

**NORTH DAKOTA 2025**

# **State of the State Report** *FOR* **LGBTQ+ Youth**



The 2025 State of the State report for LGBTQ+ Youth is the first of its kind in North Dakota. It is a spiritual successor to the [2021 North Dakota LGBTQ+ School Climate Report](#)<sup>1</sup> but looks at significantly more systems that impact LGBTQ+ youth. It is a comprehensive review of state data across multiple systems, perspectives from various professionals, different types of organizations, and it represents both parent and LGBTQ+ youth voices.

This report serves to provide comprehensive education on outcomes we see for LGBTQ+ youth. It will give readers a very high level of understanding of the problems these youth face, why they face it, and a solution to move forward that requires no additional funding or personnel to achieve.

This report also comes with resources, essential printouts, and data primers to help professionals advocate for, educate on, and support North Dakota LGBTQ+ youth. While this report explores several different outcomes, it is focused primarily on suicide prevention. Every risk factor contributes to a higher level of suicidality, and our LGBTQ+ youth, especially our trans youth, are at significant risk.

This report and the solutions do not focus on acceptance but ask all invested stakeholders to prioritize and think about safety. While ideological and political beliefs may vary, while individuals may come up with different solutions to the problems our state faces, this report asks that people come together to assure that at the very least all of our kids are fed, safe, and loved.

## **This report was a joint effort between Harbor Health Initiative and Faye Seidler Consulting**



### **Faye Seidler - Faye Seidler Consulting**

Faye Seidler has been actively working to improve LGBTQ+ outcomes across North Dakota, especially within the K-12 setting, for over a decade. She did research into conducting effective LGBTQ+ process improvement training for North Dakota stakeholders in 2015, wrote a comprehensive article on North Dakota LGBTQ+ student outcomes in 2018, co-chaired the ND HHS LGBTQ+ Advisory Board in 2020, led the work on the 2021 LGBTQ+ School Climate Survey, and released the 2023 YRBS Summary Report. Her work currently focuses on suicide prevention across the state.

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### **Safe Harbor Project - Harbor Health Initiative**

The Harbor Health Initiative is an initiative to dramatically improve cultural competency and offered services throughout the state. It hosts the LGBTQ+ Directory, which includes every affirming doctor and mental health specialist, as well as other resources like support groups, activity groups, faith organizations, and more. It started the Safe Harbors Project as a way to create intentional and intersectional approaches to address the issues of safety for LGBTQ+ Youth, support to reduce secondary trauma of service professionals, and generates reports to measure outcomes.

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## Author Notes

- There is a lot of heavy data in this report; please understand that going in. 988 is our crisis lifeline number.
- The data explored in the 2023 YRBS is weighted. There are always limitations within survey data. It is not an absolute. But it is the best information we have to understand experiences in this state. Most of this report is examining that data and filling in the blanks with my ten years of experience working with LGBTQ+ data and suicide prevention.
- We all do the best we can with the information we have. Please do not feel guilty if this report allows better understanding of some of the reality of youth experiences in our state. To quote Maya Angelou, "Do the best you can until you know better. Then when you know better, do better."
- Be kind to yourself. We are a state of nearly 800,000 people. There is only so much any one of us can really do. We work so hard, often with little support, little funding, and expectations we can never meet. Every day we show up matters. Every day we try to make tomorrow better than today matters. And while we often think about our shortcomings, because we are not perfect or set up for success, think about how much worse today would be if you weren't in it. You are valuable. Your work matters. You matter. Be kind to yourself.
- When the world feels big, look to the small things in your life, like a warm bath or nice meal. When the world feels too small, look at all the amazing helpers doing great work in our state. As you read this report, know there is hope and a brighter future that we can find.

## Acknowledgements

On a personal note, I'd like to thank Cindy Roholt, who taught me how to use a spreadsheet a decade ago. Harbor Health Initiative and the original 2021 LGBTQ+ School Climate Survey would not have been possible without Cody Severson helping to found the Community Uplift Program in 2016.

Special heartfelt thanks to Olivia with Bismarck Student's GSA, Alyssa, Zayden, and Lex with Bismarck Qspace, and Matthew with Youthworks for giving kids hope for so many years. My work supports the professionals who are actually out there saving lives and inspiring hope.

On a professional level, I am always extremely grateful for the work that FirstLink, Red River Child Advocacy Center, and Youthwork do to interrupt trauma and save lives. If you wish to donate somewhere, they are the heroes who I wish I had when I was a kid.

In the world of data, I'd like to thank Matt Schmidt for being an incredible program coordinator for our YRBS and BRFSS data sets and Kodi Pinks for generating incredible state data on suicidality. Xanna Berg for their fantastic work tracking similar data through Kids Count. And the team at ND HOPES

In the world of suicide prevention, I'd like to thank Melissa Markegard, who has done an incredible job as our state suicide prevention administrator, and Sarah Kemp Tabbut for doing so much work connecting and leading various suicide prevention coalitions across the state. And in general, the AFSP of ND, NDSPC, and the Cass and Clay Suicide Prevention Coalitions.

And finally, I would like to personally thank Mark Winkelman, who has been the reason I've been able to track data for LGBTQ+ youth on the YRBS. His data has been the basis for the majority of my important work in North Dakota. Reviewing his data and attempting to find solutions to it has led me to where I am today. Nobody is an island. Collectively, the folks I've mentioned here and countless others who have impacted my life allow me to be the advocate I am for suicide prevention. And thank you for the person reading this report. It took me over a hundred hours to assemble, but if it means I can help just one person, it was worth it.

*Faye Seidler*

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## Executive Summary

In nearly every way that we measure outcomes, LGBTQ+ youth are at more risk and often at exponentially more risk. Not only are their experiences of trauma higher, but they are often less likely to have access to fundamental needs like food, housing, and love. These outcomes are invisible to most of our systems; our state has no direct intervention for support and, at times, is hostile to helping these kids out. These youth are experiencing so much hardship that LGBTQ+ related minority stress has an observable impact on the negative outcome data that is measured for the whole population.<sup>2</sup>

## Key Points for LGBTQ+ Youth

### Demographics

- 9,667 Lesbian, gay, bisexual, other, or questioning students in middle and high school (19% of Students)
- 2,226 Transgender or students questioning gender identity in middle and high school (4% of Students)

### Suicide, Safety, and Self Harm

- Significantly more likely to self harm, have suicidal ideation, make a plan, and attempt suicide
- More likely to experience sexual violence, intimate partner violence, and bullying
- Significantly more likely to not feel safe at school, miss school for feeling unsafe, or bring weapons to school

### Substance Use

- Significantly more likely to try every substance at a younger age and to binge those substances
- More likely to live with someone with a drug problem

### Sex Education & Wellness

- Less likely to use protection like condoms, while being more sexually active, and having sex at younger age
- More likely to get sex information outside of school

### Weight, Diet, Physical Activity

- Less likely to engage in healthy eating habits
- Significantly more likely to report going hungry at home
- More likely to not be physically active

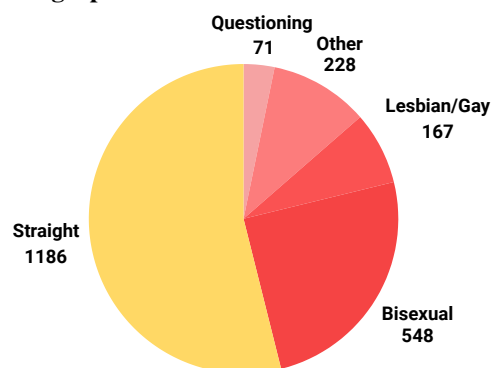
### Social Capital + Mental Health

- Significantly more likely to struggle with mental health, focus, and grades
- Significantly more likely to have unstable housing or be kicked out/abandoned
- Less likely to have adult they can talk to for middle school LGBTQ+ youth in particular
- Significantly less likely to get help they need when they reach out

## Understanding Disparities

Figure 1.1 represents the makeup of the actual number of students who reported a suicide attempt. It can be easy to see LGBTQ+ students are at higher risk, but what can be lost is that they sometimes make up nearly half of all incidences of bad outcomes. This is important when considering the approach to population intervention, because if LGBTQ+ youth aren't targeted, nearly half the population is being missed by the effort. This breakup will be different across each question.

**Figure 1.1 Suicide Attempt Numbers in High School by LGBTQ+ Demographic**



## Introduction

The Youth Risk Behavior Survey (YRBS) is a national system of surveys used to monitor behaviors in school-aged children that can lead to poor health outcomes. North Dakota has conducted the YRBS in partnership with the Centers for Disease Control and Prevention (CDC) since 1995. On odd-numbered years, ND students in grades 7-8 and 9-12 are administered a voluntary, anonymous survey questionnaire. Schools, teachers, public health professionals, community leaders, and policymakers in North Dakota use YRBS data for decision making, evaluation, and planning.<sup>3</sup>

This report focuses on LGBTQ+ data split between sexual orientation and gender identity. It includes straight students as a contrasting demographic to highlight the disparities that exist due to LGBTQ+ minority stress and their compounding risk factors. It will also serve as a comprehensive collection of all state LGBTQ+ data.

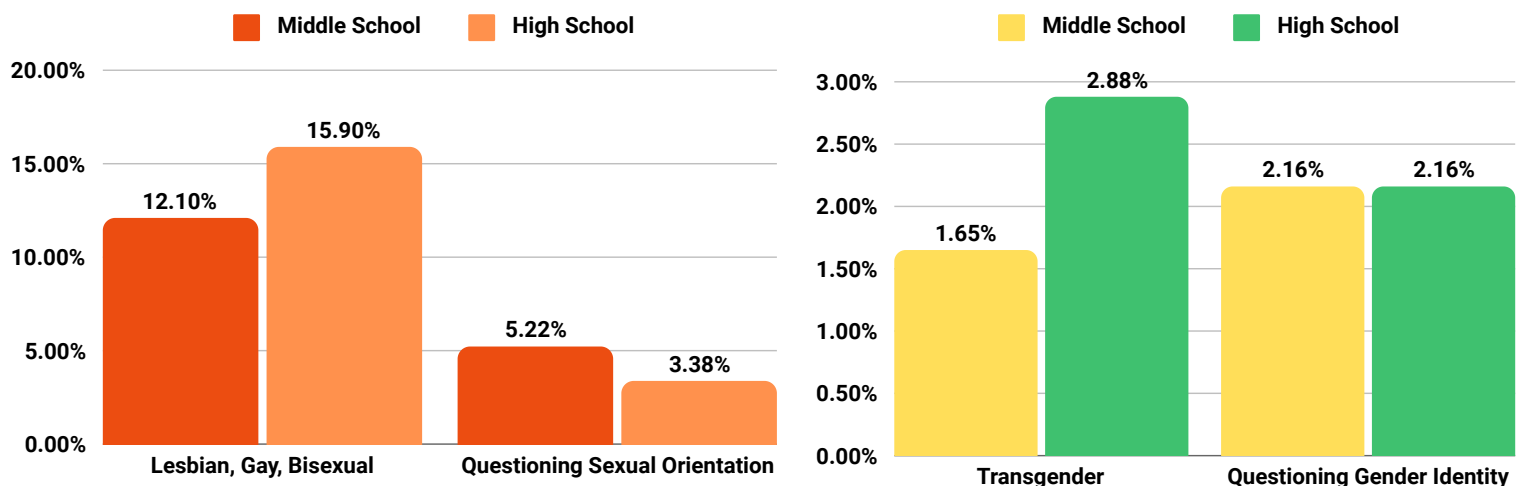
Throughout this report, there will be comparisons with other data sources, both local and national:

- YRBS data from 2021, 2019, and 2017
- Trevor Project Survey 2022
- ND 2024 Spring ACHA-NCHA III (College Health Assessment)
- North Dakota Violent Death Reporting System (2022 - August, 2023, Under 18) NVHDRS
- FirstLink Call Center Data (2023-2024: Any Age) + Trevor Project Call Data (2022)

## Demographics

LGBTQ+ students make up approximately 20% of the student base, as seen in Figure 1.2. Students who answered that they were heterosexual (straight) accounted for 77% of both middle and high school students. When applying these statistics to the total population, there are approximately 7,595 LGB students and 1,284 trans students in our middle and high schools, not accounting for students still questioning their sexual orientation or gender identity.

