

Prevalence of Depression among Lesbian, Gay, Bisexual, Transgender, and Queer in Pokhara, Nepal

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ABSTRACT

Introduction: LGBTQ stands for lesbian, gay, bisexual, transgender, and queer. Depression is a common and serious medical illness that affects your feeling, thinking, and the way you act in a negative way. The main aim of this study was to assess the prevalence of depression in LGBTQ.

Methods: A descriptive cross-sectional study was done in Paribartan Nepal, Pokhara. Snowball sampling was used from which 54 samples were taken. The participants were either registered in the organization or referred by it. Self-administered questionnaire was used. Hamilton Depression Rating Scale was used to assess depression. Data were analyzed and interpreted using SPSS version 16.0 through percentages and numbers.

Results: Among 54 respondents, the majority were transgender (70.4%) followed by a lesbian (18.5%), gay (5.6%), and bisexual (5.6%). 20.4% had mild depression, 1.9% had moderate depression and 5.6% had severe depression. Transgenders(31.6%) were found to be more depressed than others.

Conclusions: About one-third of the LGBTQ respondents were found to be depressed among which transgender(31.6%) were highly depressed comparatively.

Keywords: *Depression; LGBQ; Prevalence.*

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INTRODUCTION

LGBTQ which stands for L: Lesbian, G: Gay, B: Bisexual, T: Transgender, Q: Queer¹ has been recorded since 1996.² Depression is a common and serious medical illness among all but the rate of getting depression is 1.5-2.5 times higher in LGBTQ than heterosexuals leading to a variety of problems that affect both physically and emotionally.^{3,4} As a result of social stigma, the prevalence of depression is elevated in LGBTQ between 30% to 60%.⁴

Despite the existence of LGBTQs in society, the identity and issues of LGBTQ came forward officially only since 2001 in Nepal. It has taken a number of steps to address the issues of LGBTQs but still, somewhere it is lagging behind.⁵

The objective of the study was to find out the prevalence of depression in the LGBTQ community, residing in Pokhara, Nepal.

METHODS

A descriptive Cross-Sectional Study was conducted among 54 LGBTQ in Pokhara Lekhnath Metropolitan City after obtaining the ethical clearance approval from Nepal Health Research Council (Ref no.663/2018). Snowball sampling technique was used for the study.

We contacted an organization named Paribartan Nepal who are working for LGBTQ community. All the lesbians, gay, bisexual, transgender, and queer people of Paribartan Nepal, Pokhara, and LGBTQ within a network of it or referred by it were included. Also, the participants who were interested and were available during the time of the study were included. Written permission was taken from Paribartan Nepal, Pokhara by submitting a detailed proposal of the study. Privacy and confidentiality of respondents were maintained and ensured.

Sample size: 54 (registered and referred by Paribartan Nepal, Pokhara)

A direct interview was done for quantitative data collection from participants. The tool used for data collection was Hamilton Depression Rating Scale, socio-demographic and general questionnaire. For the depression scale 'Hamilton Depression Rating Scale' was used which is considered the gold standard rating scale for depression.⁶

Scoring system

Depression in our study refers to the health condition measured by Hamilton Depression Rating Scale. Although it contains 21 areas, the patient's score on the first 17 answers was calculated. Its score was categorized as follows:

- 0-7 = Normal
- 8-13 = Mild Depression
- 14-18 = Moderate Depression
- 19-22 = Severe Depression
- >23 = Very Severe Depression

After the collection of data, it was checked thoroughly, edited and coded into different categories. Data entry and analysis were done in IBM Statistical Package for Social Sciences version 16. Descriptive analysis was done and presented through frequency and percentage.

RESULTS

Table 1 shows the prevalence of different levels of depression among 54 LGBTQ respondents where 72.2% of the respondents were normal, 20.4% had mild depression, 1.9% had moderate depression and 5.6% had very severe depression.

Table 1. Prevalence of depression (n=54)

Level of depression	n (%)
Normal	39 (72.2)
Mild depression	11 (20.4)
Moderate depression	1 (1.9)
Very severe depression	3 (5.6)

Table 2 represents the gender wise prevalence of depression among LGBTQ and found that 90% of lesbians were normal and only 10% had mild depression. Among gay respondents, 66.7% were found to be normal and 33.3% had mild depression. Among bisexual respondents, 66.7% were normal and 33.3% had mild depression. Among transgender respondents, 26% were found to be normal, 21.1% had mild depression, 2.6% had moderate depression and 3% were severely depressed. There were no any lesbian, gay and bisexual with moderate and severe depression.

