

# Suicidal ideation among men who have sex with men in Estonia

**Rüütel, K; Valk, A; Lõhmus, L.**

National Institute for Health Development, Tallinn, Estonia

Contact: kristi.ruutel@tai.ee, +372 659 3980

## INTRODUCTION

Many studies over the last decade provide strong evidence of **elevated rates of reported suicidal ideation and suicide attempts among gay populations compared to heterosexual populations** (Husky 2013; Marshal 2011; Wang 2012). Studies have linked the elevated risk of suicide attempts among gay men to higher rates of mental disorders, although there is increasing evidence that other factors – for example sexual orientation-related stigma, prejudice and discrimination – may also play a role (Haas 2011). There are no data on these issues among men who have sex with men (MSM) in Estonia. The aim of the current study was to investigate suicidal ideation, suicide attempts and related factors among MSM in Estonia.

## METHODS

We conducted an Internet-based survey among MSM in 2013. Eligibility criteria included:

- self-identified as male;
- living in Estonia;
- age 18 years and older;
- sexually attracted to men and/or have had sex with a man.

We used a self-completed questionnaire which included the following domains:

- socio-demographic data;
- sexual behaviour;
- health and HIV status;
- illegal drug and alcohol use (CAGE questionnaire) (Ewing 1984);
- short form of the Reactions to Homosexuality scale to measure internalized homonegativity (IH) (Ross 2013; Smolenski 2010);
- Emotional State Questionnaire (EST-Q) to measure depressive symptoms (Aluoja 1999);
- suicidality – participants' reports of 1) suicidal ideation (thoughts about suicide ever and in the last 12 months (L12M)), 2) suicide attempts (ever and in L12M).

## RESULTS

265 MSM completed the questionnaire with median age 31 years, 90% Estonians, 71% from capital city Tallinn and surrounding area; 73% working full-time, 42% with higher education; 83% were satisfied with their economical situation.

44% were in steady relationship with a man or woman; 76% considered themselves homosexual and 24% bisexual; 60% were satisfied with their sexual life.

46% had used illegal drugs in their lifetime and 23% in L12M. 33% were CAGE positive.

72% considered their health to be good and 28% poor; 13% had been diagnosed with depression and 10% with anxiety in L12M. Self-reported HIV-prevalence was 3%. 32% had depressive symptoms and 23% symptoms of anxiety above the EST-Q cut-off level. The mean IH score was 1.9 (SD 1.2; median 1.7). 42%/56%/30% reported that more than half of their family members/close friends/acquaintances know that they are interested in men.

14% had thought about suicide in L12M (45% in lifetime), 2% had attempted suicide in L12M (11% in lifetime). People with suicidal ideation ever and in L12M had significantly higher scores in CAGE and all EST-Q subscales. No significant differences were found in IH scores.

Multivariable logistic regression revealed that

1) **suicidal thoughts** ever in lifetime were related to:

- **more than half of their close friends knowing about their interest in men** (AOR 1.9; 95% CI 1.1–3.5);
- **depressive symptoms** above the EST-Q cut-off level (AOR 5.1; 95% CI 2.7–9.6);

2) **suicide attempts** ever in lifetime were related to:

- **alcohol use** – CAGE positivity (AOR 5.4; 95% CI 1.9–15.0).

## DISCUSSION

Our results reveal **high rates of suicidal ideation and mental health problems among MSM in Estonia**. They are in line with the previous studies among general population in Estonia and other countries which have proved a **strong link between mental health issues, substance use disorders and suicide**, especially between alcohol use disorders and suicide (Schneider 2009). Our findings also support the hypothesis **that suicidality among MSM might be associated** with developmental issues related to recognizing one's same-sex interests, **coming-out period and coping with subsequent social stigmatization and hostility** (Cochrane 2008; Meyer 2008; Paul 2002).

Our study used cross-sectional design which precludes assessment of the causal direction of associations between presumed predictors and suicidal ideation and attempts. They are not representative of all MSM in Estonia, as we used convenience sampling.

## CONCLUSIONS

**There is a need to develop specific interventions to address the mental health issues among MSM** and provide gay-friendly mental health services.