shield et al., 2012).

4. Alcohol and drugs as predictors of suicidal ideation.

Findings suggest that substance use in the LGBT population was higher when there was a suicidal risk or suicide attempt compared to heterosexual subjects (Remafedi et al., 1991; Shield et al., 2012).

Several authors agree that alcohol and nicotine are the substances most frequently consumed by young people in their studies (Barboza et al., 2016; Fergusson et al., 1999; Lian et al., 2015; Ortiz-Hernández & García, 2005; Russell & Joyner, 2001). In addition, alcohol consumption is a predictor for suicidal ideation (Russell & Joyner, 2001; Silenzio et al., 2007). For Ortiz-Hernández (2005), alcohol consumption could be related to internalized homophobia and a negative perception regarding the transgression of gender stereotypes, a position from which homosexual men are thought of as feminine and lesbian women as masculine. Therefore, sexual minority subjects who negatively internalized these concepts and tried not to transgress gender stereotypes had a higher risk of alcohol consumption. Interestingly, bisexuals and lesbians had a higher alcohol consumption (21.0%) than bisexual and homosexual men (17.0%). Still, at the same time, the authors realized that comparing this scale with the results of other research on alcoholism in women in Mexico, bisexual and lesbian women have a frequency seven times higher of alcohol consumption compared to other groups of women (Ortiz-Hernández & García, 2005).

5. Mood disturbances and mental health impairment.

Findings suggest that before suicidal ideation, there were pre-existing symptoms of mental disorders (Binder, 2016; Rivers et al., 2018), the most common being depression, anxiety, and behavior disorders (Bolton & Sareen, 2011; Fergusson et al., 1999; Granados-Cosme & Delgado-Sánchez, 2008; Irwin et al., 2014; Mustanski, Garofalo, & Emerson, 2010; Ortiz-Hernández & García, 2005; Pérez, 2012; Russell & Joyner, 2001; Taliaferro & Muehlenhamp, 2017).

Depression increased the risk of suicidal ideation (Baiocco et al., 2015; Silenzio et al., 2007; Ybarra et al., 2015) due to the perception of being a burden to those around them (Baams et al., 2015).

Regarding suicide attempts, Hershberger et al. (1997) noted that having low self-esteem and perceived poor mental health were risk factors (Arcelus et al., 2016; Ybarra et al., 2015). Those who presented feelings of hopelessness (Martínez et al., 2019; Russell & Joyner, 2001), sadness and fear (Burton et al., 2013; Granados-Cosme & Delgado-Sánchez, 2008; Shield et al., 2012), feelings of guilt, fear of their sexual orientation being known, fear of being rejected by friends and family, hiding their sexual orientation, and shame were more likely to present mental disorders (Ortiz-Hernández, 2005).

6. The younger the age, the greater the risk of suicidal ideation.

A topic of interest in the study of suicidal ideation was age as a category of analysis. In other words, a risk factor for suicidal ideation and-or the attempt; is age. As younger, the risk is higher (Lian et al., 2015). Teixeira-Filho and Rondini (2012) found in their research that the population that obtained higher scores in suicidal ideation was in an age range between 14 and 16 years, data corroborated by Pineda-Roa (2019), who described that adolescents have up to 3 times higher risk of

suicidal ideation compared to other populations. This finding was correlated with the age of identification of sexual orientation (Pineda-Roa, 2019; Remafedi et al., 1991; Teixeira-Filho & Rondini, 2012), where the younger the age of questioning their own sexual identity, the higher the lifetime risk of suicidal ideation (Dirkes et al., 2016).

An example of the above is the research conducted by Ortiz-Hernández and García (2005), who analyzed the frequency of mental health harms in bisexuals, lesbians, and homosexuals in Mexico City and found that there was a higher prevalence of suicidal ideation and attempts (60.3% and 26.1%, respectively) in bisexual, lesbian and homosexual adolescents under 19 years of age compared to their adult counterparts who obtained prevalences of 35.7% and 13.7%, respectively.

