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# LGB depression symptoms in Brazil during COVID-19 living with and without their family: A Brief Report

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## Abstract

This study investigated the impact of the COVID-19 pandemic on depression scores among LGB individuals in Brazil, focusing on differences in mental health outcomes for those living with their families compared to those living independently. The hypothesis suggested that LGB individuals living with their families would experience higher depression scores due to unique challenges related to minority stress and social discrimination. The study analyzed 1,050 participants aged 18 to 70 years, including 170 lesbians (16%), 346 gays (33%), and 534 bisexuals (50%). The sample was diverse in terms of gender, ethnicity, and regional distribution within Brazil. Results revealed a significant difference in depressive symptoms between LGB individuals living with their families and those living independently, with higher levels of depressive symptoms observed in the group living with their families. Furthermore, bisexuals had higher rates of depressive symptoms than others in the sample. This finding underscores the potential impact of social support and family relationships on the mental health outcomes of LGB individuals during the COVID-19 pandemic especially for women and bisexual people.

Keywords: LGB mental health, depression, COVID-19 pandemic, minority stress, social support



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The COVID-19 pandemic has had a profound impact on all aspects of our lives, with mental health being a particularly affected area. As individuals around the world navigate the challenges posed by this global health crisis, heightened levels of stress, anxiety, and depression have become prevalent (Lakhan et al., 2020). The fear of falling ill, disruption of daily routines, and the need for physical distancing are among the factors contributing to the mental health toll of the pandemic (Usher et al., 2020). While research has explored the mental health effects on various populations, there remains a notable research gap in Brazil specifically regarding the mental well-being of LGBT individuals living with their families. This paper aims to address this gap by examining the depressive symptoms experienced by LGB individuals during the COVID-19 pandemic, focusing on the impact of familial arrangements on their mental health in the Brazilian context. By exploring the intersection of LGBT mental health, familial dynamics, and the challenges presented by the pandemic, this study aims to contribute to our understanding of this under-researched area in Brazil and provide insights for future targeted interventions and support strategies.

Depression serves as a prototypical exemplification of a prevailing mental health disorder that exerts its influence across diverse age cohorts, genders, and socio-cultural strata. Notably, disasters can disrupt mental health and well-being, with depression being one of the most common mental disorders. There has been a marked increase in depression in Brazil up until 2019 (Lopes et al., 2022). This trend has become even more pronounced during the pandemic, where the rates of depression have exhibited an even greater upward trajectory (Mello, 2022, Agência Brasil). However, certain subpopulations may be particularly susceptible to depression owing to factors such as social discrimination and the manifestation of minority stress (English et al., 2021). Notably, members of the LGBT community living with their families are disproportionately impacted by these stressors (Gato et al., 2021). The cohabitation experience of LGBT individuals with their families can be fraught with violence, as they confront additional challenges pertaining to their sexual or gender identity, which can engender sentiments of isolation, anxiety, and depression (Lisboa, 2020). In conclusion, depression, a prevalent mental health disorder, has shown a marked increase across Brazil, particularly intensified during the pandemic and significantly affecting vulnerable populations such as the LGBT community, who face additional stressors related to social discrimination and identity conflicts.

The experience of minority stress stands as a pivotal determinant in fostering the onset of depression within the context of LGBT individuals cohabiting with their families. Minority stress entails the enduring burden of chronic stress and societal stigmatization engendered by residing in an environment where one's identity encounters limited acceptance or support (Meyer, 2003).



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For LGBT individuals living with their families, this predicament encompasses the exposure to unfavorable attitudes or convictions expressed by family members, encounters with rejection or disapproval from peers and wider society, as well as the formidable tribulations entailed in the process of disclosure and open living (Feinstein et al., 2014). Indeed, the profound impact of this process is exemplified by a meticulous investigation conducted with a cohort of 12 young adults, which delved deeply into the realm of family dynamics and familial violence vis-à-vis the "coming out" experience (Braga et al., 2018). Collectively, these experiences synergistically foster a prevailing sense of social isolation and accentuate the manifestation of depressive symptoms.

