

ISSUE BRIEF: Mental Health

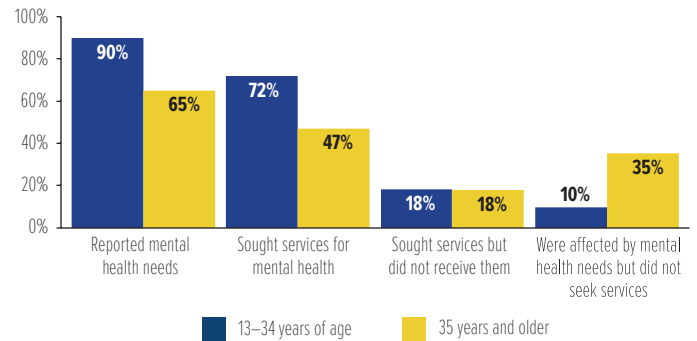
Mental health was the concern most LGBTQ+ people reported being affected by, 77% of the respondents. Although 69% of respondents sought and received services for mental health, a quarter (23%) did not seek services, even though they were affected by mental health issues. 7% sought mental health services but did not receive services, for which the most commonly cited reasons were a lack of mental health services available in the respondent's area (47%), followed by a lack of LGBTQ+

affirming providers (40%). Of all respondents, 42% of queer and pansexual respondents stated there were not enough health professionals who are adequately trained and competent to deliver health care to LGBTQ+ people, as well as 45% of multiracial, 39% Latinx or Hispanic, 36% high school incomplete, 36% non-white, 42% trans man, and 41% of genderqueer, gender non-conforming and nonbinary respondents.

Age and mental health needs

Mental health needs vary by different attributes of identity, but the difference comparing younger to older respondents is striking. Younger respondents, under 35 years of age (90%), reported higher needs for mental health services, while older respondents reported lower mental health needs (65%), with one third (35%) reporting no need for mental health services at all.

Mental health needs, last 12 months, by age at 35 years (n=2,295^{***})

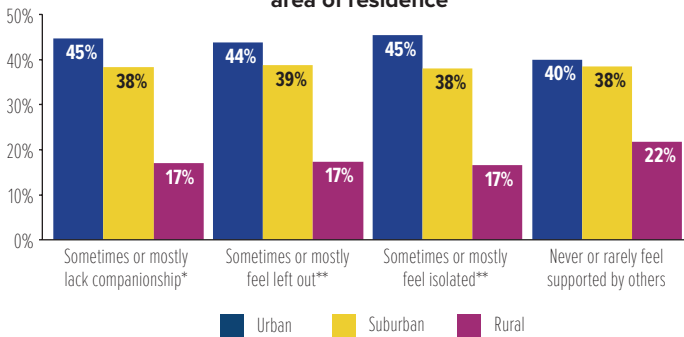


Education and mental health needs

Education was another factor related to disparities in who accessed and received mental healthcare. 16.5% of individuals with high school degree or equivalent sought care for mental health but did not receive care.

However, that percentage is cut in half at higher levels of education, with 8.4% of people with some college, associate degree or technical certification seeking care and not receiving it.

Social support and isolation, by urban/suburban/rural area of residence



Social support and isolation

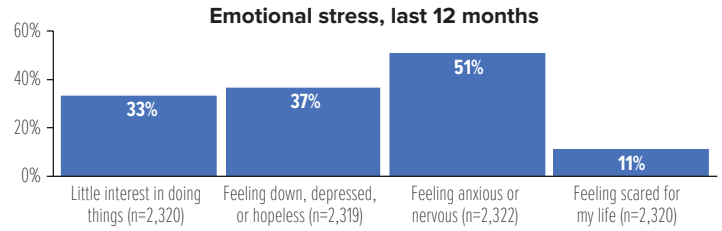
Respondents were asked about levels of social support and inclusion, which varied by respondents' residence in urban, suburban, and rural areas. Respondents in New York City and other urban areas reported that they sometimes, often, or mostly lack companionship, feel "left out" and feel isolated than respondents living in rural areas. Urban and suburban areas also reported feeling "never" or "rarely" supported by other at higher levels than in rural areas.

Note: Asterisks denote statistically significant difference from statewide percent, per t-test. * = $p < .05$; ** = $p < .01$; *** = $p < .001$

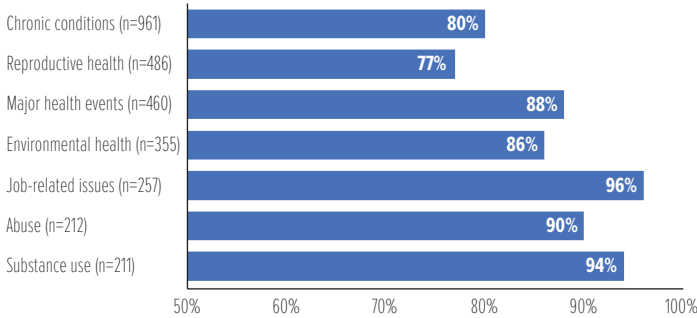
Note: Due to rounding of percentages, pie chart totals may add to 100%, +/- 1%.

Emotional stress

Respondents were asked about different sources of emotional stress. Half reported anxiety over half the time, while 37% reported depression, 33% a lack of motivation and 12% feeling “scared for their lives” over half the time.



Respondents with needs in specific areas who also reported being affected by mental health concerns



Co-occurring needs

Mental health needs were usually accompanied by other health and services needs. Between 77% and 96% of respondents who reported a need in any area also reported mental health concerns. For example, 80% of respondents who reported a chronic condition also reported mental health needs, 77% of those reporting reproductive health needs, 88% of those experiencing major health events, and so on as shown in the bar chart.

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Note: Due to rounding of percentages, pie chart totals may add to 100%, +/- 1%.