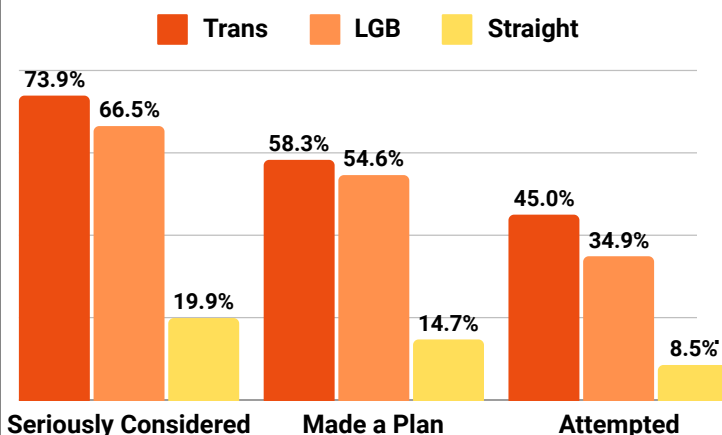
**Figure 1.2 Middle and High School LGBTQ+ Demographic Breakdown by Percent**



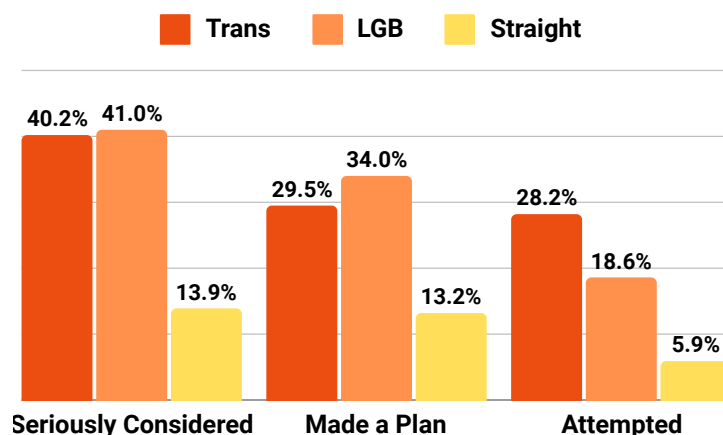
## Suicide and Self Harm

Suicide is complex and multifaceted; there is no single cause for suicide. It is best to understand the cause of suicide as a combination of contributing factors, often called risk factors. When considering LGBTQ+ populations, all data is considered for the purpose of if it ultimately relates to and impacts suicidality. LGBTQ+ populations are at disproportional risk for suicide, as seen in Figure 1.3 and Figure 1.4. Important to note, these are different questions. Middle school asks if a student ever made an attempt in their life, while high school asks about the last 12 months.

**Figure 1.3 Suicide Behavior for Middle School Students (Ever in Their Life)**

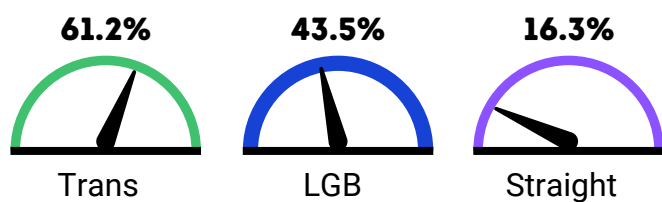


**Figure 1.4 Suicide Behavior for High School Students (12 Months Before Survey)**



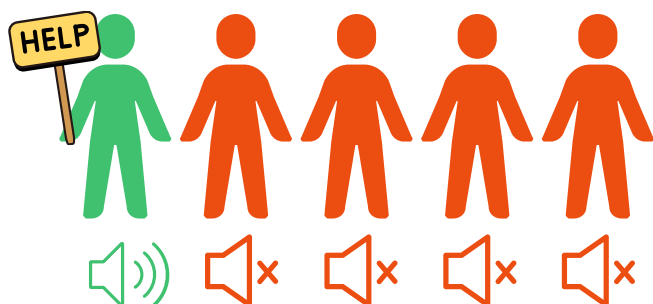
ND HOPES, an organization dedicated to reducing suicides for western North Dakota LGBTQ+ youth, wrote in a Data Brief, “From 2021 to 2023, the percentage of LGB and transgender middle school students reporting lifetime suicidal thoughts, planning, and attempts all increased.”<sup>4</sup>

**Figure 1.5 High School Students Who Have Self Harmed**



There is a unique question around self-harming behavior that was added to the high school 2023 YRBS, with results explored in Figure 1.5. While efforts around suicide prevention focus on suicide attempts or ideation, self-harming behavior shows an important and unique category for both behavior and risk. The self-harm numbers are significantly higher than suicide attempts, on par with suicide ideation, and significantly higher for trans students. Which is not uncommon for untreated gender dysphoria.

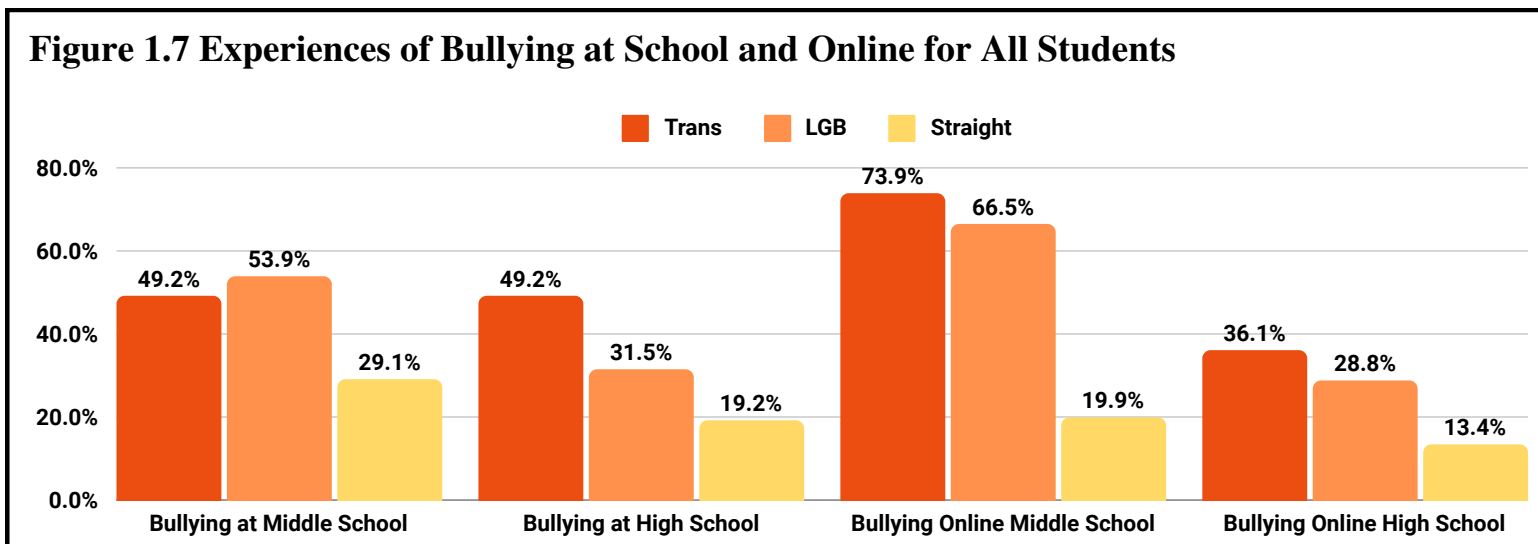
**Figure 1.6 High School Students Who Reached Out for Help (Doctor/ Counselor/Hotline) Before Suicide Attempt**



Another question was added, asking if our students reached out for help from a professional before a suicide attempt. In Figure 1.6 it shows that only one in five of our students did so. This was consistent for trans, LGB, and straight students. This indicates our suicide attempt numbers for youth are four times greater than what we have recorded.

## Physical Safety & Sexual Violence

While experience of physical or sexual violence is a risk factor for suicide, it can also be a risk factor for dropping out, lower grades, more anxiety or depression, and so on. Suicidal ideation can increase risk-taking behavior, which can result in experiences that lead to further trauma. When considering the data within this section and future sections, think about how it can interconnect and how risk factors can cascade off each other. All together, bullying impacts a majority of middle school LGBTQ+ students, as seen in Figure 1.7



The High School YRBS specifically asks if youth are bullied because others thought they were part of the LGBTQ+ community. While 57% of trans students and 42% of LGB students said yes to this question, 8% of straight students identified being bullied for the perception they were part of the LGBTQ+ community. This means approximately an equal amount of straight students to LGBTQ+ students are being bullied with anti-LGBTQ+ sentiment and are likely to experience similar increases to their risk factors.

The high school YRBS also asks a number of additional questions around safety, including if students carried a weapon, missed school because they felt unsafe, and experiences of sexual or intimate partner violence, as seen on Table 1. While bullying does go down significantly from middle school to high school, this may not indicate simply less bullying behavior, but also youth learning how to avoid bullying by avoiding school and peers or trying to hide. LGBTQ+ youth are disproportionately impacted by sexual violence, something more likely for youth who are isolated from support and trusting adults.

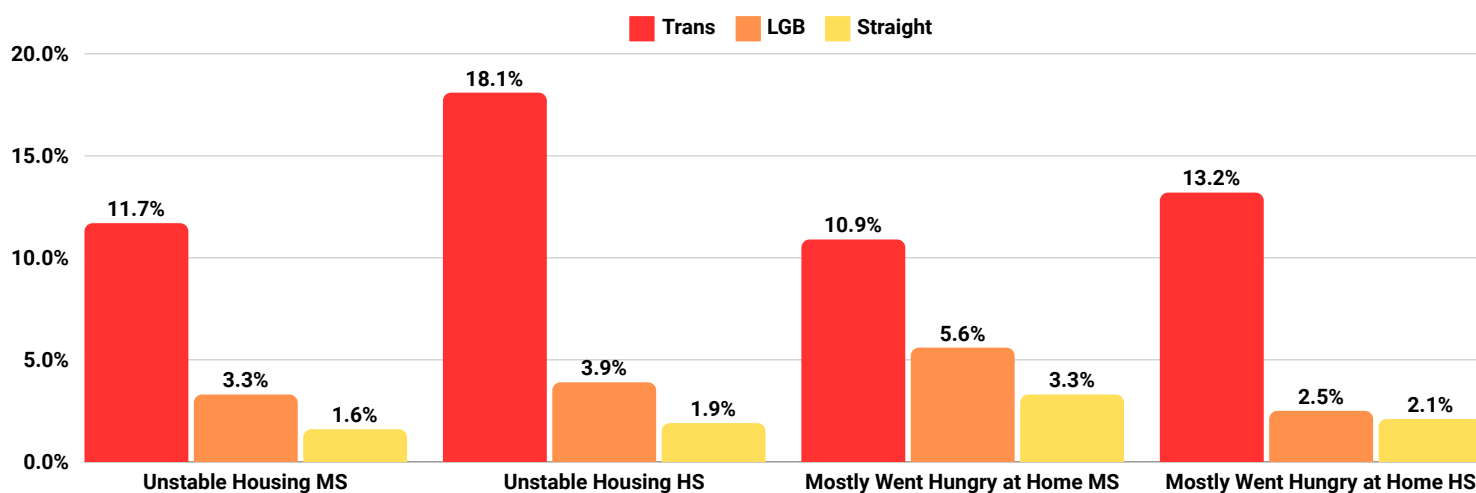
Table 1.1 High School Safety and Intimate Partner Violence	Trans	LGB	S
QN12 - Carried a weapon at least one day in last 30	11.8%	3.8%	4.1%
QN14 - Did not go to school because felt unsafe at least one day in last 30	37.0%	12.2%	6.3%
QN97 - Students who drank alcohol or used drugs before having sex	44.3%	28.4%	8.3%
QN94 - Someone they were dating purposefully tried hurting them	44.9%	33.9%	24.6%
QN95 - Someone they were dating forced them to do sexual things	9.0%	4.5%	2.0%
QN117 - Sexually revealing photos of them texted/posted without permission	17.5%	7.1%	1.7%
QN20 - Experienced sexual violence in their life	31.7%	16.6%	8.0%



## Social Capital: Home

Not all risk factors or experiences of trauma will impact an individual the same. Resiliency is how we understand someone’s ability to tolerate trauma. There is not a clear measurement of how resilient an individual might be, but protective factors help to keep youth resilient against risk factors. Protective factors against abuse or suicide in previous sections can be family, trusted adults, or good mental health. Unfortunately, LGBTQ+ youth experience heightened risk factors across every measurement, starting with their home as seen in Figure 1.8.