In understanding the complex relationship between LGB and their families, it is vital to consider the empirical literature dedicated to this subject. Bouris et al.'s (2010) systematic review critically explores the role parental attitudes and behaviors play in shaping the mental health outcomes of LGB youth. The authors stress that both negative and positive parental influences can significantly alter the psychosocial well-being of these individuals. In particular, they identify negative parental influences such as rejection, homophobia, and prejudice as sources of increased stress and poorer mental health outcomes. Conversely, parental acceptance, understanding, and support were found to correlate with improved mental health outcomes, underscoring the potential protective function of a positive family environment. Complementing this, the empirical work by Ryan et al. (2010) delves deeper into the influence of family acceptance in the health of LGBT young adults. The authors found that family acceptance during the adolescent years has a profound long-term impact on the mental and physical health of LGBT individuals in their young adulthood. Their findings emphasized the critical role played by the family in shaping future health outcomes, underscoring the importance of nurturing acceptance and understanding in family contexts to enhance the mental health of LGBT individuals.

Meanwhile, McConnell, Birkett, & Mustanski's (2016) examined the role of familial social support in mental health trajectories among LGBT youth. Their findings reinforce the correlation between positive family support and improved mental health. Their work particularly highlights that familial social support can mitigate the negative impacts of external discrimination and minority stress, thereby influencing a more positive mental health trajectory for LGBT youth. Adding to this body of work, Toomey, Ryan, Diaz, Card, and Russell (2010) provide insights into the experiences of gender-nonconforming LGBT youth, particularly concerning school victimization and its impact on their psychosocial adjustment. This study emphasizes how external environments, such as school, can interact with familial factors to shape mental health outcomes. For example, in instances where family acceptance is high, the negative impacts of external victimization can be partially mitigated. Lastly, Katz-Wise, Rosario, and Tsappis's (2016) review reiterates the connection between LGBT youth and family acceptance.

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They argue that families play a critical role in shaping an LGBT youth's identity development, self-esteem, and mental health. They suggest that families who actively foster an environment of acceptance and understanding can significantly contribute to more positive mental health outcomes among LGBT youth.

In conclusion, these studies collectively highlight the complex interplay of family dynamics, societal factors, and individual experiences in shaping the mental health outcomes of LGBT individuals. The findings underscore the vital role families play in influencing the mental health trajectories of their LGBT members and the potential for families to act as a buffer against external stressors. This emphasizes the necessity of addressing these familial dynamics in mental health interventions targeting this population.

Despite the challenges that LGBT individuals living with their families may face, there are also opportunities for support and resilience. By building a strong support network, seeking out mental health resources, and connecting with other members of the LGBT community, individuals can find ways to cope with the stressors of minority stress and improve their mental health outcomes (Mongelli et al., 2019; Pavelchuk et al., 2019). Additionally, by increasing awareness and education around the experiences of LGBT individuals and their families, we can work towards creating a more inclusive and supportive society for all.

For this work we hypothesized that the COVID-19 pandemic has differentially impacted depression scores in LGB individuals living with their families compared to those living without it, with those living with families experiencing higher depression scores due to unique challenges related to minority stress and social discrimination. Furthermore, we examined differences among lesbians, gays and bisexual regarding depression rates.

### **Method:**

**Participants:** The study analyzed 1,050 participants from diverse regions in Brazil who identified as lesbians (170, 16%), gays (346, 33%), and bisexuals (534, 50%). Participants were aged 18 to 70 years (mean age=30 years, SD=8.96), with 38% identifying as non-white. The majority identified as white (59%) and were primarily located in the Southwest (49.7%), Northwest (22.5%), North (19.4%), and Midwest (4.3%) regions. The designated sex was 43% male and 56% female, with 26% being students and 30% formal workers.

### **Measures:**

The Center for Epidemiologic Studies Depression Scale (CES-D): is a widely used self-report questionnaire that measures the severity of depressive symptoms. The scale consists of 20 items, each rated on a 4-point Likert scale, covering various symptoms of depression.

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The total score ranges from 0 to 60 and has good reliability and validity. The CES-D can help identify individuals experiencing symptoms of depression and may benefit from further evaluation and treatment.