7. Social and family vulnerability.

Lack of social (Baiocco et al., 2015; Barboza et al., 2016; Hatzenbuehler, 2011; Liu & Mustanski, 2012) or family support was a risk factor for suicidal ideation (Claybaugh, 2014; Dirkes et al., 2016; Fernandez & Vazquez, 2013; Lagazzi, 2016; Rivers et al., 2018). Perceiving a religious environment (Baiocco et al., 2014; Calvo, 2018; Rivers et al., 2018) where homosexuality is believed to be unnatural, and that should be punished, within the primary nuclei, such as family, school, work, and religious centers led LGBT subjects to hide their sexual orientation (Fernandez & Vazquez, 2013; Lagazzi, 2016) for fear of being rejected (Castillo, 2010), as subjects perceived themselves as a negative burden to the family, cause of shame, or felt they were failing their parents by not complying with heteronormative norms (Baams et al., 2015; Fernandez & Vazquez, 2013; Lagazzi, 2016; McCutcheon, 2017).

Hershberger and collaborators (1997) found in their research that those subjects who had more openly disclosed their sexual orientation, and lost more friends because of these disclosures, reported suicide attempts to a greater extent.

Other risk factors were having been sexually abused (Dirkes et al., 2016; Ortiz-Hernandez & Garcia, 2005; Pineda-Roa, 2019), going through a close bereavement (Rivers et al., 2018), having a friend or family member have previously attempted suicide (D'Augelli et al., 2001; Lian et al., 2015; Rotheram-Borus et al., 1994; Russell & Joyner, 2001), having observed an acquaintance being physically or verbally assaulted because of their sexual orientation (Ortiz-Hernandez & Garcia, 2005), low education (Baiocco et al., 2015), economic instability (Grossman & D'Augelli, 2007; Irwin et al., 2014), or poor (Barboza et al., 2016).

8. Family and social support were protective against suicidal ideation.

The literature suggests that suicidal ideation decreased when subjects were in a family environment that was supportive and accepting of their sexual orientation (Barboza et al., 2016; Charbonnier et al., 2018; Dirkes et al., 2016; Eisenberg & Resnick, 2006; Taliaferro & Muehlenhamp, 2017; Teixeira-Filho & Rondini, 2012;), when they belonged to LGBT environments, as this helped to feel identified with other subjects going through similar situations to them (Rivers et al., 2018). Likewise, connection and care by other adults and friends (Eisenberg & Resnick, 2006; Taliaferro & Muehlenhamp, 2017), feeling a safe school environment (Eisenberg & Resnick, 2006; Taliaferro & Muehlenhamp, 2017; Teixeira-Filho & Rondini, 2012); and finally, having received

psychological counseling (Barboza et al., 2016) were protective against suicidal ideation.

9. Tendency to develop self-injurious behaviors.

Self-injurious behaviors were more prevalent in the LGBT population than in the heterosexual population (Bostwick et al., 2014; Taliaferro & Muehlenhamp, 2017). These behaviors were derived from various factors, such as mental disorders, being a victim of discrimination, violence, or having experienced homophobia (Arcelus et al., 2016). One of the most frequent self-injurious behaviors was cutting, which had two functions: self-punishment when the subjects considered that their sexual orientation was a mistake; and as a consequence of the homophobic behaviors, they experienced (Binder, 2016; Castillo, 2010).

Even those engaged in self-injurious behaviors reported more mental health problems, emotional dysregulation, rumination, personality disorder symptoms, and depressive symptoms (Binder, 2016).

On the other hand, Taliaferro and Muehlenhamp (2017) highlighted that having a good relationship with parents, feeling cared for by other adults, and a good school environment decreased the possibility of presenting recurrent non-suicidal self-injurious behaviors.

DISCUSSION

The literature on experiences and meanings surrounding suicide attempts in the LGBT population was characterized by being eminently quantitative. Its authorship mainly was Anglo-Saxon, aimed at comparing it with the heteronormative population to identify the most significant risks.

The following themes emerged: 1) greater vulnerability than the heterosexual population; 2) internalized homophobia and rejection of one's sexual orientation; 3) victimization, i.e., the experience of various types of violence; 4) alcohol and drugs as predictors of suicidal ideation; 5) mood alterations and mental health impairment; 6) the younger the age, the greater the risk of suicidal ideation; 7) social and family vulnerability; 8) family and social support were protective against suicidal ideation; and finally 9) tendency to develop self-injurious behaviors.