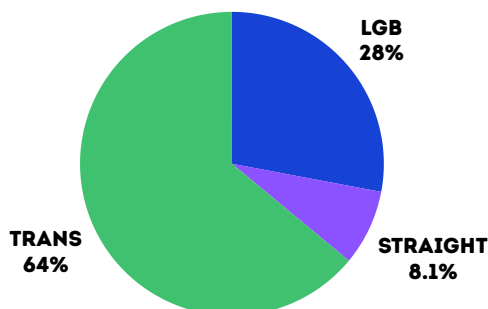
**Figure 1.8 Home Stability for Middle and Highschool Youth by LGBTQ+ Identity**



While there isn’t a question to measure family income, an expected risk factor for unstable housing or hunger at home would be financial security. A person’s sexual orientation or gender identity should not impact the food available to them or if they have housing needs. The question for middle school students asked if they usually did not sleep at their parents, while the high school question asked just about unstable housing. These students should have the same family dynamics and problems typical to straight students, therefore the discrepancy is likely influenced by minority stress in some capacity.

The question on hunger could indicate youth who do not expect support from parents nor ask for it. Their needs might not be getting met because they don’t communicate them to their parents. While there may be multiple reasons for this to occur, there must be specific reasons why there is a noticeable discrepancy between straight and LGBTQ+ populations.

**Figure 1.9 Demographic Breakdown of Students Kicked From Home**

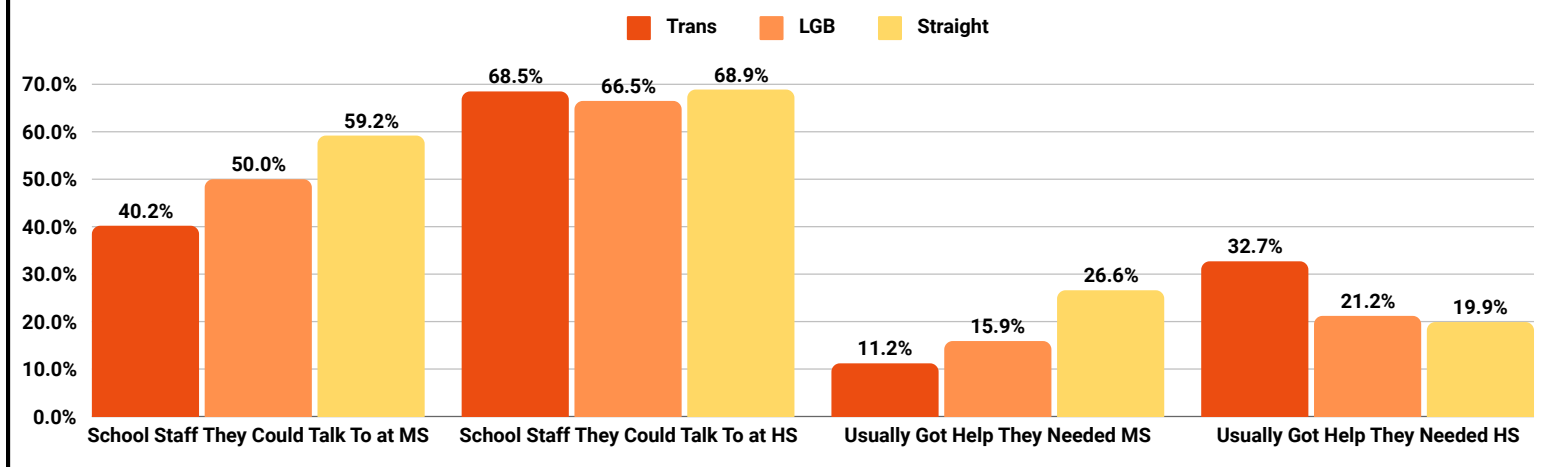


High school YRBS specifically asks youth if they were kicked out, ran away, or abandoned. Figure 1.9 shows demographic breakdown from those who were. This means if all demographic population sizes were equal, trans individuals make up 64% of youth kicked out. This is to help illustrate the extreme disproportional representation of LGBTQ+ demographics for these risk factors. If home isn’t safe, where do they go?

## Social Capital: School

The Physical Safety and Sexual Violence section already looked at dangers that exist within schools for students. It would likely be impossible to eliminate all negative outcomes that can occur, but what matters is how schools can respond to and mitigate those situations. This is one of the few data points across the entire YRBS that trends favorably for trans students, specifically high school trans students identifying getting the help they need when asking for it. Figure 1.10 looks at both youth having someone they can talk to and if they usually feel like it helped them.

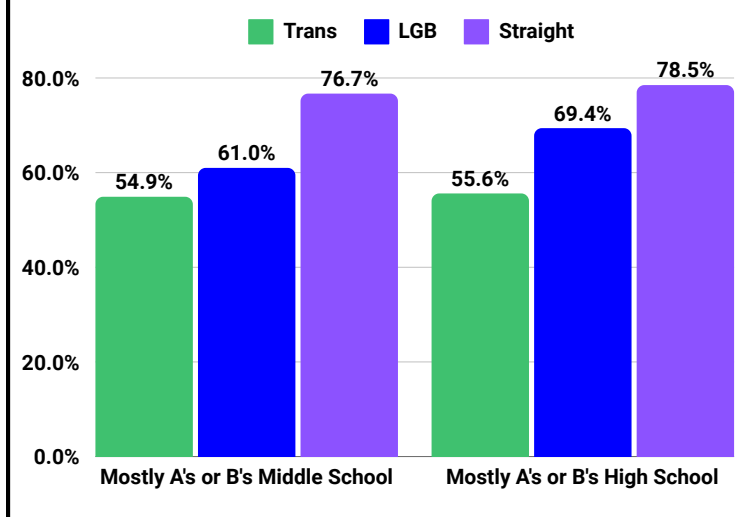
**Figure 1.10 Students Seeking and Receiving Help**



This is another set of data where we see one of the bigger discrepancies between middle school and high school transgender youth. While most high school students have one adult they can talk to, middle school LGBTQ+ youth are less likely to have that social capital or get the help they need.

When thinking about safety, bullying, or capacity to get help the immediate concern can be around mental health and by extension suicide. What is often missed is its direct impact on school investment and performance.

**Figure 1.11 Students Perception of Grades in Middle and High School**



There is a sharp decline for students who report mostly A's and B's for LGBTQ+ students compared to straight students, as seen in Figure 1.11. This reduction of grades could suggest less investment in the school itself, less interest and ability to go to college, and have profoundly negative impacts on the rest of their lives.

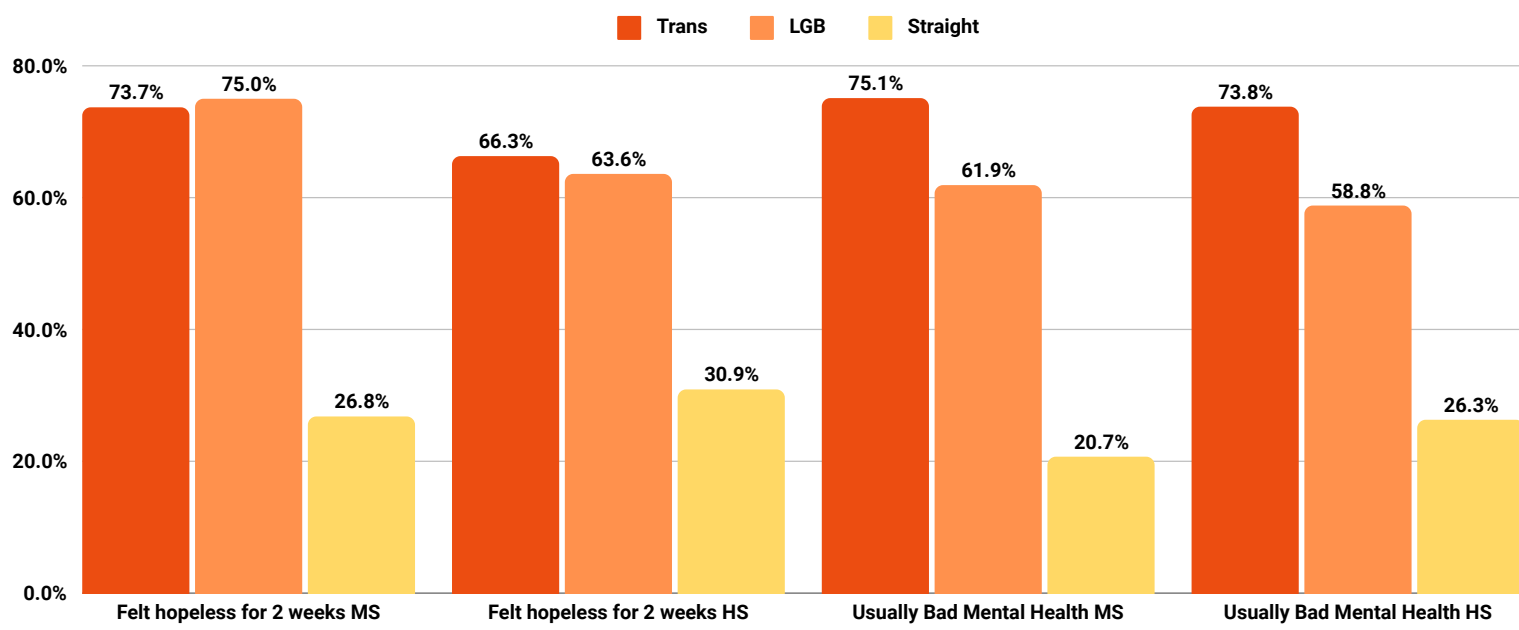
Since they're less likely to have stable homes, more likely to run away, more likely to miss school, and more likely to be hungry or concerned about their safety, they are not in optimal environments to learn. This appears to be reflected in the data.

## Mental Health

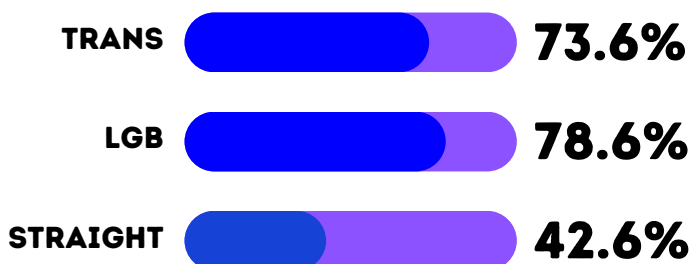
Given our LGBTQ+ students are struggling with bullying, sexual violence, not feeling safe at school or home, poor grades, lack of adults to talk to, and reporting not getting the help they need, their mental health also suffers. As identified across this report, each risk factor opens students up to further risk factors. Unstable housing or being bullied at school can reduce grades, which reduces investment in school or college, which can make students feel hopeless there isn't a future for them.

It can also become more and more challenging to help youth, who have experienced chronic abuse across their lives, where they don't fundamentally trust adults. The youth who reported they didn't usually get the help they needed when asking for it may be inclined to believe nobody is equipped to handle any of their problems. While LGBTQ+ youth experience unique cultural barriers that come with greater risk of parental rejection or violence, parents may create hostile homes by using anti-LGBTQ+ rhetoric, while not knowing their child identifies within the community. There is no data on how many LGBTQ+ youth are out to their parents in North Dakota. This all together leads to significantly worse mental health as seen in figure 1.12 below.