Socioeconomic and demographic questionnaire: self-report measure used to assess an individual's sexual orientation and living arrangements within the LGB population. The questionnaire includes items such as sexual orientation (e.g., gay, lesbian, bisexual), living arrangements (e.g., living alone, living with family, living with partner), and other relevant demographic information.

Procedure: The research procedure for this study was conducted through an online survey that was distributed via the specific website and social media groups. Participants were invited to complete the survey voluntarily, and the questionnaire included items related to sexual orientation, living arrangements, and depressive symptoms. The data obtained from the survey was analyzed using a Student's T test to compare the means of two groups, specifically those who reported "I don't live with my family" and those who reported "I live with my family". This statistical analysis provided valuable insights into the relationship between living arrangements and depressive symptoms within the LGB population. Overall, the online survey method allowed for efficient data collection from a diverse range of participants and provided a valuable platform for investigating the impact of living arrangements on mental health outcomes among LGB individuals. Moreover, the statistical test Analysis of Variance was used to determine if there were significant differences between the means of three or more groups. It assesses the variability within each group and compares it to the variability between groups to determine if the observed differences are statistically significant. ANOVA helps identify whether there is enough evidence to support the hypothesis that the means of the groups are not equal (in this case LGB), providing insights into group differences in the variables under investigation (Depression symptoms). Data was processed in the software JASP.

### Results:

Due to the COVID-19 pandemic, there was a slight increase in the average CES-D score compared to the conventional baseline. Consequently, adjustments were made to the scale norms within the sample. The higher scores can likely be attributed to the data collection period, which spanned from March 2021 to September 2021. It is important to note that all comparisons were conducted among the sample subjects exclusively. Additionally, the distribution of depression within the sample followed a normal distribution, thereby validating the use of parametric tests.



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**Table 1.** Descriptive statistics for those who live with their family and for those who do not live with family.

Living with family?		Yeas		No	
	N	M	SD	N	SD
Age		32.51	8.82		8.57
CES-D Total	972	32,51	12,49		12,35
Excluded cases*	113				
Lesbians	170	32,72	11,24		11,63
Gays	346	28,48	13,11		12,35
Bisexuals	456	33,89	11,53		12,35
Bi Males	96				
Bi Females	359				

\* Values were considered missing when not falling into the category LGB

Based on the results, it was found that the LGB group within the sample had diverse average levels of depressive symptoms. However, when considering the entire sample of LGB individuals, a comparison was made between those who reported "I don't live with my family" and those who reported "I live with my family". The sample size consisted of 468 participants who answered, "I don't live with my family" and 617 participants who answered, "I live with my family". A two-sample t-test was conducted to compare the means of the two groups, and the results showed a statistically significant difference between the means ( $t(1083) = -3.779, p < .001$ ), with a small to medium effect size (Cohen's  $d = -0.232$ ). Therefore, those who reported "I don't live with my family" had a slightly lower average response compared to those who reported "I live with my family". These findings highlight the potential impact of living arrangements on LGB individuals' well-being and suggest the importance of considering social support and family relationships in interventions aimed at improving mental health outcomes. Moving forward, comparisons between the L, G, and B groups are made with respect to the level of depressive symptoms.



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### *Comparisons in between groups:*

Additionally, we compared depressive symptoms among those three distinct groups: gays, lesbians, and bisexuals. The Center for Epidemiologic Studies Depression Scale (CES-D) was employed to quantify these symptoms. A one-way Analysis of Variance (ANOVA) was conducted to compare the CES-D scores between gays, lesbians, and bisexuals. The results revealed a statistically significant difference between the groups,  $F(3, 1059) = [18.557]$ ,  $p = [<.001]$ .

In our sample, the gay participants exhibited a mean CES-D score of 28.57, with a standard deviation of 8.94. The lesbian group had a mean score of 31.14 and a standard deviation of 9.04, while the bisexual group had a mean score of 32.29 and a standard deviation of 9.08.

Post-hoc comparisons using the Tukey HSD test indicated that the mean score for the group of bisexuals was significantly different from the group self-declared as a gay man. The group self-declared as lesbians did not significantly differ from the group of bisexuals but was significantly different from the Group of gay men. To summarize, the findings of our study suggest that there are significant variations in depressive symptoms, as measured by the CES-D, across gays, lesbians, and bisexuals. This emphasizes the importance of considering sexual orientation in research into depression and could have important implications for the development of future interventions.

