Mental Health Disparities and Interpersonal Relationship Dynamics of LGBT Young Adults: Challenges and Interventions

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Abstract
This study investigates the intersection of mental health disparities and interpersonal relationships among young adult LGBT individuals in five districts of West Bengal, India. 50 respondents, ranging in age from 19 to 30, from lower-middle to upper-middle socioeconomic levels, took part in qualitative interviews through the use of purposive sampling. Legal restrictions and heteronormativity remain major social obstacles that sexual and gender minorities must overcome in spite of recent legal changes.

The study looks at how internalized problems like homophobia, anxiety, depression, and low self-esteem. Results highlight the importance of inclusion of legal frameworks to improve mental health and create supportive networks among the LGBT population. The study emphasizes the intricate interactions that exist between public acceptance, legislative rights, and mental health. It also stresses the necessity of complete legal reforms and social acceptance programs. This research adds to the expanding body of evidence on LGBT health disparities by illuminating these processes and emphasizes the value of social support networks and inclusive policies in fostering mental health among sexual and gender minorities. The results call for a more complex understanding of the difficulties LGBT people encounter while navigating their identities and relationships in a society that frequently marginalizes them.

Key words
discrimination, interpersonal relationship, LGBT, mental health, qualitative research, same sex marriage

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I.   Introduction

Nature, that is *Prakriti* in Sanskrit, has classified individuals according to their sexualities and chosen gender. Stereotypes are used by society to justify prejudice. People who identify as third gender or who identify as sexually diverse have existed since the time of the Vedas (1500–500 BC). These people's positions have been in jeopardy ever since.

Relationship focus on interpersonal relationships, including friendships, couples, and marriages. It has internal and external resources that strengthen them and help people cope with stressors. Mental health is crucial for a fulfilling life, healthy relationships, and proper psychological processes. Research is growing on the mental health needs of sexual minorities and the causes of disparities, with implications for policies. Mental health influences stress management, interactions, and decision-making. Promoting, safeguarding, and restoring mental health is essential for the civilizations worldwide. Lesbian, homosexual, bisexual, and transgender individuals differ from "conventional" minorities in two ways: they may not always be identifiable by their outward appearance, and they are often seen acting beyond natural laws (Takács, 2015). These people experience a variety of socioeconomic and cultural violations, but they mostly believe that they are denied attention since heterosexuality is valued more highly than homosexuality (Takács, 2015). Understanding heteronormativity, the normalization of heterosexuality through social structures, practices, and institutions, is crucial for comprehending the challenges faced by the LGBTQIA+ community in contemporary society (Javaid, 2018). The inclusion of mental health in the Sustainable Development Goals has increased acknowledgment of mental health on a global scale in recent years. Suicide and depression are shown to be the two main causes of death. Despite progress and growth, stigma and discrimination towards individuals who suffer from mental illnesses still exist. They also have their rights infringed. Health groups are taking a number of actions to improve knowledge of mental health as well as lessen the stigmas attached to it. The problems of lesbian, gay, bisexual, transgender under the umbrella of 'queer' (that means 'strange' or 'odd') are very different from each other,

each one of them experienced the problems in various different ways. Though mental health issues can be common to some extent, the causes of those are distinct. Some people find comfort and benefits in their interpersonal connections. People, however, find it challenging and sometimes one of the most distressing stressors they experience on a daily basis to get along with others (Bolger et al., 1989). These people might notice that their behaviour tends to be either too hostile or overly quiet. Such interpersonal issues are frequently viewed as characteristics that might cause personal anguish and hinder a person from acting effectively in social situations (Horowitz et al., 2000). The study examines the impact of interpersonal troubles and mental health concerns on same-sex partners, highlighting the importance of understanding the characteristics that lead to adaptable, committed relationships among gay and lesbian couples, as there is limited research on this topic in politics. These presumptions frequently hold that homosexual relationships are "different" from heterosexual relations (Family Research Council, 2010). Research shows that same-sex romantic partnerships are comparable to heterosexual ones in terms of affective expressiveness, closeness, conflict, commitment, and general satisfaction (Blumstein et al., 1983; Kurdek, 1998, 2001, 2004). Some relationship satisfaction variables apply equally to both types of couples (Heller et al., 2004; Kurdek, 1997; Malouff et al., 2010). However, discrepancies exist between gay, lesbian, and heterosexual couples, which may limit the generalization of a specific theory or model to these groups (Kurdek, 2001). Gay and lesbian individuals rely more on their romantic relationships for social support (Bryant et al., 1994; Kurdek et al., 1987). According to some study, knowing gender roles is essential to comprehending the dynamics of love relationships (Gottman et al., 1998; Huston, 2000). Although there is individual variation, it is possible to envision gay male couples as having male socialisation experiences, lesbian couples as having female socialisation experiences, and heterosexual couples as having both male and female socialisation experiences. Homosexual and heterosexual couples (which are made up of diverse gender pairings) may differ from one other in some ways if such gender socializations are crucial for understanding specific dynamics of love partnerships (Gottman et al., 1998; Huston, 2000). In line with this theory, it has been proposed that lesbian dyads emphasize and value the significance of having equality in a relationship and being treated as equals more than other romantic couples because women tend to be socialized to define themselves in aspects of empathy, sensitivity, generosity, deference, and togetherness to others (Cross et al., 1997; Kurdek, 2001, 2007). Men, on the other hand, are more often trained to identify themselves in grounds of their own independent accomplishments (Cross et al., 1997). Because of this, even though most individuals desire relationship equality, it is more likely that lesbian dyads value relationship equality more than other romantic dyads do. This is supported by research showing that lesbian women are more likely than other couples to share household duties and are more likely than gay couples to describe having "absolutely equal" levels of authority in their relationships (Peplau et al., 1996). In conclusion, it is critical to understand how effectively models developed almost solely employing heterosexual participants generalize to homosexual and lesbian couples in addition to the fact that they are significant demographics. The current study investigates how LGBTQIA+ young adults' romantic interpersonal connections impact their mental health in order to achieve this.