**Figure 1.12 Mental Health Outcomes for Middle and High School Students**



**Figure 1.13 Percentage of High School Students who Reported Difficulty Concentrating Due to Emotional, Mental, or Physical Problem**



While school can be a struggle for all students for any number of reasons, the minority stress specific to LGBTQ+ students is seen in the disparities across this report.

Figure 1.13 shows that these students are disproportionately impacted with difficulty concentrating. Many of these students are not in a learning environment, as much as simply trying to survive their environment every day.

## Substance Use

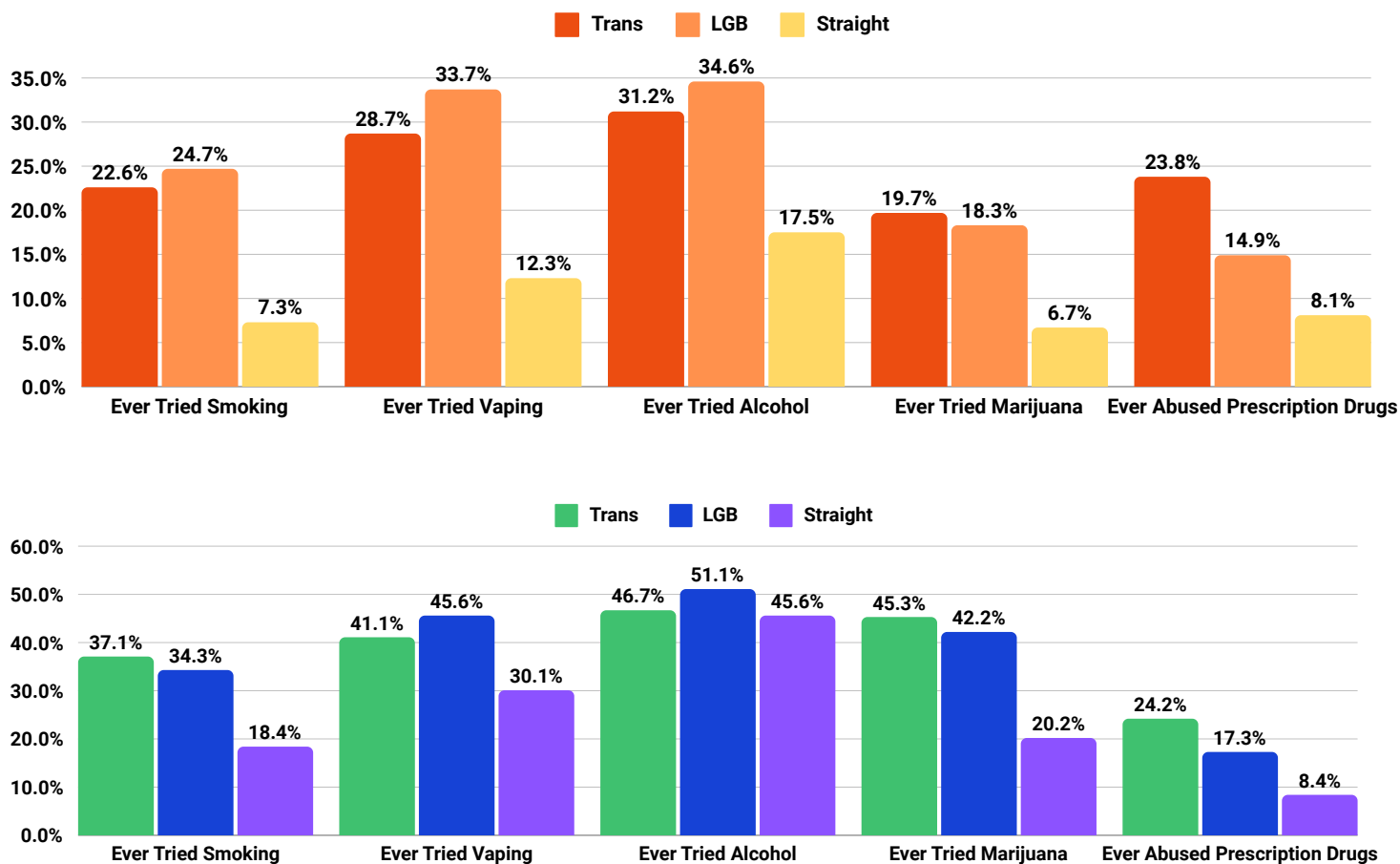
Professionals often associate substance misuse with delinquent behavior; however, it is much more likely used as medicine for youth to cope with the unaddressed trauma they experience. Within middle school, these are 13 to 15-year-old teenagers who are dealing with suicidality, sexual violence, and hopelessness who cannot identify adults to talk to about their problems.

When these youth are caught using substances, they can make up the excuse it was to be cool or fit in, instead of talking about mental health problems, LGBTQ+ identity, or suicidality. This creates a disconnect between adults who are attempting to help kids and the actual problem the youth may be experiencing.

Figure 1.14 below shows the amount of students in both middle and high school who have ever tried smoking, vaping, alcohol, or marijuana, or who abused prescription drugs. One fifth of LGBTQ+ youth have already tried all of these things by middle school, with the numbers getting worse by high school. While drinking is associated with partying, there is not a significant difference for straight youth and LGBTQ+ youth in high school around alcohol. While these outcomes are familiar they may not be measuring the same behavior.

This is a summary of YRBS data on ever using any substance, but collectively LGBTQ+ youth are more likely to try any substance, more likely to try it at a younger age, and more likely to use it in a higher quantity. Given these youth are also more likely to be homeless, they are more likely to face punishment for having it on them.

**Figure 1.14 Mental Health Outcomes for Middle and High School Students**



## Highest Discrepancies: Middle School

Nearly all data in North Dakota is measured without regard to sexual orientation or gender identity. To look at the public-facing 2023 YRBS Report, the middle and high school data is broken down by grade, sex, and race. When the analysis excludes 15-20% of a subpopulation, individuals who read it can very easily draw incorrect conclusions about the data they are looking at or how to address the problems. <sup>(5, 6)</sup>

First, without this report, the discrepancies for LGBTQ+ populations would be invisible to policymakers. Second, this is such a large amount of the population that it has a significant impact on the general data that North Dakota does use to make policy decisions. Regardless of policymakers feelings on LGBTQ+ identity, these youth exist. Ignoring the data does not make the harm they experience go away, and attempting to increase safety for this population does not have to mean changing personal beliefs.

### MIDDLE SCHOOL TRANS YOUTH WHEN COMPARED TO STRAIGHT YOUTH

- 2X MORE LIKELY to experience the bad outcome being measured across 43 out of 69 questions
- 3X MORE LIKELY to experience the bad outcome being measured across 27 out of the 69 questions
- 20X MORE LIKELY to misuse cigarettes chronically
- 10.5X MORE LIKELY to not drink water within week of the survey
- 4X MORE LIKELY to not get 60 minutes of physical activity within last the week
- 4X MORE LIKELY to attempt suicide
- 3X MORE LIKELY to go hungry at home because of no food
- 58% LESS LIKELY to get the help they need.

### MIDDLE SCHOOL LGB YOUTH WHEN COMPARED TO STRAIGHT YOUTH

- 2X MORE LIKELY to experience the bad outcome being measured across 32 out of the 69 questions
- 3X MORE LIKELY to experience the bad outcome being measured across 20 out of the 69 questions
- 13X MORE LIKELY to misuse cigarettes chronically
- 4X MORE LIKELY to attempt suicide
- 3X MORE LIKELY students who experience sexual violence by partner
- 3X MORE LIKELY to report bad mental health

### MIDDLE SCHOOL LGBTQ+ YOUTH'S IMPACT ON OUTCOMES FOR ALL STUDENTS

- 150% Increase for total students chronically smoking cigars (non-straight majority)
- 52.1% Increase for total students who attempted suicide
- 25.0% Increase for total students who experience sexual violence by partner
- 40.0% Increase for total students did not drink water within a week of survey

## Highest Discrepancies: High School

### HIGH SCHOOL TRANS YOUTH WHEN COMPARED TO STRAIGHT YOUTH

- 2X MORE LIKELY to experience the bad outcome being measured across 52 out of 123 questions
- 3X MORE LIKELY to experience the bad outcome being measured across 30 out of 123 questions
- 13X MORE LIKELY to misuse cigars/inhalants
- 10X MORE LIKELY to have a revealing photo of themselves texted non-consensually
- 9.5X MORE LIKELY to have unstable housing
- 6X MORE LIKELY to go hungry at home because of no food
- 5.5X MORE LIKELY to feel unsafe at school
- 4.7X MORE LIKELY to attempt suicide

### HIGH SCHOOL LGB YOUTH WHEN COMPARED TO STRAIGHT YOUTH

- 2X MORE LIKELY to experience the bad outcome being measured across 32 out of 123 questions
- 3X MORE LIKELY to experience the bad outcome being measured across 9 out of 123 questions
- 5.5X MORE LIKELY to experience bullying because they're perceived as LGBTQ+
- 3.5X MORE LIKELY to have a revealing photo of themselves texted non-consensually
- 3.5X MORE LIKELY to drink before having sex
- 3X MORE LIKELY to attempt suicide

### HIGH SCHOOL LGBTQ+ YOUTH'S IMPACT ON OUTCOMES FOR ALL STUDENTS

- 62.5% Increase for total students using alcohol before sex
- 56.3% Increase for total students kicked out of home
- 53.3% Increase for total students who experience sexual violence by partner
- 51.0% Increase for total students who attempted suicide

## Discrepancy Conclusion

What's difficult when considering this data is that trans individuals tend to be approximately 1 in 50 students. This can spike the data to create the alarming difference in negative outcomes. While that data is from a small population pool and lower validity, it should not be entirely dismissed either. These students do exist. The main purpose of this breakdown is to highlight the need of making this data standard within general reporting and to understand that these outcomes are so different the minority population has a noticeable impact on the total numbers and targeted approaches are required.

## YRBS vs. Trevor Project 2022 National Survey on LGBTQ Youth Mental Health

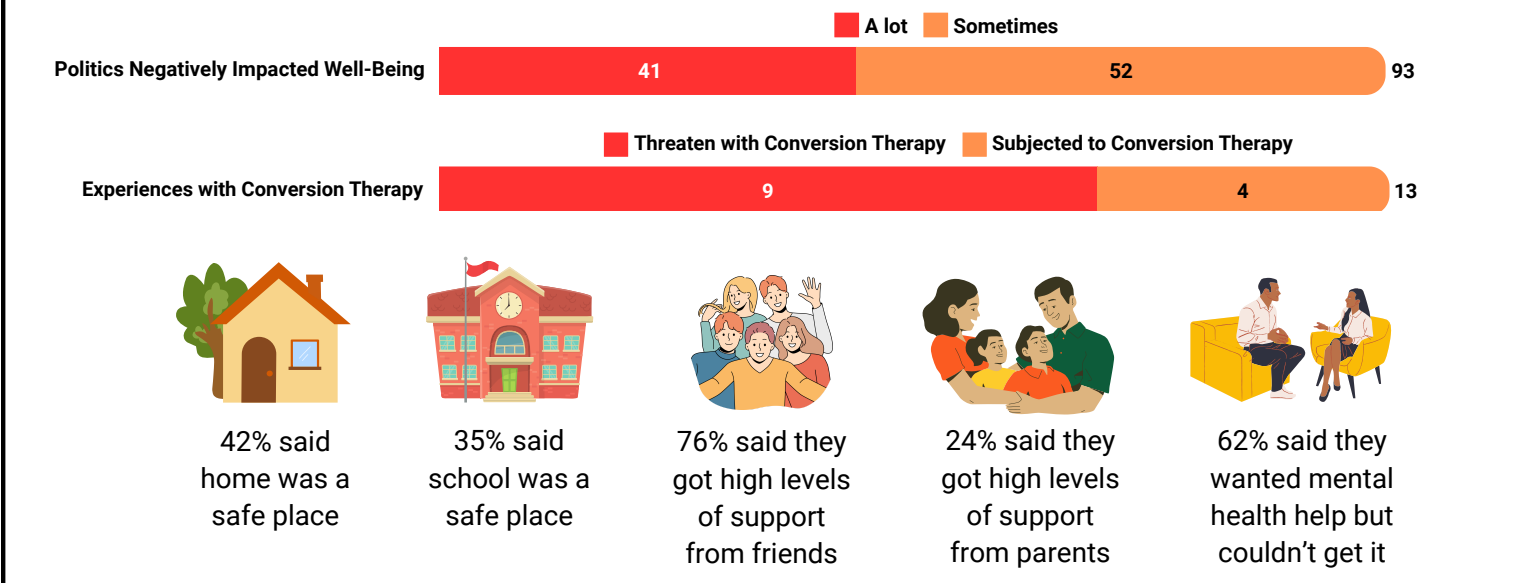
Many organizations within North Dakota default to the Trevor Project for their LGBTQ+ data.<sup>7</sup> The Trevor Project data set has a number of pros and cons when compared to our local state data that should be considered. These differences are explored in Table 2.1.