## **Discussion and conclusion**

The present study has provided valuable insights into the role of living arrangements and their impact on the manifestation of depressive symptoms - defined as persistent feelings of sadness and loss of interest - within the lesbian, gay, bisexual (LGB) population. This highlights the significant influence of familial relationships in determining mental health outcomes. It should be clarified that our findings represent only a facet of a broader research endeavor. Future research will delve into qualitative experiences, aiming to provide a more comprehensive understanding of the diverse factors contributing to depressive symptoms.

Remarkably, our findings reveal a higher prevalence of depressive symptoms among LGB individuals residing with their families. Noteworthy too, is the potential significant influence of gender roles, in conjunction with sexual orientation and family dynamics, on the observed scores. A robust amount of scientific research has already gathered evidence about higher levels depressive symptoms on L, G, and B people (e.g., Hoy-Ellis 2021). Results such of Hoy-Ellis (2021) review highlights the association of minority stressors such as identity concealment and poor mental health outcomes.



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Indeed, other studies have contributed to explain the role of family acceptance and disclosure as protective factors for young LGB (Ryan et. al. 2010). Our study paves the way for further exploration and nuanced examinations to understand the complex nature of depressive experiences within the LGB community.

As suggested by prior studies, overall familial support can serve as a protective factor against mental health issues (Poteat, Mereish, DiGiovanni, & Koenig, 2011). However, for the LGB population, this protective function might be compromised due to potential stigma, discrimination, or lack of acceptance from family members, subsequently leading to elevated depressive symptoms (Bouris et al., 2010). Despite this, knowledge about the living arrangements of LGB adults and their associated impacts is limited. A Taiwanese study, for example, revealed that familial sexual stigma directly increases a feeling of self-loathing related to one's sexual orientation, known as internalized homonegativity, mediated by self-identity disturbance. Family support indirectly decreases internalized homonegativity through reducing self-identity disturbance. This shows the intertwined relationship between sexual orientation, gender, family dynamics, and mental health - an area our study also explored.

A key element in our findings is related to the bisexual population. This group might face additional familial pressures arising from the need to conceal their identity to avoid social stigma or discrimination. Bisexual individuals frequently encounter challenges when navigating their familial relationships within the context of monosexist and heterosexist norms and expectations (Scherrer, Kazyak & Schmitz, 2015). This identity suppression, a form of minority stress (Meyer, 2003), may intensify feelings of isolation and rejection. As a result, there may be an increased prevalence of mental health disorders, such as depression and anxiety (Pachankis, 2007). This concept aligns with empirical evidence, as a meta-analysis involving 52 studies demonstrated that bisexual individuals present higher or equivalent rates of depression and anxiety compared to gay/lesbian counterparts (Ross et al., 2018). Results like this might shed light on a less explored topic which is dual identity concealment for both heterosexual and non-heterosexual peers regarding bisexuality. For this study, our methodology included an ANOVA analysis that compared depressive symptoms among gays, lesbians, and bisexuals. Post hoc tests showed that gay individuals had lower depression scores than lesbians and bisexuals, while lesbians presented lower scores than bisexuals. The highest scores were found among bisexuals, underscoring the unique pressures this group may face. The large number of gender-designated women may have contributed to elevated depression scores. Indeed, the feminine sample exhibited higher raw scores of depression compared to the rest of the sample. Further analysis should explore these interactions, considering theories such as Intersectionality as a critical social tool to examine this phenomenon more comprehensively.





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Moreover, global crises such as the COVID-19 pandemic can exacerbate these mental health challenges. Evidence suggests an increased prevalence of major depressive disorder and anxiety disorders corresponding to the rise in daily SARS-CoV-2 infection rates and reductions in human mobility. These impacts disproportionately affect females and younger age groups (Santomauro et al., 2021). Although the minority status per se exacerbates the effect of uncertain times on mental health due to the lack of support and adequate public policies, our results indicate a greater vulnerability among bisexual women to the negative mental health impacts of such crises. Considering these findings, it is essential to develop interventions tailored to the unique challenges faced by bisexual individuals and those living with their families. These interventions should offer robust support and resources to help alleviate the effects of minority stress and related mental health outcomes.