Impactful LGBTQ+ Legal Transformations

Marriage rules significantly impact LGBTQ+ relationships, causing exclusion and inequity. Legal obstacles, societal beliefs, and spousal benefits can also affect financial security and emotional health. Inclusive marriage legislation and social acceptance are crucial for promoting equal and healthy partnerships in the community. Laws against sodomy, particularly targeting LGBTQ+ individuals, often lead to fear, stigma, and discrimination, negatively impacting their relationships as those sexual intimacy cannot be procreative or natural. These laws often create secretive environments, reducing trust and intimacy. The fear and guilt associated with legal consequences further perpetuate a culture of fear, hindering open communication essential for strong bonds. Sodomy laws undermine the mutual respect and support that are the cornerstones of healthy relationships by criminalizing their identities. In order to build a more accepting culture where LGBTQ+ people can establish and sustain relationships without fear of prejudice, these restrictions must be repealed. This will allow for the development of stronger, more supportive, and transparent partnerships.

Over the past ten years, India's legal environment for transgender rights has changed dramatically because to a number of important rulings and legislative initiatives. The Delhi High Court set the stage for future gains in LGBTQ+ rights in 2009 with its innovative ruling decriminalizing consenting homosexual conduct. However, the Supreme Court's 2013 ruling, which reinstated Section 377 of the Indian Penal Code and made same-sex relationships illegal, momentarily stopped this momentum.

The Supreme Court's NALSA ruling in 2014, which recognised transgender persons as a third gender and upheld their fundamental rights, marked a major turning point. The Rights of Transgender Persons Bill was introduced in 2014 in response to this historic ruling, with the goal of providing the transgender population with comprehensive rights and welfare measures.

A historic judgment decriminalizing consensual same-sex relationships under Section 377 of the Indian Penal Code—a legislation from the colonial era—was rendered by the Supreme Court of India in 2018. An important turning point in the struggle for LGBTQ+ equality and rights in India was this verdict. Since its introduction in 1861, Section 377 has been used to stigmatise and persecute LGBTQ+ people, casting an aura of illegitimacy over their lives and relationships. The unanimous verdict of the Indian Supreme Court upholds the values of equality, decency, and privacy while acknowledging that the legislation violates fundamental rights and continues to discriminate against the LGBTQ+ population (figure 1). The Supreme Court's legalization of consensual same-sex partnerships marked a significant societal shift towards LGBTQ+ rights, promoting greater advocacy and support for a more inclusive society.
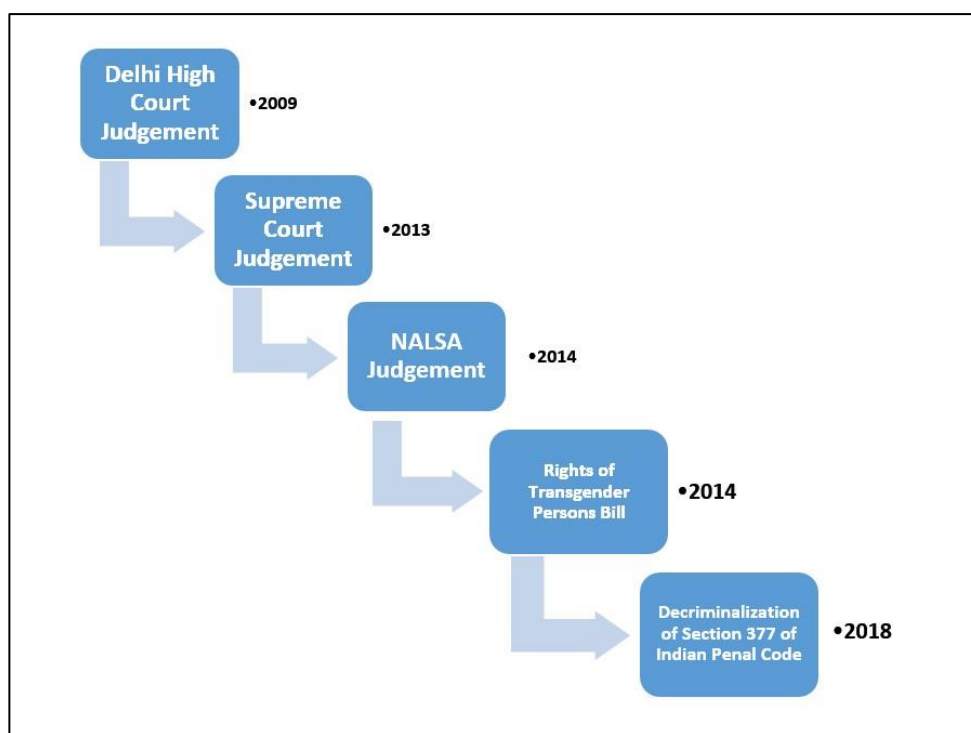

Figure 1: Legal transformation of decriminalizing consensual same-sex relationship

Objectives

The study demonstrates how LGBT couples maintain their interpersonal relationships or how they perceive it. Given that LGBT people are not currently eligible for marriage in India, it is crucial to observe how legal issues involving benefits, allowances, divorce, child custody, and dating violence are handled. It will be examined to see if their lack of legal protections and recognition is having an impact on their decisions, which may then lead to stress or other types of mental health issues.

II. Methodology

The current study's objective is to examine the mental wellbeing of young adults who are identified as LGBT. It tries to examine individual struggles and issues with mental health connected to their sexualities. In this study, the role of internalized issues such as homophobia, self-esteem, wellbeing, depression, anxiety, and detrimental effects on mental health are being investigated. This study focuses on the problems and mental health of the LGBT population relating to interpersonal relationships. Given the multidisciplinary character of the inquiry, a qualitative study based on interviews has been selected as the technique. The questionnaire utilized in this study is unstructured and follows feminist methodology. The goal is to choose pertinent questions and themes for the conversation; these open-ended questions make it easier to deal with any ad hoc inquiries that may arise. In feminism research, it's critical to build non-hierarchical rapport with participants so they feel comfortable voicing their concerns without fear of retaliation. The informal character of interviews makes it easier to build trusting relationships with participants and has given me insight into their varying points of view. The replies were gathered by personal interviews. Therefore, building a strong connection with the respondents over the phone took some time to get to know them. Once they were convinced, direct interviews with open-ended questions were then started. As a consequence, two to three participants from each district might be questioned within this brief period. Because respondents frequently opted to voice their dissatisfaction with society and their families, the conversation could be conducted in great detail.