Table 2. Prevalence of depression according to gender

Sexual Orientation	Prevalence of depression			
	Normal n (%)	Mild depression n (%)	Moderate depression n (%)	Very severe depression n (%)
Lesbian	9(90.0)	1(10.0)	0(0.0)	0(0.0)
Gay	2(66.7)	1 (33.3)	0(0.0)	0(0.0)
Bisexual	2(66.7)	1(33.3)	0(0.0)	0(0.0)
Transgender	26(68.4)	8(21.1)	1(2.6)	3(7.9)

We approached 54 interested respondents for the interview and found that about half of the respondents were in between the 26-35 years age group i.e., 53.7%, 35.2% belonged to the age group 16-25 years and 11.1% belonged to the age group 36-45 years. Among the respondents majority were transgender (70.4%) followed by lesbian (18.5%), gay (5.6%) and bisexual (5.6%). All of the respondents were educated having educational coverage up to primary level 13 %, secondary level 44.4% and higher level 42.6%. About the educational level of the respondent's father, 37% of them were illiterate and 63% were literate. Majority of the respondents had business as their major occupation

and the rest of them were involved in agriculture (9.3%), foreign employment (14.8%), government job (7.4%), and private office (33.3%). The majority were Hindu (92.6%) and only 7.4% were Buddhist. On going towards ethnicity, majority were Janajati that occupied 46.3% followed by Chhetri 20.4%, Brahmin 7.4%, Newar 13%, Dalit 13%. 81.5% were unmarried and only 18.5% of the respondents were married among which 1.9% were not satisfied with their marital life and 16.7% were satisfied with their marital life. In the study, it showed that, year of sexual orientation identity revealed between 1-10 years covered by 75.9% and 11-20 years covered 24.1%.

Table 3. Socio-demographic characteristics(n=54)

Socio-demographic variables	n (%)
Age	
16-25	19 (35.2)
26-35	29 (53.7)
36-45	6 (11.1)
Sexual Orientation	
Lesbian	10 (18.5)
Gay	3 (5.6)
Bisexual	3 (5.6)
Transgender	38 (70.4)
Educational level of respondent	
Primary	7 (13.0)
Secondary	24 (44.4)
Higher	23 (42.6)
Educational level of father	
Illiterate	20 (37.0)
Primary	15 (27.8)
Secondary	17 (31.5)
Higher	2 (3.7)
Occupation	
Agriculture	5 (9.3)
Business	19 (35.2)
Foreign Employment	8 (14.8)
Government job	4 (7.4)
Private Office	18 (33.3)
Religion	

Hindu	50 (92.6)
Buddhism	4 (7.4)
Ethnicity	
Brahmin	4 (7.4)
Chhetri	11 (20.4)
Janajati	25 (46.3)
Newar	7 (13.0)
Dalit	7 (13.0)
Marital status	
Married	10 (18.5)
Unmarried	44 (81.5)
Perceived Satisfaction with marital life(married only)	
No	1 (10.0)
Yes	9 (90.0)
Year of sexual orientation identity revealed	
1-10	41 (75.9)
11-20	13 (24.1)

DISCUSSION

The primary purpose of this research was to assess the prevalence of depression in Lesbian, gay, bisexual, transgender, and queer of Pokhara. This study shows that 27.8% of the respondents had depression. This result has been found similar to a school-based study conducted among grade 9th-12th level students in Boston where among 1,032 students, 10% were LGBTQ where the prevalence of depression was 30%.⁷ Also in research published by PLOS One on March 13, 2013, a cross-sectional survey on HIV-related risk behavior was performed across Nepal through snowball sampling facilitated by non-governmental organizations, recruiting 339 MSM 61% were experiencing depression which contrasts my study.⁸

A structural diagnostic interview using the Brief Symptoms Inventory was taken in the community of Chicago among 246 homosexual youths of age 16-20 years. Among the selected participants, it was found that 15% of the participants were suffering or had major depression which also contrasts our study.⁹ In a cross-sectional study conducted in Shenyang, Liaoning Province of China, 290 Chinese transgender women were interviewed face-to-face with questionnaires that covered topics including the Zung Self-Rating Depression Scale (SDS), demographic characteristics, transition status, sex partnership, perceived transgender-related discrimination, the Multidimensional Scale of Perceived Social Support (MSPSS) and the adapted General Self-efficacy Scale (GSES). It reported a 45% prevalence of depression in transgender which contrasts our study as the prevalence of depression in transgender was 31.6%.¹⁰

Also, according to the Canadian Journal of Community Mental Health, the Trans PULSE project was conducted which was a community-based initiative that surveyed 433 participants using respondent-driven sampling on Ontario where 66.4% transgender were found to be depressed.¹¹

The possible reasons behind the differences between the findings of the study might be due to the development of coping mechanisms in the respondents. Other differences might be due to low sample size of our study. The limitation of our study was low sample size. Hesitation of respondents to answer the question was problematic.

CONCLUSIONS

About one-third of the respondents were found to be depressed. The prevalence of depression was found to be higher in transgender than in another gender. Counseling LGBTQ can help much as being of a different gender is by nature itself. Special emphasis, counseling program, interaction program can be conducted on transgender people. The study can be conducted on a large scale where respondents can open up without any hesitation.

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Not Applicable

CONFLICT OF INTEREST

None

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