In conclusion, this study emphasizes the significant influence of living arrangements on depressive symptoms within the LGB population, pointing to the need for further investigation into other potential contributing factors such as specific dimensions of minority stress. Although our results are consistent with the literature, it is noteworthy that this is only a brief report of a major study, and further statistical analysis can be conducted to explore other variables that might better explain these results. Future research efforts should aim to understand these intricate relationships to inform the creation of effective interventions, thereby enhancing mental health outcomes and promoting overall well-being within the LGB community.

### References:

- Agrawal, A., Lakhan, R., & Sharma, M. (2020). Prevalence of Depression, Anxiety, and Stress during COVID-19 Pandemic. *Journal of Neurosciences in Rural Practice*, 11(4), 519–525. <https://doi.org/10.1055/s-0040-1716442>
- Balducci, J., Galeazzi, G. M., Mattei, G., Mongelli, F., Perrone, D., Sacchetti, A., & Ferrari, S. (2019). Minority stress and mental health among LGBT populations: An update on the evidence. *Minerva Psichiatrica*, 60(1), 27–50. <https://doi.org/10.23736/S0391-1772.18.01995-7>



## International Conference on LGBT studies

📅 09–11 December 2022 📍 Berlin, Germany

- Boone, C. A., Bowleg, L., Carter, J. A., English, D., Forbes, N., Malebranche, D. J., Rendina, H. J., & Talan, A. J. (2021). Intersecting Structural Oppression and Black Sexual Minority Men's Health. *American Journal of Preventive Medicine*, 60(6), 781–791. <https://doi.org/10.1016/j.amepre.2020.12.022>
- Bouris, A., Guilamo-Ramos, V., Pickard, A., Shiu, C., Loosier, P. S., Dittus, P., Gloppen, K., & Michael Waldmiller, J. (2010). A systematic review of parental influences on the health and well-being of lesbian, gay, and bisexual youth: time for a new public health research and practice agenda. *The journal of primary prevention*, 31(5-6), 273–309. <https://doi.org/10.1007/s10935-010-0229-1>
- Braga, I. F., Oliveira, W. A. de ., Silva, J. L. da ., Mello, F. C. M. de ., & Silva, M. A. I. (2018). Family violence against gay and lesbian adolescents and young people: a qualitative study. *Revista Brasileira De Enfermagem*, 71, 1220–1227. <https://doi.org/10.1590/0034-7167-2017-0307>
- Damásio, B. F., Paveltchuk, F. de O., & Borsa, J. C. (2019). Impact of sexual orientation, social support and family support on minority stress in lgb people. *Trends in Psychology*, 27(3), 735–748. <https://doi.org/10.9788/TP2019.3-10>
- Davila, J., Feinstein, B. A., Goldfried, M. R., & Wadsworth, L. P. (2014). Do parental acceptance and family support moderate associations between dimensions of minority stress and depressive symptoms among lesbians and gay men? *Professional Psychology: Research and Practice*, 45(4), 239–246. <https://doi.org/10.1037/a0035393>
- Durkin, J., Usher, K., & Bhullar, N. (2020). The COVID-19 pandemic and mental health impacts. In *International Journal of Mental Health Nursing* (Vol. 29, Issue 3, pp. 315–318). Blackwell Publishing. <https://doi.org/10.1111/inm.12726>
- Gato, J., Leal, D., & Seabra, D. (2021). When home is not a safe haven: Effects of the COVID-19 pandemic on LGBTQ adolescents and young adults in Portugal. *Psicologia*, 34(2), 89–100. <https://doi.org/10.17575/psicologia.v34i2.1667>



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Gomes, N. L., Junger, W. L., Lopes, C. de S., & Menezes, P. R.. (2022). Trend in the prevalence of depressive symptoms in Brazil: results from the Brazilian National Health Survey 2013 and 2019. *Cadernos De Saúde Pública*, 38, e00123421. <https://doi.org/10.1590/0102-311X00123421>