- **Study Area**

The present study was conducted in the five most developed districts, namely Kolkata (22.5726° N, 88.3639° E), Howrah (22.5958° N, 88.2636° E), Hooghly (22.9012° N, 88.3899° E), South 24 Pargana (22.1352° N, 88.4016° E), and North 24 Parganas (22.6168° N, 88.4029° E) of West Bengal in India (figure 2). These five districts are well-known in the area for their economic impact, cultural legacy, and historical significance. It's crucial to note that every district in West Bengal might have a distinct degree of development, even if some of the more developed urban and semi-urban districts include Kolkata, Howrah, Hooghly, and parts of South and North 24 Parganas. Within these districts, there could be highly developed sections and areas that continue to struggle with socioeconomic issues.
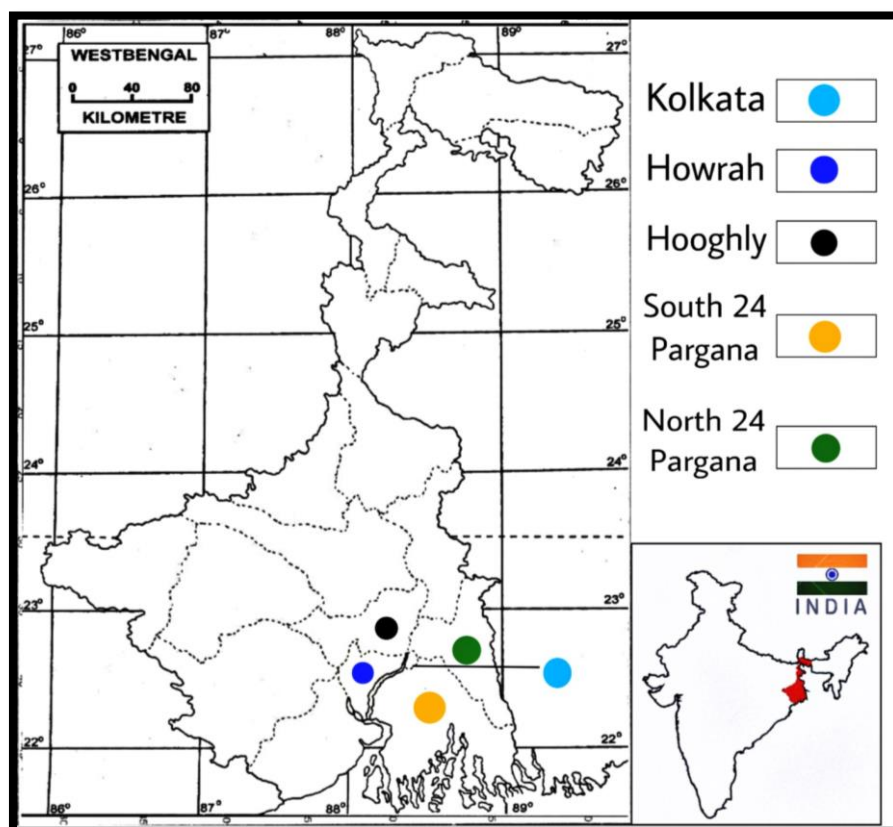

Figure 2: Study Areas - Five districts of West Bengal in India

- **Design**

The current inquiry was determined to be appropriate for the qualitative research design. On the other hand, the subsequent research hypotheses were constructed in line with the objectives of the study. The researcher was really interested in learning more about the difficulties and mental health concerns. But her small-town environment did not deter her from looking into such divisive issues that have an impact on the entire family and society. The researcher could also empathise with patience as well as care because she is a woman. Although the sample size seems small, it is justified by the accessibility and suitability of the individuals studied, including caretakers. All the participants were meticulously observed and interviewed. It was difficult to grab people's attention and get information out of them.

- **Sampling and Inclusion Criteria**

The present investigation aimed to study the mental health problems and challenges faced by LGBT young adults. Participants are chosen consciously by the researcher. This purposive sampling targets specific criteria and has been done with 50 respondents of LGBT persons, with the age ranging from 19 to 30 years from lower-middle socio-economic class to upper-middle socio-economic class.

To reflect a purposeful, homogenous sampling, the participants must meet the following criteria:

▪ Individuals must be residents of these five districts of Kolkata, Howrah, Hooghly, South 24 Pargana, and North 24 Pargana in West Bengal in India
▪ Individuals must identify as under LGBT

- Individuals must be between 19 to 30 years old
- Individuals must have disclosed their sexual orientation and gender preference

If these representative participants do not meet the expected criteria mentioned earlier, are excluded them from the study.

III. Result

LGBT Young Adult Population and Issues for Interpersonal Relationship

It is not hard to assume that difficulties with sexuality might be tied to numerous issues, both mental and physical, given that sexual connections among the LGBT young population were considered as abnormal and even illegal in the past (and, in many areas of the world, the present). Figure 3 depicts the statistical burdens that lesbian, gay, bisexual, transgender women, and transgender men bear when it comes to all the issues (which are analyzed below) like family acceptance, social acceptance, intimate partner violence, identity confusion issues, and issues for not legalizing same-sex marriage.

1.   Issues for not legalizing Same Sex Marriage

The struggle for marital equity is being waged for a number of very pragmatic reasons in addition to upholding the ideals of equality and non-discrimination. Long-term homosexual relationships are not afforded the same rights and advantages as heterosexual spouses. They do not receive some advantages of marriage since same sex marriage is not allowed because certain benefits do not apply to unmarried couples. These include tax advantages, estate-planning advantages, social security, medical security, and disability benefits for spouses, as well as work, family, housing, and even death advantages.

LGBT interpersonal relationships may be significantly impacted by the prohibition of same-sex marriage in a number of ways. Legal recognition: LGBT couples risk losing important legal protections and advantages if their marriage is not recognized as legal proof of their relationship. These cover rights to inheritance, the ability to choose one's medical treatment, spouse benefits, and child custody. Stress and worry can arise from relationships that are unstable and vulnerable due to the lack of these legal protections.

LGBT people may feel stigmatised and invalidated as a result of same-sex partnerships not having legal status. It conveys the idea that society does not regard or respect their relationships, which can have a detrimental effect on one's sense of self and level of relationship satisfaction.