The literature on experiences and meanings about suicide attempts in the LGBT population is consistent with findings on risk factors for suicidal behavior, such as the lack of support from their primary nuclei, among which family, school, jobs, and friends stand out (Baiocco et al., 2014; Castillo, 2010; Fernández & Vázquez, 2013; Lagazzi, 2016; Rivers et al., 2018; Van Bergen et al., 2013), by assimilating stigmas, conceptions and beliefs that can generate distress about coming out, avoiding being discovered, denying their sexual orientation for fear of being judged, punished or believing that if discovered they would be failing and embarrassing their family members. Other risk factors are the various types of violence they experience for being part of the community, affecting the different spheres of life, where socially they may suffer isolation by their peers or voluntarily isolate themselves as a mechanism to avoid being discovered and avoid experiencing some type of violence (Calvo, 2018; Castillo, 2010; Granados-Cosme & Delgado-Sánchez, 2008; Van Bergen et al., 2013).

Internalized homophobia has been a recurring theme in many investigations; it consists of the assimilation of negative beliefs that revolve socially around the community playing an aggressive role towards themselves and towards people of the

same neighborhood. These actions can lead them to self-punishment and denial of themselves due to the contrast between what they want to be and what is socially allowed to be (Ortiz-Hernández & García, 2005; Pineda-Roa, 2019). The relationship between substance use and suicidal ideation or attempt was recurrent in the results of investigations (Ortiz-Hernández & García, 2005; Remafedi et al., 1991; Russell & Joyner, 2001). Regarding age, findings suggest that younger people present a higher risk of suicide attempts (Lian et al., 2015; Pineda-Roa, 2019; Remafedi et al., 1991; Teixeira-Filho & Rondini, 2012).

Although the literature on experiences and meanings may yield similar findings to the literature on risk factors for suicide attempts, it is essential to note that epistemologically they are based on different paradigms; the works analyzed had experiences and meanings as the object of study; however, in general, we can say that most of the papers did not attempt to give voice to participants; therefore, we consider this to be a strong methodological limitation. A topic of interest would be to approach experiences and meanings from an emic stance (Chapman & Kinloch, 2011). From this perspective, participants are given a voice from their life experiences. Another methodological aspect worthy of attention is that several authors did not disclose how they carried out the sampling and contact processes; the omission of these details can negatively impact the quality of the work (Day, 2005).

On the other hand, there were recurrent works aimed at comparing heteronormative and non-heteronormative populations; in this sense, it is essential to highlight that it was common that authors tended to include in the label "non-heteronormative" people with different generic characteristics; which leads to a limited analysis of the phenomenon from a gender perspective, and that could have an impact on reproducing "heterosexist models" (Burrola, 2007).

From this perspective, the power of the meanings and uses of words is analyzed because they reflect the social distinctions, powers, and resistances that lead us to construct and conceive the world. In this sense, heterosexism is conceived as an identity system; that is, "the heterosexual" and "the others," then heterosexism remains as an absolute identity and the only language system that frames the differences, "heterosexual," "non-heterosexual," "inside," "outside," "complete," "lacking" (Núñez, 2013).

Finally, few studies with the Mexican population were identified, which is of great importance due to the magnitude of the problem at the national level.

CONCLUSION

The literature review allowed us to identify that most of the studies on the experiences and meanings surrounding suicidal ideation were conducted in Anglo-Saxon populations and tended to compare "heteronormative" with "non-heteronormative" populations through quantitative designs.

The publications analyzed revealed a greater vulnerability compared to the heterosexual population. There is an internalized homophobia and even a rejection of their sexual orientation by people identified as LGBT, which, together with social and family vulnerability, fueled the experience of various forms of violence in different areas of their lives. In addition, alcohol and drugs were predictors of suicidal ideation. These living conditions favor mood alterations and affect mental health. Similarly, the younger the age, the higher the risk of

suicidal ideation, and in some cases, a tendency to develop self-injurious behaviors was identified. However, it is essential to note that family and social support were protective against suicidal ideation.

It was identified that few authors used the categories recognized within the LGBT community to describe its participants. The most commonly used category was "non-heteronormative population," which included different participants, gender identities, and sexual preferences; however, for a deeper understanding of the phenomenon, a more precise description of its participants, either by orientation or gender identity, is necessary. Most of the works on experiences and meanings did not give voice to their participants; several authors did not disclose how they carried out the sampling and contact processes.

Suicide is an issue of great relevance within the mental health of individuals. Unfortunately, it is a phenomenon that in recent years has been on the rise. Essential research efforts have shed light on different risk factors, including prevention, the role played by ideation and attempt in the suicidal act, which is why we consider the need to understand the phenomenon from the voice of the people who live with this risk.

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