**Table 2.1 Trevor Project VS YRBS Comparisons**

Pros	Mental Health and Suicide	Trevor Project	YRBS LGB
<ul style="list-style-type: none"> <li>Asks specific questions on LGBTQ+ demographics that are not captured by our YRBS</li> <li>Stable data set for LGBTQ+ youth</li> </ul>	Seriously considered suicide	38%	66.50%
	Attempted suicide in past year	16%	34.90%
Cons	Symptoms of anxiety	66%	58.80%
	Symptoms of depression	46%	58.80%
	Demographics of Survey		
<ul style="list-style-type: none"> <li>Significantly smaller population pool</li> <li>Aggregated data from ages 13 to 24</li> <li>More bias in sampling, due to the unavoidable nature of public data collection</li> </ul>	Age 13-17	57%	83.60%
	Ages 18 to 24	43%	16.40%

Where the Trevor Project Survey really shines is in its ability to understand specific LGBTQ+ experiences, such as the impact of politics, conversion therapy, safety at home and school, support from friends and family, and ability to get mental health help they want.

**Figure 2.1: Trevor Project Data Summary**



At the time of creating this report, the 2023 Trevor Project data has not come out. This is prior to North Dakota passing a significant amount of legislation targeting LGBTQ+ individuals and trans individuals specifically. Including limiting where trans individuals can safely go to the bathroom, teachers ability to support trans students, and trans students ability to play sports. Some more data on Trevor Project will be included in the hotline call center section!

## 2023 YRBS vs. College Health Assessment (CHA)

The North Dakota 2024 Spring ACHA-NCHA III College Health Assessment gives us unparalleled access to the experiences of our college students in North Dakota.<sup>8</sup> It asks a wealth of questions and importantly distinguishes between not just events like bullying but also the self-reported impact those incidences have had. Unfortunately, the data is only correlated to cis and trans students, but there is still demographic data available for sexual orientation as seen in Table 2.2.

Table 2.2 CHA LGBTQ+ Demographics

Demographics	CHA	YRBS (HS)
Straight	85.3%	77.9%
LGB+	14.7%	19.3%
Cisgender	96.9%	93.6%
Transgender	2.2%	2.9%

To look at the data between middle school, high school, and college, there is a trend of better outcomes as students get older, but at each level there is a heightened disparity for transgender students. Transgender students who have made it to college likely have more protective factors and opportunities in the first place. While data reports like these often focus on the bad outcomes, rarely are these outcomes a majority of students. More often than not, the data shows half or more of students are doing relatively fine, within relatively stable conditions. College data, however, shows us trans students continue to be underweight, have less healthy weight, and are less likely to exercise and rate low for food security. All of these factors make sense together and a breakdown is explored in Figure 2.2.

Figure 2.2: CHA Food Security Breakdown

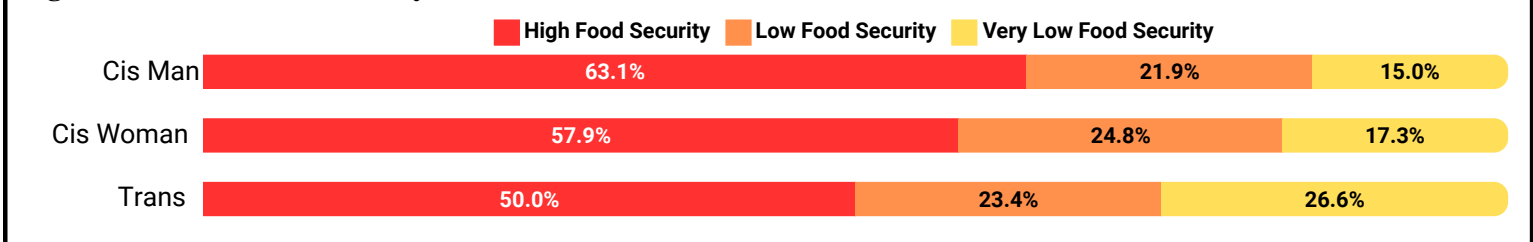


Table 2.3: CHA Campus Safety and Other Variables

CHA - Campus Safety	Cis Men	Cis Women	Trans
On Campus day time	89.4%	86.6%	76.3%
On Campus night time	70.0%	31.9%	22.8%
In community day time	70.6%	57.7%	38.3%
In community night time	50.3%	21.1%	11.0%
<b>Pregnancy and Self Injury</b>			
Unintentional Pregnancy	0.90%	1.3%	3.1%
Self Injury	6.4%	8.8%	23.9%
<b>Mental Health</b>			
Serious Psychological distress	10.8%	17.5%	29.6%
Positive for Loneliness	41.4%	42.8%	58.1%
Positive for Suicide behavior	16.70%	22.9%	45.5%
Suicide Attempts	2.7%	2.1%	4.5%

While trans students did not fare significantly worse across many metrics, one that stood out was safety on and off campus, with 89% not feeling safe in their local community around campus at night.

Also seen is a significantly higher number of unintended pregnancies, which could be impacted by the myth that hormone therapy sterilizes and a lack of sexual education targeting trans individuals in high school.

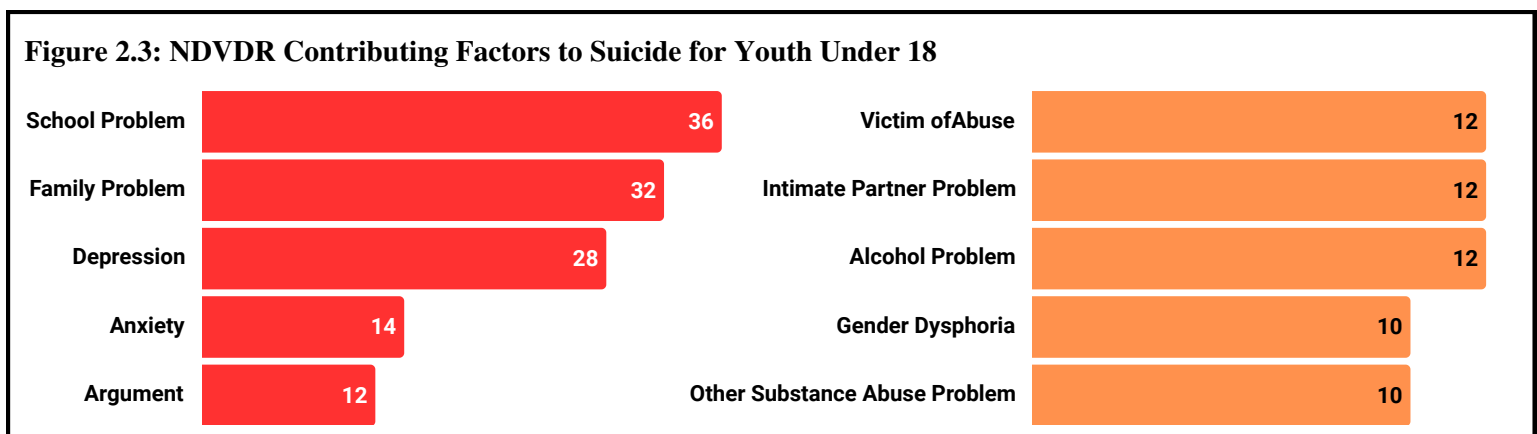
We see trans students significantly more likely to self-harm. While they're also more likely to attempt suicide, the differential is much less than seen in middle and high school, and the actual number is also significantly less.



## 2023 YRBS vs. North Dakota Violent Death Reporting System

The North Dakota Violent Death Reporting System is NVDRS is a CDC funded, state-based surveillance program that collects data on violent deaths (homicides, suicides, accidental firearm deaths, deaths of undetermined intent, deaths from legal intervention, and terrorism). NVDRS collects data on violent deaths from a variety of sources including death certificates, coroner/medical examiner reports, law enforcement reports, crime laboratory reports, and toxicology results and links them together to provide a comprehensive picture of the circumstances surrounding these deaths.<sup>9</sup>

The NDVDRS data this report has access to only goes until August 10 of 2023, but a valuable missing component to conversations of suicidality and risk is actual lethality of outcomes. While this data set has many limitations, it is still the only access we have on a state level to some of this data. This system tracked 50 deaths by suicide between 2019 and August of 2023 for children and adolescents under the age of 18. The report measured contributing risk factors seen in Figure 2.3.




If trans students account for approximately 2% of youth, seeing Gender Dysphoria listed for 10% of youth who died of suicide would indicate a five times greater likelihood of these youth dying of suicide. This is exactly what the YRBS data says. For each one of these contributing risk factors, the YRBS suggests outcomes are worse for LGBTQ+ students. It is strongly suggested by the data that nearly half of the youth who died by suicide were LGBTQ+. While the data is too limited and suicide is too multifaceted to make such a determination with accuracy, the risk factors add up for LGBTQ+ youth.

While we do not have absolute data for the cause of death that occurs in our state, North Dakota HD Pulse data suggests that on average 54 youth, ages 0-18, die each year in this state.<sup>10</sup> Also, between 2019 and 2022, on average 10 youth died by suicide each year. According to ESSENCE data, ages 0-19 make up 36.6% of all reported suicide attempts, while only 6.6% of the population that died of suicide.

Altogether, this does suggest that suicide attempt behavior for youth is significantly less lethal than for adults. Accounting for just the high school population, death by suicide occurs one in every 255 attempts. Assuming middle school attempts are similar, this would bring lethality closer to one in every 386 attempts. This is still the second leading cause of death for youth and isn't meant to underplay the serious nature of suicide. But to open the question about how we understand and track suicide behavior. What youth consider an attempt. And that even in the face of these high numbers, the youth do survive, and we must keep attempting to reach them. Further those numbers are at best suggestive within the limited data we have.

## 2023 YRBS vs. Hotlines

One of the data points that did not differ greatly between LGBTQ+ students and straight students was behavior around asking for help before a suicide attempt. As the text to the right indicates, only 20% of youth sought help for attempting suicide. The question asks if they sought help from a hotline, counselor, or doctor.



**Only 1 in 5 high school students will reach out for help before a suicide attempt**

This question means we can take most of our data from call centers and multiply it by five to get a more accurate view of the people in our state who may need help. While this question doesn't necessarily indicate middle schoolers, college-age youth, or adults of any age would have the same behavior, we know many people still don't know about suicide prevention resources like 988.<sup>11</sup>

Also every year, more people become aware of 988, and across the United States, economic insecurity and other struggles are compounding for every population. It is very difficult to distinguish an increase in calls as being higher experiences of trauma, awareness, or both.