The prohibition of same-sex unions could fuel social stigmas against LGBT people and their partnerships, increasing the risk of rejection from family and friends. LGBT couples may experience rejection or exclusion from friends, family, and communities, which can strain relationships and lead to feelings of alienation and loneliness.

For LGBT couples, the lack of legal recognition for same-sex partnerships can present practical and financial difficulties. They could have trouble getting access to joint bank accounts, getting their spouses health insurance, finding housing, and getting other benefits that are available to married couples. These difficulties may increase tension in the partnership and jeopardize its stability.

Same-sex marriage is illegal, which can have a negative emotional impact on LGBT people and their partners. Feelings of disappointment, annoyance, and rage over not having the same rights and benefits as heterosexual couples might be evoked. These unpleasant feelings have the potential to damage a relationship over time and weaken intimacy and trust.

In general, the well-being and stability of LGBT interpersonal relationships may be significantly impacted by the prohibition of same-sex marriage. In addition to being an issue of equality and justice, the legal recognition of same-sex relationships through marriage is essential for upholding the legal and societal dignity and worth of LGBT people and their relationships.

One issue in relations for LGBT young adults is the absence of legal acceptance of same-sex marriages. When a relationship ends, as it did for one responder who left a violent spouse after two and a half years of living together, it can be traumatic.

"It is much simpler to obtain a loan if you are married since the repayments will only be dependent on one income rather than two." (P46, Personal Interview)

Since same-sex marriage is not permitted in this nation, the majority of respondents who are in a partnership or wish to be in one, consider remaining together moving abroad.

"We are in a live-in relationship now and want to stay in U.S [...]" (P24, Personal Interview)

"Yes. I think about marriage a lot, and it hurts that the only way I can get married is to run off to a first world country where same sex marriage has been legalized for years." (P49, Personal Interview)

" [...] However, not being treated equally as citizens and the central government consistently rejecting issues involving the right to marriage for same-sex couples can greatly demotivate a queer person, causing them to either leave the nation to find a more agreeable one or go into a melancholy state." (P16, Personal Interview)

Overall, lesbians, transgender men and transgender women are the groups most concerned about the problems associated with the not-legalizing of same-sex marriage, none among them had denied to stand for legalizing it. Gays (90%) and bisexuals (70%) reveal notable but marginally less worry in this issue.

2. Issues of Interpersonal Relationship in Private Spheres

LGBT young adults' interpersonal relationships encounter unique difficulties in private and familial settings, which are frequently made worse by homophobia and transphobia. Rejection from family and lack of support are the main problems, which can cause a great deal of emotional and psychological suffering. Strained relationships with parents and siblings who may have bias ideas are common experiences for those in same-sex partnerships. Rejection can take many forms, such as being shunned at family get-togethers, losing inheritance, or facing pressure to alter their gender identity or sexual orientation. Isolation can also result from homophobia and transphobia, since some couples may feel forced to conceal their relationship in order to escape prejudice or hostility. The couple may experience relationship pressure and lose their support system as a result of this secrecy.

Furthermore, relationships and self-esteem can be negatively impacted by internalized homophobia and transphobia, which can result in arguments and mental health issues.

"I've heard of an instance when a homosexual man was mistreated by his own father because of his sexual orientation. He assaulted him and bullied him." (P22, Personal Interview)

A transgender woman responder believed it to be a violation of human rights that, as things were, she could not marry either a man or a woman.

Many people talked about marriage and civil partnerships. Many of them were merely contextualizing respondents' personal situations, such as stating that they had formerly been in an opposite-sex relationship before recognizing as LGBT, or that they were now in a civil union or same-sex marriage. The majority of these comments alluded to the legalization of same-sex marriage. Discussions varied from the optimism of legalization, albeit with the continuous disclaimer that there was still a "far way to go," to what they saw to be the continuance of heteronormative preconceptions about marriage, as well as the obstacles experienced by trans individuals in getting married.

"[...]But it would be wonderful if I could just be myself instead of continuously walking on eggshells, worried about my family finding out or getting imprisoned in public just for holding my partner's hand. I should not be required to conceal my identity because it has no bearing on anybody else, despite what some claim. It should not be necessary to battle so hard for just a basic human right. And I should be allowed to marry my partner if I so want." (P12, Personal Interview)

Overall, with an evaluation near to 100, transgender women (90%) and Lesbians (90%) experience the highest level of difficulties with family acceptance. Transgender men (85%) also experience significant challenges with family acceptance. Compared to other groups, Gay (80%) and bisexuals (70%) experience somewhat lower but still considerable levels of family acceptance challenges.

3. Issues in Interpersonal Relationship in Public Spheres

The prevalence of cultural prejudices like homophobia and transphobia poses considerable problems for LGBT individuals in their interpersonal relationships in public spaces. Fear or hatred directed towards homosexuals and transgender people, respectively, can take many different forms, ranging from subtle acts of aggressiveness to overt acts of violence. The hostile atmosphere these attitudes foster makes it difficult for LGBT people to live freely and securely.

"[...] once someone stopped me as I was holding my boyfriend's hand and started shouting at us in front of everyone ... in that shopping mall [...]" (P40, Personal Interview)

When using public services, the existence of a same-sex spouse may also be questioned; one respondent admitted that she had to conceal her relationship. Otherwise, they risk being mocked and called rude and homophobic names.

"I am deeply saddened that I am a 'marryless' person, unable to marry either a woman or a guy.... In my circumstance, the right to marry does not exist." (P31, Personal Interview)

Being with a same-sex partner in public and displaying casual concern and love to them are grounds for harassment and sometimes even violation.

"If you go in somewhere with your partner, they give weird looks and smirk. This is very uncomfortable... very much." (P36, Personal Interview)

Overall, Significant challenges with societal acceptance are faced by all groups, but transgender men (90%) and women (90%) are most affected. Though marginally less than transgender people, gay (85%) and lesbian (80%) people also report substantial quantities. Among the categories, bisexuals (70%) have the least problems than others with social acceptance.

4. Intimate partner violence

Regardless of sexual orientation or gender identity, any kind of behavior used by one partner to maintain power and control over another is referred to as 'Intimate Partner Violence' (IPV) in LGBT relationships. IPV can take many different forms, such as abuse that is sexual, emotional, physical, or psychological. Any physical abuse can range from slight bruises to significant bodily harm. Examples of physical abuse include beating or using objects as weapons. Sexual abuse can involve the exploitation of gender identity or sexual orientation as tactics of control, as well as non-consensual sexual acts like rape or coercion. A partner's self-esteem is targeted for destruction by verbal insults, threats, intimidation, and controlling actions such as isolating oneself from friends and family in emotional and psychological abuse.

