

# Alcohol and suicide: insights from LGBTQ+ communities' experiences

Eva Bell, Participation Officer, Samaritans  
Holly Wood, Policy Officer, WithYou

**SAMARITANS**



# What we will be talking about today

- Suicide Prevention Consortium overview
- What we already know alcohol and suicide
- Why we explored LGBTQ+ people, alcohol and suicide
- Our findings and recommendations from our recent report - *Alcohol and suicide: insights from LGBTQ+ communities' experiences*
- What we are doing next with this work



# Suicide Prevention Consortium

- Suicide Prevention Consortium: led by Samaritans and includes National Suicide Prevention Alliance (NSPA), Support After Suicide Partnership (SASP), and WithYou (a charity that offers free, confidential support to people in England and Scotland who have issues with drugs, alcohol or mental health)
- Part of the VCSE Health & Wellbeing Alliance for 2021-25
- Aim: suicide prevention is prioritised in England as an inequalities issue.



# Alcohol and suicide

- **There is no 'one-size-fits-all'**. The best support people received acknowledged their personal circumstances and made them feel trusted and listened to. Unfortunately, many people did not receive this level of care.
- For many people, **alcohol is part of a bigger picture**. They described drinking alcohol as a way of coping with issues involving their mental health, trauma or suicidal thoughts.
- Some **people who had attempted suicide were dismissed** or judged by healthcare staff due to drinking alcohol.
- **There's a need for further exploration of people's experiences** of alcohol and suicide, so that voices of lived experience are at the centre of policymaking.



# LGBTQ+ people, alcohol and suicide

- There is a relationship between alcohol use and increased suicide risk, associated with the impact of long-term alcohol use and the immediate effects of drinking.
- We know that risk of self-harm and suicide is higher for people in LGB+ communities than people who aren't, and higher for trans people than cisgender people.
- LGBTQ+ people are also more likely to experience alcohol-related harms.
- Being LGBTQ+ does not in itself increase risk of suicide and alcohol related harms, but many LGBTQ+ people may experience additional stressors including but not limited to discrimination, victimisation, isolation and barriers to general help-seeking behaviours, which can increase their suicide risk.

**We interviewed 13 people and they identified with a diverse range of gender and sexualities, including five different genders, and eight different sexualities. They self-identified as drinking alcohol, not necessarily reporting dependency.**



# Finding 1: On personal identity

**Identity and circumstance is complex, nuanced and highly personal. This is reflected in people's lived experience of drinking alcohol and suicidality or self-harm and is a vital factor to be considered in effective support.**

“On some occasions I had deliberately drunk alcohol because I knew it would lower my inhibitions. It would make me more likely to do something to harm myself.”

“With the multiple identities I couldn't speak to the doctor, it was this and that. I'd, you know, taken much time to fill out some forms. My answer couldn't fit into the box.”



# Finding 2: On society's expectations

Cis-heteronormativity and LGBTQ+phobia were pervasive and significant for some participants in their experiences of drinking alcohol, suicidality and self-harming, and seeking support.

“ I felt really isolated and marginalised and I'd been hating myself because of that, I've used alcohol to connect me with feelings of a better self. ”

“ I asked him what the relevance was of my marriage to a psychiatric appointment and my suicide, he really got hostile with me, and that was when the whole meeting ended up being quite traumatic. ”



# Finding 3: On the role of community

Community and connection was important for many participants' sense of belonging and was one central mechanism influencing their experiences with drinking alcohol.

“ I think you risk being, like, a little bit isolated from the community if you don't drink or don't like to be around drinking. ”

“ I think that's [LGBTQ+ drug and alcohol group therapy] probably the place where I've, over time, brought so many different things and taken in so many other different things from people. ”





# What we want to see

1. When looking to provide suicide prevention support for LGBTQ+ people a variety of health support needs must be met in a holistic and integrated manner.
2. LGBTQ+ people should not be made to justify their gender or sexuality and should instead be met with inclusive and non-judgmental understanding of their experiences of suicidality, self-harm and drinking alcohol.
3. Both formal LGBTQ+ specific services and informal spaces and support within LGBTQ+ communities have an important role to play in ensuring that LGBTQ+ people have effective support regarding suicide, self-harm and alcohol use.



# What we are doing next

- Our upcoming report *Insights from experience: Support pathways for alcohol issues and suicidal ideation* will explore in more detail the lived experience of people who have tried to access support for alcohol issues **and** suicidal ideation
- This work follows from consistent findings in our other research projects that significant barriers remain for people seeking support for more than one issue at a time
- We have conducted a survey and a set of interviews with people with lived experience, exploring what has worked well, what hasn't worked, and what they'd like to see changed in the system

***I was lucky to be offered anything, but I still wasn't given the correct treatment for a few years.***

*I once had an appointment with a mental health worker who informed me I was fine because I had arrived early, on my own and was immaculate.... **This type of judgment just pushes me to keep my problems to myself.***



# Thanks for listening

Both our reports on this topic can be found on our website and this is where we will host our upcoming report: <https://www.samaritans.org/about-samaritans/research-policy/alcohol-suicide/>



Contact:

Eva Bell, Participation Officer,  
Samaritans, [e.bell@samaritans.org](mailto:e.bell@samaritans.org)

Holly Wood, Policy Officer  
WithYou, [holly.wood@wearewithyou.org.uk](mailto:holly.wood@wearewithyou.org.uk)



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