**Table 2.4 Call Center Data and Total Suicides Attempts for LGBTQ+ Youth**

Year	Call Center Data	LGBTQ+	YRBS Total LGBTQ+ Suicide Attempts 2023
2022	Trevor Project	168	1875
2023 July to Oct	FirstLink	121	
2023*	FirstLink	363*	YRBS Total Suicide Attempts 2023
2024 Jan to Nov	FirstLink	361	4438

Table 2.4 would be improved with more information; however, call centers did not start collecting data on LGBTQ+ callers until July of 2023. The 2023 full year-number is an estimate given the average of what was reported from July to October of 2024 by FirstLink, North Dakota's call center. FirstLink was able to provide full data for 2024 up to November, which lines up closely with the estimate from 2023. However, this data is not collected from every caller; during 2024, it was collected approximately 75% of the time according to FirstLink Data.

What is known from this data is that the calls FirstLink gets are likely a small percentage of individuals who need help. 988 responds to callers of all ages and backgrounds. The YRBS reflects just middle and high school students, which accounts for just 6.7% of North Dakota's total population.

The only purpose of this section is to put stronger scrutiny on our systems of measurements and realize many youth never become a number in our systems. Further, it is very likely our state health data around suicidality is significantly worse than is understood by our current data metrics. None of this is a failing for FirstLink, which will likely have taken at least 15,000 calls from people in suicide crisis in 2024 alone. They have saved and continue to save countless lives. It is likely every single person in North Dakota has been impacted directly or indirectly by this service, even if they don't know it. That said, it should be the absolute last line of defense, not the first.

As a final thought, Trevor Project reported a 700% increase in calls to their LGBTQ+ Hotline in response to the recent election. Not to be partisan, but to understand political rhetoric has impacts on kids.<sup>12</sup>

## North Dakota Student Counselor Survey

During 2024, Harbor Health Initiative reached out to every school counselor working in our public K12 schools. There were 416 school counselors listed on the North Dakota Department of Public Instruction Directory. Of those, 61 responded to communication or 14.6% of them. 16 of those never answered our questions. The answers we have below represent the 45 student counselors who returned communication, who make up 10.8% of the student counselor population for public K12 education.

Table 2.5: North Dakota Student Counselor Survey	
On a 1 to 10 scale, with 10 being the highest - how well do you feel LGBTQ+ youth are doing at your school?	6.27
Would you consider yourself a safe person for LGBTQ+ youth to talk to?	100%
Are there any community resources you're aware of that help LGBTQ+ Youth? Person, organizations, or anything like that?	51%
Do you know anyone else you'd recommend for us to talk to as part of this project?	34%
Are you interested in learning about resources that help LGBTQ+ Youth?	92%
Would you be interested to be on an emailing list to stay up to date on these resources?	90%
Would you be interested in being involved in a statewide LGBTQ+ Support Network?	48%

There were three attempts to reach each student counselor, twice by email and once by phone. Student counselors are often extremely busy, so non-response does not indicate anti-LGBTQ+ beliefs. However, those who did respond likely had more vested interest in keeping LGBTQ+ youth safe. To apply these numbers to the general student counselor population would mean nearly half of our professionals do not have good landing resources for LGBTQ+ youth.

This does reflect in the data, where our LGBTQ+ youth, especially middle school youth, have said they did not get the help they needed. While the majority of these professionals indicated a desire for more tools and communications on tools to help students out, only half indicated interest in being part of a larger effort to improve LGBTQ+ student safety.

The most common reason for not having resources given was being in a small community. The YRBS represents schools all across North Dakota, and most communities and schools are relatively small. This creates significant challenges for finding adequate support for LGBTQ+ youth. There was some pushback from elementary and middle school counselors suggesting they don't interact with this population, incorrectly implying LGBTQ+ identity is a high school or older issue exclusively.

Responses also included frustration with the lack of resources, as well as not clearly understanding what help they could provide or what consequence may come from helping. There were counselors who reported kids doing well, those who said it was a struggle, and those who didn't know of any openly LGBTQ+ students in school. Overall, the state of schools appears to be a kind of "don't ask, don't tell" culture—where not only the students, but the school staff are just doing their best to survive.

It is worth remembering there are many parents who support their LGBTQ+ child and want the school to help them. Resources can still focus on this demographic, even if other parents demand their child doesn't get support.

## Parents of LGBTQ+ Youth

An open survey collected responses from parents of LGBTQ+ youth in North Dakota. The information was collected anonymously to assure safety for those participating.

### How has the 2024 fall school year gone?

*"The school year was very hard. Each class had a unique set of kids that would pick on my kid in a different way. Between all the different types of bullies, we ended up going with full time online school. Now that we are in online classes my child has all good grades and he smiles again."*

Online school was consistently identified as a safe haven for LGBTQ+ youth. Youth were identified as doing better this year compared to last year, with trans youth in particular struggling with bullying and fear. One parent identified their child pursued a GED just to get out.

### Does your child worry about anything related to being LGBTQ at school?

*"The bathroom has been a major stress point for us. We had to argue with one school to allow him to use the men's bathroom. When he did, he was told to get out by the other boys. There was a fight afterwards and a lot of conversations with the school counselor. The unisex bathroom that we had to fight for didn't have a lock on it and also caused a major issue when another kid opened the door. My child would go out of his way to just not use any bathroom at school."*

Bathrooms were a major source of anxiety, with YRBS showing 20% of trans kids in middle school didn't drink water. Something common was parents identifying their kids were often more worried for their friends. Even online students were scared for their friends that went to in-person school. The story shared above is not uncommon.

### Do you or your child worry about your future in North Dakota?

*We both worry a great deal about what the future holds in North Dakota. In particular, we worry about violence against the LGBTQIA+ community.*

For trans youth, losing access to medically necessary healthcare was a concern. Each parent was in some way worried for their child's future in this state. Many parents identified hoping to move as soon as possible or took solace knowing there were still safe places in other areas.

### What would you like to see happen to give you hope or support your kid in school?

*The 2023 legislative session was SO disheartening with all the anti-trans bills and rhetoric and fearmongering. I am dreading a repeat of that. I really dislike the feeling or idea that I am surrounded by people who have so much antipathy towards my child because of how they identify. I would like to see public leaders and lawmakers prioritizing kindness, respect and compassion.*

One parent just wished North Dakota state lawmakers would leave their child alone. Most wished for more support for their kids and for staff to have better education and training on the unique needs of LGBTQ+ youth. The responses here are in line with the outcomes we see in the YRBS.

## Feedback from LGBTQ+ Youth

The 2023 and 2024 LGBTQ+ Summit both hosted LGBTQ+ youth feedback panels. These were composed of multiple kids from different ages, grades, and school systems. This is a summary of what they said.

### 2023 Youth Feedback Panel

#### Youth-Identified Problems

- Suicide is because of bullying in schools
- School counselors and teachers are not as welcoming as should be
- Many care but cannot do anything, especially with the new legislative session
- Administrators feel stuck, unable to help kids
- Want more queer people on school boards
  - More people of color and youth too
- Need more people of color as school counselors
- More empathy from teachers

#### Youth-Identified Solutions

- Make education and training more accessible for adults
- Training for school board
- Student-led discussions to discuss inclusivity
- Make GSAs more accessible and prevalent
- Support GSAs

### 2024 Youth Feedback Panel

#### Youth-Identified Solutions

Resources aimed at queer and non-queer peers on how to be allies. For their queer peers, youth want these materials to highlight the importance of unity within the LGBTQIA+ community and not separating certain queer identities from the rest of the group (e.g., combatting "LGB without the T" attitudes). For their non-queer peers, youth recommended resources that equip their peers with bystander intervention skills to stand up to homophobia and transphobia.

Professional development for school professionals on LGBTQIA+ topics (e.g., identity struggles, how to support queer youth). In particular, youth emphasized the importance of visibly queer school professionals. They also highlighted the need for resources geared towards younger school populations, such as 4-6th grade audiences.

Queer-inclusive sex education, including relationship boundaries and how to speak with healthcare professionals. This recommendation highlights the need to further expand the evidence-based In-Clued training that is currently offered by Planned Parenthood.

Queer youth groups outside of the Fargo and Bismarck area. Youth asked that these queer youth groups feature queer facilitators and provide transportation support and food. They suggested that these groups be unaffiliated with schools given potential restrictions tied to school-based organizations. Youth also highlighted the importance of groups for both queer teenagers (12-18) and queer young adults (18-26), as both groups need support.

Resources aimed at adults, including their extended family and family friends, on how to be a trusted adult. They suggested these resources outline "green flags" that signal being an ally, such as using someone's chosen name and pronouns. They added that these resources should be a source of education on LGBTQIA+ identities and issues for adults.



(Youth Feedback Session 2024 LGBTQ+ Summit, picture by Summit Youth Intern)

(Panel Summary provided by ND HOPES)

## Feedback from Qspace

Qspace is a Bismarck-based LGBTQ+ youth group that has been providing help and support to LGBTQ+ youth in Bismarck and the surrounding region since 2019. Coled by Zayden Bartosh, Alyssa Klossgaard, and Lexi Williams. This has been their experiences over the last six years.

### ON MENTAL HEALTH

Fortunately, a majority of the youth we serve right now do have access to mental health services and gender-affirming healthcare. Approximately 2/3rds of our trans youth have been grandfathered into continuing their medically necessary care after the state banned it. Our youth want to make sure that LGBTQ+ affirming therapists are legitimately trained in what it means to be LGBTQ+ affirming and that they understand the issues surrounding LGBTQ+ youth.

### ON SCHOOL

School is hard: one youth said, "just because teachers wear pride pins or say that their class is safe, it does not mean that they actually are there for the kids."

Students suggested that even though teachers wanted to be supportive, they didn't know how. Based upon what the youth said, some teachers don't know how to handle bullying and harassment of LGBTQ+ youth or how to talk to these youth about the unique issues they face, even though these same teachers still identify themselves as safe spaces.

Students also identified teachers who did want to help but stopped because they did not have administrative support. While teachers did not say this directly, students perceived the hesitation was because of fear of losing their jobs or getting disciplined. The youth also identified understanding the difficult situation teachers are in, but these kids are still in pain and still need help they are not getting, finding the situation unfair.

The students would like schools to be more supportive of and make sure teachers had appropriate training to intervene during anti-LGBTQ+ remarks and bullying.

### ON BEING HOMELESS AND LIVING IN POVERTY

The biggest barrier Qspace youth face is housing insecurity and living in poverty. In general, Qspace youth have to work when they come of age and are able to do so. Some of them do help pay rent with their parents and/or have the constant thought of losing their housing. This disproportionately affects our Indigenous youth, but some of them do get help with Native Inc. Poverty itself is a huge barrier for multiple youth of ours, regardless of race.



(LGBTQ+ Summit, featuring Bismarck Youthworks. Many LGBTQ+ youth use both Qspace and Youthworks in the area.)

## Reaching Out to Organizations in North Dakota

As part of the work with the State of the State Report, an open survey was created for organizations that serve youth in some capacity. 40 different organizations were reached out to, while 11 returned the survey. This is not an exhaustive list of youth-serving organizations in our state. Further, responding or not to this survey doesn't convey an organization's stance on LGBTQ+ individuals or belief around if this community deserves to be safe and included. Everyone is busy; the hope is more organizations will get back to us over time.

The intention of reaching out was to start a conversation, assess what organizations were currently doing, and what struggles they currently saw. It also invited feedback from key organizations about what partners are essential in the work to keep LGBTQ+ youth safe.

However, there is a very clear "Don't Ask, Don't Tell" cultural policy around LGBTQ+ topics in the state. While many organizations do wish to keep everyone safe, they believe being too open about safety efforts for LGBTQ+ populations will result in targeted harassment, reduction of funding, or even laws to micromanage services. Or, the organization falsely believes efforts to help all populations will adequately trickle down to LGBTQ+ individuals. Many may not realize a significant portion of their population is LGBTQ+.