"[...] isn't verbally abuse a crime? What about the days I was losing my self-esteem gradually? ..." (P41, Personal Interview)

Controlling a partner's financial resources, such as by ruining job possibilities or withholding money, is known as financial abuse. In addition, abusers may monitor their partners' activities and limit their autonomy through strategies like isolation and coercive control, which makes it challenging for victims to get assistance. Intersecting forms of oppression like homophobia, transphobia, racism, ableism, or sexism can also have an impact on IPV in LGBT relationships, posing extra obstacles for victims seeking legal protection or support services.

It is important to understand that IPV can happen in any kind of relationship and that LGBT people may experience particular difficulties in getting support because they are unaware of services or are afraid of being discriminated against.

Transgender women and bisexual people may face an even higher rate of intimate relationship violence than gay or lesbian people. Within intimate relationship violence, transgender victims are more likely to face threats or bullying, harassment, and physical assault. Some respondents reported experiencing different sorts of abuse in partnerships when one spouse is transgender, including:

"He physically tortured me brutally one day. [...] I broke the relationship" (P1, Personal Interview)

Some respondents also reported experiencing 'identity confusion.' One interviewee revealed that she was dating a bisexual woman. Her partner, however, was confused regarding her sexual orientation and abruptly ended their relationship one day. Her behavioural approach deteriorated as a result of that mental dilemma, and she used to humiliate my respondent by losing her temper as well as for mental distress.

"She (her partner) was very confused if she is a bisexual or lesbian. [...] she was in distress. I wanted to calm her down but in vain. [...] she used to beat me. [...] lastly she left. [...] (P44, Personal Interview)

Overall, the majority of reports of interpersonal relationship abuse are from bisexuals (70%), and transgender women (70%). Though not to the same extent as them, lesbians (60%) and gay (50%) experience significant rates of violence against intimate partners. The least number of intimate relationship violence reports come from transgender men (20%).

4.   Identity Confusion Issues

LGBT people who struggle with identity uncertainty can have a significant negative influence on their relationships with others and on their mental health. Feelings of loneliness, worry, and low self-esteem are commonly the results of this confusion, which is frequently caused by external pressures from society and internal conflicts regarding one's gender identity or sexual orientation.

"...I don't know who I am. It irritates me.... They made me thinking that I am none." (P6, Personal Interview)

These people may have trouble communicating and establishing trust in relationships because they worry about being misunderstood or rejected by friends, family, and partners. For example, it can be difficult for someone who is not entirely at ease or accepting with who they are to communicate their wants and desires honestly, which can lead to strained level relationships.

"A communication gap is there between us. I feel she is not fine with me... But at first I have to know myself..." (P4, Personal Interview)

Moreover, these problems may be made worse by society's lack of acceptance and understanding of LGBT people, which makes it harder for them to locate supporting groups or role models. Another important factor may be internalized homophobia or transphobia, in which case the person may have taken in unfavourable views from society and developed self-doubt and a low sense of value.

"If I don't know myself still now, how I can cope up with other vital jobs in my life...." (P27, Personal Interview)

In relationships, this internal struggle may show out as ambivalence or inconsistency, with the person alternating between pushing people away and pursuing connection. Furthermore, coming out to significant others is a lifelong process that can recur with anxiety and tension, possibly creating a vicious cycle of self-revelation and self-sabotage that can be emotionally taxing and tiring.

Overall, bisexuals (80%) are the people who face this issue the most. Gays (70%), transgender men (60%) and transgender women (60%) are on an average stage. Lesbians are 40% in this sector. Everyone are facing this issue on a different basis on their own.

5. Issues of Reproduction and Parenting

Different LGBT persons experience reproduction and parenting issues differently; lesbian, gay, bisexual, transgender men and transgender women face particular difficulties. Lesbian couples encounter social stigma, legal obstacles in obtaining parental rights, and a reliance on Assisted Reproductive Technologies (ART) such as Intrauterine Insemination (IUI) or In Vitro Fertilization (IVF).

"We would love to have kids someday. We cannot reproduce, but same sex couples opt for surrogacy, or adoption. Lesbian couples can also opt for artificial insemination."(P19, Personal Interview)

Typically, gay couples use adoption or surrogacy, which can be expensive and legally complex. They also face discrimination from society and the law. While bisexual people in heterosexual partnerships may face less obstacles but still experience stigma associated with their sexual orientation, bisexual people in same-sex relationships confront reproductive challenges similar to those faced by gay and lesbian couples. Although they can procreate, transgender males who keep their reproductive organs must deal with decisions about hormone therapy, major obstacles to healthcare, and discrimination. In order to have future biological children, transgender women may utilize sperm banking prior to transition; nevertheless, they may encounter difficulties getting access to reproductive treatments, obtaining legal parental rights, and overcoming discrimination in medical settings.

"Reproduction is not the supreme way to prove my femininity, right? […]" (P42, Personal Interview)

In the dearth of gender inequality between spouses or partners, same-sex couples raising children provide an opportunity to evaluate how parents divide labour. When same-sex couples do not have access to marriage, distinctions between same-sex and different-sex couples become more complicated. Decisions about employment and labour division among same-sex couples may be directly related to their inability to marry if, for example, access to health insurance for each other or their children is reliant on both partners working, because spousal benefits are not available. However, there is indication that same-sex couples intentionally prefer more egalitarian divisions of labour in order to reject traditional male/female roles in parenting.

Some of the survey participants who are in a relationship want to have and raise children. There is no convincing evidence that children brought up by single parents or gays and lesbians are victimised or disadvantaged solely because of this fact. Irrespective of marital status or sexual orientation, all applications for assisted reproductive technologies should be treated equally.

