An Artistic-Narrative Process for Reducing Suicide Risk Among Minority Stressed Individuals

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Abstract: Introduction: There are many risk factors for attempting suicide, including young age, "minority stress," which would include Transgender and Gender Diverse orientations (TGD). The rate of TGD youths for suicide attempts is 3 times higher than heterosexual cis-gender youth. Half of TGD youth have seriously contemplated taking their own lives; of those, about half attempted suicide; and 18% of the TGD teenagers reported suicidal thoughts linked to their gender identity. Native American TGD have a six times higher suicide attempt rate. Conventional mental health has not generally helped these individuals. Stigma and discrimination contribute to healthcare disparities. Storytelling plays a crucial role in the development of human culture and individual identities. Sharing narrative artwork, creative writing, and personal stories allow people to build trust and to share their vulnerabilities. This helps people become aware of themselves in relation to others and gain a sense of comfort that their stories are similar; they may also be transformed in the process. Art provides a means to reach people who are otherwise difficult to engage in services. Methods: TGD individuals are recruited through a snowballing procedure. Following a life story interview, participants complete a scale of gender dysphoria, identification with conventional masculinity, patient-reported anxiety, and depression measure, and a quality-of-life scale. The interview completes the Columbia Suicide Scale. Following this, an artist and a therapist works with the participant to create a story related to their gender identity using the six-part story method. This story is then rendered to an artists' book, which combines narrative with art (drawings, collage, computer images, etc.) and can take the form of a graphic novella, a zine, or a comic book. The pages can range from plain to ornate, as can the covers. Participants describe their process of making the books as the work unfolds and then participate in an exit interview at the completion of their book, remarking on what has changed for them and how the process affected them. Results: Preliminary results show high levels of suicidal thoughts among this population, as expected. Participants participate enthusiastically in the life story interview process and in the construction of a story related to gender identity. They enthusiastically participate in the studio process of putting their story into the form of a graphic novel, zine, or comic book. Participants reported feeling more comfortable with their TGD identity after the process and more able to resist negative judgments of family members and society. Suicidal thoughts diminish, and participants reported improved emotional wellbeing. Quantitative analysis of questionnaire data is underway Conclusions: A process in which narrative therapy is combined with art therapy shows promise for attracting and helping TGD individuals to reduce their risk for suicide without the stigma of going for mental health treatment. This process can be done outside of conventional mental health settings, on college and University campuses. This can provide an exciting alternative pathway for minority stressed and stigmatized individuals to engage in reflective, psychotherapeutic work without the trappings of psychotherapy or mental health treatment.

Keywords: minority stress, narrative process, artists' books, life story interview

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