LGBT COMMUNITY MENTAL HEALTH RESEARCH REPORT SERIES

1. MENTAL HEALTH

Randolph C. H. Chan (PhD candidate) Prof. Winnie W. S. Mak (Professor) Department of Psychology, The Chinese University of Hong Kong







PROJECT OVERVIEW

BACKGROUND

Earlier studies have consistently documented sexual orientation disparities in mental health, with lesbian, gay, bisexual, and transgender (LGBT) individuals being at greater risk of poor mental health than cisgender heterosexual individuals [1-3]. The present study aimed to examine mental health of LGBT individuals in Hong Kong, and identify protective and risk factors that contribute to their mental health outcomes.

This report presents the research findings on the demographics and mental health conditions of the LGBT respondents. The findings are part of a larger research study on LGBT community mental health.

METHODS

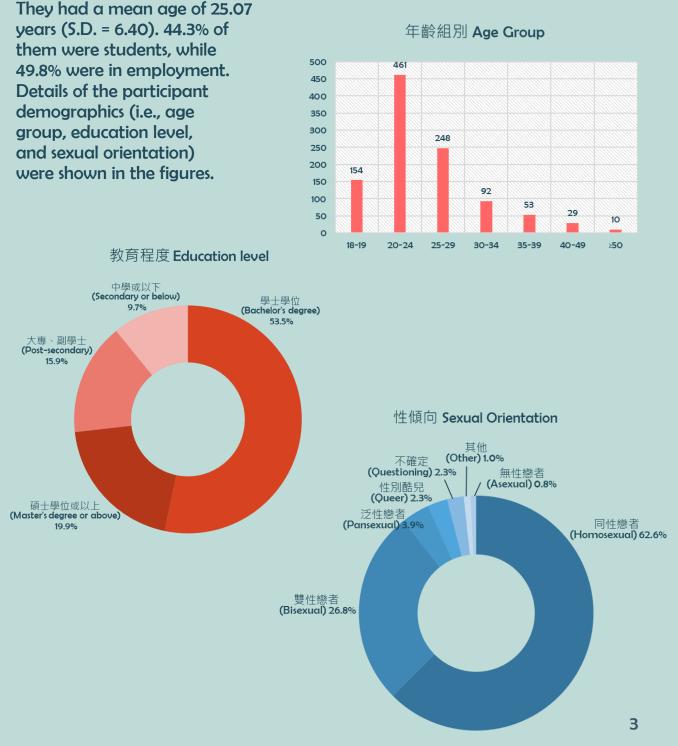
Data collection of the study was conducted through an anonymous online questionnaire from February to April 2017. Targeted and snowball sampling was adopted for participant recruitment. Participant recruitment messages were disseminated through local LGBT social media, community organizations, advocacy groups, and social venues.

PARTICIPANTS

A total of 1,050 LGBT individuals participated in the study. The inclusion criteria were individuals: (1) aged 18 or above, (2) who identified as lesbian, gay, bisexual, transgender, queer, or otherwise not heterosexual, and (3) currently living in Hong Kong.

DEMOGRAPHICS

About 52.7% of the participants were female, 46% were male, and 1.3% indicated their gender as other, including transgender, non-binary, gender fluid, and etc.



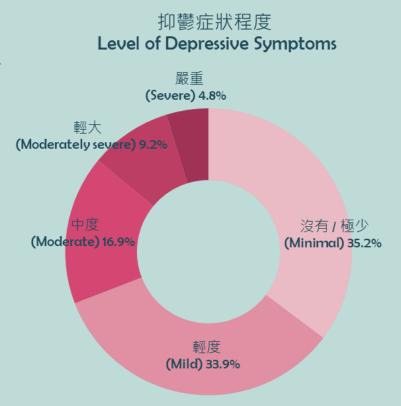
RESEARCH FINDINGS

DEPRESSIVE SYMPTOMS

The level of depressive symptoms was assessed by the 9-item Patient Health Questionnaire [4]. Respondents were asked to indicate how frequently they experienced depressive symptoms (e.g., feeling down, having trouble falling asleep, and losing interest in doing things) over the past 2 weeks.

Based on the cut-off criteria established by Kroenke et al. [4], about 30.9% of the respondents were considered as having moderate or severe level of depressive symptoms. They have met the cut-off score of 10, indicating high likelihood of having depression [4].

A local study [5] was conducted in 2016 to assess the level of depressive symptoms among general public using the same measure. Among 2,351 people surveyed, 14.6% met the cut-off score of 10 and showed moderate or severe level of depressive symptoms. Comparatively speaking, a greater proportion of LGBT individuals showed moderate or severe level of depressive symptoms, more than double the percentage reported in the study of the general Hong Kong population.

