



INTRODUCTION

- Existing literature identifies a relationship between sexual orientation and mental illness.
- Individuals who identify as LGB face an increased risk of diagnoses including generalized anxiety disorder (Bostwick et al., 2010), depression (Sakharkar & Friday, 2022), mood disorders, eating disorders, and substance use disorders (Gmelin et al., 2022).
- Less is known about whether social support can reduce the risk of mental illness among LGB individuals.

RESEARCH QUESTIONS

- Can we find evidence to further support the argument that sexual orientation and mental illness are related?
- Is the relationship between sexual orientation and mental illness moderated by an individual's perceived social support?

METHOD

Sample

- Wave 5 of the U.S. National Longitudinal Survey of Adolescent Health (or ADDHEALTH) measures the physical, psychological, and social health of 4,196 participants in their late-30s and early-40s.
- Only complete cases were retained for this study; the final sample size is 2,040.

Measures

- Sexual Orientation:** coded dichotomously— either “heterosexual” or “LGB”.
- Mental Illness Diagnosis:** binary categorical variable created by collapsing responses to whether participants have been diagnosed with depression, PTSD, anxiety/mood disorders, and/or eating disorders.
- Social Support:** categories including “low”, “moderate”, and “high” created by summing participants' binary responses to 12 questions regarding perceived social support.

RESULTS

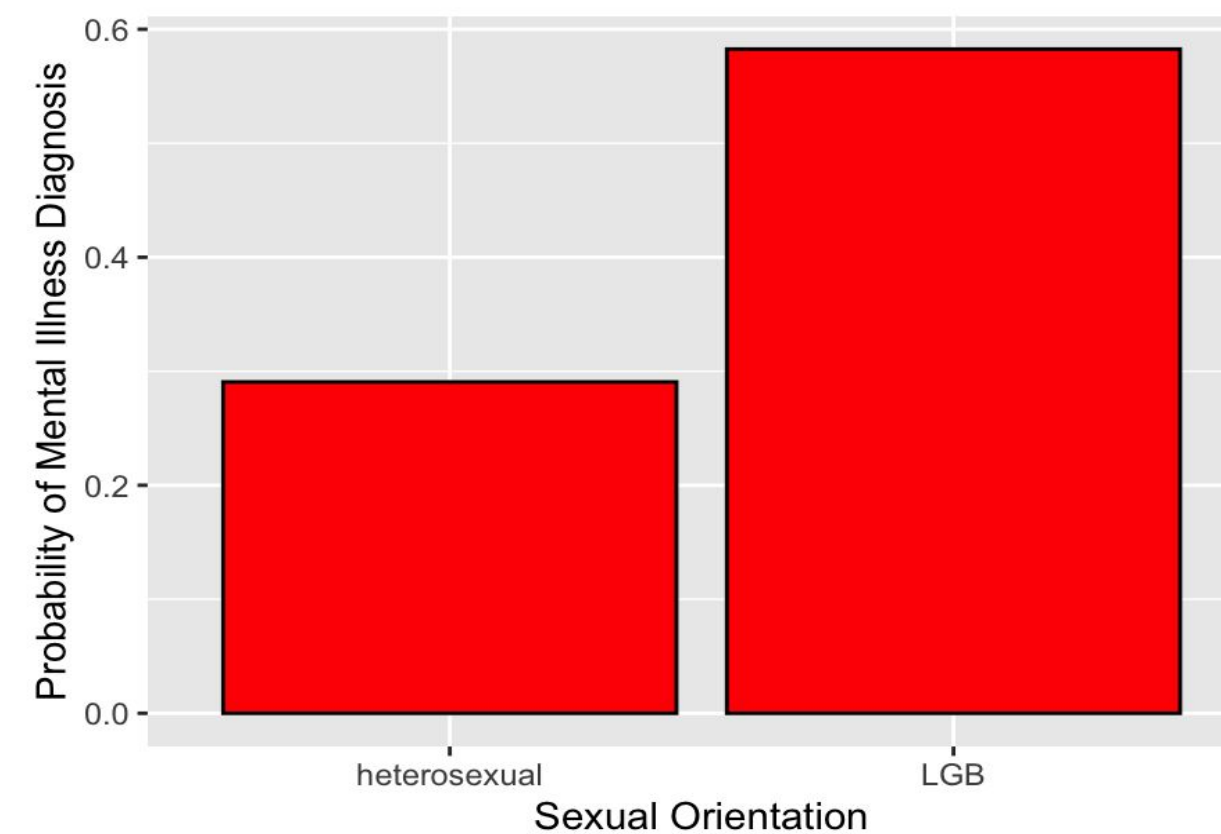
Univariate

- 11.27% of participants identify as lesbian, gay, or bisexual.
- 32.35% of participants have previously been diagnosed with any of the 4 following mental disorders: depression, PTSD, anxiety/mood disorders, and/or eating disorders.

Bivariate

- A chi-squared test of independence showed that **sexual orientation** was significantly and positively associated with **mental illness diagnosis** ($\chi^2 = 78.174$, $p < 2.2e-16$).
- A post-hoc chi-square test indicates that a statistically larger proportion of LGB-identifying participants were diagnosed with at least 1 of 4 mental illnesses than their heterosexual counterparts.

