

Psychosocial Disparities between LGBTQ+ and non-LGBTQ+ Individuals

Senior Project

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Abstract

 Individuals that identify as a part of the LGBTQ+ community face greater social disadvantages and health disparities than those that do not. These disadvantages specifically emphasize mental health being a strong barrier for LGBTQ+ and acquiring services. Researchers explain that these social disadvantages that lead to LGBTQ+ lacking adequate services are due to stigmas, prejudice of the community, and discrimination that create the environments that causes mental health suffrages. Each person has a gender identity and sexual orientation, and both can differ from person to person, as they are two forms of identities. Sexual orientation is defined as a person’s emotional, sexual, and/or relational attraction to others with specific orientations known as terms such as gay, bisexual, lesbian, heterosexual, and more. Though, minority identities such as lesbian, gay, bisexual, trans, queer, and other sexual and gender minority individuals (LGBTQ+) are more likely to experience social disadvantages than their heterosexual counterparts. This literature review will hone on these disadvantages and how these disparities lead to other factors such as education, youth, mental health, and more causing further challenges for the community.

**Psychosocial Disparities between LGBTQ+ and non-LGBTQ+ Individuals**

 Research into mental health disparities and challenges for LGBTQI+ youth to date has predominantly lacked significant focus. There are few qualitative studies that contribute to in-depth knowledge and understanding of the experiences, disparities, and challenges that the LGBTQ+ community face. This literature review explores scholarly research on the community and compare the underlining factors that lead to the disparities between LGBTQ+ and non-LGBTQ+.

**Mental Health**

Researchers have found several signifiers that note lesbian, gay, bisexual, transgender, and queer (LGBTQ) individuals encounter substantial inequalities as opposed to individuals that do not identify as a part of the community (Chan et al., 2022). These inequalities include mental health, which according to Wilson and Cariola (2020) for youth identifying as Lesbian, Gay, Bisexual, Transgender, and Queer (LGBTQ), pose issues when living authentically in a heteronormative society as compared to their heterosexual counterparts. Also compared with their heterosexual counterparts, “LGBTQ adolescents experience more anxiety, depression, suicidal thoughts, antisocial behavior, poorer academic performance, less school attachment and protection, and a weaker desire to finish their studies” (Wilson & Cariola 2020, para. 2).

Using the minority stress theory Meyer (2013), suggests that various mental health results in heightened challenges experienced by LGBTQ+ individuals. These challenges include increased levels of social stress, stigmas around the community, discrimination, prejudice, and victimization (Meyer, 2013). Meyer’s research further suggests that when comparing LGBTQ+ and heterosexual mental health, gay men and lesbians inadequately suffer from more mental health issues that include, but are not limited to, substance use and suicide prevalence, which are caused by discrimination and prejudice (Meyer 2013). These social effects collectively create a harmful social environment for minorities and LGBTQ+ mental health. Mental health challenges led to the community being further ostracized and further worsening of mental stability and availability for service when stigmatized (Meyer 2013).

**Inequalities**

Included in inequalities regarding the LGBTQ+ community is the lack of extensive research. Inequalities for the LGBTQ+ community are present in many forms, which also includes the school system. The literature shows that K-12 schools in the United States is oftentimes the primary site of oppression and discrimination for lesbian, gay, bisexual, transgender, and questioning individuals and their allies (Adelman and Woods, 2006). The school system can be a hostile environment for LGBTQ+ where heterosexism and homophobia run rapidly, positioning a heteronormative society and ideological system that denies the validity of LGBTQ people and positively reinforces the superiority of heterosexuals (Adelman and Woods, 2006).

Minority stress, as defined by Meyers (2003) is the stigma, prejudice, and discrimination that collectively or individually can create a hostile and stressful social environment that can lead to mental health challenges. This leads to the discussion of intersectionality and the inclusion of Black and people of color. The literature notes that White, middle-class, cis-heterodominant ideologies spread into LGBTQ+ social movements that end up creating harmful and oppressive structures within the LGBTQ+ community (Parmenter et al., 2021). These harmful structures include hierarchal structures that control what sexual and gender identities that compose of the community are viewed as legitimate while eliminating the intersectionality and the heterogeneity of queer and trans experiences that encompass the community (Parmenter et al., 2021).

**Suicide & Self Harm**

LGBTQ individuals may have serious psychological issues due to their sexuality, with youth facing particular challenges in society. A qualitative study focusing on LGBTQ+ mental health notes the challenges and issues that the LGBTQ+ community, with an emphasis on its youth, experiencing. The literature explored qualitative studies with a focus on mental health as it pertains to the community and its access to services and social support systems, services, policies, and programs that can prevent suicide and self-harm (Wilson & Cariola 2020). The Qualitative research examined the thoughts and feelings of the chosen participants for the research and found themes such as isolation, rejection, the need for support, marginalization inside and outside of the community, depression, self-harm, and suicidality (Wilson & Cariola, 2020). All of these themes pose a great and unique threat to LGBTQ+ livelihood, combined with outside life stressors that have the potential to worsen one’s mental health with a potential outcome of higher levels of self-harm, suicidality and impulsivity that is not seen in non-LGBTQ+ individuals (Wilson & Cariola, 2020).

Silenzio et al. (2007) note that when LGBTQ+ are compared with their heterosexual counterparts, lesbian, gay, and bisexual sexualities with youth, in particular, had shown elevated rates of suicidal ideation and attempted suicide. It’s noted that risk factors for suicidal behavior may between lesbian, gay and bisexual individuals as opposed to heterosexual individuals because of interactions that effect these notions (Silenzio et al., 2007). This is supported by Wilson and Cariola (2020), who states that youth of sexual and gender minority were more than three times as likely to show the signs and symptoms of depression. These symptoms were often shown to lead to self-harm, which sexual and minority youth were more than twice as likely to do than heterosexual youth (Wilson & Cariola 2020).

**Youth**

LGBTQ+ youth pose as one of the most vulnerable communities in society due to the lack of protections and heightened risk of mental health problems. According to Wilson and Cariola (2020), LGBTQ+ youth is one of the most vulnerable groups in society due to their increased risk of mental health problems. Although LGBTQI+ represent only a proportion of the youth’s total population, they are placed at a higher risk when compared to their heterosexual youth counterparts (Cariola, 2020). This includes LGBTQ+ experiencing hostile environments that include the home and when placed in society as a whole. Youth in particular finds themselves as a result being a high risk of discrimination, harassment, and other inequalities that heterosexual individuals do not face commonly day to day as a result of their identity (Cariola, 2020).

Furthermore, the literature shows evidence that suggests that sexual and gender minority youth have different risk factors that can lead to risks and harmful life stressors (Silenzio et al., 2007). As mentioned before in the literature, these unique risks combined with general life stressors have the phenomenological outcome of higher levels of self-harm, suicidality, and impulsivity (Liu & Mustanski 2012).

**Conclusion**

 Collectively, the literature concludes that those identifying as a part of the LGBTQ+ community and in particular sexualities have higher levels of psychological distress than heterosexuals do. This is a product of social stigmas, discrimination, and maltreatment that all aid in significant factors in affecting mental health for the LGBTQI+ population with greater challenges when compared to heterosexual individuals.

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