Griffiths, M.D., Lin, C.Y., Pakpour, A.H. et al. (2022). Relationships of familial sexual stigma and family support with internalized homonegativity among lesbian, gay and bisexual individuals: The mediating effect of self-identity disturbance

and moderating effect of gender. *BMC Public Health* 22, 1465. <https://doi.org/10.1186/s12889-022-13815-4>

Hoy-Ellis, C. P. (2023). Minority Stress and Mental Health: A Review of the Literature, *Journal of Homosexuality*, 70:5, 806-830, DOI: 10.1080/00918369.2021.2004794

Katz-Wise, S. L., Rosario, M., & Tsappis, M. (2016). Lesbian, Gay, Bisexual, and Transgender Youth and Family Acceptance. *Pediatric clinics of North America*, 63(6), 1011–1025. <https://doi.org/10.1016/j.pcl.2016.07.005>

Lisboa, V. (2020, May 17). LGBTIs vivem acirramento de violência familiar em isolamento social. Agência Brasil. Retrieved from <https://agenciabrasil.ebc.com.br/direitos-humanos/noticia/2020-05/lgbtis-vivem-acirramento-de-violencia-familiar-em-isolamento-social>

McConnell, E. A., Birkett, M., & Mustanski, B. (2016). Families Matter: Social Support and Mental Health Trajectories Among Lesbian, Gay, Bisexual, and Transgender Youth. *The Journal of adolescent health : official publication of the Society for Adolescent Medicine*, 59(6), 674–680. <https://doi.org/10.1016/j.jadohealth.2016.07.026>

Mello, D. (2022, April 27). Diagnóstico de depressão cresce 40% durante a pandemia. Agência Brasil. Retrieved from: Diagnóstico de depressão cresce 40% durante a pandemia | Agência Brasil (ebc.com.br)

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## International Conference on LGBT studies

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- Meyer, I. H. (2003). Prejudice as stress: Conceptual and measurement problems. *American Journal of Public Health*, 93(2), 262–265. <https://doi.org/10.2105/AJPH.93.2.262>
- Ross, L. E., Salway, T., Tarasoff, L. A., MacKay, J. M., Hawkins, B. W., & Fehr, C. P. (2018). Prevalence of Depression and Anxiety Among Bisexual People Compared to Gay, Lesbian, and Heterosexual Individuals: A Systematic Review and Meta-Analysis. In *Journal of Sex Research* (Vol. 55, Issues 4–5, pp. 435–456). Routledge. <https://doi.org/10.1080/00224499.2017.1387755>
- Ryan, C., Russell, S. T., Huebner, D., Diaz, R., & Sanchez, J. (2010). Family acceptance in adolescence and the health of LGBT young adults. *Journal of child and adolescent psychiatric nursing : official publication of the Association of Child and Adolescent Psychiatric Nurses, Inc*, 23(4), 205–213. <https://doi.org/10.1111/j.1744-6171.2010.00246.x>
- Santomauro, D. F., Mantilla Herrera, A. M., Shadid, J., Zheng, P., Ashbaugh, C., Pigott, D. M., Abbafati, C., Adolph, C., Amlag, J. O., Aravkin, A. Y., Bang-Jensen, B. L., Bertolacci, G. J., Bloom, S. S., Castellano, R., Castro, E., Chakrabarti, S., Chattopadhyay, J., Cogen, R. M., Collins, J. K., ... Ferrari, A. J. (2021). Global prevalence and burden of depressive and anxiety disorders in 204 countries and territories in 2020 due to the COVID-19 pandemic. *The Lancet*, 398(10312), 1700–1712. [https://doi.org/10.1016/S0140-6736\(21\)02143-7](https://doi.org/10.1016/S0140-6736(21)02143-7)
- Toomey, R. B., Ryan, C., Diaz, R. M., Card, N. A., & Russell, S. T. (2010). Gender-nonconforming lesbian, gay, bisexual, and transgender youth: school victimization and young adult psychosocial adjustment. *Developmental psychology*, 46(6), 1580–1589. <https://doi.org/10.1037/a0020705>