"I wanna be a single mother. I'll adopt. That's all." (P47, Personal Interview)

Overall, transgender men (90%) and transgender women (90%) frequently experience the most serious problems with parenting and reproduction. This is a result of the complicated issues surrounding hormone therapy, gender dysphoria, access to quality treatment, and substantial legal barriers. In addition, compared to their cisgender lesbian (60%), gay (60%), and bisexual (40%) people, they often experience greater levels of societal prejudice and stigma, both in healthcare settings and in larger social situations.
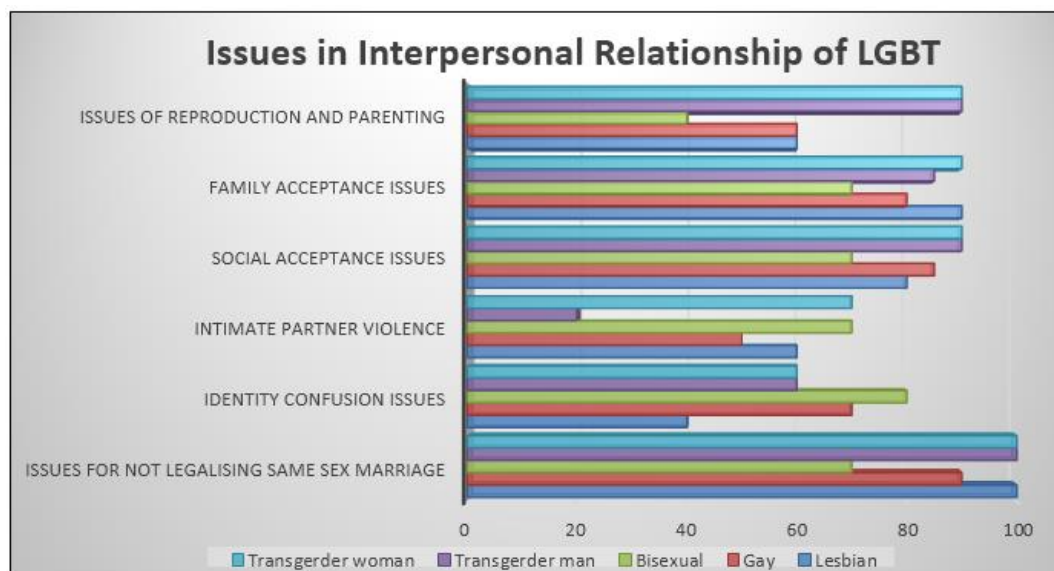

Figure 3: Issues in Interpersonal Relationships of LGBT

Mental Health Issues due to the Challenges in Interpersonal Relationships

The majority of respondents experienced difficulties in interpersonal relationships, which had a negative impact on their mental health.

- Depression

Using the HDRS (also known as the Ham-D), the most popular depression assessment scale, an assessment of 5 groups of 50 participants had been done. It contains 17 items (HDRS17) pertaining to symptoms of depression experienced over the past week (Hamilton. M.,1960). With the assessment of HDRS17, bisexual (14%), lesbian (16%), and gay (15%) are generally accepted to be within the normal range (or in clinical remission), while transgender men (27%) and transgender women (28%) (indicating at least moderate severity, scoring 20 or higher) are usually required for clinical remedy (figure 4). Respondents became depressed as a result of their constant battles with issues, violations, and humiliation. They became depressed as a result of their family's rejection of their same-sex relationship and public humiliation.

"I know the difference between sadness and depression. Yes I was in depression then. I went to a psychiatrist, took sleeping pills…. horrible days." (P14, Personal Interview)
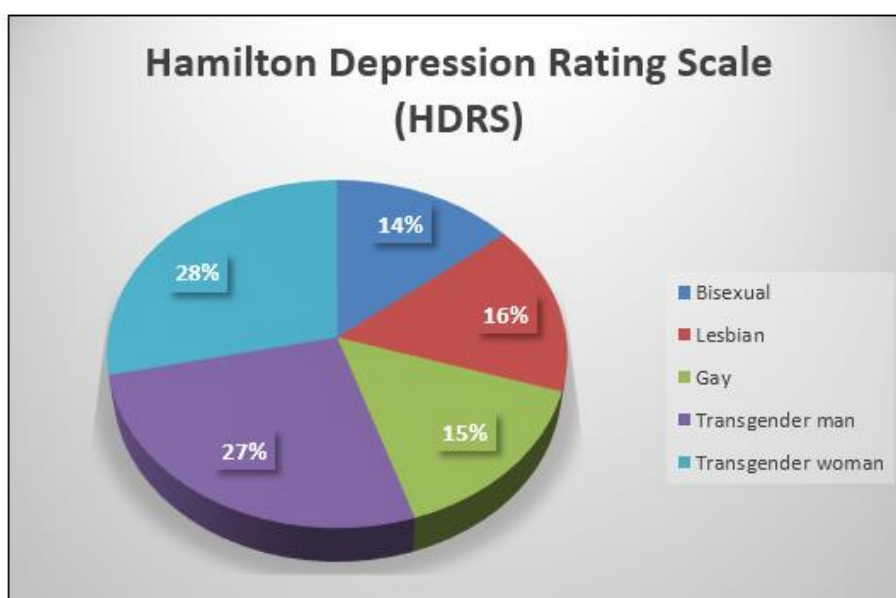

Figure 4: Depression rate due to the Challenges in Interpersonal Relationships

- Anger

Using the Novaco Anger Scale, the most popular anger assessment scale, an assessment of 5 groups of 50 participants had been done. It contains 25 items pertaining to symptoms of anger experienced over the past week (Browne, C., & Smith, I. C., 2018). With the assessment of NAS, the average score of transgender women (91.2%) denotes that they are plagued by frequent intense furious reactions that do not quickly disappear. They probably harbor negative feelings long after the initial insult has passed. They may experience frequent tensions headaches and elevated blood pressure. Their anger may often get out of control and lead to impulsive hostile outbursts, which at times get them into trouble (scoring 86 – 100). Transgender men (79.5%) possess an average score between 76 – 85 which denotes their frequent reaction in an angry way to life's many frustrations. They are substantially more irritable than the average persons. Bisexuals (63.8%) respond to life's annoyances with an average amount of anger scoring between 56-75. Lesbians (51.6%) and gays (51.1%) are substantially more peaceful than the average person (scoring 46-55) (figure 5). The majority of respondents developed an anger problem. They became frustrated as they attempted to converse with others. This can be extremely detrimental to partnerships and to them.