American Foundation for Suicide Prevention	Gender Justice	North Dakota Health and Human Services	Prairie St. Johns
Cass Public Health	Grand Forks Police	North Dakota HOPES	Prevent Child Abuse North Dakota
Catholic Charities North Dakota	Grand Forks Public Health	North Dakota Human Rights Coalition	Rape and Abuse Crisis Center
Centre Inc	Interfaith Alliance of North Dakota	North Dakota Medical Association	Red River Child Advocacy Network
Community Healthcare Association of the Dakotas	Kids Count North Dakota	North Dakota National Association of Social Workers	Sanford Child Safety
Community Violence Intervention Center	North Dakota American Civil Liberties Union	North Dakota School Board Association	Sanford Health
Consensus Council	North Dakota Council of Educational Leaders	North Dakota United	Sources of Strength
FirstLink	North Dakota Department of Public Instruction	North Dakota University System	The Foundation
FM Coalition to End Homelessness	North Dakota Domestic and Sexual Violence Coalition	Parents Lead North Dakota	Treatment Center for Traumatized Youth
Fraser	North Dakota Federation of Families for Children's Mental Health	Planned Parenthood North Dakota Chapter	Youthworks

## Feedback from Organizations

Organizations were asked questions about what they were doing specifically for LGBTQ+ youth and what barriers they saw. This is far from an exhaustive understanding of services or challenges in the state, but the intent is this can start to be meaningfully built out. So much work is done in silos, where partners do not talk to each other about services, success, or challenges.

### What are the main challenges you see for keeping LGBTQ+ youth safe in North Dakota?

*"The climate and culture. Very few safe spaces exist where youth can be themselves, and this is driving them to very negative mental health states."*

Not all responses were from organizations listed above. Some individual professionals also completed the survey. The main challenges amounted to cultural hostility that both reduced the hope LGBTQ+ youth have within the state and their future, while making them more hesitant to trust getting services from the organizations designed to help them.

One organization identified unique behavior with LGBTQ+ youth, where they were more likely to talk around their problems before opening up to the fact the problem was related to their sexual orientation or gender identity. Something that can be missed if youth aren't given enough time or feel safe enough to talk about the issues they're having. The YRBS already shows the heightened risk this population has, and without knowing someone's sexual orientation or gender identity or if they don't feel safe enough to reveal it, that risk goes invisible to our service providers.

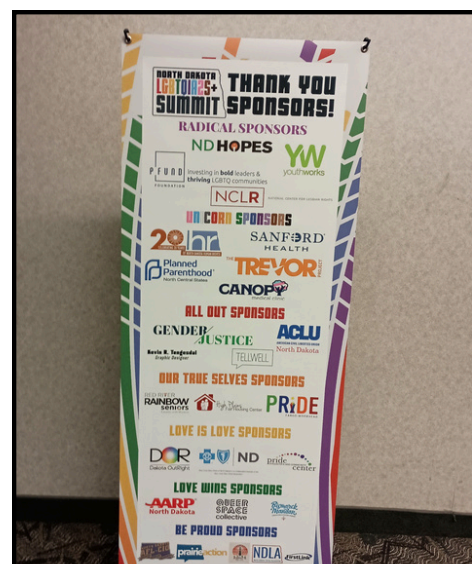
Some identified the negative impact of the state policies that have been made law, such as forcing trans students to be outed, denying their medical care, or restricting communication professionals can use when helping youth. Generally state attitudes contribute to a culture of fear around helping LGBTQ+ youth.

### What is your organization doing to ensure LGBTQ+ youth are safe?

*Education and Training, Listening Sessions to gather feedback from LGBTQ Youth, and distribution of resources*

The various answers amounted to LGBTQ+ specific services, trainings, and resources. A few organizations mentioned DEI training. Some talked about policies to ensure LGBTQ+ youth were safe in getting care. Others talked about general advocacy. One talked about creating broader desiloing efforts to assure professionals themselves had peer support.

While these efforts are fairly standard, another question asked was who else should be included. Only 3 out of the 11 organizations offered any suggestions, and of those, only 1 offered concrete names. The fundamental problem remains that organizations are not talking to each other and only considering their own lane. No organization, by itself, can meaningfully solve the issues impacting LGBTQ+ youth.



Various Organizations Sponsoring LGBTQ+ Summit



## The Story of Ikiru

Ikiru is a Japanese movie that was released in 1952 about a dying bureaucrat. Why would an 80 year old movie be featured in a 2025 State of the State Report for LGBTQ+ youth in North Dakota? Well, the plot of the movie involves a family attempting to build a playground but being given an endless run around as the exact situation seems to be outside of the jurisdiction of everyone. The dying bureaucrat is named Kanji Watanabe and eventually takes it upon himself to solve this problem. Spending his final night on the playground he helped make reality.

There is a campaign through the It Gets Better Project called “50 states, 50 grants, 5000, voices” that donates \$10,000 to LGBTQ+ youth groups in every single state with a number of stipulations, requiring the grantee be schools. I explained this wouldn't work in North Dakota; I offered alternative solutions and offered to help problem-solve this issue, but was met with generic emails that they couldn't help. Most national grantors are like this. It isn't their fault, they do good work, but still our kids suffer.

Without naming names or to call out any individual organization within North Dakota, during the last ten years I've been met with silence at requests for help, I've been told various things can't be done, or that it isn't someone's job to help. I've been met with institutional, cultural, financial, and logistic barriers. I'm at times met with hostility or threats. I've been disregarded or ignored on multiple occasions. The majority of individuals I work with clock out at 5:00 PM. And this is my third major report across even years saying virtually the same things about virtually the same outcomes.

Every single system I interact with is buried in various limits. Whether grant restrictions, quarter by quarter restrictions, or only being able to do measurable work, the outcome remains the same. Our LGBTQ+ youth bear the burden of inaction, suffer the consequence of the limitations in our systems, and experience trauma and hardship after 5:00 PM and on the weekends too. One thought constantly echoes in my head:

**EVERY DAY AT LEAST 5 LGBTQ+ YOUTH WILL ATTEMPT SUICIDE IN OUR STATE.**

As these kids try to end their own lives, our state rhetoric is just more attempts to make that life harder. I know that being critical or unkind to people does not inspire them to help me. I try to be kind; I try to be patient. I am at times frustrated. I do not know why I'm the one who has to make this report. I don't know why I've had to spend 10 years learning our data systems and design tools to create this report in the small chance this will cause someone to get invested in a way they didn't before.

But, as a child of North Dakota, I didn't get the help I needed. I felt like I was a burden and never asked. I tried to figure out my own problems. As a young adult, I asked for help and didn't get it. As an adult, I asked other people to help out our youth until I lost my voice in the effort of screaming. And today, after ten years, I am nothing if not pragmatic. The truth is no single barrier matters, except for the will to accomplish change. If our mind is set to fix this problem, we can. It is honestly that simple. People are the only barriers.

After ten years of research, my belief is that the solution to these problems requires someone dedicating their life in service to this cause. So, that is what I will do. Taking any help I can. And if I am lucky, I will see the playground be made for LGBTQ+ youth to play in, to be safe, and to be happy— before I die. While my primary goal is LGBTQ+ youth, I, of course, will work for all children in our state to be safe, fed, and loved.

## BACKGROUND PHILOSOPHY

The majority of efforts that do exist to help LGBTQ+ youth are siloed and temporary. They often depend on individuals giving much more of themselves than they should be expected to do. Either volunteers at LGBTQ+ groups or non-profits, the student counselors trying to keep all the LGBTQ+ kids at school safe, or LGBTQ+ folks in organizations that endlessly must advocate for themselves.

Many efforts right now can be destabilized by losing donor or grant funding, because grant cycles ended, or due to turnover/burnout. Others can be impacted by legislation, such as medically necessary care being denied to trans youth. This taskforce seeks to disrupt these cycles.

## LGBTQ+ SAFETY TASKFORCE

- The LGBTQ+ Safety Taskforce will be a joint effort that welcomes any organization that serves youth
- It will be hosted through the Harbor Health Initiative, where all relevant resources will also be hosted
- It will not hold routine meetings, but meetings around solving particular problems may be called

The purpose of the group is to solve problems by utilizing a vast network of motivated individuals and then record those solutions for public consumption. This effort is collaborative and by itself seeks to replace no service currently existing. The job of this task force is to further desilo our efforts, empower each partner, provide professional peer support, and harm-reductively keep all of our youth as safe as possible.

## CORE PRINCIPLES

### Inclusive Messaging

The message is not acceptance nor tolerance. It is not changing people's minds; they're welcome to believe what they do. The message is strictly safety. How do we keep LGBTQ+ youth safe? That is the central value and mission to align around.

### Casting a Wide Net

Cast the widest possible net, as the more people who are there to hold it, the less likely it will be to give out. This means working with every single organization that interacts with youth, the youth themselves, parents, communities, lawmakers, police, faith communities, and so on. This work does not require a special effort or organization; it requires everyone doing their small part to look out for all youth.

### Intersectional Approach

While there is a focus on LGBTQ+ youth, the ultimate goal is always that all youth in North Dakota are safe, fed, and loved. The networks created and the desiloing that occurs through this safety taskforce will be a benefit to everyone in the state.

### Tackling Burnout

Connect professionals together to provide peer support. Most of this work is high trauma; many professionals work in rural communities with few people to talk to. If efforts are not working on preventing burnout and secondary trauma, they will not be successful.

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## Publication and Version

This was published originally on January 2nd, 2025. This is the first version of this report, with no edits. This section will be changed to update additional publication and version information. This is Version 1.

## Corrections or Improvements

All effort was done to convey the information as accurately as possible, with appropriate credit where possible. If any error has occurred, please email for correction at [Fayeseidler@gmail.com](mailto:Fayeseidler@gmail.com).

## Collaboration, Feedback, and Future Work

This report will be released every two years, following the YRBS data. If there are sections within this report that your organization would like to tackle, your involvement would be welcomed for the 2027 State of the State for LGBTQ+ Youth.

Please consider sharing this report as widely as possible, and if there is any feedback about this report, please email the author at [Fayeseidler@gmail.com](mailto:Fayeseidler@gmail.com). If the complaint is associated with the report being too colorful, one can schedule disappointment on their calendar for 2027.

## Resources

Resources are a bit like cars; their value depreciates immediately after they leave the lot. It is less important to have a particularly good resource guide than it is to know who keeps publishing resources and where to find them. That said, ND HOPES has published a resource that went live near the start of 2025! It is by far the most up-to-date general resource for LGBTQ+ youth parents, teachers, and schools.



The LGBTQIA2S+ Resource Guide features valuable resources and guidance for supporting LGBTQIA2S+ youth in North Dakota. The guide contains local information on North Dakota programs, resources, and providers, with specific resources for schools, parents, healthcare providers, and community members.

 <https://www.ndhopes.com/suicide-prevention-resource-guides>



Harbor Health Initiative has the LGBTQ+ Directory, which is every affirming provider and support group across the state. It also hosts the Safe Harbor Project and the LGBTQ+ Safety Taskforce. The website include all important resources for Trans individuals across the state, including general help resources if they are struggling with food, shelter, or other basic needs.

 <https://harborhealthinitiative.org/directory/>



Faye Seidler Consulting has a number of newsletters, shows, points of data, and opportunities for people to get informed and get involved. She hosts all publicly available data on her website for easy access across multiple sectors. And hosts the one pager essential LGBTQ+ Resource Guide included on the next page.

 <https://www.fayeseidlerconsulting.com/news.html>



FirstLink is the 988 crisis and lifeline center for North Dakota and parts of western Minnesota. They are also our 211 call center, hosting a state directory of general resources. They are the absolute best organization to call if you're looking for generally anything, need someone to talk to, or find yourself in a mental health crisis.

 <https://myfirstlink.org/>



988 - Mental health emergency  
211 - All purpose helpline

# NORTH DAKOTA LGBTQ+ RESOURCE LIST

## STATE ORGANIZER

### Faye Seidler - Suicide Prevention Advocate

Phone: 701-732-0228

Email: fayeseidler@gmail.com

Website: fayeseidlerconsulting.com



I'm rooting for you.  
There is a future where  
you can be happy, let's  
fight for it.