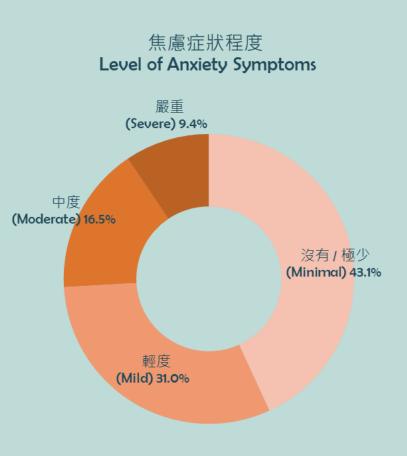


RESEARCH FINDINGS

ANXIETY SYMPTOMS

The level of anxiety symptoms was assessed by the 7-item measure on Generalized Anxiety Disorder [6]. Respondents were asked to indicate how frequently they experienced anxiety symptoms (e.g., feeling nervous, not being able to control worrying, and being so restless that it is hard to sit still) over the past 2 weeks.

The anxiety symptoms among LGBT individuals warrant equal attention. Based on the cut-off criteria established by Spitzer et al. [6], about 25.9% of the respondents were considered as having moderate or severe level of anxiety symptoms. They have met the cut-off score of 10, indicating high likelihood of having generalized anxiety disorder [7].



WHAT DOES IT MEAN?

KEY MESSAGES

- Almost 1 in 3 LGBT respondents showed moderate or severe level of depressive symptoms. It was more than double the proportion reported in the study of the general Hong Kong population.
- 1 in 4 LGBT respondents showed moderate or severe level of anxiety symptoms.
- Mental health is determined by multiple and interacting psychological, social, and environmental factors. The research findings on protective and risk factors of mental health among LGBT individuals will be discussed specifically in upcoming research reports.

RECOMMENDATIONS

- Given that LGBT individuals are at significant risk of depression and anxiety, government should allocate more resources on developing LGBT-friendly mental health services and programs for promoting better mental health.
- LGBT-affirmative approach should be adopted in existing counseling and mental health services to support LGBT individuals to cope with their challenges and address their health needs. According to the American Psychological Association [8-9], some of the guidelines include:
 - Same-sex, both-sex, and opposite-sex attractions, feelings, and behavior are normal variants of human sexuality.
 - Efforts to change sexual orientation have not been shown to be effective or safe.
 - Gender is a nonbinary construct that allows for a range of gender identities.
 - A person's gender identity may not align with sex assigned at birth.

REFERENCES

- 1. Bostwick, W. B., Boyd, C. J., Hughes, T. L., & McCabe, S. E. (2010). Dimensions of sexual orientation and the prevalence of mood and anxiety disorders in the United States. *American Journal of Public Health, 100*(3), 468-475.
- Marshal, M. P., Dietz, L. J., Friedman, M. S., Stall, R., Smith, H. A., McGinley, J., ... & Brent, D. A. (2011). Suicidality and depression disparities between sexual minority and heterosexual youth: A meta-analytic review. *Journal of Adolescent Health*, 49(2), 115-123.
- 3. Hughes, T., McCabe, S. E., Wilsnack, S. C., West, B. T., & Boyd, C. J. (2010). Victimization and substance use disorders in a national sample of heterosexual and sexual minority women and men. *Addiction, 105*(12), 2130-2140.
- 4. Kroenke, K., Spitzer, R. L., & Williams, J. B. (2001). The PHQ-9: Validity of a brief depression severity measure. *Journal of General Internal Medicine, 16*(9), 606-613.
- 5. Mental Health Association of Hong Kong. (2017). 全港抑鬱指數問卷調查 2016. https://www.jmhf.org/upload_files/journal/362/360.pdf
- 6. Spitzer, R. L., Kroenke, K., Williams, J. B., & Löwe, B. (2006). A brief measure for assessing generalized anxiety disorder: The GAD-7. *Archives of Internal Medicine, 166*(10), 1092-1097.
- 7. Swinson, R. P. (2006). The GAD-7 scale was accurate for diagnosing. *Evidence Based Medicine, 11*(6), 184.
- 8. American Psychological Association. (2012). Guidelines for psychological practice with lesbian, gay, and bisexual clients. *American Psychologist*, 67(1), 10-42.
- 9. American Psychological Association. (2015). Guidelines for psychological practice with transgender and gender nonconforming people. *American Psychologist, 70*(9), 832-864.

Cited as:

Chan, R. C. H., & Mak, W. W. S. (2018). *LGBT community mental health research report series 1: Mental health*. Hong Kong: Diversity and Well-being Laboratory, Department of Psychology, The Chinese University of Hong Kong.