"[…] I used to get angry, misbehave with my parents and friends." (P33, Personal Interview)
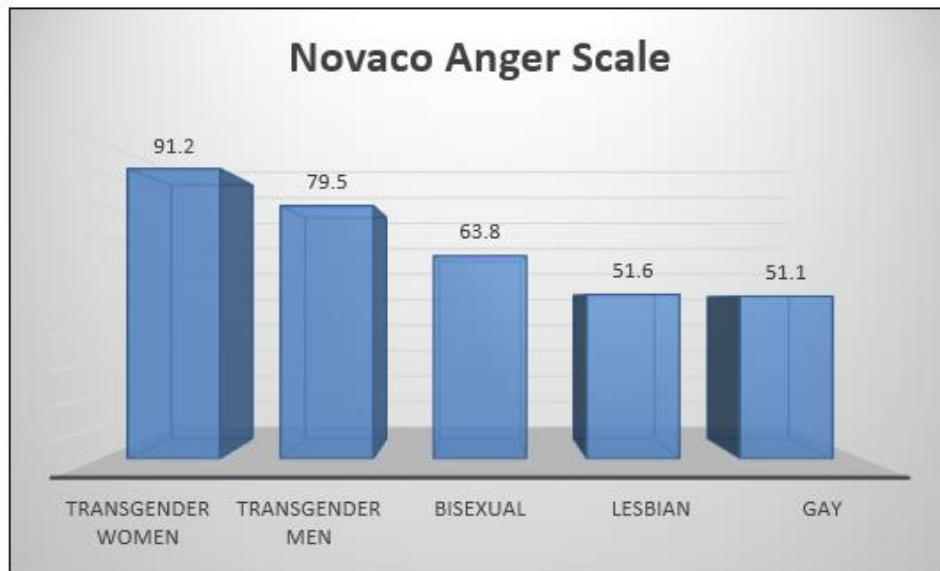
Novaco Anger Scale

Figure 5: Rate of Anger due to the Challenges in Interpersonal Relationship

- Lack of self-esteem and confidence

LGBT participants (n=50) were interviewed using the Rosenberg Self-Esteem Scale (Rosenberg, M., 1979). The results show that 70.04% of participants had average self-esteem (scores between 15 and 25), 29.96% had low self-esteem (below 15), and none of the participants reported good self-esteem (above 25). Particularly, transgender males (14.7) and women (12.2) obtained the lowest average scores, suggesting a high incidence of poor self-esteem in these groups. On the other hand, lesbian (19.7), homosexual (22.3), and bisexual (20.9) people obtained the average self-esteem scores. Comparing transgender young adults to lesbian, gay, and bisexual individuals, this study reveals that transgender young adults face considerable issues with self-esteem (figure 6). Participants who had suffered because of relationships felt a lack of confidence, as if they were not decent enough to be involved in a relationship or were somehow different from other people. They may be reluctant to interact with friends, family, colleagues, or loved ones. Besides that, the non-legalization of Same Sex Marriage reduces one's confidence in the future of a relationship. Sometimes both partners are unable to reach an agreement.

"My partner told me to go out with our buddies. But I didn't. […] I avoided parties, night out, socializing."
(P35, Personal Interview)

Participants	Low self-esteem (Below 15)	Average self-esteem (15-25)	High self-esteem (Above 25)
Lesbian (n=10)		19.7	
Gay (n=10)		22.3	
Bisexual (n=10)		20.9	
Transgender man (n=10)	14.7		
Transgender woman (n=10)	12.2		
% Total	29.96%	70.04%	0

Figure 6: Rosenberg Self-Esteem Scale for measuring self-esteem and confidence of LGBT participants

- Suicidal tendency

The Columbia-Suicide Severity Rating Scale (C-SSRS) assessed the severity of suicidal ideation of LGBT participants (Posner et al., 2008). In this study with 10 participants each group (lesbian, gay, bisexual, transgender men, and transgender women), the scale indicated variety of levels of suicidal issues. Lesbians (n=10) possess a moderate severity score of 7.2, while gays (n=10) and bisexuals (n=10) had slightly higher scores of 8.6 and 8.7, respectively. In particular, transgender persons had shown the scores of highest severity. Transgender men (n=10) score 16.9 and transgender women (n=10) 19, which indicate very high severity. This data pointed up the significant mental health challenges faced by transgender persons compared to lesbian, gay, and bisexual individuals (figure 7). The suffering respondents found it difficult to demonstrate themselves, both verbally and nonverbally. They may have felt frustrated because they were frequently misunderstood. They

developed a tendency of suicide, resulting in more conflicts and thoughts of distance from others, and brutal steps for themselves.

"There is no purpose of living [...]. I want to quit, you know."(P28, Personal Interview)

Participants	No Suicidal Ideation (0)	Low Severity (1-4)	Moderate Severity (5-9)	High Severity (10-14)	Very High Severity (15-25)
Lesbian (n=10)			7.2		
Gay (n=10)			8.6		
Bisexual (n=10)			8.7		
Transgender man (n=10)					16.9
Transgender woman (n=10)					19

Figure 7: Columbia-Suicide Severity Rating Scale (C-SSRS) for measuring suicide severity of LGBT participants

- Loneliness

Analyzing the scores from UCLA Loneliness Scale, the transgender women scored the highest with 25% while transgender men was 23%. Lesbians had 18%. The percentage of bisexuals and gays was 17%. This distribution demonstrates the range of loneliness is high among the transgender persons (figure 8). After the breakup of their relationships or throughout the period of conflict, the majority of respondents started to feel isolated and lonely. Partners may feel unaccepted, unattached, unloving which result in loneliness. They may be experiencing a void throughout their lives.