Figure 1: Sexual Orientation and Probability of Mental Illness Diagnosis



Regression Analyses

- Like the chi-squared test of independence, a logistic regression revealed that **LGB-identifying participants** (O.R. 3.41, CI 2.58 - 4.52) were significantly more likely to be diagnosed with a mental illness than heterosexual participants, such that the odds of an LGB participant having a mental illness diagnosis were 3.4 times those of a heterosexual participant.
- A separate logistic regression showed that individuals with **low** (O.R. , CI) and **moderate** (O.R., CI) **levels of social support** were significantly more likely to be diagnosed with a mental illness than participants with high levels of social support.
- When controlling for social support, **sexual orientation** (O.R. 3.29, CI 2.49 - 4.38) and **mental illness diagnosis** were still significantly associated. LGB participants were 3.29 times more likely to have a mental illness diagnosis than heterosexual participants.
- Social support levels** (Beta = 0.79412, $p = 0.501$; Beta = -0.23854, $p = 0.522$) do not significantly moderate the relationship between sexual orientation and mental illness diagnosis.

Figure 2: Odds of Mental Illness Diagnosis by Sexual Orientation

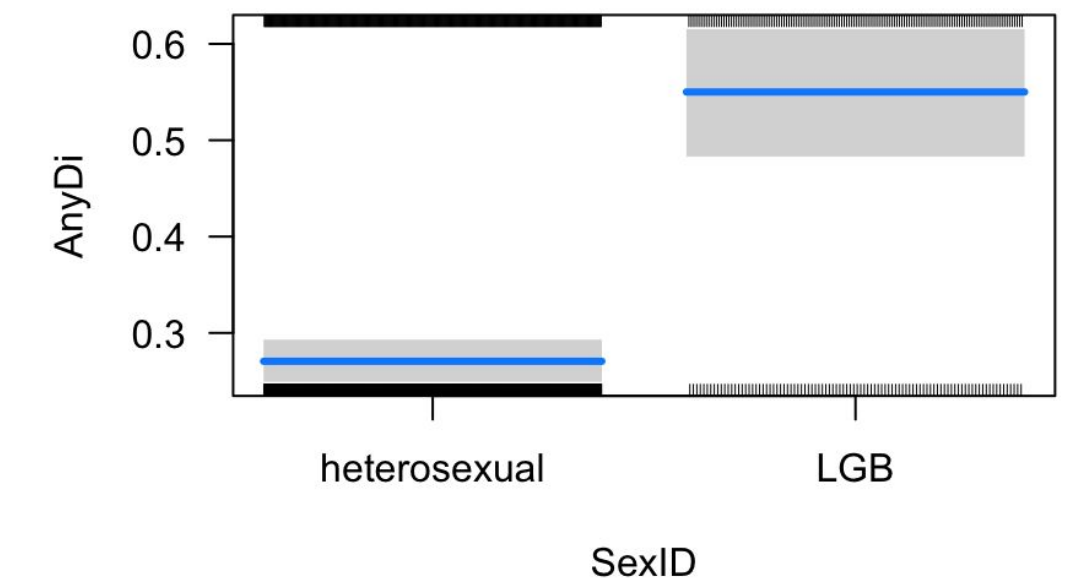
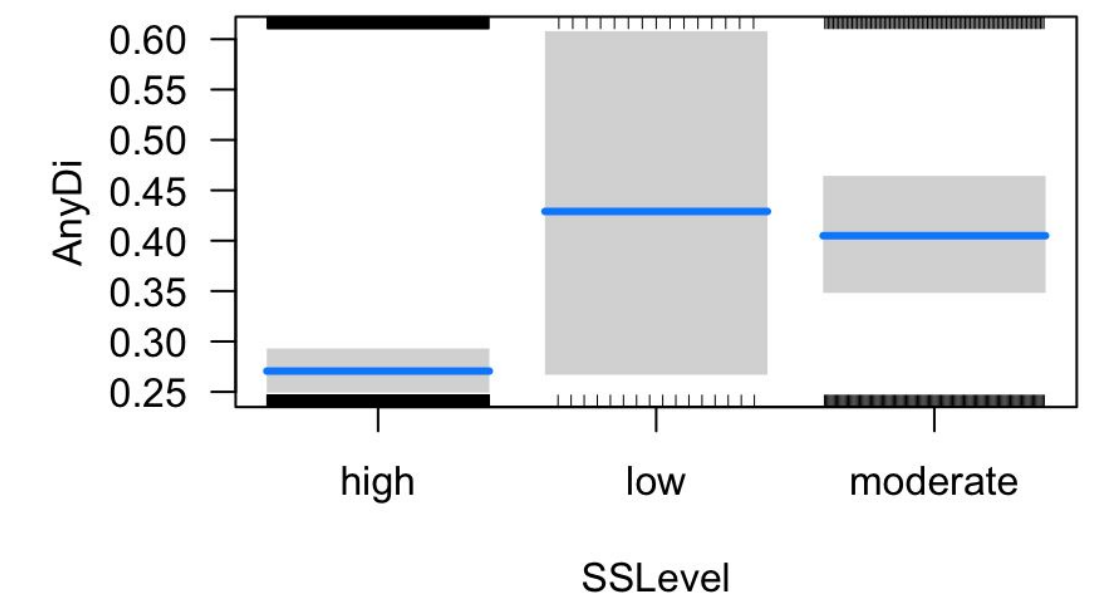


Figure 3: Odds of Mental Illness Diagnosis by Social Support Level



DISCUSSION

- This study further demonstrates the association between sexual orientation and mental illness diagnosis.
- Social support level does not appear to be a significant moderator of the relationship between sexual orientation and mental illness diagnosis.
- Health professionals and mental health counselors would do well to consider the increased risk of mental illness among their LGB+ patients, and perform mental illness screenings more frequently and rigorously with these individuals.
- Further research is needed to determine possible moderators of the relationship between sexual orientation and mental illness; identifying these moderators might allow for the development of specific interventions.

REFERENCES

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