## EMERGENCY SUPPORT

<https://myfirstlink.org>

### You Matter. You Deserve Help.

- Dial or text 988 for Mental Crisis or 911 for Crisis
- Dial 211/text zip code to 898-211 for General Help
- FirstLink prioritizes resolution without police

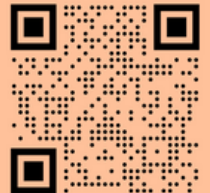


## AFFIRMING HEALTHCARE

<https://harborhealthinitiative.org>

### LGBTQ+ Health and Community Directory

- All Affirming Providers in ND + Border Cities
- All LGBTQ+ Community/Activity/Support Orgs
- Transition Info + Link to at Home STI Test Kits

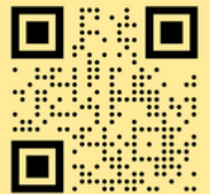


## YOUTH SUPPORT

<https://youthworksnd.org>

### Stay Safe, Fed, and Sheltered

- Services for 22 or Under, Drop-Ins across State
- Food, Showers, Transition Housing
- Seeks to Stop Trafficking and Homelessness



## HUMAN RIGHTS

<https://www.ndhrc.org>

### Discrimination is Illegal, Your Rights Matter

- Know Your Rights Resources
- Referrals to Human Rights Experts
- Human Rights Training



## ADVOCACY

[www.fayeseidlerconsulting.com](http://www.fayeseidlerconsulting.com)

### Be the Change You Want in the World

- Weekly Local Equity News + Email Service
- Statewide Advocacy, Organizing, Data Expert
- Created This Resource List!



## EVERYTHING ELSE

<https://www.capnd.org/resources-in-nd>

### General Help Services for All Populations

- All the Food Banks and Homeless Shelters
- Access to Legal Help or Fair Housing
- Job and Transportation Access



# ND 2023 MIDDLE SCHOOL YOUTH RISK BEHAVIOR SURVEY LGBTQ+ REPORT (P1)

Suicide & Self-Harm	Trans	LGB	S
QN15 - Ever seriously considered suicide	73.9%	66.5%	19.9%
QN16 - Ever made a plan to attempt suicide	58.3%	54.6%	14.7%
QN17 - Ever attempted suicide	45.0%	34.9%	8.5%

Safety & Sexual Violence	Trans	LGB	S
QN13 - Bullied on school property	49.2%	53.9%	29.1%
QN14 - Bullied electronically	73.9%	66.5%	19.9%
QN33 - Ever had sex	21.5%	12.10%	5.6%
QN51 - Someone they were dating purposefully tried hurting them	25.1%	20.7%	7.3%
QN50 - Someone they were dating forced them to do sexual things	22.1%	21.7%	8.0%

Social Capital & Mental Health	Trans	LGB	S
QN47 - Students who experienced unstable housing (30 days before survey)	11.7%	3.30%	1.6%
QN61 - Students who mostly went hungry at home	10.9%	5.60%	3.3%
QN65 - Students reported one adult/teacher at school they could talk to	40.2%	50.00%	59.2%
QN52 - Students who felt sad or hopeless almost every day during 2 weeks	73.7%	75.00%	26.8%
QN45 - Bad Mental health most of the time or always not good (Anxiety/Depression)	75.1%	61.90%	20.7%
QN64 - Usually got help they needed when feeling empty, hopeless, anxious, or angry	11.2%	15.90%	26.6%
QN48 - Students who describe grades as mostly A's and B's within 12 months	54.9%	61.0%	76.7%

Substance Use	Trans	LGB	S
QN18 - Ever smoked in their life	22.6%	24.7%	7.3%
QN22 - Ever vaped in their life	28.7%	33.7%	12.3%
QN26 - Ever drank alcohol in their life	31.2%	34.6%	17.5%
QN55 - Ever used marijuana in their life	19.7%	18.3%	6.7%
QN30 - Ever took prescription pain medication without doctors orders	23.8%	14.9%	8.1%

# ND 2023 MIDDLE SCHOOL YOUTH RISK BEHAVIOR SURVEY LGBTQ+ REPORT (P2)

## Demographics Sexual Orientation

Heterosexual (Straight)	1683	77.06%
Gay or Lesbian	47	2.15%
Bisexual	140	6.41%
I describe myself differently	78	3.57%
Questioning	114	5.22%
Don't know what this is asking	122	5.59%
Total	2184	100.00%

## Demographics Gender Identity

I am not Transgender	2058	94.25%
I am Transgender	36	1.65%
Not sure if I am Transgender	42	1.94%
Don't know what this means	47	2.16%
Total	2184	100.00%

## Middle School Population Total

17419

Straight	13423	LGB	2114	Trans	287
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## Survey Considerations

More information on the Youth Risk Behavior Survey can be found here: <https://www.hhs.nd.gov/health/YRBS>. All data presented here is weighted, with analysis done by Mark Winkelman at Winkelman Consulting. This was compiled as part of the Safe Harbors Project: <https://harborhealthinitiative.org/safe-harbors/>. More data can be found at Faye Seidler Consulting - <https://www.fayeseidlerconsulting.com/state-data.html>. Faye Seidler is the data expert on LGBTQ+ outcomes within North Dakota, and summarized the data present here: she can be reached at [Fayeseidler@gmail.com](mailto:Fayeseidler@gmail.com).

## Faye Seidler - Faye Seidler Consulting

Faye Seidler has been actively working to improve LGBTQ+ outcomes across North Dakota, especially within the K-12 setting, for over a decade. She did research into conducting effective LGBTQ+ process improvement training for North Dakota stakeholders in 2015, wrote a comprehensive article on North Dakota LGBTQ+ student outcomes in 2018, co-chaired the ND HHS LGBTQ+ Advisory Board in 2020, led the work on the 2021 LGBTQ+ School Climate Survey, and released the 2023 YRBS Summary Report. Her work currently focuses on suicide prevention across the state.

Email: [Fayeseidler@gmail.com](mailto:Fayeseidler@gmail.com)

Website: [www.fayeseidlerconsulting.com/](http://www.fayeseidlerconsulting.com/)

## Safe Harbor Project - Harbor Health Initiative

The Harbor Health Initiative is an initiative to dramatically improve cultural competency and offered services throughout the state. It hosts the LGBTQ+ Directory, which includes every affirming doctor and mental health specialist, as well as other resources like support groups, activity groups, faith organizations, and more. It started the Safe Harbors Project as a way to create intentional and intersectional approaches to address the issues of safety for LGBTQ+ Youth, support to reduce secondary trauma of service professionals, and reports to measure outcomes.

Email: [info@harborhealthinitiative.org](mailto:info@harborhealthinitiative.org)

Website: [harborhealthinitiative.org/directory/](http://harborhealthinitiative.org/directory/)



# ND 2023 HIGH SCHOOL YOUTH RISK BEHAVIOR SURVEY LGBTQ+ REPORT (P1)

Suicide & Self Harm	Trans	LGB	S
QN97 - Purposefully harmed self	61.2%	43.5%	16.3%
QN27 - Seriously considered suicide within 12 months of survey	40.2%	41.0%	13.9%
QN28 - Made a plan to attempt suicide within 12 month of survey	29.5%	34.0%	13.2%
QN29 - Attempted suicide within 12 months of survey	28.2%	18.6%	5.9%
QN98 - Asked for help before attempt from anyone (family, school, hotline)	19.8%	21.2%	18.4%

Safety & Sexual Violence	Trans	LGB	S
QN24 - Bullied on school property	49.2%	31.5%	19.2%
QN25 - Bullied electronically	36.1%	28.8%	13.4%
QN96 - Bullied because people thought they were LGBTQ+	57.1%	41.50%	7.5%
QN12 - Carried a weapon at least one day in last 30	11.8%	3.8%	4.1%
QN14 - Did not go to school because felt unsafe at least one day in last 30	37.0%	12.2%	6.3%
QN20 - Experienced sexual violence in their life	31.7%	16.6%	8.0%
QN94 - Someone they were dating purposefully tried hurting them	44.9%	33.9%	24.6%
QN95 - Someone they were dating forced them to do sexual things	9.0%	4.5%	2.0%
QN117 - Sexually revealing photos of them texted/posted without permission	17.5%	7.1%	1.7%
QN97 - Students who drank alcohol or used drugs before having sex	44.3%	28.4%	8.3%

Social Capital & Mental Health	Trans	LGB	S
QN86 - Students who experienced unstable housing (30 days before survey)	18.1%	3.9%	1.9%
QN116 - Student was kicked out, ran away, or abandon (30 days before survey)	15.1%	6.6%	1.9%
QN118 - Students reported one adult/teacher at school they could talk to	68.5%	66.5%	68.9%
QN119 - Strongly agree there are clear rules and consequences for behavior	52.1%	54.1%	59.4%
QN120 - Students who reported most of time or always feeling safe at school	41.3%	63.1%	73.8%
QN26 - Students who felt sad or hopeless almost every day during 2 weeks	66.3%	63.6%	30.9%
QN84 - Bad Mental health most of the time or always not good (Anxiety/Depression)	73.8%	58.8%	26.3%
QN114 - Usually got help they needed when feeling empty, hopeless, anxious, or angry	32.7%	21.2%	19.9%
QN115 - Difficulty concentrating because of physical, mental, or emotional problem	73.6%	78.6%	42.6%
QN87 - Students who describe grades as mostly A's and B's within 12 months	55.6%	69.4%	78.5%

Note: Questions summarized to fit data into a single sheet and create binary answers. Full report can be found on website. The 2023 YRBS data is provided by the North Dakota Health and Human Services. Data analysis provided by Mark Winkelman, Winkelman Consulting, Fargo, ND.



# ND 2023 HIGH SCHOOL YOUTH RISK BEHAVIOR SURVEY LGBTQ+ REPORT (P2)

Substance Use	Trans	LGB	S
QN31 - Ever smoked in their life	37.1%	34.3%	18.4%
QN35 - Ever vaped in their life	41.1%	45.6%	30.1%
QN100 - Ever drank alcohol in their life	46.7%	51.1%	45.6%
QN41 - Ever drank alcohol before age 13 (more than a few sips)	23.0%	14.5%	11.2%
QN46 - Ever used marijuana in their life	45.3%	42.2%	20.2%
QN47 - Tried marijuana before age 13	16.1%	7.8%	3.3%
QN49 - Ever took prescription pain medication without doctors orders	24.2%	17.3%	8.4%
QN102 - Lived with someone who had problem with drug/alcohol use	53.6%	55.9%	28.5%

Weight, Diet, & Sex	Trans	LGB	S
QN105 - Tried losing weight by not eating in 24 hours, vommiting, etc	37.6%	40.6%	19.3%
QN109 - Students mostly went hungry because not enough food	13.2%	2.5%	2.1%
CDCPA - Did not do 60 minutes of activity once in the last seven days	13.2%	2.5%	2.1%
QN123 - Received most about sex education at school	11.7%	21.8%	31.2%
QN56 - Ever Had Sex	44.3%	28.4%	8.3%

Demographics Sexual Orientation		
Heterosexual (Straight)	1404	77.87%
Gay or Lesbian	42	2.33%
Bisexual	175	9.71%
I describe myself differently	69	3.83%
Questioning	61	3.38%
Don't know what this is asking	52	2.88%
Total	1803	100%

Demographics Gender Identity		
I am not Transgender	1688	93.62%
I am Transgender	52	2.88%
Not sure if I am Transgender	39	2.16%
Don't know what this means	24	1.33%
Total	1803	100%

High School Population Total		34556			
Straight	26909	LGB	5481	Trans	997

## Survey Considerations

More information on the Youth Risk Behavior Survey can be found here: <https://www.hhs.nd.gov/health/YRBS>. All data presented here is weighted, with analysis done by Mark Winkelman at Winkelman Consulting. This was compiled as part of the Safe Harbors Project: <https://harborhealthinitiative.org/safe-harbors/>. More data can be found at Faye Seidler Consulting - <https://www.fayeseidlerconsulting.com/state-data.html>. Faye Seidler is the data expert on LGBTQ+ outcomes within North Dakota, and summarized the data present here: she can be reached at [Fayeseidler@gmail.com](mailto:Fayeseidler@gmail.com).