LGBTQ people experience alarmingly high rates of mental health challenges. It disrupts their daily lives and can be life-threatening, especially for children and youth. Too often, false narratives attempt to blame LGBTQ people for their own mental health challenges. The truth is that mental health challenges in the LGBTQ community are largely due to stigma, discrimination and bias in all of its forms. LGBTQ people also face gaps in receiving adequate mental health care. Significant gaps in health insurance coverage, economic injustice, discrimination, bias, stigma and violence all interact to worsen the mental health challenges facing LGBTQ people today.

MENTAL HEALTH IN LGBTQ ADULTS
HRC Foundation analyzed data from the most recent Behavioral Risk Factor Surveillance System (BRFSS) and observed that:

- 59% of LGBTQ adults and 60% of transgender adults are battling poor mental health today.

- As a result of poor mental and physical health, 19% of LGBTQ adults and 28% of transgender adults say they have sustained periods of time in which they are unable to do usual activities, such as self-care, work or recreation, compared to 15% of non-LGBTQ adults.

- Only 39% say they have been diagnosed with a depressive disorder, despite high prevalence of depressive symptoms among the entire community.

Disclaimer: This resource discusses suicide and other sensitive content. If you or someone you know is in suicidal crisis or emotional distress, call the National Suicide Prevention Lifeline at 1-800-273-8255.
MENTAL HEALTH IN LGBTQ YOUTH

+ More than half of LGBTQ youth (54%), 61% of transgender youth and 61% of questioning youth are battling symptoms of depression, compared to 29% of non-LGBTQ youth.
+ Only 41% of LGBTQ youth have received psychological or emotional counseling.
+ 35% of LGBTQ youth, 45% of transgender youth and 40% of questioning youth have seriously considered attempting suicide, compared to 13% of non-LGBTQ youth.
+ LGBTQ youth who have at least one accepting adult in their life were 40% less likely to attempt suicide.

LGBTQ people of color can experience additional stressors and barriers that contribute to poor mental health and emotional care. View HRC Foundation’s research specifically on mental health and LGBTQ people of color to learn more.

SOCIETAL FACTORS CONTRIBUTING TO MENTAL HEALTH CHALLENGES IN LGBTQ PEOPLE

+ HRC Foundation observed in BRFSS that 18% of LGBTQ adults currently have no health insurance and nearly one-quarter (24%) have needed to see a doctor but could not due to costs.
+ Nearly one in ten (9%) of LGBQ people and one in five (21%) of transgender people said that they received harsh or abusive language from a doctor or other health care provider when receiving care.
+ More than one-fifth (22%) of LGBTQ people are living in poverty compared to 16% of non-LGBTQ people.
+ In 2019, sexual orientation motivated nearly 17% of hate crimes, the third largest category after race and religion. There was also an uptick in gender identity based hate crimes, which rose by 23% from 2018.
+ 30% of youth in foster care and 40% of homeless youth are LGBTQ.

+ 31% of LGBTQ youth, 43% of transgender youth and 40% of questioning youth have been bullied at school, compared to 16% of their non-LGBTQ peers.

+ Intimate partner violence has affected roughly half of LGB women and 54% of transgender and non-binary people.

If you or someone you know are in need of help or assistance, contact The Trevor Project, which runs phone and text chat support lines specifically for LGBTQ youth, or other similar programs committed to providing LGBTQ people with mental health support. You can also take this confidential, online mental health screening test courtesy of our partners at Mental Health America.

OTHER RESOURCES

- Coming Out Resources
- Coming Out to Your Doctor
- Know Your Healthcare Rights

Methodology for BRFSS Analysis

HRC Foundation extracted data from the combined landline and cell phone database to estimate mental health prevalence and other rates. Data on sexual orientation and gender identity was taken from 28 states across contiguous U.S. as well as Alaska, Hawaii and Guam (3T total sites). Weighting (_LLCPWT) was used, as outlined by the Centers for Disease Control and Prevention, to ensure national representation and generalizability of results.