"I felt that everything had been ruined. None is there for me [...]" (P38, Personal Interview)
"[...] talking to others was like a hard job to me. It's hard but good to be alone." (P11, Personal Interview)
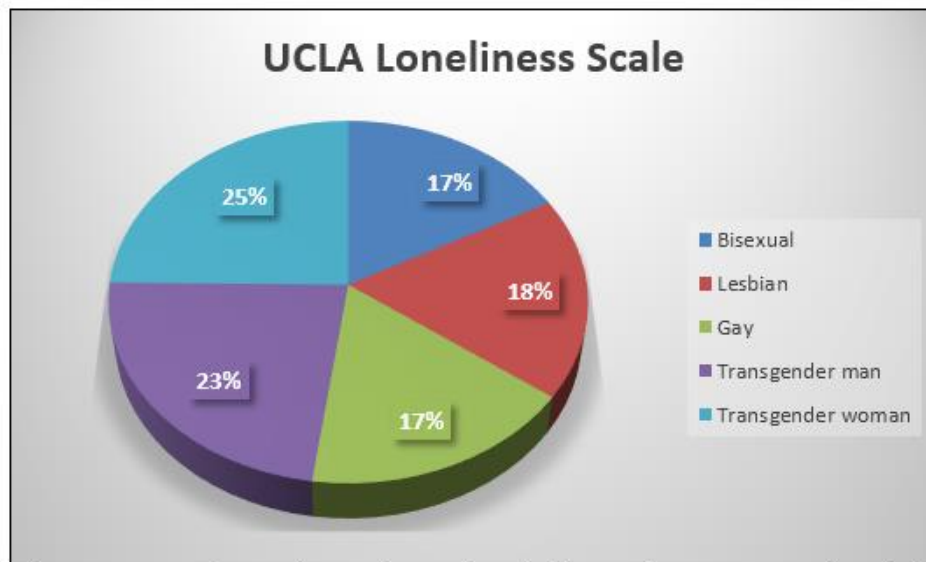

Figure 8: Rate of Loneliness due to the Challenges in Interpersonal Relationship

IV. Discussion

LGBT young adults face several challenges in their interpersonal relationships. They are usually not accepted by their families for their same-sex relationships, and they may even face violations from their spouses for a variety of reasons. Identity confusion, in particular, is a major source of relationship breakdown. Domestic as well as intimate partner violence are not uncommon. Furthermore, they face harassment in public places when they are associated with their same sex partners. Moreover, the patriarchal society highlights the gender roles of men and women, the general concepts of marriage and reproduction. For that reason, lesbian, gay, bisexual, and transgender persons cannot live their lives freely and fully.

From this research it has been clearly shown that transgender individuals (both women and men) consistently have severe issues across all categories of interpersonal relationship. Gay individuals have high level of intimate partner violence and issues related to the non-legalization of same-sex marriage. Lesbians have fewer issues in some categories compared to other groups but still face notable challenges. Bisexual individuals generally report lower levels of issues across most categories but still encounter significant challenges, particularly in social acceptance and family acceptance. Same-sex marriage is in high demand among LGBT youth. Same-sex marriage can provide appropriate government services and impose financial obligations on people in committed same-sex relationships that are equivalent to those imposed in opposite-sex marriages, as well as legal protections such as inheritance and hospital visiting rights. However, same-sex marriage is currently illegal in India. As a result, it is a hindrance to their free and proper exercise of human rights.

Much of the political and legal debate over same-sex marriage over the last decade has focused on these couples' worthiness as parents, as well as social scientists have really been asked to evaluate. Gary Gates comes to the point that same-sex couples are just as good as different-sex couples at parenting after carefully analyzing the research presented by scholars on the both sides of the issue. Any differences in the well-being of children raised in same-sex as well as different-sex families can be stated not by the gender composition of their parents, but by the fact that children raised by same-sex couples have experienced more family instability on average, because most children raised by same-sex couples were raised to different-sex parents, one of whom is now in a same-sex relationship.

According to Lasser and Tharinger (2000), stigma has a negative impact on their lives and leads to a variety of mental health issues such as depression and distress, which can result in suicide attempts, violations towards others, or abusive behavioural approaches. It exacerbates feeling of isolation, which can lead to a variety of problems. It is difficult for these young people to feel healthy because they are surrounded by people who regard them as detestable and unnatural. Their lives are full of difficulties and challenges; these people must work diligently to achieve academic success (Ginsberg, 1998). Sometimes they are unhappy in school or college and find it difficult to concentrate on their studies because of the stress and confusion regarding their sexuality. Not only heterosexuals, but also LGBT youths, use alcohol as well as other drugs to cope with life's challenges and problems. According to Poureslami, and Easton (1995), LGBTQIA+ youth consume 50% more alcohol than heterosexuals. Some LGBT people leave their homes because of their sexual orientation, while others are compelled to leave. Unfortunately, some LGBT persons commit suicide thinking to end their many problems. According to Healy (2001), 40% of LGBTQIA+ people attempted suicide, compared to 10% of heterosexuals. Some may adjust well and receive social assistance, whereas others hope for a transformation in the attitude of the people and culture around them. The current study sought to improve the mental health of LGBT youths.

Our society and our culture must provide a safe, stable, and positive environment for all LGBT people so they are able to live normal and healthy lives. Society needs to be more widely educated and understanding towards them, and they must gain a better knowledge of their situation. In recent times, our society has witnessed a dramatic increase in the number of LGBT youth who has overcome the fear of coming out and recognized their true selves. Aside from mental and physical health issues, they have begun to focus on other pertinent issues such as gays in the military, same-sex marriages, adoption, and child upbringing by LGBT people. Awareness of these issues has had a profound impact on the lives of them and has strengthened their ability to confront them head on.

V. Conclusion

Affirming and supportive relationships are pivotal for LGBT persons to overcome their challenges. A strong feeling of identity and general well-being can be fostered by the acceptance and understanding of their loved ones. For LGBT individuals to overcome identity uncertainty and strengthen their relationships with one another, it can be extremely helpful to have access to counselling, support groups, and other mental health resources. By nurturing an environment of acceptance and education, society may reduce the stigma and ignorance around LGBT identities. Eventually, this will enable them to have more fulfilling, safe and sincere interpersonal relationships. These findings show a link between interpersonal relations and mental health issues of LGBT youth. Parental involvement was linked to a wait before dating, whereas peer attachment was linked to relationship length. Peer as well as parental attachment were both found to be significantly related to mental health outcomes. Furthermore, the findings suggest that universal mental health may play an important role in indirect trajectories that connect peer as well as parental attachment security with basic partner relationship quality in a way that is consistent with attachment theory. Discrimination and stereotypical mindset of the patriarchal society are the major reasons of the mental health issues of LGBT youths which should be shunned. Reproduction, adoption and upbringing of a child by LGBT people are another relevant issues which should be taken care of and need of more research. Government is requested to legalize Same Sex Marriage. There are new opportunities for family research which will guide society to a new perspective of equality.

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